Fiscal Year 2027

Adopted Budget

Adopted by
Multnomah County Board of Commissioners

Volume 3: Adopted Program Offers

County Human Services
Health Department
Homeless Services Department
Library
Nondepartmental

Multnomah County

June 5, 2026

Table of Contents

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 program offers.

Department Overview

The department overview introduces the department and describes the main work of the department, its role at the County, and how that work connects to the County's Mission, Vision, and Values. An organizational chart is provided at the bottom of the page.

Budget at a Glance

This page provides visual highlights of key budget points for the department, such as the operating budget, change from prior year, total full-time equivalent positions (FTE), etc.

Mission, Vision, and Values

This section provides information on the department's mission, vision, and values. Information on the department's strategic plan or other form of department-level goals or objectives may also be included.

Diversity, Equity, and Inclusion

This section describes the department's mission, vision, and values specific to diversity, equity, and inclusion efforts. It also explains how the Workforce Equity Strategic Plan's goals and action items are being supported and prioritized within the department and how the department inclusively leads with race both internally with staff and externally with clients and community. It may also describe how the department incorporated an equity lens in budgetary decision-making.

Budget Overview

This section summarizes the department's policy decisions and budget.

Division Narrative

This section begins with a summary of the division's purpose, scope, and key functions. There is a Significant Division Changes section where departments note recent operational changes at the division level, primarily focused on changes from the prior fiscal year, including: reorganizations, service delivery model changes, new programs, and programs that were eliminated. Each division section also includes some budget graphics and a table of division program offers, followed by the division's program offers. As part of the County's movement towards an outcomes-based budgeting approach, there is a Division Outcomes subsection that describes what the community will experience, receive, or understand as a result of the division's activities, services, or processes. This subsection will include key performance indicators, accompanying data, equity considerations, and a list of program offers that contribute to each outcome.

Understanding Program Offers

A program offer is a policy document that combines information such as program descriptions, equity statements, budget summaries, and performance data for a given set of services. All County functions – from operating programs to the General Fund contingency account – request funding 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 provided in numerical order within each division.

Anatomy of a Program Offer

Program offer documents explain all aspects of the program through the following sections: program description, equity statement, performance measures, and revenue/expense detail.

Program Description

A good program description should:

- Identify the issue the program is addressing,
- Briefly describe what the program does and who it serves, and
- Be easy to understand for someone unfamiliar with the program.

Equity Statement

The Equity Statement ensures County resources are allocated to actively address systemic disparities and promote fair access to services, especially for populations historically underserved or marginalized. It is a concise, direct summary of a program's intentional contribution to advancing equity.

Performance Measures

There is a table of performance measures in each program offer. In general, a program offer will have two output measures, which typically report the number of units produced or services provided. The table describes the measures and shows the previous year's results, current year's estimated results, and upcoming year's target results. Tracking these measures over time helps readers assess a program offer's performance.

Revenue/Expense Detail

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, materials and supplies, internal services, contractual services, capital, cash transfers, and debt service. The table also provides costs and revenues from the prior fiscal year's crosswalked Adopted budget for comparison. The crosswalked budget maps the prior year's Adopted budget to the current year's program offers. This provides a more visible year-over-year view to those reading program offers and facilitates conversations around program changes from the prior year. Under certain circumstances, such as when a program was discontinued, the history is not crosswalked into this budget. Therefore, the prior year's budget amounts in the program offers for each department may not add up to the total Adopted budget from the prior year for that department.

Program Characteristics

Program offer documents also include information on the type of funding for the program. 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.

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 spent 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.

Backfill Other Funds

Backfill program offers use General Fund to pay for a program that was funded by someone else in the previous fiscal year, e.g. grant, State, or Federal funding. This could occur when grant funding goes away entirely and the department wants to continue the program with General Fund or when only a portion of the grant goes away and the department wants to continue the program at the same level by supplementing with General Fund dollars.

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. A letter at the end of a program offer number indicates a scaled program offer. 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.
- Provide levels of services for a program. For example, an Alcohol and Drug (A&D) Treatment program could be scaled to offer 100, 150, or 175 beds.

Scaled offers have a letter at the end of their program offer numbers (e.g. 60330A and 60330B). In the above A&D example, the program would be scaled as follows:

- The A base offer = 100 beds
- The B offer = 50 additional beds
- The C offer = the final 25 beds

If decision-makers fund all three program offers, the total budget will include 175 beds.

Total Budget vs. Operating Budget

A department's total budget is its legal budget. 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. Some departments' budgets do not contain any unappropriated balances, contingencies, or cash transfers, so their operating budget will be the same as their total budget.

Online Resources

The FY 2027 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).

Individual program offers are available by searching the FY 2027 Program Offers website.

Additional materials that were provided to departments during budget development, such as the FY 2027 Budgeting for Results guide and the FY 2027 Program Offer Writer's Guide, can be found on the FY 2027 Budget Manual, Forms, Calendars, and Other Resources website.

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Department Overview

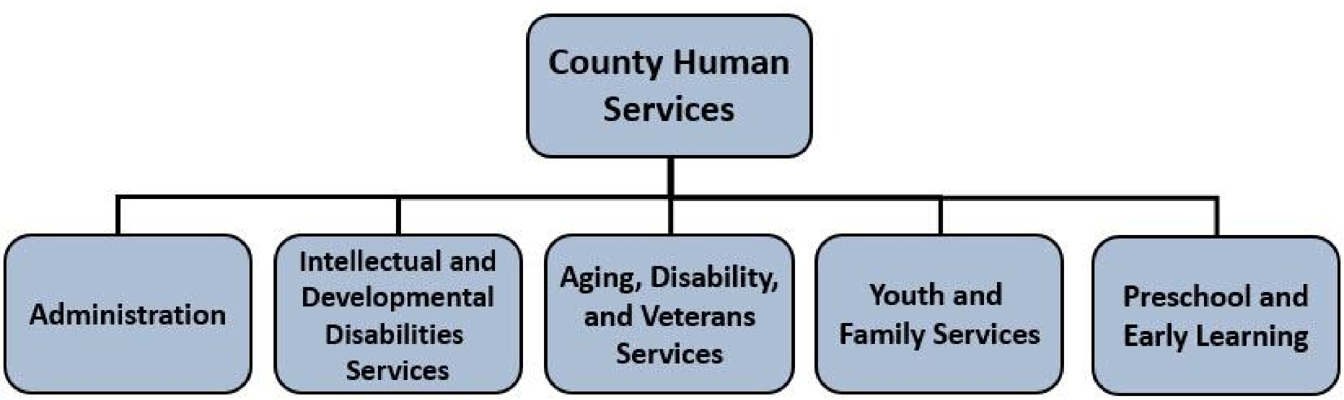
The Department of County Human Services improves the health, safety, and economic independence of the Multnomah County community through programs that address economic stability, housing security, access to food and healthcare, and protection from abuse and neglect. We support residents across their lifespan, including youth and families, veterans, older adults, disabled individuals, survivors of domestic violence, and others who face barriers to stability.

In collaboration with our community partners and state, federal, and local government agencies, we support long-term stability and independence, with a focus on preventing homelessness through safety net services. By meeting people where they are at—at home, on site, in the community, or through mobile outreach—our services are responsive to meet the immediate needs of our community.

In **childhood**, DCHS supports people by improving educational access and support for youth, offering coaching for early childhood education providers, providing high-quality preschool seats for three and four-year-olds, and ensuring youth experiencing food insecurity have access to food assistance.

In **adulthood**, DCHS supports people with disabilities who want to live in their own homes, helps people stay in affordable homes, and provides safety and support for survivors of domestic and sexual violence.

DCHS supports **older adults** through connections with state and federal programs that keep older adults healthy and fed, by helping veterans navigate benefits they may be eligible for, and by protecting older or disabled adults who are being abused.



$558.9 million

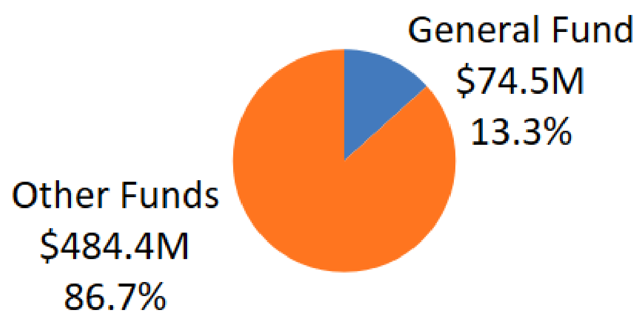
Total Adopted Operating Budget

Excludes $560.8 million in cash transfers, contingencies, and unappropriated balances

1,008.60 FTE

Total Adopted Staffing

27.10 FTE
Increase from
FY 2026 Adopted



$116.1 million

All Funds (Operating) Increase from
FY 2026 Adopted

26.2% increase

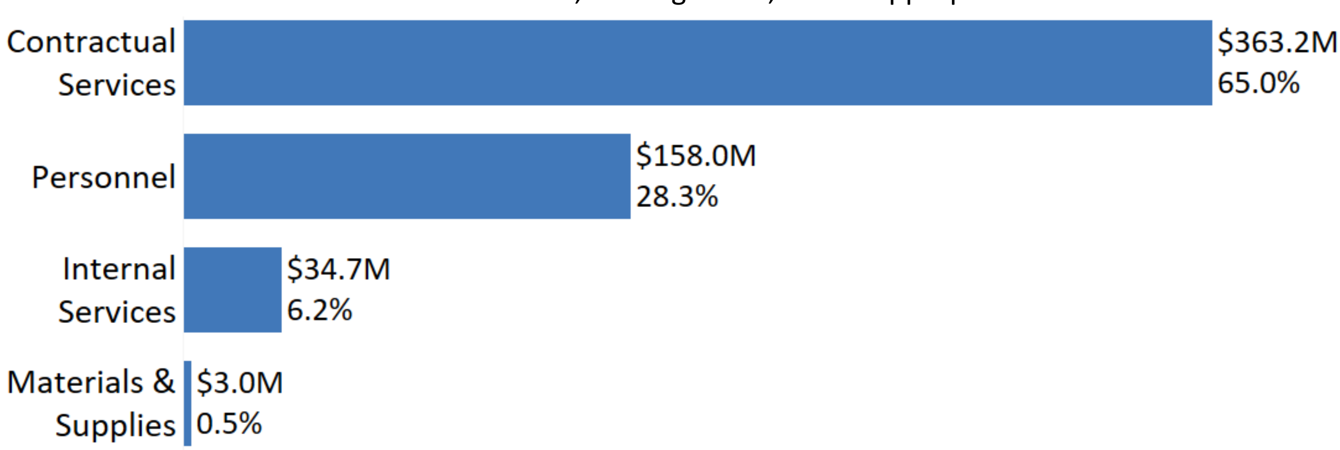
General Fund

$2.5 million
New **Ongoing** Investments

$2.0 million
One-Time-Only Investments

Operating Budget by Category - $558.9 million

Does not include cash transfers, contingencies, and unappropriated balances



Mission, Vision, and Values

The Department of County Human Services (DCHS) believes every person, at every stage of life, should have equitable opportunities to thrive.

The Department of Community Human Services (DCHS) developed the Fiscal Year (FY) 2027 budget framework by allocating resources in alignment with Multnomah County's core values and priorities. This approach ensures that budget decisions support equitable outcomes for the community while preserving essential services and fostering long-term sustainability.

The following principles guided the allocation of resources for the upcoming fiscal year:

An Equity-First Approach: Applying the Equity and Empowerment Lens outlined in Multnomah County's Workforce Equity Strategic Plan (WESP) as a foundation for all budget decisions, centering racial justice and addressing systemic barriers.

Service Preservation: Preserving core service capacity, long-term sustainability, and maintaining safety net services for clients, families, and community-based organizations.

Fiscal Strategy: Minimizing reductions to State/Federal Match funding as much as possible while preserving staffing infrastructure and fostering culturally specific programs.

A Key Investment Focus: Supporting critical initiatives related to preventing evictions and homelessness, maintaining economic stability for youth and families, and providing support for immigrants and refugees.

Our Values and Outcomes: Prioritizing investments that deliver the most meaningful outcomes, such as improving client access, strengthening service integration, promoting healthy aging, increasing housing stability, and improving education access. We also prioritize retaining a diverse and skilled workforce by preserving positions and advancing the goal of being an "Employer of Choice."

Diversity, Equity, and Inclusion

County Alignment

DCHS applies the Equity and Empowerment Lens embedded in Multnomah County's Workforce Equity Strategic Plan (WESP) to center equity, diversity, and inclusion across all aspects of our work. Achieving equitable outcomes for marginalized and impacted communities across diverse cultures, races, backgrounds, and intersectional identities is at the core of our work.

Service to Diverse and Marginalized Populations

Our Aging, Disability & Veterans Services Division (ADVSD) contracts with 16 community-based organizations (CBOs) to provide Older Americans Act (OAA) services. Twelve (or 75%) of these CBOs are culturally specific organizations located in Multnomah County.

Our Intellectual & Developmental Disabilities Services Division (IDDSD) provides direct services and written materials in the language spoken by the individual, and meets at locations convenient for the individual and their family. Staff with specific knowledge, skills, and abilities (KSAs) also increase service access for ethnic, underserved, and marginalized communities through specialized outreach and service coordination.

The Youth and Family Services (YFS) division is focused on closing outcome gaps through three primary strategies: designing culturally responsive services, expanding outreach to underserved communities, and actively working to address systemic barriers. To achieve this, the division maintains 65 distinct, culturally specific contract areas and partners with 13 different agencies to deliver these specialized services.

Preschool for All is reaching many of the families who face the steepest barriers to early learning, and our work to promote equity and access must remain central as we expand. 75% of Family Child Care providers allocated seats for next school year identify as Black, Indigenous, and People of Color, and 65% of enrolled children identified as Black, Indigenous, or Children of Color. Furthermore, 30% of children enrolled in Preschool for All speak a language other than English in their home, with 61 languages represented.

Leading with Race in the Workplace

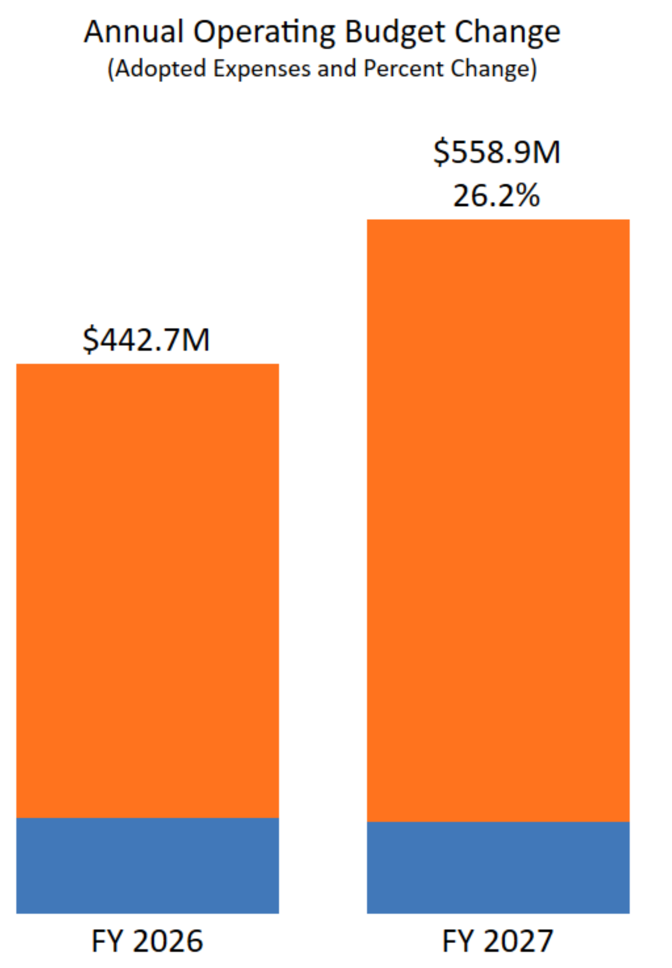
DCHS advances the goals and priorities of the WESP through our department's Diversity, Equity, and Social Justice Committee (DESJC) by focusing on advancing diversity, equity, and inclusion practices and promoting safety, trust, and belonging for staff. In the 2025 Countywide Equity Audit, DCHS earned above-average ratings in key areas, including equity infrastructure, staff experience, and implementing equity training and initiatives. The DCHS Equity Team works in partnership with division directors and divisional diversity teams to support the integration of WESP initiatives into daily operations. The team provides technical assistance and training, and evaluates outcomes to inform continuous improvement.

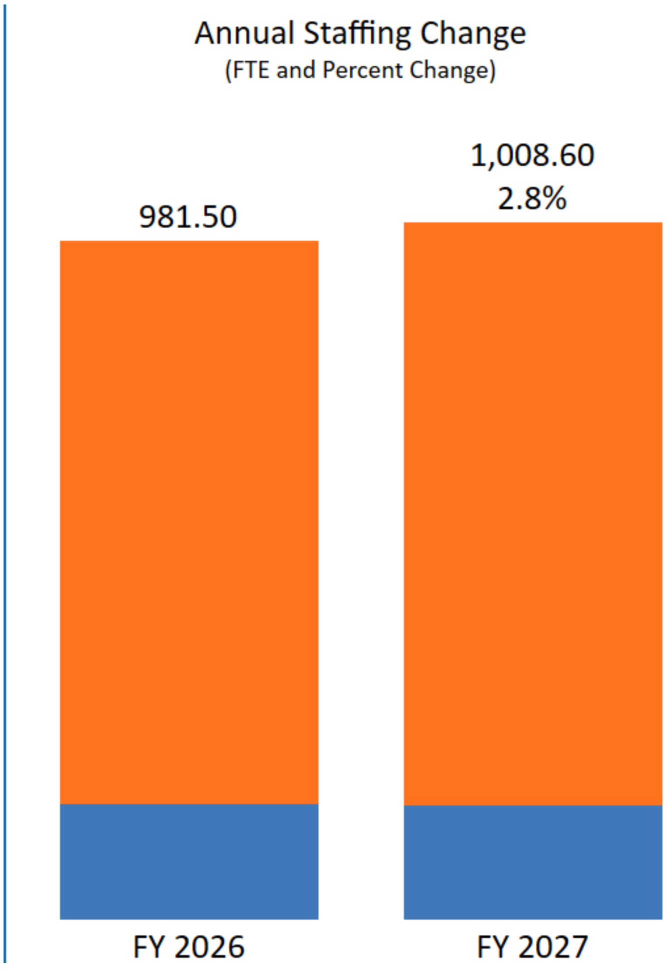
Budget Decision-Making

DCHS centers racial justice and equity by applying a structured equity, diversity, and inclusion lens to programmatic and funding decisions. This framework supports leadership teams in identifying and addressing systemic racial barriers and disparities when developing program offers. Each year, DCHS's Equity & Inclusion Manager collaborates with the Department Director, Human Resources Manager, and Division Directors to review program offers and guide decision-making through targeted and equity-focused questions.

Budget Overview

The FY 2027 Department of County Human Services (DCHS) operating budget is $558.9 million, a $116.1 million (26.2%) increase from the FY 2026 Adopted budget. These amounts exclude cash transfers, contingencies, and unappropriated balances. The General Fund accounts for $74.5 million (13.3%) of the budget, and General Fund expenses decreased by $2.5 million (-3.2%). Other Funds (including Video Lottery) increased by $118.6 million (32.4%).





A full list of General Fund additions and reductions can be found on the following pages.

- General Fund reductions include a decrease in the department's indirect rate being reduced from the FY 2026 rate of 10.22% to 7.20% in FY 2027, resulting in $2.1 million in General Fund reductions the Department of County Human Services made due to a reduction in indirect revenue.
- One-time-only General Fund investments include $1.2 million for SUN Community Schools. This funding restores the program to its current service level for FY 2027, preventing the closure of

SUN Services at nine Portland Public School locations and preserving access for 2,000 children (25145B).

The increase in Other Funds is primarily in the Preschool for All Fund. 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 2027 will be the fifth year of preschool seats, and will grow to 7,500 seats. The budget totals $833.0 million and 71.00 FTE in the PEL Division. Of this amount, $541.9 million is unappropriated balance and $18.9 million is contingency, leaving a balance of $272.3 million for direct programming in DCHS’s operating budget. The operating budget increased by $109.3 million (67.1%) and 17.00 FTE, compared to the FY 2026 budget at $163.0 million and 54.00 FTE.

DCHS’s budget also includes $208.8 million in the Federal/State Fund, which increased by $13.7 million (7.0%) from the FY 2026 Adopted budget. And $3.0 million in the Supportive Housing Services Fund, which decreased by $3.1 million (-51.0%).

The following tables show the new or expanded ongoing and one-time-only programs, as well as reductions and backfill. These tables, along with information on DCHS's reallocations, 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 Additions Ongoing	General Fund Additions OTO	Total Additions	FTE Addition
25004	Immigrant Family Resilience and Stability Program	0	450,000	450,000	0.00
25131B	YFS - Peer Navigators	15,000	60,000	75,000	0.00
25133B	YFS - Eviction Prevention	2,406,000	0	2,406,000	3.50
25133D	Medicaid 1115 Health Related Social Needs Rapid Rehousing	0	200,000	200,000	0.00
25134	YFS - Fair Housing Testing in East Multnomah County	50,000	78,000	128,000	0.00
SUN Community Schools were restored to Current Service Level however they were funded with one-time-only General Fund in FY 2027					
25145B	YFS - SUN Community Schools Restoration	0	1,200,000	1,200,000	0.00
Total		**2,471,000**	**1,988,000**	**4,459,000**	**3.50**

Backfill

Prog. #	Program Offer Name and Description	GF Backfill Ongoing	GF Backfill OTO	Total Backfill	FTE Backfill
25029A	ADVSD LTSS Nursing Homes and Homeless Services (Medicaid) - 1.00 FTE Housing Navigator	74,580	0	74,580	1.00
25131C	YFS - Eviction Prevention Support - Legal Services	0	210,164	210,164	0.00
Total		**74,580**	**210,164**	**284,744**	**1.00**

General Fund Reductions

This table reflects $1.3 million of reductions taken due to Countywide budget reductions.

Prog. #	Program Offer Name and Description	General Fund Reductions	FTE Red.
25010	IDDSD Administration & Support - Match Project	(98,826)	0.00
25036	ADVSD Safety Net Program - Direct Client Assistance	(100,000)	0.00
25139	YFS - Multnomah Stability Initiative (MSI) - Regional Services	(1,075,064)	0.00
25999	DCHS Vacancy Hiring Delay Savings	(55,100)	0.00
Total		**(1,328,990)**	**0.00**

This table reflects $2.1 million of General Fund reductions and $1.3 million in Other Fund reductions the Department of County Human Services made due to a reduction in indirect revenue.

Prog. #	Program Offer Name	General Fund Indirect Reductions	Other Fund Reductions	Total Reductions	FTE Red.
25002	DCHS Business Services	(142,764)	0	(142,764)	(1.00)
25012	IDDSD Services for Adults	(281,832)	0	(281,832)	0.00
25013	IDDSD Services for Children & Young Adults	(161,416)	0	(161,416)	0.00
Multiple	General Fund Match Project across multiple Intellectual and Developmental Disabilities Services Division (IDDSD) programs.	(87,889)	0	(87,889)	0.00
25022	ADVSD Adult Care Home Program	(124,365)	(318,885)	(443,250)	(2.00
25023	ADVSD Long Term Services & Supports	(61,403)	(157,443)	(218,846)	(1.00)
25024	ADVSD Adult Protective Services	(96,904)	(248,472)	(345,376)	(2.00)
25027	ADVSD Administration	(108,742)	(147,951)	(256,693)	(1.00)
25028	ADVSD Multi-Disciplinary Team	(147,601)	(148,944)	(296,545)	(1.00)
25029A	ADVSD LTSS Nursing Homes and Homeless Services (Medicaid)	(57,370)	(147,103)	(204,473)	(1.00)
25035	ADVSD Case Management & In-Home Services (Community Services)	(237,242)	(46,768)	(284,010)	(1.00)

Prog. #	Program Offer Name	General Fund Indirect Reductions	Other Fund Reductions	Total Reductions	FTE Red.
25036	ADVSD Safety Net Program	(79,334)	0	(79,334)	0.00
25039	ADVSD Family Caregiver Program	(33,553)	0	(33,553)	0.00
Multiple	Materials & Supplies (M&S) across Multiple Aging, Disability, and Veterans Services Division (ADVSD) programs.	(108,926)	(116,495)	(225,421)	0.00
25044	YFS - Domestic and Sexual Violence Coordination	(36,706)	0	(36,706)	(0.20)
25118	Youth & Family Services Administration	(129,161)	0	(129,161)	(1.00)
25160[1]	YFS - Data and Evaluation Services	(237,774)	0	(237,774)	(1.00)
Total		**(2,132,982)**	**(1,332,061)**	**(3,465,043)**	**(12.20)**

[1] Program centralized and moved to the DCHS Administration Division (25009)

Additions - Other Funds

Prog. #	Program Offer Name	SHS Additions	Other Funds Additions	Total Additions	FTE Add.
25010[1]	IDDSD Administration & Support	0	1,295,578	1,295,578	7.00
25012[1]	IDDSD Services for Adults	0	1,650,309	1,650,309	10.50
25013[1]	IDDSD Services for Children and Young Adults	0	965,965	965,965	6.00
25023[1,2]	ADVSD Long Term Services & Supports	0	3,555,452	3,555,452	(1.90)
25038[1]	ADVSD Community Participation and Program Operations	0	1,735,614	1,735,614	6.50
25133B	YFS - Eviction Prevention	1,192,784	0	1,192,784	0.50
25133C	Medicaid 1115 Health Related Social Needs Housing Waiver	0	12,325,088	12,325,088	0.00
25133E	YFS - Eviction Prevention In Reach Team	565,000	0	565,000	0.00
25133F	YFS - Eviction Prevention City of Portland Funds	0	4,250,000	4,250,000	0.00
Total		**1,757,784**	**25,778,006**	**27,535,790**	**28.60**

[1] Increase also included as part of the FY 2026 State/Federal Rebalance process.

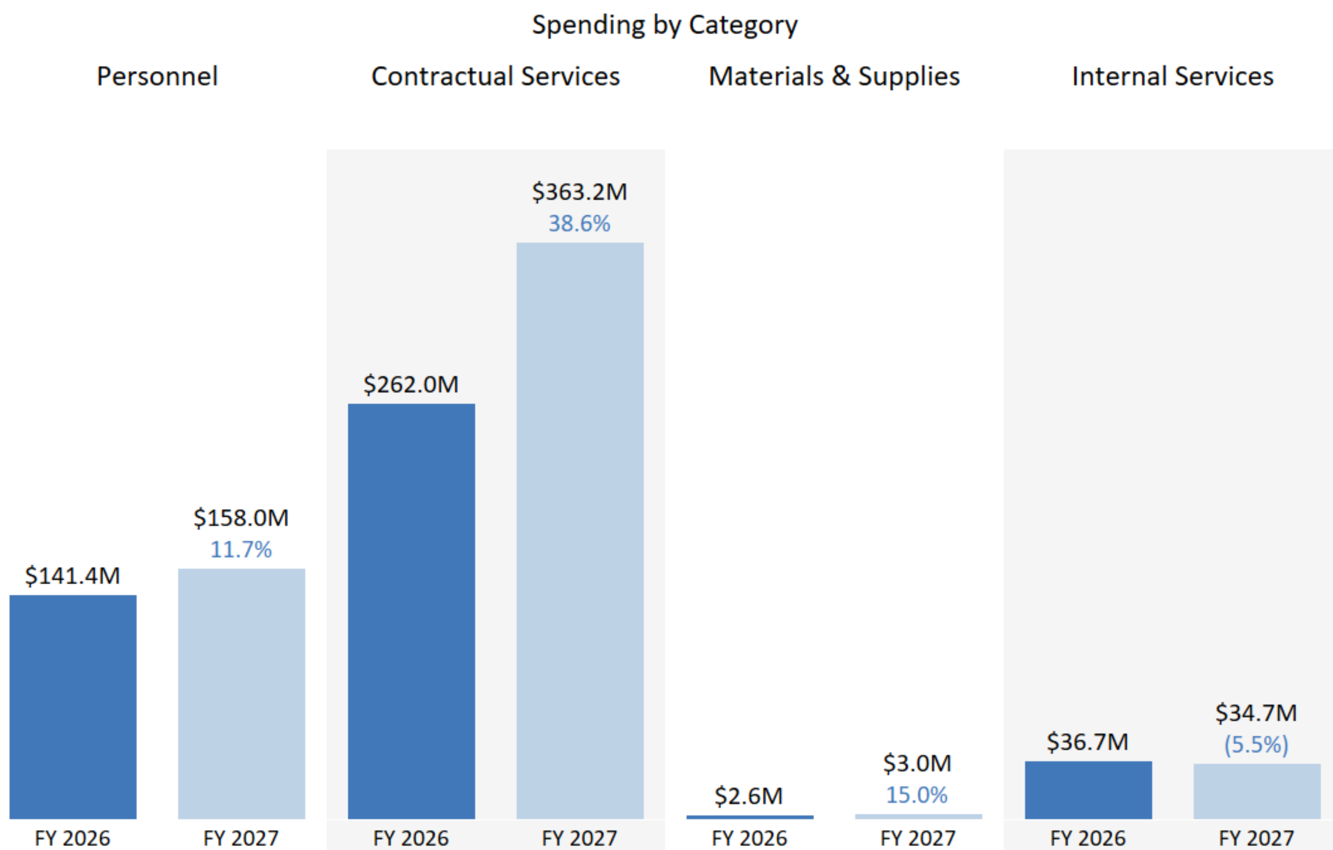
[2] Decrease in FTE due to a reduction in General Fund available for match.

Reductions - Other Funds

Prog. #	Program Offer Name	SHS Reductions	Other Funds Reductions	Total Reductions	FTE Red.
25012[1]	IDDSD Services for Adults	(172,096)	0	(172,096)	0.00
25025	ADVSD Veterans Services	0	(2,089,005)	(2,089,005)	0.00
25029A[1]	ADVSD LTSS Nursing Homes and Homeless Services (Medicaid)	(124,713)	0	(124,713)	0.00
25038	ADVSD Community Participation and Program Operations	0	(191,367)	(191,367)	(1.00)
25050	YFS - Gateway Center	(461,548)	0	(461,548)	0.00
25131C	YFS - Eviction Prevention Support	(210,164)	0	(210,164)	0.00
Total		**(968,521)**	**(2,280,372)**	**(3,248,893)**	**(1.00)**

[1] DCHS reallocated General Fund in order to maintain these services in FY 2027.

The chart below provides a breakdown of the budget's expense categories from FY 2026 to FY 2027. Contractual Services is the largest component of the DCHS budget and it grew the most between FY 2026 and FY 2027. The growth is primarily in the Preschool and Early Learning Division as it increased by $105.4 million (69.4%) in Contractual Services.



The table below details the changes in expense categories from FY 2025 Actual to FY 2027 Adopted. The FY 2027 contingency and unappropriated amounts are in the Preschool for All Fund and include Contingency at $18.9 million (25200B), Reserves at $28.4 million (25200B) and Dedicated Savings at $513.5 million (25200C).

Category	FY 2025 Actual	FY 2026 Current Estimate	FY 2026 Adopted Budget	FY 2027 Adopted Budget	Difference
Personnel Services	134,343,189	143,726,248	141,423,720	158,014,452	16,590,732
Contractual Services	190,276,512	250,570,060	261,991,209	363,171,414	101,180,205
Materials & Supplies	3,790,890	2,916,387	2,583,262	2,970,491	387,229
Internal Services	34,138,193	34,363,771	36,732,171	34,717,087	(2,015,084)
Total Operating Budget	**362,548,784**	**431,576,466**	**442,730,362**	**558,873,444**	**116,143,082**
Contingency (All Funds)*	N/A	N/A	17,500,000	18,900,000	1,400,000
Internal Cash Transfers	0	0	0	0	0
Unappropriated (Reserves)*	N/A	N/A	524,756,817	541,878,202	17,121,385
Total Budget	**362,548,784**	**431,576,466**	**984,987,179**	**1,119,651,646**	**134,664,467**
FTE	990.75	992.38	981.50	1,008.60	27.10

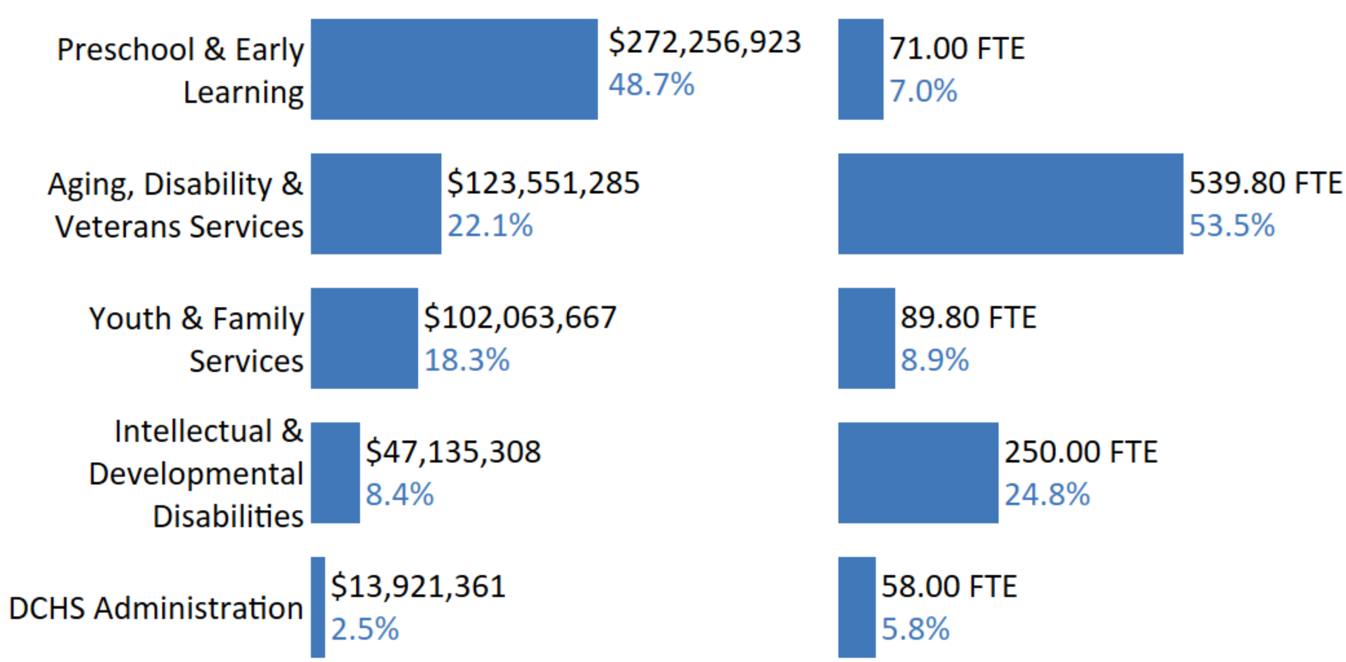
* In any given fiscal year, there is no spending of unappropriated balance; if contingency is spent, it will be reflected in the Operating expenditures.

Total Budget by Division

Division Name	General Fund	Other Funds	Total Division Cost	Total FTE
Administration	13,694,946	226,415	13,921,361	58.00
Intellectual and Developmental Disabilities Services	3,864,800	43,270,508	47,135,308	250.00
Aging, Disability, and Veterans Services	15,513,015	108,038,270	123,551,285	539.80
Youth and Family Services	41,462,143	60,601,524	102,063,667	89.80
Preschool and Early Learning	0	833,035,125	833,035,125	71.00
Vacancy Hiring Delay Savings	(55,100)	0	(55,100)	0.00
Total County Human Services	**74,479,804**	**1,045,171,842**	**1,119,651,646**	**1,008.60**

Includes cash transfers, contingencies, and unappropriated balances.

The graphic below does not include ($55,100) vacancy hiring delay savings; see Budget Director's Message for details.



This graphic excludes $560.8 million in 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, including cash transfers, contingencies, and unappropriated balances. The individual programs follow, grouped by division.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
Administration						
25000	DCHS Director's Office		3,685,623	0	3,685,623	13.00
25001	DCHS Human Resources		2,280,084	0	2,280,084	10.00
25002	DCHS Business Services		5,540,816	0	5,540,816	26.00
25004	Immigrant Family Resilience and Stability Program	X	450,000	0	450,000	0.00
25009	Data and Evaluation Services		1,738,423	226,415	1,964,838	9.00
	Total Administration		**13,694,946**	**226,415**	**13,921,361**	**58.00**
Intellectual and Developmental Disabilities Services						
25010	IDDSD Administration & Support		619,626	6,702,745	7,322,371	38.00
25011	IDDSD Budget and Operations Support		650,855	7,046,934	7,697,789	35.00
25012	IDDSD Services for Adults		1,291,758	10,964,662	12,256,420	69.00
25013	IDDSD Services for Children and Young Adults		1,286,030	10,179,823	11,465,853	66.00
25014	IDDSD Abuse Investigations		3,571	5,029,577	5,033,148	26.00
25016	IDDSD Eligibility & Intake Services		12,960	3,346,767	3,359,727	16.00
Total Intellectual and Developmental Disabilities Services			**3,864,800**	**43,270,508**	**47,135,308**	**250.00**
Aging, Disability, and Veterans Services						
25022	Adult Care Home Program		80,557	6,325,033	6,405,590	29.00

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
25023	Long Term Services & Supports (Medicaid)		4,306,254	56,164,940	60,471,194	312.00
25024	Adult Protective Services		160,709	10,966,273	11,126,982	54.88
25025	Veterans Services		552,723	8,371,488	8,924,211	8.00
25026	Public Guardian/Conservator		2,137,185	0	2,137,185	11.00
25027	ADVSD Administration		456,863	2,934,643	3,391,506	13.00
25028	Multi-Disciplinary Team		285,898	648,709	934,607	4.12
25029A	LTSS Nursing Homes and Homeless Services (Medicaid)		794,315	7,687,197	8,481,512	40.00
25029B	Long Term Care for Homeless Individuals with Severe and Persistent Mental Illness		500,696	0	500,696	3.00
25032	Outreach, Information, Referral & Assistance		2,530,110	4,143,922	6,674,032	27.95
25033	Nutrition Program		383,638	1,956,412	2,340,050	0.00
25034	Health Promotion		72,937	346,837	419,774	1.00
25035	Case Management & In-Home Services (Community Services)		1,060,428	1,970,764	3,031,192	9.13
25036	Safety Net Program		725,172	181,050	906,222	2.00
25037	Transportation Services		147,882	2,125,651	2,273,533	0.75
25038	Community Participation and Program Operations		1,147,625	3,975,264	5,122,889	22.67
25039	Family Caregiver Program		170,023	240,087	410,110	1.30
	Total Aging, Disability, and Veterans Services		**15,513,015**	**108,038,270**	**123,551,285**	**539.80**

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
Youth and Family Services						
25041	Domestic Violence Crisis Services		494,835	0	494,835	0.00
25044	Domestic and Sexual Violence Coordination		840,412	81,996	922,408	3.80
25046	Domestic Violence Legal Services		232,125	35,000	267,125	0.00
25047	Domestic Violence Crisis Response Unit		1,539,268	363,091	1,902,359	11.00
25048	Culturally Specific and Underserved Domestic & Sexual Violence Services		1,024,102	0	1,024,102	0.00
25049	Sexual Assault Services		954,172	0	954,172	1.00
25050	Gateway Center		1,133,595	1,262,444	2,396,039	8.00
25118	YFS Administration		2,469,083	0	2,469,083	11.00
25119	Energy Assistance		157,193	10,944,832	11,102,025	6.50
25121	Weatherization		0	7,922,686	7,922,686	13.50
25130	Family Unification Program		685,916	300,000	985,916	0.00
25131A	Legal Services & Supports		349,636	0	349,636	0.00
25131B	Peer Navigators		508,272	0	508,272	0.00
25131C	Eviction Prevention Support		338,801	0	338,801	0.00
25131D*	Record & Fee Expungement Program (Project Reset)		0	428,250	428,250	0.00
25131E	Eviction Prevention: In Courtroom Support		255,486	0	255,486	0.00
25133A	Housing Stabilization & Eviction Prevention		1,719,698	4,337,864	6,057,562	5.50
25133B	Eviction Prevention		2,406,000	1,192,784	3,598,784	4.00

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
25133C	Medicaid 1115 Health Related Social Needs Housing Waiver	X	0	22,325,088	22,325,088	0.00
25133D	Medicaid 1115 Rapid Rehousing	X	200,000	0	200,000	0.00
25133E	Eviction Prevention In Reach Team	X	0	565,000	565,000	0.00
25133F	Eviction Prevention City of Portland Funding	X	0	4,250,000	4,250,000	0.00
25134	Fair Housing Testing in East Multnomah County		128,000	0	128,000	0.00
25135	Sex Trafficked Youth Services		1,101,967	0	1,101,967	0.00
25136	Culturally Specific Navigation Services for Immigrant Families		318,750	0	318,750	0.00
25138	Youth Stability & Homelessness Prevention Services		1,540,116	0	1,540,116	0.00
25139	Multnomah Stability Initiative (MSI)		2,541,837	927,025	3,468,862	2.00
25140	Community Development in East Multnomah County		174,082	363,210	537,292	1.00
25141	Supplemental Nutrition Assistance Program (SNAP) Outreach		170,846	323,944	494,790	2.00
25145A	SUN Community Schools		8,935,185	2,926,016	11,861,201	4.00
25145B	SUN Community Schools Restoration	X	1,200,000	0	1,200,000	0.00
25147	Child & Family Hunger Relief		798,425	0	798,425	1.00

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
25149	SUN Youth Advocacy Program		4,367,787	0	4,367,787	0.00
25151	SUN Parent & Child Development Services		1,375,059	456,248	1,831,307	0.50
25152	Early Learning Family Engagement and Kindergarten Transition		492,636	1,238,486	1,731,122	1.00
25155	Sexual & Gender Minority Youth Services		419,334	0	419,334	0.00
25156	Bienestar Social Services		2,589,525	357,560	2,947,085	14.00
Total Youth and Family Services			**41,462,143**	**60,601,524**	**102,063,667**	**89.80**
Preschool and Early Learning						
25200A	PEL - Administration & System Support		0	2,285,588	2,285,588	7.00
25200B	PEL- Contingency & Reserves	X	0	47,250,000	47,250,000	0.00
25200C	PEL - Dedicated Savings	X	0	513,528,202	513,528,202	0.00
25201	PEL - Division Administration & System Support		0	7,860,498	7,860,498	34.00
25202	Preschool Access: Family & Provider Navigation		0	2,123,612	2,123,612	3.00
25203A	Preschool for All Facilities Fund		0	15,184,409	15,184,409	1.00
25203B	Preschool for All Facilities Fund City Permit Navigator	X	0	287,000	287,000	0.00
25204	Program Quality & Provider Capacity Building		0	12,579,584	12,579,584	1.00
25205A	Preschool for All Sites		0	204,419,728	204,419,728	24.00

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
25205B	Preschool for All Clinical Supervision	X	0	198,812	198,812	0.00
25206	Early Educator Workforce Development		0	7,247,072	7,247,072	1.00
25207	Preschool for All Infant Toddler Stabilization		0	20,070,620	20,070,620	0.00
Total Preschool and Early Learning			**0**	**833,035,125**	**833,035,125**	**71.00**
Vacancy Hiring Delay Savings						
25999	DCHS Vacancy Hiring Delay Savings	X	(55,100)	0	(55,100)	0.00
Total Vacancy Hiring Delay Savings			**(55,100)**	**0**	**(55,100)**	**0.00**
Total County Human Services			**74,479,804**	**1,045,171,842**	**1,119,651,646**	**1,008.60**

*Other Funds are Video Lottery Fund

Division:

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

Program Description

This program represents the expected General Fund savings from a hiring delay based on the estimated savings for the first quarter of FY 2027. However, departments have the entire fiscal year to generate the savings.

The calculations of the vacancies excluded public safety (Sheriff's Office, Department of Community Justice, Corrections Health, and District Attorney's Office), positions used for Project Save, and positions leveraging Other Funds or fees. In addition, a 10% contingency was added to the total savings to account for changes.

Equity Statement

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	($55,100)	$0
Total GF/non-GF	**$0**	**$0**	**($55,100)**	**$0**
Total Expenses:	**$0**		**($55,100)**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target

Administration

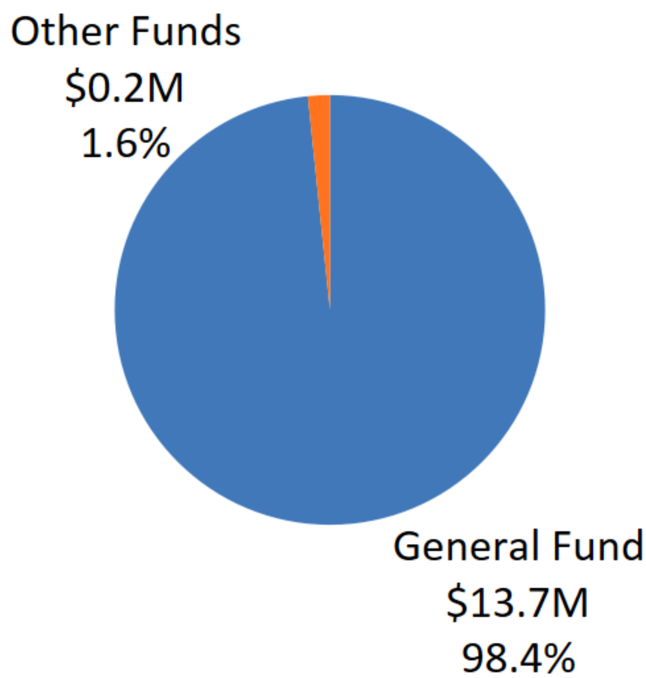
$13.9 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

58.00 FTE

(full time equivalent)



DCHS's Administration Division includes the department's executive leadership and support teams responsible for advancing the department's vision, strategic planning, and quality of services.

The Director's Office collaborates with elected leaders, affected parties, community partners, and staff to provide high-quality and equitable services. The leadership team oversees all four divisions and manages programs funded by the Supportive Housing Services (SHS) funds. The office is responsible for the following key areas:

- **Strategic Leadership:** Guiding racial equity, trauma-informed practices, and long-term planning.
- **Operations & Resources:** Managing public funds, facility operations, information technology, and communications.
- **Performance & Safety:** Ensuring continuous quality improvement, emergency preparedness (ESF-6), and coordinating mass shelter planning in response to climate-related and severe weather emergencies.
- **Workforce Management:** Supporting and overseeing a diverse, skilled team of employees.

Human Resource leads recruitments and hiring, addresses retention and workforce planning, and manages training, employee performance, and labor relations.

Business Services manages the department's financial and operational functions, including budget development and oversight, accounts receivable and payable, purchasing, grant management, procurement, and contracting. The unit ensures compliance with all county procurement and contracting policies.

Significant Division Changes

Data Team Transition: Moving the Data and Evaluation Services Team from the Youth and Family Services Division (program Data and Evaluation Services (25160) in FY 2026) to the Administration Division (program Data and Evaluation Services (25009) in FY 2027). Moving this work and the 9.00 FTE to Administration will centralize data, evaluation, IT, and strategic plan metrics, improve transparency, strengthen outcome tracking, and advance continuous quality improvement across the department. Contractual services are reduced by $91,193 and eliminates $146,581 in funding for a 1.00 FTE Data Analyst. This role analyzes retention rates for emergency rent assistance and maintains over 25 complex client tracking systems and transaction logs.

Immigrant Family Resilience and Stability (25004): Planning and operations that support arriving immigrant and asylum seeking families with children in accessing emergency shelter and housing in Multnomah County. In partnership with community organizations, Bienestar de la Familia and the State, through December 2025, DCHS has supported 273 newcomer families in hotel shelters and 94 newcomer families in accessing permanent housing. Due to federal policy changes, the need has changed to providing direct client assistance for immigrant and refugee families who are already living here. The program focuses on direct client and housing assistance to bolster family resilience against rising challenges such as increased enforcement and reduced access to social services. To further support immigrant families, we have expanded funding for legal services and community-led immigration initiatives, strengthening the collective safety net. In FY 2027, this program aims to serve an additional 130 families.

Reduction in Supportive Housing Services (SHS) Funds: The Administration Division manages the Regional Long-Term Rent Assistance (RLRA) Permanent Supportive Housing programs for DCHS. Supportive Housing Services (SHS) funds RLRA and operates across all department divisions, with the exception of the Preschool & Early Learning Division. Department-wide, DCHS's budget is decreased by $3.1 million or 51.0 % in SHS funding which will decrease housing stability services for vulnerable populations, particularly older adults and domestic violence survivors. DCHS reallocated General Fund to cover two of the SHS reductions; 1) $161,169 to maintain 1.00 FTE Program Specialist focused on housing in IDDSD (25012) and 2) $100,000 in direct client assistance for the Homeless Mobile Intake Team (HMIT) in ADVSD (25029A). $1.2 million in SHS funding was added for eviction prevention (25133B).

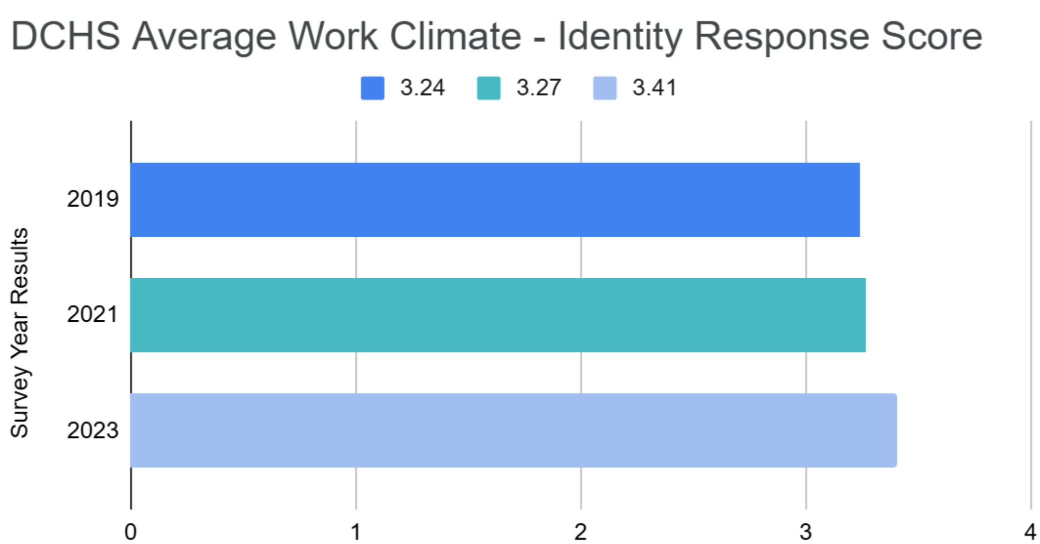
Emergency Operations Center and Unified Command: DCHS plays a leadership role in the County's coordinated response to federal actions, serving in the Emergency Operations Center (EOC) Unified Command. This team has primarily responded to severe weather emergencies and responding to federal policy emergencies is a significant scope change. The coordinated response addresses three key impacts: increased ICE activity requiring emergency hoteling and support for immigrant communities; possible loss or delay of food/safety net benefits (for example, SNAP); and wider community impacts. The department also engages in strategic and planning functions, such as the DCHS Federal Impacts Workgroup, and ensures all planning considers access for people from vulnerable communities, in addition to internal efforts like staff training on responding to immigration enforcement.

Administration Outcomes

1. DCHS has a high-functioning, equitable workforce through effective recruitment, retention, and development strategies.

Key Performance Indicator (KPI) 1.1: Average score for "Employee Survey Work Climate – Identity"

KPI 1.1 Description: Average response score for all statements in the "Work Climate - Identity" section of the County-wide Employee Survey for the Department. This score reflects the DCHS workplace climate regarding identity and measures the effectiveness of HR efforts related to fostering an inclusive and affirming work environment for all identities.



FY 2026 Estimate: 3.4	**FY 2027 Target:** 3.4

KPI 1.1 Equity Considerations: Aligns with DCHS's commitment to the Workforce Equity Strategic Plan (WESP) and its foundational value of Safety, Trust, and Belonging, which is critical for retaining employees, especially those from historically marginalized groups (BIPOC).

Outcome 1 Program Offers

- 25001 - DCHS Human Resources

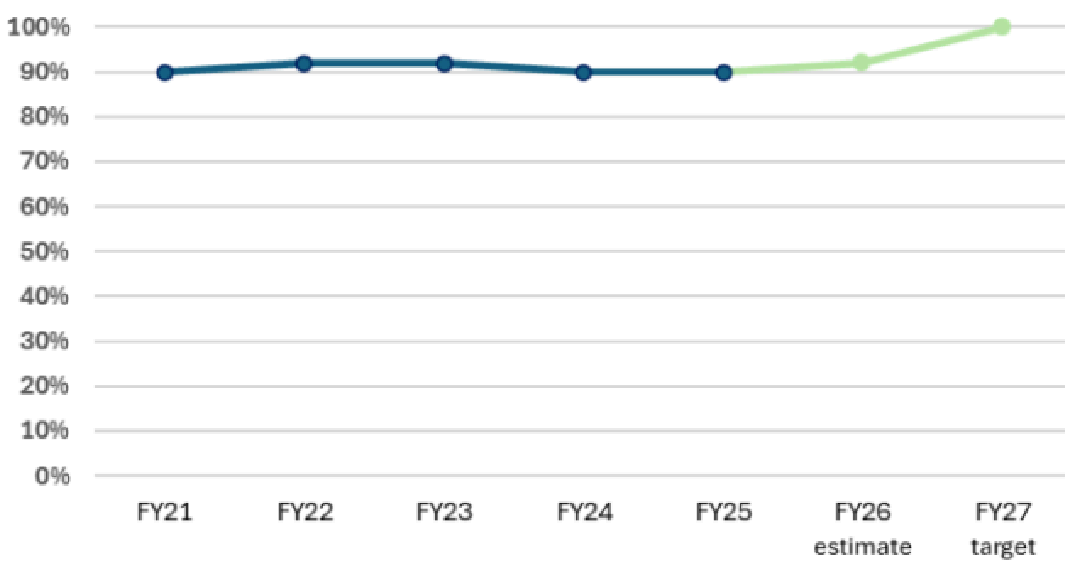
2. DCHS upholds consistent financial health and integrity while fostering equitable access to resources for contracted community organizations.

Rigorous financial oversight ensures our accounting practices adhere to the highest standards. A core goal is eliminating financial obstacles for culturally specific organizations, streamlining their access to and administration of funds for greater fairness and improved community services.

Key Performance Indicator (KPI) 2.1: Percent of Invoices paid in 30 days or less

KPI 2.1 Description: Timely payment ensures contractual compliance, builds trust with vendors, and protects the county from disputes or penalties. Meeting this target provides vital financial support to community organizations, especially smaller culturally specific groups with limited reserves.

% of invoices paid in 30 days or less



FY 2026 Estimate: 92%	**FY 2027 Target:** 100%

KPI 2.1 Equity Considerations: When invoices are paid on time, service providers maintain financial stability and can consistently deliver services that improve the wellbeing of our community members, like housing support, mental health care, or youth programs. If the county fails to pay invoices, those vital services may be disrupted, directly harming the individuals who depend on them.

Outcome 2 Program Offers: 25002 - DCHS Business Services

3. Successfully led emergency preparedness activities to equip the community with the vitality and ability to recover after a disaster or crisis.

The DCHS Administration Division plays a critical role in community resilience and recovery by organizing the delivery of Mass Care (ESF-6) services. This team coordinates preparedness and emergency response efforts by delivering necessities required for survival—such as shelter, food, and water—to affected and displaced residents following major events.

Key Performance Indicator (KPI) 3.1: Percent of Emergency Shelter Seekers Placed in Safe, Accessible, and Culturally Competent Shelter

KPI 3.1 Description: measure of DCHS's centralized leadership for disaster response and preparedness and Mass Care. This strategy ensures the emergency response is a tailored, equitable effort that prioritizes the most vulnerable — including individuals with disabilities, older adults, and people from diverse backgrounds — through inclusive sheltering, culturally competent aid, and accommodations for unique needs. While there have been no winter activations in FY 2026, we expect a warm, dry summer in Oregon. We anticipate hotter-than-average temperatures, increased drought, and a higher risk of active fire seasons. We support 100% of individuals needing mass care during weather-related activation.

FY 2026 Estimate: 100%	**FY 2027 Target:** 100%

KPI 3.1 Equity Considerations: When emergency support is not readily available or tailored to the needs of individuals with disabilities, older adults, and people from diverse backgrounds/communities, the absence of aid disproportionately exacerbates the suffering and prolongs the recovery of these vulnerable communities, deepening existing societal inequities. This focus is realized through inclusive service delivery, which includes implementing accessible sheltering and necessary accommodations during an emergency activation.

Outcome 3 Program Offers: 25000 - DCHS Director’s 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	Total FTE
25000	DCHS Director's Office		3,685,623	0	3,685,623	13.00
25001	DCHS Human Resources		2,280,084	0	2,280,084	10.00
25002	DCHS Business Services		5,540,816	0	5,540,816	26.00
25004	Immigrant Family Resilience and Stability Program	X	450,000	0	450,000	0.00
25009	Data and Evaluation Services		1,738,423	226,415	1,964,838	9.00
	Total Administration		**13,694,946**	**226,415**	**13,921,361**	**58.00**

Division: DCHS Administration

Program Characteristics:

Program Description

The Department of County Human Services (DCHS), composed of four divisions and one office, is funded by a blend of local, state, and federal sources to provide human services to diverse communities. DCHS is committed to delivering high-quality services in a wide array of community-based settings. The Director's Office spearheads the department's efforts to fulfill the DCHS North Star: ensuring every person in Multnomah County, at every stage of life, has equitable opportunities to thrive. This includes prioritizing quality of life, education access and support, economic development and stability, and a diverse and inclusive system. The Director's Office advances DCHS strategic initiatives and program service delivery through six main goals: maintaining good government practices of accountability and transparency; advancing an internal and external equity agenda, including cross-jurisdictional work to expand the reach of DCHS Operations; ensuring high-quality program delivery; effective community engagement and communication; leading emergency preparedness activities, including trainings and outreach; and leading emergency response and recovery as the Primary Agency for Emergency Support Function 6 (ESF-6) – Mass Care. The office also oversees critical administrative functions, including budget, finance, human resources, communications, and information technology, ensuring seamless and efficient support for all DCHS divisions and essential community services.

Equity Statement

DCHS promotes an equitable, safe, and welcoming environment for staff and the community by actively reducing systemic barriers and ensuring inclusive opportunities. Equity guides budget, communications, and engagement. This includes coordinating with the department's Equity Manager during the budget process and other departmentwide initiatives, and implementing the Workforce Equity Strategic Plan (WESP).

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$2,789,755	$0	$2,997,516	$0
Contractual Services	$184,701	$0	$184,701	$0
Materials & Supplies	$115,638	$0	$95,254	$0
Internal Services	$441,818	$0	$408,152	$0
Total GF/non-GF	**$3,531,912**	**$0**	**$3,685,623**	**$0**
Total Expenses:	**$3,531,912**		**$3,685,623**	
Program FTE	14.00	0.00	13.00	0.00
Program Revenues				
Other / Miscellaneous	$2,939,402	$0	$858,843	$0
Total Revenue	**$2,939,402**	**$0**	**$858,843**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of emergency preparedness engagement activities	N/A	N/A	9,645
Engagement rate with community-based organizations and partner recipients through messaging and communications	N/A	4,100	5,000

Division: DCHS Administration

Program Characteristics:

Program Description

Department of County Human Services Human Resources (DCHS-HR) leads the recruitment, retention, performance management, labor and employment compliance, and development of DCHS' workforce, allowing DCHS to fulfill its mission and provide services in accordance with DCHS priorities.

DCHS-HR consults with managers, supervisors, and employees on a range of complicated labor/employment topics, policies, contracts, and priorities. DCHS-HR also leads Department labor relations, ensuring collaborative and harmonious relations with unions. This mitigates risk and ensures a highly functioning workforce. In FY 2027, this team will continue to support a hybrid workforce, professional development, education, trauma-informed practices, and compliance. DCHS-HR also supports equity, collaborating with the Equity Department on the Workforce Equity Strategic Plan (WESP) and Department-level equity goals. DCHS-HR is a resource and support in responding to critical incidents in a trauma-informed manner. This team leads and manages recruitment, retention, and development of DCHS' workforce, providing resources to manage staff through the employment life cycle. This ensures a high-functioning workforce that serves the changing needs of Multnomah County residents. DCHS-HR also supports collaboration and alignment with Central Human Resources, Labor Relations, other Department Human Resources, and Legal.

Equity Statement

DCHS promotes an equitable, safe, and welcoming environment for staff and the community by actively reducing systemic barriers and ensuring inclusive opportunities. Equity guides HR strategies for recruitment, compensation, and retention. This includes coordinating with the Department's Equity Manager and Diversity, Equity, and Social Justice Committee (DESJC) to address harm, and implementing the Workforce Equity Strategic Plan (WESP).

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,921,555	$0	$2,039,292	$0
Contractual Services	$8,000	$0	$8,000	$0
Materials & Supplies	$13,545	$0	$14,400	$0
Internal Services	$232,045	$0	$218,392	$0
Total GF/non-GF	**$2,175,145**	**$0**	**$2,280,084**	**$0**
Total Expenses:	**$2,175,145**		**$2,280,084**	
Program FTE	10.00	0.00	10.00	0.00
Program Revenues				
Other / Miscellaneous	$1,938,555	$0	$2,039,292	$0
Total Revenue	**$1,938,555**	**$0**	**$2,039,292**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Recruitments	406	425	415
Number of Department of County Human Services job applications received	4,297	5,550	6,000

Division: DCHS Administration

Program Characteristics:

Program Description

The Business Services team supports Department of County Human Services (DCHS) divisions by managing budgeting, fiscal planning, contracting, procurement, payments, accounting, fund management, financial reporting, and financial control.

Business Services ensures DCHS has proper financial controls, including meeting government procurement requirements and GAAP-approved accounting practices. This team also provides responsive accounts payable and receivable actions, proactive budgetary planning, and quality contracts. This team strives to provide the highest standard of customer service to the department, and collaborates closely with the County Central Finance and Budget teams.

About 50% of DCHS contracts contain culturally specific and culturally responsive requirements. Roughly 80% of funding comes from over 100 sources, including state funding, federal funding, Preschool for All, and other grant revenue. These diverse funding streams require effective contract execution, compliance, and reporting, as well as payment processing and constant review of financial and internal controls. These practices ensure the ethical and responsible use of financial resources.

Business Services liaisons between the department and internal service providers including County Facilities, Records, IT, and Risk Management. Business Services Management Team offers mentorship, Work out of Class (WOC) opportunities, cross-training and supporting education for staff. DCHS also offers remote working opportunities and varied schedules for staff.

Equity Statement

DCHS consistently infuses the Equity & Empowerment Lens tool in the development and dissemination of the departmental budget and strives to ensure equity remains at the core of the budget development process while simultaneously engaging in robust fiscal management, planning, and financial control. This work is done in collaboration with the DCHS Equity Manager through the life of the budget process.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$4,810,034	$0	$4,877,384	$0
Contractual Services	$70,000	$0	$70,000	$0
Materials & Supplies	$20,074	$0	$24,600	$0
Internal Services	$604,124	$0	$568,832	$0
Total GF/non-GF	**$5,504,232**	**$0**	**$5,540,816**	**$0**
Total Expenses:	**$5,504,232**		**$5,540,816**	
Program FTE	26.00	0.00	26.00	0.00
Program Revenues				
Other / Miscellaneous	$5,264,673	$0	$4,890,789	$0
Total Revenue	**$5,264,673**	**$0**	**$4,890,789**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Percent of invoices paid in 30 days or less	90%	92%	100%
Number of anticipated contract actions including new contracts, amendments, and purchase orders	400	450	450

Division: DCHS Administration

Program Characteristics: One-Time-Only Request

Program Description

The Immigrant Family Resilience and Stability Support Program represents a strategic evolution from the original efforts through this program offer, which primarily focused on the initial placement and resettlement of newly arrived families. While those early programs were crucial in addressing immediate housing and integration needs, the landscape of challenges immigrant families face has fundamentally shifted. The program has evolved to meet the critical, current needs of client families facing increasing instability and complex crises. The primary focus is now on providing direct client assistance to support family resilience and ensure housing stability. This shift is a necessary response to several escalating challenges that threaten the well-being and stability of immigrant families. Heightened immigration enforcement creates an environment of fear, leading to family separation, loss of income, and increased housing instability. Families are also experiencing detrimental impacts to the Supplemental Nutrition Assistance Program (SNAP), Medicaid, and other critical social services limiting access to food and safety net services. To further mitigate these systemic challenges, this program expanded funding to increase access to vital immigration legal services and provide mini-grants to community organizations that deliver direct immigration services, building collective resilience.

Equity Statement

By focusing on direct assistance, the Immigrant Family Resilience and Stability Program aims to be a proactive, reliable, and equitable source of support. This approach creates greater access to resources, empowering families to respond effectively to crises and maintain their stability and dignity in the face of systemic challenges.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	$78,670	$0
Contractual Services	$633,500	$0	$371,330	$0
Total GF/non-GF	**$633,500**	**$0**	**$450,000**	**$0**
Total Expenses:	**$633,500**		**$450,000**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of families receiving direct client assistance for resilience and stabilization	N/A	N/A	130
Percent of households achieving stable housing 12 months following the assistance received	N/A	85%	85%

Division: DCHS Administration

Program Characteristics:

Program Description

Data and evaluation are essential to understanding service performance, continual quality improvement and data-driven decision making. There is a continued and increasing need for data collection, analysis, and evaluation to provide the metrics necessary to support the essential programs delivered by the Department of County Human Services.

Data & Evaluation focuses on leveraging data to identify disparities by uplifting provider and participant voice through training, data collection, reporting, and analysis. It supports over 50 programs delivered by both county and community partners. This team analyzes programs and service delivery to better understand their impact while prioritizing strong relationships with providers, partners and the community. The team works with department staff and providers to ensure that the data collected is meaningful, of high quality, and accurate. The Data & Evaluation team also participates in multiple department workgroups to support data quality, transparency, and governance. This team will focus on programs funded by County General Funds. Program activities include:

• Providing technical support and training to staff, providers, and database end users.
• Designing, developing, and maintaining data quality and performance reports.
• Conducting evaluation and qualitative/quantitative analysis of relevant program data.
• Partnering and collaborating with internal and external analysts and evaluators for a coordinated approach to divisional and departmental projects.

Equity Statement

Data and Evaluation is committed to leveraging analytics and community-driven insights to address systemic disparities, ensuring that clients receive support and access to vital resources. This includes consistently disaggregating data to use for targeted service delivery, leading to equitable outcomes and helping to identify barriers. Data is the driving force of evidence-based solutions that empower communities and provide meaningful change created by a data-informed infrastructure.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	$1,256,333	$201,964
Contractual Services	$0	$0	$25,751	$0
Materials & Supplies	$0	$0	$231,415	$2,377
Internal Services	$0	$0	$224,924	$22,074
Total GF/non-GF	**$0**	**$0**	**$1,738,423**	**$226,415**
Total Expenses:	**$0**		**$1,964,838**	
Program FTE	0.00	0.00	7.50	1.50
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of system users trained to utilize multiple databases that support accurate data entry and reporting	174	150	150
Number of data requests/reports generated, developed, or distributed to providers or internal staff	72	75	75

Intellectual and Developmental Disabilities Services

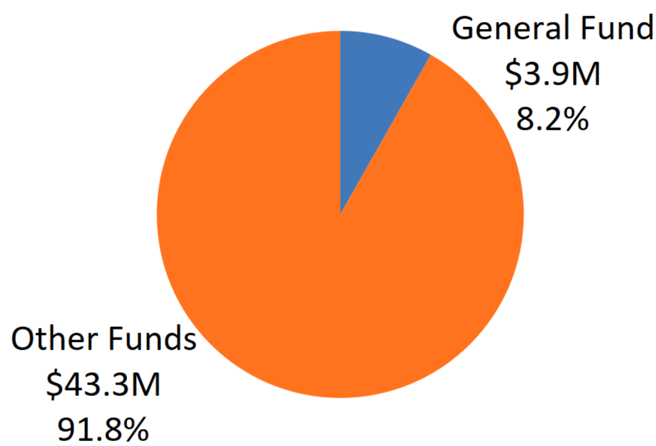
$47.1 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

250.00 FTE

(full time equivalent)



The Intellectual and Developmental Disabilities Services Division (IDDSD) serves over 8,000 people with intellectual and developmental disabilities, such as autism, cerebral palsy, or an intellectual disability. Services may span the entire lifetime. Policy, advocacy, and research on quality of life for individuals with intellectual and developmental disabilities guide our services and include the following domains: emotional, material, and physical wellbeing, interpersonal relations, community inclusion, personal development, self-determination, and rights.

IDDSD provides case management services supporting these domains and links clients and families to Medicaid-funded residential, employment, in-home, transportation, and brokerage services, and community resources such as rent assistance. The division reviews intake and eligibility referrals and provides abuse investigation services to all individuals enrolled in services. Targeted community outreach, translation services, and client-centered practices increase service access for ethnic, underserved, and marginalized communities. Individuals enrolled in IDDSD services speak over 40 languages and 74% live in East Portland or Gresham. Staff with specific knowledge, skills, or abilities (KSAs) work with clients from historically underrepresented communities to increase service enrollment and retention. This work is aligned with the four domains of DCHS's North Star and is expected to improve outcomes for individuals and families.

Significant Division Changes

FY 2027 Reductions: IDDSD addressed the FY 2027 County General Fund reductions and reduction in departmental indirect revenue by eliminating the Match Project at $98,826 (25010). The division has strategically reduced its reliance on the Match Project and operates with sufficient base funding to support service levels.

State/Federal Budget Rebalance: In FY 2026, the State/Federal Rebalance process increased the IDDSD budget by $4.1 million for administration and case management. This increase resulted in the addition of 2.00 FTE Case Manager 2 (25010) and 4.00 FTE Case Manager 1 (25010) to address growing caseloads and complex client needs, 2.00 FTE Case Manager 2 ONA (Oregon Needs Assessment) Assessors (25012) to reduce assessment backlog, and 1.00 FTE Program Technician (25011) to increase compliance with service payments. These additional positions in FY 2026 reduced service delays for the increasing number of people enrolled in services. Despite this increase in State funding, the division is only funded at 86% of its workload model.

During the FY 2026 State/Federal Rebalance, the State also decreased funding for licensing and certification by $374K. This resulted in the loss of five licensor/certifier positions — specifically 2.00 FTE Program Specialist Senior and 3.00 FTE Program Specialist (25011)—and associated county-driven licensing and certification business processes. As providers now direct questions to Service Coordinators that they once posed to licensors and certifiers, this loss has led to a greater workload for IDDSD Service Coordinators. This change may cause gaps in service and will require ongoing partnership with the State to close those gaps.

13.00 Additional FTE in FY 2027: Between July 2025 and February 2026, IDDSD enrollment increased by 347 clients. As the division experiences ever-increasing enrollment, the service complexity, regulatory oversight, and housing stabilization needs also increase. The availability of additional State Mental Health Grant funding was used to increase staffing as follows:

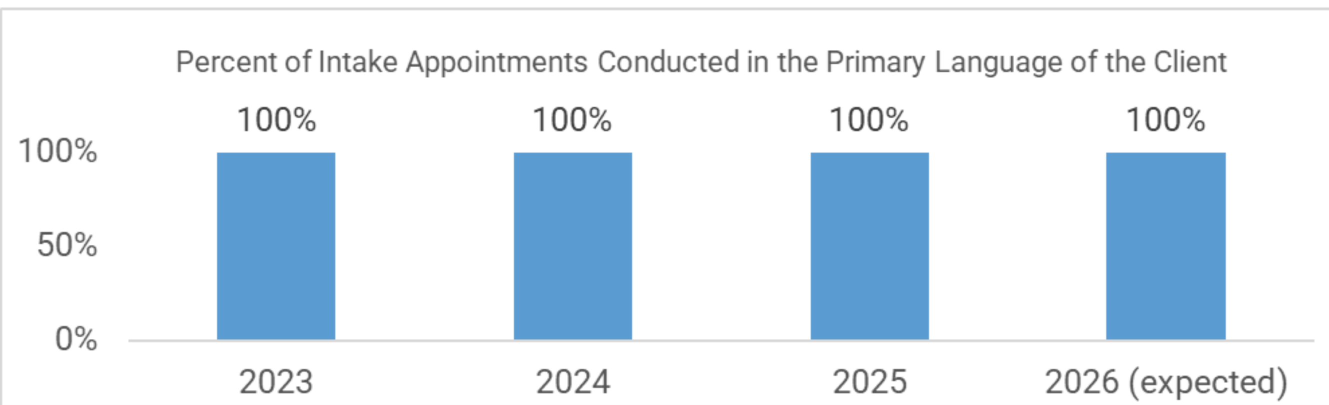
- 1.00 FTE Program Specialist Housing (25011)
- 8.00 FTE Case Manager 2 (25012, 25013)
- 1.00 FTE Case Management Assistant (25012)
- 1.00 FTE Project Manager (25010)
- 2.00 FTE Clinical Services Specialists (25016)

Intellectual and Developmental Disabilities Services Outcomes

1. Individuals with Intellectual and Developmental Disabilities have equitable access to IDDSD services that support quality of life.

Key Performance Indicator (KPI) 1.1: Percentage of intake appointments conducted in the primary language of the applicant.

KPI 1.1 Description: Language access is critical to understanding the IDDSD service system and submitting a complete application to the division. This KPI measures the degree to which the IDDSD intake and eligibility team ensures language access through translators or staff with the knowledge, skill, and ability to provide intake and eligibility meetings in the preferred language of the applicant. Approximately 10% of all intakes are conducted in a language other than English and IDDSD screens about 1,000 intakes a year.

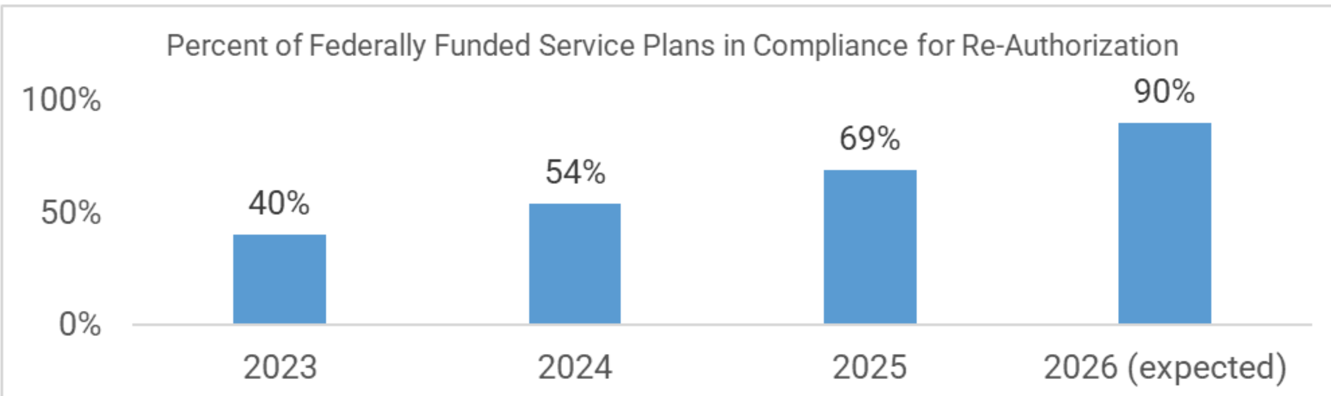


FY 2026 Estimate: 100% of intake appointments are conducted in the primary language of the applicant.	**FY 2027 Target:** 100% of intake appointments are conducted in the primary language of the applicant.

KPI 1.1 Equity Considerations: Language barriers can prevent individuals from starting or following through on the service application process. This barrier disproportionately impacts immigrant communities. IDDSD advances equity by providing intake services in the language spoken by the applicant.

Key Performance Indicator (KPI) 1.2: Percentage of federally funded service plans that are in compliance for re-authorization.

KPI 1.2 Description: To get the help they need for quality of life, people in the IDDSD program must have a service plan that is approved by the State of Oregon. To do this, staff members work closely with each person to make sure all forms and evaluations are finished correctly and on time. Following these rules and deadlines is the best way to prevent a lapse in services, ensuring that no one loses their support because of a late or missing plan.



FY 2026 Estimate: 5,987 service plans - or 90% of federally funded service plans comply with reauthorization.	**FY 2027 Target:** 6,228 service plans - or 95% of federally funded service plans comply with reauthorization.

KPI 1.2 Equity Considerations: IDDSD staff work to minimize barriers for clients who may find it difficult to meet with Service Coordinators and Assessors to complete service plans. This includes providing translation, meeting at locations and times that work for the individual enrolled in service, and providing communication through different modalities (mail, email, phone call, in person, etc.). The goal is to reach 100% annual compliance for service plan re-authorization.

Outcome 1 Program Offers

The following program offers contribute to Outcome 1. Division-specific administrative program offers are not included, as they support all outcome statements:

- 25012 - IDDSD Services for Adults
- 25013 - IDDSD Services for Children and Young Adults
- 25016 - IDDSD Eligibility & Intake Services

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	Total FTE
25010	IDDSD Administration & Support		619,626	6,702,745	7,322,371	38.00
25011	Budget and Operations Support		650,855	7,046,934	7,697,789	35.00
25012	Services for Adults		1,291,758	10,964,662	12,256,420	69.00
25013	Services for Children and Young Adults		1,286,030	10,179,823	11,465,853	66.00
25014	Abuse Investigations		3,571	5,029,577	5,033,148	26.00
25016	Eligibility & Intake Services		12,960	3,346,767	3,359,727	16.00
Total Intellectual and Developmental Disabilities Services			**3,864,800**	**43,270,508**	**47,135,308**	**250.00**

Division: Intellectual & Developmental Disabilities

Program Characteristics:

Program Description

The Multnomah County Intellectual and Developmental Disability Services Division (IDDSD) is the Community Developmental Disability Program (CDDP) for Multnomah County. This is a Medicaid authority status conferred by the State. IDDSD staff support quality of life for individuals with intellectual and developmental disabilities such as cerebral palsy, autism, and intellectual disability. These are disabling neurological conditions that originate during developmental years and directly affect the brain. The Administration team leads the division in continuous quality improvement and advocacy at the local and state levels. It provides oversight of staff, quality assurance, referrals to providers, revenue generation, and data validity and access. This team maintains service and staffing levels, and provides leadership to the division.

The IDDSD Administration 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 Administration team encompasses the following four objectives: first, optimize service capacity through staff training and development, staff retention, data accuracy, data access, and revenue maximization; 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. The major outputs of this team are: office management, database development and testing, record maintenance, staff training, data validation, data analysis, quality assurance, audit facilitation and follow-up, monitoring, referrals to provider agencies, strategic planning, policy and procedure development, and billable data entry to the state for reimbursement via Medicaid.

Equity Statement

The IDDSD Administration team advances equity by using data to examine service equity and the needs of the community. Service data is disaggregated by race, ethnicity, and language to identify gaps, and to inform the need for additional staff with specific knowledge, skills and abilities (KSAs), and to outreach to ethnic, underserved, and marginalized communities. The IDDSD Administration team engages in the work of service equity through staff training and strategic planning workgroups.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$325,426	$4,195,269	$345,208	$5,329,482
Contractual Services	$282,592	$0	$201,010	$75,000
Materials & Supplies	$46,677	$58,964	$46,937	$61,708
Internal Services	$27,479	$1,152,934	$26,471	$1,236,555
Total GF/non-GF	**$682,174**	**$5,407,167**	**$619,626**	**$6,702,745**
Total Expenses:	**$6,089,341**		**$7,322,371**	
Program FTE	1.50	29.50	1.50	36.50
Program Revenues				
Intergovernmental	$0	$5,407,167	$0	$6,702,745
Total Revenue	**$0**	**$5,407,167**	**$0**	**$6,702,745**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of federally funded plan waivers reviewed for compliance	347	350	350
Number of referral packets created to refer clients to service providers	1,615	1,650	1,675

Division: Intellectual & Developmental Disabilities

Program Characteristics:

Program Description

The Multnomah County Intellectual and Developmental Disability Services Division (IDDSD) is the Community Developmental Disability Program (CDDP) for Multnomah County. This is a Medicaid authority status conferred by the State. IDDSD staff serve individuals with intellectual and developmental disabilities such as cerebral palsy, autism, and intellectual disability. These are disabling neurological conditions that originate during developmental years and directly affect the brain. The IDDSD Budget and Operations team maintains regulatory compliance for mandated functions. These functions support quality of life, and help clients live independent and healthy lives in the community. This team facilitates the delivery and payment of client-chosen services, ensuring these services meet compliance rules and regulations.

The work of the IDDSD Budget and Operations team encompasses the following four areas: first, capacity efforts increase the knowledge and skills of residential, employment, and direct service providers. These efforts include technical support, timesheet approval, credentialing, certification, and contracts; second, access efforts include the administration of funded services. These services include housing stability, 24-hour residential care, employment, transportation, in-home supported living, and adaptive equipment; third, compliance efforts include the determination and administration of regulatory requirements. Administration of these requirements requires provider service agreements, public procurement, authorization of provider services, and ensuring compliance of changes to provider payment amounts and service types; finally, budgeting efforts include budget review, reporting, 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.

Equity Statement

The IDDSD Budget and Operations team advances equity by ensuring that technical support is available to providers in different modalities and languages, so that the IDDSD service system is accessible to all providers. The IDDSD Budget and Operations team also works closely with service coordinators to ensure that ethnic, marginalized, and underserved communities have equitable access to funded housing, employment supports, and direct services.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$358,900	$5,229,599	$562,731	$4,719,138
Contractual Services	$218,802	$1,165,203	$2,500	$1,204,174
Materials & Supplies	$11,311	$48,842	$15,028	$52,330
Internal Services	$36,638	$1,398,520	$70,596	$1,071,292
Total GF/non-GF	**$625,651**	**$7,842,164**	**$650,855**	**$7,046,934**
Total Expenses:	**$8,467,815**		**$7,697,789**	
Program FTE	2.00	36.00	3.00	32.00
Program Revenues				
Intergovernmental	$0	$7,391,286	$0	$6,596,049
Total Revenue	**$0**	**$7,391,286**	**$0**	**$6,596,049**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of direct service provider timesheets approved annually for clients receiving in-home services	16,457	19,000	20,000
Number of households served with short-term housing assistance	353	170	170

Division: Intellectual & Developmental Disabilities

Program Characteristics:

Program Description

The Multnomah County Intellectual and Developmental Disability Services Division (IDDSD) is the Community Developmental Disability Program (CDDP) for Multnomah County. This is a Medicaid authority status conferred by the State. IDDSD staff support quality of life for individuals with intellectual and developmental disabilities such as cerebral palsy, autism, and intellectual disability. These are disabling neurological conditions that originate during developmental years and directly affect the brain. Adult Services address the need for home and community-based long-term support for people with an intellectual or developmental disability. Adult Services help people maintain their independence, health, and safety while living and working within the community.

The work of the IDDSD Adult Services team encompasses the following five areas; first, needs assessments are conducted to determine levels and categories of service; second, referrals link clients to community involvement, employment, and residential resources, including affordable housing. Connections are also made to social activities; third, service coordinators engage the client in person-centered planning. This planning identifies interests, strengths, choices, goals, and a path to goal achievement. These are recorded in an Individual Support Plan; fourth, monitoring efforts include regular monitoring of service providers and progress towards individual goals. This ensures the health and safety of clients. Monitoring efforts also include partnerships with Community Justice, Behavioral 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.

Equity Statement

The IDDSD Adult Services team advances equity by providing case management services in the language spoken by the client, and by meeting at locations convenient for the client. This flexibility increases service accessibility. Service coordinators with specific knowledge, skills and abilities (KSAs) also increase service access to ethnic, underserved, and marginalized communities through specialized outreach. We increase access to critical services through staff training and resource sharing.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,383,500	$7,293,983	$1,131,065	$8,818,061
Contractual Services	$10,000	$60,000	$10,000	$61,980
Materials & Supplies	$30,647	$90,322	$25,183	$119,556
Internal Services	$165,191	$2,042,144	$125,510	$1,965,065
Total GF/non-GF	**$1,589,338**	**$9,486,449**	**$1,291,758**	**$10,964,662**
Total Expenses:	**$11,075,787**		**$12,256,420**	
Program FTE	10.50	51.50	8.00	61.00
Program Revenues				
Intergovernmental	$0	$9,252,373	$0	$10,902,682
Total Revenue	**$0**	**$9,252,373**	**$0**	**$10,902,682**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of adults (aged 22 and up) served each year	2,775	2,900	3,100
Number of monitoring contacts for adults	47,737	48,000	49,000

Division: Intellectual & Developmental Disabilities

Program Characteristics:

Program Description

The Multnomah County Intellectual and Developmental Disability Services Division (IDDSD) is the Community Developmental Disability Program (CDDP) for Multnomah County. This is a Medicaid authority status conferred by the State. IDDSD staff support quality of life for individuals with intellectual and developmental disabilities such as cerebral palsy, autism, and intellectual disability. These are disabling neurological conditions that originate during developmental years and directly affect the brain. Child and Young Adult Services address the need for home and community-based long-term support for people with an intellectual or developmental disability. Services are provided in the family home, foster homes, and group homes. These services help children and youth develop secure caregiver attachments and maintain health and safety within the community.

The work of the IDDSD Child and Young Adult Services team encompasses the following five areas. First, needs assessments are conducted to determine levels and categories of service. Second, referrals link clients and families to community, educational, employment, and developmental resources. Third, 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. Fourth, monitoring is conducted for all Medicaid services to support the health and safety of clients. This work includes collaborations with the Oregon Department of Human Services, Behavioral Health, and emergency response services. Finally, staff document all service and client data in state and county databases.

Equity Statement

The IDDSD Child and Young Adult Services team advances equity by providing case management services in the language spoken by the child and family, and by meeting at locations convenient for the child and family. This flexibility increases service accessibility. Service coordinators with specific knowledge, skills and abilities (KSAs) also increase service access to ethnic, underserved, and marginalized communities through specialized outreach.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,304,759	$7,096,615	$1,108,323	$8,234,390
Contractual Services	$25,000	$0	$25,000	$0
Materials & Supplies	$28,468	$75,665	$26,797	$97,921
Internal Services	$119,394	$2,041,578	$125,910	$1,847,512
Total GF/non-GF	**$1,477,621**	**$9,213,858**	**$1,286,030**	**$10,179,823**
Total Expenses:	**$10,691,479**		**$11,465,853**	
Program FTE	10.00	52.00	8.00	58.00
Program Revenues				
Intergovernmental	$0	$9,213,858	$0	$10,179,823
Total Revenue	**$0**	**$9,213,858**	**$0**	**$10,179,823**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of children (birth-17) served each year	2,624	2,700	2,800
Number of young adults (aged 18-21) served each year	716	720	725

Division: Intellectual & Developmental Disabilities

Program Characteristics:

Program Description

The Multnomah County Intellectual and Developmental Disability Services Division (IDDSD) is the Community Developmental Disability Program (CDDP) for Multnomah County. This is a Medicaid authority status conferred by the State. IDDSD staff support quality of life for individuals with intellectual and developmental disabilities such as cerebral palsy, autism, and intellectual disability. These are disabling neurological conditions that originate during developmental years and directly affect the brain. The Abuse Investigation team supports the health, safety, and rights of individuals who are at increased risk for exploitation, neglect, and abuse due to their intellectual or developmental disability. The team delivers timely and person-centered services meant to improve quality of life and support client access to criminal justice protections. The services provided by the Abuse Investigation team ensure compliance with Oregon Administrative Rules and statutes.

The work of the IDDSD Abuse Investigation team encompasses three areas. First, the team increases client access to health and safety support by working closely with case managers, ensuring safety plans are in place. The team also increases health and safety by screening, reviewing, and investigating allegations related to alleged client abuse, neglect, or exploitation. Investigators also review all deaths. Second, the team collaborates by developing 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 IDDSD Advisory Committee, the Inter-Agency Committee for Abuse Prevention, the Incident Management Team, the Investigations Advisory Group, and the Critical Case Review Committee, which identifies safe options for high-risk clients in complex situations. Finally, the team provides prevention support through technical assistance and follow-up for protective services.

Equity Statement

The IDDSD Abuse Investigation team advances equity through detailed and thorough examination of the screening, review and investigation process. They also use a trauma-informed practice framework when determining follow-up in each case in order to minimize retraumatization. The team uses language interpreters as needed and meets at locations convenient for the individuals involved in each case.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$3,909,796	$0	$4,101,232
Contractual Services	$0	$1,000	$0	$1,000
Materials & Supplies	$3,571	$40,000	$3,571	$43,895
Internal Services	$0	$1,038,779	$0	$883,450
Total GF/non-GF	**$3,571**	**$4,989,575**	**$3,571**	**$5,029,577**
Total Expenses:	**$4,993,146**		**$5,033,148**	
Program FTE	0.00	26.00	0.00	26.00
Program Revenues				
Intergovernmental	$0	$4,989,575	$0	$5,029,577
Total Revenue	**$0**	**$4,989,575**	**$0**	**$5,029,577**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of abuse referrals processed	1,927	2,000	2,000
Number of investigations and death reviews closed	648	650	650

Division: Intellectual & Developmental Disabilities

Program Characteristics:

Program Description

The Multnomah County Intellectual and Developmental Disability Services Division (IDDSD) is the Community Developmental Disability Program (CDDP) for Multnomah County. This is a Medicaid authority status conferred by the State. IDDSD staff support quality of life for individuals with intellectual and developmental disabilities such as cerebral palsy, autism, and intellectual disability. These are disabling neurological conditions that originate during developmental years and directly affect the brain. The Eligibility and Intake Services team is the point of entry to all IDDSD vocational, residential, in-home, and case management services. The team follows state and federal rules to ensure that eligibility and intake services are self directed and inclusive. They work to increase awareness, access, choice, and community inclusion for individuals with intellectual and developmental disabilities.

The IDDSD Eligibility and Intake Services team's work encompasses three areas; first, community outreach increases understanding of IDDSD services. Community outreach results in referrals from community partners, such as schools, medical providers, and parent networks. It also results in high-need referrals from Adult Protective Services and Child Welfare; second, staff provide accessible intake services that include communication with the applicant in their primary language and meeting at a convenient location for the applicant. Accessible service supports provided by this team 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; finally, this team connects applicants, regardless of eligibility status, to agencies providing resources such as early intervention, energy assistance, housing support, social security benefits, health insurance, and behavioral health.

Equity Statement

The IDDSD Eligibility & Intake Services team advances equity by providing intake services and written materials in the language spoken by the applicant, and by meeting at locations convenient for the applicant. This flexibility increases service accessibility. Staff with specific knowledge, skills and abilities (KSAs) also increase service access by conducting outreach to ethnic, underserved, and marginalized communities.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$2,105,497	$0	$2,513,382
Contractual Services	$10,000	$0	$10,000	$0
Materials & Supplies	$2,960	$21,535	$2,960	$27,013
Internal Services	$0	$559,375	$0	$806,372
Total GF/non-GF	**$12,960**	**$2,686,407**	**$12,960**	**$3,346,767**
Total Expenses:	**$2,699,367**		**$3,359,727**	
Program FTE	0.00	14.00	0.00	16.00
Program Revenues				
Intergovernmental	$0	$2,686,407	$0	$3,346,767
Total Revenue	**$0**	**$2,686,407**	**$0**	**$3,346,767**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of intake eligibility referrals processed	1,540	1,400	1,400
Number of community outreach activities	23	20	20

Aging, Disability, and Veterans Services

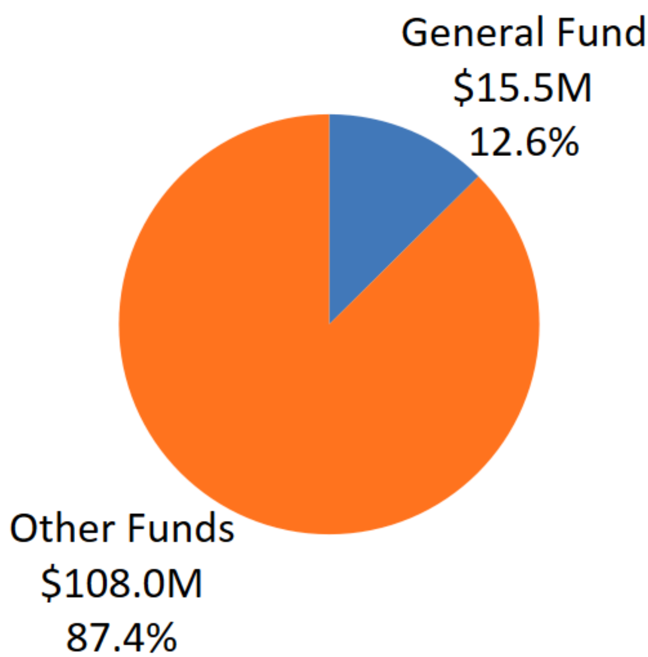
$123.6 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

539.80 FTE

(full time equivalent)



The Aging, Disability and Veterans Services Division (ADVSD) service system helps people achieve independence, health, safety, and quality of life. ADVSD is the state-designated Area Agency on Aging for the county. We offer access to services at five district senior centers, eight enhancing equity providers, and five easily accessible Medicaid offices located throughout the county. A 24-hour call center is part of the division’s goal of seamless entry to services.

In FY 2025, ADVSD served over 60,000 people across 31 programs. The division is made up of five main service areas: 1) Community Services (including a Veterans Services unit); 2) Adult Care Homes; 3) Long Term Services and Supports; 4) Adult Protective Services; and 5) the Public Guardian and Conservator Program.

Demographics and Equity Data: Over 163,000 (20.5%) of Multnomah County residents are 60 and older. There are over 115,000 people 18 and older with physical disabilities, and about 27,800 Veterans living in the county. By 2030, there will be more adults over the age of 65 than youth under the age of 18. These populations are served by ADVSD.

ADVSD is a leader in the work toward racial justice, both in the county and in our systems. The division prioritizes weaving Multnomah County’s Workforce Equity Strategic Plan (WESP) and the Equity and Empowerment Lens tools into its work. These frameworks give focus to people who have been marginalized based on their race, gender, sexual orientation, ability, age, and other forms of oppression.

Significant Division Changes

Intellectual & Developmental Disabilities (IDD) Adult Care Home administration transferred to the State (relates to program offer 25022 - ADVSD Adult Care Home Program).

- The 2027 Governor's legislative budget required the centralization of licensing of all Intellectual and Developmental Disability foster homes across the state. Beginning January 1, 2026, this removed 165 homes from the Adult Care Home Program and removed three licensor positions from the program. The program now serves over 400 homes mostly for aging and people with disabilities, and a few homes licensed for behavioral health.

Adult Protective Services Multidisciplinary Teams - Mental Health Specialist contract ended (25028).

- 1.00 FTE Community Health Nurse will be reduced in FY 2027 due to the reductions in department indirect General Fund revenue. This will increase the workload for Adult Protective Services, the Multi-Disciplinary Team (MDT), investigators, Long Term Services & Supports case managers, and district center case managers. Previously, Mental Health Consultants were core MDT members, frequently supporting Case Managers and APS Investigators with mental health concerns. Their removal has led to a steady decline in program referrals.

Federal House of Representatives 1 (H.R. 1) Impact: Supplemental Nutrition Assistance Program (SNAP) and Medicaid work requirements.

- SNAP eligibility changed October 1, 2025, to reinstate work requirements for Able-Bodied Adults Without Dependents (ABAWDs) ages 18-64, and narrow eligibility for some immigrants who have now lost SNAP benefits. These work requirements no longer offer waivers for Veterans or people experiencing homelessness.
- H.R. 1 will also impact Medicaid eligibility and frequency of renewals starting in FY 2027.

Veteran Directed Care Spokes Reduction (25025).

- Our Veterans Services office is a statewide coordinator and hub for Veteran Directed Care (VDC), a program that provides Veterans with opportunities to self-direct their long term services and supports and continue living independently at home. The program operates a "hub-and-spoke" model and we coordinate with spokes in several other counties. This year, the number of other counties participating has decreased from seven to four, including Multnomah County. Clients continue to be served through the providers in their local area without disruption to services.

Oregon Project Independence (OPI) Classic reductions: OPI Medicaid eligibility (25035).

- The State significantly reduced funding for the OPI Classic program. While the majority of OPI Classic consumers will transition to the OPI Medicaid program, there will still be individuals who are not eligible for OPI Medicaid, including non-citizens. Those individuals will be at risk of losing their in-home care services due to insufficient OPI Classic funding.

Homeless Mobile Intake Team (HMIT) Behavioral Health Navigation (25029B). HMIT was launched in FY 2026, and helps individuals with mental health needs navigate the barriers they experience as they try to access benefits and services The program focuses on consumers with mental health needs who need assistance living in community to access home and community-based services through the state option called 1915i. This program anticipates outreach to at least 100 potential consumers and will initiate the 1915i process with those who consent.

Reduction: Safety Net Program (25036) $100,000 in General Fund.

- The Safety Net Program offers a variety of services that support housing stability. These include rent assistance, utility assistance, emergency motel vouchers, deposits, moving services, extreme cleaning, and bedbug removal. It also helps participants pay for items like eyeglasses, dentures, and medical equipment. This reduction would affect an estimated 148 recipients of client assistance.

Due to reductions in department indirect revenue, ADVSD was reduced by approximately $1.1 million in General Fund expenses. For more details see the Overview of Additions, Reductions, and Reallocations section of the Budget Director’s Message in Volume 1.

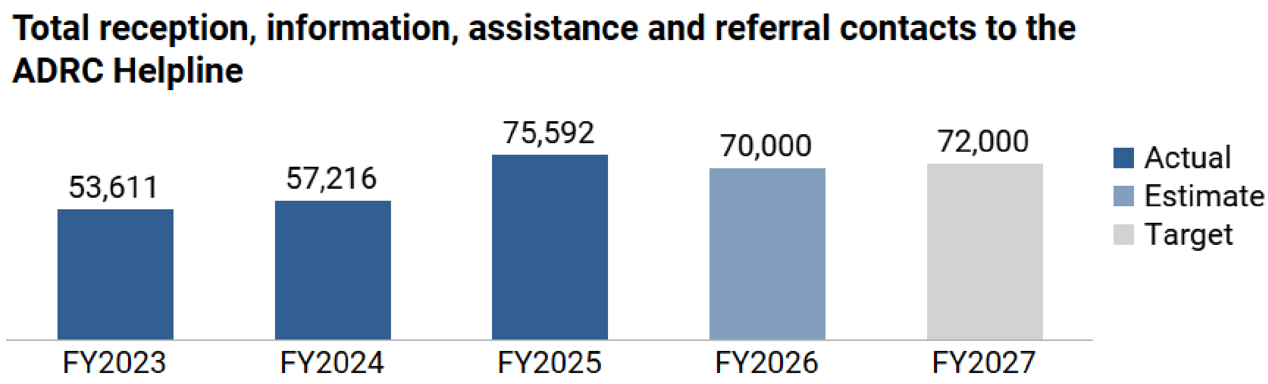
Aging, Disability, and Veterans Services Outcomes

1. Improve equitable access to services and supports for older adults, people with disabilities, and Veterans

ADVSD staff and partners provide culturally appropriate assistance to ensure equitable access for individuals who experience barriers based on their background or identity.

Key Performance Indicator (KPI) 1.1: Total reception, information, assistance and referral contacts to the ADRC Helpline

KPI 1.1 Description: The Aging and Disability Resource Connection (ADRC) is a helpline and website, offering a single entry point for many community programs and benefits for older adults, people with disabilities, Veterans, and their families. The ADRC Helpline is a 24/7 “front door” for our other programs, most of which do not have public offices, answering after-hours for the Public Guardian Office and Adult Care Home Program. This count of “contacts” includes phone calls, emails, texts and in-person contacts fielded by ADRC staff and contracted ADRC partners. Factors contributing to the FY 2025 increase include: changes in State guidance on how to log contacts, bringing after hours calls in-house, and ADRC staff assisting with the Medicaid Long Term Services and Supports (LTSS) screening.

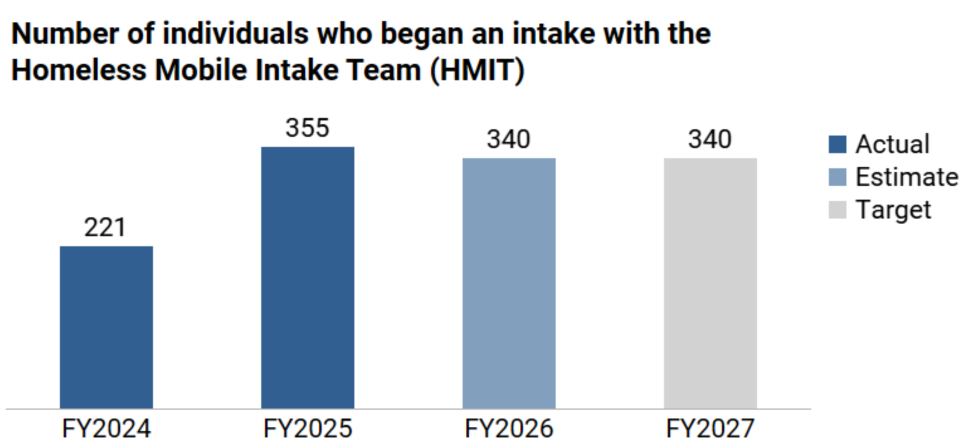


FY 2026 Estimate: 70,000	**FY 2027 Target:** 72,000

KPI 1.1 Equity Considerations: The ADRC is available to everyone, regardless of background, income, or identity. ADRC Information Specialists inquire whether individuals have any specific cultural or language preferences to find the most suitable resources. Many ADRC information specialists work for Enhancing Equity community partners. ADVSD conducts outreach at community events, focusing on marginalized communities that may experience additional barriers to accessing resources.

Key Performance Indicator (KPI) 1.2: Number of individuals who began an intake with the Homeless Mobile Intake Team (HMIT)

KPI 1.2 Description: People who are unhoused face unique barriers to moving safely back home or into the community. They need a high level of support when applying for Medicaid Long Term Services & Supports (LTSS) case management. The Homeless Mobile Intake Team (HMIT) meets unhoused individuals where they are to conduct eligibility assessments and enroll eligible participants in Medicaid LTSS. This metric is a count of individuals assessed by HMIT staff. HMIT launched in November 2022. The FY 2025 increase is due to program ramp-up and reaching full staffing.

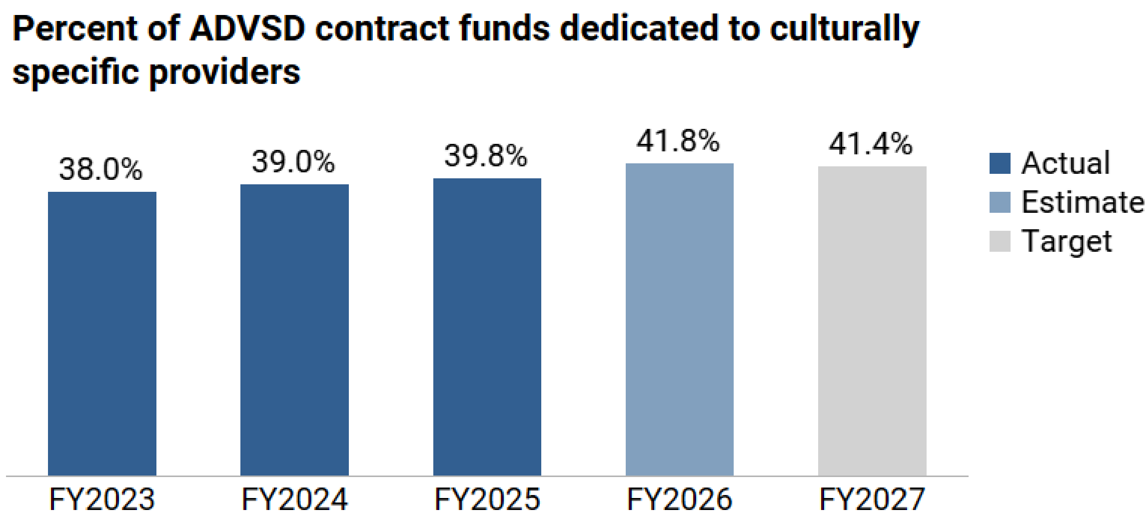


FY 2026 Estimate: 340	**FY 2027 Target:** 340

KPI 1.2 Equity Considerations: The Homeless Mobile Intake Team is committed to providing culturally responsive services and has staff who speak multiple languages, are culturally knowledgeable, and trained in diversity, equity, and inclusion.

Key Performance Indicator (KPI) 1.3: Percent of ADVSD contract funds dedicated to culturally specific providers

KPI 1.3 Description: ADVSD funds five District Senior Centers and nine Enhancing Equity partners to provide access to Older Americans Act (OAA) services. Elders who are people of color are at greater risk for race-based marginalization, including barriers to services, housing instability, health disparities, and food insecurity. This metric is the percentage of OAA contracts awarded to culturally specific partners.



FY 2026 Estimate: 41.8%	**FY 2027 Target:** 41.4%

KPI 1.3 Equity Considerations: ADVSD Community Services assists our Enhancing Equity partners, many of whom have not worked with the County, to navigate the contracting, reporting, and invoicing processes and provide programming that is tailored to underserved communities.

Outcome 1 Program Offers

The following program offers contribute to Outcome 1. Division-specific administrative program offers are not included, as they support all outcome statements:

- 25029A - ADVSD LTSS Nursing Homes and Homeless Services (Medicaid)
- 25032 - ADVSD Outreach, Information, Referral & Assistance
- 25033 - ADVSD Nutrition Program
- 25034 - ADVSD Health Promotion

- 25035 - ADVSD Case Management & In-Home Services (Community Services)
- 25037 - ADVSD Transportation Services
- 25038 - ADVSD Community Participation and Program Operations
- 25039 - ADVSD Family Caregiver Support Program

2. Improve the safety and basic needs of older adults, people with disabilities and Veterans

This outcome focuses on ensuring that vulnerable individuals are safe from abuse or exploitation and have their basic needs like housing, food, medical coverage, or income met. ADVSD services that support this outcome include: abuse prevention and intervention, guardianship, money management, eviction prevention, meals, benefit enrollment, and claims representation.

Key Performance Indicator (KPI) 2.1: Percent of Adult Protective Service (APS) intakes with a timely screening decision.

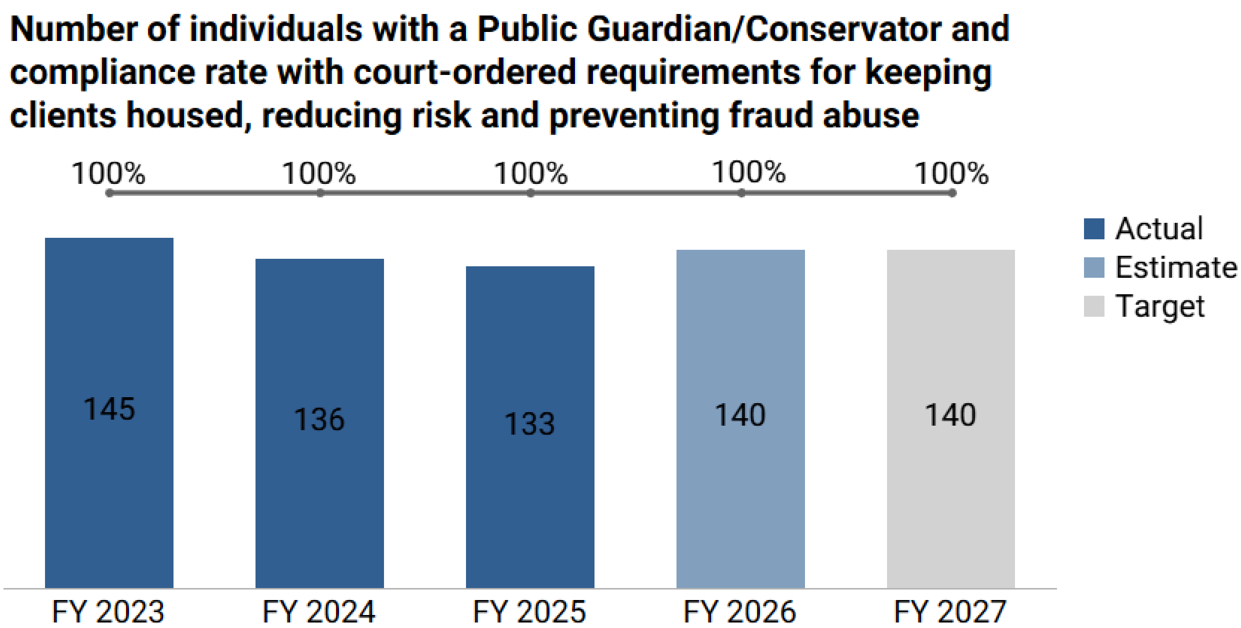
KPI 2.1 Description: When someone suspects abuse, financial exploitation, neglect, or self neglect, they make a report to APS. APS Screeners have until the end of the following business day to review every report and ensure that cases that warrant investigation are assigned to an investigator. This metric reflects the number of intakes per fiscal year and the percentage of intakes where the screening decision was made by the deadline.

FY 2026 Estimate: 99%	**FY 2027 Target:** 97%

KPI 2.1 Equity Considerations: Adult Protective Services (APS) aims to overcome cultural and language barriers so that anyone at risk can access services. The APS Training and Outreach Coordinator builds relationships with culturally specific organizations to make sure connecting to APS is accessible to everyone, regardless of their background or identity.

Key Performance Indicator (KPI) 2.2: Public Guardian/Conservator program compliance rate with court-ordered requirements for keeping clients housed, reducing risk and preventing fraud abuse

KPI 2.2 Description: When a court finds that an individual is profoundly mentally incapacitated and unable to care for themselves, a judge may appoint a public guardian and/or conservator. Guardians help individuals make decisions about where to live, medical and psychiatric care, end-of-life planning, and financial management. Conservatorship is a more intense form of financial management and protection. Conservators manage income sources, bills, and large assets such as trusts and properties. This metric shows the percent compliance with requirements for keeping clients housed, reducing risk and preventing fraud abuse.

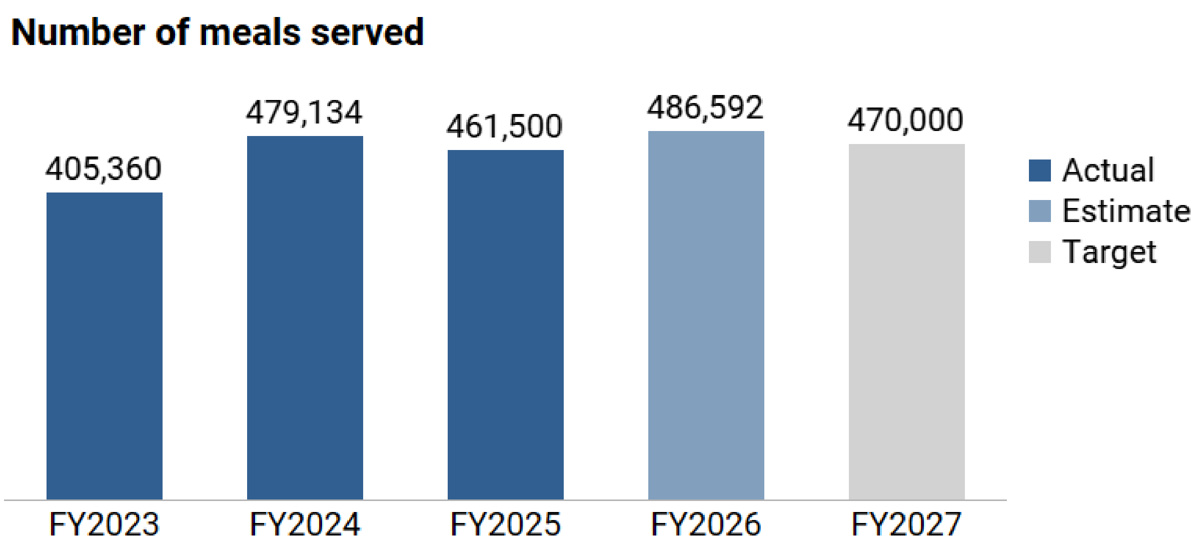


FY 2026 Estimate: 140	**FY 2027 Target:** 140

KPI 2.2 Equity Considerations: PGC ensures that all individuals under guardianship can access culturally relevant placements and services that honor their preferences, needs, and values. All staff are nationally certified and follow standards that are aligned with equitable and inclusive service delivery. PGC engages in community outreach and relationship building to reach people of all identities and backgrounds.

Key Performance Indicator (KPI) 2.3: Number of meals served

KPI 2.3 Description: The ADVSD Nutrition Program contracts with community partners to provide healthy meals and nutrition education. Meals are both home-delivered and available at community dining sites. This metric is a count of home-delivered, congregate, and grab-and-go meals served by ADVSD's contracted partners through Older Americans Act funding. It does not include Medicaid-funded home-delivered meals.

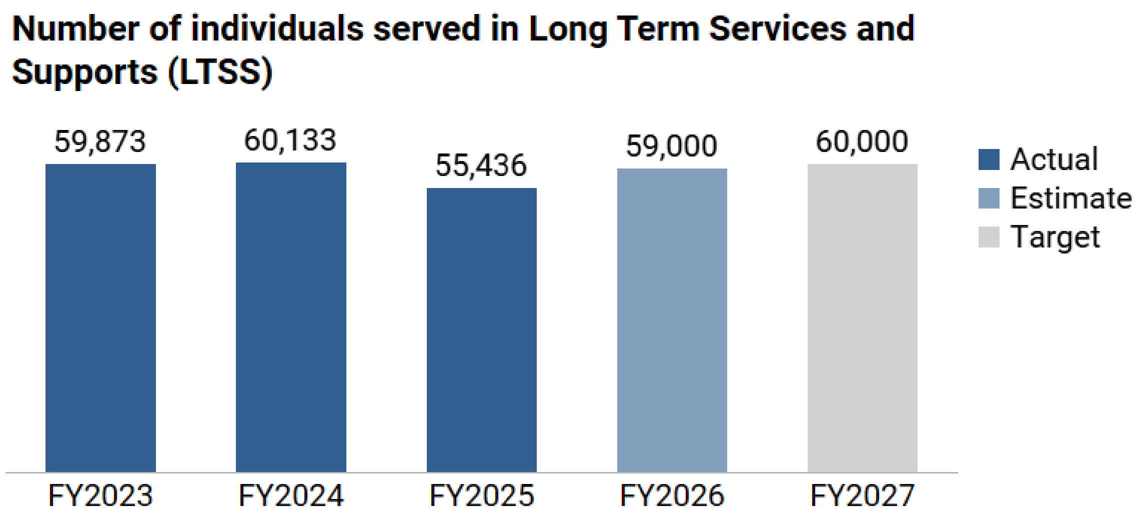


FY 2026 Estimate: 486,592	**FY 2027 Target:** 470,000

KPI 2.3 Equity Considerations: Nutritious meals that support the culture of underserved and marginalized communities are an important part of wellness for many older adults and people with disabilities. Nutrition Program Enhancing Equity partner organizations often partner with culturally specific restaurants and grocery stores within their communities, which in turn supports local businesses. ADVSD conducts outreach to increase access for people of all identities and backgrounds.

Key Performance Indicator (KPI) 2.4: Individuals served in Long Term Services and Supports (LTSS)

KPI 2.4 Description: LTSS benefit enrollment specialists help people understand their options and enroll in appropriate benefits like the Oregon Health Plan, Medicaid, SNAP food stamps), managed care, and Medicare Part D plans. Oregon has a “no wrong door” policy, so anyone can get help enrolling at an LTSS office. This metric includes any person associated with a case that was handled by a MultCo LTSS staff member. It may include individuals residing outside of Multnomah County and is not limited to older adults and people with disabilities. It may also include applicants who were determined not eligible to receive Medicaid benefits.

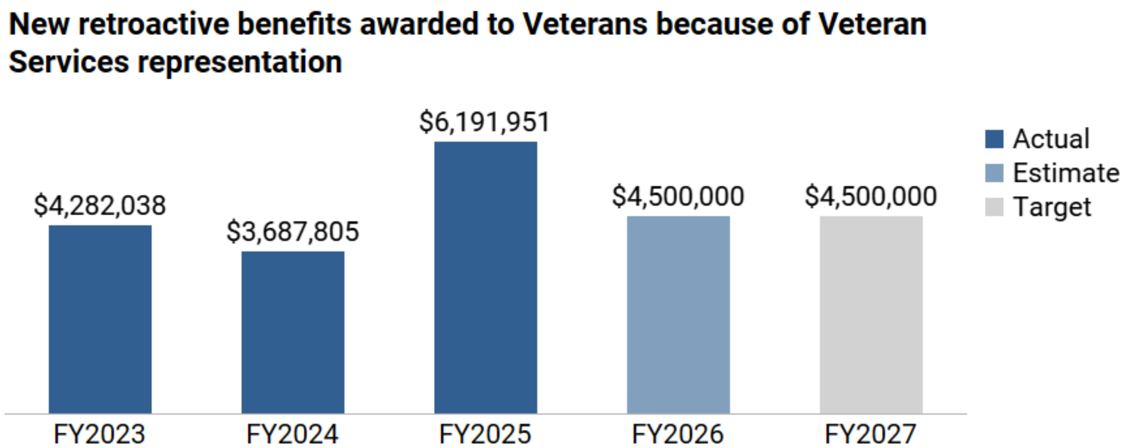


FY 2026 Estimate: 59,000	**FY 2027 Target:** 60,000

KPI 2.4 Equity Considerations: LTSS strives to provide culturally responsive services to all participants and employs a culturally and linguistically diverse team. Staff are trained in diversity, equity, and inclusion. ADVSD outreach encourages people of all identities and backgrounds to access services.

Key Performance Indicator (KPI) 2.5: New retroactive benefits awarded to Veterans because of Veteran Services representation

KPI 2.5 Description: Veterans Services (VS) provides free benefit enrollment and advocacy help to Veterans and eligible family members. The Veterans Administration (VA) claims process is complex, and can take years to receive a decision. The retroactive benefit is a one-time payment issued to the Veteran when they are approved for disability compensation. This is a point-in-time measurement as of December for the previous fiscal year that reflects the total awarded amount as of the report date.



FY 2026 Estimate: $4,500,000	**FY 2027 Target:** $4,500,000

KPI 2.5 Equity Considerations: Veterans Services ensures that all Veterans and their families receive the benefits they are entitled to, regardless of their background or identity. The Veterans Services Task Force promotes fair access for Veterans who experience discrimination and additional barriers to services. ADVSD outreach encourages people of all identities and backgrounds to access its services.

Outcome 2 Program Offers

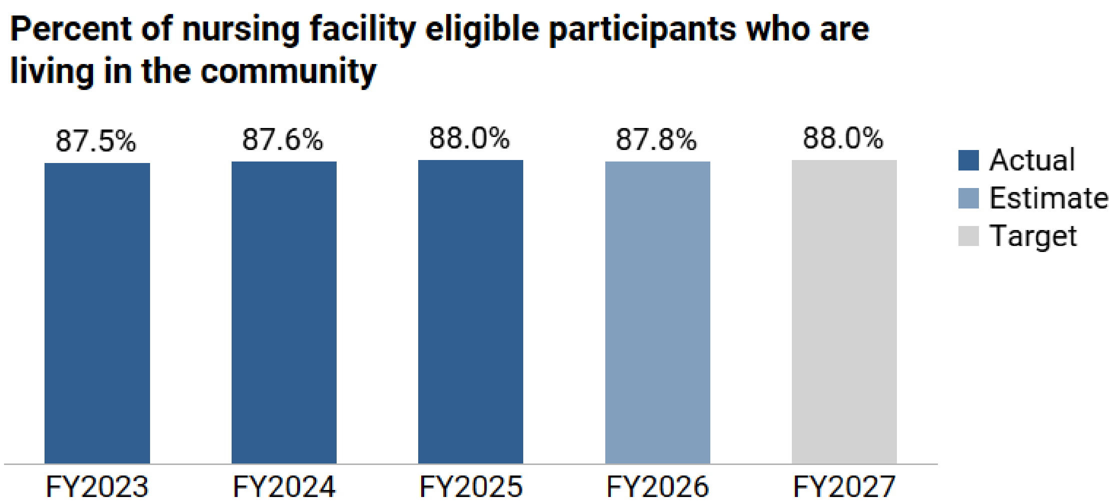
The following program offers contribute to Outcome 2. Division-specific administrative program offers are not included, as they support all outcome statements:

- 25023 - ADVSD Long Term Services & Supports (Medicaid)
- 25024 - ADVSD Adult Protective Services
- 25025 - ADVSD Veterans Services
- 25026 - ADVSD Public Guardian/Conservator
- 25033 - ADVSD Nutrition Program

3. Improve the quality of life of older adults, people with disabilities and Veterans.

Key Performance Indicator (KPI) 3.1: Percent of nursing facility eligible participants who are living in the community

KPI 3.1 Description: Long Term Services and Supports (LTSS) serves low-income older adults, people with disabilities, and people with behavioral health needs. Case managers assess the level of assistance people need with daily activities and create care plans that support safety and independence. While nursing home care may be the best option for some, case managers provide other options like supporting someone's ability to remain at home or in a community-based facility like an adult care home or assisted living facility.

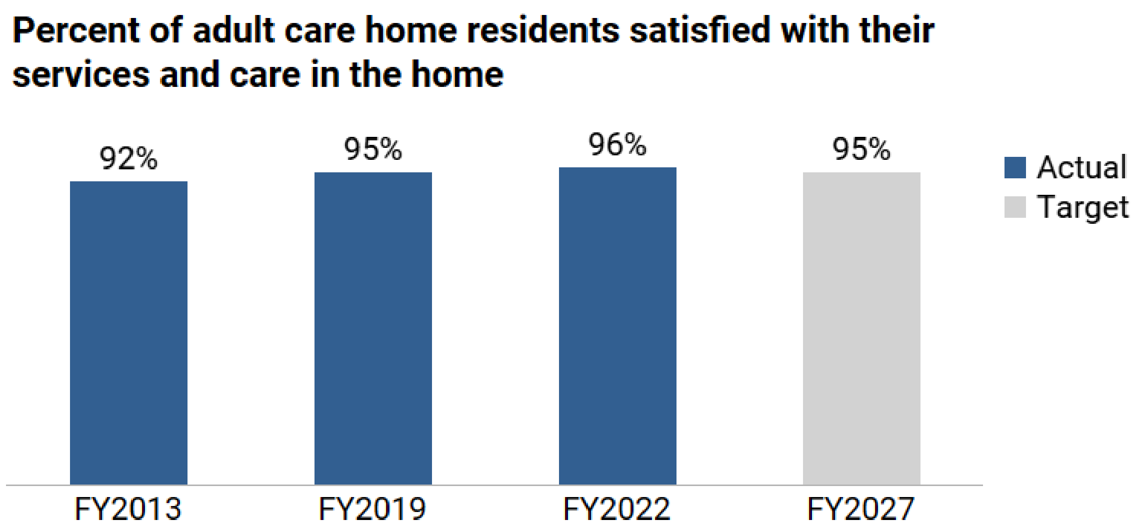


FY 2026 Estimate: 87.8%	**FY 2027 Target:** 88%

KPI 3.1 Equity Considerations: Long Term Services and Supports (LTSS) strives to provide culturally responsive services to all participants. LTSS is proud to employ a culturally and linguistically diverse team. All staff are trained in diversity, equity, and inclusion. ADVSD conducts outreach to encourage people of all identities and backgrounds to access its services.

Key Performance Indicator (KPI) 3.2: Budget Survey: Percent of adult care home residents satisfied with their services and care in the home

KPI 3.2 Description: The Adult Care Home Program (ACHP) is responsible for the safety and quality of adult care homes in Multnomah County. This metric comes from a resident satisfaction survey. The latest survey was conducted for FY 2022 and included 137 residents across 69 homes. The next survey will be conducted for FY 2027.

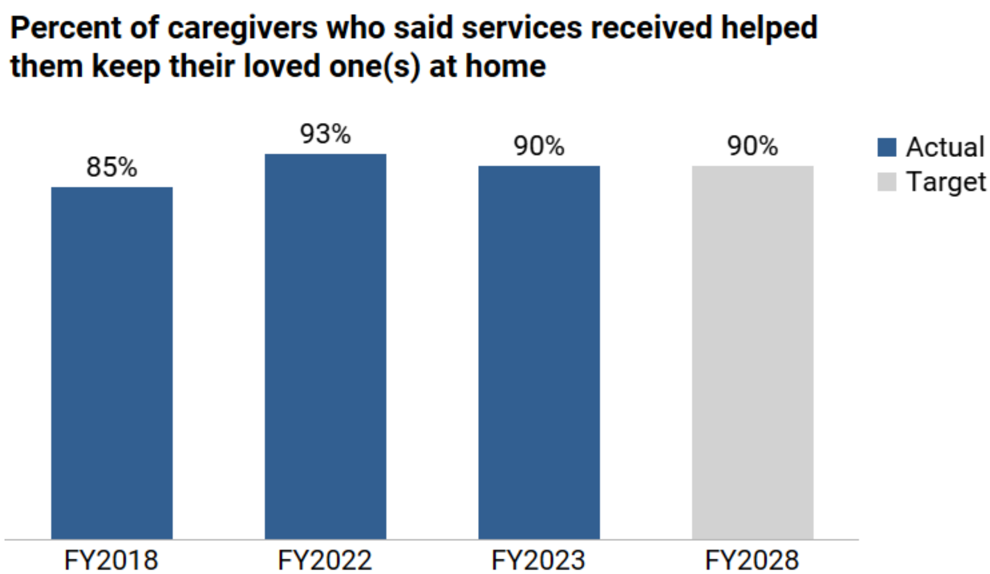


FY 2026 Estimate: N/A (next survey will be FY 2027)	**FY 2027 Target:** 95%

KPI 3.2 Equity Considerations: The Adult Care Home Program is proud of the cultural and linguistic diversity of adult care home operators and staff. This helps ensure that residents are cared for in a safe and respectful environment that suits their needs. Homes support and honor residents' independence, cultural needs, and choices. Staff are required to complete training to prevent bias and encourage that homes are welcoming to people of all backgrounds and identities.

Key Performance Indicator (KPI) 3.3: Percent of caregivers who said services received helped them keep their loved one(s) at home.

KPI 3.3 Description: The Family Caregiver Support Program (FCSP) supports unpaid family caregivers who take care of their older family members or older adults who raise relatives' children. FCSP aims to reduce caregiver burnout and keep families together by preventing or delaying the need for more costly care options. This metric comes from a survey administered by ADVSD. The latest survey was conducted for FY 2023 and included 52 respondents. The next survey will be conducted for FY 2028.

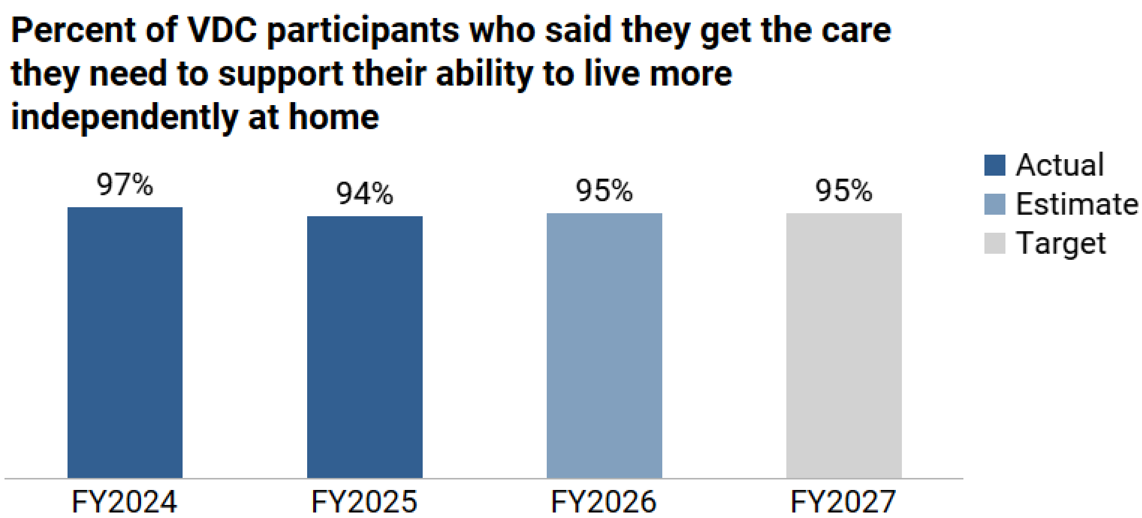


FY 2026 Estimate: N/A (next survey will be FY 2028)	**FY 2027 Target:** N/A (next survey will be FY 2028)

KPI 3.3 Equity Considerations: The Family Caregiver Support Program works with Enhancing Equity partner organizations to connect with participants who experience barriers or discrimination based on their background or identity. ADVSD conducts outreach to encourage people of all identities and backgrounds to access its services.

Key Performance Indicator (KPI) 3.4: Percent of Veteran Directed Care (VDC) participants who said they get the care they need to support their ability to live more independently at home

KPI 3.4 Description: The Veteran Directed Care (VDC) program provides Veterans with opportunities to self-direct their long term services and supports and continue living independently at home. Eligible Veterans manage their own flexible budgets, decide what goods and services best meet their needs, and hire and supervise their own workers. This metric comes from a survey administered annually by ADVSD. The latest survey was conducted for FY 2025 and included 64 respondents.



FY 2026 Estimate: 95%	**FY 2027 Target:** 95%

KPI 3.4 Equity Considerations: Veterans Services and Veteran Directed Care ensures that all Veterans and their families receive the benefits they are entitled to, regardless of their background or identity. The Veterans Services Task Force promotes fair access for Veterans who experience discrimination and additional barriers to services. ADVSD conducts outreach to encourage people of all identities and backgrounds to access its services.

Outcome 3 Program Offers

The following program offers contribute to Outcome 3. Division-specific administrative program offers are not included, as they support all outcome statements:

- 25022 - ADVSD Adult Care Home Program
- 25023 - ADVSD Long Term Services & Supports (Medicaid)
- 25025 - ADVSD Veterans Services
- 25039 - ADVSD Family Caregiver Support 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	Total FTE
25022	Adult Care Home Program		80,557	6,325,033	6,405,590	29.00
25023	Long Term Services & Supports		4,306,254	56,164,940	60,471,194	312.00
25024	Adult Protective Services		160,709	10,966,273	11,126,982	54.88
25025	Veterans Services		552,723	8,371,488	8,924,211	8.00
25026	Public Guardian/Conservator		2,137,185	0	2,137,185	11.00
25027	ADVSD Administration		456,863	2,934,643	3,391,506	13.00
25028	Multi-Disciplinary Team		285,898	648,709	934,607	4.12
25029A	LTSS Nursing Homes and Homeless Services (Medicaid)		794,315	7,687,197	8,481,512	40.00
25029B	Long Term Care for Homeless Individuals with Severe and Persistent Mental Illness		500,696	0	500,696	3.00
25032	Outreach, Information, Referral & Assistance		2,530,110	4,143,922	6,674,032	27.95
25033	Nutrition Program		383,638	1,956,412	2,340,050	0.00
25034	Health Promotion		72,937	346,837	419,774	1.00
25035	Case Management & In-Home Svc		1,060,428	1,970,764	3,031,192	9.13
25036	Safety Net Program		725,172	181,050	906,222	2.00
25037	Transportation Services		147,882	2,125,651	2,273,533	0.75
25038	Community Participation and Program Operations		1,147,625	3,975,264	5,122,889	22.67
25039	Family Caregiver Program		170,023	240,087	410,110	1.30
	Total Aging, Disability, and Veterans Services		**15,513,015**	**108,038,270**	**123,551,285**	**539.80**

Division: Aging, Disability & Veterans Services

Program Characteristics:

Program Description

When an older adult or an adult with a developmental, physical, or behavioral health disability can no longer care for themself in their own home, they are at greater risk of abuse, neglect, and injury. The State prefers to invest in community-based care settings rather than nursing homes, because they reduce Medicaid costs and offer a more homelike setting.

The Adult Care Home Program (ACHP) is responsible for the safety and quality of adult care homes in Multnomah County. The State allows ACHP to create local licensing rules that meet or exceed State requirements, ensuring the highest quality and safety for residents and adequate training for staff. Adult care homes are licensed, single family residences that offer 24-hour individualized care for up to five adult residents in a homelike setting. Homes specialize in caring for either older adults or adults with behavioral health needs. Homes support residents’ health and safety while honoring their independence and choice.

Before a new home can be licensed, ACHP reviews and approves all applications and inspects the home for suitability. They conduct background checks and role approvals for staff. All homes are licensed annually and monitored quarterly via unannounced home visits from ACHP staff. In-person inspections monitor compliance with the rules. Homes that don't follow the rules must take corrective actions, which can include retraining, fines, or home closure. ACHP gives technical help and training for operators and staff to prevent the need for corrective actions.

Equity Statement

The Adult Care Home Program is proud of the cultural and linguistic diversity of adult care home operators and staff in Multnomah County. This helps ensure that residents are cared for in a safe and respectful environment that suits their needs. Homes support and honor residents’ independence, cultural needs, and choices. Staff are required to complete training to prevent bias and encourage that homes are welcoming to people of all backgrounds and identities.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$4,776,691	$0	$4,735,270
Contractual Services	$99,062	$453,765	$80,557	$352,464
Materials & Supplies	$0	$35,879	$0	$35,273
Internal Services	$0	$1,361,665	$0	$1,202,026
Total GF/non-GF	**$99,062**	**$6,628,000**	**$80,557**	**$6,325,033**
Total Expenses:	**$6,727,062**		**$6,405,590**	
Program FTE	0.00	31.00	0.00	29.00
Program Revenues				
Fees, Permits & Charges	$0	$340,820	$0	$0
Intergovernmental	$0	$6,199,235	$0	$6,035,033
Service Charges	$0	$87,945	$0	$290,000
Total Revenue	**$0**	**$6,628,000**	**$0**	**$6,325,033**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of licensed homes in operation throughout the fiscal year	630	600	435
Number of licensing and monitoring visits	1,780	1,400	1,200

Division: Aging, Disability & Veterans Services

Program Characteristics:

Program Description

Low-income older adults, people with disabilities, and people with behavioral health needs face a variety of health and safety risks. They often need support to maintain independence and quality of life as they age. A lack of support can result in more serious and costly medical care needs. Long Term Services & Supports (LTSS) help people live safe, healthy lives and maintain independence as they age. Some people need support with daily activities such as bathing, preparing meals, or managing household tasks. These services help prevent or delay expensive nursing home costs, hospital stays, and readmissions.

LTSS benefit enrollment begins with determining participants' eligibility. Specialists review applications and enroll participants in the appropriate benefits. There are many different benefit programs, and each has specific eligibility guidelines. LTSS staff help participants understand their options. Benefit programs include the Oregon Health Plan, Medicaid, and SNAP (food stamps). Oregon has a "no wrong door" policy, which means anyone can get help enrolling in these benefits at an LTSS office. Participants can also get help choosing managed care and Medicare Part D plans. LTSS case managers learn about the level of care someone needs and help create care plans that support safety and independence. While nursing home care may be the best option for some, case managers try to give people other options. They support participants' ability to remain at home or in a community-based facility such as an adult care home or assisted living facility.

Equity Statement

Long Term Services and Supports (LTSS) strives to provide culturally responsive services to all participants. LTSS is proud to employ a culturally and linguistically diverse team with many knowledge, skills and abilities (KSA) positions. All staff are trained in diversity, equity, and inclusion. ADVSD conducts outreach to encourage people of all identities and backgrounds to access its services.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$39,419,680	$0	$43,828,990
Contractual Services	$3,015,015	$26,574	$4,306,254	$26,574
Materials & Supplies	$0	$244,182	$0	$218,020
Internal Services	$0	$12,610,874	$0	$12,091,356
Total GF/non-GF	**$3,015,015**	**$52,301,310**	**$4,306,254**	**$56,164,940**
Total Expenses:	**$55,316,325**		**$60,471,194**	
Program FTE	0.00	312.00	0.00	312.00
Program Revenues				
Intergovernmental	$0	$51,595,125	$0	$55,432,851
Other / Miscellaneous	$0	$706,185	$0	$732,089
Total Revenue	**$0**	**$52,301,310**	**$0**	**$56,164,940**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants served in Long Term Services & Supports (LTSS) programs	55,436	59,000	60,000
Number of participants receiving Medicaid service case management	12,732	13,734	12,000

Division: Aging, Disability & Veterans Services

Program Characteristics:

Program Description

Older adults and people with disabilities are often dependent on others to meet their needs. This can put them at risk of abuse, financial exploitation, neglect, or self-neglect. About one in nine vulnerable adults is the victim of abuse at some time during their life. Adult Protective Services (APS) works to stop the abuse of vulnerable adults and hold abusers accountable. The APS Training and Outreach Coordinator educates the community about the program. They ensure that service providers and the general public know how to recognize and report suspected abuse.

When someone suspects abuse, they make a report to APS. Every report is quickly screened so that the reported victim is offered the right support. If needed, the case is assigned to an APS investigator. Some investigators focus on reports for people living in the community. Others investigate reports related to long-term care facilities.

If investigators confirm the suspected abuse, they may work with law enforcement to prosecute offenders. Sometimes there is no abuse, but the individual is still found to be highly vulnerable. In these cases, APS case managers may follow up with at-risk individuals for up to a year to support their ongoing safety. They help connect individuals to health care, housing, social services, or legal advocacy.

Equity Statement

Adult Protective Services (APS) aims to overcome cultural and language barriers so that anyone at risk can access services. The APS Training and Outreach Coordinator builds relationships with culturally specific organizations to make sure connecting to APS is accessible to everyone, regardless of their background or identity.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$61,236	$8,723,716	$60,792	$8,791,067
Contractual Services	$994,478	$5,000	$66,726	$5,000
Materials & Supplies	$2,000	$69,484	$2,224	$76,423
Internal Services	$5,039	$2,373,083	$30,967	$2,093,783
Total GF/non-GF	**$1,062,753**	**$11,171,283**	**$160,709**	**$10,966,273**
Total Expenses:	**$12,234,036**		**$11,126,982**	
Program FTE	0.35	56.67	0.35	54.53
Program Revenues				
Intergovernmental	$0	$11,171,283	$0	$10,966,273
Total Revenue	**$0**	**$11,171,283**	**$0**	**$10,966,273**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of Adult Protective Service intakes	9,867	10,000	9,800
Number of Adult Protective Service investigations completed	3,220	3,550	3,250

Division: Aging, Disability & Veterans Services

Program Characteristics:

Program Description

Veterans Services programs support dignity and quality of life for those who served in the U.S. Armed Forces. This offer includes two separate programs. It ensures that Veterans and their families understand and receive all the retroactive benefits, pension, disability, and healthcare benefits they are entitled to. It also helps Veterans make choices about in-home care to continue living safely with support.

Veterans Services (VS) provides free benefit enrollment and advocacy help to Veterans and their eligible family members. Veterans Services Officers (VSOs) are trained and certified to help Veterans understand and apply for benefits and navigate the claims process, which is complex and often involves long wait times. Multnomah County's Veterans Services Task Force, led by ADVSD, strengthens the network of community partners.

Veteran Directed Care (VDC) allows eligible Veterans to receive care at home, helping them with daily activities. Veterans in this program receive a budget to hire their own care workers. They work with a case manager to plan what goods and services best meet their care needs. VDC staff assess and enroll Veterans and provide ongoing counseling and support to them, their families, and caregivers. VDC supports ADVSD's value of honoring choice and supporting safety and independence in one's home. In addition to serving Multnomah County, VDC is also a statewide hub supporting other Oregon counties.

Equity Statement

Veterans Services and Veteran Directed Care ensures that all Veterans and their families receive the benefits they are entitled to, regardless of their background or identity. The Veterans Services Task Force promotes fair access for Veterans who experience discrimination and additional barriers to services. ADVSD conducts outreach to encourage people of all identities and backgrounds to access its services.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$422,146	$723,270	$476,154	$695,285
Contractual Services	$0	$9,270,154	$0	$7,597,604
Materials & Supplies	$30,859	$261	$30,861	$2,936
Internal Services	$60,457	$69,006	$45,708	$75,663
Total GF/non-GF	**$513,462**	**$10,062,691**	**$552,723**	**$8,371,488**
Total Expenses:	**$10,576,153**		**$8,924,211**	
Program FTE	3.20	5.00	3.40	4.60
Program Revenues				
Intergovernmental	$0	$10,062,691	$0	$8,371,488
Total Revenue	**$0**	**$10,062,691**	**$0**	**$8,371,488**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of claims filed for Veterans or eligible family members	1,147	1,150	1,150
Number of Veterans served by Veteran Directed Care statewide	239	100	100

Division: Aging, Disability & Veterans Services

Program Characteristics:

Program Description

When a court finds that an individual is profoundly mentally incapacitated and unable to care for themselves, a judge may appoint a public guardian to help them make informed decisions. These individuals are at severe risk of abuse and harm, and often need intensive support and specialized housing arrangements. The Public Guardian and Conservator (PGC) program ensures quality of life for highly vulnerable adults with mental incapability, behavioral health needs, developmental disabilities, dementia, or brain injury. PGC seeks to balance the need for safety and protection with the right to autonomy and advocacy for the protected person's own goals, preferences, and quality of life. Both guardianship and conservatorship are considered interventions of last resort. PGC provides consultation to the public and to service providers to find less restrictive alternatives whenever possible.

Guardians help individuals make decisions about where to live, medical and psychiatric care, end-of-life planning, and financial management. Even with high caseloads, guardians offer 24/7 services for emergencies. They work alongside Adult Protective Services, law enforcement, families, hospitals, and others to support the protected person's needs. A conservatorship may be necessary to manage the finances of a protected person. Conservatorship is a more intense form of financial management and protection. Conservators manage income sources, bills, and large assets such as trusts and properties.

Equity Statement

The program ensures all individuals under guardianship can access culturally relevant placements and services honoring their preferences, needs, and values. PGC employs a knowledge, skills, and abilities (KSA) staff to support this objective. All staff are nationally certified and follow standards aligned with equitable and inclusive service delivery. PGC engages in community outreach and relationship building to reach people of all identities and backgrounds.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,700,692	$0	$1,807,740	$0
Contractual Services	$30,684	$0	$31,697	$0
Materials & Supplies	$39,147	$0	$92,983	$0
Internal Services	$177,381	$0	$204,765	$0
Total GF/non-GF	**$1,947,904**	**$0**	**$2,137,185**	**$0**
Total Expenses:	**$1,947,904**		**$2,137,185**	
Program FTE	11.00	0.00	11.00	0.00
Program Revenues				
Fees, Permits & Charges	$53,836	$0	$0	$0
Intergovernmental	$0	$0	$53,836	$0
Total Revenue	**$53,836**	**$0**	**$53,836**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of county residents with a Public Guardian/Conservator	133	140	140
Number of contacts diverted to a less costly and less restrictive resource	298	350	350

Division: Aging, Disability & Veterans Services

Program Characteristics:

Program Description

The Aging, Disability, and Veterans Services Division (ADVSD) Administration provides oversight of all essential functions of the division, including ensuring ADVSD meets its financial and regulatory requirements through budget development, fiscal compliance, evaluation, data collection, and reporting. There are 31 unique programs in ADVSD, offered by both county staff and contracted community partners. Administration helps programs provide equitable, high-quality services and public accountability, and helps to ensure alignment with county and department values. It leads the development of the Older Americans Act Area Plan. It also supports the goals of the County Workforce Equity Strategic Plan and the ADVSD Strategic Work Portfolio. This team values transparency, efficiency, and collaboration.

Team members engage with division staff, community partners, and consumers to seek input on program decisions and help achieve goals. This team coordinates the Aging Services Advisory Council and Disability Services Advisory Council.

Administration provides project management, communications, data solutions, administrative support, and quality improvement coaching to programs across the division. Administration helps programs gather and analyze information about their service efficacy. They organize large amounts of data and use it to suggest improvements to program operations, making services more effective and easier for people to find, access, and use.

Equity Statement

Aging, Disability, and Veterans Services Division (ADVSD) serves marginalized and underserved communities impacted by systemic and structural barriers. ADVSD Administration promotes and supports equity by identifying gaps in service delivery and consumer outcomes, and working to reduce barriers to access for people of all identities and backgrounds. The team provides insight on program budgets to help leaders invest in diverse communities.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$380,216	$2,159,996	$388,185	$2,199,655
Contractual Services	$169,070	$29,523	$0	$36,738
Materials & Supplies	$8,414	$96,482	$37,654	$263,651
Internal Services	$25,910	$545,422	$31,024	$434,599
Total GF/non-GF	**$583,610**	**$2,831,423**	**$456,863**	**$2,934,643**
Total Expenses:	**$3,415,033**		**$3,391,506**	
Program FTE	2.10	11.90	1.95	11.05
Program Revenues				
Intergovernmental	$0	$2,831,423	$0	$2,934,643
Total Revenue	**$0**	**$2,831,423**	**$0**	**$2,934,643**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of opportunities for participants and community members to give feedback to the Aging, Disability, and Veterans Services Division (ADVSD)	121	132	132
Number of ADVSD programs using data dashboards to support operations and make decisions	18	19	19

Division: Aging, Disability & Veterans Services

Program Characteristics:

Program Description

Services for older adults and people with disabilities are often provided by teams who specialize in one particular area. A service might focus on aging, homelessness, health care, behavioral health, addiction, or abuse. When someone has many different needs, case managers can have trouble finding them the right help.

The Multi-Disciplinary Team (MDT) aims to build a connected network of services. These connections improve the quality of care for individuals with complex needs. MDT helps case managers and human services investigators find the right support for the people they serve.

MDT works in five locations across the county, including Medicaid branch offices and District Senior Centers. Each team includes an Adult Protective Services (APS) clinical services specialist, community health nurse, an APS human services investigator or case manager, and other professionals as needed. Service providers working with consumers with highly complex care needs can consult MDT for expert advice. MDT provides the appropriate referrals, consultation, training, assessment, and intervention for each case. MDT nursing services are provided in the homes of isolated at-risk adults.

Equity Statement

The Aging, Disability, and Veterans Services Division (ADVSD) Multi-Disciplinary Team is familiar with the wide array of culturally specific services available in our community. They find resources that are culturally and linguistically suited to the participant’s needs. They connect case managers with resources where participants will feel safe and respected.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$371,158	$635,595	$285,898	$534,208
Contractual Services	$73,193	$0	$0	$0
Materials & Supplies	$224	$11,386	$0	$8,778
Internal Services	$26,630	$146,157	$0	$105,723
Total GF/non-GF	**$471,205**	**$793,138**	**$285,898**	**$648,709**
Total Expenses:	**$1,264,343**		**$934,607**	
Program FTE	1.85	3.13	1.45	2.67
Program Revenues				
Intergovernmental	$0	$793,138	$0	$648,709
Total Revenue	**$0**	**$793,138**	**$0**	**$648,709**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants served by the Multi-Disciplinary Team (MDT)	335	300	260
Number of referrals to county or community resources from the MDT	396	230	230

Division: Aging, Disability & Veterans Services

Program Characteristics:

Program Description

People who are unhoused, or admitted in a hospital, or living in a nursing home face unique barriers to moving safely back home or into the community. They need a high level of support when applying for Medicaid Long Term Services & Supports (LTSS) case management. The goal of this program offer is to support participants' safety and independence living at home or in the community. It helps participants overcome barriers to accessing LTSS. This offer includes two separate programs.

The Transition and Diversion Program (T&D) serves individuals who are living in a nursing home or admitted to a hospital. Many supports are needed to successfully transition back to their home or to a community setting. If moving back home, consumers may need care workers, home-delivered meals, medical alert systems, and medical equipment. If moving to a community-based home, they may need help finding a suitable placement. T&D coordinates all of these services. T&D also has staff who work in hospitals. They help patients apply for Medicaid LTSS and avoid being discharged to a nursing home.

The Homeless Mobile Intake Team (HMIT) serves people who are unhoused or experiencing severe and persistent mental illness. HMIT staff meet people where they are to conduct eligibility assessments. Case managers help eligible participants enroll in Medicaid LTSS. They also help find safe, stable housing and set up in-home supports. HMIT partner with Home Forward to offer 15 Regional Long-Term Rent Assistance (RLRA) vouchers which provide rent assistance for up to 10 years.

Equity Statement

Transition and Diversion and the Homeless Mobile Intake Team are committed to providing culturally responsive services. Teams have staff who speak multiple languages, are culturally knowledgeable, and are trained in diversity, equity, and inclusion. ADVSD conducts outreach to encourage people of all identities and backgrounds to access its services.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$5,484,864	$0	$5,967,608
Contractual Services	$1,392,419	$430,448	$794,315	$305,735
Materials & Supplies	$0	$46,167	$0	$76,453
Internal Services	$0	$1,741,153	$0	$1,337,401
Total GF/non-GF	**$1,392,419**	**$7,702,632**	**$794,315**	**$7,687,197**
Total Expenses:	**$9,095,051**		**$8,481,512**	
Program FTE	0.00	40.00	0.00	40.00
Program Revenues				
Intergovernmental	$0	$7,093,400	$0	$7,006,681
Other / Miscellaneous	$0	$181,284	$0	$377,281
Total Revenue	**$0**	**$7,274,684**	**$0**	**$7,383,962**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Annual number of transitions from a nursing home	352	400	400
Number of individuals who began an intake with the Homeless Mobile Intake Team	355	340	340

Division: Aging, Disability & Veterans Services

Program Characteristics:

Program Description

Homeless Mobile Intake Team (HMIT) Behavioral Health Navigation helps individuals with mental health needs navigate the barriers they experience as they try to access benefits and services.

The process for receiving Home and Community-Based Services (HCBS) for a behavioral health disability is fragmented and vague with no single entry point. Accessing these services can be difficult for individuals who need them because of limited resources and support to help them navigate the system. Many individuals experiencing mental health crises are unable to navigate the steps required to complete the process–especially those who are unhoused.

The program focuses on consumers who are applying for benefits through Multnomah County Aging, Disability, and Veterans Services (ADVSD) Long Term Services and Supports (LTSS) but are denied (or at danger of being denied) due to a behavioral health diagnosis being a driver for their care needs. Navigators assist clients with mental health needs who are applying for LTSS and help them start the intake process for behavioral health benefits.

Equity Statement

Homeless Mobile Intake Team Behavioral Health Navigation focuses on serving people who are houseless and experiencing barriers to accessing support. The team is committed to providing culturally responsive services, and staff are trained in diversity, equity, and inclusion. The Aging, Disability, and Veterans Services Division conducts outreach to encourage people of all identities and backgrounds to access its services.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	$390,519	$0
Internal Services	$0	$0	$110,177	$0
Total GF/non-GF	**$0**	**$0**	**$500,696**	**$0**
Total Expenses:	**$0**		**$500,696**	
Program FTE	0.00	0.00	3.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of individuals assigned to a navigator and engaged in the Behavioral Health eligibility process	N/A	75	75
Number of individuals connected to Behavioral Health Home and Community-Based services	N/A	N/A	50

Division: Aging, Disability & Veterans Services

Program Characteristics:

Program Description

There are many public and private services and benefits for older adults, people with disabilities, and Veterans. Barriers to finding resources are often highest for those most in need. The Aging, Disability, and Veterans Services Division (ADVSD) provides easy and equitable resource navigation, helps individuals make informed decisions about their options, and quickly connects them with resources that meet their needs.

The Aging and Disability Resource Connection (ADRC) is a helpline and website, offering a single entry point for many community programs and benefits for older adults, people with disabilities, Veterans, and their families. Similar helplines are offered nationwide by Area Agencies on Aging as part of the Older Americans Act. Our ADRC Helpline is a 24/7 “front door” for our other programs–most of which do not have public offices–answering after-hours for the Public Guardian Office and Adult Care Home Program. Information Specialists provide information, follow-up, and crisis help. Community partnerships are important to the program's success. Many ADRC Information Specialists work for senior centers and community partners.

Additional programs funded in part or fully by this offer help people navigate and pay for Medicare benefits, prevent Medicare fraud, and increase engagement with programs and services at senior centers. These programs are: Focal Point Activities, Options Counseling, Oregon Project Independence - Medicaid, Oregon Medicare Savings Connect, Senior Health Insurance Benefit Assistance, and Senior Medicare Patrol.

Equity Statement

The Aging and Disability Resource Connection (ADRC) is available to all, regardless of background, income, or identity. ADRC Information Specialists inquire whether individuals have specific cultural or language preferences to find the most suitable resources. Many Information Specialists work for Enhancing Equity community partners. ADVSD conducts outreach at community events, focusing on marginalized communities that may experience additional barriers to accessing resources.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$615,236	$3,056,227	$551,950	$3,320,327
Contractual Services	$1,743,055	$75,729	$1,526,219	$31,145
Materials & Supplies	$280	$82,133	$279	$104,234
Internal Services	$426,847	$694,259	$451,662	$688,216
Total GF/non-GF	**$2,785,418**	**$3,908,348**	**$2,530,110**	**$4,143,922**
Total Expenses:	**$6,693,766**		**$6,674,032**	
Program FTE	4.68	23.98	3.97	23.98
Program Revenues				
Intergovernmental	$0	$3,908,348	$0	$4,143,922
Total Revenue	**$0**	**$3,908,348**	**$0**	**$4,143,922**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Total reception, information, assistance and referral contacts to the Aging and Disability Resource Connection (ADRC) Helpline	75,592	70,000	72,000
Number of referrals to county or community resources from the ADRC Helpline	46,647	44,000	46,000

Division: Aging, Disability & Veterans Services

Program Characteristics:

Program Description

Having access to healthy meals each day is a challenge for many older adults and people with disabilities. Limited income, functional impairment, and social isolation can be barriers to maintaining adequate nutrition. Poor nutrition may lead to malnourishment, disease, and difficulty living independently at home. The Nutrition Program helps support health and wellness and reduce social isolation. Options honor consumer choice and cultural preferences. Staff also help connect participants to other services in the community.

The Aging, Disability, and Veterans Services Division (ADVSD) contracts with community partners to provide healthy meals and nutrition education. Meals are both home-delivered and available at community dining sites (congregate meals). Participants' level of nutritional risk is assessed on a regular basis. Their meal services can be adjusted as needed. The Nutrition Program offers a variety of food to meet participants' preferences. A dietitian ensures that all meals meet federal nutritional standards.

This program also addresses social isolation in several ways. When participants receive home-delivered meals, the staff making the delivery often visit and check in with them. Participants who attend congregate meal sites can socialize in a community setting. Visiting a meal site also encourages participants to engage with other events and offerings at the service site.

Equity Statement

Nutritious meals that support the culture of underserved and marginalized communities are an important part of wellness for many older adults and people with disabilities. Enhancing Equity partner organizations often partner with culturally specific restaurants and grocery stores within their communities, supporting local businesses. The Aging, Disability, and Veterans Services Division (ADVSD) conducts outreach to encourage people of all identities and backgrounds to access its services.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$316,955	$2,016,315	$381,364	$1,956,412
Materials & Supplies	$2,274	$3,353	$2,274	$0
Total GF/non-GF	**$319,229**	**$2,019,668**	**$383,638**	**$1,956,412**
Total Expenses:	**$2,338,897**		**$2,340,050**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$2,019,668	$0	$1,956,412
Total Revenue	**$0**	**$2,019,668**	**$0**	**$1,956,412**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of meals served	461,500	486,592	470,000
Number of meals served by culturally specific providers	44,412	47,126	45,240

Division: Aging, Disability & Veterans Services

Program Characteristics:

Program Description

As people age, the risk for developing chronic health conditions, such as diabetes or heart disease, increases. Adults with chronic conditions have higher rates of hospital admissions. The risk of falling also increases with age. Studies show that falls result in health decline and potential hospitalization. Failure to follow care plans after a hospital stay can lead to return visits to the hospital. This offer includes two separate programs. These programs support participants' health and safety, and give participants skills to manage their own health as they age. The programs funded in this offer are proven to reduce participants' hospitalization rates.

Evidence-Based Health Promotion (EBHP) programs teach people how to manage chronic health conditions and avoid falls. EBHP includes a variety of courses and workshops offered by community partners. Topics include diabetes prevention, chronic disease self-management, Tai Chi, and walking groups. These courses help reduce social isolation and support healthy aging.

The Care Transitions program supports people who were recently hospitalized due to a chronic health condition. Coaches visit participants at home to help them understand and follow their care plan. They review medications and discuss red flags related to participants' health conditions. Coaches help participants take an active role in managing their health.

Equity Statement

The Aging, Disability, and Veterans Services Division (ADVSD) works with Enhancing Equity partner organizations to offer Evidence-Based Health Promotion activities. They tailor classes to the cultures and languages of the populations they serve, allowing for meaningful participation from people of various backgrounds and identities. Care Transitions coaches consider the cultural and linguistic needs of each participant, including using language interpreters.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$140,932	$0	$146,877
Contractual Services	$113,050	$98,804	$66,742	$157,499
Materials & Supplies	$12,408	$12,022	$6,195	$10,929
Internal Services	$0	$63,424	$0	$31,532
Total GF/non-GF	**$125,458**	**$315,182**	**$72,937**	**$346,837**
Total Expenses:	**$440,640**		**$419,774**	
Program FTE	0.00	1.00	0.00	1.00
Program Revenues				
Intergovernmental	$0	$54,182	$0	$90,823
Other / Miscellaneous	$0	$261,000	$0	$256,014
Total Revenue	**$0**	**$315,182**	**$0**	**$346,837**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of Evidence-Based Health Promotion (EBHP) courses offered	27	25	27
Number of participants served by Care Transitions	534	165	165

Division: Aging, Disability & Veterans Services

Program Characteristics:

Program Description

The programs in this offer help people age safely in their homes and prevent or delay the need for more expensive nursing home care. Older adults, people with disabilities, and Veterans face many barriers to aging safely in their homes. Without proper support, they are at risk of health decline, injury, social isolation, or placement in nursing homes. This offer funds several related programs that address these needs. Participants can access these programs through the Aging and Disability Resource Connection (ADRC) Helpline or Aging, Disability, and Veterans Services Division (ADVSD) community partner organizations.

Oregon Project Independence (OPI) and OPI-Medicaid serve people aged 60+ who need in-home services but may not need or qualify for Medicaid Long Term Services & Supports. OPI offers services to help participants live well at home. These include housekeeping, personal care, home-delivered meals, case management, assistive technology and more. Case managers assess participants' needs, create personalized care plans, make home visits, and provide advocacy and resource referrals. OPI-M offers more service options than OPI, and participants can receive a higher number of service hours each month.

Older Americans Act Case Management serves older adults and people with disabilities who may not need or qualify for in-home care services. It offers case management and resource referrals. Options Counseling is a short-term service to help people understand their long-term care options and make informed decisions.

Equity Statement

Participants have the option of accessing all of these programs through Enhancing Equity partners, who offer culturally and linguistically appropriate services. Aging, Disability, and Veterans Services Division (ADVSD) community partner organizations help increase access to services for people of all backgrounds and identities.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$180,724	$1,550,762	$0	$1,189,417
Contractual Services	$1,127,666	$994,672	$1,048,882	$247,562
Materials & Supplies	$104	$13,102	$104	$26,807
Internal Services	$15,115	$493,647	$11,442	$506,978
Total GF/non-GF	**$1,323,609**	**$3,052,183**	**$1,060,428**	**$1,970,764**
Total Expenses:	**$4,375,792**		**$3,031,192**	
Program FTE	0.80	12.68	0.00	9.13
Program Revenues				
Intergovernmental	$0	$3,044,008	$0	$1,970,764
Service Charges	$0	$8,175	$0	$0
Total Revenue	**$0**	**$3,052,183**	**$0**	**$1,970,764**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of people receiving case management and/or in-home services	2,196	2,250	2,250
Number of participants served by culturally specific providers	1,230	800	800

Division: Aging, Disability & Veterans Services

Program Characteristics:

Program Description

Rising costs of living make it difficult for older adults, people with disabilities, and Veterans to keep their housing. Unhealthy living conditions can put people at risk of eviction. People who have recently found stable housing often need support to avoid returning to homelessness. This program offer helps people age with safety and dignity in their homes. It helps participants avoid becoming homeless, and improves the health and safety of participants' living conditions. This offer includes two separate programs.

The Safety Net Program offers a variety of services that support housing stability. These include rent assistance, utility assistance, emergency motel vouchers, deposits, moving services, extreme cleaning, and bedbug removal. It also helps participants pay for items like eyeglasses, dentures, and medical equipment.

Equity Statement

The Safety Net Program has helped many people in marginalized and underserved populations and wants to continue expanding its reach. The program works with Aging, Disability, and Veterans Services Division (ADVSD) Enhancing Equity partners to invite referrals and ensure equitable access to services for their communities. ADVSD conducts outreach to encourage people of all identities and backgrounds to access its services.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$145,140	$143,961	$150,556	$150,556
Contractual Services	$714,440	$0	$558,681	$0
Materials & Supplies	$1,926	$19	$1,927	$0
Internal Services	$14,395	$35,107	$14,008	$30,494
Total GF/non-GF	**$875,901**	**$179,087**	**$725,172**	**$181,050**
Total Expenses:	**$1,054,988**		**$906,222**	
Program FTE	1.00	1.00	1.00	1.00
Program Revenues				
Intergovernmental	$0	$179,087	$0	$181,050
Total Revenue	**$0**	**$179,087**	**$0**	**$181,050**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of people served by the Safety Net Program	828	600	452
Number of Multnomah County bedbug hotline calls from renters	114	100	100

Division: Aging, Disability & Veterans Services

Program Characteristics:

Program Description

Aging, Disability, and Veterans Services Division (ADVSD) Transportation Services help older adults, people with disabilities, and Veterans get around. ADVSD provides transportation services that are safe, affordable and meet participants' physical and language needs. For older adults, people with disabilities, and Veterans, a lack of transportation can have negative impacts on health, safety, and quality of life.

The Transportation Services program coordinates and pays for rides to social activities, food programs, stores, pharmacies, and medical appointments. Participants can request services through the ADRC Helpline or through community partner organizations. Case managers and transportation coordinators work with participants to schedule the appropriate types of transportation. Advisory councils have requested lower ride costs, more frequent service, and safer rides.

When surveyed, participants also said that door-to-door transportation services were very important to them. They need help getting to appointments, community events, and senior centers, as many have mobility issues or other limiting health conditions. Transportation options include TriMet HOP cards, door-to-door service, and emergency rides. The program also uses specialized vehicles that accommodate mobility devices.

Equity Statement

Transportation Services are available through Enhancing Equity partner organizations. This helps extend the program to more communities. If participants do not speak English, the program uses an interpreter or finds drivers who speak their language. Evaluation of this program includes and encourages feedback from participants who experience barriers based on their background or identity.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$165,089	$0	$125,781
Contractual Services	$158,814	$1,978,936	$147,882	$1,985,931
Materials & Supplies	$9,000	$57	$0	$637
Internal Services	$0	$13,657	$0	$13,302
Total GF/non-GF	**$167,814**	**$2,157,739**	**$147,882**	**$2,125,651**
Total Expenses:	**$2,325,553**		**$2,273,533**	
Program FTE	0.00	0.95	0.00	0.75
Program Revenues				
Intergovernmental	$0	$2,157,739	$0	$2,125,651
Total Revenue	**$0**	**$2,157,739**	**$0**	**$2,125,651**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants who received transportation assistance	945	816	810
Number of participants who received TriMet tickets or passes	355	350	300

Division: Aging, Disability & Veterans Services

Program Characteristics:

Program Description

Community Services (CS) within the Aging, Disability, and Veterans Services Division (ADVSD) offers a wide array of federal, state and local programs. CS aims to improve the safety and well-being of vulnerable older adults. This program offer provides operational support to contracted community partners and paid caregivers, helping publicly funded programs operate effectively. It also provides several programs that promote safety and meaningful community participation for older adults.

The Data Quality and Program Support (DQPS) team supports 22 unique programs within Community Services. They provide operational support to help programs meet funding requirements and prevent interruptions to service delivery. DQPS also plays an important role in supporting Oregon Project Independence - Medicaid (OPI-M) program operations. Activities include invoice processing, payment authorization, electronic document management, data analysis, and reporting.

Additional programs funded by this offer promote safety and meaningful community participation for older adults:
- Foster Grandparent Program: pairs older adult volunteers with school-aged children to provide mentoring and tutoring.
- Oregon Money Management Program: protects older adults from financial abuse by managing their federal income.
- Older Adult Behavioral Health Initiative: provides staff training, public workshops, case consults, and system navigation.
- Older Americans Act Legal Services: provides legal advice and attorney services to low income older adults.

Equity Statement

Aging, Disability, and Veterans Services Division (ADVSD) Community Services assists our Enhancing Equity partners, many of whom have not otherwise worked with the county, to navigate contracting, reporting, and invoicing processes and provide programming that is tailored to underserved communities.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$851,982	$1,657,403	$1,010,795	$3,170,542
Contractual Services	$45,070	$243,381	$46,557	$243,381
Materials & Supplies	$9,898	$82,618	$595	$70,176
Internal Services	$67,668	$467,883	$89,678	$491,165
Total GF/non-GF	**$974,618**	**$2,451,285**	**$1,147,625**	**$3,975,264**
Total Expenses:	**$3,425,903**		**$5,122,889**	
Program FTE	5.05	11.67	5.80	16.87
Program Revenues				
Intergovernmental	$0	$2,236,587	$0	$3,761,921
Service Charges	$0	$214,698	$0	$213,343
Total Revenue	**$0**	**$2,451,285**	**$0**	**$3,975,264**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of invoices and claims processed on behalf of community partners and consumers	7,635	6,900	6,900
Number of administrative tasks completed to support Oregon Project Independence - Medicaid (OPI-M) program operations	2,654	3,250	3,500

Division: Aging, Disability & Veterans Services

Program Characteristics:

Program Description

The goal of the Family Caregiver Support Program (FCSP) is to support people who take care of their older family members or older adults who raise relatives' children. FCSP aims to reduce caregiver burnout and prevent or delay the need for more costly care options. FCSP aims to keep families together and improve quality of life for caregivers and their loved ones.

Many people provide unpaid care to family members. Without the right support, caregiving duties can become unmanageable and loved ones may need to be placed in a care facility. Caregivers often face financial burdens, strain on their relationships, stress, and negative health impacts.

FCSP provides a support system for unpaid family caregivers. This helps them provide quality care to their loved ones and makes caregiving easier. Participants get information, training, counseling, case management, and peer support. Meetings and classes are offered both online and in-person to meet families' needs. FCSP also offers respite services and financial aid, providing temporary relief to help make long-term caregiving more manageable.

Equity Statement

The Family Caregiver Support Program works with Enhancing Equity partner organizations to connect with participants who experience barriers or discrimination based on their background or identity. The Aging, Disability, and Veterans Services Division (ADVSD) conducts outreach to encourage people of all identities and backgrounds to access its services.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$156,199	$49,507	$132,749	$53,515
Contractual Services	$22,448	$178,847	$23,259	$158,626
Materials & Supplies	$0	$21,039	$0	$21,028
Internal Services	$14,395	$7,189	$14,015	$6,918
Total GF/non-GF	**$193,042**	**$256,582**	**$170,023**	**$240,087**
Total Expenses:	**$449,624**		**$410,110**	
Program FTE	1.00	0.50	0.80	0.50
Program Revenues				
Intergovernmental	$0	$256,582	$0	$240,087
Total Revenue	**$0**	**$256,582**	**$0**	**$240,087**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of unpaid family caregivers served by the Family Caregiver Support Program	335	260	260
Number of individuals who receive care from Family Caregiver Support Program participants	357	290	290

Youth and Family Services

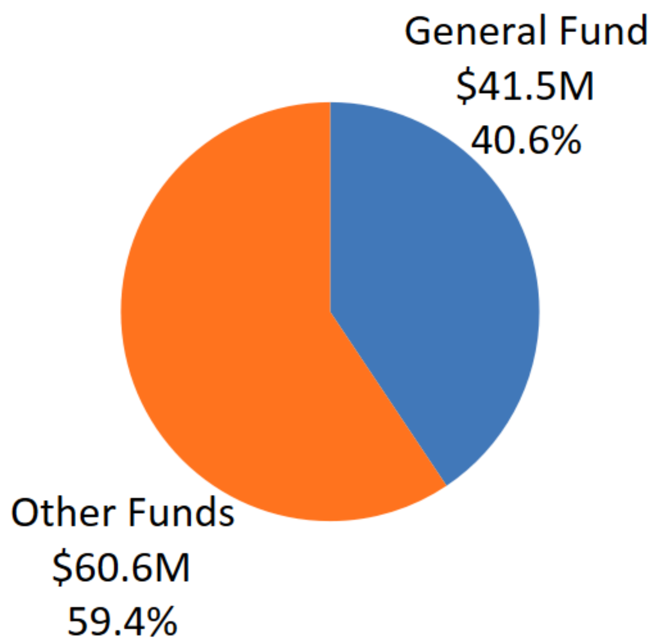
$102.1 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

89.80 FTE

(full time equivalent)



The Youth & Family Services Division (YFS) works to address barriers and improve stability for Multnomah County families by meeting them where they are through strength-based, trauma informed, and culturally responsive and culturally specific services.

The Youth & Family Services Division manages over 30 programs and initiatives through five core system and policy areas: 1) Energy Services: 2) Housing and Economic Stability; 3) Education Supports; 4) Early Childhood; and 5) Domestic and Sexual Violence.

YFS administers a diverse range of federal, state, and local programs designed to stabilize and support Multnomah County residents. These services encompass eviction prevention and rent assistance, youth and family stability, SUN (Schools Uniting Neighborhoods) Community Schools, and essential supports like food, energy assistance, and weatherization. While several key programs such as the Domestic and Sexual Violence Crisis Response Unit and Bienestar de la Familia are provided by County staff, the majority of YFS services are delivered through contracts with community nonprofits.

YFS collaborates with city governments, Home Forward, school districts, other County departments, and culturally specific and responsive community-based organizations to achieve its goals. YFS acts as the managing partner for several multi-jurisdictional collaboratives, including the SUN Service System and the Family Violence Coordinating Council. YFS also serves as the designated Community Action Agency for Multnomah County, with the Multnomah County Commission on Economic Dignity serving as its advisory body.

Demographics and Equity Data
YFS works to close outcome gaps by designing culturally responsive services, expanding outreach to underserved communities, and addressing systemic barriers. To ensure these efforts are effective, we use real-time data to monitor our progress and adapt our programs as needed.

Key Community Disparities
We address community disparities to strive toward making Multnomah County a place where all residents have an equitable opportunity to thrive. Key disparities addressed in our programs include:

- **Eviction Disparities**: Decades of discrimination and economic inequality have fueled high eviction rates among Oregon's communities of color. YFS's rent assistance program prevented eviction for **3,547 households** supporting 9,040 individuals, with 92% remaining stably housed after 12 months. In FY 2025, 83% of households receiving emergency rent assistance identified as Black, Indigenous, or People of Color (BIPOC).
- **Poverty**: Multnomah County poverty data shows disproportionate impacts on communities of color, children, single-parent households, and people with disabilities. By intentionally selecting sites based on poverty data, we've located **90%** of SUN Community Schools (SUN CS) in historically underserved neighborhoods. The other SUN CS sites act as geographic touch points for students living in pockets of poverty that exist in higher-income neighborhoods.
- **Graduation rates**: According to the Oregon Department of Education, Black and Indigenous students' graduation rates fall nearly 10 percentage points below the state average and up to 20 points behind their highest-performing peers. Through SUN Youth Advocacy, **96.5% of youth participants** made progress or achieved individualized action or success plan goals. Furthermore, **18,199 youth** engaged in services through SUN Community Schools.
- **Domestic Violence**: The domestic violence health crisis disproportionately impacts our most marginalized communities and is one of the leading causes of homelessness for women and children. **737 domestic and sexual assault survivors** received specialized legal consultation, **1,465 accessed protective orders** through the Gateway Center, and **1,345 were assisted** with courthouse-based restraining order advocacy.

Significant Division Changes

Metro Supportive Housing Services (SHS) Reductions to Gateway Center (25050): A $461,548 reduction in FY 2027 eliminates two full-time housing advocate positions in community partner organizations and $125,000 in direct client assistance. These advocates represent the only dedicated eviction-prevention resource within the domestic violence (DV) coordinated access system.

Addition to Peer Navigators (25131B): In FY 2027, and additional $75,000 in General Fund ($60,000 one-time-only and $15,000 ongoing) will expand the Peer Navigator program to connect an additional

35 low-income residents who are involved in the criminal justice system to resources to meet their needs.

Restoration of full Eviction Prevention Legal Services (25131C): In FY 2027, $210,164 in one-time-only General Fund will sustain eviction legal defense services at the FY 2026 level, serving a total of 300 households to prevent eviction.

Eviction Prevention (25133B): The FY 2027 budget adds $3.6 million and 4.00 FTE in ongoing Eviction Prevention funding ($2.4 million in General Fund and $1.2 million in Supportive Housing Services funding), serving 500 households.

Medicaid Waiver Rent Assistance Program (MWRAP) (25133C): Launched in April 2025, the Medicaid Waiver Rent Assistance Program (MWRAP) connects housing stability with health outcomes. The program helps Oregon Health Plan members with serious health conditions access the Health-Related Social Needs (HRSN) benefit. This support ensures that medical hardships do not lead to eviction or homelessness. In FY 2027, a new investment of $200,000 in one-time-only General Fund (25133D) provides the immediate resources necessary to rapidly re-home households who were evicted while waiting on Health-Related Social Needs (HRSN) funding through MWRAP. These households would otherwise be disqualified from receiving benefits.

Eviction Prevention In Reach Team (25133E): In FY 2027, a new investment of $565,000 in one-time-only Metro Supportive Housing Services (SHS) funding expands the county's MWRAP intake team and provides critical eviction prevention via the creation of a mobile in-reach team for households living in Home Forward public housing complexes. It also expands partnership with the County Health Department's Behavioral Health Division to help stabilize program and recovery housing. This will generate an estimated $7.8 million in rent and other assistance from Medicaid **(25133C)** and serve 1,000 households.

Eviction Prevention City of Portland Funding (25133F): The FY 2027 budget adds $4.25 million and two limited duration positions via an intergovernmental agreement (IGA) with the City of Portland as part of the city's "Keeping Portlanders Housed" plan. These are one-time-only funds that will provide emergency rent assistance to Portland residents by providing flexible, short-term aid to households facing eviction, but not yet in court proceedings, serving 833 households in FY 2027.

Restoration of Fair Housing Testing in East Multnomah County (25134): In FY 2027, $128,000 in General Fund ($78,000 one-time-only and $50,000 ongoing) will sustain fair housing testing in the East part of the county, as well as provide training and outreach to build awareness and skills among staff of social service organizations. This will provide 60 fair housing tests and 10 training sessions.

Reduction to Regional Multnomah Stability Initiative (MSI) (25139): Decreased by $1.1 million reducing 10 full-time case management positions across our community partners, cutting the number of households we can serve by 43%. This limits housing stability case management to 228 of the 400 households typically served. Services also include legal, educational, and employment supports, as well as financial literacy.

Hunger/Supplemental Nutrition Assistance Program (SNAP) (25141): Much of the surrounding community feels the impact of the reduction and loss of SNAP benefits for some resulting from the federal implementation of House Resolution 1 (H.R. 1). The reductions in SNAP benefits have increased the demand for food assistance resources provided by DCHS, including SUN Community School Food Pantries and Bienestar de la Familia hunger relief programs. The SNAP participants most impacted by these changes are households receiving utility assistance, able-bodied adults ages 18 through 64 without children under age 14, and certain lawfully present immigrants.

SUN Community Schools Restoration (25145B): In FY 2027, a $1.2 million investment in one-time-only General Fund restores the SUN Community Schools to current service level, preventing the closure of SUN Services at nine Portland Public School locations and preserving access for 2,000 children. This restoration maintains the total number of SUN Community School sites at 92 in FY 2027.

Reduction of Family Resource Navigator (FRN) Program (25146): Funded in FY 2026 with one-time-only funding this program will end in FY 2027 and discontinue support for 900 community members and leave 220 households without emergency rent assistance.

Impact of Federal Immigration Policy: Rising concerns over immigration policy and enforcement have led to a significant decrease in engagement by those impacted across several YFS programs. To address this, providers are changing how they deliver services to better reach and reassure residents who may be hesitant to seek assistance outside of their homes.

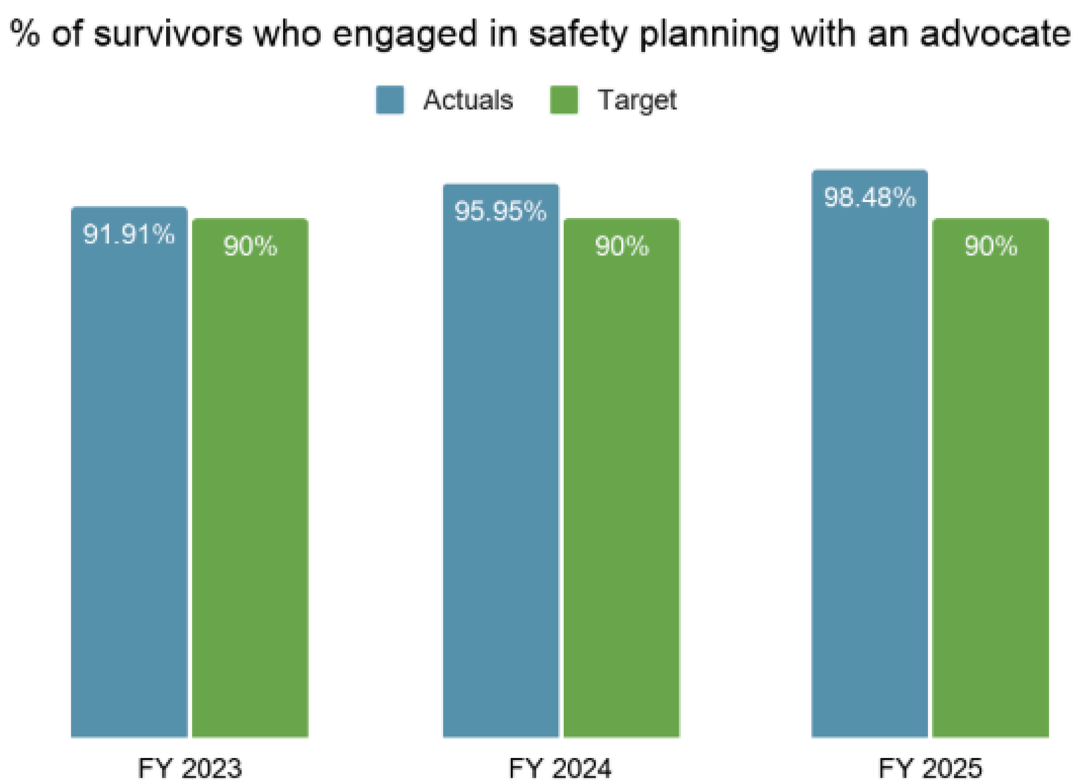
Youth and Family Services Outcomes

1. Domestic and sexual violence survivors served experience increased safety, housing stability, and the ability to navigate systems.

Domestic and sexual violence encounters are traumatic, life-threatening, and pose barriers that often interfere with long-term stability. This outcome measures whether survivors are better off after receiving YFS services.

Key Performance Indicator (KPI) 1.1: Percent of survivors served who engage in safety planning with an advocate.

KPI 1.1 Description: Safety planning improves client access and service integration by providing survivors with tailored support to match services to their unique needs, identify risks, and develop a long-term safety plan. The chart reflects safety planning at our external community-based programs funded by the Domestic and Sexual Violence Coordination Office (DSVCO). In FY 2027, data will be included from both internal and external programs.



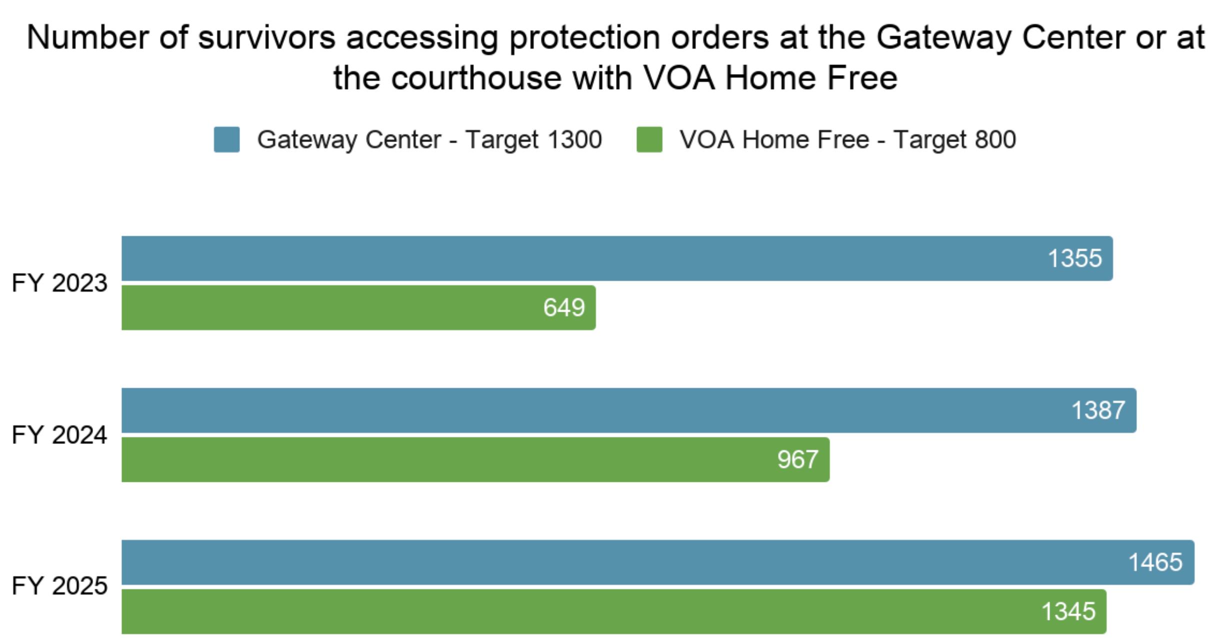
Number of Survivors who Engaged in Safety Planning with and Advocate	Actuals
FY 2023	358 (91.9%)
FY 2024	431 (95.95%)
FY 2025	537 (98.48%)

FY 2026 Estimate: 90%	**FY 2027 Target:** 90%

KPI 1.1 Equity Considerations: Eliminating barriers and addressing access, inclusion, and disparities.

Key Performance Indicator (KPI) 1.2: Number of participants receiving assistance with restraining order applications.

KPI 1.2 Description: Measures the number of participants seeking restraining orders who receive legal advocacy. We provide survivors with flexible and safe options for navigating the restraining order process. At our East Portland Gateway Center, participants can file paperwork and attend hearings remotely, avoiding trips to the courthouse and maintaining their work and personal schedules. For those who visit the Multnomah County Courthouse in person, dedicated advocates and on-site childcare are available.



FY 2026 Estimate: 2,100 total	**FY 2027 Target:** 2,100 total

KPI 1.2 Equity Considerations: YFS designs outcome measures to evaluate the effectiveness of our programs in eliminating barriers and addressing access, inclusion, and disparities, alongside achieving program goals. Data collection is done by staff of culturally responsive and specific programs. As a result, we do not have major gaps in data because people feel safe and trust us, and we avoid language and cultural barriers. Data is also disaggregated by race/ethnicity to assess whether all eligible populations are able to access support and whether our services are designed and delivered to foster positive outcomes for all participants.

Key Performance Indicator (KPI) 1.3: Percentage of youth served in Sex Trafficked Youth Services who know how to access safe and supportive resources.

KPI 1.3 Description: Youth who experience sex trafficking often live in unsafe and controlled situations, where access to basic needs and resources often depends on and is limited by their abuser(s). This KPI measures the percentage of youth served who know how to identify and access resources — such as shelter, housing, healthcare, legal support, advocacy, and basic needs—outside of their trafficking situation. It reflects program effectiveness in building practical knowledge, autonomy, and pathways to support (“how well did we do it?”) and whether youth are better positioned to meet their needs and move toward long-term safety and stability (“is anyone better off?”).

Success means youth leave the program with increased options, confidence in navigating systems, and meaningful alternatives to reliance on exploitative relationships. This measure was introduced in FY 2025 and will be measured annually starting in FY 2026.

Black, African American, or African	55.56%
White	40.74%
American Indian, Alaska Native, or Indigenous	18.52%
Hispanic/Latina/o	14.81%
Asian or Asian American	7.41%

FY 2026 Estimate: 75%	**FY 2027 Target:** 70%

Outcome 1 Program Offers

The following program offers contribute to Outcome 1. Division-specific administrative program offers are not included, as they support all outcome statements:

- 25041 - YFS - Domestic Violence Crisis Services

- 25044 - YFS - Domestic and Sexual Violence Coordination
- 25046 - YFS - Domestic Violence Legal Services
- 25047 - YFS - Domestic Violence Crisis Response Unit
- 25048 - YFS - Culturally Specific and Underserved Domestic & Sexual Violence Services
- 25049 - YFS - Sexual Assault Services
- 25050 - YFS - Gateway Center
- 25135 - YFS - Sex Trafficked Youth Services

2. Households served achieve stable housing and increased economic stability, avoiding eviction and homelessness.

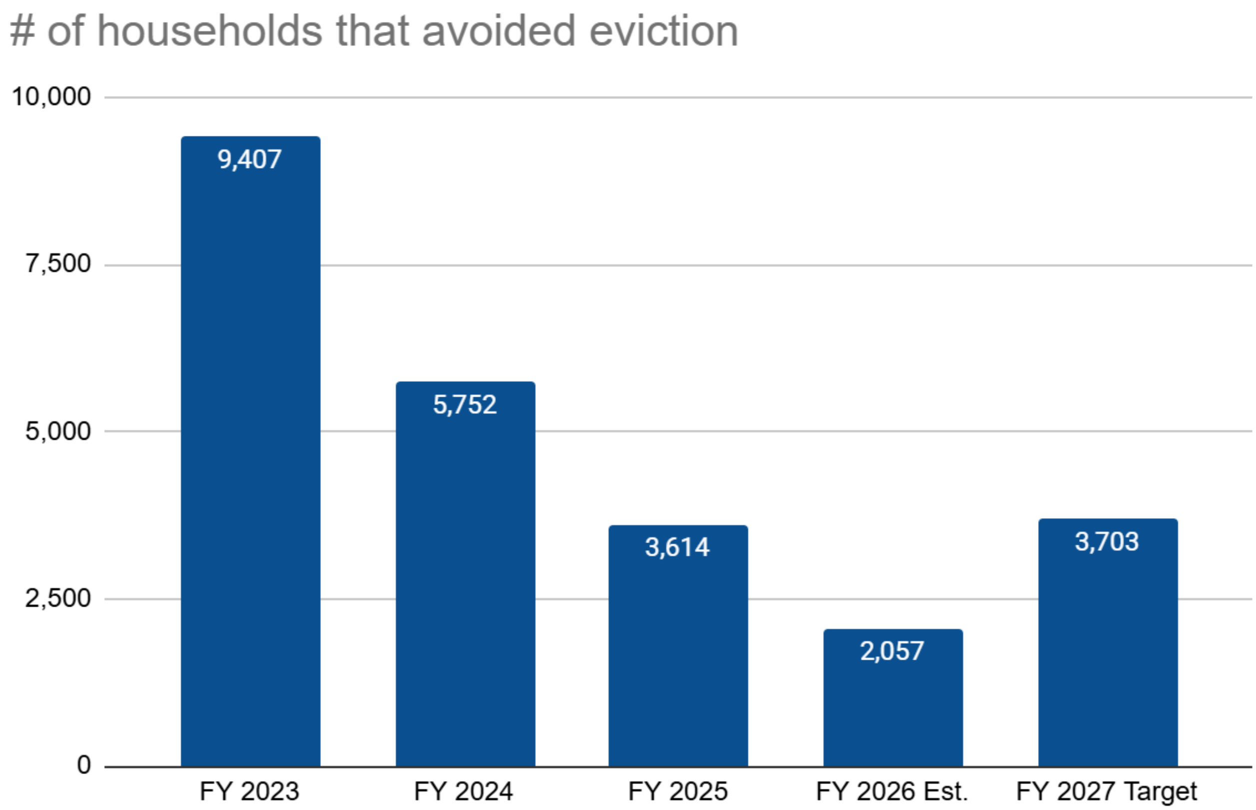
Low-income households experience significant obstacles in maintaining housing and financial stability. These challenges stem from several factors, including high and unaffordable rent, rising costs for basic needs and services (such as groceries or utilities), slow housing production, underemployment, and unemployment. These barriers increase the risk of eviction and homelessness.

Key Performance Indicator (KPI) 2.1: Number of households at imminent risk of eviction who receive immediate stabilization and avoid eviction through emergency rent assistance.

KPI 2.1 Description: This indicator measures the number of households facing an active eviction crisis that are able to stay in their homes through targeted financial assistance.

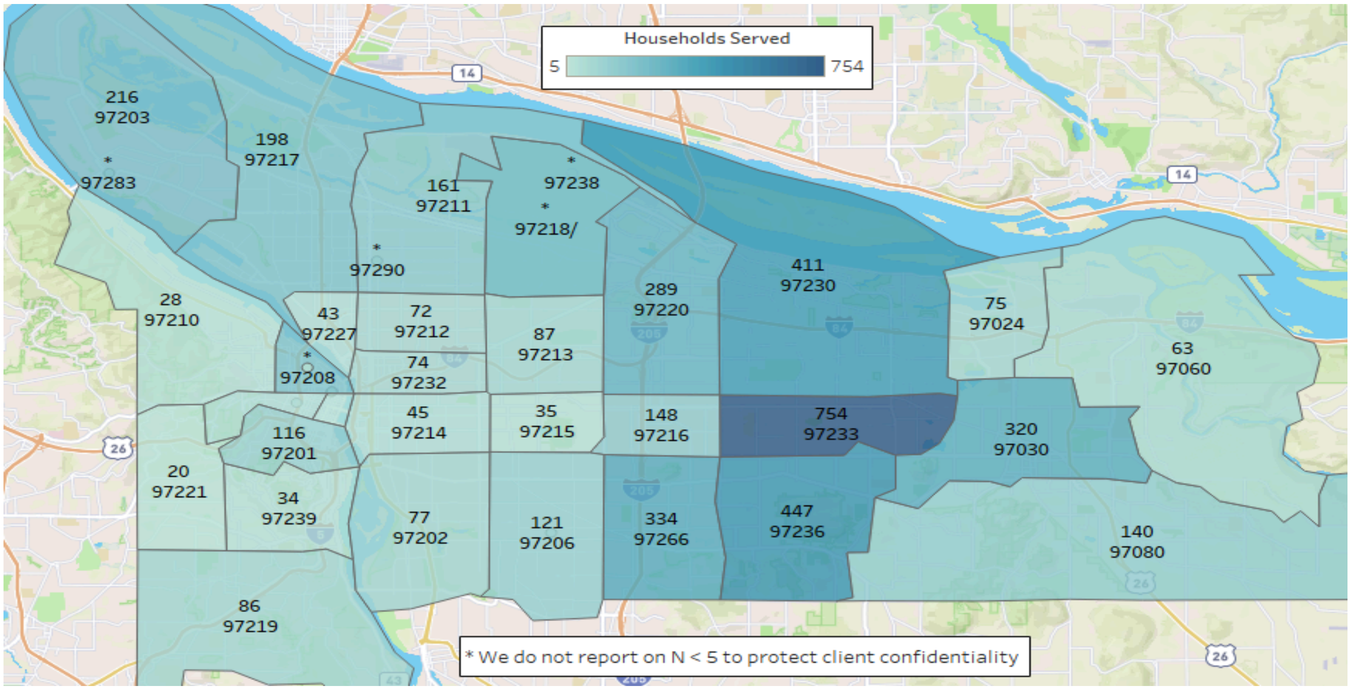
This metric reflects outcomes from the Emergency Rent Assistance, Medicaid Waiver Rent Assistance Program (MWRAP), and Family Resource Navigator programs, which work to prevent homelessness before it occurs. Success is defined by the rapid delivery of funds to households at immediate risk of eviction, helping them remain housed and avoid the long-term consequences of an eviction record.

Households receiving emergency rent assistance who avoided eviction



The reduction in number served over time reflects funding reductions.

FY 2025 households served who avoided eviction by zip code:



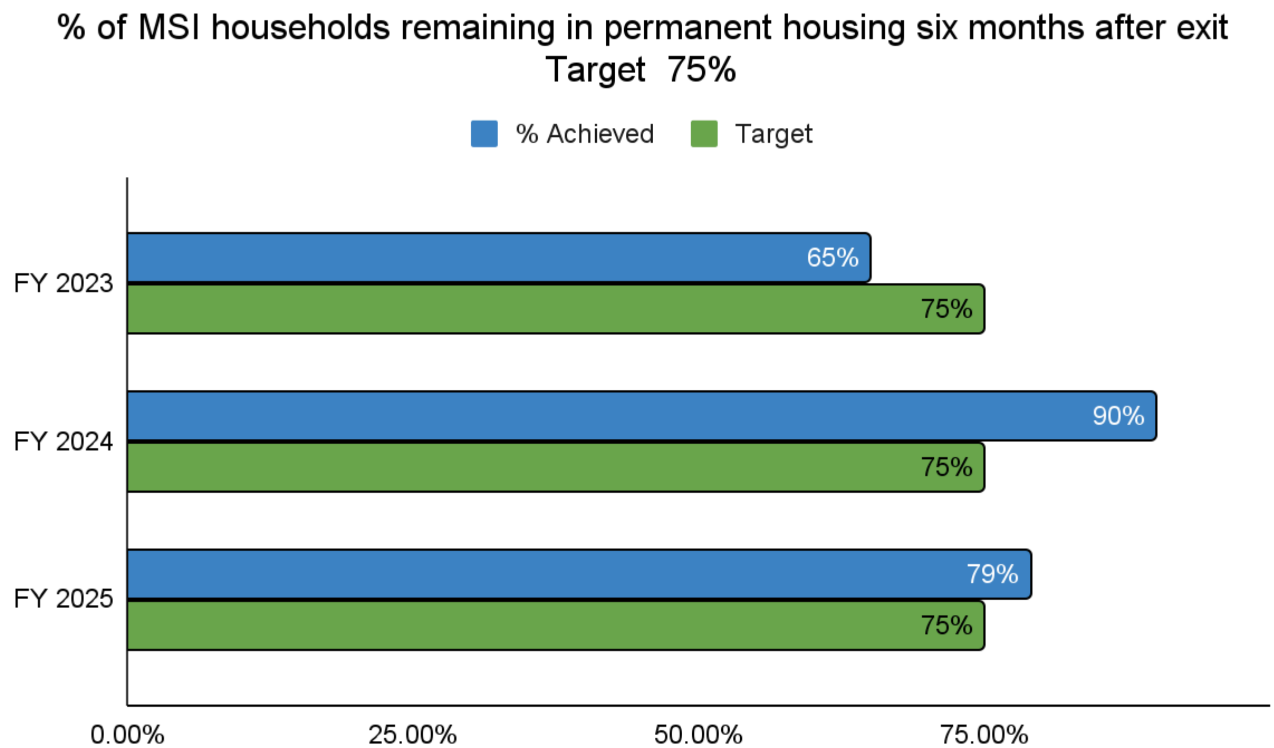
FY 2026 Estimate: 2,057	**FY 2027 Target:** 3,703

KPI 2.1 Equity Considerations: Eliminating barriers and addressing access, inclusion, and disparities. For MWRAP race and ethnicity data is available for the household member who qualified for assistance, but not for all members of the household.

Key Performance Indicator (KPI) 2.2: % of households served that remain in permanent housing at 6 months after service/exit.

KPI 2.2 Description: This outcome measures whether people are better off after participating in the Multnomah Stability Initiative (MSI) program. MSI serves families with children under the age of 18 who have an income of 200% or less Average Median Income and who are able to participate in program activities. Families can receive support for up to three years.

This indicator is important as it demonstrates the medium- to long-term impact of holistic case management and flexible client assistance in keeping low-income families stable. The outcome is measured at 6 months after exit from the program, showing the sustained success of families. Given the significant challenges facing families in Multnomah County, we define success as 75% of households remaining in permanent housing six months after service/exit.



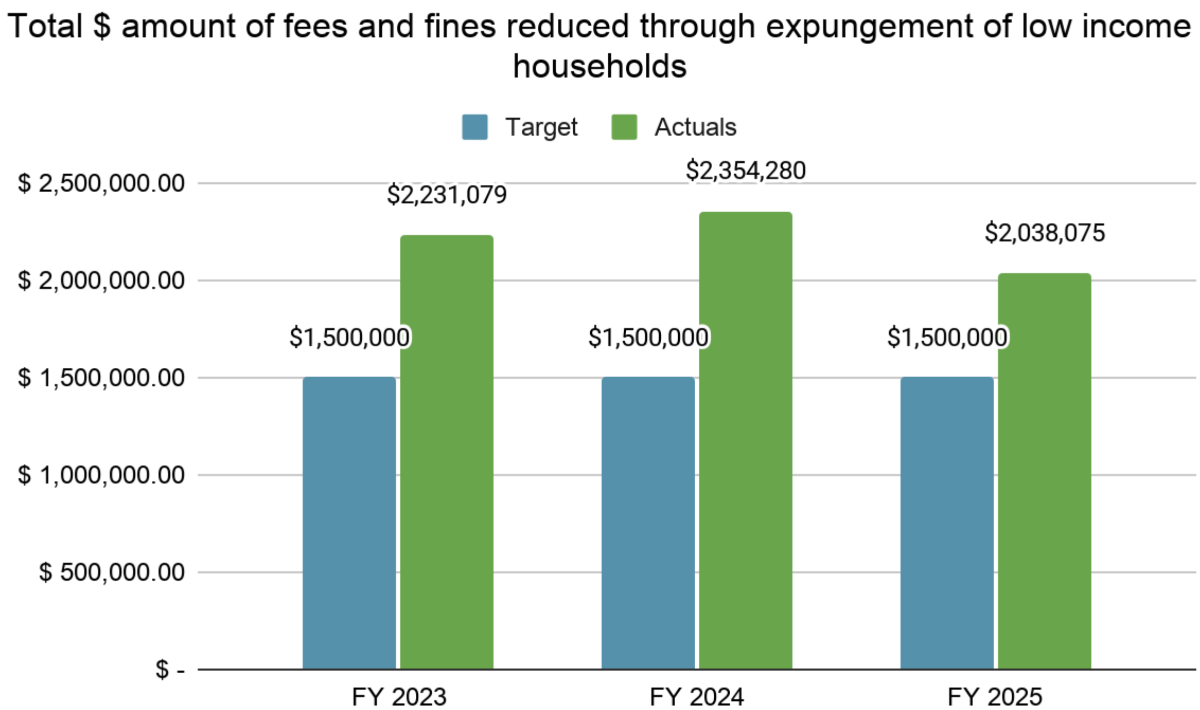
FY 2026 Estimate: 75%	**FY 2027 Target:** 75%

KPI 2.2 Equity Considerations: Services are culturally responsive and tailored to reflect participants' individual needs and cultural norms.

Key Performance Indicator (KPI) 2.3: Total dollar amount of fees and fines reduced through expungement for low-income households.

KPI 2.3 Description: This outcome measures whether people served through Project Reset's legal services—such as clearing court debt and criminal records—had their fines and records cleared through participating in the program. The program serves low-income residents (defined as those earning 80% or less of the Area Median Income) in Multnomah County. People of color and people with disabilities are more likely to experience court debt, involvement with the criminal justice system, driver's license suspensions, and other legal barriers.

This indicator is important because it shows the program's impact in reducing debt and legal barriers that can prevent people from obtaining and maintaining employment and housing.



FY 2026 Estimate: $1.5 million	**FY 2027 Target:** $1.5 million

KPI 2.3 Equity Considerations: Eliminating barriers and addressing access, inclusion, and disparities.

Outcome 2 Program Offers

The following program offers contribute to Outcome 2. Division-specific administrative program offers are not included, as they support all outcome statements:

- 25119 - YFS - Energy Assistance
- 25121 - YFS - Weatherization
- 25130 - YFS - Family Unification Program
- 25131A - YFS - Legal Services & Supports
- 25131B - YFS - Peer Navigators
- 25131C - YFS - Eviction Prevention Support
- 25131D - YFS - Record and Fee Expungement Program (Project Reset)
- 25131E - YFS - Eviction Prevention: In Courtroom Support
- 25133A/B - YFS - Housing Stabilization & Eviction Prevention
- 25133C/D - YFS - Medicaid 1115 Health Related Social Needs Housing Waiver
- 25136 - YFS - Culturally Specific Navigation Services for Immigrant Families
- 25138 - YFS - Youth Stability & Homelessness Prevention Services

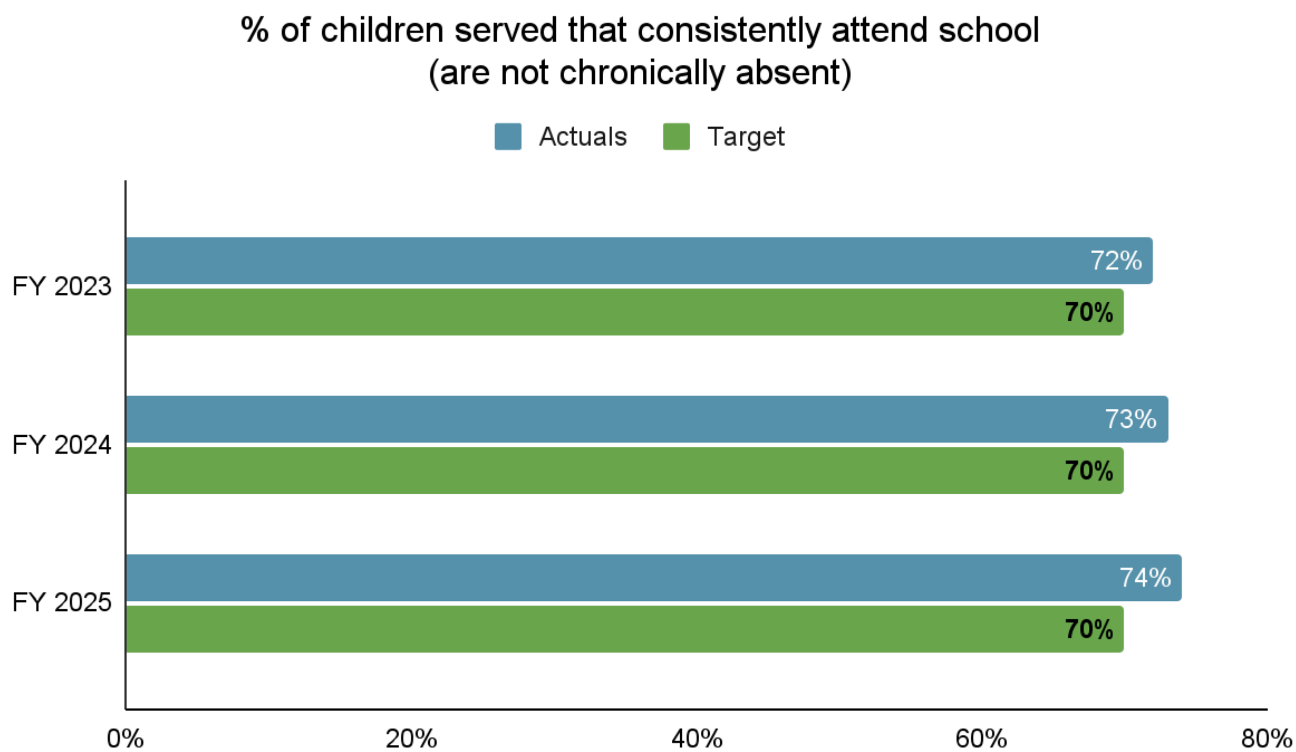
- 25139 - YFS - Multnomah Stability Initiative (MSI)
- 25140 - YFS - Community Development in East Multnomah County
- 25141 - YFS - Supplemental Nutrition Assistance Program (SNAP) Outreach
- 25156 - YFS - Bienestar Social Services

3. Educational Opportunity and Success: Children, youth, and families served are ready to learn, attend school regularly, and achieve academic success with increased access to social services.

A stable home and family life helps children come to school ready to learn. In addition, their experiences at school and access to opportunities for youth development, academic support, enrichment, and social services impact whether they can learn and ultimately graduate. This indicator measures whether children, youth, and families served achieve positive outcomes.

Key Performance Indicator (KPI) 3.1: Percentage of children served who consistently attend school (are not chronically absent).

KPI 3.1 Description: This indicator measures the consistent school attendance of students regularly participating in SUN Community School (SUN CS) programming. Regular participation is defined as participating for 30 days or more. SUN CS are located in K-12 public schools and focus on serving students experiencing barriers to attendance and academic success. This indicator measures whether students participating achieve positive outcomes. Success is measured as 70% consistent school attendance or higher on average.

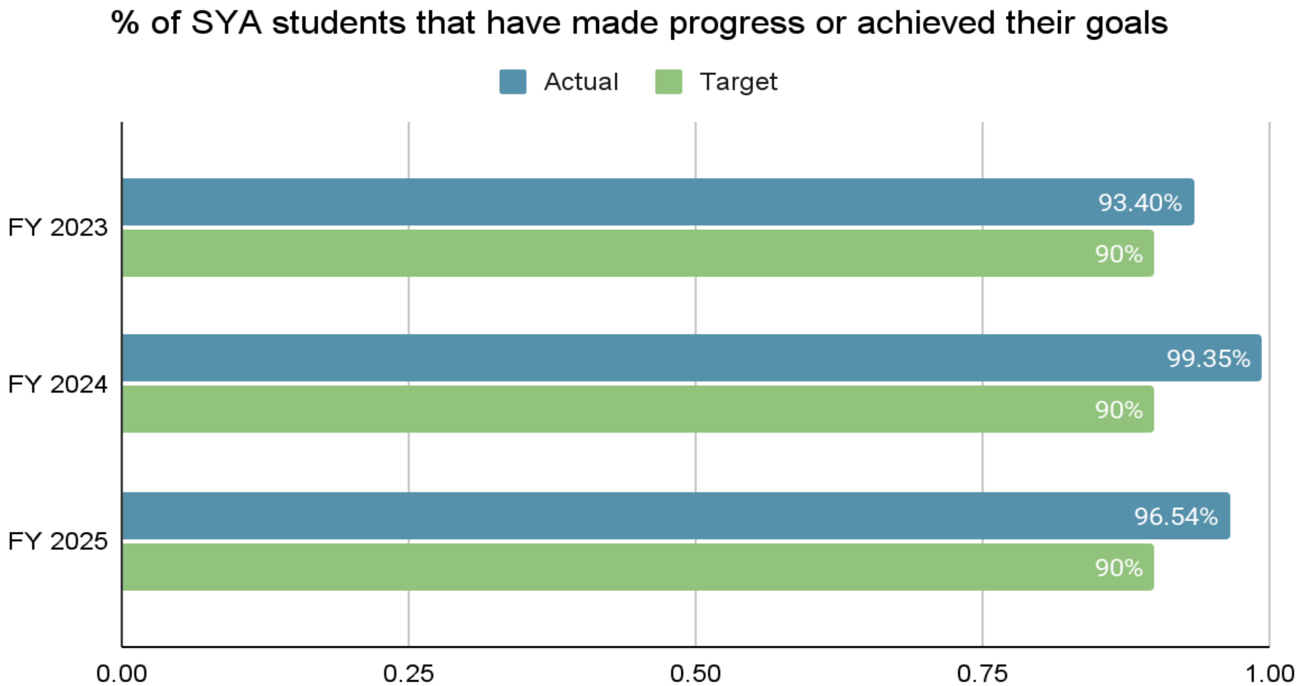


FY 2026 Estimate: 70%	**FY 2027 Target:** 70%

KPI 3.1 Equity Considerations: Eliminating barriers and addressing access, inclusion, and disparities.

Key Performance Indicator (KPI) 3.2: Percentage of children who participate in the SUN Youth Advocacy program who either make progress or achieve their individualized action or success plan goals by the end of the school year.

KPI 3.2 Description: Measures if youth participating in SUN Youth Advocacy supports are better off as measured by making progress on the goals and values that matter most to them and their identity. It demonstrates whether the staff supporting youth are culturally responsive to the needs of youth. The SUN Youth Advocacy program helps students who face the biggest challenges in school, like students of color, those experiencing poverty, immigrants, and refugees, by connecting them with a trustworthy adult. This support focuses on their social, emotional, and academic needs.



FY 2026 Estimate: 90%	**FY 2027 Target:** 90%

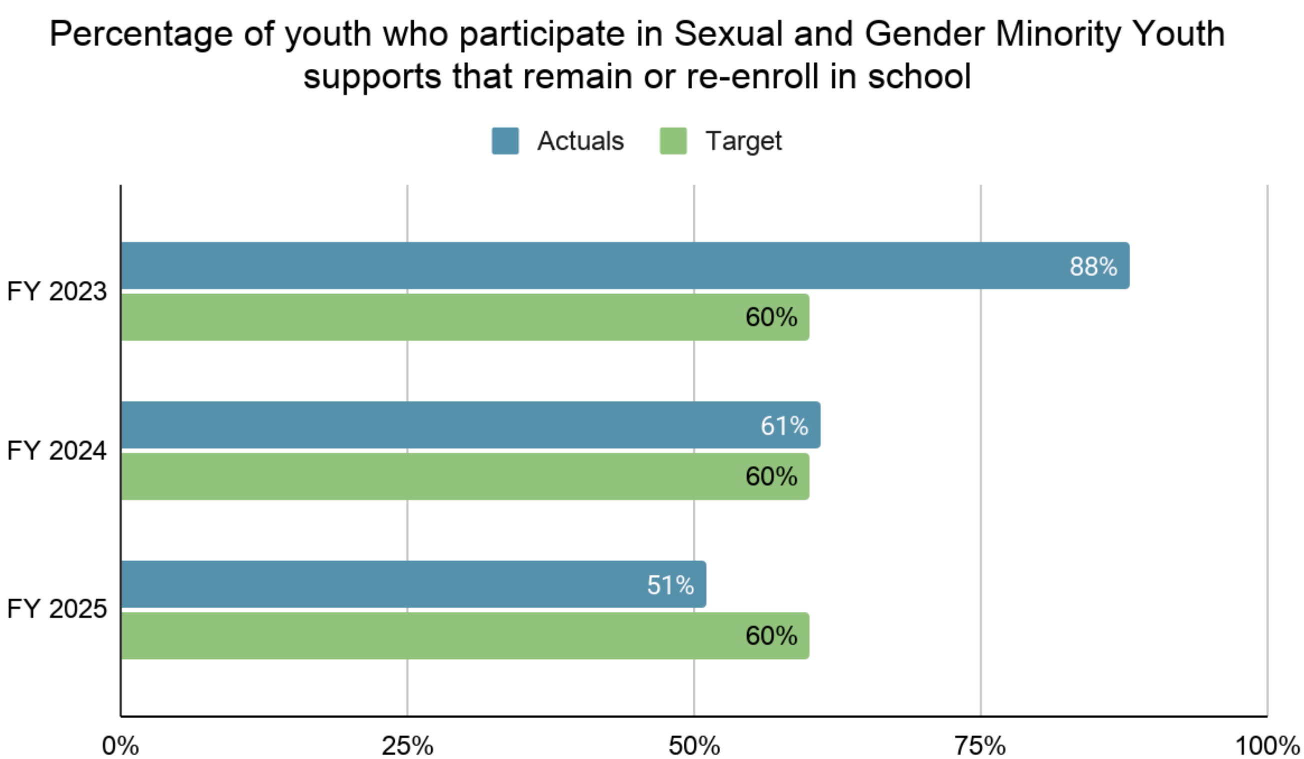
KPI 3.2 Equity Considerations: Race and Ethnicity Demographics of Students Served in SUN Youth Advocacy in FY 2025. The chart shows inclusive identity demographic data for SYA participants. Inclusive identity allows participants to choose all racial/ethnic identities that they hold and so the total of the %s is greater than 100% as some participants are represented in more than one category.

Latino / Hispanic	53.05%
Black / African American	20.29%
White	14.27%
Asian	14.02%
Native American / Alaska Native	8.51%
African	6.88%
Slavic	4.21%
Native Hawaiian / Pacific Islander	3.78%
Middle Eastern	0.95%
White Alone	1.38%

Key Performance Indicator (KPI) 3.3: Percentage of youth who participate in Sexual and Gender Minority Youth support that remain or re-enroll in school.

KPI 3.3 Description: This indicator measures whether youth participating in Sexual and Gender Minority Youth programs experience positive outcomes based on the services they receive. These programs support youth who face discrimination, violence, and harassment that threaten their safety.

LGBTQ2SIA+ youth have a 28% dropout rate due to bullying. Many also struggle with mental health challenges caused by harassment and non-affirming environments. This can lead to poor grades, disengagement, and even school dropout. This measure focuses on providing youth with affirming spaces and resources that help them stay in or re-enroll in school.



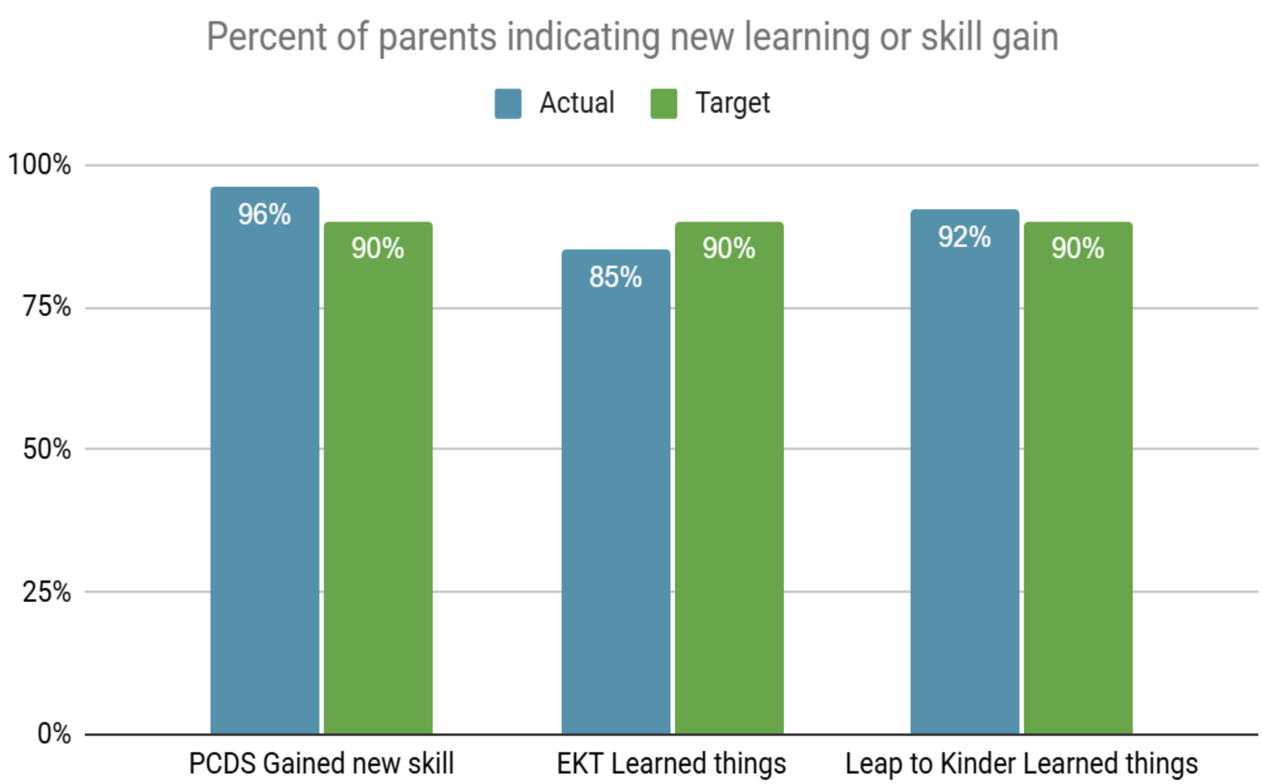
Staff turnover and challenges with hiring contributed to a lower outcome in FY 2025. The program has stabilized staff in FY 2026 and expects to meet or exceed the target.

FY 2026 Estimate: 60%	**FY 2027 Target:** 60%

KPI 3.3 Equity Considerations: Eliminating barriers and addressing access, inclusion, and disparities.

Key Performance Indicator (KPI) 3.4: Percentage of parents participating in family engagement and education programs who report learning something new or gaining a new skill.

KPI 3.4 Description: Measures if parents and family members participating in SUN early learning programs have positive outcomes. A high percentage reported learning something new or gaining a new skill demonstrating the effectiveness of the programs. It includes results from: Parent Child Development Services, Early Kindergarten Transition Program and Prenatal-3rd Grade Program.



FY 2026 Estimate: 90%	**FY 2027 Target:** 90%

KPI 3.4 Equity Considerations: Eliminating barriers and addressing access, inclusion, and disparities.

Outcome 3 Program Offers

The following program offers contribute to Outcome 3. Division-specific administrative program offers are not included, as they support all outcome statements:

- 25145A/B - YFS - SUN Community Schools
- 25147 - YFS - Child & Family Hunger Relief
- 25149 - YFS - SUN Youth Advocacy Program

- 25151 - YFS - SUN Parent & Child Development Services
- 25152 - YFS - Early Learning Family Engagement and Kindergarten Transition
- 25155 - YFS - Sexual & Gender Minority Youth Services

4. Households served have increased food security and improved physical and mental health outcomes.

Access to nutritious food, mental health services, and a safe and healthy home, are key to overall well-being and stability. This outcome measures whether youth, individuals, and families receiving these supports are better off and satisfied with the services provided.

Key Performance Indicator (KPI) 4.1: Percentage of clients who report the help they received improved their situation.

KPI 4.1 Description: This indicator measures the percentage of clients who report that the help they received through the Bienestar de la Familia program improved their overall situation. It assesses whether individuals, families, and children served feel that the services they received made a meaningful difference in their lives.

Participants are from the community at large who are most vulnerable to housing instability and economic hardship, such as low-income households, or those living at or below the federal poverty level.

% of Bienestar clients who indicated the help they received improved their situation - FY 2025
365 responses

Response	%
Yes	95.1%
No	4.6%
Declined to Answer	0.3%

FY 2026 Estimate: 85%	**FY 2027 Target:** 85%

KPI 4.1 Equity Considerations: Eliminating barriers and addressing access, inclusion, and disparities.

Key Performance Indicator (KPI) 4.2: Percentage of clients who indicated mental health and addiction services were appropriate and helpful.

KPI 4.2 Description: This indicator reflects the experiences of participants who received mental health and addiction services at Bienestar de la Familia. Participants come from the broader community and are primarily low-income or living at or below the federal poverty level. The indicator reflects both the quality of services provided and whether clients are better off as a result.

To measure the percentage of clients who feel the mental health and addiction services they received were impactful and made a meaningful difference in their lives, we began administering a survey to participants in FY 2025.

FY 2025:

85% of clients indicated that Bienestar Mental Health Services were appropriate and helpful

FY 2026 Estimate: 85%	**FY 2027 Target:** 85%

KPI 4.2 Equity Considerations: Outreach and service models are designed to be culturally responsive and reduce barriers for populations who have historically been underserved.

Outcome 4 Program Offers

The following program offers contribute to Outcome 4. Division-specific administrative program offers are not included, as they support all outcome statements:

- 25119 - YFS - Energy Assistance
- 25121 - YFS - Weatherization
- 25141 - YFS - Supplemental Nutrition Assistance Program (SNAP) Outreach
- 25147 - YFS - Child & Family Hunger Relief
- 25156 - YFS - Bienestar Social Services

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	Total FTE
25041	Domestic Violence Crisis Services		494,835	0	494,835	0.00
25044	Domestic and Sexual Violence Coordination		840,412	81,996	922,408	3.80
25046	Domestic Violence Legal Services		232,125	35,000	267,125	0.00
25047	Domestic Violence Crisis Response Unit		1,539,268	363,091	1,902,359	11.00
25048	Culturally Specific and Underserved Domestic & Sexual Violence Services		1,024,102	0	1,024,102	0.00
25049	Sexual Assault Services		954,172	0	954,172	1.00
25050	Gateway Center		1,133,595	1,262,444	2,396,039	8.00
25118	YFS Administration		2,469,083	0	2,469,083	11.00
25119	Energy Assistance		157,193	10,944,832	11,102,025	6.50
25121	Weatherization		0	7,922,686	7,922,686	13.50
25130	Family Unification Program		685,916	300,000	985,916	0.00
25131A	Legal Services & Supports		349,636	0	349,636	0.00
25131B	Peer Navigators		508,272	0	508,272	0.00
25131C	Eviction Prevention Support		338,801	0	338,801	0.00
25131D*	Record and Fee Expungement Program (Project Reset)		0	428,250	428,250	0.00
25131E	Eviction Prevention: In Courtroom Support		255,486	0	255,486	0.00
25133A	Housing Stabilization & Eviction Prevention		1,719,698	4,337,864	6,057,562	5.50

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
25133B	Eviction Prevention		2,406,000	1,192,784	3,598,784	4.00
25133C	Medicaid 1115 Health Related Social Needs Housing Waiver	X	0	22,325,088	22,325,088	0.00
25133D	Medicaid 1115 Health Related Social Needs Rapid Rehousing	X	200,000	0	200,000	0.00
25133E	Eviction Prevention In Reach Team	X	0	565,000	565,000	0.00
25133F	Eviction Prevention City of Portland Funding	X	0	4,250,000	4,250,000	0.00
25134	Fair Housing Testing in East Multnomah County		128,000	0	128,000	0.00
25135	Sex Trafficked Youth Services		1,101,967	0	1,101,967	0.00
25136	Culturally Specific Navigation Services for Immigrant Families		318,750	0	318,750	0.00
25138	Youth Stability & Homelessness Prevention Services		1,540,116	0	1,540,116	0.00
25139	Multnomah Stability Initiative (MSI)		2,541,837	927,025	3,468,862	2.00
25140	Community Development in East Multnomah County		174,082	363,210	537,292	1.00
25141	Supplemental Nutrition Assistance Program (SNAP) Outreach		170,846	323,944	494,790	2.00
25145A	SUN Community Schools		8,935,185	2,926,016	11,861,201	4.00
25145B	SUN Community Schools Restoration	X	1,200,000	0	1,200,000	0.00
25147	Child & Family Hunger Relief		798,425	0	798,425	1.00
25149	SUN Youth Advocacy Program		4,367,787	0	4,367,787	0.00
25151	SUN Parent & Child Development Services		1,375,059	456,248	1,831,307	0.50

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
25152	Early Learning Family Engagement and Kindergarten Transition		492,636	1,238,486	1,731,122	1.00
25155	Sexual & Gender Minority Youth Services		419,334	0	419,334	0.00
25156	Bienestar Social Services		2,589,525	357,560	2,947,085	14.00
Total Youth and Family Services			**41,462,143**	**60,601,524**	**102,063,667**	**89.80**

*Other Funds are Video Lottery Fund

Division: Youth & Family Services

Program Characteristics:

Program Description

From 2020-2024, there were over 50,000 domestic violence (DV) related crimes reported in Oregon. Domestic violence is a pervasive public health crisis and a leading cause of homelessness for women and children. DV disproportionately impacts communities of color, LGBTQIAS+ survivors, and people with disabilities. Survivors need flexible, trauma-informed crisis services available when they are ready.

The DV Mobile Advocacy Program provides survivors countywide access to domestic violence advocates who offer client-centered, trauma-informed support in community settings. Advocates meet survivors wherever they are to connect survivors and their children with basic needs and culturally relevant long term support. Program activities include:

• Mobile crisis advocacy, safety planning and ongoing risk assessment to survivors across the county.
• Emergency motel placements and basic needs support for survivors and their children during acute crises.
• Referrals and warm handoffs to long-term, culturally specific, and supportive services.
• Accessible, flexible crisis-response options for communities most impacted by DV related barriers.

This offer supports the Youth and Family Services (YFS) Division Outcome of Safety and Resilience by increasing survivor safety, reducing barriers to accessing life-saving services, and supporting stability and housing retention for those at highest risk.

Equity Statement

The DV (Domestic Violence) Mobile Advocacy Program strives for all survivors to have accessible, trauma-informed crisis services, and to address systemic barriers that limit access to safety, stability, and culturally relevant support through outreach and programming.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$479,028	$0	$494,835	$0
Total GF/non-GF	**$479,028**	**$0**	**$494,835**	**$0**
Total Expenses:	**$479,028**		**$494,835**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of domestic violence survivors and children receiving comprehensive, specialized crisis services	369	320	320
Percentage of adult survivors who engaged in safety planning with an advocate	100%	90%	90%

Division: Youth & Family Services

Program Characteristics:

Program Description

Domestic violence affects thousands of people in Multnomah County each year, causing lasting physical, emotional, and economic harm. Between January 2020 and December 31, 2024, 50 people were killed in domestic violence incidents, underscoring the urgent need for a coordinated, survivor-centered response.

The Domestic and Sexual Violence Coordination Office (DSVCO) provides leadership, planning, evaluation, contract administration, technical assistance, and support across the continuum of domestic and sexual violence and sex trafficking services. The program ensures services are trauma-informed, culturally appropriate, and accessible, while centering survivor voices in system design and policy. DSVCO leads system-wide collaboration by facilitating multidisciplinary groups, including but not limited to: the Family Violence Coordinating Council, Sex Trafficking Collaborative, Sexual Assault Advisory Council, Domestic Violence Fatality Review Team and lived experience Community Advisory Boards. Program activities include:

• Coordination and leadership of system wide planning, evaluation, quality improvement and lethality reviews.
• Technical assistance and contract support for the full continuum of funded DV/SA providers.
• Survivor engagement in compensated leadership opportunities, addressing systemwide issues and strengthening our service continuum to better respond to and support the needs of all survivors.
• Tracking and leading policy and legislative advocacy for domestic and sexual violence and trafficking.

This offer supports the Youth and Family Services (YFS) Division Outcome of Safety and Resilience.

Equity Statement

The Domestic and Sexual Violence Coordination Office (DSVCO) provides critical services that are aligned, accessible, and responsive with the goal of reducing fragmentation and strengthening equitable outcomes across the county. The DSVCO strives to eliminate immediate gaps in interventions, communication, and referral pathways, and augment access to culturally responsive supports.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$680,316	$52,328	$717,398	$53,896
Contractual Services	$19,035	$25,600	$19,035	$28,100
Materials & Supplies	$16,050	$0	$7,702	$0
Internal Services	$84,470	$0	$96,277	$0
Total GF/non-GF	**$799,871**	**$77,928**	**$840,412**	**$81,996**
Total Expenses:	**$877,799**		**$922,408**	
Program FTE	3.75	0.25	3.58	0.22
Program Revenues				
Fees, Permits & Charges	$0	$52,328	$0	$3,600
Intergovernmental	$0	$22,000	$0	$78,396
Other / Miscellaneous	$0	$3,600	$0	$0
Total Revenue	**$0**	**$77,928**	**$0**	**$81,996**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of domestic violence (DV) Continuum collaborative meetings staffed by the Domestic and Sexual Violence Coordination Office (DSVCO)	229	125	145
Number of system and community partners reached through DSVCO-led or coordinated trainings and events	N/A	N/A	850

Division: Youth & Family Services

Program Characteristics:

Program Description

Domestic violence (DV) often requires legal intervention to address survivor safety and offender accountability, yet low income survivors face significant barriers to navigating a complex court system without representation. Legal services remain one of the highest unmet needs in the DV service continuum.

DV Legal Services provides free, specialized civil legal services and courthouse-based supports for low income DV survivors and their families in Multnomah County. Program activities include:

• Providing high-quality legal support, consultation, and representation, including assistance with restraining order hearings, custody and parenting time, immigration, housing, and other victim-rights issues.
• Delivering courthouse-based advocacy for survivors seeking protection orders through Restraining Order Services Room staff.
• Providing on-site childcare at courthouses to reduce children's exposure to vicarious trauma.

This offer supports the Youth and Family Services (YFS) Division Outcome of Safety and Resilience by increasing survivor safety, reducing barriers to essential legal remedies, and supporting equitable access for our most marginalized community members who are disproportionately impacted by domestic violence.

Equity Statement

Domestic Violence Legal Services seeks to increase opportunities for legal support for victims and survivors of domestic violence. This program helps survivors pursue safety, accountability, and access to legal support by providing courthouse advocacy as well as expanded support services.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$225,726	$35,000	$232,125	$35,000
Total GF/non-GF	**$225,726**	**$35,000**	**$232,125**	**$35,000**
Total Expenses:	**$260,726**		**$267,125**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$35,000	$0	$35,000
Total Revenue	**$0**	**$35,000**	**$0**	**$35,000**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of domestic violence survivors assisted with courthouse-based restraining order advocacy	1,345	1,200	1,200
Percentage of retained cases with a court action filed or contested by an attorney	85%	75%	75%

Division: Youth & Family Services

Program Characteristics:

Program Description

Domestic violence (DV) survivors encountering law enforcement–often during crises–need immediate, trauma-informed support navigating safety and complex criminal and civil systems. The Domestic Violence Crisis Response Unit (DVCRU) is the only program that fills this critical need by responding in real time to support survivor safety, voice, and choice.

DVCRU is a team of county advocates embedded within Portland Police Bureau's Special Victims Unit serving intimate partner and familial DV survivors across four programs: Domestic Violence Emergency Response Team (high-lethality intimate partner violence cases), Elder and Vulnerable Adult Advocacy (55+ adults with disabilities), Special Victims Unit Advocacy (escalating DV and protective order violations), and Domestic Violence Response Advocates (DVRA), who respond to 911 pages countywide 7 days a week, after business hours, late nights, and holidays. Advocates provide crisis response, safety planning, navigation of criminal/civil systems, emergency stabilization supports, and connection to comprehensive, culturally response services. Program activities include:

• Coordinating intensive, multidisciplinary case staffing for high lethality domestic violence cases.
• Responding to law enforcement pages to provide on-scene and hospital-based crisis response and advocacy.
• Delivering safety planning, protective order assistance and system navigation for highest-risk survivors.
• Providing emergency stabilization supports (ie. shelter, relocation, security equipment).

This offer supports the Youth and Family Services (YFS) Division Outcome of Safety and Resilience.

Equity Statement

The Domestic Violence Crisis Response Unit (DVCRU) serves survivors through advocacy and responding to the highest risk and high-lethality cases, ensuring safety and access to trauma-informed support. By bridging gaps in the criminal and civil justice systems, they seek to remove barriers to access and critical services, such as protection, stability, and lifesaving interventions across Multnomah County.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,227,107	$352,516	$1,162,226	$363,091
Contractual Services	$172,900	$0	$67,000	$0
Materials & Supplies	$6,825	$0	$4,370	$0
Internal Services	$336,640	$0	$305,672	$0
Total GF/non-GF	**$1,743,472**	**$352,516**	**$1,539,268**	**$363,091**
Total Expenses:	**$2,095,988**		**$1,902,359**	
Program FTE	9.15	2.85	8.22	2.78
Program Revenues				
Intergovernmental	$0	$352,516	$0	$363,091
Total Revenue	**$0**	**$352,516**	**$0**	**$363,091**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of survivors receiving multi-disciplinary and intensive intervention	275	250	250
Number of domestic violence survivors referred by police to after hours victim advocates	824	600	600

Division: Youth & Family Services

Program Characteristics:

Program Description

Domestic and sexual violence impacts communities differently, and survivors from underserved groups often face compounded barriers rooted in racism and systemic inequities. Culturally specific services are essential–not optional–to ensure equitable access to safety, healing, and long-term stability for all survivors.

This program funds trusted community-based organizations to provide relationship-based and culturally and linguistically relevant advocacy to survivors and their families in order to meet their unique needs. Services are designed to honor culture and values, strengthen trust, and promote intergenerational healing. Services are available for all survivors. Program activities include:

• Providing trauma-informed, holistic support including safety planning, case management, navigation of criminal and civil justice systems, housing and shelter support, legal advocacy, financial assistance, and connection to natural community networks.
• Providing consultation with trusted community partners on best practices to other domestic and sexual violence organizations, making the continuum a more welcoming place for survivors of all backgrounds.

This offer supports the Youth and Family Services (YFS) Division Outcome of Safety and Resilience by increasing access to life-saving support for marginalized communities, and strengthening a more culturally responsive domestic and sexual violence service system.

Equity Statement

Cultural and population-specific services reflect the unique needs and values of communities, and are critical because they address cultural beliefs, languages, and social contexts. Providing cultural and population-specific services reduces barriers, builds enhanced trust and engagement, augments program participation, and improves physical, mental, and social outcomes by recognizing a survivor's cultural context. This leads to a more holistic, person-centered approach to service delivery.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$885,538	$0	$1,024,102	$0
Total GF/non-GF	**$885,538**	**$0**	**$1,024,102**	**$0**
Total Expenses:	**$885,538**		**$1,024,102**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of individuals receiving culturally/population-specific domestic violence services	554	450	450
Percentage of adult survivors who engage in safety planning with an advocate	98%	90%	90%

Division: Youth & Family Services

Program Characteristics:

Program Description

Oregon has one of the highest rates of sexual assault per capita. Each year, more than 2,000 crisis line callers in Multnomah County seek help after sexual assault, yet 75% choose not to engage with the criminal justice system, leaving a major gap in services.

This program funds services to survivors of rape or sexual assault, and ensures every survivor, regardless of their decision or readiness to report, has access to a confidential advocate during a sexual assault forensic exam per national best practices. The program coordinates 24/7 confidential advocacy across 12 hospitals and clinics, with a focus on communities historically underserved and disproportionately impacted. This program also leads the county's Sexual Assault Advisory Council to improve sexual assault prevention and intervention, and delivers technical assistance and training across Multnomah County. Program activities include:

• Providing 24/7 confidential advocacy during rape and sexual assault forensic exams.
• Providing culturally and linguistically appropriate follow-up services after survivors experience a sexual assault, including advocacy, case management, and resource navigation.

This offer supports the Youth and Family Services (YFS) Division Outcome of Safety and Resilience.

Equity Statement

This program strives to ensure that survivors of rape and sexual assault have access to confidential, culturally specific, and linguistically appropriate advocacy. The program's goal is to remove barriers so survivors can get support, regardless of their decision to report to law enforcement, and ensure all survivors have resources and support to stabilize, heal, and move forward with safety and dignity.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$187,489	$0	$194,142	$0
Contractual Services	$706,145	$0	$728,032	$0
Materials & Supplies	$3,280	$0	$9,580	$0
Internal Services	$20,795	$0	$22,418	$0
Total GF/non-GF	**$917,709**	**$0**	**$954,172**	**$0**
Total Expenses:	**$917,709**		**$954,172**	
Program FTE	1.00	0.00	1.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of sexual assault survivors who receive follow-up case management and resource navigation	65	75	75
Number of sexual assault survivors who receive confidential advocacy during a forensic exam	N/A	N/A	300

Division: Youth & Family Services

Program Characteristics:

Program Description

Domestic violence is a complex issue with significant safety, legal, financial, health, and well-being implications. Survivors often need assistance to understand and access available resources and options to address their complex needs.

The Gateway Center (GC) serves as a primary access point for domestic and sexual violence services in the county, providing survivors and their children connections to a wide range of critical services in a trauma-informed, culturally responsive, and welcoming environment. GC contracts for services with multiple culturally specific and legal partners and collaborates with 16 in-house partners, including civil attorneys, prosecutors, Department of Human Services (DHS), and 12 nonprofits. The GC Intake Team coordinates a complex service delivery system and serves as the initial point of contact for every survivor. Contracted navigators provide support services, including safety planning, support with restraining orders, access to counseling, legal assistance, and public benefits. GC also provides coordinated access assessments, housing-related wraparound services, and culturally specific contracted housing navigation funds. Program activities include:

• Providing phone, electronic and in-person access and crisis support (handling over 11,000 calls each year).
• Providing safety planning, advocacy and access to financial assistance, and connection to other services (in-depth services for over 4,000 participants each year).
• Supporting the completion of protection order applications.
• Providing housing stability support to survivors to access safe and stable housing.

Equity Statement

Gateway Center (GC) collaborates with culturally specific community-based organizations to facilitate services that are accessible and equitable to all Multnomah County community members impacted by domestic and sexual violence. GC also increases accessibility to services through strong community partnerships that help guide Multnomah County community members seeking services at GC.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$249,303	$775,042	$397,811	$787,908
Contractual Services	$158,698	$889,294	$163,935	$436,779
Materials & Supplies	$2,000	$9,200	$17,133	$0
Internal Services	$548,213	$18,096	$554,716	$37,757
Total GF/non-GF	**$958,214**	**$1,691,632**	**$1,133,595**	**$1,262,444**
Total Expenses:	**$2,649,846**		**$2,396,039**	
Program FTE	2.00	5.00	3.00	5.00
Program Revenues				
Intergovernmental	$0	$1,078,679	$0	$1,111,039
Total Revenue	**$0**	**$1,078,679**	**$0**	**$1,111,039**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of community members who are able to access protection orders at Gateway Center	1,465	1,300	1,300
Number of survivors receiving individualized housing support services	234	200	200

Division: Youth & Family Services

Program Characteristics:

Program Description

The Youth and Family Services (YFS) Division is dedicated to advancing the county's mission by serving six critical areas: Energy Services, Housing Stability, Eviction Prevention, Education Supports, and Domestic & Sexual Violence. YFS also serves as the designated Community Action Agency. The highly capable operations and administrative team provides critical foundational support in budget management, financial oversight, contract administration, policy analysis, project management, and strategic departmental and division-wide leadership. This program offer is fundamental to operational capabilities, allowing the team to collaboratively manage and implement over 30 unique programs and initiatives. Program activities include:

• Developing and continually monitoring the budget to ensure funding guideline adherence.
• Overseeing daily operations and managing staff using a human-centered approach to foster a culture of innovation.
• Managing and monitoring contract administration and procurements division-wide.
• Convening, collaborating, and supporting both community partners and internal county departments.
• Implementing and supporting countywide initiatives.
• Answering requests for information and data for and from elected leaders, internal and external departments and agencies, media, and community members.

This offer supports all YFS Division Outcomes through operational excellence and leadership provided through data-driven and results-based decision making.

Equity Statement

Youth and Family Services Administration supports the division to reduce systemic barriers by following our department's North Star of ensuring that every individual, at every stage of life, has equitable opportunities to thrive. This includes identifying and addressing gaps in service, implementing and supporting the Workforce Equity Strategic Plan, and creating a sense of safety, trust, and belonging for all.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,973,540	$0	$2,108,955	$0
Contractual Services	$51,020	$0	$51,020	$0
Materials & Supplies	$47,108	$0	$52,964	$0
Internal Services	$316,859	$0	$256,144	$0
Total GF/non-GF	**$2,388,527**	**$0**	**$2,469,083**	**$0**
Total Expenses:	**$2,388,527**		**$2,469,083**	
Program FTE	11.00	0.00	11.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Percentage of managers and supervisors who complete and record at least four check-ins or one-on-ones with each of their direct reports	N/A	N/A	100%
Percent of invoices processed within 30 days	100%	95%	95%

Division: Youth & Family Services

Program Characteristics:

Program Description

Functional utilities are fundamental to meet basic needs. Heat, light, and water are essential for safety and stability. Low-income households face a three-times higher energy burden due to inefficient homes, expensive fuels, and barriers to cost-reducing technology. In Multnomah County, 27% of residents are energy burdened, an increase of 3% from 2020. Contributing significantly to these rising levels of energy insecurity is the weight of drastic increases in electricity bills. Residential customers using local utility providers have seen increases of close to 50% in their energy rates since 2021.

The Energy Assistance Program (EAP) provides one-time annual energy bill payments, emphasizing equitable access for all households in need. The program is delivered by seven nonprofit agencies. Program activities include:

• Providing direct utility payments and case management to income-eligible households.
• Providing energy education to help reduce utility costs.
• Reaching vulnerable communities through outreach and culturally specific providers.

This offer supports the Youth and Family Services (YFS) Division Outcomes of Housing and Economic Stability and Health and Wellness by ensuring households do not experience energy disconnection that could endanger their health, disrupt work and education, and lead ultimately to housing instability.

Equity Statement

Energy Services are delivered through culturally responsive and specific organizations using an equity lens. These organizations ensure fair access for all Multnomah County residents facing utility disconnection inclusive of strategic outreach to marginalized communities reflective of clients' specific needs and culture.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$1,013,632	$0	$936,311
Contractual Services	$152,170	$10,709,601	$157,193	$9,698,125
Materials & Supplies	$0	$57,250	$0	$57,473
Internal Services	$0	$303,044	$0	$252,923
Total GF/non-GF	**$152,170**	**$12,083,527**	**$157,193**	**$10,944,832**
Total Expenses:	**$12,235,697**		**$11,102,025**	
Program FTE	0.00	7.50	0.00	6.50
Program Revenues				
Intergovernmental	$0	$12,083,527	$0	$10,944,832
Total Revenue	**$0**	**$12,083,527**	**$0**	**$10,944,832**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of households served	21,693	18,000	21,000
Number of households that avoid disconnection after receiving a shutoff notice	21,693	18,000	21,000

Division: Youth & Family Services

Program Characteristics:

Program Description

Low-income households spend a higher percentage of their income on energy costs compared to households with higher incomes. Black, Indigenous, and People of Color are even more likely to experience these burdens because their communities receive less investment. This increased financial burden forces low-income households to make difficult decisions to sacrifice basic needs, which can impact their overall health, well-being, and ability to thrive.

The Weatherization Program provides services to low-income households, including older adults, people with disabilities, Veterans, communities of color, and families. Program activities include:

• Home energy audits to identify measures that will improve energy efficiency.
• Repairs and/or improvements to homes and heating systems completed by contracted vendors. These repairs reduce energy use and lower utility bills so that the home is safer and more comfortable. Services might include insulating attics, floors, and walls; air and duct sealing; and repairing/replacing heating systems.
• Education and outreach to households on how to save energy and reduce costs. Households receiving weatherization services also receive information about other community services.

This offer supports the Youth and Family Services (YFS) Division Outcomes of Health and Wellness and Housing and Economic Stability. It increases the likelihood that low-income households can stay permanently and safely housed by reducing their energy costs without having to sacrifice other basic needs such as health care or food.

Equity Statement

The Youth and Family Services Weatherization program provides outreach efforts for Multnomah County residents. Translation services are utilized at intake, and inspectors auditing homes are trained to offer culturally relevant wraparound services.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$1,980,717	$0	$1,956,932
Contractual Services	$0	$7,223,942	$0	$5,088,527
Materials & Supplies	$0	$408,141	$0	$319,620
Internal Services	$0	$626,580	$0	$557,607
Total GF/non-GF	**$0**	**$10,239,380**	**$0**	**$7,922,686**
Total Expenses:	**$10,239,380**		**$7,922,686**	
Program FTE	0.00	14.50	0.00	13.50
Program Revenues				
Intergovernmental	$0	$10,233,606	$0	$7,916,912
Beginning Working Capital	$0	$5,774	$0	$5,774
Total Revenue	**$0**	**$10,239,380**	**$0**	**$7,922,686**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of households served	202	200	200
Number of outreach events	N/A	N/A	10

Division: Youth & Family Services

Program Characteristics:

Program Description

Parents involved with the child welfare system face multi-faceted barriers, including housing instability and a lack of preventative resources. A legacy of systemic racism in the child welfare system also profoundly affects families. Black, Indigenous and other families of color are significantly overrepresented in the child welfare system. The Family Unification Program (FUP) offers families many different kinds of organized support and uses diverse methods of family support that are specific to a family's culture. This help includes finding a home, client-centered assertive engagement, flexible funds for client needs, long-term rent assistance (permanent housing vouchers), and access to job development services. FUP is a collaboration of the Department of County Human Services (Youth and Family Services (YFS)), the Oregon Department of Human Services (ODHS), and Home Forward. The program partners with a community-based nonprofit legal organization, which helps remove legal barriers such as record expungement and mitigation of fines. Program activities include:

• Providing supportive wraparound case management, including housing placement, landlord negotiation, and move in assistance to families involved with ODHS Child Welfare.
• Providing permanent housing vouchers to participating families, leveraging 261 federal Housing and Urban Development (HUD) Housing Choice vouchers. The estimated annual value of these vouchers (if fully utilized) is over $4 million.

This offer supports the YFS Division Outcome of Housing and Economic Stability by helping parents achieve stability and either keep or have their children returned to them.

Equity Statement

The Family Unification Program provides culturally specific and assertive engagement case management that respects and addresses the unique needs of diverse communities.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$664,004	$300,000	$685,916	$300,000
Total GF/non-GF	**$664,004**	**$300,000**	**$685,916**	**$300,000**
Total Expenses:	**$964,004**		**$985,916**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$300,000	$0	$300,000
Total Revenue	**$0**	**$300,000**	**$0**	**$300,000**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of families who engage in housing placement and stability services	151	120	120
Percentage of families who engage in case management	100%	80%	80%

Division: Youth & Family Services

Program Characteristics:

Program Description

Legal issues that include housing barriers, immigration challenges, old criminal records, and debt can impact individuals rebuilding their lives after system involvement. These issues can lead to ongoing economic hardship and make it difficult to secure stable housing and employment. For many low-income households, and especially vulnerable community members, legal services are financially inaccessible and hard to find. Having a dedicated legal resource for participants of wraparound social service programs serving vulnerable families is key to achieving their goals. Legal Services and Supports remove these barriers by providing tailored legal counsel and representation to households participating in county-supported stability and wellness programs, including the Multnomah Stability Initiative, Family Unification Program, parents on probation through the Department of Community Justice, the Healthy Birth Initiative, and survivors of sex trafficking. Program activities include:

• Legal advice/representation addressing a range of legal issues, including eviction defense and housing advocacy (reasonable accommodations, housing denial appeals, landlord debt negotiation, and eviction expungement), immigration assistance, criminal barrier reduction (expungement, warrant lifts, probation navigation, court debt relief, driver’s license reinstatement, and felony reductions) and family law assistance.
• Representation in court on housing, immigration, and criminal collateral consequence legal services.

This offer supports the Youth and Family Services (YFS) Division Outcome of Housing and Economic Stability. Reducing or eliminating legal issues removes barriers to housing, employment, and education, increasing earning potential and housing stability.

Equity Statement

Youth and Family Services Legal Services & Supports provides services to address housing barriers, immigration challenges, old criminal records, and outstanding debt. These issues can severely impact individuals trying to rebuild their lives after legal system involvement, and often lead to ongoing economic hardship, making it difficult to secure stable housing and employment.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$503,036	$0	$349,636	$0
Total GF/non-GF	**$503,036**	**$0**	**$349,636**	**$0**
Total Expenses:	**$503,036**		**$349,636**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants engaged in Legal Clinics and Services	203	200	200
Number of legal services provided to participants	501	500	500

Division: Youth & Family Services

Program Characteristics:

Program Description

Low-income people of color are 20 times more likely to go to jail or prison. One arrest can cause catastrophic problems resulting in losing a home, job, kids, or benefits, which creates long-term issues for that person and their family. People charged with a crime often need considerable help. But because this help is hard to find and difficult to get, most people do not have access to these services unless someone helps them.

Peer Navigators are defense-based case managers who support underserved offenders by connecting them to resources. These case managers have personal experience with the justice system. Because of this, they can connect with clients in a way that court staff and even defense lawyers cannot. They start helping clients at the beginning of a criminal case to make sure they get the services they need as the case moves forward. Program activities include:

• Providing peer navigators to economically disadvantaged people who have been charged with a crime.
• Providing needs assessments, advice, service coordination, and referrals to support clients in resolving basic needs and engaging with their legal counsel. Services include housing (temporary, short-term, and long-term), behavioral health, medical, employment, and family/child care.

This program supports the Youth and Family Services (YFS) Division Outcomes of Safety and Resilience and Housing and Economic Stability.

Equity Statement

This program addresses barriers experienced by Multnomah County low-income residents who are involved in the criminal justice system. It supports access to an array of services that improve legal outcomes, long-term stability, and success.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$419,431	$0	$508,272	$0
Total GF/non-GF	**$419,431**	**$0**	**$508,272**	**$0**
Total Expenses:	**$419,431**		**$508,272**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of clients referred to the Peer Support program	N/A	N/A	300
Number of clients connected to resources and needs met	220	200	235

Division: Youth & Family Services

Program Characteristics:

Program Description

The number of eviction court cases filed has increased dramatically due to the current housing and affordability crisis and the expiration of pandemic renter protections. In Multnomah County, the number of court cases for eviction due to nonpayment of rent reached nearly 11,000 households in FY 2025. The number of impacted households far exceeds this, with research suggesting that for every one court case filed, five tenants will have self-evicted. The need for legal support is high, with only 6% of tenants having legal representation in eviction proceedings compared to 80% of landlords. Accessing resources and navigating the evolving legal landscape is also difficult. Renters benefit from fair and manageable stipulated agreements, services that result in negotiated reductions in the amounts owed, and the prevention of evictions. This program offer provides eviction legal consultation, negotiation, and defense services to tenants with eviction notices from landlords or court cases filed. Program activities include:

• Providing legal support to households with an eviction notice to prevent the case from being taken to court.
• Providing eviction legal defense in court when cases are filed.
• Negotiating reductions in the amount tenants owe (approximately $150,000 per year).

This program supports the Youth and Family Services (YFS) Division Outcome of Housing and Economic Stability by providing eviction legal defense services to tenants, which enables them to maintain their housing and avoid homelessness.

Equity Statement

Low-income Multnomah County tenants face ongoing barriers to achieving fair court outcomes due to lack of resources for legal counsel. Providing services through the eviction legal defense services supports fair representation and prevents evictions, as well as helps reduce the amount tenants owe.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$124,528	$210,164	$338,801	$0
Total GF/non-GF	**$124,528**	**$210,164**	**$338,801**	**$0**
Total Expenses:	**$334,692**		**$338,801**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of renters who engage with legal representation to achieve dismissal of their case	363	300	300
Amount that tenant arrears and other charges are reduced	N/A	N/A	$150,000

Division: Youth & Family Services

Program Characteristics:

Program Description

Multnomah County is in a severe housing crisis. For low-income families, having legal issues and not having financial resources to address them are roadblocks to overall stability. Fines and fees, suspended driver's licenses, and criminal records can severely impact individuals trying to rebuild their lives after legal system involvement. These issues often lead to ongoing economic hardship and make it difficult to secure stable housing and employment. For many low-income households, and especially for vulnerable community members, legal services are both financially inaccessible and hard to find. Project Reset removes these barriers by providing legal services focused on removing court debt and clearing criminal records to help lift people out of poverty and work toward stability and well-being. Program activities include:

• Allowing any county resident with fees and fines the opportunity to enter a monthly lottery for legal services. Over 2,000 people are screened each year, and just over 700 are selected. For those 700, over 3,000 cases are filed in court to waive outstanding fines and fees.
• Screening of participants by an attorney for additional legal services.
• Legal services including reduction/removal of court fines and fees, clearing of criminal records, and other resources to provide stability, including the removal of obstacles to obtain a valid driver's license.

This offer supports the Youth and Family Services (YFS) Division Outcome of Housing and Economic Stability. Reducing or eliminating legal issues removes barriers to housing, employment, and education, increasing earning potential and housing stability.

Equity Statement

The Youth and Family Services Record and Fee Expungement Program, Project Reset, seeks to remove economic and non-economic barriers by providing legal services focused on removing court debt and clearing criminal records to help lift people out of poverty and work toward stability and well-being.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$250,000	$0	$0	$428,250
Total GF/non-GF	**$250,000**	**$0**	**$0**	**$428,250**
Total Expenses:	**$250,000**		**$428,250**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants served through Project Reset	729	700	700
Total amount of fees and fines reduced	$1.9 million	$1.5 million	$1.5 million

Division: Youth & Family Services

Program Characteristics:

Program Description

The number of eviction court cases filed has increased dramatically due to the current housing and affordability crisis, and the expiration of pandemic renter protections. In Multnomah County, the number of court cases for eviction due to nonpayment of rent reached nearly 11,000 households in FY 2025. Many tenants are unaware of legal services they can access or don't have time or resources to connect with attorneys to support them prior to their court date. This results in a large percentage of tenants going to court without legal support or representation. The program in this offer provides legal support directly in the court setting to ensure tenants understand their rights and can effectively advocate for themselves. Program activities include:

- Providing available attorneys in the courtroom conducting direct outreach to tenants without representation.
- Providing same-day eviction legal support and intervention in court for tenants with eviction cases.
- Providing intake and screening for legal representation to households at or below 65% of average median income. Legal representation may include negotiations, rental assistance referrals, and help filing stipulated agreements.

This offer supports the Youth and Family Services (YFS) Outcome of Housing and Economic Stability by providing eviction legal services to tenants that assists them in navigating the complex and intimidating legal processes involved in eviction cases before appearing in court.

Equity Statement

The Youth and Family Services Eviction Prevention Program (In Courtroom Support) provides in courtroom legal defense services and supports access to services for a greater number of people and prevents evictions by helping to reduce the amount tenants owe.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$247,324	$0	$255,486	$0
Total GF/non-GF	**$247,324**	**$0**	**$255,486**	**$0**
Total Expenses:	**$247,324**		**$255,486**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of renters who received same-day legal support in the eviction courtroom	1,508	550	550
Percent of households receiving legal support beyond the first court appearance	N/A	10%	10%

Division: Youth & Family Services

Program Characteristics:

Program Description

Many households in the county struggle with housing instability due to rent increases, a shortage of affordable housing, and high costs of living. This program prevents homelessness by providing housing stability and eviction prevention services to people with low incomes, focusing on families with children, older adults, and people with disabilities. Services include:

• Emergency Rent Assistance: one-time assistance for households at imminent risk of eviction.
• Short-Term Rent Assistance: funds for rent assistance, mortgage payment, and emergency hotel vouchers. Assistance is available between 6 and 24 months, and is allocated to nonprofits with case managers who work with families over time.
• Client Assistance: additional financial resources for people engaged in county-staffed programs (Bienestar de la Familia, Intellectual and Developmental Disabilities Services, et cetera).

Program activities include:
• Providing emergency rent assistance, crisis support, and resource navigation through case managers to tenants at imminent risk of eviction to prevent homelessness. This occurs through culturally responsive county and nonprofit providers.
• Providing critical rent and other client assistance resources to ensure clients are able to achieve housing stability.

This offer supports the Youth and Family Services (YFS) Division Outcome of Housing and Economic Stability by stabilizing housing and preventing evictions, and by supporting those who are evicted into secure and stable housing. Ultimately, these services prevent homelessness and reduce the inflow into the county’s homeless system.

Equity Statement

The Youth and Family Services Housing Stabilization & Eviction Prevention Program services are delivered through culturally responsive and specific organizations using an equity lens in their design, including engaging participants and the broader community. They ensure fair access for all households facing housing and economic instability.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$179,360	$1,749,771	$290,824	$545,010
Contractual Services	$1,227,660	$8,431,217	$1,261,589	$3,733,297
Materials & Supplies	$17,560	$0	$16,500	$0
Internal Services	$138,394	$138,609	$150,785	$59,557
Total GF/non-GF	**$1,562,974**	**$10,319,597**	**$1,719,698**	**$4,337,864**
Total Expenses:	**$11,882,571**		**$6,057,562**	
Program FTE	1.06	6.94	2.03	3.47
Program Revenues				
Intergovernmental	$0	$10,319,597	$0	$4,337,864
Total Revenue	**$0**	**$10,319,597**	**$0**	**$4,337,864**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of households receiving emergency rent assistance	2,033	420	420
Number of households engaged in Short-Term Rent Assistance through Home Forward	891	800	800

Division: Youth & Family Services

Program Characteristics: New Request

Program Description

The need for imminent eviction prevention support continues to be high and is growing due to multiple factors, including increasing rents, cost of essential goods, utility rate increases, slow housing production and slow wage increases. In Multnomah County, the number of court cases for eviction due to nonpayment of rent reached nearly 11,000 households in FY 2025. Research suggests that the number of tenants who self-evict is five times the number of court cases filed. Without an increased investment, we will see more households enter into homelessness. Within the broader eviction prevention system, this program offer increases Crisis Case Management and Emergency Rent Assistance for low-income tenants at imminent risk of eviction: that includes those with an eviction notice, written notice to vacate, or households at high risk of losing their housing within 21 days. To be eligible, households must be at 65% average median Income or less. There are several key partners who are part of the Eviction Prevention Program, including contracted culturally responsive and culturally specific nonprofit organizations, Bienestar de la Familia, and Home Forward. Program activities include:

• Providing crisis support, landlord negotiation, application completion support and referrals to additional resources to meet basic needs through case managers.
• Providing one-time emergency rent assistance.
• Providing short-term case management and management of stipulated agreements (up to 3 months).

This offer connects to the Youth and Family Services (YFS) Division Outcome of Housing and Economic Stability. Activities stabilize housing and prevent eviction.

Equity Statement

The Youth and Family Services Eviction Prevention Program services are delivered through culturally responsive and specific organizations using an equity lens in their design, including engaging participants and the broader community. They ensure fair access for all households facing housing and economic instability.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	$578,201	$95,042
Contractual Services	$0	$0	$1,814,830	$1,087,354
Materials & Supplies	$0	$0	$12,969	$0
Internal Services	$0	$0	$0	$10,388
Total GF/non-GF	**$0**	**$0**	**$2,406,000**	**$1,192,784**
Total Expenses:	**$0**		**$3,598,784**	
Program FTE	0.00	0.00	3.50	0.50
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of households receiving emergency rent assistance	N/A	575	500
Percentage of households served that have income of 30% average median income or less	N/A	N/A	50%

Division: Youth & Family Services

Program Characteristics: One-Time-Only Request

Program Description

The need for rent assistance in our community far outweighs the amount of assistance available and puts vulnerable people at risk of homelessness. The Medicaid Waiver Rent Assistance Program (MWRAP) prevents homelessness for Medicaid members with serious health conditions. Recognizing that stable housing is essential for health, this program leverages Oregon's Medicaid 1115 Waiver funding to provide up to six months of short-term rent and utility assistance. Multnomah County partners with local Coordinated Care Organizations to deliver these critical housing benefits. This program bridges healthcare and human services to keep people housed. Program activities include:

• Application & eligibility support: staff navigate complex Medicaid rules to qualify clients and process paperwork.
• Landlord negotiation: team communicates directly with landlords to halt eviction proceedings while payments are processed.
• Housing case management: staff provide guidance to resolve barriers to housing stability and connect clients to other housing supports.
• Rent & utility payments: the program distributes funds to pay past-due rent, current rent, and utility bills.

This program supports the Youth and Family Services (YFS) Division Outcome of Housing and Economic Stability by stopping the flow of housed individuals into homelessness. By stabilizing housing, MWRAP improves health outcomes and reduces health inequities for low-income Oregonians.

Equity Statement

To ensure access to benefits for all, the Medicaid Waiver Rent Assistance Program (MWRAP) uses culturally responsive and trauma-informed approaches to remove barriers. This includes bilingual staff and access to translation. In partnership with the Youth and Family Services Bienestar de la Familia team, this program provides case management and bilingual application assistance to Medicaid members who speak Spanish or Somali.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	$0	$1,738,147
Contractual Services	$0	$10,000,000	$0	$20,578,036
Materials & Supplies	$0	$0	$0	$8,905
Total GF/non-GF	**$0**	**$10,000,000**	**$0**	**$22,325,088**
Total Expenses:	**$10,000,000**		**$22,325,088**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$10,000,000	$0	$22,325,088
Total Revenue	**$0**	**$10,000,000**	**$0**	**$22,325,088**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of households receiving rent, utilities, or other Medicaid Waiver benefits	N/A	1,200	1,450
Number of active evictions prevented through rent assistance	N/A	500	435

Division: Youth & Family Services

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

Program Description

The Medicaid Waiver Rent Assistance Program (MWRAP) prevents homelessness for Medicaid members with serious health conditions. The current gap between application, authorization, and disbursement of funds for Medicaid-funded housing supports is resulting in preventable evictions.

This specific one-time funding initiative targets this gap: individuals and families who were evicted while awaiting Health-Related Social Needs (HRSN) funding. Because housing loss disqualifies individuals from receiving HRSN funding, this one-time funding provides the immediate resources necessary to rapidly rehouse these households. Once households have a new lease, they regain eligibility and re-enter the 1115 Waiver pipeline through an expedited process. Program activities include:

• Flexible housing stabilization funds: The program provides direct financial assistance to remove immediate "exit barriers." This includes both emergency shelter, specifically though short-term hotel stays to prevent unsheltered transitions, and stability support, including coverage of current rent and move-in costs to secure new placements.

This offer supports the Youth & Family Services (YFS) Division Outcome of Housing and Economic Stability by preventing households from living unsheltered for an extended period of time, and maximizes the benefit that the Medicaid 1115 Waiver for Housing can have on our community while it is available.

Equity Statement

To ensure access to benefits for all, the Medicaid Waiver Rent Assistance Program (MWRAP) uses culturally responsive and trauma-informed approaches to remove barriers. This includes bilingual staff and access to translation. In partnership with the Youth & Family Services Bienestar de la Familia team, this program provides case management and bilingual application assistance to Medicaid members who speak Spanish or Somali.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$0	$200,000	$0
Total GF/non-GF	**$0**	**$0**	**$200,000**	**$0**
Total Expenses:	**$0**		**$200,000**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of households receiving rapid rehousing	N/A	N/A	45
Number of households sheltered at hotel	N/A	N/A	25

Division: Youth & Family Services

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

Program Description

The Medicaid Waiver Rent Assistance Program (MWRAP) prevents homelessness for Medicaid members with serious health conditions by leveraging Oregon's Medicaid 1115 Waiver funding to provide up to six months of rent and utility assistance. While 11,000 households have applied to date in the county, there are an estimated 11,000-13,000 households who are likely eligible but have not yet applied. There is a high need for rent assistance to prevent eviction for low-income households living in public/affordable housing communities.

This program expands the county's intake team and provides critical eviction prevention via the creation of a mobile in-reach team for households living in Home Forward public housing complexes. It also expands a new partnership between the MWRAP team and the Multnomah County Health Department's Behavioral Health Division to help stabilize program and recovery housing. Key activities include:

- Outreach and on-site service at Home Forward properties
- Application & eligibility support: navigating complex Medicaid rules to qualify clients and process paperwork.
- Landlord negotiation: communicating directly with landlords to halt eviction proceedings while payments are processed.
- Housing case management: providing guidance to resolve barriers to housing stability and connect clients to supports.
- Rent & utility payments: distributing funds to pay past-due rent, current rent, and utility bills.

This program supports the Youth and Family Services (YFS) Division Outcome of Housing and Economic Stability by stopping the flow of housed individuals into homelessness.

Equity Statement

To ensure access to benefits for all, MWRAP uses culturally responsive and trauma-informed approaches to remove barriers. This includes bilingual staff and access to translation. The In-Reach Team works in housing communities to reach households impacted by poverty and to address disparities in eviction.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	$0	$323,628
Contractual Services	$0	$0	$0	$206,000
Internal Services	$0	$0	$0	$35,372
Total GF/non-GF	**$0**	**$0**	**$0**	**$565,000**
Total Expenses:	**$0**		**$565,000**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of households receiving rent, utilities, or other Medicaid Waiver benefits	N/A	N/A	1,000
Number of Home Forward housing complexes served	N/A	N/A	6

Division: Youth & Family Services

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

Program Description

The City of Portland dedicated $4.25 million one-time-only funding for emergency rent assistance in FY 2027 to prevent eviction in its Technical Adjustment Ordinance in Spring 2026. The City did this in recognition of the high and growing need for imminent eviction prevention support due to multiple factors, including increasing rents, high costs of essential goods, utility rate increases, slow housing production, and slow wage increases.

Within the broader eviction prevention system, this program increases Crisis Case Management and Emergency Rent Assistance for low-income tenants at imminent risk of eviction: those with an eviction notice, written notice to vacate, or households at high risk of losing their housing within 21 days. Recipients must be residents of the City of Portland. To be eligible, households must be at 65% Average Median Income or less. There are several key partners who are part of the Eviction Prevention Program, including contracted culturally responsive and culturally specific nonprofit organizations, Bienestar de la Familia, and Home Forward. Program activities include:

- Providing crisis support, landlord negotiation, application completion support and referrals to additional resources to meet basic needs through case managers.
- Providing one-time emergency rent assistance.
- Providing short term case management and management of stipulated agreements (up to 3 months).

This program connects to the Youth and Family Services (YFS) Division Outcome of Housing and Economic Stability. Activities stabilize housing and prevent eviction.

Equity Statement

The Eviction Prevention services are delivered through culturally responsive and specific organizations using an equity lens in their design, including engaging participants and the broader community. They ensure fair access for all households facing housing instability and eviction.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	$0	$251,924
Contractual Services	$0	$0	$0	$3,970,540
Internal Services	$0	$0	$0	$27,536
Total GF/non-GF	**$0**	**$0**	**$0**	**$4,250,000**
Total Expenses:	**$0**		**$4,250,000**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$0	$0	$4,250,000
Total Revenue	**$0**	**$0**	**$0**	**$4,250,000**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of households receiving emergency rent assistance	N/A	167	833
Percentage of households served that have income of 30% average median income or less	N/A	50%	50%

Division: Youth & Family Services

Program Characteristics:

Program Description

Even though fair housing laws exist to protect people from being treated unfairly, people who live in Multnomah County still experience biases and unfair actions when they try to rent or buy a home. Most of the complaints about housing discrimination are related to a person's race. Everyone deserves to find a home that fits their needs.

Fair housing testing uses people from diverse backgrounds (testers) who pose as potential renters or home buyers to detect discrimination. They document and compare the services and treatment received by protected and non-protected classes to identify patterns of unequal access to housing opportunities. This program expands on the City of Portland's existing fair housing testing initiative. It funds and executes fair housing activities specifically in East Multnomah County, focusing on Gresham, Fairview, Troutdale, Wood Village, Corbett, and unincorporated areas. Program activities include:

- Conducting fair housing tests in East Multnomah County.
- Providing consultation, advocacy and investigation into housing discrimination complaints.
- Providing fair housing training and outreach events for direct service staff at other social service organizations.

This program supports the Youth and Family Services (YFS) Division Outcome of Housing and Economic Stability by identifying discrimination experienced by protected classes and supporting residents who have complaints. The resulting data informs and shapes new policies to eliminate and prevent housing discrimination.

Equity Statement

Fair housing ensures access for everyone. This program focuses on addressing discrimination and disparities in housing access for all, including discrimination based on race, color, national origin, religion, sex, familial status, disability, or other protected class.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$128,000	$0	$128,000	$0
Total GF/non-GF	**$128,000**	**$0**	**$128,000**	**$0**
Total Expenses:	**$128,000**		**$128,000**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of fair housing tests conducted in East Multnomah County	64	60	60
Number of fair housing training and outreach events provided to direct service staff	10	10	10

Division: Youth & Family Services

Program Characteristics:

Program Description

The Pacific Northwest is a hub for youth sex trafficking, with an estimated 400-600 minors exploited each year in Multnomah County. Youth are often trafficked through coercive relationships, gangs, or family and romantic exploitation, leaving them in urgent need of trauma-informed, culturally specific support. Sex Trafficked Youth Services (STYS) funds direct services to youth survivors of sex trafficking, ensuring that youth have trauma-informed and culturally relevant support to heal from the trauma of sexual exploitation and economic and housing instability. 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 activities include:

• Supporting youth who have experienced trafficking by assisting in advocacy, mentorship, safety planning, system navigation, and crisis response tailored to individualized needs.
• Providing housing support and emergency beds to youth trafficking survivors, helping them move toward safety and independence.

STYS also funds collaboration across Multnomah County to prevent and address trafficking at a system level through coordination, policy, and legislation. Survivors and direct service providers are a critical part of this collaboration. Their expertise and lived experiences are essential to these efforts toward preventing trafficking.

This offer supports the Youth & Family Services (YFS) Division Outcome of Safety and Resilience.

Equity Statement

This program provides the only dedicated, culturally specific, and confidential services for youth survivors of sex trafficking in Multnomah County. It serves youth most at risk, meeting them where they are with trauma-informed advocacy, housing, and mentorship.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$1,066,764	$0	$1,101,967	$0
Total GF/non-GF	**$1,066,764**	**$0**	**$1,101,967**	**$0**
Total Expenses:	**$1,066,764**		**$1,101,967**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of youth engaged in case management support	79	80	80
Percent of youth that have achieved a self-identified goal	N/A	N/A	70%

Division: Youth & Family Services

Program Characteristics:

Program Description

Multnomah County is committed to creating a welcoming, safe, and stable community where everyone can thrive. However, many immigrants and refugees have a hard time getting correct information about immigration laws and their rights. This lack of access increases fear and makes it difficult for them to receive important services like legal representation, health care, schooling, jobs, housing, and basic needs. When fewer families can get the care or help they need to be safe and employed, the whole community's health suffers. Culturally Specific Navigation Services ensure immigrant and refugee communities know their rights and can access legal and social services. Services are provided in multiple languages to provide support in participants' native language. Program activities include:

• Providing individualized legal navigation services for immigrants and refugees.
• Providing training and education for immigrants and refugees so they understand their legal rights and can access services.
• Providing program and technical support to agencies who provide culturally specific services to help them increase their ability to serve immigrant and refugee families. This program conducts over 100 trainings or workshops a year.

This offer supports the Youth & Family Services (YFS) Division Outcome of Housing and Economic Stability by providing access to information and support to people who lack the knowledge and resources to navigate the legal system on their own.

Equity Statement

The Youth & Family Services Culturally Specific Navigation Services for Immigrant Families program remains committed to creating a welcoming, safe, and stable community where everyone can thrive, as many immigrant and refugees have a hard time getting correct information about immigration laws and their rights.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$308,568	$0	$318,750	$0
Total GF/non-GF	**$308,568**	**$0**	**$318,750**	**$0**
Total Expenses:	**$308,568**		**$318,750**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants engaged in intake assessment for navigation services	2,283	650	650
Number of individuals and families who received individualized legal navigation services	573	240	240

Division: Youth & Family Services

Program Characteristics:

Program Description

Hundreds of youth under the age of 18 in Multnomah County face unaccompanied homelessness (meaning they are leaving their current home without a parent or guardian) each year due to family stressors and unsafe situations. Youth need support and services that are tailored to their age, developmental stage, culture, and specific circumstances. Youth homelessness impacts their health, development, education, and ability to attend or stay in school. Youth Stability and Homelessness Prevention (YSHP) services focus on family reconciliation, resolving crises that youth experience, and preventing unnecessary out-of-home placement. Services are delivered in partnership with the caring adults in young people's lives, including family members, culturally specific organizations, school personnel, social service providers, and other relevant partners in order to achieve the program's goals. Program activities include:

• Access and outreach: Text and phone services are available around the clock, seven days a week. Mobile response connects with youth in person, and provides transportation if needed. Outreach takes place in the community.
• Crisis and stability support: This program provides needs and safety assessments, emotional support, crisis intervention, safety planning, family mediation, and reunification (when possible and appropriate).
• Emergency housing: Overnight emergency housing options and short-term case management services for youth in emergency housing are available.

This offer supports the Youth & Family Services (YFS) Division Outcome of Housing and Economic Stability by preventing youth homelessness.

Equity Statement

Youth Stability and Homelessness Prevention (YSHP) services are high quality, culturally appropriate, and designed to address barriers and reflect youth experience. The goal of the program is to ensure awareness and access to support is provided at schools, as well as through youth-serving organizations and law enforcement.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$1,490,916	$110,000	$1,540,116	$0
Total GF/non-GF	**$1,490,916**	**$110,000**	**$1,540,116**	**$0**
Total Expenses:	**$1,600,916**		**$1,540,116**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$110,000	$0	$0
Total Revenue	**$0**	**$110,000**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of youth engaged in service	139	75	75
Number of emergency shelter bed nights available annually	4,380	4,380	4,380

Division: Youth & Family Services

Program Characteristics:

Program Description

The cost of living in Multnomah County keeps rising, pushing more families into poverty and homelessness and worsening existing problems. Struggling families often have difficulty finding the services and support they need for stable housing and steady incomes. The systems meant to help can be confusing, and often don't have the flexibility to meet each family's unique needs.

This program helps families deal with immediate problems and work toward being fully independent. It offers personal case management and financial help to support families in finding jobs, securing stable housing, and managing their money, as well as getting legal and educational support. Program activities include:

• Providing personal support to help families set goals and remove roadblocks.
• Connecting families to a network of resources to help them achieve economic stability.
• Offering short-term help with rent and guidance for legal issues.
• Referrals to various financial aid supports, such as programs for financial health and ways to create income.

This offer supports the Youth & Family Services (YFS) Division Outcome of Housing and Economic Stability by actively supporting families to stabilize their housing and achieve their economic and life goals.

Equity Statement

Services are delivered through culturally responsive and specific organizations, and use an equity lens to address systemic barriers to services. They make sure that individuals with the fewest financial resources and opportunities have fair access to services.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$293,698	$61,188	$309,703	$62,200
Contractual Services	$3,254,300	$4,717,111	$2,169,690	$858,024
Materials & Supplies	$26,480	$0	$15,405	$0
Internal Services	$64,320	$8,811	$47,039	$6,801
Total GF/non-GF	**$3,638,798**	**$4,787,110**	**$2,541,837**	**$927,025**
Total Expenses:	**$8,425,908**		**$3,468,862**	
Program FTE	1.67	0.33	1.68	0.32
Program Revenues				
Intergovernmental	$0	$919,595	$0	$927,025
Total Revenue	**$0**	**$919,595**	**$0**	**$927,025**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of households served in Multnomah Stability Initiative (MSI) case management	371	400	228
Number of households that engaged in financial literacy and/or educational support	N/A	N/A	90

Division: Youth & Family Services

Program Characteristics:

Program Description

Communities with low incomes do not have enough opportunities to build public places like parks, health centers, and senior centers. They also need more opportunities for economic growth, good housing, and support for emergency needs. Community development and safe and affordable homes are essential for family and community health and stability.

The federal Housing and Urban Development (HUD) Community Development Block Grant (CDBG) program provides funding to help people with lower and medium incomes who live in East Multnomah County's unincorporated areas. This funding helps pay for community services and home repairs. It includes important fixes that let people stay in their homes. The grant also includes the administration of the CDBG. Program activities include:

• Providing important home repairs and accessibility services so people can stay in their homes.
• Supporting public projects, such as building sidewalks or improving parks.
• Helping make housing affordable, safe, and stable through things like tenant education, weatherizing homes, and case management.
• Setting up and supporting a public advisory board to help make decisions about funding and projects in East County.
• Reaching out to East County residents to get their input on funding recommendations.

This offer supports the Youth & Family Services (YFS) Division Outcome of Housing and Economic Stability by creating opportunities for neighborhood revitalization, as well as supporting households to achieve safe and stable housing.

Equity Statement

Community Development in East County serves impacted and marginalized communities to analyze and address barriers and increase equitable outcomes in housing and economic stability. East Multnomah County has a very diverse population and significant numbers of low-income households–numbers that have grown rapidly in recent years. Therefore, there is a need to augment services to increase economic and housing stability.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$141,110	$31,352	$150,814	$32,332
Contractual Services	$0	$322,133	$0	$297,343
Materials & Supplies	$1,765	$30,000	$850	$30,000
Internal Services	$21,440	$4,515	$22,418	$3,535
Total GF/non-GF	**$164,315**	**$388,000**	**$174,082**	**$363,210**
Total Expenses:	**$552,315**		**$537,292**	
Program FTE	0.82	0.18	0.82	0.18
Program Revenues				
Intergovernmental	$0	$388,000	$0	$333,210
Other / Miscellaneous	$0	$0	$0	$30,000
Total Revenue	**$0**	**$388,000**	**$0**	**$363,210**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of public works projects completed	1	1	1
Number of housing units rehabilitated	34	34	34

Division: Youth & Family Services

Program Characteristics:

Program Description

According to the Oregon Hunger Task Force, in 2023, 11.5% of people in Multnomah County were experiencing food insecurity. Children and communities of color experience hunger at even greater rates. The Supplemental Nutrition Assistance Program (SNAP) is one of the best resources to help people and families with food security, especially underserved communities. However, the application can be difficult to complete and benefits can be hard to access. In addition, with recent federal changes, about 29,000 households will see reduced benefits because utility assistance no longer boosts SNAP amounts for most families. Additionally, certain lawfully present immigrants will lose eligibility. These shifts mean many impacted residents of Multnomah County will face increased challenges to accessing enough food. SNAP outreach activities help increase awareness about SNAP, 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. Program activities include:

• Supporting food insecure households in completing applications, renewing benefits, and guiding them through processes.
• Conducting outreach to make vulnerable communities aware of resources and complete applications in person.
• Providing information and referrals to other services.

This offer supports the Youth & Family Services (YFS) Division Outcomes of Health and Wellness and Housing and Economic Stability by supporting a better quality diet and nutrition for children and adults, and allowing other resources to go to rent and other basic needs.

Equity Statement

The focus is serving those with the highest levels of food insecurity and lowest participation rates, so that poverty does not mean going hungry. Outreach to underserved communities, as well as services that are culturally appropriate and offered in multiple languages, help reach everyone who needs assistance and reduces disparities.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$147,972	$129,291	$147,083	$147,083
Materials & Supplies	$1,030	$618	$575	$137,596
Internal Services	$27,517	$32,063	$23,188	$39,265
Total GF/non-GF	**$176,519**	**$161,972**	**$170,846**	**$323,944**
Total Expenses:	**$338,491**		**$494,790**	
Program FTE	1.07	0.93	1.00	1.00
Program Revenues				
Intergovernmental	$0	$161,972	$0	$323,944
Total Revenue	**$0**	**$161,972**	**$0**	**$323,944**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of consumers engaged through outreach activities	3,941	5,000	5,000
Number of Supplemental Nutrition Assistance Program (SNAP) applications completed	416	250	250

Division: Youth & Family Services

Program Characteristics:

Program Description

Academic success leads to higher economic prosperity. Low academic performance and persistent educational disparities in Multnomah County and Oregon severely impact students and families with a history of marginalization. Schools Uniting Neighborhoods Community Schools (SUN CS) are the cornerstone strategy within the SUN Service System. The SUN CS program uses culturally responsive practices to reduce learning barriers and build on student and family strengths. SUN CS contracts with community-based organizations to address unique needs. The program's goal is for all students and families, especially those from marginalized communities, to be healthy, educated, and prosperous. SUN CS operates through four main activities: prioritizing relationships, centering student learning, integrating basic needs support, and collaboration/leadership. The 83 Multnomah County SUN schools each have a site manager who coordinates extended day programming, engages and connects families to resources, and collaborates with partners. This student-centered approach boosts engagement and success, showing increased attendance. Youth and Family Services (YFS) staff support program development by convening vested parties and working with providers to leverage community power for children's well-being by:

• Developing extended day and summer programming for students at their school in partnership with the school.
• Utilizing family engagement strategies to build trusting relationships with families.
• Partnering with school staff to support students and families to meet basic needs.

This program supports the YFS Division Outcome of Educational Opportunity and Success by providing a coordinated, collaborative approach that is essential to address complex disparities that ensure access to vital resources for success.

Equity Statement

The Schools Uniting Neighborhoods (SUN) Service System is an aligned system of care that drives youth educational success, family stability, and prosperity for all, with a focus on equity. System planning and design uses the equity and empowerment lens to address systemic barriers. Strategies include culturally appropriate and culturally specific services, community engagement, fostering of safety, trust, and belonging, and disaggregation of data to produce outcomes for all.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$664,421	$0	$700,705	$0
Contractual Services	$9,069,456	$2,914,661	$8,103,310	$2,926,016
Materials & Supplies	$32,540	$0	$35,560	$0
Internal Services	$85,867	$0	$95,610	$0
Total GF/non-GF	**$9,852,284**	**$2,914,661**	**$8,935,185**	**$2,926,016**
Total Expenses:	**$12,766,945**		**$11,861,201**	
Program FTE	4.00	0.00	4.00	0.00
Program Revenues				
Intergovernmental	$0	$2,914,661	$0	$2,926,016
Total Revenue	**$0**	**$2,914,661**	**$0**	**$2,926,016**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of children (ages 5-18) served	18,199	18,000	16,000
Number of students who attend 30 days or more of extended day programming	6,398	6,000	5,280

Division: Youth & Family Services

Program Characteristics: One-Time-Only Request

Program Description

This program provides one-time-only funding for nine Schools Uniting Neighborhoods Community Schools (SUN CS). SUN CS are the cornerstone strategy within the SUN Service System.

The SUN CS program uses culturally responsive practices to reduce learning barriers and build on student and family strengths. SUN CS contracts with community-based organizations to address unique needs. SUN CS's goal is for all students and families, especially those from marginalized communities, to be healthy, educated, and prosperous. SUN CS operates through four main activities: prioritizing relationships, centering student learning, integrating basic needs support, and collaboration/leadership. SUN schools each have a site manager who coordinates extended day programming, engages families and connects them to resources, and collaborates with partners. This student-centered approach boosts engagement and success, showing increased attendance. Youth and Family Services (YFS) staff support program development by convening vested parties and working with providers to leverage community power for children's well-being by:

- Developing extended day and summer programming for students at their school in partnership with the school.
- Utilizing family engagement strategies to build trusting relationships with families.
- Partnering with school staff to support students and families to meet basic needs.

This program supports the YFS Division Outcome of Educational Opportunity and Success by providing a coordinated, collaborative approach that is essential to address complex disparities that ensure access to vital resources for success.

Equity Statement

The Schools Uniting Neighborhoods (SUN) Service System is an aligned system of care that drives youth educational success, family stability, and prosperity for all, with a focus on equity. System planning and design uses the equity and empowerment lens to address systemic barriers. Strategies include culturally appropriate and culturally specific services, community engagement, fostering of safety, trust, and belonging, and disaggregation of data to produce outcomes for all.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$0	$1,200,000	$0
Total GF/non-GF	**$0**	**$0**	**$1,200,000**	**$0**
Total Expenses:	**$0**		**$1,200,000**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of children (ages 5-18) served	N/A	N/A	2,000
Number of students who attend 30 days or more of after school programming	N/A	N/A	630

Division: Youth & Family Services

Program Characteristics:

Program Description

Good 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 17.3% based on an Oregon Hunger Task Force Report from 2023. Communities of color also experience hunger higher rates. This food insecurity has skyrocketed due to inflation and Supplemental Nutrition Assistance Program (SNAP) eligibility changes. The Child & Family Hunger Relief Program reduces food insecurity and hunger, allowing children to be healthy and ready to learn, and increases collaboration in meeting hunger needs. This program is a partnership with multiple organizations, including the Oregon Food Bank and six school districts working to increase awareness of summer meal sites, supporting food needs with schools and libraries, and providing food assistance through 19 school-based food pantries and 6 Free Food Markets in Schools Uniting Neighborhoods (SUN) Community Schools. It also engages in policy work with the Child & Family Food Security Coalition to leverage community partnerships, focusing on culturally specific populations. Program activities include:

• Supporting staffing and logistics at food pantries in SUN Community Schools.
• In the summer months, there will be additional weeks for engaging activities during lunch to support mid and East County students to receive free summer meals.
• Supporting the collaborative partnership among hunger relief partners to leverage funds.

This offer supports the Youth & Family Services (YFS) Division Outcome of Educational Opportunity and Success by providing food and meals to children and families so children can be healthy and ready to learn.

Equity Statement

The Schools Uniting Neighborhoods (SUN) Service System is an aligned system of care that drives youth educational success, family stability, and prosperity for all, with a focus on equity. System planning and design uses the equity and empowerment lens to address systemic barriers. Strategies include culturally appropriate and culturally specific services, community engagement, fostering of safety, trust, and belonging, and disaggregation of data to produce outcomes for all.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$171,267	$0	$181,989	$0
Contractual Services	$570,504	$0	$589,238	$0
Materials & Supplies	$4,145	$0	$4,780	$0
Internal Services	$21,440	$0	$22,418	$0
Total GF/non-GF	**$767,356**	**$0**	**$798,425**	**$0**
Total Expenses:	**$767,356**		**$798,425**	
Program FTE	1.00	0.00	1.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of meals provided to children and families	1,953,784	1,700,000	1,500,000
Retail dollar equivalent for every $1 County General Fund (GCF) invested in Schools Uniting Neighborhoods (SUN) Food Distribution sites	$6.47	$8	$8

Division: Youth & Family Services

Program Characteristics:

Program Description

Multnomah County saw a dramatic decline in educational attainment and poorer youth health in 2021 with slow progress towards pre pandemic levels. Multnomah County 2024 graduation rate (78%) is below the Oregon 2024 graduation rate (82%) with widening disparities for those experiencing poverty and from marginalized communities. The Schools Uniting Neighborhoods (SUN) Youth Advocacy (SYA) program helps all students who face the biggest challenges in school, like students of color, those experiencing poverty, immigrants, and refugees, by connecting them with a trustworthy adult. This support focuses on their social, emotional, and school needs. SYA works to make students feel safer, more connected, and positive about their cultural background. Studies show this helps all students attend school more often, earn credits, and graduate, especially for students of color. Youth Advocates build strong, respectful relationships with students, their families, and the school, based on the student's culture and strengths. They offer emotional help, connect families to necessary services, and provide academic support so students can reach their personal and school goals. Program activities include:

• Providing dedicated staff to support youth from middle to high school, connecting with youth regularly at school.
• Setting goals with youth to support youth interests and academic success.
• Allowing for collaboration with building administrators and staff to identify students who need support.
• Supporting connection with families to support youth academic success and future planning.

This offer supports the Youth & Family Services (YFS) Division Outcome of Educational Opportunity and Success by increasing youth safety and belonging through culturally relevant advocacy and case management services.

Equity Statement

The Schools Uniting Neighborhoods (SUN) Service System is an aligned system of care that drives youth educational success, family stability, and prosperity for all, with a focus on equity. System planning and design uses the equity and empowerment lens to address systemic barriers. Strategies include culturally appropriate and culturally specific services, community engagement, fostering of safety, trust, and belonging, and disaggregation of data to produce outcomes for all.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$4,228,346	$100,000	$4,367,787	$0
Total GF/non-GF	**$4,228,346**	**$100,000**	**$4,367,787**	**$0**
Total Expenses:	**$4,328,346**		**$4,367,787**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$100,000	$0	$0
Total Revenue	**$0**	**$100,000**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of students (aged 6-18) served	936	1,000	1,210
Percent of students who make progress or achieve individualized action or success plan goals	96%	90%	90%

Division: Youth & Family Services

Program Characteristics:

Program Description

Multnomah County has 17,589 children under age six in low-income families. Families with low incomes, historically marginalized families, and immigrants and refugees have fewer opportunities to participate in services supporting parenting knowledge and child development. This contributes significantly to disparities in kindergarten readiness levels and success in school. Impacts from the pandemic and inflation continue to create barriers for children and families. More families require help meeting their basic needs and lack the social, emotional, and mental health supports to thrive. Parent Child Development Services (PCDS), part of the Schools Uniting Neighborhoods (SUN) Service System, aims to increase kindergarten readiness and ensure healthy child development by removing barriers and providing resources to families with children under age six. PCDS contracts with nonprofit partners, dedicating 60% of funding to culturally specific services. These nonprofit partners offer services such as developmental screening, immunization checks, resource connections, skill building, playgroups, and support in navigating resource and health systems, including connecting families to Preschool for All. They support families and engage with them in a culturally responsive manner that honors the needs of families. Program activities include:

• Connecting parents to PCDS staff, increasing knowledge, ensuring healthy child development, and fostering connections.
• Providing resource connections for parents if they are seeking developmental support.
• Connecting parents to preschool and elementary school resources and supports.

This offer supports the Youth & Family Services (YFS) Division Outcome of Educational Opportunity and Success by increasing kindergarten readiness and ensuring healthy child development.

Equity Statement

The Schools Uniting Neighborhoods (SUN) Service System is an aligned system of care that drives youth educational success, family stability, and prosperity for all, with a focus on equity. System planning and design uses the equity and empowerment lens to address systemic barriers. Strategies include culturally appropriate and culturally specific services, community engagement, fostering of safety, trust, and belonging, and disaggregation of data to produce outcomes for all.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$87,535	$0	$77,848	$0
Contractual Services	$1,226,072	$544,803	$1,271,215	$456,248
Materials & Supplies	$1,815	$0	$13,320	$0
Internal Services	$7,797	$0	$12,676	$0
Total GF/non-GF	**$1,323,219**	**$544,803**	**$1,375,059**	**$456,248**
Total Expenses:	**$1,868,022**		**$1,831,307**	
Program FTE	0.50	0.00	0.50	0.00
Program Revenues				
Intergovernmental	$0	$299,853	$0	$360,502
Other / Miscellaneous	$0	$244,950	$0	$95,746
Total Revenue	**$0**	**$544,803**	**$0**	**$456,248**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of children served	466	200	200
Percent of children up to date on immunizations at exit	75%	80%	90%

Division: Youth & Family Services

Program Characteristics:

Program Description

Students chronically absent in preschool and kindergarten are much less likely to read and count proficiently by the end of third grade. They are more likely to be chronically absent in later grades. 30% of Oregon kindergarteners are chronically absent. This number is higher for immigrants, refugees, and kindergartners of color. The transition between preschool and elementary school needs to be strong and well-supported. Early Learning Programs utilize the Schools Uniting Neighborhoods (SUN) Community School (SUN CS) model. There are two main components: Early Kindergarten Transition (EKT) and Prenatal to 3rd Grade (P-3). EKT is a school-based summer program where children entering kindergarten spend time in a classroom with a teacher, and parents get familiar with the school and build relationships. EKT focuses outreach to children experiencing poverty and from underserved or marginalized communities. P-3 provides early parent engagement at nine SUN CS locations, connecting families to the school before kindergarten, empowering parents as leaders, and linking them to resources and other parents. Program activities include:

• Two weeks of summer kindergarten transition programming for incoming students and family sessions on attendance (EKT).
• Providing kindergarten connections after summer (EKT).
• Engaging families with children ages 0-5 with school readiness activities (P-3).
• Creating opportunities for children not in preschool or kindergarten to connect with others in their neighborhood (P-3).

This offer supports the Youth & Family Services (YFS) Division Outcome of Educational Opportunity and Success by ensuring a successful transition to kindergarten and fostering family engagement through the early elementary years.

Equity Statement

The Schools Uniting Neighborhoods (SUN) Service System is an aligned system of care that drives youth educational success, family stability, and prosperity for all, with a focus on equity. System planning and design uses the equity and empowerment lens to address systemic barriers. Strategies include culturally appropriate and culturally specific services, community engagement, fostering of safety, trust, and belonging, and disaggregation of data to produce outcomes for all.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$113,923	$43,706	$122,296	$45,072
Contractual Services	$311,237	$792,982	$320,442	$1,188,486
Materials & Supplies	$17,405	$0	$27,480	$0
Internal Services	$20,795	$6,294	$22,418	$4,928
Total GF/non-GF	**$463,360**	**$842,982**	**$492,636**	**$1,238,486**
Total Expenses:	**$1,306,342**		**$1,731,122**	
Program FTE	0.72	0.28	0.73	0.27
Program Revenues				
Intergovernmental	$0	$125,500	$0	$27,600
Other / Miscellaneous	$0	$717,482	$0	$1,210,886
Total Revenue	**$0**	**$842,982**	**$0**	**$1,238,486**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of children who participate in summer Early Kindergarten Transition	781	600	600
Percent of parents who report comfort with activities they can engage in at home to support their child in school	N/A	90%	90%

Division: Youth & Family Services

Program Characteristics:

Program Description

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. Sexual & Gender Minority Youth (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.

The SGMY program works to create an environment where youth can build positive relationships with peers and adults. They focus on supporting youth by creating a welcoming space, providing basic needs, case management, youth-led activities, and skill-building opportunities. Program activities include:

• Drop-in space for youth to connect with trusted adults, peers, and affirming activities.
• Providing weekly one-on-one check-ins (virtual or in-person) for social support.
• Coordinating a steering committee that centers youth voice in program design and decision making.
• Providing training to school staff and Schools Uniting Neighborhoods (SUN) Service System contracted organizations to increase their ability to support youth in a culturally responsive and effective way.

This offer supports the Youth & Family Services (YFS) Division Outcome of Educational Opportunity and Success by breaking isolation and providing affirming adults, supportive peers, and safe gathering spaces to youth.

Equity Statement

The Schools Uniting Neighborhoods (SUN) Service System is an aligned system of care that drives youth educational success, family stability, and prosperity for all, with a focus on equity. System planning and design uses the equity and empowerment lens to address systemic barriers. Strategies include culturally appropriate and culturally specific services, community engagement, fostering of safety, trust, and belonging, and disaggregation of data to produce outcomes for all.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$405,938	$0	$419,334	$0
Total GF/non-GF	**$405,938**	**$0**	**$419,334**	**$0**
Total Expenses:	**$405,938**		**$419,334**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of youth who participate in case management	72	75	75
Percent of youth who remain in or re-enroll in school	51%	75%	75%

Division: Youth & Family Services

Program Characteristics:

Program Description

High unemployment and rising costs are driving more and more households in Multnomah County to go without food and be at risk of homelessness. Many individuals, families, and children continue to experience poverty, food shortages, unstable housing, and homelessness. Bienestar de la Familia is based in the Cully neighborhood and serves people throughout Multnomah County. Bienestar offers services that are responsive to language, culture, and individual circumstances. The program provides case management, rent and utility assistance, rehousing support, employment services, food distribution, mental health and substance use counseling, youth activities, parent education, support groups, referrals, and crisis navigation. Staff reach people through visits, calls, walk-in hours, and community outreach. The Community Advisory Council offers guidance to keep services aligned with community needs. Program activities include:

- Crisis support, referrals, and service navigation.
- Long-term case management and rehousing placements.
- Mental health and substance use counseling.
- Fresh food distributions through Mercado Harvest Share and related programs.

Bienestar supports the Youth & Family Services (YFS) Division Outcomes of Housing and Economic Stability and Health and Wellness by strengthening stability, safety, and wellbeing through culturally responsive services. It includes reducing poverty, supporting housing retention, preventing homelessness, and improving mental health through approaches grounded in trust and care.

Equity Statement

Bienestar de la Familia provides fair and respectful access to services for all households. The program reduces barriers related to language, past trauma, and limited resources. Staff provide support that honors each person's situation and strengthens trust. The goal is a space where everyone feels welcome and able to seek help safely.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$2,008,516	$79,841	$2,087,348	$83,679
Contractual Services	$16,500	$220,948	$16,500	$264,735
Materials & Supplies	$84,895	$0	$50,700	$0
Internal Services	$660,350	$11,498	$434,977	$9,146
Total GF/non-GF	**$2,770,261**	**$312,287**	**$2,589,525**	**$357,560**
Total Expenses:	**$3,082,548**		**$2,947,085**	
Program FTE	13.44	0.56	13.44	0.56
Program Revenues				
Intergovernmental	$0	$312,287	$0	$357,560
Total Revenue	**$0**	**$312,287**	**$0**	**$357,560**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number served with ongoing housing, food, mental health, addiction services and/or youth/adult community education	411	350	350
Number of individuals served by Mercado	5,317	2,500	2,500

Preschool and Early Learning

$833.0 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

71.00 FTE

(full time equivalent)

The Preschool & Early Learning (PEL) Division is responsible for administering the Preschool for All (PFA) program, which aims to achieve universal preschool access in Multnomah County by 2030 for 3- and 4-year-olds. The division's core functions involve managing overall program capacity, overseeing the PFA budget and provider contracts, developing the early educator workforce, and ensuring program quality through coaching, curriculum support, and mental health services. It also manages infrastructure investments, such as the PFA Facilities Fund, and oversees family and provider navigation efforts to support enrollment and program implementation.

Significant Division Changes

PEL Division Staff Growth: The FTE for the Preschool and Early Learning Division increased by 17.00 FTE to support overall program growth.

- **Administrative & System Support (25200A):** 1.00 FTE Contract Specialist Senior, 1.00 FTE Contract Technician, and 3.00 LDA Contract Specialist Senior have been added to support core functions, increase efficiency and address increased number of contracts for Preschool for All such as executing contracts quickly and paying preschool providers on time. These positions reside outside of the division within the department’s Business Services.
- **Division Administration & System Support (25201):** An additional 5.00 FTE (2.00 FTE Program Specialist and 3.00 FTE Business Analyst) have been added to support significant program growth.

- **Preschool Access: Family & Provider Navigation (25202):** 2.00 FTE Program Specialists have been added to enhance the program's ability to coordinate, manage, and deliver specific support and partnerships with families and small preschool businesses.
- **Preschool for All Facilities Fund (25203A):** 1.00 FTE Project Manager (represented) has been added to oversee Facilities Fund investments and execute technical assistance to improve learning environments and expand preschool programs.
- **Preschool for All Sites (25205A):** An additional 7.00 FTE have been added to support significant program growth: 1.00 FTE Manager 1 and 6.00 FTE Program Specialist. This increase in funding is to support seat growth in FY 2027.

Program Growth

- **Preschool for All Facilities Fund City Permit Navigator (25203B):** Added $287,000 to fund a dedicated staff person at Portland Permitting & Development. This staff will support all current and prospective PFA providers as they navigate the child care facility permitting process. This position will support small business owners by expediting permit processing and reducing costly delays.
- **Program Quality & Provider Capacity Building (25204):** Increased contract funding for nurses from $648,889 in FY 2026 to $1.3 million in FY 2027; increased Coaching and Early Childhood Environmental Rating Scale contracts funding to support growth from $372,805 to $520,865; Added additional funding for inclusion and equity training for preschool providers of $250,000. PEL is in the process of exploring a partnership with local behavioral health organizations to provide mental health services for PFA programs.
- **Preschool for All Sites (25205A):** The program significantly exceeded the 4,500-seat goal in FY 2027, leading to a dramatic increase in the total projected cost for PFA seats. Funding was increased from $101.5 million to $204.4 million in FY 2027 for 7,500 seats.
- **Preschool for All Clinical Supervision (25205B):** Added $198,812 for a partnership with Balmer Institute to support one limited duration assignment clinical supervisor to oversee behavioral health interns. Through this partnership, PFA will not only provide immediate behavioral support but also cultivate a skilled talent pool for specialized, non-teaching roles essential to a holistic preschool system.
- **Preschool for All Infant Toddler Stabilization (25207):** Increased funding by $5.6 million for this service based on 7,500 preschool seat goal.

Preschool and Early Learning Outcomes

1. All children in Multnomah County have access to free preschool. This will prepare them for the transition to K-12 and future success.

Preschool for All is free preschool available to all 3- and 4- year-olds in Multnomah County. Having access to free preschool helps children not only during their preschool years, and prepares them for their K-12 years and sets them up for success in adulthood.

Key Performance Indicator (KPI) 1.1: Percent of families who believe their child's preschool is helping them with basic kindergarten readiness skills.

KPI 1.1 Description: Preschool is a critical time for a child's development. Preschool is a place where children gain the foundational skills that help them successfully transition into kindergarten. This includes academic skills, like knowing the alphabet or being able to hold a pencil. It also includes social emotional skills, like knowing how to take turns, recognizing emotions, and being able to express needs.

- Academic skills
  - 91% of families say their child is well prepared to use pencils and paintbrushes
  - 84% say their child is well prepared to count to 20 or recognize letters
- Communication skills
  - 90% say their child is well prepared to talk about their needs, wants, and thoughts in English
- Social and self-regulation skills
  - 80% say their child is well prepared to sit still and pay attention

FY 2026 Estimate: 85% for all kindergarten readiness skills	**FY 2027 Target:** 85% for all kindergarten readiness skills

KPI 1.1 Equity Considerations: This data was collected by our external evaluation partners. As PFA continues to serve more children, and response rates to this survey increase, PEL will work with our external evaluation partners to disaggregate these outcomes. We want to ensure that all children in PFA are having high-quality educational experiences.

Outcome 1 Program Offers

The following program offers contribute to Outcome 1. Division-specific administrative program offers are not included, as they support all outcome statements:

- 25202 - Preschool Access: Family & Provider Navigation
- 25205A - Preschool for All Sites

2. Preschools and families partner to create responsive and equitable classrooms.

Preschools and families work together to support child learning in the classroom.

Key Performance Indicator (KPI) 2.1: The percentage of families who report a strong school-family partnership

KPI 2.1 Description: Families are a critical part of their child's learning. When schools and families work together, children thrive. Classrooms also become more equitable. As families are included in classrooms, so is their identity - their culture, language, and background are welcomed into the space. This helps the children in that classroom be proud of their own identities, and strengthens their sense of self and their sense of belonging. This KPI measures the school-family partnership from the family's perspective.

Measures	FY 2024	FY 2025
% of families who report feeling welcome at their child's school.	99%	100%
% of families who believe their traditions, including racial, religious, or cultural, are included in the curriculum.	97%	96%
% of families who feel they have strong relationships with their child's teacher.	97%	92%
% of families who feel comfortable speaking to the school if there is a problem.	95%	97%

FY 2026 Estimate: 95% for all school-family partnership indicators	**FY 2027 Target:** 95% for all school-family partnership indicators

KPI 2.1 Equity Considerations: When a child sees their family's identity accepted and embraced in the classroom, they are more likely to feel a stronger sense of self and belonging.

Outcome 2 Program Offers

The following program offers contribute to Outcome 2. Division-specific administrative program offers are not included, as they support all outcome statements:

- 25202 - Preschool Access: Family & Provider Navigation
- 25204 - Program Quality & Provider Capacity Building

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3. Preschool teachers are diverse, culturally responsive, highly qualified, and fairly compensated.

Preschool teachers receive living wages and benefits and the training and support they need to educate the children in their classrooms. Children can see teachers who look and sound like them.

Key Performance Indicator (KPI) 3.1:

- Median hourly wage of a PFA lead teacher.
- Median hourly wage of a PFA assistant teacher.

KPI 3.1 Description: Preschool for All understands the importance of paying preschool teachers a living wage. This helps retain educators, provides stability, and improves child experiences. Historically, Early Childhood Educators have been extremely underpaid.

FY 2026 Estimate: FY 2026 Median hourly wage estimate, PFA Assistant Teacher: $22.67 FY 2026 Median hourly wage estimate, PFA Lead Teacher: $29.42	**FY 2027 Target:** FY 2027 Median hourly target, PFA Assistant Teacher: $23.16 FY 2027 Median hourly target, PFA Lead Teacher: $33.15

KPI 3.1 Equity Considerations: This data's reporting mechanism is still being improved. Currently, PEL can disaggregate this data by setting type, years of experience, and educational attainment. The next area for improvement is to understand year over year changes. PEL also hopes to begin collecting demographic information from educators to better understand if any wage disparities exist.

Outcome 3 Program Offers The following program offers contribute to Outcome 4.

- 25206 - Early Educator Workforce Development
- 25207 - Preschool for all Infant Toddler Stabilization

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	Total FTE
25200A	PEL - Administration & System Support		0	2,285,588	2,285,588	7.00
25200B	PEL- Contingency & Reserves	X	0	47,250,000	47,250,000	0.00
25200C	PEL - Dedicated Savings	X	0	513,528,202	513,528,202	0.00
25201	PEL - Division Administration & System Support		0	7,860,498	7,860,498	34.00
25202	Preschool Access: Family & Provider Navigation		0	2,123,612	2,123,612	3.00
25203A	Preschool for All Facilities Fund		0	15,184,409	15,184,409	1.00
25203B	Preschool for All Facilities Fund City Permit Navigator	X	0	287,000	287,000	0.00
25204	Program Quality & Provider Capacity Building		0	12,579,584	12,579,584	1.00
25205A	Preschool for All Sites		0	204,419,728	204,419,728	24.00
25205B	Preschool for All Clinical Supervision	X	0	198,812	198,812	0.00
25206	Early Educator Workforce Development		0	7,247,072	7,247,072	1.00
25207	Preschool for All Infant Toddler Stabilization		0	20,070,620	20,070,620	0.00
Total Preschool and Early Learning			**0**	**833,035,125**	**833,035,125**	**71.00**

Division: Preschool & Early Learning

Program Characteristics:

Program Description

Multnomah County voters passed Measure 26-214, “Preschool for All” (PFA), in November 2020. PFA connects 3- and 4-year-olds in Multnomah County with free, inclusive, culturally affirming preschool. It requires careful financial planning, sufficient administrative capacity, and a thoughtful approach to creating and expanding services. The measure directed the Department of County Human Services (DCHS) to lead PFA.

These investments help PFA run more efficiently and be more accessible for providers and families.

PFA departmental administrative costs include funding for six positions in DCHS Business Services and one position in DCHS Human Resources (HR). These positions help the program complete essential functions, such as executing contracts quickly and paying preschool providers on time. The position in DCHS HR supports staff in the Preschool & Early Learning Division (PEL).

This offer includes a preschool application and enrollment tracking system to support families in applying to PFA. It also allows for additional software to manage and track provider data and to manage emails and calls from families and PFA providers.

Equity Statement

These investments ensure that Preschool for All administrative processes are more accessible, efficient, and equitable. By reducing administrative barriers, the program supports timely payments and access for a diverse group of providers. Thoughtful technology investments expand access for families across languages, abilities, and backgrounds.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$876,360	$0	$1,710,238
Materials & Supplies	$0	$166,405	$0	$8,075
Internal Services	$0	$548,654	$0	$567,275
Total GF/non-GF	**$0**	**$1,591,419**	**$0**	**$2,285,588**
Total Expenses:	**$1,591,419**		**$2,285,588**	
Program FTE	0.00	5.00	0.00	7.00
Program Revenues				
Taxes	$0	$175,000,000	$0	$189,000,000
Interest	$0	$5,341,586	$0	$10,000,000
Beginning Working Capital	$0	$534,321,917	$0	$642,628,991
Total Revenue	**$0**	**$714,663,503**	**$0**	**$841,628,991**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of Preschool and Early Learning (PEL) executed contracts	59	102	144
Number of PEL positions supported by Human Resources	39	49	64

Division: Preschool & Early Learning

Program Characteristics: One-Time-Only Request

Program Description

Preschool for All (PFA) is funded by a personal income tax on the highest earners who live or work in Multnomah County. About 8% of county tax payers pay the PFA tax. This revenue fluctuates annually and the program is still new, so it's important to plan for unpredictable or one-time expenses. The program goal is to secure reserve and contingency funds to help provide ongoing fiscal stability for the initiative.

Reserve and contingency funds support consistent services despite year-to-year revenue variability. They protect the program from unexpected revenue declines due to economic fluctuations and from unexpected costs. This allows PFA to be nimble and adaptive during the implementation stage. These fiscal stability approaches are informed by the best practices of government accounting and by Multnomah County's Financial and Budget Policies.

The reserve and contingency funds were established in FY 2022. Each year, funding is added to the reserve so that the total amount is 15% of anticipated PFA tax revenue for that fiscal year. The reserve fund helps ensure the long-term financial stability of the program. These funds will be used in future years if PFA tax revenue is lower than anticipated.

PFA 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 2027.

Equity Statement

By stabilizing Preschool for All (PFA) funding, this program protects services for families most impacted by economic shifts. Maintaining reserves ensures consistent access to preschool across income levels and communities. Fiscal resilience also supports smaller providers who rely on timely, predictable payments. These efforts strengthen equitable, countywide access to high-quality early learning.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Unappropriated & Contingency	$0	$43,750,000	$0	$47,250,000
Total GF/non-GF	**$0**	**$43,750,000**	**$0**	**$47,250,000**
Total Expenses:	**$43,750,000**		**$47,250,000**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Percent of reserve goal met	100%	100%	100%
Percent of contingency goal met	100%	100%	100%

Division: Preschool & Early Learning

Program Characteristics: One-Time-Only Request

Program Description

Over the full implementation of Preschool for All (PFA), revenues and expenses are aligned. However, there are individual years in which the program costs are higher than expected revenue. Revenue from the early years has been set aside as dedicated savings to fund preschool seats during future years.

PFA funds free preschool for 3- and 4-year-olds in Multnomah County The program was designed to grow over time. The number of children served each year increases until universal preschool is achieved by 2030. PFA continues to be on track to meet this goal.

Dedicated savings supports long-term stability and consistent service levels, allowing PFA to, one, create universal preschool in Multnomah County by 2030, and, two, offer enough seats for all interested families in the future.

Dedicated savings have been an important part of PFA's financial planning since the initiative began. In the early years of the program, there were fewer preschool seats and the costs were lower. Unspent revenue during these early years was put aside as dedicated savings. As PFA implementation progresses and the number of seats increases, expenditures will outpace annual revenue. Over time, the gap between revenues and expenses narrows and projected revenue catches up with anticipated expenses. A significant amount of dedicated savings will be spent in FY 2027.

Equity Statement

Dedicated savings ensure long-term stability so every family can count on Preschool for All (PFA) year after year. By setting aside early surpluses, the program safeguards future seats for all children in Multnomah County. This planning approach prevents funding gaps that could disproportionately impact families with less access to high-quality preschool. It supports the equitable, sustainable creation of universal preschool by 2030.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Unappropriated & Contingency	$0	$498,506,817	$0	$513,528,202
Total GF/non-GF	**$0**	**$498,506,817**	**$0**	**$513,528,202**
Total Expenses:	**$498,506,817**		**$513,528,202**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Financial projections updated based on most recent revenue and cost estimates	Yes	Yes	Yes
Based on projections, program is on track to cover future expenses	Yes	Yes	Yes

Division: Preschool & Early Learning

Program Characteristics:

Program Description

The Preschool for All (PFA) ballot measure named the Department of County Human Services as the program administrator. The Preschool & Early Learning (PEL) Division was established in 2021 to implement PFA.

This offer provides staffing and support for operations, program supervision, policy, communications, and evaluation in PEL.

PEL staff positions in this offer will: oversee budget development and contract monitoring; build partnerships to increase the capacity and quality of PFA; support the family application and enrollment process, and lead communication and evaluation activities. This program offer also funds outreach and evaluation strategies.

PEL organizes the PFA Advisory Committee, which was part of the 2020 PFA ballot measure and plan. The PFA Advisory Committee is a diverse group of community members from different geographic areas of the county. The committee provides guidance and feedback on PFA implementation.

Equity Statement

The Preschool & Early Learning (PEL) Division recruits, hires, and seeks to retain staff committed to early learning, especially ethnic and diverse staff with knowledge, skills, and abilities to build trust in the community to successfully implement Preschool for All (PFA) Goals.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$5,063,209	$0	$6,128,765
Contractual Services	$0	$1,452,810	$0	$797,810
Materials & Supplies	$0	$190,582	$0	$157,548
Internal Services	$0	$759,102	$0	$776,375
Total GF/non-GF	**$0**	**$7,465,703**	**$0**	**$7,860,498**
Total Expenses:	**$7,465,703**		**$7,860,498**	
Program FTE	0.00	29.00	0.00	34.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of Preschool for All Advisory Committee meetings convened	4	4	4
Number of email newsletters sent to providers, families, partners, and community members	17	20	21

Division: Preschool & Early Learning

Program Characteristics:

Program Description

Families and small preschool businesses need support to participate in Preschool for All (PFA). Many small preschool businesses struggle with the challenges of holding a government contract, and families often face barriers when trying to find a preschool seat for their child.

PFA is accessible for both families and for interested providers.

The Preschool & Early Learning (PEL) Division partners with an intermediary organization and family connector organizations. The intermediary organization partners with small preschools and offers business support and training. Family connector organizations leverage their cultural knowledge, community trust, and experience to guide families through the application and enrollment process. They provide assistance to families facing the greatest barriers to preschool.

Equity Statement

These investments advance equity by removing barriers that prevent families and small providers from accessing Preschool for All. They provide individualized support and offer services in multiple languages. Collectively, these initiatives expand access, strengthen small businesses, and promote equitable participation in high-quality early learning opportunities across Multnomah County.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$164,097	$0	$467,720
Contractual Services	$0	$1,631,074	$0	$1,602,662
Materials & Supplies	$0	$14	$0	$0
Internal Services	$0	$18,347	$0	$53,230
Total GF/non-GF	**$0**	**$1,813,532**	**$0**	**$2,123,612**
Total Expenses:	**$1,813,532**		**$2,123,612**	
Program FTE	0.00	1.00	0.00	3.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of outreach events coordinated or attended by family connector organizations to support family navigation and application	108	132	132
Number of small business trainings offered to Preschool for All providers by intermediary organizations	171	175	175

Division: Preschool & Early Learning

Program Characteristics:

Program Description

There are not enough high-quality early learning spaces in Multnomah County for universal preschool. Many child care providers struggle to find facilities that meet their needs. They also struggle to fund renovations, expansion, or construction. Banks are often unwilling to lend to child care providers due to low profits and lack of collateral, a challenge especially significant for ethnic and diverse providers who face systemic barriers to traditional financing.

Well-designed spaces enhance learning and child development. The Preschool for All (PFA) Facilities Fund, established in FY 2024, supports preschool providers to expand services, improve preschool quality, and increase available seats in Multnomah County.

The PFA Facilities Fund provides capital dollars and technical assistance to improve learning environments and expand preschool programs. Providers can apply for funds to renovate or preserve existing spaces, build new locations, or cover pre-development costs. Technical assistance includes support with design, regulatory processes, and project feasibility. These efforts help providers strengthen business stability and create more high-quality preschool seats In Multnomah County.

Equity Statement

The Preschool for All Facilities Fund advances equity by expanding access to safe, high-quality preschool spaces across the county. Strategic investments help providers of color overcome systemic barriers to financing and facility ownership. Technical assistance and capital funding strengthen small and culturally specific programs. These efforts ensure all children learn in environments that reflect and support their communities.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	$0	$166,280
Contractual Services	$0	$20,000,000	$0	$15,000,000
Internal Services	$0	$0	$0	$18,129
Total GF/non-GF	**$0**	**$20,000,000**	**$0**	**$15,184,409**
Total Expenses:	**$20,000,000**		**$15,184,409**	
Program FTE	0.00	0.00	0.00	1.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of Preschool for All seats that facilities fund investments expect to create	525	520	250
Total funding awarded to preschool providers	$13.8 million	$17.5 million	$13 million

Division: Preschool & Early Learning

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

Program Description

The Preschool for All (PFA) Facilities Fund provides capital dollars and technical assistance to improve learning environments and expand preschool programs. Providers can apply for funds to renovate or preserve existing spaces, build new locations, or cover pre-development costs. Technical assistance includes support with design, regulatory processes, and project feasibility. These efforts help providers strengthen business stability and create more high-quality preschool seats in Multnomah County.

Nearly all PFA facilities projects require a permit. According to a 2024 report for the Oregon Department of Land Conservation and Development, the average number of days it took the City of Portland to review a conditional use permit for child care facilities that applied between 2022 and 2024 was 221 days. Permitting processes can cause extensive delays for child care facility projects and may cause providers to miss PFA deadlines or incur significant additional costs.

The PFA City Permit Navigator funds a dedicated staff person at Portland Permitting & Development. This staff will serve as a single point of contact for all current and prospective PFA providers. They will help navigate code questions and ensure expedited permit processing. Their expertise with common requirements and approvals needed for a child care project, as well as relationships with City of Portland review departments, will expedite review at all stages. This will ensure that all three- and four-year olds in Multnomah County have access to safe and healthy learning environments.

Equity Statement

The PFA Facilities Fund advances equity by expanding access to safe, high-quality preschool spaces across the county. Strategic investments help providers of color overcome systemic barriers to financing and facility ownership. Technical assistance and capital funding strengthen small and culturally specific programs. These efforts ensure all children learn in environments that reflect and support their communities.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$0	$0	$287,000
Total GF/non-GF	**$0**	**$0**	**$0**	**$287,000**
Total Expenses:	**$0**		**$287,000**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of early childhood education facility permits processed that support Preschool for All projects	N/A	N/A	100
Percentage of preschool providers who were satisfied with the support they received from the Preschool for All City Permit Navigator	N/A	N/A	85%

Division: Preschool & Early Learning

Program Characteristics:

Program Description

The number of high-quality preschool seats must increase for Preschool for All (PFA) to serve all interested families by 2030. Early childhood education has been historically undervalued and under-resourced, leaving families without preschool options that meet their needs.

The goal of this program offer is to create and support high-quality preschool seats. This happens through individualized educator professional development and provider supports.

PFA utilizes relationship-based coaching. Coaches collaborate with preschools to strengthen program quality at the site. PFA invests in a variety of other program quality resources, including curriculum implementation support and the Environmental Rating Scale.

Capacity-building efforts are centered on strategies that accelerate preschool expansion. The Pathways Program supports prospective PFA providers with individualized coaching, peer networking, and financial incentives. The Community Preschool Expansion Program provides community-based organizations with the support, professional development, and group networking needed to build a preschool classroom.

Providers also receive support through nursing consultants and an educator substitute pool to ensure that they can offer inclusive and consistent preschool.

Equity Statement

This offer supports preschools to provide high-quality, culturally affirming experiences for children. Coaches reflect the cultural and linguistic diversity of teachers. This helps coaches individualize supports and better meet teacher needs. Capacity-building programs reduce barriers for small and emerging providers, creating more equitable access to professional growth and quality preschool programs countywide. Preschool for All nurses ensure that children’s health needs are addressed.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$174,690	$0	$192,048
Contractual Services	$0	$8,808,256	$0	$12,368,445
Materials & Supplies	$0	$14	$0	$0
Internal Services	$0	$18,790	$0	$19,091
Total GF/non-GF	**$0**	**$9,001,750**	**$0**	**$12,579,584**
Total Expenses:	**$9,001,750**		**$12,579,584**	
Program FTE	0.00	1.00	0.00	1.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of individuals receiving relationship-based professional development	502	400	475
Number of children receiving nursing supports from nursing team	N/A	250	585

Division: Preschool & Early Learning

Program Characteristics:

Program Description

The high cost of preschool creates a significant barrier for many families. To ensure all children in Multnomah County can benefit from free preschool, voters approved the Preschool for All (PFA) initiative in 2020. The Preschool & Early Learning (PEL) division is working toward universal preschool by 2030 by partnering with a diverse network of child care providers—including child care centers, Head Start programs, family child care homes, and school districts—to fund and expand the number of preschool seats.

The Preschool for All (PFA) program is continually expanding to establish a comprehensive, publicly funded preschool system across Multnomah County. For FY 2027, the program is projected to dramatically exceed its post-COVID seat goal of 4,500 seats

PEL contracts with qualified child care providers to offer preschool to children and families. All partnering sites are required to follow PFA policies, align with Oregon's Early Learning and Kindergarten Guidelines, and create inclusive environments for children with disabilities and developmental delays. PFA also collaborates with community organizations to strengthen program quality, expand access, and provide essential resources.

In FY 2027, providers will receive $18,228 per school-day/school-year seat and $26,004 for full-year/year-round seats. Providers also receive funding for start-up costs, transportation, and inclusion support.

Equity Statement

Preschool for All expands access to free preschools across Multnomah County. Sites include a mix of center-based, school, and family child care programs that are culturally and linguistically responsive to families' needs. Providers receive resources and coaching to create inclusive environments for children with developmental delays and disabilities, helping all families find the preschool setting that best supports their child.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$2,629,414	$0	$3,904,572
Contractual Services	$0	$98,552,896	$0	$200,083,242
Materials & Supplies	$0	$229	$0	$0
Internal Services	$0	$299,383	$0	$431,914
Total GF/non-GF	**$0**	**$101,481,922**	**$0**	**$204,419,728**
Total Expenses:	**$101,481,922**		**$204,419,728**	
Program FTE	0.00	17.00	0.00	24.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of Preschool for All seats	2,225	3,844	7,500
Number of Preschool for All locations	133	224	330

Division: Preschool & Early Learning

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

Program Description

Preschool for All (PFA) fosters inclusive environments and upholds a suspension and expulsion ban for children with developmental delays and disabilities. Intervention support for children is an increasing need in PFA classrooms. To address the need for whole-classroom well-being and individualized behavioral support, in partnership with the University of Oregon's Ballmer Institute, PEL is funding a 1.00 Limited Duration Assignment for a clinical supervisor to oversee behavioral health interns.

This partnership creates a vital learning pipeline for behavioral health interns, strengthening the early learning workforce beyond the classroom. By hosting these interns, PFA not only provides immediate behavioral support but also cultivates a skilled talent pool for specialized, non-teaching roles essential to a holistic preschool system. PEL remains committed to investing in these critical supporting positions, ensuring that our workforce development strategies successfully expand the pipeline of professionals prepared to meet the complex developmental and behavioral needs of our diverse preschool community.

Equity Statement

PFA expands access to free, culturally responsive preschool across Multnomah County. To ensure equitable outcomes, particularly for children facing behavioral challenges, PFA provides educators with essential resources and coaching. PEL's partnership with the Ballmer Institute offers clinical supervision and learning pathways for behavioral health interns, creating an intentional workforce development strategy that aligns academic training to build a sustainable pipeline of professionals.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	$0	$191,663
Internal Services	$0	$0	$0	$7,149
Total GF/non-GF	**$0**	**$0**	**$0**	**$198,812**
Total Expenses:	**$0**		**$198,812**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of classrooms receiving behavioral health consultation served by the Balmer Institute behavioral health interns	N/A	N/A	25
Percentage of preschool providers who were satisfied with the support they received from behavioral health interns	N/A	N/A	85%

Division: Preschool & Early Learning

Program Characteristics:

Program Description

Multnomah County faces a critical need for more qualified early childhood educators. These professionals are vital in supporting children's learning and development. However, early educators nationwide are undervalued and underpaid, which contributes to persistent staffing shortages in Multnomah County's early childhood programs. To build a robust system, Preschool for All (PFA) must prioritize strategic investment in growing, supporting, and maintaining this essential workforce.

PFA is committed to expanding the pool of qualified preschool teachers in Multnomah County while enhancing the professional development opportunities for its current educators.

Workforce development programs recruit new educators and provide foundational training. This happens in multiple ways, including career coaching, internships, technical education at high schools, and on-the-job training. Additional investments—such as educator recruitment, certifications, and scholarships—make higher education and training more accessible and affordable. These efforts help preschool staff meet PFA requirements and strengthen the overall quality and stability of the early educator workforce.

Equity Statement

Workforce development programs advance equity by creating accessible career pathways. Investments in programs that support ethnic and diverse educators help to build a representative, culturally responsive workforce. Scholarships and bilingual training reduce barriers to professional development. These efforts strengthen equity both within the workforce and in the classrooms where these educators serve.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$169,839	$0	$180,061
Contractual Services	$0	$7,000,000	$0	$7,048,367
Materials & Supplies	$0	$14	$0	$0
Internal Services	$0	$18,587	$0	$18,644
Total GF/non-GF	**$0**	**$7,188,440**	**$0**	**$7,247,072**
Total Expenses:	**$7,188,440**		**$7,247,072**	
Program FTE	0.00	1.00	0.00	1.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of early educators who are recruited and supported to enter and navigate the early learning field	348	325	325
Number of early educators receiving support for accessing higher education or community-based training	781	815	815

Division: Preschool & Early Learning

Program Characteristics:

Program Description

Universal preschool can inadvertently hurt the stability of infant and toddler care. The cost of providing care for this younger age group is higher than for 3- and 4-year-olds, as it requires a greater number of early educators. This financial pressure can result in a decrease in available infant and toddler seats.

The Infant Toddler Stabilization Fund is created to help stabilize infant and toddler care at participating Preschool for All (PFA) sites as the initiative continues to expand—a strategy included in the original PFA planning. PFA achieves this by supporting pay equity, which allows providers to increase the wages and benefits of infant and toddler educators. This funding encourages the participation of infant and toddler programs and increases the overall stability of child care in Multnomah County.

Infant Toddler Stabilization provides funding to increase the wages and benefits of infant and toddler educators. The allocated amount for each contracted PFA site is determined by the total number of infant and toddler seats at that site. Sites receiving this funding must also meet the established wage requirements for preschool teachers and comply with specific limitations on how the stabilization funds can be used.

Equity Statement

Infant Toddler Stabilization Funds increase compensation for educators who care for infants and toddlers. This funding helps close wage gaps between early educators and supports consistent, high-quality care. By improving teacher pay and retention, the program ensures families have access to reliable infant and toddler care. These efforts create a more equitable and stable early learning system for children from birth through preschool.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$14,434,444	$0	$20,070,620
Total GF/non-GF	**$0**	**$14,434,444**	**$0**	**$20,070,620**
Total Expenses:	**$14,434,444**		**$20,070,620**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Total number of Preschool for All locations that benefit from stabilization funding	74	145	195
Total number of infant/toddler educators benefiting from stabilization funding	251	525	550

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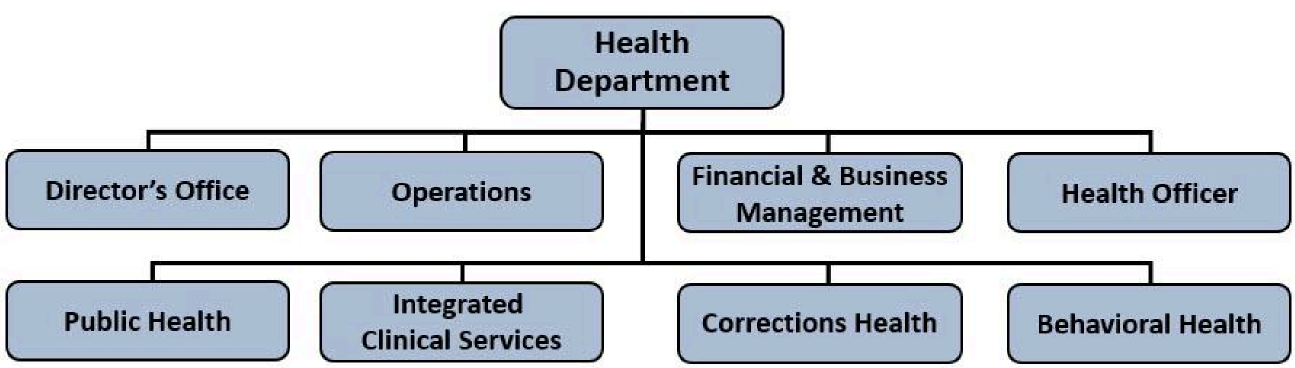
Department Overview

The Multnomah County Health Department (HD) is the only health entity that is responsible for the health of everyone who lives in and visits Multnomah County at every stage in their lives. It is the largest health department and safety net provider in Oregon. It serves as both the largest Local Public Health Authority (LPHA) and Local Mental Health Authority (LMHA)'s Community Mental Health Program (CMHP). The department also operates the largest Federally Qualified Health Center (FQHC) in the state. The Department is the statutory health provider for people in County jails and is responsible for ensuring the operation of Emergency Medical Services throughout the County.

The Department provides direct and population-level health services, such as:

- Reducing preventable deaths, including those caused by drug overdose, suicide, and chronic diseases
- Investigating outbreaks and stopping the spread of diseases
- Providing primary care, dental care, integrated behavioral health care, wrap-around, and pharmacy services
- Inspecting restaurants, food carts, and other licensed facilities
- Helping babies and families thrive
- Ensuring clean air and water, and promoting healthy neighborhoods
- Ensuring behavioral health crisis services and helping people find treatment for substance use
- Collecting, studying, and reporting health data to track and improve health across the lifespan

We focus on reducing preventable deaths, ending unjust inequities, and improving health for more than 800,000 people in the County. Reducing preventable deaths is where we can have the most impact and where the most egregious health inequities lie. The Health Department recognizes colonialism and racism, and their systemic effects, are the root cause of health inequities and race-based differences in health outcomes. We remain actively committed to ending these unfair, inequitable, and preventable differences.



Health Department

FY 2027 Adopted Budget

$506.8 million

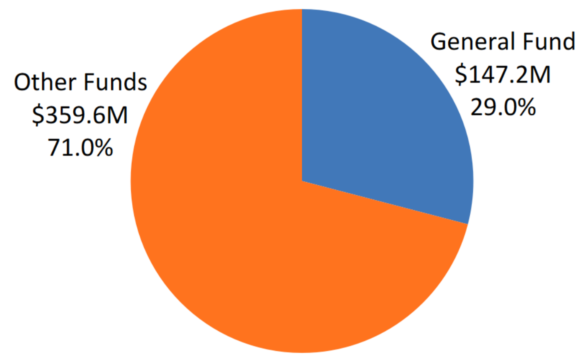
Total Adopted Operating Budget

Excludes $89.5 million in cash transfers, contingencies, and unappropriated balances

1,566.90 FTE

Total Adopted Staffing

(84.09) FTE
Decrease from
FY 2026 Adopted



($24.6) million

All Funds (Operating) Decrease from
FY 2026 Adopted

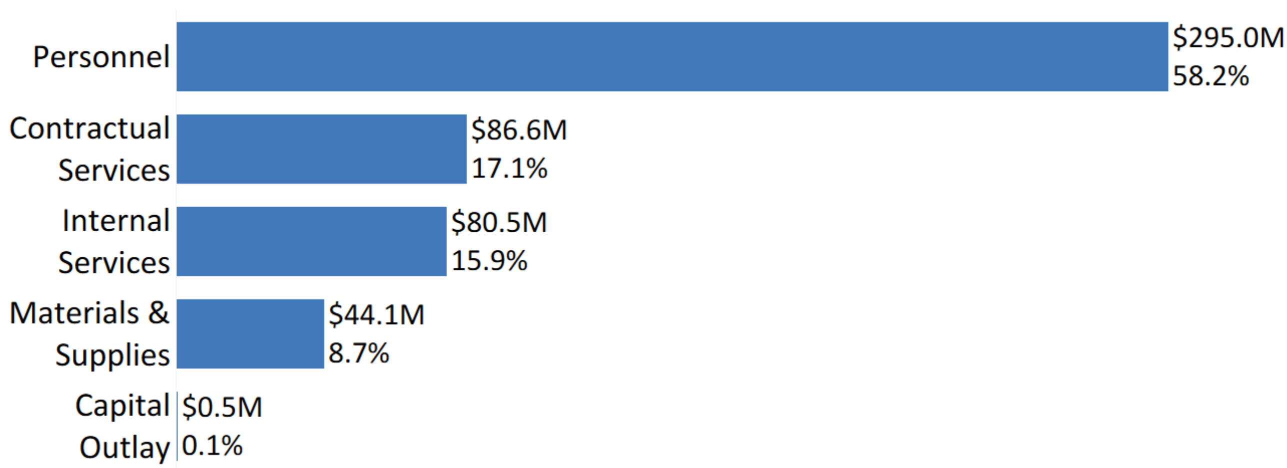
(4.6%) decrease

General Fund

$1.8 million
Backfill
and
$1.2 million
One-Time-Only Investments

Operating Budget by Category - $506.8 million

Does not include cash transfers, contingencies, and unappropriated balances



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, and foster belonging.

Diversity, Equity, and Inclusion

Equity is at the forefront of the Health Department's mission and is the foundation of our vision. Our values also speak to how we engage with our diverse communities and with one another. They set the intention for our organizational culture. The Health Department uses many strategies and provides many services including:

Meeting people where they are, geographically and linguistically – We offer services in locations across the County and in languages people understand. For example, the Community Health Center/Integrated Clinical Services Division operates nine Student Health Centers located in schools throughout the County. Services are available at no cost to any young person aged 5-18, regardless of where they go to school or if they have insurance. Staff across the Department have specialized language skills and cultural knowledge that improve our ability to effectively reach diverse populations. Staff often serve as trusted messengers in their communities.

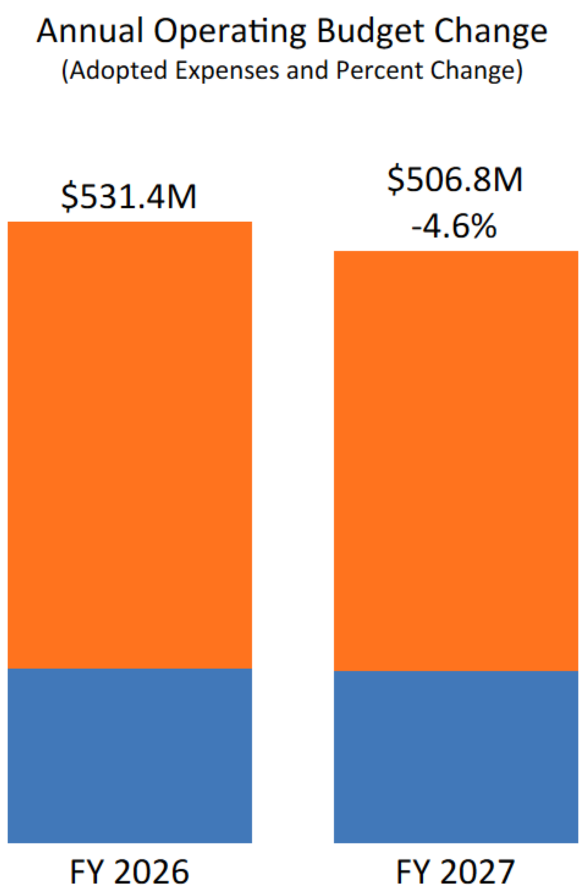
Serving the most vulnerable – We serve people across many program areas regardless of their ability to pay. One example is the Corrections Health Division, which provides medical, dental and behavioral health services to more than 17,300 adults and youth in custody annually. A disproportionate number of people in custody come from communities of color. This underscores the need for an equity-focused approach to delivering care. The Behavioral Health Division makes sure supports are available to people who are under- or uninsured. It also acts as a primary pillar of the local behavioral health crisis response system. It runs the Behavioral Health Call Center, partners to provide urgent walk-in care and provides mobile crisis intervention and support to communities, including culturally and linguistically specific communities.

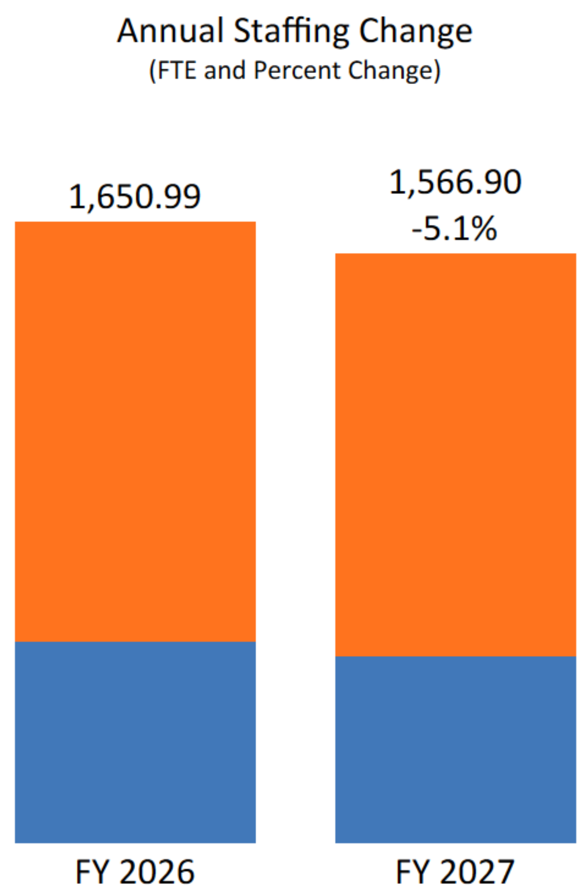
Building community partnerships – Teams work to center the needs of the community through strategic partnerships. For example, the Office of Health Equity partners with culturally specific communities, many of which experience disproportionately negative health outcomes from historic and ongoing structural and systemic inequities. Also, the Office of Consumer Engagement – a team of people with lived experience of substance use disorder – partners with peer outreach specialists to provide direct outreach and support to community members facing the intersections of substance use, homelessness and/or mental health issues. They also advocate for policy level changes to improve support for people at these intersections.

Basing decisions on data and science – The Health Department uses data and science to build equity into budget and programming decisions. We address the leading causes of premature and preventable death based on scientific data and information provided by the community. We use culturally-specific and evidence-based interventions and programming that focus on supporting communities that are most impacted by health inequities and negative health outcomes.

Budget Overview

The FY 2027 Health Department operating budget is $506.8 million, a $24.6 million (-4.6%) decrease from the FY 2026 Adopted budget. These amounts exclude cash transfers, contingencies, and unappropriated balances. The General Fund accounts for 29.0% of the budget, and General Fund expenses decreased by $2.0 million (-1.4%). Other Funds decreased by $22.6 million (-5.9%).





A full list of General Fund additions, reductions, and reallocations can be found on the following pages and are also described in the divisions' significant changes sections. The decrease in Other Funds is largely due to the following changes in Behavioral Health:

- Reduction of $8.6 million resulting from a nonrenewal notice from CareOregon in the fall of 2025 (About half was implemented in mid-FY 2026, the other half was backfilled with one-time-only funding in FY 2026 and fully realized in FY 2027).
- Reduction of $10.4 million in Supportive Housing Services (SHS) funding. Of this amount, $6.9 million came from the end of one-time-only capital funds for a Substance Use Disorder Stabilization project.

- Reduction of $1.8 million of Preschool for All Funding. This Preschool for All Early Childhood Mental Health program that was previously in the Health Department is shifting back to the Department of County Human Services who will use a different model for services.

There were also significant changes to the County Financial Assistance Agreement (CFAA) that changed how some behavioral health programs are funded. Now, the CFAA funds must first be used to help specific groups of people the state has determined are top priorities. This has resulted in some programs receiving more CFAA funding than previously, freeing up General Fund. This General Fund was then used to backfill some programs where CFAA is no longer eligible.

The Behavioral Health division also reallocated $2.0 million from contracts that had consistent underspending to help provide other Health Department services. See the reallocation table below for more details.

In Public Health, the Tobacco Retail Licensing (40006) and Health Inspections & Education (40007) programs are both increasing their fees in order to support full cost recovery for the programs. See the Public Health section for more details.

In Integrated Clinical Services, the estimated revenues were decreased in FY 2027 based on anticipated impacts from Federal House Resolution 1 (H.R.1) that cuts Medicaid spending. See the Integrated Clinical Services section for more details.

In Corrections Health, there have been significant reallocations to fund rising costs for pharmaceutical costs and medical needs. This has resulted in the Transition Services Program (40047) being partially reduced, even after an additional investment of $677,023. See reallocation table below and the Corrections Health section for more details.

The following tables show the new or expanded ongoing and one-time-only programs, as well as reductions and backfill. These tables, along with information on the Health Department reallocations, 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 One-Time-Only Programs

Prog. #	Program Offer Name	General Fund Additions Ongoing	General Fund Additions OTO	Total Additions	FTE Addition
40004B	Ambulance Service Plan Continuation	0	362,000	362,000	0.00
40096B	Safe School Zones Policy Enforcement	0	159,800	159,800	0.70
The programs below received one-time-only funding that offset reductions.					
40080A	Community Based Mental Health Services for Children & Families	0	490,329	490,329	2.90
40080B	Gun Violence Response Program	0	164,689	164,689	1.00
40084	Culturally Specific Mental Health Services	0	10,000	10,000	0.00
Total	**Health Department Additions**	**0**	**1,186,818**	**1,186,818**	**4.60**

Backfill

Prog. #	Program Offer Name	GF Backfill Ongoing	GF Backfill OTO	Total Backfill	FTE Backfill
40047*	Corrections Health Transition Services	677,023	0	677,023	5.00
40080B	Gun Violence Response Program	541,320	0	541,320	3.00
40082	School Based Mental Health Services	417,808	0	417,808	2.84
40088B	Mental Health Court	173,000	0	173,000	1.00
Total	**Health Department Backfill**	**1,809,151**	**0**	**1,809,151**	**11.84**

*This partially backfills a reallocation made by the Health Department.

General Fund Reductions

This table reflects $6.2 million of reductions taken due to Countywide budget reductions.

Prog. #	Program Offer Name or Reduction Description	General Fund Reductions	Total Reductions	FTE Reduction
40000A	Health Department Director's Office	(526,284)	(526,284)	(2.79)
40018	Women Infants & Children (WIC)	(432,353)	(432,353)	(3.60)
40039	Human Resources	(241,104)	(241,104)	(1.00)
40040	Financial and Business Management Services	(588,086)	(588,086)	(3.00)
40042	Contracts & Procurement	(168,950)	(168,950)	(1.00)
40059	Corrections Health Behavioral Health Services	(874,458)	(874,458)	(3.40)
40061	Harm Reduction	(1,140,704)	(1,140,704)	(5.80)
40065	Behavioral Health Division Administration	(173,000)	(173,000)	0.00
40069	Behavioral Health Crisis Services	(77,621)	(77,621)	0.00
40084A	Culturally Specific Mental Health Services	(95,393)	(95,393)	0.00
40084B*	Culturally Specific Mobile Outreach and Stabilization Treatment Program	(744,607)	(744,607)	0.00
40089	Addictions Detoxification & Post Detoxification Housing	(24,210)	(24,210)	0.00
40099	Early Childhood Mental Health Program	(469,878)	(469,878)	(2.00)
40104	Deflection and Sobering Program	(323,496)	(323,496)	0.00
40105A/B	Behavioral Health Resource Center	(323,494)	(323,494)	0.00
Total	**Health Department Reductions**	**(6,203,638)**	**(6,203,638)**	**(22.59)**

*Program Eliminated

The table below reflects $3.2 million of reductions the Health Department made in their requested budget due to a reduction in the loss of indirect revenue.

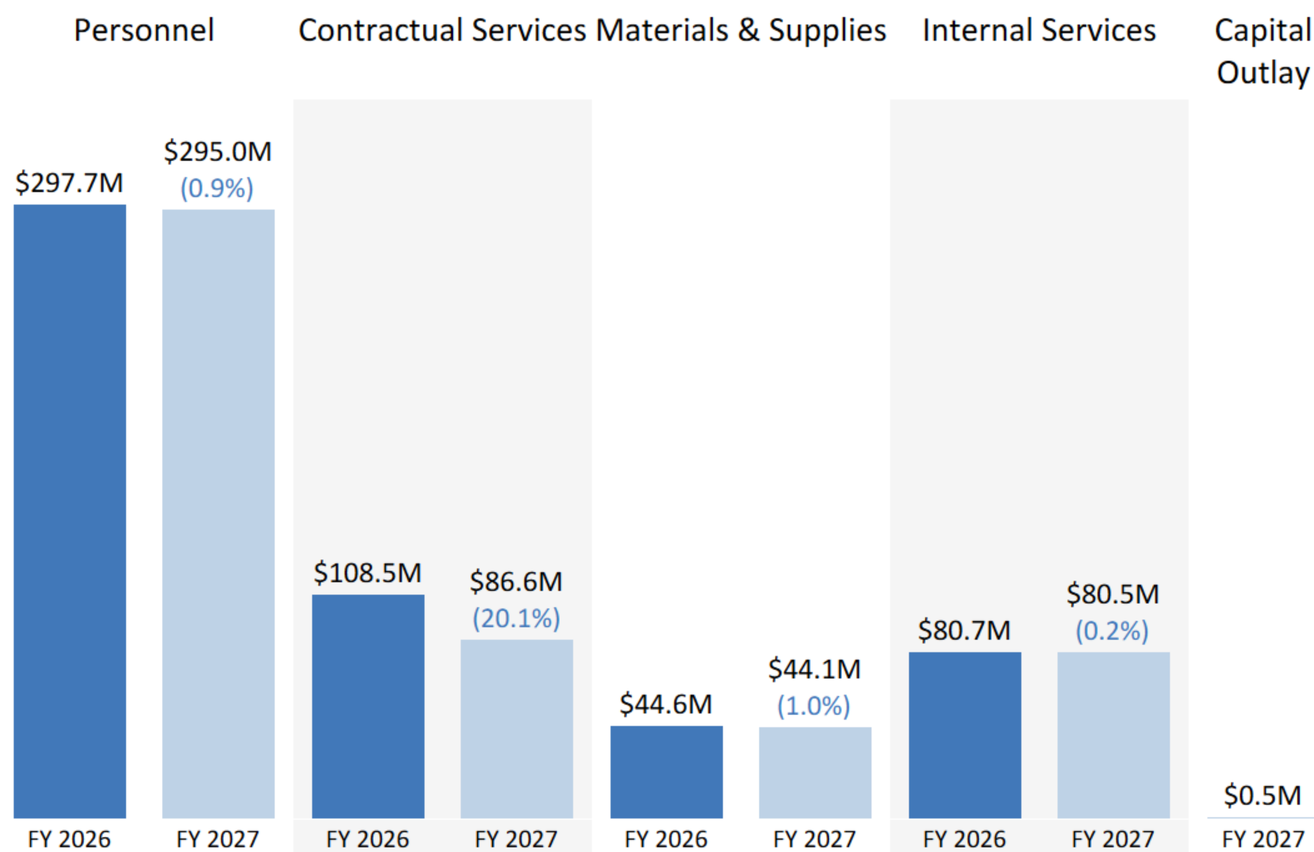
Division	General Fund Indirect Reductions	FTE Reductions
Director's Office	(462,148)	(2.00)
Financial and Business Management	(319,452)	(1.00)
Operations	(432,273)	(2.00)
Behavioral Health	(1,239,430)	0.00
Public Health	(772,258)	(4.30)
Total	**(3,225,561)**	**(9.30)**

General Fund Reallocations

Prog. #	Program Offer Name or Description	General Fund Reallocated	FTE Reallocated
Made these reductions			
40040	Financial and Business Management Services (supplies)	(136,870)	0.00
To fund these programs			
40040	Financial and Business Management Services (Finance Shared Services - Travel & Training)	136,870	1.00
Made these reductions			
Various	Behavioral Health Contract Underspend Reallocation	(1,651,000)	0.00
To fund these programs			
40000B	Overdose Prevention and Response	612,614	1.00
40052	Medical Examiner	267,590	0.00
40105A	Behavioral Health Resource Center	451,000	0.00
Made these reductions			
40010A	Communicable Disease Prevention and Control	(330,770)	(2.00)
40000A	Director's Office	(361,539)	(2.00)

Prog. #	Program Offer Name or Description	General Fund Reallocated	FTE Reallocated
To fund these programs			
40046	Health Operations Administration	166,766	1.00
40096	Public Health Office of the Director	250,000	0.00
40039	Human Resources	262,715	2.00
Made these reductions			
40051	Corrections Health Inverness Jail (MCIJ) Clinical Services	(401,494)	(2.30)
40050	Corrections Health Multnomah County Detention Center (MCDC) Clinical Services	(109,259)	(1.20)
40049	Corrections Health Juvenile Clinical Services	(120,035)	(0.60)
40045	Corrections Health Operations	(780,645)	(4.46)
40047	Corrections Health Transition Services	(1,495,077)	(10.00)
40040	Financial and Business Management Services	(288,662)	(1.00)
Various	Behavioral Health Contract Underspend Reallocation	(300,000)	0.00
To fund these programs			
Various	Various Corrections Health Program Offers - Premium	1,060,021	0.00
Various	Various Corrections Health Program Offers - Professional Services	2,435,151	0.00
Total	**Health Reallocations**	**(332,624)**	**(18.56)**

The chart below provides a breakdown of the budget's expense categories from FY 2026 to FY 2027. The majority of the reductions in the Health Department were in the Contractual Services category.



The Budget Trends table below details the changes in expense categories from FY 2025 Actual to FY 2027 Adopted.

Category	FY 2025 Actual	FY 2026 Current Estimate	FY 2026 Adopted Budget	FY 2027 Adopted Budget	Difference
Personnel Services	266,739,347	279,259,354	297,716,844	295,032,912	(2,683,932)
Contractual Services	110,593,846	104,075,822	108,501,346	86,643,662	(21,857,684)
Materials & Supplies	46,120,382	73,132,883	44,550,525	44,105,539	(444,986)
Internal Services	81,346,540	45,944,495	80,671,464	80,502,055	(169,409)
Capital Outlay	141,819	0	0	520,000	520,000
Total Operating Budget	**504,941,934**	**502,412,554**	**531,440,179**	**506,804,168**	**(24,636,011)**
Contingency (All Funds)*	N/A	N/A	16,714,328	12,618,544	(4,095,784)
Internal Cash Transfers	12,132,343	13,399,156	13,400,000	0	(13,400,000)
Unappropriated (Reserves)*	N/A	N/A	64,081,549	76,880,633	12,799,084
Total Budget	**517,074,277**	**515,811,710**	**625,636,056**	**596,303,345**	**(29,332,711)**
FTE	**1,706.31**	**1,640.31**	**1,650.99**	**1,566.90**	**(84.09)**

* In any given fiscal year, there is no spending of unappropriated balance; if contingency is spent, it will be reflected in the Operating expenditures.

Total Budget by Division

Division Name	General Fund	Other Funds	Total Division Cost	Total FTE
HD Director's Office	9,811,186	1,719,826	11,531,012	37.50
Operations	10,237,171	218,967	10,456,138	37.88
Financial And Business Management	13,929,372	1,500,000	15,429,372	51.50
Health Officer	8,213,332	2,248,998	10,462,330	36.88
Public Health	35,455,010	35,897,729	71,352,739	250.24
Integrated Clinical Services		308,822,469	308,822,469	727.72
Corrections Health	37,524,770	234,684	37,759,454	129.35
Behavioral Health	32,040,406	98,449,425	130,489,831	295.83
Total Health Department	**147,211,247**	**449,092,098**	**596,303,345**	**1,566.90**

Includes cash transfers, contingencies, and unappropriated balances.

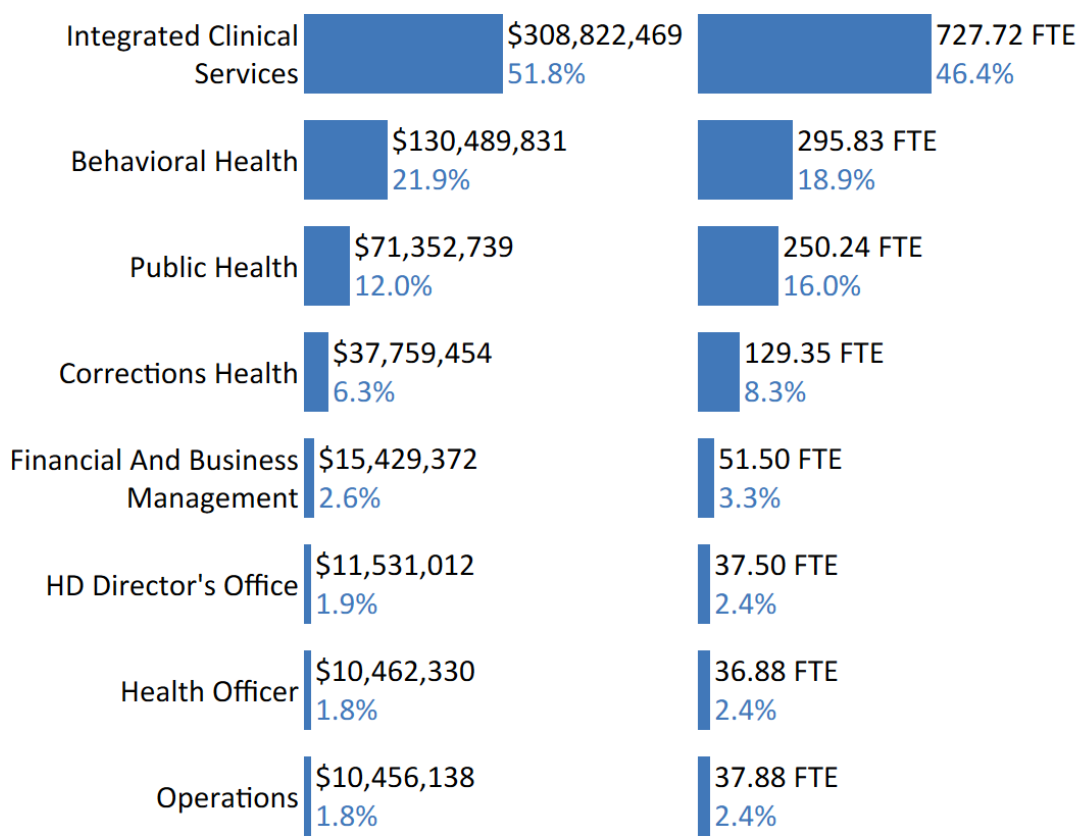


Table of All Program Offers

The following table shows the programs by division that make up the department's total budget, including cash transfers, contingencies, and unappropriated balances. The individual programs follow, grouped by division.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
Health Department Director's Office						
40000A	Health Department Director's Office		7,807,442	1,719,826	9,527,268	30.80
40000B	Overdose Prevention & Response		1,373,164	0	1,373,164	4.00
40000C	Behavioral Health CLP+ & System Transformation		630,580	0	630,580	2.70
	Total Director's Office		**9,811,186**	**1,719,826**	**11,531,012**	**37.50**
Health Operations						
40039	Human Resources		5,593,016	218,967	5,811,983	26.88
40044	Data Governance & Quality		2,782,154	0	2,782,154	2.00
40046	Health Operations Administration		1,862,001	0	1,862,001	9.00
	Total Health Operations		**10,237,171**	**218,967**	**10,456,138**	**37.88**
Financial and Business Management						
40040	Financial and Business Management Services		9,447,974	1,500,000	10,947,974	29.50
40041	Medical Accounts Receivable		2,303,341	0	2,303,341	12.00
40042	Contracts & Procurement		2,178,057	0	2,178,057	10.00
	Total Financial and Business Management		**13,929,372**	**1,500,000**	**15,429,372**	**51.50**
Health Officer						
40002	Tri-County Health Officer		855,945	469,658	1,325,603	2.03
40004A	Ambulance Services (Emergency Medical Services)		3,110,190	1,486,873	4,597,063	14.75

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
40004B	Ambulance Service Plan Continuation	X	362,000	0	362,000	0.00
40005	Public Health & Regional Health Systems Emergency Preparedness		22,213	292,467	314,680	1.10
40052	Medical Examiner		3,862,984	0	3,862,984	19.00
	Total Health Officer		**8,213,332**	**2,248,998**	**10,462,330**	**36.88**
Public Health						
40006	Tobacco Retail Licensing		1,086,704	510,612	1,597,316	6.95
40007	Health Inspections and Education		8,234,578	39,891	8,274,469	38.35
40008	Vector-Borne Disease Prevention and Code Enforcement		2,186,846	0	2,186,846	8.75
40009	Vital Records		82,212	852,564	934,776	3.85
40010A	Communicable Disease Prevention and Control		1,913,478	2,840,544	4,754,022	17.22
40010B	STI Clinical and Community Services		2,076,800	2,499,970	4,576,770	18.19
40011	Services for Persons Living with HIV - Regional Education and Outreach		141,700	6,200,222	6,341,922	5.85
40018	Women, Infants, and Children (WIC)		4,007,917	4,396,797	8,404,714	44.30
40037	Environmental Health Community Programs		1,003,150	1,621,324	2,624,474	8.70
40048	Epidemiology, Evaluation, and Policy Research		1,878,259	1,712,093	3,590,352	12.31
40053	Prevention and Health Promotion		2,694,456	1,838,968	4,533,424	15.90
40061	Harm Reduction		2,264,723	1,522,331	3,787,054	10.91
40096A	Public Health Office of the Director		3,484,273	3,910,576	7,394,849	26.51

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
40096B	Safe School Zones Policy Enforcement	X	159,800	0	159,800	0.70
40097A	Parent, Child, and Family Health Management		4,240,114	7,704,825	11,944,939	30.55
40097B	Home and Community-Based Consulting		0	247,012	247,012	1.20
	Total Public Health		**35,455,010**	**35,897,729**	**71,352,739**	**250.24**
Integrated Clinical Services						
40012	FQHC-HIV Clinical Services		0	10,018,216	10,018,216	38.40
40016	FQHC-Medicaid/Medicare Eligibility		0	3,289,900	3,289,900	18.00
40017	FQHC-Dental Services		0	33,132,918	33,132,918	129.64
40019	FQHC-North Portland Health Clinic		0	8,066,212	8,066,212	28.40
40020	FQHC-Northeast Health Clinic		0	9,283,398	9,283,398	31.55
40022	FQHC-Mid County Health Clinic		0	17,214,721	17,214,721	58.90
40023	FQHC-East County Health Clinic		0	15,431,093	15,431,093	49.90
40024	FQHC-Student Health Centers		0	9,857,645	9,857,645	36.35
40026	FQHC-Fernhill Health Center		0	4,922,747	4,922,747	17.68
40027	FQHC-Southeast Health Clinic		0	8,418,271	8,418,271	30.70
40029	FQHC-Rockwood Community Health Clinic		0	8,767,833	8,767,833	31.00
40030	FQHC-Medical Director		0	1,870,756	1,870,756	2.80
40031	FQHC-Pharmacy		0	41,387,927	41,387,927	54.50
40032	FQHC-Lab and Medical Records		0	5,094,927	5,094,927	22.80
40033	FQHC-Primary Care and Dental Access and Referral		0	10,474,589	10,474,589	59.80
40034A	FQHC-Administration and Operations		0	12,696,173	12,696,173	45.40
40034B	FQHC - Contingency and Reserves		0	89,499,177	89,499,177	0.00

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
40036	FQHC-Community Health Council and Civic Governance		0	462,029	462,029	1.00
40102	FQHC Allied Health		0	9,153,028	9,153,028	42.45
40103	FQHC-Quality Assurance		0	9,780,909	9,780,909	28.45
	Total Integrated Clinical Services		**0**	**308,822,469**	**308,822,469**	**727.72**
Corrections Health						
40043	Corrections Health Dental		774,395	0	774,395	2.00
40045	Corrections Health Operations		4,368,632	0	4,368,632	13.50
40047	Corrections Health Transition Services		2,018,477	234,684	2,253,161	13.05
40049	Corrections Health Juvenile Clinical Services		1,957,392	0	1,957,392	6.20
40050	Corrections Health Multnomah County Detention Center (MCDC) Clinical Services		13,857,176	0	13,857,176	44.00
40051	Corrections Health Inverness Jail (MCIJ) Clinical Services		10,485,215	0	10,485,215	32.90
40059	Corrections Health Behavioral Health Services		4,063,483	0	4,063,483	17.70
	Total Corrections Health		**37,524,770**	**234,684**	**37,759,454**	**129.35**
Behavioral Health						
40065	Behavioral Health Division Administration		1,390,706	1,642,195	3,032,901	10.80
40067	Medical Records for Behavioral Health Division		162,451	696,976	859,427	4.75
40068	Behavioral Health Quality Management		1,096,242	3,988,715	5,084,957	20.98
40069	Behavioral Health Crisis Services		2,835,897	17,018,918	19,854,815	38.35

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
40071	Behavioral Health Division Adult Protective Services		326,863	1,334,932	1,661,795	7.40
40072	Mental Health Commitment Services		0	6,700,265	6,700,265	32.50
40074A	Mental Health Residential Services		1,407,865	9,222,357	10,630,222	9.80
40074B	Bridgeview Mental Health Residential Services		642,256	275,000	917,256	0.00
40075	Choice Model		173,614	5,326,424	5,500,038	13.88
40077	Mental Health Treatment & Medication for the Uninsured		197,933	0	197,933	0.00
40078	Early Assessment & Support Alliance		649,456	2,497,506	3,146,962	12.98
40080A	Community Based Mental Health Services for Children & Families		632,837	399,132	1,031,969	3.77
40080B	Gun Violence Response Program		706,009	0	706,009	4.00
40081	Multnomah County Care Coordination		0	10,496,455	10,496,455	33.12
40082	School Based Mental Health Services		3,721,080	1,256,807	4,977,887	22.82
40083	Behavioral Health Promotion, Suicide Prevention and Postvention Services		226,941	547,794	774,735	3.56
40084	Culturally Specific Mental Health Services		1,618,136	0	1,618,136	0.00
40085	Adult Addictions Treatment Continuum		2,164,125	10,289,423	12,453,548	6.60
40086	Addiction Services Gambling Treatment & Prevention		0	638,360	638,360	2.54
40087	Addiction Services Alcohol & Drug Prevention		0	1,461,174	1,461,174	2.09

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
40088A	Coordinated Diversion for Justice Involved Individuals		250,360	6,943,241	7,193,601	27.50
40088B	Mental Health Court		173,000	343,023	516,023	3.00
40089	Addictions Detoxification & Post Detoxification Housing		1,041,829	1,114,773	2,156,602	1.50
40099	Early Childhood Mental Health Program		2,290,310	285,724	2,576,034	11.99
40101	Promoting Access To Hope (PATH) Care Coordination Continuum		829,041	594,878	1,423,919	6.90
40104	Deflection and Sobering Program		467,783	5,150,000	5,617,783	10.00
40105A	Behavioral Health Resource Center (BHRC) - Day Center		5,366,693	314,988	5,681,681	2.00
40105B	Behavioral Health Resource Center (BHRC) - Shelter/Housing		1,872,170	1,726,045	3,598,215	0.00
40108	Stabilization and Integration Housing Services		1,745,797	0	1,745,797	1.00
40112	Shelter, Housing and Supports		51,012	8,184,320	8,235,332	2.00
	Total Behavioral Health		**32,040,406**	**98,449,425**	**130,489,831**	**295.83**
	Total Health Department		**147,211,247**	**449,092,098**	**596,303,345**	**1,566.90**

Director’s Office

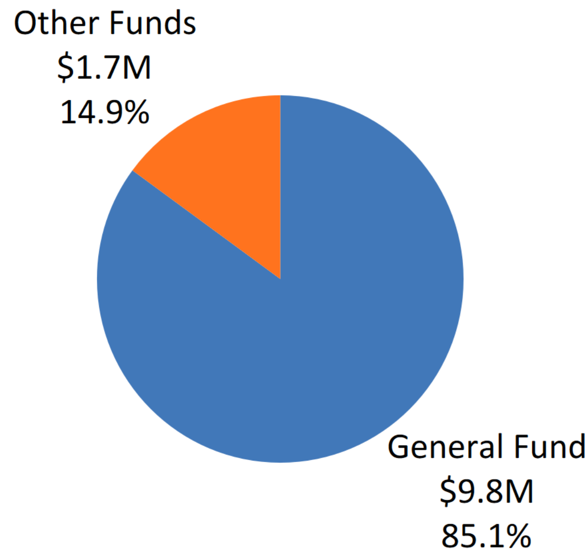
$11.5 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

37.50 FTE

(full time equivalent)



The Director’s Office provides executive leadership committed to equity and serving the community. The Director is the Local Public Health Administrator (LPHA) and supports the Board as the Local Mental Health Authority (LMHA), ensuring that the department performs its unique governmental roles, achieves legal requirements, and reduces preventable deaths while increasing equitable health outcomes. Director’s Office teams include:

The **Director’s Executive Leadership Team** implements department-wide initiatives and legal mandates. It convenes divisional leadership to provide strategic direction, solve shared problems, and ensure organizational alignment.

The **Office of Health Equity (OHE)** leads the racial justice and equity based efforts, serving as a departmental strategic hub. The team aligns action-oriented, equity-focused strategic plans and investments with the Department’s mission, vision, and values to achieve positive population level health outcomes. The OHE guides division-level culturally specific and cross-cultural community engagement and partnership strategies by cultivating community-centered networks and providing critical language and liaison support in emergencies. These strategies focus on community health priorities that address social, structural, and institutional root causes of health inequities. The strategies seek to improve health outcomes across multiple demographics on the continuums of both physical and behavioral health. The OHE team also supports internal capacity building and equity literacy through popular education, cultural competence and awareness, and implementation of the County’s Workforce Equity Strategic Plan (WESP).

The **Communications and Marketing team** develops health communications and behavior change strategies that focus on protecting health at a community level. They also develop campaigns to promote essential health services and disseminate timely, accurate, trustworthy information to our diverse communities. Team members collaborate with County and regional partners and serve as Public Information Officers during an emergency. Health communications is a unique governmental capability that fulfills state legal requirements for public health. Specialized communications are key to achieving positive health outcomes and protecting communities from health harms.

The **Strategy and Grant Development team** develops department-wide funding strategies and secures resources to launch new initiatives and maintain long-standing programs, including legally required programs and workforce strategies. The team uses equity-based, data-driven program development focused on preventing unnecessary deaths and ensuring wellness for all.

The HD Director's Office coordinates department-wide initiatives to support core priorities that include:

- **Overdose Prevention & Response** - The Health Department's Overdose Prevention and Response Plan was developed in FY 2024 to address a rise in overdose deaths, a leading cause of preventable deaths in the County. It will be updated for FY 2027 to integrate new activities with ongoing ones. County General Fund supports prevention work focused on youth and families, naloxone distribution, and harm reduction technical assistance to coordinate strategies across homeless, behavioral health, and addictions systems.
- **Behavioral Health Data Analytics and System Transformation** - The Director's Office supports the Behavioral Health Division as the Community Mental Health Program (CMHP), ensuring the Health Department fulfills its legal role and advances equity. A core CMHP responsibility is developing a Comprehensive Local Plan (CLP) to assess needs and deliver services. It is a plan that has evolved from a compliance-based plan to a systems-focused approach that maps a population-level strategy for behavioral health. This framework strengthens data, accountability, access, and workforce capacity to connect clients with the right care at the right time. It replaces fragmented efforts with coordinated partnerships. Current projects include the School-Based Mental Health evaluation and future efforts will target high-acuity behavioral health needs at the intersections of homelessness, mental health, and substance use.

The Director's Office has responsibility for assuring Health Department services and activities align with the County's Strategic Plan and is involved in the ongoing development of the plan. Each division holds responsibility for their work outlined in the outcomes and indicators in the plan. The Director's Office coordinates across divisions to make sure the Department is meeting the appropriate measures.

Significant Division Changes

The Director's Office will reduce project management capacity (1.00 FTE Project Manager, Represented), Community Health Worker (CHW) training capacity (1.79 FTE Program Specialist and Program Specialist Senior), and communications capacity (2.00 FTE Program Communications Coordinators). In addition, the office eliminated 1.00 FTE Manager 2.

There is also a $177,000 reduction in the supplies budget for Community Partnerships and Capacity Building, which includes community health worker training costs. This reduces capacity for community engagement, events, Community Health Worker training, and professional development. There is a new $150,000 investment for contracted services for additional epidemiological services for Behavioral Health.

Additionally, $1.6 million and 6.00 FTE from the Public Health Infrastructure Grant have been moved to the Public Health Division as a departmental reallocation.

Overdose Prevention & Response added 1.00 FTE to expand community-based technical assistance and increased the budget for lifesaving naloxone supplies.

Director’s Office Outcomes

1. The Health Department is a trusted and reliable source of information about services and health emergencies, as well as general health guidance, disseminated in a manner that is timely, accurate, culturally responsive, and delivered via diverse languages.

Key Performance Indicator (KPI) 1.1: Average monthly traffic, engagement rate, and total impressions on Health Department digital platforms.

KPI 1.1 Description: While there isn't a "one-size-fits-all" standard (due to varying population sizes, geography and needs), in the government sector, an engagement rate of 1% - 3% is generally considered successful, though this varies by platform (e.g., Instagram usually sees higher engagement than X). In addition to the general public, social media can often reach specific populations with messaging including vulnerable and marginalized groups, youth and young adults, community partners, and Health Department patients and clients.

The goal is to identify long term trends in large data sets (core population health work) and go from "How many people saw this?" (views) to "How many people changed their behavior because they saw this?" (behavior change data). This requires a long-term programmatic level of data collection and evaluation of social media analytics. In general, social media analytics are a pretty good measure of community trust, engagement, and reliability, especially if you look at deeper engagement metrics (i.e., shares, comments, links clicked, registrations, etc.). In general, it does tell us accurately how many people saw the health information and alerts we provided and can also ensure we are being responsive to community concerns.

FY 2026 Estimate: 1.3 million total impressions across all social media platforms.	**FY 2027 Target:** 1 million total impressions across all social media platforms. This reduced target for FY 2027 reflects a continued decrease in programmatic marketing budgets and fewer opportunities for paid ads which boost impressions.

KPI 1.1 Equity Considerations: Social media analytics can be broken down by gender, age and device type. If we place ads, we can focus on particular populations and interests, e.g., parents with children or Spanish speakers, or gardening. Meta no longer provides race or income data.

Outcome 1 Program Offers

The following program offers contribute to Outcome 1. Division-specific administrative program offers are not included, as they support all outcome statements:

- 40000A - Health Department's Director's Office

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2. Crisis and risk communications during an emergency are population wide and focused on those most impacted by the emergency or public health crisis.

Making sure that life-saving information is available to all community members, in particular those facing the greatest risk or disparity of disease or risk of preventable death, is an essential function. Health Communications supports the regional development of emergency plans and messages in coordination with the Regional Disaster Preparedness Organization (RDPO). Preparing for possible events during non-emergency periods ensures we have a readily available library of messages and alerts in diverse languages.

Key Performance Indicator (KPI) 2.1: Average response time to direct messages on Facebook and Instagram

KPI 2.1 Description: Communication is only effective if it is timely, if it conveys information that is necessary to the people receiving it, and if it is understood. This is particularly important during an emergency. These measures assess how timely Health Department emergency and crisis communications are and how culturally specific or relevant they are. The population served varies by incident, but in general includes those who need the information to maintain their health and safety during an event and those most likely to be left out or overlooked because of social factors like language, digital access, etc.

FY 2026 Estimate: Maintain an average response time of 6 hours and 15 minutes across Instagram and Facebook	**FY 2027 Target:** Maintain an average response time of 6 hours and 10 minutes across Instagram and Facebook

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Key Performance Indicator (KPI) 2.2: Number of hazards and available languages in Regional Critical Safety Messaging Bank

There are currently 15 hazards in the Regional Critical Safety Messaging Bank available in a minimum of 26 languages.

FY 2026 Estimate: Complete translations for boil water messages in 3 additional languages	**FY 2027 Target:** Add a new hazard with approved messages developed in at least 10 languages

KPI 2.2 Equity Considerations: The disaster preparedness work is a regional collaboration to ensure messaging consistency with our neighboring counties to not confuse folks who may receive multiple alerts/messages. This is a best practice as emergencies don't respect jurisdictional boundaries and require consistent messaging, but there are equity considerations when working with other partners (e.g., the speed of the work, the consensus on which hazard to add next, which languages to prioritize, etc.)

Outcome 2 Program Offers

The following program offers contribute to Outcome 2. Division-specific administrative program offers are not included, as they support all outcome statements:

- 40000A - Health Department's Director's Office

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3. Equity is embedded into policies, practices, and partnerships across the Health Department to advance community-driven, culturally responsive, population-level health solutions that address the root causes of health inequities and improve health outcomes for all.

By partnering with communities and aligning policies, programs, and investments with the HD's values and vision, the Department advances health equity and justice, and strategies that strengthen trust, foster an inclusive internal culture, and improve health outcomes across the population.

Key Performance Indicator (KPI) 3.1: Number of Health Department initiatives co-designed with community partners to identify population-level health solutions

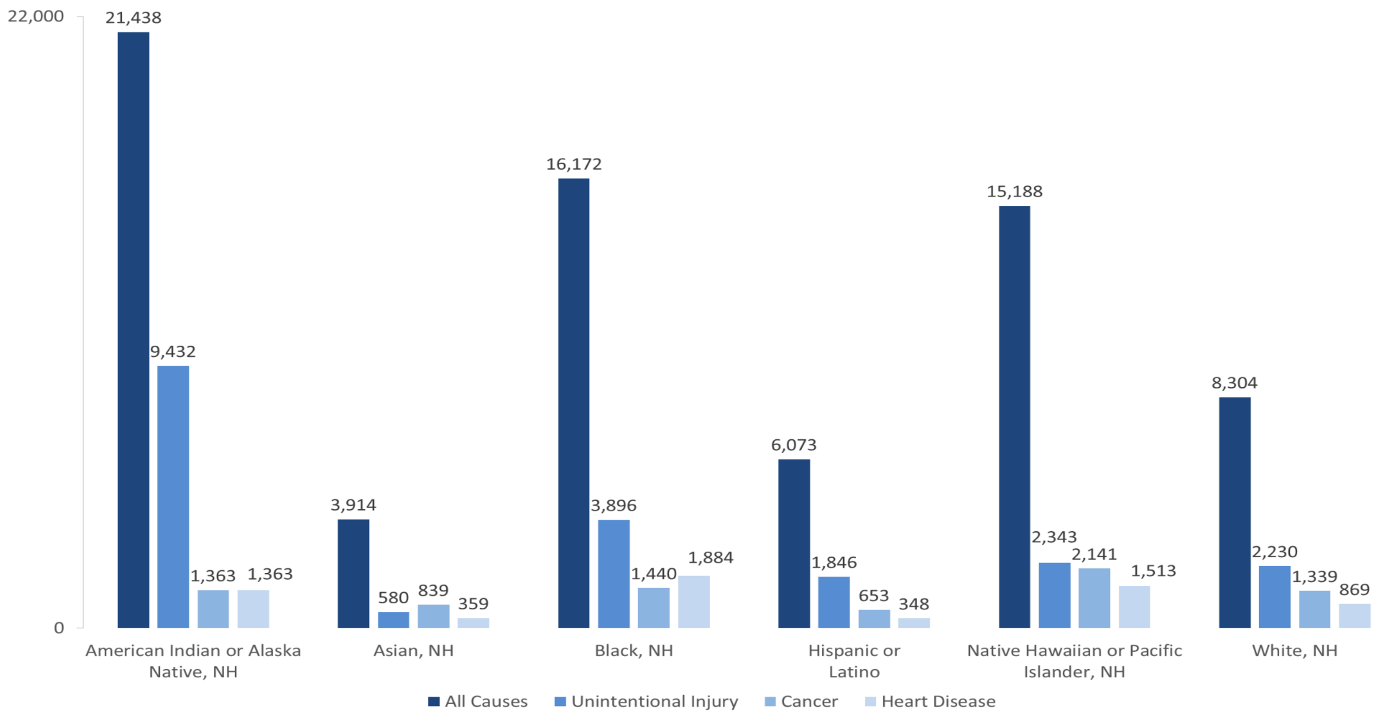
The following data shows current information for the leading causes of death by race and ethnicity and years of preventable life lost. They show populations most impacted and experiencing disproportionate differences in health and health outcomes. These data inform strategies to address the root causes of health inequities, shape community solutions, inform partnerships and reduce preventable deaths.

	Multnomah County Population	American Indian or Alaska Native	Asian	Black or African American	Hispanic or Latino	Native Hawaiian or Pacific Islander	White
1	Cancer	Unintentional Injury	Cancer	Heart Disease	Cancer	Cancer	Cancer
2	Heart Disease	Heart Disease	Heart Disease	Cancer	Heart Disease	Heart Disease	Heart Disease
3	Unintentional Injury	Cancer	Stroke	Unintentional Injury	Unintentional Injury	Stroke	Unintentional Injury
4	Stroke	Liver Disease	COVID	Stroke	COVID	Unintentional Injury	Stroke
5	Alzheimer's	COVID	Unintentional Injury	Diabetes	Stroke	Diabetes	Alzheimer's

Rank of leading causes for full Multnomah County population

#1 Cancer #2 Heart Disease #3 Unintentional Injury #4 Stroke #5 Alzheimer's #6 COVID #8 Diabetes #10 Liver Disease

Years of potential life lost per 100,000 population by race/ethnicity - Multnomah County, 2020-2024



FY 2026 Estimate: 3-5 Initiatives addressing root causes of health inequities are co-designed with community partners	**FY 2027 Target:** 6-8 Initiatives are developed or implemented through formal community partnership and co-design processes

KPI 3.1 Equity Considerations: These data show where health inequities exist across race and ethnicity, and guide our focus to advance health equity. Using our local data allows us to center those who are most impacted and design health solutions that are grounded in quantitative and qualitative data — including community voice and lived experience — for greater impact.

Outcome 3 Program Offers

The following program offers contribute to Outcome 3. Division-specific administrative program offers are not included, as they support all outcome statements:

- 40000A - Health Department’s Director’s 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	Total FTE
40000A	Health Department Director's Office		7,807,442	1,719,826	9,527,268	30.80
40000B	Overdose Prevention & Response		1,373,164	0	1,373,164	4.00
40000C	Behavioral Health CLP+ & System Transformation		630,580	0	630,580	2.70
	Total Director's Office		**9,811,186**	**1,719,826**	**11,531,012**	**37.50**

Division: HD Director's Office

Program Characteristics:

Program Description

The Health Department (HD) Director's Office provides executive leadership committed to equity and community engagement. The Director is the Local Public Health Administrator (LPHA) and supports the Board as the Local Mental Health Authority (LMHA). This ensures the HD meets legal requirements and improves community health. The Office convenes the HD Leadership Team, is a liaison to elected officials, and advances statutorily required capabilities related to equity, partnerships, communications, policy, planning, epidemiology, and workforce.

The Office of Health Equity (OHE) leads racial justice and equity-focused efforts. It is a central hub in a departmental approach to align equity-centered strategic plans and investments in population-level health outcomes to optimize capacity as the largest Public/Behavioral Health Department and Community Health Center in Oregon. OHE coordinates culturally specific community engagement, including critical language and liaison support in emergencies. Strategists representing nine diverse groups engage community leaders, organizations, and boards to implement strategies aimed at ending health inequities.

Strategy and Grant Development secures resources to launch initiatives and maintain programs. Public Health Infrastructure Grant capacity supports implementing capabilities across the department and workforce efforts with schools of public health to address recruitment and retention so the community can be effectively served. Communications & Marketing executes evidence-based communications to protect the public from harm, eliminate health inequities, and support organizational cohesion. The team fulfills public health statutory requirements, promotes essential services and capabilities, disseminates timely, trustworthy information to diverse communities, and serves as Public Information Officers in emergencies.

Equity Statement

The Health Department Director's Office provides strategic direction to lead the department's efforts to end health inequities across Multnomah County's many culturally specific communities. Work across Health Department divisions aims to mitigate the impacts of colonialism and current and historic racism and to end health inequities. The Office also utilizes equity-based, data-driven processes, including community data, to address inequities and improve outcomes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$5,733,945	$2,266,609	$5,700,204	$869,834
Contractual Services	$1,113,113	$886,390	$1,380,318	$484,390
Materials & Supplies	$237,623	$106,952	$72,112	$1,513
Internal Services	$615,065	$355,405	$654,808	$364,089
Total GF/non-GF	**$7,699,746**	**$3,615,356**	**$7,807,442**	**$1,719,826**
Total Expenses:	**$11,315,102**		**$9,527,268**	
Program FTE	28.98	12.60	25.60	5.20
Program Revenues				
Intergovernmental	$0	$3,615,356	$0	$1,719,826
Total Revenue	**$0**	**$3,615,356**	**$0**	**$1,719,826**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
# of culturally specific and multicultural community partners and events that promote health equity	160	160	145
# of people who saw content from or about the Department through webpage, posts, stories, ads, etc.	1,546,032	1,300,000	1,000,000

Division: HD Director's Office

Program Characteristics:

Program Description

The Health Department's Overdose Prevention and Response (OPR) Plan covers the substance use and addiction service continuum to reduce health inequities. The plan was developed in FY 2024 to address overdose deaths, gaps in prevention, harm reduction, treatment, and recovery services. It will be updated for FY 2027 to integrate ongoing activities, as well as new ones. The plan's goal is to slow and reduce overdose rates and ultimately end preventable deaths. This is accomplished through preventing exposure to opioids, stimulants, and other illicit substances; reducing harms; and increasing utilization of treatment and recovery services.
This program offer maintains capacity for prevention focused on youth and families, naloxone distribution, and harm reduction technical assistance to integrate strategies across homeless, behavioral health, and addictions systems. Prevention efforts educate and support BIPOC, LGBTQ2SIA+, and other priority youth to prevent drug use and the development of substance use disorders. Behavioral Health and Public Health staff work to expand partnerships with County leadership, multisectoral partners, schools, community and faith-based organizations, and people with lived experience. They provide partners with harm reduction and other technical assistance, educational toolkits, and coordinate culturally specific forums.

Naloxone distribution remains critical to curbing and eventually ending overdose deaths. This program supports a naloxone specialist acting as a central resource for coordinating training and purchasing naloxone. The program distributes lifesaving naloxone through partnerships with the Homeless Services Department and community organizations. Since July 2024, the program (including funding in other program offers such as Harm Reduction - 40061) has distributed over 56,327 naloxone kits, equating to 112,654 doses, to community partners and County programs.

Equity Statement

The OPR plan and work funded by this program offer prioritizes communities experiencing the highest overdose rates and people unfairly impacted by systemic oppression and exclusion. Activities coordinate around innovation, equity, and dignity to deliver person-centered solutions. In practice, this means meeting people where they are with compassion and cultural humility, and monitoring data to focus implementation on health inequities by race/ethnicity and housing status.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$452,332	$0	$629,858	$0
Materials & Supplies	$150,000	$0	$743,306	$0
Total GF/non-GF	**$602,332**	**$0**	**$1,373,164**	**$0**
Total Expenses:	**$602,332**		**$1,373,164**	
Program FTE	3.00	0.00	4.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of substance use prevention and harm reduction education or technical assistance sessions conducted	13	15	20
Number of naloxone kits distributed through the funding in this specific program offer	3,500	3,750	45,652

Division: HD Director's Office

Program Characteristics:

Program Description

The Health Department (HD) Director holds a statutory role of Local Public Health Administrator and supports the Behavioral Health Division (BHD) as the Community Mental Health Program (CMHP) to ensure the HD performs its governmental role and advances equity. As CMHP, the BHD supports the Board as the Local Mental Health Authority. A key responsibility is developing a Comprehensive Local Plan (CLP) to determine local service needs and provide services.

In FY 2026, the Oregon Health Authority updated the CLP template and Multnomah County's CLP was adopted by the Board in January 2026. The HD continues to expand on the traditional compliance-based CLP required by the state, toward a system transformation plan providing a roadmap for a population-level, systems-based approach to a behavioral health system. This approach builds structures for a collective impact model to improve data, accessibility, and workforce capacity, ensuring the right services reach the right people.

BHD is convening partners around making data accessible, increasing the workforce, and transforming a siloed system into one that collaborates to meet consumer needs in real time. This program offer supports capacity for epidemiological analysis and evaluation to identify needs and track equity-focused outcomes. It also funds the facilitation, project management, and data infrastructure necessary to achieve these goals. In FY27, BHD will work with partners to focus on the high acuity behavioral health population at the intersection of homelessness, mental health, and substance use.

Equity Statement

The HD Director’s Office provides strategic direction to lead the department’s efforts to end health inequities across Multnomah County’s many culturally specific communities. The goal is to mitigate the impacts of current and historic racism and white supremacy and to end health inequities. This offer focuses outcomes on equity and utilized epidemiology capacity to analyze what communities are most impacted by behavioral health inequities to improve community health.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$661,682	$0	$630,580	$0
Total GF/non-GF	**$661,682**	**$0**	**$630,580**	**$0**
Total Expenses:	**$661,682**		**$630,580**	
Program FTE	3.20	0.00	2.70	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
# of population-based measures for behavioral health that are tracked	N/A	15	15
# of behavioral health planning/implementation sessions	5	5	5

Operations

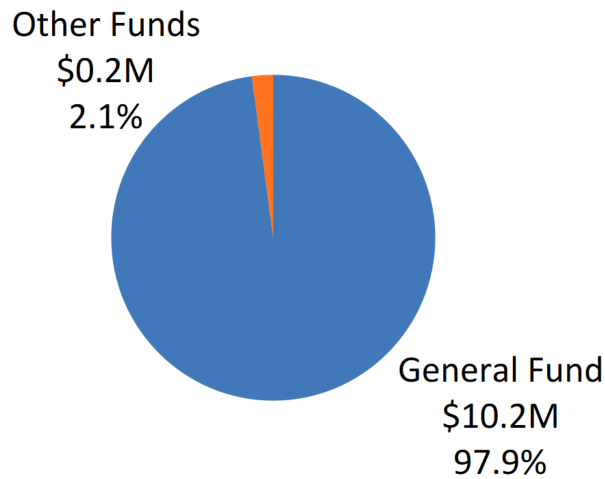
$10.5 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

37.88 FTE

(full time equivalent)



The Operations division works across the Department to support Health Department programs in all of their work with the ultimate goal of ensuring statutory obligations and minimizing preventable deaths and ending health inequities across Multnomah County. The core work of Operations and the goals for community change include the following:

- **Response and Recovery** coordinates and champions response and recovery functions in the event of an emergency, large disease outbreak, severe weather, or other crisis situations so that health is maintained and avoidable deaths are minimized.
- **Data Governance and Quality Management** through a commitment to continuous improvement, these programs lead planning and administrative controls and promote adherence to regulations.
- **Continuity of Operations (CoOP)** provides essential coordination to safeguard public health, particularly in the event of loss of staff, systems, and facilities by ensuring continuity, regulatory compliance, and community trust.
- **Facilities, Safety & Security** coordinates with contracted security personnel to safeguard staff and clients. This program provides support for operations at each location working closely with the County Facilities Department.

The division is directly involved in work to address **Focus Area 3: Strengthen Community Vitality and Resilience** in the Countywide Strategic Plan**.**

Significant Division Changes

In FY 2027 the Human Resources (HR) program shifted from the Director's Office to the Operations Division. Additional analytical capacity was added to the Data Governance and Quality program to ensure adequate support is available to the Department's financial reporting team.

Operations Outcomes

1. Documented assessment of current state of maintenance, security and structure of Health Department data and files to include the development of workflow improvements to reduce time and resources spent to maintain and remain in compliance with statutory requirements.

Transparency is both a county goal and a matter of Oregon law. The public's right to request public records from the Health Department is assisted by a privacy specialist using the GOV QA digital platform.

Key Performance Indicator (KPI) 1.1: Public Records Requests completed within statutory deadlines

KPI 1.1 Description: The Department is required to acknowledge receipt of requests for public records within five business days and has a standard 15-day goal for completion. Meeting this goal requires consideration of public records law, patient privacy laws (HIPAA), and agency policies related to public records information sharing.

FY 2026 Estimate: 96% completed within statutorily-required timeframe	**FY 2027 Target:** 99% completed within statutorily-required timeframe

KPI 1.1 Equity Considerations: Clear and transparent privacy and records request procedures mitigate navigational barriers that are likely to disproportionately impact people for whom English is a second language. Having and maintaining clear records request systems and privacy policies also helps build and repair trust with communities, especially those who have experienced systemic marginalization.

Outcome 1 Program Offers

The following program offers contribute to Outcome 1. Division-specific administrative program offers are not included, as they support all outcome statements:

- 40044 - Data Governance & Quality

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2. By the end of FY 2027, 60% of Health Department continuity plans will meet or exceed established Continuity of Operations (CoOP) quality standards, strengthening the department’s ability to sustain essential services during emergencies and prolonged disruptions.

CoOP planning ensures that vital daily government functions can continue to operate while facilities, systems, or personnel may be reduced because of an emergency.

Key Performance Indicator (KPI) 2.1: Percent of continuity plans meeting expectations

KPI 2.1 Description: measures the percentage of Health Department programs whose Continuity of Operations Plan (CoOP) meets established standards through an annual internal assessment aligned with Federal Emergency Management Agency (FEMA) continuity guidance.

FY 2026 Estimate: 45% Meeting expectations	**FY 2027 Target:** 60% Meeting expectations

KPI 2.1 Equity Considerations: Continuity Planning supports equitable service delivery and prevents avoidable negative health outcomes for County residents communities disproportionately impacted by emergencies.

Outcome 2 Program Offers: The following program offers contribute to Outcome 2.

- 40046 - Health Operations Administration

Table of Division Programs

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

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
40039	Human Resources		5,593,016	218,967	5,811,983	26.88
40044	Data Governance & Quality		2,782,154	0	2,782,154	2.00
40046	Health Operations Administration		1,862,001	0	1,862,001	9.00
	Total Health Operations		**10,237,171**	**218,967**	**10,456,138**	**37.88**

Division: Operations

Program Characteristics:

Program Description

The Health Department Human Resources (HR) team provides expertise, consultation, and leadership to ensure a highly skilled and diverse workforce is hired and retained. We uphold core values of non-discrimination and varied lived experiences, manage compliance with personnel rules and legal requirements, and maintain partnerships with labor unions and stakeholders.

Critical operating areas include Recruitment, Workday implementation, Leave Coordination, Privacy Compliance, Classification/Compensation, Data Management, and Employee Record Maintenance. The Workforce Equity Strategic Plan (WESP) drives measurable outcomes across all HR areas, focusing on organizational culture, professional development, and retention. Additionally, our Employee Relations team offers comprehensive support, including team development, performance management, coaching, and discipline, partnering with union staff (AFSCME Local 88, Dentists, Physicians & Psychiatrists, Pharmacists, and the Oregon Nurses Association) to resolve grievances and collaborate on concerns.

Key outcomes include sustained improvement in average days to hire; recruiting and retaining a diverse workforce that reflects the communities we serve; and elevation of supportive internal services, specifically by reducing the elevation of grievances to Step 3 or arbitration by 2027.

Equity Statement

Health Department Human Resources (HR) is dedicated to fostering an equitable workplace by ensuring we support our diverse workforce. We champion equity through recruiting diverse talent, ensuring fair compensation, and creating equal opportunities for growth within the organization. We strive to build and support a workforce that ensures fair and equitable outcomes for our employees.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$5,356,382	$120,851	$5,215,340	$0
Contractual Services	$12,060	$0	$12,458	$0
Materials & Supplies	$41,271	$41,066	$43,025	$310
Internal Services	$372,901	$237,095	$322,193	$218,657
Total GF/non-GF	**$5,782,614**	**$399,012**	**$5,593,016**	**$218,967**
Total Expenses:	**$6,181,626**		**$5,811,983**	
Program FTE	27.88	0.00	26.88	0.00
Program Revenues				
Intergovernmental	$0	$399,012	$0	$218,967
Total Revenue	**$0**	**$399,012**	**$0**	**$218,967**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Community events attended for recruitment and outreach	19	20	17
Average days to fill a recruitment	94	78	78

Division: Operations

Program Characteristics:

Program Description

The Data Governance and Quality (DGQ) Program serves as the backbone of Health Department efforts to manage, protect, and activate its data in service of health delivery, operational excellence, and regulatory compliance. The program integrates governance, analytics, and operational data infrastructure under a unified strategy that ensures data is accurate, secure, accessible, and aligned with departmental priorities. By overseeing privacy, compliance, quality assurance, and strategic planning, this program enables the Health Department to meet federal, state, and local reporting requirements while transforming data into actionable insights for decision-makers across clinical, administrative, and community-based services.

DGQ operationalizes data governance through strong cross-divisional leadership, dedicated technical capacity, and sustainable infrastructure. The analysts on our team deliver department-wide business intelligence, data and report development, analytics, and visualization, maintaining hundreds of operational reports and leading high-impact reporting tied to funding and accountability. Project managers seek out opportunities to bolster data literacy, quality data improvements, and systemwide efficiencies through community engagement, effective modernization, and process automation. Policy consultants draft, maintain, and update department wide policies. Our privacy expert validates proper collocation, redaction, and secure delivery of records requested by the community to fulfill requests within statutorial deadlines.

DGQ strengthens Health's ability to evaluate the real-world impacts of its policies, workforce practices, and service delivery and develop strategic assets for advancing community support, improving health outcomes, and enabling equitable and more effective public health decision-making.

Equity Statement

Governance policies, analytic practices, data literacy, and modernization prioritization are intentionally structured to prevent inequitable support distribution from the Health Department to county residents, protect and secure resident information, and surface disparities that might otherwise remain hidden. DGQ's work allows the Department to create capacity to address a prioritized backlog of equity-centered data projects.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$410,514	$0	$430,960	$0
Contractual Services	$245,559	$0	$0	$0
Materials & Supplies	$1,988,892	$0	$1,969,372	$0
Internal Services	$413,117	$0	$381,822	$0
Total GF/non-GF	**$3,058,082**	**$0**	**$2,782,154**	**$0**
Total Expenses:	**$3,058,082**		**$2,782,154**	
Program FTE	2.00	0.00	2.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Percent of Public Records Requests Completed within Statutory Deadlines	N/A	96%	99%
Number of internal Policies Reviewed and Renewed in Advance of Time Out	N/A	100%	100%

Division: Operations

Program Characteristics:

Program Description

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 with the support of a project manager facilitating and tracking these efforts.

The Operations Division encompasses Health Department Response and Recovery functions in the event of an emergency, severe weather, or other crises/situations that affect normal department operations to include Continuity of Operations (CoOP) and Safety & Security.

The Data Governance and Quality team leads reports to the Deputy Director and supervises Program Offer 40044.

Equity Statement

Through coordinated emergency response, continuity planning, and overdose prevention efforts, Deputy Director of Operations centers the needs of those most impacted by system disruptions and structural inequities. By maintaining continuity of services, supporting frontline responders, and ensuring equitable access to life-saving supports, Operations advances health equity by sustaining conditions necessary for effective, community-centered public health action.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,251,203	$0	$1,862,001	$0
Total GF/non-GF	**$1,251,203**	**$0**	**$1,862,001**	**$0**
Total Expenses:	**$1,251,203**		**$1,862,001**	
Program FTE	6.00	0.00	9.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
# of Health Department programs with an active CoOP Outcome	24	27	28
Percentage of plans meeting CoOP program guidelines	30%	45%	65%

Financial and Business Management

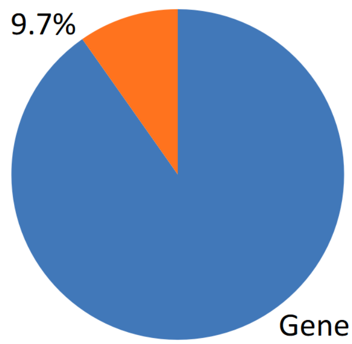
$15.4 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

51.50 FTE

(full time equivalent)



The Financial and Business Management Division (FBM) provides business and finance support for all divisions including financial reporting and forecasting, fiscal compliance, budget development, grants management, cash management, and accounts payable. FBM supports the management of services that are contracted with our community partners.

The division adheres to the principles laid out in **Focus Area 4: Be Accountable, Collaborative, and Transparent** in the Countywide Strategic Plan.

Significant Division Changes

Personnel reductions include 6.00 FTE: 1.00 FTE Finance Manager Senior, 3.00 FTE Finance Supervisors, 1.00 FTE Procurement Analyst Senior, and 1.00 Project Management Specialist across the division. These reductions will constrain the division’s capacity and service delivery timelines in Cash Management, Grants Management, Financial Reporting, Year-End closing and Community Contracting Services.

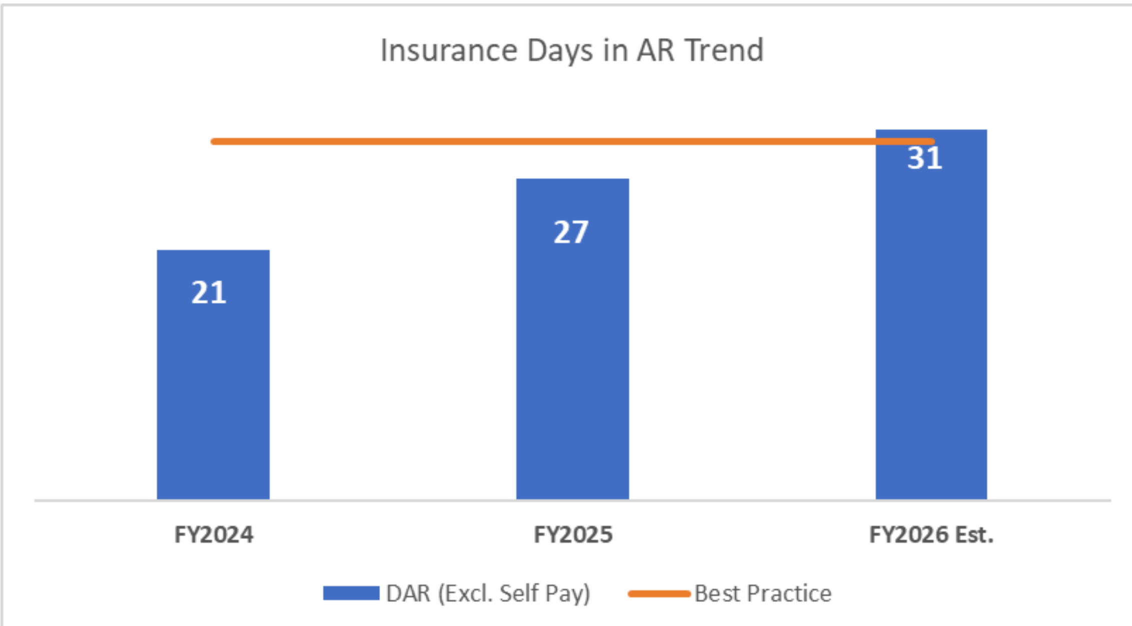
Financial and Business Management Outcomes

1. Revenues from medical accounts receivable are processed and managed in a timely and accurate manner, including billing, collections, and cash handling.

Key Performance Indicator (KPI) 1.1: Days in Accounts Receivable (excluding self-pay)

KPI 1.1 Description: Days in Accounts Receivable (DAR) is the average days it takes to collect payment after services are provided. Volume alone does not ensure financial performance. The effectiveness of converting submitted claims into collected revenue is equally critical.

Industry Benchmarks: Best Practice ≦30 days.



FY 2026 Estimate: 31 days	**FY 2027 Target:** 30 days Goal aligns with best practice as Behavioral Health workflows stabilize, vacant positions are filled, and payor processing issues are resolved

KPI 1.1 Equity Considerations: The Health Department serves a large proportion of people on Medicaid, people who are uninsured and people living on low incomes. To ensure that performance measurement reflects operational efficiency, rather than patient financial barriers, Insurance Days in Accounts Receivable (Insurance DAR) is used as one of the primary indicators of revenue cycle performance.

Outcome 1 Program Offers

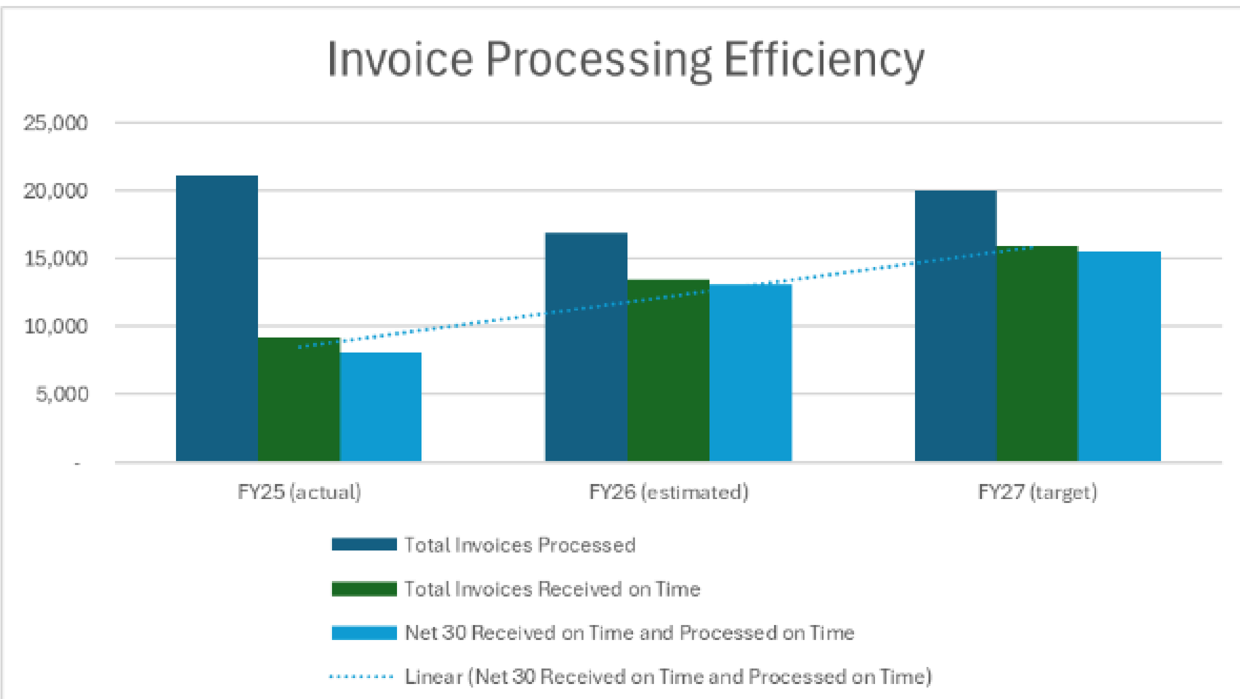
The following program offers contribute to Outcome 1. Division-specific administrative program offers are not included, as they support all outcome statements:

- 40041 - Medical Accounts Receivable

2. Expenditures are incurred, recorded, monitored, and reported in accordance with County policies and procedures.

Key Performance Indicator (KPI) 2.1: Invoice processing efficiency

KPI 2.1 Description: Invoices that are due in full within 30 days, are processed on time by the Accounts Payable (AP) Unit. The Unit processed 21,147 invoices in FY 2025. Given the volume of invoices, a target timeline has been set that all invoices must be processed within 10 days.



The AP team is successfully meeting the goal and is processing these invoices within 5 days of receipt.

FY 2026 Estimate: 97% of invoices will be processed within 10 days of receipt. Total of 17,000 invoices	**FY 2027 Target:** 97% of invoices will be processed within 10 days of receipt

KPI 2.1 Equity Considerations: On time payments are beneficial particularly to smaller organizations. Timely payments help to address long-standing inequities that disproportionately affect historically underrepresented owners and businesses, who may face barriers to financial resources.

Outcome 2 Program Offers

The following program offers contribute to Outcome 2. Division-specific administrative program offers are not included, as they support all outcome statements:

- 40040 - Financial and Business Management Services

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3. Contracts with service providers are executed in accordance with County policies to ensure that they are paid accurately and in a timely manner.

Key Performance Indicator (KPI) 3.1: Time in days that a contract is with the Health Purchasing unit for processing.

KPI 3.1 Description: The Health Department defines timely contract performance as 60-90 days from start to completion and reviews performance monthly.

FY 2026 Estimate: 60.38 days average time for a contract to cycle from creation to execution	**FY 2027 Target:** 60 days average for contract cycle time

KPI 3.1 Equity Considerations: Monitoring this outcome ensures that community partners and suppliers receive their contracts in a manner that allows for a thorough review and the opportunity for a kick off meeting. Once executed, finance can process the standard Net30 and ensure that supplier invoices are processed on time.

Outcome 3 Program Offers

The following program offers contribute to Outcome 3. Division-specific administrative program offers are not included, as they support all outcome statements:

- 40042 - Contracts & Procurements

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	Total FTE
40040	Financial and Business Management Services		9,447,974	1,500,000	10,947,974	29.50
40041	Medical Accounts Receivable		2,303,341	0	2,303,341	12.00
40042	Contracts & Procurement		2,178,057	0	2,178,057	10.00
	Total Financial and Business Management		**13,929,372**	**1,500,000**	**15,429,372**	**51.50**

Division: Financial And Business Management

Program Characteristics:

Program Description

This program offer supports the essential financial and business management services of the Health Department. Services include 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 inequities.

Equity Statement

The Health Department's Financial and Business Management (FBM) team upholds the highest standards of fiduciary responsibility and financial stewardship, ensuring resources are managed with integrity and transparency. FBM centers equity in policy and practice, supporting the Health Department's mission to reduce health disparities. FBM continually invests time and resources into identifying and dismantling systems that contribute to inequity and white supremacy culture.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$6,253,175	$0	$5,553,883	$99,915
Contractual Services	$34,186	$0	$35,314	$0
Materials & Supplies	$106,556	$0	$43,243	$0
Internal Services	$3,963,728	$0	$3,815,534	$1,400,085
Total GF/non-GF	**$10,357,645**	**$0**	**$9,447,974**	**$1,500,000**
Total Expenses:	**$10,357,645**		**$10,947,974**	
Program FTE	33.00	0.00	29.00	0.50
Program Revenues				
Intergovernmental	$0	$0	$0	$1,500,000
Other / Miscellaneous	$20,306,624	$0	$18,501,943	$0
Total Revenue	**$20,306,624**	**$0**	**$18,501,943**	**$1,500,000**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Percentage of net 30 invoices received on time and processed by the Health Department Accounts Payable team	87%	97%	100%
Number of audit findings in County's annual financial audit	0	0	0

Division: Financial And Business Management

Program Characteristics:

Program Description

The Medical Accounts Receivable Team is responsible for billing and collecting over $80 million in annual revenue for the Health Department. The program manages billing, collections, cash handling and reconciliation for Multnomah County's Primary Care, Dental, School Health centers and Public Health clinics, as well as ancillary services (lab and pharmacy), community-based care (Parent Child Family Health) and Behavioral Health. The program processes and reconciles claims for more than 200 insurance carriers, including Coordinated Care Organizations (CCO) and other Medicaid plans, in addition to Medicare, and various commercial medical and dental plans. Additionally, the program facilitates Medicaid and Medicare enrollment for providers and clinics ensuring continued access to care for the communities we serve.

Equity Statement

The Health Department's Financial and Business Management (FBM) team upholds the highest standards of fiduciary responsibility and financial stewardship, ensuring resources are managed with integrity and transparency. FBM centers equity in policy and practice, supporting the Health Department's mission to reduce health disparities. FBM continually invests time and resources into identifying and dismantling systems that contribute to inequity and white supremacy culture.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,890,990	$0	$1,971,353	$0
Materials & Supplies	$113,694	$0	$117,446	$0
Internal Services	$253,051	$0	$214,542	$0
Total GF/non-GF	**$2,257,735**	**$0**	**$2,303,341**	**$0**
Total Expenses:	**$2,257,735**		**$2,303,341**	
Program FTE	12.00	0.00	12.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of claims (processed for payment)	249,350	259,000	271,950
Payments received (from Claims, Wraparound & Medicare Cost report)	$47,844,250	$43,820,524	$45,657,782

Division: Financial And Business Management

Program Characteristics:

Program Description

Annually, this program processes more than 1,000 contract and procurement action requests, and an additional 5,298 actions in the Multnomah MarketPlace (MMP) and outside, for direct purchase of goods. Staff 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 that reduce the spread and severity of disease.

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.

Equity Statement

The Health Department's Financial and Business Management (FBM) team upholds the highest standards of fiduciary responsibility and financial stewardship, ensuring resources are managed with integrity and transparency. FBM centers equity in policy and practice, supporting the Health Department’s mission to reduce health disparities. FBM continually invests time and resources into identifying and dismantling systems that contribute to inequity and white supremacy culture.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$2,222,913	$0	$1,885,736	$0
Materials & Supplies	$0	$0	$196	$0
Internal Services	$381,410	$0	$292,125	$0
Total GF/non-GF	**$2,604,323**	**$0**	**$2,178,057**	**$0**
Total Expenses:	**$2,604,323**		**$2,178,057**	
Program FTE	12.00	0.00	10.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of Action Request Forms Submitted	950	1,000	1,100
MMP Item Purchasing	$4.5M	$4.2M	$4.4M

Health Officer

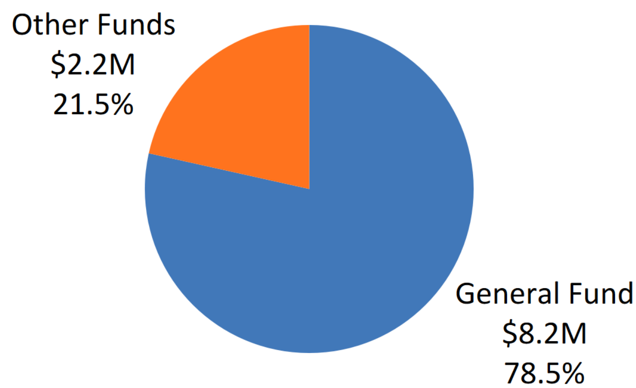
$10.5 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

36.88 FTE

(full time equivalent)



The Health Officer division is composed of four functions required by law:

1. The **Health Officer** program provides public health physician consultation, technical direction, and leadership to support public health response activities across the Portland metro tri-county region. The regional Multnomah County Health Officer supervises four health officers and serves as the physician link to health systems and underserved communities. Together, regional Health Officers act as physician ambassadors, communicate critical health alerts and warnings in public health emergencies and monitor and respond to emerging community health challenges.
2. The **Medical Examiners Office (MEO)** operates 24/7/365, investigating the cause and manner for approximately 1 in 3 deaths in Multnomah County. The law requires investigation for certain deaths including homicides, suicides, overdoses, and accidental deaths.
3. The **Emergency Medical Services (EMS)** program includes the EMS Medical Director and EMS Administration, which includes the Tri-County 911 (TC911) social worker intensive case management program for frequent users of 911 and emergency departments.
4. **Public Health Emergency Preparedness and Response (PHEPR)** works to improve response readiness by maintaining emergency plans, operations, and public health response capabilities. The Health Officer team supports the Health Department's aim of reducing preventable deaths in large part through this emergency preparedness work.

The Health Officer supports **Focus Area 1: Support Community Health and Wellness and Focus Area 3: Strengthen Community Vitality and Resilience** in the Countywide Strategic Plan**.**

Significant Division Changes

The **Medical Examiner's Office** has an increased need for additional death investigation staff to perform investigations, as a result of requiring 24-hour a day, 7-day a week field response coverage. Both the number of deaths and the complexity of the investigative work required have increased. A reallocation to the Medical Examiner (40052) adds 2.00 FTE Medicolegal Death Investigators to provide capacity for addressing increased need.

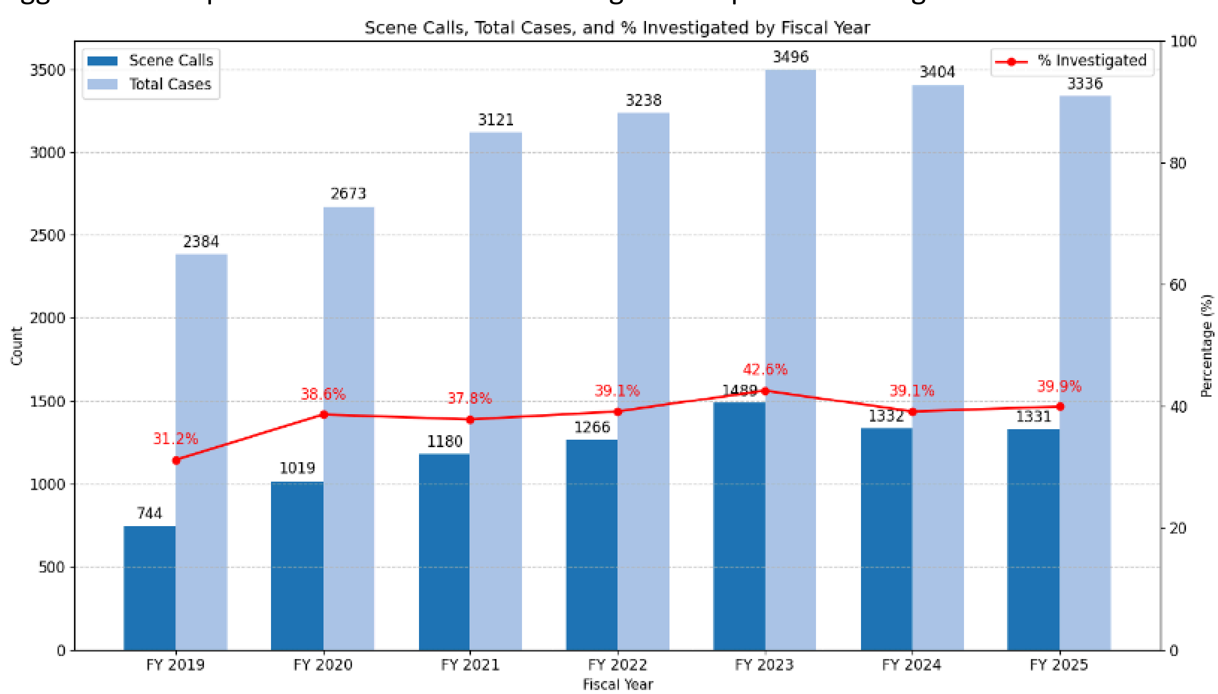
A $362,000 one-time-only continuation for the **Ambulance Service Plan** (40004B) is funded in order to implement recommended changes and procurement of updated services in FY 2027. State law requires counties to develop and maintain Ambulance Service Plans for all areas in their county.

Health Officer Outcomes

1. Medicolegal death investigators will be maintained at the highest quality possible with responsiveness and speed impacted by both available resources and volume of decedent investigations.

Key Performance Indicator (KPI) 1.1: Death investigation scene responses

KPI 1.1 Description: Number of death scene responses made by qualified death investigators. There is no industry standard number of responses that is considered acceptable. However, a recent study suggested that upwards of 80% of cases should get an in-person investigator to the scene.



FY 2026 Estimate: 1,650 scene calls	**FY 2027 Target:** 1,550 scene calls (decreased due to population loss and staffing limitations)

KPI 1.1 Equity Considerations: People who die while under the care of a physician or of natural causes are not investigated by the Medical Examiner. People who die while not under a physician's care are over represented by people who are economically disadvantaged. Economically disadvantaged individuals are more representative of vulnerable populations with whom medical systems have not adequately engaged.

Outcome 1 Program Offers

The following program offers contribute to Outcome 1. Division-specific administrative program offers are not included, as they support all outcome statements:

- 40052 - Medical Examiner
- 40048 - Epidemiology, Evaluation, and Policy Research

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2. Medical coordination for communicable disease infections throughout the tri-county region will be maintained through coordinated responses, consistent messaging, and collaboration across public health systems in Clackamas, Multnomah, and Washington Counties.

Key Performance Indicator (KPI) 2.1: Communicable Disease Tri-County Coordination - Percentage of high-priority communicable disease surveillance, investigation, and response protocols consistently coordinated across the Tri-County area (Multnomah, Clackamas, and Washington Counties).

KPI 2.1 Description: Counties are responsible to monitor, track, and respond to various reportable communicable diseases. Data on Communicable Disease Trends for all counties in Oregon can be found in the OHA Monthly Communicable Disease Report.

FY 2026 Estimate: 100% of high-priority communicable disease events are consistently coordinated per response protocols	**FY 2027 Target:** 100% of high-priority communicable disease events are consistently coordinated per response protocols

KPI 2.1 Equity Considerations: Disease response planning and actions are guided by an equity lens, ensuring all areas of the County are considered. Specific attention is given to communities and areas

experiencing disproportionate disease impact, coordinating efforts with culturally specific and geographically focused approaches to reduce disease burden effectively.

Outcome 2 Program Offers

The following program offers contribute to Outcome 2. Division-specific administrative program offers are not included, as they support all outcome statements:

- 40002 - Tri-County Health Officer
- 40010A - Communicable Disease Prevention and Control
- 40048 - Epidemiology, Evaluation, and Policy Research

3. People in Multnomah County can expect consistent ambulance response times that are monitored regularly, with statistics reported publicly.

Key Performance Indicator (KPI) 3.1: Public reporting of ambulance response times

KPI 3.1 Description: Ambulance response time performance is solely the ambulance franchisee's responsibility, County Emergency Medical Services is responsible for measuring, monitoring, and making monthly performance reports available. Response time data is updated regularly. The goal is that 90% of responses meet that benchmark.

FY 2026 Estimate: 100% of aggregate monthly reports posted publicly (Response performance is currently 82% for life threatening urban responses meeting the metric.)	**FY 2027 Target:** 100% of aggregate monthly reports posted publicly (Response time goal is that 90% of life threatening urban responses meet the metric.)

KPI 3.1 Equity Considerations: Responses must acknowledge and address the disproportionate impact on communities, particularly those with reduced access to Emergency Medical Services (EMS).

Outcome 3 Program Offers: The following program offers contribute to Outcome 3

- 40004A - Ambulance Services (Emergency Medical Services)

Table of Division Programs

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

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
40002	Tri-County Health Officer		855,945	469,658	1,325,603	2.03
40004A	Ambulance Services (Emergency Medical Services)		3,110,190	1,486,873	4,597,063	14.75
40004B	Ambulance Service Plan Continuation	X	362,000	0	362,000	0.00
40005	Public Health & Regional Health Systems Emergency Preparedness		22,213	292,467	314,680	1.10
40052	Medical Examiner		3,862,984	0	3,862,984	19.00
	Total Health Officer		**8,213,332**	**2,248,998**	**10,462,330**	**36.88**

Division: Health Officer

Program Characteristics:

Program Description

The Multnomah County Health Officer is the lead Health Officer and supervises a Multnomah County Deputy Health Officer, the Washington County Health Officer, and several on-call Deputy Health Officers. The Health Officers work under the authority of the Local Public Health Administrator for the Local Public Health Authority. The program has agreements with Washington County and Clackamas County for the coordination of Health Officer activities across county borders. The Health Officers oversee the Medical Examiner's Office, Emergency Medical Services administration, Public Health Emergency Preparedness & Response, and several aspects of the Overdose Prevention & Response plan. They also provide physician authorization and clinical oversight for the full scope of Communicable Disease Services, including medical direction for the Sexually Transmitted Infection Clinic, Harm Reduction Clinic, and tuberculosis program, and serve as key physician subject matter expert spokespeople for the County. Health Officers also close gaps in services. Recent examples include highly pathogenic avian influenza testing and prophylaxis, and expanding naloxone availability for overdoses. The Health Officers work alongside health department programs, leadership, and community to assure resources are focused on addressing preventable deaths and disease in communities that experience the most disproportionate and protracted impact. They also offer a valuable perspective in the realm of local and state health policy that is prevention-focused and equity-based. The Health Officers play a key role, in coordination with the Health Department Director and Public Health Director, with media and regional communications about major public health concerns or initiatives, including (1) participating in enforcement of public health laws; (2) supervising select public health programs; (3) working with department staff, other county agencies, and community partners to manage critical public health problems; and (4) participating in the department leadership team.

Equity Statement

As part of their work coordinating public health projects and interventions in the county, the Tri-County Health Officer team exercises an equity lens to ensure that under-resourced populations are included in determinations of disproportionate impact and often times work directly with members of those communities, through the community engagement and consumer involvement teams in the department to develop or deploy focused interventions to address those inequities.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$685,278	$367,818	$749,424	$403,809
Materials & Supplies	$49,754	$10,308	$0	$6,000
Internal Services	$109,142	$57,674	$106,521	$59,849
Total GF/non-GF	**$844,174**	**$435,800**	**$855,945**	**$469,658**
Total Expenses:	**$1,279,974**		**$1,325,603**	
Program FTE	1.07	0.87	1.15	0.88
Program Revenues				
Intergovernmental	$0	$435,800	$0	$469,658
Total Revenue	**$0**	**$435,800**	**$0**	**$469,658**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Health System respiratory pathogen calls are held on a regular basis (every 2 weeks) during respiratory season (Oct-Apr)	100%	100%	100%
Health Officers provide consistent coverage of the regional on-call/after hours reportable disease phone line without lapse	100%	100%	100%

Division: Health Officer

Program Characteristics:

Program Description

The Multnomah County Emergency Medical Services (MCEMS) Program includes all of the functions related to the regulation, coordination, and operational and clinical oversight required of a County by ORS 682.062, OAR 333-260, County Ordinance 1238, and County Code 21.400. The program carries out the enforcement of County Code 21.400, implementation of the County's Ambulance Service Plan Ordinance 1238, and the medical direction of all EMS providers within the county. MCEMS inspects and licenses all ambulances doing business in the County. This includes inspections and for-cause investigations related to the care and services performed by EMS providers. The EMS Medical Director provides medical direction to all EMS providers in the county. The program administers contracts related to the Ambulance Service Plan including: administration of the contract for on-line medical control with Oregon Health Sciences University (OHSU), providing medical consultation to EMS providers and managing patient distribution when the system's hospitals are stressed, and during multi-casualty emergencies and disaster; contracts that provide general fiscal support of 911 medical first response in the areas of the county without fire department coverage. MCEMS also operates a number of Quality Assurance groups to perform these functions. Program staff work with a number of entities who provide the EMS system services: the City of Portland Bureau of Emergency Communications (BOEC) who is the Primary Public Safety Answering Point for the geographic county, and serves as a consolidated communications center that triages and dispatches all resources to all 911 requests; the Port of Portland as the Secondary Public Safety Answer Point; Portland Fire and Rescue; Gresham Fire Department; Port of Portland Fire; Corbett Fire; Sauvie Island Fire; Scappoose; and Cascade Locks. All of these agencies provide 911 medical first response as well as other services as jurisdictional partners.

Equity Statement

MCEMS oversees 24/7 pre-hospital clinical care for all individuals within Multnomah County. We maintain system integrity through standardized protocols, joint training, and continuous quality improvement activities. The program cultivates a diverse workforce reflective of the communities served and uses all available data to identify and rectify inequities in service delivery based on key performance indicators.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$2,234,513	$1,094,233	$2,246,527	$1,169,951
Contractual Services	$481,401	$29,643	$511,818	$15,678
Materials & Supplies	$101,715	$6,433	$89,541	$12,550
Internal Services	$206,740	$324,013	$262,304	$288,694
Total GF/non-GF	**$3,024,369**	**$1,454,322**	**$3,110,190**	**$1,486,873**
Total Expenses:	**$4,478,691**		**$4,597,063**	
Program FTE	7.87	6.13	8.35	6.40
Program Revenues				
Fees, Permits & Charges	$3,029,606	$0	$3,022,716	$0
Intergovernmental	$0	$0	$0	$1,486,873
Other / Miscellaneous	$0	$1,454,322	$0	$0
Total Revenue	**$3,029,606**	**$1,454,322**	**$3,022,716**	**$1,486,873**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Comprehensive listing of all licensed EMS providers in the county receiving EMS medical direction from the County	1	1	1
EMS System Clinical Quality Improvement Committee meetings	10	10	10

Division: Health Officer

Program Characteristics: One-Time-Only Request

Program Description

State statute (ORS 682.062) directs counties to develop and maintain Ambulance Service Plans (ASP) for all areas within their jurisdiction. The ASP specifies the structure of the emergency medical services (EMS) system. Multnomah County is statutorily obligated to assess and revise its ASP when significant changes occur. Revisions to the ASP would lead to a procurement for the described services.

The County's ASP, last adopted in 2016, establishes one contracted emergency ambulance service provider. Persistent contract compliance issues, changes in the EMS landscape, and proposals to alter fundamental elements of the ASP necessitate a reassessment.

In 2024, the County EMS Program began a comprehensive ASP assessment. This work requires internal staff and an external consultant with EMS expertise. The assessment includes an in-depth review, stakeholder engagement with partners and providers, and recommendations. Policy recommendations were delivered in early FY26, with implementation of changes and procurement of updated services slated for FY27. Funding will be required in subsequent years to implement these changes.

Equity Statement

The revised Ambulance Service Plan is the guiding document that is legally required that describes the components of the Emergency Medical Services in the County. This system ensures pre-hospital ambulance services and medical care to everyone in the County.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$192,000	$0	$171,500	$0
Contractual Services	$208,000	$0	$190,500	$0
Total GF/non-GF	**$400,000**	**$0**	**$362,000**	**$0**
Total Expenses:	**$400,000**		**$362,000**	
Program FTE	1.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Recommended and revised Ambulance Service Plan based on recommendations for the EMS System Assessment and State required components of the plan	0	0	1
Procurement process of required updated services for implementation no later than August 30, 2028	0	0	1

Division: Health Officer

Program Characteristics:

Program Description

The Public Health Emergency Preparedness & Response (PHEPR) program coordinates and informs to ensure an equitable response to emergencies with severe health impacts, such as natural disasters, severe epidemics/pandemics, bioterrorism and terrorist attacks, and other incidents requiring coordinated action to: 1) focus the response on priority needs; and 2) effectively leverage resources of government, private healthcare providers, and non-profit organizations. PHEPR activities include:
1) Emergency plans and protocols linked to the County's Emergency Response Plan, specifically the Emergency Support Function-8 (ESF-8) Annex;
2) Coordinating with Health Department leadership, managers and supervisors, and incident management team members on training, preparedness, and response actions;
3) Participation in exercises to test and refine plans and capabilities and establish relationships with response partners; and
4) Plan development with responsible programs to increase capacity for key public health functions (e.g., epidemiology capacity to investigate and analyze an emergency's health impacts and make informed decisions on culturally and linguistically appropriate responses for impacted communities).

This program is funded through two federal grants that help the County meet Public Health Modernization goals for public health emergency preparedness and response. The program's staff member works collaboratively across the region and with the State to ensure effective, equitable, and coordinated public health preparedness and response.

Equity Statement

PHEPR coordinates with Health Department leadership to ensure all people in Multnomah County are considered and engaged in County plans, processes, and actions for responding to an emergency or disaster. Plans include using data to investigate and analyze an emergency's health impacts and make informed decisions on culturally and linguistically appropriate responses for impacted communities.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$24,593	$301,539	$0	$254,457
Materials & Supplies	$0	$8	$0	$0
Internal Services	$26,203	$52,774	$22,213	$38,010
Total GF/non-GF	**$50,796**	**$354,321**	**$22,213**	**$292,467**
Total Expenses:	**$405,117**		**$314,680**	
Program FTE	0.08	1.31	0.00	1.10
Program Revenues				
Intergovernmental	$0	$354,321	$0	$292,467
Total Revenue	**$0**	**$354,321**	**$0**	**$292,467**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of preparedness exercises in which program participates	2	2	2
Number of call down drills carried out with the County's registered Push Partners	2	2	2

Division: Health Officer

Program Characteristics:

Program Description

Multnomah County is required to perform death investigations, and those services are housed within the Health Department. The State Medical Examiner's Office (SMEO) is the lead agency for death investigations in Oregon operating within the Oregon State Police. The County Medical Examiner's Office (MEO) is responsible for investigating all deaths in the county, except natural deaths occurring directly under physician care after greater than 24 hours in a hospital or hospice setting. As most deaths investigated by the State and County Medical Examiner are sudden and unexpected, the MEO is in a unique position to identify unusual and emerging causes of death and injury, and to contribute to preventive public health interventions. While the SMEO is part of the Oregon State Police in a legally-focused investigative position, the County MEO is housed within the Health Department. This remains a close connection between public health, public safety and fatalities, and identification of the leading causes of death and prevention efforts.
MEO staff work directly with community/family members to investigate deaths that fall under County jurisdiction to provide support and crucial information regarding the cause and manner of death. The MEO 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 all impacted communities. Many of the individuals served are from under-resourced or marginalized populations and may lack consistent access to formal healthcare, including those experiencing mental health crises or substance use disorders. Deaths that occur under active medical care are not typically investigated by the MEO, which can result in these populations being disproportionately represented in MEO caseloads.

Equity Statement

Investigations conducted by the MEO provide critical data trends that shape the Department's work in addressing health inequities in preventable causes of death. This provides information to inform and shape programs for those experiencing chronic medical illnesses, homelessness, substance use disorder, mental health crisis, weather impacts like extreme heat and cold, gun violence, and traffic fatalities, among some of the more notably preventable causes of death.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$2,816,822	$0	$3,113,842	$0
Contractual Services	$94,627	$0	$97,750	$0
Materials & Supplies	$22,994	$0	$75,589	$0
Internal Services	$349,502	$0	$575,803	$0
Total GF/non-GF	**$3,283,945**	**$0**	**$3,862,984**	**$0**
Total Expenses:	**$3,283,945**		**$3,862,984**	
Program FTE	17.00	0.00	19.00	0.00
Program Revenues				
Fees, Permits & Charges	$0	$0	$0	$0
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of in-person scene responses, as required in ORS 146	1,331	1,650	1,550
Number of external exams performed, as dictated by State Medical Examiner	550	500	600

Public Health

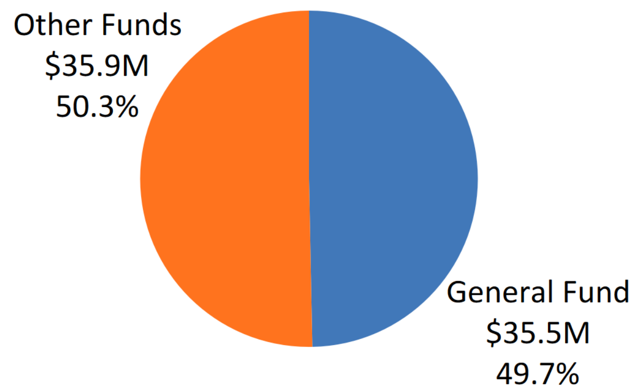
$71.4 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

250.24 FTE

(full time equivalent)



The Public Health Division carries out the unique governmental legal responsibilities under Multnomah County's Local Public Health Authority (LPHA). The Public Health Division protects the health of the public and reduces preventable deaths by:

- Investigating and responding to disease outbreaks, climate events, and other emergencies
- Supporting community health and wellness and increasing years of life
- Providing community-centered safety net services and serving those most impacted by inequities

The division works in partnership with the community across the following program areas:

- **Communicable Disease Services (40010A)** prevents the spread of reportable contagious diseases through epidemiology, disease investigation, and case management for tuberculosis, H5N1 (avian influenza), measles and other infectious diseases.
- **Environmental Health Services (40007, 40008, 40009, 40037)** protects the safety of residents by inspecting licensed facilities, including restaurants; controlling animals and insects that spread diseases; and addressing lead poisoning, air and water quality, climate change, and neighborhood/transportation design.
- **Epidemiology, Evaluation and Policy Research (40048)** collects and evaluates health data to improve programs, inform community planning and support policy development to promote healthy communities and reduce health differences and inequities.

- **HIV/STI Prevention and Harm Reduction (40010B, 40011, 40061)** provides culturally and community-specific clinical services for sexually transmitted infections including screening, testing, case management, harm reduction and treatments.
- **Parent, Child, and Family Health (40097A/B)** provides home visiting services, helps families navigate complicated healthcare systems, and implements focused strategies for pregnant people through Healthy Birth Initiatives (HBI) that address inequities in maternal and infant deaths. Other home visiting programs include Healthy Families, Home and Community Based Consultation through Multnomah Early Childhood Program in David Douglas School District, and Family Connects.
- **Prevention & Health Promotion (40006, 40053)** reduces the leading causes of preventable death from chronic diseases, overdose and violence by improving the neighborhoods people live in, implementing policies that keep kids safe and providing technical assistance to partners to limit known health harms in a variety of settings. Initiatives include chronic disease and violence prevention, promoting immunizations, enforcing tobacco regulations, youth tobacco and substance use prevention, and implementing the Overdose Prevention & Response Plan.
- **Women, Infants, and Children (40018 WIC)** increases access to nutritious foods and improves health outcomes for families with children five years of age and younger.
- **Public Health Administration (40096A, 40096B)** ensures the division's workforce has the knowledge and skills necessary to comply with funding requirements and implement and enforce federal, state or local public health laws and mandates.

The Public Health Division's programs and outcomes most specifically address **Focus Area 1: Support Community Health and Wellness** in the County's Strategic Plan.

Significant Division Changes

The Public Health Division was impacted by the loss of two federal grants mid-FY 2026. The resulting changes in appropriation were recognized in the state rebalance, including:

- A reduction of $222,222 from Centers for Disease Control and Prevention supplemental grant for Racial and Ethnic Approaches to Community Health (40053) intended to support community trusted messengers and vaccine ambassadors to promote immunizations.
- A reduction of $348,463 from the cancellation of the Bureau of Justice Assistance (BJA) STOP grant for Community and Adolescent Health (40060 in FY 2026). This grant served youth who are economically disadvantaged or at higher risk to become victims of gun violence.

Tobacco Retail Licensure (40006) - Increasing the tobacco retail licensing fee by $501, providing full cost recovery for the program. This reduced the County General Fund needs for this program.

Health Inspections & Education (40007) - New Oregon Pool/Spa Code became law in 2025. A 13% increase in state fees, and a transition to an online payment system have significantly increased credit card processing fees. These increased costs result in a 6.5% inspection fee increase. To contain costs and meet program needs, staffing has decreased by 1.00 FTE in Office Assistant Senior capacity and includes a new 1.00 FTE Finance Technician position. Changes also include reduced supervisory capacity by 0.75 FTE and increased Health Inspector capacity by 0.50 FTE. Revenue forecast was lowered, which led to further reduction of 0.80 FTE Office Assistant 2.

Communicable Disease Prevention & Control (40010A) - A net reduction of 2.00 FTE reduces program capacity to respond to communicable disease, but enhances our epidemiologic capacity in the program. The movement of the STI Disease Intervention Specialist (DIS) team back to **STI Clinical and Community Services (40010B)** is part of our clinical integration which retains core clinical services with some changes in service location across the STI clinic and the Harm Reduction Clinic. There will be limited capacity to back up our lab staff which means people may need to wait longer for results. The model will prioritize symptomatic and exposure evaluations and treatment, nPEP, PrEP, and specialized wound management under a leaner staffing structure. A 0.80 FTE Community Health Nurse will move from Harm Reduction (40061).

Women, Infants, Children (WIC) (40018) - Due to administrative efficiencies, there is a loss of 2.60 FTE (2.10 FTE Community Health Specialist 2 and 0.50 Program Specialist). With fewer staff working across screening, scheduling and breastfeeding support, there may be longer wait times to answer calls. Also, culturally specific breastfeeding classes may be larger due to fewer offerings

Epidemiology, Evaluation, & Policy Research (40048 EEPR) - (Formerly known as "Community Epidemiology.") To centralize epidemiologic and evaluation capacity, EEPR added 2.40 FTE from other division program offers: 1.50 FTE (1.00 FTE Research Evaluation Analyst 2 and 0.50 FTE Research Evaluation Scientist) moved from 40053, 0.90 FTE Epidemiologist Senior from 40037. 2.27 FTE were allocated to other program offers in the division to support funding epidemiology and evaluation services.

40053 Prevention & Health Promotion (40053) - $209,911 of opioid prevention funding moved from Public Health Office of the Director (40096A) adding a 0.90 FTE Project Manager, and $50,000 for strategic planning resources for Alzheimer’s. Moved two FTE (1.00 FTE Research Evaluation Analyst 2 and 1.00 FTE Research Evaluation Scientist) to Epidemiology, Evaluation, and Policy Research (40048). Three FTE (1.00 FTE Community Health Specialist, 1.00 FTE Program Specialist and 1.00 FTE Program Communication Specialist) are being reduced due to the conclusion of two Centers for Disease Control (CDC) grants. This will result in delays in getting health messages out to the community, and fewer opportunities for community members to get referrals to chronic disease self-management programs and other health promoting programs.

Harm Reduction (40061) - Elimination of mobile outreach services (5.00 FTE: 1.00 FTE Program Supervisor, 1.00 FTE Program Specialist, and 3.00 FTE Community Health Specialists). This will change the program's direct impact with mobile outreach. Staffing in the Department's Overdose Prevention and Response work will offset much of this loss by building capacity across other outreach teams to integrate lessons learned from the mobile outreach services. This will reduce total engagements from 54,590 to 50,700. Additionally, a 0.80 FTE Community Health Nurse will move to STI Clinical and Community Services (40010B).

Safe School Zones (40096B) - Upon adoption of the Safe School Zone resolution, this program offer with $159,800 of one-time-only funding creates the Safe School Zone program. The initiative will manage public and provider communications, complaints, and enforcement regarding authorized operating perimeters for mobile syringe exchange programs outside of designated school zones.

Parent Child Family Health (40097A) - Maintains services for families by combining client screening, eligibility, billing and clinical/community referral functions for all home visiting programs, rather than having these staff for each home visiting program. This change results in significant administrative efficiencies. Staff reductions total 5.00 FTE and include a 1.00 FTE Program Supervisor, 1.50 FTE Community Health Specialist 2, 1.00 FTE Office Assistant 2 and 1.00 FTE Program Specialist. Other fund reductions from the federal Health Resources and Services Administration (HRSA) and the Oregon Department of Early Learning and Childcare are adjustments made in a FY 2026 rebalance that will continue in FY 2027.

Parent Child Family Health (40097B) - Preschool for All, a program of Preschool & Early Learning Division, has allocated funding for an additional 1.20 FTE Community Health Nurse. The addition of these nurses will support the increased number of families participating in the program.

Public Health Outcomes

1. Multnomah County residents will experience a lower personal risk of infectious diseases, acute conditions, and public health emergencies through access to immediate response, treatment, and prevention services.

People who live in Multnomah County will be less likely to get seriously sick, to be harmed by sudden health issues, or to experience preventable emergencies because they can quickly access the help they need. Overall, the goal is to reduce individual health risks by making sure that people in Multnomah County can easily access effective public health and emergency services when needed.

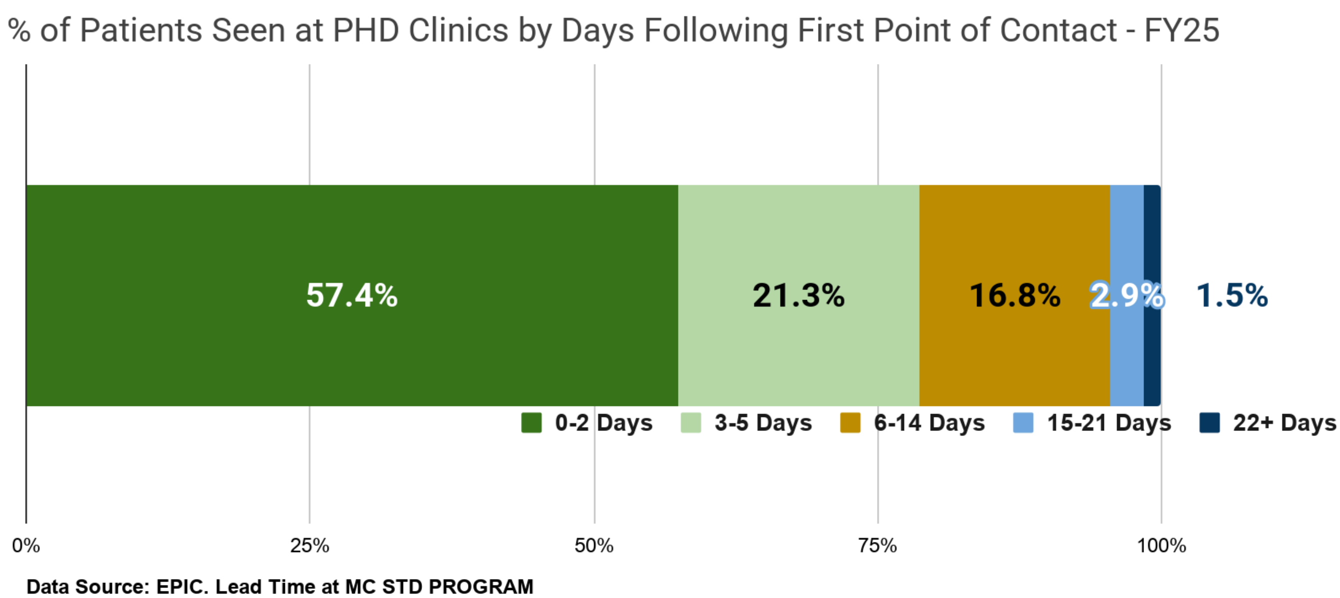
Key Performance Indicator (KPI) 1.1: Average wait time for a newly exposed or symptomatic patient to receive an appointment at Public Health Division clinics.

KPI 1.1 Description: This indicator addresses an operational standard for accessible, responsive, and equitable public health delivery. Reducing wait times for newly exposed or symptomatic individuals minimizes potential community transmission, ensures timely medical intervention, and directly reflects organizational efficiency and care quality during a critical public health event.

Importance - Quickly addressing people who have symptoms or who have been exposed narrows the window of time they are infectious and slows the spread of diseases in the community. Using express services for people without symptoms helps see a large number of people efficiently while keeping specialized resources for more complex needs.

National / Regional Standards - Centers for Disease Control and Prevention (CDC) and National Coalition of STD Directors (NCSD) protocols prioritize treating people with symptoms and people who have been exposed within the critical 48-72 hour window for the best clinical outcomes.

Definition of Success - We achieve success by ensuring that all projected 4,500+ individual services for FY 2026, including STI treatment and preventative care, are typically accessible within two to four business days.



FY 2026 Estimate: Average Wait Time: 4 Days	**FY 2027 Target:** Average Wait Time: 5 Days* *As a result of the upcoming budget reductions and reduced staffing, we expect an increase in average wait times.

KPI 1.1 Equity Considerations: The Public Health STI Clinic serves a diverse, high-priority demographic, primarily supporting uninsured and underinsured people who face significant barriers to traditional

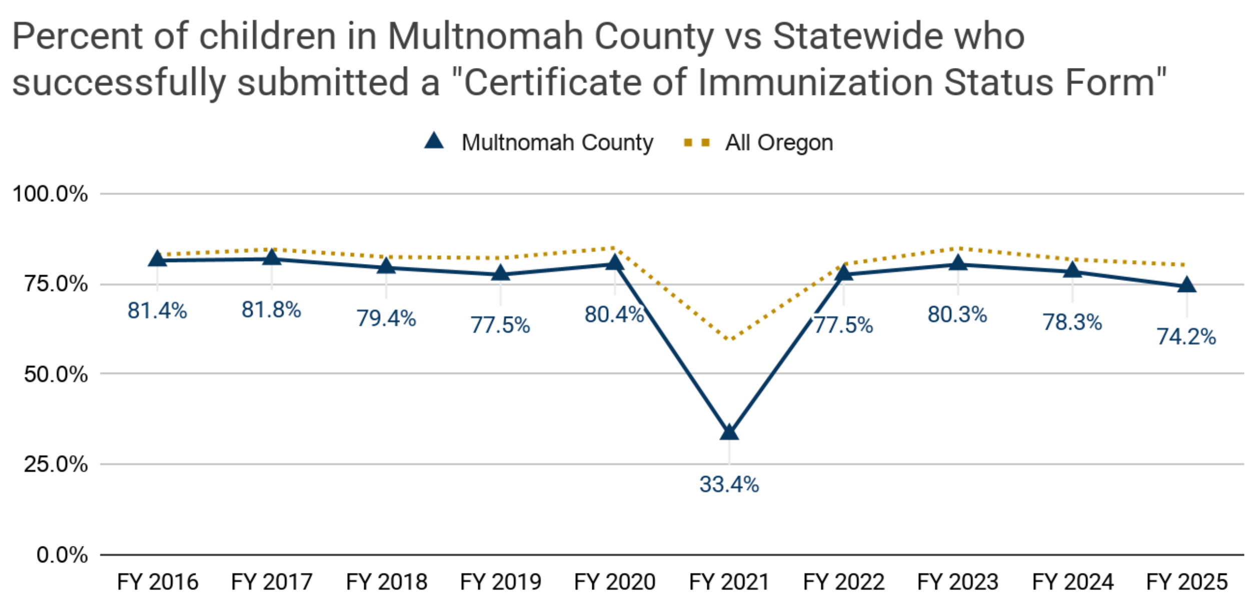
primary care. Services are tailored to reach high-risk and vulnerable populations in the settings they are in. This includes youth and communities disproportionately impacted by STI and HIV rates due to socioeconomic factors and those experiencing homelessness.

Key Performance Indicator (KPI) 1.2: Percent of children who receive a letter from the County about being behind on required immunizations who then successfully submit a completed "Certificate of Immunization Status Form" to their school within 21 days

KPI 1.2 Description: This indicator addresses a statutory requirement to uphold legal mandates concerning immunizations, a cornerstone of disease prevention and control. Compliance with health, wellness, and safety ordinances is a key indicator of trust.

National / Regional Standards - The statewide percentage of children who receive a letter from their county and successfully submit a completed "Certificate of Immunization Status Form" to their school within 21 days.

Population Served - All children and students attending a certified childcare, preschool, kindergarten, or school in Multnomah County (~109,000 children and students, attending ~750 schools and childcare providers).



Data Source: Oregon Health Authority IRIS (Immunization Information System Resources). Exclusions

FY 2026 Estimate: Successfully Submitted Immunization Forms: 75%	**FY 2027 Target:** Successfully Submitted Immunization Forms: 80%

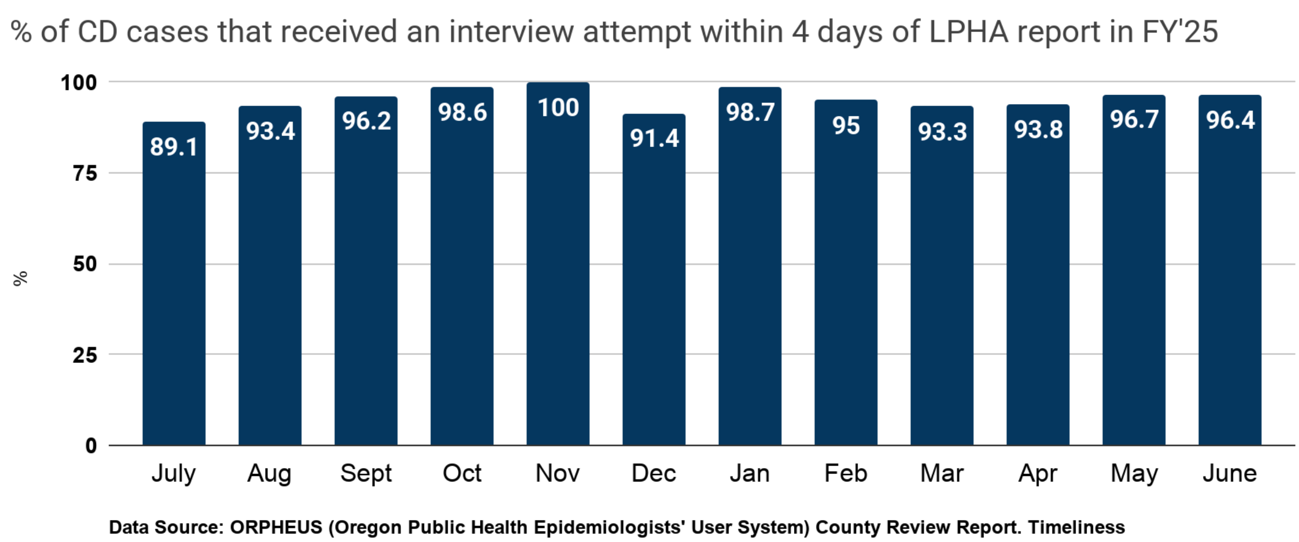
KPI 1.2 Equity Considerations: We look at racial and ethnic differences by using two analyses: the analysis of Oregon immunization registry data and analysis of public school data since school level exclusion data is unable to be broken down by individual level demographics.

Key Performance Indicator (KPI) 1.3: Percent of communicable disease cases that received an interview attempt within 4 days of the Local Public Health Authority (LPHA) report

KPI 1.3 Description: This metric is a triennial communicable disease review metric, required by the Oregon Health Authority (OHA). OHA requires that all Communicable Disease programs statewide are 80% compliant (or above).

Definition of Success - Exceed the OHA standard. As the most populated county in Oregon, with the greatest chance for communicable disease to spread, success for the division is defined as 95% of cases receiving an interview within four days following the report.

Population Served - The population served in this instance is anyone at risk of contracting a communicable disease within Multnomah County, which includes everyone in the county.



FY 2026 Estimate: Interview attempts within 4 days: 95%	**FY 2027 Target:** Interview attempts within 4 days: 96%

KPI 1.3 Equity Considerations: Race, Ethnicity, Language, and Disability (REALD) and Sexual Orientation and Gender Identity (SOGI) data is collected during the interview process. The state only reports statewide aggregate data for racial, ethnic, gender, and geographic inequities in communicable disease spread. County level data is not reported by the state.

Outcome 1 Program Offers

The following program offers contribute to Outcome 1. Division-specific administrative program offers are not included, as they support all outcome statements:

- 40010A - Communicable Disease Prevention and Control
- 40010B - STI Clinical and Community Services
- 40037 - Environmental Health Community Programs
- 40053 - Prevention and Health Promotion
- 40061 - Harm Reduction
- 40048 - Epidemiology, Evaluation, and Policy Research

2. People who spend time in Multnomah County restaurants, retail establishments, schools, and homes will have a lower risk of exposure to health hazards and infectious disease through inspections, licensing, and policies that promote health and prevent disease.

Key Performance Indicator (KPI) 2.1: Percent of inspections in which all violations were corrected within the required timeframe.

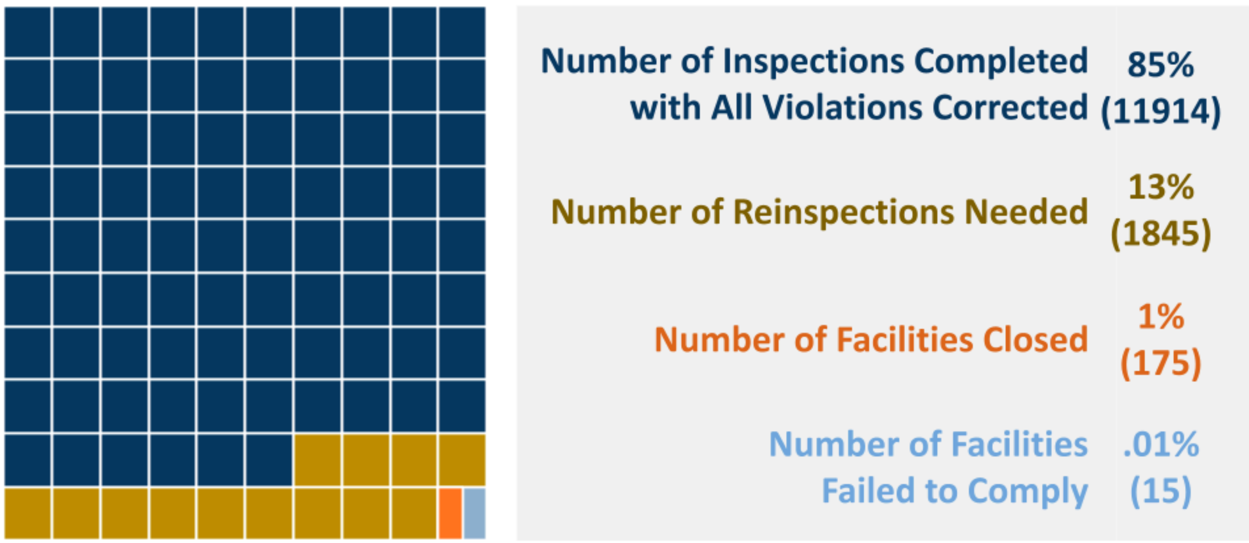
KPI 2.1 Description: Harmful germs can spread through both food and water. There is a direct link between uncorrected "priority" food violations and the number of emergency room visits and between a lower number of temperature violations (food preparation) and a lower number of salmonella and listeria cases. In swimming pools and spas, proper water chemistry results in fewer cases of cryptosporidium and giardia. Certain violations can be so dangerous they require the facility to stop operating until the violation is fixed. Correcting violations can stop outbreaks before they start.

National / Regional Standards - Health codes are modeled after the 2022 Food & Drug Administration (FDA) Food Code and the CDC Model Aquatic Health Code. both national standards for health & safety.

Definition of Success - 80% (or more) of inspections, in which at least one violation was found, resulting in the correction of all identified violations on-site, and not requiring closure or reinspections.

Population Served - Health codes and inspections serve the entire community, especially vulnerable people.

Health Inspections and Outcomes FY'25 (Total Inspections = 13,949)



Data Source: Health Inspections Health Space Database

FY 2026 Estimate: Inspections Resulting in All Violations Corrected: 80%	**FY 2027 Target:** Inspections Resulting in All Violations Corrected: 80%* *FY 2027 there are two new codes for food service and pools/spas. The goal is to keep our inspection results the same as FY 2026 with increased educational outreach.

KPI 2.1 Equity Considerations: Health codes are written to protect all including those who are not able to protect themselves. The result of these inspections is a healthier, more productive workforce, lower healthcare costs, and increased consumer trust in local hospitality and tourism businesses.

Food safety is a shared community responsibility that transcends language boundaries. A person's ability to safely handle food and make a living should not be dictated by their proficiency in English. To address this, we've added preferred language options to our Food Handler card website to better serve our diverse workforce.

Outcome 2 Program Offers

The following program offers contribute to Outcome 2. Division-specific administrative program offers are not included, as they support all outcome statements:

- 40006 - Tobacco Retail Licensing
- 40007 - Health Inspections and Education
- 40008 - Vector-Borne Disease Prevention and Code Enforcement
- 40037 - Environmental Health Community Programs
- 40053 - Prevention & Health Promotion

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3. Multnomah County residents will have increased access to safe and climate-resilient neighborhoods, nutritious foods, early childhood education, perinatal services, and lactation support.

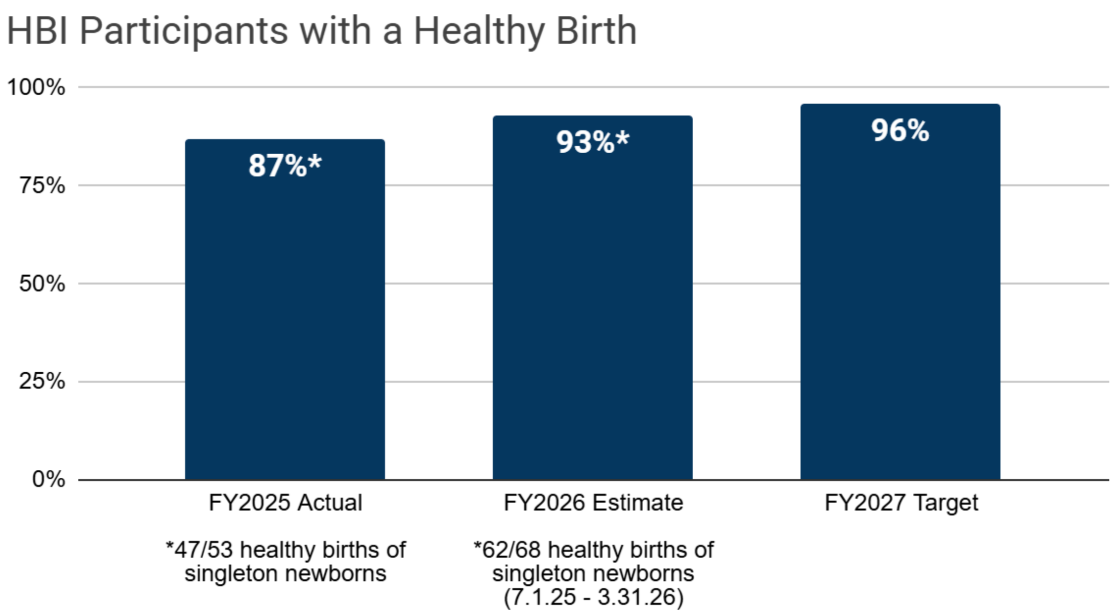
This outcome means that people in Multnomah County will have better access to the basic conditions that support healthy families and children, including safe places to live, healthy food, and strong wraparound support for the children that live in our community. These are key milestones to decreasing early preventable deaths from chronic diseases and injury.

Key Performance Indicator (KPI) 3.1: Percent of HBI participants who have a healthy birth outcome Success is a healthy birth outcome - delivering a baby at full-term and at a healthy birth weight.

KPI 3.1 Description: Rates of preterm birth (born too early) and low birth weight (born too small) have been rising steadily in Multnomah County since 2011. Significant inequities persist: Black and African American families experience higher infant mortality (deaths) and low birth weight than other communities. Black and African American mothers in Multnomah County have a healthy birth rate (healthy weight babies born at term) of 87% (OHA 2023). This is significantly lower than the healthy birth rate for all people who gave birth in Multnomah County in the same time period, which is 93%.

National / Regional Standards - Nationally, the leading causes of deaths between birth and 27 days among all races are low birth weight and birth defects. The Health Resources and Services Administration (HRSA) prioritizes areas of the country where low birth weight is 1.5 times the national average, or where pre-term rates are high. **Preterm Birth** is a live birth that occurs before 37 completed weeks of pregnancy. **Low Birth Weight (LBW)** is a birth weight less than <5 lbs 8 oz. **Infant Mortality** is death occurring within the first year of life.

Population Served - HBI provides services to those most at risk of inequities in perinatal birth outcomes. Birthing people from the African American or African immigrant and refugee communities in Multnomah County are eligible.



Source Data: Nurse-Family Partnership Database (Flo). Health Outcomes Report

FY 2026 Estimate: Successful birth outcomes for HBI participants: 93%* *As of 3/31/2026, 62 of the 68 births to HBI participants in FY 2026 have been healthy births	**FY 2027 Target:** Successful birth outcomes for HBI participants: 96%

KPI 3.1 Equity Considerations: Culturally-specific services for Black and African American families are especially beneficial for eliminating racial health inequities in maternal and infant illness and death (morbidity and mortality). Healthy Birth Initiatives participants have a lower rate of preterm birth than community members who do not participate in the program.

Outcome 3 Program Offers

The following program offers contribute to Outcome 3. Division-specific administrative program offers are not included, as they support all outcome statements:

- 40018 - Women, Infants, and Children (WIC)
- 40061 - Harm Reduction
- 40037 - Environmental Health Community Programs
- 40053 - Prevention and Health Promotion
- 40097A - Parent, Child, and Family Health Management

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	Total FTE
40006	Tobacco Retail Licensing		1,086,704	510,612	1,597,316	6.95
40007	Health Inspections and Education		8,234,578	39,891	8,274,469	38.35
40008	Vector-Borne Disease Prevention and Code Enforcement		2,186,846	0	2,186,846	8.75
40009	Vital Records		82,212	852,564	934,776	3.85
40010A	Communicable Disease Prevention and Control		1,913,478	2,840,544	4,754,022	17.22
40010B	STI Clinical and Community Services		2,076,800	2,499,970	4,576,770	18.19
40011	Services for Persons Living with HIV - Regional Education and Outreach		141,700	6,200,222	6,341,922	5.85
40018	Women, Infants, and Children (WIC)		4,007,917	4,396,797	8,404,714	44.30
40037	Environmental Health Community Programs		1,003,150	1,621,324	2,624,474	8.70
40048	Epidemiology, Evaluation, and Policy Research		1,878,259	1,712,093	3,590,352	12.31
40053	Prevention and Health Promotion		2,694,456	1,838,968	4,533,424	15.90
40061	Harm Reduction		2,264,723	1,522,331	3,787,054	10.91
40096A	Public Health Office of the Director		3,484,273	3,910,576	7,394,849	26.51
40096B	Safe School Zones Policy Enforcement	X	159,800	0	159,800	0.70
40097A	Parent, Child, and Family Health Management		4,240,114	7,704,825	11,944,939	30.55
40097B	Home and Community-Based Consulting		0	247,012	247,012	1.20
	Total Public Health		**35,455,010**	**35,897,729**	**71,352,739**	**250.24**

Division: Public Health

Program Characteristics:

Program Description

Tobacco use is the largest preventable cause of sickness and death in Multnomah County. While fewer people overall are smoking than in the past, many people still smoke and use tobacco and nicotine products, and certain groups—defined by race, age, ethnicity, education, and income—do so at higher rates than the population as a whole.

The Tobacco Retail Licensing Program works to prevent and reduce tobacco and nicotine use, access, and exposure for everyone. Our work includes: making it harder for youth to get tobacco; tracking data and evaluating our work; and recommending rules and policies (like tobacco retail licensing and restricting the sale of menthol and other flavored tobacco/nicotine products).

Tobacco retail licensing includes checking for store compliance annually; an additional annual inspection for enforcing minimum legal sales age rules; processing appeals; and providing training, outreach, and advice to retailers. We evaluate the tobacco licensing program every year to make sure the rules are applied fairly.

Equity Statement

Our immediate goals are to reduce or stop new and continued use among groups unfairly targeted by tobacco industry marketing and who suffer the highest rates of tobacco-related poor health outcomes: young people, American Indians/Alaska Natives, Black/African Americans, and the LGBTQI community.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$779,448	$359,328	$811,948	$389,028
Contractual Services	$8,776	$195,404	$8,775	$35,612
Materials & Supplies	$21,052	$22,397	$48,762	$2,456
Internal Services	$178,566	$127,387	$217,219	$83,516
Total GF/non-GF	**$987,842**	**$704,516**	**$1,086,704**	**$510,612**
Total Expenses:	**$1,692,358**		**$1,597,316**	
Program FTE	4.90	2.15	4.75	2.20
Program Revenues				
Fees, Permits & Charges	$738,588	$0	$1,086,704	$0
Intergovernmental	$0	$535,612	$0	$510,612
Beginning Working Capital	$0	$168,904	$0	$0
Total Revenue	**$738,588**	**$704,516**	**$1,086,704**	**$510,612**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of tobacco retail licenses issued	781	785	781
Number of retail inspections (regular, youth, and enforcement)	1,494	1,500	1,600

Division: Public Health

Program Characteristics:

Program Description

The Health Inspections and Education program works to eliminate the spread of illnesses by food and water. The program activities are required by law and paid for with fees from the facilities we inspect.
The program works with facility owners and staff to ensure safe food and water by:

- Training licensed facilities on State rules that keep people safe.
- Enforcing those rules through facility inspections.
- Providing food service workers with accessible training.
- Making workplaces safer and reducing accidental injuries.

The program also works to stop the spread of sicknesses carried by food and water by:

- Educating people on how to report illnesses or complaints.
- Investigating outbreaks of diseases that spread through food and water.
- Providing the Public Health Division with data to track communicable diseases.

We make facilities safer for visitors and reduce accidental injuries and illnesses. To do this we raise awareness:

- To help the general public to make safer food and water choices.
- To help facility operators and staff understand safety standards and inspections outcomes.

New facilities open, new employees are hired, and new regulations get enacted on an ongoing basis. This turnover demands an ongoing effort of training, oversight, and investigation to ensure safe food and water every hour of the day and every day of the year.

Equity Statement

The Health Inspections and Education program serves everyone in the county. We offer learning materials in 19 languages in our office, the field, and online. We make sure our efforts respect different cultures, empowering all facility operators to meet the highest safety standards.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$5,982,673	$31,472	$6,231,954	$32,661
Contractual Services	$514,919	$0	$613,900	$0
Materials & Supplies	$147,337	$1,585	$193,383	$2,439
Internal Services	$1,172,210	$4,935	$1,195,341	$4,791
Total GF/non-GF	**$7,817,139**	**$37,992**	**$8,234,578**	**$39,891**
Total Expenses:	**$7,855,131**		**$8,274,469**	
Program FTE	38.05	0.20	38.15	0.20
Program Revenues				
Fees, Permits & Charges	$7,833,551	$0	$8,236,354	$0
Intergovernmental	$0	$37,992	$0	$39,891
Total Revenue	**$7,833,551**	**$37,992**	**$8,236,354**	**$39,891**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of health violations cited in facilities	14,150	14,301	15,098
Number of facility licenses and food handlers’ cards issued	N/A	N/A	25,435

Division: Public Health

Program Characteristics:

Program Description

Vector Control and Code Enforcement protects people from diseases carried and spread by animals or insects. The program provides essential public health services required by law. We help reduce personal and community risk to vector-borne diseases.

- Disease Surveillance: Collect, monitor, and test mosquitos, rats, birds, and other animals for diseases that are harmful to humans.
- Mosquito Control: Use an Integrated Pest Management (IPM) program to cut down on the number of mosquito larvae. This lowers the risk of West Nile Virus and other mosquito-borne diseases. It also makes communities more livable.
- Rodent Inspections: The program responds to complaints from property owners and businesses. We offer onsite checks, information, advice, and free traps to manage rodents.
- Nuisance Code Enforcement: The program also enforces health-based nuisance codes. These include codes for keeping small livestock (chickens, pigs, bees), harboring mice and rats, and illegal dumping.
- Outreach and Education: We empower residents to take actions that keep their homes and communities safe. Our goal is a culture of sustained prevention against vector-borne diseases.
- Addressing Climate Change: Changing climate brings new weather patterns and shifting disease risks to our area. We identify new species and habitat conditions that change those risks and address them.

Equity Statement

Pests and the diseases they carry often impact certain communities the hardest. Our program uses local data to focus efforts on communities at highest risk and burden. We aim to fix long-standing gaps in service and prevent health crises before they start. Our goal is to make sure every resident is equally protected from vector-borne diseases.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,579,811	$0	$1,523,784	$0
Contractual Services	$84,434	$0	$98,397	$0
Materials & Supplies	$108,194	$0	$111,842	$0
Internal Services	$501,843	$0	$452,823	$0
Total GF/non-GF	**$2,274,282**	**$0**	**$2,186,846**	**$0**
Total Expenses:	**$2,274,282**		**$2,186,846**	
Program FTE	9.80	0.00	8.75	0.00
Program Revenues				
Service Charges	$343,441	$0	$275,629	$0
Total Revenue	**$343,441**	**$0**	**$275,629**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of Service Requests	808	900	785
Number of Mosquito Sites and Treated Areas	14,035	12,000	11,571

Division: Public Health

Program Characteristics:

Program Description

The Vital Records program issues birth and death certificates. We issue certificates for up to six months after a birth or death occurs within Multnomah County. This program is required by law and supported by fees set by the state.

Our services support every major life event that requires proof of who you are or that you are a citizen. These events include enrolling in school, obtaining a driver's license, getting a job, accessing social services, claiming inheritance, and voting in a way that is easy and secure.

The program works with local funeral homes, family members, and legal representatives to register certificate data accurately. The program's data provides reliable information for public health data analysis. It is used to identify trends, health impacts, and racial health inequities. This informs both public health prevention and intervention activities. The program shares summarized data with health officials, researchers, and policymakers.

The program makes sure all important information is correct and kept secure to ensure accurate data and prevent fraud and identity theft. This makes Multnomah County a trusted source for these services and data.

Equity Statement

Vital Records serves any and all people in the county who need a birth or death certificate. We ensure equitable access through language support, cultural awareness, and multi-language applications. We also offer online services for easy digital access.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$677,247	$0	$555,974
Contractual Services	$0	$39,857	$0	$37,200
Materials & Supplies	$0	$26,066	$0	$32,690
Internal Services	$151,390	$252,830	$82,212	$226,700
Total GF/non-GF	**$151,390**	**$996,000**	**$82,212**	**$852,564**
Total Expenses:	**$1,147,390**		**$934,776**	
Program FTE	0.00	5.32	0.00	3.85
Program Revenues				
Fees, Permits & Charges	$0	$996,000	$0	$852,564
Total Revenue	**$0**	**$996,000**	**$0**	**$852,564**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of death certificates issued	34,943	36,495	35,720
Number of birth certificates issued	4,627	5,262	4,945

Division: Public Health

Program Characteristics:

Program Description

Communicable diseases are illnesses caused by germs that spread from person to person. Communicable Disease Services (CDS) works to reduce the harm caused by communicable diseases in Multnomah County by stopping or slowing their spread. This communicable disease control is a key public health service that no one else can do. Oregon law requires that certain diseases get reported to public health officials. CDS gets these reports and follows state rules to respond.

CDS collects and studies data on diseases, investigates outbreaks, and uses specific actions to control the diseases. CDS shares important data with state and national health partners to track disease threats. This contributes to a global disease surveillance system. CDS is the only group in Multnomah County that can provide this information.
The Communicable Disease team investigates reported diseases. The team figures out what caused the illness and finds people and places that might have been exposed. They recommend actions to stop the disease from spreading. Actions can include isolation or quarantine, better infection control, health education, and behavior changes. The team responds to disease outbreaks in places like restaurants, nursing homes, schools/daycares, and shelters.
The Tuberculosis (TB) Case Management team checks on possible TB infections in the community. They make sure people diagnosed with TB disease stick to their treatment plans. Following state rules, they test people who have been near TB clients and offer treatment for Latent TB Infection (LTBI) if needed. The team also checks refugees arriving in the area for TB. The state and federal governments require this testing.

Equity Statement

We analyze data regularly to see if certain communities are hit harder by diseases. If data show inequities, we work with the community to figure out why and come up with plans to help.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$2,423,893	$1,933,009	$1,702,455	$1,721,256
Contractual Services	$47,627	$208,534	$46,821	$199,815
Materials & Supplies	$52,176	$86,493	$9,518	$75,692
Internal Services	$331,851	$1,340,809	$154,684	$843,781
Total GF/non-GF	**$2,855,547**	**$3,568,845**	**$1,913,478**	**$2,840,544**
Total Expenses:	**$6,424,392**		**$4,754,022**	
Program FTE	13.73	11.99	8.27	8.95
Program Revenues				
Intergovernmental	$0	$3,288,222	$0	$2,566,944
Other / Miscellaneous	$0	$255,623	$0	$265,305
Service Charges	$0	$25,000	$0	$8,295
Total Revenue	**$0**	**$3,568,845**	**$0**	**$2,840,544**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of disease reports investigated	3,425	2,700	2,700
Number of outbreaks identified	193	72	100

Division: Public Health

Program Characteristics:

Program Description

State law requires local health departments to protect the public from diseases spread from person to person through sexual activity and/or blood, and deaths due to drug overdose. In Multnomah County, the Sexually Transmitted Infection (STI) Clinical and Community Services program protects against these harms (along with Harm Reduction Services #40061A). The program aims to reduce the number of STI, HIV, and hepatitis C cases; reduce health inequities; and improve access to testing, treatment, and prevention services. Early prevention and treatment of STIs improves long-term health and prevents chronic diseases like HIV and liver disease. It also stops the spread of infections like syphilis to newborn babies during birth.

Disease Intervention Services (DIS) reduces the spread of STIs. Staff confidentially find people who have been exposed to STIs and connect them to timely treatment and care. STI Clinical Services use the most current medical practices to prevent and treat STIs. The STI Clinic can provide pre-exposure prophylaxis (PrEP), post-exposure prophylaxis using doxycycline (doxyPEP), and non-occupational post-exposure prophylaxis (nPEP) to prevent infection and lower the risk of chlamydia, gonorrhea, syphilis, HIV, and hepatitis C. Services are low barrier, non-judgmental, and culturally responsive. The STI Clinic shares data with epidemiologists, community members, and healthcare partners. Together, these partners identify trends in disease spread and develop community response plans. Harm reduction clinical services are integrated with the STI Clinic. Some diseases like HIV and hepatitis C can be spread through sexual activity and exposure to blood. Harm reduction services help stop the spread and severity of these diseases through treatment like proper wound care. The staff at both clinics also serve as experts for other health care providers in need of specialist advice for complex cases.

Equity Statement

The STI Clinical & Community Services advance health equity by providing accessible, culturally affirming STI services to communities disproportionately impacted by barriers to care like stigmatization, limited healthcare access, and unmet prevention needs. While STI services are essential for everyone, some communities face greater challenges accessing timely, confidential care.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$426,976	$1,242,323	$963,894	$2,091,794
Contractual Services	$184,203	$4,815	$172,608	$3,812
Materials & Supplies	$117,902	$19,282	$93,171	$79,533
Internal Services	$1,202,170	$194,797	$847,127	$324,831
Total GF/non-GF	**$1,931,251**	**$1,461,217**	**$2,076,800**	**$2,499,970**
Total Expenses:	**$3,392,468**		**$4,576,770**	
Program FTE	2.00	6.80	5.99	12.20
Program Revenues				
Intergovernmental	$0	$815,017	$0	$1,669,703
Other / Miscellaneous	$0	$200,000	$0	$179,508
Beginning Working Capital	$0	$0	$0	$417,500
Service Charges	$0	$446,200	$0	$233,259
Total Revenue	**$0**	**$1,461,217**	**$0**	**$2,499,970**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of syphilis and HIV case investigations	473 Interviewed	372 Interviewed	385 Interviewed
Number of STI encounters (outreach and clinic)	5,200	4,684	3,700

Division: Public Health

Program Characteristics:

Program Description

With access to good medical care and supportive services, people living with HIV can achieve viral suppression. This means the amount of virus in their body is so low they are healthy and cannot give the disease to others. The HIV Grant Administration and Planning (HGAP) program helps low-income people with HIV get successful treatment, leading to a better quality of life, greater health, longer life, and virtually no ability to spread HIV to others if they are virally suppressed. HGAP manages a six-county regional system, contracting with County programs and community groups to fund key services. These include:

- Healthcare: Provides coordinated medical, dental, mental health, and substance abuse treatment.
- Peer Support and Service Navigation: Identifies people living with HIV and links them to medical care.
- Service Coordination: Provides case management to connect clients with health insurance, housing, and other essential services critical to staying in care.
- Housing: Provides support to find and stay in housing so clients can stay in medical care and take their medications.
- Food: Offers group meals, home-delivered meals, and access to food pantries to reduce food insecurity.
- Planning: A community-based Planning Council (including ⅓ consumers) identifies service needs and allocates funding.

The program focuses on populations with lower viral suppression rates, including Blacks/African Americans, injection drug users, youth/young adults (ages 13-29), and people who are homeless/unstably housed.

Equity Statement

HGAP analyzes health data by demographics. This helps identify populations that are unfairly affected by HIV, experiencing worse health outcomes, and facing barriers to care. This data guides the allocation of resources, outreach, and quality improvement projects.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$32,885	$1,067,218	$37,207	$1,095,049
Contractual Services	$2,918	$5,067,056	$2,643	$4,898,261
Materials & Supplies	$556	$33,082	$1,575	$16,711
Internal Services	$107,315	$212,294	$100,275	$190,201
Total GF/non-GF	**$143,674**	**$6,379,650**	**$141,700**	**$6,200,222**
Total Expenses:	**$6,523,324**		**$6,341,922**	
Program FTE	0.20	6.05	0.20	5.65
Program Revenues				
Intergovernmental	$0	$6,379,650	$0	$6,200,222
Total Revenue	**$0**	**$6,379,650**	**$0**	**$6,200,222**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of unduplicated low-income HIV+ clients served (all service types/whole 6-county system)	3,034	3,042	3,050
Number of regional community contracts managed in compliance with federal Ryan White standards	8	8	9

Division: Public Health

Program Characteristics:

Program Description

The Women, Infants, and Children (WIC) program provides healthy food, nutrition education and counseling, growth monitoring, health screening, and breastfeeding support to eligible families. WIC serves income-eligible families, meeting the nutritional needs of pregnant people, babies, and young children. WIC aims to reach those most in need to have the greatest impact on the community's overall health, using nutrition science research and program data to inform services.

In 2025, WIC served 19,058 different people through over 53,000 unique visits. Participants received $8.7 million worth of healthy foods, helping with nutrition and food security and bringing economic value to the County. WIC services are offered at four clinic locations and some partner locations. International Board Certified Lactation Consultants provide in-clinic lactation support, including culturally specific lactation promotion across many County programs and with external partners. WIC's Breastfeeding Peer Counseling (BFPC) program serves an average of 1,158 participants a month. WIC staff provide key referrals to health care, education, child care, housing, food banks, and other County services. WIC leads in finding new ways to help and working across the region on health programming and equity. WIC surveys clients about their needs and works with community partners to respond. For example, WIC partnered with the Racial and Ethnic Approaches to Community Health (REACH) program to provide culturally specific cooking and nutrition classes for Black/African American/African Immigrant communities.

Equity Statement

To address significant nutrition-related health inequities, WIC prioritizes cultural and linguistic accessibility. WIC utilizes multilingual signage, interpretation services, and diverse staffing.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$2,571,830	$3,443,838	$2,943,318	$3,259,887
Contractual Services	$50,774	$48,322	$29,945	$16,362
Materials & Supplies	$117,027	$319,325	$41,658	$46,593
Internal Services	$799,977	$1,488,662	$992,996	$1,073,955
Total GF/non-GF	**$3,539,608**	**$5,300,147**	**$4,007,917**	**$4,396,797**
Total Expenses:	**$8,839,755**		**$8,404,714**	
Program FTE	20.33	26.37	21.41	22.89
Program Revenues				
Intergovernmental	$0	$4,688,819	$0	$4,396,797
Beginning Working Capital	$0	$611,328	$0	$0
Total Revenue	**$0**	**$5,300,147**	**$0**	**$4,396,797**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of WIC clients in one year who receive healthful foods	19,058	19,500	19,500
Number of nutrition education contacts with WIC families	53,429	57,000	57,000

Division: Public Health

Program Characteristics:

Program Description

Environmental Health Community Programs (EHCP) works to reduce exposure to environmental hazards and promote neighborhood wellbeing. The team fulfills state-required public health functions, including:

- Handling lead poisoning cases and investigating other environmental toxic exposures;
- Building resilience to the health impacts of climate change;
- Working with land use and transportation planners to ensure safe, healthy neighborhoods;
- Maintaining data on environmental hazards and monitoring related health conditions; and
- Providing actionable information to decisionmakers.

EHCP educates people on how to reduce risks from environmental dangers. The program also implements part of the Environmental Protection Agency (EPA) superfund clean-up at Portland Harbor, enforces the County’s wood smoke ordinance, responds to environmental emergencies, and prepares for future public health challenges. Collectively these activities:

- Reduce chronic disease,
- Improve birth outcomes,
- Avoid injury and neurological harm, and
- Increase social connections and wellbeing.

Equity Statement

EHCP is grounded in environmental justice. This means we address the uneven burden of pollution that falls on communities that experience racism and underinvestment. We partner with communities to understand needs and co-create solutions. We prioritize preventing illness and premature death among those most affected by environmental health inequities.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$940,861	$1,426,419	$676,237	$1,120,093
Contractual Services	$19,334	$650,285	$36,800	$293,238
Materials & Supplies	$73,723	$48,173	$14,751	$43,530
Internal Services	$898	$271,042	$275,362	$164,463
Total GF/non-GF	**$1,034,816**	**$2,395,919**	**$1,003,150**	**$1,621,324**
Total Expenses:	**$3,430,735**		**$2,624,474**	
Program FTE	5.38	8.20	3.15	5.55
Program Revenues				
Intergovernmental	$0	$2,395,919	$0	$1,611,324
Other / Miscellaneous	$0	$0	$0	$10,000
Total Revenue	**$0**	**$2,395,919**	**$0**	**$1,621,324**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of environmental investigations and violations	N/A	N/A	900
Number of community members receiving information on environmental threats (by event)	11,113,320	8,000,000	6,500,000

Division: Public Health

Program Characteristics:

Program Description

Epidemiology, Evaluation, and Policy Research (EEPR) (formerly Community Epidemiology Services and Program Design and Evaluation Services) collaborates with leadership, programs, and community partners to generate data for decision making. The goals are to ensure public health programs and policies are responsive to community needs, to improve health outcomes in the Multnomah County population, and to reduce health inequities. EEPR's services include:
1) Epidemiology and assessment: Gathering and reporting data on health outcomes for the leading causes of death, risk and protective factors, underlying determinants, inequities, and community priorities to inform interventions and to use for evaluating interventions. EEPR collaborates closely with epidemiologists in Communicable Disease Services.
2) Program evaluation: Supporting programs by conducting formative assessments to inform program design, monitoring what is working well and not working well, and conducting evaluations of program outcomes.
3) Policy research: Conducting literature reviews and formative research to inform policy agendas, collecting and analyzing existing local policies, and evaluating the effectiveness and unintended consequences of implemented policies.
4) Quality Improvement: Developing and maintaining a performance management system that uses process measures, evaluation results, and epidemiological outcomes to inform ongoing quality improvement at leadership and program levels.

EEPR generates products with findings in various formats (dashboards, presentations, briefs, reports, manuscripts) for diverse audiences, including leadership, programs, and community partners.

Equity Statement

EEPR makes disaggregated data available to reveal differences in health outcomes so that interventions are both responsive to community needs and get at the root cause of health inequities in the county. To help achieve this, EEPR involves community partners in project conception, data collection, analysis, meaning-making, and dissemination.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,367,292	$1,262,115	$1,605,799	$1,353,602
Contractual Services	$40,000	$524,358	$25,000	$0
Materials & Supplies	$71,064	$36,534	$107,878	$47,963
Internal Services	$142,634	$261,777	$139,582	$310,528
Total GF/non-GF	**$1,620,990**	**$2,084,784**	**$1,878,259**	**$1,712,093**
Total Expenses:	**$3,705,774**		**$3,590,352**	
Program FTE	6.13	6.26	6.90	5.41
Program Revenues				
Intergovernmental	$0	$1,655,784	$0	$1,662,093
Beginning Working Capital	$0	$429,000	$0	$50,000
Total Revenue	**$0**	**$2,084,784**	**$0**	**$1,712,093**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of dissemination products created for EEPR epidemiologic, evaluation, and policy research projects	61	65	55
Number of diseases, conditions, or determinants tracked and reported for Multnomah County	57	105	100

Division: Public Health

Program Characteristics: Backfill Other Funds

Program Description

Prevention & Health Promotion (PHP) seeks to improve population health in Multnomah County. This work focuses on improving health for large groups of people, rather than for individuals alone. PHP concentrates on lessening the impacts of the most common and most preventable causes of death and injury. Several programs comprise PHP. These include Community & Adolescent Health, Racial and Ethnic Approaches to Community Health (REACH), Community Immunization Program, and the Tobacco Control and Prevention and Education Program.

PHP envisions a safe, connected, and healthy Multnomah County. Staff work with communities to build environments that support health. These lasting improvements are called policy, systems, and environmental changes. PHP also strengthens connections between community and clinical settings. These changes help people adopt healthier behaviors and lifestyle choices across the lifespan. This work is guided by three core principles:
• Giving everyone a fair opportunity for health;
• Addressing underlying causes of problems; and
• Using data to inform decisions.
PHP works to promote health literacy, healthy nutrition, immunizations, physical activity, and social infrastructure. PHP works to reduce substance use, including opioids; preventable injury; and violence. Strategies focus on prevention of problems before they start. Key prevention activities include outreach and engagement, community campaigns, and health education. PHP builds community capacity to improve health and listens to community wisdom to guide its work.

Equity Statement

PHP works to reduce health inequities, or worse health outcomes that some groups of people experience compared to others. Data guides the identification of health inequities, and PHP centers its work on these communities most harmed by existing conditions. Communities and PHP work together to make lasting improvements through policy, systems, and environment changes. This approach is an evidence-based way to improve the overall health of a population.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$2,182,571	$1,357,865	$1,796,330	$1,095,267
Contractual Services	$81,244	$679,941	$124,552	$511,200
Materials & Supplies	$67,749	$132,767	$57,984	$69,829
Internal Services	$663,149	$228,785	$715,590	$162,672
Total GF/non-GF	**$2,994,713**	**$2,399,358**	**$2,694,456**	**$1,838,968**
Total Expenses:	**$5,394,071**		**$4,533,424**	
Program FTE	13.74	7.86	9.80	6.10
Program Revenues				
Intergovernmental	$0	$2,399,358	$0	$1,838,968
Total Revenue	**$0**	**$2,399,358**	**$0**	**$1,838,968**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of people reached through PHP community engagement activities/events	N/A	10,000	15,000
Number of children who received exclusion orders who provided vaccine documentation prior to Exclusion Day	5,000	5,000	4,750

Division: Public Health

Program Characteristics:

Program Description

State law requires local health departments to protect the public from certain health threats. Some of these threats are diseases spread from person to person through sexual activity and/or blood, and deaths due to drug overdose. In Multnomah County, Harm Reduction Services protect against these harms (along with STI Clinical and Community Services 40010B). The program aims to reduce the spread of disease related to drug use and reduce deaths due to drug overdose. By providing services and supplies that reduce the potential harms of use, Harm Reduction Services stop the spread of disease, improves the quality of life for people who use drugs and protects the health of the community at-large.

The program operates a Syringe Services Program which has several core elements. Staff provide trauma-informed counseling to reduce risk and provide culturally appropriate referrals. Staff deliver overdose prevention education and distribute naloxone and fentanyl test strips. To reduce the risk of HIV, hepatitis C, and bacterial infection, the program offers sterile injection supplies and used syringe takeback. The Harm Reduction Clinic provides low barrier wound and abscess care, testing and treatment for HIV and sexually transmitted infections, and pre-exposure prophylaxis (PrEP) for HIV in collaboration with the STI Clinic (40010B). Staff work with Corrections Health to support continuity of Medication Supported Recovery for individuals leaving Multnomah County jails. The program subcontracts with community-based providers to provide prevention services for priority populations. In FY27, dedicated harm reduction outreach services are eliminated from this program. The Health Department will advance a capacity-building strategy to integrate core harm reduction work into other existing outreach teams through Overdose Prevention & Response Plan work (40000B). Performance measures below reflect direct and subcontracted services.

Equity Statement

The Harm Reduction Program uses local public health data to prioritize serving communities most impacted by substance use. The overlapping determinants of health include race, housing status, and mental health. We leverage staff experience; culturally specific community partner relationships; and assertive, low barrier engagement tactics.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,790,840	$918,184	$1,133,192	$815,992
Contractual Services	$261,125	$355,693	$281,854	$355,693
Materials & Supplies	$620,453	$913,852	$328,026	$220,171
Internal Services	$389,967	$173,523	$521,651	$130,475
Total GF/non-GF	**$3,062,385**	**$2,361,252**	**$2,264,723**	**$1,522,331**
Total Expenses:	**$5,423,637**		**$3,787,054**	
Program FTE	11.80	5.53	6.44	4.47
Program Revenues				
Intergovernmental	$0	$1,511,299	$0	$1,522,331
Other / Miscellaneous	$0	$849,953	$0	$0
Beginning Working Capital	$0	$0	$0	$0
Total Revenue	**$0**	**$2,361,252**	**$0**	**$1,522,331**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of clients served	11,203	12,318	10,200
Number of engagements provided to clients who are living with or at risk for an STI or HIV	52,891	54,590	50,700

Division: Public Health

Program Characteristics:

Program Description

The Public Health Division (PHD) works every day to keep Multnomah County communities safe and healthy. The PHD Director's Office (DO) ensures our local public health system can do the work communities need most–equitably, effectively, and in partnership.

To do this, the PHD DO makes sure the workforce has the knowledge and experience to work with partners to meet the county's needs, enforce public health laws, and align with the Community Health Improvement Plan and County Strategic Plan. Specifically, the DO:
• Provides leadership and organizational guidance, stewardship of public funds, and accountability.
• Leads implementation of the Health Equity Action Plan (HEAP).
• Guides public health communication and health education campaigns.
• Develops public health policy recommendations that are evidence-based, grounded in law, and achieve health equity.
• Engage with and listen to the community to inform public health interventions.

The DO also implements the Public Health Infrastructure Grant, which supports workforce efforts in partnership with schools to address recruitment and retention efforts, updating the CHIP, and building public health accreditation readiness. The DO provides project management for emerging public health issues, statewide initiatives like Public Health Modernization, and quality improvement.

Equity Statement

The DO aims to build and maintain a competent, representative, and culturally responsive public health workforce. We partner with communities to understand needs and co-create solutions. The Multnomah County Public Health Advisory Board advises on public health practices to address the leading causes of death, to develop policy and system change, and to reduce health inequities.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$2,419,407	$1,825,853	$2,403,395	$2,881,118
Contractual Services	$156,242	$2,206	$300,000	$240,511
Materials & Supplies	$239,828	$4,451	$282,336	$56,506
Internal Services	$629,044	$336,264	$498,542	$732,441
Total GF/non-GF	**$3,444,521**	**$2,168,774**	**$3,484,273**	**$3,910,576**
Total Expenses:	**$5,613,295**		**$7,394,849**	
Program FTE	13.11	10.07	12.11	14.40
Program Revenues				
Intergovernmental	$0	$2,168,774	$0	$3,910,576
Total Revenue	**$0**	**$2,168,774**	**$0**	**$3,910,576**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of public health-related health education campaigns	N/A	N/A	12
To ensure financial accountability, number of reviews of all Public Health Division program offers at regular monthly, 6-month, and 12-month intervals	N/A	14	14

Division: Public Health

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

Program Description

Upon passage of the Safe Schools Zone Ordinance, the Public Health Division will set up a Safe School Zone program inclusive of communicating with the public and providers where mobile syringe exchange programs can operate outside of the safe school zone. The Division will set up a complaint system that will receive, monitor and track complaints 365 days a year. Staff will investigate and provide education and technical assistance to organizations operating mobile syringe exchange programs during county business hours (M-F).

Equity Statement

People who use drugs experience higher incidence of HIV than the general population and face many barriers to effective treatment and care. Data show we are serving people from the groups most impacted by fatal overdose. The safe school zones ordinance establishes an area where mobile syringe services can be provided to keep children from being exposed to used syringes near schools.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	$133,247	$0
Materials & Supplies	$0	$0	$26,553	$0
Total GF/non-GF	**$0**	**$0**	**$159,800**	**$0**
Total Expenses:	**$0**		**$159,800**	
Program FTE	0.00	0.00	0.70	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Percent of complaints investigated	N/A	N/A	100%
Percent of mobile syringe service programs receiving technical assistance following a validated complaint	N/A	N/A	100%

Division: Public Health

Program Characteristics:

Program Description

Parent Child Family Health (PCFH) supports families via home visits and case management. These services work to address the needs of pregnant and parenting families. Goals include promoting healthy pregnancy and postpartum periods, and mental health and wellness. Through these goals, PCFH prevents infant deaths, preterm births, and child abuse/neglect.

PCFH includes four programs. Healthy Birth Initiatives addresses health inequities in birth outcomes by providing culturally specific services for Black/African American families who are pregnant or parenting. Healthy Families provides child abuse prevention and promotion of positive parent-child interactions. Family Connects offers a home visit by a nurse to all birthing families in the postpartum period. Multnomah Early Childhood Program provides support for families with children who have special health needs. David Douglas School District and the Preschool for All program contract with the Multnomah Early Childhood Program to provide these services in the classroom setting and other community settings.

Families who participate in PCFH home visiting services are:
• More likely to be up-to-date on vaccinations on their child’s first birthday;
• More likely to meet breastfeeding/lactation goals at 6 months;
• More likely to complete their postpartum follow-up;
• More likely to have babies born with healthy weight, when enrolled prenatally; and
• More likely to be connected with mental health support services.

Equity Statement

Support before birth and in early childhood improves health across the lifespan. PCFH offers all families in Multnomah County some level of support during this time. PCFH provides additional support to communities experiencing unfair and preventable poor health. We prioritize our Black and African American communities in response to data showing they experience the most severe health inequities related to birth and early childhood. This approach improves the overall health of Multnomah County.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$2,601,133	$2,882,753	$1,841,797	$3,708,662
Contractual Services	$1,072,151	$4,244,189	$1,651,981	$2,835,794
Materials & Supplies	$149,320	$269,899	$147,477	$69,504
Internal Services	$772,380	$1,019,862	$598,859	$1,090,865
Total GF/non-GF	**$4,594,984**	**$8,416,703**	**$4,240,114**	**$7,704,825**
Total Expenses:	**$13,011,687**		**$11,944,939**	
Program FTE	16.13	16.37	10.05	20.50
Program Revenues				
Intergovernmental	$0	$6,328,377	$0	$6,206,673
Other / Miscellaneous	$0	$25,092	$0	$29,403
Beginning Working Capital	$0	$400,000	$0	$0
Service Charges	$0	$1,663,234	$0	$1,468,749
Total Revenue	**$0**	**$8,416,703**	**$0**	**$7,704,825**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of families served by PCFH programs - Healthy Birth Initiatives, Healthy Families, Multnomah Early Childhood Program, and Family Connects	2,369	2,260	2,542
Number of visits completed by PCFH programs - Healthy Birth Initiatives, Healthy Families, Multnomah Early Childhood Program, and Family Connects	17,515	14,820	15,220

Division: Public Health

Program Characteristics:

Program Description

Parent Child Family Health (PCFH) supports families via home visits and case management. These services work to address the needs of pregnant and parenting families. Goals include promoting healthy pregnancy and postpartum periods, and mental health and wellness. Through these goals, PCFH prevents infant deaths, preterm births, and child abuse/neglect.

Multnomah Early Childhood Program (MECP) provides support for families with children who have special health needs. David Douglas School District and the Preschool for All program contract with the Multnomah Early Childhood Program to provide these services in the classroom setting and other community settings.

Families who participate in MECP services are:

- More likely to participate in early childhood education programs;
- More likely to experience a teacher better trained to support children with special needs;
- More likely to experience support in implementing their Individualized Family Service Plan;
- More likely to be connected with mental health support services;
- More likely to be prepared for Kindergarten.

Equity Statement

Support before birth and in early childhood improves health across the lifespan. PCFH offers all families in Multnomah County some level of support during this time. MECP provides support to families experiencing limited access to early learning for children with special needs. MECP works with preschools and other community settings to ensure all children can be successful in school and ready to learn. This approach improves the overall health of Multnomah County.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	$0	$218,849
Materials & Supplies	$0	$0	$0	$20,000
Internal Services	$0	$0	$0	$8,163
Total GF/non-GF	**$0**	**$0**	**$0**	**$247,012**
Total Expenses:	**$0**		**$247,012**	
Program FTE	0.00	0.00	0.00	1.20
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Numbers of families served by Multnomah Early Childhood Program	2,115	2,250	3,000
Number of visits completed by Multnomah Early Childhood Program	2,540	2,800	3,500

Integrated Clinical Services

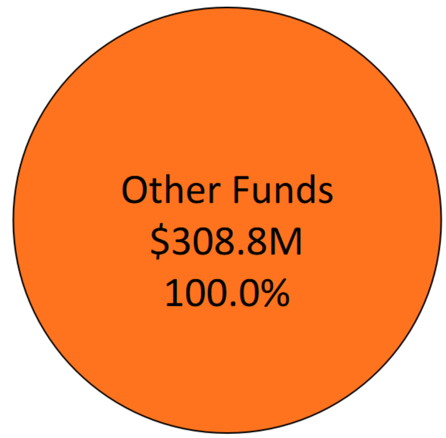
$308.8 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

727.72 FTE

(full time equivalent)



Multnomah County’s Community Health Center provides comprehensive primary care, integrated behavioral health, dental, pharmacy, and wraparound services across eighteen sites, including student health centers and a mobile van, to communities across Multnomah County. The Health Center services include highly specified care for people 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 or ability to pay. Our Health Center prioritizes culturally and linguistically appropriate care, supporting clients in a way that works for them. In the calendar year 2025, the Health Center served 60,201 unique clients with a focus on people who otherwise have limited access to healthcare. The Health Center client demographics reflect Multnomah County's diverse population and especially represent under-resourced and marginalized communities that experience structural barriers to healthcare. The vast majority of clients (96%) in 2025 had an income at or below 200% of the federal poverty level (FPL), and 76% had an income at or below 100% FPL. All programs within the Health Center are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

The partnerships, programs, and services of the Integrated Clinical Services Division/Community Health Center directly support the Health Department’s aim of reducing preventable deaths by providing high quality integrated health care. The Community Health Center also supports the focus areas and outcomes outlined in the County’s Strategic Plan. The division’s work is most specifically in alignment with **Focus Area 1: Support Community Health and Wellness.**

Significant Division Changes

In FY 2027, the Health Center anticipates negative impacts due to Federal House Resolution 1 (H.R.1) that enacts significant cuts to Medicaid spending. Reduced state and federal funding, combined with Medicaid policy shifts like changes to how often people must reapply for assistance and work requirements to get assistance, are expected to increase the rate of uninsured clients. Furthermore, Coordinated Care Organizations (CCOs) will have fewer quality incentive dollars for the Health Center to earn, and projected changes to the 340B drug pricing program will lead to a decrease in pharmacy revenue[1]. These challenges are compounded by rising personnel, internal services, and indirect rate costs that exceed revenue growth.

The Health Center's budget preserves patient access and prioritizes investments in patient care, ensuring we protect the Health Center's core purpose—patient care. The budget reflects difficult, but necessary, reductions. In an effort to preserve patient care roles when possible, our reductions included vacant roles that had not been filled for over 12 months and some filled central administrative roles. A reduction of 19.10 FTE, occurred across all program offers. When additions are factored in, the net FTE change is an increase of 1.19 FTE.

Integrated Clinical Services Outcomes

1. Residents in Multnomah County living on low incomes will have increased access to a medical home model that includes primary care, integrated behavioral health services, dental, and pharmacy services.

The Community Health Center will provide increased access to the services offered in a medical home model. This would mean that community members will see an increase in available new and existing patient appointments.

Key Performance Indicator (KPI) 1.1: Completed patient visits

KPI 1.1 Description: Encounters are completed visits for patients under primary care, student health, and dental services regardless of reimbursement models. Access to services in integrated behavioral health are documented in this data as a primary care service.

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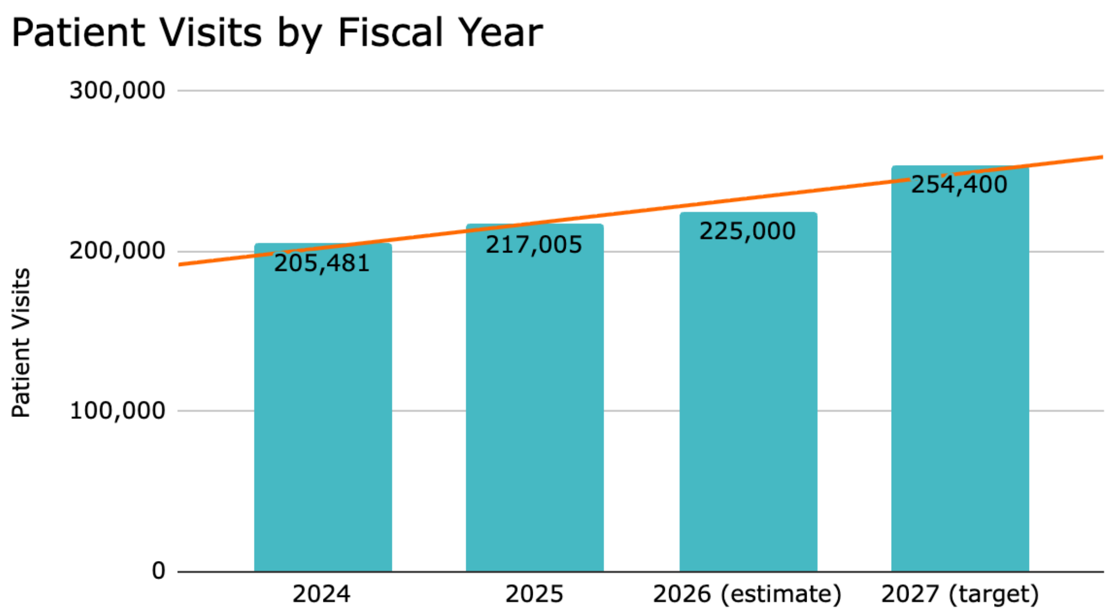
[1] The 340B Program refers to a federal drug access program which helps improve access to medication for people who are low income and/or underinsured. The Community Health Center is a 340B Covered Entity and participates in the 340B program to assure clients can access pharmacy services and medications. Proposed changes to the 340B Program will increase drug acquisition costs for the Community Health Center, which reduces financial assistance to clients.



FY 2026 Estimate: 225,000 Completed patient visits	**FY 2027 Target:** 254,400 Completed patient visits

KPI 1.1 Equity Considerations: The Community Health Center's vision is to ensure care is tailored to each individual's needs and that they receive reliable, inclusive, and high-quality healthcare. This work is carried out by a workforce that has unique skills and experiences to serve the diversity of our communities and by reducing the financial, administrative, language, and social barriers that contribute to health inequities.

Outcome 1 Program Offers The following program offers contribute to Outcome 1.

- 40017 - FQHC-Dental Services
- 40019 - FQHC-North Portland Health Clinic
- 40020 - FQHC-Northeast Health Clinic
- 40022 - FQHC-Mid County Health Clinic
- 40023 - FQHC-East County Health Clinic
- 40024 - FQHC-Student Health Center
- 40026 - FQHC-Fernhill Health Center
- 40027 - FQHC-Southeast Health Clinic
- 40029 - FQHC-Rockwood Community Health Clinic
- 40031 - FQHC-Pharmacy

2. Through the Health Center workforce development programs, community members, including current staff and clients, will have access and opportunities to advance their careers and further their education in healthcare.

Key Performance Indicator (KPI) 2.1: Workforce development placements in the Health Center

KPI 2.1 Description: These are the number of filled workforce development, training, and student rotation roles offered through the community health center. Increased participation in these roles show an ongoing interest in healthcare careers, especially under a team-based care and the community health center model. Opportunities are offered in the following areas:

- Primary care through the Advanced Practice Clinician (APC) Fellowship
- Dental pathways through endodontic and other specialty students, Dentist Students, and Dental Hygiene Student Rotations

FY 2026 Estimate: 100% of positions filled with staff graduating programs in FY 2026 Positions for FY 2026 include six employees in the APC Fellowship program and six in Dental Pathways.	**FY 2027 Target:** 100% of positions filled with staff progressing towards completion or having graduated the program Positions for FY 2027 include five employees in the APC fellowship program and six in Dental Pathways

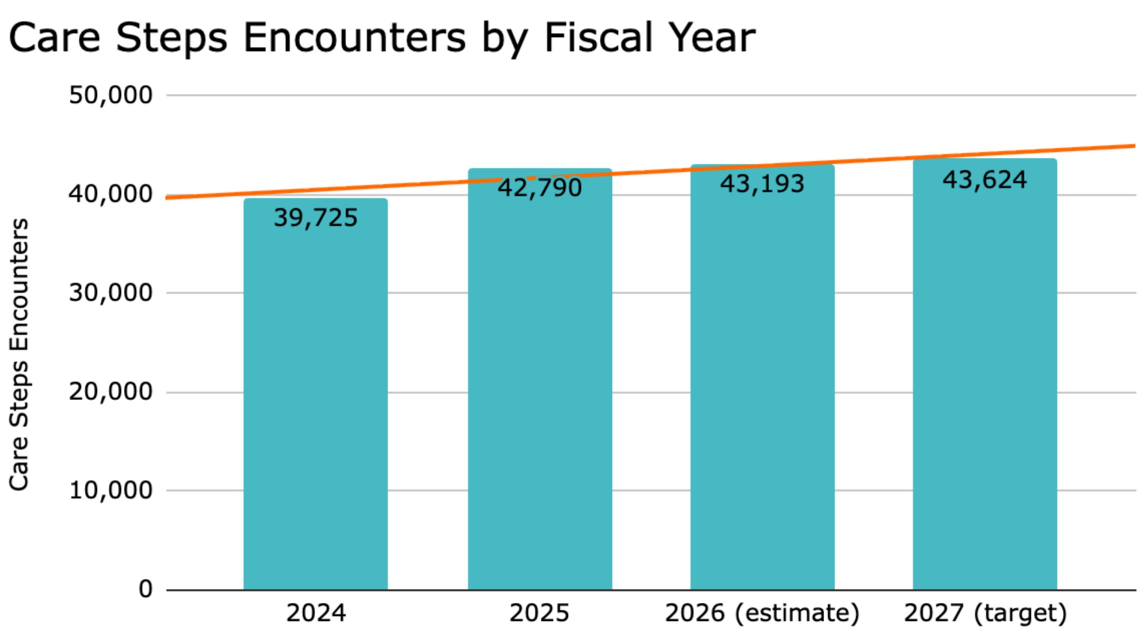
Outcome 2 Program Offers

The following program offers contribute to Outcome 2. Division-specific administrative program offers are not included, as they support all outcome statements:

- 40017 - FQHC-Dental Services
- 40019 - FQHC-North Portland Health Clinic
- 40020 - FQHC-Northeast Health Clinic
- 40022 - FQHC-Mid County Health Clinic
- 40023 - FQHC-East County Health Clinic
- 40029 - FQHC-Rockwood Community Health Clinic

3. Clients of the Health Center have increased support for wrap-around and navigation services, including standard screening for social drivers of health (e.g., economic stability, housing, food insecurity, etc.) with referral for services and support, insurance enrollment assistance, phone navigation, and intensive care management for patients at high and rising risk.

Key Performance Indicator (KPI) 3.1: Community Health Center Patient Care Steps are documented interactions between staff and clients. These steps track a patient's ongoing needs, such as finding community resources, addressing social factors that affect health, coordinating medical care, and providing health education. This model is unique to Oregon and is recognized by the Oregon Health Authority (OHA). It is specifically designed for Community Health Centers participating in Alternative Payment Methodologies (APM). Unlike the traditional "fee-for-service" model—where providers bill for every individual appointment or procedure—the APM model rewards high-quality, cost-efficient care. Under APM, health centers are reimbursed for managing a patient's overall health over time, focusing on long-term improvements in health outcomes rather than the volume of services provided.



FY 2026 Estimate: 43,193 Care Steps encounters	**FY 2027 Target:** 43,624 Care Steps encounters

Outcome 3 Program Offers The following program offers contribute to Outcome 3.

- 40102 - FQHC Allied Health
- 40034A - FQHC Administration and Operations
- 40033 - FQHC Primary Care and Dental Access and Referral

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	Total FTE
40012	FQHC-HIV Clinical Services		0	10,018,216	10,018,216	38.40
40016	FQHC-Medicaid/Medicare Eligibility		0	3,289,900	3,289,900	18.00
40017	FQHC-Dental Services		0	33,132,918	33,132,918	129.64
40019	FQHC-North Portland Health Clinic		0	8,066,212	8,066,212	28.40
40020	FQHC-Northeast Health Clinic		0	9,283,398	9,283,398	31.55
40022	FQHC-Mid County Health Clinic		0	17,214,721	17,214,721	58.90
40023	FQHC-East County Health Clinic		0	15,431,093	15,431,093	49.90
40024	FQHC-Student Health Centers		0	9,857,645	9,857,645	36.35
40026	FQHC-Fernhill Health Center		0	4,922,747	4,922,747	17.68
40027	FQHC-Southeast Health Clinic		0	8,418,271	8,418,271	30.70
40029	FQHC-Rockwood Community Health Clinic		0	8,767,833	8,767,833	31.00
40030	FQHC-Medical Director		0	1,870,756	1,870,756	2.80
40031	FQHC-Pharmacy		0	41,387,927	41,387,927	54.50
40032	FQHC-Lab and Medical Records		0	5,094,927	5,094,927	22.80
40033	FQHC-Primary Care and Dental Access and Referral		0	10,474,589	10,474,589	59.80
40034A	FQHC-Administration and Operations		0	12,696,173	12,696,173	45.40
40034B	FQHC - Contingency and Reserves		0	89,499,177	89,499,177	0.00
40036	FQHC-Community Health Council and Civic Governance		0	462,029	462,029	1.00
40102	FQHC Allied Health		0	9,153,028	9,153,028	42.45
40103	FQHC-Quality Assurance		0	9,780,909	9,780,909	28.45
	Total Integrated Clinical Services		**0**	**308,822,469**	**308,822,469**	**727.72**

Division: Integrated Clinical Services

Program Characteristics:

Program Description

This program offer funds the HIV Health Services Center (HHSC), one of few Ryan White HIV clinics in Oregon. The clinic offers culturally specific LGBTQI HIV/Hepatitis C outpatient medical care, mental health services, case management, health education, HIV prevention, art therapy, anal cancer screening and treatment, support for those experiencing intimate partner violence, 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, and in-person visits in coordination with field services provided by our navigation and 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 service 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 Federally Qualified Health Centers caring for clients living with HIV. The clinic provides a monthly Nursing Community of Practice webinar for the Mountain West region to address current HIV nursing-related best practices including Rapid Start and other evolving care standards.

Equity Statement

The Multnomah County Community Health Center's vision is to ensure all people in our community receive reliable, inclusive, and high-quality healthcare. We do this with a workforce that reflects the diversity of our communities and by reducing the financial, administrative, language, and social barriers that contribute to health inequities. Our core values emphasize providing care that is tailored to each individual's needs and centered on equity and measurable health outcomes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$6,581,005	$0	$7,395,196
Contractual Services	$0	$269,318	$0	$153,603
Materials & Supplies	$0	$1,323,489	$0	$541,394
Internal Services	$0	$1,820,756	$0	$1,928,023
Total GF/non-GF	**$0**	**$9,994,568**	**$0**	**$10,018,216**
Total Expenses:	**$9,994,568**		**$10,018,216**	
Program FTE	0.00	37.30	0.00	38.40
Program Revenues				
Intergovernmental	$0	$3,316,998	$0	$3,422,818
Beginning Working Capital	$0	$1,739,492	$0	$1,739,492
Service Charges	$0	$4,938,078	$0	$4,855,906
Total Revenue	**$0**	**$9,994,568**	**$0**	**$10,018,216**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of unduplicated HIV clinic patients.	1,512	1,575	1,625
Percent of patients whose last viral load test is below 200 copies.	90%	90%	91%

Division: Integrated Clinical Services

Program Characteristics:

Program Description

This program offer funds Medicaid enrollment to help Oregonians get the healthcare they need. We help uninsured and under-insured Oregonians sign up for state and federal medical and dental insurance coverage as well as other types of medical assistance programs. Patients unable to obtain insurance coverage are screened for the health center sliding fee discounts to make visits more affordable. Last year, our staff connected with patients 21,823 times and helped over 2,000 people enroll in the Oregon Health Plan (OHP). Connecting with patients is known as patient contacts. We monitor this data to ensure we are working to provide the type and volume of support needed. Patient contact activities include but are not limited to are:

-Following up on submitted applications.

-Answering complex insurance questions.

-Helping submit the correct necessary data to ensure eligibility for insurance coverage is accurate and that insurance coverage is not lost due to missing or incorrect data during insurance redetermination periods.

-Outreach and education aimed at increasing the number of patients who complete the OHP enrollment process, remain insured when eligible, and have an understanding of important topics such as what it means to receive care by providers that are in network or contracted to accept the patient’s insurance type.

96% of patients seen at the Multnomah County Community Health Center in 2025 had an income at or below 200% of the federal poverty limit, including 76% of patients who had an income at or below 100% of the federal poverty level.

Equity Statement

The Multnomah County Community Health Center’s vision is to ensure all people in our community receive reliable, inclusive, and high-quality healthcare. We do this with a workforce that reflects the diversity of our communities and by reducing the financial, administrative, language, and social barriers that contribute to health inequities. Our core values emphasize providing care that is tailored to each individual's needs and centered on equity and measurable health outcomes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$2,396,460	$0	$2,387,739
Contractual Services	$0	$18,000	$0	$9,000
Materials & Supplies	$0	$14,741	$0	$15,940
Internal Services	$0	$856,866	$0	$877,221
Total GF/non-GF	**$0**	**$3,286,067**	**$0**	**$3,289,900**
Total Expenses:	**$3,286,067**		**$3,289,900**	
Program FTE	0.00	19.00	0.00	18.00
Program Revenues				
Service Charges	$0	$3,286,067	$0	$3,289,900
Total Revenue	**$0**	**$3,286,067**	**$0**	**$3,289,900**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Annual number of patients screened.	21,823	23,880	24,000
Percent of Self Pay patient visits enrolled in care at Health Center (target adjusted related to Medicaid policy changes that will increase the number of uninsured visits	3.5%	3.8%	13.26%

Division: Integrated Clinical Services

Program Characteristics:

Program Description

Dental services are a vital program addressing the needs of the poorest and most vulnerable in Multnomah County through education, prevention, and treatment. This program offer funds seven dental clinics that deliver comprehensive and urgent dental treatment for both Medicaid and self-pay patients, with a special emphasis on children and clients with risk factors such as diabetes. Clinics proactively reach out to clients who have not had a visit in the past 12-24 months.

The School and Community Oral Health Program delivers dental education and sealant services to children in Multnomah County schools. The program's Baby Days offer outreach, education, and dental treatment for children aged 0-36 months, ensuring that families are part of oral health treatment.

The program also mentors and trains dental assistants, dental hygiene students, and dental students and residents. These individuals offer services under the guidance of our providers and contribute to the development of a workforce that is passionate about public healthcare. In FY 2027, the dental program will continue its internal workforce development initiative, encouraging and supporting individuals from the communities we serve to become dental assistants in our clinic system.

Our commitment to meeting care metrics benefits the community, ensures quality care, and maintains a sound financial outlook. The Dental Program remains dedicated to finding efficient, evidence-based means to deliver high-quality oral healthcare services to a broad audience.

Equity Statement

The Multnomah County Community Health Center’s vision is to ensure all people in our community receive reliable, inclusive, and high-quality healthcare. We do this with a workforce that reflects the diversity of our communities and by reducing the financial, administrative, language, and social barriers that contribute to health inequities. Our core values emphasize providing care that is tailored to each individual's needs and centered on equity and measurable health outcomes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$23,300,959	$0	$23,110,331
Contractual Services	$0	$1,005,735	$0	$339,067
Materials & Supplies	$0	$1,939,290	$0	$1,749,435
Internal Services	$0	$7,733,988	$0	$7,934,085
Total GF/non-GF	**$0**	**$33,979,972**	**$0**	**$33,132,918**
Total Expenses:	**$33,979,972**		**$33,132,918**	
Program FTE	0.00	123.99	0.00	129.64
Program Revenues				
Intergovernmental	$0	$312,000	$0	$312,000
Other / Miscellaneous	$0	$2,541,371	$0	$0
Beginning Working Capital	$0	$6,080,499	$0	$4,582,456
Service Charges	$0	$25,046,102	$0	$28,238,462
Total Revenue	**$0**	**$33,979,972**	**$0**	**$33,132,918**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Total patient visits	59,745	64,694	72,666
Number of program staff positions designated to provide paid on-the-job learning to people enrolled in education programs	5	6	6

Division: Integrated Clinical Services

Program Characteristics:

Program Description

This program offer funds the North Portland Health Center (NPHC), which is a designated Patient-Centered Medical Home. This model of primary care includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services, and collaboration with community partners. We provide comprehensive, culturally appropriate services to keep our community healthy. Services include but are not limited to:
-Primary care services including treatment of acute and chronic illnesses, behavioral health, drug and alcohol treatment, family planning, prenatal and preventive services (well-child visits, immunizations), acupuncture, and community health education.
-Community pharmacy and lab services.
-Clinical pharmacists who assist clients and providers with medication management and adherence support, conduct medication reconciliation upon hospital discharge, and independently manage ongoing medical conditions such as diabetes and high blood pressure.
-Enabling services including Medicaid eligibility screening, medical interpretation, transportation, case management, and health education.
In calendar year 2025, the Multnomah County Community Health Center collectively served more than 60,200 patients whose demographics reflected Multnomah County's diverse population and especially represented under-resourced and marginalized communities that experience structural barriers to healthcare. For example, 96% of patients had an income at or below 200% of the federal poverty level (FPL), including 76% of patients who had an income at or below 100% FPL.

Equity Statement

The Multnomah County Community Health Center’s vision is to ensure all people in our community receive reliable, inclusive, and high-quality healthcare. We do this with a workforce that reflects the diversity of our communities and by reducing the financial, administrative, language, and social barriers that contribute to health inequities. Our core values emphasize providing care that is tailored to each individual's needs and centered on equity and measurable health outcomes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$5,547,556	$0	$5,632,603
Contractual Services	$0	$122,693	$0	$150,000
Materials & Supplies	$0	$185,438	$0	$353,153
Internal Services	$0	$1,875,889	$0	$1,930,456
Total GF/non-GF	**$0**	**$7,731,576**	**$0**	**$8,066,212**
Total Expenses:	**$7,731,576**		**$8,066,212**	
Program FTE	0.00	29.90	0.00	28.40
Program Revenues				
Intergovernmental	$0	$673,895	$0	$673,895
Service Charges	$0	$7,057,681	$0	$7,392,317
Total Revenue	**$0**	**$7,731,576**	**$0**	**$8,066,212**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of NPHC individual patients served	4,453	4,800	5,000
Number of completed visits at NPHC	15,372	16,000	17,000

Division: Integrated Clinical Services

Program Characteristics:

Program Description

This program offer funds the Northeast Health Center (NEHC), which is a designated Patient-Centered Medical Home. This model of primary care includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services, and collaboration with community partners. We provide comprehensive, culturally appropriate services to keep our community healthy. Services include but are not limited to:
-Primary care services including treatment of acute and chronic illnesses, behavioral health, drug and alcohol treatment, family planning, prenatal and preventive services (well-child visits, immunizations), acupuncture, and community health education.
-Community pharmacy and lab services.
-Clinical pharmacists who assist clients and providers with medication management and adherence support, conduct medication reconciliation upon hospital discharge, and independently manage ongoing medical conditions such as diabetes and high blood pressure.
-Enabling services including Medicaid eligibility screening, medical interpretation, transportation, case management, and health education
In calendar year 2025, the Multnomah County Community Health Center collectively served more than 60,200 patients whose demographics reflected Multnomah County's diverse population and especially represented under-resourced and marginalized communities that experience structural barriers to healthcare. For example, 96% of patients had an income at or below 200% of the federal poverty level (FPL), including 76% of patients who had an income at or below 100% FPL.

Equity Statement

The Multnomah County Community Health Center’s vision is to ensure all people in our community receive reliable, inclusive, and high-quality healthcare. We do this with a workforce that reflects the diversity of our communities and by reducing the financial, administrative, language, and social barriers that contribute to health inequities. Our core values emphasize providing care that is tailored to each individual's needs and centered on equity and measurable health outcomes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$6,182,599	$0	$6,294,514
Contractual Services	$0	$143,286	$0	$238,700
Materials & Supplies	$0	$310,470	$0	$390,842
Internal Services	$0	$2,293,146	$0	$2,359,342
Total GF/non-GF	**$0**	**$8,929,501**	**$0**	**$9,283,398**
Total Expenses:	**$8,929,501**		**$9,283,398**	
Program FTE	0.00	32.45	0.00	31.55
Program Revenues				
Intergovernmental	$0	$985,060	$0	$885,060
Service Charges	$0	$7,944,441	$0	$8,398,338
Total Revenue	**$0**	**$8,929,501**	**$0**	**$9,283,398**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of individual NEHC patients served	4,476	4,476	5,500
Number of patient visits completed at NEHC	15,556	16,000	17,000

Division: Integrated Clinical Services

Program Characteristics:

Program Description

This program offer funds the Mid County Health Center (MCHC), which is a designated Patient-Centered Medical Home. This model of primary care includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services, and collaboration with community partners. We provide comprehensive, culturally appropriate services to keep our community healthy. Services include but are not limited to: Primary care services including treatment of acute and chronic illnesses, behavioral health, drug and alcohol treatment, family planning, prenatal and preventive services (well-child visits, immunizations), acupuncture, and community health education; Refugee and asylee medical screenings in contract with Oregon Department of Human Services; Community pharmacy and lab services; Clinical pharmacists who assist clients and providers with medication management and adherence support, conduct medication reconciliation upon hospital discharge, and independently manage ongoing medical conditions such as diabetes and high blood pressure; and Enabling services including Medicaid eligibility screening, medical interpretation, transportation, case management, and health education.

In calendar year 2025, the Multnomah County Community Health Center collectively served more than 60,200 patients whose demographics reflected Multnomah County's diverse population and especially represented under-resourced and marginalized communities that experience structural barriers to healthcare. For example, 96% of patients had an income at or below 200% of the federal poverty level (FPL), including 76% of patients who had an income at or below 100% FPL.

Equity Statement

The Multnomah County Community Health Center's vision is to ensure all people in our community receive reliable, inclusive, and high-quality healthcare. We do this with a workforce that reflects the diversity of our communities and by reducing the financial, administrative, language, and social barriers that contribute to health inequities. Our core values emphasize providing care that is tailored to each individual's needs and centered on equity and measurable health outcomes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$12,239,890	$0	$11,767,838
Contractual Services	$0	$664,621	$0	$821,425
Materials & Supplies	$0	$623,380	$0	$1,235,581
Internal Services	$0	$3,747,315	$0	$3,389,877
Total GF/non-GF	**$0**	**$17,275,206**	**$0**	**$17,214,721**
Total Expenses:	**$17,275,206**		**$17,214,721**	
Program FTE	0.00	62.30	0.00	58.90
Program Revenues				
Intergovernmental	$0	$1,466,185	$0	$928,950
Service Charges	$0	$15,809,021	$0	$16,285,771
Total Revenue	**$0**	**$17,275,206**	**$0**	**$17,214,721**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of Mid County Health Center patients served	6,081	10,000	10,500
Number of Mid County patient visits	28,456	29,966	32,500

Division: Integrated Clinical Services

Program Characteristics:

Program Description

This program offer funds the East County Health Center (ECHC), which is a designated Patient-Centered Medical Home. This model of primary care includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services, and collaboration with community partners. We provide comprehensive, culturally appropriate services to keep our community healthy. Services include but are not limited to:
-Primary care services including treatment of acute and chronic illnesses, behavioral health, drug and alcohol treatment, family planning, prenatal and preventive services (well-child visits, immunizations), acupuncture, and community health education.
-Community pharmacy and lab services.
-Clinical pharmacists who assist clients and providers with medication management and adherence support, conduct medication reconciliation upon hospital discharge, and independently manage ongoing medical conditions such as diabetes and high blood pressure.
-Enabling services including Medicaid eligibility screening, medical interpretation, transportation, case management, and health education
In calendar year 2025, the Multnomah County Community Health Center collectively served more than 60,200 patients whose demographics reflected Multnomah County's diverse population and especially represented under-resourced and marginalized communities that experience structural barriers to healthcare. For example, 96% of patients had an income at or below 200% of the federal poverty level (FPL), including 76% of patients who had an income at or below 100% FPL.

Equity Statement

The Multnomah County Community Health Center's vision is to ensure all people in our community receive reliable, inclusive, and high-quality healthcare. We do this with a workforce that reflects the diversity of our communities and by reducing the financial, administrative, language, and social barriers that contribute to health inequities. Our core values emphasize providing care that is tailored to each individual's needs and centered on equity and measurable health outcomes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$9,672,189	$0	$10,559,728
Contractual Services	$0	$379,928	$0	$764,872
Materials & Supplies	$0	$326,301	$0	$734,865
Internal Services	$0	$3,167,304	$0	$3,371,628
Total GF/non-GF	**$0**	**$13,545,722**	**$0**	**$15,431,093**
Total Expenses:	**$13,545,722**		**$15,431,093**	
Program FTE	0.00	48.40	0.00	49.90
Program Revenues				
Intergovernmental	$0	$1,085,315	$0	$853,306
Service Charges	$0	$12,460,407	$0	$14,577,787
Total Revenue	**$0**	**$13,545,722**	**$0**	**$15,431,093**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of ECHC patients served	9,167	9,800	10,500
Number of patient visits	26,648	27,872	35,097

Division: Integrated Clinical Services

Program Characteristics:

Program Description

This program offer funds healthcare for school-aged youth as a basic need. The Student Health Center (SHC) provides nine critical points of access to health care regardless of insurance status through partnerships with schools, families, healthcare providers, and community agencies. SHC contributes to learning readiness by linking health and education to student success in school and life. The SHC's comprehensive approach enables preventive care and early identification and intervention. It promotes healthy behaviors and resilience as well as reducing risk behaviors. SHC services include:
-Chronic, acute, and preventive healthcare;
-Age-appropriate reproductive health;
-Exams, risk assessments, immunizations, healthy lifestyle education/counseling, and referrals; and
-Prescriptions.
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, and students experiencing houselessness. In calendar year 2025, the Multnomah County Community Health Center collectively served more than 60,200 patients whose demographics reflected Multnomah County's diverse population and especially represented under-resourced and marginalized communities that experience structural barriers to healthcare. For example, 96% of patients had an income at or below 200% of the federal poverty level (FPL), including 76% of patients who had an income at or below 100% FPL.

Equity Statement

The Multnomah County Community Health Center's vision is to ensure all people in our community receive reliable, inclusive, and high-quality healthcare. We do this with a workforce that reflects the diversity of our communities and by reducing the financial, administrative, language, and social barriers that contribute to health disparities. Our core values emphasize providing care that is tailored to each individual's needs and centered on equity and measurable health outcomes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$6,719,341	$0	$6,591,643
Contractual Services	$0	$322,262	$0	$361,135
Materials & Supplies	$0	$563,507	$0	$474,610
Internal Services	$0	$2,374,946	$0	$2,430,257
Total GF/non-GF	**$0**	**$9,980,056**	**$0**	**$9,857,645**
Total Expenses:	**$9,980,056**		**$9,857,645**	
Program FTE	0.00	35.84	0.00	36.35
Program Revenues				
Intergovernmental	$0	$1,312,379	$0	$1,293,279
Other / Miscellaneous	$0	$306,319	$0	$199,720
Service Charges	$0	$8,361,358	$0	$8,364,646
Total Revenue	**$0**	**$9,980,056**	**$0**	**$9,857,645**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Percent of patients with one or more visits with a health assessment in the last year	65%	65%	65%
Number of billable SHC visits	17,150	16,000	17,017

Division: Integrated Clinical Services

Program Characteristics:

Program Description

This program offer funds the Fernhill Health Center (FHHC), which is a designated Patient-Centered Medical Home. This model of primary care includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services, and collaboration with community partners. We provide comprehensive, culturally appropriate services to keep our community healthy. Services include but are not limited to:
-Primary care services including treatment of acute and chronic illnesses, behavioral health, drug & alcohol treatment, family planning, prenatal and preventive services (well-child visits, immunizations), acupuncture, and community health education.
-Community pharmacy and lab services.
-Clinical pharmacists who assist clients and providers with medication management and adherence support, conduct medication reconciliation upon hospital discharge, and independently manage ongoing medical conditions such as diabetes and high blood pressure.
-Enabling services including Medicaid eligibility screening, medical interpretation, transportation, case management, and health education.

In calendar year 2025, the Multnomah County Community Health Center collectively served more than 60,200 patients whose demographics reflected Multnomah County's diverse population and especially represented under-resourced and marginalized communities that experience structural barriers to healthcare. For example, 96% of patients had an income at or below 200% of the federal poverty level (FPL), including 76% of patients who had an income at or below 100% FPL.

Equity Statement

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Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$3,015,129	$0	$3,495,789
Contractual Services	$0	$59,650	$0	$183,250
Materials & Supplies	$0	$203,789	$0	$221,182
Internal Services	$0	$937,171	$0	$1,022,526
Total GF/non-GF	**$0**	**$4,215,739**	**$0**	**$4,922,747**
Total Expenses:	**$4,215,739**		**$4,922,747**	
Program FTE	0.00	14.50	0.00	17.68
Program Revenues				
Intergovernmental	$0	$826,068	$0	$826,068
Service Charges	$0	$3,389,671	$0	$4,096,679
Total Revenue	**$0**	**$4,215,739**	**$0**	**$4,922,747**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of Fernhill patients served	1,444	2,300	2,500
Number of patient visits	7,006	7,620	8,000

Division: Integrated Clinical Services

Program Characteristics:

Program Description

This program offer funds Southeast Health Center (SEHC), a Patient-Centered Medical Home, and the Mobile Health clinic. This model includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services, medication assisted therapy, 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 visits, immunizations).
-Integrated pharmacy and lab services.
-Dental services.
-Enabling services including Medicaid eligibility screening, medical interpretation, transportation, case management, and health education.

A key population served by SEHC are people experiencing houselessness–a population that continues to grow in the SEHC area. We use wrap-around services for our clients experiencing houselessness that include intensive case management and navigation of services, addressing food insecurities (food banks and community-supported agriculture partnerships for health with local farms), and referrals to community partnerships. The mobile clinic continues to expand its presence in the community through building new relationships with community partners and adding new locations to provide care, as well as improving the effectiveness of its interventions by adding behavioral health services.

Equity Statement

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Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$5,324,051	$0	$5,990,370
Contractual Services	$0	$424,083	$0	$186,125
Materials & Supplies	$0	$391,600	$0	$465,874
Internal Services	$0	$1,649,193	$0	$1,775,902
Total GF/non-GF	**$0**	**$7,788,927**	**$0**	**$8,418,271**
Total Expenses:	**$7,788,927**		**$8,418,271**	
Program FTE	0.00	28.60	0.00	30.70
Program Revenues				
Intergovernmental	$0	$1,366,158	$0	$1,365,404
Service Charges	$0	$6,422,769	$0	$7,052,867
Total Revenue	**$0**	**$7,788,927**	**$0**	**$8,418,271**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of SEHC patient visits	11,673	12,194	14,654
Number of mobile clinic visits (medical, dental, and behavioral)	1,405	1,698	1,344

Division: Integrated Clinical Services

Program Characteristics:

Program Description

This program offer funds the Rockwood Community Health Center (RCHC), which is a designated Patient-Centered Medical Home. This model of primary care includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services, and collaboration with community partners. We provide comprehensive, culturally appropriate services to keep our community healthy. Services include but are not limited to:
-Primary care services including treatment of acute and chronic illnesses, behavioral health, drug & alcohol treatment, family planning, prenatal and preventive services (well-child visits, immunizations), acupuncture, and community health education.
-Community pharmacy and lab services.
-Clinical pharmacists who assist clients and providers with medication management and adherence support, conduct medication reconciliation upon hospital discharge, and independently manage ongoing medical conditions such as diabetes and high blood pressure.
-Enabling services including Medicaid eligibility screening, medical interpretation, transportation, case management, and health education

In calendar year 2025, the Multnomah County Community Health Center collectively served more than 60,200 patients whose demographics reflected Multnomah County's diverse population and especially represented under-resourced and marginalized communities that experience structural barriers to healthcare. For example, 96% of patients had an income at or below 200% of the federal poverty level (FPL), including 76% of patients who had an income at or below 100% FPL.

Equity Statement

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Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$5,303,026	$0	$5,936,569
Contractual Services	$0	$195,555	$0	$516,022
Materials & Supplies	$0	$206,356	$0	$367,228
Internal Services	$0	$1,806,416	$0	$1,948,014
Total GF/non-GF	**$0**	**$7,511,353**	**$0**	**$8,767,833**
Total Expenses:	**$7,511,353**		**$8,767,833**	
Program FTE	0.00	29.30	0.00	31.00
Program Revenues				
Intergovernmental	$0	$764,768	$0	$764,768
Service Charges	$0	$6,746,585	$0	$8,003,065
Total Revenue	**$0**	**$7,511,353**	**$0**	**$8,767,833**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of RCHC patients served	4,007	4,500	5,000
Number of patient visits	12,082	14,610	18,813

Division: Integrated Clinical Services

Program Characteristics:

Program Description

This program offer funds the medical directors who are accountable for legal conformance, quality and safety of patient care, need-based and clinically justified service design, and efficient use of public funds. This required element ensures safety and quality of care as well as the trust and safeguarding of Health Resources and Services Administration grant funding.

Primary functions of the medical director program include:
-Develop and oversee strategic initiatives to enhance quality of care, health equity, safety, cost-effectiveness, and access.
-Develop, implement, and ensure ongoing adherence to patient care guidelines, policies, and procedures.
-Represent and advocate for the care of clients served by the Multnomah County Community Health Center to external stakeholders including the Oregon Health Authority and Coordinated Care Organizations pertaining to Medicaid to ensure that health care funding meets the needs of the community.
-Recruit and hire health care providers (physicians, nurse practitioners including psychiatric nurse practitioners and physician assistants), ensure providers have required credentials, and monitor ongoing provider performance.
-Oversee medical and integrated behavioral health care and collaborate with the director of nursing on oversight of other clinical care to ensure that patient care meets all rules, regulations, and standards set forth by regulatory agencies including The Joint Commission, contractors, grantors, and accrediting agencies.

Equity Statement

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Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$1,252,239	$0	$1,225,447
Contractual Services	$0	$157,000	$0	$172,200
Materials & Supplies	$0	$123,052	$0	$97,246
Internal Services	$0	$370,757	$0	$375,863
Total GF/non-GF	**$0**	**$1,903,048**	**$0**	**$1,870,756**
Total Expenses:	**$1,903,048**		**$1,870,756**	
Program FTE	0.00	3.00	0.00	2.80
Program Revenues				
Intergovernmental	$0	$115,115	$0	$111,592
Other / Miscellaneous	$0	$1,547,451	$0	$1,100,000
Service Charges	$0	$240,482	$0	$659,164
Total Revenue	**$0**	**$1,903,048**	**$0**	**$1,870,756**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of health center patients seen in primary care (unique patients)	44,495	46,000	48,000
Number of visits in primary care	157,116	165,000	180,000

Division: Integrated Clinical Services

Program Characteristics:

Program Description

This program offer funds the Multnomah County Community Health Center pharmacies, which serve about 7,000 people every month. We focus on ensuring everyone can get the medicine they need regardless of their situation. Most of our medicine is bought through the federal 340B drug pricing program. Started in 1992, this program requires drug companies to sell medicine to eligible health centers at a much lower price. Pharmacy revenue is used to provide low cost medications to underinsured and uninsured clients and other health center services, including, but not limited to, medication disposal services. We also provide prescriptions for patients seeking services at public health clinics for STI, TB, and Harm Reduction, and we provide prescriptions for people released from Multnomah County correctional facilities.

We know that every patient is different so we offer tools and services to help everyone take medicine safely and effectively:

-Voice-enabled labels for those who have trouble reading standard print;

-Dual-language labels to ensure instructions are clear in two languages;

-Adherence packaging, which organizes pills by the day and time of day they need to be taken;

-Mail-order services for specific situations.

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Equity Statement

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Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$12,222,722	$0	$11,175,597
Contractual Services	$0	$178,924	$0	$102,800
Materials & Supplies	$0	$27,114,970	$0	$26,363,427
Internal Services	$0	$3,570,340	$0	$3,446,103
Capital Outlay	$0	$0	$0	$300,000
Total GF/non-GF	**$0**	**$43,086,956**	**$0**	**$41,387,927**
Total Expenses:	**$43,086,956**		**$41,387,927**	
Program FTE	0.00	56.50	0.00	54.50
Program Revenues				
Service Charges	$0	$43,086,956	$0	$41,387,927
Total Revenue	**$0**	**$43,086,956**	**$0**	**$41,387,927**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of prescriptions processed. This is influenced by prescribing practices and client choice of which pharmacy they prefer to use.	438,924	452,412	465,000
Average cost per prescription. Drug costs consistently rise faster than general inflation rates contributing to a year over year increase.	23	25	30

Division: Integrated Clinical Services

Program Characteristics:

Program Description

This program offer funds the Health Center Laboratories program and the Health Information Management program, which support the delivery of care to clients of Health Department services including Primary Care, Student Health Centers, Sexually Transmitted Infection Clinic, Communicable Diseases Services, Dental Services, and Corrections Health.

The primary care clinic labs handle approximately 250,000 specimens per year. The lab program 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.

The Health Information Management program manages health (medical and dental) records systems to ensure comprehensive clinical documentation and compliance with all applicable licensing, regulatory, and accreditation standards. Medical Records staff fulfills approximately 13,000 medical records requests per year. The manager of Health Information fulfills the role of the Health Department's Privacy Official as required by the Health Insurance Portability and Accountability Act (HIPAA). Health Information Management ensures proper documentation of healthcare services and provides direction, monitoring, and reporting of federally-required HIPAA compliance activities.

Equity Statement

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Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$3,228,322	$0	$3,338,285
Contractual Services	$0	$2,700	$0	$22,100
Materials & Supplies	$0	$193,032	$0	$150,510
Internal Services	$0	$1,294,510	$0	$1,364,032
Capital Outlay	$0	$0	$0	$220,000
Total GF/non-GF	**$0**	**$4,718,564**	**$0**	**$5,094,927**
Total Expenses:	**$4,718,564**		**$5,094,927**	
Program FTE	0.00	23.80	0.00	22.80
Program Revenues				
Beginning Working Capital	$0	$334,426	$0	$334,426
Service Charges	$0	$4,384,138	$0	$4,760,501
Total Revenue	**$0**	**$4,718,564**	**$0**	**$5,094,927**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Percentage of tests canceled by our contracted lab Quest Diagnostics (this includes samples processed incorrectly, collected in incorrect container, etc.)	1.8%	1.8%	<2%
Medical record requests processed per year	11,265	13,000	13,000

Division: Integrated Clinical Services

Program Characteristics:

Program Description

This program offer funds the Patient Access Center (PAC), which is the point of entry for new and established patient scheduling. PAC provides appointments and referrals in collaboration with Multnomah County and other community organizations, ensuring consistent patient information and tracking. PAC also provides information for the Multnomah County Health Department's (MCHD) medical, dental, and social services as well as key community service partners. PAC's Language Services program is the central coordinator for thousands of patient interpretation requests and translations each year for multiple programs and services. Language Services provides interpretation in over 80 languages including sign language for all Multnomah County Community Health Center services, as well as for established patients who receive specialty care in the community. The team provides comprehensive coordination of written translation for clinical and non-clinical programs and services. This critical service ensures that patients can successfully move through the Health Center's Refugee and Screening Program. It ensures that patients with limited English proficiency receive culturally competent interpretation throughout all of the MCHD programs.

In our primary care clinics, the referral program connects patients with specialty services. Referral coordinators work with insurance companies to find the right specialists for each patient's needs. The referrals team manages communication between primary care medical providers and specialists to keep the process moving smoothly. Each year, this team successfully handles more than 55,000 referrals. The Health Engagement and Assessment Team (HEAT) is committed to enhancing meaningful interactions within county healthcare systems. Their focus is particularly on newly enrolled clients and the screening of social determinants of health.

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Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$7,359,950	$0	$8,145,201
Contractual Services	$0	$510,000	$0	$201,054
Materials & Supplies	$0	$169,465	$0	$159,583
Internal Services	$0	$1,865,655	$0	$1,968,751
Total GF/non-GF	**$0**	**$9,905,070**	**$0**	**$10,474,589**
Total Expenses:	**$9,905,070**		**$10,474,589**	
Program FTE	0.00	56.80	0.00	59.80
Program Revenues				
Intergovernmental	$0	$906,600	$0	$906,600
Other / Miscellaneous	$0	$2,440,000	$0	$1,877,700
Beginning Working Capital	$0	$569,548	$0	$569,548
Service Charges	$0	$5,988,922	$0	$7,120,741
Total Revenue	**$0**	**$9,905,070**	**$0**	**$10,474,589**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Average telephone abandonment rate (goal: at or below 15%)	20%	18%	15%
Average of primary care referrals actioned following receipt (new performance measure)	-	94%	98%

Division: Integrated Clinical Services

Program Characteristics:

Program Description

Health Center Administration and Operations supports services within the project scope of the Bureau of Primary Health Care (BPHC) grant under the Multnomah County Community Health Center. BPHC funding requires strict adherence to federal laws mandating which services must be provided by Federally Qualified Health Centers (FQHCs), which results in ongoing compliance and high quality care. Teams that fall under administration and operations support financial compliance and reporting through an independent enterprise fund, accurate medical coding, improvement of health outcomes through preventative care outreach and metrics improvement projects, as well as project management for multiple strategic planning, workforce development, grant management, and value-based care activities.

Activities supported in this program include:
-Development and implementation of fiscal accountability and monitoring infrastructure.
-Management of revenue cycle activities.
-Implementation of strategic projects.
-Medical coding and registration.
-Support for operational workflows to increase patient access to care.
-Other 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 communications campaigns for managing chronic diseases, and designing reporting materials to reflect operational needs to monitor metrics and value based pay performance.

Equity Statement

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Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$9,181,741	$0	$8,501,949
Contractual Services	$0	$500,000	$0	$342,329
Materials & Supplies	$0	$226,760	$0	$721,731
Internal Services	$0	$3,081,024	$0	$3,130,164
Total GF/non-GF	**$0**	**$12,989,525**	**$0**	**$12,696,173**
Total Expenses:	**$12,989,525**		**$12,696,173**	
Program FTE	0.00	50.90	0.00	45.40
Program Revenues				
Intergovernmental	$0	$1,225,755	$0	$1,457,764
Other / Miscellaneous	$0	$6,960,509	$0	$6,773,550
Beginning Working Capital	$0	$1,275,617	$0	$491,177
Service Charges	$0	$3,527,644	$0	$3,973,682
Total Revenue	**$0**	**$12,989,525**	**$0**	**$12,696,173**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Completion of annual strategic planning activities and three year plan in alignment with Community Health Center Board's vision	100%	100%	100%
Accuracy of medical coding: % of claims accepted by insurance partners	98%	98%	99%

Division: Integrated Clinical Services

Program Characteristics:

Program Description

The Multnomah County Community Health Center, also known as Integrated Clinical Services (ICS), is majorly funded by visit revenue from state and federal sources, which can vary annually. Reserve and contingency funds help provide ongoing fiscal stability and compliance with Federally Qualified Health Center (FQHC) rules and regulations during fluctuations.

Projected billable visits payer mix for FY 2027 reflects 82% Medicaid/Medicare visits for primary care, HIV Health Services Center (HHSC), and Student Health Center visits. Dental projected billable visits include 90% Medicaid visits. 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 of mandated healthcare services for the most vulnerable people of Multnomah County. Reserve and contingency funds will create ongoing stability for the Multnomah County Community Health Center 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 Resources and Services Administration guidelines, and Multnomah County’s Financial and Budget Policies.

The reserve and contingency fund was established in FY23. Each year, funding will be added to the reserve. The reserve fund will ensure the long-term financial stability of the program, and the contingency fund will allow the Multnomah County Community Health Center to address unforeseen future expenses with a goal of maintaining at least four months of operating costs with a minimum of three months per policy.

Equity Statement

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Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Unappropriated & Contingency	$0	$77,641,217	$0	$89,499,177
Total GF/non-GF	**$0**	**$77,641,217**	**$0**	**$89,499,177**
Total Expenses:	**$77,641,217**		**$89,499,177**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Beginning Working Capital	$0	$77,641,217	$0	$89,499,177
Total Revenue	**$0**	**$77,641,217**	**$0**	**$89,499,177**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Percent of reserve goal met (4 months operating expense)	100%	100%	100%
Compliance with all Health Resources and Services Administration (HRSA) 330 Grant financial requirements	100%	100%	100%

HD | Program #40036 - FQHC-Community Health Council and Civic Governance

FY 2027 Adopted

Division: Integrated Clinical Services

Program Characteristics:

Program Description

This program offer funds the Community Health Center Board (CHCB), which is the governing board of the Multnomah County Community Health Center. The CHCB is critical in ensuring access to health care for our most vulnerable residents. It serves as the co-applicant board with the Board of County Commissioners, as required by the Health Resources and Services Administration's Bureau of Primary Health Care, to provide oversight on policies and programs within the scope of the Primary Care Grant.

The CHCB enables Multnomah County to meet the Health Resources and Services Administration's 21 mandatory program requirements. This includes oversight of quality assurance, health center policies, patient satisfaction, and accountability of the Multnomah County Community Health Center's Executive Director in all matters of compliance and operations.

To meet the federally-mandated program requirements for Federally Qualified Health Centers, the CHCB must have a minimum of 51% consumer membership. Meeting these requirements allows the Multnomah County Community Health Center to retain the federal grant and all benefits associated with FQHC status. The CHCB currently comprised of ten members meeting the 51% consumer requirement and fairly represents the communities served by the Multnomah County Community Health Center's health clinics located throughout the county.

Equity Statement

The Multnomah County Community Health Center's vision is to ensure all people in our community receive reliable, inclusive, and high-quality healthcare. We do this with a workforce that reflects the diversity of our communities and by reducing the financial, administrative, language, and social barriers that contribute to health inequities. Our core values emphasize providing care that is tailored to each individual's needs and centered on equity and measurable health outcomes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$159,973	$0	$162,614
Contractual Services	$0	$164,000	$0	$164,000
Materials & Supplies	$0	$47,014	$0	$38,612
Internal Services	$0	$91,042	$0	$96,803
Total GF/non-GF	**$0**	**$462,029**	**$0**	**$462,029**
Total Expenses:	**$462,029**		**$462,029**	
Program FTE	0.00	1.00	0.00	1.00
Program Revenues				
Other / Miscellaneous	$0	$462,029	$0	$462,029
Total Revenue	**$0**	**$462,029**	**$0**	**$462,029**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of monthly public meetings with the full board to conduct board business and responsibilities, as required by the Bureau of Primary Care's FQHC requireme	12	12	12
Number of Community Health Center Board members to comply with the definitions set by the Bureau of Primary Care at all times	9	10	12

Division: Integrated Clinical Services

Program Characteristics:

Program Description

Allied Health (AH) integrated Behavioral Health (IBH) and Community Health Worker (CHW) services, which are critical to our core clinical operations. This integration is delivered through two primary components:
-AH-Integrated Behavioral Health (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 or office visits.
-The AH-Community Health Worker (AH-CHW) program serves clients who experience barriers to care that may keep them from achieving their health goals and optimal health outcomes. Our CHWs work with clients on the social determinants of health (SDOH) and health education/promotion related to their clinical care needs. In addition to direct client services, SDOH work includes establishing partnerships in the community. CHWs serve as bridge-builders and liaisons with case managers and other client advocates and also facilitate health education/promotion.

In 2025, two of the top five primary diagnoses addressed within all patient visits were mental health diagnoses. In order to serve clients where they are, in both a geographical sense and readiness, Allied Health teams reflect the populations served, including a majority of staff who are bilingual, bicultural, and have other relatable lived experiences.

Equity Statement

The Multnomah County Community Health Center’s vision is to ensure all people in our community receive reliable, inclusive, and high-quality healthcare. We do this with a workforce that reflects the diversity of our communities and by reducing the financial, administrative, language, and social barriers that contribute to health inequities. Our core values emphasize providing care that is tailored to each individual's needs and centered on equity and measurable health outcomes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$7,361,629	$0	$7,091,900
Contractual Services	$0	$117,502	$0	$19,800
Materials & Supplies	$0	$328,059	$0	$199,979
Internal Services	$0	$1,917,583	$0	$1,841,349
Total GF/non-GF	**$0**	**$9,724,773**	**$0**	**$9,153,028**
Total Expenses:	**$9,724,773**		**$9,153,028**	
Program FTE	0.00	45.50	0.00	42.45
Program Revenues				
Intergovernmental	$0	$1,458,651	$0	$1,112,678
Other / Miscellaneous	$0	$198,301	$0	$0
Beginning Working Capital	$0	$1,224,142	$0	$1,224,142
Service Charges	$0	$6,843,679	$0	$6,816,208
Total Revenue	**$0**	**$9,724,773**	**$0**	**$9,153,028**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of unique patient encounters completed with a behavioral health provider	27,880	28,000	28,000
Number of unique patient encounters completed with a Community Health Worker	11,400	14,000	14,000

Division: Integrated Clinical Services

Program Characteristics:

Program Description

This Program Offer funds the Integrated Clinical Services Quality Assurance program, which provides quality, compliance, and technical infrastructure and resources to support all in-scope services for Federally Qualified Health Center (FQHC) and Health Resources and Services Administration federal grants.

Program functions include: performance and compliance audits, incident response, electronic health records management and support, data reporting and analysis, medical records privacy under the Health Insurance Portability and Accountability Act, accreditation under The Joint Commission, credentialing and privileging, contracts and purchasing coordination, policy management, infection prevention, risk analysis and management, client feedback, and continuous quality improvement.

These functions support the delivery of safe, high quality patient care and assure adherence to strict federal funding requirements. They also enable participation in loan forgiveness that helps with recruitment and retention as well as enhanced Medicaid revenue and other funding that ensure the sustainability of FQHC service delivery.

Equity Statement

The Multnomah County Community Health Center’s vision is to ensure all people in our community receive reliable, inclusive, and high-quality healthcare. We do this with a workforce that reflects the diversity of our communities and by reducing the financial, administrative, language, and social barriers that contribute to health inequities. Our core values emphasize providing care that is tailored to each individual's needs and centered on equity and measurable health outcomes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$5,226,319	$0	$5,514,704
Contractual Services	$0	$2,705,000	$0	$2,214,000
Materials & Supplies	$0	$412,024	$0	$113,044
Internal Services	$0	$1,862,618	$0	$1,939,161
Total GF/non-GF	**$0**	**$10,205,961**	**$0**	**$9,780,909**
Total Expenses:	**$10,205,961**		**$9,780,909**	
Program FTE	0.00	27.45	0.00	28.45
Program Revenues				
Intergovernmental	$0	$150,000	$0	$150,000
Other / Miscellaneous	$0	$3,886,026	$0	$3,885,544
Beginning Working Capital	$0	$4,235,059	$0	$3,728,430
Service Charges	$0	$1,934,876	$0	$2,016,935
Total Revenue	**$0**	**$10,205,961**	**$0**	**$9,780,909**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Maintain accreditation with The Joint Commission, including the Patient Centered Medical Home standard	100%	100%	100%
HRSA Community Health Center Program Grant renewed annually	100%	100%	100%

Corrections Health

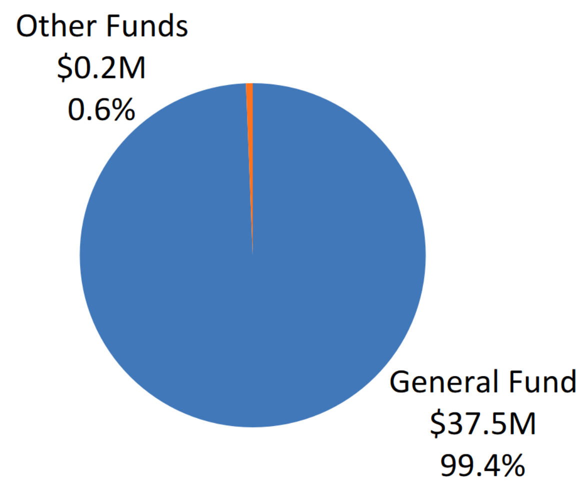
$37.8 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

129.35 FTE

(full time equivalent)



The Corrections Health Division is responsible for providing medical, mental health, and dental care to roughly 17,000 people in Multnomah County jails and juvenile detention annually. We are required to offer the same quality of care found in the community to the thousands of adults and youth we serve each year.

Many justice impacted people deal with serious illnesses, mental health struggles, or addiction. More than 65% receive mental health treatment. Because these issues often affect marginalized groups more deeply, providing high-quality treatment helps close the gap in health fairness. Staff work 24/7 in adult facilities and 16 hours a day for youth to treat these conditions and prevent avoidable deaths.

Improving the health of people in custody helps everyone. When patients receive treatment for contagious diseases or stabilize their mental health, they can better participate in their legal cases. Since most people eventually return home, these health improvements lead to safer transitions and stronger, healthier families and neighborhoods.

The Corrections Health Division's work specifically addresses **Focus Area 2: Create a Safe and Just Community** in the County's Strategic Plan**.**

Significant Division Changes

Medication Supported Recovery
In order to enhance Medication Supported Recovery (MSR) in carceral settings, Corrections Health is reallocating resources to support the administration of prescription medication to treat opioid addiction and manage withdrawal symptoms to more adults in custody with active substance use disorder. Clinical staff, currently under the Transition Services Program (TSP), will shift to operate under the Multnomah County Detention Center. To manage the financial aspects of this transition, the budget was adjusted by reducing 4.40 FTE Community Health Nurse (CHN) positions, a 1.00 FTE Operations Supervisor position, a 0.50 FTE Physician position, and a 1.00 FTE Corrections Health Division Director position. These funds were then allocated to accommodate the following positions, under the MSR Program: a Community Health Nurse (CHN) position totaling 0.80 FTE, a Licensed Community Practical Nurse (LPN) position totaling 0.73 FTE, and an Advanced Practice Clinician position totaling 0.60 FTE.

Clinical changes that enhance the Corrections Health Division's ability to expand capacity to incorporate long-acting injectable medications will continue to be a significant undertaking throughout FY 2027. The Health Resources and Services Administration (HRSA) has provided $169,290 of grant funding for the Integrated Clinical Services Division (ICS) and Corrections Health to partner around a program called "Transition In Care." This program is designed to help clients exiting jail connect with and continue receiving care from ICS.

Drug Pricing Program Corrections Health is in the process of submitting its application for the 340B Drug Pricing Program to help reduce the cost of pharmaceutical medications.

Behavioral Health Services (40059) Changes in this program include the loss of a 1.00 FTE Behavioral Health Manager; 0.80 FTE Psychiatrist (Represented); and 1.60 FTE Mental Health Consultants. The two remaining Behavioral Health supervisors will report to the Medical Director. Corrections Health will seek psychiatric services from our academic affiliate or other internal Health Department employees. The mental health consultants were long-vacant evening/weekend positions. Their work will be covered through on-call and staffing structure changes.

Transition Services Program (40047) is reduced to meet the rising costs associated with increasingly complex medical needs and to offset rising pharmaceutical costs. The reduction was partially offset by a $677,023 and 5.00 FTE General Fund investment. After this investment, there is still a reduction of 3.00 FTE Clinical Support Specialists, 1.00 FTE Community Health Specialist 2, and 1.00 FTE Program Manager. The division maintains the ability to provide critical transition support services and continue processing Medicaid/OHP eligibility. The program will continue the Medication-Assisted Treatment (MAT) and suboxone administration within the carceral settings, administration of long-acting injectables while in custody and at release, as well as continued work to introduce methadone.

Corrections Health Outcomes

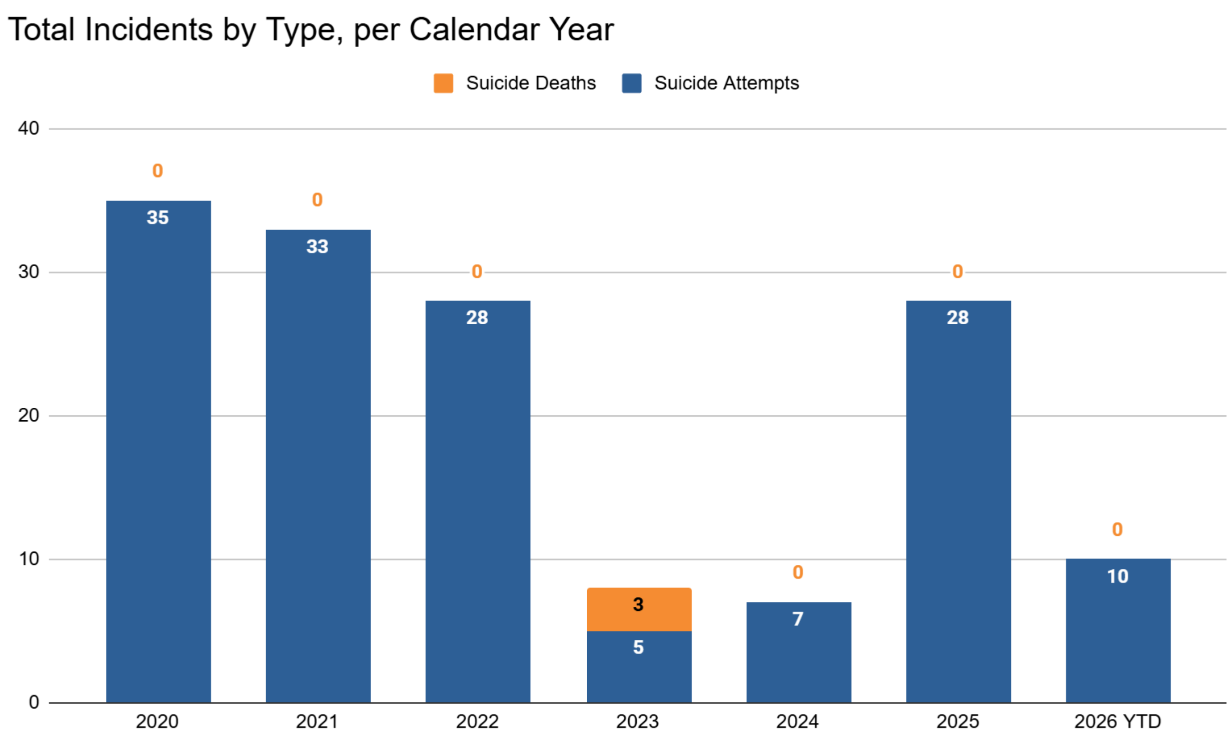
1. Adults and youth in custody in Multnomah County's three carceral settings have access to safe, timely, effective, equitable, efficient, patient-centered care.

Incarceration can increase the risk of poor health outcomes for those incarcerated. Corrections Health prioritizes access to health care that meets the needs of those in their care, addressing all aspects of health and well-being including health outcomes that disproportionately impact people in custody like drug overdose and suicide.

Key Performance Indicator (KPI) 1.1: Number of suicide attempts and suicide deaths

KPI 1.1 Description: Corrections Health working in close partnership with the Multnomah County Sheriff's Office (MCSO) is focused on lowering the number of suicide attempts and suicide deaths within the jail facilities. In 2025, Corrections Health received a grant and implemented Zero Suicide, a national evidence-based model, to support education and suicide prevention efforts.

Additionally, the Mental Health Team implemented an evidence-based Case Model to support Adults in Custody (AICs) who are at risk of or experiencing a suicidal crisis and are in need of mental health care. Corrections Health also implemented a new suicide severity screening tool and is providing training on its use to all clinical staff to better assess, screen for, and respond to suicide risk.



FY 2026 Estimate: Approximately 35-50 suicide attempts for all of FY 2026, across all sites and zero suicide deaths	**FY 2027 Target:** 30-45 suicide attempts for FY 2027 and zero suicide deaths

KPI 1.1 Equity Considerations: Youth, communities of color, and individuals with limited access to care are disproportionately impacted by incarceration and suicide. By strengthening early identification, enhancing trauma-informed crisis response, and improving data collection and analyses across all demographics and engaging those with lived experience to address systemic inequities as well as suicide risk, we can better understand and mitigate suicide attempts within our corrections facilities.

Outcome 1 Program Offers

The following program offers contribute to Outcome 1. Division-specific administrative program offers are not included, as they support all outcome statements:

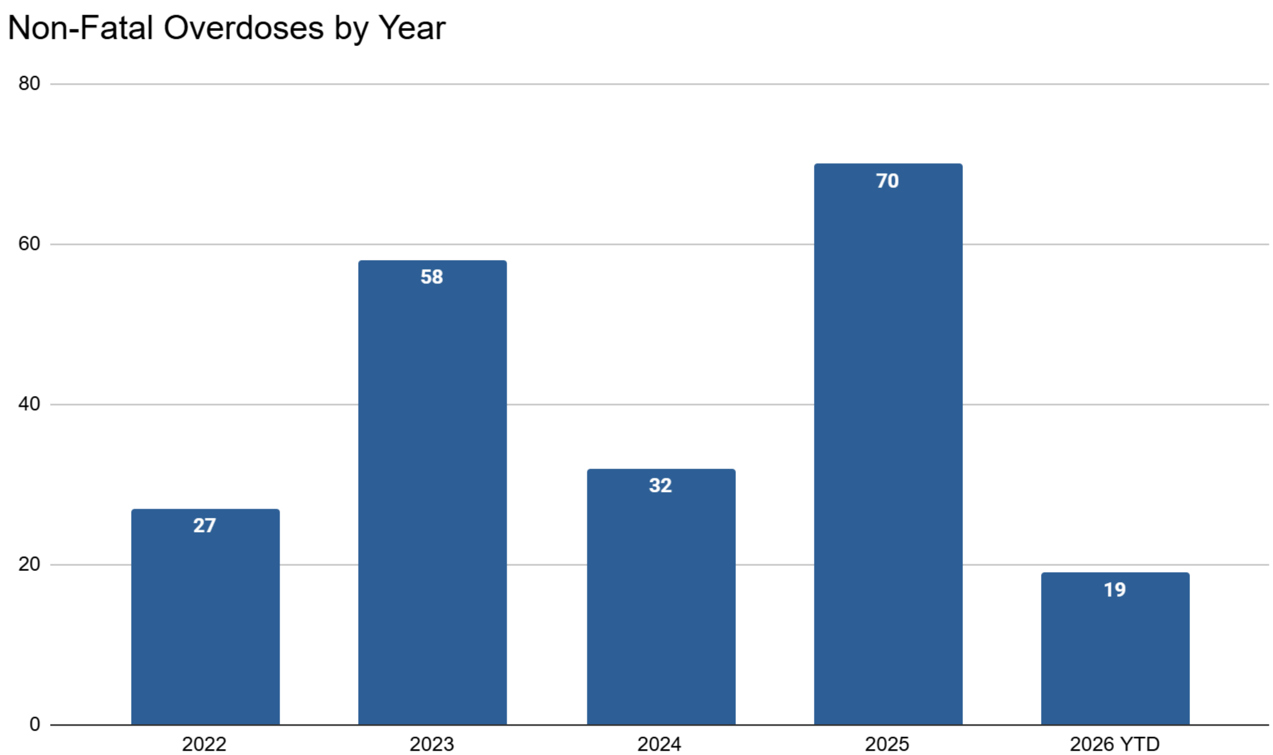
- 40049 - Corrections Health Juvenile Clinical Services
- 40050 - Corrections Health Multnomah County Detention Center Clinical Services
- 40051 - Corrections Health Inverness Jail Clinical Services
- 40059 - Corrections Health Behavioral Health Services

2. Adults in custody experience reduced overdose and withdrawal effects through the availability of multi-pronged medication supported recovery.

Overdoses are one of the leading causes of preventable injury and death as a whole and disproportionately affect communities of color. Corrections Health and the Multnomah County Sheriff's Office are working to decrease the number of overdoses and overdose deaths from contraband drugs that get into jail facilities.

Key Performance Indicator (KPI) 2.1: Number of overdoses and overdose deaths in custody

KPI 2.1 Description: The expanded use of Medication Supported Recovery (MSR) including suboxone, methadone, and long-acting injectables for people in custody and experiencing opioid addiction is one strategy being used to reduce injury and death from overdose. Other strategies include provider education and training, patient assessment, and additional support.



FY 2026 Estimate: Between 35-45 overdose incidents within Multnomah County jail facilities	**FY 2027 Target:** 20-30 overdoses within Multnomah County jail facilities

KPI 2.1 Equity Considerations: The average age of Adults in Custody (AICs) who had an overdose was between 26 and 49, with the 35–49 age range being the most prevalent. Regarding race and ethnicity, white/Caucasians showed the highest rate of overdose, followed by Black/African Americans. Most overdoses occurred within less than two days in custody, often at the time of booking, with the 2–4 day period after booking being the next most frequent time. Data on fentanyl overdose across Multnomah County can be found in the County's Fentanyl Overdose Deaths report.

Outcome 2 Program Offers The following program offers contribute to Outcome 2.

- 40045 - Corrections Health Operations
- 40049 - Corrections Health Juvenile Clinical Services
- 40050 - Corrections Health Multnomah County Detention Center Clinical Services
- 40051 - Corrections Health Inverness Jail Clinical Services
- 40059 - Corrections Health Behavioral Health Services

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	Total FTE
40043	Corrections Health Dental		774,395	0	774,395	2.00
40045	Corrections Health Operations		4,368,632	0	4,368,632	13.50
40047	Corrections Health Transition Services		2,018,477	234,684	2,253,161	13.05
40049	Corrections Health Juvenile Clinical Services		1,957,392	0	1,957,392	6.20
40050	Corrections Health Multnomah County Detention Center (MCDC) Clinical Services		13,857,176	0	13,857,176	44.00
40051	Corrections Health Inverness Jail (MCIJ) Clinical Services		10,485,215	0	10,485,215	32.90
40059	Corrections Health Behavioral Health Services		4,063,483	0	4,063,483	17.70
	Total Corrections Health		**37,524,770**	**234,684**	**37,759,454**	**129.35**

Division: Corrections Health

Program Characteristics:

Program Description

Correction Health provides constitutionally mandated health care for adults and youth in Multnomah County's carceral settings, as outlined in the 4th, 8th, and 14th Amendments, which require appropriate access to health care and timely evaluation by a health care professional. This program offer represents dental care that is provided across all 3 Corrections Health sites: the Multnomah County Detention Center (MCDC), Multnomah County Inverness Jail (MCIJ) and the Donald E. Long (DEL) juvenile detention home. At MCIJ, dental care will be provided to approximately 80 adults in custody per month, while at MCDC approximately 30 adults in custody will be seen per month. DEL will provide care to approximately 6 youth per month. Please note: the target for DEL is substantially reduced due to the significant reduction in youth housed at the center.

Corrections Health is proud to provide dental care for needs beyond those that are classified as urgent or emergencies. We emphasize preventive care, including cleanings, fillings, sealants and fluoride treatments. We provide a comprehensive screening to people in our care, as well as oral health education and 24 hour emergency care. We have a referral network for patients needing complicated oral surgical procedures if they are beyond the scope of care provided on site. All care is provided with dental equipment that is safe, reliable, and aligned with community standards.

Through our connections with on-call dentists, we are able to limit the days where we are not providing services. We also mentor OHSU 4th year dental students who provide care to people in custody to further develop our public health system and expand the provider workforce.

Equity Statement

Due to systemic inequities and unjust systems, Adults and Youth in Custody (AICs and YICs) are disproportionately from Black, Indigenous, and People of Color (BIPOC) communities. Providing high-quality, complete care in county jails and detention centers is essential for ensuring those negatively affected by racism and trauma receive the care they deserve.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$538,591	$0	$594,162	$0
Materials & Supplies	$103,212	$0	$106,814	$0
Internal Services	$65,569	$0	$73,419	$0
Total GF/non-GF	**$707,372**	**$0**	**$774,395**	**$0**
Total Expenses:	**$707,372**		**$774,395**	
Program FTE	2.00	0.00	2.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Adult Dental Visits at the Inverness Jail and Detention Center Combined	1,332	1,300	1,320
Youth Dental Visits at the Donald E. Long Juvenile Detention Center	196	100	66

Division: Corrections Health

Program Characteristics:

Program Description

Corrections Health (CH) provides constitutionally-mandated care for the approximately 1,000 adults and 30-40 youth who may be in custody at any one time across three sites: Multnomah County Detention Center (MCDC), Inverness Jail (IJ), and the Donald E. Long (DEL) Juvenile Detention Home. Annually, we provide care at these sites for more than 36,000 adults and more than 1,000-1,200 youth. Of the youth we care for each year, more than 40% have significant mental health conditions.

Corrections Health provides care at these three sites, and across six housing areas that include adults in custody who have been deemed “high level discipline.” Medical, mental and dental health care are provided via 20 medical beds, two general and multiple mental health modules, and three dental operatories. Corrections Health also provides physical therapy, X-ray and lab services, and provides referrals for external services.

Services such as skilled nursing, IV therapy, and post-surgical care are provided in the jails instead of a high cost hospital. Corrections Health is staffed 24/7 with nursing personnel to provide needed care and emergency medical response. This program offer includes the Corrections Health Quality Team which provides accreditation monitoring and support, to include policy creation, tracking, and recertification; as well as augmented data support and electronic medical record data support.

Equity Statement

As health risk and diseases rarely impact all communities equally, the work of Corrections Health addresses the groups disparately impacted. That care is delivered to BIPOC populations that are disproportionately brought into the justice system. Recruitment and hiring practices have been refined to promote a workforce that more closely resembles the demographics of the population we serve.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$3,541,244	$0	$3,533,921	$0
Materials & Supplies	$12,412	$0	$28,106	$0
Internal Services	$736,311	$0	$806,605	$0
Total GF/non-GF	**$4,289,967**	**$0**	**$4,368,632**	**$0**
Total Expenses:	**$4,289,967**		**$4,368,632**	
Program FTE	18.11	0.00	13.50	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of External Referrals Submitted/Monthly	624/52	690/57	745/62
Number of Outside Appointments (All Facilities)	1,206	1,330	1,410

Division: Corrections Health

Program Characteristics: Backfill Other Funds

Program Description

Each year, Corrections Health provides care for over 36,000 adults and 2,500 young people. Being in jail or prison affects these individuals directly, and it also affects their families. When people leave jail or prison care, they might end up returning to jail. The Transition Services Program (TSP) at Corrections Health aims to help people leaving the correctional system. It gives them a basis and a support system to become part of our community again, while also offering the opportunity to become eligible for the Oregon Health Plan (i.e. Medicaid). About 200 people each month receive support services through TSP. Across the country, TSP's job is also called discharge planning, continuing care, or re-entry care coordination. This includes providing supplies upon exiting from the jails such as clothes, shoes, under garments, and safety supplies that can be used during inclement weather.

According to rules set by the National Commission on Correctional Health Care (NCCHC), jails must plan for the safe release of people who have major health issues, including medical needs, mental health treatment, help for substance use disorders, and disability services. Starting in FY25, TSP grew its role to offer more Medication Addiction Treatment (MAT) to more adults in custody than before. This was done by using specific MAT medications (Suboxone, Long-Acting Injectable Buprenorphine, and Sublingual Buprenorphine). These medications fight addiction and help people recover while they are in jail or prison. They also greatly lower the chance of an overdose after release.

TSP clinical staff is also in the beginning phases of establishing the use of methadone in the adult jail sites through a trial partnership with an opioid treatment program (OTP).

Equity Statement

As members of BIPOC communities are disproportionately represented in carceral populations, both locally and nationally, it is critical that we provide strong programming to support people exiting care as they seek to reintegrate into our community. The Transitions Services Program provides needs assessments, existing care plans, and coordinates with various service providers to ensure continuity of care, post-release, while also providing support in the reduction of recidivism.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$2,401,800	$558,364	$2,014,299	$138,253
Contractual Services	$0	$265,136	$0	$71,500
Materials & Supplies	$26,272	$162,990	$4,178	$8,322
Internal Services	$0	$80,991	$0	$16,609
Total GF/non-GF	**$2,428,072**	**$1,067,481**	**$2,018,477**	**$234,684**
Total Expenses:	**$3,495,553**		**$2,253,161**	
Program FTE	16.28	2.99	13.05	0.00
Program Revenues				
Intergovernmental	$0	$1,067,481	$0	$234,684
Total Revenue	**$0**	**$1,067,481**	**$0**	**$234,684**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of Adults in Custody (AIC) Oregon Health Plan (OHP) Applications Completed/Month	136/12	145/12	170/12
Number of Adults In Custody (AIC) Seen/Evaluated with No Application Needed	1,693	1,800	2,100

Division: Corrections Health

Program Characteristics:

Program Description

Providing health care to detained youth is the responsibility of Corrections Health. Corrections Health personnel care for 30-40 detained youth at any one time (1,000 - 1,200 / year) from Multnomah County or 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 and alleviate pain and suffering which is the constitutionally mandated measure of quality care. Stabilizing their health allows them to participate fully in their legal processes. This program offer ensures that the health program meets the constitutionally mandated standards that ensure access to care, safeguards the health of all those who are in detention, and controls the legal risk to the County.

Health professionals at the Donald E. Long (DEL) Juvenile Detention Home work 16 hours/day, seven days a week providing care for approximately 20-35 youth daily in 4-5 individual housing units. Care ranges from minor ailments and injuries to major chronic and emotional diseases resulting from substance abuse, trauma, sex trafficking, lack of health care, gunshot wounds, lack of knowledge of hygiene and self care, frequent infections and a high rate of medical and mental illness.

Corrections Health staff identify and respond to medical emergencies and also screen and treat for communicable diseases and vaccinate to minimize the risk of outbreaks. Coordination with other Oregon counties is facilitated so that continuity of care occurs when youths transfer to other jurisdictions.

Equity Statement

Due to systemic inequities and unjust systems, Adults and Youth in Custody (AICs and YICs) are disproportionately from Black, Indigenous, and People of Color (BIPOC) communities. Providing high-quality, complete care in county jails and detention centers is essential for ensuring those negatively affected by racism and trauma receive the care they deserve.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,654,594	$0	$1,525,187	$0
Contractual Services	$135,818	$0	$264,460	$0
Materials & Supplies	$84,526	$0	$113,424	$0
Internal Services	$54,256	$0	$54,321	$0
Total GF/non-GF	**$1,929,194**	**$0**	**$1,957,392**	**$0**
Total Expenses:	**$1,929,194**		**$1,957,392**	
Program FTE	6.80	0.00	6.20	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of client visits conducted by Corrections Health nursing per year	2,526	1,950	1,800
Percentage of detained youth with an active prescription who are receiving mental health medications monthly	40%	55%	60%

Division: Corrections Health

Program Characteristics:

Program Description

At Multnomah County Detention Center (MCDC), Corrections Health (CH) provides essential healthcare for approximately 370 adults in custody (AIC), including individuals in the custody of US Marshals. Over 36,000 AICs are cared for annually, with over 50% having unstable, chronic conditions like diabetes, hypertension, infections, substance withdrawal, and severe mental and behavioral health illnesses.

This program covers MCDC's basic administration, support, booking, medical, and mental health care programs. CH nurses are staffed 24/7. With an average of 40+ new bookings daily, nurses perform a medical screening to document each individual's urgent, chronic medical, and mental health needs, including medications (medication-assisted therapy), substance use and withdrawal symptoms, pregnancy status, special health needs, allergies, and communicable disease concerns. The entry screening (EPF) is crucial for identifying immediate needs like suicidal ideation or pregnancy with opiate use, which then leads to necessary treatments, referrals, and housing decisions. Before custody acceptance, CH nurses may assess individuals to ensure serious medical or mental health issues are addressed at a hospital.

Within 14 days of incarceration, AICs receive an initial Health and Physical (HP) assessment from a CH nurse. This comprehensive process includes health, dental, and mental health histories, physical examinations, and the development of diagnostic and therapeutic plans. The program aims to provide quality healthcare to this vulnerable population, ultimately improving our community and public health.

Equity Statement

Due to systemic inequities and unjust systems, Adults and Youth in Custody (AICs and YICs) are disproportionately from Black, Indigenous, and People of Color (BIPOC) communities. Providing high-quality, complete care in county jails and detention centers is essential for ensuring those negatively affected by racism and trauma receive the care they deserve.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$8,718,672	$0	$9,762,553	$0
Contractual Services	$1,254,393	$0	$1,914,789	$0
Materials & Supplies	$565,504	$0	$1,396,539	$0
Internal Services	$674,059	$0	$783,295	$0
Total GF/non-GF	**$11,212,628**	**$0**	**$13,857,176**	**$0**
Total Expenses:	**$11,212,628**		**$13,857,176**	
Program FTE	42.60	0.00	44.00	0.00
Program Revenues				
Intergovernmental	$0	$0	$0	$0
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Average number of Entry Process Forms completed in one month	1,405	1,450	1,400
Average number of 14 day Health and Physical assessments completed per month	105	120	105

Division: Corrections Health

Program Characteristics:

Program Description

Corrections Health (CH) at Multnomah County Inverness Jail (MCIJ) provides vital, 24/7 healthcare for a vulnerable and underserved population of approximately 580-600 Adults In Custody (AIC) daily, including individuals in the custody of US Marshals. MCIJ serves as the central hub for the state inmate transport system, with an average of 10-30 AICs receiving overnight care. Over 36,000 AICs are cared for annually.

The AIC population often presents with unstable, chronic health issues; over 50% have conditions such as diabetes, hypertension, infections, substance withdrawal, and severe mental and behavioral health illnesses. Professional, skilled staff provide care 24/7 including effective screening, illness identification, evaluation, and treatment of the medical needs identified. All detainees transferred from the Multnomah County Detention Center (MCDC) continue or begin treatment at MCIJ until the disposition of their legal process.

The care provided is guided by a system of policies and procedures designed to reflect the standard of care in the community and align with the standard of other correctional facilities nationwide. This comprehensive service minimizes the high cost of outside medical care by offering essential services on-site including: 14-day Health Assessment, immunizations, dental services, 24/7 nurse triage, mental health services, and substance use and withdrawal assessments. Supportive services include on-site x-ray, physical therapy, lab, and OB/GYN visits. The program aims to provide quality healthcare to this vulnerable population, ultimately improving our community and public health.

Equity Statement

Due to systemic inequities and unjust systems, Adults and Youth in Custody (AICs and YICs) are disproportionately from Black, Indigenous, and People of Color (BIPOC) communities. Providing high-quality, complete care in county jails and detention centers is essential for ensuring those negatively affected by racism and trauma receive the care they deserve.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$7,348,571	$0	$7,293,005	$0
Contractual Services	$1,254,393	$0	$1,420,452	$0
Materials & Supplies	$607,177	$0	$1,153,795	$0
Internal Services	$535,859	$0	$617,963	$0
Total GF/non-GF	**$9,746,000**	**$0**	**$10,485,215**	**$0**
Total Expenses:	**$9,746,000**		**$10,485,215**	
Program FTE	35.85	0.00	32.90	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Average number of 14 day Health and Physical assessments completed per month	149	150	150
Average number of Medial Request Forms received monthly	1,946	2,000	2,000

Division: Corrections Health

Program Characteristics:

Program Description

This program provides Behavioral Health services and implements suicide prevention for clients at all facilities served by Corrections Health. Our records indicate that at least 70% of our Adults in Custody (AIC) have a mental health diagnosis. Treatment includes assessment, therapy, psycho-education, crisis intervention, and care coordination. A Caseload Model supports effective transitions between facilities, and Licensed supervisors monitor care for compliance. Subject matter experts train staff on client safety and access to behavioral health care, including interdisciplinary implementation of the Columbia Suicide Severity Rating Scale (C-SSRS) and the Safer Suicide Care team.

Due to acute needs, Mental Health (MH) leaders rotate to maintain 24/7 availability for urgent direct care, including potential emergency department referral, communicating imminent risk, and screening for involuntary transport per Oregon Civil Commitment Laws. Corrections Health Behavioral Health delivers behavioral health services to a broad and diverse population, including those disproportionately represented in the system. This equitable service delivery model depends on employing staff with culturally specific knowledge and supporting cultural competency aligned with facility demographics, including LGBTQIA2S+ individuals and Black, Indigenous, and other people of color. High quality clinical supervision and data-driven program development support equitable care for all clients.

Equity Statement

Due to systemic inequities and unjust systems, Adults and Youth in Custody (AICs and YICs) are disproportionately from Black, Indigenous, and People of Color (BIPOC) communities. Providing high-quality, complete care in county jails and detention centers is essential for ensuring those negatively affected by racism and trauma receive the care they deserve.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$3,752,749	$0	$3,316,609	$0
Contractual Services	$89,460	$0	$223,000	$0
Materials & Supplies	$400,627	$0	$58,981	$0
Internal Services	$406,029	$0	$464,893	$0
Total GF/non-GF	**$4,648,865**	**$0**	**$4,063,483**	**$0**
Total Expenses:	**$4,648,865**		**$4,063,483**	
Program FTE	20.95	0.00	17.70	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Average number of AICs placed on Suicide Watch verses completed deaths by suicide.	686/0	692/0	700/0
Annual number of behavioral health evaluations completed by behavioral health team staff	6,262	6,400	6,600

Behavioral Health

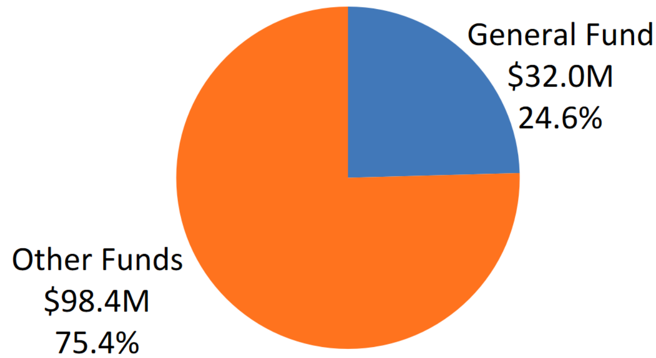
$130.5 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

295.83 FTE

(full time equivalent)



The Behavioral Health Division (BHD) enhances and maintains high-quality, accessible, client-driven, culturally-responsive and trauma-informed behavioral health care across Multnomah County. The division's efforts support the Health Department's goal of delivering on it's unique governmental statutory requirements and reducing preventable deaths – in particular the division's suicide prevention work, substance use prevention programs, and efforts to mitigate the impacts of addiction and supporting treatment and recovery. The division promotes wellness and recovery for youth, adults and older adults experiencing mental health or addiction challenges.

The BHD administers the County's Community Mental Health Program (CMHP) under Multnomah County's Board as Local Mental Health Authority (LMHA). This work includes:

- System management and coordination
- 24/7 crisis services – providing a call center, crisis assessment and treatment center, and outreach services
- Care coordination – including the CHOICE Model Program
- Pre- and post-commitment services – a legal process where a person alleged to need involuntary treatment for a mental health disorder may be ordered into treatment
- Older adult behavioral health services
- Adult protective services – investigating reports of abuse and neglect of older adults and adults with disabilities
- Aid and assist and forensic diversion services – providing people with the necessary services, skills, and psychological stability to aid and assist in their own legal defense if required

- Early Assessment and Support Alliance (EASA) – help for young people who have recently experienced psychosis

The division also provides prevention and early intervention to children, youth, and young adults. This includes services such as School-Based Mental Health, Early Childhood Intervention, Wraparound, and the Gun Violence Behavioral Health Response Team. In addition, the BHD provides recovery services and prevention programs to address gambling, substance use disorders, and suicide for children and adults.

The BHD is committed to addressing gaps in the system of care for the most vulnerable people in the County, including individuals experiencing chronic houselessness, people who have experienced abuse, and other people who have been marginalized.

In FY 2027, the BHD will continue to prioritize programs and services at the intersection of homelessness and behavioral health, specifically focusing on making the most of the capacity we have and using strategies that have proven effective in Multnomah County. These include County-delivered services, as well as those provided by contracted community partners.

The Behavioral Health Division specifically supports **Focus Area 1: Support Community Health and Wellness and Focus Area 6: Invest in Our Future** in the Countywide Strategic Plan**.**

Significant Division Changes

Major Changes to the County Financial Assistance Agreement: The Oregon Health Authority (OHA) recently changed how it gives the County Financial Assistance Agreement (CFAA) funding to counties for mental health and addiction services. While the total funding is going up—from $38.6 million this year to a proposed $43.4 million for FY 2027, a $4.8 million increase—the rules for using that money have changed.

In the past, the state required the county to spend money on very specific tasks. Now, they are giving the county more flexibility, with the requirement that the money must first be used to help specific groups of people the state has labeled as top priorities.

Because of these new rules, the county has shifted the CFAA funding in FY 2027. Some significant examples are:

- **School-Based Mental Health (40082):** This program lost about $1.0 million in state funding because it didn't fit the new state priorities. The county is now using General Fund to backfill these services.

- **Coordinated Diversion for Justice Involved Individuals (40088):** This program, which helps people in the legal system, fits within the state's new priorities. About $1.0 million is now being funded from the state CFAA allocation offsetting the transfer of General Funds to other programs.

By shifting these funds, the county can meet the new state requirements while still providing essential services to the community.

Changes to CareOregon Delegation Agreement: In the fall of 2025, CareOregon notified the Behavioral Health Division that they would not be renewing their contract. This led to a loss of $8.6 million of Medicaid funding and required FY 2026 mid-year budget reductions of $2.0 million ($4.1 million annualized) and 10.65 FTE (21.30 FTE annualized). These midyear reductions eliminated three Care Coordination teams within the division that focused on: Youth Intensive Care, Adult Intensive Care and Jail Care Coordination. These teams had been charged with providing specific care coordination services to CareOregon clients.

The division used one-time funds in FY 2026 to cover some of the lost funds, allowing more time to thoughtfully implement these reductions in FY 2027. Many of the changes in the division budget year over year are the result of this reduction.

Changes to Program Offers:

Behavioral Health Division Administration (40065): Eliminates two contracts for Peer Support and 1.00 FTE in the Office of Consumer Engagement (OCE), as well as a 1.00 FTE Administrative Analyst Senior position. The remaining team members will continue to prioritize outreach to affected communities and ensure that community perspectives are elevated in OCE's work.

Behavioral Health Quality Management (40068): Substantial reductions in funding have affected the Quality Management program, including:

- The Behavioral Health Workforce Initiative Grant ends in FY 2027. The state allocated a total of $3,314,108 one-time-only funds in FY 2024 to be used to fund training, tuition reimbursement, contracted clinical supervision, licensure costs, and other behavioral health workforce development activities. The program includes the remaining balance of $250,000.
- Other reductions resulted in the elimination of 1.88 FTE Data Analyst positions in the division and will impact response times on Electronic Health Record requests and projects.

Additionally, a 1.00 FTE Program Specialist Senior was moved from program 40082 into this program as it is related to quality management and billing. There is no change in services anticipated from this move.

Finally, reductions in other programs include: a 1.00 FTE Program Specialist Senior from Coordinated Diversion for Justice Involved Individuals (40088) and 1.00 Program Specialist from School Based Mental Health Services (40082) will have an additional impact on the programs and services the Quality Management team supports.

Behavioral Health Crisis Services (40069): A $548,795 reduction in Supportive Housing Services (SHS) funding for Shelter In Reach. The reduction will reduce outreach to approximately half the number of shelters currently served, from 16 sites to 8 sites. Additionally, there is a reduction in two days of access, from 7 to 5 days per week. The loss of SHS funding also results in the elimination of a 1.00 FTE Program Specialist Senior. Additional revenue was added to fund expanded call center coverage for Washington and Clackamas Counties.

Mental Health Crisis Assessment & Treatment Center (CATC 40070): This program will be eliminated. A $317,047 reduction in Beginning Working Capital (BWC) funding results in the loss of one bed in the Mental Health Crisis Assessment & Treatment Center (CATC). This resource was underutilized due to the majority of adults having insurance. CATC will continue to operate with Medicaid payers.

Behavioral Health Division Adult Protective Services (40071): A reduction of three Mental Health Consultant positions from 1.00 FTE to 0.80 FTE for a total of a 0.60 FTE reduction. The anticipated effect is a slower timeline for processing referrals received by Adult Protective Services while still maintaining required timelines.

Reallocation of 1.00 FTE Mental Health Consultant to program 40074 (Residential) to allocate staffing where it is most needed to meet legal requirements and CFAA expectations.

Mental Health Commitment Services (40072): An additional $1,062,574 annual state funding supporting 5.00 FTE was allocated from House Bill 2005 (2025) to Multnomah County's Community Mental Health Program due to increased civil commitment responsibilities.

Mental Health Residential Services (40074): A $360,115 reduction in CFAA funding eliminates 2.00 FTE from the Older Adult Behavioral Health Initiative due to changes in CFAA expectations and metrics as it relates to serving older adults. This reduces the BHD's capacity to offer consultation and training for community partners and internal teams working with older adults.

There is an increase of $1,000,000 in state funding for residential clients who do not have Medicaid.

A 1.00 FTE Residential Specialist was moved to this program from program 40071 to allocate staffing where it is most needed to meet legal requirements and CFAA expectations.

Bridgeview (40074B): One-time-only County General Fund in FY 2026 ended. Ongoing funding of $642,256 for Bridgeview was moved to this program offer from program 40074A. Ongoing Supportive

Housing Services (SHS) funding of $275,000 was added, which covers a known funding gap in FY 2027 and ensures the program remains viable in FY 2027.

Early Assessment & Support Alliance (EASA 40078): $298,402 of one-time only CareOregon funding ended, resulting in the reduction of 1.00 FTE Supervisor and 0.30 FTE Nurse. Reductions were anticipated and work on the Step Down Program will continue.

Community Based Mental Health Services for Children & Families (40080A): In FY 2026, 5.00 FTE were funded in the Gun Violence Behavioral Health Response Team with Beginning Working Capital (BWC), a one-time-only resource. The FY 2027 budget invests $541,321 of ongoing and $164,689 of one-time-only County General funds to backfill the loss of the BWC and retain 4.00 FTE to serve 125 youth and families. This investment is now reflected in program **40080B**.

Funding for 1.90 FTE to support the CARES NW (Child Abuse Response and Evaluation Services) was retained. The division also retains a 1.00 FTE Mental Health Consultant in a non-client facing role to provide culturally specific LGBTQIA2S+ clinical review and consultation across the youth facing programs.

Multnomah County Care Coordination (40081): There was a funding reduction due to the mid-year loss of $2,040,872 of CareOregon funding and the nonrenewal of the Delegation Agreement. This resulted in the elimination of 21.30 FTE across fiscal years. This reduction resulted in the end of three care coordination programs that provided intensive support to youth and adults with complex behavioral health needs. $784,905 of contract reductions to Peer Services will impact three vendors providing: peer services, brokerage, and rent assistance, and workforce development. These funds are reallocated to Crisis Services (40069) to align with current system priorities.

School Based Mental Health Services (SBMH 40082): A more accurate revenue projection for FY 2027 resulted in a decrease in revenue projections from FY 2026. FY 2027 projections are in line with actual revenue for FY 2026, this change is being backfilled with $417,808 in County General Funds. A reduction in CFAA funding resulted in additional County General Fund being moved to this program. Additionally, a reduction of $177,664 of one-time-only Beginning Working Capital eliminates a 1.00 FTE Billing Specialist, which may result in a reduced capacity for billing support.

Culturally Specific Mental Health Services (40084): $0.6 million of Supportive Housing Services (SHS) funds were reallocated to program Behavioral Health Resource Center (40105B) and an $850,000 reduction in County General Funds eliminates funding for a culturally specific (14 bed) transitional housing program. The program serves Black/African American men and prioritizes referrals for individuals with criminal justice involvement. It provides care coordination, mental health and substance use screening and support, peer services, housing support and serves approximately 45 people annually. This service is contracted out and does not result in any loss of County FTE.

Coordinated Diversion for Justice Involved Individuals and Mental Health Court (40088A/B): Additional CFAA funding was allocated to support this program as it is both a top priority service and a top priority population for CFAA. Changes to this program include a reallocation of 3.00 FTE (out of 5.00 FTE) funded with CFAA from Mental Health Court to provide diversion services as required by law. However, 1.00 FTE was added to partially backfill the reduction with General Fund. The total FTE for Mental Health Court is now 3.00 FTE and separated out into program 40088B. A 1.00 FTE Executive Specialist position was eliminated. An additional 1.00 FTE Program Specialist Senior providing quality management support was also eliminated and funding was used to mitigate the loss of other funding for quality management. A 1.00 FTE Data Technician was added to address business needs.

Family Involvement Team (40091): This program is eliminated due to internal reductions to Health Department General Funds and a CFAA reduction due to changes in the CFAA that prioritize other populations and services. This will impact contractual services for case management for women who have lost custody of their children. As of this year, 150 women have been served. Impact may be mitigated by treatment providers who collaborate with the Oregon Department of Human Services to serve this population.

Early Childhood Mental Health Program (40099): Because CFAA funding was reallocated away from this function, a contract for Early Childhood prevention services was eliminated. The service provider will continue to provide early childhood mental health services with other funding, but may reduce the service level.

Also as a result of CFAA funding reallocation, this program is reduced by 2.00 FTE spread across several positions. Five 1.00 FTE positions were reduced to 0.80 FTE each resulting in a 1.00 total FTE reduction. This will be accomplished by eliminating the summer work of these positions, but having them remain full time during the school year, when most programs are operating. The reduction also includes 1.00 FTE of culturally specific treatment services delivered by division staff.

Preschool For All Early Childhood Mental Health (40099B): The Department of County Human Services (DCHS) will retain this program (see program PEL - Program Quality & Provider Capacity Building - 25204) and will provide these services using a different model or provider. This shift back to DCHS resulted in an elimination of this program offer from the Behavioral Health Division and a reduction of 10.73 FTE.

Promoting Access to Hope (PATH) Care Coordination Continuum (40101): A reduction of $0.6 million in Supportive Housing Services funding resulted in a reduction of 1.00 FTE PATH Care Coordinator and direct client assistance funding used for short term rent assistance, transportation, and other basic needs to support recovery. In addition, 1.00 FTE was moved to Adult Addictions Treatment Continuum (40085).

Behavioral Health Resource Center (BHRC 40105A&B): There is a reduction of $825,690 Supportive Housing Services (SHS). County General Funds were reallocated to partially offset the reduction. No service impacts are anticipated for either program. This program reduced a 1.00 FTE Manager to improve span of control and added a 1.20 FTE Program Specialist Senior to balance workload.

Shelter, Housing and Supports (40112): A $1,431,557 reduction of Supportive Housing Services funds will result in the closure of 40 beds and services to approximately 110 participants annually at the Bridging Connections shelter program. This closure is compounded by funding reductions due to the end of one-time-only funding from CareOregon that supported Bridging Connections in FY 2026.

Behavioral Health Outcomes

1. Multnomah County residents are aware of and can access available Multnomah County Behavioral Health resources for assessment, referral, and engagement with appropriate care for mental health and substance use needs.

Key Performance Indicator (KPI) 1.1: Percent of Urgent Walk-in Clinic (UWIC) clients who receive care without need to be referred to emergency service care

KPI 1.1 Description: UWIC offers support and services to reduce the need for an individual to access more expensive higher levels care in Emergency Departments and hospitals. Providing care in a behavioral health setting specific to the needs of patients in crisis is more effective and efficient for the patient and a better use of resources for the community.

FY 2026 Estimate 95% not referred to Emergency Department Q1 5% referred to ED (53 referred 1,085 total) Q2 5.1% referred to ED (61 referred, 1,215 total)	**FY 2027 Target:** 95% not referred to the Emergency Department

KPI 1.1 Equity Considerations: Anyone can access this service at no cost/charge regardless of insurance coverage or demographic group. This mitigates barriers to payment that may prevent an individual from accessing needed services. The program aims to fill gaps in availability of services, reduce crises, and increase support in the community.

Key Performance Indicator (KPI) 1.2: Percent of Behavioral Health Call Center clients who receive care without need to be referred to emergency services or law enforcement

KPI 1.2 Description: The Call Center goal is to support individuals and reduce the need for dispatch of emergency services and specifically law enforcement. Emergency services include referral to: 911 medical, 911 law enforcement, mobile crisis (Project Respond/PR), and Portland Street Response (PSR).

The Call Center provides some support to other counties by contract. Data shown is for lines specific to Multnomah County support.

FY 2026 Estimate: 81.5% did not need referral to emergency services or law enforcement (17,045 among 20,942 total calls in FY 2026 Q1 and Q2 combined)). Referrals were as follows in FY26 Q1 and Q2 combined: ● 911 Law Enforcement 3.5% (738 calls) ● 911 medical 2% (461 calls) ● Project Respond 10% (2,172 calls) ● Portland Street Response 2% (342 calls) ● 911 non-emergency 1% (184 calls) In FY 2025, the last year for which complete data are available, 49,810 total inbound calls were received.	**FY 2027 Target:** 81% not referred to emergency services or law enforcement

KPI 1.2 Equity Considerations: We aim to reduce unnecessary law enforcement involvement in crises. Additionally, we understand the trauma that can be caused by the emergency response of other professionals as well. We seek to support the individual in accessing care on their own through connection to UWIC, referral, and linkage to community and personal support.

Key Performance Indicator (KPI) 1.3: Percent of clients served annually in Promoting Access to Hope (PATH) care coordination who were successfully placed

KPI 1.3 Description: Successfully placed means people have been verified as enrolled in services, and engaged with a provider who is working with them.

FY 2026 Estimate: 46% placed in one or more services For the period 7/1/2025-3/12/2026 this includes 740 unique clients.	**FY 2027 Target:** 50% placed in one or more services

KPI 1.3 Equity Considerations: The Promoting Access to Hope (PATH) Care Coordination Continuum is a low-barrier program supporting individuals with substance use disorders. PATH's goal is to support anyone in need of services by creating personalized care plans. The program helps clients successfully navigate the continuum of care.

Outcome 1 Program Offers All Behavioral Health program offers contribute to Outcome 1 except for the following:

- 40065 - Behavioral Health Division Administration
- 40067 - Medical Records for Behavioral Health Division
- 40068 - Behavioral Health Quality Management
- 40106 - Specialized Street-based Outreach Services

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2. People receive the available appropriate and effective Multnomah County Behavioral Health Division services that improve outcomes for mental health and substance use and address social determinants of health.

This outcome is to help people in Multnomah County to achieve and sustain well-being through improved mental health and reduced substance use harms that can lead to avoidable early deaths.

Key Performance Indicator (KPI) 2.1: Percent of individuals accessing the Urgent Walk-in Clinic (UWIC) accessing onsite Licensed Medical Provider (LMP) services

KPI 2.1 Description: Individuals accessing the UWIC that request and are clinically appropriate to meet with an LMP can do so the same day and for follow up care.

FY 2026 Estimate Q1 46% of individuals met with the LMP (438 served, 951 total) FY 2026 Q2 44% of individuals met with the LMP (426 served, 973 total) Approximately 4,000 people were served FY 2024	**FY 2027 Target:** 45% of individuals who access the UWIC meet with the LMP

KPI 2.1 Equity Considerations: This service is available to anyone at no cost/charge to the individual regardless of insurance. This ensures that people don't lose access to medications due to barriers.

Key Performance Indicator (KPI) 2.2: Percent of individuals engaged in deflection who access a service in <90 days

KPI 2.2 Description: Criteria for deflection completions were revised effective January 2026.

For FY 2027, this new KPI is defined as % of individuals referred to deflection who engage in deflection by receiving services at the pathway center within 90 days. This update will not allow for direct comparisons to prior years. Going forward the KPI provides a constant indicator to measure against. Prior to January 2026, deflection completion was defined as accessing a service within 30 days.

FY 2026 Estimate: From the period of July 1st - December 31st, 2025, among 268 total people referred to deflection, 35% of individuals engaged in by accessing a service within 30 days	**FY 2027 Target:** 70%, using the revised KPI definition of people accessing services within 90 days

KPI 2.2 Equity Considerations: The Deflection Program closely tracks and assesses referrals into and engagement with the program, including participant demographics, to identify and address health inequities related to race/ethnicity and housing status. This service is available to anyone referred who voluntarily participates in the program, at no cost to the individual and regardless of insurance.

Key Performance Indicator (KPI) 2.3: Number of individuals served in treatment and recovery support services

KPI 2.3 Description: Services provided to uninsured or underinsured adult County residents (at or below 200% poverty) for Substance Use Disorder treatment and recovery support services. These services contribute to a reduction in secondary health complications, a decreased likelihood of involvement in drug-related criminal activities, and offer individuals a pathway toward recovery ultimately avoiding potential preventable early deaths. These services are for people who meet low income requirements and any insurance they might have doesn’t cover the required services.

FY 2026 Estimate: 4,000 uninsured/underinsured people served (1,547 treatment, 2,453 recovery support services)	**FY 2027 Target:** 4,000 uninsured/underinsured people served (1,547 treatment, 2,453 recovery support services)

KPI 2.3 Equity Considerations: The continuum of treatment and recovery includes culturally-specific and responsive programs staffed by people with lived experience with demonstrated success working with the diverse populations being served, including: communities of color; people living with HIV, LGBTQIA2+, pregnant women and parents whose children live with them while they are in residential treatment.

Outcome 2 Program Offers: The following program offers contribute to Outcome 2.

- 40069 - Behavioral Health Crisis Services
- 40072 - Mental Health Commitment Services
- 40074 - Mental Health Residential Services
- 40075 - Choice Model
- 40078 - Early Assessment & Support Alliance
- 40080A - Community Based Mental Health Services for Children & Families
- 40080B - Gun Violence Response Program
- 40081 - Multnomah County Care Coordination
- 40082 - School Based Mental Health Services
- 40083 - Behavioral Health Promotion, Suicide Prevention and Postvention Services
- 40084 - Culturally Specific Mental Health Services
- 40085 - Adult Addictions Treatment Continuum
- 40088 - Coordinated Diversion for Justice Involved Individuals
- 40089 - Addictions Detoxification & Post Detoxification Housing
- 40099 - Early Childhood Mental Health Program
- 40101 - Promoting Access To Hope (PATH) Care Coordination Continuum
- 40105B - Behavioral Health Resource Center (BHRC) - Shelter/Housing
- 40108 - Stabilization and Integration Housing Services
- 40112 - Shelter, Housing and Supports

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3. Multnomah County communities have capacity and resources to support good mental health and prevent harmful substance use through both universal and focused primary prevention interventions and services.

Key Performance Indicator (KPI) 3.1: Percent reduction in hospitalization rate 3 months pre- and 6 months post-enrollment - a core goal of the Early Assessment and Support Alliance (EASA) program

KPI 3.1 Description: EASA is an evidence-based model showing that early intervention and immediate access to treatment can directly reduce hospitalization rates and the long-term disabling consequences of psychosis.

FY 2026 Estimate	**FY 2027 Target:**
Total Clients Served: 116 78% reduction in hospitalization rate	Total clients served: 120 85% reduction in hospitalization rate

KPI 3.1 Equity Considerations: EASA provides individualized, community-based services reducing access barriers and addressing health inequities. Services are culturally responsive and 30% of our providers have culturally specific knowledge, skills and abilities. In FY 2026, 61% of participants that were served were people of color.

Key Performance Indicator (KPI) 3.2: Percent of youth and families enrolled in the Mobile Response and Stabilization Services (MRSS) connected to "clinically recommended aftercare" at discharge

KPI 3.2 Description: Per OHA website, Mobile Response and Stabilization Services (MRSS) is a nationally recognized best practice for crisis response. The MRSS model is designed to provide youth and their families with developmentally appropriate crisis intervention that is designed to meet the unique needs of children, youth, young adults, and their families." Youth under age 20 are eligible and referral comes from mobile crisis, hospital, or UWIC.

FY 2026 Estimate: 77% of youth and families are enrolled in the MRSS connected to "clinically recommended aftercare" at discharge (FY 2025 39 connected to aftercare among 49 total discharged) OHA recently changed the process and no data has been shared for FY 2026. We expect the data to be similar to FY 2025.	**FY 2027 Target:** 80% of youth and families are enrolled in the MRSS connected to "clinically recommended aftercare" at discharge.

KPI 3.2 Equity Considerations: This service is available to all Multnomah County youth and families in crisis, at no cost to the family. The goal is to provide short term (56 days) service to connect and link to appropriate ongoing care to reduce the likelihood of future or ongoing crisis.

Outcome 3 Program Offers All Behavioral Health program offers contribute to Outcome 3 **<u>except</u>** for the following:

- 40065 - Behavioral Health Division Administration
- 40067 - Medical Records for Behavioral Health Division
- 40068 - Behavioral Health Quality Management
- 40075 - Choice Model
- 40106 - Specialized Street-based Outreach Services

Table of Division Programs

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

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
40065	Behavioral Health Division Administration		1,390,706	1,642,195	3,032,901	10.80
40067	Medical Records for Behavioral Health Division		162,451	696,976	859,427	4.75
40068	Behavioral Health Quality Management		1,096,242	3,988,715	5,084,957	20.98
40069	Behavioral Health Crisis Services		2,835,897	17,018,918	19,854,815	38.35
40071	Behavioral Health Division Adult Protective Services		326,863	1,334,932	1,661,795	7.40
40072	Mental Health Commitment Services		0	6,700,265	6,700,265	32.50
40074A	Mental Health Residential Services		1,407,865	9,222,357	10,630,222	9.80
40074B	Bridgeview Mental Health Residential Services		642,256	275,000	917,256	0.00
40075	Choice Model		173,614	5,326,424	5,500,038	13.88
40077	Mental Health Treatment & Medication for the Uninsured		197,933	0	197,933	0.00
40078	Early Assessment & Support Alliance		649,456	2,497,506	3,146,962	12.98
40080A	Community Based Mental Health Services for Children & Families		632,837	399,132	1,031,969	3.77
40080B	Gun Violence Response Program		706,009	0	706,009	4.00
40081	Multnomah County Care Coordination		0	10,496,455	10,496,455	33.12
40082	School Based Mental Health Services		3,721,080	1,256,807	4,977,887	22.82
40083	Behavioral Health Promotion, Suicide Prevention and Postvention Services		226,941	547,794	774,735	3.56

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
40084	Culturally Specific Mental Health Services		1,618,136	0	1,618,136	0.00
40085	Adult Addictions Treatment Continuum		2,164,125	10,289,423	12,453,548	6.60
40086	Addiction Services Gambling Treatment & Prevention		0	638,360	638,360	2.54
40087	Addiction Services Alcohol & Drug Prevention		0	1,461,174	1,461,174	2.09
40088A	Coordinated Diversion for Justice Involved Individuals		250,360	6,943,241	7,193,601	27.50
40088B	Mental Health Court		173,000	343,023	516,023	3.00
40089	Addictions Detoxification & Post Detoxification Housing		1,041,829	1,114,773	2,156,602	1.50
40099	Early Childhood Mental Health Program		2,290,310	285,724	2,576,034	11.99
40101	Promoting Access To Hope (PATH) Care Coordination Continuum		829,041	594,878	1,423,919	6.90
40104	Deflection and Sobering Program		467,783	5,150,000	5,617,783	10.00
40105A	Behavioral Health Resource Center (BHRC) - Day Center		5,366,693	314,988	5,681,681	2.00
40105B	Behavioral Health Resource Center (BHRC) - Shelter/Housing		1,872,170	1,726,045	3,598,215	0.00
40108	Stabilization and Integration Housing Services		1,745,797	0	1,745,797	1.00
40112	Shelter, Housing and Supports		51,012	8,184,320	8,235,332	2.00
	Total Behavioral Health		**32,040,406**	**98,449,425**	**130,489,831**	**295.83**

Division: Behavioral Health

Program Characteristics:

Program Description

The Behavioral Health Division (BHD) operates as the Community Mental Health Program (CMHP). The CMHP is required to maintain a director and other leadership positions that have the credentials to complete the work for which the CMHP is responsible -- supporting a system of locally available, effective safety net services. Safety net services provide behavioral health care to people who might not otherwise have access to this care. Services must be accessible, coordinated, and effective. Required core services include screening, assessment, referrals to providers and community-based organizations, and emergency or crisis services. BHD directly provides these services, as well as contracts with providers. The BHD administration provides leadership and oversight for a comprehensive, recovery-focused system of care. Through annual, data-driven strategic planning, BHD works to prevent, intervene in, and treat mental illness and addiction.

BHD leadership continuously assesses its continuum of services to respond to the changing needs and demographics of the County. 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 voices through the Office of Consumer Engagement, frequent provider feedback, adult system and child system advisory meetings, and focus groups. The division monitors contracts for regulatory and clinical compliance. It reviews business and clinical decisions to ensure that finite resources serve the most vulnerable populations. Division administration works regularly to inform state policy and ensure the best outcomes for our community.

Equity Statement

The BHD is grounded in values of racial and social equity, consumer driven services and trauma informed principles. With culturally responsive and evidence-based practices, BHD serves people who are underinsured or uninsured, and people experiencing homelessness.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,586,786	$1,322,119	$1,312,790	$1,343,921
Contractual Services	$384,579	$0	$0	$0
Materials & Supplies	$8,494	$5,426	$6,391	$6,797
Internal Services	$309,433	$258,437	$71,525	$291,477
Unappropriated & Contingency	$0	$3,154,660	$0	$0
Total GF/non-GF	**$2,289,292**	**$4,740,642**	**$1,390,706**	**$1,642,195**
Total Expenses:	**$7,029,934**		**$3,032,901**	
Program FTE	7.60	4.98	6.24	4.56
Program Revenues				
Intergovernmental	$0	$983,638	$0	$1,034,909
Beginning Working Capital	$0	$3,757,004	$0	$607,286
Total Revenue	**$0**	**$4,740,642**	**$0**	**$1,642,195**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Total Behavioral Health Advisory Council Meetings	23	23	23
Total number of Leadership team strategic planning work sessions held annually	N/A	N/A	4

Division: Behavioral Health

Program Characteristics:

Program Description

As the Community Mental Health Program (CMHP), the Behavioral Health Division (BHD) is responsible for maintaining client records per Oregon Administrative Rule 309-014. The Medical Records Program is responsible for the legally required internal management of all BHD clinical records. The BHD provides services to more than 20,000 clients annually. Each client has a clinical health record in one of our two Electronic Health Record (EHR) systems. The Records Team reviews, processes, and uploads all clinical records into the EHR. This unit ensures that all BHD medical records are maintained in compliance with federal and state laws and regulations, and County rules, policies and procedures.

Program staff provide multiple services including: document review, indexing and uploading, processing and releasing records requests and subpoenas to clients and community partners, quality assurance, data entry for reporting, archiving and retrieval of client records, form design and management, notary services, maintaining the integrity of the EHR, reviewing and performing merges of duplicate client accounts, reviewing and completing deletion requests from the EHR, reviewing privacy incidents, reviewing and uploading Release of Informations (ROIs) into the EHR, and providing health information management expertise. The team works collaboratively with both EHR support teams and the Billing Team to maintain proper and correct electronic records. Records staff provide training and support to BHD Clinicians, assist with locating documents in client records, and review documents for needed corrections. Staff work closely with the County Privacy Team to assist with the review of privacy incidents and support staff with necessary EHR cleanup to maintain the integrity of records.

Equity Statement

Medical records deploys standardized, mandatory demographic data collection (REALD/SOGI) to improve care quality and identify disparities. This data accuracy avoids misidentifying or ignoring disparities that can perpetuate racial inequities. The medical records team complies with all records requests within 5 business days to ensure everyone can access services without delays.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$279,054	$489,164	$31,459	$667,617
Materials & Supplies	$0	$87	$2,235	$6
Internal Services	$53,054	$146,653	$128,757	$29,353
Total GF/non-GF	**$332,108**	**$635,904**	**$162,451**	**$696,976**
Total Expenses:	**$968,012**		**$859,427**	
Program FTE	1.75	4.00	0.25	4.50
Program Revenues				
Intergovernmental	$0	$489,856	$0	$539,265
Beginning Working Capital	$0	$146,048	$0	$157,711
Total Revenue	**$0**	**$635,904**	**$0**	**$696,976**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Count of record items processed annually plus scanned document count	60,000	81,490	60,000
Percent of client records requests that are provided to requestor within allowable timelines	100%	100%	100%

Division: Behavioral Health

Program Characteristics:

Program Description

The Quality Management (QM) Unit supports the Behavioral Health Division (BHD) with the following essential infrastructure: Compliance, Electronic Health Records (EHR), Reporting, and Revenue. These teams deliver legally required and vital functional and safety services to client-facing programs, while also helping retain the workforce by aiding in staff onboarding, providing tools and training, and enhancing divisional efficiencies.
1) The Compliance team ensures adherence to regulations and policies, helping BHD quickly identify, stop, and reduce risks to client and staff safety. It conducts internal and external investigations and audits, assists with staff onboarding, develops BHD policies, reviews contracts, oversees credentialing, manages critical incidents and grievances, implements corrective measures, and offers technical support. 2) The Evolv team locally oversees the EHR, maintaining, updating, and customizing Evolv to meet clinicians' needs and ensure compliance with clinical documentation requirements. 3) The Records team manages all clinical records in Evolv with a limited scope in Epic, ensuring secure entry into Evolv and Epic, fulfilling records requests, maintaining EHR integrity, and evaluating deletion requests for privacy issues. 4) The Reporting team provides timely data to measure outcomes, demonstrate responsible use of public funds, and inform program development. 5) The Revenue team increases billable revenue by managing authorizations and claims for Direct Clinical Services, Multnomah Treatment Fund, and other Multnomah Alcohol and Drug treatment services, reviewing claims for accurate documentation and reimbursement.

Equity Statement

These teams advance equity by providing real time information and data on systems, programs, and policies that perpetuate systemic barriers to opportunities and benefits for Black, Indigenous and People of Color (BIPOC), those with behavioral health needs, and other underserved populations.
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Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$971,422	$3,504,015	$914,508	$3,010,180
Contractual Services	$0	$186,301	$0	$12,500
Materials & Supplies	$6,446	$745,035	$74,763	$432,593
Internal Services	$47,783	$788,394	$106,971	$533,442
Total GF/non-GF	**$1,025,651**	**$5,223,745**	**$1,096,242**	**$3,988,715**
Total Expenses:	**$6,249,396**		**$5,084,957**	
Program FTE	5.12	17.24	5.00	15.98
Program Revenues				
Intergovernmental	$0	$3,154,848	$0	$2,378,999
Beginning Working Capital	$0	$2,068,897	$0	$1,609,716
Total Revenue	**$0**	**$5,223,745**	**$0**	**$3,988,715**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of requests managed by The Evolv Support and Reporting Teams	3,464	2,815	2,600
Number of BHD policies reviewed and updated based on annual and legislative required changes	91	45	50

Division: Behavioral Health

Program Characteristics:

Program Description

As the Community Mental Health Program (CMHP), the Behavioral Health Division is responsible for a 24/7 crisis system (per OAR 309-019 and 309-072). This program funds five crisis services:
1) The Multnomah County Behavioral Health Call Center - provides 24/7/365 phone support, including risk assessment, crisis counseling in the caller's preferred language, safety planning, de-escalation, referrals, and triage/dispatch of mobile crisis outreach. Dedicated warm transfer lines with 911 and 988 improve coordination and reduce law enforcement intervention. The Latine Mental Health Line offers a culturally specific option. 2) Mobile Crisis Intervention Teams - clinicians and peer support specialists respond county-wide to meet with individuals in crisis, perform in-person risk assessments, and develop safety plans. Services provide follow-up/wrap-around support and aim to reduce Law Enforcement response. 3) Mobile Response and Stabilization Services - specific follow-up and wrap-around services for youth and families in crisis, focusing on service connection and reducing future crisis episodes. 4) The Urgent Walk-In Clinic (UWIC) - provides immediate access to assessment and support from clinicians, Peer Support Specialists, and licensed medical professionals. This program reduces the use of emergency departments and offers immediate drop-off support for law enforcement. 5) Disaster Behavioral Health - provides a behavioral lens and response coordinated with emergency management. Supports on-scene emotional and practical support to victims, families, and communities impacted by traumatic events.

Equity Statement

Crisis Services programs recognize systemic bias leading to crisis as well as in traditional law enforcement response. We are committed to responding in a culturally responsive and trauma-informed manner and reducing law enforcement engagement with those in a behavioral health crisis. Crisis services intervene at the individual level while also addressing larger systemic change within the larger emergency response service array.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$407,567	$6,856,229	$2,353,933	$5,950,819
Contractual Services	$1,230,830	$10,156,169	$419,722	$9,555,993
Materials & Supplies	$537	$63,211	$2,571	$40,417
Internal Services	$0	$1,558,241	$59,671	$1,471,689
Total GF/non-GF	**$1,638,934**	**$18,633,850**	**$2,835,897**	**$17,018,918**
Total Expenses:	**$20,272,784**		**$19,854,815**	
Program FTE	2.00	36.85	12.56	25.79
Program Revenues				
Intergovernmental	$0	$17,633,850	$0	$16,567,713
Total Revenue	**$0**	**$17,633,850**	**$0**	**$16,567,713**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Total services provided annually throughout crisis system (BHCC, MCIT, MRSS, UWIC)	104,625	106,872	105,000
% of severe weather shelters supported by Disaster Behavioral Health volunteers and/or staff	100	100	100

Division: Behavioral Health

Program Characteristics:

Program Description

As the Community Mental Health Program (CMHP), the Behavioral Health Division (BHD) is responsible for conducting abuse investigations and providing protective services per OAR 419-110 and ORS 430.735 to 430.765. Research shows that adults (18+) with mental health diagnoses who are engaged in mental health services are at increased risk of abuse and/or neglect - not only in the community, but also within the mental health system of care.

The division's Adult Protective Services (APS) protects adults with severe and persistent mental illness from abuse and victimization and investigates abuse and neglect per Oregon law. Activities include providing consultation and screening of abuse reports from mandatory reporters, community members and victims of abuse. Guidance comes from Oregon State's Office of Training, Investigations and Safety (OTIS) and includes information regarding the scope of the program's authority and the interpretation and application of the relevant state statutes. BHD consults and exchanges with the other APS programs in the county, namely with Aging, Disability, and Veterans' Service Division and Intellectual and Developmental Disability Services. The program also includes risk case management (RCM), which serves as an additional layer of support and connection for those with a mental health disability, substance use disorder, homelessness, or abuse. Additionally, the program provides community education and training to internal and external partners.

The program also conducts Death Reviews, auditing client notes to determine if provider abuse or neglect contributed to a death, with 91 reviews closed in FY 2025.

Equity Statement

Adults with severe and persistent mental illness, particularly within marginalized racial and cultural groups, face increased risks and systemic barriers. APS applies a cultural lens to all protective services and abuse investigations, fostering an open dialogue on culture and race, thus increasing identification and reporting of concerns.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,324,583	$261,435	$167,169	$1,268,123
Materials & Supplies	$3,247	$62	$3,354	$62
Internal Services	$206,124	$29,531	$156,340	$66,747
Total GF/non-GF	**$1,533,954**	**$291,028**	**$326,863**	**$1,334,932**
Total Expenses:	**$1,824,982**		**$1,661,795**	
Program FTE	7.49	1.51	0.80	6.60
Program Revenues				
Intergovernmental	$0	$291,028	$0	$1,334,932
Total Revenue	**$0**	**$291,028**	**$0**	**$1,334,932**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
# of screenings/investigations	1,062	939	900
# of overall calls received	1,497	1,493	1,495

Division: Behavioral Health

Program Characteristics:

Program Description

The Community Mental Health Program (CMHP) is obligated by law to perform various duties related to involuntary mental health treatment.

The CMHP is responsible for prehearing commitment investigations. Multnomah County's certified investigators investigate Notices of Mental Illness (NMIs), including 'hospital holds,' 'Magistrate holds,' and 'Two party petitions'. For all Notices of Mental Illness received, a certified mental health investigator conducts a prehearing investigation within three judicial days, submits a recommendation to the court, and provides an investigation report as required under ORS 426.070. When applicable, the CMHP and the treating physician may certify a person for diversion at any time up to three judicial days after the person is placed into custody.

The CMHP is required to monitor individuals in Multnomah County under civil commitment, conditional release, or trial visit. Multnomah County's post-commitment and trial visit monitors meet routinely with all committed patients in Multnomah County at various commitment sites to assess mental status and progress toward discharge. These monitors collaborate with inpatient and outpatient providers plus significant others to create discharge plans in the least restrictive environments. For every person placed under commitment or trial visit, a monitor conducts a minimum of twice weekly visits to those in hospital settings under civil commitment, weekly visits to those in subacute care under civil commitment, and weekly to monthly visits to those in residential and community settings under trial visit.

Equity Statement

Civil commitment has the potential to disproportionately affect groups with racialized identities and other marginalized groups, reflecting systemic biases rather than purely clinical needs. Multnomah County's Mental Health Commitment Services work to ensure that dignity and due process rights are protected for all those who go through the civil commitment process.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,558,730	$3,259,926	$0	$5,867,811
Contractual Services	$136,070	$327,733	$0	$287,000
Materials & Supplies	$5,813	$31,620	$0	$65,059
Internal Services	$505,548	$131,655	$0	$480,395
Total GF/non-GF	**$2,206,161**	**$3,750,934**	**$0**	**$6,700,265**
Total Expenses:	**$5,957,095**		**$6,700,265**	
Program FTE	8.80	18.00	0.00	32.50
Program Revenues				
Intergovernmental	$0	$3,750,934	$0	$6,700,265
Total Revenue	**$0**	**$3,750,934**	**$0**	**$6,700,265**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Total number of Notices of Mental Illness (NMIs) investigated	2,126	2,138	2,400
% of NMIs investigated resulting in hearing recommendation	7.5%	7.5%	7.5%

Division: Behavioral Health

Program Characteristics:

Program Description

As the Community Mental Health Program (CMHP), the Behavioral Health Division is responsible for oversight of residential mental health programs per OAR 309-035. Multnomah County hosts the greatest portion of all licensed residential programs in the state (94 residential programs and 685 beds). This includes Secure Residential Treatment Programs, Residential Treatment Homes/Facilities, Adult Care Homes, Crisis/Respite Programs, and Supportive Housing Programs.

The Division's Residential Services (RS) program provides mandated health and safety monitoring and technical assistance to licensed facilities, ensuring that they meet or exceed operating standards for all residents regardless of the residents' county of origin. Program services include clinical consultations, problem solving, participation in client interdisciplinary team meetings, review of appropriateness of unplanned discharges, and monitoring and enforcement of client rights. RS and Quality Management (QM) staff also participate in audits and licensing reviews. RS staff review and respond to 25,000 client incident reports annually, and, in partnership with QM staff, conduct Critical Incident Reviews and provide quality improvement recommendations. This program also supports pass through funds and other funding for semi-structured and supportive housing programs. In FY 2025, RS supported the opening of 9 new residential programs totaling 72 new units. RS has also interviewed and written Letters of Acknowledgement for 57 programs that have yet to open.

Equity Statement

The RS program is committed to advancing equity and mitigating the impacts of systemic racism and inequities on all residents in licensed mental health facilities in Multnomah County. To that end, RS strives to ensure equitable access to stable and quality residential placements, and utilizes an equity lens when providing technical or clinical support to licensed facility providers.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,171,850	$664,779	$386,791	$1,444,713
Contractual Services	$0	$7,700,691	$872,283	$7,698,285
Materials & Supplies	$0	$17,928	$0	$17,928
Internal Services	$257,518	$96,856	$148,791	$61,431
Total GF/non-GF	**$1,429,368**	**$8,480,254**	**$1,407,865**	**$9,222,357**
Total Expenses:	**$9,909,622**		**$10,630,222**	
Program FTE	6.75	4.05	1.86	7.94
Program Revenues				
Intergovernmental	$0	$8,480,254	$0	$9,222,357
Total Revenue	**$0**	**$8,480,254**	**$0**	**$9,222,357**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
# of placements that receive health and safety oversight by Residential Services	691	717	700
# of CMHP referrals managed by Residential Services	80	107	125

Division: Behavioral Health

Program Characteristics:

Program Description

The Bridgeview supported housing program provides essential housing and supportive services to individuals in downtown Portland. It fills an important role within supported 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 people exiting homelessness who are also experiencing behavioral health challenges. The program helps people to gain stability and begin to work toward their future goals, decreasing their use of other 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 licensed medical practitioner (LMP) and nurse are on-site several days a month to provide medication management and additional nursing support. The building has 47 Single Room Occupancy units 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.

Equity Statement

This program is designed to serve some of the most marginalized individuals and those most impacted by systemic racism in the community who are struggling with behavioral health concerns and houselessness, by offering housing services to individuals who would not otherwise have access to housing.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$0	$642,256	$275,000
Total GF/non-GF	**$0**	**$0**	**$642,256**	**$275,000**
Total Expenses:	**$0**		**$917,256**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of individuals served	46	49	51
Number of participants who retain stable housing at Bridgeview for 2+ years	N/A	N/A	40

Division: Behavioral Health

Program Characteristics:

Program Description

The Choice Model Program offers Care Coordination and contracted services for people with Severe and Persistent Mental Illness (SPMI). The program diverts people from the Oregon State Hospital (OSH), coordinates successful discharge from acute psychiatric care into appropriate community placements, coordinates care for individuals in licensed residential facilities, and develops supports to maximize independent living.

The Choice Program collaborates with other division units, hospitals, OSH, OHA/Health Systems Division, Coordinated Care Organizations, and other counties to coordinate placement and transition within a statewide network of licensed housing providers. The program aims to help people achieve the maximum level of independent functioning possible by diverting them from an ‘admission to hospital’ level of care into community-based resources. It supports timely, safe, and appropriate discharges, and provides access to supports to help people achieve independent living and self-sufficiency in the least restrictive housing environment. Services include Exceptional Needs Care Coordination (ENCC), access to peer services, funding for uninsured/underinsured clients for outpatient services, housing supports, and rental assistance.

Services offered include: supported housing development and rental assistance, ENCC to assure access to appropriate housing placements, and the development of supports to identify the least restrictive setting for stability. Care Coordination provides referrals to community mental health programs, supported employment, and transition planning to efficiently use licensed residential housing capacity.

Equity Statement

The Choice Program provides culturally and linguistically responsive care coordination and connects clients to aligned service providers—an established best practice for achieving equitable health outcomes. The Choice Model continues to prioritize and update practices to clarify access, remove systemic barriers, and promote more equitable service delivery.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$2,396,543	$0	$2,459,258
Contractual Services	$0	$3,086,499	$0	$2,715,313
Materials & Supplies	$0	$17,387	$0	$7,914
Internal Services	$0	$569,749	$173,614	$143,939
Total GF/non-GF	**$0**	**$6,070,178**	**$173,614**	**$5,326,424**
Total Expenses:	**$6,070,178**		**$5,500,038**	
Program FTE	0.00	14.32	0.00	13.88
Program Revenues				
Intergovernmental	$0	$6,070,178	$0	$5,326,424
Total Revenue	**$0**	**$6,070,178**	**$0**	**$5,326,424**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of individuals served	754	767	750
% of Choice-enrolled individuals with an active legal status (Aid &Assist, Civil Commitment, Psychiatric Security Review Board, or Guardianship) at the point of r	N/A	50%	60%

Division: Behavioral Health

Program Characteristics:

Program Description

Without insurance, people are not able to access outpatient behavioral health services. If they experience a gap in coverage, they immediately lose access to these services. For various reasons, we currently face increased risk of individuals losing access to insurance or being ineligible and therefore not having access to care.

The Multnomah Treatment Fund (MTF) prioritizes community-based services for people who experience challenges associated with severe mental illness. MTF provides funds to outpatient behavioral health providers to ensure that people who experience a gap in funding do not lose access to needed care, preventing more drastic and resource intensive consequences including hospitalization, incarceration, loss of housing and other potential negative outcomes. Services can include individual and group therapy, case management, community outreach, housing assistance, medication management, co-occurring disorder treatment, care coordination, and crisis intervention. Clients are linked to other supports and get help accessing OHP benefits. The program supports client stability, and can reduce trauma and suffering. Contracted providers are responsible to ensure diversity training for staff, to maintain a diverse workforce, and to incorporate social equity innovation into their policy development and service delivery.

Equity Statement

This program is designed to serve those in the community that are disproportionately impacted by systemic racism and marginalization. Services directly support care for our most vulnerable and impacted community members.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$298,127	$0	$197,933	$0
Total GF/non-GF	**$298,127**	**$0**	**$197,933**	**$0**
Total Expenses:	**$298,127**		**$197,933**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Total # of adults who received County funded outpatient services or medication	168	178	225
Total # of community providers serving uninsured individuals with this funding	3	3	3

Division: Behavioral Health

Program Characteristics:

Program Description

The Early Assessment and Support Alliance (EASA) is a two-year early psychosis intervention program addressing the needs of young people aged 12 to 30 who demonstrate initial symptoms of psychosis or are found to be at high risk for developing psychosis. The program reduces post-program enrollment hospitalizations by roughly 80% each year.

EASA is an evidence-based model which demonstrates that early intervention and immediate access to treatment can directly reduce psychiatric hospitalization rates and the long-term debilitating consequences of psychosis. The multidisciplinary team approach and treatment services are designed to meet the fidelity standards of the model as required by the state. The team has been formed to include linguistically and culturally-specific consultants who have experience and demonstrated success getting outcomes with the populations served.

Treatment is community-based and services are individualized based on age, personal preferences, and cultural needs. Services include individual and/or family psychotherapy, medication management, case management, support for employment, psychiatric nursing services, peer support, occupational therapy assessment and intervention, multi-family group, psychoeducation, and social skills building groups.

EASA Step-Down Pilot launched in FY 2026, which is a bridge between the extensive services of EASA and people independently managing their health. Services help clients maintain recovery and independent life skills, ultimately helping them transition to lower levels of service in the community.

Equity Statement

EASA provides individualized services in the community, which reduces participants’ barriers to access. Services are culturally responsive and 30% of our providers have knowledge, skills and abilities and demonstrated success working with culturally-specific populations.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$599,082	$1,960,965	$647,814	$1,832,496
Contractual Services	$9,640	$179,633	$531	$177,399
Materials & Supplies	$0	$6,805	$989	$1,960
Internal Services	$87	$492,193	$122	$485,651
Total GF/non-GF	**$608,809**	**$2,639,596**	**$649,456**	**$2,497,506**
Total Expenses:	**$3,248,405**		**$3,146,962**	
Program FTE	3.23	11.17	3.11	9.87
Program Revenues				
Intergovernmental	$0	$1,911,588	$0	$1,737,506
Service Charges	$0	$728,008	$0	$760,000
Total Revenue	**$0**	**$2,639,596**	**$0**	**$2,497,506**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Total individuals enrolled in the EASA program receiving ongoing services.	119	116	120
Number of unduplicated individuals referred to the EASA program.	191	186	200

Division: Behavioral Health

Program Characteristics:

Program Description

Community Based Mental Health for Children, Youth and Families offers essential safety net services, providing culturally-responsive mental health support for children and youth impacted by child abuse and trauma. The program uses evidence-based, trauma-informed practices for family support, individual/group therapy, skill-building, and violence prevention.

This program offer also includes a Mental Health Consultant position with an LGBTQIA2S+ Knowledge, Skills, and Ability (KSA) that provides internal teams with consultation and training.

Equity Statement

Mental health consultants placed in the CARES NW program 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 consultants have knowledge, skills, and abilities to work with the communities that we serve both culturally and linguistically.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$731,873	$1,041,853	$577,382	$153,890
Contractual Services	$0	$119,763	$0	$0
Materials & Supplies	$1,342	$206	$62	$21,085
Internal Services	$44,577	$289,584	$55,393	$224,157
Total GF/non-GF	**$777,792**	**$1,451,406**	**$632,837**	**$399,132**
Total Expenses:	**$2,229,198**		**$1,031,969**	
Program FTE	4.15	6.20	2.90	0.87
Program Revenues				
Intergovernmental	$0	$545,066	$0	$0
Beginning Working Capital	$0	$906,340	$0	$56,737
Service Charges	$0	$0	$0	$342,395
Total Revenue	**$0**	**$1,451,406**	**$0**	**$399,132**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Total children who receive Mental Health or Family Support Services at CARES NW from Mult Co staff	147	236	236
Total children who receive a suicide screening from the CARES NW team	N/A	N/A	30

Division: Behavioral Health

Program Characteristics: Backfill Other Funds

Program Description

The Behavioral Health Gun Violence Response Team (GVBHRT) was established in 2021 to address the sharp rise in gun violence, particularly within communities disproportionately impacted by systemic inequities.

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 team of mental health consultants utilizes lived experience and community informed practices to provide: Outreach and Engagement, Culturally specific mental health prevention support, Culturally specific mental health treatment, and Consultation and education to schools and communities.

Equity Statement

GV-BHRT 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 consultants have knowledge, skills, and abilities to work with the communities that we serve both culturally and linguistically.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	$706,009	$0
Total GF/non-GF	**$0**	**$0**	**$706,009**	**$0**
Total Expenses:	**$0**		**$706,009**	
Program FTE	0.00	0.00	4.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Provide outreach and engagement at Community events.	N/A	N/A	20
Total # of children who received behavioral health services from the Gun Violence BH Response Team	119	150	125

Division: Behavioral Health

Program Characteristics:

Program Description

The Care Coordination Unit improves health outcomes and experiences through two specialized programs: Wraparound (serving youth and families) and the Multnomah Intensive Transition Team (M-ITT, serving adults). Wraparound, funded by the Oregon Health Plan, provides high fidelity care coordination to address complex, cross-system barriers. Care Coordinators facilitate a team-based planning process with the youth, family, and partners to develop a unified, strength-based care plan. The goal is to empower youth to be healthy, achieve school success, and safely remain in their communities.
M-ITT is funded by HealthShare and is a critical component of the Crisis Services continuum of care. It provides specialized, short-term intervention for adults exiting psychiatric hospitals who are not connected to an outpatient behavioral health provider. The core function is to successfully bridge clients to ongoing support, including long-term behavioral health services, primary care, substance use disorder treatment, and addressing social determinants of health like shelter/housing.

To ensure seamless networks of care, Care Coordinators actively partner with a broad spectrum of partners, including: primary care and community mental health providers, the Department of Community Justice, Oregon Department of Human Services, housing providers, school districts, and peer service providers, to improve care and outcomes.

Equity Statement

The Care Coordination programs prioritize individualized, culturally, and linguistically responsive policies and services. Staff recruitment focuses on expertise and success with diverse communities, including several bicultural and bilingual staff available for clients who identify as LGBTQIA2S+, Native American, African-American, Latinx, and Spanish-speaking. This is an established best practice for achieving equitable health outcomes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$9,570,438	$0	$5,990,668
Contractual Services	$0	$2,742,984	$0	$1,677,185
Materials & Supplies	$0	$139,483	$0	$129,312
Internal Services	$0	$3,171,133	$0	$2,699,290
Total GF/non-GF	**$0**	**$15,624,038**	**$0**	**$10,496,455**
Total Expenses:	**$15,624,038**		**$10,496,455**	
Program FTE	0.00	54.68	0.00	33.12
Program Revenues				
Intergovernmental	$0	$15,624,038	$0	$9,641,182
Beginning Working Capital	$0	$0	$0	$855,273
Total Revenue	**$0**	**$15,624,038**	**$0**	**$10,496,455**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Percentage of M-ITT clients successfully connected to an ongoing care provider (BH, Primary Care, or Specialty) or basic needs resource prior to case closure	N/A	70%	80%
Number of youth served in the Wraparound program	166	176	180

Division: Behavioral Health

Program Characteristics: Backfill Other Funds

Program Description

Since 1969, Multnomah County has been a national leader in providing access to mental health services in schools. School Based Mental Health (SBMH) professionals serve children and teens with mental health needs in 34 elementary, middle and high schools across multiple districts in Multnomah County. Providing mental health assessment and treatment in schools decreases barriers such as stigma, cost, and transportation.

Cultural alignment with students improves their therapeutic alliance with SBMH clinicians, which helps address mental health concerns, build trust, and improve school attendance. This culturally-specific approach contributes to youth completing school, a strong indicator for lifelong economic wellbeing and improved overall health. SBMH Mental Health Consultants provide screening, crisis intervention, mental health assessment, clinical case management, and individual, group, and family treatment. They also provide training and consultation to school staff to optimize educational planning for youth with mental health concerns.

Multnomah County and School Districts collaborate to address the continuum of needs for students and their families and to fulfill the School District's mandate to provide these services. In FY 2027, the program will operate under a model that continues to invest in quality improvement efforts to increase revenue through billable services and build sustainability. Information from the Program Evaluation and Design team's FY 2026 program evaluation will be incorporated into the FY 2027 model and operations.

Equity Statement

This program reaches youth who are traditionally underserved and have barriers to accessing mental health services. Clinicians are recruited with the knowledge, skills and abilities needed to effectively work with the communities served, with several bicultural and bilingual staff available to work with: LGBTQIA2S+; African-American; Latinx; and Spanish speaking clients. This is an established best practice for achieving equitable health outcomes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,989,047	$2,526,382	$3,405,659	$981,640
Contractual Services	$75,000	$7,870	$0	$8,000
Materials & Supplies	$10,775	$295	$4,178	$12,331
Internal Services	$425,222	$417,262	$311,243	$254,836
Total GF/non-GF	**$2,500,044**	**$2,951,809**	**$3,721,080**	**$1,256,807**
Total Expenses:	**$5,451,853**		**$4,977,887**	
Program FTE	10.61	14.21	17.85	4.97
Program Revenues				
Intergovernmental	$0	$1,636,336	$0	$536,807
Beginning Working Capital	$0	$177,664	$0	$0
Service Charges	$0	$1,137,809	$0	$720,000
Total Revenue	**$0**	**$2,951,809**	**$0**	**$1,256,807**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of clinical services provided per year	5,906	5,080	5,900
Total number of unique students served by the SBMH program	687	644	687

Division: Behavioral Health

Program Characteristics:

Program Description

As the Community Mental Health Program, the Division is legally responsible for suicide prevention and postvention. Multnomah County leads Oregon in suicides among young people (ages 10-24). The program aims to reduce these numbers through mental health promotion, suicide prevention, and postvention, educating the community, providing grief support, building a stronger safety net, increasing mental health literacy, and fostering resilience.

Prevention includes training for County staff and the community via the "Get Trained To Help" tri-county collaborative, which organizes and promotes accessible, free resources and training in the Portland Metro area through gettrainedtohelp.com.

Postvention focuses on tracking suicide deaths in the County to inform prevention and intervention. Our Postvention Response Lead coordinates county-wide youth suicide postvention supports after a death to decrease the likelihood of suicide contagion.

Equity Statement

The program addresses equity through training on access and culturally relevant topics. In 2021, suicide was the third leading cause of death among Black youth ages 10-24 (nationally). Our Black Youth Suicide Prevention Coordinator leads a countywide youth suicide coalition (MYSPC), and collaborates with a statewide Black Youth Suicide Prevention Coalition (BYSPC) to ensure all our prevention and postvention initiatives include culturally relevant practices.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$263,883	$279,423	$154,846	$468,815
Contractual Services	$0	$0	$0	$20,320
Materials & Supplies	$0	$7,600	$0	$11,393
Internal Services	$51,550	$49,661	$72,095	$47,266
Total GF/non-GF	**$315,433**	**$336,684**	**$226,941**	**$547,794**
Total Expenses:	**$652,117**		**$774,735**	
Program FTE	1.54	1.76	0.86	2.70
Program Revenues				
Intergovernmental	$0	$336,684	$0	$547,794
Total Revenue	**$0**	**$336,684**	**$0**	**$547,794**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
# of individuals trained in Mental Health or suicide prevention trainings (ASIST, QPR, Connect, etc.).	581	450	400
Number of Postvention training and/or technical assistance provided to community organizations, schools, or other youth-serving institutions.	N/A	5	10

Division: Behavioral Health

Program Characteristics:

Program Description

Culturally and linguistically appropriate mental health treatment, including outreach and engagement, addresses concerns intersecting with the criminal legal system. Culturally responsive interventions also lower the need for expensive hospital and crisis services.

Historically, behavioral health services have not had the knowledge, skills, abilities or the cultural experience working with Black, Indigenous, and People of Color (BIPOC). Culturally-specific services for BIPOC individuals are designed to reduce inequities and build healthy families and communities. Systemically marginalized racial and ethnic groups, along with immigrant and refugee communities, face significant disparities in access to care.

The county contracts with providers to offer culturally and linguistically appropriate mental health and substance use disorder services to communities with significant inequities. These comprehensive services focus on early identification/crisis prevention and include assessment/evaluation, case management, medication management, therapy, benefits assistance, basic needs assessment, wraparound support, referral services, skill development, crisis intervention, family support, and education.

Equity Statement

This program is designed to serve those in the community that are disproportionately impacted by systemic racism and marginalization. Services directly support care for our most vulnerable and impacted community members and prioritize culturally informed and specific services.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$1,836,478	$556,970	$1,618,136	$0
Total GF/non-GF	**$1,836,478**	**$556,970**	**$1,618,136**	**$0**
Total Expenses:	**$2,393,448**		**$1,618,136**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Total culturally diverse individuals receiving services.	1,223	1,213	1,200
Total Culturally Specific Programs/Agencies provided with financial support	6	6	6

Division: Behavioral Health

Program Characteristics:

Program Description

As the Community Mental Health Program, the Division is responsible for supporting a system of locally available, effective safety net services, including the Adult Addiction Treatment Continuum. It serves over 3,000 uninsured or underinsured adult County residents (at or below 200% poverty) annually with Substance Use Disorder (SUD) treatment and recovery support services. Services include residential treatment, intensive outpatient treatment with supported housing, outpatient treatment, outreach, recovery mentoring, and recovery support (including links to housing, basic needs, and prosocial activities).

The primary program goal is establishing a path to recovery and well-being for those with SUD. These services have broad positive impacts across county systems (criminal justice, child welfare, healthcare) and at the interpersonal, family, and community levels, resulting in reduced jail recidivism, decreased infectious disease transmission, lower crisis system utilization, and strengthened family bonds. Our adult continuum promotes treatment engagement, recovery, and a return to a healthy lifestyle by addressing the negative consequences of problematic substance use and teaching prosocial alternatives. Treatment and recovery providers utilize clinical therapy, skill building, and peer-delivered services, and also address self-sufficiency needs such as parenting, stress management, housing, independent living, employment, and referrals for physical and mental health issues.

Equity Statement

The continuum of treatment and recovery support includes culturally-specific and culturally responsive programming, utilizing staff with lived experience with demonstrated success working with the diverse populations being served, including: communities of color; people living with HIV; Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual, and Two-Spirit individuals; women; and parents whose children live with them while they are in residential treatment.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$575,887	$420,720	$776,326	$449,506
Contractual Services	$1,731,384	$9,813,044	$1,181,156	$9,767,194
Materials & Supplies	$2,871	$610	$3,175	$15,294
Internal Services	$154,946	$36,880	$203,468	$57,429
Total GF/non-GF	**$2,465,088**	**$10,271,254**	**$2,164,125**	**$10,289,423**
Total Expenses:	**$12,736,342**		**$12,453,548**	
Program FTE	3.00	2.40	4.00	2.60
Program Revenues				
Intergovernmental	$0	$8,255,389	$0	$8,021,348
Beginning Working Capital	$0	$0	$0	$185,685
Total Revenue	**$0**	**$8,255,389**	**$0**	**$8,207,033**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of individuals served in treatment and recovery support services	3,942	4,000	4,000
Number of clients who successfully completed outpatient treatment	1,420	1,500	1,500

Division: Behavioral Health

Program Characteristics:

Program Description

In 2023, 37.5% of Oregonians gambled in the past year; of those, 3.5% were at-risk for problem gambling (PG) based on the Brief Biosocial Gambling Screen (BBGS). Multnomah County PG Services adopts a holistic approach—integrating biological, behavioral, and economic factors—to improve the well-being of individuals, families, and communities. Prevention and outreach use evidence-based strategies to raise awareness of gambling risks and promote free treatment/prevention resources. The County also offers care coordination and peer support via contracts, although PG treatment is now provided directly through state contracts.

PG Services include prevention, outreach, and referrals, focusing on quality-of-life for the gambler, their family, and community. Prevention includes contracted services, media campaigns, school curricula, family engagement, and community outreach. Outreach involves targeting priority populations, educating providers, and offering technical assistance for screening gambling harms. The PG Care Coordinator is situated in the Promoting Access To Hope (PATH) team and provides support to individuals who are seeking referrals to treatment, and/or need additional support while engaging in treatment programs within our community.

Equity Statement

The Multnomah County PG team includes outreach and prevention activities for diverse populations. These include: Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual, and Two-Spirit; Black, Indigenous, and People of Color; older adults; veterans; and college students. The focus for treatment referrals includes those experiencing co-occurring issues such as drugs and alcohol or mental health issues.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$528,432	$0	$439,819
Contractual Services	$0	$159,698	$0	$127,082
Materials & Supplies	$0	$14,644	$0	$13,419
Internal Services	$0	$76,398	$0	$58,040
Total GF/non-GF	**$0**	**$779,172**	**$0**	**$638,360**
Total Expenses:	**$779,172**		**$638,360**	
Program FTE	0.00	3.20	0.00	2.54
Program Revenues				
Intergovernmental	$0	$779,172	$0	$638,360
Total Revenue	**$0**	**$779,172**	**$0**	**$638,360**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
% of clients receiving Care Coordination, successfully placed in gambling treatment or recovery support.	70%	70%	72%
Number of problem gambling prevention and outreach activities delivered	45	45	45

Division: Behavioral Health

Program Characteristics:

Program Description

The Addictions Services Alcohol and Drug Prevention program addresses risk and protective factors for substance use that can lead to alcohol, tobacco, and other drug addiction. Funding comes from a variety of state and federal grants to support: media campaigns, prevention education, youth leadership activities, policy development, and support for schools and parents. This 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. Priorities include increasing capacity for prevention in schools, convening partners to assess community needs, and offering prevention activities at school sites and organizations serving youth and parents.

Program activities include: 1) Contracting with local providers to offer programming to all Multnomah County school districts and interested community-based organizations. Programming includes youth-led media campaigns, youth leadership opportunities, evidence-based prevention curriculum for local schools, and family engagement courses that educate on primary prevention strategies. 2) The Big Village Coalition is a community-based coalition that focuses on reducing underage drinking and marijuana use. This program focuses on parent education and youth leadership development. 3) Expanding our Safety Starts at Home campaign which focuses on educating the community on the importance of safe storage and disposal of prescription drugs within the home (including handing out medication lock bags and Deterra kits to Multnomah County residents). 4) Supporting and expanding on substance-free community events to normalize alcohol and marijuana free spaces for youth throughout our community.

Equity Statement

This program continuously strengthens its commitment to advancing diversity, equity and inclusion by using strategies that center racially, culturally, and linguistically specific practices when developing and selecting prevention activities and strategies.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$242,484	$0	$431,404
Contractual Services	$0	$1,149,002	$0	$931,325
Materials & Supplies	$0	$34,607	$0	$59,520
Internal Services	$0	$61,215	$0	$38,925
Total GF/non-GF	**$0**	**$1,487,308**	**$0**	**$1,461,174**
Total Expenses:	**$1,487,308**		**$1,461,174**	
Program FTE	0.00	1.50	0.00	2.09
Program Revenues				
Intergovernmental	$0	$1,487,308	$0	$1,461,174
Total Revenue	**$0**	**$1,487,308**	**$0**	**$1,461,174**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Adults and youth served by prevention services and programming	10,500	10,000	15,000
Number of individual messages focused on substance use prevention posted (includes paid media advertisements, social media, earned media, etc.)	N/A	15	15

Division: Behavioral Health

Program Characteristics:

Program Description

Coordinated Diversion for Justice Involved Individuals includes Aid and Assist Competency Restoration Services. In Oregon, a court is required to order the Community Mental Health Program (CMHP) to complete a consultation in all criminal cases when the court questions an individual's ability to aid and assist in their own defense due to a mental health disorder. Multnomah County must respond to all court orders within five judicial days, reporting to the court on what community services are available for the individual to safely gain fitness to proceed.

When an individual is found unable to aid and assist, they may be ordered to the Oregon State Hospital (OSH) for treatment or be released to the community and ordered to participate in competency restoration services. For every individual ordered to community restoration, the CMHP is required to link the individual to treatment, housing, and healthcare benefits, provide intensive community-based care management, facilitate legal skills training, link to rehabilitation services, and provide frequent status reports to the court until competency is resolved.

The CMHP is also responsible for discharge planning and care coordination for all individuals at the OSH under a 'treat until fit' order by the Multnomah County Circuit Court. For every individual at the OSH, a behavioral health clinician attends all hospital meetings, meets with the individual, submits a Community Transition Plan to the hospital, creates and coordinates a transition back to the community, and provides frequent updates to the court.

Equity Statement

Coordinated Diversion services reduce the unfair overrepresentation and over incarceration of persons with mental health needs in the criminal justice system. These services intervene at an individual level while also addressing larger systemic barriers that are root causes for individuals with mental health and other disabilities being overrepresented in the criminal justice system.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$805,358	$4,153,335	$0	$4,692,774
Contractual Services	$235,709	$2,103,636	$0	$1,766,710
Materials & Supplies	$5,493	$47,031	$0	$62,412
Internal Services	$305,201	$297,752	$250,360	$421,345
Total GF/non-GF	**$1,351,761**	**$6,601,754**	**$250,360**	**$6,943,241**
Total Expenses:	**$7,953,515**		**$7,193,601**	
Program FTE	4.70	25.50	0.00	27.50
Program Revenues				
Intergovernmental	$0	$6,601,754	$0	$6,943,241
Total Revenue	**$0**	**$6,601,754**	**$0**	**$6,943,241**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
# of Community Restoration Consult court orders responded to	576	760	760
# of new referrals to community restoration services in the community	130	140	150

Division: Behavioral Health

Program Characteristics: Backfill Other Funds

Program Description

The Multnomah County Mental Health Court is a specialized treatment court, designed to reduce recidivism of individuals with qualifying mental health diagnoses, by offering enhanced supervision by the court that is supported by court partners. The court is a cooperative effort among multiple agencies, including the Multnomah County District Attorney's Office, Multnomah County Circuit Court, Multnomah County Mental Health Department, Metropolitan Public Defender, Multnomah County Department of Community Justice, and the Multnomah County Sheriff's Office. Mental Health Court participants are on probation; both supervised (formal probation) and unsupervised (bench probation). As a condition of probation, defendants are offered an opportunity to participate in the Mental Health Court program. The Behavioral Health Division allocates 3.0 FTE to support the specialty court to link individuals under supervision of the court to community based services and report continued progress back to the court.

Equity Statement

The Adult Mental Health Court reduces the overrepresentation and overincarceration of persons with mental health needs in the criminal justice system. This specialty court intervenes at an individual level to support successful completion of probation by linking individuals to community support.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	$172,890	$343,023
Materials & Supplies	$0	$0	$110	$0
Total GF/non-GF	**$0**	**$0**	**$173,000**	**$343,023**
Total Expenses:	**$0**		**$516,023**	
Program FTE	0.00	0.00	1.00	2.00
Program Revenues				
Intergovernmental	$0	$0	$0	$343,023
Total Revenue	**$0**	**$0**	**$0**	**$343,023**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
# of Mental Health Court hearings attended	N/A	N/A	36
# of individuals in Mental Health Court supported	N/A	N/A	80

Division: Behavioral Health

Program Characteristics:

Program Description

Withdrawal management is a critical level of treatment care in the Substance Use Disorder (SUD) continuum of services. It medically stabilizes a highly vulnerable and diverse client population, preparing people for residential, outpatient, and recovery support services. Services are provided 24 hours/day, 7 days/week with medical oversight. 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.

There are about 2,700 admissions into withdrawal management service annually, which includes both indigent clients and clients with OHP or other health insurance. Funding for these SUD treatment services prioritizes individuals at/below 200% poverty who are uninsured or under-underinsured (high deductibles or copays create a burden to accessing care).

Care Coordination serves people who are houseless or without safe housing conducive to recovery, and provides additional engagement and stability throughout the transition from this level of care to continued treatment and recovery support. Supportive Housing greatly increases treatment engagement rates post discharge from withdrawal management treatment. For people who are houseless, chemically dependent, and early in recovery, this 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.

Equity Statement

The program is delivered through an equity lens, prioritizing a highly vulnerable and diverse client population, specifically those at or below 200% of the poverty level, uninsured, under-insured, and experiencing houselessness. This focused approach directly addresses systemic health and social inequities, ensuring marginalized communities can access medically necessary withdrawal management, supportive housing, and vital recovery support services.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$220,456	$0	$231,666
Contractual Services	$1,515,449	$577,559	$1,041,829	$877,558
Materials & Supplies	$0	$8	$0	$8
Internal Services	$0	$5,972	$0	$5,541
Total GF/non-GF	**$1,515,449**	**$803,995**	**$1,041,829**	**$1,114,773**
Total Expenses:	**$2,319,444**		**$2,156,602**	
Program FTE	0.00	1.50	0.00	1.50
Program Revenues				
Intergovernmental	$0	$803,995	$0	$1,114,773
Total Revenue	**$0**	**$803,995**	**$0**	**$1,114,773**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of unique indigent individuals receiving Withdrawal Management services annually	87	92	100
Number of individuals receiving supportive housing	453	440	450

Division: Behavioral Health

Program Characteristics:

Program Description

The Early Childhood Mental Health Program focuses on healthy social/emotional development and school readiness for children ages birth to six. It offers culturally, linguistically, and trauma-responsive prevention and treatment services, working with community partners to ensure child success and decrease school suspension/expulsion. Services are evidence-based, including consultation, mental health treatment, parent groups, and coordinated care, which are vital for school retention.

Program consultants provide a range of mental health consultation services to approximately 5,000 children and families in all County Head Start Programs, using evidence-based practices. Services include classroom consultation, assessment, family-centered treatment, case management, crisis triage, referrals, and parent support/education. The program collaborates closely with Early Childhood Community Partners and Early Learning Multnomah to coordinate care for at-risk families.

These services address mental health and developmental needs early, preventing acute, costly issues. A critical goal is ensuring children are ready for kindergarten

Equity Statement

Consultants use an anti-racist equity lens while providing culturally and linguistically responsive services to support the success of children and to decrease school suspension and expulsion rates, alleviating the impacts of inequities.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,420,153	$789,576	$2,028,083	$129,117
Contractual Services	$192,608	$1	$5,050	$0
Materials & Supplies	$6,661	$154	$5,144	$87
Internal Services	$152,640	$212,060	$252,033	$156,520
Total GF/non-GF	**$1,772,062**	**$1,001,791**	**$2,290,310**	**$285,724**
Total Expenses:	**$2,773,853**		**$2,576,034**	
Program FTE	8.47	4.71	11.31	0.68
Program Revenues				
Intergovernmental	$0	$716,067	$0	$0
Service Charges	$0	$285,724	$0	$285,724
Total Revenue	**$0**	**$1,001,791**	**$0**	**$285,724**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Total children receiving prevention services	6,358	5,422	5,500
Total children receiving culturally specific treatment services.	43	38	15

Division: Behavioral Health

Program Characteristics:

Program Description

The Promoting Access To Hope (PATH) program offers outreach and low-barrier, voluntary services to houseless individuals with substance use disorder (SUD) at risk of criminal justice system involvement. These individuals often face co-occurring challenges like poverty and mental/physical health issues.

PATH provides individualized needs assessments and service plan development, connecting clients to a broad network of SUD treatment, recovery support, and essential resources like shelter/housing, primary care, mental health and employment services. Staff use motivational interviewing and harm reduction, collaborating with clients and stakeholders to set recovery goals, address barriers, and build a recovery foundation.

Referrals come from justice partners, treatment providers, crisis services, county programs, family, and self-referrals. PATH was developed by the Behavioral Health Division, Homeless Services Department, Department of Community Justice, and the County Chair's Office. Ongoing support is provided, recognizing individuals' varied readiness for change; abstinence is not required.

Equity Statement

PATH utilizes best practices to ensure the best outcomes for members of marginalized and underrepresented communities who are seeking SUD treatment and recovery support services. These approaches include working with community providers to develop/enhance responsive services and to work with culturally-specific providers to ensure individuals are placed in services that recognize and support their cultural identity and have the best chance at successful outcomes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$679,122	$838,290	$817,114	$442,759
Contractual Services	$4,108	$104,004	$5,301	$0
Materials & Supplies	$4,563	$2,244	$4,714	$2,244
Internal Services	$32,359	$168,291	$1,912	$149,875
Total GF/non-GF	**$720,152**	**$1,112,829**	**$829,041**	**$594,878**
Total Expenses:	**$1,832,981**		**$1,423,919**	
Program FTE	4.08	4.82	4.48	2.42
Program Revenues				
Intergovernmental	$0	$561,662	$0	$594,878
Total Revenue	**$0**	**$561,662**	**$0**	**$594,878**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of unique individuals served annually in PATH outreach and care coordination services	604	645	660
Number of individuals housed by PATH team member	89	120	120

Division: Behavioral Health

Program Characteristics:

Program Description

The Deflection and Sobering program is part of the Behavioral Health Division’s Addiction Services unit and is funded through a State of Oregon Criminal Justice Commission grant, the County, and the City of Portland. The program operates 24/7 at the Coordinated Care Pathway Center (a temporary location), with a field-based option in Gresham. Per HB 4002, deflection is a collaboration between law enforcement and behavioral health to keep individuals out of the carceral system.

Pathway Center deflection services include medical and behavioral health screenings, care coordination, peer support, referrals, basic needs and housing support, specific connections to recovery housing, referrals to services, transportation, and outreach. Field-based includes screenings, care coordination, and referrals. Deflected individuals may opt into sobering. Law enforcement, first responders, and community providers refer to both deflection and sobering. Over 600 individuals were referred to deflection in year one.

Services help people who are intoxicated get sober and connect with community services, including treatment, recovery, and shelter/housing. The center has 13 sobering stations. Sobering includes observation, stabilizing medication, and peer support. Care plans, referrals, and transportation are provided once clients complete sobering. Funding from the City of Portland funds costs including sobering operations and for two outreach workers dedicated to connections to recovery housing, transportation, direct client assistance, and program evaluation. Deflection and sobering services will move to a permanent 24/7 Sobering & Crisis Stabilization Center in 2027. Recovery Housing Rental Voucher Program is now also tied to this program offer. The PATH team has historically provided care coordination across the full continuum of Substance Use Disorder (SUD) services, including SUD treatment, other recovery-related services, and placements in recovery housing. Two PATH team employees will now be dedicated to recovery housing.

Equity Statement

The Deflection and Sobering program closely tracks and assesses referrals into and engagement with the program, including participant demographics, to identify and address health inequities related to race/ethnicity and housing status. The program utilizes peer support (delivered by individuals with lived experience) to meet people where they are with compassion, cultural humility, and dignity.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$201,289	$994,017	$207,863	$1,354,241
Contractual Services	$0	$4,354,704	$0	$2,368,460
Materials & Supplies	$0	$307	$0	$408,056
Internal Services	$0	$864,824	$259,920	$1,019,243
Total GF/non-GF	**$201,289**	**$6,213,852**	**$467,783**	**$5,150,000**
Total Expenses:	**$6,415,141**		**$5,617,783**	
Program FTE	1.00	6.00	1.00	9.00
Program Revenues				
Intergovernmental	$0	$6,213,852	$0	$5,150,000
Total Revenue	**$0**	**$6,213,852**	**$0**	**$5,150,000**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Percent of individuals referred to deflection who engage in deflection by receiving services at the pathway center	N/A	65%	70%
Number of individuals referred to recovery housing	N/A	N/A	100

Division: Behavioral Health

Program Characteristics:

Program Description

Peer Support Staff at the Behavioral Health Resource Center (BHRC) provide low-barrier connection and support through a Day Center, Referral Van and Outreach Teams. These staff link people to basic needs services onsite, and offer connection, hope and direction. The BHRC provides a unique peer-operated and trauma-informed model that provides increased access to people most marginalized and vulnerable due to systemic oppression and historical trauma.

* The Day Center currently serves around 115 people daily through a system that reduces competition for resources and supports engagement with peers. Services include access to showers, bathrooms, laundry, clothing, computers and printing, WIFI and charging stations, mail service, snacks, coffee, activity space, and safe, calming spaces to relax and get support from peer staff. The program increases access to referrals and housing options, provides access to medical services through partnerships with other Health Department programs, and operates during severe weather. Peer support reduces stigma and increases access to support and resources helping people take a first step towards housing stability.
* The Referral Van operates daily from 6am-2pm offering initial support and connection to over 250 people a day. Clients can access coffee, resources, and basic supplies as well as entry tickets to the Day Center. This connection increases treatment readiness and likelihood of engaging at the Day Center.
* The Outreach Team engages with people in a 2-10 block radius around the facility, inviting them to the BHRC for services or referring them immediately to other community partners. This team successfully refers three people to detox a day, and dozens more to community services, including emergency beds on-site in the BHRC Shelter. They also partner with police to help get people into culturally competent services, treatment and shelter in real time.

Equity Statement

The BHRC is designed to be intentionally inclusive of individuals belonging to some of the most marginalized and vulnerable populations in Multnomah County recognizing that those with intersectional identities (Black, Indigenous and other People of Color; Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual, and Two-Spirit; persons with disabilities; and others) are over represented in the houseless population.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$481,854	$342,359	$0
Contractual Services	$2,180,248	$1,771,907	$3,678,493	$307,620
Materials & Supplies	$196	$8,368	$2,827	$0
Internal Services	$1,147,489	$194,894	$1,343,014	$7,368
Total GF/non-GF	**$3,327,933**	**$2,457,023**	**$5,366,693**	**$314,988**
Total Expenses:	**$5,784,956**		**$5,681,681**	
Program FTE	0.00	1.80	2.00	0.00
Program Revenues				
Intergovernmental	$0	$791,223	$0	$86,988
Beginning Working Capital	$0	$228,000	$0	$228,000
Total Revenue	**$0**	**$1,019,223**	**$0**	**$314,988**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Total number of entries to the day program	36,102	37,553	38,000
Total number of interactions at outreach van	N/A	96,924	98,000

Division: Behavioral Health

Program Characteristics:

Program Description

The Behavioral Health Resource Center (BHRC) Shelter and Bridge Housing aims to provide a pathway to end houselessness for those with behavioral health concerns. It provides increased access to individuals most marginalized and vulnerable due to systemic oppression and historical trauma.

The Shelter Program has 33 beds and is a mixed gender shelter. The length of stay is 1-30 days. The Bridge Housing program provides 19 beds, offers mixed gender housing, and the length of stay is 1-90 days. A contractor, staffed by peers and clinical professionals with lived experience, operates both programs and offers 24/7 support and connection to those in the program. Nearly every participant receives individualized case/care management, which includes support such as access to basic needs, bus fare, cell phones, clothing, employment services, food stamps, medical services, mental health services, and referrals for SUD services. Participants that exit early for any reason are able to access support in the future; staff maintain open communication and opportunities for re-engagement, ensuring critical longer-term support when needed. The Shelter Program has served over 426 people since opening, and the Bridge Program has served 136. Between the two programs, there have been over 138 successful transitional housing placements beyond onsite housing services.

This program also offers urgent bed access to individuals referred by first responders and outreach teams on a nightly basis. Over 200 beds were accessed through this system last year and the program is on track to increase that number. These beds are particularly helpful in supporting individuals waiting for a detox bed or other housing supports.

Equity Statement

The BHRC is designed to be intentionally inclusive of individuals belonging to some of the most marginalized and vulnerable populations in Multnomah County recognizing that those with intersectional identities (Black, Indigenous and other People of Color; Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual, and Two-Spirit; persons with disabilities; and others) are over represented in the houseless population.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$2,032,953	$1,113,935	$812,169	$1,726,045
Internal Services	$969,811	$0	$1,060,001	$0
Total GF/non-GF	**$3,002,764**	**$1,113,935**	**$1,872,170**	**$1,726,045**
Total Expenses:	**$4,116,699**		**$3,598,215**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of individuals served in Shelter and Bridge Housing programs	515	504	500
Number of individuals receiving Care/Case Management services on site	508	500	500

Division: Behavioral Health

Program Characteristics:

Program Description

This Program Offer provides implementation of Opioid Settlement resources, including support for a 6-month stabilization housing program for people transitioning from detoxification, residential treatment, and those facing the risk of houselessness. The program is divided into a stabilization phase (first 90 days) and a relapse prevention phase (next 90 days), both with supportive housing available. The last phase, beyond intensive outpatient treatment, offers tools and support for sustained sobriety and long-term stability.

A second program, the Preparation & Integration Housing model, also within this Program Offer provides two levels of recovery support. The first - a stabilization model - provides a flexible 14-day need-based stabilization and evaluation service for individuals transitioning between withdrawal management and residential services. This program focuses on high-acuity people with substance use disorder and/or co-occurring conditions, offering intensive peer support, onsite staff, and care coordination. The second level - an integration model - is intended for individuals who have completed residential services, providing 4–6 months of housing with a live-in house manager. This includes peer support, employment support, life-skills services, and case management.

These programs target the highest acuity individuals who are most vulnerable to relapse without appropriate options for step up/step down support in their recovery. The proximity and relationships of the program providers allow for building more direct referrals into the next appropriate level of support, depending on where an individual is in their recovery.

Equity Statement

This program advances equity by directly targeting high-acuity individuals with substance use disorder and co-occurring conditions who are most vulnerable to relapse and houselessness, providing phased, supportive housing and comprehensive recovery services. By focusing on this marginalized population and building direct referral pathways to appropriate levels of support, the program aims to address systemic barriers and improve health and housing stability outcomes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$142,163	$0	$208,727	$0
Contractual Services	$1,889,854	$0	$1,537,070	$0
Total GF/non-GF	**$2,032,017**	**$0**	**$1,745,797**	**$0**
Total Expenses:	**$2,032,017**		**$1,745,797**	
Program FTE	1.00	0.00	1.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of clients who engage in treatment who successfully discharge to the next level of care	N/A	60	120
Number of individuals exiting Preparation housing program referred to the next level of care [SUD Residential/Outpatient Treatment]	N/A	30	60

Division: Behavioral Health

Program Characteristics:

Program Description

Using Metro Supportive Housing Services Measure funding, this Program Offer funds 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.

This program offer funds:
* Critical motel-based emergency shelter capacity and crisis case management for people served by the Behavioral Health Division. This provides immediate safety off the streets for people living with severe behavioral health needs, while they transition to longer-term housing options at Cultivating Communities (up to 35 beds).

* Investments in long-term rental assistance and housing placement services for people with severe and persistent mental illness who are served by any of Multnomah County's Assertive Community Treatment (ACT) and Intensive Case Management (ICM) teams.

* Permanent Supported Housing for individuals with Serious and Persistent Mental Illness at Cedar Commons (30), Douglas Fir (15) and Meridian Gardens (65).

Equity Statement

Strategies in the Multnomah County Local Implementation Plan for the Metro Supportive Housing Services Measure prioritize the commitment to eliminating racial inequities among people experiencing chronic and episodic homelessness. This is done at the individual level by providing access to culturally aligned services and at a systems level by ensuring that program eligibility and prioritization considers identities and experiences contributing to greater vulnerability or inequity in outcomes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	$0	$267,961
Contractual Services	$413,573	$9,615,877	$51,012	$7,877,049
Internal Services	$0	$0	$0	$39,310
Total GF/non-GF	**$413,573**	**$9,615,877**	**$51,012**	**$8,184,320**
Total Expenses:	**$10,029,450**		**$8,235,332**	
Program FTE	0.00	0.00	0.00	2.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of individuals placed into or retained in permanent housing	277	260	260
Number of participants served in motel-based emergency shelter	195	175	90

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Department Overview

The Homeless Services Department (HSD) is dedicated to creating an equitable community where all people have safe, affordable, and accessible housing. Operating on a **Housing First** model, which provides affordable housing as a platform for wraparound services, HSD works with community-based organizations and other governments to provide participant-driven, coordinated, and equitable services to those experiencing or at risk of homelessness. This work integrates strategies focused on eliminating racial disparities.

HSD's mission is carried out through five primary functions:

1. 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;
2. Overseeing the development and operations of the community's emergency and alternative shelter system;
3. Leading Multnomah County's planning and implementation of programming funded by the Metro Supportive Housing Services Measure;
4. Serving as the U.S. Department of Housing and Urban Development Continuum of Care "Lead Agency"; and
5. Supporting the involvement of community stakeholders in the development and implementation of policies and programs that help address and end homelessness.

These functions are executed by HSD's five divisions: the Director's Office/Administration & Operations; System Support, Access & Coordination; Safety Off and On the Streets; Housing Placement and Retention; and Supportive Housing.

FY 2026 Fall Rebalance

HSD successfully navigated a challenging financial situation during the first half of Fiscal Year (FY) 2026, stemming from a significant **$28 million budget shortfall**.

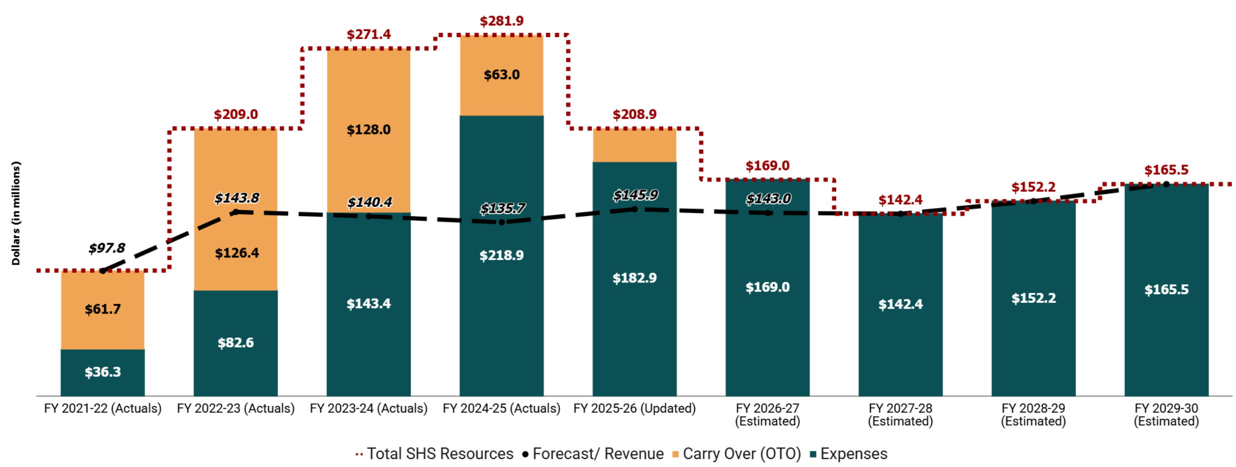
The deficit was primarily caused by the difference between the initial budget planning, which was based on the higher State funding projections in the **Governor's Requested Budget (GRB)**, and the lower funding reflected in the final **Legislatively Approved Budget (LAB)**.

During the rebalance, our core goal was to protect essential services, including existing shelter operations and long-term rental assistance, and sustain support for current rapid rehousing placements. HSD successfully backfilled **$20 million** of the deficit with one-time-only funding allowing us to **maintain all existing shelter beds and keep all currently housed participants sustained** in their programs in FY 2026. However, the deficit required a reduction in funding for **new placements out of shelter.** The department's mid-year strategy allowed us to postpone service reductions until FY 2027 in order to provide more time to thoughtfully address the budget reductions.

FY 2027 Budget Challenges

HSD faces a significant budget constraint in FY 2027, driven primarily by two factors: a substantial reduction in one-time-only (OTO) funding from the Supportive Housing Services (SHS) measure and the cessation of ongoing City of Portland funding.

The SHS measure's initial years (beginning July 2021) saw revenues exceed projections and scaling challenges resulting in a large "carryover" of unspent funds. In recent years, the County has used this one-time carryover funding to expand 24/7 shelters and increase housing placements. This substantial OTO carryover funding is now significantly diminished.



A major shift for FY 2027 is that HSD will not receive any funding from the City of Portland. This is the first time this has occurred since the Joint Office of Homeless Services was established in 2016. Historically, City funds supported key adult homeless services, including shelter, street outreach, and supportive housing contracts. Although Multnomah County and the City of Portland remain partners, this reallocation necessitates that the County either backfill or reduce programs that have historically been funded by the City of Portland and served hundreds of people.

Further compounding the challenge is uncertainty regarding state revenue.

These changes left HSD with an $87 million shortfall when we started our FY 2027 budget planning in the winter.[1] However, HSD did not need to make reductions totaling the full amount because $31 million was “one-time-only” and will end in FY 2026. HSD incorporated the higher cost of services for FY 2027 and was also able to slightly increase carryover due to projected provider underspending.

Budget Priorities in a Constraint Landscape

This significant shortfall requires difficult choices to align the FY 2027 budget with reduced resources.

The core problem is clear: Multnomah County and its partners share a system we can no longer afford that effectively, efficiently, and equitably leads to housing.

The required solution: Multnomah County and its partners must collaboratively redesign the system to ensure it effectively, efficiently, and equitably leads to housing.

We define effective, efficient, and equitable in our guiding image below:

Problem

A system the community can no longer afford that can effectively, efficiently and equitably lead to housing.

Solution

Redesign system to maximize housing for people with less funding.

Success Benchmarks		
Effectiveness	**Efficiency**	**Equity**
Stable housing, make homelessness rare, brief, and one-time.	Rapidly housing people.	Reducing disparities by supporting and listening to culturally specific providers.

[1] Please note that the $87 million reduction compares the FY 2027 Requested budget to the FY 2026 Revised budget.

The severity of the funding reduction forced HSD to focus and prioritize its core homeless services. The FY 2027 budget was therefore built upon the following three priorities:

1. **Keeping People Housed**
2. **Prioritizing New Housing Placements**
3. **Maximizing Shelter Effectiveness**

Within these priorities, HSD remains committed to racial equity, focusing on priority populations, and reducing disparities.

$242.9 million

Total Adopted Operating Budget

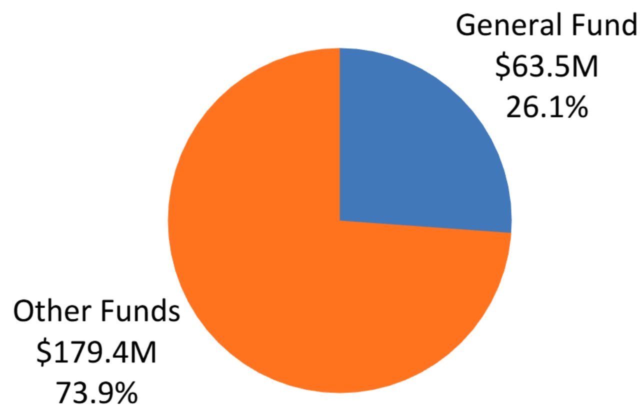
Excludes $5.9 million in cash transfers, contingencies, and unappropriated balances

98.00 FTE

Total Adopted Staffing

(16.00) FTE

Decrease from FY 2026 Adopted



($67.3) million

All Funds (Operating) Decrease from FY 2026 Adopted

(21.7%) decrease

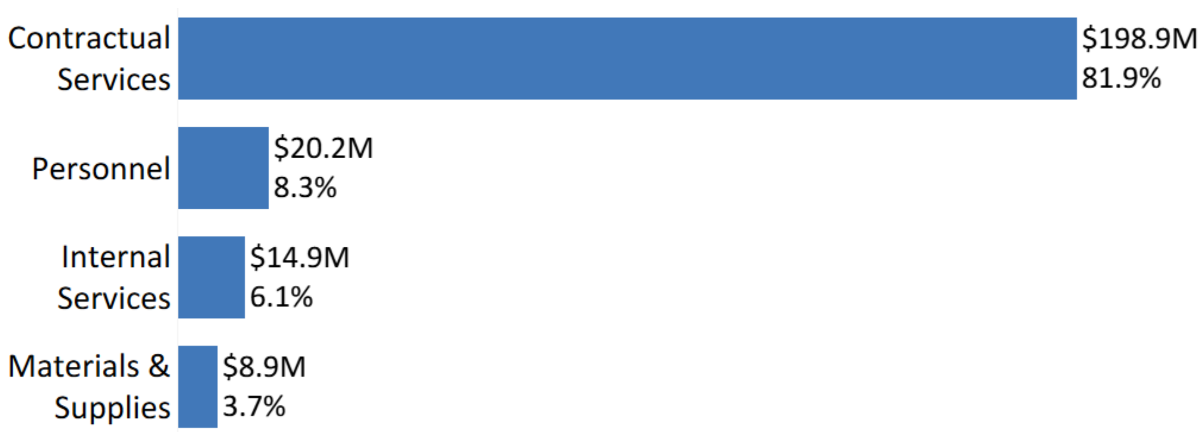
General Fund

$8.3 million

One-Time-Only Investments

Operating Budget by Category - $242.9 million

Does not include cash transfers, contingencies, and unappropriated balances



Mission, Vision, and Values

The Homeless Service Department (HSD) mission is to create an equitable community in which all people have safe, affordable, and accessible housing.

In FY 2027, HSD will continue to be guided by the Homelessness Response Action Plan (HRAP) and the SHS Local Implementation Plan (LIP) and 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 HRAP include an array of supports: 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 HSD, as noted in the Mission, Vision, and Values. The HSD 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 HSD 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; and
- facilitating the Equity Advisory Committee.

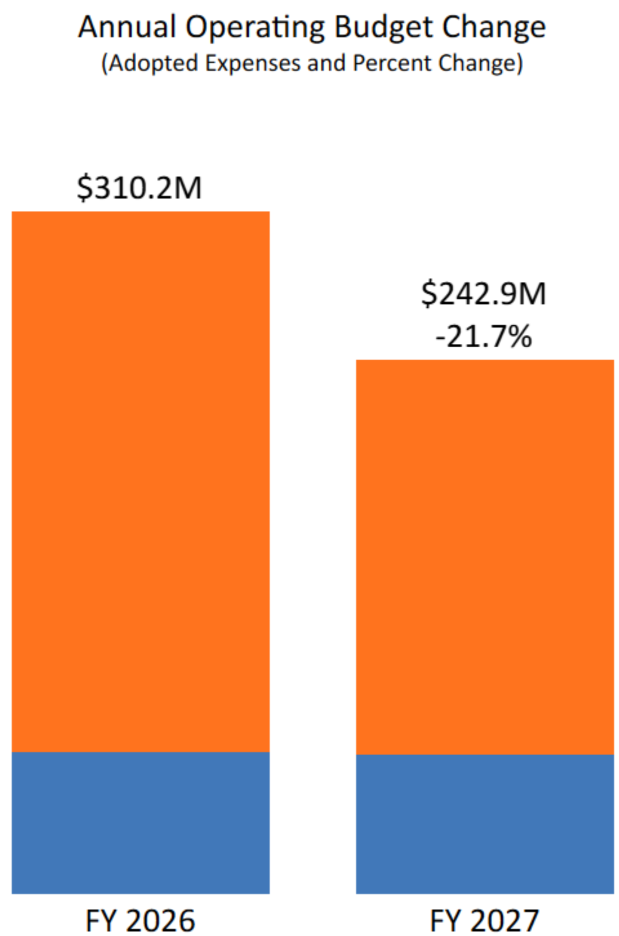
Because so much of HSD’s work is supporting contracted service providers, much of the capacity of the HSD Equity Team supports our work with partners and the community. HSD requires contracted providers to submit equity work plans as part of the contracting process. The HSD Equity Team provides support, tools and technical assistance to providers as requested, and to our contract managers who are responsible to monitor equity work plans.

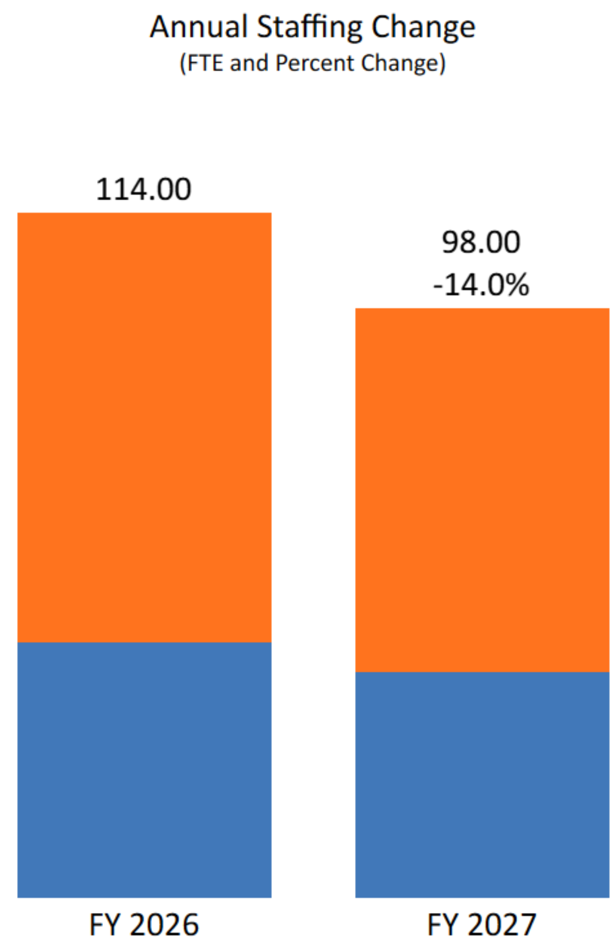
The HSD Equity Team also includes positions focused on equity internal to HSD. The Equity Manager sits on the executive team and provides subject matter expertise and support in the application of an equity lens to leadership decisions and processes. The Equity Manager partners with the Human Resources 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 HSD incorporates an equity lens. HSD 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. This creates a communication and collaboration channel between the Equity Team, Leadership and the divisions of the Department.

Budget Overview

The FY 2027 Homeless Services Department Adopted operating budget is $242.9 million, a $67.3 million (-21.7%) decrease from the FY 2026 Adopted budget. These amounts exclude cash transfers, contingencies, and unappropriated balances. The budget includes a decrease of 16.00 FTE (-14%).

The General Fund accounts for $63.5 million or 26.1% of the budget. General Fund expenses decreased by $1.0 million (-1.6%) compared to FY 2026. The FY 2027 General Fund expenses include one-time-only investments of $6.0 million for additional housing placements to increase the number of people moving from shelters into permanent housing and up to $2.1 million for recovery housing placements (30302B).





Other Funds in the Homeless Services Department include the Supportive Housing Services Fund (SHS) at $148.3 million (61.0%) and the Federal/State Fund at $27.9 million (11.5%) of the budget. Other Funds decreased by a total of $66.2 million (-27.0%) in the operating budget.

The following tables show the new or expanded ongoing and one-time-only programs, as well as reductions. Most of these tables 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 General Fund & Video Lottery Programs

The table below shows new General Fund (GF) and Video Lottery (VL) investments for the FY 2027 budget. General Funds for Gresham and East County homeless services offset reductions of other funds.

The large budget shortfall in HSD required difficult decisions, including the reduction of 695 shelter units. $1.0 million in Shelter Ramp Down (30200B) provides additional funding for housing placements for people currently living in shelters that are closing. Shelter Ramp Down also includes $1.8 million of SHS funds for two months of operations at sites that are closing.

The North Portland Day Center will close in FY 2027. North Portland Day Center Ramp Down (30200C) provides three months of operational support, extending the closure date and providing for a smoother transition for the participants using these services.

Prog. #	Program Offer Name	GF & VL Additions Ongoing	GF & VL Additions OTO	Total Additions	FTE Additions
30200B	Shelter Ramp Down		1,000,000	1,000,000	0.00
30200C	North Portland Day Center Ramp Down		158,000	158,000	0.00
30302B	Additional Placement out of Shelter		7,130,912	7,130,912	0.00
The investments below partially offset FY 2027 reductions.					
30308A	Gresham Homeless Services	731,712		731,712	0.00
30308B	East County Homeless Services		50,000	50,000	0.00
30600	Employment Programs	294,000	2,948,924	3,242,924	0.00
Total		**1,025,712**	**11,287,836**	**12,313,548**	**0.00**

General Fund & Video Lottery Reductions

This table reflects $1.3 million of reductions taken due to Countywide budget reductions.

Prog. #	Program Offer Name or Reduction Description	General Fund & Video Lottery Reductions	FTE Reduction
30302A	Placement out of Shelter	(731,712)	0.00
30600	Employment Programs Partial Reduction*	(580,690)	0.00
Total		**(1,312,402)**	**0.00**

* Employment programs also had an investment of $3,242,924 shown in the GF/VL additions table. This table reflects the net GF reduction.

Employment Programs

Employment Programs (30600) had significant funding changes in FY 2027. The table below compares FY 2026 and FY 2027 investments by funding source and ongoing vs. one-time-only dollars. In FY 2027, employment programs decreased by $254,325 and 66.9% of the funding is one-time-only.

Fund	FY 2026 Adopted	FY 2027 Adopted	Difference
General Fund/Video Lottery Ongoing	1,374,786	294,000	(1,080,786)
General Fund/Video Lottery One-Time-Only	2,448,828	2,948,924	500,096
Total General Fund/Video Lottery	**3,823,614**	**3,242,924**	**(580,690)**
SHS Ongoing	1,830,190	1,493,830	(336,360)
SHS One-Time-Only	0	662,725	662,725
Total SHS Funding	**1,830,190**	**2,156,555**	**326,365**
Grand Total Funding	**5,653,804**	**5,399,479**	**(254,325)**

Reductions in City of Portland and Federal/State Funds

The Homeless Services Department experienced significant decreases in funds from the City of Portland and Federal and State sources. HSD does not anticipate receiving any funding from the City of Portland in FY 2027, which results in a decrease of $29.6 million (-100%) compared to the FY 2026 Adopted budget.[2] The following table shows the reduction by division for the loss of the City funding.

Division Name	City of Portland Funds FY 2026 Adopted
System Support, Access, & Coordination	(589,785)
Safety off and on the Streets	(22,607,492)
Housing Placement & Retention	(1,379,040)
Supportive Housing	(5,051,260)
Total Reductions	**(29,627,577)**

Federal/State Funds decreased by $31.6 million (-53.1%). This is largely due to a $28.0 million mid-year state revenue reduction in FY 2026. As part of the mid-year state rebalance in October 2025, HSD used General Fund, other state funds, and SHS funds to partially fill the gap and to sustain services in the community. See the Department Overview section above and the HSD FY 2027 transmittal letter for more information about the City of Portland funds and the state rebalance.

Reductions in Metro Supportive Housing Services (SHS)

The total FY 2027 SHS revenue for Multnomah County is $172.0 million. This is an overall decrease of 10.6% or $20.4 million compared to $192.4 million in FY 2026. The most recent Metro forecast decreased the Multnomah County FY 2027 SHS revenue by $2.4 million.

The $172.0 million total SHS budget includes:

- $4.1 million in the stabilization reserve (30006A),
- $1.9 million cash transfer to the Department of County Assets for the Homeless Management Information System (30006C), and
- $17.8 million of SHS funds allocated to other departments (30999).

With Metro revenue forecasts declining and service levels remaining high, one-time carryover funds from SHS are significantly decreasing. See chart in the Department Overview for additional information about SHS carryover.

[2] This amount decreased by $5 million during the FY 2026 mid-year rebalance to a total of $24.6 million.

The table below shows the SHS revenue estimates for the FY 2026 Adopted budget, the FY 2026 Revised budget, and the FY 2027 Adopted budget. The Revised budget reflects the changes made during the mid-year rebalance.

Fund	FY 2026 Adopted	FY 2026 Revised	FY 2027 Adopted	Difference between FY 2026 Revised and FY 2027 Adopted
SHS Ongoing	136,584,365	136,584,365	142,976,333	6,391,968
SHS Beginning Working Capital One-Time-Only	55,848,867	62,967,179	26,061,528	(36,905,651)
Visitor Development Fund[3]	0	0	2,975,000	2,975,000
Total SHS Funding	**192,433,232**	**199,551,544**	**172,012,861**	**(27,538,683)**

The following table shows the SHS reductions for HSD by program offer. It shows FY 2027 reductions compared to the FY 2026 Revised budget. The list of SHS reductions below includes inflationary increases for FY 2027 expenses and SHS reductions used to fund programs previously paid for by other sources. This accounts for the $13.3 million difference between the two tables.

Prog. #	Program Name	FY 2027 SHS Reductions
30000	Director Office, Administration and Operations	(192,784)
30003	Data, Research, & Evaluation	(319,663)
30004	Policy & Planning	(341,013)
30005	Equity-Focused System Development & Capacity Building	(307,522)
30006B	Regional Coordination- Regional Strategies Implementation Fund	(2,098,124)
30100	System Access, Assessment, & Navigation	(498,430)
30200A	Adult Shelter	(15,768,252)
30201	Women's Shelter	(129,806)
30202	Alternative Shelter for Adults	(3,019,938)
30203	Family Shelter	(1,650,345)
30204	Domestic Violence Shelter	(479,570)
30205	Youth Shelter	(250,000)

[3] Multnomah County's Visitor Development Fund allocation was forgone in FY 2024-2026 to support downtown revitalization efforts and to increase convention business in Portland. The FY 2027 budgeted amount is technically accounted for as beginning working capital, but will be an ongoing resource.

Prog. #	Program Name	FY 2027 SHS Reductions
30207	Bridge Housing	(160,754)
30210	Safety on the Streets	(1,328,269)
30300A	Housing Placement & Retention- Adults & Women	(2,880,087)
30301	Housing Placement & Retention- Families	(1,011,600)
30303	Housing Placement & Retention- Domestic Violence	(361,615)
30304	Emergency Rent Assistance	(1,026,455)
30305	Housing Placement & Retention- Medical/Aging	(100,000)
30306	Housing Placement & Retention- Youth Services	(242,950)
30400A	Supportive Housing	(570,800)
30400C	Local Bond Units and Site-Based Commitments	(179,990)
30400D	Tenant-Based Housing Commitments	(275,000)
30401B	Behavioral Health/Medical Housing- Service Coordination Team	(68,990)
30404	Supportive Housing- Youth	(20,000)
	Total Homeless Services Department Reductions	**(33,281,957)**
30999	Supportive Housing Services Revenue for Other Departments*	(7,513,041)
	Total SHS Reductions	**(40,794,998)**

*Please see table below for additional information on SHS reductions in other departments.

There is a total of $17.8 million of SHS funding in other County departments. The following table shows the total of FY 2027 SHS reductions in other departments. Many programs funded by SHS also have other funding sources. Additional information about SHS funding and reductions can be found in the Budget Director's Message in Volume 1 of the Adopted budget and in the Health Department, Nondepartmental, and Department of County Human Services Adopted budgets.

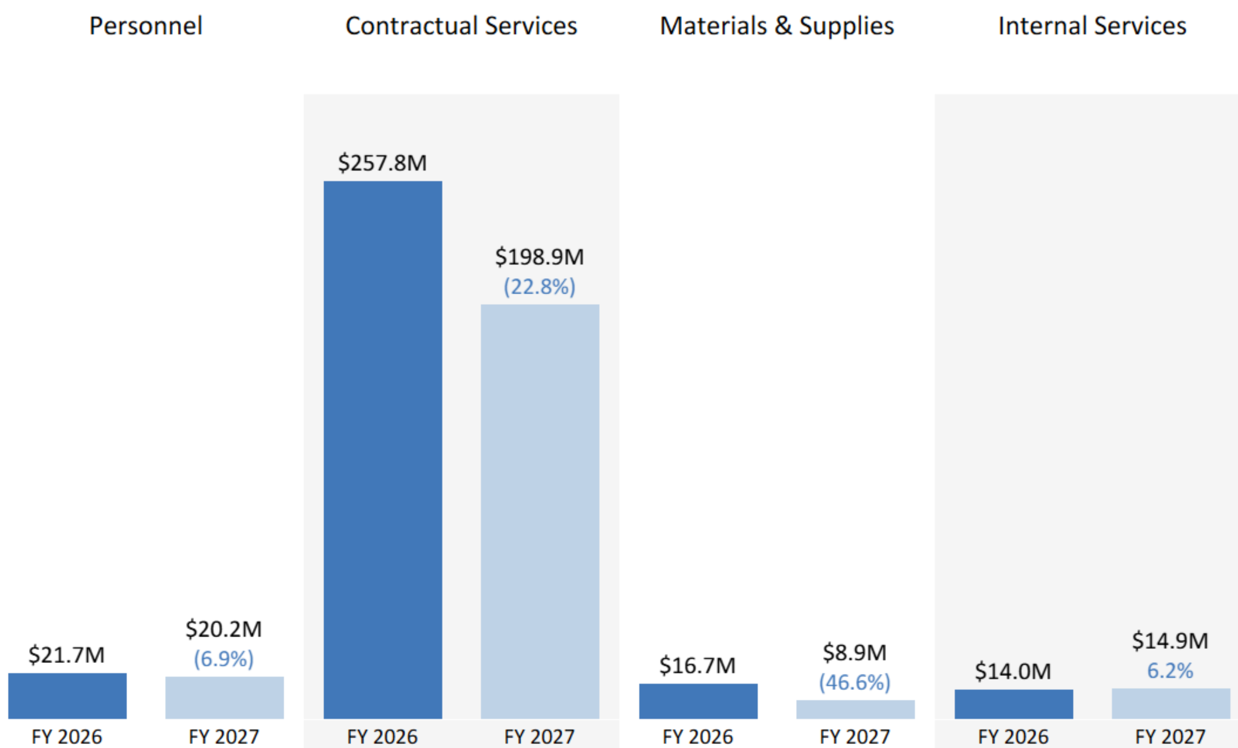
SHS Reductions in Other Departments	FY 2027
County Human Services	(1,005,560)
Health Department	(4,304,460)
Nondepartmental	(2,203,021)
Total Other Departments	**(7,513,041)**

SHS Additions

The FY 2027 budget makes the following SHS investments.

Prog. #	Program Offer Name or Addition Description	SHS Additions	SHS FTE Addition
25133B	YFS- Eviction Prevention	1,192,784	0.50
25133E	YFS- Eviction Prevention In Reach Team	565,000	0.00
30200B	Shelter Ramp Down	1,821,370	0.00
30300B	Additional Placement Assistance	307,500	0.00
40074B	Mental Health Residential Services	275,000	0.00
The investment below partially offsets an overall reduction in this program			
30600	Maintain Employment Programs	1,493,830	0.00
	Total Additions	**5,655,484**	**0.50**

The chart below provides a comparison of the budget's expense categories from FY 2026 to FY 2027. Contractual Services is by far the largest component of HSD's operating budget. Contractual Services decreased by $58.9 million. Internal Services grew 6.2%, and Materials and Supplies decreased 46.6% between FY 2026 and 2027.



The Budget Trends table below details the changes in expense categories from FY 2025 Actual to FY 2027 Adopted. Contractual services decreased significantly due to the reduction in Homeless Services Department revenue.

Category	FY 2025 Actual	FY 2026 Current Estimate	FY 2026 Adopted Budget	FY 2027 Adopted Budget	Difference
Personnel Services	19,206,747	23,835,384	21,684,053	20,196,030	(1,488,023)
Contractual Services	259,717,352	263,424,567	257,787,626	198,912,090	(58,875,536)
Materials & Supplies	12,736,358	14,927,417	16,687,890	8,914,595	(7,773,295)
Internal Services	12,442,680	14,714,111	14,042,844	14,910,526	867,682
Total Operating Budget	**304,103,137**	**316,901,479**	**310,202,413**	**242,933,241**	**(67,269,172)**
Contingency (All Funds)*	N/A	N/A	4,165,730	4,069,722	(96,008)
Internal Cash Transfers	19,000,000	0	0	1,854,750	1,854,750
Unappropriated (Reserves)*	N/A	N/A	0	0	0
Total Budget	**323,103,137**	**316,901,479**	**314,368,143**	**248,857,713**	**(65,510,430)**
FTE	**121.25**	**114.00**	**114.00**	**98.00**	**(16.00)**

* In any given fiscal year, there is no spending of unappropriated balance; if contingency is spent, it will be reflected in the Operating expenditures.

Total Budget by Division

Division Name	General Fund	Other Funds	Total Division Cost	Total FTE
Administration & Operations	7,814,759	604,745	8,419,504	30.00
System Support, Access, & Coordination	3,266,100	21,217,815	24,483,915	31.00
Safety off and on the Streets	19,288,527	56,276,562	75,565,089	13.00
Housing Placement & Retention	30,949,587	38,751,542	69,701,129	14.00
Supportive Housing	2,170,185	68,517,891	70,688,076	10.00
Total Homeless Services Department	**63,489,158**	**185,368,555**	**248,857,713**	**98.00**

Includes cash transfers, contingencies, and unappropriated balances.

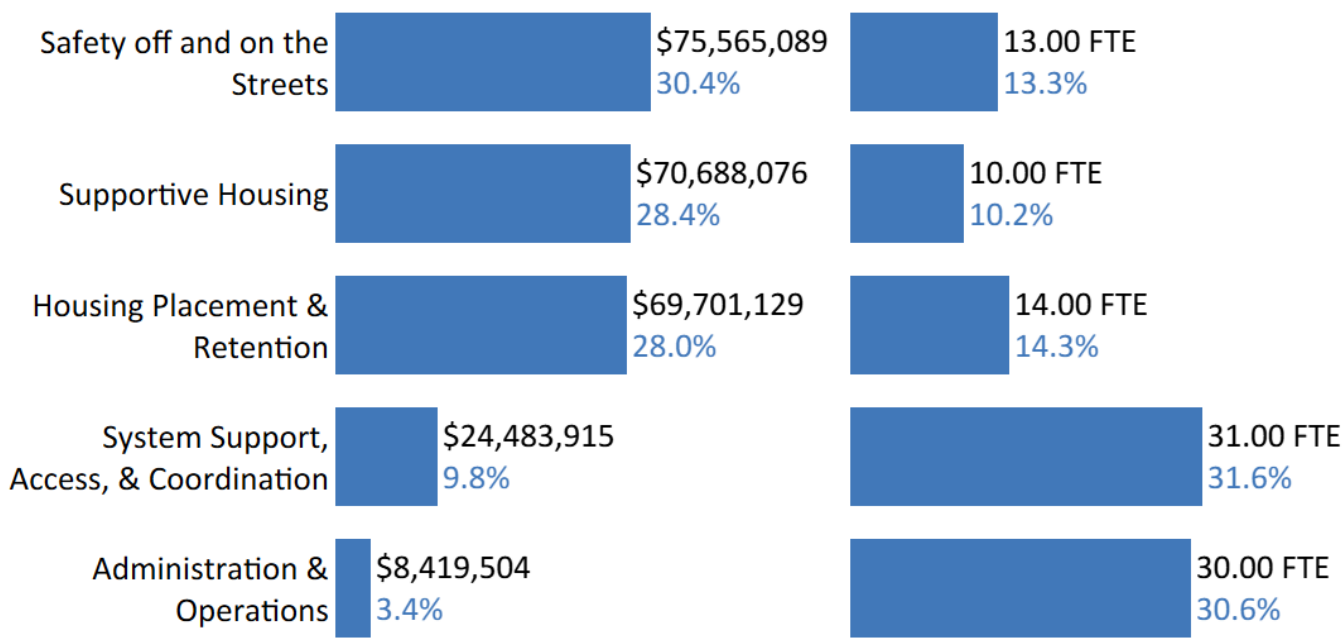


Table of All Program Offers

The following table shows the programs by division that make up the department's total budget, including cash transfers, contingencies, and unappropriated balances. The individual programs follow, grouped by division.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
Administration and Operations						
30000	Director Office, Administration and Operations		3,781,931	604,745	4,386,676	9.00
30001	Business Services		3,422,217	0	3,422,217	18.00
30002	Human Resources		610,611	0	610,611	3.00
Total Administration & Operations			**7,814,759**	**604,745**	**8,419,504**	**30.00**
System Support, Access, & Coordination						
30003	Data, Research, & Evaluation		415,446	2,939,579	3,355,025	8.50
30004	Policy & Planning		835,860	3,164,246	4,000,106	9.50
30005	Equity-Focused System Development & Capacity Building		0	901,683	901,683	3.00
30006A	Regional Coordination - Reserve and Contingency	X	0	4,069,722	4,069,722	0.00
30006B	Regional Strategies Implementation Fund	X	0	1,761,505	1,761,505	0.00
30006C	Homeless Management Information System		0	5,223,138	5,223,138	3.00
30006D	DCA IT HMIS Administration and Developer	X	0	878,802	878,802	0.00
30100	System Access, Assessment & Navigation		2,014,794	2,279,140	4,293,934	7.00
Total System Support, Access, and Coordination			**3,266,100**	**21,217,815**	**24,483,915**	**31.00**
Safety off and on the Streets						
30200A	Adult Shelter		6,536,897	24,390,897	30,927,794	5.00
30200B	Shelter Ramp Down	X	1,000,000	1,821,370	2,821,370	0.00

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
30200C	North Portland Day Center Ramp Down	X	158,000	91,755	249,755	0.00
30201	Women's Shelter		1,757,752	1,504,854	3,262,606	0.00
30202A	Alternative Shelter for Adults		1,995,421	4,155,600	6,151,021	2.00
30202B	Pass through State funding to City Shelters	X	0	2,759,567	2,759,567	0.00
30203	Family Shelter		1,303,207	7,533,374	8,836,581	1.00
30204	Domestic Violence Shelter		2,743,375	5,307,642	8,051,017	0.50
30205	Youth Shelter		209,565	3,698,502	3,908,067	0.50
30206	Winter Shelter & Severe Weather		821,675	0	821,675	0.00
30207	Bridge Housing		0	2,947,286	2,947,286	0.00
30210	Safety on the Streets		2,762,635	2,065,715	4,828,350	4.00
Total Safety off and on the Streets			**19,288,527**	**56,276,562**	**75,565,089**	**13.00**
Housing Placement & Retention						
30300A	Adults & Women Households		1,854,466	5,216,736	7,071,202	7.00
30300B	Additional Placement Assistance		0	307,500	307,500	0.00
30301	Housing Placement & Retention - Families		6,039,169	6,245,044	12,284,213	3.00
30302A	Placement out of Shelter		5,521,283	4,098,512	9,619,795	0.00
30302B	Additional Placement out of Shelter	X	7,130,912	0	7,130,912	0.00
30303	Housing Placement & Retention - Domestic Violence		2,792,195	6,566,573	9,358,768	2.50
30305	Housing Placement & Retention - Medical/Aging		0	1,485,210	1,485,210	0.00
30306	Housing Placement & Retention - Youth Services		5,220,410	2,465,998	7,686,408	1.50
30307	Housing Placement & Retention - Veterans		261,055	720,865	981,920	0.00
30308A	Gresham Homeless Services		731,712	0	731,712	0.00

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
30308B	East County Homeless Services	X	50,000	0	50,000	0.00
30309	Housing Placement & Retention - Primary Leasing		1,348,385	1,315,210	2,663,595	0.00
30311	State Rapid Rehousing Initiatives		0	4,930,415	4,930,415	0.00
30600	Employment Programs		0	5,399,479	5,399,479	0.00
Total Housing Placement & Retention			**30,949,587**	**38,751,542**	**69,701,129**	**14.00**
Supportive Housing						
30400A	Supportive Housing		381,360	15,681,666	16,063,026	9.00
30400C	Local Bond Units and Site-Based Commitments		0	18,419,900	18,419,900	0.00
30400D	Tenant-Based Commitments		0	17,812,010	17,812,010	0.00
30400E	System Support		0	2,300,235	2,300,235	0.00
30401	Behavioral Health/Medical Housing		0	2,740,570	2,740,570	0.00
30402	Local Long Term Rental Vouchers		405,075	4,206,485	4,611,560	0.00
30403	Supportive Housing - Families		841,390	3,112,480	3,953,870	1.00
30404	Supportive Housing - Youth		0	1,648,260	1,648,260	0.00
30405	Supportive Housing - Domestic Violence		0	1,607,275	1,607,275	0.00
30406	Frequent Users Systems Engagement		542,360	989,010	1,531,370	0.00
30999	Revenue for Other Departments		0	0	0	0.00
Total Supportive Housing			**2,170,185**	**68,517,891**	**70,688,076**	**10.00**
Total Homeless Services Department			**63,489,158**	**185,368,555**	**248,857,713**	**98.00**

Administration and Operations

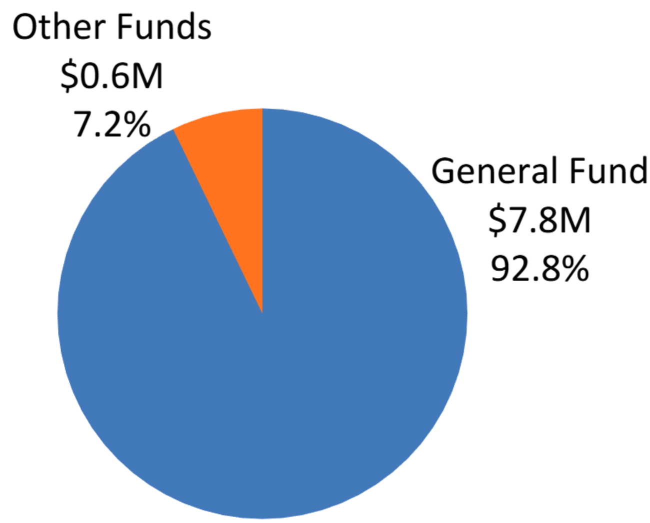
$8.4 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

30.00 FTE

(full time equivalent)



The Administration and Operations division provides strategic leadership and essential business support for the Homeless Services Department (HSD). By working with elected leaders, community organizations, and advisory groups, this division manages the department’s resources and ensures that homeless services are delivered effectively and equitably across the region.

Key Functions:

- **Equity-Focused Executive Leadership:** This unit provides strategic direction for the department's programs and services with a focus on ensuring equity and inclusivity.
- **Business Services:** This team manages the annual budget and oversees local, state, and federal funding. They handle the "behind-the-scenes" financial work, including purchasing, managing contracts, and ensuring that service providers are paid accurately and on time.
- **Human Resources:** This team manages hiring and the onboarding process for new staff. They also support employee retention by providing professional development, training, and maintaining a safe, inclusive work environment for all employees.
- **Communications:** This team manages internal and external messaging for the department. They use newsletters, social media, and storytelling to share the department's progress and challenges with the community. This unit also coordinates with County Central Communications to ensure that information provided to the public and the media is consistent and easy to understand.

Significant Division Changes

To meet FY 2027 budget constraints, HSD reduced staffing by 16.00 FTE, including 5.00 FTE within the Administration and Operations Division. Positions reduced in this Division: 1.00 FTE Administrative Analyst Senior, 1.00 FTE Administrative Analyst, 1.00 FTE Program Technician, 1.00 FTE Finance Supervisor, and 1.00 FTE Human Resources Analyst Senior. These cuts followed a rigorous organizational review that evaluated job descriptions, aligned classifications, and identified redundant duties or opportunities for cross-departmental collaboration.

Administration and Operations Outcomes

1. 100% of historically marginalized demographic cohorts of HSD employees report a 'Sense of Belonging' score that meets or exceeds the organizational average.

This outcome measures whether employees from historically marginalized groups (such as Black, Indigenous, and People of Color (BIPOC), LGBTQIA+ individuals, and people with disabilities) feel as welcomed, valued, and included in the workplace as the overall workforce. A "Sense of Belonging" score is typically derived from biannual employee climate surveys. Outside influences that impact this include the broader socio-political climate and systemic inequities in the region. Evidence-based practices supporting this outcome include targeted mentorship programs, inclusive leadership training, and establishing affinity groups that foster community and support.

Key Performance Indicator (KPI) 1.1: Belonging Average

KPI 1.1 Description: The Countywide employee survey asks respondents to rate their level of agreement with statements related to belonging including “I feel like I belong in my Department/Agency.” The agreement scale ranges from 1 - 4, with 4 connoting higher agreement and a better score.

FY 2026 Estimate:	**FY 2027 Target:**
Countywide Employee Survey score: 3.31 Stay Interviews: New measure; data is not available.	Countywide Employee Survey score: 3.5 Stay Interviews: Greater than 80% average response to: ● I have a strong sense of belonging in my team. ● I have a strong sense of belonging in HSD.

Outcome 1 Program Offers

The following program offers contribute to Outcome 1:

- 30000 - Director Office, Administration and Operations
- 30002 - Human Resources

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2. 100% of historically marginalized demographic cohorts of HSD employees achieve a retention rate that meets or exceeds the organizational average.

This outcome evaluates the department's ability to retain employees from historically marginalized backgrounds at rates equal to or better than the organization-wide average. "Retention rate" refers to the percentage of employees who remain employed with the department over a given period. Outside influences include competitive regional job markets, external economic pressures, and systemic barriers that disproportionately impact marginalized groups. Evidence-based practices include equitable compensation structures, clear pathways for career advancement, and trauma-informed management styles.

Key Performance Indicator (KPI) 2.1: Employee Retention Rates

KPI 2.1 Description: Employee voluntary and involuntary separation rates, disaggregated when available by demographics such as race and ethnicity, disability, language, gender identity, sexual orientation, and age.

Voluntary Separations are separations that happen because someone has resigned by their own choice. Involuntary separations reference separations due to layoff, bumping, LDA ending, disciplinary layoff, etc. Retention Rate demonstrates the percentage of staff we have retained due to involuntary and voluntary separations.

FY 2026 Estimate: Total Retention Rate: 90.4% Retention Rate (Voluntary): 98.4% Retention Rate (Involuntary): 92% An estimated 43% of employees that separated in FY 2026 will have transferred to another department in the County.	**FY 2027 Target:** Maintain Employee retention rate (Voluntary): >90% Goal Employee Retention Rate (Involuntary): >87% Maintain retention of staff with historically marginalized identities at an equitable rate.

Outcome 2 Program Offers

The following program offers contribute to Outcome 2:

- 30000 - Director Office, Administration and Operations
- 30002 - Human Resources

3. 75% of all employees report that the department actively prioritizes equity and inclusion.

This outcome assesses the overall staff perception of the department's commitment to equity and inclusion. "Equity" means ensuring everyone has what they need to succeed by removing barriers, while "inclusion" means creating environments where any individual or group feels welcomed and valued. This is typically measured through staff surveys. Outside influences may include shifts in departmental leadership, funding constraints for equity initiatives, and external political climates. Relying on continuous staff feedback loops and transparent communication regarding policy changes are key evidence-based practices to achieve this goal.

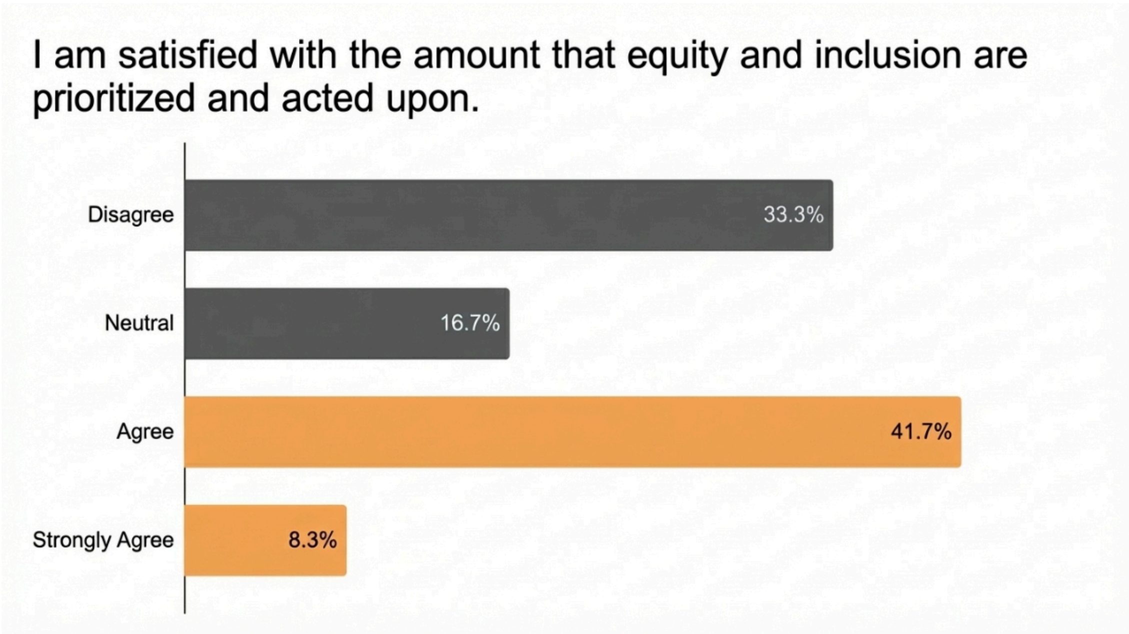
Key Performance Indicator (KPI) 3.1: Perception of Department's Prioritization of Equity and Inclusion

KPI 3.1 Description: Stay Interviews are completed for at least 1% of the total staff each year and Stay Surveys for at least 10% of the total staff each year.

Analyzing the survey responses to the questions below allow us to assess the Department's perceived emphasis on equity and inclusion:

- My department actively prioritizes equity and inclusion in department activities.
- My department's prioritization of equity and inclusion in department activities impacts my willingness to stay with the county.

Results from FY 2026 Stay Interview Surveys July 1, 2025 -Present:



Data based on responses from approximately 11% of our total employees.

FY 2026 Estimate:	**FY 2027 Target:**
Data from July 1-December 31 show that approximately 50% of employees that have participated in a stay interview agree or strongly agree with the statement: "I am satisfied with the amount that equity and inclusion are prioritized and acted upon."	75% of employees that have participated in a stay interview agree or strongly agree with the statement: "I am satisfied with the amount that equity and inclusion are prioritized and acted upon."

KPI 3.1 Equity Considerations: Data will be disaggregated by several demographic dimensions. This disaggregated data will allow the department to assess if different groups have disparate levels of satisfaction with how well equity and inclusion are prioritized.

Outcome 3 Program Offers

The following program offers contribute to Outcome 3:

- 30000 - Director Office, Administration and Operations
- 30002 - 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	Total FTE
30000	Director Office, Administration and Operations		3,781,931	604,745	4,386,676	9.00
30001	Business Services		3,422,217	0	3,422,217	18.00
30002	Human Resources		610,611	0	610,611	3.00
Total Administration & Operations			**7,814,759**	**604,745**	**8,419,504**	**30.00**

Division: Administration & Operations

Program Characteristics:

Program Description

The Director's Office provides the strategic leadership and administrative backbone for the Homeless Services Department (HSD). It manages core operations—including communications, equity initiatives, and administrative functions—to ensure the department remains focused on making homelessness rare, brief, and non-recurring. By overseeing a diverse and qualified workforce, the office fosters a culture dedicated to high performance and measurable results.

As the primary bridge between the department and the community, the Director coordinates policy and resources by serving as a liaison to federal, state, and local elected officials. This role involves collaborating with a wide range of regional partners, provider systems, and other counties to drive innovation and implement effective services across the region.

Internally, the Director's Office convenes department leaders to set strategic direction and solve shared problems. By ensuring organizational alignment and collective responsibility, the office ensures the department effectively meets its mission and strategic objectives in service to the community.

Equity Statement

This program offer funds positions on the HSD Equity Team responsible for leading, supporting, implementing, and operationalizing the work of the Workforce Equity Strategic Plan (WESP) in HSD as well as our values around an equitable, anti-racist, gender-affirming, accessible, and culturally responsive workplace for our diverse workforce.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$2,228,125	$146,207	$1,865,471	$233,263
Contractual Services	$0	$111,070	$0	$114,735
Materials & Supplies	$159,863	$0	$53,595	$0
Internal Services	$1,759,263	$71,173	$1,862,865	$256,747
Total GF/non-GF	**$4,147,251**	**$328,450**	**$3,781,931**	**$604,745**
Total Expenses:	**$4,475,701**		**$4,386,676**	
Program FTE	11.00	1.00	8.00	1.00
Program Revenues				
Intergovernmental	$0	$328,450	$0	$490,010
Other / Miscellaneous	$2,233,942	$0	$3,881,546	$0
Beginning Working Capital	$0	$0	$0	$114,735
Total Revenue	**$2,233,942**	**$328,450**	**$3,881,546**	**$604,745**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Employee job satisfaction average, as measured by Countywide Employee Survey	3.1	3.0	3.1
Department work climate general average, as measured by the Countywide Employee Survey	3.42	3.57	3.6

Division: Administration & Operations

Program Characteristics:

Program Description

The Business Services team provides the fiscal and operational oversight essential to the Homeless Services Department (HSD). They manage the comprehensive development of annual budgets, ensuring all spending aligns with local, state, and federal authority. Through rigorous grant monitoring and financial reporting, the team maintains strict fiscal compliance across all funding streams.

Business Services also stewards the department's service network by managing 100 contracts with over 60 community-based organizations. Staff oversee the entire contract lifecycle, including procurement, budget formulation, and annual renewals. By processing over 1,400 invoices and $200 million in annual payments, the team ensures public resources are managed with the highest standards of accountability and transparency.

Equity Statement

Business Services prioritizes equity through low-barrier procurement and responsive cash management. They also provide direct financial technical assistance and grants management support to small and culturally specific organizations. It supports the program teams in the provision of services and the HSD commitment to eliminating racial disparities among people at risk of or experiencing homelessness.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$3,552,463	$0	$3,422,217	$0
Total GF/non-GF	**$3,552,463**	**$0**	**$3,422,217**	**$0**
Total Expenses:	**$3,552,463**		**$3,422,217**	
Program FTE	19.00	0.00	18.00	0.00
Program Revenues				
Other / Miscellaneous	$2,970,803	$0	$3,420,759	$0
Total Revenue	**$2,970,803**	**$0**	**$3,420,759**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of contracts managed	102	119	100
Number of invoices processed	1,934	1,550	1,450

Division: Administration & Operations

Program Characteristics:

Program Description

The Human Resources (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 HR team serves represented, non-represented, limited-duration, and on-call employees. Support includes:
• Conducting internal and external recruitments,
• Providing a structured and engaging onboarding process, and
• Supporting employee retention through training, employee relations, and professional development.

Other services include: position description development, position management, timekeeping, and data systems maintenance. This team also interprets and ensures compliance with County Personnel Rules and Collective Bargaining Agreements, and provides guidance on components of the County's Workforce Equity Strategic Plan (WESP).

Equity Statement

In partnership with the HSD 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 WESP. The HR Team supports the implementation of the WESP and embeds equity and accessibility into all HR processes including recruitment, retention, support and professional development for HSD staff.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$795,862	$0	$610,611	$0
Total GF/non-GF	**$795,862**	**$0**	**$610,611**	**$0**
Total Expenses:	**$795,862**		**$610,611**	
Program FTE	4.00	0.00	3.00	0.00
Program Revenues				
Other / Miscellaneous	$797,930	$0	$610,611	$0
Total Revenue	**$797,930**	**$0**	**$610,611**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
# of staff support interactions including recruitment, time/leave, ADA support, training, stay/exit interviews, onboarding and consultations	N/A	16,250	12,500

System Support, Access, and Coordination

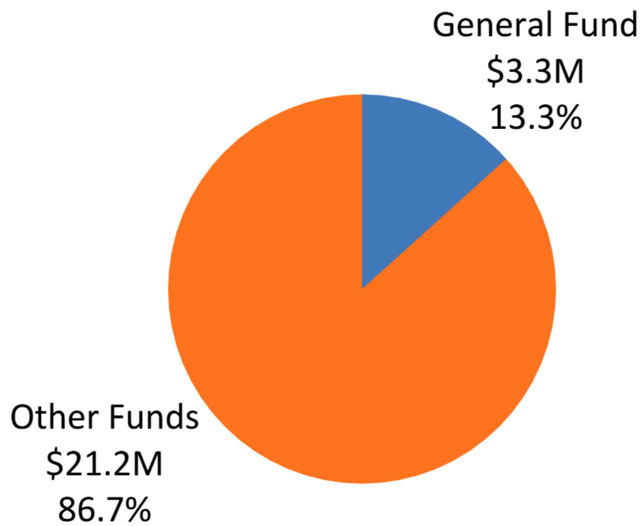
$24.5 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

31.00 FTE

(full time equivalent)



The System Support, Access, & Coordination division is responsible for providing multiple types of support to ensure the effective delivery of services and promote equity-focused practices in addressing homelessness. Programs in this division ensure that the regional network of homeless services operates efficiently, uses accurate data, and prioritizes racial equity. Our work connects high-level policy with the practical delivery of services to residents experiencing homelessness.

Key Functions

- **Data, Research, and Evaluation:** manages the collection and quality of information from contracted service providers. They create regular reports on program outcomes and provide data to local government and community partners. They also conduct detailed evaluations of specific programs and systems of care to ensure they are achieving the desired results.
- **Policy, Planning, and Regional Coordination:** leads community-driven policy initiatives, including the regional Metro Supportive Housing Services (SHS) measure. They collaborate with regional planning groups and advisory bodies, such as the Continuum of Care (coordinates federal funding), the Lived Experience Advisory Committee, and the Equity Advisory Committee. These groups ensure that policy recommendations include the perspectives of people who have personally experienced homelessness, with a specific focus on Black, Indigenous, and People of Color (BIPOC) communities.
- **Equity-Focused System Development:** helps community-based organizations, especially emerging and culturally specific organizations, have equitable opportunities to contract with HSD 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:** works to improve and coordinate how people find and enter the housing system. This includes Coordinated Access staff, who lead the process for assessing and prioritizing individuals and families for Permanent Supportive Housing (long-term housing with support services). This team also manages contracts for navigation support to help people connect with available services.

Significant Division Changes

The division was reduced by 6.00 FTE for FY 2027. Positions reduced in this Division: 1.00 FTE Project Manager Represented, 1.00 FTE Data Analyst Senior, 3.00 FTE Program Specialist Senior, and 1.00 FTE Program Specialist. The System Support, Access, & Coordination Division will continue to undertake several key initiatives in FY 2027 to strengthen the Homelessness Response System (HRS) and support regional efforts.

Homeless Management Information System (HMIS) Leadership:
HSD will continue to partner with the Department of County Assets to lead the implementation of HMIS for the tri-county region (Multnomah, Clackamas, and Washington counties), aligning with the regional focus of the Supportive Housing Services Measure.

Homelessness Response System (HRS) Support and Coordination:
Division teams will maintain support for the HRS implementation, which establishes a co-governance and accountability framework to set and achieve outcomes.

Coordinated Access and Prioritization:
The Coordinated Access Team will focus on expanding and refining the Multnomah Services and Screening Tool (MSST) tool. This effort aims to ensure equity-based and client-centered prioritization of services.

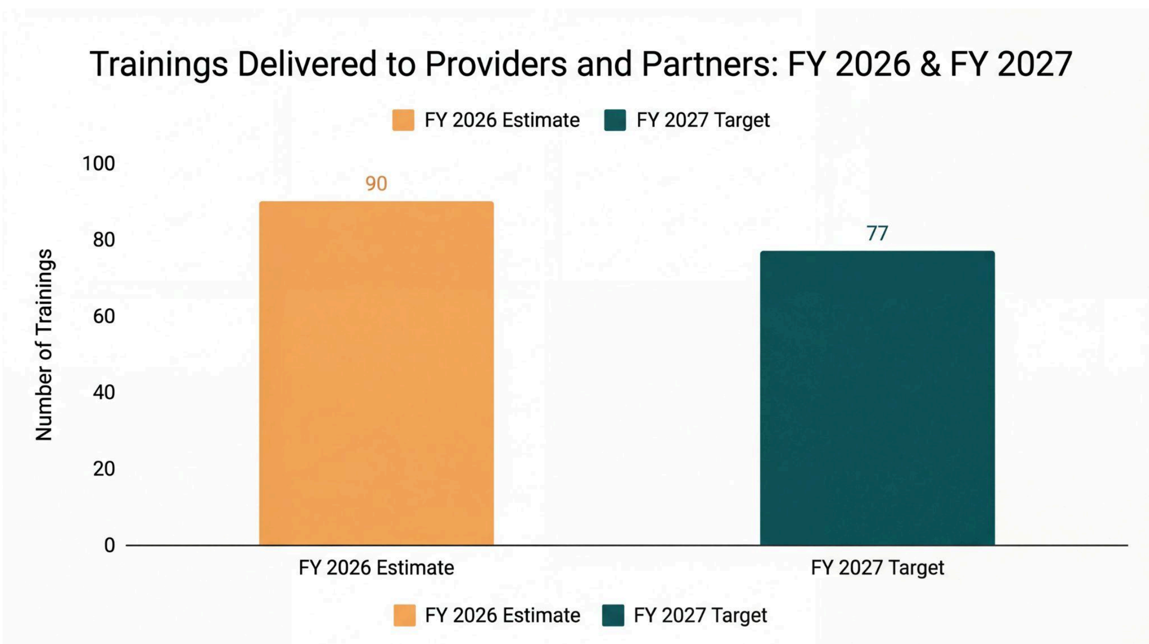
System Support, Access, and Coordination Outcomes

1. Maintain Volunteerism and Civic Engagement

This outcome measures the department's commitment to civic engagement and system capacity by tracking the number of capacity-building trainings delivered to community providers and system partners.

Key Performance Indicator (KPI) 1.1: Number of trainings delivered to providers and partners

KPI 1.1 Description: This KPI demonstrates capacity-building efforts by measuring how many community providers and system partners attend department-sponsored training. These trainings cover areas like culturally specific, strengths-based, and trauma-informed approaches. Factors that might influence this outcome include high staff turnover at provider agencies, varying levels of baseline knowledge among attendees, and the delivery method of the training (virtual vs. in-person). Utilizing adult learning theories, interactive modules, and continuous post-training feedback loops are evidence-based practices to ensure material is successfully comprehended and applied in the field.



FY 2026 Estimate: 90	**FY 2027 Target:** 77

KPI 1.1 Equity Considerations: These capacity-building trainings explicitly cover culturally specific, strengths-based, and trauma-informed approaches. This aligns directly with the Equity-Focused System Development team's goal to support emerging and culturally specific organizations, ensuring they have

equitable opportunities to access critical resources, contract with the department, and expand the culturally-responsive capacity of the entire homelessness response system.

Outcome 1 Program Offers

The following program offers contribute to Outcome 1:

- 30004 - Policy & Planning
- 30005 - Equity-Focused System Development & Capacity Building

2. Reduction of Homelessness

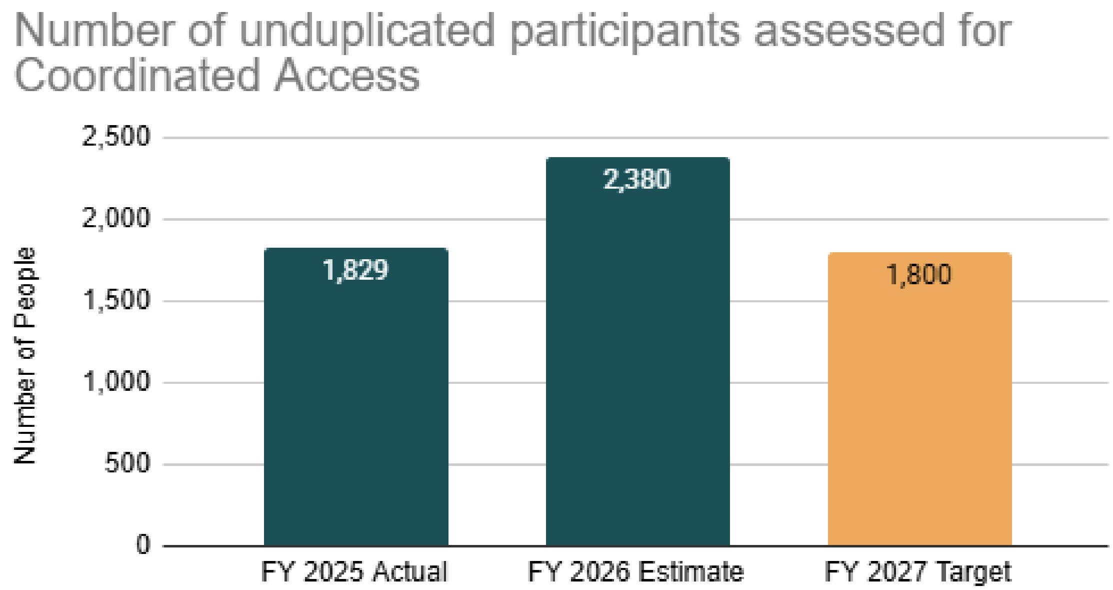
This outcome - supported across the department - focuses on reducing homelessness by streamlining the critical entry points into our housing system, ensuring that resources are directed to those with the highest need. A key function of this division is leading the Coordinated Access process. While the housing system offers various pathways to stability, Coordinated Access serves as the entry point for Permanent Supportive Housing (long-term housing with intensive support services). This process allows staff to assess and prioritize individuals and families based on vulnerability to ensure that intensive long-term resources are matched with those who need them most.

Success in this area is measured by the number of people assessed for coordinated access, which reflects our system's capacity to reach, evaluate, and prioritize our most vulnerable neighbors.

Omitted from this outcome are individuals who have already been placed into housing from our coordinated access system. These individuals are represented in our Housing Placement and Retention and Supportive Housing Divisions under the "Newly Housed" category. This distinction ensures that the Coordinated Access metric remains a dedicated measure of system entry, assessment, and prioritization, while the success of final placements is tracked through our specialized housing and retention divisions.

Key Performance Indicator (KPI) 2.1: Number of unduplicated participants assessed for Coordinated Access

KPI 2.1 Description: Measures the total number of unique individuals who complete the standardized community-wide Coordinated Access assessment process during the fiscal year.



FY 2026 Estimate: 2,380 participants	**FY 2027 Target:** 1,800 participants

KPI 2.1 Equity Considerations: Within the adult system, coordinated access prioritizes individuals eligible for Permanent Supportive Housing (PSH). PSH is specifically designed for individuals living with disabilities who have experienced long-term homelessness and possess extremely low incomes.

In practice, these individuals typically meet the criteria for Chronic Homelessness/Population A (as defined by local SHS Local Implementation priority standards) and/or meet the federal definition of chronically homeless. By focusing on this intersection of disability and housing instability, the system aims to provide intensive resources to those facing the highest barriers to stability.

Outcome 2 Program Offers

The following program offers contribute to Outcome 2. Division-specific administrative program offers are not included, as they support all outcome statements:

- 30100 - System Access, Assessment & Navigation

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3. Increase Ability to Make Data-Driven Decisions

This outcome focuses on strengthening the technical infrastructure and analytical capacity required to manage a modern, responsive housing and homeless services system. By prioritizing the integrity and accessibility of our data, this division ensures that policy decisions, funding allocations, and program adjustments are based on evidence rather than anecdotal trends. A robust data ecosystem allows us to track the effectiveness of our interventions, identify service gaps, and remain accountable to both participants and the public.

To achieve this, the division provides essential oversight and administration of the **Homeless Management Information System (HMIS)**, the primary database used to coordinate care and understand outcomes for individuals experiencing homelessness. A central priority of this work involves the development and launch of a **new HMIS implementation**, designed to modernize our data collection capabilities and improve user experience for HMIS end-users. These foundational efforts are further enhanced by the expansion of our **Data Mart tool**, which allows for the development of sophisticated reporting to translate raw data into actionable insights for leadership and stakeholders.

Key Performance Indicator (KPI) 3.1: Administer Homeless Management Information System (HMIS) for Multnomah County **KPI 3.1 Description:** This indicator tracks the department's fulfillment of its foundational responsibilities as the designated HMIS Lead Agency for the Multnomah County Continuum of Care . As the lead agency, the department is responsible for the technical oversight, data security, and federal compliance of the Homeless Management Information System—the mandatory database used by all local service providers to coordinate client care.

FY 2026 Estimate: Yes, Administrator	**FY 2027 Target:** Yes, Administrator

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Key Performance Indicator (KPI) 3.2: Develop and Launch new implementation of HMIS for Multnomah County

KPI 3.2 Description: This indicator tracks the multi-year strategic project to migrate Multnomah County's Homeless Management Information System (HMIS) from its legacy platform to a modernized system. This transition is designed to provide a more robust technical infrastructure that better meets the increasing scale and complexity of our local homeless service system.

Because homelessness is a challenge that transcends jurisdictional lines, this project is a coordinated regional effort conducted in close partnership with Washington and Clackamas counties. By aligning our data systems across the region, we ensure a more seamless experience for service providers and a more accurate understanding of housing needs across the tri-county area.

This complex modernization effort has already begun and is a high-priority initiative for the department. We look forward to continuing these development and implementation efforts through FY 2027 to ensure the new system is fully optimized to support our housing-led strategies.

FY 2026 Estimate: Yes	**FY 2027 Target:** Yes, nearing completion

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Key Performance Indicator (KPI) 3.3: Number of new reports developed in datamart tool

KPI 3.3 Description: This indicator tracks the expansion of our technical reporting capacity through the continuous development of reports based on our Data Mart. The Data Mart serves as a specialized reporting environment that pulls and organizes information from the Homeless Management Information System (HMIS) into accessible information.

By increasing the number of customized reporting tools available, the department provides leadership and program managers with the ability to visualize system trends, monitor service gaps, and conduct deeper analysis of housing outcomes. This ongoing development is essential for translating raw data into the actionable insights needed to support evidence-based decisions across our regional housing system.

FY 2026 Estimate: 4	**FY 2027 Target:** 4

Outcome 3 Program Offers

The following program offers contribute to Outcome 3. Division-specific administrative program offers are not included, as they support all outcome statements:

- 30006C- Regional Coordination - Homeless Management Information System

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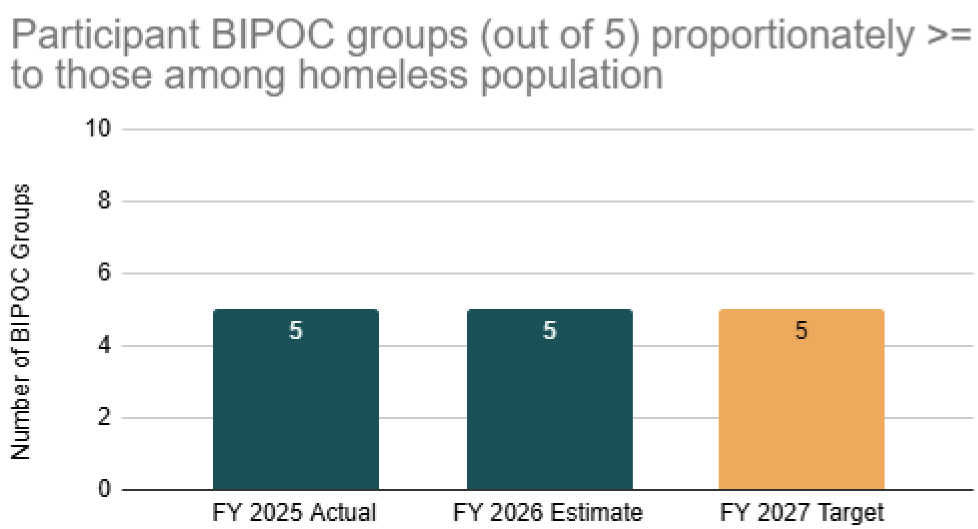
4. All participant BIPOC groups will access coordinated entry proportionately greater or equal to those among the homeless population.

This outcome measures whether five key BIPOC participant groups measured in our system are accessing systemic supports, coordinated entry systems, and navigation services at a rate equal to or greater than their share of the total homeless population."Coordinated Access" is a standardized community-wide process to assess and prioritize people for housing. Outside influences include historical mistrust of government systems. Evidence-based practices to boost equitable access include decentralizing access points (e.g., mobile outreach instead of requiring people to come to an office) and embedding services within trusted, culturally specific community-based organizations.

Key Performance Indicator (KPI) 4.1: Participant BIPOC groups (out of 5) proportionately >= to those among homeless population

KPI 4.1 Description: Measures the rate at which the five key BIPOC participant groups—Asian/Asian American, American Indian/Alaska Native, Black/African-American, Hispanic/Latina/e/o, and Native Hawaiian/Pacific Islander—access systemic supports, coordinated entry systems, and navigation services. The KPI is met when the access rate for these groups is proportionately equal to or greater than their representation among the total homeless population



FY 2026 Estimate: 5 out of 5	**FY 2027 Target:** 5 out of 5

Outcome 4 Program Offers

The following program offers contribute to Outcome 4. Division-specific administrative program offers are not included, as they support all outcome statements:

- 30100 - System Access, Assessment & Navigation

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	Total FTE
30003	Data, Research, & Evaluation		415,446	2,939,579	3,355,025	8.50
30004	Policy & Planning		835,860	3,164,246	4,000,106	9.50
30005	Equity-Focused System Development & Capacity Building		0	901,683	901,683	3.00
30006A	Regional Coordination - Reserve and Contingency	X	0	4,069,722	4,069,722	0.00
30006B	Regional Strategies Implementation Fund	X	0	1,761,505	1,761,505	0.00
30006C	Homeless Management Information System		0	5,223,138	5,223,138	3.00
30006D	DCA IT HMIS Administration and Developer	X	0	878,802	878,802	0.00
30100	System Access, Assessment & Navigation		2,014,794	2,279,140	4,293,934	7.00
Total System Support, Access, and Coordination			**3,266,100**	**21,217,815**	**24,483,915**	**31.00**

Division: System Support, Access, & Coordination

Program Characteristics:

Program Description

The Data and Research team analyzes system-wide information to track program performance and ensure public funds are used effectively. By maintaining dynamic dashboards and producing regular performance reports, the team provides the

transparency necessary for leaders and the community to make informed policy and budget decisions. A central priority of this work is monitoring racial equity and identifying disparities to ensure services are accessible to those who need them most.

In addition to these analytic tools, the team leads the annual Point-in-Time Count and manages reporting for the Homelessness Response Action Plan. They also facilitate specialized research partnerships with health care providers and other agencies to improve care for individuals who frequently cycle through emergency systems. Through these efforts, the team translates complex data into clear, community-informed strategies to end homelessness.

Equity Statement

Staff maintain compliance and apply the County's core values of equity and inclusion. This program addresses inequities by ensuring demographic information is integrated into all analysis, allowing for equity to be considered in program performance and for ongoing monitoring of disparities. By integrating the Racial Equity Lens Tool (RELT), this team ensures that equity is embedded into all new program data collection processes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$392,795	$1,821,288	$415,446	$1,506,890
Contractual Services	$0	$513,906	$0	$292,730
Internal Services	$0	$886,602	$0	$1,139,959
Total GF/non-GF	**$392,795**	**$3,221,796**	**$415,446**	**$2,939,579**
Total Expenses:	**$3,614,591**		**$3,355,025**	
Program FTE	2.00	8.50	2.00	6.50
Program Revenues				
Intergovernmental	$0	$2,313,853	$0	$2,427,298
Other / Miscellaneous	$0	$0	$415,446	$0
Beginning Working Capital	$0	$907,943	$0	$512,281
Total Revenue	**$0**	**$3,221,796**	**$415,446**	**$2,939,579**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of end-user trainings	677	650	650
Number of ad hoc data requests completed	31	40	40

Division: System Support, Access, & Coordination

Program Characteristics:

Program Description

This funding supports the team responsible for shaping county-wide policy through community engagement, data analysis, system support, and innovation. As the lead local agency for the U.S. Department of Housing and Urban Development (HUD)'s "Continuum of Care (CoC)," the Department serves as the central coordinator for the region's homelessness response, developing a comprehensive plan to ensure housing and services meet specific local needs. A major part of this work involves managing the annual federal application that secures over $37 million in funding for the local system of care. This funding also supports the oversight bodies for each population-specific system of care: domestic violence, youth, adults, families with children, and veterans, as well as community advisory bodies to ensure policy is well informed.

This offer also supports The County's Local Implementation Plan (LIP) for the Supportive Housing Services (SHS) Measure by supporting the policy and planning work to: (1) facilitate the Department's community advisory structure, including local and regional Measure advisory bodies; (2) represent the Department 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.

Equity Statement

The policy and planning work 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, disabling conditions, and other intersecting marginalized identities

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$329,175	$1,904,473	$400,760	$1,776,460
Contractual Services	$368,372	$0	$435,100	$0
Materials & Supplies	$4,779	$52,561	$0	$43,893
Internal Services	$44,464	$927,101	$0	$1,343,893
Total GF/non-GF	**$746,790**	**$2,884,135**	**$835,860**	**$3,164,246**
Total Expenses:	**$3,630,925**		**$4,000,106**	
Program FTE	0.50	10.00	1.05	8.45
Program Revenues				
Intergovernmental	$0	$2,055,684	$0	$2,742,907
Other / Miscellaneous	$0	$0	$616,756	$0
Beginning Working Capital	$0	$828,451	$0	$421,339
Total Revenue	**$0**	**$2,884,135**	**$616,756**	**$3,164,246**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of committee or advisory group meetings supported during the year	N/A	142	141
Number of provider conferences facilitated/staffed	N/A	3	3

Division: System Support, Access, & Coordination

Program Characteristics:

Program Description

The Multnomah County Local Implementation Plan (LIP) specifically prioritizes expanding the network of culturally specific providers and culturally specific services. The Homeless Services Department (HSD) recognizes that systemic inequities cause and worsen homelessness for Black, Indigenous, and other People of Color, LGBTQIA2S+, and other communities experiencing historic and current marginalization. These communities remain over-represented in our homeless population. Equity is a core value of the HSD and a necessary tool to meaningfully address our homelessness crisis and ensure that services are accessible for all eligible participants in Multnomah County regardless of protected class.

Training and technical assistance are key supports the HSD provides to support the culturally responsive and culturally specific capacity of the homeless services system. This program offer funds capacity dedicated to coordinating, developing, and delivering equity-focused training to contracted provider agencies and to HSD staff. This program offer also funds Training Coordination in the Domestic Violence (DV) System to support non-DV providers in serving people experiencing DV. Culturally specific and responsive technical assistance includes 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, liaising between the HSD and the network of culturally specific providers regarding matters related to services planning, policy development, organizational capacity building and trainings.

Equity Statement

The HSD's commitment to eliminating disparities in homeless services includes extending this expectation to our contracted providers. Equity focused training and technical assistance support our goal of expanding and supporting the culturally specific capacity of our system of services while supporting accountability to culturally responsive services across the entirety of our system of services.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$656,461	$0	$513,341
Internal Services	$0	$319,569	$0	$388,342
Total GF/non-GF	**$0**	**$976,030**	**$0**	**$901,683**
Total Expenses:	**$976,030**		**$901,683**	
Program FTE	0.00	4.00	0.00	3.00
Program Revenues				
Intergovernmental	$0	$272,951	$0	$901,683
Beginning Working Capital	$0	$703,079	$0	$0
Total Revenue	**$0**	**$976,030**	**$0**	**$901,683**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of trainings delivered to providers and partners	102	90	77
Number of culturally specific and culturally responsive providers engaged or supported with technical assistance	35	25	25

Division: System Support, Access, & Coordination

Program Characteristics: One-Time-Only Request

Program Description

The Supportive Housing Services (SHS) program 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. The reserve is a protective measure against financial instability, 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. In addition, the Contingency account provides resources for emergency situations or unplanned expenditures that, if left unaddressed, could have a negative impact on service delivery.

The contingency account is equivalent to 5% of the budgeted program funds for a given fiscal year. Due to significant reductions in SHS tax collections (revenue) in both FY 2025 and FY 2026, the department will be using the 15% of funds typically budgeted in this PO to mitigate reductions in services described in other program offers. In FY 2027, the department will have 2% of Stabilization Reserve.

Equity Statement

The Supportive Housing Services (SHS) program is dedicated to eliminating disparities in homeless services, prioritizing services for all people experiencing homelessness across the region, this Program Offer aims to sustain and support culturally inclusive services throughout our system by streamlining critical services, creating equitable and accessible pathways for all people experiencing homelessness in the County.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Unappropriated & Contingency	$0	$3,914,304	$0	$4,069,722
Total GF/non-GF	**$0**	**$3,914,304**	**$0**	**$4,069,722**
Total Expenses:	**$3,914,304**		**$4,069,722**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$0	$0	$155,418
Beginning Working Capital	$0	$3,914,304	$0	$3,914,304
Total Revenue	**$0**	**$3,914,304**	**$0**	**$4,069,722**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Percent of Contingency Fund met	0%	0	0
Percent of Stabilization Reserve fund met	0	2	2

Division: System Support, Access, & Coordination

Program Characteristics: One-Time-Only Request

Program Description

The Supportive Housing Services (SHS) measure and the intergovernmental agreement (IGA) that governs SHS Measure funding require that each county contributes not less than 5% of program funds to the Regional Strategies Implementation Fund (RSIF). Funding is used to achieve regional investment strategies. The Measure's Tri-County Planning Body (TCPB) soon to be SHS Regional Policy and Oversight Committee (RPOC). was tasked with strengthening coordination among the counties and Metro in addressing homelessness in the region. The TCPB prioritized the use of RSIF and identified regional goals, strategies, and outcome metrics in a work plan. In accordance with the IGA and following guidance from the TCPB, these funds are used to address goals in the following categories:

Coordinated Entry
Regional Landlord Recruitment
Healthcare System Alignment
Training
Technical Assistance
Employee Recruitment and Retention.

Equity Statement

The Supportive Housing Services (SHS) Regional Strategies Implementation Funds (RSIF) are dedicated to improving the alignment of programs and systems across the three counties to ensure equitable access for all people experiencing homelessness across the region. This Program Offer aims to sustain and support culturally inclusive services throughout our system by streamlining critical services, creating equitable and accessible pathways for all people experiencing homelessness

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$308,979	$0	$0
Contractual Services	$0	$2,313,288	$0	$1,761,505
Internal Services	$0	$150,411	$0	$0
Unappropriated & Contingency	$0	$251,426	$0	$0
Total GF/non-GF	**$0**	**$3,024,104**	**$0**	**$1,761,505**
Total Expenses:	**$3,024,104**		**$1,761,505**	
Program FTE	0.00	2.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$0	$0	$690,645
Beginning Working Capital	$0	$3,024,104	$0	$1,070,860
Total Revenue	**$0**	**$3,024,104**	**$0**	**$1,761,505**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Work w/Tri-County Planning Body to identify investment priorities for Regional Strategies Implementation Fund	6	6	6
Percent of Regional Strategies Implementation Fund met	100%	100%	100%

Division: System Support, Access, & Coordination

Program Characteristics:

Program Description

The U.S. Department of Housing and Urban Development (HUD) requires Continuum of Care (CoC) funding recipients to utilize a Homeless Management Information System (HMIS) to track and report on system-level performance and outcomes. Multnomah, Clackamas, and Washington Counties have implemented a tri-county HMIS led by Multnomah County. This regional collaboration ensures local oversight of data standards and aligns reporting with both regional and local metrics.

Following a successful procurement process, Multnomah County has contracted with Bitfocus, Inc. as the new HMIS vendor. All three counties are now collaborating to migrate data from the legacy system to Bitfocus, a process beginning this fiscal year and extending through FY 2027. This transition is a key element of the Homeless Services Department's (HSD) broader data modernization strategy.

Federal grant funds offset costs for licensing, professional services, and staff training. Additionally, this program supports the administration of the HMIS and the infrastructure managed by the Department of County Assets (DCA). These efforts ensure the secure transmission of data and the successful maintenance and migration of the regional data mart and allows for faster and more accurate reporting

Equity Statement

Comprehensive HMIS data is the foundation for understanding our program reach and impact. Collecting data at the point of service allows us to identify diverse needs and analyze long-term trends to ensure services are provided equitably. This process is critical for measuring whether housing outcomes are equitable

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$69,880	$859,045	$0	$972,720
Contractual Services	$0	$1,223,125	$0	$40,652
Materials & Supplies	$0	$372,932	$0	$517,181
Internal Services	$0	$1,479,170	$0	$1,837,835
Cash Transfers	$0	$0	$0	$1,854,750
Total GF/non-GF	**$69,880**	**$3,934,272**	**$0**	**$5,223,138**
Total Expenses:	**$4,004,152**		**$5,223,138**	
Program FTE	0.50	2.50	0.00	3.00
Program Revenues				
Intergovernmental	$0	$1,453,916	$0	$2,577,152
Beginning Working Capital	$0	$2,480,356	$0	$2,645,986
Total Revenue	**$0**	**$3,934,272**	**$0**	**$5,223,138**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Administer Homeless Management Information System (HMIS) for Multnomah County (OR-501)	1	1	1
Develop and Launch new implementation of HMIS for Multnomah County	N/A	N/A	1

Division: System Support, Access, & Coordination

Program Characteristics: One-Time-Only Request

Program Description

The Department of County Assets Information Technology (IT) Division provides overall support for the Homeless Management Information System (HMIS) software, infrastructure, and integrated technologies for Multnomah, Clackamas, and Washington counties. Through a contractual agreement between the three counties, Multnomah County IT staffs the Primary System Administrator role, ensuring overall HMIS system integrity. Program staff lead projects, changes, system evaluation, security, and governance.

This program enhances the Homeless Service Department (HSD)'s analytics infrastructure by integrating HMIS data with broader systems of care to support long-term regional needs. Staff provide the technical design and cloud-based development for a data mart that allows HSD teams to use information more comprehensively and nimbly for decision-making. By streamlining data extraction and system interoperability, these roles deliver actionable insights to improve services for cross-departmental and tri-county partners. This team is critical to ensuring data integrity during the upcoming HMIS migration and maintaining daily system stability. Ultimately, this investment increases transparency and fosters evidence-based solutions for the community at large.

Equity Statement

The HMIS and our data mart infrastructure provide the foundation for using demographics to identify gaps in access. This streamlined approach allows staff to analyze trends quickly, ensuring that resources are allocated equitably and we respond nimbly to community needs. By leveraging these insights, we can dismantle barriers to housing and foster inclusive system outcomes

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$493,817	$0	$500,314
Internal Services	$0	$240,390	$0	$378,488
Total GF/non-GF	**$0**	**$734,207**	**$0**	**$878,802**
Total Expenses:	**$734,207**		**$878,802**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Beginning Working Capital	$0	$734,207	$0	$878,802
Total Revenue	**$0**	**$734,207**	**$0**	**$878,802**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of new reports developed in datamart tool	4	4	4

Division: System Support, Access, & Coordination

Program Characteristics:

Program Description

This program offer funds key strategies for connecting people experiencing homelessness to essential services:

System Access and Coordinated Access (CA): Funds support for needs assessment and the CA system. CA identifies, assesses, and prioritizes households, connecting them to shelter, housing, and support services.

Specialized Housing Assessment: Funds culturally-specific mobile services to assess and connect people experiencing chronic homelessness with supportive housing opportunities.

Barrier Mitigation & Prevention: Funds information and referral resources, and legal support services for eviction prevention and reducing barriers to housing.

Community Partnerships: Funds a program to develop critical partnerships across systems of care and the private sector (e.g., housing, healthcare, behavioral health). This effort includes recruiting and supporting landlords to secure housing units for households exiting homelessness.

Equity Statement

The goal of this program offer is to streamline critical homeless services through the creation of equitable and accessible pathways to services for people experiencing homelessness in Multnomah County. Ensuring system coordination and equitable access is a core strategy to connect people to shelter, short and long-term housing, and other critical services while addressing historic and present disparities.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$221,477	$899,455	$242,107	$941,690
Contractual Services	$1,926,156	$1,238,476	$1,772,687	$623,698
Materials & Supplies	$0	$17,171	$0	$1,363
Internal Services	$0	$437,855	$0	$712,389
Total GF/non-GF	**$2,147,633**	**$2,592,957**	**$2,014,794**	**$2,279,140**
Total Expenses:	**$4,740,590**		**$4,293,934**	
Program FTE	1.40	5.60	1.46	5.54
Program Revenues				
Intergovernmental	$0	$2,467,624	$0	$2,051,880
Beginning Working Capital	$0	$125,333	$0	$227,260
Total Revenue	**$0**	**$2,592,957**	**$0**	**$2,279,140**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants served (receiving document preparation, barrier mitigation services or system navigation services)	N/A	560	400
Number of unduplicated participants assessed for Coordinated Access	1,829	2,380	1,800

Safety off and on the Streets

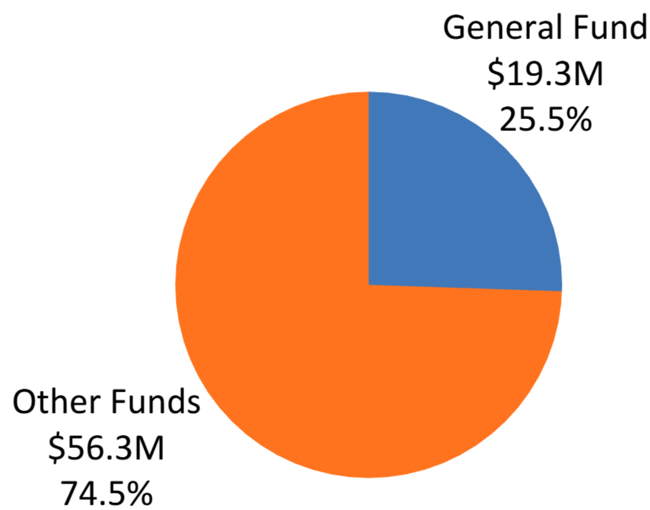
$75.6 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

13.00 FTE

(full time equivalent)



The Safety Off and On the Streets Division provides immediate, short-term relief for people experiencing homelessness. Our goal is to fill the gap between living outside and moving into permanent housing by offering safe places to sleep and essential survival services.

What We Do:

- **24/7 Shelters:** We support a variety of 24/7 facilities, including traditional shelters and "alternative" models like managed villages.
- **Daytime Resource Centers:** For those who do not use overnight shelters, these centers provide a safe space during the day, offering hygiene services (like showers and laundry), temporary storage, and connections to basic needs.
- **Alternative and other non-congregate shelters:** Offering a secure place to sleep and access to resources for individuals who are not currently served by traditional emergency shelters.
- **Severe Weather Response:** We coordinate emergency life-safety shelters during extreme heat or cold to protect the most vulnerable community members.
- **Street Outreach and Engagement:** Our teams meet people where they are—living outside. These services are person-centered and include:
    - Basic Needs: Delivering survival supplies and health resources.
    - Housing Readiness: Helping people get the documents and support they need to apply to and be placed into housing.
    - Specialized Care: Providing mental health outreach for those with severe mental illness, substance use disorders, and culturally-specific support.

Our programs focus on protecting the health and safety of those who face the highest risks while living outside, including people with disabilities, older adults, veterans, youth, and survivors of domestic or sexual violence. By prioritizing these groups and working alongside culturally-specific partners, we ensure that those most impacted by the trauma of homelessness have a clear, supported path toward stability and permanent housing.

Significant Division Changes

Due to the significant funding constraint described in the Department Overview, HSD cannot afford to both maintain FY 2026 shelter unit levels and fully fund the entire essential continuum of services and rent assistance needed to successfully transition people from homelessness to permanent housing.

This budget includes a reduction of 605 units in the adult shelter system and 90 scattered site vouchers within the family system. Following these reductions, HSD will still fund 1,371 adult shelter units, contributing to a total of 1,794 County-funded shelter units overall. The count includes Behavioral Health shelter units funded in program 30999, 75 units of shelter managed under City contracts, and an additional 52 shelter units funded through the Health Department. Also included is an adult motel shelter that will be closing midyear in FY 2027 to align with the existing lease agreement. This closure is necessary to retain more cost-effective units in our system. City shelter units are part of the broader shelter system, but only the 75 units that HSD contracts with the City are included in this count.

The FY 2027 budget will prioritize maximizing the impact of the remaining shelter units, ensuring that all 24/7 shelters serve as pathways to stable housing or other positive exits within the system. Specifically, Additional Placement out of Shelter (30302B) in the Housing Placement and Retention Division uses $6.0 million in one-time-only General Fund to fund additional placement from shelter into housing to maximize shelter effectiveness.

Also, Shelter Ramp Down (30200B) adds $1.8 million to cover two months of operations for 402 shelter units, extending their closure date from June 30, 2026 to August 31, 2026. This extension is intended to allow HSD and its provider partners to stagger the closure of shelter programs and dedicate more time to participant exit planning. Furthermore, $1.0 million is being used for housing placements from shelters to support the shelter transition strategy.

The budget closes the North Portland day center at the end of September. North Portland Day Center Ramp Down (30200C) includes funding for 3 months of operations.

Finally, the division will experience a reduction of $58.4 million and 4.00 FTE for FY 2027. The FTE changes include an addition of 1.00 FTE Manager 1 and the reduction of 1.00 FTE Project Manager Represented and 4.00 FTE Program Specialists.

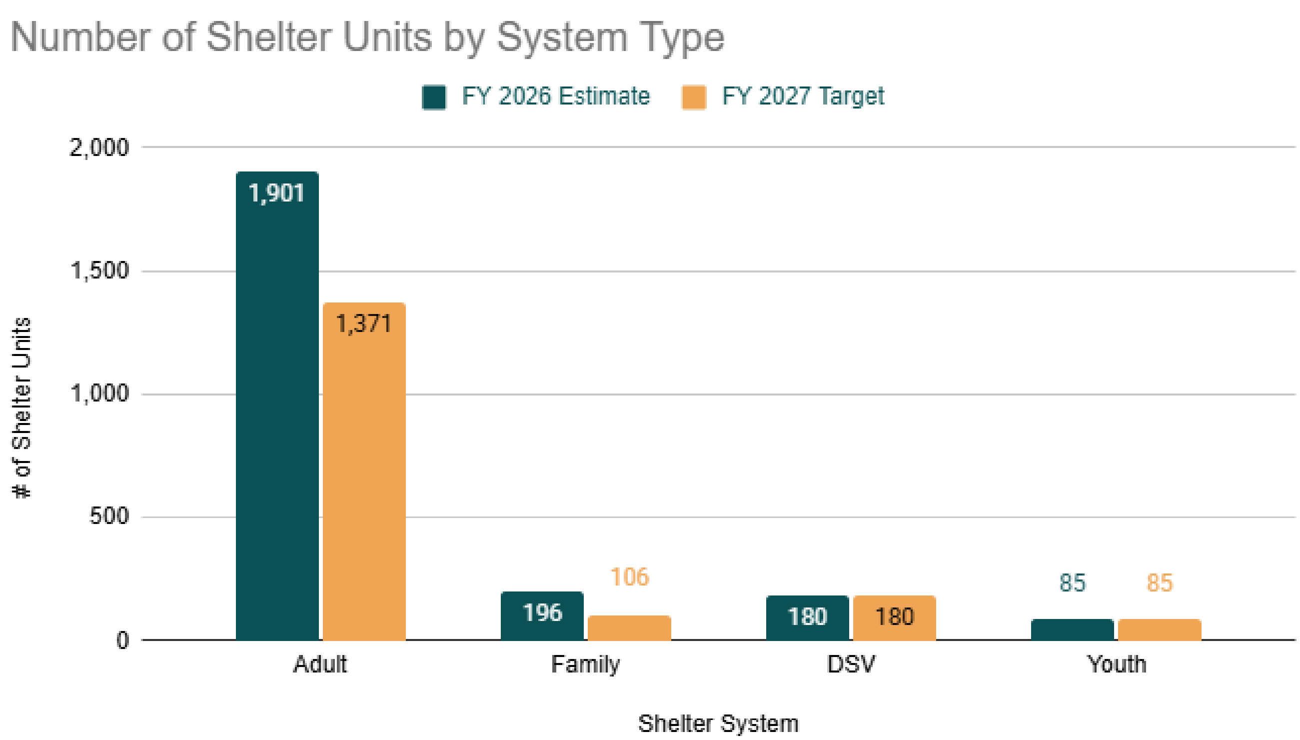
Safety off and on the Streets Outcomes

1. Reduction of Unsheltered Homelessness

This outcome focuses on decreasing the number of residents living in places not meant for human habitation, such as streets, parks, or vehicles. By investing in accessible shelter and supportive services, we aim to provide a direct path for vulnerable individuals to move indoors. This transition is a critical step in the reduction of unsheltered homelessness.

Key Performance Indicator (KPI) 1.1: Number of Shelter Units

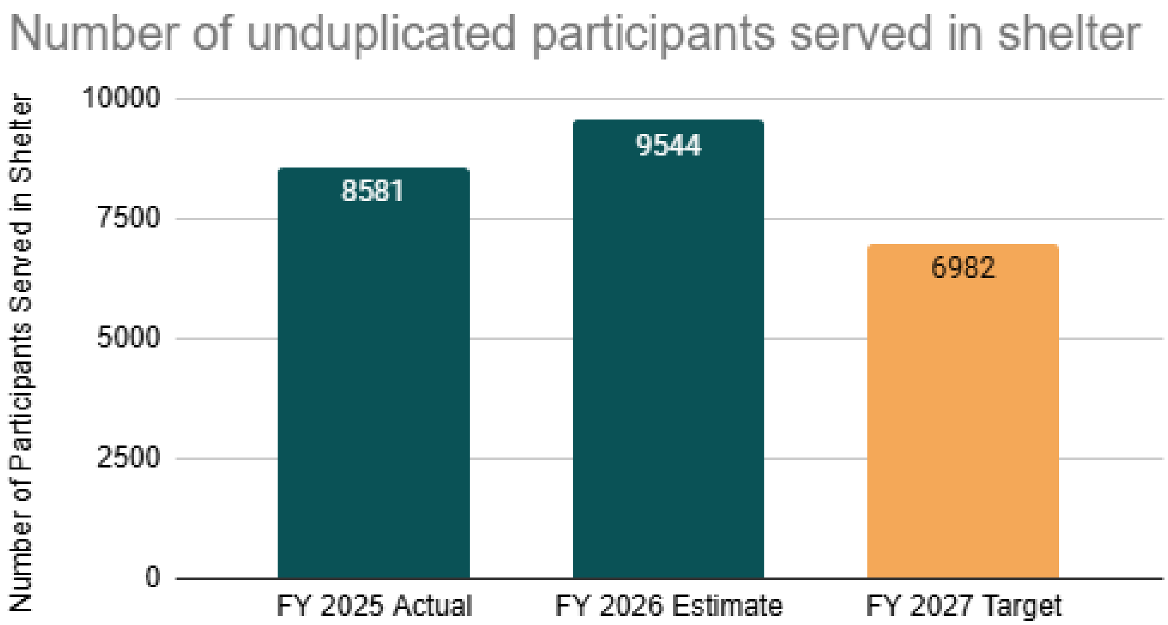
KPI 1.1 Description: This measure inventories resources that address homelessness, specifically various types of shelter units for the adult, families, DSV, and youth system



FY 2026 Estimate: Total Shelter Units: 2,362 Adult: 1,901 Families: 196 DSV: 180 Youth: 85	**FY 2027 Target:** Total Shelter Units: 1,742 Adult: 1,371 Families: 106 DSV: 180 Youth: 85

Key Performance Indicator (KPI) 1.2: Number of unduplicated participants served in shelter

KPI 1.2 Description: This metric tracks the total count of unduplicated participants who had a shelter stay at any point in time during the fiscal year.



FY 2026 Estimate: 9,544	**FY 2027 Target:** 6,982

Outcome 1 Program Offers

The following program offers contribute to Outcome 1. Division-specific administrative program offers are not included, as they support all outcome statements:

- 30200 - Safety off the Streets - Adult Shelter
- 30201 - Safety off the Streets - Women's Shelter
- 30202 - Safety off the Streets - Alternative Shelter for Adults
- 30203 - Safety off the Streets - Family Shelter
- 30204 - Safety off the Streets - Domestic Violence Shelter
- 30205 - Safety off the Streets - Youth Shelter
- 30207 - Safety off the Streets - Bridge Housing
- 30206 - Safety off the Streets - Winter Shelter & Severe Weather

2. Reduction of Homelessness

The primary goal of this outcome is to ensure that homelessness in our community is rare, brief, and non-recurring. Our strategy is built on the principle that every individual's path to stability is unique. Central to this mission is the understanding that **emergency shelter is not a pre-condition for housing**. Our system is designed to meet people where they are and move them into permanent homes as quickly as possible.

This reduction is achieved through a highly coordinated, housing-led approach across our department:

- **Housing-Focused Outreach:** Our outreach teams operate with the singular goal of transitioning individuals directly from the streets into permanent housing (30210).
- **Integrated Shelter Programming:** For those who utilize our shelter system, our **Housing Placement and Retention** division (30302A and 30302B) provides specialized support to ensure their stay is a short-term bridge to a long-term home.

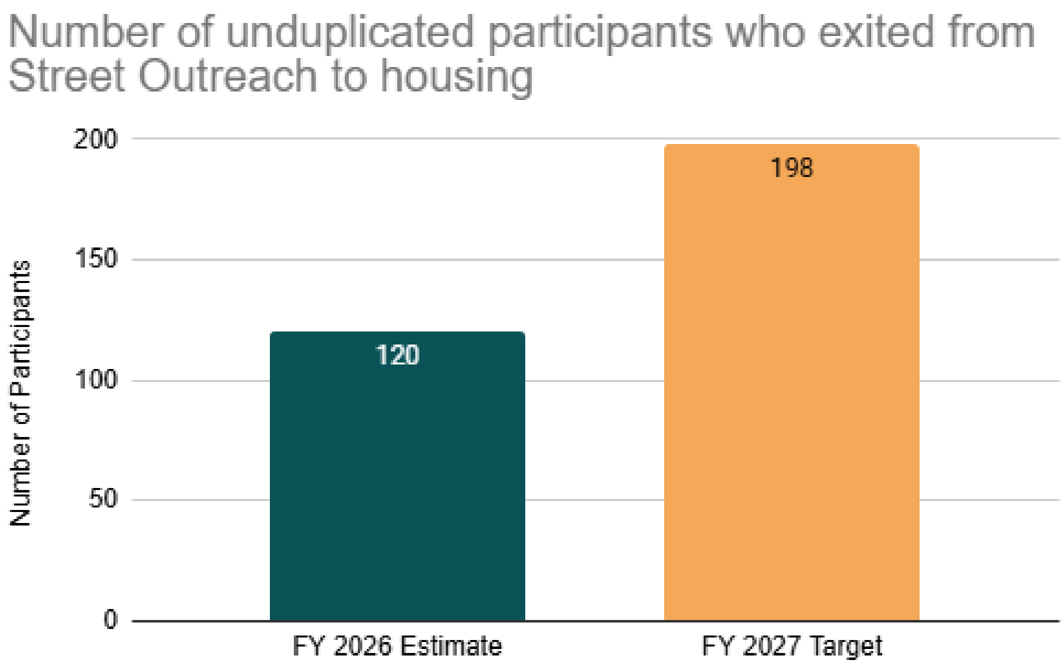
By aligning our resources, we prioritize the most direct route to housing, whether that journey begins in a shelter or directly from street-level engagement.

Key Performance Indicator (KPI) 2.1: People who exited from Street Outreach to housing

KPI 2.1 Description: This indicator measures the success of street-based engagement by tracking the number of individuals who transition directly from unsheltered environments into stable, permanent housing. Street outreach serves as a critical bridge for our most vulnerable neighbors, and a successful housing exit signifies that a participant has moved from the street into a housing opportunity.

In alignment with federal Housing and Urban Development standards, permanent housing destinations for this measure include a rental or ownership by the client (with or without an ongoing housing subsidy), a move from one Housing Opportunities for Persons With AIDS (HOPWA)-funded project to a HOPWA-funded permanent housing placement, or staying with family or friends on a permanent basis.

By monitoring these transitions, the department evaluates the effectiveness of outreach teams in navigating participants through the complexities of the housing system. This metric highlights our commitment to a housing-led outreach strategy, ensuring that initial contact on the street leads to the ultimate goal of long-term community stability.



FY 2026 Estimate: 120	**FY 2027 Target:** 198

Outcome 2 Program Offers

The following program offers contribute to Outcome 2. Division-specific administrative program offers are not included, as they support all outcome statements:

- 30210 - Safety on the Streets

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	Total FTE
30200A	Adult Shelter		6,536,897	24,390,897	30,927,794	5.00
30200B	Shelter Ramp Down	X	1,000,000	1,821,370	2,821,370	0.00
30200C	North Portland Day Center Ramp Down	X	158,000	91,755	249,755	0.00
30201	Women's Shelter		1,757,752	1,504,854	3,262,606	0.00
30202A	Alternative Shelter for Adults		1,995,421	4,155,600	6,151,021	2.00
30202B	Pass through State funding to City Shelters	X	0	2,759,567	2,759,567	0.00
30203	Family Shelter		1,303,207	7,533,374	8,836,581	1.00
30204	Domestic Violence Shelter		2,743,375	5,307,642	8,051,017	0.50
30205	Youth Shelter		209,565	3,698,502	3,908,067	0.50
30206	Winter Shelter & Severe Weather		821,675	0	821,675	0.00
30207	Bridge Housing		0	2,947,286	2,947,286	0.00
30210	Safety on the Streets		2,762,635	2,065,715	4,828,350	4.00
Total Safety off and on the Streets			**19,288,527**	**56,276,562**	**75,565,089**	**13.00**

Division: Safety off and on the Streets

Program Characteristics:

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.

In addition to providing a safe place to stay, these shelters serve as essential locations for guests to access services such as healthcare, income assistance, and permanent housing. Providers deliver these services through "trauma-informed care" and "assertive engagement"—approaches designed to build trust and meet the specific needs of individuals who have experienced significant hardship.

This program offer includes:
Emergency shelters (both congregate and non-congregate) for adults of all genders and couples, including veteran-specific or veteran-prioritized programming
Day centers
Recuperative care shelter beds
Shelter beds with enhanced behavioral health supports.

Equity Statement

One goal of programming is to reduce unsheltered homelessness across all communities by ensuring that all shelters, regardless of size and configuration, provide trauma-informed, racially equitable, and culturally responsive or specific programming.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$88,995	$1,013,181	$94,559	$785,991
Contractual Services	$5,313,095	$38,405,052	$5,733,914	$17,421,002
Materials & Supplies	$0	$12,500,111	$0	$5,126,023
Internal Services	$1,715,843	$2,032,591	$708,424	$1,057,881
Total GF/non-GF	**$7,117,933**	**$53,950,935**	**$6,536,897**	**$24,390,897**
Total Expenses:	**$61,068,868**		**$30,927,794**	
Program FTE	0.50	6.00	0.50	4.50
Program Revenues				
Intergovernmental	$0	$46,452,591	$0	$17,584,200
Beginning Working Capital	$0	$7,498,344	$0	$6,806,697
Total Revenue	**$0**	**$53,950,935**	**$0**	**$24,390,897**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of emergency shelter units	1,234	1,469	934
Number of unduplicated participants served	5,632	6,265	3,354

Division: Safety off and on the Streets

Program Characteristics: One-Time-Only Request

Program Description

Emergency shelter is vital to protecting the basic health and safety of individuals while they are experiencing homelessness. Due to a large shortfall in funding for FY 2027, multiple shelter programs are closing. This program funds two months of operations for shelter programs that are closing, allowing those programs to extend their closure date from June 30, 2026 to August 31, 2026. This extension will allow HSD and its provider partners to stagger the closure of shelter programs and provide more time for participant exit planning.

This offer also includes $1,000,000 of one-time-only funding, similar to funding in Additional Placement out of Shelter (30302B), for placement from shelter to housing. The $1,000,000 in this offer will be used to support those shelters that are closing during FY 2027 and HSD is committed to providing the board with aggregate person-level transition level plans every two weeks. Placements associated with this funding are reported in Additional Placement out of Shelter (30302B).

Equity Statement

One goal of programming is to reduce unsheltered homelessness across all communities by ensuring all shelters, regardless of size and configuration, provide trauma-informed, racially equitable, and culturally responsive or specific programming. Many adult shelters have priority access for women, veterans, those with disabilities and those ages 55 and older.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$0	$1,000,000	$1,821,370
Total GF/non-GF	**$0**	**$0**	**$1,000,000**	**$1,821,370**
Total Expenses:	**$0**		**$2,821,370**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Beginning Working Capital	$0	$0	$0	$1,821,370
Total Revenue	**$0**	**$0**	**$0**	**$1,821,370**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of emergency shelter units	N/A	N/A	402

Division: Safety off and on the Streets

Program Characteristics: One-Time-Only Request

Program Description

The North Portland Day Center will be closing this Fiscal Year. The North Portland Day Center requires a structured ramp-down period to prepare the St. Johns community, service providers, and vulnerable populations for the end of local access to these specific daytime services. This program offer funds a three month transition phase while continuing to operate a strategic hub and collaborative space for individuals experiencing homelessness.
During this transition period, this program offer provides basic daytime safety off the streets, hygiene services, temporary storage, and mail service for individuals in need. Additionally, it offers information, housing assessments, and emergency shelter referrals for individuals navigating Adult Homelessness System (AHS) resources, alongside navigation assistance to help individuals access income acquisition and health-related services. By allowing time for a measured transition, the program ensures a smoother shift for the community and clients.

In order to maintain day center services, $1,000,000 of the Department of County Assets (DCA) Homeless Services capital fund is set aside for future day center development in North Portland.

Equity Statement

One goal of programming is to reduce unsheltered homelessness across all communities by ensuring all shelters, regardless of size and configuration, provide trauma-informed, racially equitable, and culturally responsive or specific programming.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$0	$158,000	$0
Internal Services	$0	$0	$0	$91,755
Total GF/non-GF	**$0**	**$0**	**$158,000**	**$91,755**
Total Expenses:	**$0**		**$249,755**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$0	$0	$91,755
Total Revenue	**$0**	**$0**	**$0**	**$91,755**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of unduplicated participants served	N/A	N/A	88

Division: Safety off and on the Streets

Program Characteristics:

Program Description

Emergency shelter is vital to protecting the health and safety of individuals experiencing homelessness. This program funds shelter operations specifically designed to serve adults who identify as women. Funding is contracted to nonprofit providers to cover operating expenses, including staffing, maintenance, and on-site services.

In addition to providing a safe place to stay, these shelters serve as essential locations for women to access services such as healthcare, income assistance, and permanent housing. Providers deliver these services through "trauma-informed care" and "assertive engagement"—approaches designed to build trust and meet the specific needs of individuals who have experienced significant hardship.

Furthermore, these shelters are Domestic Violence informed. This design allows the program to support survivors of abuse and ease the high demand on the specialized domestic violence service system.

Equity Statement

One goal of programming is to end disparate rates of homelessness on the basis of race and ethnicity. All shelters, regardless of size and configuration, must provide trauma informed, racially equitable, and culturally responsive or specific programming.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$3,143,150	$1,612,215	$1,504,854
Internal Services	$208,063	$0	$145,537	$0
Total GF/non-GF	**$208,063**	**$3,143,150**	**$1,757,752**	**$1,504,854**
Total Expenses:	**$3,351,213**		**$3,262,606**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$2,930,340	$0	$1,504,854
Beginning Working Capital	$0	$212,810	$0	$0
Total Revenue	**$0**	**$3,143,150**	**$0**	**$1,504,854**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of emergency shelter units	150	150	150
Number of unduplicated participants served	890	716	847

Division: Safety off and on the Streets

Program Characteristics:

Program Description

Alternative shelters provide a safe environment for individuals who may not be able to access or thrive in traditional, large-scale facilities. These programs generally use a "village" model with individual shelter units (such as pods) instead of shared dormitories or motels.

All sites are designed to be low-barrier, focusing on the immediate health and safety of participants. To ensure effective support, every location provides trauma-informed and culturally responsive services.

Equity Statement

One goal of programming is to end disparate rates of homelessness on the basis of race and ethnicity. Regardless of their size and configuration, all shelters must provide trauma-informed, racially equitable, and culturally responsive programming.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$782,498	$0	$363,818
Contractual Services	$0	$6,603,029	$1,995,421	$3,169,603
Materials & Supplies	$0	$163	$0	$0
Internal Services	$0	$839,025	$0	$622,179
Total GF/non-GF	**$0**	**$8,224,715**	**$1,995,421**	**$4,155,600**
Total Expenses:	**$8,224,715**		**$6,151,021**	
Program FTE	0.00	5.00	0.00	2.00
Program Revenues				
Intergovernmental	$0	$4,363,983	$0	$4,155,600
Beginning Working Capital	$0	$3,860,732	$0	$0
Total Revenue	**$0**	**$8,224,715**	**$0**	**$4,155,600**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of emergency shelter units	117	165	135
Number of unduplicated participants served	169	310	270

HSD | Program #30202B - Safety off the Streets- Pass through State funding to City Shelters

Division: Safety off and on the Streets

Program Characteristics: One-Time-Only Request

Program Description

Multnomah County serves as both the shelter coordinator for the region and the lead for the MultiAgency Coordination group established by the State during Oregon's Emergency Homelessness Response. As part of its planning and financial responsibilities, the County manages the transfer of state funding to organizations chosen by the state.

These funds are a one-time grant from Oregon Housing and Community Services (OHCS) specifically designated for shelters managed by the City of Portland.

Equity Statement

Services funded through this program are delivered by highly skilled non-profit partners, which offer services tailored to support vulnerable people experiencing homelessness, especially communities of color, women, families with minor children. The inreach teams include staff from culturally-specific, domestic violence, and behavioral health providers to assist adults. Services are open to all eligible people experiencing homelessness in Multnomah County regardless of protected class.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$13,361,365	$0	$2,759,567
Total GF/non-GF	**$0**	**$13,361,365**	**$0**	**$2,759,567**
Total Expenses:	**$13,361,365**		**$2,759,567**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$13,361,365	$0	$2,759,567
Total Revenue	**$0**	**$13,361,365**	**$0**	**$2,759,567**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of emergency shelter units	222	185	75
Number of unduplicated participants served	323	389	200

Division: Safety off and on the Streets

Program Characteristics:

Program Description

Emergency shelter and associated emergency services are vital to protecting the basic health and safety of families experiencing homelessness. In addition to providing a safe place to stay, these shelters are essential locations for families to learn about and access services. Families in need of shelter are screened and referred through the Coordinated Access Shelter Intake Line. Families receive services to support their transition into permanent housing. These services include housing placement through the Homeless Family System of Care (HFSC) and resources to help families avoid entering homelessness.

These shelters provide families with private rooms and are strategically located in high demand areas where families have existing support networks. Designed to offer a stable environment for school-aged children, the program provides transportation to local schools and hosts healthy, engaging activities during non-school hours, evenings, spring break, and summer break. By offering growth and enrichment opportunities both on- and off-site, the program ensures children remain supported and engaged beyond their academic responsibilities.

The family shelter system leverages resources from the Federal, State, and local levels, as well as partnerships with faith-based organizations and non-profits.

Equity Statement

One goal of programming is to end disparate rates of homelessness on the basis of race and ethnicity. All shelters, regardless of size and configuration, must provide trauma-informed, racially equitable, and culturally responsive or specific programming. Families from communities of color are served at a higher rate compared to their representation among homeless families. This program is open to all eligible families regardless of protected class.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$191,766	$186,924	$213,992	$192,019
Contractual Services	$1,437,041	$7,144,924	$388,790	$5,893,518
Materials & Supplies	$0	$1,405,400	$0	$1,302,575
Internal Services	$690,221	$90,994	$700,425	$145,262
Total GF/non-GF	**$2,319,028**	**$8,828,242**	**$1,303,207**	**$7,533,374**
Total Expenses:	**$11,147,270**		**$8,836,581**	
Program FTE	1.00	0.00	1.00	0.00
Program Revenues				
Intergovernmental	$0	$7,287,469	$0	$6,250,799
Beginning Working Capital	$0	$1,540,773	$0	$1,282,575
Total Revenue	**$0**	**$8,828,242**	**$0**	**$7,533,374**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of emergency shelter units	106	196	106
Number of unduplicated participants served	953	1,016	980

Division: Safety off and on the Streets

Program Characteristics:

Program Description

This program offer supports confidential, emergency shelters serving survivors of domestic or sexual violence (DSV). All four shelters offer 24-hour security and staff support seven days a week. The average length of stay is 90-days, 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 to identify survivors' needs and match them with available shelter space. Services include: intensive DSV advocacy and support, safety planning, provision of basic needs, co-advocacy within the DSV service provider network, and referrals to community-based services and housing programs.These services are vital for protecting the health and safety of survivors.

This program offer also funds barrier reduction services for shelter participants and emergency motel vouchers to assist survivors in staying safe when shelter beds are full

Equity Statement

All programs, regardless of size and configuration, must provide trauma-informed, racially equitable, and culturally responsive or specific programming. The department prioritizes equitable access to confidential emergency shelter services for vulnerable populations with a focus on eliminating disparate rates of homelessness on the basis of race and ethnicity. This program is open to all eligible participants regardless of protected class.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$88,846	$0	$94,157
Contractual Services	$1,205,390	$6,285,428	$2,743,375	$4,496,790
Materials & Supplies	$0	$1,024,000	$0	$645,465
Internal Services	$0	$43,251	$0	$71,230
Total GF/non-GF	**$1,205,390**	**$7,441,525**	**$2,743,375**	**$5,307,642**
Total Expenses:	**$8,646,915**		**$8,051,017**	
Program FTE	0.00	0.50	0.00	0.50
Program Revenues				
Intergovernmental	$0	$6,118,330	$0	$5,307,642
Beginning Working Capital	$0	$1,323,195	$0	$0
Total Revenue	**$0**	**$7,441,525**	**$0**	**$5,307,642**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of emergency shelter units	140	180	180
Number of unduplicated participants served	384	550	600

Division: Safety off and on the Streets

Program Characteristics:

Program Description

The Homeless Youth Continuum (HYC) is a collaborative and coordinated system of nonprofit organizations, including those who provide culturally specific services. Its goal is to provide a comprehensive range of services to youth up to age 25 who are experiencing homelessness. To ensure the well-being of these youth, the system provides a 24-hour safety net through a centralized Access Center, where mobile and stationary staff conduct screening. These staff determine eligibility and refer youth to appropriate HYC programs or other systems of care.

This program offer funds nighttime shelters, day spaces, and associated services in those locations, including meals, hygiene resources, information/referral services, and case management. Emergency shelter is available at a downtown facility, which can accommodate up to 60 individuals, or up to 70 during the winter months.
Implementation of a motel vouchering program has provided a new resource that allows for bridge housing when shelter is at capacity or not appropriate. Additionally, Day Programs are offered at three locations and provide safety off the streets. 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, non-judgmental, and provide relational continuity.

Equity Statement

Homeless youth are especially vulnerable as they navigate the challenges of living on the streets. All shelters must provide trauma-informed, racially equitable, and culturally responsive or specific programming with a goal of reducing racial disparities across the system of care. Motel vouchers further advance equity by providing a non-congregate alternative for youth who feel unsafe in traditional shelters.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$95,592	$0	$98,726
Contractual Services	$1,388,100	$2,469,260	$209,565	$3,525,090
Internal Services	$0	$46,535	$0	$74,686
Total GF/non-GF	**$1,388,100**	**$2,611,387**	**$209,565**	**$3,698,502**
Total Expenses:	**$3,999,487**		**$3,908,067**	
Program FTE	0.00	0.50	0.00	0.50
Program Revenues				
Intergovernmental	$0	$2,611,387	$0	$2,474,157
Beginning Working Capital	$0	$0	$0	$1,224,345
Total Revenue	**$0**	**$2,611,387**	**$0**	**$3,698,502**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of unduplicated participants served	452	500	500
Number of emergency shelter units	85	85	85

Division: Safety off and on the Streets

Program Characteristics:

Program Description

This program funds the department's Winter Shelter Strategy to provide families experiencing unsheltered homelessness with safe, indoor spaces from November through March. This includes securing temporary motel room blocks during the winter months and funding a dedicated provider to manage the program. During declared severe weather emergencies, the system also coordinates referrals and transportation to ensure unsheltered families can safely access emergency shelter.

Equity Statement

Homeless families are disproportionately Black, Indigenous, and other People of Color, which is reflected in our data. Our winter weather response relies on culturally specific and culturally responsive services and utilizes trusted relationships with communities. Winter weather services are focused on making sure our most vulnerable families with children under 18 are safe, warm and dry. Winter shelter is open to all eligible families regardless of protected class.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$819,200	$117,785	$821,675	$0
Total GF/non-GF	**$819,200**	**$117,785**	**$821,675**	**$0**
Total Expenses:	**$936,985**		**$821,675**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$117,785	$0	$0
Total Revenue	**$0**	**$117,785**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of families that receive the safety of shelter	79	100	86

Division: Safety off and on the Streets

Program Characteristics:

Program Description

A bridge shelter, a nationally recognized best practice, is a supportive housing program connected with shelter.
The Rockwood 8 Bridge Shelter, a 42-unit motel, provides a specialized function in the overall shelter system, providing bridge shelter beds for people who have been prioritized for permanent supportive housing. These guests are waiting to move into their new homes.

The bridge shelter is a 24-hour, fully staffed shelter that assists in the safety and support of these highly vulnerable individuals. Many guests have experienced extended periods of homelessness and are living with significant disabling conditions.

This shelter 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 (SHS) measure to use 75% of SHS funds to serve Population A households.

Equity Statement

As a program that is designed to serve the most vulnerable in the community, this program serves a high rate of people of color, people with disabilities, and people with intersecting identities. This program is open to all eligible guests regardless of protected class.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$1,823,370	$0	$1,722,786
Materials & Supplies	$0	$1,150,910	$0	$1,224,500
Total GF/non-GF	**$0**	**$2,974,280**	**$0**	**$2,947,286**
Total Expenses:	**$2,974,280**		**$2,947,286**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$2,974,280	$0	$1,722,786
Beginning Working Capital	$0	$0	$0	$1,224,500
Total Revenue	**$0**	**$2,974,280**	**$0**	**$2,947,286**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of emergency shelter units	42	42	42
Number of unduplicated participants served	241	187	231

Division: Safety off and on the Streets

Program Characteristics:

Program Description

Living unsheltered requires specialized strategies that address the immediate safety and survival needs of individuals living outside. The Safety on the Streets program provides housing-oriented outreach focused on both immediate harm reduction and long-term housing solutions.

Outreach providers use assertive engagement and trauma-informed care to deliver essential services, including Survival Supplies (distribution of food, water, and emergency materials), Health & Support (Behavioral Health referrals and transportation vouchers), and Housing Navigation (assessments and referrals to appropriate shelters or housing).

The Homeless Services Department uses a coordinated model that ensures comprehensive service delivery across all of Multnomah County via regional teams focused on eight defined zones in Portland, Gresham, and East County. This offer also funds Medical Outreach Teams that provide specialized physical and mental health support and Culturally-Specific Teams that ensure equitable support for diverse communities. These teams coordinate across systems to avoid duplication and increase efficiency. By reaching people who may not access other services, this program reduces disparities and provides a vital entry point to the housing system.

Equity Statement

Safety on the Streets is designed to lower barriers and increase access for individuals most disconnected from our system. Data shows that Black, Indigenous, and People of Color are disproportionately overrepresented in the unsheltered population. This program offer includes culturally specific outreach teams that work countywide to identify and engage individuals who have struggled to access services through traditional methods.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$636,408	$0	$702,795
Contractual Services	$0	$1,311,784	$2,762,635	$831,255
Internal Services	$0	$309,802	$0	$531,665
Total GF/non-GF	**$0**	**$2,257,994**	**$2,762,635**	**$2,065,715**
Total Expenses:	**$2,257,994**		**$4,828,350**	
Program FTE	0.00	4.00	0.00	4.00
Program Revenues				
Intergovernmental	$0	$1,378,625	$0	$2,065,715
Beginning Working Capital	$0	$879,369	$0	$0
Total Revenue	**$0**	**$2,257,994**	**$0**	**$2,065,715**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of unduplicated participants served	N/A	825	1,600
Number of participants newly placed in housing	N/A	120	198

Housing Placement and Retention

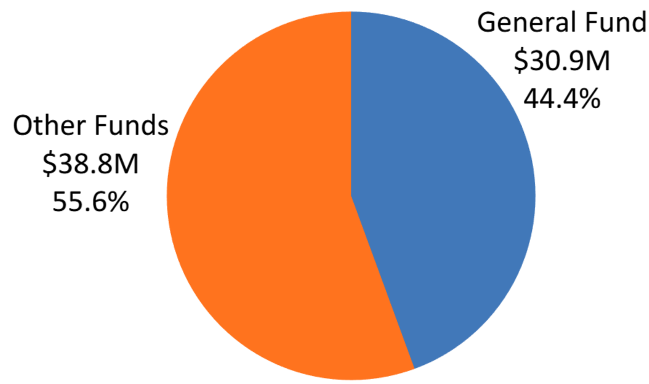
$69.7 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

14.00 FTE

(full time equivalent)



The Housing Placement and Retention Division helps individuals and families who are experiencing or at risk of homelessness find a home and remain there long-term. Our work focuses on providing the financial help and one-on-one support needed to bridge the gap between homelessness and a stable, permanent residence.

What We Do:

- **Rapid Rehousing:** We provide flexible, short-to-medium-term rent assistance and help cover one-time move-in expenses, such as security deposits.
- **Housing Search and Negotiation:** Case managers work directly with participants to find available housing and negotiate with landlords to lower barriers to entry.
- **Long-Term Stability Support:** Once a person is housed, we provide "retention services." This includes helping with household budgeting, resolving disputes with landlords, and addressing maintenance issues to prevent future evictions.
- **Income and Benefits Support:** We connect participants with services to help them increase their income and achieve financial independence.

In our region, Black, Indigenous, and other People of Color (BIPOC) are disproportionately represented in the homeless population. To address this, we work closely with community-based organizations that specialize in serving these communities, ensuring our services are culturally responsive and accessible to those most impacted by systemic housing barriers.

Our goals align with the Metro Supportive Housing Services Measure, focusing on moving people out of shelters and into permanent homes.

Significant Division Changes

HSD’s top priority for FY 2027 is **Keeping People Housed and Prioritizing New Housing Placements** by reducing reliance on shelter and maximizing shelter capacity for permanent housing and other positive exits.

HSD's budget for FY 2027 funds 2,373 Rapid Re-Housing (RRH) placements and 4,174 people sustained in housing. This includes a **one-time-only $6 million General Fund investment** that will increase the number of placements by 465 (30302B). This crucial funding restores placement levels to those seen in FY 2025 (before the reduction caused by changes in state funding in FY 2026) and allows for a total of 908 **placements from shelter**. With this $6 million investment added to ongoing placement out of shelter dollars (30302A), HSD predicts the shelter-to-housing placement rate across County-funded shelters will increase from 19% to 26% in FY 2027. This increase is key to maximizing shelter effectiveness, ensuring these programs serve as successful pathways to stable housing or other positive system exits.

This division also includes $2.1 million to support placements of adults and families into Recovery Housing, as well as $5.4 million for employment programs that will result in over 1,100 people receiving employment services and more than 200 new employment placements. The division also includes dedicated funding for housing placement programs in the City of Gresham and greater East County.

Even with the additional investment, the division budget will decrease by $10.4 million across all funds because of HSD’s significant budget gap.

Housing Placement and Retention Outcomes

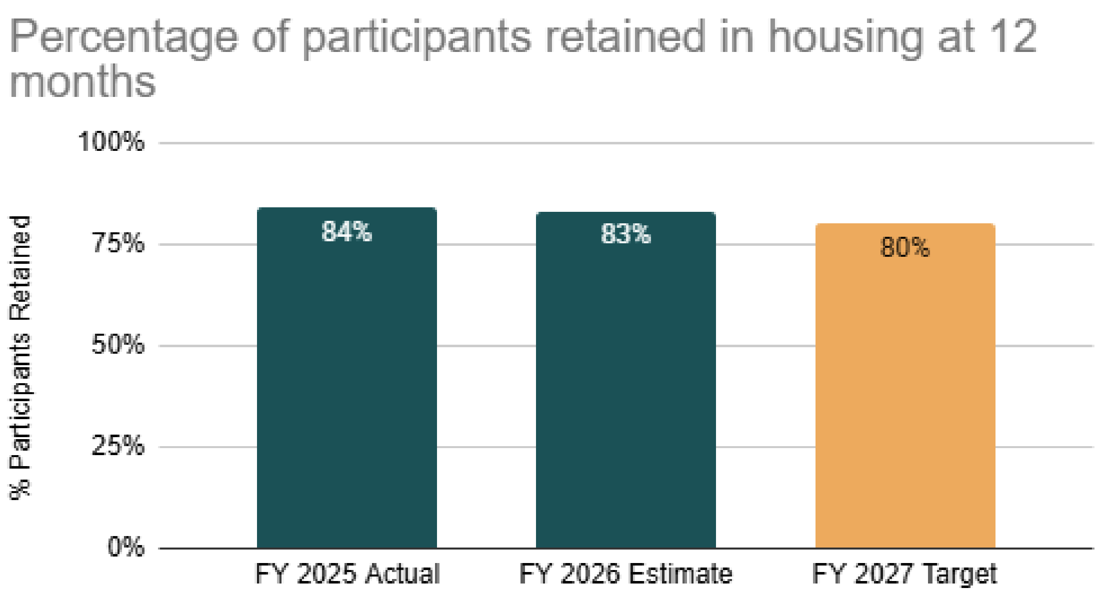
1. Increase the percentage of participants retained in housing.

This outcome focuses on the long-term stability of individuals and families who have transitioned into permanent housing—defined as stable, long-term housing without a designated time limit. Achieving lasting housing stability is the definitive benchmark for successfully ending the cycle of homelessness. By focusing on both the consistent delivery of support and the durability of housing placements over time, our system ensures that a transition into a home is a permanent solution rather than a temporary fix.

We recognize that outside influences heavily impact these results, including rising rent costs, inflation, eviction policies, and sudden changes in household income or health crises. To counter these external pressures, our programming does not end at the point of placement. Instead, our work involves providing ongoing, individualized wrap-around supportive services, such as intensive case management and financial counseling. These are highly proven, evidence-based practices that provide the necessary safety net to help residents remain housed and navigate economic volatility.

Key Performance Indicator (KPI) 1.1: Percentage of participants retained in housing at 12 months

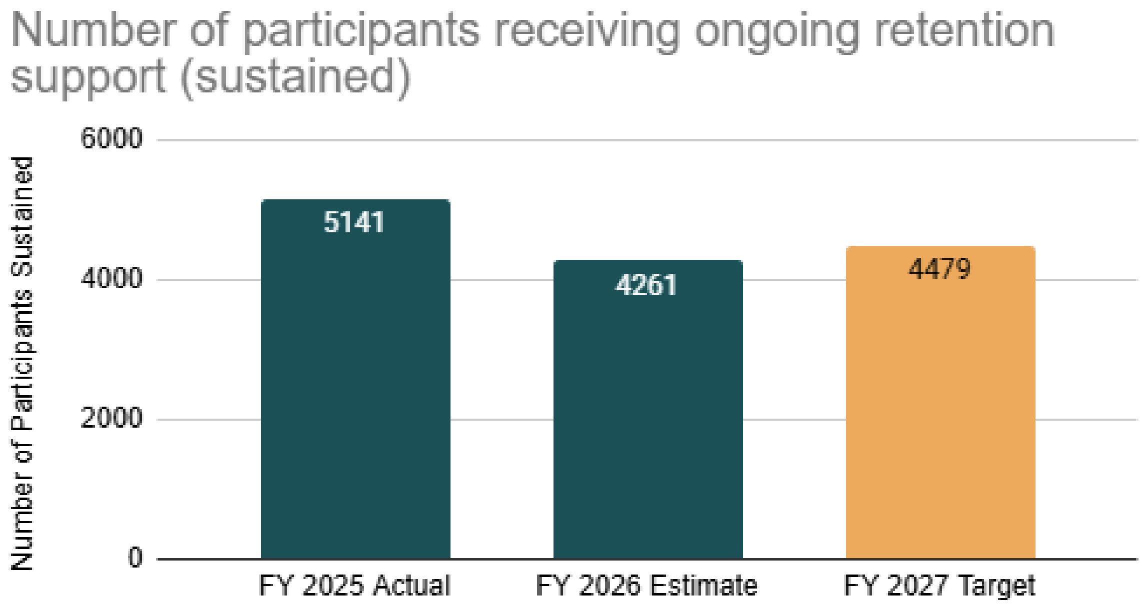
KPI 1.1 Description: This indicator measures the percentage of individuals and families who remain in housing 12 months after the end of their rental subsidy, reflecting their ability to maintain long-term housing stability with the support of rent subsidy and/or case management services. This is the percentage of participants who maintained permanent housing 12 months post subsidy (after their program Exit Date).



FY 2026 Estimate: 83%	**FY 2027 Target:** 80%

Key Performance Indicator (KPI) 1.2: Number of participants receiving ongoing retention support (sustained)

KPI 1.2 Description: This metric tracks the number of individuals who are receiving continuous, sustained support services to help them maintain their housing stability after initial placement.



FY 2026 Estimate: 4,261 participants receiving ongoing retention support (sustained)	**FY 2027 Target:** 4,479 participants receiving ongoing retention support (sustained)

Outcome 1 Program Offers

The following program offers contribute to Outcome 1. Division-specific administrative program offers are not included, as they support all outcome statements:

- 30300A - Housing Placement & Retention - Adults & Women Households
- 30300B - Housing Placement & Retention - Additional Placement Assistance
- 30301 - Housing Placement & Retention - Families
- 30302A - Housing Placement & Retention - Placement out of Shelter
- 30302B - Housing Placement & Retention - Additional Placement out of Shelter
- 30303 - Housing Placement & Retention - Domestic Violence
- 30305 - Housing Placement & Retention - Medical/Aging
- 30306 - Housing Placement & Retention - Youth Services
- 30307 - Housing Placement & Retention - Veterans
- 30308A - Housing Placement & Retention - Gresham Homeless Services
- 30308B - Housing Placement & Retention - East County Homeless Services
- 30309 - Housing Placement & Retention - Primary Leasing
- 30311 - Housing Placement & Retention - State Rapid Rehousing Initiatives

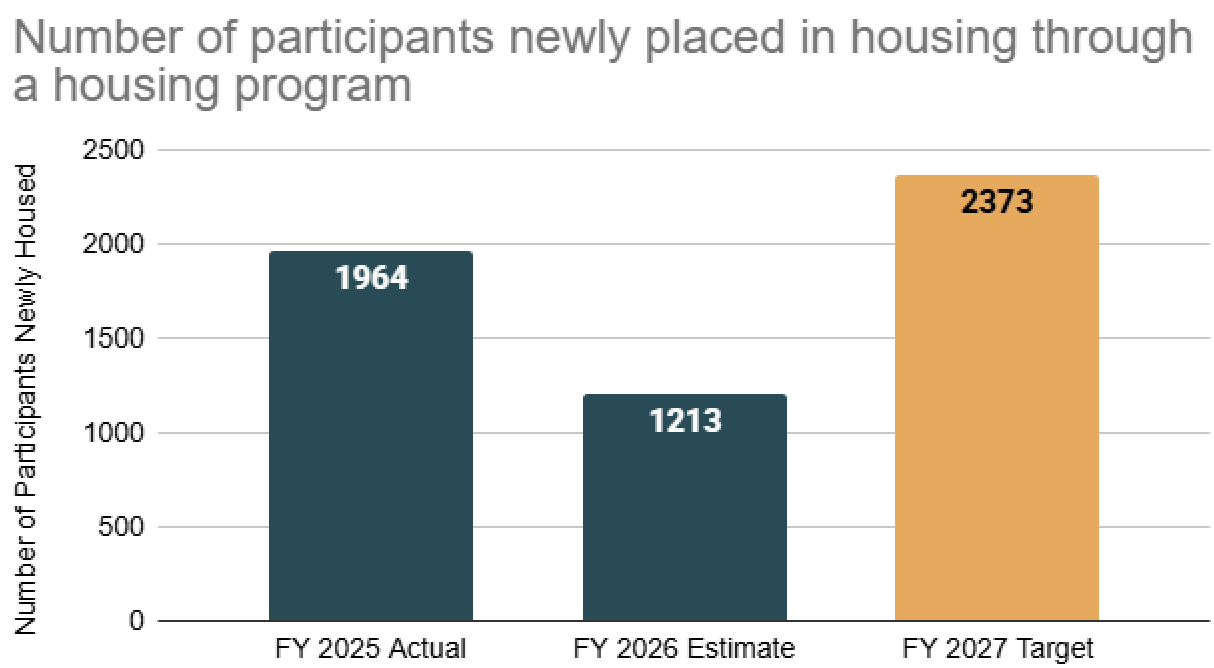
2. Reduction of Homelessness

This outcome focuses on reducing homelessness by achieving new housing placements through a flexible, multi-pathway approach. While a critical component of this work involves helping individuals and families move from emergency shelter into permanent housing, shelter is not the only route to stability. Our system is designed to meet residents in their current circumstances—whether they are currently in a shelter or engaging with services —to facilitate a direct and efficient transition into a housing opportunity.

Success in this mission is achieved by providing rent subsidies and housing case management services. These resources are designed to both place people in, and help them maintain, stable housing. By addressing financial barriers and providing individualized support, we ensure that placements are durable and long-term.

Key Performance Indicator (KPI) 2.1: Number of participants newly placed in housing through a housing program

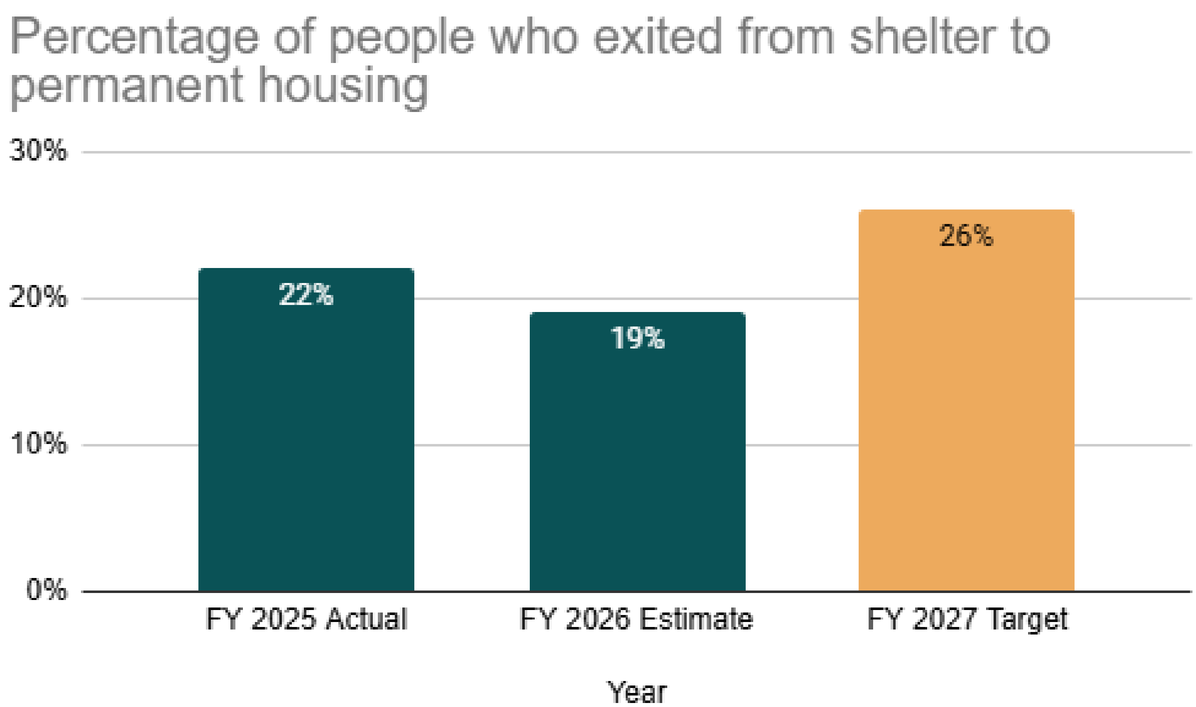
KPI 2.1 Description: Measures the number of participants newly placed in a Rapid Re-Housing program, which provides a maximum of 24-months of rent assistance.



FY 2026 Estimate: 1,213 participants newly placed in housing	**FY 2027 Target:** 2,373 participants newly placed in housing

Key Performance Indicator (KPI) 2.1: Percentage of people who exited from shelter to permanent housing

KPI 2.1 Description: This measure monitors the percentage of individuals who successfully transition out of shelter into permanent housing.



FY 2026 Estimate: 19%	**FY 2027 Target:** 26%

Outcome 2 Program Offers

The following program offers contribute to Outcome 2. Division-specific administrative program offers are not included, as they support all outcome statements.

- 30300A - Housing Placement & Retention - Adults & Women Households
- 30300B - Housing Placement & Retention - Additional Placement Assistance
- 30301 - Housing Placement & Retention - Families
- 30302A - Housing Placement & Retention - Placement out of Shelter
- 30302B - Housing Placement & Retention - Additional Placement out of Shelter

- 30303 - Housing Placement & Retention - Domestic Violence
- 30305 - Housing Placement & Retention - Medical/Aging
- 30306- Housing Placement & Retention - Youth Services
- 30307 - Housing Placement & Retention - Veterans
- 30308A - Housing Placement & Retention - Gresham Homeless Services
- 30308B - Housing Placement & Retention - East County Homeless Services
- 30309 - Housing Placement & Retention - Primary Leasing
- 30311 - Housing Placement & Retention - State Rapid Rehousing Initiatives

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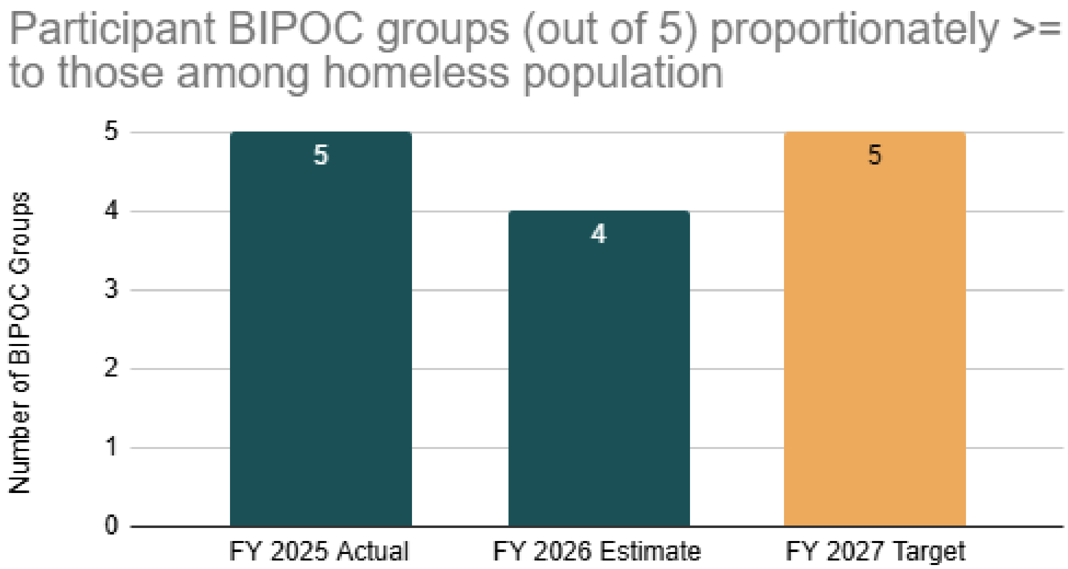
3. All participant BIPOC communities will receive services proportionately greater or equal to those among the homeless services population.

This outcome evaluates whether Black, Indigenous, and People of Color (BIPOC) are accessing housing at rates equal to or higher than their demographic representation in the all systems By Name List. Ensuring equitable access addresses historical disparities where marginalized groups have faced barriers to receiving services. Outside influences include the geographic location of shelters, language access, and trust in government or institutional systems. Providing culturally responsive shelter environments and partnering with culturally-specific organizations are evidence-based practices that improve access for BIPOC individuals.

Key Performance Indicator (KPI) 3.1: Participant BIPOC groups (out of 5) proportionately >= to those among homeless services population

KPI 3.1 Description: Measures the rate at which the five key BIPOC participant groups—Asian/Asian American, American Indian/Alaska Native, Black/African-American, Hispanic/Latina/e/o, and Native Hawaiian/Pacific Islander—access systemic supports, coordinated entry systems, and navigation services. The KPI is met when the access rate for these groups is proportionately equal to or greater than their representation among the All Systems by name list.



FY 2026 Estimate: 4 out of 5	**FY 2027 Target:** 5 out of 5

Outcome 3 Program Offers

The following program offers contribute to Outcome 3. Division-specific administrative program offers are not included, as they support all outcome statements:

- 30300A - Housing Placement & Retention - Adults & Women Households
- 30300B - Housing Placement & Retention - Additional Placement Assistance
- 30301 - Housing Placement & Retention - Families
- 30302A - Housing Placement & Retention - Placement out of Shelter
- 30303 - Housing Placement & Retention - Domestic Violence
- 30305 - Housing Placement & Retention - Medical/Aging
- 30306 - Housing Placement & Retention - Youth Services
- 30307 - Housing Placement & Retention - Veterans
- 30308A - Housing Placement & Retention - Gresham Homeless Services
- 30308B - Housing Placement & Retention - East County Homeless Services
- 30309 - Housing Placement & Retention - Primary Leasing
- 30311 - Housing Placement & Retention - State Rapid Rehousing Initiatives

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	Total FTE
30300A	Adults & Women Households		1,854,466	5,216,736	7,071,202	7.00
30300B	Additional Placement Assistance		0	307,500	307,500	0.00
30301	Housing Placement & Retention - Families		6,039,169	6,245,044	12,284,213	3.00
30302A	Placement out of Shelter		5,521,283	4,098,512	9,619,795	0.00
30302B	Additional Placement out of Shelter	X	7,130,912	0	7,130,912	0.00
30303	Housing Placement & Retention - Domestic Violence		2,792,195	6,566,573	9,358,768	2.50
30305	Housing Placement & Retention - Medical/Aging		0	1,485,210	1,485,210	0.00
30306	Housing Placement & Retention - Youth Services		5,220,410	2,465,998	7,686,408	1.50
30307	Housing Placement & Retention - Veterans		261,055	720,865	981,920	0.00
30308A	Gresham Homeless Services		731,712	0	731,712	0.00
30308B	East County Homeless Services	X	50,000	0	50,000	0.00
30309	Housing Placement & Retention - Primary Leasing		1,348,385	1,315,210	2,663,595	0.00
30311	State Rapid Rehousing Initiatives		0	4,930,415	4,930,415	0.00
30600	Employment Programs		0	5,399,479	5,399,479	0.00
Total Housing Placement & Retention			**30,949,587**	**38,751,542**	**69,701,129**	**14.00**

Division: Housing Placement & Retention

Program Characteristics:

Program Description

This program offer funds short-term housing placement and retention services designed to help adult-only households exit homelessness and return to permanent housing. Known as “Rapid Rehousing” (RRH) —a recognized best practice—the programs offer flexible rent assistance, dedicated support staffing, and case management. RRH as an intervention has low barriers to entry, provides flexibility in problem solving, and has low rates of return to homelessness. Services funded in this offer are specifically tailored to meet the needs of adults, including services designed for women and Black, Indigenous, and other People of Color households

This program maximizes impact by combining federal, state, and local funding in addition to local rapid rehousing programs For example, the Short Term Rent Assistance (STRA) program is administered in partnership with Home Forward to nearly 20 local nonprofits that provide eviction prevention and rapid rehousing services throughout the county.

Equity Statement

Services are delivered by skilled nonprofit partners including culturally-specific providers serving communities of color. This assistance is accessed via shelter programs, day centers, and street outreach programs, including targeted outreach in Gresham and East County. Programs emphasize strategies that reduce racial disparities.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$262,774	$779,553	$279,284	$921,508
Contractual Services	$2,862,255	$8,633,830	$1,575,182	$3,598,108
Internal Services	$0	$379,486	$0	$697,120
Total GF/non-GF	**$3,125,029**	**$9,792,869**	**$1,854,466**	**$5,216,736**
Total Expenses:	**$12,917,898**		**$7,071,202**	
Program FTE	1.50	5.00	1.50	5.50
Program Revenues				
Intergovernmental	$0	$4,722,477	$0	$2,692,542
Beginning Working Capital	$0	$5,070,392	$0	$2,524,194
Total Revenue	**$0**	**$9,792,869**	**$0**	**$5,216,736**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	285	93	305
Number of participants receiving ongoing retention support (sustained)	820	730	426

Division: Housing Placement & Retention

Program Characteristics:

Program Description

This program offer funds short-term housing placement and retention services designed to help adult-only households exit homelessness and return to permanent housing. Known as “Rapid Rehousing” (RRH) —a recognized best practice—the programs offer flexible rent assistance, dedicated support staffing, and case management. RRH as an intervention has low barriers to entry, provides flexibility in problem solving, and has low rates of return to homelessness. Services funded in this offer are specifically tailored to meet the needs of LGBTQIA2S+ adults but programs are open to all regardless of any protected class.

Equity Statement

Services are delivered by skilled nonprofit partners including culturally-specific providers serving the LGBTQIA2S+ community. This assistance will be accessed via shelter programs, day centers, and/or street outreach programs.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$0	$0	$307,500
Total GF/non-GF	**$0**	**$0**	**$0**	**$307,500**
Total Expenses:	**$0**		**$307,500**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$0	$0	$2,645
Beginning Working Capital	$0	$0	$0	$304,855
Total Revenue	**$0**	**$0**	**$0**	**$307,500**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	NA	NA	23
Number of participants receiving ongoing retention support (sustained)	NA	NA	23

Division: Housing Placement & Retention

Program Characteristics:

Program Description

This program offer funds short-term housing placement and retention services for families with children. Known as “Rapid Rehousing” (RRH) —a recognized best practice—the programs offer flexible rent assistance, dedicated support staffing, and case management. RRH as an intervention has low barriers to entry, provides flexibility in problem solving, and has low rates of return to homelessness. Families experiencing homelessness access services through a Coordinated Access system wherein families are screened for immediate safety and overall vulnerability. Because many more families are seeking housing assistance than can be provided, families are prioritized based on vulnerability, housing opportunity, and provider capacity.

The Homeless Services Department (HSD) also convenes the is a collaboration of agency leaders and direct service staff that practice 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.

This program leverages Federal and State funding including U.S. Department of Housing and Urban Development grants.

Equity Statement

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 identify as being from communities of color, agencies in the collaborative include culturally-specific providers.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$191,766	$296,060	$213,992	$313,820
Contractual Services	$5,907,040	$6,844,255	$5,825,177	$5,693,818
Internal Services	$0	$144,122	$0	$237,406
Total GF/non-GF	**$6,098,806**	**$7,284,437**	**$6,039,169**	**$6,245,044**
Total Expenses:	**$13,383,243**		**$12,284,213**	
Program FTE	1.00	2.00	1.00	2.00
Program Revenues				
Intergovernmental	$0	$4,179,207	$0	$5,747,479
Beginning Working Capital	$0	$3,105,230	$0	$497,565
Total Revenue	**$0**	**$7,284,437**	**$0**	**$6,245,044**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	408	256	385
Number of participants receiving ongoing retention support (sustained)	1,263	1,280	632

Division: Housing Placement & Retention

Program Characteristics:

Program Description

This program funds short term housing placement rental assistance and support services designed to help adults and families move from emergency shelters into permanent homes. Known as “Rapid Rehousing” (RRH) —a recognized best practice—the programs offer flexible rent assistance, dedicated support staffing, and case management. RRH as an intervention has low barriers to entry, provides flexibility in problem solving, and has low rates of return to homelessness. Staffing support is accessed either through emergency shelters, day centers, or multi-agency mobile inreach teams that engage with people in shelters that do not have their own housing placement programs.

By prioritizing these resources for people currently in shelters, we achieve two vital goals at once. First, it provides households with a stable place to live and the long-term support needed to stay there. Second, every time a family moves into a home of their own, it frees up a shelter bed for someone else who is still living unsheltered.

Equity Statement

Services funded through this program are delivered by highly skilled non-profit partners. Services funded through this program are delivered by highly skilled non-profit partners, which offer services tailored to support vulnerable people experiencing homelessness, especially communities of color, women, and families with minor children. The inreach teams include staff from culturally-specific, domestic violence, and behavioral health providers to assist adults.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$654,092	$17,301,838	$5,521,283	$4,098,512
Total GF/non-GF	**$654,092**	**$17,301,838**	**$5,521,283**	**$4,098,512**
Total Expenses:	**$17,955,930**		**$9,619,795**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$17,301,838	$0	$4,053,167
Beginning Working Capital	$0	$0	$0	$45,345
Total Revenue	**$0**	**$17,301,838**	**$0**	**$4,098,512**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	644	259	443
Number of participants receiving ongoing retention support (sustained)	684	487	776

Division: Housing Placement & Retention

Program Characteristics: One-Time-Only Request

Program Description

This program funds additional placement rental assistance and support services designed to help adults and families move from emergency shelters into permanent homes. Known as “Rapid Rehousing” (RRH) —a recognized best practice—the programs offer flexible rent assistance, dedicated support staffing, and case management. RRH as an intervention has low barriers to entry, provides flexibility in problem solving, and has low rates of return to homelessness. Staffing support is accessed either through emergency shelters, day centers, or multi-agency mobile inreach teams that engage with people in shelters that do not have their own housing placement programs.

By prioritizing these resources for people currently in shelters, we achieve two vital goals at once. First, it provides households with a stable place to live and the long-term support needed to stay there. Second, every time a family or individual moves into a home of their own, it frees up a shelter bed for someone else who is still living unsheltered.

This program includes up to $2,100,000 of funding for recovery housing placements. These placements are not reflected in the performance measures and will be reported separately.

Equity Statement

Services funded through this program are delivered by highly skilled non-profit partners, which offer services tailored to support vulnerable people experiencing homelessness, especially communities of color, women, families with minor children. The inreach teams include staff from culturally-specific, domestic violence, and behavioral health providers to assist adults.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$0	$7,130,912	$0
Total GF/non-GF	**$0**	**$0**	**$7,130,912**	**$0**
Total Expenses:	**$0**		**$7,130,912**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	N/A	N/A	465
Number of participants receiving ongoing retention support (sustained)	N/A	N/A	465

Division: Housing Placement & Retention

Program Characteristics:

Program Description

This program offer funds housing placement, eviction prevention, and support services for survivors of domestic and sexual violence (DV/SA), designed to ensure swift transition from homelessness and/or emergency shelter into safe, stable housing.

Known as “Rapid Rehousing” (RRH) —a recognized best practice—the programs offer flexible rent assistance, dedicated support staffing, and case management. RRH as an intervention has low barriers to entry, provides flexibility in problem solving, and has low rates of return to homelessness. This program offer leverages state and federal funding to support housing for survivors of domestic violence.

This housing placement and retention strategy focuses on the following program models: Shelter Diversion, Rapid Rehousing (RRH), Long-Term Rapid Rehousing, Permanent Housing, Shelter In-Reach, and Community Outreach.

Equity Statement

This program includes elements focused on serving Black, Indigenous, and other People of Color survivors. The DVHA program, for example, grants 1 FTE Housing Advocate to 4 DV/SA culturally specific agencies to increase access for Black, Latinx, Native, and Immigrant and Refugee survivors. Newer programming provides rental assistance and supportive services for longer periods of time allowing households and families to stabilize, address barriers, and meet long-term goals.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$329,928	$0	$452,300
Contractual Services	$2,653,450	$4,990,834	$2,792,195	$5,772,108
Internal Services	$0	$160,610	$0	$342,165
Total GF/non-GF	**$2,653,450**	**$5,481,372**	**$2,792,195**	**$6,566,573**
Total Expenses:	**$8,134,822**		**$9,358,768**	
Program FTE	0.00	2.00	0.00	2.50
Program Revenues				
Intergovernmental	$0	$4,161,307	$0	$5,208,658
Beginning Working Capital	$0	$1,320,065	$0	$1,357,915
Total Revenue	**$0**	**$5,481,372**	**$0**	**$6,566,573**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	456	250	300
Number of participants receiving ongoing retention support (sustained)	745	980	750

Division: Housing Placement & Retention

Program Characteristics:

Program Description

This program offer funds a range of services designed for older adults experiencing or at imminent risk of experiencing homelessness. This includes eviction prevention, rapid re-housing and long-term rental assistance to help seniors stay in their housing or exit homelessness and return to stable housing.

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 nonprofit organization that specializes in serving the senior population.

Equity Statement

People over the age of 55 make up one of the fastest growing segments of the population experiencing homelessness, and the FY 2023 Point In Time Count reflects an increase in the number of individuals 55+ years old who were experiencing homelessness.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$823,105	$0	$1,485,210
Total GF/non-GF	**$0**	**$823,105**	**$0**	**$1,485,210**
Total Expenses:	**$823,105**		**$1,485,210**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$77,465	$0	$1,485,210
Beginning Working Capital	$0	$745,640	$0	$0
Total Revenue	**$0**	**$823,105**	**$0**	**$1,485,210**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	115	23	50
Number of participants receiving ongoing retention support (sustained)	59	77	126

Division: Housing Placement & Retention

Program Characteristics:

Program Description

The Homeless Youth Continuum (HYC) is a collaborative network of nonprofits, including culturally specific providers, dedicated to helping youth up to age 25. By offering both on-site and mobile support, the team provides culturally responsive care tailored to the developmental needs of youth throughout the county. This program offer leverages federal long-term rent assistance vouchers to help young people find, move into, and keep their own housing.

This program offer funds:
Case Management: providing linkages to education, employment, health, behavioral health and substance use disorder treatment, housing services, on-going housing stability and support for pregnant and parenting youth.

Behavioral Health and Substance Use Disorder Services: provided by 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.

Developmentally Appropriate Housing: a range of options including onsite transitional housing with 24-hour staffing, scattered-site housing, rapid rehousing, and shared housing. Housing navigators assist youth to access housing options and provide retention support.

Equity Statement

To reduce racial disparities in the experience of homelessness, one goal of this program is to increase services access for Black, Indigenous, and other People of Color (BIPOC) communities through targeted outreach. This program is open to all eligible youth in Multnomah County regardless of protected class. Strategies for advancing equity include soliciting feedback from youth about program design and how programs can meet their identity needs.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$342,142	$0	$271,581
Contractual Services	$4,219,505	$2,982,318	$5,220,410	$1,988,967
Internal Services	$0	$166,555	$0	$205,450
Total GF/non-GF	**$4,219,505**	**$3,491,015**	**$5,220,410**	**$2,465,998**
Total Expenses:	**$7,710,520**		**$7,686,408**	
Program FTE	0.00	2.00	0.00	1.50
Program Revenues				
Intergovernmental	$0	$3,010,218	$0	$2,117,263
Beginning Working Capital	$0	$480,797	$0	$348,735
Total Revenue	**$0**	**$3,491,015**	**$0**	**$2,465,998**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	66	112	144
Number of participants receiving ongoing retention support (sustained)	236	210	216

Division: Housing Placement & Retention

Program Characteristics:

Program Description

Many veterans experiencing or at risk of homelessness face significant barriers to finding a stable home. These barriers can include lack of funds for security deposits, utilities, past property debts, legal fees, and moving costs. While federal programs like Veterans Affairs Supportive Housing (VASH) and Supportive Services for Veteran Families (SSVF) provide essential aid, their funding is often too restrictive to cover some of these costs.

This program fills those critical gaps by providing flexible financial assistance and culturally specific support. By funding local nonprofit partners, we enable veterans to overcome the financial obstacles that federal programs cannot address.

Equity Statement

Veterans will benefit from the proposal. Data shows that white veterans may be housed (and retain housing) at rates higher than their Black, Indigenous, and other Peer of Color. One goal of this program is to increase applications for housing assistance by Black, Indigenous, and other People of Color veterans through targeted outreach. This program is open to all eligible veterans of Multnomah County regardless of protected class.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$565,785	$391,649	$261,055	$720,865
Total GF/non-GF	**$565,785**	**$391,649**	**$261,055**	**$720,865**
Total Expenses:	**$957,434**		**$981,920**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$304,609	$0	$400,145
Beginning Working Capital	$0	$87,040	$0	$320,720
Total Revenue	**$0**	**$391,649**	**$0**	**$720,865**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	2	2	3
Number of participants receiving ongoing retention support (sustained)	59	23	53

Division: Housing Placement & Retention

Program Characteristics:

Program Description

This program supports existing capacity in housing placement and retention programs focused in the City of Gresham. 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 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 Gresham.

Equity Statement

Flexible rent and client assistance, paired with case management services, allow people experiencing homelessness to be served according to their varied needs. Services in this offer are delivered by the City of Gresham Homeless Services team, and this funding supports equity of service access across the region. HSD will monitor the demographics of people served and housed in Gresham for alignment with HSD equitable service delivery goals.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$188,491	$731,712	$0
Total GF/non-GF	**$0**	**$188,491**	**$731,712**	**$0**
Total Expenses:	**$188,491**		**$731,712**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Beginning Working Capital	$0	$188,491	$0	$0
Total Revenue	**$0**	**$188,491**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	N/A	12	56
Number of participants receiving ongoing retention support (sustained)	N/A	12	56

Division: Housing Placement & Retention

Program Characteristics: One-Time-Only Request

Program Description

This program supports 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.

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 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.

Equity Statement

Flexible rent and client assistance, paired with case management services, allow people experiencing homelessness to be served according to their varied needs. Services in this offer are delivered by skilled non-profit providers including culturally-specific providers serving communities of color. This assistance is accessed via shelter programs, day centers, and street outreach programs. Programs emphasize strategies that improve access and ensure services that meet the needs of

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$124,000	$50,000	$0
Total GF/non-GF	**$0**	**$124,000**	**$50,000**	**$0**
Total Expenses:	**$124,000**		**$50,000**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$124,000	$0	$0
Total Revenue	**$0**	**$124,000**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	N/A	8	4
Number of participants receiving ongoing retention support (sustained)	N/A	8	4

Division: Housing Placement & Retention

Program Characteristics:

Program Description

This program offer funds “primary leasing” to increase access to private market units for households facing significant housing barriers, even those with rental assistance. In this model, service providers lease units directly from the private market and sublease them to participants, an efficient strategy that helps people secure housing even when landlords are hesitant to rent to those with complex backgrounds. By utilizing both scattered-site and project-based agency leasing—as well as shared housing models for youth and individuals in recovery—this supportive housing strategy bypasses the hurdles that often prevent people from finding housing independently. This work aligns with the strategic priorities of the Homelessness Response Action Plan (HRAP) and the Multnomah County Supportive Housing Services (SHS) Local Implementation Plan (LIP).

Equity Statement

Primary leasing is a proven strategy to quickly house people who face significant housing barriers such as a poor rental history or criminal record. This program offer includes funding for Black/African American and Latinx culturally-specific primary leasing services as well as primary leasing services designed for youth under the age of 25.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$1,305,310	$1,273,195	$1,348,385	$1,315,210
Total GF/non-GF	**$1,305,310**	**$1,273,195**	**$1,348,385**	**$1,315,210**
Total Expenses:	**$2,578,505**		**$2,663,595**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$0	$0	$1,315,210
Beginning Working Capital	$0	$1,273,195	$0	$0
Total Revenue	**$0**	**$1,273,195**	**$0**	**$1,315,210**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	38	10	15
Number of participants receiving ongoing retention support (sustained)	29	57	80

Division: Housing Placement & Retention

Program Characteristics:

Program Description

The Oregon Governor's statewide emergency declaration and new investments in shelter, rehousing, and homelessness prevention programs started in Jan 2023. The Homeless Services Department (HSD) and the State mutually recognize that there is a gap in long-term rental assistance to ensure housing stability for those rehoused through these initial efforts, as well as a need to house additional households. This program will reduce homelessness by providing additional rehousing opportunities for youth and families, and by offering long-term rental assistance to households already rehoused through these programs.

In FY 2027, this program will consist of Long Term Rental Assistance (LTRA): This activity will provide rental subsidies for households that were rehoused as part of the initial executive order, alongside an additional priority population of individuals who require ongoing support to maintain their housing.

Equity Statement

Eligible households from LTRA were/are previously living on the streets, within shelter, doubled up, or in other places not meant for human habitation. Many are also at risk due to increased local federal presence and scrutiny in our community. This program includes culturally specific services, as there is an overrepresentation of Black, Indigenous, and other People of Color families within our system.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$6,740,576	$0	$4,930,415
Total GF/non-GF	**$0**	**$6,740,576**	**$0**	**$4,930,415**
Total Expenses:	**$6,740,576**		**$4,930,415**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$6,740,576	$0	$4,930,415
Total Revenue	**$0**	**$6,740,576**	**$0**	**$4,930,415**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	222	208	180
Number of participants receiving ongoing retention support (sustained)	277	417	591

Division: Housing Placement & Retention

Program Characteristics: One-Time-Only Request

Program Description

People facing housing instability often struggle to find work, yet long-term stability requires both a home and an income. This program offer addresses these challenges together by funding programs that combine housing assistance with culturally specific and low barrier job training.

These programs create entry-level job opportunities that help people earn an income, build skills, and establish a work history. To ensure these workers stay housed, the program also provides rent assistance and eviction prevention. Managed by nonprofit partners, this integrated approach provides a clear pathway from housing instability to long-term economic security. These services include culturally specific services available for Communities of Color who face the highest barriers to both housing and employment.

Equity Statement

The program aims to stabilize housing and improve economic opportunities for families, youth, and adults, including Communities of Color experiencing or at risk of homelessness.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$1,090,344	$4,563,460	$0	$5,399,479
Total GF/non-GF	**$1,090,344**	**$4,563,460**	**$0**	**$5,399,479**
Total Expenses:	**$5,653,804**		**$5,399,479**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$1,830,190	$0	$1,493,830
Beginning Working Capital	$0	$0	$0	$662,725
Total Revenue	**$0**	**$1,830,190**	**$0**	**$2,156,555**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of individuals receiving employment services and supports	1,630	1,480	1,149
Number of employment placements	247	563	206

Supportive Housing

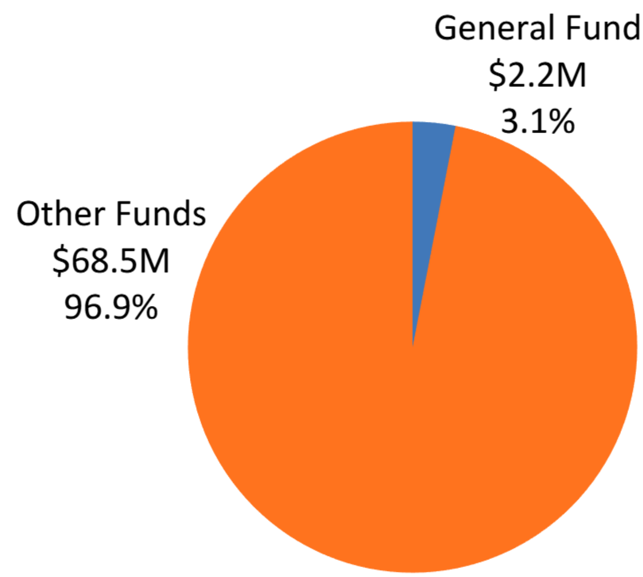
$70.7 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

10.00 FTE

(full time equivalent)



The Supportive Housing division funds and manages programs for individuals with disabilities who are experiencing long-term homelessness and have extremely low incomes.

Key Functions

The division provides stable, service-enriched housing options designed to help participants achieve long-term housing stability and improve their overall health and well-being. Outside influences heavily impact housing access and stability, including rising rent costs, inflation, eviction policies, and sudden changes in household income or health crises. To counter these external pressures, our programming does not end at the point of placement. Instead, the division oversees three primary housing models tailored to participant needs:

- **Permanent Supportive Housing:** This is deeply affordable, long-term housing paired with intensive, voluntary, and individualized "wrap-around" support services—including physical and behavioral health care, addiction services, and help with benefits and income—provided in dedicated buildings or individual apartments across the community for people with chronic health conditions or mental illness.
- **Supportive Housing:** This model combines long-term rent assistance with support services that are generally less intensive or provided for a shorter duration than those in Permanent Supportive Housing, depending on the specific needs of the residents.
- **Recovery-Oriented Transitional Housing:** These sites offer temporary housing and support for 24 months or less. It is designed for individuals with a substance use disorder who are seeking a

recovery-focused environment and the professional support needed to move into permanent housing.

These are highly proven, evidence-based practices that provide the necessary safety net to help residents remain housed and navigate economic volatility over the long term. In FY 2027, the Supportive Housing division is set to provide long-term housing stability for **2,906** individuals through funding for Permanent Supportive Units and Long Term Rent Assistance. The division's funding includes 1,952 permanent supportive housing units and 296 Long Term Rent Assistance units.

Significant Division Changes

The FY 2027 HSD budget prioritized maintaining Permanent Supportive Housing (PSH) funding, successfully protecting all existing units. This approach aligns with HSD's primary goal of keeping people housed.

Although the rollout of new Supportive Housing units will proceed at a slower pace than initially planned in order to reduce costs, the budget fully maintains all currently funded PSH units. Since the start of the Metro Supportive Housing Services (SHS) measure, HSD has funded a total of 1,952 new PSH units. This achievement represents 87% of the 10-year goal outlined in the 2021 SHS Local Implementation Plan.

A key structural change is the **Housing Rapid Response-Service Coordination Team Behavioral Health Program** moving to the City of Portland. This transition shifts the program's budget and oversight away from HSD, though it does not constitute a program reduction. The program delivers essential services—including outreach, transitional housing with intensive support, case management, home-based retention, and direct addiction treatment access—to chronic arrestees with chemical dependency issues. This program has been historically funded by the City of Portland General Fund. The budget assumes both the oversight and funding will return to the City of Portland.

The budget also reflects specific reductions within other Health Department areas:

- **Health Department - Shelter, Housing, and Supports (40112):** This results in the closure of one of the Health Department's behavioral-health-focused shelter programs, eliminating 40 shelter units. This is a $1.4 million reduction and this program includes an increase of 1.00 FTE.
- **Health Department - Behavior Health Crisis Services (40069):** The Crisis System Shelter Outreach Team will be reduced in size but will continue to operate. HSD plans to collaborate with the Health Department to determine the most effective way for the smaller team to support the reduced number of shelter units. This is a $0.5 million and 1.00 FTE reduction.

Finally, the division will experience a reduction of 1.00 FTE Program Specialist for FY 2027.

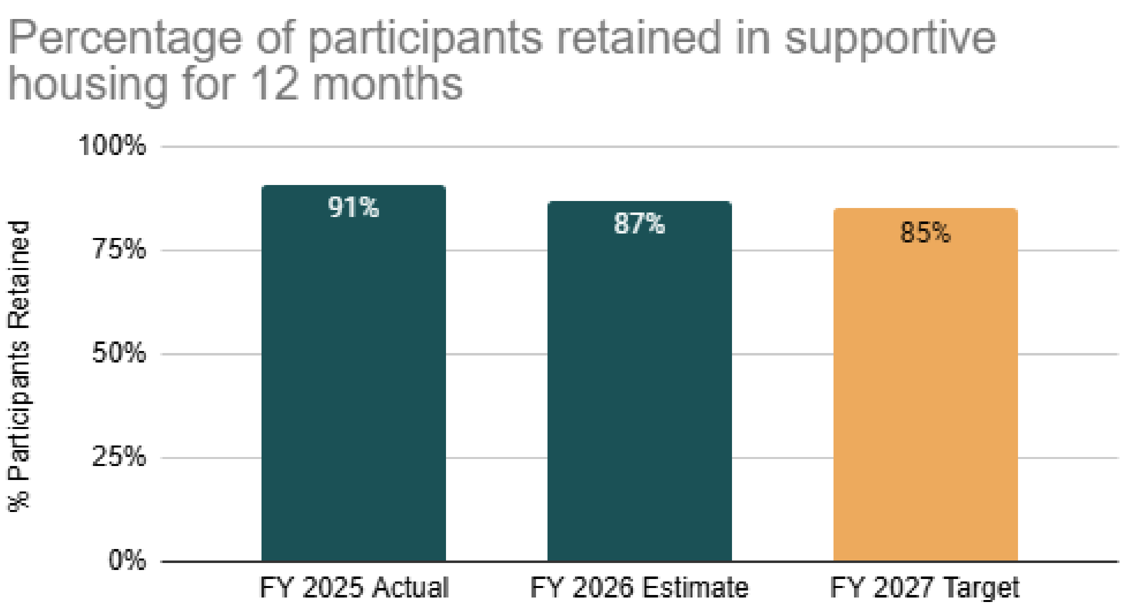
Supportive Housing Outcomes

1. Increase percentage of participants retained in housing.

This outcome focuses on the long-term stability of individuals and families who are our most vulnerable residents, specifically those who have transitioned into permanent housing. By focusing on both the consistent delivery of support and the durability of housing placements at **12-month and 24-month intervals**, our system ensures that a transition into a home is a permanent solution rather than a temporary fix.

Key Performance Indicator (KPI) 1.1: Percentage of participants retained in permanent housing for 12 months

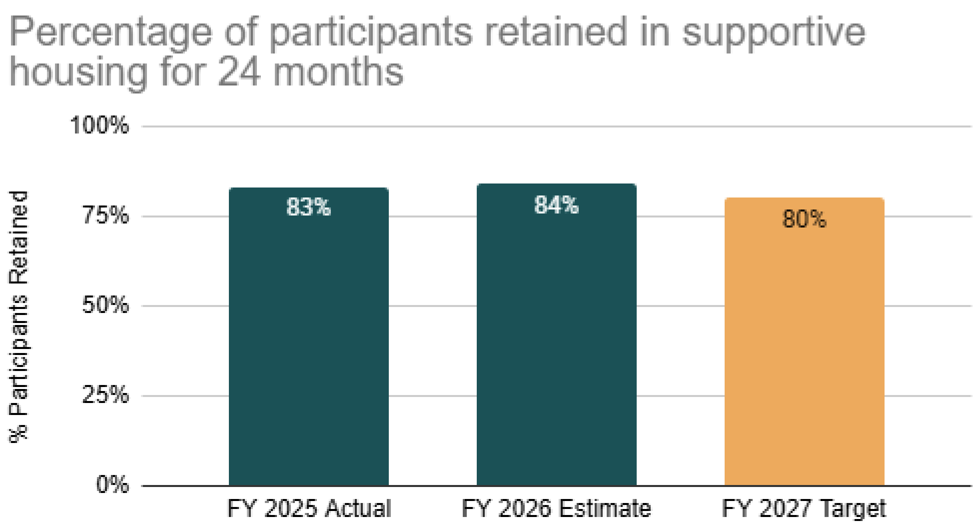
KPI 1.1 Description: This indicator measures the 12-month success of individuals and families who have a history of chronic homelessness or complex behavioral health needs. Maintaining housing and achieving long-term stability requires consistent retention support, which includes a comprehensive range of wraparound services. This is the percentage of participants who maintained permanent housing 12 months after their Housing Move-In Date (HMID).



FY 2026 Estimate: 87%	**FY 2027 Target:** 85%

Key Performance Indicator (KPI) 1.2: Percentage of participants retained in permanent housing for 24 months

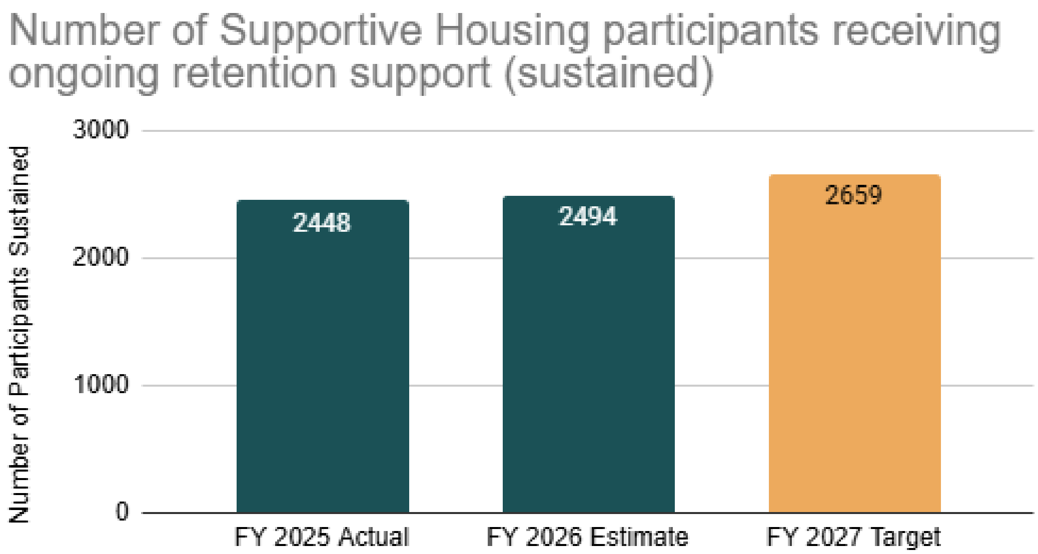
KPI 1.2 Description: This indicator measures the 24-month success of individuals and families who have a history of chronic homelessness or complex behavioral health needs. Maintaining housing and achieving long-term stability requires consistent retention support, which includes a comprehensive range of wraparound services. This is the percentage of participants who maintained permanent housing 24 months after their Housing Move-In Date (HMID).



FY 2026 Estimate: 84%	**FY 2027 Target:** 80%

Key Performance Indicator (KPI) 1.3: Number of participants receiving ongoing retention support (sustained)

KPI 1.3 Description: This metric tracks the number of individuals who are receiving continuous, sustained support services to help them maintain their housing stability after initial placement.



FY 2026 Estimate: 2,494 participants	**FY 2027 Target:** 2,659 participants

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Outcome 1 Program Offers

The following program offers contribute to Outcome 1. Division-specific administrative program offers are not included, as they support all outcome statements:

- 30400A - Supportive Housing
- 30400C - Supportive Housing - Local Bond Units and Site-Based Commitments
- 30400D - Supportive Housing - Tenant-Based Commitments
- 30401 - Supportive Housing - Behavioral Health/Medical Housing
- 30402 - Supportive Housing - Local Long Term Rental Vouchers
- 30403 - Supportive Housing - Families
- 30404 - Supportive Housing - Youth
- 30405 - Supportive Housing - Domestic Violence
- 30406 - Supportive Housing - Frequent Users Systems Engagement
- 30400E - Supportive Housing - System Support

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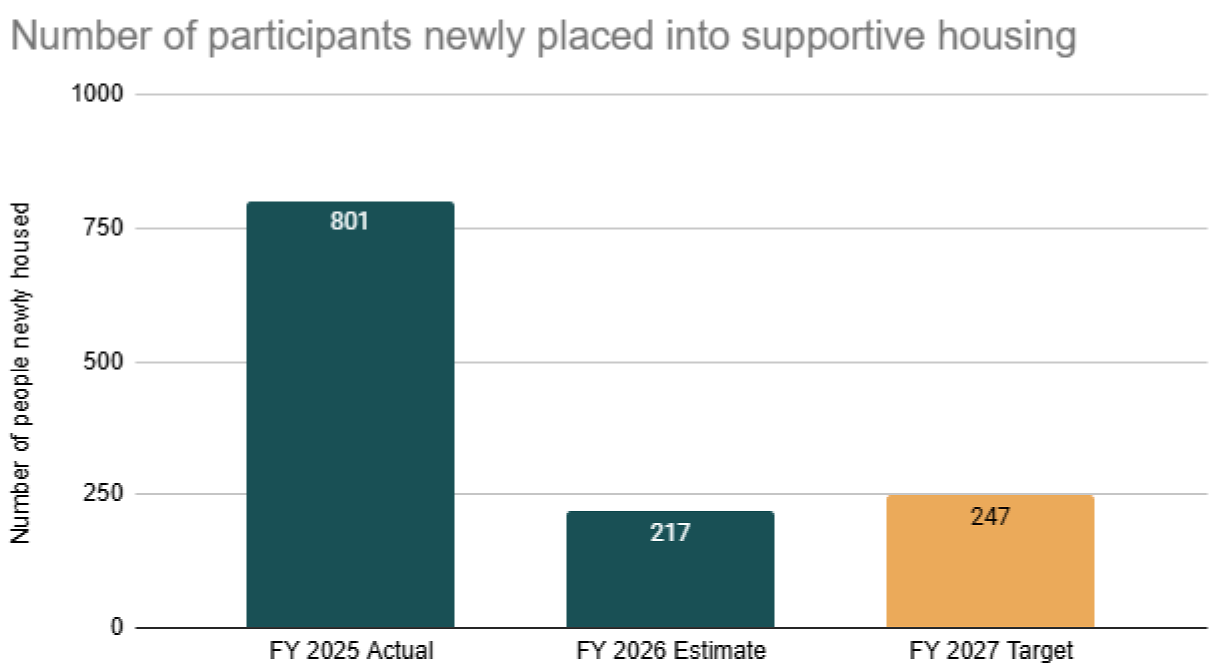
2. Reduction of Homelessness

This outcome focuses on reducing homelessness by creating and maintaining accessible pathways to stable, permanent housing for our community's most vulnerable residents. By focusing on the expansion of both physical housing capacity and direct financial assistance, our system ensures that individuals have the necessary resources to move from homelessness into a permanent home.

We track our progress by monitoring the **number of new participants placed** into supportive housing, alongside the growth of our **Permanent Supportive Housing unit inventory** and the availability of **long-term rent assistance**.

Our work provides a critical safety net that allows residents to navigate economic volatility. By investing in these proven, evidence-based housing models, we ensure that our housing-led strategy results in a measurable decrease in homelessness and a foundation for long-term community stability.

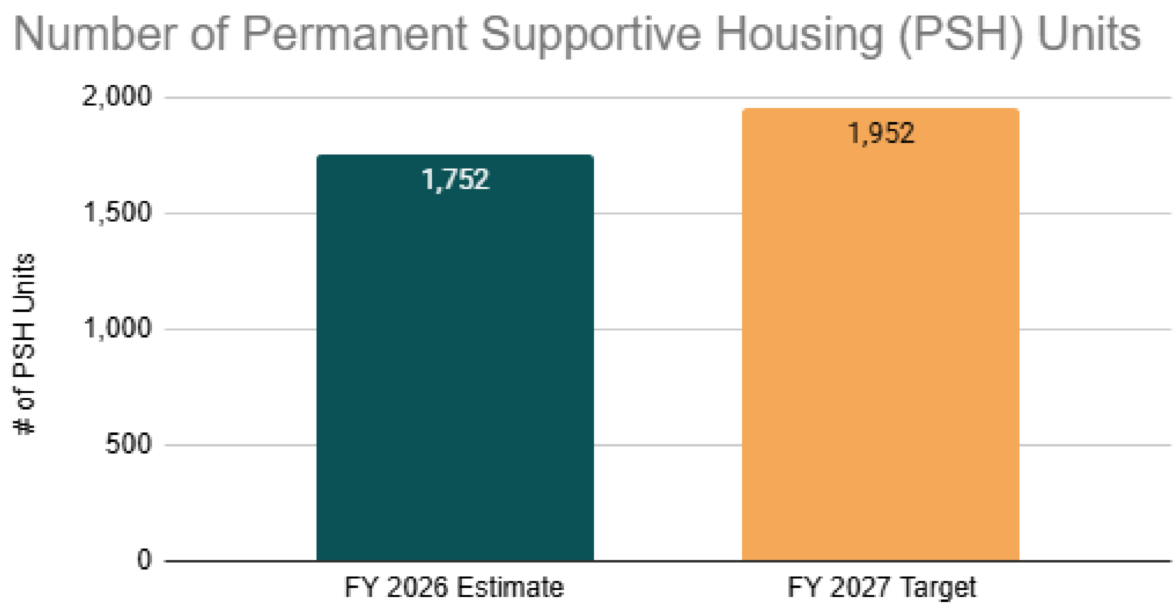
Key Performance Indicator (KPI) 2.1: Number of participants newly placed into supportive housing



FY 2026 Estimate: 217 participants newly placed in housing	**FY 2027 Target:** 247 participants newly placed in housing

Key Performance Indicator (KPI) 2.2: Number of Permanent Supportive Housing (PSH) units

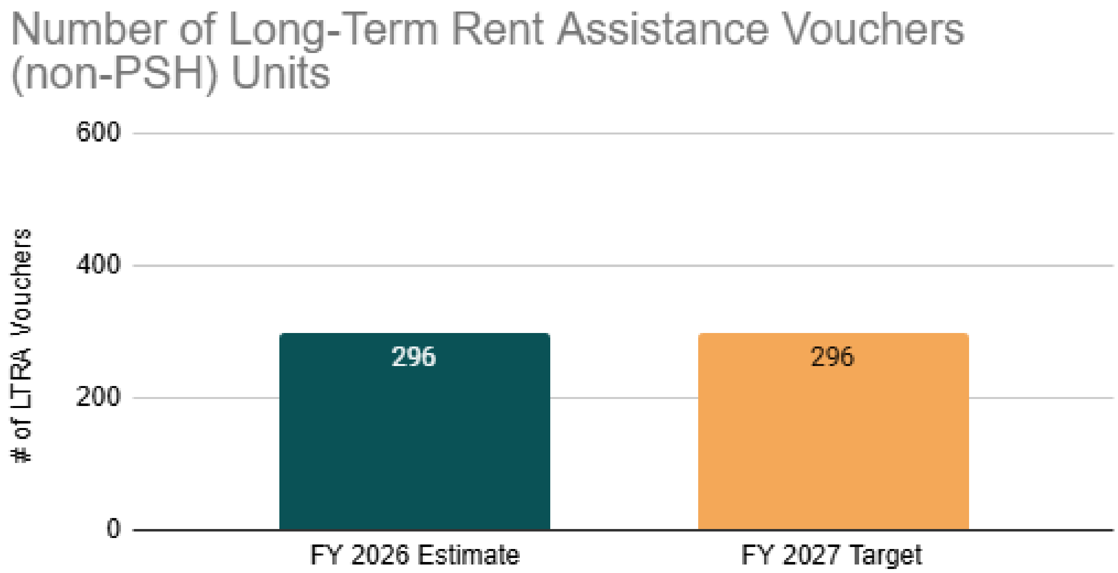
KPI 2.2 Description: This measure inventories resources that address homelessness, specifically focusing on Permanent Supportive Housing (PSH) units.



FY 2026 Estimate: 1,752 units	**FY 2027 Target:** 1,952 units

Key Performance Indicator (KPI) 2.3: Number of Long Term Rent Assistance Vouchers (non-PSH)

KPI 2.3 Description: This measure inventories resources that address homelessness, specifically focusing on Long-Term Rent Assistance (LTRA) vouchers not categorized as Permanent Supportive Housing.



FY 2026 Estimate: 296 units	**FY 2027 Target:** 296 units

Outcome 2 Program Offers

The following program offers contribute to Outcome 2. Division-specific administrative program offers are not included, as they support all outcome statements:

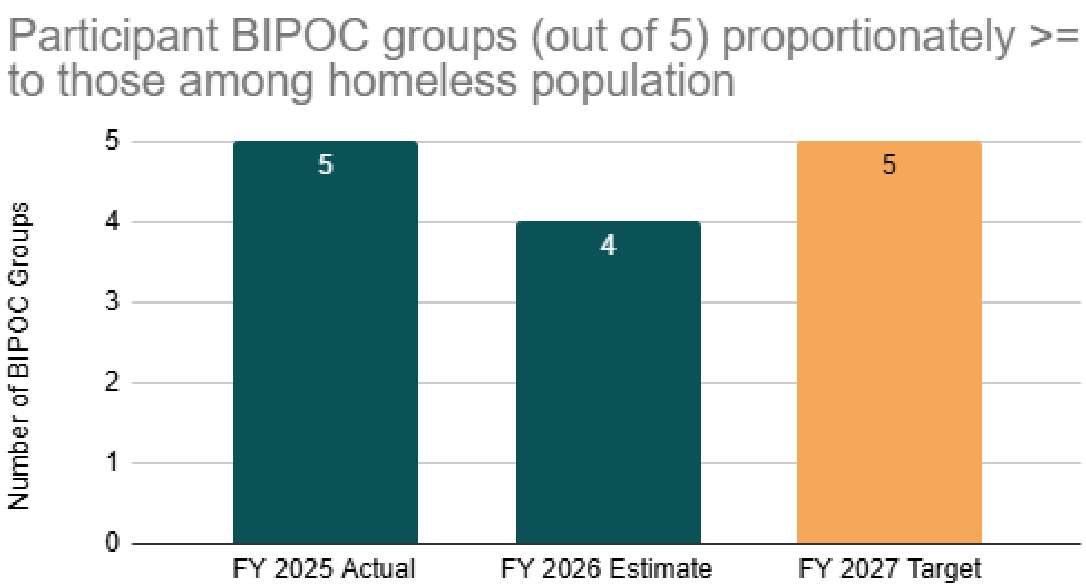
- 30400A - Supportive Housing
- 30400C - Supportive Housing - Local Bond Units and Site-Based Commitments
- 30400D - Supportive Housing - Tenant-Based Commitments
- 30401A - Supportive Housing - Behavioral Health/Medical Housing
- 30402 - Supportive Housing - Local Long Term Rental Vouchers
- 30403 - Supportive Housing - Families
- 30404 - Supportive Housing - Youth
- 30405 - Supportive Housing - Domestic Violence
- 30406 - Supportive Housing - Frequent Users Systems Engagement
- 30400E - Supportive Housing - System Support

3. All participant BIPOC groups will receive services proportionately greater or equal to those among the homeless services population.

This outcome ensures that the allocation of Supportive Housing resources equitably serves Black, Indigenous, and People of Color (BIPOC) populations, mirroring or exceeding their representation within the homeless community. BIPOC communities are often overrepresented in homeless populations due to compounding systemic inequities. Potential outside influences include biases in standardized vulnerability assessment tools and a lack of culturally specific supportive services. Utilizing culturally responsive assessment methods, providing translated materials, and directly funding culturally specific organizations are critical evidence-based practices to meet this equity goal.

Key Performance Indicator (KPI) 3.1: Participant BIPOC groups (out of 5) proportionately >= to those among homeless services population

KPI 3.1 Description: Measures the rate at which the five key BIPOC participant groups—Asian/Asian American, American Indian/Alaska Native, Black/African-American, Hispanic/Latina/e/o, and Native Hawaiian/Pacific Islander—access systemic supports, coordinated entry systems, and navigation services. The KPI is met when the access rate for these groups is proportionately equal to or greater than their representation among the All Systems By Name List.



FY 2026 Estimate: 4 out of 5	**FY 2027 Target:** 5 out of 5

Outcome 3 Program Offers

The following program offers contribute to Outcome 3. Division-specific administrative program offers are not included, as they support all outcome statements:

- 30400A - Supportive Housing
- 30400C - Supportive Housing - Local Bond Units and Site-Based Commitments
- 30400D - Supportive Housing - Tenant-Based Commitments
- 30401A - Supportive Housing - Behavioral Health/Medical Housing
- 30402 - Supportive Housing - Local Long Term Rental Vouchers
- 30403 - Supportive Housing - Families
- 30404 - Supportive Housing - Youth
- 30405 - Supportive Housing - Domestic Violence
- 30406 - Supportive Housing - Frequent Users Systems Engagement
- 30400E - Supportive Housing - System Support

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	Total FTE
30400A	Supportive Housing		381,360	15,681,666	16,063,026	9.00
30400C	Local Bond Units and Site-Based Commitments		0	18,419,900	18,419,900	0.00
30400D	Tenant-Based Commitments		0	17,812,010	17,812,010	0.00
30400E	System Support		0	2,300,235	2,300,235	0.00
30401	Behavioral Health/Medical Housing		0	2,740,570	2,740,570	0.00
30402	Local Long Term Rental Vouchers		405,075	4,206,485	4,611,560	0.00
30403	Supportive Housing - Families		841,390	3,112,480	3,953,870	1.00
30404	Supportive Housing - Youth		0	1,648,260	1,648,260	0.00
30405	Supportive Housing - Domestic Violence		0	1,607,275	1,607,275	0.00
30406	Frequent Users Systems Engagement		542,360	989,010	1,531,370	0.00
30999	Supportive Housing Services Revenue for Other Departments		0	0	0	0.00
Total Supportive Housing			**2,170,185**	**68,517,891**	**70,688,076**	**10.00**

Division: Supportive Housing

Program Characteristics:

Program Description

This program offer funds tenant-based and site-based supportive housing for individuals with significant disabilities experiencing long-term or cyclical homelessness. It also funds transitional supportive housing for those in early recovery from a substance use disorder who are at high risk of chronic homelessness.

The site-based supportive housing included in this offer has been funded in partnership with the Portland Housing Bureau (PHB) and Home Forward. PHB has helped fund the development of affordable housing that operates as supportive housing and Home Forward provides ongoing, federally funded rent assistance.

This offer also supports the 'Move On' program, enabling individuals to transition into more independent housing while keeping their rental assistance. This creates vital capacity within intensive supportive housing programs for individuals requiring higher levels of care.

Equity Statement

The offer funds a range of supportive housing models to support people who have struggled to access support through traditional systems of care. The services provided include culturally-specific supportive services for Native American and Black/African American populations; as well as supportive services designed to meet the needs of transgender and non-binary adults, Veterans, and people in the early stages of recovery.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$1,700,567	$0	$1,639,622
Contractual Services	$657,140	$12,636,953	$381,360	$12,801,670
Internal Services	$0	$827,835	$0	$1,240,374
Total GF/non-GF	**$657,140**	**$15,165,355**	**$381,360**	**$15,681,666**
Total Expenses:	**$15,822,495**		**$16,063,026**	
Program FTE	0.00	10.00	0.00	9.00
Program Revenues				
Intergovernmental	$0	$14,789,165	$0	$15,681,666
Beginning Working Capital	$0	$376,190	$0	$0
Total Revenue	**$0**	**$15,165,355**	**$0**	**$15,681,666**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	95	19	25
Number of participants receiving ongoing retention support (sustained)	963	836	840

Division: Supportive Housing

Program Characteristics:

Program Description

The program offer supports site-based supportive housing units and associated services for individuals with significant disabilities experiencing long-term or cyclical homelessness, with a focus on equity. In site-based supportive housing, the supportive services and rental assistance are connected to a particular building or complex. The units within that building are designated for supportive housing.

The units funded in this offer expand housing access for vulnerable households, sustains participant well-being through essential supportive services. Programs are designed to dismantle racial inequities within the system. This program offer leverages various funding sources, including the Portland Housing Bond, Metro Housing Bond, and State of Oregon funding, to create project-based supportive housing providing rental subsidies and on-site specialized wrap-around supportive services tailored to various subpopulations.

Equity Statement

This offer funds a range of supportive housing models including culturally-specific supportive services for Native American, Black/African American, Latinx, Somali, and immigrant and Refugee populations; and supportive services designed to meet the needs of older adults, Veterans, justice involved individuals, families with children, and adults unaccompanied by children.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$14,790,640	$0	$18,419,900
Total GF/non-GF	**$0**	**$14,790,640**	**$0**	**$18,419,900**
Total Expenses:	**$14,790,640**		**$18,419,900**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$14,790,640	$0	$18,419,900
Total Revenue	**$0**	**$14,790,640**	**$0**	**$18,419,900**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	382	140	125
Number of participants receiving ongoing retention support (sustained)	562	707	800

Division: Supportive Housing

Program Characteristics:

Program Description

The program offer supports tenant-based supportive housing units and associated services for individuals with significant disabilities experiencing long-term or cyclical homelessness, with a focus on equity. With tenant-based supportive housing, the rental assistance is provided to the individual or family, not tied to a specific unit. This allows participants to search for housing in the private market, and then access supportive services in that unit.

The units funded in this offer expand housing access for vulnerable households and sustain participant well-being through essential supportive services. Programs are designed to dismantle racial inequities within the system. The offer funds a range of supportive housing models including culturally-specific supportive services for Native American, Black/African American, Latin/x, Somali and immigrant and refugee populations; and supportive services designed to meet the needs of people with significant behavioral health challenges, older adults, transgender and nonbinary individuals, families with children, and adults unaccompanied by children.

Equity Statement

This program offer works to reduce racial disparities in homelessness by funding a range of supportive housing models including culturally-specific supportive services, supportive services designed to meet the needs of people with significant behavioral health challenges, older adults, transgender and nonbinary individuals, families with children, and adults unaccompanied by children. These programs are open to all eligible participants regardless of protected class.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$14,866,965	$0	$17,812,010
Total GF/non-GF	**$0**	**$14,866,965**	**$0**	**$17,812,010**
Total Expenses:	**$14,866,965**		**$17,812,010**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$14,866,965	$0	$17,812,010
Total Revenue	**$0**	**$14,866,965**	**$0**	**$17,812,010**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	69	26	50
Number of participants receiving ongoing retention support (sustained)	393	408	400

Division: Supportive Housing

Program Characteristics:

Program Description

This program offer funds critical infrastructure needed to support the expansion of supportive housing as well as 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 Multnomah, Washington, and Clackamas counties in partnership with 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) Housing Choice Voucher (HCV), also known as 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 advance equity by removing barriers and serving people who are often screened out of HUD's Housing Choice Voucher program.

Equity Statement

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 intentionally designed to advance equity by removing barriers and serving people who are often screened out of HUD's HCV program. The RLRA program requires very minimal documentation and screening, and does not include screening related to rental history, criminal record, or citizenship or immigration status.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$2,175,425	$0	$2,300,235
Total GF/non-GF	**$0**	**$2,175,425**	**$0**	**$2,300,235**
Total Expenses:	**$2,175,425**		**$2,300,235**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$2,175,425	$0	$2,300,235
Total Revenue	**$0**	**$2,175,425**	**$0**	**$2,300,235**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of households receiving long-term rent assistance	1,111	1,200	1,300

Division: Supportive Housing

Program Characteristics:

Program Description

The program offer expands access to both tenant-based and site-based permanent supportive housing (PSH) through programs that specifically address the needs of individuals with complex, co-occurring diagnoses, including substance use disorders, mental illness, and chronic medical or physical disabilities.

The expected outcomes include:

Increased housing stability for chronically homeless adults.
Reduced reliance on emergency services and costly interventions associated with homelessness.
Improved health and well-being for participants through access to integrated support services.
Diversion of individuals with behavioral health conditions from the criminal justice system.

Funding in this program offer leverages other Federal, State, and local resources, including U.S. Department of Housing and Urban Development (HUD) Continuum of Care (CoC) programs, Medicaid, affordable housing units, and permanent rental subsidies. This includes providing match funding for HUD CoC grants.

Equity Statement

This program offer funds tenant-based and site-based supportive housing for individuals with significant disabilities experiencing long-term or cyclical homelessness. A goal of the offer is to reduce racial disparities in homelessness by funding low barrier supportive housing that is intentionally designed to support people with complex co-occurring diagnoses including substance use disorder, mental illness, cognitive and/or physical disabilities, and/or chronic medical conditions.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$4,373,750	$0	$2,740,570
Total GF/non-GF	**$0**	**$4,373,750**	**$0**	**$2,740,570**
Total Expenses:	**$4,373,750**		**$2,740,570**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$4,373,750	$0	$2,740,570
Total Revenue	**$0**	**$4,373,750**	**$0**	**$2,740,570**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	15	1	1
Number of participants receiving ongoing retention support (sustained)	39	44	44

Division: Supportive Housing

Program Characteristics:

Program Description

This program assists seniors and people living with disabilities on fixed incomes or at risk of homelessness due to being rent burdened (rent greater than 30% of household income), and low income families with children experiencing or at imminent risk of becoming homeless. Many households supported by this program live 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, provides similar long-term housing stability to a highly vulnerable population, and provides the framework for the Metro Supportive Housing Services (SHS)-funded Regional Long-term Rent Assistance (RLRA) Program.

Equity Statement

This program offer funds long-term rent assistance for seniors, people living with disabilities who are on fixed incomes, and low income families with children experiencing or at imminent risk of becoming homeless. A goal of the offer is to reduce racial disparities in homelessness.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$383,480	$836,275	$405,075	$4,206,485
Total GF/non-GF	**$383,480**	**$836,275**	**$405,075**	**$4,206,485**
Total Expenses:	**$1,219,755**		**$4,611,560**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$836,275	$0	$4,206,485
Total Revenue	**$0**	**$836,275**	**$0**	**$4,206,485**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	N/A	N/A	10
Number of participants receiving ongoing retention support (sustained)	N/A	N/A	150

Division: Supportive Housing

Program Characteristics:

Program Description

The program offer supports supportive housing and associated services for families facing chronic or recurring homelessness due to significant disabling conditions. Because these households require more intensive support than rapid rehousing can provide, the program offers permanent supportive housing (PSH) to ensure long-term stability. To address the disproportionate impact of homelessness on Black, Indigenous, and other families of Color, this initiative includes culturally specific services.

Leveraging other resources, this program combines funds with other state and federal resources, including HUD-funded rental vouchers, to maximize impact. The program funds several key activities:

Permanent Supportive Housing (PSH): Provides both site-based and tenant-based PSH options for families with children, including rental assistance and supportive services.
Culturally Specific Services: Integrates culturally specific services into many PSH units to better meet the needs of these families.
Enhanced Rapid Rehousing: Offers a more robust rapid rehousing program for long-term shelter families. This includes up to 24 months of rental assistance and wraparound services, designed to transition families to permanent housing and free up shelter capacity.

Equity Statement

The program aims to increase housing stability for families with children experiencing chronic homelessness, including Black and Indigenous families and other Families of Color. Eligible families have a head of household with a significant disabling condition.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$147,726	$0	$156,576
Contractual Services	$814,510	$2,330,155	$841,390	$2,837,455
Internal Services	$0	$71,913	$0	$118,449
Total GF/non-GF	**$814,510**	**$2,549,794**	**$841,390**	**$3,112,480**
Total Expenses:	**$3,364,304**		**$3,953,870**	
Program FTE	0.00	1.00	0.00	1.00
Program Revenues				
Intergovernmental	$0	$2,549,794	$0	$3,112,480
Total Revenue	**$0**	**$2,549,794**	**$0**	**$3,112,480**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	81	7	9
Number of participants receiving ongoing retention support (sustained)	148	242	168

Division: Supportive Housing

Program Characteristics:

Program Description

The program offer supports supportive housing units and associated services for youth experiencing or at risk of chronic homelessness, with a focus on racial equity. The program funds several key activities including:

Tenant-Based Permanent Supportive Housing (PSH): Provides opportunities for homeless youth with extremely low incomes, serious disabling conditions, and experiencing or at risk of long-term homelessness. This includes rental assistance through the Regional Long-term Rent Assistance (RLRA) program, administered by Home Forward. RLRA is designed to be low-barrier and serves youth who are often screened out of the U.S. Department of Housing and Urban Development (HUD)'s Section 8 program.

Wrap-Around Services: Offers wrap-around supportive services provided by a youth service organization to complement the rental assistance.

Culturally Specific Services: Additional programming, leveraging federal funding, will support chronically homeless youth with long-term rental assistance and wrap-around, culturally specific supportive services.

Expected outcomes include increased access to tenant-based PSH for youth with disabilities, improved long-term housing stability for youth experiencing or at risk of chronic homelessness, and reduced disparities in homelessness homelessness among Black and Indigenous youth and other Youth of Color.

Equity Statement

This program addresses the complex housing needs of youth experiencing, or are at risk of, chronic homelessness. Due to significant disabilities, including chronic health conditions, mental illness, and substance use disorder, some youth require more intensive support than housing alone. There is a disproportionate impact of homelessness on Black, Indigenous, and other Youth of Color, so this program expands their access to these resources and includes culturally specific services. This

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$1,693,215	$1,648,465	$0	$1,648,260
Total GF/non-GF	**$1,693,215**	**$1,648,465**	**$0**	**$1,648,260**
Total Expenses:	**$3,341,680**		**$1,648,260**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$1,648,465	$0	$1,633,840
Beginning Working Capital	$0	$0	$0	$14,420
Total Revenue	**$0**	**$1,648,465**	**$0**	**$1,648,260**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	18	5	5
Number of participants receiving ongoing retention support (sustained)	91	80	80

Division: Supportive Housing

Program Characteristics:

Program Description

The program offer supports supportive housing units and associated services for survivors of domestic and sexual violence and their children, including Black, Indigenous, and other Communities of Color who are disproportionately impacted by these crises.

By funding tenant-based Permanent Supportive Housing (PSH) opportunities, the program uses the low-barrier Regional Long-term Rent Assistance (RLRA) model to help families fleeing violence secure housing quickly. Additionally, it supports specialized staff at domestic violence housing agencies to provide essential services, including culturally specific care for Black and African American survivors, ensuring a clear path from crisis to long-term stability.

Expected outcomes include:
Increased access to tenant-based PSH for survivors and their children.
Improved long-term housing stability for survivors
Enhanced safety and well-being for survivors and their children.
Increased self-sufficiency and empowerment for survivors through access to support services.
Greater housing equity for Black, Indigenous, and other People of Color survivors of domestic/sexual violence.

Equity Statement

This program focuses on serving Black, Indigenous, and other People of Color survivors and survivors with disabling conditions through rental assistance (via Home Forward), and supportive services for longer periods of time. This allows highly vulnerable households to stabilize, address barriers, and meet long-term goals. All services are trauma-informed, culturally responsive, open to all regardless of protected class, and community based organizations are engaged in program

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$1,286,685	$0	$1,607,275
Total GF/non-GF	**$0**	**$1,286,685**	**$0**	**$1,607,275**
Total Expenses:	**$1,286,685**		**$1,607,275**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$1,286,685	$0	$1,607,275
Total Revenue	**$0**	**$1,286,685**	**$0**	**$1,607,275**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	62	9	10
Number of participants receiving ongoing retention support (sustained)	94	159	149

Division: Supportive Housing

Program Characteristics:

Program Description

The Frequent Utilizer System Engagement (FUSE) program addresses the complex and costly problem of frequent utilization of homeless services, healthcare, and public safety systems by individuals experiencing chronic homelessness.

The FUSE program breaks the cycle of chronic homelessness by providing permanent supportive housing and wrap-around services to those who most frequently utilize emergency public systems. By moving individuals from crisis to stability, the program reduces involvement with the criminal justice system and decreases the use of emergency healthcare. These integrated supports not only improve the health and well-being of participants but also ensure a more efficient and cost-effective use of public resources.

A collaboration between the Department of County Human Services, the Health Department, the Department of Community Justice, the Homeless Services Department and a regional Coordinated Care Organization, FUSE provides:
Identification of Frequent Utilizers: Uses data sharing agreements to identify individuals that fit the criteria.
Permanent Supportive Housing
Long-Term Rental Subsidies
Wrap-Around Support Services

Equity Statement

This program offer funds tenant-based supportive housing for the most “frequent utilizers” of public systems. This includes people cycling in and out of the criminal justice system, hospitals and the homeless services system. A goal of the offer is to reduce racial disparities in homelessness. The supportive housing funded by this program offer is culturally specific to the Black/African American community.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$525,035	$707,375	$542,360	$989,010
Total GF/non-GF	**$525,035**	**$707,375**	**$542,360**	**$989,010**
Total Expenses:	**$1,232,410**		**$1,531,370**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$0	$0	$989,010
Beginning Working Capital	$0	$707,375	$0	$0
Total Revenue	**$0**	**$707,375**	**$0**	**$989,010**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of participants newly placed in housing	25	10	12
Number of participants receiving ongoing retention support (sustained)	0	18	28

Division: Supportive Housing

Program Characteristics:

Program Description

This program manages the allocation of Supportive Housing Services (SHS) revenue to partner departments to drive a unified, "One County" response to homelessness. By funding work within the Health Department, Department of County Human Services and various non-departmental offices, the county leverages specialized expertise to meet the goals of the Homeless Response Action Plan (HRAP). This collaborative model replaces fragmented services with an integrated network of care, ensuring that mental health support, addiction recovery, and employment assistance are directly linked to housing stability.

Utilizing SHS funds across these diverse departments allows for a comprehensive approach to the complex needs of vulnerable residents. Key outcomes of this cross-departmental investment include increased shelter access, higher housing placement and retention rates, and reduced evictions. By coordinating resources through these specific agencies, the county reduces reliance on emergency services and provides the specialized support necessary for individuals to maintain long-term housing and well-being.

Equity Statement

Equity Statement
The Supportive Housing Services (SHS) program is dedicated to eliminating disparities in homeless services, including services for Multnomah County's most vulnerable populations, specifically Black, Indigenous, and other People of Color. This Program Offer aims to sustain and support culturally inclusive services throughout our system by streamlining critical services,

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$0	$0	$0
Total GF/non-GF	**$0**	**$0**	**$0**	**$0**
Total Expenses:	**$0**		**$0**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$24,796,505	$0	$16,974,001
Beginning Working Capital	$0	$9,983,504	$0	$815,000
Total Revenue	**$0**	**$34,780,009**	**$0**	**$17,789,001**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target

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Department Overview

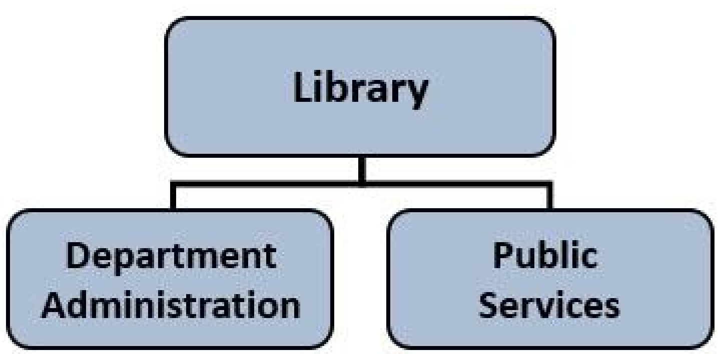
Multnomah County Library (MCL) has been a vital community resource since 1864, serving patrons across the county with 19 locations. Our strong community support is evident with 350,000 cardholders, including 115,000 students in grades K-12 who access library services through Library Connect. In FY 2025, we recorded over two million visits and 17.6 million checkouts and renewals.

Multnomah County Library is dedicated to a set of strategic goals: expanding access to lifelong learning and improving learning outcomes; adapting services to community needs; bridging the digital divide; fostering welcoming and inclusive spaces; supporting democracy; ensuring positive user experiences; and collaborating to create adaptable library spaces.

Multnomah County Library is nearing the completion of a major transformation, with all 19 library locations set to be open for the first time since FY 2023. This milestone coincides with the anticipated on-time and within-budget delivery of the 2020 Multnomah County Library Capital Bond projects in FY 2027. These projects, including major expansions, renovations, and new construction, fulfill the Library's commitment to Multnomah County voters.

Alongside the development of new library spaces, MCL has focused on key operational initiatives: redesigning its staffing approach, automating materials movement with state-of-the-art technology, clearly defining service priorities, and addressing critical safety and security needs. The Library is also engaged in long-term planning to ensure fiscal stability in the face of escalating costs, expanded physical spaces, and new opportunities for community service.

A cornerstone of MCL’s mission is the creation and maintenance of welcoming and inclusive spaces for both patrons and staff. In alignment with Multnomah County’s Mission, Vision, and Values, the Library adopts a long-term approach to planning and resource allocation that prioritizes the needs of historically marginalized communities and evolves library services. This work is supported through culturally and linguistically relevant programming, collections, and staff, outstanding customer service, and the provision of diverse physical and digital resources.



$128.5 million

Total Adopted Operating Budget

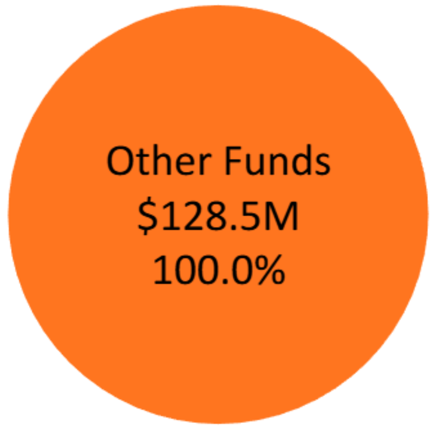
Excludes $0 million in cash transfers, contingencies, and unappropriated balances

544.80 FTE

Total Adopted Staffing

1.50 FTE

Increase from
FY 2026 Adopted



$3.3 million

All Funds (Operating) increase from
FY 2026 Adopted

2.6% Increase

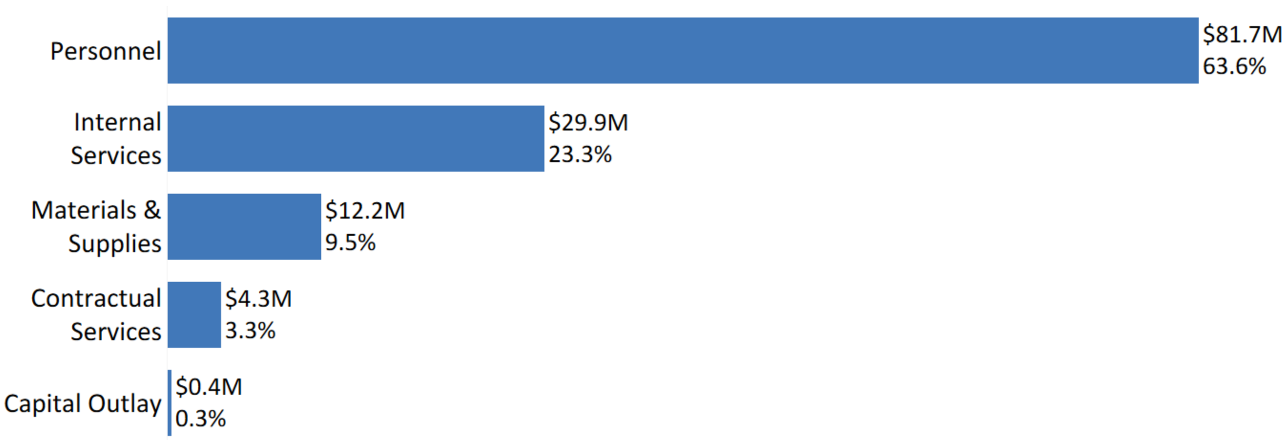
Library District Fund Balance

$4.3 million

One-Time-Only Funds Supporting Continuity of Operations, Pilot Projects, and Programs to Evolve Library Services to meet Community Needs.

Operating Budget by Category - $128.5 million

Does not include cash transfers, contingencies, and unappropriated balances



Mission, Vision, and Values

Multnomah County Library’s mission and values are reflected in its most recent strategic plan and current 2025-2026 Operational Strategic Plan. The Library is preparing to launch its 2027-2030 Strategic Plan development process in the coming year, which includes revision of the Library's mission and values as well as development of a new vision.

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

- Create public, popular and personal opportunities and access to lifelong 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 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 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.

Service Statement and Priorities

The library allocates staffing and funding resources to ensure the public can reliably access the four service areas below, listed in priority order.

1. Library spaces with accompanying collections, technology and direct customer service.
2. Information and referral services
3. A library website and public access catalog.
4. Programs and activities that foster literacy development and interest; create awareness of library services or information resources; or that provide opportunities for creativity and learning.

Diversity, Equity, and Inclusion

Multnomah County Library is dedicated to creating a library system that fosters the highest potential for its staff, patrons, and the broader community by prioritizing equity, empowerment, and support. The Library has no membership fees or restrictions based on identity, age, income, gender, race, or creed. The Library is committed to equity and inclusion and sustaining a reflective workforce in support of serving diverse communities with resources allocated to expand culturally and linguistically diverse staff; 27.2% of positions have Knowledge, Skills and Abilities (KSA) designations related to language or culture. This fosters an internal community and helps provide culturally responsive services to underserved communities.

In place for a decade, the Equity and Inclusion Program includes consultation, education, training, staff support for managers and those holding protected identities, group activities, and support following protected class incidents, investigations and microaggressions. As part of the Library Strategic Plan, a staff engagement process supported the development of a definition of a positive culture of racial equity and a framework was developed to move towards the staff-led definition. In order to gauge progress toward the goal of creating a positive culture of racial equity in the Library, Culture Change Pulse Checks are being conducted every six months, with yearly in-person staff engagement.

The Library is actively engaged with the County’s Workforce Equity Strategic Plan (WESP): initiatives include feedback to managers for professional growth, staff “Stay Interviews” to identify strategies for employee engagement and retention, and tracking regular staff check-ins with managers to ensure that staff receive regular, high quality support and guidance and engagement.

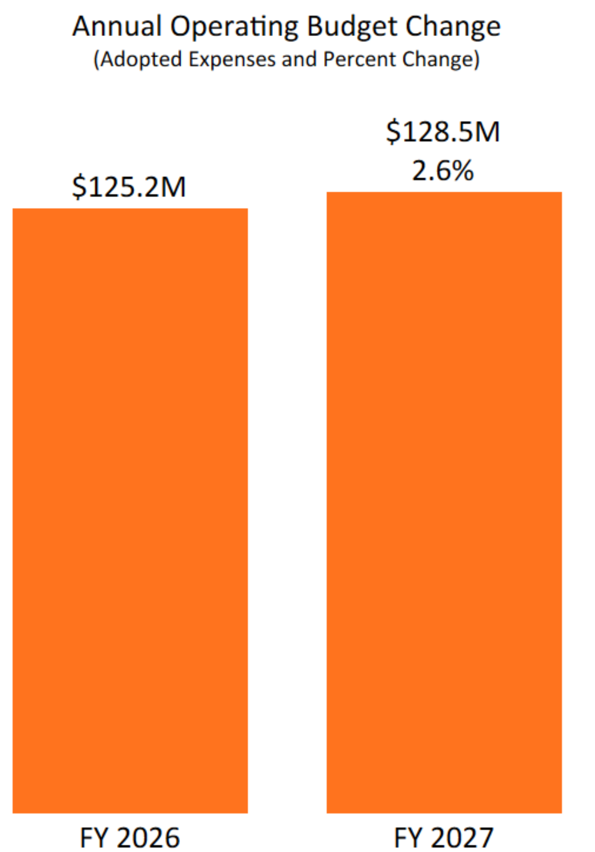
The Library has adopted Targeted Universalism to intentionally design services to respond to the needs of diverse communities facing significant access barriers. This involves ensuring services are inclusive of cultural responsiveness, language accessibility, physical access, psychological and emotional safety, developmental needs, and trauma-informed practices, building upon a long-standing commitment to equitable service delivery.

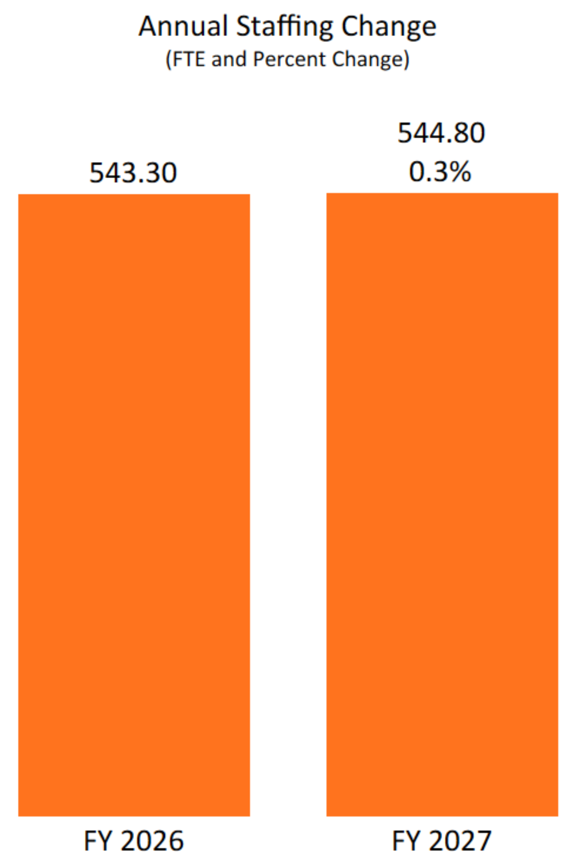
The Library applies the fundamentals of the County’s equity lens in a variety of ways as it crafts its budget. The following assessments are contemplated during budget prioritization:

- The Equity and Inclusion Team works with staff to develop program goals that support equity and communities of focus.
- Each library manager is asked to evaluate their current service level funding for ways to improve equitable service provision within existing resources.
- The Library assesses how changes to programs and services advance equity goals or would potentially have a negative impact on those experiencing the greatest barriers.

Budget Overview

The Library FY 2027 Adopted Budget is $128.5 million, a $3.3 million (2.6%) increase from the FY 2026 Adopted Budget. Ongoing operating expenses increased $5.3 million (4.5%) over the FY 2026 Adopted Budget, but are offset by reduced one-time-only spending. Library operations are funded almost entirely through the independent Multnomah County Library District. In the fourteenth 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 2026 and is below the voter approved maximum of $1.24 per $1,000 of assessed value.





The Spring 2026 Library District forecast shows slow assessed value growth for the foreseeable future due to low levels of development and declining downtown property values. This is offset by a planned rate increase in FY 2028 and the end of the County's PERS Bond payments in FY 2031, but the fiscal landscape for the Library remains challenging. In November 2020, voters passed the Library General Obligation Bond (GO Bond) measure which funds development or significant renovations at eight library branches, including a new East County Flagship branch (opened May 2026), a new sorting center (opened in FY 2024), and expansion of automated materials handling capabilities. The majority of funding from the bond is budgeted in the Department of County Assets (DCA) program offers 78228A-J.

The Library worked with DCA to estimate expected ongoing increases for facilities and IT costs which are mostly incorporated into the FY 2027 budget. The FY 2027 budget also includes a variety of changes (detailed below) in order to balance the Library budget.

Reductions and Reallocations

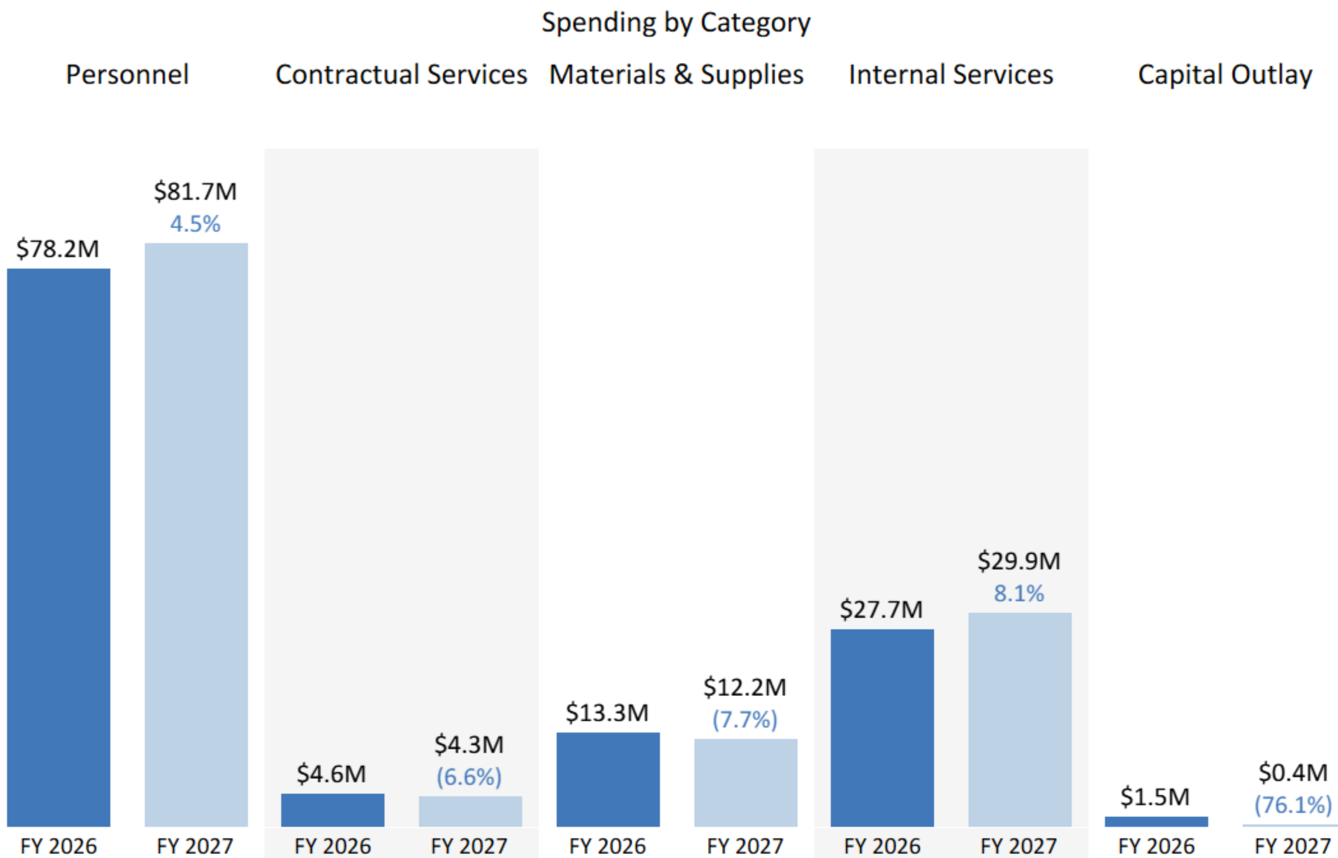
The combination of declining downtown property values and persistently high inflation is having the same impact on the Library that it is having on the County General Fund. As part of the FY 2027 budget development process, the Library had to close a $2.0 million budget gap. The following table summarizes the reductions the Library has implemented in the FY 2027 budget.

Prog. #	Program Offer Name and Description	Library Fund	FTE Reductions
80022	Public Services Division Management - Security Changes	(330,307)	0.00
80020	Integrated Library Services - E-Book Budget Reduction	(350,000)	0.00
80018	IT Services - Sunset Mobile App Exploration	(27,700)	0.00
80017	Human Resources - Travel/Training	(20,000)	0.00
Multiple	Multiple - Materials and Supplies	(586,267)	0.00
80022	Public Services Division Management - Substitute Staffing	(582,186)	0.00
80014	Facilities and Logistics - Internal Rate Charges	(159,615)	0.00
Total		**(2,056,075)**	**0.00**

The following allocations increase Access Services Assistants at the central Sorting Center by reducing administrative positions in other programs. This is in line with the Library's Future Staffing Plan.

Prog. #	Program Offer Name	Library Fund Reallocated	FTE Reallocated
Made these reductions			
80017	Human Resources	(80,432)	(0.50)
80019	Marketing & Communications	(114,124)	(0.50)
80022	Public Services Division Management	(142,160)	(1.00)
To Fund these programs			
80020	Integrated Library Services	346,211	3.50
	Total	**9,495**	**1.50**

The chart below provides a breakdown of the budget's expense categories from FY 2026 to FY 2027. Personnel services is by far the biggest portion of the Library's budget. The 8.1% increase in internal services is due to increased facilities and technology costs associated with the opening of Library bond projects, and the relative cost of having all library locations back online.



The Budget Trends table below details expense categories from FY 2025 Actual to FY 2027 Adopted.

Category	FY 2025 Actual	FY 2026 Current Estimate	FY 2026 Adopted Budget	FY 2027 Adopted Budget	Difference
Personnel Services	68,486,572	73,166,263	78,183,942	81,690,495	3,506,553
Contractual Services	3,176,499	4,107,055	4,610,192	4,304,929	(305,263)
Materials & Supplies	12,181,956	12,479,712	13,271,399	12,245,674	(1,025,725)
Internal Services	24,822,725	26,471,076	27,690,556	29,931,153	2,240,597
Capital Outlay	1,200,000	1,491,915	1,467,500	350,000	(1,117,500)
Total Operating Budget	**109,867,752**	**117,716,021**	**125,223,589**	**128,522,251**	**3,298,662**
Contingency (All Funds)*	N/A	N/A	0	0	0
Internal Cash Transfers	0	0	0	0	0
Unappropriated (Reserves)*	N/A	N/A	0	0	0
Total Budget	**109,867,752**	**117,716,021**	**125,223,589**	**128,522,251**	**3,298,662**
FTE	**539.25**	**543.30**	**543.30**	**544.80**	**1.50**

*In any given fiscal year, there is no spending of unappropriated balance; if contingency is spent, it will be reflected in the Operating expenditures.

Total Budget by Division

Division Name	General Fund	Other Funds	Total Division Cost	Total FTE
Department Administration	0	35,961,986	35,961,986	71.25
Public Services	0	92,560,265	92,560,265	473.55
Total Library	**0**	**128,522,251**	**128,522,251**	**544.80**

Includes cash transfers, contingencies, and unappropriated balances.

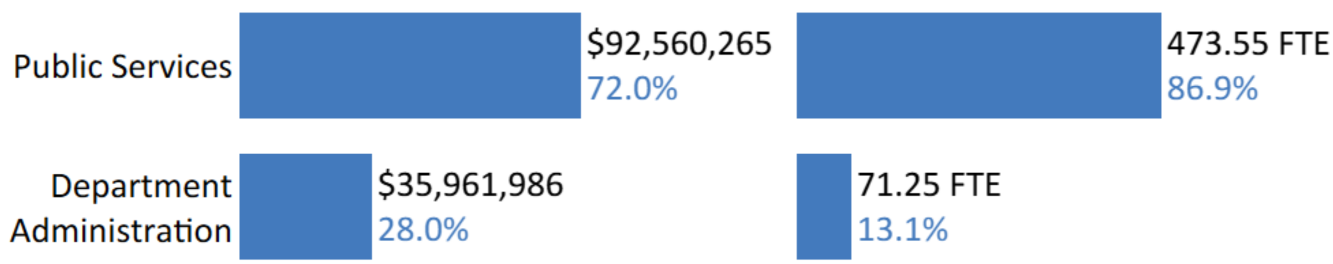


Table of All Program Offers

The following table shows the programs that make up the department’s total budget, including cash transfers, contingencies, and unappropriated balances. Individual programs follow, grouped by division.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
Department Administration						
80010	Library Director’s Office		0	3,268,392	3,268,392	14.00
80012	Business Services		0	1,992,073	1,992,073	8.00
80014	Facilities and Logistics		0	7,683,834	7,683,834	10.00
80017	Human Resources		0	3,763,076	3,763,076	17.25
80018	IT Services		0	12,613,033	12,613,033	5.00
80019	Marketing and Communications		0	2,388,652	2,388,652	11.00
80024	Library Building Bond Administration		0	0	0	6.00
80025	Library Special Projects	X	0	4,252,926	4,252,926	0.00
Total Department Administration			**0**	**35,961,986**	**35,961,986**	**71.25**
Public Services						
80001	Central Library		0	10,855,193	10,855,193	64.25
80002	North and Northeast County Libraries		0	11,898,115	11,898,115	72.25
80003	West and South County Libraries		0	10,758,154	10,758,154	64.25
80004	Mid County Libraries		0	11,269,238	11,269,238	67.50
80005	East County Libraries		0	11,806,583	11,806,583	67.25
80006	Youth Development		0	1,899,148	1,899,148	7.75
80007	Community Information		0	2,067,579	2,067,579	14.50
80020	Integrated Library Services		0	17,472,153	17,472,153	56.25
80022	Public Services Division Management		0	8,177,990	8,177,990	31.00
80023	Community Engagement and Partnerships		0	2,407,900	2,407,900	10.00
80026	Library Events and Reader Services		0	3,948,212	3,948,212	18.55
Total Public Services			**0**	**92,560,265**	**92,560,265**	**473.55**
Total Library			**0**	**128,522,251**	**128,522,251**	**544.80**

Library Administration Division

$36.0 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

71.25 FTE

(full time equivalent)

The Library Administration Division is the essential infrastructure and support for Multnomah County Library. This vital, multi-faceted division provides executive leadership, strategic direction and vision, and policy development for the library system.

This division acts as an operational backbone, ensuring all public-facing library services and programs can function seamlessly and effectively.

Key support functions include:

Director's Office: The Director's Office sets the Library's overall goals and service priorities. It provides executive leadership, establishes the strategic vision, and ensures library services align with community needs. Key responsibilities include making policy decisions, managing external relations, overseeing budget allocation, and planning for sustainable services in the future.

Office of Project Management and Evaluation: The Office of Project Management and Evaluation team provides project management support to major system wide initiatives, policy development and evaluative and analytical support to the library.

Equity and inclusion: Equity and inclusion are foundational principles guiding both the internal operations and external services of the Library. The Administration Division, through the leadership of the Equity and Inclusion Manager and Analyst, employs a framework of Targeted Universalism to address systemic inequities and deliver culturally attuned services. The Library is also actively committed to and engaged in the County's Workforce Equity Strategic Plan, focusing on improving the experiences of all staff, particularly those most impacted by historical and current systemic inequities.

Fiscal management: Managing the Library's overall financial well-being is a core responsibility, encompassing forward-looking budget development, continuous fiscal monitoring, and accounting functions. This includes overseeing procurement of goods and services, as well as administering contracts and grant agreements.

Facilities and logistics: The facilities and logistics team is responsible for the physical environment of all library locations, ensuring they are safe, accessible, and well-maintained for the public and staff. This includes coordinating with County Facilities to plan for ongoing facilities management work across library spaces, and providing logistical support for library materials and internal operations.

Human Resources: The Library Human Resources team oversees strategic recruitment and onboarding of a talented and diverse workforce, and administers employee benefits, manages compensation, and ensures compliance with labor laws and organizational policies. This unit includes a Learning and Organizational Development team that provides ongoing training and professional development opportunities, as well as the Library's Volunteer Services team.

IT Services: Maintaining a robust and reliable technological framework and digital infrastructure is critical to Library operations and patron services. This includes managing the public-facing website, implementing and supporting all essential software solutions, and developing and maintaining digital services that expand access to information and resources in conjunction with County IT.

Marketing and communications: The Marketing and Communications team is responsible for managing the Library's public image and community engagement through a variety of marketing and communications efforts. This function disseminates critical information, leads internal communications, promotes Library programs and services, manages media relations, and ensures consistent branding across all platforms.

Library Building Bond Administration: The Administration Division is also responsible for the comprehensive administrative oversight and management of the large-scale, complex, multi-year Library Capital Bond Program, involving building and renovation projects.

Significant Division Changes

Strategic Planning Efforts Underway: The Library is launching the development process for the 2027-2030 Library Strategic Plan, a critical initiative that will set the strategic direction after the library bond renovations are complete. This plan will be created in partnership with the community to establish a clear roadmap with measurable goals. Key components will include an updated organizational vision, mission, and values statement, as well as specific goals aligned with the Library's four service priorities.

Future Bond: The Library is also assessing the possibility of a future bond measure. This research is essential for defining the next phase of the original vision outlined in the Framework for Future Library Spaces. The process involves careful evaluation of ongoing operating costs, such as staffing, materials, supplies, and internal services. This is a multi-month process, and no recommendations regarding a future bond will be made in the near term.

Office of Project Management and Evaluation Transition: The Office of Project Management and Evaluation team provides project management support to major system wide initiatives, as well as evaluative and analytical support to the library. This team transitioned from the Public Services Division Management program offer (80022) in the Public Services Division to the Library Director's Office program offer (80010) in the FY 2027 budget, with associated FTE and budget transfers. This change will allow for better oversight of the Library's strategic initiatives and critical projects, including the staffing plan implementation project, strategic plan, and patron surveys.

Significant Budget Changes

- **Staffing Realignment to Support Public Services:** A staffing reallocation package for FY 2027 adds 3.50 FTE Access Services Assistants in the centralized Sort Center (80020). The cost of these positions is offset by reducing 2.00 administration positions: 1.00 from the Administration Division across Human Resources (80017) and Marketing and Communications (80019), and 1.00 from Public Services Division Management (80022).
- **Travel and training reduction:** For the second consecutive year, the budget for conference, training, and professional development events is reduced to help balance the budget (80017).
- **Sunset mobile app exploration:** Library IT will conclude an early exploration of a new patron mobile app (80018). The Library's website will continue to offer access to resources and is designed to be fully mobile responsive.
- **Prophet Building storage space:** Library Facilities (80014) will sunset the use of storage space at the County Facilities site in order to save $0.2 million on leased space costs.

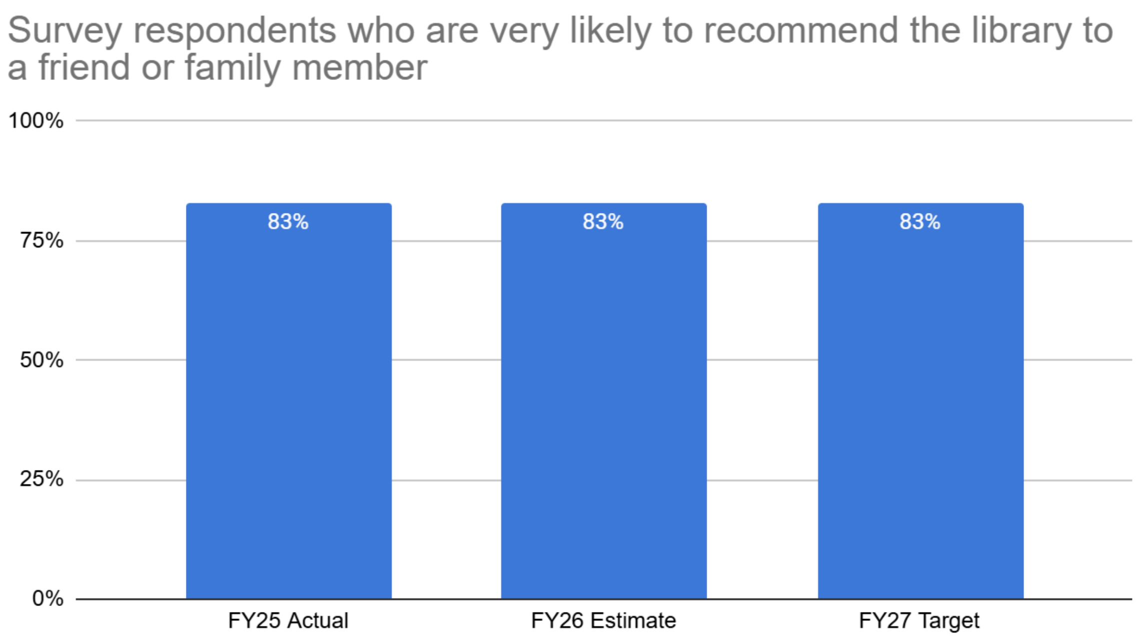
Library Administration Division Outcomes

1. The Library adapts, evolves, and communicates about library services in a way that is responsive to the community.

Outcome 1 Description: Across 19 library locations with over three million physical and digital items in the collection, Multnomah County Library strives to provide a diverse range of relevant and responsive services accessible to all community members.

Key Performance Indicator (KPI) 1.1: Percent of survey respondents who are very likely to recommend the library to a friend or family member

KPI 1.1 Description: Survey respondents who answered, “How likely are you to recommend the library to friends or family?” with 9 or 10 on a 10-point scale. Source data: Patron Survey.

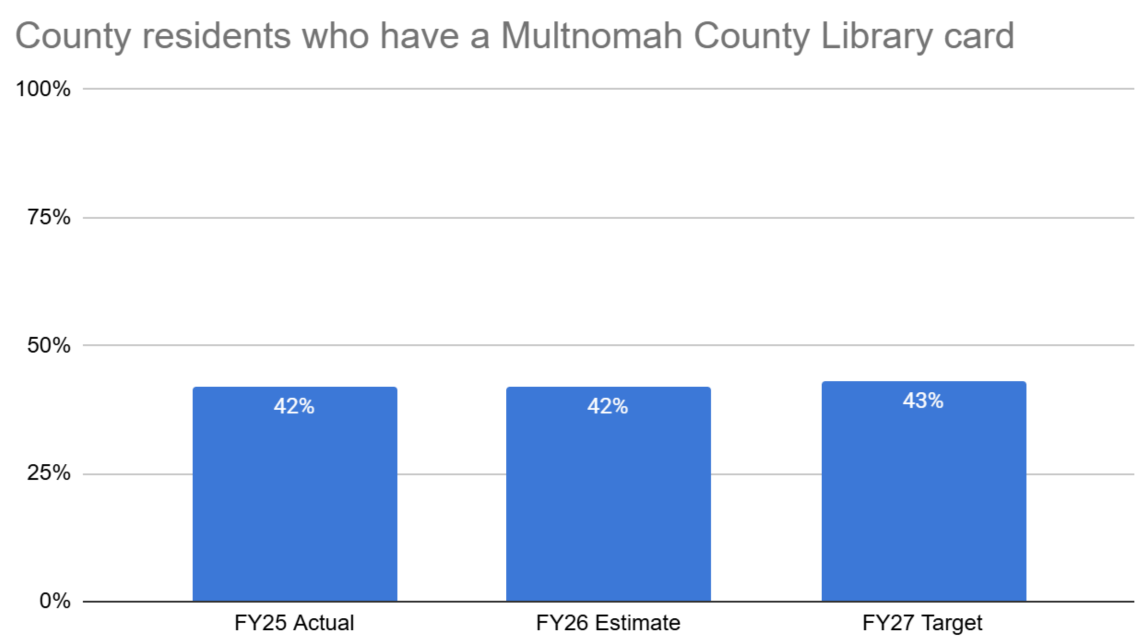


FY 2026 Estimate: 83%	**FY 2027 Target:** 83%

KPI 1.1 Equity Considerations: Survey respondents have historically trended older and less diverse than the community at large, so the Library intentionally seeks engagement from communities of focus and makes the survey available in multiple service languages. Survey responses are analyzed for differences by groups, specifically by race, ethnicity, place of origin, and cultural identity. In order to support more in-depth understanding and insight into the patron experience, the Library also conducts a story-based patron input project that oversamples from communities of focus. This qualitative survey is performed on alternating years with the quantitative survey.

Key Performance Indicator (KPI) 1.2: Percent of county residents who have a library card

KPI 1.2 Description: This is an important indicator of library engagement and responsiveness to the community, and is calculated as the number of Multnomah County residents who have a library card divided by the total number of residents in the county.

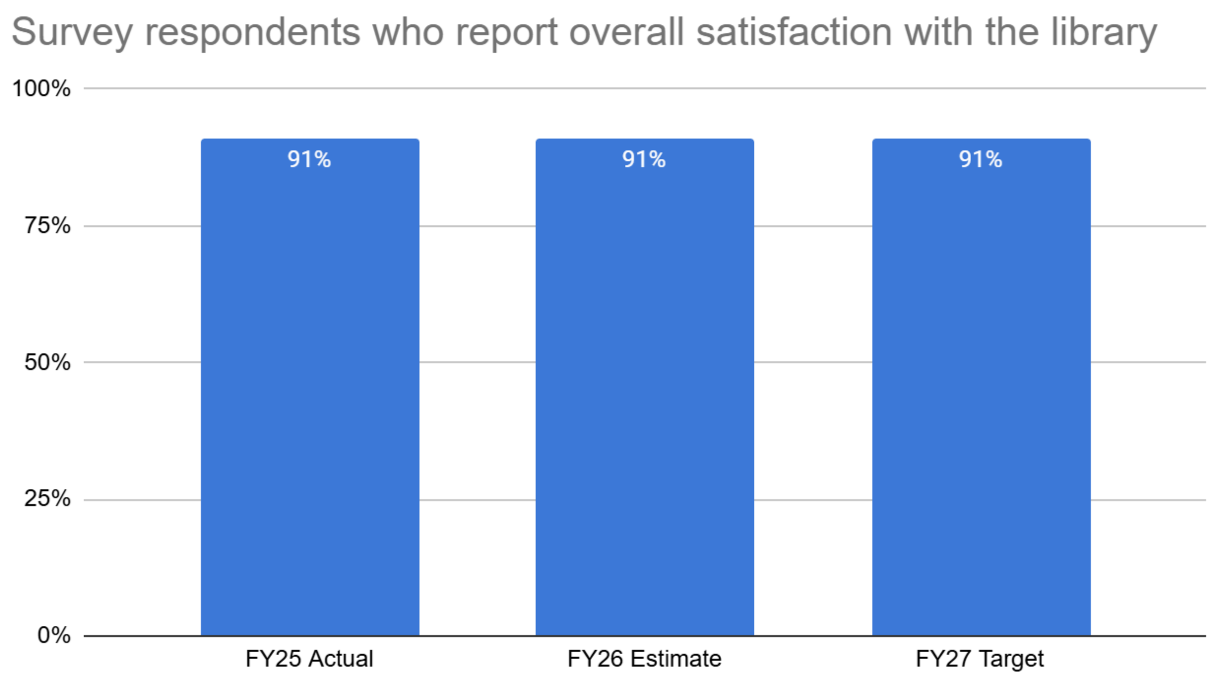


FY 2026 Estimate: 42%	**FY 2027 Target:** 43%

KPI 1.2 Equity Considerations: This is an overall indicator of the Library's success in being responsive to and engaged with the community, but the Library does not collect or analyze demographic data on library card holders. The library develops targeted communication and engagement strategies based on communication needs, and conducts annual surveys (both quantitative and qualitative) to understand how to be responsive to community needs.

Key Performance Indicator (KPI) 1.3: Percent of survey respondents who report overall satisfaction with the Library

KPI 1.3 Description: Patron satisfaction is measured through the Library's biennial Patron Survey, and is important in gauging user sentiment over time as an indicator of how well MCL is serving the community. Source data: quantitative Patron Survey



FY 2026 Estimate: 91%	**FY 2027 Target:** 91%

KPI 1.3 Equity Considerations: Survey respondents to the patron survey have historically trended older and less diverse than the community at large, so the Library intentionally seeks engagement from communities of focus and makes the survey available in multiple service languages. Survey responses are analyzed for differences by groups, specifically by race, ethnicity, place of origin, and cultural identity. In order to support more in-depth understanding and insight into the patron experience, the Library also conducts a story-based patron input project that oversamples from communities of focus. This qualitative survey is performed on alternating years with the quantitative survey.

Outcome 1 Program Offers The following program offers contribute to Outcome 1.

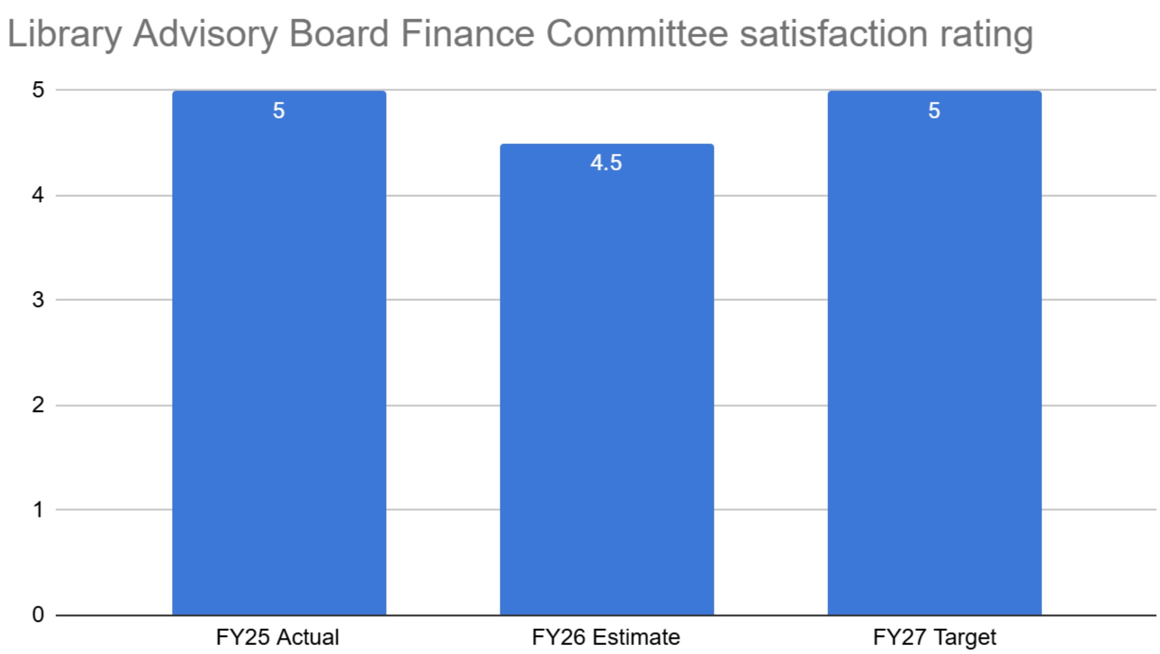
- 80010 - Library Director's Office
- 80018 - IT Services
- 80019 - Marketing and Communications
- 80024 - Library Building Bond Administration

2. Library operations are supported by effective resource and asset management ensuring sustainable, long-term community access to library services.

Outcome Statement 2 Description: Dedicated Business Services, Facilities, IT, and Building Bond Administration are the foundation for Library's service to the community. Management of library's infrastructure ensures sustainable long-term community access to shared public resources.

Key Performance Indicator (KPI) 2.1: Library Advisory Board Finance Committee satisfaction rating

KPI 2.1 Description: The Library Advisory Board Finance Committee serves as a community advisory committee, and provides community perspective, input, and recommendations on the Library's annual budget development. The satisfaction rating of this advisory body is indicative of their overall understanding and support of resource management recommendations made by the Library to the Board of County Commissioners as part of the budget process.



FY 2026 Estimate: 4.5	**FY 2027 Target:** 5.0

KPI 2.1 Equity Considerations: Demographic data is collected for Library Advisory Board Finance Committee members. Being a small committee, the diversity of this committee varies from year to year and is not guaranteed to be representative of the community at large. The Library Advisory Board strives for diversity of membership in general, but participation on the finance committee is made up of a subset of advisory board members. Library Advisory Board members received training on equity lens tools, and bring this perspective to library budget sessions.

Key Performance Indicator (KPI) 2.2: Percent of owned library buildings in good or excellent condition

KPI 2.2 Description: Facility Condition Assessments were performed on owned library buildings, and will be repeated approximately every five years. Understanding the relative condition of the Library's portfolio of buildings helps understand how well these assets are being maintained for the public over time, and where additional investment may be needed.

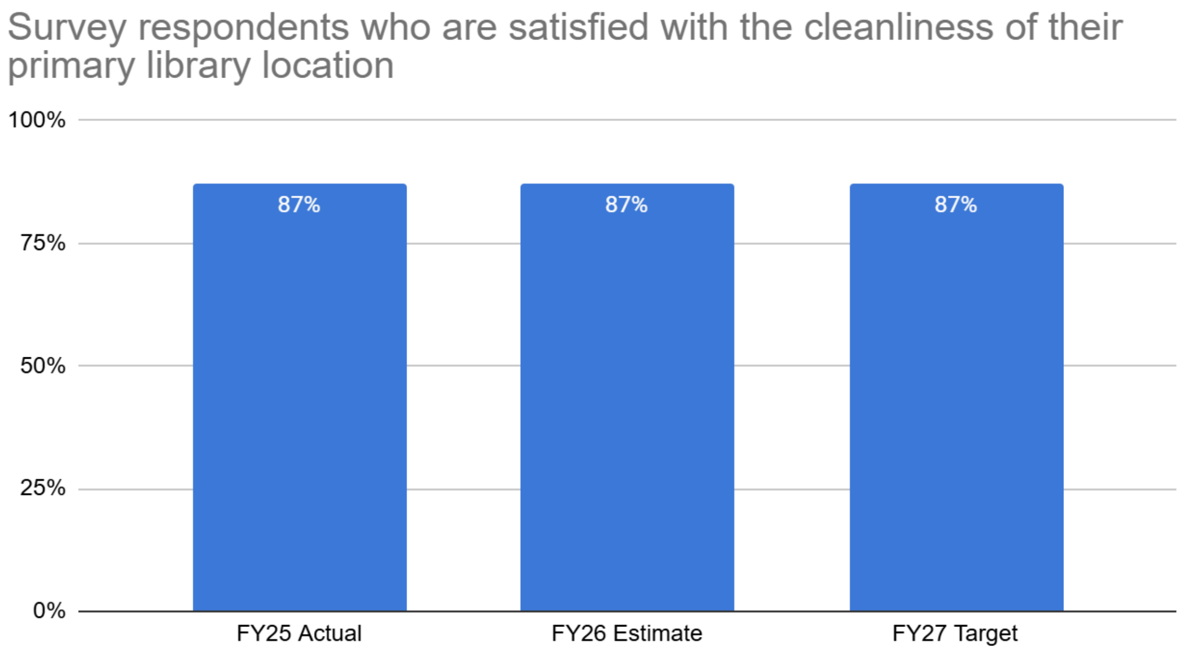
Building condition is not expected to materially change in between assessments, so this will be a static metric unless buildings are added/removed from the owned portfolio, or there is a material failure or renovation of a building. Leased spaces are excluded from the calculation, as overall building condition is managed by the property owner. Major bond projects are assumed to be in excellent condition, pending an initial facility condition assessment.

FY 2026 Estimate: 81%	**FY 2027 Target:** 81%

KPI 2.2 Equity Considerations: Annual capital improvement resource planning is based on prioritization of life/safety, building systems needs, sustainability, accessibility, and other factors. The Library Capital Bond Program also specifically considered the lack of library access in historically underserved parts of the community as part of 2020 bond planning. Future capital planning work will consider general building conditions (for owned and leased locations), among other key factors.

Key Performance Indicator (KPI) 2.3: Percent of patrons who are satisfied with the cleanliness of their primary library location.

KPI 2.3 Description: Satisfaction with library facility cleanliness is measured through the library's biennial Patron Survey, and is an indicator of library building management from our patrons' perspective. Source data: quantitative Patron Survey.



FY 2026 Estimate: 87%	**FY 2027 Target:** 87%

KPI 2.3 Equity Considerations: Survey respondents have historically trended older and less diverse than the community at large, so the Library intentionally seeks engagement from communities of focus and makes the survey available in multiple service languages. Survey responses are analyzed for differences by groups, specifically by race, ethnicity, place of origin, and cultural identity. In order to support more in-depth understanding and insight into the patron experience, the Library also conducts a story-based patron input project that oversamples from communities of focus. This qualitative survey is performed on alternating years with the quantitative survey.

Outcome 2 Program Offers The following program offers contribute to Outcome 2.

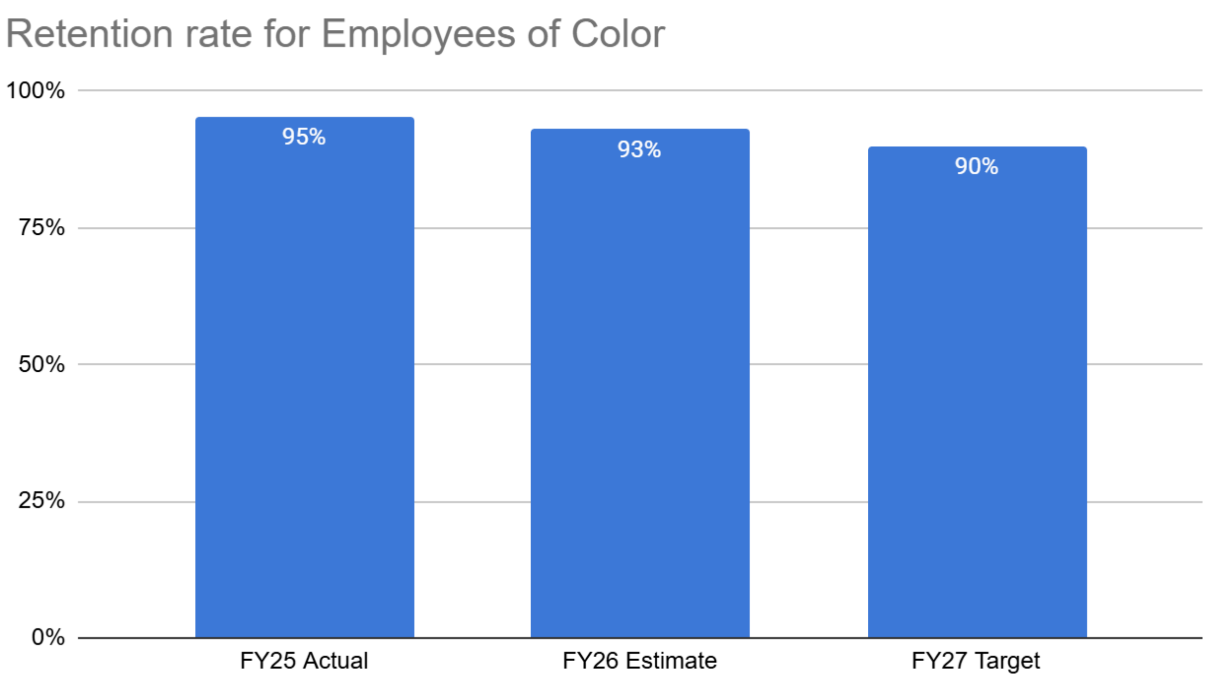
- 80012 - Business Services
- 80014 - Facilities & Logistics
- 80018 - IT Services
- 80024 - Library Building Bond Administration
- 80025 - Library Special Projects

3. Library patrons receive excellent, culturally responsive customer service from a well-trained, diverse staff.

The Library Human Resources and Equity & Inclusion teams develop learning, training, and support systems for library staff to promote both patron-facing and internal organizational goals. These goals include, but are not limited to, excellent and culturally responsive customer service, support of the County's Workforce Equity Strategic Plan, and a more positive culture of racial equity. Additionally, Language and Cultural KSA staff provide support for patrons from diverse communities, fostering engagement and building cultural connections.

Key Performance Indicator (KPI) 3.1: Retention rate for employees of color

KPI 3.1 Description: Retention rate for employees of color measures turnover: the number of employees on the first day of the fiscal year who were still employed on the last day of the fiscal year. Retention rates are disaggregated by self-identified race/ethnicity in order to compare turnover by employee group and identify group differences.

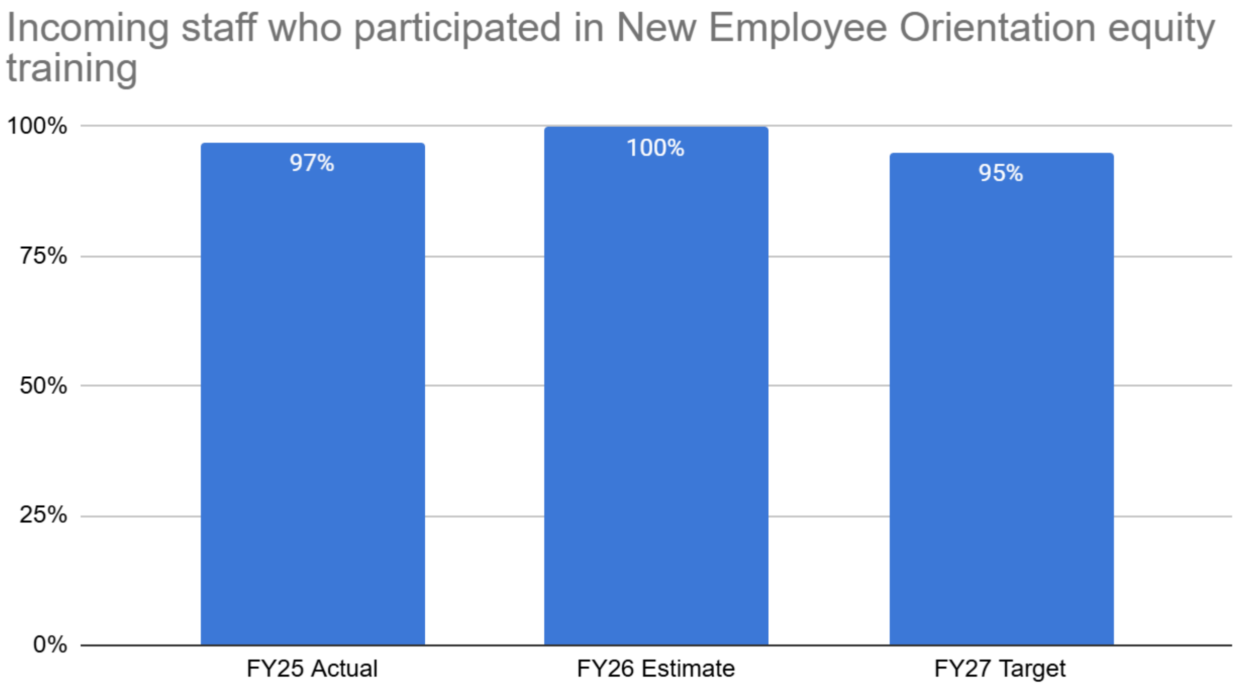


FY 2026 Estimate: 93%	**FY 2027 Target:** 90%

KPI 3.1 Equity Considerations: Hiring and retaining diverse staff provides varied perspectives and experiences, which allows the Library to develop and maintain culturally attuned services that engage and support diverse community members. The Library retention rate for all employees is 94.9%.

Key Performance Indicator (KPI) 3.2: Percent of incoming staff who participated in New Employee Orientation equity training

KPI 3.2 Description: The New Employee Orientation equity training is a critical part of onboarding new staff, and required within 60 days of hire.

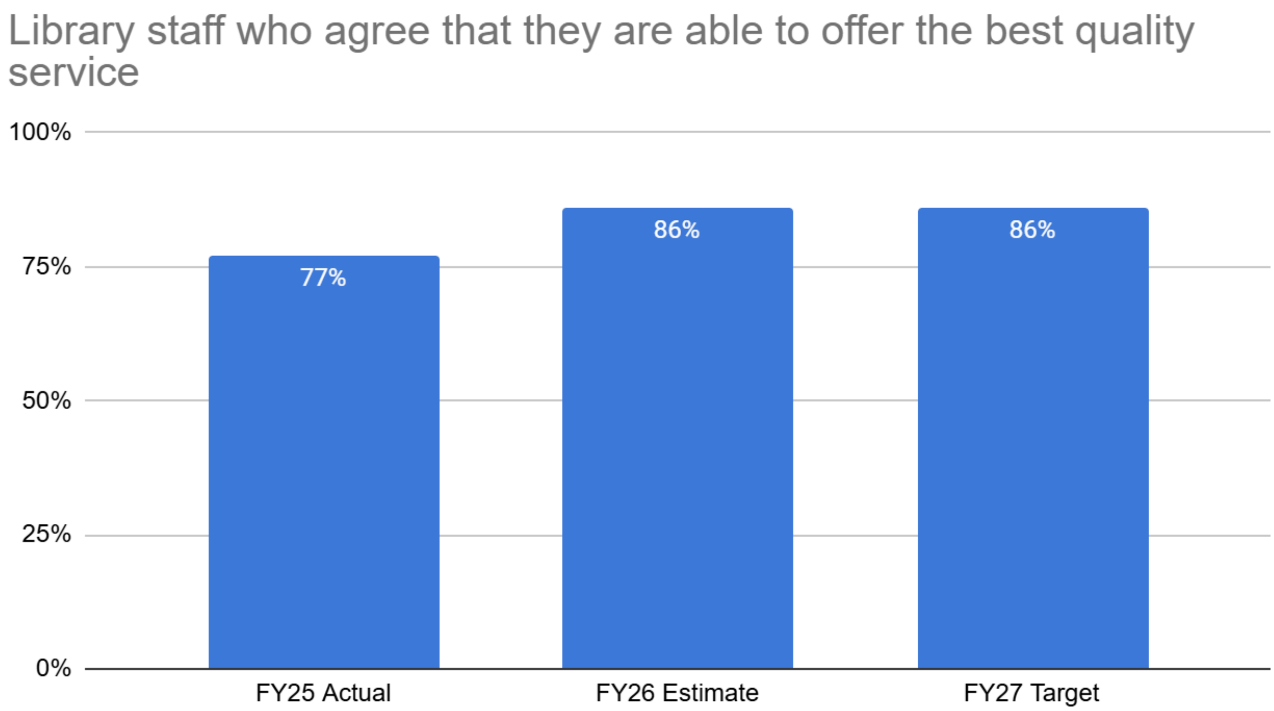


FY 2026 Estimate: 100%	**FY 2027 Target:** 95%

KPI 3.2 Equity Considerations: This training works to ensure staff have a basic understanding of equity related expectations and policies in order to support their understanding in engaging with internal and external customers.

Key Performance Indicator (KPI) 3.3: Percent of library staff who agree that they are able to offer the best quality service.

KPI 3.3 Description: Library employees who are able to offer the best quality service, measured through the biennial Countywide Employee Survey (CWES).

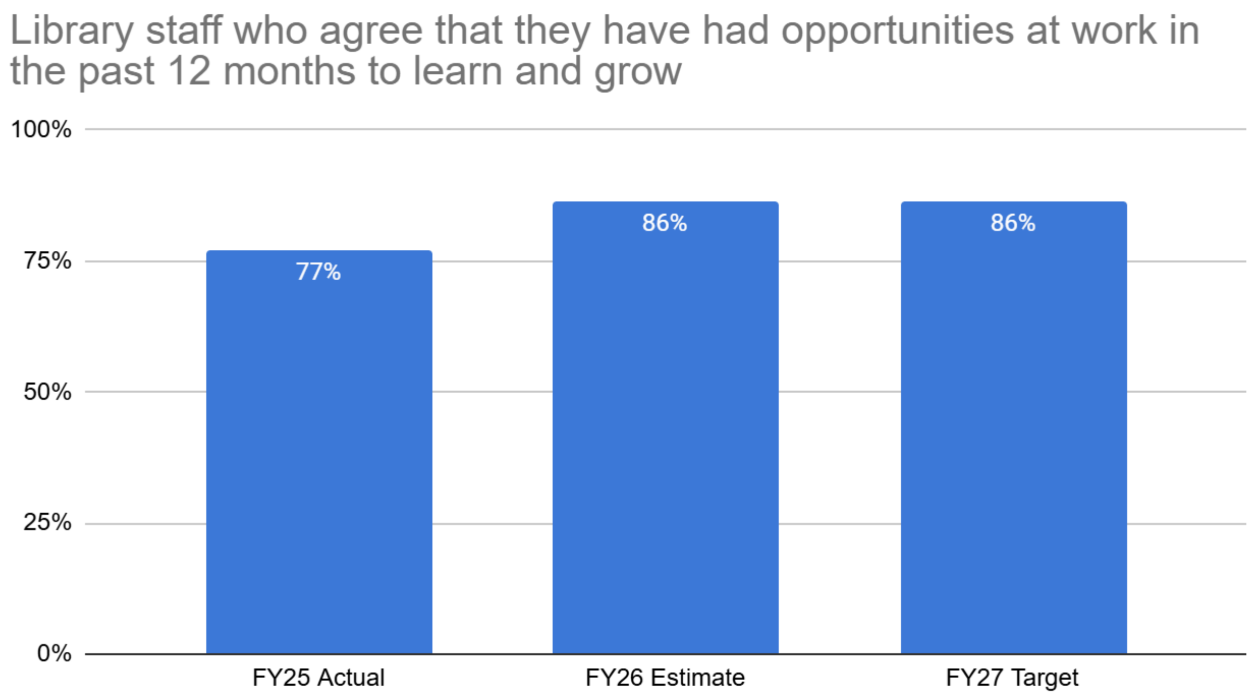


FY 2026 Estimate: 86%	**FY 2027 Target:** 86%

KPI 3.3 Equity Considerations: This data is from the Countywide employee survey. Library staff express that they are able to provide high quality service to all patrons, including culturally and linguistically diverse communities. This supports a welcoming and inclusive environment and culturally attuned service delivery.

Key Performance Indicator (KPI) 3.4: Percent of library staff who agree that they have had opportunities at work in the past 12 months to learn and grow

KPI 3.4 Description: Library employees who have opportunities at work to learn and grow, measured through the biennial Countywide Employee Survey (CWES).



FY 2026 Estimate: 86%	**FY 2027 Target:** 86%

KPI 3.4 Equity Considerations: This data is from the Countywide employee survey. Opportunities to learn and grow can support staff retention, including retention with Staff of Color and other staff holding marginalized identities. Opportunities may help support a sense of inclusion and increased morale.

Outcome 3 Program Offers The following program offers contribute to Outcome 3.

- 80010 - Library Director’s Office
- 80017 - 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	Total FTE
Department Administration Division						
80010	Library Director's Office		0	3,268,392	3,268,392	14.00
80012	Business Services		0	1,992,073	1,992,073	8.00
80014	Facilities and Logistics		0	7,683,834	7,683,834	10.00
80017	Human Resources		0	3,763,076	3,763,076	17.25
80018	IT Services		0	12,613,033	12,613,033	5.00
80019	Marketing and Communications		0	2,388,652	2,388,652	11.00
80024	Library Building Bond Administration		0	0	0	6.00
80025	Library Special Projects	X	0	4,252,926	4,252,926	0.00
Total Department Administration Division			**0**	**35,961,986**	**35,961,986**	**71.25**

Division: Department Administration

Program Characteristics:

Program Description

Summary: The Library Director's Office provides vision and executive leadership for the Library system, focusing on strategic planning and policy, community relations, and operational oversight and equity. This office works collaboratively with elected officials, an advisory board, support organizations, community partners, and staff to ensure Library services continually adapt to and meet the evolving needs of the community.

Program activities:
- Leads and develops strategic planning initiatives for the Library system
- Develops annual budgets for both the Library Department and the Library District
- Coordinates with County leadership to support One County initiatives and strategic objectives
- Partners with The Library Foundation and Friends of the Library to build crucial public support
- Oversees the activities and monthly meetings of the Library Advisory Board
- Maintains robust public relations through consistent community and patron communication
- Serves as executive sponsor for the Library Capital Bond Program
- Directs systemwide equity training and initiatives, including implementation of the Workforce Equity Strategic Plan
- Manages Library-wide project management, policy, and evaluation efforts
- Ensures clear communication with Library staff and union leadership on important Library issues

Equity Statement

Equity and inclusion are foundational principles to the internal and external facing services of the Library. Led by the work of the Equity and Inclusion Manager and Analyst, the Library utilizes Targeted Universalism to address inequities and provide culturally attuned services. The Library is committed to and engaged in the County's Workforce Equity Strategic Plan to support and improve the experiences of all staff, focusing on those most impacted by systemic inequities.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$1,397,289	$0	$3,027,152
Contractual Services	$0	$56,850	$0	$32,850
Materials & Supplies	$0	$54,800	$0	$75,565
Internal Services	$0	$76,333	$0	$132,825
Total GF/non-GF	**$0**	**$1,585,272**	**$0**	**$3,268,392**
Total Expenses:	**$1,585,272**		**$3,268,392**	
Program FTE	0.00	6.00	0.00	14.00
Program Revenues				
Intergovernmental	$0	$118,892,291	$0	$124,194,133
Other / Miscellaneous	$0	$35,000	$0	$75,192
Total Revenue	**$0**	**$118,927,291**	**$0**	**$124,269,325**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Library managers with at least four hours of equity and racially just leadership training or coaching	68	70	70
Number of completed systemwide evaluation, project management, or data projects	41	45	46

Division: Department Administration

Program Characteristics:

Program Description

Summary: Business Services manages all the fiscal functions to support the Library system's operations for the public, ensures the system spends within budget, and complies with all financial and contractual regulations.

Program activity:
• Budgets, receives, accounts for, and allocates Library funds according to Multnomah County guidelines
• Prepares and submits the annual budget and monitors and adjusts the budget throughout the year
• Manages contracts and purchases for the Library; collaborates with and supports all programs to procure or maintain goods, services, and partnerships essential to the Library's operations
• Supports the Community Partnership team's contracting process with community organizations to provide legal, tax preparation, and other services in Library spaces
• Processes and oversees all incoming and outgoing financial transactions
• Oversees grants from the State, foundations, and other nonprofit funders
• Represents the Library in several countywide groups and meetings related to finance and contracts

Equity Statement

Business Services focuses on equity by providing fiscal support to the Library's patron-facing programs, including those focused on communities of color and underserved communities. The program also works directly with minority and women-owned suppliers and assists them in the process of registering as a County vendor.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$2,796,778	$0	$1,666,372
Contractual Services	$0	$10,223	$0	$9,114
Materials & Supplies	$0	$204,091	$0	$107,953
Internal Services	$0	$276,400	$0	$208,634
Total GF/non-GF	**$0**	**$3,287,492**	**$0**	**$1,992,073**
Total Expenses:	**$3,287,492**		**$1,992,073**	
Program FTE	0.00	8.00	0.00	8.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of supplier invoices processed	5,898	6,000	6,000
Number of contracts executed and maintained	92	120	100

Division: Department Administration

Program Characteristics:

Program Description

Summary: Facilities and Logistics manages the overall health and upkeep of more than 20 Multnomah County Library District buildings; oversees the Library's central stores, fleet, the movement of materials and supplies between locations; and supports the success of all Library services. Facilities and Logistics ensures that Library buildings provide inclusive access to all patrons, and it invests in quality buildings and materials to reduce long-term operational costs and provide maximum flexibility for the future.

Program activity:
• The Facilities team provides oversight for repair and maintenance activities for all Library locations. This includes coordinating with County staff, information technologies, contractors, and vendors. It also contributes to and approves the Department of County Assets' Capital Improvement Plan for Library buildings, providing key partner-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 it provides support for secure building access.
• The Logistics team oversees deliveries that move materials between locations, enabling quick access to Library materials throughout the county. The program operates daily, delivering to 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. This program helps manage risk and safety for the Library along with the County security program, and it contributes to security and safety policy development and implementation.

Equity Statement

Facilities and Logistics supports diversity, equity, and inclusion by budgeting to upgrade our facilities to better meet universal design standards, ADA guidelines, and to support equitable access for all with prioritized focus on underserved communities. This program also promotes design justice principles, including trauma-informed design, sustainability, and workforce equity within facilities projects.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$1,537,513	$0	$1,582,983
Contractual Services	$0	$78,435	$0	$36,200
Materials & Supplies	$0	$33,899	$0	$79,918
Internal Services	$0	$5,954,711	$0	$5,984,733
Total GF/non-GF	**$0**	**$7,604,558**	**$0**	**$7,683,834**
Total Expenses:	**$7,604,558**		**$7,683,834**	
Program FTE	0.00	10.00	0.00	10.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Crates of Library materials, mail, and supplies moved annually	167,874	204,000	208,000
Facilities work tasks monitored	5,383	6,560	7,595

Division: Department Administration

Program Characteristics:

Program Description

Summary: The Library Human Resources (HR) team manages a diverse, qualified workforce through all employment stages—recruitment, hiring, employee relations, development, training, and retention—in alignment with County and Library equity values. Staffed by diverse experts, the HR program includes Learning and Organizational Development (L+OD) and Volunteer Services (VS).

Program activity: The HR program manages the employment life cycle for staff recruitment and retention, consults on performance management, and partners with County Human Resources and Labor Relations to enforce rules and contracts. L+OD coordinates training, organizational growth, team-building, and leads cross-functional projects with change management expertise. VS oversees the volunteer life cycle, including placement, policies, and recognition, drawing from a racially and ethnically diverse group, ranging from students to octogenarians.

HR and L+OD contribute to the goal of committing necessary resources and staffing to realize a vision of spaces that adapt to community needs. VS supports the goal of ensuring community members have a positive experience with Library staff, spaces, materials, and services.

Equity Statement

Human Resources supports the Library's equity and inclusion goals through decision-making tools, frameworks, and targeted training. Key focuses continue to include recruitment, hiring, and training of diverse applicants and volunteers. The Learning and Organizational Development program also specifically funds travel and training for attendance at culturally specific conferences and trainings.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$3,306,276	$0	$3,411,955
Contractual Services	$0	$39,000	$0	$29,250
Materials & Supplies	$0	$239,522	$0	$181,174
Internal Services	$0	$154,721	$0	$140,697
Total GF/non-GF	**$0**	**$3,739,519**	**$0**	**$3,763,076**
Total Expenses:	**$3,739,519**		**$3,763,076**	
Program FTE	0.00	17.75	0.00	17.25
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Hours contributed by volunteers	24,305	22,000	25,000
Number of new hires	75	15	15

Division: Department Administration

Program Characteristics:

Program Description

Summary: The Library is committed to digital equity and inclusion to increase access to equipment, the internet, and tech help. Library IT Services defines and develops technology solutions that align with patron and staff needs and support Library priorities. Many public computer users have no access to a computer or high-speed internet at home. Children and adults use Library computers and tablets to communicate, do research, complete homework, apply for jobs, find things to read, and participate in social media. Public computers provide office software to accomplish schoolwork and personal and business work. IT Services also offers computers, software, and audiovisual solutions in community rooms.

Program activity: 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. IT Services makes the library catalog available for users to search for 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. IT Services also regularly maintains more than 700 computers, plus equipment and software for Library staff.

IT Services supports and enables critical computing systems including the Library catalog; patron accounts; circulation system; materials acquisition system; electronic resources; and other internal operations. Due to bond-related openings in the coming year, IT Services will support disconnecting, moving, storing, refreshing, acquiring, configuring, and installing many of the public computers, staff computers, and related equipment.

Equity Statement

The Library supports digital equity for “full participation in our society, democracy and economy,” and “civic and cultural participation, employment, lifelong learning, and access to essential services” (National Digital Inclusion Alliance). A Digital Inclusion Coordinator provides training and Chromebook “Tech Lending,” using targeted strategies to reach community members most impacted by access needs and digital inequities.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$1,161,720	$0	$1,238,872
Contractual Services	$0	$311,245	$0	$428,852
Materials & Supplies	$0	$1,784,231	$0	$1,031,818
Internal Services	$0	$9,652,548	$0	$9,913,491
Total GF/non-GF	**$0**	**$12,909,744**	**$0**	**$12,613,033**
Total Expenses:	**$12,909,744**		**$12,613,033**	
Program FTE	0.00	5.00	0.00	5.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of public computer sessions	352,166	390,00	415,000
Number of devices using Library wi-fi	1,199,674	1,330,000	1,390,000

Division: Department Administration

Program Characteristics:

Program Description

Summary: The Marketing and Communications (Marcom) program is essential for enhancing the Library's public image, brand identity, and community engagement through comprehensive strategies. Marcom is committed to equity, centering its work on historically underserved and oppressed communities in line with the Library's service priorities. It ensures broad access by developing multilingual communications in five languages (English, Spanish, Russian, Vietnamese, and Chinese), connecting diverse cultural groups to Library collections, programs, and resources. Marcom continually evaluates the best way to reach the community where they receive their information to effectively share the Library's community impact, resources, programs, and services. This work increases engagement and participation and raises overall awareness of the Library's vital role in providing educational and cultural resources for all community members.

Program activity: Marcom develops integrated marketing and communications strategies to manage and strengthen the Multnomah County Library brand and community relationships. It engages the community through printed materials, wayfinding and promotional signage, advertising, and multiple digital channels including social media, website content, and email marketing. It develops resources to promote Library services, programs, and features. Marcom provides critical guidance and input into systemwide strategic decisions and manages public relations and relationships with the news media. It provides fiscal accountability to the public, communicates about the evolution of Library services and resources, and advances the Library’s priorities with Library staff and the community.

Equity Statement

Marketing and Communications (Marcom) uses the County’s Community Opportunity Map (layers of statistical demographic measures) and cultural- and language-specific resources to engage diverse communities in ways that are relevant. Marcom also partners with Knowledge, Skills, and Abilities staff to understand community needs and best practices for connecting communities to the Library.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$2,042,206	$0	$2,059,637
Contractual Services	$0	$100,006	$0	$90,000
Materials & Supplies	$0	$148,560	$0	$157,000
Internal Services	$0	$89,784	$0	$82,015
Total GF/non-GF	**$0**	**$2,380,556**	**$0**	**$2,388,652**
Total Expenses:	**$2,380,556**		**$2,388,652**	
Program FTE	0.00	11.50	0.00	11.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of social media followers	59,323	65,000	67,000
Number of Multcolib.org home page visits	2,078,287	2,100,000	2,200,000

Division: Department Administration

Program Characteristics:

Program Description

Summary: Library Building Bond Administration (Bond Administration) supports the Library's vision for capital construction projects through collaboration with Bond Administration program management staff. This program represents the Library staff positions that support the Capital Bond program's administration in collaboration with the Department of County Assets (DCA). Most of the Library Capital Bond expenses are budgeted in DCA; these positions are funded by the Multnomah County Library Capital Construction Fund.

Program activity:
- Provides coordination and liaison support between the Library and the Bond Project Management Office
- Advocates for building project design development decisions that will work for the Library and patrons
- Represents Library needs during major projects and smaller refresh work
- Supports Library opening and closing activities
- Oversees extensive Capital Bond community outreach
- Supports Capital Bond program communication and media engagement
- Coordinates with Regional Arts and Culture Council and other key partners

Equity Statement

Library Building Bond Administration (Bond Administration) centers diversity, equity, and inclusion. The Library's Capital Planning Project Principles and Community Engagement Ethos emphasize hearing from the community and elevating the voices of those often left out of the conversation. Bond Administration works closely with each project team to ensure parity in communications, language support at events, and it documents the impact of community engagement on projects.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	$0	$0
Internal Services	$0	$0	$0	$0
Total GF/non-GF	**$0**	**$0**	**$0**	**$0**
Total Expenses:	**$0**		**$0**	
Program FTE	0.00	6.00	0.00	6.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of public presentations, community listening sessions, and community events supporting current bond projects	30	10	2
Number of projects completed	3	3	2

Division: Department Administration

Program Characteristics: One-Time-Only Request

Program Description

Summary: The Library Special Projects program offer funds discrete operating projects and other one-time-only spending that is not considered part of the Library's regular ongoing operating budget. The Library uses fund balance for discrete single or multiyear projects, and to fund temporary staff capacity needs in alignment with Library District financial policy. These costs are reflected in a single program offer in order to clearly specify the use of one-time-only Library funds to support these different initiatives.

Program activity:
• Supports temporary, or pop-up, Library locations during bond-related closures
• Supports interim flex and storage space at the Macadam Building
• Manages interim collections storage with external vendors
• Closes out short-term building costs for leased locations not used for Library purposes (Thurman Building)
• Funds limited duration positions for short-term projects to mitigate workload spikes or assess new models of service
• Plans for staff technology needs in new larger buildings in tandem with bond-funded patron-facing technology
• Funds opening day celebrations at major bond project openings
• Provides pass-through funding from The Library Foundation for children's play structures at major bond projects
• Provides funds for operating projects and other periodic initiatives like large systemwide strategic planning efforts

Equity Statement

The Library Special Projects program offer is the Library's funding mechanism for one-time-only spending, separate from ongoing program support. The Library prioritizes equity in its discretionary one-time-only funding decisions. For example, the strategic planning initiative funded in FY 2027 will include deep engagement with communities of focus to inform goal-setting and strategy development for future years.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$2,725,448	$0	$2,137,311
Contractual Services	$0	$544,602	$0	$239,158
Materials & Supplies	$0	$144,703	$0	$90,300
Internal Services	$0	$1,414,045	$0	$1,436,157
Capital Outlay	$0	$1,467,500	$0	$350,000
Total GF/non-GF	**$0**	**$6,296,298**	**$0**	**$4,252,926**
Total Expenses:	**$6,296,298**		**$4,252,926**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$6,296,298	$0	$4,252,926
Total Revenue	**$0**	**$6,296,298**	**$0**	**$4,252,926**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of temporary Library spaces open during the year	3	3	2
Percent of warehouse space utilized (square feet)	90%	80%	65%

Library Public Services Division

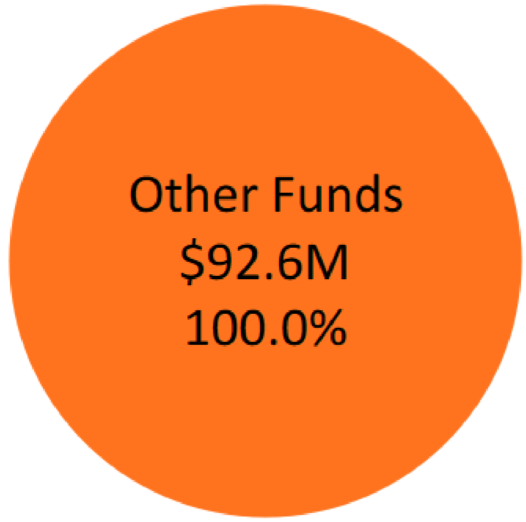
$92.6 million

Total Adopted Budget

Including cash transfers, contingencies, and unappropriated balances.

473.55 FTE

(full time equivalent)



The Public Services division is responsible for delivering library services directly to patrons in library spaces and in the community. This division manages daily library operations, including direct patron support, circulation, reference, and public technology access. It also develops and implements programming, engagement, and outreach, focusing on literacy, educational events, services for homebound patrons, and community partnerships. Public Services oversees the selection, acquisition, cataloging, processing, and maintenance of the Library's large physical and digital collections. Division leadership also oversees security and staffing levels for all public services.

The Public Services Division serves as the primary interface between the Library and the community, directly delivering a comprehensive array of essential library services both within the physical branch locations and through robust community outreach initiatives. This division is organized into work units that are responsible for managing the day-to-day operational excellence of all public-facing library functions as follows.

Library operations and customer service: Location Services oversees the management of daily library operations, including direct patron support and ensuring a welcoming and accessible environment for all visitors. This includes overseeing the high-volume processes of circulation at each library location, which involves the check-out, check-in, and management of lending materials. Location Services also provides essential reference services, offering expert assistance to patrons conducting research, seeking information, and navigating the vast resources available. Location Services staff also ensure equitable public access to essential technology, facilitating access to computer workstations, wi-fi networks, printing, and digital resource instruction.

Community engagement, programming, and outreach: A key strategic function of the Community Engagement and Partnerships program is the development and implementation of dynamic programming, community engagement, and targeted outreach efforts. These initiatives are strategically designed to promote key organizational goals, with a significant focus on literacy for all ages—from early childhood to adult literacy programs. The program hosts a diverse calendar of educational events, workshops, and cultural programming that enriches the intellectual life of the community. A specialized component of this outreach is the provision of services for people who cannot access the Library’s physical spaces. Strategic community partnerships are actively sought and maintained to maximize the Library's reach and impact, collaborating with schools, non-profits, and other local organizations.

Collection management and access: Integrated Library Services manages the Library's extensive collection, including both physical and digital materials. This includes the careful selection and acquisition of new materials to ensure the collection remains relevant, diverse, and responsive to community needs. After materials are acquired, they undergo cataloging and processing to make them shelf-ready. This work includes the ongoing maintenance of the entire collection to ensure its usability and longevity. Comprehensive collection management ensures that the public has seamless access to a wide array of information and materials.

Division management and infrastructure: Underpinning these public-facing services are essential management functions that ensure the efficiency of all operations while also creating safe and welcoming public spaces. Public Services Division Management is directly responsible for overseeing security protocols and managing staffing levels across all public service points. This oversight is critical for maintaining a secure and welcoming environment for both staff and patrons, ensuring that adequate personnel are available to deliver high-quality service, manage complex operational demands, and respond effectively to any incidents or emergencies.

Significant Division Changes

There are several significant changes that have been implemented in the past year to prepare the Library for reopening of all 19 locations in FY 2027.

Launching a modernized library system

In FY 2027, the Library will present the community with a modernized library system. All libraries will be back online and operating at full capacity for the first time since FY 2023. With the modernization comes new spaces and new technology, features that will be fully tested upon implementation, including:

- Opening East County Library with new amenities including: Audio-visual Studio, Creative Learning Space, Auditorium and Rooftop spaces.
- The automated materials handling system and new materials management software will be fully implemented across the library system.

At the same time the Library is introducing unique spaces and services, it will be operationalizing the Future Staffing Plan - first introduced as part of FY 2026 budget planning - in preparation for all 19 new and expanded library locations to open during FY 2027. The staffing plan is built on the foundation of MCL's Service Statement and Priorities, and is informed by an updated methodology to calculate staffing requirements for service point coverage across all public service locations. The staffing plan serves as the Library's guide for ensuring adequate staffing for its new library spaces and services, and has carried forward into the FY 2027 budget.

Future Staffing Plan Updates

- Several library outreach specialists who previously provided services in the community outside of library spaces are reassigned to East County Library where their expertise and skills will support creative learning programming.

- Several Access Services Assistants that were assigned to East County Library will instead remain at Central Library to support materials movement capacity.

- A Program Specialist Sr. position is re-established as a Librarian to better support patron needs at East County Library, and an East County Librarian position is reclassified as a Supervisor to better support person-in-charge coverage at East County Library.

- Several library positions with specific skill designations are reassigned across the system to better align with community needs or organizational capacity.

Office of Project Management and Evaluation Transition
The Office of Project Management and Evaluation team provides project management support to major system wide initiatives, as well as evaluative and analytical support to the library. This team transitioned from the Public Services Division Management program offer (80022) in the Public Services Division to the Library Director's Office program offer (80010) in the FY 2027 budget, with associated FTE and budget transfers.

Significant Budget Changes

- **Staffing Realignment to Support Public Services:** A staffing reallocation package adds 3.50 FTE Access Services Assistants in the Sort Center (80020). Based on a recent time study, these entry level Public Services positions are required to support the holds, sort, materials movement, and processing functions for the centralized floating collection at the Operations Center. The cost for these positions is offset by reducing administration support positions.
- **Security:** Transitioning Central Library overnight security and alarm monitoring to Security Operations Center (80022) and using the enhanced building alarm functionality and existing patrol resources will allow the Library to reduce overnight contracted security officer coverage and still meet operational needs, based on data from Workplace Security. With the transition to patrol and alarm monitoring, the Library will retain two guards to be on site 4-6 hours before open and 4 hours after closing from May to September. Open hours guard coverage will be set to five guards per open hour, seven days a week. This change will reduce the Library's security budget by $330,307.
- **E-Book reduction:** This change will lower the Library's book budget (80020) by $350,000 to capture the higher-than-assumed cost savings that resulted from the FY 2026 change in the maximum number of e-book holds from twenty to ten.
- **Substitute staffing:** At the same time the Library is introducing unique spaces and services, it will be operationalizing its new staffing plan, including a new approach to substitute staffing. For the past several years, there has been some flexibility with staffing due to multiple locations being closed for upgrades or construction. The ability to be flexible with staff assignments based on operational needs will end in FY 2027. A new Location Substitute Staffing Team (LSST) was designed to allow libraries to meet minimum staffing requirements and continue operating without interruption, even with same-day absences. The FY 2027 budget (80022) reflects an overall reduction to the substitute staffing budget of $0.6 million, and a change to centralize the location services substitute staff budget to monitor it more effectively.

Library Public Services Division Outcomes

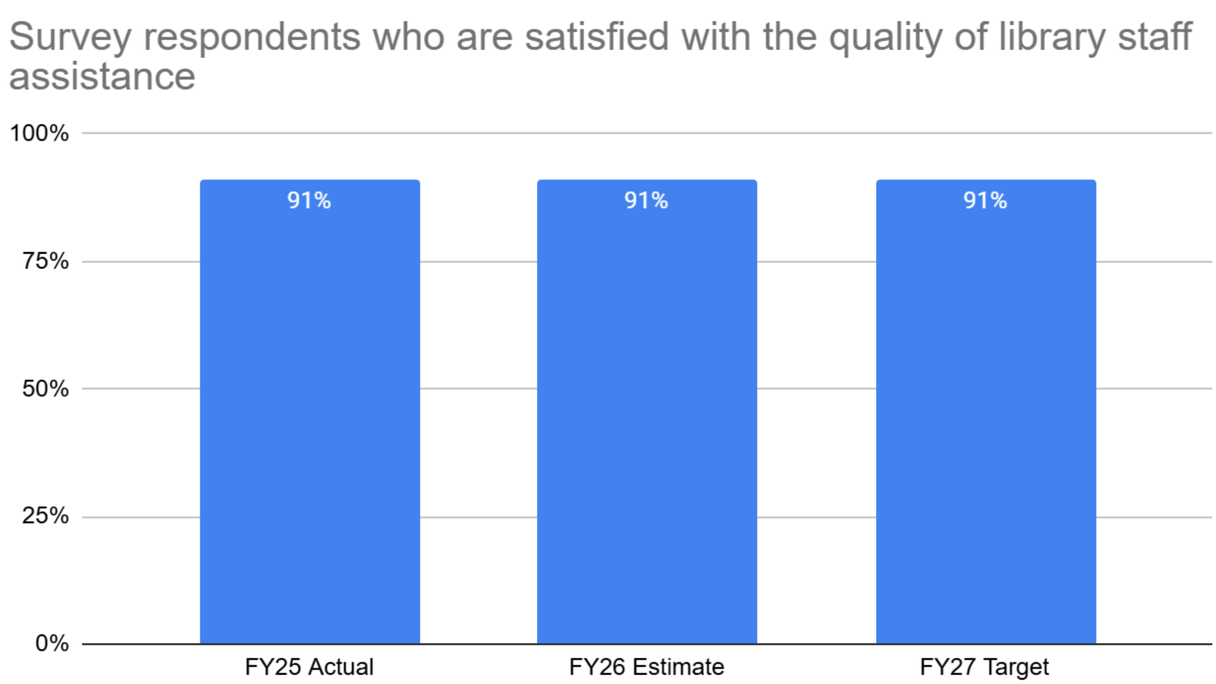
1. Community members have positive experiences with library staff, spaces, materials, and services.

Multnomah County Library strives to ensure productive and helpful experiences for community members with library staff, spaces, materials, and services.

Key Performance Indicator (KPI) 1.1: Percent of survey respondents who report overall satisfaction with the library. *In some cases, the Library uses the same KPIs for both divisions. See page 17 for additional detail on this KPI.

Key Performance Indicator (KPI) 1.2: Percent of survey respondents who are satisfied with the quality of library staff assistance.

KPI 1.2 Description: Satisfaction with staff assistance is measured through the library's biennial Patron Survey, and indicates how the library is performing in terms of users having positive experiences.



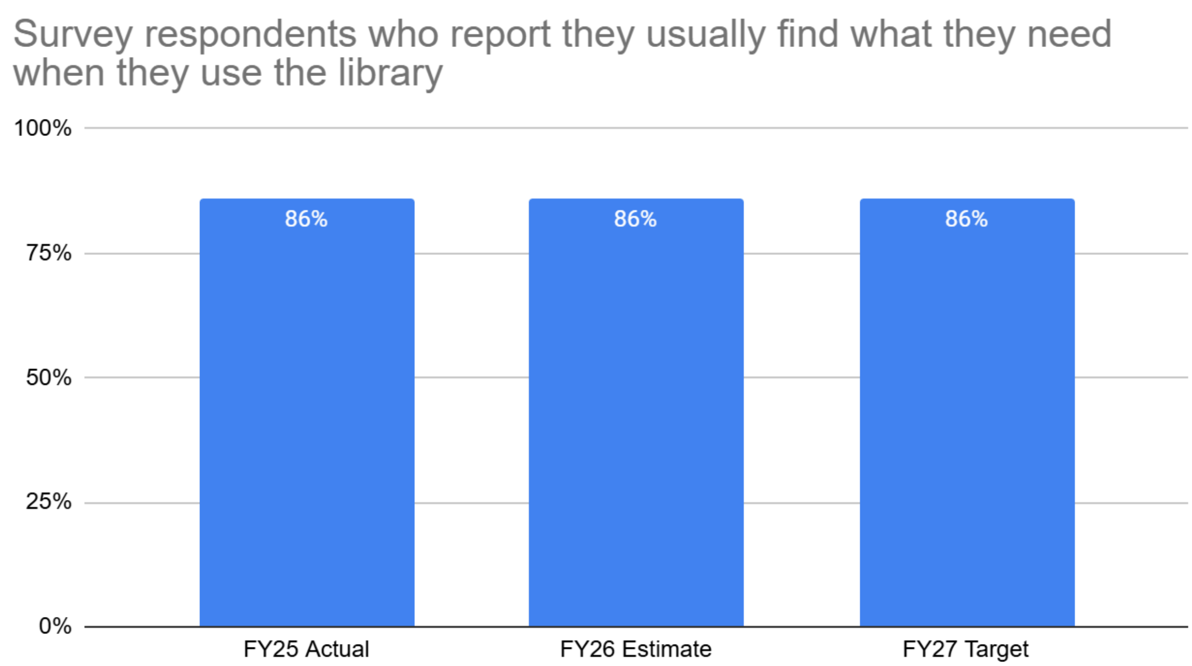
FY 2026 Estimate: 91%	**FY 2027 Target:** 91%

KPI 1.2 Equity Considerations: Survey respondents have historically trended older and less diverse than the community at large, so the Library intentionally seeks engagement from communities of focus and

makes the survey available in multiple service languages. Survey responses are analyzed for differences by groups, specifically by race, ethnicity, place of origin, and cultural identity. In order to support more in-depth understanding and insight into the patron experience, the Library also conducts a story-based patron input project that oversamples from communities of focus. This qualitative survey is performed on alternating years with the quantitative survey.

Key Performance Indicator (KPI) 1.3: Percent of survey respondents who report they usually find what they need when they use the library.

KPI 1.3 Description: Access to the materials and services library users need is a measure of "how well did we do it?". This KPI indicates how well-matched to community needs and how accessible the library's collections and services are. Data source: Patron Survey.



FY 2026 Estimate: 86%	**FY 2027 Target:** 86%

KPI 1.3 Equity Considerations: Survey respondents have historically trended older and less diverse than the community at large, so the Library intentionally seeks engagement from communities of focus and makes the survey available in multiple service languages. Survey responses are analyzed for differences by groups, specifically by race, ethnicity, place of origin, and cultural identity. In order to support more in-depth understanding and insight into the patron experience, the Library also conducts a story-based patron input project that oversamples from communities of focus. This qualitative survey is performed on alternating years with the quantitative survey.

Outcome 1 Program Offers The following program offers contribute to Outcome 1.

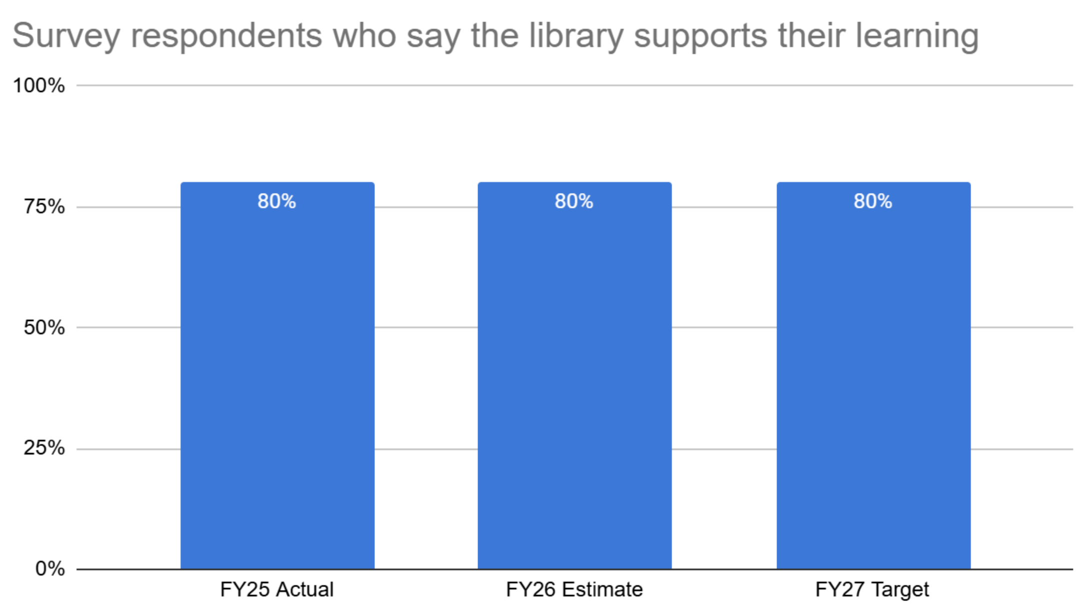
- 80001 - Central Library
- 80002 - North and Northeast County Libraries
- 80003 - West and South County Libraries
- 80004 - Mid County Libraries
- 80005 - East County Libraries
- 80007 - Community Information
- 80020 - Integrated Library Services
- 80023 - Community Engagement and Partnerships

2. Community members will have access to public, popular and personal opportunities for lifelong learning, contributing to improved educational outcomes for learners of all ages.

Multnomah County Library provides a wide range of materials, spaces, events and classes designed to realize the Library's mission of "empowering the community to learn and create."

Key Performance Indicator (KPI) 2.1: Percent of survey respondents who say the library supports their learning.

KPI 2.1 Description: Indicates how well the library is doing in terms of providing tools and support for patrons' learning goals. Source data: Patron Survey.

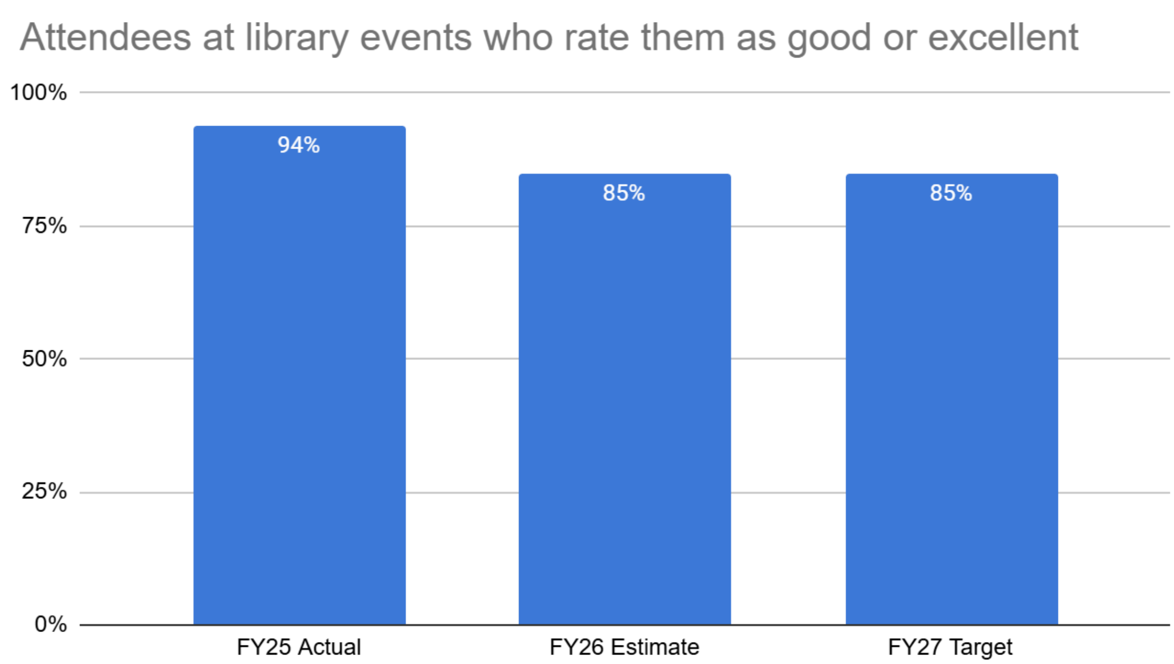


FY 2026 Estimate: 80%	**FY 2027 Target:** 80%

KPI 2.1 Equity Considerations: Survey respondents to the patron survey have historically trended older and less diverse than the community at large, so the Library intentionally seeks engagement from communities of focus and makes the survey available in multiple service languages. Survey responses are analyzed for differences by groups, specifically by race, ethnicity, place of origin, and cultural identity. In order to support more in-depth understanding and insight into the patron experience, the Library also conducts a story-based patron input project that oversamples from communities of focus. This qualitative survey is performed on alternating years with the quantitative survey.

Key Performance Indicator (KPI) 2.2: Percent of attendees at library events who rate them as good or excellent.

KPI 2.2 Description: Indicates how well the library is doing in terms of providing high-quality programming that community members value.



FY 2026 Estimate: 85%	**FY 2027 Target:** 85%

KPI 2.2 Equity Considerations: Specific demographic information is not collected for this survey. Event or topic specific feedback can be assessed and evaluated over time for improvement. Qualitative feedback from patrons and library language and cultural teams can help inform changes to event types.

Key Performance Indicator (KPI) 2.3: Percent of participants in the Library's Every Child a Reader Program who report an increase in reading at home

KPI 2.3 Description: Indicates how well the library's Every Child a Reader Program is doing in terms of supporting increased reading at home for families with young children.

FY 2026 Estimate: N/A	**FY 2027 Target:** 66%

The impact and performance of this program is evaluated by external evaluation and researchers. This metric has not been reported consecutively over time, as multiple alternate years are focused on qualitative evaluations. Beginning in FY 2027 this metric will be reported annually.

KPI 2.3 Equity Considerations: Specific demographic information is not collected for program participants. The Library works with special community partners, such as Head Start, Oregon Child Development Coalition, Multnomah Early Childhood Program to implement this program. The Every Child a Reader literacy presentations are offered in English, Spanish, Chinese, Vietnamese, or Russian. Notably, 41% of FY 2024 parent survey respondents speak two or more languages.

Outcome 2 Program Offers The following program offers contribute to Outcome 2.

- 80006 - Youth Development
- 80026 - Library Events and Reader Services

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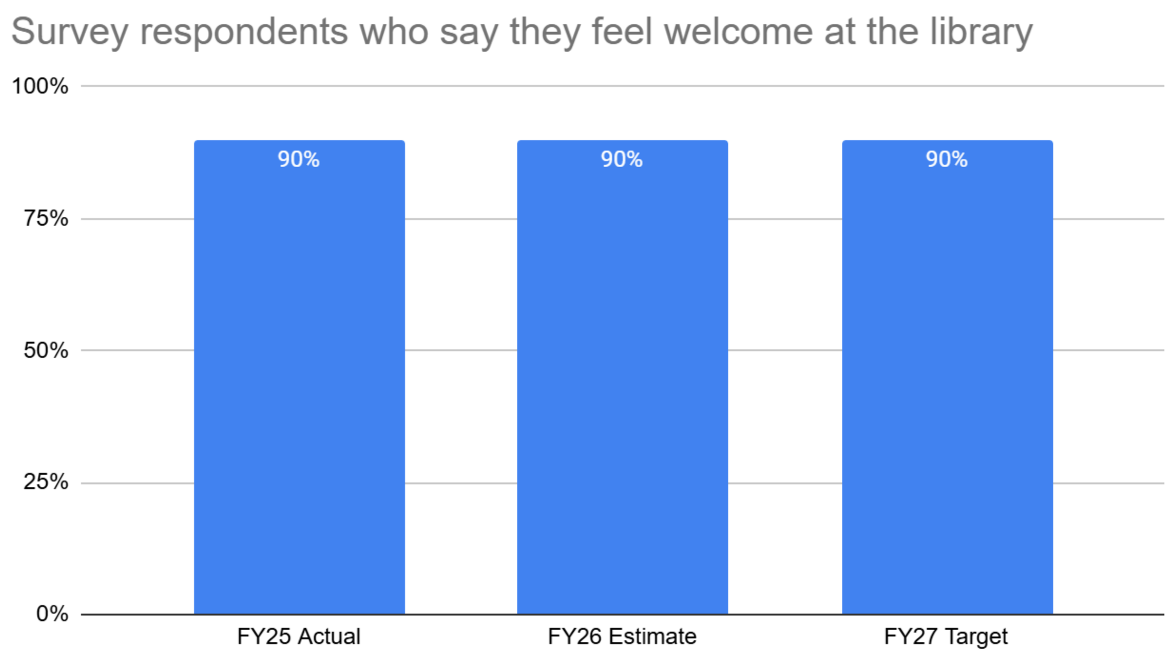
3. Community members will experience respectful and welcoming spaces that reflect our diverse and multicultural community.

Multnomah County Library strives to serve everyone, especially those that experience the greatest barriers. Library spaces and services are designed to welcome, reflect, and center the community.

Key Performance Indicator (KPI) 3.1: Percent of survey respondents who say they feel welcome at the library.

KPI 3.1 Description: Indicates how well the library is doing in terms of providing a welcoming environment. Source data: Patron survey.

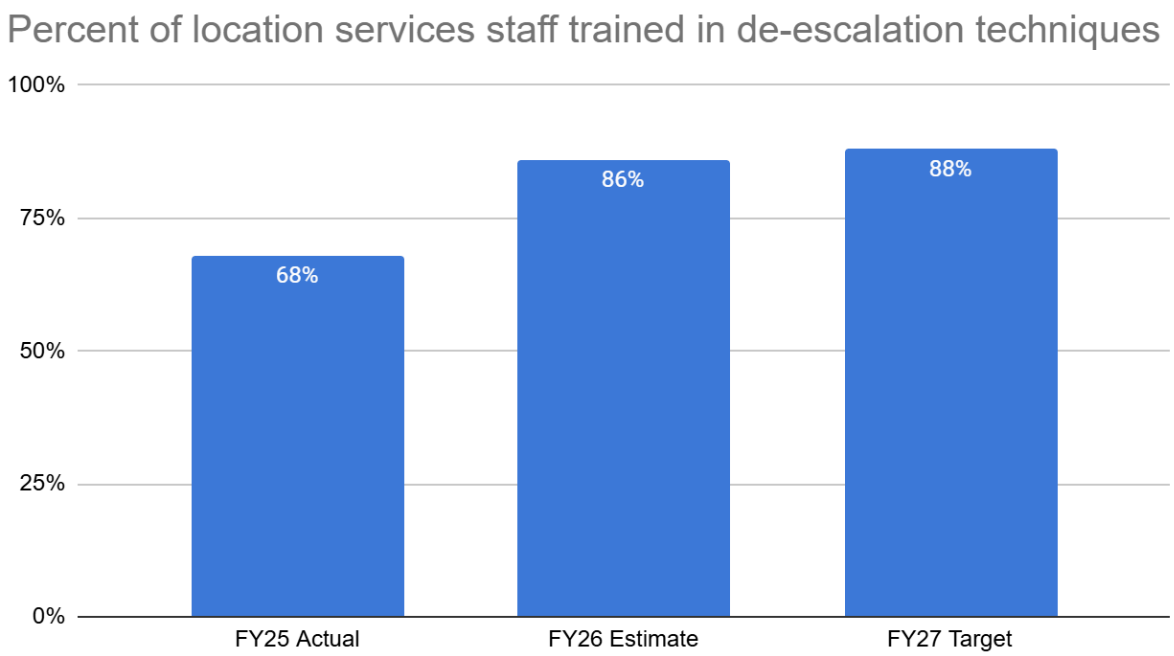


FY 2026 Estimate: 90%	**FY 2027 Target:** 90%

KPI 3.1 Equity Considerations: Survey respondents have historically trended older and less diverse than the community at large, so the Library intentionally seeks engagement from communities of focus and makes the survey available in multiple service languages. Survey responses are analyzed for differences by groups, specifically by race, ethnicity, place of origin, and cultural identity. In order to support more in-depth understanding and insight into the patron experience, the Library also conducts a story-based patron input project that oversamples from communities of focus. This qualitative survey is performed on alternating years with the quantitative survey.

Key Performance Indicator (KPI) 3.2: Percent of location services staff trained in de-escalation techniques.

KPI 3.2 Description: Indicates the proportion of library location staff who are specifically trained in de-escalation strategies, and is a key measure of environment management in library spaces.

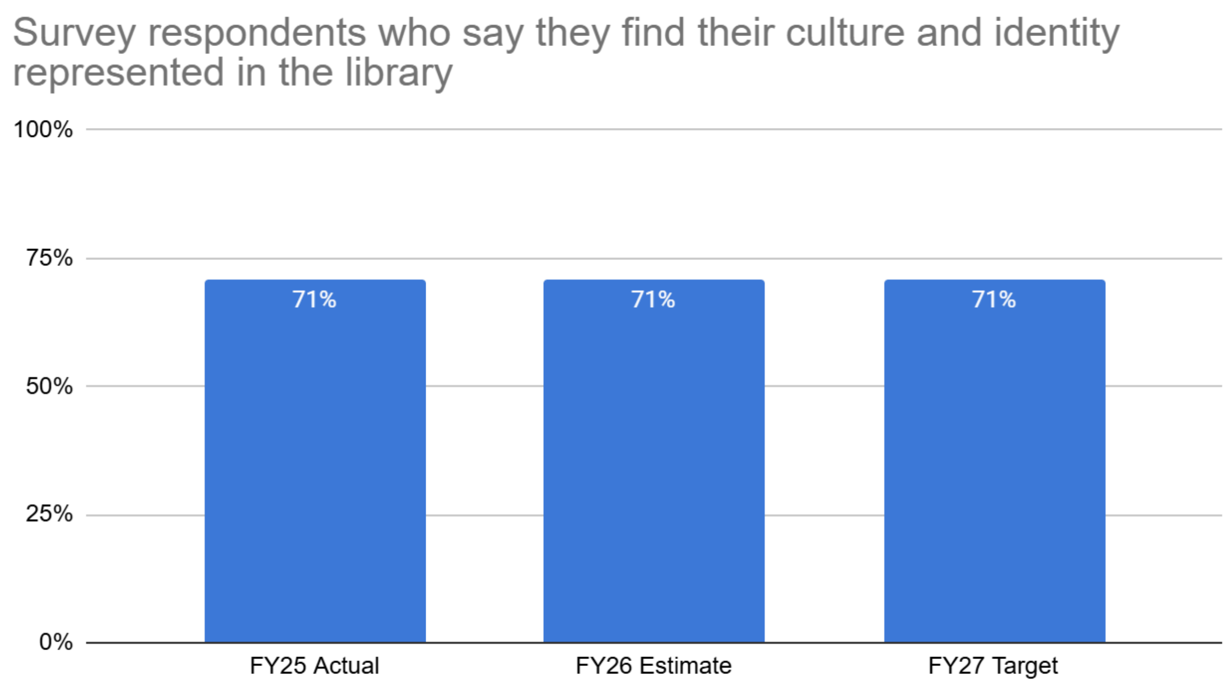


FY 2026 Estimate: 86%	**FY 2027 Target:** 88%

KPI 3.2 Equity Considerations: The Library's de-escalation training incorporates aspects of cultural awareness in responding to situations. This training provides staff with a foundation of cultural awareness as well as supporting staff to feel better equipped to handle stressful situations. When individuals feel better prepared and have increased confidence, they may be increasingly able to recognize biases and adjust their interactions through a more culturally attuned lens.

Key Performance Indicator (KPI) 3.3: Percent of survey respondents who say they find their culture and identity represented in the library

KPI 3.3 Description: Indicates how well the Library is doing in terms of a range of resources and services that reflect our diverse community and meet their needs. Data source: Patron Survey.

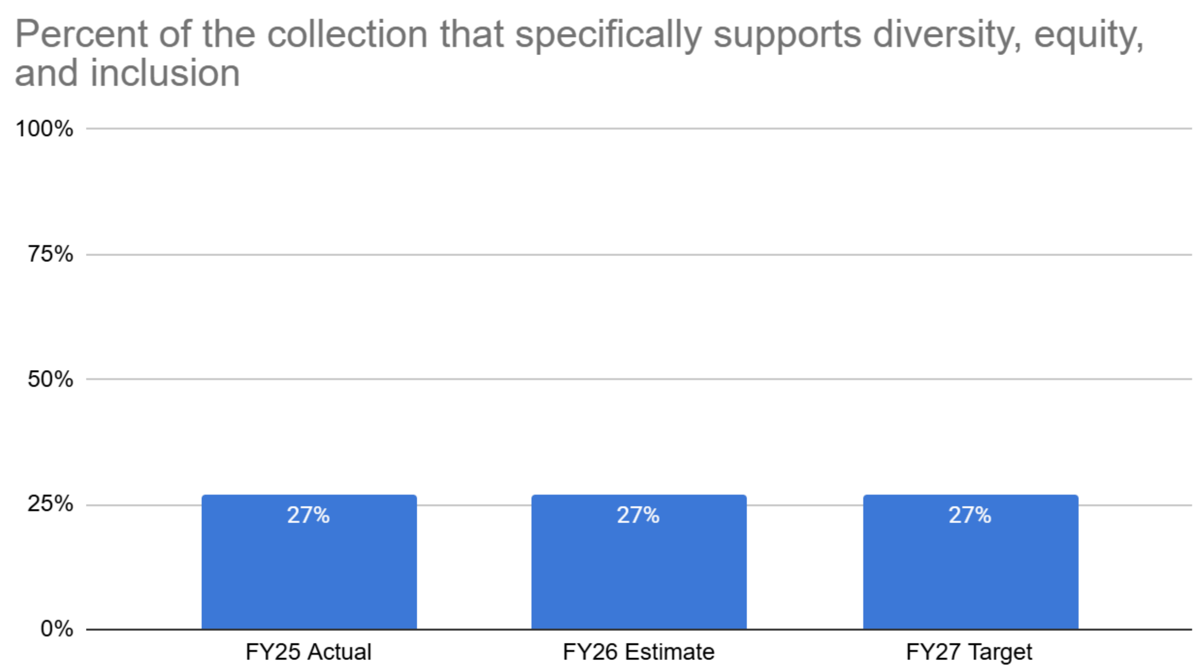


FY 2026 Estimate: 71%	**FY 2027 Target:** 71%

KPI 3.3 Equity Considerations: Survey respondents have historically trended older and less diverse than the community at large, so the Library intentionally seeks engagement from communities of focus and makes the survey available in multiple service languages. Survey responses are analyzed for differences by groups, specifically by race, ethnicity, place of origin, and cultural identity. In order to support more in-depth understanding and insight into the patron experience, the Library also conducts a story-based patron input project that oversamples from communities of focus. This qualitative survey is performed on alternating years with the quantitative survey.

Key Performance Indicator (KPI) 3.4: Percent of the collection that supports diversity, equity, and inclusion

KPI 3.4 Description: Indicates the proportion of the library collection that specifically supports diversity, equity and inclusion, as measured by titles included in various library industry standard lists and measurement services. These measurements generally track the diversity of language and cultural representation in library collections.



FY 2026 Estimate: 27%	**FY 2027 Target:** 27%

KPI 3.4 Equity Considerations: The library uses collection management software that categorizes items that are tagged as DEI. This is a common industry benchmark for large library systems, and measures our relative DEI collection over time and across physical and digital collections. The library book budget allocates specific resources for diverse book purchases, which includes collections in multiple languages (Spanish, Chinese, Russian, Vietnamese, Arabic, French, German, Japanese, Somali, Ukrainian), Black resource collections, and Indigenous collections.

Outcome 3 Program Offers The following program offers contribute to Outcome 3.

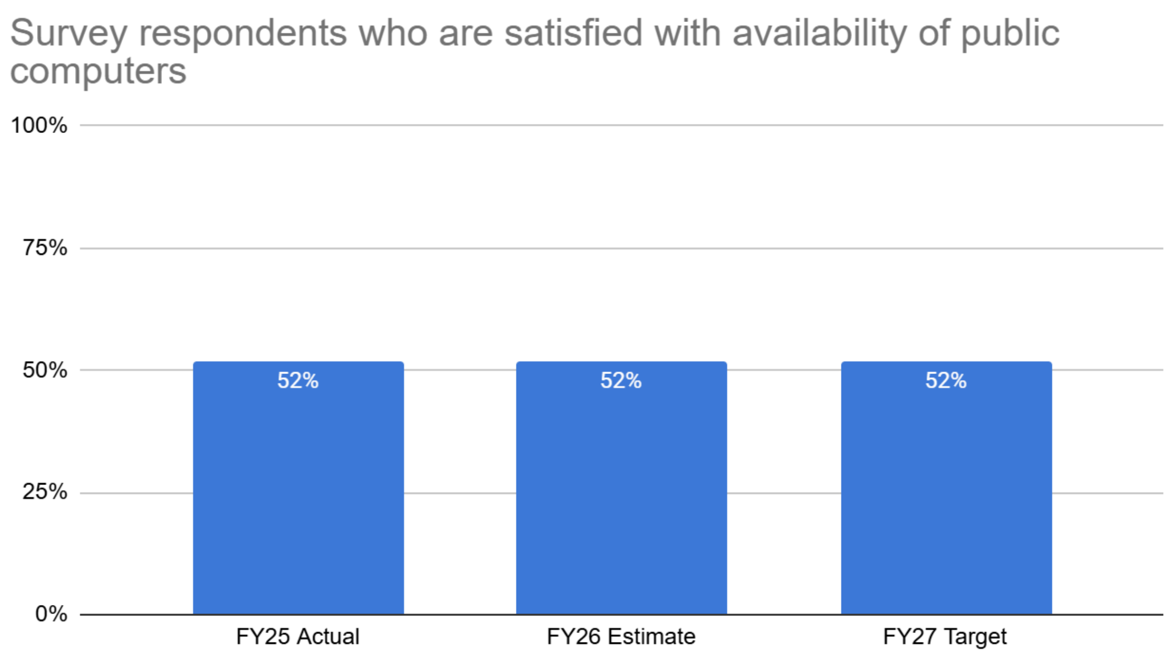
- 80020 - Integrated Library Services
- 80022 - Public Services Division Management

4. Community members have access to technology assistance, computers, equipment, and internet services to use and create using technology.

By providing public computer access and free technology training events and initiatives, Multnomah County Library helps community members access and learn to use technology to remove digital barriers.

Key Performance Indicator (KPI) 4.1: Percent of survey respondents satisfied with availability of public computers.

KPI 4.1 Description: Indicates user satisfaction with the availability of public computers across 19 locations. Source data: Patron survey.

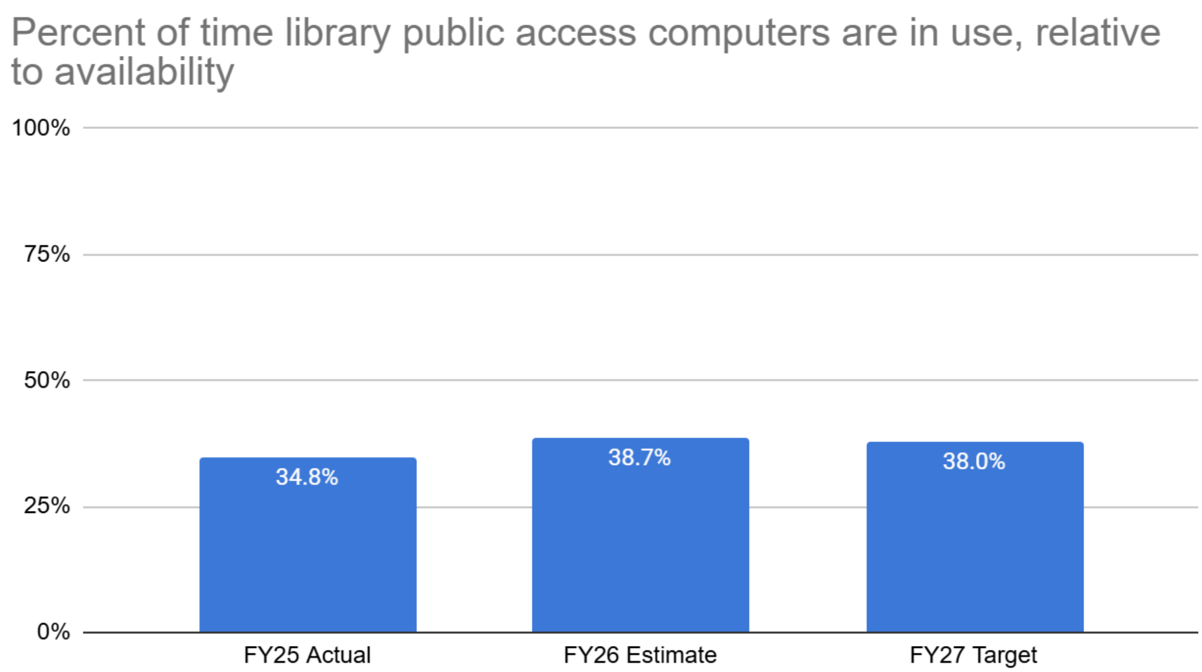


FY 2026 Estimate: 52%	**FY 2027 Target:** 52%

KPI 4.1 Equity Considerations: Survey respondents have historically trended older and less diverse than the community at large, so the library intentionally seeks engagement from communities of focus and makes the survey available in multiple service languages. Survey responses are analyzed for differences by groups, specifically by race, ethnicity, place of origin, and cultural identity. In order to support more in-depth understanding and insight into the patron experience, the library also conducts a story-based patron input project that oversamples from communities of focus. This qualitative survey is performed on alternating years with the quantitative survey.

Key Performance Indicator (KPI) 4.2: Percent of time library public access computers are in use, relative to availability

KPI 4.2 Description: Indicates how well the library is doing in terms of meeting the need for free access to computers.

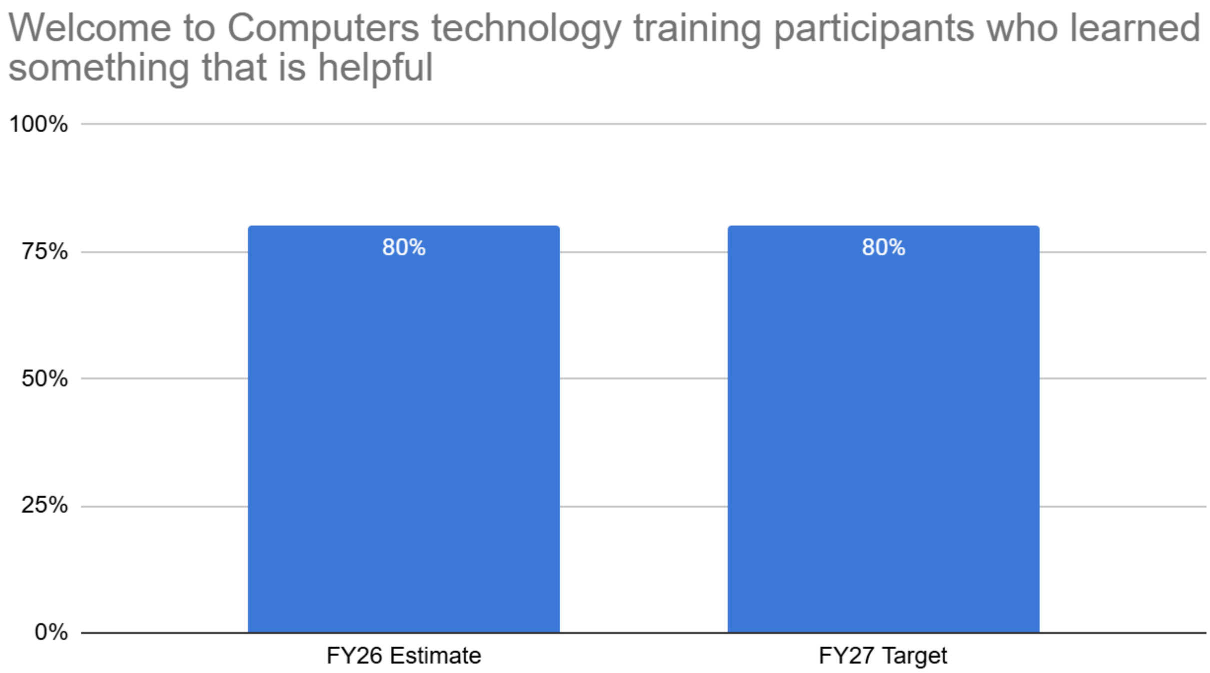


FY 2026 Estimate: 38.7%	**FY 2027 Target:** 38%

KPI 4.2 Equity Considerations: This measure is a calculation of time patrons spend on computers compared to total time that computers are available. No patron-specific data is evaluated as part of this measure. In the future, a geographic breakdown of utilization could be possible, which can be overlaid with community profiles for different library zones.

Key Performance Indicator (KPI) 4.3: Percent of Welcome to Computers technology training participants who learned something that is helpful

KPI 4.3 Description: Indicates the effectiveness of the Welcome to Computers technology series, offering device access and education, with topics ranging from typing and mousing skills to internet safety and email basics. The Welcome to Computers series is offered multiple times per year.



FY 2026 Estimate: 80%	**FY 2027 Target:** 80%

KPI 4.3 Equity Considerations: The purpose of this training is to help bridge the digital divide and promote digital equity by building basic skills and comfort levels for patrons who are new to computers. Demographic data is not requested from patrons who participate in this training. This program is provided in Spanish as well as English.

Outcome 4 Program Offers The following program offers contribute to Outcome 4.

- 80018 - IT Services
- 80026 - Library Events and Reader Services

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	Total FTE
Public Services Division						
80001	Central Library		0	10,855,193	10,855,193	64.25
80002	North and Northeast County Libraries		0	11,898,115	11,898,115	72.25
80003	West and South County Libraries		0	10,758,154	10,758,154	64.25
80004	Mid County Libraries		0	11,269,238	11,269,238	67.50
80005	East County Libraries		0	11,806,583	11,806,583	67.25
80006	Youth Development		0	1,899,148	1,899,148	7.75
80007	Community Information		0	2,067,579	2,067,579	14.50
80020	Integrated Library Services		0	17,472,153	17,472,153	56.25
80022	Public Services Division Management		0	8,177,990	8,177,990	31.00
80023	Community Engagement and Partnerships		0	2,407,900	2,407,900	10.00
80026	Library Events and Reader Services		0	3,948,212	3,948,212	18.55
	Total Public Services Division		**0**	**92,560,265**	**92,560,265**	**473.55**

Division: Public Services

Program Characteristics:

Program Description

Summary: Central Library provides information services and staff support seven days a week, offering collections, space to gather, publicly accessible computers, public wi-fi, and support for programming and events. Central Library embodies Multnomah County Library values by providing equitable and inclusive spaces and services, including culturally relevant outreach to Black, Indigenous, LGBTQIA+, Chinese, and Spanish-speaking users.

Program activity: Core activities focus on identified needs such as technology access and assistance, collection access, information access, and material pickup. Services are culturally and language-specific, including storytimes, youth literacy, and adult classes (ESL, citizenship, computer use, and technology training).

Central Library's language and educational programs improve employment and quality of life for those with low English proficiency and limited resources. Staff prioritize critical life skill development and digital literacy through services like tech access, one-on-one tech help, job search assistance, literacy resources, and classes for youth and adults. Dedicated resources support mental health and peer support specialists for patrons via a contracted provider.

Equity Statement

This Library program commits to dismantling systemic inequities through open, barrier-free access and equitable service delivery at all locations. The Library allocates resources and designs services to serve all community members, especially those who have been historically marginalized.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$7,481,762	$0	$8,366,191
Contractual Services	$0	$308,767	$0	$316,881
Materials & Supplies	$0	$77,296	$0	$69,950
Internal Services	$0	$2,023,092	$0	$2,102,171
Total GF/non-GF	**$0**	**$9,890,917**	**$0**	**$10,855,193**
Total Expenses:	**$9,890,917**		**$10,855,193**	
Program FTE	0.00	59.50	0.00	64.25
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of Library visits	415,350	414,000	414,000
Circulation (checkouts and renewals)	841,651	850,000	850,000

Division: Public Services

Program Characteristics:

Program Description

Summary: North and Northeast County libraries (Albina, Hollywood, Kenton, North Portland, and St. Johns) provide information services and staff support seven days a week, offering collections, space to gather, publicly accessible computers, public wi-fi, and support for programming and events. These libraries embody Multnomah County Library values by providing equitable and inclusive spaces and services, including culturally relevant outreach to Black, Indigenous, LGBTQIA+, and Spanish-speaking users.

Program activity: Core activities focus on identified needs such as technology access and assistance, collection access, information access, and material pickup. Services are culturally and language-specific, including storytimes, youth literacy, and adult classes (ESL, citizenship, computer use, and technology training).

North and Northeast County libraries' language and educational programs improve employment and quality of life for those with low English proficiency and limited resources. Staff prioritize critical life skill development and digital literacy through services like technology access, one-on-one tech help, job search assistance, literacy resources, and classes for youth and adults.

By the end of FY 2027, all North and Northeast County locations will be open and will have been refreshed, renovated, or newly constructed.

Equity Statement

This Library program commits to dismantling systemic inequities through open, barrier-free access and equitable service delivery at all locations. The Library allocates resources and designs services to serve all community members, especially those who have been historically marginalized.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$8,834,174	$0	$9,602,407
Contractual Services	$0	$1,703	$0	$3,752
Materials & Supplies	$0	$106,603	$0	$131,896
Internal Services	$0	$1,527,351	$0	$2,160,060
Total GF/non-GF	**$0**	**$10,469,831**	**$0**	**$11,898,115**
Total Expenses:	**$10,469,831**		**$11,898,115**	
Program FTE	0.00	71.25	0.00	72.25
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of Library visits	455,714	560,000	630,000
Circulation (checkouts and renewals)	2,333,045	2,133,000	2,500,000

Division: Public Services

Program Characteristics:

Program Description

Summary: West and South County libraries (Belmont, Capitol Hill, Hillsdale, Northwest, and Sellwood-Moreland) provide information services and staff support seven days a week, offering collections, space to gather, publicly accessible computers, public wi-fi, and support for programming and events. These libraries embody Multnomah County Library values by providing equitable and inclusive spaces and services, including culturally relevant outreach to Black and Somali Library users.

Program activity: Core activities focus on identified needs such as technology access and assistance, collection access, information access, and material pickup. Services are culturally and language-specific, including storytimes, youth literacy, and adult classes (ESL, citizenship, computer use, and technology training). West and South libraries' language and educational programs improve employment and quality of life for those with low English proficiency and limited resources. Staff prioritize critical life skill development and digital literacy through services like tech access, one-on-one tech help, job search assistance, literacy resources, and classes for youth and adults. West and South County staff also support systemwide reference service through email and chat.

By the end of FY 2027, all West and South County locations will be open and will have been refreshed, renovated, or newly constructed.

Equity Statement

This Library program commits to dismantling systemic inequities through open, barrier-free access and equitable service delivery at all locations. The Library allocates resources and designs services to serve all community members, especially those who have been historically marginalized.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$7,863,162	$0	$8,826,960
Contractual Services	$0	$3,327	$0	$3,884
Materials & Supplies	$0	$82,546	$0	$76,800
Internal Services	$0	$1,729,597	$0	$1,850,510
Total GF/non-GF	**$0**	**$9,678,632**	**$0**	**$10,758,154**
Total Expenses:	**$9,678,632**		**$10,758,154**	
Program FTE	0.00	62.50	0.00	64.25
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of Library visits	409,337	367,000	540,000
Circulation (checkouts and renewals)	1,901,806	1,565,000	2,460,000

Division: Public Services

Program Characteristics:

Program Description

Summary: Mid County libraries (Gregory Heights, Holgate, Midland, and Woodstock) provide information services and staff support seven days a week, offering collections, space to gather, publicly accessible computers, public wi-fi, and support for programming and events. These libraries embody Multnomah County Library values by providing equitable and inclusive spaces and services, including culturally relevant outreach to Black, Indigenous, Vietnamese, Chinese, Russian, and Spanish-speaking users.

Program activity: Core activities focus on identified needs such as technology access and assistance, collection access, information access, and material pickup. Services are culturally and language-specific, including storytimes, youth literacy, and adult classes (ESL, citizenship, computer use, and technology training).

Mid County libraries' language and educational programs improve employment and quality of life for those with low English proficiency and limited resources. Staff prioritize critical life skill development and digital literacy through services like tech access, one-on-one tech help, job search assistance, literacy resources, and classes for youth and adults.

In FY 2027, all Mid County locations will be open and will have been refreshed, renovated, or newly constructed.

Equity Statement

This Library program commits to dismantling systemic inequities through open, barrier-free access and equitable service delivery at all locations. The Library allocates resources and designs services to serve all community members, especially those who have been historically marginalized.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$8,533,448	$0	$9,353,066
Contractual Services	$0	$3,592	$0	$3,186
Materials & Supplies	$0	$98,892	$0	$86,900
Internal Services	$0	$1,564,696	$0	$1,826,086
Total GF/non-GF	**$0**	**$10,200,628**	**$0**	**$11,269,238**
Total Expenses:	**$10,200,628**		**$11,269,238**	
Program FTE	0.00	66.50	0.00	67.50
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of Library visits	557,168	710,000	700,000
Circulation (checkouts and renewals)	2,378,342	2,800,000	2,800,000

Division: Public Services

Program Characteristics:

Program Description

Summary: East County libraries (East County Library, Fairview-Columbia, Rockwood, and Troutdale) provide information services and staff support seven days a week, offering collections, space to gather, publicly accessible computers, public wi-fi, and support for programming and events. These libraries embody Multnomah County Library values by providing equitable and inclusive spaces and services, including culturally relevant outreach to Black, Indigenous, Russian, and Spanish-speaking users.

Program activity: Core activities focus on identified needs such as technology access and assistance, collection access, information access and material pickup. Services are culturally and language-specific, including storytimes, youth literacy, and adult classes (ESL, citizenship, computer use, and technology training).

East County libraries' language and educational programs improve employment and quality of life for those with low English proficiency and limited resources. Staff prioritize critical life skill development and digital literacy through services like tech access, one-on-one tech help, job search assistance, literacy resources, and classes for youth and adults.

The new East County Library will be fully online in FY 2027. This location will be a 95,000 square foot space, which includes a 200+ seat auditorium; an AV studio and makerspace with specialized technology; multiple community rooms of different sizes; dedicated teen and family spaces; sensory rooms; outdoor spaces including a rooftop terrace; a 190,000-item collection; and a 23-bin automated materials handling sorting system.

Equity Statement

This Library program commits to dismantling systemic inequities through open, barrier-free access and equitable service delivery at all locations. The Library allocates resources and designs services to serve all community members, especially those who have been historically marginalized.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$9,430,920	$0	$9,331,546
Contractual Services	$0	$2,846	$0	$3,174
Materials & Supplies	$0	$121,413	$0	$87,830
Internal Services	$0	$1,690,997	$0	$2,384,033
Total GF/non-GF	**$0**	**$11,246,176**	**$0**	**$11,806,583**
Total Expenses:	**$11,246,176**		**$11,806,583**	
Program FTE	0.00	73.50	0.00	67.25
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of Library visits	345,793	302,000	392,000
Circulation (checkouts and renewals)	1,445,031	1,177,000	1,550,000

Division: Public Services

Program Characteristics:

Program Description

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 to provide services and create partnerships that support youth ages 0–18. Services focus on brain development, literacy skills, school readiness, school support, life skills, teen leadership development, connected learning, and reading for fun.

Program activity: Youth Development removes barriers to Library resources by partnering with Multnomah County school districts, allowing students to use their ID for access. Staff, who are experts in early child and brain development, train Library and community partners in strategies (read, talk, sing, play, and rhyme) to build pre-reading skills in babies, toddlers, and preschoolers. The program supports families, including emerging readers and tweens, with literacy programming, book groups, and connections to community resources. Youth Development also engages teens by connecting learning to personal interests, supportive relationships, and leadership opportunities. Youth Development leadership provides specific direction and support to youth and teen librarians across the library system as they provide services in library locations.

Equity Statement

Staff emphasize serving marginalized youth to reduce barriers and ensure equity, fostering teen leadership in Library programming and decision-making. Systemwide, Youth Development offers inclusive services to youth and families, advocates for relevant initiatives, and supports educators.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$1,280,429	$0	$1,372,710
Contractual Services	$0	$119,000	$0	$129,000
Materials & Supplies	$0	$391,528	$0	$338,844
Internal Services	$0	$64,398	$0	$58,594
Total GF/non-GF	**$0**	**$1,855,355**	**$0**	**$1,899,148**
Total Expenses:	**$1,855,355**		**$1,899,148**	
Program FTE	0.00	7.75	0.00	7.75
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of K-12 students who have access to Library resources and services through Library Connect	120,000	115,000	115,000
Number of children and teens who participate in the Summer Reading Program	102,817	99,890	99,000

Division: Public Services

Program Characteristics:

Program Description

Summary: Community Information (CI) provides answers to basic information needs, high-level account management in multiple languages, and referrals to Library subject matter experts and community resources. CI also provides back-end support for both patrons and staff members for the Library's software platforms including Communico, Symphony, and LibAnswers.

Program activity: CI offers remote connection to the Library for users who experience barriers to accessing Library resources in person, for reasons that include disability, homebound status, unreliable transportation, and Library hours that conflict with work or caregiving obligations. It minimizes disparities by offering service in users' preferred languages of English, Chinese, Russian, Spanish, and Vietnamese. CI serves as the Library's most accessible and immediate service point, and it provides information via telephone, email, and chat. Though call volume has steadily decreased over the years, the type of information requested via phone and the services provided in our non-English service languages require increased staff time and attention.

Equity Statement

Community Information (CI) connects community members who face the greatest barriers to accessing Library services in person, particularly communities with disabilities, lacking transportation, or experiencing social isolation. CI provides services in English, Chinese, Russian, Spanish, and Vietnamese.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$1,822,845	$0	$1,919,833
Materials & Supplies	$0	$12,979	$0	$5,200
Internal Services	$0	$147,803	$0	$142,546
Total GF/non-GF	**$0**	**$1,983,627**	**$0**	**$2,067,579**
Total Expenses:	**$1,983,627**		**$2,067,579**	
Program FTE	0.00	14.50	0.00	14.50
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of contacts (phone, chat, email, mail) answered by Community Information staff	69,868	63,000	60,000
Number of languages provided by the Contact Center	5	5	5

Division: Public Services

Program Characteristics:

Program Description

Summary: Integrated Library Services (INTS) provides equitable access to diverse, dynamic, and relevant collections of physical books and digital information for all ages. Last year, INTS procured, processed, cataloged, and made available 148,000 new physical items available to the public.

Program activity: This program selects, purchases, processes, catalogs, and distributes all circulating Library books and other materials in physical and electronic formats. INTS manages related technical tasks and processes that allow patrons to use Library materials as well as materials the Library borrows from other libraries on behalf of our patrons.

INTS includes several distinct teams and functions including the following:
• The Selections team chooses books, e-books, movies, and other materials for Library collections in five service languages and two cultural areas.
• The Cataloging and Processing team makes sure that all of more than three million physical and electronic items can be found in the online catalog, and it processes physical materials to ensure they are ready for use by the public.
• The Acquisitions team ensures that books and Library materials purchased from vendors are received and paid for.
• The Interlibrary Loan Team acquires items from other libraries on behalf of patrons.
• The Integrated Library Systems team keeps the Library’s online catalog and circulation system running smoothly.
• The Access team works on policies, procedures, and related training for staff to keep the checkout process simple.

Equity Statement

Integrated Library Service (INTS) honors the lived experience of all community members and the languages they speak, employing selectors with relevant knowledge, skills, and abilities to choose and provide materials for the diverse communities the Library serves. INTS selects, catalogs, and provides materials in English, Chinese, Russian, Spanish, and Vietnamese as well as other world languages, and provides Black cultural collections and Indigenous materials.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$6,873,304	$0	$7,822,400
Contractual Services	$0	$455,360	$0	$435,576
Materials & Supplies	$0	$9,103,047	$0	$8,889,901
Internal Services	$0	$327,091	$0	$324,276
Total GF/non-GF	**$0**	**$16,758,802**	**$0**	**$17,472,153**
Total Expenses:	**$16,758,802**		**$17,472,153**	
Program FTE	0.00	52.75	0.00	56.25
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of items in the collection, physical and digital	3,123,844	3,200,000	3,200,000
Total circulation, physical and digital	17,590,104	17,500,000	18,800,000

Division: Public Services

Program Characteristics:

Program Description

Summary: Public Services Division Management provides leadership for the development, coordination, and delivery of Library services across 19 libraries and within the community. This program is responsible for managing Library security needs in conjunction with Workplace Security, as well as supporting systemwide staffing planning.

Program activity:
• Senior leaders in Location Services, Community Services, and Integrated Services coordinate and collaborate across service lines to ensure that Library Public Services meet community expectations
• Provides leadership and direction for the implementation of the Library's values and strategic plan across the Public Services division
• Partners with community-based organizations, County departments, and other agencies in Multnomah County to provide services in Library buildings and direct service through outreach programs
• Assesses systemwide staffing needs and assigns staffing resources as needed to ensure required coverage
• Oversees Library security functions in partnership with Workplace Security, including security coverage planning, incident review and analysis, and process improvement
• Coordinates and plans for bond-related impacts to library buildings and services

Equity Statement

Public Services Division Management provides leadership and accountability to advance racial equity through the use of tools, systems, and expectations for Public Services and Security. Services are planned via a matrix that is designed for equitable service delivery. Beginning in FY 2026, the Public Services Division introduced Targeted Universalism in program planning and prioritization and will continue that work in FY 2027, including the development of the Library's strategic plan.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$6,593,292	$0	$5,170,135
Contractual Services	$0	$2,204,811	$0	$2,117,227
Materials & Supplies	$0	$60,075	$0	$121,166
Internal Services	$0	$760,349	$0	$769,462
Total GF/non-GF	**$0**	**$9,618,527**	**$0**	**$8,177,990**
Total Expenses:	**$9,618,527**		**$8,177,990**	
Program FTE	0.00	43.25	0.00	31.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of Public Services staff with a language or cultural KSA	155	155	155
Number of times team members were deployed to meet minimum staffing levels and keep locations open	N/A	72	125

Division: Public Services

Program Characteristics:

Program Description

Summary: Community Engagement and Partnerships implements a centralized system to coordinate and plan Library outreach and partnerships. Its goal is to efficiently organize staff resources to ensure consistent, quality service delivery outside of Library buildings, specifically targeting sites and communities that do not currently use the Library and require focused support. The program addresses the need to serve community members who cannot physically access or who face barriers to using Library buildings. The primary populations this program serves are adults in custody, juveniles in detention, the homebound, immigrants and refugees, and vulnerable youth and families.

Program activity: Through the lens of partnerships, this program leverages community expertise to bring services to Library patrons that Library staff alone could not deliver. This program delivers Library books and services directly at the point of need (e.g., in jails, shelters, or patrons' homes). Simultaneously, Library staff attend specific community events that serve cultural and linguistic groups whose primary language isn't English. This ensures that the Library builds relationships with all communities and identifies partnership opportunities. The program connects with entities such as other Multnomah County departments, schools, housing sites and community organizations that serve communities impacted by marginalization. Key partnerships with community organizations allow the Library to meet community needs outside of Library employees' traditional scope.

Equity Statement

Community Engagement and Partnerships advances equity by using a proactive model that provides resources and services to communities facing systemic barriers and those with significantly limited or no physical access to Library buildings. It also leverages partnerships to bring services into the Library that the Library could not provide on its own to meet community needs.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$2,115,838	$0	$1,635,272
Contractual Services	$0	$3,000	$0	$0
Materials & Supplies	$0	$471,735	$0	$491,435
Internal Services	$0	$117,415	$0	$281,193
Total GF/non-GF	**$0**	**$2,707,988**	**$0**	**$2,407,900**
Total Expenses:	**$2,707,988**		**$2,407,900**	
Program FTE	0.00	13.00	0.00	10.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of community outreach events	361	350	350
Number of books delivered in the community	38,197	35,000	35,000

Division: Public Services

Program Characteristics:

Program Description

Summary: Library Events and Reader Services (LERS) provides access to programs and activities that foster literacy development and interest; creates opportunities for the public to learn new skills and acquire knowledge; celebrates cultures and promotes cross-cultural information exchange; and provides opportunities for creativity and learning.

Program activity: The classes and events provided by LERS are open to the public and are delivered by community presenters, volunteers, partner organizations, and trained Library staff. Offerings include citizenship classes; classes for English language learners; technology and STEAM/makerspace programs for teens and adults; cultural celebrations and heritage month programming; art, craft, and music programming for all ages; programs for youth that promote social-emotional development; and the Read 4 Life and Everybody Reads programs, which encourage adults to develop regular reading habits.

The LERS program serves Multnomah County residents of all ages, with programming provided in five service languages: English, Spanish, Russian, Vietnamese, and Chinese.

Equity Statement

Library Events and Reader Services (LERS) delivers events, classes, and performances that reflect the Library's priority of leading inclusively with race, developing targeted strategies to support historically underserved and marginalized communities, and offering programs in five service languages. LERS relies on staff and patron input to ensure that programs are culturally responsive and driven by community interest and need.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$2,387,538	$0	$3,165,693
Contractual Services	$0	$367,425	$0	$426,825
Materials & Supplies	$0	$135,479	$0	$222,024
Internal Services	$0	$119,225	$0	$133,670
Total GF/non-GF	**$0**	**$3,009,667**	**$0**	**$3,948,212**
Total Expenses:	**$3,009,667**		**$3,948,212**	
Program FTE	0.00	14.55	0.00	18.55
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of attendees at Creative Learning and makerspace events	6,425	6,200	10,000
Number of presenter-led events	472	550	600

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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 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.

Nondepartmental

FY 2027 Adopted Budget

$243.1 million

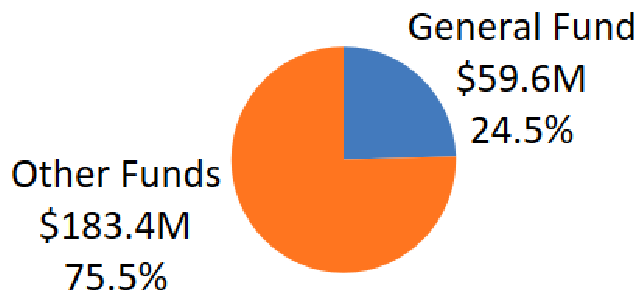
Total Adopted Operating Budget

Excludes $49.4 million in cash transfers, contingencies, and unappropriated balances

130.30 FTE

Total Adopted Staffing

(6.75) FTE
Decrease from
FY 2026 Adopted



$4.0 million

All Funds (Operating) Increase from
FY 2026 Adopted

1.7% increase

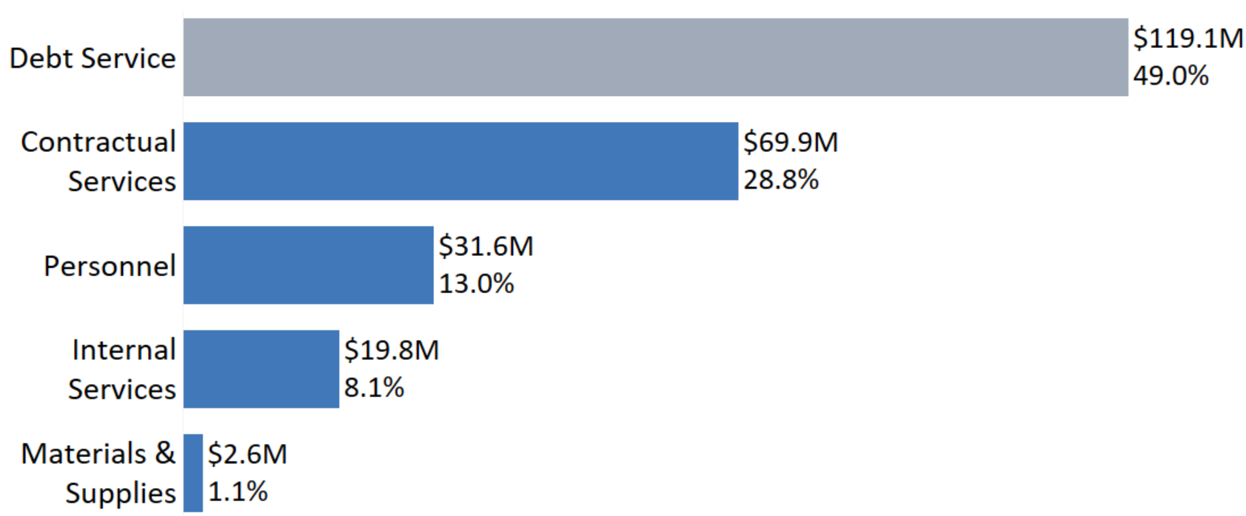
General Fund

$1.0 million
New **Ongoing** Investments

$2.3 million
One-Time-Only Investments

Operating Budget by Category - $243.1 million

Does not include cash transfers, contingencies, and unappropriated balances



Diversity, Equity, and Inclusion

Multnomah County's commitment to protecting the health and safety of its community through equity-focused approaches remains steadfast. The County continues to prioritize the well-being of all residents, with particular attention to residents who have experienced the greatest systemic barriers and disparities through a range of targeted initiatives. This commitment is reflected in ongoing efforts to address the housing crisis, advance public health and environmental justice, and build a more equitable organization from within.

The County's focus on workforce equity continues to yield meaningful progress. In FY 2027, the Office of Diversity and Equity (ODE) will begin year three of the implementation phase of the 2024-2028 Workforce Equity Strategic Plan, which received unanimous approval from the Board of County Commissioners. The plan provides a clear roadmap for deepening the organization's equity efforts over a four-year horizon, building on and expanding initiatives established under the original strategic plan. Multnomah County's continued investment in this work stands in contrast to a broader national trend of disinvestment in diversity, equity, and inclusion efforts.

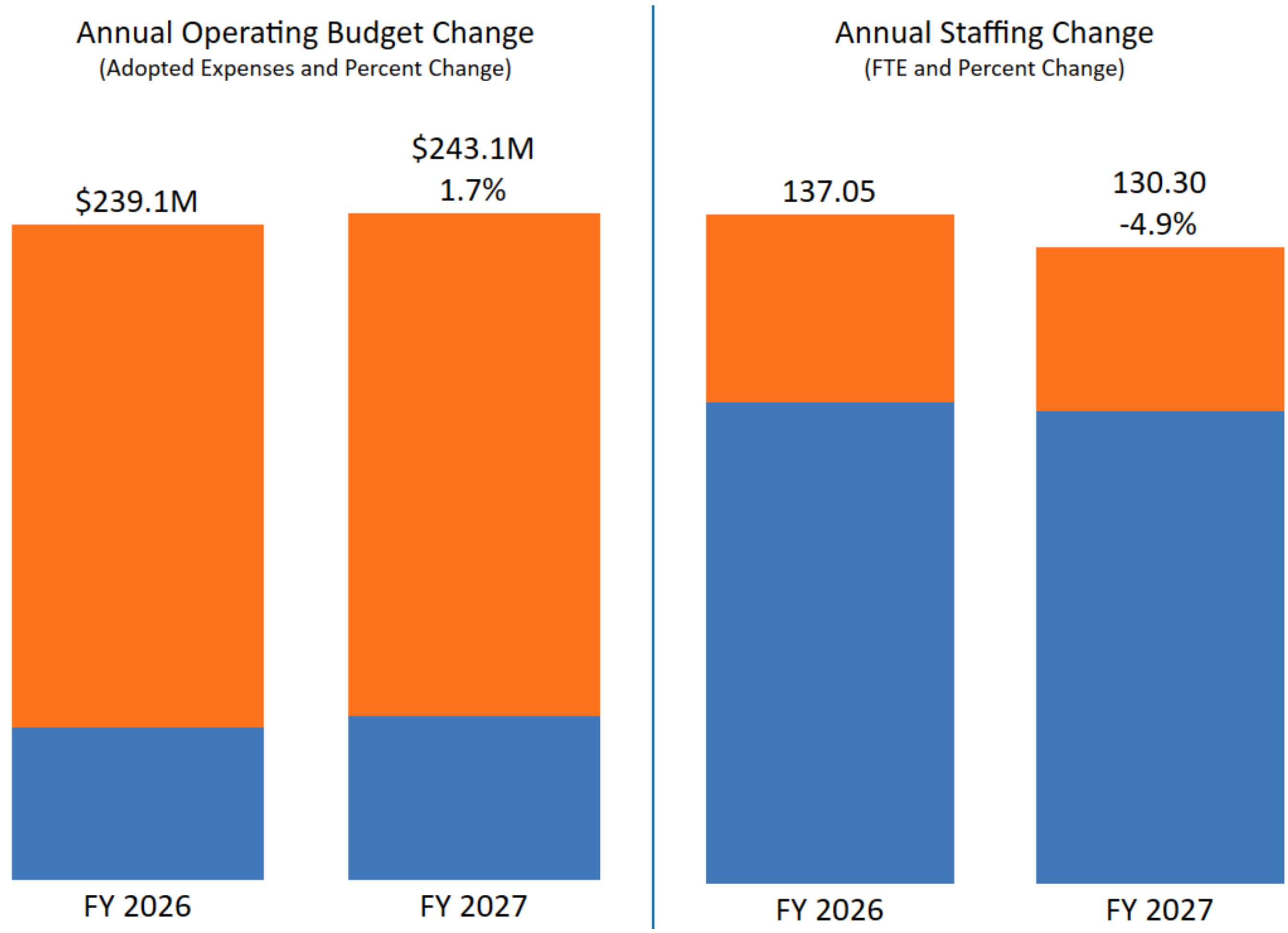
Nondepartmental offices continue to play a central role in embedding equity into programs, processes, and policies across the County. This is reflected in the ongoing operationalization of the Equity and Empowerment Lens; the Government Relations team's dual focus on internal development and external policy implementation; and the Office of Community Involvement's leadership in civic participation and key partner engagement, which remains a cornerstone of the County's budget development and adoption process. The Office of Sustainability and the Office of Emergency Management continue their work to address the disproportionate impacts of climate change on the most vulnerable residents, advancing both environmental resilience and public health equity. The Local Public Safety Coordinating Council is advancing the Justice Fellowship program, which empowers justice-involved individuals by centering their lived expertise in policy and program discussions — building pathways into spaces where their voices have historically been excluded.

Nondepartmental is also advancing important work at the intersection of digital access and equity. The Office of Diversity and Equity's Digital Accessibility Program and IT's Public Website and Digital Services initiative continue to operate as mutually reinforcing efforts. Together, they work to ensure that County employees have meaningful access to the tools required to do their jobs, and that residents can access County services without barriers. The program sets accessibility objectives and success criteria, monitors progress, and maintains ongoing communication with both employees and the communities the County serves — with a focus on partnerships, capacity building, and continuous learning.

Multnomah County's FY 2027 budget builds on progress made over the past fiscal year and reflects continued investment in the capacity of Nondepartmental offices to develop and implement policy approaches that strengthen the County's ability to respond to both ongoing and emerging community needs.

Budget Overview

Nondepartmental contains County programs, independent County agencies, corporate functions, and payments to other entities that do not belong to County departments. The FY 2027 Nondepartmental operating budget is $243.1 million, a $4.0 million increase from the FY 2026 Adopted budget. These amounts exclude cash transfers, contingencies, and unappropriated balances. The General Fund has increased by $4.0 million (7.1%), and Other Funds (including Video Lottery) has increased by $57 (0.00%).



A full list of General Fund additions and reductions can be found on the following page. Although Other Funds remained flat, there is a reduction in Supportive Housing Services (SHS) funding at $2.1 million (52.2%) as follows:

- In the Logistics program SHS funding is decreased by $1.47 million and 5.00 FTE and reduces emergency severe weather shelter capacity by 200 people; from 1,300 people in FY 2026 to 1,100 in FY 2027. Reductions include 2.00 FTE Emergency Management Analyst, 1.00 FTE

Emergency Management Analyst Senior, 2.00 FTE Inventory/Stores Specialist 2, and $283,000 in outreach supplies (10012B).

- In the Countywide Severe Weather Response program SHS funding is decreased by $0.6 million, however $500,000 is earmarked in General Fund contingency for these efforts, if needed. This program funds equipment, supplies, and services to support severe weather responses (10012C).

The following tables show the new or expanded ongoing and one-time-only programs, as well as reductions and reallocations. These tables can also 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 Additions Ongoing	General Fund Additions OTO	Total Additions	FTE Addition
10009D	Justice Fellowship Cohort and Stipends	0	50,000	50,000	0.00
10010B	Charter Review Committee Support	0	214,900	214,900	0.00
10016B	Local Tribal Nations Summit	0	20,000	20,000	0.00
10019	Oregon State University Extension	110,000	0	110,000	0.00
10030	Elected Official Office Transition	0	475,000	475,000	0.00
10031	Pretrial Monitoring	928,000	0	928,000	0.00
10032	Lone Fir Cemetery Historical Altar	0	1,500,000	1,500,000	0.00
Total		**1,038,000**	**2,259,900**	**3,297,900**	**0.00**

Reductions

The General Fund one-time-only reductions will be restored to the impacted programs in FY 2028.

Prog. #	Program Offer Name	General Fund Reductions Ongoing	General Fund Reductions OTO	SHS Reductions	Total Reductions	FTE Red.
10000A	Chair's Office	(362,917)	(40,000)	0	(402,917)	(1.50)

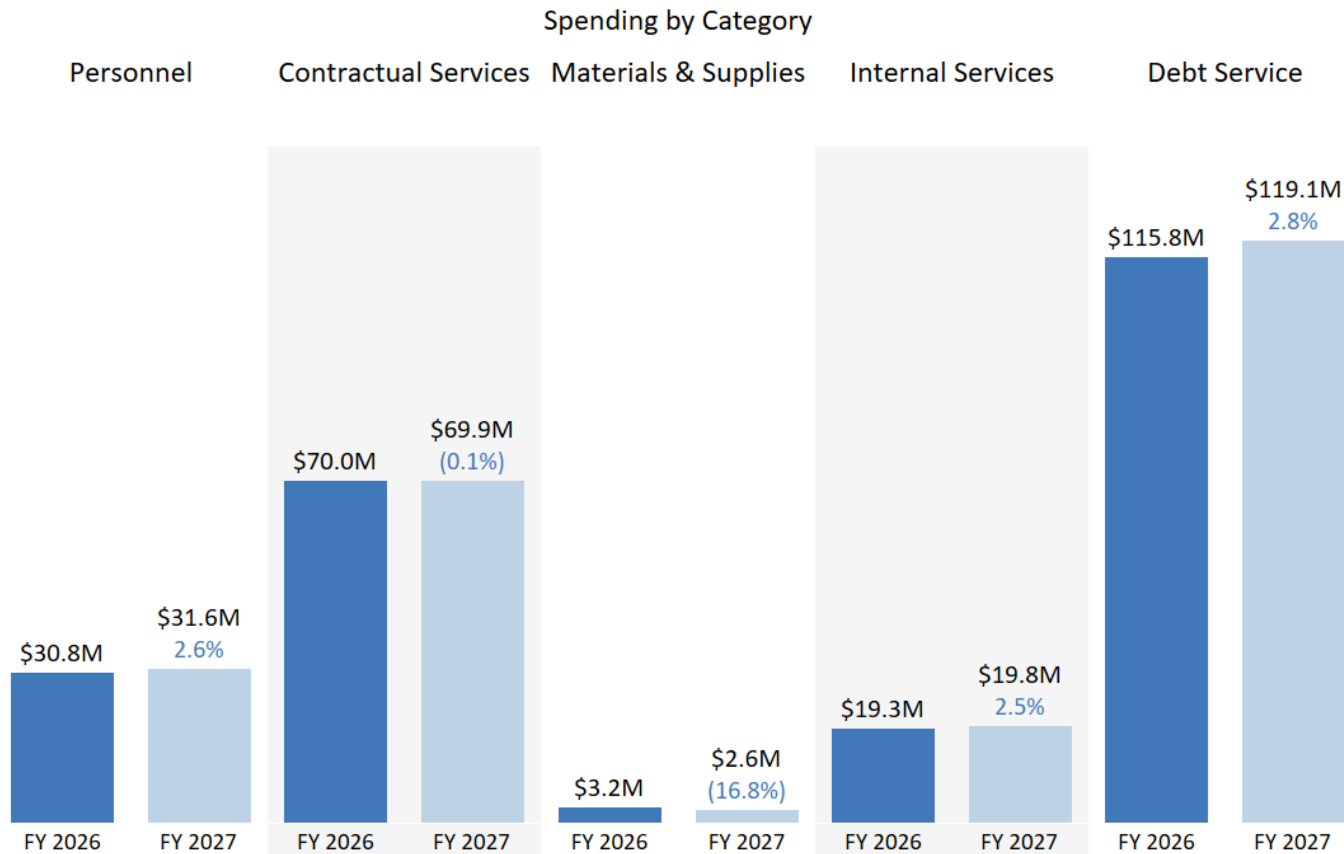
Prog. #	Program Offer Name	General Fund Reductions Ongoing	General Fund Reductions OTO	SHS Reductions	Total Reductions	FTE Red.
10001	Board of County Commissioners - District 1	0	(10,000)	0	(10,000)	0.00
10002	Board of County Commissioners - District 2	0	(15,000)	0	(15,000)	0.00
10003	Board of County Commissioners - District 3	0	(10,000)	0	(10,000)	0.00
10012B	Logistics	0	0	(1,468,092)	(1,468,092)	(5.00)
10012C	Countywide Severe Weather Response	0	0	(625,697)	(625,697)	0.00
10018	Office of Sustainability	(39,766)	0	0	(39,766)	(0.25)
10021	State Mandated Expenses	(63,004)	0	0	(63,004)	0.00
10999	NOND Vacancy Hiring Delay Savings	0	(38,200)	0	(38,200)	0.00
Total		**(465,687)**	**(113,200)**	**(2,093,789)**	**(2,672,676)**	**(6.75)**

Reallocations

In FY 2027 the Youth Opportunity and Workforce Development program (10009C) is moving to the Department of County Management (72051B) at $604,589. There is no reduction to this program.

Prog. #	Program Offer Name	Video Lottery Fund Reallocated	FTE Reallocated
Nondepartmental made these reductions			
10009C	Youth Opportunity and Workforce Development	(604,589)	0.00
To fund these programs in County Management			
72051B	Youth Opportunity and Workforce Development	604,589	0.00
Total		**0**	**0.00**

The chart below provides a breakdown of the budget's expense categories from FY 2026 to FY 2027. Debt Service is the largest component of the Nondepartmental budget which includes the Capital Debt Retirement Fund at $23.5 million (10026), Library GO Bond at $58.8 million (10027), and PERS Pension Bond Sinking Fund at $36.8 million (10028). Debt Service also grew the most between FY 2026 and FY 2027 at 2.8%.



The Budget Trends table below details the changes in expense categories from FY 2025 Actual to FY 2027 Adopted. The FY 2027 unappropriated balances include the Capital Debt Retirement Fund at $1.5 million (10026), Library GO Bond at $2.8 million (10027), and PERS Pension Bond Sinking Fund at $45.1 million (10028).

Category	FY 2025 Actual	FY 2026 Current Estimate	FY 2026 Adopted Budget	FY 2027 Adopted Budget	Difference
Personnel Services	30,156,442	30,149,702	30,789,185	31,581,435	792,250
Contractual Services	62,099,177	68,609,563	70,002,958	69,921,067	(81,891)
Materials & Supplies	1,648,249	3,132,181	3,178,720	2,644,176	(534,544)
Internal Services	18,981,119	18,906,350	19,292,194	19,783,970	491,776
Capital Outlay	102,862	0	0	0	0
Debt Service	112,379,478	113,513,307	115,829,905	119,130,208	3,300,303
Total Operating Budget	**225,367,326**	**234,311,103**	**239,092,962**	**243,060,856**	**3,967,894**
Contingency (All Funds)*	N/A	N/A	0	0	0
Internal Cash Transfers	0	0	0	0	0
Unappropriated (Reserves)*	N/A	N/A	49,140,307	49,391,133	250,826
Total Budget	**225,367,326**	**234,311,103**	**288,233,269**	**292,451,989**	**4,218,720**
FTE	**146.30**	**137.05**	**137.05**	**130.30**	**(6.75)**

* In any given fiscal year, there is no spending of unappropriated balance; if contingency is spent, it will be reflected in the Operating expenditures.

Table of All Program Offers

The following table shows the programs that make up the department's total budget, including cash transfers, contingencies, and unappropriated balances. The individual programs follow in numerical order.

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
10000A	Chair's Office		3,123,428	225,917	3,349,345	10.50
10000B	Homelessness Response System and Action Plan		0	686,631	686,631	2.00
10001	Board of County Commissioners - District 1		982,308	0	982,308	4.00
10002	Board of County Commissioners - District 2		977,308	0	977,308	4.00
10003	Board of County Commissioners - District 3		982,308	0	982,308	4.00
10004	Board of County Commissioners - District 4		992,308	0	992,308	4.00
10005	Auditor's Office		3,749,689	0	3,749,689	15.00
10006	Tax Supervising and Conservation Commission		561,113	0	561,113	2.00
10007	Communications Office		3,471,584	186,376	3,657,960	16.00
10008	County Attorney's Office		0	9,168,850	9,168,850	25.00
10009A	Local Public Safety Coordinating Council		688,189	821,475	1,509,664	3.00
10009B	HB3194 Justice Reinvestment		0	634,210	634,210	0.80
10009D	Justice Fellowship Cohort and Stipends	X	50,000	0	50,000	0.00
10010A	Office of Community Involvement		642,218	0	642,218	3.00
10010B	Charter Review Committee Support	X	214,900	0	214,900	0.00

Prog. #	Program Name	One-Time-Only	General Fund	Other Funds	Total Cost	Total FTE
10011*	Office of the Board Clerk		1,244,856	30,000	1,274,856	2.00
10012A	Office of Emergency Management		2,454,928	779,550	3,234,478	9.00
10012B	Logistics		1,019,854	999,959	2,019,813	5.00
10012C	Countywide Severe Weather Response	X	0	250,000	250,000	0.00
10016A	Government Relations Office		1,570,480	0	1,570,480	5.00
10016B	Local Tribal Nations Summit	X	20,000	0	20,000	0.00
10017A	Office of Diversity and Equity		2,735,313	0	2,735,313	10.00
10017B	Multnomah Youth Commission Support		366,796	0	366,796	1.50
10018	Office of Sustainability		976,484	699,134	1,675,618	4.50
10019	Oregon State University Extension		150,000	0	150,000	0.00
10021*	State Mandated Expenses		14,069,507	1,731,232	15,800,739	0.00
10022	Pass-Through Payments to East County Cities		15,708,566	0	15,708,566	0.00
10023	OHS Local Option Levy		0	3,977,386	3,977,386	0.00
10024	County School Fund		0	70,000	70,000	0.00
10025	Convention Center Fund		0	43,599,291	43,599,291	0.00
10026	Capital Debt Retirement Fund		0	24,990,804	24,990,804	0.00
10027	Library GO Bond		0	61,635,662	61,635,662	0.00
10028	PERS Pension Bond Sinking Fund		0	82,348,575	82,348,575	0.00
10030	Elected Official Office Transition	X	475,000	0	475,000	0.00
10031	Pretrial Monitoring		928,000	0	928,000	0.00
10032	Lone Fir Cemetery Historical Altar	X	1,500,000	0	1,500,000	0.00
10999	NOND Vacancy Hiring Delay Savings	X	(38,200)	0	(38,200)	0.00
	Total Nondepartmental		**59,616,937**	**232,835,052**	**292,451,989**	**130.30**

*Other Funds is Video Lottery Fund

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	Total FTE
95000	Fund Level Transactions		121,185,904	125,109,444	246,295,348	0.00
95001	General Fund Revenues		815,014,505	0	815,014,505	0.00

Division: Chair

Program Characteristics:

Program Description

The Chair serves as Chief Executive Officer of Multnomah County, leading the County's critical work to build equitable, resilient communities by providing accessible safety net services that prioritize our most vulnerable populations. With both legislative and executive responsibilities, the Chair with support from her team, leads the strategic policy direction, priorities and budget aimed at providing effective services. The Office works with the Board of County Commissioners to implement policy, priorities and budget under the Home Rule Charter. With the exception of the independently elected offices of the Auditor, District Attorney, and Sheriff – all departments and Nondepartmental policy offices report to the Chair. The Chair is a key collaborator 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. 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 regional leaders.

During FY 2027, Chair Vega Pederson will maintain or increase focus on the following priorities:
- Implementing the Homeless Response Action Plan to support a balance of services to reduce inflow into homelessness.
- Supporting our immigrant and refugee communities, as well as everyone impacted by current federal policies.
- Stewarding Preschool for All to universal coverage and additional programs that serve children, youth, and family.
- Addressing substance use and increasing access to recovery and mental health services.
- Strategic organizational alignment to maximize direct services.

Equity Statement

At every opportunity, Chair Vega Pederson is committed to uplifting the voices and perspectives of employees and residents who have been historically marginalized from power, in order to ensure fair representation, foster a culture of belonging, and provide high-quality services that are accessible and can close disparities. The Chair's Office is responsive to constituent feedback, and maintains regular engagement through our communication channels, meetings, events, and town-halls.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$2,574,630	$192,065	$2,386,948	$217,793
Contractual Services	$383,760	$0	$371,047	$0
Materials & Supplies	$105,109	$0	$58,011	$0
Internal Services	$264,806	$8,028	$307,422	$8,124
Total GF/non-GF	**$3,328,305**	**$200,093**	**$3,123,428**	**$225,917**
Total Expenses:	**$3,528,398**		**$3,349,345**	
Program FTE	11.00	1.00	9.50	1.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Ensure broad budget engagement through community meetings and events.	19	20	20
Meet with State/Federal officials and other partners on issues critical to the region.	35	35	35

Division: Chair

Program Characteristics:

Program Description

Per the County's commitments under the Homelessness Response System (HRS) Intergovernmental Agreement with the City of Portland, the HRS mobilizes multiple jurisdictions, departments, key partners and service providers around shared objectives to improve system performance and service delivery related to homelessness. HRS develops and oversees a multi-jurisdictional action plan and reports related key performance indicators (KPIs) in direct alignment with the County's Strategic Plan. HRS also convenes three contractually-obligated oversight bodies that further that work:

• Steering and Oversight Committee: sets key performance indicators, tracks overall progress and provides a venue for important cross-jurisdictional and multisector policy discussions;
• Implementation Committee: organizes department directors across multiple jurisdictions to enact the action plan and identify programmatic or budget recommendations to meet KPIs; and
• Community Advisory Committee: identifies emerging community needs and opportunities, provides input on the action plan, and also tracks progress related to KPIs.

The goal of the work is a clearer, more unified, transparent and accountable homelessness response system - one where the County and its partners make decisions together, invest toward shared goals, and track progress. The result: a system that is easier for the public to understand, easier for leaders to manage, and better responds to changes in homelessness by using real-time data.

Equity Statement

Homelessness and housing instability disproportionately impact people of color and others who experience systemic discrimination. HRS prioritizes equitable engagement, system planning, outcome tracking, and programmatic improvement to address these disparities and improve outcomes for all who are served. The HRS action plan, policy and programming, KPIs, and ongoing reporting center this work.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$514,696	$0	$533,592
Contractual Services	$0	$63,500	$0	$40,000
Materials & Supplies	$0	$35,347	$0	$27,740
Internal Services	$0	$93,579	$0	$85,299
Total GF/non-GF	**$0**	**$707,122**	**$0**	**$686,631**
Total Expenses:	**$707,122**		**$686,631**	
Program FTE	0.00	2.00	0.00	2.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Convening three oversight committees and joint work sessions	17	48	48
Homeless Response System Quarterly Reports	1	4	4

Division: District 1 Commissioner's Office

Program Characteristics:

Program Description

Commissioner Moyer serves as one of five elected members that make up the governing body of Multnomah County, representing District 1. 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 thrive.

Commissioner Moyer's priorities include: systems coordination and improvement in areas of behavioral health and addiction services, public safety and crisis response; reducing homelessness; improving accountability and transparency of policy and budget making-decisions; collaborating with her colleagues on construction and infrastructure projects in District 1; improvements to Preschool For All that maximize its economic impact and improve experience for children, families and preschool providers; 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 Moyer 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.

Commissioner Moyer is the Board Liaison to the Aging Services Advisory Council, Disability Services Advisory Council, Domestic Violence Fatality Review Board, Gateway Center for Domestic Violence, Multnomah County Sex Trafficking Collaborative, Greater Portland Inc (alternate), Association of Oregon Counties, Portland Children's Levy.

Equity Statement

Commissioner Moyer will center the need to enact policies that address inequities and injustices experienced by traditionally marginalized communities. She will promote inclusive decision-making that centers those most impacted by policy and budget decisions. Commissioner Moyer 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.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$780,738	$0	$827,016	$0
Contractual Services	$0	$0	$0	$0
Materials & Supplies	$77,194	$0	$66,366	$0
Internal Services	$85,351	$0	$88,926	$0
Total GF/non-GF	**$943,283**	**$0**	**$982,308**	**$0**
Total Expenses:	**$943,283**		**$982,308**	
Program FTE	4.00	0.00	4.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Respond to constituent emails, phone calls and meeting requests timely and resolve constituent concerns. Attend community events.	50	100	100
Engage with community regarding policies and community issues. Visit local service providers.	50	100	100

Division: District 2 Commissioner's Office

Program Characteristics:

Program Description

Commissioner Shannon Singleton 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. She serves District 2, which includes North, Northeast, and parts of East Portland and Maywood Park. To learn more about Commissioner Singleton's office visit the website at https://multco.us/elected/shannon-singleton.

Commissioner Singleton is eager to tackle the county's problems and offer meaningful solutions during her second year in office. The FY 2027 budget needs to be flexible to meet changing public health and safety net needs while still investing in strong services across the county. Many innovative and effective new projects started over the last few years due to investments from the Federal government and METRO's Supportive Housing Services program. Our challenge will be how to continue rethinking our services in ways that will move us toward equity and justice with fiscal constraints, disinvestment from the federal government, and declining revenues. Commissioner Singleton focuses on immigrant and refugee services, economic justice, housing and homelessness, workforce development, and transportation. Specific efforts include:

- Leveraging Medicaid funding for crisis mental health outreach and housing
- Expanding workforce development programming and increase access to good paying jobs
- Seeking opportunities to leverage transportation investments for community benefits
- Strengthening protections for immigrant and refugee communities and funding programs to support people being targeted under this authoritarian federal regime

Equity Statement

Commissioner Singleton's work prioritizes efforts to address the economic and racial disparities that create the need for a robust safety net in Multnomah County. She is committed to ensuring racial equity, promoting effective evidence-driven programs and services, and engaging in community-driven policy. During the FY 2027 budget process, she will prioritize programs and strategies that have the most impact for equity priority communities and District 2.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$775,235	$0	$816,988	$0
Contractual Services	$20,037	$0	$31,644	$0
Materials & Supplies	$62,660	$0	$39,750	$0
Internal Services	$85,351	$0	$88,926	$0
Total GF/non-GF	**$943,283**	**$0**	**$977,308**	**$0**
Total Expenses:	**$943,283**		**$977,308**	
Program FTE	4.00	0.00	4.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Community engagement and constituent outreach via meetings and events.	12	24	24
Ongoing responsiveness to all County departments.	100%	100%	100%

Division: District 3 Commissioner's Office

Program Characteristics:

Program Description

Commissioner Brim-Edwards represents District 3, which includes SE Portland and a portion of NE Portland. A resident of East Portland for over 50 years, she brings a lifetime of public- and private-sector service to her role and is guided by the County's values of equity, sustainability, inclusivity, social justice, health, public safety, innovation, and accountability.

Commissioner Brim-Edwards is committed to taking bold action on urgent community priorities. Priorities include addressing homelessness and improving connections to stable and supportive housing; expanding access to addiction treatment and recovery services; improving the safety of our communities; creating a countywide economic development and empowerment action plan; and strengthening transparency, accessibility and democratic practices within County government.

Additional, Commissioner Brim-Edwards prioritizes investments that promote countywide economic opportunity and neighborhood livability – including supporting ongoing funding for core County services and frontline staff; investing in SUN Schools and School Based Mental Health; advocating for the Gateway Clean and Safe District; supporting library modernization projects and investing in community hubs, such as New Avenue for Youth's SYMRC program, the African Youth & Community Organization, APANO, and the Asian Health and Family Services Center.

Commissioner Brim-Edwards serves as liaison to Travel Portland and the Visitor Development Fund; the Local Public Safety Coordinating Council; the Regional Disaster Preparedness Organization; the Association of Oregon Counties; Multnomah County Audit Committee; Tri-County Planning Committee/Alternate and Metro SHS Work Group.

Equity Statement

East Portland neighborhoods have experienced decades of underinvestment. Commissioner Brim-Edwards will continue being a voice for underrepresented communities and support County investments to improve the daily life for residents. Priorities for FY 2027 include funding homeless services and accelerating connections to housing; closing gaps in referrals to services - including addiction treatment and recovery services; and supporting culturally specific organizations and services.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$791,591	$0	$813,014	$0
Contractual Services	$10,500	$0	$9,600	$0
Materials & Supplies	$55,841	$0	$70,768	$0
Internal Services	$85,351	$0	$88,926	$0
Total GF/non-GF	**$943,283**	**$0**	**$982,308**	**$0**
Total Expenses:	**$943,283**		**$982,308**	
Program FTE	4.00	0.00	4.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Lead/support opening of 24/7 Sobering/Stabilization Center; improve deflection and public safety coordination; develop an economic empowerment strategy	100%	Adopt/Implement	Adopt/Implement
Take action and be responsive to community priorities; regularly attend community meetings, visit County and District facilities and engage with constituents.	100%	100%	100%

Division: District 4 Commissioner's Office

Program Characteristics:

Program Description

In FY 2027, Multnomah County District 4 program offer #10004 outlines the budget and strategic priorities for Commissioner Jones-Dixon's office. The district covers East Multnomah County, including Gresham, Fairview, Wood Village, Troutdale, parts of East Portland, and rural communities reaching to Hood River County.

Key Priorities & Performance Measures: This program offer focuses on two primary pillars and identifies specific milestones that the District 4 office will advance and monitor during the fiscal year:

• PUBLIC SAFETY: Champion and see to completion the creation of a "Reentry Hub" at the Multnomah County Justice Center that ensures that every person leaving custody has immediate access to housing, peer support, transportation, and treatment services on the day of release. This is one step toward the goal that people in Multnomah County's systems of incarceration, probation and parole leave with the mindset, skills, and community connections to successfully reenter society, thrive, and never return.

• ECONOMIC EMPOWERMENT: Convene the food and agriculture community and bring recommendations to the Board that leverage District 4's rich agricultural land to address hunger, improve health, build a thriving and innovative agricultural workforce and food ecosystem, and grow jobs and the local economy. This is one step toward the goal that food and agriculture nourish and enrich East Multnomah County.

Equity Statement

Providing comprehensive reentry services helps break the cycle of recidivism, ensuring that justice-involved individuals—who are disproportionately people of color and from low-income backgrounds—have the equitable support needed to successfully reintegrate and thrive. Likewise, by targeting food and agricultural workforce investments in the region with the lowest wages and shortest life expectancy, we directly address systemic disparities in community health and economic stability.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$811,978	$0	$854,910	$0
Materials & Supplies	$45,954	$0	$48,472	$0
Internal Services	$85,351	$0	$88,926	$0
Total GF/non-GF	**$943,283**	**$0**	**$992,308**	**$0**
Total Expenses:	**$943,283**		**$992,308**	
Program FTE	4.00	0.00	4.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
See to completion the creation of a "Reentry Hub" that ensures people leaving custody have immediate access to critical support services on the day of release.	N/A	N/A	Complete
Convene an agricultural workforce committee and bring forward the report and recommendations to the Multnomah County Board as a foundation for future work.	N/A	N/A	Complete

Division: Auditor

Program Characteristics:

Program Description

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.

The County Charter directs the Auditor to conduct performance audits of all county operations and financial affairs. Through audits and follow-up efforts, auditors provide systems-level accountability to the public. The Charter also directs the Auditor to conduct County Ombudsperson work. The ombudsperson is a resource for people having trouble resolving problems with county programs. The ombudsperson conducts impartial investigations into administrative acts, recommends changes, and can issue reports to support high standards in the provision of county services. The Auditor created the Good Government Hotline for employees and the public to confidentially report potential fraud, waste, or abuse of position in County government. County Code entrusts the hotline's ongoing operation to the Auditor. The hotline helps ensure that County government resources are used efficiently and ethically.

Equity Statement

The Government Alliance on Race and Equity defines racial equity as meaning that race can no longer be used to predict life outcomes and outcomes for all groups of people are improved. Our office uses this definition because history shows that a focus on racial equity can result in better outcomes for all people. We use an iterative equity lens in our work, and our work products regularly articulate inequities so government and community members can address them.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$2,950,586	$0	$3,161,223	$0
Contractual Services	$210,090	$0	$217,030	$0
Materials & Supplies	$115,475	$0	$114,831	$0
Internal Services	$245,646	$0	$256,605	$0
Total GF/non-GF	**$3,521,797**	**$0**	**$3,749,689**	**$0**
Total Expenses:	**$3,521,797**		**$3,749,689**	
Program FTE	15.00	0.00	15.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Minimum number of reports (audits, follow-ups, ombudsperson, hotline, annual).	16	12	12
For audit reports with recommendations, percent with at least one focused on supporting racial equity.	100%	100%	100%

Division: Tax Supervising & Conservation Commission

Program Characteristics:

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 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. The Commission considers all community members to be its customers and seeks to make the financial affairs of local governments transparent and accountable.

Each year the TSCC holds public hearings on taxing district budgets and proposed property tax measures. 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 holds annual local budget law trainings and provides regular advice and consultation to local government staff to improve compliance with budget law. These efforts reduce violations of local budget law, especially if the error results in a property tax levy that exceeds authority. Additionally, 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. 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.

Equity Statement

TSCC is dedicated to protecting the public interest by ensuring local governments in Multnomah County follow Local Budget Law. We promote the efficient and equitable use of public resources by providing specialized training, hosting public meetings for transparent discourse, and publishing budget data in standardized formats so it is easily accessible and understandable. We work directly with local governments to ensure budget processes are accessible, compliant, and easy to navigate.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$478,856	$0	$507,967	$0
Contractual Services	$12,000	$0	$12,400	$0
Materials & Supplies	$46,910	$0	$39,126	$0
Internal Services	$1,766	$0	$1,620	$0
Total GF/non-GF	**$539,532**	**$0**	**$561,113**	**$0**
Total Expenses:	**$539,532**		**$561,113**	
Program FTE	2.00	0.00	2.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
# of budgets certified by Commission to improve budget law compliance.	30	30	30
# of public hearings on local government budgets and property tax ballot measures.	16	15	14

Division: Nondepartmental - All Other

Program Characteristics:

Program Description

The Communications Office produces the news of record, issues crisis communications and conducts media relations for Multnomah County. Staff create, curate and distribute accurate, timely information so community members can use County services. Communications Office staff write press releases, talking points, and memos. They write web articles on the work of the Chair, Commissioners and departments. They photograph employees and events, produce videos, and create graphics and social media to inform the public. They produce and review reports with critical and transparent information about the efficacy of County programs and services. The Office seeks to work with culturally specific sources, media and community liaisons to reach residents who speak languages other than English. Staff publish materials on multco.us, as well as more than 20 webpages, and four County-wide social media platforms, including Spanish-language accounts and websites. They conduct media training. The Communications Office leads work to build a Countywide public records platform and fills all public records requests filed by media. Staff lead crisis communications during emergencies, while delivering lifesaving information 365 days a year. They plan County events, support community outreach and engagement projects, and produce campaigns to support leaders' goals. They connect the County's large and diverse workforce to one another through an employee newsletter, the Wednesday Wire. They advise and help County leaders communicate directly with staff. This office will also design, develop and lead Countywide branding and marketing efforts. And it will support increasing access to growing programs like Preschool for All.

Equity Statement

The Communications Office is committed to improving its ability to bring vital information about County services to communities who don't speak English or who are underserved by traditional structures. The office will work to incorporate planned translation improvements in our website. It will support Spanish-language translations. It will support efforts like our federal response efforts. And it will work to bring in the perspectives of people with lived experiences.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$2,883,527	$169,466	$3,046,854	$179,674
Contractual Services	$34,694	$0	$35,840	$0
Materials & Supplies	$96,822	$0	$96,660	$0
Internal Services	$194,315	$7,083	$292,230	$6,702
Total GF/non-GF	**$3,209,358**	**$176,549**	**$3,471,584**	**$186,376**
Total Expenses:	**$3,385,907**		**$3,657,960**	
Program FTE	15.00	1.00	15.00	1.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of news stories generated by the office in all media -- TV, print, radio, County website and blogs.	3,340	3,700	3,800
Number of Instagram followers that signal public engagement particularly during an emergency.	15,000	17,600	18,000

Division: County Attorney

Program Characteristics:

Program Description

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 operations, 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. 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.

Equity Statement

To support and advance the County's Workforce Equity Strategic Planning Efforts. Partner with client representatives to identify and address structural and policy barriers to equal employment opportunity and assure legal compliance and equal treatment under the law.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$7,542,248	$0	$7,802,712
Contractual Services	$0	$332,540	$0	$343,520
Materials & Supplies	$0	$259,357	$0	$276,018
Internal Services	$0	$641,855	$0	$746,600
Total GF/non-GF	**$0**	**$8,776,000**	**$0**	**$9,168,850**
Total Expenses:	**$8,776,000**		**$9,168,850**	
Program FTE	0.00	25.00	0.00	25.00
Program Revenues				
Other / Miscellaneous	$0	$8,776,000	$0	$9,168,850
Total Revenue	**$0**	**$8,776,000**	**$0**	**$9,168,850**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
County Attorney Direct Service Hours	24,860	25,000	25,000
Percentage of County Attorney Time Dedicated to Direct Client Services	95%	96%	96%

Division: Local Public Safety Coordinating Council

Program Characteristics:

Program Description

Senate Bill 1145 (1995) created Local Public Safety Coordinating Councils (LPSCCs) in Oregon's 36 counties (ORS 423.560) to "coordinate local criminal justice policy." The Council meets monthly to share information, identify public safety issues, and oversee new plans and strategies.

LPSCC and its partners develop:
• solutions for intergovernmental public safety operations;
• coordinated policies for system improvement; and
• evidence-based community safety strategies.

The Executive Committee directs subcommittees focusing on critical issues like Justice Reinvestment, pretrial system change, and oversight of Decision Support System-Justice (DSS-J), the County's public safety data warehouse.

LPSCC program offers fund office FTE and resources, and project support. In FY 2027, LPSCC funds an Executive Director, a Research and Policy Manager, and an Executive Assistant. It also funds one limited-duration position and 20% of another grant-funded staff member to support the MacArthur Foundation's Safety + Justice Challenge (focused on pretrial justice overhaul and a Justice Fellowship project).

Equity Statement

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.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$208,367	$802,987	$203,760	$713,603
Contractual Services	$0	$828,086	$0	$18,000
Materials & Supplies	$3,180	$46,559	$14,904	$18,697
Internal Services	$712,757	$79,935	$469,525	$71,175
Total GF/non-GF	**$924,304**	**$1,757,567**	**$688,189**	**$821,475**
Total Expenses:	**$2,681,871**		**$1,509,664**	
Program FTE	1.00	2.00	1.00	2.00
Program Revenues				
Intergovernmental	$0	$1,256,067	$0	$547,514
Other / Miscellaneous	$0	$501,500	$0	$273,961
Total Revenue	**$0**	**$1,757,567**	**$0**	**$821,475**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
% of new initiatives/projects that use an equity focus and inclusively lead with race.	100%	100%	100%
Percentage/number of policy-level projects that include voices of people with lived experiences.	100%	100%	100%

Division: Local Public Safety Coordinating Council

Program Characteristics:

Program Description

Senate Bill 1145 (1995) established LPSCCs in each of Oregon's 36 counties to "coordinate local criminal justice policy among affected criminal justice entities' ' (ORS 423.560). To carry out this mission, LPSCC's Executive Committee meets monthly to share information, identify issues and problems affecting public safety and oversee development of new plans, policies, and strategies. LPSCC and its partners collaborate on the development of (a) solutions to problems in the intergovernmental operations of the public safety systems, (b) coordinated policies to improve those systems and (c) evidence-based strategies that address issues important to community safety.

The Council directs the work of several subcommittees and smaller working groups that focus on the most critical issues within the justice system, including implementation of the Multnomah County Justice Reinvestment Program (prison diversion) and funding directed to agencies who serve victims of crime from underserved and Black Indigenous and People Of Color communities.

This program includes the funding for victim's services contracts. House Bill 3194 established the Justice Reinvestment Grant Program, which requires 10% of funds be spent on victims services. House Bill 3078 added additional funds to be used for the same victims services programs. The 10% is administered by LPSCC to contract with community based victims services agencies. As indicated in the rules developed by the Criminal Justice Commission, County LPSCCs are responsible for choosing and contracting with victim's services agencies. This funding also supports a 0.80 FTE LPSCC Project Manager for the Multnomah County Justice Reinvestment Program.

Equity Statement

The Local Public Safety Coordinating Council (LPSCC) office prioritizes racial justice by ensuring leading with race is the lens through which policy development and evaluation occurs. With the help of data, the staff can also support policy efforts to reduce racial and ethnic disparities in the criminal legal system.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$194,527	$0	$206,692
Contractual Services	$0	$424,220	$0	$419,808
Materials & Supplies	$0	$7,360	$0	$0
Internal Services	$0	$8,131	$0	$7,710
Total GF/non-GF	**$0**	**$634,238**	**$0**	**$634,210**
Total Expenses:	**$634,238**		**$634,210**	
Program FTE	0.00	0.80	0.00	0.80
Program Revenues				
Intergovernmental	$0	$634,238	$0	$634,210
Total Revenue	**$0**	**$634,238**	**$0**	**$634,210**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of victims services contracted providers that aim to serve marginalized & underrepresented communities.	100%	100%	100%
Percentage of MCJRP related analyses that included evaluation of racial and ethnic disparities	100%	100%	100%

Division: Local Public Safety Coordinating Council

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

Program Description

The Justice Fellowship is a 4-month program where a cohort of competitively-selected fellows participate in legal system education, each week focusing on a different aspect of the legal system. The curriculum also incorporates skill-building such as, grant writing, understanding policy development, and public testimony/advocacy.

Following the curriculum, the Justice Fellowship brings fellows into legal system policy and program discussions — fostering a broader network of community experts ready to contribute at decision-making tables. Participants will bring their expertise to spaces and organizations where they've traditionally been unheard, and will gain insights into the criminal legal system's intricacies, organization and history.

LPSCC member agencies (e.g., DA's Office, Sheriff's Office, DCJ) submit proposals for projects focused on disparity reduction. The LPSCC Public Safety Project Coordinator reviews these proposals and matches them with a Justice Fellow based on skills and background and provides support to both fellows and partner agencies through the project.

This program supports stipends for 8 fellows participating in the 4-month curriculum and for meeting expenses. MacArthur Foundation grant funds support the 1.00 FTE Public Safety Project Coordinator.

Equity Statement

The Justice Fellowship ensures that projects addressing disparities in the criminal legal system are vetted and co-designed by those most impacted by the criminal legal system. This supports LPSCC partners to intentionally center equity in projects and initiatives aimed at legal system coordination and improvement.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$0	$40,000	$0
Materials & Supplies	$0	$0	$10,000	$0
Total GF/non-GF	**$0**	**$0**	**$50,000**	**$0**
Total Expenses:	**$0**		**$50,000**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Percentage of Justice Fellows who complete the full curriculum and graduate the fellowship.	N/A	N/A	100%
Number of Justice Fellowship graduates engaged in projects with LPSCC partner agencies.	N/A	N/A	90%

Division: Office of Community Involvement

Program Characteristics:

Program Description

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 and staff support to county departments that help foster healthy community engagement and guidance for managing programs that involve community input.

Equity Statement

The Office of Community Involvement supports early, inclusive, and equitable community outreach and engagement countywide while working to mitigate barriers to civic participation.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$485,322	$0	$515,824	$0
Contractual Services	$30,232	$0	$30,232	$0
Materials & Supplies	$42,734	$0	$40,900	$0
Internal Services	$48,063	$0	$55,262	$0
Total GF/non-GF	**$606,351**	**$0**	**$642,218**	**$0**
Total Expenses:	**$606,351**		**$642,218**	
Program FTE	3.00	0.00	3.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Participant Retention - community volunteers maintain full-term engagement in CIC and CBAC advisory committees	82%	87%	90%
Participant Satisfaction - community volunteers report positively on experience serving on CIC and CBAC advisory committees	87%	96%	98%

Division: Office of Community Involvement

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

Program Description

The Multnomah County Home Rule Charter provides that every six years, a Charter Review Committee will be convened for the purpose of making a comprehensive study of the Charter and, if it chooses, to submit Charter amendments to the voters of Multnomah County. The county Charter is like our local constitution, creating the structure of county government and outlining the county's powers. The Charter Review Committee is charged with studying the Charter by all appropriate means including open hearings and meetings, the taking of testimony and interviews. The committee's meetings are open to the public. The committee is required to present a report to the people and the Board of County Commissioners that includes their findings, conclusions, and recommendations including any amendments the committee proposes to the Charter. All amendments proposed by the committee will be submitted to the voters of Multnomah County at the 2028 primary or general election. The committee begins meeting in March 2027 and must conclude its work by August 2028. As required by Charter, the Office of Community Involvement (OCI) convenes the meetings of the Charter Review Committee.

This program includes a dedicated staff person to provide support and technical assistance at all committee and subcommittee meetings, assist the committee with research, develop communications to keep the public informed of the committee's work, ensure the committee meets all required deadlines, and support the committee to be inclusive, accessible and elevate the voices of communities most impacted by county programs and services. This program also provides Charter Review Committee members stipends to support participation over the duration of the charter review process.

Equity Statement

The Office of Community Involvement utilizes inclusive approaches to mitigate barriers to civic participation, promotes opportunities for public input and community engagement, and supports educational and leadership development activities for a diverse range of community voices in the charter review process.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	$199,817	$0
Contractual Services	$0	$0	$14,000	$0
Materials & Supplies	$0	$0	$1,083	$0
Total GF/non-GF	**$0**	**$0**	**$214,900**	**$0**
Total Expenses:	**$0**		**$214,900**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Percentage of community members engaged compared to demographic proportion of communities served	N/A	N/A	50%
Participant Satisfaction - community volunteers report positively on experience serving on Charter Review Committee	N/A	N/A	95%

Division: Nondepartmental - All Other

Program Characteristics:

Program Description

The Office of the Board Clerk provides critical support for the Board of County Commissioners by managing Board meetings, providing information and notices on items brought before the Board and public, and maintaining board schedules and related public records. It maintains and disseminates information pertaining to adopted resolutions, orders, ordinances and proclamations. This work is accomplished with a focus on making this information as accessible as possible towards a goal of making Board actions, discussions, and policy considerations more equitable for people who communicate in different ways.

Board Clerks are responsible for the following:

- Notifying internal and external customers of scheduled meetings and cancellations.
- Managing a practicable board meeting calendar with many incoming competing requests.
- Notifying and enforcing document deadlines with internal and external customers.
- Providing the public with the agenda, testimony opportunities, notices of public hearings, and access to public records.
- Processing, posting, and distributing agenda submissions and documentation that result from Board action and directives.
- Preserving the official County records both electronically and on paper for perpetuity, ensuring access for future inquiries.
- Ensuring accessibility through close captioning, translation, and posting of videos and transcripts after meetings.
- Facilitating public testimony, both in person and virtual public testimony.
- The office pays for County membership in advocacy organizations including the National Association of Counties and Association of Oregon Counties.

Equity Statement

The Office of the Board Clerk is committed to timely and accessible posting of public meetings and materials, and to ensure that constituents are able to fully participate in public meetings in accordance with public meeting laws, through consistent communications and by providing accommodations as requested.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$353,871	$0	$375,090	$0
Contractual Services	$211,740	$0	$61,200	$0
Materials & Supplies	$322,660	$30,000	$489,754	$30,000
Internal Services	$289,798	$0	$318,812	$0
Total GF/non-GF	**$1,178,069**	**$30,000**	**$1,244,856**	**$30,000**
Total Expenses:	**$1,208,069**		**$1,274,856**	
Program FTE	2.00	0.00	2.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Total number of Board related documents processed (digital files).	4,500	4,500	4,500
Board Meeting Minutes uploaded and available to the public within two weeks.	100%	100%	100%

Division: Nondepartmental - All Other

Program Characteristics:

Program Description

The Emergency Management (EM) program includes: 1) County preparedness, 2) Intergovernmental/regional preparedness, 3) Community preparedness/resilience, and 4) the County's ability to continue critical operations in an emergency.

• EM collaborates with local jurisdictions, districts, agencies, businesses, and a diverse group of nongovernmental organizations, faith-based groups, and volunteer organizations, as well as directly with community members to promote disaster preparedness and community resilience and to create an inclusive, coordinated response to disasters.
• During an emergency, EM activates and manages the County Emergency Operations Center (EOC) to coordinate a county-wide response to impacts from natural and anthropogenic incidents including severe weather, wildfires, earthquakes, cybersecurity, civil unrest, and other hazards. The EOC, staffed by employees from across County departments, provides a single venue where strategic direction, response coordination and resource support for incident response is carried out.
• EM also leads preparedness programming, such as the development, training, and exercising of response plans (many required by County, State, and Federal statutes), providing training to County and partner organizations, and facilitating exercises for County and partner organizations to practice response and recovery operations. We coordinate damage assessments, liaise with State/Federal offices for resource sharing, and manage the county's emergency alert notification systems. We also build the County's preparedness to continue government operations and critical business functions in an emergency. Annually, this program supports approximately 100 different activities (training, exercises, drills and community events) and supports the development, revision and update of a library of 40 plans and operating procedures.

Equity Statement

The County Emergency Management programs are developed to support disaster prevention, response, and recovery efforts in a manner that reaches all community members, particularly those who are historically underserved or disproportionately impacted.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,695,609	$629,535	$1,788,274	$473,971
Contractual Services	$75,650	$75,000	$78,150	$125,000
Materials & Supplies	$98,865	$93,763	$99,931	$162,900
Internal Services	$465,453	$26,315	$488,573	$17,679
Total GF/non-GF	**$2,335,577**	**$824,613**	**$2,454,928**	**$779,550**
Total Expenses:	**$3,160,190**		**$3,234,478**	
Program FTE	8.26	0.74	8.26	0.74
Program Revenues				
Intergovernmental	$0	$824,613	$0	$779,550
Total Revenue	**$0**	**$824,613**	**$0**	**$779,550**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Annual exercise performance objectives successfully tested	100%	100%	100%
Oregon Emergency Management requirements met for annual performance grant	100%	100%	100%

Division: Nondepartmental - All Other

Program Characteristics:

Program Description

The response and logistics team has four primary support functions: 1) our houseless community impacted by disasters in the county. This is especially true during severe weather events such as excessive heat or extreme cold when the County opens, staffs and supplies emergency shelters. 2) numerous traditional emergency management programs including planning, training, exercise development, community preparedness, alert and warning program, damage assessments, communication systems oversight and the Emergency Management Accreditation Program support 3) ongoing and emergency logistical support utilizing vehicles and various facilities. These activities are not predicted, but have included many projects from supporting the free air conditioner program which provided units to high risk populations to partnerships with the Oregon Food bank to store and provide food boxes to county organizations after federal food programs were impacted. 4) HSD Outreach partners by providing materials for year-round pickup and expanded activity when enhanced outreach thresholds are met.

The program maintains multiple facilities with office and warehouse spaces holding 5 million items worth over $5 million in inventory supporting emergency programs. These materials allow the County to quickly open facilities when severe weather thresholds are met and support City of Portland shelters requests when 24-hour activations are initiated. Prior to and after each severe weather season, this team also develops exercises, workshops and manages improvements identified during those events and real world activations.

Combined with programs 10012B/C, the capacity to support and supply shelters for up to 1,100 people would be maintained including program support from the City of Portland.

Equity Statement

The County Emergency Management programs are developed to support disaster prevention, response, and recovery efforts in a manner that reaches all community members, particularly those who are historically underserved or disproportionately impacted.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$628,877	$934,846	$680,363	$210,554
Contractual Services	$68,000	$4,200	$53,260	$0
Materials & Supplies	$21,400	$766,947	$26,440	$470,255
Internal Services	$215,050	$762,058	$259,791	$319,150
Total GF/non-GF	**$933,327**	**$2,468,051**	**$1,019,854**	**$999,959**
Total Expenses:	**$3,401,378**		**$2,019,813**	
Program FTE	4.00	6.00	4.00	1.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Maintain 1,100 total severe weather beds with anticipated support from City of Portland programs	N/A	N/A	100%
Deliver requested & approved supplies to community-based organizations within 3 business days of request unless a later date is requested	100%	100%	100%

Division: Nondepartmental - All Other

Program Characteristics: One-Time-Only Request

Program Description

This program is for equipment, supplies and services to support our Severe Weather Response. During severe weather events such as excessive heat or extreme cold, the County opens, staffs and supplies emergency shelters to accommodate as many guests as possible. To support severe weather shelters, this program provides funding for many of the costs incurred to support the location and the guests during their stay. This program also supports community- and faith- based organizations who are able to provide respite for the community during severe weather to increase the success of the County's efforts.

These costs can include: On site security, equipment rentals, hazardous and bio-hazard cleanup, facility rental costs, contracted support, staff training for non-emergency management personnel, shelter supplies, laundry, meals at county shelter locations, supplies and other costs which are often accrued during severe weather shelter activations.

This program represents a 71% reduction from FY 2026 and a 89% decrease from FY 2025.

Equity Statement

The County Emergency Management programs are developed to support disaster prevention, response, and recovery efforts in a manner that reaches all community members, particularly those who are historically underserved or disproportionately impacted.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$124,190	$0	$0
Contractual Services	$0	$250,000	$0	$138,500
Materials & Supplies	$0	$496,316	$0	$111,500
Internal Services	$0	$5,191	$0	$0
Total GF/non-GF	**$0**	**$875,697**	**$0**	**$250,000**
Total Expenses:	**$875,697**		**$250,000**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Maintain supplies for 1,100 total severe weather beds with anticipated support from City of Portland programs	N/A	N/A	100%
Provide critical supplies to shelters within 24 hours of request from Shelter Leads	N/A	N/A	100%

Division: Nondepartmental - All Other

Program Characteristics:

Program Description

The Office of Government Relations acts as the main link between Multnomah County and other government leaders at the local, state, federal, and Tribal levels.

• Policy and Advocacy: The office works with County leaders and community groups to carry out the Board of Commissioners' goals.

• Tracking Legislation: The office studies new state and federal laws to see how they might change County programs or affect the people who use them.

• Regional Partnerships: The office coordinates with other cities and local governments in the Portland area to make sure everyone is working toward the same goals.

• Tribal Relations: A dedicated Tribal Liaison serves as the primary contact for Oregon's nine federally recognized Tribes, helping County staff follow the right rules and respect Tribal sovereignty.

Equity Statement

Government Relations advances Multnomah County's commitment to equity by advocating for policies and resources that address systemic disparities. Our work centers the needs of communities most impacted by inequity in state and federal decision-making. Through strategic advocacy, we align legislative priorities with the County's values of racial justice, access, and accountability.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$1,169,589	$0	$1,226,868	$0
Contractual Services	$180,743	$0	$192,683	$0
Materials & Supplies	$48,520	$0	$50,140	$0
Internal Services	$84,506	$0	$100,789	$0
Total GF/non-GF	**$1,483,358**	**$0**	**$1,570,480**	**$0**
Total Expenses:	**$1,483,358**		**$1,570,480**	
Program FTE	5.00	0.00	5.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Develop and pass a comprehensive legislative and federal agenda	1	1	1
Provide an annual report that details bill outcomes and progress on County priorities	1	1	1

Division: Nondepartmental - All Other

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

Program Description

Tribal Relations, the Office of Government Relations, aim to host a Tribal Nations Summit in partnership with other local jurisdictions and Tribes that have historical ties to our area. This multi-day series of meetings will support opportunities to discuss potential collaborations, create a Tribal Consultation framework, and provide feedback directly with department staff on programs/services.

The Office of Government Relations acts as the main link between Multnomah County and other government leaders at the local, state, federal, and Tribal levels. Our Tribal Relations program hosts a dedicated Tribal Relations Liaison that serves as the primary contact for federally recognized Tribal Nations, helps County staff fulfill federal and state obligations to respect Tribal sovereignty, and supports County departments in their Tribal Engagement implementations. A Tribal Nations Summit would bring together local jurisdictions with local Tribal Government leadership to discuss shared priorities. A multi-day series of meetings to discuss collaborations, consultation efforts, and advocacy efforts.

Other potential local jurisdictions that would partner in this effort would include the City of Portland, Metro, Port or Portland, school districts, other counties and cities, and other elected officials offices. We will extend an invitation to all local Tribal Nations which include the nine Federally Recognized Tribes of Oregon and the Columbia River Tribes. Also work with local Native American Community serving organizations, State of Oregon agencies, and other relevant partners.

Equity Statement

Government Relations advances the County’s commitment to equity by advocating for policies and resources that address systemic disparities. Our work centers the needs of communities most impacted by inequity in state and federal decision-making. We align legislative priorities with the County’s values of racial justice, access, and accountability. The Tribal Nations Summit will support this mission as it elevates voices that have not historically been involved on how we serve their citizens.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Materials & Supplies	$0	$0	$20,000	$0
Total GF/non-GF	**$0**	**$0**	**$20,000**	**$0**
Total Expenses:	**$0**		**$20,000**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Create framework and resource for local jurisdictions with a Tribal Consultation Process.	N/A	N/A	100%
Provide educational opportunities for County staff to learn about Tribal Communities and priorities.	N/A	N/A	100%

Division: Nondepartmental - All Other

Program Characteristics:

Program Description

The Office of Diversity and Equity (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, multiidentity, 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 program funds the ongoing implementation of core pillars of ODE work:
•Advancing workforce equity and the Workforce Equity Strategic Plan through sustained partner engagement;
• Sustaining the equity policy team's efforts related to disability equity and accommodations, policy development, and other initiatives that strengthen systems and structures;
• Ensuring consistent compliance reporting, research and evaluation;
• Conducting stay 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;
• Providing digital accessibility support to ensure employee access to tools/resources needed to perform their work, and that residents experience barrier-free access to County services. Will partner with the Department of Community Assets IT Team.
ODE also convenes the Equity Core Team made up of equity managers across the organization and other key partners.

Equity Statement

The Office of Diversity and Equity 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 Human Resources and Department Equity Managers to create inclusive frameworks for practice, policy and program delivery.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$2,232,407	$0	$2,300,671	$0
Contractual Services	$61,740	$0	$64,000	$0
Materials & Supplies	$145,379	$0	$133,300	$0
Internal Services	$151,959	$0	$237,342	$0
Total GF/non-GF	**$2,591,485**	**$0**	**$2,735,313**	**$0**
Total Expenses:	**$2,591,485**		**$2,735,313**	
Program FTE	10.00	0.00	10.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Review internal and external digital documents to ensure the remediation of digital barriers across County websites and applications.	N/A	N/A	50%
Translate stay interview insights into actionable recommendations.	N/A	N/A	75%

Division: Nondepartmental - All Other

Program Characteristics:

Program Description

The Multnomah Youth Commission (MYC) is the official youth policy body for Multnomah County and the City of Portland. The 30 young adults, ages 13- 21, from majority Black, Indigenous and People of Color Communities (BIPOC), strive to amplify youth perspectives on policy impacting and relevant to youth, their families, peers, and community. The MYC works to improve the community through Social Justice projects and shift 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. The Multnomah Youth Commission advises and offers recommendations on policies and programs that impact youth through focused, issue-specific committee work, the Elected Official Liaison program, and training and technical assistance. MYC uses authentic youth engagement practices and tools to build the capacity of youth to participate in high-level policy advocacy to ensure that young people form relationships with caring adults, build skills, exercise leadership, and help their communities as they develop into healthy, productive adults. The MYC is a nationally recognized model using participatory action research, policy creation and advocacy, and Youth-Adult Partnership as its foundational underpinnings. MYC's current policy focus areas are driven and led by youth and selected through youth outreach and engagement. These projects empower youth to take the lead and work together to address issues most important to their communities, while highlighting and sharing ideas and experiences to build youth-led solutions. This policy and project work includes the following: • Transit Safety • Transit Equity/TriMet Youth Pass for All • Eliminating peer to peer, and home violence; increasing safe and sober third spaces for youth • Later High School start times to combat chronic absenteeism • Funding youth-led Environmental/Climate Justice Community Projects • Renewing Youth Bill of Rights.

Equity Statement

Multnomah Youth Commission is committed to fostering an inclusive environment where every young person, regardless of race, gender, ability, socioeconomic status, or background, feels valued, respected, and heard. We strive to dismantle systemic barriers, amplify diverse youth voices, and ensure equitable access to leadership opportunities to create a just, thriving community.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$247,396	$0	$289,336	$0
Contractual Services	$0	$0	$7,000	$0
Materials & Supplies	$21,210	$0	$24,000	$0
Internal Services	$17,465	$0	$46,460	$0
Total GF/non-GF	**$286,071**	**$0**	**$366,796**	**$0**
Total Expenses:	**$286,071**		**$366,796**	
Program FTE	1.50	0.00	1.50	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Multnomah Youth Commission meetings held	22	22	22
Youth led policy priorities impacted and/or advocated for	8	9	9

Division: Nondepartmental - All Other

Program Characteristics:

Program Description

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 is committed to a healthy, equitable planet by rooting our work in Multnomah County's mission to protect the most vulnerable residents. We recognize that environmental injustice and climate destabilization are driven by the historical and ongoing harms of racism and colonialism. To redress these harms, the Office leads with race in our decision-making, identifying it as the primary driver of systemic inequity. We acknowledge our location on ceded tribal land and work to honor our government-to-government treaty obligations as foundational to advancing environmental justice. We are operationalizing these values in the following ways.

- Prioritized Energy Justice: In FY 2026 we co-led a coalition that doubled state-wide utility bill assistance funding—securing a $5.3 million increase for Multnomah County—and championed low-income ratepayer protections like temporary disconnection protections and severe weather protections.
- Prioritize Climate Justice: Guided by a diverse Steering Committee of frontline community members and staff, the Office transitioned from a draft plan presented to the Board of County Commissioners in April 2025 to a deep-engagement phase that included 24 engagement events on the draft Plan, resulting in 46 survey responses, and 39 written comments; and hosted 12 community forums on each of the goals in the plan, convening 253 participants across industry, government, non-profit organizations, and the general public to gather actionable feedback. The final plan presented to the Board in June 2026.
- Enterprise Sustainability: Tracked greenhouse gas emissions that have been reduced 68% from the FY07 baseline through acquisition of clean energy and a 20% reduction in total energy use.

Equity Statement

We believe that culturally responsive, community-driven solutions are the most effective way to address the root causes of injustice. Our budget prioritizes deep collaboration with community partners to advance projects—such as the Climate Justice Plan—that are directly responsive to the needs of Black, Indigenous, and People of Color (BIPOC) residents.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$859,762	$4,217	$873,121	$0
Contractual Services	$3,734	$45,300	$1,786	$2,500
Materials & Supplies	$15,180	$0	$13,763	$0
Internal Services	$58,016	$176	$87,814	$696,634
Total GF/non-GF	**$936,692**	**$49,693**	**$976,484**	**$699,134**
Total Expenses:	**$986,385**		**$1,675,618**	
Program FTE	4.75	0.00	4.50	0.00
Program Revenues				
Intergovernmental	$0	$49,693	$0	$699,134
Total Revenue	**$0**	**$49,693**	**$0**	**$699,134**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
% decrease, year-over-year, in community-wide greenhouse gas emissions over 1990 baseline levels. GHG data lags by several years; most recent data is for 2023	23.8%	25.8%	27.8%
Total number of advisory committee meeting volunteer hours.	128	150	150

Division: Nondepartmental - All Other

Program Characteristics:

Program Description

In fiscal year 2027, Commissioner Jones-Dixon's office will set the foundation and begin building a sustainable food and agriculture system in Multnomah County with long-term expected outcomes including (1) increased access to healthy, local foods, (2) improved health outcomes, (3) opportunities for jobs and income, and (4) increased economic activity via agritourism in District 4 and District 1.This is a first step, in partnership and alignment with the County's Health and Sustainability Departments, toward the goal that food and agriculture nourish and enrich East Multnomah County.

District 4 will partner with Oregon State University (OSU) Extension to convene a table of agriculture, food, economic development, and community interest-holders and facilitate a series of meetings to ask and answer key questions that explore how we bring about the outcomes sought. District 4 will follow up with a presentation to the Board with recommendations that leverage the County's rich agricultural land to address hunger, improve health, build a thriving and innovative agricultural workforce and food ecosystem, and grow jobs and the local economy. Deliverables for this portion of the work are expected to include a interest-holder coordination and food hub systems assessment, regional agricultural needs brief, food systems and workforce landscape summary, strategic action memo with 12-24 month implementation roadmap, operational resilience planning, outcome metrics and end-of-year impact report.

In addition, OSU Extension will provide ongoing education and technical assistance throughout the year to farmers and food business owners across the county. This may include farmer education workshops, individual farm technical assistance, vendor readiness education series, individual business consultations and retail pathway toolkits.

Equity Statement

By targeting food and agricultural investments in regions with the lowest wages and shortest life expectancy, we directly address systemic disparities in community health and economic stability.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$40,000	$0	$150,000	$0
Total GF/non-GF	**$40,000**	**$0**	**$150,000**	**$0**
Total Expenses:	**$40,000**		**$150,000**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Series of meetings convened and recommendations presented to the Board.	N/A	N/A	Complete
Technical assistance delivered.	N/A	N/A	Complete

Division: Nondepartmental - All Other

Program Characteristics:

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.

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). LEED-Gold certification uses less water and energy and reduces 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-through payment for the State Watermaster.
• A pass-through payment to the Urban Flood Safety & Water Quality District for the Flood Safety Benefit Fee.
• 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.

Equity Statement

The County's Facilities Division advances equity by prioritizing safety and accessibility across all County properties, utilizing a diverse workforce and a "Think Yes" service model to ensure high-quality, inclusive environments for all employees and residents. Multnomah County courts' central and eastside locations allow easy access to the court system and provide visibility into the public safety system at work.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$1,154,440	$0	$1,255,924	$0
Materials & Supplies	$117,978	$0	$58,867	$0
Internal Services	$12,800,142	$1,739,697	$12,754,716	$1,731,232
Total GF/non-GF	**$14,072,560**	**$1,739,697**	**$14,069,507**	**$1,731,232**
Total Expenses:	**$15,812,257**		**$15,800,739**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Fees, Permits & Charges	$1,100,000	$0	$1,200,000	$0
Total Revenue	**$1,100,000**	**$0**	**$1,200,000**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Percentage of preventive maintenance work order costs out of total work order costs, maximizing building systems life cycles and reducing repair costs.	34%	30%	25%
Percentage of customer satisfaction surveys with a result of "very satisfied", demonstrating commitment to our "Think Yes" customer service principles.	81%	84%	87%

Division: Nondepartmental - All Other

Program Characteristics:

Program Description

The Business Income Tax (BIT) is imposed on the net income derived from business activity within Multnomah County. The BIT was originally set at a rate of 0.6% of net income. In 1985, the tax was increased to 0.95%. In 1987, the tax was further increased to 1.46%. In 1993 the rate was reduced to 1.45% due to the consolidation of collections with the City of Portland's Business License Fee (BLF). The County entered into a tax sharing agreement with the four east county cities, in part to acknowledge the value of business income derived from those cities. The County acts as a fiduciary agent for the four east county cities.

In March 2020, the Board of County Commissioners increased the tax to 2.00%, and increased the owners compensation deduction and gross receipts adjustments. The percent of total collections passed-through was updated to dedicate a portion of the new revenue to East County Cities.

Equity Statement

The County is a committed partner in managing the Business Income Tax funds and sharing the revenue with East County cities. By following our official agreements, we send this funding back to these cities so they can use it for their own community priorities and services.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$14,852,115	$0	$15,708,566	$0
Total GF/non-GF	**$14,852,115**	**$0**	**$15,708,566**	**$0**
Total Expenses:	**$14,852,115**		**$15,708,566**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Regularly share updates on current collections with East County Cities.	6	7	6
	N/A	N/A	N/A

Division: Nondepartmental - All Other

Program Characteristics:

Program Description

The Oregon Historical Society (OHS) operates the Oregon Historical Society Museum, Research Library, and educational programs for adults, families, and school groups. OHS also serves as the Multnomah County history repository. The Multnomah County OHS Levy, which has been repeatedly approved by local voters, provides basic operational support for core programs, including exhibit series, statewide education programs, public programs, Digital Collections website and online digital history resources like The Oregon Encyclopedia, research library services, and collections development and care. Funding also enables free museum admission to residents of Multnomah County. 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, will receive no less than $280,000 annually from the levy proceeds. These funds are critical to the continued operation of these four organizations. The levy allocates the balance, estimated at $3.9 million in FY 2025-26 to OHS for its programs and operations.

In 2025 the OHS website (www.ohs.org), was visited by almost 300,000 viewers. The Oregon Encyclopedia had 1.3 million pageviews by 956,000 users, an estimated one third of which are students and educators. Additionally, 2,000 educators around the state received our educator e-blasts, 21,000 subscribers received our weekly e-digests, and our social media pages had over 49,400 followers. Plus, 4,800 copies of the Oregon Historical Quarterly were mailed to subscribers, and it was available to countless students and patrons at academic and public libraries, as well as online.

Equity Statement

Services in this program are delivered uniformly to all customers and welcome all communities. The OHS program funds the maintenance of a museum and public research library in downtown Portland, preserving the largest collection of historical materials about the State of Oregon, providing information/programming on the people, places, and events that shaped the State of Oregon.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$3,815,422	$0	$3,948,386
Internal Services	$0	$29,000	$0	$29,000
Total GF/non-GF	**$0**	**$3,844,422**	**$0**	**$3,977,386**
Total Expenses:	**$3,844,422**		**$3,977,386**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Taxes	$0	$3,818,421	$0	$3,950,000
Interest	$0	$5,000	$0	$5,000
Beginning Working Capital	$0	$21,001	$0	$22,386
Total Revenue	**$0**	**$3,844,422**	**$0**	**$3,977,386**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Multnomah County residents admitted free of charge	15,392	16,500	17,200
Increased number of public programs	30	30	30

Division: Nondepartmental - All Other

Program Characteristics:

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.

These funds are distributed to Portland Public, Corbett, Centennial, David Douglas, Parkrose, Reynolds, Gresham-Barlow, and Riverdale School Districts.

Equity Statement

The County takes its job seriously as a trusted partner in sending federal money to our local rural schools. We follow the federal law to ensure that these timber and tax funds are shared fairly and clearly, ensuring every dollar goes to the rural schools.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$70,025	$0	$70,000
Total GF/non-GF	**$0**	**$70,025**	**$0**	**$70,000**
Total Expenses:	**$70,025**		**$70,000**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$25,000	$0	$25,000
Taxes	$0	$45,000	$0	$45,000
Beginning Working Capital	$0	$25	$0	$0
Total Revenue	**$0**	**$70,025**	**$0**	**$70,000**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
	N/A	N/A	N/A
	N/A	N/A	N/A

Division: Nondepartmental - All Other

Program Characteristics:

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 Fund. 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 Oregon Convention Center Bonds scheduled to fully mature in fiscal year 2030.

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. It is estimated that Oregon Convention Center Visitors generated an economic impact exceeding $350 million in fiscal year 2025.

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.

Equity Statement

This program ensures certain tax receipts are collected and distributed in alignment with County tax code and terms/conditions of intergovernmental agreements with regional public partners. Tax receipts are used to fund visitor facilities and tourism promotion within Multnomah County that creates economic activity and growth.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$44,421,215	$0	$43,599,291
Total GF/non-GF	**$0**	**$44,421,215**	**$0**	**$43,599,291**
Total Expenses:	**$44,421,215**		**$43,599,291**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Taxes	$0	$44,276,340	$0	$43,459,986
Interest	$0	$10,000	$0	$10,000
Beginning Working Capital	$0	$134,875	$0	$129,305
Total Revenue	**$0**	**$44,421,215**	**$0**	**$43,599,291**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Impact ($ in millions) of Convention Center Visitors to Multnomah County Economy	358	360	378
Number of Employees in Travel/Tourism Industry (Est.)	2,529	2,542	2,672

Division: Nondepartmental - All Other

Program Characteristics:

Program Description

Multnomah County is currently making debt payments on the following obligations:

Series 2010B ($15 million) - Full Faith & Credit, full maturity in fiscal year 2030
Series 2017 ($164.1 million) - Full Faith & Credit, full maturity in fiscal year 2047
Series 2019 ($16.075 million) - Full Faith & Credit (Bank Placement Loan), fully retired in fiscal year 2029
Series 2021 ($89.58 million) - Full Faith & Credit (Refunding - Sellwood Bridge Bonds), full maturity in fiscal year 2033
Series 2022 ($25.095 million) - Full Faith & Credit (Bank Placement Loan), fully retired in fiscal year 2032

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 stable governing board, strong budget management, low debt levels, effective funding/management of long term liabilities, adequate reserves and stable tax base.

Equity Statement

This program ensures County obligations (FFC and Loans) established by the issuance of debt are met. Timely payment of debt obligations and compliance to financing terms/conditions helps prevent non-compliance, penalties, and negative impacts to the County's debt rating. Maintaining a good debt rating helps reduce the cost of debt for future debt obligations.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$3,000	$0	$3,000
Debt Service	$0	$23,854,815	$0	$23,526,078
Unappropriated & Contingency	$0	$1,142,220	$0	$1,461,726
Total GF/non-GF	**$0**	**$25,000,035**	**$0**	**$24,990,804**
Total Expenses:	**$25,000,035**		**$24,990,804**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$172,526	$0	$139,736
Other / Miscellaneous	$0	$23,684,289	$0	$23,388,342
Interest	$0	$40,000	$0	$40,000
Beginning Working Capital	$0	$1,103,220	$0	$1,422,726
Total Revenue	**$0**	**$25,000,035**	**$0**	**$24,990,804**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Moody's Rating of Aa1 or Better (Yes-1, No-0)	1	1	1
Debt Service Payments Made as Scheduled (Yes-1, No-0)	1	1	1

Division: Nondepartmental - All Other

Program Characteristics:

Program Description

In November 2020, the voters of Multnomah County approved ballot measure 26-211 for a County Library Capital Construction Project. The measure authorized the County to issue General Obligation Bonds not to exceed $387 million and will be payable from taxes on property or property ownership that are not subject to the limits of section 11 and 11b, Article XI of the Oregon Constitution. The County Library Project will enlarge and modernize eight libraries. Build a flagship library in East County, expand/renovate/or construct seven branches including Albina, Belmont, Holgate, Midland, North Portland, Northwest, and St. Johns, create a central materials handling and distribution center, and provide high speed internet to all libraries.

The County issued debt in January 2021 in two series (2021A & 2021B) totaling $387 million. The Bonds were delivered on January 26, 2021 and will fully mature in fiscal year 2029. Revenue to pay debt is derived from property taxes and interest income. Bonds are double rated (Moody's - Aaa and S&P - AAA) and annual debt service began in December of 2021. The County has established a dedicated debt service fund (2003) to account for debt payments (principal and interest), all taxes levied, and accrued interest. The capital project is be managed in a separate capital fund (2517) in the Department of County Assets that accounts for bond proceeds, interest accrued on bond proceeds, and all capital expenditures.

Equity Statement

This program ensures property tax levy revenues dedicated to retire the Library General Obligation Bonds are solely used for the restricted purpose. Program also ensures debt obligations are met. Timely payment of debt obligations, compliance to financing terms/conditions, and transparent financial reporting helps prevent non-compliance, penalties, and negative impacts to the County's debt rating. Maintaining a good debt rating helps reduce the cost of debt for future debt obligations.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Debt Service	$0	$57,090,090	$0	$58,804,130
Unappropriated & Contingency	$0	$2,372,496	$0	$2,831,532
Total GF/non-GF	**$0**	**$59,462,586**	**$0**	**$61,635,662**
Total Expenses:	**$59,462,586**		**$61,635,662**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Taxes	$0	$56,590,090	$0	$57,804,130
Interest	$0	$300,000	$0	$300,000
Beginning Working Capital	$0	$2,572,496	$0	$3,531,532
Total Revenue	**$0**	**$59,462,586**	**$0**	**$61,635,662**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Moody's Rating of Aa1 or Better (1-Yes, 0-No)	1	1	1
Debt Service Payments Made as Scheduled (1-Yes, 0-No)	1	1	1

Division: Nondepartmental - All Other

Program Characteristics:

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 fiscal year 2030. Debt service payments are supported by a surcharge against payroll. The surcharge rate has fluctuated, on average, between 5% 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 fiscal year 2017-2023. Side accounts totaled $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 0.6% - 0.7% of payroll.

Equity Statement

This program ensures County pension obligations established by the issuance of debt are met. Timely payment of debt obligations and compliance to financing terms/conditions helps prevent non-compliance, penalties, and negative impacts to the County's debt rating. Maintaining a good debt rating helps reduce the cost of debt for future debt obligations. Pension Bonds help mitigate the financial impact of an unfunded actuarial liability (UAL).

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$450,700	$0	$450,700
Debt Service	$0	$34,885,000	$0	$36,800,000
Unappropriated & Contingency	$0	$45,625,591	$0	$45,097,875
Total GF/non-GF	**$0**	**$80,961,291**	**$0**	**$82,348,575**
Total Expenses:	**$80,961,291**		**$82,348,575**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Other / Miscellaneous	$0	$27,820,781	$0	$32,505,287
Interest	$0	$1,400,000	$0	$1,400,000
Beginning Working Capital	$0	$51,740,510	$0	$48,443,288
Total Revenue	**$0**	**$80,961,291**	**$0**	**$82,348,575**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Moody's Rating of Aa1 or Better (1-Yes, 0-No)	1	1	1
Debt Service Payments Made as Scheduled (1-Yes, 0-No)	1	1	1

Division: Nondepartmental - All Other

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

Program Description

In FY 2027, the Board of County Commissioners will have a newly elected County Chair and commissioner in District 2, and the County will have a newly elected Auditor. 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 County Chair, Commissioner, Auditor, and their incoming staff.

This program provides one-time-only funding for the administrative and operational costs associated with the leadership changes.

Equity Statement

Funding elected office transitions ensures a fair and accountable transfer of power from outgoing to incoming offices and that the County maintains stable leadership. This stability prevents service gaps in the districts, ensuring that residents experience no disruption in advocacy or representation during this period of change.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	$413,000	$0
Materials & Supplies	$0	$0	$30,000	$0
Internal Services	$0	$0	$32,000	$0
Total GF/non-GF	**$0**	**$0**	**$475,000**	**$0**
Total Expenses:	**$0**		**$475,000**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
	N/A	N/A	N/A
	N/A	N/A	N/A

Division: Nondepartmental - All Other

Program Characteristics: New Request

Program Description

Pretrial monitoring programs are essential for managing jail capacity by offering judges viable alternatives to detention. The fundamental goal is to ensure a defendant's return to court and ability to remain in the community without new arrests or jeopardizing community safety. This is accomplished by monitoring their compliance with court-ordered release conditions. Historically, the County's programs have relied heavily on monitoring involving frequent check-ins, compliance reviews, and warrants for technical violations.

To enhance effectiveness and better achieve the goals of court appearance and community safety, a critical transformation is needed to design a more supportive pretrial structure. Beyond increasing court appearances, pretrial services represent a vital opportunity to engage, or re-engage, individuals with necessary services. A supportive pretrial structure combines monitoring with the fundamental goals of timely court case resolution, supportive services, and the critical need to reduce detention, manage limited jail capacity, and address victim and community safety.

This program will fund the establishment of monitoring services by the Multnomah County Circuit Court. Possible uses of funds include supporting pretrial monitoring functions and/or material supports to help successful court appearance.

Equity Statement

Without an effective pretrial program, judges may choose to hold individuals more frequently on security, known as cash bail. Those who cannot afford the security amount set by judges are disproportionately subjected to pretrial detention, creating a system of profound inequity.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$0	$0	$928,000	$0
Total GF/non-GF	**$0**	**$0**	**$928,000**	**$0**
Total Expenses:	**$0**		**$928,000**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Number of clients referred to pretrial monitoring	N/A	N/A	1,500
Percent of monitoring cases closed without failing to appear to court or receiving a new charge	N/A	N/A	50%

NonD | Program #10032 - Lone Fir Cemetery Historical Altar

FY 2027 Adopted

Division: Nondepartmental - All Other

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

Program Description

More than 2,800 Chinese and Chinese American people were buried in Lone Fir Cemetery between the 1860s and the 1920s, the majority of them in Block 14. While many were exhumed and returned to China in accordance with their cultural practices, some of their bodies remain in the cemetery in unmarked graves. In the 1950s, Block 14 was paved over to build an office space for Multnomah County. That building has been torn down and the land has been reincorporated into the cemetery. Metro is now in the process of completing a memorial that honors the unrecognized stories of the people who were buried at the site. The memorial was funded through the voter-approved 2019 parks and nature bond.

After project planning and design initiated in 2022, the community has been deeply involved throughout the process. Metro has led culturally specific focus groups, general public workshops and in-person events related to the ongoing development of the project. Community helped to shape the initial conceptual design approaches and the preferred design refinements throughout the course of the project. Through these engagements, the community requested that Multnomah County become involved in the effort to build the project and to issue an apology. In FY 2026 the board allocated $1 million for the Lone Fir Memorial and issued a formal apology.

The current year allocation adds $1.5 million to complete the memorial including a gathering space and a new stone altar, all essential for traditional rituals and community reflection. The memorial will provide an enduring record of the County’s memorialization and public apology for future generations. This project represents a once-in-a-generation opportunity to repair documented historical injustice with care, accuracy, and dignity.

Equity Statement

We commit to repairing historical injustices by honoring the Chinese and Chinese American communities whose sacred burial grounds were historically desecrated. Through community-led restoration and formal accountability, we ensure their enduring stories are preserved with absolute dignity and permanent recognition.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Contractual Services	$1,000,000	$0	$1,500,000	$0
Total GF/non-GF	**$1,000,000**	**$0**	**$1,500,000**	**$0**
Total Expenses:	**$1,000,000**		**$1,500,000**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Payments made as scheduled	N/A	Yes	Yes
Update provided on progress toward memorial goals	N/A	Yes	Yes

Division:

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

Program Description

This program represents the expected General Fund savings from a hiring delay based on the estimated savings for the first quarter of FY 2027. However, departments have the entire fiscal year to generate the savings.

The calculations of the vacancies excluded public safety (Sheriff's Office, Department of Community Justice, Corrections Health, and District Attorney's Office), positions used for Project Save, and positions leveraging Other Funds or fees. In addition, a 10% contingency was added to the total savings to account for changes.

Equity Statement

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	$0	$0	($38,200)	$0
Total GF/non-GF	**$0**	**$0**	**($38,200)**	**$0**
Total Expenses:	**$0**		**($38,200)**	
Program FTE	0.00	0.00	0.00	0.00
Total Revenue	**$0**	**$0**	**$0**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target

Division: Overall County

Program Characteristics:

Program Description

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 $1.6 million. The General Fund contingency also contains $22.2 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 ($18.5 million) and unappropriated balance are recorded here.

Video Lottery Fund resources of $6.8 million and contingency of $0.7 million are recorded in this offer, while expenditures are reported in departmental program offers where they are spent.

Equity Statement

The Budget Office is dedicated to developing a transparent budget process by making budget data publicly accessible and easy to understand. This process helps County leaders carefully direct resources to promote fairness, fix historic inequities, and meet the varied needs of everyone in the community. This commitment is supported by training on budget development and through financial analysis and forecasting.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Debt Service	$0	$0	$0	$0
Cash Transfers	$9,311,335	$14,520	$13,007,579	$1,400,138
Unappropriated & Contingency	$104,800,093	$119,262,414	$108,178,325	$123,709,306
Total GF/non-GF	**$114,111,428**	**$119,276,934**	**$121,185,904**	**$125,109,444**
Total Expenses:	**$233,388,362**		**$246,295,348**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$0	$6,671,469	$0	$6,838,255
Financing Sources	$5,907,848	$0	$4,200,138	$508,004
Interest	$0	$3,500,000	$0	$3,700,000
Beginning Working Capital	$95,000	$121,866,220	$0	$125,252,305
Total Revenue	**$6,002,848**	**$132,037,689**	**$4,200,138**	**$136,298,564**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
% of reserve goal met	100%	100%	100%
Moody's Bond Rating	no change	no change	no change

Division: Overall County

Program Characteristics:

Program Description

For FY 2026, General Fund resources are estimated to be $917.2 million, which includes $125.8 million of beginning working capital. The revenues budgeted in this program offer represent approximately 85% of the total General Fund. The primary ongoing revenue sources are property taxes, business income taxes (BIT), and motor vehicle rental taxes (MVRT). The remaining General Fund revenues are budgeted within departmental program offers. This program offer also includes $5.8 million of revenue from the County's Opioid Settlement.

Accurate revenue forecasting is crucial to the development of long range financial plans. It is the goal of the Budget Office to produce revenue estimates that fall within a range of (+/-) 2% of actual collections. The assumptions used to develop revenue forecasts should be clearly articulated to, and understood by, all decision makers in the budget process. The County's Financial & Budget Policies outline the forecast process.

Equity Statement

The Budget Office is dedicated to developing a transparent budget process by making budget data publicly accessible and easy to understand. This process helps County leaders carefully direct resources to promote fairness, fix historic inequities, and meet the varied needs of everyone in the community. This commitment is supported by training on budget development and through financial analysis and forecasting.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Unappropriated & Contingency	$0	$0	$0	$0
Total GF/non-GF	**$0**	**$0**	**$0**	**$0**
Total Expenses:	**$0**		**$0**	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	$7,476,565	$0	$7,242,652	$0
Taxes	$630,646,350	$0	$658,821,021	$0
Other / Miscellaneous	$16,315,006	$0	$18,570,452	$0
Interest	$4,000,000	$0	$6,000,000	$0
Beginning Working Capital	$137,593,220	$0	$124,380,380	$0
Total Revenue	**$796,031,141**	**$0**	**$815,014,505**	**$0**

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
	N/A	N/A	N/A
	N/A	N/A	N/A