

Program # 40037 - Community Environmental Health

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Lead Agency: Health Department Program Contact: WICKHAM Lila A

Program Offer Type: Support

Related Programs:

Program Characteristics:

Executive Summary

Supports community environmental health programs that reduce health disparities exacerbated by negative and disparate exposure to environmental, social and economic factors. Programs improve health equity by addressing issues related to environmental health and housing conditions. Strategies include assessment, education/outreach, intervention, information/referral, policy development, community organizing, and capacity building. Program focus areas include asthma intervention, housing code enforcement, household mold, household toxins, vectors and lead paint; environmental pollutants and toxins; and reducing the environmental and health impacts of global climate change and the built environment.

Program Description

The program addresses a root cause of health disparities by improving the home environment. These efforts bridge gaps identified by the community as under-resourced public health issues related to affordable housing. The program is focused on Healthy Home principles and policy development around improving quality of housing and environmentally related health concerns. Multnomah County has one of the highest emergency department utilization rates for asthma in Oregon. The Healthy Homes asthma intervention has been shown to improve asthma control by working with vulnerable children with asthma to improve their quality of life which results in lowered economic burden by averting emergency room visits and hospitalization. Healthy Home Priorities: 1) Provide home based environmental and medical assessment & intervention for high risk asthmatic children; 2) Provide consultation with medical providers; 3) Build capacity for community programs to decrease health disparities associated with health and housing; 4) Create partnerships between landlords and tenants; 5) Collaborate with the Health Equity Initiative to ensure coordinated approach; 6) Address substandard housing complaints in unincorporated area and provide environmental assessments for asthmatic children via the AIR program. Environmental Education Priorities: 1) Conduct community-based training and outreach related to mold, indoor air quality and toxins; 2) Integrate environmental health risk reduction with other MCHD initiatives; and 3) Support core environmental health education and outreach related to Healthy Homes, West Nile Virus, Foodborne Illness, and other emerging health issues like climate change and the built environment. Leveraging Resources Priorities: 1) Ensure successful use of existing grant resources; 2) Apply for grants to expand service; 3) Use Targeted Case Management billing codes to acquire reimbursement for services; 4) Provide leadership and infrastructure support for the Healthy Homes Community Coalition and build capacity of community-based organizations working on environmental health and healthy homes initiatives.

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 educational interventions provided	98	92	110	120
Outcome	Emergency Dept & hospitalization costs averted	0	130,925	139,696	149,056
Outcome	Additional grant dollars leveraged	642,000	634,000	587,666	444,773
Output	# of families receiving an inspection based on medical provider referral	0	90	90	180

Performance Measure - Description

Measure Changed

Output: Reflects interventions provided to community that increase individual positive health behaviors and support improvements in environmental health, environmental justice and health equity. Excludes interventions in client care. Outcome: These savings are estimated from client related-data obtained from Care Oregon emergency room and hospitalization data and costs averted. This does not include physician costs or societal data such as lost work or school days averted. The costs of both are likely to be substantial but difficult to obtain.

Outcome: Measures include the total sum of dollars leveraged in grants by MCEH. This amount does not include the increased community capacity by MCEH providing technical assistance to community environmental health partners to leverage grant funded resources. Community resource acquisition includes \$105,000 awarded to Josiah Hill Clinic, where MCHD took the lead role in developing the grant. MCHD is a sub-grantee on this award. MCEH submitted two additional grant applications with award notices to be announced in February 2010. EPA for \$299,677 and HUD for the Healthy Homes Demonstrations for \$327,124, totaling \$626,801.

Legal/Contractual Obligation

Some activities under this program offer are subject to contractual obligations under Centers for Disease Control Grant # 1U88EH000260-01

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds				
Program Expenses	2010	2010	2011	2011				
Personnel	\$409,937	\$233,284	\$438,773	\$211,446				
Contracts	\$47,600	\$0	\$7,450	\$149,520				
Materials & Supplies	\$32,697	\$8,557	\$33,855	\$60,328				
Internal Services	\$39,537	\$21,414	\$68,484	\$39,603				
Total GF/non-GF:	\$529,771	\$263,255	\$548,562	\$460,897				
Program Total:	\$793,026		\$1,009,459					
Program FTE	4.95	2.55	4.75	1.85				
Program Revenues								
Indirect for dep't Admin	\$10,489	\$0	\$27,408	\$0				
Intergovernmental	\$0	\$173,000	\$0	\$460,897				
Total Revenue:	\$10,489	\$173,000	\$27,408	\$460,897				

Explanation of Revenues

Approximately \$541,643 will be needed in County General Fund for this program offer. By July 2010 we expect to have a targeted case management billing code in which could result in approximately \$123,000/year for Healthy Homes services. This is not in the budget.

Significant Program Changes

Significantly Changed

Last year this program was: #40037, Community Environmental Health

A HUD-funded asthma demonstration project ended leading to a reduction in revenues. Replacement funding will potentially include insurance and Medicaid reimbursement. Negotiations with Department of Medicaid Administration Program (DMAP) to create a new Targeted Case Management program to fund this service. This program offer incorporated portions of Program Offers #40027 and #40028

FTE and funding redistributed from PO#40028 and #40027 for Healthy Homes and AIR Projects. End of CDC Healthy Homes grant.

In late FY10 the Healthy Homes program received a HUD Community Asthma Inspection and Referral grant funding medical intervention, environmental assessments and physical remediation to 320 low income families.