



Multnomah County Oregon

Board of Commissioners & Agenda

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BOARD OF COMMISSIONERS

Ted Wheeler, Chair

501 SE Hawthorne Boulevard, Suite 600
Portland, Or 97214

Phone: (503) 988-3308 FAX (503) 988-3093

Email: mult.chair@co.multnomah.or.us

Deborah Kafoury, Commission Dist. 1

501 SE Hawthorne Boulevard, Suite 600
Portland, Or 97214

Phone: (503) 988-5220 FAX (503) 988-5440

Email: district1@co.multnomah.or.us

Jeff Cogen, Commission Dist. 2

501 SE Hawthorne Boulevard, Suite 600
Portland, Or 97214

Phone: (503) 988-5219 FAX (503) 988-5440

Email: district2@co.multnomah.or.us

Judy Shiprack, Commission Dist. 3

501 SE Hawthorne Boulevard, Suite 600
Portland, Or 97214

Phone: (503) 988-5217 FAX (503) 988-5262

Email: district3@co.multnomah.or.us

Diane McKeel, Commission Dist. 4

501 SE Hawthorne Boulevard, Suite 600
Portland, Or 97214

Phone: (503) 988-5213 FAX (503) 988-5262

Email: district4@co.multnomah.or.us

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MAY 5, 6 & 7, 2009

BOARD MEETINGS

FASTLOOK AGENDA ITEMS OF INTEREST

Pg 2	9:00 a.m. Tuesday possible Executive Session
Pg 3	10:00 a.m. Tuesday Budget Work Session: Department of County Human Services
Pg 3	6:00 p.m. Tuesday Public Budget Hearing
Pg 4	10:00 a.m. Wednesday Budget Work Session: Department of Health
Pg 5	9:00 a.m. Thursday 1st Reading Ordinance Increasing Motor Vehicle Rental Tax
Pg 5/6	9:32 a.m. Thursday Budget Message/Approval for 2010 Service Districts Proposed Budgets
Pg 6	10:40 a.m. Thursday Convey Martha Washington Bldg to HAP for Affordable Housing
Pg 7	11:15 a.m. Thursday Health Equity Initiative

Thursday meetings of the Multnomah County Board of Commissioners are cable-cast live and taped and may be seen by Cable subscribers in Multnomah County at the following times:

Thursday, 9:30 AM, (LIVE) Channel 29

Saturday, 10:00 AM, Channel 30

Sunday, 11:00 AM, Channel 30

(↑ Portland & East County)

Tuesday, 8:15 PM, Channel 29

(↑ East County Only)

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Tuesday, May 5, 2009 - 7:30 AM to 9:00 AM
Multnomah Building, Third Floor Conference Room 315
501 SE Hawthorne Boulevard, Portland

**LOCAL PUBLIC SAFETY COORDINATING
COUNCIL EXECUTIVE COMMITTEE MEETING**

A quorum or more of the Multnomah County Board of Commissioners may attend the Local Public Safety Coordinating Council Executive Committee meeting. This meeting is open to the public. For further information contact Carol Wessinger at (503) 988-5217.

Tuesday, May 5, 2009 - 9:00 AM
Multnomah Building, Sixth Floor Commissioners Conference Room 635
501 SE Hawthorne Boulevard, Portland

IF NEEDED EXECUTIVE SESSION

- E-1 The Multnomah County Board of Commissioners will meet in Executive Session Pursuant to ORS 192.660(2)(d),(e) and/or (h). Only Representatives of the News Media and Designated Staff are allowed to attend. News Media and All Other Attendees are Specifically Directed Not to Disclose Information that is the Subject of the Session. No Final Decision will be made in the Session. Presented by County Attorney Agnes Sowle. 15-55 MINUTES REQUESTED.

Tuesday, May 5, 2009 - 10:00 AM
Multnomah Building, First Floor Commissioners Boardroom 100
501 SE Hawthorne Boulevard, Portland

BUDGET WORK SESSION

WS-1 This work session will provide the Board with budget overview on the Multnomah County Department County of Human Services Fiscal Year 2010 Budget. In the Department's presentation, the Board will first hear from the DCHS Citizen Budget Advisory Committee about its work and recommendations. **This meeting is open to the public however no public testimony will be taken.** Presented by DCHS Director Joanne Fuller and Invited Others. 2 HOURS REQUESTED.

CABLE PLAYBACK INFO:

(East County Only)

Tuesday, May 5 - 10:00 AM LIVE Channel 29

Friday, May 8 - 8:00 PM Channel 29

Saturday, May 9 - 2:00 PM Channel 29

Sunday, May 10 - 11:00 AM Channel 29

Tuesday, May 5, 2009 - 6:00 PM
North Portland Library Conference Room
512 N Killingsworth, Portland

PUBLIC BUDGET HEARING

PH-1 Public Hearing on the 2009-2010 Multnomah County Budget. Testimony is limited to three minutes per person. Fill out a speaker form available in the conference room and turn it into the Board Clerk. The North Portland Library conference room will be open one hour prior to the hearing.

CABLE PLAYBACK INFO:

(Portland and East County)

Thursday, May 7 - 12:00 PM Channel 21

(East County Only)

Friday, May 8 - 11:00 PM Channel 29

Saturday, May 9 - 5:00 PM Channel 29

Sunday, May 10 - 2:00 PM Channel 29

Wednesday, May 6, 2009 - 10:00 AM
Multnomah Building, First Floor Commissioners Boardroom 100
501 SE Hawthorne Boulevard, Portland

BUDGET WORK SESSION

WS-2 This work session will provide the Board with budget overview on the Multnomah County Department of Health Fiscal Year 2010 Budget. In the Department's presentation, the Board will first hear from the Community Health Council Citizen Budget Advisory Committee about its work and recommendations. **This meeting is open to the public however no public testimony will be taken.** Presented by Department of Health Director Lillian Shirley and Invited Others. 2 HOURS REQUESTED.

CABLE PLAYBACK INFO:

(East County Only)

Wednesday, May 6 - 10:00 AM LIVE Channel 29

Saturday, May 9 - 10:00 PM Channel 29

Sunday, May 10 - 8:00 PM Channel 29

Monday, May 11 - 8:00 PM Channel 29

Thursday, May 7, 2009 - 9:00 AM
Multnomah Building, First Floor Commissioners Boardroom 100
501 SE Hawthorne Boulevard, Portland

REGULAR MEETING

CONSENT CALENDAR - 9:00 AM

DEPARTMENT OF COUNTY MANAGEMENT

C-1 BUDGET MODIFICATION DCM-14 Reclassifying One Position in Assessment & Taxation as Determined by the Class/Comp Unit of Central Human Resources

C-2 BUDGET MODIFICATION DCM-15 Reclassifying Three Positions in Information Technology as Determined by the Class/Comp Unit of Central Human Resources

DEPARTMENT OF COMMUNITY SERVICES

C-3 ORDER Authorizing the Public Sale of Tax Foreclosed Property

DEPARTMENT OF COUNTY HUMAN SERVICES

- C-4 ORDER Authorizing a Designee of the Mental Health Program Director to Direct a Peace Officer to Take an Allegedly Mentally Ill Person into Custody

REGULAR AGENDA

NON-DEPARTMENTAL - 9:00 AM

- R-1 First Reading of a Proposed ORDINANCE Amending Multnomah County Code Sections 11.300, 11.301 and 11.304 Relating to Motor Vehicle Rental Tax

DEPARTMENT OF COUNTY HUMAN SERVICES – 9:25 AM

- R-2 BUDGET MODIFICATION DCHS-37 Appropriating \$131,590 in American Recovery and Reinvestment Act Ramp Up Plan Funding to the Department of County Human Services, Energy Services Program

PUBLIC COMMENT - 9:30 AM

Opportunity for Public Comment on non-agenda matters. Testimony is limited to three minutes per person. Fill out a speaker form available in the Boardroom and turn it into the Board Clerk.

SERVICE DISTRICTS - 9:30 AM

(Recess as the Board of County Commissioners and convene as the governing body for DUNTHORPE RIVERDALE SANITARY SERVICE DISTRICT NO. 1)

- R-3 Appoint Jeffery Van Osdel to Serve a Three Year Term on the Dunthorpe-Riverdale Sanitary Service District No. 1 Budget Committee
- R-4 Appoint Dunthorpe-Riverdale Sanitary Service District No. 1 Budget Committee Chair and Secretary for Fiscal Year 2009-2010
- R-5 Dunthorpe-Riverdale Sanitary Service District No. 1 **Budget Message Presentation** followed by Public Hearing and Consideration of Approval of the 2009-2010 Dunthorpe Riverdale Sanitary Service District No. 1 Proposed Budget for Submittal to Tax Supervising and Conservation Commission

(Adjourn as the governing body for Dunthorpe Riverdale Sanitary Service District No. 1 and convene as governing body for MID-COUNTY STREET LIGHTING SERVICE DISTRICT NO. 14)

R-6 Appoint Mid-County Street Lighting Service District No. 14 Budget Committee Chair and Secretary for Fiscal Year 2009-2010

R-7 Mid-County Street Lighting Service District No. 14 **Budget Message Presentation** followed by Public Hearing and Consideration of Approval the 2009-2010 Mid County Street Lighting Service District No. 14 Proposed Budget for Submittal to Tax Supervising and Conservation Commission

(Adjourn as the governing body for Mid-County Street Lighting Service District No. 14 and reconvene as BOARD OF COUNTY COMMISSIONERS)

NON-DEPARTMENTAL - 9:55 AM

R-8 Amended Strategic Investment Program Contract between Multnomah County, the City of Gresham and Microchip Technology, Incorporated

AUDITOR'S OFFICE – 10:10 AM

R-9 Financial Condition Report of Multnomah County 2009. Presented by Sarah Landis, Deputy Auditor and Judith DeVilliers, Principal Auditor. 30 MINUTES REQUESTED.

DEPARTMENT OF COUNTY MANAGEMENT – 10:30 AM

R-10 NOTICE OF INTENT to Apply for Grant Funding of Up to \$7,200,000 of Stimulus Money Directly from the Federal Government or Indirectly through the State to Improve County-Owned Facilities, Reduce Utility Costs, and Lessen Maintenance Time and Expense

R-11 RESOLUTION Approving the Conveyance of the Martha Washington Building, 1115 SW 11th Avenue, Portland, Oregon, to the Housing Authority of Portland, for Redevelopment as Affordable and Permanent Supportive Housing Providing Services to County Target Populations

R-12 NOTICE OF INTENT to Apply for Federal American Recovery and Reinvestment Act (ARRA) Funds through the Oregon Department of Energy for the Portland/Multnomah County Clean Energy Fund Pilot

R-13 RESOLUTION Approving a Memorandum of Agreement with Portland Metropolitan Regional Partners and the State of Oregon Establishing a Coordinated Effort and Request for Federal Stimulus Funds for the Deployment of Electric Vehicles and Electric Vehicle Infrastructure

DEPARTMENT OF HEALTH – 11:00 AM

R-14 BUDGET MODIFICATION HD-15 Appropriating \$26,505 in Revenue from the State of Oregon, Department of Human Services – School Based Health Center Expansion Evaluation Project

R-15 BUDGET MODIFICATION HD-16 Appropriating \$16,000 in Revenue from the State of Oregon, Department of Human Services – Fetal Alcohol Syndrome Surveillance Program

R-16 BUDGET MODIFICATION HD-17 Appropriating \$149,941 in Revenue from the Robert Wood Johnson Foundation Healthy Eating Research Rapid Response Grant Program

R-17 Budget Modification HD-18 Appropriating \$99,999 in Revenue from the Robert Wood Johnson Foundation Substance Abuse Policy Research Program and \$15,000 in Revenue from the State of Oregon, Department of Human Services, Evaluation of Smoke Free Multi-Unit Housing

R-18 Health Equity Initiative: Year 1 Update. Presented by Tricia Tillman and Sonali Balajee (HEI staff), Urban League (tentative), Regence Blue Cross/Blue Shield (tentative), Oregon Health Action Campaign (tentative); Countywide Coordinating Team members (TBD). 45 MINUTES REQUESTED.



MULTNOMAH COUNTY
AGENDA PLACEMENT REQUEST – short form

Board Clerk Use Only

Meeting Date: 05/06/09
Agenda Item #: WS-2
Est. Start Time: 10:00 AM
Date Submitted: 04/16/09

Agenda Title: **Fiscal Year 2010 Budget Work Session on the Health Department**

Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title.

Requested Meeting Date:	<u>May 6, 2009</u>	Amount of Time Needed:	<u>2.0 hours (10:00 a.m.-12:00)</u>
Department:	<u>County Management</u>	Division:	<u>Budget Office</u>
Contact(s):	<u>Karyne Kieta</u>		
Phone:	<u>503-988-3312</u>	Ext.	<u>22457</u>
		I/O Address:	<u>503/5/531</u>
Presenter(s):	<u>Lillian Shirley and invited others</u>		

General Information

1. What action are you requesting from the Board?

This work session will provide the Board with budget overview on the Health Department. In the department's presentation, the Board will first hear from the Citizen Budget Advisory Committee about its work and recommendations on the FY 2010 budget. There are no decisions to be made.

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

After the Chair's proposed budget is approved for submission to the Tax Supervising & Conservation Commission, the Board may begin deliberations on it. This work session will be the first opportunity for the Board to hear from the department in the health and human services category. The Board will have the opportunity to ask clarifying questions and to deliberate on the approved budgets.

Departments will generally follow the Budget Presentation format below:

FY 2010 Approved Budget Departmental Budget Presentation Format

Introductions

Department CBAC Presentation

Department Overview

- Who We Are, What We Do
- Who We Serve, Our Partners
- Performance
 - How do we measure our performance? How do we maintain or improve performance in current fiscal climate?
- FY 2009 Accomplishments

FY 2010 Proposed Budget

- Approach
- Values & Guiding Principles
- Keeps
 - Overview
 - OTO
 - Backfill
 - Innovative/New
- Cuts
 - Programs
 - Expenditures
 - FTE
 - Impacts
 - Risks
 - Partners

State Impacts – What We Know

Issues, Risks & Challenges

- Policy Issues
- Short Term Concerns
- Long-Term Concerns

Questions?

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

N/A—Board work session only.

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

N/A—Board work session only.

5. **Explain any citizen and/or other government participation that has or will take place.**

The Chair's proposed budget has included significant public participation. Several community

forums have been held to date, and additional public hearings and community forums have been scheduled at various times during the upcoming weeks.

Required Signatures

**Elected Official or
Department/
Agency Director:**

Carol M. Ford

Date: 04/16/09



Multnomah County Community Health Council 2009 Citizen Budget Advisory Committee

Process: The Multnomah County Community Health Council serves as the Health Department's community advisory board and CBAC. It is also the federally-mandated governing body of Multnomah County's community health centers. The mission of the Community Health Council is to provide input and direction for community health center activities (including primary care, dental, early childhood services, nursing, school based, pharmacy and diagnostic imaging services) and advise the Department on current and emerging matters in public health, including program reviews, policy development and budget recommendations. It is an appointed group, including members of the community with an interest in public health, representatives from local health and social service organizations, and most importantly, consumer members who utilize the Health Department's clinical services. One of our most important functions as a Council is to review and monitor Health Department's annual budget.

The Council works closely with the Director and staff of the Health Department, meeting monthly throughout the year to provide community guidance on a wide variety of public health services, programs and policies affecting Multnomah County residents. Additionally, the Council receives quarterly updates regarding the Health Department's finances from the Business Services Director as well as monthly updates on budget issues from the Department Director.

Major Changes:

- Redesigning clinical leadership to support current and future system; eliminating 'lead' role and putting back more clinical time.
- Focusing and moving to Director's Office those service that are key to maintaining quality and performance indicators across the system—Health Equity, Health Promotion, Planning, Research and Evaluation
- Eliminating a service area and consolidating senior management and support
- WIC will move to CHS and Early Childhood will undergo a strategic planning process to clarify service intent in the community in conjunction with all our services impacting young families.
- Emergency Preparedness and Business Continuity will report in the Director's office, to the Deputy Director, to ensure internal operations are streamlined.
- Medicaid Eligibility will move to Clinic Operations to provide more support to patients.

Recommendations / Concerns: We believe that Multnomah County's most significant priority should be to ensure the health and well-being of all county residents.

The biggest concern we have is maintaining the current infrastructure within the clinics to ensure that patients have access to high quality services. We maintain that while programs may come and go depending on funding, our main concern is if the Health Department loses their internal capacity than all programs will suffer, regardless of funding. Maintaining the current service level is critical for the programs and patients the Health Department serves. Adequate funding to sustain the County's current clinical health system is critical in order to do this. The County's

primary care clinics are the front line in supporting our most vulnerable neighbors. As the income gap continues to grow, exacerbating health disparities, our County health clinics become an even more indispensable resource for the community at large. Furthermore, many of their services leverage funds from the federal government through reimbursement that benefit the County greatly. Reimbursement dollars enable the Health Department to expand access to care and serve vulnerable populations (homeless, women, children, etc) through high quality health care.

We do not want to see the Health Department risk its "federally qualified health center" (FQHC) status and its ability to obtain federal dollars. Federal funding requires that county health centers keep a certain level of care and number of sites within the clinic system. To qualify for federal funding, health centers must maintain (1) a system of care that ensures access to primary and preventive services, and facilitates access to comprehensive health and social services, (2) quality services responsive to the needs and culture of the target community and/or populations, (3) effective clinical and administrative leadership and procedures to guide the provision of services and quality improvement programs and (4) a consumer majority governing Council. The Multnomah Health Department is not currently in danger of losing federal primary care grants, but as the budget cuts deepen, we are concerned about the direction the Department will be forced to take and the impact on our FQHC status. Cutting sites and provider teams will result in lost Medicaid revenue and potentially a loss of federal funding for uninsured care. It is important to understand that cutting provider teams, without cutting building and operating costs, typically results in more revenue lost than costs saved.

Finally, maintaining the internal capacity of the Health Department will enable them to better respond to the upcoming health care reform initiatives that are being implemented by President Obama. Health care reform is moving quickly and we want to ensure that the Health Department will be able to access additional funding opportunities and actively seek additional funding through federal reimbursement without compromising the current work and the only way to ensure this is to maintain the internal capacity within the Department.

We wholeheartedly support the program offers submitted by the Health Department. The internal reorganization will enable the Department to streamline services and delivery care in a more coordinated effort. With the growing number of uninsured and underinsured patients rising each year, it is in the County's best interest to fund program offers that highlight prevention and education efforts.

Emerging Issues: One important issue not addressed by any of the submitted program offers is the infrastructure (externally and internally) of the County clinics. While some of the clinics have been redesigned and upgraded (North Portland Health Center and East County Health Center) there still are several clinics that are in desperate need of building improvements. This year, the Department was able to completely remodel Mid County Health Center and the effects are remarkable. Often, the focus is on clinical services provided and little thought is given to the value an aesthetically pleasing, customer centered environment can impact a client's well-being.

Patient centered care begins the moment the client walks through the doors of the clinic. The ambience of the clinics can play a big role in how the client feels about the service being

provided. Northeast Portland Health Center in particular, is in desperate need of funding to update the waiting areas and redesign the check in areas for more patient privacy. The Health Department is currently researching funding opportunities to begin these upgrades and financial support from the Board of County Commissioners is imperative.

In conclusion, we ask the County to keep pressure on the State and federal government to uphold its responsibility to find funding solutions. We urge you to advocate as you can for systemic changes of the state's health care system. Multnomah County simply cannot continue serving its residents without adequate funding and support from both the state and federal government.

From the Council's perspective, the Department has been a responsible manager of its financial and human resources. Our Council serves as a voice of the community, representing many individuals who directly benefit from the exceptional services currently in place. At our monthly meetings, we hear directly from clients who are continually impressed with the compassion of the health care providers, the technological advances such as Electronic Health Records at the clinics, and the Department's commitment to cultural competence. It is our hope that you will continue to focus on the needs of our community's most vulnerable residents.

Community Health Council Members:

Harold Odihambo, Chair

Mauricio Somilleda, Vice Chair

May Lynn Chu, Secretary/Treasurer

Amy Anderson, Member at Large

Barry Mattern

Robert Hardy

Téjara Brown

Sandy Spiegel

Martin Davidson

Donna Sather

Veronica Rodriguez Morales

Ruth Duran

Bonnie Malone

Multnomah County Health Department

**Approved Budget FY 2010
Briefing to the Board of County Commissioners
May 6, 2009**

**The Health Department assures, promotes, & protects the
Health of the people of Multnomah County**

Assure
access to
necessary and
dignified health
care

Promote
the health of all
County
residents

Protect
the health of
all County
residents



MULTNOMAH
COUNTY

Health Department

Health Department

Community Health Council – CBAC Recommendations



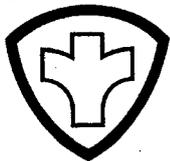
Public Health
Prevent. Promote. Protect.

Budget Presentation
May 6, 2009

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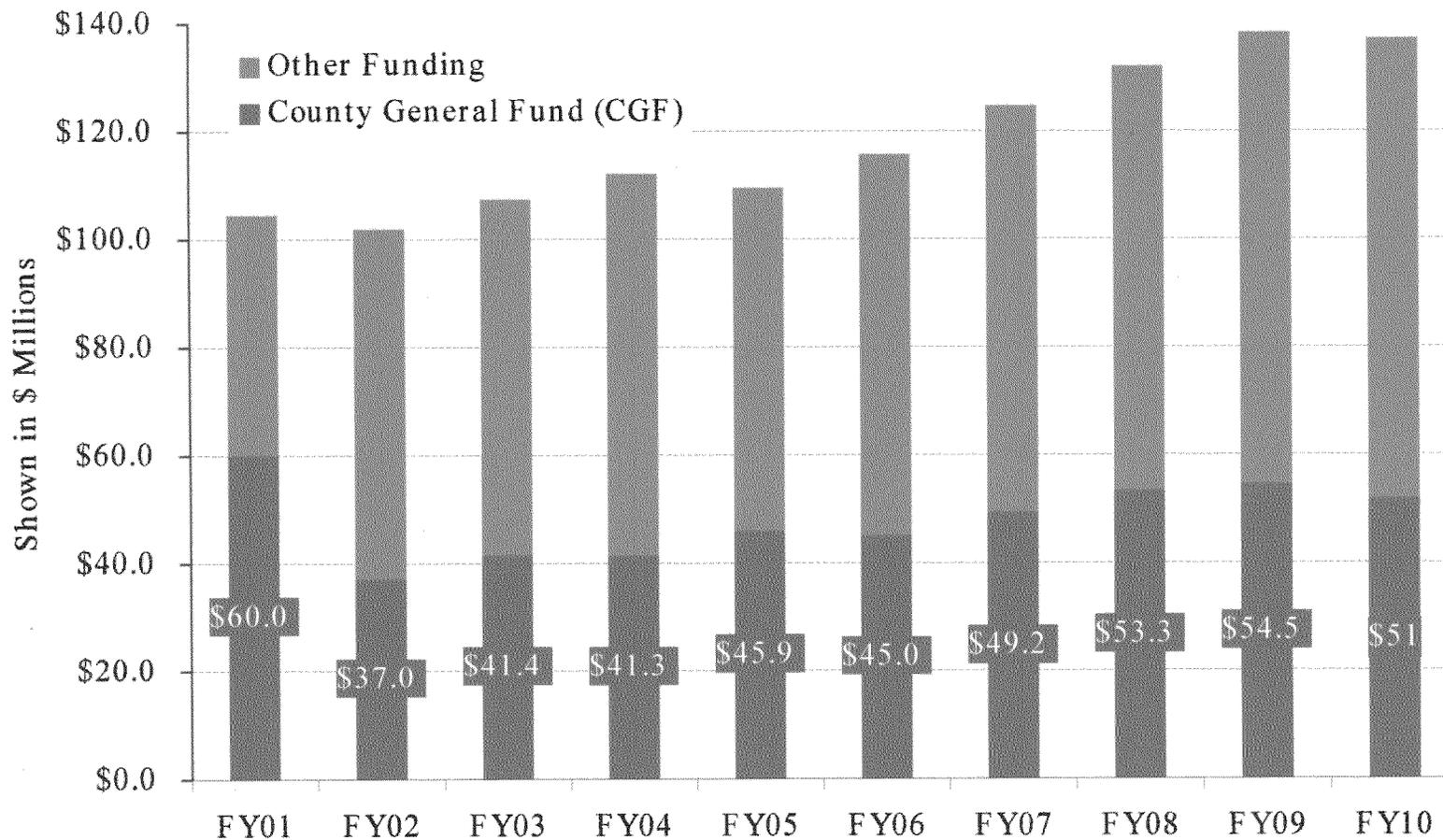
Budget Overview

- \$136 million total budget for FY2010
- Includes \$47 million in general fund support, \$5 million in general fund and EMS fees generated by the services we provide
- Total of 870.4 FTE which equates to 1,000 full and part-time employees

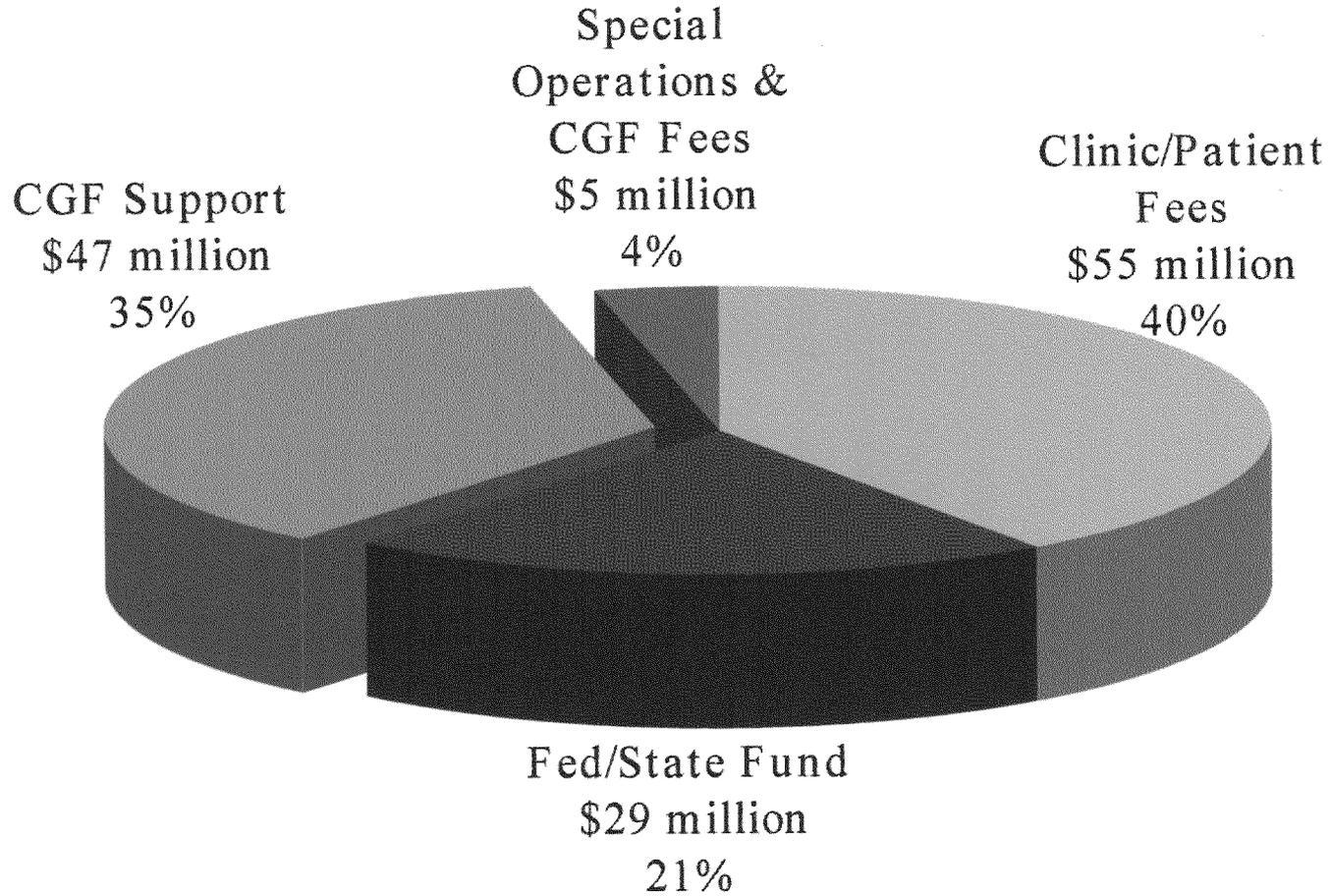


Budget Summary- History

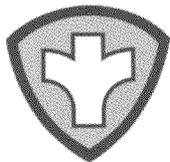
Adopted Budget Comparison



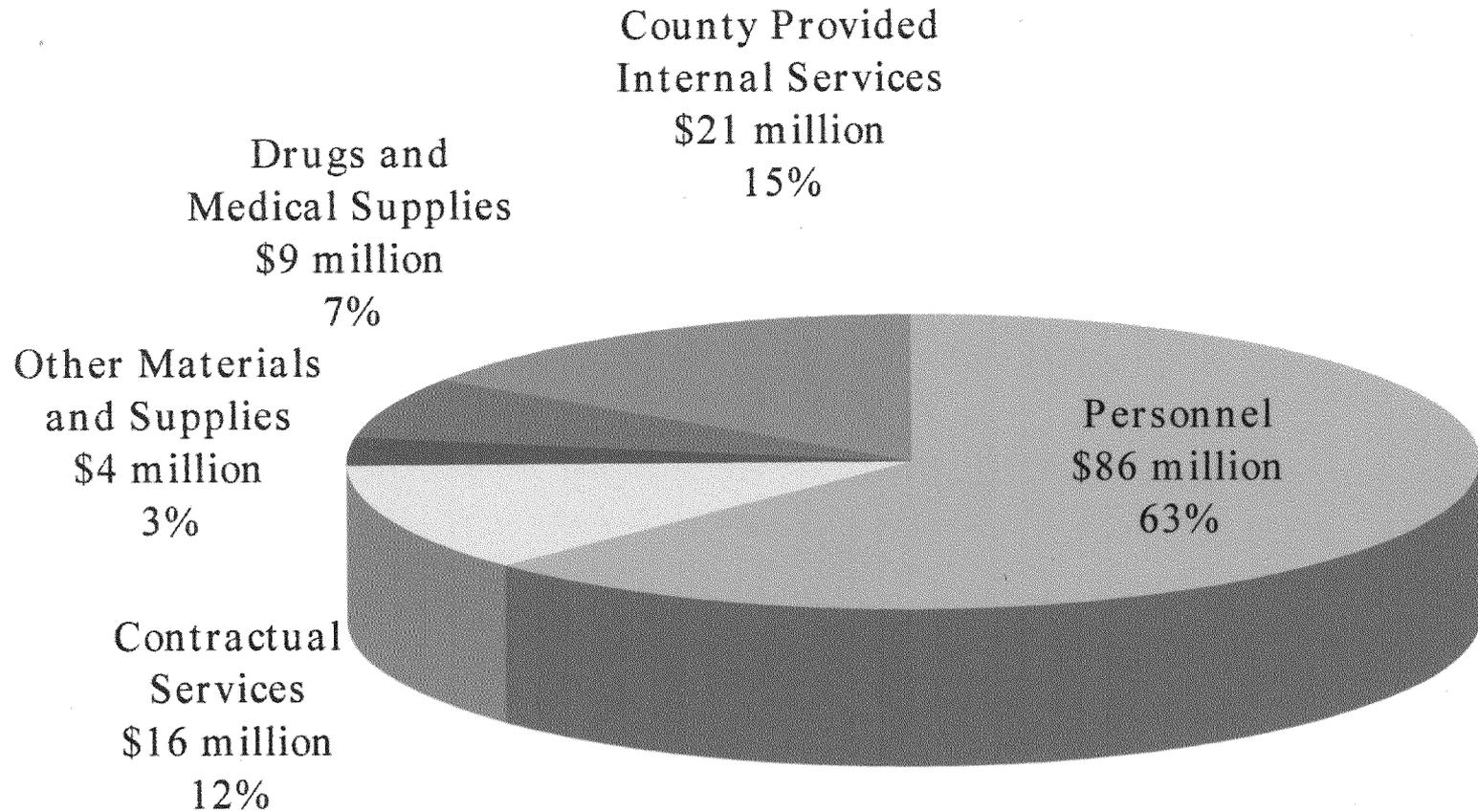
Budget Summary- Revenue



Total \$136 million



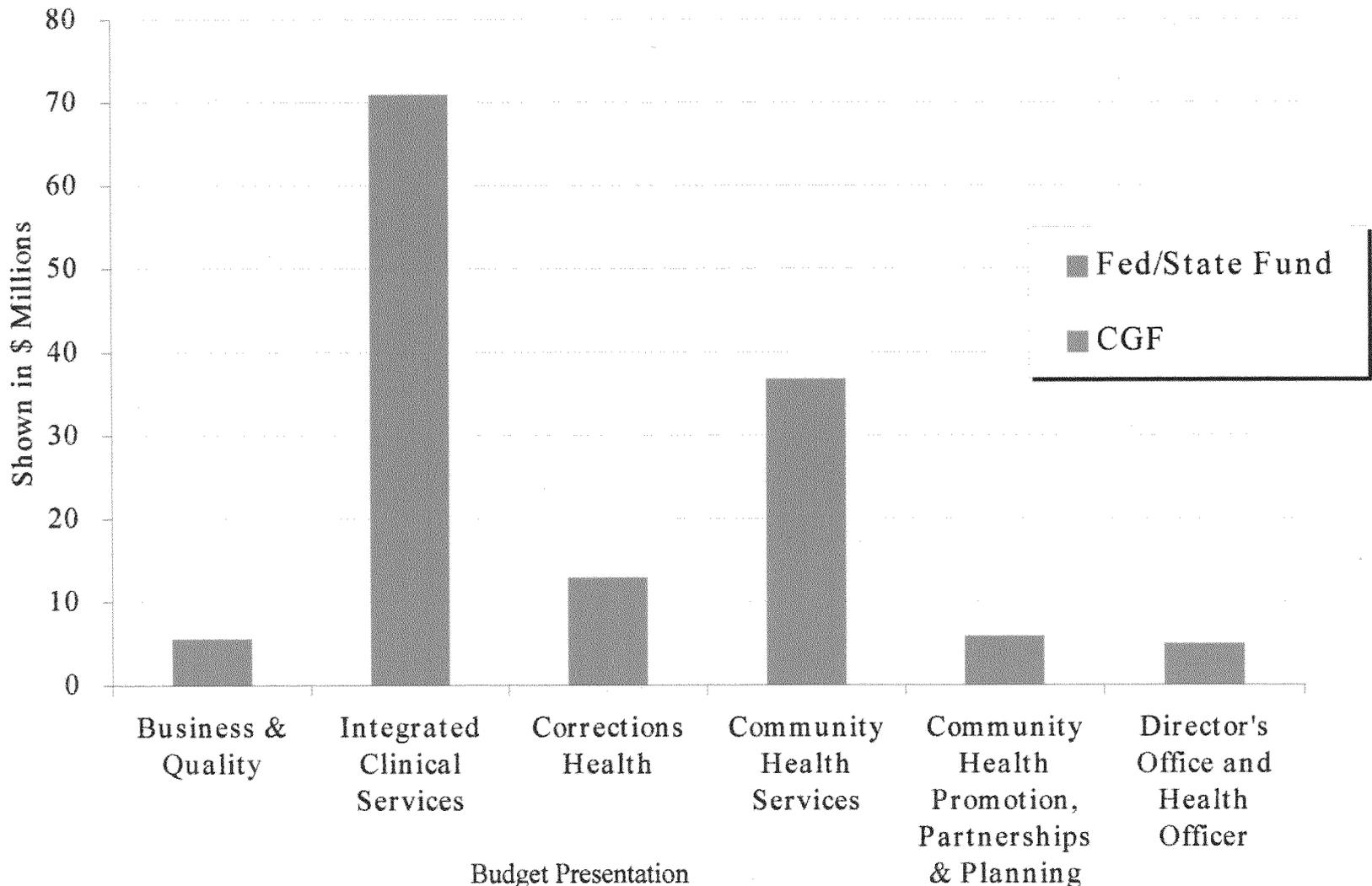
Budget Summary- Expenditures



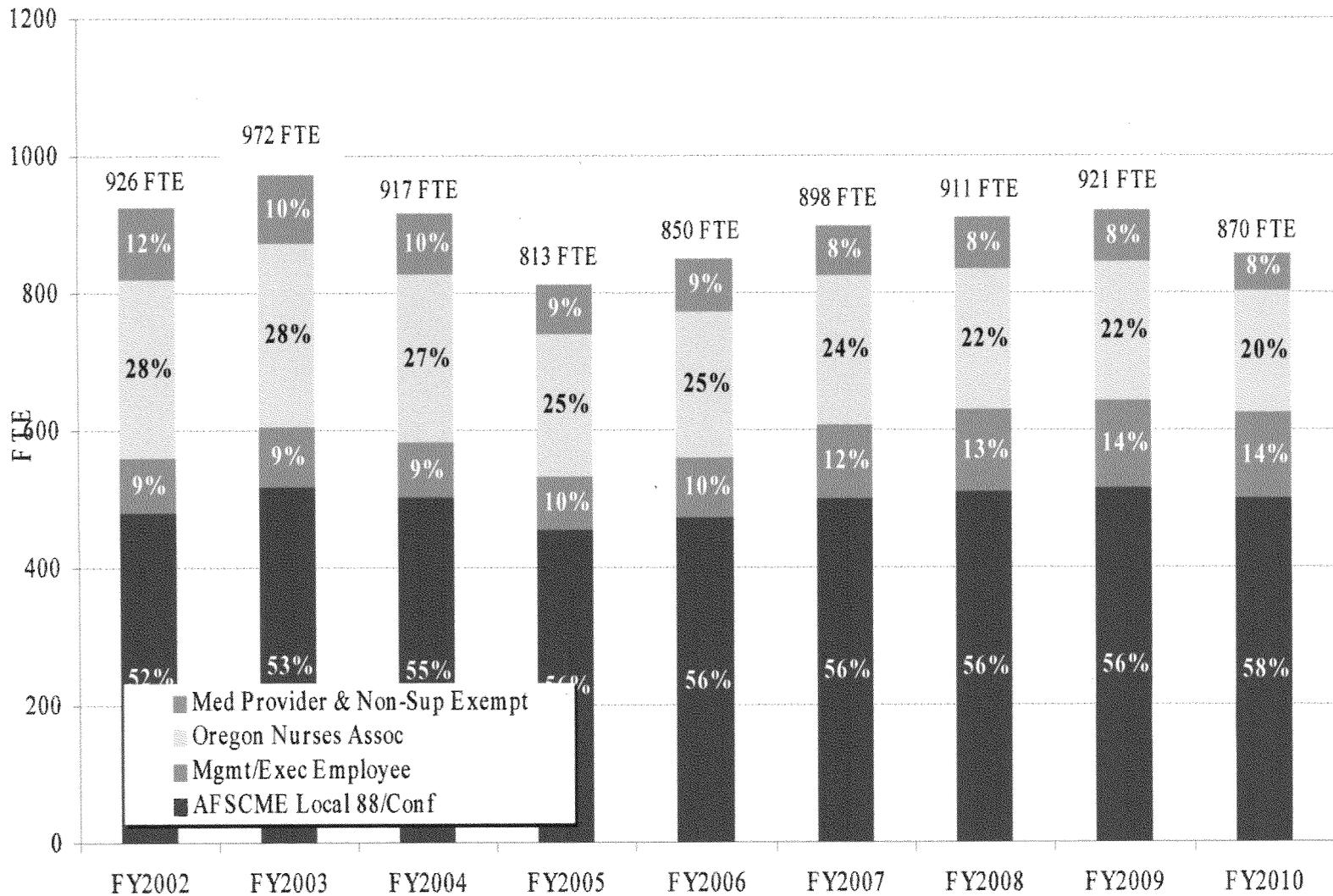
Total \$136 million



Budget Summary-By Service Area or Program



Budget Summary- FTE



Accomplishments in FY09

1. Building Better Care
2. CAWEM Pilot
3. Health Policy
 - Upstream interventions that reduce disease in the community
4. Regional Health Officer
 - Public Health Emergency Preparedness



Budget Strategies

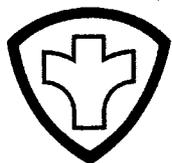
1. Maintain public health infrastructure
2. Prioritize vulnerable families and communities
3. Invest in prevention strategies/services
4. Anticipate funding opportunities
5. Mitigate impact on community –make structural or staffing changes first



Significant Program Changes and Cost Cutting for FY10

Cost Reductions

- Adult Dental <\$3.5 million>
- Early Childhood <\$1.9 million>
- Executive Budget Restored* ***\$1.0 million***
- Corrections Health <\$2.8 million>
- Executive Budget Restored* ***<\$200,000>***
- HIV/HepC/STD <\$600,000>
- CD/OHO/TB <\$380,000>



Challenges and Opportunities

1. Adult Dental
2. Corrections Health
3. Early Childhood
 - *Prevention services (restored and expanded)
4. Integration/Realignment
 - *WIC *Eligibility
 - *Chronic Disease
 - *Child and Adolescent Health
5. Surge Capacity



State and Federal Impacts

What We Know...

Less CGF in clinic system = fragile
revenue margin

State Public Health \$ still uncertain

Stimulus money ±

Positioned well for Federal priorities

- Nurse Family Partnership
- WIC





MULTNOMAH
COUNTY

Health Department

Questions?



Public Health
Prevent. Promote. Protect.

Budget Presentation
May 6, 2009

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