

Priority: Basic Needs

Lead Agency: Health Department

Program Offer Type: Existing Operating

Program Contact: NICHOLS Loreen

Related Programs:

Program Characteristics:

Executive Summary

The HIV Health Services Clinic (HHSC) and HIV Care Services Program (HCS) provide community-based primary care and support services to highly vulnerable populations living with HIV. Services fill vital gaps in care resulting in lower mortality (86% drop in 10 yrs), fewer disease complications and disparities, and reduced transmission.

Program Description

HIV care programs are consolidated into one offer this year. Services target low income, uninsured, mentally ill, substance abusing, and other special needs populations. The HHSC provides comprehensive primary medical care for over 850 clients. Services address complex treatment needs from early diagnosis to advanced illness. On-site pharmacy services support compliance with treatment. Intensive medical protocols for pregnant clients prevent mother-to-child transmission. The HHSC integrates prevention into all services to reduce client risk of HIV transmission. HCS coordinates a regional care system that promotes access to high quality HIV services. Through contracts with health departments and community organizations, services include: **EARLY INTERVENTION:** Outreach ensures early identification and treatment. **CARE:** A coordinated primary care system provides medical, dental, mental health and substance abuse treatment. **SERVICE COORDINATION:** Case management connects clients with health insurance, housing, and other services critical to staying in care. **BASIC NEEDS:** Housing focuses on building life skills and access to permanent housing. **HEALTH PROMOTION:** Behavioral education provides clients with self-management skills. **PLANNING:** A community-based Council does service planning.

Program Justification

Local AIDS prevalence increased 22% from 2001 to 2006, fueling a continuing public health problem. Over 4,000 people with HIV live in the service area; 56% have a mental illness and 36% have substance abuse problems. This system serves the most vulnerable clients: 73% are <100% FPL, 28% are minorities, 24% lack permanent housing, and 13% lack health insurance. This offer supports Basic Living Needs strategies by providing a strong continuum of HIV care. A network of community organizations work together to meet overall client needs. Funding awarded to these organizations leverage additional resources from other social service and medical systems. Regular HIV medical care, linked with case management and support services, prevent costly health crises and hospitalization. Addiction treatment, mental health therapy, and prevention counseling address behavior change. Health promotion enables clients to better control their disease and reduce transmission risk. A well-established quality management program shows measurable results. Due to health care and medication access, HIV mortality has dropped 86% from 1994 to 2004 in Multnomah County. Programs for racial/ethnic minorities and women have resulted in no disparities in access for these populations.

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	# of unduplicated HCS clients served	2,469	2,200	2,320	2,200
Outcome	% of uninsured HCS clients who gained insurance	65.0%	70.0%	67.0%	70.0%
Output	# of HHSC client visits	8,598	6,693	7,000	7,088
Quality	% of medical clients who do not progress to AIDS*	93.5%	93.0%	93.0%	93.0%

Performance Measure - Description

*The goal of HIV care is to restore immune function. AIDS is the advanced stage of HIV disease.

Legal/Contractual Obligation

Federal HIV grant and contract funds are restricted. Title I grant requires: 1) Serving Clackamas, Columbia, Multnomah, Washington, Yamhill & Clark Counties; 2) Community-based Planning Council; 3) 10% expenditure cap on planning & administration, which requires the County to cover some indirect costs; and 4) Maintenance of effort where the County must spend local funds for HIV services at least at the level spent in the previous year.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2008	2008	2009	2009
Program Expenses				
Personnel	\$537,392	\$1,252,506	\$421,028	\$2,221,844
Contracts	\$100,305	\$158,503	\$137,006	\$2,588,212
Materials & Supplies	\$37,650	\$108,594	\$14,197	\$127,191
Internal Services	\$151,447	\$367,833	\$61,827	\$647,211
Subtotal: Direct Exps:	\$826,794	\$1,887,436	\$634,058	\$5,584,458
Administration	\$102,994	\$0	\$87,038	\$0
Program Support	\$716,163	\$277,566	\$719,823	\$302,838
Subtotal: Other Exps:	\$819,157	\$277,566	\$806,861	\$302,838
Total GF/non-GF:	\$1,645,951	\$2,165,002	\$1,440,919	\$5,887,296
Program Total:	\$3,810,953		\$7,328,215	
Program FTE	3.59	22.89	4.54	20.11
Program Revenues				
Indirect for dep't Admin	\$117,630	\$0	\$180,435	\$0
Fees, Permits & Charges	\$0	\$290,568	\$0	\$555,232
Intergovernmental	\$0	\$1,596,868	\$0	\$5,029,225
Program Revenue for Admin	\$0	\$277,566	\$0	\$302,838
Total Revenue:	\$117,630	\$2,165,002	\$180,435	\$5,887,295

Explanation of Revenues

HCS receives flat funding from federal Ryan White Care Act (RWCA) Title I grant. HHSC receives flat-funded contracts and grants: RWCA Title I contract awarded by HCS; federal RWCA Title III grant; AIDS Education and Training Center contract; and OHSU Project Dental Health contract. County general fund is used to leverage grant funding.

Significant Program Changes

✔ Significantly Changed

Last year this program was:

#40012 Services for Persons Living with HIV

HCS: Grant funding decreased by \$244,736 resulting in .6 FTE cut and reductions in primary care and support services delivered by community-based contractors. 1.0 FTE Disease Intervention Specialist/funding moved to Program offer 40011.

HHSC: \$114,000 reduction in general fund request.