

### Department Overview

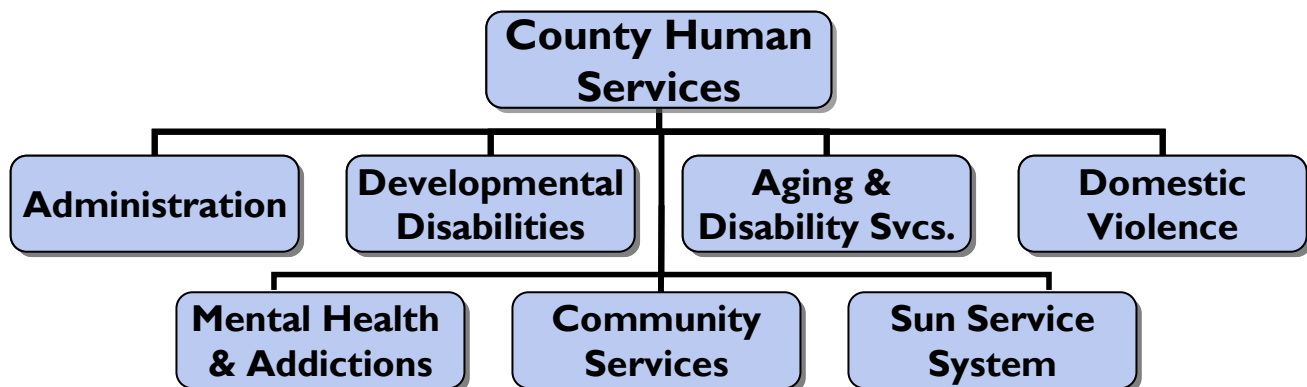
The Department of County Human Services (DCHS) mission is to enhance the quality of life for individuals and families with a vision of safe, healthy, caring, and diverse communities where hope, independence, learning, and opportunity prevail for all.

The department has a budget of over \$208 million and 700 employees. The department is the primary funder and provider of social services in Multnomah County for families in poverty, homeless families, homeless youth, survivors of domestic violence, low income seniors, people recovering from mental illness and addiction, and people with disabilities.

The department has deep collaborations with many local non-governmental organizations, other local governments and community advocates. The department is the managing partner for the Schools Uniting Neighborhoods (SUN) collaboration to provide wraparound services and enrichment for school age children and youth, many of whom live in poverty.

The department serves as the Area Agency on Aging, the Local Mental Health Authority, the Mental Health Organization under the Oregon Health Plan, and the designated Community Action Agency for Multnomah County. The department is responsible for developing systems of care, leading service development, coordinating and linking services for the county's most vulnerable and at-risk residents.

The department has seven divisions: Administration, Aging and Disability Services, Mental Health and Addiction Services, Developmental Disabilities Services, Schools Uniting Neighborhoods Services System, Community Services, and the Domestic Violence Coordinator's Office.



### Budget Overview

The Department of County Human Services has a FY 2013 budget of \$208.7 million, a decrease of \$6.3 million from the FY 2012 adopted budget. A majority of the decrease is because \$4.7 million of transportation and rent subsidies that used to pass thru Developmental Disabilities (DD) to clients are now being paid directly to clients through the state's eXPRS payment system. FTE increased by 19.87, a majority from the FY 2012 state rebalance in DD.

DCHS' General Fund budget (including the Video Lottery funds) increased by \$1.5 million from \$51.4 to \$52.9 in FY 2013. Additional General Fund was allocated for the following new programs:

25032 Gatekeeper Outreach (\$47,000) - provides training and outreach to identify and report older adults who may be at risk for abuse.

25059 - Peer-run Supported Employment Center (\$80,000) - provides employment and education opportunities for the mentally ill.

25145B - SUN Community Schools Expansion (\$144,000) - creates 3 new SUN community schools in high poverty priority neighborhoods.

25153 - Culturally Specific Parent Engagement (\$50,000) - provides parent education for African American families in East County.

Programs funded with one-time-only General Funds include:

25059 Peer-run Supported Employment Center	\$80,000
25133B HSVP Short Term Rent Assistance	\$500,000
25133D HSVP Streetroots Rosecity Guide	\$20,000
25135 Commercial Sexual Exploitation of Children	\$420,000
25139A Anti Poverty Services - Tax Preparation	\$20,000
25153 Culturally Specific Parent Engagement	\$50,000

DCHS' Fed/State budget decreased by \$7.7 million, from \$119.3 to \$111.5 million between FY 2012 and FY 2013. As noted above, the main reductions were in DD eXPRS payments. Also, \$2.3 million in American Recovery and Reinvestment Act (ARRA) funding expired in Community Service programs.

DCHS' budget for Verity, the County's mental health insurance program funded by the state, remained flat at \$44.3 million. In order to keep the Mental Health Crisis System intact, nearly \$2.0 million of Verity reserves were used to backfill state reductions. These funds are one-time-only and will require a mitigation plan for FY 2014.

Budget Trends*					
	FY 2011	FY 2012	FY 2012	FY 2013	
	<u>Actual</u>	<u>Current Estimate</u>	<u>Adopted Budget</u>	<u>Proposed Budget</u>	<u>Difference</u>
Staffing FTE	709.15	706.00	688.37	708.24	19.87
Personnel Services	\$59,635,281	\$60,300,936	\$62,714,276	\$65,393,985	\$2,679,709
Contractual Services	130,873,676	130,445,250	135,299,820	126,664,305	(8,635,515)
Materials & Supplies	14,323,602	16,166,974	17,041,552	16,655,742	(385,810)
Capital Outlay	0	0	0	0	0
<b>Total Costs</b>	<b>\$204,832,559</b>	<b>\$206,913,160</b>	<b>\$215,055,648</b>	<b>\$208,714,032</b>	<b>(\$6,341,616)</b>

\*Does not include cash transfers, contingencies or unappropriated balances.

## Successes and Challenges

Aging and Disability Services (ADS) works to ensure older adults and people with disabilities have control and choice over where they live. Eighty percent of nursing-home-eligible individuals are living in their own communities with supportive services.

Community Services successfully reunited 2,046 runaway youth with their families.

The Domestic Violence Coordination Office trained over 1,500 division staff, their partners and community members via 47 domestic violence trainings, raising awareness and enhancing community response to domestic violence.

ADS Adult Protective Services has preserved or recouped \$842,000 for abuse victims over the last year. A financial exploitation team works to retrieve funds and stem crime by those who prey on vulnerable people.

SUN Community Schools and partners provided 172,045 meals and leveraged over \$480,000 in federal resources. Emergency food pantries served over 15,600 people: one third of food distributed was fruit and vegetables.

Developmental Disabilities monitored 4,267 consumers through support service brokerages and direct case management.

Weatherization services were performed on 918 units, decreasing utility costs for vulnerable people and providing income to dozens of local contractors - including many Minority, Women and Emerging Small Businesses (MWESB).

MHASD opened the Crisis Assessment and Treatment Center (CATC) in June of 2011, a 16 bed adult sub-acute facility. Since its opening, the program has achieved the target length of stay of 6 days or less. It currently serves a split of 55% uninsured indigent and 45% Medicare / Medicaid insured clients.

The department continues to be challenged by limited capacity for both program data analysis and fiscal analysis. DCHS has few staff to respond to requests for outcome analysis, projections and trends. This reduces our ability to evaluate community needs and understand complex cost drivers of programming.

The anticipated reductions in the state General Fund will result in reductions for social services upon which some of the most vulnerable residents of Multnomah County rely. These services include: senior and disabled services, developmental disabilities services and mental health and addiction services. The federal budget for FY 2013 may also result in reduced services. DCHS is using all available opportunities to maximize grant dollars and leverage matching dollars to reduce the impact of state and federal cuts and maintain critical services.

### Diversity and Equity

DCHS has examined issues of equity over the last two years and initiated focused strategies to address key disparities that exist in the department. These efforts are a collaboration of department leadership, the DCHS Diversity Committee, DCHS Managers of Color and our exempt staff. Our goal is to ensure that DCHS is an equitable workplace, reflecting the values and diversity in the communities that we serve and thereby producing strong outcomes for our clients.

Overall, our department has increased the percentage of employees of color, from 22% to 23% in FY 2011. While we are recruiting more applicants in general, the applicant pool remains about 23% people of color. The department as a whole has not significantly increased the diversity of those hired over the last five years, however some divisions have made measurable progress. Twenty-nine percent of the employees hired in Aging and Disability Services Division in FY 2011 were people of color, which helped to increase the diversity of that workforce. To help to retain more employees of color we have also focused on increasing the percentage of work-out-of-class opportunities and promotions for employees of color. We have not made progress in the area of work-out-of-class, but did see improvement in promotions. Thirty percent of promoted employees were people of color in FY 2011, significantly higher than the 12% of the previous year.

Department leadership has continued our commitment to the intensive diversity curriculum called "Building Partnership Across Difference", with more than 100 DCHS staff scheduled to complete the 5 day training by June 2012. Our efforts to improve equity in our practices and services are ongoing. We understand that long term change requires real organizational and cultural shifts and department leadership is focused on creating those shifts.

### Budget by Division

Division Name	FY 2013 General Fund	Other Funds	Total Division Cost	Total FTE
Administration	\$4,263,647	\$1,999,183	\$6,262,830	43.50
Developmental Disabilities	2,129,160	14,698,723	16,827,883	126.90
Aging and Disability Services	7,758,866	35,799,061	43,557,927	308.05
Domestic Violence Coordination Office	2,335,564	1,271,815	3,607,379	8.13
Mental Health & Addiction Services	16,145,605	83,937,057	100,082,662	174.96
Community Services	9,400,521	18,541,163	27,941,684	29.50
SUN Service System	<u>8,977,931</u>	<u>1,455,736</u>	<u>10,433,667</u>	<u>17.20</u>
<b>Total County Human Services</b>	<b>\$51,011,294</b>	<b>\$157,702,738</b>	<b>\$208,714,032</b>	<b>708.24</b>

### Department Administration

The DCHS Administration provides leadership, vision and policy direction to the service divisions.

The Director's Office meets regularly with service divisions, sets policy, addresses issues of cultural competency, communicates internally and externally about programs, researches and evaluates programs, directs service delivery and serves as the Mental Health Authority.

Human Resources (HR) supports more than 700 departmental employees. HR addresses recruiting, hiring and retention issues; workforce planning; training; management; job performance issues; and labor relations.

Business Services provides the administrative, financial and business functions of the department including: development, management and oversight of the department's budget; accounts receivable and payable; purchasing; facilities coordination; and grants management. It also ensures that the department is in compliance with all County, State and Federal policies.

The Contracts Unit coordinates procurement and contracting functions for the department. The unit ensures implementation and compliance with all county contracting and procurement policies since the majority of funds administered within the department are contracted out to community partners.

### Significant Changes

Department Administration has undergone no significant structural changes in the previous year but has focused on at least three important initiatives:

- The Contracts Unit is heavily involved in the implementation of the contracts redesign process. It will also actively participate in the implementation of Supplier Relationship Management, while monitoring 400 current contracts.
- Department Administration has just completed the span of control review, which involved the efforts of human resource staff, budget analysts, and leadership. The resulting changes moved the department from a 1:9.1 to 1:9.8 supervisor per employee ratio.
- Representatives from throughout DCHS are working on Health System Transformation to develop the framework for an integrated system of physical health, behavioral health and other services for Oregon Health Plan members and the uninsured. DCHS is collaborating with representatives from health systems, government and provider agencies in the tri-county area to develop a regional plan and make recommendations to the Board of County Commissioners on Multnomah County's role in a Coordinated Care Organization.

### Developmental Disabilities Service Division

The Developmental Disabilities Service Division (DDSD) provides case management services linking consumers and families to available resources in the community that include Medicaid funded residential, employment and brokerage services for eligible clients. The goal is to assure that every person is safe, healthy and integrated into their community. This is done with person-centered planning to assure that each person's choices are respected and honored. DDSD serves over 4,200 people with intellectual and developmental disabilities diagnosed prior to the age of twenty two. Services may span the entire lifetime.

DDSD is the host for Region One, a five county regional crisis diversion program for DDSD consumers who meet certain crisis criteria. Partner counties include Clackamas, Clatsop, Columbia, and Washington. The program may provide crisis residential placement, but is focused on providing behavioral and situational assessment and support so people can stay in their current home.

DDSD will continue in FY 2013 to do outreach to the underrepresented and marginalized families and consumers with developmental disabilities. The importance of case management in assisting these families continues to be a subject of research (National Association of Social Workers) and cannot be overstated. Case management is the cornerstone for positive change in the lives of those we serve as it links families to services that include community advocates, food banks, legal support, and Medicaid services.

### Significant Changes

The DD Services for Adults program changed from serving adults ages 22 and up to 18 and up and a corresponding case load reduction was applied to the DD Services for Children program. This change became effective February 1, 2012 and improves our alignment with the state service model. A monitoring database was created for tracking adults in the revised age range. Monthly reporting and staff training will ensure more accurate statistical information.

DDSD reduced program supervision by 4.00 FTE for FY 2013 which expanded the division's management-to-staff ratio from 1:7 to 1:10.

As a result of changes to state Medicaid rules, clients who no longer qualify for Medicaid could not continue to be served by Support Service Brokerages. This increased the division's total adult case load by approximately 250 program consumers. The state allocated additional DD48 revenues to add 4.00 FTE case managers.

### Aging and Disability Services

Aging and Disability Services Division (ADS), the county's Area Agency on Aging and Disability, helps the county's 210,000 older adults, people with disabilities and veterans live independently by linking them to a wide range of quality services and resources that meet their diverse needs and preferences. A key goal is to reach older adults and people with disabilities and their families early to help them plan for their changing needs to maintain the best possible health and independence. National studies have shown that assuring easy access to information and options as early as possible allows older adults and people with disabilities to stay independent and/or transition to community settings more quickly and avoid nursing facility stays.

ADS is experiencing the predicted increase in the aging population, particularly the over-65 cohort and older adults over 85, in need of long term care (LTC) supports to remain independent. ADS is completing the transformation of its information and assistance services in accordance with the Aging and Disability Resource Connection (ADRC) model, a national best practice. The ADRC is a highly visible, trusted source for unbiased information and assistance with long term care and offers decision support for older adults, people with physical disabilities, their families and caregivers to assist them in determining what care options best fit their needs and preferences. In addition, ADS is preparing for changes to the delivery of LTC services as part of the state's transformation of health care.

### Significant Changes

ADS is actively preparing to meet the needs of the growing aging population. The agency and its surrounding county partners have established an ADRC Metro Collaborative to provide coordinated and streamlined access to long term care services and supports. It is integrating the learnings from recent grants to pilot core ADRC services, including options counseling and care transition service to enhance existing services.

These activities are also positioning ADS to respond to the upcoming changes to the health care system. ADS, in partnership with the Metro Collaborative, is building relationships with healthcare and community partners to posture for care transition funding from the Center of Medicare and Medicaid Services (CMS).

ADS will define its role in health care transformation through collaborating and coordinating with the Coordinated Care Organization (CCO) that will be serving the metropolitan area.

New General Fund resources are included for the Gatekeeper Outreach program (25032).



### Domestic Violence Coordination Office

The Multnomah County Domestic Violence Coordination Office (DVCO) provides leadership, consultation and technical assistance in the development of effective, state-of-the-art responses to domestic violence (DV).

DVCO manages County, State and Federal funds for victim services; leads, facilitates the development and implementation of collaborative projects; and assists in the procurement of resources for those projects. Collaborative projects led by DVCO include DV Enhanced Response Team (DVERT), assistance to victims and their children involved in the Child Welfare system (Safe Start), transitional housing projects and the Defending Childhood Initiative to improve responses to children exposed to a wide range of violence.

The county has built a multi-disciplinary, multi-jurisdiction, coordinated system that responds to victims and perpetrators: 5,000 victims receive community-based, in-person services, 2,000 receive District Attorney-based services, and 30,000 receive assistance by phone. Over 4,000 offenders are jailed, 1,400 are prosecuted and 1,000 are supervised by Department of Community Justice.

Despite these efforts, DV remains a significant and complex problem. New national surveys found that 1 in 15 children witness domestic violence each year, and 1 in 4 women experience severe physical violence by an intimate partner in their lifetime. Coordinated and collaborative efforts to more effectively respond to the highest risk cases continue throughout the system.

Division changes in the past year are in three key areas:

**Staffing Changes:** A new program manager/DV Coordinator was hired in April 2011. Staff turnover, restructuring and grants brought several new staff into the division.

**Grants:** DCHS received a second Defending Childhood Grant from the Department of Justice, one of eight demonstration projects nationally. This three-year grant will fund activities identified in the strategic plan developed in FY 2011. Activities will primarily focus on multidisciplinary training and capacity building to improve service providers' ability to recognize, respond to and mitigate the effects of children's exposure to violence.

**Gateway Center for Domestic Violence Services:** The joint Multnomah County-City of Portland-supported Gateway Center opened in September 2010. In its first 12 months, the Center had 7,000 visits and served 2,000 unduplicated individuals, highlighting a significant and previously unmet need for domestic violence services. Multnomah County supports Gateway through the in-kind contribution of facilities and related costs. The City of Portland currently funds administrative staff and victim services.

### Significant Changes



### Mental Health and Addiction Services

Multnomah County Mental Health and Addiction Services Division (MHASD) provides a comprehensive system of care to prevent, intervene in, and treat mental illness and addiction in adults, youth and children. Through consumer-focused, culturally responsive and evidence-based practices, MHASD serves low-income, uninsured, and homeless individuals and families, as well as anyone who is in crisis.

Multnomah County has more than 735,000 residents. Among those adult residents living at or below 200% of the Federal Poverty Level (FPL), 25% are estimated to have a mental illness. MHASD serves a large number of adults whose mental illness is severe enough to require residential care in one of the 544 licensed beds in our county.

A recent state survey found that 47,000 Oregonians were problem gamblers. MHASD gambling addiction treatment uses evidence-based practices in an outpatient setting to serve more 350 gamblers and family members each year.

MHASD has built a system of care that all of our citizens can use, whether they are uninsured or are one of the more than 100,000 Oregon Health Plan members enrolled in Verity, the County's mental health organization. Our 24/7 crisis services and our involuntary commitment investigation services are here for anyone in need.

### Significant Changes

This past year, the County, in collaboration with City of Portland, the State, and Central City Concern, opened the Crisis Assessment and Treatment Center (CATC), a 16 bed adult sub-acute facility. Since its opening, the program has achieved the target length of stay of 6 days or less. It currently serves a split of 55% uninsured indigent and 45% Medicare / Medicaid insured clients.

MHASD is actively involved in the Bazelon Project, a group of key partners working to prevent unnecessary police involvement in mental health crises. We are working with the Portland Police Bureau to develop protocols for safely taking transferred 911 calls from people better served by the Mental Health Call Center.

The MHASD staff is working to implement the State of Oregon's Adult Mental Health Initiative (AMHI) by developing supported housing beds that include 7-day-a-week in-home supports to help individuals remain in the community.

MHASD is rolling out Evolv, the electronic health record system to replace the existing system, Raintree. This required significant staff time to develop, and will require training to fully implement.

Funding is included for Peer Run Supported Employment (25059) services and ongoing funding is included for Addictions Detoxification/Post Detoxification Housing (25090B).

### Community Services Division

The Community Services Division's mission is to align services in order to create systems of support that impact poverty and increase academic success. Services are organized into three areas: Energy; Homelessness and Housing; and Anti-Poverty/Prosperity. A variety of services and supports are provided to 23,217 of the approximately 70,000 county households who are at or below 200% of the Federal Poverty Level. This is achieved through a mix of contracted services provided by non-profit social service organizations, direct services provided by county staff, and involvement with community and cross-jurisdictional initiatives. The division is the Community Action Agency for Multnomah County.

Forty-five percent of Portland households who pay more than 30% of their monthly income for housing are cost burdened. Workers with a full-time, minimum wage job cannot afford apartments of any size at fair market rates in the metro area without being cost burdened. County unemployment rates remain in the double digits. Twenty-five percent of county children under the age of five live in poverty, with children of color represented at three times the rate of Caucasian children.

This is the environment in which the division works and current need for services far outstrips available resources. The division's mission is to provide innovative and strategic thinking, leadership, action, and investment in economic development. This is critical, if our ability to exist and prosper as a caring community is to be preserved.

Significant changes include:

- Systems Alignment: beginning the next phase of Action for Prosperity II; continuing work on the 10 Year Plan to End Homelessness in collaboration with Portland Housing Bureau and Home Forward.
- Innovations: expanding the 30 Families in 30 Days pilot into the Rapid Rehousing Initiative (2511B); and implementing the Community Healing Initiative for African-American and Latino youth as a part of youth gang violence prevention.
- Efficiencies: reduction of 3.00 FTE through job reassignments to improve Weatherization Program client service; and reduction of approximately \$147,273 in costs to the Multnomah Treatment Fund (MTF) through the Homeless Benefits Recovery Project, allowing MTF to serve additional uninsured members of the community living with mental illness.
- Includes increased funding for Short-Term Rent Assistance (25133B), Action for Prosperity (25139C), and funding for outreach and shelter services for commercially sexually exploited children (25135).

### Significant Changes

### SUN Service System

The SUN Service System Division (SUNS SS) has three principal areas of oversight: contracting for services that promote academic success and family self-sufficiency within the SUNS SS system; program delivery and service coordination through the Bienestar Social Service program at the Baltazar Ortiz Community Center; and management of data collection, reporting and evaluation activities.

As a service delivery system, the division contracts for a continuum of school-based and community-sited services that support student success and family self-sufficiency. Services include 64 SUN Community Schools, youth case management, early childhood supports and anti-poverty/prosperity services for families. An important emphasis in the SUN SS is on partnership development; administrative staff engage in activities to align services, build partnerships and strengthen the system. Staffing for the SUN Service System Coordinating Council, its workgroups, and program development are examples of these efforts. The Bienestar Social Service program is an important gateway into an array of services for Multnomah County's Latino community. Staff at Bienestar coordinate resources and services on site, triage hundreds of requests for assistance, and provide alcohol and drug and mental health services. Data collection, technical assistance, reporting and program evaluation functions are implemented across both the SUN SS and the Community Services divisions.

### Significant Changes

As a follow-up to our successful Early Childhood Community Schools Linkage project, the division was awarded a three-year project grant that uses Mind in the Making and the Seven Essential Skills as a focal point for building bridges between early childhood systems and SUN Community Schools. Training sessions provide participants the opportunity to reflect on their own experiences and practices, learn what researchers have discovered about how children learn best, and discuss how to apply this research in their role as a parent or educator.

The division was awarded a grant to expand our SUN Community Schools Training and Technical Assistance capacity. As a national leader in the community schools movement, SUN staff are often called upon to provide training and technical assistance to other communities seeking to develop a successful community schools model. The grant directly supports that work.

For the second year, the division was granted an AmeriCorps member to be sited at the Bienestar de la Familia program to enhance meaningful youth engagement opportunities for Latino youth in the NE Cully neighborhood.

Funding is included for culturally specific parent engagement services in East County (25153) and to expand SUN Community Schools (25145B) by matching East County School District funding.

# County Human Services

fy2013 proposed budget

## Department of County Human Services

The following table shows the programs that make up the departments total budget. The individual programs follow in numerical order.

Prog. #	Program Name	FY 2013 General Fund	Other Funds	Total Cost	FTE
<b>Department Administration</b>					
25000	Director Office	\$823,735	\$419,829	\$1,243,564	5.00
25001	Human Resources	462,850	492,489	955,339	7.00
25002	Business Services Unit	2,079,805	928,537	3,008,342	21.50
25003	Contracts	897,257	158,328	1,055,585	10.00
<b>Developmental Disabilities Services</b>					
25010	DD Administration and Support	851,078	1,874,577	2,725,655	19.00
25011	DD Systems, Contracts and Budget	502,238	3,012,398	3,514,636	9.00
25012	DD Services for Adults	90,000	3,293,798	3,383,798	35.00
25013	DD Services for Children	100,799	3,001,913	3,102,712	31.80
25014	DD Abuse Investigations	204,992	660,029	865,021	8.00
25015	DD Monitoring and Crisis Services Unit	0	2,500,016	2,500,016	17.10
25016	DD Eligibility and Intake Services	380,053	355,992	736,045	7.00
<b>Aging and Disability Services</b>					
25020A	ADS Access and Early Intervention Services	3,104,004	6,205,389	9,309,393	21.35
25021	Multnomah Project Independence	298,112	0	298,112	1.00
25022	ADS Adult Care Home Program	61,662	1,725,466	1,787,128	13.00
25023	ADS Long Term Care	1,935,552	22,708,017	24,643,569	218.80
25024A	ADS Adult Protective Services	855,376	4,116,024	4,971,400	37.60
25026	ADS Public Guardian/Conservator	1,160,577	0	1,160,577	10.00
25027	ADS Administration	131,394	1,044,165	1,175,559	5.80
25030	ADS Elders in Action Commission and Personal Advocacy	165,189	0	165,189	0.00
25032	Gatekeeper Outreach Identifying Vulnerable Adults	47,000	0	47,000	0.50
<b>Domestic Violence</b>					
25040A	Domestic Violence Victims Services and Coordination	2,335,564	1,271,815	3,607,379	8.13

# County Human Services

fy2013 proposed budget

Prog. #	Program Name	FY 2013 General Fund	Other Funds	Total Cost	FTE
<b>Mental Health and Addictions Services</b>					
25050	MHASD Administration	139,295	1,108,567	1,247,862	7.00
25052	Medical Records for MHASD	710,637	0	710,637	8.00
25053	Mental Health Quality Management and Protective Services	460,356	1,366,409	1,826,765	14.10
25054	MHASD Business and Finance	298,721	1,748,630	2,047,351	7.85
25055A	Behavioral Health Crisis Services	1,220,787	3,624,395	4,845,182	10.07
25055B	Behavioral Health Crisis Services Scale Up	0	2,062,583	2,062,583	8.16
25056	Mental Health Crisis Assessment and Treatment Center (CATC)	597,500	2,822,494	3,419,994	0.00
25057	Inpatient, Subacute & Residential MH Services for Children	0	5,004,486	5,004,486	0.00
25058	Mental Health Commitment Services	1,145,981	6,634,106	7,780,087	30.10
25059	Peer-run Supported Employment Center	80,000	0	80,000	0.00
25060A	Mental Health Residential Services	1,127,259	9,264,877	10,392,136	8.60
25061	Adult Mental Health Initiative (AMHI)	0	2,644,842	2,644,842	10.98
25062	Mental Health Services for Adults	0	18,719,001	18,719,001	0.50
25063	Mental Health Treatment & Medications for the Uninsured	1,343,582	53,190	1,396,772	0.00
25064	Early Assessment and Support Alliance	0	1,130,603	1,130,603	7.20
25065A	Mental Health Services for Victims and Survivors of Domestic Violence	0	67,000	67,000	0.00
25066	Mental Health Organization Provider Tax	0	427,728	427,728	0.00
25067	Community Based Mental Health Services for Children and Families	1,677,147	10,349,998	12,027,145	18.35
25068	Multnomah Wraparound	0	1,770,293	1,770,293	13.20
25075	School Based Mental Health Services	705,649	911,906	1,617,555	13.85
25078	Culturally Specific Mental Health Services	1,324,545	0	1,324,545	0.00
25080	Adult Addictions Treatment Continuum	2,786,340	8,607,578	11,393,918	8.69
25085	Addiction Services Gambling Treatment and Prevention	0	717,995	717,995	0.31
25086	Addiction Services Alcohol and Drug Prevention	0	301,952	301,952	0.00
25088	Coordinated Diversion for Persons with Mental Illness	230,804	682,595	913,399	8.00
25090A	Addictions Detoxification and Post-Detoxification Housing	1,174,308	1,878,359	3,052,667	0.00

# County Human Services

fy2013 proposed budget

Prog. #	Program Name	FY 2013 General Fund	Other Funds	Total Cost	FTE
25090B	Addictions Detoxification & Post-Detoxification Housing Scale Up	205,000	0	205,000	0.00
25091	Sobering	643,415	0	643,415	0.00
25094	Family and Youth Addictions Treatment Continuum	274,279	881,475	1,155,754	0.00
25098	Family Involvement Team	0	1,155,995	1,155,995	0.00
<b>Community Services</b>					
25111A	Homeless Families' Shelter and Emergency Services	534,562	347,579	882,141	0.00
25111B	HFSES - Rapid Re-Housing Initiative	325,000	0	325,000	0.00
25114	Bridges to Housing	971,204	0	971,204	0.00
25115A	Homeless Benefit Recovery Project	411,297	0	411,297	0.00
25118	Community Services Administration	908,433	0	908,433	7.50
25119	Energy Assistance	70,986	9,163,452	9,234,438	4.04
25121	Weatherization	66,919	2,865,754	2,932,673	9.96
25123	Youth Gang Prevention - Community Healing Initiative	1,311,032	0	1,311,032	1.00
25127	Court Care	29,390	29,390	58,780	0.00
25133A	Housing Stabilization for Vulnerable Populations	1,352,568	1,460,234	2,812,802	3.00
25133B	HSVP - Short-Term Rent Assistance	500,000	0	500,000	0.00
25133D	HSVP - Streetroots	20,000	0	20,000	0.00
25135	Commercial Sexual Exploitation of Children - Victims' System of Care	420,000	0	420,000	0.00
25136A	Homeless Youth System	621,705	3,332,679	3,954,384	0.83
25138A	Runaway Youth Services	803,403	194,990	998,393	0.17
25139A	Anti-Poverty Services	793,811	795,501	1,589,312	2.00
25139C	APS - Action for Prosperity Family Reunification Project	195,000	0	195,000	0.00
25140A	Community Development	65,211	351,584	416,795	1.00

# County Human Services

fy2013 proposed budget

Prog. #	Program Name	FY 2013 General Fund	Other Funds	Total Cost	FTE
<b>SUN Service System</b>					
25143A	SUN Service System Administration	938,372	0	938,372	7.32
25145A	SUN Community Schools	3,467,728	1,049,821	4,517,549	1.98
25145B	SUN Community Schools Expansion	144,000	0	144,000	0.00
25147A	Child and Family Hunger Relief	125,000	0	125,000	0.50
25149A	Social and Support Services for Education Success	1,957,867	311,871	2,269,738	1.00
25151A	Parent Child Development Services	1,414,436	94,044	1,508,480	1.00
25153	Culturally Specific Parent Engagement	50,000	0	50,000	0.00
25154	Alcohol, Tobacco and Other Drug Services	127,890	0	127,890	0.00
25155	Services for Sexual Minority Youth	109,614	0	109,614	0.00
25156A	Bienestar Social Services	<u>643,024</u>	<u>0</u>	<u>643,024</u>	<u>5.40</u>
<b>Total Department of County Human Services</b>		<b>\$51,011,294</b>	<b>\$157,702,738</b>	<b>\$208,714,032</b>	<b>708.24</b>



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**Lead Agency:** County Human Services

**Program Contact:** Kathy Tinkle

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Department of County Human Services (DCHS) Director's Office provides vision, leadership, and policy direction; facilitates the development of the department's mission and strategic direction; functions as the County's Mental Health Authority; and sets Departmental priorities that support the overall county mission.

### Program Description

The DCHS Director's Office is responsible for ensuring that programs and activities are responsive and accountable, particularly in regard to legislative mandates. The DCHS Director's Office is responsible for communicating the department's vision, mission, and priorities to decision makers, community partners, citizens and employees. The Director's Office takes the lead role in building partnerships that align service delivery in the most effective manner and in generating additional public/private resources in support of the human service system of care.

The DCHS Director's Office initiates and collaborates in planning with county elected officials, community leaders, other jurisdictions and leaders of other county departments; provides clear direction and decision making; defines the mission and vision for the department; continuously seeks improvements and new innovations; and communicates outcomes and evaluations.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number of formal communications to employees <sup>1</sup>	89	50	50	50
Outcome	Advisors agree/strongly agree with statement: Overall, D.O. does its job well <sup>2</sup>	0.0%	92.0%	100.0%	0.0%
Output	Legislative contacts <sup>3</sup>	26	15	25	25

### Performance Measure - Description

<sup>1</sup>Formal communications include director's brown bag sessions, all-staff emails and meetings with staff groups such as district offices or the department Employees of Color employee group.

<sup>2</sup>This outcome is measured by a survey of advisory group members in alternating years. The survey was completed January 2012, and will be repeated January 2014.

<sup>3</sup>Legislative contacts - This is a measure suggesting the degree of communication with legislative partners. Number will vary from year to year, owing to biennial legislative session.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$378,460	\$184,252	\$542,424	\$222,508
Contracts	\$207,733	\$69,625	\$206,743	\$134,911
Materials & Supplies	\$31,185	\$16,090	\$6,930	\$43,500
Internal Services	\$11,547	\$171,908	\$67,638	\$18,910
Total GF/non-GF:	<b>\$628,925</b>	<b>\$441,875</b>	<b>\$823,735</b>	<b>\$419,829</b>
Program Total:	<b>\$1,070,800</b>		<b>\$1,243,564</b>	
Program FTE	2.68	1.32	3.62	1.38
<b>Program Revenues</b>				
Fees, Permits & Charges	\$628,925	\$0	\$823,735	\$0
Intergovernmental	\$0	\$441,875	\$0	\$419,829
<b>Total Revenue:</b>	<b>\$628,925</b>	<b>\$441,875</b>	<b>\$823,735</b>	<b>\$419,829</b>

**Explanation of Revenues**

\$305,178 - Title XIX: Based on FY12 Revised Budget

\$114,651 - State Mental Health Grant Local Admin: Based on FY12 Revised Budget

\$823,735 - County General Fund Department Indirect: Based on FY13 Dept Indirect Rate published by Central Finance

**Significant Program Changes**

**Last year this program was:** #25000, Director's Office

Add 1.0 FTE Program Specialist Senior, this position will focus on department wide initiatives and planning/policy development for critical departmental issues.

**Lead Agency:** County Human Services

**Program Contact:** Kathy Tinkle

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

### Executive Summary

DCHS Human Resources support nearly 700 regular and 33 temporary employees located throughout the county. HR services include recruiting, hiring and retaining staff; workforce and succession planning; new employee orientation; employee/labor relations; records management; management and employee training; employment law and labor contract compliance; and performance management consultation.

### Program Description

The Human Resources team provides services and consultation to managers and employees. Represented employees are covered by one of two labor contracts and some work multiple shifts/schedules that span 24 hour/daily operations. Principal functions and goals of the Human Resources group include: 1. Organizational consultation to ensure HR services and strategies support and add value to DCHS business strategies; 2. Performance management coaching to ensure fair and equitable treatment for all employees and adherence to the county's personnel rules, policies and labor contracts; 3. Integration of departmental HR services with Central Human Resources and Labor Relations to develop and implement consistent and effective HR solutions and programs; 4. Succession and workforce planning to ensure a diverse and talented pool of employees to fill future openings.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number of recruitments conducted	136	110	178	140
Outcome	Management satisfaction with HR consultation and services <sup>1</sup>	59.0%	70.0%	75.0%	75.0%

### Performance Measure - Description

<sup>1</sup> Management satisfaction increased from 18% last year to 59% in 2011.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$375,579	\$298,395	\$378,208	\$453,033
Contracts	\$1,307	\$100	\$700	\$800
Materials & Supplies	\$2,540	\$17,302	\$1,001	\$18,299
Internal Services	\$6,608	\$52,839	\$82,941	\$20,357
Total GF/non-GF:	<b>\$386,034</b>	<b>\$368,636</b>	<b>\$462,850</b>	<b>\$492,489</b>
Program Total:	<b>\$754,670</b>		<b>\$955,339</b>	
Program FTE	3.36	2.64	3.31	3.69
<b>Program Revenues</b>				
Fees, Permits & Charges	\$96,722	\$0	\$31,471	\$0
Intergovernmental	\$0	\$368,636	\$0	\$492,489
<b>Total Revenue:</b>	<b>\$96,722</b>	<b>\$368,636</b>	<b>\$31,471</b>	<b>\$492,489</b>

**Explanation of Revenues**

\$377,838 - Title XIX: Based on FY12 revised budget

\$114,651 - State Mental Health Grant Local Admin: Based on FY12 revised budget

\$31,471 - County General Fund Department Indirect: Based on FY13 Dept Indirect Rate published by Central Finance

\$431,379 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25001, Human Resources

Increases 1.00 FTE - Human Resource Analyst Senior, a position that will focus on equity and outreach.

**Lead Agency:** County Human Services

**Program Contact:** Kathy Tinkle

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Department of County Human Services (DCHS) Business Services provides administrative, financial and business support for the department. Services include development, management and administration of the department's multimillion dollar budget; grants management; accounts receivable; accounts payable; purchasing; facilities coordination; and customer service via the reception desk. Business Services staff serve as liaison between the department and internal service providers such as County Finance, Central Budget, Facilities and Property Management, Information Technology, and Fleet, Records, Electronics, Distribution and Stores(FREDS).

### Program Description

Business Services supports the work of the department by providing: budget development, management and reporting; accounts payable and receivable; grant accounting and reporting for approximately 140 funding sources; and implementation of, and compliance with, all county, state and federal fiscal policies and procedures related to the business of this department.

Business Services personnel provide administrative and support services for the department; work across the county with other departments and agencies in coordinating the provision of information technology, facilities management and FREDS; function as liaison to the DCHS Citizen Budget Advisory Committee; and represent the department on several countywide workgroups and committees.

DCHS Business Services provides responsible leadership; sound budgetary and financial management; and delivers results that are consistent with the department's and county's priorities.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Percent of invoices paid in 30 days or less	76.0%	77.0%	75.0%	75.0%
Outcome	Percent of financial reports submitted to the grantor error free	99.0%	99.0%	99.0%	99.0%

### Performance Measure - Description

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$1,160,328	\$728,346	\$1,244,974	\$711,517
Contracts	\$810,270	\$6,400	\$742,375	\$10,500
Materials & Supplies	\$35,864	\$22,514	\$4,367	\$42,655
Internal Services	\$49,269	\$323,522	\$88,089	\$163,865
Total GF/non-GF:	<b>\$2,055,731</b>	<b>\$1,080,782</b>	<b>\$2,079,805</b>	<b>\$928,537</b>
Program Total:	<b>\$3,136,513</b>		<b>\$3,008,342</b>	
Program FTE	13.30	8.20	14.26	7.24
<b>Program Revenues</b>				
Fees, Permits & Charges	\$621,324	\$0	\$865,991	\$0
Intergovernmental	\$0	\$1,080,782	\$0	\$928,537
<b>Total Revenue:</b>	<b>\$621,324</b>	<b>\$1,080,782</b>	<b>\$865,991</b>	<b>\$928,537</b>

**Explanation of Revenues**

\$770,09 - Title XIX: Based on FY12 revised budget

\$158,328 - State Mental Health Grant, Local Admin: Based on FY12 revised budget

\$865,991 - County General Fund Department Indirect: Based on FY13 Dept Indirect Rate published by Central Finance

\$688,641 - County General Fund Match

\$525,173 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25002, Business Services Unit

Reduced 1.00 FTE - Finance Specialist Sr. (Vacant); Adds 1.0 FTE Finance Manager to oversee and manage finance functions at the department level.



**Lead Agency:** County Human Services

**Program Contact:** Kathy Tinkle

**Program Offer Type:** Support

**Related Programs:**

**Program Characteristics:**

### Executive Summary

DCHS Contracts Unit coordinates and provides all procurement and contracting functions for the department. The unit serves as liaison between the department and county Central Purchasing. Nearly 65% of the total funds in the department are contracted to community-based providers for services to the vulnerable populations served by DCHS. The unit ensures implementation of and compliance with county contracting and procurement policies and procedures.

### Program Description

DCHS Contracts Unit provides procurement and contracting support for more than 600 contracts and amendments for Aging and Disability Services, Developmental Disabilities Services, Mental Health and Addiction Services, the Domestic Violence Coordinator's Office, the SUN Service System and Community Services.

In FY13, the Contracts Unit will continue to take a lead role in the implementation of the January 2009 Contract Action Team Report recommendations through the Contract Redesign process. It will also actively participate in the implementation of Supplier Relationship Management(SRM).

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number of executed contracts and amendments <sup>1</sup>	400	400	400	400
Outcome	Percent of annual contract renewals executed prior to July 1st <sup>2</sup>	66.0%	80.0%	51.0%	50.0%

### Performance Measure - Description

<sup>1</sup> The number of new contracts written for FY13 will remain steady at 400 due to the five year contracts already in place. Consequently, the heavy workload will be shifted to updating the internal SAP contract documents.

<sup>2</sup> Due to timing of the Contract Services Redesign (CSR) and Supplier Relationship Management(SRM) implementation, the overall outcomes for FY13 may be impacted.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$888,541	\$22,043	\$789,008	\$144,076
Contracts	\$5,056	\$0	\$5,056	\$0
Materials & Supplies	\$3,604	\$18,271	\$6,569	\$12,383
Internal Services	\$10,625	\$52,452	\$96,624	\$1,869
Total GF/non-GF:	<b>\$907,826</b>	<b>\$92,766</b>	<b>\$897,257</b>	<b>\$158,328</b>
Program Total:	<b>\$1,000,592</b>		<b>\$1,055,585</b>	
Program FTE	9.79	0.21	8.41	1.59
<b>Program Revenues</b>				
Fees, Permits & Charges	\$172,915	\$0	\$0	\$0
Intergovernmental	\$0	\$92,766	\$0	\$158,328
Total Revenue:	<b>\$172,915</b>	<b>\$92,766</b>	<b>\$0</b>	<b>\$158,328</b>

**Explanation of Revenues**

\$158,328 - State Mental Health Grant Local Admin: Based on FY12 revised budget  
\$897,257 - County General Fund

**Significant Program Changes**

Last year this program was: #25003, Contracts

**Lead Agency:** County Human Services

**Program Contact:** Patrice Botsford

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Developmental Disabilities Administration provides oversight and assures Medicaid status of the Developmental Disabilities Services Division. This unit ensures more than 4,200 people are provided quality case management, and, where eligible, provides residential services in the community, and employment supports. Administration leads the agency in continuous quality performance improvement through records management; monthly quality assurance activities that include comprehensive file reviews, staff training and site visits; and strategic analysis of DDSD business functions.

### Program Description

Developmental Disabilities Administration oversees all programs and partners, and seeks resolution on complaints and grievances. In addition, the program influences state policy. It maximizes resources by leveraging local funds and collaborating with other counties; develops the workforce; and seeks to continuously improve service delivery. Administration supports the accountability of leadership, resource management and performance-based outcomes and assures outreach is extended to diverse under-represented populations. The division leverages federal match for administrative services using county funds to provide administrative tracking and oversight required by the state.

In an effort to shift towards industry best practices there have been some significant changes to the methodology used for quality assurance in the division. In this new methodology, DD management reviews client records using a stratified sampling method with a more focused review that is statistically valid, and is in compliance with federal and state requirements and the most recent Oregon Administrative Rule changes. Along with these changes, the division has also improved its performance outcome measures as a result of consultation with the Federal Centers for Medicare and Medicaid Services Technical Assistance contractor. As a result of these changes there will be significant reduction in the number of reviews needed this year.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number of client records audited annually for compliance	0	3,900	1,300	1,300
Outcome	% of records audited that are Medicaid Compliant	0.0%	65.0%	65.0%	70.0%

### Performance Measure - Description

Performance Measure unchanged but significant change in methodology per Program Description.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$0	\$1,288,762	\$0	\$1,746,491
Contracts	\$686,461	\$52,195	\$686,461	\$52,195
Materials & Supplies	\$0	\$28,114	\$3,699	\$18,418
Internal Services	\$0	\$205,327	\$160,918	\$57,473
Total GF/non-GF:	<b>\$686,461</b>	<b>\$1,574,398</b>	<b>\$851,078</b>	<b>\$1,874,577</b>
Program Total:	<b>\$2,260,859</b>		<b>\$2,725,655</b>	
Program FTE	0.00	14.00	0.00	19.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,354,264	\$0	\$1,874,577
Other / Miscellaneous	\$0	\$220,134	\$0	\$0
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,574,398</b>	<b>\$0</b>	<b>\$1,874,577</b>

**Explanation of Revenues**

\$1,418,312 - State Mental Health Grant Local Admin: Based on FY12 revised budget

\$456,265 - State Mental Health Grant Case Management: Based on FY12 revised budget and FY11 Accepted Match Application

\$164,617 - County General Fund

\$686,461 - County General Fund Match - Based on FY12 Accepted Match Application

**Significant Program Changes**

✔ **Significantly Changed**

**Last year this program was:** #25010, DD Administration and Support

1.0 FTE Program Specialist Sr - Add from FY12 re-balance

2.0 FTE Office Assistant 2 - Add from FY12 re-balance

1.0 FTE Office Assistant 2 - NEW

1.0 FTE Program Specialist Sr - NEW

**Lead Agency:** County Human Services

**Program Contact:** Patrice Botsford

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Developmental Disabilities Systems, Contracts and Budget unit provides oversight for the division's budget, client systems for enrolling clients into services, and procurements and contracts. The unit is responsible for managing funding for comprehensive services to clients. Unit staff track and verify revenue, ensure the funds are applied to appropriate cost centers, and oversee expenses and changes that are incurred. The unit conducts monthly review of each service element to ensure they balance to the state CPMS system for those services paid by the county and to eXPRS for those services paid directly by the state. The unit is responsible for submitting all required forms to the state for client service changes, monitoring funding for services and ensuring appropriate application of waived services. In addition, the unit ensures availability of state funded services to clients by managing and monitoring provider contracts.

### Program Description

In maintaining and managing the personnel budget, the division works with the Department Administration and Business Services to identify revenue versus positions and costs to develop an annual budget for the division. This also includes processing budget modifications and providing budget analysis as needed. The unit is responsible for management of service contracts with providers which involves determination of regulatory requirements; initiation of appropriate contracts, amendments and negotiation of contract terms and conditions; as well as public procurements and following and implementing county administrative procedures. The unit is responsible for tracking and verifying revenue for 24-hour residential, foster care and employment which are direct pay to providers from the state; transportation, rent subsidy, county crisis funds, family support funds, kids long-term diversion and adult in-home services which are paid through the county to providers, as well as tracking and verifying revenues for adult protective services, targeted case management and LA02 (local admin funds) which are for personnel and operating expenses. This includes the ongoing review and reporting of funding allocations, service expenditures, completing and securing budget approval, verifying client enrollment in the service and required reporting. In managing the revenue and expenditures, the unit tracks all budget costs for 130 employees and approximately 1,500 clients in comprehensive waived services.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	% of 0337 forms accurately processed monthly <sup>1</sup>	0.0%	80.0%	95.0%	90.0%
Outcome	% of errors noted in monthly CPMS reconciliation <sup>2</sup>	0.0%	20.0%	3.5%	5.0%

### Performance Measure - Description

<sup>1</sup> The 0337 form is the mechanism in which clients are entered into and exited from services. This program is responsible for ensuring accurate completion and data entry into the State eXPRS payment system.

<sup>2</sup> This unit is responsible for reconciling expenditures to funds received from Office of Developmental Disabilities Services for support services. This reconciliation ensures that our information correlates to what the State CPMS system has.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$0	\$1,514,546	\$0	\$848,627
Contracts	\$448,842	\$44	\$422,189	\$0
Materials & Supplies	\$24,000	\$7,445,127	\$5,000	\$2,135,077
Internal Services	\$0	\$117,330	\$75,049	\$28,694
Total GF/non-GF:	<b>\$472,842</b>	<b>\$9,077,047</b>	<b>\$502,238</b>	<b>\$3,012,398</b>
Program Total:	<b>\$9,549,889</b>		<b>\$3,514,636</b>	
Program FTE	0.00	8.00	0.00	9.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$8,951,256	\$0	\$3,012,398
Other / Miscellaneous	\$0	\$125,791	\$0	\$0
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$9,077,047</b>	<b>\$0</b>	<b>\$3,012,398</b>

**Explanation of Revenues**

\$20,588 - Housing Authority of Portland: Based on FY12 revised budget  
 \$905,441 - State Mental Health Grant Local Admin: Based on FY12 revised budget  
 \$28,000 - Crisis Intervention: Based on FY12 revised budget  
 \$1,339,808 - Self-Directed Individual/Families: Based on FY12 revised budget  
 \$10,920 - Special Projects: Based on FY12 revised budget  
 \$54,888 - Foster Care: Based on FY12 revised budget  
 \$249,983 - Family Support Services: Based on FY12 revised budget  
 \$383,322 - Long Term Support for Children: Based on FY12 revised budget  
 \$19,448 - Regional Crisis Coordination  
 \$391,536 - County General Fund Match: Based on FY11 Accepted Match Application  
 \$110,702 - County General Fund

**Significant Program Changes** **Significantly Changed**

**Last year this program was:** #25011, DD Systems, Contracts and Budget

Adding 1.0 FTE Program Technician pending Class/Comp study. This is a new position to improve the unit's ability to generate timely provider payments, improve fiscal management and meet state reporting deadlines.

State funds for DD53 - Transportation Services (\$4,145,728) and DD56 - Rent Subsidies (\$553,265) are now paid directly to providers through the eXPRS payment system. As a result these revenues will no longer be included in the DDSD budget.

**Lead Agency:** County Human Services

**Program Contact:** Jeanne Wheaton

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

This program case manages approximately 3,000 Medicaid recipients who have been determined to have a developmental disability out of the 4,200 total caseload of developmentally disabled consumers. Of the adult consumers, approximately 1,935 are actively enrolled in a funded residential and/or vocational program under the Home and Community Based Waiver. The primary responsibility is to monitor 317 residential, adult foster care, supported living and vocational service sites to assure that providers are in compliance with the Oregon Administrative Rules and also to assure the health and safety of the program consumers.

### Program Description

Case Management services for adults with developmental disabilities are person-centered with the goal of linking clients with services and resources in their neighborhoods. In addition, staff assists clients in applying for financial and housing benefits. Monitoring customer health and safety is our primary responsibility. Case Management assists customers by involving family, friends and community partners in their lives in order to promote an enriched quality of life by developing skills, confidence, self-worth and independence in order to assist adults with developmental disabilities in the areas of self-care, behavior and resource coordination. This program partners with state and local organizations that have mutual interest in our clients, such as community justice, mental health and the Department of Vocational Rehabilitation. Through program interventions to avert crisis situations and monitoring of customer and provider health and safety concerns, instances of abuse are more likely to be detected and investigated assuring the customer to continue to live more independently. The importance of monitoring will continue to increase as funding reductions are made to programs serving adults.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Total number of adults served. <sup>1</sup>	2,300	2,300	2,045	2,100
Outcome	Total monitoring visits for residential sites. <sup>2</sup>	4,850	4,850	4,850	4,850

### Performance Measure - Description

<sup>1</sup> Program #25012 changed from serving adults ages 22 and up to 18 and up. This change became effective 2/1/12. A monitoring database has been created for tracking adults in the revised age range. Monthly reporting in addition to training for staff will ensure more accurate statistical information.

<sup>2</sup> During FY 11-12 a new system for tracking site monitoring is being utilized. This will allow for a more accurate process to collect statistical information.



**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$0	\$2,176,794	\$0	\$2,930,761
Contracts	\$0	\$5,000	\$0	\$10,000
Materials & Supplies	\$0	\$118,877	\$0	\$40,747
Internal Services	\$0	\$294,572	\$90,000	\$312,290
Total GF/non-GF:	<b>\$0</b>	<b>\$2,595,243</b>	<b>\$90,000</b>	<b>\$3,293,798</b>
Program Total:	<b>\$2,595,243</b>		<b>\$3,383,798</b>	
Program FTE	0.00	26.00	0.00	35.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$2,571,654	\$0	\$3,293,798
Other / Miscellaneous	\$0	\$23,589	\$0	\$0
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$2,595,243</b>	<b>\$0</b>	<b>\$3,293,798</b>

**Explanation of Revenues**

\$176,777 - State Mental Health Grant Local Admin: Based on FY12 revised budget

\$3,117,021 - State Mental Health Grant Case Management: Based on FY12 revised budget and FY11 Match Application

\$90,000 - County General Fund

**Significant Program Changes**
 **Significantly Changed**

**Last year this program was:** #25012, DD Services for Adults

The DD Services for Adults program changed from serving adults ages 22 and up to 18 and up and a corresponding caseload reduction was applied to the DD Services for Children program. This change became effective 2/1/12 and improves our alignment with the State service model. A monitoring database has been created for tracking adults in the revised age range. Monthly reporting in addition to training for staff will ensure more accurate statistical information.

This program now includes consumers aged 18 to 21, who previously were included in the Services for Children program offer number 25013. Therefore it now includes 5.0 FTE Case Managers who were moved into this program offer from 25013- Services for Children.

4.0 FTE Case Manager 2 - Add from FY12 re-balance

**Lead Agency:** County Human Services

**Program Contact:** Jeanne Wheaton

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

This program case manages approximately 1,200 children (birth to 17) who have been determined to have a developmental disability out of the 4,200 total caseload of developmentally disabled consumers. The majority of the children served live in their family homes. Services for these children include referrals to community resources, family to family support groups, assistance with school programs and training opportunities for families. These services allow children with serious disabilities to remain in their family homes to prevent placement in child foster care and residential sites.

### Program Description

Services for children are child-centered and family focused, providing assistance required to maintain the child in the family home. Funding for services to children is only 2% of all service funds, including those managed here and paid through the state. Child-centered planning and supports help to identify the customer's interests, focus on strengths, promote independence and self-worth, and map out family, friends and community members as potential resources. As a child approaches 18 planning is done to transition the customer to adult services. The program partners with state and local organizations that have mutual interest in our clients. This partnership strengthens families and helps to reduce the higher costs of out-of-home crisis placements or permanent placement in institutions. Resource referrals increase in importance due to the budget cuts in programs for children.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number of children served. <sup>1 2</sup>	1,600	1,900	1,200	1,250
Outcome	# of resource referrals to families with children enrolled in family support. <sup>2</sup>	0	5,350	4,652	4,660

### Performance Measure - Description

<sup>1</sup> Larger number of children turning 18 entered Brokerage or other Adult services than anticipated. In addition, changing state guidelines for the eligibility redetermination process resulted in a lower number of eligible children than originally projected.

<sup>2</sup> Program #25013 changed from serving children ages birth to 21 to birth through 17. This change became effective 2/1/12. Monthly reporting in addition to training for staff will assure more accurate statistical information.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$0	\$2,959,608	\$0	\$2,676,041
Contracts	\$24,140	\$0	\$24,140	\$0
Materials & Supplies	\$0	\$54,955	\$0	\$37,022
Internal Services	\$295,881	\$205,385	\$76,659	\$288,850
Total GF/non-GF:	<b>\$320,021</b>	<b>\$3,219,948</b>	<b>\$100,799</b>	<b>\$3,001,913</b>
Program Total:	<b>\$3,539,969</b>		<b>\$3,102,712</b>	
Program FTE	0.00	34.80	0.00	31.80
<b>Program Revenues</b>				
Indirect for dep't Admin	\$2,298	\$0	\$0	\$0
Intergovernmental	\$0	\$3,127,536	\$0	\$3,001,913
Other / Miscellaneous	\$0	\$92,412	\$0	\$0
<b>Total Revenue:</b>	<b>\$2,298</b>	<b>\$3,219,948</b>	<b>\$0</b>	<b>\$3,001,913</b>

**Explanation of Revenues**

\$192,498 - State Mental Health Grant Local Admin: Based on FY12 revised budget

\$2,809,415 - State Mental Health Grant Case Management: Based on FY12 revised budget and FY11 Match Application

\$100,799 - County General Fund

**Significant Program Changes**

✔ **Significantly Changed**

**Last year this program was:** #25013, DD Services for Children

The DD Services for Adults program changed from serving adults ages 22 and up to 18 and up and a corresponding caseload reduction was applied to the DD Services for Children program. This change became effective 2/1/12 and improves our alignment with the State service model. A monitoring database has been created for tracking adults in the revised age range. Monthly reporting in addition to training for staff will ensure more accurate statistical information.

Subsequent to elimination of the High School Transition team, 1.0 FTE Program Supervisor position was eliminated. 5.0 FTE Case Manager 2 positions were moved to the adult unit. The remaining case management staff positions were divided between the other two Childrens' Services supervisors. This program offer will now serve children aged birth to 17, not to 21.

3.0 FTE Case Manager 2 - Add from FY12 re-balance

**Lead Agency:** County Human Services

**Program Contact:** Patrice Botsford

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Abuse Investigation Team reviews all serious incident reports submitted to the county. They determine which reports meet Oregon's definition of abuse/neglect and investigate those incidents. Abuse investigators screen approximately 3,000 serious event reports per year and conduct an average of 260 investigations annually. The team maintains ongoing relationships with local, state and federal law enforcement; the Psychiatric Security Review Board; and facilitates the District Attorney's Multi-Disciplinary Team as legislated in House Bill 2442.

### Program Description

The primary responsibility of the investigation unit is to ensure appropriate safety plans are in place and to conduct thorough, unbiased investigations. Investigators perform these duties as the designee of the State of Oregon and under the oversight of the Office of Investigations and Training.

This unit investigates allegations of abuse, neglect or exploitation of adults now or previously enrolled in the Developmental Disabilities system. This includes clients served by the brokerages who don't receive county case management. Brokerages are a secondary case management system to which clients may be referred. The county Developmental Disabilities program retains Medicaid responsibilities for these clients. As of 2010, the abuse investigators have jurisdiction and responsibility to investigate care providers and non-care providers when a trusted relationship exists under expanded definitions of abuse in accordance with HB 2442. Currently the estimated number of Serious Incident Reports received is 2,534 for review.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number of investigations.	222	300	200	225
Outcome	Investigations completed within 45 days OAR. <sup>1</sup>	80.0%	85.0%	75.0%	0.0%
Outcome	% of abuse referrals screened within 5 working days. <sup>2</sup>	49.0%	0.0%	70.0%	80.0%

### Performance Measure - Description

✓ **Measure Changed**

<sup>1</sup> Discontinue this measure.

<sup>2</sup> New outcome measure, the Office of Investigations and Training has set a standard of review within 5 working days.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$198,274	\$402,532	\$204,992	\$558,763
Materials & Supplies	\$3,786	\$10,291	\$0	\$9,315
Internal Services	\$33,249	\$66,780	\$0	\$91,951
Total GF/non-GF:	<b>\$235,309</b>	<b>\$479,603</b>	<b>\$204,992</b>	<b>\$660,029</b>
Program Total:	<b>\$714,912</b>		<b>\$865,021</b>	
Program FTE	2.33	4.67	2.50	5.50
<b>Program Revenues</b>				
Intergovernmental	\$0	\$355,170	\$0	\$660,029
Other / Miscellaneous	\$0	\$124,433	\$0	\$0
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$479,603</b>	<b>\$0</b>	<b>\$660,029</b>

**Explanation of Revenues**

\$67,002 - State Mental Health Grant Local Admin: Based on FY12 revised budget

\$593,027 - State Mental Health Grant: Based on FY12 revised budget

\$204,992 - County General Fund

**Significant Program Changes**

✔ **Significantly Changed**

**Last year this program was:** #25014, DD Abuse Investigations

In the State rebalance budget, 1.0 FTE human services investigator was restored. In addition we will be adding a Limited duration investigator with Carryover DD55 funds, which can only be used for Abuse Investigators for developmentally disabled clients.

**Lead Agency:** County Human Services

**Program Contact:** Patrice Botsford

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Developmental Disabilities Monitoring and Crisis Services Unit has oversight of 24-hour comprehensive residential and employment programs, transportation, and support brokerage services, and provides crisis services to more than 1,400 adults and children with developmental disabilities who qualify for comprehensive services. These services range from short-term crisis support or crisis placement, to in-home supports and/or long-term residential placements. The unit is responsible for arranging crisis placements and managing facility support services, and monitoring services provided by contracted agencies and/or families. These supports are accessed through the crisis system when the client is at risk for civil commitment, out of home placement, and/or when health and safety are at risk.

### Program Description

To access comprehensive and support services the individual must meet the criteria for crisis services. Supports can include: accessing a crisis bed, behavior consultation, nursing support, respite and other supports needed to stabilize the client; and long-term supports including residential placement, supported living, in-home supports and employment/alternatives to employment.

The unit also completes programmatic monitoring to ensure compliance with county contracts, Oregon Administrative Rules and Oregon Statutes. They participate in on-site licensing reviews conducted by the state Office of Developmental Disabilities Services and provide contractors with technical assistance to support them in meeting requirements. The unit monitors health and safety issues that are programmatic as opposed to client-specific concerns. They work with the Abuse Investigations team to ensure required actions are completed and ongoing issues are addressed.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of programmatic monitoring visits performed by the unit.	400	415	400	400
Outcome	% of clients receiving crisis services, who are stable at 6 months post crisis <sup>1</sup>	0.0%	93.0%	98.0%	96.0%

### Performance Measure - Description

<sup>1</sup> Stable is defined as not having a new crisis case opened to request crisis diversion services within 6 months of closure of previous case.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$0	\$1,325,101	\$0	\$1,638,243
Contracts	\$0	\$232,751	\$0	\$261,759
Materials & Supplies	\$0	\$3,314,343	\$0	\$380,844
Internal Services	\$0	\$257,232	\$0	\$219,170
Total GF/non-GF:	<b>\$0</b>	<b>\$5,129,427</b>	<b>\$0</b>	<b>\$2,500,016</b>
Program Total:	<b>\$5,129,427</b>		<b>\$2,500,016</b>	
Program FTE	0.00	14.10	0.00	17.10
<b>Program Revenues</b>				
Fees, Permits & Charges	\$0	\$5,000	\$0	\$10,000
Intergovernmental	\$0	\$4,846,757	\$0	\$2,490,016
Other / Miscellaneous	\$0	\$277,670	\$0	\$0
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$5,129,427</b>	<b>\$0</b>	<b>\$2,500,016</b>

**Explanation of Revenues**

\$10,000 - Fees; Based on historical average

\$570,553 - State Mental Health Grant Local Admin: Based on FY12 revised budget

\$360,000 - State Mental Health Grant: Based on FY12 revised budget

\$361,157 - State Mental Health Grant Case Management: Based on FY12 revised budget

\$1,198,306 - State Mental Health Grant Regional Funding: Based on FY12 revised budget

**Significant Program Changes**

✔ **Significantly Changed**

**Last year this program was:** #25015, DD Monitoring and Crisis Services Unit

Restoration of 2.0 FTE program specialist, 1.0 FTE program technician in the State rebalance budget process. The restoration will provide the ability to maintain health and safety monitoring of contracted providers to ensure regulatory compliance and quality of care.



**Lead Agency:** County Human Services

**Program Contact:** Patrice Botsford

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Eligibility is the entryway to developmental disabilities services and introduces potential clients to county services. Intakes average 62 people per month with a total of approximately 752 per year. In addition, this team is required to re-evaluate approximately 264 clients per year to determine continuing eligibility for developmental disabilities services.

### Program Description

Eligibility/Intake is the single point of access to services for persons with developmental disabilities. The Eligibility and Intake unit ensures that eligible clients gain access to services and redetermines eligibility of existing clients to ensure their continued appropriateness for ongoing services. Once eligible, Intake transfers the client into the appropriate Developmental Disabilities case management unit for immediate access to program services. Per state rule, eligibility must be redetermined for children at ages 7, 18 and for clients who have developmental disabilities other than mental retardation by age 22. The intake and eligibility unit facilitated intake services for over 20 different languages in the FY 10 and FY 11. The division has the capability of providing bilingual intakes in Spanish, Vietnamese, Russian, Mandarin, Cantonese and Farsi.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of intake eligibility referrals	688	828	759	775
Outcome	% of referrals made eligible for DD services.	60.0%	71.0%	75.0%	71.0%
Output	# of inservice determinations <sup>1</sup>	366	225	258	250

### Performance Measure - Description

<sup>1</sup> Inservice determinations refer to the mandated evaluations of all clients at age 7, 18 and 22 to determine ongoing eligibility for disability services.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$350,402	\$197,553	\$307,648	\$309,790
Contracts	\$30,000	\$0	\$30,000	\$0
Materials & Supplies	\$6,500	\$6,671	\$3,900	\$4,250
Internal Services	\$57,080	\$32,073	\$38,505	\$41,952
Total GF/non-GF:	<b>\$443,982</b>	<b>\$236,297</b>	<b>\$380,053</b>	<b>\$355,992</b>
Program Total:	<b>\$680,279</b>		<b>\$736,045</b>	
Program FTE	4.00	2.00	3.35	3.65
<b>Program Revenues</b>				
Intergovernmental	\$0	\$96,096	\$0	\$355,992
Other / Miscellaneous	\$0	\$140,201	\$0	\$0
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$236,297</b>	<b>\$0</b>	<b>\$355,992</b>

**Explanation of Revenues**

\$276,996 - State Mental Health Grant Local Admin: Based on FY12 revised budget

\$78,996 - Case Management: Based on FY12 revised budget

\$380,053 - County General Fund

**Significant Program Changes**

✔ **Significantly Changed**

**Last year this program was:** #25016, DD Eligibility and Intake Services

Restoration of 1.0 FTE case manager 1 in state rebalance budget process to continue ability to reduce processing times through retrieval of documentation and improve service to customers.

**Lead Agency:** County Human Services

**Program Contact:** Lee Girard

**Program Offer Type:** Existing Operating

**Related Programs:** 25021

**Program Characteristics:**

**Executive Summary**

Aging and Disability Services Access and Early Intervention Services are the first point of contact for the county's 210,000 elderly, people with disabilities and veterans. Annually, 77,067 callers receive information and assistance and 11,381 people receive a variety of in-home, community and emergency services that support independence and prevent institutionalization and homelessness. These services are provided through the 24/7 Helpline and five District Senior Centers (neighborhood-based non-profit agencies).

**Program Description**

Aging and Disability Services Division (ADS) is the Area Agency on Aging and Disability for Multnomah County and as such is mandated to provide a comprehensive, coordinated service delivery system for older adults and people with disabilities, emphasizing low-income, limited English-speaking, ethnic minorities and frail persons. The Area Agency's goal is to help people stay active, independent and healthy, preventing or delaying nursing home admission, while employing evidence-based practices of cultural competency and practices to ensure effective outcomes.

Helpline and District Senior Center employees and volunteers counsel and connect older adults, people with disabilities, veterans and their families to county and community resources, public benefits, long-term care services and emergency services. ADS, together with contracted partners, provide case management and in-home services to more than 4,963 older adults and their families. These services are funded through Oregon Project Independence, Older Americans Act and County General Fund.

Transportation is provided to 1,401 individuals so they can access medical, nutrition and social supports. District Senior Centers provide 3,884 health, wellness and recreation activities to 27,617 seniors.

The ADS network provided 626,576 congregate and home-delivered meals in the last fiscal year. Ethnic-specific community organizations provided targeted outreach and nutrition services to 981 ethnic and racial minority elders.

Veterans services officers counsel 1,570 individuals and file claims for over 731 veterans, helping them to access over \$30 million annually in benefits and pensions.

Emergency Services help vulnerable, older adults and people with disabilities avoid homelessness and acute health emergencies by providing emergency housing assistance to 490 individuals, emergency prescription assistance to 166 individuals and special medical assistance to 255 individuals. Almost 90% of people receiving housing assistance retained their housing after six months.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Individuals receiving in-home, community and emergency services <sup>1</sup>	11,381	13,000	12,000	12,000
Outcome	Clients served that are ethnic/racial minorities (% of total elders served)	25.4%	25.0%	25.0%	25.0%
Output	Helpline and District Center Assistance calls	77,067	78,000	78,000	78,000

**Performance Measure - Description**

<sup>1</sup>Although need and request for assistance is growing, available funding will limit number served in FY13.

## Legal/Contractual Obligation

ADS, as the state designated Area Agency on Aging and Disability for Multnomah County, is mandated under the most recent revision of the Older Americans Act, PL 109-365 amending Sec. 306 42USC 3026, and by Oregon Revised Statute 410.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$783,228	\$1,336,562	\$735,111	\$1,204,289
Contracts	\$1,296,719	\$4,143,738	\$1,238,288	\$3,894,379
Materials & Supplies	\$629,363	\$190,361	\$620,232	\$543,704
Internal Services	\$474,169	\$565,763	\$510,373	\$563,017
Total GF/non-GF:	<b>\$3,183,479</b>	<b>\$6,236,424</b>	<b>\$3,104,004</b>	<b>\$6,205,389</b>
Program Total:	<b>\$9,419,903</b>		<b>\$9,309,393</b>	
Program FTE	8.37	15.48	7.97	13.38
<b>Program Revenues</b>				
Indirect for dep't Admin	\$25,034	\$0	\$21,143	\$0
Fees, Permits & Charges	\$90,000	\$145,290	\$0	\$190,572
Intergovernmental	\$0	\$5,908,977	\$0	\$5,757,064
Other / Miscellaneous	\$0	\$173,711	\$0	\$257,753
<b>Total Revenue:</b>	<b>\$115,034</b>	<b>\$6,227,978</b>	<b>\$21,143</b>	<b>\$6,205,389</b>

## Explanation of Revenues

\$2,799,092 - Older Americans Act federal funds; \$480,264 - Oregon Project Independence; \$156,701 - Oregon Dept of Veterans Affairs; \$501,258 - Veteran's Medical Center; \$815,547 - Title XIX; and \$240,788 - Various Smaller Federal/State grants: All based on FY12 revised budget revised budget and approved match application or current award.  
\$527,648 - City of Portland; \$1,850 - City of Fairview; \$3,000 - City of Troutdale: All based on FY12 revised budget.  
\$190,572 -Fees & Donations: Based on FY12 adopted budget or current awards. \$242,873 -Corporation of National & Community Foster Grandparent Program: Based on FY12 revised budget.  
\$245,796 - Beginning Working Capital: Based on current year estimated carryover. \$33,195 - County General Fund Match; \$3,070,809 - County General Fund

## Significant Program Changes

**Last year this program was:** #25020A, ADS Access and Early Intervention Services

This Program Offer reduces FTE by 2 FTE due to reductions or eliminations in various smaller grant(s): .25 FTE-Program Coordinator, 0.5 FTE-Community Information Specialist, 0.5 FTE-Program Development Specialist Senior and 0.75 FTE-Health Educator.

**Lead Agency:** County Human Services

**Program Contact:** Lee Girard

**Program Offer Type:** Existing Operating

**Related Programs:** 25020A

**Program Characteristics:**

### Executive Summary

Multnomah Project Independence (MPI) provides services to people with disabilities between the ages of 19 and 59 who require in-home and other support services to remain independent in their homes but who are not eligible for other public supports such as Medicaid or Oregon Project Independence. MPI served 115 people in FY11. Case management services will be refocused toward triage assessment and short-term intensive supports with the goal of supporting clients' self-direction and self- management.

### Program Description

Through the Multnomah Project Independence program, Aging and Disability Services Division (ADS) provides in-home services and supports for low-income younger disabled adults who are at risk for nursing facility placement, homelessness, or abuse and who do not qualify for other public services. The program includes case management and supports for both short-term and ongoing interventions to access resources and stabilize individuals. Other funded services include in-home services for home delivered meals and transportation. The program consolidates MPI case management within the Division and integrates it more closely with ADS Adult Protective Services, Emergency Services and Long Term Care Service Intake. The program focus is short-term intensive case management to support stabilization and self- management by clients. Services will be prioritized to individuals who are not eligible for other publicly-funded case management support and meet the risk criteria listed above.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Clients receiving MPI case management and in-home services	115	165	150	150
Outcome	Individuals retain housing after receiving assistance <sup>1</sup>	0.0%	0.0%	90.0%	90.0%

### Performance Measure - Description

✓ **Measure Changed**

<sup>1</sup>New measure; housing retention is measured as an individual remaining in housing 6 months after service/assistance is rendered; in FY11 housing retention was 88%.

Ending outcome measure "Clients with improved risk assessment score after 6 months of intervention" due to shorter term interventions and workload limitations.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$74,488	\$0	\$87,952	\$0
Contracts	\$181,581	\$0	\$181,581	\$0
Materials & Supplies	\$28,801	\$0	\$28,579	\$0
Internal Services	\$9,935	\$0	\$0	\$0
Total GF/non-GF:	<b>\$294,805</b>	<b>\$0</b>	<b>\$298,112</b>	<b>\$0</b>
Program Total:	<b>\$294,805</b>		<b>\$298,112</b>	
Program FTE	1.00	0.00	1.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$298,112 - County General Fund

**Significant Program Changes**

Last year this program was: #25021, Multnomah Project Independence - Restructure

**Lead Agency:** County Human Services

**Program Contact:** Felicia Akubuiro

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Adult Care Home Program (ACHP) licenses and monitors adult care homes in Multnomah County. Currently there are 596 licensed adult care homes in the county. These homes offer affordable, quality care in a safe and culturally appropriate setting. Adult care homes are licensed under state and local laws and provide 24-hour care and supervision. The program licenses 2,648 beds, available to older adults and people with disabilities, offering a less expensive, homelike alternative to an institutional nursing home setting. The program also licenses 50 beds in 10 Room and Board facilities that offer low cost housing to older adults and residents with disabilities who need a supportive living environment but are not eligible for long term care services.

### Program Description

The Adult Care Home Program (ACHP) is responsible for ensuring that vulnerable residents are cared for in a culturally-appropriate, homelike environment that is friendly, safe and secure. All adult care home operators are trained on and required to follow Multnomah County Administrative Rules. ACHP's guiding principles are that every individual living in an adult care home is to be treated respectfully and receive quality care. A program licensor visits each home at least once a year to ensure that residents receive necessary care, including personal care, nutrition, physical safety, nursing care and medication management. In addition, program monitors observe interactions in the home, review records, and check to ensure residents are provided with social and recreational activities and are cared for in a safe environment. When monitors find problems, the program takes corrective action. Annual, unannounced monitoring reduces the risk of abuse and neglect of residents in adult care homes. Program staff provide technical assistance to adult care home operators and issue and enforce written warnings, sanctions or fines when there are serious deficits. All homes are inspected and licensed annually.

Adult care homes provide a quality long term care option for older adults and people with disabilities desiring to live in the community. ACHP serves 1,304 Medicaid clients, an increase of 14%, and 973 private pay residents, while saving taxpayers thousands of dollars a year. The average monthly Medicaid cost of services provided to the aged and physical disabled in an adult care home is \$1,947.60, this is one-third of the \$5,994.32 average Medicaid cost of a nursing home placement for the same population. Without this option, our private pay residents would have to rely on more costly and restrictive alternatives and might be forced on to Medicaid for lack of affordable care options. Finally, without these homes, the quality of life would be diminished for both Medicaid and private pay residents.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Total number of adult care homes licensed and inspected yearly	596	590	596	600
Outcome	Adult care homes with one or more monitoring visits in a year <sup>1</sup>	100.0%	99.0%	100.0%	0.0%
Outcome	Adult care homes with two monitoring visits per year (new)	0.0%	0.0%	0.0%	100.0%
Efficiency	Adult care home/nursing home cost efficiency ratio <sup>2</sup>	32.4%	32.4%	32.5%	32.5%

### Performance Measure - Description

✓ **Measure Changed**

<sup>1</sup>This measure will be discontinued next year in favor of percentage of homes monitored two times per year.

<sup>2</sup>Lower is better. Ratio equals adult care home cost as a percent of nursing home cost. As adult care homes serve increasing number of individuals with complex care needs, the average cost of care increases relative to the average cost of care in a nursing facility.

## Legal/Contractual Obligation

Multnomah County has a contract with the State of Oregon to administer the licensing, monitoring and training functions of Adult Care Homes. The Board of County Commissioners passed Multnomah County Resolution §23.66 - §223.999 establishing the Adult Care Home Program.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$22,623	\$1,093,684	\$22,672	\$1,110,905
Contracts	\$39,556	\$325,314	\$34,698	\$375,000
Materials & Supplies	\$1,007	\$48,094	\$612	\$29,980
Internal Services	\$3,453	\$198,476	\$3,680	\$209,581
Total GF/non-GF:	<b>\$66,639</b>	<b>\$1,665,568</b>	<b>\$61,662</b>	<b>\$1,725,466</b>
Program Total:	<b>\$1,732,207</b>		<b>\$1,787,128</b>	
Program FTE	0.26	12.74	0.26	12.74
<b>Program Revenues</b>				
Fees, Permits & Charges	\$0	\$269,300	\$0	\$269,300
Intergovernmental	\$0	\$1,374,568	\$0	\$1,434,466
Other / Miscellaneous	\$0	\$21,700	\$0	\$21,700
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,665,568</b>	<b>\$0</b>	<b>\$1,725,466</b>

## Explanation of Revenues

\$1,434,466 - Title XIX: Based on FY12 revised budget and approved match application.

\$291,000 - Fees & Fines: Based on FY12 revised budget

\$34,698 - County General Fund Match

\$26,964 - County General Fund

## Significant Program Changes

**Last year this program was:** #25022A, ADS Adult Care Home Program

Last year this program was: #25022A & B ADS Adult Care Home Program and Continuing Service Level for FY12 (ACHP).



**Lead Agency:** County Human Services

**Program Contact:** Cathy Clay-Eckton

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Aging and Disability Services (ADS) Long Term Care program determines eligibility for financial, nutritional, medical and case management services for 39,278 low-income older adults and persons with disabilities. Intensive case management is provided to about 7,000 clients each month who meet state criteria for nursing home care due to the need for help with daily self-care tasks such as mobility, eating and toileting. Long Term Care serves about 5,600 clients in community-based settings and 1,380 clients in nursing facilities. This program offer brings more than \$33.5 million into the local economy through SNAP (Supplemental Nutrition Assistance Program, formerly food stamps), and medical and long term care benefits received by ADS program clients.

### Program Description

Under contract with the state, the Long Term Care program determines eligibility and enrolls older adults and people with disabilities in programs that meet basic health, financial and nutritional needs through the Oregon Health Plan, Medicaid and SNAP (Food Stamp) programs. Clients receive counseling to help them choose the most appropriate managed care and Medicare Part D plans. The program provides referrals to community resources to address other critical unmet needs. These vulnerable adults typically have incomes below the poverty level and also include individuals with a mental illness or a developmental disability.

Case managers assess clients' needs, create service plans, and authorize, coordinate and monitor services that address health and welfare risks in the least restrictive environment. They ensure early intervention and effective management of the complex and fluctuating care needs of this high-risk population. Nurses provide consultation to case managers to ensure appropriate care planning for medically complicated and unstable cases. Additionally, they support caregivers and provide wellness counseling/education and disease management for clients to optimize health. Collaboration with other professionals, divisions and community agencies to address the needs of a diverse client population is an essential aspect of this program.

A primary goal of case management is to promote and support healthy and independent living in the community, preventing or minimizing more costly nursing home care and hospitalizations and readmissions whenever possible. Case managers provide services for 7,000 nursing home-eligible clients; about 5,600 clients (80%) receive community-based services that promote or support their independence outside of a nursing home, while an additional 1,380 (20%) are served in a nursing home setting. While the proportion of nursing home-eligible clients residing in community-based settings in Multnomah County far exceeds the national average, it is a major program priority to improve on this percentage through more intensive case management and the expansion of programs targeting community-based care enhancements. The future will bring even greater challenges, and therefore, opportunities for innovation, as the over 85 population—the demographic most likely to utilize nursing facility care—grows in number and proportion of the total population.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Avg monthly # of nursing home-eligible clients receiving long term care asst	6,920	7,162	7,010	7,269
Outcome	Ratio of nursing home-eligible clients served in the community vs. nursing home <sup>1</sup>	80.7%	80.0%	80.8%	81.0%

### Performance Measure - Description

<sup>1</sup>A higher ratio indicates a better outcome.

## Legal/Contractual Obligation

Section 1903(a) of the Social Security Act, 42 CFR-Medicaid Administration; 7 CFR-Food Stamps (SNAP); Sections 1915c and 1115 of Title XIX of the Social Security Act. All Oregon Administrative rules related to and governing programs administered by Aging and Disability Services.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$193,870	\$17,792,642	\$0	\$17,994,092
Contracts	\$850,631	\$149,446	\$1,935,552	\$113,460
Materials & Supplies	\$0	\$503,688	\$0	\$328,450
Internal Services	\$0	\$4,007,377	\$0	\$4,272,015
Total GF/non-GF:	<b>\$1,044,501</b>	<b>\$22,453,153</b>	<b>\$1,935,552</b>	<b>\$22,708,017</b>
Program Total:	<b>\$23,497,654</b>		<b>\$24,643,569</b>	
Program FTE	0.00	218.80	0.00	218.80
<b>Program Revenues</b>				
Indirect for dep't Admin	\$5,231	\$0	\$5,265	\$0
Fees, Permits & Charges	\$0	\$21,437	\$0	\$21,573
Intergovernmental	\$0	\$22,187,606	\$0	\$22,458,167
Other / Miscellaneous	\$0	\$102,623	\$0	\$228,277
<b>Total Revenue:</b>	<b>\$5,231</b>	<b>\$22,311,666</b>	<b>\$5,265</b>	<b>\$22,708,017</b>

## Explanation of Revenues

\$22,458,167 - Title XIX: Based on FY12 revised budget and approved match application.

\$124,147 - Providence Medical Center: Based on FY12 grant award.

\$104,130 - OHSU: Based on FY11 grant award.

\$21,573 - Misc fees: Based on FY12 actual & projected revenue Y-T-D.

\$1,935,552 - County General Fund (Match)

## Significant Program Changes

**Last year this program was:** #25023A, ADS Long Term Care

Last year this program was: #25023A, B & C ADS Long Term Care, Adopted FY11 Service Level (LTC), and Continuing Service Level for FY12 (LTC).

**Lead Agency:** County Human Services

**Program Contact:** Mohammad Bader

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Adult Protective Services (APS) is responsible for protecting 210,000 older adults, people with disabilities and veterans from abuse, financial exploitation, neglect and self-neglect. Protective services workers prevent further harm and link victims of abuse to critical health, legal and human services. This program conducts abuse investigations, provides risk management, Multi-Disciplinary Team (MDT) services, and educates the community about abuse.

### Program Description

The primary goal of this program is to protect vulnerable older adults and persons with disabilities from abuse, neglect, self-neglect, and financial exploitation. Protective services workers investigate abuse and rule violations in 124 care facilities and 596 adult care homes as well as abuse in the community at large. The program responded to 8,371 abuse calls in FY11. Protective services workers link vulnerable adults to needed healthcare, housing, social services, legal and client advocacy agencies.

APS coordinates with law enforcement and the District Attorney's office to prosecute offenders. APS serves clients with complex psychosocial and medical needs in five branch offices located throughout the county via Multi-Disciplinary Teams (MDT). These teams are an evidence-based practice, and provided 3,179 client contacts with 172 clients with mental health needs, and provided 6,297 hours of nursing clinical supports to 1,242 clients. The core team membership consists of a protective services investigator, social worker, community health nurse, case manager, mental health specialist, and public guardian. The District Attorney's office and law enforcement participate on a monthly basis or as needed. Other professionals, clients, caregivers and family members are invited to participate as needed. This service is designed for clients who are unable to meet their basic needs and at times are unwilling to accept medical, mental health or legal types of intervention. 81% of MDT participants showed improvement after MDT intervention. Without MDT intervention these clients are at risk of hospitalization, eviction, or jail. MDT clients are offered risk management which provides intensive oversight for up to 12 months to stabilize their situation or to link them to appropriate agencies and ongoing services.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Protective services investigations completed <sup>1</sup>	2,399	3,000	2,448	2,500
Outcome	Reabuse rate for older adults and people with disabilities <sup>2</sup>	3.0%	3.0%	3.0%	3.0%
Outcome	Clients with improved living situation after 90 days of MDT intervention	81.0%	90.0%	94.0%	90.0%

### Performance Measure - Description

<sup>1</sup>Estimate for FY12 was projected high; results came in higher than year before but overestimated for the year.

<sup>2</sup>Current reabuse rate estimate is based on modified State of Oregon figures. Data is from January-December 2011.

## Legal/Contractual Obligation

APS is a mandated service by Oregon Administrative Rules. Multnomah County acts as the Area Agency On Aging and is required to perform this function under contract with DHS. DHS Provides funds to Multnomah County to deliver this service.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$112,837	\$3,416,908	\$315,270	\$3,416,414
Contracts	\$514,520	\$146,303	\$495,107	\$133,776
Materials & Supplies	\$6,677	\$90,059	\$6,172	\$63,886
Internal Services	\$39,228	\$479,119	\$38,827	\$501,948
Total GF/non-GF:	<b>\$673,262</b>	<b>\$4,132,389</b>	<b>\$855,376</b>	<b>\$4,116,024</b>
Program Total:	<b>\$4,805,651</b>		<b>\$4,971,400</b>	
Program FTE	2.86	34.74	2.86	34.74
<b>Program Revenues</b>				
Indirect for dep't Admin	\$354	\$0	\$0	\$0
Intergovernmental	\$0	\$4,132,389	\$0	\$4,116,024
<b>Total Revenue:</b>	<b>\$354</b>	<b>\$4,132,389</b>	<b>\$0</b>	<b>\$4,116,024</b>

## Explanation of Revenues

\$3,985,248 - Title XIX: Based on FY12 revised budget and approved match application.

\$130,776 - State Mental Health Grant Older/Disabled Mental Health Services: Based on current grant award.

\$307,014 - County General Fund (Match)

\$548,362 - County General Fund

## Significant Program Changes

**Last year this program was:** #25024A, ADS Adult Protective Services

Last year this program was: #25024A, B & C ADS Protective Services, Adopted FY11 Service Level (APS), and Continuing Service level for FY12 (APS).

Complexity of cases continues to rise especially in the areas of financial abuse and self neglect. The number of investigations completed seem to decrease for this year although the number of referrals continue to increase. It is possible that the program is resolving many complaints without having to do a formal investigation. Also, facilities unit as using "Enhanced Screening" which is reducing the number of reports completed. In addition we are finding that long term care facilities are doing less and less self reports.

**Lead Agency:** County Human Services

**Program Contact:** Mark Sanford

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Public Guardian/Conservator program, under court authority, makes vital decisions for approximately 170 mentally incapacitated, functionally dependent and impoverished adults who are current or recent victims of physical abuse, neglect and financial exploitation. Legal authority delegated to deputies by the court enables intervention when no other approach resolves abuse and neglect. In addition, the program provides education and consultation to families and community partners on matters involving vulnerable adults with diminished mental abilities. If unable to assist directly, last year staff diverted an additional 140 clients into less restrictive, less costly alternatives, or family and private guardianships/conservatorships.

### Program Description

The Public Guardian/Conservator program is an essential part of the county response system for abuse and neglect when legal authority is required to provide for the safety and well-being of incapable adults. Program staff work with adult protective services, law enforcement and area hospitals to intervene early to resolve fraud, abuse and neglect of extremely vulnerable adults. This includes participation on Department of County Human Services multi-disciplinary teams and critical case review committees to assure that alternatives are considered, focusing public funds on at-risk citizens without other resources.

The program serves as the court-appointed guardian and/or conservator for mentally incapable adults who are characterized by the following: treatment-resistant mental illness, IQ below 70, Alzheimer's/other dementia, brain injury, complex medical and behavioral issues, no access to medical care, inadequate care and housing, and financial exploitation. Program clients are also functionally incapacitated, requiring intensive supports and specialized housing arrangements to balance the need for protection with the right to autonomy. Public Guardians are available 24 hours a day, seven days a week, to make medical, psychiatric, financial and life decisions for program clients.

Guardianship and conservatorship ensure a maximum of about 160 county residents (based on program funding constraints) access to safe and appropriate housing, medical care, psychiatric treatment, long term care, income and benefits. Without this option, clients experience continuing victimization, frequent emergency room and hospital psychiatric admissions, homelessness, unnecessary protective services and law enforcement intervention, involuntary commitments, and increased risk of premature death.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Referrals appropriately diverted to less costly resources <sup>1</sup>	142	175	164	175
Outcome	Urgent client needs addressed within five days after court appointment <sup>2</sup>	90.0%	90.0%	90.0%	90.0%

### Performance Measure - Description

<sup>1</sup>Successful diversions are cost-effective across multiple county services.

<sup>2</sup>Urgent safety issues are addressed immediately upon court appointment. Ongoing stabilization requires subsequent intense management over months or years.

### Legal/Contractual Obligation

The decision to provide the service is in County Ordinance, Ch. 23.501. Under ORS Ch. 125, if the county chooses to reduce the service, it remains obligated to current clients, but can halt further intake if the Board of County Commissioners makes a finding that the program is no longer needed.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$947,660	\$0	\$968,245	\$0
Contracts	\$30,358	\$0	\$15,900	\$0
Materials & Supplies	\$22,679	\$0	\$33,409	\$0
Internal Services	\$135,023	\$0	\$143,023	\$0
Total GF/non-GF:	<b>\$1,135,720</b>	<b>\$0</b>	<b>\$1,160,577</b>	<b>\$0</b>
Program Total:	<b>\$1,135,720</b>		<b>\$1,160,577</b>	
Program FTE	10.00	0.00	10.00	0.00
<b>Program Revenues</b>				
Fees, Permits & Charges	\$0	\$0	\$50,000	\$0
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$50,000</b>	<b>\$0</b>

### Explanation of Revenues

\$50,000 - Public Guardian fees: Based on FY12 budget.  
\$1,110,577 - County General Fund

### Significant Program Changes

Last year this program was: #25026, ADS Public Guardian/Conservator

**Lead Agency:** County Human Services

**Program Contact:** Peggy Brey

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Aging and Disability Services Division (ADS), as the designated Area Agency on Aging and Disability for Multnomah County, is responsible for assuring the county's 210,000 older adults, persons with disabilities and veterans have access to a comprehensive and coordinated service delivery system so that they remain independent and out of institutions. ADS Administration provides leadership, assures that results are achieved, ensures regulatory compliance, supports collaborative service delivery and use of best practices, and promotes the efficient and effective use of resources.

### Program Description

Aging and Disability Services Division (ADS) Administration provides leadership at the state and federal policy levels. ADS Administration influences rules, priorities and funding formulas to promote effective services for Multnomah County older adults and people with disabilities. Administration is responsible for policy, planning, evaluation, advocacy and staff development for the division, which serves more than 50,000 people and employs 312 staff.

ADS Administration is responsible for educating and informing the public about ADS services and performance, and involving advisors in program planning and decision making. It is responsible for providing leadership that strengthens workforce competencies, advances quality improvement and evidence-based practices, and ensures culturally responsive services.

ADS Administration manages the division budget and programs to maximize revenue, hold down costs and deliver services more effectively. It provides fiscal oversight for the division and is responsible for managing a complex budget with multiple funding sources and requirements, and maximizes resources by matching federal Medicaid funds and leveraging additional resources from the community through its partnerships. ADS Administration coordinates efforts within the county and with other levels of government agencies to remove barriers and assure easy access to a seamless service system.

Satisfaction surveys and customer input are used to continually improve ADS services. The division has three Advisory Councils (Elders in Action, Disability Services Advisory Council and Multi-Ethnic Action Committee) that provide specific input on how to provide the best services to older adults, persons with disabilities and ethnic minorities or persons for whom English is not their first language. ADS Administration employs innovative, evidence-based approaches to service delivery, and uses data, best practice reviews, staff experience, support from partners and other resources to serve clients effectively within available resources.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	ADS-sponsored opportunities for consumer education and/or input	67	67	70	70
Outcome	Advisors agree/strongly agree w/the statement: "Overall, ADS does its job well"	89.0%	90.0%	88.0%	90.0%

### Performance Measure - Description

## Legal/Contractual Obligation

45 CFR Part 92; 2 CFR Part 225 OMB Circulars A-87 Federal Awards; 42 CFR 433.51 Part 4302(2) of State Medicaid manual re policy, leadership, state coordination, state policy, contract compliance; ORS 410.410-410.480 re Older Americans Act (OAA) Services; OAR 411-0320-0000 to 411-032-0044 Older Americans Act specific authorizing statutes; 45 CFR 1321.1; 35 CFR 1321.83.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$61,083	\$617,620	\$62,590	\$632,861
Contracts	\$267,253	\$143,921	\$48,552	\$162,421
Materials & Supplies	\$8,876	\$114,481	\$11,254	\$149,295
Internal Services	\$6,971	\$92,576	\$8,998	\$99,588
Total GF/non-GF:	<b>\$344,183</b>	<b>\$968,598</b>	<b>\$131,394</b>	<b>\$1,044,165</b>
Program Total:	<b>\$1,312,781</b>		<b>\$1,175,559</b>	
Program FTE	0.53	5.27	0.52	5.28
<b>Program Revenues</b>				
Intergovernmental	\$0	\$960,598	\$0	\$1,037,165
Other / Miscellaneous	\$0	\$8,000	\$0	\$7,000
Total Revenue:	<b>\$0</b>	<b>\$968,598</b>	<b>\$0</b>	<b>\$1,044,165</b>

## Explanation of Revenues

\$61,329 - Older Americans Act: Based on FY12 revised budget.  
\$975,836 - Title XIX: Based on FY12 revised budget and approved match application.  
\$3,000 - Donations: Based on FY12 projected revenue Y-T-D.  
\$4,000 - Beginning Working Capital: Based on estimated current year carryover.  
\$39,720 - County General Fund (Match)  
\$91,674 - County General Fund

## Significant Program Changes

**Last year this program was:** #25027A, ADS Administration

Last year this program was: 25027A & 25027B ADS Administration and Continuing Service Level for FY12 (Admin).



**Lead Agency:** County Human Services

**Program Contact:** Peggy Brey

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Elders in Action Commission is the federally mandated advisory council to Aging and Disability Services (ADS). Elders in Action personal advocate volunteers provide individual help to older adults who face complex problems in their lives. While the services complement the ADS case management system, they do not duplicate the technical work of a case manager. Personal advocates are peer volunteers who provide assistance on issues that are often time-consuming to solve and would be difficult or impossible for a frail person to deal with alone. Elders in Action supports a network of 180 volunteers and serves 2,700 older adults through its Personal Advocate program.

### Program Description

Elders in Action (EIA) advises local government on issues, programs, and policy that impact older adults in Multnomah County, with special emphasis on frailest, poorest, ethnic minorities and those with limited English skills. EIA Commission members provide input and advocacy to ADS, Multnomah County Board of Commissioners, the Portland City Council, and others on a wide range of issues that impact older adults, including housing, transportation, elder abuse and crime, healthcare and other important services. Commission members advocate at the local, state and federal levels for programs serving older adults. Trained older adult volunteers evaluate county-operated facilities to make sure they are accessible for older adults and persons with disabilities. They also evaluate the customer service provided by county staff and lend technical assistance to county managers on how to make their programs more accessible and elder-friendly. Utilizing results of local and national studies in addition to the tools of the nationally recognized Elder Friendly® Certification program, EIA has assessed 286 businesses in Multnomah County over two years to evaluate the quality and accessibility of their services and provided technical assistance aimed at improving the experience of older adult consumers in the community.

EIA Personal Advocate Volunteers work one-on-one to solve problems and support older adults who are facing difficult circumstances such as crime victimization, housing problems and other life challenges. They operate a peer support program where volunteers provide assistance with problem-solving that would be especially difficult for an older adult to face alone. New services created in FY12 include Elders in Action volunteers, who provide regular assistance to clients in the Multnomah County Public Guardian program and in the branch offices assisting people who have had difficulty with applying for benefits. Volunteers also provide follow-up contact to people in the Voluntary Emergency Registry twice a year to update information. Members of the EIA Speakers Bureau present information to community groups on a variety of topics affecting seniors, ranging from health care to protection from fraud and identity theft. Last year about 180 EIA volunteers provided 11,000 service hours, working as advisors to local government, as personal advocates for at-risk older adults and as community educators.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Hours of service provided by volunteers.	11,006	10,000	13,000	12,500
Outcome	Value of volunteer hours. <sup>1</sup> (\$)	203,281	183,700	240,110	225,000

### Performance Measure - Description

<sup>1</sup>The hourly rate calculation is drawn from Independent Sector, a national organization for volunteerism; the rates used here are tailored specifically for the state of Oregon. For all outcomes of this performance measure the 2009 rate of \$18.47/hour was used.

### Legal/Contractual Obligation

Multnomah County/City of Portland Inter Governmental Agreement and Multnomah County Ordinance 171424 designating Elders in Action as the official advisory agency on aging issues for Multnomah County and the City of Portland and outlines ongoing financial commitment to support a County/City Commission on Aging.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Contracts	\$161,160	\$0	\$165,189	\$0
Total GF/non-GF:	<b>\$161,160</b>	<b>\$0</b>	<b>\$165,189</b>	<b>\$0</b>
Program Total:	<b>\$161,160</b>		<b>\$165,189</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

### Explanation of Revenues

\$165,189 - County General Fund

### Significant Program Changes

Last year this program was: #25030, ADS Elders in Action Commission and Personal Advocacy

**Lead Agency:** County Human Services

**Program Contact:** Lee Girard

**Program Offer Type:** Existing Operating

**Related Programs:** 25020A

**Program Characteristics:**

### Executive Summary

This program offer requests continued funding for the Gatekeeper Program to provide training and outreach to businesses, community organizations and faith-based organizations to identify and report older adults who may be at risk for abuse, financial exploitation or self-neglect. Approximately 70% of Gatekeeper referrals result in intervention from Adult Protective Services. Trained Gatekeepers are nontraditional referral sources that come into contact with older adults through their everyday work activities. Volunteer trainers will be used to expand the availability of community training. New technologies, such as webinars and web tutorials, will be used to expand the reach and accessibility for training community volunteers.

### Program Description

The Gatekeeper Program provides training and outreach to businesses and community organizations to identify and report older adults who may be at risk for abuse, financial exploitation or self-neglect. The Gatekeeper Program, a national best practice model, identifies at-risk older adults and people with disabilities living in our community and links them to critical social and health services. The program identifies individuals who may be isolated from their support networks and experiencing financial, physical or sexual abuse. Gatekeepers are not mandatory reporters. These are nontraditional referral sources that come into contact with older adults through their everyday work activities, such as meter readers, bank tellers, letter carriers, etc. They are trained to identify signs and symptoms that would indicate a need for assistance for a vulnerable adult, including confusion, depression, poor health, functional disability, financial difficulties, or home in disrepair. ADS will continue to expand the reach of the Gatekeeper program by developing training available through new technologies, addressing the changing training environment in many organizations, and collaborating with the Multnomah County Interfaith Initiative to develop a targeted training plan for faith-based organizations.

Trained Gatekeepers make a referral to Multnomah County Aging and Disability Services' 24-Hour Helpline for follow-up assessment and service delivery. Skilled volunteers will be used to expand the availability of community training, Helpline staff triage referrals, and send a detailed report to the appropriate social service worker or to Adult Protective Services (APS). Follow-up procedures ensure that action has been taken and assistance has been offered.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number of gatekeeper trainings provided to develop gatekeepers <sup>1</sup>	0	50	40	0
Outcome	Number of gatekeeper referrals received and responded to <sup>2</sup>	0	700	450	475
Output	Number of gatekeepers who received training (New Measure)	0	0	0	600

### Performance Measure - Description

✓ **Measure Changed**

<sup>1</sup>This measure is being discontinued and replaced with measure to capture number of individuals trained. Without prior year data on number of trainings, first year estimate was high.

<sup>2</sup>Referral estimates for FY12 were based on best estimate with available data; this projection was high. Also, program unable to capture after-hours referrals in their data which would increase the number.

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2012	2012	2013	2013
Personnel	\$0	\$0	\$44,972	\$0
Materials & Supplies	\$0	\$0	\$2,028	\$0
Total GF/non-GF:	\$0	\$0	\$47,000	\$0
Program Total:	\$0		\$47,000	
Program FTE	0.00	0.00	0.50	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

County General Fund - \$47,000

Significant Program Changes

**Last year this program was:** #25032, Gatekeeper Outreach - Identifying Vulnerable Adults  
The Gatekeeper program was funded with one time only funds in FY12; the program is requesting to replace one time only with ongoing funds in FY13 with this offer.

**Lead Agency:** County Human Services

**Program Contact:** Annie Neal

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Domestic Violence (DV) Victim Services & Coordination provides in-person services for over 5,000 (unduplicated) victims and children, management of grant-funded projects and coordination of multi-jurisdiction government and community responses. Research shows that these services reduce re-assault of victims, reduce the number of reported violent crimes and improve outcomes for victims and children.

### Program Description

The county expends at least \$10 million in criminal justice costs (jail, prosecution and probation supervision) and \$2.5 million in victim services annually. These services increase employment, income, quality of life; decrease the level of danger and of assault, PTSD, depression, alcohol & drug abuse; and improve the health of victims and their children. DV costs the community another \$10 million in lost wages, health care and other costs.

Victim services funded in this offer include: safe emergency shelter and supportive services (350 victims and 319 children in shelter; 489 victims and 434 children through short-term rent assistance and motel vouchers); civil legal advocacy and restraining order room assistance ensuring safety after separation (2500 victims); mobile advocacy and rent assistance with supportive services (237 victims and 255 children); and culturally-specific services for Latinas, Russians, African Americans, Native Americans, immigrants/refugees and sexual minorities (295 victims and 478 children); and specialized support for victims involved with police and child welfare (250 victims and 500 children). Evidence-based practices include emergency shelters, shown to reduce the incidence of re-assault by 50%, and civil legal services, shown to reduce homicides.

This offer provides professional staffing for coordination efforts, such as the Family Violence Coordinating Council which provides a forum for collaborative efforts including training, policy and program development and implementation, and system-wide problem solving. The 40 organizations that are members represent the criminal justice system, victim services, health care, batterers intervention and others. In addition, staff provide training for and/or coordinate multiple multi-disciplinary efforts, including Domestic Violence Enhanced Response Team (DVERT) and Safe Start and participate in and staff the county DV Fatality Review Process meetings. This program offer is based on four major agreements, policies or plans: 1) 1997 Portland-Multnomah County agreement that the county would take over full responsibility "for planning, funding, and tracking performance of shelter and services for victims of domestic violence;" 2) 2000 LPSCC evaluation of the criminal justice system which recommended development of a more intensive response to high risk DV cases; 3) Victim services system plan, adopted by the Board in 2002; and 4) County Resolution 00-149 (Domestic Violence Policy), which directs the county to "develop effective and integrated responses to domestic violence."

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number of participants and their children served in person <sup>1</sup>	5,709	6,000	5,200	5,000
Outcome	% of victims who report perceived increase in safety at exit <sup>2</sup>	81.0%	70.0%	80.0%	70.0%

### Performance Measure - Description

✓ **Measure Changed**

<sup>1</sup> Number of participants includes only those receiving face-to-face services (not crisis line services). This year, current year estimates reflect an unduplicated number of people served. Some victims receive services from multiple program areas.

<sup>2</sup> Victims who report a perceived increase in safety/lower risk of violence at exit is a new measure. Victims who receive brief crisis services (such as restraining order advocacy or short-term emergency motel stay) are not asked about perceived risk of violence. Percentage of clients in stable services includes only those clients in transitional housing or rent assistance programs.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$527,452	\$177,805	\$551,892	\$198,680
Contracts	\$1,470,534	\$633,210	\$1,537,958	\$623,787
Materials & Supplies	\$175,284	\$405,392	\$180,914	\$384,877
Internal Services	\$79,638	\$28,281	\$64,800	\$64,471
Total GF/non-GF:	<b>\$2,252,908</b>	<b>\$1,244,688</b>	<b>\$2,335,564</b>	<b>\$1,271,815</b>
Program Total:	<b>\$3,497,596</b>		<b>\$3,607,379</b>	
Program FTE	5.75	1.75	5.90	2.23
<b>Program Revenues</b>				
Indirect for dep't Admin	\$13,776	\$0	\$14,227	\$0
Fees, Permits & Charges	\$0	\$41,804	\$0	\$0
Intergovernmental	\$0	\$1,201,684	\$0	\$1,270,515
Other / Miscellaneous	\$0	\$1,200	\$0	\$1,300
<b>Total Revenue:</b>	<b>\$13,776</b>	<b>\$1,244,688</b>	<b>\$14,227</b>	<b>\$1,271,815</b>

**Explanation of Revenues**

\$462,083 - HUD Horizons Grant: Based on FY12 revised budget  
 \$168,092 - Oregon Housing and Community Service SHAP Grant: Based on current award  
 \$340,340 - Department of Justice - DVERT; \$83,333 - DOJ OVW Transitional Housing; \$166,667 - DOJ - OJJDP  
 \$50,000 - City of Portland GF - Based on FY12 revised budget  
 \$100 - United Way - Based current year projected estimates  
 \$1,200 - Domestic Partnership Fees: Based on FY12 current registration level  
 \$51,480 - County General Fund Match  
 \$2,284,084 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25040A, Domestic Violence Victims Services and Coordination

The joint Multnomah County-City of Portland supported Gateway Center for DV Services opened in September 2010. In its first 12 months, the Center had 7000 visits and served 2000 unduplicated individuals, highlighting a significant, previously unmet need. Funding for the Gateway Center is not included in this program offer.

A 3-year federal grant, the Defending Childhood Initiative, provides a new focus on the impact of children's exposure to violence by providing training and capacity-building in existing programs.

**Lead Agency:** County Human Services

**Program Contact:** David Hidalgo

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Multnomah County's Mental Health and Addiction Services Division (MHASD) Administration manages a recovery-focused, comprehensive system of care to prevent, intervene in, and treat mental illness and addiction in children and adults. Through culturally responsive and evidence-based practices MHASD serves low-income, uninsured, and homeless people, as well as anyone who is in crisis. MHASD provides a continuum of services directly and through a provider network. In total, these programs serve more than 30,000 children, families and adults annually.

### Program Description

The Board of County Commissioners is the Local Mental Health Authority. Through that authority, MHASD Administration provides oversight and management of all behavioral health programs in the system of care, whether provided directly or through contracted agencies.

MHASD is organized into three units:

- 1) Verity, the county's Mental Health Organization (MHO), a federally funded insurance program for children, youth and adults enrolled in Oregon Health Plan.
- 2) The Community Mental Health Program (CMHP) provides services that include involuntary commitment, crisis services, and addiction treatment.
- 3) Direct Clinical Services (DCS) encompassing all programs for children, youth, and adults where services are delivered by MHASD staff. These services may be reimbursed by Verity, by the State, or by another funding source.

MHASD administration continuously assesses its continuum of services to respond to the changing needs and demographics of Multnomah County. All changes are shaped by the input of consumers, advocates, providers and stakeholders. MHASD does this through frequent provider, adult system and child system advisory meetings, focus groups and ad hoc meetings.

MHASD administration is also responsible for ensuring contracted providers deliver evidence-based and culturally responsive services to consumers. We monitor our contracts with providers for fiscal, regulatory, and clinical compliance.

To ensure good stewardship, MHASD business and clinical decisions ensure that finite resources are targeted to serve the most vulnerable populations. MHASD management participates in planning at the state level to influence the policy decisions that affect the community we serve. We value our community partners, with whom we work collaboratively to create a system of care responsive to the needs of our community.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Total Adult/Child MHASD Advisory Meetings <sup>1</sup>	34	26	37	37
Outcome	Advisors agree with the statement: Overall, MHASD does its job well <sup>2</sup>	0.0%	80.0%	80.0%	0.0%

### Performance Measure - Description

<sup>1</sup>Total number of MHASD AMHSA, CMHSAC, Family Youth Advisory Council, Wraparound CPC, and Wraparound Executive Committee meetings during the measurement period.

<sup>2</sup> This survey will be conducted every 2 years and will be repeated in the spring of FY2012.

## Legal/Contractual Obligation

Oregon Administrative Rule, Standards for Management of Community Mental Health and Developmental Disability Programs, 309-014-0020, 309-014-0035, 309-14-0040.  
Mental Health Organization contract

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$137,517	\$616,415	\$137,350	\$842,643
Contracts	\$0	\$52,500	\$0	\$100,000
Materials & Supplies	\$1,945	\$44,351	\$1,945	\$84,641
Internal Services	\$0	\$80,827	\$0	\$81,283
Total GF/non-GF:	<b>\$139,462</b>	<b>\$794,093</b>	<b>\$139,295</b>	<b>\$1,108,567</b>
Program Total:	<b>\$933,555</b>		<b>\$1,247,862</b>	
Program FTE	0.62	4.88	0.67	6.33
<b>Program Revenues</b>				
Indirect for dep't Admin	\$13,372	\$0	\$14,298	\$0
Intergovernmental	\$0	\$794,093	\$0	\$968,407
Other / Miscellaneous	\$0	\$0	\$0	\$140,160
<b>Total Revenue:</b>	<b>\$13,372</b>	<b>\$794,093</b>	<b>\$14,298</b>	<b>\$1,108,567</b>

## Explanation of Revenues

\$233,872 - State Mental Health Grant Local Admin: Based on FY12 grant award  
\$124,601 - State Mental Health Grant Non Residential Adult MH: Based on FY12 grant award  
\$36,055 - State Mental Health Grant Beginning Working Capital: Based on 09-11 settlement estimate  
\$619,934 - Oregon Health Plan Premium: Based on FY12 Rate per client times number of clients as of 12/31/11  
\$104,105 - Health Department Revenue: Based on FY12 Estimated cost  
\$139,295 - County General Fund

## Significant Program Changes

**Last year this program was:** #25050, MHASD Administration  
Increased 0.5 FTE - Psychiatrist and 1.0 FTE - Program Supervisor



**Lead Agency:** County Human Services

**Program Contact:** Joan Rice

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Medical Records Program is responsible for the internal management of all of the Mental Health and Addiction Services Division's clinical records, including more than 75,000 adult and children's mental health and alcohol and drug client records, and Verity MHO records required by Oregon Administrative Rules.

### Program Description

Mental Health and Addiction Services Division (MHASD) Records ensures that mental health, alcohol and drug, and Verity managed care records are maintained in accordance with federal and state laws and regulations, and county and departmental rules, policies, and procedures.

Program staff provide multiple client records services including: access; inventory; retrieval; billing and administrative rule compliance auditing; archiving; forms design and management; authorization/release of information; legal requests for records; data analysis; and technical assistance to community agencies and county staff.

In FY13, the Division will implement an electronic health record system (EHR). This will require multiple process changes for the Records unit and the Division. The Records unit will scan collateral documents, including historical and current documents, and attach them to the client record in the EHR.

As the Local Mental Health Authority, MHASD is responsible for programs such as involuntary commitment, commitment monitor, trial visit and residential services. In FY13, these programs will require the creation of approximately 5,500 individual records. The MHASD programs where services are provided by county staff are expected to serve more than 1,300 individuals, each requiring a medical record.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Count of clinical and managed care records items processed annually	26,594	25,340	26,996	0
Outcome	New Measure: Count of record items processed annually plus scanned page count. <sup>1</sup>	0	0	0	619,714
Output	New Measure: Total MHASD medical records reviewed for compliance. <sup>2</sup>	2,984	2,640	2,640	2,624
Outcome	Percent of direct service records audited for compliance with rules/contracts.	75.0%	100.0%	100.0%	100.0%

### Performance Measure - Description

✓ **Measure Changed**

<sup>1</sup> New Measure. Notarizing, subpoenas/court orders and other requests for information will remain after the implementation of the EHR. Retrieval, refiling, and archiving paper records will be eliminated over time (4-5 years). Creation of new paper charts will discontinue in FY13. Minimum of 2 elements each record. New tasks will include scanning collateral documents and registration of certain clients into EHR. The count of images scanned (605,000) will decrease by about half in subsequent years since this first year includes both historical and ongoing data.

<sup>2</sup> New measure. Records Program auditing function expanded in FY12. Count of client records reviewed for compliance with administrative rule. Minimum of 2 required elements in each record are audited by certified records techs.

### Legal/Contractual Obligation

The following guidelines are utilized in monitoring MHASD compliance to federal, state and county rules and audits regarding client confidentiality of clinical records, the release of any confidential client information, the retention of client confidential information, responding to subpoenas and court orders for confidential client records and standards for clinical documentation: State of Oregon Mental Health & Developmental Disability Services Division "Handbook of Confidentiality", HIPAA, DSM IV "Diagnostics & Statistical Manual of Mental Disorders", Children's & Adult State of Oregon Administrative Rules, Oregon Revised Statutes related to medical records & client confidentiality, State Archiving rules, Code of Federal Regulations Title 42 Public Health, Chapter 1 Part 2, Public Law 94-142, Public Law 99-57, State of Oregon Mandatory Child Abuse Reporting Laws, Oregon Health Plan, Mental Health Organization Contract, Verity Policies & Procedures, Practice Guidelines for the Oregon Health Information Management Association and the American Health Information Management Association, and Centers for Medicare and Medicaid billing regulations.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$593,554	\$0	\$596,933	\$0
Materials & Supplies	\$19,966	\$0	\$24,234	\$0
Internal Services	\$89,490	\$0	\$89,470	\$0
Total GF/non-GF:	<b>\$703,010</b>	<b>\$0</b>	<b>\$710,637</b>	<b>\$0</b>
Program Total:	<b>\$703,010</b>		<b>\$710,637</b>	
Program FTE	8.00	0.00	8.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

### Explanation of Revenues

\$710,637 - County General Fund

### Significant Program Changes

Last year this program was: #25052, Medical Records for MHASD

**Lead Agency:** County Human Services

**Program Contact:** Charmaine Kinney

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Quality Management works to assure quality of contracted providers through mental health agency audits, investigations, and monitoring mental health contract performance. The program serves approximately 100,000 Verity Oregon Health Plan (OHP) members, 52 mental health agencies and 73 residential/foster facilities. Quality Management educates OHP members about available mental health services and ensures effectiveness of services by measuring treatment outcomes, client satisfaction, utilization review, including hospital use and through the grievance system.

### Program Description

Quality Management protects and supports mentally ill adults and children in Multnomah County by providing specific services including: coordinating compliance with Health Insurance Portability and Accountability Act (HIPAA) rules and Verity contracts, building client outcome measurements, supervising certification process for community mental health agencies, assuring compliance for grievance procedures, auditing and providing technical support to 52 mental health agencies, coordinating residential quality and tracking approximately 9,394 reportable residential adverse events annually, assisting with licensing visits and Oregon Administrative Rules (OARs) compliance for 43 state-funded residential treatment homes and facilities, investigating complaints about residential care, monitoring progress of providers found out of compliance with OARs, and investigating abuse allegations and providing protective services to approximately 200 adult mental health clients annually. These investigations serve to protect some of the most vulnerable individuals in our mental health system.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Total clinical reviews/protective service investigations/incidents reports reviewed	10,106	7,200	10,300	10,300
Outcome	Percent of certification reviews conducted within 3 year maximum OAR mandate**	100.0%	100.0%	100.0%	100.0%

### Performance Measure - Description

\*Output: Residential critical incidents + total protective service investigations/screenings + total clinical reviews (treatment records reviewed for mental health agency certification or Verity compliance)

\*\*Percentage of reviews conducted within a 3 year period does not include Oregon Addiction and Mental Health Services Division authorized extensions

### Legal/Contractual Obligation

1) Each provider of community mental health and developmental disability service elements shall implement and maintain a quality assurance program, (309-014-0030). Elements of the QA program include maintaining policies and procedures, grievance management, fraud and abuse monitoring, performance measurement, and contract management. 2) As a function of the Multnomah County, Mental Health and Addiction Services Division representing the Local Mental Health Authority (LMHA), provides oversight and makes recommendations to the State Addictions and Mental Health Division (AMH) regarding the issuing of Certificates of Approval held by Community Mental Health Agencies for Medicaid populations as outlined in OARs 309-012-0130 through 309-012-0220. 3) The LMHA as a designee for DHS shall conduct the investigations and make the findings required by ORS 430.735 to 430.765 for allegations of abuse of a person with mental illness being served in a program paid for by Multnomah County.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$430,141	\$1,007,576	\$443,503	\$1,024,755
Contracts	\$0	\$81,250	\$0	\$135,800
Materials & Supplies	\$31,474	\$35,948	\$16,853	\$30,559
Internal Services	\$0	\$177,425	\$0	\$175,295
Total GF/non-GF:	<b>\$461,615</b>	<b>\$1,302,199</b>	<b>\$460,356</b>	<b>\$1,366,409</b>
Program Total:	<b>\$1,763,814</b>		<b>\$1,826,765</b>	
Program FTE	4.60	9.50	4.60	9.50
<b>Program Revenues</b>				
Indirect for dep't Admin	\$22,876	\$0	\$23,817	\$0
Intergovernmental	\$0	\$1,302,199	\$0	\$1,366,409
Total Revenue:	<b>\$22,876</b>	<b>\$1,302,199</b>	<b>\$23,817</b>	<b>\$1,366,409</b>

### Explanation of Revenues

\$1,047,228- Oregon Health Plan Premium: Based on FY12 Rate per client times number of clients as of 12/31/11  
\$319,181 - State Mental Health Grant: Based on FY12 revised budget  
\$460,356 - County General Fund

### Significant Program Changes

Last year this program was: #25053, Mental Health Quality Management and Protective Services

**Lead Agency:** County Human Services

**Program Contact:** Carol Matteson

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Business and Finance manages revenue and expenses for the Mental Health and Addiction Service Division's (MHASD) \$99 million budget. It controls the county's financial risk for over \$45 million in Medicaid funds through rate setting, claims adjudication and supervision of a third party administrator (TPA). Business and Finance supports MHASD in serving approximately 29,000 unduplicated individuals annually. It analyzes claim, authorization and enrollment data to forecast future claims expenses.

### Program Description

MHASD's Business and Finance supports the systems of care for some of Multnomah County's most vulnerable populations, including those who are indigent and in need of mental health and addiction treatment. Staff support both the child and adult systems of care. Business and Finance manages the complex financial transactions required to deliver services in the county's Mental Health Organization (MHO), Verity. Verity is a federal insurance program funded by Medicaid and is a risk bearing entity. If expenditures exceed revenue, the county must make up the difference. It is the job of Business and Finance to ensure this does not happen.

Business and Finance produces financial and service utilization reports, interfaces with a third party administrator (TPA) to process Medicaid claims, and tracks funding from the state. It develops new procedures to respond to changes in federal and state funding. Business and Finance staff respond to financial inquiries from agencies, hospitals, elected officials, and the public. Business and Finance provides decision support and day to day information to the MHASD director and management team through timely financial projections to accompany pending business and fiscal decisions. MHASD Business and Finance staff work closely with DCHS Business Services and Central County Finance in all aspects of budget and finance.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Keep MHASD programs within authorized appropriations	100.0%	100.0%	100.0%	100.0%
Outcome	Exceptions noted by independent auditor annually <sup>1</sup>	0	0	0	0

### Performance Measure - Description

<sup>1</sup>Business and Finance's goal is zero exceptions noted by independent auditor.

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$255,609	\$433,226	\$246,259	\$420,016
Contracts	\$61,650	\$800,000	\$0	\$1,040,000
Materials & Supplies	\$34,904	\$216,562	\$34,777	\$169,491
Internal Services	\$17,685	\$122,876	\$17,685	\$119,123
Total GF/non-GF:	<b>\$369,848</b>	<b>\$1,572,664</b>	<b>\$298,721</b>	<b>\$1,748,630</b>
Program Total:	<b>\$1,942,512</b>		<b>\$2,047,351</b>	
Program FTE	3.10	4.75	3.10	4.75
<b>Program Revenues</b>				
Indirect for dep't Admin	\$35,721	\$0	\$36,961	\$0
Intergovernmental	\$0	\$1,536,609	\$0	\$1,602,503
Other / Miscellaneous	\$0	\$36,055	\$0	\$146,127
<b>Total Revenue:</b>	<b>\$35,721</b>	<b>\$1,572,664</b>	<b>\$36,961</b>	<b>\$1,748,630</b>

**Explanation of Revenues**

\$146,127 - State Mental Health Grant Beginning Working Capital: Based on estimated 09-11 settlement revenue  
 \$1,602,503 - Oregon Health Plan Premium: Based on FY12 Rate per Client times number of clients as of 12/31/11  
 \$298,721 - County General Fund

**Significant Program Changes**

Last year this program was: #25054, MHASD Business and Finance

**Lead Agency:** County Human Services

**Program Contact:** David Hidalgo

**Program Offer Type:** Existing Operating

**Related Programs:** 25055B

**Program Characteristics:**

**Executive Summary**

Mental Health and Addiction Services Division operates a 24-hour, 365-day-a-year behavioral health emergency crisis response system. FY12 services include a crisis hotline, mobile crisis outreach and an urgent walk-in clinic. Included in the management of the crisis system is the authorization of services for Verity enrolled members as well as indigent services. The total number of people served in FY11 was 62,826.

Due to State of Oregon General Fund budget reductions in FY12 of \$1,584,090, this offer includes only services that can be funded by remaining \$955,678 County General Fund and \$1,508,025 Verity funds and State General Fund of \$1,895,864. These remaining services include: mobile crisis outreach 24/7 coverage, 50% reduction in hours for the Call Center and Urgent Walk In Clinic and the authorization of services for Verity enrolled members as well as indigent services.

**Program Description**

The behavioral health crisis system in Multnomah County is comprised of several distinct, yet interconnected services:

**Multnomah County Call Center** – This service is operated by Multnomah County 24/7, 365 days/year. The call center coordinates emergency mental health services for all county residents regardless of insurance status. Interpretation services are available for callers when needed. It also provides the following services: deploys mobile crisis resources as needed, provides information and referral, linkage to behavioral health services, community education on suicide prevention, after hours hospitalization authorizations for Verity members, and authorizations for indigent medications and transportation. The total number of calls managed in FY11 was 52,336.

**Project Respond** – This is the mobile outreach service that is contracted with a community based organization and is available 24/7, 365 days/year. Project Respond is deployed by the Call Center or Portland Police to provide face-to-face crisis evaluation and triage services to those in crisis regardless of insurance status. In FY11, the total number of clients served was 2,169.

**Urgent Walk-In Clinic (UWIC)** – This is a clinic based service contracted with a community based organization, available from 7 a.m. to 10:30 p.m., 365 days/year, that provides crisis evaluation, triage, and stabilization on a walk-in basis. The Urgent Walk-In Clinic is the only service available to indigent clients in crisis in Multnomah County with immediate access to a psychiatrist or psychiatric mental health nurse practitioner for medication evaluation and treatment. The clients seen at the walk-in clinic are primarily indigent. The total number of clients served in FY11 was 4,305.

**Utilization Review** – This function, operated in the Call Center, provides authorization oversight of Verity funds and indigent treatment funds for those experiencing mental health emergencies and crises. This clinical function ensures that expenditures stay within budget. The total number of contacts was 4,016 in FY11.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Total crisis system contacts and utilization reviews	62,826	62,000	63,351	34,505
Outcome	% of UWIC clients seen by the UWIC that did not need to be referred to an ER**	96.5%	97.0%	96.4%	97.0%

**Performance Measure - Description**

\*Total crisis system contacts actuals for FY11 = call center contacts (52,336), project respond contacts (2,169), urgent walk in clinics contacts (4,305) and utilization reviews (4,016). FY13 includes FY12 Project Respond contacts and 50% of FY12 urgent walk in contacts and 50% call center contacts.

## Legal/Contractual Obligation

State of Oregon Mental Health Organization contract, Oregon Administrative Rules 410-141-0120 and 410-141-140, and Oregon Revised Statute 430.630. Local Mental Health Authority/Community Mental Health Program responsibility to provide crisis services.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$0	\$2,242,330	\$0	\$1,100,642
Contracts	\$1,073,345	\$2,957,413	\$1,220,787	\$2,190,957
Materials & Supplies	\$0	\$118,817	\$0	\$50,962
Internal Services	\$0	\$281,099	\$0	\$281,834
Total GF/non-GF:	<b>\$1,073,345</b>	<b>\$5,599,659</b>	<b>\$1,220,787</b>	<b>\$3,624,395</b>
Program Total:	<b>\$6,673,004</b>		<b>\$4,845,182</b>	
Program FTE	0.00	19.96	0.00	10.07
<b>Program Revenues</b>				
Indirect for dep't Admin	\$35,057	\$0	\$21,177	\$0
Fees, Permits & Charges	\$0	\$0	\$0	\$5,000
Intergovernmental	\$0	\$5,505,659	\$0	\$3,377,042
Other / Miscellaneous	\$0	\$94,000	\$0	\$242,353
<b>Total Revenue:</b>	<b>\$35,057</b>	<b>\$5,599,659</b>	<b>\$21,177</b>	<b>\$3,624,395</b>

## Explanation of Revenues

\$67,885 - State Mental Health Grant Local Admin  
\$2,014,104 - State Mental Health Grant Non Residential  
\$391,515 - State Mental Health Grant Community Crisis Services; all Based on FY12 grant award  
\$242,353 - State Mental Health Grant Beginning Working Capital: Based on estimated 09-11 settlement funding  
\$903,538 - Oregon Health Plan Premium: Based on FY12 Rate per Client times number of clients as of 12/31/11  
\$5,000 - Fees: Based on FY12 received Y-T-D Revenue projections  
\$1,220,787 - County General Fund

## Significant Program Changes

**Last year this program was:** #25055, Behavioral Health Crisis Services

Last year this program was funded by three funding sources; county general fund, state general fund and Verity OHP Medicaid. In FY12, as a result of a new state funding formula, state general fund to Multnomah County for the crisis system was cut by \$1,584,090. This change in funding impairs the ability of the county's crisis line to meet community need and will reduce hours from 24 hours a day to 12 hours a day. The urgent walk-in clinic will be reduced from 15 hours a day to 7.5 hours a day. The county's 24 mobile outreach program will remain 24 hours a day. Moved 7.66 FTE-Mental Health Consultants & 0.5 FTE-Program Supervisor to 25055B. Moved 2.0 FTE-Mental Health Consultant & 0.73 FTE-Program Supervisor to 25061-Adult Mental Health Initiative (AMHI). Added 1.0 FTE-Community Health Nurse for a net decrease of 9.89 FTE.



**Lead Agency:** County Human Services

**Program Contact:** David Hidalgo

**Program Offer Type:** Existing Operating

**Related Programs:** 25055A

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

### Executive Summary

This scaled offer represents the \$1,584,090 million state general fund FY12 reduction in crisis services. In order to maintain services at current level Verity OHP fund is needed.

This program offer allows the Mental Health and Addiction Services Division to continue to operate the complete 24 hour a day, seven day a week behavioral health emergency crisis response system continuum of services. FY12 services include a crisis hotline, mobile crisis outreach and an urgent walk-in clinic.

### Program Description

The behavioral health crisis system in Multnomah County is comprised of several distinct, yet interconnected services:

**Multnomah County Call Center** – This service is operated by Multnomah County 24/7, 365 days/year. The call center coordinates emergency mental health services for all county residents regardless of insurance status. Interpretation services are available for callers when needed. It also provides the following services: deploys mobile crisis resources as needed, provides information and referral, linkage to behavioral health services, community education on suicide prevention, afterhours hospitalization authorizations for Verity members, and authorizations for indigent medications and transportation. The total number of calls managed is 52,336 for a year.

**Project Respond** – This is the mobile outreach service that is contracted with a community based organization and is available 24/7, 365 days/year. Project Respond is deployed by the Call Center or Portland Police to provide face-to-face crisis evaluation and triage services to those in crisis regardless of insurance status. The total number of clients served was 2,169 for a year.

**Urgent Walk-In Clinic (UWIC)** – This is a clinic based service contracted with a community based organization, available from 7 a.m. to 10:30 p.m., 365 days/year, that provides crisis evaluation, triage, and stabilization on a walk-in basis. The Urgent Walk-In Clinic is the only service available to indigent clients in crisis in Multnomah County with immediate access to a psychiatrist or psychiatric mental health nurse practitioner for medication evaluation and treatment. The clients primarily seen at the walk-in clinic are indigent. The total number of clients served was 4,305 for a year.

**Utilization Review** – This function, operated in the Call Center, provides authorization oversight of Verity funds and indigent treatment funds for those experiencing mental health emergencies and crises. This clinical function ensures that expenditures stay within budget. The total number of contacts was 4,016 for a year.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Total Crisis System Contacts <sup>1</sup>	0	0	0	28,321
Outcome	% of UWIC clients seen by the UWIC that did not need to be referred to an ER**	0.0%	0.0%	0.0%	97.0%

### Performance Measure - Description

<sup>1</sup> Total crisis system contacts actuals for FY11 = call center contacts (52,336), project respond contacts (2,169), urgent walk in clinics contacts (4,305) and utilization reviews (4,016). This measure equals the total number of contacts in offer 25055A subtracted from the total number of contacts provided in FY11 (62,826).

### Legal/Contractual Obligation

State of Oregon Mental Health Organization contract, Oregon Administrative Rules 410-141-0120 and 410-141-140, and Oregon Revised Statute 430.630. Local Mental Health Authority/Community Mental Health Program responsibility to provide crisis services.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$0	\$0	\$0	\$817,633
Contracts	\$0	\$0	\$0	\$766,456
Internal Services	\$0	\$0	\$0	\$478,494
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,062,583</b>
Program Total:	<b>\$0</b>		<b>\$2,062,583</b>	
Program FTE	0.00	0.00	0.00	8.16
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$358,252	\$0
Other / Miscellaneous	\$0	\$0	\$0	\$2,062,583
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$358,252</b>	<b>\$2,062,583</b>

### Explanation of Revenues

\$2,062,583 - Oregon Health Plan (Verity) Reserves

### Significant Program Changes

**Last year this program was:** #25055, Behavioral Health Crisis Services

Includes 7.66 FTE-Mental Health Consultants & 0.5 FTE Program Supervisor previously budgeted in FY 2012's Program Offer 25055-Behavioral Health Crisis Services.

**Lead Agency:** County Human Services

**Program Contact:** David Hidalgo

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Mental Health and Addiction Services Division (MHASD) has identified alternatives to inpatient hospitalization as an essential service in the continuum of care. The Crisis Assessment and Treatment Center, CATC, offers 16 beds of short-term mental health treatment in a secure locked environment as a lower cost alternative to hospitalization for over 500 clients per year. Facility staffing includes physical and mental health professionals and peer support specialists.

### Program Description

Sub-acute is a short-term stabilization program for those individuals in a mental health crisis who require a secure alternative to incarceration or hospitalization. It is a critical component in a full continuum of mental health services. Although it works with other community agencies that provide long term-care, the mission of the sub-acute facility is brief intervention when a person becomes a danger to themselves or others due to his/her mental illness. The target length of stay is 6 days. Since the individual remains linked to the community, length-of-stay is minimized and the person is less likely to lose critical recovery supports including Medicaid eligibility and housing. Sub-acute care is less expensive than hospitalization. As part of a best practice model for facilities of this type, the treatment team includes consumer positions on staff (Peer Support Specialists) to provide mentoring and linkage to services in the community. These positions are salaried members of the treatment team and a part of MHASD's goal to integrate peer delivered services into the system of care.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of admissions that are Verity members <sup>1</sup>	0	0	306	306
Outcome	Number of Verity inpatient (hospital) bed days per thousand members <sup>2</sup>	0	0	140	130
Output	# of admissions that are indigent and/or Medicare <sup>1</sup>	0	0	238	238
Output	Number of inpatient days for uninsured/indigent/Medicare adults <sup>2</sup>	0	0	4,544	4,544

### Performance Measure - Description

✓ **Measure Changed**

<sup>1</sup>Last year's offer was a projection for a program that opened in June 2011. Since the program has opened, the measure needed to be revised. The previous output, "# persons admitted who would otherwise have been hospitalized or jailed" was broken into two populations, Verity members, and Indigent/Medicare clients.

<sup>2</sup> Inpatient days refers to hospital stays- a lower number indicates a reduction in use of this highest and most expensive level of care.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Contracts	\$597,500	\$2,646,295	\$597,500	\$2,546,295
Internal Services	\$0	\$256,253	\$0	\$276,199
Total GF/non-GF:	<b>\$597,500</b>	<b>\$2,902,548</b>	<b>\$597,500</b>	<b>\$2,822,494</b>
Program Total:	<b>\$3,500,048</b>		<b>\$3,419,994</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Indirect for dep't Admin	\$44,287	\$0	\$41,973	\$0
Intergovernmental	\$0	\$2,902,548	\$0	\$2,822,494
<b>Total Revenue:</b>	<b>\$44,287</b>	<b>\$2,902,548</b>	<b>\$41,973</b>	<b>\$2,822,494</b>

**Explanation of Revenues**

\$405,173 - State Mental Health Grant Regional Acute Inpatient Facility: Based on FY12 grant award  
 \$1,819,821 - Oregon Health Plan Premium: Based on FY12 Rate per Client times number of clients as of 12/31/11  
 \$597,500 - City of Portland: Based on FY12 budget  
 \$597,500 - County General Fund

**Significant Program Changes**

Last year this program was: #25056, Mental Health Subacute Facility - Operating

**Lead Agency:** County Human Services

**Program Contact:** Len Lomash

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The more intensive mental health needs of children and families enrolled in Oregon Health Plan are met through the following service types: psychiatric inpatient hospitalization services, psychiatric residential treatment services for children, and secure alternatives to psychiatric hospitalization for children. The three program elements combined provide a continuum of services for approximately 190 children each year who need secure placement outside the home for mental health care.

### Program Description

Three distinct levels of higher intensity care are available in the mental health service continuum for children and families: Psychiatric inpatient hospitalization is the most intensive and restrictive level of treatment for children suffering from mental illness. The Mental Health and Addiction Services Division (MHASD) Utilization Management Team coordinates with hospital and community providers to recommend inpatient medical treatment only when community-based care is inadequate to prevent a mental health crisis or manage severe symptoms, based on medical necessity and clinical criteria. The average hospital stay for a child is 9.1 days.

Secure alternatives to psychiatric hospitalization (sub-acute) stabilize mental health symptoms for children who would otherwise require inpatient hospitalization. Service is provided at a secure community-based facility that is staffed 24 hours a day with medical and clinical personnel. Treatment includes clinical programming, family therapy, medication management and discharge planning. The MHASD Utilization Management Team authorizes the service.

The least intensive of these three service types, psychiatric residential services, treat children who, because of acute mental illness, are unable to manage their own behavior and who often present a threat to themselves and their parents. Highly trained staff provide 24-hour-a-day service, including psychiatric day treatment, medication management and basic supervision. MHASD's Utilization Management Team manages these services and works with providers to discharge children into the community when appropriate.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Total unduplicated children receiving inpatient, subacute & residential care <sup>1</sup>	183	183	193	193
Outcome	Average length of stay in psychiatric residential treatment <sup>2</sup>	90	85	110	90

### Performance Measure - Description

**Legal/Contractual Obligation**

State of Oregon Mental Health Organization (MHO) contract; Statement of Work.

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Contracts	\$0	\$3,396,382	\$0	\$4,789,440
Internal Services	\$0	\$168,461	\$0	\$215,046
Total GF/non-GF:	<b>\$0</b>	<b>\$3,564,843</b>	<b>\$0</b>	<b>\$5,004,486</b>
Program Total:	<b>\$3,564,843</b>		<b>\$5,004,486</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Indirect for dep't Admin	\$82,872	\$0	\$115,425	\$0
Intergovernmental	\$0	\$3,564,843	\$0	\$5,004,486
<b>Total Revenue:</b>	<b>\$82,872</b>	<b>\$3,564,843</b>	<b>\$115,425</b>	<b>\$5,004,486</b>

**Explanation of Revenues**

\$5,004,486 - Oregon Health Plan Premium: Based on FY12 Rate per Client times number of clients as of 12/31/11

**Significant Program Changes**

Last year this program was: #25057, Inpatient, Subacute & Residential MH Services for Children

**Lead Agency:** County Human Services

**Program Contact:** Jean Dentinger

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Commitment Services includes Emergency Psychiatric Holds (E-Holds), Involuntary Commitment Program (ICP), Commitment Monitors, and the State Hospital Waitlist Reduction Program (WLRP). The county is the payor of last resort for indigent E-Holds and ICP staff are required to investigate and determine whether individuals on an E-Hold present a risk of harm to themselves or others and if a court hearing should be recommended. Provision of commitment monitors is a requirement of the county as the Local Mental Health Authority (LMHA). In FY12 ICP investigated 1,400 E-Holds for indigent residents and 4,736 total holds; commitment staff monitored 546 patients and 160 trial visits. In FY12, the state also began funding the county to pay for hospital admissions of uninsured consumers who are committed and monitored by MHASD's commitment monitors.

### Program Description

Commitment Services is comprised of several distinct, yet interconnected services:

**Involuntary Commitment Program:** An E-Hold places an individual in a hospital while ICP staff investigate the individual's mental health status to determine if the person has a mental illness and is dangerous to self and/or others. ICP staff file for a pre-commitment hearing with the circuit court. When staff recommend a hearing, ORS 426.110-120 requires that a court examiner make an independent recommendation to the Judge.

**Emergency Hold:** When an individual is placed on an E-Hold and cannot pay for the hospital stay, ORS 426 requires that the county pay for these services. The county is required to provide commitment monitoring services.

**Commitment Monitors:** Staff in this unit assess committed individuals to determine whether they continue to meet commitment criteria, work with hospital staff to develop treatment and discharge plans, and make recommendations on continued hospitalization. Commitment monitors perform monitoring services during trial visits to the community, facilitate financial and medical entitlements, and ensure that individuals transition into the most appropriate level of community care. In FY12, the state began funding the county to pay for uninsured consumers who are committed and monitored in the hospital by MHASD's commitment monitors.

**State Hospital Waitlist Reduction Program (WLRP):** Funding provides for Intensive Case Management (ICM) for patients discharging from the State Hospital and acute care hospitals, and for four Emergency Department Liaisons. ICM and transition planning prevent relapses into hospital care and reduce the County's burden as the payor of last resort. ICM staff provide connection with resources and assistance in obtaining housing, access to health care, social services, and outpatient mental health services. These services address the needs of mentally ill county residents at the highest level of care. Services provide care and service coordination, ensure adequacy and appropriateness of resources and provide protection of legal and civil rights.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of E-Holds for indigent County residents	1,100	1,100	1,400	1,250
Outcome	% of total E-Holds that went to Court hearing <sup>1</sup>	7.4%	8.4%	7.3%	7.3%
Output	# of commitments monitored	750	650	546	600
Outcome	% of total E-Holds with a hearing that resulted in commitment <sup>2</sup>	73.0%	80.0%	82.7%	83.0%

### Performance Measure - Description

<sup>1</sup>Outcomes measure staff effectiveness in applying ORS 426- This measure is the percentage of E-Hold Court hearings that result in a commitment.

<sup>2</sup> This percentage is increasing as staff respond to the conservativeness of the Circuit Court and State Appellate Court in interpreting ORS 426.

### Legal/Contractual Obligation

The ORS 426 requires that all persons placed on a notice of mental illness be investigated within 24 hours, as well as monitored upon commitment, as a protection of their civil rights; The state delegates the implementation of this statute to the counties.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$925,224	\$2,155,638	\$927,107	\$2,197,880
Contracts	\$200,000	\$1,698,071	\$205,000	\$4,082,451
Materials & Supplies	\$0	\$70,342	\$13,874	\$77,342
Internal Services	\$0	\$276,533	\$0	\$276,433
Total GF/non-GF:	<b>\$1,125,224</b>	<b>\$4,200,584</b>	<b>\$1,145,981</b>	<b>\$6,634,106</b>
Program Total:	<b>\$5,325,808</b>		<b>\$7,780,087</b>	
Program FTE	9.00	21.10	9.00	21.10
<b>Program Revenues</b>				
Intergovernmental	\$0	\$4,112,069	\$0	\$6,634,106
Other / Miscellaneous	\$0	\$88,515	\$0	\$0
Total Revenue:	<b>\$0</b>	<b>\$4,200,584</b>	<b>\$0</b>	<b>\$6,634,106</b>

### Explanation of Revenues

\$523,028 - State Mental Health Grant Non Residential: Based on FY12 grant award  
\$4,651,259 - State Mental Health Grant Regional Acute Inpatient Facility: Based on FY12 grant award  
\$1,459,819 - State Mental Health Grant Community Crisis Services: Based on FY12 grant award  
\$1,145,981 - County General Fund

### Significant Program Changes

Last year this program was: #25058, Mental Health Commitment Services



**Lead Agency:** County Human Services

**Program Contact:** David Hidalgo

**Program Offer Type:** Innovative/New Program

**Related Programs:**

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

### Executive Summary

This program offer would provide a portion of the funding necessary for a peer-run supported employment program. Additional funding will come from private foundations and in-kind donations. These peer-run employment and education programs typically secure funding from federal, state, and local governments including municipal mental health departments and the national Substance Abuse and Mental Health Services Administration (SAMSHA). Every dollar of county general fund would directly provide employment for a person with a mental illness.

### Program Description

This program offer would specifically support a peer-run supported employment center in three ways:

1. Fund positions and operating costs of a peer-run entity that will offer employment, wellness and administrative support
2. Quality assurance & training: ICCD Certification requires that the peer-run entity meet a defined standard of service delivery. Adherence to these standards requires regular training and management for staff.
3. Locating and securing adequate facility for peer-run employment center

Education is tightly linked with income and wealth, and less education is linked with poor health. Peer-run supported employment would provide encouragement and assistance for members in securing continuing education, and advocating for reasonable accommodations.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number of active members	0	0	75	100
Outcome	Percent of members in paid employment positions	0.0%	0.0%	8.0%	12.0%
Output	Average daily attendance (ADA)	0	0	10	15

### Performance Measure - Description

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2012	2012	2013	2013
Contracts	\$0	\$0	\$80,000	\$0
Total GF/non-GF:	\$0	\$0	\$80,000	\$0
Program Total:	\$0		\$80,000	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

County General Fund - \$80,000

Significant Program Changes

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** Neal Rotman

**Program Offer Type:** Existing Operating

**Related Programs:** 25061

**Program Characteristics:**

### Executive Summary

This program includes Mental Health Residential Services and Transitional Housing. Staff in Residential Services facilitates referral, screening and placement for individuals with a severe mental illness that require care in a 24-hour-a-day setting. Residential treatment programs include: Secure Residential Treatment Facilities (SRTFs), Residential Treatment Homes (RTHs), Adult Foster Care Homes and a range of semi-independent supported housing programs. Transitional Housing focuses on individuals who require assistance obtaining permanent housing while addressing their mental health needs. Transitional housing allows the individual a short-term stable housing opportunity to decrease the likelihood that they will need crisis and acute services until more permanent housing is obtained.

### Program Description

Residential services is comprised of two distinct, yet interconnected services:

**Residential Services** - Residential staff screen and place adults with severe and persistent mental illness in structured housing where licensed caregivers provide mental health and social services in 64 separate facilities/homes. Staff have received 352 referrals in FY11, with 44.9% placement rate. Staff monitor facilities for licensing and treatment requirements, provide training, technical assistance, and assist with development and siting of new facilities.

**Transitional Housing** - Royal Palm is a 50 bed transitional housing facility, providing 20 dormitory shelter beds and 30 units of Single Room Occupancy. This is low barrier housing for individuals with a mental illness who are homeless or at imminent risk of homelessness. The facility is staffed 24-hours-a-day and provides on-site case management and mental health treatment services. The Royal Palm housed 101 clients in FY11.

Residential Services and Transitional Housing link mental health treatment to stable, short and long term housing. Programs provide intervention and service coordination in the provision of housing and comprehensive community supports and services, as well as facilitate discharge of adults with mental illness to community residential programs from local acute care inpatient psychiatric facilities and the Oregon State Hospital, allowing consumers to increase their independence in the least restrictive level of care.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of new Residential Services referrals	367	380	352	350
Outcome	% of Residential Services referrals placed	39.8%	45.0%	44.9%	45.0%

### Performance Measure - Description

Measure 1 allows residential services to assess the percentage of referrals it is able to place and provides information related to the gap in number of beds needed relative to referrals received. Referrals go up and down in response to the number of new residential beds opened in a fiscal year, as well as discharges from the acute care and state hospitals.

**Legal/Contractual Obligation**

Residential Services: OAR 309-035-0100 through 309-035-0190, OAR 309-032-0450, Adult Foster Care Chapter 309, Division 040. Bridgeview Transitional Services: OAR 309-032-0525 Standards for Adult Mental Health Services.

**Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$468,275	\$296,710	\$474,903	\$374,920
Contracts	\$399,799	\$8,524,945	\$574,684	\$8,846,414
Materials & Supplies	\$16,224	\$29,000	\$16,224	\$29,000
Internal Services	\$61,448	\$11,264	\$61,448	\$14,543
Total GF/non-GF:	<b>\$945,746</b>	<b>\$8,861,919</b>	<b>\$1,127,259</b>	<b>\$9,264,877</b>
Program Total:	<b>\$9,807,665</b>		<b>\$10,392,136</b>	
Program FTE	4.50	4.10	4.50	4.10
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$1,760	\$0
Intergovernmental	\$0	\$8,861,919	\$0	\$9,226,273
Other / Miscellaneous	\$0	\$0	\$0	\$38,604
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$8,861,919</b>	<b>\$1,760</b>	<b>\$9,264,877</b>

**Explanation of Revenues**

\$313,151 - State Mental Health Grant Local Admin;  
 \$2,731,327 - State Mental Health Grant Non Residential;  
 \$2,559,036 - State Mental Health Grant Residential Treatment Services;  
 \$3,273,447 - State Mental Health Grant: All Based on FY12 grant award  
 \$76,312 - Oregon Health Plan Premium: Based on FY12 Rate per Client times number of clients as of 12/31/11  
 \$273,000 - City of Portland: Based on grant agreement  
 \$38,604 - State Mental Health Grant Beginning Working Capital: Based on 09-11 estimated settlement  
 \$1,127,259 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25060A, Mental Health Residential Services

**Lead Agency:** County Human Services

**Program Contact:** Len Lomash

**Program Offer Type:** Existing Operating

**Related Programs:** 25060A

**Program Characteristics:**

**Executive Summary**

The Adult Mental Health Initiative (AMHI): diverts individuals from Oregon State Hospital (OSH); coordinates successful discharge from OSH into appropriate community placements; coordinates care for individuals residing primarily in licensed residential facilities in order to move individuals into the least restrictive housing possible; and care coordinates and develops supports to maximize independent living.

**Program Description**

Mental Health and Addiction Services (MHASD) staff work with other MHASD units, OSH, Addictions and Mental Health (AMH), Mental Health Organizations (MHOs) and other counties to coordinate the placement and movement of individuals primarily within a statewide network of licensed housing providers. New or enhanced services offered by AMHI can include: supported housing development and rental assistance to increase housing options matched to client need; Exceptional Needs care coordination to assure access to appropriate housing placements and the development of supports to increase success in the community; referrals to Supported Employment and Assertive Community Treatment to help move clients towards greater independence; and transition planning management to assure the most efficient utilization of the licensed residential housing stock within the community.

The overarching goal of AMHI is assisting individuals to achieve the maximum level of independent functioning possible. This goal is achieved by diverting individuals from admission to OSH; supporting quick, safe and appropriate discharges from OSH into the community; and providing supports (skills training, etc.) to help individuals achieve as independent living as possible in the least restrictive housing environment. These three goals are quantified as Qualifying Events (QEs) in the Performance Measures.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number of Clients Served in AMHI	0	0	550	600
Outcome	Number of Qualifying Events	0	0	190	208

**Performance Measure - Description**

✔ Measure Changed

The previous measure only measured diversions, and discharges from OSH. The contractual measure of performance are total Qualifying Events, defined as total of OSH diversions, OSH discharges, and discharges to lower levels of residential care within the community (i.e., increase independent living).

**Legal/Contractual Obligation**

State of Oregon Mental Health Organization contract

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$0	\$517,486	\$0	\$1,049,551
Contracts	\$0	\$1,452,332	\$0	\$507,314
Materials & Supplies	\$0	\$0	\$0	\$961,343
Internal Services	\$0	\$100,811	\$0	\$126,634
Total GF/non-GF:	<b>\$0</b>	<b>\$2,070,629</b>	<b>\$0</b>	<b>\$2,644,842</b>
Program Total:	<b>\$2,070,629</b>		<b>\$2,644,842</b>	
Program FTE	0.00	5.70	0.00	10.98
<b>Program Revenues</b>				
Indirect for dep't Admin	\$25,547	\$0	\$25,333	\$0
Intergovernmental	\$0	\$1,098,943	\$0	\$2,600,263
Other / Miscellaneous	\$0	\$971,686	\$0	\$44,579
<b>Total Revenue:</b>	<b>\$25,547</b>	<b>\$2,070,629</b>	<b>\$25,333</b>	<b>\$2,644,842</b>

**Explanation of Revenues**

\$1,501,916 - State Mental Health Grant Special Projects: Based on FY12 grant award

\$44,579 - State Mental Health Grant Beginning Working Capital: Based on 09-11 estimated settlement

\$1,098,347 - Oregon Health Plan Premium: Based on FY12 Rate per Client times number of clients as of 12/31/11

**Significant Program Changes****Last year this program was:** #25060B, Adult MH Initiative: Residential

Moved 2.0 FTE-Mental Health Consultant & 0.73 FTE-Program Supervisor from Program Offer 25055-Behavioral Health Crisis Services; Increased 3.0 FTE-Mental Health Consultant & 1.0 FTE-Office Assistant 2 for a net increase 5.28 FTE. Last year was the initial start-up year for the program(actually a 10 month contract). Our Qualifying Event contract deliverable has more than doubled this year to 190 from 86. Increased staffing required to meet the higher program goals. Increased revenue is due to increase in State General Fund AMHI 37.

**Lead Agency:** County Human Services

**Program Contact:** Len Lomash

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

This program offer describes the existing continuum of adult mental health care funded by Oregon Health Plan and managed by Verity, the county's mental health organization. The continuum addresses the needs of adults at emergent (most acute), urgent and routine (least acute) levels of care. Psychiatric hospitalization treats persons at immediate risk to themselves or others. Respite services provide intervention when an individual's symptoms have risen beyond the scope of outpatient treatment. Outpatient treatment services provide a range of care matched to diagnosis and acuity to over 9,000 adults annually.

### Program Description

This service continuum contains three distinct service elements that contribute to a system of care for adults: psychiatric inpatient, respite and outpatient services. Psychiatric inpatient hospitalization is the most intensive level of care in the adult system. Hospital admission is carefully monitored to ensure that it is only offered where medically and clinically appropriate. Once admitted, individuals receive the full range of treatment services provided in a hospital setting. The Mental Health and Addiction Services Division (MHASD) Crisis Services works with the hospitals and providers to provide individuals a safety net of services as they transition into the community following discharge. The call center coordinated these services for 1,176 inpatient discharges in FY11.

Mental health respite services are a community-based approach to stabilize individuals whose symptoms have exceeded the scope of outpatient treatment. The goal is to prevent hospitalization through early intervention with short-term, intensive residential treatment. Respite care contains a range of treatment options, including medication management, clinical treatment and post-discharge transition planning. It has been defined as a best practice when used in a continuum of treatment services.

Adult mental health outpatient services provide a comprehensive array of treatment options that address the needs of each individual, including several categories of individual and group therapy, general and intensive case management for individuals with severe mental illness, intensive outreach and medication management. Outpatient services address long and short term mental health needs to lessen the need for more acute services. An average of 4,146 adults receive outpatient services each month, with many remaining in treatment for several months.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Total adults receiving outpatient mental health services <sup>1</sup>	9,576	8,977	9,789	9,789
Outcome	Percent of adults readmitted to inpatient within 30 days of discharge <sup>2</sup>	19.7%	17.4%	20.0%	20.0%

### Performance Measure - Description

<sup>1</sup> Number of unduplicated Verity adult enrollees who received an outpatient mental health service during the measurement period.

<sup>2</sup> Percent of unduplicated Verity adult enrollees who were readmitted to inpatient hospitalization within 30 days of discharge during the measurement period.

**Legal/Contractual Obligation**

State of Oregon Mental Health Organization (MHO) Contract, Statement of Work.

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$0	\$70,880	\$0	\$75,255
Contracts	\$284,000	\$19,525,000	\$0	\$17,609,506
Materials & Supplies	\$0	\$2,569	\$0	\$3,103
Internal Services	\$0	\$991,570	\$0	\$1,031,137
Total GF/non-GF:	<b>\$284,000</b>	<b>\$20,590,019</b>	<b>\$0</b>	<b>\$18,719,001</b>
Program Total:	<b>\$20,874,019</b>		<b>\$18,719,001</b>	
Program FTE	0.00	0.50	0.00	0.50
<b>Program Revenues</b>				
Indirect for dep't Admin	\$477,260	\$0	\$425,348	\$0
Intergovernmental	\$0	\$20,530,019	\$0	\$18,441,720
Other / Miscellaneous	\$0	\$60,000	\$0	\$277,281
<b>Total Revenue:</b>	<b>\$477,260</b>	<b>\$20,590,019</b>	<b>\$425,348</b>	<b>\$18,719,001</b>

**Explanation of Revenues**

\$277,281 - State Mental Health Grant Beginning Working Capital: Based on 09-11 estimated settlement

\$18,441,720 - Oregon Health Plan Premium: Based on FY12 Rate per Client times number of clients as of 12/31/11

**Significant Program Changes**

Last year this program was: #25062, Mental Health Services for Adults



**Lead Agency:** County Human Services

**Program Contact:** Joan Rice

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Multnomah Treatment Fund (MTF) prioritizes community-based services to individuals who experience symptoms of severe mental illness and have been released from jail or psychiatric hospitals and/or are at risk of hospitalization or significant decompensation, but are uninsured and ineligible for Oregon Health Plan (OHP). MTF addresses immediate health and safety concerns until insurance or OHP coverage is obtained. Due to a state funding reduction of \$260,000 in FY12, MTF will provide mental health services to approximately 617 adults, which is 114 fewer adults than in FY11.

### Program Description

These funds will support an array of services for the over 600 individuals who experience severe mental illness and are uninsured and without financial resources. The Mental Health and Addiction Services Division (MHASD) provides funds to the network of providers to treat consumers who are uninsured during periods of exacerbated symptoms in acute stages of illness.

The goal is to stabilize and prevent more drastic consequences including hospitalization, incarceration, addiction relapse, and loss of custody of children. If these services are effective, the client is spared a prolonged period of instability and the county preserves funds that would otherwise be lost to the high-cost alternatives such as hospitalization. Since these funds are limited, a designated adult system of care coordinator performs chart reviews for clinical necessity, choice of intervention, and financial eligibility. Services can include individual and group therapy, intensive case management, community outreach, housing assistance, medication management, dual diagnosis treatment, care coordination, and crisis intervention.

While the person is receiving services, he/she can be linked to other supports and acquire assistance in securing OHP benefits through the DCHS Benefits Recovery Project and health care through the Multnomah County Health Department or other clinics serving indigent clients.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Total # of adults who received county funded outpatient services or medication <sup>1</sup>	739	928	731	617
Outcome	Average emergency hold hospitalizations per uninsured adult served <sup>2</sup>	2	1	2	2

### Performance Measure - Description

<sup>1</sup> Unduplicated uninsured adults who received at least one county funded outpatient mental health service or at least one county funded medication during the measurement period.

<sup>2</sup> Total number of emergency holds for uninsured adults divided by the number of unduplicated uninsured adults identified in item #1 (above).

\*The number of uninsured adults has been dropping with the increase of Oregon Health Plan enrollees. This number can change depending on OHP's ability to enroll additional enrollee's.

## Legal/Contractual Obligation

Multnomah Treatment Fund was initiated by the Board of County Commissioners.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Contracts	\$1,351,826	\$316,150	\$1,343,582	\$53,190
Total GF/non-GF:	<b>\$1,351,826</b>	<b>\$316,150</b>	<b>\$1,343,582</b>	<b>\$53,190</b>
Program Total:	<b>\$1,667,976</b>		<b>\$1,396,772</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$260,000	\$0	\$27,400
Other / Miscellaneous	\$0	\$56,150	\$0	\$25,790
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$316,150</b>	<b>\$0</b>	<b>\$53,190</b>

## Explanation of Revenues

\$25,790 - State Mental Health Grant Beginning Working Capital: Based on 09-11 estimated settlement  
\$27,400- State Mental Health Grant Non-Residential Services: Based on FY12 grant award  
\$1,343,582 - County General Fund

## Significant Program Changes

Last year this program was: #25063, Mental Health Treatment & Medications for the Uninsured

**Lead Agency:** County Human Services

**Program Contact:** Ebony Clarke

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Early Assessment and Support Alliance (EASA) is an early psychosis intervention program addressing the needs of young persons aged 15-25 who demonstrate initial symptoms of psychosis, with the goal of managing long-term problems and consequences. EASA offers formal psychiatric treatment services as well as vocational and educational support, and involves the young person's family in treatment. The program will provide services for approximately 82 clients, an increase of 6.5% from the previous year.

### Program Description

The EASA team identifies young people experiencing the first episodes of psychosis and offers them a broad array of individualized treatment avenues and community-based care. Services include assessment, treatment planning, case management, medication management, psycho-educational workshops, multi-family groups, occupational assessments and interventions, and assistance with accessing supported employment and educational opportunities. These services are provided by a multidisciplinary team that includes a psychiatrist, a nurse, a vocational and occupational therapist and mental health consultants. The team's composition and activities are designed to meet the standards of a defined evidenced based practice model as required by the state. Research suggests that the median age for the onset of initial episodes of psychosis is under the age of 25. Research also suggests that early intervention and immediate access to treatment can directly reduce hospitalization rates and the incidence of psychosis' long-term disabling consequences.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Total individuals enrolled in program receiving ongoing services	77	77	82	82
Outcome	% reduction in hospitalization rate 3 months pre and 6 months post enrollment <sup>1</sup>	82.0%	85.0%	90.0%	87.0%

### Performance Measure - Description

<sup>1</sup> This measure compares the hospitalization rate for the 3 months prior to services with the rate for the 6 months post EASA service enrollment which is an indication of the stabilization of the individual.

**Legal/Contractual Obligation**

State Mental Health Grant County Financial Assistance Agreement

**Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$0	\$684,741	\$0	\$704,752
Contracts	\$0	\$305,960	\$0	\$315,960
Materials & Supplies	\$0	\$26,416	\$0	\$26,416
Internal Services	\$0	\$82,475	\$0	\$83,475
Total GF/non-GF:	<b>\$0</b>	<b>\$1,099,592</b>	<b>\$0</b>	<b>\$1,130,603</b>
Program Total:	<b>\$1,099,592</b>		<b>\$1,130,603</b>	
Program FTE	0.00	7.20	0.00	7.20
<b>Program Revenues</b>				
Indirect for dep't Admin	\$1,220	\$0	\$1,220	\$0
Intergovernmental	\$0	\$810,770	\$0	\$834,319
Other / Miscellaneous	\$0	\$288,822	\$0	\$296,284
<b>Total Revenue:</b>	<b>\$1,220</b>	<b>\$1,099,592</b>	<b>\$1,220</b>	<b>\$1,130,603</b>

**Explanation of Revenues**

\$834,319 - State Mental Health Grant Non-Residential Youth and Young Adult Services: Based on FY12 grant award  
 \$296,284 - State Mental Health Grant Beginning Working Capital: Based on 09-11 estimated settlement

**Significant Program Changes**

Last year this program was: #25064A, Early Assessment and Support Alliance

**Lead Agency:** County Human Services

**Program Contact:** David Hidalgo

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

This program offer co-funds 1 FTE with the City of Portland to perform mental health assessments of individuals receiving domestic violence-related services in Multnomah County, including at domestic violence shelters and the Gateway Center for Domestic Violence Services.

### Program Description

Through this City/County partnership, individuals who are receiving domestic violence-related services in Multnomah County receive on-site mental health assessments, including the four domestic violence shelters and the Gateway Center for Domestic Violence Services. The clinician who serves as a liaison between domestic violence and mental health and addiction providers, travels to each of the shelters on a regular basis and spends approximately two-thirds of the time at the Gateway Center. The clinician attends the appropriate domestic violence community meetings and events (such as the monthly Family Violence Coordinating Council meetings) and provides training to facilitate increased knowledge and understanding between the mental health and domestic violence providers. The clinician also carries a small caseload of uninsured consumers and provides evidence-based group services such as Seeking Safety and a domestic violence process group that supplements what is offered within the domestic violence agency settings.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number of unique clients served annually	0	250	250	250
Outcome	Percentage of clients reporting they are better able to make informed decisions	0.0%	95.0%	97.0%	95.0%

### Performance Measure - Description

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Contracts	\$0	\$0	\$0	\$67,000
Materials & Supplies	\$32,000	\$0	\$0	\$0
Total GF/non-GF:	<b>\$32,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$67,000</b>
Program Total:	<b>\$32,000</b>		<b>\$67,000</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$0	\$0	\$33,500
Other / Miscellaneous	\$0	\$0	\$0	\$33,500
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$67,000</b>

**Explanation of Revenues**

\$33,500 - State Mental Health Grant Beginning Working Capital: Based on 09-11 estimated settlement  
 \$33,500 - City of Portland General Fund

**Significant Program Changes**

**Last year this program was:** #25065, Victims and Survivors of Domestic Violence

Last year this program was an innovative new program offer. This year we are requesting continuation of the co-funded clinician with the City of Portland as an existing operating in target program offer.

**Lead Agency:** County Human Services

**Program Contact:** David Hidalgo

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The county's managed mental health organization, Verity, is required to pay a 1% provider tax to the state to leverage additional federal funds for the Oregon Health Plan. The additional funds received by the state are then redistributed through the Oregon Health Plan reimbursement.

### Program Description

The Oregon State Legislature approved a tax on managed care plans to support benefits for Oregon Health Plan Standard enrollees. The dollars raised by the tax on managed care plans are eligible to be matched by federal Medicaid funds. The federal government will match every dollar the State raises with \$1.50. This additional money is used by the state to fund Oregon Health Plan benefits so that individuals at a higher percentage of the federal poverty level can receive health care, including mental health care.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	N/A	0	0	0	0
Outcome	N/A	0	0	0	0

### Performance Measure - Description

### Legal/Contractual Obligation

Provider Tax is a requirement of participation in Oregon Health Plan as a Mental Health Organization under contract with the State of Oregon.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Contracts	\$0	\$465,000	\$0	\$427,728
Total GF/non-GF:	<b>\$0</b>	<b>\$465,000</b>	<b>\$0</b>	<b>\$427,728</b>
Program Total:	<b>\$465,000</b>		<b>\$427,728</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$465,000	\$0	\$427,728
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$465,000</b>	<b>\$0</b>	<b>\$427,728</b>

### Explanation of Revenues

\$427,728 - Oregon Health Plan Premium: Based on FY12 Rate per Client times number of clients as of 12/31/11

### Significant Program Changes

Last year this program was: #25066, Mental Health Organization Provider Tax



**Lead Agency:** County Human Services

**Program Contact:** Ebony Clarke

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

This mental health service array serves children and youth up to age 21. Services range from prevention/early intervention in the Early Childhood and Head Start program that serves 5,327 children annually, to a comprehensive outpatient service system that successfully maintains children in their homes, schools, and community.

### Program Description

This array provides a continuum of services for over 11,000 children by combining Early Childhood and Head Start Mental Health Services, Child Abuse Mental Health Services provided at CARES NW, Children's Mental Health Outpatient Services (Verity), and Intensive In-Home and Community Mental Health Services for Children.

Services include evidence-based counseling for at risk children and their families, Incredible Years parent groups, early childhood classroom consultation, psychiatric day treatment, crisis respite, individual and group therapy, skill building and medication management. Care is coordinated with allied agencies such as Child Welfare, MESD and schools, Head Start programs, Developmental Disabilities, the juvenile justice system, Multnomah Wraparound, and physical healthcare providers, to ensure the best outcomes for children and youth.

Services offered are culturally competent and promote the development of healthy attachments and positive parenting practices so that needs are addressed before they become acute. The goal of every program in this array is to promote educational success and to keep vulnerable children in home settings with their families, permanent foster care families or other long term caregivers. Special effort is taken to guarantee families are provided opportunities for planning and choosing their care.

The prevention and early intervention services provided by the Early Childhood and Head Start Program addresses child and family needs before they become more acute. The Child Abuse Mental Health program (CARES NW), reduces trauma of vulnerable children and their families which in turn reduces their risk of developing long term health and mental health problems. Outpatient Services deliver a family-centered model that leads to long-term stability for children and parents. Intensive mental health treatment intervenes in crisis situations to keep children at home, in school, and out of trouble.

This service array is in keeping with the goals of both the Early Childhood and School Aged Policy Frameworks as they relate to strengthening families and promoting educational success for children with mental illness.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Total children receiving outpatient services <sup>1</sup>	4,514	5,103	4,423	4,423
Outcome	Percent children with improved behavior in school <sup>2</sup>	79.1%	80.0%	80.0%	80.0%

### Performance Measure - Description

<sup>1</sup> This measure is the number of unduplicated children and youth ages 0 - 20 with at least one reported mental health treatment encounter in any outpatient service. Verity and Multnomah Treatment Fund (MTF) claims data.

<sup>2</sup> Percentage of children with improved behavior in school as reported in state mental health CPMS closed case data.

## Legal/Contractual Obligation

Community Mental Health Program obligations ORS 430.630

State of Oregon, Mental Health Organization contract Statement of Work

Oregon Administrative Rule 309-032-1240 to 309-032-1305, 309-014-0020, 309-014-0025, 309-014-0030, 309-014-0035.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$1,114,131	\$900,205	\$1,254,392	\$719,978
Contracts	\$135,164	\$10,328,189	\$138,543	\$9,167,358
Materials & Supplies	\$43,458	\$9,169	\$41,198	\$10,508
Internal Services	\$248,254	\$539,003	\$243,014	\$452,154
Total GF/non-GF:	<b>\$1,541,007</b>	<b>\$11,776,566</b>	<b>\$1,677,147</b>	<b>\$10,349,998</b>
Program Total:	<b>\$13,317,573</b>		<b>\$12,027,145</b>	
Program FTE	11.30	6.75	11.80	6.55
<b>Program Revenues</b>				
Indirect for dep't Admin	\$247,253	\$0	\$223,161	\$0
Intergovernmental	\$0	\$11,776,566	\$106,788	\$10,349,998
<b>Total Revenue:</b>	<b>\$247,253</b>	<b>\$11,776,566</b>	<b>\$329,949</b>	<b>\$10,349,998</b>

## Explanation of Revenues

\$315,882 - State Mental Health Grant Child/Adolescent Mental Health Services: Based on FY12 grant award

\$152,280 - Title XIX-OMAP payments: Based on FY12 revised budget

\$58,238 - FFS Service Receipts: Based on FY12 revised budget

\$148,092 - Head Start Contracts: Based on FY12 grant award

\$9,675,506 - Oregon Health Plan Premium: Based on FY12 Rate per Client times number of clients as of 12/31/11

\$106,788 - FQHC County General Fund

\$1,570,359 - County General Fund

## Significant Program Changes

**Last year this program was:** #25067, Community Based Mental Health Services for Children and Families

**Lead Agency:** County Human Services

**Program Contact:** Ebony Clarke

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Multnomah Wraparound is made up of the Care Management Organization (CMO) and the Administrative Service Organization (ASO). The CMO has oversight of intake, screening and eligibility determination for children/youth in need of the most intensive mental health services, wraparound facilitation and care coordination. The CMO is a combination of funding from partnering entities such as child welfare, MESD, school districts, juvenile justice and mental health. The primary goal of the ASO is to maximize available resources for approximately 100 children, youth, and families served by multiple systems.

### Program Description

The Administrative Services Organization (ASO) addresses system issues by identifying trends and establishing success indicators. It builds partnerships to facilitate planning, decision making and oversight. It supports family and youth involvement as primary decision makers in the development, implementation and modification of the system of care for children and families. The ASO coordinates and sustains funding, ensures quality assurance and utilization management, access to information technology systems, and evaluates effectiveness. Pooling resources to serve clients involved in more than one system reduces duplication and fragmentation of services. It also reduces cost shifting.

The ASO also implements a governance structure to oversee the full implementation of the respective systems responsibilities as outlined in an intergovernmental agreement. The ASO will ensure that the policies and procedures are culturally competent and that services provided are compatible with the families' cultural beliefs, practices, literacy skills and language.

The CMO intake screens at least 325 children per year for intensive service array level care, provides wraparound team facilitation and care coordination for up to 129 children/youth with severe mental health needs who are involved in at least two other systems. This includes forming and facilitating Child and Family Teams to develop a single plan of care with blended resources. The plan of care is family-guided, culturally competent, multidisciplinary and includes natural supports to help children stay with family, in the community, in school and out of trouble. The CMO is also responsible for assurance that appropriate authorizations are in place and managing flexible fund expenditures. Service effectiveness is monitored through data collection and outcome measurement.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number of unduplicated children served through wraparound	138	100	138	138
Outcome	% of children who are meeting their goals on wraparound service plan <sup>1</sup>	92.0%	85.0%	90.0%	90.0%
Output	% of children completing the survey for at least nine months of the year <sup>2</sup>	0.0%	75.0%	75.0%	75.0%
Output	Number of unique children screened for Integrated Service Array eligibility <sup>3</sup>	0	0	0	300

### Performance Measure - Description

 **Measure Changed**

<sup>1</sup> Program Offers offers #25068 and #25069 have been combined. Outcome measure % of care givers that have social networks to help raise the child has been discontinued and current outcome measure will remain, as this is a better reflection of the % of children meeting overall goals, including social networks. Data for the outcome measure is taken from question 7 on the monthly Child and Family Team survey form (form mentioned in the output measure). Outcome measure data will be collected on a monthly basis during FY12 at Wraparound Child and Family team meetings.

<sup>2</sup> The survey questions correspond with National Wraparound measure outcomes related to staying in school, at home and out of trouble.

<sup>3</sup> New Measure.

**Legal/Contractual Obligation**

Mental Health Organization contract

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2012	2012	2013	2013
<b>Program Expenses</b>				
Personnel	\$0	\$1,242,181	\$0	\$1,193,895
Contracts	\$0	\$306,347	\$0	\$220,347
Materials & Supplies	\$0	\$299,589	\$0	\$194,361
Internal Services	\$0	\$151,782	\$0	\$161,690
Total GF/non-GF:	<b>\$0</b>	<b>\$1,999,899</b>	<b>\$0</b>	<b>\$1,770,293</b>
Program Total:	<b>\$1,999,899</b>		<b>\$1,770,293</b>	
Program FTE	0.00	13.25	0.00	13.20
<b>Program Revenues</b>				
Indirect for dep't Admin	\$35,918	\$0	\$34,375	\$0
Intergovernmental	\$0	\$1,913,899	\$0	\$1,757,792
Other / Miscellaneous	\$0	\$86,000	\$0	\$12,501
<b>Total Revenue:</b>	<b>\$35,918</b>	<b>\$1,999,899</b>	<b>\$34,375</b>	<b>\$1,770,293</b>

**Explanation of Revenues**

\$1,490,359 - OHP Premium: Based on FY12 Rate per client times number of clients as of 12/31/11

\$106,788 - State Mental Health Grant Child/Adolescent MH Svcs: Based on FY12 grant award

\$11,793 - State Mental Health Grant Beginning Working Capital: Based on 09-11 estimated settlement

\$161,353 - Wraparound ASO school funding based on FY12 levels

**Significant Program Changes****Last year this program was:** #25068, Children's Mental Health Wraparound

The CMO had its own program offer (#25069) in FY2012, but these 2 offers have been combined this year into this offer (#25068).

**Lead Agency:** County Human Services

**Program Contact:** Ebony Clarke

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

School Based Mental Health is an essential component of the mental health system of care for children and families. This program serves 1,150 children and teens with serious mental health disorders in over 89 school settings throughout the county. Mental health professionals provide culturally competent, family-focused, evidence-based treatment. Children and teens receive service that decreases the risk of hospitalization or other restrictive and costly services. Additional children with emotional and behavioral needs are helped through 11,003 consultation contacts with school based health center staff and others that avert the need for higher level of care. Sustainability efforts have been focused on improving the program's Oregon Health Plan billing reimbursement, which increased 24% in the last year.

### Program Description

Mental health treatment is provided in schools to decrease barriers such as stigma, cost and transportation for 1,150 underserved families. This program reaches youth who have not accessed services in a mental health center and 52% of those served were children of color. Approximately 93% of the children served were uninsured or insured by the Oregon Health Plan.

School based mental health consultants provide crisis intervention, mental health assessment, individual, group and family treatment and clinical case management as well as interventions with schools to help manage a child's mental health disorder. Consultation on children's mental health is provided to school and school based health clinic staff, as well as community providers. Mental health consultants are co-located in School Based Health Clinics when possible to provide integrated services. About 57% of the families receive linkage services for mental health screenings and referral to community mental health centers.

Locating mental health services in schools is a best practice and Multnomah County has been a leader in the nation by providing this program since 1967. Through this program children and teens who are at risk of harming themselves or others are identified and receive intervention. This is important because, in Oregon, suicide is the second leading cause of death among young people. Earlier identification and treatment can divert children from needing higher cost and more restrictive services. This program meets a child's basic need for mental health and is congruent with the goals of the School Age Policy Framework.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Total unduplicated children receiving mental health services.	1,150	1,050	1,100	1,150
Outcome	% of children receiving services showing improved school behavior & attendance*	93.0%	86.0%	90.0%	86.0%

### Performance Measure - Description

\*Improvements in school behavior and attendance are measures that reflect a child's overall success at home, in school and in the community.

### Legal/Contractual Obligation

Longstanding revenue contracts with Parkrose School District for \$10,000 and with Centennial School District for \$75,000 continued for this school year. A new revenue contract with Portland Public School District was initiated for \$26,497 to fund .5FTE Mental Health Consultant at Roosevelt High School from 9-1-10 through 6-30-11. This contract will continue into FY13-04 due to a three year state school improvement grant that Roosevelt High received in FY11.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$440,734	\$991,724	\$573,237	\$880,058
Materials & Supplies	\$14,556	\$29,667	\$18,056	\$29,182
Internal Services	\$79,630	\$36,569	\$114,356	\$2,666
Total GF/non-GF:	<b>\$534,920</b>	<b>\$1,057,960</b>	<b>\$705,649</b>	<b>\$911,906</b>
Program Total:	<b>\$1,592,880</b>		<b>\$1,617,555</b>	
Program FTE	4.12	9.72	5.12	8.73
<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,057,960	\$152,212	\$911,906
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,057,960</b>	<b>\$152,212</b>	<b>\$911,906</b>

### Explanation of Revenues

\$628,575 - State Mental Health Grant Child/Adolescent MH Services: Based on FY12 grant award  
\$10,000 - Parkrose School District; \$75,000 - Centennial School District; \$26,497 - Roosevelt High School: Based on FY12 revised budget  
\$171,834 - Fee for Service Insurance Receipts: Based on current year projections  
\$152,212 - FQHC: Based on FY12 revised budget  
\$553,437 - County General Fund

### Significant Program Changes

Last year this program was: #25075, School Based Mental Health Services

**Lead Agency:** County Human Services

**Program Contact:** Joan Rice

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Culturally specific outpatient mental health services provide treatment for five underserved communities in our county (Asian-American, African-American, Eastern European, Latino and Native-American). These communities have encountered difficulty finding mental health treatment that incorporates their culture, tradition and language. These services provide culturally and linguistically relevant care for these populations. Some communities of color are also overrepresented in the criminal justice system. Approximately 750 individuals receive services.

### Program Description

The system of care built and maintained by Multnomah County must reflect the demographics of those we serve. To ensure that all members of our community have treatment options that incorporate specific cultural needs, DCHS contracts for mental health services for individuals from five communities currently underserved or insufficiently served. Those communities are: Eastern European, African-American, Asian-American, Latino, and Native American.

Multnomah County Mental Health prevalence data suggests that members of the African-American and Native American communities are more likely than other populations to suffer from severe mental illnesses that require a more intensive level of care. African-Americans are four times more likely to be involuntarily placed in a hospital setting than members of other cultural groups. African-Americans are also overrepresented in jail and the criminal justice system.

The culturally specific services address mental health problems through early access to culturally and linguistically appropriate treatment. Early intervention can mitigate the need for expensive hospital, residential care, or crisis services. Treatment also reduces the risk of inappropriate incarceration or homelessness.

These mental health providers understand community cultural norms and have a relationship of trust with the communities they serve. These providers offer a wide variety of mental health services in a supportive and culturally appropriate setting.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Total culturally diverse individuals receiving services <sup>1</sup>	751	400	795	750
Outcome	Culturally specific persons served per 1000 culturally diverse in population <sup>2</sup>	4	2	4	4

### Performance Measure - Description

<sup>1</sup> This total includes all persons served under this contract and does not include those culturally diverse persons served by Verity or in other programs.

<sup>2</sup> Service Rate Per 1000 Calculation- Numerator: Total unduplicated culturally diverse individuals served. Denominator: Total county census for similar groups taken from the American Community Survey estimates for 2009.

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2012	2012	2013	2013
Contracts	\$1,292,239	\$0	\$1,324,545	\$0
Total GF/non-GF:	\$1,292,239	\$0	\$1,324,545	\$0
Program Total:	\$1,292,239		\$1,324,545	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

\$1,324,545 - County General Fund

Significant Program Changes

Last year this program was: #25078, Culturally Specific Mental Health Services



**Lead Agency:** County Human Services

**Program Contact:** Neal Rotman

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The adult treatment continuum consists of: outpatient addictions treatment including various counseling options, medication management and relapse prevention; residential treatment, (intensive addictions services in a 24-hour setting); community recovery (aftercare services for clients learning to live sober); and a specialized program for persons who are severely addicted, multi-diagnosed, and homeless. The continuum will serve approximately 3,500 clients next year. Research shows that every dollar invested in addiction treatment yields a cost offset of up to \$10 in other publicly-supported services.

### Program Description

The Oregon Health Authority estimates 300,000 Oregonians have a diagnosable substance use disorder, roughly 18% of those needing addiction services access treatment, and more than 40% of those who try to get help experience barriers related to cost or lack of insurance. The overall goal of addiction treatment is to have as many clients as possible successfully complete treatment and maintain sobriety. Oregon's successful completion rate is 55%, higher than the national rate of 45%. Our adult treatment continuum supports recovery and a return to a healthy lifestyle by offering access to addictions treatment that addresses the negative consequences of alcohol and other drugs. Community recovery support programs provide a variety of sober social support activities for clients and their families.

Services are delivered throughout Multnomah County by a network of state licensed providers. These providers are culturally competent and many have bilingual staff. Outpatient treatment allows a client to work, go to school, attend job training, socialize, and otherwise carry on a normal life. The system treats about 5,000 outpatient clients annually.

Residential treatment provides intensive services in a 24/7 setting with clients living in the treatment center during their course of treatment, usually for two to six months. Clients needing this level of care often have multiple failures in outpatient treatment, often related to the severity and length of their addiction, as well as risk factors like chronic unemployment and housing problems. Residential treatment serves about 500 clients annually.

Treatment helps clients shift from ambivalence and denial about their addiction to acceptance and incentive to change. Clients address issues that are barriers to recovery, and develop strategies and skills to overcome them. Providers also address the self sufficiency needs of each client through help with: parenting skills; stress and anger management; housing issues; independent living skills; referrals for physical and mental health issues; linkages to employment services; and recreation and healthy use of leisure time.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number served in treatment (all levels) <sup>1</sup>	3,606	5,200	3,519	3,500
Outcome	Percentage of clients who successfully complete treatment (Outpatient) <sup>2</sup>	44.6%	58.0%	20.7%	58.0%

### Performance Measure - Description

<sup>1</sup> The continued reduction in the number of adults served in this program offer reflects the successful Federal and State transformation of healthcare benefits for adults into other insurance systems.

<sup>2</sup> A significant number of client records in our data system are not coded with completion information. This could be artificially lowering the successful outcome percentage. We are beginning an audit process in FY 12-13 to close records for clients who have successfully completed treatment and expect the outcome percentage will increase.

## Legal/Contractual Obligation

Because Multnomah County accepts the State Mental Health Grant, we are obligated to spend funds in accordance with regulations regarding State Service Elements (i.e. Service Element A-D 61 is Adult Alcohol & Drug Residential Treatment Services and Service Element A-D 66 is Continuum of Care Services). Also, Local 2145 Beer and Wine tax revenues are provided to counties on a dedicated formula basis and are restricted to alcohol and drug services.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$280,485	\$429,808	\$276,476	\$584,547
Contracts	\$2,484,047	\$8,037,682	\$2,440,421	\$8,013,766
Materials & Supplies	\$16,213	\$840	\$17,907	\$840
Internal Services	\$51,512	\$8,449	\$51,536	\$8,425
Total GF/non-GF:	<b>\$2,832,257</b>	<b>\$8,476,779</b>	<b>\$2,786,340</b>	<b>\$8,607,578</b>
Program Total:	<b>\$11,309,036</b>		<b>\$11,393,918</b>	
Program FTE	2.50	5.20	2.70	5.99
<b>Program Revenues</b>				
Intergovernmental	\$0	\$8,476,779	\$0	\$8,607,578
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$8,476,779</b>	<b>\$0</b>	<b>\$8,607,578</b>

## Explanation of Revenues

\$333,992 - State Mental Health Grant Local Admin: Based on FY12 award  
\$154,079 - State Mental Health Grant Special Projects: Based on FY12 award  
\$4,493,881 - State Mental Health Grant A&D Adult Residential: Based on FY12 award.  
\$1,051,200 State Mental Health Grant A&D Adult Res. Capacity: Based on FY12 award.  
\$301,563 State Mental Health Grant A&D Dependent Child Res.: Based on FY12 award.  
\$105,741 State Mental Health Grant A&D Prevention: Based on FY12 award  
\$2,010,739 State Mental Health Grant A&D Continuum of Care: Based on FY12 award.  
\$156,383 Local 2145 Beer and Wine Tax Revenues: Based on FY12 award.  
\$2,786,340 County General Fund

## Significant Program Changes

**Last year this program was:** #25080, Adult Addictions Treatment Continuum  
Increased 1.0 FTE-Program Specialist.

**Lead Agency:** County Human Services

**Program Contact:** John Pearson

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Gambling addiction treatment uses evidence-based practices in an outpatient setting to provide treatment to persons diagnosed with problem or pathological gambling. Based on 2010-2011 data the county's community-based providers treated approximately 309 gamblers and their family members. Countywide data shows that problem gamblers and family members seeking treatment can access services in less than five days 99% of the time.

### Program Description

Multnomah County's Problem Gambling Services are guided by a public health approach that takes into consideration biological, behavioral, economic, cultural, and policy factors influencing gambling and health. Gambling treatment and prevention services incorporate prevention, harm reduction and multiple levels of treatment by placing emphasis on quality of life issues, for the person who gambles, family members, and communities. Based on community norms (3% of problem gamblers seek treatment) 436 adults can be expected to access treatment each year in Multnomah County. In 2010-2011 234 gamblers enrolled in treatment. As noted, family participation is important and approximately 47 family members enrolled in treatment as well.

Multnomah County has one of the highest rate per capita (18 years and older) of lottery sales statewide. Approximately 74% of the gambling treatment clients report video poker as their primary gambling activity. Problem gambling treatment services are closely aligned to the county's Basic Living Needs priority by promoting healthy behaviors. The treatment focus is on relieving initial client stress and crisis, supporting the client and family members in treatment, and assisting the family to return to a level of healthy functioning. Problem gambling treatment assists the gambler and family in managing money/finances, rebuilding trust within the family, learning gambling prevention techniques, and maintaining recovery.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Gamblers and family members accessing treatment annually <sup>1</sup>	281	356	309	309
Outcome	Gambler successful completion rate <sup>2</sup>	36.2%	63.0%	36.0%	36.0%

### Performance Measure - Description

<sup>1</sup>'Gamblers and family members accessing treatment annually' means the number of problem and/or pathological gamblers completing enrollment and entering treatment annually.

<sup>2</sup> 'Successful completion rate' is defined as the gambling client having completed a minimum of 75% of the short-term treatment goals, completion of a continued wellness plan, and lack of engagement in problem gambling behaviors for at least 30 days prior to discharge.

The source of this performance data is the State's Gambling Performance Monitoring System (GPMS). Data is provided to all counties throughout Oregon by the GPMS system. For FY 10/11 the statewide completion rate was 46.2%. The FY 11/12 purchased completion rate of 63% was inaccurately projected based on previous year's performance.

### Legal/Contractual Obligation

Because Multnomah County accepts the State Mental Health Grant, we are obligated to spend funds in accordance with regulations regarding State Service Elements (i.e. Service Element A D 80 is Problem Gambling Prevention Services and Service Element A-D 81 is Outpatient Problem Gambling Treatment Services).

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$0	\$34,653	\$0	\$36,000
Contracts	\$0	\$318,889	\$0	\$680,000
Internal Services	\$0	\$1,995	\$0	\$1,995
Total GF/non-GF:	<b>\$0</b>	<b>\$355,537</b>	<b>\$0</b>	<b>\$717,995</b>
Program Total:	<b>\$355,537</b>		<b>\$717,995</b>	
Program FTE	0.00	0.30	0.00	0.31
<b>Program Revenues</b>				
Intergovernmental	\$0	\$355,537	\$0	\$717,995
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$355,537</b>	<b>\$0</b>	<b>\$717,995</b>

### Explanation of Revenues

\$37,995 State Mental Health Grant Gambling Local Admin: Based on FY12 award.  
\$60,000 State Mental Health Grant Gambling Prevention: Based on FY12 award.  
\$620,000 State Mental Health Grant Gambling Treatment: Based on FY 12 award.

### Significant Program Changes

Last year this program was: #25085, Addiction Services Gambling Treatment and Prevention

**Lead Agency:** County Human Services

**Program Contact:** David Hidalgo

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The alcohol and drug prevention program provides an array of prevention services for children and families at high risk for substance abuse, school failure and juvenile justice problems. Prevention services include structured after-school activities (homework assistance, tutoring and home visits), individualized support for youth, and a family engagement/education program. These programs promote school success, family bonding, improved parenting skills and youth life skills. The aim is to reduce youth substance abuse, school failure and juvenile crime. The program is primarily focused on serving youth living in public housing, and is projected to provide over 1,500 prevention service contacts to over 200 participants. In addition, a new state grant-funded initiative is addressing alcohol abuse and dependence among young adults through environmental prevention strategies, e.g., changes in community policies, laws and norms.

### Program Description

The structured after-school program for public housing residents is a long-standing collaboration with Home Forward (formerly the Housing Authority of Portland--HAP), providing afternoon and evening services offering on-site homework help, socializing and skill building activities to 200 youth whose families live in public housing. The structured services at Home Forward housing sites also include tutoring, mentoring and family-support home visits, primarily serving youth between the ages of 4 to 17.

By directly addressing community risk factors, prevention reduces multiple problem behaviors and improves outcomes for children and families. The Multnomah County prevention program builds partnerships with collaborative community partners and local prevention coalitions, using natural helpers, volunteer organizations, professionals and cultural mentors to promote developmental assets and academic achievement.

As one of 12 counties to receive an Oregon Strategic Prevention Framework State Incentive Grant (SPF-SIG), Multnomah County is starting a new collaborative effort to address the issue of high risk drinking among young adults between the ages of 18 and 25. High risk drinking is defined as binge drinking, heavy drinking and underage drinking by the young adult target group. This project is in its initial stages of conducting a community needs assessment and developing an advisory council/coalition to oversee strategic planning and implementation of environmental strategies addressing community change in the remaining 2 ½ years of the grant.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Youth served at public housing sites <sup>1</sup>	435	200	250	200
Outcome	Core group <sup>2</sup> youth w/ improved behavior	83.0%	75.0%	75.0%	75.0%
Outcome	Core group youth w/ improved academic achievement	73.0%	75.0%	75.0%	75.0%

### Performance Measure - Description

<sup>1</sup> Public Housing measures are for the entire collaborative after-school program serving youth in public housing, including all after-school activities.

<sup>2</sup> Intensive core group services will be provided to 30 families with youth exhibiting behavioral and academic risk factors, based on youth self-reports, parent feedback and teacher observation. Outcomes of improved behavior (e.g., less disruptive, better attendance, fewer suspensions) and improved academic achievement are good predictors of reduced future substance abuse.

## Legal/Contractual Obligation

Contractual obligation: This program is funded with federal substance abuse prevention resources and state general funds through the State Oregon Health Authority (OHA) Addictions and Mental Health Division (AMH) contract. Program planning is developed based on AMH requirements and submitted in the "Biennial Implementation Plan" in conformance with the local Community Comprehensive Plan (SB555) and any other State Mental Health Grant Award requirements. Because Multnomah County accepts the State Mental Health grant, we are obligated to spend funds in accordance with regulations regarding State Service Elements A-D 70, Prevention Services, and A-D 60, Strategic Prevention Framework (SPF).

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Contracts	\$0	\$194,259	\$0	\$301,952
Total GF/non-GF:	<b>\$0</b>	<b>\$194,259</b>	<b>\$0</b>	<b>\$301,952</b>
Program Total:	<b>\$194,259</b>		<b>\$301,952</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$194,259	\$0	\$301,952
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$194,259</b>	<b>\$0</b>	<b>\$301,952</b>

## Explanation of Revenues

\$209,259 State Mental Health Grant A&D Prevention: Based on FY12 award.

\$92,693 State Mental Health Grant A&D Special Projects: Based on FY12 award.

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #25086, Addiction Services Alcohol and Drug Prevention

As a recipient of an Oregon Strategic Prevention Framework State Incentive Grant (SPF SIG), the Multnomah County addictions prevention program will address an important transitional age group, young adults, in addition to current prevention efforts to children, youth and families.

Oregon's chosen priority is high-risk drinking among 18 to 25 year olds, ultimately leading to the reduction of alcohol abuse and dependence. Indicators contributing to high risk drinking are:

- Binge drinking. (Males: 5 or more drinks on any one occasion, or within a couple of hours. Females: 4 or more drinks on any one occasion.)
- Heavy drinking. (Males that exceed 2 drinks per day or females that exceed 1 per day.)
- Underage drinking. Any use of alcohol by persons 18-20.

The SPF SIG project is based on a population-based public health approach, with the focus on change for entire populations; outcomes-based prevention using knowledge of alcohol consumption and consequences to determine priorities and strategies to address them; and data-informed decision-making across all steps of the SPF process.

**Lead Agency:** County Human Services

**Program Contact:** Jean Dentinger

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Coordinated diversion includes three jail and/or hospital diversion programs for consumers with a serious mental illness. Three teams of qualified mental health professionals staff the Community Court, Mental Health Court and Forensic Diversion Program.

All three programs provide assertive, short term support for persons with serious mental illness, with the goal of connecting them with appropriate ongoing community treatment options. A primary goal of all the programs is to divert mentally ill persons from lengthy jail stays and promote stability in the community. Staff with the Forensic Diversion Program focus on avoiding or decreasing days of unnecessary jail time and provide linkage to community resources. In FY12 Community Court served 657 clients, Forensic Diversion served 294 clients, and Mental Health Court served 45.

### Program Description

The three coordinated diversion programs target persons in the criminal justice system with serious mental illness who are at risk of lengthy stays in jail or hospitals unless provided additional treatment, support, and resources.

The Community Court Program addresses quality of life crimes with a focus on restorative justice. Clients are able to participate in a variety of social services as an alternative to jail or community service.

Mental Health Court provides time-limited intensive case management services to persons involved in the criminal justice system while connecting them to community treatment, housing, and financial and medical entitlements. Staff provide ongoing monitoring and support for persons enrolled in Mental Health Court. Staff initiated services to 66 in FY12.

The Forensic Diversion Program focuses on diversion from the criminal justice system for persons charged with misdemeanors and ordered to undergo evaluation/restoration at the Oregon State Hospital (OSP). Staff provide mental status evaluations, as well as linkage to basic needs in the community; time-limited coordination/linkage to treatment services, housing, financial and medical entitlements, and social services. In addition, Forensic Diversion provides community restoration as an alternative to being placed in the OSP. This option is less restrictive and provides the client with continued stability and services while maintaining safely in their community.

The three diversion programs address the needs of residents with a mental illness who can be safely diverted from jail and/or the State Hospital, provide support for successful completion of court directives and provides linkage to community services that provide stability. Initial case management and coordination protects the legal and civil rights of these individuals, ensures appropriateness of resources and decreases the unnecessary expense of time in jail or the State Hospital.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of participants in Community Court	1,200	800	657	750
Outcome	% of participants in good standing or have successfully completed services	60.0%	59.0%	55.0%	60.0%
Output	# of participants engaged with Forensic Diversion	190	275	294	325
Outcome	% of participants successfully engaged with Forensic Diversion	65.0%	70.0%	69.0%	70.0%

### Performance Measure - Description

The outcomes measures the program's effectiveness to engage clients toward community based stabilization.



**Legal/Contractual Obligation**

State of Oregon Financial Assistance Agreement.

**Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$213,647	\$575,377	\$208,618	\$611,860
Materials & Supplies	\$4,849	\$19,997	\$4,849	\$19,997
Internal Services	\$16,937	\$50,238	\$17,337	\$50,738
Total GF/non-GF:	<b>\$235,433</b>	<b>\$645,612</b>	<b>\$230,804</b>	<b>\$682,595</b>
Program Total:	<b>\$881,045</b>		<b>\$913,399</b>	
Program FTE	2.00	6.00	2.00	6.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$645,612	\$0	\$682,595
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$645,612</b>	<b>\$0</b>	<b>\$682,595</b>

**Explanation of Revenues**

\$581,774 - State Mental Health Grant Non-Residential Adult: Based on FY12 grant award

\$100,821 - State Mental Health Grant Local Admin: Based on FY11 revised budget

\$230,804 - County General Fund

**Significant Program Changes**Last year this program was: #25088, Coordinated Diversion for Persons with Mental Illness



**Lead Agency:** County Human Services

**Program Contact:** Neal Rotman

**Program Offer Type:** Existing Operating

**Related Programs:** 25090B

**Program Characteristics:**

**Executive Summary**

Detoxification and Supportive Housing are two vital steps to working towards long-term recovery and stability. Detoxification, a medically monitored inpatient service, is the primary entrance point into addiction services for many people who are severely addicted and people who are low income. There are approximately 2,400 admissions to detoxification annually with an average successful completion rate of 75%. Supportive Housing is available for people who are homeless addicts who have completed detoxification and are continuing treatment. Benefiting from both clinical and housing support, clients move from active addiction, through treatment and into the recovery community; and from homelessness through supportive housing and into permanent housing.

**Program Description**

Alcohol and drug detoxification medically stabilizes a highly vulnerable and diverse client population. It prepares them for further alcohol/drug treatment and connects them to other services needed to resolve homelessness, health issues, etc. Supportive Housing greatly increases post-detoxification treatment retention rates and promotes recovery. After detoxification, Supportive Housing addresses two interwoven challenges: without housing, clients lack the stability necessary to address the problems that lead to homelessness, and without supportive services, the client is likely to remain homeless due to unaddressed addiction issues.

Detoxification beds provide services 24 hours-a-day, 7 days-a-week. Clients receive prescribed medication to ease withdrawal symptoms and acupuncture to reduce physiological stress so they are more likely to complete the process. The program includes an integrated medical clinic with primary care and dual-diagnoses services. Detoxification is provided in a culturally competent manner that includes a variety of services: counseling and case management, physical and mental health care, housing resources (permanent housing, rent assistance, eviction prevention), food and transportation, and economic independence (job training, employment referrals, benefits eligibility screening).

After detoxification, clients who are homeless who are entering outpatient treatment are referred to supportive housing services. Supportive Housing (\$21 per unit per day) is an evidence-based, low cost resource when compared to inpatient hospitalization (\$2,348 per day) or adult residential treatment (\$106 per day) and we can provide less restrictive/expensive outpatient treatment while the individual is in Supportive Housing. Findings from a 2006 study of adults who are homeless in Portland showed a 36% reduction in community cost when supportive housing is provided. Each of the 50 supportive housing units can house 2 to 3 clients per year (3-4 month stays). Clients are helped by Housing Support Specialists to access key services that promote health, recovery, stability, and self-sufficiency.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number of admissions annually to detoxification <sup>1</sup>	2,539	2,600	2,368	2,400
Outcome	Percentage of supportive housing unit utilization <sup>2</sup>	90.0%	91.0%	90.0%	90.0%

**Performance Measure - Description**

<sup>1</sup> A person who completes the enrollment process and enters detoxification is an admission. There can be multiple admissions for a person annually.

<sup>2</sup> Average length of stay in supportive housing is 14-15 weeks. Supportive housing increases post-detoxification treatment retention rates, so it is important that the supportive housing units are utilized to their fullest extent. Our outcome measures the annual utilization rate.

### Legal/Contractual Obligation

Because Multnomah County accepts the State Mental Health Grant, we are obligated to spend funds in accordance with regulations regarding State Service Elements (i.e. Service Element A-D 66 is Continuum of Care Services). Also, Local 2145 Beer and Wine Tax Revenues are provided to counties on a dedicated formula basis and are restricted to alcohol and drug services.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Contracts	\$1,237,166	\$1,878,359	\$1,174,308	\$1,878,359
Total GF/non-GF:	<b>\$1,237,166</b>	<b>\$1,878,359</b>	<b>\$1,174,308</b>	<b>\$1,878,359</b>
Program Total:	<b>\$3,115,525</b>		<b>\$3,052,667</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,878,359	\$0	\$1,878,359
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,878,359</b>	<b>\$0</b>	<b>\$1,878,359</b>

### Explanation of Revenues

\$1,459,442 - State Mental Health Grant A&D Continuum of Care: Based on FY12 award.

\$418,917 - Local 2145 Beer & Wine Tax Revenues: Based on FY12 award.

\$1,174,308 - County General Fund

### Significant Program Changes

Last year this program was: #25090, Addictions Detoxification and Post-Detoxification Housing

**Lead Agency:** County Human Services

**Program Contact:** Neal Rotman

**Program Offer Type:** Existing Operating

**Related Programs:** 25090A

**Program Characteristics:**

**Executive Summary**

This scaled offer is to the Supportive Housing portion of Program Offer 25090A (Detoxification and Post-Detoxification Housing). Supportive Housing for people who are homeless addicts is one of the vital steps to working towards long-term recovery and stability. Providing supportive housing can reduce community costs by 36%. This program offer maintains the current service level of 8 units annually specifically for individuals who illicitly use prescription opiates or heroin.

**Program Description**

Each of the 8 supportive housing units can house 2 to 3 clients per year (3-4 month stays) for an average of 24 clients annually. Clients are helped by Housing Support Specialists to access key services that promote health, recovery, stability, and self-sufficiency. These units are for individuals who have received detoxification services for illicit use of prescription opiates or heroin addiction; an increasing problem in our community.

Supportive Housing addresses two interwoven challenges: without housing, clients lack the stability necessary to address the problems that lead to homelessness, and without supportive services, the client is likely to remain homeless due to unaddressed addiction issues.

Supportive Housing (\$68 per unit per day) is an evidence-based, low cost resource when compared to inpatient hospitalization (\$2,348 per day) or adult residential treatment (\$106 per day) and we can provide less restrictive/expensive outpatient treatment while the individual is in Supportive Housing. Findings from a 2006 study of adults who are homeless in Portland showed a 36% reduction in community cost when supportive housing is provided.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number served in supportive housing units	0	0	23	24
Outcome	Percentage of supportive housing unit utilization	0.0%	0.0%	90.0%	90.0%

**Performance Measure - Description**

This performance indicator started 7/1/2011. Average length-of-stay in supportive housing is 14-15 weeks. Supportive housing increases post-detoxification treatment retention rates, so it is important that the supportive housing units are utilized to their fullest extent. Our outcome measures the annual utilization rate.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Contracts	\$0	\$0	\$205,000	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$205,000</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$205,000</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$205,000 - County General Fund

**Significant Program Changes****Last year this program was:**

Last year this program was funded for the additional 8 beds out of one-time-only County General Funds. The goal had been to have this program considered for ongoing funding. This year, we are requesting consideration of funding this out of target offer with ongoing County General Fund.

**Lead Agency:** County Human Services

**Program Contact:** Neal Rotman

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Sobering program provides a safe, secure holding environment for persons who are publicly intoxicated due to alcohol or drug abuse. As these individuals regain their functionality, staff encourages them to seek further care. The Sobering program has more than 9,000 annual admissions.

### Program Description

The Sobering program is a multi-jurisdictionally-funded community resource that operates 24 hours per day, 7 days per week. The program provides special emphasis on ethnic minorities, people who are homeless, and women. Staff is appropriately licensed and credentialed (such as Emergency Medical Technicians) and is knowledgeable about acute alcohol/drug intoxication and emergency first aid techniques. The Sobering program serves more than 9,000 clients annually. The average length of stay is 5.5 hours.

The Sobering program serves a public safety function by providing a medically monitored environment in which these individuals become responsive to their surroundings while they are protected from abuse and neglect. This program reduces the use of critical and finite police, fire and emergency services. It saves the City police approximately 900 bookings (and associated costs) per month. The Sobering program includes the CHIERS (Central City Concern Hooper Inebriate Emergency Response Service) mobile outreach van, funded by the City of Portland, to transport intoxicated persons to the program.

The Sobering program also provides a behavioral health function by providing a point of intervention for these persons who are publicly intoxicated. Before the individual is released, staff gives them information about chemical dependency, alcohol and drug treatment options, and access to additional health care.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Total Admissions	7,152	9,000	9,012	9,000
Outcome	Percentage of clients that successfully discharge <sup>1</sup>	100.0%	100.0%	100.0%	100.0%

### Performance Measure - Description

<sup>1</sup> A successful discharge includes: a) no deaths in sobering (the program had one death five years ago); and b) clients are cognizant of surroundings and no longer in immediate danger of harm to self or others.

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2012	2012	2013	2013
Contracts	\$627,722	\$0	\$643,415	\$0
Total GF/non-GF:	\$627,722	\$0	\$643,415	\$0
Program Total:	\$627,722		\$643,415	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

\$643,415 - County General Fund

Significant Program Changes

Last year this program was: #25091A, Sobering

**Lead Agency:** County Human Services

**Program Contact:** Neal Rotman

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

This program provides a continuum of youth outpatient and residential addictions treatment, including culturally-specific outpatient services for high-risk minority youth. It also provides Alcohol and Drug Free housing resources for families in which the adult parent(s) are in early addiction recovery. In 2012-13, about 140 youth will be provided outpatient treatment services, about 40 youth will receive residential treatment, and a minimum of 67 families will receive housing supports in recovery-focused housing communities.

### Program Description

Youth alcohol and drug treatment focuses on the developmental issues of youth up to age 18 to intervene in the immediate and long-term consequences of substance abuse. Our youth treatment continuum funds both outpatient and residential services, and reflects collaboration with schools and juvenile justice services.

Youth outpatient services include “generic” youth slots as well as culturally-specific services for minority youth. Our targeted population is uninsured youth through age 18 whose families' income is less than 200% of Federal Poverty Level. Most youth eligible for our services will qualify for and become enrolled in the Oregon Health Plan (OHP, Medicaid), but since they may not be insured at time of treatment enrollment, our slots allow for immediate treatment access and serve as bridge funding until OHP enrollment is complete. Some youth need a higher level of care, and youth residential treatment addresses the needs of some of the most vulnerable and at-risk county adolescents, a subset of whom have significant mental health issues. Youth residential treatment is funded by a mix of County General Fund and state funds: the county sends County General Fund dollars to the state Addictions and Mental Health Division where dollars are Medicaid-matched (more than doubling the funds) and contracted via the state back to a Multnomah County youth residential treatment provider.

The Family Alcohol and Drug-Free Network (FAN), a collaboration of community providers, includes 88 units of long-term transitional housing for families who are rebuilding their lives following the devastation of their addictions. These housing communities provide a clean, safe and sober living environment in which parents can raise their children and in which new recovery principles are put into practice. This offer funds an array of services aligned for FAN families - including rent assistance, family mentoring, and housing case management - to support recovery and build family stability, economic self-sufficiency, healthy community involvement and success in permanent housing.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Youth assessed and entered into treatment <sup>1</sup>	227	215	138	0
Outcome	Percentage of youth successfully completing treatment <sup>2</sup>	24.6%	75.0%	10.0%	0.0%
Output	Number of households served in housing services	61	100	60	67
Outcome	Families that move into long term permanent housing	88.0%	75.0%	88.0%	85.0%

### Performance Measure - Description

✓ **Measure Changed**

<sup>1</sup> The state is now within 5.6% of its target of 95% enrollment for healthcare benefits for youth. The continued decline in the number of youth served under this program offer is a result of the dramatic increase in rates of youth enrollment in Oregon Health Plan and Oregon Healthy Kids. This performance measure is discontinued in FY 12-13. We need to revamp our data system to separate youth who move from our program onto state healthcare benefits from youth who complete their entire course of outpatient treatment in our program.

<sup>2</sup> This performance measure is discontinued in FY 12-13. Due to the federal and state transformation of healthcare benefits for youth (see <sup>1</sup> above), the data has been distorted by the movement of youth from our program into other insurance systems.

### Legal/Contractual Obligation

Because Multnomah County accepts the State Mental Health Grant, we are obligated to spend funds in accordance with regulations regarding State Service Elements (i.e. Service Element A-D 60 is Special Projects and Service Element A-D 66 is Continuum of Care Services). Also, Local 2145 Beer and Wine Tax Revenues are provided to counties on a dedicated formula basis and are restricted to alcohol and drug services.

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Contracts	\$272,941	\$785,602	\$274,279	\$881,475
Total GF/non-GF:	<b>\$272,941</b>	<b>\$785,602</b>	<b>\$274,279</b>	<b>\$881,475</b>
Program Total:	<b>\$1,058,543</b>		<b>\$1,155,754</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$785,602	\$0	\$881,475
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$785,602</b>	<b>\$0</b>	<b>\$881,475</b>

### Explanation of Revenues

\$358,878 - State Mental Health Grant A&D Special Projects: Based on FY12 award.  
\$497,897 - State Mental Health Grant A&D Continuum of Care: Based on FY12 award.  
\$24,700 - Local 2145 Beer & Wine Tax Revenues: Based on FY12 award.  
\$274,279 - County General Fund

### Significant Program Changes

✓ **Significantly Changed**

**Last year this program was:** #25094, Family and Youth Addictions Treatment Continuum

The Oregon Healthy Kids statewide program goal is to enroll 95 percent of Oregon's children in health insurance. Current data shows that the goal has nearly been reached.



**Lead Agency:** County Human Services

**Program Contact:** Neal Rotman

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Family Involvement Team (FIT) for Recovery program is a collaborative effort with Department of Human Services/Child Welfare, alcohol and drug treatment providers, social service agencies, and the Family Dependency Court to connect parents to appropriate treatment who have an allegation of child abuse or neglect with drugs and/or alcohol involved. Last year the FIT for Recovery program connected 565 clients with addictions treatment as expeditiously as possible and provided enhanced services to assist the client to successfully complete treatment and maintain recovery.

### Program Description

The FIT for Recovery Core team, housed at the Family Dependency Court, works with Child Welfare parents and their children until they enter addictions treatment. Additional team members, located at the five treatment providers, begin working with the parent and their children once the parent and/or the parent and child enter treatment. Staff at the treatment agencies provide the family with support services including case management, family therapy, and wrap around services to assist the client to remain successful in treatment. A five-year federally funded grant enables FIT for Recovery to 1) expand the number of Child Welfare clients that can access alcohol and drug treatment, and 2) provide enhanced and previously unavailable aftercare and parent mentoring services to those clients. By accepting services, parents are demonstrating to the State Department of Human Services (DHS) Child Welfare that they are recognizing that drugs or alcohol are affecting their abilities to parent effectively and are willing to take steps to become effective parents. FIT partners include: DHS Child Welfare, Family Dependency Court, LifeWorks NW, Cascadia, NARA, Central City Concern, Volunteers of America, Morrison Center and CODA.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Percent of eligible parents accepting FIT services <sup>1</sup>	66.0%	75.0%	66.0%	0.0%
Outcome	Average monthly number of clients in treatment <sup>2</sup>	333	245	299	299
Output	Average number of FIT Triage starts per month <sup>3</sup>	0	0	0	102

### Performance Measure - Description

✓ **Measure Changed**

<sup>1</sup> This performance measure is discontinued in FY 12-13. The percent of eligible parents accepting FIT services has been found not to be an accurate output indicator.

<sup>2</sup> The average monthly number of clients enrolled in treatment is a count by treatment provider of all clients as enrolled in that month and receiving treatment.

<sup>3</sup> The average number of triage starts per month is a new performance indicator for FY 12-13. Therefore, there is no previous year actual or current year purchased/estimated. This indicator tracks the number of new clients entering FIT Triage per month. Triage is the process that staff use to determine if a Child Welfare client referral warrants further assessment for drug and/or alcohol use or abuse and, if positive, what level of treatment is appropriate.

### Legal/Contractual Obligation

Because Multnomah County accepts the State Mental Health Grant, it is obligated to spend funds in accordance with regulations regarding State Service Elements (i.e. Service Element A-D 60 is Special Projects and Service Element A-D 66 is Continuum of Care Services).

### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$0	\$20,500	\$0	\$0
Contracts	\$0	\$1,488,875	\$0	\$1,137,696
Materials & Supplies	\$0	\$1,500	\$0	\$11,424
Internal Services	\$0	\$26,871	\$0	\$6,875
Total GF/non-GF:	<b>\$0</b>	<b>\$1,537,746</b>	<b>\$0</b>	<b>\$1,155,995</b>
Program Total:	<b>\$1,537,746</b>		<b>\$1,155,995</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Indirect for dep't Admin	\$13,219	\$0	\$3,690	\$0
Intergovernmental	\$0	\$1,537,746	\$0	\$1,155,995
<b>Total Revenue:</b>	<b>\$13,219</b>	<b>\$1,537,746</b>	<b>\$3,690</b>	<b>\$1,155,995</b>

### Explanation of Revenues

\$272,435 - State Mental Health Grant A&D Special Projects: Based on FY12 award.

\$723,560 - State Mental Health Grant A&D Continuum of Care: Based on FY12 award.

\$160,000 - Child & Family ACYF Federal Grant based on Year 5 award.

### Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #25098, Family Involvement Team

On September 30, 2012 the five-year federally funded Children's Bureau grant ends. The Children's Bureau grant operates on a federal fiscal year (10/1/11 to 9/30/12) with the last three months of the grant overlapping the County Fiscal Year 2012-13. Planning for the programmatic loss of \$500,000 annually is taking place now and will continue with the FIT for Recovery partners.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Homeless Families' Shelter and Emergency Services (HFSES) provides year-round day and night shelter, access and referral to supportive services, housing placement and retention support, and increased winter capacity through the Family Warming Center to approximately 320 homeless households with children and 50,000 callers to 211info annually.

In partnership with faith-based congregations, non-profit providers, the City of Portland, and the community, the county's financial investment is leveraged, on average \$2 for every \$1 invested.

90 households annually are placed into housing and provided with rent assistance, as well as placement retention support resulting in 80% remaining in permanent housing six months after exit.

### Program Description

In FY 09-10 the Oregon Department of Human Services (DHS) documented 6,122 households with children receiving food stamps in Multnomah County who self-reported that they were homeless. The majority of these families are largely invisible to the community because they are much more likely to be doubled up or couch surfing.

In FY 10-11 the Point-In-Time Street Count documented a 35% increase from the 2009 Count in the number of families with children living on the streets, in cars, or other places not meant for human habitation.

Leveraging faith-based, non-profit, and jurisdictional partnerships, the county has created a true year-round system of care for homeless families, providing day and night shelter, access and referral to supportive services, housing placement and retention support, and increased winter capacity. Utilizing this base, the investment of general funds is leveraged and maximized. It is also anticipated that over time, by providing services year round, potential need during the winter may be reduced as families won't have to wait until the winter in order to leave the streets or other unsafe or inappropriate living situations.

In addition, 211info provides general health and human services referrals for the community at large, specialized winter shelter access services, and emergency response functions as part of the system of care.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of households served with shelter or emergency services <sup>1</sup>	218	270	320	270
Outcome	% of households served that remain in housing 6 months after exit <sup>2</sup>	98.0%	75.0%	80.0%	80.0%

### Performance Measure - Description

<sup>1</sup> Increase in current year estimated output number is as a result of significant investment of one-time-only resources in FY 11-12. This may not be replicated in FY 12-13.

<sup>2</sup> Permanent housing is long-term community-based housing with attached appropriate support services, where an individual can stay without time limit.

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Contracts	\$1,124,471	\$0	\$534,562	\$336,144
Internal Services	\$0	\$0	\$0	\$11,435
Total GF/non-GF:	<b>\$1,124,471</b>	<b>\$0</b>	<b>\$534,562</b>	<b>\$347,579</b>
Program Total:	<b>\$1,124,471</b>		<b>\$882,141</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$6,138	\$0
Intergovernmental	\$0	\$0	\$0	\$347,579
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$6,138</b>	<b>\$347,579</b>

**Explanation of Revenues**

\$347,579 OHCSO SHAP,EHA: Based on current grant award  
 \$534,562 County General Fund

**Significant Program Changes**
 **Significantly Changed**

**Last year this program was:** #25111A, Homeless Families' Shelter and Emergency Services  
 FY 2012's Program Offer 25141-211 Info Line contracted funding was moved to be included in this program offer.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Rapid Re-Housing Initiative (RRI) provides flexible rent and other client assistance, housing placement, and placement retention support to approximately 70 homeless families with children who are living in the Homeless Families' Shelter System, the Family Warming Center, or in a domestic violence shelter.

Services in FY 11-12 are funded through one-time-only funds. This program offer requests to transition these services to ongoing funds.

In FY 11-12, 30 households will be placed using the highly successful 30 Families in 30 days model (30/30), 20 households into Oxford-type housing, and 20 households fleeing domestic violence into permanent housing.

90% of households served will remain in permanent housing six months after exit.

### Program Description

There continues to be an increase in homeless families due to the economy. In FY 10-11 there was a 35% increase in the number of families with children living on the streets, in cars, or in other places not meant for human habitation. Demand for services continues to exceed available capacity in all areas, including rent assistance, energy assistance, food, and shelter.

Over the past three years, RRI has established effective practices to avoid turning vulnerable families away from full shelters by ending families' homelessness through the successful 30/30 program; trying new approaches with Oxford-type housing; and providing as much service as possible as cost-effectively as possible.

Over 90% of families served through 30/30 maintain their housing 12 months after exit.

Oxford-type housing was developed as best practice within the addictions treatment field allowing individuals with addictions access to clean and sober permanent housing that emphasizes self empowerment and determination through democratically operated housing. The model has successfully been used to establish housing for homeless families and families fleeing domestic violence, resulting in the opportunity to develop positive rental histories, receive intensive staff and peer support, share resources with other families, and increase incomes for a move into independent housing. The model is extremely cost-efficient in comparison with other types of housing and for appropriate households, it is an important option.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of households served	66	70	70	70
Outcome	% of households served that remain in housing 6 months after exit	100.0%	90.0%	90.0%	90.0%

### Performance Measure - Description

Permanent housing is long-term community-based housing with attached appropriate support services, where an individual can stay without time limit.

Legal/Contractual Obligation

N/A

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2012	2012	2013	2013
Contracts	\$0	\$0	\$325,000	\$0
Total GF/non-GF:	\$0	\$0	\$325,000	\$0
Program Total:	\$0		\$325,000	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

\$325,000 - County General Fund

Significant Program Changes

Last year this program was: #25111C, Rapid Re-Housing Initiative

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Bridges to Housing (B2H) provides high-resource-using homeless families with intensive case management, permanently affordable housing, and flexible funds. These families have no permanent place to live, have at least one child under the age of 18, use a large amount of county-funded services, interact with several service systems at the same time, and have serious barriers that cause them to be excluded from housing. At least 70% of families served maintain their housing six months after exit.

The 139 B2H units were developed with funding from the City of Portland and State of Oregon, most have permanent rent assistance provided by Home Forward. County funds provide support services to families living in these units.

### Program Description

Bridges to Housing (B2H) was developed to assist a challenging group of homeless families. While many homeless families experience homelessness due to short-term economic reasons, a subset of families have such serious problems that they cannot be housed without permanent rent assistance and a period of intense services. B2H uses a holistic approach focused on coordinated service addressing multiple and complex needs.

A typical B2H family is a single mother with one or more children, often fleeing domestic violence, experiencing mental health or addictions, and struggling to provide for the basic needs of her children. Most B2H families have poor rental histories, very low income, minor criminal convictions, and bad credit making it impossible for them to lease apartments without B2H.

County funds serve 139 B2H families currently in housing with case management and other support services, leveraging funds from City of Portland and State of Oregon to build and maintain the housing and \$7,000 per family per year in rent assistance from Home Forward.

Evaluation through Portland State University shows that families supported by B2H are becoming successful renters, are less likely to have their children removed and placed in foster care, more likely to have their children succeed in school, less likely to have episodes of domestic violence, and less likely to be involved in the criminal justice system.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of families served <sup>1</sup>	104	80	139	139
Outcome	% of households served that remain in permanent housing 6 months after exit <sup>2</sup>	90.0%	70.0%	70.0%	70.0%

### Performance Measure - Description

<sup>1</sup> Increase in number served reflects final investment of on-going funding. Number served will not increase in subsequent years.

<sup>2</sup> Permanent housing is long-term community-based housing with attached appropriate support services, where an individual can stay without time limit.

Legal/Contractual Obligation

N/A

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2012	2012	2013	2013
Contracts	\$947,516	\$0	\$971,204	\$0
Total GF/non-GF:	\$947,516	\$0	\$971,204	\$0
Program Total:	\$947,516		\$971,204	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

\$971,204 County General Fund

Significant Program Changes

Last year this program was: #25114A, Bridges to Housing



**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Homeless Benefits Recovery Project (HBR) utilizes a proven program model to assist 120 chronically homeless individuals with mental illness, addictions, and disabilities in accessing federal benefits, such as Social Security Disability Insurance (SSI/SSDI), and services to which they are entitled but have been unable to receive because their disabilities prevent them from successful navigation of the application or appeals system. Locally, only 11% of those eligible receive benefits.

In FY 2011, HBR assisted 79 individuals obtain SSI/SSDI benefits, an 84% success rate for eligible individuals receiving services through the Multnomah Treatment Fund.

### Program Description

HBR assists approximately 120 individuals annually who are served by the Multnomah Treatment Fund. The Multnomah Treatment Fund is a County General Fund program serving a limited number of individuals with mental illness and without insurance or benefits.

HBR services include: eligibility screening, application assistance, appeals process advocacy, case management, and medical and other documentation to individuals evaluated to be potentially eligible for SSI/SSDI. HBR targets those who would potentially not be on the county's caseload if they had access to the benefits for which they are eligible, or those currently on the county's caseload whose cost of care is not reimbursed. Local estimates identify 39% of the chronic homeless population is eligible for SSI/SSDI as a result of mental illness and 46% are eligible as a result of their physical health. Benefit recovery efforts are a key strategy of the local 10 Year Plan to End Homelessness.

Without benefits, individuals are either without services and utilizing expensive, locally funded safety net services – jail, hospital/medical care, or other safety net services – or have their treatment paid for with scarce local community (non-federal) funds.

At the start of services, HBR clients were earning an average of \$143 per month and at exit, they were earning \$705 per month. 86% of clients had no primary health care option at the start of services and are now covered through Medicaid. In the year prior to services, HBR clients now receiving federal benefits used \$35,585 in mental health services from the Treatment Fund; were put on emergency holds for a total of 94 days, the equivalent of \$75,200; and had 23 instances of mobile outreach with Project Respond, the equivalent of \$1,360.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of individuals served	176	120	120	120
Outcome	% of individuals served who receive benefits	84.0%	75.0%	75.0%	75.0%

### Performance Measure - Description

Legal/Contractual Obligation

N/A

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2012	2012	2013	2013
Contracts	\$401,265	\$0	\$411,297	\$0
Total GF/non-GF:	\$401,265	\$0	\$411,297	\$0
Program Total:	\$401,265		\$411,297	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

\$411,297 County General Fund

Significant Program Changes

Last year this program was: #25115, Homeless Benefit Recovery Project

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Community Services Division Administration (CSA) ensures that all requirements for divisional operation are maintained to county, state, and federal standards.

CSA is responsible for providing, contracting for, and/or coordinating the county's investments in three core service/policy areas: Energy, Homelessness and Housing, and Anti-Poverty/Prosperity.

Division supported services are provided to 23,217 Multnomah County households annually.

The Division also functions as the county's legislatively mandated Community Action Office.

### Program Description

45% of Portland households pay more than 30% for housing (cost burdened). Workers with a full-time, minimum wage job cannot afford apartments of any size at fair market rate in the metro area without being cost burdened. County unemployment rates continue to stay in double digits. Twenty-five percent of county children under the age of five live in poverty, with children of color represented at three times the rate of Caucasian children.

This is the environment in which the Community Services Division conducts its work. Current need for services far outstrips available resources. The Division is called to provide innovative and strategic thinking, leadership, action, and investment in economic development related to human capital if the ability to exist and prosper as a community that cares for all its members is to be preserved.

Managing the work of 28.5 FTE, CSA effectively administers a package of direct services, contract services, and community initiatives representing more than \$25 million dollars investment of county, state, and federal funds.

As the county's Community Action Office, CSA provides leadership for cross-jurisdictional homelessness and housing, and anti-poverty/prosperity efforts. CSA works to create opportunities for all citizens to experience prosperity through key partnerships and collaborations with local, regional, and statewide public, private and community stakeholders including consumer, business, faith, jurisdictional and other partners.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	% of staff attending at least 10 hours of skill bldg/professional development	100.0%	85.0%	99.0%	85.0%
Outcome	% of stakeholders expressing satisfaction with services received	85.0%	60.0%	60.0%	60.0%

### Performance Measure - Description

Decrease in percent of stakeholder satisfaction is a result of changed survey response scale. It does not necessarily reflect an actual decrease in satisfaction.

Legal/Contractual Obligation

N/A

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2012	2012	2013	2013
Personnel	\$756,004	\$0	\$797,395	\$0
Contracts	\$3,000	\$0	\$3,000	\$0
Materials & Supplies	\$19,547	\$0	\$24,288	\$0
Internal Services	\$89,652	\$0	\$83,750	\$0
Total GF/non-GF:	\$868,203	\$0	\$908,433	\$0
Program Total:	\$868,203		\$908,433	
Program FTE	7.50	0.00	7.50	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

\$908,433 County General Fund

Significant Program Changes

Last year this program was: #25118, Community Services Administration

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Energy Services (ES) ensures that approximately 10,000 fixed and low-income households have financial assistance to help meet their energy costs, avoiding shutoff and potential loss of housing.

Direct utility payments to income eligible households, along with energy education, case management, and other services help households manage and pay for their energy costs. Services prevent utility shutoff for vulnerable households. Services are primarily tax and rate payer funded by the state and federal government.

### Program Description

Energy bill payment assistance works through nine community agencies to make utility payments for fixed and low-income households. In FY 10-11 more than 70,000 households were income eligible for service; of those, 17,383 were served.

Services are delivered through the SUN Service System (SUNSS) Anti-Poverty System, a countywide integrated and coordinated system of care for school-age youth and their families.

Energy Education helps fixed and low-income households understand their energy use and provides the necessary tools - such as light bulbs, window stripping and showerheads - to better control energy expenses. All households receiving Energy Services receive education on how to reduce energy costs.

Energy services contribute to reducing the number of households living in poverty by increasing household self-sufficiency and improving local economic conditions through energy conservation. Energy costs disproportionately affect low-income households. The Department of Energy (DOE) estimates low-income households pay an average of 12.6% of their income for energy expenses compared with 2.7% for the average household. In some fixed income households, energy costs can reach as high as 35% of total monthly expenses.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of households served	17,383	10,000	13,000	10,000
Outcome	% of households served after shutoff notices that avoid shutoff	100.0%	100.0%	100.0%	100.0%

### Performance Measure - Description

Decrease in numbers served reflects decreased federal funding.

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$0	\$368,774	\$0	\$311,536
Contracts	\$6,200	\$1,212,324	\$6,200	\$688,972
Materials & Supplies	\$14,183	\$8,071,978	\$8,937	\$7,765,178
Internal Services	\$69,897	\$495,035	\$55,849	\$397,766
Total GF/non-GF:	<b>\$90,280</b>	<b>\$10,148,111</b>	<b>\$70,986</b>	<b>\$9,163,452</b>
Program Total:	<b>\$10,238,391</b>		<b>\$9,234,438</b>	
Program FTE	0.00	5.00	0.00	4.04
<b>Program Revenues</b>				
Indirect for dep't Admin	\$241,645	\$0	\$207,764	\$0
Intergovernmental	\$0	\$10,148,111	\$0	\$9,163,452
<b>Total Revenue:</b>	<b>\$241,645</b>	<b>\$10,148,111</b>	<b>\$207,764</b>	<b>\$9,163,452</b>

**Explanation of Revenues**

\$4,325,780 - LIEAP Leverage Energy Grant: Based on current grant award

\$4,685,172 - OEAP-Energy Grant: Based on current grant award

\$152,500 - PDX Water/Sewer: Based on FY12 revised budget

\$70,986 - County General Fund

**Significant Program Changes****Last year this program was:** #25119, Energy Assistance

Decreased 1.0 FTE - Office Assistant Sr (Vacant); Estimated 30% decrease in Federal Low Income Home Energy Assistance Program (LIHEAP)funding.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Weatherization (WX) provides repair and replacement to approximately 900 households. Services are primarily tax and rate payer funded by the state and federal government.

According to an Oregon Housing and Community Services (OHCS) study, services create \$1.78 of economic activity within the county for every \$1 invested in WX.

### Program Description

Weatherization (WX) provides energy use audits, weatherization, furnace repairs and replacement, and appliance replacement to fixed and low-income households. County staff and vendors provide services. In FY 10-11, more than 70,000 households were income eligible for service; of those, 918 were served.

Weatherization contributes to reducing the number of households living in poverty by increasing household self-sufficiency and improving local economic conditions through energy conservation. Energy costs disproportionately affect low-income households. The Department of Energy (DOE) estimates low-income households pay an average of 12.6% of their income for energy expenses compared with 2.7% for the average household. In some fixed income households, energy costs can reach as high as 35% of total monthly expenses. DOE estimates WX households save an average \$274 annually in energy costs.

WX provides jobs for local contractors and revenue for businesses who supply materials, and indirectly creates another 1.25 jobs in Oregon for every administrative position funded. National research indicates that WX has multiple "non-energy related" benefits including affordable housing preservation, regional energy conservation, long-term home improvement, safer housing conditions and improved physical health. Locally, Oak Ridge National Laboratory found that WX increases household property values, maintains affordable housing and improves the environment through reduced consumption of fossil fuels.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of households served	918	750	900	750
Outcome	# of affordable housing units maintained for 10 years <sup>1</sup>	538	500	675	500

### Performance Measure - Description

<sup>1</sup> Weatherization of multi-family buildings requires landlord commitment to a minimum 10 years of affordability. It's one of the best ways to preserve and improve the quality of current affordable housing stock. Fluctuations in target numbers reflects changes in ARRA funding.

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$0	\$889,570	\$0	\$807,047
Contracts	\$0	\$163,750	\$0	\$38,926
Materials & Supplies	\$101,258	\$3,303,817	\$32,964	\$1,532,896
Internal Services	\$50,149	\$768,401	\$33,955	\$486,885
Total GF/non-GF:	<b>\$151,407</b>	<b>\$5,125,538</b>	<b>\$66,919</b>	<b>\$2,865,754</b>
Program Total:	<b>\$5,276,945</b>		<b>\$2,932,673</b>	
Program FTE	0.00	11.00	0.00	9.96
<b>Program Revenues</b>				
Indirect for dep't Admin	\$108,657	\$0	\$65,872	\$0
Intergovernmental	\$0	\$4,725,538	\$0	\$2,465,754
Other / Miscellaneous	\$0	\$400,000	\$0	\$400,000
<b>Total Revenue:</b>	<b>\$108,657</b>	<b>\$5,125,538</b>	<b>\$65,872</b>	<b>\$2,865,754</b>

**Explanation of Revenues**

\$636,014 - LIEAP Weatherization: Based on current grant award  
 \$196,681 - DOE Weatherization: Based on current grant award  
 \$1,608,059 - ECHO Grant: Based on current grant award  
 \$25,000 - Energy Show Rebates: Based on current year income projections  
 \$400,000 County Weatherization Rebates: Based on FY11 revised budget  
 \$66,919 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25121, Weatherization

Decreased 1.0 FTE - Weatherization Inspector (Vacant); Decrease overall contracted funds due to the ending of the American Recovery and Reinvestment Act (ARRA) funding \$2,200,114 budgeted in FY12.



**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Youth Gang Prevention (YGP) and the Community Healing Initiative (CHI) supports community-based, culturally, and gender-specific prevention services to Asian and Native American young people and their families at highest risk of gang membership, and African-American and Latino young people and their families who are already involved with the juvenile justice system.

Approximately 305 young people and their families will be served. It is expected that 90% of youth served increase their academic achievement, and avoid or reduce subsequent juvenile justice system involvement.

### Program Description

In FY 11-12 approximately 140 Asian and Native American families will receive prevention services and 165 African-American and Latino families on supervision with the juvenile division will receive intervention services.

In response to the LPSCC systems redesign, a procurement process was conducted to select community-based providers able to deliver a specific intensive family support and intervention program model. The identified program model is a proven best practice successful in intervening with these young people and families. By utilizing a specific, proven best practice model that provides intensive family-focused support and intervention, services are culturally and gender specific, as well as tailored to individual client needs. Services will include:

Mental health assessment and addictions treatment; school retrieval and retention; pro-social skill building activities; employment readiness and placement; basic needs; case management; linkage to support services; and flexible client service funds. Monthly system/joint case staffing meetings ensure seamless referrals between the juvenile justice system and community-based providers.

Intensive family support and intervention has been proven effective in successfully reducing or eliminating gang-related behaviors. OSU research indicates that 20% of youth offenders commit 80% of juvenile offenses, and that most of this 20% are "early bloomers" who committed crimes before the age of 15. YGP/CHI prioritizes this specific population in relationship to gang involvement, youth violence and juvenile delinquency.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of Asian and Native American families served <sup>12</sup>	112	0	140	140
Outcome	% of Asian/NA families served who avoid or reduce juvenile justice involvement <sup>2</sup>	99.0%	0.0%	90.0%	90.0%
Output	# of African-American and Latino families served <sup>12</sup>	327	0	171	100
Outcome	% of AA/Latino families served who avoid subsequent felony or arrest <sup>2</sup>	0.0%	0.0%	0.0%	50.0%

### Performance Measure - Description

✓ **Measure Changed**

<sup>1</sup> The FY 11-12 offer purchased 600 youth to be served. 158 youth were served during the first quarter of FY2012 under the previous service model, and 311 youth were served the remaining year under the new model, for a total 469 youth served.

<sup>2</sup> The newly implemented program model provides Asian and Native American youth and families with prevention services. African-American and Latino youth and families are served with intervention services. The outputs and outcomes are new, and reflect the shift to the new model.

Legal/Contractual Obligation

N/A

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2012	2012	2013	2013
Personnel	\$98,917	\$0	\$98,941	\$0
Contracts	\$1,170,663	\$0	\$1,199,930	\$0
Materials & Supplies	\$2,551	\$0	\$2,111	\$0
Internal Services	\$10,547	\$0	\$10,050	\$0
Total GF/non-GF:	\$1,282,678	\$0	\$1,311,032	\$0
Program Total:	\$1,282,678		\$1,311,032	
Program FTE	1.00	0.00	1.00	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

\$1,311,032 - County General Fund

Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #25123, Youth Gang Prevention  
Due to increased youth gang violence, a new program model was implemented that focuses the majority of available resources on those youth and their families current under supervision with the juvenile division. A smaller level of prevention capacity was maintained for those populations at risk of involvement but who are not currently involved to the highest degree.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Court Care provides on-site childcare for approximately 900 children annually whose parents are involved with legal proceedings at the Multnomah County Courthouse.

This program eases the burden on parents with young children, allowing them better access to court proceedings and supporting their ability to focus on those proceedings without worry about their children's safety.

Court Care is a collaboration among DCHS, the Oregon Judicial Department and the Multnomah County Bar Association.

### Program Description

Court Care services are jointly provided with the state of Oregon Department of Justice. Through contract with a non-profit agency, a full-service child care facility provides developmentally appropriate care, including food for participating children and screening for potential referrals to ongoing service by certified childcare providers.

An advisory committee under the auspices of the Multnomah County Bar Association raises service delivery funds, oversees operations and evaluates program effectiveness. Court Care services eliminate barriers to a parent/caregiver's ability to fully participate in legal proceedings created by lack of childcare and protect children from inappropriate exposure to potentially traumatic adult situations that can be a part of the legal process.

In particular, services are critical for women seeking restraining orders against their batterers in order to increase both their safety and the safety of their children while they go through the legal process. Addressing these issues supports a more fully functioning and effective legal system which plays a critical role in citizens' perceptions of safety.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of children served	811	900	900	900
Outcome	% of parents expressing satisfaction with services	100.0%	100.0%	100.0%	100.0%

### Performance Measure - Description

Court Care services are by definition temporary. Effectiveness is primarily defined by the existence and delivery of the services themselves. Every child served avoids inappropriate exposure to legal situations and increases the ability of their parent/care giver to participate in their own legal proceedings.

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Contracts	\$28,673	\$28,110	\$29,390	\$29,390
Total GF/non-GF:	<b>\$28,673</b>	<b>\$28,110</b>	<b>\$29,390</b>	<b>\$29,390</b>
Program Total:	<b>\$56,783</b>		<b>\$58,780</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$28,110	\$0	\$29,390
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$28,110</b>	<b>\$0</b>	<b>\$29,390</b>

**Explanation of Revenues**

\$29,390 - Oregon Judicial Dept The Intergovernmental Agreement allows for County to match funding up to \$29,390  
 \$29,390 - County General Fund

**Significant Program Changes**

Last year this program was: #25127, Court Care

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Housing Stabilization for Vulnerable Populations provides rent assistance, transitional housing, and homeless children's education to more than 759 homeless households with children annually.

These services help our most vulnerable homeless and marginally housed families with children maintain their housing and avoid homelessness; once homeless, find homes and receive long-term support; and, keep children who are homeless in school and progressing, working with them on a path to self-sufficiency.

The County's Housing Team is also supported in this program offer.

### Program Description

The unified Short Term Rent Assistance (STRA) System serves 538 households with rent assistance, mortgage payment, and emergency shelter vouchers annually. Approximately 97% of those placed in housing remain housed six months after exit.

Three facilities-based transition housing sites house approximately 89 households for up to two years.

Outreach in East County serves approximately 90 individuals and families who are homeless and living/camping in East Multnomah County.

Approximately 52 children living in homeless families receive alternative education and support services. For children living in homeless families, educational support and alternative education services ensure that to the greatest extent possible these children do not lose critical steps toward academic success and long term self-sufficiency.

Food for companion animals of those living on the streets is provided.

The county invests in a number of housing and support services programs within DCHS and other departments. Services have been targeted to specific populations, exist within different departments and divisions, and for the most part have operated in isolation from each other. The county's Housing Team - representing all county departments and divisions - determines opportunities for collaboration or potential efficiencies across programs, and to share best practice, results and innovation.

Cross-jurisdictional work with the City of Portland, the City of Gresham, and the Housing Authority of Portland is also supported - especially with the 10 Year Plan to End Homelessness.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of households receiving rent assistance or housing placement	759	489	794	794
Outcome	% of households served who remain in permanent housing 6 months after exit	94.0%	80.0%	80.0%	80.0%

### Performance Measure - Description

Permanent housing is long-term community-based housing with attached appropriate support services, where an individual can stay without time limit.

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$380,188	\$45,165	\$286,069	\$43,698
Contracts	\$850,023	\$554,597	\$1,023,197	\$1,340,118
Materials & Supplies	\$10,205	\$0	\$7,558	\$0
Internal Services	\$42,188	\$27,515	\$35,744	\$76,418
Total GF/non-GF:	<b>\$1,282,604</b>	<b>\$627,277</b>	<b>\$1,352,568</b>	<b>\$1,460,234</b>
Program Total:	<b>\$1,909,881</b>		<b>\$2,812,802</b>	
Program FTE	3.54	0.46	2.56	0.44
<b>Program Revenues</b>				
Indirect for dep't Admin	\$13,640	\$0	\$38,602	\$0
Intergovernmental	\$0	\$627,277	\$0	\$1,460,234
<b>Total Revenue:</b>	<b>\$13,640</b>	<b>\$627,277</b>	<b>\$38,602</b>	<b>\$1,460,234</b>

**Explanation of Revenues**

\$1,150,995 - HUD Family Futures: Based on current grant award

\$309,239 - OHCSH HSP, LIRHF, SHAP, EHA: current grant award

\$1,352,568 - County General Fund

**Significant Program Changes** **Significantly Changed****Last year this program was:** #25133A, Housing Stabilization for Vulnerable Populations

FY 2012's Program Offer 25133C-East County Homeless Outreach, contracted funding is included in this program offer.

Reduced 1.0 FTE - Program Specialist Sr (Vacant).

\$25,000 County General Funds has been allocated to a feeding program for companion animals of those living on the streets and is included in this program offer.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Short-Term Rent Assistance System (STRA) provides rent assistance, limited mortgage assistance, and emergency motel vouchers to individual and family households at risk of or experiencing homelessness.

STRA is a collaboration among the county, the City of Portland, and Home Forward as a key strategy of the 10 Year Plan to End Homelessness.

This program offer requests continuation of current county investment to match increased funding by Home Forward (\$500,000) and leverage continued funding from city general funds (\$500,000).

Approximately 500 additional households will be served and are expected to maintain a 97% rate of permanent housing six months after exit.

### Program Description

Research shows that prevention of homelessness is a much more effective and efficient use of community resources than intervention once a household has entered homelessness. Local data reinforces this, with exceedingly high housing stability after six months achieved by households who have often accessed less than three months of assistance.

Through the 10 Year Plan to End Homelessness, the county, the City of Portland, and Home Forward have integrated the majority of each jurisdiction's rent assistance funding into a single system. STRA, managed by Home Forward on behalf of all partners, executes and manages one contract per provider, and collects one set of data and seeks one set of outcomes - rather than the three or more that used to exist.

Access to services is maintained for both single and family households, as well as culturally specific services for racial/ethnic communities, domestic violence victims, homeless youth, and others.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of households served	0	500	500	500
Outcome	% of households served who remain in permanent housing 6 months after exit	0.0%	80.0%	80.0%	80.0%

### Performance Measure - Description

Permanent housing is long-term community-based housing with attached appropriate support services, where an individual can stay without time limit.

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Contracts	\$595,000	\$0	\$500,000	\$0
Total GF/non-GF:	<b>\$595,000</b>	<b>\$0</b>	<b>\$500,000</b>	<b>\$0</b>
Program Total:	<b>\$595,000</b>		<b>\$500,000</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$500,000 - County General Fund

**Significant Program Changes**Last year this program was: #25133E, Short-Term Rent Assistance System



**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

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

### Executive Summary

This program offer requests continued funding for the Rose City Resource Guide, a pocket guide to health and human services in the metro area. Streetroots, in collaboration with 211info, publishes the guide annually. County departments - Health, the Sheriff, County Human Services, and Community Justice - all distribute the guides to clients.

Funds will leverage City of Portland funding to ensure availability of guides for use by county staff and programs.

### Program Description

The Rose City Resource Guide is recognized and used by homeless and low-income individuals across the metropolitan area. Streetroots, a small grassroots newspaper by, for, and about issues of concern to homeless and low-income people, produces the guide annually. The guide is made available at no cost to those using it.

County departments provide the guide to clients and members of the public entering county buildings and service sites. While many departments are dues-paying members of Streetroots, this contribution does not cover the cost of the guides being used by them.

This program offer leverages current investment by the City of Portland in order to pay for the county's use of the guides.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of guides produced	0	45,000	45,000	45,000
Outcome	% of guides distributed	0.0%	100.0%	100.0%	100.0%

### Performance Measure - Description

Legal/Contractual Obligation

N/A

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2012	2012	2013	2013
Contracts	\$0	\$0	\$20,000	\$0
Total GF/non-GF:	\$0	\$0	\$20,000	\$0
Program Total:	\$0		\$20,000	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

\$20,000 - County General Fund

Significant Program Changes

Last year this program was: #25133D, Streetroots - Rose City Resource Guide

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

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

### Executive Summary

The system of care for victims of commercial sexual exploitation serves 10-15 girls under 18 years of age annually with highly intensive and population specific shelter and support services in order to intervene with this significantly traumatized group of children.

Funds currently support mid-term housing for approximately 15 young women and will support assertive engagement for approximately 40 young women in FY 12-13 under the oversight of an established community-based implementation committee that works to provide accountability and leverage significant community and other jurisdictional support.

In FY 11-12 shelter services were funded with one-time-only funds. This program offer requests to transition shelter services to on-going funding, as well as fund 2 FTE contracted positions as identified in FY 11-12, for FY 12-13.

### Program Description

In FY 09-10 the county received a planning grant from the federal government to assess the problem of commercial sexual exploitation of children (CSEC) locally and to develop an integrated law enforcement response that included community-based intervention. In FY 10-11 a multi-jurisdictional working group was convened and charged with the development of a comprehensive system of care for these children. Services are provided in a holistic manner and coordinated systems collaboration among law enforcement, child welfare, juvenile justice, and community advocates has been established.

In November 2011 county funding made possible the opening of the first mid-term housing for these children. As presented to the Board of County Commissioners, on-going funding to support these beds and the services attached to them are requested at this time. The implementation committee continues to be engaged with leveraging funding from other systems of care, the faith community continues to conduct significant fund raising efforts, and providers are carefully monitoring federal funding opportunities in order to match the county's investment.

Early experience with the first housing residents shows that all are still housed and remain engaged with the system of care - an important initial outcome.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of girls served with shelter services <sup>1</sup>	0	100	15	15
Outcome	% of girls served who remain enrolled in the program for at least 6 months <sup>2</sup>	0.0%	0.0%	50.0%	50.0%
Output	# of girls served with assertive engagement	0	0	0	40

### Performance Measure - Description

<sup>1</sup> Full funding for FY 11-12 program offer was not provided and numbers to be served this year are significantly less than what was purchased as a result. At least 15 girls are expected to be served with shelter services and potentially an additional 40 girls will receive assertive engagement services.

<sup>2</sup> Due to trauma of the population, initial success is defined as keeping girls participating with the program instead of running away, returning to their abuser and commercial sexual exploitation.

In FY12, DCJ served 70 girls with case management services, provided by the 2 FTE reflected in this offer.

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Contracts	\$0	\$0	\$420,000	\$0
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$420,000</b>	<b>\$0</b>
Program Total:	<b>\$0</b>		<b>\$420,000</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$420,000 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25135, Commercial Sexual Exploitation of Children Victims' System of Care  
 In FY12, shelter services were funded with the General fund contingency, after the FY2012 budget was adopted, through DCHS's added Program Offer 25135. Outreach and case management services were funded through a grant in DCJ which ends June 30th, 2012. This program offer funds shelter services and backfills grant funded services.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Homeless Youth System (HYS) is a highly collaborative system comprised of four non-profit agencies that provide a continuum of screening, crisis intervention, safety services, shelter, assertive engagement, housing, education, employment and health services to approximately 1,000 homeless youth up to age 25 annually.

This system is integrated with the public safety system and is a jointly funded collaboration among DCHS, DCJ, the City of Portland, Portland Police Bureau, Citizens Crime Commission, Portland Business Alliance, the State of Oregon, Outside In, New Avenues for Youth, Janus Youth Programs, Native American Youth & Family Center and the community.

Services ensure that up to 75% of those served exit to safe stable housing and that 75% of those remain in safe, stable housing for at least six months post exit.

### Program Description

The HYS provides late stage intervention for 1,000 homeless youth annually through: 24/7 crisis and safety services; shelter; assertive engagement and linkage to long-term community supports; transitional and permanent housing; education and employment services; alcohol, tobacco and other drugs intervention and treatment; and, mental and other health services. Housing, services, and support to teen parents - both homeless and not - are also provided.

System accountability is managed through the Homeless Youth Oversight Committee (HYOC), a citizen body appointed by the Chair with representation that includes the Citizen's Crime Commission, Portland Business Alliance, DHS, Juvenile Rights Project, City of Portland, Health and Community Justice Departments, service providers and homeless youth.

The HYS continues to implement the Positive Youth Development Assertive Engagement model, using a System Logic Model, Fidelity Scale, and data collection reports to monitor progress made.

Homeless youth visibility has a direct impact on citizen perception of safety. Homeless youth are particularly vulnerable to crime, to be preyed upon, or to victimize others as they attempt to survive on the streets. Through joint planning and regular cross jurisdictional meetings, services are exceptionally integrated with public safety and other service systems, with significant community oversight.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of youth served	1,179	1,000	1,107	1,000
Outcome	% of youth served who remain in permanent housing 6 months after exit	90.0%	75.0%	75.0%	75.0%

### Performance Measure - Description

Permanent housing is long-term community-based housing with attached appropriate support services, where an individual can stay without time limit.

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$82,102	\$59	\$82,121	\$0
Contracts	\$2,039,336	\$1,094,645	\$526,921	\$3,310,555
Materials & Supplies	\$2,695	\$0	\$1,830	\$0
Internal Services	\$14,027	\$9,344	\$10,833	\$22,124
Total GF/non-GF:	<b>\$2,138,160</b>	<b>\$1,104,048</b>	<b>\$621,705</b>	<b>\$3,332,679</b>
Program Total:	<b>\$3,242,208</b>		<b>\$3,954,384</b>	
Program FTE	0.83	0.00	0.83	0.00
<b>Program Revenues</b>				
Indirect for dep't Admin	\$4,596	\$0	\$11,024	\$0
Intergovernmental	\$0	\$1,104,048	\$0	\$1,522,625
<b>Total Revenue:</b>	<b>\$4,596</b>	<b>\$1,104,048</b>	<b>\$11,024</b>	<b>\$1,522,625</b>

**Explanation of Revenues**

\$278,736 - HUD Family Futures Based on current grant award  
 \$200,578 - HUD Horizons/Pathways: Based on current grant award  
 \$136,431 - OHCS D EHA: Based on current grant award  
 \$906,880 - PDX General Fund: Based on current grant award  
 \$485,129 - County General Fund  
 \$1,810,054 - County General Fund - Video Lottery

**Significant Program Changes**

**Last year this program was:** #25136A, Homeless Youth System

Contracts were moved between program offers 25133, 25136, and 25139 during FY12 which resulted offer 25139 having decrease in contracts. In order to comply with Oregon Revised Statutes, Video Lottery funding was re-classified from County General Fund to Fund 1519 - Video Lottery.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

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

### Executive Summary

Runaway Youth Services provide a 24/7 Reception Center, crisis line, shelter, support services, family counseling and reunification services, and gender-specific transitional housing services for approximately 2,000 youth ages 12-17 who have run away, or who are at risk of running away, as well as their families.

This program is a collaboration among DCHS, DCJ and DHS. 80% of those served return home or to another stable living environment at exit.

### Program Description

Runaway Youth Services include: Reception Center - a collaboration among law enforcement, DCJ and DHS - to directly receive from officers, youth found to have committed minor status offenses such as curfew violation, truancy, etc... as an alternative to detention. The Reception Center is co-located with runaway crisis response services, creating a countywide "child receiving center" for youth up to age 18.

Crisis Line - 24/7 youth and family help line that serves as a central access point for services. Telephone intervention and face-to-face, drop-in intervention also is available. This is the only community-based resource for runaway youth and families in the county.

Emergency Shelter - shelter and emergency assistance in an 11-bed, co-ed group home with services focused on family reunification. Youth receive food, safety from the street, medical care, transportation and case management services. Shelter services operate within a 72-hour intervention timeline. Research shows that the longer a young person is separated from family (where no abuse is present), the potential for eventual reunification decreases and further involvement in the child welfare system increases.

Support Services/Case Management includes: intake; assessment; individual service plans targeting family reunification; addiction treatment referrals; mental health counseling; and family mediation. Gender Specific Transitional Housing provides two beds for girls in a group home setting. Research shows that a single gender environment results in better self-sufficiency outcomes for young women.

Runaway Youth Services successfully impact detention reform efforts and reduce the number of children entering the child welfare system. County investment in Runaway Youth Services through DCHS is leveraged by investments from law enforcement, the juvenile justice system and DHS. When families are able to appropriately raise their children at home, community resources are not depleted.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of youth and families served	1,917	2,000	2,002	2,000
Outcome	% of youth served who return home or exit to other stable housing	82.0%	85.0%	85.0%	85.0%

### Performance Measure - Description

Stable housing can describe being in DHS custody which could include foster or group home placement, but most youth are reunited with family.

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$16,815	\$0	\$16,819	\$0
Contracts	\$927,432	\$189,476	\$784,517	\$194,990
Materials & Supplies	\$435	\$0	\$356	\$0
Internal Services	\$1,792	\$0	\$1,711	\$0
Total GF/non-GF:	<b>\$946,474</b>	<b>\$189,476</b>	<b>\$803,403</b>	<b>\$194,990</b>
Program Total:	<b>\$1,135,950</b>		<b>\$998,393</b>	
Program FTE	0.17	0.00	0.17	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$189,476	\$0	\$194,990
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$189,476</b>	<b>\$0</b>	<b>\$194,990</b>

**Explanation of Revenues**

\$194,990 - OCCF Youth Investment: Based on OCCF estimated funding

\$803,403 - County General Fund

**Significant Program Changes****Last year this program was:** #25138A, Runaway Youth Services

Approximately \$43,000 of County General Funds were added to this program offer to offset reductions in OCCF Youth Investment funding.



**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Anti-Poverty Services (APS) contribute to the county's anti-poverty/prosperity system of care designed to assist low-income households to gain the skills necessary to achieve self-sufficiency and future prosperity, as well as address the root causes of societal poverty.

Services delivered through the SUNSS Anti-Poverty System using the Action for Prosperity program model, youth employment support services, low-income tax preparation services, and the county's Interfaith Initiative are funded in this offer.

Approximately 1,100 households receive assistance ranging in both length of service – immediate, short, and long-term - and in intensity of service provided.

### Program Description

Four core services - Basic Needs, Action for Prosperity, Housing, and System Collaboration - are delivered as part of the SUNSS Anti-Poverty System, a countywide integrated and coordinated system of care for school-age youth and their families. Services assist households seeking help and provide them with or make connections to meet their needs as they relate to food, housing, employment, and school success. Working with community-based providers and other stakeholders, services leverage funder investments to maximize resources, coordinate and link services to create efficiencies and improve outcomes, and ensure that quality and accountability is maintained throughout the System. 1,141 households were served last year.

In FY 10-11, 72% of the households served were at or below the Federal Poverty Level and 52% were headed by a single parent (48% were single female parents). 56% of the adults in households served identify themselves as ethnic minorities. By utilizing a multi-intervention approach targeted to a mix of needs, households become and remain stably housed.

25 low-income youth receive flexible client assistance funds to support their employment training activities.

Approximately 1,000 tax returns are prepared by IRS volunteers at no cost to the filing household. For every \$1 of general fund invested \$20 is returned to the household and spent in the local economy.

The Interfaith Initiative provides staffing and support to the Interfaith Council as well as small grants to faith communities seeking to partner with the county in the delivery of social services.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of households receiving case management	1,141	500	698	600
Outcome	% of households served that remain in permanent housing 6 months after exit	96.0%	85.0%	85.0%	85.0%

### Performance Measure - Description

Permanent housing is long-term community-based housing with attached appropriate support services, where an individual can stay without time limit.

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$141,104	\$40,002	\$158,041	\$30,000
Contracts	\$744,495	\$2,397,184	\$611,123	\$734,547
Materials & Supplies	\$17,819	\$0	\$4,547	\$0
Internal Services	\$21,094	\$118,418	\$20,100	\$30,954
<b>Total GF/non-GF:</b>	<b>\$924,512</b>	<b>\$2,555,604</b>	<b>\$793,811</b>	<b>\$795,501</b>
<b>Program Total:</b>	<b>\$3,480,116</b>		<b>\$1,589,312</b>	
<b>Program FTE</b>	1.60	0.40	1.70	0.30
<b>Program Revenues</b>				
Indirect for dep't Admin	\$58,985	\$0	\$16,614	\$0
Intergovernmental	\$0	\$2,555,604	\$0	\$720,258
<b>Total Revenue:</b>	<b>\$58,985</b>	<b>\$2,555,604</b>	<b>\$16,614</b>	<b>\$720,258</b>

**Explanation of Revenues**

\$720,258 - OHCSO - CSBG: Based on current grant award

\$793,811 - County General Fund

\$55,243 - County General Fund - Video Lottery

\$20,000 - One Time Only - County General Fund - Video Lottery

**Significant Program Changes** **Significantly Changed****Last year this program was:** #25139A, Anti-Poverty Services

FY 2012's Program Offer 25142-Family Economic Security, funding was moved to be included in this program offer and \$20,000 of One Time Only General funds was added for Low Income Residents Tax Preparation Assistance. Also, contracts were moved between program offers 25133, 25136, and 25139 during FY12 which resulted offer 25139 having an overall decrease in contracts.

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Action for Prosperity (AFP) is a proven program focused on low-income households who are ready and motivated to take action to increase their self-sufficiency and create future prosperity by participating in assertive engagement, training and employment, and housing stability services.

Utilizing ARRA funds, a partnership among Multnomah County, Work Systems, Inc., and Home Forward was developed in FY 09-10. Due to the success of the collaboration, an effort to refocus existing anti-poverty funds into alignment with the AFP model has occurred. The Oregon Department of Human Services has been added into the partnership.

This program offer requests on-going funding to continue to serve 50 African-American and Native American families working to reunite with their children in foster care. The Board of Commissioners funded these services with one-time-only funds and this program offer requests to transition these services to on-going funds. Funding leverages additional funding for housing and workforce development services.

### Program Description

Based in anti-poverty services currently provided within the SUNSS Anti-Poverty System, each partner has committed funding to provide services within their core mission and to align that funding with the other partners to provide AFP services across jurisdictions and organizational lines.

In addition, services work to address the over-representation of African-American and Native American children in the foster care system by working with their parents to obtain housing, stable employment and parenting skills.

Services include: Multnomah County – assertive engagement, flexible client assistance, support for employment liaison; Work Systems, Inc. – dedicated workforce development products, support for employment liaison; Home Forward – dedicated rent assistance; and Oregon Department of Human Services flexible client assistance.

In FY 10-11, 287 households were served with AFP. 87% of those served were unemployed and had an income at or below 125% of Federal Poverty Guidelines. 61% of those served exited to full or part-time employment within 12-18 months.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of households served	0	50	60	50
Outcome	% of households served with increased income at exit	0.0%	50.0%	75.0%	75.0%

### Performance Measure - Description

Fluctuation in numbers served reflects start-up funding and challenging conditions in which participating households find themselves, requiring additional assertive engagement capacity and thus lowering FTE ratios.

Legal/Contractual Obligation

N/A

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2012	2012	2013	2013
Contracts	\$0	\$0	\$195,000	\$0
Total GF/non-GF:	\$0	\$0	\$195,000	\$0
Program Total:	\$0		\$195,000	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

\$195,000 - County General Fund

Significant Program Changes

Last year this program was: #25139B, Action for Prosperity

**Lead Agency:** County Human Services

**Program Contact:** Mary Li

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Community Development administers public resources to expand affordable housing and infrastructure in low and moderate income communities through the federal Community Development Block Grant (CDBG), the Affordable Housing Development Program (AHDP), and the home improvement loan program.

It is a collaboration among DCHS, the cities of Gresham, Wood Village, Fairview, Troutdale, Maywood Park, Portland, and the community.

The program will potentially complete two public works projects and deed three properties for affordable housing development in the coming year.

### Program Description

Using a regional collaborative approach, an advisory board comprised of citizens living in East County cities outside of Portland and Gresham administers Community Development Block Grant funds targeted to neighborhood revitalization, public services, and housing rehabilitation in East County.

The Affordable Housing Development Program (AHDP) deeds county foreclosed properties to non-profit community development corporations for affordable housing development and manages an ongoing portfolio of approximately 450 units for program compliance and real estate transactions.

A no-cost home improvement loan program for fixed and low-income homeowners is maintained on behalf of the Portland Development Commission.

Federal and state funds improve the livability of existing low and moderate income housing and neighborhoods. Annually, 54% of funding for the homeless is directed to shelters and transitional housing, while only 12% supports permanent housing.

Studies conducted for the 10 Year Plan to End Homelessness make it clear that without abandoning people in need of immediate temporary housing, the county must devote greater resources to long-term solutions. Housing programs are designed to make investments in alignment with this policy direction.

Significant reductions in federal funding have deeply impacted program ability to deliver affordable housing units in the foreseeable future.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of public works projects completed	1	2	3	2
Outcome	# of affordable housing units preserved <sup>1</sup>	47	60	45	40

### Performance Measure - Description

<sup>1</sup>Preservation refers to units that are currently used for affordable housing purposes but are at risk of conversion to market rate housing, displacing low and fixed income residents. Lack of anticipated development and preservation funds have reduced the number of units able to be preserved.

**Legal/Contractual Obligation**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$54,494	\$45,043	\$61,646	\$39,776
Contracts	\$0	\$564,140	\$0	\$291,113
Materials & Supplies	\$2,551	\$0	\$0	\$1,766
Internal Services	\$10,547	\$15,698	\$3,565	\$18,929
Total GF/non-GF:	<b>\$67,592</b>	<b>\$624,881</b>	<b>\$65,211</b>	<b>\$351,584</b>
Program Total:	<b>\$692,473</b>		<b>\$416,795</b>	
Program FTE	0.55	0.45	0.61	0.39
<b>Program Revenues</b>				
Indirect for dep't Admin	\$7,722	\$0	\$5,765	\$0
Intergovernmental	\$0	\$580,881	\$0	\$289,584
Other / Miscellaneous	\$0	\$44,000	\$0	\$62,000
<b>Total Revenue:</b>	<b>\$7,722</b>	<b>\$624,881</b>	<b>\$5,765</b>	<b>\$351,584</b>

**Explanation of Revenues**

\$289,584 - Multnomah County HUD CDBG: Based on current grant award  
 \$62,000 - Loan Repays: Based on current year projected income and BWC  
 \$65,211 - County General Fund

**Significant Program Changes**

Last year this program was: #25140, Community Development

**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Administration

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The SUN Service System Division Administration (SUNSS) is responsible for management and oversight functions for the contracted and county-provided direct services through the SUNSS, as well as development and maintenance of partnerships with the system's stakeholders and sponsors. The 17 FTE in this Division provide direct services, manage contracts, provide technical assistance and training, monitor programs, oversee data collection and reporting, conduct program evaluation and coordinate service delivery associated with the SUN Service System and the Baltazar Ortiz Center. Programs operated through this division serve more than 82,000 people annually.

### Program Description

SUNSS administration staff has responsibility for leadership, partnership development, direct staff supervision and program oversight for the SUN Service System Division. Responsibilities include supporting the overall county policy promoting school age services, ensuring evidenced-based and high quality services by both county staff and contracted service providers, and maintaining communication internally and with the SUN Service System and partner communities. Oversight for contract management functions and ensuring that accurate data is collected and reported to stakeholders, contractors, the Board of County Commissioners and to funders are critical functions of administrative staff. Data collection, technical assistance, reporting to funders and program evaluation functions are implemented across both the SUNSS and the Community Services divisions of the department.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of times school district and System partners meet to align & monitor service	27	16	20	20
Outcome	% funder required reports completed and submitted on time	100.0%	100.0%	100.0%	100.0%

### Performance Measure - Description

Alignment and monitoring meetings include meetings of SUNSS Coordinating Council and its workgroups, the Every School a Community School workgroup, SUNSS Districts Council, and grant, policy and sustainability groups.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$762,499	\$0	\$765,133	\$0
Contracts	\$49,880	\$0	\$49,880	\$0
Materials & Supplies	\$22,332	\$0	\$23,670	\$0
Internal Services	\$79,983	\$0	\$99,689	\$0
Total GF/non-GF:	<b>\$914,694</b>	<b>\$0</b>	<b>\$938,372</b>	<b>\$0</b>
Program Total:	<b>\$914,694</b>		<b>\$938,372</b>	
Program FTE	7.53	0.00	7.32	0.00
<b>Program Revenues</b>				
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$938,372 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25143, SUN Service System Administration

Moved 0.09 FTE-Data Analyst Senior and 0.05 FTE-Research Evaluation Analyst Sr from Program Offer 25143-SUN Service System Administration to Program Offer 25145A-SUN Community Schools; Reduced 0.07 FTE-Program Specialist for a net decrease of 0.21 FTE.



**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating

**Related Programs:** 25145B

**Program Characteristics:**

**Executive Summary**

SUN Community Schools (SUN CS) provide school-based educational, recreational, social and health services focusing on school-age children at risk of academic failure and their families. The 47 county-supported full-service sites in this offer serve approximately 15,500 students, 80% of whom receive free or reduced lunch. SUN's nationally award-winning program removes barriers for students and families so that they can achieve educational success and lifelong self-sufficiency. Last year, participants had a 95% school attendance rate and 80% improved academic benchmark scores in reading and 81% in math. SUN CS is part of the SUN Service System, a countywide integrated and coordinated system of care for school-aged youth and their families.

**Program Description**

SUN CS is a jointly owned collaboration of the City of Portland, 6 school districts, non-profits, the state and Multnomah County. The SUN partnership leverages significant contributions including an estimated \$2.8 million in cash from the city and districts, over \$10 million in supplemental services, and over \$6 million in in-kind resources. In total, the partnership supports 64 total SUN CS sites countywide, having expanded by 4 last year due to contributions by partners.

SUN Community Schools in this offer provide 15,500 youth with a comprehensive array of social and support services that allow students to come to school ready to learn and succeed academically and that foster family success. Services are developmentally appropriate and operate year-round at elementary, middle and high schools. They include: 1) social and health services to meet basic needs; 2) out-of-school-time activities: a broad range of academic support, enrichment, social and behavioral skill development, recreation and adult education; 3) family engagement: support and education for family members so they can prepare children for school and have positive involvement with schools; 4) community and business involvement; and 5) service integration: oversight and coordination of a comprehensive, accessible system of services. SUN Community Schools focus on prevention and also provide significant intervention services, working to reduce poverty and other high-cost service needs in the future. SUN CS is a national model that utilizes best practices and tailors services to the specific needs of local neighborhoods and schools.

Research demonstrates that SUN CS are effective in improving student academic success and attendance, as well as engagement, pro-social behaviors and other skills that lead to life success. Outcomes are measured on regularly attending students, approx. 7,500 youth annually. SUN CS participants exceed outcome targets and overall perform better than state expectations. SUN CS serve the neediest children, targeting those living in poverty and performing below standards. 70% are racial/ethnic minorities, 21% are English Language Learners and 80% receive free or reduced lunch (compared to 46%, 14% and 54% respectively in school districts).

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number of children (ages 5-18) served <sup>1</sup>	15,559	9,200	10,000	10,000
Outcome	% who improve state test scores in Reading <sup>2</sup>	80.0%	75.0%	75.0%	75.0%
Outcome	% of school days attended <sup>2</sup>	95.0%	92.0%	92.0%	92.0%
Outcome	% who improved classroom behavior <sup>2</sup>	55.0%	75.0%	65.0%	65.0%

**Performance Measure - Description**

<sup>1</sup> Outputs reflect the annual number served. Over-performance by contractors is not projected.

<sup>2</sup> Outcomes are analyzed for students who participate for 30 days or more, a federally accepted threshold; 7,385 children participated at this level last year. 92% attendance rate is considered Annual Yearly Progress as defined by No Child Left Behind.

## Legal/Contractual Obligation

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$109,821	\$111,530	\$122,411	\$153,753
Contracts	\$3,220,435	\$400,460	\$3,299,182	\$886,096
Materials & Supplies	\$19,088	\$14,429	\$9,102	\$2,324
Internal Services	\$13,654	\$24,025	\$37,033	\$7,648
Total GF/non-GF:	<b>\$3,362,998</b>	<b>\$550,444</b>	<b>\$3,467,728</b>	<b>\$1,049,821</b>
Program Total:	<b>\$3,913,442</b>		<b>\$4,517,549</b>	
Program FTE	1.04	1.30	1.25	0.73
<b>Program Revenues</b>				
Indirect for dep't Admin	\$4,107	\$0	\$1,993	\$0
Fees, Permits & Charges	\$0	\$88,001	\$0	\$0
Intergovernmental	\$0	\$462,443	\$0	\$964,130
Other / Miscellaneous	\$0	\$0	\$0	\$85,691
<b>Total Revenue:</b>	<b>\$4,107</b>	<b>\$550,444</b>	<b>\$1,993</b>	<b>\$1,049,821</b>

## Explanation of Revenues

\$222,010 - City of PDX Parks & Rec: Based on FY12 revised budget  
 \$82,691 - Institute for Education Leadership: Based on FY12 revised budget  
 \$25,000 - Gresham-Barlow School District: Based on FY12 revised budget  
 \$31,000 - David Douglas School District: Based on FY12 revised budget  
 \$120,000 - Reynolds School District: Based on FY12 revised budget  
 \$10,000 - Kellogg Funding: Based on FY12 revised budget  
 \$71,120 - Stuart Funding: Based on FY12 revised budget  
 \$100,000 - COP Mayor's Office: Based on FY12 revised budget  
 \$145,000 - Portland Public School Attendance Effort: Based on FY12 revised budget  
 \$240,000 - Portland Public School Commission School Support: Based on FY12 revised budget  
 \$3000 - Federal State Fund Begging Working Capital: Based on FY12 revised budget  
 \$3,467,728 - County General Fund

## Significant Program Changes

**Last year this program was:** #25145A, SUN Community Schools

Moved 0.09 FTE-Data Analyst Senior and 0.05 FTE-Research Evaluation Analyst Sr from Program Offer 25143-SUN Service System Administration to Program Offer 25145A-SUN Community Schools; Reduced 0.75 FTE-Health Educator from the overall FTE count per FY13 budget policy for accounting for Limited Duration FTE, for a net decrease of 0.36 FTE.

**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Innovative/New Program

**Related Programs:** 25145A

**Program Characteristics:**

### Executive Summary

This program offer seeks CGF to create three new SUN Community Schools (SUN CS) in high poverty priority neighborhoods in Reynolds, Parkrose and Gresham Barlow School Districts. The 3 schools are Wilkes Elementary in Reynolds, Prescott Elementary in Parkrose and Highland Elementary in Gresham Barlow. This offer represents a collaborative effort to fund three of the highest poverty schools in the county that don't have SUN CS supports. The districts are investing \$144,000 in these sites, leveraging a county matching investment of \$144,000.

SUN CS provide critical educational, social and health supports to students at risk of dropping out and their families. This program will serve 600 students and 150 adults intensively and touch thousands of other youth and family members. SUN's nationally award-winning program removes barriers for students and families so that they can achieve educational success and lifelong self-sufficiency. Last year, participants had a 95% school attendance rate and 80% improved academic benchmark scores in reading and 81% in math.

### Program Description

These new SUN CS sites will provide 600 youth and 150 adults with a comprehensive array of social and support services that allow students to come to school ready to learn and succeed academically, and foster families' stability and success. Services are developmentally appropriate and operate year-round. They include: 1) social and health services to meet basic needs; 2) out-of-school-time activities: a broad range of academic support, enrichment, social and behavioral skill development, recreation and adult education; 3) family engagement: support and education for family members so they can prepare children for school and have positive involvement with schools; 4) community and business involvement; and 5) service integration: oversight and coordination of a comprehensive, accessible system of services. SUN Community Schools focus on prevention and also provide significant intervention services, working to reduce poverty and other high-cost service needs in the future. SUN CS is a national model, that utilizes best practices and tailors services to the specific needs of local neighborhoods and schools.

Wilkes, Prescott and Highland schools are ranked in the highest tiers of the SUN poverty index, with Free and Reduced lunch rates of 85%, 82% and 80% respectively. The populations they serve are highly racially and culturally diverse and experience significant inequities in education, health and other outcomes. Developing these CS site addresses an equity issue in distribution of SUN CS locations by increasing the # of sites located outside of Portland Public Schools, where poverty rates have been skyrocketing in the last decade.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of children (ages 5 to 18) served	0	0	0	600
Outcome	% who improve state test scores in Reading	0.0%	0.0%	0.0%	75.0%
Outcome	% of school days attended	0.0%	0.0%	0.0%	92.0%

### Performance Measure - Description

<sup>1</sup> Outputs reflect the annual number served.

<sup>2</sup> Outcomes are analyzed for students who participate for 30 days or more, a federally accepted threshold; 92% attendance rate is considered Annual Yearly Progress as defined by No Child Left Behind.

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2012	2012	2013	2013
Contracts	\$0	\$0	\$144,000	\$0
Total GF/non-GF:	\$0	\$0	\$144,000	\$0
Program Total:	\$0		\$144,000	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

\$144,000 - County General Fund

Significant Program Changes

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Child & Family Hunger Relief program lessens food insecurity and improves healthy eating by allowing SUN Community School (SUN CS) sites to increase the number of meals served to hungry children and families and develop on-going capacity to address family emergency food needs. The program will serve an additional 170,000 meals to children and family members in 11 SUN CS communities. The program is a partnership between the SUN Service System, Oregon Food Bank, six school districts, and Partners for a Hunger Free Oregon. The county investment leverages significant federal USDA federal funding through school districts and food through the Oregon Food Bank.

### Program Description

Oregon is currently ranked #2 in hunger, yet millions of dollars in available federal food funding for children goes untapped. 52% of children in the county are eligible for Free or Reduced (FRL) price meals through schools and 80% of SUN CS participants receive FRL. However, these students don't have access to food on non-school days and in summer only 31% of the students who eat FRL meals during the school year are fed. Parents/guardians of these students also suffer the effects of poverty including hunger, often foregoing regular meals so their children can eat.

The SUN CSs are designed to act as a vehicle for delivering services to children and families in an easily accessible and non-stigmatizing environment. This offer capitalizes on SUN's community-based capacity by 1)sustaining on-going capacity and relationships for weekend food distribution through 6 school-based emergency food pantries across the County and 2)increasing the number of meals served to hungry children and their families during summer. The offer supports staffing at 17 SUN CS during the summer to serve meals for 8-11 weeks in under-served communities in Mid and East County. In Summer 2011, this capacity provided 66,000 meals that wouldn't otherwise have been possible. In addition to providing support for weekend food pantries at 6 SUN CS sites, the project will continue development of ongoing partnerships and resources for weekend food in partnership with Oregon Food Bank. A .5 FTE Program Development Specialist coordinates the project, provides technical assistance to community partners, develops partnerships and secures in-kind resources and supports.

Experts agree that healthy nutrition is vital to brain development and capacity to learn for children and youth in all age groups. Even moderate under-nutrition has lasting impacts on cognitive development and school performance. This offer leverages over \$450,000 in federal meal reimbursement and significant in-kind support for weekend food for families from Oregon Food Bank and community donors, particularly faith and business partners.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of meals served to children and families <sup>1</sup>	0	110,000	220,000	170,000
Outcome	Retail \$ equivalent for every \$1 CGF invested in pantries <sup>2</sup>	6	6	6	6

### Performance Measure - Description

✓ **Measure Changed**

<sup>1</sup> # of meals includes meals served through extended weeks of summer meals program and emergency pantries providing weekend meals to families.

<sup>2</sup> Outcome measure changed from FY12 to reflect actual program components and effects (original measure was for programs that were not implemented due to lack of grant funding).

**Legal/Contractual Obligation****Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$34,536	\$34,535	\$43,993	\$0
Contracts	\$85,857	\$21,912	\$69,872	\$0
Materials & Supplies	\$2,366	\$942	\$3,889	\$0
Internal Services	\$2,241	\$8,611	\$7,246	\$0
Total GF/non-GF:	<b>\$125,000</b>	<b>\$66,000</b>	<b>\$125,000</b>	<b>\$0</b>
Program Total:	<b>\$191,000</b>		<b>\$125,000</b>	
Program FTE	0.40	0.40	0.50	0.00
<b>Program Revenues</b>				
Indirect for dep't Admin	\$692	\$0	\$0	\$0
Intergovernmental	\$0	\$23,000	\$0	\$0
Other / Miscellaneous	\$0	\$43,000	\$0	\$0
<b>Total Revenue:</b>	<b>\$692</b>	<b>\$66,000</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$125,000 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25147, Child and Family Hunger Relief  
Reduced 0.30 FTE - Program Specialist.

**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Social and Support Services for Educational Success program (SSSES) fosters academic achievement by providing year-round, school-linked, age-appropriate and culturally-specific academic support, case management, family engagement, and skill building groups. In 2011, SSSES served over 1,900 high-risk youth, 90% of whom identify as ethnic minorities; 75% of them participated in Free or Reduced Lunch meals. SSSES is part of the SUN Service System, a countywide integrated and coordinated system of care for school-aged youth and their families.

### Program Description

Social and Support Services for Educational Success provides services for 1,905 high-risk youth (ages 6-17) and their families to help ensure that youth remain in or return to school. These services are delivered at community and school sites to youth attending regular and/or alternative schools who are at risk of academic failure. SSSES targets six specific populations of youth and families of color: African American, African Immigrant, Asian Pacific Islander, Latino, Native American and Slavic. Key services include: case management with a focus on academic and life goals; advocacy in disciplinary and educational meetings; skill-building groups; academic support activities such as tutoring, mentoring, reading club, gender-specific groups, and conflict resolution classes; and parent outreach/engagement. SSSES staff work in collaboration with SUN Community Schools and other school personnel towards youth and family success.

Youth who participate in the SSSES program are at risk for academic failure due to poor attendance, failing grades, language barriers, family instability and behavior issues. Case managers support and mentor youth, allowing them to build personal assets leading to school and life success. SSSES staff engages youth at risk for academic failure in a variety of school and community activities. SSSES services that meet basic needs allow youth to focus on school and provides their caregivers with the resources to support educational success. In 2011, youth in the SSSES program showed improvements in school attendance and gained enough credits to be on track to graduate; in addition, 86% of 9th, 10th and 11th grade SSSES youth returned for their next year of high school. Increased access to social services and additional learning opportunities outside of, but connected to the classroom, are promising practices for reducing the achievement gap. SSSES provides this link - in schools and in the community.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of students (ages 6-18) served	1,905	1,735	1,735	1,700
Outcome	% who improve state test scores in reading	78.0%	75.0%	75.0%	75.0%

### Performance Measure - Description

Outcomes are analyzed for students who participate in case management for 45 days or more with at least 15 hours of service; 1,094 youth participated at this level last year. Output for FY13 reflects a 2% reduction proposed by the Commission on Children, Families & Community.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$98,917	\$0	\$98,941	\$0
Contracts	\$1,796,644	\$326,264	\$1,841,555	\$311,871
Materials & Supplies	\$2,992	\$0	\$3,715	\$0
Internal Services	\$12,171	\$0	\$13,656	\$0
Total GF/non-GF:	<b>\$1,910,724</b>	<b>\$326,264</b>	<b>\$1,957,867</b>	<b>\$311,871</b>
Program Total:	<b>\$2,236,988</b>		<b>\$2,269,738</b>	
Program FTE	1.00	0.00	1.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$326,264	\$0	\$311,871
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$326,264</b>	<b>\$0</b>	<b>\$311,871</b>

**Explanation of Revenues**

\$311,871 - Oregon Commission on Children, Families, and Community - Youth Investment: Based on FY12 revised budget  
 \$1,957,867 - County General Fund

**Significant Program Changes**

**Last year this program was:** #25149, Social and Support Services for Education Success



**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating

**Related Programs:**

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

### Executive Summary

Parent Child Development Services (PCDS) provides services for young children (birth through age 5) and their parents to promote positive parenting, healthy child development and school readiness. In FY 2011, the program served 859 children in 593 families. PCDS uses a nationally recognized evidence-based curriculum, Parents As Teachers (PAT). This program aligns with the Early Childhood Framework and is part of the SUN Service System, a countywide integrated and coordinated system of care for school-aged youth and their families.

### Program Description

PCDS creates opportunities for parents to interact with their children in mentored settings with child development specialists. In these settings they are able to build on healthy and age appropriate parenting skills, manage challenging behavior, and learn new ways to support their children and promote school readiness. In addition, PCDS staff broker and refer families for other necessary social support services. This program is critical for families who do not have other such opportunities and who are struggling to meet basic needs.

Specific services include: age appropriate parent-child play groups, parenting education and support services, developmental screening, immunization status checks and follow up, and access to other social and health services. The Ages and Stages child development screening tool is used to determine developmental stage. Children not meeting the relevant stage for their age are referred for early childhood intervention services.

PCDS services are delivered in community and school settings: siting groups in schools helps break down barriers many families have about simply going into school buildings. Services are developmentally and culturally appropriate. The Parents As Teachers curriculum is used as the foundation for intervention with families: the outcomes for participating families are strong. Last year, at the time of exit from the program 90% of children served had up-to-date immunizations and 95% were within a normal developmental stage. Nearly all of the parents (98%) indicated they gained new skills from program participation. Our local results mirror national research showing that involvement in PAT programs increases children's readiness for school.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number of children served	859	792	792	792
Outcome	% of children up to date on immunizations at exit	92.0%	95.0%	95.0%	95.0%

### Performance Measure - Description

**Legal/Contractual Obligation****Revenue/Expense Detail**

	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>	<b>Proposed General Fund</b>	<b>Proposed Other Funds</b>
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$98,917	\$0	\$98,940	\$0
Contracts	\$1,182,782	\$147,961	\$1,297,692	\$94,044
Materials & Supplies	\$3,052	\$0	\$4,148	\$0
Internal Services	\$12,171	\$0	\$13,656	\$0
Total GF/non-GF:	<b>\$1,296,922</b>	<b>\$147,961</b>	<b>\$1,414,436</b>	<b>\$94,044</b>
Program Total:	<b>\$1,444,883</b>		<b>\$1,508,480</b>	
Program FTE	1.00	0.00	1.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$147,961	\$0	\$94,044
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$147,961</b>	<b>\$0</b>	<b>\$94,044</b>

**Explanation of Revenues**

\$94,044 – Oregon Commission on Children, Families, and Community - Great Start: Based on FY11 revised budget  
 \$1,414,436 – County General Fund

**Significant Program Changes**

**Last year this program was:** #25151A, Parent Child Development Services  
 Approximately \$46,000 of County General Funds were added to this program offer to offset reductions in CCCF funding.

**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Innovative/New Program

**Related Programs:**

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

### Executive Summary

This innovative project provides expansion into East Multnomah County for parent education for African American families, leading to family security and student success.

### Program Description

This this culturally specific program focused on African American parents in east Multnomah County, in response to the growing African American population in that area, and the lack of culturally specific services. This program provides parent training, informational meetings and support groups to assist parents in providing safety, security and support to their children, leading to increased parent participation in the growth and development of their children. Parents have the opportunity to take part in leadership development and learn navigation tools to ensure better advocacy for their children in school and around the bordering community. By creating a safe place for parents and their children to interact and learn about healthy parenting, the project improves academic and life outcomes - for children and their parents. This program will hold an annual meeting for African American parents in order to share resources, gain practical training and to build community.

The County investment in this project leverages \$25,000 in funding from three east Multnomah County school districts to support this program expansion.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# families attending annual parent meeting	0	0	0	200
Outcome	% of parents who increase engagement in their child's education	0.0%	0.0%	0.0%	75.0%

### Performance Measure - Description

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2012	2012	2013	2013
Contracts	\$0	\$0	\$50,000	\$0
Total GF/non-GF:	\$0	\$0	\$50,000	\$0
Program Total:	\$0		\$50,000	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

County General Fund - \$50,000

Significant Program Changes

Last year this program was:

**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Alcohol, Tobacco and other Drug (ATOD) program provides evidenced-based prevention services to youth aged 12-17 and their families. Services focus on middle and high school students in SUN Community Schools. This program is part of the SUN Service System, a countywide integrated and coordinated system of care for school-aged youth and their families.

### Program Description

Prevention activities in this program use the Strengthening Families curriculum in school sites for students 10-14 years old and their families. This 7-week evidenced-based curriculum is designed to prevent or reduce adolescent substance use and other problematic behaviors in youth. Strengthening Families is, by design, a highly interactive video-based intervention designed to improve parenting skills, build life skills in youth and strengthen family bonds.

By preventing ATOD use and misuse the program helps youth remain in school, increasing the likelihood they will be successful academically and, ultimately, have a healthy and self-sufficient adulthood. Research indicates that the more successful a young person is in school, the less likely he/she is to use, abuse or become dependent on ATOD. This program targets youth in middle school to avoid long-term use and the need for more costly interventions.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number of youth served <sup>1</sup>	400	400	409	0
Outcome	% of youth surveyed who report improvement in 4 or more areas in the survey	0.0%	75.0%	75.0%	75.0%
Output	Number of families who participate in Strengthening Families	0	0	120	120

### Performance Measure - Description

✓ **Measure Changed**

<sup>1</sup> In FY13 the program model will be focused on prevention using the Strengthening Families curriculum, in which services engage families. Therefore the output has changed to reflect this shift. The previous output is being phased out.

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2012	2012	2013	2013
Contracts	\$203,000	\$0	\$127,890	\$0
Total GF/non-GF:	\$203,000	\$0	\$127,890	\$0
Program Total:	\$203,000		\$127,890	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

\$127,890 - County General Fund

Significant Program Changes

✔ Significantly Changed

Last year this program was: #25154, Alcohol, Tobacco and Other Drug Services  
Reduction in contracted services, see narrative above.

**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

The Sexual Minority Youth Services (SMYS) program offers counseling, skill building and support services to over 800 sexual minority youth. Its direct service impact is enhanced through technical assistance and training to approximately 500 SUN Service System, school and other direct service staff so that they may work more effectively with sexual minority youth. SMYS is part of the SUN Service System, a countywide integrated and coordinated system of care for school-aged youth and their families.

### Program Description

The SMYS program utilizes two primary strategies: 1) providing direct services and a safe place in which sexual minority youth can feel comfortable and participate in supportive services that reflect their unique needs (70% of the program); and 2) enhancing the understanding and skill levels of community providers to provide competent and relevant services to sexual minority youth (30% of the program).

Due to difficulties with family, peers and the broader community, sexual minority youth often experience isolation and stigmatization, resulting in higher rates of emotional distress, homelessness, school drop outs, suicide attempts, risky sexual behavior and substance abuse. This program provides a safe place for over 800 youth to go for support and services that are culturally relevant and responsive; it directly supports the operation and service delivery at the Sexual Minority Youth Resource Center. The program fosters increased school retention and success; last year 92% of youth served re-enrolled or remained in school. In addition to the direct service impact, nearly 97% of training participants reported an increased knowledge of SMY issues and competency in serving these youth.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number of youth served in counseling and Resource Center services <sup>1</sup>	561	300	300	300
Outcome	% of youth accessing services at the SMYRC who remain in or re-enroll in school	87.0%	90.0%	90.0%	90.0%

### Performance Measure - Description

<sup>1</sup> Overperformance of target number due to high volume of youth who drop into the SMYRC, and contractor reports all of them to us, not just the amount we purchase.

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2012	2012	2013	2013
Contracts	\$106,940	\$0	\$109,614	\$0
Total GF/non-GF:	\$106,940	\$0	\$109,614	\$0
Program Total:	\$106,940		\$109,614	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

\$109,614 - County General Fund

Significant Program Changes

Last year this program was: #25155, Services for Sexual Minority Youth



**Lead Agency:** County Human Services

**Program Contact:** Peggy Samolinski

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Bienestar de La Familia (Well-being of the Family) Social Services provides culturally specific and linguistically appropriate service to the growing Latino community of Multnomah County. the 4.4 FTE direct service staff provide case management, information and referral, service linkage, coordination, mental health assessment & counseling, alcohol and drug prevention and resource recruitment to address the needs of the Latino community.

### Program Description

Bienestar is unique because it provides immediate & multi-entry access to a wide range of basic services. Families experiencing complex, single or multiple issues that affect their ability to attain or maintain school success, healthy family functioning and self sufficiency receive solution focused intervention with some or all of these services: individual and family case management, service coordination, mental health supports (individual or group) and crisis intervention. These services ensure that basic needs are met for food, stable housing, energy assistance, parenting skills, employment, school completion, clothing, good physical and mental health.

The Bienestar team functions as a multi-disciplinary team with members from mental health/addictions, healthcare services (at the on-site health clinic) and our community partner, Hacienda CDC. The primary mission is to serve the Latino community. Due to increased demand and changing demographics in the surrounding community, the program recruits providers to serve the Somali community, Russian speaking families, and other diverse groups residing in the nearby housing complex and neighborhood who also seek Bienestar's services. The intent is that an array of culturally specific services be available on site.

The monthly Mercado (store) and food donation programs, provided on site, serve over 1,500 residents, immigrants and refugees a year. The anti-poverty programs promote self sufficiency through links with job training, energy assistance, housing and school support services. The program also initiates consultation and coordination efforts with other providers to build cultural competency among them and leads efforts to create community solutions.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Number of households served <sup>1</sup>	478	100	550	550
Outcome	Percentage of families whose needs were met	68.0%	75.0%	70.0%	75.0%
Output	Number of families who receive food to meet basic needs	1,879	1,825	1,825	1,870

### Performance Measure - Description

<sup>1</sup> Numbers served were underestimated for the current year due to a shift in the program model. Estimates for FY13 include the number served by additional FTE. Better recording of households and services has improved for this and subsequent years.

**Legal/Contractual Obligation****Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$599,072	\$0	\$551,513	\$0
Materials & Supplies	\$28,113	\$0	\$19,051	\$0
Internal Services	\$102,534	\$0	\$72,460	\$0
Total GF/non-GF:	<b>\$729,719</b>	<b>\$0</b>	<b>\$643,024</b>	<b>\$0</b>
Program Total:	<b>\$729,719</b>		<b>\$643,024</b>	
Program FTE	3.80	0.00	5.40	0.00
<b>Program Revenues</b>				
Total Revenue:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

\$643,024 - County General Fund

**Significant Program Changes**

✔ **Significantly Changed**

**Last year this program was:** #25156A, Bienestar Social Services

Program offer includes funding and services for 1.6 FTE transferred from the Mental Health and Addiction Division FY 2012's Program Offer 25070-Bienestar Mental Health and Addiciton Services.