



Health Department CBAC

TO: Chair Jessica Vega Pederson and Board of County Commissioners (7) pages

FROM: Health Department Community Budget Advisory Committee (CBAC)

DATE: Apr 25, 2024

SUBJECT: HD Community Budget Advisory Committee Report & Recommendations

EXECUTIVE SUMMARY:

FY 25 marked the third consecutive budget cycle with our current CBAC committee members. As we did last year, the committee supports and recommends prioritizing transformative investments for FY25 in behavioral health, corrections health, and workforce support for the department.

Behavioral Health continues to be both a highly visible and highly intersectional issue within the community, given the significant challenges faced by many of our neighbors and the concurrent impacts of substance use disorders on our behavioral health system. A program offer to expand the capacity of the department's Overdose Prevention and Response plan is our top out-of-target program offer recommendation for the current cycle.

In corrections health, our committee discussed the dual impact of systemic disparities in incarceration rates by race as well as in health outcomes for an incarcerated population with high-acuity health needs. Significant turnover and high vacancy rates in corrections health staffing, especially in patient-facing roles, pose a critical threat to service delivery that our committee sought to address with our second-ranked program offer.

The committee appreciates the department's recognition of the historical impact of health disparities and the current inequity in health outcomes across our community. In shaping our recommendations, we continue to ground our work in a values statement with the following guiding principles. These guiding principles affirm that:

- We are transformative leaders

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- We offer expert knowledge
- We uphold racial justice
- We operate with dignity and respect
- We believe in inter-cultural intelligence
- We hold ethics at the core

Your health department CBAC sends forward the following recommendations with both deep gratitude for the work of the Department as well as significant concerns about process and impact of the work of the CBAC committees.

PROCESS:

As in the past two budget cycles, our committee were asked to limit our consideration to out-of-target program offers. All of these program offers had already been selected, ranked, and put forward by the department in its own February transmittal letter to the Chair. As a whole, these seven program offers totaled just under \$9 million, or 1.74% of the \$512 million budget submission by the department in its transmittal letter.

Beginning in October 2023, the committee heard from representatives from the following Health Department divisions and the office of Diversity and Equity. Directors shared high-level budget priorities with the committee and committee members had the opportunity to ask questions about functions, operations and outlook.

- Valdez Bravo (Director's Office)
- Chantell Reed (Operations)
- Heather Mirasol (Behavioral Health)
- Myque Obiero and Rachael Lee (Corrections Health)
- Andrea Hamberg and Neisha Saxena (Public Health)
- Teresa Everson (Deputy Health Officer)
- Jenna Green and Adrienne Daniels (Integrated Clinical Services)
- Rachael Banks (Director's Office)
- Terralyn Wiley (Office of Diversity and Equity)

In evaluating program offers within the framework of current and emerging issues in our community, the committee utilized a matrix to measure community impact and department capacity, focusing on high-impact, ready-to-implement programs as well as longer-term investments. As federal ARPA funds are spent down, the committee's focus shifted to a return to core service delivery and investing in departmental infrastructure.

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Throughout our process, committee members increasingly had questions about our role and felt uncertain about how our feedback is considered and acted upon. These concerns prompted the committee to reach out to both the Health Department and the Office of Community Involvement on April 12, 2024. In an email, the committee asked for the following information: examples of how our past feedback during the FY23 and 24 budget cycles has impacted department decision-making, an understanding of how our FY25 feedback would be considered given the current timelines, clarity around the scope of our work and an understanding of how department leadership envisions the committee's role in the budget process going forward.

Our committee reached out a second time a week later to both the department and OCI after receiving no response. Department leadership did then acknowledge our outreach and offered to try to respond but did not answer any of the questions we put forward. We received no response from the Office of Community Involvement.

In an audit of the County budget process released in October 2023, the County Auditor's office recommended that in response to concerns from committee members, "...the Chair should direct the central budget office and departments to engage community budget advisory committees earlier in the budget process so their comments have more time to be addressed before the release of the Chair's proposed budget." Our committee strongly agrees with that recommendation and was disappointed to see that, like last year, the FY25 budget calendar does not include even a single day for consideration of our input prior to the Chair's budget being released as committee recommendation letters are due the same day. This marks the sixth time in the last seven budget cycles that there were less than ten days for consideration prior to the release of the Chair's budget.

Chair Vega Pederson's response to the audit states that "OCI [The Office of Community Involvement] is commencing a process over the next year to bring forth recommendations to the Board of County Commissioners to be implemented for FY 2025. The specifics of this update would include:

- a) Collecting community feedback from past and existing CBAC members and other partner organizations
- b) Collecting feedback from budget and department staff about the process and recommendations for improvement
- c) Incorporating any input from the Community Involvement Committee (CIC) on the budget process and broader community involvement
- d) Overseeing a working group of staff and community volunteers to produce recommendations for adoption to the Board of County Commissioners.

The letter goes on to inform the auditor's office that "...OCI is working to clarify the scope of work, expectations, and timeline for CBAC members and County staff to ensure a consistent

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vision moving forward.” We support these recommendations, however this committee has not been made aware of any steps to begin this process in the seven months since. As such, we have significant concerns about a lack of clarity and expectations continuing to hamper any effort for meaningful community engagement on the part of the committee.

EMERGING ISSUES & CHANGES:

During the past several budget cycles, the operations and funding from the department were significantly impacted by the COVID-19 response and an influx of federal ARPA dollars. As the work of the department returns to core service delivery and the federal funding winds down, FY 25 also marked the first year that the department was not exempt from general fund constraints during the current committee’s tenure. The department asked to differentiate general fund constraints by division, with some divisions offering a -2.5% constraint and others -5%, with the goal of limiting the impact on community partners and service delivery.

The committee shares the department’s commitment outlined in the transmittal letter to prioritize significant investments in behavioral health, to recognize, reconcile and rectify race-based inequities in service delivery and to support workforce restoration and stabilization plan.

Our committee emphasized the emphasis of the current housing crisis as a key barrier for accessing expanded behavioral health and addiction services as well as the impact of climate change and extreme weather events on service delivery and increasing community needs.

PROGRAM OFFER RECOMMENDATIONS: The committee puts forth the following recommendations for out-of-target program offer funding in the FY25 budget in the following order:

- 1. 40000B - Overdose Prevention & Response**

Many Multnomah County residents have had their lives negatively affected by accidental substance overdose, even before the recent increase in fentanyl-related concerns. Evidence has shown that the “War on Drugs” and similar punitive and reaction-based strategies have not been effective at reducing overdoses in the U.S. The methods employed in this program have shown more efficacy: prevention efforts supporting people in poverty and targeted identities; harm reduction approaches for safer substance use; and quick and reliable access to drug testing data.

Expanded access to naloxone by itself saves lives. As a part of the County’s Overdose Prevention and Response plan as well as the 90-day Fentanyl Emergency Declaration,

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overdose prevention and response is a critical investment in the current budget cycle and the committee's top priority.

2. 40059B - Additional Corrections Health Behavioral Health Staff

The repeal of Measure 110 in Oregon means that correctional facilities will need additional staff. The expected increase in arrests and convictions related to drug possession will increase their workload. Additionally, the reversal of this policy may require a redistribution of resources within correctional facilities.

It is crucial to recognize the wider implications of the repeal of Measure 110. This policy change affects public health, worsens racial disparities, and impacts community relations. Despite these challenges, attention should be given to public health objectives, and access to treatment and care for those affected by substance use should be ensured.

This request is for a mental health case manager and a behavioral health supervisor at MCDC. This addition of staff is not only about providing relief to correctional staff but also emphasizes our commitment to ensuring compassionate, equitable, and effective care for every individual under our supervision and care.

3. 40110 - Gun Violence Impacted Families Behavioral Health Team

Gun violence, shootings, and homicides have increased in Multnomah County. Exasperated political and community leaders in Portland acknowledge gun violence continues to rise in the city despite efforts to counter it. The committee recognizes gun violence is a racial justice issue fueled by discrimination and structural inequities in our society. Gun violence in Multnomah County disproportionately impacts our African American, Latinx, Asian, and African Refugee communities.

This program provides additional direct mental health services to youth and their families affected by gun violence. Therefore, the committee recommends funding this offer to improve health outcomes and provide trauma-informed services and community-informed practices in partnership with community partners and providers.

4. 40061C - Harm Reduction Street Outreach Team

Similar to program offer #40000B above, this program acknowledges the effectiveness of harm reduction approaches to address accidental overdoses and other substance-related issues. It focuses on strategies that work: connecting people to transitional housing, providing cell phones as lifelines to services, and building trust and rapport with people who typically have experienced trauma in our available helping systems.

We often say “it’s important to meet people where they’re at” and this program reflects that concretely.

5. 400007B - Restaurant Inspections Restoration

The Health Inspections and Education (HIE) program is crucial for safeguarding vulnerable populations that are disproportionately affected by health risks. Low-income communities are at a higher risk of contracting food and waterborne diseases due to poor sanitation practices. Marginalized communities may lack access to safe recreational spaces, increasing the likelihood of accidents or injuries. During outbreaks, rapid response and intervention are essential in preventing further spread, especially among marginalized communities. Equitable enforcement practices ensure fairness and inclusion in regulatory measures. Supporting HIE prioritizes the protection of our most vulnerable neighbors, ensuring that they live in safe and healthy environments. Investing in HIE means committing to upholding the health and dignity of every member of our community, regardless of their background or situation.

6. 40054 - Nurse-Family Partnership Restoration

The Nurse-Family Partnership (NFP) program stands as an indispensable lifeline for our community, offering invaluable support to first-time, low-income pregnant individuals through its innovative nurse home visiting services. With unwavering dedication, this program strives to achieve its dual goals of improving pregnancy outcomes and fostering optimal child health, development, and safety. The program's remarkable track record speaks volumes, with consistent evidence of enhanced prenatal health, reduced childhood injuries, extended birth intervals, heightened maternal employment, and improved school readiness for children.

NFP's strategic collaboration with the Healthy Birth Initiative (HBI) exemplifies its commitment to inclusivity and cultural responsiveness, particularly for African American first-time pregnant individuals. By integrating wraparound, culturally specific services and leadership development from HBI, NFP ensures equitable access to essential resources for all families. In endorsing the Nurse-Family Partnership program, we embrace a vision of a healthier, more resilient community where every family receives the support they need to thrive.

7. 40044B - Supplemental Data Sets Partnership with DCA

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This initiative is designed to align with our division's goals by leveraging the full potential of data automation to enhance equity and promote racial justice. Through data analysis, we can uncover hidden disparities and prioritize resources, interventions, and policies that address systemic biases. Furthermore, automating data processes streamlines our operations, enabling us to tackle a backlog of essential projects scored against comprehensive criteria such as racial equality, public disease response, data accessibility, and more.

Investing in these positions advances departmental goals and signifies our unwavering commitment to promoting equity and justice within our community.

ACKNOWLEDGEMENTS -

The Committee would like to give special thanks to Michael Eaves, Wendy Lear, Derrick Moten, Jonathan Livingston, Keenan Toya, and Trista Zugel at the Health Department for all of their time and support of our work. Special thanks to the Health Department program leaders for their insightful presentations, shared valuable experiences, and unwavering commitment to our community's well-being.

On behalf of our committee, we want to extend a warm and enthusiastic welcome to Rachael Banks, the new Health Department Director. We're happy to have you on board and look forward to collaborating with you and your team to enhance public health in our community.