

<b>Priority:</b>	Accountability	<b>Lead Agency:</b>	Health Department
<b>Program Offer Type:</b>	Administration	<b>Program Contact:</b>	SARAGOZA Consuelo
<b>Related Programs:</b>			
<b>Frameworks:</b>	School Aged Policy Framework, Early Childhood Framework, Poverty Framework		

### **Executive Summary**

Community Health Programs, Partnerships, and Planning (CHP3) supports the Health Department by: 1) developing and maintaining mutually beneficial community partnerships; 2) building capacity in the Health Department and the communities we serve to address the core functions of public health; 3) supporting the practice and evaluation of evidence-based public health interventions; 4) securing grant funds; and 5) linking with program/project units in the Health Department and communities served.

### **Program Description**

CHP3 Service Area provides services and support for the Health Department through Strategic Planning, Community Health Assessment and Evaluation, Program Design and Evaluation Services, Grant Development, Community Capacitation Center Training, STARS (Students Today Aren't Ready for Sex), Health Promotion Initiatives, Community Health Council, HIV Planning Council, Chronic Disease Prevention and Coalition of Community Health Clinics. CHP3 creates and maintains community partnerships through health collaboration efforts which support health disparities reduction and provides management oversight for the service area. These services provide linkages that create collaborative partnerships within County and community systems. Programs and materials are designed to provide best practices and timely health information to HD staff, communities, agencies and policy makers. Community collaboration through grant development, project/program partnerships, and community identification of health disparities supports the expansion of community health leadership, wellness, and sustainability.

### **Program Justification**

CHP3 strongly links to all Accountability strategies by providing: 1) Strategic external and internal partnerships: "Increase the community's understanding and involvement in the County's programs and decision-making". Includes ongoing Health education and a strong community partnership in policy and decision making with citizens including the citizen/client Community Health Council. 2) Oversight and integration of direct services and support functions: "Manage assets and service delivery costs effectively". Administration uses integration and collaboration to eliminate duplication of effort and increase efficiency, maximize use of assets, and promote innovative models such as Advanced Access that maintain service quality and reduce costs. 3) Workforce development and human resource management that supports a diverse and qualified workforce: "Strengthen County workforce competencies and the environment needed to achieve quality results". Includes support of a cross-functional Diversity & Quality Team, professional and workforce development programs, safety committees and management/leadership competencies. 4) Investment in innovative and best practice models for internal processes for efficient support of services to clients: "Evaluate and streamline compliance efforts and internal processes." 5) Leadership and direction for public health issues: "Provide reliable information for decision making, improving results and reporting results." This includes work to monitor and report on community health assessments, indicators and health disparities.

### **Performance Measures**

Performance measures are listed by individual CHP3 units. Examples include: Number of successful grant applications and awards; number of completed internal and external data requests; community health workers and community members participating in training; community members and clients participating in health promotion programs, coalitions and community events; number of students receiving sexuality education annually.

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

Programs under this Director provided 5 hours of sexuality education for 9,082 students last year and expect to serve over 10,000 in the 05/06 school year; Citizen and Community Involvement effectively met their mandated grant and contractual responsibilities; produced 39 grants with a success rate of 72%; Health Assessment and Evaluation completed 13 reports and 13 papers submitted for publication; conducted community assessments on environmental health in NE Portland, food access in Lents, and second-hand smoke in bars.

**Program Mandate: 4 Program and Funding Level Choice**

N/A

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2005	2005	2006	2006
<b>Program Expenses</b>				
Personnel	\$475,147	\$0	\$235,713	\$0
Contracts	\$0	\$5,125	\$5,250	\$0
Materials & Supplies	\$20,593	-\$5,125	\$10,490	\$0
Internal Services	\$29,242	\$0	\$49,840	\$0
Capital Outlay	\$0	\$0	\$0	\$0
<b>Subtotal: Direct Exps:</b>	<b>\$524,982</b>	<b>\$0</b>	<b>\$301,293</b>	<b>\$0</b>
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
<b>Subtotal: Other Exps:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Total GF/non-GF:</b>	<b>\$524,982</b>	<b>\$0</b>	<b>\$301,293</b>	<b>\$0</b>
<b>Program Total:</b>	<b>\$524,982</b>		<b>\$301,293</b>	
Program FTE	0.00	0.00	2.50	0.00
<b>Program Revenues</b>				
Program Revenue for Admin	\$0	\$0	\$0	\$0
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Explanation of Revenues**

N/A

**Significant Program Changes**

The Director's Office for Community Health Promotion, Partnerships, and Planning will be reduced by 2.0 FTE, as staff are reassigned to Health Promotion activities. This will result in a reduction in the size of the Director's Office, but not a decreased capacity for Departmental public health support.