

Program # 25008B - A	Version 6/10/2005 s				
Priority:	Safety Net Services	Lead Agency:	County Human		
Program Offer Type:	Existing Operating	Program Contact:	Mary Shortall		
Related Programs:	25010A, 25015, 25019				
Frameworks:	Poverty Framework, 10-year Plan to End Homelessness				

Executive Summary

Provides twenty-four hour involuntary court-appointed guardianship and conservatorship for a total of 165 mentally incapacitated adults who cannot protect themselves. Assures food, housing and medical services when no other service works, resolves abuse and exploitation. Provides preventive and early intervention services. This offer must be accompanied by Offer 25008A. (This offer amended by the board, see significant program changes for more information).

Program Description

Program clients have complex physical and mental conditions that require intervention at all decision points, in order to deliver appropriate and effective services that case management alone cannot accomplish. This offer provides guardianship/conservatorships, intake and case stabilization for at least 15 new clients in addition to the services in Offer 25008A, keeping the program open. Supports 10-year Plan to End Homelessness and Poverty Frameworks by maintaining stable income, housing and medical care for high-risk individuals in a least restrictive, cost-effective setting. This offer also provides preventive and early intervention services through case consultation to help county staff use legal mechanisms to prevent/resolve exploitation and abuse and provide services to incapacitated adults. Uses alternate resources whenever possible to preserve limited county funds. Works with abuse investigators, police, hospitals and service providers to resolve abuse and exploitation with legal authority, preventing further victimization. Stabilizes new cases with intensive legal, fiscal and medical intervention, then maintains safe and stable housing, food, income and medical care. NOTE: Guardianship for existing clients is in Public Guardian PO 25008A. Both offers taken together maintain the program at current service levels.

Program Justification

The program impacts the cost of other County services, reducing crisis care, chronic psychiatric bed use and repetitive staff time from mental health and protective service investigators and case managers, while preventing repeat victimization for 165 very complex clients, 95 percent of whom are Medicaid eligible. Without legal authority, these are clients who would be unable to overcome abuse, exploitation, mental incapacity and long-term instability to regain needed income, medical care, food and housing within the existing service system.

Consultation service assists with prevention and early intervention in high-risk situations. The program leverages client income, recovered resources and State/federal funds for care. ADSD Public Guardian/Conservator links directly to the Poverty and 10-year Plan to End Homelessness Frameworks by assuring that clients' basic needs are met.

Performance Measures

Serve 165 impoverished County clients with twenty-four-hour guardianship and/or conservatorship decision-making to obtain and retain food, housing and medical care when no other service will work. Preventive/ early intervention: Case assistance to at least six hundred county staff, professionals or family members directly and 2,000 via the website. Intake and case stabilization: 100 percent of new clients have safe housing, food, an income source and access to medical care within 180 days of court appointment.

Summary of last year's program results and this year's expected results

During FY05, the program will have served about 160 unduplicated clients, in addition to providing direct assistance on at least 500 cases, with at least 1,500 more via the website. All new cases had food, housing, an income flow and access to medical care within six months after court appointment.

The program is operated under ORS and county ordinance, developed through Multnomah County impetus in 1974. The program was originally operated on County General Funds, but has been able to match funds with Medicaid funds in recent years, as 95 percent of clients are Medicaid eligible, freeing funds for other County programs. The budget for FY06 reflects a recent state mandate that this service return to County General Fund status due to federal policy changes. Offer 25008A represents program ramp-down to closure. Offers 25008 A and B, together, represent funding of existing program while the County pursues alternate Medicaid funding.

Program Mandate: 4 Program and Funding Level Choice

Client services are governed by ORS. The program is authorized by ORS and County Ordinance. MCR 125.905; ORD 64; 42CFR433.5 and 433.51; Part 4302(2) of State Medicaid manual; Provide Public Guardian services for indigent & people who need services;

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2005	2005	2006	2006
Personnel	\$0	\$0	\$242,034	\$0
Contracts	\$0	\$0	\$15,000	\$0
Materials & Supplies	\$0	\$0	\$3,409	\$0
Internal Services	\$0	\$0	\$41,058	\$0
Subtotal: Direct Exps:	\$0	\$0	\$301,501	\$0
Administration	\$0	\$0	\$6,308	\$11,113
Program Support	\$0	\$0	\$1,146	\$9,460
Subtotal: Other Exps:	\$0	\$0	\$7,454	\$20,573
Total GF/non-GF:	\$0	\$0	\$308,955	\$20,573
Program Total:	\$0		\$329,528	
Program FTE	0.00	0.00	3.00	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$20,573
Total Revenue:	\$0	\$0	\$0	\$20,573

Explanation of Revenues

County General Fund with limited fee collection, as most clients are impoverished.

Significant Program Changes

The program was previously matched with Medicaid, but State DHS has taken the position that it will no longer support Medicaid match effective July 1, 2005, based on new federal guidelines. Negotiations are underway to develop a new Medicaid option that earns federal matching funds. Budget Note:

The Chair's Proposed Budget did not include County General Funds for this offer; however, a Board amendment provides ITAX funding (rather than regular County General Funds) to backfill Medicaid and maintain current service level.