



Multnomah County Agenda Placement Request Budget Modification

(Revised 9/23/13)

Contingency Request

APPROVED: MULTNOMAH COUNTY
BOARD OF COMMISSIONERS

AGENDA # R.6 DATE 5/18/17
MARINA BAKER, ASST BOARD CLERK

Board Clerk Use Only

Meeting Date: 5/18/17
Agenda Item #: R.6
Est. Start Time: 10:40 am
Date Submitted: 5/4/17

Agenda Title: BUDGET MODIFICATION # HD-44-17: Requesting General Fund contingency transfer to appropriate \$302,000 in Mental Health

Requested Meeting Date: May 18, 2017

Time Needed: 5 minutes

Department: 40 - Health Department

Division: Mental Health & Addiction

Contact(s): Angel Landron-Gonzalez

Phone: 503-988-7438

Ext. 87438

I/O Address 167/2/210

Presenter Name(s) & Title(s): Neal Rotman, Senior Manager, MHASD

General Information

1. What action are you requesting from the Board?

Approval to appropriate \$302,000 in General Fund contingency revenue for the Behavioral Health Crisis Services program.

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

In the FY2017 Adopted Budget, the Board of County Commissioners placed in contingency \$629,532 in General Fund for the Behavioral Health Crisis system (see Budget Director's Message Budget Notes p.36). The contingency was set aside to provide a bridge in crisis service funding, until the impact of the Unity Center was fully realized. The Health Department is making this contingency request, which will increase the Mental Health and Addition Services FY2017 general fund budget by \$302,000 to cover pass-through expenditures in the crisis services program. The contingency money will be used to improve recruitment and retention of contracted staff providing critical crisis services by increasing the pay scale in targeted clinical service delivery classifications.

Mobile Crisis Outreach provides in-the-field crisis assessment to individuals and families within the county experiencing a mental health emergency. The service is dispatched through the County Mental Health Call Center and local law enforcement agencies when it is determined that a professional mental health assessment and support is needed. The Urgent Walk-In Clinic provides

appropriate care for individuals who are experiencing a behavioral health crisis. Services offered to individuals are selected based on clinical need, and may include counseling, medication prescribing, referrals to affordable mental health, medical, and substance treatment, and referrals to other community resources. All who seek help at the Urgent Walk-In Clinic (UWIC) are provided a behavioral health crisis assessment by a trained mental health clinician. At minimum, this assessment includes evaluation of risk and level of functioning. Both Mobile Crisis Outreach services and the Urgent Walk-In Clinic are available to all Multnomah County residents regardless of insurance, age or income.

Contracted crisis service providers reached a critical level of resignations mid-year in 2016 after neighboring jurisdictions and other agencies started offering higher salaries for similar work. Mobile Crisis Outreach services and the Urgent Walk-In Clinic were specifically impacted. In order to keep this workforce intact and maintain continuity of services in our community, the contracted crisis service provider increased the pay scale in certain classifications to promote retention. The requested contingency funding will reimburse the contracted service provider for those unanticipated additional costs associated with the necessary pay increases.

These changes will impact program offer 40069: Behavioral Health Crisis Services.

3. Explain the fiscal impact (current year and ongoing).

This change will increase the Health Department General Fund budget in FY17 by \$302,000.

4. Explain any legal and/or policy issues involved.

N/A

5. Explain any citizen or other government participation.

N/A

Budget Modification

6. What revenue is being changed and why? If the revenue is from a federal source, please list the Catalog of Federal Assistance Number (CFDA).

County contingency funds will be transferred to the Health Department which will increase the department's FY 2017 general fund by \$302,000. Funds will be used to support the Behavioral Health Crisis Services program.

7. What budgets are increased/decreased?

The Health Department's pass-through budget will increase by \$302,000.

8. What do the changes accomplish?

To provide behavioral health emergency crisis response 24-hours-a-day, 365-days-a-year.

9. Do any personnel actions result from this budget modification?

N/A

10. If a grant, is 100% of the central and department indirect recovered? If not, please explain why.

N/A

11. Is the revenue one-time-only in nature? Will the function be ongoing? What plans are in place to identify a sufficient ongoing funding stream?

This contingency transfer action is one-time-only; however the expense is on-going.

12. If a grant, what period does the grant cover? When the grant expires, what are funding plans? Are there any particular stipulations required by the grant (e.g. cash match, in kind match, reporting requirements, etc)?

The Health Department's FY2018 includes the ongoing higher salary costs for contracted crisis service providers.

For Contingency Requests Only:

13. Why was the expenditure not included in the annual budget process?

Crisis service providers reached a critical level of resignations mid-year 2016 after other jurisdictions and agencies started offering higher salaries for similar work. It became essential to remain wage competitive to keep the Multnomah County crisis system intact.

14. What efforts have been made to identify funds from other sources within the department/agency to cover this expenditure?

The Behavioral Health division is using \$200,000 in State funding to partially offset the total expense, reducing the general fund need to \$302,000.

15. Why are no other department/agency fund sources available?

N/A

16. Describe any new revenue this expenditure will produce, any cost savings that will result, and any anticipated payback to the contingency account. What are the plans for future ongoing funding?

The FY2018 budget includes higher salary costs for our Crisis System community providers and the revenue to sustain this increase.

17. Has this request been made before? When? What was the outcome?

No

NOTE: If a Budget Modification or a Contingency Request attach a Budget Modification Expense and Revenues Worksheet and/or a Budget Modification Personnel Worksheet

Required Signature

**Elected Official or
Dept. Director:** Joanne Fuller/s/**Date:** May 4, 2017**Budget Analyst:** Jeff Renfro/s/**Date:** May 3, 2017**Department HR:** N/A**Date:** N/A**Countywide HR:** N/A**Date:** N/A

Exp/Rev/FTE - Budget Modification

Budget Year: 2017

Budget Modification: HD-44-17

Expenditures & Revenues

An increase in revenue is shown as a negative value and a decrease as a positive value for consistency with SAP.

Line No.	Program Offer Number	Fund Code	Fund Center	Func. Area	Cost Object	Cost Element	Current Amount	Revised Amount	Change Increase/ (Decrease)	Subtotal
1	40069-17	1000			41504-GF	60160 - Pass-Thru & Pgm Supt	604,998	906,998	302,000	
1000 Total										302,000
	Total									302,000
				Program Offer Number 40069-17 Total						302,000
2	95001-17	1000			9500001000	60470 - Contingency	11,083,177	10,781,177	(302,000)	
1000 Total										(302,000)
	Total									(302,000)
				Program Offer Number 95001-17 Total						(302,000)

Exp/Rev/FTE - Budget Modification

Budget Year: 2017

Budget Modification: HD-44-17

Annualized Personnel Changes

Change is shown on a full year basis even though this action affects only a part of the fiscal year (FY).

No positions were affected by this Budget Modification.

Current Year Personnel Changes

Cost/savings that will take place in this FY; these explain the actual dollar amounts being changed by this BudMod.

No positions were affected by this Budget Modification.



Department of County Management
MULTNOMAH COUNTY OREGON

Budget Office

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TO: Board of County Commissioners

FROM: Jeff Renfro, Principal Budget Analyst

DATE: May 3, 2017

SUBJECT: General Fund Contingency request for \$302,000 to fund pass-through payments in Behavioral Health Crisis Services. (Budget Modification HD-44-17)

The Health Department is requesting \$302,000 of General Fund contingency to fund pass-through payments in the Behavioral Health Crisis Services program.

The contingency funds are being requested to address the need to stabilize employment levels for contractors providing behavioral health crisis services. Multnomah County contractors have seen an increase in staff turnover, which they attribute to wage increases in neighboring jurisdictions. The pass-through funding will allow behavioral health crisis contractors to increase wages in targeted job classifications.

An FY 2017 budget note set aside \$629,532 in contingency to continue funding for behavioral health crisis services in the event that the newly established Unity Center did not open on time or services did not match expectations. Unity is now open and treating clients. As of May 3, 2017, the Health Department does not anticipate requesting funds for the original purpose.

If this request is approved, the General Fund Contingency will be reduced by \$302,000 and the remaining balance (not including the BIT Reserve) will be \$1,854,500, of which \$630,726 is earmarked.

Contingency Policy Compliance

The Budget Office is required to inform the Board if contingency requests submitted for approval satisfy the guidelines for using the General Fund Contingency.

In particular,

- Criteria 1 states contingency requests should be for one-time-only purposes.
This contingency request is OTO. The FY 2018 Approved budget includes ongoing funds for the same purpose (40069B-18).
- Criteria 2 addresses emergencies and unanticipated situations.
Contractor staffing turnover increased dramatically this year and was not anticipated.
- Criteria 3 addresses items identified in Board Budget Notes.
This issue was unanticipated and not identified in a Board Budget Note.