

# FY 2025 Adopted Budget Multnomah County, OR

## Volume 3:

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

Adopted by

Multnomah County Board of  
Commissioners  
Jessica Vega Pederson, Chair  
June 2024

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## Introduction

The budget is structured around the County's ten distinct operating departments, as well as a "Nondepartmental" grouping. This volume contains sections that are separated by department and contain the following information: a summary narrative portion followed by division narratives, with relevant program offers grouped by division. The narrative portions include department and division overviews; the department's mission, vision, and values; a section on diversity, equity, and inclusion; a budget overview; and relevant tables and graphics, including a list of all programs.

## Understanding Program Offers

A program offer is a public policy document that combines information such as program descriptions, budget overviews, and performance data for a set of services. All County functions – from operating programs to the General Fund contingency account – request funding from the Board through a program offer.

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 referenced in this document, go to the department's section in Volume 2 or 3; the program offers are listed in numerical order within each division.

## 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 that 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

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.

### *Executive Summary & Description*

The 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 expected to be delivered for the current fiscal year), 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 common types of measures are 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).

Other types of measures departments may use include 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 table 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. The table also provides costs on the prior fiscal year's Adopted budget for comparison.

### *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 minor 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 six groups:

### *Administration*

Department or division level management and related expenses (e.g. office space, supplies, telephones, etc.). Direct program supervision is not considered administration.

### *Capital*

Programs that fund improvements and construction of County-owned buildings, roads, bridges, and major information technology systems.

### *Internal Service*

Programs that focus on services provided by one County department to support another, including: information technology and telecommunications, facilities and property management, fleet and motor pool, distribution, and records management.

### *Operating*

Programs that represent a set of services provided to the community. Includes the direct supervision and management of the program.

### *Restoration Request*

Request to restore a cut that was made to meet the General Fund target allocation (i.e. the amount of General Fund that the department used when preparing its budget submissions).

### *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 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 below).

### *Program Offer Characteristics*

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

**New Request** - Activities that the County currently does not do. This includes requests for expansions of service that would significantly change the size or scope of an existing program.

**Backfill State/Federal/Grant** - Backfill is defined as discretionary dollars (General Fund) applied to a program that was previously funded by a grant or funding from State, Federal, or local governments. This could occur when grant funding goes away entirely and the department proposes continuing the program with General Fund or when only a portion of the grant goes away and the department proposes continuing the program at the same level by supplementing with General Fund dollars.

**One-Time-Only Request** - A one-time-only (OTO) request seeks funding for one budget year or a finite project in a dedicated fund. Examples include funding for capital projects, piloting a program, or ramping down services. If a funding request is adopted using OTO funds, projects/initiatives are expected to be completed in a single budget cycle except for projects with a known end date that may span more than one year (such as capital projects).

**Measure 5 Education** - 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. Scaling program offers by creating separate program offers for different levels of service provides transparency and allows decision makers to choose a particular level of service. Scaled program offers typically:

- Budget for large facilities, such as jails.
- Specify when the General Fund backfills other funds.
- Expand services beyond the current service level.
- Request restoration of General Fund for reductions made to meet the General Fund target allocation.



- Request one-time-only resources related to an ongoing program offer.
- Provide levels of services for a program. For example, an alcohol and drug treatment program may be able to offer 100, 150, or 175 beds.
  - 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") represents 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.

## Online Resources

The FY 2025 Adopted Budget Dashboard provides an interactive, visual representation of County budget data, which can be filtered by department, division, program offer, fund, and various characteristics (such as program offer type or ongoing/one-time-only). A link to the dashboard is available at [www.multco.us/budget](http://www.multco.us/budget).

Individual program offers can also be found on the Budget Office website at [www.multco.us/budget/fy-2025-program-offers](http://www.multco.us/budget/fy-2025-program-offers).

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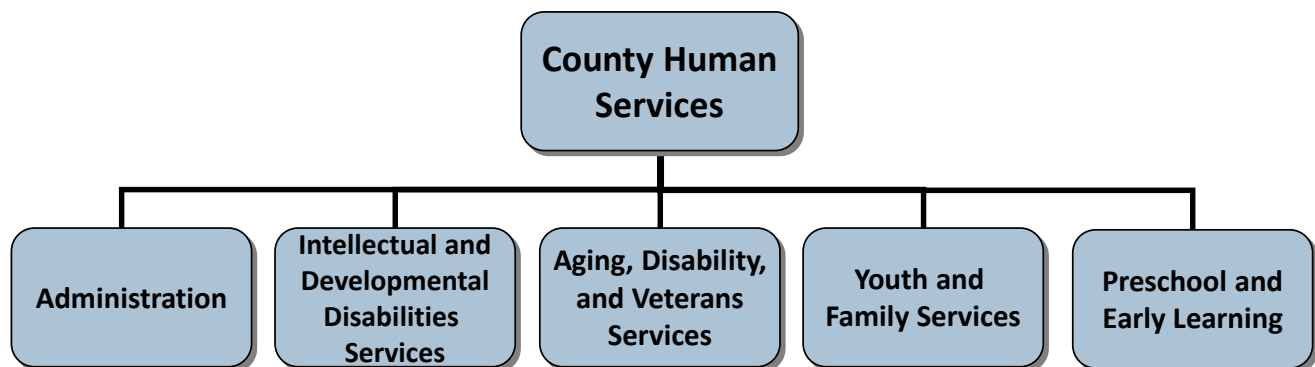
### Department Overview

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 year-round, and that their families are in stable housing.
- **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.



# \$837.8 million

## Total Adopted Budget

Includes cash transfers, contingencies, and unappropriated balances.

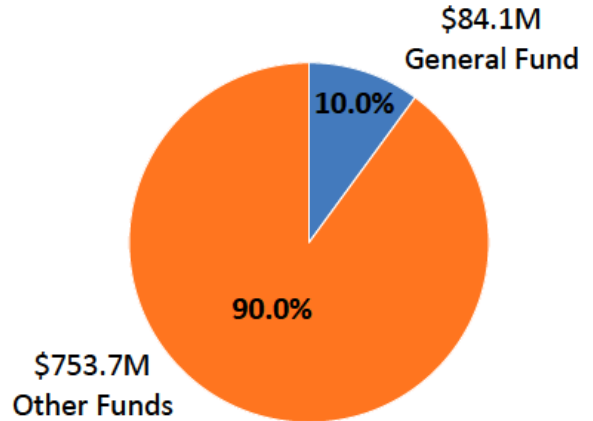
### 990.00 FTE

Total Adopted Staffing



**(13.72) FTE**

Decrease from  
FY 2024 Adopted



### \$218.3 million

All Funds Increase from  
FY 2024 Adopted



**35% increase**

General Fund  
**\$12.3 million**  
 New **One-Time-Only** Programs

**\$0.3 million**  
 New **Ongoing** Programs

### Operating Budget by Category - \$371.8 million

Does not include cash transfers, contingencies, and unappropriated balances



The department's total budget is its legal budget, totaling \$837.8 million in FY 2025. The County is required by Oregon Budget Law to report the budget at this level, although doing it this way overstates what we actually plan to spend on programming because it includes unappropriated balances, contingencies, and cash transfers from one fund to another. Program offers reflect the total budget.

This budget document will often focus on the operating budget (a subset of the total budget) because that number avoids some double counting and provides a clearer picture of what the department expects to spend in a year. The operating budget excludes unappropriated balances, contingencies, and cash transfers. The table below shows the amounts that add up to the department's total budget.

<b>FY 2025 County Human Services Budget</b>	
<b>Operating Budget</b>	<b>371,844,534</b>
Contingency (All Funds)	16,300,000
Internal Cash Transfers	0
Reserves (Unappropriated Balances)	<u>449,662,827</u>
<b>Total Budget</b>	<b>\$837,801,361</b>

## Mission, Vision, and Values

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 has several key priorities for FY 2025 and beyond:

- 1. Equity and Racial Justice.** DCHS strives to incorporate Racial Justice & Equity into all of our work.
- 2. 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.
- 3. 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.
- 4. Eviction Prevention:** This includes Rent Assistance and related services to prevent eviction and homelessness.
- 5. 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.
- 6. 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. This includes reinventing our department to provide responsive services in a new environment where telework is the norm.
- 7. Contracting process improvements (in collaboration with the Chief Operating Officer):** This includes improving the Request for Programmatic Qualifications (RFPQ) process for large Request for Proposals (RFPs) by using dedicated project managers, and coordinating department-wide Quality Assurance within DCHS contracts.
- 8. 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.
- 9. Emergency Management:** Responding to climate crises and coordinating mass shelter during emergencies.

## 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 ensure that equity is permeated throughout all levels of the department. We strive to ensure that clients and staff have access to resources that meet their specific needs and ensure that all people at every stage of life have equitable opportunities to thrive and achieve optimal health and wholeness. Further, we also strive to ensure that barriers are removed so that individuals have full access to services and resources that are vital for so many ethnic and diverse communities to thrive and flourish. To accomplish this, DCHS has consistently embraced and implemented the County's Equity and Empowerment Lens to ensure that we address the critical issues that require a decision and we remain intentionally inclusive of the people we serve, their place in the community, the various positions of power that impact decisions, and the process for how decisions are determined.

### Equity for DCHS Consumers:

DCHS strives to incorporate equity into all of the department's programs and services via the equity and empowerment lens. For example, over 79 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 and culturally responsive organizations. 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 ethnic and diverse communities.

### 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 DCHS Diversity, Equity, and Social Justice Committee (DESJC) is a robust diversity committee that remains vigilant and committed to advocating for the DEI needs of the department. The DESJC has completed work on a Two-Year Strategic Plan and will engage in the next steps of implementation. 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 continues to work in partnership with each division initiative for the WESP. The team also engages with each division by providing training, technical assistance, and consultations.
- **Restorative healing initiative:** The Equity team has implemented the department-wide microaggression tool that allows all employees to inform the department about microaggressions combined with a restorative healing focus. We are confident that this tool will encourage the restoration of relationships where possible through a restorative healing initiative aimed at resolving issues pertaining to microaggressions. We believe this work of addressing microaggressions is critical for safety, trust, and belonging as well as healing and relationships for all employees.
- **DEI Temperature checks - IDDDSD:** The DCHS Equity Team engaged in focus groups with all staff in the Intellectual and Developmental Disabilities Services Division (IDDDSD) to understand how staff imbed and implement DEI into their daily work and what resources staff may need to implement DEI into their daily work.



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

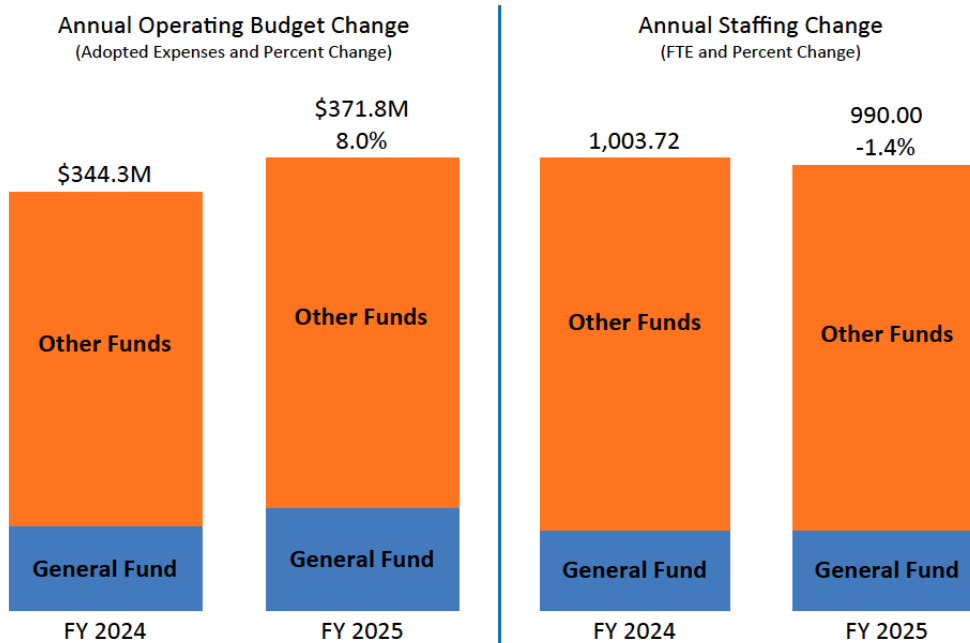
### Equity in the DCHS budget process:

DCHS centered racial justice and equity in the FY 2025 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 Overview

The FY 2025 Department of County Human Services (DCHS) Adopted operating budget is \$371.8 million and 990.00 FTE. The County General Fund accounts for \$84.1 million or 22.6% of the total. Other Funds include Federal/State at \$178.1 million (47.9%), Preschool for All at \$97.6 million (26.3%), Supportive Housing Services at \$9.7 million (2.6%), and COVID-19 Response at \$2.4 million (0.6%).



Most of the DCHS budget comes from nearly 100 Federal, State and local sources. This includes \$178.1 million in the Federal/State Fund, which increased by \$1.5 million (0.8%) from the FY 2024 Adopted budget. Significant changes in the Federal/State Fund include:

- Increase of \$6.3 million and 5.00 FTE across multiple programs in the Intellectual and Developmental Disabilities Services Division (IDDDSD). This is all funding from the State Mental Health Grant (SMHG) and includes funding for eligibility and licensing, case management, and abuse investigations.
- Eliminating the Regional Health and Human Services Contact Center (HHSCC) (25032B-24) at \$1.3 million and 12.50 FTE. In FY 2024 the HHSCC was funded with one-time-only funding from Care Oregon. The HHSCC connects community members with culturally-responsive emergency and public health information and service connections. This program began during and in response to COVID-19.
- Decrease in YFS - Energy Assistance (25119) at \$4.5 million and 4.08 FTE. The decrease is due to a drop in Low Income Home Energy Assistance (LIHEAP) funding. This reduction brings the amount back down to pre-COVID-19 pandemic levels. The number of households served will drop from 30,000 to 19,000.

In the General Fund, the Multnomah Idea Lab (MIL) is eliminated in FY 2025 (25000) at \$1.4 million and 8.00 FTE. Created in 2015, the MIL seeks policy and innovation solutions within the human service sector. This reduction was made in order to maintain key client facing programs.

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 2025 will be the third year of preschool seats, and will grow to over 2,000 seats. The budget totals \$563.6 million and 43.00 FTE in the PEL Division. Of this amount, \$449.7 million is unappropriated balance and \$16.3 million is contingency, leaving a balance of \$97.6 million for direct programming in DCHS’s budget. The direct programming amount increased by \$18.6 million (23.6%) and 6.00 FTE, compared to the FY 2024 budget at \$79.0 million and 37.00 FTE.

The COVID-19 Response Fund, which includes American Rescue Plan (ARP) funding, decreases by \$16.8 million and 20.00 FTE from FY 2024 as the funding is sunsetting. Emergency Rent Assistance (25133B) has that largest amount of this funding in FY 2025 at \$2.0 million. Overall there is \$5.6 million and 8.50 FTE included in the FY 2025 budget for Emergency Rent Assistance in both General Fund (\$3.6 million) and ARP (\$2.0 million).

New in FY 2025, both the \$9.7 million and 20.50 FTE funded by Supportive Housing Services (SHS) will be reflected in the DCHS budget. In prior fiscal years only the SHS-funded FTE were reflected in the DCHS budget and the revenue and expense amounts were budgeted in the Joint Office of Homeless Services (JOHS). In DCHS, SHS funds programs including eviction prevention, short and long term rent assistance, housing placement, retention case management, and outreach.

The following table shows the new ongoing and one-time-only programs. This table, along with information on DCHS reductions and reallocations for FY 2025, can be found in the Overview of Additions, Reductions, and Reallocations section of the Budget Director’s Message in Volume 1. In addition, the Budget Director’s Message contains a list of one-time-only programs for all departments.

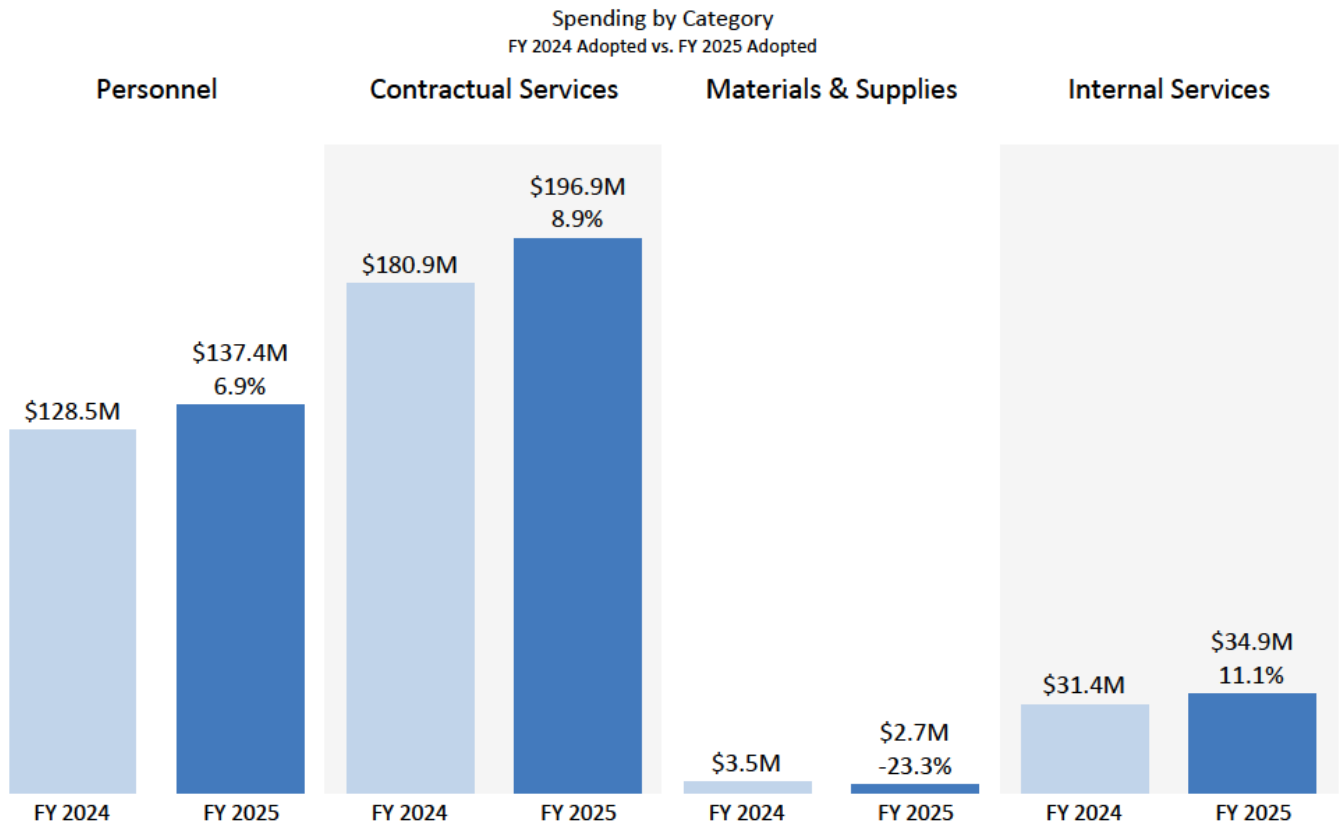
### *New Ongoing and One-Time-Only Programs*

Prog. #	Program Offer Name	General Fund		
		Ongoing	OTO	FTE
<b>County Human Services</b>				
25003	Newcomer Support Services Pilot		1,267,000	
25047B	YFS - Domestic Violence Services to Highly Vulnerable Survivors	236,655		1.00
25121B	YFS - Climate Resilience		152,948	1.00
25121C	YFS - Cooling Kits for Summertime		50,000	
25131D	YFS - Record and Fee Expungement Program (Project Reset)		325,000	
25131E	YFS - Eviction Prevention: In Courtroom Support		330,000	
25133B	YFS - Emergency Rent Assistance		3,643,160	8.50
25133C	YFS - Eviction Prevention		3,308,738	6.00
25146	YFS - SUN Community Schools: Family Resource Navigators		3,000,000	
25147B	YFS - Food Security / Pantry Enhancement		180,000	
25156B	YFS - Bienestar Social Services Expansion	61,843		0.40
<b>County Human Services Total</b>		<b>\$298,498</b>	<b>\$12,256,846</b>	<b>16.90</b>

# County Human Services

## FY 2025 Adopted Budget

The chart below provides a breakdown of the budget's expense categories from FY 2024 to FY 2025. Contractual Services is the largest component of the DCHS budget, while Internal Services grew the most between FY 2024 and FY 2025. The chart is followed by the Operating Budget Trends table, which details the changes.



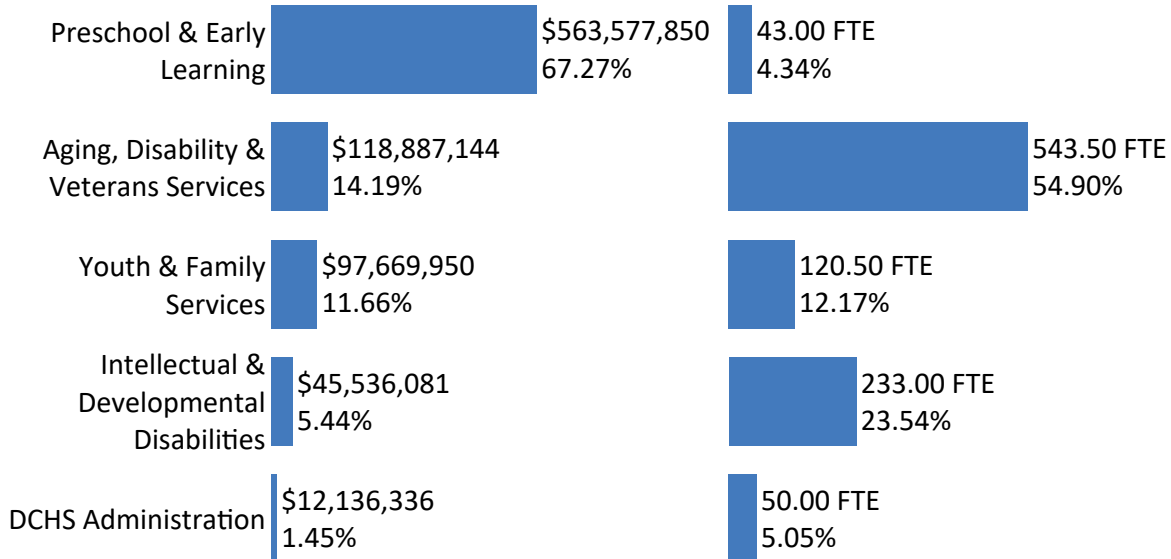
Operating Budget Trends	FY 2023	FY 2024	FY 2024	FY 2025	Difference
	Actual	Current Estimate	Adopted Budget	Adopted Budget	
Staffing FTE	980.85	1,006.72	1,003.72	990.00	(13.72)
Personnel Services	111,175,554	122,229,840	128,456,610	137,372,424	8,915,814
Contractual Services	142,882,803	165,946,086	180,902,381	196,918,832	16,016,451
Materials & Supplies	2,939,021	3,077,593	3,512,746	2,695,131	(817,615)
Internal Services	29,984,635	30,591,981	31,382,288	34,858,147	3,475,859
Capital Outlay	56,303	0	0	0	0
<b>Total Costs</b>	<b>\$287,038,316</b>	<b>\$321,845,500</b>	<b>\$344,254,025</b>	<b>\$371,844,534</b>	<b>\$27,590,509</b>

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

### Budget by Division

Division Name	General Fund	Other Funds	Total Division Cost	Total FTE
Administration	11,949,260	187,076	12,136,336	50.00
Intellectual and Developmental Disabilities Services	4,821,123	40,714,958	45,536,081	233.00
Aging, Disability, and Veterans Services	15,405,142	103,482,002	118,887,144	543.50
Youth and Family Services	51,900,563	45,769,387	97,669,950	120.50
Preschool and Early Learning	0	563,577,850	563,577,850	43.00
<b>Total County Human Services</b>	<b>\$84,076,088</b>	<b>\$753,731,273</b>	<b>\$837,807,361</b>	<b>990.00</b>

*Includes cash transfers, contingencies and unappropriated balances*



*This chart does not include cash transfers, contingencies or unappropriated balances*

### Table of All Program Offers

The following table shows the programs by division that make up the department's total budget. The individual programs follow, grouped by division.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Administration</b>						
25000	DCHS Director's Office		3,495,519	187,076	3,682,595	14.00
25001	DCHS Human Resources		2,090,835	0	2,090,835	10.00
25002	DCHS Business Services		5,095,906	0	5,095,906	26.00
25003	Newcomer Support Services Pilot	X	<u>1,267,000</u>	<u>0</u>	<u>1,267,000</u>	<u>0.00</u>
	<b>Total Administration</b>		<b>\$11,949,260</b>	<b>\$187,076</b>	<b>\$12,136,336</b>	<b>50.00</b>
<b>Intellectual and Developmental Disabilities Services</b>						
25010	IDDS Administration & Support		1,217,243	4,462,511	5,679,754	31.00
25011	IDDS Budget and Operations Support		626,111	7,405,466	8,031,577	38.00
25011B	IDDS Emergency Response Kits	X	0	1,473,531	1,473,531	0.00
25012	IDDS Services for Adults		1,501,672	9,721,234	11,222,906	62.00
25013	IDDS Services for Children and Young Adults		1,459,566	9,615,832	11,075,398	62.00
25014	IDDS Abuse Investigations		3,571	5,137,547	5,141,118	26.00
25016	IDDS Eligibility & Intake Services		<u>12,960</u>	<u>2,898,837</u>	<u>2,911,797</u>	<u>14.00</u>
	<b>Total IDDS</b>		<b>\$4,821,123</b>	<b>\$40,714,958</b>	<b>\$45,536,081</b>	<b>233.00</b>
<b>Aging, Disability, and Veterans Services</b>						
25022	ADVSD Adult Care Home Program		280,420	6,414,862	6,695,282	32.00
25023	ADVSD Long Term Services & Supports (Medicaid)		3,445,725	49,517,431	52,963,156	313.00
25024	ADVSD Adult Protective Services		1,302,355	10,525,145	11,827,500	57.35
25025	ADVSD Veterans Services		682,783	666,261	1,349,044	9.00
25026	ADVSD Public Guardian/Conservator		1,960,333	0	1,960,333	11.00
25027	ADVSD Administration		1,099,564	3,305,995	4,405,559	16.00
25028	ADVSD Multi-Disciplinary Team		942,432	966,452	1,908,884	5.65
25029A	ADVSD Transition & Diversion		594,886	5,898,436	6,493,322	34.00
25029B	ADVSD Transition & Diversion - Supportive Housing Services		0	1,066,706	1,066,706	6.00
25032	ADVSD Outreach, Information & Referral		1,817,004	3,244,661	5,061,665	21.65
25033	ADVSD Nutrition Program		23,052	2,838,252	2,861,304	0.00
25034	ADVSD Health Promotion		104,041	628,491	732,532	3.00
25035	ADVSD Case Management & In-Home Services (non-Medicaid)		1,452,414	11,788,948	13,241,362	13.10

# County Human Services

## FY 2025 Adopted Budget

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
25036	ADVSD Safety Net Program		728,140	171,966	900,106	2.00
25037	ADVSD Transportation Services		163,639	2,026,618	2,190,257	0.00
25038	ADVSD Advocacy & Community Program Operations		647,908	3,934,578	4,582,486	18.25
25039	ADVSD Family Caregiver Program		160,446	487,200	647,646	1.50
	<b>Total Aging, Disability, and Veterans Services</b>		<b>\$15,405,142</b>	<b>\$103,482,002</b>	<b>\$118,887,144</b>	<b>543.50</b>
<b>Youth and Family Services</b>						
25041	YFS - Domestic Violence Crisis Services		467,800	0	467,800	0.00
25044	YFS - Domestic and Sexual Violence Coordination		791,884	75,600	867,484	4.00
25046	YFS - Domestic Violence Legal Services		221,355	35,000	256,355	0.00
25047A	YFS - Domestic Violence Crisis Response Unit		1,344,731	343,583	1,688,314	11.00
25047B	YFS - Domestic Violence Services to Highly Vulnerable Survivors		236,655	0	236,655	1.00
25048	YFS - Culturally Specific and Underserved Domestic & Sexual Violence Services		864,826	0	864,826	0.00
25049	YFS - Sexual Assault Services		893,624	0	893,624	1.00
25050A	YFS - Gateway Center		788,465	1,102,807	1,891,272	6.00
25050B	YFS - Domestic Violence Housing Support - Supportive Housing Services	X	0	733,631	733,631	2.00
25118	YFS - Youth & Family Services Administration		2,631,589	177,476	2,809,065	14.00
25119	YFS - Energy Assistance		0	11,975,403	11,975,403	7.50
25121A	YFS - Weatherization		0	7,925,065	7,925,065	12.50
25121B	YFS - Climate Resilience	X	152,948	0	152,948	1.00
25121C	YFS - Cooling Kits for Summertime	X	50,000	0	50,000	0.00
25130	YFS - Family Unification Program		648,440	300,000	948,440	0.00
25131A	YFS - Legal Services & Supports		491,246	0	491,246	0.00
25131B	YFS - Peer Navigators		621,261	0	621,261	0.00
25131C	YFS - Eviction Prevention Support		446,256	0	446,256	0.00
25131D	YFS - Record and Fee Expungement Program (Project Reset)	X	325,000	0	325,000	0.00
25131E	YFS - Eviction Prevention: In Courtroom Support	X	330,000	250,000	580,000	0.00
25133A	YFS - Housing Stabilization for Vulnerable Populations (HSVP)		1,439,218	3,737,764	5,176,982	2.00
25133B	YFS - Emergency Rent Assistance	X	3,643,160	2,000,000	5,643,160	8.50
25133C	YFS - Eviction Prevention	X	3,308,738	1,798,107	5,106,845	6.00

# County Human Services

## FY 2025 Adopted Budget

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
25134	YFS - Fair Housing Testing in East Multnomah County		125,110	0	125,110	0.00
25135	YFS - Sex Trafficked Youth Services		1,041,761	0	1,041,761	0.00
25136	YFS - Culturally Specific Navigation Services for Immigrant Families		301,335	0	301,335	0.00
25137	YFS - Successful Families		2,840,983	0	2,840,983	1.00
25138	YFS - Youth Stability & Homelessness Prevention Services		1,457,757	110,000	1,567,757	0.00
25139A	YFS - Multnomah Stability Initiative (MSI)		3,292,411	1,167,557	4,459,968	2.00
25139B	YFS - Multnomah Stability Initiative (MSI) - Supportive Housing Services		0	4,779,560	4,779,560	1.00
25140	YFS - Community Development in East Multnomah County		155,627	430,000	585,627	1.00
25141	YFS - Supplemental Nutrition Assistance Program (SNAP) Outreach		161,921	163,043	324,964	2.00
25145	YFS - SUN Community Schools		8,995,153	2,678,362	11,673,515	4.00
25146	YFS - SUN Community Schools: Family Resource Navigators	X	3,000,000	0	3,000,000	0.00
25147A	YFS - Child & Family Hunger Relief		528,738	0	528,738	1.00
25147B	YFS - Food Security / Pantry Enhancement	X	180,000	0	180,000	0.00
25149	YFS - SUN Youth Advocacy Program		3,016,884	100,000	3,116,884	0.00
25151	YFS - SUN Parent & Child Development Services		1,898,759	412,935	2,311,694	0.50
25152	YFS - Early Learning Family Engagement and Kindergarten Transition		424,251	1,036,120	1,460,371	1.00
25155	YFS - Sexual & Gender Minority Youth Services		375,521	0	375,521	0.00
25156A	YFS - Bienestar Social Services		2,386,697	4,225,592	6,612,289	19.60
25156B	YFS - Bienestar Social Services Expansion		61,843	0	61,843	0.40
25160	YFS - Data and Evaluation Services		<u>1,958,616</u>	<u>211,782</u>	<u>2,170,398</u>	<u>10.50</u>
<b>Total Youth and Family Services</b>			<b>\$51,900,563</b>	<b>\$45,769,387</b>	<b>\$97,669,950</b>	<b>120.50</b>
<b>Preschool and Early Learning</b>						
25200A	PEL - Administration & System Support		0	1,651,282	1,651,282	5.00
25200B	PEL - Contingency and Reserves	X	0	40,750,000	40,750,000	0.00
25200C	PEL - Dedicated Savings	X	0	425,212,827	425,212,827	0.00
25201	PEL - Program Development & System Support		0	7,440,909	7,440,909	38.00
25202	PEL - Preschool Access: Family & Provider Navigation		0	1,460,000	1,460,000	0.00



# County Human Services

## FY 2025 Adopted Budget

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
25203	PEL - Preschool Infrastructure Capacity Building		0	17,800,000	17,800,000	0.00
25204	PEL - Program Quality: Coaching & Provider Supports		0	8,414,000	8,414,000	0.00
25205	PEL - Preschool for All Pilot Sites		0	47,814,596	47,814,596	0.00
25206	PEL - Early Educator Workforce Development		0	7,000,000	7,000,000	0.00
25207	PEL - Preschool for All Infant Toddler Stabilization		0	6,034,236	6,034,236	0.00
<b>Total Preschool and Early Learning</b>			<b>\$0</b>	<b>\$563,577,850</b>	<b>\$563,577,850</b>	<b>43.00</b>
<b>Total County Human Services<sup>1</sup></b>			<b>\$84,076,088</b>	<b>\$753,731,273</b>	<b>\$837,807,361</b>	<b>990.00</b>

<sup>1</sup> Includes cash transfers, contingencies, and unappropriated balances.

### Administration

Department Administration provides executive leadership and strategic vision for the Department of County Human Services (DCHS). The Director’s Office works with elected leaders, stakeholders, system partners, community members and staff to ensure 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 DCHS staff 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. DCHS also plays an important role in Supportive Housing Services (SHS) funded programs within DCHS as well as emergency management by responding to climate crises / severe weather and coordinating mass shelter during emergencies under the department’s Emergency Support Function #6 (ESF-6) designation which includes Mass Care and Human Services.

# \$12.1 million

### Administration

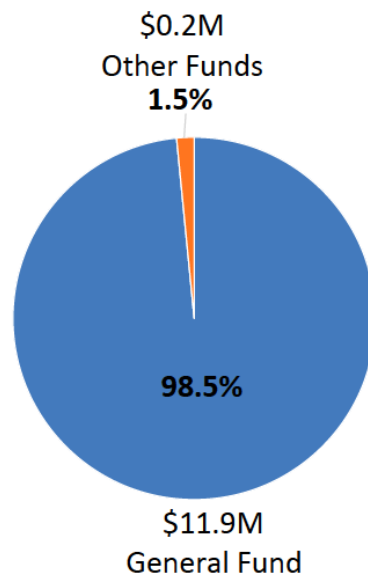
Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.



## 50.00 FTE

(full time equivalent)



### Significant Division Changes

**Eliminating the Multnomah Idea Lab:** Reductions in the Director’s Office were primarily the elimination of the Multnomah Idea Lab (MIL), (within 25000) and includes eight positions. This will impact the department’s capacity to pilot innovative programs, strategic planning, and department wide data and metrics. However, key client facing programs were able to be maintained because of this, as well as minimum administrative support to the director.

**Newcomer Support Services Pilot:** The See No Stranger project served up to 300 households from a variety of countries who were previously living at the Portland airport, primarily due to lack of legal status. The Oregon Department of Human Services (DHS) opened the Hugo Hotel (aka Welcome Center) to temporarily house these households. Multnomah County was tasked with the transition of residents into housing, due to the closure of the Hugo in December 2023. This program runs through June 2024. The Newcomer Support Services Pilot will allow for emergency housing support for individuals and families who have newly arrived in this country while they await connection to other resources.

**Severe Weather Response:** DCHS is the Emergency Support Function (ESF)#6- Mass Care Lead for Multnomah County. There have been changes in the support structure for severe weather shelters as well as an increase in need which impacts staffing, recruitment, facilities and ground support. In FY 2025 DCHS will be focused on recruitment and scaffolding a community volunteer program.

**DCHS Culture Guidebook:** The DCHS Culture Guidebook will be a tool for DCHS to use to share the type of workplace staff want and the steps necessary to move forward to create that vision together. In service to the Culture Guidebook, the Multnomah Idea Lab surveyed DCHS staff to gather feedback. The project is led by DCHS Human Resources.

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Administration</b>						
25000	DCHS Director's Office		3,495,519	187,076	3,682,595	14.00
25001	DCHS Human Resources		2,090,835	0	2,090,835	10.00
25002	DCHS Business Services		5,095,906	0	5,095,906	26.00
25003	Newcomer Support Services Pilot	X	<u>1,267,000</u>	<u>0</u>	<u>1,267,000</u>	<u>0.00</u>
	<b>Total Administration</b>		<b>\$11,949,260</b>	<b>\$187,076</b>	<b>\$12,136,336</b>	<b>50.00</b>

**Department:** County Human Services

**Program Contact:** Mohammad Bader

**Program Offer Type:** Administration

**Program Offer Stage:** Adopted

**Related Programs:**
**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) ensuring DCHS meets its financial and regulatory requirements through budget development, fiscal compliance, data collections, and reporting; b) Department-wide performance management and sharing of systems improvement tools and techniques; c) identifying new approaches to DCHS work and the application of research for emerging and best practices and solutions; d) leading the work of mass-care sheltering during severe weather events and overseeing the Supportive Housing Service Funds for the Department; and e) communication and coordination with elected officials, partners and participants by using multiple methods to engage with the community, including online tools.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of DCHS web page views*	384,326	450,000	385,000	400,000
Outcome	Percent of visitors who were able to find what they were looking for on the DCHS website**	43%	85%	57%	85%

**Performance Measures Descriptions**

\*Number of DCHS page views calculated using Google Analytics. Numbers exclude internal traffic.

\*\*Percentage 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.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$3,658,602	\$152,063	\$2,744,834	\$163,072
Contractual Services	\$190,103	\$0	\$181,948	\$0
Materials & Supplies	\$187,966	\$0	\$143,937	\$0
Internal Services	\$460,663	\$0	\$424,800	\$24,004
<b>Total GF/non-GF</b>	<b>\$4,497,334</b>	<b>\$152,063</b>	<b>\$3,495,519</b>	<b>\$187,076</b>
<b>Program Total:</b>	<b>\$4,649,397</b>		<b>\$3,682,595</b>	
<b>Program FTE</b>	21.00	1.00	13.00	1.00

Program Revenues				
Other / Miscellaneous	\$2,123,957	\$0	\$3,173,283	\$0
<b>Total Revenue</b>	<b>\$2,123,957</b>	<b>\$0</b>	<b>\$3,173,283</b>	<b>\$0</b>

Explanation of Revenues

This program generates \$24,004 in indirect revenues.

\$3,173,283 - County General Fund Department Indirect: Based on FY 2025 Department Indirect Rates published by Central Finance.

\$187,076 - Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

Significant Program Changes

Last Year this program was: FY 2024: 25000 DCHS Director's Office

In response to constraint and the prioritization of service delivery, the Director's Office eliminated the Multnomah Idea Lab. Decrease of 8.00 FTE; 1.00 Human Services Policy Manager, 3.00 Research Evaluation Analyst Sr, 1.00 Executive Specialist, 1.00 Management Analyst, 2.00 Program Specialist Sr.

FY 2024 Other Funds is Supportive Housing Services (SHS) Fund 1521. In FY 2024 these funds were budgeted in the Joint Office of Homeless Services program 30407A – Supportive Housing – Countywide Coordination – Dept of County Human Services.

**Department:** County Human Services

**Program Contact:** Jeni Woods

**Program Offer Type:** Administration

**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 2025 will continue to 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. Pursuant to the department's sustainable business plan, DCHS HR and the MIL developed content for a DCHS Culture Guidebook to help with recruiting and onboarding new employees. This will be implemented starting in FY 2024 and continued into FY 2025.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Recruitments	403	400	400	400
Outcome	Percent of DCHS employees who identify as a person of color	48.47%	44.00%	47.89%	44.00%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$1,735,519	\$0	\$1,822,135	\$0
Contractual Services	\$3,000	\$0	\$8,000	\$0
Materials & Supplies	\$23,760	\$0	\$19,800	\$0
Internal Services	\$203,640	\$0	\$240,900	\$0
<b>Total GF/non-GF</b>	<b>\$1,965,919</b>	<b>\$0</b>	<b>\$2,090,835</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,965,919</b>		<b>\$2,090,835</b>	
<b>Program FTE</b>	10.00	0.00	10.00	0.00

Program Revenues				
Other / Miscellaneous	\$1,709,921	\$0	\$1,821,515	\$0
<b>Total Revenue</b>	<b>\$1,709,921</b>	<b>\$0</b>	<b>\$1,821,515</b>	<b>\$0</b>

Explanation of Revenues

\$1,821,515 - County General Fund Department Indirect: Based on FY 2025 Department Indirect Rates published by Central Finance.

Significant Program Changes

Last Year this program was: FY 2024: 25001 DCHS Human Resources

**Department:** County Human Services

**Program Contact:** Robert Stoll

**Program Offer Type:** Administration

**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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Percent of invoices paid in 30 days or less	92%	93%	90%	90%
Outcome	Percent of annual contracts executed prior to start date	94%	94%	95%	95%
Output	Number of anticipated contract actions including new contracts, amendments and purchase orders	350	365	360	365

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$4,122,438	\$0	\$4,395,292	\$0
Contractual Services	\$40,000	\$0	\$40,000	\$0
Materials & Supplies	\$52,684	\$0	\$29,371	\$0
Internal Services	\$521,525	\$0	\$631,243	\$0
<b>Total GF/non-GF</b>	<b>\$4,736,647</b>	<b>\$0</b>	<b>\$5,095,906</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$4,736,647</b>		<b>\$5,095,906</b>	
<b>Program FTE</b>	26.00	0.00	26.00	0.00

Program Revenues				
Other / Miscellaneous	\$4,117,366	\$0	\$5,328,962	\$0
<b>Total Revenue</b>	<b>\$4,117,366</b>	<b>\$0</b>	<b>\$5,328,962</b>	<b>\$0</b>

Explanation of Revenues

\$5,328,962 - County General Fund Department Indirect: Based on FY 2025 Department Indirect Rates published by Central Finance.

Significant Program Changes

Last Year this program was: FY 2024: 25002 DCHS Business Services

**Department:** County Human Services      **Program Contact:** Rachel Pearl  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** New Request, One-Time-Only Request

**Executive Summary**

Providing short-term gap resources for Newcomers arriving in Multnomah County. Short-term humanitarian resources will be focused on emergency housing.

**Program Description**

As Immigrants and Refugees from other countries are arriving in Multnomah County they face challenges accessing basic resources and support. This one-time-only investment is in complement to the Newcomer Support Services Pilot state funding allocation for FY 2025 and provides gap funding for short-term humanitarian transition services focused on emergency housing. Services will be delivered in partnership with culturally specific organizations that serve immigrants and refugees.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of households engaged in intake or transition services	N/A	N/A	N/A	110
Outcome	Percentage of households connected to housing services or rent assistance	N/A	N/A	N/A	60%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$0	\$1,267,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,267,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$1,267,000</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:

# Intellectual and Developmental Disabilities Services

The Intellectual and Developmental Disabilities Services Division (IDDSD) serves over 7,200 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.

The division has maintained a 79% overall service satisfaction rating among clients (based on the 2022 IDDSD Client Survey), and a 91% overall job satisfaction rating among division staff (based on the 2021 Countywide Employee Survey). Staff are actively working on the objectives identified in the 2022-2025 IDDSD strategic plan, DCHS Sustainable Business Plan, WESP, and State service equity requirements. These efforts will continue to improve equitable service delivery, workforce development, and resource management.

**\$45.5 million**  
**Intellectual and Developmental Disabilities Services**

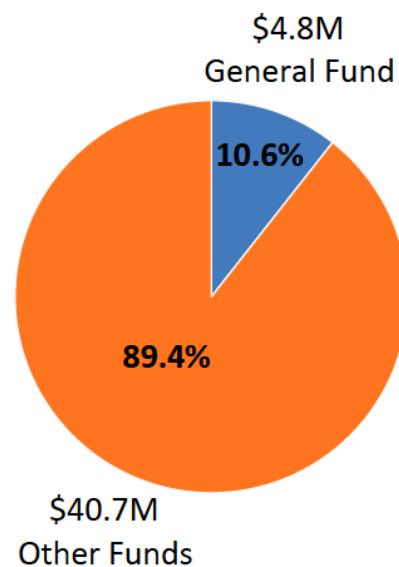
Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.



**233.00 FTE**

(full time equivalent)



### Significant Division Changes

In FY 2024, the budget included \$2.6 million in State funding carryover to prevent cuts to the division and create staff positions to increase service levels, equitable service delivery, housing stability, cross-agency collaboration, and data use innovation. The FY 2025 budget solidifies these improvements by turning 7 limited duration positions into regular FTE. Looking forward to FY 2026, maintaining adequate funding from the State for the 2025-2027 biennium will be necessary to help the division avoid a fiscal cliff and maintain the gains made during FY 2024 and FY 2025. Current IDSD staffing is necessary to keep up with the ever-increasing I/DD support needs across the county.

Ongoing service, equity, and system improvements depend on current staff levels as well. Current service innovations include the creation of a Monitoring Team that has reduced the backlog of monitoring services, maintained health and safety for clients, and increased revenue for the division through submission of billable service contacts to the State. Improved equity and service efforts are also reflected in the increase in the number of direct-service staff with language or cultural knowledge, skill and ability (KSA) designation to 31 KSA positions in FY 2024. A new training position has increased service and equity efforts through staff training on workplace safety, Narcan administration, monitoring, onboarding, interrupting microaggressions, and trans and gender equity training. Several system improvement efforts have demonstrated outcomes in FY 2024. For example, the partnership with Child Welfare has resulted in the reduction of timelines to transfer children to residential placements that are a good fit for their service needs (reduced timeline from 217 days to 106 days). System improvement is also reflected in the Supportive Housing Services work to identify houseless individuals who are eligible for I/DD services and move them to supportive housing. Efforts to increase data use and data tracking efficiency are also part of system improvements. These include participation in the Oregon Office of Developmental Disabilities Services (ODDS) workgroup and leadership steering committee to create a centralized statewide case management database system and work with Multnomah County IT to develop a new Oregon Needs Assessment management system in Salesforce.

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Intellectual and Developmental Disabilities Services</b>						
25010	IDSD Administration & Support		1,217,243	4,462,511	5,679,754	31.00
25011	IDSD Budget and Operations Support		626,111	7,405,466	8,031,577	38.00
25011B	IDSD Emergency Response Kits	X	0	1,473,531	1,473,531	0.00
25012	IDSD Services for Adults		1,501,672	9,721,234	11,222,906	62.00
25013	IDSD Services for Children and Young Adults		1,459,566	9,615,832	11,075,398	62.00
25014	IDSD Abuse Investigations		3,571	5,137,547	5,141,118	26.00
25016	IDSD Eligibility & Intake Services		12,960	2,898,837	2,911,797	14.00
<b>Total IDSD</b>			<b>\$4,821,123</b>	<b>\$40,714,958</b>	<b>\$45,536,081</b>	<b>233.00</b>

**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 review of Personal Support Worker timesheets. 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. 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 to increase the delivery and accessibility of services 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 responsive and Medicaid compliant services. Third, improve policies and remove barriers to access by advocating for clients. Finally, increase resources for clients through collaborative partnerships.

**PROGRAM ACTIVITY:** The four general areas of activity 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of indirect monitoring reviews to confirm delivered services and generate division revenue. <sup>1</sup>	6,147	6,480	6,480	6,480
Quality	Percent of federally-funded plan waivers in compliance for re-authorization. <sup>2</sup>	40%	75%	60%	75%
Outcome	Percent of survey respondents satisfied with the services they receive.	79%	90%	79%	90%

### Performance Measures Descriptions

<sup>1</sup>FY23 actual number is lower than expected due to staff leave and temporary staff reassignment.

<sup>2</sup>New staff resulted in a lower percentage of waiver compliance in FY23; improved training is increasing compliance in FY24.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$625,081	\$2,559,307	\$789,444	\$3,408,960
Contractual Services	\$282,592	\$0	\$282,592	\$0
Materials & Supplies	\$27,955	\$76,025	\$46,141	\$92,452
Internal Services	\$93,184	\$579,503	\$99,066	\$961,099
<b>Total GF/non-GF</b>	<b>\$1,028,812</b>	<b>\$3,214,835</b>	<b>\$1,217,243</b>	<b>\$4,462,511</b>
<b>Program Total:</b>	<b>\$4,243,647</b>		<b>\$5,679,754</b>	
<b>Program FTE</b>	4.50	19.50	5.50	25.50

Program Revenues				
Intergovernmental	\$0	\$2,778,695	\$0	\$4,462,511
Beginning Working Capital	\$0	\$436,140	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,214,835</b>	<b>\$0</b>	<b>\$4,462,511</b>

Explanation of Revenues

This program generates \$501,799 in indirect revenues.  
 \$4,462,511- State Mental Health Grant Case Management (Federal)

Significant Program Changes

Last Year this program was: FY 2024: 25010 IDSD Administration & Support

Increase of 7.00 FTE. Added new 1.00 FTE Program Supervisor, 1.00 Case Manager Sr, 5.00 Case Manager 2

**Department:** County Human Services

**Program Contact:** Alexis Alberti

**Program Offer Type:** Administration

**Program Offer Stage:** Adopted

**Related Programs:**
**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, offering individualized and translated 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 knowledge and skills of residential, employment, and direct service providers. These efforts include technical support, timesheet approval, credentialing, certification, recruitment, training, and contracts. 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of direct service provider timesheets processed annually for clients receiving in-home services.	23,830	26,000	26,000	26,000
Outcome	Percent of clients referred who are accepted into an employment setting.	81%	90%	85%	90%
Quality	Percent of provider payment lines authorized and built in state billing system within 10 business days. <sup>1</sup>	70%	100%	70%	100%
Outcome	Percent of clients who are stably housed 12 months after receiving housing funds. <sup>2</sup>	94%	90%	90%	90%

### Performance Measures Descriptions

<sup>1</sup>In FY23 and FY24, the number of provider payment lines increased, while four Program Specialists assigned to plan building transitioned away from the team. In addition, new Service Coordinators led to increased plan corrections, as staff learned plan requirements.

<sup>2</sup>The FY24 estimate is lower than the FY23 actual due to the decline in housing funding available, as well as the ongoing rise of housing expenses for individuals with a low or fixed income.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$154,403	\$5,167,826	\$340,445	\$5,269,513
Contractual Services	\$162,621	\$727,508	\$218,802	\$676,740
Materials & Supplies	\$12,380	\$94,854	\$12,830	\$53,126
Internal Services	\$57,755	\$1,354,788	\$54,034	\$1,406,087
<b>Total GF/non-GF</b>	<b>\$387,159</b>	<b>\$7,344,976</b>	<b>\$626,111</b>	<b>\$7,405,466</b>
<b>Program Total:</b>	<b>\$7,732,135</b>		<b>\$8,031,577</b>	
<b>Program FTE</b>	1.00	37.00	2.00	36.00

Program Revenues				
Intergovernmental	\$0	\$6,496,133	\$0	\$7,241,940
Beginning Working Capital	\$0	\$715,793	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$7,211,926</b>	<b>\$0</b>	<b>\$7,241,940</b>

Explanation of Revenues

This program generates \$775,674 in indirect revenues.  
 \$5,465,423 - State Mental Health Grant Case Management (Federal)  
 \$1,099,777 - State Mental Health Grant Local Admin (Federal)  
 \$185,751 - State Mental Health Grant Self Directed Individual/Family (Federal)  
 \$180,000 - State Mental Health Grant Long Term Support for Children (Federal)  
 \$163,526 - Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.  
 \$100,000 - State Mental Health Grant Family Support Services (Federal)  
 \$75,092 - HAP - Housing Program (Local)  
 \$56,160 - Partners for Hunger Free Oregon (Local)  
 \$40,512 - State Mental Health Grant Special Projects (Federal), \$27,225 - State Mental Health Grant Ancillary Service (Federal), and \$12,000 - State Mental Health Grant Adult Foster Care (Federal)

Significant Program Changes

Last Year this program was: FY 2024: 25011 IDSD Budget and Operations

Decrease 1.00 FTE Budget Analyst in Federal/State Fund. Increase 1.00 FTE Manager 1 in General Fund.

FY 2024 Other Funds includes Supportive Housing Services (SHS) Fund 1521. In FY 2024 these funds were budgeted in the Joint Office of Homeless Services program 30407A – Supportive Housing – Countywide Coordination – Dept of County Human Services.

**Department:** County Human Services      **Program Contact:** Alexis Alberti  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** New Request, One-Time-Only Request

**Executive Summary**

IDSD received a one-time allocation of \$1,473,531 to distribute emergency equipment and supplies for future emergency preparedness. The Office of Developmental Disabilities Services (ODDS) instructed Case Management Entities (CMEs) to allocate the funding to individuals receiving ODDS services across all settings, ensuring fair distribution based on participant numbers and other criteria. The funding covers administrative costs, emergency hubs, portable generators, power stations, and essential supplies.

**Program Description**

IDSD has been granted a special allocation totaling \$1,473,531 earmarked specifically for the acquisition and distribution of emergency equipment and supplies, aimed at bolstering preparedness efforts for potential future emergency scenarios. This allocation was authorized by the Office of Developmental Disabilities Services (ODDS) through a directive that entrusts Case Management Entities (CMEs) with the pivotal role of managing the distribution process. CMEs are directed to allocate these funds among individuals under the purview of ODDS across diverse service settings, adhering to distribution criteria that include participant numbers per CME and additional guidelines outlined by ODDS.

In fulfilling this directive, CMEs bear the responsibility of ensuring an equitable distribution process, a task that necessitates careful consideration of the unique needs and resources within local communities. Acting as custodians of this Emergency Response funding, CMEs are empowered to address a wide array of expenses crucial to enhancing emergency preparedness efforts. These encompass not only administrative costs but also encompass the procurement of emergency hubs, portable generators, power stations, and other indispensable emergency supplies essential for safeguarding the welfare of individuals within the IDSD service network.

It's important to note that these funds are considered restricted and cannot supplant existing funding or services billable to Medicaid or other Federal/State funds. Moreover, they are prohibited from covering retroactive expenses incurred prior to the disbursement of funds, and expenses related to whole house generators, equipment installation, maintenance, and ongoing fuel subscriptions. Furthermore, these funds must be expended by March 1, 2025, with any remaining funds required to be returned to ODDS.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of emergency preparedness kits/supplies to be purchased.	N/A	N/A	N/A	6,000
Outcome	Percent of purchased emergency preparedness kits/supplies distributed to clients/community by 3/1/2025	N/A	N/A	N/A	100%

**Performance Measures Descriptions**

Our objective is to maximize the utilization of the \$1,473,531 allocation, enabling the purchase of an estimated 6,000 emergency preparedness kits and supplies for IDSD clients and community. These funds, allocated for direct client assistance, require verification of distribution to ensure proper accounting of expenditures.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$0	\$0	\$143,419
Contractual Services	\$0	\$0	\$0	\$1,309,000
Internal Services	\$0	\$0	\$0	\$21,112
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,473,531</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$1,473,531</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$1,473,531
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,473,531</b>

Explanation of Revenues

This program generates \$21,112 in indirect revenues.  
 \$1,473,531 - State Mental Health Grant Special Projects (Federal)

Significant Program Changes

Last Year this program was:

**Department:** County Human Services

**Program Contact:** Alexis Alberti

**Program Offer Type:** Operating

**Program Offer Stage:** Adopted

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

### Executive Summary

The IDDSD 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, and supports individuals with connections to resources. All services are inclusive, culturally specific and culturally responsive and 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:** The eight domains that adult services operate to support quality of life 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 five areas of activity aligned with the goals above 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. 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of adults served each month. <sup>1</sup>	2,428	2,500	2,550	2,650
Output	Number of monitoring contacts for adults. <sup>2</sup>	30,373	38,000	38,000	38,000
Outcome	Percent of adult survey respondents who report that they like where they live.	87%	90%	87%	90%
Quality	Percent of Service Coordinators with KSA designation to support language or cultural needs.	9%	10%	10%	12%

### 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 - IDD Services for Children and Young Adults.

<sup>2</sup>Lower than expected monitoring contacts in FY23 are a result of significant training periods for new service coordinator staff during the fiscal year.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$1,247,783	\$6,508,131	\$1,303,864	\$7,453,691
Contractual Services	\$10,000	\$56,695	\$10,000	\$167,542
Materials & Supplies	\$28,093	\$80,247	\$29,134	\$93,225
Internal Services	\$228,143	\$1,773,135	\$158,674	\$2,006,776
<b>Total GF/non-GF</b>	<b>\$1,514,019</b>	<b>\$8,418,208</b>	<b>\$1,501,672</b>	<b>\$9,721,234</b>
<b>Program Total:</b>	<b>\$9,932,227</b>		<b>\$11,222,906</b>	
<b>Program FTE</b>	10.50	51.50	10.50	51.50

Program Revenues				
Intergovernmental	\$0	\$7,686,005	\$0	\$9,419,150
Beginning Working Capital	\$0	\$567,536	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$8,253,541</b>	<b>\$0</b>	<b>\$9,419,150</b>

Explanation of Revenues

This program generates \$1,097,182 in indirect revenues.

\$9,402,582 - State Mental Health Grant Case Management (Federal)

\$302,084 - Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

\$16,568 - State Mental Health Grant Psychiatric Treatment and Supervision (Federal)

Significant Program Changes

Last Year this program was: FY 2024: 25012 IDSD Services for Adults

FY 2024 Other Funds includes Supportive Housing Services (SHS) Fund 1521. In FY 2024 these funds were budgeted in the Joint Office of Homeless Services programs:

- 30407A – Supportive Housing – Countywide Coordination – Dept of County Human Services
- 30400D – Supportive Housing – Tenant-Based Commitments

**Department:** County Human Services

**Program Contact:** Alexis Alberti

**Program Offer Type:** Operating

**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 five areas of activity aligned with the goals above 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 to ensure the health and safety of clients and include collaborations with ODHS, ODDS, Behavioral Health, and emergency response services. Staff document all service and client data in state and county databases.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of children (birth - 17) served each month.	2,166	2,200	2,240	2,300
Outcome	Percent of children retained in the family home. <sup>1</sup>	95%	90%	95%	N/A
Output	Number of young adults (aged 18-21) served each month.	662	680	680	700
Outcome	Number of monitoring contacts for children and young adults.	32,784	27,000	32,000	32,000

### Performance Measures Descriptions

<sup>1</sup>This metric is being removed in FY25. The program has demonstrated a consistently high percentage that has not changed significantly in the years since k-plan started.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$1,148,762	\$6,477,332	\$1,225,978	\$7,479,947
Contractual Services	\$25,000	\$0	\$25,000	\$0
Materials & Supplies	\$26,970	\$71,135	\$28,470	\$78,936
Internal Services	\$192,515	\$1,846,703	\$180,118	\$2,056,949
<b>Total GF/non-GF</b>	<b>\$1,393,247</b>	<b>\$8,395,170</b>	<b>\$1,459,566</b>	<b>\$9,615,832</b>
<b>Program Total:</b>	<b>\$9,788,417</b>		<b>\$11,075,398</b>	
<b>Program FTE</b>	10.00	52.00	10.00	52.00

Program Revenues				
Intergovernmental	\$0	\$7,961,065	\$0	\$9,615,832
Beginning Working Capital	\$0	\$434,105	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$8,395,170</b>	<b>\$0</b>	<b>\$9,615,832</b>

Explanation of Revenues

This program generates \$1,101,048 in indirect revenues.  
 \$9,615,832 - State Mental Health Grant Case Management (Federal)

Significant Program Changes

Last Year this program was: FY 2024: 25013 IDSD Services for Children and Young Adults

**Department:** County Human Services

**Program Contact:** Alexis Alberti

**Program Offer Type:** Operating

**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 has surpassed pre-COVID 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, consult on plans meant to increase and maintain client health and safety. Third, improve service delivery by partnering with local, state and federal agencies. Finally, mitigate further abuse through protective service action plans.

**PROGRAM ACTIVITY:** The three general areas of activity include access, collaboration, and prevention. In the area of access, investigators are responsible for ensuring that safety plans are in place to increase client access to supports for health and safety needs. Additional responsibilities 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 an 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 and 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.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of abuse referrals. <sup>1</sup>	1,723	N/A	1,820	1,911
Outcome	Percent of abuse referrals screened within 3 working days. <sup>2</sup>	69%	90%	70%	90%
Output	Number of investigations and death reviews closed.	478	350	450	450
Outcome	Percent of new investigations and death reviews closed within 55 days. <sup>3</sup>	44%	90%	50%	90%

### Performance Measures Descriptions

<sup>1</sup>New measure added in FY25.

<sup>2</sup>Percent of referrals screened within 3 days increased from FY22 to FY23, but still fell short of the target due to continued increase and complexity of state documentation requirements.

<sup>3</sup>This percentage does not include cases that were granted extensions from the state.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$3,405,304	\$0	\$4,006,342
Contractual Services	\$0	\$1,000	\$0	\$1,000
Materials & Supplies	\$3,571	\$51,383	\$3,571	\$39,470
Internal Services	\$719	\$942,366	\$0	\$1,090,735
<b>Total GF/non-GF</b>	<b>\$4,290</b>	<b>\$4,400,053</b>	<b>\$3,571</b>	<b>\$5,137,547</b>
<b>Program Total:</b>	<b>\$4,404,343</b>		<b>\$5,141,118</b>	
<b>Program FTE</b>	0.00	26.00	0.00	26.00

Program Revenues				
Intergovernmental	\$0	\$4,196,805	\$0	\$5,137,547
Beginning Working Capital	\$0	\$203,248	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,400,053</b>	<b>\$0</b>	<b>\$5,137,547</b>

Explanation of Revenues

This program generates \$589,733 in indirect revenues.  
 \$4,409,104 - State Mental Health Grant Abuse Investigation Services (Federal)  
 \$728,443 - State Mental Health Grant Case Management (Federal)

Significant Program Changes

Last Year this program was: FY 2024: 25014 IDSD Abuse Investigations

**Department:** County Human Services

**Program Contact:** Alexis Alberti

**Program Offer Type:** Operating

**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 ensuring 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 understanding of, and access to, IDSD services. The Eligibility and Intake Services team addresses these needs. 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 increasing the public's understanding of available services and eligibility requirements. Second, increasing the connection of individuals to community resources. Third, provide direct, trauma-informed application support. Finally, increase access to funded services by determining eligibility and enrolling clients. This is done according to State regulatory requirements.

**PROGRAM ACTIVITY:** The three general areas of activity are: awareness, equitable access, and connection. Awareness efforts include community outreach, increasing understanding of IDSD services and processes. Efforts result 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. 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of intake eligibility referrals.	1,248	1,100	1,350	1,250
Outcome	Percent of applicants found eligible for DD services.	82%	80%	82%	80%
Outcome	Percent of newly eligible clients who identify as Black, Indigenous, or People of Color.	42%	34%	34%	34%
Output	Number of linguistically and culturally responsive community outreach activities. <sup>1</sup>	10	N/A	10	20

### Performance Measures Descriptions

<sup>1</sup>New measure in FY25. Responsive community outreach includes presentations, materials, and staff consultation tailored to the language and cultural needs requested by the partnering organization.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$1,890,634	\$0	\$2,291,618
Contractual Services	\$10,000	\$0	\$10,000	\$0
Materials & Supplies	\$2,960	\$39,524	\$2,960	\$21,255
Internal Services	\$2,876	\$514,662	\$0	\$585,964
<b>Total GF/non-GF</b>	<b>\$15,836</b>	<b>\$2,444,820</b>	<b>\$12,960</b>	<b>\$2,898,837</b>
<b>Program Total:</b>	<b>\$2,460,656</b>		<b>\$2,911,797</b>	
<b>Program FTE</b>	0.00	14.00	0.00	14.00

Program Revenues				
Intergovernmental	\$0	\$2,333,462	\$0	\$2,898,837
Beginning Working Capital	\$0	\$111,358	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,444,820</b>	<b>\$0</b>	<b>\$2,898,837</b>

Explanation of Revenues

This program generates \$337,325 in indirect revenues.  
 \$2,123,168 - State Mental Health Grant Local Admin (Federal)  
 \$775,669 - State Mental Health Grant Case Management (Federal)

Significant Program Changes

Last Year this program was: FY 2024: 25016 IDDSD Eligibility & Intake Services

### Aging, Disability, and Veterans Services

Multnomah County has about 805,007 residents – nearly a fifth of the state population. Over 159,457 (19.2%) of residents are 60 and older. There are over 98,335 people 18 and older with physical disabilities, and about 34,387 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, nine enhancing equity providers, five Medicaid offices, and the central downtown Portland location. The division serves five main areas: 1) Community Services (includes a Veterans Services unit), 2) Adult Care Homes, 3) Long Term Services and Supports, 4) Adult Protective Services, and 5) 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 5,800 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.

# \$118.9 million

## Aging, Disability, and Veterans Services

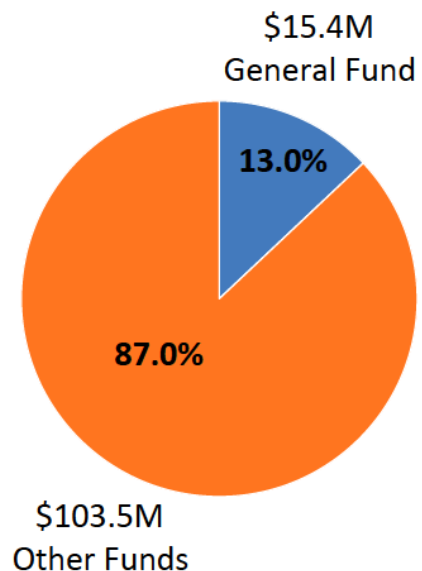
Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.



# 543.50 FTE

(full time equivalent)



### Significant Division Changes

**More culturally specific services by community providers.** The 2023 Request for Programmatic Qualifications (RFPQ) procurement process to contract with community organizations providing case management and other Older Americans Act services added five providers with contracts executed January 1, 2024. Forty-six percent of the funding was allocated to culturally specific providers and we contracted with five new providers—four being culturally specific organizations. ADVSD awarded a total of seventeen contracts.

**Property/lease cost savings.** ADVSD Mid-County moved to a smaller footprint on NE 122nd Ave and NE Glisan St, and Five Oak operations consolidated from two to one floor. Transition and Diversion relocated to Tabor Square, and the Adult Care Home program relocated to Multnomah County East. Consolidating and reducing office space combined with a new property lease saved the County \$520,000 in FY 2024. These consolidations will result in an additional \$344,000 savings for FY 2025.

**In-home care for older adults (Safety Net program).** Pilot program for FY 2024 with ongoing funding for FY 2025. The program provides contractor funding to NW Pilot Project for the Older Adult In-Home Care Program serving participants 55-plus previously chronically houseless and recently placed into stable housing. This person-centered program includes support with housekeeping, eviction prevention, transportation, grocery delivery, medical appointments, and more.

There was initially a significant reduction in the ADVSD Medicaid allocation for the 23-25 biennium from the Oregon Department of Human Services (ODHS), however there was a bill that passed in the legislature on March 10, 2024 to restore funding.

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Aging, Disability, and Veterans Services</b>						
25022	ADVSD Adult Care Home Program		280,420	6,414,862	6,695,282	32.00
25023	ADVSD Long Term Services & Supports (Medicaid)		3,445,725	49,517,431	52,963,156	313.00
25024	ADVSD Adult Protective Services		1,302,355	10,525,145	11,827,500	57.35
25025	ADVSD Veterans Services		682,783	666,261	1,349,044	9.00
25026	ADVSD Public Guardian/Conservator		1,960,333	0	1,960,333	11.00
25027	ADVSD Administration		1,099,564	3,305,995	4,405,559	16.00
25028	ADVSD Multi-Disciplinary Team		942,432	966,452	1,908,884	5.65
25029A	ADVSD Transition & Diversion		594,886	5,898,436	6,493,322	34.00
25029B	ADVSD Transition & Diversion - Supportive Housing Services		0	1,066,706	1,066,706	6.00

# County Human Services

## FY 2025 Adopted Budget

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
25032	ADVSD Outreach, Information & Referral		1,817,004	3,244,661	5,061,665	21.65
25033	ADVSD Nutrition Program		23,052	2,838,252	2,861,304	0.00
25034	ADVSD Health Promotion		104,041	628,491	732,532	3.00
25035	ADVSD Case Management & In-Home Services (non-Medicaid)		1,452,414	11,788,948	13,241,362	13.10
25036	ADVSD Safety Net Program		728,140	171,966	900,106	2.00
25037	ADVSD Transportation Services		163,639	2,026,618	2,190,257	0.00
25038	ADVSD Advocacy & Community Program Operations		647,908	3,934,578	4,582,486	18.25
25039	ADVSD Family Caregiver Program		<u>160,446</u>	<u>487,200</u>	<u>647,646</u>	<u>1.50</u>
	<b>Total Aging, Disability, and Veterans Services</b>		<b>\$15,405,142</b>	<b>\$103,482,002</b>	<b>\$118,887,144</b>	<b>543.50</b>

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**Department:** County Human Services      **Program Contact:** Steven Esser  
**Program Offer Type:** Operating      **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. Adult Care Home 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.

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.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of licensed homes in operation throughout the fiscal year.	670	655	670	660
Outcome	Percent of adult care home residents satisfied with services received in adult care homes <sup>1</sup>	93%	93%	93%	93%

**Performance Measures Descriptions**

<sup>1</sup>Based on 133 responses to an FY2022 survey of ACH residents. Survey administered by ADVSD every 3 years. Former measure: "Percent of adult care homes that were licensed accurately and timely based on ACHP audit findings." Dropped due to lack of accurate data. FY23 Actual & FY24 Estimate: Data not available. Former measure: "Average Medicaid cost savings for adult care home residents compared to nursing facility placement." Dropped due to non-alignment with the program outcomes. FY23 Actual & FY24 Estimate: Data not available.



## 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	2024	2024	2025	2025
Personnel	\$86,344	\$4,231,161	\$0	\$4,627,039
Contractual Services	\$0	\$525,000	\$280,420	\$440,000
Materials & Supplies	\$0	\$35,149	\$0	\$18,234
Internal Services	\$7,301	\$1,167,393	\$0	\$1,329,589
<b>Total GF/non-GF</b>	<b>\$93,645</b>	<b>\$5,958,703</b>	<b>\$280,420</b>	<b>\$6,414,862</b>
<b>Program Total:</b>	<b>\$6,052,348</b>		<b>\$6,695,282</b>	
<b>Program FTE</b>	0.64	31.36	0.00	32.00

Program Revenues				
Fees, Permits & Charges	\$0	\$350,000	\$0	\$362,780
Intergovernmental	\$0	\$5,608,703	\$0	\$5,999,862
Service Charges	\$0	\$0	\$0	\$52,220
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,958,703</b>	<b>\$0</b>	<b>\$6,414,862</b>

## Explanation of Revenues

This program generates \$681,101 in indirect revenues.

\$5,999,862 - Title XIX (Federal)

\$362,780 - Adult Care Home Program License Fees (Local)

\$37,457 - Adult Care Home Program Other Fees (Local)

\$14,763 - Adult Care Home Program Fines (Local)

## Significant Program Changes

**Last Year this program was:** FY 2024: 25022 ADVSD Adult Care Home Program

Moved 0.64 FTE from General Fund to Federal/ State Fund

**Department:** County Human Services

**Program Contact:** Joe Valtierra

**Program Offer Type:** Operating

**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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of participants served in LTSS programs	48,800 <sup>1</sup>	50,000	48,800	48,800
Outcome	Number of participants receiving Medicaid service case management	11,379	11,500	11,600	11,500
Output	Percent of nursing facility eligible participants who are living in the community	88%	88%	88%	88%

### 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 Medicaid Medical, SNAP and Medicare Savings Plan benefit 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	2024	2024	2025	2025
Personnel	\$0	\$36,183,018	\$0	\$37,967,306
Contractual Services	\$2,664,911	\$80,900	\$3,445,725	\$26,574
Materials & Supplies	\$0	\$475,406	\$0	\$221,369
Internal Services	\$0	\$10,613,948	\$0	\$11,302,182
<b>Total GF/non-GF</b>	<b>\$2,664,911</b>	<b>\$47,353,272</b>	<b>\$3,445,725</b>	<b>\$49,517,431</b>
<b>Program Total:</b>	<b>\$50,018,183</b>		<b>\$52,963,156</b>	
<b>Program FTE</b>	0.00	313.00	0.00	313.00

Program Revenues				
Intergovernmental	\$0	\$46,710,050	\$0	\$48,854,102
Other / Miscellaneous	\$0	\$643,222	\$0	\$663,329
<b>Total Revenue</b>	<b>\$0</b>	<b>\$47,353,272</b>	<b>\$0</b>	<b>\$49,517,431</b>

## Explanation of Revenues

This program generates \$5,588,787 in indirect revenues.

\$48,854,102 - Title XIX (Federal)  
 \$183,306 - Kaiser Foundation Hospitals (Local)  
 \$167,077 - Case Management Assessments for Medicaid Patients (Local)  
 \$159,470 - Providence Medical Center (Local)  
 \$153,476- OHSU (Local)

## Significant Program Changes

Last Year this program was: FY 2024: 25023 ADVSD Long Term Services & Supports (Medicaid)

**Department:** County Human Services      **Program Contact:** Brian Hughes  
**Program Offer Type:** Operating      **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 conduct abuse investigations. 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of Adult Protective Service intakes	9,502	9,300	9,400	9,400
Outcome	Percent of investigations with timely response	98%	98%	98%	98%
Output	Number of Adult Protective Service investigations completed	3,153	3,000	2,800 <sup>1</sup>	2,800
Outcome	Re-abuse rate for individuals involved with APS	3%	3%	3%	3%

**Performance Measures Descriptions**

<sup>1</sup>In FY24, the State will introduce a new process for approving community abuse reports, which is expected to delay the completion of investigations.

## 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	2024	2024	2025	2025
Personnel	\$55,643	\$7,684,656	\$58,391	\$8,092,139
Contractual Services	\$465,582	\$5,000	\$1,238,439	\$5,000
Materials & Supplies	\$0	\$68,260	\$0	\$68,260
Internal Services	\$3,997	\$2,022,944	\$5,525	\$2,359,746
<b>Total GF/non-GF</b>	<b>\$525,222</b>	<b>\$9,780,860</b>	<b>\$1,302,355</b>	<b>\$10,525,145</b>
<b>Program Total:</b>	<b>\$10,306,082</b>		<b>\$11,827,500</b>	
<b>Program FTE</b>	0.35	57.00	0.35	57.00

Program Revenues				
Intergovernmental	\$0	\$9,780,860	\$0	\$10,525,145
<b>Total Revenue</b>	<b>\$0</b>	<b>\$9,780,860</b>	<b>\$0</b>	<b>\$10,525,145</b>

## Explanation of Revenues

This program generates \$1,191,163 in indirect revenues.

\$10,525,145 - Title XIX (Federal)

## Significant Program Changes

Last Year this program was: FY 2024: 25024 ADVSD Adult Protective Services

**Department:** County Human Services

**Program Contact:** Marina Khalina

**Program Offer Type:** Operating

**Program Offer Stage:** Adopted

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

### Executive Summary

The County Veterans Services (VS) program ensures equitable and efficient access to services and programs to anyone who served on active duty with the U.S. Armed Forces and their families. VS helps Veterans and dependents to get pension, disability, and health benefits administered by the Veterans Benefits Administration. VS also provides in-home case management and support to Veterans who are nursing facility eligible through a program called Veterans Directed Care (VDC). Multnomah County Aging Disability and Veterans Services is also the lead for the statewide VDC program that currently includes Clackamas, Coos, Curry, Douglas, Jackson, Josephine, Klamath, and Washington counties.

### Program Description

**ISSUE:** Accessing Federal Veterans' benefits is complex. The wait time to get a decision can be long—delaying access to needed benefits. Nursing home eligible Veterans need to have options to remain in their home and direct their care.

**PROGRAM GOAL:** The VS goals are to provide information, help, and advocacy to improve Veteran access to a pension, disability, and health benefits. The VS 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 (VSOs). 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 VS 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 VS uses intentional and targeted outreach to aging, LGBTQ, women, justice involved, houseless, and BIPOC Veterans.

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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of service contacts held by Veterans Services Officers <sup>1</sup>	3,787	3,800	3,900	3,950
Outcome	New monthly compensation or pension awarded for ongoing benefit to Veterans due to VSO representation	\$862,568	\$980,000	\$980,000	\$980,000
Output	Number of claims filed for Veterans or eligible family members	968	850	900	900
Outcome	New retroactive benefits awarded to Veterans because of VSO representation in the last fiscal year	\$4,282,038	\$4,500,000	\$4,500,000	\$4,500,000

### Performance Measures Descriptions

<sup>1</sup>This metric does not account for 3500 other inquiries that the VS program screens and triages to other community services, but includes 2500 follow-up actions of the Veteran Service Officers. Of the people surveyed after a service contact, 82% (n=134) said they got the help they were looking for and 86% (n=135) would recommend the program to family and friends.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$579,327	\$386,220	\$549,727	\$602,974
Contractual Services	\$10,500	\$21,560	\$0	\$0
Materials & Supplies	\$30,859	\$271	\$30,859	\$271
Internal Services	\$139,681	\$50,539	\$102,197	\$63,016
<b>Total GF/non-GF</b>	<b>\$760,367</b>	<b>\$458,590</b>	<b>\$682,783</b>	<b>\$666,261</b>
<b>Program Total:</b>	<b>\$1,218,957</b>		<b>\$1,349,044</b>	
<b>Program FTE</b>	4.80	3.20	4.40	4.60

Program Revenues				
Intergovernmental	\$0	\$458,590	\$0	\$666,261
<b>Total Revenue</b>	<b>\$0</b>	<b>\$458,590</b>	<b>\$0</b>	<b>\$666,261</b>

Explanation of Revenues

\$417,215- Oregon Department of Veteran Affairs (Federal)  
 \$249,046- Veteran's Directed Home & Community Services (Federal)

Significant Program Changes

Last Year this program was: FY 2024: 25025 ADVSD Veterans Services

Increase of 1.00 FTE. Moved 1.00 FTE Case Manager 2 from program offer 25038  
 Moved 0.40 FTE Program Supervisor from General Fund to Federal/ State Fund

**Department:** County Human Services

**Program Contact:** Mark Sanford

**Program Offer Type:** Operating

**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 recently added a KSA position to further enhance culturally responsive service. 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.

**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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of County residents with a Public Guardian/Conservator	145	170	155 <sup>1</sup>	155
Outcome	Percent of new high-risk PGC participants with a reduction in hospital visits within a year <sup>2</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	28%	40%	40%	40%

### Performance Measures Descriptions

<sup>1</sup>During the COVID-19 pandemic some Multnomah County PGC consumers were transferred to the Oregon Public Guardian (OPG) program due to Multnomah County staff turnover and shortage. Multnomah County PGC intended to transfer those cases back to their program in FY24 but determined that this course of action might be harmful to those consumers who were now likely stabilized within OPG. <sup>2</sup>Because this measure requires a 12-month service window, the FY 2023 Actual reflects high-risk participants with an FY 2022 petition date.



## 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	2024	2024	2025	2025
Personnel	\$1,520,082	\$0	\$1,609,877	\$0
Contractual Services	\$28,811	\$0	\$29,877	\$0
Materials & Supplies	\$31,428	\$0	\$39,147	\$0
Internal Services	\$347,816	\$0	\$281,432	\$0
<b>Total GF/non-GF</b>	<b>\$1,928,137</b>	<b>\$0</b>	<b>\$1,960,333</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,928,137</b>		<b>\$1,960,333</b>	
<b>Program FTE</b>	11.00	0.00	11.00	0.00

Program Revenues				
Fees, Permits & Charges	\$0	\$0	\$55,000	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$55,000</b>	<b>\$0</b>

## Explanation of Revenues

\$55,000 - Fees paid by clients for conservatorship and guardianship services. These fees are only collected from clients who are above the Medicaid allowable resource limit.

## Significant Program Changes

Last Year this program was: FY 2024: 25026 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 32 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, community 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 participant 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 these 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of opportunities for participants and community members to give feedback to ADVSD	74	37	138	138
Outcome	Percent of diverse <sup>1</sup> representation on ADVSD Advisory Councils	75%	65%	65%	70%
Outcome	Percent of ADVSD employees who identify as Black, Indigenous, and/or People of Color (BIPOC)	46%	43%	45%	45%
Outcome	Percent of ADVSD promotions that went to BIPOC employees	57%	50%	50%	50%

### Performance Measures Descriptions

<sup>1</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+.

## 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	2024	2024	2025	2025
Personnel	\$394,525	\$2,235,630	\$325,753	\$2,396,375
Contractual Services	\$250,895	\$1,599,620	\$509,979	\$65,750
Materials & Supplies	\$96,103	\$71,949	\$83,792	\$118,555
Internal Services	\$147,202	\$620,131	\$180,040	\$725,315
<b>Total GF/non-GF</b>	<b>\$888,725</b>	<b>\$4,527,330</b>	<b>\$1,099,564</b>	<b>\$3,305,995</b>
<b>Program Total:</b>	<b>\$5,416,055</b>		<b>\$4,405,559</b>	
<b>Program FTE</b>	2.25	12.75	1.80	14.20

Program Revenues				
Intergovernmental	\$0	\$4,525,330	\$0	\$3,303,995
Other / Miscellaneous	\$0	\$2,000	\$0	\$2,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,527,330</b>	<b>\$0</b>	<b>\$3,305,995</b>

## Explanation of Revenues

This program generates \$352,747 in indirect revenues.

\$3,303,995 - Title XIX (Federal)

\$2,000 - Special Risk Fund (Local)

## Significant Program Changes

**Last Year this program was:** FY 2024: 25027 ADVSD Administration

\$1 million decrease in contractual services is the removal of "Future of Work" dollars for the moving of staff out of the Cherry Blossom building and into the Glisan Street building. This is no longer needed in FY 2025.

Increase of 1.00 Program Specialist Senior moved from program offer 25038, moved 0.45 FTE from General Fund to Federal/ State Fund.

**Department:** County Human Services      **Program Contact:** Brian Hughes  
**Program Offer Type:** Operating      **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 develop a coordinated service plan to help stabilize participants and support them living in the community. The program provides complex case consultation and in-home mental health and nursing services to isolated individuals to improve safety and quality of life.

**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 connect them to appropriate services.

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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of participants served by the Multi-Disciplinary Team (MDT)	472	435	432	435
Outcome	Percent of participants referred to nursing clinical supports and/or mental health services through MDT	65%	60%	60%	60%
Output	Number of MDT participants who receive mental health services	172	150	150	150

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$458,774	\$588,909	\$355,907	\$747,168
Contractual Services	\$375,482	\$160,687	\$550,128	\$24,878
Materials & Supplies	\$224	\$11,318	\$224	\$11,318
Internal Services	\$30,301	\$117,725	\$36,173	\$183,088
<b>Total GF/non-GF</b>	<b>\$864,781</b>	<b>\$878,639</b>	<b>\$942,432</b>	<b>\$966,452</b>
<b>Program Total:</b>	<b>\$1,743,420</b>		<b>\$1,908,884</b>	
<b>Program FTE</b>	2.45	3.20	1.85	3.80

Program Revenues				
Intergovernmental	\$0	\$878,639	\$0	\$966,452
<b>Total Revenue</b>	<b>\$0</b>	<b>\$878,639</b>	<b>\$0</b>	<b>\$966,452</b>

Explanation of Revenues

This program generates \$109,984 in indirect revenues.  
 \$941,574 - Title XIX (Federal)  
 \$24,878 - Older/Disabled Mental Health (Federal)

Significant Program Changes

Last Year this program was: FY 2024: 25028 ADVSD Multi-Disciplinary Team

Last year this program received funding from the Health Department and County General Fund (CGF) to support mental health services to older and isolated adults by providing in-home screening, assessment and counseling to participants. Over the past several years, State and Health Department funding has been reduced for this program, resulting in the need for additional CGF.

In FY 2025, state mental health funding and CGF have been reduced, needing additional CGF to maintain the mental health services provided by the MDT program.

**Department:** County Human Services

**Program Contact:** Joe Valtierra

**Program Offer Type:** Operating

**Program Offer Stage:** Adopted

**Related Programs:**
**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 leverage the culturally specific resources developed and fostered by the 3 culturally specific positions on the HMIT.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Annual number of transitions from a nursing facility <sup>1</sup>	409	400	400	400
Outcome	Percent of transitions where participants returned home	45%	40%	45%	45%
Outcome	Percent of transitions where participants returned to a community-based facility	55%	60%	55%	55%

### Performance Measures Descriptions

<sup>1</sup>This measure and all following measures include both transitions and diversions.

## 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	2024	2024	2025	2025
Personnel	\$0	\$3,847,186	\$0	\$4,520,179
Contractual Services	\$336,352	\$5,000	\$594,886	\$2,500
Materials & Supplies	\$0	\$89,610	\$0	\$44,806
Internal Services	\$0	\$1,342,115	\$0	\$1,330,951
<b>Total GF/non-GF</b>	<b>\$336,352</b>	<b>\$5,283,911</b>	<b>\$594,886</b>	<b>\$5,898,436</b>
<b>Program Total:</b>	<b>\$5,620,263</b>		<b>\$6,493,322</b>	
<b>Program FTE</b>	0.00	35.00	0.00	34.00

Program Revenues				
Intergovernmental	\$0	\$5,686,250	\$0	\$5,720,489
Other / Miscellaneous	\$0	\$165,902	\$0	\$177,947
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,852,152</b>	<b>\$0</b>	<b>\$5,898,436</b>

## Explanation of Revenues

This program generates \$650,996 in indirect revenues.

\$5,720,489 - Title XIX (Fed thru State)

\$177,947 - Case Management Assessments for Medicaid Patients (Local)

## Significant Program Changes

Last Year this program was: FY 2024: 25029 ADVSD Transition & Diversion

Decrease of 1.00 FTE. Moved 1.00 FTE Case Manager 2 to program offer 25023 (Federal/ State Fund)

**Department:** County Human Services

**Program Contact:** Joe Valtierra

**Program Offer Type:** Operating

**Program Offer Stage:** Adopted

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

### Executive Summary

Multnomah County's Supportive Housing Services (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 with disabilities that are experiencing homelessness in the Aging, Disability and Veterans Services Division (ADVSD) 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 disabled homeless households to disability resources, and connect those being served by ADVSD to critical permanent housing opportunities. Specifically, the program offer funds:

- A mobile team of assessment workers in ADVSD who partner with JOHS-funded homeless outreach and shelter programs to ensure that people experiencing unsheltered and sheltered homelessness are being assessed and, as appropriate, enrolled in enhanced Medicaid disability services, and have access to the critical support services that accompany that enrollment.
- Staffing capacity to support 15 chronically homeless households with connecting to Regional Long-Term Rent Assistance through Home Forward, including completing housing search, placement, providing ADVSD Medicaid case management, and other supportive retention services to achieve housing stability.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of people assessed for ADVSD services.	223	275	350	275
Output	Number of households enrolled in permanent housing programs*	N/A	15	15	15
Outcome	Percent of total unduplicated households remaining in housing at 6 months	N/A	80%	80%	80%
Outcome	Percent of total unduplicated households remaining in housing at 12 months	N/A	70%	70%	70%

### 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.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$1,244,454	\$0	\$733,257
Contractual Services	\$0	\$112,810	\$0	\$225,513
Internal Services	\$0	\$0	\$0	\$107,936
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,357,264</b>	<b>\$0</b>	<b>\$1,066,706</b>
<b>Program Total:</b>	<b>\$1,357,264</b>		<b>\$1,066,706</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 \$107,936 in indirect revenues.

\$1,066,706 - Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

Significant Program Changes

**Last Year this program was:** FY 2024: 30407A Supportive Housing - Countywide Coordination - Dept of County Human

FY 2024 Other Funds is Supportive Housing Services (SHS) Fund 1521. In FY 2024 these funds were budgeted in the Joint Office of Homeless Services programs:

- 30407A – Supportive Housing – Countywide Coordination – Dept of County Human Services
- 30400D – Supportive Housing – Tenant-Based Commitments

**Department:** County Human Services      **Program Contact:** Marina Khalina  
**Program Offer Type:** Operating      **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's 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 pre-screen and refer for Medicare, long-term care counseling, and public benefits. The ADRC also screens for intensive services such as Options Counseling, Oregon Project Independence, and Medicaid in-home services. The ADRC refers people to adult protective services, intellectual and developmental disability services, and the mental health crisis line. The ADRC partners with a community-based nonprofit organization 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Total reception, information, assistance and referral contacts to the ADRC Helpline <sup>1</sup>	53,611	N/A	47,425 <sup>2</sup>	47,000
Output	Number of contacts to the ADRC Helpline seeking referrals to County or community resources <sup>3</sup>	31,747	37,500	29,000	30,000
Outcome	Percent of contacts seeking referrals that resulted in at least one referral <sup>4</sup>	99%	N/A	98%	98%
Output	Number of referrals to County or community resources from the ADRC <sup>5</sup>	48,190	60,000	48,604	45,538

### Performance Measures Descriptions

<sup>1</sup>New measure. Includes 21,864 non-logged reception contacts. <sup>2</sup>Decrease expected due to new State criteria for logging contacts. <sup>3</sup>Measure reworded from: "Number of contacts to the Aging and Disability Resource Connection Helpline." <sup>4</sup>New measure. Based on logged contacts only. <sup>5</sup>Measure reworded from: "Number of referrals to County and community partner agencies from the ADRC." Former measure: "Percent of participants with a new ADVSD service after an ADVSD referral from the ADRC." Dropped due to lack of accurate data. FY23 Actual: 33% FY24 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	2024	2024	2025	2025
Personnel	\$398,792	\$2,313,116	\$413,167	\$2,324,573
Contractual Services	\$953,467	\$302,925	\$1,334,165	\$170,489
Materials & Supplies	\$280	\$91,146	\$280	\$112,989
Internal Services	\$65,261	\$487,305	\$69,392	\$636,610
<b>Total GF/non-GF</b>	<b>\$1,417,800</b>	<b>\$3,194,492</b>	<b>\$1,817,004</b>	<b>\$3,244,661</b>
<b>Program Total:</b>	<b>\$4,612,292</b>		<b>\$5,061,665</b>	
<b>Program FTE</b>	3.28	19.12	3.12	18.54

Program Revenues				
Intergovernmental	\$0	\$3,194,492	\$0	\$3,244,661
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,194,492</b>	<b>\$0</b>	<b>\$3,244,661</b>

## Explanation of Revenues

This program generates \$231,005 in indirect revenues.

\$2,594,841 - Title XIX (Federal)  
 \$345,191 - Outreach & Enrollment – MIPPA (Federal)  
 \$225,345 - ADRC – System-Wide Technical Assistance (State)  
 \$23,500 - Medicare (Federal)  
 \$19,800 - Title IIIB (OAA – Supportive Services) (Federal)  
 \$18,500 - Senior Medicare Patrol Grant (Federal)  
 \$12,828 - Title VIIB (OAA – Elder Abuse) (Federal)  
 \$2,880 - City of Troutdale (Local)  
 \$1,776 - City of Fairview (Local)

## Significant Program Changes

**Last Year this program was:** FY 2024: 25032 ADVSD Outreach, Information & Referral

Moved 0.50 FTE Program Specialist Sr to program offer 25038 and 0.35 FTE to program offer 25035  
 Increased one Community Information Specialist by 0.10 FTE

**Department:** County Human Services

**Program Contact:** Marina Khalina

**Program Offer Type:** Operating

**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. Service delivery has returned to the pre-pandemic model, which offers both home-delivered meals and meals 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. 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.

The new Nutrition contracts that begin during FY 2024 will expand culturally specific services to the Black and African American community which was a Division goal for this new contract process. Beginning January 1, 2025, with the new RFPQ services, the budget for culturally specific nutrition providers will increase from 38% to 46%.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of meals served	405,360 <sup>1</sup>	450,000	380,000 <sup>2</sup>	360,000 <sup>2</sup>
Outcome	Percent of meals through culturally specific services	13%	19%	14% <sup>2</sup>	14%
Output	Percent of high nutritional risk participants who experienced an improvement in their annual risk score	38%	45%	38%	38%
Outcome	Percent of home-delivered meal participants satisfied or very satisfied with nutritional services <sup>3</sup>	96%	92%	92%	92%

### Performance Measures Descriptions

<sup>1</sup>Decrease in # of meals served is due to the exclusion of non-invoiced meals served by Meals on Wheels People, which were included in previous budgeted and actual amounts. The FY23 Actual includes ARP funded meals. <sup>2</sup>Estimate is lower for FY24 and FY25 due to an increase in meal rates and the reduction in ARP funds, which had mostly been allocated to culturally specific providers. <sup>3</sup>Based on 1,628 responses to a survey of home delivered meal recipients administered by Meals on Wheels People in FY2023.

## 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	2024	2024	2025	2025
Personnel	\$0	\$76,200	\$0	\$0
Contractual Services	\$726,437	\$1,600,706	\$21,052	\$2,827,212
Materials & Supplies	\$2,000	\$3,786	\$2,000	\$3,786
Internal Services	\$0	\$6,256	\$0	\$7,254
<b>Total GF/non-GF</b>	<b>\$728,437</b>	<b>\$1,686,948</b>	<b>\$23,052</b>	<b>\$2,838,252</b>
<b>Program Total:</b>	<b>\$2,415,385</b>		<b>\$2,861,304</b>	
<b>Program FTE</b>	0.00	0.50	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,686,948	\$0	\$2,838,252
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,686,948</b>	<b>\$0</b>	<b>\$2,838,252</b>

## Explanation of Revenues

\$1,524,279- Title IIIC-1 (OAA – Congregate Meals) (Federal)  
 \$872,340 - Title IIIC-2 (OAA – Home Meals) (Federal)  
 \$372,658 - U.S. Department of Agriculture (Federal)  
 \$44,226 - PWD OPI Pilot Project (State)  
 \$13,709 - ARPA Federal Older Americans Act Title III-C Congregate/Delivered Meals (Federal)  
 \$11,040 - Title IIIB (OAA – Supportive Services) (Federal)

## Significant Program Changes

**Last Year this program was:** FY 2024: 25033 ADVSD Nutrition Program

Decrease of 0.50 FTE. Moved 0.25 FTE Program Specialist to program offer 25035, Moved 0.25 FTE Program Specialist to program offer 25038

**Department:** County Human Services

**Program Contact:** Marina Khalina

**Program Offer Type:** Operating

**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. Community agencies offer in person activities as well as expanded virtual course offerings.

### Program Description

**ISSUE:** Older adults are at higher 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of evidence based health promotion (EBHP) courses offered	22	28	25	25
Outcome	Percent of EBHP courses offered by culturally-specific providers	36%	35%	55%	60%
Output	Number of participants served by Care Transitions <sup>1</sup>	479	529 <sup>2</sup>	480	480
Outcome	Percent of evidence based Care Transition participants with no hospital readmission in 30 days	87%	88%	88%	87%

### Performance Measures Descriptions

<sup>1</sup>Includes the full Metro Care Transitions Program, which includes Multnomah, Clackamas, Washington and Yamhill county residents. <sup>2</sup>This amount is the maximum number of clients served per year based on budget rates. Because clients are occasionally seen multiple times during a fiscal year, this amount is not always reached.

## 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	2024	2024	2025	2025
Personnel	\$28,658	\$359,579	\$0	\$405,056
Contractual Services	\$33,023	\$42,560	\$91,633	\$123,335
Materials & Supplies	\$12,408	\$275	\$12,408	\$1,586
Internal Services	\$29,112	\$80,404	\$0	\$98,514
<b>Total GF/non-GF</b>	<b>\$103,201</b>	<b>\$482,818</b>	<b>\$104,041</b>	<b>\$628,491</b>
<b>Program Total:</b>	<b>\$586,019</b>		<b>\$732,532</b>	
<b>Program FTE</b>	0.22	2.78	0.00	3.00

Program Revenues				
Intergovernmental	\$0	\$364,439	\$0	\$378,538
Other / Miscellaneous	\$0	\$118,379	\$0	\$249,953
<b>Total Revenue</b>	<b>\$0</b>	<b>\$482,818</b>	<b>\$0</b>	<b>\$628,491</b>

## Explanation of Revenues

This program generates \$59,624 in indirect revenues.  
 \$321,879 - ADRC – Person Centered Option Counseling Medicaid (State)  
 \$249,953 - Providence Health Services – Metro Care Transitions (Local)  
 \$32,128 – Title IIID (OAA – Health Promotion) (Federal)  
 \$24,531 - ARPA Federal Older Americans Act Title III-D Preventive Health (Federal)

## Significant Program Changes

Last Year this program was: FY 2024: 25034 ADVSD Health Promotion

Moved 0.22 FTE from General Fund to Federal/ State Fund

**Program #25035 - ADVSD Case Management & In-Home Services (non-Medicaid) FY 2025 Adopted**

**Department:** County Human Services      **Program Contact:** Marina Khalina  
**Program Offer Type:** Operating      **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 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. ADVSD developed a strategic plan for service delivery based on community listening sessions. The Division also changed its funding allocation strategy 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 as independent as possible 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 support person-centered care plans. 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 2024 this program will include Medicaid funding from Oregon Project Independence-Medicaid (OPI-M).

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of people receiving case management and/or in-home services	2,165	3,400 <sup>1</sup>	2,698	2,400
Outcome	Percent of participants served by a culturally specific provider <sup>2</sup>	45%	N/A	46%	45%

**Performance Measures Descriptions**

<sup>1</sup>The FY24 Budget amount was based on the expectation that OPI-M would be implemented in FY24. The OPI-M rollout is now expected in late FY24. <sup>2</sup>New measure. Includes participants served by culturally specific providers in the following programs: Older Americans Act Case Management, Oregon Project Independence (OPI), OPI-Expansion, and Options Counseling. Former measure: "Percent of Oregon Project Independence participants who did not enroll in Title XIX services." Dropped due to implementation of OPI-M. FY23 Actual: 84%. FY24 Estimate: 93%.



## 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	2024	2024	2025	2025
Personnel	\$251,148	\$1,004,049	\$207,309	\$1,455,126
Contractual Services	\$1,373,377	\$10,763,703	\$1,132,717	\$9,950,500
Materials & Supplies	\$104	\$16,191	\$104	\$29,182
Internal Services	\$94,315	\$378,177	\$112,284	\$354,140
<b>Total GF/non-GF</b>	<b>\$1,718,944</b>	<b>\$12,162,120</b>	<b>\$1,452,414</b>	<b>\$11,788,948</b>
<b>Program Total:</b>	<b>\$13,881,064</b>		<b>\$13,241,362</b>	
<b>Program FTE</b>	1.43	9.26	1.05	12.05

Program Revenues				
Intergovernmental	\$0	\$12,154,334	\$0	\$11,780,773
Service Charges	\$0	\$7,786	\$0	\$8,175
<b>Total Revenue</b>	<b>\$0</b>	<b>\$12,162,120</b>	<b>\$0</b>	<b>\$11,788,948</b>

## Explanation of Revenues

This program generates \$15,484 in indirect revenues.  
 \$9,475,266 - Veteran's Directed Home & Community Services (Federal)  
 \$765,245 - Title XIX (Federal)  
 \$597,479 - Oregon Project Independence (State)  
 \$296,008 - Title IIIB (OAA – Supportive Services) (Federal)  
 \$174,091 - PWD OPI Pilot Project (State)  
 \$149,100- Oregon Money Management Program (State)  
 \$247,220- Title IIIE (OAA – Caregiver Support) (Federal)  
 \$76,364- Title IIID (OAA – Health Promotion) (Federal)  
 \$8,175 - Client Employer Provider Fees (Local)

## Significant Program Changes

**Last Year this program was:** FY 2024: 25035 ADVSD Case Management & In-Home Services (non-Medicaid)

Increase of 2.41 FTE. Moved 0.35 FTE Program Specialist Sr from program offer 25032. Moved 0.25 FTE Program Specialist from program offer 25033. Moved 0.25 FTE Data Analyst and 0.50 Program Specialist from program offer 25037. Moved 0.25 FTE Program Specialist and 1.00 OA Sr from program offer 25038.  
 Added new 1.00 Program Technician

Moved 1.00 Case Management Assistant and 0.19 FTE Program Specialist to program offer 25038

**Department:** County Human Services

**Program Contact:** Marina Khalina

**Program Offer Type:** Operating

**Program Offer Stage:** Adopted

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

### Executive Summary

The Safety Net Program helps prevent eviction and stabilize housing for vulnerable older adults, people with disabilities, and Veterans. It also helps prevent participant health decline by providing things like dentures, eyeglasses, and prescription medicine assistance. This program offer also provides contractor funding for the Older Adult In-Home Care Program (OAIHC) which serves participants age 55+ who have been chronically homeless and recently placed into stable housing.

### Program Description

**ISSUE:** Many older adults, people with disabilities, and Veterans struggle with the increasing cost of housing and medical expenses. In addition, poor housekeeping can have negative consequences on health, including increased risk of falls, infection and social isolation, and can even lead to eviction.

**PROGRAM GOAL:** The Safety Net and OAIHC Programs help participants remain safely and stably housed and offer wrap-around support to address a variety of factors that contribute to eviction and health decline. The Safety Net team provides training to referring County and community-based case managers to ensure equitable access and reduce barriers to the program, particularly for marginalized communities.

**PROGRAM ACTIVITY:** The Safety Net Program provides housing assistance to individuals who are experiencing or at risk of homelessness. They address health and safety concerns that might lead to eviction. Safety Net participants can also receive assistance with items often not covered by other programs, such as eyeglasses, dentures, durable medical equipment and short-term help with prescription medications. The OAIHC Program supports individuals with a history of chronic homelessness who've recently been placed in stable housing by providing the critical resources needed to continue living independently. Services are determined based on a person-centered care plan and can include support with: housekeeping, eviction prevention, transportation, grocery delivery, checking and understanding mail, advocacy during medical appointments, and more.

The 2022 Point in Time Report indicated that 17% of individuals experiencing homelessness in Multnomah County identified as Black and African American. In 2023, 27% of consumers who received Safety Net housing and eviction prevention services identified as Black and African American. In the coming year, the program will increase outreach efforts to partners who serve the Latino/a/x/e, Native American, Alaskan Native, and Indigenous communities.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of people who received Safety Net services	564	650	406 <sup>1</sup>	485
Outcome	Percent of requests for Safety Net services fulfilled to avert eviction	60%	70%	68%	70%
Output	Number of people served through the Older Adult In-Home Care (OAIHC) Program	N/A	30	30	30
Outcome	Percent of OAIHC participants stably housed / moved to more stable housing 6 months post services	N/A	80%	80%	80%

### Performance Measures Descriptions

<sup>1</sup>The FY24 estimated amount is lower due to the fact that costs of all services have increased (deposits, rent, utilities and contracted services).

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$132,589	\$132,589	\$137,886	\$138,336
Contractual Services	\$633,399	\$0	\$575,055	\$0
Materials & Supplies	\$1,932	\$0	\$1,932	\$0
Internal Services	\$8,589	\$26,561	\$13,267	\$33,630
<b>Total GF/non-GF</b>	<b>\$776,509</b>	<b>\$159,150</b>	<b>\$728,140</b>	<b>\$171,966</b>
<b>Program Total:</b>	<b>\$935,659</b>		<b>\$900,106</b>	
<b>Program FTE</b>	1.00	1.00	1.00	1.00

Program Revenues				
Intergovernmental	\$0	\$159,150	\$0	\$171,966
<b>Total Revenue</b>	<b>\$0</b>	<b>\$159,150</b>	<b>\$0</b>	<b>\$171,966</b>

Explanation of Revenues

This program generates \$20,363 in indirect revenues.  
 \$171,966 - Title XIX (Federal)

Significant Program Changes

Last Year this program was: FY 2024: 25036 ADVSD Safety Net Program

Contractual services includes \$75,000 in ongoing General Fund to support in-home care needs for older adults. It focuses on the most vulnerable older adults at risk of experiencing homelessness, connecting them to critical resources needed to continue living independently. In FY 2024, this was funded with one-time-only General Fund (25036B).

**Department:** County Human Services      **Program Contact:** Marina Khalina  
**Program Offer Type:** Operating      **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 2022 county transportation survey was conducted in 13 languages. The survey sought input specifically from participants who speak languages other than English and/or identify as Black, Indigenous, or a Person of Color in order to identify services and supports needed by those communities. 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 survey results showed that safety is a top concern for Transportation program participants and many prefer door-to-door transportation options.

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

**PROGRAM ACTIVITY:** County and contracted community partners use case managers and transportation coordinators to screen for eligibility and estimate current transportation needs. They authorize services based on available resources 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 TransDev.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of participants who received transportation assistance	1,276	1,200	1,194	1,200
Outcome	Percent of non-Medicaid participants who report increased mobility because of transportation services <sup>1</sup>	91%	85%	91%	90%
Outcome	Percent of non-Medicaid participants who were satisfied with transportation services received <sup>2</sup>	89%	N/A	89%	90%

### Performance Measures Descriptions

<sup>1</sup>Methodology updated to only include valid responses of “yes” or “no”. Based on 103 responses to a survey of FY2022 service recipients administered by ADVSD. Survey is administered every 3 years. <sup>2</sup>New Measure. Based on 99 responses to a survey of FY2022 service recipients administered by ADVSD. Survey is administered every 3 years.

## 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	2024	2024	2025	2025
Personnel	\$0	\$164,361	\$0	\$0
Contractual Services	\$149,122	\$1,889,201	\$154,639	\$2,014,113
Materials & Supplies	\$0	\$40	\$9,000	\$40
Internal Services	\$0	\$32,388	\$0	\$12,465
<b>Total GF/non-GF</b>	<b>\$149,122</b>	<b>\$2,085,990</b>	<b>\$163,639</b>	<b>\$2,026,618</b>
<b>Program Total:</b>	<b>\$2,235,112</b>		<b>\$2,190,257</b>	
<b>Program FTE</b>	0.00	1.38	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$2,085,990	\$0	\$2,026,618
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,085,990</b>	<b>\$0</b>	<b>\$2,026,618</b>

## Explanation of Revenues

\$1,421,256 - Medicaid Community Transportation (Federal)  
 \$546,430 - TriMet Community Transportation Local Match (Local)  
 \$50,921 - PWD OPI Pilot Project (State)  
 \$8,011 - Title III B (OAA – Supportive Services) (Federal)

## Significant Program Changes

**Last Year this program was:** FY 2024: 25037 ADVSD Transportation Services

Decrease of 1.38 FTE. Moved 0.25 FTE Data Analyst and 0.50 Program Specialist to program offer 25035. Moved 0.13 FTE Data Analyst to program offer 25038.

**Department:** County Human Services      **Program Contact:** Marina Khalina  
**Program Offer Type:** Operating      **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. Volunteers participate in programs such as the Foster Grandparents Program where volunteers help children learn to read and provide one-on-one tutoring or mentor teenagers and young parents; or the Senior Health Insurance Benefits Assistance (SHIBA) program where volunteers assist seniors with Medicare plans enrollment, file claims and to compare insurance policies.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of volunteer hours donated to ADVSD <sup>1</sup>	3,874	38,000	6,400 <sup>2</sup>	22,000
Outcome	Percent of ADVSD contract funding for culturally specific providers <sup>3</sup>	38%	38%	42%	46%
Outcome	Percent of SHIBA participants who reported improved understanding of Medicare options (4)	83%	N/A	78%	80%

**Performance Measures Descriptions**

<sup>1</sup>This measure includes the full Foster Grandparents Program (FGP) service area (Multnomah, Washington, and Clackamas County). <sup>2</sup>This decrease is largely due to a reduction in school-based placement opportunities for FGP volunteers.

<sup>3</sup>Contracts are specific to the Federal Older Americans Act and Oregon Project Independence. FY24 estimate and FY25 offer are based on budgeted amounts and FY23 are actual expenditures. 4) New measure. Percent of 53 responses from SHIBA's Participant Experience Project Survey conducted during Fall 2022 Open Enrollment.

## 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	2024	2024	2025	2025
Personnel	\$433,231	\$2,087,778	\$464,148	\$2,058,480
Contractual Services	\$131,647	\$2,315,643	\$67,909	\$1,259,087
Materials & Supplies	\$9,578	\$112,918	\$9,576	\$84,077
Internal Services	\$80,906	\$525,597	\$106,275	\$532,934
<b>Total GF/non-GF</b>	<b>\$655,362</b>	<b>\$5,041,936</b>	<b>\$647,908</b>	<b>\$3,934,578</b>
<b>Program Total:</b>	<b>\$5,697,298</b>		<b>\$4,582,486</b>	
<b>Program FTE</b>	3.31	16.12	3.33	14.92

Program Revenues				
Intergovernmental	\$0	\$4,798,419	\$0	\$3,691,061
Service Charges	\$0	\$243,517	\$0	\$243,517
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,041,936</b>	<b>\$0</b>	<b>\$3,934,578</b>

## Explanation of Revenues

This program generates \$78,304 in indirect revenues.

\$1,259,157 - Title XIX (Federal)

\$576,952 - Title IIIB (OAA – Supportive Services) (Federal)

\$435,504 - Veteran's Directed Home & Community Services (Federal)

\$380,016 - Oregon Money Management Program (State)

\$358,761 - Foster Grandparent Program (Federal)

\$243,517 - Contractor Rentals (Local)

\$187,493 - Title IIIC-1 (OAA – Congregate Meals) (Federal)

\$177,661 - State GF-SEQ Assist (Federal)

\$128,531 - ARPA Federal Older Americans Act Title III-B Supportive Services (Federal)

\$186,986 - Older/Disabled Mental Health (Federal)

## Significant Program Changes

**Last Year this program was:** FY 2024: 25038 ADVSD Advocacy & Community Program Operations

Decrease of 1.18 FTE. Moved 1.00 Case Manager 2 to program offer 25025, moved 1.00 OA Sr and 0.25 Program Specialist Sr to program offer 25035, moved 0.50 OA2 to program offer 25039, cut 1.00 Program Specialist Sr

Increases: Moved 0.50 FTE Program Specialist Sr from program offer 25032, moved 0.25 FTE Program Specialist from program offer 25033, moved 1.00 Case Management Assistant and 0.19 Program Specialist from program offer 25035, moved 0.13 FTE Data Analyst and 0.50 Program Technician from program offer 25037

During FY 2024, 1.00 FTE Program Supervisor was reclassified to a Manager 1.

**Department:** County Human Services      **Program Contact:** Marina Khalina  
**Program Offer Type:** Operating      **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 case management, 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 program uses a hybrid model of virtual and in-person connections that include support groups, events, and training. FCSP targets outreach to diverse communities by collaborating with Enhancing Equity partners to develop and provide culturally specific programming. In FY25 the program plans to provide additional elder specific training and events.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of participants served by the Family Caregiver Support Program	329	325	334	325
Outcome	Percent of caregivers satisfied with services received <sup>1</sup>	92%	N/A	92%	92%
Outcome	Percent of caregivers who said services received helped them keep their loved one(s) at home <sup>2</sup>	90%	N/A	90%	90%

**Performance Measures Descriptions**

<sup>1</sup>New measure. Based on 50 responses to a survey of FY2023 participants. Survey is administered by ADVSD every 3 years. Former measure: “Percent of family caregivers who report services received were excellent or good”. Dropped due to changes in survey design. FY23 Actual and FY24 Estimate: Data not available. Former measure: “Percent of family caregivers who attended a training or event that would recommend the program” Dropped due to insufficient response rate. FY23 Actual and FY24 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	2024	2024	2025	2025
Personnel	\$92,681	\$59,255	\$146,392	\$51,389
Contractual Services	\$100,387	\$291,170	\$0	\$414,780
Materials & Supplies	\$0	\$21,031	\$0	\$21,031
Internal Services	\$61	\$15,681	\$14,054	\$0
<b>Total GF/non-GF</b>	<b>\$193,129</b>	<b>\$387,137</b>	<b>\$160,446</b>	<b>\$487,200</b>
<b>Program Total:</b>	<b>\$580,266</b>		<b>\$647,646</b>	
<b>Program FTE</b>	0.61	0.39	1.00	0.50

Program Revenues				
Intergovernmental	\$0	\$387,137	\$0	\$487,200
<b>Total Revenue</b>	<b>\$0</b>	<b>\$387,137</b>	<b>\$0</b>	<b>\$487,200</b>

## Explanation of Revenues

\$385,278 - Title III-E (OAA – Caregiver Support) (Federal)

\$101,922 - ARPA Federal Older Americans Act Title III-E Family Caregivers

## Significant Program Changes

**Last Year this program was:** FY 2024: 25039 ADVSD Family Caregiver Program

Increase of 0.50 FTE. Moved 0.50 FTE Office Assistant 2 from program offer 25038

### 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 reflect our work: 1) Energy Services, 2) Housing Stability, 3) Education Supports, 4) Early Childhood, and 5) 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 Supplemental Nutrition Assistance Program (SNAP) benefits, domestic violence emergency response, kindergarten transition, housing stability assistance, Assertive Engagement, sexual assault services, youth advocacy, after-school programming, home weatherization, and more. In FY 2023: 427 domestic and sexual assault survivors received specialized legal consultation through the Gateway Center; 2,238 households were served weekly at pantries and free food market at 31 SUN Community School sites; 16,829 youth engaged in services through SUN Community Schools; 29,474 households received energy bill payment support; the SNAP outreach team connected with 4,735 people with information about SNAP benefits; 905 people received culturally specific legal navigation services; and 93% of youth exiting a housing stabilization program were able to identify having at least one stable adult in their lives.

Over 79% 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, school districts, the Joint Office for Homeless Services, and other departments within the County.

# \$97.7 million

## Youth and Family Services

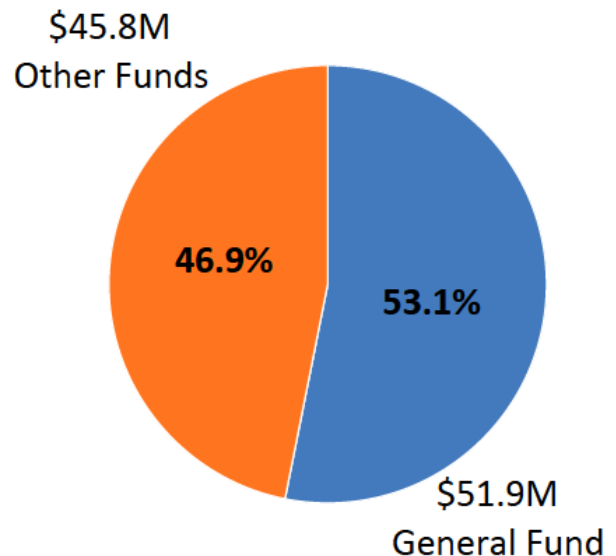
Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.



# 120.50 FTE

(full time equivalent)



### Significant Division Changes

In FY 2025, YFS will adapt process and strategy in response to recommendations that will result from a strategic assessment of Youth & Family Services’ organizational structure that is currently being conducted; we will utilize change management principles to work through this process.

Supporting BIPOC community members to remain in stable housing continues to be a priority for YFS. 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. We continue to strengthen our engagement with, and support of, immigrant and refugee communities newly arriving to Multnomah County.

YFS was tasked with implementing a high volume of emergency rent assistance since early in the pandemic. As American Rescue Plan (ARP) funds begin to sunset and DCHS transitions to other funding for rent assistance, there will be a reduction in the number of households DCHS can support with rent assistance. As evictions continue to rise in Multnomah County, DCHS will continue to look for opportunities to expand emergency rent assistance as an upstream approach to prevent homelessness. For FY 2025 DCHS has Supportive Housing Services, ARP, State and County General Fund funding for emergency rent assistance.

Continuing to support employees to experience safety, trust and belonging in the workplace is a priority in FY 2025. Efforts such as implementing trauma informed practices, a revamped onboarding process, creating an employee feedback loop, creating space for shared learning focused on racial equity and developing a new mission, vision and values for YFS are all ways we are working towards these goals. These are directly in support of the WESP and the Department’s Sustainable Business Plan.

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Youth and Family Services</b>						
25041	YFS - Domestic Violence Crisis Services		467,800	0	467,800	0.00
25044	YFS - Domestic and Sexual Violence Coordination		791,884	75,600	867,484	4.00
25046	YFS - Domestic Violence Legal Services		221,355	35,000	256,355	0.00
25047A	YFS - Domestic Violence Crisis Response Unit		1,344,731	343,583	1,688,314	11.00
25047B	YFS - Domestic Violence Services to Highly Vulnerable Survivors		236,655	0	236,655	1.00
25048	YFS - Culturally Specific and Underserved Domestic & Sexual Violence Services		864,826	0	864,826	0.00
25049	YFS - Sexual Assault Services		893,624	0	893,624	1.00

# County Human Services

## FY 2025 Adopted Budget

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
25050A	YFS - Gateway Center		788,465	1,102,807	1,891,272	6.00
25050B	YFS - Domestic Violence Housing Support - Supportive Housing Services	X	0	733,631	733,631	2.00
25118	YFS - Youth & Family Services Administration		2,631,589	177,476	2,809,065	14.00
25119	YFS - Energy Assistance		0	11,975,403	11,975,403	7.50
25121A	YFS - Weatherization		0	7,925,065	7,925,065	12.50
25121B	YFS - Climate Resilience	X	152,948	0	152,948	1.00
25121C	YFS - Cooling Kits for Summertime	X	50,000	0	50,000	0.00
25130	YFS - Family Unification Program		648,440	300,000	948,440	0.00
25131A	YFS - Legal Services & Supports		491,246	0	491,246	0.00
25131B	YFS - Peer Navigators		621,261	0	621,261	0.00
25131C	YFS - Eviction Prevention Support		446,256	0	446,256	0.00
25131D	YFS - Record and Fee Expungement Program (Project Reset)	X	325,000	0	325,000	0.00
25131E	YFS - Eviction Prevention: In Courtroom Support	X	330,000	250,000	580,000	0.00
25133A	YFS - Housing Stabilization for Vulnerable Populations (HSVP)		1,439,218	3,737,764	5,176,982	2.00
25133B	YFS - Emergency Rent Assistance	X	3,643,160	2,000,000	5,643,160	8.50
25133C	YFS - Eviction Prevention	X	3,308,738	1,798,107	5,106,845	6.00
25134	YFS - Fair Housing Testing in East Multnomah County		125,110	0	125,110	0.00
25135	YFS - Sex Trafficked Youth Services		1,041,761	0	1,041,761	0.00
25136	YFS - Culturally Specific Navigation Services for Immigrant Families		301,335	0	301,335	0.00
25137	YFS - Successful Families		2,840,983	0	2,840,983	1.00
25138	YFS - Youth Stability & Homelessness Prevention Services		1,457,757	110,000	1,567,757	0.00
25139A	YFS - Multnomah Stability Initiative (MSI)		3,292,411	1,167,557	4,459,968	2.00
25139B	YFS - Multnomah Stability Initiative (MSI) - Supportive Housing Services		0	4,779,560	4,779,560	1.00
25140	YFS - Community Development in East Multnomah County		155,627	430,000	585,627	1.00
25141	YFS - Supplemental Nutrition Assistance Program (SNAP) Outreach		161,921	163,043	324,964	2.00
25145	YFS - SUN Community Schools		8,995,153	2,678,362	11,673,515	4.00
25146	YFS - SUN Community Schools: Family Resource Navigators	X	3,000,000	0	3,000,000	0.00

# County Human Services

## FY 2025 Adopted Budget

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
25147A	YFS - Child & Family Hunger Relief		528,738	0	528,738	1.00
25147B	YFS - Food Security / Pantry Enhancement	X	180,000	0	180,000	0.00
25149	YFS - SUN Youth Advocacy Program		3,016,884	100,000	3,116,884	0.00
25151	YFS - SUN Parent & Child Development Services		1,898,759	412,935	2,311,694	0.50
25152	YFS - Early Learning Family Engagement and Kindergarten Transition		424,251	1,036,120	1,460,371	1.00
25155	YFS - Sexual & Gender Minority Youth Services		375,521	0	375,521	0.00
25156A	YFS - Bienestar Social Services		2,386,697	4,225,592	6,612,289	19.60
25156B	YFS - Bienestar Social Services Expansion		61,843	0	61,843	0.40
25160	YFS - Data and Evaluation Services		<u>1,958,616</u>	<u>211,782</u>	<u>2,170,398</u>	<u>10.50</u>
<b>Total Youth and Family Services</b>			<b>\$51,900,563</b>	<b>\$45,769,387</b>	<b>\$97,669,950</b>	<b>120.50</b>

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of domestic violence survivors and children receiving comprehensive, specialized crisis services	437	400	400	400
Outcome	Percentage of adult survivors who engaged in safety planning with an advocate	94%	90%	90%	90%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$452,856	\$0	\$467,800	\$0
<b>Total GF/non-GF</b>	<b>\$452,856</b>	<b>\$0</b>	<b>\$467,800</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$452,856</b>		<b>\$467,800</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

Significant Program Changes

Last Year this program was: FY 2024: 25041 YFS - Domestic Violence Crisis Services

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**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. 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Percentage of survivors from BIPOC and/or underserved communities engaged in community advisory bodies	54%	50%	50%	50%
Outcome	Percentage of non-profit partners receiving higher scores on the 'Performance Indicator tool'	100%	70%	85%	N/A
Output	Number of DV Continuum collaborative meetings staffed by the DSVCO	166	150	150	125
Outcome	Percentage of contracted providers reporting that the DSVCO is responsive and supportive of their work	N/A	85%	N/A	85%

### Performance Measures Descriptions

1. The DSVCO is phasing out the use of the Performance Indicator Tool due to the close of the federal grant that required its use.
2. FY24 was the first year of new contracts to partner agencies, and a survey was not conducted. Survey will be conducted in FY25



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$627,018	\$89,519	\$666,147	\$50,000
Contractual Services	\$25,927	\$25,800	\$19,035	\$25,600
Materials & Supplies	\$13,529	\$0	\$12,200	\$0
Internal Services	\$114,492	\$4,869	\$94,502	\$0
<b>Total GF/non-GF</b>	<b>\$780,966</b>	<b>\$120,188</b>	<b>\$791,884</b>	<b>\$75,600</b>
<b>Program Total:</b>	<b>\$901,154</b>		<b>\$867,484</b>	
<b>Program FTE</b>	3.77	0.45	3.78	0.22

Program Revenues				
Fees, Permits & Charges	\$0	\$3,600	\$0	\$3,600
Intergovernmental	\$0	\$94,588	\$0	\$72,000
Other / Miscellaneous	\$0	\$22,000	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$120,188</b>	<b>\$0</b>	<b>\$75,600</b>

Explanation of Revenues

- \$50,000 - City of Portland Intergovernmental Agreement (Local)
- \$22,000 - Weston Grant (Local)
- \$3,600 - Domestic Partnership Fees (Local)

Significant Program Changes

Last Year this program was: FY 2024: 25044 YFS - Domestic and Sexual Violence Coordination

Decrease 0.23 FTE Program Specialist Senior

**Department:** County Human Services      **Program Contact:** Rachel Pearl  
**Program Offer Type:** Operating      **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.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of domestic violence survivors assisted with courthouse-based restraining order advocacy	2,569	800	800	800
Outcome	Percentage of retained cases with a court action filed or contested by an attorney	100%	75%	80%	75%
Output	Percentage of participants who identify as BIPOC	50%	40%	40%	40%

**Performance Measures Descriptions**

Legal Services contractors served significantly more participants in FY23 because of a shift to phone-based services that was necessary due to ongoing closure of the court to in-person advocacy services. The number reported represents 649 unique individuals served with in-person support, plus 1950 total calls made to the funded protection order hotline. We anticipate that service levels will return to their previous baseline in FY24 and FY25, as in-person court support has restarted.

**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>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Contractual Services	\$216,401	\$35,000	\$221,355	\$35,000
<b>Total GF/non-GF</b>	<b>\$216,401</b>	<b>\$35,000</b>	<b>\$221,355</b>	<b>\$35,000</b>
<b>Program Total:</b>	<b>\$251,401</b>		<b>\$256,355</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
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 2024: 25046 YFS - Domestic Violence Legal Services

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**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 provide in-person services.

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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of survivors receiving multi-disciplinary, intensive intervention	171	250	200	200
Outcome	Percentage of survivors who engaged in safety planning with an advocate	N/A	N/A	N/A	85%
Output	Number of domestic violence survivors referred by police to afterhours victim advocates	486	500	500	500

### Performance Measures Descriptions

Measure 2 is new this year, and replaces an outcome measure that no longer captures the work done by the DVCRU

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$988,119	\$348,827	\$1,042,553	\$343,583
Contractual Services	\$60,000	\$0	\$60,000	\$0
Materials & Supplies	\$7,940	\$0	\$2,046	\$0
Internal Services	\$222,923	\$0	\$240,132	\$0
<b>Total GF/non-GF</b>	<b>\$1,278,982</b>	<b>\$348,827</b>	<b>\$1,344,731</b>	<b>\$343,583</b>
<b>Program Total:</b>	<b>\$1,627,809</b>		<b>\$1,688,314</b>	
<b>Program FTE</b>	8.00	3.00	8.09	2.91

Program Revenues				
Intergovernmental	\$0	\$348,827	\$0	\$343,583
<b>Total Revenue</b>	<b>\$0</b>	<b>\$348,827</b>	<b>\$0</b>	<b>\$343,583</b>

Explanation of Revenues

\$343,583 - City of Portland General Fund (Local)

Significant Program Changes

Last Year this program was: FY 2024: 25047 YFS - Domestic Violence Crisis Response Unit

0.09 FTE Victim Advocate moved from Federal/ State Fund to General Fund

**Department:** County Human Services      **Program Contact:** Rachel Pearl

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

**Related Programs:**
**Program Characteristics:** New Request, Backfill State/Federal/Grant

**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. This funding retains a portion of the capacity (previously funded through the American Rescue Plan) 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:** 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. Domestic violence services help ensure that support is available for survivors when the time is right for them.

**PROGRAM GOAL:** Peer-delivered 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. **Domestic Violence Recovery Mentor (DVRM):** This program supports community-based advocates working at the intersection of domestic violence and substance abuse recovery. Peer Mentors offer lived experience as survivors in recovery, and are uniquely positioned to provide participants with a wide range of intensive, long-term support and advocacy. This offer funds one DVRM with a culturally-specific focus, contracted with Raphael House of Portland.
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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of individuals receiving culturally/population-specific domestic violence services	91	200	180	30
Output	Number of survivors receiving multi-disciplinary, intensive intervention	114	150	150	75
Outcome	Percentage of adult survivors who engage in safety planning with an advocate by exit	100%	85%	85%	85%

**Performance Measures Descriptions**

Reduction in FY 2025 targets reflect the reduction of 1.00 County FTE as well as three contracted positions from FY 2024 (PO 25399C)

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$229,351	\$126,237	\$0
Contractual Services	\$0	\$584,433	\$110,418	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$813,784</b>	<b>\$236,655</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$813,784</b>		<b>\$236,655</b>	
<b>Program FTE</b>	0.00	2.00	1.00	0.00

Program Revenues				
Intergovernmental	\$0	\$813,784	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$813,784</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2024: 25399C ARP - Domestic Violence Services

In FY 2024, this program was funded with Federal American Rescue Plan (ARP) Direct County Funding.

**Department:** County Human Services      **Program Contact:** Rachel Pearl

**Program Offer Type:** Operating      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
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	87%	90%	90%	90%
Output	Percentage of participants who identify as BIPOC	82%	75%	75%	75%

### Performance Measures Descriptions



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$837,198	\$0	\$864,826	\$0
<b>Total GF/non-GF</b>	<b>\$837,198</b>	<b>\$0</b>	<b>\$864,826</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$837,198</b>		<b>\$864,826</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 2024: 25048 YFS - Culturally Specific and Underserved Domestic & Sexual Violence

**Department:** County Human Services

**Program Contact:** Alix Sanchez

**Program Offer Type:** Operating

**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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of sexual assault survivors who receive specialized crisis services	206	150	150	150
Outcome	Percentage of adult survivors who engage in safety planning with an advocate	97%	90%	90%	90%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$173,413	\$0	\$180,100	\$0
Contractual Services	\$668,661	\$0	\$690,727	\$0
Materials & Supplies	\$0	\$0	\$1,300	\$0
Internal Services	\$20,904	\$0	\$21,497	\$0
<b>Total GF/non-GF</b>	<b>\$862,978</b>	<b>\$0</b>	<b>\$893,624</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$862,978</b>		<b>\$893,624</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 2024: 25049 YFS - Sexual Assault Services

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**Program Offer Stage:** Adopted

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

### Executive Summary

The Gateway Center is a 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. 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.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of community members who are able to access protection orders at the Gateway Center	1,355	1,300	1,300	1,300
Outcome	Percentage of participants reporting increased knowledge of and access to resources	91%	85%	85%	85%
Output	Number of domestic violence and/or sexual assault survivors seen at intake for legal consultation	427	375	375	375
Output	Number of retained cases with immigration relief actions filed by legal service attorneys	33	14	20	20

### Performance Measures Descriptions

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$218,535	\$578,429	\$230,461	\$613,717
Contractual Services	\$150,028	\$518,888	\$154,979	\$487,842
Materials & Supplies	\$8,350	\$0	\$9,350	\$0
Internal Services	\$339,382	\$30,731	\$393,675	\$1,248
<b>Total GF/non-GF</b>	<b>\$716,295</b>	<b>\$1,128,048</b>	<b>\$788,465</b>	<b>\$1,102,807</b>
<b>Program Total:</b>	<b>\$1,844,343</b>		<b>\$1,891,272</b>	
<b>Program FTE</b>	2.00	4.00	2.00	4.00

Program Revenues				
Intergovernmental	\$0	\$1,128,048	\$0	\$1,102,807
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,128,048</b>	<b>\$0</b>	<b>\$1,102,807</b>

Explanation of Revenues

\$1,102,807- City of Portland Intergovernmental Agreement (Local)

Significant Program Changes

Last Year this program was: FY 2024: 25050 YFS - Gateway Center

**Department:** County Human Services      **Program Contact:** Rachel Pearl  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

### Executive Summary

Domestic violence is one of the leading causes of homelessness for women and children in Multnomah County. In the 2022 Point in Time Count of unhoused individuals, over one third of respondents indicated that they had experienced domestic violence. Dedicated housing support provides survivors of domestic and sexual violence with specialized services to both prevent homelessness and support unhoused survivors in accessing and retaining safe and stable housing.

### Program Description

**ISSUE:** Domestic violence is one of the leading causes of homelessness for women and children in Multnomah County. The majority of survivors also experience financial abuse, which can make accessing and retaining stable housing even more challenging.

**PROGRAM GOAL:** Support survivors of domestic and sexual violence to access and retain safe, stable housing through housing-focused case management, flexible client assistance and eviction prevention services. These services are open to all survivors in Multnomah County, with a priority to serve BIPOC survivors and those from other historically marginalized communities.

**PROGRAM ACTIVITY:** Housing advocates (1.00 FTE County staff stationed at the Gateway Center, 2.00 FTE contracted staff at culturally specific programs) will provide eviction prevention, housing system navigation, shelter diversion, and other housing-related wraparound services, including housing retention support at culturally specific agencies. Each position is allocated a significant client assistance budget to be utilized in a variety of ways to support survivors in their unique housing related needs. This includes eviction prevention, clearing housing-related debt, move-in costs, and rental/deposit assistance. This program also includes a 1.00 FTE Housing Assessor (County staff).

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of individuals receiving individualized housing support services	N/A	N/A	N/A	200
Outcome	Percentage of participants exiting to stable 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	2024	2024	2025	2025
Personnel	\$0	\$109,268	\$0	\$238,934
Contractual Services	\$0	\$0	\$0	\$459,526
Internal Services	\$0	\$0	\$0	\$35,171
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$109,268</b>	<b>\$0</b>	<b>\$733,631</b>
<b>Program Total:</b>	<b>\$109,268</b>		<b>\$733,631</b>	
<b>Program FTE</b>	0.00	1.00	0.00	2.00

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

Explanation of Revenues

This program generates \$35,171 in indirect revenues.

\$733,631 Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments. Of this amount, \$598,302 is one-time-only funding. The one-time-only funding includes \$120,969 (1.00 FTE) in personnel, \$459,526 in contractual services, and \$17,807 in internal services (indirect).

Significant Program Changes

**Last Year this program was:** FY 2024: 30407A Supportive Housing - Countywide Coordination - Dept of County Human  
Services  
 FY 2024 Other Funds is Supportive Housing Services (SHS) Fund 1521. In FY 2024 these funds were budgeted in the Joint Office of Homeless Services program 30303B – Housing Placement & Retention – Domestic Violence - SHS.

**Department:** County Human Services      **Program Contact:** Rachel Pearl  
**Program Offer Type:** Administration      **Program Offer Stage:** Adopted  
**Related Programs:**  
**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 unique programs and initiatives.

**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 Workforce Equity Strategic Plan and the North Star.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Percent of invoices processed within 30 days.	96%	90%	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) Outcome data was not gathered in FY23; we will begin in 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>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Personnel	\$2,389,250	\$133,856	\$2,236,607	\$154,704
Contractual Services	\$51,020	\$0	\$51,020	\$0
Materials & Supplies	\$70,210	\$0	\$43,560	\$0
Internal Services	\$318,428	\$0	\$300,402	\$22,772
<b>Total GF/non-GF</b>	<b>\$2,828,908</b>	<b>\$133,856</b>	<b>\$2,631,589</b>	<b>\$177,476</b>
<b>Program Total:</b>	<b>\$2,962,764</b>		<b>\$2,809,065</b>	
<b>Program FTE</b>	15.00	1.00	13.00	1.00

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

**Explanation of Revenues**

This program generates \$22,772 in indirect revenues.

\$177,476 - Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

**Significant Program Changes**

**Last Year this program was:** FY 2024: 25118A YFS - Youth & Family Services Administration

Decrease of 2.00 FTE; 1.00 Data Analyst moved to program offer 25160, 1.00 Program Specialist Sr moved to program offer 25133.

FY 2024 Other Funds is Supportive Housing Services (SHS) Fund 1521. In FY 2024 these funds were budgeted in the Joint Office of Homeless Services program 30407A – Supportive Housing – Countywide Coordination – Dept of County Human Services.

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**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. 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 and the long term 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of households served. <sup>1</sup>	29,474	30,000	19,000	19,000
Outcome	Percentage of households served after receiving shutoff notice who avoid disconnection.	100%	100%	100%	100%

**Performance Measures Descriptions**

1. Estimated targets for FY24 & 25 return to pre-pandemic levels as a result of pandemic-era additional funding for Energy Services.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$1,159,808	\$0	\$955,991
Contractual Services	\$0	\$14,960,391	\$0	\$10,607,706
Materials & Supplies	\$0	\$477,383	\$0	\$110,176
Internal Services	\$0	\$319,787	\$0	\$301,530
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$16,917,369</b>	<b>\$0</b>	<b>\$11,975,403</b>
<b>Program Total:</b>	<b>\$16,917,369</b>		<b>\$11,975,403</b>	
<b>Program FTE</b>	0.00	10.00	0.00	7.50

Program Revenues				
Intergovernmental	\$0	\$16,917,369	\$0	\$11,975,403
<b>Total Revenue</b>	<b>\$0</b>	<b>\$16,917,369</b>	<b>\$0</b>	<b>\$11,975,403</b>

Explanation of Revenues

This program generates \$140,720 in indirect revenues.

\$7,321,480 - OHCSO Oregon Energy Assistance Program (OEAP) (State).

\$4,573,923 - OHCSO Low Income Home Energy Assistance Program - Energy (LIHEAP) (Federal). Decreased by \$4.5 million from FY 2024.

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

Significant Program Changes

Last Year this program was: FY 2024: 25119 YFS - Energy Assistance

FY 2025 reduction is due to a drop in estimated Low Income Home Energy Assistance Program (LIHEAP) funding. The FY 2024 budget included estimated carryover funding of \$1.8 million, which is not included in the FY 2025 budget. Additionally, the program is budgeting conservatively for FY 2025 as it is not clear if one-time-only funding from Disaster Relief LIHEAP or Emergency LIHEAP funding will continue into the second year of the biennium.

Decrease of 2.50 FTE; Reduced 2.00 Program Technician, moved 0.50 Program Specialist to program offer 25121.

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of households served.	175	250	200	250
Outcome	Percent of individuals served who identify as Black, Indigenous, and People of Color.	62%	70%	65%	70%

**Performance Measures Descriptions**

FY23 output is lower due to staff capacity challenges in FY23. Program is fully staffed in FY24.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$1,540,372	\$0	\$1,686,404
Contractual Services	\$0	\$5,290,619	\$0	\$5,238,303
Materials & Supplies	\$0	\$326,027	\$0	\$313,362
Internal Services	\$0	\$374,021	\$0	\$686,996
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$7,531,039</b>	<b>\$0</b>	<b>\$7,925,065</b>
<b>Program Total:</b>	<b>\$7,531,039</b>		<b>\$7,925,065</b>	
<b>Program FTE</b>	0.00	12.00	0.00	12.50

Program Revenues				
Intergovernmental	\$0	\$6,986,039	\$0	\$7,920,065
Beginning Working Capital	\$0	\$545,000	\$0	\$5,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$7,531,039</b>	<b>\$0</b>	<b>\$7,925,065</b>

Explanation of Revenues

This program generates \$248,241 in indirect revenues.  
 \$3,792,285 - OHCS D ECHO (SB1149) (State)  
 \$2,328,891 - OHCS D DOE Weatherization (Federal)  
 \$938,889 - OHCS D Low Income Energy Assistance Program - Weatherization (Federal)  
 \$540,000 - County Weatherization Rebates (Local)  
 \$300,000 - Earth Advantage (Local)  
 \$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 2024: 25121A YFS - Weatherization

Increase of 0.50 FTE; moved 0.50 FTE Program Specialist from program offer 25119

**Department:** County Human Services      **Program Contact:** Rachel Pearl  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 10018A  
**Program Characteristics:** New Request, One-Time-Only Request

**Executive Summary**

This program continues, and expands, the Wood Stove Replacement Program for Multnomah County. The program began in FY 2023 and exchanges old and highly polluting bulk fuel heating devices with new and highly efficient electric heat pumps. This program impacts air quality, health and climate change. It funds staff capacity to implement the program; the equipment and installation comes from leveraged local and federal dollars.

**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; other bulk fuel heating devices (pellet stoves, old gas furnaces and fireplaces) also contribute to poor indoor and outdoor air quality. Higher levels of wood smoke in the air have been connected to higher levels of sickness like heart and lung illnesses.

Poor air quality and pollution is an environmental justice issue for Black, Indigenous and other People of Color (BIPOC). BIPOC communities have higher rates of asthma than other groups. Reducing wood smoke & other pollutants 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 and cooling, 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 heating exchanges - removing efficient older highly polluting bulk fuel devices and replacing them with efficient heating and cooling devices. 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 1.00 FTE ongoing 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 leveraged state and federal dollars.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of bulk fuel devices replaced	25	50	50	50
Outcome	Percent of households in high priority communities of Multnomah County	N/A	N/A	N/A	80%

**Performance Measures Descriptions**

FY23 was the start up year for the program.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$244,283	\$0	\$142,948	\$0
Contractual Services	\$0	\$0	\$10,000	\$0
<b>Total GF/non-GF</b>	<b>\$244,283</b>	<b>\$0</b>	<b>\$152,948</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$244,283</b>		<b>\$152,948</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 2024: 25121B YFS - Woodstove Replacement

In FY 2024, this program was funded with one-time-only General Fund and included 2.00 limited duration assignment (LDA) positions. In FY 2025, this program replaces the 2.00 LDA's with a 1.00 FTE Program Specialist and is funded with one-time-only General Fund.

**Department:** County Human Services      **Program Contact:** Rachel Pearl  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** New Request, One-Time-Only Request

**Executive Summary**

In response to climate change and increased temperatures in summer, DCHS will be assembling cooling kits to distribute to community organizations who serve the following: Black, Indigenous, and people of color, Immigrant and Refugees and elderly, medically fragile, and vulnerable residents.

**Program Description**

Multnomah County has been impacted by climate change resulting in summer climates that reach higher temperatures and unsafe conditions for residents. As an additional support for the community in collaboration with the DCHS Emergency Management team, DCHS will be putting together cooling kits to provide to the community. Cooling kits will consist of items such as cooling towels, gel packs, ice cube trays, misters, propel packets, and water bottles. Cooling kits will be assembled and then distributed to organizations serving the following priority communities: Black, Indigenous and People of Color, Immigrants and Refugees, and elderly, medically fragile, and vulnerable residents.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of cooling kits assembled and distributed to the community	N/A	N/A	N/A	3,200
Output	Percentage of cooling kits distributed to culturally specific organizations	N/A	N/A	N/A	75%

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Materials & Supplies	\$0	\$0	\$50,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$50,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$50,000</b>	
<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:** Rachel Pearl  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 25139A/B  
**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), 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. A community-based nonprofit organization helps 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of families who engage in services	71	135	135	191
Outcome	Percent of families that engage in case management	62%	80%	80%	80%

**Performance Measures Descriptions**

Output is lower for FY23 due to staff capacity issues. Output for FY25 is increased due to new funding.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$627,725	\$0	\$648,440	\$300,000
<b>Total GF/non-GF</b>	<b>\$627,725</b>	<b>\$0</b>	<b>\$648,440</b>	<b>\$300,000</b>
<b>Program Total:</b>	<b>\$627,725</b>		<b>\$948,440</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

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

Explanation of Revenues

\$300,000 - Family Unification Program (TBD). This is a new award from Oregon Department of Human Services to support the Family Unification Project.

Significant Program Changes

Last Year this program was: FY 2024: 25130 YFS - Family Unification Program

**Department:** County Human Services      **Program Contact:** Rachel Pearl  
**Program Offer Type:** Operating      **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.

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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of participants engaged in services <sup>1</sup>	1,378	1,175	1,175	1,175
Outcome	Percentage of participants receiving legal advice or services resulting in barrier reduction	50%	90%	90%	90%
Output	Amount of fees and fines waived or reduced	\$2,231,079	\$1,000,000	1,000,000	1,000,000

**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>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Contractual Services	\$475,552	\$0	\$491,246	\$0
<b>Total GF/non-GF</b>	<b>\$475,552</b>	<b>\$0</b>	<b>\$491,246</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$475,552</b>		<b>\$491,246</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 2024: 25131A YFS - Legal Services & Supports

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of clients connected to Peer Support Case Managers	253	200	253	200
Outcome	Percent of clients have been connected to services	63%	75%	65%	75%

**Performance Measures Descriptions**

FY23-24 Program got a late start. Should have an increase now that staff are in place.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$550,517	\$0	\$621,261	\$0
<b>Total GF/non-GF</b>	<b>\$550,517</b>	<b>\$0</b>	<b>\$621,261</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$550,517</b>		<b>\$621,261</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 2024: 25131B YFS - Peer Navigators

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of people receiving legal information, education and referral services	2,415	1,500	1,500	1,500
Outcome	Renters who engage with legal representation to achieve dismissal of their case.	261	300	300	300

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$411,428	\$0	\$446,256	\$0
<b>Total GF/non-GF</b>	<b>\$411,428</b>	<b>\$0</b>	<b>\$446,256</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$411,428</b>		<b>\$446,256</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 2024: 25131C YFS - Eviction Prevention Support

**Department:** County Human Services      **Program Contact:** Rachel Pearl  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted

**Related Programs:**

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

**Executive Summary**

Multnomah County is in a severe housing crisis and having legal issues and/or not having financial resources to address them are roadblocks to overall stability for low-income residents. Fines and fees, along with outstanding criminal records, often have an extraordinary financial impact on individuals who are working to get their lives back on track. This often shows up as continuing economic hardship, and an inability to secure good housing and employment. 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. Project Reset provides record expungement legal support and consultation to remove these barriers to stability.

**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 legal services in order to reduce legal barriers to safe housing, employment and educational opportunities. As part of this, create efficiencies to benefit the justice system and most importantly resolve a backlog in the District Attorney's Office that is creating delays in expungement hearings.

**PROGRAM ACTIVITY:** Provider will conduct outreach about Project Reset to communities of color disproportionately affected by the justice system including but not limited to outreach to culturally specific providers of County programs. 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; and other services as needed.

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

This program also includes staff to 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, screen them for additional legal services that their division can offer to reduce legal barriers, and resolve any other issues that may create a delay in the process.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of participants engaged in services	672	700	700	800
Outcome	Percent of participants receiving legal advice or services resulting in barrier reduction	100%	90%	100%	90%

**Performance Measures Descriptions**

For the output and outcome we are using the Project Reset FY23 and 24 #'s and then FY25 is the target for the combined services since the expansion is included in 25131D in FY25 rather than a separate offer.

**Revenue/Expense Detail**

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$262,500	\$0	\$325,000	\$0
<b>Total GF/non-GF</b>	<b>\$262,500</b>	<b>\$0</b>	<b>\$325,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$262,500</b>		<b>\$325,000</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 2024: 25131D YFS - Expungement and Legal Services Days

The name of this program offer has changed from Legal Services Days to Record and Fee Expungement Program (Project Reset).

**Department:** County Human Services      **Program Contact:** Rachel Pearl  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted

**Related Programs:**

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

**Executive Summary**

The number of eviction court cases filed has increased dramatically since the end of the pandemic protections with rates currently exceeding those seen prior to the pandemic. This one-time-only program offer maintains efforts to avoid imminent eviction by providing free in-courtroom legal support to tenants facing eviction in court.

**Program Description**

**ISSUE:** In Multnomah County, the number of court cases for eviction due to nonpayment of rent reached over 800 cases per month by Spring 2024, which suggests that over 8,000 households will be taken to court for eviction in FY 2024. The number of impacted households far exceeds this, with research suggesting that for every one court case filed, 5 tenants will have self-evicted. Thousands of Multnomah County residents are unable to pay their rent due to the lingering impacts of the COVID-19 pandemic. Black, Indigenous, and People of Color continue to be disproportionately at risk of eviction, impacted by inflation and rising costs of rent, and facing the greatest barriers to employment and housing stability. The number of eviction court cases filed has increased dramatically since the end of the pandemic protections with rates currently exceeding those seen prior to the pandemic. The vast majority of cases are for nonpayment of rent.

**PROGRAM GOALS:** This program maintains efforts to avoid imminent eviction by providing free legal support to tenants facing eviction in court proceedings.

**PROGRAM ACTIVITIES:** Provide free legal support and representation to low-income tenants facing eviction in court. Legal support will be provided directly in the court setting to ensure tenants understand their rights and can effectively advocate for themselves in court. Legal support and representation will assist tenants to navigate the complex and intimidating legal processes involved in eviction cases before appearing in court. The provider will conduct direct outreach at the Multnomah County Courthouse to tenants who are attending proceedings for eviction. They will also provide intake and screening for legal representation, focused on households at or below 65% of average median income. They will provide limited or full legal representation that may include: negotiations; rental assistance referrals; and help filing stipulated agreements. The provider will also refer program participants who need financial assistance to appropriate community emergency rent assistance partners.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of households facing eviction court hearings who receive legal support or representation	N/A	N/A	N/A	1,300
Outcome	Percentage of households receiving legal support who are able to avoid eviction	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	2024	2024	2025	2025
Contractual Services	\$0	\$0	\$330,000	\$250,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$330,000</b>	<b>\$250,000</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$580,000</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

\$250,000 - Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

Significant Program Changes

Last Year this program was:

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**Program Offer Stage:** Adopted

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

### Executive Summary

Racism and a lack of affordable housing 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of households engaged in Short Term Rent Assistance through Home Forward	1,938	1,000	1,000	1,000
Outcome	Percentage of households engaged who remain in permanent housing six months after exit	66%	70%	70%	70%

### Performance Measures Descriptions

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$300,943	\$0	\$158,218	\$159,788
Contractual Services	\$1,204,952	\$2,986,607	\$1,219,016	\$3,554,455
Materials & Supplies	\$10,270	\$0	\$11,250	\$0
Internal Services	\$21,216	\$0	\$50,734	\$23,521
<b>Total GF/non-GF</b>	<b>\$1,537,381</b>	<b>\$2,986,607</b>	<b>\$1,439,218</b>	<b>\$3,737,764</b>
<b>Program Total:</b>	<b>\$4,523,988</b>		<b>\$5,176,982</b>	
<b>Program FTE</b>	2.00	0.00	1.00	1.00

Program Revenues				
Intergovernmental	\$0	\$2,986,607	\$0	\$3,737,764
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,986,607</b>	<b>\$0</b>	<b>\$3,737,764</b>

Explanation of Revenues

This program generates \$23,521 in indirect revenues.  
 \$1,933,003 - Oregon Eviction Diversion & Prevention Program  
 \$1,669,782 - OHCSO Emergency Housing Assistance (State)  
 \$134,979 - State of Oregon Elderly Rent Assistance (State)

Significant Program Changes

Last Year this program was: FY 2024: 25133A YFS - Housing Stabilization for Vulnerable Populations (HSVP)

Moved 1.00 FTE Program Specialist Sr from program offer 25118 (Federal/ State Fund), moved 1.00 FTE Program Specialist Sr to program offer 25139 (General Fund)

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**Program Offer Stage:** Adopted

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

**Executive Summary**

Stable housing is linked to positive health and social outcomes for individuals, families and communities. Eviction Prevention Program and other eviction prevention supports are key strategies to support renters to remain stably housed and prevent the homelessness crisis from getting worse. Eviction prevention supportive services and rent assistance are critical interventions to keep our homelessness crisis from getting worse.

**Program Description**

**ISSUE:** Thousands of Multnomah County residents are not able to pay their rent due to the lingering impacts of the COVID-19 pandemic. COVID-19 exposed and exacerbated economic racial disparities that existed long before the pandemic. Black, indigenous, and People of color continue to be disproportionately at risk of eviction, impacted by inflation and rising costs of rent, and facing the greatest barriers to employment and housing stability. The pandemic increased the number of folks experiencing unemployment, poverty and domestic violence, as well as creating significant economic hardship. These issues have caused the number of evictions to increase dramatically since the end of the pandemic protections and funding, and exceed rates prior to the pandemic.

**Program Goals:** Provide eviction prevention support through supportive services and emergency and short term rent/client assistance payments so that households can remain stably housed.

**Program Activities:** This Eviction Prevention program supports the County's priority for long term stability while maintaining a significant effort to avoid imminent eviction. These funds will support eviction prevention for households who meet any of these criteria; those with an eviction notice, written notice to vacate, or households at high risk who need longer short term case management to support housing stability. The Eviction Prevention program led by Bienestar de la Familia will provide outreach, intake and case management services for households who are referred and meet the criteria.

There are several key partners who are part of the Eviction Prevention Program including culturally specific nonprofit organizations.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of households who receive eviction prevention services	N/A	N/A	N/A	800
Outcome	Percent of households served who remain stably housed at 6 months after exit	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	2024	2024	2025	2025
Personnel	\$0	\$1,910,358	\$1,006,454	\$0
Contractual Services	\$0	\$12,730,990	\$2,636,706	\$2,000,000
Materials & Supplies	\$0	\$70,722	\$0	\$0
Internal Services	\$0	\$82,307	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$14,794,377</b>	<b>\$3,643,160</b>	<b>\$2,000,000</b>
<b>Program Total:</b>	<b>\$14,794,377</b>		<b>\$5,643,160</b>	
<b>Program FTE</b>	0.00	17.00	8.50	0.00

Program Revenues				
Intergovernmental	\$0	\$15,474,036	\$0	\$2,000,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$15,474,036</b>	<b>\$0</b>	<b>\$2,000,000</b>

Explanation of Revenues

\$2,000,000 - Federal American Rescue Plan (ARP) Direct County Funding

This program addresses the Crisis Response & Community Recovery priority. These funds provide emergency rent assistance to county renters who are unable to pay rent due to the pandemic. This is particularly acute in communities of color.

Significant Program Changes

Last Year this program was: FY 2024: 25490B ARP - Emergency Rent Assistance

The FY 2024 Adopted budget included \$15.5 million and 23.00 FTE in one-time-only funding as follows:

- \$5,474,036 - State Executive Order Oregon Eviction Diversion and Prevention Program (25133C)
- \$10,000,000 - Federal American Rescue Plan (ARP) Direct County funding (25490B/C)

During the FY 2024 budget process, the Board directed that they be notified of the final ARP balance when FY 2023 actual spending was finalized. This resulted in an additional \$8.0 million and 3.00 FTE added during FY 2024 for emergency rent assistance, per a Supplemental Budget (# OVER-002-24).

In FY 2025, this program is funded with one-time-only General Fund and one-time-only Federal ARP funding. It is marked New because it now has General Fund.

**Department:** County Human Services      **Program Contact:** Rachel Pearl  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** New Request, One-Time-Only Request

**Executive Summary**

Stable housing is linked to positive health and social outcomes for individuals, families and communities. Eviction prevention supports and rent assistance are key strategies to support renters to remain stably housed and prevent the homelessness crisis from getting worse. This program builds off of program YFS - Emergency Rent Assistance (25133B) to increase the number of households that avoid eviction through receiving culturally specific and responsive case management support services in combination with emergency and short-term rent assistance.

**Program Description**

**ISSUE:** Thousands of Multnomah County residents are not able to pay their rent due to the lingering impacts of the COVID-19 pandemic. The pandemic increased the number of folks experiencing unemployment, poverty and domestic violence, as well as creating significant economic hardship. COVID-19 also exposed and exacerbated economic racial disparities that existed long before the pandemic. Black, Indigenous, and People of Color continue to be disproportionately at risk of eviction, impacted by inflation and rising costs of rent, and facing the greatest barriers to employment and housing stability. The number of eviction court cases filed has increased dramatically since the end of the pandemic protections with rates currently exceeding those seen prior to the pandemic. The vast majority of cases are for nonpayment of rent. In Multnomah County, the number of court cases for eviction due to nonpayment of rent reached over 700 cases per month by Fall 2023, which suggests that over 7,000 households will be taken to court for eviction in FY 2024. The number of impacted households far exceeds this, with research suggesting that for every one court case filed, 5 tenants will have self-evicted.

**Program Goals:** This program deepens investment in the County's priority for long term stability while maintaining a significant effort to avoid imminent eviction. It does this through providing eviction prevention support through supportive services and emergency and short term rent/client assistance payments.

**Program Activities:** These funds will support eviction prevention for households who meet any of these criteria; those with an eviction notice, written notice to vacate, or households at high risk who need short term case management to support housing stability. Activities include outreach to tenants with court cases filed, intake and case management services.

Activities funded in this program are provided by county staff and culturally specific non-profit organizations. The efforts are part of a broader eviction prevention partnership and system that includes Home Forward and non-profits.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of households who receive eviction prevention services	N/A	N/A	N/A	800
Outcome	Percent of households served with housing stability services that remain stably housed at 6 months after exit	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	2024	2024	2025	2025
Personnel	\$0	\$0	\$0	\$725,847
Contractual Services	\$0	\$0	\$3,308,738	\$965,416
Internal Services	\$0	\$0	\$0	\$106,844
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$3,308,738</b>	<b>\$1,798,107</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$5,106,845</b>	
<b>Program FTE</b>	0.00	0.00	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 \$106,844 in indirect revenues.

\$1,798,107 - Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

Significant Program Changes

Last Year this program was:

In FY 2025, this program is funded with one-time-only General Fund and one-time-only Supportive Housing Services (SHS) funding.

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of fair housing tests conducted in East Multnomah County	19	70	70	70
Outcome	Number of alleged housing discrimination investigations, advocacy & support conducted	17	25	25	25
Output	Number of Fair Housing training and outreach events for direct service staff	11	10	10	10

### Performance Measures Descriptions

FY 22-23 Performance measures were low due to staffing challenges. Program reports increased staff capacity by February 2024.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$121,113	\$0	\$125,110	\$0
<b>Total GF/non-GF</b>	<b>\$121,113</b>	<b>\$0</b>	<b>\$125,110</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$121,113</b>		<b>\$125,110</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 2024: 25134 YFS - Fair Housing Testing

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**Program Offer Stage:** Adopted

**Related Programs:**
**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 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of youth engaged in case management supports	79	85	85	85
Outcome	Percentage of youth who know how to access safe and supportive resources	68%*	80%	80%	80%
Outcome	Number of youth served who identify as BIPOC	82%	80%	80%	80%

### Performance Measures Descriptions

\*Outcome measure is lower than expected due to staffing turnover and identified data entry training gaps. New advocates have been trained to correctly enter this data, and measure is expected to return to baseline in FY24

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$1,008,481	\$0	\$1,041,761	\$0
<b>Total GF/non-GF</b>	<b>\$1,008,481</b>	<b>\$0</b>	<b>\$1,041,761</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,008,481</b>		<b>\$1,041,761</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 2024: 25135 YFS - Sex Trafficked Youth Services

**Department:** County Human Services      **Program Contact:** Rachel Pearl  
**Program Offer Type:** Operating      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of participants engaged in intake assessment for navigation services	905	370	370	370
Outcome	Percent of individuals and families who engaged in individualized legal navigation services	75%	40%	40%	40%
Output	Number of community trainings or workshops	18	20	20	20

### Performance Measures Descriptions



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$291,709	\$0	\$301,335	\$0
<b>Total GF/non-GF</b>	<b>\$291,709</b>	<b>\$0</b>	<b>\$301,335</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$291,709</b>		<b>\$301,335</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 2024: 25136 YFS - Culturally Specific Navigation Services for Immigrant Families

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**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. Youth are still recovering from the impacts of the pandemic because youth engagement and social emotional supports had 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. Focusing on building relationships with youth and families has been critical in order to connect youth and families to critical resources. SF primarily serves two school districts: Reynolds and David Douglas.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of youth served	509	1,000	1,000	1,000
Outcome	Percent students served who attended school regularly (are not chronically absent) <sup>1</sup>	42%	80%	80%	80%
Output	Number of parents/legal guardians/regular caregivers served <sup>2</sup>	249	700	700	700
Outcome	% of parents/legal guardians/regular caregivers who are engaged w/ schools and monitoring progress <sup>2, 3</sup>	65%	75%	75%	75%

### Performance Measures Descriptions

Outputs are lower due to staffing capacity challenges.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$134,960	\$0	\$144,202	\$0
Contractual Services	\$2,589,353	\$0	\$2,674,804	\$0
Materials & Supplies	\$1,920	\$0	\$480	\$0
Internal Services	\$21,216	\$0	\$21,497	\$0
<b>Total GF/non-GF</b>	<b>\$2,747,449</b>	<b>\$0</b>	<b>\$2,840,983</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,747,449</b>		<b>\$2,840,983</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 2024: 25137 YFS - Successful Families

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**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.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of youth engaged in service	94	75	94	75
Outcome	Percent of youth who identify at least one supportive adult outside of the YSHP program at exit	93%	80%	93%	80%

### Performance Measures Descriptions

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$1,408,844	\$46,651	\$1,457,757	\$110,000
<b>Total GF/non-GF</b>	<b>\$1,408,844</b>	<b>\$46,651</b>	<b>\$1,457,757</b>	<b>\$110,000</b>
<b>Program Total:</b>	<b>\$1,455,495</b>		<b>\$1,567,757</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$46,651	\$0	\$110,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$46,651</b>	<b>\$0</b>	<b>\$110,000</b>

Explanation of Revenues

\$110,000 - OCCF Youth Investment (Federal)

Significant Program Changes

Last Year this program was: FY 2024: 25138 YFS - Youth Stability & Homelessness Prevention Services

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**Program Offer Stage:** Adopted

**Related Programs:**
**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.

Culturally specific providers play 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of households served in MSI case management	481	750	480	480
Outcome	Percentage of households served that remain in permanent housing six months after exit	65%	75%	75%	75%

### Performance Measures Descriptions

Output for HH's served is lower due to staffing capacity. Current year and FY25 year outputs are impacted by HH's needing more case management, due to their life situation. HH Outputs also reflect the increased costs of living and the amount each HH cost to support.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$109,859	\$60,541	\$277,567	\$59,274
Contractual Services	\$2,853,669	\$1,099,557	\$2,943,873	\$1,099,557
Materials & Supplies	\$6,148	\$0	\$6,480	\$0
Internal Services	\$43,732	\$7,459	\$64,491	\$8,726
<b>Total GF/non-GF</b>	<b>\$3,013,408</b>	<b>\$1,167,557</b>	<b>\$3,292,411</b>	<b>\$1,167,557</b>
<b>Program Total:</b>	<b>\$4,180,965</b>		<b>\$4,459,968</b>	
<b>Program FTE</b>	0.64	0.36	1.67	0.33

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

Explanation of Revenues

This program generates \$8,726 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 2024: 25139 YFS - Multnomah Stability Initiative (MSI)

Increase of 1.00 FTE; moved 1.00 Program Specialist Sr from program offer 25133, moved 0.03 FTE from Federal/ State Fund to General Fund



**Program #25139B - YFS - Multnomah Stability Initiative (MSI) - Supportive Housing Services** FY 2025 Adopted

**Department:** County Human Services **Program Contact:** Rachel Pearl  
**Program Offer Type:** Operating **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) of the Department of County Human Services (DCHS).

**Program Description**

**ISSUE:** There is a lack of culturally-specific services that provide flexibility for the unique needs of families in poverty. Many homeless families are housed with short-term rent assistance through the Homeless Family System of Care (HFSC), but don’t qualify for longer-term retention services through the Multnomah Stability Initiative, due to strict program criteria.

**PROGRAM GOAL:** The MSI Bridge Program was developed to assist families in transitioning from the Homeless Family System of Care (HFSC) to the Youth and Family Services (YFS) Multnomah Stability Initiative (MSI).

**PROGRAM ACTIVITY:** The Bridge program has reduced program entry criteria and more intensive services than the MSI program, in order to further stabilize families before referring them to MSI. Services have been developed to target families with children under 18 years old, who are currently housed and at risk of homelessness. Culturally-specific and appropriate services are delivered by contracted partner staff. The activities of the Bridge Program include assisting families in stabilizing and securing housing; providing access to short-term rent assistance; making connections to legal clinic services; providing Assertive Engagement case management; connecting families to natural supports in the community like support groups and school programs; connecting people to job training, income and asset creation, and flex funds. This program funds staff to provide housing case management and skill building services.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	HFSC families transitioned to MSI Bridge Program*	N/A	20	20	25
Outcome	MSI Bridge families retaining housing at 12 months*	N/A	80%	80%	80%
Outcome	Percent of households who experience improvement in self-identified housing goals*	N/A	90%	90%	90%

**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	2024	2024	2025	2025
Personnel	\$0	\$130,901	\$0	\$144,047
Contractual Services	\$0	\$4,367,981	\$0	\$4,614,310
Internal Services	\$0	\$0	\$0	\$21,203
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$4,498,882</b>	<b>\$0</b>	<b>\$4,779,560</b>
<b>Program Total:</b>	<b>\$4,498,882</b>		<b>\$4,779,560</b>	
<b>Program FTE</b>	0.00	1.00	0.00	1.00

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

Explanation of Revenues

This program generates \$21,203 in indirect revenues.

\$4,779,560 - Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

Significant Program Changes

**Last Year this program was:** FY 2024: 30407A Supportive Housing - Countywide Coordination - Dept of County Human

FY 2024 Other Funds includes Supportive Housing Services (SHS) Fund 1521. In FY 2024 these funds were budgeted in the Joint Office of Homeless Services programs:

- 30407A – Supportive Housing – Countywide Coordination – Dept of County Human Services
- 30300B – Housing Placement & Retention - Adults & Women Households - SHS
- 30400D – Supportive Housing – Tenant-Based Commitments

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of public works projects completed	1	1	1	1
Outcome	Number of housing units rehabilitated	26	30	30	30

### Performance Measures Descriptions

FY25 Targets will stay the same.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$122,793	\$28,490	\$133,530	\$27,892
Contractual Services	\$0	\$425,620	\$0	\$368,002
Materials & Supplies	\$1,770	\$0	\$600	\$30,000
Internal Services	\$21,990	\$3,510	\$21,497	\$4,106
<b>Total GF/non-GF</b>	<b>\$146,553</b>	<b>\$457,620</b>	<b>\$155,627</b>	<b>\$430,000</b>
<b>Program Total:</b>	<b>\$604,173</b>		<b>\$585,627</b>	
<b>Program FTE</b>	0.81	0.19	0.83	0.17

Program Revenues				
Intergovernmental	\$0	\$457,620	\$0	\$430,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$457,620</b>	<b>\$0</b>	<b>\$430,000</b>

Explanation of Revenues

This program generates \$4,106 in indirect revenues.  
 \$330,000 - HUD Community Development Block Grant (Federal)  
 \$100,000 - COVID-19 Federal CDBG 20 CARES (Federal)

Significant Program Changes

Last Year this program was: FY 2024: 25140 YFS - Community Development  
 Moved 0.02 FTE Program Specialist Sr from Federal/ State Fund to General Fund

**Department:** County Human Services      **Program Contact:** Rachel Pearl  
**Program Offer Type:** Operating      **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, including the Latinx, Somali, Immigrants & Refugees, and BIPOC communities. 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 Oregon Food Bank (2020), over 133,230 of Multnomah County residents are experiencing food insecurity. 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of consumers engaged through Outreach activities.	4,735	5,000	5,000	5,000
Outcome	Number of SNAP applications completed.	428	250	250	250

### Performance Measures Descriptions

SNAP numbers are elevated because of an increase in in-house referrals originating from staff providing rent assistance, and partner organizations.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$128,281	\$128,281	\$129,763	\$130,182
Materials & Supplies	\$470	\$0	\$540	\$0
Internal Services	\$40,345	\$21,144	\$31,618	\$32,861
<b>Total GF/non-GF</b>	<b>\$169,096</b>	<b>\$149,425</b>	<b>\$161,921</b>	<b>\$163,043</b>
<b>Program Total:</b>	<b>\$318,521</b>		<b>\$324,964</b>	
<b>Program FTE</b>	1.00	1.00	1.00	1.00

Program Revenues				
Intergovernmental	\$0	\$149,425	\$0	\$163,043
<b>Total Revenue</b>	<b>\$0</b>	<b>\$149,425</b>	<b>\$0</b>	<b>\$163,043</b>

Explanation of Revenues

This program generates \$19,163 in indirect revenues.  
 \$163,043 - Oregon Supplemental Nutrition Assistance Program (SNAP) (State)

Significant Program Changes

Last Year this program was: FY 2024: 25141 YFS - Supplemental Nutrition Assistance Program (SNAP) Outreach

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of children (ages 5-18) served <sup>1</sup>	16,829	18,400	18,400	18,400
Outcome	Number of students who attend 30 days or more after school programming	5,222	9,200	9,200	9,200

### Performance Measures Descriptions

Outputs are lower due to staffing capacity issues.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$609,472	\$0	\$636,971	\$0
Contractual Services	\$7,877,218	\$2,816,335	\$8,249,830	\$2,678,362
Materials & Supplies	\$21,110	\$0	\$17,720	\$0
Internal Services	\$89,839	\$0	\$90,632	\$0
<b>Total GF/non-GF</b>	<b>\$8,597,639</b>	<b>\$2,816,335</b>	<b>\$8,995,153</b>	<b>\$2,678,362</b>
<b>Program Total:</b>	<b>\$11,413,974</b>		<b>\$11,673,515</b>	
<b>Program FTE</b>	4.00	0.00	4.00	0.00

Program Revenues				
Intergovernmental	\$0	\$2,816,335	\$0	\$2,678,362
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,816,335</b>	<b>\$0</b>	<b>\$2,678,362</b>

Explanation of Revenues

- \$1,052,083 - Portland Public Schools SUN Community School Support (Local)
- \$707,502 - City of Portland Parks & Recreation (Local)
- \$337,730- Reynolds School District (Local)
- \$276,301 - David Douglas School District (Local)
- \$179,833 - Gresham Barlow School District (Local)
- \$119,913 - Parkrose School District (Local)
- \$5,000 - Centennial School District (Local)

Significant Program Changes

Last Year this program was: FY 2024: 25145A YFS - SUN Community Schools

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**Program Offer Stage:** Adopted

**Related Programs:**
**Program Characteristics:** New Request, 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. This year, YFS will reduce the Family Resource Navigator (FRN) program in SUN CS to 60 sites. This allows for focus on title one schools, while ensuring family basic needs are met while a ramp down strategy is developed as funds will no longer be available after fiscal year 2025.

### 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 and period after 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 60 Community School sites. 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.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of individuals who receive support from Family Resource Navigators	8,000	5,670	8,850	6,500
Outcome	Percent of people served who identify as Black, Indigenous, Families of Color, and immigrants/refugees	80%	80%	90%	85%

### Performance Measures Descriptions



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$4,443,455	\$3,000,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$4,443,455</b>	<b>\$3,000,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$4,443,455</b>		<b>\$3,000,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$4,443,455	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,443,455</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

**Last Year this program was:** FY 2024: 25399E ARP - SUN Community Schools: Family Resource Navigators

In FY 2024, this program was funded with Federal American Rescue Plan (ARP) Direct County Funding.

The FY 2025 budget is reduced to focus on title one schools (60 SUN Community School sites). The FY 2024 budget included 81 SUN Community School sites.

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**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 and inflation. 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. 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of meals provided to children and families	1,882,403	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	\$8.41	\$10	\$10	\$10

### Performance Measures Descriptions

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$149,978	\$0	\$160,291	\$0
Contractual Services	\$334,211	\$0	\$345,240	\$0
Materials & Supplies	\$1,160	\$0	\$1,710	\$0
Internal Services	\$21,551	\$0	\$21,497	\$0
<b>Total GF/non-GF</b>	<b>\$506,900</b>	<b>\$0</b>	<b>\$528,738</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$506,900</b>		<b>\$528,738</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 2024: 25147A YFS - Child & Family Hunger Relief

**Department:** County Human Services      **Program Contact:** Rachel Pearl  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted

**Related Programs:**

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

**Executive Summary**

SUN Community Schools serves as an anchor strategy to deliver additional nutritional support for the SUN Service System. In response to inflation costs for families and reduction to resources, additional resources and staffing is critical to supporting the community. Costs for operating food distribution, adding an East County pantry, both staffing and food purchases/delivery, have increased in the past years.

**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 American Rescue Plan (ARP) funds. 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 YFS Food Security and Hunger enhancement 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 for 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.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of meals provided to families	1,194,496	450,000	450,000	450,000
Outcome	Percent of Black, Indigenous, and Families of Color who receive food security support	77.6%	70%	70%	70%

**Performance Measures Descriptions**

Accessing food at pantries has remained at a higher-than-expected levels due to economic inflation, the end of pandemic era SNAP benefits. We will consider adjusting target numbers after assessing at the end of FY24.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$179,235	\$180,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$179,235</b>	<b>\$180,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$179,235</b>		<b>\$180,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$179,235	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$179,235</b>	<b>\$0</b>	<b>\$0</b>

Explanation of Revenues

Significant Program Changes

**Last Year this program was:** FY 2024: 25399S ARP - YFS Food Security / Pantry Enhancement

In FY 2024, this program was funded with Federal American Rescue Plan (ARP) Direct County Funding.  
 In FY 2025, this program was funded with one-time-only General Fund.

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of students (ages 6-18) served <sup>1</sup>	825	1,420	1,420	1,420
Outcome	Percent of students who make progress or achieve individualized action or success plan goals	93%	90%	90%	90%

### Performance Measures Descriptions

Outputs are lower due to staff capacity issues.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$2,920,508	\$200,000	\$3,016,884	\$100,000
<b>Total GF/non-GF</b>	<b>\$2,920,508</b>	<b>\$200,000</b>	<b>\$3,016,884</b>	<b>\$100,000</b>
<b>Program Total:</b>	<b>\$3,120,508</b>		<b>\$3,116,884</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$200,000	\$0	\$100,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$200,000</b>	<b>\$0</b>	<b>\$100,000</b>

Explanation of Revenues

\$100,000 - OCCF-Youth Investment (Federal)

Significant Program Changes

Last Year this program was: FY 2024: 25149 YFS - SUN Youth Advocacy Program

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**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 impacts of the pandemic and inflation have continued to create 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of children served <sup>1</sup>	413	641	600	600
Outcome	Percent of children up to date on immunizations at exit <sup>2</sup>	74%	95%	95%	95%

### Performance Measures Descriptions



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$80,148	\$0	\$83,489	\$0
Contractual Services	\$1,743,943	\$454,923	\$1,801,493	\$412,935
Materials & Supplies	\$2,180	\$0	\$1,480	\$0
Internal Services	\$11,433	\$0	\$12,297	\$0
<b>Total GF/non-GF</b>	<b>\$1,837,704</b>	<b>\$454,923</b>	<b>\$1,898,759</b>	<b>\$412,935</b>
<b>Program Total:</b>	<b>\$2,292,627</b>		<b>\$2,311,694</b>	
<b>Program FTE</b>	0.50	0.00	0.50	0.00

Program Revenues				
Intergovernmental	\$0	\$263,923	\$0	\$286,811
Other / Miscellaneous	\$0	\$191,000	\$0	\$126,124
<b>Total Revenue</b>	<b>\$0</b>	<b>\$454,923</b>	<b>\$0</b>	<b>\$412,935</b>

Explanation of Revenues

\$286,811 - OCCF Federal Family Preservation (Federal)  
 \$126,124 - United Way Early Learning (Local)

Significant Program Changes

Last Year this program was: FY 2024: 25151 YFS - SUN Parent & Child Development Services

**Department:** County Human Services      **Program Contact:** Rachel Pearl

**Program Offer Type:** Operating      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of children who participate in summer Early Kindergarten Transition.	439	810	810	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>	98%	90%	90%	90%

### Performance Measures Descriptions

Output low for two reasons: general staff capacity issues, and one district moving to a HUB model for the summer and that did not work for families due to travel challenges.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$115,824	\$22,257	\$104,173	\$43,584
Contractual Services	\$281,128	\$1,022,800	\$290,401	\$986,120
Materials & Supplies	\$8,020	\$0	\$8,180	\$0
Internal Services	\$21,644	\$2,743	\$21,497	\$6,416
<b>Total GF/non-GF</b>	<b>\$426,616</b>	<b>\$1,047,800</b>	<b>\$424,251</b>	<b>\$1,036,120</b>
<b>Program Total:</b>	<b>\$1,474,416</b>		<b>\$1,460,371</b>	
<b>Program FTE</b>	0.84	0.16	0.71	0.29

Program Revenues				
Intergovernmental	\$0	\$122,800	\$0	\$122,800
Other / Miscellaneous	\$0	\$925,000	\$0	\$913,320
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,047,800</b>	<b>\$0</b>	<b>\$1,036,120</b>

Explanation of Revenues

This program generates \$6,416 in indirect revenues.  
 \$913,320 - United Way Early Learning (Local)  
 \$122,800 - Portland Public Schools SUN Community School Support (Local)

Significant Program Changes

Last Year this program was: FY 2024: 25152 YFS - Early Learning Family Engagement and Kindergarten Transition  
 Moved 0.13 FTE from General Fund to Federal/ State Fund

**Department:** County Human Services

**Program Contact:** Rachel Pearl

**Program Offer Type:** Operating

**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. 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.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of youth who participate in case management.	61	75	75	75
Outcome	Percent of youth who remain in or re-enroll in school.	88%	75%	75%	75%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$363,525	\$0	\$375,521	\$0
<b>Total GF/non-GF</b>	<b>\$363,525</b>	<b>\$0</b>	<b>\$375,521</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$363,525</b>		<b>\$375,521</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 2024: 25155 YFS - Sexual & Gender Minority Youth Services

**Department:** County Human Services

**Program Contact:** Nabil Zaghoul

**Program Offer Type:** Operating

**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, LGBTQIA+ 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
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.	96%	85%	94%	85%
Output	Number of individuals served by Mercado <sup>2</sup>	18,380	18,000	7,500	7,500

### Performance Measures Descriptions

Note: The frequency of the Mercado and food distribution event is reduced because they are transitioning from a weekly to a monthly occurrence. This adjustment is attributed to the insufficient availability of produce and food items.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$1,759,359	\$769,196	\$1,893,259	\$838,644
Contractual Services	\$16,500	\$425,212	\$16,500	\$3,263,500
Materials & Supplies	\$69,371	\$0	\$52,780	\$0
Internal Services	\$395,758	\$11,030	\$424,158	\$123,448
<b>Total GF/non-GF</b>	<b>\$2,240,988</b>	<b>\$1,205,438</b>	<b>\$2,386,697</b>	<b>\$4,225,592</b>
<b>Program Total:</b>	<b>\$3,446,426</b>		<b>\$6,612,289</b>	
<b>Program FTE</b>	12.91	6.69	13.06	6.54

Program Revenues				
Intergovernmental	\$0	\$525,779	\$0	\$4,225,592
<b>Total Revenue</b>	<b>\$0</b>	<b>\$525,779</b>	<b>\$0</b>	<b>\$4,225,592</b>

Explanation of Revenues

This program generates \$123,448 in indirect revenues.  
 \$3,739,944 - Oregon Eviction Diversion & Prevention Program (ORE-DAP) (Federal)  
 \$316,508 - OHCSO Emergency Housing Assistance (Federal)  
 \$169,140 - OHCSO Housing Stabilization Program (State)

Significant Program Changes

Last Year this program was: FY 2024: 25156A YFS - Bienestar Social Services

The increase in contractual services is due to rent assistance from the Oregon Eviction Diversion & Prevention Program (ORE-DAP) award.

Moved 0.15 FTE Case Manager Senior from Federal/State Fund to General Fund.

In FY 2024, 6.00 FTE were funded with Federal American Rescue Plan (ARP) Direct County funding (25490C).

**Department:** County Human Services      **Program Contact:** Nabil Zaghloul  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** New Request

**Executive Summary**

This program offer expands existing staff capacity at Bienestar de la Familia by a total of 0.40 FTE. Bienestar de la Familia provides a range of culturally specific social services in many different languages. Assistance is focused on those who are harmed by racism and poverty--Latinx, immigrants and refugees, Somalis and other families of color in the Cully neighborhood.

**Program Description**

**ISSUE:** There is a growing disparity in access to culturally competent substance abuse and addiction services for individuals from Black, Indigenous, and People of Color (BIPOC) backgrounds, specifically within the Latinx, Somali, and African American communities. Lack of the program capacity to facilitate connections among individuals, families, and their children to essential resources which poses notable challenges. These challenges encompass the coordination of basic needs, the facilitation of referrals to external agencies and partners, and the diligent tracking of referral statuses.

**PROGRAM GOALS:** Increase existing staff capacity for access to substance abuse and addiction services. Second, enhance coordination of services community groups and partners through the Bienestar de la Family program.

**PROGRAM ACTIVITIES:** There are two activities included in this program offer. First, more effectively manage the workload associated with connecting individuals, families, and children to crucial resources, addressing basic needs, facilitating referrals to third-party agencies and partners, and meticulously tracking referral statuses by increasing staff capacity by 20%. Second, is to increase access to substance abuse and addiction services by increasing staff capacity by 20%. The primary focus will be on serving the Latinx, Somali, Immigrant, and Refugee communities with these expanded services.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of clients served	N/A	N/A	N/A	170
Outcome	Percent of clients who improved by exit from substance abuse supportive programming.	N/A	N/A	N/A	85%

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$0	\$61,749	\$0
Materials & Supplies	\$0	\$0	\$94	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$61,843</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$61,843</b>	
<b>Program FTE</b>	0.00	0.00	0.40	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:** Rachel Pearl  
**Program Offer Type:** Administration      **Program Offer Stage:** Adopted  
**Related Programs:** 25118  
**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, database implementation, 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, database administration, 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of new end users trained to use ServicePoint & ART that support accurate data entry and report usage.	127	150	150	150
Outcome	Percent of ServicePoint users who report overall satisfaction with the YFS Data and Evaluation Team.	44%	90%	90%	90%

**Performance Measures Descriptions**

We experienced a very low response rate from our End-User Satisfaction Training Survey. The survey administered was different from the survey's distributed in the past. The survey yielded a large amount of neutral (neither satisfied or dissatisfied) responses, those of which we did not include into percentage output.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$1,333,033	\$173,336	\$1,321,806	\$184,608
Contractual Services	\$305,738	\$0	\$375,245	\$0
Materials & Supplies	\$90,681	\$0	\$9,878	\$0
Internal Services	\$245,576	\$0	\$251,687	\$27,174
<b>Total GF/non-GF</b>	<b>\$1,975,028</b>	<b>\$173,336</b>	<b>\$1,958,616</b>	<b>\$211,782</b>
<b>Program Total:</b>	<b>\$2,148,364</b>		<b>\$2,170,398</b>	
<b>Program FTE</b>	9.00	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

This program generates \$27,174 in indirect revenues.

\$211,782 - Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

Significant Program Changes

Last Year this program was: FY 2024: 25160A YFS - Data and Evaluation Services

FY 2024 Other Funds is Supportive Housing Services (SHS) Fund 1521. In FY 2024 these funds were budgeted in the Joint Office of Homeless Services program 30407A – Supportive Housing – Countywide Coordination – Dept of County Human Services.

# Preschool and Early Learning

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 free public preschool for all interested families in 2030. Preschool for All exceeded the second year goal of 1,100 seats in FY 2024 by offering almost 1,400 seats at 82 different locations and will grow to over 2,000 seats in FY 2025.

The Preschool & Early Learning Division is creating the foundation for Preschool for All’s long-term success through the development of systems, processes and partnerships necessary to increase the number of quality, inclusive, and culturally affirming preschool slots in Multnomah County. 92% of PFA families who responded to a 2023 survey said that they were satisfied with their experience in Preschool for All. Additionally, 100% of providers surveyed said they would continue participating in PFA.

In order to create enough free public preschool slots for Multnomah County families, Preschool for All funds system supports that stabilize and strengthen child care providers, and build future capacity. These supports include higher wages for early educators, coaching and professional development, funding to stabilize infant and toddler care, investments in the recruitment and retention of a skilled and diverse workforce, and a Facilities Fund for the expansion of child care spaces across Multnomah County. These investments are essential to achieve the initiative’s long-term goals.

## \$563.6 million

### Preschool and Early Learning

#### Total Adopted Budget

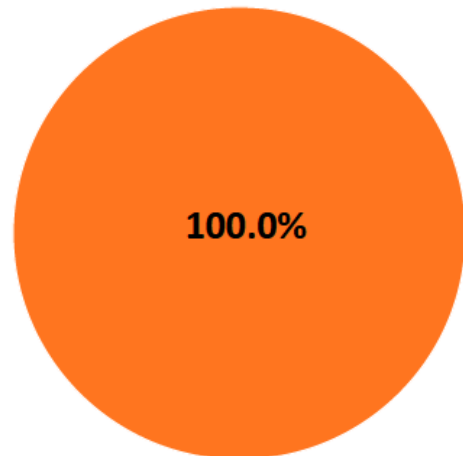
Including cash transfers, contingencies, and unappropriated balances.



## 43.00 FTE

(full time equivalent)

\$563.6M  
Other Funds



### Significant Division Changes

Preschool for All (PFA) anticipated tax revenue for FY 2025 is \$163 million dollars. Significant changes in FY 2025 include:

- Increased funding for PFA Pilot Sites in order to offer over 2,000 seats in FY 2025 (25205). The Preschool & Early Learning Division is partnering with Pilot Sites to refine and strengthen the program model, including support to stabilize infant and toddler care (25207) and include children with disabilities (25205).
- The addition of 6.00 FTE in the Preschool & Early Learning Division. The new team members will include staff working with preschool providers, contracting, communications, inclusion supports, and data and evaluation (25201).
- Continued investment in fiscal stability strategies that will protect the program from the volatility of personal income tax as a revenue source. The fiscal stability strategies will ensure 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 dedicated savings (25200C)

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Preschool and Early Learning</b>						
25200A	PEL - Administration & System Support		0	1,651,282	1,651,282	5.00
25200B	PEL - Contingency and Reserves	X	0	40,750,000	40,750,000	0.00
25200C	PEL - Dedicated Savings	X	0	425,212,827	425,212,827	0.00
25201	PEL - Program Development & System Support		0	7,440,909	7,440,909	38.00
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	8,414,000	8,414,000	0.00
25205	PEL - Preschool for All Pilot Sites		0	47,814,596	47,814,596	0.00
25206	PEL - Early Educator Workforce Development		0	7,000,000	7,000,000	0.00
25207	PEL - Preschool for All Infant Toddler Stabilization		0	6,034,236	6,034,236	0.00
	<b>Total Preschool and Early Learning</b>		<b>\$0</b>	<b>\$563,577,850</b>	<b>\$563,577,850</b>	<b>43.00</b>

**Department:** County Human Services      **Program Contact:** Leslee Barnes  
**Program Offer Type:** Administration      **Program Offer Stage:** Adopted  
**Related Programs:** 40099B, 72052A, 72052B, 78335, 10000A  
**Program Characteristics:**

**Executive Summary**

Multnomah County voters passed Measure 26-214, “Preschool for All,” in November of 2020. Preschool for All gives 3- and 4-year-olds in Multnomah County access to free, high-quality, inclusive, culturally affirming preschool experiences. It requires careful financial planning, sufficient administrative capacity, and a thoughtful approach to creating accessible services.

**Program Description**

**ISSUE:** The measure directed the Department of County Human Services (DCHS) to lead Preschool for All. This is a large new initiative.

**PROGRAM GOAL:** These investments 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 help the program operate smoothly by providing essential administrative support, such as completing contracts quickly and paying preschool providers in a timely way. This program offer also includes 0.50 FTE dedicated to Preschool for All policy in the Multnomah County Chair’s Office.

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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of executed contracts *	27	50	36	50
Outcome	% of accounts payable invoices paid in 30 days or less	96%	95%	95%	95%
Outcome	% of families applying to PFA who report being satisfied or highly satisfied with the application process **	86%	80%	85%	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	2024	2024	2025	2025
Personnel	\$0	\$764,017	\$0	\$928,023
Materials & Supplies	\$0	\$172,160	\$0	\$185,665
Internal Services	\$0	\$478,232	\$0	\$537,594
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,414,409</b>	<b>\$0</b>	<b>\$1,651,282</b>
<b>Program Total:</b>	<b>\$1,414,409</b>		<b>\$1,651,282</b>	
<b>Program FTE</b>	0.00	5.00	0.00	5.00

Program Revenues				
Taxes	\$0	\$152,592,000	\$0	\$163,000,000
Beginning Working Capital	\$0	\$210,020,210	\$0	\$409,272,919
<b>Total Revenue</b>	<b>\$0</b>	<b>\$362,612,210</b>	<b>\$0</b>	<b>\$572,272,919</b>

**Explanation of Revenues**

This program generates \$34,137 in indirect revenues.  
 \$163,000,000 - Preschool for All Fund (Local)  
 \$409,272,919 - 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 - \$6,849,904  
 MCHD (Multnomah County Health Department) 40099B - \$1,845,165

**Significant Program Changes**

**Last Year this program was:** FY 2024: 25200A PEL - Administration & System Support

In FY 2025, this program adds funding for 0.50 FTE dedicated to Preschool for All policy in the Multnomah County Chair's Office (10000A).

**Department:** County Human Services      **Program Contact:** Leslee Barnes  
**Program Offer Type:** Revenue/Fund Level/Tech      **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 widely 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 2025.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	% of reserve goal met	100%	100%	100%	100%
		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	2024	2024	2025	2025
Unappropriated & Contingency	\$0	\$38,148,000	\$0	\$40,750,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$38,148,000</b>	<b>\$0</b>	<b>\$40,750,000</b>
<b>Program Total:</b>	<b>\$38,148,000</b>		<b>\$40,750,000</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

Significant Program Changes

Last Year this program was: FY 2024: 25200B PEL - Contingency and Reserves

In FY 2025, reserves and contingency total \$40,750,000:  
 \$24,450,000 - reserves (15% of Preschool for All tax revenue).  
 \$16,300,000 - contingency (10% of Preschool for All tax revenue).

**Department:** County Human Services      **Program Contact:** Leslee Barnes  
**Program Offer Type:** Revenue/Fund Level/Tech      **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. Dedicated savings dollars are an important fiscal strategy to ensure stability and consistent service levels as Preschool for All 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. Revenue from surpluses in the early years will be set aside as dedicated savings to fund slots during future years.

**PROGRAM GOAL:** Dedicated savings 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 updated revenue and cost estimates, there will be an 8 year period during Fiscal Years 2029- 2036 when the costs are higher than the anticipated revenue. Over time, the gap between revenues and expenses narrows. In Fiscal Year 2037, 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 dedicated savings to ensure that PFA can provide consistent levels of high-quality preschool experiences for Multnomah County families.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Based on projections, program is on track to cover future expenses	Yes	Yes	Yes	Yes
		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	2024	2024	2025	2025
Unappropriated & Contingency	\$0	\$237,138,947	\$0	\$425,212,827
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$237,138,947</b>	<b>\$0</b>	<b>\$425,212,827</b>
<b>Program Total:</b>	<b>\$237,138,947</b>		<b>\$425,212,827</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 2024: 25200C PEL - Revenue Smoothing

**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**

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 (10.00 FTE), a Policy & Partnerships Team focused on policy areas that will build the capacity and quality of PFA (16.00 FTE), and staff focused on administrative, evaluative, and communications functions of Preschool for All (11.00 FTE).

The Preschool and Early Learning Division staffs 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 reviews the program budget, advises program evaluation, reviews data, and makes policy recommendations.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Preschool for All Advisory Committee Meetings	4	4	4	4
Outcome	% of Advisory Committee who identify as Black, Indigenous, and People of Color	73%	50%	67%	50%
Outcome	% of PEL Division employees who identify as Black, Indigenous, and People of Color	83%	50%	68%	50%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$4,930,169	\$0	\$6,124,169
Contractual Services	\$0	\$65,000	\$0	\$192,810
Materials & Supplies	\$0	\$184,503	\$0	\$206,776
Internal Services	\$0	\$882,143	\$0	\$917,154
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$6,061,815</b>	<b>\$0</b>	<b>\$7,440,909</b>
<b>Program Total:</b>	<b>\$6,061,815</b>		<b>\$7,440,909</b>	
<b>Program FTE</b>	0.00	32.00	0.00	38.00

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

Explanation of Revenues

This program generates \$245,654 in indirect revenues.

Significant Program Changes

Last Year this program was: FY 2024: 25201 PEL - Program Development & System Support

This program offer adds 1.00 FTE Program Communications Coordinator, 1.00 FTE Research Evaluation Analyst 2, and 4.00 FTE Program Specialist.

**Department:** County Human Services      **Program Contact:** Leslee Barnes  
**Program Offer Type:** Operating      **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. 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of new Preschool for All applications completed by Black, Indigenous, and families of color each year	1,236	750	1,400	1,600
Outcome	% of providers who are satisfied with the support they receive from PFA's intermediary organization*	86%	85%	85%	85%

**Performance Measures Descriptions**

\* The wording of this performance measure was adjusted slightly from: % of small providers who say that the Intermediary Org supports their participation in PFA

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
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 2024: 25202 PEL - Preschool Access: Family & Provider Navigation

**Department:** County Human Services      **Program Contact:** Leslee Barnes  
**Program Offer Type:** Operating      **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. In Fiscal Year 2024, the Preschool & Early Learning Division established a facilities fund for providers. The facilities fund invests in the construction and renovation of early learning spaces, as well as offering 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 even bigger for Black, Indigenous and providers of color who experience systemic barriers to traditional bank loans and business supports. The facilities fund increases child care providers' access to capital dollars and supports providers ready to improve their learning environments and expand their programs.

Facilities funds help providers improve their spaces and expand into bigger or new locations. Investments in child care facilities gives families more preschool choices and increases the number of preschool slots available.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
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%	50%	50%

### Performance Measures Descriptions

\* CSOs = culturally specific organizations



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$17,800,000	\$0	\$17,800,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$17,800,000</b>	<b>\$0</b>	<b>\$17,800,000</b>
<b>Program Total:</b>	<b>\$17,800,000</b>		<b>\$17,800,000</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 2024: 25203 PEL - Preschool Infrastructure Capacity Building

**Department:** County Human Services      **Program Contact:** Leslee Barnes  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 40099B, 72052A, 72052B, 78335  
**Program Characteristics:**

**Executive Summary**

Preschool for All (PFA) gives 3- and 4-year-olds in Multnomah County access to free early education. The number of children served each year will increase until the program 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. Additional support will be offered to strengthen program quality and build provider capacity to offer Preschool for All slots

**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. Creative capacity-building solutions will be needed to support the expansion of existing providers and to help new providers get started.

**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 Preschool for All coaches 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, capacity-building efforts, and financial incentives. Supports and capacity-building efforts are for providers who meet PFA requirements, as well as for 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 have more options and to choose the early learning setting that’s right for their child.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of early educators participating in coaching and other supports	226	350	345	400
Outcome	% of Coaches supporting Preschool for All who identify as Black, Indigenous and People of Color	85%	50%	67%	50%

**Performance Measures Descriptions**

Performance measure removed: % of providers and staff who report progress on their goals due to coaching and supports

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$10,664,000	\$0	\$8,414,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$10,664,000</b>	<b>\$0</b>	<b>\$8,414,000</b>
<b>Program Total:</b>	<b>\$10,664,000</b>		<b>\$8,414,000</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 2024: 25204 PEL - Program Quality: Coaching & Provider Supports

\$2,000,000 in contractual services moved from program PEL – Program Quality: Coaching & Provider Supports (25204) to PEL – Early Educator Workforce Development (25206) in order to prioritize workforce development efforts to promote future slot expansion.

**Department:** County Human Services      **Program Contact:** Leslee Barnes  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 40099B, 72052A, 72052B, 78335  
**Program Characteristics:**

**Executive Summary**

Preschool for All (PFA) Pilot Sites provide high-quality, culturally responsive, inclusive preschool. Pilot Sites are the first early education providers to contract with Preschool for All and offer PFA seats. Pilot Site locations include child care centers, Head Starts, licensed family child care programs, and school districts. Pilot Sites work closely with the Preschool & Early Learning Division to share feedback and refine the program.

**Program Description**

**ISSUE:** Pilot Sites are the first providers to offer Preschool for All seats. The Preschool & Early Learning Division works 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.

**PROGRAM GOAL:** Key areas for Pilot Site implementation include start-up costs for providers, funding for preschool seats, and inclusion. These investments represent the first PFA seats that are available for families. The funding also helps to ensure that Pilot Sites can support children who have developmental delays and disabilities.

**PROGRAM ACTIVITY:** Over 2,000 seats will be available in FY 2025 and the number of seats 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 key systems partners. Pilot Sites will partner with a coach to improve their program and services. The average cost paid for each seat in Fiscal Year 2025 will be approximately \$21,134 with school day/school year seats costing less than 10 hour per day/year-round seats.

Organizations and businesses selected as Pilot Sites work 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of Preschool for All slots	728	1,400	1,394	2,100
Outcome	Percentage of Preschool for All slots filled (enrolled)	90%	85%	95%	85%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$36,592,060	\$0	\$47,814,596
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$36,592,060</b>	<b>\$0</b>	<b>\$47,814,596</b>
<b>Program Total:</b>	<b>\$36,592,060</b>		<b>\$47,814,596</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 2024: 25205 PEL - Preschool for All Pilot Sites

The FY 2024 budget includes \$4.0 million for Infant Toddler Stabilization. In FY 2025, Infant Toddler Stabilization is separated out into its own program offer (25207).

**Department:** County Human Services      **Program Contact:** Leslee Barnes  
**Program Offer Type:** Operating      **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 across the nation they are poorly paid, undervalued, and required to navigate confusing and disconnected systems and regulations. Staffing shortages continue to be an issue for early childhood education 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of early educators participating in Preschool for All workforce development programs	60	500	250	800
Outcome	% of educators participating in workforce programs who identify as Black, Indigenous, and People of Color	*	60%	60%	60%

**Performance Measures Descriptions**

\* Demographic information was not collected by the partner organization in the first year of implementation. This data will be collected starting FY24.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$5,000,000	\$0	\$7,000,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,000,000</b>	<b>\$0</b>	<b>\$7,000,000</b>
<b>Program Total:</b>	<b>\$5,000,000</b>		<b>\$7,000,000</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 2024: 25206 PEL - Early Educator Workforce Development

\$2,000,000 in contractual services moved from program PEL – Program Quality: Coaching & Provider Supports (25204) to PEL – Early Educator Workforce Development (25206) in order to prioritize workforce development efforts to promote future slot expansion.

**Department:** County Human Services      **Program Contact:** Leslee Barnes  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 40099B, 72052A, 72052B, 78335  
**Program Characteristics:**

**Executive Summary**

Universal preschool can have negative impacts on infant and toddler care because the cost of caring for babies and toddlers is much higher than providing care for 3 and 4 year olds. Preschool for All will protect infant and toddler seats by supporting contracted preschool providers through stabilization funding. With these dollars, providers will be able to increase the wages and benefits of educators who work with 0-3 year olds not yet eligible for Preschool for All. This will increase stability across Multnomah County's early childhood landscape as Preschool for All scales to full universality by 2030.

**Program Description**

**ISSUE:** Preschool expansions in communities outside Multnomah County have led to decreases in infant and toddler seats. This is largely because of the high costs associated with care for babies and toddlers. The required ratio of teachers to children is much higher for younger age groups, making the cost of care more expensive. This higher cost can incentivize providers to stop offering infant and toddler seats. Multnomah County is already considered a child care desert for infants and toddlers because there are more than three children for every infant and toddler child care seat.<sup>1</sup>

**PROGRAM GOAL:** Preschool for All's implementation plan incorporated lessons from other communities across the country who expanded preschool access. The funding protects infant and toddler care in Multnomah County by increasing the wages and benefits for teachers who work with babies and toddlers.

**PROGRAM ACTIVITY:** This funding supports the recruitment and retention of infant and toddler teachers and increases pay equity within early education programs. The allocated amount for each preschool provider is determined by their total number of infant and toddler seats.

This funding is only available for contracted Preschool for All sites. Sites must also meet wage requirements for preschool teachers and assistants and they have specific limitations on how the stabilization funding can be used.

Mitigating the potential negative impacts of preschool expansion was included in the original Preschool for All planning. It is important for Preschool for All to strengthen early education settings serving infants and toddlers to ensure the stability of Multnomah County's early childhood ecosystem. Infant and toddler stabilization funding will help more Multnomah County families have the child care and early childhood education resources they need.

<sup>1</sup>Oregon Child Care Research Partnership, Oregon State University.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Total number of Preschool for All locations that are offering infant/toddler care.	N/A	N/A	N/A	66
Outcome	Percentage of providers who report that stabilization funding supported them in maintaining infant/toddler slots	N/A	N/A	N/A	95%

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$0	\$0	\$6,034,236
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$6,034,236</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$6,034,236</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 2024: 25205 PEL - Preschool for All Pilot Sites

In FY 2024, Infant Toddler Stabilization was budgeted within the Preschool for All Pilot Sites program (25205) at \$4.0 million. In FY 2025, Infant Toddler Stabilization is separated out into its own program offer.

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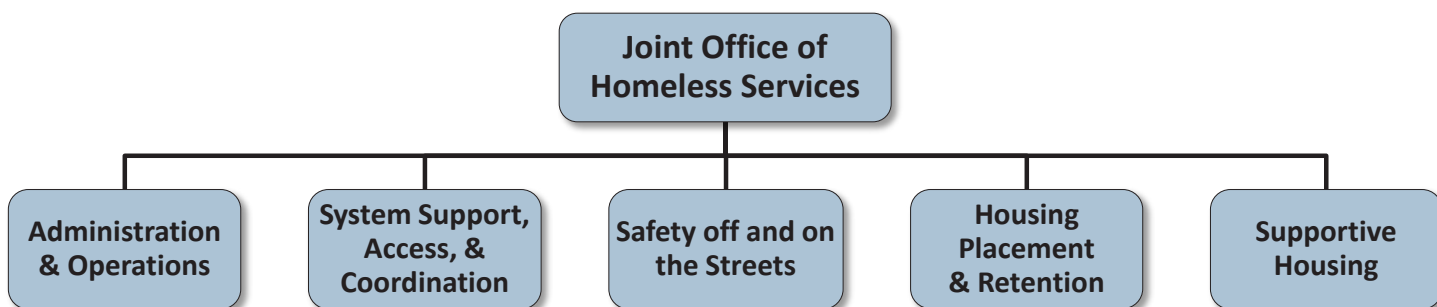
### Department Overview

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: Contracting and overseeing local, State and Federal funds to nonprofit providers delivering a continuum of homelessness 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 and alternative shelter system; leading Multnomah County’s planning and implementation of programming funded by the Metro Supportive Housing Services Measure; serving as the U.S. Department of Housing and Urban Development Continuum of Care “Lead Agency”; and supporting the involvement of community stakeholders in the development and implementation of policies and programs that help address and end homelessness. 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; and Supportive Housing.

The JOHS services are based on the Housing First approach. Through this lens, and with years of participant-driven planning that includes the creation and implementation of the Multnomah County Local Implementation Plan (LIP) and the Homelessness Response Action Plan, the Joint Office has followed a clear road map that expands and builds upon services that reduce chronic and episodic homelessness. All work throughout the department is informed by strategies aimed at eliminating racial disparities while ending homelessness for individuals and families.

In FY 2025, JOHS will continue to realize the promise of the Supportive Housing Services Measure, serving even more people with the stabilization services they need to end their homelessness once and for all. We will be working closely with our County partners to achieve this success, building and leveraging behavioral health, justice and anti-poverty programs in a One County approach under the Homelessness Response Action Plan.



# \$395.3 million

## Total Adopted Budget

Includes cash transfers, contingencies, and unappropriated balances.

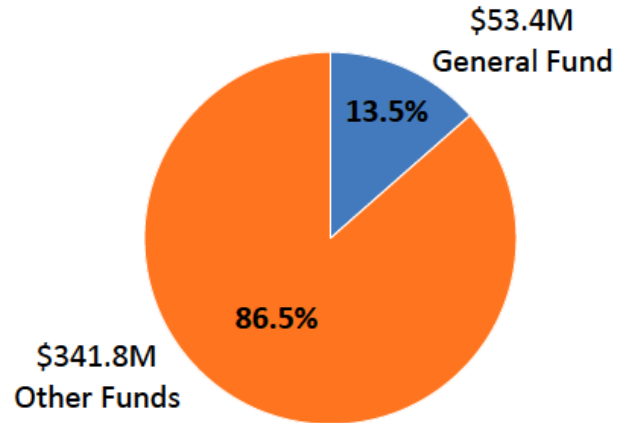
### 122.00 FTE

Total Adopted Staffing



### 21.00 FTE

Increase from  
FY 2024 Adopted



### \$100.5 million

All Funds Increase from  
FY 2024 Adopted



### 34% increase

### General Fund

### \$18.5 million

### New One-Time-Only Programs

## Operating Budget by Category - \$342.5 million

Does not include cash transfers, contingencies, and unappropriated balances



The department's total budget is its legal budget, totaling \$395.3 million in FY 2025. The County is required by Oregon Budget Law to report the budget at this level, although doing it this way overstates what we actually plan to spend on programming because it includes unappropriated balances, contingencies, and cash transfers from one fund to another. Program offers reflect the total budget.

This budget document will often focus on the operating budget (a subset of the total budget) because that number avoids some double counting and provides a clearer picture of what the department expects to spend in a year. The operating budget excludes unappropriated balances, contingencies, and cash transfers. The table below shows the amounts that add up to the department's total budget.

<b>FY 2025 Joint Office of Homeless Services Budget</b>	
<b>Operating Budget</b>	<b>342,490,107</b>
Contingency (All Funds)	33,286,856
Internal Cash Transfers	19,500,000
Reserves (Unappropriated Balances)	<u>0</u>
<b>Total Budget</b>	<b>\$395,276,963</b>

## Mission, Vision, and Values

JOHS' mission to create an equitable community in which all people have safe, affordable, and accessible housing is driven by the Multnomah County Local Implementation Plan (LIP) for the Metro Supportive Housing Services Measure. New in FY 2025, the JOHS will also be guided by the Homelessness Response Action Plan (HRAP). Guided by the LIP and the HRAP, JOHS has and will continue to follow a clear road map that expands and builds upon services that reduce chronic and episodic homelessness. The 10-year plan outlined in the LIP and the two year HRAP include an array of supports including emergency shelters; rent assistance; housing placement supports; outreach and navigation services; and benefits assistance to help people achieve and keep permanent housing.

Our guiding values are collaboration, equity, inclusion, integrity, creativity and quality.

- **Collaboration:** We recognize our interdependence as individuals and as an organization, and approach our work with a spirit of partnership and shared power with those experiencing homelessness and other stakeholders.
- **Equity:** We commit to achieving equity for all individuals. We acknowledge the existence of structural racism and develop, implement, and evaluate policies and practices that achieve equitable outcomes with a focus on eliminating the disparities that people of color experience. We believe that focusing on racial equity will allow us to more effectively serve all communities.
- **Inclusion:** We foster within our office and within the community that we serve a culture of safety and belonging that ensures that the voices of people who have been historically excluded, including people of color, women, people with disabilities and LGBTQIA2S+ people, are truly heard and shape the direction of our work.
- **Integrity:** We strive to be humble, honest and fair in our roles, function and actions. We are open and accountable to each other and to the community that we serve.
- **Creativity:** We are always open to approaching problems and solutions in new ways, taking calculated risks, and testing innovative ideas.
- **Quality:** We commit to doing the highest quality work, and to continuously evaluating and improving our internal operations, contracting and community planning efforts. We recognize that it is our responsibility to be good stewards of the public resources entrusted to us and to ensure that those resources achieve the best possible outcomes for our community.

## Diversity, Equity, and Inclusion

Equity and inclusion are two of the guiding values of JOHS, as noted in the Mission, Vision, and Values. The JOHS Equity Team is committed to ensuring equitable, anti-racist, gender-affirming and culturally responsive systems for our partners, workforce and community. The Equity Team supports the implementation of equity in our department through:

- monitoring and reviewing policies, practices and work plans;
- providing collaboration, project partnership and subject matter expertise to teams and processes across the department;
- coordinating training and tools internally and externally with our provider partners;
- managing all aspects of the JOHS department Workforce Equity Strategic Plan (WESP);
- facilitating the Equity Steering Committee;
- engaging community partners through training sessions and initiatives;
- providing capacity-building technical assistance to new and emerging culturally specific providers;
- facilitating the Equity Advisory Committee.

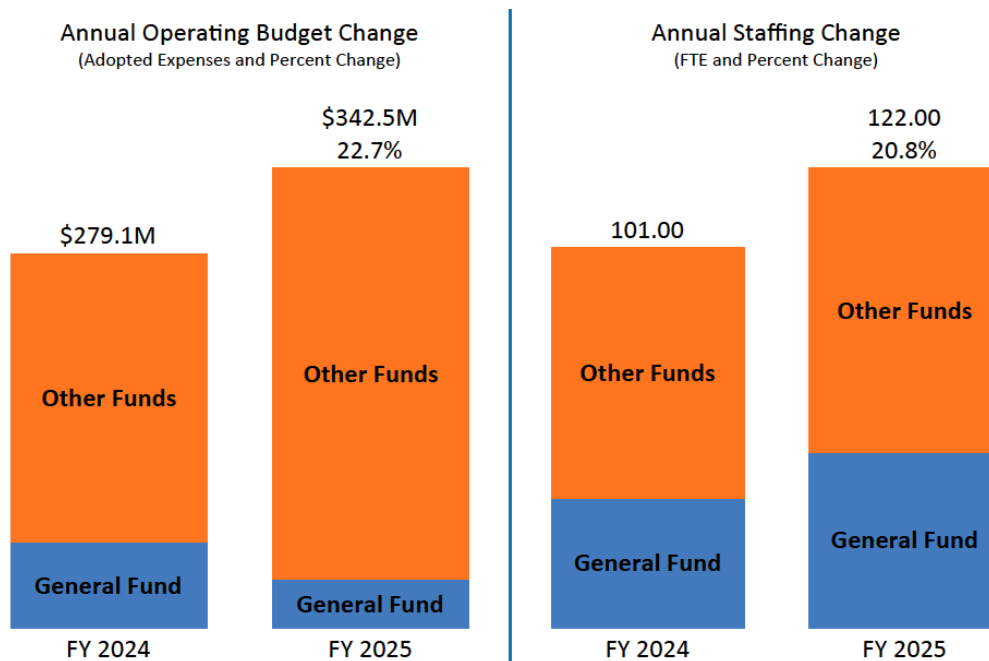
Because so much of JOHS' work is supporting contracted service providers, and because we are committed to inclusively leading with race in our work toward equity for people experiencing homelessness, much of the capacity of the JOHS Equity Team supports our work with partners and the community. JOHS requires contracted providers to submit equity work plans as part of the contracting process. The JOHS Equity Team provides support, tools and technical assistance to providers as requested, and to our contract managers who are responsible to monitor equity work plans. In FY 2024, the JOHS Equity Manager led a process engagement with contracted providers and internal staff to improve JOHS' expectations and monitoring of provider equity work plans, hoping to increase support and resources in the coming fiscal year.

The JOHS Equity Team also includes positions focused on equity internal to JOHS. The Equity Manager sits on the executive team and provides subject matter expertise and support in the application of an equity lens to leadership decisions and processes. The Equity Manager partners with the Human Resources manager regarding all employee relations issues to ensure equitable process and consideration of cultural awareness. Further, in alignment with our guiding values, the expectation is that all decision-making in the JOHS incorporates an equity lens. JOHS also has an Equity Steering Committee (ESC) that is composed of representatives from every team/division of the Department. The ESC provides policy review and recommendations and acts as equity ambassadors on their team as a communication and collaboration channel between the Equity Team, Leadership and the divisions of the Department .



### Budget Overview

The FY 2025 Joint Office of Homeless Services (JOHS) Adopted operating budget is \$342.5 million a \$63.4 million (23%) increase from the FY 2024 Adopted budget. Metro Supportive Housing Fund (SHS) accounts for 68% of the budget, County General Fund (including Video Lottery) accounts for 12%, City of Portland General Fund 9%, Federal/State Fund 7%. and City American Rescue Plan Act (ARP) 4%.



Total Metro Supportive Housing revenue for Multnomah County is \$304.8 million of which \$156.5 million is ongoing revenue (based on Metro’s most recent forecast) and \$148.3 million is beginning working capital (BWC). The \$304.8 million figure includes contingency (5%), stabilization reserves (10%) in program 30006A and the regional strategies implementation fund (program 30006B).

The County budget includes \$36.3 million of Metro Supportive Housing allocated to other County departments:

- Community Justice - \$3,293,721 (programs 50034B, 50041),
- County Human Services - \$9,669,948 (programs 25000, 25011, 25012, 25029B, 25050B, 25118, 25133C, 25131E, 25139B, 25160),
- County Management - \$197,408 (program 72012B),
- District Attorney - \$414,762 (program 15107),
- Health - \$17,895,778 (programs 40010D, 40044A, 40069B/C, 40074B, 40084C, 40085B, 40101B, 40105A/B, 40112),
- Library - \$180,000 (program 80027), and
- Nondepartmental - \$4,661,194 (programs 10000B, 10012C/D).

For additional information around Metro Supportive Housing funding and the Joint Office of Homeless Services, please see the department transmittal letter.

The budget assumes the City of Portland is committed to continue to fund JOHS services and includes \$31.2 million of City of Portland General Fund (including \$6 million carryover funds from FY 2024 with an agreement with the City) and \$13.7 million of City of Portland American Rescue Plan Act (ARPA) funding, for a total commitment of \$44.8 million. The list below shows the City investments by division.

• System Support, Access, & Coordination	2,175,025
• Safety off and on the Streets	35,900,670
• Housing Placement & Retention	1,837,420
• Supportive Housing	<u>4,926,805</u>
<b>Total</b>	<b>\$44,839,920</b>

The following table shows the new ongoing and one-time-only programs. This table, along with information on the Joint Office of Homeless Services for FY 2025, can be found in the Overview of Additions, Reductions, and Reallocations section of the Budget Director’s Message in Volume 1. In addition, the Budget Director’s Message contains a list of one-time-only programs for all departments.

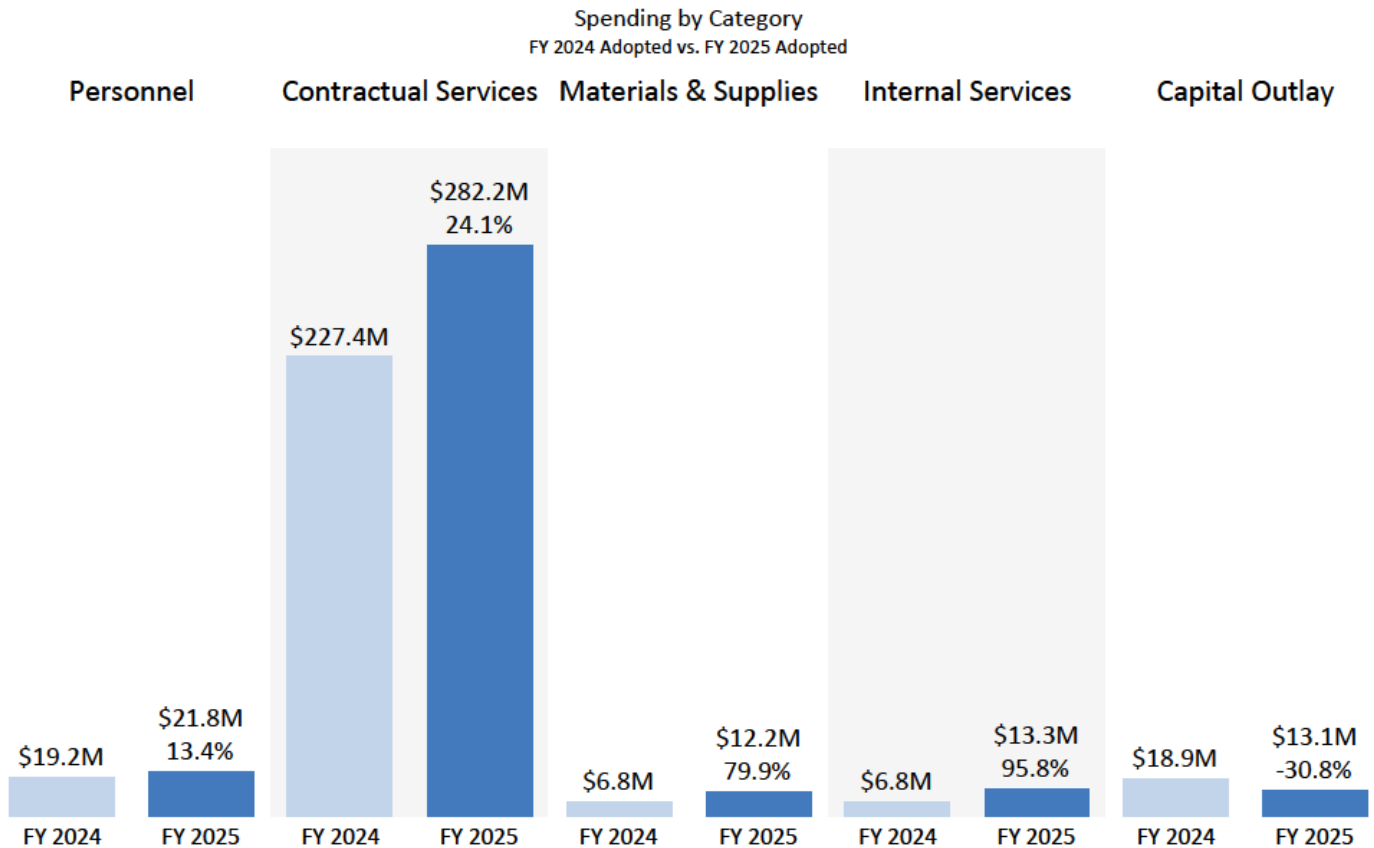
### *New Ongoing and One-Time-Only Programs*

Prog. #	Program Offer Name	General Fund		
		Ongoing	OTO	FTE
<b>Joint Office of Homeless Services (JOHS)</b>				
30208B	Safety off the Streets - Emergency Shelter Strategic Investment Expansion	0	17,500,000	0.00
30208C	Safety off the Streets - Emergency Shelter Strategic Investment - Shelter NOFA	<u>0</u>	<u>1,000,000</u>	<u>0.00</u>
<b>JOHS Total</b>		<b>\$0</b>	<b>\$18,500,000</b>	<b>0.00</b>

# Joint Office of Homeless Services

## FY 2025 Adopted Budget

The chart below provides a breakdown of the budget's expense categories from FY 2024 to FY 2025 Budget Trends table below. Contractual services is the largest component of the Joint Office of Homeless Services budget for both FY 2024 and FY 2025. The overall increase is driven by the increase in Metro Supportive Housing revenue. The chart is followed by the Budget Trends table, which details the changes.



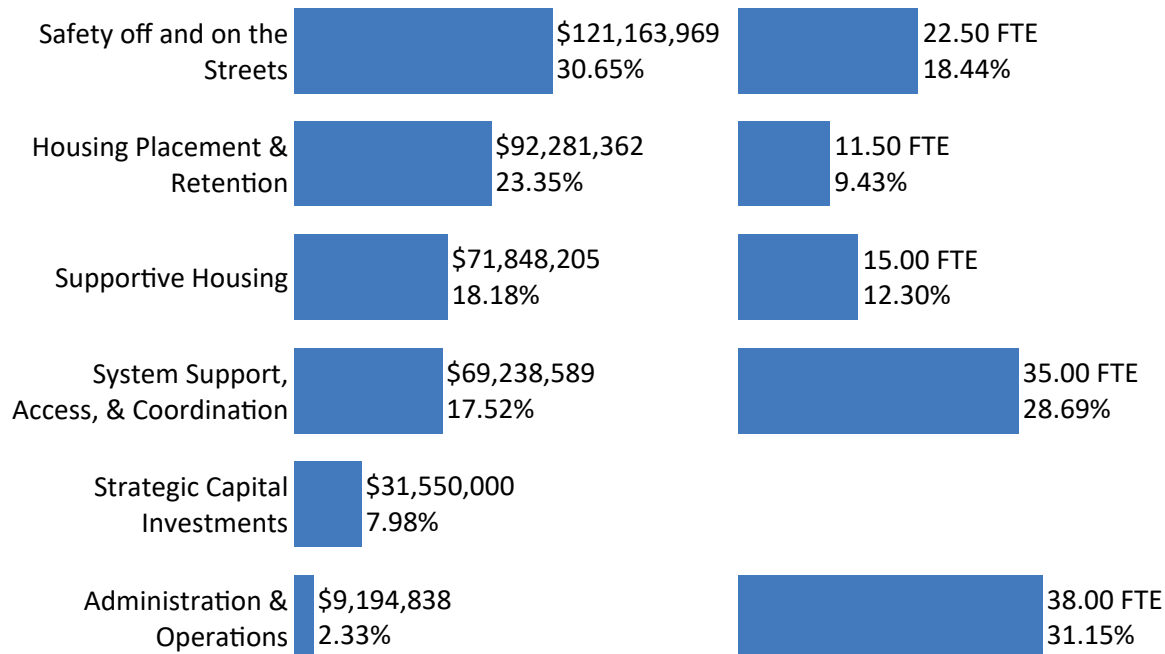
Operating Budget Trends	FY 2023	FY 2024	FY 2024	FY 2025	Difference
	Actual	Current Estimate	Adopted Budget	Adopted Budget	
Staffing FTE	97.00	102.00	101.00	122.00	21.00
Personnel Services	14,999,964	17,276,786	19,225,102	21,808,147	2,583,045
Contractual Services	147,341,840	217,605,231	227,422,870	282,152,587	54,729,717
Materials & Supplies	12,826,523	7,181,087	6,776,608	12,193,241	5,416,633
Internal Services	10,644,672	9,207,591	6,784,619	13,286,132	6,501,513
Capital Outlay	7,348,075	16,475,000	18,860,685	13,050,000	(5,810,685)
<b>Total Costs</b>	<b>\$193,161,074</b>	<b>\$267,745,695</b>	<b>\$279,069,884</b>	<b>\$342,490,107</b>	<b>\$63,420,223</b>

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

### Budget by Division

Division Name	General Fund	Other Funds	Total Division Cost	Total FTE
Administration and Operations	8,448,581	746,257	9,194,838	38.00
System Support, Access, and Coordination	3,588,417	65,650,172	69,238,589	35.00
Safety off and on the Streets	9,533,884	111,630,085	121,163,969	22.50
Housing Placement & Retention	11,298,892	80,982,470	92,281,362	11.50
Supportive Housing	2,061,805	69,786,400	71,848,205	15.00
Strategic Capital Investments	<u>18,500,000</u>	<u>13,050,000</u>	<u>31,550,000</u>	<u>0.00</u>
<b>Total Joint Office of Homeless Services</b>	<b>\$53,431,579</b>	<b>\$341,845,384</b>	<b>\$395,276,963</b>	<b>122.00</b>

*Includes cash transfers, contingencies and unappropriated balances*



### Table of All Program Offers

The following table shows the programs by division that make up the department’s total budget. The individual programs follow, grouped by division.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Administration and Operations</b>						
30000	Director Office, Administration and Operations		4,286,512	746,257	5,032,769	16.00
30001	Business Services		3,223,276	0	3,223,276	17.00
30002	Human Resources		<u>938,793</u>	<u>0</u>	<u>938,793</u>	<u>5.00</u>
<b>Total Administration and Operations</b>			<b>\$8,448,581</b>	<b>\$746,257</b>	<b>\$9,194,838</b>	<b>38.00</b>
<b>System Support, Access, and Coordination</b>						
30003	Data, Research, & Evaluation		433,094	3,439,416	3,872,510	11.50
30004	Policy & Planning		389,254	2,924,418	3,313,672	7.50
30005A	Equity-Focused System Development & Capacity Building		155,198	1,999,434	2,154,632	5.00
30006A	Regional Coordination - Reserve and Contingency		0	23,476,045	23,476,045	0.00
30006B	Regional Coordination - Regional Strategies Implementation Fund		0	23,841,680	23,841,680	2.00
30006C	Regional Coordination - Homeless Management Information System		717,880	3,324,366	4,042,246	1.00
30006D	Regional Coordination - DCA IT HMIS Administration and Developer		0	558,694	558,694	0.00
30100	System Access, Assessment, & Navigation		<u>1,892,991</u>	<u>6,086,119</u>	<u>7,979,110</u>	<u>8.00</u>
<b>Total System Support, Access, and Coordination</b>			<b>\$3,588,417</b>	<b>\$65,650,172</b>	<b>\$ 69,238,589</b>	<b>35.00</b>
<b>Safety off and on the Streets</b>						
30200	Safety off the Streets - Adult Shelter		2,713,566	47,092,775	49,806,341	5.50
30201	Safety off the Streets - Women's Shelter		1,442,942	1,387,275	2,830,217	0.00
30202	Safety off the Streets - Alternative Shelter for Adults		0	7,520,444	7,520,444	3.00
30203	Safety off the Streets - Family Shelter		1,865,918	6,790,676	8,656,594	1.00
30204	Safety off the Streets - Domestic Violence Shelter		1,313,475	5,446,494	6,759,969	0.50
30205	Safety off the Streets - Youth Shelter		1,994,505	2,289,545	4,284,050	0.50
30206	Safety off the Streets - Winter Shelter & Severe Weather		0	2,396,440	2,396,440	0.00
30207	Safety off the Streets - Bridge Housing		0	2,908,005	2,908,005	0.00
30209	Safety off the Streets - Motel Shelter Operations		0	16,489,630	16,489,630	0.00
30210A	Safety on the Streets		203,478	2,070,163	2,273,641	3.00

# Joint Office of Homeless Services

## FY 2025 Adopted Budget

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
30210B	Safety on the Streets - Navigation & Service Coordination		0	1,826,743	1,826,743	2.00
30211	Safety on the Streets - Supply Center		0	1,758,895	1,758,895	4.00
30905	ARP - COVID-19 Emergency Response - Outdoor Physical Distancing Shelters & Safe Rest Villages		0	13,653,000	13,653,000	3.00
	<b>Total Safety off and on the Streets</b>		<b>\$9,533,884</b>	<b>\$111,630,085</b>	<b>\$121,163,969</b>	<b>22.50</b>
<b>Housing Placement and Retention</b>						
30300	Housing Placement & Retention - Adults & Women Households		2,216,795	6,816,368	9,033,163	1.50
30301A	Housing Placement & Retention - Homeless Families		2,780,241	9,018,889	11,799,130	2.00
30302	Housing Placement & Retention - Placement out of Adult Shelter		884,490	3,746,265	4,630,755	0.00
30302B	Housing Placement & Retention - Placement out of Shelter		0	12,285,920	12,285,920	0.00
30303A	Housing Placement & Retention - Domestic Violence		1,576,942	6,547,878	8,124,820	3.00
30304	Housing Placement & Retention - Emergency Rent Assistance		0	3,268,845	3,268,845	0.00
30305	Housing Placement & Retention - Medical/Aging		0	728,165	728,165	0.00
30306	Housing Placement & Retention - Youth Services		2,704,806	4,435,400	7,140,206	2.00
30307	Housing Placement & Retention - Veterans		348,850	506,810	855,660	0.00
30308A	Housing Placement & Retention - Gresham Homeless Services Expansion		0	600,000	600,000	0.00
30308B	Housing Placement & Retention - East County Homeless Services		0	300,000	300,000	0.00
30308C	Housing Placement & Retention - East County Homeless Services Expansion		0	200,000	200,000	0.00
30309	Housing Placement & Retention - Primary Leasing Program		0	2,967,805	2,967,805	0.00
30310	Housing Placement & Retention - Housing Multnomah Now		0	5,000,000	5,000,000	3.00
30311	Housing Placement & Retention - State Executive Order 24-02		0	16,693,568	16,693,568	0.00
30500	Diversion Services		786,768	2,167,017	2,953,785	0.00
30600	Employment Programs		0	5,699,540	5,699,540	0.00
	<b>Total Housing Placement and Retention</b>		<b>\$11,298,892</b>	<b>\$80,982,470</b>	<b>\$92,281,362</b>	<b>11.50</b>

# Joint Office of Homeless Services

## FY 2025 Adopted Budget

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Supportive Housing</b>						
30400A	Supportive Housing		866,750	20,081,756	20,948,506	14.00
30400C	Supportive Housing - Local Bond Units and Site-Based Commitments		0	14,509,785	14,509,785	0.00
30400D	Supportive Housing - Tenant-Based Commitments		0	15,473,785	15,473,785	0.00
30400E	Supportive Housing - System Support		0	2,464,039	2,464,039	0.00
30400F	Supportive Housing - Local Bond Units and Site-Based Commitments - SHS Expansion		0	2,747,410	2,747,410	0.00
30401A	Supportive Housing - Behavioral Health/Medical Housing		0	4,302,920	4,302,920	0.00
30401B	Supportive Housing - Behavioral Health/Medical Housing - Service Coordination Team		0	2,590,380	2,590,380	0.00
30402	Supportive Housing - Local Long Term Rental Vouchers		399,635	721,280	1,120,915	0.00
30403	Supportive Housing - Families		795,420	2,183,395	2,978,815	1.00
30404	Supportive Housing - Youth		0	1,524,645	1,524,645	0.00
30405	Supportive Housing - Domestic Violence		0	925,635	925,635	0.00
30406	Supportive Housing - Frequent Users Systems Engagement		0	2,261,370	2,261,370	0.00
30999	Supportive Housing Services Revenue for Other Departments		0	0	0	0.00
	<b>Total Supportive Housing</b>		<b>\$2,061,805</b>	<b>\$69,786,400</b>	<b>\$71,848,205</b>	<b>15.00</b>
<b>Strategic Capital Investments</b>						
30208A	Safety off the Streets - Emergency Shelter Strategic Investment		0	13,050,000	13,050,000	0.00
30208B	Safety off the Streets - Emergency Shelter Strategic Investment Expansion	X	17,500,000	0	17,500,000	0.00
30208C	Safety off the Streets - Emergency Shelter Strategic Investment - Shelter NOFA	X	<u>1,000,000</u>	<u>0</u>	<u>1,000,000</u>	<u>0.00</u>
	<b>Total Strategic Capital Investments</b>		<b>\$18,500,000</b>	<b>\$13,050,000</b>	<b>\$31,550,000</b>	<b>0.00</b>
	<b>Total Joint Office of Homeless Services<sup>1</sup></b>		<b>\$53,431,579</b>	<b>\$341,845,384</b>	<b>\$395,276,963</b>	<b>122.00</b>

<sup>1</sup> Includes cash transfers, contingencies, and unappropriated balances.

### Administration and Operations

The Administration and Operations division is responsible for providing strategic direction for the Joint Office of Homeless Services. Working with elected leaders, community-based organizations, advisory bodies and stakeholders, this division develops, implements and supports the delivery of homeless services. The key components of the Administration and Operations division include:

- **Equity-Focused Executive Leadership:** This unit provides strategic direction for the department’s programs and services with a focus on ensuring equity and inclusivity.
- **Fiscal Business Services:** This unit is responsible for the development, management and administration of the annual budget. This team also manages local, state and federal funding, and the procurement and contracting process. Additionally, the team handles the processing of invoices from and payments to contracted service providers.
- **Facilities & Operational Services:** This group supports administrative and in-office operations and oversees facilities asset planning, management and development to ensure smooth operations.
- **Human Resources:** This team conducts internal and external recruitments and provides a structured onboarding process for new employees. It also supports employee retention through training, employee relations, professional development, and ensuring a safe and inclusive work environment for all staff.
- **Communications:** This team manages both internal and external communications for the Joint Office.

The Administration and Operations division plays a crucial role in providing leadership, managing finances, maintaining facilities, supporting staff and facilitating effective communication within the Joint Office of Homeless Services.

# \$9.2 million

## Administration and Operations

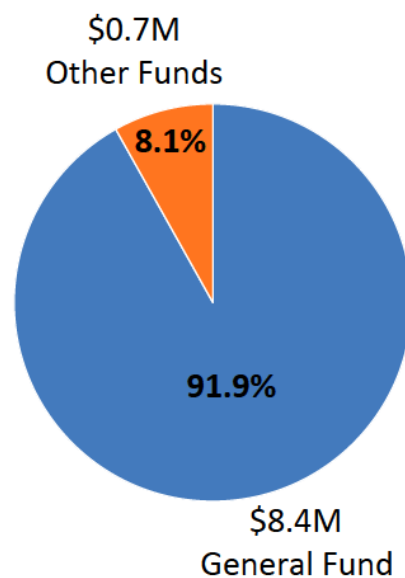
Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.



### 38.00 FTE

(full time equivalent)





### Significant Division Changes

In FY 2024, the Joint Office filled several significant leadership positions, including the Department Director, Deputy Director, and Finance Manager Senior. This division is currently in the process of hiring a Shelter Strategy and Operations Manager. Solidifying these leadership positions has been, and will continue to be, key to the successful operation and leadership of the Joint Office.

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Administration and Operations</b>						
30000	Director Office, Administration and Operations		4,286,512	746,257	5,032,769	16.00
30001	Business Services		3,223,276	0	3,223,276	17.00
30002	Human Resources		<u>938,793</u>	<u>0</u>	<u>938,793</u>	<u>5.00</u>
<b>Total Administration and Operations</b>			<b>\$8,448,581</b>	<b>\$746,257</b>	<b>\$9,149,838</b>	<b>38.00</b>

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

**Program Offer Type:** Administration      **Program Offer Stage:** Adopted

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

This program offer funds the Director's Office, administrative operations, the communications team, and partially funds the equity team for the Joint Office of Homeless Services (JOHS). The JOHS supports a collective 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 end homelessness for thousands of individuals and families each year. The JOHS manages resources from Multnomah County, the City of Portland, the regional Supportive Housing Services measure administered by Metro, the State of Oregon, and the U.S. Department of Housing and Urban Development (HUD) to fund community initiatives and programs to make homelessness a rare and brief experience.

**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 unsheltered homeless counts, and writes proposals to and monitors funds issued by HUD. These operations affect the lives of thousands of homeless individuals, 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 or at-risk of homelessness. The JOHS receives funding and policy direction from the Metro Supportive Housing Services Measure passed by the voters of the region, 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. The JOHS recognizes the importance of achieving racial equity for our staff as well. The JOHS aims to meet and exceed the recommendations articulated in the Multnomah County Workforce Equity Strategic Plan (WESP), and engages our entire department staff in identifying workforce equity priorities and developing action plans to address those priorities.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Lead community-based budget recommendation development	1	1	1	1
Outcome	Present Community Budget Advisory Committee budget recommendations	1	1	1	1

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$1,176,390	\$1,322,913	\$2,631,489	\$302,894
Contractual Services	\$0	\$105,000	\$0	\$108,465
Materials & Supplies	\$310,978	\$159,653	\$161,757	\$202,563
Internal Services	\$602,370	\$486,018	\$1,493,266	\$132,335
<b>Total GF/non-GF</b>	<b>\$2,089,738</b>	<b>\$2,073,584</b>	<b>\$4,286,512</b>	<b>\$746,257</b>
<b>Program Total:</b>	<b>\$4,163,322</b>		<b>\$5,032,769</b>	
<b>Program FTE</b>	6.55	8.45	14.00	2.00

Program Revenues				
Intergovernmental	\$0	\$1,574,800	\$0	\$603,689
Other / Miscellaneous	\$420,645	\$0	\$3,846,146	\$0
Beginning Working Capital	\$0	\$0	\$0	\$142,568
<b>Total Revenue</b>	<b>\$420,645</b>	<b>\$1,574,800</b>	<b>\$3,846,146</b>	<b>\$746,257</b>

Explanation of Revenues

This program generates \$132,335 in indirect revenues. County General fund plus Departmental Indirect Revenue, \$603,689 of the FY 2025 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$132,218 carryover from 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 2024: 30000 Administration and Operations

This program offer contains an additional 1.00 FTE that supports equity goals with the department and County. The offer also includes 2.00 FTE that were moved from other Program Offer to better align with departmental organization and goals.

**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 budgeting, grants management, accounts payable, contracts, and purchasing. The JOHS business services team is responsible for the 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 life cycle of contracts from initial development to mid-year updates and annual renewals. The JOHS maintains more than 100 contracts with more than 70 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 1500 invoices each year totaling more than \$150 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of contracts managed, including culturally-specific organizations*	79	70	100	100
Outcome	Number of invoices processed	1,168	900	1,350	1,500
Outcome	Funding passed to community-based organizations, including culturally-specific organizations	\$138.0 million	\$125.0 million	\$147.0 million	\$150.0 million
Outcome	Percent of financial reports submitted to the satisfaction of the grantor	99%	99%	99%	99%

### Performance Measures Descriptions

FY 2024 Estimate and FY 2025 Offer reflects an increase in Metro Supportive Housing Services funding.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$1,383,397	\$709,372	\$3,155,071	\$0
Materials & Supplies	\$0	\$0	\$68,205	\$0
<b>Total GF/non-GF</b>	<b>\$1,383,397</b>	<b>\$709,372</b>	<b>\$3,223,276</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,092,769</b>		<b>\$3,223,276</b>	
<b>Program FTE</b>	8.50	4.50	17.00	0.00

Program Revenues				
Intergovernmental	\$0	\$864,315	\$0	\$0
Other / Miscellaneous	\$0	\$0	\$2,107,581	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$864,315</b>	<b>\$2,107,581</b>	<b>\$0</b>

Explanation of Revenues

County General fund plus and Departmental Indirect Revenue.

Significant Program Changes

Last Year this program was: FY 2024: 30001 Business Services

This program offer contains an additional 1.00 limited duration appointment that will manage divisional quality and compliance programs that will focus on implementing strategic plans around financial and operational aspects of the department. It also contains an additional 4.00 FTE and 1.00 limited duration appointment that support the growth of the finance teams growing obligations in reporting, accounts payable and budgetary needs.

**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. Staffed with individuals of diverse educational, professional, cultural, and lived backgrounds the HR team offers a high-level of expertise and competency that reflects 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 HR team provides the department with internal expertise, support, guidance, and leadership on all human resources functions, with a focus on equitable and inclusive practices.

The JOHS workforce has grown from 32.00 FTE in FY 2022 to over 120.00 FTE in FY 2025, which required intentional human resources leadership and strategic organizational planning and development of staffing and recruitment plans. It has also required additional capacity for all HR business processes, including recruitment and retention, onboarding, employee relations, professional development, and timekeeping. In partnership with the JOHS Equity Committee and Equity Manager, the HR team provides 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 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 through training, employee relations, professional development, and ensuring safety, trust, and belonging for all JOHS staff. Additionally, the HR team 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Percent of recruitments that are successful	94%	90%	95%	90%
Outcome	Number of regular employees provided full range of HR services	98	102	104	120*
Output	Percent of total recruitments that include candidates who identify as a person of color	98%	100%	100%	100%
Output	Percent of JOHS staff negatively impacted by avoidable Workday errors	14%	15%	10%	15%

### Performance Measures Descriptions

\*This 20% increase correlates with the projected increase in FTE in FY 2025

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$645,206	\$193,579	\$938,793	\$0
<b>Total GF/non-GF</b>	<b>\$645,206</b>	<b>\$193,579</b>	<b>\$938,793</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$838,785</b>		<b>\$938,793</b>	
<b>Program FTE</b>	3.60	1.40	5.00	0.00

Program Revenues				
Intergovernmental	\$0	\$193,579	\$0	\$0
Other / Miscellaneous	\$223,023	\$0	\$941,852	\$0
<b>Total Revenue</b>	<b>\$223,023</b>	<b>\$193,579</b>	<b>\$941,852</b>	<b>\$0</b>

Explanation of Revenues

County General fund plus and Departmental Indirect Revenue.

Significant Program Changes

Last Year this program was: FY 2024: 30002 Human Resources

### System Support, Access, and Coordination

The System Support, Access & Coordination division of the Joint Office of Homeless Services (JOHS) is responsible for providing various types of support to ensure the effective delivery of services and promote equity-focused practices in addressing homelessness. The division consists of several teams with specific roles and responsibilities:

- **Data, Research, and Evaluation:** This team oversees the collection and quality assurance of data from contracted service providers. Additionally, the team develops and implements ongoing outcome reporting, and responds to requests for quantitative information from jurisdictional and community partners. This team also conducts evaluations of specific programs, strategies and systems of care.
- **Policy, Planning, and Regional Coordination:** This team supports community-led policy and planning initiatives, including the implementation of the Metro Supportive Housing Services (SHS) Measure. The team works closely with regional planning bodies associated with the SHS Measure and with JOHS Community Advisory Bodies including the Continuum of Care, Lived Experience Advisory Committee, and Equity Advisory Committee. The focus of these committees is to incorporate the perspectives of people with lived experience of homelessness, particularly from Black, Indigenous and People of Color (BIPOC) communities, in the development of policy recommendations.
- **Equity-Focused System Development:** This team ensures that community-based organizations, especially emerging and culturally specific organizations, have equitable opportunities to contract with the Joint Office and access critical resources for their work in the community. The goal is to support organizations that deliver services in an equitable manner and to expand the culturally-specific and culturally-responsive capacity of each system of care.
- **Access to Homeless and Housing Services:** This work includes various items aimed at improving access to homeless and housing services. This includes the Coordinated Access staff, who lead the development and implementation of processes for assessing and prioritizing individuals and families for Permanent Supportive Housing and certain rapid rehousing resources. This team also includes contracts for navigation support to services.

# \$69.2 million

## System Support, Access, and Coordination

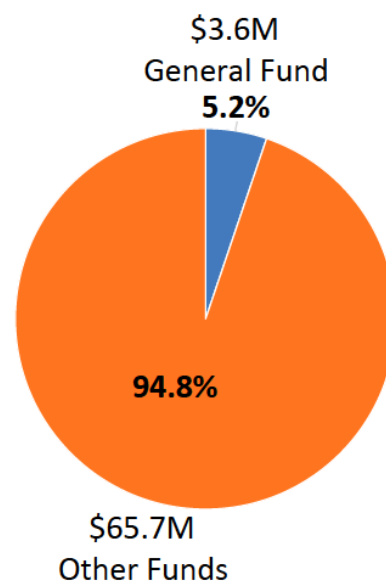
Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.



## 35.00 FTE

(full time equivalent)





### Significant Division Changes

In FY 2024 the Joint Office of Homeless Services assumed all Homeless Management Information System (HMIS) leadership responsibilities in the Continuum of Care, transferred from the Portland Housing Bureau. This transfer was delayed from the original intended transfer date in FY 2023. As part of this change, in FY 2025 the Joint Office will continue to 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 supports the Tri-County Planning Body’s regional plan.

In addition, this division will add resources and positions to support work at the intersection of health and housing, including medical case conferencing, outreach screening and utilization of Health-Related Social Needs (HRSN)/Housing benefits from the Medicaid 1115 Waiver.

In FY 2025, the teams within this division will support the implementation of the Homelessness Response System that is creating a co-governance and accountability structure to effectively set goals and reach outcomes.

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>System Support, Access, and Coordination</b>						
30003	Data, Research, & Evaluation		433,094	3,439,416	3,872,510	11.50
30004	Policy & Planning		389,254	2,924,418	3,313,672	7.50
30005A	Equity-Focused System Development & Capacity Building		155,198	1,999,434	2,154,632	5.00
30006A	Regional Coordination - Reserve and Contingency		0	23,476,045	23,476,045	0.00
30006B	Regional Coordination - Regional Strategies Implementation Fund		0	23,841,680	23,841,680	2.00
30006C	Regional Coordination - Homeless Management Information System		717,880	3,324,366	4,042,246	1.00
30006D	Regional Coordination - DCA IT HMIS Administration and Developer		0	558,694	558,694	0.00
30100	System Access, Assessment, & Navigation		<u>1,892,991</u>	<u>6,086,119</u>	<u>7,979,110</u>	<u>8.00</u>
	<b>Total System Support, Access, and Coordination</b>		<b>\$3,588,417</b>	<b>\$65,650,172</b>	<b>\$69,238,589</b>	<b>35.00</b>

**Department:** Joint Office of Homeless Services      **Program Contact:** Lori Kelley  
**Program Offer Type:** Administration      **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, as well as in depth evaluation projects and special projects such as Built for Zero and FUSE. The JOHS data and evaluation 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 reports, managing a diverse portfolio of analytic tools, 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 data management and analytics operations across the data lifecycle, and for producing useful information for internal and jurisdictional stakeholders. The JOHS data team reports and analyses communicates system and program performance, advance racial equity, promote transparency and accountability, and inform policymaking and budgetary processes.

As a multi-jurisdictional Department, the data team participates in essential reporting processes for both the City of Portland and the County. These reports include both quarterly system performance reports and annual performance reporting. 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 FY2025, the data team collaborated with DCA/IT to stand-up an HMIS Data Mart and produce a series of dashboards, as requested by the Systems Data Taskforce. This work began in FY2024. With the creation of a Data Mart, the Data Team will transition all current reporting and analytics to this new infrastructure. In FY 2026, the Data Team will use this Data Mart to design, produce, and maintain system dashboards, metrics that seek to articulate baseline data on homelessness population, and new front end systems that allow for data collection in outreach and better shelter navigation. This team will also pilot cross disciplinary (healthcare) case conferencing work, and a phase 2 outreach data collection pilot. They will also host a research repository and support shelter evaluation activities.

In addition to these products, the team develops and manages a variety of analytic tools, shared and informed by community engagement, that promotes 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.

Finally, this team includes several research and evaluation specialists responsible for ensuring outcomes-oriented projects are supported and Project Managers responsible for innovative cross-sector projects such as Built for Zero, FUSE and Medical Case Conferencing.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	*Number of end-user trainings	331	450	382	450
Outcome	Number of ad hoc data requests completed	36	40	40	40
Outcome	Number of outcomes-related presentations delivered	5	8	11	8
Outcome	Number of quarterly reports that disaggregate system performance by race and ethnicity	2	4	4	4

### Performance Measures Descriptions

\*The total number of HMIS end-users who received HMIS trainings.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$400,003	\$1,315,330	\$433,094	\$1,479,901
Contractual Services	\$0	\$107,745	\$0	\$1,312,945
Internal Services	\$0	\$74,318	\$0	\$646,570
<b>Total GF/non-GF</b>	<b>\$400,003</b>	<b>\$1,497,393</b>	<b>\$433,094</b>	<b>\$3,439,416</b>
<b>Program Total:</b>	<b>\$1,897,396</b>		<b>\$3,872,510</b>	
<b>Program FTE</b>	2.40	9.10	2.50	9.00

Program Revenues				
Intergovernmental	\$0	\$1,281,924	\$0	\$1,794,580
Beginning Working Capital	\$0	\$0	\$0	\$1,644,836
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,281,924</b>	<b>\$0</b>	<b>\$3,439,416</b>

Explanation of Revenues

This program generates \$646,570 in indirect revenues. County General fund plus \$1,329,905 of the FY 2025 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, \$1,644,836 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$464,675 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 2024: 30003 Data, Research, & Evaluation

In FY 2025, the City of Portland will not pass through its Federal Emergency Solutions Grant (ESG) award for 1.60 FTE and will be funded with one-time-only Metro Supportive Housing Services funding. This program offer contains an additional 1.00 FTE for support and administration of HMIS.

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Administration      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

It is critical that all Joint Office of Homeless Services (JOHS) services are informed by community advisory structures to ensure responsive, equity-driven programming. This offer funds JOHS staffing for extensive oversight and policy work, organizing and leading community-engaged planning through its community advisory structure. This includes the advisory bodies identified in the Metro Supportive Housing Services (SHS) Measure, Local Implementation Plan (LIP), and for the U.S. Department of Housing and Urban Development (HUD) Continuum of Care (CoC), as well as multiple advisory structures to inform policy, budgets, and programming.

**Program Description**

This offer funds JOHS staffing for extensive oversight and policy work, organizing and leading community-engaged planning through its community advisory structure. JOHS is dedicated to reducing homelessness through strategies focused on racial equity. The policy and planning work funded by this offer prioritizes structures and processes that maximize the participation of Black, Indigenous, and other People of Color, LGBTQIA2S+ people, and those with lived experience of homelessness, behavioral health challenges, severe disabling conditions, and other intersecting marginalized identities.

The JOHS supports homeless system governance and planning as the lead agency for the HUD CoC. 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 that results in over \$35 million in annual funding to the system of care. JOHS 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).

The County's Local Implementation Plan for the SHS 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 supports 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Lead annual Continuum of Care (CoC) application	1	1	1	1
Outcome	Secure CoC funding from the U.S. Department of Housing and Urban Development	\$35 million	\$30 million	\$35 million	\$35 million
Output	Lead ongoing Phase 1 Measure planning and implementation	1	1	1	N/A*
Output	Lead advisory structure for ending homelessness initiatives and Measure implementation	1	1	1	1

**Performance Measures Descriptions**

\*FY 2024 was the last year of Phase 1 Measure planning and implementation.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$239,944	\$760,046	\$90,049	\$1,614,977
Contractual Services	\$102,650	\$0	\$256,035	\$600,000
Materials & Supplies	\$0	\$2,017	\$43,170	\$3,854
Internal Services	\$0	\$64,211	\$0	\$705,587
<b>Total GF/non-GF</b>	<b>\$342,594</b>	<b>\$826,274</b>	<b>\$389,254</b>	<b>\$2,924,418</b>
<b>Program Total:</b>	<b>\$1,168,868</b>		<b>\$3,313,672</b>	
<b>Program FTE</b>	1.40	5.10	0.50	7.00

Program Revenues				
Intergovernmental	\$0	\$1,004,380	\$0	\$1,621,983
Beginning Working Capital	\$0	\$0	\$0	\$1,302,435
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,004,380</b>	<b>\$0</b>	<b>\$2,924,418</b>

Explanation of Revenues

This program generates \$705,587 in indirect revenues. County General fund plus \$567,872 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, \$1,302,435 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$1,054,111 of the FY 2025 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 2024: 30004 Policy & Planning

This program offer contains an additional 1.00 FTE to support new projects associated with Homelessness Response System and enhancements in data infrastructure. It also contains 1.00 FTE to support Continuum of Care activities. It also contains 2.00 limited duration appointments to perform community engagement with a focus on shelter siting and new programming.

**Department:** Joint Office of Homeless Services      **Program Contact:** Emily Nelson

**Program Offer Type:** Operating      **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, technical assistance and capacity-building 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.

**Program Description**

The Multnomah County Local Implementation Plan (LIP) for the Metro’s SHS 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 Black, Indigenous, and other People of Color. The LIP specifically prioritizes expanding the network of culturally specific providers and 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, JOHS partners with the Department of County Human Services to deliver Assertive Engagement trainings to providers, and develops, delivers, and coordinates access to training for 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 SHS Measure funding to support an increase in the number of culturally specific providers, and the range of culturally specific supportive housing services 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 technical assistance allocations to partner agencies in organizational infrastructure and program development for new, emerging, and culturally specific organizations that are needed for system expansion and long term system stability.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Outcome	Number of qualified, not yet contracted providers reporting increased capacity to provide services**	N/A	N/A	N/A	20
Outcome	Percentage of trainees reporting increased understanding in best practice training areas	N/A	75%	75%	75%
Outcome	Number of trainings delivered to providers and partners	N/A	24	52	74*
Outcome	Number of engaged culturally-specific, not yet JOHS contracted providers	N/A	25	30	25

**Performance Measures Descriptions**

\*The FY 2025 Offer reflects reflects the actualized capacity of 4.00 FTE.

\*\*This is a new measure in FY 2025.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$137,468	\$546,985	\$155,198	\$615,070
Contractual Services	\$1,080,000	\$0	\$0	\$1,115,640
Internal Services	\$0	\$0	\$0	\$268,724
<b>Total GF/non-GF</b>	<b>\$1,217,468</b>	<b>\$546,985</b>	<b>\$155,198</b>	<b>\$1,999,434</b>
<b>Program Total:</b>	<b>\$1,764,453</b>		<b>\$2,154,632</b>	
<b>Program FTE</b>	1.00	4.00	1.00	4.00

Program Revenues				
Intergovernmental	\$0	\$546,985	\$0	\$883,794
Beginning Working Capital	\$0	\$0	\$0	\$1,115,640
<b>Total Revenue</b>	<b>\$0</b>	<b>\$546,985</b>	<b>\$0</b>	<b>\$1,999,434</b>

Explanation of Revenues

This program generates \$268,724 in indirect revenues. County General fund plus \$1,115,640 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$883,794 of the FY 2025 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 2024: 30005A Equity-Focused System Development & Capacity Building

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Revenue/Fund Level/Tech      **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" (SHS 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 SHS Measure funding requires 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 ensure ongoing fiscal stability for the Supportive Housing Services (SHS) program, both the Measure and the intergovernmental agreement (IGA) that governs SHS Measure funding require each county to contribute to a stabilization reserve. The aim is to maintain the growth of these reserved funds, and the Joint Office of Homeless Services will prioritize carrying over any available SHS funds from one fiscal year to the next to ensure that the reserve is consistently fully funded.

The Stabilization Reserve serves as a protective measure against financial instability within the SHS program, shielding programs and their objectives from significant fluctuations in revenue. In particular, this protects the historically overrepresented communities that the measure was designed to serve, from being more severely and negatively impacted. The target reserve level is set at 10% of the budgeted program funds for a given fiscal year. Each county's Stabilization Reserve will be fully funded within the first three years of the Term.

In addition, the Contingency account will provide resources for emergency situations or unplanned expenditures within the SHS program that, if left unaddressed, could have a negative impact on service delivery. The contingency account will be equivalent to 5% of the budgeted program funds for a given fiscal year.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Outcome	Percent of stabilization reserve fund met	100%	100%	100%	100%
Outcome	Percent of contingency fund met	100%	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
<b>Program Expenses</b>	<b>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Unappropriated & Contingency	\$0	\$14,428,539	\$0	\$23,476,045
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$14,428,539</b>	<b>\$0</b>	<b>\$23,476,045</b>
<b>Program Total:</b>	<b>\$14,428,539</b>		<b>\$23,476,045</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Beginning Working Capital	\$0	\$14,428,539	\$0	\$23,476,045
<b>Total Revenue</b>	<b>\$0</b>	<b>\$14,428,539</b>	<b>\$0</b>	<b>\$23,476,045</b>

## Explanation of Revenues

\$23,476,045 carryover from 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 2024: 30006A Regional Coordination - Reserve and Contingency

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

**Program Offer Type:** Operating      **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 IGA that governs SHS 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 SHS 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, and is outlined in the Tri-County Work Plan. The TCPB is developing the Tri-County Work Plan, and the priority for RSIF funds will be programmed by the TCPB. In accordance with the IGA, the JOHS continues to make regionally-focused RSIF investments in the following programs after the TCPB has given direction.

The TCPB has set six goals in the following categories:

- (1) Coordinated Entry
- (2) Regional Landlord Recruitment
- (3) Healthcare System Alignment
- (4) Training
- (5) Technical Assistance
- (6) Employee Recruitment and Retention

This program offer supports the Joint Office of Homeless Services's (JOHS) short and long-term strategies to address decades of stagnant wages and underfunding through investments in the organizational health and capacity of non-profit housing and homelessness service providers. This program offer uses RSIF funding to offer organizational health grants to all JOHS-contracted providers. The grants will be allocated based on a formula developed by the JOHS, and administered through a collaboration between the JOHS and a philanthropic partner.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Work w/Tri-County Planning Body to identify investment priorities for Regional Strategies Implementation Fund	N/A	1	2	2
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	2024	2024	2025	2025
Personnel	\$0	\$0	\$0	\$302,166
Contractual Services	\$0	\$5,585,218	\$0	\$14,062,945
Internal Services	\$0	\$0	\$0	\$132,017
Unappropriated & Contingency	\$0	\$0	\$0	\$9,344,552
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,585,218</b>	<b>\$0</b>	<b>\$23,841,680</b>
<b>Program Total:</b>	<b>\$5,585,218</b>		<b>\$23,841,680</b>	
<b>Program FTE</b>	0.00	0.00	0.00	2.00

Program Revenues				
Intergovernmental	\$0	\$4,809,513	\$0	\$7,166,488
Beginning Working Capital	\$0	\$0	\$0	\$16,675,192
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,809,513</b>	<b>\$0</b>	<b>\$23,841,680</b>

## Explanation of Revenues

This program generates \$132,017 in indirect revenues.

\$16,675,192 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$7,166,488 of the FY 2025 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 2024: 30006B Regional Coordination - Regional Strategies Implementation Fund

This program offer contains an additional 1.00 FTE to support the JOHS Datamart project. It also contains an additional 2.00 FTE to support projects related to health and housing cross-department and cross-jurisdictional work.

**Department:** Joint Office of Homeless Services      **Program Contact:** Lori Kelley  
**Program Offer Type:** Operating      **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 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 SHS 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 offer combines a federal HMIS HUD grant supports with a JOHS 25% match. Federal grant funds will cover costs associated with HMIS, including licensing, professional services, and conference attendance.

Additional funding associated with this program also supports the administration of HMIS and the development and maintenance of an infrastructure supported by DCA/IT which involves the secure transmission of data 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. This program offer also supports the development of technology-based modules that will support increased program coordination across systems.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Create a repository of data (Data Mart) to retrieve client-facing data for the Continuum of Care (OR-501)	N/A	1	1	1
Outcome	Number of additional HMIS end-user training tools developed.	N/A	1	1	N/A

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$156,271	\$0	\$592,792
Contractual Services	\$0	\$0	\$0	\$75,000
Materials & Supplies	\$0	\$402,667	\$57,560	\$297,417
Internal Services	\$0	\$383,920	\$660,320	\$359,157
Capital Outlay	\$0	\$0	\$0	\$0
Cash Transfers	\$0	\$0	\$0	\$2,000,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$942,858</b>	<b>\$717,880</b>	<b>\$3,324,366</b>
<b>Program Total:</b>	<b>\$942,858</b>		<b>\$4,042,246</b>	
<b>Program FTE</b>	0.00	1.00	0.00	1.00

Program Revenues				
Intergovernmental	\$0	\$942,858	\$0	\$529,010
Beginning Working Capital	\$0	\$0	\$0	\$2,795,356
<b>Total Revenue</b>	<b>\$0</b>	<b>\$942,858</b>	<b>\$0</b>	<b>\$3,324,366</b>

Explanation of Revenues

This program generates \$359,157 in indirect revenues. County General fund plus \$245,666 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 Metro Supportive Services, \$2,795,356 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$283,344 of the FY 2025 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 2024: 30006C Regional Coordination - Homeless Management Information System

This program offer contains an additional 2.00 limited duration appointments and 1.00 temporary position for support and administration of HMIS. It also contains an additional 1.00 FTE to support the JOHS Datamart project.

**Department:** Joint Office of Homeless Services      **Program Contact:** Lori Kelley

**Program Offer Type:** Internal Service      **Program Offer Stage:** Adopted

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

**Executive Summary**

This program offer supports two positions in the Department of County Assets to support the Homeless Management Information System (HMIS). These positions will sit in the Department of County Assets and are supported by the Metro Supportive Housing Services (SHS) Measure and the US Department of Housing and Urban Development (HUD). These positions include a Senior Business System Analyst who will serve as the Primary HMIS System Administrator, and the Sr. Development Analyst who will support a large data mart project and the on-going needs of the Joint Office of Homeless Services (JOHS) data and reporting team.

**Program Description**

The Department of County Assets Information Technology (IT) Division provides overall support for the HMIS software, infrastructure, and integrated technologies for the Tri-Counties (Multnomah, Clackamas, and Washington). Through contractual agreement between the three Counties, Multnomah County IT will staff the Primary System Administrator role which will ensure overall HMIS system integrity as well as lead projects, changes, system evaluation, security, and governance.

The Senior Business Intelligence Development Analyst position would support the long term need to enhance the reporting and analytics infrastructure of the JOHS, which includes extracting data from the HMIS, building supporting databases, and enabling the integration of data with other systems of care such as Behavioral and physical health. The JOHS is also implementing a data mart infrastructure for the HMIS that would allow greater analytics and reporting capabilities and this position would support this initiative by providing the technical coding, development, design and support to the cloud infrastructure. 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Outcome	Track the number of new reports, dashboards, or analytics features successfully developed and implement	N/A	N/A	N/A	1 to 5
Quality	Develop HMIS change control processes, procedures and standards across the jurisdictions.**	N/A	N/A	N/A	100%

**Performance Measures Descriptions**

\*This measures progress in expanding reporting capabilities. \*\*This measure ensures changes within the system are coordinated and implemented effectively.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$0	\$0	\$458,528
Internal Services	\$0	\$0	\$0	\$100,166
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$558,694</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$558,694</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Beginning Working Capital	\$0	\$0	\$0	\$558,694
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$558,694</b>

Explanation of Revenues

This program generates \$100,166 in indirect revenues.  
 \$558,694 carryover from 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:

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 30210A, 30210B  
**Program Characteristics:**

**Executive Summary**

This program offer funds support for system access, needs 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. This offer funds the Coordinated Access system as well as information and referral services and 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. Supports include training, information and referral services, coordinated access, resource navigation, landlord recruitment, and other similar services.

**Program Description**

This program offer funds support for system access, needs assessment, and navigation of support services needed to make critical homeless services equitably accessible to the communities experiencing homelessness in Multnomah County. Ensuring system coordination and access is one of the core strategies of the Joint Office of Homeless Services (JOHS) to connect people to shelter, long-term housing, and other critical services. Service categories funded in this offer include outreach, coordinated access, mobile navigation services, and partnership development.

This program offer funds information and referral resources, and 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.

The offer also continues investments in culturally-specific mobile supportive housing assessment services to connect people experiencing chronic homelessness with supportive housing opportunities. Additionally, it provides 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 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of shelter and housing service requests received and assisted with referral information	128,912	70,000	90,000	90,000
Outcome	Number of individuals moving from Adult Coordinated Access to permanent housing	365	306	447	350
Outcome	Number of unsheltered people served with system navigation	3,243	1,200	3,000	2,500
Outcome	BIPOC assessed 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	2024	2024	2025	2025
Personnel	\$166,083	\$667,085	\$215,036	\$989,622
Contractual Services	\$1,097,771	\$4,960,571	\$1,663,565	\$4,648,535
Materials & Supplies	\$0	\$8,008	\$14,390	\$15,595
Internal Services	\$0	\$47,960	\$0	\$432,367
<b>Total GF/non-GF</b>	<b>\$1,263,854</b>	<b>\$5,683,624</b>	<b>\$1,892,991</b>	<b>\$6,086,119</b>
<b>Program Total:</b>	<b>\$6,947,478</b>		<b>\$7,979,110</b>	
<b>Program FTE</b>	1.20	4.80	1.40	6.60

Program Revenues				
Intergovernmental	\$0	\$4,348,809	\$0	\$5,263,139
Beginning Working Capital	\$0	\$1,194,440	\$0	\$677,975
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,543,249</b>	<b>\$0</b>	<b>\$5,941,114</b>

Explanation of Revenues

This program generates \$432,367 in indirect revenues. County General fund plus \$145,005 Video Lottery Fund allocated to Multnomah County to be used for the purpose of furthering economic development in accordance with ORS 461.512, \$592,971 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 Metro Supportive Services and County General Fund, \$677,975 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, \$2,959,818 of the FY 2025 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$1,710,350 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 2024: 30100A System Access, Assessment, & Navigation

This program contains an additional 3.00 FTE. These positions support the growing body of work around supportive housing and coordinated access. This includes system includes system needs, medicaid waiver, cross-departmental coordination, etc.

### Safety off and on the Streets

The Safety off and on the Streets division works to provide short-term shelter options for those experiencing homelessness, filling the gap between unsheltered homelessness and permanent housing. This encompasses various types of shelters, such as year-round 24/7 facilities, temporary winter and seasonal overnight shelters, severe weather shelters, alternative shelters including “village-style” shelters, and daytime resource centers.

Emergency shelters play a vital role in safeguarding the basic health and safety of individuals who are experiencing homelessness, with a particular focus on those with disabilities, veterans, women, survivors of domestic and sexual violence, youth, and older adults.

Alternative shelters offer a secure place to sleep and access to resources for individuals who are not currently served by traditional emergency shelters. Daytime resource centers provide essential safety off the streets, along with hygiene services, temporary storage, and access to a range of basic services during daytime hours for individuals who do not use 24/7 emergency shelters.

Outreach and engagement efforts are coordinated, person-centered, and directly connect people experiencing homelessness with housing placement and other support services. This includes addressing basic needs, connecting individuals and families to housing placement and retention services, providing mental health outreach for those with severe and persistent mental illness, offering substance use screening and assessment, delivering culturally-specific outreach services, and providing assistance with housing readiness.

# \$121.2 million

## Safety off and on the Streets

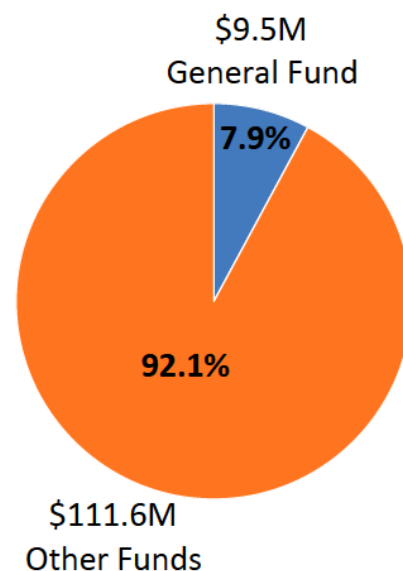
Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.



## 22.50 FTE

(full time equivalent)



### Significant Division Changes

In FY 2025, the budget includes funding for an additional 250 units of shelter as part of the FY 2025 - FY 2026 Community Shelter Strategy. This includes:

- 90 additional beds of shelter in the adult system, including culturally specific shelter for LGBTQIA2s+ adults (Program Offer 30200).
- 45 additional units of shelter in the domestic violence system (Program Offer 30204).
- A 25-bed culturally specific shelter for immigrant youth (Program Offer 30205).
- 90 additional units of shelter in the family shelter system. (Program Offer 30203).
- \$5.6 million of additional rapid rehousing funds to support placement out of shelter into stable housing (Program Offer 30302B).

These 250 additional shelter beds will bring the total number of shelter beds in Multnomah County to 3,507 (3,028 funded by JOHS), which will serve an estimated 12,675 across our system.

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Safety off and on the Streets</b>						
30200	Safety off the Streets - Adult Shelter		2,713,566	47,092,775	49,806,341	5.50
30201	Safety off the Streets - Women's Shelter		1,442,942	1,387,275	2,830,217	0.00
30202	Safety off the Streets - Alternative Shelter for Adults		0	7,520,444	7,520,444	3.00
30203	Safety off the Streets - Family Shelter		1,865,918	6,790,676	8,656,594	1.00
30204	Safety off the Streets - Domestic Violence Shelter		1,313,475	5,446,494	6,759,969	0.50
30205	Safety off the Streets - Youth Shelter		1,994,505	2,289,545	4,284,050	0.50
30206	Safety off the Streets - Winter Shelter & Severe Weather		0	2,396,440	2,396,440	0.00
30207	Safety off the Streets - Bridge Housing		0	2,908,005	2,908,005	0.00
30209	Safety off the Streets - Motel Shelter Operations		0	16,489,630	16,489,630	0.00
30210A	Safety on the Streets		203,478	2,070,163	2,273,641	3.00
30210B	Safety on the Streets - Navigation & Service Coordination		0	1,826,743	1,826,743	2.00
30211	Safety on the Streets - Supply Center		0	1,758,895	1,758,895	4.00
30905	ARP - COVID-19 Emergency Response - Outdoor Physical Distancing Shelters & Safe Rest Villages		0	<u>13,653,000</u>	<u>13,653,000</u>	<u>3.00</u>
<b>Total Safety off and on the Streets</b>			<b>\$9,533,884</b>	<b>\$111,630,085</b>	<b>\$121,163,969</b>	<b>22.50</b>

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Joint Office of Homeless Services (JOHS) funds emergency shelter for the four systems of care (adults, youth, families, and survivors of domestic violence). This program offer funds a portion of emergency shelter for adults. 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 funds the operations 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 experiencing homelessness, particularly older adults and those with disabling conditions. Shelters are critical locations for people to be safe while learning about and accessing the services they need to find permanent housing 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, are required to provide trauma-informed, racially equitable, and culturally responsive or specific programming that emphasizes meeting participants' immediate needs. 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 cover shelter operating expenses. This shelter type includes congregant shelter and non-congregant motel shelter sites.
- **Day Centers:** Day centers 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 exit homelessness. Day centers 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 for 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 help cover shelter operating expenses including rent, staffing, materials/supplies, and on-site services.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of year-round emergency shelter units*	793	1,091	1,295	1,385
Outcome	Number of people served in year-round emergency shelter units	2,904	2,320	3,270	3,500
Outcome	BIPOC served in emergency shelter at rate as high or higher than percent of HUD homeless population**	Yes	Yes	No	Yes

### Performance Measures Descriptions

\*The FY 2024 Estimate includes additional capacity through the Metro Supportive Housing Services unanticipated revenue budget Supplemental. The FY 2025 Offer reflects additional capacity through funding the Community Shelter Strategy. \*\*For FY 2024 Estimate, BIPOC guests represented 33.6% of shelter guests compared to 35.8% in comp population.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
<b>Program Expenses</b>	<b>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Personnel	\$76,132	\$607,541	\$81,183	\$814,196
Contractual Services	\$325,158	\$25,966,358	\$820,280	\$40,852,677
Materials & Supplies	\$0	\$0	\$280,990	\$3,555,066
Internal Services	\$374,004	\$2,147,811	\$1,531,113	\$1,870,836
<b>Total GF/non-GF</b>	<b>\$775,294</b>	<b>\$28,721,710</b>	<b>\$2,713,566</b>	<b>\$47,092,775</b>
<b>Program Total:</b>	<b>\$29,497,004</b>		<b>\$49,806,341</b>	
<b>Program FTE</b>	0.50	4.00	0.50	5.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$30,430,658	\$0	\$25,708,632
Beginning Working Capital	\$0	\$0	\$0	\$21,384,143
<b>Total Revenue</b>	<b>\$0</b>	<b>\$30,430,658</b>	<b>\$0</b>	<b>\$47,092,775</b>

Explanation of Revenues

This program generates \$355,724 in indirect revenues. County General fund plus \$16,714,343 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$13,002,317 of the FY 2025 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, \$791,400 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, \$11,870,070 City of Portland General Fund allocation through Multnomah County’s IGA with the City of Portland, and \$4,669,800 carryover from the FY 2024 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 2024: 30200 Safety off the Streets - Adult Shelter

In FY 2025, this program offer funds an additional 90 beds of Adult Shelter as part of the FY 2025 - FY 2026 Community Shelter Strategy. This program offer contains an additional 1.00 FTE that will provide supervisory support to increase effectiveness of the contracting process and coordinating outcomes and outputs from contractors. In FY 2025, the City of Portland will not pass through its Federal Emergency Solutions Grant (ESG) award for Laurelwood and will be funded with one-time-only Metro Supportive Housing Services funding.

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Joint Office of Homeless Services (JOHS) funds emergency shelter for the four systems of care (adults, youth, families, and survivors of domestic violence). JOHS has prioritized the equitable expansion of year-round shelter capacity, particularly for people who are more vulnerable on the street, including adult women. 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. JOHS holds achieving racial equity as a core goal, with eliminating disparate rates of homelessness on the basis of race and ethnicity as a main focus of programming. 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, one of only 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of year-round emergency shelter units	115	150	150	150
Outcome	Number of people served in year-round emergency shelter beds*	716	830	650	830
Outcome	BIPOC served in emergency shelter at rate as high or higher than percent of HUD homeless population	No	Yes	Yes	Yes

### Performance Measures Descriptions

\*The FY 2024 Estimate is lower due to a number of shelters experiencing intermittent COVID-19 outbreaks, decreasing available capacity.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$1,156,613	\$1,094,387	\$1,256,760	\$1,387,275
Internal Services	\$41,503	\$0	\$186,182	\$0
<b>Total GF/non-GF</b>	<b>\$1,198,116</b>	<b>\$1,094,387</b>	<b>\$1,442,942</b>	<b>\$1,387,275</b>
<b>Program Total:</b>	<b>\$2,292,503</b>		<b>\$2,830,217</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,094,387	\$0	\$1,316,310
Beginning Working Capital	\$0	\$0	\$0	\$70,965
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,094,387</b>	<b>\$0</b>	<b>\$1,387,275</b>

Explanation of Revenues

County General fund plus \$70,965 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$1,316,310 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 2024: 30201 Safety off the Streets - Women's Shelter

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Joint Office of Homeless Services (JOHS) funds emergency shelter for the four systems of care (adults, youth, families, and survivors of domestic violence), and has been expanding shelter capacity. The expansion of emergency shelter capacity by the Joint Office of Homeless Services (JOHS) aims to meet the diverse needs of people experiencing homelessness. As part of this expansion, a range of shelter options, including village-style shelters, are funded through the program. 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**

Alternative shelters are a small but growing component of the current emergency shelter system. Alternative shelters provide a safe environment for individuals who may not be able to access or thrive in traditional shelter settings. Regardless of their size and configuration, all shelters must prioritize trauma-informed, racially equitable, and culturally responsive programming with reduced barriers, focusing on meeting the immediate health and safety needs of participants.

This program funds two currently 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, and 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 also allocates funding for an additional four sites slated to open soon, 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 also funds staffing in the JOHS to work with community-based organizations seeking to offer alternative shelter options. To support the implementation of alternative shelter options, the Joint Office of Homeless Services (JOHS) works closely with community-based organizations that are interested in operating alternative shelters. These organizations often have limited experience in service provision and public contracting, so they require additional technical assistance and ongoing support to ensure their success. The JOHS's staffing capacity enables them to provide this enhanced level of support to shelter operators by assisting with planning, site and program development, contracting, and ongoing contract management.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of emergency alternative shelter units	205	205	205	205
Outcome	Percentage of people exiting alternative shelters to transitional and permanent housing	60%	35%	60%	50%
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 operational emergency shelter beds in micro villages**	N/A	30	12	30

**Performance Measures Descriptions**

\*\*FY 2024 Estimate reflects slower than anticipated ramp-up time.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$443,876	\$0	\$469,858
Contractual Services	\$0	\$4,503,263	\$0	\$6,577,045
Internal Services	\$89,800	\$56,460	\$0	\$473,541
<b>Total GF/non-GF</b>	<b>\$89,800</b>	<b>\$5,003,599</b>	<b>\$0</b>	<b>\$7,520,444</b>
<b>Program Total:</b>	<b>\$5,093,399</b>		<b>\$7,520,444</b>	
<b>Program FTE</b>	0.00	3.00	0.00	3.00

Program Revenues				
Intergovernmental	\$0	\$4,883,599	\$0	\$4,648,832
Beginning Working Capital	\$0	\$0	\$0	\$2,871,612
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,883,599</b>	<b>\$0</b>	<b>\$7,520,444</b>

Explanation of Revenues

This program generates \$205,282 in indirect revenues.  
 \$2,871,612 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$2,256,197 of the FY 2025 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$2,392,635 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 2024: 30202 Safety off the Streets - Alternative Shelter for Adults

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Joint Office of Homeless Services (JOHS) funds emergency shelter for the four systems of care (adults, youth, families, and survivors of domestic violence). This program offer funds shelter capacity for families with minor children. Shelter plays a vital role in offering basic safety and stability to families with children experiencing homelessness. Family shelters are all community-based, year-round, open 24/7, and offer individual rooms to families. As with all shelters, by offering both basic safety and the necessary resources, the family shelters aim to support families in their journey towards finding stable and permanent housing.

### Program Description

This program maintains resources for four family shelters in East Portland. This program offer also funds an additional 90 shelter units as part of the FY 2025-FY2026 Community Shelter Strategy. Families in need of shelter are screened and referred through the Coordinated Access Shelter Intake Line. Once families are admitted to a shelter, families receive a range of on-site services to support their transition into permanent housing. These services include housing placement assistance through the Homeless Family System of Care (HFSC) and access to on-site diversion resources. Families from communities of color are served at a higher rate compared to their representation among homeless families.

All shelters, regardless of size and configuration, are required to provide trauma-informed, racially equitable, low barrier, and culturally responsive programming. The emphasis is on meeting the immediate needs of participants for basic health and safety. The family shelter system leverages resources from the Federal, State, and local levels, as well as partnerships with faith-based organizations and nonprofits. Volunteerism also plays a significant role in the shelters, expanding activities for children and increasing culturally specific services and neighborhood involvement.

These shelters represent a significant improvement in the year-round shelter capacity for families with children in the community. One critical feature is that each family has its own room. The shelters are strategically located in areas where there is a high demand for shelter and where families have existing support networks.

For school-aged children staying in the shelters, a stable environment is provided, and transportation is arranged to ensure they can attend their local school. Additionally, the program offers healthy and engaging activities both within the shelters and off-site during non-school hours, evenings, spring break, and summer break. This ensures that children have opportunities for growth and enrichment beyond their academic responsibilities.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of year-round emergency shelter units*,**	329	108	128	218
Outcome	Number of unduplicated individuals served**	1,005	660	1,040	1,320
Outcome	Number of youth engaged in activities annually	413	300	468	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

\*This measure has changed. Revised shelter beds and replaced with "units". Family shelter is measured in rooms for families and not individual beds since family size's fluctuate and thus easier to measure as a unit.

\*\*The FY 2024 Estimate reflects additional capacity added through the Metro Supportive Housing Services budget Supplemental. The FY 2025 Offer, includes additional capacity that will be added through the Community Shelter Strategy.

**Revenue/Expense Detail**

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$164,042	\$0	\$177,978	\$164,396
Contractual Services	\$1,023,636	\$2,220,200	\$1,035,860	\$6,554,455
Materials & Supplies	\$0	\$0	\$14,390	\$0
Internal Services	\$562,808	\$0	\$637,690	\$71,825
<b>Total GF/non-GF</b>	<b>\$1,750,486</b>	<b>\$2,220,200</b>	<b>\$1,865,918</b>	<b>\$6,790,676</b>
<b>Program Total:</b>	<b>\$3,970,686</b>		<b>\$8,656,594</b>	
<b>Program FTE</b>	1.00	0.00	1.00	0.00

Program Revenues				
Intergovernmental	\$0	\$2,220,200	\$0	\$6,122,175
Beginning Working Capital	\$122,880	\$0	\$0	\$668,501
<b>Total Revenue</b>	<b>\$122,880</b>	<b>\$2,220,200</b>	<b>\$0</b>	<b>\$6,790,676</b>

**Explanation of Revenues**

This program generates \$71,825 in indirect revenues. County General fund plus \$668,501 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$5,036,690 of the FY 2025 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, \$129,415 Emergency Solutions Grant (ESG) 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. The ESG required match is 100% match per § 576.201, which is met with County General Fund, and \$956,070 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.

**Significant Program Changes**

**Last Year this program was:** FY 2024: 30203 Safety off the Streets - Family Shelter

In FY 2025, this program offer includes an additional 90 shelter units as part of the FY 2025 - FY 2026 Community Shelter Strategy.

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

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

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

### Executive Summary

The Joint Office of Homeless Services (JOHS) funds emergency shelter for the four systems of care (adults, youth, families, and survivors of domestic violence). This program offer funds four shelters for domestic violence survivors in two models: facility-based emergency shelter and master-leased units. 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 violence. These services are vital for protecting the health and safety of survivors. The DV confidential emergency shelters provide year-round access to beds.

### Program Description

This program maintains funding for operation cost, staffing, limited client assistance, and wrap-around support services at four DV emergency shelters. This offer also adds funding for an additional 45 shelter units as part of the FY 2025 - FY 2026 Community Shelter Strategy. These services include intensive DV advocacy and support, safety planning, provision of basic needs, co-advocacy within the DV service provider network, and referrals to community-based services and housing programs. Domestic Violence (DV) is a significant contributing factor to homelessness and housing instability. Nearly 4 in 10 women who experience domestic violence will become homeless as a result. Additionally, leaving an abusive relationship is often the most dangerous time for survivors, who frequently have to navigate 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.

The program supports four shelters using two models: facility-based emergency shelters and master-leased units. Three facility-based shelters offer 24-hour security and staff support seven days a week. The fourth shelter utilizes scattered site master-leased apartments to provide safety and crisis intervention services for survivors. These scattered-site units allow multi-generational and larger families impacted by DV to access services. All four shelters offer a 90-day length of stay with the possibility of extension.

To ensure that survivors in greater danger are prioritized for shelter beds, all shelters use a coordinated triage system and a locally-developed screening tool. This helps articulate survivors' needs and match them with available shelter space. Regardless of size and configuration, all shelters must provide trauma-informed, racially equitable, and culturally responsive programming with reduced barriers that prioritize meeting participants' immediate health and safety needs. Additionally, the program offers funds emergency vouchers to assist survivors in staying safe when shelter beds are full. These vouchers also act as a bridge to housing for homeless survivors in the process of finding permanent housing. Furthermore, they provide respite for survivors and children who cannot safely stay in shelters. The JOHS prioritizes equitable access to confidential emergency shelter services for vulnerable populations. The JOHS also holds achieving racial equity as a core goal, with a focus on eliminating disparate rates of homelessness, on the basis of race and ethnicity.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of year-round confidential emergency shelter beds*	103	115	140	185
Outcome	Number of individuals receiving emergency shelter services	201	250	200	250
Output	Number of individuals served with domestic violence emergency vouchers**	397	250	350	350
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

\*FY 2025 Offer reflects increased capacity from the Community Shelter Strategy.

\*\*FY 2025 Offer reflects consistent outcomes achieved over the past three years.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$77,801	\$0	\$83,241
Contractual Services	\$1,321,649	\$510,490	\$1,313,475	\$5,326,495
Materials & Supplies	\$0	\$0	\$0	\$390
Internal Services	\$0	\$19,792	\$0	\$36,368
<b>Total GF/non-GF</b>	<b>\$1,321,649</b>	<b>\$608,083</b>	<b>\$1,313,475</b>	<b>\$5,446,494</b>
<b>Program Total:</b>	<b>\$1,929,732</b>		<b>\$6,759,969</b>	
<b>Program FTE</b>	0.00	0.50	0.00	0.50

Program Revenues				
Intergovernmental	\$0	\$608,083	\$0	\$2,122,274
Beginning Working Capital	\$50,130	\$0	\$0	\$3,324,220
<b>Total Revenue</b>	<b>\$50,130</b>	<b>\$608,083</b>	<b>\$0</b>	<b>\$5,446,494</b>

Explanation of Revenues

This program generates \$36,368 in indirect revenues. County General fund plus \$119,999 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 Metro Supportive Services, \$3,324,220 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, \$1,491,785 of the FY 2025 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$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.

Significant Program Changes

Last Year this program was: FY 2024: 30204 Safety off the Streets - Domestic Violence Shelter

In FY 2025, this program offer includes an additional 45 shelter units as part of the FY 2025 - FY 2026 Community Shelter Strategy.

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

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

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

### Executive Summary

The Joint Office of Homeless Services (JOHS) maintains emergency shelter for the four systems of care (adults, youth, families, and survivors of domestic violence). This program offer funds the Youth system's Access Center, supporting the Access Center's efforts in connecting youth with a comprehensive range of services and supports through shelter and day programs, addressing the unique needs of the youth population and ensuring access to the necessary support. The Access Center provides immediate and low-barrier access to crisis and short-term shelter options and day programs. The center provides 24-hour coordinated access to screening, crisis intervention, and basic needs services. In FY 2025, this program offer includes an additional 25 units of culturally specific shelter as part of the Community Shelter Strategy.

### Program Description

The Homeless Youth Continuum (HYC) is a collaborative and coordinated system consisting of four nonprofit agencies, including a culturally specific agency. Its goal is to provide a comprehensive range of services to youth up to age 25 who are experiencing homelessness. These services include screening, crisis intervention, safety services, shelter, engagement, housing, education, employment, pregnancy and parenting support, mental health and addictions support, and health services.

Homeless youth are especially vulnerable as they navigate the challenges of living on the streets. Many of them have had previous involvement with the Department of Human Services (DHS) or the Juvenile Justice system, and a significant number have also experienced complex trauma. Additionally, around 40% of homeless youth identify as LGBTQIA2S+.

To ensure the well-being of these youth, it is vital to have a 24-hour safety net in place. The HYC provides a centralized Access Center where screening is conducted by mobile and stationary staff. These staff members determine eligibility and refer the youth to appropriate HYC programs or other systems of care. Emergency shelter is available at a downtown facility that can accommodate up to 60 individuals, with capacity increasing to 70 during the winter months. Youth residing in emergency shelters have access to meals, hygiene resources, information/referral services, and case management.

Day Programs are offered at two locations and provide meals, hygiene resources, computer access, transportation assistance, service needs assessment, and opportunities for further engagement with the system.

The HYC service model is based on assertive engagement and follows the principles of Positive Youth Development. It ensures that services are client-directed, strength-based, nonjudgmental, and provide relational continuity. Additionally, all emergency shelters, regardless of size and configuration, must offer trauma-informed, racially equitable, and culturally responsive programming with reduced barriers. The focus is on meeting participants' immediate needs for basic health and safety. Services are integrated with public safety and other service systems to ensure joint planning and coordination in addressing the unique needs of homeless youth.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of youth screened via the Access Center	541	550	560	585
Outcome	Number of youth served in crisis and short-term shelter	340	430	590	505
Output	Number of emergency shelter units	60	60	60	85
Outcome	BIPOC served in emergency shelter at rate as high or higher than percent of HUD homeless population	No*	Yes	No*	Yes

### Performance Measures Descriptions

The FY 2024 Estimate reflects additional capacity added through the Metro Supportive Housing Services budget Supplemental. The FY 2025 Offer, includes additional capacity that will be added through the Community Shelter Strategy.

\*Shelter options for youth experiencing homelessness over age 18 are only available in downtown Portland. BIPOC youth do not feel safe coming downtown in order to access shelter services. The HYC overall serves over 50% as Black, Indigenous, People of Color (BIPOC) youth as many of our non-shelter services are mobile to meet youth where they are. F

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$88,530	\$0	\$92,247
Contractual Services	\$2,232,598	\$0	\$1,994,505	\$2,156,605
Materials & Supplies	\$0	\$0	\$0	\$390
Internal Services	\$0	\$22,522	\$0	\$40,303
<b>Total GF/non-GF</b>	<b>\$2,232,598</b>	<b>\$111,052</b>	<b>\$1,994,505</b>	<b>\$2,289,545</b>
<b>Program Total:</b>	<b>\$2,343,650</b>		<b>\$4,284,050</b>	
<b>Program FTE</b>	0.00	0.50	0.00	0.50

Program Revenues				
Intergovernmental	\$0	\$111,052	\$0	\$1,771,175
Beginning Working Capital	\$301,810	\$0	\$0	\$518,370
<b>Total Revenue</b>	<b>\$301,810</b>	<b>\$111,052</b>	<b>\$0</b>	<b>\$2,289,545</b>

Explanation of Revenues

This program generates \$40,303 in indirect revenues. County General fund plus \$132,940 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 Metro Supportive Services, \$518,370 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$1,638,235 of the FY 2025 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 2024: 30205 Safety off the Streets - Youth Shelter

In FY 2025, this program offer includes an additional 25 units of culturally specific shelter as part of the FY 2025 - FY 2026 Community Shelter Strategy.

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

People experiencing unsheltered homelessness face particular weather-related risks, and even greater dangers during periods of severe weather - including during severe cold and heat, and other emergency events. During severe weather, no one is turned away from shelter. 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 provides funding for both temporary winter shelter and severe weather shelter capacity. The primary goal of these shelters is to provide temporary safety for individuals experiencing unsheltered homelessness, offering warm and dry spaces along with access to basic hygiene amenities. While additional services are available in temporary winter shelters, they do not offer the comprehensive range of support and housing services provided by year-round shelters.

1. Temporary/Winter Shelter: This program creates additional winter shelter capacity from November to April to address the heightened risks faced by individuals with disabilities, older adults, and those in poor health during cold winter conditions. This includes the provision of motel vouchers or access to motel rooms in some circumstances.
2. Severe Weather Shelter: In the event of severe weather that poses a significant risk to individuals sleeping unsheltered, additional shelter capacity is established for the duration of the severe weather event. The program provides base funding for severe weather shelter sites operated by contracted nonprofit agencies across the county. If the nonprofit-provided capacity is insufficient, the program also budgets for opening additional severe weather capacity in partnership with County and City Emergency Management. During severe weather, no one is turned away from shelter.
3. Emergency Assistance: The program funds various services aimed at ensuring basic safety, including staffing, flexible funding for material needs, transportation, outreach coordination, and extended information and referral services during the winter months.
4. Expanded Outreach: Additional funding is allocated for street outreach during severe weather to assist adults, youth, Veterans, and families in accessing resources for safety off the streets.

Overall, this program aims to provide temporary shelter and essential services to mitigate the risks faced by individuals experiencing unsheltered homelessness during challenging weather conditions.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of adult temporary winter shelter beds*	170	400	145	200
Outcome	Percentage of those who seek shelter during a declared severe weather event that receive it	100%	100%	100%	100%
Outcome	Peak number of people accessing severe weather shelter per night**	1,000	1,000	1,269	1,000
Outcome	Number of families that receive the safety of shelter	100	100	100	100

### Performance Measures Descriptions

\*The FY 2024 Estimate and FY 2025 Offer is lower due to many former winter beds converted to year-round and are now in program offer 30200. \*\*This measure has been changed from "BIPOC served in emergency shelter at rate as high or higher than percent of HUD homeless population" because demographic information is not collected at severe weather shelter.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$617,690	\$1,527,988	\$0	\$2,396,440
<b>Total GF/non-GF</b>	<b>\$617,690</b>	<b>\$1,527,988</b>	<b>\$0</b>	<b>\$2,396,440</b>
<b>Program Total:</b>	<b>\$2,145,678</b>		<b>\$2,396,440</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$3,061,129	\$0	\$258,575
Beginning Working Capital	\$0	\$0	\$0	\$2,137,865
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,061,129</b>	<b>\$0</b>	<b>\$2,396,440</b>

Explanation of Revenues

\$807,665 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, \$258,575 from the FY 2025 City of Portland General Fund allocation through Multnomah County’s IGA with the City of Portland, and \$1,330,200 carryover from the FY 2024 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 2024: 30206 Safety off the Streets - Winter Shelter & Severe Weather

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program offer funds a 24-hour, fully staffed, 40-unit bridge shelter, that assists in the safety and support of highly vulnerable individuals, many of whom are coming directly from extended periods of homelessness and are living with a range of significant disabling conditions. This bridge programming prioritizes policies and practices designed to help people successfully remain in the shelter while they prepare to move into permanent housing.

**Program Description**

The Rockwood 8 Bridge Shelter, a 40-unit motel, provides a specialized function in the overall shelter system, providing “bridge shelter” beds for people who are signed up for permanent supportive housing who are waiting to move into their new homes. A bridge shelter, a nationally recognized best practice, is a supportive housing program connected with shelter programs, that prioritizes households based on factors such as behavioral health needs, disabling conditions, and length of homelessness. The bridge shelter is a 24-hour, fully staffed shelter that assists in the safety and support of these highly vulnerable individuals, many of whom are coming directly from extended periods of homelessness and are living with a range of significant disabling conditions.

This bridge programming prioritizes policies and practices designed to help people successfully remain in the shelter while they prepare to move into permanent housing.

This program model aligns with the goal of the Metro Supportive Housing Services measure to use 75% of SHS funds to serve Population A households.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of motel shelter rooms for people transitioning to permanent supportive housing	42	40	42	42
Outcome	Number of unique individuals receiving bridge housing support in motel settings	62	150	175	150
Outcome	Percent of bridge housing participants who successfully transition to PSH	5%	80%	100%	80%
Outcome	BIPOC served in Bridge Housing at rate as high or higher than percent of HUD homeless population	null	Yes	Yes	Yes

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$2,763,920	\$0	\$1,780,635
Materials & Supplies	\$0	\$0	\$0	\$1,127,370
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,763,920</b>	<b>\$0</b>	<b>\$2,908,005</b>
<b>Program Total:</b>	<b>\$2,763,920</b>		<b>\$2,908,005</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$2,763,920	\$0	\$2,908,005
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,763,920</b>	<b>\$0</b>	<b>\$2,908,005</b>

Explanation of Revenues

\$2,908,005 of the FY 2025 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 2024: 30207 Safety off the Streets - Bridge Housing

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Joint Office of Homeless Services (JOHS) funds emergency shelter for the four systems of care (adults, youth, families, and survivors of domestic violence). This program offer funds five motel shelters. Motel shelter is an integral part of the portfolio of shelter offered by the Joint Office of Homeless Services. By providing individual or small-group accommodation for participants, JOHS is able to shelter individuals who may not be successful in other settings.

### Program Description

This program offer funds motel shelter programs, including leasing costs, operations and maintenance, and facilities improvements. The majority of motel shelters are currently leased through a model called Room Block Agreements (RBAs) in which all the rooms in a motel are booked and paid at a nightly rate that includes all of the services generally associated with commercial room stays, such as housekeeping and maintenance. This program offer funds those leases and some associated additional charges, such as reimbursements for damages to premises caused by participants in motel programs.

For motel shelters that are owned by Multnomah County or leased through methods where Multnomah County becomes responsible for maintenance, this program offer funds that maintenance as well as other costs of operation, including utilities, garbage removal, etc. Some of these details may also be funded in whole or in part through program offer 30200 - Safety off the Streets - Adult Shelter, as some service providers use some of their budgets to direct these operations and others allow Multnomah County property managers a greater role in maintenance.

Finally, this program offer funds improvements to some facilities, which are often part of negotiated leases. Few, if any, commercial motels available to Multnomah County at a competitive price come with all of the features that are desirable for shelter locations, and it is more cost-effective and expedient to fund improvements to available motel spaces than to procure spaces with these improvements. These can include the addition of The Americans with Disabilities Act (ADA) accessible rooms, expansion of guest-facing laundry facilities, and safety improvements such as the addition of fencing.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of year-round emergency shelter beds/rooms	250	300	289	289
Outcome	Number of unique individuals receiving supports in motel settings*	870	900	1,290	1,290

### Performance Measures Descriptions

\*The FY 2024 Estimate and FY 2025 Offer reflects the number of individuals who can be sheltered in a single motel room, which is flexible based on room layouts and program needs.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$10,097,850	\$0	\$0	\$10,229,100
Materials & Supplies	\$4,955,512	\$0	\$0	\$5,469,844
Internal Services	\$614,349	\$0	\$0	\$790,686
<b>Total GF/non-GF</b>	<b>\$15,667,711</b>	<b>\$0</b>	<b>\$0</b>	<b>\$16,489,630</b>
<b>Program Total:</b>	<b>\$15,667,711</b>		<b>\$16,489,630</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$10,229,100
Beginning Working Capital	\$0	\$0	\$0	\$6,260,530
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$16,489,630</b>

Explanation of Revenues

\$6,260,530 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$10,229,100 of the FY 2025 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 2024: 30209 COVID-19 Emergency Response - Shelter Operations

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **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 uses assertive engagement and trauma-informed care to identify harm reduction strategies, accessing behavioral and mental health services, navigate primary and specialty care clinics, and connect patients with survival gear, transportation vouchers and other needs as available and identified.

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) 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 its related program offers, represents a significant outreach and services system focused on assisting people who remain unsheltered to meet their basic needs and navigate to shelter and housing.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Outcome	Number of unsheltered individuals engaged with health-related services through mobile medical team	6,259	1,400	2,500	2,200
Outcome	Number of people receiving culturally specific outreach assistance to access services	1000	1,000	1,000	1,000
Outcome	Number of uses of expanded hygiene services	N/A	10,000	5,000*	10,000

### Performance Measures Descriptions

\*The FY 2024 Estimate is lower due to extended 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	2024	2024	2025	2025
Personnel	\$146,477	\$0	\$160,308	\$286,838
Contractual Services	\$446,250	\$1,158,791	\$0	\$1,658,005
Materials & Supplies	\$0	\$0	\$43,170	\$0
Internal Services	\$0	\$0	\$0	\$125,320
<b>Total GF/non-GF</b>	<b>\$592,727</b>	<b>\$1,158,791</b>	<b>\$203,478</b>	<b>\$2,070,163</b>
<b>Program Total:</b>	<b>\$1,751,518</b>		<b>\$2,273,641</b>	
<b>Program FTE</b>	1.00	0.00	1.00	2.00

Program Revenues				
Intergovernmental	\$0	\$1,158,791	\$0	\$822,238
Beginning Working Capital	\$0	\$130,605	\$0	\$1,247,925
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,289,396</b>	<b>\$0</b>	<b>\$2,070,163</b>

## Explanation of Revenues

This program generates \$125,320 in indirect revenues.

County General fund plus \$1,247,925 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$412,158 of the FY 2025 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$410,080 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 2024: 30210A Safety on the Streets

This program offer contains an additional 1.00 FTE that will support growth in contracts tracking for outcomes and outputs and 1.00 FTE that supports outreach coordination work that has grown substantially over the last year. In FY 2024 Safety on the Streets funding was expanded and distributed across three program offers, Safety on the Streets (30210A), COVID-19 Emergency Response - Culturally Specific Outreach (30210C), and ARP - COVID-19 Emergency Response - Expanded Hygiene Access (30902).

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 30210A, 30100  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

The Joint Office of Homeless Services (JOHS) prioritizes the provision of outreach and services to people living unsheltered in encampments and other places not meant for human habitation. These investments maintain navigation outreach services and the coordination of access to shelter and other key resources. They also include 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.

It also maintains funding for up to 10 navigation outreach workers and an outreach coordinator to provide service navigation and de-escalation services to people in areas prioritized by the SSCC. It funds the capacity to coordinate outreach teams, including existing teams that already provide treatment, navigation, housing and survival supplies, work better with volunteer teams. The outreach coordinator will work in partnership with the Street Services Coordination Center, including a path to set-aside shelter beds, to help the Joint Office of Homeless Services and outreach workers better support people in camps who are engaging with the city's public space management agencies. 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.

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: Safety on the Streets - Navigation & Service Coordination (30210A) and System Access, Assessment, & Navigation (30100).

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Expanded navigation outreach capacity*	6	20	8	10
Outcome	BIPOC successfully referred to shelter at rates as high or higher than non-Hispanic whites	Yes	Yes	Yes	Yes

**Performance Measures Descriptions**

\*The FY 2023 Actual reflects program ramp-up time. The FY 2024 Budgeted reflects the expected outcome if fully funded, and while this was a shared investment, the City of Portland did not fully fund their investment. The FY 2024 Estimated and FY 2024 Offer reflects a decrease in funding.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$291,734	\$0	\$0	\$324,148
Contractual Services	\$437,241	\$887,405	\$0	\$1,360,975
Internal Services	\$0	\$0	\$0	\$141,620
<b>Total GF/non-GF</b>	<b>\$728,975</b>	<b>\$887,405</b>	<b>\$0</b>	<b>\$1,826,743</b>
<b>Program Total:</b>	<b>\$1,616,380</b>		<b>\$1,826,743</b>	
<b>Program FTE</b>	2.00	0.00	0.00	2.00

Program Revenues				
Intergovernmental	\$0	\$887,405	\$0	\$465,768
Beginning Working Capital	\$0	\$0	\$0	\$1,360,975
<b>Total Revenue</b>	<b>\$0</b>	<b>\$887,405</b>	<b>\$0</b>	<b>\$1,826,743</b>

Explanation of Revenues

This program generates \$141,620 in indirect revenues.  
 \$1,360,975 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$465,768 of the FY 2025 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 2024: 30210B Safety on the Streets - Navigation & Service Coordination

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 30210A, 10012C, 30206  
**Program Characteristics:**

### Executive Summary

This program offer funds staffing, operations, and inventory procurement for a distribution warehouse that provides supplies to groups conducting outreach to people experiencing unsheltered homelessness. These supplies are intended to provide immediate harm reduction by providing items such as basic clothing, first aid supplies, and outdoor shelter essentials such as tents, tarps, and sleeping bags by providing supplies via outreach as a supplement to available shelters and by allocating supply appointments through an equitable process, this program supports equitable outcomes by reducing the harm experienced by those who have not yet accessed other forms of shelter.

### Program Description

This program offer funds the following elements essential for operating a supplies distribution warehouse:

#### Staffing

This program offer funds positions designated as essential employees who during both normal operations and emergencies such as severe weather keep and manage the inventory, make it available to outreach providers through appointments, and track relevant data. Individual team members also perform supplies ordering of outreach supplies, organize warehouse operations, and maintain the inventory tracking system.

This program increases capacity for emergency and severe weather responses by making warehouse staff available to distribute items appropriate to the event as needed to support sheltering, on-street safety, outreach, and other activities in collaboration with Joint Office of Homeless Services (JOHS), County, and other emergency operations staff.

#### Operations

This program offer funds operation of the warehouse itself, including the lease, facility maintenance and safety compliance, and maintenance of necessary equipment.

#### Partnership and Relationship-Building Opportunities

This program's value exceeds the direct utility of the items distributed. It is the explicit goal of this outreach program to foster collaboration with stakeholders including other governmental organizations, non-profit, mutual aid, and outreach teams, and the public as a whole by providing a flexible, responsive, and proactive method for meeting material needs quickly. It is also a goal of this program to improve the success of efforts to connect unsheltered individuals to other services by building relationships and trust by providing items that increase their immediate safety and comfort.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of regular (non-emergency) supply appointments provided*	841	1,044	1,044	1,436
Outcome	Collaborations with external partners on specific initiatives or events**	N/A	0	2	4

### Performance Measures Descriptions

\*Each appointment represents a single group picking up outreach supplies; currently, most groups are offered one appointment each month.

\*\*This is a new measure in FY 2025. The responsive nature of the supply center's mission allows for collaborations to support initiatives as they arise, with the overall goal of increased safety for unsheltered individuals.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$293,335	\$0	\$0	\$440,744
Materials & Supplies	\$755,110	\$0	\$0	\$750,000
Internal Services	\$359,254	\$0	\$0	\$568,151
<b>Total GF/non-GF</b>	<b>\$1,407,699</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,758,895</b>
<b>Program Total:</b>	<b>\$1,407,699</b>		<b>\$1,758,895</b>	
<b>Program FTE</b>	3.00	0.00	0.00	4.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$1,758,895
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,758,895</b>

Explanation of Revenues

This program generates \$192,564 in indirect revenues.  
 \$1,758,895 of the FY 2025 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 2024: 30209 COVID-19 Emergency Response - Shelter Operations

This program offer contains an additional 1.00 FTE to support on supply center operations.

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

**Program Offer Type:** Operating      **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 the COVID-19 pandemic, 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 2025, 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 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 three Safe Rest Villages with up to 135 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of emergency alternative shelter beds*	193	393	193	208
Outcome	Overrepresented BIPOC and LGBTQIA2S+ supported at a rate as high or higher than percent of population	No	Yes	No**	Yes
Outcome	Number of people sheltered in existing outdoor physical distancing shelters	268	780	320	350

### Performance Measures Descriptions

\*The FY 2025 Budgeted reflects the expected outcome if fully funded and all sites are viable. The FY 2024 Estimate and FY 2024 Offer reflects the number of units expected. \*\*Measure of representation only reflects race/ethnicity. JOHS is improving it's ability to track and report on representation for LGBTQIA2S+ populations.

**Revenue/Expense Detail**

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$406,412	\$0	\$431,885
Contractual Services	\$0	\$9,733,500	\$0	\$13,032,424
Internal Services	\$0	\$0	\$0	\$188,691
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$10,139,912</b>	<b>\$0</b>	<b>\$13,653,000</b>
<b>Program Total:</b>	<b>\$10,139,912</b>		<b>\$13,653,000</b>	
<b>Program FTE</b>	0.00	3.00	0.00	3.00

Program Revenues				
Intergovernmental	\$0	\$8,564,912	\$0	\$13,653,000
Beginning Working Capital	\$0	\$0	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$8,564,912</b>	<b>\$0</b>	<b>\$13,653,000</b>

**Explanation of Revenues**

This program generates \$188,691 in indirect revenues.  
 \$13,653,000 American Rescue Plan (ARP) funding through the City of Portland.

**Significant Program Changes**

**Last Year this program was:** FY 2024: 30905 ARP - COVID-19 Emergency Response - Outdoor Physical Distancing

### Housing Placement and Retention

The Housing Placement and Retention division is focused on assisting individuals and families in obtaining and maintaining housing stability. It offers supportive services to help people gain access to housing, prevent homelessness and support those experiencing homelessness or housing instability with workforce support. This programming is crucial for many individuals experiencing or at risk of homelessness, who may need a combination of limited duration rent assistance, housing placement and retention support services, and assistance with income acquisition.

One of the key components of this programming is Rapid Rehousing (RRH), which supports individuals and families exit homelessness by helping them achieve and maintain permanent housing stability as quickly as possible. RRH provides flexible short- and medium-term rental assistance, funds to cover move-in expenses and overcome other financial barriers to housing access, and housing case management services. Services include assistance with housing searches, landlord negotiation, financial support for rent and move-in expenses, and post-placement stabilization services, including managing household finances, addressing maintenance issues and resolving landlord disputes. RRH also offers support in acquiring income by connecting clients with education, job training and public benefits.

The Housing Placement and Retention division of the Joint Office of Homeless Services plays a crucial role in achieving the goals of the Metro Supportive Housing Services Measure Local Implementation Plan (LIP). This includes increasing the number of individuals placed into housing each year and facilitating placements out of shelter to create space for others in need. In total, the FY 2025 budget funds an estimated 8,322 people and 1000 households either placed or retained in housing, including 3,590 people newly placed or retained in housing (within JOHS only; eviction prevention services are also provided by the Department of County Human Services).

# \$92.3 million

## Housing Placement and Retention

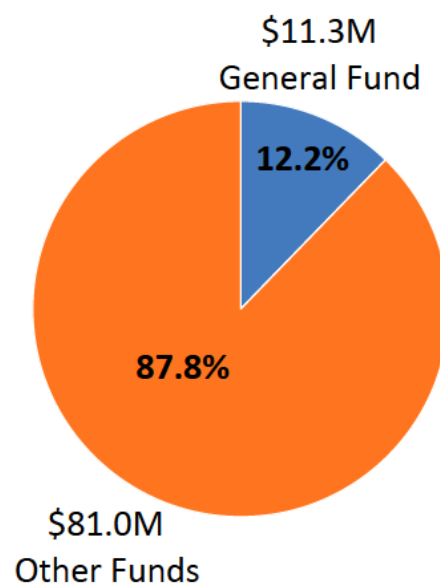
Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.



### 11.50 FTE

(full time equivalent)



### Significant Division Changes

In FY 2025, this division’s budget includes an additional \$5.6 million for placement out of shelter as part of the FY 2025 - FY 2026 Community Shelter Strategy, for rapid rehousing out of shelter across all systems of care (Adult, Youth, Families with Children, and Survivors of Domestic and Sexual Violence).

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Housing Placement and Retention</b>						
30300	Housing Placement & Retention - Adults & Women Households		2,216,795	6,816,368	9,033,163	1.50
30301A	Housing Placement & Retention - Homeless Families		2,780,241	9,018,889	11,799,130	2.00
30302	Housing Placement & Retention - Placement out of Adult Shelter		884,490	3,746,265	4,630,755	0.00
30302B	Housing Placement & Retention - Placement out of Shelter		0	12,285,920	12,285,920	0.00
30303A	Housing Placement & Retention - Domestic Violence		1,576,942	6,547,878	8,124,820	3.00
30304	Housing Placement & Retention - Emergency Rent Assistance		0	3,268,845	3,268,845	0.00
30305	Housing Placement & Retention - Medical/Aging		0	728,165	728,165	0.00
30306	Housing Placement & Retention - Youth Services		2,704,806	4,435,400	7,140,206	2.00
30307	Housing Placement & Retention - Veterans		348,850	506,810	855,660	0.00
30308A	Housing Placement & Retention - Gresham Homeless Services Expansion		0	600,000	600,000	0.00
30308B	Housing Placement & Retention - East County Homeless Services		0	300,000	300,000	0.00
30308C	Housing Placement & Retention - East County Homeless Services Expansion		0	200,000	200,000	0.00
30309	Housing Placement & Retention - Primary Leasing Program		0	2,967,805	2,967,805	0.00
30310	Housing Placement & Retention - Housing Multnomah Now		0	5,000,000	5,000,000	3.00
30311	Housing Placement & Retention - State Executive Order 24-02		0	16,693,568	16,693,568	0.00
30500	Diversion Services		786,768	2,167,017	2,953,785	0.00
30600	Employment Programs		0	5,699,540	5,699,540	0.00
<b>Total Housing Placement &amp; Retention</b>			<b>\$11,298,892</b>	<b>\$80,982,470</b>	<b>\$92,281,362</b>	<b>11.50</b>

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

This program supports existing programming to house and retain housing for hundreds of adults experiencing homelessness. This offer funds limited duration rental assistance along with staffing that is focused on housing placement and retention support. With these funds, The Joint Office of Homeless Services (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, with a focus on eliminating disparate rates of homelessness on the basis of race and ethnicity.

### Program Description

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.

For many 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 offer funds this “rapid rehousing” program for adults and women, including limited duration rental assistance and staffing that is focused on housing placement and retention support. With these funds, 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.

Services are delivered by a range of skilled nonprofit partners including Culturally Specific Providers serving Multnomah County’s communities of color. This assistance is access via shelter programs, day centers, and street outreach programs, including targeted outreach in Gresham and East County.

The investments in this program offer leverage significant Federal, State and local resources. This offer includes the 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.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of new and ongoing participants provided rent assistance (PH or HP) including STRA and non-STRA*	878	1,080	650	1,100
Outcome	BIPOC placed or retained in housing at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing	84%	90%	84%	90%
Outcome					

### Performance Measures Descriptions

\*This measure has changed from "Number households enrolled in permanent housing or prevention programs (incl STRA & non-STRA)" to reflect an initiative to align with contracted outputs/outcomes. The FY 2024 Estimate is lower due to ramp-up of separate programming that limited capacity. The measure "Number households newly placed into or retained in permanent housing (incl STRA & non-STRA programs)" was removed to reflect an initiative to align with contracted outputs/outcomes.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$195,774	\$37,821	\$252,773	\$0
Contractual Services	\$1,452,239	\$6,865,650	\$1,964,022	\$6,816,368
<b>Total GF/non-GF</b>	<b>\$1,648,013</b>	<b>\$6,903,471</b>	<b>\$2,216,795</b>	<b>\$6,816,368</b>
<b>Program Total:</b>	<b>\$8,551,484</b>		<b>\$9,033,163</b>	
<b>Program FTE</b>	1.25	0.25	1.50	0.00

Program Revenues				
Intergovernmental	\$0	\$8,705,220	\$0	\$3,150,910
Beginning Working Capital	\$0	\$0	\$0	\$2,834,310
<b>Total Revenue</b>	<b>\$0</b>	<b>\$8,705,220</b>	<b>\$0</b>	<b>\$5,985,220</b>

Explanation of Revenues

County General fund plus \$831,148 Video Lottery Fund allocated to Multnomah County to be used for the purpose of furthering economic development in accordance with ORS 461.512, \$2,834,310 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$1,804,195 of the FY 2025 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$1,346,715 FY 2025 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 2024: 30300A Housing Placement & Retention - Adults & Women Households

This program offer includes housing placement and retention programming that was previously budgeted in Housing Placement & Retention - Adults & Women Households - SHS (30300B). The FY 2024 budgeted number reflects the number previously included in 30300B.

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program offer maintains funding to house and provide equitable retention support services to over a thousand families with minor children, using a combination of flexible rent/client assistance and case management focused on housing placement and retention. 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. This offer leverages resources from the Federal Housing Choice Voucher program.

**Program Description**

This program offer provides families 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. On average, 60% of the families served through MHT identify as being from communities of color, achieving the goal of improving access and outcomes for these communities.

Families experiencing homelessness access the system through a Coordinated Access system. Families are screened for immediate safety and overall vulnerability. Because many more families are seeking housing assistance than JOHS is resourced to provide, families are prioritized based on vulnerability, housing opportunity, and provider capacity.

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. 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.

This program leverages Federal and State funding including U.S. Department of Housing and Urban Development grants.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of participants (new and ongoing) provided rent assistance (PH or HP)*	2,110	1,560	2,120	1,560
Outcome	BIPOC placed or retained in housing at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing	86%	90%	86%	90%
Outcome					

**Performance Measures Descriptions**

\*This measure has changed from "Number of households enrolled in permanent housing or prevention programs". The measure "Number of households newly placed into or retained in permanent housing" was removed to reflect an initiative to align with contracted outputs/outcomes.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$164,042	\$154,266	\$177,978	\$162,911
Contractual Services	\$3,645,439	\$6,814,495	\$2,602,263	\$8,784,802
Internal Services	\$0	\$0	\$0	\$71,176
<b>Total GF/non-GF</b>	<b>\$3,809,481</b>	<b>\$6,968,761</b>	<b>\$2,780,241</b>	<b>\$9,018,889</b>
<b>Program Total:</b>	<b>\$10,778,242</b>		<b>\$11,799,130</b>	
<b>Program FTE</b>	1.00	1.00	1.00	1.00

Program Revenues				
Intergovernmental	\$0	\$6,383,606	\$0	\$3,942,489
Beginning Working Capital	\$0	\$585,155	\$0	\$5,076,400
<b>Total Revenue</b>	<b>\$0</b>	<b>\$6,968,761</b>	<b>\$0</b>	<b>\$9,018,889</b>

Explanation of Revenues

This program generates \$71,176 in indirect revenues. County General fund plus \$5,076,400 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$3,942,489 of the FY 2025 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 2024: 30301A Housing Placement & Retention - Homeless Families

This program offer includes housing placement and retention programming that was previously budgeted in Housing Placement & Retention - Homeless Families - SHS (30301B).

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

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

**Related Programs:**

**Program Characteristics:**

### Executive Summary

This program offer funds hundreds of adult-only households to exit shelter into housing, using a combination of flexible rent/client assistance and innovative, multi-agency case management focused on housing placement and retention, including culturally specific services. The Joint Office of Homeless Services (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 is a focus for programs providing placement out of shelter.

### Program Description

This program offer retains existing capacity in housing placement and retention programs focused on helping adults exit shelter into housing, with an emphasis on ensuring that those strategies are also reducing racial disparities.

For many people experiencing homelessness, returning to permanent housing requires a combination of limited duration, flexible rent assistance, case management focused on housing placement and retention, 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.

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 individuals leaving shelters. 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of new and ongoing participants provided rent assistance through permanent housing or homelessness	241	480	400	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 participants newly placed in permanent housing or newly enrolled in homelessness prevention**	190	350	200	200
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing	81%	85%	81%	85%

### Performance Measures Descriptions

\*This measure has changed from "Number of people enrolled in permanent housing or prevention programs" to reflect an initiative to align with contracted outputs/outcomes.

\*\*This measure has changed from Number of people newly placed into or retained in permanent housing to reflect an initiative to align with contracted outputs/outcomes. Lower FY 2024 and FY 2025 numbers reflect new placements only.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$96,465	\$4,386,360	\$884,490	\$3,746,265
<b>Total GF/non-GF</b>	<b>\$96,465</b>	<b>\$4,386,360</b>	<b>\$884,490</b>	<b>\$3,746,265</b>
<b>Program Total:</b>	<b>\$4,482,825</b>		<b>\$4,630,755</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$3,913,775	\$0	\$3,746,265
Beginning Working Capital	\$0	\$6,944,915	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$10,858,690</b>	<b>\$0</b>	<b>\$3,746,265</b>

Explanation of Revenues

County General fund plus \$3,746,265 of the FY 2025 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 2024: 30302A Housing Placement & Retention - Placement out of Adult Shelter

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

**Program Offer Type:** Operating      **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 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.

### 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 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 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 370 households in shelter with permanent housing placement and retention services.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of people enrolled in permanent housing programs	529	370	361	550
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 placed and retained in permanent housing	333	296	290	296

### Performance Measures Descriptions

\*The FY 2025 Offer reflects additional funding for Placement out of shelter in the Adult, Family, Domestic Violence and Youth systems through the Community Shelter Strategy.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$6,472,330	\$0	\$12,285,920
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$6,472,330</b>	<b>\$0</b>	<b>\$12,285,920</b>
<b>Program Total:</b>	<b>\$6,472,330</b>		<b>\$12,285,920</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Beginning Working Capital	\$0	\$0	\$0	\$12,285,920
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$12,285,920</b>

Explanation of Revenues

\$12,285,920 carryover from 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 2024: 30302B COVID-19 Emergency Response - Placement out of Shelter

Prior to FY 2025, this program offer was dedicated to service people with COVID-19. In FY 2025, this program will no longer be COVID-19 specific. In FY 2025, this offer funds an estimated additional 180 placements out of shelter across the Adult, Youth, Family, and Domestic Violence shelter systems as part of the FY 2025 - FY 2026 Community Shelter Strategy.

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program offer funds housing and support services to survivors of domestic violence, the significant majority of whom will identify as Black, Indigenous, and People of Color (BIPOC). Many survivors must leave their home to be safe, while others face eviction due to problems caused by an abusive partner's behavior. This offer will serve individuals using a combination of flexible rent/client assistance and innovative, multi-agency case management focused on housing placement and retention, including culturally specific services

**Program Description**

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 is a focus of all programming.

This program offer funds housing and support services to survivors of domestic violence using a combination of flexible rent/client assistance and innovative, multi-agency case management focused on housing placement and retention, including culturally specific services. This program offer leverages state and Federal funding to support housing for survivors of domestic violence.

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. This program offer also funds case management and supportive services for survivors of Domestic Violence (DV)/Sexual Assault (SA) and their children/dependents. Services include:

- Safety planning, including identifying safe housing options, landlord advocacy, DV Housing Advocacy at culturally specific DV programs, and shared housing for survivors and their children through democratically run homes.
- 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 services to assist survivors with barrier removal, client assistance, and referrals to housing programs and community resources.
- Navigation services to support the rapid transition of people to available shelter and housing resources.
- Case management to deliver DSV services to non-DV system partners in Adult, Youth, and Family Shelters when households need to be connected with DV resources.
- Case Management services to provide housing placement and retention.
- Supportive Services and Rental assistance to ensure housing placement/retention for over a 2-5 year period.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of participants served	745	600	650	790
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 placed or retained in permanent housing	578	470	500	500
Outcome	Percentage of participants who exit to permanent housing	92%	85%	85%	85%

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$215,577	\$0	\$456,658
Contractual Services	\$2,073,502	\$3,767,550	\$1,555,357	\$5,891,316
Materials & Supplies	\$0	\$0	\$21,585	\$390
Internal Services	\$0	\$19,792	\$0	\$199,514
<b>Total GF/non-GF</b>	<b>\$2,073,502</b>	<b>\$4,002,919</b>	<b>\$1,576,942</b>	<b>\$6,547,878</b>
<b>Program Total:</b>	<b>\$6,076,421</b>		<b>\$8,124,820</b>	
<b>Program FTE</b>	0.00	1.50	0.00	3.00

Program Revenues				
Intergovernmental	\$0	\$4,112,187	\$0	\$4,382,893
Beginning Working Capital	\$0	\$0	\$0	\$2,164,985
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,112,187</b>	<b>\$0</b>	<b>\$6,547,878</b>

Explanation of Revenues

This program generates \$199,514 in indirect revenues. County General fund plus \$2,462,040 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, \$2,164,985 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$1,920,853 of the FY 2025 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 2024: 30303A Housing Placement & Retention - Domestic Violence

This program offer includes housing placement and retention previously budgeted in Housing Placement & Retention - Domestic Violence - SHS (30303B). The FY 2024 Budgeted number reflects the number previously included in 30303B. This program offer contains 0.50 FTE that will provide supervisory support to increase effectiveness of the contracting process and coordinating outcomes and outputs from contractors. It also contains 1.00 FTE for Domestic Violence to support design and growth management of the contract portfolios.

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

**Program Offer Type:** Operating      **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. This program offer funds staffing, housing, and rental assistance that 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 staffing at culturally specific community based organizations to support with housing placements and rent assistance. These culturally specific community based organizations play a critical role in creating access for BIPOC households to vital emergency rental assistance resources. 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.

The funding streams for Emergency Rent Assistance, while typically larger, are 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of culturally specific organizations supported to distribute emergency rental assistance funds	15	15	15	15
Outcome	Number of households prevented from losing their housing*	662	400	400	278
Outcome	BIPOC households served at rates as high or higher than their percentage of eligible households	Yes	Yes	Yes	Yes

### Performance Measures Descriptions

\*FY 2025 Offer lower due to reduction of rent assistance funding.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$3,611,270	\$0	\$3,268,845
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,611,270</b>	<b>\$0</b>	<b>\$3,268,845</b>
<b>Program Total:</b>	<b>\$3,611,270</b>		<b>\$3,268,845</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$3,611,270	\$0	\$0
Beginning Working Capital	\$0	\$0	\$0	\$3,268,845
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,611,270</b>	<b>\$0</b>	<b>\$3,268,845</b>

Explanation of Revenues

\$3,268,845 carryover from 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 2024: 30907 ARP - COVID-19 Emergency Recovery - Emergency Rent Assistance

In FY 2024, this program was funded with American Rescue Plan Act funding. In FY 2025, funding was reduced to fund in-courtroom eviction prevention (DCHS Offer 25133C), and East County capacity building and furniture bank (Offer 30308C).

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

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

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

**Executive Summary**

This program offer supports existing housing programs for seniors experiencing or at risk of homelessness. This program offer funds rent assistance, case management focused on housing placement and retention, and supportive services.

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.

**Program Description**

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 substantially 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.

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 (FY 2023) reflects an increase in the number of individuals 55+ years old who were experiencing homelessness. 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.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of new and ongoing participants provided permanent housing or homelessness prevention rent assi	340	330	330	330
Outcome	BIPOC placed or retained in housing at rate as high or higher than percent of HUD homeless population	Yes	Yes	No	Yes
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**

\*Measure has changed from "Number of households enrolled in permanent housing or prevention programs to reflect an initiative to align with contracted outputs/outcomes".

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$704,905	\$0	\$728,165
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$704,905</b>	<b>\$0</b>	<b>\$728,165</b>
<b>Program Total:</b>	<b>\$704,905</b>		<b>\$728,165</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$704,905	\$0	\$0
Beginning Working Capital	\$0	\$0	\$0	\$728,165
<b>Total Revenue</b>	<b>\$0</b>	<b>\$704,905</b>	<b>\$0</b>	<b>\$728,165</b>

Explanation of Revenues

\$728,165 carryover from 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 2024: 30305 Housing Placement & Retention - Medical/Aging

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

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

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

This program offer funds housing placement and retention, along with necessary supportive services, for youth experiencing homelessness. Funding supports rent assistance, case management, housing placement and retention, recovery-oriented services, peer mentorship, health and parenting resources.

The Joint Office of Homeless Services (JOHS) has prioritized permanent housing placement for vulnerable populations, including youth experiencing homelessness. 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.

**Program Description**

JOHS convenes the Homeless Youth Continuum (HYC). 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, mental health and addictions supports, and health services to youth up to age 25 experiencing homelessness. This program offer maintains current capacity to provide these essential housing and developmental supports for youth. With services both on-site and at mobile locations, HYC staff provide culturally responsive services to best meet the developmental needs of homeless youth throughout Multnomah County.

This program offer leverages federal long-term rent assistance vouchers to support housing navigation, placement and retention services for 200 youth. To reduce racial disparities in the experience of homelessness, Black, Indigenous, and People of Color (BIPOC) communities are prioritized in access to and success in the Voucher Programs.

This program offer funds:

Case management that provides linkages to education, employment, health, mental health and addictions treatment, housing services, and on-going housing stability supports. This program also funds education and resource access for pregnant and parenting youth.

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. A range of developmentally appropriate housing options, which include onsite transitional housing with 24-hour staffing, scattered site housing, rapid rehousing, and shared 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of new and ongoing participants provided permanent housing or homelessness prevention rent assist	565	625	560	600
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 in permanent housing or newly enrolled in homelessness prevention or temporary	283	525	375	525
Output	Number of youth receiving recovery support services***	580	700	700	700

**Performance Measures Descriptions**

\*This measure has changed from "Number of youth enrolled in transitional or permanent housing or prevention programs" to reflect an initiative to align with contracted outputs/outcomes.

\*\*This measure changed from "Number of youth newly placed into or retained in transitional or permanent housing" to reflect an initiative to align with contracted outputs/outcomes.

\*\*\*FY 2023 Actual. lower than targeted due to a staffing shortage of 1.00 FTE.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$88,530	\$0	\$317,865
Contractual Services	\$4,254,995	\$1,849,555	\$2,683,221	\$3,978,270
Materials & Supplies	\$0	\$0	\$21,585	\$390
Internal Services	\$0	\$22,522	\$0	\$138,875
<b>Total GF/non-GF</b>	<b>\$4,254,995</b>	<b>\$1,960,607</b>	<b>\$2,704,806</b>	<b>\$4,435,400</b>
<b>Program Total:</b>	<b>\$6,215,602</b>		<b>\$7,140,206</b>	
<b>Program FTE</b>	0.00	0.50	0.00	2.00

Program Revenues				
Intergovernmental	\$0	\$1,960,607	\$0	\$3,651,535
Beginning Working Capital	\$897,050	\$0	\$0	\$783,865
<b>Total Revenue</b>	<b>\$897,050</b>	<b>\$1,960,607</b>	<b>\$0</b>	<b>\$4,435,400</b>

Explanation of Revenues

This program generates \$138,875 in indirect revenues. County General fund plus \$1,069,164 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, \$783,865 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, \$2,415,610 of the FY 2025 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$166,761 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.

Significant Program Changes

Last Year this program was: FY 2024: 30306 Housing Placement & Retention - Youth Services

This program offer contains 0.50 FTE that will provide supervisory support to increase effectiveness of the contracting process and coordinating outcomes and outputs from contractors and 1.00 FTE that will support system infrastructure design and growth of the contract portfolios.

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

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. 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.

**Program Description**

Ending homelessness among Veterans continues to be a priority in the community. However, hundreds of veterans continue to become homeless every year.

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 2025, 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of new and ongoing participants provided permanent housing or homelessness prevention rent assi	42	50	50	50
Outcome	BIPOC placed or retained in housing at rate as high or higher than percent of HUD homeless population	No**	Yes	Yes	Yes
Outcome	Number of participants newly placed in permanent housing or newly enrolled in homelessness prevention	N/A	40	N/A***	40

**Performance Measures Descriptions**

\*This measure has changed from "Number of households enrolled in permanent housing or prevention programs" to reflect an initiative to align with contracted outputs/outcomes.

\*\*New PSH housing for culturally specific Veterans opened in FY 2024.

\*\*\*This measure has changed from "Number of households newly placed into or retained in permanent housing" to reflect an initiative to align with contracted outputs/outcomes. but data collection is not updated for FY 2024. See first measure for



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$197,167	\$630,275	\$348,850	\$506,810
<b>Total GF/non-GF</b>	<b>\$197,167</b>	<b>\$630,275</b>	<b>\$348,850</b>	<b>\$506,810</b>
<b>Program Total:</b>	<b>\$827,442</b>		<b>\$855,660</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$293,355	\$0	\$303,135
Beginning Working Capital	\$0	\$336,920	\$0	\$203,675
<b>Total Revenue</b>	<b>\$0</b>	<b>\$630,275</b>	<b>\$0</b>	<b>\$506,810</b>

Explanation of Revenues

County General fund plus \$129,180 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, \$203,675 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, \$74,940 of the FY 2025 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$99,015 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.

Significant Program Changes

Last Year this program was: FY 2024: 30307 Housing Placement & Retention - Veterans

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 30300, 30311, 30302  
**Program Characteristics:** New Request, One-Time-Only Request

**Executive Summary**

This offer provides expanded funding for homeless services focused on the City of Gresham. Specifically, this offer funds expanded staffing and rent assistance dollars to increase outreach, case management, and housing placement on the City of Gresham's Homeless Services Team.

**Program Description**

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. In FY 2024, Multnomah County and the City of Portland launched the Homelessness Response Action Plan (HRAP), a strategic reset of homeless services. As part of this plan, the JOHS developed a Community Sheltering Strategy in partnership with service providers and partners from the City of Portland and the City of Gresham. This Community Sheltering Strategy proposes adding and replacing emergency shelter units to the existing shelter system by the end of 2025. This offer provides capital funding to support Phase 1 of this strategy, including maintenance of existing shelters and siting and development of new shelter sites.

As part of the HRAP and Community Sheltering Strategy, 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of new and ongoing participants provided rent assistance (PH or HP) including STRA and non-STRA	NA	N/A	N/A	30
Outcome	Number of participants newly placed in PH or newly enrolled in HP (inc STRA & non-STRA programs)*	N/A	N/A	N/A	30
Outcome	BIPOC placed or retained in housing at rate as high or higher than percent of HUD homeless population	NA	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	2024	2024	2025	2025
Contractual Services	\$0	\$0	\$0	\$600,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$600,000</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$600,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Beginning Working Capital	\$0	\$0	\$0	\$600,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$600,000</b>

Explanation of Revenues

\$600,000 of carryover from 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:

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

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

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

**Executive Summary**

This program offer funds to expand outreach and rental assistance programs focused on the East Multnomah County cities of Fairview, Wood Village, and Troutdale. This funding will support programming to house and retain housing for adults experiencing homelessness. With these funds, the Joint Office of Homeless Services (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, with a focus on eliminating disparate rates of homelessness on the basis of race and ethnicity.

**Program Description**

This program expands existing capacity in housing placement and retention programs focused in the East Multnomah County cities of Fairview, Wood Village, and Troutdale. These programs help adult-only households return to permanent housing, with an emphasis on ensuring that those strategies are also reducing racial disparities.

This offer funds flexible rent assistance and flexible client assistance to support housing placement and retention and access to income acquisition assistance. These funds will support and expand the housing placement and retention strategy often referred to as “rapid rehousing,” which is a recognized best practice and critical element of the housing placement strategies. This assistance is accessed via shelter programs, day centers, and street outreach programs, in the East County cities.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Outcome	Number of new and ongoing participants provided rent assistance (PH or HP) including STRA and non-STRA	N/A	N/A	N/A	20
Outcome	Number of participants newly placed in PH or newly enrolled in HP (inc STRA & non-STRA programs)	N/A	N/A	N/A	20
Outcome	BIPOC placed or retained in housing at rate as high or higher than percent of HUD 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	2024	2024	2025	2025
Contractual Services	\$0	\$0	\$0	\$300,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$300,000</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$300,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Beginning Working Capital	\$0	\$0	\$0	\$300,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$300,000</b>

Explanation of Revenues

\$300,000 of carryover from 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:

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

**Program Offer Type:** Capital      **Program Offer Stage:** Adopted

**Related Programs:**
**Program Characteristics:** New Request, One-Time-Only Request, In Target

**Executive Summary**

This program offer funds two key capacity building initiatives in East County: a) capacity building and expansion of a furniture banking program in East County, and b) development of a strategic action plan for homeless response capacity building across East Multnomah County.

**Program Description**

This program provides one-time-only funding for two key capacity building initiatives for homeless services in East County.

First, this offer provides one-time-only funding for development and implementation planning of a strategic action plan for homelessness response in East County. This funding will assist the Joint Office of Homeless Services (JOHS) and the East County cities in planning for an East County homelessness response strategy that is unique to the needs of East County.

Second, this offer provides one-time-only funding to expand access to furniture for people exiting homelessness to housing in East County. Often, people leaving homelessness into housing struggle to acquire the basic necessities to furnish a home, and rely on nonprofit provider partners to assist with purchasing home basics, including furniture. Existing services are not located in East County, making access to this service difficult for people moving into housing from homelessness in East County. Funding in this offer will increase the capacity to meet the needs of residents experiencing housing insecurity in East Multnomah County.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Outcome	Additional households served with furniture services	N/A	N/A	N/A	500
Output	Creation of East County Strategic Homelessness Response Capacity Building Plan	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	2024	2024	2025	2025
Contractual Services	\$0	\$0	\$0	\$200,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$200,000</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				
Beginning Working Capital	\$0	\$0	\$0	\$200,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$200,000</b>

Explanation of Revenues

\$200,000 carryover from 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:

\$200,000 reduced from 30304 rent assistance to fund \$50k OTO East County Capacity Building and \$150k OTO Furniture bank in East county.

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**Executive Summary**

This program offer funds agency leasing programs that increase access to private market units for households with significant barriers to housing. This program offer funds scattered site and project-based agency leasing models, as well as shared housing models focused on serving youth and individuals seeking a recovery community.

**Program Description**

This program offer funds agency leasing programs that increase access to private market units for households with significant barriers to housing. Agency leasing is a supportive housing strategy in which service providers lease housing units in the private rental market and then sublease those units to program participants. Agency leasing is efficient and effective because it quickly increases access to housing through the private rental market, minimizes barriers that typically prevent people from accessing those units, and helps people access housing units in their communities. This program offer funds scattered site and project-based agency leasing models, as well as shared housing models focused on serving youth and individuals seeking a recovery community.

The Multnomah County Supportive Housing Services (SHS) Local Implementation Plan (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. In alignment with priorities outlined in the LIP, this program offer funds a range of agency leasing models that partner with landlords and property managers to increase access to private market units for individuals experiencing homelessness who face significant barriers to housing, and provide those individuals with the necessary rental assistance and support services to retain their housing.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of people placed into or maintained housing through primary leasing program*	N/A	N/A	60	90
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing**	N/A	N/A	85%	80%
Outcome	Overrepresented People of Color lease up successfully at rates as high or higher than all households	N/A	Yes	Yes	Yes

**Performance Measures Descriptions**

\*FY 2024 Estimate reflects program ramp-up time, and the FY 2025 Offer reflects the expectation that two additional programs will come online.

\*\*This measure has changed from "Percentage of households receiving access incentive support that successfully lease up in housing with a goal of 80%". This is a new performance measure related to the primary leasing programs funded through this PO. The old performance measure included here related to Move in Multnomah, which ended in FY 2024.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$3,703,355	\$0	\$2,967,805
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,703,355</b>	<b>\$0</b>	<b>\$2,967,805</b>
<b>Program Total:</b>	<b>\$3,703,355</b>		<b>\$2,967,805</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Beginning Working Capital	\$0	\$3,703,355	\$0	\$2,967,805
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,703,355</b>	<b>\$0</b>	<b>\$2,967,805</b>

Explanation of Revenues

\$2,967,805 carryover from 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 2024: 30309 Housing Placement & Retention - Incentives & Master Leases

This program offer no longer includes the time-limited Move In Multnomah program that is sunsetting in FY 2024, and now solely funds agency leasing programs.

**Department:** Joint Office of Homeless Services      **Program Contact:** DeAnna Negrete

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

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

### Executive Summary

This program offer funds the administration of the Housing Multnomah Now initiative. This initiative interweaves an emergency management model of housing service delivery 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.

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.

### Program Description

This program offer will serve individuals experiencing homelessness in two distinct geographic regions, central city and East County.

For many people experiencing homelessness, returning to permanent housing requires a combination of limited duration, flexible rent assistance and housing placement and retention support staffing. 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. Housing Multnomah Now combines rapid rehousing with an emergency management model of service delivery, within focused geographic areas across Multnomah County.

The program will expedite the process of moving individuals experiencing homelessness into housing and resolving homelessness for those individuals through three interwoven efforts. First, the JOHS leads the emergency management model Multi-Agency Coordinating (MAC) group for Multnomah County, and serves on the Governor’s Statewide MAC. Second, the program accelerates housing access, placement, and stability through the provision of housing resources by outreach workers in specific geographic areas, and incentives for 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 primarily focuses on single adults and couples experiencing homelessness in partnership with the the Adult System of Care (ASC) (see program offers 30300 and 30200). 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, management and support of the initiative, and data collection.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of Private Market Landlords that enroll to provide housing through Housing Multnomah Now	N/A	15	15	15
Outcome	BIPOC placed or retained rate as high or higher than percent of HUD homeless population	N/A	Yes	Yes	Yes
Output	Number of households placed into or retained in housing through Housing Multnomah Now	N/A	225	300	300
Outcome	Percentage of people not returning to homeless services within a year of receiving Housing	N/A	80%	80%	80%

### Performance Measures Descriptions

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$275,511	\$0	\$575,364
Contractual Services	\$0	\$9,558,754	\$0	\$4,173,259
Internal Services	\$0	\$0	\$0	\$251,377
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$9,834,265</b>	<b>\$0</b>	<b>\$5,000,000</b>
<b>Program Total:</b>	<b>\$9,834,265</b>		<b>\$5,000,000</b>	
<b>Program FTE</b>	0.00	2.00	0.00	3.00

Program Revenues				
Beginning Working Capital	\$0	\$10,000,000	\$0	\$5,000,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$10,000,000</b>	<b>\$0</b>	<b>\$5,000,000</b>

Explanation of Revenues

This program generates \$251,377 in indirect revenues.  
 \$5,000,000 carryover from 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 2024: 30310 Housing Placement & Retention - Housing Multnomah Now

This program offer contains an additional 1.00 limited duration appointment for support of the MAC workgroup and coordination with state and local partments. It also contrains an additional 1.00 FTE for detailed reporting and analysis for the MAC workgroup.

**Department:** Joint Office of Homeless Services      **Program Contact:** DeAnna Negrete

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

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

**Executive Summary**

This program offer supports the Executive Order projects Oregon All In and Oregon Rehousing Initiative, state-led projects 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 286 households. The Executive Order (EO) 24-02 extended the funding from HB 5019 and SB 5511 to sustain programming created under Oregon All In through June 30, 2025. As well, EO 24-02, set a new goal to rehouse 100 households through the Oregon Rehousing Initiative, funding from SB 5701, by June 30th 2025.

**Program Description**

The Oregon All In initiative is a state-led project aimed at reducing unsheltered homelessness 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 allocated \$13.4 million to Multnomah County in FY 2024 through HB 5019 to create 140 new shelter beds and rehouse 186 households from unsheltered homelessness. 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. In FY 2024, we met the goals set by Oregon All In by creating over 140 new shelter beds and rehousing over 186 households.

On January 9, 2024, EO 23-02 was continued and expanded by EO 24-02 in effect until January 10, 2025. New measurable goals for EO 24-02 shall be determined in coordination with local communities and made public as well as previously achieved measurable goals established by EO 23-02 including homelessness prevention, rehousing and additional shelter capacity shall be maintained. This (EO 24-02) directs the state’s emergency management response capacity and administration of funding and other resources through SB 5511 to continue meaningfully reducing the level of unsheltered and homelessness in Oregon and is supported by Oregon Department of Emergency Management, Oregon Housing and Community Services and Oregon Health Authority.

Through SB 5701, funding was allocated for a statewide rehousing program, called the Oregon Rehousing Initiative (ORI). This program is intended to house additional households experiencing homelessness, above and beyond the work initiated by EO 23-02 and HB 5019. The program will be focused on supporting youth and families systems for housing placements made by June 30, 2025, with funds expended through FY 2027 to allow for up to 24 months of rental assistance per household.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of emergency shelter beds	N/A	140	140	140
Outcome	BIPOC sheltered or placed at a rate as high or higher than percent of HUD homeless population	N/A	Yes	Yes	Yes
Outcome	Number of households served in emergency shelter beds	N/A	140	140	140
Outcome	Number of households placed in permanent housing	N/A	186	186	286

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$3,842,000	\$0	\$16,693,568
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,842,000</b>	<b>\$0</b>	<b>\$16,693,568</b>
<b>Program Total:</b>	<b>\$3,842,000</b>		<b>\$16,693,568</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$16,693,568
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$16,693,568</b>

Explanation of Revenues

\$16,150,672 of one-time funding allocated to Multnomah County by the State of Oregon's Department of Housing and Community Services (OHCS) through State of Oregon's Executive Order 24-02 (HB 5019 and SB 5511) sustain shelter operations, outreach services and to provide long term rental assistance for housing placement investments created by EO 23-02 through FY 2025, and \$542,896 of State Oregon Rehousing Initiative Rapid Rehousing allocated to Multnomah County by OHCS through State of Oregon's SB 5701 focused on supporting youth and families systems for housing placements to be made by June 30, 2025.

Significant Program Changes

Last Year this program was: FY 2024: 30311 State Executive Order 23-02 Oregon's ALL IN

EO 24-02 maintains added capacity for the state's shelter system, rehuses people experiencing homelessness, and prevent homelessness. Funding to support this EO is included in SB5511

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

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

**Related Programs:**

**Program Characteristics:**

### Executive Summary

This program offer maintains 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. 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.

### 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, 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of participants receiving diversion services	871	1,170	980	1,170
Outcome	Percentage of exits to permanent housing	80%	80%	75%	80%
Outcome	Number of people served with benefits acquisition assistance (BEST)	390	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

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$1,336,876	\$1,522,548	\$786,768	\$2,167,017
<b>Total GF/non-GF</b>	<b>\$1,336,876</b>	<b>\$1,522,548</b>	<b>\$786,768</b>	<b>\$2,167,017</b>
<b>Program Total:</b>	<b>\$2,859,424</b>		<b>\$2,953,785</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$933,702	\$0	\$490,705
Beginning Working Capital	\$128,130	\$0	\$0	\$1,100,850
<b>Total Revenue</b>	<b>\$128,130</b>	<b>\$933,702</b>	<b>\$0</b>	<b>\$1,591,555</b>

Explanation of Revenues

County General fund plus \$525,462 Video Lottery Fund allocated to Multnomah County to be used for the purpose of furthering economic development in accordance with ORS 461.512, \$1,100,850 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$490,705 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 2024: 30500 Diversion Services

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program offer sustains critical employment and housing initiatives, with an emphasis on meeting the needs of families, youth, and Communities of Color. This offer maintains funding for programs that align 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. These programs contract with multiple community partners across various systems of care to provide employment program support.

**Program Description**

This program offer sustains critical 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 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:

- Economic Opportunity Program (EOP) - an existing network of nine nonprofit employment providers that connect individuals and families to career-track employment services, housing resources, and community-based support. The program priorities participants who are survivors of domestic violence and/or who are eligible for Supplemental Nutrition Assistance Program (SNAP).
- 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. This program offer also provides individuals accessing employment services.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of individuals receiving employment services and supports	1,746	650	900	750
Outcome	Number of employment placements	276	360	360	360
Outcome	Number of households receiving rent assistance or eviction prevention	126	225	125*	150
Outcome	BIPOC participate in program at rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes

**Performance Measures Descriptions**

\*Due to rent increases, less households were able to be served with the funds allocated.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$1,982,448	\$2,665,280	\$0	\$5,699,540
<b>Total GF/non-GF</b>	<b>\$1,982,448</b>	<b>\$2,665,280</b>	<b>\$0</b>	<b>\$5,699,540</b>
<b>Program Total:</b>	<b>\$4,647,728</b>		<b>\$5,699,540</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Beginning Working Capital	\$0	\$756,890	\$0	\$3,408,970
<b>Total Revenue</b>	<b>\$0</b>	<b>\$756,890</b>	<b>\$0</b>	<b>\$3,408,970</b>

Explanation of Revenues

Video Lottery Fund allocated to Multnomah County to be used for the purpose of furthering economic development in accordance with ORS 461.512, and \$3,408,970 carryover from 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 2024: 30600 Employment Programs

### Supportive Housing

Supportive Housing (SH) is a program that aims to assist individuals with severe temporary or long-term disabilities who are experiencing long-term homelessness and have extremely low income. SH can take the form of both permanent supportive housing and recovery-oriented transitional housing.

Permanent Supportive Housing (PSH) is a type of deeply affordable permanent housing that provides supportive services to individuals with long-term disabilities, including chronic health conditions, mental illness and addictions. PSH is designed for those who have experienced or are at risk of long-term or cyclical homelessness. It combines long-term rent assistance with ongoing wrap-around support services, such as behavioral and physical health services, benefits and income-related services, and in-home housing retention support. These services are intensive, voluntary, individualized and aimed at helping participants achieve and maintain long-term housing stability. PSH can be provided in site-based buildings dedicated to Permanent Supportive Housing, clusters of units within a single building, or scattered across multiple sites. It can also be integrated into both private market and non-profit/publicly owned housing. Long-term supportive housing that is not considered PSH also combines long-term rent assistance with support services, but in these programs the supportive services may be less intensive, or relatively shorter-term.

Recovery-oriented transitional housing (TH) offers temporary housing and supportive services for individuals experiencing homelessness who have a substance use disorder and are seeking this type of program. The housing and services provided in TH are short-term, typically lasting 24 months or less, and are designed to support participants in transitioning to permanent housing through case management and life skills building.

# \$71.8 million

### Supportive Housing

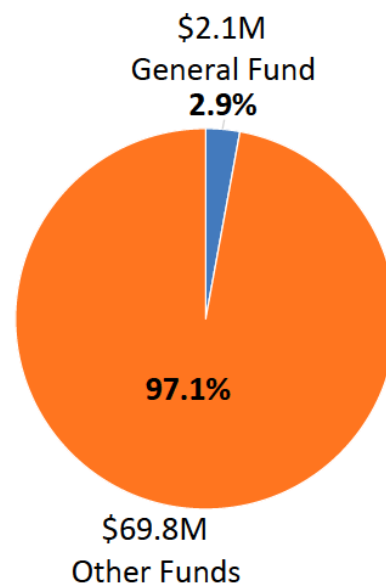
Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.



## 15.00 FTE

(full time equivalent)



### Significant Division Changes

The FY 2025 budget includes funding for approximately 3,054 PSH units with SHS Measure and federal Continuum of Care funding, including 401 new units funded by the SHS Measure. This brings Multnomah County’s total of new SHS-funded units to 1,901, representing 85% of the Local Implementation Plan goal of 2,235 units. This includes investments to align service funding levels with the true cost of operating PSH. In addition, this funding will support scattered-site and site-based SH, including SH that is integrated into deeply affordable housing units financed by the Portland Housing Bond and the 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; Black, Indigenous and People of Color (BIPOC) communities; older adults; youth; families with children; and households impacted by domestic violence.

Additionally, the FY 2025 budget allows for an increase in the services cap for each Permanent Supportive Housing allocation, from \$10,000 to \$15,000 per household for up to 2,653 households. This funding primarily pays for direct services staff who support clients with housing navigation, healthcare navigation, income acquisition, eviction prevention and other individualized, flexible, tenant-driven services. This increase in services has been identified as a priority by multiple stakeholder groups, including the Community Shelter Strategy Workgroup, and is a response to the rise in acuity among people experiencing chronic homelessness. The increase in services cap funding will help people be successful in their housing placements.

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Supportive Housing</b>						
30400A	Supportive Housing		866,750	20,081,756	20,948,506	14.00
30400C	Supportive Housing - Local Bond Units and Site-Based Commitments		0	14,509,785	14,509,785	0.00
30400D	Supportive Housing - Tenant-Based Commitments		0	15,473,785	15,473,785	0.00
30400E	Supportive Housing - System Support		0	2,464,039	2,464,039	0.00
30400F	Supportive Housing - Local Bond Units and Site-Based Commitments - SHS Expansion		0	2,747,410	2,747,410	0.00
30401A	Supportive Housing - Behavioral Health/Medical Housing		0	4,302,920	4,302,920	0.00
30401B	Supportive Housing - Behavioral Health/Medical Housing - Service Coordination Team		0	2,590,380	2,590,380	0.00
30402	Supportive Housing - Local Long Term Rental Vouchers		399,635	721,280	1,120,915	0.00
30403	Supportive Housing - Families		795,420	2,183,395	2,978,815	1.00

# Joint Office of Homeless Services

## FY 2025 Adopted Budget

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
30404	Supportive Housing - Youth		0	1,524,645	1,524,645	0.00
30405	Supportive Housing - Domestic Violence		0	925,635	925,635	0.00
30406	Supportive Housing - Frequent Users Systems Engagement		0	2,261,370	2,261,370	0.00
30999	Supportive Housing Services Revenue for Other Departments		<u>0</u>	<u>0</u>	<u>0</u>	<u>0.00</u>
<b>Total Supportive Housing</b>			<b>\$2,061,805</b>	<b>\$69,786,400</b>	<b>\$71,848,205</b>	<b>15.00</b>

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**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

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

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

This program offer supports a range of supporting housing programs. Supporting housing programs combine rent assistance with intensive wraparound services. 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. Supportive housing programs can be limited duration or long-term, but all include wraparound support services. These housing strategies are nationally recognized best practices, and leverage other State and local resources. The JOHS holds achieving racial equity as a core goal, and eliminating disparate rates of homelessness on the basis of race and ethnicity is a focus for supportive housing programs.

**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.

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. In alignment with these priorities, this program offer funds both supportive housing programming and “Moving On” programming for households who no longer need intensive services, The “Moving On” program is based on nationally recognized best practices to support 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.

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.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of people enrolled in permanent or transitional housing programs	1,315	1,210	1,260	1,356
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	1,283	1,340	1,220	1,220
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing	84%	85%	84%	85%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$1,638,573	\$0	\$2,210,123
Contractual Services	\$2,060,020	\$7,560,674	\$823,580	\$16,906,025
Materials & Supplies	\$0	\$0	\$43,170	\$0
Internal Services	\$0	\$0	\$0	\$965,608
<b>Total GF/non-GF</b>	<b>\$2,060,020</b>	<b>\$9,199,247</b>	<b>\$866,750</b>	<b>\$20,081,756</b>
<b>Program Total:</b>	<b>\$11,259,267</b>		<b>\$20,948,506</b>	
<b>Program FTE</b>	0.00	11.00	0.00	14.00

Program Revenues				
Intergovernmental	\$0	\$11,374,247	\$0	\$17,542,981
Beginning Working Capital	\$0	\$0	\$0	\$2,538,775
<b>Total Revenue</b>	<b>\$0</b>	<b>\$11,374,247</b>	<b>\$0</b>	<b>\$20,081,756</b>

Explanation of Revenues

This program generates \$965,608 in indirect revenues. County General fund plus \$2,538,775 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, \$16,295,366 of the FY 2025 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$1,247,615 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 2024: 30400A Supportive Housing

This program offer contains an additional 1.00 FTE that will provide supervisory support to increase effectiveness of the contracting process and coordinating outcomes and outputs from contractors. It also contains 2.00 FTE to ensure more effective service delivery and implementation of Supportive Housing Services programs.

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

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

**Related Programs:**

**Program Characteristics:**

### Executive Summary

This program offer funds support services and/or rental subsidies for affordable housing units. This program offer uses Metro Supportive Housing Services Measure (SHS) funding to fund supportive services and rent assistance for people living in 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. The Joint Office of Homeless Services (JOHS) holds achieving racial equity as a core goal, and eliminating disparate rates of homelessness on the basis of race and ethnicity is a focus for supportive housing programs.

### Program Description

The Multnomah County Local Implementation Plan (LIP) for SHS sets out a range of strategies to reduce homelessness, including increasing permanent housing and wrap around services for those experiencing, or at risk of, chronic homelessness and episodic homelessness. The LIP strategies also prioritize eliminating racial disparities among people experiencing chronic and episodic homelessness.

Multnomah County’s LIP has a goal to create more than 2,200 supportive housing units over ten years. This program offer funds support services and, in some cases, rental subsidies for more than 700 new supportive housing units and more than 50 additional Homeless Preference 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. Services are specialized to serve various sub-populations and include, but are not limited to, culturally specific, mental health, substance use, physical health, HIV/AIDS, Veterans, and individualized retention services.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of people newly placed or retained in permanent housing	495	645	540	788
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing	85%	80%	85%	85%
Output	BIPOC placed or retained rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes

### Performance Measures Descriptions

This offer includes a mix of buildings that are operating with buildings that will be operating during FY 2024 or at the beginning of FY 2025. These buildings starting operations will allow the county to place more people into permanent housing.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$10,102,775	\$0	\$14,509,785
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$10,102,775</b>	<b>\$0</b>	<b>\$14,509,785</b>
<b>Program Total:</b>	<b>\$10,102,775</b>		<b>\$14,509,785</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$8,537,675	\$0	\$14,509,785
<b>Total Revenue</b>	<b>\$0</b>	<b>\$8,537,675</b>	<b>\$0</b>	<b>\$14,509,785</b>

Explanation of Revenues

\$14,509,785 of the FY 2025 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 2024: 30400C Supportive Housing - Local Bond Units and Site-Based Commitments

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program offer funds tenant-based permanent supportive housing (PSH) programs that launched between FY 2022 and FY 2024. 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. This offer uses Metro Supportive Housing Services Measure (Measure) funding that is dedicated to reducing homelessness through strategies that lead with racial equity. This aligns with the JOHS core goal of achieving racial equity, and eliminating disparate rates of homelessness on the basis of race and ethnicity is a focus for supportive housing programs.

**Program Description**

In alignment with priorities outlined in Multnomah County’s SHS Measure Local Implementation Plan, this program offer funds more than 400 tenant-based permanent supportive housing (PSH) opportunities. 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.

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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of people newly placed or retained in permanent housing	192	400	430	440
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing	100%	80%	100%	85%*
Output	BIPOC placed or retained rate as high or higher than percent of HUD homeless population	Yes	Yes	Yes	Yes

**Performance Measures Descriptions**

\*This offer includes Tenant-Based Permanent Supportive Housing programs that are in their first year of operation.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$11,868,035	\$0	\$15,473,785
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$11,868,035</b>	<b>\$0</b>	<b>\$15,473,785</b>
<b>Program Total:</b>	<b>\$11,868,035</b>		<b>\$15,473,785</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$12,183,035	\$0	\$15,473,785
<b>Total Revenue</b>	<b>\$0</b>	<b>\$12,183,035</b>	<b>\$0</b>	<b>\$15,473,785</b>

Explanation of Revenues

\$15,473,785 of the FY 2025 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 2024: 30400D Supportive Housing - Tenant-Based Commitments

**Department:** Joint Office of Homeless Services

**Program Contact:** Daniel Field

**Program Offer Type:** Operating

**Program Offer Stage:** Adopted

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

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, along with strategies to recruit and support affordable housing operators and private market landlords who partner with service providers to create supportive housing opportunities, including a risk mitigation program.

**Program Description**

The Multnomah County Local Implementation Plan (LIP) for the Metro Supportive Housing Services Measure (SHS) 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.

This 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 also funds a landlord recruitment and retention team and a risk mitigation program. The landlord team partners with private market landlords to create supportive housing opportunities for RLRA voucher holders who face high barriers to finding housing. The risk mitigation program reimburses partnering landlords and property owners for eligible expenses such as excessive damages and operational losses. Both of these programs are designed to expand and support landlord partnerships and support housing placement and retention for households exiting homelessness. Additionally, this program offer includes investment toward a future rent guarantee for 15 site based supportive housing unit project.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Outcome	Number of landlords engaged*	N/A	100	100	200
Outcome	Number of ongoing landlord partnerships**	N/A	N/A	N/A	40

**Performance Measures Descriptions**

In FY 2024, measure complete: Landlord recruitment and retention program launched

\*The FY 2024 Budgeted and FY 2024 Estimate was in initial design and launch phase. The FY 2025 Offer reflects the expectation that it will be fully operational by the beginning of FY 2025, which will account for the increase.

\*\*This measure was updated from "Number of providers of culturally-specific services that receive supportive housing technical assistance". that ended in FY 2024.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$1,658,265	\$0	\$1,997,780
Unappropriated & Contingency	\$0	\$303,439	\$0	\$466,259
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,961,704</b>	<b>\$0</b>	<b>\$2,464,039</b>
<b>Program Total:</b>	<b>\$1,961,704</b>		<b>\$2,464,039</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$2,433,970	\$0	\$1,997,780
Beginning Working Capital	\$0	\$303,439	\$0	\$466,259
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,737,409</b>	<b>\$0</b>	<b>\$2,464,039</b>

Explanation of Revenues

\$466,259 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$1,997,780 of the FY 2025 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 2024: 30400E Supportive Housing - System Support

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

**Program Offer Type:** Operating      **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/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 190 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 2024 and the end of FY 2025.

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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of people newly placed or retained in permanent housing*	N/A	N/A	N/A	40
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing	N/A	N/A	N/A	85%
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

\*This offer includes projects that are expected to come online by the end of FY 2025. The FY 2025 offer is based on the number of PSH units across those projects that we expect to lease-up before the end of FY 2025. At full implementation, this offer will support 202 PSH units.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$0	\$0	\$2,747,410
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,747,410</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$2,747,410</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$2,747,410
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,747,410</b>

Explanation of Revenues

\$2,747,410 of the FY 2025 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:** Daniel Field

**Program Offer Type:** Operating      **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) Continuum of Care (CoC) programs, Medicaid, affordable housing units and permanent rental subsidies to support vulnerable adults experiencing homelessness to secure and retain permanent housing. In some cases, the program offer provides match funding for a HUD CoC 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 Service Coordination Team (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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of people enrolled in permanent housing programs*	1,082	800	1,161	625
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	713	600	711	600
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing	68%	75%	68%	75%

**Performance Measures Descriptions**

\*The FY 2025 Offer reflects decrease in funding; the City of Portland will not pass through HOPWA funding.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$2,709,750	\$0	\$4,302,920
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,709,750</b>	<b>\$0</b>	<b>\$4,302,920</b>
<b>Program Total:</b>	<b>\$2,709,750</b>		<b>\$4,302,920</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$2,999,295	\$0	\$4,302,920
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,999,295</b>	<b>\$0</b>	<b>\$4,302,920</b>

Explanation of Revenues

\$3,148,890 of the FY 2025 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$1,154,030 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 2024: 30401A Supportive Housing - Behavioral Health/Medical Housing

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

**Program Offer Type:** Operating      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
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	76%	70%	70%	70%
Outcome	Number of individuals transitioned to permanent housing	13	15	15	15
Outcome	BIPOC graduate from SCT at rates as high or higher than Non-Hispanic whites	No	Yes	Yes	Yes

### Performance Measures Descriptions

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$2,507,628	\$0	\$2,590,380
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,507,628</b>	<b>\$0</b>	<b>\$2,590,380</b>
<b>Program Total:</b>	<b>\$2,507,628</b>		<b>\$2,590,380</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$2,507,628	\$0	\$2,525,160
Beginning Working Capital	\$0	\$0	\$0	\$65,220
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,507,628</b>	<b>\$0</b>	<b>\$2,590,380</b>

Explanation of Revenues

\$65,220 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$2,525,160 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 2024: 30401A Supportive Housing - Behavioral Health/Medical Housing

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program offer funds a local long-term voucher program that is narrowly tailored to households with fixed incomes, including many households who reside in tax credit or other regulated affordable housing, to improve housing stability and reduce rent burden. 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. 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).

The local long-term voucher functions more flexibly than other Federal voucher programs 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of households enrolled in permanent housing programs	58	40	60	55
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	58	40	60	55

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$442,414	\$440,810	\$399,635	\$721,280
<b>Total GF/non-GF</b>	<b>\$442,414</b>	<b>\$440,810</b>	<b>\$399,635</b>	<b>\$721,280</b>
<b>Program Total:</b>	<b>\$883,224</b>		<b>\$1,120,915</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$440,810	\$0	\$721,280
<b>Total Revenue</b>	<b>\$0</b>	<b>\$440,810</b>	<b>\$0</b>	<b>\$721,280</b>

Explanation of Revenues

County General fund plus \$721,280 of the FY 2025 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 2024: 30402 Supportive Housing - Local Long Term Rental Vouchers

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

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

**Related Programs:**

**Program Characteristics:**

### Executive Summary

This program offer funds longer-term rent assistance and wrap around support services to help move families from homelessness into permanent housing. The Joint Office of Homeless Services (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. Supportive housing strategies are nationally recognized best practices and can leverage existing market-rate and new affordable housing. The JOHS holds achieving racial equity as a core goal, and eliminating disparate rates of homelessness on the basis of race and ethnicity is a focus of programming.

### 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of families placed into or retained in permanent housing	66	75	60	95
Outcome	Percentage of people not returning to homeless services within a year of exiting a program to housing	79%	80%	79%	80%
Outcome	BIPOC placed or retained 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	2024	2024	2025	2025
Personnel	\$0	\$135,798	\$0	\$152,773
Contractual Services	\$770,009	\$960,175	\$795,420	\$1,963,875
Internal Services	\$0	\$0	\$0	\$66,747
<b>Total GF/non-GF</b>	<b>\$770,009</b>	<b>\$1,095,973</b>	<b>\$795,420</b>	<b>\$2,183,395</b>
<b>Program Total:</b>	<b>\$1,865,982</b>		<b>\$2,978,815</b>	
<b>Program FTE</b>	0.00	1.00	0.00	1.00

Program Revenues				
Intergovernmental	\$0	\$1,095,973	\$0	\$2,183,395
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,095,973</b>	<b>\$0</b>	<b>\$2,183,395</b>

Explanation of Revenues

This program generates \$66,747 in indirect revenues.  
 County General fund plus \$2,183,395 of the FY 2025 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 2024: 30403 Supportive Housing - Families

This program added an additional 1.00 limited duration appointment to ensure adequate oversight and support of all JOHS services contracting and procurement efforts.

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

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 (RLRA) 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. The Joint Office of Homeless Services (JOHS) holds achieving racial equity as a core goal, and eliminating disparate rates of homelessness on the basis of race and ethnicity is a focus of programming.

**Program Description**

The Multnomah County Local Implementation Plan (LIP) for the Metro Supportive Housing Services (SHS) 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 tenant-based PSH opportunities and provides FTE for on-going support services. In keeping with racial equity goals, BIPOC youth are prioritized for access to this resource.

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. Additional programming will be offered, leveraging federal funding, to support 24 chronically homeless youth with long-term rental assistance and wrap around, culturally specific supportive services.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of youth newly placed or retained in permanent housing	31	30	30	54
Outcome	Percentage of youth not returning to homeless services within a year of exiting a program to housing	100%	80%	100%	80%
Outcome	BIPOC placed or retained 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	2024	2024	2025	2025
Contractual Services	\$0	\$978,570	\$0	\$1,524,645
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$978,570</b>	<b>\$0</b>	<b>\$1,524,645</b>
<b>Program Total:</b>	<b>\$978,570</b>		<b>\$1,524,645</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$978,570	\$0	\$1,524,645
<b>Total Revenue</b>	<b>\$0</b>	<b>\$978,570</b>	<b>\$0</b>	<b>\$1,524,645</b>

Explanation of Revenues

\$1,524,645 of the FY 2025 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 2024: 30404 Supportive Housing - Youth

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program offer funds tenant-based permanent supportive housing (PSH) for survivors and children fleeing domestic violence or experiencing homelessness as a result of an incident of domestic and/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) for the Metro Supportive Housing Services (SHS) Measure 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 24 tenant-based permanent supportive housing (PSH) opportunities, along with staff capacity to deliver the critical support 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 and sexual violence specific PSH programming designed to meet the needs of BIPOC communities.

The programs funded through this program offer leverage rental assistance through the Regional Long-term Rent Assistance (RLRA) program administered by Home Forward, and all other supportive services are 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of people newly placed or retained in permanent housing*	N/A	18	12	24
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 FY 2025 Offer reflects additional funded capacity.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$632,625	\$0	\$925,635
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$632,625</b>	<b>\$0</b>	<b>\$925,635</b>
<b>Program Total:</b>	<b>\$632,625</b>		<b>\$925,635</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$632,625	\$0	\$925,635
<b>Total Revenue</b>	<b>\$0</b>	<b>\$632,625</b>	<b>\$0</b>	<b>\$925,635</b>

Explanation of Revenues

\$925,635 of the FY 2025 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 2024: 30405 Supportive Housing - Domestic Violence

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program offer funds a pilot project that will connect people experiencing, or at imminent risk of, chronic homelessness, who are also struggling within multiple systems (e.g. health, criminal justice, social services). The pilot project provides participants with the long-term rental assistance and support services they need to end their homelessness. In providing permanent supportive housing to this population, the program 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 Metro Supportive Housing Services (SHS) Measure is to improve coordination among the many systems that touch the lives of people experiencing chronic homelessness. Too often, these systems 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 involves a collaboration between the Department of County Human Services (DCHS), the Health Department, the Department of Community Justice (DCJ), 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Maintain a by-name list of people with frequent contacts in the health, criminal justice and homeless services svst	1	1	1	1
Outcome	Number of FUSE individuals placed or retained in permanent supportive housing**	N/A	40	5	40
Output	Number of FUSE individuals enrolled in permanent supportive housing program**	N/A	40	5	40

**Performance Measures Descriptions**

\*List was created in FY 2024. In FY 2025, will maintain and update list and use list to monitor programmatic outcomes.

\*\*This program was designed through a collaboration between JOHS, DCHS, the Health Department, DCJ and Health Share of Oregon in FY 2024. The program will begin implementation in FY 2024 and will fully ramp up in FY 2025.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$1,085,550	\$0	\$2,261,370
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,085,550</b>	<b>\$0</b>	<b>\$2,261,370</b>
<b>Program Total:</b>	<b>\$1,085,550</b>		<b>\$2,261,370</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,085,550	\$0	\$2,261,370
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,085,550</b>	<b>\$0</b>	<b>\$2,261,370</b>

Explanation of Revenues

\$2,261,370 of the FY 2025 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 2024: 30406 Supportive Housing - Frequent Users Systems Engagement

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

**Program Offer Type:** Revenue/Fund Level/Tech      **Program Offer Stage:** Adopted

**Related Programs:**

**Program Characteristics:**

### Executive Summary

In May 2020, voters in the greater Portland area passed Measure 26-210, known commonly as, The Supportive Housing Services (SHS) Measure, to fund services for people experiencing or at risk of homelessness. SHS funds Clackamas, Multnomah and Washington Counties to reduce homelessness and is administered by Metro. The Joint Office of Homelessness Services (JOHS) administers the funds received through SHS and pass through revenue to other departments within The County, in a one county approach to address Homelessness in Multnomah County.

### Program Description

The Supportive Housing Services (SHS) Measure presented the JOHS and the homeless systems of care with financial, programmatic and policy opportunities, and innovation for a ten year time span. This opportunity has strengthened local community partners and multi-jurisdictional relationships around a common vision in addressing the homelessness crisis.

The goals of SHS within the Metro are:

- Emergency services such as outreach and shelter
- Placement into housing
- Help paying rent (both emergency and long-term rent assistance)
- Advocacy and case management
- Services in the areas of mental health, physical health, language and culture needs, education, employment, addiction and recovery, tenant rights and others.

JOHS uses this offer to separate out the revenue being utilized in other departments from the bulk of the other JOHS offers that utilize SHS funding within the department. These fund were passed onto the Non Departmental Offices, Department of County Human Services, Health Department, and the Department of Community Justice

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output		N/A	N/A	N/A	N/A
Outcome		N/A	N/A	N/A	N/A

### Performance Measures Descriptions

JOHS uses this offer to separate out the revenue being utilized in other departments from the bulk of the other JOHS offers that utilize SHS funding within the department.

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	\$0	\$8,747,505	\$0	\$27,288,128
Beginning Working Capital	\$0	\$202,669	\$0	\$9,024,683
<b>Total Revenue</b>	<b>\$0</b>	<b>\$8,950,174</b>	<b>\$0</b>	<b>\$36,312,811</b>

Explanation of Revenues

\$9,024,683 carryover from the FY 2024 Supportive Housing Services (SHS) allocation to Multnomah County through the SHS Intergovernmental Agreement (IGA) with Oregon Metro Regional Government, and \$27,288,128 of the FY 2025 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:

## Strategic Capital Investments

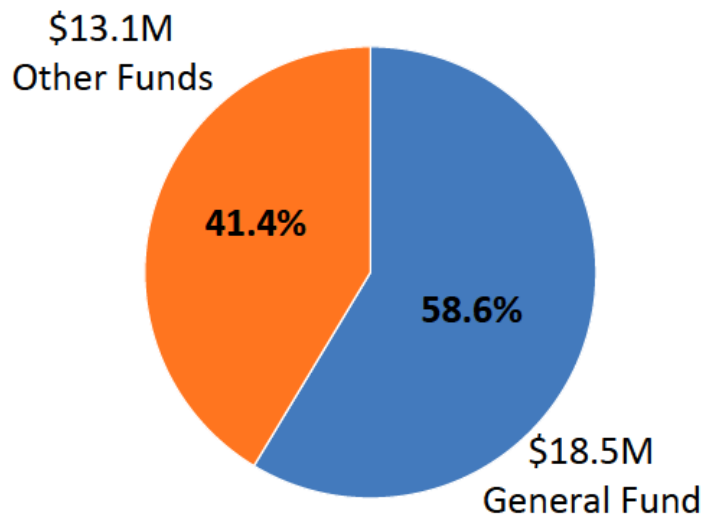
This division provides capital funding for the Joint Office of Homeless Services (JOHS) to continue developing high quality, year-round shelter capacity for multiple populations, equitably distributed across the County. In FY 2024, Multnomah County and the City of Portland launched the Homelessness Response Action Plan (HRAP), a strategic reset of homeless services. As part of this plan, the JOHS developed a Community Sheltering Strategy in partnership with service providers and partners from the City of Portland and the City of Gresham. This Community Sheltering Strategy proposes adding and replacing emergency shelter units to the existing shelter system by the end of 2025.

**\$31.6 million**

**Strategic Capital Investments**

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.





### Significant Division Changes

The division includes \$17.5 million of new one-time only County funding which provides the necessary capital resources to continue the acquisition and development of year around alternative shelter sites and necessary improvements to new and existing shelters.

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Strategic Capital Investments</b>						
30208A	Safety off the Streets - Emergency Shelter Strategic Investment		0	13,050,000	13,050,000	0.00
30208B	Safety off the Streets - Emergency Shelter Strategic Investment Expansion	X	17,500,000	0	17,500,000	0.00
30208C	Safety off the Streets - Emergency Shelter Strategic Investment - Shelter NOFA	X	<u>1,000,000</u>	<u>0</u>	<u>1,000,000</u>	<u>0.00</u>
<b>Total Strategic Capital Investments</b>			<b>\$18,500,000</b>	<b>\$13,050,000</b>	<b>\$31,550,000</b>	<b>0.00</b>

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program allocates 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. This program offer allocates of one-time capital funds that will be used to create, improve, and maintain congregate, motel, and alternative shelter programs.

After an initial rapid expansion of emergency shelter capacity in available locations, the JOHS is using an equity lens to lead 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. 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.

This offer also funds some capital expenses related to severe weather shelter. 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.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of prospective new shelter sites identified and assessed for feasibility of purchase and development	52	30	60	30
Outcome	Initiate and continue development of shelter sites	4	5	5	5
Outcome	Shelter site design reflects input from people with lived experience, especially from BIPOC	1	1	4	4

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Capital Outlay	\$0	\$0	\$0	\$13,050,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$13,050,000</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$13,050,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Beginning Working Capital	\$0	\$0	\$0	\$13,050,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$13,050,000</b>

Explanation of Revenues

\$13,050,000 carryover from 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 2024: 30208A Safety off the Streets - Emergency Shelter Strategic Investment

This program offer allocates balances of one-time capital funds allocated by the SHS in FY 2024 for shelter development funding package. Significant additional resources were allocated to permanently expanding the Joint Office's emergency shelter system. The balance of those resources is included in the FY 2025 budget to fund further site development(s).

**Department:** Joint Office of Homeless Services      **Program Contact:** Donald Green

**Program Offer Type:** Capital      **Program Offer Stage:** Adopted

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

**Executive Summary**

This offer provides capital funding for the Joint Office of Homeless Services (JOHS) to continue developing high quality, year-round shelter capacity for multiple populations, equitably distributed across the County. This offer allocates funding for new shelter sites under the Homeless Response Action Plan (HRAP) and Phase one of the FY 2024 - FY 2026 Community Sheltering Strategy.

**Program Description**

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. In FY 2024, Multnomah County and the City of Portland launched the Homelessness Response Action Plan (HRAP), a strategic reset of homeless services. As part of this plan, the JOHS developed a Community Sheltering Strategy in partnership with service providers and partners from the City of Portland and the City of Gresham. This Community Sheltering Strategy proposes adding and replacing emergency shelter units to the existing shelter system by the end of 2025. This offer provides capital funding to support Phase 1 of this strategy, including maintenance of existing shelters and siting and development of new shelter sites.

As part of the HRAP and Community Sheltering Strategy, 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of prospective new sites identified and assessed for feasibility of purchase and development.	N/A	N/A	N/A	15
Output	Initiate and continue development of shelter sites.	N/A	N/A	N/A	5
Outcome	Shelter site design reflects input from people with lived experience, especially from BIPOC.	N/A	N/A	N/A	5

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Cash Transfers	\$0	\$0	\$17,500,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$17,500,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$17,500,000</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, cash transfer to JOHS Capital fund 2519 in DCA program 78243.

Significant Program Changes

Last Year this program was:

**Department:** Joint Office of Homeless Services      **Program Contact:** Daniel Field

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

**Related Programs:**
**Program Characteristics:** New Request, One-Time-Only Request, In Target

**Executive Summary**

This shelter expansion funding offer provides additional operating funding for the Joint Office of Homeless Services (JOHS) to continue developing high quality, year-round shelter capacity for multiple populations, equitably distributed across the County. This offer allocates funding for new shelter units under the Homeless Response Action Plan (HRAP) and Phase one of the FY 2024 - FY 2026 Community Sheltering Strategy.

**Program Description**

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. Emergency shelter and associated emergency services are vital to protecting the basic health and safety of individuals experiencing homelessness, particularly older adults and those with disabling conditions. Shelters are critical locations for people to be safe while learning about and accessing the services they need to find permanent housing and receive necessary healthcare. Most adult shelters have priority access for women, veterans, those with disabilities and those ages 55 and older. This program provides additional operating resources to continue the development of year round shelter sites that meet this commitment.

The funds in this offer will support the operations for at least 30 new shelter units. In FY 2024, Multnomah County and the City of Portland launched the Homelessness Response Action Plan (HRAP), a strategic reset of homeless services. As part of this plan, the JOHS developed a Community Sheltering Strategy in partnership with service providers and partners from the City of Portland and the City of Gresham. This Community Sheltering Strategy proposes adding and replacing emergency shelter units to the existing shelter system by the end of 2025. This offer adds operational funding for 30 additional adult shelter units, in addition to the 90 additional adult units funded in other offers. As part of the HRAP and Community Sheltering Strategy, 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.

This funding is intended for existing or new shelter sites capable of rapidly increasing their shelter unit capacity.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of year-round emergency shelter units	N/A	N/A	N/A	30
Outcome	Number of people served in year-round emergency shelter	N/A	N/A	N/A	90

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$0	\$1,000,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,000,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$1,000,000</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:

\$1,000,000 reduced from 30208B for Shelter Capital to fund this program offer for Shelter NOFA funding.

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### Department Overview

Multnomah County Health Department is the largest health department and safety net provider in Oregon. It acts as both the Local Public Health Authority (LPHA) and Local Mental Health Authority (LMHA), and operates the largest Federally Qualified Health Center (FQHC) program in the state. It is also the statutory health provider for people living in carceral settings in the County. The Health Department is the only health entity that is responsible for the health of everyone who calls Multnomah County home (more than 800,000 people) as well as those who visit.

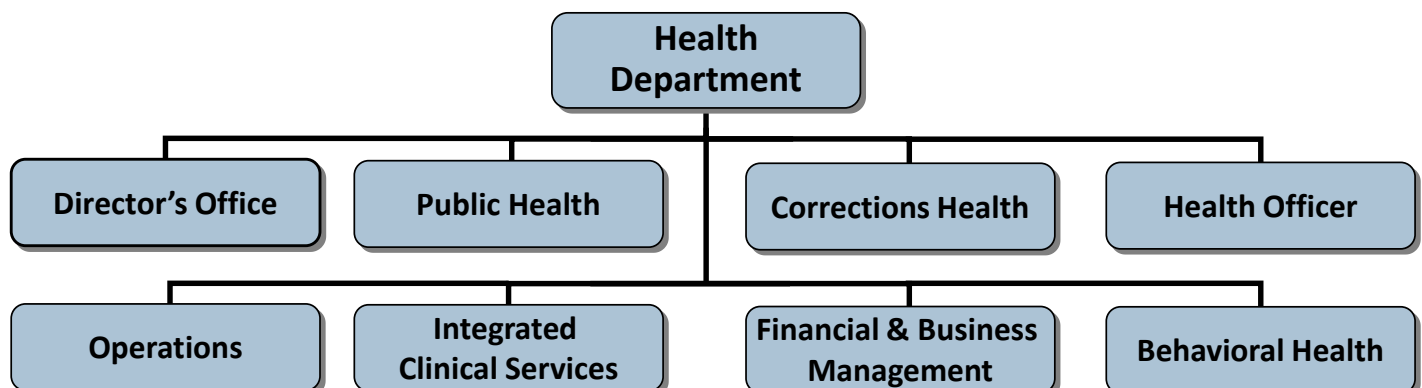
Health Department work is anchored in the vision of *"Thriving communities that nurture the health and resilience of all"* and the mission that *"We work with communities to advance health equity, protect the most vulnerable, and promote health and wellness for everyone."*

We advance our mission and vision by leading with an approach that is data-driven, community-centered, and equity-focused. Through our many programs, service lines, and policy strategies, we aim to support transformational change across the life course for individuals. In this way, we can improve the health of the entire population while still focusing on ending unfair health inequities.

Our Health Department acknowledges Oregon's history of colonialism and the pervasive impacts of racism on people across our County. Racism and its systemic expressions cause, perpetuate, and widen health inequities and disparities in health outcomes. We continue our active commitment to accelerating our progress towards eliminating these inequities.

We provide high-quality care to our most vulnerable populations. These include people who are impacted by or vulnerable to homelessness, people housed in the County's jails and juvenile detention center, and people facing severe and complex behavioral health challenges, including those impacted by substance use disorder, among others.

Our core values affirm our commitment to serve with compassion and care, further connection and belonging, lead with integrity, uplift community-driven solutions, and accelerate our progress in eliminating racial inequities.



# \$612.0 million

## Total Adopted Budget

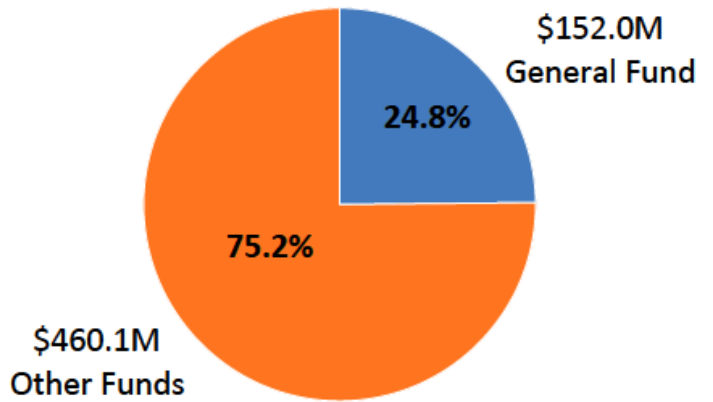
Includes cash transfers, contingencies, and unappropriated balances.

**1,696.31 FTE**  
Total Adopted Staffing



**99.11 FTE**

Increase from  
FY 2024 Adopted



**\$110.1 million**



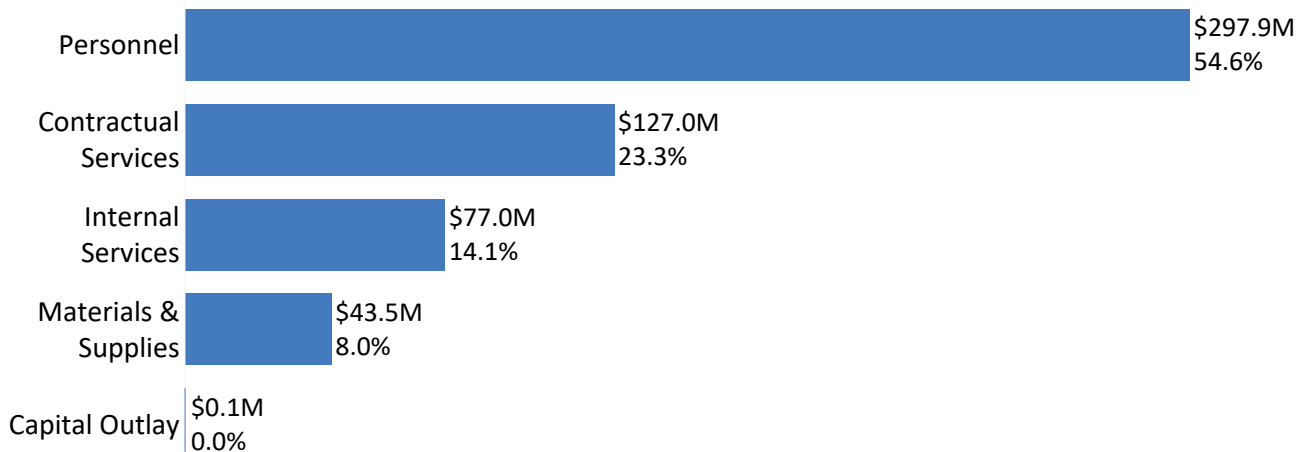
All Funds Increase from  
FY 2024 Adopted

**22% increase**

General Fund  
**\$4.5 million**  
New **One-Time-Only** Programs  
**\$1.5 million**  
New **Ongoing** Programs

## Operating Budget by Category - \$545.5 million

Does not include cash transfers, contingencies, and unappropriated balances



The department's total budget is its legal budget, totaling \$612.0 million in FY 2025. The County is required by Oregon Budget Law to report the budget at this level, although doing it this way overstates what we actually plan to spend on programming because it includes unappropriated balances, contingencies, and cash transfers from one fund to another. Program offers reflect the total budget.

This budget document will often focus on the operating budget (a subset of the total budget) because that number avoids some double counting and provides a clearer picture of what the department expects to spend in a year. The operating budget excludes unappropriated balances, contingencies, and cash transfers. The table below shows the amounts that add up to the department's total budget.

<b>FY 2025 Health Budget</b>	
<b>Operating Budget</b>	<b>545,465,024</b>
Contingency (All Funds)	16,479,108
Internal Cash Transfers	2,502,343
Reserves (Unappropriated Balances)	<u>47,578,020</u>
<b>Total Budget</b>	<b>\$612,024,495</b>

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## Mission, Vision, and Values

Health Department work is anchored in the vision of "Thriving communities that nurture the health and resilience of all" and the mission that "We work with communities to advance health equity, protect the most vulnerable, and promote health and wellness for everyone."

Our core values affirm our commitment to serve with compassion and care, further connection and belonging, lead with integrity, uplift community-driven solutions, and accelerate our progress in eliminating racial inequities. Our values are:

### **Compassion and Care**

We treat all with kindness, dignity and respect as we seek to uplift one another's humanity.

### **Empowerment**

We work collaboratively to ensure that our policies and programs amplify people's voices and uplift community-driven solutions

### **Integrity**

In protecting our community's health, we lead with conviction, honor our commitments and deliver on our promises.

### **Racial Equity**

We acknowledge that racism negatively affects everyone in our county, and we commit to accelerating our progress in eliminating racial inequities.

### **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.

## Diversity, Equity, and Inclusion

Equity is embedded in the Health Department's mission, vision and values. It is at the forefront of the mission -- *We work with communities to advance health equity, protect the most vulnerable, and promote health and wellness for everyone.* And it is the foundation of the vision -- *Thriving communities that nurture the health and resilience of all.*

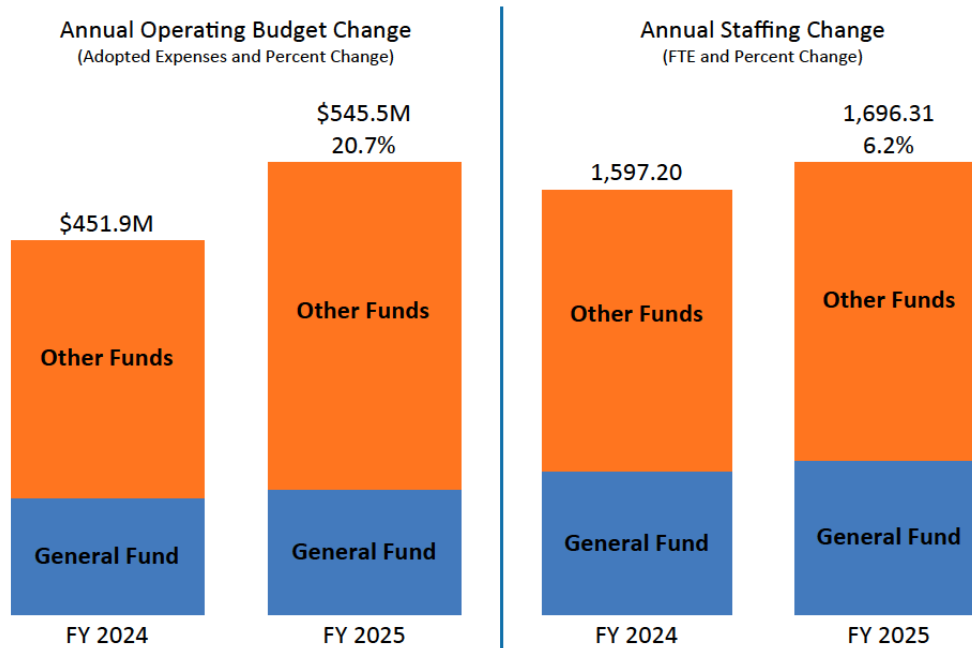
The Health Department strives to achieve both its vision and its mission by continually evaluating and refining internal and external equity-based programming and by integrating equity into all aspects of decision making.

As an embodiment of equity values, the Health Department implements many strategies and services to best meet people where they are geographically, physically and psychologically. Some of these strategies include:

- **Geographically meeting people where they are** - The Health Department meets patients and clients where they're at in many ways. For example, the Integrated Clinical Services (ICS) mobile van delivers health and dental services to people outside of our standing clinic settings and telehealth services bring Community Health Center care to patients who are unable to come into a standing clinic. The telehealth pilot program expanded care in Student Health Centers, and we have continued to integrate behavioral health services with physical health service delivery pathways. Across these platforms, services and materials are provided in the many languages in which clients are most comfortable.
- **Serving the most vulnerable** - The Health Department brings basic services and vital peer support to some of our most vulnerable neighbors. For example, the Behavioral Health Resource Center provides a low-barrier and trauma-informed space for people living outside to access basic services and connect with housing, addiction, mental health, and other services. The Corrections Health program provides medical, dental and behavioral health services to more than 30,000 people in custody annually. A disproportionate percentage of Multnomah County's communities of color are incarcerated, underscoring the need for an equity lens to deliver Corrections Health services.
- **Building community partnerships** - The Public Health Division's Community Partnership and Capacity Building (CPCB) program continues to build connections to better serve the diverse communities living in Multnomah County. For example, the program hosted its first-ever Partnership Fair with over 250 community members and staff that encouraged information sharing and further developed relationships with Health Department programs.
- **Fostering engagement** - The Behavioral Health Division's Office of Consumer Engagement centers the work of people with lived experience at the intersection of addiction, mental health challenges and houselessness. The CPCB program and the Office of Consumer Engagement are just two ways the Department works to uplift community voice and community solutions to guide its work, live its values and accomplish its mission.

### Budget Overview

The FY 2025 Health Department operating budget is \$545,465,024 million, a \$93.6 million (20.7%) increase from the FY 2024 Adopted budget. These amounts exclude cash transfers, contingencies or unappropriated balances. The General Fund accounts for 27.9% of the budget, and General Fund expenses increased by \$10.5 million (7.4%). Other Funds increased by \$83.0 million (26.8%).



The increase in Other Funds includes \$32.6 million (\$30.7 million from the State and \$1.9 million from the City of Portland) for a new deflection program (40000C). The Health Department’s budget also increased by \$17.9 million from Supportive Housing Services funding. Previously, the majority of this funding was in the Joint Office of Homeless Service’s (JOHS) budget.

The FY 2025 budget includes \$9.2 million for the Behavioral Health Resource Center (40105A/B). Of this amount, \$3.9 million is from the County General Fund, \$2.5 million is from Supportive Housing Services funds, and \$2.8 million is from federal and State funding. The State funding includes \$1.9 million of one-time-only grant funding. Although there is one-time-only funding being used in FY 2025, there will not be a funding gap in FY 2026 because the FY 2025 budget temporarily reallocates \$1.9 million of ongoing funding to the Ambulance Service Plan (40004B) and Restaurant Inspections Restoration (40007B) for a single year's one-time use. In FY 2026, this funding will be returned to the Behavioral Health Resource Center to keep the program whole.



The following table shows the new ongoing and one-time-only programs. This table, along with information on the Health Department’s reductions and reallocations for FY 2025, can be found in the Overview of Additions, Reductions, and Reallocations section of the Budget Director’s Message in Volume 1. In addition, the Budget Director’s Message contains a list of one-time-only programs for all departments.

### *New Ongoing and One-Time-Only Programs*

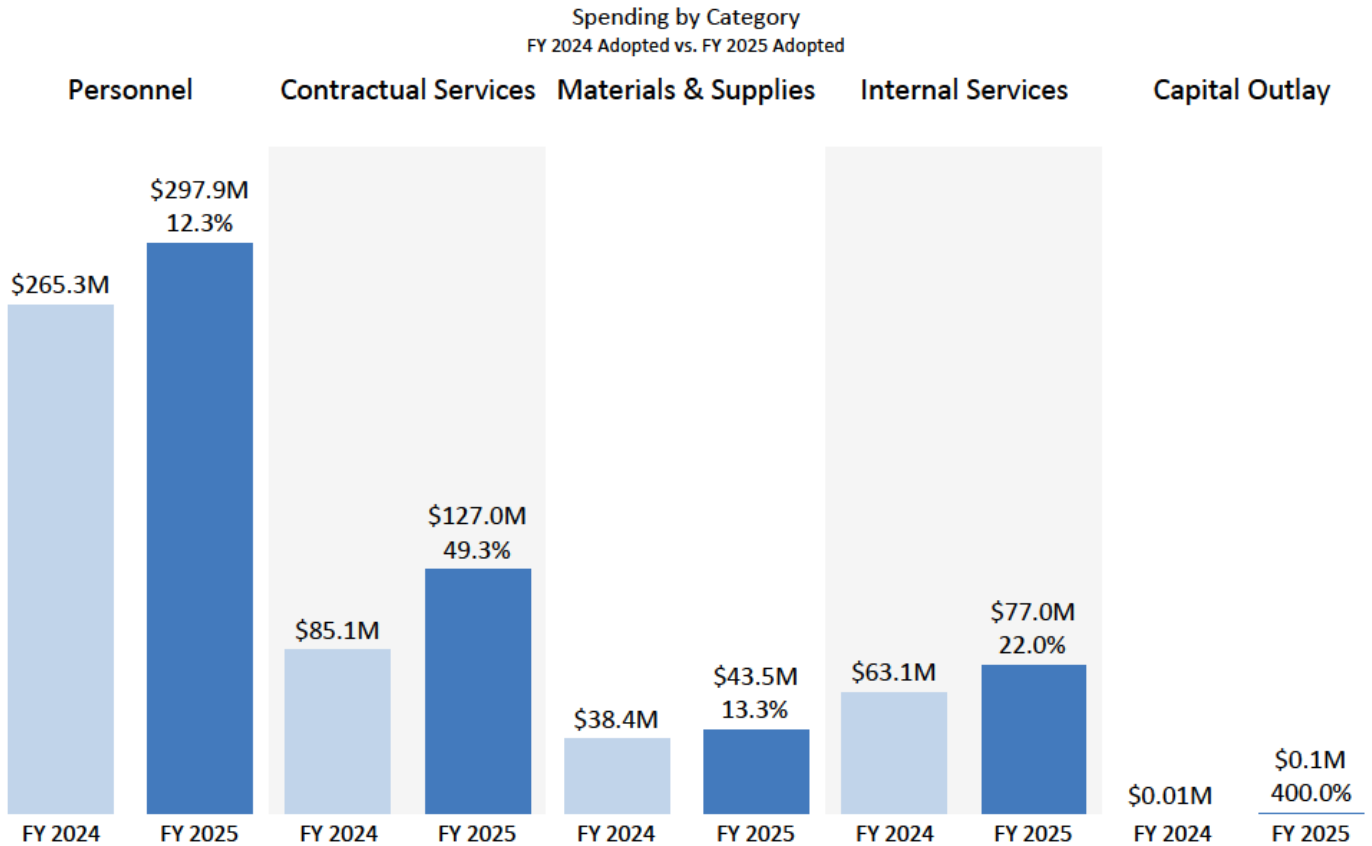
Prog. #	Program Offer Name	General Fund		
		Ongoing	OTO	FTE
<b>Health Department</b>				
40000B	Overdose Prevention & Response		1,302,776	4.00
40000D	Behavioral Health System Transformation - Comprehensive Local Plan		250,000	
40004B*	Ambulance Service Plan		756,768	
40007B*	Restaurant Inspections Restoration		1,153,733	8.00
40010E	Restore STD Clinic Services		350,000	
40037B	Gas Powered Leaf Blower Project	130,000	80,000	1.00
40044B	Supplemental Data Sets Partnership with DCA		400,000	
40045B	Corrections Health Infrastructure	192,910		1.00
40059B	Additional Corrections Health Behavioral Health Staff	325,410		2.00
40061C	Harm Reduction Street Outreach Team	816,904		6.00
40105C	Downtown Addiction Services Pilot		<u>170,749</u>	
<b>Health Total</b>		<b>\$1,465,224</b>	<b>\$4,464,026</b>	<b>22.00</b>

\*These programs were funded by reallocating the funds set aside to provide additional support while Integrated Clinical Services transitioned to their Enterprise Fund. Now that these ongoing funds are no longer needed, they are funding the Ambulance Service Plan (40004B) and Restaurant Inspections Restoration (40007B) one-time-only in FY 2025. In FY 2026 and beyond, these funds will be returned to the Behavioral Health Resource Center (40105A/B).

# Health Department

## FY 2025 Adopted Budget

The chart below provides a breakdown of the budget's expense categories from FY 2024 to FY 2025. Personnel services is the largest component of the Health Department's budget, while Contractual Services had a large percent increase between FY 2024 and FY 2025. The chart is followed by the Operating Budget Trends table, which details the changes.



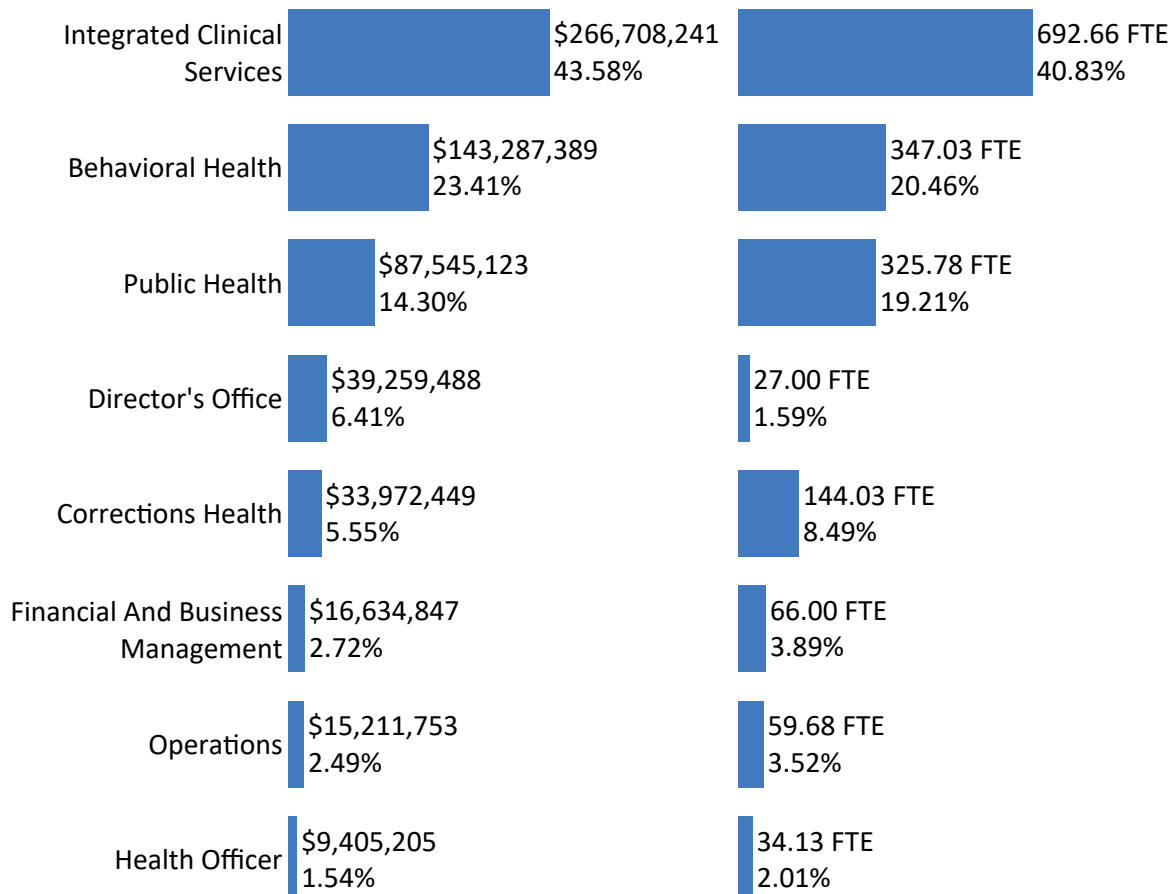
Operating Budget Trends	FY 2023	FY 2024	FY 2024	FY 2025	Difference
	Actual	Current Estimate	Adopted Budget	Adopted Budget	
Staffing FTE	1,607.52	1,597.20	1,597.20	1,696.31	99.11
Personnel Services	216,529,440	240,572,331	265,314,609	297,885,231	32,570,622
Contractual Services	93,656,671	86,728,994	85,079,858	127,040,342	41,960,484
Materials & Supplies	36,937,847	40,351,871	38,373,921	43,493,177	5,119,256
Internal Services	56,330,955	63,290,961	63,130,433	76,996,274	13,865,841
Capital Outlay	2,437,435	189,717	10,000	50,000	40,000
<b>Total Costs</b>	<b>\$405,892,348</b>	<b>\$431,133,874</b>	<b>\$451,908,821</b>	<b>\$545,465,024</b>	<b>\$93,556,203</b>

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

### Budget by Division

Division Name	General Fund	Other Funds	Total Division Cost	Total FTE
Director's Office	5,704,004	33,555,484	39,259,488	27.00
Operations	13,949,252	1,262,501	15,211,753	59.68
Financial and Business Management	16,634,847	0	16,634,847	66.00
Health Officer	7,324,452	2,080,753	9,405,205	34.13
Public Health	39,468,127	48,076,996	87,545,123	325.78
Integrated Clinical Services	0	266,708,241	266,708,241	692.66
Corrections Health	33,635,609	336,840	33,972,449	144.03
Behavioral Health	<u>35,244,094</u>	<u>108,043,295</u>	<u>143,287,389</u>	<u>347.03</u>
<b>Total Health Department</b>	<b>\$151,960,385</b>	<b>\$460,064,110</b>	<b>\$612,024,495</b>	<b>1,696.31</b>

*Includes cash transfers, contingencies and unappropriated balances*



### Table of All Program Offers

The following table shows the programs by division that make up the department's total budget. The individual programs follow, grouped by division.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Director's Office</b>						
40000A	Health Department Director's Office		4,151,228	990,332	5,141,560	21.00
40000B	Overdose Prevention & Response	X	1,302,776	0	1,302,776	4.00
40000C	Deflection Program		0	32,565,152	32,565,152	2.00
40000D	Behavioral Health System Transformation - Comprehensive Local Plan	X	<u>250,000</u>	<u>0</u>	<u>250,000</u>	<u>0.00</u>
	<b>Total Director's Office</b>		<b>\$5,704,004</b>	<b>\$33,555,484</b>	<b>\$39,259,488</b>	<b>27.00</b>
<b>Operations</b>						
40039A	Human Resources		5,327,750	891,505	6,219,255	28.88
40039B	Human Resources - ICS Recruitment		167,093	0	167,093	1.00
40044A	Health Data and Analytic Team		3,527,009	199,881	3,726,890	7.00
40044B	Supplemental Data Sets Partnership with DCA	X	400,000	0	400,000	0.00
40046	Health Operations Administration		<u>4,527,400</u>	<u>171,115</u>	<u>4,698,515</u>	<u>22.80</u>
	<b>Total Operations</b>		<b>\$13,949,252</b>	<b>\$1,262,501</b>	<b>\$15,211,753</b>	<b>59.68</b>
<b>Financial &amp; Business Management</b>						
40003	Health Department Facilities, Safety and Administrative Support		342,203	0	342,203	2.00
40040	Financial and Business Management Services		11,061,675	0	11,061,675	37.00
40041	Medical Accounts Receivable		2,214,953	0	2,214,953	12.00
40042	Contracts & Procurement		<u>3,016,016</u>	<u>0</u>	<u>3,016,016</u>	<u>15.00</u>
	<b>Total Financial &amp; Business Management</b>		<b>\$16,634,847</b>	<b>\$0</b>	<b>\$16,634,847</b>	<b>66.00</b>
<b>Health Officer</b>						
40002	Tri-County Health Officer		875,956	407,544	1,283,500	1.94
40004	Ambulance Services (Emergency Medical Services)		2,590,410	1,354,495	3,944,905	13.80
40004B	Ambulance Service Plan	X	756,768	0	756,768	0.00
40005	Public Health & Regional Health Systems Emergency Preparedness		62,789	318,714	381,503	1.39
40052	Medical Examiner		<u>3,038,529</u>	<u>0</u>	<u>3,038,529</u>	<u>17.00</u>
	<b>Total Health Officer</b>		<b>\$7,324,452</b>	<b>\$2,080,753</b>	<b>\$9,405,205</b>	<b>34.13</b>
<b>Public Health</b>						
40001	Public Health Administration and Quality Management		2,085,202	468,221	2,553,423	11.70

# Health Department

## FY 2025 Adopted Budget

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
40006	Tobacco Prevention and Control		835,321	1,492,094	2,327,415	11.18
40007A	Health Inspections and Education		6,106,491	34,973	6,141,464	29.65
40007B	Restaurant Inspections Restoration	X	1,153,733	0	1,153,733	8.00
40008	Vector-Borne Disease Prevention and Code Enforcement		2,537,934	0	2,537,934	12.10
40009	Vital Records		0	954,381	954,381	5.22
40010A	Communicable Disease Prevention and Control		2,073,644	2,948,945	5,022,589	18.10
40010B	Communicable Disease Clinical and Community Services		2,230,377	4,182,487	6,412,864	25.07
40010C	Communicable Disease Community Immunization Program		0	1,828,517	1,828,517	8.62
40010D	Supportive Housing Services for Communicable Disease Clients - Supportive Housing Services	X	0	337,033	337,033	1.00
40010E	Restore STD Clinic Services	X	350,000	0	350,000	0.00
40011	Services for Persons Living with HIV - Regional Education and Outreach		109,817	6,252,664	6,362,481	5.80
40018	Women, Infants, and Children (WIC)		3,539,043	4,561,344	8,100,387	47.80
40037	Environmental Health Community Programs		826,868	2,206,705	3,033,573	11.58
40037B	Gas Powered Leaf Blower Project		210,000	0	210,000	1.00
40048	Community Epidemiology		1,684,954	4,288,278	5,973,232	22.36
40053	Racial and Ethnic Approaches to Community Health		1,124,804	2,141,440	3,266,244	8.02
40054	Nurse Family Partnership Restoration		1,157,133	1,837,235	2,994,368	10.20
40055	Home and Community Based Consulting		117,685	595,023	712,708	3.80
40056	Healthy Families		1,100,965	3,572,645	4,673,610	6.00
40058	Healthy Birth Initiative		1,883,361	2,376,323	4,259,684	16.25
40060	Community & Adolescent Health		1,816,943	1,431,973	3,248,916	15.70
40061A	Harm Reduction		2,156,924	3,041,921	5,198,845	9.58
40061B	Harm Reduction - Opioid Settlement Investment		269,228	0	269,228	1.45
40061C	Harm Reduction Street Outreach Team		816,904	0	816,904	6.00
40096	Public Health Office of the Director		3,829,203	3,282,027	7,111,230	23.60
40097	Parent, Child, and Family Health Management		<u>1,451,593</u>	<u>242,767</u>	<u>1,694,360</u>	<u>6.00</u>
<b>Total Public Health</b>			<b>\$39,468,127</b>	<b>\$48,076,996</b>	<b>\$87,545,123</b>	<b>325.78</b>

# Health Department

## FY 2025 Adopted Budget

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Integrated Clinical Services</b>						
40012	FQHC-HIV Clinical Services		0	8,455,267	8,455,267	34.05
40016	FQHC-Medicaid/Medicare Eligibility		0	3,140,745	3,140,745	19.00
40017	FQHC-Dental Services		0	32,623,255	32,623,255	122.09
40019	FQHC-North Portland Health Clinic		0	6,601,064	6,601,064	27.10
40020	FQHC-Northeast Health Clinic		0	7,554,641	7,554,641	29.30
40022	FQHC-Mid County Health Clinic		0	15,073,375	15,073,375	59.15
40023	FQHC-East County Health Clinic		0	12,839,744	12,839,744	49.90
40024	FQHC-Student Health Centers		0	9,295,660	9,295,660	34.10
40026	FQHC-La Clinica de Buena Salud		0	4,664,893	4,664,893	14.50
40027	FQHC-Southeast Health Clinic		0	6,635,714	6,635,714	29.20
40029	FQHC-Rockwood Community Health Clinic		0	8,633,611	8,633,611	28.10
40030	FQHC-Clinical Director		0	2,025,779	2,025,779	3.00
40031	FQHC-Pharmacy		0	43,762,437	43,762,437	62.73
40032	FQHC-Lab and Medical Records		0	5,002,790	5,002,790	22.17
40033	FQHC-Primary Care and Dental Access and Referral		0	5,588,101	5,588,101	31.00
40034A	FQHC-Administration and Operations		0	14,501,495	14,501,495	55.40
40034B	FQHC - Contingency and Reserves	X	0	64,057,128	64,057,128	0.00
40036	FQHC-Community Health Council and Civic Governance		0	504,144	504,144	1.00
40102	FQHC Allied Health		0	8,081,636	8,081,636	44.47
40103	FQHC-Quality Assurance		0	7,666,762	7,666,762	26.40
<b>Total Integrated Clinical Services</b>			<b>\$0</b>	<b>\$266,708,241</b>	<b>\$266,708,241</b>	<b>692.66</b>
<b>Corrections Health</b>						
40043	Corrections Health Dental		698,273	0	698,273	2.40
40045	Corrections Health Operations		3,818,817	0	3,818,817	16.23
40045B	Corrections Health Infrastructure		192,910	0	192,910	1.00
40047	Corrections Health Transition Services		1,537,134	336,840	1,873,974	13.40
40049	Corrections Health Juvenile Clinical Services		2,274,679	0	2,274,679	9.20
40050	Corrections Health Multnomah County Detention Center (MCDC) Clinical Services		10,605,430	0	10,605,430	41.70
40051	Corrections Health Inverness Jail (MCIJ) Clinical Services		9,503,815	0	9,503,815	37.05
40059A	Corrections Health Behavioral Health Services		4,679,141	0	4,679,141	21.05

# Health Department

## FY 2025 Adopted Budget

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
40059B	Additional Corrections Health Behavioral Health Staff		325,410	0	325,410	2.00
	<b>Total Corrections Health</b>		<b>\$33,635,609</b>	<b>\$336,840</b>	<b>\$33,972,449</b>	<b>144.03</b>
<b>Behavioral Health</b>						
40065	Behavioral Health Division Administration		2,615,336	1,695,185	4,310,521	15.58
40067	Medical Records for Behavioral Health Division		257,050	655,239	912,289	5.75
40068	Behavioral Health Quality Management		1,531,359	6,044,499	7,575,858	24.82
40069A	Behavioral Health Crisis Services		733,638	17,443,088	18,176,726	34.20
40069B	Old Town Inreach - Supportive Housing Services		0	1,100,000	1,100,000	0.00
40069C	Behavioral Health Crisis Services - Supportive Housing Services	X	0	1,570,911	1,570,911	1.00
40070	Mental Health Crisis Assessment & Treatment Center (CATC)		617,425	0	617,425	0.00
40071	Behavioral Health Division Adult Protective Services		1,524,920	276,563	1,801,483	10.00
40072	Mental Health Commitment Services		2,040,962	3,148,690	5,189,652	24.60
40073	Peer-run Supported Employment Center		124,844	0	124,844	0.00
40074A	Mental Health Residential Services		1,392,104	8,449,119	9,841,223	12.10
40074B	Mental Health Residential Services - Supportive Housing Services		0	667,160	667,160	0.00
40075	Choice Model		0	5,334,764	5,334,764	15.32
40077	Mental Health Treatment & Medication for the Uninsured		733,984	0	733,984	0.00
40078A	Early Assessment & Support Alliance		430,087	3,382,647	3,812,734	16.40
40078B	Early Assessment and Support Alliance (EASA) COVID-19 Stimulus Funding		0	133,333	133,333	1.00
40080	Community Based Mental Health Services for Children & Families		781,404	343,162	1,124,566	5.35
40080B	Gun Violence Impacted Families Behavioral Health Team	X	1,222,614	0	1,222,614	5.00
40081	Multnomah County Care Coordination		0	15,442,893	15,442,893	58.68
40082	School Based Mental Health Services		3,457,000	3,070,080	6,527,080	33.74
40083	Behavioral Health Prevention Services		293,987	345,592	639,579	3.30
40084A	Culturally Specific Mental Health Services		2,162,817	0	2,162,817	0.00
40084B	Culturally Specific Mobile Outreach and Stabilization Treatment Program		815,908	0	815,908	0.00

# Health Department

## FY 2025 Adopted Budget

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
40084C	Culturally Specific Mobile Outreach and Stabilization Treatment Program- Supportive Housing Services		0	542,325	542,325	0.00
40085A	Adult Addictions Treatment Continuum		2,402,116	9,236,196	11,638,312	6.40
40085B	Adult Addictions Treatment Continuum - Supportive Housing Services		0	2,258,689	2,258,689	0.00
40086	Addiction Services Gambling Treatment & Prevention		0	1,751,344	1,751,344	3.20
40087	Addiction Services Alcohol & Drug Prevention		0	406,751	406,751	0.35
40088	Coordinated Diversion for Justice Involved Individuals		1,641,292	5,971,597	7,612,889	30.20
40089	Addictions Detoxification & Post Detoxification Housing		1,539,894	1,144,850	2,684,744	1.65
40090	Family & Youth Addictions Treatment Continuum		122,850	160,054	282,904	0.00
40091	Family Involvement Team		36,968	328,062	365,030	0.00
40099A	Early Childhood Mental Health Program		1,932,702	717,628	2,650,330	13.01
40099B	Preschool For All Early Childhood Mental Health		0	1,845,165	1,845,165	10.98
40101A	Promoting Access To Hope (PATH) Care Coordination Continuum		702,581	594,503	1,297,084	8.20
40101B	Promoting Access To Hope (PATH) Care Coordination Continuum - Supportive Housing Services		0	1,011,589	1,011,589	4.70
40105A	Behavioral Health Resource Center (BHRC) - Day Center		3,017,819	2,273,427	5,291,246	1.50
40105B	Behavioral Health Resource Center (BHRC) - Shelter/Housing		891,684	2,974,650	3,866,334	0.00
40105C	Downtown Addiction Services Pilot	X	170,749	0	170,749	0.00
40108	BHECN - Behavioral Health Emergency Coordinating Network		2,050,000	0	2,050,000	0.00
40112	Shelter and Housing - Supportive Housing Services		0	7,723,540	7,723,540	0.00
<b>Total Behavioral Health</b>			<b>\$35,244,094</b>	<b>\$108,043,295</b>	<b>\$143,287,389</b>	<b>347.03</b>
<b>Total Health Department<sup>1</sup></b>			<b>\$151,960,385</b>	<b>\$460,064,110</b>	<b>\$612,024,495</b>	<b>1,696.31</b>

<sup>1</sup> Includes cash transfers, contingencies, and unappropriated balances.



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### 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, partners, health systems, community members and staff to ensure that department services advance health equity and promote health and wellness for everyone in Multnomah County.

The Director's Office is responsible for ensuring that the Department meets its strategic objectives and health outcomes while fostering a culture that supports a diverse and qualified workforce. The Director's Office is the Health Department's primary liaison to federal, state, county and local elected officials. The Director works with other County departments and community partners to foster 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 systems partners, and governmental agencies to provide health care services to improve health across the region.

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 inequities in communities of color and other communities impacted by health, social, and economic inequities.

The Director's team 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.

# \$39.3 million

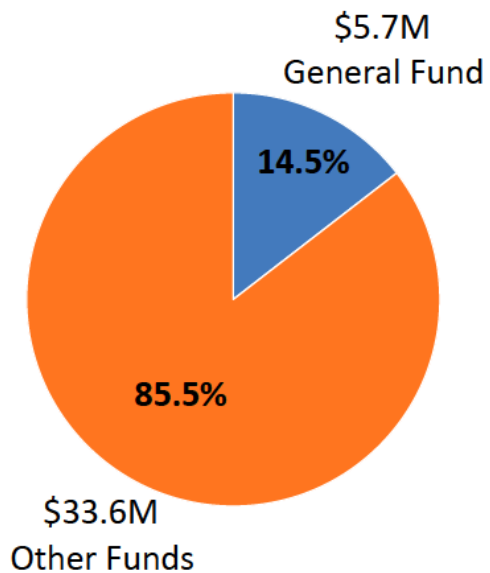
### Director's Office Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.



## 27.00 FTE

(full time equivalent)



### Significant Division Changes

The Director’s Office will oversee the work of the CDC Strengthening Public Health Infrastructure & Workforce grant. This grant is an investment that supports critical public health infrastructure needs of health departments across the United States. All work done as part of this grant is grounded in these key principles: Data and evidence driven planning; implementation; and partnerships.

The Director’s Office oversees the department-wide work of the Overdose Prevention and Response Plan. The plan involves the full substance use and addiction services continuum in an effort to reduce health inequities and prioritize people unfairly impacted by oppression and exclusion. New funding will add capacity for substance use prevention activities focused on youth and their families, harm reduction strategies related to naloxone distribution and training, and data modernization for surveillance of overdose and drug supply trends.

A new request for deflection center funding appropriates funds granted to the County by the State of Oregon and the City of Portland for the express purpose of developing a deflection program. Activities funded under this program offer will be aligned with Oregon House Bill 4002, and will aid in the coordination of the many systems addressing the region's severe drug crisis.

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Director’s Office</b>						
40000A	Health Department Director's Office		4,151,228	990,332	5,141,560	21.00
40000B	Overdose Prevention & Response	X	1,302,776	0	1,302,776	4.00
40000C	Deflection Program		0	32,565,152	32,565,152	2.00
40000D	Behavioral Health System Transformation - Comprehensive Local Plan	X	<u>250,000</u>	<u>0</u>	<u>250,000</u>	<u>0.00</u>
	<b>Total Director’s Office</b>		<b>\$5,704,004</b>	<b>\$33,555,484</b>	<b>\$39,259,488</b>	<b>27.00</b>

**Department:** Health Department      **Program Contact:** Rachael Banks  
**Program Offer Type:** Administration      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

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.

**Program Description**

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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 the Health Department's primary liaison to Federal, State, County and local elected officials. The Director works with other County departments and community partners to foster 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 systems partners, and local agencies to provide health care services to improve 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.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# of employees engaged in All Staff meetings and events.	500	500	600	650
Outcome	Annual Federal and State resources \$ leveraged for strategic investments (expressed in millions).	\$282 Mil	\$252 Mil	300 Mil	300 Mil

**Performance Measures Descriptions**

## 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	2024	2024	2025	2025
Personnel	\$2,574,257	\$0	\$3,268,051	\$847,090
Contractual Services	\$2,054,881	\$0	\$491,789	\$0
Materials & Supplies	\$108,936	\$0	\$94,045	\$0
Internal Services	\$249,617	\$0	\$297,343	\$143,242
<b>Total GF/non-GF</b>	<b>\$4,987,691</b>	<b>\$0</b>	<b>\$4,151,228</b>	<b>\$990,332</b>
<b>Program Total:</b>	<b>\$4,987,691</b>		<b>\$5,141,560</b>	
<b>Program FTE</b>	14.00	1.00	16.00	5.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$990,332
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$990,332</b>

## Explanation of Revenues

This program generates \$143,242 in indirect revenues.  
 \$820,510 - Strengthen Public Health Infrastructure & Workforce  
 \$169,822 - Strengthen Public Health Infrastructure Grant

## Significant Program Changes

**Last Year this program was:** FY 2024: 40000A Health Department Director's Office

The Health Department Director's Office adds four new FTE in FY 2025. These positions include a Manager II, who will provide supervision and oversight for the office, while also serving as the key liaison with the County Board and Chair's Office. Other key positions include a Project Manager to enhance the Strategy and Grant Development Team, a Health Policy Analyst Sr., and a Represented Project Manager to support and coordinate change management efforts departmentwide. The Director's Office now also includes a the existing Health Department Deputy Director, which was moved from Financial and Business Management to provide policy guidance for the department as a whole.

**Department:** Health Department      **Program Contact:** Rachael Banks

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

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

**Executive Summary**

The Health Department’s Overdose Prevention and Response Plan builds on our existing body of work, engaging the full substance use and addiction service continuum to reduce health inequities and prioritize people unfairly impacted by oppression and exclusion. This program offer will add capacity for substance use prevention activities focused on youth and their families, harm reduction strategies related to naloxone distribution and training, and data modernization for surveillance of overdose and drug supply trends.

**Program Description**

While building from our existing body of work, the Health Department’s Overdose Prevention and Response Plan directly addresses gaps in available prevention, harm reduction, treatment, recovery services, and infrastructure. The scope of this program offer expands our capacity in the following areas:

Prevention efforts will educate and support BIPOC, LGBTQ2SIA+, and other priority youth and families to prevent the use and misuse of drugs, and the development of substance use disorders. This program offer will support staff and contracts in Behavioral Health and Public Health to expand partnerships with County leadership, multisectoral partners (including CBOs and faith-based), schools, community members, and people with lived experience; provide technical assistance, financial support, educational resources, and toolkits to partners to implement prevention activities; and coordinate culturally specific forums and communications.

Harm reduction strategies related to naloxone distribution and training are critical to curbing overdose deaths. This program offer will support a staff member to act as a central Departmental resource for coordinating naloxone distribution and training within County and community sites; a staff to increase naloxone training and technical assistance for County and community sites; and the purchase of naloxone. Key County stakeholders will include libraries and other sites where the public is accessing services.

Data modernization for surveillance of overdose and drug supply trends will enable the Department to respond to rapid changes to the drug supply, drug use behaviors, risk factors, and overdoses, including emerging disparities within BIPOC communities, to appropriately respond and prevent loss of life. This program offer will reduce data delays in toxicology results by expediting toxicology results and purchasing drug testing equipment to support a real-time overdose data dashboard and associated reports, briefs, etc. The Department will also work with stakeholders to identify permanent solutions related to data delays.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# of new partners who implement prevention initiatives	N/A	N/A	N/A	6
Outcome	% of overdoses with a 30 day or less turnaround time for toxicology results	N/A	N/A	N/A	75%
Output	# of substance use prevention training/technical assistance sessions conducted	N/A	N/A	N/A	10
Output	# of naloxone kits distributed	N/A	N/A	N/A	3,500

**Performance Measures Descriptions**

Measure 2: Baseline for CY 2023 is 1.8%.

Measure 3: this measure includes naloxone trainings, as well as community forums, presentations, etc.

Measure 4: the Department distributes over 80,000 naloxone kits annually. This measure is specific to the naloxone kits purchased as part of this program offer.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$0	\$547,776	\$0
Contractual Services	\$0	\$0	\$540,000	\$0
Materials & Supplies	\$0	\$0	\$165,000	\$0
Capital Outlay	\$0	\$0	\$50,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,302,776</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$1,302,776</b>	
<b>Program FTE</b>	0.00	0.00	4.00	0.00

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

Explanation of Revenues

Significant Program Changes

Last Year this program was:

**Department:** Health Department      **Program Contact:** Rachael Banks  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** New Request

**Executive Summary**

This program offer appropriates funds granted to the County by the State of Oregon and the City of Portland for the express purpose of developing, at a minimum, a deflection program. Multnomah County is implementing House Bill 4002, which made significant changes to Measure 110 with a focus on the timelines in the legislation. These changes will affect many systems within the county and among jurisdictional partners. The County is also working to open sobering services as a part of a new 24/7 drop off receiving and sobering center. HB 4002 Investments in the FY 2025 budget will support the county's work to implement a deflection program by September 1, 2024 and collaborate with inter-governmental partners and law enforcement to share definitions, eligibility and expectations.

**Program Description**

Per HB 4002, a deflection program is a collaborative program between law enforcement agencies and behavioral health entities that assists individuals who may have substance use disorder, another behavioral health disorder or co-occurring disorders, to create community-based pathways to treatment, recovery support services, housing, case management or other services outside of the justice system. Multnomah County will clearly articulate the phasing of its response to this new law and ongoing need for sobering services and connections to withdrawal management, treatment, recovery, and other services. Implementation will happen through partnership with justice and law enforcement partners, behavioral health providers, other jurisdictional partners, internal county departments, and the Local Public Safety Coordinating Council. The FY 2025 budget appropriates \$26.9 million of state and City funding for the development of a 24/7 drop off receiving and sobering center. Activities funded under this program will aid in the coordination of the many systems designed to address the region's severe drug and alcohol abuse crisis. These funds, along with additional state dollars, will also support initial tracking and assessment of the impacts of this new law on the community, with particular regard to racial disparities and disparate impacts for historically marginalized groups. The Health Department will work in collaboration with the Department of Community Justice and County leadership to develop the necessary services and structures to ensure that individuals have access to resources that support treatment and recovery and that enhance community safety.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Open drop off center by September 1, 2024	0	0	0	1
Output	Participation in countywide deflection program planning/coordination meetings and Sobering Services L	0	0	0	100%
Output	Provide Board with quarterly updates on the drop center and opening of permanent sobering services location	0	0	0	4

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$0	\$0	\$2,196,389
Contractual Services	\$0	\$0	\$0	\$30,132,634
Internal Services	\$0	\$0	\$0	\$236,129
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$32,565,152</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$32,565,152</b>	
<b>Program FTE</b>	0.00	0.00	0.00	2.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$32,565,152
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$32,565,152</b>

Explanation of Revenues

This program generates \$236,129 in indirect revenues.  
 State: \$25 million - Intergovernmental, Direct State  
 \$1.9 million - Intergovernmental, Direct Other from the City of Portland  
 State: \$3,865,152 State Improving People’s Access to Community-based Treatment (IMPACT)  
 State: \$1,800,000 County Financial Assistance Agreement

Significant Program Changes

Last Year this program was:

**Department:** Health Department      **Program Contact:** Rachael Banks

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

**Related Programs:**

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

**Executive Summary**

The Health Department’s Behavioral Health Division (BHD) is designated as the Community Mental Health Program (CMHP). One CMHP responsibility is to have a Comprehensive Local Plan (CLP) for the delivery of behavioral health services. The Health Department submitted an interim CLP to the Oregon Health Authority in May 2024. Over the next several months, the Department will lead a process that will include the Board of County Commissioners, Coordinated Care Organizations, people with lived experience and expertise, and other partners to coordinate, identify gaps, and finalize Multnomah County’s CLP.

**Program Description**

Counties in Oregon are required to determine the need for local behavioral health services and have a comprehensive local plan (CLP) for the delivery of those services. On May 28, 2024, the Health Department submitted an interim CLP to the Oregon Health Authority and communicated an intent to develop a more robust CLP within six months. In its role as the Community Mental Health Program (CMHP), the Department will lead this work to produce a CLP that charts a vision for an improved behavioral health system, including what is needed to achieve that vision and how the work will be implemented.

As a foundation for this work, the Department will build upon the in-depth mental health systems and funding analysis led by District 1 Commissioner Sharon Meieran’s office. This study and steering committee process, conducted between 2018 - 2022, produced the Blueprint for Better Behavioral Health. Combined with recent departmental strategic planning and the interim CLP, this work provides a strong basis from which to build a CLP that is informed by community and supports Multnomah County in asserting the roles as a convener and source of accountability for the local behavioral health services continuum of care.

The Department will develop an enhanced CLP by October 2024 to be reviewed with behavioral health system partners, consumers, and the Board of Commissioners. A final CLP is expected to be completed in December 2024. Key activities will include: reviewing and crosswalking existing plans for Coordinated Care Organizations, Blueprint for Better Behavioral Health, and other strategic planning documents; clarifying roles and responsibilities for the Local Mental Health Authority (LMHA) and CMHP; a data-driven needs assessment; and creating and implementing a framework for community engagement. This program offer provides capacity to finalize the CLP through research, epidemiology, and project management staffing and contractual services.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Outcome	CLP submitted to OHA in December 2024	N/A	N/A	N/A	1
Output	# of planning sessions with behavioral health entities	N/A	N/A	N/A	5
Output	# of updates to BOCC	N/A	N/A	N/A	3

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$0	\$121,581	\$0
Contractual Services	\$0	\$0	\$128,419	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$250,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$250,000</b>	
Program FTE	0.00	0.00	0.00	0.00

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

Explanation of Revenues

Significant Program Changes

Last Year this program was:

### Operations

The Operations Division provides foundational support to the entire Health Department focusing on: appropriate messaging to diverse communities, enhancing employee experiences and employee retention, heightening readiness for emergencies, increasing policy compliance, mapping quality outcomes, reinforcing privacy and HIPAA protections, and improving timely, equitable, and efficient hiring. In addition the division is a key contributor for the stewardship of the Workforce Equity Strategic Plan (WESP) in the Health Department. The imperatives laid out in the WESP guide the work of the division from planning through tactics, especially for employee relations, learning and development and communications. Division teams include the following:

- **Human Resources(HR) and Health Maintaining** provides expertise, leadership, and consultation for hiring, transfers, and promotions. This team supports all staff through the lifecycle 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 **Employee Relations** team responds to complaints, investigates workplace conduct issues, and provides expert consultation on various HR matters making their subject matter experts a pivotal team in performance management. As the primary liaison with labor unions, they facilitate crucial meetings that foster communication between management and union representatives. The team ensures compliance with state law by conducting Oregon Equal Pay analyses and interprets labor contracts, guiding decisions in complex personnel matters mitigating department liability.
- The **Communications and Marketing** team crafts and distributes essential health information to diverse communities across Multnomah County. Working across the Health Department, this program manages campaigns and messaging through social media, print mailers, highly visible public education campaigns, paid advertising, and in brochures and guides. They provide essential services to all divisions, including graphic design, branding, website management, social media management, internal communications strategy, and video productions.

# \$15.2 million

### Operations

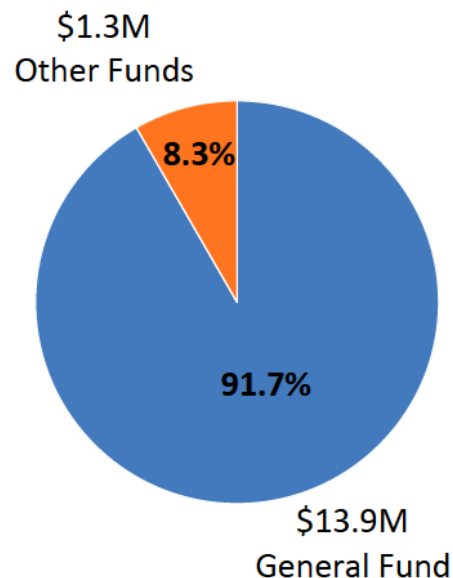
Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.



## 59.68 FTE

(full time equivalent)



- Data Governance and Quality Management** pursues departmental excellence by establishing a robust quality and compliance program, and promoting adherence to regulations. Through a commitment to continuous improvement, these programs spearhead strategic planning and administrative controls. These programs' collaboration across all Health Department divisions is vital and consistently delivers positive impacts on quality control/quality improvement findings throughout the Health Department's programs.

### Significant Division Changes

In FY 2025 resources in the Operations will support the Health Department's response to the fentanyl crisis and its larger portfolio of interventions included in the Overdose Prevention and Response Plan.

### Table of Division Programs

The following table shows the programs that make up the division's budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Operations</b>						
40039A	Human Resources		5,327,750	891,505	6,219,255	28.88
40039B	Human Resources - ICS Recruitment		167,093	0	167,093	1.00
40044A	Health Data and Analytic Team		3,527,009	199,881	3,726,890	7.00
40044B	Supplemental Data Sets Partnership with DCA	X	400,000	0	400,000	0.00
40046	Health Operations Administration		<u>4,527,400</u>	<u>171,115</u>	<u>4,698,515</u>	<u>22.80</u>
<b>Total Operations</b>			<b>\$13,949,252</b>	<b>\$1,262,501</b>	<b>\$15,211,753</b>	<b>59.68</b>

**Department:** Health Department      **Program Contact:** Steve Sutton  
**Program Offer Type:** Administration      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	% increase in diversity of workforce	2%	3%	1%	2%
Outcome	% increase in diversity of hires through the increased focus on diversity in recruitment strategies	-5%	3%	1%	2%
Output	Average days to fill active recruitments	N/A	N/A	N/A	90

**Performance Measures Descriptions**

The third measure is new this year.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$4,211,081	\$0	\$4,797,046	\$473,522
Contractual Services	\$8,252	\$0	\$8,557	\$0
Materials & Supplies	\$15,781	\$0	\$16,365	\$40,756
Internal Services	\$400,770	\$290,595	\$505,782	\$377,227
<b>Total GF/non-GF</b>	<b>\$4,635,884</b>	<b>\$290,595</b>	<b>\$5,327,750</b>	<b>\$891,505</b>
<b>Program Total:</b>	<b>\$4,926,479</b>		<b>\$6,219,255</b>	
<b>Program FTE</b>	24.88	0.00	26.88	2.00

Program Revenues				
Intergovernmental	\$0	\$290,595	\$0	\$891,505
<b>Total Revenue</b>	<b>\$0</b>	<b>\$290,595</b>	<b>\$0</b>	<b>\$891,505</b>

Explanation of Revenues

This program generates \$59,637 in indirect revenues.  
 \$412,308 - OPS Infrastructure Workforce  
 \$166,907 - Operations - Public Health Modernization  
 \$161,607 - State Behavioral Health Workforce Initiative (BHWi) - Human Resources  
 \$150,683 - Operations - Public Health Infrastructure

Significant Program Changes

Last Year this program was: FY 2024: 40039A Human Resources

**Department:** Health Department      **Program Contact:** Steven Sutton  
**Program Offer Type:** Administration      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of successful recruitments	N/A	20	20	25
Outcome	Reduction in vacancy days	N/A	30	70	30

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$152,753	\$0	\$167,093	\$0
<b>Total GF/non-GF</b>	<b>\$152,753</b>	<b>\$0</b>	<b>\$167,093</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$152,753</b>		<b>\$167,093</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 2024: 40039B Human Resources - ICS Recruitment

**Department:** Health Department**Program Contact:** Kathryn McKelvey**Program Offer Type:** Administration**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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of reports and/or requests created	130	420	420	450
Outcome	% of repeat customers for data & business intelligence	52%	52%	49%	52%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$944,664	\$159,504	\$1,098,910	\$170,970
Contractual Services	\$304,500	\$0	\$315,767	\$0
Materials & Supplies	\$1,867,431	\$0	\$1,936,526	\$0
Internal Services	\$148,982	\$0	\$175,806	\$28,911
<b>Total GF/non-GF</b>	<b>\$3,265,577</b>	<b>\$159,504</b>	<b>\$3,527,009</b>	<b>\$199,881</b>
<b>Program Total:</b>	<b>\$3,425,081</b>		<b>\$3,726,890</b>	
<b>Program FTE</b>	5.00	0.00	6.00	1.00

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

Explanation of Revenues

This program generates \$28,911 in indirect revenues.  
 \$199,881 Supportive Housing Services (SHS) Fund 1521 one-time-only funding. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

Significant Program Changes

Last Year this program was: FY 2024: 40044 Health Data and Analytic Team

**Department:** Health Department      **Program Contact:** Kathryn McKelvey  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 78334  
**Program Characteristics:** New Request, One-Time-Only Request

**Executive Summary**

The Health Department (HD) seeks to better leverage data to improve business decisions. Much of the data needed to improve internal processes and make strategic business decisions is not in a format that is accessible or ready for automation. If approved, this program will fund four Limited Duration IT staff who bring in and improve the key data sets required to strategically improve Health Department's operations and decision making. The goal is to increase the number of projects and requests IT will complete in FY 2025 related to these data sets.

**Program Description**

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

Data analysis in the Health Department serves as a powerful tool for advancing equity and racial justice. By uncovering hidden patterns and disparities in health outcomes across race and ethnicity, this analysis paints a clear picture of how systemic biases and injustices impact people's well-being. This knowledge isn't just statistics; it empowers the department to prioritize resources, target interventions, and advocate for policies that dismantle root causes of inequity.

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

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Health Department prioritized requests completed within 3 months	50%	90%	50%	75%
Outcome	Percent of Project Time on these supplemental datasets for these staff members	50%	55%	55%	55%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Internal Services	\$0	\$0	\$400,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$400,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$400,000</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 funds internal services expenses that fund services in the Department of County Assets' program offer 78334 Health - Supplemental Datasets for Analytics and Reporting. This is the third year of funding for this program.

**Department:** Health Department      **Program Contact:** Chantell Reed  
**Program Offer Type:** Administration      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# employees participated in leadership development:	101	80	140	80
Outcome	% applied leadership development to daily work	81	75	91	75
Output	# of people who saw any content from or about the Department web page including posts, stories, ads	1,041,878	1,000,000	1,200,000	1,500,000

**Performance Measures Descriptions**

## 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>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Personnel	\$3,491,486	\$0	\$4,072,694	\$146,364
Contractual Services	\$10,500	\$0	\$10,889	\$0
Materials & Supplies	\$113,057	\$0	\$117,240	\$0
Internal Services	\$262,769	\$0	\$326,577	\$24,751
<b>Total GF/non-GF</b>	<b>\$3,877,812</b>	<b>\$0</b>	<b>\$4,527,400</b>	<b>\$171,115</b>
<b>Program Total:</b>	<b>\$3,877,812</b>		<b>\$4,698,515</b>	
<b>Program FTE</b>	19.80	0.00	21.80	1.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$0	\$0	\$171,115
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$171,115</b>

## Explanation of Revenues

This program generates \$24,751 in indirect revenues.  
OPS Infrastructure Grant - \$171,115

## Significant Program Changes

Last Year this program was: FY 2024: 40046 Health Department Operations

### Financial and Business Management

Financial and business management services underpin the department's ability to achieve its mission. Its teams are the infrastructure required to effectively and responsibly manage the department's \$500+ 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 CFO's Office, Central Finance, the County Attorney and our internal services providers in the Department of County Assets. There were more than 16,000 invoices, 240,000 medical claims, and 900 contract and procurement actions during the 2023 fiscal year.

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 inequities. 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.

**\$16.6 million**

**Financial and Business Management**

Total Adopted Budget

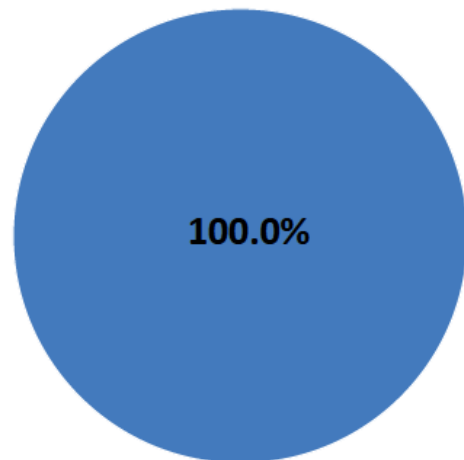
Including cash transfers, contingencies, and unappropriated balances.



**66.00 FTE**

(full time equivalent)

\$16.6M  
General Fund





### Significant Division Changes

FBM has recently experienced key leadership transitions in critical business functions; however, the division has avoided operational disruptions, and expanded services and capacity in key areas including financial reporting, project management and support for community partners during the procurement and contracting process.

The division’s Safety and Security leadership has led the development of new policies and practices to address ongoing concerns for staff, clients and community members.

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Financial and Business Management</b>						
40003	Health Department Facilities, Safety and Administrative Support		342,203	0	342,203	2.00
40040	Financial and Business Management Services		11,061,675	0	11,061,675	37.00
40041	Medical Accounts Receivable		2,214,953	0	2,214,953	12.00
40042	Contracts & Procurement		<u>3,016,016</u>	<u>0</u>	<u>3,016,016</u>	<u>15.00</u>
	<b>Total Financial and Business Management</b>		<b>\$16,634,847</b>	<b>\$0</b>	<b>\$16,634,847</b>	<b>66.00</b>

**Department:** Health Department      **Program Contact:** Derrick Moten

**Program Offer Type:** Administration      **Program Offer Stage:** Adopted

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

This program provides facilities, safety, and administrative support for the department and includes operations, safety support for the department and lobby and building support for the Health Department Headquarters, the Gladys McCoy Building.

**Program Description**

This team provides scheduling, meeting/event preparation, technical support, project management, and communication support. This team provides general office services, such as copying, travel and training coordination, supply orders, mailings, mail distribution, telephone, technology and equipment support, minutes, surveys, operation of the Department's main telephone and fax lines. The Facilities, Safety & Security Senior Strategist conducts safety planning, leads coordination with contracted security personnel and leads development and revisions of department safety and security policy. The Facilities, Safety & Security Senior Strategist works closely with the office of Workplace Security.

This team prioritizes customer service and building relationships with clients and community members. The team is committed to examining racially biased systems and processes to allow for equitable client access to department services and a welcoming and inclusive environment. The team 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.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# of Safety and Security Advisory Committee meetings held to address safety concerns reported by staff	5	12	12	12
Outcome	% of incidents that received a response/follow-up within 2 weeks of report submission	N/A	60%	N/A	60%

**Performance Measures Descriptions**

The annual number of safety and security advisory committee meetings. Regular meetings will ensure prompt and consistent follow-up on reported incidents.

The percentage of incidents that received a response or follow-up within 2 weeks of the incident report submission.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$215,059	\$0	\$253,105	\$0
Materials & Supplies	\$166	\$0	\$172	\$0
Internal Services	\$75,961	\$0	\$88,926	\$0
<b>Total GF/non-GF</b>	<b>\$291,186</b>	<b>\$0</b>	<b>\$342,203</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$291,186</b>		<b>\$342,203</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 2024: 40003 Health Department Facilities, Safety and Administrative Support

The division's Safety and Security leadership has led the development of new policies and practices to address ongoing concerns for staff, clients and community members. The new Safety and Security Advisory Committee started meeting in February 2023.

**Department:** Health Department      **Program Contact:** Derrick Moten  
**Program Offer Type:** Administration      **Program Offer Stage:** Adopted  
**Related Programs:** 40041, 40042  
**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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# of invoices processed	16,371	14,000	16,000	14,000
Outcome	Yearly average % of all cash receipts recorded in the month in which they were received.	98.4%	97%	99%	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	2024	2024	2025	2025
Personnel	\$6,350,316	\$0	\$6,632,145	\$0
Contractual Services	\$266,507	\$0	\$62,361	\$0
Materials & Supplies	\$431,881	\$0	\$411,229	\$0
Internal Services	\$2,926,770	\$0	\$3,955,940	\$0
<b>Total GF/non-GF</b>	<b>\$9,975,474</b>	<b>\$0</b>	<b>\$11,061,675</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$9,975,474</b>		<b>\$11,061,675</b>	
<b>Program FTE</b>	37.00	0.00	37.00	0.00

Program Revenues				
Other / Miscellaneous	\$16,302,398	\$0	\$22,091,393	\$0
<b>Total Revenue</b>	<b>\$16,302,398</b>	<b>\$0</b>	<b>\$22,091,393</b>	<b>\$0</b>

Explanation of Revenues

Departmental Indirect - \$22,091,393

Significant Program Changes

**Last Year this program was:** FY 2024: 40040A Financial and Business Management Services

The division's commitment to continuous quality improvement has resulted in the reduction of process bottlenecks, efficient automations, reduced errors, and improved performance on internal and external customer service metrics. FBM has recently experienced key leadership transitions in critical business functions; however, the division has avoided operational disruptions, and expanded services and capacity in key areas including financial reporting, project management and support for community partners during the procurement and contracting process. In FY 2025 a Division Director II position will be created to lead the division and the former Deputy Director position will be repurposed and moved to the Director's office.

**Department:** Health Department      **Program Contact:** Aline Blumenauer  
**Program Offer Type:** Administration      **Program Offer Stage:** Adopted  
**Related Programs:** 40040, 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of encounters processed for payment	244,032	210,000	232,000	210,000
Outcome	Percent of receivables aged (older than 90 days )	23%	33%	16%	33%
Quality	Average Days In Accounts Receivable	19	32	18	32

**Performance Measures Descriptions**

Number of encounters demonstrates the volume of work. Percent of receivables older than 90 days – is the % of total receivables that is over 90 days excluding self-pay balances. This measures the efficiency of collecting payments on older accumulating balances. A lower rate is financially healthy. Average Days in Accounts Receivable (excluding self-pay balances) is the number of days it takes to resolve outstanding balances. This metric assesses operational efficiency.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$1,741,111	\$0	\$1,834,752	\$0
Materials & Supplies	\$106,771	\$0	\$110,722	\$0
Internal Services	\$226,293	\$0	\$269,479	\$0
<b>Total GF/non-GF</b>	<b>\$2,074,175</b>	<b>\$0</b>	<b>\$2,214,953</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,074,175</b>		<b>\$2,214,953</b>	
<b>Program FTE</b>	12.00	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 2024: 40041 Medical Accounts Receivable

The program has been dedicated to enhancing data analysis and reporting, including the creation of a denial dashboard to improve the management of Medical receivables. The team utilized these tools to gain more insights into the data, identifying trends and areas for improvement in the revenue cycle process. These efforts have resulted in significant improvements in key performance metrics during FY 2023 and the first half of FY 2024. Multnomah County not only exceeded benchmarks but also outperformed other Health Centers of similar sizes. In an effort to expand payment methods and improve collections, the Medical Billing team collaborated with the Integrated Clinical Services (ICS) division to launch "MyChart Pay as a Guest", a secure and convenient payment alternative aimed at further extending payment flexibility to our underserved community.

**Department:** Health Department      **Program Contact:** Jammel Rose  
**Program Offer Type:** Administration      **Program Offer Stage:** Adopted  
**Related Programs:** 40040  
**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 1000 contract and procurement action requests, and an additional 6700 actions in the Multnomah MarketPlace (MMP) and outside, for direct purchase of goods. 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.

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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of Action Request Forms Submitted	900	775	1,000	775
Outcome	Contract Cycle Time Report (days)	59.64	70	65	70
Output	MMP Item Purchasing	\$4.2M	\$4.2M	\$4.3M	\$4.2M

### Performance Measures Descriptions

The number of Action Request Forms (ARF) submitted via the Multnomah Market Place (MMP) describes workload for the team. Note, each ARF may contain multiple procurement or contract requests. Contract Cycle time is a measure of how efficiently the team completes its work. Cycle time is the average time it takes from when a the contract shell is created to contract execution. MMP Item purchasing is an output measure of program goods requests.



## 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	2024	2024	2025	2025
Personnel	\$2,286,186	\$0	\$2,567,866	\$0
Internal Services	\$332,236	\$0	\$448,150	\$0
<b>Total GF/non-GF</b>	<b>\$2,618,422</b>	<b>\$0</b>	<b>\$3,016,016</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,618,422</b>		<b>\$3,016,016</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

## Significant Program Changes

**Last Year this program was:** FY 2024: 40042A Contracts & Procurement

The Contracts and Procurement team is committed to continuous quality improvement, advancing racial equity, and ensuring fair and equitable public contracting and procurement processes. Highlights from the recent year include fulfilling over 600 contract actions to support comprehensive community health services and partnerships, completing 20 competitive procurements, registering over 200 new organizations in Marketplace, and managing over 5,300 purchase requests. In addition, the team maintained a perfect vaccine depot inventory and is well-positioned to continue providing high-levels of service in FY25.

### 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 response 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 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, 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.

# \$9.4 million

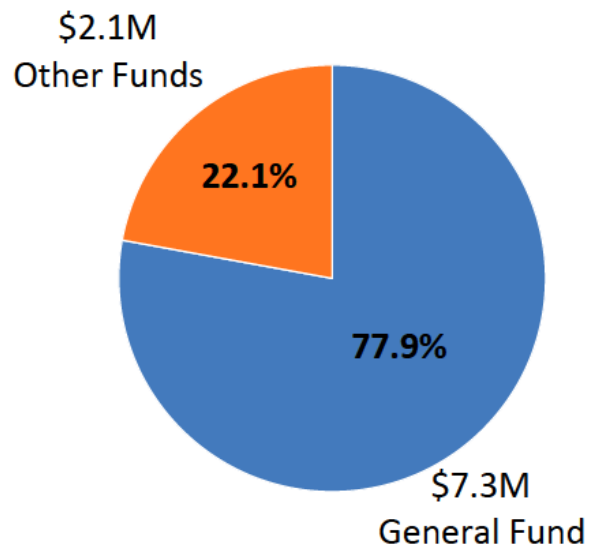
### Health Officer Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.



## 34.13 FTE

(full time equivalent)



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 Division Changes

The Health Officer division budget includes funding for an early reassessment and possible revision of the Ambulance Service Plan (40004B), which by statute details how the contract specifics should be operationalized (eg: staffing ratios on ambulances).

The Health Officer also plays a critical role in the Department’s Overdose Prevention & Response Plan efforts and added capacity to support tracking the Plan’s implementation, convening community partners, and implementing data modernization strategies

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Health Officer</b>						
40002	Tri-County Health Officer		875,956	407,544	1,283,500	1.94
40004	Ambulance Services (Emergency Medical Services)		2,590,410	1,354,495	3,944,905	13.80
40004B	Ambulance Service Plan	X	756,768	0	756,768	0.00
40005	Public Health & Regional Health Systems Emergency Preparedness		62,789	318,714	381,503	1.39
40052	Medical Examiner		<u>3,038,529</u>	<u>0</u>	<u>3,038,529</u>	<u>17.00</u>
<b>Total Health Officer</b>			<b>\$7,324,452</b>	<b>\$2,080,753</b>	<b>\$9,405,205</b>	<b>34.13</b>

**Department:** Health Department      **Program Contact:** Richard Bruno  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Multnomah County Health Officer serves as the lead Health Officer for the three-county metro region, providing overall physician supervision and regional alignment to three other full-time health officers, one in each county. In addition to being one of the few regional public health staff, the Health Officer provides executive level oversight to the County’s Emergency Medical Services Program, the Medical Examiners Program, the Public Health Emergency Preparedness Program, and routinely serves as the primary physician ambassador to regional health systems and Coordinated Care Organizations particularly in relation to emerging health threats that require a coordinated response.

**Program Description**

The Multnomah County Health Officers provide physician authorization and clinical oversight for the full scope of Communicable Disease Services, including the Sexually Transmitted Disease Clinic, tuberculosis diagnosis and treatment, and many other types of outbreaks. They close gaps in services, recent examples include COVID-19 testing and vaccination, naloxone availability, and rapid HIV testing. Working in concert with community-based staff and programs, the Multnomah County Health Officers extend the reach of public health interventions to those disproportionately affected by specific health threats. They also offer a unique perspective in the realm of local and state health policy that is prevention-focused and equity-based.

The Washington County contract funds their full-time health officer and a small portion of FTE for the Multnomah County Health Officer to cover supervisory and regional duties.

Total health officer FTE in Multnomah County has not changed in decades despite a growing population and increasing complexity of public health events, including but not limited to: measles, Ebola, extreme cold/heat, poor air quality, and the drug overdose crisis.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Contract deliverables are met by the end of fiscal year.	90%	90%	90%	90%
Outcome	County stakeholders express satisfaction in program delivery and results.	100%	100%	100%	100%

**Performance Measures Descriptions**

## 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	2024	2024	2025	2025
Personnel	\$435,451	\$361,088	\$724,371	\$345,737
Materials & Supplies	\$0	\$10,308	\$48,446	\$10,308
Internal Services	\$96,201	\$50,444	\$103,139	\$51,499
<b>Total GF/non-GF</b>	<b>\$531,652</b>	<b>\$421,840</b>	<b>\$875,956</b>	<b>\$407,544</b>
<b>Program Total:</b>	<b>\$953,492</b>		<b>\$1,283,500</b>	
<b>Program FTE</b>	0.99	0.95	1.07	0.87

Program Revenues				
Intergovernmental	\$0	\$421,840	\$0	\$407,544
<b>Total Revenue</b>	<b>\$0</b>	<b>\$421,840</b>	<b>\$0</b>	<b>\$407,544</b>

## Explanation of Revenues

This program generates \$51,499 in indirect revenues.

Washington county meets their ORS 431.418 requirements for health officer services through intergovernmental agreement (IGA) with Multnomah County. The Tri-County Health Officer is funded by:

\$ 407,544 - Tri-County Health Officer Washington County

## Significant Program Changes

Last Year this program was: FY 2024: 40002 Tri-County Health Officer

**Department:** Health Department      **Program Contact:** Aaron Monnig  
**Program Offer Type:** Operating      **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. A contractor 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Ambulance response for urgent, life threatening calls in the Urban zones is < or equal to 8 min. 90% of the time.	70%	90%	65%	90%
Outcome	Ambulance response in urgent, life threatening calls in Rural areas is < or equal to 20 minutes, 90% of the time.	70%	90%	65%	90%
Output	TC911 serves highest users of EMS system through care coordination, case management, and referral linkages.	500	500	500	500

**Performance Measures Descriptions**

## Legal / Contractual Obligation

The County is responsible under ORS 682 to have an Ambulance Service Area Plan. The governing law and contractual obligations include the Multnomah County Ambulance Service Plan; ORS 682; OAR Chapter 333, County ordinances 21.400-21.433; County rules, medical policies, procedures, protocols, the 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	2024	2024	2025	2025
Personnel	\$1,684,126	\$955,045	\$1,769,757	\$1,007,665
Contractual Services	\$560,754	\$18,700	\$545,858	\$18,700
Materials & Supplies	\$93,693	\$6,277	\$77,458	\$6,277
Internal Services	\$188,503	\$277,053	\$197,337	\$321,853
<b>Total GF/non-GF</b>	<b>\$2,527,076</b>	<b>\$1,257,075</b>	<b>\$2,590,410</b>	<b>\$1,354,495</b>
<b>Program Total:</b>	<b>\$3,784,151</b>		<b>\$3,944,905</b>	
<b>Program FTE</b>	7.87	5.93	7.87	5.93

Program Revenues				
Fees, Permits & Charges	\$2,166,546	\$0	\$2,368,865	\$0
Intergovernmental	\$67,915	\$0	\$0	\$0
Other / Miscellaneous	\$0	\$1,257,075	\$0	\$1,354,495
<b>Total Revenue</b>	<b>\$2,234,461</b>	<b>\$1,257,075</b>	<b>\$2,368,865</b>	<b>\$1,354,495</b>

## Explanation of Revenues

This program generates \$169,264 in indirect revenues.

Lic. fees \$175,000, the ambulance franchise fee \$1,530,936, and first responder medical direction contracts and ambulance medical direction \$642,929 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 difference. The County's exclusive ambulance services contract and MCC 21.400 provide authority for MCEMS to levy fines for substandard performance (\$20,000). Fines collected pay for EMS system enhancements. The County pays two fire first response agencies in eastern Multnomah County 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. The County supplements this with general funds to allow service to non-Medicaid clients using EMS frequently.

TC 911 HealthShare Grant (50210) \$1,354,495

## Significant Program Changes

**Last Year this program was:** FY 2024: 40004 Ambulance Services (Emergency Medical Services)

**Department:** Health Department      **Program Contact:** Aaron Monnig  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 40004  
**Program Characteristics:** New Request, One-Time-Only Request

**Executive Summary**

The Health Department has recommended an assessment of Multnomah County’s Ambulance Service Plan, which was last revised in 2016. Funding was approved to initiate this work in FY 2024.

**Program Description**

State statute (ORS 682.062) directs counties to develop Ambulance Service Plans for all areas within their jurisdictional borders. An Ambulance Service Plan (ASP) specifies how the key features of the emergency medical services (EMS) system are structured within the county. Multnomah County is statutorily obligated to assess the County's ASP and, when significant changes occur, to revise the plan. This process of assessment, reviewing recommendations, and ultimately making revisions to the County ASP would result in a procurement for the services described in the plan.

Last reviewed and adopted in 2016, Multnomah County’s ASP establishes that the County will have one contracted emergency ambulance service provider. In recent years, persistent issues with contract compliance, changes in the EMS landscape, and emerging proposals to alter fundamental elements of the County’s ASP have given rise to a need to reassess our ASP.

The County EMS Program recommends a comprehensive ASP assessment. This work requires both internal Health Department staff capacity as well as an external consultant contractor with subject matter expertise in EMS systems. The assessment will involve in-depth review and recommendations by an external industry consultant, including stakeholder engagement with current jurisdictional partners, response agencies, healthcare partners, and existing ambulance service providers. This process is anticipated to result in policy recommendations that will influence maintaining, or revisions to current EMS system components. If revisions to the ASP are recommended, additional funding will be required in subsequent years to implement those changes.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Contract with external EMS industry consultant to assist with assessment. and assist with recommendations	N/A	N/A	0	1
Output	Hire new staff to coordinate the EMS system design assessment project	N/A	N/A	0	1

**Performance Measures Descriptions**



## Legal / Contractual Obligation

ORS 682 requires Counties to create ambulance service plans that meet the requirements of OAR 333-160

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$0	\$456,768	\$0
Contractual Services	\$0	\$0	\$300,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$756,768</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$756,768</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:** Aaron Monnig

**Program Offer Type:** Operating      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
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	1	1	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	2024	2024	2025	2025
Personnel	\$23,588	\$263,445	\$24,649	\$274,412
Materials & Supplies	\$14,497	\$523	\$15,033	\$523
Internal Services	\$26,729	\$41,659	\$23,107	\$43,779
<b>Total GF/non-GF</b>	<b>\$64,814</b>	<b>\$305,627</b>	<b>\$62,789</b>	<b>\$318,714</b>
<b>Program Total:</b>	<b>\$370,441</b>		<b>\$381,503</b>	
<b>Program FTE</b>	0.08	1.31	0.08	1.31

Program Revenues				
Intergovernmental	\$0	\$305,627	\$0	\$318,714
<b>Total Revenue</b>	<b>\$0</b>	<b>\$305,627</b>	<b>\$0</b>	<b>\$318,714</b>

## Explanation of Revenues

This program generates \$40,273 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: \$ 271,948 - Public Health Emergency Prep

Federal: \$ 46,766 - OHA Cities Readiness Initiative (CRI)

## Significant Program Changes

**Last Year this program was:** FY 2024: 40005 Public Health & Regional Health Systems Emergency Preparedness

**Department:** Health Department      **Program Contact:** Richard Bruno  
**Program Offer Type:** Operating      **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 3,500 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of deaths requiring investigation	3,500	3,700	3,750	4,000
Outcome	Deputy Medical Examiner arrives on-scene within one hour for 90% of calls	71%	85%	75%	85%
Outcome	Increase the number of in-person scene responses with a death investigator on scene	1,471	1,400	1,650	1,800

**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.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$2,190,588	\$0	\$2,541,019	\$0
Contractual Services	\$114,298	\$0	\$118,526	\$0
Materials & Supplies	\$24,947	\$0	\$23,169	\$0
Internal Services	\$345,943	\$0	\$355,815	\$0
<b>Total GF/non-GF</b>	<b>\$2,675,776</b>	<b>\$0</b>	<b>\$3,038,529</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,675,776</b>		<b>\$3,038,529</b>	
<b>Program FTE</b>	15.00	0.00	17.00	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 2024: 40052 Medical Examiner

An addition of 2.00 FTE MDI positions will be added in FY 2025 to account for increased workload and state changes in FY 2024. In 2023, the ME program experienced a 13% increase with in person investigation and an 8% increase in total cases. In 2023, the state made changes to its ME program that significantly increased the responsibility of the county to manage the operations of death investigation and certification deaths, including the addition of performing external examinations. Under ORS 146, medicolegal death investigators are tasked with making positive identifications of deceased, locating and notifying the next of kin and directing indigent dispositions. Increased caseload has increased the need for resources to perform positive identifications through fingerprints, locating and researching next of kin, next of kin notifications and indigent dispositions for those who are unclaimed.

### Public Health

The Public Health Division holds the Local Public Health Authority for Multnomah County. The division is responsible for protecting, through mandated functions, the health of the public, and reporting to the County Board of Health. The Public Health Division coordinates with the Board of Health to identify pressing public health issues, and set health policy and system changes that address them. Priority issues include racial and ethnic inequities; leading causes of preventable death, disease, illness, and injury; social determinants of health; and lasting COVID-19 impacts.

The division leads with race and works in partnership with the community across the following program areas:

- **Communicable Disease Services** prevents the spread of reportable contagious diseases through epidemiology, disease investigation, harm reduction, partnerships, and clinical care and immunization services.
- **Community Epidemiology Services** collects and evaluates public health data to improve decision-making, inform policy, and more.
- **Community Partnerships and Capacity Building** builds relationships with community organizations, supports culturally-specific community health work, and builds capacity within communities most affected by inequities to improve health and eliminate unfair and avoidable health outcomes.
- **Environmental Health Services** protects the safety of residents by inspecting licensed facilities, including restaurants; controlling disease vectors; and addressing lead poisoning, air and water quality, climate change, and neighborhood/transportation design.
- **Parent, Child, and Family Health** improves the health of families and children by providing home visiting services, helping families navigate complicated healthcare systems, and providing support to pregnant Black and African American people through Healthy Birth Initiatives.
- **Prevention & Health Promotion** improves population health through partnerships, technical assistance, and culturally specific policies and strategies. Initiatives include chronic disease and violence prevention, substance use prevention, aligned with the Department’s Overdose Prevention and Response Plan, tobacco control and prevention, and adolescent health.

# \$87.5 million

### Public Health

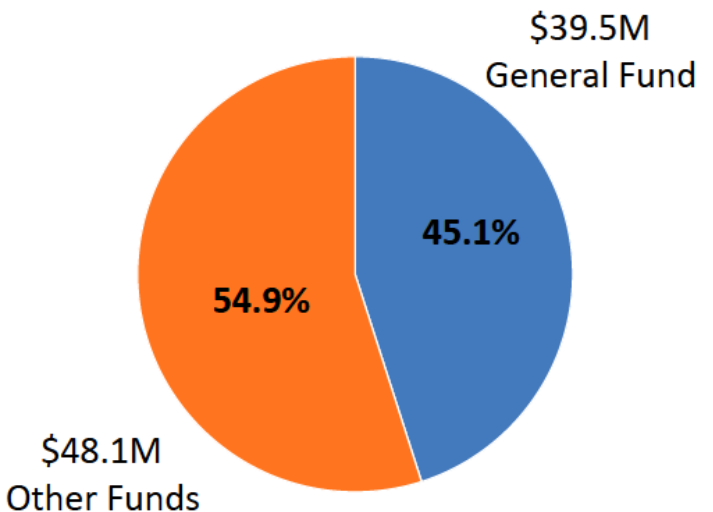
Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.



## 325.78 FTE

(full time equivalent)



- **Women, Infants, and Children (WIC)** increases access to nutritious foods and improves health outcomes for families with children five years of age and younger.
- *Significant Division Changes*

Funding provided in this budget will maintain the Nurse Family Partnership (40054) while Parent Child Family Health (PCFH) considers a possible restructuring of home visiting programs. This budget also includes one-time-only funding to maintain the Future Generations Collaborative’s early childhood program, Chaku Manaqi tush as well as ongoing funding to support our partnership with Future Generations Collaborative. The Harm Reduction Street Outreach Team is expanded to address the growing rate of HIV/STD outbreaks and illicit substance use in Multnomah County (40061C). This aligns with the Department’s Overdose Prevention and Response Plan. New funding is also provided to support the Sexually Transmitted Infection (STI) Clinic (40010E) to address an increase in HIV/STI cases as well as a permanent employee and one- time-only funding for education and outreach to support a partnership with the City of Portland to assist in the implementation of a gas-powered leaf blower phase out policy (40037B). Also included is one-time-only funding to cover the full cost of the Restaurant Inspections/Environmental Health program (40007B), deferring any fee increases required to cover the cost of the inspection program.

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Public Health</b>						
40001	Public Health Administration and Quality Management		2,085,202	468,221	2,553,423	11.70
40006	Tobacco Prevention and Control		835,321	1,492,094	2,327,415	11.18
40007A	Health Inspections and Education		6,106,491	34,973	6,141,464	29.65
40007B	Restaurant Inspections Restoration	X	1,153,733	0	1,153,733	8.00
40008	Vector-Borne Disease Prevention and Code Enforcement		2,537,934	0	2,537,934	12.10
40009	Vital Records		0	954,381	954,381	5.22
40010A	Communicable Disease Prevention and Control		2,073,644	2,948,945	5,022,589	18.10
40010B	Communicable Disease Clinical and Community Services		2,230,377	4,182,487	6,412,864	25.07
40010C	Communicable Disease Community Immunization Program		0	1,828,517	1,828,517	8.62

# Health Department

## FY 2025 Adopted Budget

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
40010D	Supportive Housing Services for Communicable Disease Clients - Supportive Housing Services	X	0	337,033	337,033	1.00
40010E	Restore STD Clinic Services	X	350,000	0	350,000	0.00
40011	Services for Persons Living with HIV - Regional Education and Outreach		109,817	6,252,664	6,362,481	5.80
40018	Women, Infants, and Children (WIC)		3,539,043	4,561,344	8,100,387	47.80
40037	Environmental Health Community Programs		826,868	2,206,705	3,033,573	11.58
40037B	Gas Powered Leaf Blower Project		210,000	0	210,000	1.00
40048	Community Epidemiology		1,684,954	4,288,278	5,973,232	22.36
40053	Racial and Ethnic Approaches to Community Health		1,124,804	2,141,440	3,266,244	8.02
40054	Nurse Family Partnership Restoration		1,157,133	1,837,235	2,994,368	10.20
40055	Home and Community Based Consulting	X	117,685	595,023	712,708	3.80
40056	Healthy Families		1,100,965	3,572,645	4,673,610	6.00
40058	Healthy Birth Initiative		1,883,361	2,376,323	4,259,684	16.25
40060	Community & Adolescent Health		1,816,943	1,431,973	3,248,916	15.70
40061A	Harm Reduction		2,156,924	3,041,921	5,198,845	9.58
40061B	Harm Reduction - Opioid Settlement Investment		269,228	0	269,228	1.45
40061C	Harm Reduction Street Outreach Team		816,904	0	816,904	6.00
40096	Public Health Office of the Director		3,829,203	3,282,027	7,111,230	23.60
40097	Parent, Child, and Family Health Management		<u>1,451,593</u>	<u>242,767</u>	<u>1,694,360</u>	<u>6.00</u>
<b>Total Public Health</b>			<b>\$39,468,127</b>	<b>\$48,076,996</b>	<b>\$87,545,123</b>	<b>325.78</b>



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**Department:** Health Department      **Program Contact:** Andrea Hamberg

**Program Offer Type:** Administration      **Program Offer Stage:** Adopted

**Related Programs:**

**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 and contract 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# of quality and strategy projects identified	6	6	6	6
Outcome	% of identified projects successfully completed	88%	90%	90%	90%

### Performance Measures Descriptions

## 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
<b>Program Expenses</b>	<b>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Personnel	\$1,659,727	\$357,022	\$1,697,446	\$354,839
Contractual Services	\$17,535	\$27,512	\$18,184	\$27,512
Materials & Supplies	\$111,071	\$8,942	\$114,406	\$15,059
Internal Services	\$184,356	\$59,029	\$255,166	\$70,811
<b>Total GF/non-GF</b>	<b>\$1,972,689</b>	<b>\$452,505</b>	<b>\$2,085,202</b>	<b>\$468,221</b>
<b>Program Total:</b>	<b>\$2,425,194</b>		<b>\$2,553,423</b>	
<b>Program FTE</b>	9.80	2.00	9.70	2.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$452,505	\$0	\$468,221
<b>Total Revenue</b>	<b>\$0</b>	<b>\$452,505</b>	<b>\$0</b>	<b>\$468,221</b>

## Explanation of Revenues

This program generates \$60,003 in indirect revenues.

State Opiate grant for Prescription drug Overdose Prevention allows 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 \$ 263,812- PE-62 Overdose Prevention-Counties

## Significant Program Changes

**Last Year this program was:** FY 2024: 40001 Public Health Administration and Quality Management

No significant changes

**Department:** Health Department      **Program Contact:** Charlene McGee  
**Program Offer Type:** Operating      **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. 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. Licensed 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of tobacco retail licenses issued	708	800	778	800
Outcome	Number of policies established to reduce tobacco use and exposure	1	1	0	0
Output	Number of retailer inspections	1,621	1,500	1,500	1,650
Output	Number of community partnerships	48	55	51	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 a 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	2024	2024	2025	2025
Personnel	\$602,878	\$941,569	\$655,637	\$1,066,373
Contractual Services	\$15,750	\$314,888	\$16,333	\$102,752
Materials & Supplies	\$24,706	\$47,317	\$27,774	\$23,429
Internal Services	\$95,254	\$187,595	\$135,577	\$299,540
<b>Total GF/non-GF</b>	<b>\$738,588</b>	<b>\$1,491,369</b>	<b>\$835,321</b>	<b>\$1,492,094</b>
<b>Program Total:</b>	<b>\$2,229,957</b>		<b>\$2,327,415</b>	
<b>Program FTE</b>	4.05	3.30	4.20	6.98

Program Revenues				
Fees, Permits & Charges	\$738,588	\$0	\$738,588	\$0
Intergovernmental	\$0	\$1,491,369	\$0	\$1,492,094
<b>Total Revenue</b>	<b>\$738,588</b>	<b>\$1,491,369</b>	<b>\$738,588</b>	<b>\$1,492,094</b>

## Explanation of Revenues

This program generates \$180,323 in indirect revenues.

Direct State - \$463,369 - Tobacco Prevention

Direct State - \$1,000,725 - Tobacco Prevention - BM 108

HealthShare of Oregon - \$28,000 - Tobacco Prevention & Cessation

Licenses & Fees - \$738,588 - Tobacco Retail Licenses

## Significant Program Changes

**Last Year this program was:** FY 2024: 40006 Tobacco Prevention and Control

Legal challenges to the policy banning the sale of flavored tobacco and nicotine products in Multnomah County as of Jan. 1, 2024, has halted the implementation process.

**Department:** Health Department      **Program Contact:** Jeff Martin  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 40008, 40010A  
**Program Characteristics:**

**Executive Summary**

Health Inspections and Education (HIE) is a legally mandated, fee-supported program protecting 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 4,820 restaurants, mobile restaurants, hotel/motels, RV parks, organizational camps, warehouses, commissaries, vending machines, and jails. 467 pools/spas; 951 schools, childcare, adult foster care, and other service providers. 53 small water systems (inspected every 3 to 5 years) and an additional 12 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 3 foodborne illnesses 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 17 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of licenses issued	6,142	7,002	6,523	7,343
Outcome	Number of Priority & Priority Foundation violations	8,322	5,446	8,435	5,722
Output	Number of facility inspections	12,205	14,769	11,980	10,272
Output	Number of Food Worker Cards issued	11,788	12,073	13,747	14,450

**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	2024	2024	2025	2025
Personnel	\$5,295,253	\$27,557	\$4,418,468	\$28,745
Contractual Services	\$428,020	\$0	\$503,857	\$0
Materials & Supplies	\$226,964	\$1,213	\$124,760	\$1,213
Internal Services	\$795,070	\$3,850	\$1,059,406	\$5,015
<b>Total GF/non-GF</b>	<b>\$6,745,307</b>	<b>\$32,620</b>	<b>\$6,106,491</b>	<b>\$34,973</b>
<b>Program Total:</b>	<b>\$6,777,927</b>		<b>\$6,141,464</b>	
<b>Program FTE</b>	37.21	0.19	29.46	0.19

Program Revenues				
Fees, Permits & Charges	\$6,060,750	\$0	\$6,083,783	\$0
Intergovernmental	\$0	\$32,620	\$0	\$34,973
<b>Total Revenue</b>	<b>\$6,060,750</b>	<b>\$32,620</b>	<b>\$6,083,783</b>	<b>\$34,973</b>

## Explanation of Revenues

This program generates \$5,015 in indirect revenues.

Multnomah County Environmental Health receives \$34,973 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.

\$34,973 Safe Drinking Water

\$140,030 HD Food Handlers  
\$5,943,753 in Licensing Fees

## Significant Program Changes

**Last Year this program was:** FY 2024: 40007 Health Inspections and Education

This program offer does not include a fee increase for FY 2025. COVID-19-Related - In FY 2023, HIE returned to providing in-person inspections, which saw an increase in the number of violations. In FY 2022, 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:** Jeff Martin  
**Program Offer Type:** Restoration Request      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** One-Time-Only Request

**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**

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**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 3 foodborne illnesses and 8 vibrio investigations in restaurants in the previous calendar year.

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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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Outcome	Number of Priority & Priority Foundation violations	N/A	N/A	N/A	2,616
Output	Number of facility inspections	N/A	N/A	N/A	4,696

**Performance Measures Descriptions**

Current year estimates in program offer 40007A



## 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	2024	2024	2025	2025
Personnel	\$0	\$0	\$1,115,916	\$0
Materials & Supplies	\$0	\$0	\$37,817	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,153,733</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$1,153,733</b>	
<b>Program FTE</b>	0.00	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

This program offer does include an increase of support for FY 2025 that will keep the program whole and fund 8.00 FTE.

## Significant Program Changes

**Last Year this program was:** FY 2024: 40007 Health Inspections and Education

This program offer does include a request for increase of support for FY 2025 that will keep the program whole and fund 8.00 FTE. The current fee structure is inadequate to support the required staff and resources to meet the statutorily required level of regulatory oversight to ensure the public's health. Currently the program is reliant on general fund support to meet our IGA with the Oregon Health Authority.

**Department:** Health Department      **Program Contact:** Jeff Martin  
**Program Offer Type:** Operating      **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. 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 development habitat through water 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of rodent inspections conducted	289	700	700	500
Outcome	Number of service referrals that improve vector abatement	101	75	75	100
Output	Number of acres treated for mosquitoes	2,935	2,000	2,000	4,500
Quality	Inspection and monitoring of mosquito producing sites	907	600	600	800

**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 development site(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	2024	2024	2025	2025
Personnel	\$1,716,147	\$0	\$1,823,269	\$0
Contractual Services	\$62,355	\$0	\$79,009	\$0
Materials & Supplies	\$176,185	\$0	\$176,146	\$0
Internal Services	\$332,958	\$0	\$459,510	\$0
<b>Total GF/non-GF</b>	<b>\$2,287,645</b>	<b>\$0</b>	<b>\$2,537,934</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,287,645</b>		<b>\$2,537,934</b>	
<b>Program FTE</b>	12.10	0.00	12.10	0.00

Program Revenues				
Fees, Permits & Charges	\$342,446	\$0	\$343,441	\$0
<b>Total Revenue</b>	<b>\$342,446</b>	<b>\$0</b>	<b>\$343,441</b>	<b>\$0</b>

## Explanation of Revenues

\$ 277,000- City of Portland BES Vector Control Rats  
 \$ 66,441 - City of Portland Specified Animals

## Significant Program Changes

**Last Year this program was:** FY 2024: 40008 Vector-Borne Disease Prevention and Code Enforcement

In FY 2023 early seasonal flooding in combination with the loss of aerial application services resulted in another historic year for mosquito abundance for FY 2024.

**Department:** Health Department      **Program Contact:** Jeff Martin  
**Program Offer Type:** Operating      **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 can issue birth and death certificates, six months after the date of the event, 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 of Oregon 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of birth and death certificates issued	43,692	50,000	50,000	60,000
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
<b>Program Expenses</b>	<b>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Personnel	\$3,515	\$587,061	\$0	\$623,776
Contractual Services	\$384	\$18,169	\$0	\$39,857
Materials & Supplies	\$0	\$17,405	\$0	\$19,104
Internal Services	\$0	\$260,301	\$0	\$271,644
<b>Total GF/non-GF</b>	<b>\$3,899</b>	<b>\$882,936</b>	<b>\$0</b>	<b>\$954,381</b>
<b>Program Total:</b>	<b>\$886,835</b>		<b>\$954,381</b>	
<b>Program FTE</b>	0.00	5.10	0.00	5.22

<b>Program Revenues</b>				
Fees, Permits & Charges	\$0	\$882,936	\$0	\$954,381
<b>Total Revenue</b>	<b>\$0</b>	<b>\$882,936</b>	<b>\$0</b>	<b>\$954,381</b>

## Explanation of Revenues

This is a fee driven, self-sustaining program. The fee schedule is established by the State of Oregon.

Fees \$ 954,381 - Vital Stats Birth and Death Certificates

## Significant Program Changes

**Last Year this program was:** FY 2024: 40009 Vital Records

Future forecast: House Bill 2420 is under review by a Oregon Health Authority workgroup. This bill would remove the 6 month limitation we currently have and open processing up to any county within the State of Oregon.

**Department:** Health Department      **Program Contact:** Sara McCall  
**Program Offer Type:** Operating      **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 through the foundational public health program of communicable disease control. This is key to achieving the Public Health Division’s goal of Healthy People in Healthy Communities. There are two teams in CDS: CD Investigations and Tuberculosis (TB) Case Management. The CD Investigations team responds to communicable diseases that must be reported to public health. They conduct epidemiologic investigations to identify causes of illness and find people who have been exposed to serious diseases to provide information and care they need to stay healthy. The TB case management team ensures people diagnosed with TB disease adhere to their treatment plan. 78% of people with TB in Oregon are foreign-borne, and the team supports clients and their families throughout treatment. They test people exposed to TB disease and offer treatment for latent TB infection (LTBI) to prevent further disease spread. The team also provides evaluation of TB and treatment of LTBI for newly arrived refugees. TB clinical services moved from program offer 40010B to this program offer (40010A).

CDS develops and uses multiple data sources and epidemiology tools to understand changes in disease and evaluate public health interventions. They provide technical assistance to internal and external partners to expand infection control capacity in the community. The team is key in response planning for new and emerging infectious diseases. CDS provides data to 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 disproportionately affected by infectious diseases. Priority populations include men who have sex with men (MSM) and BIPOC communities. The team works with individuals, communities and trusted community groups to find ways to reduce risk of disease. CDS continues to strengthen relationships by working directly with community groups or members to share data and culturally sensitive health education.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of disease report responses	4,528	4,250	4,538	4,750
Outcome	Location of contacts (pertussis, meningococcal meningitis, Hepatitis A and B) within one day	88%	70%	90%	90%
Quality	Percent of tuberculosis (TB) patients completing treatment within 12 months	95%	96%	96%	96%
Outcome	Percent of work/daycare/school-restrictable diseases with occupation and attendance information	N/A	N/A	N/A	80%

**Performance Measures Descriptions**

Performance Measure 1: Disease trends continue to fluctuate due to COVID-19, other health system uncertainty.  
Performance Measure 3: New measure added in FY25 offer. Work/daycare/school-restrictable diseases include diphtheria, measles, mumps, Salmonella Typhi, shigellosis, STEC, hepatitis A & E, pertussis, and rubella  
Performance Measure 4: FY23 actual and FY24 estimate are low due to patients with more complex TB disease requiring longer treatment, secondary to delays in healthcare access. FY25 is set to follow this trend.

## 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	2024	2024	2025	2025
Personnel	\$1,600,662	\$1,874,972	\$1,748,646	\$1,673,640
Contractual Services	\$54,483	\$124,116	\$55,110	\$18,180
Materials & Supplies	\$86,920	\$43,165	\$87,129	\$37,361
Internal Services	\$135,323	\$988,777	\$182,759	\$1,219,764
<b>Total GF/non-GF</b>	<b>\$1,877,388</b>	<b>\$3,031,030</b>	<b>\$2,073,644</b>	<b>\$2,948,945</b>
<b>Program Total:</b>	<b>\$4,908,418</b>		<b>\$5,022,589</b>	
<b>Program FTE</b>	8.71	11.54	9.11	8.99

Program Revenues				
Intergovernmental	\$0	\$2,785,589	\$0	\$2,678,004
Other / Miscellaneous	\$0	\$220,441	\$0	\$245,941
Service Charges	\$0	\$25,000	\$0	\$25,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,031,030</b>	<b>\$0</b>	<b>\$2,948,945</b>

## Explanation of Revenues

This program generates \$249,334 in indirect revenues.  
 OHA Local Public Health Authority - \$2,316,017  
 Fed Thru State - \$221,947  
 Fed Thru Other - \$140,040  
 Charges for services CD-OHS/CDC HepB \$25,000  
 Occupational Hlth Fees - \$245,941

## Significant Program Changes

**Last Year this program was:** FY 2024: 40010A Communicable Disease Prevention and Control

For FY 2025, Occupational Health Services moved to Program Offer 40010B

**Department:** Health Department      **Program Contact:** Neisha Saxena  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Communicable Disease (CD) is a foundational public health program that protects the health of the community by fulfilling State of Oregon infectious disease statutes for disease tracking and investigation, disease intervention and control, and response evaluation. CD Clinical and Community Services provides sexual health services and community testing/prevention outreach to prevent STD and HIV transmission and treatment. Immunization are in program offer 40010C.

**Program Description**

CD Clinical and Community Services limits the spread of sexually transmitted infections (STIs) by treating existing and preventing new cases, especially among the most-impacted communities. Program activities include: STD Clinical Services - Low barrier, timely medical evaluation, treatment, and prevention counseling in a judgment-free, culturally relevant manner. Staff provide HIV prevention medication (PrEP) to at-risk individuals. The STD clinic is a designated training site for medical providers and provides consultations and continuing medical education. Partner Services - Staff contact the sex/needle-sharing partners of persons with confirmed STD/HIV/hepatitis C infections, link them to testing and treatment, and counsel for behavior change. Partnerships – Subcontracted community partners support the program in providing field-based testing, health promotion, and condom distribution. Outreach & Epidemiology - Case investigation identifies population-level patterns of STD/HIV infection to guide testing and prevention outreach and inform health care and other systems to appropriately target resources. The program’s epidemiology work informs interventions in response to the syndemic (e.g., simultaneous, related epidemics of multiple diseases) of new and rising HIV, syphilis, hepatitis C, and shigella cases. TB clinical services have moved from this program offer (40010B) to 40010A.

Racial inequalities persist in the realm of STIs, including HIV. Tackling these disparities stands as a prioritized approach to diminish the overall burden of diseases. Disparities are discerned through prevalence and interview data, shedding light on transmission modes and patterns that contribute to the disproportionate impact. Monthly data reviews by program leadership, facilitated through dashboards, prompt the creation of new tools as necessary. The outreach endeavors are tailored towards disparity populations, encompassing LGBTQ and homeless communities. The program collaborates with culturally specific organizations under contracts to effectively engage these communities. Additional strategies involve outreach efforts at homeless camps, the involvement of peer leaders, and advertisements on social media and hook-up sites. Surveys conducted at STD clinics capture client input, with a forthcoming survey specifically honing in on ways to enhance services for culturally specific communities.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of clinical visits (STD, HIV)	5,399	5,800	4,000	4,400
Outcome	Percentage of all County gonorrhea/syphilis/HIV cases diagnosed through this program	14%	15%	15%	15%
Quality	Percentage of syphilis/HIV cases investigated	76%	85%	80%	85%
Output	Number of patients initiated on HIV prevention medication (PrEP)	447	450	430	450

**Performance Measures Descriptions**

Measure 1: Includes STD and outreach testing. Measure 2: The LPHA Agreement requires reporting on communicable diseases. The measure shows the impact and efficiency of the program to find, diagnose, and treat a significant portion of reportable STDs relative to the entire health care system. Measure 3: Percentage of newly reported HIV and syphilis cases that are successfully interviewed by DIS case investigators. 100% of cases are initiated to attempt an interview.



## 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	2024	2024	2025	2025
Personnel	\$1,340,864	\$2,591,331	\$1,325,403	\$2,608,128
Contractual Services	\$0	\$541,784	\$146,959	\$395,184
Materials & Supplies	\$73	\$304,806	\$25,733	\$363,661
Internal Services	\$456,008	\$766,828	\$732,282	\$815,514
<b>Total GF/non-GF</b>	<b>\$1,796,945</b>	<b>\$4,204,749</b>	<b>\$2,230,377</b>	<b>\$4,182,487</b>
<b>Program Total:</b>	<b>\$6,001,694</b>		<b>\$6,412,864</b>	
<b>Program FTE</b>	7.55	18.57	6.88	18.19

Program Revenues				
Intergovernmental	\$0	\$3,853,542	\$0	\$3,831,280
Service Charges	\$0	\$351,207	\$0	\$351,207
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,204,749</b>	<b>\$0</b>	<b>\$4,182,487</b>

## Explanation of Revenues

This program generates \$382,401 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.

Surveillance Network GY05 - \$273,056; HIV Prevention Block - CTS Clinic - \$393,338; HIV Early Intervention & Outreach - \$1,666,772; ELC Gonococcal Infections - \$20,000; Sexually Transmitted Diseases Client Services - \$344,133; Public Health Modernization Local - STD - \$627,009; HIV/STI Services - \$146,040; COVID-19 Federal CDC Health Disparities STD - \$240,000; HIV Early Intervention Services and Outreach - \$120,932; STD Program Medicaid FFS - \$170,599; STD Program Medicare \$3,753; STD Prog Pt Fee 3rd Party- \$107,890; STD Program Pt Fees - \$68,965

## Significant Program Changes

**Last Year this program was:** FY 2024: 40010B Communicable Disease Clinical and Community Services

Moved Occupational Health Services into 40010B from 40010A.

**Department:** Health Department      **Program Contact:** Neisha Saxena  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**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.

**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, and flu. 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 FY25, 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of immunizations provided to children under 18, including COVID-19 vaccines	1,615	400	1,100	1,000
Outcome	Percentage of COVID-19 Vaccine provided to BIPOC individuals.	41%	60%	45%	35%
Output	Number of schools and childcare entities assisted with immunization law requirements.	445	480	450	450
Outcome	New: number of community partners and stakeholders provided with information sessions/educational materials	0	75	80	70

**Performance Measures Descriptions**

Measure 1 will be reduced from 1100 in FY 24 to 1000 in FY 25. As our focus will be on other measures due to budget cuts and more of an effort to get BIPOC individuals vaccinated. OHA's statewide initiatives to protect people from preventable diseases by 2030. Will be measured in measure 1. CIP will help increase the vaccination rate by 2030, in part by providing at least 1000 vaccinations to children 18 and under.

Measure 2: The FY25 Offer number reflects the percentage of CIP staff budgeted in this program offer.

## 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	2024	2024	2025	2025
Personnel	\$0	\$1,492,755	\$0	\$1,382,022
Contractual Services	\$0	\$40,000	\$0	\$36,300
Materials & Supplies	\$0	\$61,438	\$0	\$35,922
Internal Services	\$0	\$320,345	\$0	\$374,273
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,914,538</b>	<b>\$0</b>	<b>\$1,828,517</b>
<b>Program Total:</b>	<b>\$1,914,538</b>		<b>\$1,828,517</b>	
<b>Program FTE</b>	0.00	9.95	0.00	8.62

Program Revenues				
Intergovernmental	\$0	\$1,898,068	\$0	\$1,812,047
Service Charges	\$0	\$16,470	\$0	\$16,470
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,914,538</b>	<b>\$0</b>	<b>\$1,828,517</b>

## Explanation of Revenues

This program generates \$236,758 in indirect revenues.

Immunization Special Payments - Federal	\$ 101,142
Immunization Special Payments - State FY23	\$ 99,181
Immunization Services for Displaced Ukrainian Populations	\$ 161,758
COVID-19 - Federal Immunization	\$1,449,966
Immunization Medicaid FFS	\$ 16,470

## Significant Program Changes

**Last Year this program was:** FY 2024: 40010C Communicable Disease Community Immunization Program

In FY 2025, the focus of this offer will be do COVID-19 vaccinations for BIPOC communities, and increase our efforts around school reporting and administering VFC and FLU vaccines to our 18 and under population. Due to budget restraints some of our FY 2025 offers had to be reduced. In FY 2025 we will have a greater focus on FLU vaccinations and increasing our immunization outreach to communities of color.

**Department:** Health Department **Program Contact:** Sara McCall  
**Program Offer Type:** Operating **Program Offer Stage:** Adopted  
**Related Programs:** 40048  
**Program Characteristics:** New Request, One-Time-Only Request

### 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 utilizes short term housing for persons experiencing homelessness (PEH) that test positive for select infectious diseases to give them a stable place to recover from illness and reduce risk of spread in the PEH community. Supportive Housing Services (SHS) for CD Clients will expand that program to offer longer short term housing for PEH experiencing any reportable illness and facilitate referrals to longer term housing.

### Program Description

CDS protects the people of Multnomah County through the foundational public health program of communicable disease control. This is key to achieving the Public Health Division’s goal of Healthy People in Healthy Communities. One strategy CDS uses for communicable disease control is to offer short term housing for PEH who test positive for select infectious diseases that are reportable in Oregon.

PEH have higher rates of illness compared to housed people and are at higher risk of severe illness from infectious diseases. Infectious diseases can spread rapidly in PEH due lack of access to hygiene items and a safe place to recover. BIPOC communities are disproportionately impacted by homelessness and will be prioritized in this program.

SHS for CDS Clients will expand the existing CDS intervention by increasing support for PEH and facilitating referrals to more stable housing. This program will use an existing contract to offer short term housing for at least two weeks to PEH who test positive for any infectious disease that is reportable by law in Oregon. SHS for CDS clients will also provide food and hygiene items, which the existing intervention does not currently offer.

A key feature of this expansion is adding a dedicated staff person who will contact PEH who are sick with a reportable illness and offer resources for more stable housing. This staff person will work with the Joint Office of Homeless Services, as well as other internal and external partners, to identify those resources and connect PEH to appropriate programs for stable and longer-term housing. In addition, this staff member will offer other resources that will support the client sustaining more stable housing, including but not limited to mental health, primary care, and nutrition assistance.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of PEH clients placed in short term housing	N/A	N/A	N/A	50
Outcome	Percent of PEH clients who receive housing navigation services	N/A	N/A	N/A	50%
Quality	Percent of PEH clients who identify as BIPOC that are placed in short term housing	N/A	N/A	N/A	50%

### Performance Measures Descriptions

**Legal / Contractual Obligation**

None

**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>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Personnel	\$0	\$0	\$0	\$219,000
Contractual Services	\$0	\$0	\$0	\$75,000
Materials & Supplies	\$0	\$0	\$0	\$6,000
Internal Services	\$0	\$0	\$0	\$37,033
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$337,033</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$337,033</b>	
<b>Program FTE</b>	0.00	0.00	0.00	1.00

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

**Explanation of Revenues**

This program generates \$37,033 in indirect revenues.  
 \$337,033 Supportive Housing Services (SHS) Fund 1521 one-time-only funding. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

**Significant Program Changes**

Last Year this program was:

New Program

**Department:** Health Department      **Program Contact:** Neisha Saxena  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 40010B  
**Program Characteristics:** New Request, Backfill State/Federal/Grant, One-Time-Only Request

**Executive Summary**

Communicable Disease (CD) is a foundational public health program that protects the health of the community by fulfilling State of Oregon infectious disease statutes for disease tracking and investigation, disease intervention and control, and response evaluation. CD Clinical and Community Services provides sexual health services and community testing/prevention outreach to prevent STD and HIV transmission.

**Program Description**

CD Clinical and Community Services limits the spread of sexually transmitted infections (STIs) by treating existing and preventing new cases, especially among the most-impacted communities. Program activities include: STD Clinical Services - Low barrier, timely medical evaluation, treatment, and prevention counseling in a judgment-free, culturally relevant manner. Staff provide HIV prevention medication (PrEP) to at-risk individuals. The STD clinic is a designated training site for medical providers and provides consultations and continuing medical education. Partner Services - Staff contact the sex/needle-sharing partners of persons with confirmed STD/HIV/hepatitis C infections, link them to testing and treatment, and counsel for behavior change. Partnerships – Subcontracted community partners support the program in providing field based testing, health promotion, and condom distribution. Outreach & Epidemiology - Case investigation identifies population-level patterns of STD/HIV infection to guide testing and prevention outreach and inform health care and other systems to appropriately target resources. The program’s epidemiology work informs interventions in response to the syndemic (e.g., simultaneous, related epidemics of multiple diseases) of new and rising HIV, syphilis, hepatitis C, and shigella cases.

A significant reduction in state funding of approximately \$3.5 million over the past two years has led to budget cuts. The main program offer for clinical services is PO 40010B. This additional program offer seeks to restore staffing and clinical services to the community. Services that would be restored could include: 1. PrEP navigation, including re-establishing injectable PrEP as an option for unstably housed patients; 2. Increased STI Express Visits to allow for easier community access to HIV/STI screening and treatment; 3. Return to best practice recommendations for on site lab services, which are essential to a well-functioning public health clinic; 4. Potential front desk support to accommodate increased demand for services.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of clinical visits to screen asymptomatic clients (STD, HIV.)	N/A	N/A	N/A	1,000
Outcome	Percent increase of all County gonorrhea/syphilis/HIV cases diagnosed through this program offer	N/A	N/A	N/A	2%
Output	Number of additional patients initiated on HIV prevention medication (PrEP)	N/A	N/A	N/A	25

**Performance Measures Descriptions**

1: Additional STD and outreach testing funded through this program offer. 2: LPHA Agreement requires reporting on communicable diseases. The measure shows the impact and efficiency to find, diagnose, and treat a significant portion of reportable STDs relative to the entire health care system. 3: Additional clients started on injectable and non-injectable PrEP as a result of restored/additional staffing on top of the output in PO 40010B.

## 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	2024	2024	2025	2025
Personnel	\$0	\$0	\$314,983	\$0
Materials & Supplies	\$0	\$0	\$35,017	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$350,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$350,000</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 offer is an amendment to PO 40010B and seeks to restore positions cut since FY 2022 because of reductions in state revenue.

**Department:** Health Department      **Program Contact:** Neisha Saxena

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

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

### Executive Summary

HIV Grant Administration & Planning (HGAP) provides community-based services to 3,100 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of unduplicated HGAP clients served (all service types/whole 6-county system)	3,089	2,900	3,135	3,100
Outcome	Percent of HGAP clients (all 6 counties) who are virally suppressed	91%	91%	91%	91%
Outcome	Increase viral suppression rate of Black/African Americans	88%	89%	88%	90%

### 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	2024	2024	2025	2025
Personnel	\$0	\$956,780	\$0	\$1,002,898
Contractual Services	\$6,500	\$5,004,234	\$6,741	\$5,004,234
Materials & Supplies	\$525	\$24,010	\$544	\$40,331
Internal Services	\$69,801	\$187,370	\$102,532	\$205,201
<b>Total GF/non-GF</b>	<b>\$76,826</b>	<b>\$6,172,394</b>	<b>\$109,817</b>	<b>\$6,252,664</b>
<b>Program Total:</b>	<b>\$6,249,220</b>		<b>\$6,362,481</b>	
<b>Program FTE</b>	0.00	5.80	0.00	5.80

Program Revenues				
Intergovernmental	\$0	\$6,172,394	\$0	\$6,252,664
<b>Total Revenue</b>	<b>\$0</b>	<b>\$6,172,394</b>	<b>\$0</b>	<b>\$6,252,664</b>

## Explanation of Revenues

This program generates \$110,650 in indirect revenues.

Direct Federal: \$2,718,327 - Ryan White Part A funds for 21-22: Medical, Case management, Non-medical case management, and Housing

Direct State: \$3,534,337 - Oregon Health Authority Ryan White

## Significant Program Changes

**Last Year this program was:** FY 2024: 40012B Services for Persons Living with HIV - Regional Education and Outreach

**Department:** Health Department      **Program Contact:** Sabrina Villemenay  
**Program Offer Type:** Operating      **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/counseling, growth monitoring, health screening, and breastfeeding support to eligible families. WIC is a core referral center for health and social services, including prenatal care, immunizations, Head Start, housing and day care assistance, SNAP and food assistance, and other county programs, such as home visiting services. WIC leads with race and actively applies an equity lens to all services, programs, delivery methods, education options, staffing, technology systems. WIC is a leader in innovation, and a regional partner for cross-cutting health programming and equity expertise. In 2023, WIC served 19,662 unique clients with over 58,000 visits. Clients received healthy foods totaling \$8.7 million, supporting nutrition and food security. Through May 2023, WIC services were exclusively remote, yet maintained caseload and retained staff at over 95%. 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. Over 25% of WIC clients prefer communication in languages other than English. WIC responded through signage in multiple languages, staff fluent in multiple languages, interpretation services contracts, and technology to improve access. 86% (up from 77% in 2020 and 45% in 2016) of WIC staff have language and/or cultural KSAs or are immigrants or refugees, which enables WIC to reach populations most disparately impacted by food/nutrition insecurity. WIC partners with culturally specific agencies and advisory boards, like 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. WIC and REACH hosted a second community and nationwide Town Hall Breastfeeding Training on the effects of diabetes on maternal health for healthcare providers, community members, county staff, medical professionals. Our Breastfeeding Peer Counseling program (BFPC) had a 60% increase in caseload over the past 12 months serving 1158 participants monthly. The assigned BFPC caseload is 739 clients, though all WIC participants can access support. In addition, our Board Certified Lactation Consultants provide in-clinic support, including culturally specific lactation promotion.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# of WIC clients in one year who receive healthful foods with E-WIC benefits	19,000	19,500	19,662	19,500
Outcome	% of WIC clients initiating breastfeeding	93%	93%	95%	93%
Outcome	# of nutrition education contacts with WIC families	57,000	57,000	57,574	57,000
Quality	% of clients served per month in languages other than English	25%	26%	26%	25%

**Performance Measures Descriptions**

## 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	2024	2024	2025	2025
Personnel	\$1,717,259	\$3,807,116	\$2,294,571	\$3,787,877
Contractual Services	\$59,330	\$2,495	\$61,526	\$2,495
Materials & Supplies	\$136,426	\$19,159	\$162,818	\$206
Internal Services	\$872,668	\$529,162	\$1,020,128	\$770,766
<b>Total GF/non-GF</b>	<b>\$2,785,683</b>	<b>\$4,357,932</b>	<b>\$3,539,043</b>	<b>\$4,561,344</b>
<b>Program Total:</b>	<b>\$7,143,615</b>		<b>\$8,100,387</b>	
<b>Program FTE</b>	14.06	31.94	17.86	29.94

Program Revenues				
Intergovernmental	\$0	\$4,357,932	\$0	\$4,561,344
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,357,932</b>	<b>\$0</b>	<b>\$4,561,344</b>

## Explanation of Revenues

This program generates \$638,467 in indirect revenues.

Fed Thru State \$3,616,527 - State WIC grant;  
 Fed Thru State \$85,100 - State Maternal & Child Health (Title V) grant  
 Other \$859,717 - HealthShare of Oregon County Based services -WIC

## Significant Program Changes

**Last Year this program was:** FY 2024: 40018 Women, Infants, and Children (WIC)

Significant Program Changes:

HealthShare of Oregon increased funding of \$114,105  
 Internal Service costs increased by 21%; increased security costs for Gateway WIC Clinic

**Department:** Health Department      **Program Contact:** Jeff Martin  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Environmental Health Community Programs (EHCP) works to eliminate environmental hazards contributing to racial and ethnic health disparities. EHCP areas include community environments, toxics reduction, woodsmoke curtailment, climate change, healthy housing, with a focus on environmental justice and vulnerable populations. EHCP addresses health inequities in lead poisoning, respiratory illness, cardiovascular disease, traffic crash injury. Activities include monitoring, assessing environments, policies, health; technical assistance, data expertise; reporting; communications; direct services.

**Program Description**

EHCP is a continuum of services to ensure all county residents have access to optimal living conditions. With an environmental justice framework, EHCP focuses first on the highest risk communities with the least access to political and social power such as youth, elders, low-income communities, and communities of color. These communities are engaged so their concerns, expertise, and proposed solutions can be integrated into the following program areas. Community Environments: works 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, decision support relating to encampments, energy efficiency upgrades, household toxics. Toxics Reduction: identifies exposure risks to contaminated land, air, water, consumer goods, industrial production, and makes technical information accessible to the public as part of empowering communities. Air Quality: implements County Ordinance 1253, curtailing wood burning on winter days with high air pollution. Implementation includes issuing daily air quality forecasts; fielding complaints, investigations, enforcement; conducting outreach campaigns; monitoring health burdens from air pollution; 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.

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 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Reach and impressions of community members receiving information on environmental threats	27,268,288	14,000,000	14,220,980	7,500,000
Outcome	Number of children with reduced Elevated Blood Lead Level (EBLL) as a result of environmental investigations	99	65	70	65
Outcome	Number of policies adopted that include health- and health justice-based recommendations	13	15	15	15
Outcome	Proportion of people aware of and complying with the woodsmoke curtailment ordinance	81%	80%	80%	80%

**Performance Measures Descriptions**

Includes all program areas, counting community members receiving mailings, attending events, direct contact with staff, visiting websites/social media, and exposure to media campaigns. Influenced by climate events. Decrease in FY25 reflects a reduced communications budget 2) Dependent on refugee arrivals 3) Policy recommendations are developed with an environmental justice lens. 4) Measured by a survey. Compliance defined as respondents reporting burning wood only on "no restriction 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.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$748,597	\$991,835	\$732,375	\$1,173,515
Contractual Services	\$21,276	\$269,849	\$22,063	\$539,505
Materials & Supplies	\$75,601	\$40,278	\$71,760	\$222,360
Internal Services	\$600	\$218,305	\$670	\$271,325
<b>Total GF/non-GF</b>	<b>\$846,074</b>	<b>\$1,520,267</b>	<b>\$826,868</b>	<b>\$2,206,705</b>
<b>Program Total:</b>	<b>\$2,366,341</b>		<b>\$3,033,573</b>	
<b>Program FTE</b>	4.65	6.65	4.05	7.53

Program Revenues				
Intergovernmental	\$0	\$1,369,024	\$0	\$2,206,705
Service Charges	\$0	\$151,243	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,520,267</b>	<b>\$0</b>	<b>\$2,206,705</b>

## Explanation of Revenues

This program generates \$198,441 in indirect revenues.  
 \$ 861,672 - Modernization Local-State  
 \$ 667,848 - EPA Fish Advisory  
 \$286,136 - EPA Environmental Justice  
 \$ 83,227 - HealthShare of Oregon  
 \$ 57,822 - Columbia Slough Fish Consumption  
 \$250,000 - Health Disparities Grant

## Significant Program Changes

**Last Year this program was:** FY 2024: 40037 Environmental Health Community Programs

The PWB City Lead Line funding ended as a new treatment system was brought online

**Department:** Health Department      **Program Contact:** Jeff Martin  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 40037A  
**Program Characteristics:** New Request

**Executive Summary**

To improve public health, the City of Portland and Multnomah County worked with community members to develop an ordinance that would help Portland transition away from gas leaf blowers (GLBs) to electric leaf blowers. Switching from gas to electric equipment will benefit our local environment and improve quality of life for workers and neighbors. Multnomah County will be partnering with the City of Portland to assist with the implementation of gas-powered leaf blower phase-out policy. The policy will gradually phase out the use of gas-powered backpack and handheld leaf blowers. Through education, incentives and enforcement we will work with businesses and property owners to understand and come into compliance with this new ordinance.

**Program Description**

**Education and Outreach.** The Health Department will develop and implement a marketing campaign to inform the public of policy changes and available incentives. The campaign will develop materials to target specific market segments, including landscapers, property management companies and owners, and residents. Campaign materials will include a webpage, social media posts, posters, and mailers. Translation into multiple languages for all campaign materials will be standard. This campaign will begin in Fall 2024.

**Enforcement.** The City of Portland and Multnomah County plan on entering into an intergovernmental agreement that will delegate enforcement authority to the County. County staff will develop an enforcement program based on the final statute adopted by the Portland City Council, program rules developed by the City of Portland Staff, and the intergovernmental agreement between the City of Portland and Multnomah County. Enforcement will be complaint-driven; staff will field complaints, track them in a database, evaluate complaints, collect evidence, issue citations, and respond to appeals. Environmental Health will model the enforcement systems on existing code compliance programs. FY25 activities will include establishing database and complaint intake systems, recruiting and hiring enforcement staff, and initiating enforcement of City of Portland Code Chapter 8.80.040 section C. Remaining requirements will be enforced beginning January 1, 2026.

**Incentives.** Health Department staff will administer incentive programs. Health Department staff will coordinate with the Office of Sustainability to disseminate information on incentives and refer eligible parties.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Reach and impressions of community members receiving information on environmental threats	N/A	N/A	N/A	4,000,000
Outcome	Number of complaints successfully resolved	N/A	N/A	N/A	20

**Performance Measures Descriptions**

1) Includes community members receiving mailings, attending events, direct contact with staff, visiting websites/social media, and exposure to media campaigns. 2) Successful resolution of complaint is defined as the cessation of the use of a gasoline leaf blower, whether by education or citation. This will be affected by the timing of program ramp-up in FY25 and there is significant uncertainty about the volume of complaints. Expected to increase when additional requirements go into effect in January 2026 and 2028.

## Legal / Contractual Obligation

City of Portland codes 8.80

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$0	\$151,289	\$0
Contractual Services	\$0	\$0	\$58,711	\$0
Materials & Supplies	\$0	\$0	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$210,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$210,000</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 offer includes \$80,000 of one-time-only funding.

**Department:** Health Department      **Program Contact:** Dr. Julie Maher  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**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, injury burden among community populations; identify determinants of health and disease; evaluate the impact of public health interventions; assess the status of health equity to guide decisions made by public health leaders, 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 population health data to prevent disease and promote and protect the health of county residents. CES 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. CES works particularly closely with the Communicable Disease Services program to provide outbreak response through data analysis support and statistical modeling.

Key CES functions include: 1) Providing support in quantitative and qualitative methods; traditional epidemiological analysis; social epidemiology; and equity-focused and trauma-informed methods for data collection and analyses; 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; 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 \$6 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 PREVAYL).

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# of community engagements and collaborations (presentations, listening sessions, briefings, etc.)	N/A	N/A	N/A	10
Outcome	# of health data reports (including publications, web pages, and other public-facing data provision)	N/A	N/A	N/A	9
Outcome	# of diseases, conditions, or risk behaviors for which routine surveillance or survey analysis was conducted	N/A	N/A	N/A	40
Outcome	# of dissemination products (presentations, briefs, reports, manuscripts) created for PDES evaluation	N/A	20	47	30

**Performance Measures Descriptions**

Three performance measures were added for FY25 to better reflect the work of CES. Two of the new measures provide better specificity regarding the type of data products included in each measure, and the third relates to the number of diseases or conditions routinely tracked by CES. A previous performance measure related to Covid monitoring was removed.



## 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	2024	2024	2025	2025
Personnel	\$1,475,101	\$2,444,003	\$1,525,099	\$2,794,165
Contractual Services	\$0	\$2,117,854	\$0	\$837,880
Materials & Supplies	\$22,266	\$128,511	\$36,490	\$115,674
Internal Services	\$118,340	\$369,359	\$123,365	\$540,559
<b>Total GF/non-GF</b>	<b>\$1,615,707</b>	<b>\$5,059,727</b>	<b>\$1,684,954</b>	<b>\$4,288,278</b>
<b>Program Total:</b>	<b>\$6,675,434</b>		<b>\$5,973,232</b>	
<b>Program FTE</b>	8.01	14.24	7.45	14.91

Program Revenues				
Intergovernmental	\$0	\$5,059,727	\$0	\$4,288,278
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,059,727</b>	<b>\$0</b>	<b>\$4,288,278</b>

## Explanation of Revenues

This program generates \$471,540 in indirect revenues.

OHA LPHA(State Funding): \$1,903,477

Fed Thru State Injury Prevention \$28,623

Natl Institutes of Health: \$358,178

CDC Disparities Grant: \$1,593,467

Direct Other \$404,533

## Significant Program Changes

**Last Year this program was:** FY 2024: 40048 Community Epidemiology

Last year Program Design and Evaluation Services were in program offer 40096A.

**Department:** Health Department      **Program Contact:** Charlene McGee  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 40006, 40060, 40037  
**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/Black 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 the 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 four current strategic areas of focus: nutrition, physical activity, breastfeeding and vaccinations. 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 and the implementation of the Active People Healthy Multnomah County Campaign. The vaccination strategy area serves as community clinical linkage and seeks to identify barriers to vaccine uptake, equipping community members to support vaccination strategies, and implementing vaccine clinics. 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, communication collaterals, 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. REACH is steered by its multi-sectoral community advisory committee, the ACHIEVE Coalition. REACH and its partners regularly hold focus groups, community webinars and podcasts, cultural celebrations and events to gather community concerns.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# of policy, systems, and environment strategies implemented	25	26	25	25
Outcome	# of people impacted by policies established to promote health, safety & address social determinants of health	10,214	15,000	20,000	10,000
Output	# of communication campaigns, social media post, media spots and health promotion webinars	20	20	25	25
Output	# of community partnerships through outreach/capacity building and awareness raising	N/A	35	55	35

**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	2024	2024	2025	2025
Personnel	\$394,167	\$908,515	\$831,997	\$614,129
Contractual Services	\$154,286	\$1,076,735	\$71,561	\$1,366,709
Materials & Supplies	\$28,524	\$57,525	\$35,454	\$56,754
Internal Services	\$137,453	\$126,920	\$185,792	\$103,848
<b>Total GF/non-GF</b>	<b>\$714,430</b>	<b>\$2,169,695</b>	<b>\$1,124,804</b>	<b>\$2,141,440</b>
<b>Program Total:</b>	<b>\$2,884,125</b>		<b>\$3,266,244</b>	
<b>Program FTE</b>	2.60	6.52	5.12	2.90

Program Revenues				
Intergovernmental	\$0	\$2,169,695	\$0	\$2,141,440
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,169,695</b>	<b>\$0</b>	<b>\$2,141,440</b>

Explanation of Revenues

This program generates \$103,848 in indirect revenues.  
 Direct Federal: \$719,008 - REACH GY09  
 Direct State: \$69,695 - Community Chronic Disease Prevention  
 Direct Federal: \$495,000 - Addressing Conditions To Improve Populations Health (ACTion)  
 Direct State: \$63,216 - REACH Self-Advocacy Innovative  
 Federal: \$302,890 - COVID-19 Federal REACH - Flu Vaccination  
 Federal: \$491,631 - COVID-19 Federal CDC Health Disparities

Significant Program Changes

**Last Year this program was:** FY 2024: 40053 Racial and Ethnic Approaches to Community Health

In FY 2024, the CDC awarded the Multnomah County REACH Program \$1,021,898, which is \$468,718 less than requested. This reduction impacts the Chronic Disease Prevention and Health Promotion Unit (CDPHP) and the REACH Program, as we continue to evolve to operate through a shared risk and protective factor framework. Our budget strategy is a braided approach. This reduction has an impact on overall program FTE. Due to this decreased funding, we are working to continue to preserve the program and ensure program and organizational capacity to deliverable on the identified workplan.

**Department:** Health Department      **Program Contact:** Veronica Lopez Ericksen  
**Program Offer Type:** Restoration Request      **Program Offer Stage:** Adopted  
**Related Programs:** 40055, 40056, 40058, 40097  
**Program Characteristics:**

### Executive Summary

Nurse Family Partnership (NFP) is a nurse home visiting program under the Parent, Child, and Family Health (PCFH) program, which offers services to first-time, pregnant people living on low incomes. It is delivered through two Multnomah County teams that serve 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. Funding provided in this budget will maintain NFP for this fiscal year while PCFH considers a possible restructuring of home visiting programs with community input.

### Program Description

Home visiting services begin in early pregnancy and follow families up to their first 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.

The Parent, Child, and Family Health (PCFH) program has 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.

The funding provided in this program supports the continuation of NFP and a potential expansion of Babies First and/or Family Connects home visiting programs within the PCFH suite of services. This would allow the program to maximize newly authorized state funding for NFP while exploring the potential of additional services that may serve more families in a cost effective manner.

Families have shared that they continue to need intensive case management and holistic support beyond their first child. By considering expanding the Babies First model, the division could increase the number of families served each fiscal year, decrease barriers to services, and increase revenue by billing/reimbursement for more visits.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of families served	216	330	204	200
Outcome	Percent of mothers enrolled in NFP services who are breastfeeding at 6 months	60%	65%	65%	65%
Quality	Percent of participants who express satisfaction with program's cultural responsiveness	95%	95%	95%	95%

### Performance Measures Descriptions

The transition to various home visiting models may have an impact on productivity in the first year of transition; we are estimating conservatively as we build upon the services we would like to offer in the PCFH restructure.

## 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 from the County general fund at 40% of the generated revenue.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$183,578	\$1,876,725	\$1,032,432	\$1,117,868
Contractual Services	\$701,808	\$0	\$109,701	\$530,335
Materials & Supplies	\$21,875	\$23,834	\$15,000	\$0
Internal Services	\$75,194	\$386,627	\$0	\$189,032
<b>Total GF/non-GF</b>	<b>\$982,455</b>	<b>\$2,287,186</b>	<b>\$1,157,133</b>	<b>\$1,837,235</b>
<b>Program Total:</b>	<b>\$3,269,641</b>		<b>\$2,994,368</b>	
<b>Program FTE</b>	1.11	9.09	4.68	5.52

Program Revenues				
Intergovernmental	\$0	\$88,802	\$0	\$0
Other / Miscellaneous	\$0	\$46,556	\$0	\$0
Service Charges	\$0	\$2,151,828	\$0	\$1,837,235
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,287,186</b>	<b>\$0</b>	<b>\$1,837,235</b>

## Explanation of Revenues

This program generates \$189,032 in indirect revenues. Revenue is from fee for service visits for Targeted Case Management. Targeted Case Management includes the Babies First and Nurse Family Partnership home visiting services.

\$1,837,235 Medicaid TCM/Babies First

## Significant Program Changes

**Last Year this program was:** FY 2024: 40054 Nurse Family Partnership

Restore and restructure of home visiting services to align with home visiting models of Babies First and Family Connects.

**Department:** Health Department      **Program Contact:** Veronica Lopez Ericksen  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 40054, 40056, 40058, 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 with David Douglas School District (DDSD) Multnomah Early Childhood Program (MECP) providing families from African American, Latino, and Vietnamese families with early childhood CHW support and advocacy.

**Program Description**

Research shows the conditions of early life have a profound impact on long-term health and life stability. Home and community based services support families with children who have a chronic health condition and/or are identified as high-risk in community settings. The families in the MECP (Multnomah Early Childhood Program) are parenting children with health and developmental conditions. Services include health assessments in the home or classroom; care coordination; technical assistance for providers who serve children with special healthcare needs; advocacy for children and families in the health care, social service, and education systems; building a family's capacity to access service systems; reducing environmental toxins in the home; and providing culturally congruent health care experiences.

Nurse Consultation and CHW (Community Health Workers) funding for services, support and advocacy at MECP have continued to be provided via a contract with DDSD.

In 2015 PCFH was asked to support Early Intervention providers with culturally specific early childhood Nurse and CHW services, and currently provides 1.00 FTE Nurse and 3.00 FTE CHWs serving African American, Latino and Vietnamese families. These are focused on improving engagement of individual families and cultural communities with Early Intervention services at DDSD MECP. DDSD pays for the full cost of the staffing of this racial equity driven program enhancement.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# of families receiving nursing/CHW consultation and support	300	300	300	300
Outcome	Percent of staffing to reach maximum capacity for clients and families	75%	100%	100%	100%

**Performance Measures Descriptions**

Output #1 Consultations and support for children and families served are not entered into PCFH data systems. There is no accurate estimate as MECP does not share actual consultations/ support documentation or data.

## 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	2024	2024	2025	2025
Personnel	\$0	\$469,400	\$0	\$492,004
Materials & Supplies	\$30,000	\$15,786	\$0	\$15,786
Internal Services	\$142,422	\$65,576	\$117,685	\$87,233
<b>Total GF/non-GF</b>	<b>\$172,422</b>	<b>\$550,762</b>	<b>\$117,685</b>	<b>\$595,023</b>
<b>Program Total:</b>	<b>\$723,184</b>		<b>\$712,708</b>	
<b>Program FTE</b>	0.00	3.80	0.00	3.80

Program Revenues				
Intergovernmental	\$0	\$550,762	\$0	\$595,023
<b>Total Revenue</b>	<b>\$0</b>	<b>\$550,762</b>	<b>\$0</b>	<b>\$595,023</b>

## Explanation of Revenues

This program generates \$83,198 in indirect revenues.  
\$ 595,023 - David Douglas School District

## Significant Program Changes

**Last Year this program was:** FY 2024: 40055 Home and Community Based Consulting

David Douglas School District (DDSD) Nurse consultation and Community Health Worker services are fully funded by DDSD and will continue in FY 2025 with no planned changes.

**Department:** Health Department      **Program Contact:** Veronica Lopez Ericksen  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 40054, 40055, 40058, 40097  
**Program Characteristics:**

**Executive Summary**

Healthy Families of Multnomah County (HFMC) is a nationally accredited, culturally adapted early childhood home visiting (ECHV) program, part of the state-wide Healthy Families network. HFMC serves families with elevated risks for 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**

HFMC delivers long term (3 years) family-centered, culturally responsive, and strengths-based support. Families are offered voluntary ECHV, 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 screens Medicaid eligible families and coordinates care. HFMC contract orgs.(38 ECHV staff) serving specific communities incl. African American, Immigrant/Refugee (multiple cultural and linguistic groups), Latino, teen, and parents with significant substance use or trauma histories. Mental health supports and system advocacy/navigation is provided. Approximately 84% of HFMC families are Black, Latino, Asian, Indigenous or other People of Color, and 93% are low income. HFMC takes a data-driven approach. A regular continuous quality improvement 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 are reflective of the HFMC program. Members evaluate data and guide program practices.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# of families served with home visiting	508	480	500	500
Outcome	% of participating families in program 12 mo. or more	66%	70%	80%	70%
Outcome	% of families served are BIPOC and/or low income	95%	95%	95%	95%
Outcome	BIPOC Families matched with Direct Service Staff sharing cultural attributes %	82 / 84	N/A	N/A	85/ 85

**Performance Measures Descriptions**

1.# of families served 2)% retention of families at 12 mo. from service initiation (used 2022 data-home based engagement impacted by Covid-19 still). 3. % of families served who were low income (on OHP) and/or Black, Indigenous or People of color; 4.New: Compares % of Black, Latino, Asian, Native Am. and other families of color in services with same % of direct service providers.



## 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	2024	2024	2025	2025
Personnel	\$52,123	\$722,314	\$548,915	\$359,820
Contractual Services	\$700,908	\$2,439,202	\$386,406	\$3,108,800
Materials & Supplies	\$192	\$29,600	\$7,064	\$43,180
Internal Services	\$119,904	\$100,907	\$158,580	\$60,845
<b>Total GF/non-GF</b>	<b>\$873,127</b>	<b>\$3,292,023</b>	<b>\$1,100,965</b>	<b>\$3,572,645</b>
<b>Program Total:</b>	<b>\$4,165,150</b>		<b>\$4,673,610</b>	
<b>Program FTE</b>	0.29	5.27	3.72	2.28

Program Revenues				
Intergovernmental	\$0	\$3,212,023	\$0	\$3,572,645
Other / Miscellaneous	\$0	\$80,000	\$0	\$0
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,292,023</b>	<b>\$0</b>	<b>\$3,572,645</b>

## Explanation of Revenues

This program generates \$60,845 in indirect revenues.

Healthy Families of Multnomah County is funded by the Oregon Dept. of Early Learning and Care (DELIC) Healthy Families and Early Learning Account (ELA) grants, Maternal Infant Early Childhood Home Visiting (MIECHV) grant, and Medicaid Administrative Claiming (MAC) funds, as described below:

Direct State - DELIC Healthy Families grant: \$2,819,476

Direct State - DELIC Early Learning Account grant: \$171,764

Federal through State - OHA MIECHV grant: \$80,000

Federal Medicaid Administrative Claiming allowance: \$163,405 HF staff complete regular time studies to leverage funds.

Federal: COVID-19 Federal CDC Health Disparities: \$338,000

## Significant Program Changes

**Last Year this program was:** FY 2024: 40056 Healthy Families

In FY 2025, RFPs will be launched by Health Families (HF) for 2 culturally congruent Latino HV teams and 1 serving families coping with experiences that make bonding with and caring for new infants uniquely stressful-parent histories of trauma, mental health struggles and/or substance use. These are 2 populations currently served by HF contractor orgs, but not in specialized teams The RFP invites Latino service organizations to apply and will also allow for a thoughtful redesign of Healthy Family SUD/MH services.

**Department:** Health Department      **Program Contact:** Veronica Lopez Ericksen  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 40054, 40055, 40056, 40097  
**Program Characteristics:**

### Executive Summary

The Healthy Birth Initiative (HBI) program improves birth outcomes and the health of mothers, birthing people, and fathers of Black babies in the African American community, helping children get a healthy start in life. For over 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, to improve health outcomes before, during, and after pregnancy and reduce racial/ethnic differences in rates of infant death and adverse perinatal outcomes within the local Black/African American community. 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 that engages mothers, fathers, parents, and other caretakers in supporting a child's development. HBI services (including home visits, health education, and support groups) are available to mothers, fathers, and parents throughout pregnancy and for the baby's first 2 years.

Components of HBI include case management, health education, community engagement, service coordination, and collective impact. HBI serves as a subject matter expert to local health and hospital systems, community-based service providers, and regional and State legislative efforts. HBI promotes care coordination between internal Health Department programs, external health and social service providers, nursing schools, and larger health systems.

HBI uses program data, as well as local, state, and national data to guide programmatic focus. HBI reaches the Black/African American community through targeted marketing and outreach both to community members and providers who serve the community, as well as by engaging clients in a Community Consortium. The Consortium is led by parents and comprises a number of healthcare, social service, and culturally specific agencies working together to implement community-identified strategies. The Consortium offers a venue for client engagement and feedback, including the opportunity for clients to hold leadership roles to influence program design and implementation.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of families served	284*	350	350	350
Outcome	Percent of mothers initiating breastfeeding after delivery	97%	99%	99%	99%
Quality	Percent of participants who remain in program until child is two years old	**	70%	70%	70%
Quality	Percent of participants who express satisfaction with cultural specificity of program	94%	100%	100%	100%

### Performance Measures Descriptions

\*494 individuals served in 284 families

\*\* Not applicable for this year due to grant requirements changed the following year.

## 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	2024	2024	2025	2025
Personnel	\$993,999	\$1,758,680	\$1,277,231	\$1,466,290
Contractual Services	\$223,016	\$484,250	\$541,962	\$186,064
Materials & Supplies	\$63,743	\$36,922	\$64,168	\$71,536
Internal Services	\$305,416	\$245,689	\$0	\$652,433
<b>Total GF/non-GF</b>	<b>\$1,586,174</b>	<b>\$2,525,541</b>	<b>\$1,883,361</b>	<b>\$2,376,323</b>
<b>Program Total:</b>	<b>\$4,111,715</b>		<b>\$4,259,684</b>	
<b>Program FTE</b>	6.36	11.39	8.00	8.25

Program Revenues				
Intergovernmental	\$0	\$1,506,072	\$0	\$1,338,572
Other / Miscellaneous	\$0	\$25,092	\$0	\$25,092
Service Charges	\$0	\$994,377	\$0	\$1,012,659
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,525,541</b>	<b>\$0</b>	<b>\$2,376,323</b>

## Explanation of Revenues

This program generates \$247,950 in indirect revenues.  
 Direct Federal Healthy Birth Initiative grant - \$1,100,000  
 Targeted Case Management revenue - \$1,012,659  
 Federal through State OHA Reproductive Health Program - \$112,500  
 HealthShare of Oregon Regional Perinatal Continuity - \$126,072  
 HBI Misc Charges/Recoveries - \$25,092

## Significant Program Changes

**Last Year this program was:** FY 2024: 40058 Healthy Birth Initiative

HBI has resumed all operations and activities with in-person home visiting, optional telehealth visits, and classes and community engagement events in various formats. All HRSA grant commitments are being delivered. In FY 2024 HBI expects to transition from paper charting to Epic Electronic Health Records. This transition will ultimately streamline data collection and efficiency, after a brief learning period.

In the fall of 2023, HBI reapplied for the HRSA grant for its core program grant funding. The success of this reapplication will shape the program design and fiscal needs going into FY 2025. HBI has a contingency plan identified in the likelihood that the program is not selected for funding.

**Department:** Health Department      **Program Contact:** Charlene McGee  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 40007, 40053  
**Program Characteristics:**

### 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# of youth and community members engaged in health promotion and prevention activities	16,110	8,500	9,788	5,000
Outcome	# of policies, practices, health education, and technical assistance activities	739	100	616	100
Outcome	# of community and school sites involved in health promotion and prevention activities	56	75	44	30
Quality	% of trained adults who feel confident leading comprehensive sexuality/violence prevention education	99%	85%	85%	85%

### Performance Measures Descriptions

Measures 1 and 2 include school and community settings. Measure 4 is based on feedback from adult participants in school and community trainings.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$1,589,529	\$1,331,072	\$1,266,315	\$1,150,176
Contractual Services	\$0	\$815,500	\$3,545	\$59,472
Materials & Supplies	\$59,168	\$35,560	\$115,165	\$14,750
Internal Services	\$322,005	\$238,172	\$431,918	\$207,575
<b>Total GF/non-GF</b>	<b>\$1,970,702</b>	<b>\$2,420,304</b>	<b>\$1,816,943</b>	<b>\$1,431,973</b>
<b>Program Total:</b>	<b>\$4,391,006</b>		<b>\$3,248,916</b>	
<b>Program FTE</b>	11.26	8.87	8.15	7.55

Program Revenues				
Intergovernmental	\$0	\$2,420,304	\$0	\$1,431,973
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,420,304</b>	<b>\$0</b>	<b>\$1,431,973</b>

Explanation of Revenues

This program generates \$194,494 in indirect revenues.  
 Direct State - Public Health Modernization \$400,739  
 Direct Federal - PREVAYL Preventing Violence Affecting Young Lives -\$253,763  
 Direct Federal - BJA STOP School Violence - \$777,471

Significant Program Changes

Last Year this program was: FY 2024: 40060 Community & Adolescent Health

In FY 2024, CAH experienced the loss of grant funding from the Office of Population Affairs Teen Pregnancy Prevention (TPP) at \$1,455,000 per year. A spring 2023 application for the next round of grant funding was unsuccessful. Some level of services will continue through CAH's ongoing County General Funds, but the program will shift to prioritize work based on limited capacity.

**Department:** Health Department      **Program Contact:** Neisha Saxena  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**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, and COVID-19 have led to increased drug use and the continued need for harm reduction services. The program links individuals to substance use treatment when ready, health education, and other resources. It also provides technical assistance to other Oregon counties, 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 will support increased overdose prevention and response coordination across health department divisions, with other county departments, and external partners, especially in outreach settings.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of unique clients served	4,890	6,300	5,500	6,500
Outcome	Number of overdose rescues reported	590	850	1,700	1,000
Outcome	Percentage of clients served that identify as BIPOC	23%	27%	26%	27%
Output	Number of syringes distributed	4,359,875	5,000,000	3,353,858	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	2024	2024	2025	2025
Personnel	\$709,179	\$694,450	\$1,014,263	\$607,600
Contractual Services	\$246,827	\$101,152	\$255,960	\$101,152
Materials & Supplies	\$631,448	\$2,620,955	\$513,528	\$2,234,966
Internal Services	\$286,404	\$94,080	\$373,173	\$98,203
<b>Total GF/non-GF</b>	<b>\$1,873,858</b>	<b>\$3,510,637</b>	<b>\$2,156,924</b>	<b>\$3,041,921</b>
<b>Program Total:</b>	<b>\$5,384,495</b>		<b>\$5,198,845</b>	
<b>Program FTE</b>	4.60	5.10	5.10	4.48

Program Revenues				
Intergovernmental	\$0	\$757,504	\$0	\$829,029
Other / Miscellaneous	\$0	\$2,753,133	\$0	\$2,212,892
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,510,637</b>	<b>\$0</b>	<b>\$3,041,921</b>

## Explanation of Revenues

This program generates \$95,969 in indirect revenues.

Federal: \$ 283,328 -HIV Prevention Block - Prevention Services

State: \$ 91,249 - HIV Prevention Block - NEX

State: \$ 46,835 - HIV Early Intervention Grant Harm Reduction GY06

Federal: \$ 50,000 - Naloxone Project (SOR)

State: \$ 211,767 - Public Health Modernization Local - Harm Reduction

\$ 34,000 - HealthShare of Oregon Harm Reduction Needle Exchange

\$ 2,012,892 - Overdose Prevention and Naloxone Distribution - Naloxone and Harm Reduction Supplies

\$ 200,000 - Harm Reduction Charges/Recoveries

Federal: \$111,850- Comprehensive Opioid, Stimulant, and Substance Use Site-Based Program (COSSUP) - Harm Reduction

## Significant Program Changes

Last Year this program was: FY 2024: 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 this changing need. The Harm Reduction Center (HRC) has reduced clinical services in response to decrease in external funding. In FY 2024, we were awarded a \$3.95M CareOregon grant to require distribution of naloxone and harm reduction supply kits to public service agencies and community based organizations across the Tri-County region.

**Department:** Health Department      **Program Contact:** Neisha Saxena  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Health Department Harm Reduction Program will train clients on naloxone use and opiate overdose prevention, distribute naloxone to clients for their use, encourage clients to promote overdose prevention messages and disseminate naloxone through drug-using and social networks and families, and provide referral to clients to treatment.

**Program Description**

The opioid epidemic, rising methamphetamine use, increased fentanyl in the community have led to increased overdose deaths. Opioid overdose prevention and response education and naloxone distribution to people who use opioids and family/friends/service providers who may recognize an overdose has saved numerous lives locally and nationally. This program links individuals to substance use treatment, health education, and other resources. It also provides technical assistance to community partners to integrate overdose prevention and response activities into their service delivery.

This program funded with Opioid Settlement funds backfilled a State funding reduction beginning in FY 2024, so this critical service can continue. The program provides policy, strategic, operational, and training, in coordination with Oregon Health Authority and other harm reduction leaders. Leveraging a diverse set of community based organizations in education, healthcare, housing, and correctional settings, that interact with staff and clients at risk for overdose. Giving them the tools needed to respond to an overdose on their premises. This will include training staff at each site in naloxone/overdose prevention and education. Providing guidance and best practice recommendations for staffing; organizing stakeholder inclusive planning processes; creating alignment with law enforcement; and policy creation including Standing Orders. Service promotion, staff safety, integrating naloxone with other harm reduction activities, and supporting harm reduction messaging for addictions treatment engagement will be essential components.

Culturally specific organizations will be the priority. The program collects race/ethnicity data and conducts comprehensive bi-annual surveys on demographics and drug use behaviors to inform policy and improve service delivery. Ensuring organizations who deliver culturally specific services integrate harm reduction activities, including syringe distribution and overdose prevention effectively.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of naloxone doses distributed to harm reduction clients	14,218	24,000	20,900	22,000
Outcome	Number of community partners receiving overdose response and naloxone training	N/A	240	100	200

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$230,140	\$0	\$205,823	\$0
Materials & Supplies	\$49,860	\$0	\$63,405	\$0
<b>Total GF/non-GF</b>	<b>\$280,000</b>	<b>\$0</b>	<b>\$269,228</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$280,000</b>		<b>\$269,228</b>	
<b>Program FTE</b>	1.00	0.00	1.45	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 2024: 40061B Harm Reduction - Opioid Settlement Investment

**Department:** Health Department      **Program Contact:** Neisha Saxena  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 40010A, 40010B  
**Program Characteristics:** New Request

**Executive Summary**

The Harm Reduction Street Outreach Team acts as a very low barrier access point for health supplies, HIV/STD testing, and referrals for substance use treatment or medication supported recovery for houseless and housing insecure people who use drugs. Harm Reduction Street Outreach staff engage with houseless community members daily and work hard to provide a safe and trusted point of contact to people who otherwise might not seek services. As a non-judgemental and non-coercive strategy, harm reduction works well alongside a housing-first approach to ensure clients have access to basic needs to facilitate their health journey.

**Program Description**

The Harm Reduction Program is experienced and skilled at working with people who use drugs to deliver a welcoming, non-judgemental, and non-coercive array of services aimed at reducing the potential harms associated with substance use and misuse. A team of outreach oriented harm reductionists will work with internal and external partners to identify available long-term housing options for clients including supportive housing, housing-based treatment programs, recovery houses, as well as short-term housing options as needed.

This team will ensure person-centered and trauma-informed contact with eligible clients. Staff will leverage distributed cell phones and incentivized meetings to increase client communication. Staff will be working in the field every working day to locate potential clients and to maintain meaningful connection. Many clients require a level of trust before they can begin to make this sort of commitment, and our staff are aware that many people will help you find them if they want to be found. In addition, this team will continue to provide routine harm reduction services, such as distributing naloxone, as well as technical assistance for housing-focused community partners who are interested in furthering the mission of the Harm Reduction Program.

The geographic focus of this team will be serving the Central City and Montavilla/I-205 Corridor. This team will be supported by 4 Community Health Specialist 2, 1 Program Specialist, and 1 Program Supervisor. CHS2 would conduct outreach services through foot-based and community partnership efforts to identify clients, conduct assessments, and support housing access. The Program Specialist will provide scheduling and operations support and create and maintain data systems. The Program Supervisor, in addition to other duties, will act as liaison to JOHS and housing advocates.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of new enrollees into exchange/naloxone database	N/A	N/A	N/A	350
Outcome	Number of people enrolled in a housing programs	N/A	N/A	N/A	75
Outcome	Number of clients referred out to other housing teams	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	2024	2024	2025	2025
Personnel	\$0	\$0	\$692,971	\$0
Materials & Supplies	\$0	\$0	\$123,933	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$816,904</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$816,904</b>	
Program FTE	0.00	0.00	6.00	0.00

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

Explanation of Revenues

Significant Program Changes

Last Year this program was:

This is a new program

**Department:** Health Department      **Program Contact:** Andrea Hamberg  
**Program Offer Type:** Administration      **Program Offer Stage:** Adopted  
**Related Programs:** 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, 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, and 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 representing diverse communities (Latinx, Black, African I/R, Asian, Slavic, Pacific Islander, Native American, Middle Eastern) 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 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# of Multnomah County Public Health Advisory Board meetings	12	12	12	12
Outcome	# of presentations to BOH about strategies that address disparities within BIPOC communities	15	7	7	7
Output	# of cultural specific and multicultural community partners and events that promote health equity	114	150	152	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.

## 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
<b>Program Expenses</b>	<b>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Personnel	\$2,613,709	\$2,338,742	\$2,183,884	\$1,828,328
Contractual Services	\$636,303	\$1,582,402	\$947,182	\$758,844
Materials & Supplies	\$167,711	\$118,076	\$246,174	\$124,666
Internal Services	\$470,229	\$378,949	\$451,963	\$570,189
<b>Total GF/non-GF</b>	<b>\$3,887,952</b>	<b>\$4,418,169</b>	<b>\$3,829,203</b>	<b>\$3,282,027</b>
<b>Program Total:</b>	<b>\$8,306,121</b>		<b>\$7,111,230</b>	
<b>Program FTE</b>	15.77	15.50	12.17	11.43

<b>Program Revenues</b>				
Intergovernmental	\$0	\$4,418,169	\$0	\$3,282,027
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,418,169</b>	<b>\$0</b>	<b>\$3,282,027</b>

## Explanation of Revenues

This program generates \$309,170 in indirect revenues.

\$1,218,584 - Public Health Infrastructure Grant

\$1,100,953 - Local Public Health Modernization Community Capacitation Center

\$329,000 - G40 0499 01 COVID-19 Federal CDC Health Disparities

\$231,601 - Community Health Needs Assessment/Community Health Improvement Plan Implementation

\$150,000 - MCH Title V: Child and Adolescent Health - FGC

\$133,141 - TBD - HSO HCWC

\$118,748 - TBD - HSO SHARE 2

## Significant Program Changes

**Last Year this program was:** FY 2024: 40096A Public Health Office of the Director

Program Design and Evaluation Services moved from Program Offer 40096A to 40048, Community Epidemiology, in FY 2025.

**Department:** Health Department      **Program Contact:** Veronica Lopez Ericksen  
**Program Offer Type:** Administration      **Program Offer Stage:** Adopted  
**Related Programs:** 40054, 40055, 40056, 40058,  
**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, Healthy Families, 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of billable visits that meet targeted case management (TCM) requirements	3,898	5,448	3,824	3,480
Outcome	Percent of contracts granted to BIPOC vendors	80%	56%	80%	80%

### Performance Measures Descriptions

Client service records will be created in a new Electronic Health Record (EHR) in FY24, and paper charting will be eliminated. New protocols within the EHR will maximize billable claims, efficiency and accuracy, allowing more time for client support and programmatic deliverables. A new measure will be added in FY25 to demonstrate program quality with this change.

## 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	2024	2024	2025	2025
Personnel	\$1,094,714	\$70,170	\$965,531	\$0
Contractual Services	\$13,400	\$100,000	\$11,000	\$133,000
Materials & Supplies	\$44,787	\$53,992	\$19,963	\$20,965
Internal Services	\$162,700	\$9,803	\$455,099	\$88,802
<b>Total GF/non-GF</b>	<b>\$1,315,601</b>	<b>\$233,965</b>	<b>\$1,451,593</b>	<b>\$242,767</b>
<b>Program Total:</b>	<b>\$1,549,566</b>		<b>\$1,694,360</b>	
<b>Program FTE</b>	8.00	0.44	6.00	0.00

Program Revenues				
Intergovernmental	\$0	\$233,965	\$0	\$153,965
Service Charges	\$0	\$0	\$0	\$88,802
<b>Total Revenue</b>	<b>\$0</b>	<b>\$233,965</b>	<b>\$0</b>	<b>\$242,767</b>

## Explanation of Revenues

Direct State - \$88,802 - MCH Babies First Grant  
 Federal through State \$53,965 Title V: Child and Adolescent Health - Mgmt  
 Federal through State \$100,000 Title V: Child and Adolescent Health - IR

## Significant Program Changes

**Last Year this program was:** FY 2024: 40097 Parent, Child, and Family Health Management

Staff reductions include 1.00 FTE Office Assistant Sr. and 1.00 FTE CHS2- Marketing and Outreach Coordinator. Reflective of the reduction of FY 2025, PCFH will undergo space consolidation and changing productivity expectations. 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. Several RFPs, including the Healthy Families RFP, are planned for FY 2024, and will require Administrative staff support. HBI has also pursued grant funding from HRSA in the 5-year cycle and we will be planning for Family Connects, a State mandated program that is expected to be implemented in FY 2026.

### Integrated Clinical Services

Multnomah County’s Integrated Clinical Services (ICS) is the largest Federally Qualified Health Center (FQHC) in Oregon. We provide 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 each year, with a focus on people who otherwise have limited access to health care. Health Center services include highly specialized 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 each person. Sixty percent of our clients identify as people of color. More than 40% are best served in a language other than English -- our clients speak more than 100 different languages. Nearly 15% of our clients have no insurance, and 95% of our clients have incomes below 200% of the Federal Poverty Guidelines.

All programs within ICS are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

# \$266.7 million

## Integrated Clinical Services

Total Adopted Budget

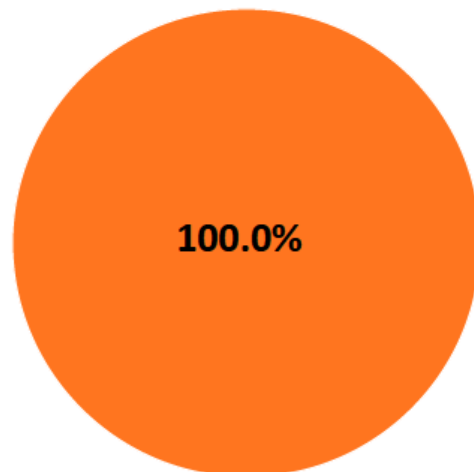
Including cash transfers, contingencies, and unappropriated balances.



# 692.66 FTE

(full time equivalent)

\$266.7M  
Other Funds





### Significant Division Changes

In FY 2025, the Health Center Program will continue to invest in a variety of patient outreach programs, including updating our patient scheduling options, development of a new patient-centered website, and text messaging outreach. These investments are reflected in multiple program offers.

La Clinica de Buena Salud will be relocating in FY 2025 to the new PCC Opportunity Center located on the Corner of NE Killingsworth and 42nd Ave. The new clinic location will have new Dental and Pharmacy Services co-located with Primary Care, expanding access to services in the Cully neighborhood. This work is part of program 40026.

Internal workforce development programming and support roles will continue in FY 2025, including innovative training programs for Expanded Function Dental Assistants, Medical Assistants, and Pharmacy Technicians. These initiatives will help the division fill high-demand roles, and will provide improved health care access to our clients, as well as robust professional development opportunities for our staff.

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Integrated Clinical Services</b>						
40012	FQHC-HIV Clinical Services		0	8,455,267	8,455,267	34.05
40016	FQHC-Medicaid/Medicare Eligibility		0	3,140,745	3,140,745	19.00
40017	FQHC-Dental Services		0	32,623,255	32,623,255	122.09
40019	FQHC-North Portland Health Clinic		0	6,601,064	6,601,064	27.10
40020	FQHC-Northeast Health Clinic		0	7,554,641	7,554,641	29.30
40022	FQHC-Mid County Health Clinic		0	15,073,375	15,073,375	59.15
40023	FQHC-East County Health Clinic		0	12,839,744	12,839,744	49.90
40024	FQHC-Student Health Centers		0	9,295,660	9,295,660	34.10
40026	FQHC-La Clinica de Buena Salud		0	4,664,893	4,664,893	14.50
40027	FQHC-Southeast Health Clinic		0	6,635,714	6,635,714	29.20
40029	FQHC-Rockwood Community Health Clinic		0	8,633,611	8,633,611	28.10
40030	FQHC-Clinical Director		0	2,025,779	2,025,779	3.00
40031	FQHC-Pharmacy		0	43,762,437	43,762,437	62.73
40032	FQHC-Lab and Medical Records		0	5,002,790	5,002,790	22.17
40033	FQHC-Primary Care and Dental Access and Referral		0	5,588,101	5,588,101	31.00

# Health Department

## FY 2025 Adopted Budget

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
40034A	FQHC-Administration and Operations		0	14,501,495	14,501,495	55.40
40034B	FQHC - Contingency and Reserves	X	0	64,057,128	64,057,128	0.00
40036	FQHC-Community Health Council and Civic Governance		0	504,144	504,144	1.00
40102	FQHC Allied Health		0	8,081,636	8,081,636	44.47
40103	FQHC-Quality Assurance		0	7,666,762	7,666,762	26.40
	<b>Total Integrated Clinical Services</b>		<b>\$0</b>	<b>\$266,708,241</b>	<b>\$266,708,241</b>	<b>692.66</b>

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**Department:** Health Department      **Program Contact:** Nick Tipton  
**Program Offer Type:** Operating      **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 1,600 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, one of only two Ryan White clinics 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of unduplicated HIV clinic clients	1,531	1,625	1,600	1,650
Outcome	Percent of clients whose last viral load test is below 200 copies	88.5%	90%	88%	90%

### Performance Measures Descriptions

## 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	2024	2024	2025	2025
Personnel	\$0	\$5,689,228	\$0	\$6,038,265
Contractual Services	\$0	\$139,317	\$0	\$139,317
Materials & Supplies	\$0	\$274,556	\$0	\$274,556
Internal Services	\$0	\$1,745,392	\$0	\$2,003,129
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$7,848,493</b>	<b>\$0</b>	<b>\$8,455,267</b>
<b>Program Total:</b>	<b>\$7,848,493</b>		<b>\$8,455,267</b>	
<b>Program FTE</b>	0.00	35.25	0.00	34.05

Program Revenues				
Intergovernmental	\$0	\$3,352,688	\$0	\$3,228,402
Beginning Working Capital	\$0	\$0	\$0	\$1,263,809
Service Charges	\$0	\$4,495,805	\$0	\$3,963,056
<b>Total Revenue</b>	<b>\$0</b>	<b>\$7,848,493</b>	<b>\$0</b>	<b>\$8,455,267</b>

## Explanation of Revenues

This program generates \$823,345 in indirect revenues.

HD FQHC AETC - AIDS Education & Training Center - EHE \$79,198 HD FQHC HIV Clinic Mcaid FFS \$173,686  
 HD FQHC Russell St HIV \$13,182 HD FQHC HIV Clinic Mcaid \$319,312  
 HD FQHC Ryan White Part C - Early Intervention to HIV GY33 \$763,856 HD FQHC HIV Clinic Pt Fees \$ 3,549  
 HD FQHC Ryan White Title IV Part D GY12 \$520,133 HD FQHC HIV Clinic Patient Fee 3rd Party BWC \$418,321  
 HD FQHC Ryan White Part A - GY30 - HHSC Clinical Service \$703,873 HD FQHC HIV Clinic APM \$2,867,648  
 HD FQHC Ryan White Part A - GY30 - HHSC Case Management \$554,955 HD FQHC HIV Clinic APM BWC \$845,488  
 HD FQHC OHA Ryan White - HIV Clinic - GY08 \$130,000 HD FQHC HIV Clinic Mcaid CareOr FFS \$598,861  
 HD FQHC OHA Ryan White - HHSC MCM - GY08 \$148,785  
 HD FQHC OHA Ryan White HHSC Non-MCM - GY08 \$269,420  
 HD FQHC PC330 - Increase Access HIV Care & Treatment GY23 \$45,000

## Significant Program Changes

**Last Year this program was:** FY 2024: 40012A FQHC-HIV Clinical Services

The Ryan White Part F Special Projects of National Significance grant has completed, which resulted in a drop in funding of \$150,000 from previous years. Additionally, previous years had a separate grant labeled as OHA Assister grant, that has now been rolled in to the regular Ryan White Part B OHA grant with no drop in funding.

**Department:** Health Department      **Program Contact:** Belma Nunez  
**Program Offer Type:** Operating      **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, we had 29,600 clients contacts and there were 1,641 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. After nearly three years of automatic renewals OHA started to roll out a redetermination process for all of its members, this cause a surge of contacts from and to clients to answer questions and assist with re-enrollment paperwork.

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.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Annual number of clients screened	18,900	23,000	29,600	23,000
Outcome	% of Self Pay Patients in Medical	11.5%	9.9%	3.5%	11%
Outcome	% of Self Pay Patients in Dental	7.78%	13.10%	3%	7.9%

**Performance Measures Descriptions**

## 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
<b>Program Expenses</b>	<b>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Personnel	\$0	\$2,193,622	\$0	\$2,305,618
Contractual Services	\$0	\$18,000	\$0	\$18,000
Materials & Supplies	\$0	\$11,800	\$0	\$12,800
Internal Services	\$0	\$661,826	\$0	\$804,327
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,885,248</b>	<b>\$0</b>	<b>\$3,140,745</b>
<b>Program Total:</b>	<b>\$2,885,248</b>		<b>\$3,140,745</b>	
<b>Program FTE</b>	0.00	19.00	0.00	19.00

<b>Program Revenues</b>				
Other / Miscellaneous	\$0	\$0	\$0	\$40,000
Service Charges	\$0	\$2,885,248	\$0	\$3,100,745
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,885,248</b>	<b>\$0</b>	<b>\$3,140,745</b>

## Explanation of Revenues

This program generates \$389,880 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.

\$1,133,498 - Charges for Services, APM

\$40,000 - HD FQHC Care OR - Redetermination

\$1,967,247 - HD FQHC OHP Enrollment Medicaid FFS

## Significant Program Changes

Last Year this program was: FY 2024: 40016 FQHC-Medicaid/Medicare Eligibility

**Department:** Health Department      **Program Contact:** Azma Ahmed  
**Program Offer Type:** Operating      **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 healthcare center is committed to providing culturally and linguistically appropriate care, tailoring our support to meet the unique needs of each patient. With a diverse patient population, exceeding 60% identifying as people of color, and over 40% requiring services in languages other than English, encompassing more than 100 different languages, we embrace diversity and strive for inclusivity. Approximately 15% of our patients are uninsured, while 95% live below 200% of the FPL. Our Dental program comprises three distinct service components.

Seven dental clinics offer comprehensive and urgent dental treatment for both Medicaid and self-pay patients. These clinics proactively reach out to clients who have not had a visit in the past 12-24 months. With a special emphasis on pregnant women, the clinical program aims to minimize the risk of premature birth and foster a collaborative learning environment for good oral health between the dental program and expectant mothers.

The School and Community Oral Health (SCOH) Program delivers dental education and sealant services to children in Multnomah County schools. Additionally, the program conducts outreach, education, and dental treatment tailored for children aged 0-36 months through our clinic's Baby Day program.

The program's newest component involves mentoring and training dental assistants, dental hygiene students, and dental students and residents. These individuals offer services under the guidance of our providers, contributing to the development of a workforce passionate about public healthcare. In FY 25, the dental program will persist in its internal workforce development initiative, encouraging individuals from the communities we serve to become dental assistants in our clinic system.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Billable patient visits	59,002	80,496	72,824	75,816
Outcome	No show rate	18%	17%	19%	18.6%

**Performance Measures Descriptions**



## 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	2024	2024	2025	2025
Personnel	\$0	\$20,739,587	\$0	\$22,485,698
Contractual Services	\$0	\$362,801	\$0	\$493,216
Materials & Supplies	\$0	\$1,298,895	\$0	\$2,171,922
Internal Services	\$0	\$6,118,276	\$0	\$7,472,419
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$28,519,559</b>	<b>\$0</b>	<b>\$32,623,255</b>
<b>Program Total:</b>	<b>\$28,519,559</b>		<b>\$32,623,255</b>	
<b>Program FTE</b>	0.00	120.46	0.00	122.09

Program Revenues				
Intergovernmental	\$0	\$312,000	\$0	\$312,000
Other / Miscellaneous	\$0	\$2,083,173	\$0	\$3,640,582
Beginning Working Capital	\$0	\$1,667,228	\$0	\$2,237,133
Service Charges	\$0	\$24,457,158	\$0	\$26,433,540
<b>Total Revenue</b>	<b>\$0</b>	<b>\$28,519,559</b>	<b>\$0</b>	<b>\$32,623,255</b>

## Explanation of Revenues

This program generates \$3,692,655 in indirect revenues.  
The primary source of revenue is Medicaid payments and patient fees.

BWC/Incentives	\$2,237,133
Non-Governmental Care OR	\$3,640,582
Dental Patient Fees	\$2,496,335
Intergovernmental Fees	\$23,937,205
Federal Primary Care (330) Grant	\$312,000

## Significant Program Changes

**Last Year this program was:** FY 2024: 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 scheduling change will impact 50% of the dentist workforce. This fiscal year, we are creating a workforce development pathway for dental assistants. 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 patient demand for services, predicted staffing, and historical no show rates. Based on this information we project that the dental program can deliver 75,816 visits in FY 2025, a number that will provide access and program fiscal viability.

**Department:** Health Department      **Program Contact:** Katie Thornton  
**Program Offer Type:** Operating      **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 4,500 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), acupuncture 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Individual patients served	4,685	5,000	5,250	5,500
Outcome	Number of visits completed	17,152	13,000	11,676	13,065

**Performance Measures Descriptions**

## 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	2024	2024	2025	2025
Personnel	\$0	\$4,400,457	\$0	\$4,748,214
Contractual Services	\$0	\$122,693	\$0	\$122,693
Materials & Supplies	\$0	\$173,499	\$0	\$173,501
Internal Services	\$0	\$1,278,588	\$0	\$1,556,656
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,975,237</b>	<b>\$0</b>	<b>\$6,601,064</b>
<b>Program Total:</b>	<b>\$5,975,237</b>		<b>\$6,601,064</b>	
<b>Program FTE</b>	0.00	26.35	0.00	27.10

Program Revenues				
Intergovernmental	\$0	\$673,895	\$0	\$673,377
Service Charges	\$0	\$5,301,342	\$0	\$5,927,687
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,975,237</b>	<b>\$0</b>	<b>\$6,601,064</b>

## Explanation of Revenues

This program generates \$802,923 in indirect revenues.

This program is supported by a federal BPHC grant, as well as Medicaid/Medicare fee revenue.

\$110,456 - Medical Fees

\$ 673,377 - Federal PC330/Homeless grant

\$ 5,817,231 - FQHC Medicaid Wraparound/Medicare

## Significant Program Changes

**Last Year this program was:** FY 2024: 40019 FQHC-North Portland Health Clinic

Primary Care appointment lengths previously were set at 15 and 20 minutes. Medical provider appointment now include 30 minute appointment lengths for visits requiring more time. This change may decrease visit numbers.

**Department:** Health Department      **Program Contact:** Katie Thornton  
**Program Offer Type:** Operating      **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 5,938 clients in FY 2023. 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 2023, the clinic saw 5,938 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Individual patients served	4,416	5,500	4,300	4,400
Outcome	Number of visits completed	14,038	16,000	12,458	16,443

**Performance Measures Descriptions**

## 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	2024	2024	2025	2025
Personnel	\$0	\$4,526,452	\$0	\$5,141,417
Contractual Services	\$0	\$143,287	\$0	\$143,286
Materials & Supplies	\$0	\$188,998	\$0	\$188,610
Internal Services	\$0	\$1,721,035	\$0	\$2,081,328
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$6,579,772</b>	<b>\$0</b>	<b>\$7,554,641</b>
<b>Program Total:</b>	<b>\$6,579,772</b>		<b>\$7,554,641</b>	
<b>Program FTE</b>	0.00	27.03	0.00	29.30

Program Revenues				
Intergovernmental	\$0	\$985,060	\$0	\$983,466
Service Charges	\$0	\$5,594,712	\$0	\$6,571,175
<b>Total Revenue</b>	<b>\$0</b>	<b>\$6,579,772</b>	<b>\$0</b>	<b>\$7,554,641</b>

## Explanation of Revenues

This program generates \$869,413 in indirect revenues.

Northeast Health Clinic is supported by the federal BPHC grant, , Medicaid/Medicare and other medical fees.

Federal \$983,466 - Federal Primary Care (330) grant  
 Federal \$ 6,452,979 - FQHC Medicaid Wraparound  
 \$ 118,196 - Patient Fees

## Significant Program Changes

**Last Year this program was:** FY 2024: 40020 FQHC-Northeast Health Clinic

Primary Care appointment lengths previously were set at 15 and 20 minutes. Medical provider appointment now include 30 minute appointment lengths for visits requiring more time. This change may decrease visit numbers.

**Department:** Health Department      **Program Contact:** Amaury Sarmiento  
**Program Offer Type:** Operating      **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 8,879 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Individual patients served	9,834	9,500	9,500	9,800
Outcome	Number of visits completed	29,509	35,659	27,000	33,958

**Performance Measures Descriptions**

## 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	2024	2024	2025	2025
Personnel	\$0	\$9,852,797	\$0	\$10,735,021
Contractual Services	\$0	\$97,407	\$0	\$117,357
Materials & Supplies	\$0	\$608,116	\$0	\$601,416
Internal Services	\$0	\$2,984,893	\$0	\$3,619,581
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$13,543,213</b>	<b>\$0</b>	<b>\$15,073,375</b>
<b>Program Total:</b>	<b>\$13,543,213</b>		<b>\$15,073,375</b>	
<b>Program FTE</b>	0.00	55.10	0.00	59.15

Program Revenues				
Intergovernmental	\$0	\$928,950	\$0	\$928,950
Service Charges	\$0	\$12,614,263	\$0	\$14,144,425
<b>Total Revenue</b>	<b>\$0</b>	<b>\$13,543,213</b>	<b>\$0</b>	<b>\$15,073,375</b>

## Explanation of Revenues

This program generates \$1,815,290 in indirect revenues.

Mid County Health Clinic is supported by the federal BPHC grant, Medicaid/Medicare and other medical fees.

Federal \$ 928,950 - Federal Primary Care (330) grant  
 Federal \$ 13,986,254 - FQHC Medicaid Wrap, Mcare, FFS, APM  
 \$ 158,171 - Patient Fees

## Significant Program Changes

**Last Year this program was:** FY 2024: 40022 FQHC-Mid County Health Clinic

Primary Care appointment lengths previously were set at 15 and 20 minutes. Medical provider appointment now include 30 minute appointment lengths for visits requiring more time. This change may decrease visit numbers.

**Department:** Health Department      **Program Contact:** Lynne Wiley  
**Program Offer Type:** Operating      **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 81% 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 8,367 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 (47.2%), and the white (45.7%). The remaining (7%) of our patients identify as mostly Asian, Middle Eastern/North African, and Pacific Islander.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Individual Patients Served	8,877	9,800	8,367	9,500
Outcome	Number of visits completed	26,247	24,988	22,054	27,706

**Performance Measures Descriptions**



## 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	2024	2024	2025	2025
Personnel	\$0	\$8,833,268	\$0	\$9,231,662
Contractual Services	\$0	\$318,224	\$0	\$318,224
Materials & Supplies	\$0	\$307,818	\$0	\$307,818
Internal Services	\$0	\$2,474,919	\$0	\$2,982,040
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$11,934,229</b>	<b>\$0</b>	<b>\$12,839,744</b>
<b>Program Total:</b>	<b>\$11,934,229</b>		<b>\$12,839,744</b>	
<b>Program FTE</b>	0.00	47.25	0.00	49.90

Program Revenues				
Intergovernmental	\$0	\$1,085,315	\$0	\$1,085,315
Service Charges	\$0	\$10,848,914	\$0	\$11,754,429
<b>Total Revenue</b>	<b>\$0</b>	<b>\$11,934,229</b>	<b>\$0</b>	<b>\$12,839,744</b>

## Explanation of Revenues

This program generates \$1,561,074 in indirect revenues.

East County Health Clinic is supported by the federal BPHC grant, Medicaid/Medicare and other medical fees.

Federal \$ 1,085,315	Federal Primary Care (330) grant
Federal \$ 11,528,420	FQHC Medicaid Wrap, Care Or FFS, APM
\$ 226,009	Patient Fees

## Significant Program Changes

**Last Year this program was:** FY 2024: 40023 FQHC-East County Health Clinic

Primary Care appointment lengths previously were set at 15 and 20 minutes. Medical provider appointment now include 30 minute appointment lengths for visits requiring more time. This change may decrease visit numbers.

**Department:** Health Department      **Program Contact:** Alexandra Lowell

**Program Offer Type:** Operating      **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 (in FY23) Latinx (30%), White (30%), Black (16%), and Asian (8%), and 5% of our patients identify as Pacific Islander, Native American, and Native Hawaiian. (Fifteen percent of clients services did not share or refused to share their race/ethnicity.)

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	% of patients with one or more visits with a health assessment in the last year	60%	51%	68%	70%
Outcome	Number of visits completed	14,321	15,918	14,000	16,339

**Performance Measures Descriptions**

## 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	2024	2024	2025	2025
Personnel	\$0	\$5,566,123	\$0	\$6,161,331
Contractual Services	\$0	\$173,778	\$0	\$506,500
Materials & Supplies	\$0	\$315,225	\$0	\$527,311
Internal Services	\$0	\$1,779,047	\$0	\$2,100,518
Capital Outlay	\$0	\$10,000	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$7,844,173</b>	<b>\$0</b>	<b>\$9,295,660</b>
<b>Program Total:</b>	<b>\$7,844,173</b>		<b>\$9,295,660</b>	
<b>Program FTE</b>	0.00	33.96	0.00	34.10

Program Revenues				
Intergovernmental	\$0	\$1,439,475	\$0	\$1,486,708
Other / Miscellaneous	\$0	\$95,000	\$0	\$45,000
Service Charges	\$0	\$6,309,698	\$0	\$7,763,952
<b>Total Revenue</b>	<b>\$0</b>	<b>\$7,844,173</b>	<b>\$0</b>	<b>\$9,295,660</b>

## Explanation of Revenues

This program generates \$1,041,871 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 \$ 7,383,638 - Medical Fees, Wrap, APM, Mcare, Care FFS  
 State \$ 899,505 - State SHC Grant  
 Federal \$ 373,379 - PC 330 Grant  
 Federal \$ 213,824 - Health Center Program  
 \$ 45,000 - Roots & Wings  
 \$ 380,314 - Charges for Services -patient fees

## Significant Program Changes

Last Year this program was: FY 2024: 40024 FQHC-Student Health Centers

**Department:** Health Department      **Program Contact:** Amaury Sarmiento  
**Program Offer Type:** Operating      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Individual patients served	2,094	2,100	2,100	2,300
Outcome	Number of visits completed	7,094	9,901	8,216	7,400

### Performance Measures Descriptions

## 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	2024	2024	2025	2025
Personnel	\$0	\$2,607,371	\$0	\$2,773,547
Contractual Services	\$0	\$128,118	\$0	\$898,318
Materials & Supplies	\$0	\$99,410	\$0	\$116,931
Internal Services	\$0	\$728,423	\$0	\$876,097
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,563,322</b>	<b>\$0</b>	<b>\$4,664,893</b>
<b>Program Total:</b>	<b>\$3,563,322</b>		<b>\$4,664,893</b>	
<b>Program FTE</b>	0.00	13.90	0.00	14.50

Program Revenues				
Intergovernmental	\$0	\$826,068	\$0	\$826,068
Beginning Working Capital	\$0	\$0	\$0	\$750,000
Service Charges	\$0	\$2,737,254	\$0	\$3,088,825
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,563,322</b>	<b>\$0</b>	<b>\$4,664,893</b>

## Explanation of Revenues

This program generates \$469,001 in indirect revenues.

La Clinica de Buena Salud is supported by the federal BPHC grant, Medicaid/Medicare and other medical fees.

\$ 750,000 - BWC  
 Federal \$ 826,068 - Federal Primary Care/330 grant  
 Federal \$ 3,024,590 - FQHC Medicaid Wrap, Mcaid FFS, CareOR FFS, APM  
 \$ 64,235 - Charges for Services -Patient Fees

## Significant Program Changes

**Last Year this program was:** FY 2024: 40026 FQHC-La Clinica de Buena Salud

La Clinica de Buena Salud will be relocating in FY25 to the new PCC Opportunity Center located on the Corner of NE Killingsworth and 42nd Ave.

The new clinic location will have Dental and Pharmacy Services co-located with Primary Care. These are services that the Cully neighborhood needed. We expect an increase clients served with the move to the new location.

Primary Care appointment lengths previously were set at 15 and 20 minutes. Medical provider appointment now include 30 minute appointment lengths for visits requiring more time. This change may decrease visit numbers.

**Department:** Health Department      **Program Contact:** Nick Tipton  
**Program Offer Type:** Operating      **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, 10% 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of patients served	3,499	3,500	3,500	3,600
Outcome	Number of visits completed	10,879	7,400	9,000	11,663
Outcome	Number of Mobile Clinic visits completed after 1/20/24 start date (medical and dental)	0	3,500	500	3,500

**Performance Measures Descriptions**

## 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>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Personnel	\$0	\$4,601,283	\$0	\$4,888,206
Contractual Services	\$0	\$82,314	\$0	\$82,314
Materials & Supplies	\$0	\$220,985	\$0	\$220,985
Internal Services	\$0	\$1,193,532	\$0	\$1,444,209
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$6,098,114</b>	<b>\$0</b>	<b>\$6,635,714</b>
<b>Program Total:</b>	<b>\$6,098,114</b>		<b>\$6,635,714</b>	
<b>Program FTE</b>	0.00	26.30	0.00	29.20

<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,365,404	\$0	\$1,362,679
Service Charges	\$0	\$4,732,710	\$0	\$5,273,035
<b>Total Revenue</b>	<b>\$0</b>	<b>\$6,098,114</b>	<b>\$0</b>	<b>\$6,635,714</b>

## Explanation of Revenues

This program generates \$825,626 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: \$ 435,502 - Mobile Van Services(330)  
    \$ 133,088 - Charges for Services (Patient Fees)  
    \$ 5,132,973 - FQHC PC Mcaid/Mcare FFS, WRAP, APM  
    \$ 6,974 - FQHC Mobile Health MCAid FFA

## Significant Program Changes

**Last Year this program was:** FY 2024: 40027 FQHC-Southeast Health Clinic

Primary Care appointment lengths previously were set at 15 and 20 minutes. Medical provider appointment now include 30 minute appointment lengths for visits requiring more time. This change may decrease visit numbers.

**Department:** Health Department      **Program Contact:** Lynne Wiley  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 78237  
**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 3910 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 56 % of our patients identify as people of color, and more than 54% are best served in a language other than English, including more than 100 different languages. Nearly 15% of our patients have no insurance, and 68% 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 11,431 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 (32%), and White (46%). The remaining 22% 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Individual patients served	4,014	4,760	3,910	4,500
Outcome	Number of visits completed	12,977	16,564	11,431	12,025

**Performance Measures Descriptions**



## 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	2024	2024	2025	2025
Personnel	\$0	\$4,809,988	\$0	\$4,755,567
Contractual Services	\$0	\$187,057	\$0	\$187,057
Materials & Supplies	\$0	\$190,357	\$0	\$190,357
Internal Services	\$0	\$1,300,286	\$0	\$1,530,630
Cash Transfers	\$0	\$0	\$0	\$1,970,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$6,487,688</b>	<b>\$0</b>	<b>\$8,633,611</b>
<b>Program Total:</b>	<b>\$6,487,688</b>		<b>\$8,633,611</b>	
<b>Program FTE</b>	0.00	27.65	0.00	28.10

Program Revenues				
Intergovernmental	\$0	\$764,768	\$0	\$2,734,766
Service Charges	\$0	\$5,722,920	\$0	\$5,898,845
<b>Total Revenue</b>	<b>\$0</b>	<b>\$6,487,688</b>	<b>\$0</b>	<b>\$8,633,611</b>

## Explanation of Revenues

This program generates \$804,152 in indirect revenues.

Rockwood Community Health Center is supported by the federal BPHC grant, Medicaid/Medicare and other medical fees.

Charges for Svcs: \$ 83,104 - FQHC Rockwood Patient Fees  
 Federal: \$ 764,766 - Federal Primary Care (330) grant  
 Federal: \$ 5,815,741 - Medicaid/Medicare Charges for Services, FFS;APM  
 Federal: \$ 1,970,000 - Rockwood Infrastructure Investment

## Significant Program Changes

**Last Year this program was:** FY 2024: 40029 FQHC-Rockwood Community Health Clinic

Primary Care appointment lengths previously were set at 15 and 20 minutes. Medical provider appointment now include 30 minute appointment lengths for visits requiring more time. This change may decrease visit numbers.

This program includes \$1,970,000 from a federal earmark for the Rockwood clinic. This funding is being cash transferred to the Department of County Assets' program 78237 (Rockwood Community Health Center) where the capital project will be tracked.

**Department:** Health Department      **Program Contact:** Bernadette Thomas

**Program Offer Type:** Operating      **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. Nearly seventy percent (70%) 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 ten percent (10%) 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	80% of primary care providers are maintaining and serving their maximum panel size	72%	80%	84%	80%
Outcome	Maintain compliance with regulatory and licensing standards/boards	99%	100%	100%	100%
Output	Increase # of patients seen in the past year calendar year (unique patients) to pre-covid numbers	53,000	55,000	53,000	57,000
Quality	Achieve 1sts Quartile for UDS Quality Metrics	10%	25%	25%	50%

**Performance Measures Descriptions**

Clinical quality metrics related to cancer screenings, disease management, and more.

## 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	2024	2024	2025	2025
Personnel	\$0	\$1,317,565	\$0	\$1,374,020
Contractual Services	\$0	\$106,000	\$0	\$168,000
Materials & Supplies	\$0	\$112,408	\$0	\$111,718
Internal Services	\$0	\$308,574	\$0	\$372,041
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,844,547</b>	<b>\$0</b>	<b>\$2,025,779</b>
<b>Program Total:</b>	<b>\$1,844,547</b>		<b>\$2,025,779</b>	
<b>Program FTE</b>	0.00	3.00	0.00	3.00

Program Revenues				
Intergovernmental	\$0	\$116,413	\$0	\$115,115
Other / Miscellaneous	\$0	\$278,000	\$0	\$610,534
Beginning Working Capital	\$0	\$200,000	\$0	\$0
Service Charges	\$0	\$1,250,134	\$0	\$1,300,130
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,844,547</b>	<b>\$0</b>	<b>\$2,025,779</b>

## Explanation of Revenues

This program generates \$232,346 in indirect revenues.  
The Clinical Directors Office is funded with State grants and patient revenue.

State: \$ 115,115 - Federal and State family Planning  
 \$ 1,300,130 - FQHC Medicaid Wraparound(charges for services) APM  
 \$ 100,000 - Medicaid Quality and Incentives  
 \$ 510,534 - Shared Accountability Model

## Significant Program Changes

Last Year this program was: FY 2024: 40030 FQHC-Clinical Director

**Department:** Health Department      **Program Contact:** Michele Koder  
**Program Offer Type:** Operating      **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. Over 50% of prescriptions written by health center providers are filled by ICS pharmacies. The pharmacies dispense approximately 400,000 prescriptions per year to insured, underinsured and uninsured clients of all FQHC 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 who are released 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 independently manage chronic conditions such as diabetes and hypertension.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Prescription Volume	387,486	390,000	405,000	410,000
Outcome	Average Prescription Cost	34	36	35	37
Outcome	Capture rate	54%	60%	56%	58%
Quality	Adherence Support	2,030	800	2,050	2,100

**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	2024	2024	2025	2025
Personnel	\$0	\$11,895,116	\$0	\$14,065,528
Contractual Services	\$0	\$318,037	\$0	\$643,450
Materials & Supplies	\$0	\$23,097,544	\$0	\$24,289,154
Internal Services	\$0	\$3,832,152	\$0	\$4,764,305
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$39,142,849</b>	<b>\$0</b>	<b>\$43,762,437</b>
<b>Program Total:</b>	<b>\$39,142,849</b>		<b>\$43,762,437</b>	
<b>Program FTE</b>	0.00	61.63	0.00	62.73

Program Revenues				
Service Charges	\$0	\$39,142,849	\$0	\$43,762,437
<b>Total Revenue</b>	<b>\$0</b>	<b>\$39,142,849</b>	<b>\$0</b>	<b>\$43,762,437</b>

## Explanation of Revenues

This program generates \$2,378,461 in indirect revenues.  
Pharmacy is funded exclusively through prescription fees (third party reimbursements) and patient fees.

Federal \$ 43,630,062 - Intergovernmental  
\$ 132,375 - Patient Fees/Charges for services

## Significant Program Changes

**Last Year this program was:** FY 2024: 40031 FQHC-Pharmacy

The pharmacy program plans continued expansion in fiscal year 2025 to include a post-graduate year 2 ambulatory care residency program and additional pharmacist FTE to increase primary care access, expand population health initiatives, and quality assurance programs - moving away from the provision of traditional provider-centric care to a true multidisciplinary team-based model and assisting with the achievement of quality metrics.

**Department:** Health Department      **Program Contact:** Matt Hoffman  
**Program Offer Type:** Operating      **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 primary care clinic labs handle 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of records requests completed	12,949	13,000	12,500	13,000
Outcome	Lab proficiency/competency assessments completed	95	95	127	127

**Performance Measures Descriptions**

## 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	2024	2024	2025	2025
Personnel	\$0	\$2,347,550	\$0	\$2,914,287
Contractual Services	\$0	\$54,500	\$0	\$54,500
Materials & Supplies	\$0	\$39,338	\$0	\$784,606
Internal Services	\$0	\$986,036	\$0	\$1,249,397
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,427,424</b>	<b>\$0</b>	<b>\$5,002,790</b>
<b>Program Total:</b>	<b>\$3,427,424</b>		<b>\$5,002,790</b>	
<b>Program FTE</b>	0.00	18.50	0.00	22.17

Program Revenues				
Beginning Working Capital	\$0	\$334,426	\$0	\$330,828
Service Charges	\$0	\$3,092,998	\$0	\$4,671,962
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,427,424</b>	<b>\$0</b>	<b>\$5,002,790</b>

## Explanation of Revenues

This program generates \$492,806 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.

- \$ 2,488,665 - Clinical Lab Mcaid Mcare
- \$ 2,183,297 - Medical APM ICS Med Records
- \$ 330,828 - School based Health Center BWC

## Significant Program Changes

Last Year this program was: FY 2024: 40032 FQHC-Lab and Medical Records

**Department:** Health Department      **Program Contact:** Tony Gaines  
**Program Offer Type:** Operating      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of calls answered	225,271	320,000	236,000	250,000
Outcome	Average telephone abandonment rate (goal: at or below 15%)	22%	15%	18%	15%

**Performance Measures Descriptions**



## 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	2024	2024	2025	2025
Personnel	\$0	\$3,540,156	\$0	\$4,147,404
Contractual Services	\$0	\$110,000	\$0	\$110,000
Materials & Supplies	\$0	\$24,922	\$0	\$38,774
Internal Services	\$0	\$1,025,584	\$0	\$1,291,923
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$4,700,662</b>	<b>\$0</b>	<b>\$5,588,101</b>
<b>Program Total:</b>	<b>\$4,700,662</b>		<b>\$5,588,101</b>	
<b>Program FTE</b>	0.00	30.25	0.00	31.00

Program Revenues				
Intergovernmental	\$0	\$906,600	\$0	\$1,056,598
Other / Miscellaneous	\$0	\$640,000	\$0	\$1,035,731
Beginning Working Capital	\$0	\$111,362	\$0	\$244,309
Service Charges	\$0	\$3,042,700	\$0	\$3,251,463
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,700,662</b>	<b>\$0</b>	<b>\$5,588,101</b>

## Explanation of Revenues

This program generates \$694,769 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.

\$ 3,251,463 - HD FQHC Call Center, APM

\$ 1,035,731 - PCPM Funding - Call Center

\$ 244,309 - Medicaid Quality and Incentive & Beginning Working Capital(BWC)

Federal: \$ 906,598 - Federal Primary Care (330) grant

OHA: \$ 150,000 - Healthier Oregon

## Significant Program Changes

**Last Year this program was:** FY 2024: 40033 FQHC-Primary Care and Dental Access and Referral

**Department:** Health Department      **Program Contact:** DJ Rhodes  
**Program Offer Type:** Operating      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Medical Coding Accuracy: % of claims accepted by insurance partners	95%	95%	90%	95%
Outcome	% of patient communication materials are developed in the top five patient languages	100%	100%	90%	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**

## 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	2024	2024	2025	2025
Personnel	\$0	\$9,243,423	\$0	\$10,682,579
Contractual Services	\$0	\$263,000	\$0	\$506,472
Materials & Supplies	\$0	\$247,868	\$0	\$378,762
Internal Services	\$0	\$2,290,660	\$0	\$2,933,682
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$12,044,951</b>	<b>\$0</b>	<b>\$14,501,495</b>
<b>Program Total:</b>	<b>\$12,044,951</b>		<b>\$14,501,495</b>	
<b>Program FTE</b>	0.00	43.80	0.00	55.40

Program Revenues				
Intergovernmental	\$0	\$1,225,755	\$0	\$1,225,755
Other / Miscellaneous	\$0	\$5,196,500	\$0	\$5,370,041
Beginning Working Capital	\$0	\$650,000	\$0	\$1,714,592
Service Charges	\$0	\$4,972,696	\$0	\$6,191,107
<b>Total Revenue</b>	<b>\$0</b>	<b>\$12,044,951</b>	<b>\$0</b>	<b>\$14,501,495</b>

## Explanation of Revenues

This program generates \$1,806,422 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.

\$ 6,383,507 - FQHC Medicaid Wraparound

\$ 1,225,755 - Federal Primary Care (330) grant

Federal: \$ 5,216,592 - Medicaid Quality and Incentives

\$ 1,675,641 - CareOregon grant award for Quality & Patient Engagement

## Significant Program Changes

Last Year this program was: FY 2024: 40034A FQHC-Administration and Operations

**Department:** Health Department      **Program Contact:** Jeff Perry

**Program Offer Type:** Revenue/Fund Level/Tech      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Percent of reserve goal met	100%	100%	100%	100%
Outcome	Compliance with all HRSA 330 Grant financial requirements	100%	100%	100%	100%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Unappropriated & Contingency	\$0	\$50,000,000	\$0	\$64,057,128
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$50,000,000</b>	<b>\$0</b>	<b>\$64,057,128</b>
<b>Program Total:</b>	<b>\$50,000,000</b>		<b>\$64,057,128</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Beginning Working Capital	\$0	\$50,000,000	\$0	\$64,057,128
<b>Total Revenue</b>	<b>\$0</b>	<b>\$50,000,000</b>	<b>\$0</b>	<b>\$64,057,128</b>

Explanation of Revenues

\$64,057,128 of Beginning Working Capital

Significant Program Changes

Last Year this program was: FY 2024: 40034B FQHC - Contingency and Reserves

**Department:** Health Department      **Program Contact:** DJ Rhodes  
**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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of CHCB Meetings	12	12	12	12
Outcome	Percentage of consumers involved on the CHCB	51%	51%	51%	51%

**Performance Measures Descriptions**

## 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	2024	2024	2025	2025
Personnel	\$0	\$524,333	\$0	\$127,249
Contractual Services	\$0	\$36,000	\$0	\$134,000
Materials & Supplies	\$0	\$14,700	\$0	\$184,124
Internal Services	\$0	\$104,467	\$0	\$58,771
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$679,500</b>	<b>\$0</b>	<b>\$504,144</b>
<b>Program Total:</b>	<b>\$679,500</b>		<b>\$504,144</b>	
<b>Program FTE</b>	0.00	3.00	0.00	1.00

Program Revenues				
Other / Miscellaneous	\$0	\$679,500	\$0	\$504,144
<b>Total Revenue</b>	<b>\$0</b>	<b>\$679,500</b>	<b>\$0</b>	<b>\$504,144</b>

## Explanation of Revenues

This program generates \$21,518 in indirect revenues.  
 \$ 504,144 - HD FQHC PCPM Funding - Health Council

## Significant Program Changes

Last Year this program was: FY 2024: 40036 FQHC-Community Health Council and Civic Governance

**Department:** Health Department      **Program Contact:** Kevin Minor, Sylvia Ness,  
**Program Offer Type:** Operating      **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, patient-centered health care & related services to communities across the County. ICS's Allied Health (AH) programs include Integrated Behavioral Health (AH-IBH) & Community Health Workers (AH-CHW) offering culturally responsive and trauma informed support and outreach services, focused on supporting individuals with complex needs.

**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 57% percent of our patients identify as people of color, and more than 47% are best served in a language other than English. 95% of our clients live below 200% of the Federal Poverty Guideline and lastly in 2023 2 of the top 5 primary diagnoses addressed within all patient visits were mental health diagnosis.

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 have 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 care coordination, consultation, peer support 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, 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 supports to facilitate Health Education/Promotion.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	AH-IBH Individual Patients Served	4,622	5,038	5,038	5,800
Outcome	AH-IBH Number of encounters completed	16,175	13,658	13,658	14,000
Output	AH-CHW Individual Patients Served	3,637	5,096	5,096	6,500
Outcome	AH-CHW Number of encounters completed	8,420	9,000	9,000	12,450

**Performance Measures Descriptions**

Output: Individual Patients Served. Measure describes the number of unique clients who received IBH and CHW services within the last 12 months. Outcome: The total number of in person, telemed, phone encounters completed by one of our Allied Health Providers. includes offsite or home visits specific 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	2024	2024	2025	2025
Personnel	\$0	\$5,187,306	\$0	\$6,273,204
Contractual Services	\$0	\$156,500	\$0	\$163,491
Materials & Supplies	\$0	\$57,678	\$0	\$78,719
Internal Services	\$0	\$1,160,886	\$0	\$1,566,222
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$6,562,370</b>	<b>\$0</b>	<b>\$8,081,636</b>
<b>Program Total:</b>	<b>\$6,562,370</b>		<b>\$8,081,636</b>	
<b>Program FTE</b>	0.00	38.84	0.00	44.47

Program Revenues				
Intergovernmental	\$0	\$167,000	\$0	\$253,318
Other / Miscellaneous	\$0	\$1,492,000	\$0	\$975,500
Service Charges	\$0	\$4,903,370	\$0	\$6,852,818
<b>Total Revenue</b>	<b>\$0</b>	<b>\$6,562,370</b>	<b>\$0</b>	<b>\$8,081,636</b>

## Explanation of Revenues

This program generates \$1,063,701 in indirect revenues.

- \$975,500 - FQHC Care Oregon Grant
- \$167,000 - Federal - Primary Care (PC) 330 - 93.224
- \$283,276 - Medicaid Fee for Service
- \$385,348 - Fee for Services (FFS) - Medicare
- \$5,250 - Patient Fees 3rd Party
- \$3,748,440 - Community Hlth & Intergrated BH Admin (APM)
- \$1,467,412 - Intergrated BH Admin Wrap
- \$771,673 - Intergrated BH Admin CO Total
- \$191,419 - Intergrated BH Admin Patient Fees & Private Insurance
- \$86,318 - Rech CHC Grant

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 2024: 40102 FQHC Allied Health

An additional case management team has been added to help meet the continued increase of mental health needs in Multnomah County and the ongoing demand for community mental health services. In addition to behavioral health case management support, the CHW program will maintain roles dedicated to flex funding support through grants in FY 2025 in response to OHA's expanded 1115 waiver benefits and health promotion activities. The CHW has also added an additional CHW position to help support the waiver and upcoming health promotion activities.

**Department:** Health Department      **Program Contact:** Brieshon D'Agostini  
**Program Offer Type:** Administration      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
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**

## 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	2024	2024	2025	2025
Personnel	\$0	\$4,786,968	\$0	\$4,738,354
Contractual Services	\$0	\$559,079	\$0	\$670,319
Materials & Supplies	\$0	\$107,283	\$0	\$320,971
Internal Services	\$0	\$1,727,122	\$0	\$1,937,118
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$7,180,452</b>	<b>\$0</b>	<b>\$7,666,762</b>
<b>Program Total:</b>	<b>\$7,180,452</b>		<b>\$7,666,762</b>	
<b>Program FTE</b>	0.00	29.00	0.00	26.40

Program Revenues				
Intergovernmental	\$0	\$150,000	\$0	\$150,000
Other / Miscellaneous	\$0	\$2,737,500	\$0	\$2,695,960
Beginning Working Capital	\$0	\$1,445,000	\$0	\$1,859,190
Service Charges	\$0	\$2,847,952	\$0	\$2,961,612
<b>Total Revenue</b>	<b>\$0</b>	<b>\$7,180,452</b>	<b>\$0</b>	<b>\$7,666,762</b>

## Explanation of Revenues

This program generates \$801,253 in indirect revenues.

- \$ 1,014,807 - HD FQHC ICS EHR APM
- \$ 742,889 - Trillium Primary Care Capitation Services Incentives
- \$ 310,687 - Trillium Primary Care Capitation Services Incentives (BWC)
- \$ 1,946,805 - ICS Systems & Quality/Business Intelligence APM
- \$ 1,465,305 - HD FQHC PCPM Funding - QI Svcs
- \$ 377,678 - HD FQHC PCPM Funding(BWC)
- \$ 1,170,825 - HD FQHC PCPM - Business Intelligence (BWC)
- \$ 395,000 - HD FQHC PCPM - Business Intelligence
- Federal \$ 150,000 - Federal - Primary Care (PC) 330 - 93.224
- \$ 92,766 - Dental Primary Care Coordination

## Significant Program Changes

Last Year this program was: FY 2024: 40103 FQHC-Quality Assurance

### Corrections Health

Corrections Health is legally mandated to ensure access to health care and safeguard the health of those detained at Multnomah County Detention Center, Multnomah County Inverness Jail and the Donald E. Long Home for youth. 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. Communities of color and other populations experiencing marginalization in Multnomah County are disproportionately involved in the carceral system. The incarcerated population has higher rates of chronic illness, mental illness and substance use disorder. Corrections Health works to bridge the continuum of care and decrease health disparities for these populations, while also providing high quality care on a daily basis.

The mission of Corrections Health is to improve the lives by providing patient-centered healthcare and transitional services to those incarcerated in the Multnomah County jails and those involved in the criminal legal system.

Corrections Health staff at the adult facilities provide around-the-clock evaluation, diagnosis, and treatment to roughly 15,000 individuals each year. Many have serious, unstable or chronic health conditions, including major behavioral health issues. 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 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 communities. By stabilizing substance use and behavioral health conditions, detainees can more fully participate in their legal cases and healthcare.

# \$34.0 million

### Corrections Health

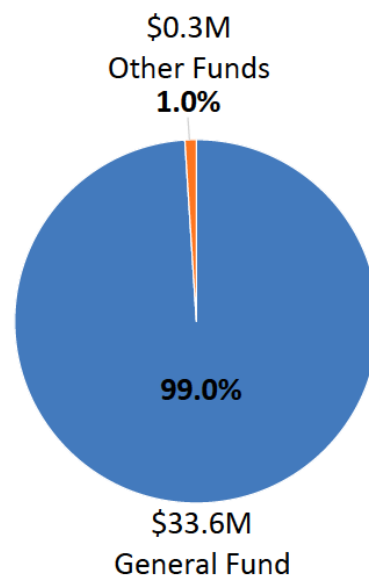
Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.



## 144.03 FTE

(full time equivalent)



### Significant Division Changes

Efforts will continue in FY 2025 to evaluate policies, procedures and practices to ensure that equity is embedded throughout, while maintaining appropriate access to essential care. Corrections Health is working to aggressively recruit nurses to fill critical positions through a variety of strategies to include how and where we recruit; and how we move nurses through the selection process faster. Retention of nurses is a key priority as our own staff are our best recruiters if they are feeling supported. Enhancement of the management structure of Corrections Health is designed to promote succession planning, increase efforts to promote diversity in our leadership team and to improve the ability to provide adequate oversight, mentorship and quality improvement. Corrections Health has made significant investments in adding supervision and capacity to our mental health team in an effort to address the increasing need for mental health services. These investments will provide additional therapeutic support for patients as well as ensuring quality care and interventions are provided.

Corrections Health continues to strengthen and expand transition planning efforts before individuals in custody are released, so that those who have significant medical (including substance use disorders) or behavioral health needs receive continuity of care. An emphasis on transition planning, quality management and behavioral health staff bolstering to meet the ever increasing acuity of complex medical and mental health needs. Corrections Health plays an integral role in the Department’s Overdose Prevention & Response plan through addressing substance use disorders as part of medical care and transition planning.

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Corrections Health</b>						
40043	Corrections Health Dental		698,273	0	698,273	2.40
40045	Corrections Health Operations		3,818,817	0	3,818,817	16.23
40045B	Corrections Health Infrastructure		192,910	0	192,910	1.00
40047	Corrections Health Transition Services		1,537,134	336,840	1,873,974	13.40
40049	Corrections Health Juvenile Clinical Services		2,274,679	0	2,274,679	9.20
40050	Corrections Health Multnomah County Detention Center (MCDC) Clinical Services		10,605,430	0	10,605,430	41.70
40051	Corrections Health Inverness Jail (MCIJ) Clinical Services		9,503,815	0	9,503,815	37.05
40059A	Corrections Health Behavioral Health Services		4,679,141	0	4,679,141	21.05
40059B	Additional Corrections Health Behavioral Health Staff		<u>325,410</u>	<u>0</u>	<u>325,410</u>	<u>2.00</u>
<b>Total Corrections Health</b>			<b>\$33,635,609</b>	<b>\$336,840</b>	<b>\$33,972,449</b>	<b>144.03</b>

**Department:** Health Department      **Program Contact:** Myque Obiero  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This offer represents dental care that is provided across all 3 Corrections Health (CH) sites. including Multnomah County Detention Center (MCDC), Multnomah County Inverness Jail (MCIJ) and Donald E. Long Juvenile Detention Center (DEL). At MCIJ, dental sees approximately 115 adults in custody per month, while at MCDC an approximate of 68 adults in custody are seen per month. DEL has a new dental operatory and given the low census, the current number of youth per month seen sits at approximately 10 per month. The dental care provided in the CH facilities serves a critical function in the health and wellness of adults and youth in custody, who would otherwise for most, not receive the same level of dental care.

**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 FY25 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 dental care that is provided across all 3 Corrections Health sites. including MCDC, MCIJ and DEL. At MCIJ, dental sees approximately 115 adults in custody per month, while at MCDC an approximate of 68 adults in custody are seen per month. DEL has a new dental operatory and given the low census, the current number of youth per month seen sits at approximately 10 per month. The dental care provided in the CH facilities serves a critical function in the health and wellness of adults and youth in custody, who would otherwise for most, not receive the same level of dental care.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of adults in custody seen by dental per year	890	890	900	900
Output	Number of youth in custody seen by dental per year	0	120	120	120

**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	2024	2024	2025	2025
Personnel	\$591,010	\$0	\$616,313	\$0
Materials & Supplies	\$21,562	\$0	\$22,360	\$0
Internal Services	\$49,736	\$0	\$59,600	\$0
<b>Total GF/non-GF</b>	<b>\$662,308</b>	<b>\$0</b>	<b>\$698,273</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$662,308</b>		<b>\$698,273</b>	
<b>Program FTE</b>	2.40	0.00	2.40	0.00

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

## Explanation of Revenues

As a result of the current laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from Medicare and Medicaid. These rules and laws are under review nationally to determine if additional revenue sources can be made available to jails. 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:** Myque Obiero  
**Program Offer Type:** Administration      **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 Corrections Health operations across MCDC, MCIJ and JDH. which is composed of 20 medical beds, two general and multiple mental health modules, 3 dental operatories, X-ray and lab services plus 6 housing areas for high level discipline inmates. The staff areas also contain nursing stations, administrative areas and a medication/supplies room. Services such as skilled nursing, IV therapy, and post-surgical care are provided in the jails instead of a high cost hospital. CH is staffed 24/7 with nursing personnel to provide needed care and emergency medical response.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Efficiency	Ensure appropriate level of administrative staff support across all CH sites	0	1	1	1
Quality	Appropriate data entry in EMR systems to better bolster documentation and support of care provision	0	1	1	1

**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	2024	2024	2025	2025
Personnel	\$2,818,641	\$0	\$3,130,364	\$0
Materials & Supplies	\$12,188	\$0	\$12,638	\$0
Internal Services	\$608,438	\$0	\$675,815	\$0
<b>Total GF/non-GF</b>	<b>\$3,439,267</b>	<b>\$0</b>	<b>\$3,818,817</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$3,439,267</b>		<b>\$3,818,817</b>	
<b>Program FTE</b>	16.23	0.00	16.23	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:** Myque Obiero  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** New Request

**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 FY25 to evaluate policies, procedures and practices to ensure that an equity approach is used whenever possible while maintaining appropriate access to essential care.

This program offer works to provide critical infrastructure support to Corrections Health leadership including components involved in legislative coordination, technical analysis and data collection, NCCHC accreditation support, budget and fiscal responsibilities as well as policy and program development evaluation.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Quality	Complete all legislative coordination for senate and house bills associated with Corrections Health	N/A	N/A	10	10
Outcome	Policy development and evaluation in line with NCCHC standards per month	N/A	10	10	10

**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
<b>Program Expenses</b>	<b>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Personnel	\$0	\$0	\$192,910	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$192,910</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$192,910</b>	
<b>Program FTE</b>	0.00	0.00	1.00	0.00

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

## Explanation of Revenues

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:** Myque Obiero  
**Program Offer Type:** Operating      **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 FY 2025 to evaluate policies, procedures and practices to ensure that an equity approach is used whenever possible while maintaining appropriate access to essential care.

This program offer works to assist community justice involved individuals to successfully transition, approximately 200 individuals per month, back into the community by providing direct services, including medical and behavioral healthcare, and substance use disorder treatment planning and coordination. It addresses the social determinants of health, thereby improving the quality of life, reduce disparities and ultimately, reduce recidivism.

This program offer includes FTE that are funded through a Multnomah County Sheriff's Office grant. These positions include a 0.80 FTE Medication Aide and a 0.60 FTE Licensed Community Practical Nurse. These positions support effective transition services for individuals leaving incarceration.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of referrals processed	0	2,000	2,500	2,500
Outcome	Provide warm hand offs for AICs leaving custody to community treatment	0	250	250	250

**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	2024	2024	2025	2025
Personnel	\$1,424,389	\$0	\$1,515,835	\$288,119
Materials & Supplies	\$20,539	\$0	\$21,299	\$0
Internal Services	\$0	\$0	\$0	\$48,721
<b>Total GF/non-GF</b>	<b>\$1,444,928</b>	<b>\$0</b>	<b>\$1,537,134</b>	<b>\$336,840</b>
<b>Program Total:</b>	<b>\$1,444,928</b>		<b>\$1,873,974</b>	
<b>Program FTE</b>	10.40	0.00	10.40	3.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$336,840
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$336,840</b>

## Explanation of Revenues

This program generates \$48,721 in indirect 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.

SUD (COSSUP) - Corrections \$336,840

## Significant Program Changes

Last Year this program was:

**Department:** Health Department      **Program Contact:** Myque Obiero  
**Program Offer Type:** Operating      **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 FY25 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 approximately 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# of client visits conducted by a CH nurse per year	1,656	1,700	1,700	1,700
Outcome	% of detained youth receiving mental health medications monthly	45%	50%	50%	50%

**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	2024	2024	2025	2025
Personnel	\$1,851,660	\$0	\$1,998,344	\$0
Contractual Services	\$127,528	\$0	\$132,247	\$0
Materials & Supplies	\$78,034	\$0	\$80,922	\$0
Internal Services	\$86,599	\$0	\$63,166	\$0
<b>Total GF/non-GF</b>	<b>\$2,143,821</b>	<b>\$0</b>	<b>\$2,274,679</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,143,821</b>		<b>\$2,274,679</b>	
<b>Program FTE</b>	9.20	0.00	9.20	0.00

Program Revenues				
Service Charges	\$102,198	\$0	\$0	\$0
<b>Total Revenue</b>	<b>\$102,198</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.

## Significant Program Changes

Last Year this program was: FY 2024: 40049 Corrections Health Juvenile Detention



**Program #40050 - Corrections Health Multnomah County Detention Center (MCDC)** FY 2025 Adopted  
**Clinical Services**

**Department:** Health Department **Program Contact:** Myque Obiero  
**Program Offer Type:** Operating **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Corrections Health, Multnomah County Detention Center houses approximately 370 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 FY25 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Average # of Reception Screening ("EPF"--Entry Progress Form) completed in one month	1,214	2,500	2,700	2,700
Outcome	% of positive screenings resulting in a referral to the mental health team per year	33%	35%	50%	60%

**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	2024	2024	2025	2025
Personnel	\$7,738,441	\$0	\$8,199,999	\$0
Contractual Services	\$1,177,835	\$0	\$1,221,415	\$0
Materials & Supplies	\$516,660	\$0	\$535,777	\$0
Internal Services	\$739,192	\$0	\$648,239	\$0
<b>Total GF/non-GF</b>	<b>\$10,172,128</b>	<b>\$0</b>	<b>\$10,605,430</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$10,172,128</b>		<b>\$10,605,430</b>	
<b>Program FTE</b>	41.70	0.00	41.70	0.00

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

## Explanation of Revenues

As a result of the current laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from Medicare, and Medicaid. These rules and laws are under review nationally to determine if additional revenue sources can be made available to jails. 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 2024: 40050A Corrections Health Multnomah County Detention Center (MCDC)

**Department:** Health Department      **Program Contact:** Myque Obiero  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Corrections Health Multnomah County Inverness Jail houses approximately 580 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 FY25 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Average # Adults in Custody (AIC) nursing assessments monthly	1,330	1,400	1,400	1,400
Outcome	# of 14-Day Health Assessments completed monthly	158	170	170	170

**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	2024	2024	2025	2025
Personnel	\$6,739,143	\$0	\$7,186,085	\$0
Contractual Services	\$1,177,835	\$0	\$1,221,415	\$0
Materials & Supplies	\$559,994	\$0	\$580,715	\$0
Internal Services	\$587,761	\$0	\$515,600	\$0
<b>Total GF/non-GF</b>	<b>\$9,064,733</b>	<b>\$0</b>	<b>\$9,503,815</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$9,064,733</b>		<b>\$9,503,815</b>	
<b>Program FTE</b>	37.05	0.00	37.05	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 2024: 40051A Corrections Health Inverness Jail (MCIJ) Clinical Services

**Department:** Health Department      **Program Contact:** Myque Obiero  
**Program Offer Type:** Operating      **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 35 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 FY25 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Average # mental health evaluations for suicide watch per month	223	250	250	250
Outcome	Average of total number of active and constant suicide watches per month to prevent AIC injury or death	96	100	125	125
Output	Average # of evaluations performed by Mental Health Consultants for all CH sites per month	1,178	1,200	1,200	1,200
Outcome	Monthly average of AICs on SUD being tracked by the Transition Program that come back to custody	n/a	5	10	10

**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	2024	2024	2025	2025
Personnel	\$3,716,211	\$0	\$3,825,350	\$0
Contractual Services	\$84,000	\$0	\$87,108	\$0
Materials & Supplies	\$364,106	\$0	\$376,567	\$0
Internal Services	\$433,213	\$0	\$390,116	\$0
<b>Total GF/non-GF</b>	<b>\$4,597,530</b>	<b>\$0</b>	<b>\$4,679,141</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$4,597,530</b>		<b>\$4,679,141</b>	
<b>Program FTE</b>	21.05	0.00	21.05	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 2024: 40059A Corrections Health Behavioral Health Services

**Department:** Health Department      **Program Contact:** Myque Obiero  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** New Request

**Executive Summary**

Corrections Health Multnomah County Detention Center, Inverness Jail and Juvenile Detention Home collectively house over 1,000 adults and 35 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 Multnomah County 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 FY25 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 case manager addition as well as a behavioral health supervisor at MCDC. 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 as well as introducing case management as a model for mental health clinicians to follow closely AICs that present with severe and persistent mental health issues, ultimately leading to better clinical outcomes.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Outcome	Develop a case management model to follow up Adults in Custody with Serious and Persistent Mental Illness	N/A	N/A	25	25
Quality	More supervision and support to manage the increasing acuity at Multnomah County Detention Center	N/A	N/A	2	2

**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	2024	2024	2025	2025
Personnel	\$0	\$0	\$325,410	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$325,410</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$325,410</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

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:

### Behavioral Health

Multnomah County Behavioral Health Division (BHD) works to enhance and maintain high-quality, accessible, client-driven, culturally-responsive and trauma-informed systems of care to promote wellness and recovery for children, youth, adults and older 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, and integrity. In FY 2025, BHD will continue to prioritize programs and services working at an intersection of homelessness and behavioral health, with a specific focus on increasing capacity by expanding existing services and programs that have proven to be effective in Multnomah County. These services include county-delivered services, as well as those provided by contracted community partners.

The BHD is committed to addressing gaps in the system of care for the most vulnerable, including individuals who are experiencing chronic houselessness, people who have experienced abuse, and other communities and people who have been marginalized. 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 communities. This work includes providing oversight of services, including adult residential programs; intensive care coordination including the CHOICE Model program; a 24/7 crisis line for all County residents; involuntary commitment; older adult behavioral health services; adult protective services; mobile crisis response; aid and assist services, and culturally-specific programming to support jail diversion efforts.

The division also provides prevention and early intervention to children, youth and young adults. This includes wraparound services, school-based mental health programs; mental health services 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.

# \$143.3 million

### Behavioral Health

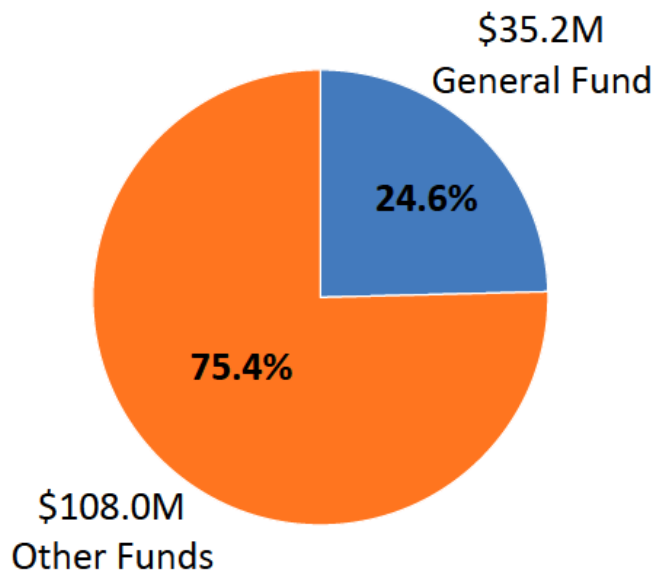
Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.



## 347.03 FTE

(full time equivalent)





The Behavioral Health Division continues a multi-phase revenue strategy to maximize opportunities for revenue with all third party funders for contracted services, allowing the focus of limited County resources on new innovation and expanded services for the most vulnerable in our community. In FY 2025 it is anticipated that the division will transition to utilization of EPIC as our Electronic Health Record for our outpatient programs, which is expected to support our aim to elevate Medicaid funding for relevant surrounding services and help meet the division’s strategic initiative for increasing systems integration.

### Significant Division Changes

For FY 2025, the Behavioral Health Division will move forward our Strategic Plan with five focus areas: 1. Workforce, 2. Centering on Equity, 3. Systems Integration, 4. Increasing Mental Health Service Capacity, and 5. Increasing Addictions and Substance Use Service Capacity. The division will be active in the implementation of the Health Department’s Overdose Prevention & Response Plan, and will look to expand and enhance existing programs to meet the growing need for behavioral health services in our community based on an enhanced local planning process (CLP+).

In FY 2024, the division was approved to allocate Supportive Housing Services (SHS) funds to initiate the launch of a Stabilization Center to serve as an acute step down placement for individuals exiting hospital level of care. We anticipate these critically needed services to come online in FY 2025. Lastly, the division will work with the Director’s Office to develop a deflection program aligned with Oregon House Bill 4002 to aid in the coordination of the many systems addressing the region's severe drug crisis.

The Behavioral Health Division has utilized grant funding from OHA to bolster our behavioral health workforce during this time of significant strain in this realm. This grant increases access to clinical supervision for licensure, paid internships, training, conferences, and recruitment with a specific focus on culturally specific needs. This is a large part of Multnomah County’s efforts to support, enhance, and retain our invaluable behavioral health workforce.

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Behavioral Health</b>						
40065	Behavioral Health Division Administration		2,615,336	1,695,185	4,310,521	15.58
40067	Medical Records for Behavioral Health Division		257,050	655,239	912,289	5.75
40068	Behavioral Health Quality Management		1,531,359	6,044,499	7,575,858	24.82
40069A	Behavioral Health Crisis Services		733,638	17,443,088	18,176,726	34.20
40069B	Old Town Inreach - Supportive Housing Services		0	1,100,000	1,100,000	0.00

# Health Department

## FY 2025 Adopted Budget

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
40069C	Behavioral Health Crisis Services - Supportive Housing Services	X	0	1,570,911	1,570,911	1.00
40070	Mental Health Crisis Assessment & Treatment Center (CATC)		617,425	0	617,425	0.00
40071	Behavioral Health Division Adult Protective Services		1,524,920	276,563	1,801,483	10.00
40072	Mental Health Commitment Services		2,040,962	3,148,690	5,189,652	24.60
40073	Peer-run Supported Employment Center		124,844	0	124,844	0.00
40074A	Mental Health Residential Services		1,392,104	8,449,119	9,841,223	12.10
40074B	Mental Health Residential Services - Supportive Housing Services		0	667,160	667,160	0.00
40075	Choice Model		0	5,334,764	5,334,764	15.32
40077	Mental Health Treatment & Medication for the Uninsured		733,984	0	733,984	0.00
40078A	Early Assessment & Support Alliance		430,087	3,382,647	3,812,734	16.40
40078B	Early Assessment and Support Alliance (EASA) COVID-19 Stimulus Funding		0	133,333	133,333	1.00
40080	Community Based Mental Health Services for Children & Families		781,404	343,162	1,124,566	5.35
40080B	Gun Violence Impacted Families Behavioral Health Team	X	1,222,614	0	1,222,614	5.00
40081	Multnomah County Care Coordination		0	15,442,893	15,442,893	58.68
40082	School Based Mental Health Services		3,457,000	3,070,080	6,527,080	33.74
40083	Behavioral Health Prevention Services		293,987	345,592	639,579	3.30
40084A	Culturally Specific Mental Health Services		2,162,817	0	2,162,817	0.00
40084B	Culturally Specific Mobile Outreach and Stabilization Treatment Program		815,908	0	815,908	0.00
40084C	Culturally Specific Mobile Outreach and Stabilization Treatment Program- Supportive Housing Services		0	542,325	542,325	0.00
40085A	Adult Addictions Treatment Continuum		2,402,116	9,236,196	11,638,312	6.40
40085B	Adult Addictions Treatment Continuum - Supportive Housing Services		0	2,258,689	2,258,689	0.00
40086	Addiction Services Gambling Treatment & Prevention		0	1,751,344	1,751,344	3.20
40087	Addiction Services Alcohol & Drug Prevention		0	406,751	406,751	0.35

# Health Department

## FY 2025 Adopted Budget

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
40088	Coordinated Diversion for Justice Involved Individuals		1,641,292	5,971,597	7,612,889	30.20
40089	Addictions Detoxification & Post Detoxification Housing		1,539,894	1,144,850	2,684,744	1.65
40090	Family & Youth Addictions Treatment Continuum		122,850	160,054	282,904	0.00
40091	Family Involvement Team		36,968	328,062	365,030	0.00
40099A	Early Childhood Mental Health Program		1,932,702	717,628	2,650,330	13.01
40099B	Preschool For All Early Childhood Mental Health		0	1,845,165	1,845,165	10.98
40101A	Promoting Access To Hope (PATH) Care Coordination Continuum		702,581	594,503	1,297,084	8.20
40101B	Promoting Access To Hope (PATH) Care Coordination Continuum - Supportive Housing Services		0	1,011,589	1,011,589	4.70
40105A	Behavioral Health Resource Center (BHRC) - Day Center		3,017,819	2,273,427	5,291,246	1.50
40105B	Behavioral Health Resource Center (BHRC) - Shelter/Housing		891,684	2,974,650	3,866,334	0.00
40105C	Downtown Addiction Services Pilot	X	170,749	0	170,749	0.00
40108	BHECN - Behavioral Health Emergency Coordinating Network		2,050,000	0	2,050,000	0.00
40112	Shelter and Housing - Supportive Housing Services		<u>0</u>	<u>7,723,540</u>	<u>7,723,540</u>	<u>0.00</u>
<b>Total Behavioral Health</b>			<b>\$35,244,094</b>	<b>\$108,043,295</b>	<b>\$143,287,389</b>	<b>347.03</b>

**Department:** Health Department      **Program Contact:** Heather Mirasol  
**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 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. The Community Mental Health Program (CMHP) provides safety net and basic services to the adult population of the entire county. Direct Clinical Services (DCS), 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. 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. Addictions and Prevention includes the Providing Access to Hope (PATH) team, substance use, gambling, and suicide prevention, and contract management funded through the CCO, grants, and the state. Quality Management includes compliance, quality improvement, reporting, billing and Evolv, the Electronic Health Record for BHD direct services. The Office of Consumer Engagement is a team of peers, including culturally specific engagement specialists who ensure that BHD programs and practices are consumer driven, trauma informed, and equitable. This office also oversees peer expansion contracts for peer outreach through our community providers to improve relationships and services through the engagement of culturally and population specific Peer Support Specialists, Peer Wellness Specialists and Certified Recovery Mentors. BHD continuously assesses its continuum of services to respond to the changing needs and demographics of the 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 is also responsible for ensuring contracted providers deliver evidence-based and culturally responsive services to consumers and monitors contracts 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.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Total Behavioral Health Advisory Meetings	23	23	23	23
Outcome	Advisors agree with the statement, "Overall, BHD does its job well"	93.7%	85%	N/A*	85%

**Performance Measures Descriptions**

\*Rather than survey council members for FY24, BHD leadership held listening sessions during the November General Council & Committee Workgroup meetings to gather feedback on division/council communication and process improvements. OCE will be redrafting a new council assessment of satisfaction to be used once changes are implemented in FY25.

## 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
<b>Program Expenses</b>	<b>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Personnel	\$1,342,413	\$1,362,210	\$1,986,414	\$1,274,537
Contractual Services	\$524,571	\$450,000	\$343,266	\$170,049
Materials & Supplies	\$37,726	\$3,317	\$24,241	\$9,829
Internal Services	\$229,259	\$206,939	\$261,415	\$240,770
<b>Total GF/non-GF</b>	<b>\$2,133,969</b>	<b>\$2,022,466</b>	<b>\$2,615,336</b>	<b>\$1,695,185</b>
<b>Program Total:</b>	<b>\$4,156,435</b>		<b>\$4,310,521</b>	
<b>Program FTE</b>	7.77	5.31	10.60	4.98

<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,268,888	\$0	\$931,036
Beginning Working Capital	\$0	\$753,578	\$0	\$764,149
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,022,466</b>	<b>\$0</b>	<b>\$1,695,185</b>

## Explanation of Revenues

This program generates \$153,942 in indirect revenues.

State: \$ 369,095 - MHS-01: Division Administration CY23

\$ 388,769 - CareOregon - Administrative Support

State: \$ 173,172 - OHA Behavioral Health Community Mental Health Programs & Capital - MH Admin

\$ 764,149 - MA Division Admin BWC

## Significant Program Changes

Last Year this program was: FY 2024: 40065 Behavioral Health Division Administration



**Program #40067 - Medical Records for Behavioral Health Division** FY 2025 Adopted

**Department:** Health Department      **Program Contact:** Jennifer Gulzow  
**Program Offer Type:** Administration      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Count of record items processed annually plus scanned document count	51,777	35,000	53,000	51,000
Outcome	Percent of client records requests that are provided to requestor within allowable timelines	100%	100%	100%	100%

**Performance Measures Descriptions**

## 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	2024	2024	2025	2025
Personnel	\$193,925	\$322,967	\$202,691	\$517,051
Materials & Supplies	\$0	\$3,119	\$0	\$5,549
Internal Services	\$49,505	\$88,641	\$54,359	\$132,639
<b>Total GF/non-GF</b>	<b>\$243,430</b>	<b>\$414,727</b>	<b>\$257,050</b>	<b>\$655,239</b>
<b>Program Total:</b>	<b>\$658,157</b>		<b>\$912,289</b>	
<b>Program FTE</b>	1.75	3.00	1.75	4.00

Program Revenues				
Intergovernmental	\$0	\$414,727	\$0	\$451,771
Beginning Working Capital	\$0	\$0	\$0	\$203,468
<b>Total Revenue</b>	<b>\$0</b>	<b>\$414,727</b>	<b>\$0</b>	<b>\$655,239</b>

## Explanation of Revenues

This program generates \$68,806 in indirect revenues.  
 State: \$ 115,123 - MHS-01: Medical Records CY23  
 \$ 336,648 - CareOregon - Medical Records  
 \$203,468 - Med Records BWC

## Significant Program Changes

Last Year this program was: FY 2024: 40067 Medical Records for Behavioral Health Division

**Department:** Health Department      **Program Contact:** Jennifer Gulzow  
**Program Offer Type:** Operating      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of requests managed by Decision Support Unit	3,464*	3,800	2,896	3,200
Outcome	Percent of incidents residential programs mitigated through immediate safety implementations	98%	96%	97%	96%
Output	# of BHD policies reviewed and updated based on annual and legislative required changes	32	N/A	30	30

**Performance Measures Descriptions**

\*In FY23, Evolv moved to Service Now as a new ticketing system. Evolv support tickets are more organized and streamlined now. DSU was without one Data Analyst for 6 weeks in FY 24 which impacted our completed Evolv Support tickets.



## 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	2024	2024	2025	2025
Personnel	\$1,201,348	\$2,173,957	\$1,443,147	\$3,248,956
Contractual Services	\$10,752	\$185,521	\$0	\$518,702
Materials & Supplies	\$18,030	\$87,619	\$10,967	\$1,527,517
Internal Services	\$217,646	\$342,731	\$77,245	\$749,324
<b>Total GF/non-GF</b>	<b>\$1,447,776</b>	<b>\$2,789,828</b>	<b>\$1,531,359</b>	<b>\$6,044,499</b>
<b>Program Total:</b>	<b>\$4,237,604</b>		<b>\$7,575,858</b>	
<b>Program FTE</b>	7.17	13.65	8.32	16.50

Program Revenues				
Intergovernmental	\$0	\$1,687,177	\$0	\$4,841,071
Beginning Working Capital	\$0	\$1,102,651	\$0	\$1,203,428
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,789,828</b>	<b>\$0</b>	<b>\$6,044,499</b>

## Explanation of Revenues

This program generates \$425,709 in indirect revenues.

\$ 1,203,428 - CFAA Settlement - Decision Support BWC and Quality Management BWC

\$ 2,052,648 - (BHWi)

\$ 80,000 - A&D Decision support

\$ 771,635 - CFAC SE 01

\$ 1,936,788 CareOregon Medicaid BH

## Significant Program Changes

Last Year this program was: FY 2024: 40068 Behavioral Health Quality Management

**Department:** Health Department      **Program Contact:** Barbara Snow  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**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. To this end, care is taken to support equitable services that prioritize addressing disparities related to access and outcomes. Crisis services include immediate 24/7/365 access to phone crisis support, 24/7/365 mobile crisis outreach, urgent walk in care and access to Peer Supports, and postvention care through the Trauma Intervention Program Northwest.

**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. 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. Shelter Behavioral Health Team: 7 days per week, teams of Qualified Mental Health Associates (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 for those in need and provides immediate drop off support for law enforcement. Trauma Intervention Program NW: Upon request access to on-scene emotional and practical support to victims, families and friends of victims, and communities impacted by traumatic events as well as post disaster after action calls to first responders.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Total Crisis System Contacts	103,587	95,000	101,343	95,000
Outcome	% of UWIC clients seen by the UWIC that did not need to be referred to an ED	90%	90%	90%	90%
Outcome	% of language services provided directly by Call Center staff when need is identified at time of call.	47.5%	50%	45%	50%
Outcome	% of mobile crisis contacts that did not result in individuals going to jail.	99%	98%	99%	98%

**Performance Measures Descriptions**

## 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	2024	2024	2025	2025
Personnel	\$192,800	\$5,125,501	\$377,663	\$5,764,855
Contractual Services	\$1,019,073	\$8,568,933	\$332,114	\$10,153,227
Materials & Supplies	\$22,095	\$48,262	\$12,481	\$64,138
Internal Services	\$32,187	\$1,040,915	\$11,380	\$1,460,868
<b>Total GF/non-GF</b>	<b>\$1,266,155</b>	<b>\$14,783,611</b>	<b>\$733,638</b>	<b>\$17,443,088</b>
<b>Program Total:</b>	<b>\$16,049,766</b>		<b>\$18,176,726</b>	
<b>Program FTE</b>	1.02	29.56	2.00	32.20

Program Revenues				
Intergovernmental	\$0	\$14,783,611	\$0	\$17,147,183
Beginning Working Capital	\$0	\$0	\$0	\$295,905
<b>Total Revenue</b>	<b>\$0</b>	<b>\$14,783,611</b>	<b>\$0</b>	<b>\$17,443,088</b>

## Explanation of Revenues

This program generates \$691,211 in indirect revenues.

Local Washington County Crisis	\$ 700,000
CareOregon Crisis Svcs	\$ 8,615,026
Trillium Crisis Svcs	\$ 899,745
MHS-25 Crisis svcs	\$ 6,576,048
OHA BH MH Program & Capital	\$ 356,364
Crisis Call Center BWC	\$ 295,905

## Significant Program Changes

Last Year this program was: FY 2024: 40069 Behavioral Health Crisis Services

**Department:** Health Department      **Program Contact:** Barbara Snow  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### 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 community 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 three 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 support 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 with staff at local homeless service providers.

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.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	1. Total # of engaged persons on a monthly basis	575	400	511	400
Outcome	2. Total # of de-escalations per month	65	60	65	60

### Performance Measures Descriptions

- Updated to the total number of engaged persons on a monthly basis to match the reporting. Represents data since April 2023 as this is when the measure was updated.
- Changed outcome to reflect the updated measures as gathered by the community provider. Represents data since April 2023 since this is when the measure was updated.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$1,131,429	\$0	\$0	\$1,100,000
<b>Total GF/non-GF</b>	<b>\$1,131,429</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,100,000</b>
<b>Program Total:</b>	<b>\$1,131,429</b>		<b>\$1,100,000</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

\$1,100,000 Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

Significant Program Changes

Last Year this program was: FY 2024: 40069B Old Town Inreach

**Department:** Health Department **Program Contact:** Barbara Snow

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

**Related Programs:**
**Program Characteristics:** New Request, 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. To this end, care is taken to support equitable services that prioritize addressing disparities related to access and outcomes. Crisis services include immediate 24/7/365 access to phone crisis support, 24/7/365 mobile crisis outreach, urgent walk in care and access to Peer Supports, and postvention care through the Trauma Intervention Program Northwest.

**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.

The Shelter Behavioral Health Team (SBHT) has been a pilot program since 2018. SBHT provides three modalities of service delivery- shelter based crisis response, shelter based preventative services, and peer support for participants living in Multnomah County publicly funded shelters who are experiencing behavioral health challenges and have needs for community connection support. Goals of the team include decreasing participant exits via preventative engagement in community services and peer supports, and linkage/connection to community resources to include medical, mental health, and benefits services.

The SBHT responds daily between the hours of 12:00 PM-8:00 PM to requests from:

- a) Participants staying in Multnomah County’s publicly funded shelters and
- b) Multnomah County’s publicly funded shelter staff.

Teams consist of Peer Support Specialists (PSS) and Qualified Mental Health Associate (QMHA) counselors, who provide preventative walk-in hours and crisis call responses. The SBHT will provide onsite (in shelter) services geared at de-escalation, risk assessment, substance use screening, care coordination, harm reduction tools and education, and peer services. Services will be geared toward supporting individuals in shelter, and connecting to needed community resources including mental, physical, and financial health supports.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Total Shelter System Contacts	N/A	2,000	N/A	2,000
Outcome	% of all individuals served are stabilized in shelter and have a follow-up contact attempted within three (3) days.	N/A	50%	N/A	50%

**Performance Measures Descriptions**

## 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	2024	2024	2025	2025
Personnel	\$0	\$177,591	\$0	\$185,045
Contractual Services	\$333,715	\$0	\$0	\$1,354,575
Internal Services	\$0	\$0	\$0	\$31,291
<b>Total GF/non-GF</b>	<b>\$333,715</b>	<b>\$177,591</b>	<b>\$0</b>	<b>\$1,570,911</b>
<b>Program Total:</b>	<b>\$511,306</b>		<b>\$1,570,911</b>	
<b>Program FTE</b>	0.00	0.00	0.00	1.00

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

## Explanation of Revenues

This program generates \$31,291 in indirect revenues.

\$1,570,911 Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments. \$1 million of this funding is one-time-only.

## Significant Program Changes

Last Year this program was: FY 2024: 30407B Supportive Housing - Countywide Coordination - Health Department

**Department:** Health Department      **Program Contact:** Barbara Snow

**Program Offer Type:** Operating      **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 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.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of admissions that are Non-HSO Members (Non Medicaid members)	21	25	25	25
Outcome	Percentage of individuals discharged from CATC to a lower level of care	94%	95%	95%	95%
Outcome	Percentage of BIPOC community member access to Non Medicaid "CMHP" admissions.	26.5%	10%	20%	20%

**Performance Measures Descriptions**



## Legal / Contractual Obligation

The Multnomah County Community Mental Health Program is contracted with the state to provide a mental health crisis system that meets the needs of the community.

Oregon Health Authority Intergovernmental Agreement for the Financing of Community 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
<b>Program Expenses</b>	<b>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Contractual Services	\$661,340	\$0	\$617,425	\$0
<b>Total GF/non-GF</b>	<b>\$661,340</b>	<b>\$0</b>	<b>\$617,425</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$661,340</b>		<b>\$617,425</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 2024: 40070 Mental Health Crisis Assessment & Treatment Center (CATC)

During FY 2024 we transitioned to funding only two CATC beds from three.

**Department:** Health Department      **Program Contact:** Barbara Snow  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Behavioral Health Division's (BHD) Adult Protective Services (APS) investigates abuse and neglect per OAR Chapter 419. 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 OAR Chapter 419, to protect adults with SPMI 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 receives guidance from Oregon State's Office of Training, Investigations and Safety (OTIS) about the scope of the program's authority and the interpretation and application of the relevant state statutes. The program consults and exchanges cross-reports with the other APS programs in the county, namely Aging, Disability, and Veterans Service Division APS and Intellectual and Developmental Disability APS. The program also 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 (one also bilingual Spanish), 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. Finally, the program conducts Death Reviews for all individuals who meet the criteria outlined in the previous section. Death Reviews consist of an audit of the past year of clinical progress notes in order to determine if any abuse or neglect by the mental health provider played a role in the individual's death. In FY23, the program completed 81 death reviews.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# of screenings/investigations <sup>1</sup>	941	1,000	902	950
Outcome	# protective services screening referred to Risk Case Management <sup>2</sup>	78	80	73	80
Output	Number of community education presentations	25	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
<b>Program Expenses</b>	<b>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Personnel	\$1,052,220	\$237,043	\$1,365,963	\$249,544
Materials & Supplies	\$5,827	\$24	\$6,043	\$24
Internal Services	\$148,944	\$20,275	\$152,914	\$26,995
<b>Total GF/non-GF</b>	<b>\$1,206,991</b>	<b>\$257,342</b>	<b>\$1,524,920</b>	<b>\$276,563</b>
<b>Program Total:</b>	<b>\$1,464,333</b>		<b>\$1,801,483</b>	
<b>Program FTE</b>	6.49	1.51	8.49	1.51

<b>Program Revenues</b>				
Intergovernmental	\$0	\$257,342	\$0	\$276,563
<b>Total Revenue</b>	<b>\$0</b>	<b>\$257,342</b>	<b>\$0</b>	<b>\$276,563</b>

## Explanation of Revenues

State \$ 276,563 - State Mental Health Grant: MHS-01: Quality Mgt - Protective service

## Significant Program Changes

**Last Year this program was:** FY 2024: 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:** Bill Osborne  
**Program Offer Type:** Operating      **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. Once a hearing is recommended, the county is required to provide a certified mental health examiner to assist in the evaluation of an allegedly mentally ill person during the civil commitment hearing. Upon commitment an individual is transferred to the post commitment team. The Post commitment team monitors the individual while under commitment. Trial visit monitors are assigned if a committed person is transitioned to trial visit.

**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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	1. Total number of notices of mental illness (NMIs)	2,432	2,400	2,434	2,400
Outcome	2. % of investigated NMIs that did not go to Court hearing	89%	80%	89%	80%
Outcome	3. % of investigated NMIs taken to court hearing that resulted in commitment	82%	90%	82%	80%
Output	4. # of commitments monitored annually	253	260	241	250

**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 FY 2023 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	2024	2024	2025	2025
Personnel	\$1,250,417	\$2,629,995	\$1,408,913	\$2,758,202
Contractual Services	\$257,894	\$192,343	\$122,504	\$277,733
Materials & Supplies	\$9,916	\$46,191	\$7,909	\$31,500
Internal Services	\$467,705	\$99,424	\$501,636	\$81,255
<b>Total GF/non-GF</b>	<b>\$1,985,932</b>	<b>\$2,967,953</b>	<b>\$2,040,962</b>	<b>\$3,148,690</b>
<b>Program Total:</b>	<b>\$4,953,885</b>		<b>\$5,189,652</b>	
<b>Program FTE</b>	8.00	16.10	8.50	16.10

Program Revenues				
Intergovernmental	\$0	\$2,967,953	\$0	\$3,148,690
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,967,953</b>	<b>\$0</b>	<b>\$3,148,690</b>

## Explanation of Revenues

State \$ 3,148,690 - State Mental Health Grant: MHS 24: Acute & Intermdt Psych - Commit

## Significant Program Changes

**Last Year this program was:** FY 2024: 40072 Mental Health Commitment Services

The ongoing impact of the restriction of state hospital beds for civilly committed individuals and other community challenges have resulted in a continued increase in clinical acuity of individuals in involuntary treatment services. While there has been a slight decrease in the number of individuals civilly committed in Multnomah County there has also been a restriction on finding appropriate levels of long term care due to the state hospital restriction. 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 those individuals needing essential services.

**Department:** Health Department      **Program Contact:** Barbara Snow  
**Program Offer Type:** Operating      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of active members	176	155	189	155
Outcome	Percent of members in paid employment positions	25.4%	25%	26.8%	25%
Output	Average daily attendance	27	20	29	20

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$120,389	\$0	\$124,844	\$0
<b>Total GF/non-GF</b>	<b>\$120,389</b>	<b>\$0</b>	<b>\$124,844</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$120,389</b>		<b>\$124,844</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 2024: 40073 Peer-run Supported Employment Center

**Department:** Health Department      **Program Contact:** Barbara Snow  
**Program Offer Type:** Operating      **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 638 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 (OAR). 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, as governed by the 309-035 OARs. 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, led by OHA's Health Systems Division. 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 90 residential programs, with approximately 639 clients, that include Secure Residential Treatment Programs, Residential Treatment Homes/Facilities, Adult Care Homes (ACH), Crisis/Respite Programs, and Supportive Housing Programs. RS reviews and responds to ~15,200 incident reports completed by residential programs, and partners with Quality Management (QM) who conduct Root Cause Analysis as needed.

RS supports the development of new mental health ACHs and the creation of new placement opportunities. While RS brought on five new ACHs in 2022, three ACHs were lost from the provider network due to retirements, billing issues and lack of work/life balance.

In FY23, RS provided 18 provider-wide trainings, ranging on topics such as Trauma Informed Care and Referrals, Admissions & OARs.

While 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 (PSRB) and those receiving community restoration services under Aid and Assist orders. 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 (26 in FY23).

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# of placements that receive health and safety oversight by Residential Services	634	650	645	700
Outcome	% of Non-Multnomah County Residents Placed in RTH/F and SRTF Housing	24%	22%	25%	27%
Output	# of CMHP referrals managed by Residential Services	26	32	26	25

**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	2024	2024	2025	2025
Personnel	\$1,356,247	\$515,664	\$1,219,152	\$771,455
Contractual Services	\$0	\$8,079,247	\$0	\$7,545,939
Materials & Supplies	\$4,492	\$6,930	\$0	\$9,455
Internal Services	\$163,222	\$101,847	\$172,952	\$122,270
<b>Total GF/non-GF</b>	<b>\$1,523,961</b>	<b>\$8,703,688</b>	<b>\$1,392,104</b>	<b>\$8,449,119</b>
<b>Program Total:</b>	<b>\$10,227,649</b>		<b>\$9,841,223</b>	
<b>Program FTE</b>	8.35	3.45	7.25	4.85

Program Revenues				
Intergovernmental	\$0	\$8,703,688	\$0	\$8,449,119
<b>Total Revenue</b>	<b>\$0</b>	<b>\$8,703,688</b>	<b>\$0</b>	<b>\$8,449,119</b>

## Explanation of Revenues

This program generates \$20,696 in indirect revenues.

Fed thru State \$ 1,175,812 MHS-20: Resid Svcs Mngd Case-MHBG

State \$ 7,125,238 - State Mental Health Grant(s) based on 2019-2021 IGA with State of Oregon

Fed Thru Other \$ 148,069 - Care Oregon Residential Svcs

## Significant Program Changes

Last Year this program was: FY 2024: 40074 Mental Health Residential Services

**Department:** Health Department **Program Contact:** Barbara Snow

**Program Offer Type:** Operating **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 638 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 (OAR). 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.

The Bridgeview residential program provides essential housing and supportive services to individuals in downtown Portland. It fills an important role within transitional housing programs in the City of Portland and Multnomah County. It helps fill the gap that exists between independent living and residential treatment and provides a lower barrier opportunity for individuals exiting homelessness while experiencing behavioral health challenges to gain stability and begin to work toward their future goals, decreasing their utilization of services such as acute care hospitals.

This vital resource provides housing, pharmacy services, the ability to build rental history, 24/7 support from residential staff, and access to onsite clinical care including case management, individual therapy, skills training, and group engagement. Medical staff including a LMP and nurse are on site several days a month to provide medication management and additional nursing support. The building has 48 Single Room Occupancy rooms without kitchens, prompting the need to provide 3 meals per day to residents in the cafeteria. The program aims to increase housing retention, reduce hospitalizations and support mental health recovery for a population of individuals who are entering housing from homelessness.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# of individuals served	N/A	N/A	N/A	75
Outcome	% of individuals who are willing to engage in a housing search, and are placed in permanent stabilized housing	N/A	N/A	N/A	65%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$447,045	\$0	\$667,160
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$447,045</b>	<b>\$0</b>	<b>\$667,160</b>
<b>Program Total:</b>	<b>\$447,045</b>		<b>\$667,160</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

\$667,160 Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

Significant Program Changes

Last Year this program was: FY 2024: 30407B Supportive Housing - Countywide Coordination - Health Department

**Department:** Health Department      **Program Contact:** Jessica Jacobsen

**Program Offer Type:** Operating      **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; 658 individuals were served in fiscal year 2023, of whom 28% 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 within recent years. Choice continues to prioritize and engage in updates to workflows, policies and procedures to clarify access and promote more equitable service delivery.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of Clients Served in Choice (1)	658	700	665.5	675
Outcome	% of clients receiving direct client assistance to meet basic needs (2)	30%	15%	30%	25%

**Performance Measures Descriptions**

(1) Program short-staffed majority of FY23 & performed a census clean-up of clients no longer in need of services, resulting in fewer clients served. Program is actively hiring & improving referral sources, to increase FY25 census. (2) Client assistance includes, but is not limited to: housing assistance, guardianship, & secure transportation. In FY23, program developed infrastructure to capture pass-through client assistance data not previously reported, resulting in higher outcome.

## 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
<b>Program Expenses</b>	<b>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Personnel	\$0	\$2,336,440	\$0	\$2,486,776
Contractual Services	\$0	\$2,444,698	\$0	\$2,362,522
Materials & Supplies	\$0	\$12,334	\$0	\$19,963
Internal Services	\$0	\$404,342	\$0	\$465,503
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,197,814</b>	<b>\$0</b>	<b>\$5,334,764</b>
<b>Program Total:</b>	<b>\$5,197,814</b>		<b>\$5,334,764</b>	
<b>Program FTE</b>	0.00	13.32	0.00	15.32

<b>Program Revenues</b>				
Intergovernmental	\$0	\$5,197,814	\$0	\$5,334,764
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,197,814</b>	<b>\$0</b>	<b>\$5,334,764</b>

## Explanation of Revenues

This program generates \$215,501 in indirect revenues.

Federal \$ 1,708,818 - Unrestricted Medicaid fund through CareOregon (Choice)

State \$ 3,625,946 - State Mental Health Grant: CHOICE Model based on 2021 IGA with State of Oregon

## Significant Program Changes

Last Year this program was: FY 2024: 40075 Choice Model

**Department:** Health Department      **Program Contact:** Barbara Snow  
**Program Offer Type:** Operating      **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, cooccurring 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. 17% of the persons served in this program were from Black, Indigenous, and People of Color ( BIPOC ) Communities.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Total # of adults who received county-funded outpatient services or medication.	262	200	251	200
Outcome	Percentage of MTF clients that are hospitalized	6.46%	3.0%	7.17%	6.0%

**Performance Measures Descriptions**

## 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	2024	2024	2025	2025
Contractual Services	\$705,591	\$0	\$733,984	\$0
<b>Total GF/non-GF</b>	<b>\$705,591</b>	<b>\$0</b>	<b>\$733,984</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$705,591</b>		<b>\$733,984</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 2024: 40077 Mental Health Treatment & Medication for the Uninsured

**Department:** Health Department      **Program Contact:** Yolanda Gonzalez  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Early Assessment and Support Alliance (EASA) is an early psychosis intervention program addressing the needs of young 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 FY23, 55% of the enrolled EASA clients identified as people of color, 42% as white and 3% 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Total individuals enrolled in the EASA program receiving ongoing services	117	130	119	120
Outcome	% reduction in hospitalization rate three months pre and 6 months post enrollment <sup>1</sup>	95%	85%	96%	90%
Output	Number of unduplicated individuals referred to the EASA program	227	200	203	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	2024	2024	2025	2025
Personnel	\$384,222	\$1,722,629	\$406,681	\$2,306,751
Contractual Services	\$97,489	\$82,980	\$9,415	\$179,633
Materials & Supplies	\$54	\$12,832	\$0	\$6,834
Internal Services	\$5,892	\$275,940	\$13,991	\$357,086
Cash Transfers	\$0	\$0	\$0	\$532,343
<b>Total GF/non-GF</b>	<b>\$487,657</b>	<b>\$2,094,381</b>	<b>\$430,087</b>	<b>\$3,382,647</b>
<b>Program Total:</b>	<b>\$2,582,038</b>		<b>\$3,812,734</b>	
<b>Program FTE</b>	2.17	10.93	2.17	14.23

Program Revenues				
Intergovernmental	\$0	\$1,560,812	\$0	\$2,725,982
Service Charges	\$0	\$533,569	\$0	\$656,665
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,094,381</b>	<b>\$0</b>	<b>\$3,382,647</b>

## Explanation of Revenues

This program generates \$114,585 in indirect revenues.

\$ 646,665 - Fee For Service Insurance Receipts

\$ 10,000 - State Vocational Rehabilitation Award

State \$ 1,324,669 - State Mental Health Grant based on 2021 IGA with State of Oregon

State \$ 240,758 - SMHG MHS 38

Federal \$ 91,407 - MHS-26 EASA-MHBG

Care OR \$ 1,069,148 - EASA

## Significant Program Changes

Last Year this program was: FY 2024: 40078 Early Assessment & Support Alliance

**Department:** Health Department **Program Contact:** Yolanda Gonzalez

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

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

### Executive Summary

The Early Assessment and Support Alliance (EASA) is an early psychosis intervention program addressing the needs of young 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. The program engages the young person's family and their other natural supports in treatment. This program offer funds one additional Case Manager for the EASA program. This Case Manager will support over 50 individuals per year.

### Program Description

This funding provides \$133,333 and 1.00 FTE Case Manager to fund an expansion of the EASA program. 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. This program adds \$133,333 in Early Assessment and Support Alliance funding and 1.00 FTE to the Behavioral Health Division. These funds were awarded by the Oregon Health Authority to provide expanded EASA capacity in Multnomah County.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Total number of unduplicated referrals supported by the case manager	83	50	85	80
Outcome	% increase of clients connected to resources through case management services <sup>1</sup>	25%	20%	21%	25%

### Performance Measures Descriptions

<sup>1</sup> This measure encompasses all resources that the case manager connects clients to. The case manager was hired in February 2023.

## 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	2024	2024	2025	2025
Personnel	\$0	\$123,016	\$0	\$120,663
Internal Services	\$0	\$10,317	\$0	\$12,670
<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

Program Revenues				
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 2024: 40199Y Early Assessment and Support Alliance (EASA) COVID-19 Stimulus

A specific report had not been developed to track this by date range, so a specific equation was not used to calculate current year estimates. We reviewed raw data to determine actual FY 2023 data and used that dataset to estimate what we believe the current year estimate will be.

**Department:** Health Department      **Program Contact:** Yolanda Gonzalez  
**Program Offer Type:** Operating      **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 as it relates to child abuse and trauma. 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.

### 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.

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 for youth (age 10-25) and their families. 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Total children who receive Mental Health or Family Support Services at CARES NW from Mult Co staff	161	100	180	150
Outcome	ACORN Distribution of Patient Change reported by client/student as their perception of improvement <sup>1</sup>	N/A	65%	N/A	65%
Output	Total Multnomah County Children who received Behavioral Health service through African American KSA	23	20	35	30
Output	Total # of outreach/engagement activities attended/provided	55	15	55	30

### Performance Measures Descriptions

<sup>1</sup>The ACORN was not used this year as the program is in the process of implementing a new outcomes tool, the ORS/SRS; the outcome measure is an estimate because the contract is in process and the tool hasn't been developed yet.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$687,900	\$250,438	\$720,988	\$238,045
Materials & Supplies	\$21,860	\$801	\$16,723	\$799
Internal Services	\$44,461	\$63,156	\$43,693	\$104,318
<b>Total GF/non-GF</b>	<b>\$754,221</b>	<b>\$314,395</b>	<b>\$781,404</b>	<b>\$343,162</b>
<b>Program Total:</b>	<b>\$1,068,616</b>		<b>\$1,124,566</b>	
<b>Program FTE</b>	4.15	1.62	4.15	1.20

Program Revenues				
Intergovernmental	\$0	\$314,395	\$0	\$343,162
<b>Total Revenue</b>	<b>\$0</b>	<b>\$314,395</b>	<b>\$0</b>	<b>\$343,162</b>

Explanation of Revenues

Headstart Revenue

David Douglas -	\$40,767
Portland Public -	\$44,292
Mt Hood Community College -	\$40,000
Albina -	\$207,603
Neighborhood hose -	\$3000
OCD -	\$7,500

Significant Program Changes

Last Year this program was: FY 2024: 40080 Community Based MH Services for Children & Families

Output numbers for children served increase significantly as child abuse was under reported during the pandemic and have now increased to the numbers we saw pre-pandemic. The ACORN was not used this year as the program is in the process of implementing a new outcomes tool, the ORS/SRS; the outcome measure is an estimate because the contract is in process and the tool hasn't been developed yet.

**Department:** Health Department      **Program Contact:** Yolanda Gonzalez

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

**Related Programs:**
**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 10-25) 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. Portland State is completing a thorough evaluation of the program and collecting data on the impact of the program.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Total # of children who received behavioral health services from this specialty team	92	40	85	85
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	55	30	55	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 MHCs trained for FIT.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$680,361	\$0	\$800,255	\$0
Contractual Services	\$546,726	\$0	\$422,359	\$0
Materials & Supplies	\$2,500	\$0	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$1,229,587</b>	<b>\$0</b>	<b>\$1,222,614</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,229,587</b>		<b>\$1,222,614</b>	
<b>Program FTE</b>	0.00	0.00	5.00	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

Significant Program Changes

Last Year this program was: FY 2024: 40110 Gun Violence Impacted Families Behavioral Health Team

The ACORN was not used this year as the program is in the process of implementing a new outcomes tool, the ORS/SRS; we do not have a measure for that tool yet as the contract is in process.

**Department:** Health Department      **Program Contact:** Jessica Jacobsen

**Program Offer Type:** Operating      **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, 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, Oregon Department of Human Services, 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, community partners, and providers to develop a unified, strengths-based plan addressing 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 remain in their communities. Youth and Adult ICC support individuals (and their families) with complex behavioral health needs to develop individualized care plans meeting 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 (i.e. Primary Care, shelter, etc.) to address client needs.

Programs ensure policies, procedures and services are individualized and culturally/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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of unique children served in Youth Care Coordination.	362	350	372	350
Outcome	% score measuring family's satisfaction and progress in Wraparound. (1)	70%	85%	75%	85%
Output	Referrals processed in Youth Care Coordination.	378	300	393	350
Output	Total number of clients served in M-ITT. (2)	520	575	527	530

**Performance Measures Descriptions**

(1) Program added administrative support to increase WFI-EZ survey completion rates to help obtain a statistically significant response rate. In FY23 completion rates increased by over 100%, and a strategic plan is in place to further increase completion rates. Program caregiver satisfaction scores surpass the statewide average for Wraparound programs.

(2) M-ITT was short-staffed the majority of FY23 and saw increased length of enrollment due to reduced system capacity, resulting in a decreased total number served.



## 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	2024	2024	2025	2025
Personnel	\$0	\$7,821,578	\$0	\$9,610,498
Contractual Services	\$0	\$1,390,858	\$0	\$2,804,197
Materials & Supplies	\$0	\$81,564	\$0	\$143,346
Internal Services	\$0	\$2,190,484	\$0	\$2,884,852
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$11,484,484</b>	<b>\$0</b>	<b>\$15,442,893</b>
<b>Program Total:</b>	<b>\$11,484,484</b>		<b>\$15,442,893</b>	
<b>Program FTE</b>	0.00	50.68	0.00	58.68

Program Revenues				
Intergovernmental	\$0	\$11,484,484	\$0	\$15,442,893
<b>Total Revenue</b>	<b>\$0</b>	<b>\$11,484,484</b>	<b>\$0</b>	<b>\$15,442,893</b>

## Explanation of Revenues

This program generates \$1,625,135 in indirect revenues.

MHS-05 - Adult MH SVCS - \$340,225

Trillium Peer Svcs contract - \$101,176

Care Oregon Medicaid BH - \$14,519,516

OneTimeMotel - \$481,976

## Significant Program Changes

**Last Year this program was:** FY 2024: 40081 Multnomah County Care Coordination

In FY 2025, program expects to add two new Care Coordination teams. One team will serve incarcerated individuals with known behavioral health and/or substance use conditions. The second team will provide level of care assessments for individuals with Substance Use Disorders, prioritizing people transitioning out of jail or hospital settings in need of assessment for a referral into care.

**Department:** Health Department      **Program Contact:** Yolanda Gonzalez  
**Program Offer Type:** Operating      **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 29 SBMH clinicians serve over 800 children and teens with mental health needs in 34 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. Roughly half of the youth served are youth of color served by a diverse staff that represent the communities they serve. 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 5,566 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Total unduplicated youth referred to SBMH for assessment and/or treatment services	828	700	799	750
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 unduplicated K-12 youth/families who received case management services	128	250	140	200

**Performance Measures Descriptions**

<sup>1</sup>The ACORN was not used this year as the program is in the process of implementing a new outcomes tool; the outcome measure is an estimate because the contract is in process and the tool hasn't been developed yet.

## 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	2024	2024	2025	2025
Personnel	\$2,696,620	\$2,432,451	\$3,125,272	\$2,462,048
Contractual Services	\$0	\$8,000	\$0	\$8,000
Materials & Supplies	\$58,622	\$8,328	\$81,677	\$10,380
Internal Services	\$235,945	\$499,554	\$250,051	\$589,652
<b>Total GF/non-GF</b>	<b>\$2,991,187</b>	<b>\$2,948,333</b>	<b>\$3,457,000</b>	<b>\$3,070,080</b>
<b>Program Total:</b>	<b>\$5,939,520</b>		<b>\$6,527,080</b>	
<b>Program FTE</b>	18.28	15.46	20.26	13.48

Program Revenues				
Intergovernmental	\$0	\$1,448,333	\$0	\$2,520,080
Service Charges	\$0	\$1,500,000	\$0	\$550,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,948,333</b>	<b>\$0</b>	<b>\$3,070,080</b>

## Explanation of Revenues

This program generates \$206,641 in indirect revenues.  
 \$1,000,000 - CareOregon - School Based Mental Health  
 \$785,255 - MHS-20: School-Based Mental Health - Block Grant - CY22  
 \$550,000 - SBMH Insurance  
 \$310,518 - MHS-20: School-Based Mental Health - CY22  
 \$177,000 - SBMH - Portland Public School District  
 \$112,307 - School Based Clinics - Mental Health Expansion - Behavioral Health - Capacity  
 \$75,000 - SBMH - Centennial School District  
 \$37,500 - SBMH - Reynolds School District  
 \$22,500 - SBMH - Parkrose School District

## Significant Program Changes

**Last Year this program was:** FY 2024: 40082A School Based Mental Health Services

The ACORN was not used this year as the program is in the process of implementing a new outcomes tool, the ORS/SRS; the outcome measure is an estimate because the contract is in process and the tool hasn't been developed yet.. The K12 Case Management program did not reach the intended output of 250 because hiring and onboarding of new staff took longer than expected.

**Department:** Health Department      **Program Contact:** Anthony Jordan  
**Program Offer Type:** Operating      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# of individuals trained in Mental Health First Aid, ASIST, QPR and/or CALM and safeTalk.	390	450	450	450
Outcome	% of individuals who report greater understanding of mental illness and/or suicide prevention.	86%	85%	85%	85%
Output	Perform 25-30 psychological autopsies (if full time, 50-60 psychological autopsies).	25	35	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
<b>Program Expenses</b>	<b>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Personnel	\$122,426	\$356,364	\$217,386	\$295,670
Contractual Services	\$36,000	\$12,673	\$35,000	\$6,562
Materials & Supplies	\$14,206	\$9,522	\$3,725	\$18,829
Internal Services	\$34,798	\$43,319	\$37,876	\$24,531
<b>Total GF/non-GF</b>	<b>\$207,430</b>	<b>\$421,878</b>	<b>\$293,987</b>	<b>\$345,592</b>
<b>Program Total:</b>	<b>\$629,308</b>		<b>\$639,579</b>	
<b>Program FTE</b>	0.80	2.50	1.30	2.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$421,878	\$0	\$345,592
<b>Total Revenue</b>	<b>\$0</b>	<b>\$421,878</b>	<b>\$0</b>	<b>\$345,592</b>

## Explanation of Revenues

This program generates \$17,808 in indirect revenues.  
State \$ 84,000 - OHA Suicide Prevention  
Federal \$ 124,205 - Federal PE 60 Suicide Prevention  
State \$ 12,387 - 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 2024: 40083 Behavioral Health Prevention Services

**Department:** Health Department      **Program Contact:** Barbara Snow

**Program Offer Type:** Operating      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Total culturally diverse individuals receiving services <sup>1</sup>	905	900	775	900
Outcome	Culturally specific persons served per 1,000 culturally diverse in population <sup>2</sup>	3.6	3.6	3.1	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	2024	2024	2025	2025
Contractual Services	\$2,085,647	\$0	\$2,162,817	\$0
<b>Total GF/non-GF</b>	<b>\$2,085,647</b>	<b>\$0</b>	<b>\$2,162,817</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,085,647</b>		<b>\$2,162,817</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 2024: 40084A Culturally Specific Mental Health Services

**Department:** Health Department      **Program Contact:** Barbara Snow

**Program Offer Type:** Operating      **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 program supports a Black/African American Mobile Behavioral Health team to serve justice involved individuals re-entering the community from incarceration. The team consists of a support team including mental health providers, case managers, certified addictions counselors and peer support specialists. The scope of services include outreach and engagement, home visits, mental health or substance use screening/assessments, individual therapy/counseling, care coordination, and peer support.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Total number of individuals served	68	50	76	50
Outcome	% of referrals accepted into the program (1)	51%	90%	57.9%	60%

### Performance Measures Descriptions

(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	2024	2024	2025	2025
Contractual Services	\$786,797	\$0	\$815,908	\$0
<b>Total GF/non-GF</b>	<b>\$786,797</b>	<b>\$0</b>	<b>\$815,908</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$786,797</b>		<b>\$815,908</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 2024: 40084B Culturally Specific Mobile Outreach and STP

**Program #40084C - Culturally Specific Mobile Outreach and Stabilization Treatment** FY 2025 Adopted  
**Program- Supportive Housing Services**

**Department:** Health Department **Program Contact:** Barbara Snow

**Program Offer Type:** Operating **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 culturally specific stabilization for treatment preparation program will consist of 14 beds, and serve justice involved, unstably housed, Black/African American male individuals with behavioral health needs. This program was designed to reduce recidivism for individuals exiting the justice system and to increase income through employment and benefits/entitlements acquisition for individuals while engaged in the program. An additional goal of this program is placement into stable housing and reduction of emergency room and hospital utilization experienced by individuals engaged in this program. The length of services for clients enrolled in the STP will vary depending upon the client’s need and progress; however, the anticipated average length of stay will be between six (6) and nine (9) months.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Total number of individuals served	N/A	N/A	N/A	50
Outcome	% of the individuals placed into or retained in residential services/transitional and/or permanent housing	N/A	N/A	N/A	90%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$525,000	\$0	\$542,325
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$525,000</b>	<b>\$0</b>	<b>\$542,325</b>
<b>Program Total:</b>	<b>\$525,000</b>		<b>\$542,325</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

\$542,325 Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

Significant Program Changes

Last Year this program was: FY 2024: 30407B Supportive Housing - Countywide Coordination - Health Department

**Department:** Health Department      **Program Contact:** Anthony Jordan  
**Program Offer Type:** Operating      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number served in treatment and recovery support services	2,770	3,500	4,000	4,200
Outcome	Percentage of clients who successfully complete outpatient treatment*	46%	42%	42%	45%

### Performance Measures Descriptions

\*"Successful completion of treatment" is defined as the 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	2024	2024	2025	2025
Personnel	\$554,743	\$312,145	\$542,906	\$526,974
Contractual Services	\$1,748,632	\$10,550,702	\$1,709,839	\$8,661,243
Materials & Supplies	\$14,246	\$537	\$14,773	\$8,889
Internal Services	\$136,474	\$26,218	\$134,598	\$39,090
<b>Total GF/non-GF</b>	<b>\$2,454,095</b>	<b>\$10,889,602</b>	<b>\$2,402,116</b>	<b>\$9,236,196</b>
<b>Program Total:</b>	<b>\$13,343,697</b>		<b>\$11,638,312</b>	
<b>Program FTE</b>	3.35	2.05	3.00	3.40

Program Revenues				
Intergovernmental	\$0	\$10,889,602	\$0	\$9,236,196
<b>Total Revenue</b>	<b>\$0</b>	<b>\$10,889,602</b>	<b>\$0</b>	<b>\$9,236,196</b>

## Explanation of Revenues

This program generates \$2,443 in indirect revenues.

Fed - OHA Ryan White - MH	\$178,100	Recovery Support - Local 2145	\$238,270
Fed - A&D-62 Drug Residential-Children	\$305,813	OHA - Peer Delivered Svcs SUD	\$249,999
Fed - A&D-66: Addic Outpat Serv-SAPT	\$2,274,290		
State - OHA BH Community MH Program & Capital	\$573,881		
A&D-65 IDPF	\$123,600		
A&D-67 Addictions Res	\$1,265,400		
A&D-66 Addictions/Opiate/Outpatient Tx	\$2,353,400		
A&D-63 Peer Delivered Svcs	\$835,994		
A&D-62 Drug Residential	\$355,427		
A&D-61 Adult SUD Res Tx	\$75,000		
AATC - Outpatient Local 2145	\$407,022		

## Significant Program Changes

**Last Year this program was:** FY 2024: 40085 Adult Addictions Treatment Continuum

The repercussions of the pandemic have affected SUD providers in various ways, including staffing gaps and disruptions in services and programs. Throughout FY23, providers have operated with reduced censuses. 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 encounters in the MOTS system. MOTS provides the outcomes data for this offer. As a result of these circumstances, the output measures for FY23 may potentially reflect an undercount due to the challenges and disruptions experienced across the SUD provider landscape.

**Department:** Health Department      **Program Contact:** Anthony Jordan

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

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Many of the individuals that the Adult Addiction Treatment Continuum serves are not well connected to available behavioral health services and/or are in need of housing to support their SUD recovery. Recovery supportive housing can take many forms, but in all cases, the goal of the model is to provide houseless individuals/those at risk of houselessness who are in recovery with a housing option that also enables them to access and stay engaged in a range of SUD services that can increase their likelihood of success in treatment.

### Program Description

For those experiencing SUD and houselessness, access to recovery supportive housing can improve success in SUD treatment and help them achieve individual recovery goals. Recovery supportive housing can also have a broader impact across County systems and services, including criminal justice, child welfare, and healthcare.

Recovery Supportive housing in the County is provided by a variety of community providers, many of whom provide culturally specific or culturally responsive housing with services. With a continued focus on equity, the Addiction Unit provides funding to providers that can offer the diversity of options that are needed to meet the varied needs of the County's diverse population seeking housing that can also support their SUD recovery.

Recovery supportive housing is a critical component of the adult treatment continuum. This type of housing provides an environment specifically designed to help people stay in treatment and focused on recovery. Recovery supportive housing can improve treatment outcomes at the individual and community levels, and it promotes the pro-social activities needed to build and maintain a healthy lifestyle.

This funding will be directed to a contract that provides supportive housing services.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number served in treatment and recovery support services	2,770	3,500	4,000	4,200
Outcome	Percentage of clients who successfully complete outpatient treatment*	46%	42%	42%	45%

### Performance Measures Descriptions

\*"Successful completion of treatment" is defined as the completion of at least two thirds of an individual's treatment plan goals and demonstrating 30 days of abstinence.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$1,207,500	\$0	\$2,258,689
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,207,500</b>	<b>\$0</b>	<b>\$2,258,689</b>
<b>Program Total:</b>	<b>\$1,207,500</b>		<b>\$2,258,689</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

\$2,258,689 Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

Significant Program Changes

Last Year this program was: FY 2024: 30407B Supportive Housing - Countywide Coordination - Health Department

**Department:** Health Department      **Program Contact:** Anthony Jordan  
**Program Offer Type:** Operating      **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. In FY 2024, 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.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	1. Number of gamblers and family members accessing treatment annually	66	200	150	180
Outcome	2. Gambler successful treatment completion rate	31.3%	30%	30%	30%
Outcome	3. % of clients receiving Care Coordination, successfully placed in gambling treatment or recovery support	65%	60%	60%	60%
Output	4. Number of problem gambling prevention activities delivered	22	22	22	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	2024	2024	2025	2025
Personnel	\$0	\$482,359	\$0	\$509,356
Contractual Services	\$0	\$949,920	\$0	\$1,163,412
Materials & Supplies	\$0	\$17,964	\$0	\$14,548
Internal Services	\$0	\$47,664	\$0	\$64,028
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,497,907</b>	<b>\$0</b>	<b>\$1,751,344</b>
<b>Program Total:</b>	<b>\$1,497,907</b>		<b>\$1,751,344</b>	
<b>Program FTE</b>	0.00	3.20	0.00	3.20

Program Revenues				
Intergovernmental	\$0	\$1,497,907	\$0	\$1,751,344
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,497,907</b>	<b>\$0</b>	<b>\$1,751,344</b>

## Explanation of Revenues

State \$ 1,383,563 - State Mental Health Grant: Problem Gambling Treatment Services based on IGA with State of Oregon  
 State \$ 213,358 - State Mental Health Grant: Problem Gambling Prevention Services based on IGA with State of Oregon  
 State \$ 154,423 - State Mental Health Grant: Problem Gambling Pathways Outreach

## Significant Program Changes

**Last Year this program was:** FY 2024: 40086 Addiction Services Gambling Treatment & Prevention

Due to workforce shortages and reduced capacity in FY 2024, our providers had a waitlist and they were unable to see as many clients as they had previous to the pandemic. There was also a delay in the expansion of services in FY 2024 resulting in a reduced estimate of clients served. We anticipate an increase in numbers served by FY 2025 as we ramp up capacity in our treatment organizations.

**Department:** Health Department      **Program Contact:** Anthony Jordan  
**Program Offer Type:** Operating      **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 FY25, 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	1. Adults and youth served by prevention services and programming	4,327	1,000	4,000	4,000
Outcome	2. Prevention activity participants with improved awareness and/or educational outcomes	100%	70%	80%	80%

**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.

## 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	2024	2024	2025	2025
Personnel	\$0	\$183,317	\$0	\$92,454
Contractual Services	\$0	\$491,172	\$0	\$223,387
Materials & Supplies	\$0	\$50,075	\$0	\$58,322
Internal Services	\$0	\$21,419	\$0	\$32,588
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$745,983</b>	<b>\$0</b>	<b>\$406,751</b>
<b>Program Total:</b>	<b>\$745,983</b>		<b>\$406,751</b>	
<b>Program FTE</b>	0.00	1.30	0.00	0.35

Program Revenues				
Intergovernmental	\$0	\$745,983	\$0	\$406,751
<b>Total Revenue</b>	<b>\$0</b>	<b>\$745,983</b>	<b>\$0</b>	<b>\$406,751</b>

## Explanation of Revenues

This program generates \$8,052 in indirect revenues.

State \$ 41,667 - Oregon Alcohol and Drug Prevention Education Program (ADPEP)

Federal \$ 32,500 - SNAP Drug Free Community Grant

Federal \$ 282,584 - 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 2024: 40087 Addiction Services Alcohol & Drug Prevention

This program has seen a bounce back to pre-pandemic anticipated numbers. Program staff anticipate similar numbers to FY 2023 actuals in FY 2024. However, with the reduction of funding for prevention initiatives in FY 2025, we are unsure if that will limit our numbers served.

**Department:** Health Department      **Program Contact:** Bill Osborne  
**Program Offer Type:** Operating      **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. The goal of all three programs is to move individuals out of the criminal justice system and connect them to the broader mental health and addiction system. 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, and make regular reports to the Court regarding the status of individuals who are unable to aid and assist. New federal orders have limited the length of time an individual can be committed to the Oregon state hospital. As such, the number of individuals needing services through the Aid and Assist team has increased significantly. 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. 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. 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. The Bridge Treatment Team works to 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 team consists of Mental Health Consultants, peers, and case managers who work to engage individuals in treatment and connect them to long term treatment and recovery resources. While the team works with all individuals, they specialize in working with BIPOC and LGBTQ+ individuals.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	# of participants served by Forensic Diversion	374	300	388	350
Outcome	% of participants served in the Community by Forensic Diversion	25%	25%	31%	25%
Output	# of individuals served by Bridge Treatment Team (1)	N/A	75%	N/A	75%
Outcome	% of active clients who achieve intake +1 appointment with community treatment and/or community supports (2)	N/A	45%	N/A	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
<b>Program Expenses</b>	<b>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Personnel	\$863,470	\$2,739,996	\$894,287	\$3,912,196
Contractual Services	\$703,751	\$1,562,056	\$539,220	\$1,532,917
Materials & Supplies	\$2,741	\$237,118	\$1,861	\$96,505
Internal Services	\$210,698	\$291,811	\$205,924	\$429,979
<b>Total GF/non-GF</b>	<b>\$1,780,660</b>	<b>\$4,830,981</b>	<b>\$1,641,292</b>	<b>\$5,971,597</b>
<b>Program Total:</b>	<b>\$6,611,641</b>		<b>\$7,612,889</b>	
<b>Program FTE</b>	4.80	17.70	5.50	24.70

<b>Program Revenues</b>				
Intergovernmental	\$0	\$4,830,981	\$0	\$5,971,597
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,830,981</b>	<b>\$0</b>	<b>\$5,971,597</b>

## Explanation of Revenues

This program generates \$266,022 in indirect revenues.

State \$ 1,532,538 - Oregon Health Authority: Aid & Assist Grant

State \$ 2,570,267 - State Mental Health Grant: MHS-04 Aid & Assist Client Svcs & MHS-09 Jail Diversion

State \$ 1,200,000 - Assist Population - Jail Diversion

State \$ 668,792 - State Improving People's Access to Community-based Treatment (IMPACT)

## Significant Program Changes

**Last Year this program was:** FY 2024: 40088 Coordinated Diversion for Justice Involved Individuals

The Aid and Assist team experienced a dramatic increase in workload due to the Mosman order limiting the length of time a person can stay at OSH and changes in when individuals at OSH are assessed for Hospital Level of Care. The program has also seen an increase in individuals receiving community restoration services. The team was restructured to meet the demand and new staff were hired in order to ensure that statutory requirements were met. Over 2023/24 we have seen higher acuity needs in Mental Health Court with more intense person to person crimes (assault and assault with a weapon involved). More than half of our participants continue to have ongoing substance use and needs that are difficult to address due to limited appropriate treatment resources. This program has seen a significant increase in the number of referrals and the number of individuals entering the program.

**Department:** Health Department      **Program Contact:** Anthony Jordan  
**Program Offer Type:** Operating      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of unique indigent individuals receiving Withdrawal Management services annually	175	80	150	180
Outcome	% of individuals served in Care Coord., exiting withdrawal mgmt & transitioning to another level of care	77%	80%	80%	80%
Output	Number of clients served in Care Coordination transition services	2,263	2,260	2,628	2,700
Output	Number of individuals receiving supportive housing	542	370	520	600

**Performance Measures Descriptions**

\* Withdrawal Management: Includes the number of unique indigent individuals who may receive multiple admissions in the course of the year. \*\* Care Coordination: 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. \*\*\* Average length of stay in supportive housing is 14-15 weeks. 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	2024	2024	2025	2025
Personnel	\$0	\$92,895	\$0	\$232,388
Contractual Services	\$1,654,024	\$732,205	\$1,539,894	\$907,535
Internal Services	\$0	\$3,979	\$0	\$4,927
<b>Total GF/non-GF</b>	<b>\$1,654,024</b>	<b>\$829,079</b>	<b>\$1,539,894</b>	<b>\$1,144,850</b>
<b>Program Total:</b>	<b>\$2,483,103</b>		<b>\$2,684,744</b>	
<b>Program FTE</b>	0.00	0.50	0.00	1.65

Program Revenues				
Intergovernmental	\$0	\$829,079	\$0	\$1,144,850
<b>Total Revenue</b>	<b>\$0</b>	<b>\$829,079</b>	<b>\$0</b>	<b>\$1,144,850</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 \$ 870,558 - 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 2024: 40089 Addictions Detoxification & Post Detoxification Housing

The repercussions of the pandemic have affected SUD providers in various ways, including staffing gaps and disruptions in services and programs. Throughout FY 2023, providers have operated with reduced censuses. 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 in FY 2023. As a result of these circumstances, the output measures for FY23 may potentially reflect an undercount due to the challenges and disruptions experienced across the SUD provider landscape.

**Department:** Health Department      **Program Contact:** Anthony Jordan  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This Family Youth and Addictions Treatment Continuum provides a continuum of services for youth in outpatient, early recovery, and culturally-specific services including outpatient addiction treatment services and culturally specific African American and Latino outreach/engagement services.

**Program Description**

The Oregon Health Authority reports that most substance use disorders (SUD) begin before age 25. Studies show that for adolescents (ages 12-17) and young adults (ages 18-25), frequent marijuana use is associated with opioid misuse, heavy alcohol use, and depression. Our youth treatment continuum is a collaboration with schools, juvenile justice, and a network of community-based treatment and recovery support providers. This collaborative network provides outreach/engagement services, outpatient treatment, residential treatment, and recovery support services for youth and families with an income at or less than 200% of Federal Poverty Level.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	1) Number of annual outreach and engagement events	114	100	100	100
Outcome	2) Number of unduplicated attendees at events.	1,812*	100	500	500

**Performance Measures Descriptions**

\* As program staff have reviewed reports, it is unclear if individuals have been duplicated in the count, and how providers are possibly defining an outreach "event". As this is a new outcome measure, staff are unsure if this baseline data is accurate. Program staff will be working with providers funded from this program to review data biannually in FY25 to ensure data metrics are accurate.



## 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
<b>Program Expenses</b>	<b>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Contractual Services	\$121,853	\$157,528	\$122,850	\$157,795
Materials & Supplies	\$0	\$2,259	\$0	\$2,259
<b>Total GF/non-GF</b>	<b>\$121,853</b>	<b>\$159,787</b>	<b>\$122,850</b>	<b>\$160,054</b>
<b>Program Total:</b>	<b>\$281,640</b>		<b>\$282,904</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$159,787	\$0	\$160,054
<b>Total Revenue</b>	<b>\$0</b>	<b>\$159,787</b>	<b>\$0</b>	<b>\$160,054</b>

## Explanation of Revenues

State \$ 66,986 - Local 2145 Beer & Wine Tax  
State \$ 93,068 - State Mental Health Grant SE66 Family and Youth Services IGA with State of Oregon

## Significant Program Changes

Last Year this program was: FY 2024: 40090 Family & Youth Addictions Treatment Continuum

**Department:** Health Department      **Program Contact:** Anthony Jordan  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**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.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	1) Number of FIT referrals per year	795	770	750	800
Outcome	2) % of FIT clients referred who enter treatment	43%	27%	47%	40%

**Performance Measures Descriptions**

## 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>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Contractual Services	\$35,648	\$356,139	\$36,968	\$328,062
<b>Total GF/non-GF</b>	<b>\$35,648</b>	<b>\$356,139</b>	<b>\$36,968</b>	<b>\$328,062</b>
<b>Program Total:</b>	<b>\$391,787</b>		<b>\$365,030</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$356,139	\$0	\$328,062
<b>Total Revenue</b>	<b>\$0</b>	<b>\$356,139</b>	<b>\$0</b>	<b>\$328,062</b>

## Explanation of Revenues

\$ 328,062 - State Mental Health Grant SE 66 Family Involvement Team (FIT) based on IGA with the State.

## Significant Program Changes

**Last Year this program was:** FY 2024: 40091 Family Involvement Team

The repercussions of the pandemic have affected SUD providers in various ways, including staffing gaps and disruptions in services and programs. Throughout FY 2023, providers have operated with reduced censuses. 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 in FY 2023. As a result of these circumstances, the output measures for FY23 may potentially reflect an undercount due to the challenges and disruptions experienced across the SUD provider landscape.

**Department:** Health Department      **Program Contact:** Yolanda Gonzalez  
**Program Offer Type:** Operating      **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 preventative mental health consultation that support roughly 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Total children receiving prevention services. <sup>1</sup>	4,700	5,000	4,700	4,700
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>	12	30	7	30

**Performance Measures Descriptions**

<sup>1</sup> All children enrolled at the Head Start sites we serve. <sup>2</sup> Teaching Pyramid Observation Tool (TPOT): an evidence-based tool to measure teacher implementation of the 3-tiered Pyramid Model. <sup>3</sup> Treatment=Clients provided mental health 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>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Personnel	\$1,604,700	\$375,372	\$1,630,843	\$517,938
Contractual Services	\$181,384	\$613	\$188,094	\$613
Materials & Supplies	\$10,004	\$478	\$5,859	\$1,977
Internal Services	\$114,772	\$167,927	\$107,906	\$197,100
<b>Total GF/non-GF</b>	<b>\$1,910,860</b>	<b>\$544,390</b>	<b>\$1,932,702</b>	<b>\$717,628</b>
<b>Program Total:</b>	<b>\$2,455,250</b>		<b>\$2,650,330</b>	
<b>Program FTE</b>	9.93	2.46	9.77	3.24

<b>Program Revenues</b>				
Intergovernmental	\$0	\$401,528	\$0	\$431,904
Service Charges	\$0	\$142,862	\$0	\$285,724
<b>Total Revenue</b>	<b>\$0</b>	<b>\$544,390</b>	<b>\$0</b>	<b>\$717,628</b>

## Explanation of Revenues

This program generates \$20,341 in indirect revenues.

\$122,391 - MHS-20: CBMH - Children & Fam. - EC - CY22

\$309,513 - MHS-20: Community Based Mental Health - Early Child & Family - Block Grant - CY22

\$285,724 - CBMH Child & Fam EC Ins

## Significant Program Changes

**Last Year this program was:** FY 2024: 40099A Early Childhood Mental Health Program

The TPOT was not administered in FY 2023 or FY 2024 because staff needed to be retrained. The staff training took place in October of 2023. The Teacher wellbeing Survey that was explored last year was not an adequate replacement for the TPOT. The output for total children receiving prevention services was down slightly as one of our sites has secured more out-side consultants, reducing our scope.

**Department:** Health Department      **Program Contact:** Yolanda Gonzalez  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 25200-25207, 72052A, 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Total children receiving prevention services. <sup>1</sup>	728	675	1,394	800
Outcome	% of Preschool for All coaches who report that they had a positive and supportive consultation experience. <sup>2</sup>	N/A	85%	N/A	85%
Output	Total children receiving culturally specific treatment services.	0	30	15	30

**Performance Measures Descriptions**

<sup>1</sup>This number is the total number of Preschool for All children as our team serves the entire program.

<sup>2</sup>This outcome measure will not be implemented until Spring of 2024 since coaches/students did not begin services until Fall of FY23

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$1,624,372	\$0	\$1,717,905
Materials & Supplies	\$0	\$160	\$0	\$4,514
Internal Services	\$0	\$107,183	\$0	\$122,746
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,731,715</b>	<b>\$0</b>	<b>\$1,845,165</b>
<b>Program Total:</b>	<b>\$1,731,715</b>		<b>\$1,845,165</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 \$70,606 in indirect revenues.  
 \$ 1,845,165 - PEL - Preschool For All Early Childhood. 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 2024: 40099B Preschool For All Early Childhood

The Outcome measure is not available and the Output measure is an estimate because the tool has not been developed yet as hiring and onboarding took longer than expected. The output of the total number of children receiving culturally specific treatment services was not reached because hiring and onboarding took longer than expected.

**Department:** Health Department      **Program Contact:** Anthony Jordan

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

**Related Programs:** 40085

**Program Characteristics:**

### Executive Summary

Promoting Access To Hope (PATH) was developed jointly by the Behavioral Health Division (BHD), the Joint Office of Homeless Services, Department of Community Justice, and the 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
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%
Output	# of individuals housed by PATH team member	79	N/A	82	110

### Performance Measures Descriptions



## 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	2024	2024	2025	2025
Personnel	\$544,122	\$181,733	\$669,958	\$467,184
Contractual Services	\$2,100	\$0	\$5,065	\$12,387
Materials & Supplies	\$29,708	\$29,953	\$4,443	\$12,826
Internal Services	\$37,765	\$25,781	\$23,115	\$102,106
<b>Total GF/non-GF</b>	<b>\$613,695</b>	<b>\$237,467</b>	<b>\$702,581</b>	<b>\$594,503</b>
<b>Program Total:</b>	<b>\$851,162</b>		<b>\$1,297,084</b>	
<b>Program FTE</b>	4.08	4.82	4.20	4.00

Program Revenues				
Intergovernmental	\$0	\$237,467	\$0	\$594,503
<b>Total Revenue</b>	<b>\$0</b>	<b>\$237,467</b>	<b>\$0</b>	<b>\$594,503</b>

## Explanation of Revenues

This program generates \$63,878 in indirect revenues.

Federal \$ 150,564 - Federal Ryan White Non Med Case Management

State \$ 25,336 - Local 2145 Beer and Wine Tax

State \$ 66,120 - State Mental Health Grant: A&D Peer Delivered Services based on IGA with State of Oregon.

Fed Thru Other \$352,483 CareOregon - Promoting Access to Hope

## Significant Program Changes

Last Year this program was: FY 2024: 40101 Promoting Access To Hope (PATH) Care Coordination Continuum

**Department:** Health Department      **Program Contact:** Anthony Jordan  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 40085  
**Program Characteristics:**

### Executive Summary

The PATH team's priorities include connecting individuals who may benefit from services with Substance Use Disorder (SUD) and behavioral health providers, and linking eligible adults with SUD to housing that supports their recovery. To expand these efforts, PATH will add street outreach services targeting those who are not connected to the SUD or behavioral health systems and who are experiencing homelessness. PATH will link these clients to services and housing that supports treatment engagement and adherence, that is culturally specific when desired, and that provides clients with access to recovery support.

### Program Description

Through outreach, PATH will develop relationships with individuals referred to SUD and behavioral health services who are not well connected with those systems. In particular, PATH will focus on those who are also houseless or at risk of homelessness and who are at risk of or exhibiting early signs of mental instability and/or substance misuse. Services may include outreach and engagement, connection to resources, and pro-social activities that support community wellness and healing. While affording clients with preventive care, outreach will seek to reduce the development of behavioral health conditions becoming an impediment in day-to-day living.

As the county seeks to expand SUD treatment and recovery supportive housing resources, PATH staff will continue to assist clients to remove barriers to recovery, including housing-related barriers. Based on an individual needs assessment, and using trauma informed approaches such as motivational interviewing, PATH staff will identify the right housing option for each client to support their individual recovery journey. PATH will continue to receive referrals through a variety of sources, including SUD treatment and recovery support providers, justice partners, Behavioral Health Crisis Line, other county programs, family members, community members, self referrals, etc.

The goal of these outreach activities is to ensure that people who are eligible for benefits will be able to access and use the full array of SUD and behavioral health services available to them and to help secure stable housing to improve long term outcomes.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
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.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$581,082	\$0	\$768,432
Contractual Services	\$0	\$109,200	\$0	\$113,215
Internal Services	\$0	\$0	\$0	\$129,942
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$690,282</b>	<b>\$0</b>	<b>\$1,011,589</b>
<b>Program Total:</b>	<b>\$690,282</b>		<b>\$1,011,589</b>	
<b>Program FTE</b>	0.00	0.00	0.00	4.70

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

Explanation of Revenues

This program generates \$129,942 in indirect revenues.  
 \$1,011,589 Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

Significant Program Changes

Last Year this program was: FY 2024: 30407B Supportive Housing - Countywide Coordination - Health Department

**Department:** Health Department      **Program Contact:** Barbara Snow  
**Program Offer Type:** Operating      **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 programs, operated by contracted providers are: a Day Center, a Behavioral Health Shelter, a Bridge Housing program. The Day Center opened in December 2022. The Shelter and Bridge Housing programs opened in Spring 2023. The BHRC has been operating at full capacity since July 2023 and provides critical support and services to over 100 houseless individuals daily.

**Program Description**

The Day Center operates on the first and second floors of the facility which opened in December 2022. The Day Center is open 12 hours per day and serves as an entry point for individuals that are experiencing trauma, behavioral health challenges and/or homelessness. The Day Center serves 100-150 daily and 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 BHRC facility offers access to wifi, computer stations, activity space, printing, and basic physical needs (restrooms, shower, laundry, water, snacks, coffee, & tea).

A peer-run and peer-led nonprofit, is the contracted provider for the Day Center. A team of 40 peer staff members oversee the Day Center operations and connect with peer participants to increase peer engagement, efficacy and wellness. 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 the contracted provider have worked to establish the BHRC Community Partner (CP): agreements, schedule, and menu of services that will be offered to peer participants on an ongoing basis.

Thousands of community members experiencing homelessness, encountered a welcoming space to address their immediate basic and short term needs and connect with resources to address their long-term needs. A significant focus was placed on referrals to external behavioral health and housing supports: 1575 referrals to housing, 201 referrals to mental health services and 318 referrals to addiction and substance use recovery supports. The program timelines (1-30 days), community agreements and intake process empower program participants to actively engage in service planning. With its increasing demand and proven efficacy, the BHRC has a more efficient, safer and impactful service delivery system.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of individuals receiving peer delivered services and access to basic needs daily	121	150	150	150
Outcome	Percent of participants will have access to onsite supports, including basic needs and social connection.	99%	90%	90%	90%
Outcome	Percent of individuals served daily will use onsite connection to community supports.	58%	50%	50%	70%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$384,674	\$16,879	\$441,621
Contractual Services	\$2,571,429	\$1,434,987	\$2,065,857	\$1,571,107
Materials & Supplies	\$0	\$10,500	\$0	\$10,719
Internal Services	\$1,339,025	\$200,169	\$935,083	\$249,980
<b>Total GF/non-GF</b>	<b>\$3,910,454</b>	<b>\$2,030,330</b>	<b>\$3,017,819</b>	<b>\$2,273,427</b>
<b>Program Total:</b>	<b>\$5,940,784</b>		<b>\$5,291,246</b>	
<b>Program FTE</b>	0.00	1.50	0.00	1.50

Program Revenues				
Intergovernmental	\$0	\$2,030,330	\$0	\$873,427
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,030,330</b>	<b>\$0</b>	<b>\$873,427</b>

Explanation of Revenues

This program generates \$70,882 in indirect revenues.

State: \$ 65,000 - CHOICE Behavioral Health Resource Center CY22

Federal: \$ 551,200 - CareOregon - Behavioral Health Resource Center

Federal: \$ 79,620 - Trillium - Behavioral Health Resource Center (BHRC)

State: \$ 177,607 - OHA Behavioral Health Community Mental Health Programs & Capital - BHRC

\$1,400,000 Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

Significant Program Changes

**Last Year this program was:** FY 2024: 40105A Behavioral Health Resource Center (BHRC) - Day Center

This year, the BHRC implemented a change in its access model, with a simple ticket process. Participants visit the BHRC referral van at 5th and Glisan to request a ticket for specific times (8am, 11, 2, 5pm) and receive a guaranteed three (3) hour time slot for services. This approach has had impressive results: at least 150 tickets are distributed daily with an over 70% success rate of appointments kept.

**Department:** Health Department      **Program Contact:** Barbara Snow  
**Program Offer Type:** Operating      **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 programs, operated by contracted providers are: a Day Center, a Behavioral Health Shelter and a Bridge Housing program. The Day Center opened in December 2022. The Shelter and Bridge Housing programs opened in Spring 2023. The BHRC has been operating at full capacity since July 2023 and provides critical support and services to over 100 homeless individuals daily.

**Program Description**

The Behavioral Health Shelter and Bridge Housing programs, operate on the third and fourth floors and opened 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 homelessness. The BHRC Behavioral Health Shelter and Bridge housing programs operate 24/7/365 and are placed through referrals by: the Day Center, self-referral, first responders, and community providers. The BHRC facility offers access to wifi, computer stations, activity space, printing, and basic physical needs (restrooms, shower, laundry, water, snacks, coffee, & tea) with pets also welcome.

The Behavioral Health Shelter program has 33 beds and is 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. A contractor, staffed by peers and clinical professionals with lived experience, operates both programs. Individuals in the programs 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.

Early results since the Bridge Housing programs inception in July 2023 (following Shelter's opening in May 2023 opening) are promising 140 participants served across both programs by Sep 2023, 71 successful exits, 25% exited to Treatment, 20% exited to housing, and 55% other (including self-sufficient self exits and those returning to service upon resolution of behavioral concern. Importantly, even participants that exit early are not left behind. The programs maintain open doors for re-engagement, ensuring critical longer-term support when needed. The Shelter and Bridge Housing are effective in bridging the gap between emergency shelter and permanent housing.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of individuals served in Shelter and Bridge Housing programs daily	37	52	52	52
Outcome	% of participants using shelter beds will engage in service planning to address behavioral health & housing	63%	50%	50%	70%

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$295,601	\$2,916,852	\$254,571	\$2,861,789
Internal Services	\$807,041	\$88,148	\$637,113	\$112,861
<b>Total GF/non-GF</b>	<b>\$1,102,642</b>	<b>\$3,005,000</b>	<b>\$891,684</b>	<b>\$2,974,650</b>
<b>Program Total:</b>	<b>\$4,107,642</b>		<b>\$3,866,334</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,955,000	\$0	\$1,890,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,955,000</b>	<b>\$0</b>	<b>\$1,890,000</b>

Explanation of Revenues

State: \$ 1,890,000 - CareOregon - Supporting Health for All through Reinvestment Initiative

\$1,084,650 Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

Significant Program Changes

Last Year this program was: FY 2024: 40105B Behavioral Health Resource Center (BHRC) - Shelter/Housing

**Department:** Health Department      **Program Contact:** Barbara Snow  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** New Request, One-Time-Only Request

**Executive Summary**

Behavioral health providers and law enforcement are partnering to save lives and help people living outside with addiction and unmet behavioral health needs. New approaches to outreach are part of a broader effort to curb public drug use without criminalizing addiction, giving police a new tool to connect people with lifesaving interventions like detox, basic needs referrals, addiction treatment, mental health and medical care, and other supports.

**Program Description**

In December 2023 a pilot program launched, pairing addiction recovery providers and law enforcement together to support people who are living outside, struggling with addiction, and suffering from unmet behavioral health needs. Under this model, when law enforcement encounters someone using drugs in public, they offer them the opportunity to meet with a trained outreach worker. If the person agrees, an outreach team is deployed to their location within 10 minutes or less to help secure culturally competent services, treatment, and shelter in real time. If same-day care is not available, outreach workers maintain contact to support the person with their service plan, while also working to navigate wait lists and other barriers to get them access to care as quickly as possible.

Community based organizations provide outreach teams with culturally and linguistically-specific staff to secure emergency shelter, withdrawal management, and treatment beds for those who need help. In its first six months of operation, this pilot program responded to over 50 dispatches and connected more than a third of individuals with same-day services.

The expansion and extension of this pilot in FY 2025 combines funding from Multnomah County and the City of Portland and State of Oregon to support additional outreach staff, improve program evaluation and coordination, and stabilize operations in a new, leased facility.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of outreach interactions resulting from dispatch calls	N/A	N/A	54	350
Outcome	Percentage of individuals connected to services same day	N/A	N/A	37%	30%

**Performance Measures Descriptions**



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$0	\$170,749	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$170,749</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$170,749</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:** Heather Mirasol  
**Program Offer Type:** Operating      **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 implementation of the recommended resources by the Behavioral Health Emergency Coordination work which include a Behavioral Health Stabilization Center and Recovery Supported Housing to address the need for step down from acute care settings. Once these programs launch, 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Percentage of Request for Proposals Compete	N/A	100%	N/A	100%
Outcome	Percentage of program operator/contractor identified	N/A	100%	N/A	100%
Output	Percentage of Contract(s) developed and executed	N/A	100%	N/A	100%

**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. Future outcomes will include program-level results, such as the percentage of individuals served by BHECN and discharged to a lower levels of care.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$2,000,000	\$0	\$2,050,000	\$0
<b>Total GF/non-GF</b>	<b>\$2,000,000</b>	<b>\$0</b>	<b>\$2,050,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,000,000</b>		<b>\$2,050,000</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 opioid settlement revenue that is budgeted in program offer 95001.

Significant Program Changes

Last Year this program was: FY 2024: 40108 BHECN - Behavioral Health Emergency Coordinating Network

**Department:** Health Department      **Program Contact:** Jessica Jacobsen

**Program Offer Type:** Operating      **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.

**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.
- \* 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.
- \* Permanent Supported Housing for individuals with Serious and Persistent Mental Illness at Cedar Commons.
- \* Permanent Supported Housing for individuals with Serious and Persistent Mental Illness at Douglas Fir

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of individuals placed into or retained in permanent housing	N/A	N/A	N/A	175
Outcome	Number of participants served in motel-based emergency shelter	N/A	N/A	N/A	115

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$5,766,765	\$0	\$7,723,540
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,766,765</b>	<b>\$0</b>	<b>\$7,723,540</b>
<b>Program Total:</b>	<b>\$5,766,765</b>		<b>\$7,723,540</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

\$ 7,723,540 Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

Significant Program Changes

**Last Year this program was:** FY 2024: 30407B Supportive Housing - Countywide Coordination - Health Department

New program offer created as funding moved from Joint Office of Homeless Services' budget to the Health Department's budget

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### 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.

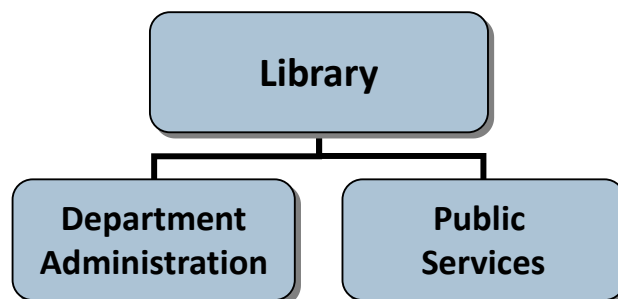
The library is in a transitional period, implementing an ambitious voter-approved plan to expand and modernize library spaces, while also adopting new models of service and staffing across the organization. In addition, the library anticipates that fiscal pressure - as costs continue to increase at a faster rate than revenues - will precipitate trade-off discussions in the coming years.

In Fiscal Year 2025 and in the coming years, the library will take steps to mitigate the impact of increased costs with fiscal restraint and by carefully aligning positions and services with community needs. The library will continue its investments to provide culturally responsive service and to provide spaces that are welcoming and as mindful of safety and security as possible.

The library looks to FY 2025 as a year of progress and celebration, with the expected reopening of four libraries that are currently closed for major expansion or renovation. These spaces will include new spaces to meet, gather and relax; children’s play and learning spaces; dedicated teen rooms with technology; flexible programming and meeting rooms; updated technology and internet; outdoor plazas, and new art that represents the community. These include:

- Holgate Library: a brand new two-story building, triple the size of the current space for a total of 21,000 square feet
- Midland Library: an additional 6,000 square feet added to a redesigned structure.
- North Portland Library: expanded to feature 1,500 sq ft of new space, including a Black Cultural Center for connection and a celebration of Blackness.
- Albina Library: offering 30,000 square feet of total space, while preserving the historic Carnegie building on Knott Street and including space for library administration.
- Construction will continue on the 95,000 square foot East County Library and begin on expanded and new buildings for Belmont and St. Johns libraries, along with a host of smaller refresh projects.

The library will continue its important focus on safety and security by adopting a new model for Person in Charge (PIC) coverage and with new proposed additions for non-represented positions to handle more PIC responsibilities. The library will also seek to add Peer Support Specialists to complement Community Resource Counselors at Central Library, in addition to other partnerships and changes to enhance and focus support on safety and security.





# \$118.7 million

## Total Adopted Budget

Includes cash transfers, contingencies, and unappropriated balances.

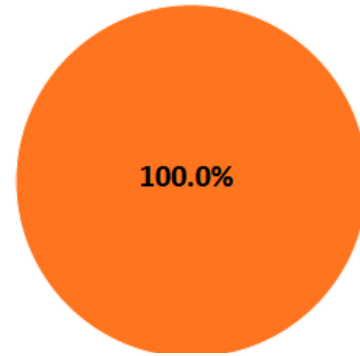
**539.25 FTE**  
Total Adopted Staffing



**9.75 FTE**

Decrease from  
FY 2024 Adopted

\$118.7M  
Other Funds



**\$8.2 million**

All Funds Increase from  
FY 2024 Adopted

**7% increase**



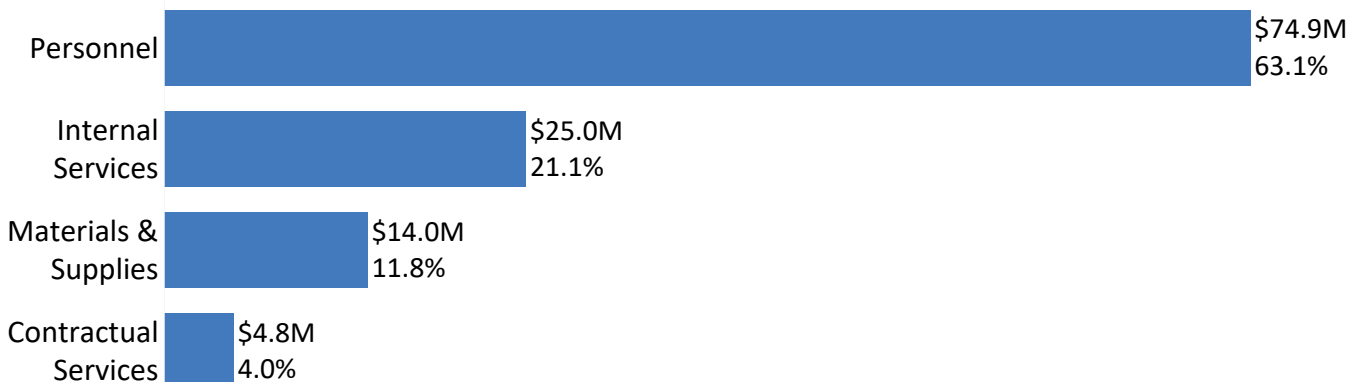
Supportive Housing Services

**\$180,000**

New Ongoing Programs

### Operating Budget by Category - \$118.7 million

Does not include cash transfers, contingencies, and unappropriated balances



The department's total budget is its legal budget, totaling \$118.7 million in FY 2025. The County is required by Oregon Budget Law to report the budget at this level, although doing it this way overstates what we actually plan to spend on programming because it includes unappropriated balances, contingencies, and cash transfers from one fund to another. Program offers reflect the total budget.

This budget document will often focus on the operating budget (a subset of the total budget) because that number avoids some double counting and provides a clearer picture of what the department expects to spend in a year. The operating budget excludes unappropriated balances, contingencies, and cash transfers. The Library's budget does not contain any unappropriated balances, contingencies, or cash transfers, so its operating budget is the same as its total budget. The table below shows the amounts that add up to the department's total budget.

<b>FY 2025 Library Budget</b>	
<b>Operating Budget</b>	<b>118,707,915</b>
Contingency (All Funds)	0
Internal Cash Transfers	0
Reserves (Unappropriated Balances)	<u>0</u>
<b>Total Budget</b>	<b>\$118,707,915</b>

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## Mission, Vision, and Values

Multnomah County Library serves our community based on a 2023-2025 strategic plan, Think MCL.

Values — The deeply held beliefs at the heart of the library

- The library works in relationship and partnership, centering communities furthest from opportunity in order to create equitable access to library resources and information.
- The library acknowledges and honors the resilience, wisdom and knowledge of our community members and staff most impacted by the living legacy of racism and oppression. The collective wisdom of these communities is at the heart of the library's journey toward a more equitable library system.
- To facilitate and inspire learning, the library invests in specialized, culturally and linguistically relevant expertise and support to build active, trusting relationships with learners of all ages, from birth through adulthood.
- The library serves as a leading advocate for reading in Multnomah County, centering communities that experience the greatest barriers in literacy support, in order to support lifelong learning for the entire community.

Goals — What we want to accomplish with focused effort

The library will:

- Create public, popular, and personal opportunities and access to life-long learning and contribute to improved learning outcomes for all communities.
- Adapt library services and materials so the organization can grow with, and be responsive to, our shared communities.
- Help people access and learn to use computers, internet and other technology to remove digital barriers.
- Create welcoming spaces that reflect our diverse and multicultural community.
- Support the practice of democracy and self-determination with services, spaces and resources.
- Ensure positive experiences for community members with library staff, spaces, materials, and services.
- Collaborate with communities to create flexible buildings and spaces that can adapt to the changes in community needs and hopes.

## 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 2024, the library initiated a set of new actions to advance racial equity, including a five-part set of mandatory learning modules for managers and supervisors, comprising Understanding Systems of Race and Racism; Confronting Anti-Blackness; Inclusively Leading with Race; Power, Privilege, and Bias; and Difficult Conversations.

Ongoing efforts include work to support library staff and managers of color, through coordinated group meetings and activities, one-on-one support following racially motivated incidents and follow up support and coordination around Civil Investigation Unit (CIU) complaints or outcomes. An important aspect of the library's strategic planning work is a strategic goal focusing on staff engagement, and the library is working to define a positive racial equity culture and develop a framework to achieve that based on themes from staff input. In FY 2024, the library completed "pulse checks" in locations around equity practices and culture, and issued a retrospective report, reflecting on progress, actions and outcomes in the program's history.

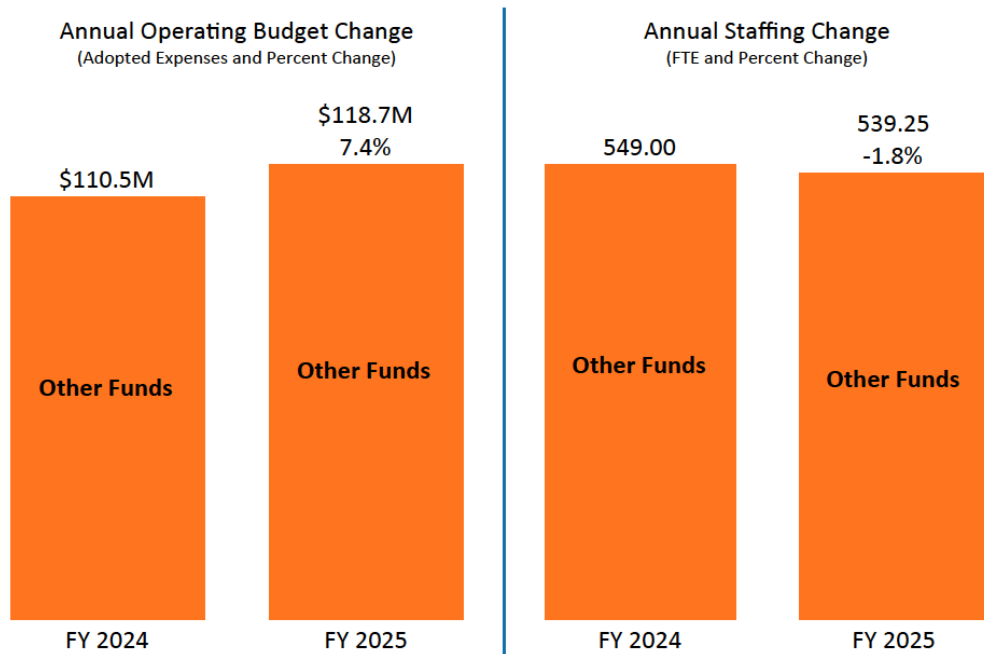
The library is engaging in activities and actions of the Workforce Equity Strategic Plan (WESP), as well as broader transformational actions. The WESP provides a foundation to support staff, management, and senior leadership by educating and shifting practices. Internally, the library has allocated resources to provide opportunities to expand culturally and linguistically diverse staff and teams

As an ongoing practice, program offer narratives all address how their services connect to or advance racial equity. The library is committed to meaningful change and to individual programs being accountable for the work of creating a more equitable library. Budget alignment with equity and inclusion goals and measures is the result of a strong collaboration between the library's Equity and Inclusion Manager, budget team, and program managers.

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.

# Budget Overview

The Library FY 2025 Adopted budget is \$118.7 million, a \$8.2 million (7.4%) increase from the FY 2024 Adopted budget. Library operations are funded almost entirely through the independent Multnomah County Library District. In the twelfth 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 2024 and is below the voter approved maximum of \$1.24 per \$1,000 of assessed value.



The most recent Library District forecast shows a small surplus next fiscal year, then increasing deficits as assessed value growth slows significantly due to low levels of development and declining downtown property values. In November 2020, voters passed the Library General Obligation Bond (GO Bond) measure which will fund development or significant renovations at eight library branches, including a new East County Flagship branch, as well as a new sorting center (opened in FY 2024) and expansion of automated materials handling capabilities. The majority of funding from the bond is held in Department of County Assets (DCA) program offers 78228A-J, which also feature detailed updates on each bond project. The Library is currently working with DCA to estimate expected ongoing increases for facilities and IT costs when new spaces open.

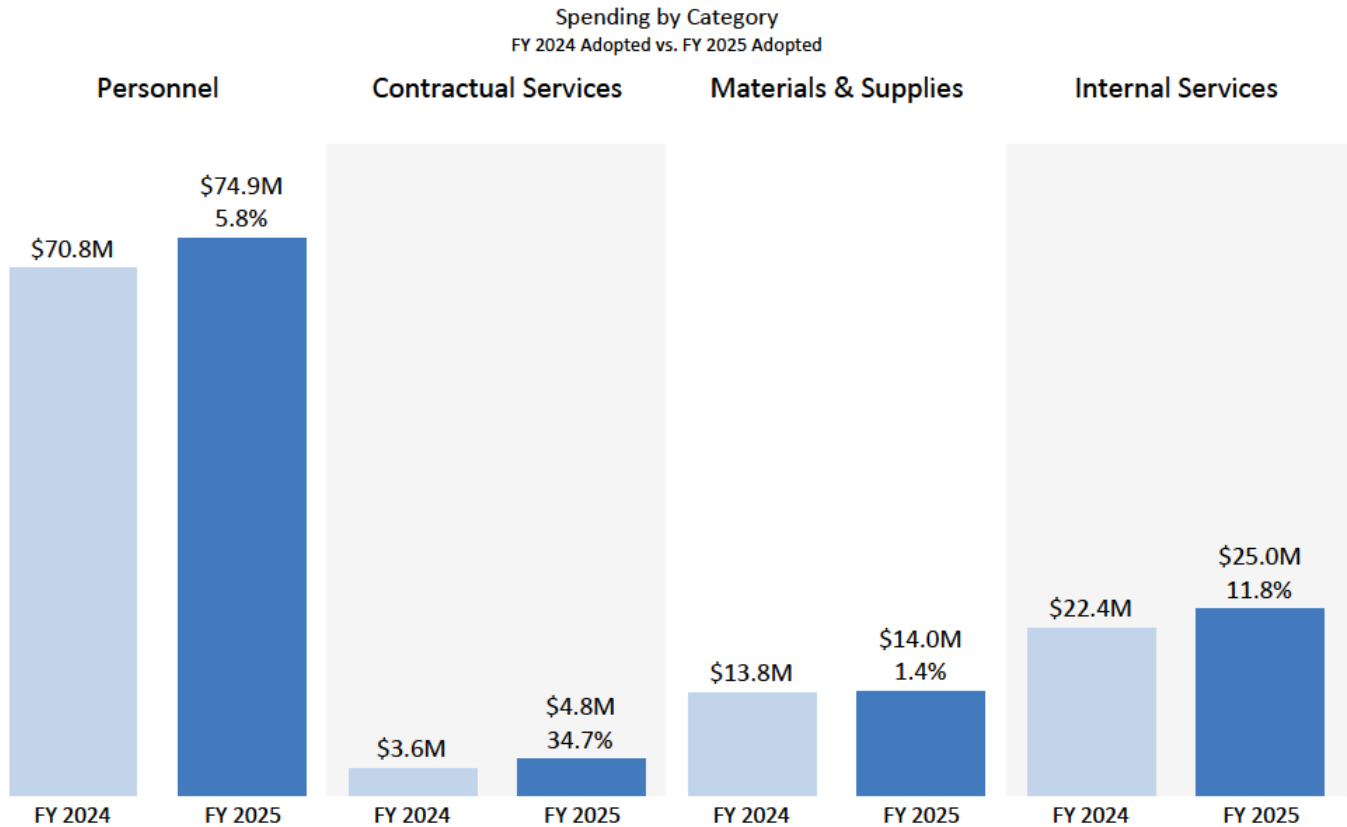
Significant changes to the Library’s budget for FY 2025 include new Program Offer Library Peer Support Specialists - Supportive Housing Services (80027), which will expand the team that provides direct crisis intervention and resource connection supports to include Peer Support Specialists. Library Events and Reader Services (80026) is a new program offer but not new programming. These services previously existed across other program offers.

The following table shows the new ongoing and one-time-only programs. Although Library Events and Readers Services is a new program offer, it is made up of programming that previously existed in other program offers. The 11.50 FTE in the program offer is not new FTE. This table, along with information on the Library’s one-time-only program offers for FY 2025, can be found in the Overview of Additions, Reductions, and Reallocations section of the Budget Director’s Message in Volume 1. In addition, the Budget Director’s Message contains a list of one-time-only programs for all departments.

### *New Ongoing and One-Time-Only Programs*

Prog. #	Program Offer Name	Other Funds		
		Ongoing	OTO	FTE
<b>Library</b>				
80025	Library Special Projects		1,452,985	
80026	Library Events and Reader Services	2,522,713		11.50
80027	Library Peer Support Specialists - Supportive Housing Services	<u>180,000</u>		
	<b>Library Total</b>	<b>\$2,702,713</b>	<b>\$1,452,985</b>	<b>11.50</b>

The chart below provides a breakdown of the budget's expense categories from FY 2024 to FY 2025. Personnel services is the largest component of the Library's budget, while Contractual Services had the largest percent increase between budget years. The chart is followed by the Operating Budget Trends table, which details the changes.



Operating Budget Trends	FY 2023	FY 2024	FY 2024	FY 2025	Difference
	Actual	Current Estimate	Adopted Budget	Adopted Budget	
Staffing FTE	545.23	549.00	549.00	539.25	(9.75)
Personnel Services	59,040,739	63,438,566	70,839,893	74,928,868	4,088,975
Contractual Services	1,531,490	3,197,511	3,553,860	4,788,237	1,234,377
Materials & Supplies	12,277,876	13,143,013	13,804,620	13,999,520	194,900
Internal Services	20,408,411	20,755,722	22,350,754	24,991,290	2,640,536
Capital Outlay	495,758	0	0	0	0
<b>Total Costs</b>	<b>\$93,754,274</b>	<b>\$100,534,812</b>	<b>\$110,549,127</b>	<b>\$118,707,915</b>	<b>\$8,158,788</b>

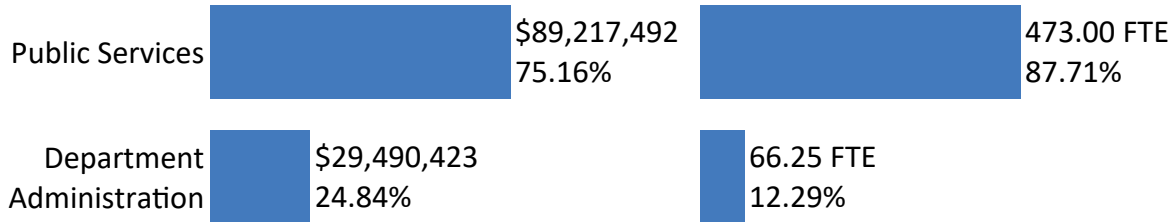
Does not include cash transfers, contingencies or unappropriated balances. Program offers DO contain cash transfers, contingencies, and unappropriated balances.



### Budget by Division

Division Name	General Fund	Other Funds	Total Division Cost	Total FTE
Department Administration	0	29,490,423	29,490,423	66.25
Public Services	0	89,217,492	89,217,492	473.00
<b>Total Library</b>	<b>\$0</b>	<b>\$118,707,915</b>	<b>\$118,707,915</b>	<b>539.25</b>

*Includes cash transfers, contingencies and unappropriated balances*



### Table of All Program Offers

The following table shows the programs by division that make up the department’s total budget. The individual programs follow, grouped by division.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Department Administration</b>						
80010	Library Director’s Office		0	2,006,040	2,006,040	8.00
80012	Business Services		0	2,370,524	2,370,524	8.00
80014	Facilities and Logistics		0	5,221,661	5,221,661	10.00
80017	Human Resources		0	4,082,680	4,082,680	17.75
80018	IT Services		0	12,261,714	12,261,714	6.00
80019	Marketing and Communications		0	2,094,819	2,094,819	10.50
80024	Library Building Bond Administration		0	0	0	6.00
80025	Library Special Projects	X	0	<u>1,452,985</u>	<u>1,452,985</u>	<u>0.00</u>
	<b>Total Department Administration</b>		<b>\$0</b>	<b>\$29,490,423</b>	<b>\$29,490,423</b>	<b>66.25</b>
<b>Public Services</b>						
80001	Central Library		0	13,450,677	13,450,677	82.50
80002	North and Northeast County Libraries		0	9,651,598	9,651,598	65.75
80003	West and South County Libraries		0	9,010,613	9,010,613	60.00
80004	Mid County Libraries		0	10,203,987	10,203,987	64.25
80005	East County Libraries		0	7,814,822	7,814,822	49.00
80006	Youth Development		0	2,524,508	2,524,508	7.75
80007	Community Information		0	3,274,274	3,274,274	23.25
80008	Community Learning		0	3,174,099	3,174,099	16.50
80020	Integrated Library Services		0	16,643,862	16,643,862	50.50
80022	Public Services Division Management		0	8,249,534	8,249,534	30.00
80023	Community Engagement		0	2,516,805	2,516,805	12.00
80026	Library Events and Reader Services		0	2,522,713	2,522,713	11.50
80027	Library Peer Support Specialists - Supportive Housing Services		0	<u>180,000</u>	<u>180,000</u>	<u>0.00</u>
	<b>Total Public Services</b>		<b>\$0</b>	<b>\$89,217,492</b>	<b>\$89,217,492</b>	<b>473.00</b>
	<b>Total Library<sup>1</sup></b>		<b>\$0</b>	<b>\$118,707,915</b>	<b>\$118,707,915</b>	<b>539.25</b>

<sup>1</sup> Includes cash transfers, contingencies, and unappropriated balances.

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## 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 recruits and places volunteers for all libraries.

**\$29.5 million**

### Department Administration

Total Adopted Budget

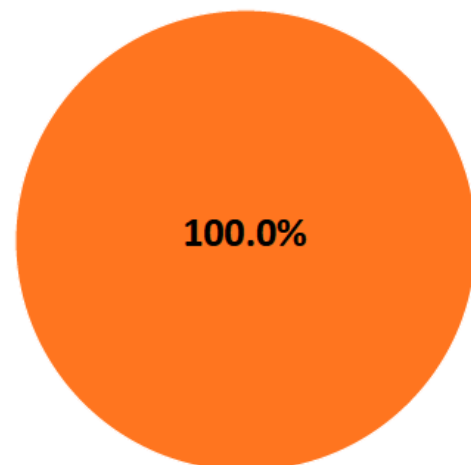
Including cash transfers, contingencies, and unappropriated balances.



**66.25 FTE**

(full time equivalent)

\$29.5M  
Other Funds



### Significant Division Changes

Fiscal Year 2025 will be the first full year of the library’s coordinated implementation of a strategic plan. This effort will help the library assign resources and priority to new spaces, people and groups that have been historically marginalized and new ways of providing services (various program offers).

Another area of sustained focus is a technology environment that includes rising costs and increased sophistication and specialization in the tools needed to deliver service. Of note are the systemwide implementation of automated materials handling (AMH) to move, sort and route materials; a new Intelligent Materials Movement System (IMMS) that will allow the library to maintain a collection of books and other materials at individual locations to maximize capacity while delivering materials that are of highest interest and use to individual communities (80018).

The library is also committing resources to implementing each of the recommendations offered in the December 2023 audit. Those include additional and continuing investments in security, technology, communications and staff engagement (various program offers).

With these projects and other foundational demonstrations of change and evolution across the system, the library can only be successful by providing needed training and change management support to its workers. The FY 2025 budget proposal funds the continuation of two limited duration positions in dedicated change management support (80017).

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Department Administration</b>						
80010	Library Director’s Office		0	2,006,040	2,006,040	8.00
80012	Business Services		0	2,370,524	2,370,524	8.00
80014	Facilities and Logistics		0	5,221,661	5,221,661	10.00
80017	Human Resources		0	4,082,680	4,082,680	17.75
80018	IT Services		0	12,261,714	12,261,714	6.00
80019	Marketing and Communications		0	2,094,819	2,094,819	10.50
80024	Library Building Bond Administration		0	0	0	6.00
80025	Library Special Projects	X	0	1,452,985	1,452,985	0.00
	<b>Total Department Administration</b>		<b>\$0</b>	<b>\$29,490,423</b>	<b>\$29,490,423</b>	<b>66.25</b>

**Department:** Library **Program Contact:** Vailey Oehlke

**Program Offer Type:** Administration **Program Offer Stage:** Adopted

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

The Library Director's Office provides executive leadership and strategic vision for the library system by working with elected leaders, advisory boards, community organizations, and staff to ensure that library services are responsive to the evolving needs of residents over time. This work is informed by a commitment to serve and support those who have previously not had access or been welcomed to the library.

**Program Description**

**ISSUE:** The Director's Office of the Library Department supports the work of two divisions—Public Services and Department Administration—to ensure that library services meet the evolving needs of the community over time.

**PROGRAM GOAL:** The Library Director's Office envisions the library's role and future in the community, then turns that vision into strategy and direction for the rest of the library.

**PROGRAM ACTIVITY:** In its work, the Director's Office partners with the Board of County Commissioners, the Multnomah County Library District Board, the Library Advisory Board, and the community. This program represents Multnomah County Library across the region and the nation, working with other libraries and library organizations. The program also partners with The Library Foundation and Friends of the Library to improve public support and fundraising. As part of the Library Director's Office, the library's Equity and Inclusion Manager provides equity leadership to the library.

**RACIAL EQUITY ADVANCEMENT:** The Equity and Inclusion Manager represents the library on the County's Workforce Equity Strategic Plan committee, and builds relationships with others both inside and outside of the library. This collaboration helps leverage resources, assess policies, consider library needs, and uphold equity work. The manager creates and monitors metrics to keep track of the library's equity progress. This program develops training for staff around working in a culturally responsive way. The program also works to build shared language and understanding around diversity, equity, and inclusion. This program will support all library programs in carrying out equity goals for the coming fiscal year. It will track the progress of those goals and provide guidance to program managers.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Library managers with at least four hours of equity and racially just leadership training or coaching	54	60	60	60
Outcome	Library user satisfaction with Multnomah County Library	97%	97%	97%	95%
Outcome	Recent library users who say they would recommend the library to others	92%	80%	88%	88%
Outcome	Retention rate for employees of color	90%	93%	90%	90%

**Performance Measures Descriptions**

Metrics that rely on the patron survey are from the most recent survey, completed in October 2022. The library is currently redesigning the patron survey, and will complete the next iteration in the fall of 2024.

## 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	2024	2024	2025	2025
Personnel	\$0	\$1,350,306	\$0	\$1,681,929
Contractual Services	\$0	\$91,500	\$0	\$156,800
Materials & Supplies	\$0	\$63,402	\$0	\$77,698
Internal Services	\$0	\$64,763	\$0	\$89,613
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,569,971</b>	<b>\$0</b>	<b>\$2,006,040</b>
<b>Program Total:</b>	<b>\$1,569,971</b>		<b>\$2,006,040</b>	
<b>Program FTE</b>	0.00	7.00	0.00	8.00

Program Revenues				
Intergovernmental	\$0	\$109,151,716	\$0	\$117,039,930
Other / Miscellaneous	\$0	\$35,000	\$0	\$35,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$109,186,716</b>	<b>\$0</b>	<b>\$117,074,930</b>

## Explanation of Revenues

This program generates \$69,127 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 (98%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (2%).

## Significant Program Changes

Last Year this program was: FY 2024: 80010 Library Director's Office





## 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	2024	2024	2025	2025
Personnel	\$0	\$3,009,085	\$0	\$2,032,611
Contractual Services	\$0	\$9,700	\$0	\$9,758
Materials & Supplies	\$0	\$102,420	\$0	\$98,260
Internal Services	\$0	\$147,317	\$0	\$229,895
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,268,522</b>	<b>\$0</b>	<b>\$2,370,524</b>
<b>Program Total:</b>	<b>\$3,268,522</b>		<b>\$2,370,524</b>	
<b>Program FTE</b>	0.00	8.00	0.00	8.00

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

## Explanation of Revenues

This program generates \$83,426 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 (98%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (2%).

## Significant Program Changes

**Last Year this program was:** FY 2024: 80012 Business Services

The large decline in personnel costs is due to a large one-time retention bonus that was budgeted in the prior year. The retention bonus for all library staff members was budgeted in this program offer in FY 2024.

**Department:** Library **Program Contact:** Meg Matsushima  
**Program Offer Type:** Administration **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 services in successfully achieving their goals.

**Program Description**

**ISSUE:** Because the Library District owns the building assets for Multnomah County Library, the library holds ultimate accountability for the state of its buildings.

**PROGRAM GOAL:** Facilities and Logistics ensures that 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 library’s 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 library’s 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, connection to nature, and workforce equity within facilities projects.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Crates of books, mail, and supplies moved annually	159,714	140,000	170,500	180,000
Outcome	% of patrons who agree library spaces are safe and welcoming	92%	90%	92%	90%

**Performance Measures Descriptions**

Metrics that rely on the patron survey are from the most recent survey, completed in October 2022. The library is currently redesigning the patron survey, and will complete the next iteration in the fall of 2024.

## 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	2024	2024	2025	2025
Personnel	\$0	\$1,334,082	\$0	\$1,520,654
Contractual Services	\$0	\$2,000	\$0	\$2,000
Materials & Supplies	\$0	\$51,232	\$0	\$54,646
Internal Services	\$0	\$3,727,043	\$0	\$3,644,361
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,114,357</b>	<b>\$0</b>	<b>\$5,221,661</b>
<b>Program Total:</b>	<b>\$5,114,357</b>		<b>\$5,221,661</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 \$62,499 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 (98%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (2%).

## Significant Program Changes

Last Year this program was: FY 2024: 80014 Facilities and Logistics



## 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	2024	2024	2025	2025
Personnel	\$0	\$3,000,154	\$0	\$3,521,215
Contractual Services	\$0	\$65,000	\$0	\$51,500
Materials & Supplies	\$0	\$371,361	\$0	\$351,919
Internal Services	\$0	\$119,884	\$0	\$158,046
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,556,399</b>	<b>\$0</b>	<b>\$4,082,680</b>
<b>Program Total:</b>	<b>\$3,556,399</b>		<b>\$4,082,680</b>	
<b>Program FTE</b>	0.00	17.75	0.00	17.75

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

## Explanation of Revenues

This program generates \$144,722 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 (98%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (2%).

## Significant Program Changes

**Last Year this program was:** FY 2024: 80017 Human Resources

The FY 2025 budget includes funding to extend 2.0 limited duration positions supporting change management efforts across the organization.

**Department:** Library

**Program Contact:** Jon Worona

**Program Offer Type:** Administration

**Program Offer Stage:** Adopted

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

IT Services provides leadership and resources for the library’s technology vision, ensuring robust and sustainable technology, and supporting innovative, inclusive service to diverse communities and staff. This program maintains computers, mobile devices, equipment, networking, applications integration, development, and security. It also supports learning, creation, and productivity for the public and staff.

**Program Description**

**ISSUE:** The library is committed to digital equity and inclusion, to increase access to equipment, internet, and tech help.

**PROGRAM GOAL:** Library IT Services defines and develops technology solutions that align with patron and staff needs and support library priorities.

**PROGRAM ACTIVITY:** The library’s IT Services partners with County IT to maintain more than 1,000 public computers and mobile devices, the library website, intranet, software, servers, internet access, and Wi-Fi in library facilities. Library users can search the catalog of materials, manage their accounts, download e-books, stream audio and video content, use electronic resources, and access the internet for educational, business, and personal use. Children and adults use library computers and tablets to do research, complete homework, apply for jobs, find reading, communicate, and participate in social media. Public computers also provide office software to accomplish personal, business, and school work. The library offers computers and software in training rooms, for use in libraries, or to take home. Many public computer users have no access to a computer or high-speed internet at home, so the library is their only window to technology, communication, and information. IT Services also regularly maintains more than 800 computers, equipment, and software for library staff, supporting office computing and systems such as the library catalog, patron database, circulation system, materials acquisition system, electronic resources, and other internal operations. Due to bond-related closures and openings in the coming year, IT Services will support the disconnection, move, storage, refresh, acquisition, configuration, and installation of many of the public computers, staff computers, and related equipment within this program.

**RACIAL EQUITY ADVANCEMENT:** This program supports and is influenced by the Digital Equity and Inclusion Coordinator and participates in the regional Coalition of Digital Equity (CODE). Library IT Services runs the Tech Lending program that provides digital literacy training and Chromebook loans. Tech Lending prioritizes BIPOC patrons. Most patrons are referred to the program through community partners or by staff specifically working with BIPOC communities.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of public computers	588	911	911	1,025
Outcome	Library user satisfaction with the availability of public computers and Wi-Fi	98%	75%	98%	95%
Output	Number of public computer sessions	N/A	N/A	260,000	278,000
Output	Number of public devices using Wi-Fi	N/A	N/A	620,781	1,250,000

**Performance Measures Descriptions**

Number of public devices using Wi-Fi” counts unique devices once per day, per location. Device counts are not subject to misrepresentation by factors that can inflate the count, allowing for a more accurate measure of library Wi-Fi usage. Public computer sessions are now tracked separately. Metrics that rely on the patron survey are from the most recent survey, in October 2022. The library is currently redesigning the patron survey, and will complete the next iteration in the fall of 2024.

## 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	2024	2024	2025	2025
Personnel	\$0	\$1,215,899	\$0	\$1,278,871
Contractual Services	\$0	\$638,090	\$0	\$298,150
Materials & Supplies	\$0	\$1,728,396	\$0	\$1,867,434
Internal Services	\$0	\$8,365,554	\$0	\$8,817,259
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$11,947,939</b>	<b>\$0</b>	<b>\$12,261,714</b>
<b>Program Total:</b>	<b>\$11,947,939</b>		<b>\$12,261,714</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 \$52,562 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 (98%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (2%).

## Significant Program Changes

**Last Year this program was:** FY 2024: 80018 IT Services

The library sunsetted Wi-Fi hotspot lending for FY 2025 because the program was initiated during COVID to provide internet access while locations were closed, but due to new and ongoing technology support costs—associated with larger spaces with more robust technology access, including library Wi-Fi—this service is no longer viable.

IT Services is funding a new audiovisual support function, contracted through County IT. This asset will provide support and guidance to library patrons and staff using audiovisual technology funded by the Library Capital Bond Program.

**Department:** Library **Program Contact:** Shawn Cunningham

**Program Offer Type:** Administration **Program Offer Stage:** Adopted

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

The Marketing and Communications program leads internal and external communication strategy, maintaining and evolving the library’s public image, brand, social media presence, and informational resources in five languages to connect the community to library resources, programs, and collections. Marketing and Communications centers the needs of historically underserved and oppressed communities.

**Program Description**

**ISSUE:** Marketing and Communications (Marcom) provides essential communication services to the library and the thousands of library users each day, both online and in person.

**PROGRAM GOAL:** This program supports internal staff communication and creates lasting, meaningful relationships with the community to uphold the library’s values and strategic plan.

**PROGRAM ACTIVITY:** Marcom maintains an informative and engaging strategic online presence in social media and email marketing, overseeing the library’s brand and identity. It develops strategies and resources to promote library use and creates mechanisms to gather library user feedback and input. This program provides critical guidance and input into systemwide strategic decisions, and also provides clear, timely information to the public and the news media, including the coordination, application, and translation of information to distinct cultural and language communities. Marcom communicates with library staff about the ongoing evolution of library services and resources, and advances the library’s priorities and community engagement ethos for the reinvention of library spaces.

**RACIAL EQUITY ADVANCEMENT:** Marcom uses the County’s Community Opportunity Map (layers of statistical demographic measures), Knowledge, Skills, and Abilities (KSA) staff allocation, and cultural- and language-specific resources to engage diverse communities of color in ways that are relevant—through language, design, and platform. Marcom partners with KSA staff to understand and respond to specific community needs and connect people with library services and resources.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Active cardholders	231,000	210,000	220,000	230,000
Outcome	Market penetration (active cardholder households as a percentage of all households in the service area)	38%	36%	36%	38%

**Performance Measures Descriptions**

Marcom’s performance measures are statistical indicators of how many people have active library cards and what percentage of households include active cardholders.



## 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	2024	2024	2025	2025
Personnel	\$0	\$1,742,577	\$0	\$1,778,377
Contractual Services	\$0	\$123,000	\$0	\$72,000
Materials & Supplies	\$0	\$166,726	\$0	\$165,902
Internal Services	\$0	\$67,990	\$0	\$78,540
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,100,293</b>	<b>\$0</b>	<b>\$2,094,819</b>
<b>Program Total:</b>	<b>\$2,100,293</b>		<b>\$2,094,819</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 \$73,091 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 (98%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (2%).

## Significant Program Changes

Last Year this program was: FY 2024: 80019 Marketing and Communications



## 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
<b>Program Expenses</b>	<b>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
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

<b>Program Revenues</b>				
<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 2024: 80024 Library Building Bond Administration](#)



## Legal / Contractual Obligation

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## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$0	\$0	\$28,000
Contractual Services	\$0	\$120,000	\$0	\$171,583
Materials & Supplies	\$0	\$465,000	\$0	\$299,000
Internal Services	\$0	\$777,411	\$0	\$954,402
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$1,362,411</b>	<b>\$0</b>	<b>\$1,452,985</b>
<b>Program Total:</b>	<b>\$1,362,411</b>		<b>\$1,452,985</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,362,411	\$0	\$1,452,985
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,362,411</b>	<b>\$0</b>	<b>\$1,452,985</b>

## Explanation of Revenues

This program generates \$1,151 in indirect 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: FY 2024: 80025 Library Special Projects

## 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 to use and get help with technology.

Other programs include Community Information, which provides in-person and virtual reference services, and the contact center, which serves library users via phone, email, text, and chat. Library Events and Readers Services provides support for in-person and virtual programming, reader services, summer reading, and creative learning spaces. Community Learning provides support for adult literacy, literacy services for child care providers, and partnership-based services to support literacy development for children and teens and works with school districts to improve student success. Community Engagement connects both in-person and virtually with stakeholder groups and partners, provides programs and services to older adults and people experiencing homelessness. Other programs and services include Youth Development, which supports kindergarten readiness, school-age programming, and teen engagement. Some programs that focus on services in the community were part of a FY 2024 partial reorganization; changes are reflected in FY 2025 program offers.

Integrated Library Services buys, catalogs, digitizes, curates, and processes print and electronic/digital resources. It manages interlibrary loans, around 2,900 periodical subscriptions, more than 120 databases and online resources (such as OverDrive and Hoopla), and supports the systemwide 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 security program.

**\$89.2 million**

### Public Services

Total Adopted Budget

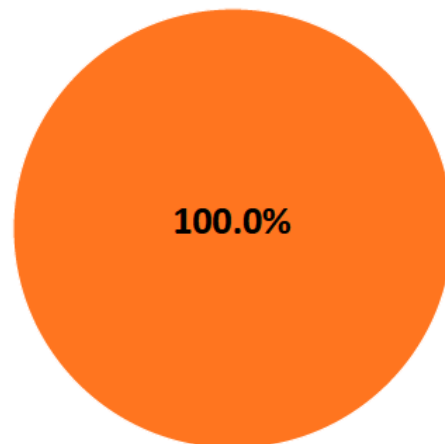
Including cash transfers, contingencies, and unappropriated balances.



**473.00 FTE**

(full time equivalent)

\$89.2M  
Other Funds



### Significant Division Changes

The library system will continue experiencing 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 reopen in FY 2025, while Belmont, Northwest and St. Johns will be closed during much of FY 2025 for major bond renovations. Hollywood, Rockwood, Troutdale, and Kenton Libraries will close for part of FY 2025 to accommodate smaller refresh projects managed through the bond program.

The library is anticipating materials movement and workflow efficiencies as a result of the new centralized sort center and automated materials handling system, but these efficiencies will not be fully realized for a few years. The library is shifting permanent positions to the centralized sort center, and backfilling with limited duration positions in locations for two years.

The division will pilot a new security staffing measure in FY 2025. The Public Services Management program offer (80022) includes new limited duration supervisor positions to provide additional person-in-charge support at locations that experience high rates of security incidents.

The division will augment its approach to translation editing by reclassifying two positions to act as Translation Editors for Russian and Chinese language informational materials.

### Table of Division Programs

The following table shows the programs that make up the division’s budget, including cash transfers, contingencies, and unappropriated balances. The individual programs for this division follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
<b>Public Services</b>						
80001	Central Library		0	13,450,677	13,450,677	82.50
80002	North and Northeast County Libraries		0	9,651,598	9,651,598	65.75
80003	West and South County Libraries		0	9,010,613	9,010,613	60.00
80004	Mid County Libraries		0	10,203,987	10,203,987	64.25
80005	East County Libraries		0	7,814,822	7,814,822	49.00
80006	Youth Development		0	2,524,508	2,524,508	7.75
80007	Community Information		0	3,274,274	3,274,274	23.25
80008	Community Learning		0	3,174,099	3,174,099	16.50
80020	Integrated Library Services		0	16,643,862	16,643,862	50.50
80022	Public Services Division Management		0	8,249,534	8,249,534	30.00
80023	Community Engagement		0	2,516,805	2,516,805	12.00
80026	Library Events and Reader Services		0	2,522,713	2,522,713	11.50
80027	Library Peer Support Specialists - Supportive Housing Services		0	<u>180,000</u>	<u>180,000</u>	<u>0.00</u>
<b>Total Public Services</b>			<b>\$0</b>	<b>\$89,217,492</b>	<b>\$89,217,492</b>	<b>473.00</b>





## Legal / Contractual Obligation

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## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$9,434,480	\$0	\$9,896,589
Contractual Services	\$0	\$238,772	\$0	\$259,582
Materials & Supplies	\$0	\$86,868	\$0	\$78,327
Internal Services	\$0	\$3,246,584	\$0	\$3,216,179
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$13,006,704</b>	<b>\$0</b>	<b>\$13,450,677</b>
<b>Program Total:</b>	<b>\$13,006,704</b>		<b>\$13,450,677</b>	
<b>Program FTE</b>	0.00	87.25	0.00	82.50

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

## Explanation of Revenues

This program generates \$406,751 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 (98%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (2%).

## Significant Program Changes

**Last Year this program was:** FY 2024: 80001 Central Library

After closures for Capital Bond work during portions of FY 2023 and FY 2024, Central Library reopened to the public in FY 2024 and will be open for the entirety of FY 2025.

**Department:** Library **Program Contact:** Serenity McWilliams

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

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

North and Northeast County libraries (Albina, Hollywood, Kenton, North Portland, St. Johns) 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, 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:** North and Northeast 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. Albina, North Portland, Kenton, Hollywood, and St. Johns libraries are being renovated 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:** North and Northeast County libraries continue focusing on strategies to best serve marginalized communities and advance equity. Decisions about opening a temporary space were informed using a community needs assessment and the prioritization of services based on identified needs: technology access and assistance, collection access, information access, and library materials pick-up. Library services were prioritized to serve those from underserved communities and provide a cultural- and/or language-specific lens. This included storytimes, youth literacy programs, virtual and in-person adult classes (ESL, citizenship, computer use, small business), 1:1 tech training, and job assistance training.

**RACIAL EQUITY ADVANCEMENT:** All library locations are actively engaging in equity work. Open access without barriers to library spaces continues to be the priority. Additional staff focused on serving the Indigenous community were added, and the teams dedicated to serving the Black community and Spanish-speaking community, respectively, expanded.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of library visits	487,533	360,000	497,000	480,000
Outcome	% of library users who found books and items they wanted	93%	93%	93%	93%

**Performance Measures Descriptions**

Metrics that rely on the patron survey are from the most recent survey, completed in October 2022. The library is currently redesigning the patron survey, and will complete the next iteration in the fall of 2024.

## 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	2024	2024	2025	2025
Personnel	\$0	\$7,639,642	\$0	\$7,963,457
Contractual Services	\$0	\$2,979	\$0	\$2,644
Materials & Supplies	\$0	\$106,233	\$0	\$107,974
Internal Services	\$0	\$1,085,774	\$0	\$1,577,523
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$8,834,628</b>	<b>\$0</b>	<b>\$9,651,598</b>
<b>Program Total:</b>	<b>\$8,834,628</b>		<b>\$9,651,598</b>	
<b>Program FTE</b>	0.00	66.75	0.00	65.75

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

## Explanation of Revenues

This program generates \$323,846 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 (98%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (2%).

## Significant Program Changes

**Last Year this program was:** FY 2024: 80002 North and Northeast County Libraries

Services in this region will continue to be impacted by ongoing Capital Bond projects. During FY 2025, the North Portland and Albina libraries will reopen after major construction; Kenton, St. Johns, and Hollywood libraries will close for bond work. The Continuity of Library Services work in the region will continue into FY 2025: the Multnomah County Library at University of Oregon (MCL@UO) pop-up will sunset, and work will continue to identify supports in the Hollywood neighborhood.



## 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	2024	2024	2025	2025
Personnel	\$0	\$6,927,094	\$0	\$7,248,881
Contractual Services	\$0	\$3,047	\$0	\$2,982
Materials & Supplies	\$0	\$77,385	\$0	\$80,355
Internal Services	\$0	\$1,664,316	\$0	\$1,678,395
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$8,671,842</b>	<b>\$0</b>	<b>\$9,010,613</b>
<b>Program Total:</b>	<b>\$8,671,842</b>		<b>\$9,010,613</b>	
<b>Program FTE</b>	0.00	59.75	0.00	60.00

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

## Explanation of Revenues

This program generates \$297,930 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 (98%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (2%).

## Significant Program Changes

**Last Year this program was:** FY 2024: 80003 West and South County Libraries

Services in this region will continue to be impacted by ongoing Capital Bond projects. During FY 2025, Hillsdale Library will reopen after a refresh; Belmont and Northwest libraries will close for bond work.

**Department:** Library **Program Contact:** Silvana Santana Gabriell  
**Program Offer Type:** Operating **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. Woodstock Library will be refreshed, Holgate Library remodeled, and Midland Library renovated 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:** Mid County libraries continue to focus on strategies to best serve marginalized communities and advance racial equity. Outreach and programming decisions were informed using a community needs assessment and the prioritization of services based on identified needs: technology access and assistance, collection access, information access, and library materials pick-up. 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 storytimes, youth literacy programs, and virtual and in-person adult classes (ESL, citizenship, computer use, small business, and tech training).

**RACIAL EQUITY ADVANCEMENT:** All library locations are actively engaging in equity work. Open access without barriers to library spaces is the priority. Additional staff focused on serving the Indigenous community as well as the Chinese, Vietnamese, and Spanish-speaking communities, respectively, were added.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of library visits	356,060	150,000	206,000	475,000
Outcome	% of library users who found books and items they wanted	93%	93%	93%	92%

**Performance Measures Descriptions**

Metrics that rely on the patron survey are from the most recent survey, completed in October 2022. The library is currently redesigning the patron survey, and will complete the next iteration in the fall of 2024.

## 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	2024	2024	2025	2025
Personnel	\$0	\$7,260,132	\$0	\$8,012,599
Contractual Services	\$0	\$2,915	\$0	\$2,795
Materials & Supplies	\$0	\$73,943	\$0	\$92,502
Internal Services	\$0	\$772,241	\$0	\$2,096,091
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$8,109,231</b>	<b>\$0</b>	<b>\$10,203,987</b>
<b>Program Total:</b>	<b>\$8,109,231</b>		<b>\$10,203,987</b>	
<b>Program FTE</b>	0.00	63.00	0.00	64.25

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

## Explanation of Revenues

This program generates \$331,265 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 (98%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (2%).

## Significant Program Changes

**Last Year this program was:** FY 2024: 80004 Mid County Libraries

Services in this region will continue to be impacted by ongoing Capital Bond projects. During FY 2025, Holgate and Midland libraries will reopen after major construction, and Woodstock Library will close for a refresh.

**Department:** Library **Program Contact:** Angela Weyrens  
**Program Offer Type:** Operating **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

East County libraries (Fairview, Gresham, Rockwood, Troutdale) 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, 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:** East County libraries’ language learning and educational programs improve employment opportunities and quality of life for those with low English proficiency and limited resources. To support critical life skill development and digital literacy, 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. Rockwood and Troutdale libraries 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:** East County libraries continue to focus on strategies to best serve marginalized communities and advance racial equity. Outreach and programming decisions were informed using a community needs assessment and the prioritization of services based on identified needs: technology access and assistance, collection access, information access, and library materials pick-up. Library services were prioritized to serve those from underserved communities and provide a cultural- and/or language-specific lens. This included storytimes, youth literacy programs, workshops for teens, virtual and in-person adult classes (ESL, citizenship, computer use, small business), 1:1 tech training, and job assistance training.

**RACIAL EQUITY ADVANCEMENT:** All library locations are actively engaging in equity work. Open access without barriers to library spaces is the priority. Additional staff focused on serving the Russian and Spanish-speaking communities were added. Understanding how patrons would migrate to other locations due to closures, the Vietnamese and Chinese language collections from Midland were relocated to Rockwood during the closure.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of library visits	315,363	275,000	359,000	310,000
Outcome	% of library users who found books and items they wanted	91%	91%	91%	92%

### Performance Measures Descriptions

Metrics that rely on the patron survey are from the most recent survey, completed in October 2022. The library is currently redesigning the patron survey, and will complete the next iteration in the fall of 2024.



## 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	2024	2024	2025	2025
Personnel	\$0	\$5,976,388	\$0	\$6,420,119
Contractual Services	\$0	\$2,382	\$0	\$2,723
Materials & Supplies	\$0	\$100,659	\$0	\$89,129
Internal Services	\$0	\$1,368,662	\$0	\$1,302,851
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$7,448,091</b>	<b>\$0</b>	<b>\$7,814,822</b>
<b>Program Total:</b>	<b>\$7,448,091</b>		<b>\$7,814,822</b>	
<b>Program FTE</b>	0.00	49.75	0.00	49.00

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

## Explanation of Revenues

This program generates \$263,981 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 (98%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (2%).

## Significant Program Changes

**Last Year this program was:** FY 2024: 80005 East County Libraries

Services in this region will be impacted by ongoing Capital Bond projects. During FY 2025, Troutdale Library will close from summer 2024 through fall 2024. The Continuity of Library Services work in the region will continue as Rockwood Library accommodates patrons from the closed Midland and Holgate libraries.

**Department:** Library **Program Contact:** Danielle Jones  
**Program Offer Type:** Operating **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** Measure 5 Education

**Executive Summary**

Youth Development provides leadership, strategic vision, training, and support for Multnomah County Library youth and family initiatives, and ensures youth have access to library resources and services. It coordinates and consults with location, regional, and outreach staff on services and partnerships to support youth ages 0–18, focusing on brain development, literacy skills, school readiness, school support, life skills, teen leadership development, connected learning, and reading for fun.

**Program Description**

**ISSUE:** Youth Development designs and delivers robust services to youth from birth to adulthood—along with parents, caregivers, educators, and community partners—to foster early literacy and positive educational and social development. This is in alignment with the library’s strategic goals, that Multnomah County Library creates public, popular, and personal intersections for lifelong learning and contributes to improved educational outcomes for learners of all ages.

**PROGRAM GOAL:** This program provides oversight to systemwide youth and teen services efforts, prioritizing the needs of nondominant youth and families facing marginalization and limited access to services.

**PROGRAM ACTIVITY:** To remove barriers for youth to access library resources, Library Connect is offered in partnership with school districts across Multnomah County to seamlessly connect students with the library. Staff who are trained in early child development, brain development, and early reading research train staff and community partners, as well as visit classes taught in multiple languages to help adults learn how to read, talk, sing, play, and rhyme with babies, toddlers, and preschoolers so that children develop the pre-reading skills they need before they enter kindergarten. Focusing on the whole family, staff provide at-home learning support through virtual tutoring, literacy programming, family newsletters, and connecting families with community resources. Through strong teen engagement efforts and focusing on the principles of connected learning that combines personal interests, supportive relationships, and opportunities, staff support the leadership development of teens. Leadership for youth services is provided by Youth Development management and fostered in youth and teen librarians who provide location-specific direction to staff who serve youth.

**RACIAL EQUITY ADVANCEMENT:** Prioritizing BIPOC youth, staff help create pathways for teen voices to be heard in library decision-making, and create opportunities for teens to lead library programming and initiatives. Systemwide youth services focus on providing services to youth and families, initiatives and advocacy around issues that youth and families face, and a strong commitment to diversity, equity, and inclusion.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of K–12 students who have access to library resources and services through Library Connect	115,322	90,000	110,000	110,000
Outcome	% of virtual tutoring users who would recommend the service to a friend	100%	85%	85%	85%

**Performance Measures Descriptions**

## Legal / Contractual Obligation

The budget reflects the passage of Measure 26-143: "Form Library District with permanent rate to fund library services," November 2012 General Election. The district summary states in pertinent part: "If approved, the Multnomah County Library District would be formed with a permanent rate dedicated to library services, operations, books, materials, programs, activities and oversight of the district. Formation of a District would...prevent reductions in services, programs and activities, and hours."

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$1,191,709	\$0	\$1,217,698
Contractual Services	\$0	\$1,288,500	\$0	\$1,091,000
Materials & Supplies	\$0	\$133,366	\$0	\$156,029
Internal Services	\$0	\$46,031	\$0	\$59,781
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,659,606</b>	<b>\$0</b>	<b>\$2,524,508</b>
<b>Program Total:</b>	<b>\$2,659,606</b>		<b>\$2,524,508</b>	
<b>Program FTE</b>	0.00	7.75	0.00	7.75

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

## Explanation of Revenues

This program generates \$50,047 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 (98%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (2%).

## Significant Program Changes

**Last Year this program was:** FY 2024: 80006 Youth Development

Youth Development is now: overseeing the Listos para aprender program, preparing Spanish-speaking families for the American school system; beginning an initiative to prepare teens for post-high school life, centering the needs of immigrant, first-generation, and undocumented youth to navigate the college and career process; and overseeing the library collection needs for the Donald E. Long juvenile detention education program. The decline in contracted services is related to a grant-funded purchase of early learning playspaces budgeted in the prior year. The corresponding grant amount for FY 2025 will be budgeted via amendment prior to budget adoption.



## 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	2024	2024	2025	2025
Personnel	\$0	\$2,616,962	\$0	\$2,975,446
Contractual Services	\$0	\$0	\$0	\$30,000
Materials & Supplies	\$0	\$75,009	\$0	\$72,479
Internal Services	\$0	\$172,750	\$0	\$196,349
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,864,721</b>	<b>\$0</b>	<b>\$3,274,274</b>
<b>Program Total:</b>	<b>\$2,864,721</b>		<b>\$3,274,274</b>	
<b>Program FTE</b>	0.00	21.25	0.00	23.25

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

## Explanation of Revenues

This program generates \$122,290 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 (98%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (2%).

## Significant Program Changes

**Last Year this program was:** FY 2024: 80007 Community Information

In FY 2024, the Community Information program was combined with the Library Events and Reader Services division in one program offer (80007); for FY 2025, Library Events and Reader Services is a separate program offer (80026).

Community Information has added translation team positions to utilize in-house linguistic expertise—providing culturally relevant information about library services and resources—and has added Vietnamese, Chinese, and Russian-speaking staff to phone, chat, and email services. In FY 2024, the Community Information program also adopted a service previously provided by San Francisco Public Library, answering reference questions by mail to Oregon adults in custody. A replacement outcome measurement was implemented in FY 2024.

**Department:** Library      **Program Contact:** Jennifer Studebaker  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Community Learning connects community members who face barriers in accessing library services with resources to accomplish their learning goals. This program serves community members of all ages through technology classes, adult literacy tutoring, and youth outreach programs, with an equity-based service model. Our programs and services align with the library’s values of working in partnership and relationship; centering communities furthest from opportunity in order to create equitable access to library resources and information; and using our cultural and linguistic expertise to build active, trusting relationships with caregivers, educators, and learners of all ages.

**Program Description**

**ISSUE:** Community members face educational disparities based on race, language, disability, and other identities that experience marginalization.

**PROGRAM GOAL:** The goal of Community Learning is to connect those who face barriers with the resources and learning opportunities they need. We minimize disparities by offering free, culturally relevant services. We work with partners to promote our services to communities that need them the most.

**PROGRAM ACTIVITY:** The Adult Learning team connects community members who have not been sufficiently served by schools or who face barriers to employment with the resources they need to accomplish their goals. This includes services for ESL, basic literacy, and GED learners; digital literacy programs; and more. In partnership with other library and County teams, Adult Learning staff also provide services to adults in custody in jails and prisons. The Youth Learning team serves children from birth through 12th grade, and their caregivers and educators. This includes curriculum support for K–12 students and educators; high-interest, culturally reflective books for 3rd–5th graders; and early literacy classes and books in multiple languages. Youth Learning works with County and community partners to provide services in schools, childcare, shelters, Relief Nurseries, and correctional institutions.

**RACIAL EQUITY ADVANCEMENT:** This program connects with community members who face the greatest barriers to accessing library services, particularly communities of color and immigrants. We seek input to better adapt programs for community members’ needs. We use an equity model to prioritize services provided to K–12 schools, and partner with local organizations who prioritize racial equity and work with underserved communities. Partners include Head Start, Black Parent Initiative, Hacienda CDC, Impact Northwest, Portland Literacy Council, Easter Seals, and Neighborhood House.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of books circulated to childcare providers	40,725	50,000	34,000	48,000
Outcome	% of participants who learn something new from an adult learning program	100%	80%	90%	80%

**Performance Measures Descriptions**

Due to a reorganization, we replaced last year’s output measure (“Number of children and teens who participate in the Summer Reading Program”) with an output measure that was previously listed within the sunsetted Mobile and Partner Libraries program offer (80009) in FY 2024.

## 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	2024	2024	2025	2025
Personnel	\$0	\$3,120,195	\$0	\$2,620,279
Contractual Services	\$0	\$11,500	\$0	\$18,240
Materials & Supplies	\$0	\$398,063	\$0	\$396,541
Internal Services	\$0	\$134,486	\$0	\$139,039
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,664,244</b>	<b>\$0</b>	<b>\$3,174,099</b>
<b>Program Total:</b>	<b>\$3,664,244</b>		<b>\$3,174,099</b>	
<b>Program FTE</b>	0.00	21.50	0.00	16.50

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

## Explanation of Revenues

This program generates \$107,693 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 (98%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (2%).

## Significant Program Changes

**Last Year this program was:** FY 2024: 80008 Community Learning

The Rockwood Makerspace and Summer Reading Program have been moved to the Library Events and Reader Services program offer (80026). Services and collections delivered to adults in custody in jails and prisons and to families using childcare services have moved from the sunsetted Mobile and Partner Libraries program offer (80009) to Community Learning. The FY 2024 output measure relating to Summer Reading has been replaced for FY 2025 with an output measure related to childcare services, which was previously listed in the Mobile and Partner Libraries program offer.

A suite of workplace development services that were created in response to the COVID-19 pandemic will be sunsetted, and associated staff resources will be reassigned to support new, larger library locations.





## 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	2024	2024	2025	2025
Personnel	\$0	\$5,373,615	\$0	\$6,519,030
Contractual Services	\$0	\$534,600	\$0	\$466,250
Materials & Supplies	\$0	\$9,201,198	\$0	\$9,359,276
Internal Services	\$0	\$216,044	\$0	\$299,306
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$15,325,457</b>	<b>\$0</b>	<b>\$16,643,862</b>
<b>Program Total:</b>	<b>\$15,325,457</b>		<b>\$16,643,862</b>	
<b>Program FTE</b>	0.00	43.25	0.00	50.50

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

## Explanation of Revenues

This program generates \$265,984 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 (98%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (2%).

## Significant Program Changes

**Last Year this program was:** FY 2024: 80020 Integrated Library Services

The Library Operations Center opened in November 2023 and will house 500,000 books, as well as a 62-bin Automated Materials Handling system. Purchasing for new collections (with bond funds) for opening day at our new libraries began this year. As of February 2024, 64 pallets of books have arrived. Orders for more than double that will be completed by the end of FY 2024. A librarian position dedicated to selecting and procuring materials for the Indigenous community was also added.

Several Access Services Assistant positions have been reassigned from library locations to support the work of the centralized Sort Center in the new Operations Center.



## 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	2024	2024	2025	2025
Personnel	\$0	\$6,154,602	\$0	\$6,272,016
Contractual Services	\$0	\$41,400	\$0	\$1,617,755
Materials & Supplies	\$0	\$38,668	\$0	\$90,600
Internal Services	\$0	\$238,601	\$0	\$269,163
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$6,473,271</b>	<b>\$0</b>	<b>\$8,249,534</b>
<b>Program Total:</b>	<b>\$6,473,271</b>		<b>\$8,249,534</b>	
<b>Program FTE</b>	0.00	41.50	0.00	30.00

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

## Explanation of Revenues

This program generates \$248,009 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 (98%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (2%).

## Significant Program Changes

**Last Year this program was:** FY 2024: 80022 Public Services Division Management

The FY 2025 budget includes funding for 7.0 limited duration Library Supervisor positions, which will be established at library locations with the highest level security incidents. Adding capacity will support implementation of the opt-in PIC agreement with Local 88, and an opportunity to evaluate this model prior to committing to this approach.

A number of long-term vacant Library Safety Liaison positions have been eliminated in the Security program. This technical change does not have an operational impact, as resources for these vacant positions are already being utilized to fund contracted security coverage.



## 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	2024	2024	2025	2025
Personnel	\$0	\$2,032,093	\$0	\$2,126,408
Contractual Services	\$0	\$13,000	\$0	\$13,000
Materials & Supplies	\$0	\$294,070	\$0	\$281,950
Internal Services	\$0	\$73,239	\$0	\$95,447
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,412,402</b>	<b>\$0</b>	<b>\$2,516,805</b>
<b>Program Total:</b>	<b>\$2,412,402</b>		<b>\$2,516,805</b>	
<b>Program FTE</b>	0.00	12.00	0.00	12.00

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

## Explanation of Revenues

This program generates \$87,395 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 (98%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (2%).

## Significant Program Changes

**Last Year this program was:** FY 2024: 80023 Community Engagement

Community Engagement now oversees services to homebound and elder community members, which was formerly in the now sunsetted Mobile and Partner Libraries program offer (80009). This includes mailing of materials to homebound patrons and also physical service delivery in elder housing and community spaces.



## 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	2024	2024	2025	2025
Personnel	\$0	\$1,460,878	\$0	\$1,814,689
Contractual Services	\$0	\$365,475	\$0	\$339,475
Materials & Supplies	\$0	\$270,621	\$0	\$279,499
Internal Services	\$0	\$62,064	\$0	\$89,050
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$2,159,038</b>	<b>\$0</b>	<b>\$2,522,713</b>
<b>Program Total:</b>	<b>\$2,159,038</b>		<b>\$2,522,713</b>	
<b>Program FTE</b>	0.00	10.00	0.00	11.50

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

## Explanation of Revenues

This program generates \$74,584 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 (98%), other revenues such as interest earnings, grants, and user charges for services provided to library patrons (2%).

## Significant Program Changes

### Last Year this program was:

This was a new program created in FY 2024, made up of workgroups previously found in the Community Information (80007) and Community Learning (80008) program offers. Creative Learning is a newly formed team created to meet community needs through the lens of our refreshed and new spaces. The performance output was previously in Community Learning and the performance outcome is new for this year.





Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$0	\$0	\$180,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$180,000</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$180,000</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

\$180,000 Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30000 Administration and Operations.

Significant Program Changes

Last Year this program was:

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## 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.

# \$289.7 million

## Total Adopted Budget

Includes cash transfers, contingencies, and unappropriated balances.

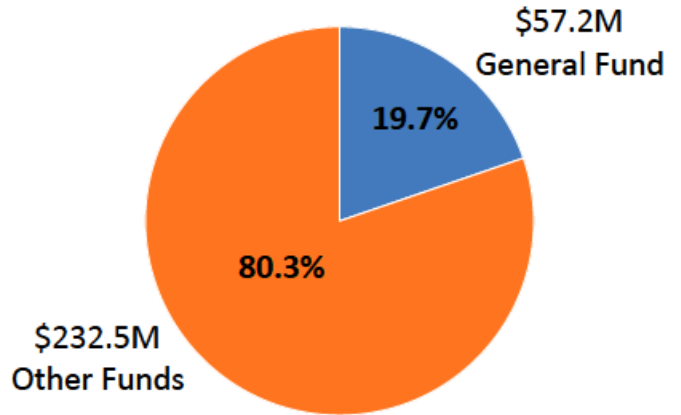
### 146.30 FTE

Total Adopted Staffing



### 17.50 FTE

Increase from  
FY 2024 Adopted



### \$1.7 million

All Funds Decrease from  
FY 2024 Adopted

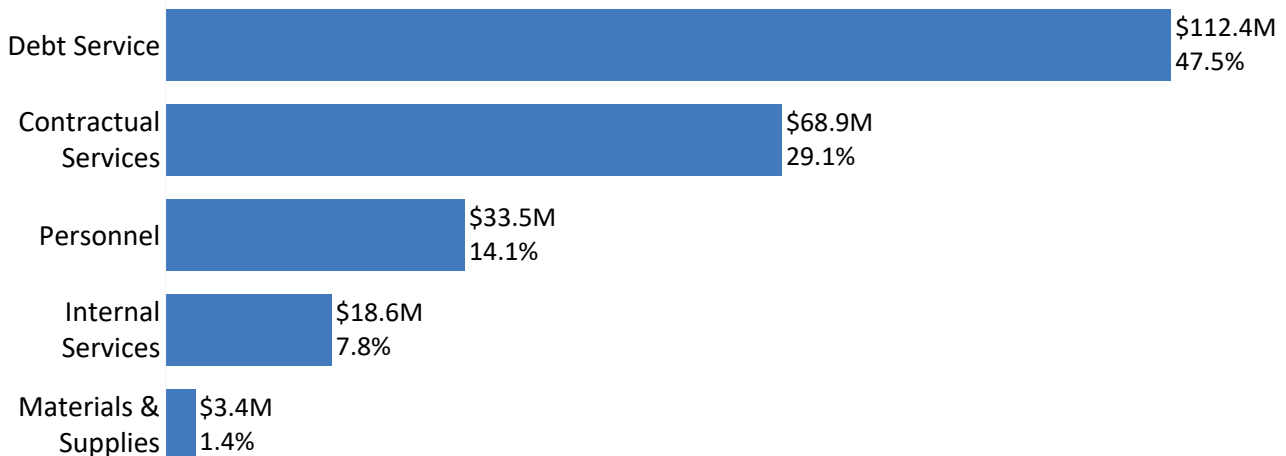
**(0.6%) decrease**



General Fund  
**\$1.9 million**  
New **One-Time-Only** Programs  
**\$2.6 million**  
New **Ongoing** Programs

### Operating Budget by Category - \$236.8 million

Does not include cash transfers, contingencies, and unappropriated balances



The department's total budget is its legal budget, totaling \$289.7 million in FY 2025. The County is required by Oregon Budget Law to report the budget at this level, although doing it this way overstates what we actually plan to spend on programming because it includes unappropriated balances, contingencies, and cash transfers from one fund to another. Program offers reflect the total budget.

This budget document will often focus on the operating budget (a subset of the total budget) because that number avoids some double counting and provides a clearer picture of what the department expects to spend in a year. The operating budget excludes unappropriated balances, contingencies, and cash transfers. The table below shows the amounts that add up to the department's total budget.

<b>FY 2025 Nondepartmental Budget</b>	
<b>Operating Budget</b>	<b>236,751,899</b>
Contingency (All Funds)	0
Internal Cash Transfers	0
Reserves (Unappropriated Balances)	<u>52,906,862</u>
<b>Total Budget</b>	<b>\$289,658,761</b>

## Diversity, Equity, and Inclusion

As we move beyond our response to the global pandemic, the County's commitment to protect the health and safety of the community through equity-focused approaches is ongoing. Multnomah County has demonstrated a strong commitment to improving the well-being of its residents, including the prioritization of our Black, Indigenous and residents of color through various initiatives. Multnomah County is taking steps to address both public health concerns and the ongoing housing crisis.

The County's renewed focus on workforce equity aims to foster a more inclusive and fair work environment. After eight months of work sessions, engagement and refinement, the Office of Diversity and Equity (ODE) received unanimous approval from the Board of Commissioners for the County's 2024-2028 Workforce Equity Strategic Plan. The plan offers a roadmap for renewing and growing the organization's equity efforts over the next four years, which includes the continued use of initiatives from the original strategic plan. The County's embrace of a forward-looking strategy, to continue building a more equitable workplace environment and experience comes at a time when others are disinvesting in this kind of work.

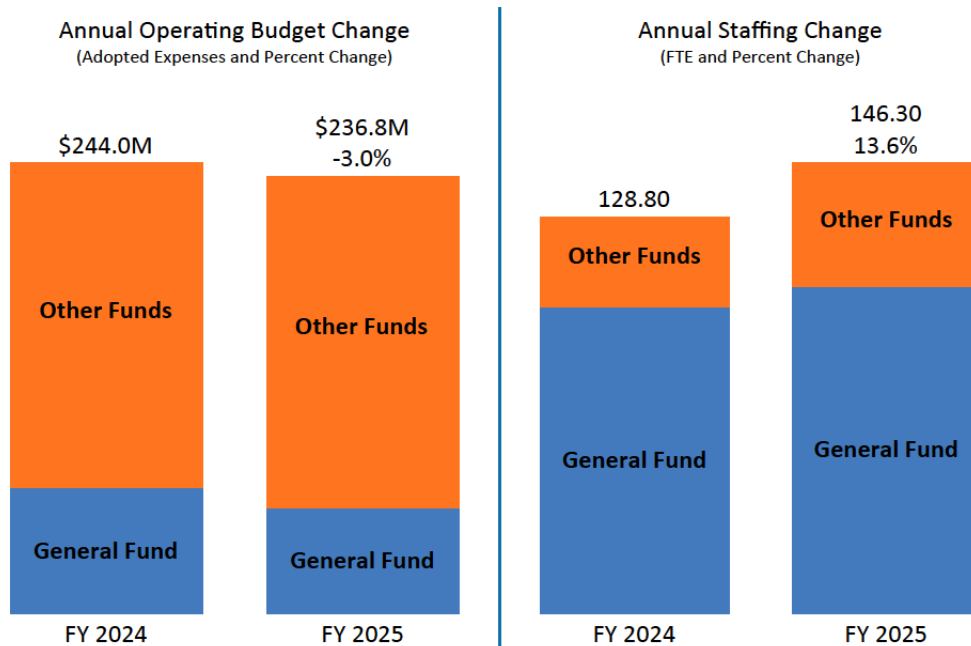
Nondepartmental offices continue to play a significant role in the way equity is built into programs, processes and policies across Multnomah County. This shows up through operationalizing the Equity and Empowerment Lens, the Government Relations team's efforts creating a meaningful and impactful equity journey with a clear focus on internal development and external implementation, and through the Office of Community Involvement's leadership around stakeholder engagement, which is a core component of our budget development and adoption. Amidst responding to and mitigating impacts from climate change the Office of Sustainability and the Office of Emergency Management have worked to reverse climate change and protect public health. This is accomplished by focusing on those most disproportionately affected and those most vulnerable. In addition, the Local Public Safety Coordinating Council is piloting the Justice Fellowship program that aims to empower justice-involved individuals by recognizing and incorporating their lived experiences to envision a more equitable justice system. Participants bring their expertise to spaces and organizations where they've traditionally been unheard, gaining insights into the criminal legal system's intricacies, organization and history, with the ultimate goal to integrate fellows into policy and program discussions.

As Nondepartmental continues to build programs, there is the intersectionality between the Office of Diversity and Equity's Digital Accessibility Program and IT's Public Website and Digital Services. These two initiatives are mutually supportive with individual goals. The Office of Diversity and Equity will ensure that employees have meaningful access to the tools they need to do their work, and residents have barrier-free access to county services. The program is also expected to set overall accessibility objectives and success criteria, assess accessibility measures and provide ongoing communication to employees and the communities we serve. This team will focus on partnerships; capacity building; knowledge testing; and more to understand what will work for the program and what will ensure benefit to all.

Multnomah County's FY 2025 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.

### 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 2025 Adopted operating budget is \$236.8 million, a \$7.2 million decrease from the FY 2024 Adopted budget. The General Fund has decreased by \$11.1 million (16.2%), while Other Funds (including Video Lottery) has increased by \$3.9 million (2.2%).



The decrease in the FY 2025 budget is mostly related to the employee retention payments (10030) budgeted in personnel services. In FY 2024, these payments were budgeted at \$14.3 million in one-time-only funding for all eligible employees, with the exception of Library employees that are covered by Library District funding in Library program offers. The FY 2025 budget includes \$787,000 in one-time-only funding for employee retention payments. This should be the final round of retention incentive payments for bargaining units that have recently closed successor bargaining.

Personnel increases by 17.50 FTE in Nondepartmental. This includes 10.00 FTE added to the Logistics Team within the Office of Emergency Management (10012B/C). Logistics staff support emergency programs which includes maintaining and distributing inventory, organizing meals during activations, supporting the passenger transportation unit and an administration unit responsible for maintaining systems to support staff and partner recruitment during emergencies. These positions were previously budgeted as limited duration assignment (LDA).



The following table shows the new ongoing and one-time-only programs. This table, along with information on the Nondepartmental reductions for FY 2025, can be found in the Overview of Additions, Reductions, and Reallocations section of the Budget Director’s Message in Volume 1. In addition, the Budget Director’s Message contains a list of one-time-only programs for all departments.

### *New Ongoing and One-Time-Only Programs*

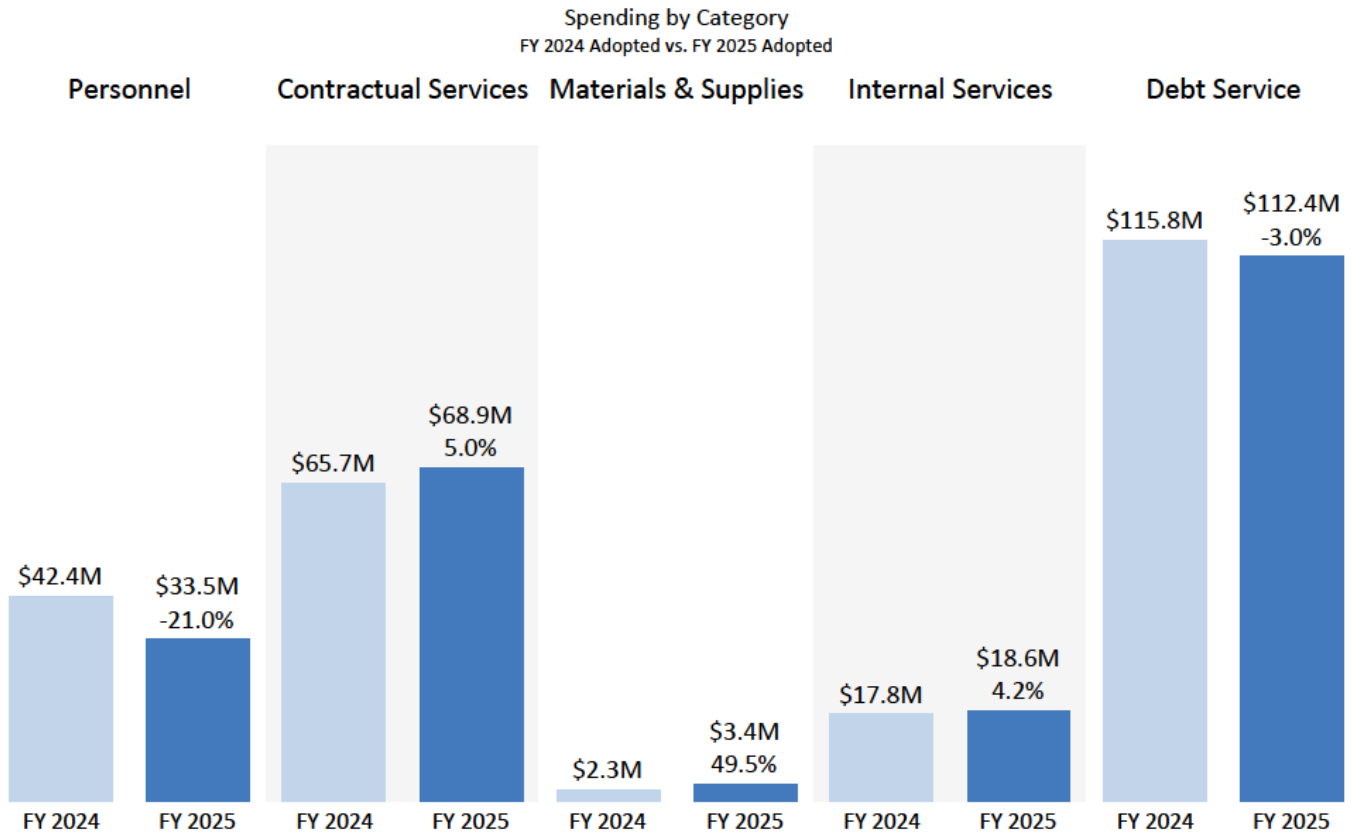
Prog. #	Program Offer Name	General Fund		
		Ongoing	OTO	FTE
<b>Nondepartmental</b>				
10000C	HB 4002 Implementation	2,000,000		
10007B	Public Records Software		300,000	
10007C	Public Records Communications Position	185,000		1.00
10009C	Transforming Justice - Cully Reimagining Justice Project		150,000	
10010B	OCI - Policy & Training Coordinator		132,500	
10010C	Community Budget Advisory Committee (CBAC) Stipends		42,000	
10010D	Civic Engagement Leadership Training		130,000	
10011B	Improved Access and Transparency for Board Materials and Procedures		100,000	
10017C	ADA Digital Accessibility	366,000		2.00
10018B	Food Access Focus		200,000	
10018C	Ross Island Lagoon Mixing Channel Project		150,000	
10021	State Mandated Expenses- Flood Safety Benefit Fee		48,000	
10030	Employee Retention Incentive Payments - Year 3		287,000	
10031	Elected Official Office Transition		100,000	
10032*	Community Vitality and Economic Opportunity Grant Pilot Program		250,000	
10033*	Economic Development for Spectator Activities and Events	<u>50,000</u>		
<b>Nondepartmental Total</b>		<b>\$2,601,000</b>	<b>\$1,889,500</b>	<b>3.00</b>

\*Funded by Video Lottery Fund

# Nondepartmental

## FY 2025 Adopted Budget

The chart below provides a breakdown of the budget's expense categories from FY 2024 to FY 2025. Debt Service is the largest component of the Nondepartmental budget which includes the Capital Debt Retirement Fund at \$23.9 million (10026), Library GO Bond at \$55.4 million (10027), and PERS Pension Bond Sinking Fund at \$33.1 million (10028). Materials & Supplies (M&S) grew the most between FY 2024 and FY 2025 primarily due to the new Countywide Severe Weather Shelter program budgeted at \$1.0 million (10012D). This new program is supported with one-time-only Supportive Housing Services funding. The chart is followed by the Operating Budget Trends table, which details the changes.



Operating Budget Trends		FY 2023	FY 2024	FY 2024	FY 2025	
	<u>Actual</u>	<u>Estimate</u>	<u>Budget</u>	<u>Budget</u>	<u>Difference</u>	
Staffing FTE	126.72	128.80	128.80	146.30	17.50	
Personnel Services	40,602,869	42,029,964	42,365,858	33,485,842	(8,880,016)	
Contractual Services	91,508,969	65,149,759	65,657,181	68,915,255	3,258,074	
Materials & Supplies	1,320,020	2,231,985	2,268,171	3,390,610	1,122,439	
Internal Services	17,265,669	17,476,876	17,833,547	18,580,713	747,166	
Capital Outlay	11,700	0	0	0	0	
Debt Service	<u>111,112,962</u>	<u>113,520,304</u>	<u>115,837,045</u>	<u>112,379,479</u>	<u>(3,457,566)</u>	
<b>Total Costs</b>	<b>\$261,822,189</b>	<b>\$240,408,888</b>	<b>\$243,961,802</b>	<b>\$236,751,899</b>	<b>(\$7,209,903)</b>	

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

### Table of All Program Offers

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

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
10000A	Chair's Office		3,114,805	0	3,114,805	13.00
10000B	Homelessness Response System - Supportive Housing Services		0	728,358	728,358	3.00
10000C	HB 4002 Implementation		2,000,000	0	2,000,000	0.00
10001	BCC District 1		893,194	0	893,194	4.00
10002	BCC District 2		893,194	0	893,194	4.00
10003	BCC District 3		893,194	0	893,194	4.00
10004	BCC District 4		893,194	0	893,194	4.00
10005	Auditor's Office		3,229,025	0	3,229,025	14.00
10006	Tax Supervising and Conservation Commission		518,781	0	518,781	2.00
10007A	Communications Office		2,844,772	0	2,844,772	14.00
10007B	Public Records Software	X	300,000	0	300,000	0.00
10007C	Public Records Communications Position		185,000	0	185,000	1.00
10008	County Attorney's Office		0	8,293,670	8,293,670	25.00
10009A	Local Public Safety Coordinating Council		1,062,575	1,550,492	2,613,067	3.00
10009B	HB3194 Justice Reinvestment		0	610,626	610,626	0.80
10009C	Transforming Justice - Cully Reimagining Justice Project	X	150,000	668,848	818,848	0.00
10010A	Office of Community Involvement		409,650	0	409,650	2.00
10010B	OCI - Policy & Training Coordinator	X	132,500	0	132,500	0.00
10010C	Community Budget Advisory Committee (CBAC) Stipends	X	42,000	0	42,000	0.00
10010D	Civic Engagement Leadership Training	X	130,000	0	130,000	0.00
10011	Office of the Board Clerk		1,023,283	30,000	1,053,283	2.00
10011B	Improved Access and Transparency for Board Materials and Procedures	X	100,000	0	100,000	0.00
10012A	Office of Emergency Management		2,533,175	1,066,613	3,599,788	10.00
10012B	Logistics		387,824	0	387,824	2.00
10012C	Logistics - Supportive Housing Services		0	1,599,956	1,599,956	8.00
10012D	Countywide Severe Weather Shelter - Supportive Housing Services	X	0	2,332,880	2,332,880	0.00

# Nondepartmental

## FY 2025 Adopted Budget

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
10016	Government Relations Office		1,597,595	0	1,597,595	6.00
10017A	Office of Diversity and Equity		2,250,097	0	2,250,097	9.00
10017B	Multnomah Youth Commission Support		270,054	10,000	280,054	1.50
10017C	ADA Digital Accessibility		366,000	0	366,000	2.00
10018A	Office of Sustainability		1,123,924	400,000	1,523,924	6.00
10018B	Food Access Focus	X	200,000	0	200,000	0.00
10018C	Ross Island Lagoon Mixing Channel Project	X	150,000	0	150,000	0.00
10020	Regional Arts & Culture Council		300,000	0	300,000	0.00
10021	State Mandated Expenses		13,677,042	1,744,212	15,421,254	0.00
10022	Pass-Through Payments to East County Cities		13,744,500	0	13,744,500	0.00
10023	OHS Local Option Levy		0	4,004,337	4,004,337	0.00
10024	County School Fund		0	70,025	70,025	0.00
10025	Convention Center Fund		0	42,811,008	42,811,008	0.00
10026	Capital Debt Retirement Fund		0	24,673,729	24,673,729	0.00
10027	Library GO Bond		0	57,378,147	57,378,147	0.00
10028	PERS Pension Bond Sinking Fund		0	83,689,165	83,689,165	0.00
10030	Employee Retention Incentive Payments - Year 3	X	287,000	500,000	787,000	0.00
10031	Elected Official Office Transition	X	100,000	0	100,000	0.00
10032	Community Vitality and Economic Opportunity Grant Pilot Program	X	0	250,000	250,000	0.00
10033	Economic Development for Spectator Activities and Events		0	50,000	50,000	0.00
10040	Complaints Investigation Unit		<u>1,394,317</u>	<u>0</u>	<u>1,394,317</u>	<u>6.00</u>
	<b>Total Nondepartmental<sup>1</sup></b>		<b>\$57,196,695</b>	<b>\$232,462,066</b>	<b>\$289,658,761</b>	<b>146.30</b>

<sup>1</sup> 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	One-Time-Only	General Fund	Other Funds	Total Cost	FTE
95000	Fund Level Transactions		\$109,970,130	\$111,626,328	\$221,596,458	0.00
	<i>This beginning fund balance is not shown in the Nondepartmental detail budget.</i>					
95001	General Fund Revenues		\$780,453,275	\$0	\$780,453,275	0.00
	<i>This program offer contains the budget for General Fund revenues. Expenses are budgeted in departments.</i>					

**Department:** Nondepartmental      **Program Contact:** Jessica Vega Pederson  
**Program Offer Type:** Operating      **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 policy 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 \$4.0 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 plays a critical role providing a wide range of safety net services, which strive to reduce the systemic inequities that disproportionately harm Black, Indigenous and other communities of color. Many of the Chair's priorities, including preventing and ending homelessness, deepening family safety and stability, providing accessible, whole-person 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. A key priority for FY2025 also includes the stabilization of core services in the midst of an anticipated structural budget deficit due to deficient revenue forecasts, increased inflation and personnel costs, and expiring one-time federal American Rescue Plan (ARP) dollars.

During FY 2025, Chair Vega Pederson will maintain or increase focus on the following priorities:

- Addressing substance use and increasing access to recovery and mental health services.
- Collaboration with local and statewide housing partners to align and coordinate resources and workflows.
- Continued development and expansion of shelter and affordable housing capacity in the County, maximizing revenues from the Metro Supportive Housing Services (SHS) Measure.
- Sustained investment in child, youth and family supports, particularly through the Preschool for All (PFA) program.
- Championing the Mission, Vision and Values (MVV) Renewal project and continued implementation of Workforce Equity Strategic Plan (WESP) strategies that move the County towards greater safety, trust & belonging in the workplace for all employees.
- Maintain focus on supporting the progress of the Multnomah County Library Capital Bond.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Ensure broad community input through surveys, meetings, and events.	N/A	20	20	30
Output	Meet with State/Fed officials and other stakeholders on issues critical to the region.	N/A	12	12	16
Output	Proactively communicate with residents through a regular community newsletter.	N/A	12	12	12

**Performance Measures Descriptions**

Chair Vega Pederson regularly seeks community input and feedback to make budget and policy decisions that best serve the public's interests and community values. The Chair also 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 to address shared community 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	2024	2024	2025	2025
Personnel	\$2,414,484	\$0	\$2,704,304	\$0
Contractual Services	\$33,840	\$0	\$33,840	\$0
Materials & Supplies	\$110,782	\$0	\$109,927	\$0
Internal Services	\$216,811	\$0	\$266,734	\$0
<b>Total GF/non-GF</b>	<b>\$2,775,917</b>	<b>\$0</b>	<b>\$3,114,805</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,775,917</b>		<b>\$3,114,805</b>	
<b>Program FTE</b>	12.00	0.00	12.50	0.50

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 2024: 10000 Chair's Office

This program combines 10000B Deputy Chief of Staff from FY 2024.

Adjusting due to work being done by LPSCC and movement of the Youth Opportunity and Workforce Development Program; this role is now the Budget and Strategic Projects Director.

In FY 2025 this program is increased by 1.00 FTE Senior Policy Advisor. 0.50 FTE is in Other Funds because it is funded by Preschool for All funding in the Department of County Human Services (DCHS). The associated costs for the 0.50 FTE are in DCHS program 25200A.

**Department:** Nondepartmental      **Program Contact:** Ryan Deibert  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** New Request

### Executive Summary

The Homelessness Response System (HRS) mobilizes various jurisdictions, departments, stakeholders and service providers around shared goals and objectives to reduce homelessness in Multnomah County. Reducing homelessness requires multi-pronged and multi-jurisdictional efforts, and HRS facilitates that work through the implementation of the Homelessness Response Action Plan, which identifies clear goals to achieve, policies to align and workgroups to resolve cross-jurisdictional issues, along with timelines, lead partners for action, and cost estimates to account for budgetary needs. HRS also convenes three new committees that further that work.

### Program Description

HRS is responsible for implementation of the Homelessness Response Action Plan, an ambitious, iterative, cross-jurisdictional approach to comprehensively align systems and services to reduce homelessness. The plan consists of five primary responsibilities:

1. Coordinating the establishment of numeric goals and policy objectives, and tracking the progress towards those objectives;
2. Organizing the cross-jurisdictional workgroups necessary to breakdown silos and improve outcomes across the homeless services continuum;
3. Facilitating and organizing one committee and two subcommittees within the Homelessness Response Plan:
  - Steering and Oversight Committee - which sets goals and strategies, and aligns budgets and programs accordingly;
  - Implementation Sub-Committee - which is responsible for the operationalization of the strategies identified to meet the established goals; and
  - Community Advisory Sub-Committee - which identifies emerging community needs and opportunities, provides input on strategies and tactics, and reviews goals and progress towards achieving them.
4. Identifying the budgetary needs between jurisdictions necessary to achieve the established goals and objectives; and
5. Improving transparency and accountability through coordinated communication, accurate dashboards and data, and a single website for updates and information.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Convenings of Steering and Oversight Committee	N/A	N/A	N/A	6
Output	Creation of dashboard to track primary numeric goals and policy objectives	N/A	N/A	N/A	1
Output	Coordinates the annual program and spending plans	N/A	N/A	N/A	1

### Performance Measures Descriptions

This new office will bring together the Steering and Oversight Committee for bi-monthly meetings; it will complete the publicly facing dashboard to track goals and objectives; and it will assist the city and county in identifying the budgetary needs necessary to meet the objectives of Homelessness Response Action Plan.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$0	\$0	\$689,970
Materials & Supplies	\$0	\$0	\$0	\$10,030
Internal Services	\$0	\$0	\$0	\$28,358
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$728,358</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$728,358</b>	
<b>Program FTE</b>	0.00	0.00	0.00	3.00

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

Explanation of Revenues

This program generates \$28,358 in indirect revenues.

\$728,358 Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

Significant Program Changes

Last Year this program was:

This program adds 3.00 FTE Staff Assistants as follows:  
 1.00 FTE Homelessness Response System Director  
 2.00 FTE Policy Advisor

**Department:** Nondepartmental      **Program Contact:** Jenny Smith  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** New Request

**Executive Summary**

The State of Oregon passed House Bill 4002, which creates drastic changes to Measure 110 that will affect many systems within the county and jurisdictional partners. This investment will support the county’s work to quickly implement a deflection system, collaborate with inter-governmental partners on shared policy goals, phased plan, and understanding of success. Multnomah County will clearly articulate the phasing of its response to this new law and its associated requirements through partnership with justice and law enforcement partners, other jurisdictional partners, and internal county departments. These funds will also support initial tracking and assessment of the impacts of this new law on the community, with particular regard to racial disparities and disparate impacts for historically marginalized groups.

**Program Description**

Multnomah County, like many regions across the United States, grapples with a severe drug crisis. The county faces escalating challenges stemming from substance abuse, particularly opioids and methamphetamines. Despite concerted efforts in harm reduction, treatment, and prevention, the crisis persists, compounded by socioeconomic disparities and mental health issues. Multnomah County's collaboration involves a multifaceted approach, combining law enforcement initiatives, community outreach, and support services. However, the road to recovery remains arduous and demands sustained collaboration and innovative strategies to combat this pervasive crisis.

With the passage of HB 4002, we have an opportunity to align systems better and ensure that individuals have the option to participate in treatment and access support services. We need a justice system that is incentivized to offer services, support, and treatment as viable routes for individuals. We also need a treatment system that can accommodate individuals in crisis, both for deflection from the criminal justice system and to offer access to support, provision of immediate needs,

The state has provided funds to Multnomah County for this work, including funds for the Department of Community Justice, a deflection and sobering center, operating and transportation costs, etc.

These dedicated funds from the county will be focused on quickly implementing the county response to the requirements of House Bill 4002. This could include staff support, funds for facilitation of stakeholder groups, partners, and inter-governmental convenings, additional opening and/or operations costs for the county’s deflection program, community education about the impacts of HB 4002 and the new avenues it creates, training, data and reporting, etc.

This program offer includes two (2) Limited Duration FTE.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Phase 1 Deflection Program in operation September 1	N/A	N/A	N/A	1
Output	Report on first six months of operation and best practices by end of fiscal year	N/A	N/A	N/A	1
Outcome	Report identifying populations disparately affected by HB 4002 by end of fiscal year	N/A	N/A	N/A	1
Output	Monthly convening to lead policy, implementation, & tracking	N/A	N/A	N/A	12

**Performance Measures Descriptions**

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$0	\$398,100	\$0
Contractual Services	\$0	\$0	\$1,601,900	\$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>	
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:** Sharon Meieran  
**Program Offer Type:** Operating      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Respond to constituent emails, phone calls and meeting requests timely and resolve constituent concerns.	94%	100%	98%	100%
Outcome	Provide testimony and meet directly with state and federal legislators for priority issues.	35	30 events	40	30 events
Output	Conduct or partner on twice quarterly outreach events.	30	20 events	35	20 events
Output	Proactively connect with District 1 constituents, with an emphasis on marginalized communities.	90	80 events	85	80 events

### Performance Measures Descriptions

In FY25 a new District 1 Commissioner will take office and may choose to track different performance measures than those listed: 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	2024	2024	2025	2025
Personnel	\$665,283	\$0	\$713,084	\$0
Contractual Services	\$0	\$0	\$24,597	\$0
Materials & Supplies	\$65,188	\$0	\$68,102	\$0
Internal Services	\$75,829	\$0	\$87,411	\$0
<b>Total GF/non-GF</b>	<b>\$806,300</b>	<b>\$0</b>	<b>\$893,194</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$806,300</b>		<b>\$893,194</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 2024: 10001 BCC District 1

**Department:** Nondepartmental      **Program Contact:** Jesse Beason  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Commissioner Jesse Beason 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 the budget support the work of County Departments. He serves District 2, which includes North, Northeast, and parts of East Portland. Commissioner Beason is committed to ensuring racial equity, promoting effective evidence-driven programs and services, and engaging in community-driven policy. To learn more about Commissioner Beason's office visit the website at <https://www.multco.us/commissioner-beason>.

**Program Description**

Commissioner Beason was appointed to fill the District 2 seat on November 1, 2023, where he will serve until his successor is elected in May or November of 2024.

The county continues to grapple with the changing landscape after managing multiple public health crises over the last 4 years, and the FY 2025 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 Beason prioritizes efforts to address the economic and racial inequities that created the need for a robust safety net in Multnomah County, and focuses on economic justice; clean air and climate resilience; public safety; and transportation. Specific efforts include diversion of low-level offenses from the criminal justice system;

During the FY25 budget process, he 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 Beason 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. He also serves on the Walnut Park Redevelopment Project, and is a board member for the Expo Future Executive Advisory Committee.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Community engagement and constituent outreach via meetings and events.	20	20	20	10
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**

In FY25 a new District 2 Commissioner will take office and may choose to track different performance measures than those listed: 1) Measured by the number of constituent coffees, neighborhood meetings and community events hosted, attended or led by the Commissioner 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	2024	2024	2025	2025
Personnel	\$675,203	\$0	\$731,502	\$0
Contractual Services	\$15,000	\$0	\$15,560	\$0
Materials & Supplies	\$42,055	\$0	\$60,986	\$0
Internal Services	\$74,042	\$0	\$85,146	\$0
<b>Total GF/non-GF</b>	<b>\$806,300</b>	<b>\$0</b>	<b>\$893,194</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$806,300</b>		<b>\$893,194</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 2024: 10002 BCC District 2

**Department:** Nondepartmental **Program Contact:** Julia Brim-Edwards

**Program Offer Type:** Operating **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.

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 also advances and champions specific District 3 initiatives and monitors, advises or takes action – as appropriate – on County projects within District 3.

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 that aim to serve and address the most vulnerable neighborhoods that struggle with livability, public safety, and affordability. 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; the Mt. Hood Cable Regulatory Commission; and both the Oregon Association of Counties and the National Association of Counties. Commissioner Brim-Edwards serves as one of the County's representatives on the joint City and County Shelter Plan committee within the Joint Office of Homeless Services.

In FY 2025 Commissioner Brim-Edwards will champion reopening a Sobering Center in Multnomah County, full implementation of the JOHS Shelter Plan, support the City in their implementation of the Temporary Alternative Shelter Sites, work to ensure all JOHS projects are accompanied by a meaningful Good Neighbor Agreements, ensure no reduction in jail beds for the community, and support neighborhood based community groups investing in District 3.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Monitor and ensure any JOHS project in D3 is accompanied by a Good Neighbor Agreement	N/A	N/A	N/A	100%
Outcome	Multnomah County minimizes negative impacts on neighborhoods and gains local support for shelters	N/A	N/A	N/A	100%
Output	Advocate for adoption & implementation of the joint Shelter Plan between the City and County	N/A	N/A	N/A	Adopt/Implement
Outcome	Multnomah County has a Shelter Plan from which the JOHS can execute	N/A	N/A	N/A	Plan Goals Met

**Performance Measures Descriptions**

New measures for FY 2025. 1) The County has not engaged in meaningful Good Neighbor Agreements that result in positive relationships between neighborhoods and homeless services, D3 will work to ensure JOHS engages with tangible agreements. 2) Gaining support is key to opening enough to meet the need. 3) City/County have never adopted a Shelter Plan to meet the unsheltered need.



## 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	2024	2024	2025	2025
Personnel	\$668,701	\$0	\$744,861	\$0
Contractual Services	\$0	\$0	\$1,500	\$0
Materials & Supplies	\$63,314	\$0	\$61,569	\$0
Internal Services	\$74,285	\$0	\$85,264	\$0
<b>Total GF/non-GF</b>	<b>\$806,300</b>	<b>\$0</b>	<b>\$893,194</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$806,300</b>		<b>\$893,194</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 2024: 10003 BCC District 3

**Department:** Nondepartmental      **Program Contact:** Lori Stegmann  
**Program Offer Type:** Operating      **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 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 Safety and Water Quality District.

She continues her leadership on the National Association of Counties cohorts for Resilient Communities, and Racial Equity 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of residents involved in discussion of East County issues and policy areas	2,000	2,500	2,500	1,000
Outcome	Increase in awareness of East County issues	75%	75%	75%	75%
Output	Number of meetings and events convened	15	10	20	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 through meeting attendees. 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 meetings and 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	2024	2024	2025	2025
Personnel	\$704,601	\$0	\$764,840	\$0
Materials & Supplies	\$28,452	\$0	\$44,642	\$0
Internal Services	\$73,247	\$0	\$83,712	\$0
<b>Total GF/non-GF</b>	<b>\$806,300</b>	<b>\$0</b>	<b>\$893,194</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$806,300</b>		<b>\$893,194</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 2024: 10004 BCC District 4

**Department:** Nondepartmental      **Program Contact:** Jennifer McGuirk  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Auditor is elected by voters countywide. The Auditor's Office's mission is to promote accountable and equitable county government. We independently examine county programs; receive and investigate reports of suspected fraud, waste, and abuse of position; and serve as an impartial resource to help people resolve issues with county programs. The Auditor's Office serves the public interest by finding out how well the county government is working, recommending improvements, and reporting to the public on our work. We adhere to high ethical standards; use an equity lens and a trauma-informed approach continually in our work; and value accountability, inclusion, and equity, particularly racial equity.

**Program Description**

The County Charter directs the Auditor to conduct performance audits of all county operations and financial affairs, as well as studies to measure or improve the performance of county efforts. The Auditor prioritizes auditing programs that directly impact people's health and safety. Audits involve hundreds of hours of work, including research, interviews, onsite observations, and data analysis. Based on sufficient, appropriate evidence, we develop recommendations for improving government. Through audits and follow-up efforts, auditors provide systems-level accountability to the public.

In 2022, the Charter established the County Ombudsperson in the Auditor's Office. The ombudsperson quickly became a resource for people having trouble resolving problems with county programs on issues ranging from vehicle tows to rent assistance to paroles. The ombudsperson impartially investigates complaints and makes related reports to support high standards of fairness, competency, efficiency, and justice in the provision of county services.

County Code entrusts to the Auditor the operation of the Good Government Hotline, which the Auditor created in 2007 for employees and the public to confidentially report potential fraud, waste, or abuse of position in County government. Since 2014, reports investigated by hotline staff have led to the identification of more than \$1 million in county funds that had been used fraudulently or inefficiently. The hotline is a critical function for ensuring that County government resources are used efficiently and ethically.

Also 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.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Minimum number of reports (audits, follow-ups, ombudsperson, hotline, annual).	4	6	5	6
Outcome	For reports with recommendations, percent with at least one focused on supporting racial equity.	100%	100%	100%	100%
Outcome	Complaints to hotline and ombudsperson responded to within 2 business days.	N/A	100%	100%	100%
Outcome	Recommendations in progress or implemented at time of evaluation in the FY.	93%	90%	75%	80%

**Performance Measures Descriptions**

The first measure includes reports on audits and recommendations, special studies, and reports on the hotline, ombudsperson function, and Auditor's Office. The outcomes measures ensure the office responds promptly to complaints to the hotline and ombudsperson, and support accountability on recommendations.

## Legal / Contractual Obligation

The Auditor's responsibilities and powers are articulated in County Charter §3.15, §4.30, and §8.10, and County Code §25.910-25.940 and §3.501-3.505.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$2,523,874	\$0	\$2,683,294	\$0
Contractual Services	\$192,560	\$0	\$199,690	\$0
Materials & Supplies	\$109,122	\$0	\$114,042	\$0
Internal Services	\$220,724	\$0	\$231,999	\$0
<b>Total GF/non-GF</b>	<b>\$3,046,280</b>	<b>\$0</b>	<b>\$3,229,025</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$3,046,280</b>		<b>\$3,229,025</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 2024: 10005A Auditor's Office

This program combines 10005B Ombudsperson – Charter Review from FY 2024.

**Department:** Nondepartmental      **Program Contact:** Allegra Willhite  
**Program Offer Type:** Operating      **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 Oregon Legislature in 1919, the TSCC focuses on four primary duties: advocating for the public interest by holding public hearings, training and supporting local government staff on issues related to local and State budget law, informing the public about issues related to local government budgets through publications, and conducting annual reviews and certifications of budgets for member districts (local governments that are members of TSCC). The Commission considers all community members to be its customers and seeks to make the financial affairs of local governments transparent and accountable.

**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 who 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 local government member budgets and tax measures to engage with elected officials and advocate for the public interest 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 through simplified language, improved graphics, and more relevant content. TSCC continues to solicit feedback on the report each year.

**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 the 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 advice and consultation 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. By law, the TSCC budget increases are set to 4% annually.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of public hearings on local government budgets and property tax ballot measures.	18	14	19	15
Output	Number of budgets certified by Commission	33	33	33	33
Output	Number of responses to inquiries from local government staff on budget law and other issues	88	50	75	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	2024	2024	2025	2025
Personnel	\$446,458	\$0	\$464,636	\$0
Contractual Services	\$6,560	\$0	\$6,810	\$0
Materials & Supplies	\$44,296	\$0	\$45,644	\$0
Internal Services	\$1,514	\$0	\$1,691	\$0
<b>Total GF/non-GF</b>	<b>\$498,828</b>	<b>\$0</b>	<b>\$518,781</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$498,828</b>		<b>\$518,781</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: \$173,738  
 Revenue from the County Assessment Function Funding Assistance (CAFFA) grant: \$61,330

## Significant Program Changes

Last Year this program was: FY 2024: 10006 Tax Supervising and Conservation Commission

**Department:** Nondepartmental      **Program Contact:** Julie Sullivan-Springhetti  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

### Executive Summary

The Communications Office houses the professional staff who create and distribute public information for the County. The Office includes the County’s public information officers, writers, videographers, photographer and graphic designer. The Office informs the community 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.

### Program Description

The Communications Office produces the news of record for Multnomah County in the most accurate, accessible and equitable way we can. We report and write web articles on the work of the Chair and Board, on County services and policy initiatives. We photograph employees and events, produce news and feature videos, and create graphics and social media that inform the public. We seek to work with culturally specific sources, media and community liaisons to reach residents who speak languages other than English. We publish our materials on more than 20 webpages, and across all the County-wide social media accounts. We conduct all media training and media relations. We receive and fill all public records requests. We lead crisis communications, delivering lifesaving information 365 days a year. We plan events and produce public education campaigns. We connect County employees to one another through an employee newsletter, the Wednesday Wire. We support County leaders’ direct communication with staff.

Goals for 2025 include:

- Expanding written, visual and graphic storytelling to increase public understanding of, and access to, County services.
- Developing a community of practice with Emergency Management and departments to better reach immigrant, refugee and other residents who speak languages other than English during a crisis.
- Increasing media training and communication onboarding of County leaders and staff.
- Leading collaborations with program specialists in health, homeless and housing services and public safety to develop more “one-County” materials and messages.
- Developing new infrastructure to respond to public records requests.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of news stories generated by the office in all media -- TV, print, radio, County website and blogs	2,325	2,050	2,500	2,550
Outcome	Number of multi-media videos/projects produced by the office that reach diverse audiences.	143	140	90	95
Outcome	Number of Twitter users for the County that signal public engagement, particularly during a crisis.	47,137	49,500	49,600	49,700
Outcome	Number of Facebook followers for the County that signal public engagement.	17,000	17,500	18,000	18,100

### 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	2024	2024	2025	2025
Personnel	\$2,426,424	\$0	\$2,559,622	\$0
Contractual Services	\$12,980	\$0	\$12,980	\$0
Materials & Supplies	\$88,808	\$0	\$88,806	\$0
Internal Services	\$181,278	\$0	\$183,364	\$0
<b>Total GF/non-GF</b>	<b>\$2,709,490</b>	<b>\$0</b>	<b>\$2,844,772</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,709,490</b>		<b>\$2,844,772</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 2024: 10007A Communications Office

**Department:** Nondepartmental      **Program Contact:** Julie Sullivan-Springhetti  
**Program Offer Type:** Capital      **Program Offer Stage:** Adopted

**Related Programs:**

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

**Executive Summary**

The Multnomah County Communications Office works on behalf of all County departments to receive, process and release public records in accordance with Oregon Public Records Law.

**Program Description**

This software procurement began in FY 2023 with program #10007B. The County is still working with a prospective vendor on a functional implementation of the tool, which has made this program offer necessary. The tool automates the County's process for receiving, scheduling, assigning, coordinating the custodians of the records and permitting redactions during legal review.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
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	100%	100%	100%

**Performance Measures Descriptions**

## 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	2024	2024	2025	2025
Materials & Supplies	\$0	\$0	\$300,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$300,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</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 2024: 10007B Public Records Software

In FY 2024, this program was funded with one-time-only General Fund. It is anticipated that the software won't be purchased in FY 2024 so this program requests one-time-only funding in FY 2025.

**Department:** Nondepartmental

**Program Contact:** Julie Sullivan-Springhetti

**Program Offer Type:** Operating

**Program Offer Stage:** Adopted

**Related Programs:**
**Program Characteristics:** New Request

**Executive Summary**

Establishes a public records manager position to oversee the development of a new county-wide automated public records system and the day-to-day operations of processing public records.

**Program Description**

This position, Management Analyst, will help plan, organize and manage the new system. This position will oversee the day-to-day operations of processing public records and coordinate with dedicated records custodians in County departments, as well as work with County attorneys and paralegals. It will coordinate the workflows, redactions and release of records.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of public records processed in accordance with Oregon Public Records law.	N/A	N/A	N/A	70
Outcome	Reduction in violations of public records law's timed requirements.	N/A	N/A	N/A	100%

**Performance Measures Descriptions**

## Legal / Contractual Obligation

Oregon Public Records law requires Multnomah County to acknowledge, gather, review and release public records within 15 days of a request.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$0	\$178,608	\$0
Materials & Supplies	\$0	\$0	\$4,392	\$0
Internal Services	\$0	\$0	\$2,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$185,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$185,000</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 Management Analyst (9710).

**Department:** Nondepartmental

**Program Contact:** Jenny Madkour

**Program Offer Type:** Operating

**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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	County Attorney Direct Service Hours	25,000	25,000	25,349	25,000
Outcome	Percentage of County Attorney Time Dedicated to Direct Client Services	95%	95%	96%	95%
Input	Number of Tort Claims Received	200	210	177	190

**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	2024	2024	2025	2025
Personnel	\$0	\$6,731,389	\$0	\$7,101,241
Contractual Services	\$0	\$312,230	\$0	\$323,790
Materials & Supplies	\$0	\$242,910	\$0	\$251,921
Internal Services	\$0	\$598,591	\$0	\$616,718
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$7,885,120</b>	<b>\$0</b>	<b>\$8,293,670</b>
<b>Program Total:</b>	<b>\$7,885,120</b>		<b>\$8,293,670</b>	
<b>Program FTE</b>	0.00	25.00	0.00	25.00

Program Revenues				
Other / Miscellaneous	\$0	\$7,885,120	\$0	\$8,293,670
<b>Total Revenue</b>	<b>\$0</b>	<b>\$7,885,120</b>	<b>\$0</b>	<b>\$8,293,670</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 2024: 10008 County Attorney's Office

**Department:** Nondepartmental      **Program Contact:** Abbey Stamp  
**Program Offer Type:** Operating      **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 facilitate public safety collaboration. The goal of collaboration is to improve outcomes, cost effectiveness, and responsiveness to community needs. LPSCC staff focus on equity by uplifting the need to inclusively lead with race on each collaborative process they lead. LPSCC staff acknowledge the harm caused by the criminal legal system over the last 400 years, and each project and policy area is evaluated on 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, the Council meets monthly to share information, identify issues and problems affecting public safety, and oversee development of new plans, policies, and strategies. The LPSCC is led by County Chair Jessica Vega Pederson.

LPSCC and its partners collaborate on the development of:  
 -solutions to problems in the intergovernmental operations of the public safety systems;  
 -coordinated policies to improve those systems; and  
 -evidence-based strategies that address issues important to community safety.

The Council's Executive Committee directs the work of several subcommittees and smaller working groups that focus on the most critical issues the justice system faces. Examples include:  
 -Oversight of the Justice Reinvestment Program;  
 -Pretrial system change; and  
 -Oversight of the operation of Decision Support System-Justice (DSS-J), the County's public safety data warehouse.

LPSCC Program Offers describe the funding to support the FTE and resources in the LPSCC office and the projects it supports as well as the Youth Opportunity and Workforce Development (Summerworks) Program. In FY 2025, LPSCC will fund an Executive Director, a Strategic Initiatives Manager (gun violence coordination and Summerworks), and an Executive Assistant. In addition, to support implementation of the MacArthur Foundation's Safety + Justice Challenge (focused on overhauling the pretrial justice system and a Justice Fellowship project), LPSCC also funds two limited duration staff.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Outcome	Percentage of policy discussions that focus on racial and ethnic disparities.	100%	100%	100%	100%
Outcome	% of new initiatives/projects that use an equity focus and inclusively lead with race.	100%	100%	100%	100%
Output	Number of youth served each year by Summerworks programming	1,027	N/A	200	200
Outcome	Percentage/number of policy-level projects that include voices of people with lived experiences.	50%	70%	80%	100%

**Performance Measures Descriptions**

Performance measure 3 is new this year to reflect incorporation of Youth Opportunity programming, which accounts for about \$650,000 of the LPSCC General Fund Budget. In FY 23, more youth were served due to additional State American Rescue Plan funding, which explains the inflated "FY23 Actual" metric.



## 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	2024	2024	2025	2025
Personnel	\$171,836	\$824,976	\$199,504	\$737,613
Contractual Services	\$626,900	\$80,400	\$0	\$712,108
Materials & Supplies	\$8,197	\$130,036	\$3,096	\$32,542
Internal Services	\$877,933	\$45,588	\$859,975	\$68,229
<b>Total GF/non-GF</b>	<b>\$1,684,866</b>	<b>\$1,081,000</b>	<b>\$1,062,575</b>	<b>\$1,550,492</b>
<b>Program Total:</b>	<b>\$2,765,866</b>		<b>\$2,613,067</b>	
<b>Program FTE</b>	1.00	2.00	1.00	2.00

Program Revenues				
Intergovernmental	\$0	\$406,000	\$0	\$462,892
Other / Miscellaneous	\$0	\$675,000	\$0	\$440,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,081,000</b>	<b>\$0</b>	<b>\$902,892</b>

## Explanation of Revenues

This program generates \$30,316 in indirect revenues.

State Department of Corrections through SB 1145 - \$462,892  
 MacArthur Foundation - \$440,000  
 Video Lottery Fund - \$647,600

## Significant Program Changes

**Last Year this program was:** FY 2024: 10009A Local Public Safety Coordinating Council

This program combines 10009D Community Violence Coordination & 10029 Youth Opportunity and Workforce Development from FY 2024.

In FY 2025, the Youth Opportunity and Workforce Development Program contracted services budget is moved from the General Fund to the Video Lottery Fund, in the amount of \$647,600.

**Department:** Nondepartmental      **Program Contact:** Abbey Stamp  
**Program Offer Type:** Operating      **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 facilitate public safety collaboration. The goal of collaboration is to improve outcomes, cost effectiveness, and responsiveness to community needs. LPSCC staff focus on equity by uplifting the need to inclusively lead with race on each collaborative process they lead. 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, the Council meets monthly to share information, identify issues and problems affecting public safety, and oversee development of new plans, policies, and strategies. The LPSCC is led by County Chair Jessica Vega Pederson.

As noted in 10009A, the Council directs the work of several subcommittees. This Program Offer is specific to the Multnomah County Justice Reinvestment Program (prison diversion). 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 that focus on underserved and Black Indigenous and People Of Color communities. This Program Offer details of this funding.

As indicated in the rules developed by the Oregon 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
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	2024	2024	2025	2025
Personnel	\$0	\$170,983	\$0	\$182,895
Contractual Services	\$0	\$247,687	\$0	\$413,058
Materials & Supplies	\$0	\$480	\$0	\$7,156
Internal Services	\$0	\$6,121	\$0	\$7,517
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$425,271</b>	<b>\$0</b>	<b>\$610,626</b>
<b>Program Total:</b>	<b>\$425,271</b>		<b>\$610,626</b>	
<b>Program FTE</b>	0.00	0.80	0.00	0.80

Program Revenues				
Intergovernmental	\$0	\$425,271	\$0	\$610,626
<b>Total Revenue</b>	<b>\$0</b>	<b>\$425,271</b>	<b>\$0</b>	<b>\$610,626</b>

## Explanation of Revenues

This program generates \$7,517 in indirect revenues.

State HB 3194 Criminal Justice Commission (CJC) - \$610,626

This revenue includes formula funding based on a statewide allocation (\$561,980) and competitive funding (\$48,646) from the State for this program.

## Significant Program Changes

Last Year this program was: FY 2024: 10009B HB3194 Justice Reinvestment

**Department:** Nondepartmental      **Program Contact:** Abbey Stamp  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted

**Related Programs:**

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

**Executive Summary**

The central purpose of Multnomah County's Local Public Safety Coordinating Council (LPSCC) is to facilitate public safety collaboration. In 2023, LPSCC supported a winning application to the Bureau of Justice Assistance to reimagine justice in the Cully neighborhood, a partnership between LPSCC, Commissioner Jesse Beason, the Native American Youth and Family Center (NAYA), the City of Portland, and a variety of Cully neighborhood organizations and residents. This Program Offer details the allocation of these program funds.

**Program Description**

The goals of the Reimagining Justice in Cully (RJC) project are to increase trust between law enforcement and Cully residents and to develop non law enforcement intervention to low level crime. The first year of the project is for planning, followed by two years of implementation. The total grant award is \$2M. The FY 2025 funds will cover planning and possibly some implementation activities.

The focus of FY 2025 will be community engagement and planning. LPSCC staff, District 2, and NAYA staff will work with a Leadership Team, Cully providers and residents to:

- Develop and implement a community engagement plan,
- Learn about community needs and opportunities,
- Research law enforcement trust-building opportunities, and
- Use Human Centered Design approaches to develop the programs and processes to be implemented in years 2 and 3.

The grant funds (\$668,848) cover:

- Project evaluation,
- 0.17 FTE County staff (LPSCC),
- Staffing, materials, and outreach funds to NAYA,
- A TBD contract for the developed community safety intervention, and
- Interpretation and technical assistance.

Participant stipends (\$135,000) and event catering (\$15,000), not provided by the grant, will be covered by the County General Funds. Aligned with Transforming Justice core strategies, providing meaningful stipends and incentives will dramatically increase engagement and success of this innovative project.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of Cully residents and business owners contacted about the project and its potential.	N/A	N/A	300	500
Outcome	Percentage of project year 1 planning complete.	N/A	N/A	10%	90%
Output	Number of workgroup and Leadership Team meetings held.	1	N/A	N/A	25
Output	Number of individuals (providers, businesses, residents) engaged in the planning process	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	2024	2024	2025	2025
Personnel	\$0	\$0	\$0	\$33,501
Contractual Services	\$0	\$0	\$135,000	\$633,970
Materials & Supplies	\$0	\$0	\$15,000	\$0
Internal Services	\$0	\$0	\$0	\$1,377
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$150,000</b>	<b>\$668,848</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$818,848</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$668,848
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$668,848</b>

Explanation of Revenues

This program generates \$1,377 in indirect revenues.

Federal Department of Justice (DOJ), Office of Justice Programs (OJP), Bureau of Justice Assistance (BJA) - \$668,848.

The total amount awarded is \$2,000,000 for three years (October 1, 2023 - September 30, 2026).

Significant Program Changes

Last Year this program was:

**Department:** Nondepartmental

**Program Contact:** JR Lilly

**Program Offer Type:** Operating

**Program Offer Stage:** Adopted

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

### Executive Summary

The Office of Community Involvement (OCI) was established by County Charter to develop and maintain community involvement programs and procedures for the purpose of facilitating direct communication between the people of Multnomah County and the Board of County Commissioners. OCI is committed to helping inform and involve communities in the processes that shape county policies, budgets, and programs with a focus on elevating the voices of communities historically underrepresented in government decision-making. OCI provides program support to county departments that help foster healthy community engagement and guidance for managing programs that involve community input.

### Program Description

The Office of Community Involvement (OCI) provides support for healthy community engagement through our ongoing support for department staff/programs, management of central advisory bodies, and the creation of policy/tools that foster relationships. OCI coordinates programs and activities designed to engage people from Multnomah County's diverse communities and support the County's community involvement programs.

OCI provides support for departments by advising on community engagement activities and plans, assisting in recruitment and management of advisory bodies, and giving guidance on best practices. 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 manages several central community advisory bodies which include the Community Involvement Committee (CIC), the Central Community Budget Advisory Committee, and Nondepartmental Community Budget Advisory Committee. OCI provides these bodies with meeting support, volunteer training, leading recruitment to fill vacancies, coordinating reporting, and serving as a resource for county staff.

With the creation of community engagement values, priorities, and beliefs, OCI also develops various tool kits, education material, and training activities that support community engagement efforts for county departments. These tools help create best practices for county staff and the community to engage on all programs and services.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Percentage of participants in activities who felt time was well spent	85%	90%	85%	87%
Outcome	Percentage of volunteer positions on CIC and CBACs filled	90%	90%	87%	90%
Outcome	Percentage of new CIC & CBAC members who have not previously served on County advisory group	80%	90%	50%	50%
Outcome	Community meetings & events with partners serving historically underrepresented/hard to reach communities	5	10	10	15

### 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	2024	2024	2025	2025
Personnel	\$294,486	\$0	\$313,963	\$0
Contractual Services	\$16,650	\$0	\$19,450	\$0
Materials & Supplies	\$26,800	\$0	\$38,475	\$0
Internal Services	\$41,064	\$0	\$37,762	\$0
<b>Total GF/non-GF</b>	<b>\$379,000</b>	<b>\$0</b>	<b>\$409,650</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$379,000</b>		<b>\$409,650</b>	
<b>Program FTE</b>	2.00	0.00	2.00	0.00

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

## Explanation of Revenues

## Significant Program Changes

**Last Year this program was:** FY 2024: 10010A Office of Community Involvement

An increase of \$10,000 will support Multnomah County’s Annual Volunteer Event, community partnership event support, community education events, and public training materials.

**Department:** Nondepartmental      **Program Contact:** JR Lilly  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** New Request, One-Time-Only Request

**Executive Summary**

The Office of Community Involvement (OCI) was established to support community involvement programs and facilitate relationships between the people of Multnomah County and the Board of County Commissioners. As part of its mission, the Office of Community Involvement supports county advisory groups through community outreach, staff support, technical assistance and policy development. This limited duration position will continue to develop new training, standards and policies for use in department advisory groups and volunteer programs across county services.

**Program Description**

With the Office of Community Involvement (OCI) supporting Multnomah County’s departments with community engagement efforts, this role of the Policy & Training Coordinator will aim to create: countywide community engagement policy, training, and support systems; tools to support equitable representation policy for recruitment, on boarding, and selection criteria; and a consistent central curriculum and management process for all volunteers serving on advisory bodies. This will be the second year of this position working in OCI to develop these materials and training.

The Policy & Training Coordinator will develop a community engagement training curriculum for county staff, community partners, and community volunteers. The coordinator will collaborate with stakeholders to identify additional training needs, work with experts to develop training content and determine methods for training delivery, and pilot and refine training, soliciting feedback from staff and community participants.

This position will develop various tool kits, education material, and training activities that support community engagement efforts for county departments. This will include community engagement values, principles, beliefs, and standards for best practices. As well as templates and worksheets for departments to plan, facilitate, and evaluate their own community engagement plans.

This position will also advance the work to establish countywide policies that support a healthy community engagement environment and work to identify additional opportunities for supporting consistent implementation of best practices in community involvement across the organization. This position will also evaluate the County’s community engagement policies and programs to reduce barriers to participation, and develop tools and metrics for monitoring and evaluating countywide community engagement activities and impact.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of new countywide trainings for County volunteer	N/A	5	6	8
Outcome	Number of tools that support a framework and resource for countywide engagement support	N/A	1	1	5
Outcome	Number of materials created to support community engagement activities for departments	N/A	N/A	N/A	4

**Performance Measures Descriptions**

This position will build upon the works to develop a core community engagement curriculum to create training methods and materials for county staff and community members. The work of this role can be measured in the amount of tools and materials it creates for county use.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$118,371	\$0	\$128,493	\$0
Materials & Supplies	\$2,129	\$0	\$2,507	\$0
Internal Services	\$1,500	\$0	\$1,500	\$0
<b>Total GF/non-GF</b>	<b>\$122,000</b>	<b>\$0</b>	<b>\$132,500</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$122,000</b>		<b>\$132,500</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 2024: 10010B OCI - Policy & Training Coordinator

In FY 2024, this program was funded with one-time-only General Fund. This is a two year program, with FY 2025 being the final year of using one-time-only General Fund.



## Legal / Contractual Obligation

Multnomah County Code: Chapter 3 – Board of Commissioners; BUDGET ADVISORY COMMITTEES establishes the creation of the Community Budget Advisory Committees (CBAC). Does not obligate departments to provide stipends to CBAC Volunteers.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$0	\$42,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$42,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$42,000</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:** JR Lilly  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** New Request, One-Time-Only Request

**Executive Summary**

One of the Office of Community Involvement’s (OCI) primary objectives is to support community involvement programs and facilitate relationships between the people of Multnomah County and the Board of County Commissioners. For this OCI partners with several Community Based Organizations (CBOs) to connect, educate, and foster relationships with community members who have been historically marginalized. This program would create a new method for OCI to partner with local organizations to educate community members and connect them to engagement opportunities.

**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. OCI partners with Community Based Organizations (CBOs) to continual outreach and recruitment community members with opportunities to engage with Multnomah County.

This program would create partnerships with up to six local organizations to provide civic education and leadership training for community members. OCI will provide selected CBOs with the Multnomah County Community Engagement Curriculum which will educate community members with the tools they need to participate in decision making processes that are a priority for their community. This will also foster a better relationship between several historically marginalized communities and Multnomah County departments. A better relationship would create more opportunities for program feedback, process improvement, and advisory bodies recruitment.

This program will support OCI working with local organizations to equip community members with the tools and knowledge to effectively engage Multnomah County programs and services. Together, OCI and CBOs, will be able to co-create opportunities for community members to learn about joining advisory bodies, providing public testimony, commenting on major policies like the budget, and being civically engaged. Partnering with local organizations who can provide support for community members while OCI provides the curriculum, will provide a pathway for many community members to engage.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Nbr of CBOs partner with to train community members on how to engage Multnomah County	N/A	N/A	N/A	6
Outcome	Nbr of community mtgs & events w/ partner orgs serving historically underrepresented/hard to reach communities	N/A	N/A	N/A	12
Outcome	Nbr of community members signed up to volunteer in Mult. Co. Advisory Boards, Committees, & Commissions	N/A	N/A	N/A	15

**Performance Measures Descriptions**

These measurements will demonstrate the impact and effectiveness of the program with community members. This will be measured by the responses of an annual survey of county staff and community members.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$0	\$130,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$130,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$130,000</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:** Operating      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Total number of Board related documents processed (digital files).	4,372	3,500	4,000	4,000
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	2024	2024	2025	2025
Personnel	\$315,357	\$0	\$334,161	\$0
Contractual Services	\$52,790	\$0	\$76,290	\$0
Materials & Supplies	\$365,406	\$0	\$311,902	\$30,000
Internal Services	\$345,254	\$0	\$300,930	\$0
<b>Total GF/non-GF</b>	<b>\$1,078,807</b>	<b>\$0</b>	<b>\$1,023,283</b>	<b>\$30,000</b>
<b>Program Total:</b>	<b>\$1,078,807</b>		<b>\$1,053,283</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

Video Lottery Fund - \$30,000

Significant Program Changes

Last Year this program was: FY 2024: 10011 Office of the Board Clerk

0.35 FTE Staff Assistant is moved to The Chair's Office (10000) to align the staff. This transfer does not result in new FTE.

In FY 2025, materials & supplies is reduced by \$23,500 and reallocated to contractual services to better reflect actual spending. The reduction in internal services is primarily due to reduced facilities costs.

**Department:** Nondepartmental      **Program Contact:** Marina Hovious

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

**Related Programs:**

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

**Executive Summary**

The Office of the Board Clerk is responsible for ensuring that notices of Board meetings, the agendas for the meetings, and any official actions taken are posted for the public. As web design and computing power continue to evolve at a quick pace, the need for the efficient and effective dissemination of public actions grows increasingly important. This program will modernize the Office’s website and explore the possibility of new software to assist with easier digital access to records and documents. It will also review long standing Board meeting procedures and offer recommendations for improvement.

**Program Description**

The Board Clerk Office plays an important role in the management of public meetings of the Board of County Commissioners. They also work to ensure the timely, accurate, and detailed distribution of information for those meetings to the public. As technological change continues to occur at an increasingly faster rate, the need to share official actions made by the Board of County Commissioners grows more important.

At the same time, the growing complexity of issues facing the County makes the need for clear and effective Board meeting procedures all the more important. There is an opportunity to leverage the experience of the current Board, with their diverse lengths of service as Commissioners, to obtain insights for improving those procedures.

This program will support efforts to improve digital navigation of the County’s website, working to ensure there is increased transparency in administrative rules, ordinances, and a host of other items that improve the way the public interact with their elected representatives and County government in general. It will also support a holistic review of current Board procedures, examining ways they may be amended or improved.

Prior to enactment of these changes, the Chief Operating Officer and Office of the Board Clerk (in consultation with Board Members) will provide a briefing outlining detailed recommendations and an implementation plan for the work.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Outcome	Updated systems and website that modernize & increase public access to board documents & procedures.	N/A	N/A	N/A	100%
Output	Briefing on recommendations to the Board of County Commissioners	N/A	N/A	N/A	1

**Performance Measures Descriptions**

The briefing and recommendations will be presented to the Board of County Commissioners by September 15, 2024.



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$0	\$100,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$100,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$100,000</b>	
<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

This program is funded with one-time-only County General Fund

Significant Program Changes

Last Year this program was:

**Department:** Nondepartmental      **Program Contact:** Chris Voss  
**Program Offer Type:** Operating      **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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Annual exercise performance objectives successfully tested.	100%	100%	100%	100%
Outcome	Oregon Emergency Management requirements met for annual performance grant.	100%	100%	100%	100%

**Performance Measures Descriptions**

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	2024	2024	2025	2025
Personnel	\$1,550,264	\$983,385	\$1,749,330	\$890,033
Contractual Services	\$154,640	\$0	\$154,640	\$50,000
Materials & Supplies	\$136,836	\$557	\$114,512	\$90,000
Internal Services	\$510,210	\$35,206	\$514,693	\$36,580
<b>Total GF/non-GF</b>	<b>\$2,351,950</b>	<b>\$1,019,148</b>	<b>\$2,533,175</b>	<b>\$1,066,613</b>
<b>Program Total:</b>	<b>\$3,371,098</b>		<b>\$3,599,788</b>	
<b>Program FTE</b>	8.56	1.44	9.26	0.74

Program Revenues				
Intergovernmental	\$0	\$1,019,148	\$0	\$1,066,613
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,019,148</b>	<b>\$0</b>	<b>\$1,066,613</b>

Explanation of Revenues

This program generates \$36,580 in indirect revenues.

- Federal Emergency Management Performance Grant (EMPG) - \$180,063
- Federal Urban Areas Security Initiative Grants - \$344,550
- Federal State Homeland Security Program - \$542,000

In FY 2025, 0.70 FTE is backfilled with General Fund. In FY 2024 this FTE was budgeted to the EMPG. The reduction in grant funding is due to the Federal government reducing the statewide allocation.

Significant Program Changes

Last Year this program was: FY 2024: 10012 Office of Emergency Management

**Department:** Nondepartmental      **Program Contact:** Chris Voss  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 10012C  
**Program Characteristics:**

**Executive Summary**

This program supports the Logistics Warehouse and vehicles along with 2.00 FTE. This program maintains a 16,000 square foot facility with both warehouse and office space where there is \$6 million worth of inventory supporting emergency programs, the largest of which is our severe weather response/sheltering programs. The warehouse also maintains a supply of Personal Protective Equipment (PPE). Severe Weather Sheltering supplies have been expanded to support events of more than 1,300 individuals during extreme weather events.

**Program Description**

The program maintains the severe weather response capabilities with staffing, vehicles and maintaining a warehouse full of equipment to support the houseless community as well as communities that could be impacted by a disaster. This includes the requesting, purchasing, storage of shelter supplies and personal protective equipment, organizing thousands of meals per day during activations, supporting the passenger transportation unit and an administration unit responsible for maintaining systems to support staff and partner recruitment during emergencies. The team oversees a facilities program which identify and create agreements with community based organizations, an incentive program to manage resources for the use of the locations during emergencies and coordinate a leasing program with the Department of County Assets (DCA) to identify locations for short term lease and prepare them for use during severe weather. The team also maintains an inventory tracking system and fulfills requests, which can easily exceed over 1,000 during a single response.

This group maintains the warehouse (and 7 mobile trailers, 6 storage containers throughout the county, other county storage locations and 3 semi-permanent severe weather shelter locations) and approximately \$6 million in supplies stored. This includes various systems from inventory management to the coordination and re-stock of supplies. This group also coordinates with other Oregon Counties on the acquisition of supplies from their organizations. This group maintains the buying capacity for all severe weather shelter supplies and personal protective equipment (PPE) provided to community based organizations and others that support our vulnerable populations.

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 include expansion of our volunteer network and training of these new personnel would occur in the off season.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Maintain capability to provide supplies for 1,300 persons seeking sheltering from emergency incidents.	N/A	100%	100%	100%
Outcome	Deliver requested & approved supplies to CBOs w/in 3 business days of request unless a later date is requested	>90%	95%	>95%	100%

**Performance Measures Descriptions**

Performance Measure #1: The FY24 budgeted included 1,200 persons. This has been updated to 1,300 persons.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$1,002,109	\$0	\$293,362	\$0
Contractual Services	\$0	\$0	\$1,600	\$0
Materials & Supplies	\$0	\$0	\$4,292	\$0
Internal Services	\$374,733	\$0	\$88,570	\$0
<b>Total GF/non-GF</b>	<b>\$1,376,842</b>	<b>\$0</b>	<b>\$387,824</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,376,842</b>		<b>\$387,824</b>	
<b>Program FTE</b>	0.00	0.00	2.00	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

Significant Program Changes

Last Year this program was: FY 2024: 10012B Logistics & Warehouse

This program combines with 10012C from FY 2024.

In FY 2024, this program was funded with one-time-only General Fund.

In FY 2025, this program is funded with ongoing General Fund. It adds 2.00 FTE that were previously budgeted as limited duration. This program supports 20% of the total Logistics costs. The other 80% is budgeted in program 10012C, using Supportive Housing Services (SHS) funding.

**Department:** Nondepartmental      **Program Contact:** Chris Voss  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 10012B  
**Program Characteristics:**

**Executive Summary**

This program supports the Logistics Warehouse and vehicles along with 8.00 FTE. This program maintains a 16,000 square foot facility with both warehouse and office space where there is \$6 million worth of inventory supporting emergency programs, the largest of which is our severe weather response/sheltering programs. The warehouse also maintains a supply of Personal Protective Equipment (PPE). Severe Weather Sheltering supplies have been expanded to support events of more than 1,300 individuals during extreme weather events.

**Program Description**

The program maintains the severe weather response capabilities with staffing, vehicles and maintaining a warehouse full of equipment to support the houseless community as well as communities that could be impacted by a disaster. This includes the requesting, purchasing, storage of shelter supplies and personal protective equipment, organizing thousands of meals per day during activations, supporting the passenger transportation unit and an administration unit responsible for maintaining systems to support staff and partner recruitment during emergencies. The team oversees a facilities program which identify and create agreements with community based organizations, an incentive program to manage resources for the use of the locations during emergencies and coordinate a leasing program with the Department of County Assets (DCA) to identify locations for short term lease and prepare them for use during severe weather. The team also maintains an inventory tracking system and fulfills requests, which can easily exceed over 1,000 during a single response.

This group maintains the warehouse (and 7 mobile trailers, 6 storage containers throughout the county, other county storage locations and 3 semi-permanent severe weather shelter locations) and approximately \$6 million in supplies stored. This includes various systems from inventory management to the coordination and re-stock of supplies. This group also coordinates with other Oregon Counties on the acquisition of supplies from their organizations. This group maintains the buying capacity for all severe weather shelter supplies and personal protective equipment (PPE) provided to community based organizations and others that support our vulnerable populations.

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 include expansion of our volunteer network and training of these new personnel would occur in the off season.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Maintain capability to provide supplies for 1,300 persons seeking sheltering from emergency incidents.	N/A	100%	100%	100%
Outcome	Deliver requested & approved supplies to CBOs w/in 3 business days of request unless a later date is requested	>90%	95%	>95%	100%

**Performance Measures Descriptions**

Performance Measure #1: The FY24 budgeted included 1,200 persons. This has been updated to 1,300 persons.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$0	\$0	\$1,173,862
Contractual Services	\$0	\$0	\$0	\$6,400
Materials & Supplies	\$0	\$0	\$0	\$38,508
Internal Services	\$0	\$0	\$0	\$381,186
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,599,956</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$1,599,956</b>	
<b>Program FTE</b>	0.00	0.00	0.00	8.00

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

Explanation of Revenues

This program generates \$48,246 in indirect revenues.  
 \$1,599,956 Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

Significant Program Changes

Last Year this program was: FY 2024: 10012B Logistics & Warehouse

In FY 2024, this program was funded with one-time-only General Fund.

In FY 2025, this program is funded with Supportive Housing Services (SHS) funding. It adds 8.00 FTE that were previously budgeted as limited duration. This program supports 80% of the total Logistics costs. The other 20% is budgeted in program 10012B, using General Fund.

**Department:** Nondepartmental **Program Contact:** Chris Voss

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

**Related Programs:**

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

**Executive Summary**

This is a new request to fund Countywide Severe Weather Shelter programs overseen by the Emergency Management team. The nature of severe weather does not always allow for exact costs and this funding amount is projected based on the FY 2023 full budget year and includes funds for transportation, meals, facilities, rentals, security services and contractors to support the shelters. It also includes costs for both supplies and staffing costs related to training and staff costs during activations.

**Program Description**

The program covers numerous costs directly related to the severe weather shelter responses in summer and winter. This includes the ability to supply and staff 10 shelters, supporting 1,300 people when the county exceeds severe weather thresholds. The two largest funding components are shelter supplies, estimated at \$750,000 and staffing, estimated at \$800,000.

Supplies - the County stores and supplies 1,000,000 individual items to shelters from sleeping mats, cots, blankets, wheelchairs, medical supplies, cleaning supplies and gear often provided to shelter guests exiting locations. A single shelter is often opened with approximately 40,000 items delivered by this team and those who take shifts in support of Logistics.

Staffing - Staffing costs provide a central cost code for county workers who 1) Completed a shift or shifts supporting Logistics or Passenger Transportation. 2) Completed a shift or shifts as a Person in Charge (PIC), Medical Specialist, Behavioral Health Specialist, or General Staff role in any of the emergency shelter sites. 3) Worked in another emergency response support role such as Emergency Support Function (ESF) #6 Sheltering Lead or HR Support role for Administration Unit.

Food - 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 calendar year 2023 (which had fewer sheltering demands than prior calendar years), this consisted of more than 2,700 meals and over 125,000 snacks and drinks.

Other costs include facility costs, contracted costs for items including porta-potties, janitorial, biohazard cleanup, security, rented vehicles, floor protection and cleanup crews as well as lighting and other safety items.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Maintain capability to provide supplies for 1,300 persons seeking sheltering with 72 hours notice.	N/A	N/A	N/A	100%
Outcome	Ensure enough facilities are available to house 1,300 persons seeking sheltering.	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	2024	2024	2025	2025
Personnel	\$0	\$0	\$0	\$800,000
Contractual Services	\$0	\$0	\$0	\$500,000
Materials & Supplies	\$0	\$0	\$0	\$1,000,000
Internal Services	\$0	\$0	\$0	\$32,880
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,332,880</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$2,332,880</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

This program generates \$32,880 in indirect revenues.  
 \$2,332,880 Supportive Housing Services (SHS) Fund 1521. Tax revenues are budgeted in the Joint Office of Homeless Services program 30999 Supportive Housing Services Revenue for Other Departments.

Significant Program Changes

Last Year this program was:

During FY 2024, Supportive Housing Services (SHS) funding in the Joint Office of Homeless Services was allocated to fund this program (see Supplemental Budget # SUPP02-OVER-002-24).

**Department:** Nondepartmental      **Program Contact:** Jeston Black  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Government Relations Office acts as a liaison between Multnomah County and various governing bodies, advocating for the county's legislative agenda at the state and federal levels. It also works with smaller municipalities and tribal governments to share insights and create partnerships that benefit Multnomah County and its residents. These responsibilities are crucial for protecting the county and its inhabitants.

**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.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
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	33	36	40	40
Outcome	Develop engagement strategies with Tribal governments and local American Indian/Alaska Native communities	1	1	1	0

**Performance Measures Descriptions**

The adoption of the federal and state legislative agendas is the culmination of a broad process of consultation with departments, elected officials, and advocacy organizations. The Legislative 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 ensure 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	2024	2024	2025	2025
Personnel	\$1,232,504	\$0	\$1,337,423	\$0
Contractual Services	\$124,000	\$0	\$124,000	\$0
Materials & Supplies	\$51,110	\$0	\$51,111	\$0
Internal Services	\$69,016	\$0	\$85,061	\$0
<b>Total GF/non-GF</b>	<b>\$1,476,630</b>	<b>\$0</b>	<b>\$1,597,595</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,476,630</b>		<b>\$1,597,595</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 2024: 10016 Government Relations Office

**Department:** Nondepartmental      **Program Contact:** Joy Fowler  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The Office of Diversity and Equity (ODE) is a team of subject matter experts focusing on Multnomah County employees and residents affected by systemic racism, other identity based oppression and the impacts of both. ODE provides countywide leadership, consultation and advice while modeling best practices for equity analysis and development. We also conduct research and evaluation while partnering closely with Central HR and Department Equity Managers to create inclusive frameworks for practice, policy and program delivery.

**Program Description**

ODE works across the organization, providing leadership, initiatives, piloting best practices, consulting, coordinating and collaborating to advance equity. Core to the work of ODE is a commitment to Inclusively Lead 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 partner 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, including the addition of contracted services budget for the WESP Tribal Knowledge Trainings
- The equity policy team’s work around disability equity and accommodations, policy development, and initiatives that improve systems and structures
- The consistent compliance reporting, research and evaluation
- Exit interviews, 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 stakeholders

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Employee Resource Groups managed and coordinated	10	9	10	11
Outcome	Implementation of WESP in alignment with a phased approach and based on approved recommendations.	N/A	N/A	N/A	75%
Output	Number of guidance documents, evaluation reports or compliance reports completed	5	4	5	5
Output	# of countywide workshops & technical asst. led by ODE (i.e. disability, LGBTQIA2+, Equity Lens, tribal)	N/A	N/A	N/A	15

**Performance Measures Descriptions**

The 2nd and 4th performance measures are new for FY2025 and reflect new measures and metrics.

## 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	2024	2024	2025	2025
Personnel	\$1,795,092	\$0	\$1,917,263	\$0
Contractual Services	\$106,110	\$0	\$60,110	\$0
Materials & Supplies	\$95,317	\$0	\$131,319	\$0
Internal Services	\$141,402	\$0	\$141,405	\$0
<b>Total GF/non-GF</b>	<b>\$2,137,921</b>	<b>\$0</b>	<b>\$2,250,097</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$2,137,921</b>		<b>\$2,250,097</b>	
<b>Program FTE</b>	9.00	0.00	9.00	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 2024: 10017A Office of Diversity and Equity

This program combines 10017C WESP Planning and Engagement from FY 2024.

In FY 2025, contractual services is reduced by a net \$46,000 as follows:

- Current service level is reduced by \$71,000 and reallocated within this program to better reflect actual spending. This reallocation includes funding one College to County (C2C) intern in FY 2025.
- \$25,000 in new General Fund is added for WESP Tribal Knowledge trainings.

**Department:** Nondepartmental      **Program Contact:** Joy Fowler  
**Program Offer Type:** Operating      **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 ensuring that young people form relationships with caring adults, build skills, exercise leadership, and help their communities as they develop into healthy, productive adults. MYC is a nationally recognized model using participatory action research, policy creation and advocacy, and Youth-Adult Partnership as its foundational underpinnings.

MYC has made an intentional and sustained effort to ensure that a majority of youth commissioners come from BIPOC Communities and embed equity and social justice into 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 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 includes:

- Transit Safety
- Transit Equity/TriMet YouthPass 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
- Voter Education/Outreach

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Youth Commission Meetings held	21	21	21	21
Outcome	Youth-led policies impacted and/or advocated for	8	8	8	8
Output	Number of partnerships established	14	14	14	14
Outcome	Number of Youth-led forums and/or events held	6	8	8	8

**Performance Measures Descriptions**

Output 1: Scholastic year allows 21 engagements with students; Outcome 1: Students will advocate for 2-3 policies per committee, totaling 8-9 impacted policies; Output 2: Students form relationships with other student groups and community organizations to advocate for youth-led policies from each committee; Outcome 2: Students host forums based on the policies they are advocating for to educate other youth, community members and elected officials.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$186,636	\$0	\$236,517	\$4,600
Contractual Services	\$0	\$0	\$0	\$2,000
Materials & Supplies	\$21,014	\$0	\$20,653	\$3,211
Internal Services	\$11,435	\$0	\$12,884	\$189
<b>Total GF/non-GF</b>	<b>\$219,085</b>	<b>\$0</b>	<b>\$270,054</b>	<b>\$10,000</b>
<b>Program Total:</b>	<b>\$219,085</b>		<b>\$280,054</b>	
<b>Program FTE</b>	1.00	0.00	1.50	0.00

Program Revenues				
Other / Miscellaneous	\$0	\$0	\$0	\$10,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$10,000</b>

Explanation of Revenues

This program generates \$189 in indirect revenues.

Non-governmental; Momentum Alliance Youth Equity Collaborative -\$10,000

Significant Program Changes

Last Year this program was: FY 2024: 10017B Multnomah Youth Commission Support

In FY 2025, this program adds a 0.50 FTE Program Technician (6020). In the prior fiscal year these job duties were completed by on-call staff.

**Department:** Nondepartmental      **Program Contact:** Joy Fowler  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 78332A/B  
**Program Characteristics:** New Request

**Executive Summary**

Digital content, websites, and applications must be accessible to people with disabilities. The goal of the Digital Accessibility Program is to ensure that employees and county residents have meaningful access to digital resources. Creating a Digital Accessibility Program will allow the Office of Diversity and Equity (ODE) to support and bolster the work of IT. Both teams recognize what is essential for some people is good for everyone.

**Program Description**

Employees should have meaningful access to the tools they need to do their work, and residents have barrier-free access to county services - digital resources accessible to everyone, employees and residents alike. The county will become known as an employer that welcomes, hires, and retains people with disabilities.

**Our Actions:**

- A set of countywide leaders dedicated full-time to accessibility
- Obtain departmental leadership, buy-in, training, and ownership of accessibility
- Train county staff as subject matter experts in accessibility
- Maintain a strong working relationship with the IDEA Employee Resource Group and other internal partners
- Build community engagement and compensation models that include diverse representation from community

**To sustain the program:**

1. Processes and structures - such as promotion of basic standards, creation of a community of practice, and community accountability.
2. Team to lead, advocate, and coordinate this work, to speak and act in support of it countywide.

**Long-Term Outcomes:**

1. The county's digital resources, applications, and services are universally accessible.
2. Employees have meaningful access to the tools they need to do their work.
3. The county meets and complies with Federal regulations and WCAG 2.1 AA.
4. Residents have barrier-free access to county services.
5. Responses to future advances in technology are nimble.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Outcome	County staff will report high levels of satisfaction with access and utility of digital resources	N/A	N/A	N/A	80% Agreement
Output	Create standards for forms and processes that require digitization	N/A	N/A	N/A	1 Doc
Output	Number of countywide staff trained as subject matter experts	N/A	N/A	N/A	12
Output	Number of members of the countywide content creators community of practice	N/A	N/A	N/A	12

**Performance Measures Descriptions**

- Outcome 1: Measure the number of positive responses from satisfaction surveys distributed to those served by the Digital Accessibility Program.
- Output 2: Create guidance for the digitization of forms and identification of manual processes to be digitized
- Output 3: Develop and deliver training to county staff on creating accessible materials for employees and the public
- Output 4: Create a countywide community of practice for content creators to meet regularly



Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$0	\$359,480	\$0
Materials & Supplies	\$0	\$0	\$5,020	\$0
Internal Services	\$0	\$0	\$1,500	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$366,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$366,000</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

This program is supported by General Fund revenues.

Significant Program Changes

Last Year this program was:

This program adds 1.00 FTE Manager 2 (9364) and 1.00 FTE Human Resources Analyst 2 (9670).

**Department:** Nondepartmental      **Program Contact:** John Wasiutynski  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:** 25121B  
**Program Characteristics:**

### Executive Summary

The Office of Sustainability works to create a just, equitable, livable, resilient, and low carbon community by centering the priorities of frontline communities and advancing sustainability efforts within the County, region, and state.

The Office of Sustainability envisions a community and a world where everyone experiences life in a stable climate, has a safe place to live, and can access clean air, clean water, and the resources they need to thrive. An example of how the mission and vision of the office are put into practice include the development, with community, of the first Climate Justice Plan for the County.

### Program Description

The Office of Sustainability focuses on collaborating with community partners to advance policies, projects, initiatives, programs, and research that are responsive to the community's needs. In FY 2024 this approach has been used in developing the first ever Climate Justice Plan for the County. This project started with the development of a framework document, Rooted in Values Guided by Vision: Community-Driven Climate Justice Framework for Multnomah County. The framework document was released in July 2023. Now, a Steering Committee made up of a broad representation of individuals and organizations who can speak to the experience and perspective of frontline communities, along with local government staff, are co-creating the Climate Justice plan. The plan will go from the vision and values of the framework to specific goals and actions.

The Office also leads and supports sustainability efforts within the County departments and programs. In FY 2024 numerous examples of this collaboration are evident. The Office collaborated with Facilities and Property Management to develop bird safe construction standards and an EV charger strategy. The Office also continued the collaboration with the Department of County Human Services implementing the Wood Stove Exchange Program and securing an additional \$1.3 million in grants to fund additional heat pump exchange over the coming three years. Finally, the Office continued to seek out grant opportunities, with a successful collaboration with the Health Department resulting in a \$1 million EPA grant.

The Office works with County leadership to advance County's sustainability goals. This was evidenced in June of 2023 when the Chair and Board of County Commissioners, with support from the Office of Sustainability and the County Attorney's Office, initiated a lawsuit against major fossil fuel companies. The lawsuit seeks to hold large fossil fuel companies accountable for the damages arising from the 2021 Pacific Northwest Heat Dome, one of the most deadly and destructive human-made weather disasters in American history. Other policy decisions supported by the Office included the renaming of the Sauvie Island Bridge to the Wapato Bridge, opposition to Zenith Oil terminal, and policy solutions to the risk of toxic gasses stored in seismically unstable areas.

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of unique County employees engaged with programming offered by the Office of Sustainability.	629	800	400	800
Outcome	Decrease in community wide greenhouse gas emissions over 1990 levels based on trend line analysis.	21%	20%	21%	22%
Output	Total number of advisory committee meeting volunteer hours	158	200	175	200
Outcome	Percent Energy burdened Multnomah County Households	23%	24%	23%	22%

### Performance Measures Descriptions

Greenhouse gas emissions data are several years lagging, in this case the most recent year for which data is available is 2021. 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 the Oregon Department of Energy, biannual report.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$969,912	\$7,000	\$1,023,634	\$0
Contractual Services	\$17,390	\$42,749	\$17,392	\$340,000
Materials & Supplies	\$32,360	\$0	\$32,360	\$60,000
Internal Services	\$45,508	\$251	\$50,538	\$0
<b>Total GF/non-GF</b>	<b>\$1,065,170</b>	<b>\$50,000</b>	<b>\$1,123,924</b>	<b>\$400,000</b>
<b>Program Total:</b>	<b>\$1,115,170</b>		<b>\$1,523,924</b>	
<b>Program FTE</b>	6.00	0.00	6.00	0.00

Program Revenues				
Intergovernmental	\$0	\$50,000	\$0	\$400,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$50,000</b>	<b>\$0</b>	<b>\$400,000</b>

Explanation of Revenues

State Department of Environmental Quality (DEQ), Supplemental Environmental Projects program - \$400,000. The program allows for a portion of environmental penalties to be used locally for environmental remediation. In this case penalties from a Title V air quality permit violation will be paid to Multnomah County for the Wood Burning Exchange Program.

Local grant funding from the East Multnomah Soil & Water Conservation District ended in FY 2024 and The Office of Sustainability will not be reapplying for it. In FY 2024 it was budgeted at \$50,000.

Significant Program Changes

Last Year this program was: FY 2024: 10018 Office of Sustainability

In the year ahead the Office will focus on completing the Climate Justice Plan, explore new funding opportunities, and pursue climate resilience initiatives in East Multnomah County, among other priorities.

**Department:** Nondepartmental      **Program Contact:** John Wasiutynski

**Program Offer Type:** Capital      **Program Offer Stage:** Adopted

**Related Programs:**
**Program Characteristics:** New Request, 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, is becoming 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. New farmer training and access to land and equipment are key programmatic features.

**Program Description**

In CY 2021 the County officially awarded a 5-year license, with an option for a 5-year extension, 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 operates the CROPS site as an incubator farm for beginning farmers and as a community training site.

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 concerning farm-land access, the site is being improved with farm infrastructure. The funds will support the completion of infrastructure projects, especially electricity that will allow for site security, a greenhouse, and other infrastructure 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, farm equipment, and other forms of capital 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, and irrigation infrastructure, completed demolition work, and is in the process of constructing a barn and access driveway. These funds will support the addition of electrical utilities that can support farm operations, including refrigeration, greenhouse, and other electrically powered infrastructure. Mudbone, in addition to commercial operations, also runs extensive charitable food distribution through two community food pantries and events.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Outcome	Number of farmers using CROPS	5	4	5	5
Outcome	Increase number of Black farmers in Multnomah County	166%	100%	166%	100%
Output	Volunteer hours	400	1,000	800	1,000

**Performance Measures Descriptions**

According to the USDA, the number of Black Farmers increased from 3 in 2017 to 8 in the 2022 farm census. Because of hundreds of years of discriminatory practices by governments, the number of Black farmers is low. 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.

## 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
Program Expenses	2024	2024	2025	2025
Contractual Services	\$400,000	\$0	\$200,000	\$0
<b>Total GF/non-GF</b>	<b>\$400,000</b>	<b>\$0</b>	<b>\$200,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$400,000</b>		<b>\$200,000</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 both FY 2024 and FY 2025, this program was funded with one-time-only General Fund.

## Significant Program Changes

**Last Year this program was:** FY 2024: 10018B 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, grounds, and electricity utility.

**Department:** Nondepartmental      **Program Contact:** John Wasiutynski  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** New Request, One-Time-Only Request

**Executive Summary**

Multnomah County will develop an intergovernmental agreement with Oregon State University (OSU). The agreement will facilitate the transfer of funds to the university for the purposes of developing the initial designs for a mixing channel in the Ross Island Lagoon. The mixing channel will help to alleviate the increasingly common occurrence of harmful algal blooms in the lagoon which also impact the main stem of the river causing closures and harm wildlife.

**Program Description**

Ross Island is an island in the Willamette River located in Portland, Oregon. Before 1926, the island was two separate islands, with braided channels flowing freely between the islands. The Northern Island was home to Bundy's Bath House a destination in Portland's Early History for swimming and dances. In 1926 the US Army Corps of Engineers constructed an embankment connecting the two islands to facilitate gravel extraction. Pollution in the river eventually closed the bathhouse, but gravel mining continued through 2001. The embankment that connected the two islands and subsequent mining left a deep lagoon in the middle of the island.

Today the lagoon is effectively a lake in the middle of a river, with very little flow other than tidal pulsing at one downriver channel into the lagoon. The lagoon is very deep, over 120 feet deep in some sections, and the bottom is anoxic, or without dissolved oxygen, and can remain relatively cold throughout the year. The surface of the lagoon, on the other hand, warms up substantially. Surface warming, especially with increasingly warm conditions caused by climate change, combined with low flow and anoxic benthic conditions conspire to create an ideal breeding ground for cyanobacteria. Harmful Algal Blooms are now a common occurrence in the lagoon, and when the bloom becomes severe it will spread to the main stem of the river closing the river to recreation and causing harmful conditions for wildlife. These impacts will only get worse over time in the absence of a solution.

After extensive investigation, researchers have determined that the best long-term approach for mitigating harmful algal blooms in the Ross Island Lagoon is to once again separate the two islands with a mixing channel. This funding will support the initial design of a mixing channel or 30% design. The County will develop an intergovernmental agreement (IGA) with researchers at OSU who will complete the design.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Outcome	Percent completeness of Ross Island Lagoon mixing channel design	N/A	N/A	N/A	30%
Output	Signed intergovernmental agreement with Oregon State University	N/A	N/A	N/A	1

**Performance Measures Descriptions**

## Legal / Contractual Obligation

The County will negotiate an intergovernmental agreement with Oregon State University.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
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:** Nondepartmental

**Program Contact:** Dan Zalkow

**Program Offer Type:** Operating

**Program Offer Stage:** Adopted

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

### Executive Summary

The Regional Arts & Culture Council (RACC) provides contract services to Multnomah County. Formerly 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 they continue to leverage support from other regional government partners and private donors, including foundations and trusts. 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 continues to leverage private and public dollars to provide artists, creatives, and arts organizations with base financial support needed to serve the community; their Advocacy & Engagement program liaises between city, county, and national offices, including state arts organizations, holding a board member seat on the Cultural Advocacy Coalition of Oregon and congressional leaders regarding impactful legislation affecting the arts and culture in our region. A RACC team member serves on the Planning Management Team for the tri-county regional cultural plan process. RACC's Strategic Framework outlines their goals for building equity, access, innovation and advocacy for arts and culture in the region.

RACC's Public Art program, including the Multnomah County 2% for Art Ordinance, integrates a wide range of art into public spaces and intersections with the community. The County contributes 2% of direct construction costs from medium and large projects to RACC to facilitate the installation of art projects in County facilities, maintain existing art funded through the Public Art program and to fund the portable arts collection displayed across County buildings.

Through RACC's Grants Program, they provide professional development and learning programming for artists and organizations in addition to grant resources. RACC serves as a fiscal sponsor for the Multnomah County Cultural Coalition as well as other local organizations

### Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Dollars leveraged from other sources	\$12.8 million	\$13.1 million	\$15.1 million	\$6.5 million
Outcome	Direct Investment in artists & arts & culture organizations (includes ARPA and NEA funds)	\$9.2 million	\$10.6 million	\$12.6 million	\$3.5 million
Output	RACC-funded artists and creatives who identify as immigrant or refugee	14%	15%	10%	14%
Output	RACC-funded artists who identify as Black, Indigenous, and People of Color and/or reside in East County	47%	45%	45%	46%

### Performance Measures Descriptions

RACC's work in the community is guided by their pledge towards increasing equity and access. Their 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 and FY 2024 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. Per County Code, Chapter 8, sections 8.450 through 8.456, the County is obligated to work with RACC on public art in County facilities.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
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 2024: 10020 Regional Arts & Culture Council

**Department:** Nondepartmental      **Program Contact:** Christian Elkin  
**Program Offer Type:** Operating      **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. This allocation is monitored and updated to reflect changes made per the State biennium.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Percentage of preventive maintenance work order costs out of total maintenance work order costs	35%	45%	42%	45%
Outcome	Percentage of customer satisfaction surveys with a result of "very satisfied"	81%	85%	85%	90%

**Performance Measures Descriptions**

These measures are the same as those used for the County's other building operations, see program offer 78202A.

PM #1 - 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 which demonstrates stewardship.

PM #2 - Demonstrates commitment to our Think Yes customer service principles.

## 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	2024	2024	2025	2025
Contractual Services	\$1,205,000	\$0	\$1,153,000	\$0
Materials & Supplies	\$183,621	\$0	\$128,834	\$0
Internal Services	\$11,900,899	\$1,765,188	\$12,395,208	\$1,744,212
<b>Total GF/non-GF</b>	<b>\$13,289,520</b>	<b>\$1,765,188</b>	<b>\$13,677,042</b>	<b>\$1,744,212</b>
<b>Program Total:</b>	<b>\$15,054,708</b>		<b>\$15,421,254</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Fees, Permits & Charges	\$1,200,000	\$0	\$1,100,000	\$0
<b>Total Revenue</b>	<b>\$1,200,000</b>	<b>\$0</b>	<b>\$1,100,000</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 2024: 10021A State Mandated Expenses

This program combines 10021B Courthouse Security from FY 2024. In FY 2024, the Courthouse Security program was funded with one-time-only General Fund.

The FY 2025 program includes \$48,000 in one-time-only General Fund for the Flood Safety Benefit Fee.



## 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	2024	2024	2025	2025
Contractual Services	\$13,181,051	\$0	\$13,744,500	\$0
<b>Total GF/non-GF</b>	<b>\$13,181,051</b>	<b>\$0</b>	<b>\$13,744,500</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$13,181,051</b>		<b>\$13,744,500</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

The BIT pass-through is 25% of the first 0.68% of BIT collections.

## Significant Program Changes

Last Year this program was: [FY 2024: 10022 Pass-Through Payments to East County Cities](#)

**Department:** Nondepartmental

**Program Contact:** Eric Arellano

**Program Offer Type:** Operating

**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 \$3.8 million in FY 2023-24 to the Oregon Historical Society for its programs and operations.

In 2023, 34,840 people visited our museum and viewed our exhibitions. In addition to popular permanent exhibitions, OHS also hosts short-term exhibits that are either curated in-house or travel from other institutions, including: Our Unfinished Past: The Oregon Historical Society at 125; Celebrating Birds of the Pacific Northwest; Immigrant Stories' I Am An American: Stories of Exclusion and Belonging; The Cornerstone of Our Construction Industry: A century of the Oregon-Columbia Chapter; Motown: The Sound of Young America; and The Odyssey of the Historic Jantzen Beach Carousel. OHS also hosted an exhibition about Bob Hope, on loan from the WWII Museum.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Multnomah County residents admitted free of charge	9,527	9,640	11,900	12,500
Outcome	Improved library hours per week	32	32	32	32
Output	Increased number of public programs	28	30	30	30
Quality	Care of Collections through additional curator/registrar	1	0	4	0

**Performance Measures Descriptions**

With no COVID-19 restrictions in place in Oregon for the entire year, 2023 was year when the Oregon Historical Society could return to "normal" pre-COVID operations. OHS museum attendance increased by 27% over 2022 attendance. There were also increases in school tours, educator training programs, and in-person lectures and events. The annual Oregon History Day competition was held in person for the first time since 2019. OHS also continued to offer a number of hybrid and livestreamed lectures.

## 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	2024	2024	2025	2025
Contractual Services	\$0	\$3,873,074	\$0	\$3,975,337
Internal Services	\$0	\$29,000	\$0	\$29,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$3,902,074</b>	<b>\$0</b>	<b>\$4,004,337</b>
<b>Program Total:</b>	<b>\$3,902,074</b>		<b>\$4,004,337</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Taxes	\$0	\$3,861,074	\$0	\$3,978,116
Interest	\$0	\$3,000	\$0	\$2,500
Beginning Working Capital	\$0	\$38,000	\$0	\$23,721
<b>Total Revenue</b>	<b>\$0</b>	<b>\$3,902,074</b>	<b>\$0</b>	<b>\$4,004,337</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 2024: 10023 OHS Local Option Levy

**Department:** Nondepartmental

**Program Contact:** Jeff Renfro

**Program Offer Type:** Operating

**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 were 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
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
<b>Program Expenses</b>	<b>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Contractual Services	\$0	\$80,125	\$0	\$70,025
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$80,125</b>	<b>\$0</b>	<b>\$70,025</b>
<b>Program Total:</b>	<b>\$80,125</b>		<b>\$70,025</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Intergovernmental	\$0	\$80,000	\$0	\$25,000
Taxes	\$0	\$0	\$0	\$45,000
Interest	\$0	\$100	\$0	\$0
Beginning Working Capital	\$0	\$25	\$0	\$25
<b>Total Revenue</b>	<b>\$0</b>	<b>\$80,125</b>	<b>\$0</b>	<b>\$70,025</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.

## Significant Program Changes

Last Year this program was: FY 2024: 10024 County School Fund

**Department:** Nondepartmental

**Program Contact:** Eric Arellano

**Program Offer Type:** Operating

**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 2020 documented that Metro managed visitors facilities created an estimated total economic impact of \$877 million generating more than 8,000 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	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Impact (\$ in millions) of Convention Center Visitors to County Economy	691	670	696	726
Outcome	Number of Employees in Travel/Tourism Industry (Est.)	6,419	6,064	6,242	6,279

**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. 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>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Contractual Services	\$0	\$41,576,080	\$0	\$42,811,008
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$41,576,080</b>	<b>\$0</b>	<b>\$42,811,008</b>
<b>Program Total:</b>	<b>\$41,576,080</b>		<b>\$42,811,008</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

<b>Program Revenues</b>				
Taxes	\$0	\$41,430,330	\$0	\$42,669,684
Interest	\$0	\$10,000	\$0	\$10,000
Beginning Working Capital	\$0	\$135,750	\$0	\$131,324
<b>Total Revenue</b>	<b>\$0</b>	<b>\$41,576,080</b>	<b>\$0</b>	<b>\$42,811,008</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 2024: 10025 Convention Center Fund

**Department:** Nondepartmental      **Program Contact:** Eric Arellano  
**Program Offer Type:** Operating      **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 downtown Multnomah County Courthouse, the Sellwood Bridge replacement project, the new Health Department Headquarters building, the implementation of a new Enterprise Resource Planning (ERP) system, and the NEPA/Design/Right of Way phases of the Earthquake Ready Burnside Bridge capital 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 governing board, budget management, low debt, effective funding of long term liabilities, adequate reserves and large and stable tax base.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
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	2024	2024	2025	2025
Contractual Services	\$0	\$3,000	\$0	\$4,000
Debt Service	\$0	\$30,703,930	\$0	\$23,894,539
Unappropriated & Contingency	\$0	\$1,171,700	\$0	\$775,190
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$31,878,630</b>	<b>\$0</b>	<b>\$24,673,729</b>
<b>Program Total:</b>	<b>\$31,878,630</b>		<b>\$24,673,729</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$212,600	\$0	\$202,336
Other / Miscellaneous	\$0	\$22,710,330	\$0	\$23,695,203
Financing Sources	\$0	\$6,783,000	\$0	\$0
Interest	\$0	\$60,000	\$0	\$40,000
Beginning Working Capital	\$0	\$2,112,700	\$0	\$736,190
<b>Total Revenue</b>	<b>\$0</b>	<b>\$31,878,630</b>	<b>\$0</b>	<b>\$24,673,729</b>

## Explanation of Revenues

Debt service payments are collected from departments through internal service reimbursements and passed through to the Capital Debt Retirement Fund.

Per House Bill 4093, a District Court surcharge on certain traffic and parking fines will support the Central Courthouse capital construction project.

## Significant Program Changes

**Last Year this program was:** FY 2024: 10026 Capital Debt Retirement Fund

In fiscal year 2024, debt service for the ERP system portion of the FFC Series 2017 Bonds fully matured. The last year of debt service was funded by one-time only general fund resources.



## 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	2024	2024	2025	2025
Debt Service	\$0	\$53,808,115	\$0	\$55,424,940
Unappropriated & Contingency	\$0	\$1,893,900	\$0	\$1,953,207
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$55,702,015</b>	<b>\$0</b>	<b>\$57,378,147</b>
<b>Program Total:</b>	<b>\$55,702,015</b>		<b>\$57,378,147</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Taxes	\$0	\$53,808,115	\$0	\$52,424,940
Interest	\$0	\$175,000	\$0	\$300,000
Beginning Working Capital	\$0	\$1,718,900	\$0	\$4,653,207
<b>Total Revenue</b>	<b>\$0</b>	<b>\$55,702,015</b>	<b>\$0</b>	<b>\$57,378,147</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 2024: 10027 Library GO Bond

**Department:** Nondepartmental      **Program Contact:** Eric Arellano  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

The PERS Pension Obligation Bond Sinking Program accounts for principal and interest payments on pension obligation revenue bonds issued December 1, 1999 in the amount of \$184,548,160 to retire the County's unfunded actuarial accrued pension liability (UAL). Revenues that support debt payments are derived from charge backs to departments based on their departmental personnel cost.

**Program Description**

The County passed Resolution No. 99-218 on November 4, 1999 authorizing the issuance of up to \$200,000,000 of bond proceeds to finance the estimated unfunded accrued actuarial liability (UAL) of the County to the Oregon Public Employees Retirement System (PERS).

Senate Bill 198-B, effective October 23, 1999, authorized the County to pledge taxes that the County may levy within the limitations of sections 11 and 11b, Article XI of the Oregon Constitution not subject to annual appropriation. On December 1, 1999 the County issued \$184,548,160 in Pension Obligation Bonds to fund its PERS unfunded liability. The bonds have a final maturity date in FY 2030.

Debt service payments are supported by a surcharge against payroll. The surcharge rate has fluctuated, on average, between 6% and 9% of payroll. A reserve has been established to support future escalating debt payments in order to maintain the surcharge at a constant level.

To mitigate rising PERS rates, the County Board approved the establishment of five PERS side accounts (\$25 million each) from FY 2017-2023. Side accounts total \$125 million. Side accounts increase an employer's actuarial assets, reducing the difference between actuarial assets and actuarial liabilities, the PERS UAL. Side accounts reduce employer contributions/rates over time by paying down pension obligation. The County participated in the State of Oregon's SB 1049 PERS Employer Incentive Fund (EIF) match program, which provided for a 25% match on two qualifying side account (\$12.5 million). Though rate of relief can vary, the relief is estimated to be between .6%- .7% of payroll.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
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. (1)-indicates Moody's Aa1, (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 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	2024	2024	2025	2025
Contractual Services	\$0	\$455,495	\$0	\$450,700
Debt Service	\$0	\$31,325,000	\$0	\$33,060,000
Unappropriated & Contingency	\$0	\$44,356,667	\$0	\$50,178,465
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$76,137,162</b>	<b>\$0</b>	<b>\$83,689,165</b>
<b>Program Total:</b>	<b>\$76,137,162</b>		<b>\$83,689,165</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Other / Miscellaneous	\$0	\$34,108,050	\$0	\$37,296,177
Interest	\$0	\$700,000	\$0	\$1,200,000
Beginning Working Capital	\$0	\$41,329,112	\$0	\$45,192,988
<b>Total Revenue</b>	<b>\$0</b>	<b>\$76,137,162</b>	<b>\$0</b>	<b>\$83,689,165</b>

## Explanation of Revenues

Interest earnings on the fund balance and service charges are assessed to departments as a percentage of payroll. In FY 2025, departments will pay 6.65% of payroll costs toward the retirement of the Pension Obligation Bonds.

## Significant Program Changes

Last Year this program was: FY 2024: 10028 PERS Pension Bond Sinking Fund

**Department:** Nondepartmental      **Program Contact:** Jeff Renfro  
**Program Offer Type:** Operating      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:** New Request, 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 retention incentive payments were paid out in FY 2023. A second round of payments were made in FY 2024. This program offer covers what should be the final round of retention incentive payments for bargaining units that have recently closed successor bargaining.

**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. American Rescue Plan (ARP) resources were used to pay the retention incentives for eligible employees. A second round of payments were made in FY 2024.

This program offer budgets the final retention incentive payments, to be paid out in July 2024. The final payment will be covered by one-time-only General Fund and American Rescue Plan (ARP) resources.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of employees receiving retention incentive payment.	N/A	N/A	N/A	107.50 FTE
Outcome	% of employee receiving payment on time.	N/A	N/A	N/A	100%

**Performance Measures Descriptions**

Performance Measure #1 based on the number of FTE still in successor bargaining when the budget was calculated.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$0	\$287,000	\$500,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$287,000</b>	<b>\$500,000</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$787,000</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$500,000
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$500,000</b>

Explanation of Revenues

Federal American Rescue Plan (ARP) Direct County Funding - \$500,000

Significant Program Changes

Last Year this program was:

**Department:** Nondepartmental      **Program Contact:** Christian Elkin

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

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

**Executive Summary**

In FY 2025, the Board of County Commissioners will have three newly elected commissioners. This program provides one-time-only funding for the administrative and operational costs associated with the leadership changes.

**Program Description**

In FY 2025, the Board of County Commissioners will have three newly elected commissioners in District 1, District 2, and District 4. With these changes come administrative and operational expenses associated with both the outgoing and incoming staff. These expenses may include leave accrual payouts for outgoing staff who leave and set-up expenses for the newly elected District Commissioners and their incoming staff.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
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	2024	2024	2025	2025
Personnel	\$0	\$0	\$40,000	\$0
Materials & Supplies	\$0	\$0	\$40,000	\$0
Internal Services	\$0	\$0	\$20,000	\$0
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$100,000</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$100,000</b>	
<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:



**Program #10032 - Community Vitality and Economic Opportunity Grant Pilot Program** FY 2025 Adopted

**Department:** Nondepartmental **Program Contact:** Hayden Miller

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

**Related Programs:**

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

**Executive Summary**

The Community Vitality and Economic Opportunity Grant Pilot Program will collaborate with third-party partners to support vibrant, welcoming, and safe business districts and neighborhoods throughout Multnomah County.

**Program Description**

The Community Vitality and Economic Opportunity Grant Pilot Program will work with third-party partners to enhance business districts and neighborhoods throughout Multnomah County. Efforts will focus on creating safe and vibrant spaces for community members to live, work, and shop. The program will validate Multnomah County as a partner in creating safety solutions in our community. Example projects may include graffiti removal, overhead lighting, and other physical enhancements to activate key pedestrian spaces. Other uses of these resources may include providing support for community events and activities which promote the civic vitality of Multnomah County.

Depending on the type of project request, this program will follow standard County processes including: procurement standards when procuring for services or goods, intergovernmental agreement standards when engaging with other local governments, and/or may leverage future grant making processes to be developed by the CFO’s Office.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Development of program charter	N/A	N/A	N/A	1
Output	Annual program report	N/A	N/A	N/A	1

**Performance Measures Descriptions**

In this pilot year of the program, deliverables will reflect steps taken to develop the program fundamentals. The program charter will articulate details including roles, project scope, key stakeholders, and goals. An end-of-year progress report will detail project spending and successes as well as lessons learned.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2024	2024	2025	2025
Contractual Services	\$0	\$0	\$0	\$250,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$250,000</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

Video Lottery Fund - \$250,000

Significant Program Changes

Last Year this program was:

N/A

**Department:** Nondepartmental

**Program Contact:** Hayden Miller

**Program Offer Type:** Operating

**Program Offer Stage:** Adopted

**Related Programs:**
**Program Characteristics:** New Request

**Executive Summary**

This program is supported by Video Lottery funds to promote economic development and provide much needed healthy participant and spectator activities and events locally for people of all ages.

**Program Description**

Funds will be used to spur economic growth and enhance positive social impacts through sports by working to bring international, national, and regional sporting events to our state and supporting youth sports with an emphasis on underserved youth. Funds awarded must match contributions from other jurisdictions in Multnomah County, such as Metro and the City of Portland, and must be applied county-wide, and produce an annual report that includes the local economic development impact and actions, goals and impact on communities of color for events and programs, a description of geographic representation and impact from events pursued or supported, and details of all events pursued during the fiscal year.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Report on economic impact of video lottery fund investments through program offer	N/A	N/A	N/A	1
Outcome	Increased Economic activity and engagement with youth sport activities in Multnomah County	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	2024	2024	2025	2025
Contractual Services	\$0	\$0	\$0	\$50,000
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$50,000</b>
<b>Program Total:</b>	<b>\$0</b>		<b>\$50,000</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

Video Lottery Fund - \$50,000

Significant Program Changes

Last Year this program was:

**Department:** Nondepartmental      **Program Contact:** Shelly Kent  
**Program Offer Type:** Operating      **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. A Development and Resolution Coordinator works with staff and Human Resources to help resolve identity-based conflicts prior to them becoming a complaint, and works with parties in an investigation after the report is completed to identify any follow up based conflict resolution or support.

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.
- Works with parties post investigation to help teams and individuals move forward.
- Tracks protected class complaints and reports key themes to County leadership.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Serve as main point of reporting and inquiry for protected class complaints.	117	100	100	100
Outcome	Average number of days investigations completed.	125	100	100	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
<b>Program Expenses</b>	<b>2024</b>	<b>2024</b>	<b>2025</b>	<b>2025</b>
Personnel	\$1,137,617	\$0	\$1,209,146	\$0
Contractual Services	\$28,670	\$0	\$18,000	\$0
Materials & Supplies	\$109,381	\$0	\$70,051	\$0
Internal Services	\$111,918	\$0	\$97,120	\$0
<b>Total GF/non-GF</b>	<b>\$1,387,586</b>	<b>\$0</b>	<b>\$1,394,317</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$1,387,586</b>		<b>\$1,394,317</b>	
<b>Program FTE</b>	6.00	0.00	6.00	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 2024: 10040A Complaints Investigation Unit

**Department:** Overall County      **Program Contact:** Jeff Renfro  
**Program Offer Type:** Revenue/Fund Level/Tech      **Program Offer Stage:** Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

This program offer budgets a number of "fund level" transactions. These include transfers between funds, fund contingencies, and reserves.

**Program Description**

This offer includes the following cash transfers:

- General Fund to Justice Center Capital Fund (Bus Duct Replacement Project) - \$3.8 million
- General Fund to Asset Preservation Fund (Juvenile Justice Complex Security Foyer) - \$1.0 million
- General Fund to Capital Improvement Fund (Hansen Complex Deconstruction) - \$750,000
- General Fund to Information Technology Capital Fund (Public Website and Digital Services Transformation) - \$1.5 million
- General Fund to Information Technology Capital Fund (Network Access Control) - \$310,000
- General Fund to Information Technology Capital Fund (DCHS Workflow Software) - \$500,000
- General Fund to Information Technology Capital Fund (ERP Historical Data Retention) - \$1.0 million
- General Fund to Animal Services Facility Capital Fund (Animal Shelter) - \$3.1 million
- Downtown Courthouse Capital Fund to General Fund (Remaining Courthouse Resources) - \$65,000

A full list of cash transfers in the County's budget can be found in the Summaries section of Volume 1 of the Budget.

This offer accounts for the General Fund contingency, which is established at \$1.5 million. The General Fund contingency also contains \$19.6 million for a Business Income Tax reserve set at 12% of anticipated revenues.

This offer accounts for the 12% General Fund revenue reserve as described in the Financial & Budget Policies. The Risk Fund contingency (\$16.1 million) and unappropriated balance are recorded here.

Video Lottery Fund resources of \$6.5 million and contingency of \$0.7 million are recorded in this offer, while expenditures are reported in departmental program offers where they are spent.

**Performance Measures**

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	% of reserve goal met	100%	100%	100%	100%
Outcome	Moody's Bond Rating	0	0	0	0
Outcome	S&P Global Ratings	0	0	0	0

**Performance Measures Descriptions**

Change in bond rating: (0) = no change, (1) = upgraded rating, (-1) = downgraded rating. On November 17, 2017, S&P upgraded the County's rating from AA+ to AAA. Moody's currently rates the County debt as Aaa.

## Legal / Contractual Obligation

Reserve and contingency accounts reflect prudent financial management of county resources. The reserve has been established at 10% - a level that Moody's Investors Service uses as a benchmark. The goal in developing the reserve policy was to shield the County from fluctuations in revenues available to fund ongoing programs. The policy articulates the conditions under which reserves will be used and outlines a process for replenishing them should they fall below the goal. The General Fund contingency cannot be accessed unless the Board takes affirmative action to transfer it. Conditions under which the the 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	2024	2024	2025	2025
Cash Transfers	\$15,610,285	\$1,874,131	\$11,483,321	\$65,000
Unappropriated & Contingency	\$107,000,856	\$104,914,184	\$98,486,809	\$111,561,328
<b>Total GF/non-GF</b>	<b>\$122,611,141</b>	<b>\$106,788,315</b>	<b>\$109,970,130</b>	<b>\$111,626,328</b>
<b>Program Total:</b>	<b>\$229,399,456</b>		<b>\$221,596,458</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$6,350,000	\$0	\$6,508,750
Other / Miscellaneous	\$0	\$0	\$2,221	\$0
Financing Sources	\$3,672,997	\$0	\$170,382	\$0
Interest	\$0	\$2,000,000	\$0	\$3,000,000
Beginning Working Capital	\$990,465	\$107,184,310	\$3,425,421	\$112,144,726
<b>Total Revenue</b>	<b>\$4,663,462</b>	<b>\$115,534,310</b>	<b>\$3,598,024</b>	<b>\$121,653,476</b>

## Explanation of Revenues

## Significant Program Changes

Last Year this program was: FY 2024: 95000 Fund Level Transactions



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	\$7,304,542	\$0	\$7,544,879	\$0
Taxes	\$578,156,246	\$0	\$604,118,091	\$0
Other / Miscellaneous	\$14,739,608	\$0	\$15,792,867	\$0
Interest	\$1,520,000	\$0	\$8,000,000	\$0
Beginning Working Capital	\$177,815,961	\$0	\$144,997,438	\$0
<b>Total Revenue</b>	<b>\$779,536,357</b>	<b>\$0</b>	<b>\$780,453,275</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 2024: 95001 General Fund Revenues



*Photo by Motoya Nakamura/  
Multnomah County*