

# Department of Health Services

2017-2018 Budget Presentation



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Authored by: Health Services Leadership Team

# Linn County Department of Health Services

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## 2017-2018 Budget Presentation

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## Health Administration

*Frank Moore, Administrator*

The Oregon Health Transformation, the Modernization of Public Health and the State Department of Human Services, Developmental Disabilities Office's revamp of the "K Plan" each and all continue to drive Health Services' programs of Mental Health, Public Health and Developmental Disabilities respectively. To this point, the impact on the Alcohol and Drug Program and Environmental Health Program is not fully discernable. Looming large on the horizon is the specter of the 2017 Oregon Legislature's quest to mitigate the impact of a \$1.8 billion shortfall and the congressional pursuit of repeal, revision, refinement of the Affordable Care Act. Both political "processes" portend an unstable financial environment for healthcare moving forward. Particularly for local government.

The Oregon Health Authority has, in essence, relegated local government to gradually diminishing roles in the "system" of healthcare in Oregon. County based behavioral health services have been redefined by the OHA as safety net service providers and are now merely referred to by OHA leadership as stakeholders and/or community based providers.



Under the "Modernization of Public Health", the OHA has finally acknowledged that the one player in public health that has not stepped up with funding is in fact the State of Oregon.

"Oregon's current governmental public health system is primarily funded through county general funds and through categorical federal grants, which are often limited in flexibility and not always responsive to local need in Oregon. Because these federal funds are specific in project scope, these investments do not allow governmental public health to focus strategically on the types of public health programs that can help everyone in Oregon achieve optimal health. Any serious consideration of modernizing the public health system in Oregon must include a dedication of robust and sustained state funding to a core package of public health programs and capabilities. However, the current state investment into the public health system consistently ranks below the national median for per capita funding with Oregon currently ranked 46th in the country for per capita funding (\$13.37 compared to a median of \$27.40)." (HB 2348 (2013): Task Force Report Future of Public Health Services Executive Summary Modernizing Oregon's Public Health System)

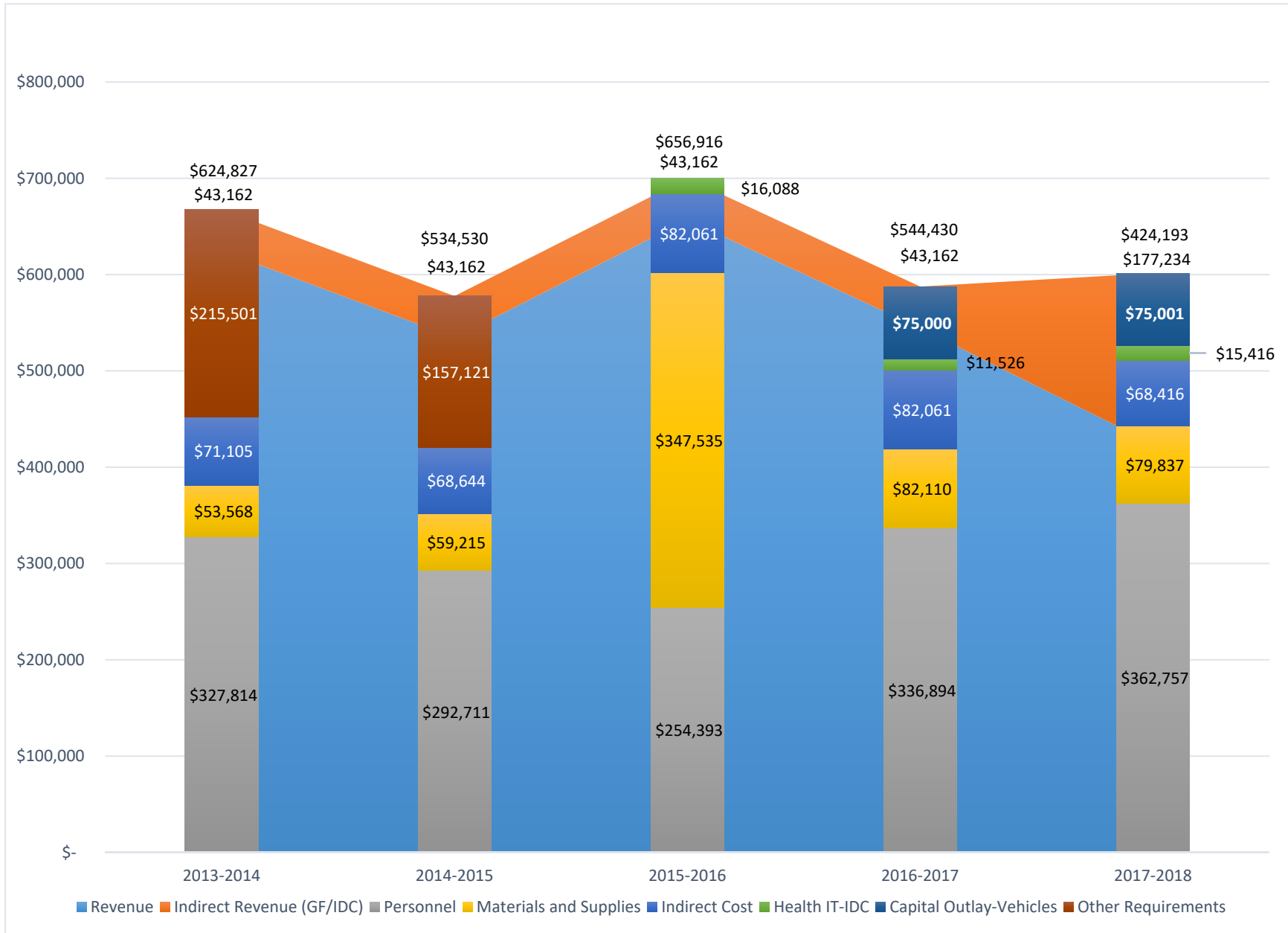
Under the Office of Developmental Disabilities, when Oregon “wed” itself to the “K Plan” for developmental disability services a biennium ago, the State quickly discovered it had not adequately estimated the fiscal impact to Oregon of the K Plan implementation. The State cannot financially sustain and fully support those eligible for K Plan Services through the Center for Medicare and Medicaid Services (CMS). The changes made were good. Oregon merely cannot afford the enhanced service and expanded eligibility.

The next 12-18 months under these respective initiatives present a daunting and challenging time for all of local government, including the programs of Linn County Department of Health Services. Redefinition and reconfiguration of the role of local government programming will be at the mercy of influences far beyond local government. The challenges will be fiscal and will be fueled by Oregon’s relatively unilateral redefinition of local government’s role with respect to health and human services delivery. The concept(s) of the Local Public Health Authority and the Local Mental Health Authority and the utility of such responsibility, vested in local county elected officials, will be challenged, directly or indirectly by the decisions made by the Oregon Legislature and the state agencies who have financially and administratively redefined the historic “partnership” between local government and the State.

Despite these not infrequent competing opportunities and threats, the staff of Linn County Health Services have continued to place quality care and responsive, accessible service delivery first and foremost. Program growth and enhancement continue, particularly under our relationship with our local coordinated care organization (CCO), InterCommunity Health Network (IHN-CCO). Our relationship with our CCO has transitioned more and more to “performance based contracts”. Measures of staff productivity (efficiency), quality of care and timely access continue to drive our quest as the Linn County Department of Health Services values our relationship with those we serve.

The “Triple Aim” lives.

# Health Administration Financial Dashboard



## **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 149.27 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.

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 (ACT), 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 Psychiatric Security Review Board placements, 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 12 positions in 2016 to meet access demands. In 2016, LCMH served 4,893 clients providing 56,346 hours of clinical services. As of January 2017, Linn County Mental Health had 4,673 clients actively enrolled in services.

### **Crisis Services**

- Crisis and Admissions are offered utilizing a model entitled, “Open Access”, meaning individuals may “walk in” for intake appointments without prior scheduling to provide immediate access to services. The admissions team in Albany added an additional staff member, totaling 2 FTE for open access, to accommodate increased community demands for service. In addition to open access, our clinics in Lebanon and Sweet Home also have scheduled intakes available for clients referred by primary care providers. Cases are triaged as assessed for acuity and clinical urgency.
- Crisis Services continues to provide outreach assessments in Albany, Lebanon and Corvallis hospitals for any individual experiencing a mental health crisis. This service is offered 24 hours a day, 365 days a year. In 2016 the Crisis Team provided 2,372 emergency evaluations. The crisis team added an additional staff member bringing the

total to four full time crisis workers to address increasing crisis demands in our community and better assist partnering agencies such as hospitals and law enforcement.

- A Crisis Mobile Response and Crisis Respite Services grant was awarded to LCMH in 2016 funding one additional full time Master's level clinician to augment "in community" in crisis response. This position provides direct supports to law enforcement in the community to appropriately divert individuals from incarceration and hospital admission, as indicated by the assessed need. This additional position expands the current Mobile Crisis Team, which currently consists of a full time QMHP and a full time QMHA. This expansion was made possible through a joint effort with Benton County Mental Health in pursuit of similar funding which complements our interagency response. In addition to supporting local law enforcement, this grant also provides outreach to individuals with mental illness who live in local homeless shelters and congregate living sites.
- LCMH was awarded a Jail Diversion grant in 2016, which has funded three new positions. These positions include a full time QMHP and QMHA, alongside a part time Peer Support Specialist. These staff enhancements support greater communication with Linn County Circuit Courts to identify people with legal challenges primarily due to a mental illness. The purpose of this grant is to intervene and, as appropriate, divert individuals with a mental illness from the criminal justice system
- LCMH provides a full time Mental Health Specialist to the Linn County Correctional facility to perform mental health assessments, provide treatment to inmates with mental health issues and offer ongoing behavioral health consultation to jail staff and leadership. As part of this partnership with the Linn County Sheriff, we also provide medication management services with a Psychiatric Nurse Practitioner to identified, incarcerated men and women. These staff provided 1,284 distinct contacts to Linn County Jail residents in 2016.

### **Adult Services**

- The LCMH Supported Employment Program operates through our Community Support Services (CSS) program. An additional Supported Employment Specialist (SES) was added in January 2017. One SES is serving only the ACT team through the ACT expansion grant; one is serving East County. The SE program currently serves 53 consumers who are affected by severe and serious mental illness, 13 of whom are currently employed. We have a waitlist of 100 individuals with mental illness who are seeking employment. Our

newest specialists will be increasing the amount of clients that they serve to 20 each which will decrease the waitlist to 80.

- In prior years, CSS partnered with Benton County Behavioral Health for two grants for Rental Assistance Services (RAS), one administered by Benton County and one by Linn County. Linn County has 27 housing slots, 5 of which are for EASA clients. The remainder is for individuals with severe mental illness. A QMHA and a Peer Support Specialist make up the RAS team. Finding housing for our clients is a challenge in that there is not enough available housing in most parts of Oregon. Currently, the RAS team has 2 slots that will be filled within days and 6 more housing opportunities actively being sought.
- From January 2016 to the present, LCMH's Adult Abuse Investigator (the Quality Assurance Specialist under the CI team) completed 7 comprehensive investigations and reports on suspected abuse of vulnerable adults with mental illness or behavioral health challenges, or completed suicides, with 2 pending at this time. There were 27 additional screenings that did not meet criteria for full investigation and 25 death summary reports, with 4 more pending. The outcomes of these investigations have helped make system changes where needed to further protect residential consumers with mental illness. The LCMHS Abuse Investigator and Supervisor provide annual training for all Mental Health staff regarding mandatory abuse reporting, as well as training new employees as a part of their QI training.
- The Community Integration Team (CI) manages funding through the Adult Mental Health Initiative (AMHI), currently known as The Choice Model, in order to assist individuals with mental illness to live in the most integrated, community based level of care appropriate. The AMHI portion of the CI team is comprised of a licensed therapist as the Exceptional Needs Care Coordinator and a Quality Assurance Specialist. The team developed and maintains an AMHI reporting database, manages residential referrals and facilitates transitions from the State Hospital to community based residential care or independent community living. The AMHI team continues to have an ongoing, active relationship with IHN-CCO regarding adult residential procedures.
- The CI Team works with the Oregon Health Authority, Health Services Division to sustain compliance with Oregon Administrative Rules (OAR) and provide ongoing supports and monitoring of Linn County's residential mental health programs. The team also participates in the licensing of six Linn County established mental health residential treatment homes, facilities and one mental health foster home, as well as providing supportive monitoring of eight additional APD or DD licensed Adult Foster Homes in Linn County in collaboration with the Linn County Developmental Disabilities Program.



- CSS CI team provided administrative support and oversight for the Center for Medicaid and Medicare Services, Home and Community Based Services program under the 1915(i) Waiver for 24 individuals with severe and/or serious mental illness receiving “habilitative” supports of up to 21 hours per week per individual served and 30 individuals receiving Personal Service Worker (PSW) services 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 42 individuals. The ACT team collaborated with Benton County to request an ACT expansion grant for the region and were awarded a two year grant in the amount of \$498,606 dollars. This expansion will add four additional positions and enable the ACT team to serve up to 75 total clients. Linn County ACT team scored one of the highest fidelity scores in the state of Oregon in 2016. The fidelity reviewers noted areas of strength included extensive outreach efforts in the community, frequency of home visits by multiple team members, collaboration with client’s natural supports and care coordination with other health care providers. Clients actively enrolled in ACT services have substantially lower utilization of and need for inpatient hospitalization.
- The Adult Outpatient Program (AOP) has partnered with the Samaritan Family Medicine, Geary Street Clinic and other Patient Centered Primary Care Homes to support integrated physical and behavioral health services.
- The Adult Outpatient Program (AOP) is providing ACT beyond Pain (Pain Management) groups in Primary Care Clinics, the YMCA and in local hospitals, in addition to our Mental Health Clinics. The purpose of these groups is to assist individuals in managing their pain and develop “mindfulness skills” to keep pain in perspective. The groups are offered every ten weeks and are promoted throughout the Linn- Benton-Lincoln region. Participants in these groups have been able to reduce pain medication and improve their overall functioning. Primary Care Clinics have been receptive to this approach and we continue to receive requests for more groups.
- The Adult Outpatient Program (AOP) is participating in a Performance Improvement Project (PIP) with the Samaritan, 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

- LCMH has expanded school-based treatment for children. Currently 100% of Albany Schools, 85% of Lebanon Schools, and 95% of Sweet Home Schools are being served on site by Linn County Mental Health staff.
- Early Assessment Support Alliance (EASA) provides fidelity care and support to an average of 12 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 to children and families provide "Wraparound Services" to fidelity with empirically established national standards. The Wraparound Team serves an average of 30 clients/families with high mental health acuity and an additional average of 30 clients/families annually in the care and custody of the DHS.
- At DHS – Child Welfare, collocated LCMH staff complete mental health assessments for all youth ages 0 to 18 who are in 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. This intensive interactive program served 25 children and their families in 2016.
- Linn County offers Collaborative Problem Solving (CPS) groups throughout Linn County. Collaborative Problem Solving (CPS) is a strengths-based culture, curriculum, and communication style, focused primarily on building parental skills and positive interactions. This method involves working with children to identify challenging behaviors and/ or situations and creates a plan with the family and their children to help them be successful. CPS groups are strengths-based, focusing on building positive interactions between children and parents, using skills of empathy within that process to understand the needs of the child.
- Linn County offers 10-week groups every quarter, currently in Albany, Lebanon, Brownsville, and Sweet Home. In addition to the parent-focused groups we also added a teen group which is currently providing coaching and supports to an average of 12 youth. Linn County has 50 plus volunteers who meet weekly to support the groups. Within the past year, Linn County has served approximately 325 different families and more than 700 individuals through our collaborative problem solving groups.

### **Regional collaboration with IHN-CCO and other community partners:**

- Linn County Mental Health actively participates in the Benton County based Regional Health Collaborative .This committee provides multiple service related opportunities to collaborate with IHN-CCO, Benton County, and Lincoln County, to leverage additional resources and better serve our community.
- Other successful collaborations with IHN-CCO and community partners include:
  1. IHN-CCO Regional Planning Council (RPC) which supports community involvement and input to the operations of IHN-CCO.
  2. The IHN-CCO Mental Health Advisory Committee (MHAC), with representatives from Linn, Benton and Lincoln Counties, Samaritan Mental Health, IHN-CCO and community stakeholders, guides the behavioral health priorities of IHN-CCO and its providers.
  3. The IHN-CCO Quality Management Committee's (QMC) purpose is to monitor care provided to IHN members and to assure that they receive the highest integrated 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 focuses on payment strategies that are transformative and promote innovation.
  6. IHN-CCO Delivery System Transformation (DST) Steering Committee 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 was established to guide the development of a regional, secure health information exchange.
  8. Assertive Community Treatment (ACT) Committee provides guidance, oversight and supports collaboration between the three counties and IHN-CCO.
  9. The ACT supervisor participates in two workgroups, the Traditional Health Worker (THW) and Health Disparities workgroup. These groups help consumers navigate the healthcare system, improving access and addressing barriers to services in pursuit of truly integrated care.
  10. The Parole and Probation Re-entry Committee consists of representatives of Community Corrections, LCMH, DHS, CHANCE and Oxford. The committee staffs

individuals within the Linn County Correctional facility or releasing from the Oregon State Penitentiary and orchestrates “wrap” services to inmates being released from prison and our local correctional facility in order to seamlessly transition appropriate individuals to coordinated community based resources.

11. Linn and Benton County partnered to establish a Federally Qualified Health Center to the Sweet Home community, expanding primary care services integrated with behavioral health services to residents of the Sweet Home community. Services are co-located.
12. LCMH Child Outpatient Program staff participate in the Youth Services Team (YST) as part of a multi-disciplinary team supporting children and families throughout Linn County. These include Scio, Santiam Canyon, Lebanon, Sweet Home and Albany. The committee reviews cases, facilitates referrals, and coordinate services.

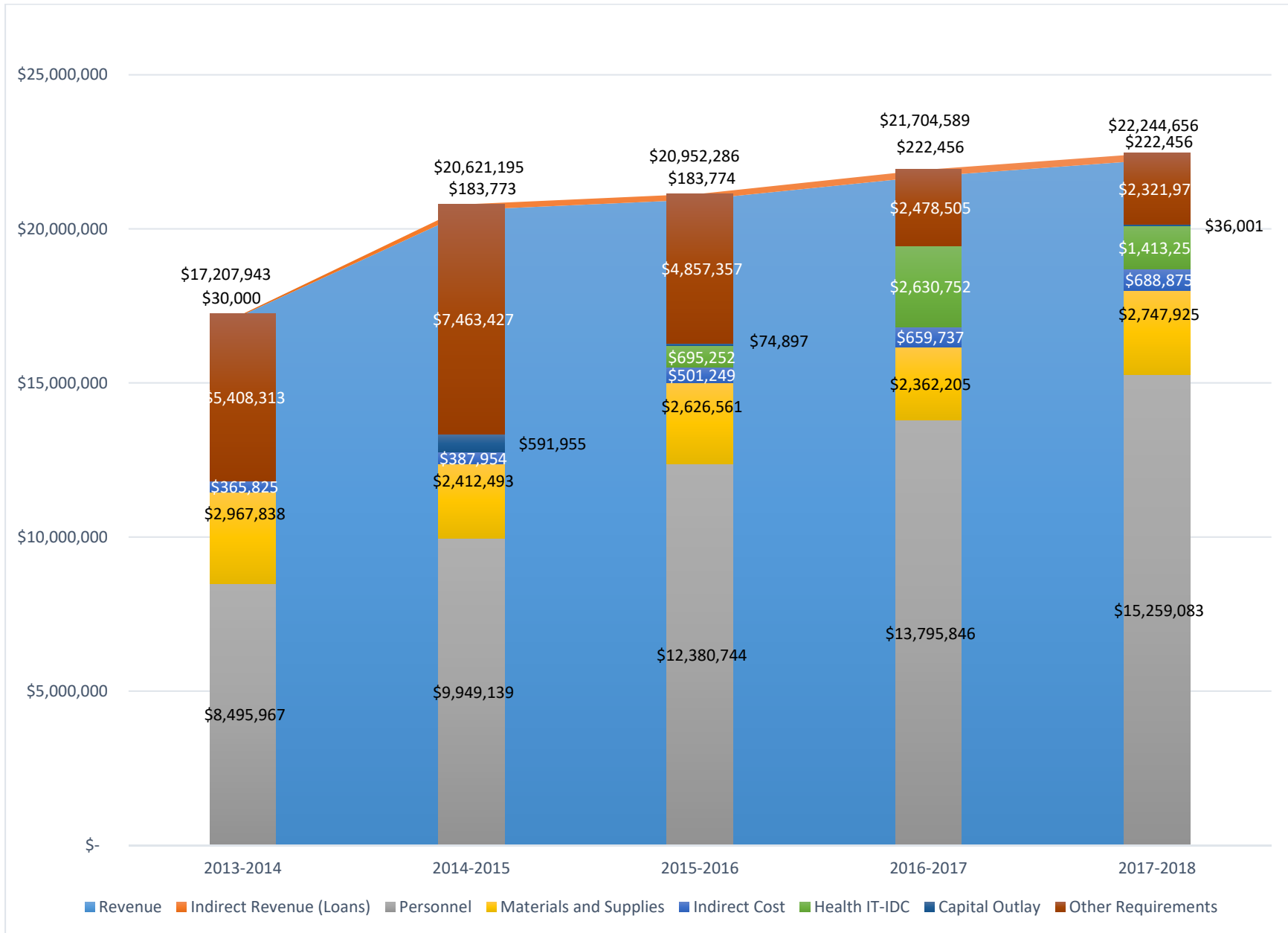
**Challenges and Opportunities for 2016-2017:**

- 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 expand access to create new and innovative mental health service delivery models.

<b><i>Mental Health Clients Served</i></b>				
	Children	Adults	Crisis	Seniors
2011	1327	2913	1285	149
2012	1420	2783	1165	164
2013	1506	2768	1050	161
2014	1243	2967	1047	169
2015	1358	3447	1365	238
2016-2017*	2004	5479	1587	387
2016-2017 SFTs**	4263	2900	785	217
2016-2017 Total***	6,267	8,379	2,372	604
*2016-2017 Data through 3/31/2017 - Projected to FYE				
**Soft Touch Encounters – Began in 2016-2017				
***Total of All Services (Projections and Soft Touches)				

# Mental Health Financial Dashboard



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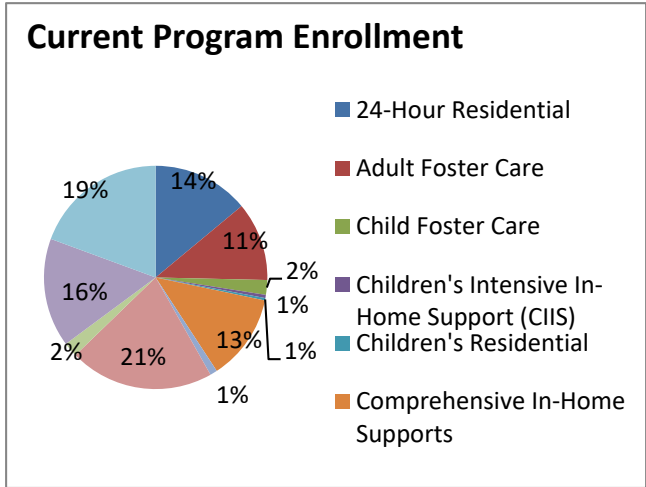
\*Other Requirements – Operating Contingency

## Developmental Disabilities Program

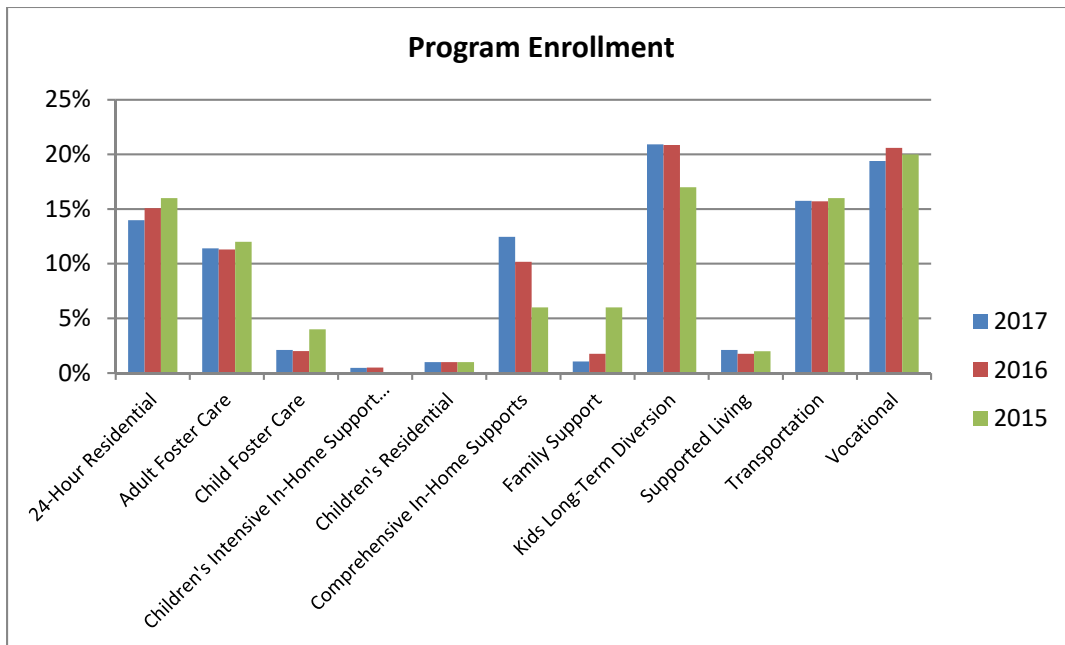
*Jeff Sneddon, Program Manager*

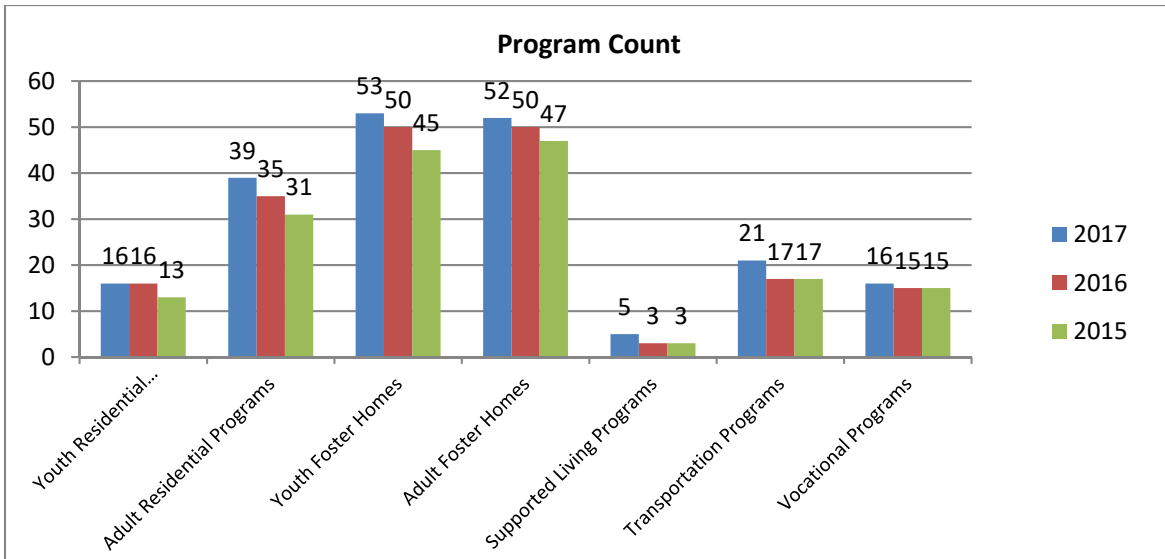
Community First Choice State Plan (K-Plan) and Employment First Policy. There has been a slight increase in not only individuals served but also in overall enrollments in programs:

- Generated over \$47.4 million in program service dollars
- Created over 1,000 living wage jobs for individuals with developmental or intellectual disabilities
- Developed, licensed, and monitored individual placements in:
  - 16 Youth Residential Programs
  - 39 Adult Residential Programs
  - 53 Youth Foster Homes
  - 52 Adult Foster Homes
  - 5 Supported Living Programs
  - 21 Transportation Program
  - 16 Vocational Programs

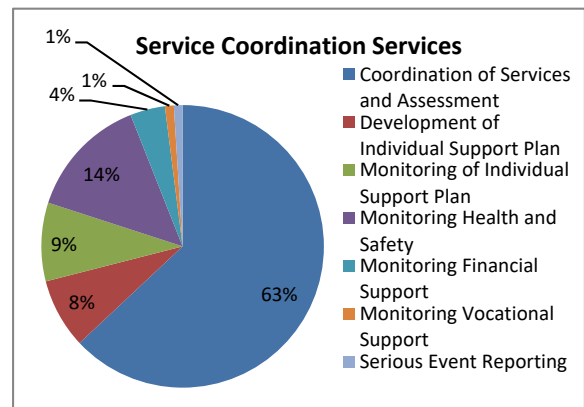


Coordinated and enrolled over 600 providers to support In-Home Programs for adults and youth to remain in their home and reduce costly out of home placements.





Each Service Coordinator (SC) assures individualized services that are person centered and achieve maximum independence and true community integration to these Linn County residents. We have implemented a new Individual Support Plan that provides a continuum of services as well as continuity of care across program enrollments. While the initial roll-out has been a tremendous workload, the long term efficiency and ease of consumers accessing services will be much timelier.



Linn County has also moved toward implementation of the Employment First Initiative. The Governor's Executive Order has been implemented. We have established an Employment First Team which consists of representatives from employment providers, local school districts, Vocational Rehabilitation and family members. We are enhancing working relationships and assessing community needs for individuals with developmental disabilities. Our initial assessment has ascertained a lack of capacity in providers for job development, discovery, and programming for the local school transition programs.

With the continued expansion of DD services, the program has transitioned from generalized caseloads to more specialized caseloads determined by age and service option. The reorganization has yielded two teams, Youth Services and Adult Services. These teams ensure specialization is focused upon individual choice, promotion of individual rights, and more stringent regulation of licensing and certification of homes.

In addition, we actively collaborate with State and local law enforcement agencies to protect, investigate and ensure the health and safety of Linn County residents. In the last year we have:

- Screened 78 allegations of potential abuse
- Investigated 19 cases

These relationships are further developed as we continue to participate with local providers and families in emergency planning and preparedness. As “K Plan” driven implementation efforts continue, there is a concern with regard to the fiscal sustainability of the DD service delivery system in Linn County and statewide. Efforts are coordinated to ensure highest quality services are provided to these vulnerable individuals while equally attending to the rising cost per case. Additionally, we are seeing a significant issue in workforce development and provider capacity.

Our regional efforts continue as we work with individuals and families who episodically have exceptional care needs and deserve responsive, flexible and timely provided integrated services. Active participation and collaboration are foundational to Linn County’s service delivery and supports to individuals and families who face the daily challenges of developmental disabilities.

- Community Care Network: Multisystem network of medical, educational, and social service agencies supporting children, youth and families with exceptional medical needs
- Linn County Employment
- Systems of Care Wrap-around Initiative (SOCWI): Regional approach to support youth and families with complex supports needs who need coordinated services from multiple agencies
- Community Care Coordination Committee: A local committee of youth families, providers, and agency partners who provide oversight and authorization of Wraparound and intensive outpatient mental health services
- Linn Council for Integrated Child and Family Services: A multi-agency partnership with the focus on child and youth serving agencies
- Youth Services Team: team organized by school districts to support individuals with complex support needs
- Student Threat Assessment Team: Multi-agency team to address critical incidents in local schools
- Early Learning Hub: Regional governing board to address the needs and programming to assist youth and families in becoming ready for school.
- Adult Service Team: Multi-agency team to address the needs of adults with in our geographic area and support needs.
- Re-entry meeting: Community based team to address re-entry needs of individuals who are re-entering the community from forensic placements
- Youth Transition Program: Local and regional programs focused on employment and transition services for youth who are interested in moving toward integrated employment



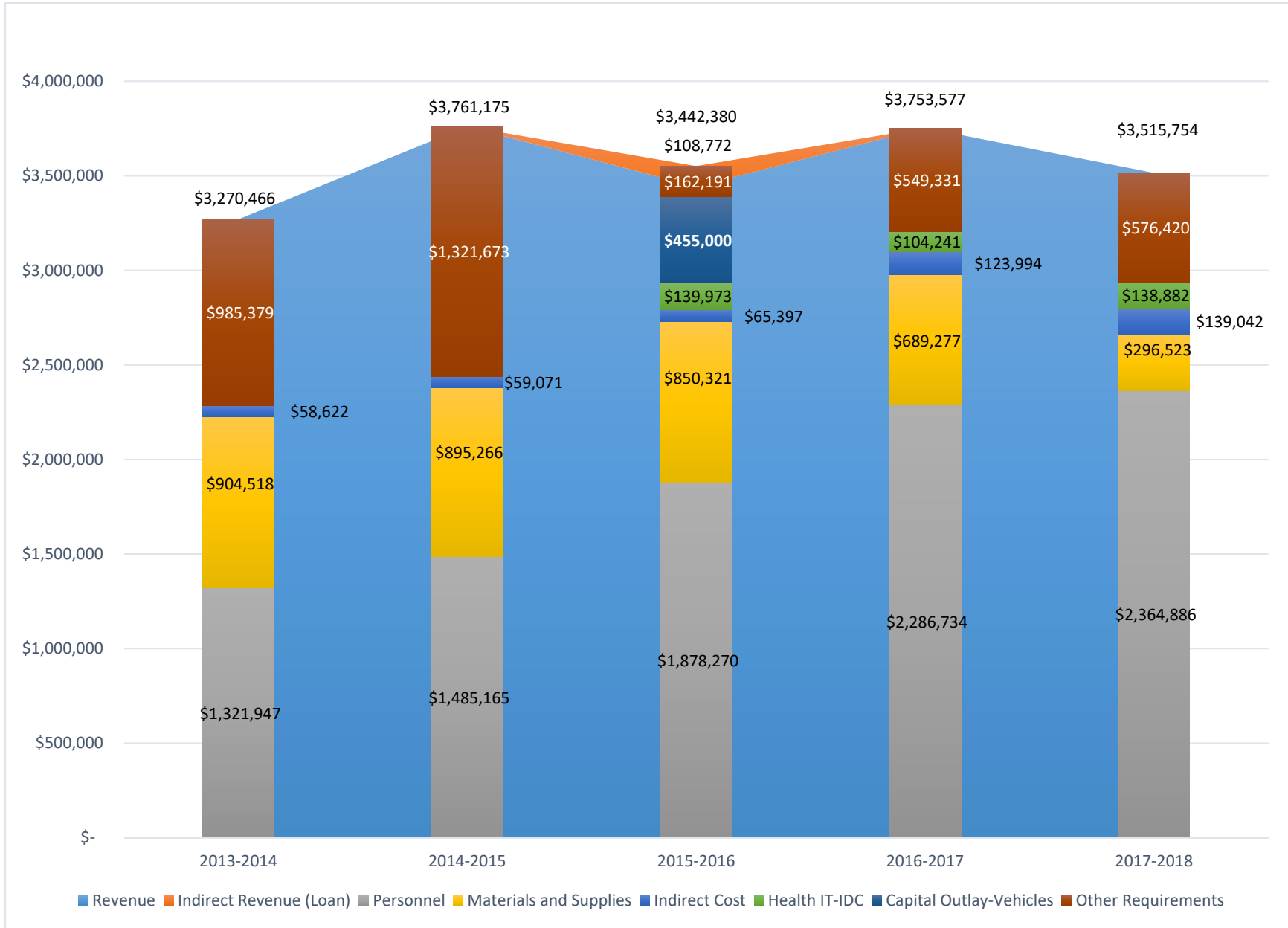
- Multi-Disciplinary Team: Statutorily required abuse lead by the district attorney’s office to review allegations of abuse, protective services, and investigations for vulnerable adults

**Opportunities for 2017-2018**

- Continue to develop and implement Community First Choice and the Employment First Policy.
- Collaborate with other Health Department Programs, CCO, and stakeholders to develop a Community Based Needs Assessment and Biennial implementation plan.
- Increase opportunities with State and Regional programs to continue our efforts to provide services locally that embrace our community’s culture and vision.
- Continue to explore opportunities with other Health Services programs to increase overall Health Department program service integration and coordination of care.
- Continued development of our Advisory Board.
- Continue to implement HCBS Rules and work with State partners to ensure compliance.

<i>Developmental Disabilities Clients Served</i>		
	New Intake	Total Clients
2011-2012	47	724
2012-2013	93	747
2013-2014	87	842
2014-2015	132	776
2015-2016	133	909
2016-2017	187	1096
*2016-2017 Data through 3/31/2017 - Projected to FYE		

# Developmental Disabilities Financial Dashboard



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Other Requirements – Operating Contingency

## **Alcohol and Drug Program**

***Tony Howell, Program Manager***

The Linn County Alcohol & Drug Program (LCAD) provides behavioral health promotion and 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 assessing county-wide needs and gaps, and pursuing resources and strategies to further enhance an effective and efficient system of care.

Over the past few years, in coordination with Linn County Mental Health (LCMH) and IHN-CCO, the LCAD Prevention Program transitioned to a broader behavioral health focus from primarily substance abuse and problem gambling prevention to now form a shared Behavioral Health Prevention program with the Linn County Mental Health Program to include mental health promotion, with an enhanced focus on adolescent suicide prevention and reducing the stigma of mental illness in our community.

### **Community Collaboration Highlights 2016-17**

This year, LCAD continued our successful collaboration with local school systems and youth-serving agencies to improve the health of youth and families:

***Prevention Education:*** LCAD prevention specialists partnered with LCMH to provide community trainings in Mental Health First Aid and Youth Mental Health First Aid, and collaborated with participating school districts in developing a suicide prevention and response plan, including suicide prevention training for school staff. LCAD continued to partner 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 23 youth members of the Linn County Youth Council, Students Taking Action Not Drinking (STAND), representing **four** of the eight high schools in the county, in developing positive peer messages related to mental illness and substance abuse prevention, distributed in all school districts.

**Linn Council on Integrated Child & Family Services:** To coordinate and address gaps in services for local children and families, LCAD staff serves on the leadership team of the Linn 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 based treatment services, 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. This year, LCAD counselors have also been available to provide these services at local Boys & Girls Clubs.

**Youth Services Teams:** LCAD counselors actively participate in 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 through these efforts:

**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. Program staff work collaboratively with Linn County Community Corrections, the Linn County Sheriff's Office, Juvenile Department, Mental Health, and District Attorney's Office in implementing community corrections strategies funded through Oregon's Justice Reinvestment Act (HB 3194).

**Treatment for Addicted Parents:** In order to provide effective treatment to 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 the local Oxford House, Chapter XIX in providing affordable drug-free housing to addicts in recovery.

**Peer Recovery Mentors:** LCAD continues to work with CHANCE, Family Tree Relief Nursery, and Jackson Street Youth Shelter in developing a network of Certified Peer Recovery Mentors to

assist in more effectively engaging and retaining substance dependent individuals in treatment, and has successfully included credentialed peer mentors in recent grant pursuits/awards.

### **Regional Collaboration with IHN-CCO**

The Alcohol & Drug Program Manager and staff participate in key IHN-CCO planning and operational committees, focused on managing Health Transformation pilot projects, exploring alternative payment methodologies and assuring adherence to the standards of HIPAA and 42 CFR (2) protecting the privacy of electronic health records.

LCAD plays 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.

***Peer Recovery Mentors:*** LCAD has supported Family Tree Relief Nursery in working with IHN-CCO on funding mechanisms to support the use of Peer Recovery Mentors in medical practices to facilitate patients' engagement in treatment. This was especially successful in providing support to pregnant substance abusing women identified by their obstetrician.

***Mental Health Promotion & Prevention Grant:*** LCAD Prevention staff provide a lead role in a partnership with IHN-CCO, LCMH, 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 of those affected by mental illness.

***Chronic Opioid Safety Task Force (PainWise):*** The LCAD Program Manager participates in this regional effort, under the leadership of Samaritan Health Services, to reduce the incidence of overdoses from and addiction to prescription opioids.

### **Leveraging Resources for Linn County Residents**

LCAD 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 Promotion & Prevention Grant (Health Services Division)
- Project AWARE Grant (SAMHSA)
- Problem Gambling Prevention Special Project Grant ( Oregon Health Authority)
- Adult Drug Court Grant (Criminal Justice Commission)
- Alcohol & Drug-free Housing Assistance Grant (Oregon Health Authority)
- Justice Reinvestment Act Grant (Criminal Justice Commission)

- Samaritan Health Services Social Accountability Grant
- Medicaid transportation reimbursement for van transportation to treatment groups, through a new contract with the Cascades West Council of Governments RideLine.

**Challenges and Opportunities for 2017-18**

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

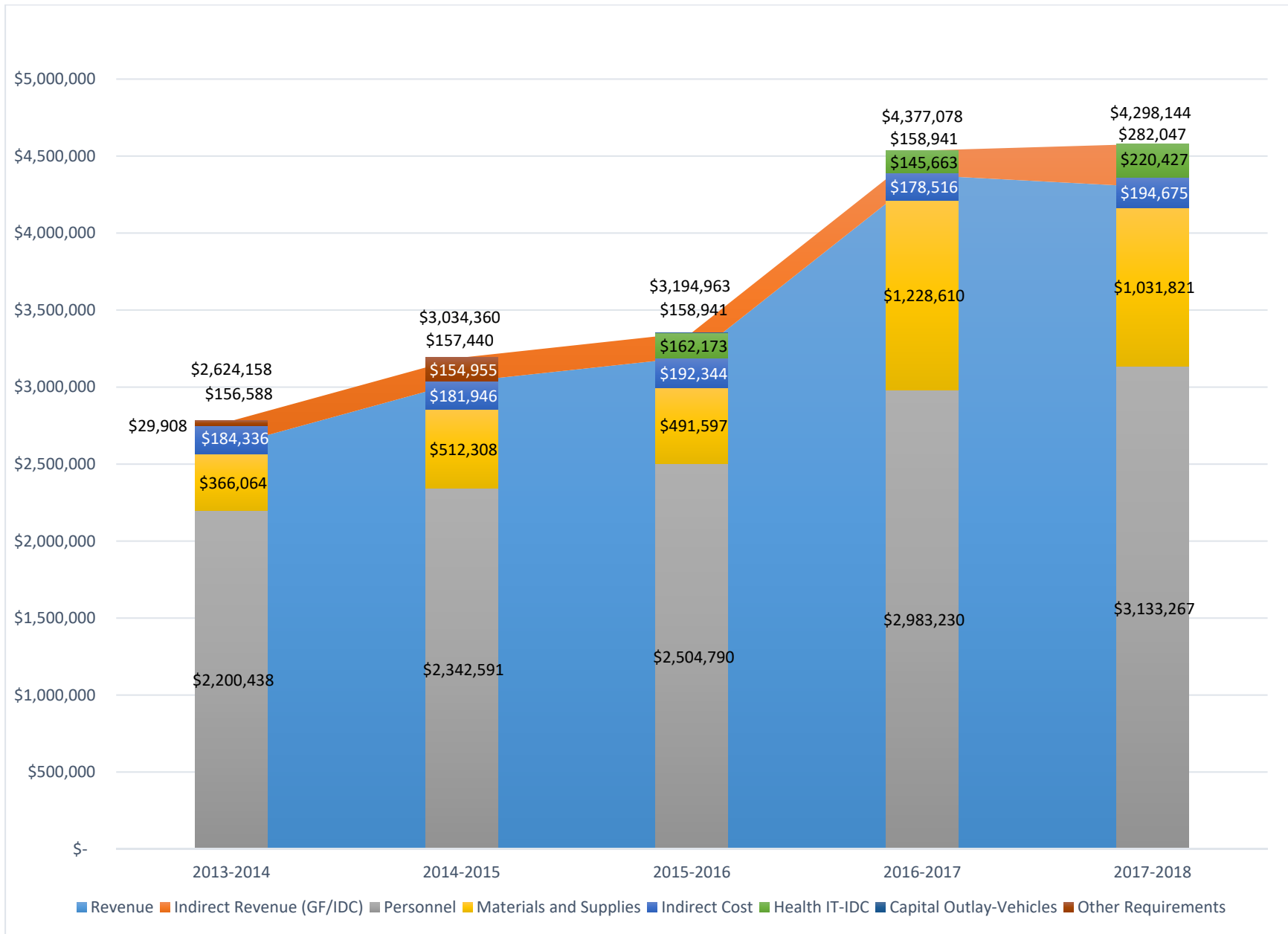
- LCAD will continue to work with the Oregon Health Authority for full Medicaid reimbursement of addiction services, including Peer Recovery Mentors.
- LCAD will work with regional and state partners to respond to changes in the health care system, including changes in Medicaid reimbursement, to ensure Linn County residents continue to have access to care and receive high quality services.

As changes in health care funding unfolds, LCAD will work with IHN-CCO to build on progress made this year to develop an alternative payment model for the 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.

<i>Alcohol and Drug Clients Served</i>						
	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	735	168	1604	1070	22109	1868
2015-2016	742	162	3587	1418	22131	1838
2016-2017*	817	184	3975	1337	23116	1884
*2016-2017 Data through 3/31/2017 - 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

# Alcohol and Drug Financial Dashboard



Other Requirements – Operating Contingency

## **Public Health Program**

*Glenna Hughes, Program Manager*

Linn County Public Health's (LCPH) primary focus is on protecting and improving the health of our communities through the promotion of healthy lifestyle choices and disease prevention. We are committed to healthcare equity, quality and accessibility that is fiscally responsible. These pursuits are realized through the implementation of educational programs, policy management, data collection and research, and of course patient/customer service. LCPH focuses on prevention and healthy lifestyles by developing interventions to contain and decrease the spread of disease and reduce health risks. Strategies are population centric and designed to improve the overall health of Linn County communities.

This last year, Linn County Public Health finalized its preparation for national accreditation and updated the Linn Community Health Assessment (CHA), Community Health Improvement Plan (CHIP) and strategic plan. The Regional Health Assessment collaboration between Linn, Benton and Lincoln counties was published and we'll move forward gathering additional data to move into the new fiscal year.

Each year the Linn County Community Health Improvement Plan (CHIP) is updated with this past year again assessing the health status of the county. The CHIP assists us in creating a plan to improve priority areas identified to have the greatest community impact and highest return on investment. With the input from our community members and advisory boards, the five areas of focus include: Access to Health Care, Maternal Health, 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 Health Transformation work of the InterCommunity Health Network Coordinated Care Organization's (IHN-CCO) which is driven by the IHN-CCO Community Advisory Council. The Linn PH CHIP is reviewed and renewed annually, as a guiding document demonstrating active community engagement and outcomes relevant to the Linn County community. The investment of time and commitment in our CHIP will launch LCPH into the next fiscal year with a solid platform of community engagement with a continued focus on program development, enhancing the health of our communities.

### **Advances, Innovations and Collaborations:**

- Continue MOU with Benton County to share Health Officer support between our respective physicians.
- Linn County Women, Infants and Children (WIC) Program continues to offer its families a new way to shop for WIC food benefits using an EBT (electronic benefit transaction) card. This service has been very successful.



- WIC staff participates in and offers leadership to the Linn Benton Lincoln Breastfeeding Coalition.
- Healthy food purchases by Linn County WIC participants at local retailers equaled \$2,069,880 in 2016. WIC Farm Direct Nutrition Program participants spent an additional \$15,540 on produce from local farmers at local farmers markets and farm stands.
- WIC continues to offer dental screenings and application of fluoride varnish by a registered and expanded provider dental hygienist (RDH, EPDH) during WIC clinics.
- We continue to provide space for the Samaritan InReach 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.
- Applied and received an AmeriCorps VISTA member for the 2016-17 year. Projects included:
  - Enhancing preparedness efforts with Development Disability, long term care and social services.
  - Development of a Community Organizations Active in Disaster (COAD) across Linn and Benton counties.
- Maintained safety net clinic for reproductive health and sexually transmitted disease (STD) services to primarily support Linn County uninsured, teens and undocumented populations who have no other options for services in Albany and East Linn County.
- Our Maternal Child Health Supervisor actively participates in the Early Learning Hub “Backbone Alliance” workgroup and continues Health Services’ supportive role in the development of the Linn Benton Lincoln Early Learning Hub and its activities.
- The Maternal Child Health Supervisor actively participates monthly with the Community Connections Network, which staffs and serves children in Linn and Benton Counties who are medically, mentally and developmentally compromised and in need of services. Funding for this project from Oregon Health and Science University will be ending in September of 2017.
- The Maternal Child Health Supervisor participates with a newly established team out of Lebanon, creating the Shared Plans of Care at the Samaritan Pediatrics group.

- LCPH staff work cooperatively with Community Services Consortium in their Healthy Homes Project to serve asthmatic children. We continue to pursue grants to enhance healthcare services to Linn County residents, including:
  - Soroptimist International of Albany grant for \$3,000 to support staff to utilize existing grant funds to help women without finances for cervical or breast cancer diagnosis and treatment.
  - Successful collaboration with hospitals, Emergency Medical Services and Medical Reserve Corp across Linn and Benton counties as part of mass casualty exercises and are pursuing enhanced relationships with existing and new emergency response partners.

**Health Promotion Team:**

The Health Promotion team focuses on promoting environments that support Linn County residents in eating better, moving more, and living tobacco free. The team works closely with partners throughout the county to promote evidence based solutions that benefit the health and wellness of our community.

- Provided technical assistance to social service agencies in adopting and implementing policy, system, and environmental changes related to establishing tobacco free policies.
- Partnered with community organizations and leaders to advance evidence based practices that promote system and environmental changes shown to reduce youth tobacco initiation and support tobacco cessation.
- Supported and educated local businesses in maintaining compliance with Oregon tobacco laws and regulations.

**Health Communities Program**

- Actively engaged regional and local community organizations and leaders to identify areas of opportunity for chronic disease prevention with a focus on policy, system and environmental changes.
- Provided technical assistance to community organizations and partners in adopting and implementing policy, system and environmental changes related to nutrition, physical activity, preventative screenings and chronic disease self-management programs.
- Supported the Linn County Wellness Committee by providing meeting facilitation and subject matter expertise.

### Regional collaboration with IHN/CCO:

- The Health Promotion Team participates in the Regional Healthy Communities Steering Committee. The collaboration has provided opportunities to work closely with Benton and Lincoln counties, IHN/CCO and a variety of other community partners to leverage additional resources and better serve Linn County communities.
  1. Sustainable Relationships for Community Health (SRCH)
    - a. Public Health Program Manager and the Health Promotion Team partner with Lincoln and Benton Counties, IHN-CCO, and Samaritan Health Services to advance and augment a regional infrastructure to promote evidence based strategies with demonstrated effectiveness in reducing chronic disease and promoting smoking cessation, particularly for populations experiencing health disparities.
  2. DST Colorectal Cancer Screening Grant (CRCS)
    - a. Combined social marketing campaign, *The Cancer You Can Prevent*, the latest screening technology, closed loop referrals in the clinical setting and clinical and community outreach to increase access to and utilization of effective screenings.
  3. DST Tri-County Maternal Health Expansion Project
    - a. Tri-County collaboration work on maternal child health.
    - b. Grant to hire public health nurse for home visiting services.
    - c. Working with Benton and Lincoln Counties on Targeted Case Management leveraged program contract for Maternal Child Health services with IHN/CCO.
    - d. Finishing evaluating the pilot Maternal Child Health Expansion and formalizing a model for Maternal Child Home Visiting.
    - e. Working with IHN on an Alternative Payment Methodology for Maternity Case Management services across the Tri-County region of Linn-Benton-Lincoln counties.
  4. The Linn County WIC Program applied for and was granted Delivery Systems Transformation (DST) funds to place a Spanish speaking international Board Certified Lactation Consultant (IBCLC) in the Samaritan Mid-Valley Pediatrics Lebanon office.

This position offers lactation consultations to underserved East Linn County residents with the goal of reducing barriers to successful breastfeeding.

5. MCH in collaboration with IHN-CCO: MCM PLUS
  - a. Working in partnership with IHN-CCO on Maternity Case Management services across the Linn County.
  
6. MCH Program: Family Connects Program
  - a. An Early Learning Hub Grant provided the opportunity for the addition of this evidenced based nurse home visit program out of North Carolina, a universal home visiting program for newborns and their mothers age 3 weeks to 6 weeks.
  - b. Includes a 12 point matrix to assess a family's total needs to "wrap" services and provide more comprehensive care.
  - c. Program targets support for families in order to reduce child abuse and neglect by providing support and resources during that vulnerable time period.

#### Reproductive Health and STD Clinics:

- Increased numbers of men in the past year have come to us for their STD testing and treatment with percentages of one percent of our clients 2 years ago now up to 12%. The decrease of Sexually Transmitted Disease in our county depends on testing and treatment for both men and women.
- As a safety net clinic for the citizens of Linn County, with a mandate from the Federal Government to serve all citizens despite their ability to pay, LCPH receives Federal Grant money on a per client bases of \$80. Additionally, this past year our billing capacity has increased and we are on several insurance panels for third party insurance billing. As for all years and always, LCPH accepts self-pay clients.
- The numbers for breast and cervical cancer preventive care have increased more than in past years. We have reinstated the statewide program to serve those clients fitting any of the following eligibility guidelines: no insurance, meets a specific FPL threshold, undocumented, have very high deductible insurance and those 64 and over without Part B Medicare. The program has also expanded the age to 21 and over who fit the criteria for assistance.
- Implementation of OCHIN/EPIC as our new electronic medical records has been a significant project with many advantages seen to date. The electronic medical record will allow improved areas of health for our client base as records are more accessible to all providers engaged in caring for the patient

**Accreditation Update:**

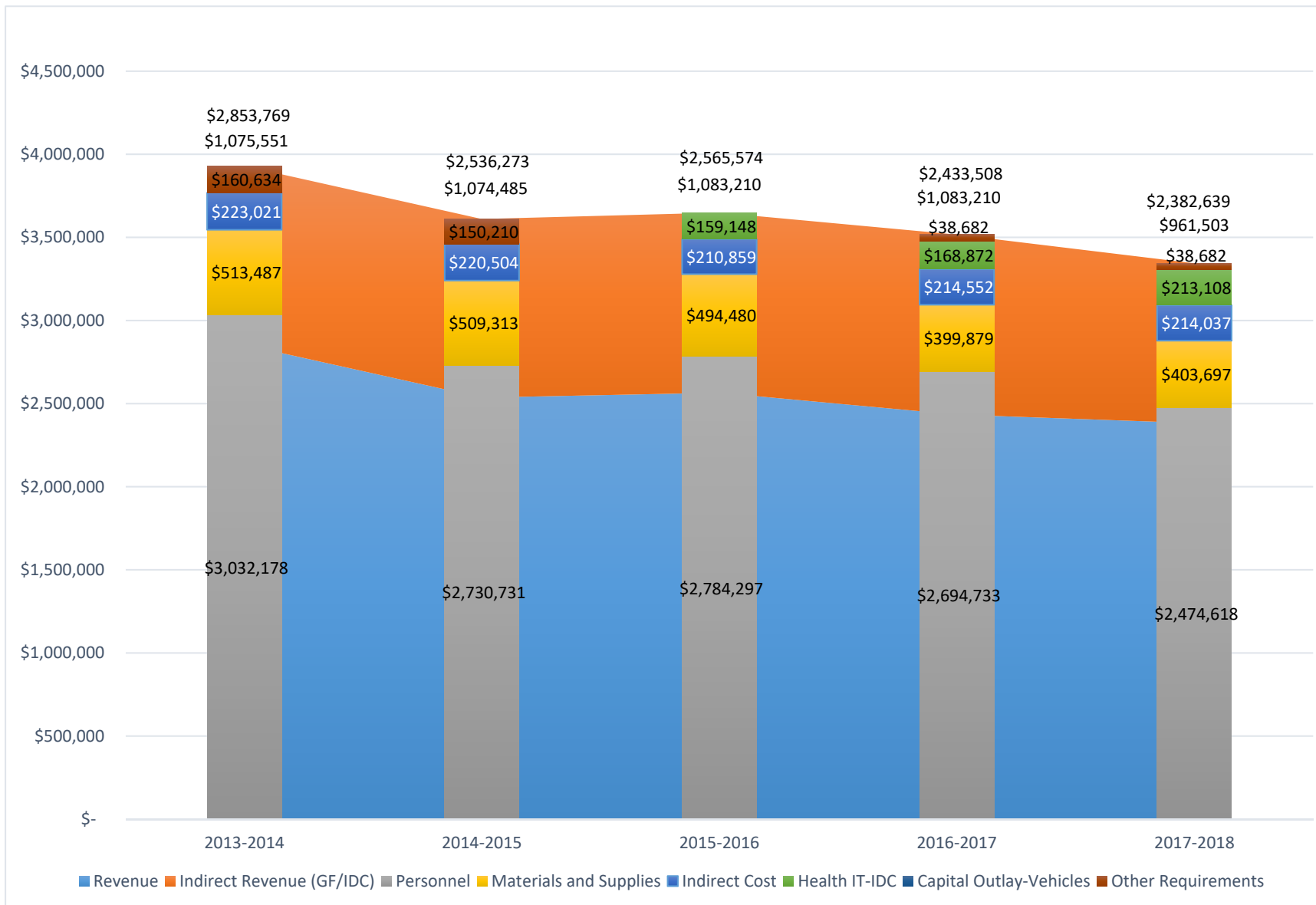
- Complete and awaiting word of successful accreditation for Linn County Public Health.

**Challenges and Opportunities for 2016-2017:**

- The Modernization of Public Health will continue to with a driving force with a focus meeting client needs across the healthcare system.
- Maintain ongoing local government collaboration through the established Regional Health Collaborative, and a continued Memorandum of Understanding with Benton and Lincoln counties.
- Increase our collaborative work with IHN-CCO to enhance existing programs, create new and innovative public health services and partnerships.
- 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).
- Be ever insightful of staff needs as they continue to provide services for our community members as the numbers below indicate:

	<i>Public Health Clients Served</i>						Definitions	
	RH	WIC	STI	IMM	CD	VS	RH	Reproductive Health
2011-2012	2247	6105	613	1350	819	4547	WIC	Women, Infants and Children
2012-2013	2070	6052	511	1101	942	4546	STI	Sexually Transmitted Infection
2013-2014	2082	6021	511	801	868	4704	IMM	Immunizations
2014-2015	1742	5810	585	1091	1058	4913	CD	Communicable Disease
2015-2016*	1636	5721	370	1053	1473	4330	VS	Vital Statistics
2016-2017*	1532	5490	480	705	788	1849		
2015-2016 and 2016-2017 Data represented is best guess at this time.								

## Public Health Financial Dashboard



Other Requirement – Operating Contingency, Loan Repayment

## Health Information Technology Program

The Linn County Department of Health Services Information Technology Department (LCHS-IT) provides highly specialized information technology support to the following Linn County Health Services programs 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:

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

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. Ongoing training and technical support enables the County's health services programs to improve productivity, efficiencies, comply with regulatory practices in a timely and efficient manner, ensure the security of our network and protect health information. Through active pursuit of new technologies and automating time-consuming manual processes, we assure the quality, security, escalating demands for interoperability, exchange of information and the informational and support needs of our department's clinical and administrative staff. There is growing demand for agency collaboration and electronically shared information and communication at all levels of Health Services operations. The need for technology solutions that are flexible, timely and secure creates an increasing challenge to Health IT staff. Remaining current with industry developments requires 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. LCHS-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" or co-located with allied or partner agencies. Additional technical support is also required 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. Primary services provided by LCHS-IT are:

- Operational support for all Health Services computer technology requirements including, but not limited to: network and server administration (network access and network security, user account creation, file and print services, e-mail administration), computer support (hardware and software), software licensing, 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](http://www.co.linn.or.us/health))

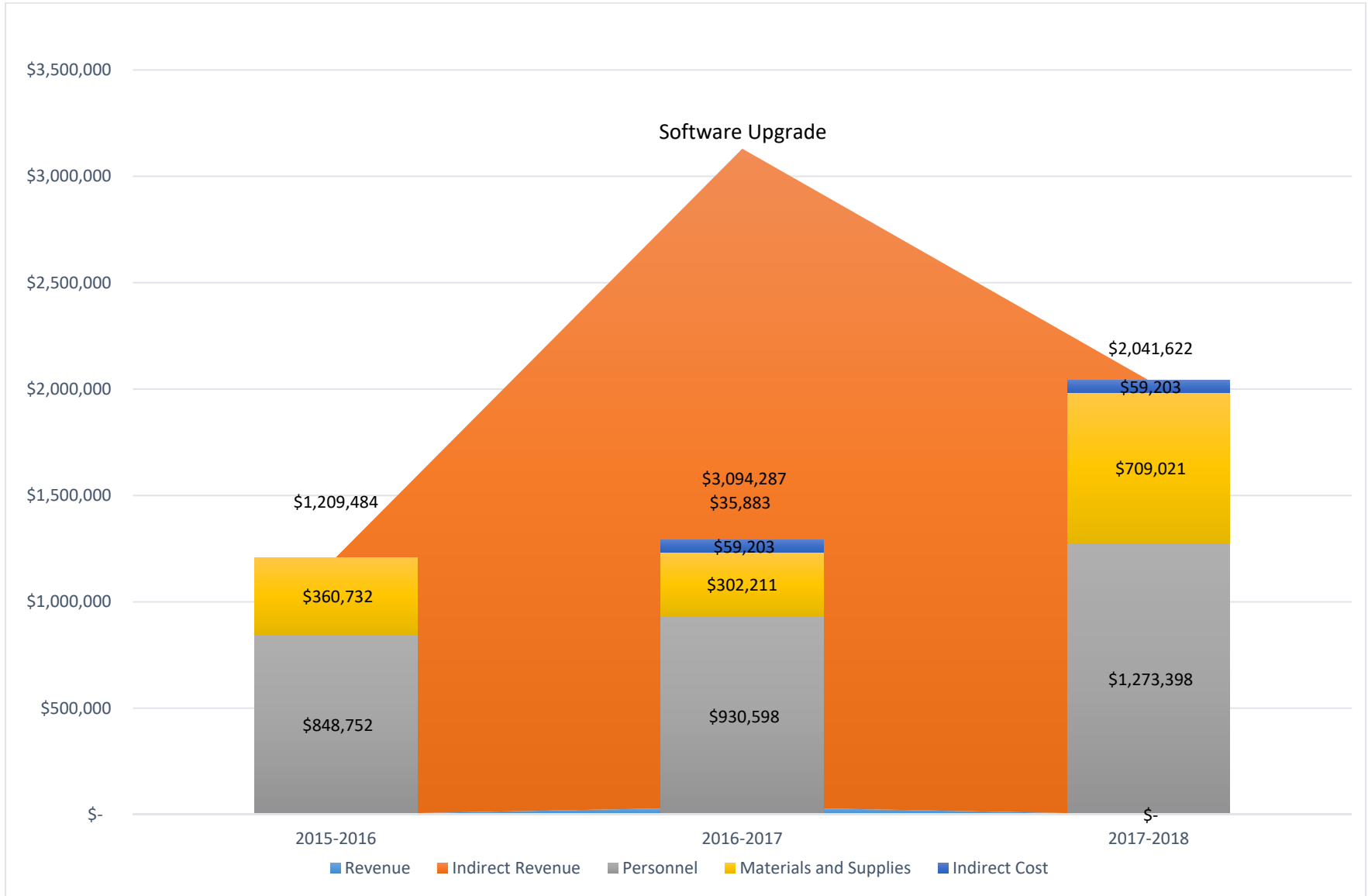
### **Challenges**

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 is 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.

## Health IT Financial Dashboard



## **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 health codes and 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 OHA on rule development.

### **Permitting**

- Evaluate soil suitability and site development proposals 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 health codes and standards.

Examples of education, collaboration and partnership:

- Partner with DEQ and service industry on rule development and dissemination of information regarding onsite wastewater treatment systems,
- 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 operators in meeting federal safe drinking water standards,
- Assist Public Health with disease investigations,
- Recommend solid waste services and fees, and ensure compliance with statewide recycling goals,
- Investigate and resolve citizen complaints regarding 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 upon request.

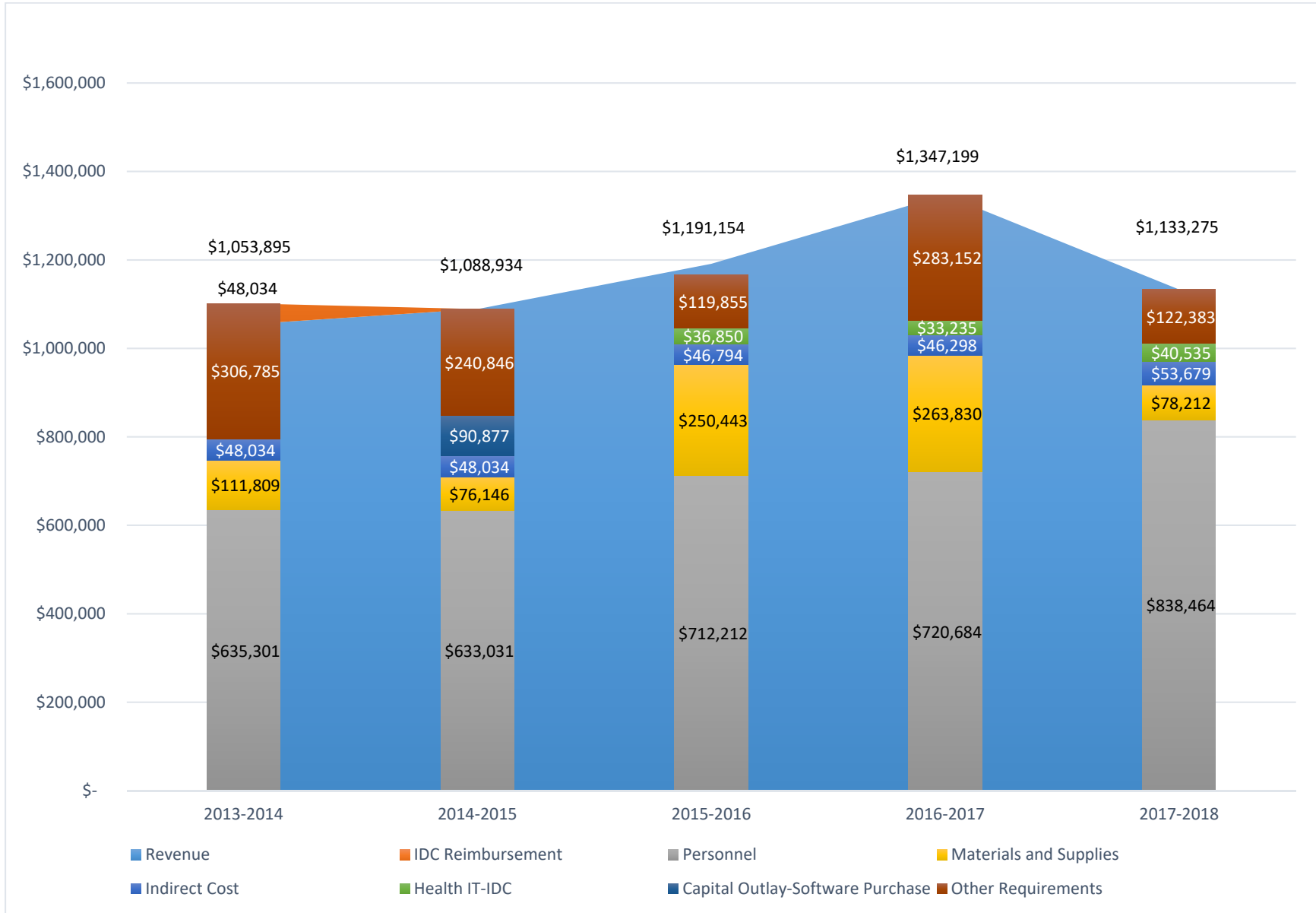
### Examples of education, collaboration and partnership:

- Coordinate rabies quarantine and prophylaxis with health care providers, veterinarians, law enforcement, animal shelters, diagnostic labs, OHA, victims, and animal owners,
- Facilitate Solid Waste Advisory committee with participation by cities, industry, and citizens. Develop recommendations for standards, services, rates, and City/County coordination.
- 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, and EPA) on environmental site assessment, remediation, and community outreach.

**Environmental Health Clients Served (FY End 6/30)**

Fiscal Year	Permits	Licenses	Comm. Health	Public Water
2011-2012	554	1030	421	324
2012-2013	568	1109	430	318
2013-2014	547	1170	420	232
2014-2015	602	681	397	212
2015-2016	705	971	434	235
2016-2017*	533	892	263	204
<b>*2016-2017 Data through 3/31/2017</b>				

## Environmental Health Financial Dashboard



**Linn County Department of Health Services  
2017 Leadership Team  
April 25, 2017**

