

## CLARK COUNTY STAFF REPORT

**DEPARTMENT:** 

Clark County Public Health (CCPH)

CCPH SR2015-1581

DATE:

November 24, 2015

#### REQUESTED ACTION:

Clark County Board of Councilors' approval to submit an application for a grant to Multnomah County, to increase one Community Health Worker from 0.80 FTE to 1.00 FTE, to increase an additional Community Health Worker from 0.60 FTE to 0.70 FTE, and authorization for the Public Health Director to sign the grant application, the agreement, and any amendments. This grant provides funding for HIV case management and emergency housing services for eligible clients in Clark County. CCPH's proposed budget is \$199,884.

XXXX Consent	Hearing	County Manager

#### **BACKGROUND**

Consistent with Public Health Strategic Initiative 2 to increase opportunities for healthy living, CCPH provides case management services for persons in our community living with HIV/AIDS. CCPH receives regionally provided federal grant funding available to counties under the Ryan White CARE Act. For many years, CCPH has contracted with Multnomah County Health Department, the lead agency for this region, to receive funding that allows CCPH to ensure provision of care services for persons in Clark County who are living with HIV/AIDS. Care services include oral health care, case management, mental health services, emergency rental assistance, and payment/co-pays for health insurance premiums. This year, we are required to submit a proposal through a competitive RFPQ process for the service categories of Medical Case Management and Emergency Housing Services. The Community Health Worker positions are being increased to better meet the housing needs of our clients. A competitive RFPQ process will be required for the additional service categories at a later date.

The population this grant serves must have medically verifiable HIV disease and an income less than or equal to 200% of the Federal Poverty Level, with no other source of payment for necessary services. The Ryan White CARE Act seeks to remove the barriers that prevent low income, uninsured and/or underinsured individuals with HIV/AIDS, and their families from receiving care and obtaining emergency housing.

#### COUNCIL POLICY IMPLICATIONS

N/A

#### ADMINISTRATIVE POLICY IMPLICATIONS

N/A

### COMMUNITY OUTREACH

Multnomah County, as the lead agency for this region, engages critical stakeholders to determine the funding amounts for each service category in the contract. The CCPH Case Management program collaborates with community medical, dental and mental health providers, HIV community-based organizations and other agencies that serve the needs of HIV positive clients.

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## **BUDGET IMPACT ATTACHMENT**

## Part I: Narrative Explanation

 $I.\ A$  – Explanation of what the request does that has fiscal impact and the assumptions for developing revenue and costing information

Part II: Estimated Revenues

	Current Biennium		Next Biennium		Second Biennium	
Fund #/Title	GF	Total	GF	Total	GF	Total
1025/Federal Grant Funding from				199,884	·	
Multnomah County						
Total				199,884		

II. A - Describe the type of revenue (grant, fees, etc.)

## Part III: Estimated Expenditures

### HI. A – Expenditures summed up

		Current Biennium		Next Biennium		Second Biennium	
Fund #/Title	FTE's	GF	Total	GF	Total	GF	Total
1025/1xx/2xx					199,884		
Total					199,884		

### III. B – Expenditure by object category

	Current Biennium		Next Biennium		Second Biennium	
Fund #/Title	GF	Total	GF	Total	GF	Total
Salary/Benefits				137,764		
Contractual						
Supplies						
Travel						
Other controllables				62,120		
Capital Outlays						
Inter-fund Transfers						
Debt Service						
Total				199,884		

**Department:** Public Health

Staff Report Effective Date: March 1, 2016

Enter FTE total (ranges from 0 to 1)	0.20	LINK TO COU	INTY PAY PLA	N INFORMATION				
Enter monthly salary if salaried	\$0	]						
Enter hourly amount if hourly	\$18.12	1						
Calculated FY 2015 ANNUAL salary total	\$37,690							
	2015	2016	2017	2018				
Enter # of months FTE will work each year	0	10	12	12				
Retirement plan - see comment boxes	Not eligible	PERS 1/2/3	PSERS	OFF 2 = deputie				
Enter 1 in the applicable box, 0 in others	0	1	0	0				
Enter 1 if eligible for disability ins. 0 o/wise	1	NOT eligible: all project employees: employe						

Enter 1 if eligible for disability ins, 0 o/wise	1	NOT eligible: all project employees; employees that work less than 0.5 FTE.
		A CONTRACTOR OF THE PROPERTY O
Enter 1 if eligible for life ins, 0 o/wise	1	NOT eligible: all project employees; employees that work less than 0.5 FTE.
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				FY 2015-16 Decision			FY 2017-18 Decision
ОВЈЕСТ	OBJECT DESCRIPTION	2015 COSTS	2016 COSTS	Package Total	2017 COSTS	2018 COSTS	Package Total
110	Salaries	\$0	\$6,407	\$6,407	\$7,843	\$7,999	\$15,842
210	Employee Benefits	\$0	\$435	\$435	\$639	\$652	\$1,291
211	PERS/LEOFF	\$0	\$705	\$705	\$913	\$983	\$1,896
221	Medical Insurance	\$0	·\$0	\$0	\$0	\$0	\$0
222	Industrial Insurance	\$0	\$436	\$436	\$534	\$544	\$1,078
223	Dental Insurance	\$0	\$0	\$0	\$0	\$0	\$0
230	Life Insurance	\$0	\$284	\$284	\$357	\$375	\$732
236	Disability Insurance	\$0	\$46	\$46	\$57	\$58	\$115
TOTAL		\$0	\$8,313	\$8,313	\$10,343	\$10,611	\$20,954

Prepared By:	Date:
Department Approval: Jeff Harbison	Date: 11/17/2016
Budget Approval:	Date:
Human Resources Approval:	Date:

**Department:** Public Health

Staff Report Effective Date: March 1, 2016

Enter FTE total (ranges from 0 to 1)	0.10	LINK TO COUNTY PAY PLAN INFORMATION
Enter monthly salary if salaried	\$0	
Enter hourly amount if hourly	\$19.05	
Calculated FY 2015 ANNUAL salary total	\$39,620	
	2015	2016 2017 2018
Enter # of months ETE will work each year		10 12 12

	2015	2016	2017	2018
Enter # of months FTE will work each year	0	10	12	12
Retirement plan - see comment boxes	Not eligible	PERS 1/2/3	PSERS	OFF 2 = deputies
Enter 1 in the applicable box, 0 in others	0	. <b>1</b>	0	0
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Enter 1 if eligible for life ins, 0 o/wise		0	NOT eligible: all project employees; employees that work less than 0.5 FTE.

	ОВЈЕСТ	2015	2016	FY 2015-16 Decision Package	2017	2018	FY 2017-18 Decision Package
OBJECT	DESCRIPTION	COSTS	COSTS	Total	COSTS	COSTS	Total
110	Salaries	\$0	\$3,368	\$3,368	\$4,122	\$4,205	\$8,327
210	Employee Benefits	\$0	\$229	\$229	\$336	\$343	\$679
211	PERS/LEOFF	\$0	\$370	\$370	\$480	\$517	\$997
221	Medical Insurance	\$0	\$0	\$0	\$0	\$0	\$0
222	Industrial Insurance	\$0	\$218	\$218	\$267	\$272	\$539
223	Dental Insurance	\$0	\$0	\$0	\$0	\$0	\$0
230	Life Insurance	\$0	\$0	\$0.	\$0	\$0	, \$0
236	Disability Insurance	\$0	\$0	<b>**</b> \$0.	\$0	\$0	\$0,
TOTAL	ı	\$0	\$4,185	\$4,185	\$5,205	\$5,337	\$10,542

Prepared By:	Date:				
Department Approval: Jeff Harbison	Date:	11/17/2016			
Budget Approval:	Date:				
Human Resources Approval	Date				

Coding

Package number	Fund	Prog	Dept	Basele	Obj	Categ	2015-16 EXP inc / REV dec (DR)	2015-16 EXP dec /REV inc (CR)	2017-18 EXP inc / REV dec (DR)	2017-18 EXP dec /REV inc (CR)	Type
	1025	355	706	562351	110	060060	9,775		24,169		Ongoing
	1025	355	706	562351	210	060060	664		1,970	3300	Ongoing
	1025	355	706	562351	211	060060	1,075		2,893		Ongoing
~	1025	355	706	562351	, 222	060060	654		1,617		Ongoing
	1025	355	706	562351	230	060060	284		732		Ongoing
	1025	355	706	562351	236	060060	46		115		Ongoing
	1025	355	706	333930	910	060060		12,498		31,496	Ongoing

# FTE info

Package number	Fund	Prog	Dept	Туре	Add, Delete, Change	FTE	Effective MM/YY (Start date of position)	Existing position #	New job classification	Length for new project positions
	1025	355	706	Revenue	С	0.20	03/2016	HEC1012	Comm Health Worker	
	1025	355	706	Project	C	0.10	03/2016	HEC0805	Comm Health Worker	