

Lead Agency: Health Department

Program Contact: TOEVS Kim

Program Offer Type: Existing Operating

Related Programs:

Program Characteristics: In Target

Executive Summary

HIV, STDs and Hepatitis C account for almost 80 percent of all reportable diseases in the County. This cost effective program prevents and reduces epidemics, and their consequent toll on individual health, by controlling disease spread using evidence-based prevention interventions and STD treatment for those at highest risk.

Program Description

PREVENTION is the key strategy, using culturally specific, evidence-based population focused approaches. Disease spread is reduced by: 1) PARTNER SERVICES: Staff contact infected people, encourage treatment, partner notification and behavior change. 2) COMMUNITY TESTING: Staff visit bars, jails, internet and other "hookup" sites to test, educate, and promote behavior change. 3) STD CLINIC: Provides timely evaluation, treatment, and prevention counseling for people without health care access. STD rates highly correlate to poor access to quality, timely health care. 4) PARTNERSHIPS: Collaborates with businesses, community organizations, and other counties to enhance capacity. Helps people at-risk link to care, drug treatment, counseling, etc. 5) SYRINGE EXCHANGE: Proven to keep infection rates low among injectors, partners and their infants. 6) BEHAVIOR CHANGE/EDUCATION: Community-based interventions to reduce risky sexual and drug behavior. 7) SUCCESS: County HIV, syphilis, and gonorrhea rates are the lowest of major west coast cities, due in large part to this program. Because these diseases disproportionately affect racial, ethnic and sexual minority communities, we base our service delivery on local epidemiology to prioritize reducing disparities. In place for 20+ yrs, this program is demonstrably effective. 8) COST EFFECTIVE: Preventing disease saves money over time. Delayed treatment increases disease spread and costly chronic conditions such as AIDS, liver disease, infertility and poor maternal/child health. Untreated, HIV leads to poverty, inability to work or maintain stable housing.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of community outreach/health promotion encounters	56,089	45,000	48,880	45,000
Outcome	% of ALL county gonorrhea/syphilis/HIV cases diagnosed through this program	68.0%	30.0%	29.8%	30.0%
Quality	% of gonorrhea/syphilis/HIV cases investigated	84.0%	90.0%	89.8%	90.0%
Output	#STD clinical encounters (visit/phone results	16,510	12,500	14,416	12,500

Performance Measure - Description

1. This performance measure quantifies the amount of community-based work the program provides each year.
2. This performance measure illustrates the impact of the STD/HIV/Hep C Program's ability to find, diagnosis, and treat reportable STDs, including HIV, more than the previous measure "stable or decreased # of HIV cases based on 5 year rolling average". This measure also demonstrates the program's capacity to target services to those at highest risk for STDs.
3. The 90% goal is negotiated with the Oregon State STD Program, and is comparable to benchmarks set by other states nationally.
4. This measure quantifies the amount of clinical/individual client work the program provides each year.

Legal/Contractual Obligation

Yes. ORS 433 mandates disease prevention & control. Ryan White CARE Act Part A (see Services for Persons Living with HIV) requires a local maintenance of effort for HIV prevention services. Oregon State DHS HIV Prevention contractual program elements. Oregon State DHS STD disease investigation assurances.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2012	2012	2013	2013
Personnel	\$1,988,399	\$784,265	\$2,055,147	\$383,664
Contracts	\$196,965	\$371,108	\$149,571	\$390,484
Materials & Supplies	\$101,339	\$161,976	\$178,694	\$107,353
Internal Services	\$296,421	\$342,252	\$288,136	\$296,224
Total GF/non-GF:	\$2,583,124	\$1,659,601	\$2,671,548	\$1,177,725
Program Total:	\$4,242,725		\$3,849,273	
Program FTE	19.05	8.80	20.85	4.10
Program Revenues				
Indirect for dep't Admin	\$99,332	\$0	\$73,045	\$0
Fees, Permits & Charges	\$0	\$137,162	\$0	\$115,988
Intergovernmental	\$0	\$1,504,439	\$0	\$1,043,737
Other / Miscellaneous	\$0	\$18,000	\$0	\$18,000
Total Revenue:	\$99,332	\$1,659,601	\$73,045	\$1,177,725

Explanation of Revenues

As the Local Public Health Authority (LPHA) and the State of Oregon Public Health Services that includes both state and federal funds, a grant from Cascade AIDS project, medical fees from Medicaid, Medicare, private insurance and patient fees, and county general fund.

Federal Ryan White grant: \$39,200
Fed/State HIV/STD/VD Prevention grant: \$783,807
State Support for Public Health grant: \$162,347
Medical fees: \$174,371
Cascade AIDS Project: \$18,000
County General Fund: \$2,671,548

Significant Program Changes

✔ Significantly Changed

Last year this program was: #40011, STD/HIV/Hep C Community Prevention Program

Two cuts to federal/state HIV prevention funds FY2012-one at beginning of year, second mid year. Total cut is \$176,000 from FY 2011 grant of \$1,106,100 to \$930,000. In FY 2013, due to an additional mid-year cut we are budgeting \$738,807 total from State/federal funds.

We have reduced or transferred assignment of FTE mid-year FY12, and will have a total reduction of 4.73 FTE from this program for FY13. We are attempting to maintain our subcontracts with CBOs as intact as possible, and to leverage the efforts of other program staff promoting sexual health to address HIV and STD prevention more actively. Our staff are working with higher workloads per hour than previously. Nonetheless, we'll have a reduction in services including health promotion and outreach to high risk MSM, needle exchange service hours, hepatitis C education, condom distribution, and community awareness campaigns.