

# Program #40050C - Corrections Health MCDC Housing Floors 5, 6, 7 & 8

4/21/2021

**Department:** Health Department **Program Contact:** Michael Seale

Program Offer Type: Existing Operating Program Program Offer Stage: As Proposed

Related Programs:

**Program Characteristics:** 

#### **Executive Summary**

Corrections Health, Multnomah County Detention Center houses 448 adults and is composed of booking, 4th floor special housing, mental health housing and three floors of discipline and evaluation housing. Approximately 100 US Marshall (USM) detainees are housed in the system daily. Over 36,000 individuals are cared for each year with over 50% having serious unstable and chronic health conditions, such as diabetes, kidney failure, infections, alcohol and drug withdrawal, and major mental/behavioral illnesses

# **Program Summary**

The core responsibility of Corrections Health is to provide a constitutional and community level of health care (medical, mental health and dental) to the individuals entrusted to our care while incarcerated in the adult detention facilities or the Donald E. Long Detention Center. That care is delivered to a population disproportionately involved in the justice system. As health risk and diseases rarely impact all communities equally, the work of Corrections Health addresses the groups disparately impacted. Recruitment and hiring practices have been refined to promote a workforce that more closely resembles the demographics of the population we serve. Further efforts will be made in FY22 to evaluate policies, procedures and practices to ensure that an equity approach is used whenever possible while maintaining appropriate access to essential care.

This offer represents the health services to all four housing floors at MCDC. Approximately 400 detainees are housed in classification (new jail housing), female, male, close custody and mental health housing modules. Ninety-six rooms are designated for those with mental health diagnosis and cared for by a team of mental health nurses, consultants and providers for diagnosis and treatment. Early identification, evaluation and treatment provide safety for clients, especially for suicide prevention. A variety of treatments, such as managing alcohol and drug withdrawal, evaluating chronic diseases, preventing the spread of communicable diseases, medication management and emergency response are provided efficiently by 24/7 staff. This health care is delivered effectively through providing the right care in the right setting. Expansion of the use of Medication Assisted Treatment using buprenorphine has allowed for more effective, efficient and humane management of withdrawal from opiates. Per protocols, buprenorphine is provided to all opiate-involved pregnant women, detainees with documented use of buprenorphine in a community program and detainees undergoing severe opiate withdrawal.

Performance Measures									
Measure Type	Primary Measure	FY20 Actual	FY21 Budgeted	FY21 Estimate	FY22 Offer				
Output	Average # AIC nursing assessments monthly	1,000	1,000	700	700				
Outcome	Average active and constant suicide watches per month to prevent AIC injury or death	100	125	100	100				

#### **Performance Measures Descriptions**

Measure 1:Reflects care delivered on all floors in MCDC and includes both medical and mental health requests.

Measure 2: Tracking both "ACTIVE" and "CONSTANT" suicide watches, captures management of detainees felt to be at risk, better reflecting resource needs

### **Legal / Contractual Obligation**

Necessary health care for incarcerated individuals is a right because they do not have the freedom to obtain care on their own. Appropriate access to care and timely evaluation by a health professional is mandated by the 4th, 8th and 14th amendments. When serious health needs are not adequately addressed by professionals, that deliberate indifference to medical needs may bring harm to individuals entrusted to our care and increase liability for the County. Corrections Health is bound by ethical standards to provide unbiased care to all individuals based on community standards of care.

### Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2021	2021	2022	2022
Personnel	\$2,730,766	\$0	\$2,404,987	\$0
Contractual Services	\$332,790	\$0	\$376,748	\$0
Materials & Supplies	\$3,694	\$0	\$7,681	\$0
Internal Services	\$251,199	\$0	\$267,461	\$0
Total GF/non-GF	\$3,318,449	\$0	\$3,056,877	\$0
Program Total:	\$3,318,449		\$3,056,877	
Program FTE	17.50	0.00	13.60	0.00

Program Revenues							
Total Revenue	\$0	\$0	\$0	\$0			

#### **Explanation of Revenues**

As a result of the current laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from Medicare and Medicaid. These rules and laws are under review nationally to determine if additional revenue sources can be made available to jails. Provider assessments, treatments, screenings, diagnostic tests and communicable diseases tests are performed at no charge. Medications are provided at no charge. Necessary clinical care is provided regardless of the detainee's ability to pay.

#### **Significant Program Changes**

Last Year this program was: FY 2021: 40050C Corrections Health MCDC Housing Floors 5, 6, 7 & 8

Significant changes for FY22 in Program Offers 40050A, 40050B & 40050C:

Given a general reduction in client population, a reduction in personnel could be attained in FY 2022 without impacting clinical quantity or quality provided to the adults in custody at MCDC. Reductions across all three program offers above include; 1.00 MA FTE, .9 LPN FTE, .1 CNA FTE and 3.8 CHN FTE.

The other significant change in this offer is to reduce the FTE of the current Deputy Medical Director who is also concurrently serving as the Director of Corrections Health, so that administrative and leadership adjustments can be made within the Division to allow for greater leadership opportunities within the Division, to enhance opportunities for greater leadership equity and to promote adequate succession planning. The Deputy Director FTE is reduced from 1.0 FTE to 0.80 FTE.