

Program # 40034B - 0	Version 2/11/2005 s		
Priority:	Safety Net Services	Lead Agency:	Health Department
Program Offer Type:	Existing Operating	Program Contact:	BURROW Gayle F
<b>Related Programs:</b>	60021G, 60021H, 60021I, 60021J		
Frameworks:	Poverty Framework		

## **Executive Summary**

Corrections Health provides legally mandated access to care that addresses the urgent needs of incarcerated clients, including physical and behavioral health care at the Multnomah County Detention Center (MCDC).

This offer combined with offer A represents the current service level at this facility. This staffing level will serve another 330 beds on two floors at MCDC. This correlates to the Sheriff's Office Offers G through J for 422 to 702 beds. The current bed capacity is roughly 550. This offer combined with offer A is current service level and could serve up to 702 beds without additional costs.

The program serves many of the community's most vulnerable citizens—the medically indigent and chronically mentally ill. Program educates, prevents and/or intervenes to keep inmates from experiencing health crises while in custody.

#### **Program Description**

Program provides legally mandated access to basic level of medical, behavioral, and dental care with the ability to respond to emergencies that may occur during a 24 hour period. Includes: 1) Health screening and assessment at booking to identify health problems that require immediate attention. 2) Development of basic level of care plan to address and stabilize critical physical and/or behavioral health problems (e.g. communicable diseases [e.g. TB], substance withdrawal, chronic diseases and critical conditions) to prevent inmates from experiencing health crisis while in custody. 3) Provision of behavioral health care including evaluation, counseling, education, medication management, and planning so that inmates are stabilized both while in custody and upon release. Partnerships with Sheriff's Office, County Human Services, Health Department Field Team, HIV Prevention, and Community Justice that aid in addressing coexisting medical, psychiatric, behavioral, and criminal issues and allow more effective use of limited resources.

## **Program Justification**

Program serves the county's most vulnerable citizens, the medically indigent and chronically mentally ill, providing coordinated physical and behavioral health care. Program provides legally mandated access to care that addresses the urgent needs of incarcerated clients, including physical and behavioral health care. Additionally, program educates, prevents and/or intervenes to keep inmates from experiencing health crises while in custody.

#### Performance Measures

100% of inmates booked into County Jail system are evaluated by a registered nurse (RN) and a plan of care is developed as appropriate.

93% of newly incarcerated (within 14 days) have a completed medical history and physical exam completed by RN.

95% of pregnant female inmates are followed by a medical provider and received appropriate prenatal care while in custody.

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

FY 04 Performance: 98% of inmates booked into County Jail system were evaluated by a registered nurse (RN) and a plan of care is developed as appropriate; 90% of newly incarcerated (within 14 days) had a medical history and physical exam completed by RN; 93% of pregnant female inmates were followed by a medical provider and received appropriate prenatal care while in custody. Volume: approximately 62,000 client visits (includes nursing, physician and nurse practitioners). No changes anticipated for FY 05.

# Program Mandate: 2 Mandated Program with Funding/Service Level Choice

The right to health care in jail is legally mandated under Federal and State law. When an individual is arrested and incarcerated, the obligation for health care falls upon the government as a matter of constitutional law, enforceable under the U.S. Constitution's 8th Amendment and the 14th Amendment's due process clause. Failure to provide health care amounts to deliberate indifference to serious medical needs. State laws (ORS 169.076) further delineate standards for local correctional facilities.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2005	2005	2006	2006
Personnel	\$0	\$0	\$1,826,796	\$0
Contracts	\$0	\$0	\$258,280	\$0
Materials & Supplies	\$0	\$0	\$161,744	\$0
Internal Services	\$0	\$0	\$158,824	\$0
Capital Outlay	\$0	\$0	\$0	\$0
Subtotal: Direct Exps:	\$0	\$0	\$2,405,644	\$0
Administration	\$0	\$0	\$39,681	\$0
Program Support	\$0	\$0	\$180,889	\$0
Subtotal: Other Exps:	\$0	\$0	\$220,570	\$0
Total GF/non-GF:	\$0	\$0	\$2,626,214	\$0
Program Total:	\$0		\$2,626,214	
Program FTE	0.00	0.00	18.70	0.00
Program Revenues				
Fees, Permits & Charges	\$0	\$0	\$35,200	\$0
Other / Miscellaneous	\$0	\$0	\$6,600	\$0
Program Revenue for Admin	\$0	\$0	\$97,626	\$9,418
Total Revenue:	\$0	\$0	\$139,426	\$9,418

## Explanation of Revenues

Inmate fee for service revenue represents charges for medical visits, prescriptions, etc. Miscellaneous revenue has been budgeted for copies of medical records, etc. Revenues are expected to remain unchanged through 2006.

# Significant Program Changes

Scope and level of services are expected to remain unchanged. Additional 2.8 FTE nursing staff are being added in FY05 and continuing into FY06, to meet the demands of an increase in contagious skin infections, methamphetamine abuse in the community, and an increase in the numbers of seriously mentally ill inmates, all of which make greater demands on Medical resources in the Jails.