

**Josephine County, Oregon
2004-05 Operating Budget**

Mental Health Funds

	ACTUAL 2001-02	ACTUAL 2002-03	ADOPTED BUDGET 2003-04	PROPOSED & APPROVED BUDGET 2004-05	ADOPTED BUDGET 2004-05
General Fund - Mental Health					
Miscellaneous	\$ -	\$ 1,390	\$ -	\$ -	\$ -
Interfund Charges & Transfers	319,070	368,477	499,111	585,612	585,612
Total Revenues	319,070	369,867	499,111	585,612	585,612
Personal Services	707,805	818,551	534,757	657,374	657,374
Materials & Services	66,116	47,793	43,090	32,510	32,510
Interfund Payment for Services	91,559	47,744	53,089	28,452	28,452
Capital Outlay	1,928	392	899	-	-
Total Expenditures	867,408	914,480	631,835	718,336	718,336
Resources Required	\$ 548,338	\$ 544,613	\$ 132,724	\$ 132,724	\$ 132,724
Total Full-Time Equivalents	11.00	14.65	11.07	9.67	9.67

Jennifer Patton Memorial - Fund 242					
Miscellaneous	\$ 12,088	\$ 8,730	\$ 20,000	\$ 20,120	\$ 20,120
Beginning Fund Balance	2,545	5,225	1,000	-	-
Total Revenues	\$ 14,633	\$ 13,955	\$ 21,000	\$ 20,120	\$ 20,120
Materials & Services	\$ 9,110	\$ 6,974	\$ 20,000	\$ 19,885	\$ 19,885
Interfund Payment for Services	298	295	-	235	235
Capital Outlay	-	-	1,000	-	-
Ending Fund Balance	5,225	6,686	-	-	-
Total Expenditures	\$ 14,633	\$ 13,955	\$ 21,000	\$ 20,120	\$ 20,120

Mental Health - Fund 250					
Taxes	\$ 55,355	\$ 58,127	\$ 55,500	\$ 58,100	\$ 58,100
Intergovernmental	8,932,844	9,775,154	8,990,010	8,313,948	8,313,948
Fees & Charges for Services	305,430	642,491	986,703	639,855	639,855
Miscellaneous	485,569	215,098	62,400	-	-
Interfund Charges & Transfers	294,817	534,241	308,160	461,515	476,515
Beginning Fund Balance	1,077,327	1,397,694	1,475,669	961,524	961,524
Total Revenues	\$ 11,151,342	\$ 12,622,805	\$ 11,878,442	\$ 10,434,942	\$ 10,449,942
Personal Services	\$ 4,787,429	\$ 5,203,543	\$ 5,953,548	\$ 5,311,478	\$ 5,311,478
Materials & Services	1,242,245	1,183,858	1,127,698	557,234	572,234
Interfund Payment for Services	3,672,633	1,017,439	1,572,709	1,323,038	1,323,038
Intergovernmental Payments	-	2,929,585	3,221,587	3,193,772	3,193,772
Capital Outlay	51,341	294,033	2,900	-	-
Debt Service	-	52,268	-	49,420	49,420
Ending Fund Balance	1,397,694	1,942,079	-	-	-
Total Expenditures	\$ 11,151,342	\$ 12,622,805	\$ 11,878,442	\$ 10,434,942	\$ 10,449,942
Total Full-Time Equivalents	75.75	81.89	84.42	73.13	73.13

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	ACTUAL 2001-02	ACTUAL 2002-03	ADOPTED BUDGET 2003-04	PROPOSED & APPROVED BUDGET 2004-05	ADOPTED BUDGET 2004-05
Developmentally Disabled Services - Fund 251					
Intergovernmental	\$ 4,610,082	\$ 4,672,582	\$ 5,056,644	\$ 4,733,196	\$ 4,733,196
Miscellaneous	18,732	15,615	-	5,400	5,400
Interfund Charges & Transfers	-	50,342	50,819	-	-
Beginning Fund Balance	184,000	317,393	-	54,540	54,540
Total Revenues	\$ 4,812,814	\$ 5,055,932	\$ 5,107,463	\$ 4,793,136	\$ 4,793,136
Personal Services	\$ 925,701	\$ 1,039,373	\$ 1,067,834	\$ 1,107,386	\$ 1,107,386
Materials & Services	322,155	311,472	585,848	75,384	75,384
Interfund Payment for Services	3,238,783	87,766	84,454	80,891	80,891
Intergovernmental Payments	-	3,223,226	3,367,827	3,524,075	3,524,075
Capital Outlay	8,782	2,598	1,500	5,400	5,400
Ending Fund Balance	317,393	391,497	-	-	-
Total Expenditures	\$ 4,812,814	\$ 5,055,932	\$ 5,107,463	\$ 4,793,136	\$ 4,793,136
Total Full-Time Equivalents	15.80	19.40	17.58	17.00	17.00

ESCE Early Intervention - Fund 252

Intergovernmental	\$ 1,267,719	\$ 1,301,938	\$ 1,535,221	\$ 1,380,062	\$ 1,380,062
Fees & Charges for Services	137,988	146,851	143,554	144,554	144,554
Miscellaneous	5,886	1,358	2,706	15,950	15,950
Interfund Charges & Transfers	49,438	5,060	115,564	211,091	211,091
Beginning Fund Balance	110,666	69,283	74,283	-	-
Total Revenues	\$ 1,571,697	\$ 1,524,490	\$ 1,871,328	\$ 1,751,657	\$ 1,751,657
Personal Services	\$ 1,214,735	\$ 1,234,206	\$ 1,486,089	\$ 1,329,259	\$ 1,329,259
Materials & Services	162,929	135,892	258,205	152,138	152,138
Interfund Payment for Services	122,995	116,639	120,784	127,510	127,510
Intergovernmental Payments	-	-	-	138,500	138,500
Capital Outlay	1,755	6,264	6,250	4,250	4,250
Ending Fund Balance	69,283	31,489	-	-	-
Total Expenditures	\$ 1,571,697	\$ 1,524,490	\$ 1,871,328	\$ 1,751,657	\$ 1,751,657
Total Full-Time Equivalents	25.85	24.94	21.16	21.83	21.83

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	ACTUAL 2001-02	ACTUAL 2002-03	ADOPTED BUDGET 2003-04	PROPOSED & APPROVED BUDGET 2004-05	ADOPTED BUDGET 2004-05
Alcohol and Drug - Fund 253					
Intergovernmental	\$ 1,326,931	\$ 1,550,592	\$ 1,873,724	\$ 1,256,107	\$ 1,256,107
Fees & Charges for Services	70,812	64,809	66,000	-	-
Miscellaneous	15,729	14,413	6,800	-	-
Interfund Charges & Transfers	1,250	17,924	21,883	2,625	2,625
Beginning Fund Balance	416,214	461,980	151,242	75,066	75,066
Total Revenues	\$ 1,830,936	\$ 2,109,718	\$ 2,119,649	\$ 1,333,798	\$ 1,333,798
Personal Services	\$ 409,212	\$ 562,040	\$ 693,595	\$ 271,754	\$ 271,754
Materials & Services	88,087	198,087	412,062	45,847	45,847
Interfund Payment for Services	868,647	696,254	324,264	382,905	382,905
Intergovernmental Payments	-	334,552	684,928	633,292	633,292
Capital Outlay	3,010	489	4,800	-	-
Ending Fund Balance	461,980	318,296	-	-	-
Total Expenditures	\$ 1,830,936	\$ 2,109,718	\$ 2,119,649	\$ 1,333,798	\$ 1,333,798
Total Full-Time Equivalents	6.40	7.24	11.21	4.43	4.43

Secured Treatment Facility - Fund 270

Intergovernmental	\$ 1,326,403	\$ 1,321,808	\$ 1,496,374	\$ 1,443,974	\$ 1,443,974
Fees & Charges for Services	90,677	97,023	82,502	82,502	82,502
Miscellaneous	5,938	1,461	2,600	-	-
Beginning Fund Balance	248,888	293,905	95,872	-	-
Total Revenues	\$ 1,671,906	\$ 1,714,197	\$ 1,677,348	\$ 1,526,476	\$ 1,526,476
Personal Services	\$ 1,015,136	\$ 1,150,558	\$ 1,272,911	\$ 1,224,301	\$ 1,224,301
Materials & Services	128,378	163,035	231,599	131,587	131,587
Interfund Payment for Services	202,775	273,146	143,838	141,588	141,588
Capital Outlay	4,257	5,094	-	-	-
Debt Service	27,455	29,368	29,000	29,000	29,000
Ending Fund Balance	293,905	92,996	-	-	-
Total Expenditures	\$ 1,671,906	\$ 1,714,197	\$ 1,677,348	\$ 1,526,476	\$ 1,526,476
Total Full-Time Equivalents	22.20	22.25	23.50	21.73	21.73

Regional Hospital - Fund 290

Intergovernmental	\$ 1,908,904	\$ 1,727,216	\$ 1,662,549	\$ 1,662,549	\$ 1,662,549
Miscellaneous	-	769,647	370,391	-	-
Beginning Fund Balance	1,428,229	1,735,197	250,000	-	-
Total Revenues	\$ 3,337,133	\$ 4,232,060	\$ 2,282,940	\$ 1,662,549	\$ 1,662,549
Materials & Services	\$ 1,601,936	\$ 2,195,001	\$ 2,032,940	\$ 1,662,549	\$ 1,662,549
Interfund Payment for Services	-	-	250,000	-	-
Ending Fund Balance	1,735,197	2,037,059	-	-	-
Total Expenditures	\$ 3,337,133	\$ 4,232,060	\$ 2,282,940	\$ 1,662,549	\$ 1,662,549

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	ACTUAL 2001-02	ACTUAL 2002-03	ADOPTED BUDGET 2003-04	PROPOSED & APPROVED BUDGET 2004-05	ADOPTED BUDGET 2004-05
Zelzie Reed Early Intervention Trust - Fund 726					
Miscellaneous	\$ 417	\$ 281	\$ 450	\$ 62	\$ 62
Beginning Fund Balance	14,586	15,003	-	500	500
Total Revenues	\$ 15,003	\$ 15,284	\$ 450	\$ 562	\$ 562
Materials & Services	\$ -	\$ -	\$ 450	\$ 500	\$ 500
Intergovernmental Payments	-	-	-	62	62
Ending Fund Balance	15,003	15,284	-	-	-
Total Expenditures	\$ 15,003	\$ 15,284	\$ 450	\$ 562	\$ 562

College Dreams Trust - Fund 727					
Miscellaneous	\$ 2,176	\$ 5,681	\$ 14,000	\$ 10,870	\$ 10,870
Interfund Charges & Transfers	-	-	-	-	-
Beginning Fund Balance	56,477	58,653	-	-	-
Total Revenues	\$ 58,653	\$ 64,334	\$ 14,000	\$ 10,870	\$ 10,870
Materials & Services	\$ -	\$ -	\$ 14,000	\$ 10,870	\$ 10,870
Ending Fund Balance	58,653	64,334	-	-	-
Total Expenditures	\$ 58,653	\$ 64,334	\$ 14,000	\$ 10,870	\$ 10,870

JOSEPHINE COUNTY, OREGON
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DEPARTMENT
Mental Health

Fund Descriptions

General Fund – Mental Health

Revenues and expenditures for State-mandated and other necessary services of the Mental Health Department are accounted for in the General Fund. Revenues received are mainly from federal and state grants, and expenditures are for services provided, which include 24-hour crisis services, hospital holds, commitments, and pre-commitment investigations. These are detailed later in this section. Most of the operations of the Mental Health Department are accounted for in the following special revenue funds.

Jennifer Patton Memorial Fund

This fund was established in the name of Jennifer Patton, a former skill trainer for the Developmental Disabilities Program, whose life was cut short in May of 1995. The fund directly serves clients with developmental disabilities and supports the activities she shared with them.

Mental Health Fund

The Mental Health Fund accounts for all costs associated with providing medically necessary mental health services to the residents of Josephine County, including providing these services to citizens eligible for coverage by the Oregon Health Plan. Revenues received are mainly from federal and state grants, and expenditures are for the operations of the department and its programs.

Developmentally Disabled Services Fund

This fund was established to account for state mandated services for the developmentally disabled. The primary sources for revenues are federal and state grants. Expenditures are for the operations of the Developmental Disabilities Program.

E.S.C.E. – Early Intervention Fund

This fund accounts for the revenues and expenditures of the Early Intervention Program. Revenue sources are federal and state grants and expenditures are for early intervention services for children with developmental delays whose ages range from birth to six years.

Alcohol & Drug Fund

This fund was established to account for alcohol and drug prevention, early intervention, treatment, continuum of care, and drug-free housing. The primary revenue source is the Oregon Office of Mental Health and Addiction Services, although grants and community donations support a portion of *College Dreams* (see below).

Secured Residential Treatment Facility Fund

This fund accounts for the expenses associated with the operations of the Hugo Hills regional treatment facility in Hugo. Resources are derived mainly from federal and state grants.

Regional Hospital

This fund accounts for pass-through resources that are paid to the County by the State of Oregon for individuals in Southern Oregon who either require hospital commitment or urgent/emergent acute care from hospitals in the five-county region. Expenditures are payments to the hospitals which provided the care.

Zelzie Reed Early Intervention Trust Fund

This fund accounts for the receipt of donations from the estate of Zelzie Reed and any interest earned on the corpus of the donation. The expenditure of these resources is prescribed by her will.

College Dreams Trust Fund

This fund, established in fiscal year 2000-2001, accounts for scholarships to students deemed at risk of dropping out of high school or getting involved with drugs. Students are eligible to enter the program during their sixth year and can continue to earn scholarship money throughout high school. Money for the scholarships comes from donations. Expenditures of this fund are for scholarship payoffs.

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DEPARTMENT
Human Services

PROGRAM
Alcohol & Drug

Description

The *Alcohol & Drug Program* provides a continuum of substance abuse prevention, early intervention, treatment, and drug-free housing services with funding from the Office of Mental Health and Addiction Services. JCHSD directly provides substance abuse prevention, dual diagnosis (crisis residential and continuum of care), rental assistance, and A&D consultation to the Department of Human Services. Interagency agreements with ADAPT, Choices Counseling Center, the Addictions Recovery Center, On Track, and the LAMP provide funding for outpatient treatment, residential treatment, school/community-based early intervention, and transitional housing programs for men and women. The A&D Program facilitates the Local Alcohol & Drug Planning Committee, which is legislatively required to identify local needs, establish service priorities, and support community efforts to secure additional funding resources.

College Dreams is a graduation incentive program for bright secondary school students who have multiple risk factors for school dropout, substance abuse, and delinquency. *Dreamers* earn scholarship funds, incentive outings, and access to a “barrier removal fund” by attending school regularly, obtaining good grades, participating in healthy youth activities, and conducting community service projects. Prevention Specialists work flexible schedules to provide school services and outings for *Dreamers*.

Service Levels

	2001-02 Actual	2002-03 Actual	2003-04 Expected	2004-05 Budgeted
Students in <i>College Dreams</i>	280	350	470	380
School/Community Early Intervention for Youth	940	1,505	1,640	1,420
Adults/Youth in A&D Outpatient Treatment (state budget reductions)	520*	540*	480*	424*
Adults/Youth in Residential A&D Treatment (state budget reductions)	58*	78*	104*	92*
Adults & Children in Drug-Free Housing or Rental Assistance	140	181	180	180

* Revised figures based on OMHAS Treatment Improvement Report Data.

Efficiency Measures

- \$62.00 per month per *College Dreamer*
- \$120.00 per year per youth served with early A&D intervention in school and juvenile settings
- \$665.00 per adult/youth in A&D Outpatient Treatment
- \$420.00 per adult/child provided with drug-free transitional housing and rental assistance

Program Accomplishments and Goals

Fiscal Year 2002-2003 Accomplishments

- *College Dreams* expanded to grades 6-10 and piloted *College Challenge*, serving 470 at-risk students
- *College Dreams* completed a one-year Edward Byrne Juvenile Violence Prevention Grant
- Completed school records risk screening on 4,560 middle school and high school students
- Publicly recognized good academic grades, resiliency, and service of 228 *Dreamers* with basic scholarship awards and exceptional accomplishments of 26 *Dreamers* with competitive scholarship awards
- Ran full page display advertisement in Grants Pass daily courier with names of all award recipients and pictures of special award recipients
- Pilot *College Challenge* project doubled the academic success rate of bright, at-risk students with low academic grades in contrast to a random comparison group
- Second Prevention Specialist has earned Certified Prevention Specialist designation through ACBO

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DEPARTMENT
Human Services

PROGRAM
Alcohol & Drug

- Prevention Team and *Dreamers* participated in eight large scale community service projects
- 16 *Dreamers* participated in community education presentations
- 6 *Dreamers* served as full participants in the hiring process for new Prevention staff members
- *College Dreams* directors attended CSAP Technical Assistance Workshop for Promising Practices Programs

Fiscal Year 2003-2004 Expected Accomplishments

- *College Dreams* is now serving 380 at-risk students in grades 6-11 at 5 middle schools and 4 high schools
- Local research shows 68% academic failure rates and 54% juvenile arrest rates for 10th grade students with 3-7 risk factors (6 to 8 times higher than rates for low risk students)
- Outcome data show *Dreamers* with 50% less academic failure & 70% less delinquency than matched comparison students
- 328 *Dreamers* earned basic scholarship awards and 70 *Dreamers* earned competitive scholarship awards at College Dreams Awards Celebration attended by 940 students, family members, and invited guests
- Skill-building classes for 86 remedial summer school students at North and South Middle Schools
- Sustained OMHAS funding for A&D special projects (school/community-linked services & drug-free housing)
- All A&D Prevention Specialists trained and certified in evidence-based Motivational Enhancement
- Completed 2nd year of Gordon Elwood Foundation grant and did a program overview presentation for their Foundation Board
- Prevention Specialists and *Dreamers* participated in seven large scale community service projects
- Sustained A&D Participation in evidence-based Functional Family Therapy Team and Integrated (Juvenile) Treatment Court
- Modified A&D residential treatment funding to support 3rd dual diagnosis bed at Crisis Resolution Center
- Modified Continuum of Care budget to fund A&D Outpatient Team at Crisis Resolution Center

Fiscal Year 2004-2005 Projected Accomplishments

- Application being prepared for an AmeriCorps member to work with *College Dreams* on college preparation project for high school *Dreamers*
- *College Dreams* was selected to receive auction benefits from a sculptured bear during Bearfest 2004
- Our first cohort of *Dreamers* will graduate from high school and enter college
- Program will publicly recognize 250 with incentive scholarship fund awards at 2004 Awards Ceremony
- Program will present 60 competitive scholarship awards from community sponsors to outstanding *Dreamers*
- Maintain core components of A&D continuum of care despite state/county budget restrictions
- Program will present one or more workshops at a statewide conference

**JOSEPHINE COUNTY, OREGON
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DEPARTMENT
Mental Health

PROGRAM
Developmental Disabilities

Description

To assist individual with developmental disabilities and their families to lead productive, meaningful lives in their own community.

Service Levels

	2002-2003 Actual	2003-2004 Expected	2004-2005 Budgeted
# of individuals in clinical services	85	76	75
# of individuals in Regional Crisis Services	150	160	187
#of hours per month to each individual in Nursing Home Project	28	28	28
# of billable contacts			2040

Efficiency Measures:

- 1 FTE clinical services.
- 6 FTE Regional Crisis Services
- .4 FTE Nursing
- Utilize all staff to fill in where needed throughout the program due to reductions in 1.5 FTE.
- Demonstrate compliance with the State regulations as measured through the Quality Assurance process.

Effectiveness Measures:

- 80% of MH assessments performed within 14 calendar days.
- 95% of clients will have Assessment of Individual Support Needs completed annually.
- 90% of Annual Individual Service Plan meetings attended by consumer chosen significant individual.

Program Accomplishments and Goals

Fiscal Year 2002-2003 Expected Accomplishments

- Added two regional Children’s Development positions.
- Developed and implemented complete Quality Assurance procedures.
- Absorbed Family Support program into existing Case Management Program.
- Consolidated tasks to operate with 1.5 less FTE in Case Management.

Fiscal Year 2003-2004 Expected Accomplishments

- Incorporate Lifespan Respite Program into existing Case Management Program.
- Complete incorporation of State Diversion Specialist into existing Regional Crisis Program.
- Revise Case Management Policies & Procedures to comply with new Administrative Rules.
- Maintain level and quality of service amid State budget shortfall and increased operating expenses.

Fiscal Year 2004-2005 Expected Accomplishments

- Continue to maintain level and quality of service amid increased State budget shortfalls and increased operating expenses.

**JOSEPHINE COUNTY, OREGON
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**DEPARTMENT
Mental Health**

**PROGRAM
Early Intervention**

Description

Early Intervention Services are state mandated for eligible 0-3 year olds. Early Childhood Special Education services are state and federally mandated for eligible 3-5 year olds. These services for children with developmental delays include screening and evaluation, home-based family consultation, toddler groups, speech and language therapy, occupational and physical therapy, specialized autism services, family support activities, and preschool programs. Services are provided at Gilbert Creek Child Development Center, the Family Resources Center, Head Start, DTYC (Family Friends), Tinkerbelle, Rogue Community College Child Care, Discovery Acre Child Care or other community sites. The program philosophy emphasizes partnership with families, collaborative services, and a developmentally appropriate, inclusive curriculum, in which children with disabilities learn alongside their typically developing peers. Therapy services are integrated into home and classroom routines and include consultation and training for staff and families so that the significant adults in a child's life are working together to provide multiple learning opportunities for children.

Service Levels

	2002-2003 Budget	2002-2003 Actual	2003-2004 Budget	2004-2005 Budget
# children screened for eligibility	250	241	240	215
# of eligible children serviced.	253	245	250	230
# of typically developing children serviced.	95	95	95	95
# of in-service training sessions conducted with staff.	20	20	20	15

Efficiency Measures

\$133.14 per hour evaluation services.
\$131.74 per hour basic services.
\$135.86 per hour nursing services.

Effectiveness Measures

90% of referrals of children 0-3 completed within 45 days.
98% of referrals of children 3-5 completed within 90 days.
Overall rating on parent satisfaction survey 3.4 or higher (out of 4.0 Likert scale).
% of parents respond, A agree or A strongly agree to statement A Overall, I am happy with my child's program on biennial parent satisfaction survey.
4.4 or higher rating on Program Quality Assessment in the following areas; learning environment, daily routine, adult B child interaction, curriculum planning and assessment, as rated by two external reviewers, biennially.
90% compliance rating on key performance indicators during random sampling of 40 files each year.

Program Accomplishments and Goals

Fiscal Year 2002-2003 Accomplishments

- Train 75 community and JCEIS staff through early childhood conference.
- Provide intensive mentoring to seven more early childhood providers through STEP.
- Develop and implement group training for substitutes and new employees, to introduce them to important strategies for working with young children with disabilities.

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DEPARTMENT
Mental Health

PROGRAM
Early Intervention

- Achieve 90% enrollment of typically developing children at Gilbert Creek and Toddler Group.
- Identify two new community placement sites for children with disabilities.
- Complete a work environment survey measuring staff satisfaction.
- Maintain staff turnover at 6% or less.
- Begin placement of RCC practicum students from ECE department, continue placement of RCC Nursing and Human Resource students.
- Develop a plan to respond to planned cuts in State funding.
- Develop an incentive program for staff to encourage professional development through RCC ECE program, CDA certification, or registration in Professional Development Registry.
- Submit a collaborative proposal with Head Start and RCC for development of a lab school to serve infants, toddlers and preschoolers, and provide training for students.
- Sponsor professional exchange to train early intervention providers from Romania.

Fiscal Year 2003-2004 Accomplishments and Anticipated Accomplishments

- Develop a plan to respond to space and facility issues at Gilbert Creek.
- Analyze results of Work Environment Survey and implement recommendations as needed.
- Restructure services as necessary in response to budget considerations.
- Mentor 12 additional early childhood providers through STEP.
- Conduct High Scope Program Quality Assessment.
- Achieve 90% enrollment of typically developing children at Gilbert Creek and Toddler Group.
- Successful award of \$600,000 Community Development Block Grant (CDBG) for collaboration between JCEIS, Southern Oregon Head Start and RCC to build an early childhood center/lab school on the RCC campus. The Partnership has finalized interagency agreements, developed a capitalization strategy and has begun community fundraising efforts to supplement CDBG funding and foundation grants.
- Started a Parents Language and Literacy Education Group with funding support from the Oregon Community Foundation to train parents of at-risk children how to use books, art, music and conversation to stimulate their children's language development.
- In conjunction with the University of Oregon, participated in research on Infant Mental Health and the impact of parent child interactions. The University will fund a part-time Infant Mental Health Mentor to provide consultation to JCEIS staff beginning May 2004.
- Assumed management of the Josephine County Health Start Program (Ready, Set, Go) contracted with local service providers (Siskiyou Community Health Center, Oregon Parent Center, Three Rivers Community Hospital) and provided training in model implementation for all involved staff.
- Opened a new group at the Family Resource Center for three year olds with developmental delays.
- Wrote successful grant application to the Four Way Foundation for purchase of two digital video cameras.
- A local business, Impact Physical Therapy, sponsored and organized the "Caveman Trot" a 5-10 K race, as a fund raiser for JCEIS.
- JCEIS piloted implementation of Medicaid Administrative Claiming (MAC) for early intervention programs, and expects \$10,000 in new resources as a result.
- Neuropsychologist Marilyn Thatcher donated her time to do a full day training for JCEIS staff and community partners, with registration income benefiting JCEIS.
- Average length of service for JCEIS regular employees reached 9 ½ years as of April 2004, with six individual having 15 years of service or more. (The program has been in operation since October of 1986).
- Janet Dean, Nationally known director of the Clinical Infant Program in Boulder, Co. provided training in Infant Mental Health for JCEIS Family Consultants and for our community partners.
- All team in-service training in August focused on stress management. Five staff have completed Linda Willis' Balanced Weigh program, several are taking advantage of YMCS or Club Northwest

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DEPARTMENT
Mental Health

PROGRAM
Early Intervention

memberships. Lunchtime walking groups and a monthly “healthy cooking” dinner club have sprung from the stress management training.

- An Occupational Therapy intern from Colorado State University received training with us for three months and provided service to JCEIS children and families.
- As part of our accountability responsibilities to Oregon Department of Education a team of five people completed the Systems Performance Review and Implementation plan (SPRI). Goals from the SPRI plan are attached.
- 99% of referrals for eligibility evaluation were completed within federally required time lines, while programs throughout the state averaged 75%.
- A parent advocacy group planned an awareness event at the capitol, bringing attention to impact of budget cuts on families of children with disabilities. Representation from current and former JCEIS parents was very strong.
- Preschool children from Gilbert Creek CDC delivered May Day baskets to our neighbors
- Participated in a standardization study for an assessment tool, through the University of Oregon.
- Improved relationship with Community Human Services – Child Welfare.
- Renewed JCEIS staff participation in the Community Connections Clinic which brings medical and educational providers together in a team approach to coordinate services and provide consultation to families with children who have difficult medical or psychological diagnoses.

Fiscal Year 2004-2005 Expected Accomplishments

- Train an existing employee to meet certification requirements as a Speech/Language Therapy Assistant (SLPA) through coursework at Chemeketa Community College and hire at this level to fill the current SLP vacancy.
- In conjunction with Impact Physical Therapy, hold the second annual Caveman Trot 10 K run, with a fund raising goal of \$4,000.00.
- In conjunction with University of Oregon, hire and train Infant Mental Health Mentor, and begin providing consultation to JCEIS staff, families and community Early childhood providers (Head Start, Early Head Start, Healthy Start, Project Baby Check).
- See attached SPRI goals.

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DEPARTMENT
Mental Health

PROGRAM
Mental and Emotional Disabilities

Description

Josephine County Mental Health Department (JCMHD) provides State-mandated and other necessary services for the Mental and Emotional Disturbances (MED) Program. The Mental and Emotional Disturbances Program includes the following:

The *Community Support Unit* serves Josephine County residents who suffer from severe long-term psychiatric disabilities. Case management services include assistance in medication and symptom management, financial entitlements and money management, coordination of community resources, accessing medical and dental services, living skills training, social skills development, and community negotiation and advocacy. Residential services coordinate the licensure and use of private foster homes and residential programs, working closely with the Counsel of Housing & Urban Development, and providing on-going training to providers as required by the State Mental Health Division. Representative payee services assist consumers who are unable to manage their own funds and who have no other available resource to help.

The *Community Treatment Unit* includes the Children's Resource Team (CRT) and Adult Outpatient Treatment. The *Children's Resource Team* services include individual, family, and group counseling, school-based counseling, social and behavioral skills training for both children and parents, and classes on a variety of topics. CRT also provides a special series of classes for children whose parents are divorcing. The *Adult Outpatient Treatment* services include individual and group treatment, couples counseling, skills training, and evaluations in nursing homes.

The *Crisis Intervention Unit* is responsible for pre-commitment services and responding to mental health crises on a 24-hour basis throughout Josephine County.

The *Crisis Resolution Center* is a multifaceted program. It has three separate and distinct programs all licensed as a Secure Residential Program by the Mental Health & Developmental Disability Services Division. The *Non Hospital Hold Unit* is able to divert individuals who do not have any serious medical concerns and do not need seclusion and restraint, from a hospital hold. They are placed on either a physicians or directors hold because they are a danger to self, others, or unable to care for their basic needs as a result of a mental illness. The *Crisis Respite Unit* is used primarily to divert individuals from costly and restrictive hospital/non-hospital hold or as a step down to individuals who have been on a hold and are now more stable. This opportunity provides a home-like atmosphere for individuals to be able to continue to stabilize in a safe environment. Treatment modalities include but are not limited to on-going case management, skills training, therapy, medication management, assessment, treatment and referral for alcohol and drug issues as well as compulsive gambling. At times it may be used to provide respite for care providers or family members who are caring for someone suffering from a mental illness. *Ramsey Place Enhanced Care Unit* provides intermediate treatment for five chronically mentally ill consumers in a 24-hour staffed licensed residential treatment facility. It is a step down or diversion from the State Hospital or other long term, secure residential program. All of the residents have been committed to the Care and Custody of the State and are on trial visits. The treatment modalities available in crisis respite are utilized on this unit as well. There is no set length of stay and all residents' work towards the goal of moving to a less structured environment.

The *Medical Unit* provides services to individuals who are taking medication. This includes psychiatric evaluations, follow-up medication clinics, medical injection clinics and consultation with foster homes, pharmacies, local physicians, physician's assistants, nurse practitioners and other mental health service providers.

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**DEPARTMENT
Mental Health**

**PROGRAM
Mental and Emotional Disabilities**

Description (continued)

The *Resource Management Unit* was created for Josephine County Mental Health Department's involvement in the Oregon Health Plan. It serves as an accessible entrance into the full array of medically necessary and clinically appropriate JCMHD services and contract providers. It is also a liaison with the local medical community and with Southern Oregon Regional Psychiatric Unit.

Southside Place has fourteen studio apartments, which are designed for hard to place consumers with mental illness. Consumers are severely dysfunctional in other housing options and Southside is their last option for a residential placement. A resident manager resides at the facility and is responsible for collection of rent and minimal upkeep of the facility. Residents will stay 6 to 18 months with a goal to improve their skills, so they can secure competitive housing.

Other services include treatment at *Josephine County Correctional Facility* for crisis mental health services. At the *Josephine County Juvenile Department*, we provide a sex offender treatment and a parenting education class. For Josephine County, we provide *Gambling Addiction* treatment. We also contract with Southern Oregon Adolescent Study and Treatment Center, Family Friends and Options for Southern Oregon.

Service Levels

	2002-2003 Projected	2002-2003 Actual	2003-2004 Projected	2004-2005 Budget
Hours of assessments	3554	3396	2079	1900
Hours of case management	5998	5925	4806	4000
Hours of medication management	2777	2576	1134	1100
Hours of out patient therapy	14308	15733	9728	8800

Efficiency Measures

- \$120.80 per hour of assessment
- \$95.60 per hour of QMHA case management
- \$120.80 per hour of QMHP case management
- \$158.40 per hour of medication management
- \$120.80 per hour of out patient therapy

Effectiveness Measures

- 95% of the time members will wait no more than 2 calendar weeks to be seen for an Intake Assessment following a request for covered services
- 95% of patients needing follow-up will receive services within one week of discharge from an acute care hospital, or have documentation as to why not.
- 90% of consumers will indicate they are able to deal more effectively with problems that brought them to treatment
- Respond to 100% of requests for suicide/bereavement consultations from schools, other youth agencies

JOSEPHINE COUNTY, OREGON
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DEPARTMENT
Mental Health

PROGRAM
Mental and Emotional Disabilities

Program Accomplishments and Goals

Fiscal Year 2002-2003 Accomplishments

- Developed and implemented a comprehensive Dual Diagnosis Crisis Stabilization program with Dual Diagnosis Specialist in collaboration with community partners.
- Developed and implemented policy and guidelines to address detoxification section of the upcoming Dual Diagnosis Program at the Crisis Resolution Center and other new services.
- Revised and current Policies/Procedures for all existing JCMHD programs.
- Developed the budget for better accounting and monitoring of various program funds.
- Continuing improvement of billing methods to increase incidental billing by at least 50%.
- Continue to improve interagency relationships and collaboration by meeting at least monthly with members of the health care and social service communities.
- Provided opportunities for public to increase awareness and understanding of mental health/mental illness by inviting to free educational brown bag lunch seminars with mental health experts during A Mental Illness Awareness Week in October.
- Provided depression screenings to the public free of charge during National Depression Screening Week.
- Publish a monthly newsletter for staff and subcontractors to enhance JCMHD employee communication and information sharing.
- Continued our internal and external quality assurance and improvement committees to assure compliance with state and local service requirements to ensure quality of services to consumers.
- Sponsored the Mental Health Advisory Board orientation seminars for other agencies and the medical profession to inform them of the services available through our programs.
- Raised \$6,000 for community support of mentally ill consumers through the annual Mental Health Walk-A-Thon.

Fiscal Year 2003-2004 Projected Accomplishments

- Licensed “Dual Solutions” Mental Health and Alcohol & Drug Outpatient Treatment Program.
- Participated in successful regional grant application through Jefferson Behavioral Health.
- Participated in the National Depression Screening Day.
- Provided outreach and public awareness through brown bag lunch seminars and the annual Mental Health Walk-A-Thon.
- Explore additional funding sources through Federal and State grant opportunities.
- Implemented Policies and Procedures in accordance with the Health Information Privacy and Accountability Act (HIPAA).
- Converted computer code sets to comply with HIPAA.
- Converted to new computer system.
- Reduced staff and service levels to accommodate revenue shortfalls.
- Modified staffing patterns in PreCommitment services to accommodate staffing cuts.

Fiscal Year 2004-2005 Projected Goals

- Initiate specialized treatment services in accordance with grant award for children’s services coordination.
- Withdraw school based treatment services and restructure Children’s Resource Team in response to budget shortfall.
- Restructure case management services to severely and persistently mentally ill in response to budget shortfall.

**JOSEPHINE COUNTY, OREGON
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**DEPARTMENT
Mental Health**

**PROGRAM
Mental and Emotional Disturbances**

Description

Josephine County Mental Health Department (JCMHD) provides State-mandated and other necessary services for the Mental and Emotional Disturbances (MED) Program. The Crisis Services Program includes the following:

The *Crisis Intervention Unit* is responsible for pre-commitment services and responding to mental health crises on a 24-hour basis throughout Josephine County.

The *Crisis Resolution Center* is a multifaceted program. It has three separate and distinct programs all licensed as a Secure Residential Program by the Mental Health & Developmental Disability Services Division. The *Non Hospital Hold Unit* is able to divert individuals who do not have any serious medical concerns and do not need seclusion and restraint, from a hospital hold. They are placed on either a physician's or director's hold because they are a danger to self, others, or unable to care for their basic needs as a result of a mental illness. The *Crisis Respite Unit* is used primarily to divert individuals from costly and restrictive hospital/non-hospital hold or as a step down to individuals who have been on a hold and are now more stable. This opportunity provides a home-like atmosphere for individuals to be able to continue to stabilize in a safe environment. Treatment modalities include but are not limited to on-going case management, skills training, therapy, medication management, assessment, treatment and referral for alcohol and drug issues as well as compulsive gambling. At times it may be used to provide respite for care providers or family members who are caring for someone suffering from a mental illness.

Service Levels

	2002-2003 Actual	2003-2004 Budget	2003-2004 Projected	2004-2005 Budget
Hours of Precommitment activity Precommitment activity = investigation, interviewing and report writing to determine if commitment proceedings should occur	1041	1399	1392	1400
Precommitment screenings Screenings = evaluation & determination of danger to self or others and need to confine the individual	820	1100	1080	1100
# of people to less restrictive respite setting Less restrictive respite setting = placement other than acute care hospital or non-hospital hold facility	279	240	297	344
# of people to Non Hospital Hold setting Non Hospital Hold = locked facility other than acute care hospital	169	165	193	195

Efficiency Measures

\$120.80 per hour Crisis Service
\$235.00 per day Non-Hospital Hold
\$235.00 per day Crisis Respite

Effectiveness Measures

100% of services for consumers assessed as emergent services will occur within 24 hours from time of screening or triage.

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DEPARTMENT
Mental Health

PROGRAM
Mental and Emotional Disturbances

98% of consumers requesting emergency services shall be screened within 15 minutes. 90% of involuntary commitment proceedings will be started on the next judicial day from admission.

Program Accomplishments and Goals

Fiscal Year 2002-2003 Accomplishments

- 100% of consumers assessed as emergent seen within 24 hours of screening
- Expanded Dual Diagnosis capability within the Crisis Resolution Center program.
- Continued 24 hr Crisis coverage during budget cut backs and loss of revenue.
- Maintained high diversion rate of individuals placed on hold going to civil commitment.
- Reduced hospital costs as a result of diversions to less restrictive setting (Crisis Resolution Center)
- Received license as an Acute Care Non-Hospital facility

Fiscal Year 2003-2004 Projected Accomplishments

- Enhance nursing coverage to 24 hours.
- Train nursing staff in crisis coverage
- Reduce staffing levels of crisis unit
- Increase revenue through Acute Care Non-Hospital billing for OHP Standard coverage.
- Explore billing opportunities with Third Party Insurance carriers

Fiscal Year 2004-2005 Expected Accomplishments

- Maintain 24 hour Crisis Response coverage.
- Maintain approximately 1.5 Average Daily Population in Acute Care Hospitalization.
- Continue current rate of diversion to Non-Hospital Hold facility.
- Initiate “Dual Solutions” treatment for dually diagnosed individuals with mental health and alcohol and drug abuse issues.
- Stabilize 24 hour nursing coverage.

**JOSEPHINE COUNTY, OREGON
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**DEPARTMENT
Mental Health**

**PROGRAM
Secure Residential Treatment**

Description

Hugo Hills Secure Residential Treatment Facility’s mission is to foster ability of persons with severe and persistent mental disorders to achieve maximum self-reliance in managing their psychiatric condition.

Service Levels

	2002-2003 Actual	2003-2004 Budget	2004-2005 Budget
Minimum # of resident contacts per direct staff member per day	2	2	2
Minimum # of hours per day of structured individual skills training per staff member	2	2	2
# of residents	16	16	16
Minimum # of community outings per resident per month.	5	5	5
Minimum # of hours per day of group skills	1	1	1
Minimum of 10 different groups per week			
Employee staff count	22.2 FTE	22.8 FTE	20.0 FTE

Efficiency Measures

\$259.00 per day per resident.

Effectiveness Measures

100% of residents will have their rights explained to them as documented in their charts
 Three residents per year will be discharged from Hugo Hills to a lower level of care.
 90% of all incidents at Hugo Hills will have follow-up documentation on the incident report form.

Program Accomplishments and Goals

Fiscal Year 2002-2003 Accomplishments

- Implemented new pre-vocational skills training program
- Developed four new group modalities; Music/Art/Emotions Group, Cooking Skills Class, Understanding Group Processes Class, and World Awareness Group
- Involving residents with dual diagnoses into community AA meetings
- Successfully discharged three residents

Fiscal Year 2003-2004 Expected Accomplishments

- Revise current treatment planning forms and procedures to increase resident understanding and involvement
- Complete construction of two new work sites for staff in order to meet HIPPA regulations
- Organize two overnight summer camping trips
- Transition two residents to lower level of care

Fiscal Year 2004-2005 Projected Accomplishments

- Continue to meet licensing requirements in building and facility
- Reorganize personnel tracking
- Reorganize staffing schedules to accommodate losses resulting from lay-offs and ensure consumer and staff safety
- Petition State for increase in monthly service payments for residents



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