

Priority: Basic Needs

Lead Agency: Health Department

Program Offer Type: Existing Operating

Program Contact: COCKRELL Deborah S

Related Programs:

Program Characteristics:

Executive Summary

Mid-County Health Center (MCHC) is the highest volume primary care clinic and serves clients in the poorest and most culturally diverse area of Multnomah County. MCHC provides vital health services for patients who, even if insured, would remain isolated from traditional forms of medical care because of where they live, the language they speak and their higher level of complex healthcare needs. With its Refugee Program and culturally competent staff, MCHC is an important health care safety net for thousands of uninsured members of the community.

Program Description

MCHC provides culturally competent, comprehensive primary care, preventive health and enabling services such as transportation, translation, case management and health education which address the needs of the whole person. Care that addresses their beliefs and culture is more likely to succeed in improving and maintaining their health. MCHC is tightly linked with refugee resettlement agencies (i.e., SOAR, IRCO, Catholic Charities). In 2006, 963 refugees were screened; of these 55% received on-going medical care. Mid-County has the highest proportion of non-English speaking residents. About 80% of all clients are or were refugees (Russia, Somalia, Sudan, Latin America, Vietnam, etc.). More than 80% of the MCHC staff speak another language, many were refugees themselves. 68% of clients have incomes at or below 100% of FPL, while 99.1% are at or below 200% of FPL.

Program Justification

MCHC services are designed specifically to prevent people from needing more costly and often less appropriate care. The refugee population often receive no preventative care at home, leading to a disproportionately high rate of serious medical conditions (ie. diabetes, hypertension, heart disease, cancer). Most client families have 3+ children; some 10 or 11 - often with serious health problems (ie. asthma, diabetes, poor nutrition, no dental care, post-traumatic stress, etc.) which impact their schooling and development. This program helps them with pediatric and pre-natal services as well as referrals. These children often haven't been immunized for polio, tetanus, measles, TB etc. except for the bare minimum needed to enter this country. Many children receive their 1st complete vaccines at MCHC.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY06-07)	Current Year Purchased (FY07-08)	Current Year Estimate (FY07-08)	Next Year Offer (FY08-09)
Output	Number of annual client visits	31,700	32,288	33,500	34,260
Outcome	Percentage of children who are up to date on immunizations at 35 months of age	70.0%	85.0%	70.0%	85.0%
Efficiency	Number of days for a new patient appointment	8	8	7	6
Efficiency	% of patients who would "strongly agree" to recommend clinic to friends/family	67.0%	70.0%	61.0%	70.0%

Performance Measure - Description

Output: Total number of client visits

Outcome: Percentage of children who are immunized by 35 months: Immunizations are vitally important in preventing infectious diseases, many of which can occur in the first year of life.

Efficiency: Number of days for new patient appointment: Measures effectiveness of timely availability for underserved Multnomah County residents to access health care services.

Quality: Client satisfaction survey question which asks how likely they would be to recommend clinic to friends/family. Changes in measures from last year due to: identified better measure for access to care (previously measured 2nd available appointment) and renewed focus on achieving CDC recommendation for immunization rates (90%) of children at age 35 months.

Legal/Contractual Obligation

MCHC complies with the Bureau of Primary Health Care (BPHC) grant, state Family Planning agency grant, Joint Commission Accreditation requirements, CLIA (Laboratory accreditation) requirements and CareOregon contractual obligations.

Federally Qualified Health Center (FQHC) designation requires:

- Provision of comprehensive primary care and supportive care services.
- Services be available to all regardless of ability to pay.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2008	2008	2009	2009
Program Expenses				
Personnel	\$0	\$5,420,139	\$68,773	\$5,397,207
Contracts	\$0	\$405,426	\$0	\$205,661
Materials & Supplies	\$0	\$303,032	\$0	\$290,057
Internal Services	\$173,426	\$1,441,994	\$0	\$1,624,209
Capital Outlay	\$0	\$25,004	\$0	\$0
Subtotal: Direct Exps:	\$173,426	\$7,595,595	\$68,773	\$7,517,134
Administration	\$128,493	\$0	\$110,625	\$0
Program Support	\$1,897,445	\$1,567,313	\$2,217,329	\$1,576,895
Subtotal: Other Exps:	\$2,025,938	\$1,567,313	\$2,327,954	\$1,576,895
Total GF/non-GF:	\$2,199,364	\$9,162,908	\$2,396,727	\$9,094,029
Program Total:	\$11,362,272		\$11,490,756	
Program FTE	1.31	56.24	0.00	56.80
Program Revenues				
Indirect for dep't Admin	\$453,324	\$0	\$437,001	\$0
Fees, Permits & Charges	\$0	\$0	\$0	\$183,220
Intergovernmental	\$0	\$7,704,828	\$0	\$7,307,914
Other / Miscellaneous	\$0	\$0	\$0	\$26,000
Program Revenue for Admin	\$0	\$1,567,313	\$0	\$1,576,895
Total Revenue:	\$453,324	\$9,272,141	\$437,001	\$9,094,029

Explanation of Revenues

Supported by Federal BPHC, Family Planning, state and local grants as well as enhanced Medicaid/Medicare revenue. County General fund is used as local in-kind to obtain and keep Primary Care and Family Planning grants.

Significant Program Changes

Last year this program was:
#40022 Mid County Health Clinic