

Priority: Accountability

Lead Agency: Health Department

Program Offer Type: Support

Program Contact: LEE Kate

Related Programs:

Program Characteristics:

Executive Summary

The Community Health Council (CHC) is a mandated community-based planning body that facilitates community involvement in quality assurance, public policy advocacy, and management accountability for the Health Department. CHC provides oversight of community health center services which include primary care, dental, early childhood services, nursing, pharmacy and radiology. The Council is comprised of a minimum 51% consumer – majority membership to ensure that health center users have a voice in the decision making process. The Coalition of Community Health Clinics (CCHC) 13 member clinics are community based clinics play an instrumental role in serving individuals who are under or uninsured in Multnomah County. The Health Department's indemnification program screens volunteer health care professionals for CCHC.

Program Description

The CHC offers an entry point for residents to give input about how the County can better meet the health needs of the community. The CHC plays a critical role in assuring access to health care for our most vulnerable residents; it serves as the governing board required by the federal Bureau of Primary Health Care to provide oversight of policies and programs within the scope of the Primary Care Grant. The Coalition of Community Health Clinics (CCHC) 13 member clinics are community based clinics uniquely able to respond to changing demographics and offer culturally appropriate care while fulfilling their mission of improving and providing health care to the County's most vulnerable populations. The Coalition clinics provide free or low cost health care to uninsured people.

Program Justification

The Council plays a critical role in assuring access to health care for our most vulnerable residents and by serving as the governing board required by the Federal Bureau of Primary Health Care to provide oversight of policies and programs within the scope of the Primary Care Grant. At minimum, 51% of Council Members are county residents who use the Health Department's clinical services. Participation on the Council allows them to better understand and influence how the County system works. Through effective partnerships, the County has leveraged millions of dollars of local, state, and federal revenue, increasing access to services for vulnerable populations through funding of the Community Health Council. County funding of the Coalition of Community Health Clinics' infrastructure fuels the engine that leverages community health resources: \$308,905 estimated in 2008. The Health Department's indemnification program for volunteer health care professionals leveraged 15,062 total volunteer hours with an estimate dollar value of \$541,715 in 2007 – 2008. The County's support of coalition infrastructure and the Health Department's indemnification program assures access to critical health care for many County residents lacking the financial resources. These clinics primarily see uninsured patients and are dispersed geographically throughout Multnomah County. The CHC and the CCHC contribute to outcomes in the poverty framework by leveraging citizen and community engagement in health care advocacy, decision making and provision of services for our most vulnerable populations.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Number of volunteer hours	21,800	22,835	16,000	16,500
Outcome	Percentage of consumers involved	55.0%	60.0%	60.0%	63.0%
Outcome	Number of uninsured patients seen	119,500	110,000	119,233	119,500
Output	Number of meetings held	36	36	36	36

Performance Measure - Description

Number of volunteer hours includes volunteer hours at the 13 Coalition Clinics for licensed health care professionals that utilize the indemnification program as well as Community Health Council participation at meetings and community events. Percentage of consumers involved includes patient advisory boards represented through the CCHC and consumers represented on the CHC. Number of uninsured patients seen include Health Department estimate of 23,654 at the health centers and 95,579 visits of uninsured patients through the CCHC. Number of meetings held includes participation on patient advisory boards for Coalition clinics, CHC executive committee meetings and monthly CHC meetings.

Legal/Contractual Obligation

The CHC is federally mandated by the Bureau of Primary Health Care. The CHC's role as the Citizen Budget Advisory Committee is mandated by County Charter.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2009	2009	2010	2010
Personnel	\$104,549	\$0	\$112,248	\$0
Contracts	\$117,407	\$0	\$106,060	\$0
Materials & Supplies	\$8,663	\$0	\$10,508	\$0
Internal Services	\$11,929	\$0	\$12,519	\$0
Subtotal: Direct Exps:	\$242,548	\$0	\$241,335	\$0
Administration	\$3,507	\$0	\$4,055	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$3,507	\$0	\$4,055	\$0
Total GF/non-GF:	\$246,055	\$0	\$245,390	\$0
Program Total:	\$246,055		\$245,390	
Program FTE	1.30	0.00	1.30	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last year this program was: #40036, Citizen and Community Involvement and Governance

The reason why the volunteer hours have decreased is because the Coalition of Community Health Clinics (the program that a vast majority of the volunteer hours come from) calculated the amount of volunteer hours differently this year. CCHC pulled out non-licensed medical and clinics who utilize volunteers but not MCHD. Based on this updated information, the Health Department's indemnification program for volunteer health care professionals leveraged 15,062 total volunteer hours with an estimate dollar value of \$541,714.31 in 2007 – 2008. The remaining amount comes from the volunteer service of Community Health Council members. In previous years, CCHC included ALL volunteer positions (administrative, non-licensed, etc) which inflated the numbers. They decided to revise how they calculate their volunteer hours to better reflect how use of the indemnification program directly impacts/supports the County with volunteer licensed health care professionals. If anything, their volunteer hours for licensed health care professional increased last year if the "other" group is teased out.