

Lead Agency: Health Department

Program Contact: Kim Toevs

Program Offer Type: Existing Operating

Related Programs:

Program Characteristics:

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 (FY11-12)	Current Year Purchased (FY12-13)	Current Year Estimate (FY12-13)	Next Year Offer (FY13-14)
Output	# of community outreach/health promotion encounters	46,533	45,000	47,000	40,000
Outcome	% of ALL county gonorrhea/syphilis/HIV cases diagnosed through this program	31.8%	30.0%	31.6%	30.0%
Quality	% of gonorrhea/syphilis/HIV cases investigated	89.7%	90.0%	85.0%	90.0%
Output	# of STD clinical encounters (visit/phone results)	13,781	12,500	13,000	6,750

Performance Measure - Description

 **Measure Changed**

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. 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 service the program provides each year. For FY14 the measure will change to include all STD/HIV testing, treatment, and immunization visits, whether at main clinic or community sites. It will exclude encounters that are not face-to-face (such as "phone results" --interactions to discuss lab results and follow-up).

Legal/Contractual Obligation

ORS 433 mandates disease prevention & control. Ryan White CARE Act Part A requires local maintenance of effort for HIV prevention services. Oregon State DHS HIV Prevention contractual program elements. Oregon State DHS STD disease investigation assurances. CHAT grant requires training 15 youth peer educators through African American houses of faith.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2013	2013	2014	2014
Personnel	\$2,055,147	\$383,664	\$1,935,760	\$601,621
Contracts	\$149,571	\$390,484	\$339,578	\$271,698
Materials & Supplies	\$178,694	\$107,353	\$144,550	\$174,744
Internal Services	\$288,136	\$296,224	\$310,236	\$340,631
Total GF/non-GF:	\$2,671,548	\$1,177,725	\$2,730,124	\$1,388,694
Program Total:	\$3,849,273		\$4,118,818	
Program FTE	20.85	4.10	18.50	6.30
Program Revenues				
Indirect for dep't Admin	\$73,045	\$0	\$89,052	\$0
Fees, Permits & Charges	\$0	\$115,988	\$0	\$125,822
Intergovernmental	\$0	\$1,043,737	\$0	\$1,244,872
Other / Miscellaneous	\$0	\$18,000	\$0	\$18,000
Total Revenue:	\$73,045	\$1,177,725	\$89,052	\$1,388,694

Explanation of Revenues

STD/HIV/Hep C is funded by an intergovernmental agreement between Multnomah County as the Local Public Health Authority (LPHA, the Oregon Health Authority, medical fees and the county general fund. Federal Ryan White grant: \$46,141; Fed/State HIV/STD/VD Prevention grant: \$898,964 State HIV Prevention Technology grant: \$58,871; State Support for Public Health grant: \$162,347; Medical fees: \$174,371; Cascade AIDS Project: \$18,000; Federal youth educator grant: \$30,000; and County General Fund: \$2,730,124

When the budget was adopted, additional revenue was added to this program offer. \$65,000 of ongoing general fund for the needle exchange program and \$31,714 increase to the HIV Prevention Block grant.

Significant Program Changes

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

Multnomah County sees level or slight funding increases in HIV prevention while the state as a whole declines. Outreach service hours will be cut and focus will be on testing and linkage to care. The program has received grants for peer recruitment into testing among men who have sex with men and for developing a youth peer educator/CHS program among African American houses of faith. An increased emphasis is placed on HIV testing and linkage to care for HIV+ individuals. Staffing changes were made to strengthen this focus, and a new position was created to maintain early access to care for HIV+ cases to meet the increased need for case investigation of STDs (primarily syphilis). Outreach and group education services will be reduced while testing and linkage to care will be maintained/increased.

\$65,000 for needle exchange included as part of the City/County agreement to backfill City of Portland reductions.