

## Program # 40031 - Integrated Clinical Services

Version 2/01/2005 s

Priority:AccountabilityLead Agency:Health DepartmentProgram Offer Type:AdministrationProgram Contact:ABDELLATIF Vanetta

**Related Programs:** 

Frameworks: School Aged Policy Framework, Early Childhood Framework, Poverty Framework

## **Executive Summary**

Integrated Clinical Services (ICS) Administration provides leadership and management for strategic, fiscal and operational performance of high quality clinical services that are culturally appropriate.

#### **Program Description**

ICS is responsible for 1) developing and maintaining strategic external (hospital systems, health insurance systems, State, and community) and internal partnerships; 2) providing leadership for the efficient and cost-effective performance of a complex integrated clinical delivery system; and 3)working with community, state and federal agencies to ensure access to high quality clinical care services. Each clinical service requires oversight unique to that service's clinical discipline.

#### **Program Justification**

ICS 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 creates the environment needed to achieve quality results." Includes support of 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 the delivery of medical, dental, and behavioral care services to vulnerable populations: "Provide reliable information for decision making, improving results and reporting results."

Develops linkages with various state, federal and private organizations. Provides leadership and direction for the largest clinical delivery system for poor and vulnerable people in Oregon, which includes the following services: Corrections Health Clinical, Primary Care, Dental, Case Assessment; Women, Infants & Children's Program (WIC), language interpretation, and Information Infrastructure Services.

#### **Performance Measures**

Maintain fiscal, quality, and operational accountability for all service lines. Move entire service group toward a highly integrated client focused delivery model.

Exceptional performance and adherance to standards and guidelines set by the following organizations: BPHC Grant, Ryan White Grants, Joint Commission on Accreditation of Healthcare Organizations (JCAHO,) National Commission on Correctional Health Care (NCCHC) accreditation. Leader in the delivery of culturally competent Care.

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

Through leadership, secured first-ever private donation of \$1 million dollars from Kaiser Permanente. Successful Accreditation Surveys in Primary Care and Corrections Health Services. Redesigned clinical delivery model in response to changing fiscal environment, while minimizing reductions of medical services for poor and vulnerable clients.

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

None for Director.

# Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2005	2005	2006	2006
Personnel	\$427,523	\$305,773	\$293,638	\$0
Contracts	\$0	\$177,000	\$0	\$0
Materials & Supplies	\$162,444	-\$67,969	\$69,918	\$0
Internal Services	\$56,336	\$40,293	\$135,198	\$0
Capital Outlay	\$0	\$0	\$0	\$0
Subtotal: Direct Exps:	\$646,303	\$455,097	\$498,754	\$0
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$646,303	\$455,097	\$498,754	\$0
Program Total:	\$1,101,400		\$498,754	
Program FTE	0.00	0.00	3.60	0.00
Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$0
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

# **Explanation of Revenues**

# Significant Program Changes

None expected. FTE will be reduced in the Director's Office as staff are redeployed to clinical support duties.