

Lead Agency: Health Department

Program Contact: THIELE Margaret

Program Offer Type: Existing Operating

Related Programs:

Program Characteristics:

Executive Summary

The North Portland Health Center provides comprehensive, culturally appropriate primary care and enabling services to vulnerable citizens who are uninsured or underinsured and otherwise might not have access to healthcare.

Program Description

North Portland Health Center primary care services are designed to be a patient centered medical home. This includes reducing barriers to access, integration of behavioral health services, providing continuity and coordination of services and collaboration with community partners. Culturally competent primary care services are provided which include, treatment of acute and chronic illnesses, behavioral health, family planning, prenatal and preventive services (well child, immunizations). Ancillary support services are operationally integrated and include pharmacy and lab. Enabling services include Medicaid eligibility screening, medical interpretation, transportation, case management and health education. North Portland Health Center serves a population of 70% who are below 100% of the Federal Poverty level, 25% are uninsured, 65% are Medicaid and 7% are Medicare. North Portland Health Center plays a significant role in providing safety net medical services to residents in the community.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Number of annual client visits	0	18,673	18,673	18,593
Outcome	% of children who are up to date on immunizations at 35 months of age	0.0%	90.0%	57.5%	90.0%
Efficiency	Number of days for a new patient appointment	0	7	7	7
Quality	% of Patients who would "strongly agree" to recommend clinic to friends/family	0.0%	80.0%	58.0%	80.0%

Performance Measure - Description

Output: Total number of client visits

Outcome: % 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: # 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 if they would recommend this clinic to family/friends. Performance Measures Variance Explanation: # of children who are up to date on immunizations--current improvement efforts across Primary Care clinics is underway to improve rate of immunization % of Patients who would strongly agree--clinic focus group formed to address specific identified issues.

Legal/Contractual Obligation

North Portland Health Clinic complies with the Bureau of Primary Health Care grant, JCAHO accreditations requirements and CareOregon contractual obligations.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2010	2010	2011	2011
Personnel	\$0	\$2,753,515	\$0	\$2,875,177
Contracts	\$0	\$122,395	\$0	\$109,611
Materials & Supplies	\$0	\$135,040	\$0	\$141,060
Internal Services	\$238,063	\$1,077,118	\$204,138	\$906,159
Total GF/non-GF:	\$238,063	\$4,088,068	\$204,138	\$4,032,007
Program Total:	\$4,326,131		\$4,236,145	
Program FTE	0.00	27.15	0.00	27.60
Program Revenues				
Indirect for dep't Admin	\$249,767	\$0	\$240,004	\$0
Fees, Permits & Charges	\$0	\$144,408	\$4,000	\$124,244
Intergovernmental	\$0	\$3,975,573	\$0	\$3,907,763
Total Revenue:	\$249,767	\$4,119,981	\$244,004	\$4,032,007

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 and to serve uninsured patients.

Significant Program Changes

Last year this program was: #40019, North Portland Health Clinic

The performance measures improvements we anticipate are from target outreach in the community, increased productivity and greater attention to patient satisfaction. We do not anticipate an increased wait for most clients as we plan to have more available appointments in each day's schedule. Nor should we see a decline in the quality of services (or poor health outcomes). The budgets focused on maintaining as many services as possible. Our goal is to do this by lowering our per unit costs, by increasing both productivity and the number of people who are covered by Medicaid.