

**Transcript of the Board of Commissioners
Multnomah Building, Board Room 100
501 SE Hawthorne Blvd., Portland, Oregon
Thursday, May 8, 2014**

BUDGET WORK SESSION #6

Chair Marissa Madrigal called the meeting to order at 10:48 a.m. with Vice-Chair Diane McKeel and Commissioners Liesl Wendt, Loretta Smith and Judy Shiprack present.

Also attending were Jenny M. Madkour, County Attorney, and Marina Baker, Assistant Board Clerk.

[THE FOLLOWING TEXT IS THE BYPRODUCT OF THE CLOSED CAPTIONING OF THIS PROGRAM. THE TEXT HAS NOT BEEN PROOFREAD, AND SHOULD NOT BE CONSIDERED A FINAL TRANSCRIPT.]

Chair Madrigal: WE'RE GOING TO GO AHEAD AND GET STARTED IN ABOUT ONE MINUTE. [GAVEL] GOOD MORNING AGAIN. WE WILL NOW CONVENE BUDGET WORK SESSION NUMBER SIX. THE MEETING WILL COME TO ORDER.

Ms. Fuller: GOOD MORNING MADAM CHAIR, MEMBERS OF THE COMMISSION, JOANNE FULLER FROM THE HEALTH DEPARTMENT HERE. AND WE'RE FOLLOWING UP ON A FEW OF THE QUESTIONS THAT CAME UP IN OUR PRESENTATION LAST THURSDAY AND SO WE'RE JUST GOING TO BE ANSWERING FOUR QUESTIONS TODAY AND PROVIDING WRITTEN RESPONSES TO OTHER QUESTIONS. SO THE FIRST QUESTION THAT WE'RE GOING TO ANSWER IS THERE WAS A QUESTION ABOUT THE RATIO BETWEEN NURSES TO COMMUNITY HEALTH WORKERS IN THE HEALTHY BIRTH INITIATIVE. SO WE LOOKED BACK A COUPLE OF YEARS. IN 2011 AND 2012, THERE WAS A ONE TO ONE RATIO OF NURSES TO COMMUNITY HEALTH WORKERS IN THE HEALTHY BIRTH INITIATIVE. IN 2013, THERE WAS A 2.75 NURSES TO COMMUNITY HEALTH WORKERS -- TO ONE COMMUNITY HEALTH WORKER. IN THE PROPOSED BUDGET FOR NEXT YEAR, WITHIN OUR CONSTRAINTS AND ALL OF OUR BUDGET ASSUMPTIONS, THERE'S A 1:1 RATIO AGAIN, AND THEN IF WE WERE TO RECEIVE THE GRANT, WE WOULD BE HIRING A FEW MORE PEOPLE. WELL, AND JUST SO YOU KNOW, THAT 1:1 RATIO IS TWO NURSES AND TWO COMMUNITY HEALTH WORKERS. IN THE 2015 WITH THE GRANT, WHICH IS, AS YOU KNOW, NOT CURRENTLY LOADED IN THE BUDGET, WE WOULD LOAD IT IN THE BUDGET IF WE GET THE GRANT, THE RATIO WOULD BE .75:1 NURSES TO COMMUNITY HEALTH WORKERS. THE RATIO ACROSS THE HEALTH DEPARTMENT EXCLUDING CORRECTIONS HEALTH HAS BEEN PRETTY CONSISTENT WITH 3.5:1 RATIO OF NURSES TO COMMUNITY HEALTH WORKERS. SO THE NEXT QUESTION THAT CAME UP WAS A QUESTION ABOUT THE FUNDING FOR THE OUTSIDE HOSPITALIZATION SERVICES IN CORRECTIONS HEALTH AND KIND OF THE HISTORY OF HOW WE'VE BEEN

BUDGETING AND HOW WE'VE BEEN SPENDING IN THAT CORRECTIONS HEALTH CATEGORY. YOU CAN SEE THE CHART HERE, WHICH IS THE FACT THAT WHAT'S BEEN BUDGETED HASN'T KEPT UP WITH ACTUAL EXPENSE. AND IN 2004, IN RECOGNITION OF THAT, THE DEPARTMENT ACTUALLY LOADED ABOUT A MILLION DOLLARS WITHIN OUR CONSTRAINT AND SHIFTED THAT GENERAL FUND MONEY FROM OTHER PLACES IN THE DEPARTMENT INTO CORRECTIONS HEALTH. AND THEN YOU CAN SEE IN 2015 WHAT WE'RE REQUESTING IS A LITTLE ADDITIONAL THERE. SO THAT INCLUDES THE SHIFT OF THE MILLION DOLLARS THAT WE MADE IN 2014 AND THEN ADDS THE ADDITIONAL REQUESTS THAT WE HAVE FOR ONE TIME ONLY MONEY FOR 2015. SO WHAT WE'VE BEEN TRYING TO DO, WHAT THE DEPARTMENT'S BEEN TRYING TO DO IS TO BOTH CONTAIN THESE COSTS AS MUCH AS WE CAN, ALTHOUGH IT'S CHALLENGING BECAUSE WE NEED TO ADDRESS THE NEEDS OF THE PEOPLE WHO ARE PRESENTED TO US, AND THEN ALSO YOU CAN SEE THAT THEY ADDED ADDITIONAL MONEY TO TRY TO ADDRESS THAT, AND NOW, WE'RE LOOKING TO ADD A LITTLE BIT MORE. WE'RE HOPING THAT THE EXPENSE DROPS A LITTLE BIT IN THIS NEXT YEAR AS WE IMPLEMENT THE AFFORDABLE CARE ACT CHANGES THAT WE HAVE BEEN LOOKING AT. SO THAT'S THE ANSWER TO THOSE TWO QUESTIONS THERE. DO YOU HAVE ANY QUESTIONS? I'M HAPPY --

>> Comm. Smith: I HAVE A QUESTION. IN JUST LOOKING BACK OVER THE GRAPH OVER THE FOUR YEARS, AGAIN I STILL HAVE THE SAME QUESTIONS. IF WE KNOW WE'RE RUNNING ABOUT \$3 MILLION IN TERMS OF OUR HEALTH -- I KNOW THIS WAS NOT NECESSARILY YOUR BUDGET FOR THE PAST 40 YEARS BUT RECOGNIZING THAT, GOING FORWARD, IT WOULD SEEM TO ME AND IT'S THE SAME ISSUE WITH THE SHERIFF'S OFFICE. YOU KNOW, IT'S GOING TO COST APPROXIMATELY \$3 MILLION. SO WHY NOT -- YOU'RE GOING TO HAVE TO FIGURE OUT HOW TO CUT THAT BECAUSE WE'RE NOT GETTING ANY MORE MONEY.

>> SO COMMISSIONER, THAT IS WHY WE HAVE REQUESTED THE ADDITIONAL MONEY THAT WE REQUESTED AND WHY THE DEPARTMENT LOADED THE MILLION DOLLARS. IT IS MY HOPE THAT WITH THE ONE TIME ONLY MONEY THAT WE HAVE ASKED FOR AND THE MONEY THAT WE'VE LOADED NEXT YEAR, WE SEE THOSE EXPENSES DROP A LITTLE BIT AND THAT WE ARE ACTUALLY BUDGETING WHERE WE'RE BUDGETING. WE THEN ARE GOING TO NEED FIGURE OUT IN 2016 WHAT WE DO ABOUT THAT MONEY BEING ONE TIME ONLY AND WHETHER WE ARE ABLE TO CONVERT IT TO GENERAL FUND.

>> Comm. Smith: THAT'S THE POINT I'M GETTING TO, GOING FORWARD IN THE NEXT FISCAL YEAR, WHETHER IT'S YOU OR SOMEONE ELSE, THE ISSUE OF ACCURATELY BUDGETING FOR WHAT YOU KNOW IS GOING TO BE AN EXPENSE AND THEN, YOU KNOW, KEEPING IT THE WAY IT IS AND EXPECTING US TO GIVE YOU AN EXTRA \$500,000 OUT OF ONE TIME ONLY, YOU CAN'T EXPECT THAT EVERY YEAR.

>> SO COMMISSIONER ACTUALLY WE HAD ORIGINALLY REQUESTED THIS AS ONGOING GENERAL FUNDS BUT THERE WASN'T ENOUGH ONGOING GENERAL FUND FOR IT TO BE AN ONGOING GENERAL FUND ALLOCATION SO WHAT WE AGREED TO AS THE PLAN GOING FORWARD WAS FOR IT TO BE ONE TIME ONLY MONEY AND THAT WE KNOW NEXT YEAR IS THE YEAR WHERE WE DON'T REALLY KNOW WHAT THE CHANGES ARE GOING TO DO TO THIS BUDGET AND THEN IN SUBSEQUENT YEARS, WE WOULD BE FIGURING OUT WHAT THE NEXT STEPS WERE THAT WE NEEDED TO TAKE.

>> Comm. Smith: YOU AGREED TO THAT WITH WHOM? WITH THE CHAIR IN TERMS OF HER EXECUTIVE BUDGET, WHICH HAS TO BE ADOPTED BY THE ENTIRE BOARD SO WHAT I'M SAYING IS THAT'S ONE STRATEGY. I THINK YOU KNOW WHERE I'M GOING WITH THIS. YOU HAVE TO FIGURE OUT WHAT'S IMPORTANT. IS THERE SOMETHING IN YOUR BUDGET THAT WE NEED TO TAKE AWAY TO MAKE SURE WE KNOW THIS IS A CONSTANT. YOU'RE GOING TO HAVE A MAKE A TOUGH CHOICE. IF WE DON'T HAVE ANY EXTRA MONEY, HOW ARE WE GOING TO PAY FOR THIS?

>> I DON'T KNOW YET HOW WE WOULD PAY FOR THIS IF THIS DOESN'T RIGHT SIZE IT. WE WOULD HAVE TO FIGURE OUT WHERE TO CUT.

>> Comm. Smith: YES.

>> Chair Madrigal: ANY OTHER QUESTIONS ABOUT THIS? THANK YOU. GO AHEAD.

>> I'M WITH THE HEALTH DEPARTMENT. AGAIN, SO THIS QUESTION I'M ANSWERING ABOUT WHAT'S THE PURPOSE OF THE INCENTIVE -- IT'S A LITTLE BIT OF A STORY BUT I'M GOING TO TRY TO KEEP IT SUCCINCT. THE FIRST LINE, YOU'LL SEE IS PRIMARY CARE RENEWAL, WHICH IS CAREOREGON, THE LAST YEAR THAT WE GOT DOLLARS FROM THAT WAS IN 2014. WE BUDGETED THE TAIL END OF THAT. THE GRANT ENDED IN 2012. THE HISTORY OF IT IS IT STARTED PRIMARILY AS AN INCENTIVE FOR SAFETY NET PROVIDERS TO REALLY INNOVATE AND CHANGE THEIR WAY THEY DELIVERED CARE. YOU'LL REMEMBER THAT WE'VE COME AND PRESENTED ON BUILDING BETTER CARE AND BUILDING BETTER CARE, WHICH IS THE NAME OF OUR PATIENT-CENTERED MEDICAL HOME IN THE HEALTH DEPARTMENT WAS THE RESULT OF FUNDING THAT WE GOT FROM CAREOREGON ALONG WITH OTHER PROVIDERS AND THOSE DOLLARS WERE USED TO DO QUALITY IMPROVEMENTS IN OUR SYSTEM, TO HELP STAFF TO HAVE PEOPLE STAFFED WHO UNDERSTOOD LIENS AND WORKLOADS AND THOSE PROCESSES. SO AT THE END OF SEPTEMBER 2012, CAREOREGON DECIDED TO MOVE AWAY FROM JUST THIS GRANT-TYPE PROGRAM AND MOVE INTO WHAT THEY CALLED PATIENT POPULATION. THEY WERE CALLING THAT PCR3. THOSE DOLLARS ARE STILL BASED ON SUPPORTING THE PATIENT-CENTERED MEDICAL HOME.

BUT IT'S MOVING CLOSER TO WHAT WE'RE CALLING RISK-SHARING. SO THOSE PROVIDERS WHO ARE BETTER ABLE TO DELIVER ON THE ELEMENTS OF PATIENT-CENTERED MEDICAL HOMES LIKE IMPANELING YOUR PROVIDERS, TEAM-BASED CARE, BEING ABLE TO BUILD UP ENOUGH OPEN ACCESS THAT YOU HAVE VERY FEW DAYS TO THE NEXT AVAILABLE APPOINTMENT, SOME OF THOSE TYPES OF METRICS SO THOSE PEOPLE WHO ARE MORE FULLY ABLE TO DO PATIENT-CENTERED MEDICAL HOME AND DELIVER ON BETTER HEALTH OUTCOMES WOULD BE ABLE TO GET THOSE DOLLARS. AND SO THAT AMOUNT THAT WE BUDGETED IN 2014 WAS \$1.3 MILLION. AND IN THE NEXT YEAR'S BUDGET WE ANTICIPATE GETTING \$1.5 MILLION. WHAT I WANT TO SAY ABOUT THAT PIECE IS WE'RE STILL USING THOSE DOLLARS TO PAY FOR INFRASTRUCTURE THAT DOESN'T HAVE A BILLING SOURCE TO IT, IT'S THE QUALITY IMPROVEMENT PEOPLE, THERE ARE PEOPLE WHO ARE DEVELOPING CLINICAL REPORTS THAT DEMONSTRATE WHAT WE'RE DOING AROUND HEALTH OUTCOMES AS WELL AS SOME OF THE STAFF AND SUPPORT FOR OUR I.T. SYSTEMS LIKE THE ELECTRONIC HEALTH RECORDS IN BOTH MEDICAL AND THE DENTAL SIDE. THE THIRD POD HERE IS THE PATIENT CENTERED PRIMARY CARE HOME, WHICH WAS THE STATE'S ATTEMPT TO INCENTIVIZE PATIENT CENTERED MEDICAL HOMES THROUGHOUT THE STATE AND THAT PROGRAM STAYED IN PLACE FOR A LONG TIME, 15 MONTHS. AND SO WE HAD SOME DOLLARS FROM THAT PROGRAM THAT WE BUDGETED IN 2014 AND WE KNOW THAT THAT PROGRAM WILL NOT BE AROUND FOR NEXT YEAR. WE WERE ABLE TO RECEIVE A TIER THREE DESIGNATION, WHICH IS THE HIGHEST DESIGNATION. EVERY SITE HAD TO QUALIFY SEPARATELY. SO THERE WAS A FAIR AMOUNT OF WORK AND INVESTMENT TO GET US AT TIER THREE. AND AGAIN, THOSE ARE THOSE INDICATORS FOR PATIENT-CENTEREDNESS AS MY ABBREVIATION FOR THAT ONE. AND THEN THE FINAL POT OF MONEY HERE IS MEANINGFUL USE AND THIS IS A FEDERAL PROGRAM. AND THE MEANINGFUL USE PROGRAM IS DIVIDED ROUGHLY INTO THREE SETS OF OPPORTUNITIES TO GET DOLLARS. THERE'S THE AIU, THERE'S STAGE ONE AND THERE'S STAGE TWO. EACH ONE OF THOSE LEVELS REQUIRES SPECIFIC REQUIREMENTS FROM THE FEDERAL GOVERNMENT IN ORDER TO GET THOSE DOLLARS. AND AIU, YOU HAVE TO HAVE AN ELECTRONIC HEALTH RECORD, YOU HAVE TO SERVE A CERTAIN PERCENTAGE OF OHP AND YOU HAVE TO DO IT OVER A CERTAIN PERIOD OF TIME. YOU HAVE TO HAVE YOUR PROVIDERS BE ABLE TO ATTEST OR SIGN OVER THAT THOSE DOLLARS WILL COME BACK TO THE ORGANIZATION. SO WE'VE DONE THAT WORK IN THE DEPARTMENT FOR PRIMARY CARE AND IN THE 2014 BUDGET, WE WENT THROUGH THE FIRST STAGE, WHICH I SHOULDN'T SAY STAGE BECAUSE IT CONFUSES IT WITH THE OTHER. WE WENT THROUGH AIU AND GOT ABOUT THIS \$537,000. THESE DOLLARS WE USED TO HELP US WITH THE UPGRADE. WE USED IT TO MAKE IMPROVEMENTS IN THE EXAM ROOMS, GETTING ARMS FOR THE MONITORS AND GETTING MONITORS THAT WOULD ACTUALLY BE ABLE TO SHOW WHAT THE RECORDS LOOK LIKE IN A NEW SYSTEM. NEXT YEAR WE ANTICIPATE ANOTHER \$300,000 THAT WE WOULD GET AGAIN IN AIU DOLLARS FOR PRIMARY CARE. THERE

MAY BE AN OPPORTUNITY IN DENTAL TO DRAW DOWN IN AIU \$550,000 AND IT WAS ONLY RECENTLY IN THE LAST EIGHT OR NINE MONTHS THAT WE REALIZED A DENTAL SERVICES WOULD QUALIFY FOR MEANINGFUL USE. STAGE ONE AND STAGE TWO ARE MUCH HIGHER BARS TO JUMP OVER. THERE ARE SPECIFIC REQUIREMENTS THAT WE HAVE TO INVEST IN TO BE ABLE TO DRAW DOWN THOSE DOLLARS AND EVERY STAGE HAS FEWER DOLLARS THAN THE PREVIOUS STAGE SO AIU WITH THE MOST AND THE OTHER STAGES WILL BE MORE INCREMENTAL AND SMALLER. SO FOR STAGE ONE, FOR INSTANCE, ONE OF THE THINGS WE HAVE TO DO IS HAVE A SYSTEM THAT THEY CALL MY CHART, THOSE OF YOU THEY DO HAVE KAISER AND YOU'RE ABLE TO E-MAIL YOUR DOCTORS, YOU HAVE TO PUT SOMETHING LIKE THAT IN PLACE AND THERE ARE OTHER KINDS OF INDICATORS THAT PEOPLE WHO ARE CLOSER TO THE WORK WILL HAVE TO DO TO GET TO STAGE ONE AND STAGE TWO IS EVEN FURTHER. SO WHEN THEY SAY MEANINGFUL USE, THEY MEAN MEANINGFULLY USING YOUR I.T. SYSTEM AND IT'S MORE LIKE A REBATE IF YOU THINK ABOUT THIS. IT DOES NOT PAY FOR ALL THOSE THINGS. IT GIVES YOU A LITTLE BIT OF MONEY BACK TO INCENTIVIZE YOU FOR TAKING THAT CHANCE IN YOUR SYSTEM AND MAKING THAT HAPPEN. SO I WILL PAUSE.

>> Chair Madrigal: ANY QUESTIONS?

>> Comm. Wendt: I HAVE A QUESTION. ON THE SECOND LINE THERE, WHEN YOU TALK ABOUT THE INFRASTRUCTURE DEVELOPMENT, HOW CLOSE DOES THAT GET US TO WHERE WE NEED TO BE? WHAT IS THE GAP LEFT IN TERMS OF SOME OF THE INFRASTRUCTURE THAT'S STILL NEEDED.

>> IN THIS \$1.5 MILLION?

>> Comm. Wendt: UH-HUH.

>> I WOULD BE RELUCTANT TO GIVE YOU A SPECIFIC NUMBER BUT BALLPARK THAT'S ABOUT HALF OF WHAT WE NEED. WE STILL HAVE OTHER -- WHEN I THINK ABOUT THOSE BUDGETS WHERE THOSE FOLKS ARE, IT'S LIKE OUR MEDICAL RECORDS GROUP, OUR QUALITY GROUP, AND OUR CLINICAL I.T. INFRASTRUCTURE GROUP AND WE'RE ALSO LOOKING AT SOME ADDITIONAL DOLLARS FOR TRAINING WHEN WE GET NEW PROVIDERS IN, USING THE ELECTRONIC HEALTH RECORDS, WE'LL NEED MORE AROUND THAT SO I THINK IT'S AROUND \$3 MILLION. IF YOU WANT A SPECIFIC DOLLAR, WE CAN GET YOU THOSE DOLLARS BACK, BUT IF THAT'S CLOSE ENOUGH --

>> Comm. Wendt: IS THAT DOLLARS YOU WOULD NEED LATER ON OR IN THE MOMENT YOU HAVE A GAP?

>> WE'LL CONTINUE TO NEED INFRASTRUCTURE. THOSE TYPE OF INFRASTRUCTURAL REPORTS SO YES GOING FORWARD WE'LL NEED THAT.

>> Chair Madrigal: OKAY, THANK YOU.

>> ALL RIGHT. AND THIS LAST ONE, HOW DO WE IDENTIFY VETERANS AND ASSIST THEM WITH ACCESSING CARE. A COUPLE OF PLACES. NEW PATIENTS THROUGH THE ENROLLMENT AND ELIGIBILITY PHASE OF ENGAGING IN AND ENROLLING FOLKS, WE DO THIS BOTH IN THE CLINICS AND IN CORRECTIONS HEALTH. THERE'S A QUESTION ABOUT VETERAN STATUS ON THAT APPLICATION. FIVE YEARS AGO, THE FEDERAL GOVERNMENT IS REALLY PUSHING ON TRYING TO GET VETERANS IDENTIFIED AND GET ADDITIONAL RESOURCES AND SO WE HAVE BUILT THAT INTO OUR ELECTRONIC HEALTH RECORDS SO FOR ESTABLISHED PATIENTS WE'RE ASKING THE QUESTION AND THERE IS A PLACE FOR THE REGISTRATION PERSON TO ASK THAT QUESTION EVERY YEAR. THERE'S LIKE A STOP PHASE ON THE ELECTRONIC RECORDS TO GET THEM TO AND THAT QUESTION SO WE'VE INCLUDED THE NUMBER OF VETERANS THAT WE KNOW WE SERVE IN OUR SYSTEM AND THESE ARE CALENDAR YEARS BECAUSE IT'S SOMETHING THAT WE REPORT BACK TO THE FEDS AND LAST YEAR WE HAD 605 AND EVERY YEAR IT REFRESHES. AND THEN FINALLY, I THINK I TOUCHED BASES ON THE CORRECTIONS HEALTH PIECE, WE GET THAT THROUGH THE ELIGIBILITY PIECE. I UNDERSTAND THAT THE SHERIFF'S OFFICE ALSO IS ASKING THAT WHEN SOMEONE IS BOOKED. DID I LEAVE OUT SOMETHING?

>> JUST THAT A PERSON FROM THE V.A. COMES INTO CORRECTIONS HEALTH AND INTO THE JAIL TO WORK WITH VETERANS WHEN THEY'RE BEING RELEASED. SO THE SHERIFF'S OFFICE AND CORRECTIONS HEALTH AND THE V.A. WORK TOGETHER ON THE DISCHARGE PLAN.

>> DO WE HAVE A RELATIONSHIP WITH THE V.A. AROUND THESE NUMBERS THAT WE'RE SERVING HERE IN PRIMARY CARE AND DENTAL? ARE ANY OF THEM REFERRED TO THE V.A. FOR SERVICES OR ARE WE -- THESE ARE WHO WE SERVE RIGHT?

>> RIGHT. SO THESE NUMBERS ARE PEOPLE THAT WE ACTUALLY SERVE. IF THEY NEED SERVICES THAT WE DO NOT PROVIDE, WE DO WORK WITH THE V.A. TO TRY TO GET THEM CONNECTED TO THE V.A. FOR THOSE SERVICES. I CAN'T TELL YOU WHAT THE PROPORTION OF THOSE VETERANS ARE ACTUALLY NEEDING TO GO TO THE V.A. AND WHO WE'VE REFERRED THERE. IT GIVES US ANOTHER REFERRAL SOURCE WHEN WE KNOW THAT THERE ARE VETERANS AND THEY MAY NEED RESOURCES THAT WE CAN'T PROVIDE. IT'S HELPFUL IN THAT WAY.

>> OKAY, THANK YOU.

>> Chair Madrigal: ANY OTHER QUESTIONS ON THIS ONE? THANK YOU.

>> THESE WERE THE FOUR QUESTIONS THAT WE'RE GOING TO ANSWER TODAY AND WE'LL BE SUBMITTING WRITTEN RESPONSES TO THE REST OF THE QUESTIONS THE BOARD HAD FOR US THE OTHER DAY.

>> Chair Madrigal: AND WE HAD SOME FOLLOW-UP FOR DEPARTMENT OF COUNTY HUMAN SERVICES?

Ms. Myers: GOOD MORNING. [LAUGHTER] GOOD MORNING. SUSAN MYERS, THE DIRECTOR FOR THE DEPARTMENT OF COUNTY HUMAN SERVICES IS OUT ILL TODAY. SO I AM THE DEPUTY FOR THE HEALTH DEPARTMENT OF COUNTY HUMAN SERVICES IN MY SECOND WEEK AND WITH ME TODAY IS LEE GERARD AND PEGGY GRAY. WE HAD ONE QUESTION REGARDING VETERANS SERVICES FROM COMMISSIONER SMITH THAT WE'RE GOING TO ADDRESS, REGARDING THE FTE FOR VETERAN SERVICES FOR FY 14 AND FY 15. AND SO THERE IS A HANDOUT GOING ON THAT HAS A LOT OF INFORMATION. I'M GOING TO SPECIFICALLY ANSWER THE QUESTION, AND THEN JUMP IN IF YOU HAVE OTHER QUESTIONS. FOR FY 14, WE HAD A TOTAL OF FOUR EMPLOYEES FOR VETERAN SERVICES AREA AND THREE OF THOSE EMPLOYEES ARE CERTAINLY SERVICES OFFICERS, TWO FULL-TIME FTEs AND 1.83 FTE. AND THEN WE ALSO HAD AN OFFICE ASSISTANT II WORKING HALFTIME FOR FY 14 WHO DOES THE OFFICE WORK, THE RECEPTION WORK, THE PAPERWORK ASSOCIATED WITH THE PROGRAM. FOR -- SO WE HAVE A TOTAL OF 3.33 FTE FOR FY 14. FOR FY 15, WE HAVE PROPOSED TAKING THAT -- WE HAVE PROPOSED 2.67 OVERALL IN ADDITION TO OUR 3.33 FTE FOR A TOTAL OF SIX FTE. AND VETERAN SERVICES OFFICERS WERE ASKING FOR .17, WHICH WOULD BRING THAT ONE VETERAN SERVICES OFFICER UP TO A FULL-TIME FTE. WE'RE ADDING ONE VETERAN SERVICE OFFICER AND THAT IS TO HELP INCREASE OUR OUTREACH SO THAT WE CAN HAVE SERVICES ON SITE IN ADDITION TO THE FIVE SITES THAT WE HAVE NOW. MIDLAND LIBRARY AND THE V.A. HOSPITAL AND LOOKING FOR SITES IN GRESHAM. AND THEN WE WOULD LIKE TO BRING THE OA II UP TO FULL-TIME BECAUSE AS WE INCREASE OUR CASE LOAD WE'RE GOING TO HAVE INCREASE IN PAPERWORK AND RECEPTION ACTIVITIES. IN ADDITION TO THAT WE'RE ASKING FOR ONE PROGRAM SUPERVISOR FOR THE PROGRAM. SO THAT BRINGS US TO A TOTAL FY 14, 3.33. FY 15 2.67 WITH A TOTAL OF SIX FTE WITH FOUR VETERANS SERVICES OFFICERS. [INAUDIBLE QUESTION]

>> Comm. Smith: THEY DON'T HAVE A SUPERVISOR CURRENTLY?

>> THEY DO HAVE A SUPERVISOR BUT THE SUPERVISOR IS NOT -- IT'S PART OF ANOTHER PROGRAM THAT'S HELPING OUT. SO IT'S NOT IN THE BUDGETED POSITION FOR THIS. WITH THE INCREASE IN SERVICES AND THE INCREASE IN FTE, THE PROGRAM WOULD NEED A FULL-TIME PROGRAM SUPERVISOR.

>> Comm. Smith: OKAY.

>> Chair Madrigal: ANY ADDITIONAL QUESTIONS ON THIS TOPIC? OKAY.

>> THANK YOU.

>> THANK YOU.

>> Chair Madrigal: SO I BELIEVE THAT WAS ALL THE FOLLOW-UP THAT WE HAD. THERE'S ADDITIONAL FOLLOW-UP THAT WILL BE COMING TO US IN WRITTEN FORM. SO UNLESS THERE ARE ANY FURTHER QUESTIONS OR COMMENTS, WE'LL ADJOURN.

>> Comm. Smith: I HAVE A COMMENT, CHAIR. ACTUALLY, I HAVE AN AMENDMENT. THIS AMENDMENT IS FOR SUMMER WORK FOR FISCAL YEAR 2015. SUMMER WORKS IS A PAID SUMMER WORK EXPLORATION PROGRAM THAT SUPPORTS DEE INTERVENTIONS TO PREVENT STUDENT DROPOUT RATES BY CONNECTING YOUTH TO CAREER PATHWAYS. THIS PROGRAM IS PART OF A REGIONAL WORKFORCE DEVELOPMENT PROGRAM WITH PUBLIC AND PRIVATE PARTNERSHIPS. AND JUST TO MAKE A QUICK NOTE, THIS IS A PROGRAM THAT WE HAVE ACTUALLY SUPPORTED. THIS WILL BE THE FOURTH YEAR IN A ROW. THIS IS NOT A NEW PROGRAM.

>> Chair Madrigal: IS THIS 370 IN ADDITION TO WHAT'S PROPOSED IN THE EXECUTIVE BUDGET OR A --

>> Comm. Smith: NO, THIS IS THE PROGRAM OFFER BUT SINCE WE BROKE UP THE PROGRAM OFFER FOR THE YOUTH ENGAGEMENT, WE NO LONGER HAVE THOSE DOLLARS ANYMORE.

>> Chair Madrigal: OKAY.

>> Comm. Smith: BECAUSE I THINK WE HAD SOMETHING LIKE 700 FOR YOUTH ENGAGEMENT. WE KEPT IT CURRENT SO THAT THE YOUTH COMMISSION COULD STAY WHERE THEY WERE. SO DOING SO, IT ACTUALLY KEPT THE DOLLARS AWAY FROM THE SUMMER WORKS PROGRAM SO I HAD TO SUBMIT AN AMENDMENT.

Chair Madrigal: OKAY.

>> Comm. Smith: AND IT WAS IN THE BUDGET LAST YEAR BUT YOU COMBINED EVERYTHING.

Chair Madrigal: OKAY. THANK YOU. ANY ADDITIONAL AMENDMENTS? OKAY. THERE BEING NO FURTHER BUSINESS, WE'RE ADJOURNED. THANK YOU. [GAVEL]

ADJOURNMENT

The meeting was adjourned at 11:11 a.m.

This transcript was prepared by LNS Captioning and edited by the Board Clerk's office.
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Submitted by:

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