

Lane County Budget Committee Questions

May 7, 2009 Responses

Volunteer Data

“Does the county maintain data on volunteers such as the number of volunteers by program area, the number of volunteer hours and the staff time expended to recruit, train and manage volunteers?”

While most and perhaps all programs maintain this type of data, it is not compiled at the County level. Performancesoft Views could be used to bring this data together if the Board were to request it.

LRAPA DUES

“Why is LARAPA expense/contribution up by \$72,000? Is this fixed or negotiable?”

LRAPA Dues are paid out of the Road Fund and are based upon a single Per Capita rate charged to all partner agencies including Eugene, Springfield, Cottage Grove, Oakridge, and Lane County. If you look at the FY 09-10 Intergovernmental Agreements, Dues and Association Costs worksheet you can see that annual dues two years ago were \$113,151 and last year they were \$116,447. The FY 08-09 dues were \$117,918 however, due to the anticipated loss of timber payment revenue, the Board of Commissioners decided unilaterally to reduce its payment to \$45,000. The FY 08-09 amount is budgeted once again for FY 09-10 since the county is still an active partner agency and timber payment revenue has been renewed. For comparison purposes, the City of Eugene's dues are \$152,184.

DISTRICT ATTORNEY

“How many misdemeanor cases is the DA's office handling per year?”

In 2008, the count was 14,312. Please see the attached list of demonstrating how the charges are distributed.

EXTENSION SERVICE

“What is the advantage of putting Extension's request for an “add package” into the current budget, as opposed to sometime next year?”

Delaying a decision about a potential “add package” for Extension could potentially accelerate the demise of our local 4-H, Master Gardener, Compost Specialist, and Master Food Preserver programs. I would anticipate a dramatic drop in program enrollments, as participants would be less likely to invest money or time in classes, clubs, and activities that might crash before their conclusion. – Steve Dodrill, Extension Services

“If Extension Service had a serial levy that was rolled into the County tax base at some point in the past, why aren't we honoring that commitment? I suspect we don't have to per the law, but is there another decision in the past that shut them out?”

The County did honor that commitment consistently after the Extension levy was rolled in until the current year (FY 08-09) when faced with adopting a budget with no Secure Rural Schools funding.

Lane County Budget Committee Questions

Among all the other general fund reductions to public safety and public services, Extension's operational funding was eliminated and rent forgiveness maintained.

HEALTH & HUMAN SERVICES

"How many people in Lane County are 'officially' hungry", how many people get federal food stamps and what is the County's role in helping people without food?"

Lane County Food Stamp activity for March 2009

- 34,437 Households
- 61,360 Persons
- 2.7% increase from February 2009
- 21.6% increase from March 2008

Lane County provides \$252,281 or approximately 25% of the funding for Food for Lane County, which distributes over 5 million pounds of food (about 100,000 pounds per week and 3,846,154 meals). Also provided 364,930 meals through emergency shelters and meal sites. Harvested over 158,000 pound of fresh, organic produce.

"How much money is spent by Lane County on drug and alcohol problems? How many people are helped and how many need help?"

Lane County Alcohol & Drug FY 08-09 Funding

County General Fund	\$335,297
2145 Beer & Wine Tax	\$237,434
OR Dept Human Services	\$3,807,382
OR Dept of Corrections - CCA *	\$525,398
Oregon CJC Grant	\$64,476
Serbu Grant	\$38,712
Human Services Commission	<u>\$53,122</u>
Total	\$5,061,821

* Includes funding contracted by Public Safety
Other funds pass through LIPA as the Managed Care
Organization for the Oregon Health Plan

<u>Services Purchased</u>	<u># on waiting list</u>
4,713 Admits to Sobering Services	
3,972 Bed Days of Detox Services	
730 Bed Days - Dual-Diagnosis	
60 Slots - Outpatient for Supervised Offenders	61
50 Slots - Outpatient for Bridge Offenders	
80 Slots - Drug Court Supervised	
158 Parents - Intensive Treatment & Recovery	
9 Slots Outpatient Women	4

Lane County Budget Committee Questions

76 Slots - Methadone for adults	15
69 Slots - Outpatient Urban Adults	72
6 Slots - Outpatient Rural Adults	6
18 Slots - Outpatient Minority Adults	1
75 Slots - Outpatient Dual Diagnosis	
23 Slots - Outpatient Urban Youth	6
4 Slots - Outpatient Rural Youth	1
4 Slots - Outpatient Girls	
20 Families - Critical Support Services	
730 Bed Days - Intensive Residential	
27 Bed Days - Intensive Residential Women	31
17 Bed Days - Intensive Residential Men	24
Prevention Services	

“How much has LCAS collected in revenue in 2008 as compared to 2007 and projected/on time in 2009? License fees?”

Please see attached spreadsheet.

“While there has been much talk about incarceration restoration, I was wondering what the flip side- the human prevention and treatment side of the safety equation- is looking like. Namely, can you tell me, with some specific citations, what individual services have already been cut (the last Budget Cycle) which has rendered specific groups of vulnerable people more vulnerable and subject to possible dying? I was thinking about the mental health and public health cuts along with youth services treatment cuts. Could you give me some graphic examples of folks having lost basic, life-line protections which you think could be construed as at the very least, comparable to not having a jail bed for a non-violent defendant? Isn't it true that we discontinued the Flu Clinic last year? Have we lowered any HIV or other lethal disease prevention services? What treatments and services which directly relate to keeping young people and adults out of the criminal justice system have we lost in the past 3 years? Please be helpful with some specifics, if you might. Off hand, although it's not in your department, what major Youth Services or other non-jail programs along with the Human Services Commission services are endangered?”

Question 1. For the current fiscal year (“the last Budget Cycle”), H&HS lost a bit over 10 FTE. It would be difficult, if not impossible, to prove that our vulnerable populations have been “subject to possible dying” as we have very little direct evidence on our specific clients who are no longer part of our services. For example, when the majority of methadone clients were dropped from the Oregon Health Plan a few years ago, most of them did not continue with methadone services. This was true of methadone clinic clients in many parts of the state.

We know many of the clients came from a background of street crime, such as prostitution, drug dealing, and stealing, and we assume some reverted to their prior habits. There is only limited information on incidents of mortality (none that I know of in Lane County) from clients being dropped from service. We simply don't track clients after they are gone. First, many of them may move out of our area, and we also have a difficult time keeping up with current caseloads. It's tough to get longitudinal information on highly mobile clients.

In Developmental Disabilities we lost 2 DD Specialists. This means that we were limited in our ability to provide case management and protective services. We did not layoff any persons for this

Lane County Budget Committee Questions

cut, but it meant that we continued to absorb a high case loads and could do less case management and monitoring. It would be difficult to prove damage.

In our Alcohol/Drug/Offender Services we lost staff 3.5 FTE. Three were Mental Health Specialists serving Methadone Services, Sex Offender Services, and doing DUII Assessments/Referral. In Methadone we cut back the number of clients in our service. There is another methadone clinic in the area, and I don't know how many clients may have shifted there or have sought alternative treatments. There are some alternative sex offender treatment agencies Lane County, so our working assumption is that clients may seek services in another agency or not be in compliance with probation or post-prison supervision requirements. The risk with untreated sex offender is the higher risk of recidivism to commit a new sex offense.

In Public Health we lost almost 5 FTE. We lost an Admin Assistant, an Office Assistant, a Public Health Nurse, a Community Service Worker, a Laboratory Technician, and part of a health officer. The problem with cuts in Public Health is that we are at a minimal service level already. It is difficult to respond to any extended outbreak of communicable disease. We have very good staff and services in Public Health, but we have very little depth in numbers of staff for critical incidents.

Question 2: I can't compare my services very well to a jail bed for a non-violent defendant. The risk assessments are different. If we look at community health and safety (services that keep people well and safe), I would include much of H&HS' services and I would include jail beds, especially for violent offenders.

Question 3: Yes, we did cancel the off-site clinics, the best know being the clinics specifically for seniors, but we did offer on-site immunizations in our Downtown clinic. Over the past few years we have been supporting delegate agencies and providing them with vaccine to do immunizations. Public Health is a small part of the total immunization in the county. On the issue of reducing lethal disease preventions services, I need to get some more information from my Public Health staff. I don't know the specific job duties or how work got reassigned for some of our cuts.

Question 4: I'm unsure what endangered this year in Youth Services. I haven't reviewed their budget. For the Human Services Commission there are some services jeopardized. I may forward some information that I have from Steve Manela. I have long versions and short versions.

- Rob Rockstroh, Director - Health & Human Services Department