

**Program # 40060A - ALT: Primary Care East County Health Clinic (1 team) Version 7/05/2006 s**

**Priority:** Basic Needs **Lead Agency:** Health Department  
**Program Offer Type:** Program Alternative / **Program Contact:** ABDELLATIF Vanetta M  
**Related Programs:** 40057A, 40062A, 40063A, 40064A, 40066A

**Program Characteristics:**

**Executive Summary**

East County Health Center (EHC) and Eastside Teen clinics (TC) are located in Gresham, at the East terminal of the MAX line. The Gresham community is growing in both population and poverty as affordable housing becomes scarcer in the Western parts of the County. This community consists of a diverse population and many are below the federal poverty guidelines (FPL). EHC provides access to care that links physical/behavioral health & social services for the poor, uninsured & homeless populations to culturally competent comprehensive primary health care. EHC expanded providers/services once relocated to new location in 2001. East County currently has 8 provider teams providing 33,390 visits in FY2007. This offer will support one provider team.

**Program Description**

Multnomah County's Primary Care services provide culturally competent comprehensive primary & preventative health services in compliance with the bureau of Primary Health Care regulations (our largest single funder) & JCAHO (a healthcare accrediting organization.) Each clinic's client mix and required mix of comprehensive services is necessary to retain accreditation & compliance with regulatory agencies & funding sources. Clinics are strategically placed within communities that have very large numbers of poor citizens. Clinic offers are packaged with these requirements in mind. 46.7% of the patients served at EHC/TC are below 100% of the FPL (general community FPL is 16.6%), and 91.4% are 200% below the FPL (general community FPL is 29.6%) We have added expanded evening hours and earlier morning hours to accommodate patient needs. In 2005, 50% of EHC's visits were interpreted visits and of those 89% were for Spanish language. Recent data on health disparities indicates that access to care is a growing challenge for uninsured Oregonians, in general and the Hispanic community in particular; 50% of EHC/TC clients are Latino. Services delivered focus on prevention and treatment of chronic diseases (e.g. Diabetes, Obesity, High Blood pressure, etc.) as well as medical care for women and kids.  
 1 Team Summary: Total Visits-3,799 Cost per Visit-\$859 Other Rev per Visit-\$234 CGF Rev per Visit-\$625

**Program Justification**

EHC/TC is a vital safety net for both individuals and families in East Multnomah County. EHC/TC is the only health care option for the growing number of uninsured and OHP in our East County community. The nearest Multnomah County clinic is a 1 hour bus ride away. Residents with Oregon Health Plan coverage find that many physicians' offices will not treat them, choosing instead to serve only those with private insurance coverage. The East County community is more medically underserved than other areas of the county. Additionally there are no school based health centers in the Gresham-Barlow school district that would provide adolescent health care that the TC currently provides.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY04-05)	Current Year Purchased (FY05-06)	Current Year Estimate (FY05-06)	Next Year Offer (FY06-07)
Output	Number of annual client visits	25,730	29,490	28,450	3,799
Outcome	80% of Diabetics receive community standard of care	70%	60%	75%	80%
Efficiency	Fewer days to next appointment	5	3	4	4
Quality	% of Patients very satisfied	64%	65%	65%	64%

**Performance Measure - Description**

Diabetes is a health disparity for poor, uninsured and minorities. Community standard is 2 Hemoglobin blood tests 2 x in 12 mnths. Community standard for patient satisfaction is 65% very satisfied.

## Legal/Contractual Obligation

ECHC complies with the Bureau of Primary Health Care (BPHC) Grant, State Family Planning Agency Grant, JCAHO accreditation requirements, CLIA (laboratory accreditation) requirements and CareOregon contractual obligations.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2006	2006	2007	2007
<b>Program Expenses</b>				
Personnel	\$0	\$0	\$64,533	\$1,063,352
Contracts	\$0	\$0	\$2,639	\$43,490
Materials & Supplies	\$0	\$0	\$3,636	\$59,920
Internal Services	\$0	\$0	\$22,475	\$370,349
Subtotal: Direct Exps:	<b>\$0</b>	<b>\$0</b>	<b>\$93,283</b>	<b>\$1,537,111</b>
Administration	\$0	\$0	\$52,736	\$0
Program Support	\$0	\$0	\$949,649	\$632,351
Subtotal: Other Exps:	<b>\$0</b>	<b>\$0</b>	<b>\$1,002,385</b>	<b>\$632,351</b>
Total GF/non-GF:	<b>\$0</b>	<b>\$0</b>	<b>\$1,095,668</b>	<b>\$2,169,462</b>
Program Total:	<b>\$0</b>		<b>\$3,265,130</b>	
Program FTE	0.00	0.00	0.73	11.84
<b>Program Revenues</b>				
Indirect for dep't Admin	\$0	\$0	\$64,444	\$0
Fees, Permits & Charges	\$0	\$0	\$0	\$255,235
Program Revenue for Admin	\$0	\$0	\$0	\$632,351
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$64,444</b>	<b>\$887,586</b>

## Explanation of Revenues

## Significant Program Changes

### Last year this program was:

Rockwood Neighborhood Clinic will integrate into the ECHC during this budget cycle. Clients from Rockwood, with chronic conditions will have their care transferred to ECHC. This is an opportunity to provide comprehensive primary care services to those clients.