

# Department of County Human Services

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## Department Services

The Department of County Human Services (DCHS) provides direct services to the elderly of Multnomah County and to those who have serious physical, emotional, or developmental disabilities. In collaboration with over 400 organizations, DCHS provides culturally competent services in a community setting. The Department endeavors to reach people before their needs become acute, in order to more effectively connect them to a wide range of health and financial benefits. It also provides support to those who need long-term or twenty-four hour care.

The County Human Services department was formed in February 2002 by combining the Departments of Aging and Disability Services (ADS) and Community and Family Services (CFS). The merger resulted in a strong early intervention model with community partners and branch offices located throughout the county.

CHS connects people to the health care and support they need to live with dignity and independence. Services include:

### **Early Intervention**

- Easy access to services through information and referral
- District Senior Centers throughout the county
- Domestic violence prevention programs and direct services for victims
- Family Caregiver Support
- Housing assistance, nutrition programs, and transportation services

### **Access to Healthcare, Financial Benefits, and Financial Stability**

- Alcohol and other drug assessment, treatment, and prevention services
- Employment assistance
- Food Stamp authorization
- Managed healthcare education and Oregon Health Plan enrollment
- Veterans' Services

### **Access to Mental Health Treatment**

- Children's services include screening, evaluation, treatment, family support, teacher consultation, and crisis services
- Adults' services include inpatient, intensive, residential, crisis and acute care; supported employment; senior services; and services to the homeless

### **Long-Term Support and Case Management**

- Regulation, licensing, and monitoring of 586 Adult Care homes
- Case management and case plan development
- Developmental Disability advocacy, service coordination, and residential, vocational, and emergency services for 3,290 individuals
- District Center case management
- Residential services

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## **Protective Services**

- Public Guardianship/Conservatorship
- Protective Services for adults and children
- Domestic Violence support

The department is committed to delivering and enhancing services to meet the needs of our clients and the broader community.

- *Elders in Action* provides input on community priorities as well as program and policy development for the elderly.
- *The Disability Services Advisory Council* plays a similar role for disability services.
- The *ADS Multi Ethnic Advisory Council* works to create a service delivery system responsive to the diverse population of Multnomah County.
- The *Mental Health Advisory Committee* is helping to redesign the mental health delivery system, and offers input on program enhancements.
- County Mental Health programs are guided by input from the *Adult Mental Health and Substance Abuse Advisory Committee* and the *Children and Adult Mental Health and Substance Abuse Advisory Committee*.
- The *Developmental Disabilities Advisory Committee* is made up of clients, family members and community members who advocate for additional services and program improvements.
- The *Citizens Budget Advisory Committee* gives advice on budget issues.

Several other citizen groups have formal advisory or oversight responsibilities.

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## How the Department Delivers Its Services

The department delivers direct services through Aging and Disability Services, Developmental Disability Services, Domestic Violence Services, and Mental Health and Addiction Services. Services are also delivered through partnerships with other County departments, cities, and community agencies.

- **Multi-Disciplinary Teams** have been implemented to improve services to clients with complex needs. The teams have been recognized for their ability to improve a client's living situation.
- The **Gatekeeper Program** has trained over 100 business and community groups to be aware of, and to respond to, changes in client living conditions or behavior. The program's video, "Gatekeepers: A Community that Cares" recently won a national award.
- The **After Hours Response and Helpline** provides information about Aging and Disability programs as well as other community-based social services. This program has been expanded to Clackamas and Washington Counties through an Intergovernmental Agreement.
- The **Mental Health Crisis Hotline** provides help 24 hours a day. Professionally trained, culturally competent mental health clinicians listen to callers and provide assistance and referrals.
- There is also a 24-hour **Domestic Violence hotline**.
- **Senior programs and meal sites** throughout the County represent the work of many significant public-private partnerships.

## Aging and Disability Services

Aging and Disability Services offers a continuum of programs to serve everyone from individuals needing minimal support to those who need intensive, constant, and complex care.

Last year, ADS served 33,571 people in the Medicaid programs and approximately 30,000 in the non-Medicaid programs. Services are offered through a central Helpline, contracts and partnerships with community organizations, offices throughout the county, adult care and room and board homes licensed by ADS, and conservator and guardianship services. Services include:

- Information and assistance with finding suitable resources and services for seniors and people of any age who have a disability;
- Screening for eligibility for Medicaid services, Food Stamps, Medically Needy, Medicare Supplemental, and General Assistance;
- Case Management;
- In-home support for people who want to remain independent;
- Assistance in obtaining accessible housing, transportation, legal services, employment services, and nutrition services;
- Screening to determine if nursing facility placement is appropriate;
- Coordination with local community-based organizations;
- Assistance in obtaining Supplemental Security Income, Social Security Disability Insurance and Veterans' benefits;

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- Referral to and assistance with employment programs; and
- Coordination with protective services and follow-up on individuals referred through the Gatekeeper and After-hours programs.

## Developmental Disabilities Services

Developmental Disabilities Services currently serves 3,290 individuals. DDS provides direct services (intake and assessment, case management, and protective services) and contracted services (residential, vocational, and transportation) to developmentally disabled people of all ages. As a result of the Staley Settlement Agreement and Universal Access Implementation, this is the first budget cycle in which DDS has new funding available to provide services for adults (18+) previously placed on the Wait List. New funding for children is also available through the Family Support program. In order to better serve the entire community, DDS will locate staff at the new Gresham East County facility and at a new Brokerage site. These will be DDS's first decentralized locations.

## Mental Health and Addiction Services

The continuum of adult mental health services includes clinic and home-based treatment, acute care inpatient hospital services, residential care, and employment services. Crisis services are offered through a centralized crisis response system, and special services are available for seniors, the homeless mentally ill, and Psychiatric Security Review Board clients.

The **Office of Addiction Services** offers services that include prevention, intervention, detox, outpatient and residential treatment, and services for gambling addicts. Services are available to adults and adolescents and are delivered through a diverse network of providers. Services also include synthetic opiate replacement therapy, such as Methadone treatment.

**Child & Adolescent Treatment Services** works in early childhood and education programs and in public schools as well as Juvenile Justice settings, Caring Community programs, Health Department programs, Services to Children and Families programs, CARES Northwest, and other family services settings. In addition to County programs and contracted partnerships, this division offers a crisis hotline, walk-in clinics, and drop-in centers.

## Domestic Violence

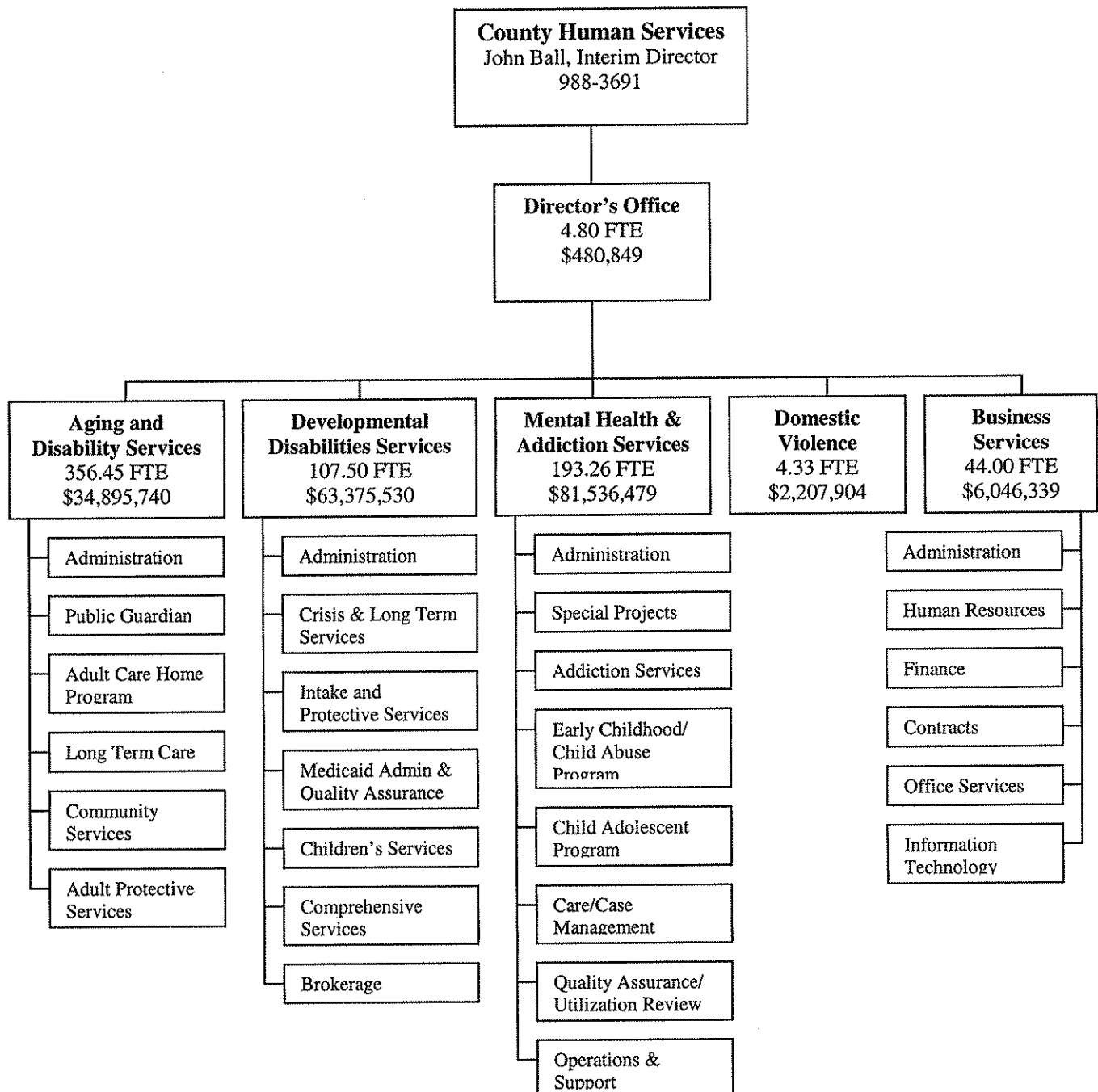
The Domestic Violence Coordination Office:

- Staffs the Multnomah County Family Violence Coordinating Council.
- Participates in Local Public Safety Coordinating Council activities relating to the prevention and intervention of domestic violence.
- Works closely with the Portland Police Bureau on their Domestic Violence Intervention Team.
- Develops and distributes computer-based training materials, utilizing funds from Oregon Occupational Safety and Health Administration.
- Provides information and consultation to community organizations.
- Maintains, through contracted service programs, a continuum of safe and supportive services for victims of domestic violence.

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## Department Organization

The Department of County Human Services primarily delivers services through community-based organizations and long term care options. The Department also has a Director's Office and a Business Services unit. Below is an organizational chart showing the Adopted FTE and budget for the various divisions and the program areas under them.



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## Budget Issues and Highlights

The Department's Adopted Budget for FY '03 reflects a \$1.85 million, or roughly a 10%, General Fund reduction. Non-County General Fund resources, which constitute about 90% of the Department's funding, have seen both increases and decreases depending on the funding source. State funding for some programs, such as Oregon Project Independence (OPI), remains questionable. The Department also faced a number of issues with the use of one-time-only funding in FY '02.

### County General Fund

Just under half (49.4%) of the Department's General Fund resources are used in Mental Health and Addiction Services. Significant portions of the remaining amount are used for matching state and federal funds, especially in the Aging & Disability Services Division and the Developmental Disability Services Division.

General Fund related reductions were weighted heavily towards the Planning & Evaluation unit. The following list outlines the major General Fund reductions.

- Planning & Evaluation - \$435,359 and 5.00 FTE (research and evaluation staff)
- Office of Addiction Services - \$296,000 (*one-time-only use of state funds carried over from FY '02 will be used to replace these funds*)
- Office of Addiction Services - \$213,000 and 2.75 FTE (program development specialists)
- Aging & Disability Services - \$50,000 for emergency housing funds
- Mental Health & Addiction Services - \$287,000
- Human Resources - \$113,581 and 1.00 FTE (HR Manager 2)
- Domestic Violence - \$46,921
- Business Services - \$99,731
- Developmental Disabilities - \$38,000 in professional services

Within the Mental Health & Addiction Services Division, significant reallocations of General Fund and non-County General Fund occurred in association with the redesign of the mental health system. The most significant of these was the budgeting of \$1.0 million for culturally competent mental health services. About \$950,000 of the \$1.0 million is County General Fund.

### Non-County General Fund

As noted above, non-County General Fund resources account for about 90% of the Department's funding. There are a number of changes in these revenue sources, ranging from an \$18,600 loss of TriMet Rider Fees to the Federally funded Health Schools project funding increasing by \$899,441 (some of which



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is carry over from FY '02).

Below are some of the major changes in non-County General resources and programs.

- Expiration in September 2002 of the SAMHSA Targeted Capacity Enhancement grant - \$457,838
- Increased funding for the Federal Healthy Schools program increased - \$899,441
- Ending of the Regional Drug Initiative - \$274,259
- Hospital Waitlist funds no longer flowing through the County - \$500,000
- Reduced State Mental Health Grant carryover - \$1.28 million.
- Use of beginning working capital in the Behavioral Health Care fund - \$568,000
- Foster care service funds no longer passing through the County as now they are now paid directly through OMAP - \$5,874,473
- A&D Special Project funding reduced - \$133,476
- Increased Title XIX funding for Aging and Disability Services, due in part to a larger percentage of Title XIX eligible clients - \$3.1 million

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## Budget for FY 2003

The Department's Adopted FY '03 operating budget is \$188,545,835. This amount excludes the programs transferred from the former Department of Community and Family Services to the newly created Office of School and Community Partnerships. Historical budget information may be found under the departmental detail for the former Departments of Aging & Disabilities Services and Community and Family Services. An explanation of specific programmatic changes is provided on the following pages.

<b>Budget Trends</b>	<b>2000-01</b>	<b>2001-02</b>	<b>2001-02</b>	<b>2002-03</b>	
	<u><b>Actual</b></u>	<u><b>Current Estimate</b></u>	<u><b>Adopted Budget</b></u>	<u><b>Adopted Budget</b></u>	<u><b>Difference</b></u>
Staffing FTE	0.00	0.00	0.00	710.34	710.34
Personal Services	\$0	\$0	\$0	\$43,772,548	\$43,772,548
Contractual Services	\$0	\$0	\$0	\$130,228,492	\$130,228,492
Materials & Supplies	\$0	\$0	\$0	\$14,544,795	\$14,544,795
Capital Outlay	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
<b>Total Costs</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$188,545,835</b>	<b>\$188,545,835</b>

<b>Costs by Division</b>	<b>2000-01</b>	<b>2001-02</b>	<b>2001-02</b>	<b>2000-01</b>	
	<u><b>Actual</b></u>	<u><b>Current Estimate</b></u>	<u><b>Adopted Budget</b></u>	<u><b>Adopted Budget</b></u>	<u><b>Difference</b></u>
Director's Office	\$0	\$0	\$0	\$480,849	\$480,849
Business Services	\$0	\$0	\$0	\$6,046,339	\$6,046,339
Planning & Evaluation	\$0	\$0	\$0	\$2,994	\$2,994
Domestic Violence	\$0	\$0	\$0	\$2,207,904	\$2,207,904
Aging & Disability Svcs	\$0	\$0	\$0	\$34,895,740	\$34,895,740
Dvlpmntl. Disabilities	\$0	\$0	\$0	\$63,375,530	\$63,375,530
Mntl Hlth & Adctn Svcs	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$81,536,479</u>	<u>\$81,536,479</u>
<b>Total Costs</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$188,545,835</b>	<b>\$188,545,835</b>

<b>Staffing by Division</b>	<b>2000-01</b>	<b>2001-02</b>	<b>2001-02</b>	<b>2002-03</b>	
	<u><b>Actual</b></u>	<u><b>Current Estimate</b></u>	<u><b>Adopted Budget</b></u>	<u><b>Adopted Budget</b></u>	<u><b>Difference</b></u>
Director's Office	0.00	0.00	0.00	4.80	4.80
Business Services	0.00	0.00	0.00	44.00	44.00
Planning & Evaluation	0.00	0.00	0.00	0.00	0.00
Domestic Violence	0.00	0.00	0.00	4.33	4.33
Aging & Disability Svcs	0.00	0.00	0.00	356.45	356.45
Dvlpmntl. Disabilities	0.00	0.00	0.00	107.50	107.50
Mntl Hlth & Adctn Svcs	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>193.26</u>	<u>193.26</u>
<b>Total Staffing FTE's</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>710.34</b>	<b>710.34</b>

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<b>Resources by Division</b>					
		<b>Fees, Permits</b>			<b>Other/</b>
	<b><u>General Fund</u></b>	<b><u>&amp; Charges</u></b>	<b><u>Federal</u></b>	<b><u>State &amp; Local</u></b>	<b><u>Miscellaneous</u></b>
Director's Office	\$84,652	\$0	\$396,197	\$0	\$0
Business Services	\$2,837,466	\$22,500	\$3,186,370	\$0	\$0
Planning & Evaluation	\$2,993	\$0	\$0	\$0	\$0
Domestic Violence	\$1,325,643	\$2,500	\$515,204	\$364,558	\$0
Aging & Disability Svcs	\$4,039,404	\$354,000	\$28,560,875	\$1,941,459	\$0
Dvlpmntl. Disabilities	\$2,333,319	\$15,000	\$61,027,210	\$0	\$0
Mntl Hlth & Adctn Svcs	<u>\$10,239,394</u>	<u>\$639,938</u>	<u>\$67,744,419</u>	<u>\$1,904,781</u>	<u>\$1,007,946</u>
<b>Total Resources</b>	<b>\$20,862,871</b>	<b>\$1,033,938</b>	<b>\$161,430,275</b>	<b>\$4,210,798</b>	<b>\$1,007,946</b>

## Director's Office

The Director's Office provides leadership, policy direction, and program oversight for the County Human Services department. Management establishes strategic goals and objectives for the department, and ensures that they are met. Responsibilities include supporting the overall County mission, maintaining communications internally and with the community, and working with advisory committees.

The Office is responsible for ensuring that programs and activities are responsive and accountable to stakeholders, clients, the community, funding sources, citizen advisory bodies, and County employees.

### Action Plans:

- Integrate the Departments of Aging and Disability Services and Community and Family Services and ensure the efficient use of resources and the development of common standards.
- Continue to support the development of an efficient and effective mental health system in Multnomah County.
- Work with State and Federal organizations to advocate for program enhancements that identify best practices, and continue improvements to the service delivery system.
- Create meaningful partnerships with Health, Community Justice, Community Services, the State Department of Human Services and other systems to improve integration of services for clients.

### Significant Budget Changes:

- This is a new office created from the merger of two Departments.
- Transfer in 1.00 FTE from the Planning and Evaluation unit.

<b>Director's Office</b>		<b>2001-02</b>	<b>2001-02</b>	<b>2002-03</b>	
<b>Budget Trends</b>	<b>2000-01</b>	<b>Current</b>	<b>Adopted</b>	<b>Adopted</b>	
	<u><b>Actual</b></u>	<u><b>Estimate</b></u>	<u><b>Budget</b></u>	<u><b>Budget</b></u>	<u><b>Difference</b></u>
Staffing FTE	0.00	0.00	0.00	4.80	4.80
Personal Services	\$0	\$0	\$0	\$409,699	\$409,699
Contractual Services	\$0	\$0	\$0	\$30,000	\$30,000
Materials & Supplies	\$0	\$0	\$0	\$41,150	\$41,150
Capital Outlay	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
<b>Total Costs</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$480,849</b>	<b>\$480,849</b>

## Domestic Violence

The Domestic Violence Office helps to coordinate an effective response to domestic violence in Multnomah County, and provides assistance and leadership to help implement the domestic violence policy passed by the Board of County Commissioners in FY '00. Its activities and responsibilities have greatly increased in FY '02, and it received two grants which will extend into FY '03: a Byrne Grant for developing information and referral resources, and an Oregon OSHA grant for developing training materials. On February 1, 2002, the responsibility for contracting for victims' services was transferred from the Division of Community Programs and Partnerships to this Office.

### Action Plans:

- Complete design for a centralized information and referral resource and implement phase I of the design by 6/03.
- Distribute computer-based training materials for workplace response to domestic violence statewide by 12/02.
- Complete a plan for the domestic violence victims' services system by 8/02.
- Increase the participation of other agencies in the Family Violence Coordinating Council by involving more culture-specific providers and establishing a case review/staffing process by 6/03.

### Significant Budget Changes:

- New Byrne Grant: \$81,090, New OSHA Grant \$15,453
- Increased HUD Horizons Grant: \$83,774
- VAWA Grant ending 9/30/02: (\$46,025)
- Transfer in 0.44 FTE from the Planning and Evaluation unit: \$31,993

<b>Domestic Violence</b>					
<b>Budget Trends</b>	<b>2000-01</b>	<b>2001-02</b>	<b>2001-02</b>	<b>2002-03</b>	
	<u><b>Actual</b></u>	<u><b>Current Estimate</b></u>	<u><b>Adopted Budget</b></u>	<u><b>Adopted Budget</b></u>	<u><b>Difference</b></u>
Staffing FTE	0.00	0.00	0.00	4.33	4.33
Personal Services	\$0	\$0	\$0	\$280,405	\$280,405
Contractual Services	\$0	\$0	\$0	\$1,853,267	\$1,853,267
Materials & Supplies	\$0	\$0	\$0	\$74,232	\$74,232
Capital Outlay	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
<b>Total Costs</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,207,904</b>	<b>\$2,207,904</b>

## Aging and Disability Services

Aging and Disability Services has a variety of programs to serve seniors and people with disabilities. The Division's mission is to help them to live as independently as possible, by offering a wide range of accessible, high quality services that meet their diverse needs and preferences. Regardless of whether individuals enter an office or call the central Helpline phone number, they are connected with services to meet their needs as quickly as possible.

### Action Plans:

- Continue development and implementation of an information system that incorporates state information while adding support for case management, assessment, care planning, and monitoring client outcomes by June 2003.
- Respond to issues identified in 2000, and any new issues identified in the 2002 Public Guardian program audits, by December 2002.
- Develop an improved communication process between the Adult Care Home Program and adult care providers, by September 2002.
- Improve coordination for clients in care homes by fall of 2002.
- Increase consistency in licensing decisions through improved processes and procedures. To be completed by December 2002.
- Revise the ACHP training program by August 2002.
- Increase the visibility of District Senior Center partners by May of 2003.
- Increase resources to respond to a shortage of skilled healthcare providers and the increase in aging and vulnerable populations by June 2003.

### Significant Budget Changes (from Revised FY '02 Budget):

- Reduce Emergency Housing program: (1.00 FTE): (\$118,787)
- Decrease District Center Services (\$65,577)
- Eliminate Long-term Care Positions: (3.50 FTE): (\$200,073)
- Eliminate Adult Care Home position: (1.00 FTE): (\$68,787)
- Eliminate Social Worker positions: (2.00 FTE): (\$144,522)
- Eliminate Administrative Analyst position: (0.80 FTE): (\$60,052)
- Decrease Case Mgmt. Tech. Support program: (1.00 FTE): (\$695,408)
- Transfer in 4.00 FTE from the Planning & Evaluation unit: \$356,275

Aging & Disability Services		2001-02	2001-02	2002-03	
Budget Trends	2000-01	Current	Adopted	Adopted	
	<u>Actual</u>	<u>Estimate</u>	<u>Budget</u>	<u>Budget</u>	<u>Difference</u>
Staffing FTE	0.00	0.00	0.00	356.45	356.45
Personal Services	\$0	\$0	\$0	\$21,130,562	\$21,130,562
Contractual Services	\$0	\$0	\$0	\$8,052,447	\$8,052,447
Materials & Supplies	\$0	\$0	\$0	\$5,712,731	\$5,712,731
Capital Outlay	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
<b>Total Costs</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$34,895,740</b>	<b>\$34,895,740</b>

## Administration

ADS administration is responsible for oversight and coordination of the ADS programs and delivery system. Managers provide leadership to the programs, develop policy, engage in strategic planning, and build community relationships.

The division's training is coordinated from this unit. Needs are identified and classes are delivered or arranged on a wide variety of topics, including new employee orientation, case management guidelines, policy changes, client interaction, and team building.

Management also oversees the effort to improve case management technology. The Universal Client Information System will improve the efficiency and effectiveness of our case management software. It will also increase our ability to access information in a timely, accurate, and useful way.

**FY 2002: 0.00 FTE      FY 2003: 7.00 FTE**

## Community Services

*Community Services staff members monitor and evaluate the following services:*

- *Ethnic Outreach*
- *Adult Day Care*
- *Caregiver/Respite services*
- *Home-delivered and Congregate meals*
- *In-home services*
- *Veterans' Services*
- *Family Caregiver Support Programs*
- *Legal services*
- *Health promotion and Health insurance counseling*

This program focuses on linking older adults and persons with disabilities to resources that promote independence, dignity, and choice. This is accomplished through partnerships with community agencies and by combining Older Americans Act funds, Oregon Project Independence funds and United States Department of Agriculture (USDA) and Medicaid funds and grants.

The 24-hour Helpline is a core service offered by this unit that provides information and assistance for anyone who has questions or concerns regarding elders and persons with disabilities. Associated with the Helpline are health insurance and benefits counseling, a respite registry, family caregiver relief, and emergency housing assistance. The After Hours Response, part of the Helpline, provides professional response during times the regular offices are not open.

Through contracts with nine District Senior Centers, the Division works to develop and maintain a comprehensive and integrated service system for people age 60 and older. When possible, District Senior Centers are co-located with ADS Branch Offices to enhance coordination. Case managers develop care plans to enable elders to live at home or in the setting of their choice.

The Gatekeeper program partners with local businesses to identify seniors and people with disabilities in need of assistance. Employees who have contact with these populations in the course of their jobs are encouraged to assist vulnerable people by reporting warning signs of neglect or abuse. ADS has successfully engaged and trained gatekeepers ranging from supermarket clerks to bank tellers to utility readers.

Veterans' Services Officers (VSO) assist veterans applying for all federal, state, and local benefits. The program increases the services and financial resources for veterans and their dependents and reduces Medicaid costs.

**FY 2002: 0.00 FTE      FY 2003: 16.82 FTE**

## Adult Care Home Program

The Adult Care Home Program (ACHP) helps to ensure a safety environment and high quality care for residents in adult care homes and room and board facilities. Each month, approximately 3,000 older adults and people with disabilities reside in adult foster homes, where they receive a wide variety of services. A small number receive services in room and board facilities also certified by the ACHP. The ACHP staff licenses over 580 facilities annually and provides monitoring and training to assure quality. Staff members provide information about homes and facilities, and refer complaints to adult protective services, issuing sanctions as needed. ACHP is currently developing a technical assistance effort that will improve care by providing learning opportunities to operators and caregivers of adult care homes.

**FY 2002: 0.00 FTE      FY 2003: 12.50 FTE**

## Long-Term Care

Clients of the Long-Term Care programs are provided services that help them maintain their independence and meet basic needs. Care is provided in settings of their choice that range from their own homes to nursing facilities. Services include:

- In-home providers
- Residential care facilities
- Assisted living facilities
- Health Care Programs
- Food Stamps
- General Assistance
- Access to specialized living in Adult Care Homes

ADS offices serve 10,000 people over 65, with 5,200 receiving assistance such as Food Stamps and health care coverage. About 16,000 people with disabilities under age 65 are currently served by ADS, with 14,000 receiving assistance such as Food Stamps, General Assistance, and Health Care Programs.

Area	Location Served	# Served Annually
Mid	East of 82 <sup>nd</sup> and west of 162 <sup>nd</sup> .	3,150 seniors and a portion of the 7,368 persons with disabilities served by both Mid and East.
West	West of the Willamette.	1,442 seniors and 4,078 clients with disabilities.
East	East of 162 <sup>nd</sup>	1,838 seniors and a portion of the 7,368 persons with disabilities served by both Mid and East.
North/NE	North of Burnside, east of the Willamette, and west of 82 <sup>nd</sup> .	2,685 seniors and 6,971 people with disabilities.
Southeast	South of Burnside, east of the Willamette, and west of 82 <sup>nd</sup> .	2,311 seniors and 4,585 people with disabilities.

The Nursing Facility program serves seniors and younger persons with disabilities in Nursing Facilities throughout the County. The program typically serves 1,451 clients.

**FY 2002: 0.00 FTE      FY 2003: 274.23 FTE**



## Adult Protective Services

The Adult Protective Services (APS) program provides services for elderly and disabled persons who are experiencing or are at risk of abuse, neglect, or financial exploitation. The program's focus is to investigate allegations of abuse or neglect in these populations, whether in the community or in licensed care facilities.

ADS has a centralized team that intervenes when abuse, neglect, or exploitation occurs in facilities such as nursing homes, assisted living, or adult care homes. Last year more than 780 investigations were completed. Community-based APS teams work in the five ADS Area Offices, and each team provides intervention to clients living in its community. In 2001, over 2,200 such investigations were completed.

The Multi-disciplinary Team (MDT) provides consultation, case staffing and intervention for at-risk seniors and persons with disabilities that have complex care needs and/or a combination of social, mental health, health, and alcohol/drug problems. The Aging Services MDT consists of a geriatric mental health specialist, a social worker, a community health nurse, and Aging Services case managers. The team receives over 1,890 referrals for investigation annually, and this number is expected to increase dramatically with the aging of the population. The Disability Services MDT provides intervention for people with disabilities. Team configuration varies depending on client needs, but generally includes a case manager, a social worker, a nurse, a protective service worker, and, if appropriate, representatives from Adult Mental Health, Developmental Disabilities, and/or the Alcohol and Drug programs. The team develops a plan of care, as well as providing treatment and/or intervention. In the past year, the Disability Services MDT served 139 clients.

**FY 2002: 0.00 FTE**

**FY 2003: 36.00 FTE**

## Public Guardian/ Conservator

The Public Guardian/Conservator's Office seeks and implements court-appointed guardianship and conservatorship for people who are profoundly incapacitated. The program intervenes on behalf of individuals identified by police, medical professionals, and abuse investigators. Clients may have advanced dementia, profound mental illness, or a developmental disability. Most are current victims of abuse, exploitation or life-threatening self-neglect, and no other intervention can be found to mitigate risk to the client. The service is available only to individuals without family or other resources. The office also provides assistance related to guardianship and conservatorship, particularly as it relates to abuse/exploitation resolution; this assistance is provided to county residents without regard to income. Approximately 160 clients receive guardianship and/or conservatorship services, and intakes are triaged by severity within statutory and eligibility guidelines.

The Public Guardian's Office petitions the court for guardianship/conservatorship, coordinates contested cases with the County Attorney, and, if appointed, develops and implements legal, financial and social plans to reduce risk and exploitation. Services include medical placement and care decisions on a 24-hour basis; fiduciary responsibility for client assets; real and personal property recovery, management and sale; trust management under an existing conservatorship; estate management subsequent to a conservatorship; and related required court actions.

**FY 2002: 0.00 FTE**

**FY 2003: 9.90 FTE**

Costs by Program	2000-01	2001-02	2002-03	Difference
	<u>Actual</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	
ADS Administration	\$0	\$0	\$1,280,071	\$1,280,071
Public Guardian	\$0	\$0	\$1,081,094	\$1,081,094
Adult Care Home Program	\$0	\$0	\$1,392,157	\$1,392,157
Long Term Care	\$0	\$0	\$21,182,997	\$21,182,997
Community Services	\$0	\$0	\$7,120,983	\$7,120,983
Adult Protective Services	\$0	\$0	\$2,838,438	\$2,838,438
<b>Total Costs</b>	<b>\$0</b>	<b>\$0</b>	<b>\$34,895,740</b>	<b>\$34,895,740</b>

## Developmental Disability Services

*98% of DDS's funding is tied to state and federal funding sources and requirements*

*DDS will serve over 3,500 individuals and families in FY '03.*

Developmental Disabilities Services (DDS) plans strategies and generates resources that facilitate accessibility, inclusion, and options for individuals with developmental disabilities, their families, and the community. DDS:

- Determines eligibility for publicly funded services;
- Develops and coordinates services for the developmentally disabled;
- Provides protective services in cases of abuse;
- Provides information about and access to available resources;
- Administers and monitors contracts with non-profit and for-profit organizations to provide residential, transportation, and vocational services for individuals with developmental disabilities; and
- Approves and monitors Medicaid services plans for individuals served.

DDS provides direct services (intake and assessment, case management, protective services) and contracted services (residential, vocational, and transportation). As the result of the Staley settlement and Universal Access implementation, this is the first budget cycle in which DDS has new funding to provide services for adults (18+) previously placed on the Wait List. New funds are available through the Family Support program for services for children.

### Action Plans:

- Implement redesign of case management system to improve access to consumers, ensure compliance with quality standards, and expand service.
- Implement Universal Access to ensure the availability of Self-Directed Supports for all individuals on the Wait List, and expand consumer choice.
- Complete implementation of the County Auditor's recommendations.
- Complete implementation of a Centralized Records system to improve client services, Medicaid audit preparedness, and HIPAA compliance.

### Significant Budget Changes:

- Spending changes all relate to Universal Access. Staffing patterns redesigned in 2002 resulted in staff devoted to new functions, such as Medicaid monitoring and intake and protective services. A transitional group of case managers was defined, to work with persons in line to enter one of the brokerages; eventually they will be assigned to regular caseloads to help DD reach the newly mandated staff-to-client ratio (1:45). Total of 13.40 FTE added.

Developmental Disabilities	2000-01	2001-02	2001-02	2002-03	
Budget Trends	2000-01	Current	Adopted	Adopted	
	<u>Actual</u>	<u>Estimate</u>	<u>Budget</u>	<u>Budget</u>	<u>Difference</u>
Staffing FTE	0.00	0.00	0.00	107.50	107.50
Personal Services	\$0	\$0	\$0	\$6,537,453	\$6,537,453
Contractual Services	\$0	\$0	\$0	\$54,690,030	\$54,690,030
Materials & Supplies	\$0	\$0	\$0	\$2,148,047	\$2,148,047
Capital Outlay	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
<b>Total Costs</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$63,375,530</b>	<b>\$63,375,530</b>

## DDS Management

DDS Management is responsible for administration, oversight, and coordination of the system that provides supports and resources for people with developmental disabilities and their families. Management oversees systems redesign, identifies service needs and resources, develops service options, assures contracts for services, monitors service providers and individual placements, and provides technical assistance to providers. This team also provides leadership in the areas of policy development, strategic planning, case management supervision, workforce diversity, cultural competency, advocacy, and community relationships.

**FY 2002: 0.00 FTE      FY 2003: 4.50 FTE**

## Crisis and Long-Term Services

This area supports short-term crisis services as well as long-term services for at-risk clients within Multnomah County. Staff members match consumers and providers based on needs assessments and plans developed by case managers. This service contracts, monitors, and develops employment and residential options, and provides technical assistance to providers of long-term services. Currently, residential providers serve 837 individuals, and vocational providers, 934 individuals. Budget development and communication with State DCHS occurs here. This group is also responsible for the process that will refer 1,247 consumers to Brokerage agencies as part of Universal Access implementation.

**FY 2002: 0.00 FTE      FY 2003: 25.50 FTE**

## Protective Services, Intake, and Assessment

Protective Services is responsible for investigating allegations of abuse or neglect of adults with developmental disabilities, and to intervene to protect the individual. The unit responds to allegations within 24 hours (as mandated by the State), protects the person with developmental disabilities immediately, investigates the situation, and recommends ways to prevent further problems. It will respond to over 450 allegations of abuse (sexual, physical, verbal, or emotional), neglect, and financial exploitation during FY '03. Protective Services also provides mandated monitoring of placements of individuals released from court-ordered hospitalization.

The Intake and Assessment team determines eligibility and access to resources appropriate to the needs of individuals with developmental disabilities and their families. The Unit provides diagnosis and evaluation services for individuals going through intake, and makes assessments of those already being served in programs. DDS serves over 3,500 people a year, each of which has at some point used the services of the Intake and Assessment Unit. Approximately 538 adults and children will request eligibility and review each fiscal year, and approximately 84% of these will be deemed eligible.

As part of case management redesign, all client records are being centralized in a secure records room. In addition to enhancing confidentiality, this change will improve DDS's responsiveness to new HIPPA regulations.

**FY 2002: 0.00 FTE      FY 2003: 14.00 FTE**

## Medicaid Administration and Training

Medicaid Administration is responsible for the oversight of new Support Services provided by Universal Access and funded primarily through community-based brokerage agencies. These staff members review and monitor the service plans of individuals to ensure that families are receiving benefits required by Universal Access and allowed under Medicaid rules. This group also ensures that DDS employees are in compliance with Medicaid and State directives. For the first months of FY '03, the staff will continue to provide case management for clients who are about to transition to brokerages. As these clients enter their new agencies, DDS staff will be reassigned to improve case management to consumer ratios in Youth and Comprehensive services, in line with the expectations of State/Medicaid funding.

This group also provides training for families, service providers, and others serving people with developmental disabilities. The training component is rapidly expanding. In FY '01, a total of 1,163 individuals participated in 52 trainings, and in 2003, at least 1,200 persons will be trained.

**FY 2002: 0.00 FTE      FY 2003: 14.50 FTE**

## Children's Services

Children's Services Coordination helps children, youth, and their families identify and utilize resources to help the child progress toward educational achievement, community integration, and adult responsibilities. This group works with all child-serving agencies, including public schools and the State Department of Human Services. It is also responsible for providing information, access to funding, resource development, family support, advocacy, educational forums, and transition to adult services. Case managers also monitor services for children in foster care. During FY '03, Youth Services Coordination will assist over 1,200 children and their families. Although children are not included in Universal Access, funding is available for case managers to facilitate in-home support services. Case manager to consumer ratios will also be improved.

**FY 2002: 0.00 FTE      FY 2003: 21.00 FTE**

## Comprehensive Services

This area supports case managers who work with clients and their providers of Medicaid-funded services for residential and vocational programming. Residential Services provides residential assistance and community support for people with developmental disabilities, and is responsible for using a range of residential opportunities to meet individual needs. It develops service plans to meet housing needs, and provides technical assistance to individuals and families in order to assure a selection of living options.

Vocational Services assesses individual needs and develops individual service plans for employment and/or inclusion activities for adults with developmental disabilities; it also provides technical assistance to individuals and families in order to support clients in community employment.

Currently, 1,098 adults are served within this unit. Universal Access funding

has been dedicated for 50 new residential placements a year (state-wide) approximately 20 of which may be developed in Multnomah County.

**FY 2002: 0.00 FTE      FY 2003: 18.00 FTE**

## County Brokerage Agency

As the result of funding from the Staley settlement agreement, a network of 3 community-based Brokerage agencies has been established in Multnomah County. Community Options will be directly operated by the County DDS and eventually serve 400 consumers. Personal Agents with caseloads of no more than 45 clients will work closely with families to develop client-centered plans based on choice, community inclusion, and self-determination. To date, Community Options is the only county-operated Brokerage in the nation.

**FY 2002: 0.00 FTE      FY 2003: 10.00 FTE**

Costs by Program	2000-01	2001-02	2002-03	Difference
	<u>Actual</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	
Developmental Disabilities Admin	\$0	\$0	\$1,815,068	\$1,815,068
Crisis & Long Term Services	\$0	\$0	\$55,197,268	\$55,197,268
Intake and Protective Services	\$0	\$0	\$958,281	\$958,281
Medicaid Admin & Quality Assurance	\$0	\$0	\$981,152	\$981,152
Children's Services	\$0	\$0	\$1,359,960	\$1,359,960
Comprehensive Services	\$0	\$0	\$1,265,484	\$1,265,484
Brokerage	<u>\$0</u>	<u>\$0</u>	<u>\$1,798,317</u>	<u>\$1,798,317</u>
<b>Total Costs</b>	<b>\$0</b>	<b>\$0</b>	<b>\$63,375,530</b>	<b>\$63,375,530</b>

## Mental Health and Addiction Services

The Mental Health and Addiction Services division manages resources for services to adults, adolescents, and children with mental illness and emotional and addictive disorders (including alcohol, other drugs, and gambling). 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 is also responsible for monitoring and improving the availability, accessibility, and quality of services for mentally ill and chemically dependent persons.

### Action Plans:

- Continue implementation of the redesigned mental health system.
- Improve integration of the Office of Addiction Services with the mental health delivery system.

### Significant Budget Changes:

- Reallocate funds for culturally competent mental health services: \$1.0 million.
- Expiration of SAMHSA grant: (\$457,838)
- Increased Health Schools funding: \$899,441
- Termination of the Regional Drug Initiative: (\$274,259)
- Adjust Hospital Waitlist funds no longer flowing through the County: (\$500,000)
- Reduced State Mental Health Grant carry-over: (\$1.28 million)
- Use of beginning working capital: \$568,000
- A&D Special Project funds reduced: (\$133,476)
- Reduce Office of Addiction Services: (\$213,000) and 3.75 FTE
- Reduce Mental Health General Fund: (\$287,000)
- Transfer in 1.15 FTE from the Office of Planning and Evaluation: \$79,079
- Reduce State Mental Health Grant 37 – Special Projects funding : (\$550,798)
- Add 0.75 FTE Spanish Speaking MH Consultant through SAMHSA grant: \$57,691

<b>Mental Health &amp; Addiction Service</b>	<b>2000-01</b>	<b>2001-02</b>	<b>2001-02</b>	<b>2002-03</b>	
<b>Budget Trends</b>	<b>2000-01</b>	<b>Current</b>	<b>Adopted</b>	<b>Adopted</b>	
	<u><b>Actual</b></u>	<u><b>Estimate</b></u>	<u><b>Budget</b></u>	<u><b>Budget</b></u>	<u><b>Difference</b></u>
Staffing FTE	0.00	0.00	0.00	193.26	193.26
Personal Services	\$0	\$0	\$0	\$12,664,046	\$12,664,046
Contractual Services	\$0	\$0	\$0	\$65,579,755	\$65,579,755
Materials & Supplies	\$0	\$0	\$0	\$3,292,678	\$3,292,678
Capital Outlay	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
<b>Total Costs</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$81,536,479</b>	<b>\$81,536,479</b>

## MHAS Administration

MHAS Administration sets policy; offers resource generation, allocation and management; and carries out the planning needed to develop a continuum of effective, customer-focused behavioral health services. It initiates contracts, budgets and manages division funds, and is responsible for the clinical and medical policies and procedures across programs.

**FY 2002: 0.00 FTE      FY 2003: 10.00 FTE**

## Special Projects: Bienestar de la Familia

Bienestar de la Familia (Well-being of the Family) offers comprehensive and specialized services in areas such as mental health, family resources, early childhood, alcohol and drug prevention, and developmental disabilities. Created in 1998, this unique program focuses on services to the Latino community. It collaborates with other community organizations to create a continuum of services customized for each family. It makes over 1,020 contacts per month, seeing clients in their homes, schools, hospitals, and other community settings.

**FY 2002: 0.00 FTE      FY 2003: 7.08 FTE**

## Addiction Services

The unit is responsible for the development of local alcohol, drug, and problem gambling services offered through the community delivery system. It provides oversight and coordination of contracted services and collaborates with other departments and County and state entities in system management and service development efforts.

Annually, an estimated 93,739 persons are in need of alcohol and drug treatment in Multnomah County. Alcohol and Drug Abuse Services include prevention, intervention, sobering, detoxification, outpatient and residential treatment, and services for gambling addicts. Services are available to both adults and adolescents and are delivered through a diverse network of providers. Synthetic opiate replacement therapy, such as Methadone, is also offered.

The typical client is a 35-year old white male who has been arrested once and is currently in outpatient treatment for alcohol and other drug abuse or dependency. Culturally specific programs focus on the treatment needs of women, Native Americans, African Americans, Hispanics, and Asian Americans. During the 2000-2001 fiscal year, 16,898 adults and 1,085 youth were enrolled in publicly funded alcohol and drug treatment services. These individuals engaged in the following treatment services: Sobering episodes – 12,894; Methadone detoxification episodes – 615 adults and 2 youth; Methadone outpatient episodes – 3,462 adults and 4 youth; Residential treatment episodes – 1,770 adults and 169 youth; Outpatient treatment episodes – 8,201 adults and 1,002 youth; DUII – 5,235 adult and 19 youth; Marijuana diversion episodes – 8. In addition, 11,266 youth and adults received prevention services funded through the Office of Addiction Services.

**FY 2002: 0.00 FTE      FY 2003: 27.15 FTE**



## Early Childhood/ Child Abuse Program

Early Childhood and Child Abuse Mental Health Programs are partnerships with major child-serving organizations concerned with education, child welfare, health, and childcare. Each program provides a full range of prevention, intervention, and system-enhancing services for young children and their families and for children and families affected by child abuse and neglect. All programs support and enhance the emotional, relational, social, cognitive, and behavioral health and development of children within their families.

The programs include Early Childhood Mental Health Programs (including the ECMH Partnership and Best Practices Project), Family Enhancement, CARES Family Support Team, and the Gateway Children's Campus (including the Children's Receiving Center). They support approximately 9,000 children and families (the majority of whom are low-income). The programs actively identify and serve high-risk child populations (abused/neglected, very young, poor).

**FY 2002: 0.00 FTE**

**FY 2003: 19.30 FTE**

## Child Adolescent Program

Child & Adolescent Treatment Services is responsible for providing broad-based mental health services for children and adolescents. Services include:

- Triage
- Assessment and Diagnosis
- Crisis intervention
- Treatment services
- Case management
- Collaboration with families and human services professionals.

**School-Based Programs** work within early childhood care and education programs and public elementary, middle, and high schools, in partnership with the host educational organization. These programs provided services to 2,316 children during the fiscal year 00-01.

**Non-School-Based Programs** are provided within Juvenile Justice settings, Caring Community programs, Health Department programs, Services to Children and Families programs, and other child and family services settings, in partnership with the host human services organization. Non-School Based Programs provided services to 2,264 children during the fiscal year 00-01.

**FY 2002: 0.00 FTE**

**FY 2003: 56.23 FTE**

## Care/Case Management Program

The unit's services include the involuntary commitment program, hospital discharge planning and trial visit monitoring, mental health care coordination and case management services, residential case management, the monitoring of residential facilities, housing development, personal care services, and the new call center and crisis line. The call center manages the utilization of acute, sub-acute, and respite bed availability for the mental health system, as well as

home-based stabilization funds and the dispatch of the new, countywide mobile outreach service. The crisis line currently handles about 120 calls per day.

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

**FY 2002: 0.00 FTE      FY 2003: 43.10 FTE**

## Quality Assurance Utilization Review

This unit is responsible for assuring that service providers meet, at a minimum, State certification standards. In addition, this unit reviews for new certification applicants who are otherwise eligible, via RFP, to enter into a contract with this division. The unit is also responsible for developing an overall Quality Assurance Plan for both County-direct and subcontracted community services, and is responsible for investigating abuse reports involving persons with mental illness, and protective service complaints involving mentally ill adults.

**FY 2002: 0.00 FTE      FY 2003: 19.90 FTE**

## Operations and Support Services

This program carries out plan administrative functions such as claims processing and the establishment of case management and utilization policies and procedures. It also offers member services, and performs provider relations and information and referral functions.

**FY 2002: 0.00 FTE      FY 2003: 10.50 FTE**

Costs by Program	2000-01	2001-02	2002-03	Difference
	<u>Actual</u>	<u>Adopted Budget</u>	<u>Adopted Budget</u>	
MHAS Administration	\$0	\$0	\$2,617,256	\$2,617,256
Special Projects	\$0	\$0	\$1,615,242	\$1,615,242
Addiction Services	\$0	\$0	\$16,906,962	\$16,906,962
Early Childhood/Child Abuse Program	\$0	\$0	\$2,054,598	\$2,054,598
Child Adolescent Program	\$0	\$0	\$5,670,188	\$5,670,188
Care/Case Management	\$0	\$0	\$50,618,481	\$50,618,481
Quality Assurance/Utilization Review	\$0	\$0	\$1,413,742	\$1,413,742
Operations & Support	\$0	\$0	\$640,010	\$640,010
<b>Total Costs</b>	<b>\$0</b>	<b>\$0</b>	<b>\$81,536,479</b>	<b>\$81,536,479</b>

## Business Services

The Business Services Division provides support functions to the Department. Major functions include Financial Management, Human Resources, Office Services, and Contract Management.

### Action Plans:

*This Division provides department-wide services and ensures accountability and responsiveness in contracting, procurement, financial services, budgeting, human resources, and general operation.*

- Integrate the business service functions of the new department and implement best practices and efficiencies by June 2003.
- Prepare accurate and timely financial and human resource reports of the new department to managers by December 2002.
- Introduce technology efficiencies, consolidate systems, and integrate shared client data by September 2002.
- Consolidate development efforts to replace legacy systems by December 2002, to help meet the needs of the new department.
- Work with information exchange partners (county, state, providers, etc) to comply with new HIPAA regulations regarding application, security, and client confidentiality changes by October 2002.

### Significant Budget Changes:

- Reduce General Fund Support: (\$99,731)
- Cut 1.00 FTE HR Manager 2: (\$113,581)
- Transfer in 1.00 FTE from the Planning and Evaluation unit: \$86,433

<b>Business Services</b>					
<b>Budget Trends</b>	<b>2000-01</b>	<b>2001-02</b>	<b>2001-02</b>	<b>2002-03</b>	
	<u><b>Actual</b></u>	<u><b>Current Estimate</b></u>	<u><b>Adopted Budget</b></u>	<u><b>Adopted Budget</b></u>	<u><b>Difference</b></u>
Staffing FTE	0.00	0.00	0.00	44.00	44.00
Personal Services	\$0	\$0	\$0	\$2,750,382	\$2,750,382
Contractual Services	\$0	\$0	\$0	\$20,000	\$20,000
Materials & Supplies	\$0	\$0	\$0	\$3,275,957	\$3,275,957
Capital Outlay	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
<b>Total Costs</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$6,046,339</b>	<b>\$6,046,339</b>

## Business Services Administration

Business Services Administration oversees the Business Services Division.

**FY 2002: 0.00 FTE      FY 2003: 1.70 FTE**

## Human Resources

Human Resources provides best practices consultation to Department managers in order to recruit and retain the highest quality employees and to diversify the workforce. The Office consults with supervisors and managers regarding federal and state employment law; collective bargaining agreements; employee benefits; diversity and affirmative action; classification; compensation; policy and procedure interpretation; training and organizational development; FMLA, ADA, Worker's Compensation, grievance, and contract administration; and other employment matters. The Human Resources Office also maintains all employee medical records, as well as those pertaining to personnel, timekeeping, and recruitment.

**FY 2002: 0.00 FTE      FY 2003: 7.50 FTE**

## Finance

The Finance unit ensures accountability for public resources managed by the Department. The staff prepares and monitors the annual budget, processes accounts payable, accounts for the financial transactions of all Public Guardian clients, does purchasing for the Central Office, prepares billing reports for State and Federal grants, and provides office management services for the Central Office.

**FY 2002: 0.00 FTE      FY 2003: 18.25 FTE**

## Contract Management

The Contract Management unit processes Departmental contracts to assure that they comply with County, State and Federal requirements. They provide a range of contract support services for the more than 400 CHS human service contracts, which total more than \$130 million.

The Contracts Management unit administers all procurement activities for the purchase of services, and assists Department managers in the development of Requests for Proposal. It processes approximately 1,000 contracts and amendments annually, performs pre-qualification analysis for social service providers, negotiates with potential contractors, and develops contract reports as needed.

**FY 2002: 0.00 FTE      FY 2003: 9.75 FTE**

## Office Services

Office Services maintains facilities and coordinates safety issues such as emergency evacuation planning and implementation. It also provides for receptionist services at the Central Office.

**FY 2002: 0.00 FTE      FY 2003: 6.80 FTE**

## IT Services

As part of the "Shared Services" model, the functions and staff of the Department technology support staff have been transferred to the Information Technology Organization (ITO). Information technology costs for CHS are shown as an internal service reimbursement charge.

The mission of IT Services is to:

- Help customers effectively manage their demand for IT services.
- Provide efficient IT services based on best practices
- Enable employees to utilize IT in order to provide innovative services to the citizens of Multnomah County.

The operating principles of IT Services are:

- Customers determine the services they need and the appropriate level of IT investment to support their programs.
- A Service Level Agreement (SLA) will be defined to establish performance expectations in every customer department. IT Services will review the SLAs with each customer annually or as requested, so that customers understand what drives IT costs and how they can manage their demand for IT services.
- IT Services will benchmark its costs and performance with external best practices and will collect and report customer satisfaction feedback in order to monitor and improve performance on an ongoing basis.

**FY 2002: 0.00 FTE      FY 2003: 0.00 FTE**

<b>Costs by Program</b>	<b>2000-01</b>	<b>2001-02</b>	<b>2002-03</b>	
	<u><b>Actual</b></u>	<u><b>Adopted Budget</b></u>	<u><b>Adopted Budget</b></u>	<u><b>Difference</b></u>
Business Services Administration	\$0	\$0	\$263,012	\$263,012
Human Resources	\$0	\$0	\$555,139	\$555,139
Finance	\$0	\$0	\$1,289,315	\$1,289,315
Contracts	\$0	\$0	\$698,580	\$698,580
Information Technology	\$0	\$0	\$2,776,707	\$2,776,707
Office Services	<u>\$0</u>	<u>\$0</u>	<u>\$463,586</u>	<u>\$463,586</u>
<b>Total Costs</b>	<b>\$0</b>	<b>\$0</b>	<b>\$6,046,339</b>	<b>\$6,046,339</b>

### Planning and Evaluation

The Planning & Evaluation unit was dissolved, and the remaining staff transferred to the various operating divisions of the Department.

**Significant Budget Changes:**

- Cut General Fund and 5.00 FTE: (\$435,349)
- Transfer and/or cut 6.25 FTE due to merger of departments and end of grant funding 9/30/02: (\$336,316)
- Title 3-B Funding eliminated: (\$78,567)
- Transfer 7.00 FTE to operating divisions: (\$793,844)