

Department: Health Department **Program Contact:** Samantha Kaan
Program Offer Type: Existing Operating Program **Program Offer Stage:** As Proposed
Related Programs:
Program Characteristics:

Executive Summary

Community Epidemiology Services (CES) provides the fundamental capacity that allows the Public Health Division to make data-driven decisions, program improvements, and policy recommendations. CES helps public health leaders, policy makers, clinicians, and community members know how disease is occurring within communities. CES identifies the drivers of health and causes of disease, and demonstrates whether and how well health interventions are working.

Program Summary

Community Epidemiology Services (CES) fulfills a unique and required governmental public health role by collecting and analyzing programmatic, epidemiologic, and environmental data in order to prevent disease and promote and protect health among all Multnomah County populations. The CES unit leads Public Health Division (PHD) programs in coordinated public health data and epidemiologic analysis and analyzes population and health system data to assist programs in optimizing quality and accountability to the communities they serve. The program provides analytic products and reports to support program development, strategic planning, resource allocation, decision-making, and community priorities (including community-based participatory research). CES also works closely with the Communicable Disease Services program to provide outbreak response through epidemiologic support, statistical modeling, and standardized investigative guidelines.

CES identifies appropriate analytical approaches, helps assure the use of high quality data for analysis, and provides technical, scientific oversight and leadership for all research and epidemiologic work in the PHD. This program provides support in quantitative methods, guidance in the areas of traditional epidemiological analysis, social epidemiology, and equity-focused and trauma-informed methods in research and evaluation, data management, and designing metrics related to health care transformation and Public Health Modernization. This unit disseminates analytic findings, including public health data reports, policy briefs, web-based reports, and presentations to County leadership, programs and community partners. In addition, CES provides public health practice recommendations to PHD leadership based on needs identified from local data, evidence-based and promising practices identified through literature review.

Program Design & Evaluation Services, a unit shared between CES and the Oregon Health Authority, conducts applied public health research projects and provides program design and evaluation support to County and State programs to improve community health, shape public policy, and reduce health inequities. Examples of data monitoring and reporting in CES/PDES include the development, maintenance, and dissemination of the Multnomah County Maternal Child and Family Health Databook, Report Card on Racial and Ethnic Disparities, and the Vital Signs, which presents data on emerging policy issues (e.g., retail marijuana legalization).

Performance Measures

Measure Type	Primary Measure	FY15 Actual	FY16 Purchased	FY16 Estimate	FY17 Offer
Output	Number of data-related community collaborations that involve all partners and combine data with action.	12	NA	12	12
Outcome	Number of reports monitoring health status through surveillance, assessment, & community engagement.	21	NA	23	25

Performance Measures Descriptions

1) New measure. Example includes 2015 report, "Health Disparities among Pacific Islanders in Multnomah County: A supplement to the 2014 Report Card on Racial and Ethnic Disparities." 2) New measure.

Legal / Contractual Obligation

Oregon Revised Statutes (ORS) 431.416 Local Public Health Authority duties:

- (a) Epidemiology and control of preventable diseases and disorders
- (b) Parent and child health services
- (c) Collection and reporting of health statistics
- (d) Health information and referral services
- (e) Environmental health services

Program Design and Evaluation Services (PDES) is primarily grant funded, and program continuation is required by grant.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2016	2016	2017	2017
Personnel	\$1,025,663	\$1,148,877	\$713,269	\$1,059,283
Contractual Services	\$25,000	\$539,000	\$0	\$605,486
Materials & Supplies	\$91,895	\$89,368	\$60,240	\$99,332
Internal Services	\$167,280	\$175,637	\$45,792	\$122,924
Total GF/non-GF	\$1,309,838	\$1,952,882	\$819,301	\$1,887,025
Program Total:	\$3,262,720		\$2,706,326	
Program FTE	8.25	9.60	5.23	8.21

Program Revenues				
Indirect for Dept. Admin	\$123,363	\$0	\$95,844	\$0
Intergovernmental	\$0	\$1,671,570	\$0	\$1,887,025
Other / Miscellaneous	\$0	\$417,022	\$0	\$0
Total Revenue	\$123,363	\$2,088,592	\$95,844	\$1,887,025

Explanation of Revenues

State Local Public Health Authority IGA: \$619,301
Natl Institutes of Health: \$479,074
State Of Alaska: \$459,049
State Office of Multicultural Health: \$147,085
Oregon Marijuana Legalization Impact: \$41,500
Seattle King County: \$19,316
Oregon Dept. of Corrections: \$85,300
Lead Harzard Reduction Program Eval: \$36,400

Significant Program Changes

Last Year this program was: FY 2016: 40048-16 Community Epidemiology

This program incorporates functions from former program #40035 (Health Assessment, Planning and Evaluation). Public health informatics function has moved to program 40001, Public Health Administration and Quality Management.

New federal funding from the National Institutes of Health for assessing impact of local regulatory policies associated with recreational marijuana legalization include \$479,074 per year.