

Department of Health Services

2015-2016 Budget Presentation



April 20, 2015

Authored by: Health Services Leadership Team

Linn County Department of Health Services

2015-2016 Budget Presentation

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Health Administration

Frank Moore, Administrator

This year's proposed budget for the Linn County Health Services Department reflects our continuing and increasing integration with Samaritan Health Plan's InterCommunity Health Network Coordinated Care Organization (IHN-CCO) under the Oregon Health Transformation initiated by the Oregon Legislature in 2011 and later operationalized in 2013. Our Alcohol and Drug, Public Health and Mental Health Programs are most directly impacted by the innovation and system changes brought by the Health Transformation. Our Developmental Disabilities Program is less directly influenced by these changes, however most, if not all of those served by the DD program are Oregon Health Plan members and continue to receive their physical and behavioral health services through the IHN-CCO. Service coordination, service development and case management for individuals with developmental and intellectual disabilities are driven by a separate Oregon Medicaid Plan known as the "K Plan". Environmental Health Services fall substantially outside of the Oregon Health Transformation although some services offered by the EH Program have a strong bearing on the improvement of "population health" for Linn County residents. We anticipate that the strengths and assets of the Linn County EH Program will ultimately benefit our relationship with IHN-CCO as we enhance our collaborative relationships with our respective county and community partners.

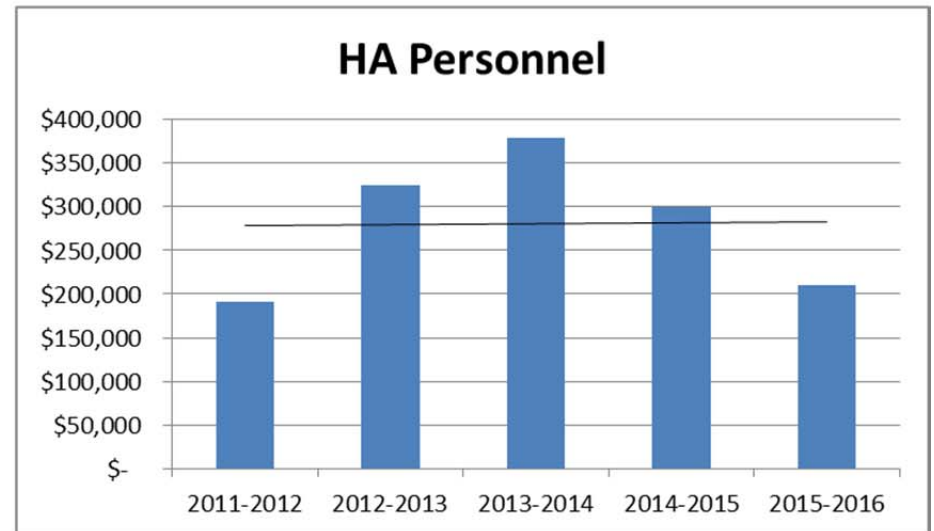
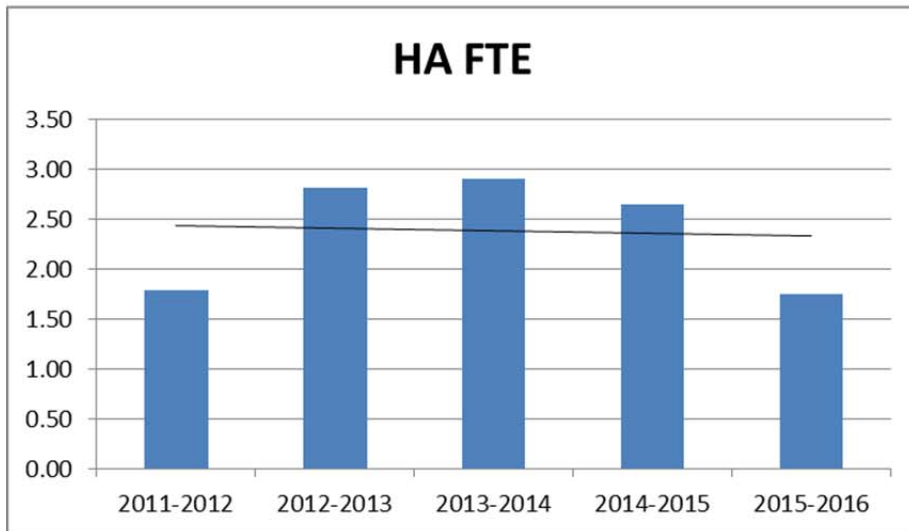
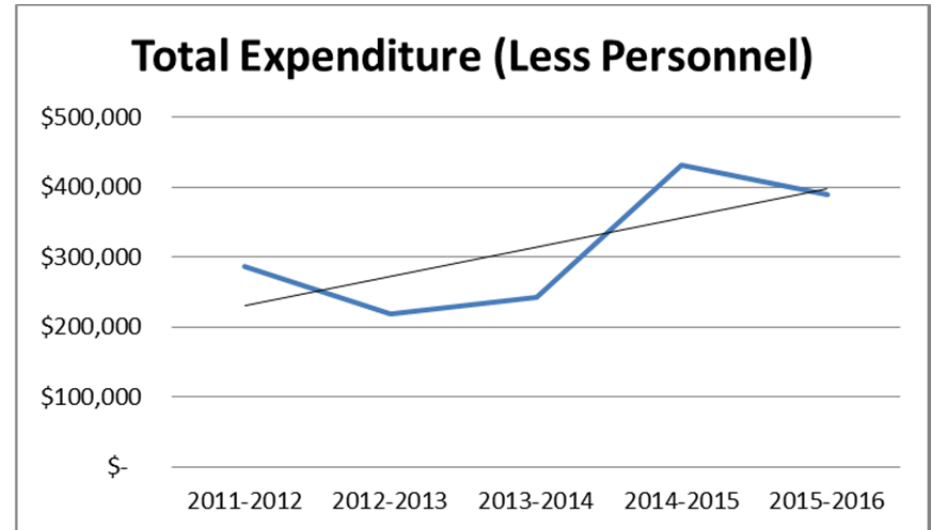
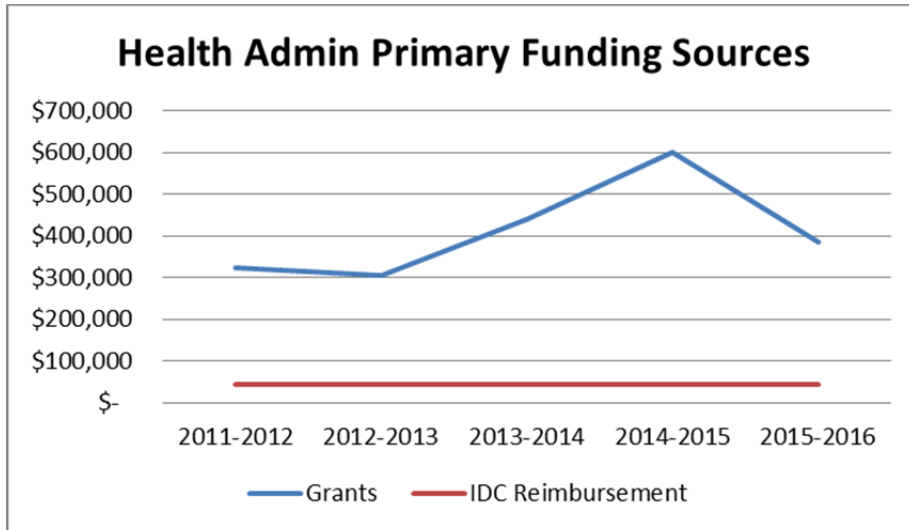
An outgrowth of this work has been the establishment of a regional Memorandum of Understanding between Linn, Benton and Lincoln counties to proactively and increasingly explore opportunities to blend, "braid" and/or regionalize service planning and delivery on a service by service basis to capitalize on the respective strengths and programming that each of the three county partners in this effort bring to the table. This union of local government interests strives to create efficiencies, erase geopolitical boundaries that have unintentionally created barriers to access, quality of service and equity historically. Each of the three counties have areas where they shine and where they offer the opportunity to take a lead role founded in their expertise related to a specific service or array of service offerings.

Most recently, this regional effort has brought IHN-CCO and Oregon Cascades West Council of Governments leadership into the interdependent partnerships reflected in this agreement. Our ultimate goal is to retain the historic role of local government through its statutory designation as the Local Public Health Authority and Local Mental Health Authority in a manner that enhances and supports our communities and our CCO in pursuit of the Triple Aim, enhancing the patient experience, improving population health and increasing the affordability of healthcare.

Our work in this ever-changing and at times challenging transitional environment continues to intensify and “raise the bar” more and more to ensure not only the quality of our relationships, collaborations and commitment to change, but more importantly to “do right things” in our work to provide optimal community based health services that are readily accessible, of highest quality, affordable and most cost effective. The underpinnings of this lie not with a “transformation” imposed upon us by a more global, state led initiative, but in the true belief, “... that Government is best which is closest to the people.” (Thomas Jefferson)

Health Administration Financial Dashboard

Trending Data Fiscal Year 2011-2012 through Projected Fiscal Year 2015-2016



Mental Health Program

Todd Noble, Program Manager

Linn County Mental Health Services (LCMH) provides a full spectrum of mental health services for the residents of Linn County as well as residents from neighboring communities (Benton, Lincoln, and Marion Counties). With over 140 employees, LCMH is able to provide traditional outpatient services including, but not limited to: mental health prevention and promotion, individual, group, and family therapy, case management, skills training, peer support services, medication management and 24/7 crisis services.

Additionally, LCMH offers a growing number of evidence-based services and specialized programs to address the unique needs of various populations, including New Solutions, Wraparound, Parent Child Interaction Therapy, School-based Services, Assertive Community Treatment, Supported Employment, Residential Assistance Services, Adult Mental Health Initiative (AMHI), Mobile Crisis response, Pre-Commitment Investigations, Adult Abuse Investigations, Home and Community-Based Services, and Psychiatric Security Review Board supervision and treatment. LCMH also operates a 7-bed Residential Treatment Facility (RTF) with Crisis Respite and PSRB beds, contracts with multiple mental health residential service providers for an additional 32 beds and two independent beds for individuals who have co-occurring mental health/substance use disorders.

As a result of health care transformation and the expansion of Medicaid, Linn County Mental Health (LCMH) added 11 positions in 2014 to meet access demands. In 2014, LCMH served 5,036 clients, which is approximately 4% of the Linn County population, providing 71,864 hours of clinical services. As of January 2015, Linn County Mental Health had 2,740 clients actively enrolled in services.

Crisis Services

- Crisis and Admissions at LCMH operate on an “open access” basis, meaning individuals can walk in for intake appointments without prior scheduling to allow for immediate access to services.
- Crisis Services continues to provide outreach assessments in Albany, Lebanon and Corvallis hospitals for any Linn County resident experiencing a mental health crisis. This service is offered 24 hours a day, 365 days a year. In 2014 the Crisis Team provided 1,600 emergency evaluations.
- Linn County Mental Health partnered with Benton County Behavioral Health in writing and obtaining a Crisis Mobile grant. This grant has allowed Linn County to fund two full-time staff, one of whom spends 100% of her time in the community supporting law

enforcement agencies county wide. The second position provides outreach supports to individuals with mental illness who live in local homelessness shelters and congregate living sites.

- Crisis Services has a full-time employee who is co-located within the Linn County Correctional facility, providing mental health assessments, treatment to inmates with mental health issues and providing ongoing behavioral health consultation to jail staff. As part of this partnership with the Linn County Sheriff, we provide psychiatric medication management services to identified incarcerated men and women. These staff provided over 1,500 distinct services Linn County Jail residents in 2014.
- LCMH Crisis Services also conducted 84 civil commitment Investigations on individuals involuntarily held in local hospitals. Sixty three (63) of these cases resulted in a diversion from our local hospitals to community based supports and 21 of which went to a civil commitment court hearing in 2014.

Adult Services

- The Supported Employment Program, which operates through our Community Support Services (CSS) program, added a second Supported Employment (SE) Specialist, achieving required fidelity in July of 2014. The SE program currently serves 40 consumers who are affected by a serious and persistent mental illness. We currently have a waitlist of approximately 30 more individuals with mental illness who are seeking employment based services.
- CSS partnered with Benton County Behavioral Health to write a grant for Rental Assistance Services (RAS). Linn County now has fifteen housing slots awarded to Linn County residents.
- The CSS Community Integration (CI) team built a working relationship with IHN-CCO regarding adult residential procedures and contracts. The CI team provides information and consultation, developed the CCO Residential Database, and helped develop “Residential Transition Delegation of Responsibilities for IHN Members.”
- From July 2014 to the present, LCMH’s Adult Abuse Investigator completed six full investigative reports on adult abuse. There were 24 additional screenings that did not meet criteria for full investigation and 21 death summary reports. The outcomes have helped make system changes where needed to protect residential clients. The County’s Adult Abuse Investigator has also provided training for Mental Health staff regarding mandatory abuse reporting.

- The Community Integration Team (CI) manages funding through the Adult Mental Health Initiative (AMHI) in order to help individuals live as independently as possible. The CI team also developed the AMHI reporting database and manages residential referrals and facilitates transitions from the State Hospital into residential care.
- The CI team works with the State Addictions and Mental Health Division to maintain compliance with Oregon Administrative Rules (OAR) and provide ongoing supports and monitoring of Linn County's residential programs. The team also participated in the licensing of six mental health residential treatment homes and facilities and monitors seven other licensed Adult Foster Homes in Linn County.
- CSS provided administrative support and oversight for the Home and Community Based Services program under 1915(i) for those needing habilitative supports and Personal Service Worker (PSW) facilitation for those needing 20 hours or less of personal care services per month.
- Linn County Mental Health's Assertive Community Treatment (ACT) team provides an evidence-based team approach designed to provide comprehensive, community-based treatment, case management, skills training, and psychiatric treatment to persons with serious and persistent mental illness. The ACT program currently serves 30 individuals.
- The Adult Outpatient Program (AOP) has partnered with Geary Street Clinic and other Patient Centered Primary Care Homes to provide integrated health care and smooth transitions between physical and behavioral health services.
- AOP is participating in a Performance Improvement Project (PIP) with Geary Street Clinic and IHN-CCO to improve monitoring of diabetes in patients with severe and persistent mental illness who are taking psychotropic medications.

Services for Children and Families

- In an effort toward collaboration and improved access, LCMH has expanded school based treatment for children. Currently 75% of Albany Schools, 90% of Lebanon Schools, and 95% of Sweet Home Schools are being served directly by Linn County Mental Health staff.
- Early Assessment Support Alliance (EASA) provided fidelity care and support to an average of 10 clients who are experiencing significant psychiatric distress due to a major mental illness. EASA also provides ongoing community education to community partners, i.e. schools, Educational Services Division (ESD), Juvenile Department, Department of Human Services (DHS), and primary care physicians.

- LCMH’s Services for children and families also provides fidelity Wraparound Services. The Wraparound team serves an average of 30 clients/families with high mental health acuity and an additional average of 30 clients/families in the care and custody of the DHS.
- At DHS – Child Welfare, collocated LCMH staff complete mental health assessments for all youth ages 0 to18 who are taken into DHS care and custody.
- The Child Outpatient Program (COP) has developed and implemented a Parent Child Interactive Therapy “PCIT” program to serve children under the age of six and their parents.

Regional collaboration with IHN-CCO:

- Linn County Mental Health actively participates in the Regional Health Collaborative Planning Committee. This committee has provided opportunities to work closely with IHN-CCO, Benton County, and Lincoln County, to leverage additional resources and better serve our community.
- Other successful collaborations with IHN-CCO include:
 1. Regional Planning Council (RPC) which supports community involvement and input into the operations and mission of IHN-CCO.
 2. The Mental Health Advisory Committee (MHAC), with representatives from Linn, Benton and Lincoln Counties, Samaritan Mental Health, IHN-CCO and community stakeholders, which guides the behavioral health priorities of IHN-CCO and its providers.
 3. The Quality Management Committee’s (QMC) purpose is to monitor care provided to IHN members and to assure that they receive the highest quality health care services possible.
 4. Systems of Care Wraparound Initiative (SOCWI), a planning committee whose focus includes encouraging and supporting at risk children and their families.
 5. Alternative Payment Methodology Subcommittee which focuses on payment strategies that are transformative and encourage innovation.
 6. Delivery System Transformation (DST)-CCO Steering Committee which focuses on developing and testing health system changes to deliver improved, more integrated care to IHN members with a focus on primary care and prevention.

7. Privacy and Security Workgroup which was established to guide the development of a regional, secure health information exchange.
8. Assertive Community Treatment Committee which provides guidance, oversight and collaboration between the three counties and IHN-CCO.

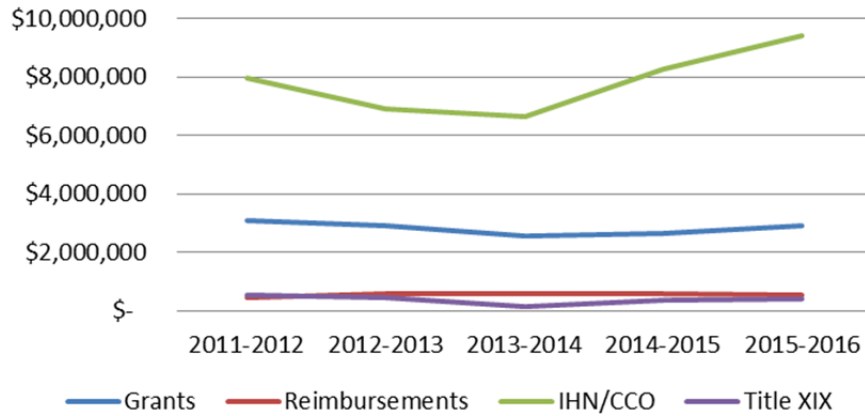
Challenges and Opportunities for 2015-2016:

- Maintain ongoing local government collaboration through the established Regional Health Authority Memorandum of Understanding with Benton and Lincoln counties.
- Continue our collaborative work with IHN-CCO to enhance existing programs and to create new and innovative mental health services.
- Develop strategies to respond to emerging private and public entities that may become competitors for many services. This will be both a challenge and opportunity in 2015-2016.

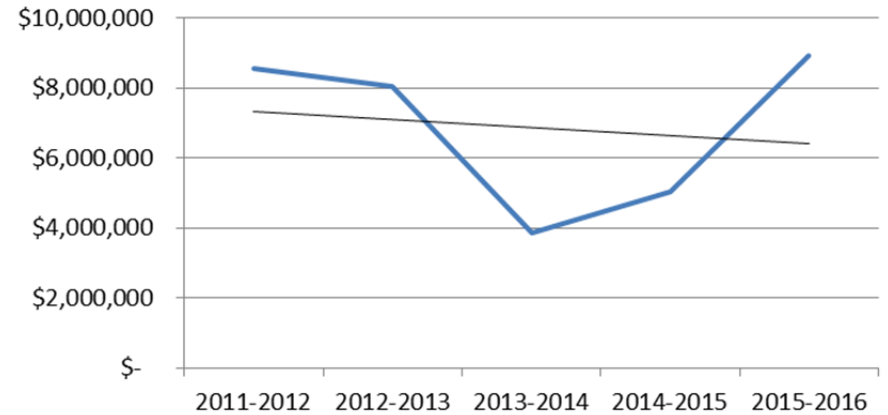
Mental Health Financial Dashboard

Trending Data Fiscal Year 2011-2012 through Projected Fiscal Year 2015-2016

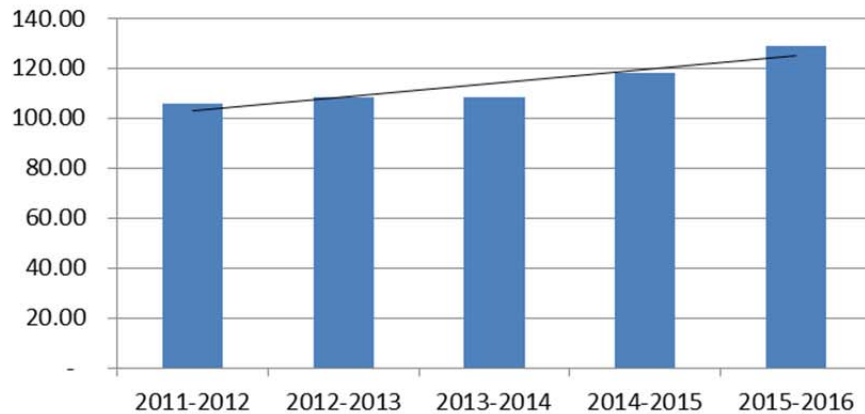
Mental Health Primary Funding Sources



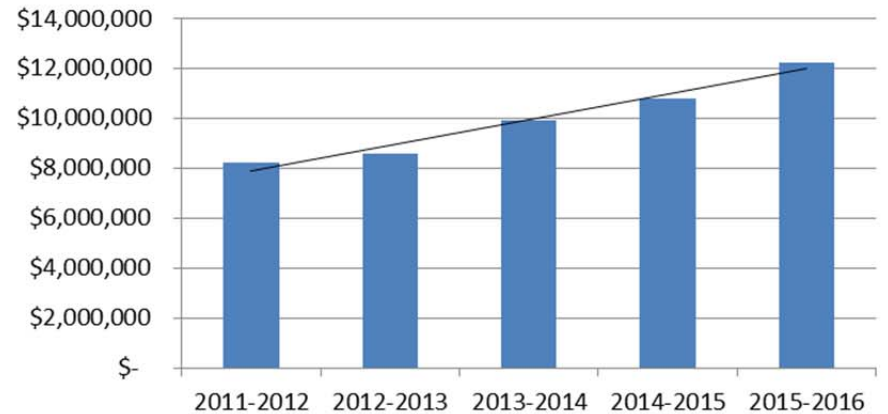
Total Expenditure (Less Personnel)



MH FTE



MH Personnel



Mental Health Clients Served

	Children	Adults	Crisis	Seniors
2011-2012	1641	2059	2622	57
2012-2013	1708	2126	2294	77
2013-2014	1481	2345	4137	57
2014-2015*	1616	3028	5721	3

*2014-2015 Data through 3/31/2015 - Projected to FYE

Developmental Disabilities Program

Jeff Sneddon, Program Manager

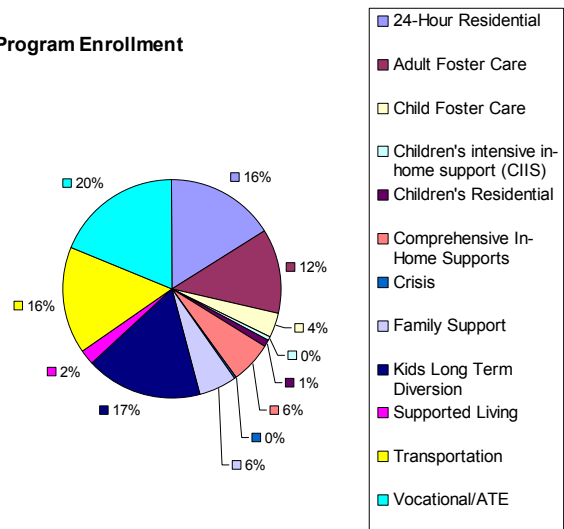
Linn County Developmental Disabilities Programs continue to implement State wide programs for individuals with Intellectual and Developmental Disabilities through an intergovernmental agreement and policy development derived from the Oregon Health Authority and Department of Human Services. Through our leadership and local connections we provide services that focus on individual's choice of services, service provider, and service setting ensuring that the individual, community, and County's distinct culture, values, and vision are upheld.

Developmental Disability Program Activities 2014-2015

Program activities have predominantly focused on the implementation of the Community First Choice State Plan (K-Plan) and Employment First Policy:

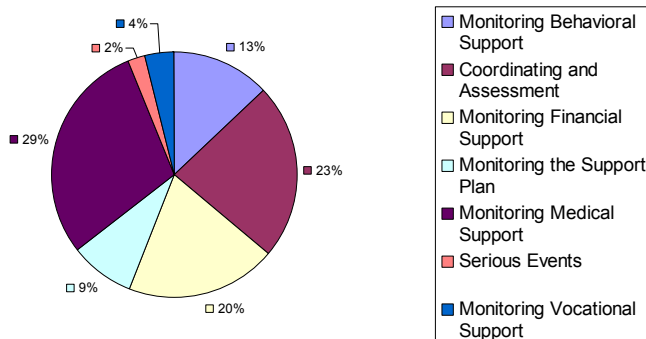
- Generated over \$33.8 million in program service dollars
- Created over 469 living wage jobs
- Developed, licensed, and monitored individual placements in:
 - 13 Youth Residential Programs
 - 31 Adult Residential Programs
 - 45 Youth Foster Homes
 - 47 Adult Foster Homes
 - 3 Supported Living Programs
 - 17 Transportation Program
 - 14 Vocational Program
- Coordinated and enrolled over 320 providers to support In-Home Programs for adults and youth to remain in their home and reduce costly out of home placements.

Program Enrollment



Service Coordinator assures individualized services that are person centered and achieve maximum independence and true community integration to these Linn County citizens.

Service Coordination Services



In addition, we continue to participate with State and local law enforcement agencies to protect, investigate and ensure the health and safety of Linn County residents.

- Screened 66 allegations of potential abuse
- Investigated 13 cases which yielded 7 Substantiated, 3 Unsubstantiated, and 3 Inconclusive results

These efforts and relationships are further developed as we continue to participate with local providers and families around emergency planning and preparedness.

As K Plan driven implementation efforts continue, DD program staff participated in a State Wide Workforce Steering Committee which produced an outcome that the more than validated that community DD programs were and are grossly underfunded to meet Federal and State Guidelines for implementation. Hopefully the Oregon Legislature will take effective action to provide the kind of services and supports that most of us take for granted and have been sorely under resourced to our developmentally disabled Linn County residents and their families.

Our regional efforts continue, as we work with individuals and families who frequently have exceptional care needs and deserve responsive, flexible and integrated services. A prime example is of a youth and family who whose child has multiple developmental and physical disabilities and who had experienced frequent serial placements in acute settings as well as out of home placements in residential and foster homes. Public and private funds were utilized in a “braided” fashion to develop and secure a stable responsive, community based service array to support her in living with her parents and siblings safely. As a community we were able to provide the needed supports through our Local, Regional, and State partnerships. Active participation and timely collaboration are critical essentials of Linn County’s robust service delivery and supports for individuals and families who face the daily challenges of developmental disabilities.

“I am thankful that we have the supports to continue to raise our child in our family home.”

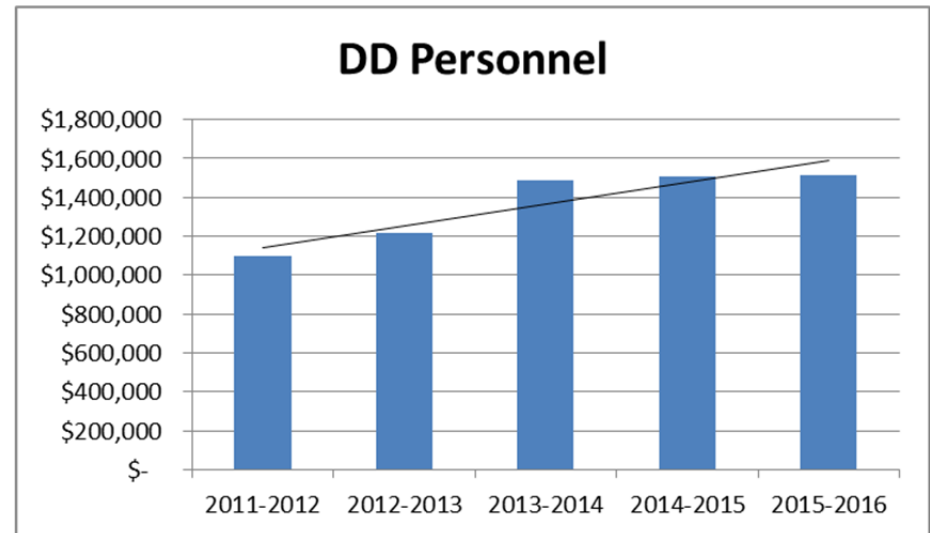
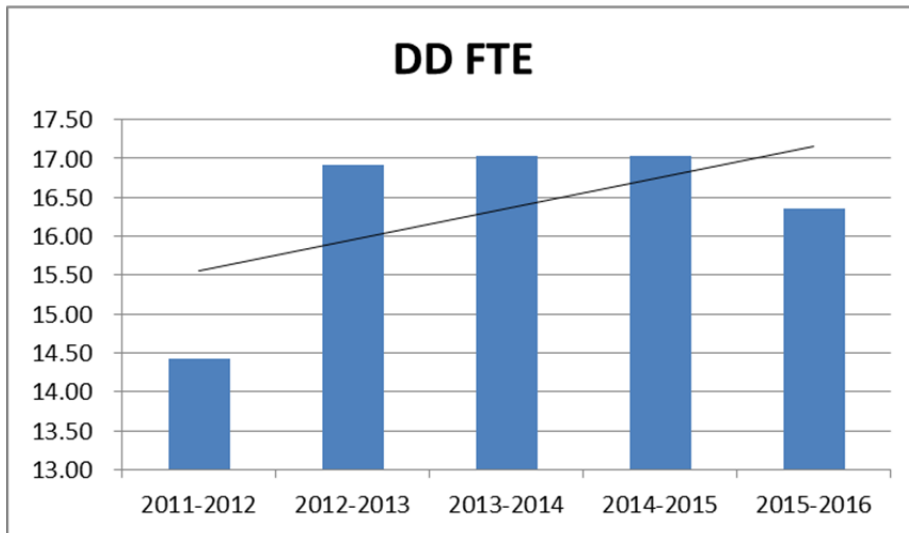
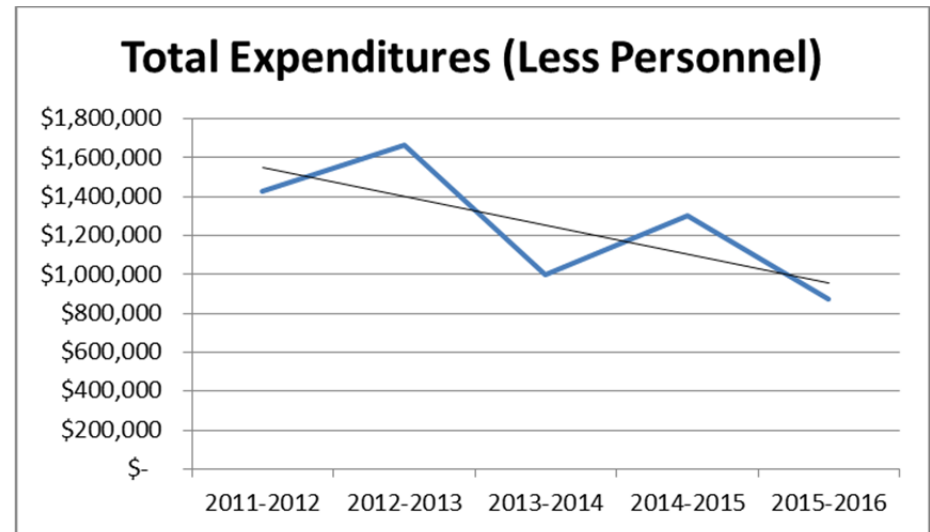
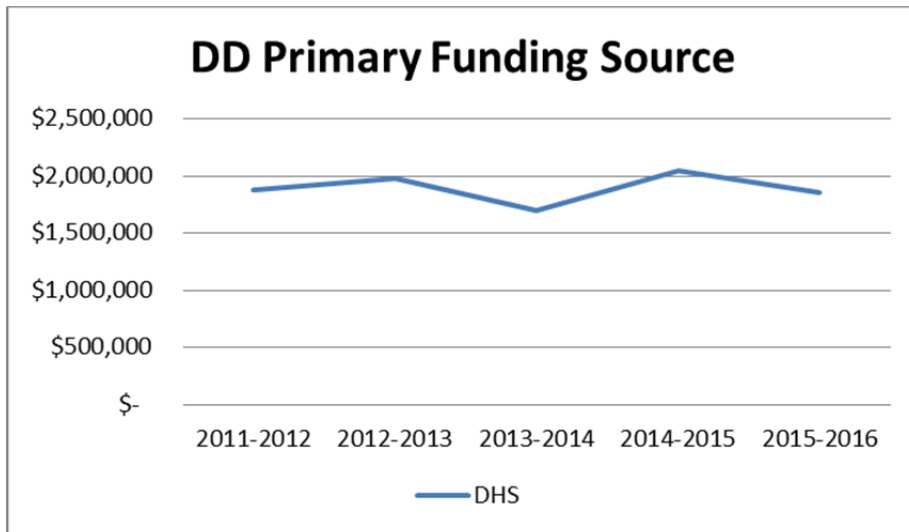
- Community Care Network: Multisystem network of medical, educational, and social services agencies supporting children and youth with exceptional medical needs
- Systems of Care Wrap Initiative: Regional approach to support youth and families with complex supports needs who need coordinated services from multiple agencies
- Early Learning Hub Governing Board: Multidisciplinary Regional Board that oversees the activities and work of the Early Learning Hub
- Oregon Council on Developmental Disabilities: Provides advocacy and leadership to the State Office of Developmental Disabilities in program design and development
- Linn-Benton Vulnerable Populations: Develops plans and coordinates emergency planning as well as preparedness.
- Linn-Benton Vulnerable Adult Services Team: Collaboration with District Attorney and other agencies and providers who provide services to vulnerable adults.

Opportunities for 2015-2016:

- Continue to develop and implement Community First Choice and the Employment First Policy.
- Increase connections and leadership opportunities with State and Regional programs to continue our efforts to provide services locally that embrace our Communities culture and vision.
- Continue to explore opportunities with internal programs to increase overall Health Department functions.
- Continued development of our Advisory Board and biennial plan.

Developmental Disabilities Financial Dashboard

Trending Data Fiscal Year 2011-2012 through Projected Fiscal Year 2015-2016



Developmental Disabilities Clients Served

	New Intake	Total Clients
2011-2012	47	724
2012-2013	93	747
2013-2014	87	842
2014-2015*	95	1176

*2015-2015 Data Through 3/31/2015 - Projected to FYE

Alcohol and Drug Program

Tony Howell, Program Manager

The Linn County Alcohol & Drug Program (LCAD) provides substance abuse and problem gambling prevention services, early intervention, and outpatient and intensive outpatient alcohol and drug treatment services to adults and youth who are residents of Linn County, as well as gambling treatment services for residents of Benton and Linn Counties. County General Fund support is focused on youth alcohol and drug treatment, youth substance abuse prevention, and the Adult Drug Court.

The Program works actively with community partners to assess community needs, and to plan, implement, and coordinate community and regional interventions aimed at improving the health of Linn County residents, especially in those areas influenced by substance abuse or problem gambling. As a county-directed program, LCAD takes responsibility for looking at county-wide needs and gaps, and pursuing resources and strategies to develop an effective overall system of care.

Community Collaboration Highlights 2014-15

This year, LCAD built on successful collaborations with the local school system and youth-serving agencies to improve the health of youth and families:

Prevention Education: LCAD instructors partnered with School District administration, principals and teachers to provide the research-based LifeSkills Training prevention curriculum to 4th & 6th grade students in all seven Linn County school districts.

Prevention Youth Council: Prevention staff facilitated activities of the 29 youth members of the Linn County Youth Council, Students Taking Action Not Drinking (STAND), representing all eight high schools in the county, in developing positive peer messages related to mental illness and substance abuse prevention.

Linn County Council on Integrated Child & Family Services: To coordinate and fill gaps in services for local children and families, LCAD staff serves on the Leadership Team of the Linn County Council, partnering with school districts, LBL-ESD, LBCC, Linn County Juvenile Department, Linn County Mental Health, DHS Child Welfare, and Trillium Family Services.

School-based Treatment & Early Intervention: In addition to clinic treatment, LCAD counselors provide assessment and treatment services to youth at all middle and high schools in our six rural school districts, and offer early intervention services for students at risk of substance abuse.

Youth Services Teams: LCAD counselors serve on five multi-agency intervention teams serving seven school districts to assist high-risk families and youth in connecting with needed services and developing action plans.

LCAD has continued to fill service gaps and develop partnerships with local agencies to more effectively serve the most at-risk adults and their families:

Adult Services Teams: An LCAD counselor serves on Albany and Lebanon multi-agency intervention teams to assist high-risk, often homeless, adults and their families in accessing needed services and developing action plans.

Adult Drug Court: LCAD treatment staff continues to work collaboratively with the Linn County Circuit Court, District Attorney, Defense Bar, Linn County Sheriff's Office, and Linn County Parole & Probation to provide this effective intervention with substance dependent offenders.

Treatment for Offenders: LCAD treatment staff continues to work closely with Linn County Parole & Probation (P&P) to provide specialized, effective treatment services for offenders. Staff is collaborating with P&P, the Linn County Sheriff's Office, Juvenile Department, Mental Health, and District Attorney's Office in implementing community corrections strategies funded through HB 3194.

Treatment for Addicted Parents: In order to provide effective treatment addressing the special needs of addicted parents and their children, LCAD treatment staff work closely with community partners, including DHS Child Welfare, the Family Treatment Court, DHS Self-Sufficiency, Family Tree Relief Nursery, and LBCC.

Housing Assistance: LCAD continues its close collaboration with CHANCE and Oxford House Chapter XIX in providing affordable drug-free housing to addicts in recovery, and participates in the 10-Year Plan to End Homelessness Committee.

Regional Collaboration with IHN-CCO

The Alcohol & Drug Program Manager and staff participate in key IHN-CCO planning committees, including those focused on managing Health Transformation pilot projects, developing alternative payment methodologies, and privacy of electronic records.

LCAD is playing a key role in many regional health improvement efforts, including:

Regional Healthy Communities Steering Committee: LCAD provides prevention and addiction treatment expertise for this collaboration with community partners to leverage and coordinate several health-related grants and projects serving the region.

Universal Prenatal Screening Project: LCAD is assisting IHN-CCO by providing addiction treatment system expertise that will assist physicians in connecting their pregnant substance

abusing patients with a Peer Recovery Mentor in the medical office to facilitate engagement in treatment.

Mental Health Literacy Project: LCAD Prevention staff is collaborating with IHN-CCO, Samaritan Health Services, and Linn County Mental Health and Public Health to promote the 8 Dimensions of Wellness and reduce the stigma of mental illness. Strategies include community training on children’s mental wellness, Mental Health First Aid trainings, a community media campaign, and on-line training for medical staff.

Mental Health Promotion & Prevention Grant: LCAD Prevention staff is taking a lead role in a partnership with IHN-CCO and Benton & Lincoln County Health Services, to conduct a regional mental health promotion needs assessment, develop a strategic plan, and implement strategies for prevention and early intervention with mental illness.

Leveraging Resources for Linn County Residents

LCAD has successfully applied, or partnered with other agencies in applications, to bring additional resources to Linn County to enhance the local system of care, including:

- Mental Health Literacy Project (IHN-CCO)
- Mental Health Promotion & Prevention Grant (Addictions & Mental Health Division)
- Innovative Prevention Projects Grant (Addictions & Mental Health Division)
- Problem Gambling Prevention Special Project Grant (Addictions & Mental Health Division)
- Adult Drug Court Grant (Criminal Justice Commission)
- Alcohol & Drug-free Housing Assistance Grant (Addictions & Mental Health Division)

Challenges and Opportunities for 2015-16

LCAD will continue to take a leadership role in the IHN-CCO region to ensure the highest quality addiction prevention and treatment services for residents of Linn County and the region.

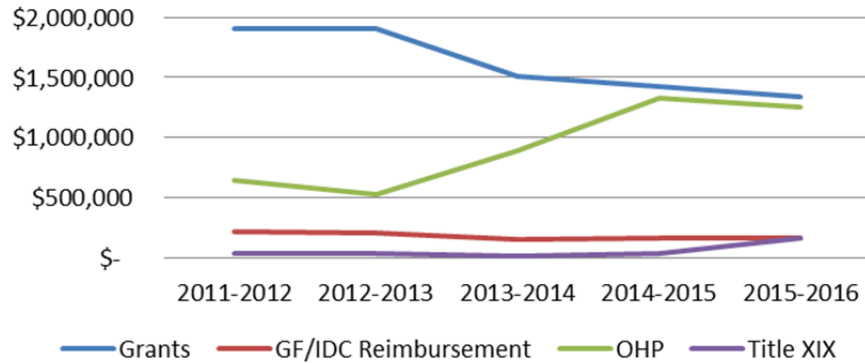
- For over 20 years, LCAD has provided van transportation to treatment groups from rural locations throughout the county. Plans are currently being finalizing for reimbursement by Ride Line for van rides provided to Oregon Health Plan members, making additional funds available for other needed services.
- LCAD will continue to work with the Oregon Health Authority for full Medicaid reimbursement of addiction services, including Peer Recovery Mentors.

- LCAD will work with IHN-CCO to develop an alternative payment model for sub-capitation of chemical dependency services. This would continue to allow patient choice among treatment programs, but provide LCAD with flexible funds to address gaps in the countywide system of care.

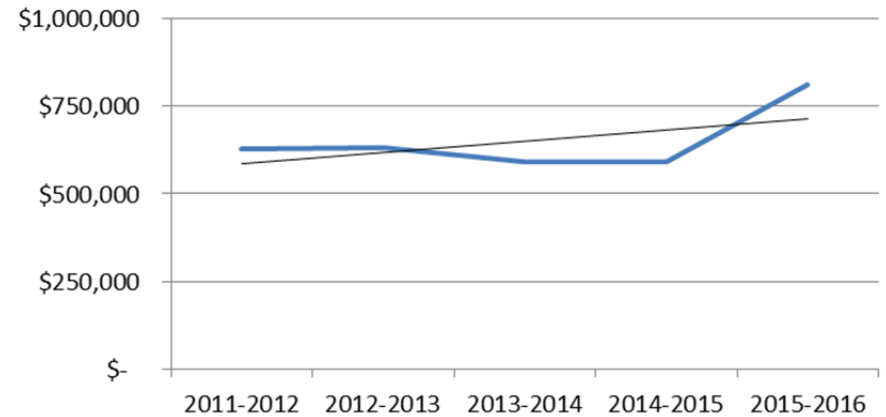
Alcohol and Drug Financial Dashboard

Trending Data Fiscal Year 2011-2012 through Projected Fiscal Year 2015-2016

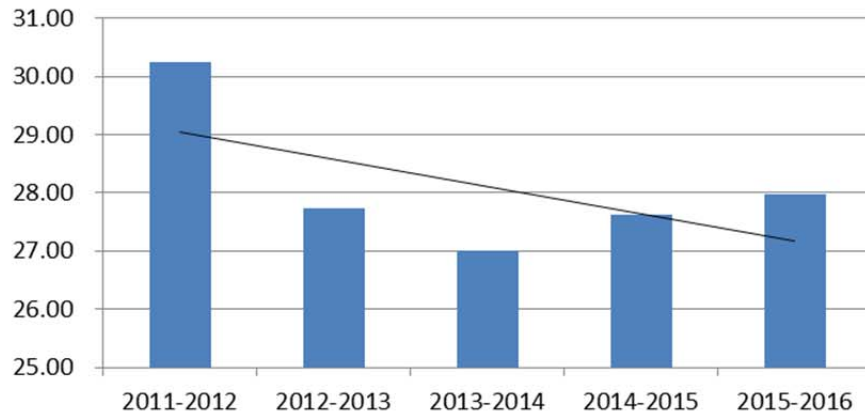
Alcohol & Drug Primary Funding Sources



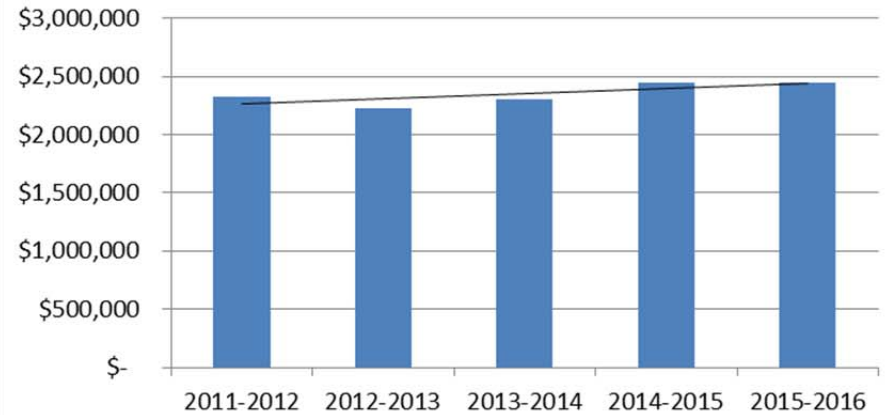
Total Expenditures (Less Personnel)



AD FTE



AD Personnel



Alcohol and Drug Clients Served

	AIT	YIT	SP	OP	ATS	YTS
2011-2012	666	164	1506	1430	17184	1576
2012-2013	613	177	1359	1868	17147	1515
2013-2014	603	160	1823	1274	18209	1671
2014-2015*	769	187	1450	1410	21256	1735

*2014-2015 Data through 3/31/2015 - Projected to FYE

AIT	Adults in Treatment
YIT	Youth in Treatment
SP	School Prevention
OP	Other Prevention
ATS	Adult Treatment Sessions
YTS	Youth Treatment Sessions

Public Health Program

Pat Crozier, Program Manager

Linn County Public Health focuses on prevention and uses select interventions to prevent the spread of disease and reduce health risks. Prevention strategies are population based and designed to improve the overall health of Linn County communities.

Over the past year, Linn County Public Health has continued to prepare for national accreditation and updated our Community Health Assessment, Community Health Improvement Plan and strategic plan. These documents may be viewed at Linn County Public Health Website, http://www.co.linn.or.us/health/public_health/ph.htm.

The Linn County Community Health Improvement Plan (CHIP) represents years of work in which the county and its partners utilized the Mobilizing Action through Planning and Partnerships (MAPP) framework to assess the health status of the county and build a plan to improve priority areas deemed to have the greatest impact and highest return on investment. Four key topic areas were prioritized by the MAPP committee based on collected health statistics, survey data, and key informant interviews. These areas include Access to Health Care, Maternal and Child Health, Chronic Disease, and Behavioral Health. These Health Impact Areas align with those of our county partners in Lincoln and Benton counties as well as the collaborative, community based work of the InterCommunity Health Network Coordinated Care Organization's (IHN-CCO) Community Advisory Council and its local advisory committees. Our CHIP document is derived from literally hundreds of hours of work by community members and consumers of health care delivery system services. It is "owned" by those who have actively participated in our work and is truly community based product and effort. It exemplifies community engagement. Further efforts are underway to align county, hospital and healthcare delivery system CHIPs into a regional guiding document funded by IHN-CCO grant to the Benton County Health Services Department.

Advances, Innovations and Collaborations:

- Established a MOU with Benton County to share Health Officer support between our two respective physicians.
- Applied and received a high energy and enthusiastic AmeriCorps Vista volunteer for the 2014-15 year. Projects include:
 1. Worksite Wellness
 2. Health Equity Alliance

3. Leading efforts to update current Community Health Improvement Plan

- Healthy WIC food purchases in Linn County alone bring in \$2,370,388 in income to local retailers. WIC Farm Direct Nutrition Program participants spend an additional \$11,780 on produce from local farmers at local farmers markets
- Dental services commenced in March 2015 for WIC clinics and include dental screening by a hygienist and application of fluoride varnish.
- Continue to provide space for Samaritan In-Reach clinic on Thursday evenings in Albany and Community Outreach on Tuesday evenings in Lebanon. These two programs provide essential medical and behavioral health services to Linn County indigent and uninsured populations
- Maintain our safety net clinic for reproductive health services.
- Linn County Health Advisory Council continues to work on updating the Strategic Plan for public health services (2012-2015).
- Created a Workforce Development Plan for the department which met our “accreditation” goal.
- Public Health Program Manager actively participates in the Early Learning Hub Backbone Alliance workgroup and continues Health Services Department role in the development of the Linn – Benton - Lincoln Early Learning Hub.
- Public Health Program successfully completed our triennial review/audit by the State of Oregon Public Health Division with exemplary marks in all areas.
- Continue to pursue grants to enhance or augment healthcare services to Linn County residents, including:
 - Soroptimist International of Albany grant for \$15,000.
 - Health Equity Alliance grant for \$9,000.
 - Sodium Reduction in Communities for \$102,000 (2 years).
- Successful collaboration with hospitals, EMS and sheriff on active Ebola planning.
- Provide multiple practicum and internship opportunities for student nurses and nurse practitioners from LBCC, OHSU, Chemeketa Community College, Linfield, and University of Portland and dietetic interns through Utah State University distance internship.

Regional collaboration with IHN/CCO:

- Public Health Program Manager and multiple staff participate in Regional Healthy Communities Steering Committee. The collaboration has provided opportunities to work closely with Benton County, Lincoln County, IHN/CCO, and a variety of other community partners to leverage additional resources and better serve our community.
- Successfully collaborations with Benton and Lincoln Counties and IHN/CCO include:
 1. CDC Public Health Associate (2 years)
 - a. Year 1: Regional Community Health Assessment Alignment Project
 - b. Year 2: Regional Immunization Project.
 2. Community Prevention Program Grant (CPP):
 - a. Tobacco Focus
 - b. Major component has been working with a regional clinical team to address tobacco use in a systematic way.
 3. Strategies for Policies and Environmental Change Grant (SPArC)
 - a. Tobacco Focus
 - b. This grant is focused on addressing tobacco use among pregnant women and creating tobacco free social service agencies.
 4. Sustainable Relationships for Community Health (SRCH)
 - a. Focus is on developing innovative new models of care for heart disease, diabetes and pre-diabetes specifically using evidence based Community Self-Management Programs (SMPs).
 - b. This grant provides the opportunity for facilitated discussions and technical assistance to engage cross-sector leaders involved in health system transformation.
 5. DST Colorectal Cancer Screening Grant (CRCS)
 - a. Increase colorectal cancer screening regionally.
 - b. Combining a social marketing campaign, *The Cancer You Can Prevent*, the latest screening technology, and clinical and community outreach to increase access to and utilization of effective screening.

6. DST Tri-County Maternal Health Expansion Project

- a. Tri-County collaboration work in maternal child health.
 - b. Grant to hire public health nurse for home visiting services.
- Working with Benton and Lincoln Counties on Targeted Case Management leveraged program contract for Maternal Child Health services with IHN/CCO.

Accreditation Update:

- Received a grant to pay for PHAB fees for the next five years.
- Submitted all documents from the 12 domain areas in November 2014.
- Site visit from National PHAB will occur on July 8-9, 2015.

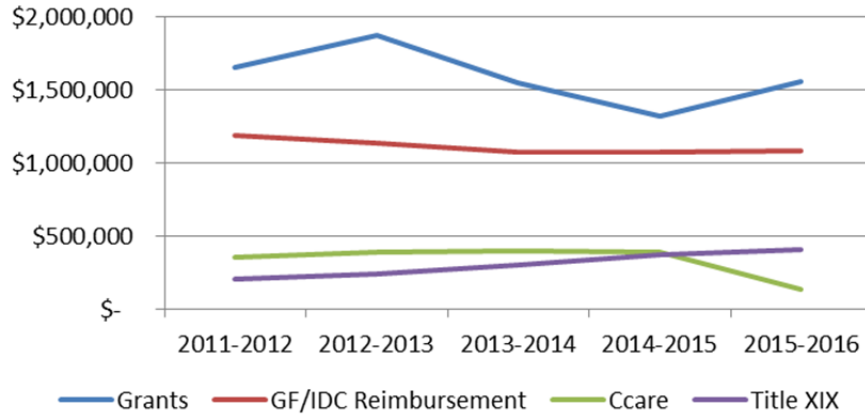
Challenges and Opportunities for 2015-2016:

- Monitor changes to local Public Health supports and infrastructure in relationship to the Oregon Health Authority and Oregon Legislature's restructuring of Oregon Public Health service delivery system under the Oregon Health Transformation and the "Future of Public Health" Task Force. Assess the impact of these State led changes to the Local Public Health Authority, historically the realm of Oregon counties
- Maintain ongoing local government collaboration through the established Regional Health Authority Memorandum of Understanding with Benton and Lincoln counties.
- Continue our collaborative work with IHN-CCO to enhance existing programs, create new and innovative public health services
- Partner with and support the IHN-CCO Community Advisory Committee (CAC) in support of the IHN-CCO Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP).

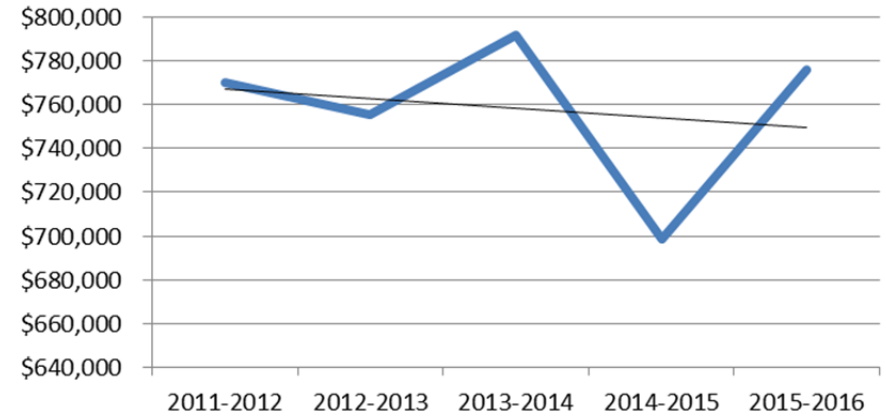
Public Health Financial Dashboard

Trending Data Fiscal Year 2011-2012 through Projected Fiscal Year 2015-2016

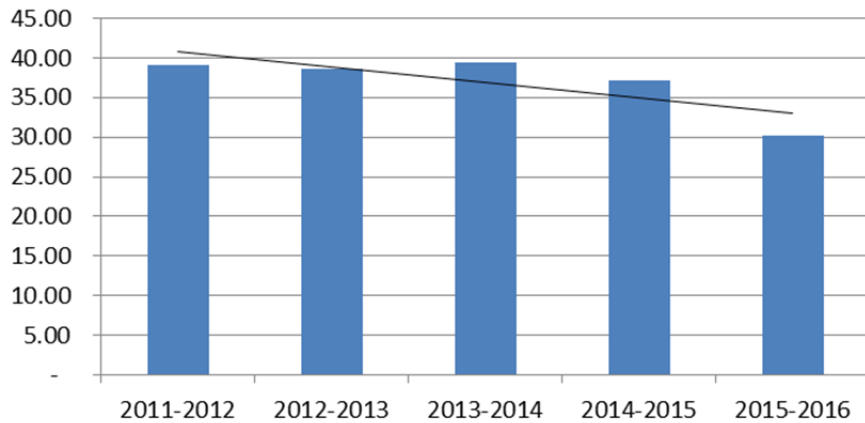
Public Health Primary Funding Sources



Total Expenditures (Less Personnel)

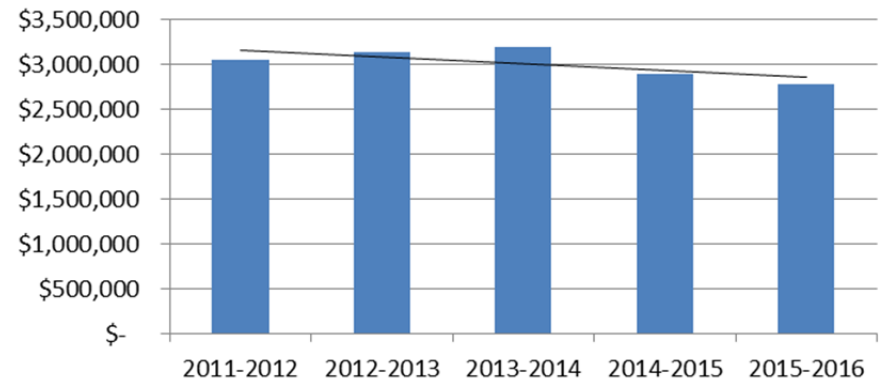


PH FTE



PH Personnel Costs

Reflective of Decrease in Personnel - Staff Cuts



Public Health Clients Served

	RH	WIC	STI	IMM	CD	VS*
2011-2012	2247	6052	613	1350	819	4547
2012-2013	2070	6021	511	1101	942	4546
2013-2014	2082	5810	511	801	868	4704
2014-2015*	2072	5858	499	677	976	5785

*2014-2015 Data Through 3/31/2015 - Projected to FYE

RH:	Reproductive Health
WIC:	Women, Infants and Children
STI:	Sexually Transmitted Infection
IMM:	Immunizations
CD:	Communicable Disease
VS:	Vital Statistics: Certificates Issued

Health Information Technology Program

Ken Brayton, Program Manager

The Linn County Department of Health Services Information Technology department (LCHS-IT) provides highly specialized information technology support to the following Linn County departments as well as our interface with the Linn County Information Technology Department that serves all county departments with the exception of the Linn County Sheriff's Department which operates independently:

- Health Administration
- Mental Health
- Public Health
- Developmental Disabilities
- Alcohol and Drug
- Environmental Health

A unique knowledge and training is required by LCHS-IT employees in electronic medical records, medical billing practices, environmental permitting, data sharing, reporting and complex regulatory processes enable the County's health departments to improve productivity, efficiencies, comply with regulatory practices in a timely and efficient manner and ensure the security of our network and protected health information. Through the active pursuit of new technologies and automating time-consuming manual processes, we assure the quality, security, and escalating demands for interoperability, exchange of information and the informational and support needs of our department's clinical and administrative staff. There is a growing expectation of collaboration and electronically shared information and communication at all levels of health care (Counties to State, Counties to CCO's, Providers to Counties/State, and Citizens to Counties). The growing demand for technology solutions that are flexible, timely and secure creates an increasing burden on our Health IT staff and require an additional investment on the part of programs to keep pace with the exponential reliance upon technology in support of department services.

Essential Functions

The County's health programs provide services to Linn County residents in multiple locations and multiple facilities. LHCS-IT is charged with providing operation support for 7 sites in Albany, Lebanon, and Sweet Home. More programs within the Health Services Department require remote access for clinicians and service coordinators to be able to work from the field as well as

sites where staff are “embedded” in or co-located with allied or partner agencies. Additional technical supports for equipment located in Springer House (a residential treatment program), the Linn County Correctional facility, the State Department of Human Services, Child Welfare office, and Samaritan Hospital Emergency Rooms in Linn County. Among the primary services provided by LCHS-IT are:

- Operational support for all of the health department computer technology requirements including, but not limited to: network administration (AD, DNS, file and print services), computer support (hardware and software), video conferencing, VoIP, Employee ID Cards and more.
- Ongoing development and support of RainTree, our electronic medical record (EMR) application.
- Development and support of OnSite, the Environmental Health septic system application.
- Development and support of numerous specialized applications and reports built with Microsoft Access, Microsoft SQL Server, and other tools.
- Provide data sharing and reporting functions to multiple Federal agencies, including the Centers for Medicare & Medicaid Services (CMS), Medicaid Management Information System (MMIS).
- Provide data sharing and reporting functions to multiple State agencies, including Addictions and Mental Health Division, Division of Medical Assistance Programs, Office of Health Information Technology, the State Public Health Division and more.
- Provide local staff education and support for the State of Oregon’s secure messaging application, CareAccord.
- Provide technical support and integration projects in partnership with IHN-CCO.
- Participate in committees and workgroups with other County and State agencies to provide expertise and guidance in the development of new technology initiatives and data sharing strategies and agreements.
- Work collaboratively with other Linn County departments to provide network access to General Services for VoIP phone systems, HVAC controls, alarms, and electronic locks; provide network access to the Surveyor for equipment located in East Linn;
- Maintenance of the Linn County Health Services web site (www.co.linn.or.us/health)

Challenges

Aside from the above listed support functions, the Health Services IT Department faces increasing growing information technology demands in the coming years to keep pace with numerous health information exchange initiatives between organizations locally, regionally and statewide. Secure data transmission to hospitals, labs, state agencies, IHN-CCO are complex time consuming and in many instances at the forefront of technology. LCHS IT staff must embrace ongoing technical advances and education in a continual learning environment.

It is imperative that we upgrade RainTree, our departments EMR (Electronic Medical Record) in order to accommodate mandated changes to billing, diagnostic, financial reimbursement, meaningful use, and other externally imposed changes in our operational infrastructure. This conversion is challenging and complex and will require additional staffing and resources to accomplish. Realignment with changing business requirements and processes coupled with a redesign of the EMR has made the conversion complex.

Environmental Health Program

Rick Partipilo, Program Manager

The Environmental Health Program provides services in the areas of licensing, permitting and community health. In each area we have inspection and regulatory responsibilities. We leverage our resources through education, collaboration and partnerships.

Licensing

- Inspect food service establishments, tourist facilities, and public pools and spas,
- Conduct plan reviews of new or remodeled facilities, and provide technical assistance to owners, licensees and contractors, and
- Issue licenses and inspect operations to ensure compliance with standards.

Examples of education, collaboration and partnership:

- Provide online food handler training in partnership with Lane County,
- Certify food establishments to provide in house food handler training,
- Coordinate review of new licensed facility construction with city community development offices, and
- Collaborate with OSU Extension on dissemination of food safety information.

Permitting

- Evaluate development plans involving on-site wastewater treatment systems,
- Conduct plan review of proposed facilities, and provide technical assistance to owners, permittees, and contractors, and
- Issue permits; inspect construction, operation, and maintenance of systems to ensure compliance with standards.

Examples of education, collaboration and partnership:

- Partner with service industry on efforts to provide and disseminate information regarding onsite wastewater treatment systems to home owners,
- Consult and coordinate with cities on nuisance abatement issues, and
- Collaborate with realtors, developers, lending institutions, HUD, etc., to disseminate information on rural property development standards.

Community Health

- Monitor community public water systems and provide technical assistance to help operators meet federal safe drinking water standards,
- Assist Public Health Nurses with disease investigations,
- Recommend solid waste services and fees, and ensure compliance with statewide recycling goals,
- Investigate and resolve citizen complaints involving acute or potential health hazards,
- Conduct Environmental Health surveys and assessments, and community outreach, and
- Provide third party certification inspections of community programs such as child care, Head Start, after school and summer food programs, elderly nutrition and others, upon request.

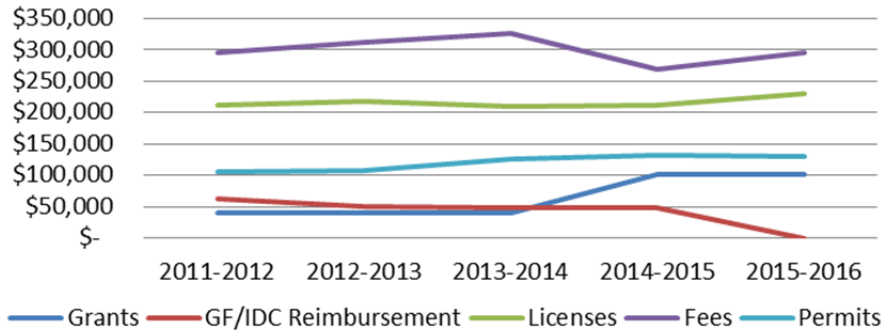
Examples of education, collaboration and partnership:

- Coordinate rabies quarantine with health care providers, veterinarians, law enforcement, animal shelters, diagnostic labs, and OHA,
- Facilitate Solid Waste Advisory committee with participation of cities and industry. in planning services, standards, and rates,
- Partner with cities of Lebanon, Scio, Harrisburg, Halsey, Brownsville, Tangent, Sweet Home, Business Oregon, HUD, and non-profit housing service to provide no interest, deferred payment loans to low-moderate income households for housing rehabilitation,
- Collaborate with other County departments, fire districts, State offices (OLCC, ODOT), and cities in the review and permitting of Outdoor Assemblies,
- Collaborate with County departments, fire districts, other Counties and State offices (OHA, OEM), cities, and non-profits in developing and exercising emergency response plans, and
- Collaborate and partner with cities, community organizations, State and Federal agencies (DEQ, Business Oregon, EPA) on brownfields site assessment, remediation, and community outreach.

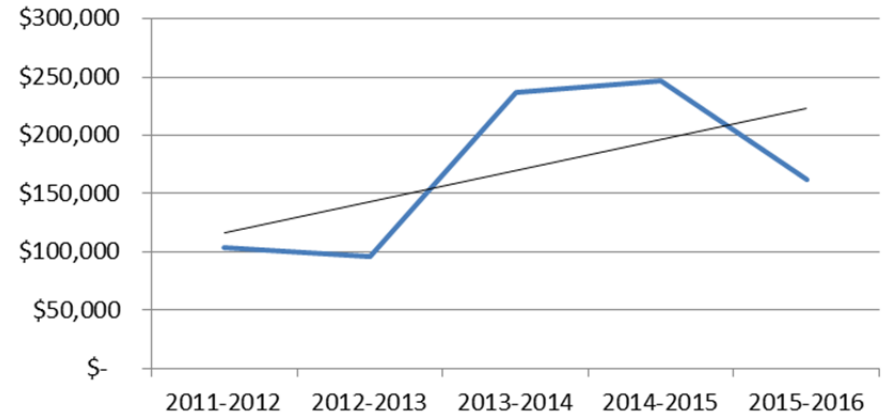
Environmental Health Financial Dashboard

Trending Data Fiscal Year 2011-2012 through Projected Fiscal Year 2015-2016

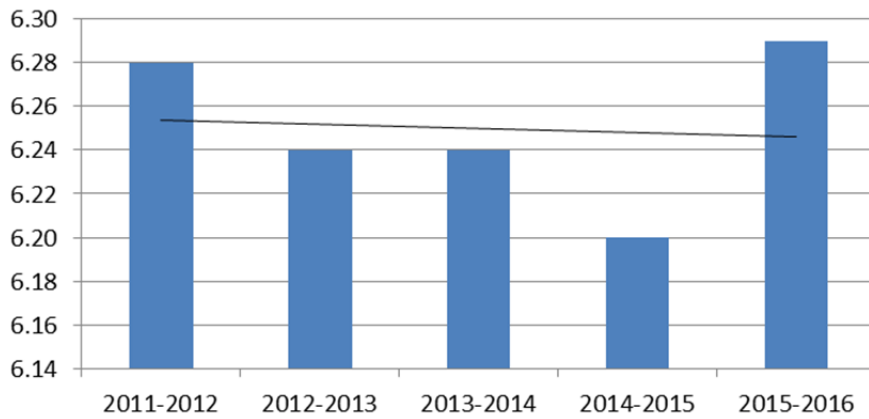
Environmental Health Primary Funding Sources



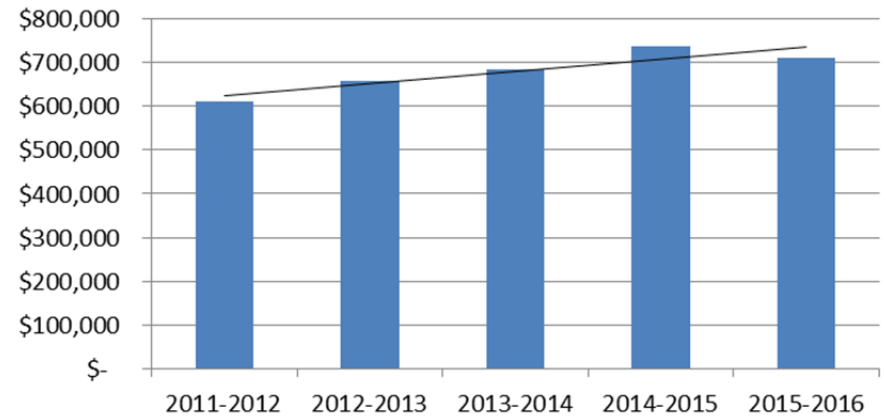
Total Expenditures (Less Personnel)



EH FTE



EH Personnel



Environmental Health Clients Served

	Permits	Licenses	Com. Health	Public Water
2011-2012	554	1030	421	324
2012-2013	568	1109	430	318
2013-2014	547	1170	420	232
2014-2015*	477	545	275	161

*2014-2015 Data through 3/31/2015 - Projected to FYE

2015-2016 Health Services Leadership Team

