



Deborah Kafoury Multnomah County Chair

July 21, 2022

Jennifer McGuirk, MPA, CIA
Multnomah County Auditor
501 SE Hawthorne Blvd., Room 601
Portland, OR 97214

Dear Auditor McGuirk,

The Chief Operating Officer (COO), the Health Department (MCHD) and Public Health Division, the Department of County Human Services (DCHS), and I would like to extend our sincere gratitude to the Multnomah County Auditor's Office for reviewing the Multnomah County COVID-19 contact tracing and isolation support services. We appreciate the Auditor's thorough and engaging approach. Walking through this review has been an excellent reminder of how hard our staff has worked over the past two-plus years to respond to a fast-moving global public health emergency.

In this letter, we acknowledge the recommendations provided through the audit and describe the commitment of the Health Department, the Department of County Human Services and the Chief Operating Officer in addressing the findings and recommendations.

The scale of contact tracing and needed isolation support services were both without precedent in Multnomah County. Under the declaration of the state emergency, both activities were scaled up with a profound sense of urgency. We encountered myriad unknowns as we stood up a response to this brand new, potentially deadly virus that quickly became one of the most contagious infections ever known. And since the COVID-19 pandemic is not over, our interventions continue to be responsive to the growing needs of our community, with specific care for our marginalized populations.

The pandemic also laid bare the social and economic vulnerability of many Multnomah County residents and households. The County quickly stood up isolation and wraparound services. Working directly with community-based organizations to reach

Multnomah County's diverse communities in culturally relevant ways has enriched our work and reflects the future of our approach to public health.

We recognize our accountability to the public and embrace a continuous quality improvement approach. We are pleased to offer early comments below about our plans for capturing and reviewing our performance, the lessons we've learned, and opportunities for improvement. Our approach to addressing the audit findings also accounts for the demands on our workforce and contracted providers as we continue to respond to COVID-19 and other emerging public health threats.

Recommendation 1

We recommend that the Health Department work with the Department of County Human Services to provide education and technical support to partner organizations around county contracts, reporting requirements, and county expectations around data collection, monitoring, and service provision by October 1, 2022.

We agree with this recommendation and work has already begun to implement these changes. In the event of public health emergencies like the COVID-19 global pandemic, the importance of continuity across our organization — regardless of department or division — cannot be understated. This coordination must be in tandem with all other internal stakeholders at the County in order to reduce administrative burden, duplicated work and confusion.

Due to the sudden onset of the COVID-19 pandemic in early 2020, and the subsequent surges across the county and state, many of the awarded contracts were done so under the authority of emergency contracting.

The Health Department's Contracts and Procurement (HDPC) unit of its Finance and Business Management Division is beginning to work with DCHS' contracting unit to provide coordinated reporting and technical support to partner organizations throughout the contracting process. MCHD will work with DCHS to create a streamlined and consistent internal process for engaging with fiscal compliance as they support our partner organizations with risk assessments and other reporting requirements that come with federal funding, such as COVID-19 relief funding. The first meeting is scheduled for July 26, 2022, to establish goals and objectives as we move forward with this partnership.

The HDCP unit now has a project manager who is coordinating an outreach event for our partner organizations. The goal is to host in-person events that will focus on how to successfully engage with County Contracting and Procurement, and to assist future or potential partners in getting registered and oriented to our systems.

In addition, MCHD will leverage the pending feedback and results of the COVID-19 pandemic response After Action Review to identify cornerstones of improvement for future planning and emergency contracting. Community Partnerships and Capacity Building (CPCB) staff are currently working with Barry Zimmerman, the County's Deputy Purchasing Manager, on providing financial workshops for community partners; the content and focus of these workshops will be further shaped by the soon-to-be completed After Action Review.

Recommendation 2

We recommend that the Health Department work with the Department of County Human Services to monitor whether contracted partners adhere to monthly reporting requirements and create a plan of action for when they do not by October 1, 2022.

We support this recommendation. As noted above, Health and DCHS are aligning our work and engaging our community-based partners to educate them on, and monitor their adherence to, reporting requirements.

Recommendation 3

We recommend that the Health Department work with the Department of County Human Services to develop a plan to evaluate the efficacy and timeliness of wraparound services and assess the current data collection and information sharing system under that lens by January 1, 2023.

We support this recommendation. As noted above, the Health Department and DCHS are working closely together to improve services and data collection with regard to wraparound services. Specifically we are looking at efficacy and timeliness.

MCHD is currently creating an enhanced structure for quality assurance that will have a program performance evaluation function that includes the development of metrics and analysis of outcomes and outputs; benchmarking and promising practices; and continuous quality improvement. The new Data Governance & Quality Director (currently posted on MCHD's career site through July 23) will lead this effort. Plans are

underway to consolidate data and quality improvement reporting in this new work unit aligned under the newly added Health Department Deputy Director of Operations.

The Health Department's quality team will be better positioned under this updated structure to assess current state quality metrics related to both in-house care delivery and for contracted services. While some quality metrics may be common to both MCHD and contractor-delivered services, there will likely be specific quality assurance and performance metrics developed for contracted services.

Furthermore, quality assurance will apply industry standard metrics to public health and care delivery, but also to wraparound services. A community and person-centered approach will drive the development of how we measure the success of these services. This way, we can ensure that the voices and experiences of those we serve are at the forefront of informing how MCHD meets the needs of the County's patient populations.

The quality assurance positions across departments will collaborate to establish a standardized assessment through a full breadth of targeted, priority-driven quality improvement efforts to support frontline staff and teams.

Recommendation 4

We recommend that the Health Department work with the Department of County Human Services to document lessons-learned and incorporate into planning documents, including lessons-learned identified in this report by January 1, 2023.

We agree with this recommendation, and MCHD has taken steps to capture lessons-learned from the MCHD COVID-19 response as part of a thorough After Action Review. This process will capture lessons-learned, which can then be incorporated into planning documents and operational plans for future outbreaks, pandemics, and other types of emergency response needs. MCHD will coordinate this work with DCHS.

Recommendation 5

We recommend that the Health Department, including Community Partnerships and Capacity Building in Public Health, work with county Organization Learning to create a mechanism, such as a community of practice, for staff across the county who work with community partners and community-based organizations to network, collaborate, and develop professionally by July 1, 2023.

We agree with the premise of this recommendation. Communities of practice at the County are typically employee-led groups with a shared professional interest to advance

collective knowledge and learning. Central Human Resources will provide technical assistance to interested employees in the Health Department, including Community Partnerships and Capacity Building in Public Health, as well as community-based organizations, to facilitate discussions that will explore opportunities to create a community (or communities) of practice by July 1, 2023. Groups such as these are often seen as key to improving workplace knowledge and skill in an area or practice. MCHD has identified several staff who are already invested and immersed in this work to support these efforts.

Recommendation 6

We recommend that the Chief Operating Officer work with department leadership, including the Health Department Director, Human Resources, Risk Management, and Emergency Management to identify barriers and establish processes for redeploying county experts to programs in need during emergencies by July 1, 2023.

This could include exploring changes to labor contract language or a county policy for all employees to be disaster workers, and identifying a strategic range of cross-county participants, like Health and HR, to include in emergency preparedness activities.

We agree with the premise of this recommendation. While the County had existing processes and systems to deploy staff during an emergency before the pandemic, much was learned during the COVID-19 emergency and subsequent severe weather and wildfire events. For example, the County developed job descriptions for various types of emergency positions; refined its use of software that allowed employees and volunteers to sign up for shifts; piloted agreements with its union partners; and reiterated expectations that, as public servants, we are all expected to step up in the case of an emergency.

One of the greatest tools the County used to ensure adequate staffing was to create an incentive program by bargaining a pilot with union partners. This pilot is slated to end Sept. 30, 2022. Central Human Resources is currently planning an evaluation of the pilot to inform future plans. In addition, the County is actively bargaining with eight of its unions and including proposals to reduce barriers and facilitate staffing during an emergency.

The Chief Operating Officer will work with Emergency Management and other departments beyond the Health Department, as well as Human Resources and Risk Management, to continue to refine and improve its emergency response.

Recommendation 7

We recommend that the Chief Operating Officer work with department leadership, including the Health Department Director, Human Resources, Risk Management, and Emergency Management to evaluate and revise or add to general county trainings to ensure they set expectations for working during emergencies and can be available on demand by July 1, 2023.

We agree with this recommendation. The Chief Operating Officer will work with Emergency Management and other departments beyond the Health Department, as well as Human Resources and Risk Management, to continue to set expectations for our workforce about working during an emergency. Many trainings for specific work types already exist (e.g., training on disaster relief shelter work) and are available on demand. We will continue to reinforce these expectations through ongoing strategic communication and by including information in events such as New Employee Orientation and other general County and department trainings. As mentioned above, this issue is included in the bargaining strategy with many of our union partners.

Again, we thank you for this opportunity to highlight the collaborative and effective work of the Health Department, the Department of County Human Services and others in response to the COVID-19 pandemic. We are a learning organization and look forward to continuing to improve our approach and response to emergency events.

Sincerely,

A handwritten signature in black ink, appearing to read "Deborah Kafoury". The signature is fluid and cursive, with the first name being more prominent.

Deborah Kafoury
Multnomah County Chair