

Lead Agency: Health Department

Program Contact: ABDELLATIF Vanetta M

Program Offer Type: Support

Related Programs:

Program Characteristics: In Target

Executive Summary

The Clinical Infrastructure (Quality and Support) Program provides pivotal oversight by managing the Bureau of Primary Health Care (BPHC) grant, developing and implementing fiscal accountability programs and access to health care, initiating and sustaining clinical and administrative quality and safety activities and improvements, and coordinating adherence to healthcare standards and regulations.

Program Description

This program supports services within the project scope of the BPHC grant, which has continued to increase since our initial award in 1977. The funding is significant and facilitates the mission of increasing access to needed health services to the County's most vulnerable. BPHC funding requires strict adherence to federal laws mandating which services must be provided as a Federally Qualified Health Center (FQHC) which results in additional Medicaid revenue for Oregon Health Plan clients. This funding requires quality services, performance audits and responsiveness to new methods of delivering safe and quality care. Infrastructure and support assures that these efforts are maintained at acceptable thresholds. This program supports the ongoing delivery of Primary Care, Homeless, Dental and School Based Health clinical services through the following activities: Management of all aspects of the BPHC grant, including adherence to all federal program requirements. Review, audit and maintain standards of clinical quality and safety as required to maintain Joint Commission (JCAHO) accreditation, which the BPHC strongly supports. Emphasis on use of data and provision of evidence-based care to increase performance outcomes. Provision of financial analysis, monitoring and revenue development for revenue generating program areas. Development and implementation of systems and processes to streamline service delivery, maintain quality and safety, and increase customer satisfaction. This program measures clinical standards/outcomes, quality, safety and fiscal accountability with other similar health delivery systems. The BPHC and JCAHO are our primary external benchmarking organizations relative to performance indicators. Program includes work with the Community Health Council, client feedback results, and collaborations with other health care delivery systems.

Performance Measures

| Measure Type | Primary Measure | Previous Year Actual (FY09-10) | Current Year Purchased (FY10-11) | Current Year Estimate (FY10-11) | Next Year Offer (FY11-12) |
|--------------|---|--------------------------------|----------------------------------|---------------------------------|---------------------------|
| Output | | 0 | 0 | 0 | 0 |
| Outcome | Maintain compliance with Joint Commission standards | 0.0% | 100.0% | 0.0% | 0.0% |
| Outcome | Percentage of grants renewed | 0.0% | 100.0% | 0.0% | 0.0% |

Performance Measure - Description

1. Bureau of Primary Health Care Performance Reviews results and monthly audits in key performance areas. 2. National benchmark of 90% compliance is required to meet standards/rules governing quality and safety, per Bureau of Primary Health Care (BPHC) Accreditation Initiative. Ongoing targeted compliance audits focus mainly on areas identified as needing improvement. Annual Periodic Performance Review assesses the entire program.

Legal/Contractual Obligation

Revenue/Expense Detail

| | Proposed General Fund | Proposed Other Funds | Proposed General Fund | Proposed Other Funds |
|--------------------------|-----------------------|----------------------|-----------------------|----------------------|
| Program Expenses | 2011 | 2011 | 2012 | 2012 |
| Personnel | \$170,820 | \$1,693,025 | \$269,441 | \$1,596,538 |
| Contracts | \$165,369 | \$150,131 | \$500 | \$119,650 |
| Materials & Supplies | \$2,000 | \$142,680 | \$8,212 | \$88,872 |
| Internal Services | \$0 | \$245,341 | \$58,873 | \$187,440 |
| Total GF/non-GF: | \$338,189 | \$2,231,177 | \$337,026 | \$1,992,500 |
| Program Total: | \$2,569,366 | | \$2,329,526 | |
| Program FTE | 1.90 | 14.55 | 2.80 | 14.90 |
| Program Revenues | | | | |
| Indirect for dep't Admin | \$132,679 | \$0 | \$113,027 | \$0 |
| Intergovernmental | \$0 | \$1,161,177 | \$0 | \$1,105,000 |
| Other / Miscellaneous | \$0 | \$1,070,000 | \$0 | \$887,500 |
| Total Revenue: | \$132,679 | \$2,231,177 | \$113,027 | \$1,992,500 |

Explanation of Revenues

Quality Assurance and Quality Improvement activities are funded primarily from the federal Bureau of Primary Care with additional funding provided by CareOregon based upon eligibility criteria and quality outcome measures described in the CareOregon Medical Home Payment Model.

Federal Primary Care grant: \$1,105,000

CareOregon: \$887,500

County general fund: \$337,026

Significant Program Changes

Last year this program was: #40034, Quality Assurance

Due to one-time only expenses in FY 2011, such as the Corrections Health cost benefit analysis and JHACO accreditation, Quality Assurance is decreased by \$239,840. Additionally, in order to align staff with the program areas that they serve Quality Assurance is increased by 1.25 FTE.