



Office of Community Involvement



Health Department CBAC

TO: Chair Deborah Kafoury and Board of County Commissioners 9 pages

FROM: Health Department Community Budget Advisory Committee (CBAC)

DATE: April 29, 2022

SUBJECT: HD Community Budget Advisory Committee Report & Recommendations

EXECUTIVE SUMMARY

The previous Health Department CBAC developed a Values Statement that continues to guide the work of our committee. These guiding principles affirm that:

- We are transformative leaders
- We offer expert knowledge
- We uphold racial justice
- We operate with dignity and respect
- We believe in inter-cultural intelligence
- We hold ethics at the core

With 38 out-of-target offers submitted by the Department in their February transmittal letter, this committee sends forward recommendations for 22 offers – ten general fund program offers, ten funded with federal ARPA dollars and two one-time only requests. Although we recognize that 22 offers is a significant number of recommendations to forward, the committee believes these recommendations would allow the department to do the following:

- Prioritize what we hope are transformational long-term investments in the Behavioral Health Resource Center, recognizing the essential role the Health Department plays in addressing broader behavioral health and substance use challenges facing so many across our community.
- Recognize and acknowledge that health care disparities exist within our community with profound and generational impacts, and intentionally invest in culturally-responsive services to support communities that have historically been underserved.
- Continue to lead the community COVID-19 response. All of us are hopeful that the impacts of the pandemic will lessen into the future, but it is vital that the department has the resources to effectively address whatever course the pandemic takes in the coming year. This includes specific support for populations that have been

Health Department CBAC

disproportionately impacted and settings that present highest risk for community transmission.

- Take advantage of a unique opportunity to invest one-time federal dollars in infrastructure that improves the capacity and delivery of department services.

PROCESS

The committee welcomed two new members during the current budget cycle. For the first time since October 2020, we were able to meet with each division director throughout the year. These conversations were tremendously useful in developing our recommendations and allowed the committee to learn more about the functions, budget priorities, and long-term goals of each division. Committee members also spent several meetings working with County employees facilitating training around the Color Brave Space framework. This equity training was delivered to department staff and the committee appreciated the opportunity to better understand this work and how it is integrated across the department.

Health Department presenters:

- Debbie Smith and Kara Hill (Human Resources)
- Jessica Guernsey, Debbie Rood and LaRisha Baker (Public Health)
- Dr. Jennifer Vines (Health Officer)
- Myque Obiero, Michael Seale and Rachael Lee (Corrections Health)
- Julie Dodge (Behavioral Health)
- Wendy Lear (Financial and Business Management)
- Sky Wilson (Office of Equity and Inclusion)
- Adrienne Daniels and Jeff Perry (Integrated Clinical Services)
- Maria Lisa Johnson (Office of Organizational Development)

Having considered only ten out-of-target program offers during the FY22 budget cycle, initial discussion centered on how large a set of recommendations to send forward this year from almost forty out-of-target offers for FY23. Committee members first ranked program offers individually and then identified common areas of agreement about which offers to recommend. Since the Department was allocated the bulk of the overall County-wide ARPA spending in FY22, we decided to recommend a majority of the out-of-target offers that would be funded with those federal dollars in FY23 and just under half of the 22 out-of-target general fund offers submitted by the department.

EMERGING ISSUES & CHANGES

It is clear to us as a group that the COVID-19 pandemic has been an unprecedented challenge for the Health Department and we commend the tireless work of department employees in leading our community response over the past two years. We also recognize that the scope of that work has posed significant challenges to department operations, requiring staffing and

Members: Alysia Cox, Nathan Miley-Wills, Rhonda Combs, CJ Alicandro, Rosalie Lee, Eleanor Carrick, Jimmy Mak. **Staff:** Wendy Lear, Michael Eaves

Health Department CBAC

other resources to be shifted to pandemic response efforts. The impacts of this, including challenges in recruitment and employee retention, is something the committee will continue to monitor going forward as the department commits additional resources to HR, recruiting and staff development.

Just as clear to our committee is the fact that the pandemic has exposed and in many ways deepened pre-existing disparities for historically under-resourced communities. We share the department's deep commitment to health equity, and its commitment to lead with race in acknowledging and addressing these disparities. Our committee continues to prioritize investments in both internal equity work and culturally-specific service delivery in our community when making our program offer recommendations.

BUDGET FEEDBACK

Lessons learned from COVID-19 have allowed programs to rethink some service delivery processes and how to create or expand programming to meet the specific needs of our community. The CBAC Committee recommends that the unique opportunity to leverage federal dollars provided by ARPA be utilized not just to maintain COVID-19 response capabilities in the near term, but also be utilized to address long-term needs and goals with investment in capacity building and infrastructure that would not otherwise be available.

PROGRAM OFFER RECOMMENDATIONS

Our specific General Fund recommendations are as follows, in priority order:

- 1. 40105A Behavioral Health Resource Center (BHRC) - Day Center**
Navigating the current array of shelter, behavioral health, and substance treatment programs in Portland is complex even for seasoned social workers. Clients are forced to bounce between churches, nonprofits, and emergency departments on a weekly basis to meet their immediate and ongoing needs. Every transition to a different agency or location is an opportunity for someone's case to fall through the cracks. Centralizing information & referral, peer services, and on-site providers under one roof will prove a huge boon for our community. Incorporating shelter space is a welcome feature considering the hassle of dealing with vouchers, transportation, and long waitlists for temporary housing. Funding multi-use, trauma-informed, and equity-focused centers like this is one of the most concrete ways we can begin to address our housing and mental health crises.
- 2. 40105B Behavioral Health Resource Center (BHRC) - Shelter/Housing**
(see rationale above)

Members: Alysia Cox, Nathan Miley-Wills, Rhonda Combs, CJ Alicandro, Rosalie Lee, Eleanor Carrick, Jimmy Mak. **Staff:** Wendy Lear, Michael Eaves

Health Department CBAC

- 3. 40099D Early Childhood Mental Health Program - Culturally specific contracting**
As Preschool for All begins for 3 and 4-year olds this fall across the County, the committee feels that it is critical that all eligible students and families can take advantage of the culturally-specific social/emotional and mental health supports that this program offers. Committee members who have worked directly with this program have found it to be an essential resource for children, families and educators in preparing students to enter kindergarten ready to succeed.
- 4. 40069B Downtown Peer Services Partnership**
The Downtown Peer Services Partnership represents an opportunity to provide much needed peer support to individuals experiencing houselessness involved in critical incidents. Most notably, the committee believes the rapid response teams will have the appropriate tools to intervene with increased behavioral health challenges, while improving safety and enabling continuity of aid deliveries. Further, this program aims to improve and strengthen partnerships with service agencies to improve outcomes. The committee recommends funding the partnership as a commitment to focus on behavioral health resources and improve the health and wellbeing of people experiencing houselessness.
- 5. 40052B Additional Medical Examiner**
Recognizing the significantly increasing caseloads across the County requiring medical examiner investigation over the past five years, the committee recommends funding Program #40052B. Adding an additional medical examiner will bring staffing levels to par with other jurisdictions of similar size across the country. The high public visibility and statutory requirements for the medical examiner’s office also argue for additional staffing resources to provide information to families and the larger community in a timely and responsive manner.
- 6. 40096C Future Generations Collaborative**
For over a decade now, the FGC has been improving the health of Multnomah County’s Native community. It is not enough for government agencies to simply acknowledge the indigenous inhabitants of this land without tangibly supporting the people still living and working here. The FGC incorporates indigenous ways of knowing and healing into their framework, setting a model for all of Multnomah County to learn from. Supporting initiatives like the FGC is one of the most direct ways that we can prioritize and uplift the efforts of our communities which have endured historic and systemic harms.
- 7. 40000C Health Department Director's Office- Additional Deputy Director**
For any organization to succeed, there must be sustainable leadership to provide structure in its mission, vision and values. Leadership in the Health Department has been stretched for years and the pandemic has made it extremely apparent that a

Members: Alysia Cox, Nathan Miley-Wills, Rhonda Combs, CJ Alicandro, Rosalie Lee, Eleanor Carrick, Jimmy Mak. **Staff:** Wendy Lear, Michael Eaves

Health Department CBAC

second Deputy Director is needed to support the executive workload of the department. This leadership role will be pivotal in supporting the operational and strategic functions of the department's day-to-day as well as preparing for the future responses to the next phases of COVID-19. For the sake of sustaining a strong and healthy leadership team that is able to support its employees and the needs of the department, we strongly endorse the addition of this position.

8. 40046B Organizational Development - Office of Equity and Inclusion

The COVID-19 pandemic set off nearly unprecedented churn in the U.S. labor market. In 2021, more than 47 million workers quit their jobs, many of whom were in search of an improved work-life balance and flexibility, increased compensation, and strong company culture. Companies in almost every industry are desperate to hire people to keep up with demand.

During the pandemic reshuffling, jobs that require in-person attendance and traditionally have lower wages have had a more difficult time retaining workers. Therefore, the committee recommends funding Program #40039C - Organizational Development. The Office of Equity and Inclusion (OEI) plays an integral role in supporting managers and supervisors to develop leadership skills that create workplace environments where employees experience trust, safety, and belonging. We believe the strategic goals will accelerate culture change efforts to support our organization's recovery and help institute healthy, inclusive, and equitable work environments for employees across the department. Additionally, it will help build capacity among health department managers and supervisors to lead inclusively with race

9. 40039C Human Resources - Additional Recruiters

The committee recommends funding Program #40039C to support Human Resources Operations efforts to support recovery from the intensity of the COVID response and help institute healthy, inclusive, and equitable work environments for employees across the department. This work aligns with the CBACs values of prioritizing critical staffing priorities while driving diversity targets, career counseling for staff, skill development, promotion and partnership with community organizations to foster pipelines for County employment.

10. 40059B Corrections Health - Eligibility Specialist Restoration

Committee members bring experience with both assisting in the OHP application process and providing healthcare services to individuals released from custody without successful completion of an OHP application. This lends to firsthand experience that lack of healthcare coverage upon release from custody represents a significant barrier to access for critical healthcare services. Acknowledging that Corrections Health serves a disproportionately BIPOC population who face increased barriers, the committee is

Members: Alysia Cox, Nathan Miley-Wills, Rhonda Combs, CJ Alicandro, Rosalie Lee, Eleanor Carrick, Jimmy Mak. **Staff:** Wendy Lear, Michael Eaves

Health Department CBAC

recommending the out-of-target funding for Eligibility Specialist Restoration, Program #40059B, to ensure additional eligibility capacity.

Our specific American Rescue Plan (ARP) Program recommendations are as follows, in priority order:

1. 40199C ARP - Public Health - Isolation and Quarantine

The COVID-19 pandemic brutally exposed the many weaknesses in our healthcare system by highlighting health inequities disproportionately affecting people of color. This glaring fact has spurred long-overdue discussions about race and health equity. As a step towards resolving this, this program was created to help vulnerable residents who have been exposed to COVID-19 and are in need of additional support and accommodations. These wraparound services include rental assistance, hunger-relief support and motel space to isolate following exposure. We strongly endorse this program because we believe these services are essential for slowing the transmission of this disease in our communities, especially those that are experiencing racial disparities surrounding COVID-19 response.

2. 40199R ARP - Culturally Specific Behavioral Health Programs

Deficits in service delivery were emphasized by the pandemic, specifically, in supporting culturally specific program offerings. There has been an increase in behavioral health needs and these gaps were identified in FY2022. By identifying the gaps in service and expanding services to our BIPOC communities, these behavioral health supports can address service delivery gaps that have been exacerbated by the pandemic.

3. 40199T Public Health CDC COVID-19 Health Disparities

The COVID-19 pandemic exposed significant weaknesses in local and national agencies' ability to respond at scale. The response further highlighted the systemic public health inequity crisis that exists. The committee strongly recommends funding Program #40199T, Public Health CDC COVID-19 Health Disparities, to build infrastructure that addresses current COVID-19 disparities and creates a foundation for a more equitable future response. This allocation of resources and subsequent strategic action is a necessary step in moving the needle on racial equity.

4. 40199D ARP - Behavioral Health - Continuing COVID Response

The committee acknowledges and appreciates the Behavior Health Department's commitment to proactively address these challenges while continuously adapting to the shifting community needs. Multnomah County residents are struggling to navigate the COVID-19 pandemic. Social health indicators for older adults and Black, Indigenous, and other People of Color have shown a decrease in access to services to alleviate depression, anxiety, and other symptoms of stress. In 2021 we saw further heightened

Members: Alysia Cox, Nathan Miley-Wills, Rhonda Combs, CJ Alicandro, Rosalie Lee, Eleanor Carrick, Jimmy Mak. **Staff:** Wendy Lear, Michael Eaves

Health Department CBAC

disparities in social indicators of health in BIPOC communities across the age spectrum, impacting mental health, crisis, substance use, violence, and education.

The committee recommends Program #40199D - ARP - Behavioral Health - Continuing COVID Response in alignment with the CBAC's values. This program is designed to improve health outcomes, increase equity, and provide trauma-informed services and community-informed, culturally specific practices as the pandemic continues.

5. **40199Q ARP - Gun Violence Impacted Families Behavioral Health Team**

Gun violence, shootings, and homicides have increased in Multnomah County. Exasperated political and community leaders in Portland acknowledge gun violence continues to rise in the city despite efforts to counter it. The committee recognizes gun violence is a racial justice issue fueled by discrimination and structural inequities in our society.

Gun violence in Multnomah County disproportionately impacts our African American, Latinx, Asian, and African Refugee communities. This program provides additional direct mental health services to youth and their families affected by gun violence. Therefore, the committee recommends funding Program# 40199Q to improve health outcomes and provide trauma-informed services and community-informed practices in partnership with community partners and providers.

6. **40199I ARP - COVID-19 Response Support Services**

The COVID-19 pandemic set off nearly unprecedented churn in the U.S. labor market. Companies in almost every industry are desperate to hire people to keep up with demand. This is especially true for personnel responding to the ongoing COVID-19 pandemic.

The committee values current and former personnel dedicated to serving our community during the pandemic. We want to thank and acknowledge the personal sacrifices current and former department staff have made over the last two years, managing increasing workloads and staff turnover while addressing personal health and care of their own families. As we prioritize our community's health, we want to demonstrate respect and value for department personnel, who are entitled to the same support we envision providing to the community at large. The committee recommends funding Program #40199I to provide infrastructure to support finance, business management, human resources, and organizational development services in response to the COVID-19 pandemic.

7. **40199L ARP - Public Health Nurse Family Partnership Restoration**

Our committee acknowledges the immense need and support when expecting a child for the first time. That is why we support the Nurse Family Partnership Program (NFP) which

Members: Alysia Cox, Nathan Miley-Wills, Rhonda Combs, CJ Alicandro, Rosalie Lee, Eleanor Carrick, Jimmy Mak. **Staff:** Wendy Lear, Michael Eaves

Health Department CBAC

helps low-income, first-time pregnant people with getting the care they need to have a healthy pregnancy. Staff shortages from the COVID-19 pandemic have stretched these resources and have hampered the program's outreach efforts. We fully support this program which will provide 2.6 FTE to deliver comprehensive services and improve outcomes in BIPOC and low-income communities.

8. 40199J ARP - Public Health Community Partners and Capacity Building Expansion

Community coalitions are increasingly utilized to address complex health issues at the local level. In addition, health leaders increasingly realize that improving our nation's health cannot rest solely on the shoulders of hospitals and physicians. Instead, preventing disease and improving health in the United States requires collaboration, responsibility, and shared accountability across various sectors.

Increases in Public Health and community capacity will lead to collaborative problem solving with BIPOC communities. In addition, convening and building capacity with stakeholders will advance community priorities and strategies focused on COVID-19 recovery. The committee recommends funding Program #40199J - ARP - Public Health Community Partners and Capacity Building as this program aligns with our CBAC's values and the Health Department's long-term goals to:

- Improve health outcomes and health equity
- Assure access to affordable, high-quality medical and behavioral health care services, especially for racially and ethnically diverse and economically vulnerable populations
- Implement prevention and health promotion strategies at a policy, systems, and environmental level, focusing on leading causes of death across the life span
- Foster community partnerships, prioritizing culturally specific programs, policies, and services

9. 40199E ARP - COVID-19 Response Health Officer

COVID-19 has pulled resources and personnel from other work to address the emergent and ongoing needs of our community. In order to be strategic and prioritize supervisory oversight to the physicians in the county, this position will provide the necessary support for ongoing COVID-19 response and recovery.

10. 40199A ARP - Public Health - COVID-19 Investigation and Response

Given the unpredictability of the evolution and spread of COVID-19 in our community over the past two years, it is important to maintain the capacity to investigate and control future outbreaks. Although the investigation and response program focus will narrow in FY23 to focus on high-risk populations and settings, ongoing outreach and prevention work in congregate residential settings and workplaces included in this offer

Members: Alysia Cox, Nathan Miley-Wills, Rhonda Combs, CJ Alicandro, Rosalie Lee, Eleanor Carrick, Jimmy Mak. **Staff:** Wendy Lear, Michael Eaves

Health Department CBAC

will help control and mitigate the negative impacts of transmission for all community members.

Our One-Time offer recommendations are as follows, in priority order:

1. 40052C New Medical Examiner- Vehicle Request

With the increase of deaths in Multnomah County, the need for an additional medical examiner vehicle is necessary and pairs with our recommendation to fund an additional position in offer 40052B. Given that retrieval response time is critical to ensure accurate determinations of manners of death and with over half of deaths in Multnomah County needing examination, another vehicle would decrease overtime and increase timeliness of investigations.

2. 40107 Rockwood Health Center Capital Improvement

As the County takes ownership of the Rockwood Community Health Clinic from Care Oregon, the committee recommends the use of one-time funds to make necessary capital repairs to the facility. Although the potential investment is substantial, this program presents a unique opportunity to prioritize dedicating significant resources to a clinic that directly serves a diverse, multilingual community. Many of these residents would otherwise lack access to essential basic health care and other wraparound service support provided at RCHC. For your CBAC committee, making long-term improvements to a facility that provides essential care to nearly 4000 residents per year is an important step to address health care disparities for the populations that utilize the RCHC.

ACKNOWLEDGEMENTS

The Health Department CBAC would like to extend our sincere gratitude to department employees for their tireless work in leading community response to the COVID-19 pandemic and for all that they do to keep our community safe and healthy. The support offered by Wendy Lear and Michael Eaves in staffing our committee's work is also deeply appreciated. We're grateful for the thoughtfulness, patience and perspective they have provided.

Members: Alysia Cox, Nathan Miley-Wills, Rhonda Combs, CJ Alicandro, Rosalie Lee, Eleanor Carrick, Jimmy Mak. **Staff:** Wendy Lear, Michael Eaves