

Community and Family Services

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Community and Family Services

Vision

The Department of Community and Family Services (DCFS) is recognized for its leadership and excellent employees participating in the growth of strong healthy families and diverse caring communities through collaborations and partnerships.

Mission

The Department of Community and Family Services manages public social service resources to help build communities that care for all their members.

The Department of Community and Family Services embarked on several ventures that reflect the Department's vision and mission. **Customer driven services** are seen in the provision of family and individual services available at Family Centers, Family Resource Centers and other existing neighborhood based locations such as schools and churches. **Collaborations and Partnerships** are reflected in the blending of funding sources that were successfully incorporated by Portland Public Schools, Centennial School District, the State Office for Children and Families, the Multnomah County Juvenile and Adult Community Justice Department, and the Casey Family Program to secure care for non-Oregon Health Plan children. **Leadership** is demonstrated as the Department aggressively responds to youth and family violence. By providing crisis intervention to students affected by violent incidents on the school campus DCFS has contributed to keeping kids in school. Violence reduction programs to parents and children at Head Start programs make for safer communities. The Department has led the community development of a new managed care system to improve delivery of mental health services for children, adolescents and adults.

The staff of the Department is dedicated to reducing poverty, promoting school success and investing in healthy and safer families and neighborhoods. DCFS efforts to achieve these goals include working toward self-sufficiency in communities for both individuals and families, reducing domestic violence, developing employability and employment opportunities, and providing appropriate and necessary treatment and support services using a Managed Care Model. Cultural diversity of the staff and contractors is celebrated and the unique perspective that each group brings is incorporated into service delivery and program development.

Values

- Diversity
- Collaborations and Partnerships
- Customer Driven Services and Continuous Quality Improvement
- Mutual Responsibility
- Openness and Clear Communication
- Leadership and Continuous Learning
- Recognition
- Personal Integrity and Accountability

Community and Family Services

- Inclusive Decision Making
- Success

Objectives

Strategic Plan Objectives were developed as a result of a comprehensive analysis. The management team examined Department Strengths, Weaknesses, Opportunities and Threats (SWOT Analysis). The situation analysis is an examination of the department's current environment, from both an internal and external point of view. This analysis revealed the need to improve communication throughout the department. The need to establish clear objectives for major initiatives such as the fully integrated data system also became clear. By analyzing the current situation, the strategic planning process was enhanced by clearly stated objectives. The Department of Community and Family Services will accomplish the following five objectives in the next three years:

- DCFS will have fully implemented the Oregon Quality Initiatives (OQI) assessment and attained the OQI nomination award.
- DCFS will have the appropriate processes in place to assure that staff are informed and engaged in communicating the business of the Department.
- DCFS will use a Community Building planning process to manage resources for the delivery of social services countywide.
- DCFS will have the human resources, technological capacity, and efficient processes in place to effectively manage the internal business of the Department.
- DCFS will operate a fully integrated data system that provides client, financial and program data throughout the Department.

Strategies

The Department's management team has undertaken a planning process to develop a three-year strategic plan. The purpose of the plan is to address three key questions:

- Where are we today?
- Where do we wish to arrive and when?
- How do we get from here to there?

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<u>Budget Overview</u>	1996-97	1997-98	1997-98	1998-99	<u>Difference</u>
	<u>Actual</u>	<u>Current Estimate</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	
Staffing FTE	333.81	338.53	352.63	382.67	30.04
Personal Services	\$16,848,187	\$16,481,396	\$18,030,703	\$20,366,546	\$2,335,843
Contractual Services	76,493,940	93,082,345	94,730,626	100,821,706	6,091,080
Materials & Supplies	4,123,371	5,549,584	5,558,193	6,295,137	736,944
Capital Outlay	<u>199,176</u>	<u>79,867</u>	<u>61,410</u>	<u>31,331</u>	<u>(30,079)</u>
Total Costs	\$97,664,674	\$115,193,192	\$118,380,932	\$127,514,720	\$9,133,788

Department Services

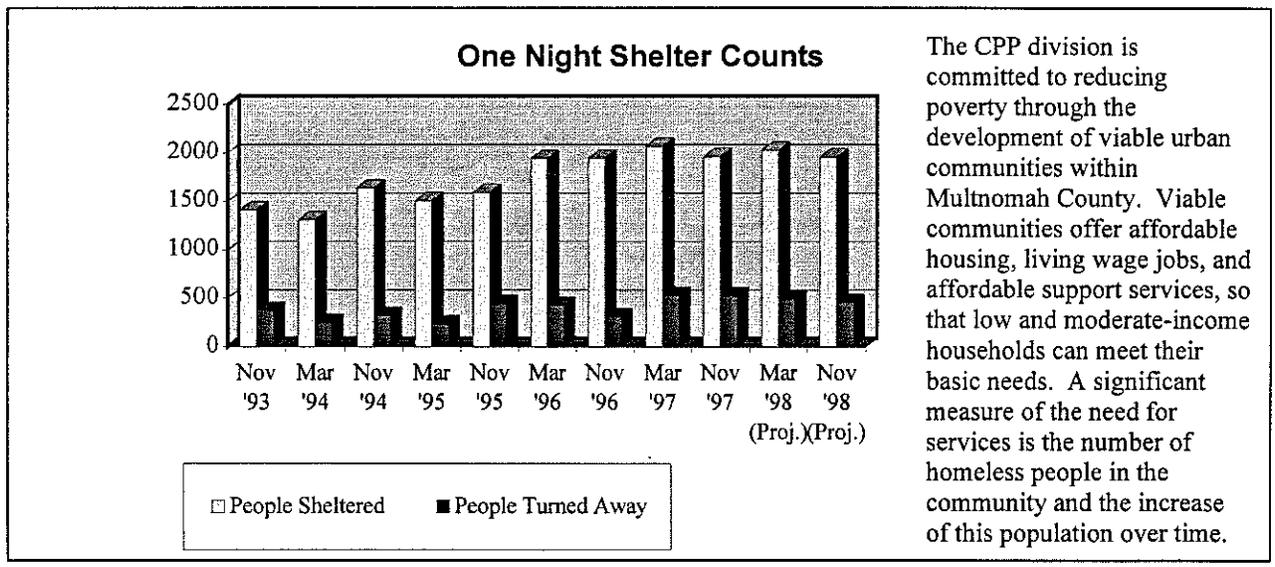
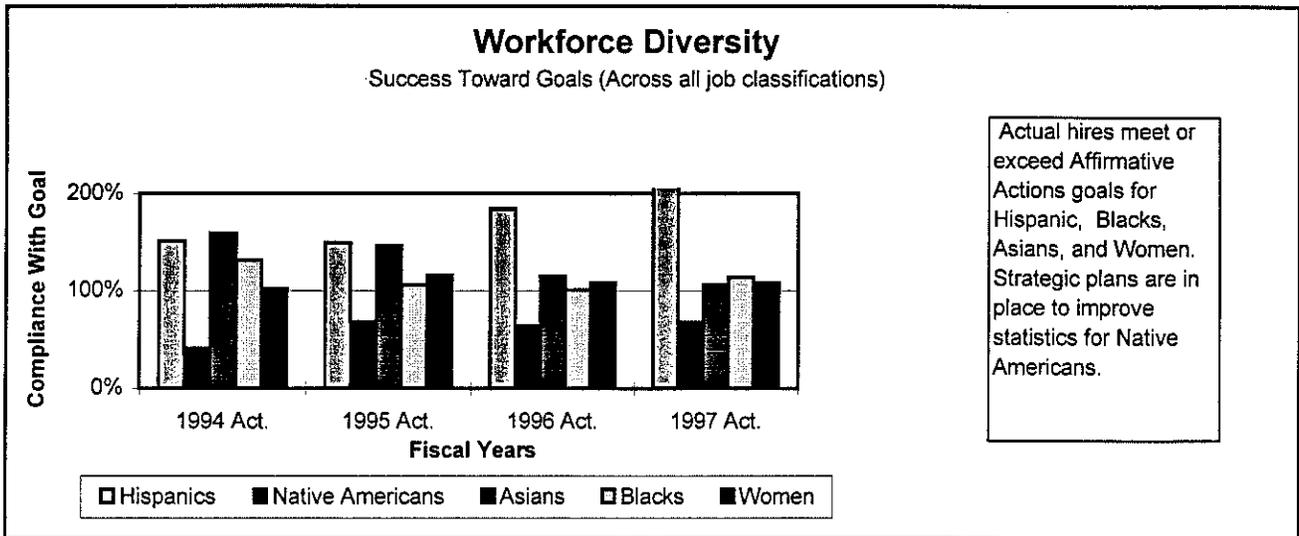
The Department of Community and Family Services contracts with over 250 organizations to provide the following services:

- Alcohol and other drug screening, assessment, treatment and prevention services, serving approximately 58,000 persons.
- Anti-poverty programs providing advocacy, economic opportunities and self-sufficiency to over 22,000 individuals along with energy or weatherization assistance to over 14,000 households.
- Development of affordable housing and public works improvements.
- Services to over 3,700 individuals with developmental disabilities, including advocacy, service coordination, residential, vocational, respite, family support and emergency services.
- Mental Health screening and evaluation, treatment, family support and crisis services to over 7,250 adults and 7,000 children.
- A network of seven Family Centers located throughout the County provides a full spectrum of programs for youth and families. Over 3,100 youth and 325 families have used services ranging from prevention to intensive intervention programs.
- Services to children and youth, which promote the health, growth and development of children and invests in building resiliency from the earliest moments of their lives.
- Development of a comprehensive Domestic Violence program that includes support to staff members and clients who are victims and staff training designed to prevent domestic violence.

Several citizen groups have formal advisory or oversight responsibilities for programs and Benchmark activities. For Community and Family Services as a whole, the Citizens Budget Advisory Committee gives advice on budget issues. Citizen groups include: Multnomah County Community Action Commission, CDBG Policy Advisory Board, Developmental Disabilities Coordinating Council, Family Support Council, Multnomah Council on Chemical Dependency, Multnomah County DUII Community Advisory Board, and Children and Adult Mental Health Advisory Committees.

Community and Family Services

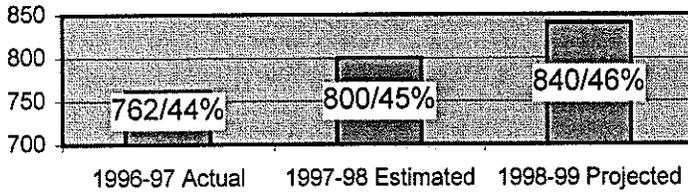
Performance Trends



The CPP division is committed to reducing poverty through the development of viable urban communities within Multnomah County. Viable communities offer affordable housing, living wage jobs, and affordable support services, so that low and moderate-income households can meet their basic needs. A significant measure of the need for services is the number of homeless people in the community and the increase of this population over time.

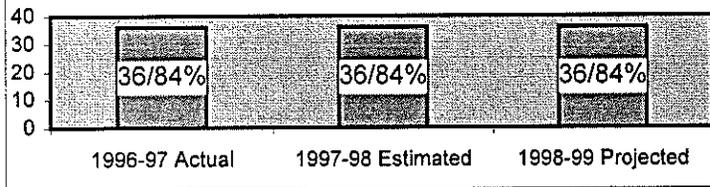
Community and Family Services

Number of consumers brought in on police custody who are subsequently put on a civil commitment hold



Police are the first response to an individual experiencing a mental health crisis in the community. Police are called because an individual exhibits disruptive or dangerous behavior. If mental health evaluation is needed, the Crisis Triage Center provides consultation, mobile response, or a safe and secure environment while the crisis is stabilized. This performance trend does not necessarily reflect success, but is used to illuminate community needs and indicates impact when program changes occur.

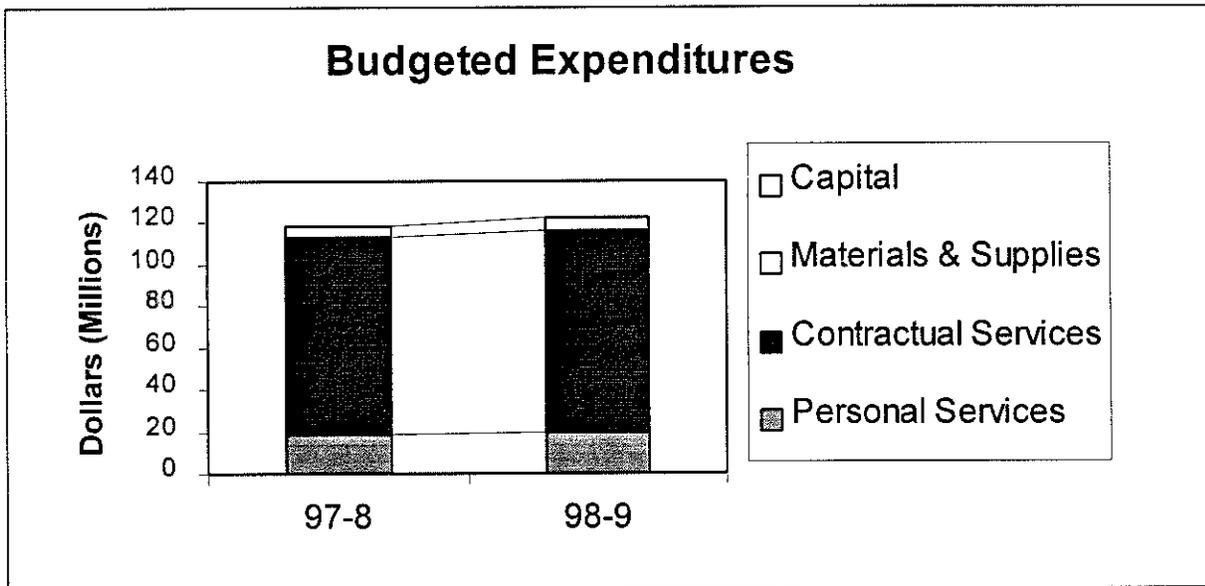
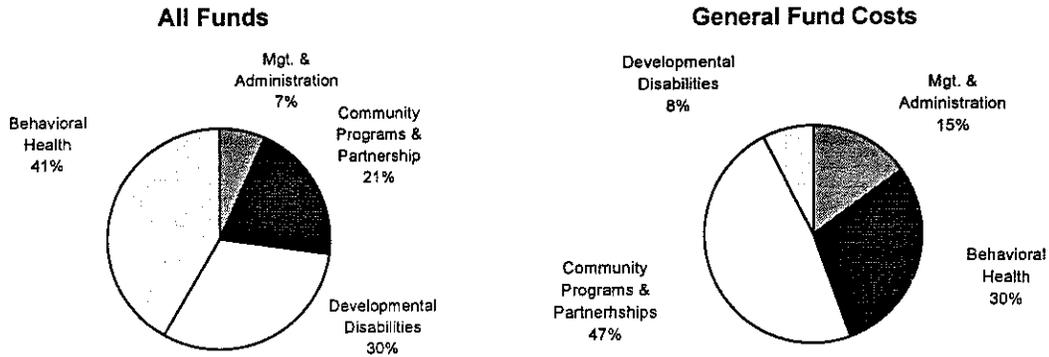
Number of consumers who access a Diversion crisis bed and are placed within Multnomah County



The Diversion Crisis Bed Program was implemented in FY 96-97, with the intention of providing a diverse range of local crisis bed facilities which would enable consumers to receive appropriate services while remaining closer to home and maintaining involvement with current service providers. Consumers are eligible for crisis bed treatment when they are at risk for admission to Fairview Training Ctr. through Civil Commitment because they are dangerous to themselves or others and /or are unable to care for themselves due to mental retardation (IQ <70 prior to age 18).

Community and Family Services

Expenditure Graphs



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<u>Budget Trends</u>	1996-97	1997-98	1997-98	1998-99	<u>Difference</u>
	<u>Actual</u>	<u>Current Estimate</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	
Staffing FTE	333.81	338.53	352.63	382.67	30.04
Personal Services	\$16,848,187	\$16,481,396	\$18,030,703	\$20,366,546	\$2,335,843
Contractual Services	76,493,940	93,082,345	94,730,626	100,821,706	6,091,080
Materials & Supplies	4,123,371	5,549,584	5,558,193	6,295,137	736,944
Capital Outlay	<u>199,176</u>	<u>79,867</u>	<u>61,410</u>	<u>31,331</u>	<u>(30,079)</u>
Total Costs	\$97,664,674	\$115,193,192	\$118,380,932	\$127,514,720	\$9,133,788
Program Revenues	\$77,818,444	\$92,546,946	\$95,842,575	\$98,986,758	\$3,144,183
General Fund Support	\$19,846,230	\$22,646,246	\$22,538,357	\$28,527,962	\$5,989,605

<u>Costs by Division</u>	1996-97	1997-98	1997-98	1998-99	<u>Difference</u>
	<u>Actual</u>	<u>Current Estimate</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	
Mgmt & Administratio	\$4,851,655	\$6,844,020	\$7,174,990	\$9,311,467	\$2,136,477
Comm Prog & Partner	\$23,777,847	30,976,075	33,475,326	26,184,482	(\$7,290,844)
Dev Disabilities Servic	\$30,682,968	32,595,796	32,761,853	38,247,650	\$5,485,797
Behavioral Health	<u>\$38,352,204</u>	<u>44,777,301</u>	<u>44,968,763</u>	<u>53,771,121</u>	<u>\$8,802,358</u>
Total Costs	\$97,664,674	\$115,193,192	\$118,380,932	\$127,514,720	\$9,133,788

<u>Staffing by Division</u>	1996-97	1997-98	1997-98	1998-99	<u>Difference</u>
	<u>Actual</u>	<u>Current Estimate</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	
Mgmt & Administration	64.96	66.90	64.40	89.40	25.00
Comm Prog & Partner	62.21	68.00	68.50	57.35	(11.15)
Dev Disabilities Servic	69.00	78.80	74.80	78.80	4.00
Behavioral Health	<u>137.64</u>	<u>124.83</u>	<u>144.93</u>	<u>157.12</u>	<u>12.19</u>
Total Staffing FTE's	333.81	338.53	352.63	382.67	30.04

Community and Family Services

Issues and Opportunities

1. Homeless Families: Shelter and Housing Services Continuum

Provision of emergency housing vouchers for approximately 100 homeless families with children would provide a short-term response to the increasing numbers of homeless families without shelter options. This short-term response would also allow CFS time to develop a long-term, inter-agency solution to the shelter and housing needs of homeless families. This proposal requests \$304,483 in continuing funds (\$270,000 for vouchers/shelter operating costs; \$34,483 for planning assistance and program support through a 0.50 FTE Program Development Specialist).

The City of Portland has expressed an interest in converting a motel into a shelter for homeless families. This proposal would allow for extra motel vouchers to be available for homeless families while that shelter was being developed. The voucher funds would convert to pay for shelter operating costs when the facility was finished. The homeless families housing services continuum would then include vouchers, a shelter, transitional facilities and scattered-site apartments, and support in permanent housing.

Board Action:

The adopted budget includes \$100,000 of one-time-only money for family housing vouchers.

2. Homeless Youth: Community Plan and Funding Request

In January 1998, the Citizens Crime Commission and the Association for Portland Progress issued a report on Services to Homeless Youth in Portland. The report documented serious shortcomings in the quantity of services currently offered to homeless youth. It also found that the services provided are not provided as a system. It therefore recommended establishing a coordinator for the variety of services being provided in the community.

It is generally believed that there are between 1000 and 1500 homeless youth in Portland. This population comprises members of homeless families, runaway adolescents escaping dysfunctional families, adolescents ejected from their families, and "street kids." Currently available for them are 30 year round emergency shelter beds, 25 emergency shelter beds from November through March, and 17 transitional units for homeless, case managed, youth moving out of the shelter system and leaving the streets. Providers believe there is a bottleneck effect because they do not have housing options for case managed youth. They also have identified 24-hour safety off the street as a gap in the current system. Further, funding for mental health counseling, alcohol and drug treatment, job training and linkage, and high school completion / GED falls short of meeting the demand.

The Division of Community Programs and Partnerships is currently involved in a planning process to study the current provider network providing services designed to help youth leave the streets, prevent juvenile delinquency, and meet basic needs. This process will

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result in both a model and/or a plan for the services in the community and a competitive procurement process to select service providers for contractual funding.

Board Action:

The adopted budget includes \$175,000 to assist in a community-wide effort to deal with homeless youth. This allocation will provide service support, including \$25,000 for expanded winter shelter capacity, and cover the cost of a Homeless Youth Coordinator. It will also allow the County to participate in a partnership with the business community in funding an enhanced system. Support also includes a \$50,000 grant for the YWCA Community Transition School.

3. Provision of coordinated services to Hispanic families throughout Multnomah County.

The increase in the Hispanic population in this county over the past 10 years has been dramatic, growing rapidly from 2% to close to 10% of our urban community.

The Clara Vista Family Resource was created to assist in serving this population. In 1993, the Health Department established La Clinica de Buena Salud (with Public Health grant funding), focusing on reduction of homelessness for children within the Hispanic community. While it provides a full-range of primary care health services for families with children at risk of homelessness, many in this population are turned away from service because they do not fit the eligibility criteria.

In conjunction with these two existing programs, as part of the Community Building effort, El Programa Hispano and Migrant Head Start have helped design a more comprehensive system of services aimed at serving the countywide Hispanic community. Since the primary characteristic of this community is its language, its members are sometimes difficult for non-profit agencies (without the resources to secure translators), to serve. The program planned by the current service agencies makes use of flexible, non-categorical services. They include mental health counseling, flexible funds for child care, recreation, and respite, domestic violence outreach, additional health services, alcohol and drug triage, and alcohol and drug treatment. The plan also includes evaluation to be carried out by the CFS Contracts and Evaluation unit.

Board Action:

The adopted budget includes \$325,000 to phase-in the programs planned by Clara Vista, El Programa Hispano, and Migrant Head Start. This funding will not cover a full year's cost. CFS will include full funding in the 1999-2000 budget.

4. Interdepartmental Initiative for a Comprehensive System of Alcohol and Drug Abuse Services in Multnomah County.

Several departments formed a task force charged with finding a funding alternative to the Target Cities grant and to take a step towards a more comprehensive system of alcohol

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and drug treatment for Multnomah County residents. The five million-dollar federal grant expires September 30, 1998.

Representatives from CFS, the Sheriff's Office, Adult and Juvenile Justice, and the Health Department worked closely together to develop a proposal that would provide County General Funds to continue existing service levels. A major emphasis of current services has been to assess and treat offenders with alcohol and drug problems as well as persons with co-occurring disorders. The project demonstrated that changes made in the treatment system have had a positive impact on client and system outcomes. This interdepartmental initiative directly addresses the benchmarks of reducing crime and improving public safety. Long term continuation of services may be considered as part of a new public safety levy, however, bridge funding is needed to continue services until other resources are available. Components of this issue are proposed to include:

<i>9 month funding</i>	
✓ Uniform Diagnostic Assessment of Targeted Offenders	\$728,073
✓ Emergency Basic Client Needs Support	\$81,393
✓ Client Tracking & Evaluation Data System	\$344,888
✓ Training	\$93,985
✓ Impact Evaluation	\$51,000
	\$1,154,959
✓ In-Jail Intervention (current level)	\$ 573,750*
	\$1,728,709

*Estimated costs being held in contingency, pending review by the Board, to meet Target Cities funding.

Board Action:

The adopted budget includes an appropriation of \$1,154,959 to serve as a gap between the federal Target Cities grant and a long-term solution. \$573,000 will be placed in general fund contingency until service delivery issues surrounding the current configuration of the In Jail Intervention Program are resolved (see budget notes).

5. Community Building in Outer Southeast Portland

Beginning in the fall of 1996, a collaboration of organizations and residents working in outer Southeast Portland convened to begin working in closer partnership with each other. Outer Southeast Portland Community Project (OSECP) was formed and in December of 1996, received \$1,559,962 in federal Welfare Reinvestment Funds. These funds were granted to nine organizations working in five program areas in outer Southeast (OSE) Portland: affordable housing, childcare, health/mental health, workforce development, and the reduction of teen pregnancy. Southeast Uplift neighborhood Program, a coalition serving 22 Southeast neighborhoods, was asked by the OSECP to serve as fiscal agent and programmatic coordinator for the project.

When it became clear that the funding for these projects would not continue from the state, the Outer Southeast Partners approached the Adult and Family Services regional office,

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the Bureau of Community Development with the City of Portland and the Chair's office to see what aspects of the initiative might be sustained. Based on community budget meetings, funding priorities for the County emerged.

Board Action:

The adopted budget includes funding for the following elements of the original plan:

Kelly House \$135,000

Kelly House Pre-School Circle of Friends \$35,000

GEARS \$98,000

Portion of the Coordinator/Evaluation/Training \$25,000

Write-off Brentwood Darlington Community Center loan \$137,000

School Age Child Care \$60,000

Increased Rentals to Brentwood Darlington Center \$10,000

Oregon Quality Assessment

The Department of Community and Family Services participated in the Oregon Quality Initiative (OQI) Assessment. Participation in the process enabled the Department to:

- identify the components and activities that need to be in place in order to reflect OQI principles throughout the organization;
- recognize past and present activities that have been implemented in the Department that supported progress towards Reaching Excellent Service Using Leadership and Team Strategies (RESULTS);
- identify the areas of opportunity that need the most immediate attention, (i.e. those areas where strategies need to be initiated or more fully developed, etc.); and
- establish baseline information regarding the Department's progress and overall performance towards implementing RESULTS.

Following the complete review of all of the assessment information, DCFS Management and RESULTS Steering Committee members were asked to select three areas from the OQI criteria to concentrate and prioritize efforts on in the upcoming fiscal year. The three areas the Department selected were:

- ◆ Leadership;
- ◆ Human Resource Development and Management; and
- ◆ Management of Process Quality.

Why these three areas?

The importance of Leadership to the implementation of RESULTS has become increasingly clear to Managers and RESULTS Steering Committee Members. Continuous Quality Improvement is clearly a "top-down" driven initiative. It is imperative that managers and supervisors be seen as modeling, enabling and leading quality activities. Human Resources Development and Management is included in our focus because of the importance and priority placed on the workforce. Finally, DCFS contracts eighty per cent of

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its services with local non-profit agencies. This requires the department to rely on other organizations to deliver high quality customer service. In order for the department to assure service quality, it must clearly describe customer requirements and evaluate its agent's delivery.

Where do go from here?

The Department of Community and Family Services RESULTS Steering Committee developed a detailed OQI implementation plan that included a series of activities to help move the Department closer to meeting OQI requirements in the above three priority areas. This plan was subsequently combined with the Departmental Strategic Plan and the most appropriate activities have been woven into the broader Strategic Plan as Objective One.

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Budget Highlights

- The Human Resources reengineering and recruitment function will be performed at the department level starting July 1998. This shift required DCFS to add a personnel analyst and a personnel technician.
- As the DCFS budget and responsibilities have grown over the past few years, the infrastructure has not kept pace. A priority for the Department, as well as an objective of the Strategic Plan, is to have the infrastructure capacity to effectively support the business of the department. This budget request reflects that priority.
- Support for the Affordable Housing Development Program (AHDP). Multnomah County's AHDP is designed to address the housing needs of low-income individuals and families.
- The County has taken steps towards continuing a comprehensive system of alcohol and drug treatment for residents of Multnomah County. Funding of many treatment and evaluation services has been through a Federal "Target Cities" grant. These funds expire in September 1998 and programs will be funded by the County General Fund for 1998-99.
- The Division of Community Programs and Partnerships (CPP) is undertaking a community planning process to describe a continuum of services and resources designed to help homeless youth leave the streets, prevent juvenile delinquency, and meet basic needs.
- The Behavioral Health Division has been awarded a contract to provide capitated adult and children's mental health services under the Oregon Health Plan. Being a provider allows the County to provide needed services to OHP members as well as influence the direction of mental health services in the region.
- CPP has begun a process to design a new service delivery system, incorporating best practices from the Family Centers and Community Action service systems. This planning process also includes the concepts and practices involved in Community Building Initiative.
- Community Building in Outer N.E. Portland will continue with \$100,000 of increased funding of services at Cully Community Center. The County plans to increase access of Hispanic clients to appropriate mental health service provided through the Cully Center.
- Community Building in Outer S.E. Portland will continue with \$500,000 targeted towards neighborhood programs, a pre-school, school-age child care and the Brentwood Darlington Community Center.

Description

The purpose of Management and Administration is to provide leadership, policy direction, continuous quality improvement, program oversight, and administrative support to client service programs. The unit sets the direction for the Department of Community and Family Services. Department-wide responsibilities, such as budget and fiscal, information services, contract evaluation, community advocacy and, public affairs are conducted here. Special projects around RESULTS and diversity maintain the integrity of CFS its mission, community expectations, and funding source requirements.

Action Plan

- By June 1999, CFS will implement year one strategies of all five objectives of the departmental strategic plan. Department management will provide leadership to the Strategic Planning Leadership Team as we move through the first year of implementation.

Significant Changes – Revenues

	<u>Amount</u>
Increase Enterprise Community	\$847,864
Increase SMHD Target Cities	\$31,735
Decrease Youth Investment	(\$42,677)
Decrease Welfare Reform	(\$69,000)
Increase SMHD Local Administration	\$55,567
Decrease Title XIX Capitation Funding	(\$179,776)
Increase County General Fund	\$1,239,513
Transfer from Data Processing Fund	\$264,038
Decrease SMHD carryover	(\$378,553)

Significant Changes – Revenues

	<u>FTEs</u>	<u>Amount</u>
The addition of 21.25 FTEs is detailed at the program level.	25.00	\$1,400,000

Management & Administration

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Budget Trends

	1996-97	1997-98	1997-98	1998-99	
	<u>Actual</u>	<u>Current Estimate</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	<u>Difference</u>
Staffing FTE	64.96	66.90	64.40	89.40	25.00
Personal Services	\$3,290,359	\$3,008,007	\$3,289,765	\$4,725,114	\$1,435,349
Contractual Services	751,395	2,778,113	2,777,615	3,007,075	229,460
Materials & Supplies	734,854	1,009,071	1,050,800	1,547,947	497,147
Capital Outlay	<u>75,047</u>	<u>48,829</u>	<u>56,810</u>	<u>31,331</u>	<u>(25,479)</u>
Total Costs	\$4,851,655	\$6,844,020	\$7,174,990	\$9,311,467	\$2,136,477
Program Revenues	\$2,055,414	\$4,513,224	\$4,702,106	\$5,286,640	\$584,534
General Fund Support	\$2,796,241	\$2,330,796	\$2,472,884	\$4,024,827	\$1,551,943

Costs by Program

	1996-97	1997-98	1998-99	
	<u>Actual</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	<u>Difference</u>
Dept. Management	\$762,096	\$3,075,379	\$2,698,161	(\$377,218)
Operations Division	3,116,706	3,066,545	4,831,040	1,764,495
Financial Services	<u>972,853</u>	<u>1,033,066</u>	<u>1,782,266</u>	<u>749,200</u>
Total Costs	\$4,851,655	\$7,174,990	\$9,311,467	\$2,136,477

Staffing by Program

	1996-97	1997-98	1998-99	
	<u>Actual</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	<u>Difference</u>
Dept. Management	8.96	8.50	12.00	3.50
Operations Division	39.05	38.40	52.90	14.50
Financial Services	<u>16.94</u>	<u>17.50</u>	<u>24.50</u>	<u>7.00</u>
Total Staffing FTE's	64.96	64.40	89.40	25.00

Department Management

Description

The purpose of Department Management is to provide leadership and set policy and direction for Community and Family Services and its programs. Management is responsible for assuring programs and activities are responsive and accountable to its stakeholders and clients, community, funding sources, citizen advisory bodies, and County employees. Department Management works with all players to clarify and set current priorities and directions, resolve implementation problems, and ensure the work of the organization is done.

Department Management services also include RESULTS, Diversity and Managed Care concepts. DCFS is strongly committed to incorporating the core values represented in each of the initiatives and deploying them extensively throughout the organization. The Department is committed to keeping RESULTS and Diversity closely linked in order to ensure that continuous quality improvement stays aligned with the needs of all of our customers. Managed Care principles reinforce integrated service strategies that are coordinated, comprehensive and that use resources efficiently.

Budget Overview

	1996-97	1997-98	1998-99	
	<u>Actual</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	<u>Difference</u>
Staffing FTE	8.96	8.50	12.00	3.50
Program Costs	\$762,096	\$3,075,379	\$2,698,161	(\$377,218)

Significant Changes - Expenditures

	<u>FTEs</u>	<u>Amount</u>
Transfer Sr. Program Dev. Specials from DCCP	1.00	\$68,615
Transfer OA2 from DCCP	1.00	\$29,460
Add Program Dev. Spec. (infrastructure)	1.00	\$47,656
Move Deputy Director from DD	1.00	\$100,836
Move 1.00 from Public Affairs to DSS	(1.00)	(\$98,956)
Move 0.50 OA2 to Op. Division, and reclassify as Data Tech	(0.50)	(\$20,130)
Reclassify 1.00 Program. Dev. Specialist to Program. Dev. Senior		\$9,655
Decrease pass through funded by SMHD carryover		(\$795,816)
Increase pass through for Community Building Initiative		\$163,687
Reclassify 1.0 FTE Office Assistant 2 to Administrative Secretary		\$5,101
Add Mgt Assistant for Community Building	1.00	\$68,000

Operations Division

Management & Administration Community and Family Svcs

Description

The purpose of the Operations Division is to provide and assure accountability and responsiveness of Department-wide services in the areas of information systems, contracting, evaluation and administrative services. This Division is responsible for personnel management, payroll services, employee orientation, purchasing, information technology, computer help desk, contract procurements and evaluation, and facilities coordination. The Operations Division is also responsible for development and implementation of Department-wide policies and procedures including strategic plans and a fully integrated departmental data system to assure consistency of operating standards. The Domestic Violence Coordinator is also in this Division along with funding for domestic violence training.

Budget Overview

	1996-97 <u>Actual</u>	1997-98 <u>Adopted Budget</u>	1998-99 <u>Adopted Budget</u>	<u>Difference</u>
Staffing FTE	39.05	38.40	52.90	14.50
Program Costs	\$3,116,706	\$3,066,545	\$4,831,040	\$1,764,495

Significant Changes – Expenditures

	<u>FTEs</u>	<u>Amount</u>
Reclassify OA 2 to Office Assistant. Sr.		\$5,530
Reclassify CFS Supervisor to CFS Administrator		\$17,125
Reclassify Data Systems Admin. To CFS Supervisor		(\$238)
Add Employee Services Spec (infrastructure)	1.00	\$61,895
Add Program. Dev. Tech (infrastructure payroll/personnel)	1.00	\$40,260
1.0 Data Tech reclassified to 2.0 OA 2	1.00	\$26,528
Add Data Analyst (infrastructure)	1.00	\$47,656
Add Data Tech (infrastructure)	1.00	\$40,260
Transfer Data Analyst from Comm Program. & Partnerships	1.00	\$49,046
Transfer 0.50 OA 2 from Director's office and reclassify as 1.00 Program Dev Tech	0.50	\$24,552
Add Data Entry Operator	1.00	\$33,515
Add Program Evaluation Spec.	2.00	\$102,306
Add Program Dev. Tech	3.00	\$123,168
Add Office Assistant 2 (infrastructure)	1.00	\$31,808
Increase Bldg. Mgmt Services.		\$59,401
Move Enterprise Comm. Contracted Services. From Comm. Program & Partnerships		\$831,348
Decrease Professional Services		(\$203,349)
Reclassify 1.0 Office Assistant Sr. to Administrative Secretary		\$1,357
Reclassify 1.0 Program Evaluation Specialist to Principle Evaluation Specialist		\$8,069
Add 1.0 Data Analyst	1.00	\$47,656
Reclassify 1.0 Program Development Technician to Employee Services Specialist 1		\$4,545
Increase Data Processing Services		\$31,319

Financial Services Division

Management & Administration Community and Family Svcs

Description

The purpose of the Financial Services Division is to provide financial management and accountability for the Department of Community and Family Services. The Division is responsible for payments to community provider agencies for contracted services as well as direct client payments of flexible service funds. Duties also include, monitoring Federal and State grants and maximizing revenues collected, preparation and distribution of reports to grantors and managers; development of internal accounting controls; fiscal contract compliance reviews; budget development and administration; and financial management of the managed care services of CAAPCare. By January 1999, this division will implement the first year strategies toward achieving the infrastructure development objective of the Departmental Strategic Plan.

Budget Overview

	1996-97 <u>Actual</u>	1997-98 <u>Adopted Budget</u>	1998-99 <u>Adopted Budget</u>	<u>Difference</u>
Staffing FTE	16.94	17.50	24.50	7.00
Program Costs	\$972,853	\$1,033,066	\$1,782,266	\$749,200

Significant Changes – Expenditures

	<u>FTEs</u>	<u>Amount</u>
Reclassify CFS Mgr. To CFS Mgr. Sr.		\$13,390
Increase Office Asst. 2 (infrastructure)	1.00	\$31,808
Increase Fiscal Specialist. 2 (infrastructure)	3.00	\$146,422
Increase Fiscal Specialist 1	1.00	\$41,599
Increase Professional Services. For 3 rd party administrator for CAAPCare		\$741,054
Add affordable Housing Dev. Program support and 0.25 Fiscal Specialist 2	0.25	\$19,194
Add 1.0 Fiscal Specialist 1	1.00	\$47,091
Reclassify 1.0 Fiscal Specialist 1 to .75 Fiscal Specialist 2	(0.25)	(\$5,763)
Transfer ODS Professional Services contract to Behavioral Health		(\$740,544)
Add 1.0 Program Development Specialist	1.00	\$47,656
Increase Pass Through for Data Processing fund transfer		\$264,038
Reclassify 1.0 Office Assistant 2 to Administrative Secretary		\$6,222

Description

The purpose of the Behavioral Health Division is to develop, mobilize and manage resources for services to adults, adolescents and children with mental illness, emotional and addictive disorders (including alcohol, other drugs and gambling). The Division provides services to individuals and their families in the least restrictive and most cost effective setting appropriate to their needs. The Division is responsible for providing or contracting for a continuum of crisis intervention and treatment services, providing protective services, assessment and referral, facilitating access and authorizing reimbursement. The Division works to assist the community in preventing or reducing the harmful consequences resulting from alcohol or other drug problems through education, mobilizing community participation and coordinating efforts with other organizations and agencies. The Division is responsible for monitoring and improving the availability, accessibility and quality of services for mentally ill and chemically dependent persons.

- The Division has assumed a growing role in managed care for certain Oregon Health Plan enrolled members. Behavioral health employees expect to expand this role while continuing to advocate for a comprehensive system of community behavioral health services to meet the needs of all Multnomah County residents.

The Division works actively with the Multnomah County Sheriffs' Office and the Department of Juvenile and Adult Community Justice on a variety of collaborative efforts to effectively meet the behavioral health needs of juvenile and adult offenders and reduce further criminal involvement. A joint effort also exists with the Department of Health in an effort to integrate primary health care and behavioral health services. The Division provides a variety of child and family mental health services that target school age children with the goal of improving their ability to complete their education as well as services aimed at the prevention of child abuse.

Action Plans

- Develop and implement guiding principles for integration of mental health and substance abuse services for persons with co-occurring disorders, based upon documented best practices and creative blending of available funding and community resources by June 30, 1999.
- Conduct a needs and resources assessment and design a culturally appropriate model for provision of mental health services to Hispanic persons in Multnomah County by June 30, 1999.
- By June 30, 1999 facilitate development of a Children's Mental Health Partnership, led by a Partnership Board representing child welfare, education, family advocates, foundations, juvenile justice and mental health. The Board will provide leadership in mental health system reform efforts, coordinate funding and services for high-risk children and manage a blended pool of funds to comprehensively serve children with high needs who are involved with multiple agencies.

Significant Changes - Revenues

	<u>Amount</u>
Decrease SMHD Carryover	(\$1,579,093)
Increase City Homeless CMI	\$169,481
Decrease SMHD Target Cities	(\$1,776,797)
Add Substance Abuse Jail Diversion Grant	\$572,293
Increase Title XIX Capitation	\$7,603,888
Increase SMHD Alcohol and Drug	\$1,093,740
Increase SMHD Mental Health Services	\$493,614
Increase Misc. Recoveries/Charges	\$117,152
Decrease Casey Foundation	(\$100,000)
Increase County General Fund	\$2,248,838
Increase Regional Drug Initiative	\$113,897

Significant Changes - Expenditures

The significant changes are explained at the program level.

Behavioral Health

Community and Family Svcs

Budget Trends

	1996-97	1997-98	1997-98	1998-99	
	<u>Actual</u>	<u>Current Estimate</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	<u>Difference</u>
Staffing FTE	137.64	124.83	144.93	157.12	12.19
Personal Services	\$7,175,582	\$7,077,516	\$7,618,914	\$8,616,882	\$997,968
Contractual Services	29,433,999	35,454,619	35,216,147	42,673,558	7,457,411
Materials & Supplies	1,662,535	2,241,286	2,133,702	2,480,681	346,979
Capital Outlay	<u>80,088</u>	<u>3,880</u>	<u>0</u>	<u>0</u>	<u>0</u>
Total Costs	\$38,352,204	\$44,777,301	\$44,968,763	\$53,771,121	\$8,802,358
Program Revenues	\$32,781,478	\$37,569,819	\$38,011,260	\$44,713,454	\$6,702,194
General Fund Support	\$5,570,726	\$7,207,482	\$6,957,503	\$9,057,667	\$2,100,164

Costs by Program

	1996-97	1997-98	1998-99	
	<u>Actual</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	<u>Difference</u>
Division Management	\$1,324,080	\$175,298	\$182,659	\$7,361
Planning, Develop, & Operations	1,197,125	2,534,142	2,567,347	33,205
Managed Care Administration	263,333	1,208,541	2,774,991	1,566,450
Child & Adolescent Treatment Svcs	1,959,323	2,406,759	2,665,001	258,242
Community Mental Health Program	4,285,319	2,868,802	3,306,797	437,995
Quality Improvement & Stakeholder	967,135	888,828	638,727	(250,101)
A&D Contracts	7,923,761	7,760,490	9,238,193	1,477,703
AMH Contracts	9,851,090	12,524,233	9,313,572	(3,210,661)
CMH Contracts	10,581,038	14,601,670	3,501,246	(11,100,424)
Managed Care Contracts	<u>0</u>	<u>0</u>	<u>19,582,588</u>	<u>19,582,588</u>
Total Costs	\$38,352,204	\$44,968,763	\$53,771,121	\$8,802,358

Staffing by Program

	1996-97	1997-98	1998-99	
	<u>Actual</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	<u>Difference</u>
Division Management	2.00	2.00	2.00	0.00
Planning, Develop, & Operations	15.37	15.30	14.43	(0.87)
Managed Care Administration	2.48	19.60	28.42	8.82
Child & Adolescent Treatment Svcs	30.10	40.61	42.90	2.29
Community Mental Health Program	68.94	50.67	55.10	4.43
Quality Improvement & Stakeholder	12.56	12.75	8.77	(3.98)
A&D Contracts	6.19	4.00	5.50	1.50
AMH Contracts	0.00	0.00	0.00	0.00
CMH Contracts	0.00	0.00	0.00	0.00
Managed Care Contracts	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>
Total Staffing FTE's	137.64	144.93	157.12	12.19

Division Management

Description

Division Management is responsible for setting policy and resource generation, allocation and management. Providing effective advocacy on behalf of those who rely upon public alcohol, drug and mental health services is the Division's mission. By gathering citizen and consumer input, the Division involves community policy-makers and other stakeholders in decision making. Collaboration with contractors, and maintaining strategic partnerships with supporters, allows the most effective treatment options to be utilized. Management provides leadership in quality improvement initiatives and program outcomes for the entire division. Maintaining a diverse workforce and service delivery system which provides culturally competent services is a constant goal.

Budget Overview

	1996-97	1997-98	1998-99	
	Actual	Adopted	Adopted	Difference
		Budget	Budget	
Staffing FTE	2.00	2.00	2.00	0.00
Program Costs	\$1,324,080	\$175,298	\$182,659	\$7,361

Significant Changes - Expenditures

No significant changes.

Alcohol & Drug Services

Description

An estimated 58,000 persons are in need of alcohol and drug treatment in Multnomah County annually. Alcohol and Drug Abuse Services cover a continuum of services including prevention, intervention, sobering and detoxification, outpatient and residential treatment and services for gambling addicts. Contracts also cover services delivered through a managed care approach to persons enrolled in the Oregon Health Plan. Services are available to both adults and adolescents and are delivered through a diverse network of providers. Services also include synthetic opiate replacement therapy, such as Methadone treatment.

The typical client is a 35-year old white male who has been arrested once and is currently participating in outpatient treatment for an alcohol problem. However, recent trends have seen a growth in other clients. Culturally specific programs continue which focus on the treatment needs of women, Native Americans, African Americans, Hispanics, and Asian Americans. During the 1996-97 fiscal year, the following numbers of persons were served: Sobering services - 7,500, Detoxification services - 2,546, Residential Treatment - 1,669 (including 262 children), Outpatient treatment - 10,261 (of which 4,177 were mandated to DUII treatment) and Methadone treatment 2,435.

Budget Overview

	1996-97 <u>Actual</u>	1997-98 Adopted <u>Budget</u>	1998-99 Adopted <u>Budget</u>	<u>Difference</u>
Staffing FTE	6.19	4.00	5.50	1.50
Program Costs	\$7,923,761	\$7,760,490	\$9,238,193	\$1,477,703

Key Results

	1994-95 <u>Actual</u>	1995-96 <u>Actual</u>	1996-97 <u>Actual</u>	1997-98 Original <u>Projection</u>	1997-98 Current <u>Estimate</u>	1998-99 <u>Projected</u>
Number and % of adult alcohol and drug residential treatment episodes in which clients demonstrate 90 days of abstinence and completes 2/3 of their treatment plan goals at termination from treatment.	473/61%	452/60%	530/60%	600/60%	560/60%	580/60%
Number and % of adult alcohol and drug outpatient treatment episodes in which clients demonstrate 90 days abstinence and complete 2/3 of their treatment plan goals at termination from treatment.	1,026 34%	1,087 37%	1,184 41%	1,050 45%	1,200 42%	1,200 42%
Number and % of problem gamblers leaving treatment who have completed treatment plans and achieved abstinence or an acceptable level of control over gambling behavior at termination from service.	31/22%	41/48%	65/47%	50/35%	70/47%	75/50%

Significant Changes - Expenditures

	<u>FTEs</u>	<u>Amount</u>
Increase CFS Administrator	0.50	\$28,303
Increase A & D Contracted Services		\$1,151,707
Add 1.0 Program Development Specialist	1.00	\$49,085
Increase A & D Professional Services		\$30,000

Adult Mental Health Contracts

Description

In 1996 there were over 13,800 adults in Multnomah County estimated to have a diagnosis of severe, long term mental illness. The public mental health programs contracted through the Behavioral Health Division served 8,144 individuals in ongoing community treatment during FY 1995-96. In addition, 2,954 individuals received crisis services and 2,099 individuals were assessed for involuntary commitment in FY 1995-96.

The local continuum of adult mental health services is broad based. It includes clinic and home based community treatment, acute care inpatient hospital services, residential care, and employment services. Crisis services are offered through a centralized crisis response system and specialized services are available for target populations such as Psychiatric Security Review Board clients, seniors and the homeless mentally ill.

Demand for locally based services continues to increase. However, the creation of a centralized triage center has allowed for the withdrawal of 3 additional emergency-hold beds and 6 additional respite beds contracted for 1996 as a stopgap measure. State funding has steadily declined for the 20-25% of seriously mentally ill persons who are not eligible for Medicaid.

Local discretion is limited by ORS 426, ORS 430 and the Intergovernmental Agreement with the Oregon Office of Mental Health Services, which define and constrain the use of State provided funds and govern certain operations of services.

Budget Overview

	1996-97 <u>Actual</u>	1997-98 Adopted <u>Budget</u>	1998-99 Adopted <u>Budget</u>	<u>Difference</u>
Staffing FTE	0.00	0.00	0.00	0.00
Program Costs	\$9,851,090	\$12,524,233	\$9,313,572	(\$3,210,661)

Key Results

	1995-96 <u>Actual</u>	1996-97* <u>Actual</u>	1997-98 Original <u>Projection</u>	1997-98 Current <u>Estimate</u>	1998-99 <u>Projected</u>
Number and % of consumers brought to Crisis Triage Ctr. in police custody who are subsequently put on an emergency psychiatric hospital hold.	NA	762/44%	NA	800/45%	840/46%

*Jan-Dec 1997

Significant Changes - Expenditures

	<u>Amount</u>
Reduce Pass Through to fund 3.0 Mental Health Consultants in CMHP	(\$160,000)
Decrease Adult Mental Health Contracted Services. AMH contracts are now reflected in Managed Care Contracts.	(\$3,101,198)

Children's Mental Health Contracts

Behavioral Health
Community and Family Svcs

Description

The Children's Mental Health Services program provides community-based mental health services to children and their families through contractual relationships with a diverse network of community based providers. This network provides crisis services, assessment, treatment, and a broad array of services to children and their families. These treatments are based upon a model of service delivery that emphasizes the individual and creates a plan of care specifically for each child and family.

Budget Overview

	1996-97 Actual	1997-98 Adopted Budget	1998-99 Adopted Budget	Difference
Staffing FTE	0.00	0.00	0.00	0.00
Program Costs	\$10,581,038	\$14,601,670	\$3,501,246	(\$11,100,424)

Key Results

	1995-96 Actual	1996-97 Actual	1997-98 Original Projection	1997-98 Current Estimate	1998-99 Projected
Number and % of families of children and adolescents who report that they received services appropriate to their need.	30/77%	71/90%	32/80%	80/90%	100/90%

Significant Changes - Expenditures

	Amount
Add Hispanic Mental Health Program	\$327,275
Decrease Children Mental Health Contracted Services. CMH contracts are now reflected in Managed Care Contracts.	(\$11,427,699)

Planning Development & Operations

Behavioral Health
Community and Family Svcs

Description

Planning, Development and Operations is responsible for carrying out appropriate planning processes to develop and operate an integrated continuum of effective, customer-focused behavioral health services. The unit provides program development and operation oversight in order to meet the contractual and administrative requirements of funding sources. By coordinating the operations of the major units of Behavioral Health Program the unit assures the delivery of effective and integrated services. The unit also coordinates some operations of Behavioral Health with other Departments and organizes cross-program team projects to meet Program Action Plans and special initiatives, such as Hispanic Mental Health services, the Mental Health Jail Diversion Project, RESULTS activities, and Community Building activities.

Budget Overview

	1996-97 <u>Actual</u>	1997-98 Adopted <u>Budget</u>	1998-99 Adopted <u>Budget</u>	<u>Difference</u>
Staffing FTE	15.37	15.30	14.43	(0.87)
Program Costs	\$1,197,125	\$2,534,142	\$2,567,347	\$33,205

Significant Changes - Expenditures

	<u>FTEs</u>	<u>Amount</u>
Add Medical Director (professional services from Medical Director reduced)	0.50	\$60,648
Add Office Asst. 2	0.25	\$9,531
Transfer .20 Program Dev. Spec to Child & Adolescent Treatment Services.	(0.20)	(\$9,531)
Cut Program Dev. Specialist Sr.	(0.50)	(\$32,089)
Reduce Professional Services.		(\$120,313)
Add Interagency Alcohol and Drug Plan		\$1,163,044
Add 2.00 Program Dev. Specialist	2.00	\$98,172
Transfer 2.92 Program Dev. Specialist to Managed Care Admin.	(2.92)	(\$155,433)

Managed Care Administration

Description

The purpose of Managed Care Administration is to effectively and efficiently manage alcohol, drug abuse and mental health services under the Oregon Health Plan. This includes plan administration functions such as the establishment of case management and utilization policies and procedures. Claims processing as well as member services, provider relations and quality assurance functions are performed here. The unit also includes efforts to coordinate services of all health plans serving Oregon Health Plan members in Multnomah County through a Health Plan Coordinating Council.

Budget Overview

	1996-97 <u>Actual</u>	1997-98 Adopted <u>Budget</u>	1998-99 Adopted <u>Budget</u>	<u>Difference</u>
Staffing FTE	2.48	19.60	28.42	8.82
Program Costs	\$263,333	\$1,208,541	\$2,774,991	\$1,566,450

Key Results

	1994-95 <u>Actual</u>	1995-96 <u>Actual</u>	1996-97* <u>Actual</u>	1997-98 Original <u>Projection</u>	1997-98 Current <u>Estimate</u>	1998-99 <u>Projected</u>
Ratio of CAAPCare enrollees in a given month, to the number of enrollees who received services that month.	N/A	NA	4.5%	4.5%	4.5%	4.5%

*Year program began

Significant Changes - Expenditures

	<u>FTEs</u>	<u>Amount</u>
Transfer CFS Administrator from Comm Mental Health Program Services.	1.00	\$79,658
Add Medical Dir. (professional services from Medical Dir. reduced)	0.50	\$60,648
Add Medical Records Tech.	1.00	\$39,302
Transfer Mental Health Consultant to Child & Adolescent Treatment Services.	(0.60)	(\$33,914)
Transfer Program Dev. Spec. from Planning, Dev, & Operations	2.92	\$155,433
Add Program Dev. Tech.	3.00	\$120,780
Transfer Program Evaluation Spec from Quality Improvement & Stakeholder Relations	1.00	\$51,153
Increase Pass-through funded by Capitation		\$741,918

Child & Adolescent Treatment Services

Behavioral Health
Community and Family Svcs

Description

Child & Adolescent Treatment Services is responsible for providing broad based mental health services for children and adolescents. This treatment includes direct assessment, diagnosis, crisis intervention and all levels of care. By collaborating and consulting with families and other human services professionals in a wide variety of settings, such as Head Start, Healthy Start, or child abuse assessment programs, School Based Health Centers, Parent Child Centers, juvenile justice settings and Caring Community programs, early intervention and successful treatment is possible.

Budget Overview

	1996-97 Actual	1997-98 Adopted Budget	1998-99 Adopted Budget	Difference
Staffing FTE	30.10	40.61	42.90	2.29
Program Costs	\$1,959,323	\$2,406,759	\$2,665,001	\$258,242

Key Results

	1994-95 Actual	1995-96 Actual	1996-97 Actual	1997-98 Original Projection	1997-98 Current Estimate	1998-99 Projected
Number and % of children, served by school-based mental health services, who are still enrolled in school at the end of the reporting period.	NA	612 95%	810 98%	612 95%	860 95%	900 95%
Number and % of children assessed by the CARES Program as needing service whose families are enrolled in an appropriate treatment or abuse prevention program w/in 30 days of assessment.	NA	484 40%	340 79%	85%	85%	85%

Significant Changes-Expenditures

	FTEs	Amount
Add 1.44 Mental Health Consultants	1.44	\$80,087
Transfer 0.60 Mental Health Consultants from Managed Care Admin	0.60	\$33,914
Transfer 0.20 Program Dev. Spec. from Planning, Dev. & Operations.	0.25	\$9,531
Reclassify 1.00 CFS Administrator to CFS Manager	0.00	\$0

Community Mental Health Program Services

Behavioral Health
Community and Family Svcs

Description

Community Mental Health Program Services provides centralized, mental health and alcohol and drug services to residents of Multnomah County. These include assessments and involuntary commitment services including hospital discharge planning and trial visit monitoring, protective services and mental health case management services.

The alcohol and drug assessment and referral program provides a comprehensive analysis and designs a treatment program to 5,100 individuals with alcohol and drug problems per year, including those with driving under the influence of intoxicants (DUII) charges. Services are delivered in several locations. The program works closely with criminal justice agencies, health and welfare agencies and child protection services to assist their clients in obtaining needed treatment, other social services and to inform their staff of the best methods of intervention.

Involuntary commitment services investigate the psychiatric condition of people alleged to be mentally ill and in need of involuntary treatment. The program also manages limited State hospital and County inpatient resources by assuring patients have access to the least restrictive care. The program conducts pre-commitment investigations, coordinates placements of committed clients, arranges alternative care for hospitalized clients, and provides outpatient monitoring of committed clients on trial visits and pays for pre-commitment hospital care for indigent clients. The program also investigates protective service complaints involving mentally ill adults.

Case management services are provided for alcohol and drug and mental health clients in order to oversee and coordinate treatment for complex, multi-problem clients and assure that they are able to access the most appropriate and effective services, particularly those funded through the Oregon Health Plan.

Budget Overview

	1996-97 <u>Actual</u>	1997-98 <u>Adopted Budget</u>	1998-99 <u>Adopted Budget</u>	<u>Difference</u>
Staffing FTE	68.94	50.67	55.10	4.43
Program Costs	\$4,285,319	\$2,868,802	\$3,306,797	\$437,995

Key Results

	1994-95 <u>Actual</u>	1995-96 <u>Actual</u>	1996-97 <u>Actual</u>	1997-98 <u>Original Projection</u>	1997-98 <u>Current Estimate</u>	1998-99 <u>Projected</u>
Average length of hospital stay for people placed on emergency psychiatric hospital hold (in days).	4.4	4.8	4.3	4.8	4.4	4.4
Number and % of DUII offenders who are assessed and referred to treatment who enter treatment.	84%	NA*	1598 51%	NA*	1838 65%	2080 65%
*95/96 Actual data is unavailable due to revision in definition and parameters of this indicator.						

Community Mental Health Program Services

Behavioral Health Community and Family Svcs

<u>Significant Changes - Expenditures</u>	<u>FTEs</u>	<u>Amount</u>
Add 3.00 Mental Health Consultants	3.00	\$154,284
Reduce 1.00 Mental Health Consultant	(1.00)	(\$51,428)
Restore Alcohol & Drug Evaluation Spec.	8.25	\$336,102
Reduce OA2	(1.00)	(\$32,106)
Restore CFS Administrator	0.50	\$38,687
Restore OA.2	1.50	\$42,809
Transfer 1.00 CFS Administrator to Managed Care Admin.	(1.00)	(\$79,658)
Decrease 0.75 CFS Administrator	(0.75)	(\$57,743)
Add CFS Supervisor	1.50	\$123,498
Add Mental Health Consultant	2.30	\$119,601
Cut A&D Evaluation Specialists	(8.62)	(\$350,107)
Add Case Mgt. Asst.	0.50	\$18,134
Cut Involuntary Commitment Investigator	(1.00)	(\$42,765)
Cut OA2	(1.50)	(\$42,809)
Add Program Development Specialist	1.00	\$59,285
Add CFS Supervisor	0.75	\$61,749

Quality Improvement & Stakeholder Relations

Behavioral Health
Community and Family Svcs

Description

The purpose of Quality Improvement and Stakeholder Relations is to provide structured oversight and monitoring of the quality of behavioral health services and programs including assistance with development of outcome and quality indicators. The program is responsible for coordinating and staffing Behavioral Health Advisory Councils for adults and children.

Budget Overview

	1996-97	1997-98	1998-99	
	<u>Actual</u>	<u>Adopted</u>	<u>Adopted</u>	<u>Difference</u>
		<u>Budget</u>	<u>Budget</u>	
Staffing FTE	12.56	12.75	8.77	(3.98)
Program Costs	\$967,135	\$888,828	\$638,727	(\$250,101)

Significant Changes - Expenditures

	<u>FTEs</u>	<u>Amount</u>
Add Mental Health Consultant	2.00	\$112,240
Transfer 1.0 Program Evaluation Spec. to Managed Care Admin	(1.00)	(\$51,153)
Decrease 2.93 Program Evaluation Spec (reduced Target Cities funding)	(2.93)	(\$144,448)
Cut Alcohol & Drug Spec (reduced Target Cities funding)	(0.25)	(\$13,591)
Cut Principle Investigator (reduced Target Cities funding)	(0.56)	(\$57,216)
Cut Office Asst. 2 (reduced Target Cities funding)	(1.37)	(\$41,125)
Add Program Dev. Tech	0.13	\$5,973
Reduce Temporary Help		(\$27,835)

Managed Care Contracts

Description

Child, Adolescent and Adult Plan (CAAPCare) is a mental health managed care organization responsible for assuring effective, managed mental health services for 47,000 Oregon Health Plan members in Multnomah County. Services are contracted out to over 60 agencies and individual practitioners.

Managed care contracts are designed to provide appropriate high quality service, to reduce unnecessary or duplicative services, and to provide broad access to mental health care at a reasonable cost.

Budget Overview

	1996-97 <u>Actual</u>	1997-98 Adopted <u>Budget</u>	1998-99 Adopted <u>Budget</u>	<u>Difference</u>
Staffing FTE	0.00	0.00	0.00	0.00
Program Costs	\$0	\$0	\$19,582,588	\$19,582,588

Significant Changes - Expenditures

	<u>Amount</u>
Decrease Managed Care Professional Services	(\$32,640)
Increase Managed Care Contracted Services. From Adult and Children's Mental Health Contracts. All mental health capitation contracted services show here.	\$18,700,429
Increase Pass Through	\$740,544

Community Programs and Partnerships (DCPP)

Community and Family Svcs

Description

The Division of Community Programs and Partnerships is committed to promoting thriving and resilient children, families, and communities throughout Multnomah County. It focuses on reducing poverty in the community and in families; promotes high school completion; and tries to prevent both domestic violence and juvenile crime. The Division carries out these goals through multiple strategies that integrate community-based services, affordable housing, public infrastructure, low income weatherization, energy assistance; and school-based intensive counseling services.

The Division targets services to more than 100,000 households in the County with incomes at or below 125% of Federal Poverty Level, including more than 18,000 households estimated to be at risk of homelessness, and to the 131,580 children under age 18 living in Multnomah County (1990 Census). These households are at risk of poverty, homelessness, and developmental delays.

Four policy boards govern the programs of this Division. The Community Action Commission is charged with providing policy direction, oversight, and advocacy on poverty issues. The Policy Advisory Board advises the Division on the use of the federal community development block grant (CDBG) and other entitlement resources. The Housing and Community Development Commission, provides policy and program direction on housing issues. The Multnomah Commission on Children and Families (MCCF) is responsible for planning services for children and families.

The Division of Community Programs and Partnerships is a combination of two Divisions (Community Action and Development, and Child, Youth, and Family Programs). The merger occurred in FY 1997/98, but FY 1998/99 is the first year of a combined budget. The blended programs are oriented toward achieving the County Benchmarks.

Action Plans

- Implement the Anti-Poverty Plan through contracts and community planning processes, with particular emphasis on homeless families with children, housing development programs, child hunger, domestic violence, and concentrations of poverty, in order to focus and redirect public funding toward reduction of family poverty, by June 30, 1999.
- Design a coordinated, new service delivery system through the Request for Proposal process. Current planning around workforce development and community building, will help to streamline service access and lay the foundation for closer achievement of County urgent benchmarks, by June 30, 1999.

Significant Changes - Revenues

	<u>Amount</u>
Decrease HUD CDBG	(\$1,641,942)
Decrease Welfare Reform	(\$1,559,771)
Decrease SIP	(\$1,000,000)
Decrease Enterprise Community	(\$870,000)
Decrease FPSSP	(\$575,353)
Decrease City HUD CDBG	(\$488,613)
Decrease Great Start	(\$687,730)
Decrease HUD Family Futures	(\$486,284)

Community Programs and Partnerships (DCPP)

Community and Family Svcs

Decrease OCCYSC-JSA	(\$435,204)
Decrease LIEAP	(\$312,955)
Decrease Youth Investment	(\$579,676)
Decrease City SOS	(\$250,000)
Decrease CSD- Crisis Nurseries (reclassification from 2315)	(\$246,330)
Decrease City ESGP	(\$235,267)
Decrease SAFAH	(\$230,000)
Decrease HAP SHP	(\$209,159)
Decrease YEEP/City	(\$206,816)
Decrease LIEAP WX	(\$166,558)
Decrease City Youth Shelter	(\$164,868)
Decrease SRI	(\$132,414)
Decrease HUD/Turning Point	(\$129,503)
Decrease REACH	(\$128,500)
Decrease Utility Rebates	(\$100,000)
Decrease City Youth Gang	(\$83,360)
Decrease CCDBG	(\$81,731)
Decrease City Relocation	(\$28,119)
Decrease City Caring Community	(\$28,020)
Decrease Multnomah ESD	(\$23,861)
Increase Private Plumbing/PDX	\$20,000
Increase LIRHF	\$21,762
Increase Bottles & Cans	\$30,000
Increase YEEP BPA	\$30,000
Increase DOE WX	\$42,604
Increase EA-TANF	\$55,000
Increase CSBG	\$57,428
Increase City SOS/PPL	\$73,697
Increase FEMA	\$74,079
Increase SHAP	\$101,717
Increase City/HAP PILOT	\$102,899
Increase HUD/Horizons	\$104,445
Increase Meyer Foundation	\$125,000
Increase City Emergency	\$128,588
Increase EHA	\$131,521
Increase County General Fund	\$2,252,642
Add HUD/Pathways	\$378,902
Increase YEEP BPA	\$30,000

Significant Changes - Expenditures

The significant changes are shown in detail at the program level.

Amount
(\$6,913,426)

Community Programs and Partnerships (DCPP)

Community and Family Svcs

<u>Budget Trends</u>	1997-98		1998-99		<u>Difference</u>
	1996-97 <u>Actual</u>	Current <u>Estimate</u>	Adopted <u>Budget</u>	Adopted <u>Budget</u>	
Staffing FTE	62.21	68.00	68.50	57.35	(11.15)
Personal Services	\$3,065,234	\$2,930,148	\$3,486,889	\$3,110,133	(\$376,756)
Contractual Services	19,766,049	26,801,550	28,708,928	22,017,211	(6,691,717)
Materials & Supplies	915,675	1,244,377	1,274,909	1,057,138	(217,771)
Capital Outlay	<u>30,889</u>	<u>0</u>	<u>4,600</u>	<u>0</u>	<u>(4,600)</u>
Total Costs	\$23,777,847	\$30,976,075	\$33,475,326	\$26,184,482	(\$7,290,844)
Program Revenues	\$14,389,700	\$19,726,612	\$22,225,860	\$12,688,204	(\$9,537,656)
General Fund Support	\$9,388,147	\$11,249,463	\$11,249,466	\$13,496,278	\$2,246,812

<u>Costs by Program</u>	1997-98		1998-99		<u>Difference</u>
	1996-97 <u>Actual</u>	Adopted <u>Budget</u>	Adopted <u>Budget</u>		
Division Management	\$876,412	\$2,689,708	\$1,008,716		(\$1,680,992)
Delinquency Prevention	3,000,691	3,414,599	3,859,028		444,429
Community Service	14,764,467	17,627,184	8,672,070		(8,955,114)
Domestic Violence	0	0	1,721,932		1,721,932
Weatherization/Energy Assistance	1,240,303	1,281,438	2,906,860		1,625,422
Housing/Public Works	1,076,638	5,196,227	3,864,728		(1,331,499)
School Based	<u>2,819,336</u>	<u>3,266,170</u>	<u>4,151,148</u>		<u>884,978</u>
Total Costs	\$23,777,847	\$33,475,326	\$26,184,482		(\$7,290,844)

<u>Staffing by Program</u>	1997-98		1998-99		<u>Difference</u>
	1996-97 <u>Actual</u>	Adopted <u>Budget</u>	Adopted <u>Budget</u>		
Division Management	10.93	10.50	9.60		(0.90)
Delinquency Prevention	1.00	1.75	4.00		2.25
Community Service	29.72	31.75	14.75		(17.00)
Domestic Violence	0.00	0.00	1.00		1.00
Weatherization/Energy Assistance	7.00	6.00	6.00		0.00
Housing/Public Works	4.94	5.50	4.50		(1.00)
School Based	<u>8.63</u>	<u>13.00</u>	<u>17.50</u>		<u>4.50</u>
Total Staffing FTE's	62.21	68.50	57.35		(11.15)

Division Management

Community and Family Svcs

Description

Division Management is responsible for bringing issues and concerns about poverty, high school completion, domestic violence, and juvenile crime prevention to public consciousness and for developing and implementing strategies to address these issues. The unit monitors and highlights issues of poverty, hunger, homelessness, child development, youth and family assets, and community objectives. The division administers federal/state entitlement resources in conjunction with other funding sources, including the City of Portland. The unit also serves as the Office of Community Action and operates Touchstone school programs and Family Resource Centers.

Federal and state funding sources mandate advocacy, planning, and program management. A Community Action administering board and a local Commission on Children and Families also provide oversight.

Budget Overview

	1996-97	1997-98	1998-99	
	<u>Actual</u>	<u>Adopted</u>	<u>Adopted</u>	<u>Difference</u>
Staffing FTE	10.93	10.50	9.60	(0.90)
Program Costs	\$876,412	\$2,689,708	\$1,008,716	(\$1,680,992)

Significant Changes - Expenditures

	<u>FTEs</u>	<u>Amount</u>
Increase Administrative Secretary from .50 to 1.0 FTE	0.50	\$19,425
Reclassify CFS Mgr. to CFS Mgr. Sr.		\$12,788
Add .10 CFS Supervisor and transfer from Comm Services.	0.60	\$42,283
Transfer 1.0 Data Analyst to Operations Div.	(1.00)	(\$50,023)
Transfer 1.0 Program Dev. Tech to Delinquency Prevention	(1.00)	(\$41,976)
Transfer 1.0 Program Dev. Sr. to Director's Office	(1.00)	(\$65,723)
Transfer 1.0 Office Asst. Sr. from Community. Services.	1.00	\$41,989
Decrease Pass-through for MCCF funding sources. Adjustment to estimated carry over.		(\$1,669,380)
Increase Professional Services.		\$54,000
Increase Supplies		\$25,894

Housing & Public Works

Community and Family Svcs

Description

The purpose of Housing and Public Works is to provide and improve access to affordable housing in the community. The program is responsible for administering federal, state, and local resources intended to expand housing and infrastructure options in low/moderate income communities. The program manages the emergency housing clearinghouse; works collaboratively to plan and develop affordable and special needs housing; monitors operations of housing projects for homeless families (Turning Point, Richmond Place, Willow Tree, and Sunrise Place); monitors the Affordable Housing Development Program (Tax-foreclosed Properties) and the Strategic Investment Program. The unit also provides veterans services to homeless and low-income veterans and their families. Special attention is paid to funding needed public works projects to strengthen low-income neighborhoods in unincorporated Multnomah County, Troutdale, Fairview, Wood Village, and Maywood Park.

The Housing and Community Development Plan, the Comprehensive Housing Affordability Strategy, and funding source regulations that limit local discretion govern program activities.

Budget Overview

	1996-97 Actual	1997-98 Adopted Budget	1998-99 Adopted Budget	Difference
Staffing FTE	4.94	5.50	4.50	(1.00)
Program Costs	\$1,076,638	\$5,196,227	\$3,864,728	(\$1,331,499)

Key Results

	1994-95 Actual	1995-96 Actual	1996-97 Actual	1997-98 Original Projection	1997-98 Current Estimate	1998-99 Projected
Number of affordable housing units program planned and/or funded in the community.	NA	NA	241	9	241	50

Significant Changes - Expenditures

	FTEs	Amount
Transfer Case Manager 2 from Community Services	0.50	\$23,322
Cut Fiscal Assistant Sr.; decreased funding from City of Portland	(1.00)	(\$41,992)
Transfer Office Assistant 2 to Director's Office	(1.00)	(\$31,438)
Reclassify Program Development Spec Sr. to CFS Supervisor	(0.50)	(\$36,367)
Transfer Program Development Tech from Community Services	1.00	\$43,074
Decrease Pass Through funded by SIP Housing		(\$959,656)
Move Enterprise Community to 0142		(\$870,000)
Move Housing Assistance Contracted Services from Community Services		\$1,854,219
Add Vouchers for Homeless Families		\$100,700
Decrease Pass through funded by CDBG Flood Abatement. A two-year grant has expired.		(\$1,617,230)

Community Services

Community and Family Svcs

Description

The Community Services Program unit uses a variety of community-based service delivery approaches to provide families, children, and communities with options and opportunities that help them respond to crises. The services focus on helping low income families obtain and maintain affordable housing and family-wage employment. They also help young people obtain the skills needed to succeed and graduate from school. The program addresses these areas through contracts for Community Action (anti-poverty) services, contracts for Family Centers, direct operation of Family Resource Centers, and contracts for the coordination of Caring Communities and other innovative projects.

This Program targets services to more than 100,000 County residents with incomes of less than 125% of the federal poverty level, approximately 18,412 households estimated to be at risk of homelessness, over 15,000 people who may be homeless, and the 131,580 children under age 18 and their families.

Budget Overview

	1996-97	1997-98	1998-99	
	<u>Actual</u>	<u>Adopted</u>	<u>Adopted</u>	<u>Difference</u>
Staffing FTE	29.72	31.75	14.75	(17.00)
Program Costs	\$14,764,467	\$17,627,184	\$8,672,070	(\$8,955,114)

Key Results

	1994-95	1995-96	1996-97	1997-98	1997-98	1998-99
	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>	<u>Original</u>	<u>Current</u>	<u>Projected</u>
Percent of families and youth served by Division programs who maintain or increase household income.	NA	40%	54%	54%	54%	55%
Percentage of homeless and at risk families and youth served by Division programs who obtain stable housing.	NA	30%	47%	75%	50%	50%
Percent of families with children birth to age 5 who increased participation in specific activities identified as interim indicators for the readiness to learn benchmark.	NA	84%	85%	85%	85%	85%

Significant Changes – Expenditures

	<u>FTEs</u>	<u>Amount</u>
Transfer Case Manager 2 to Housing/Public Works	(0.50)	(\$23,322)
Cut Case Manager 2	(2.00)	(\$95,122)
Transfer CFS Supervisor to Division Management	(0.50)	(\$42,283)
Transfer Office Assistant 2 to Weatherization/Energy Assistance	(1.00)	(\$32,530)
Transfer Office Assistant Sr. to Division Management	(1.00)	(\$42,835)
Add funding for Cully Family Center		\$100,700
Add funding for Kelly Family Center		\$171,190
Transfer 1.0 Program Development Spec to Domestic Violence and	(2.00)	(\$107,855)
Transfer 1.0 Program Development Spec to School Based		
Transfer Program Development Tech to Housing/Public Works	(1.00)	(\$43,074)
Transfer Family Intervention Specialist from School Based	1.00	\$48,347

Community Services

Community and Family Svcs

Cut SHAC Program Coordinator, program ended	(1.00)	(\$46,686)
Cut SHAC Case Management Assistant, program ended	(9.00)	(\$288,045)
Decrease Temporary		(\$90,258)
Move Energy Asst. Contracted Services. To Weatherization/Energy Asst.		(\$1,724,884)
Decrease Enterprise Community Contracts		(\$870,000)
Move Housing Assistance Contracted Services to Housing/Public Works		(\$2,108,767)
Decrease Welfare Reform Contracted Services		(\$1,559,771)
Decrease Single Adult Shelter & Housing		(\$772,259)

Domestic Violence

Community and Family Svcs

Description

The goal of the Domestic Violence Program is to reduce domestic violence in Multnomah County. The program is responsible for establishing and maintaining a continuum of services that provide safe and supportive services to victims of domestic violence. This includes support for people who are homeless due to domestic violence. Efforts are also aimed at prevention and education of child abuse and domestic violence. The program purchases services along a continuum from community-based providers, including safe shelter, transitional and self-sufficiency services for homeless shelter residents, domestic violence support services for people not using shelters, and school-based prevention education.

The Division's domestic violence services are coordinated with the Family Violence Intervention Steering Committee.

Budget Overview

	1996-97 <u>Actual</u>	1997-98 Adopted <u>Budget</u>	1998-99 Adopted <u>Budget</u>	<u>Difference</u>
Staffing FTE	0.00	0.00	1.00	1.00
Program Costs	\$0	\$0	\$1,721,932	\$1,721,932

<u>Key Results</u>	1994-95 <u>Actual</u>	1995-96 <u>Actual</u>	1996-97 <u>Actual</u>	1997-98 Original <u>Projection</u>	1997-98 Current <u>Estimate</u>	1998-99 <u>Projected</u>
Percentage of domestic violence victims served by Division programs who maintain or increase household income.	NA	NA	84%	84%	84%	84%
Percentage of domestic violence victims served by Division programs who reside in a safe, stable environment at close of services.	NA	NA	50%	50%	50%	50%

Significant Changes - Expenditures

	<u>FTEs</u>	<u>Amount</u>
Transfer Program Development Spec from Community Services	1.00	\$57,668
Increase Domestic Violence contract services		\$469,874

Weatherization & Energy Assistance Program

DCPP

Community and Family Svcs

Description

The Weatherization & Energy Assistance Program contributes to the economic self-sufficiency of families in poverty by providing low income families with the means to reduce their home energy cost burden. The program is responsible for managing public resources that help low income people reduce their use of home energy, increase their ability to pay for home energy, and eliminate life and safety problems in the homes of low income households. These problems contribute to poor health and delayed development of children in the home. The program conducts energy audits in approximately 350 homes per year, insulates homes using a Welfare-to-Work training crew, purchases other weatherization measures for homes as needed, and provides one-time utility payments for low income households.

Services are provided in accordance with federal/state and other funding source mandates.

Budget Overview

	1996-97 <u>Actual</u>	1997-98 Adopted <u>Budget</u>	1998-99 Adopted <u>Budget</u>	<u>Difference</u>
Staffing FTE	7.00	6.00	6.00	0.00
Program Costs	\$1,240,303	\$1,281,438	\$2,906,860	\$1,625,422

Key Results

	1994-95 <u>Actual</u>	1995-96 <u>Actual</u>	1996-97 <u>Actual</u>	1997-98 Original <u>Projection</u>	1997-98 Current <u>Estimate</u>	1998-99 <u>Projected</u>
Number and % of households where weatherization assistance has eliminated life, health, and safety problems.	NA	NA	146 98%	172 80%	172 80%	172 80%

Significant Changes - Expenditures

	<u>FTEs</u>	<u>Amount</u>
Transfer Office Assistant 2 from Community Services	1.00	\$32,530
Cut Weatherization Specialist	(1.00)	(\$40,051)
Increase Temporary		\$32,339
Increase Pass Through funded by LIEAP Energy & Weatherization		\$1,437,032
Increase Pass Through funded by DOE		\$77,596
Decrease Pass Through fund by City Block by Block		(\$33,492)

Delinquency Prevention

Community and Family Svcs

Description

The goal of the Delinquency Prevention Program is to provide youth with skills and alternatives that lead them toward productive lives free from crime. The program is responsible for providing community, family, and personal supports for young people who are exhibiting multiple or severe risk factors linked to juvenile crime. To do so, the program funds and administers a continuum of youth investment and other intervention services provided to youth and their families in the community.

Budget Overview

	1996-97 <u>Actual</u>	1997-98 Adopted <u>Budget</u>	1998-99 Adopted <u>Budget</u>	<u>Difference</u>
Staffing FTE	1.00	1.75	4.00	2.25
Program Costs	\$3,000,691	\$3,414,599	\$3,859,028	\$444,429

Key Results

	1995-96 <u>Actual</u>	1996-97 <u>Actual</u>	1997-98 Original <u>Projection</u>	1997-98 Current <u>Estimate</u>	1998-99 <u>Projected</u>
Percent of youth served by Division programs who did not enter or re-enter the juvenile justice system during the year.	NA	80%	70%	70%	70%

Significant Changes - Expenditures

	<u>FTEs</u>	<u>Amount</u>
Add Program Development Specialist	0.25	\$16,792
Transfer Program Development Technician from Division Management	1.00	\$43,256
Increase Contracted Services for Youth Investment		\$319,697
Add Homeless Youth Services. Add 1.00 Program. Dev. Specialist and contracted services including Winter Shelter and Transitional Housing	1.00	\$181,365
Decrease Pass Through/JSA & Great Start		(\$580,000)
Increase Pass Through for YWCA Community Transition School		\$50,000
Increase Contracted Services for Intervention		\$377,566

School-Based Services

Community and Family Svcs

Description

The goal of the School-based Services Program is to increase high school completion rates. The Program provides services to children and their families from early childhood through high school. The programs build family assets, eliminate barriers to school attendance, and promote successful education. The Program purchases a range of early childhood and school support services from community-based providers as well as operating intensive case management services (Touchstone) at school sites.

Budget Overview

	1996-97 <u>Actual</u>	1997-98 <u>Adopted Budget</u>	1998-99 <u>Adopted Budget</u>	<u>Difference</u>
Staffing FTE	8.63	13.00	17.50	4.50
Program Costs	\$2,819,336	\$3,266,170	\$4,151,148	\$884,978

Key Results

	1994-95 <u>Actual</u>	1995-96 <u>Actual</u>	1996-97 <u>Actual</u>	1997-98 <u>Original Projection</u>	1997-98 <u>Current Estimate</u>	1998-99 <u>Projected</u>
Percentage of youth receiving services who attend school, job training, or employment at time of exit.	NA	NA	NA	NA	NA	80%*
% of families served who showed increased strengths at time of exit	NA	NA	NA	NA	80%	80%*

*These are new Key Results.

Significant Changes - Expenditures

	<u>FTEs</u>	<u>Amount</u>
Cut CFS Specialist	(0.50)	(\$29,375)
Transfer Family Intervention Specialist to Community Services	(1.00)	(\$48,347)
Transfer CFS Supervisor from Community Services	0.50	\$37,742
Transfer Program Development Specialist from Community Services	1.00	\$48,817
Increase Pass Through funded by Meyer Foundation		\$125,000
Increase Pass Through funded by County General Fund		\$293,345
Touchstone expands services, increase sites by 4 to a total of 13. 4.00 Family Intervention Specialists and 0.50 Office Asst. 2	4.50	\$357,332
Add SE Coordinator		\$25,175
Add GEARS Program		\$98,686
Increase Pass Through for School Age Child Care		\$60,000
Decrease Pass Through funded by MCCF revenue		(\$102,716)

Description

The Developmental Disabilities Services Division plans strategies and generates resources that facilitate accessibility, inclusion and choices for individuals with developmental disabilities and their families. The program;

- determines eligibility for publicly funded services,
- develops and maintains services for children and adults with developmental disabilities,
- provides protective services in cases of alleged abuse,
- provides information and access to available resources for disabled people

The program uses a combination of direct service (intake and assessment, service coordination, protective services), and contracted service (residential and vocational services.)

The Developmental Disabilities Services Division will serve over 3,700 individuals and families in FY 1998-99. The number of people served will increase in the next few years because of continued downsizing of Fairview Training Center in Marion County. During 1998-99, 50 persons will move from Fairview to Multnomah County. Most funding (96%) is tied to state and federal funding requirements, as outlined in law and administrative rules. The Multnomah County Developmental Disabilities Coordinating Council advises the program and assists in planning efforts.

Action Plans

- Initiate a redesign of case management services to address development of quality standards and utilization review systems, incorporate stakeholder input and begin to implement System reform during FY 1998-99 to achieve increased productivity, maximize access and service capacity, and improve quality.
- Utilize existing resources during FY 1998-99 in innovative ways by implementing common strategies with Caring Communities in order to support individuals and families with developmental disabilities to reach self-sufficiency, improve their quality of life and increase their contribution to the community.
- Begin implementation of state long-range plan to include successful siting of residential programs for Fairview clients, development of regional crisis services system and expansion of services to children and wait list individuals.

Significant Changes - Revenues

	<u>Amount</u>
Increase SMHD DD 48 Case Management	\$329,877
Increase SMHD DD 53 Transportation	\$76,845
Increase SMHD DD 54 Employment	\$1,259,470
Increase SMHD DD 50 Residential Facilities	\$3,133,860
Increase SMHD DD 51 semi-independent Living	\$436,020
Increase SMHD DD 44 Crisis Intervention	\$17,207
Increase SMHD DD 49 Family Support	\$20,339
Increase SMHD DD 57 Special Projects	\$82,012
Increase Tri-Met Reimbursement	\$26,000
Increase County General Fund	\$84,984

Significant Changes - Expenditure

Detail can be found on the program level pages.

Developmental Disabilities

Community and Family Svcs

Budget Trends

	1996-97	1997-98	1997-98	1998-99	
	<u>Actual</u>	<u>Current Estimate</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	<u>Difference</u>
Staffing FTE	69.00	78.80	74.80	78.80	4.00
Personal Services	\$3,317,012	\$3,465,725	\$3,635,135	\$3,914,417	\$279,282
Contractual Services	26,542,497	28,048,063	28,027,936	33,123,862	5,095,926
Materials & Supplies	810,307	1,054,850	1,098,782	1,209,371	110,589
Capital Outlay	<u>13,152</u>	<u>27,158</u>	<u>0</u>	<u>0</u>	<u>0</u>
Total Costs	\$30,682,968	\$32,595,796	\$32,761,853	\$38,247,650	\$5,485,797
Program Revenues	\$28,591,851	\$30,737,291	\$30,903,349	\$36,298,460	\$5,395,111
General Fund Support	\$2,091,117	\$1,858,505	\$1,858,504	\$1,949,190	\$90,686

Costs by Program

	1996-97	1997-98	1998-99	
	<u>Actual</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	<u>Difference</u>
Division Management	\$1,113,374	\$1,950,029	\$1,826,715	(\$123,314)
Vocational Services	8,276,812	8,552,658	9,980,420	1,427,762
Residential Services	18,108,588	18,966,920	22,576,313	3,609,393
Adult Services Coordination	645,368	735,134	658,988	(76,146)
Youth Services Coordination	866,316	932,377	805,367	(127,010)
Protective Services	181,027	226,205	235,379	9,174
Intake and Assessment	190,910	149,935	101,907	(48,028)
Specialized Services	1,300,573	1,248,595	1,637,953	389,358
Community Integration Services	<u>0</u>	<u>0</u>	<u>424,608</u>	<u>424,608</u>
Total Costs	\$30,682,968	\$32,761,853	\$38,247,650	\$5,485,797

Staffing by Program

	1996-97	1997-98	1998-99	
	<u>Actual</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	<u>Difference</u>
Division Management	6.81	9.50	6.00	(3.50)
Vocational Services	4.73	4.00	5.00	1.00
Residential Services	15.66	15.00	15.00	0.00
Adult Services Coordination	11.98	14.00	12.00	(2.00)
Youth Services Coordination	15.58	16.50	13.60	(2.90)
Protective Services	3.00	4.00	4.00	0.00
Intake and Assessment	3.40	3.00	2.00	(1.00)
Specialized Services	7.84	8.80	13.20	4.40
Community Integration Services	<u>0.00</u>	<u>0.00</u>	<u>8.00</u>	<u>8.00</u>
Total Staffing FTE's	69.00	74.80	78.80	4.00

Division Management

Developmental Disabilities Community and Family Svcs

Description

Division Management is responsible for maximizing and stabilizing the delivery system composed of supports and resources for people with developmental disabilities and their families. The unit oversees service needs and resources, develops service options, contracts for services, monitors service providers and individual placements, and provides technical assistance to providers to assure quality service. The unit also provides management leadership in the areas of strategic planning, RESULTS, community building, workforce diversity and cultural competency.

Budget Overview

	1996-97	1997-98	1998-99	
	<u>Actual</u>	<u>Adopted</u>	<u>Adopted</u>	<u>Difference</u>
		<u>Budget</u>	<u>Budget</u>	
Staffing FTE	6.81	9.50	6.00	(3.50)
Program Costs	\$1,113,374	\$1,950,029	\$1,826,715	(\$123,314)

Significant Changes - Expenditures

	<u>FTEs</u>	<u>Amount</u>
Transfer 2.00 Case Management Asst. to Specialized Services and Community Integration Services	(2.00)	(\$69,479)
Transfer 1.5 Program Dev. Spec. to Community Integration Services	(1.50)	(\$81,839)
Transfer Deputy Director to Dept. Mgmt.	(1.00)	(\$97,258)
Add CFS Manager Sr.	1.00	\$102,350
Add Office Assistant 2	1.00	\$31,808
Transfer Case Manager 2 to Vocational Services	(1.00)	(\$52,158)
Reclassify 1.0 Office Assistant Sr to Administration Secretary		\$934
Increase Bldg. Mgmt.		\$23,176

Vocational Services

Description

Vocational Services provides a variety of vocational opportunities for people with developmental disabilities. This service element is responsible for creating and implementing community employment options for adults with developmental disabilities. It contracts for vocational services, monitors and develops options, and provides technical assistance to providers, individuals and families in order to support individuals in community employment.

More than 846 adults will be served during FY 1998-99. Need for vocational services is growing due to the numbers of students completing secondary education and due to adults moving from Fairview back to the community who are capable of working.

Budget Overview

	1996-97 <u>Actual</u>	1997-98 Adopted <u>Budget</u>	1998-99 Adopted <u>Budget</u>	<u>Difference</u>
Staffing FTE	4.73	4.00	5.00	1.00
Program Costs	\$8,276,812	\$8,552,658	\$9,980,420	\$1,427,762

Key Results

Number and % of individuals in funded vocational services receiving 25 hours of support each week, as required by Oregon Administrative Rule.

*CFS has added new Key Results for this program. FY 98/99 is the baseline year thus data for previous years is not applicable.

	1995-96 <u>Actual</u>	1996-97 <u>Actual</u>	1997-98 Original <u>Projection</u>	1997-98 Current <u>Estimate</u>	1998-99 <u>Projected</u>
	NA	NA	NA	NA	NA*

Significant Changes - Expenditures

	<u>FTEs</u>	<u>Amount</u>
Transfer Case Manager 2 from Division Management	1.00	\$52,158
Increase Pass-through funded by SMHD		\$1,327,712

Residential Services

Description

Residential Services provides residential assistance and community integration for people with developmental disabilities. This service element is responsible for creating and maintaining a wide range of residential opportunities to meet varying needs. It contracts for services, monitors and develops options, and provides technical assistance to providers, individuals, and families in order to assure a selection of living options.

Residential Services assists approximately 750 adults. Need is growing as disabled adults move from Fairview back to the community and as people in crisis are identified.

Budget Overview

	1996-97	1997-98	1998-99	
	<u>Actual</u>	<u>Adopted</u>	<u>Adopted</u>	<u>Difference</u>
Staffing FTE	15.66	15.00	15.00	0.00
Program Costs	\$18,108,588	\$18,966,920	\$22,576,313	\$3,609,393

Key Results

	1995-96	1996-97	1997-98	1997-98	1998-99
	<u>Actual</u>	<u>Actual</u>	<u>Original</u>	<u>Current</u>	<u>Projected</u>
Number and Percentage of individuals who moved from one residence to another 3 or more times in the fiscal year.	NA	NA	NA	NA	20%*

*CFS has added new Key Results for this program. FY 98/99 is the baseline year thus data for previous years is not applicable.

Significant Changes - Expenditures

	<u>FTEs</u>	<u>Amount</u>
Transfer Case Manager 2 from Adult Services Coordination	2.00	\$83,916
Transfer Program Development Specialist to Specialized Services	(2.00)	(\$111,870)
Increase Pass Through		\$408,590
Reclassify 1.0 CFS Supervisor to CFS Administrator		
Increase Contracted Services funded by SMHD		\$3,103,594

Adult Services Coordination

Description

Adult Services Coordination provides services to eligible adults with developmental disabilities, living in Multnomah County, who do not have other funds for residential or vocational services. It is responsible for providing service coordination to protect the health, safety, and rights of the disabled. The unit facilitates access to community resources including activities such as advocacy, coordinating and monitoring of services, information and referral, crisis intervention, and development of community supports.

In Multnomah County, despite an array of contracted residential and vocational services, approximately 540 adults remain without funded services. As greater numbers of individuals with developmental disabilities apply for and are found eligible for service coordination, the number of persons waiting for funded services also increases.

Budget Overview

	1996-97 <u>Actual</u>	1997-98 <u>Adopted Budget</u>	1998-99 <u>Adopted Budget</u>	<u>Difference</u>
Staffing FTE	11.98	14.00	12.00	(2.00)
Program Costs	\$645,368	\$735,134	\$658,988	(\$76,146)

Key Results

Number and percentage of individuals who experience a change in assigned care manager (Service Coordinator) during the fiscal year.

*CFS has added new Key Results for this program. FY 98/99 is the baseline year thus data for previous years is not applicable.

	1995-96 <u>Actual</u>	1996-97 <u>Actual</u>	1997-98 <u>Original Projection</u>	1997-98 <u>Current Estimate</u>	1998-99 <u>Projected</u>
	NA	NA	NA	NA	10%*

Significant Changes - Expenditures

	<u>FTEs</u>	<u>Amount</u>
Transfer 2.00 Case Manager to Residential Services	(2.00)	(\$83,916)

Youth Services Coordination

Description

Youth Services Coordination works with public school districts to assist children and youth through the age of 21 and their families in identifying and accessing resources that will facilitate the child's progress toward educational achievement and transition to adult responsibilities. The service focus is on children with special education needs and/or developmental disabilities. It is responsible for providing information, intake, access to funding, educational forums, and transition to adult services.

During FY 1998-99, Youth Services Coordination will provide services to over 1,200 children and their families.

Budget Overview

	1996-97 <u>Actual</u>	1997-98 Adopted <u>Budget</u>	1998-99 Adopted <u>Budget</u>	<u>Difference</u>
Staffing FTE	15.58	16.50	13.60	(2.90)
Program Costs	\$866,316	\$932,377	\$805,367	(\$127,010)

Key Results

	1995-96 <u>Actual</u>	1996-97 <u>Actual</u>	1997-98 Original <u>Projection</u>	1997-98 Current <u>Estimate</u>	1998-99 <u>Projected</u>
Of all children referred, number and % who are age 15 and under at the time of Intake/referral.	NA	NA	NA	NA	78%*

*CFS has added new Key Results for this program. FY 98/99 is the baseline year thus data for previous years is not applicable.

Significant Changes - Expenditures

	<u>FTEs</u>	<u>Amount</u>
Transfer Case Manager 2 to Community Integration Services	(1.90)	(\$96,912)
Reclassify 1.0 CFS Supervisor to CFS Administrator		
Transfer Office Assistant to Specialized Services	(1.00)	(\$35,542)

Protective Services

Developmental Disabilities Community and Family Svcs

Description

Protective Services is responsible for investigating allegations of abuse against people with developmental disabilities and to intervene in order to protect the individual. The unit responds to allegations of abuse or neglect within 24 hours of referral, as mandated by the State, protects the person with developmental disabilities immediately, investigates the situation, and recommends options to prevent further problems.

Protective Services will respond to over 300 allegations of sexual, physical, verbal or emotional abuse, neglect, and financial exploitation during FY 1998-99. It appears that allegations of abuse and neglect are increasing.

Budget Overview

	1996-97	1997-98	1998-99	
	Actual	Adopted	Adopted	Difference
		Budget	Budget	
Staffing FTE	3.00	4.00	4.00	0.00
Program Costs	\$181,027	\$226,205	\$235,379	\$9,174

Key Results

	1994-95	1995-96	1996-97	1997-98	1997-98	1998-99
	Actual	Actual	Actual	Original	Current	Projected
				Projection	Estimate	
Number and % of individuals for whom investigation recommendations are completed and final report distributed within 30 days.	161 59%	137 58%	273 71%	150 60%	300 75%	75%

Significant Changes - Expenditures

No significant changes.

Intake and Assessment

Description

The Intake and Assessment Unit determines eligibility and access to resources appropriate to the needs of disabled individuals and their families. The Unit provides diagnosis and evaluation services for people going through intake and makes assessments of people already being served in programs.

The Developmental Disabilities Services Division serves over 2,753 people a year, each of which has used the services of the Intake and Assessment Unit. Approximately 146 adults will seek eligibility, and approximately 73% of those applicants will be determined eligible.

Criteria used to establish eligibility for Developmental Disabilities services are found in ORS Chapter 427.

Budget Overview

	1996-97 <u>Actual</u>	1997-98 <u>Adopted Budget</u>	1998-99 <u>Adopted Budget</u>	<u>Difference</u>
Staffing FTE	3.40	3.00	2.00	(1.00)
Program Costs	\$190,910	\$149,935	\$101,907	(\$48,028)

Key Results

	1994-95 <u>Actual</u>	1995-96 <u>Actual</u>	1996-97 <u>Actual</u>	1997-98 <u>Original Projection</u>	1997-98 <u>Current Estimate</u>	1998-99 <u>Projected</u>
Percent of intakes and assessments completed within 60 days of first contact.	82%	76%	86%	85%	88%	88%

Significant Changes - Expenditures

	<u>FTEs</u>	<u>Amount</u>
Transfer Program Development Specialist to Community Integration Services	(1.00)	(\$43,749)

Specialized Services

Description

Specialized Services includes three service elements and provides specialized supports for people with developmental disabilities, their families, and service providers, in order to enhance the quality of life. The Family Support Program provides flexible and personalized support services to families with a member who has a developmental disability as a means to allow those members to continue living at home. The Training Service provides training for people with developmental disabilities, their families, service providers, and service staff. Case Manager Assistants provide support to child and adult consumers and families.

Family Support will serve over 120 families during FY 1998-99. Training is rapidly expanding to meet the needs of various groups of individuals and will serve approximately 800 individuals during 1998-99.

Budget Overview

	1996-97 Actual	1997-98 Adopted Budget	1998-99 Adopted Budget	Difference
Staffing FTE	7.84	8.80	13.20	4.40
Program Costs	\$1,300,573	\$1,248,595	\$1,637,953	\$389,358

Key Results

	1995-96 Actual	1996-97 Actual	1997-98 Original Projection	1997-98 Current Estimate	1998-99 Projected
Number and Percent of people attending training who evaluate it as very good to excellent.	511 92%	542 92%	80%	85%	85%

Significant Changes - Expenditures

	FTEs	Amount
Add .50 Case Management Assistant	0.50	\$15,904
Transfer 1.0 Case Management Assistant from Division Management	1.00	\$37,671
Transfer Case Manger 2 to Integrated Services	(0.10)	(\$5,216)
Transfer Office assistant 2 to Youth Services Coordinator	1.00	\$35,542
Transfer Program Development Spec. from Residential Services	2.00	\$111,870
Increase Pass-through funded by SMHD		\$170,062

Community Integration

Developmental Disabilities Community and Family Svcs

Description

Community Integration Services provides services to individuals in transition from institutional to community placements. The Fairview Closure Team will assist 50 individuals moving from Fairview Training Center in Marion County to eleven residential sites in Multnomah County during the 1998-99 fiscal year. The Crisis Diversion project provides crisis intervention and stabilization services to avoid institutionalization, thus enabling these individuals to remain with their families or in other community based placements.

Budget Overview

	1996-97 <u>Actual</u>	1997-98 Adopted <u>Budget</u>	1998-99 Adopted <u>Budget</u>	<u>Difference</u>
Staffing FTE	0.00	0.00	8.00	8.00
Program Costs	\$0	\$0	\$424,608	\$424,608

Key Results

	1995-96 <u>Actual</u>	1996-97 <u>Actual</u>	1997-98 Original <u>Projection</u>	1997-98 Current <u>Estimate</u>	1998-99 <u>Projected</u>
Number and Percent of individuals referred for crisis diversion that receive those services in their home	NA	NA	NA	NA	NA*

*CFS has added a new Key Result for this program. FY 98/99 is the baseline year thus data for previous years is not applicable.

Significant Changes - Expenditures

	<u>FTEs</u>	<u>Amount</u>
Transfer Case Management Assistant from Division Management	1.00	\$31,808
Add Case Manager 2	2.00	\$104,158
Transfer Case Manager 2 from Youth Services Coordination	1.90	\$96,912
Transfer Case Manager 2 from Specialized Services	0.10	\$5,216
Transfer Program Development Specialist from Intake and Assessment	1.00	\$43,749
Transfer Program Development Specialist from Division Management	1.50	\$81,839
Add Program Development Specialist	0.50	\$21,874