

# Multnomah County, Oregon

## Recovery Plan

### State and Local Fiscal Recovery Funds

#### Interim Recovery Plan as of August 31, 2021



**Multnomah County**  
**2021 Recovery Plan**

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## GENERAL OVERVIEW

### **Executive Summary**

Multnomah County is home to approximately 829,560 residents, making it the most populous county in the state of Oregon. The county is located in Northwestern Oregon where the Columbia and Willamette rivers meet. It is bordered by the State of Washington to the north and is surrounded by Hood River, Clackamas, Washington and Columbia Counties in Oregon. The county seat is in Portland, which is also the largest city in the State of Oregon

Multnomah County is governed according to its Home Rule Charter. Multnomah County's legislative body, the Board of County Commissioners, is composed of four non-partisan County Commissioners elected from geographical districts and the County Chair, who is elected at-large and serves as both Chief Administrator and Legislator. The County has three other independently elected positions -- the Sheriff, the District Attorney and the Auditor. There are 42 governmental taxing districts located wholly or partially inside of Multnomah County. Portland (population 662,235) and Gresham (population 112,660) are the two largest cities in Multnomah County. Other major governmental entities located within Multnomah County include Metro, Portland Public Schools, the Port of Portland, TriMet, and Portland Community College. Overlapping districts share a tax base, infrastructure and services with Multnomah County. Multnomah County provides a full range of services including:

- Library and Community Enhancement
- Public Safety Protection, Corrections and Probation
- Construction and Maintenance of Roads, Highways, Bridges and other Infrastructure
- Health, Mental, Homeless, and Social Services
- Internal Business Support

The American Rescue Plan Act of 2021 (ARPA) was signed into law on March 11, 2021, and provides \$350 billion in additional funding for state and local governments navigating the impacts of the COVID-19 outbreak. Funds were distributed by the U.S. Treasury to states and eligible local governments and are to be used to cover COVID-19 related expenses and impacts from the pandemic. Multnomah County will be receiving a total direct allocation of \$157.8 million. Funding will be provided to Multnomah County in two tranches: 50% or \$78.9m received in May of 2021 and the remaining balance no earlier than 12 months from the date of first payment. The funds are available to be spent through December 31, 2024.

As the local Public Health Authority, Multnomah County plays a leading role in the regional COVID-19 response. In addition to the work of coordinating the response, COVID-19 and the associated economic impacts have increased the demand for County safety net services, while also disrupting County operations. The Federal Coronavirus Aid, Relief, and Economic Security (CARES) Act and American Rescue Plan (ARPA) have provided resources to support this work, but the ultimate impact and duration of the pandemic are still unknown. Both the health and economic impacts of COVID-19 have fallen disproportionately on communities of color. The County's COVID-19 response has been culturally-specific and has targeted resources to communities hardest hit by both the virus and the economic contraction. The County provides an equity lens to all policy decisions. The County will remain diligent and focused on serving the most vulnerable in our community and maintain essential services.

## Multnomah County's COVID-19 Response Guiding Principles:

- **Inclusively lead with race** in order to best serve people and populations who been disproportionately impacted by inequities. We honor the expertise, relationships, and resilience within communities of color through our partnerships and co-create solutions.
- **Using an equity and racial justice approach** helps us take into consideration inequities, current disease trends and a deeply held belief that there is tremendous value and positive impact in services provided in the language and cultural traditions or our diverse communities.
- Providing excellent service and supporting people in our community is a hallmark of what we do as a government, safety net system and Local Public Health Authority. County employees and our community partners are the heart of this work. Our work is at its best when we **engage and listen to the expertise and insight of those who are in and working with our community each day.**
- **Embedding a public health approach within our priorities** allows us to consider opportunities to impact the health and wellness of our community at an individual, community and population level, using data and making investments that can have short-term and long-term benefits.
- **Partnership with our jurisdictional partners, community leaders and community-based organizations** is a key component to increasing the effectiveness and impact of the millions of dollars being deployed throughout the county, region and state.

## To allocate ARPA funding Multnomah County used the following priority areas:

- 01 Public Health Emergency Response**  
Testing, tracing, outbreak response, vaccination, call center, emergency ops, communication, education & engagement.
- 02 Core Services Supporting People in our Care**  
Uphold the welfare of people in our direct care, particularly those in congregate settings like shelter, jail and juvenile detention.
- 03 Restore Services Impacted by Budget Reductions**  
Restore and continue important services that are impacted by budget cuts at the local, state or federal level.
- 04 Crisis Response & Community Recovery**  
Maintain the social service safety net, and make investments that address the negative impacts of the pandemic to help our community recover.
- 05 Critical County Infrastructure**  
Investments in key County infrastructure like improved air quality in our buildings and expanded technology.

The Multnomah County Board of County Commissioners fully allocated its \$78.9m ARPA allocation in the fiscal year 2022 adopted budget. The second tranche is expected to be programmed during the County's fiscal year 2023 budget cycle. For more information on

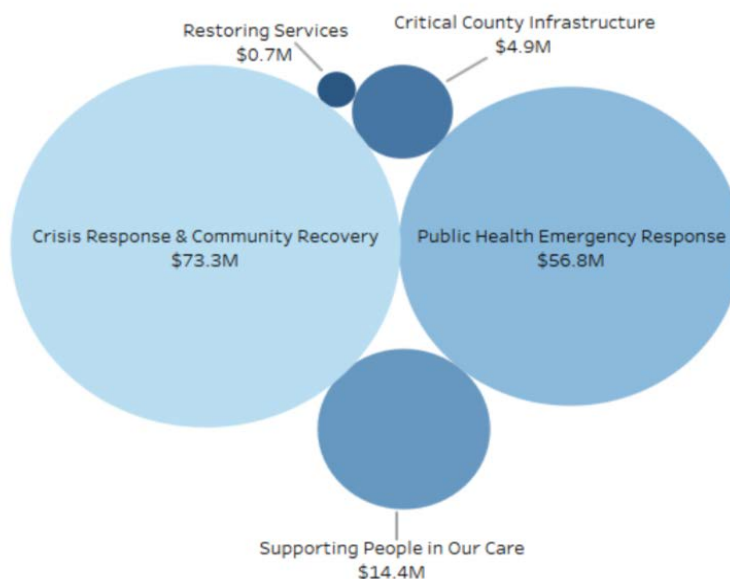
Multnomah County’s approach in allocating ARPA resources, see the [Multnomah County Chair’s Budget Message](#).

Multnomah County, Clackamas, Washington, and Yamhill Counties have collaborated to improve public health’s response to communicable diseases, including COVID-19. The regional partners maintain a [Regional COVID-19 Dashboard](#). The dashboard provides information on COVID-19 cases, hospitalizations and deaths broken down by age, gender, race, and ethnicity. The dashboard also details data on testing, housing status, underlying health conditions and symptoms. As a result, of timing issues, regional numbers may be slightly different from those reported by the Oregon Health Authority.

For the latest County [COVID-19](#) public guidance see link

### Uses of Funds

In fiscal year, 2022 Multnomah County budgeted a total \$150.1 million across the five priority areas to continue and expand its COVID-19 response. The funding includes direct ARPA funding in addition to other federal and state funding. Below is a visual breakdown of all programmed funding to be expended in fiscal year 2022.



### **Local Public Health Authority and Safety Net Provider**

The pandemic has required Multnomah County to enhance services provided as part of several of its core functions, including acting as the Local Public Health Authority and the Safety Net Provider:

#### *Vaccine Response*

As part of the continued efforts to ensure COVID-19 vaccines reach all people and all communities, the Federal government announced a series of actions to expand access to COVID-19 vaccines to the hardest-hit and highest-risk communities across the country. With funding from

the American Rescue Plan, the U.S. Department of Health and Human Services (HHS) will invest nearly \$10 billion to expand access to COVID-19 vaccines and better serve communities of color, rural areas, low-income populations, and other underserved communities in the COVID-19 response. This funding will expand access to vaccines for vulnerable populations and increase vaccine confidence. The fiscal year 2022 budget allocates \$23.4 million of ARP funding to vaccine distribution, improving vaccine access, addressing health disparities, and testing.

#### *Safety Net Provider*

Much of the Federal assistance will go towards serving the most vulnerable people in our community, who have been disproportionately impacted by COVID-19. Throughout the crisis, Multnomah County has had the unique local responsibility of both leading the public health response to a virus we had never seen, COVID-19, and responding to the unprecedented need in the community for shelter, housing, food, and healthcare.

The County has charted a course forward, with a goal to preserve essential County services to the fullest extent possible. This includes housing stability, behavioral healthcare, and culturally specific wraparound services. These services are lifelines for individuals and families who face increased housing insecurity, food instability, trauma, and inadequate access to healthcare. The County will also continue to respond to the urgent needs surrounding the pandemic, including continuing to detect and contain cases and outbreaks, and expand vaccinations. Where possible, the County seeks to deepen supports for current clients and reach more individuals and families in our community who are now in need of our services. Additionally, the pandemic has created the need for expanded investments to respond to acute COVID-19 impacts, including supports for children returning to school, older adults, those experiencing domestic and sexual violence, and those impacted by increased gun violence in our community.

#### *Continuation of Emergency Rent Assistance (ERAP)*

The local eviction moratorium implemented during the pandemic has prevented a wave of evictions in response to large-scale employment loss, but renters will ultimately still owe this back rent. Throughout the pandemic, the Census Household Pulse survey reported that 10-14% of households in Oregon responded that they were worried about their ability to pay rent.

Stable housing is linked to a number of positive health and social outcomes for individuals, families, and communities. Rental assistance is a key strategy to support renters. The COVID-19 pandemic has resulted in unprecedented numbers of layoffs and furloughs, leading to even deeper racial disparities and challenges to pay rent and remain stably housed. A COVID-19 Emergency Rent Assistance program will continue into FY 2022 and includes \$48.8 million to support more households with rent assistance.

The table below provides summary of (direct ARPA allocation) planned usage:

FISCAL YEAR 2022 - ARPA PLANNED USAGE (EXPRESSED IN MILLIONS)			
PRIORITY AREAS	PROGRAM USAGE	AMOUNT (\$)	
Crisis Response & Community Recovery	ARP - Client Assistance	2.2	
	ARP - Culturally Specific Behavioral Health Programs	0.6	
	ARP - DCHS Client Assistance	4.9	
	ARP - Demonstration Project for Neighborhood Focused Violence Prevention	0.1	
	ARP - Domestic Violence Services	0.8	
	ARP - Eviction Moratorium & Prevention Support	0.4	
	ARP - Gun Violence Impacted Families Behavioral Health Team	1.2	
	ARP - Health Data Exchange	0.4	
	ARP - HR and Business Services Support	0.5	
	ARP - Library Tech Mobile	0.5	
	ARP - Multnomah Mothers' Trust Project (MMTP)	0.6	
	ARP - Peer Support Tenant Services & Housing Stability	0.5	
	ARP - SUN Community Schools: Family Resource Navigators	4.1	
	ARP - SUN Community Schools: Summer Support	1.5	
	ARP - YFS Rent Assistance Team Staffing Capacity	0.2	
	ARP - YFS Staffing Capacity Increase	0.1	
	ARP - Client Assistance	0.2	
	ARP - Community Violence Intervention Programs	1.3	
	ARP - Countywide Client Assistance	1.9	
	ARP - Gun Violence Prevention Incubator Pilot	0.3	
	ARP - Office of Sustainability Food Access Focus	0.2	
	ARP - Public Health Communicable Disease Services Expansion	1.0	
	ARP - Public Health Community Partners and Capacity Building Expansion	1.2	
	Critical County Infrastructure	ARP - Countywide Federal Leave	1.3
		ARP - Facilities Air Quality Improvements	1.0
ARP - Federal Grant Compliance and Monitoring		0.2	
ARP - Future of Work Coordinator		0.2	
ARP - Labor Relations Expanded Support		0.2	
ARP - Staff Telework Software Bundle		2.1	
Public Health Emergency Response		ARP - ACHP Registered Nurse	0.2
	ARP - Behavioral Health - Continuing COVID Response	1.6	
	ARP - COVID-19 Response Clinical Services	2.1	
	ARP - COVID-19 Response Coordination	0.1	
	ARP - COVID-19 Response Health Officer	0.2	
	ARP - COVID-19 Response Support Services	1.4	
	ARP - Public Health - Community Testing, Vaccination, and Distribution	10.4	
	ARP - Public Health - Contact Tracing	4.9	
	ARP - Public Health - Isolation and Quarantine	11.9	
	ARP - Adult Transportation Services	0.02	
	ARP - Communications Office Public Health Emergency Response	0.3	
	ARP - COVID-19 Policy and Project Coordination	0.2	
	ARP - Emergency Management Community Personal Protective Equipment (PPE) & County Supplies	1.0	
	ARP - Emergency Management Logistics	2.9	
	ARP - Enhanced Cleaning Juvenile Justice Center and East Campus	0.1	
Restoring Services	ARP - Domestic Violence Backlog from COVID-19	0.2	
	ARP - Nurse Family Partnership Restoration	0.5	
Supporting People in Our Care	ARP - Corrections Health Multnomah County Detention Center (MCDC) - Restoration	0.6	
	ARP - COVID-19 Emergency Response - Culturally Specific Outreach	0.4	
	ARP - COVID-19 Emergency Response - Expanded Hygiene Access	0.8	
	ARP - COVID-19 Emergency Response - Expanded Street-Based Medical Care	0.2	
	ARP - COVID-19 Emergency Response - Ongoing Operations	5.1	
	ARP - COVID-19 Emergency Response - Outdoor Physical Distancing Shelters	1.5	
	ARP - COVID-19 Recovery - Alternative Shelter for Adults - Staffing Capacity	0.3	
	ARP - COVID-19 Response Corrections Health	0.5	
	ARP - Elect Signage/Remote Court Hearings/Washing Machine/Microsoft Teams Licensing	0.1	
	ARP - MCIJ Dorm 13	0.5	
	ARP - MCIJ Dorm 5 & Provide Phone Calls for AIC	0.9	
	ARP - Expanded Rent Assistance of Justice Involved Individuals	0.5	
	<b>Total Allocation Fiscal Year 2022</b>		<b>78.9</b>

The Multnomah County Board of Commissioners continues to evaluate the community needs around the pandemic and will modify or adjust as necessary to best combat the pandemic and its affects.

### **Promoting Equitable Outcomes**

The health and economic impacts of COVID-19 have fallen disproportionately on communities of color. The employment levels among Black, Indigenous, and People of Color (BIPOC) community remains well below pre-pandemic levels. The County has targeted its resources (including ARPA funding) to the communities hardest hit.

The County Chair prioritized equity in developing the fiscal year 2022 COVID-19 response plan (developing budget). During the budget preparation, County departments were asked to apply the equity lens to their processes. This included asking department leaders to consider the process they use to develop budget, the narrative they construct in program offers, and the measures they used to determine program success. Below is a more specific outline of approach applied:

- Prepare the budget with equity impacts in mind and document the analysis used. Equity analysis does not make the choices for departments, but it can lift up where the benefits are and illuminate where potential negative impacts occur.
- Take a fresh look at the language used in each program offer and write descriptions that keep the public in mind. Departments were encouraged to think about how they describe what they do, what they invest in, and how these investments benefit the community in ways that the community can understand and access.
- Examine performance measures to see if they can better reflect the goals of the program. This is an opportunity to effectively identify disparities that a program is seeking to address, or to better describe the population the program serves in terms of demographics and other indicators.

The County performed extensive outreach to cultural communities, clients, and community partners to better understand what they needed to begin their recovery from the pandemic. The County listened and built its COVID-19 response around the feedback. As referenced in the general overview the County's COVID-19 guiding principles focused on leading with race, using equity and racial justice in approach, embed public health in the approach, work with jurisdictional partners, community leaders and community based organizations, and listen to the experts in the field.

The County focused primarily on **Crisis Response & Community Recovery** (e.g. food assistance, rent assistance, housing stability, behavioral health, etc.) and **Public Health Emergency Response** (e.g. community testing, vaccinations, vaccine distribution, contact tracing, isolation and quarantine, PPE supplies, clinic services, etc.), below is a breakdown of focus areas based on a percentage of total response plan.



<b>COVID Response Priorities</b>	<b>Total</b>	<b>ARPA Total</b>
Crisis Response & Community Recovery	\$ 73.4	\$ 24.6
Public Health Emergency Response	\$ 56.7	\$ 37.3
	<b>\$ 130.1</b>	<b>\$ 61.9</b>
Percentage of Total Response Budget	87%	78%

In a future reporting cycle, greater project specifics will be provided, including progress details in meeting equity goals and priorities.

## **Community Engagement**

The County has been a regional leader in responding to the pandemic; this has included extensive collaboration with community leaders, community organizations, and jurisdictional partners. The County held various town hall sessions aimed at seeking input/feedback on how to best to address the pandemic with available resources (ARPA included). These sessions were held in the spring of 2021 and supported the County’s development of COVID-19 Response Guidance Principles and COVID-19 Response Priorities detailed in general overview. Thousands of community members and residents participated to share key methods to reach the most vulnerable, told us about the kinds of support they required to make it through pandemic, and provided information on how best to inform certain communities on the benefits of vaccines. The County adjusted its priorities to the feedback from the community.

The County develops the annual budget with the support of the Community Budget Advisory Committees (CBAC). CBAC are groups of community members that review and make recommendations on County departmental budgets and operations. CBAC is a way the County receives community feedback on key budgetary decisions/priorities. Nine CBAC’s represent each County Department. CBAC members meet with department leaders and other staff about program and services. The CBAC is tasked with making recommendations to the County Board of Commissioners on how best to use key resources in the community. The CBAC prioritized providing input on the COVID-19 response and recovery.

The County established a dedicated governmental fund to account for all COVID-19 response expenditures and revenues to provide greater transparency and accountability to the public. The County’s annual audited financial statements will detail all COVID-19 related expenditures in a clear and transparent approach. The County is in the process of developing a COVID-19 spending dashboard to provide information that is more current to the public.

## **Labor Practices**

Multnomah County’s current plan does not include water, sewer, and broadband infrastructure projects as it applies to direct ARPA funding. Below is some basic information about Multnomah County’s labor workforce and COVID-19 safety resources.

Multnomah County has approximately 6,000 positions including full-time equivalent (FTE) and temporary and on-call staffing. The County has 12 bargaining units list below, the largest being general employees with about 3,500 members.

- Facilities & Maintenance & Repairs

- Sign Painters
- Prosecuting Attorneys
- Juvenile Custody Workers
- General Employees
- Correctional Officers
- Nurses
- Probation and Parole Officers
- Deputy Sheriffs
- Electrical Workers
- Physicians
- Dentists
- Management/Executive (Non Represented)

For general [County Human Resources](#) information see link

Due to the extraordinary circumstances, Multnomah County has made it a priority to maintain latest workplace safety protocols in alignment with Oregon OSHA requirements. The safety and well-being of County employees is of the utmost importance. The County maintains and makes available to all employees the latest employee policies, practices, and procedures that may be impacted in response to COVID-19, including workplace safety guidance, COVID-19 FAQ, telework guidance, vaccine information, etc.

### Use of Evidence

Multnomah County is still evaluating its planned usages (projects) as it applies to evidence based interventions and/or program evaluations designed to build evidence. More specific will be provided in the next reporting period.

### Table of Expenses by Expenditure Category

Category		Cumulative expenditures to date (\$)	Amount spent since last Recovery Plan
1	Expenditure Category: Public Health		
1.1	COVID-19 Vaccination	\$543,770.25	\$543,770.25
1.2	COVID-19 Testing	\$50.00	\$50.00
1.3	COVID-19 Contact Tracing		
1.4	Prevention in Congregate Settings (Nursing Homes, Prisons/Jails, Dense Work Sites, Schools, etc.)	\$8,333.57	\$8,333.57
1.5	Personal Protective Equipment		
1.6	Medical Expenses (including Alternative Care Facilities)		
1.7	Capital Investments or Physical Plant Changes to Public Facilities that respond to the COVID-19 public health emergency		

Category		Cumulative expenditures to date (\$)	Amount spent since last Recovery Plan
1.8	Other COVID-19 Public Health Expenses (including Communications, Enforcement, Isolation/Quarantine)	\$287,135.29	\$287,135.29
1.9	Payroll Costs for Public Health, Safety, and Other Public Sector Staff Responding to COVID-19	\$936,225.28	\$936,225.28
1.10	Mental Health Services		
1.11	Substance Use Services		
1.12	Other Public Health Services	\$65,898.01	\$65,898.01
2	Expenditure Category: Negative Economic Impacts		
2.1	Household Assistance: Food Programs		
2.2	Household Assistance: Rent, Mortgage, and Utility Aid		
2.3	Household Assistance: Cash Transfers		
2.4	Household Assistance: Internet Access Programs		
2.5	Household Assistance: Eviction Prevention		
2.6	Unemployment Benefits or Cash Assistance to Unemployed Workers		
2.7	Job Training Assistance (e.g., Sectoral job-training, Subsidized Employment, Employment Supports or Incentives)		
2.8	Contributions to UI Trust Funds*		
2.9	Small Business Economic Assistance (General)		
2.10	Aid to nonprofit organizations		
2.11	Aid to Tourism, Travel, or Hospitality		
2.12	Aid to Other Impacted Industries		
2.13	Other Economic Support	\$307.49	\$307.49
2.14	Rehiring Public Sector Staff		
3	Expenditure Category: Services to Disproportionately Impacted Communities		
3.1	Education Assistance: Early Learning		
3.2	Education Assistance: Aid to High-Poverty Districts		
3.3	Education Assistance: Academic Services		
3.4	Education Assistance: Social, Emotional, and Mental Health Services		
3.5	Education Assistance: Other		
3.6	Healthy Childhood Environments: Child Care		
3.7	Healthy Childhood Environments: Home Visiting		

Category		Cumulative expenditures to date (\$)	Amount spent since last Recovery Plan
3.8	Healthy Childhood Environments: Services to Foster Youth or Families Involved in Child Welfare System		
3.9.	Healthy Childhood Environments: Other		
3.10	Housing Support: Affordable Housing		
3.11	Housing Support: Services for Unhoused persons	\$10,260.48	\$10,260.48
3.12	Housing Support: Other Housing Assistance		
3.13	Social Determinants of Health: Other		
3.14	Social Determinants of Health: Community Health Workers or Benefits Navigators		
3.15	Social Determinants of Health: Lead Remediation		
3.16	Social Determinants of Health: Community Violence Interventions		
4	Expenditure Category: Premium Pay		
4.1	Public Sector Employees		
4.2	Private Sector: Grants to other employers		
5	Expenditure Category: Infrastructure		
5.1	Clean Water: Centralized wastewater treatment		
5.2	Clean Water: Centralized wastewater collection and conveyance		
5.3	Clean Water: Decentralized wastewater		
5.4	Clean Water: Combined sewer overflows		
5.5	Clean Water: Other sewer infrastructure		
5.6	Clean Water: Stormwater		
5.7	Clean Water: Energy conservation		
5.8	Clean Water: Water conservation		
5.9	Clean Water: Nonpoint source		
5.10	Drinking water: Treatment		
5.11	Drinking water: Transmission & distribution		
5.12	Drinking water: Transmission & distribution: lead remediation		
5.13	Drinking water: Source		
5.14	Drinking water: Storage		
5.15	Drinking water: Other water infrastructure		
5.16	Broadband: "Last Mile" projects		
5.17	Broadband: Other projects		
6	Expenditure Category: Revenue Replacement		
6.1	Provision of Government Services		
7	Administrative and Other		

Category		Cumulative expenditures to date (\$)	Amount spent since last Recovery Plan
7.1	Administrative Expenses	\$19,768.08	\$19,768.08
7.2	Evaluation and data analysis		
7.3	Transfers to Other Units of Government		
7.4	Transfers to Nonentitlement Units (States and Territories only)		

PROJECT INVENTORY

Multnomah County is the process of fully detailing out its project inventory, more specifics will be provided in the next ARPA reporting period, October 2022. Below is a list of current projects with expense activity in the reporting period ending 7/30/2021.

**Public Health Emergency Response**

- Testing, tracing, outbreak response, vaccination, call center emergency operations, communication, education and engagement
- Funding Amount (Budget): \$37.3m
- Project Total Spend (thru 7/30/21): \$1.76m
  - Categories 1.1 COVID-19 Vaccination, 1.2 COVID-19 Testing, 1.3 COVID-19 Contact Tracing, 1.8 Other COVID-19 Public Health Expenses, 1.9 Payroll Costs for Public Health, Safety, and Other Public Sector Staff Responding to COVID-19, and 1.12 Other Public Health Services
- Performance Report: will be provided in a future reporting period

**Core Services Supporting People in our Care**

- Uphold the welfare of people in our direct care, particularly those in congregate settings like shelter, jail and juvenile detention.
- Funding Amount (Budget): \$11.4m
- Project Total Spend (thru 7/30/21): \$81.5K
  - 1.4 Prevention and Congregate Setting and 1.9 Payroll Costs for Public Health, Safety, and other Public Sector Staff Responding to COVID-19
- Performance Report: will be provided in a future reporting period

**Crisis Response & Community Recovery**

- Maintain the social service safety net, and make investments that address the negative impacts of the pandemic to help our community recover.
- Funding Amount (Budget): \$24.6m
- Project Total Spend (thru 7/30/21): \$10K
  - 2.13 Other Economic Support and 3.11 Housing Support: Services for Unhoused Persons
- Performance Report: will be provided in a future reporting period

### **Administrative Support**

- Project Total Spend (thru 7/30/21): \$19.7K
  - 7.1 Administrative Expenditures

### **Use of Evidence**

Not applicable at this point