



BOARD OF COMMISSIONERS

FY 2026 BUDGET COMMITTEE MEETING

8:30 AM, WEDNESDAY, MAY 14, 2025

Barnes Sawyer Rooms - Deschutes Services Building - 1300 NW Wall St – Bend

(541) 388-6570 | www.deschutes.org

MEETING FORMAT: In accordance with Oregon state law, this meeting is open to the public and can be accessed and attended in person or remotely, with the exception of any executive session.

Members of the public may view the meeting in real time via YouTube using this link: <http://bit.ly/3mmlnzy>. To view the meeting via Zoom, see below.

Public Comment: There will be time specified each day for public comment.

Zoom Meeting Information: This meeting may be accessed via Zoom using a phone or computer.

- To join the meeting from a computer, copy and paste this link: bit.ly/3h3oqdD.
- To join by phone, call 253-215-8782 and enter webinar ID # 899 4635 9970 followed by the passcode 013510.

AGENDA AND MATERIALS

1. FY 2026 Budget Committee Agenda
2. FY 2026 Budget Committee PowerPoint Presentations
3. FY 2026 Budget Committee Supplemental Materials



Deschutes County encourages persons with disabilities to participate in all programs and activities. This event/location is accessible to people with disabilities. If you need accommodations to make participation possible, call (541) 388-6572 or email brenda.fritsvold@deschutes.org.



FY 2026 BUDGET COMMITTEE AGENDA

Day 3 - Wednesday, May 14, 2025

8:30 - 8:40 AM **Reconvene Deschutes County Budget Meeting** Chair
Review agenda changes and follow-up items
Public Comment

DIRECT SERVICES CONTINUED

8:40 - 10:40am **Health Services** Janice Garceau
Fund 270, 274, 276 (Page 147/137, 139, 177)

10:40 - 10:45 AM **Recess**

SPECIAL SERVICE DISTRICTS

10:45 - 10:55 AM **Deschutes County Extension & 4-H District** Nicole Strong
Fund 720 (Page 217/394)
Open Public Meeting Chair
Introductions
Public Comment
Budget Discussion
Motion to:
 Approve Deschutes County Extension & 4-H Service
 District budget of \$1,076,000 and set tax rate at \$0.0224
 per \$1,000 of assessed valuation.
Motions seconded
Budget Committee votes Budget Committee
Close Public Meeting Chair

10:55 - 11:10 AM **Sunriver Service District** Sunriver Board
Non-county fund, see handouts in budget binder
Open Public Meeting Chair
Introductions
Public Comment
Budget Discussion

 1. Approve Sunriver Service District budget of
 \$11,061,403 and set tax rate at \$3.4500 per \$1,000 of
 assessed valuation.
 2. Approve Sunriver Service District Reserve budget of
 \$3,166,902.
 3. Approve Sunriver Service District Capital budget of
 \$1,140,900 and set local option capital improvement tax
 rate at \$0.4700 per \$1,000 of assessed valuation.

Motions to:
 Motions seconded
 Budget Committee votes Budget Committee
 Close Public Meeting Chair

11:10 - 11:25 AM **Black Butte Service District** Chief Todd Rich
Non-county fund, see handouts in budget binder
Open Public Meeting
Introductions
Public Comment



FY 2026 BUDGET COMMITTEE AGENDA

Day 3 - Wednesday, May 14, 2025 (continued)

Budget Discussion

Motion

1. Approve Black Butte Ranch Service District budget of \$3,363,860 and set tax rate at \$1.0499 per \$1,000 of assessed valuation.
2. Set local option operating tax rate at \$0.6500 per \$1,000 of assessed valuation.

Motions seconded

Budget Committee votes

Close Public Meeting

Budget Committee

Chair

ADDITIONAL DEPARTMENT INFORMATION

Budget Committee

11:25 - 12:05 PM

Additional Special Request OR Limited Growth information as requested by the Budget Committee

Open Public Meeting

Chair

12:05 - 12:35 PM

Lunch

DELIBERATIONS

Budget Committee

12:35 - 2:45 PM

Deliberations of Special Request and Limited Growth proposals

2:45 - 3:45 PM

Elected Officials Compensation Approval

Budget Committee

Motion to:

Approve Elected Officials Compensation Committee

Salary Recommendations from 03/14/25 Public Meeting

Motion seconded

Budget Committee votes

3:45 - 4:00 PM

Recess

4:00 - 4:15 PM

Budget Approval

Budget Committee

Motion to:

Approve Deschutes County budget of \$X adjusted for approved changes and set the tax rate at \$1.2783 per \$1,000 of assessed valuation.

Motion seconded

Budget Committee votes

Close Deschutes County Budget Meeting

Chair

Deschutes County 9-1-1 Service District

Budget Committee

Fund 705/710

Open Public Meeting

Chair

Introductions

Public Comment

Budget Discussion

Motion to:

1. Approve Deschutes County 9-1-1 Service District budget of \$23,567,100 and set tax rate at \$0.3618 per \$1,000 of assessed valuation (Fund 705).

2. Approve Deschutes County 9-1-1 Service District Equipment Reserve budget of \$5,258,000 (Fund 710).

Motions seconded

Budget Committee votes

Close Public Meeting

Chair



FY 2026 BUDGET COMMITTEE AGENDA

Day 3 - Wednesday, May 14, 2025 (continued)

SO - Countywide Law Enforcement District #1

Budget Committee

Fund 701

Open Public Meeting

Chair

Introductions

Public Comment

Budget Discussion

Motion to:

Motion to approve Countywide Law Enforcement
County Service District budget of \$x adjusted for
approved changes and set the tax rate at \$1.2500 per
\$1,000 of assessed valuation.

Motion seconded

Budget Committee votes

Close Countywide Law Enforcement District Budget
Meeting

Chair

SO - Rural Law Enforcement District #2

Budget Committee

Fund 702

Open Public Meeting

Chair

Introductions

Public Comment

Budget Discussion

Motion to:

Motion to approve Rural Law Enforcement County
Service District budget of \$x adjusted for approved
changes and set the tax rate at \$1.55 per \$1,000 of
assessed valuation.

Motion seconded

Budget Committee votes

Close Rural Law Enforcement County District Budget
Meeting

Chair

4:15 PM - 4:30 PM **Closing Comments**

Budget Committee/Budget
Officer/Finance/

Adjourn

Chair

FY 2026 Proposed Budget Presentation

Health Services

Janice Garceau, HS Director

Holly Harris, BH Director

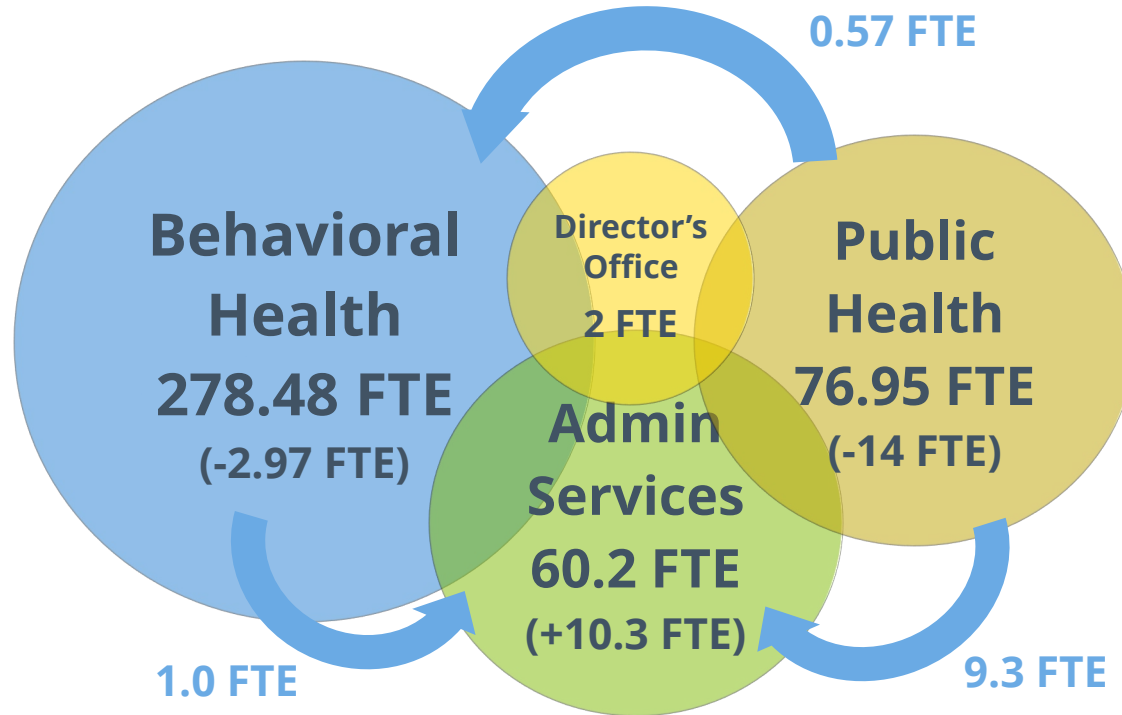
Heather Kaisner, PH Director

Cheryl Smallman, Business Officer



May 14, 2025

Health Services Overview



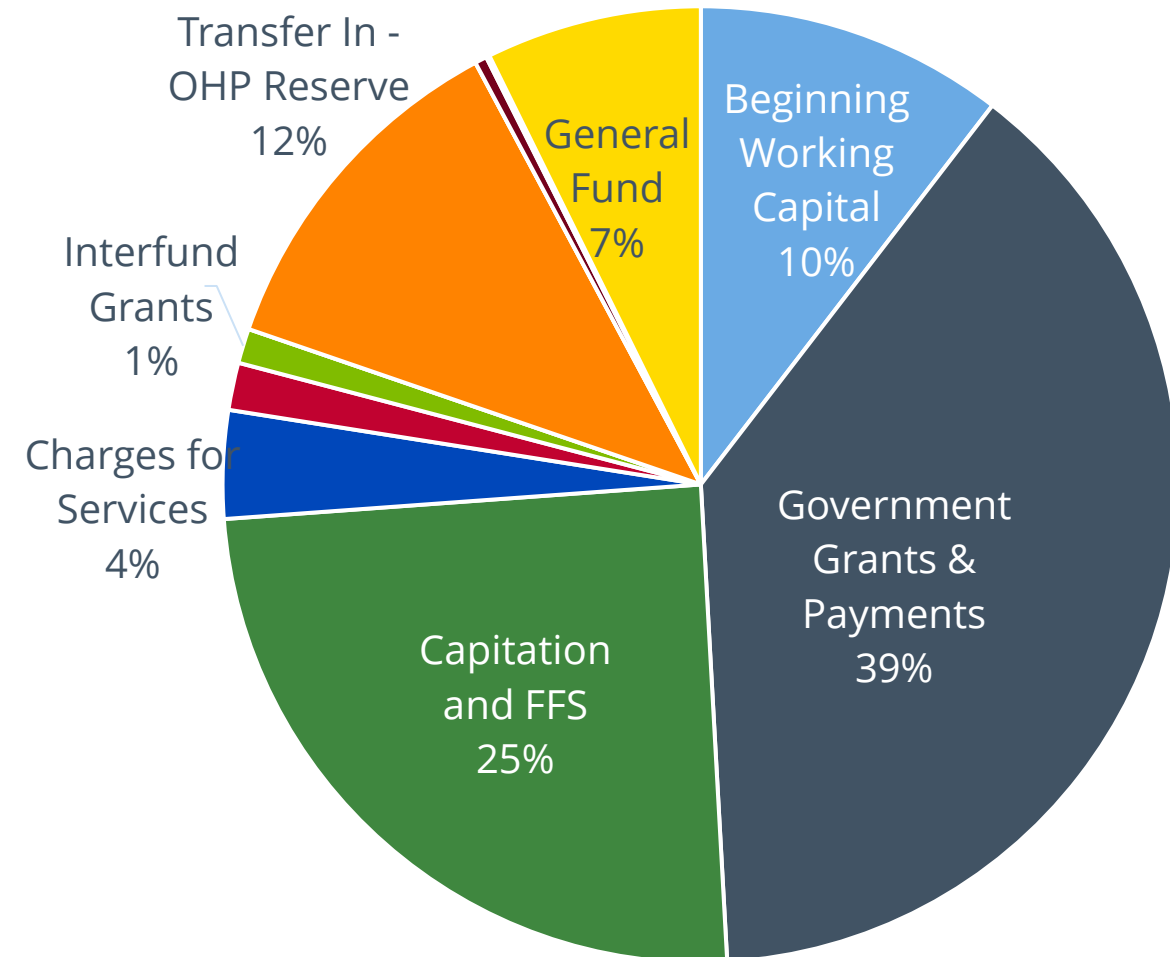
Mission:

To promote and protect the health and safety of our community.

-6.67 FTE (2 limited duration, 4.67 Regular) from FY 2025



Health Services Fund 274 Overview

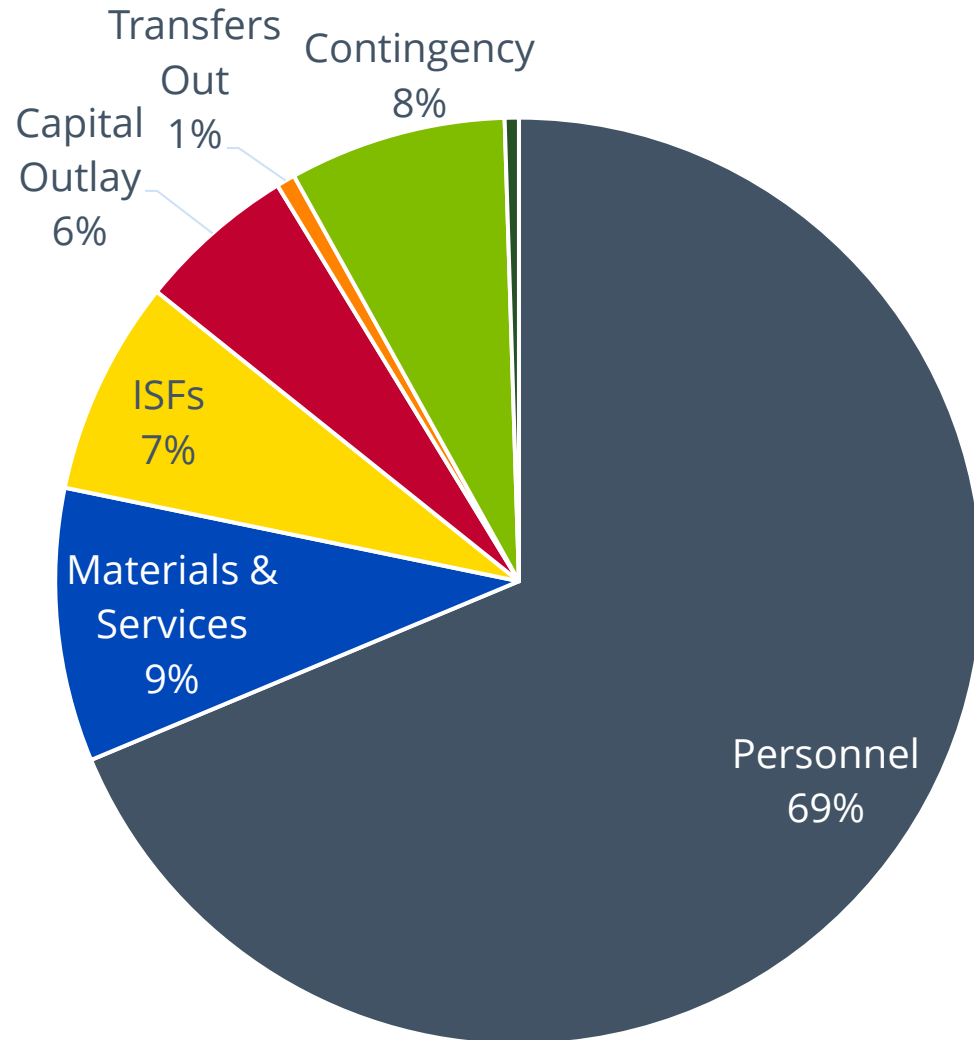


FY 2026 RESOURCES

- Government Grants & Payments (+13%)
- Capitation & FFS (+3%)
- Charges for Services (-2%)
- Transient Room Tax (+36%)
- County General Fund (-6%)



Health Services Fund 274 Overview



FY 2026 REQUIREMENTS

- Personnel (+9%)
- M&S (-47%)
- ISFs (+10%)
- Major one-time expenditures
 - La Pine Remodel (\$216K)
 - Bend Space (\$2M)
 - HB 5202 - BH Housing (\$3.1M)



FY 2026 Department Fiscal Issues

Short-term Fiscal Issues

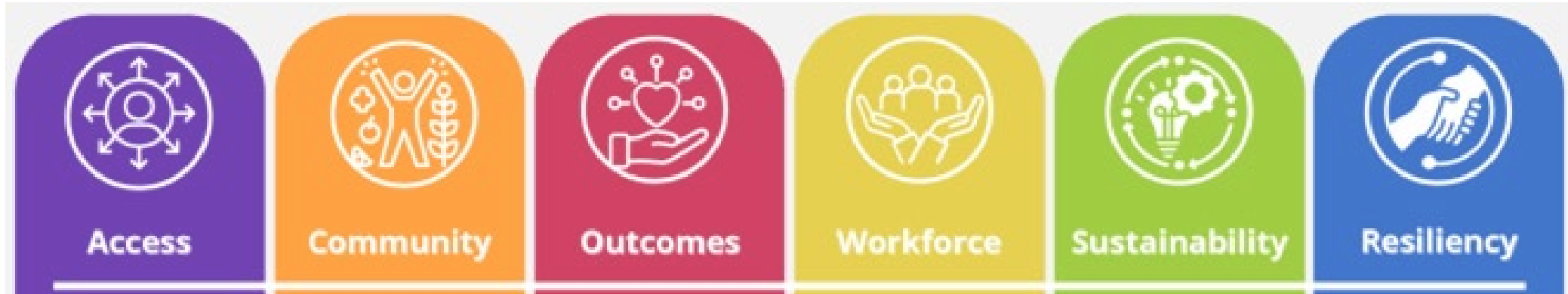
- Funding instability
- Temporary Federal and State funds ending
- Increasing personnel and indirect costs

Long-term Fiscal Issues

- Medicaid funding
- Public Health funding
- Crisis Program – After-hours Stabilization Center services
- Space in Downtown Area
- Client and case acuity



FY 2026 Initiatives



Community

Building Trust and Engagement

Outcomes

Addressing Emerging Challenges

Resiliency

Navigating Complex Funding Dynamics



FY25 Challenges – Staying Steady



Federal Change & Uncertainty

- Unprecedented uncertainty in funding
- Critical informational resources shifting daily

Acuity of Basic and Health Needs

- Housing, housing, housing....and housing
- Increased economic pressure on those we serve and the systems that support them
- Limited Resources to address acute & chronic conditions: chronic disease, infectious disease outbreaks and addiction

Administrative Staffing Constrained

- Increasing costs, ISFs and indirect cost allocation limitations constrain adequate administrative staffing



Behavioral Health Outlook

Community Mental Health Program (CMHP)

Designated by Local Mental Health Authority (LMHA) to provide services mandated by ORS 430.610

Mandated Services

CMHPs have direct responsibility for services that have legal implications or impact individual rights

Civil Commitment
Aid & Assist
Psychiatric Security
Review Board (PSRB)

Core Services

CMHPs are required to ensure core services by rule (OARs) or contract (County Financial Assistance Awards)

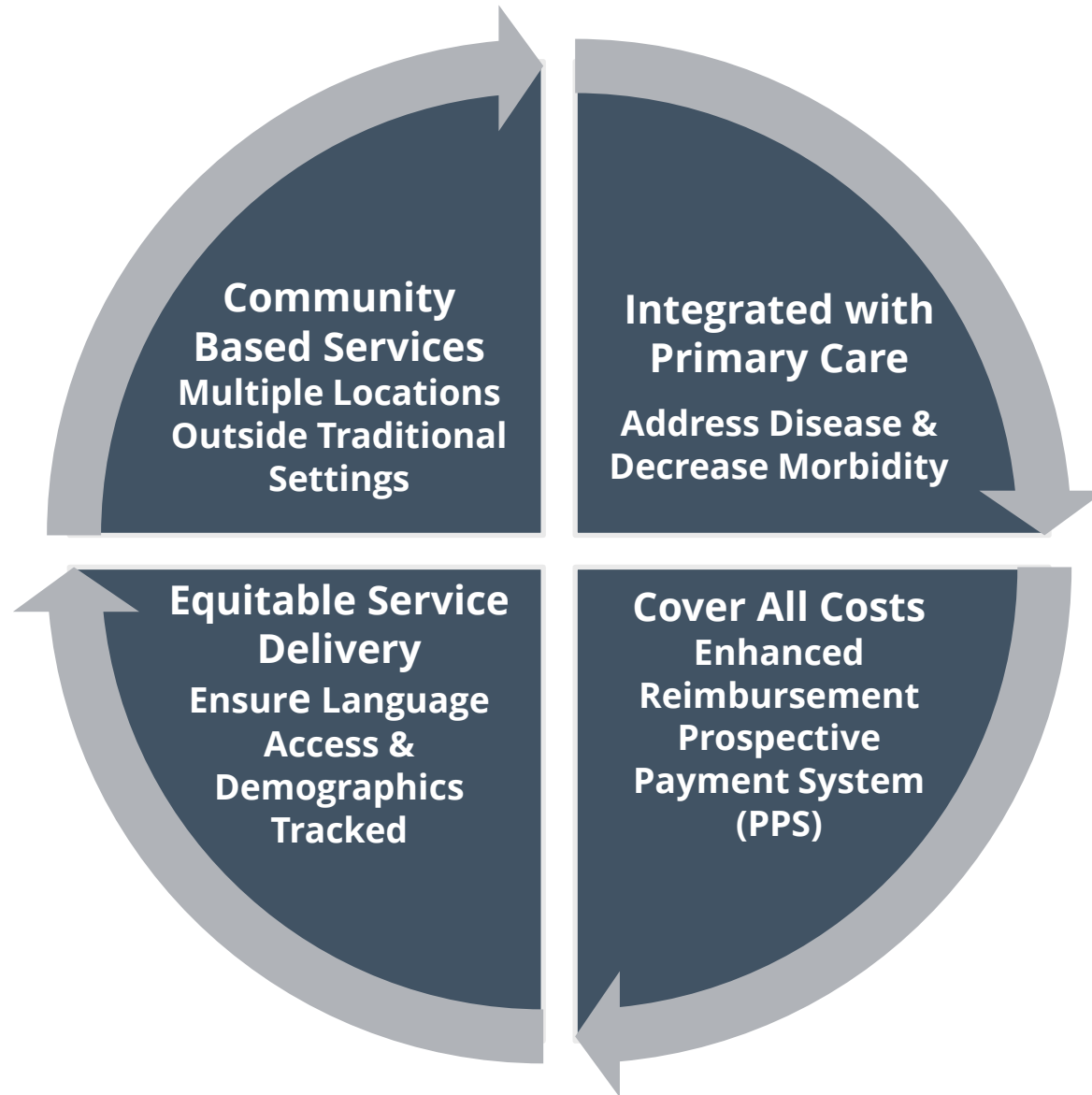
24/7 Crisis Services, Forensic Diversion, EASA, ACT, Youth Wraparound, Older Adult Services, and others

Safety Net Services

CMHPs are required to ensure provision of community based services not provided elsewhere

School Based Health Centers, MH & Substance Use Outpatient, Employment & Housing Supports, CCBHC, etc.

Certified Community Behavioral Health Clinic since 2017¹⁰



- CCBHC status required profound system change and improvements
- **CCBHC generated over \$30 Million in revenue since 2017**
- **Deschutes County outperforming Oregon CCBHCs on nearly every metric**
- **CCBHC funded through HB 4002, which reformed M110 in 2024. Up for inclusion in State Medicaid Plan. *No longer a pilot program.***



FY 2025 BH Highlights

- Secured contract for a 16-bed Secure Residential Treatment Facility (SRTF) in Redmond. Scheduled to open July 2026.
- Purchased a 5-bed Adult Foster Home to serve individuals with IDD/Co-Occurring Mental Health. In process to purchase a second 5-bed AFH for individuals with mental health conditions.
- Implemented workforce initiatives aimed at improving retention and recruitment including a scholarship program, paid internship program, and stipends.



FY 2026 BH Five-Year Forecast

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029	FY 2030
Ending Working Capital	\$ 41,739,274	\$ 43,807,480	\$ 40,583,054	\$ 30,111,107	\$ 23,001,982	\$ 17,464,659

Revenue

Beginning Working Capital	\$ 34,318,057	\$ 41,739,274	\$ 43,807,480	\$ 40,583,054	\$ 30,111,107	\$ 23,001,982
All other Revenues	65,219,790	66,211,199	63,628,815	65,666,259	67,256,986	69,319,857
Total Revenue	\$ 99,537,847	\$ 107,950,473	\$ 107,436,295	\$ 106,249,313	\$ 97,368,093	\$ 92,321,839

Expenditures

Personnel	\$ 42,410,304	\$ 49,389,286	\$ 52,138,348	\$ 54,671,512	\$ 57,331,334	\$ 60,197,901
Materials and Services	9,351,287	6,988,917	6,798,140	6,918,051	7,040,360	7,165,116
Capital	1,027,488	2,042,000	1,795,000	8,000,000	2,989,000	-
Debt Service	23,319	23,319	23,319	23,319	23,319	23,319
Transfers Out	4,986,175	5,699,471	6,098,434	6,525,324	6,982,097	7,470,844
Total Expenditures	\$ 57,798,573	\$ 64,142,993	\$ 66,853,241	\$ 76,138,206	\$ 74,366,111	\$ 74,857,180
Ending Working Capital	\$ 41,739,274	\$ 43,807,480	\$ 40,583,054	\$ 30,111,107	\$ 23,001,982	\$ 17,464,659

Five-Year Forecast



FY 2026 BH -20% Medicaid Enrollment

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029	FY 2030
Ending Working Capital	\$ 41,739,274	\$ 38,779,957	\$ 29,919,479	\$ 22,912,415	\$ 15,320,358	\$ 6,399,233

Revenue

Beginning Working Capital	\$ 34,318,057	\$ 41,739,274	\$ 38,779,957	\$ 29,919,479	\$ 22,912,415	\$ 15,320,358
All other Revenues	65,219,790	66,211,199	63,628,815	65,666,259	67,256,986	69,319,857
Medicaid - 20% Enrollment Reduction	-	(5,027,523)	(6,636,052)	(6,535,117)	(6,471,932)	(6,383,802)
Total Revenue	\$ 99,537,847	\$ 102,922,950	\$ 95,772,720	\$ 89,050,621	\$ 83,697,469	\$ 78,256,413

Expenditures

Personnel	\$ 42,410,304	\$ 49,389,286	\$ 52,138,348	\$ 54,671,512	\$ 57,331,334	\$ 60,197,901
Materials and Services	9,351,287	6,988,917	6,798,140	6,918,051	7,040,360	7,165,116
Capital	1,027,488	2,042,000	1,795,000	-	-	-
Debt Service	23,319	23,319	23,319	23,319	23,319	23,319
Transfers Out	4,986,175	5,699,471	6,098,434	6,525,324	6,982,097	7,470,844
Cost Savings	-	-	(1,000,000)	(2,000,000)	(3,000,000)	(3,000,000)
Total Expenditures	\$ 57,798,573	\$ 64,142,993	\$ 65,853,241	\$ 66,138,206	\$ 68,377,111	\$ 71,857,180
Ending Working Capital	\$ 41,739,274	\$ 38,779,957	\$ 29,919,479	\$ 22,912,415	\$ 15,320,358	\$ 6,399,233

Five-Year Forecast



Public Health Outlook

Unique & Mandated Role of Local Public Health Authority

ORS 431.413. , ORS 431.001

Communicable Disease Prevention & Management

- Communicable Disease and STI Investigation & Control
- Tuberculosis Case Management
- Immunizations

Environmental Health & Preparedness

- Environmental Health Services
- Emergency Preparedness & Response

Maternal & Child Health

- Nurse Home Visiting
- Women Infants & Children (WIC)

Prevention & Health Promotion

- Suicide Pre/Post-vention & Reporting
- Substance Use & Overdose Prevention
- Tobacco Prevention

Vital Records

- Birth & Death Certificates



FY 2025 PH Highlights

- ❖ Healthy Schools prevented **1 in 5** behavioral health-related ED visits for ages 11-17.
- ❖ **100%** of syphilis cases interviewed and treated, including **3 pregnant women** to prevent congenital syphilis.
- ❖ **17% increased participation in WIC** over last 2 years, after 2 decades of declining caseloads. **87%** are working families.
- ❖ Public Health Newsletter reached a **~42,500** people/month



Limited Growth Impacts

Strategies to meet Target Savings of \$1.8 million:

- Reduced direct clinical services
- Achieved additional funding and leveraged current funding models
- Identified Environmental Health cost savings, increased fees 5%, reallocated CGF

Impacts to community and clients:

- Timeliness of access and disruption of care for clients
- Greater reliance on Medicaid and one-time grants
- Maintain EH service levels while minimizing cost increases to businesses



FY 2026 PH Five-Year Forecast

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029	FY 2030
Ending Working Capital	\$ 3,517,118	\$ 3,357,226	\$ 2,221,131	\$ 845,793	\$ (898,358)	\$ (2,984,091)

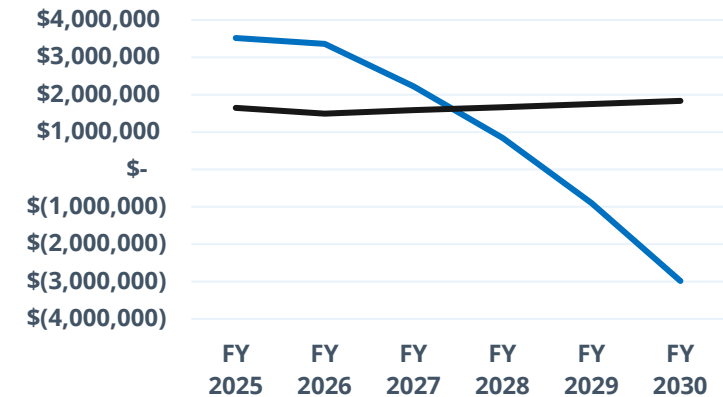
Revenue

Beginning Working Capital	\$ 4,975,895	\$ 3,590,801	\$ 3,357,226	\$ 2,221,131	\$ 845,793	\$ (898,358)
All other Revenues	19,170,643	18,430,735	18,699,275	19,439,693	20,102,591	20,847,699
Total Revenue	\$ 24,146,538	\$ 22,021,536	\$ 22,056,501	\$ 21,660,824	\$ 20,948,384	\$ 19,949,341

Expenditures

Personnel	\$ 14,651,478	\$ 14,763,608	\$ 15,754,508	\$ 16,542,233	\$ 17,369,345	\$ 18,237,812
Materials and Services	3,327,829	2,191,296	2,235,261	2,280,106	2,325,847	2,372,503
Capital	-	-	-	-	-	-
Debt Service	6,966	6,966	6,966	6,966	6,966	6,966
Transfers Out	2,643,147	1,702,440	1,838,635	1,985,726	2,144,584	2,316,151
Total Expenditures	\$ 20,629,420	\$ 18,664,310	\$ 19,835,370	\$ 20,815,031	\$ 21,846,742	\$ 22,933,432
Ending Working Capital	\$ 3,517,118	\$ 3,357,226	\$ 2,221,131	\$ 845,793	\$ (898,358)	\$ (2,984,091)

Five-Year Forecast



— Ending Working Capital
— Minimum Working Capital Policy



FY 2026 PH Five-Year Forecast

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029	FY 2030
Ending Working Capital	\$ 3,517,118	\$ 3,357,226	\$ 3,010,637	\$ 2,855,255	\$ 2,446,254	\$ 1,879,403

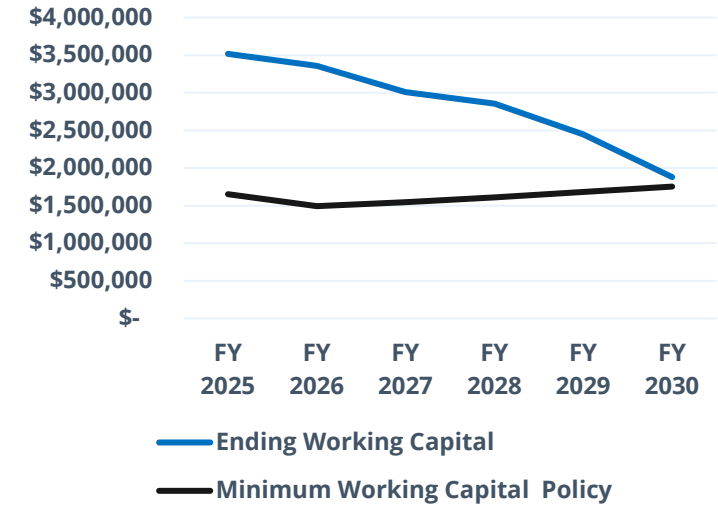
Revenue

Beginning Working Capital	\$ 4,975,895	\$ 3,590,801	\$ 3,357,226	\$ 3,010,637	\$ 2,855,255	\$ 2,446,254
All other Revenues	19,170,643	18,430,735	18,699,275	19,439,693	20,102,591	20,847,699
2% Surprise			300,000	500,000	500,000	500,000
Total Revenue	\$ 24,146,538	\$ 22,021,536	\$ 22,356,501	\$ 22,950,330	\$ 23,457,846	\$ 23,793,953

Expenditures

Personnel	\$ 14,651,478	\$ 14,763,608	\$ 15,754,508	\$ 16,542,233	\$ 17,369,345	\$ 18,237,812
Materials and Services	3,327,829	2,191,296	2,235,261	2,280,106	2,325,847	2,372,503
Capital	-	-	-	-	-	-
Debt Service	6,966	6,966	6,966	6,966	6,966	6,966
Transfers Out	2,643,147	1,702,440	1,838,635	1,985,726	2,144,584	2,316,151
Cost Savings			(489,506)	(719,956)	(835,149)	(1,018,882)
Total Expenditures	\$ 20,629,420	\$ 18,664,310	\$ 19,345,864	\$ 20,095,075	\$ 21,011,593	\$ 21,914,550
Ending Working Capital	\$ 3,517,118	\$ 3,357,226	\$ 3,010,637	\$ 2,855,255	\$ 2,446,254	\$ 1,879,403

Five-Year Forecast



FY 2026 PH Opportunities & Unknowns

- Federal Funding
- Revenue generating services
- Community partner collaboration
- Public Health Modernization (state funding)



Thank you



FY 2026 Proposed Budget Presentation

OSU Extension & 4-H

Presenters:

Nicole Strong, Regional Director

Dan Denning, Advisory Council Member

Diane Tolzman, Advisory Council Member



Budget Committee Meeting | May 14, 2025

OSU Extension Overview



Oregon State University
Extension Service
Deschutes County

- 4-H • Crops and Forage
- Forestry / Fire • Family & Community Health / SNAP-Ed
- Home Horticulture • Juntos / Open Campus
- Livestock and Range

Mission

The Oregon State University Extension Service engages the people of Oregon with research-based knowledge and education that strengthen communities and economies, sustain natural resources, and promote healthy families and individuals.



Extension Accomplishments

4-H Youth Development:

700+ youth club members

100+ Volunteers

High Desert Leadership Retreat

Camp Tumbleweed

STEM Classes and Day Camps

CURRENTLY HIRING!

<https://jobs.oregonstate.edu/>

Posting 168047

Agriculture:

108 active Master Gardener volunteers

6,796 volunteer hours!

3 Community Gardens

High Desert Garden Tour July 19

2nd Small Farm School in 2025, 80+ participants

Forage and Crop Field Days

Hemp Economic Feasibility Work



Extension Accomplishments

Family and Community Health:

Emergency Preparedness

Master Food Preservers

SNAP-Ed in our schools

Food Safety Hotline

Agristress Hotline

Community Coalition Efforts

Forestry / Fire:

Forest Collaborative Efforts

TREX Training

Over 600+ workshop participants

Juntos / Open Campus:

213 middle and high school students mentored in career / college readiness.



FY 2026 Extension Budget Details

Requirements

- Estimated payroll and support: \$609k
- ISF and Audit fees: \$59k
- Materials & Services: \$205k
- Debt service \$60k: (payment 8 of 20)
- Contingency \$137k: (minimum \$64k)
- **TOTAL REQUIREMENTS \$1.075 M**

Resources

- FY25 Projected Tax/Investments: \$771k
- Projected Carryover: \$305k
- **TOTAL RESOURCES \$1.076 M**



Current Challenges & Future Initiatives

Challenges

- Working through transition for Office Manager and 4-H faculty positions.
- Balancing Extension and Fairground business needs

Future Initiatives

- Collaboration on a complex Lease / Sublease structure
- Mobile Extension Vehicle
- OSU Cascades integrated research and Innovation District



Extension & Engagement Leadership



Kristopher Elliott

Vice Provost and Director,
Extension and Engagement



Thank you for your support!

GO BEAVS!



FY 2026 Proposed Budget Presentation

Sunriver Service District



Presenter:
Administrator Mindy Holliday



District Overview



Sunriver Police Department

- Chief Pete Rasic

Sunriver Fire Department

- Chief Bill Boos

District Administration

- Administrator Mindy Holliday

Mission: Protecting life and property, fostering a sense of safety and security in the Sunriver community.



District Accomplishments



- Moved into new Public Safety Building, construction remains on budget and on time
- Hired new Police chief
- Continued transition and cost-reduction for general services
- Fully implemented License Plate Reader system
- Significant learnings from Little Lava Fire near Sunriver



FY 2026 715 Budget Summary



- Tax revenue growth projected 3.2%
- Fire and Police CBA negotiations ongoing
- Requirements increase of 5.2%
 - Worker's Comp, PERS, Health Insurance increases
 - Materials and Services remained flat compared to FY24-25
- Maintaining Reserve Fund contribution
 - Net recovery contribution only
 - New reserve study for both building and equipment planned to complete this year



FY 2026 716 Budget Summary



- Contribution matches expenditures for FY26
- Fire
 - New vehicle add
 - Replacing end-of-service life-saving equipment
- Police
 - Rifle suppressors add



FY 2026 717 Budget Summary



- Majority of spending is complete
 - Evaluating deferred or maintenance options
 - Targeting single project for FY 25-26
- Incremental growth of budget to create Building Reserve Fund
 - Property tax and interest collections above loan payment
 - Arbitrage Rebate Compliance
- In final stages of completing a building reserve study



FY 2026 District Fiscal Issues



Short-term Fiscal Issues

- Property tax growth target 3.2%, limiting options
- At maximum millage rate of \$3.45
- Currently bargaining with labor unions
- Determine new building maintenance and reserve needs

Long-term Fiscal Issues

- Expected regular growth rate under 3.5%
- Upcoming high-dollar capital equipment needs (ambulance, ladder truck)
- Maintaining service levels as overall costs increase



Current Challenges/Future Initiatives



Current Challenges

- Closing staffing vacancies
- Future building costs/deferred projects
- Managing District costs

Future Initiatives

- Active cost reduction in contracts, insurance costs
- Expanded reserve study to include new building and revised equipment costs
- Increasing District revenue



Thank you



DESCHUTES COUNTY HEALTH SERVICES PROVIDERS

Community members frequently inquire about the role of Health Services. Health Services is a vital County department dedicated to addressing a wide range of mandates and meeting the diverse health needs of the community. Our Mission is **to promote and protect the health and safety of our community**. This overarching mission takes form in a set of priorities aimed at ensuring **access**, **community well-being**, **meaningful outcomes**, a prepared **workforce**, **sustainable** use of resources and **resilience** in the face of emergencies.

Below we highlight the work of Health Services staff to better illustrate what Health Services does in the community. The staff featured represent just a few of the key roles dedicated to achieving the priorities and goals of Health Services.



BEHAVIORAL HEALTH MEDICAL TEAM: **Skilled nursing in the community**

Kim started with the county in 2021 as a nurse serving our Assertive Community Treatment team. She typically carries a caseload of **30 to 40** clients with severe mental health conditions and co-occurring physical health and or substance abuse issues. She works as part of a small intensive community based interdisciplinary team that provides comprehensive, holistic care.

Kim's role on the team is to develop and implement a holistic nursing care plan focused on medication adherence, health literacy, and health education. On any given day, you may find Kim administering medications, educating clients and family members, and monitoring treatment progress.

Other duties include case management, crisis intervention, advocacy and skills training. Ultimately, **Kim** works to empower our clients to manage their complex health conditions as independently as possible.



COMMUNICABLE DISEASE PROGRAM: Preventing outbreaks, protecting our community

Charlotte has been serving Deschutes County since January of 2022 as a Public Health Nurse and Disease Intervention Specialist in the STI / HIV Program where she follows-up on reportable STIs ensuring treatment, providing education, and working to reduce transmission in Central Oregon. On any given day Charlotte can be found in the clinic testing and treating clients, on our outreach testing van providing screening services to the community, or in the field searching for individuals with high barriers to getting care such as a recent field visit to look for a pregnant woman living in a homeless camp who tested positive for syphilis and needed adequate treatment to prevent congenital syphilis. Our STI/HIV Program responded to **538** reportable diseases and provided **1,164** STI tests (HIV, Hep C, and syphilis).



Kelly is a Tri-County Infection Prevention Public Health Nurse and has been with Deschutes County since August 2022. In her time here, she has been the lead investigator for **148** congregate setting outbreaks while providing backup support for another **54** outbreaks. She works with the medical and administrative staff at these facilities to mitigate current outbreaks while working to implement measures to prevent future outbreaks, thus protecting both the residents and staff from avoidable infections within healthcare settings.



Adrienne is a Regional Communicable Disease Epidemiologist where she conducts regional surveillance on communicable diseases and other health indicators, and shares timely information with staff, health care providers, partners, and the public, through multiple channels of communication. **418** people subscribed to her flu reports in 2024. The data she provides helps healthcare professionals make important decisions regarding client/patient care and education

INTELLECTUAL & DEVELOPMENTAL DISABILITIES SERVICES: Supporting disabled persons in their homes

Josie has been a Services Coordinator with the Intellectual and Developmental Disabilities program for 27 years. She has a passion for providing case management to school aged clients and typically has **50-55 kids on her caseload**. Over all her years of service, she has maintained an ability to listen and engage families and individuals with empathy as well as exhibiting a positive and encouraging outlook. Josie is a silent leader in the IDD program. She is recognized by her colleagues as a model for how to take a person-centered and relational approach in every interaction. She uses her vast experience and knowledge of our community, as well as her ability to build trusting relationships with people, to help families navigate through whatever disability-related challenges they may be dealing with.

PREVENTION: Reducing suicide risk and strengthening youth

Bethany has been a prevention specialist in Public Health since 2021. This past year, she helped to train over **1,400** people in our community to learn risk factors and warning signs for suicide. Attendees ranged from community members to staff from schools, churches, parks and recreation districts and the healthcare system. This work helps to save lives. One training participant shared, *“I feel much more prepared to offer help and support to a person considering suicide. I feel more secure in my ability to ask the right questions.”* If you or someone you know is having thoughts of suicide please call, text, or chat 988 for help at any time, day or night.



Close to **4,000 families** at Caldera High School and High Desert Middle School received important health information for their kids thanks to the efforts of Healthy Schools Public Health Specialist, Hailey. **Hailey** ensured that families in these schools received timely information on everything from teen driving safety, Cell Phone Safety to e-bike safety and mental health resources. **Hailey** has been with County in various roles since 2019. In 2023 she completed a master's in public health so she could expand her career at DCHS to make a direct, positive impact in our community.

OLDER ADULTS TEAM: Supporting mentally ill adults in their home as they age

Life expectancy for people with Serious Mental Illness (SMI) has increased. The **Older Adults Team** (3.5 FTE) which provided ~ **1,800** visits in 2024, team is on the frontline of learning how to support people with SMI after age 70.

Becky, a case manager who has worked with the Older Adults team for five years, supports a caseload of **40** complex older adult clients who are at risk for psychiatric and medical complications due to the complexity of cognitive decline combined with serious mental illness.

Becky's days are filled with helping her clients with daily living activities such as: shopping, medication adherence, paying bills, communicating with care givers, supporting transitions into higher levels of care, and maintaining access to medical care. She engages with medical specialists and caregivers to help them understand the complexity of the client's illnesses and advocates for assessment of conditions that would go undiagnosed and untreated without her efforts.

Becky is part of a team that believes in providing excellent care, where the dignity and respect for each client and their wishes are honored. As the silver tsunami approaches (all baby boomers will be age 65 or older by 2030), the demand for this specialty is likely to increase in our community.



FOUNDATIONS: Rental assistance for adults with severe mental illness



Mara is the case manager for the FOUNDATIONS program, a state-funded rental assistance program developed in 2014 to address a lack of access to affordable housing for people with Serious and Persistent Mental Illness (SPMI). This program administers long-term rental assistance and provides direct in-home supports to keep participants housed.

On a daily basis, **Mara** advocates with property management companies, ensures rent payments are processed, supports participants with understanding and following their lease, teaches budgeting skills, how to be a good neighbor, and many other services that support high risk individuals with gaining and maintaining housing. For many, Mara's work is the difference between stable housing and homelessness. In

2024, this two-person team provided **982** visits, **\$219,095** in rental assistance to **52** households and countless services to keep this vulnerable population housed.

ENVIRONMENTAL HEALTH & PREPAREDNESS: Ensuring safety of our food and water

With 25 years at Deschutes County, **Jeff's** expertise is evident. Last year, he conducted **32** comprehensive sanitary surveys on public water systems to ensure safe drinking water. His efforts also included addressing **25** violations, following up on **17** significant deficiencies, and managing **5** boil water advisories. He led the Private Well Awareness Program, mentoring an intern, sampling **51** wells, and providing homeowners with technical guidance. Beyond routine work, **Jeff** dedicated many hours to keeping the Saddleback community's 104 homes supplied with water, coordinating stakeholders to resolve regulatory, legal, and infrastructure challenges—ultimately helping to secure a new well and operator for the system.



Adrienne became a Registered Environmental Health Specialist only recently, but in her two years with DCHS, she has hit the ground running. She took on the Mobile Food Unit (MFU) inspection program, creating successful relationships in a constantly evolving industry. With over **290** licensed MFUs and **35** pods—plus four more proposed in Bend—these inspections are a major part of the county's food safety efforts. In 2024 alone, 79 pre-opening inspections highlighted the continued growth of this food service model. Adrienne conducted **547** field inspections, including routine checks, reinspection's, complaint investigations, and consultations, ensuring compliance, mitigating risks, and educating operators on disease prevention.

CRISIS PROGRAM: Crisis response, freeing Officer time, and saving lives

The Deschutes County Behavioral Health Crisis Program provides essential crisis services to the community through the Deschutes County Stabilization Center (DCSC). These services include voluntary crisis walk-in and 23-hour adult respite, the Community-Based Crisis Response



Team (CCRT), and Crisis Intervention Training (CIT). At the heart of this program are dedicated professionals who bring empathy, resilience, and unwavering commitment to those in crisis. This team has served over **10,108** individuals out of the Stabilization center and **6,205** individuals since beginning CCRT in May 2023. The impact of the Crisis Program is broad: Law Enforcement **drop-off time is under 4 minutes**, returning officers to the street to provide public safety; **166** people self-report they would have ended their life without our help; and **3,083** do not know what they would have done without us.

Darla, a licensed counselor, has been a vital part of the crisis program for nearly three years. Her passion for behavioral health stems from a lifelong role as a source of support for others, coupled with personal experiences that led her to pursue a career in counseling. **Darla** believes in the power of personal growth and balance, and her dedication shines through in her daily work. Most days, **Darla** will be the first one to volunteer to see a youth in crisis at DCSC. She never shies away from supporting any individual in crisis, whether it is at the Stabilization center, or on CCRT.

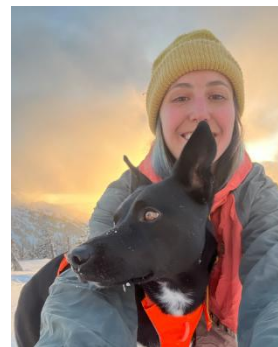
Dominique (Dom), is one of the program's newest Peer Support Specialists, working night shift. His journey within the crisis team began before he was officially hired by DCBH, as he initially served as a security contractor at the stabilization center. He later transitioned into a Behavioral Health Technician role before becoming a Peer Support Specialist. **Dom's** deep connection with the client population and his commitment to their well-being led him to shift from day work to night shifts, where he finds the most fulfillment in admitting clients to respite, talking with them as they settle in, and providing hope and support as they face a crisis. As a peer, **Dom** now has the opportunity to bring his unique lived experience to directly supporting clients, a role in which he continues to thrive and grow.



Katie is a case manager and an integral part of the crisis program since 2021, serving as a team lead primarily within CCRT. With a remarkable ability to remain calm in crisis, she skillfully provides support over the phone or in person, whether in an office setting or on the

side of a road with someone in crisis. **Katie's** empathy and patience help her to connect deeply with those in crisis, offering them critical support and guidance. Her ability to manage high-stakes situations with grace and composure is invaluable to the program.

Each of these dedicated professionals plays a crucial role in supporting individuals during their most difficult moments. Their compassion, resilience, and unwavering commitment to crisis work make a profound impact on the community, ensuring that no one has to face their struggles alone.



WOMEN, INFANTS & CHILDREN (WIC): Ensuring nutrition and care to newborns



Ashley is a registered dietitian for Deschutes County WIC Program. As a WIC dietitian she assesses the nutritional needs of WIC participants, provides personalized nutrition counseling and education, and develops individualized care plans. In 2024, Ashley provided **1,585** nutrition counseling visits covering topics like gestational diabetes, food allergies, and childhood feeding problems, to name a few. In 2024, WIC

enrolled **1,015** infants, **684** pregnant individuals, and overall had **8,773** client appointments and **11,183** nutrition education contacts. DCHS WIC ended the year with a participating caseload of **3,419** of which 56% were children 1-5 years old, 20% infants, and 25% pregnant individuals.

PERINATAL CARE COORDINATION: Getting children off to a healthy start

Theresa, a Perinatal Care Coordinator for Deschutes County Health Services, helps pregnant and postpartum individuals' access and enroll in local programs and resources that support healthy birth and health outcomes. In 2024, she assisted **597** individuals with programs such as WIC, OHP, and Nurse Home Visiting, as well as prenatal and postpartum care, behavioral health, dental, primary, and vision care. Theresa makes it easy for individuals to reach out for help, meeting them at our Public Health buildings, on the phone, by telehealth, and is embedded in our two largest OB offices.

WRAPAROUND: Keeping high risk children in their homes, schools and community

Rebekah is a Wraparound Care Coordinator with Intensive Youth Services, bringing 15 years of experience. The Wraparound Program supports **95 children and families** (ages 0-18) at risk of out-of-home, school, or community placement due to mental health challenges. These include children in emergency rooms, hospitals, juvenile detention, or those with complex behavioral, intellectual, medical, or substance use needs.

Rebekah facilitates team meetings across Deschutes County and Northern Klamath, traveling extensively. Using the Wraparound fidelity model, she collaborates with community

partners and natural supports to create personalized, community-based plans. She also provides skill-building sessions in homes, groups, and individually, focusing on problem-solving, emotion regulation, coping skills, community integration, and social skills.

In crises, **Rebekah** swiftly develops safety plans, coordinates therapist assessments, and provides tools for environmental changes to support client well-being and **keep children in their home and community**. Additionally, she bridges the gap between Behavioral Health and Intellectual Disabilities services by offering training and on-site consultation.

YOUNG ADULTS IN TRANSITION & *THE DROP*: Inviting at-risk youth and young adults in

Dustin, a Case Manager and Certified Drug & Alcohol Counselor with 8 years at Intensive Youth Services, **supports 77 young adults (ages 14-25)** on the Young Adults in Transition team. His day often starts with urgent situations, such as clients in police custody, facing homelessness, or experiencing mental health crises.



Dustin coordinates with therapists, families, medical providers, schools, and community partners to create plans that may include inpatient care referrals, harm reduction, medication management, and therapy. He covers the communities of Sisters, Redmond, Bend, and LaPine, providing local appointments focused on resource connections, school/work improvement, and skill-building to enhance coping and functioning.

Dustin also leads multidisciplinary meetings, facilitates substance abuse groups, and oversees the Bend Drop-in Center (*The Drop*) three days a week. **In 2024, *The Drop* served over 1,000 clients in Deschutes County, with 761 visits in Bend.**

ADMINISTRATIVE SUPPORTS FOR OUR WORK: Data Driven Planning and Language Access

Tyler chose a career as a Data Analyst in public health to use his skills for meaningful impact in underserved communities, promoting equitable healthcare access. He says, “It’s a personal mission to contribute to systems that improve lives through data-driven strategies.”

Tyler came to Health Services in part to support the historic launch of our Certified Community Behavioral Health Clinic (CCBHC) pilot project, which had significant data and accountability requirements. As a Lead Data Analyst, **Tyler** helped build and track CCBHC metrics, a major achievement



which ultimately demonstrated DCHS' strong performance as compared to the State and other CCBHCs.

Some of **Tyler's** proudest accomplishments are expanding the capacity of data-sharing tools like Power BI dashboards and optimizing processes to save time and resources. For example, **Tyler's** projects **freed up .25 FTE** for the fiscal team by merging data sets and **saved 60 hours/year of staff time** by automating chart searches. **Tyler** currently supports **nine grants**, which account for **35% of our budget**.



Fun fact: In college, **Tyler** worked at Walla Walla Foundry, creating art castings for global artists. Notable projects included the SeaTac Airport Bronze Deborah Butterfield horse sculpture, *Blackleaf*.

Carmen Salazar, our **Language Access Program Analyst**, leads the program with dedication and expertise. She has worked for Health Services for **14 years** and now holds a critical role in ensuring that individuals with limited English proficiency, particularly Spanish speakers, can access health services in a language they understand.

Carmen's responsibilities include identifying and managing vendor partnerships, researching new initiatives, and training County staff in how best to serve non-English speakers and the deaf community. As a **qualified bilingual medical interpreter with extensive experience** across multiple programs and departments within Deschutes County Health Services, she brings a deep cultural and linguistic understanding to her work. This bicultural perspective helps patients feel more comfortable and confident when receiving care.



Currently, the Language Access Program actively supports **280** clients through interpretation and translation services across various health programs. Health Services also has bilingual staff answering phones, providing mental health therapy, and delivering nursing care in the community. **Carmen** ensures the resources needed to do this work are available and that we meet our contractual and service obligation to provide **100% of client facing information** — such as doctor's instructions, after-visit summaries, and care plans—in the language patients understand. Her work is foundational to our efforts to ensure access and provide high-quality care to all residents of Deschutes County, regardless of the language they speak.

FY26 Annual Report

Department Level
Financials

Program Level
Financials

Capital Requests

Line Item Budgets

Limited Growth
Forms



HEALTH SERVICES

FISCAL YEAR 2026

FY26 ANNUAL REPORT

Deschutes County Health Services



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LETTER FROM THE DIRECTOR

Dear Health Services Staff and Community Partners,

We move into 2025 with a mixture of anticipation and concern for what is ahead. For me that anticipation is rooted in my trust in the excellence of our staff. Our work together in 2024 was extensive. Our foundation of expertise, care, credibility and trust within our community is strong. We are well-positioned in Health Services to continue innovating to meet the evolving needs of our community and to weather the challenges on the horizon.

This year we expanded services, formed new partnerships, and launched innovative solutions to address the most pressing needs in public and behavioral health. Below are just a few examples that reflect the hard work of staff, their resilience, and their unwavering commitment to improving the well-being of our community.

Public Health Innovations

- Women Infants & Children celebrated 50 years of serving our community, added services in Terrebonne, and experienced a 17% increase in participation since 2023.
- HIV/STI Staff conducted 59 outreach testing events providing rapid testing, education and referrals, and saw declines in new syphilis cases. The team also partnered with OHA to provide local training events for health care providers to improve their knowledge, identification and treatment of STIs.
- Three years of Healthy Schools helped prevent 21% of the expected number of emergency departments visits related to suicide, substance use, depression, and mental health for youth ages 11-17.
- The ASPIRE Grant achieved by Environmental Health, facilitated equipping childcare homes with air monitors.
- In partnership with Bend Fire & Rescue and St. Charles, we trained Medical Reserve Corps members in "Stop the Bleed" techniques, and with Central Oregon Suicide Prevention Alliance (COSPA) DCHS launched the first Secure Firearm Storage campaign.
- 500 heat stress kits were distributed to 24 organizations that serve extremely vulnerable populations to prepare for extreme heat
- Immunization services were expanded to uninsured populations in North County.

Behavioral Health Highlights

- DCHS completed a Request for Proposals for a 16-bed Secure Residential Treatment Facility in Redmond. The SRTF is set for completion in 2027.

- Launched a scholarship program to expand the mental health workforce.
- Intern applications increased by 47% and retention improved by 63%.
- A Forensic & Acute Services Program was launched to bring together forensic and residential care teams to improve coordination for our highest risk clients.
- The Drop opened drop-in services to at risk youth in Redmond.
- Collaboration helped raise funds for a child psychiatric facility in Central Oregon.
- Renovations at CCYF, SOCO, WSSB, and Courtney buildings were planned to improve functionality while making use of existing properties.

Additional Milestones

- The Stabilization Center celebrated its 4th year of saving lives, keeping officers on the street and supporting crisis work in the community.
- The Health Services Director completed visits with all 46 teams to roll out key problem-solving and culture improvement projects across Health Services.

As I contemplate leaving this work for retirement, I'm aware of the uncertainty of this time, of the impact change can have on the communities we serve and on those of us who serve them. I'm reminded of the wise words of others who navigated uncertainty. Dan Rather, a respected journalist who witnessed decades of events, wrote:

"Two powerful words...shaped both my personal and professional life...These words, often shared by my father, have guided me through challenges and triumphs...He would often say, 'Steady.' 'Courage.' when things seemed uncertain, offering both comfort and strength."

And from Sarah-Patton Boyle, a prominent civil rights advocate in the 1950's and 1960's:

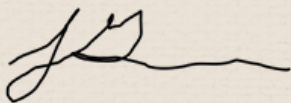
"Service is love in action, love "made flesh"; service is the body, the incarnation of love. Love is the impetus, service the act, and creativity the result with many by-products."

These values – love, courage, steadiness, creativity – are at the core of all we accomplished together this year, the by-products of our creativity and care. They will be the bedrock of how we continue to serve with steadiness through change and uncertainty.

I'm heartened by the visits I had with your teams. Your dedication, collaboration, skills, and genuine care for the people we serve shine. While the content of this report is factual and at times dry, I hope that you, our staff and community partners, can see yourselves within. It is the concrete representation of each of you and of the acts of service you engage in every day with unflagging integrity and dedication to the people and community we serve.

I want to express my deep gratitude for my time with you. I've learned so much from your humility, courage, resilience, talent and love for our community. It's been an honor.
each of you.

With sincere thanks,



Health Services Director

To Promote and Protect the Health and Safety of Our Community

Health Services FY25 Strategic Plan



Mission: To promote and protect the health and safety of our community.

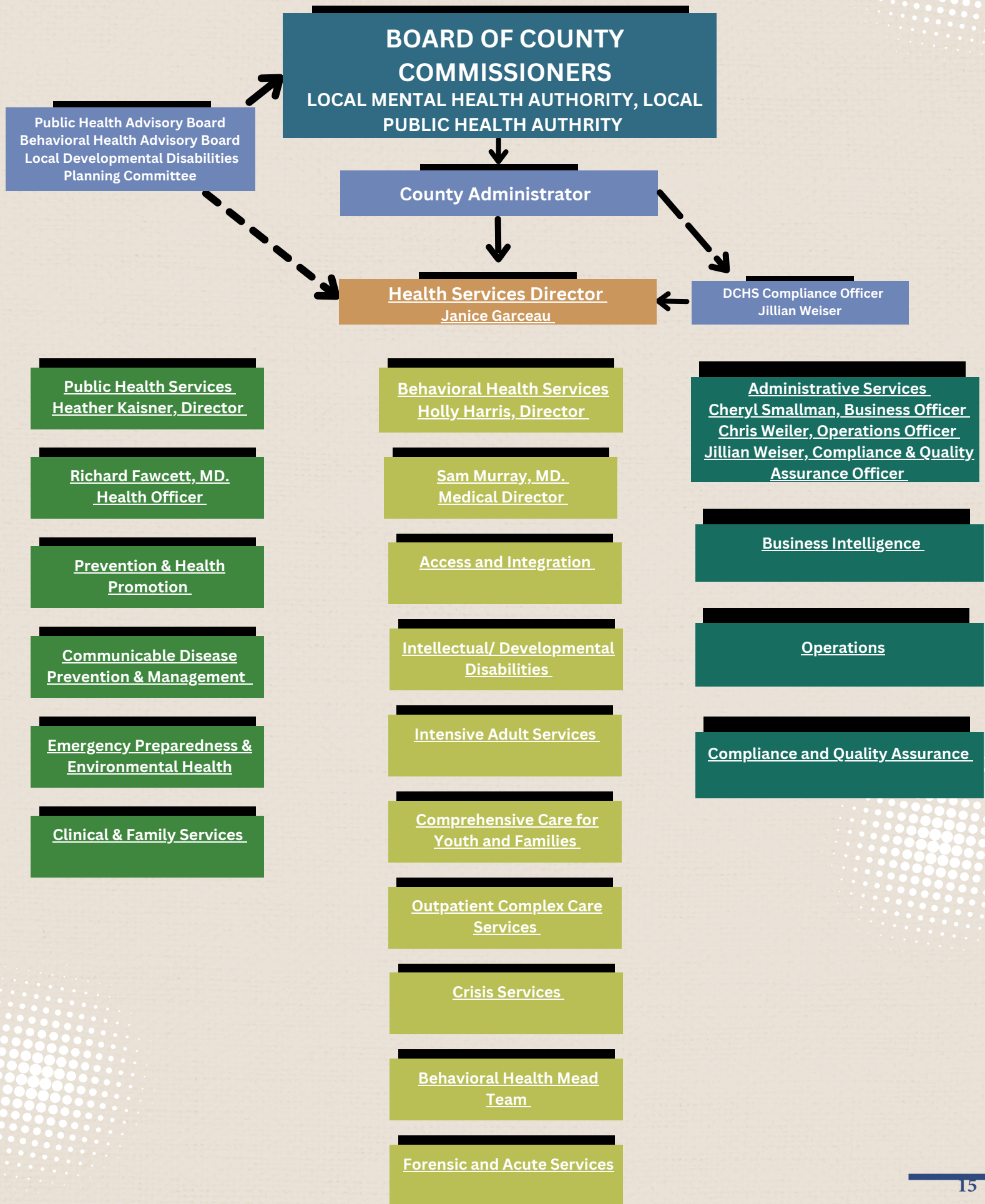
Vision: We envision a future where every person in our community has access to resources that promote physical, mental, and social well-being. Through compassion, innovation, and collaboration, we strive to create a healthy and resilient community.

Values:	Empowerment	Prioritizing actions to drive change, ensure access, build capacity and promote resilience.
	Excellence	Bringing the highest level of ethics, skill, and integrity to deliver quality services.
	Equity & Inclusion	Embracing diversity and advancing health equity through awareness and respect in our workplace and community.
	Healthy Workplace	Starting from within, acting with self-awareness, humility, and grace to promote a workplace characterized by physical and emotional safety.
	Partnership	Building relationships that reflect growth, authenticity, and mutual respect.
	Innovation	Bringing curiosity, flexibility, and courage to solving complex problems.
	Stewardship	Applying the best data, science, and information available to manage public resources effectively and efficiently.

Priorities:

Access	Community	Outcomes	Workforce	Sustainability	Resiliency
Ensure access to culturally appropriate programs & services	Empower people to thrive in healthy, supportive environments	Demonstrate meaningful impact for individuals & community	Develop & support a diverse, excellent workforce	Assure sustainable funding & efficient, compliant practices	Effectively prepare ourselves & our community to prevent & respond to evolving health needs

ORGANIZATIONAL CHART



PERSONNEL HIGHLIGHTS

423

Total FTE

Director's Office	2.00
Admin Services	53.50
Behavioral Health	291.82
Public Health	99.93

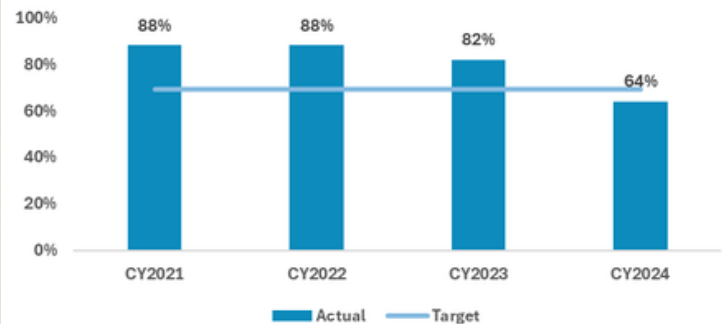
38

Number of new positions created in FY24

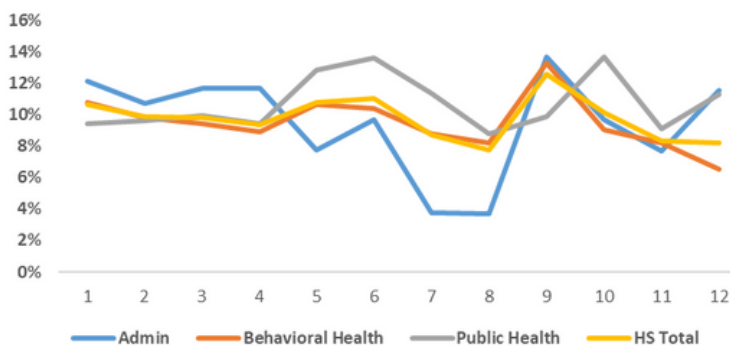
12

Number of positions reallocated in FY25

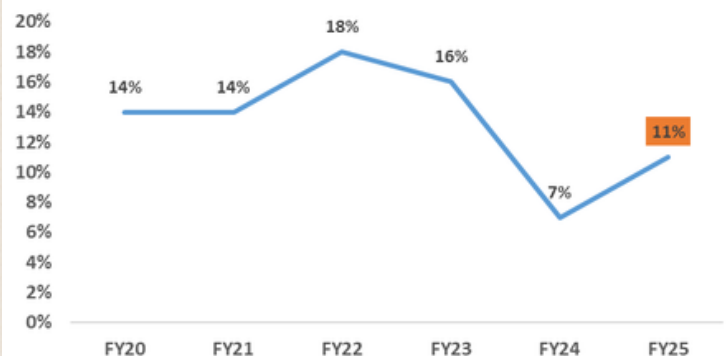
Recommend Deschutes County Health Services as an Employer



Vacancy Over Time - CY2024

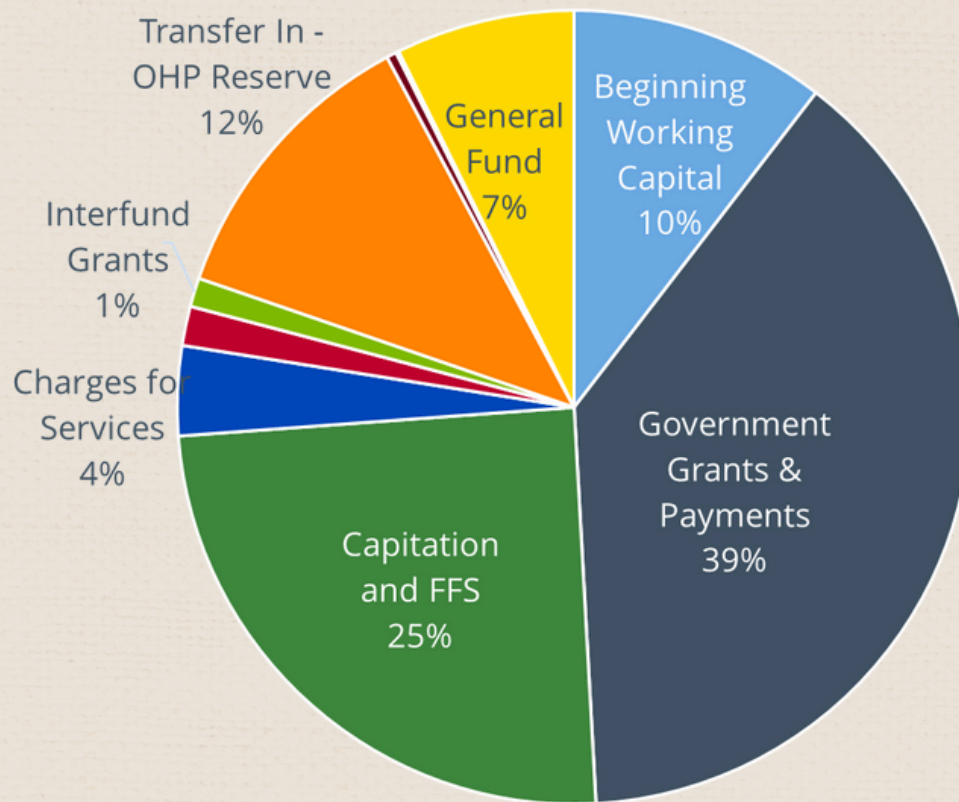


Health Services Employee Turnover Rate

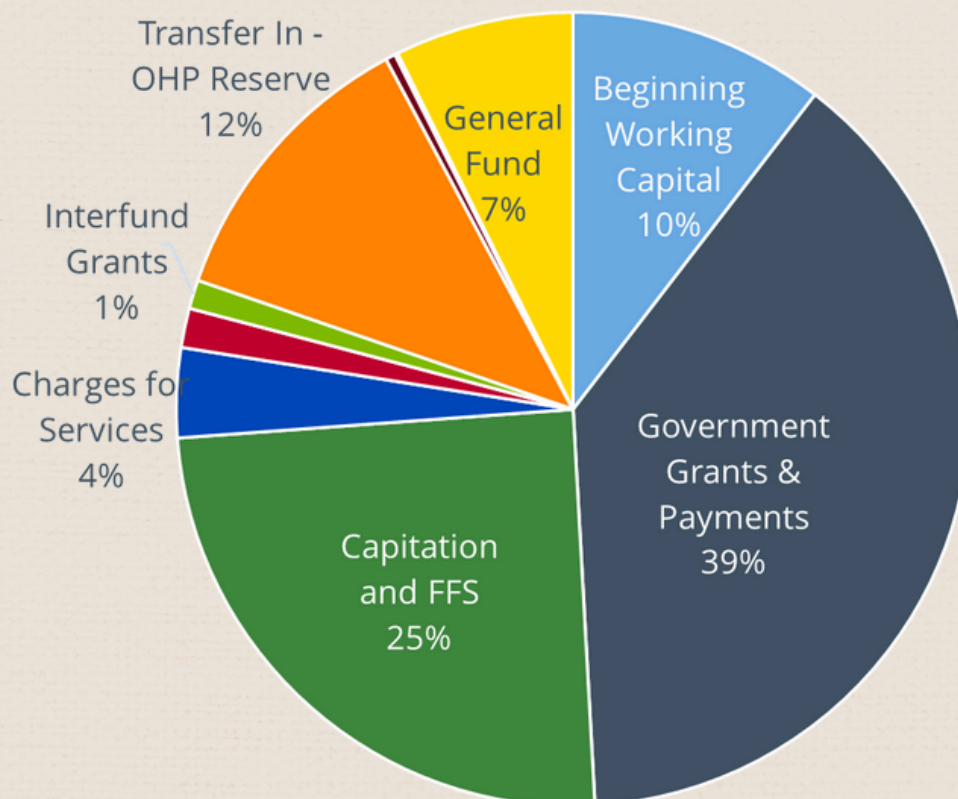


FINANCIAL HIGHLIGHTS

FY25-26 Resources



FY25-26 Requirements



DIRECTOR'S OFFICE [HSDIRECTR]

This program provides agency-wide leadership and oversees programs and activities with broad public, community partner, inter-agency and cross-jurisdictional impact and involvement, including strategic planning and communication, fiscal viability and accountability and workforce development.

Primary Contact: Janice Garceau, Director of Health Services
website: <https://www.deschutes.org/health/page/behavioral-health>

FY 25 Highlights and Accomplishments

- Launched a comprehensive orientation program covering Health Services' Purpose, Mission, Vision, Values, and Culture for new hires.
- Formalized Chartered Workgroups to drive meaningful support and measurable outcomes.
- Implemented a Culture Framework across the department based on staff survey feedback.
- Directed fiscal and talent resources toward impactful improvement projects.
- Supported streamlining of Behavioral Health and Public Health for cost savings and better performance.
- Partnered on key community initiatives like the Regional Health Improvement Assessment, Juniper Ridge Safe Stay Area, and legislative efforts to reduce administrative burdens.

FY 26 Challenges and Opportunities

- Addressing the imbalance in Public Health and Behavioral Health funding, revenue streams, size, and expenditures.
- Ongoing strain on services due to housing needs, climate-related emergencies, and increasing acuity among those served.

FTE Changes and Detail

Position	FTE FY25	FTE FY26	CHANGE
DIRECTOR, HLTH SVCS	1	1	
EXECUTIVE ASSISTANT	1	1	
Grand Total	2	2	0

ADMIN SERVICES [HSADMIN]

These programs provide operational and fiscal support, as well as oversight of assets and quality.

Primary Contact: Cheryl Smallman, Business Officer, Chris Weiler, Operations Officer & Jillian Weiser, Compliance and Quality Assurance Officer

Business Intelligence

Conducts fiscal and analytical activities, as well as strategic initiatives to improve the efficiency, effectiveness, and financial stability of the department.

- Fiscal Services
- Contract Services
- Data and Analytics
- Accounting and Grant Management
- Project Management

Operations

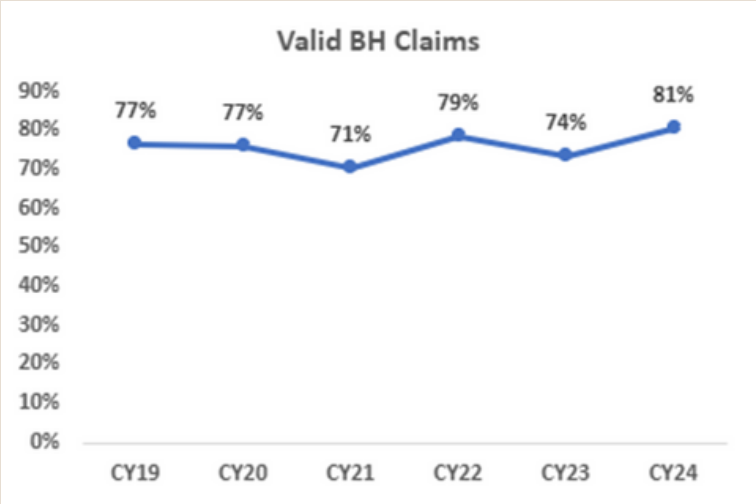
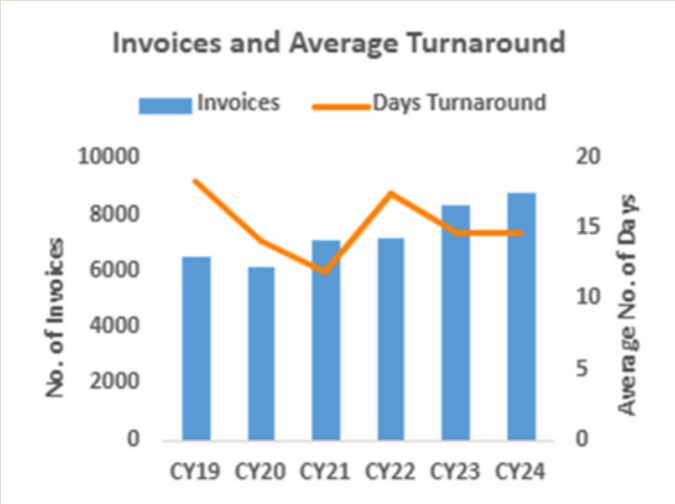
Manages a complex and diverse set of business support services to ensure the department has the tools, equipment and facilities necessary to serve the community safely.

- Medical Records
- Health Information Technology
- Departmentwide Safety and Continuity of Operation Planning
- Billing and Credentialing
- Front Office
- Procurement
- Infrastructure
- Asset Management
- Fleet Vehicle Management
- Vital Records

Compliance and Quality Assurance (CQA)

Provides auditing and oversight of department work to assure ethical conduct and compliance with local, state, federal, and professional standards and regulations.

- Compliance and Quality
- Incident Reporting
- Language Access
- Auditing
- Protective Services
- Policies and Procedures
- HR Support
- Diversity Equity & Inclusion
- Workforce Development
- Privacy



FY 25 Highlights and Accomplishments

- Established the Project Management Office (PMO): The team already created dashboards and tools, worked with leadership to update the organization's Mission, Vision, Values, established strategic priorities, and launched an annual space planning process.
- Developed the Community Impact Report for Behavioral Health Crisis Program. This comprehensive report enhances the department's ability to communicate the scope and impact of Crisis services to community partners and potential funders.
- Launched Vital Records online death certificate platform.
- Implemented my EOP, a mobile application that staff are able to access emergency preparedness plans.
- DCHS became an "Outreach and Engagement" provider for health-related social needs. This includes broadly screening for social determinants of health and providing resources to reduce barriers by connecting Oregon Health Plan members with resources.

FY 26 Challenges and Opportunities

- Staffing across all areas of Administrative Services has not kept pace with other service areas, resulting in absorption of workload without additional bandwidth.
- Understaffing and turnover at both Public Health and Behavioral Health front desks makes public facing coverage across eight buildings in three cities a challenge.
- Language access needs (interpreting/translation) have continued to grow, with challenges in building capacity both internally and externally.
- A new opportunity through Oregon Health Plan that connects community members with supports around social determinants of health challenges is proving challenging to bill and recoup revenue related to it.
- Develop a service vision and long-term office space plan for downtown Bend through Health Services participation in the County's space planning committee.

FY 25 Funding Changes

- Awarded an 18-month Community Capacity Building grant through PacificSource to stand up social determinant of health technology supports.

FY 26 Program Changes

- Bringing in additional resource, and developing clarity and consistency in policy, for bilingual staffing and language access services.
- Move 1.0 FTE Supervisor from Crisis Program to Admin Services
- Combining Public Health Front Office, Women, Infant, and Child (WIC) Front Office, and Vital Records into one team, overseen by Admin Services.

FTE Changes and Detail

Position	FTE FY25	FTE FY26	Change
ACCOUNTANT	1	1	
ACCOUNTING TECH, SR	2	2	
ACCOUNTING TECHNICIAN	2	2	
ADMIN SUPPORT SPEC	5	5	
ADMIN SUPPORT TECH	5	11.8	6.8
ADMINISTRATIVE ASSISTANT	1	1	
APPL SYS ANALYST I	1	1	
BEHAVL HLTH TECH	1	1	
BUSINESS OFFICER, HS	1	1	
CLINICAL INFO SYS ADMIN	4	4	
COMPLIANCE, QUALITY & ASSURANCE OFFICER, HS	1	1	
CONTRACT SPECIALIST	1	1	
CREDENTIALING SPEC	1	1	
HUMAN RES ANALYST	1	1	
LANGUAGE ACCESS COORDINATOR	0	0.5	0.5
LANGUAGE ACCESS PROGRAM ANALYST	1	1	
MANAGEMENT ANALYST	5	5	
MANAGER BUSINESS	1	1	
MANAGER HS OPERATIONS	1	1	
MEDICAL RECORDS TECH	2	2	
OPERATIONS COORDINATOR, HS	1	1	
OPERATIONS OFFICER, HS	1	1	
PATIENT ACCT SPEC I	0.7	0.7	
PATIENT ACCT SPEC II	1.7	1.7	
QUALITY ANALYST	4.5	4.5	
QUALITY ANALYST, SENIOR	1	2	1
SR. DEI STRATEGIST, HS	1	1	
SUPERVISOR HLTH SERV	1	1	
SUPERVISOR, ADMIN	1	3	2
Grand Total	49.9	60.2	10.3



Behavioral Health

To Promote and Protect the Health and Safety of Our Community

\$63.2M

Behavioral Health
operational Budget

3%

Budget supported
by General Funds

281.45 FTE

The Community Mental Health Programs (CMHP) is designated by the Local Mental Health Authority (LMHA) to provide services mandated by ORS 430.610.

What We Do

As the designated CMHP, Deschutes County Behavioral Health ensures a system of comprehensive, coordinated, services to meet the mental health needs of the community. We provide accessible, timely, community-based behavioral health services to Deschutes County residents regardless of ability to pay.

Mandated Services

Justice System Related Services and services that impact rights, such as Aid & Assist or Civil Commitment and Psychiatric Security Review Board Monitoring.

Core Services

Services Required by Rule/Contract such as Jail Diversion or Housing Supports, Older Adult, and Intensive Services provide by programs like Assertive Community Treatment (ACT), First Episode Psychosis (EASA), Stabilization Center, Wraparound services to children, Crisis Services such as 24/7 Mobile Crisis Teams etc.

Safety Net Services

Community-based Services not Provided Elsewhere such as School Based Health Centers or Co-occurring Outpatient Mental Health and Substance Use Disorder Treatment, Supported Housing & Employment, Rental Assistance, Integrated Behavioral & Primary Care, etc.



Local Mental Health
Authority (LMHA)
Governance

County Commissioners and Judges are
the Local Mental Health Authority
(LMHA) for the CMHPs and Community
Developmental Disabilities Program's
(CDDPs) in their counties

The LMHA appoints a
Mental Health Director and
designates the Community
Mental Health Program

Local Mental Health Delegations of Authority

- *Local Mental Health Authority:* County Commissioners - BoCC
- *Local Mental Health Agency (LMHA):* Deschutes County Behavioral Health Division is authorized by the BoCC to perform Public Health LMHA requirements and responsibilities on behalf of the county (Behavioral Health is a division of Health Services)
- *Local Mental Health Administrator:* DCHS Behavioral Health Director, authorized by the BoCC to oversee the Local Mental Health Agency

**Health Services
Director**
Janice Garceau

**Behavioral
Health Director**
Holly Harris

Behavioral Health Programs

Statutorily or contract required services, grant funded and fidelity programs.

Crisis & Stabilization 43.70 FTE	Outpatient Complex Care 40.5 FTE	Forensic & Acute Services 0.0 FTE	Intensive Adult Services 58.1 FTE
<p>A 24-hour program that responds by phone or face-to-face. Services may include assessment, intervention planning, information and referral services. In addition, we provide brief crisis stabilization through individual or group treatment.</p> <ul style="list-style-type: none"> Intervention Planning referral Services 24/7 Crisis Coverage 24/7 Mobile Crisis Services Stabilization Co Responders 	<p>Individual and group treatment services to adults, children, and families with mental health and or alcohol and drug concerns.</p> <ul style="list-style-type: none"> Referral Services for continued care Individual, Family and Group Counseling Integrated Care with Mosaic Medical Co-Occurring Substance Use Treatment Psychiatric Care and medication management Veterans Services Parent Child Interaction Therapy (PCIT) Care Coordination and Skills Training 	<p>Care coordination, referrals, treatment and supports for individuals who are forensically involved or in acute care / residential settings.</p> <ul style="list-style-type: none"> Exceptional Needs Care Coordination (ENCC) Aid and Assist Psychiatric Security Review Board CHOICE MODEL Civil Commitment investigation and monitoring Forensic Diversion 	<p>community based intensive treatment supports to adults with an SPMI diagnoses.</p> <ul style="list-style-type: none"> Aid and Assist Rental Assistance Supported Employment Coordination of Residential Spectrum Two Housing Property Support Outpatient SPMI BH Older Adult BH Care Integrated Care with Mosaic Medical ACT Homeless Outreach Services & Harm Reduction
Comprehensive Care for Youth & Families 47.5 FTE	Access & Integration 33.3 FTE		Intellectual/Developmental Disability Services 48.85 FTE
<p>Provides specialty mental healthcare for individuals ages 0-25 and their families through an array of integrated, intensive outpatient care teams.</p> <ul style="list-style-type: none"> Generation Parent Management Training Oregon (GEN-PMTO) Parent Child Interaction Therapy (PCIT) Young Adults in Transition The Drop Behavioral Health Resource Network Affirming Care (True Colors) School Based Health Centers System of Care Early assessment and support alliance Wraparound 	<p>Provides intake, referrals, and care coordination for individuals of all ages, in addition, provides training and technology support to clinical staff.</p> <ul style="list-style-type: none"> Screenings/ Assessments Referrals Treatment Recommendations Case Management Brief Therapy CCBHC Coordination Rapid Engagement CANS Assessments for DHS Administrative Support for Behavioral Health Teams BH Medical Team 		<p>Supports people with intellectual and/or developmental disabilities (I/DD). Services are aimed at greater access to social interaction, community engagement, and employment opportunities.</p> <ul style="list-style-type: none"> Screening and investigating allegations of abuse for adults with I/DD coordinating protective services to avoid occurrences of abuse Applications and eligibility for services Case Management services- assessment, service plans, authorizing/referring to chosen services and support Monitoring authorized services

How the System is Funded:

CCO

Coordinated Care Organizations are the Managed Care Entities (MCEs) tasked with managing Medicaid dollars to ensure the provision of required healthcare services to OHP members in their region. CCOs contract with CMHPs for behavioral health services to their members. CCO contracts are negotiated annually, Deschutes County includes Fee for Service Revenue, Capitation and Program Allocation lines of reimbursement.

OHA

The Oregon Health Authority provides Medicaid and State General Fund dollars to CMHPs through County Financial Assistance Award (CFAA) contracts for services to indigent uninsured and key strategic investments such as block grants or pilot projects.

Grants

Deschutes County receives local, state and federal grant funds. Most grants are time limited and cover distinct costs. Some grants, such as CCBHC and federal CAHOOTS funding provide enhanced Medicaid payments intended to expand services.

COMMUNITY BEHAVIORAL HEALTH SERVICE CONTINUUM

High Risk
High Need
High Complexity



- Hospitals
- Detox
- Residential



- Community Mental Health Safety Net Programs



- Community Mental Health Safety Net Programs
- Non-Profit Outpatient Specialty Care

Moderate Risk
High Need
High Complexity



- Non-Profit Outpatient Specialty Care
- Community Outpatient Providers

Low Risk
Moderate Need
Moderate Complexity



- Community Outpatient Providers
- Community Based Support Entities

Low Risk
Low Need
Low Complexity

Provider Types

Common Problems Addressed

- Persons immediate danger due to acute psychiatric symptoms and risk of harm to self or others; persons in need of residential care due to severe mental illness impacting ability to live safely without supports in community
- Persons with severe and debilitating mental health conditions often accompanied by psychosis or co-occurring medical diagnosis or substance use disorders; often experience homelessness; may have frequent involvement with law enforcement due to poorly managed acute symptoms.
- Children with serious emotional disturbance or mental illness and multi-system involvement (foster care, Juvenile Justice); often at risk for loss of home or school placement.

- Persons with serious mental illness without psychosis such as Complex PTSD or major depression; history of psychiatric hospitalizations, frequent ER visits, co-occurring physical/substance use conditions; may be at risk of losing housing, employment, or independence.
- Person with Post Traumatic Stress Disorder, eating disorder, moderate depression or anxiety, some family support; struggles to maintain high level of daily functioning and compliance with treatment and medications.

- Self-referred after loss or life circumstance, has family connection, sense of purpose in life, history of stability, current functioning decline (job instability due to symptoms, other destructive behavior, poor insight).

- Life change resulting in trouble sleeping, self-doubt, mild mood changes; no thoughts of suicide or self-harm; trouble managing health due to stress; takes medications as prescribed.

- Overall good life satisfaction, good relationships, productive and connected to others; experiencing minor anxiety; talking with others helps.

Service Types

- Oregon State Hospital
- St Charles Sageview and/or Emergency Psychiatric Services (PES) Beds
- Sagebrush Academy Day Treatment
- Deschutes Recovery Center (DRC)

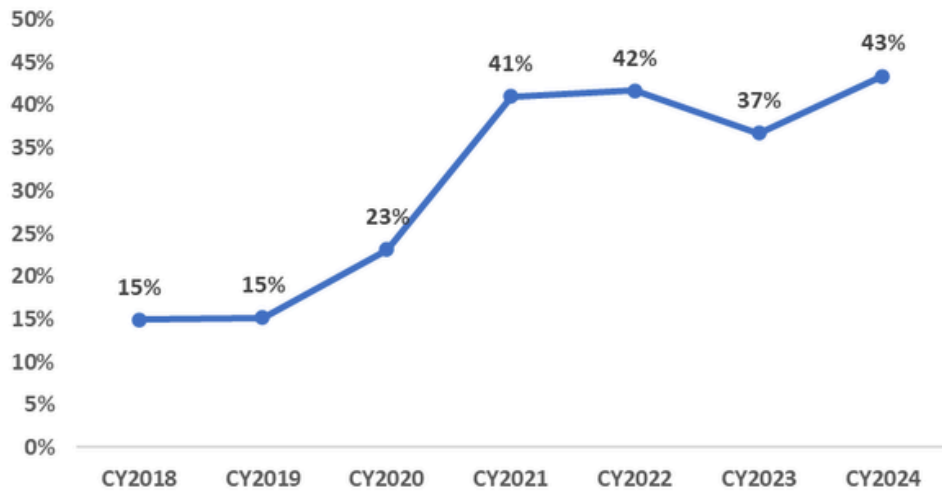
- Deschutes County Health Services (DCHS) Behavioral Health 24/7 Mobile Crisis Response & Stabilization Center
- Youth Villages, Intercept & Intensive In Home Behavioral Health Treatment (IIBHT)
- DCHS Specialty Intensive Community-Based Services
- DCHS Complex Outpatient Care
- Intellectual/Developmental Disability Services
- Private/Non-Profit agency and/or private practice providers

- Private/Non-Profit agency and/or private practice providers
- Primary Care BH Consultants

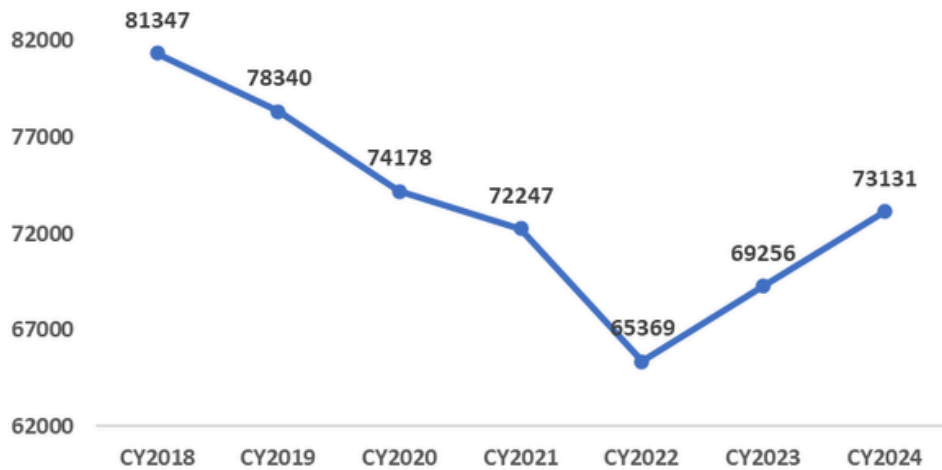
- Private/Non-Profit agency and/or private practice providers
- Family, Friends, Religious Organizations, Support Groups, etc.

BEHAVIORAL HEALTH KEY STATISTICS

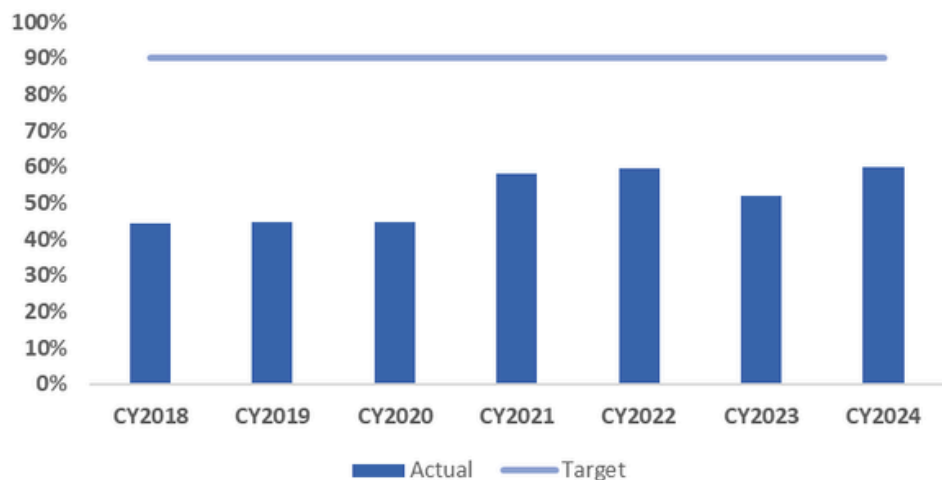
Decreased Scores for Patient Health Questionnaire 9



CLIENT VISITS SINCE CCBHC IMPLEMENTATION



Primary Care Coordination



BEHAVIORAL HEALTH ADMINISTRATION AND CCBHC [HSBHGEN]

This program represents the administrative and managerial functions for the Behavioral Health Division, as well contracts and the budgetary logistics of pass-thru arrangements, and Behavioral Health Front Office. Primary

Contact: Holly Harris, Behavioral Health Deputy Director

<https://www.deschutes.org/health/page/behavioral-health>

Broad Health Goals: Saving Lives

- Reduced mortality and suicide rates.
- Reduced substance abuse.
- Reduced hospitalization.
- Reduced incarceration.
- Reduced homelessness.

Intended Benefits for Community Mental Health

- Expand array of addictions and mental health services.
- Integrate primary care screening and coordination.
- Receive enhanced Medicaid payment rate based on costs.

Healthcare Integration Focus

- Focus on reducing costly, negative health outcomes upstream.
- Increase coordination with primary care
- Conduct routine BMI screenings- hypertension, diabetes, etc.
- Enhance systems to stabilize individuals outside of emergency department and hospital through Peers, Stabilization Services, and Psychiatry.



FY 25 Highlights and Accomplishments

- Obtained funding and completed RFP to develop a new SRTF in Redmond.
- Implemented three workgroups focused on improving access to care, reducing administrative burden and improving clinical outcomes.
- Created the new Forensic and Acute Services Program, which will help align all forensically involved teams under one manager, creating efficiencies and added capacity for other parts of the department.

FY 26 Challenges and Opportunities

- Continued QMHP workforce retention and hiring challenges.
- Cost of living and housing challenges for new and existing employees.
- Rising houselessness for our service population.

FY 25 Funding Changes

- None

FY 26 Program Changes

- None

FTE Changes and Detail

Position	FTE FY25	FTE FY26	Change
ADMINISTRATIVE ASSISTANT	1	1	
DEPUTY DIRECTOR HS	1	1	
MANAGER, BH PROGRAM	6.5	7.5	1
MEDICAL DIRECTOR	0	0.91	0.91
Grand Total	8.5	10.41	1.91

BEHAVIORAL HEALTH ACCESS [HSACCESS, HSINTEGRAT]

Primary Contact: Amber Clegg, Program Manager

<https://www.deschutes.org/health/page/how-access-services>

Access Team

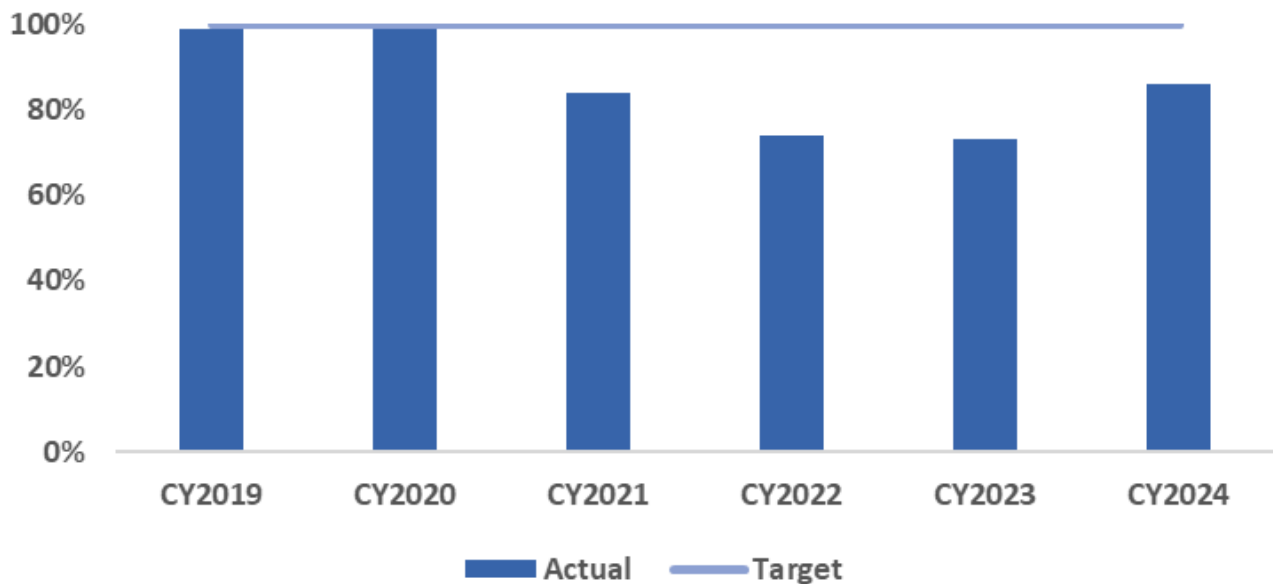
Main entry point for most of Deschutes County's Behavioral Health programs. This team provides screenings, assessments, placement recommendations, care coordination, case management, and referrals for mental health and substance use disorder services.



Clinical Administrative Support Team (CAST)

Provides critical administrative and logistical support for day-to-day operations and projects, which reduces administrative burden for clinical staff. This Team helps manage and run reports, assists with workgroups and meetings, organizes projects, oversees fiscal processes, and tracks schedules.

Clients Offered a Face-to-Face Appointment within 1 week



FY 25 Highlights and Accomplishments

- Despite several significant staffing changes and vacancies, the Access team maintained an overall rate of access to care (routine and urgent) of 89%, including an outstanding 100% of urgent appointments.
- Due to grant dollars and the shifting of an admin position to the new Forensic and Acute Services Team, the CAST team was able to hire a permanent FTE that supports the COAST/HOST teams.

FY 26 Challenges and Opportunities

- The Access team continues to experience severe staffing shortages despite active and varied recruiting efforts.
- Although there was some reduction in admin burden for the Access team, the implementation of newly required American Society of Addition Medicine and Social Determinants of Health processes added more work to clinical and documentation workflows.
- Work space can be a challenge in some locations, impacting some of the CAST team. Pending plans for expanding space will likely alleviate this.

FY 25 Funding Changes

- None.

FY 26 Program Changes

- None.



FTE Changes and Detail

Position	FTE FY25	FTE FY26	Change
ADMIN SUPPORT SPEC	6.5	6.5	
BEHAVL HLTH SPEC I	1	1	
BEHAVL HLTH SPEC II/BHS II, Lic.	8	8	
SUPERVISOR, ADMIN	1	1	
SUPERVISOR,BH	1	1	
Grand Total	17.5	17.5	0

BEHAVIORAL HEALTH COMPREHENSIVE CARE FOR YOUTH, FAMILIES & YOUNG ADULTS [HSINTYOUTH]

Comprehensive Care for Youth, Families & Young Adults provides specialty mental health care and substance abuse treatment for individual's ages 0-27 and their families through an array of integrated, intensive outpatient care teams: EASA, YAT, Wraparound, 2 Young Adult Drop-in Centers, 7 School Based Health Centers, and Child, Family & Young Adult Outpatient.

Primary Contact: Shannon Brister-Raugust, Program Manager

<https://www.deschutes.org/health/page/comprehensive-care-youth-families-young-adults>

Child, Family, & Young Adult Outpatient (CFYA)

An outpatient treatment program that specializes in the care and treatment for children through young adults.

School Based Services

Healthcare clinics that offer a range of medical and mental health services located in a school. DCHS operates seven School-Based Health Centers in partnership with La Pine Community Health and Mosaic Medical.

Early Assessment and Support Alliance (EASA)

The EASA team offers support services to individuals ages 12-27, who suffer from the kind of psychosis that would lead to schizophrenia if left untreated.

Wraparound (WRAP)

Community-based support for children and youth whose mental health needs have not been met through usual services, and their families.

Young Adults in Transition (YAT)

The YAT team offers support and services for ages 14-24 who suffer from mental health and/or behavioral challenges. Transitional treatment and intervention helps young adults to graduate school, live a healthy, positive life and be a confident and beneficial member of our community.

The Drop

Offered in Bend and Redmond, The Drop serves young adults ages 14 to 27. Offering Peer Support, guest speakers, games, discussion and socialization, and life skills introductions.

The Behavioral Health Resources Network (BHRN) Team

Provides substance use disorder treatment, peer support, harm reduction and recover services to Youth and Young adults.



FY 25 Highlights and Accomplishments

- Two contracted shelter beds available to youth and young adults experiencing homelessness, who are at risk of hospitalization or incarceration.
- Three contracted shelter beds available to young adults experiencing psychosis, with an integrated memorandum of understanding between local agencies to coordinate care.
- Met with State Representatives, Bend Mayor, County Commissioner, families and key stakeholders regarding barrier of children’s residential care; resulted in a formal Request for Information to the Oregon Health Authority.
- Expansion of services in Redmond, Oregon. We obtained a portion of our North County Campus (IYS NOCO), renovating facilities to support a second IYS campus.
- Expanded Fee for Service billing to all Wraparound Medicaid enrollees.
- Successfully completed 4 Year, 4 million-dollar Substance Abuse and Mental Health Services Grant.

FY 26 Challenges and Opportunities

- We continue to experience a shortage of Comprehensive Care for Youth, Families and Young Adults positions and providers in South County. Particularly, the need for additional therapy and case management staff in the LaPine School Based Health Center. Currently this site is staffed at a .75 QMHP, which is insufficient in supporting the volume of students and referrals.
- Ongoing work at the OHA level continues, to bring Psychiatric Residential Care to Central Oregon. The Central Oregon System of Care, and Acute Care Council, in partnership with St. Charles, Pacific Source, Deschutes/Crook/Jefferson Counties, and local schools are all supportive of these actions, but need OHA funding and support. A vendor and land have been identified, if funding is available. In addition to Psychiatric Residential Care, we are working with local elected officials and community partners to decrease the gap in care for youth who enter the hospital in need of acute care services. The data highlights significant system gaps, which lead to inadequate support to our young people. 2026 presents some unique opportunities to close this gap, through legislation and partnership by increasing residential, crisis and acute care services.
- Comprehensive Care for Youth, Families and Young Adults has significant space challenges in Bend. There are opportunities that would combine all youth, family and young adult services into one centralized location.
- We experienced a 45% increase in The Drop attendance and have heard from our community an increased need for Drop-In hours. The Drop is currently staffed by Peers and Case Managers, who have full time caseloads and duties outlined by OAR’s in addition to The Drop. Additionally, The Drop is shared space with the Behavioral Health waiting room in Bend, and unstaffed during non-Drop hours in Redmond, limiting expansion. To expand The Drop hours, additional staffing and space are required.

1308

CLIENT VISITS
AT THE DROP CENTER

↑ 45%

FROM CY2023

FY 25 Funding Changes

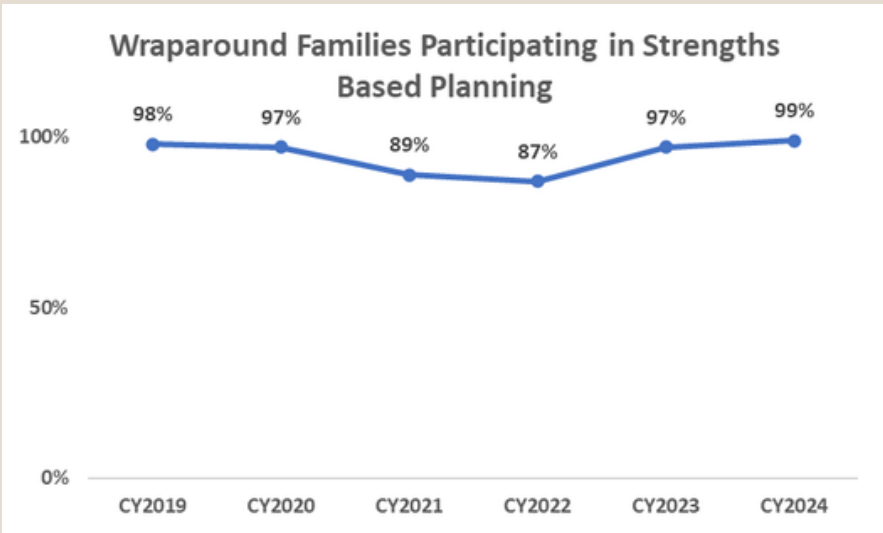
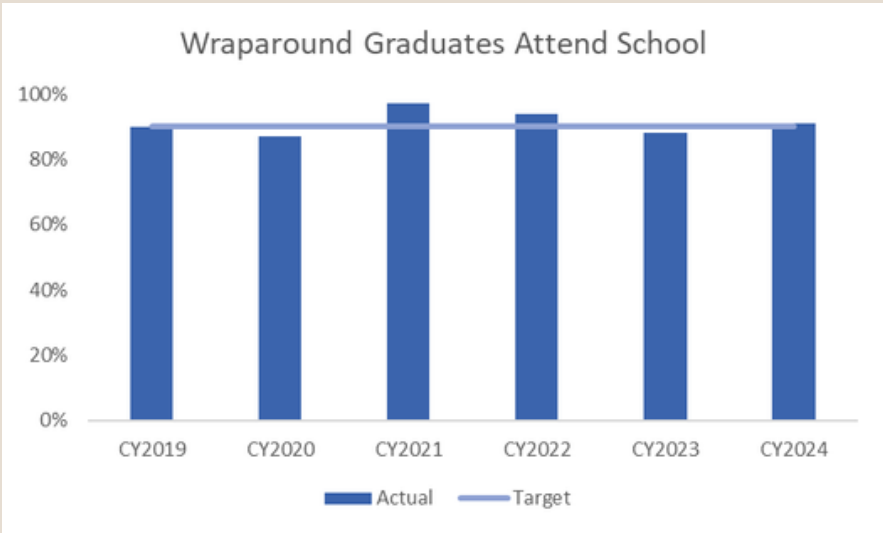
- End of a 4-year, \$4 million Substance Abuse and Mental Health Administration System of Care grant and local match requirements.

FY 26 Program Changes

- None

FTE Changes and Detail

Positions	FTE FY25	FTE FY26	Change
ADMIN ANALYST	1	1	
BEHAVL HLTH SPEC I	13	13	
BEHAVL HLTH SPEC II/ BEHAVL HLTH SPEC II, LIC	21.5	21.5	
OCCUPATNL THERAPIST	1	1	
PEER SUPPORT SPEC/ST	6	6	
SUPERVISOR BH	4	4	
SUPERVISOR HLTH SERV	1	1	
Grand Total	47.5	47.5	0



BEHAVIORAL HEALTH CRISIS [HSCRISIS]

This program provides 24/7 crisis response including face-to-face and over the phone evaluations in the community and at the Deschutes County Stabilization Center (DCSC). Program goals include providing 24/7 access to crisis care. This program works to divert individuals with a serious and persistent mental illness (SPMI) from the criminal justice system when appropriate.

Primary Contact: Nicole Von Laven, Program Manager

<https://www.deschutes.org/health/page/crisis-services>

24-Hour Crisis Phone Line

Available 24/7 to anyone who is experiencing a crisis/needs crisis support.

Walk-in Crisis Services and Stabilization Services

Provides immediate access to individuals experiencing a crisis. Brief stabilization open to people of all ages.

24/7 Community Crisis Assessment Team (CCRT)

A team that provides crisis intervention services out in the community.

Co-responder Program

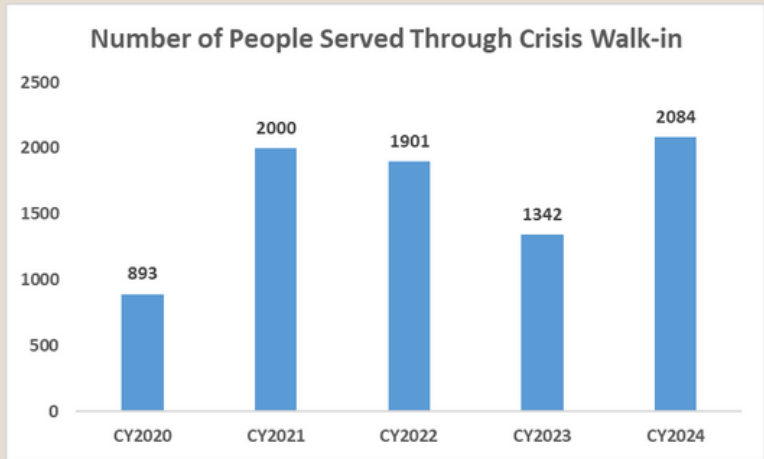
A clinician and officer respond together to mental health related calls.

Case Management

Liaises with the hospital and Brooks Respite for discharge planning to help clients with basic needs and community resources.

Peer Support

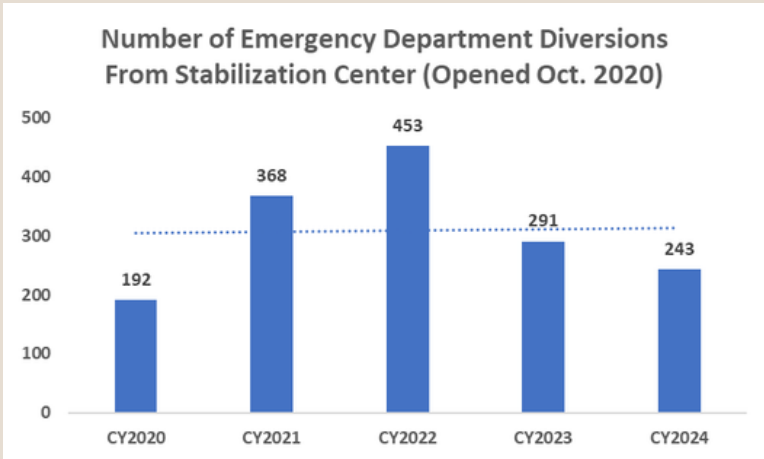
Peer Support Specialists are individuals with life experience of mental health and/or substance use disorders who are in recovery. They offer support and encouragement to individuals struggling with a mental health condition.



646

PEOPLE SERVED THROUGH
FACE TO FACES ON CCRT

↑ 36%
FROM CY2023



3356

PEOPLE SERVED THROUGH
PHONE BASED SUPPORT FOR
CCRT

↑ 148%
FROM CY2023

174

NUMBER OF PEOPLE
DROPPED OFF BY LAW
ENFORCEMENT

↓ 48%
FROM CY2023

FY 25 Highlights and Accomplishments

- Deschutes County Stabilization Center (DCSC) served 2289 individuals in 2024 and has served 11,118 total since opening.
- 159 of those individuals state they would have ended their life and 2927 say they do not know what they would have done if they had not accessed DCSC.
- Community based crisis team (CCRT) has served 3356 people through phone-based support.

FY 26 Challenges and Opportunities

- Staffing a 24/7 facility and community-based team continues to be a challenge within the behavioral health field, however we have been able to remain operational 24/7 for both programs.
- There continues to be a need for increased beds across various levels of care in the state of Oregon for all ages, but in particular youth in crisis. Deschutes County, in collaboration with community partners are working to increase level of care options in our community for all ages and needs.

FY 25 Funding Changes

- A couple one-time grants are ending, including House Bill 5202 for 1.5 million. The crisis program continues to look for opportunities to receive consistent, ongoing funding in order for programs to remain operational 24/7. If any current grants we receive were to end, this would also impact operations, however that is not currently anticipated.

FY 26 Program Changes

- None

FTE Changes and Detail

Position	FTE FY25	FTE FY26	Change
ADMIN SUPPORT SPCLST	1	1	
BEHAVL HLTH SPEC I	9.2	7.2	-2
BEHAVL HLTH SPEC II/ BHS II, LIC.	15.6	13.6	-2
BEHAVL HLTH TECH	4.2	4.2	
MANAGER, BH PROGRAM	0.5	0.5	
PEER SUPPORT SPECLST	7.2	5.2	-2
SUPERVISOR BH	2	1	-1
SUPERVISOR ADMIN	1	0	-1
SUPERVISOR HLTH SERV	3	3	
Grand Total	43.7	35.7	-8

BEHAVIORAL HEALTH FORENSIC AND ACUTE SERVICES [HSFORENSIC]

This program provides care coordination, referrals, treatment and supports for individuals who are forensically involved or in acute care / residential settings.

Primary Contact: Evan Namkung, Program Manager

<https://www.deschutes.org/health/page/forensic-and-acute-services>

Exceptional Needs Care Coordination (ENCC)

ENCC's support members who are older or have disabilities, multiple chronic conditions, high health care needs, or special health care needs. They support these individuals in referrals to residential placement services, coordination of care between providers, and ongoing case management with community residential facilities and licensed care systems.

Aid and Assist

This program serves individuals who have been found unable to aid and assist in their own defense against criminal charges as a result of their mental illness. Individuals receive treatment, skills training, case management and resource coordination, and monitoring in order to restore their ability to participate in the legal process.

Psychiatric Security Review Board

This program serves individuals under the jurisdiction of the State PSRB. Individuals receive monitoring specific to the conditions of their community release as well as treatment, case management and other services as indicated.

Civil Commitment

The civil commitment team serves individuals who have been ordered to treatment by a court as a result of their mental illness. Individuals receive assessment and monitoring throughout the process, and the team coordinates with the courts, local hospitals, attorneys and other entities involved in the process.

Forensic Diversion

The Forensic Diversion team works with individuals who have current or previous involvement in the criminal justice system and who struggle with mental health issues. The team's goal is to prevent recidivism and provide supports to help individuals remain in the community successfully.

Mental Health Court

Mental Health Court is a program where individuals agree to participate in mental health treatment and other requirements for a period of 12-18 months. If the program is completed successfully, charges can be reduced or dropped entirely. Typical participation requirements include taking medications, going to therapeutic appointments, attending substance treatment if appropriate, regular drug testing, and frequent case management appointments.

FY 25 Highlights and Accomplishments

- Deschutes County was one of six counties selected to pilot an Aid and Assist Community Navigator grant program, funding support for increased engagement with clients in this process.
- The new Forensic and Acute Services Program was created to better serve and collaborate around clients involved in the systems.
- The Forensic Diversion team added a new case manager position, which is embedded with the Parole and Probation (P&P) Department, to improve access to behavioral health services for those individuals under P&P.

FY 26 Challenges and Opportunities

- Community programs in the forensic realm continue to be underfunded, while caseloads increase and responsibility is funneled to counties to provide solutions for these populations.
- There is a severe shortage in community resources needed for these populations, specifically residential treatment services.

FY 25 Funding Changes

- None

FY 26 Program Changes

- None

FTE Changes and Detail

Position	FTE FY25	FTE FY26	Change
ADMINISTRATIVE ASSISTANT	0	1	
BEHAVIORAL HEALTH SPEC II/BEHAVL HLTH SPEC II, LIC	0	5.5	
BEHAVL HLTH SPEC I	0	6	
PEER SUPPORT SPECLST	0	3	
SUPERVISOR BH	0	2	
Grand Total	0	17.5	17.5



Intellectual and Developmental Disability Services (I/DD)

To Promote and Protect the Health and Safety of Our Community

Community Based Care

People with intellectual and developmental disabilities (I/DD) often need community-based long term supports and services to support their needs and to live as independently as possible. This includes person centered case management, voluntary choice of services, services that span lifetime, and assistance for clients to access all services they are interested in.

Core Services

- **Case Management:** Case management services are provided to all eligible kids and adults.
- **Adult Abuse Investigation:** Investigative authority for I/DD Adults in Deschutes, Crook and Jefferson Counties.
- **Foster Home Licensing :** Adult and child foster licensing, certification, renewal and monitoring.

Case Management

When Case Management is fully funded:

- Rapid Response to changing needs or crisis situations.
- Services are coordinated with community partners.
- Assurance that individual needs and goals are being met.
- Long term relationship with their Service Coordinators.
- Prevention and protection from abuse and neglect.
- Timely access to medical supports, employment, and housing.

Match Program

In order to participate in the match program the following must be met:

- Actual expenses are more than State base rate (FY26 expenses must be >\$6.1 million).
- Reach service goals (# of encounters): 11k encounters per year.
- Have enough CGF (approximately 41% of Actual expense).
- Have enough CGF for uncovered indirect costs.

How the System is Funded:

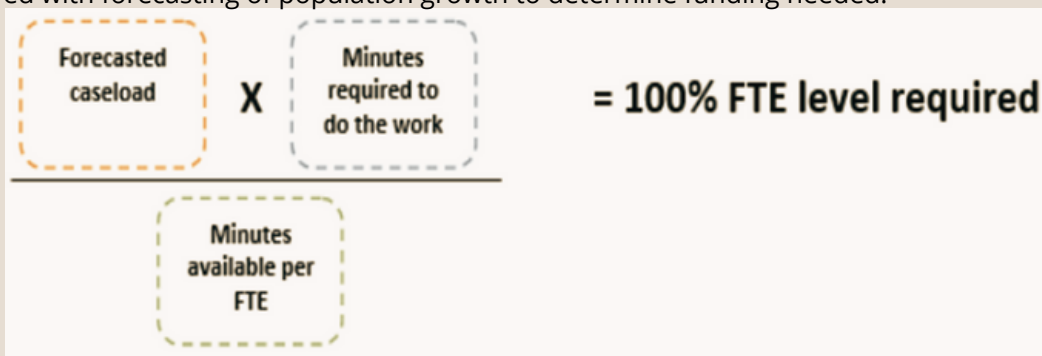
DHS

The Department of Human Services – Office of Developmental Disability Services provides Medicaid and State General Fund dollars to CDDPs (Community Developmental Disability Programs) to provide eligibility determination, case management, abuse investigations, licensing and certification for foster homes for persons with IDD within the community.

IDD Funding Model

DHS conducts a “workload model” study each biennium.

Study measures the scope, frequency and duration of all tasks performed by (CDDPs) using caseload data paired with forecasting of population growth to determine funding needed.



\$9.1M

I/DD Operational Budget

15%

Budget supported by General Funds

49.85 FTE

Health Services Director

Janice Garceau

Behavioral Health Director

Holly Harris

INTELLECTUAL & DEVELOPMENTAL DISABILITIES [HSIDD]

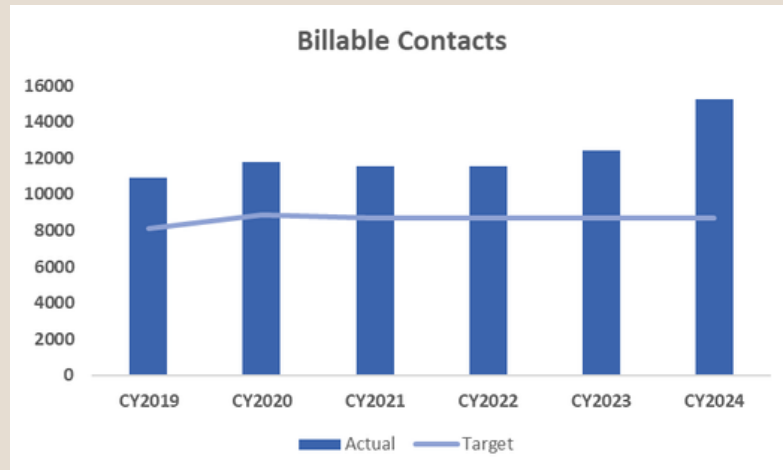
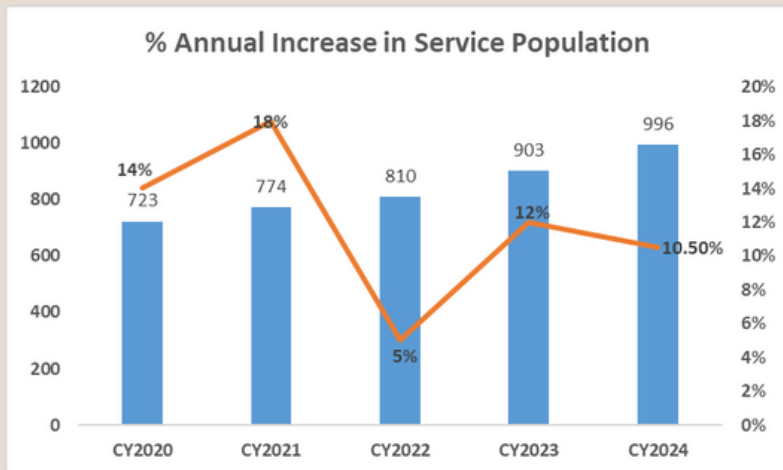
This program provides support to people with intellectual and/or developmental disabilities (I/DD), to enable them to live as independently as possible in the least restrictive environment. Services are aimed at greater access to social interaction, community engagement, and employment opportunities.

Primary Contact: Paul Partridge, Program Manager

Website: <https://www.deschutes.org/health/page/intensive-adult-services>

Intellectual/Developmental Disability Services Available in Deschutes County:

- Intake, eligibility determination, referral
- Case management and service coordination for adults and children
- Individualized planning and support
- Protective service investigations and support (for adults)
- Vocational services
- Residential services
- Family support
- Comprehensive in-home supports
- Foster care
- Employment First



100%
Individual Service
Plans Renewed
on Time

FY 25 Highlights and Accomplishments

- Moved the I/DD Program to two new office locations: one at W. Antler in Redmond and one at Wyatt Court in NE Bend. Operational adjustments were made in order to provide better public access to the geographic regions we serve.
- Completed a program audit by the State Quality Assurance team with a high degree of compliance consistent with prior program reviews.
- Administered a grant project utilizing over \$100,000 in ARPA funding to provide disaster readiness supplies and equipment for individuals with I/DD, increasing their readiness and decreasing their reliance upon first responders during emergencies.

FY 26 Challenges and Opportunities

- The I/DD program is partnering with Behavioral Health in the development of a new residential licensed home to serve adults with I/DD who have co-occurring mental health conditions. This project will help serve these specific needs locally rather than relying upon seeking these types of services outside Deschutes County.
- Program is faced with transitioning this next budget year to a new electronic record system the State (DHS-ODDS) is developing and rolling out state-wide. This will be a significant change for our personnel to navigate while maintaining the high level of service quality our community relies upon us for.
- Sustainability: Funding projections from our contractor are uncertain and operating costs continue to increase, so our program will be actively exploring efficiencies that will allow us to continue at current service and quality levels while our enrollment numbers continue to climb.



FY 25 Funding Changes

- We are moving into a new biennial funding allocation in July 2025. This is always a time of uncertainty until we are able to become aware of the “Workload Model” proposed by DHS-ODDS and submitted to the Legislative Finance Office and then what the Ways and Means committee advances as the Legislatively Approved Budget for our Community Developmental Disabilities Programs (CDDPs). During this year’s County Budget process, we have attempted to forecast revenue based on patterns of past fiscal awards and may be faced with making additional adjustments upon receiving the final budget allocation from DHS.

FY 26 Program Changes

- None beyond staying apace of ever-growing client enrollment numbers. We’ve just hit 1000 clients enrolled which is a milestone that represents our outreach efforts across all corners of the community, celebrating its diversity, and expanding access to our services.

FTE Changes and Detail

Position	FTE FY25	FTE FY26	Change
ADMIN SUPPORT SPEC	3	3	
ADMIN SUPPORT TECH	6.85	6.85	
IDDS I	27	27	
IDDS II	6	6	
MANAGEMENT ANALYST	1	1	
SR ACCOUNTING TECH	1	1	
SUPERVISOR HLTH SERV	1	1	
SUPERVISOR IDDS	3	3	
Grand Total	49.85	49.85	

BEHAVIORAL HEALTH INTENSIVE ADULT SERVICES [HSADLTINT]

This program provides intensive outreach, engagement and community based treatment and supports to individuals with severe and persistent mental illness and substance use disorders

Primary Contact: Kara Cronin, Program Manager

Website: <https://www.deschutes.org/health/page/intensive-adult-services>

Assertive Community Treatment (ACT)

ACT is a community-based program that provides intensive community based behavioral health treatment to adults with Severe and Persistent Mental Illness (SPMI). ACT’s high intensity supports serves individuals who are most at-risk for psychiatric hospitalization and for whom traditional outpatient services have not been successful.

Community Outreach and Stabilization Team (COAST)

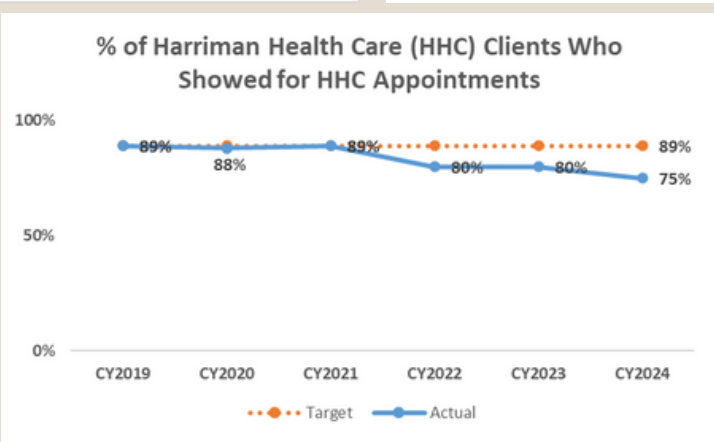
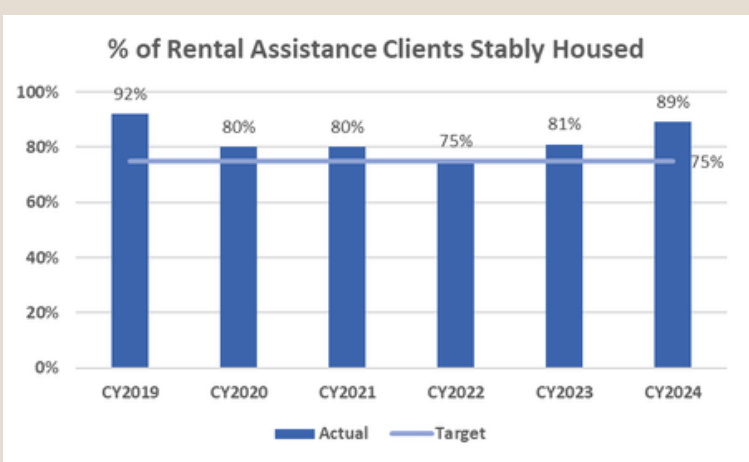
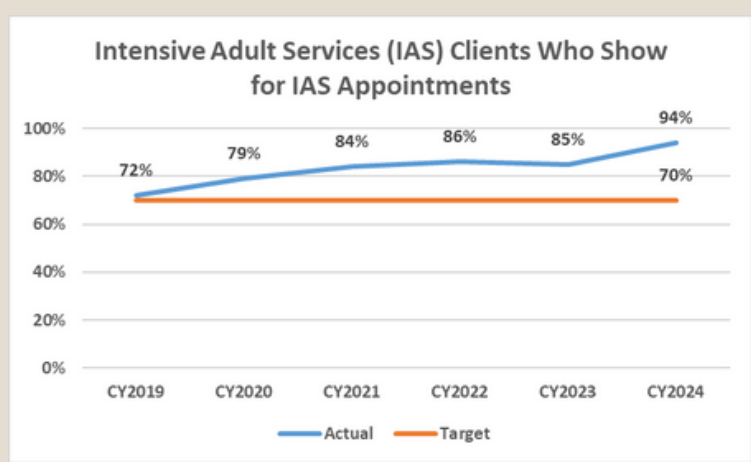
COAST is a group of specialty programs that provide services to individuals with SPMI diagnosis.

Community Support Services (CSS)

CSS Outpatient Treatment Team provides a blend of community and office-based services, focused on intensive treatment and supports for individuals living with a SPMI. Harriman Health Care – Peer Support Specialists on the CSS team work in coordination with the co-located and integrated Mosaic Medical primary care clinic, to improve medical and behavioral health outcomes for people with SPMI.

Homeless Outreach Services Team (HOST)

HOST team provides street outreach and case management support to houseless individuals with Serious Mental Illness and/or Substance Use Disorders.



FY 25 Highlights and Accomplishments

- Added on-site dental options for our clientele which complements our on-site primary care, pharmacy and Behavioral health care for serious and persistent mental illness (SPMI) clients.
- We restructured our housing project, Horizon House, to prioritize SPMI houseless clients, and increased on-site treatment support delivered by our Homeless Outreach Services Team.
- Our Homeless Outreach Services team provided 875 visits to 225 clients 2024.

FY 26 Challenges and Opportunities

- There are some community housing programs coming online that are likely going to support our clientele.

FY 25 Funding Changes

- We are exploring potential certification for Environmental Council of the States (ECOS) that may expand revenue for our Older Adult and Homeless Outreach Services teams.
- Older Adult Behavioral Health Initiative (OABHI) is funding an additional position for our Older Adult team.

FY 26 Program Changes

- The department underwent some restructuring, creating a Forensic and Acute Care Services program. Residential, Aid and Assist, PSRB, and Mental Health Court are now a part of this new program and are no longer a part of Intensive Adult Services.

FTE Changes and Detail

Position	FTE FY25	FTE FY26	Change
ADMINISTRATIVE ASSISTANT	1		-1
BEHAVL HLTH TECH	1.6		-1.6
BEHAVL HLTH SPEC I	22	16	-6
BEHAVL HLTH SPEC II/ BEHAVL HLTH SPEC II, LIC	14	11.5	-2.5
COMM HEALTH SPEC I	1	1	
COMM HEALTH SPEC III	1		-1
PEER SUPPORT SPECLST	12	10	-2
PUBLIC HTH NURSE II	0.5	0.5	
Medical Director		0.09	0.9
SUPERVISOR BH	4	3	-1
SUPERVISOR HLTH SERV	1	1	
Grand Total	58.1	43.09	-15.01

BEHAVIORAL HEALTH MEDICAL TEAM [HSMEDICAL]

This program integrates psychiatry into all clinical services. Collaborates with primary care to provide integrated, holistic care. Supports health promotion, health literacy, and health maintenance through a harm reduction lens.

Primary Contact: Chandra Mola, Program Manager

Website: <https://www.deschutes.org/health/page/behavioral-health>

Street Psychiatry Outreach

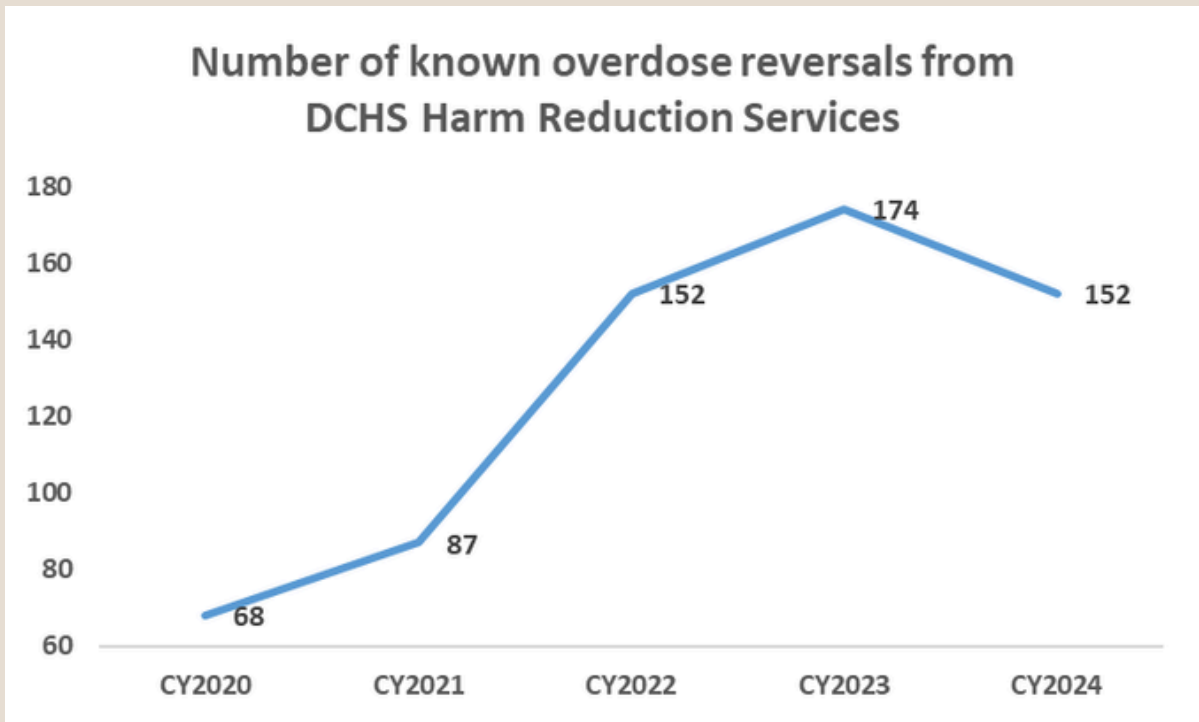
Providers rotate one time a month for half a day partnering with the homeless outreach team to bring psychiatric services directly to China Hat. Much of the work is building rapport and working to identify people suffering from severe mental illness an assessment, medication if indicated, and connection to services.

Addiction Medicine Programming

Use knowledge and expertise of our staff to enhance our SUD Services agency wide.

Harm Reduction (HRP)

HRP provides syringe exchange, Narcan and other supplies and supports to people who use drugs, with the goal of reducing health and safety risks associated with substance use.



FY 25 Highlights and Accomplishments

- Successfully transitioned from 4 telehealth providers to 2 telehealth providers and added 2 in person providers.
- Added an in person Licensed Mental Health Professional (LMHP) support to South and North County.
- Added a supervisor to support a growing team and services.
- Expanded Street Psychiatry Outreach services to China Hat and Juniper Ridge.
- Added urgent care, drop-in crisis psychiatric services to the Stabilization Center.
- Expanded Harm Reduction Services to Sisters.
- Hosted 5 Psychiatric Mental Health Nurse Practitioner (PMHNP) students.

FY 26 Challenges and Opportunities

- Continue to expand crisis psychiatric services at Deschutes County Stabilization Center (DCSC).
- Continue to expand and restructure street psychiatry to meet the need of our unhoused population.
- Continue our efforts to eliminate all telehealth contracts and transition to all in person LMHP's.
- Add a clozapine clinic to support independence and stability for clients ready to transition to maintenance model.

FY 25 Funding Changes

- None.

FY 26 Program Changes

- The Harm Reduction team was moved under the medical team umbrella.
- The team added a supervisor to support the team growth.

FTE Changes and Detail

Position	FTE FY25	FTE FY26	Change
MEDICAL DIRECTOR	1	0	-1
BEHAVL HLTH TECH	0.375	1.005	0.63
BEHAVL HLTH SPEC I	0	1	1
COMM HEALTH SPEC III	0	1	1
PSYCH NURSE PRACTNR	4	3.5	-0.5
PSYCHIATRIST	3.8	3.8	
PUBLIC HTH NURSE II	5.625	5.625	
SUPERVISOR HLTH SERV	1	1	
Grand Total	15.8	16.93	1.13

BEHAVIORAL HEALTH OUTPATIENT COMPLEX CARE [HSADULT, HSNOCO, HSSOCO]

These programs provide evidence based, individual and group treatment, including counseling, case management and peer support services to adults, children and families with mental health and/or alcohol/drug concerns, with a focus on integrated care.

Primary Contact: Kristin Mozzochi, Program Manager

Website: <https://www.deschutes.org/health/page/adult-outpatient-services>

Adult Outpatient Integrated Care (AOPIC)

Located at our Courtney Clinic in Bend, our AOPIC team provides outpatient mental health care with a focus on providing treatment in partnership with Mosaic medical to serve people who are experiencing co-occurring mental health, chronic medical, and substance use challenges.

Adult Outpatient Complex Care (AOPCC)

Located at our Courtney Clinic in Bend, our AOPCC team provides outpatient treatment with a focus on providing co-occurring substance use and mental health treatment. We provide a wide array of options including peer support, case management, groups, psychiatric care, and individual counseling.

South County Hub (SoCo)

Located in La Pine, provides outpatient mental health and substance use treatment to all ages in South Deschutes County and North Klamath County. Services include counseling, psychiatric care, case management, peer support, supported employment, and care coordination. Our SoCo Hub partners with La Pine Community Health Center to support clients in meeting their health and wellness goals.

North County Hub (NoCo)

Located in Redmond, provides outpatient mental health and substance use treatment services to people of all ages with a focus on improving health and wellbeing. Community and office based services are offered to residents of Northern Deschutes County. A multidisciplinary team approach is utilized to support people in meeting their treatment goals. Mosaic Medical provides onsite medical care, working in partnership with our NoCo staff.



FY 25 Highlights and Accomplishments

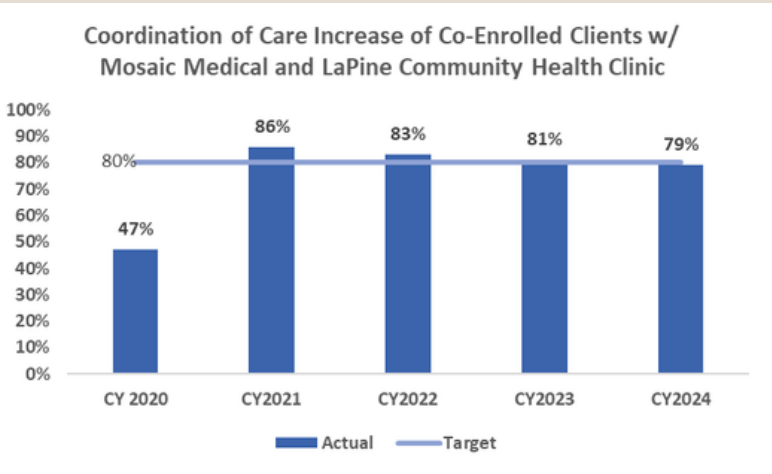
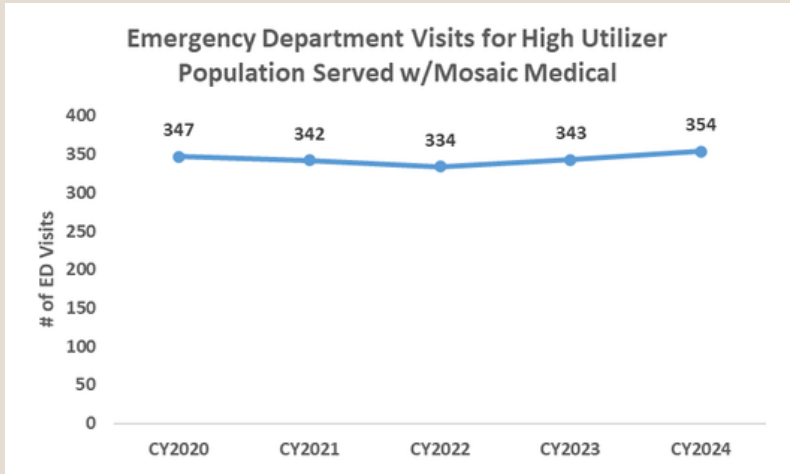
- The Complex Care Team was awarded the Veteran Behavioral Health Peer Support Specialist Grant.
- Staffing on all four of the teams (AOP and the Hubs) has been stable, all teams are fully staffed with minimal turnover this past year.
- All teams report a significant improvement in the reduction of administrative burden with the changes made to our documentation requirements. This has improved morale and work satisfaction.
- Engaged in a continuous improvement process to identify gaps and improve our processes to better serve our clients.

FY 26 Challenges and Opportunities

- Space continues to be a challenge in our South County Clinic. We do not have enough space to accommodate all the staff that we have and the services that we provide.
- Our North County and AOP teams are in need of additional funding to support a more robust case management and peer support team.
- High level of acuity and complex needs of the population we serve coupled with a lack of access to needed resources that support recovery.

FY 25 Funding Changes

- None.



FY 26 Program Changes

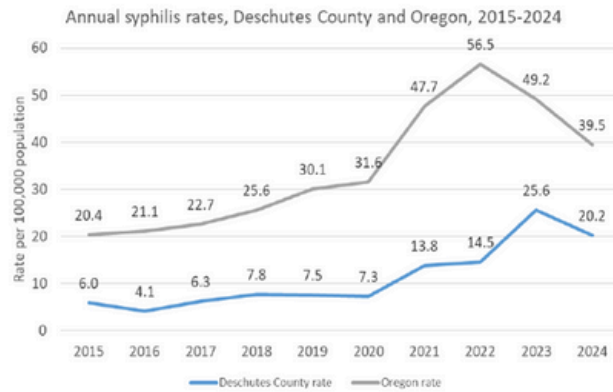
- The Complex Care Team will be implementing a new co-occurring mental health and substance use disorder treatment pilot. The pilot will serve individuals who are needing more intensive treatment to support their recovery. Our goal is to expand this pilot to all four teams as well as other DCBH teams by the end of this year.

FTE Changes and Detail

Position	FTE FY25	FTE FY26	Change
ADMIN ANALYST	1	1	
BEHAVL HLTH SPEC I	6	6	
BEHAVL HLTH SPEC II/BEHAVL HLTH SPEC II, LIC	24	24	
PEER SUPPORT SPECLST	5.5	5.5	
SUPERVISOR BH	4	4	
Grand Total	40.5	40.5	

PUBLIC HEALTH KEY STATS

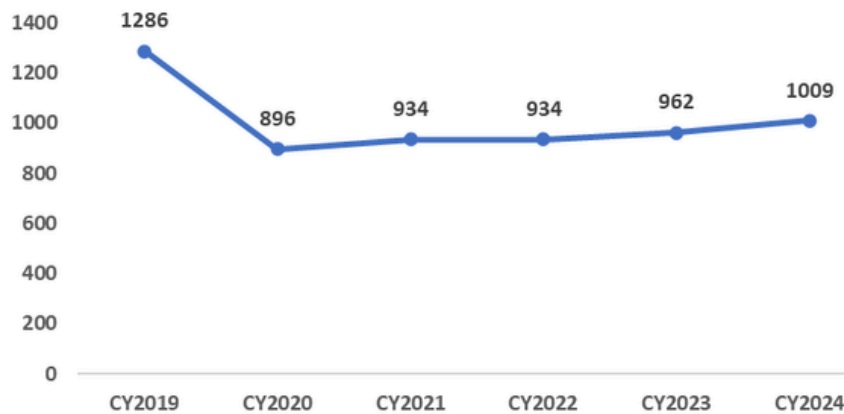
Syphilis rates



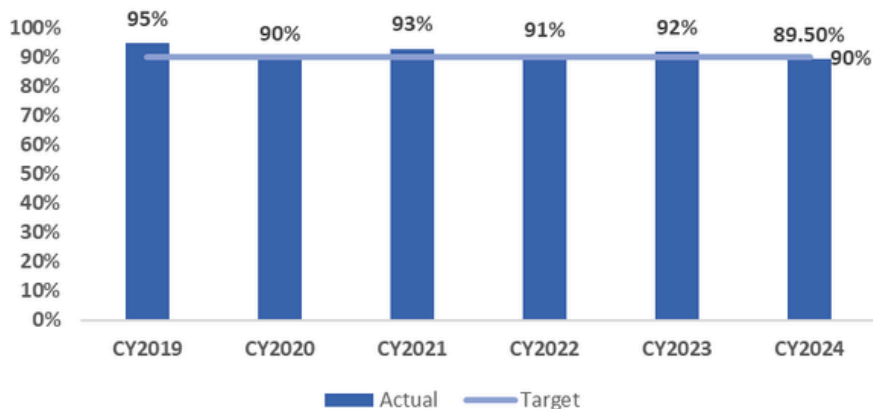
Note: Data from Oregon Epidemiologists' User System (ORPHEUS). Rates calculated using American Community Survey 5-year population estimates, 2023 vintage. Data are preliminary as of 1/14/2025.



of Non Covid-19 Communicable Diseases/STDs Reported & Investigated



% of DCHS Clients that are Pregnant Receiving Prenatal Care in the 1st Trimester





Public Health

\$20.8M

Public Health
Operating Budget
Budget

23%

Budget supported
by General Funds

90.95 FTE



To Promote and Protect the Health and Safety of Our Community

What We Do

Public Health promotes and protects the health of everyone who lives, works, and plays in Deschutes County:

- Prevent, investigate and protect people from communicable diseases.
- Ensure safe food and water.
- Promote health and prevent chronic disease and injury.
- Prepare for and respond to natural or human caused emergencies and emerging health threats.
- Ensure equitable access to preventive health services.
- Create and ensure conditions that equitably improve health and well-being for all.
- Foster policy, systems and environmental change to prevent and reduce unhealthy behaviors and reduce healthcare costs.
- Convene community engagement to sustainably prioritize change across multiple sectors and systems of care.



Local Public Health Delegations of Authority

- *Local Public Health Authority:* County Commissioners - BoCC.
- *Local Public Health Agency (LPHA):* Deschutes County Public Health Division is authorized by the BoCC to perform Public Health requirements and responsibilities on behalf of the county (Public Health is a division of Health Services).
- *Local Public Health Administrator:* DCHS PH Director, authorized by the BoCC to oversee the Local Public Health Agency.

Health Services Director

Janice Garceau

Public Health Director

Heather Kaisner

Public Health Sections

Statutorily or contract required services and grant funded programs

Communicable Disease Prevention & Management FTE 13.4	PH Administration FTE 9.45	Clinical & Family Services FTE 32.4
<p>Prevent and control the spread of communicable diseases (CDs) and mitigate health threats through surveillance, education, investigation, outbreak control and immunizations.</p> <ul style="list-style-type: none"> Communicable Disease & Outbreak Investigation Infection Prevention in Congregate Settings Tuberculosis Program Immunization Program, including School Law Regional CD/STI/HIV Epidemiology HIV and Sexually Transmitted Disease Programs Access to Preventive Clinical Services HIV Ryan White Case Management 	<p>Overall leadership and oversight of local public health staff, programs, and services. Assures statutory, fiscal, and programmatic requirements are met. Works to diversify and prioritize resources to meet changing community health needs and emerging public health threats. Also responsible for coordination of:</p> <ul style="list-style-type: none"> Public Health Advisory Board Ambulance Service Area Administrative and Legislative Advocacy 	<p>Family-focused services including family-child home visiting nurses, perinatal care coordination and Women, Infants and Children (WIC).</p> <ul style="list-style-type: none"> Comprehensive maternal and infant/child assessments including developmental screenings Breastfeeding support Case management and resource navigation Parent health education and family coaching Nutrition education and counseling Birth and death certificates
Prevention & Health Promotion FTE 17.60	Preparedness Engagement & Environmental Health 18.1	
<p>Ensures and promotes practices to improve health and well-being and prevent negative conditions that are harmful to our community both socially and financially</p> <ul style="list-style-type: none"> Suicide prevention and postvention Central Oregon Suicide Prevention Alliance (COSPA) Mental Health Promotion My Future My Choice program (6th grade) Healthy Schools, Sources of Strength, UpShift, School Based Health Centers Alcohol, tobacco, and other drug prevention Substance overdose prevention & response Problem gambling prevention, outreach and referral Shared Future Coalition Teen Community Health Advocates Youth Engagement School Based Health Centers 	<p>The Environmental Health, Preparedness, and Engagement team is committed to protecting public health by ensuring the safety of resources while also strengthening community resilience and engagement through emergency preparedness, epidemiology, community partnership development, and communication initiatives.</p> <ul style="list-style-type: none"> Food Service, Pool & Tourist Facility Licensing & Inspections, School Lunch Inspections, Food Handler & Manager Training Drinking Water Education & Regulatory Management Childcare Facility Inspections & Education Environmental Hazard Response including lead and animal bites Indoor Air Quality Program Climate & Health Initiatives including smoke response Public Health Emergency Preparedness Community Partnership Development & Communications Assessment & Epidemiology Health Risk & Crisis Communications 	

How the System is Funded:

OHA

The Oregon Health Authority provides Federal Grant and State General Fund dollars to local public health authorities through the Intergovernmental Agreement (IGA) for the Financing of Public Health Services. The IGA sets forth the duties, functions and responsibilities of the local public health authority.

Grants

Deschutes County Public Health receives local, state, and federal grant funds. Most grants are time limited and cover distinct costs and programs.

Fee for Service

A limited number of Public Health services collect fees through licensing, birth and death certificates, and insurance billing for clinical preventative services.

CGF

Local resources applied to help cover costs of mandated or other county service priorities not covered by other revenue sources.

PUBLIC HEALTH ADMINISTRATION [HSPHGEN]

This program provides leadership, management and oversight for local public health (PH) services and assures that the county meets statutory, fiscal and programmatic requirements. PH Administration works to diversify, leverage and assure effective and efficient use of resources to build foundational programs and capabilities as well as meet community priorities and respond to emerging public health issues.

Primary Contact: Heather Kaisner, Public Health Deputy Director
Website: <https://www.deschutes.org/health/page/public-health>

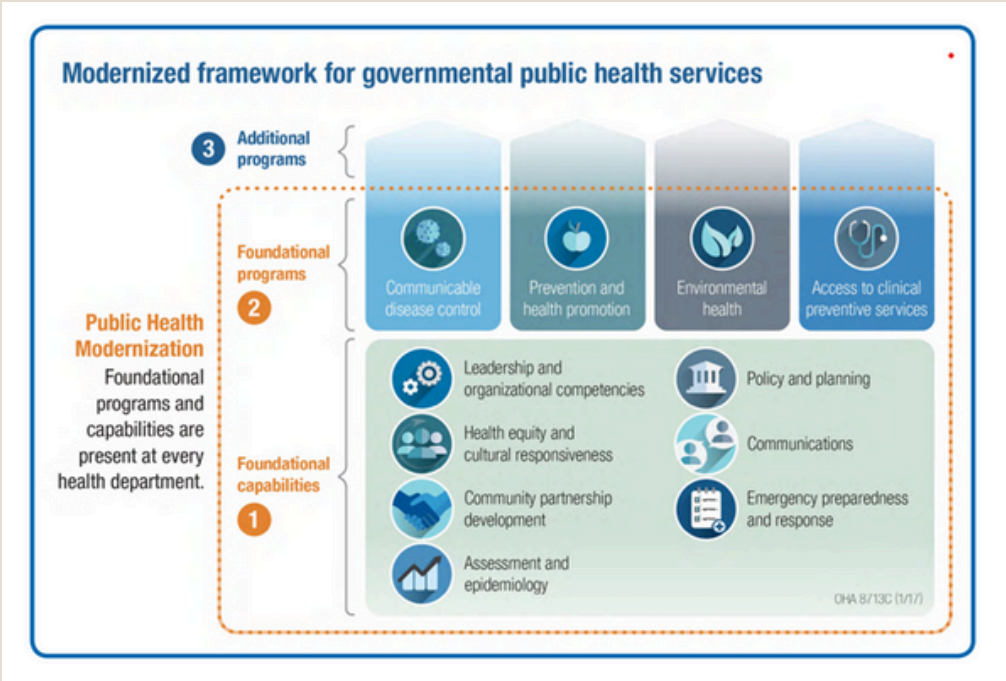
Broad Public Health Goal:

Promote and protect the health of people in Deschutes County through:

- Preventing the spread of communicable diseases and outbreaks
- Food and consumer safety
- Clean and safe drinking water
- Ensuring access to essential preventative health services
- Helping new parents and babies get off to a healthy start
- Education about healthy lifestyles
- Reducing and preventing high-risk behaviors among youth
- Responding to pandemics, climate impacts, and other emerging health

Public Health Modernization

A set of foundational capabilities and programs to ensure a core set of public health services is available in every county in Oregon. Deschutes County Public Health continues to move toward full implementation of Public Health Modernization and received increased State funding in the FY 24-25 Biennium. This public health transformation focuses on ensuring all communities have the same health protections through a sustainable public health system ready to respond to current and future public health challenges.



FY 25 Highlights and Accomplishments

- Increased collaboration, communication, and active surveillance to respond to drug overdose fatalities and non-fatalities. Including:
 - hiring a dedicated overdose prevention coordinator,
 - internal cross-collaboration with Harm Reduction, Epidemiology, and Prevention,
 - active monitoring and implementation of a spike response and communication plan,
 - real time data collaboration with the County Medical Examiner,
 - providing monthly situational awareness to community partners,
 - development of public education campaigns,
 - implementation of a county-wide needs assessment, and feasibility assessment of community Naloxone distribution containers.
- Preliminary data is showing Deschutes County rate of overdose deaths is substantially lower than the State rate.
- Continued to assess programs and services to ensure ongoing sustainability and changing community needs. This resulted in moving HIV case management services to a local community-based organization and pivoting away from providing direct reproductive health services to ensuring quality access and providing technical and subject matter expertise to all clinics in the community.

FY 26 Challenges and Opportunities

- Stable funding for core Public Health services to prevent and respond to emerging issues and threats continues to be a challenge.
- Continued challenges in recruiting and retaining clinical Registered Nurse (RN) positions.
- Growing threat of communicable diseases such as syphilis, pertussis, and measles.
- Opportunity to advocate for more primary prevention and public health modernization funding at the State level.



FY 25 Funding Changes

- Uncertainty about public health modernization funding in the next biennium.
- Uncertainty about public health programs and services that rely heavily on federal funding.

FY 26 Program Changes

- None.

FTE Changes and Detail

Position	FTE FY25	FTE FY26	Change
ADMINISTRATIVE ASSISTANT	1	1	
DEPUTY DIRECTOR HS	0.9	1	0.1
EPIDEMIOLOGIST	2	1.795	-0.205
HLTH OFFCR	0.75	0.75	
MANAGEMENT ANALYST, SR	1	1	
MANAGER, PUBLIC HEALTH	3.8	4	0.2
Grand Total	9.45	9.55	0.1



PUBLIC HEALTH PREVENTION AND HEALTH PROMOTION [HSPREVENT]

Programs in this section work together to lead work with partners that promote and ensure practices to improve health and well-being and prevent negative conditions that are harmful to our community both socially and financially.

Primary Contact: Jessica Jacks, Program Manager

Website: <https://www.deschutes.org/health/page/staying-healthy-prevention>

Adolescent Health

Provides information, training, and materials to assure comprehensive sexuality education is accessible to all adolescents. Coordinates the My Future-My Choice (MFMC) program for Deschutes County. MFMC is a sexuality education curriculum that meets 6th grade requirements set by the Oregon Department of Education.

Healthy Schools

Local partnership between Deschutes County and Bend-La Pine Schools embedding public health services directly within schools to assure students, families, and school staff have access to high quality prevention and health promotion programs and services through their K-12 school.

Mental Health Promotion and Suicide Prevention

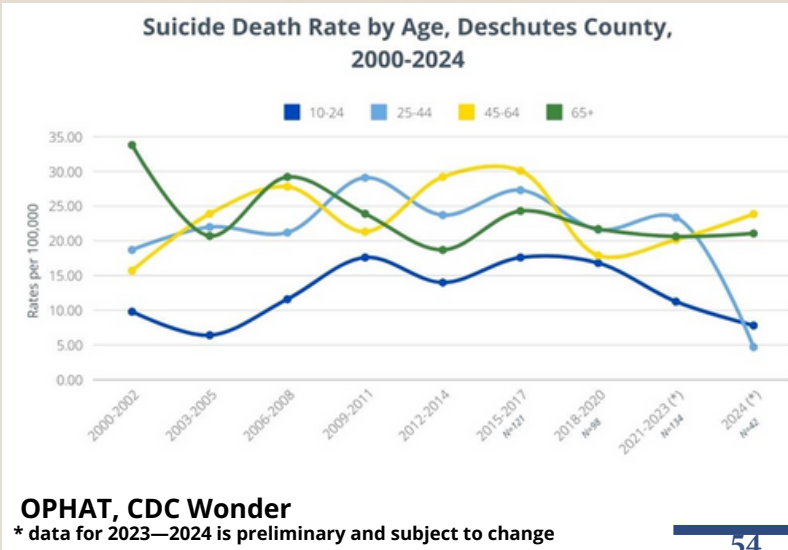
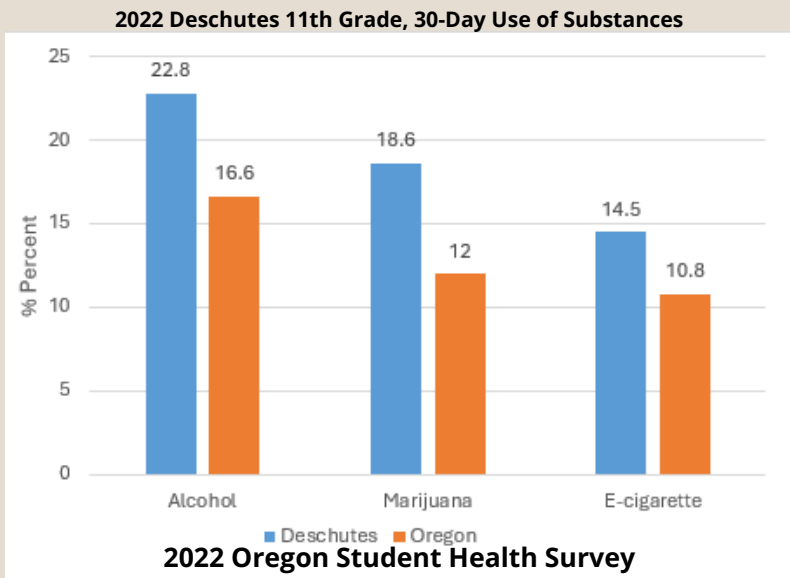
Public Health expertise to ensure proactive policies, systems, and environments are in place in order to prevent suicide death and attempts and to promote community resilience among all age groups.

Substance Misuse and Problem Gambling Prevention

Public Health expertise to ensure policies, systems, and environments align to prevent and reduce problem gambling, misuse of tobacco, alcohol, cannabis, and prescription drug or illicit drug use among all age groups.

Youth Engagement Program

Fosters youth-adult partnerships and youth-led projects to ensure student voice and leadership in mental health promotion and advocacy for School Based Health Centers.

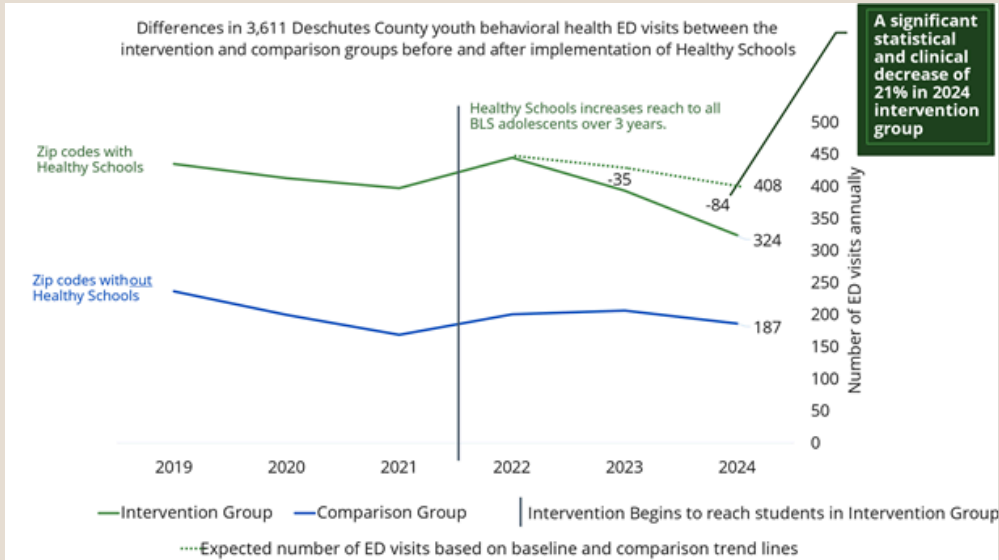


FY 25 Highlights and Accomplishments

- Three years of Healthy Schools has prevented 21% (84 of 408) of the expected number of emergency departments visits for ages 11-17 related to suicide, substance use, depression, and mental health.
- 100% of middle and high school Health teachers in Bend-La Pine Schools are using at least 2 effective skills-based prevention education programs, and 100% are covering important prevention topics, including suicide and child sexual abuse prevention.
- Creation and implementation of the Overdose Surveillance and Response Plan, which outlines how Deschutes County mobilizes and responds to increases in substance-related harms, especially fatalities.
- Collaborative development of a Central Oregon Secure Firearm Storage program, including a marketing campaign, community awareness, and distribution of firearm locks and safes for suicide prevention.
- In partnership with Spanish-speaking community partners, ensure all Prevention and Health Promotion resources, educational materials, campaigns, and outreach events are translated and culturally relevant.

FY 26 Challenges and Opportunities

- Prevention requires long-term investment to result in cost savings and improved community health (e.g. reductions in costs for healthcare, criminal justice, education, social welfare, etc.).
- Funding has historically been stratified across few stable resources and multiple short-term grants. This results in frequent staff turnover, instability of program delivery, and requires staff to spend time on resource development instead of program implementation.
- Oregon suicide legislation has significant gaps; all suicide postvention legislation are unfunded. In addition, legislation does not include Community Colleges, does not include youth who have parents who have died by suicide, nor youth who have attempted suicide.
- Overdose postvention legislation has been based on suicide postvention legislation, which has not been evaluated for effectiveness and is also an unfunded mandate.
- Changes in some OHA program requirements are allowing for integration of service areas across Prevention where prior requirements were very siloing. An example is fiscal support from Tobacco Prevention for Healthy Schools programming.



Healthy Schools Family Night

FY 25 Funding Changes

- The Garrett Lee Smith Grant was awarded to Deschutes County for two more years through September 2026 to support youth suicide prevention.
- The Strategic Prevention Framework-Partnerships for Success grant was awarded to Deschutes County for four years through September 2028 to support substance misuse prevention community collaboration.
- The Behavioral Health 2023 Shared Savings Investment funds were awarded to Deschutes County for Calendar year 2026 to support Healthy Schools.
- The Opioid Settlement Board through OHA has awarded counties one-time funds to support primary drug prevention strategies and workforce support
- The CDC Drug Free Communities grant sunsets in September 2025.
- The OHA anticipates a 20% reduction in biennial allocations for Tobacco Prevention.

FY 26 Program Changes

- Loss of the 1.0 FTE Public Health Educator II in Adolescent Health. This work prevents or delays initiation of adolescent sex, prevents sexually transmitted infections and teen pregnancies, and builds youth’s skills to make informed choices about relationships and their health.

FTE Changes and Detail

Positions	FTE FY25	FTE FY26	Change
COMM HEALTH SPEC II	6.8	6.8	
COMM HEALTH SPEC III	2	2	
EPIDEMIOLOGIST	0	0.205	0.205
PUBLIC HEALTH ED I	0.3	0	-0.3
PUBLIC HEALTH ED II	6.5	6.5	
SUPERVISOR HLTH SERV	2	2	
Grand Total	17.6	17.5	-0.1

ENVIRONMENTAL HEALTH, PREPAREDNESS AND ENGAGEMENT [HSENVIRON] [EMERPREP]

This public health section embodies a comprehensive approach to modernizing public health, incorporating foundational capabilities such as emergency preparedness, epidemiology, health equity promotion, community partnership development, and communication. These efforts continue to be integrated across all public health program areas. The Environmental Public Health Program stands out for its dedication to community protection, ensuring the safety of vital resources like food, air, and water. Through a combination of prevention education initiatives and regulatory inspections, the program actively safeguards public health, reflecting a commitment to proactive health promotion and disease prevention.

Primary Contact: Emily Horton, Program Manager

Website: <https://www.deschutes.org/health/page/environmental-health>

<https://www.deschutes.org/health/page/emergency-preparedness>

Emergency Preparedness and Response

Monitors and strengthens the abilities of Deschutes County and our healthcare systems to protect the public’s health in disaster situations, such as disease pandemics and epidemics, chemical and radiological releases, severe weather, and natural disasters.

Assessment and Epidemiology

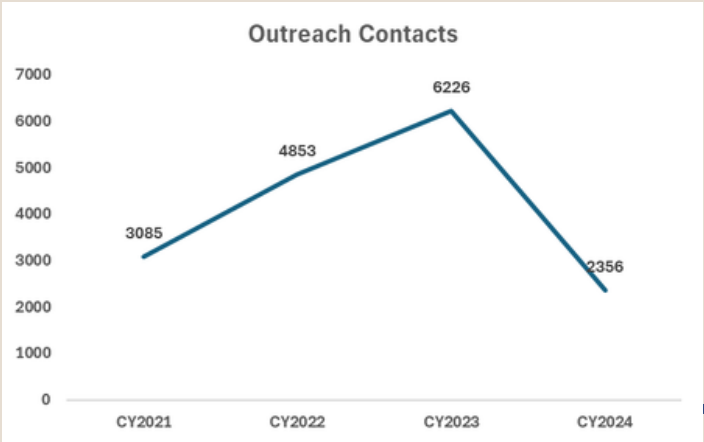
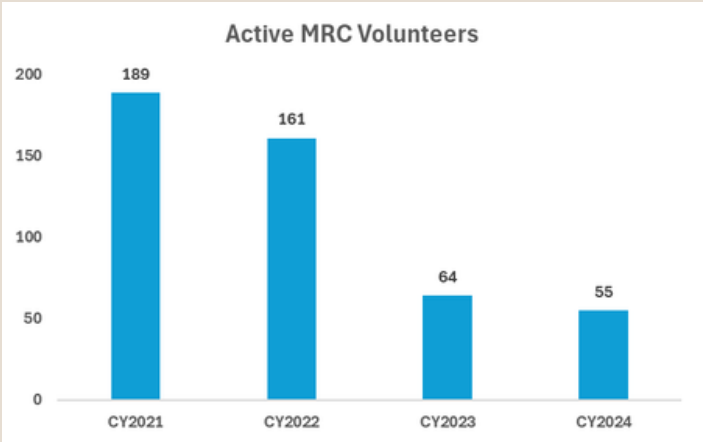
Assessing the effectiveness of public health programs and their outcomes, as well as continuously analyzing health risks within our community.

Community Partnership Development and Communications

Outreach and engagement efforts targeting all communities and demographic groups, with a specific focus on tailored outreach for those experiencing health inequities. Fostering collaborative relationships across different sectors of the community and engaging in strategic planning with community-based organizations and partners to achieve public health objectives.

Health Risk and Crisis Communications

Disseminating information regarding local public health risks and advising individuals on steps to safeguard themselves, their families and the community.



Food Service, Pool and Tourist Facility Licensing and Regulatory Inspections

Regulatory oversight encompasses 1,156 food service facilities, 149 lodging establishments (including motels, hotels, resorts, RV parks, and campgrounds), 349 temporary restaurants and 301 public pools and spas. Inspections emphasize education and disease prevention to ensure safety standards are met. 200 Complaint Responses/year. Implemented a quality improvement program through the Voluntary Retail Program Standards (FDA Program).



School Lunch Inspections

Inspection of 63 local area school lunch programs serving students of Deschutes County.

Food Handler and Manager Training

Food handler training and certified food manager training offered to local business owners and their staff.

Drinking Water Education and Regulatory Management

Administration and enforcement of drinking water quality standards for the 185 Deschutes County public water systems. Educational outreach and technical support for private well owners throughout the county.

Childcare Facilities

Inspection and educational outreach of 165 Childcare facilities, including pre-school, Headstart and Pre-K.

Environmental Hazard Response

Response to detected elevated blood lead level cases including education, investigation and environmental assessment. Respond to 300-400 animal bites/year. Provide consultation on rabies risk, quarantine and testing options to individuals, families, veterinarians and community organizations. Respond to community questions and concerns for environmental health hazards such as blue green algae, air quality and mold.

Indoor Air Quality Program

Direct outreach and education to schools and childcares including providing air quality monitors and follow up related to poor air quality.

Climate and Health

Community education, communications and coordination for climate and health issues including wildfire smoke, extreme heat, drought, vector borne disease, and wildfires.



Eric Mone presenting results of inspectional data at the Food Safety and Sustainability Summit at COCC, Fall 2024



FY 25 Highlights and Accomplishments

- Environmental Health Restructure
- Continuity planning and cross training in drinking water program, pool and spa inspections.
- Improved Environmental Health’s food safety inspection program by establishing standardization exercises and consistent training, and field reviews (regular assessment). Using the Voluntary Retail Program Standards as a model, met and audited 3 standards (standards 3, 7 and 9).
- Award winning Public Health Emergency Preparedness Program- Expanded exercises and Medical Reserve Corps development through mission sets and training.

FY 26 Challenges and Opportunities

- Continuing reliance on fees for Environmental Health (EH) services.
- Economic challenges for licensed Mobile Food Units (MFU), Oregon State Fire Marshal now requiring installation of a Type 1 grease hood. Requirement went into effect Jan. 1, 2025. Average cost of hood is \$3k-6k. Anticipated decrease in number of MFU operating.
- Upcoming retirements of staff with decades of experience, program expertise and institutional knowledge. Leveraging built relationships with community partners and better capitalization on Oregon Health Authority Community Based Organization funding work to align programmatic goals and objectives with community organizations.

FY 25 Funding Changes

- NEHA-FDA Grants:
 - Year 1 (April 1, 2025-March 31, 2026) \$21,500
 - Year 2 (April 1, 2026 – March 31, 2027) \$15,000
 - Year 3 (April 1, 2027 – March 31, 2028) \$15,000
- increased county investment in EH including Video Lottery Funds, Transient Room Tax, and County General Funds.
- MRC STRONG Grant ending

FY 26 Program Changes

- EHS-Net Grant: Anticipated. \$200,000 for budget period beginning Sept. 30, 2025. Expected Award Announcement Date: August 29, 2025



FTE Changes and Detail

Position	FTE FY25	FTE FY26	Changes
ADMIN SUPPORT SPEC	1	1	
ADMIN SUPPORT TECH	1	1	
ENV HLTH SPEC II	5	5	
ENV HLTH SPEC III	2	2	
ENV HLTH SPEC I	1	1	
SUPERVISOR HLTH SERV	1	1	
SUPERVISOR, ENVIRONMENTAL HEALTH	1	1	
Grand Total	12	12	0

Position	FTE FY25	FTE FY26	Change
ADMIN SUPPORT SPEC	1	1	
COMM HEALTH SPEC II	1	1	
COMM HEALTH SPEC III	2	2	
Deputy Director HS	0.1	0	-0.1
MANAGEMENT ANALYST	2	2	
Grand Total	6.1	6	-0.1

COMMUNICABLE DISEASE, PREVENTION AND MANAGEMENT (CD P&M) [HSCOMMDIS]

Prevent and control the spread of communicable diseases (CDs) and mitigate health threats through surveillance, education, investigation, outbreak control and immunizations.

Primary Contact: Rita Bacho, Program Manager

Website: <https://www.deschutes.org/health/page/communicable-disease-programs>

Communicable Disease & Outbreak Investigation

Work to Reduce the risk of spread of CD by tracking infectious diseases to their source and notifying people who have been exposed.

Infection Prevention in Congregate Settings

Works with congregate care facilities such as long-term care facilities and shelters to mitigate the spread of infectious diseases through education and technical assistance.

Regional CD/STI/HIV Epidemiology

Evaluates health risks and general CD trends within our community through surveillance, data analysis, and timely community messaging.

HIV and Sexually Transmitted Disease Programs

This Program section has a duty to identify and investigate HIV and STIs to minimize complications and prevent spread. This is achieved through educational services, community outreach, prevention counseling, testing, and assuring treatment for case and their partners.

Immunization Program, including School Law

Assesses county immunization rates and barriers to vaccine access and strategies with providers to remove barriers to increase vaccine access and improve immunization rates with the goal of decreasing rates of vaccine-preventable disease, disability, and death. Strategies include vaccine provision, clinic logistics as well as provider and public education.

HIV Ryan White Case Management

Empowers people living with HIV/AIDS to effectively manage their HIV and improve their overall health and quality of life. Local case managers have a thorough understanding of the services and programs available to help clients manage challenges and crises related to health, housing, treatment, coverage for health care, and referrals for needed services.

Tuberculosis (TB) Program

Oversees, manages, and facilitates activities and interventions needed to identify and properly treat all individuals with TB to stop its spread to others.



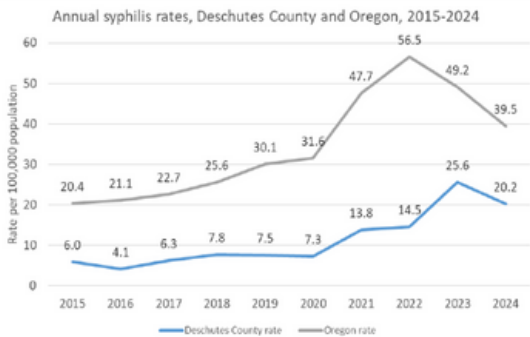
FY 25 Highlights and Accomplishments

- 1,009 total non-COVID communicable disease cases (538 STI/HIV; 471 CD (non-STI/HIV)) reported to Public Health in 2024, 67 total outbreaks managed (38 COVID; 29 non-COVID).
- Managed one active tuberculosis case, delivering daily directly observed therapy (DOT), conducting home visits, and coordinating care with healthcare providers, totaling 170 staff hours.
- 63 flu vaccines provided to the community through outreach and safety net clinics. 479 other vaccines provided through safety net clinic.
- 418 people subscribed to the flu report in 2024, compared to 472 in 2023 and 382 in 2022
- Successful, timely school exclusion process during school year 2023/2024.
- Strengthened Local Public Health Authority (LPHA) partnership with congregate settings.
- Created and updated Standard Operating Procedures (SOPs) for immunization programs.
- 98% of syphilis cases were interviewed and received appropriate treatment: 74% of these cases received treatment from the STI/HIV nurses.
- The STI/HIV Team conducted 59 outreach testing events in CY24 providing rapid testing, education and referrals (401 HIV, 372 Hep C, and 391 syphilis).
- Initiated framework for conducting a community assessment of reproductive health access and barriers.

FY 26 Challenges and Opportunities

- Vaccine hesitancy.
- Staffing changes causing increased workloads.
- Syphilis is a complicated disease STI nurses spent over 180 hours in CY24 following up on syphilis labs that did not result in a case.
- Increased opportunities to collaborate with providers and the community through the ‘Access to Preventive Clinical Services’ program element.

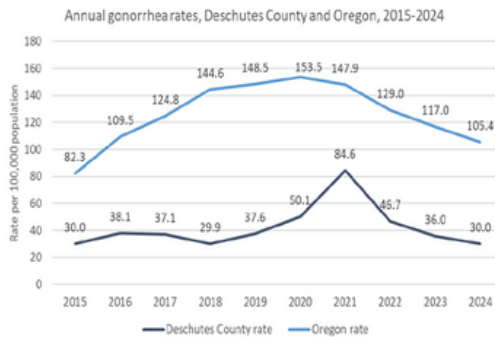
Syphilis rates



Note: Data from Oregon Epidemiologists' User System (ORPHEUS). Rates calculated using American Community Survey 5-year population estimates, 2023 vintage. Data are preliminary as of 1/14/2025.



Gonorrhea rates



Note: Data from Oregon Epidemiologists' User System (ORPHEUS). Rates calculated using American Community Survey 5-year population estimates, 2023 vintage. Data are preliminary as of 1/14/2025.



FY 25 Funding Changes

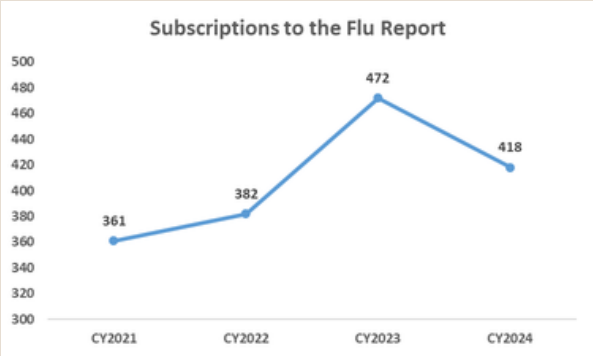
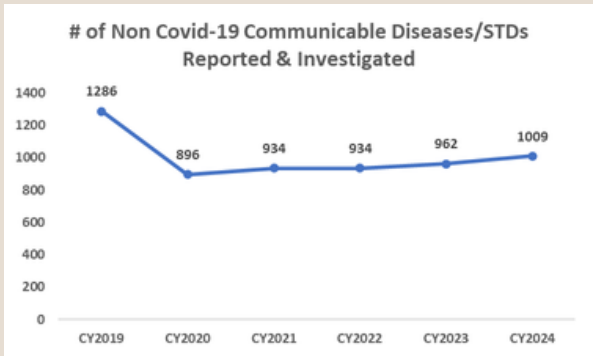
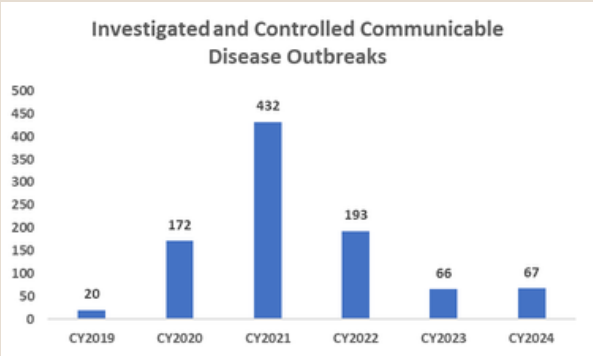
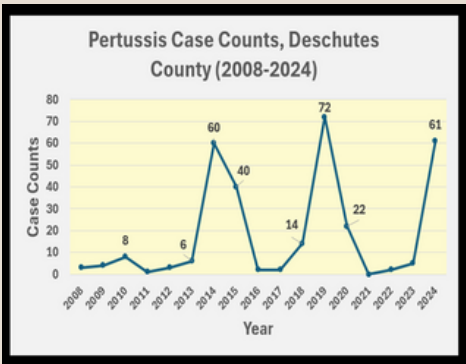
- New HIV/STI Statewide Services (HSSS) Program Element was created to combine PE07, PE10 and PE73 to provide HIV/STI funding to all counties in Oregon. The new Program Element will begin FY26 with no funding changes for Deschutes County until FY28.
- PE 46 Access to Preventative Clinical Services was moved to the STI/HIV Team within CD Prevention and Management.
- The STI/HIV Team took on providing safety net clinic services for STI/HIV screening visits.

FY 26 Program Changes

- The Ryan White Case Management Program will be transitioned to Eastern Oregon Council on Independent Living (EOCIL) starting FY26. EOCIL has provided Ryan White services since 2003 and currently serves 14 other Eastern Oregon Counties.

FTE Changes and Detail

Position	FTE FY25	FTE FY26	Change
ADMIN SUPPORT SPEC	0.8	0.8	
COMM HEALTH SPEC II	2	2	
MANAGEMENT ANALYST	1	1	
PUBLIC HEALTH ED I	0.7	0	-0.7
PUBLIC HEALTH ED III	0.9	0	-0.9
PUBLIC HTH NURSE II	5	4	-1
PUBLIC HTH NURSE III	1	1	
SUPERVISOR HLTH SERV	2	2	
Grand Total	13.4	10.8	-2.6



CLINICAL AND FAMILY SERVICES [HSPHDIRECT & HSCLINICAL]

These programs are focused on providing safety-net public health services to individuals and families seeking perinatal education and care coordination, nurse home visiting, nutrition education, breastfeeding support, and referrals to needed resources.

Primary Contact: Anne Kilty, Program Manager

Website: <https://www.deschutes.org/health/page/clinics-and-services>

Nurse Family Support Services (NFSS)

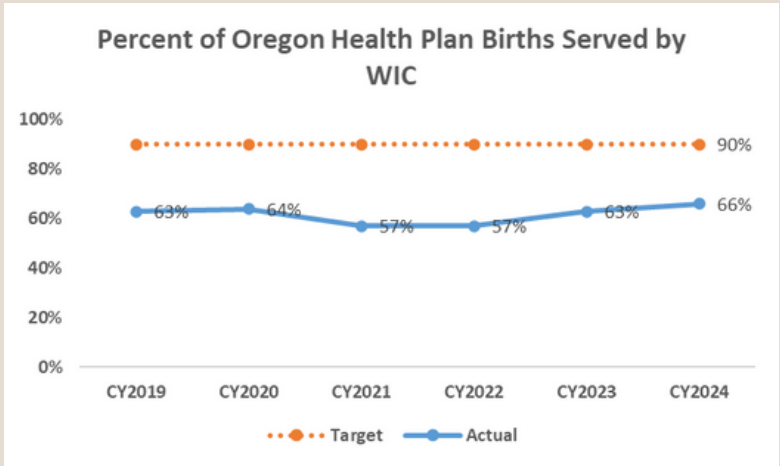
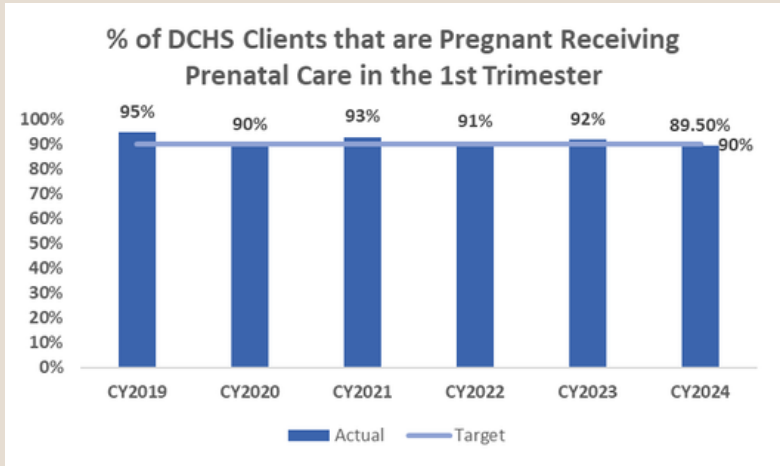
Provides direct nursing support to pregnant and post-partum women, new parents and families to improve birth, postpartum, infant and child health outcomes, and enhance family relationships.

Perinatal Care Coordination (PCC)

Provides pregnant and postpartum individuals access to and enrollment in prenatal care, medical insurance application assistance, nutrition resources, primary care, behavioral health and dental care coordination, medical transportation, and many other services.

Women, Infants & Children (WIC)

Provides nutrition education, breastfeeding support, access to healthy foods, and referrals to other needed resources for pregnant and post-partum women, and their infants and children.



FY 25 Highlights and Accomplishments

- In July 2024, Public Health’s NFSS team applied for and was granted the Family Connects Community Lead role, providing greater flexibility and control over the Family Connects program in Deschutes County. In November 2024, the Family Connects team was fully staffed and working with prenatal and pediatric partners to increase promotion of and participation in Family Connects visits.
- Over the past 2 years WIC has increased participation by 17% after nearly 2 decades of declining caseloads. At the OHA biennial review in May 2024, WIC was recognized for consistently serving above their assigned caseload. Deschutes County WIC accounts for 4% of the state’s caseload, yet it accounts for 10% of the state’s increased participation.
- PCC celebrated its 9th anniversary in October 2024. With the expansion and growth of the program, the team has been able to cast a wider net in the community providing more support to pregnant and postpartum people. Since the PCC program was launched, they have served over 8,000 pregnant and postpartum individuals in the community!

FY 26 Challenges and Opportunities

- The Clinical & Family Services leadership team with the support of Health Services’ Business Intelligence team are developing a data-driven strategic plan that will optimize the NFSS and PCC team structures to balance workloads, provide redundancy for TML/Vacancies, decrease burnout, enhance longevity, and increase revenue thereby ensuring sustainability.
- Family Connects Oregon continues to evolve at the state and local levels, challenged by underutilization. The latter half of FY25 and FY26 will be focused on assessment and optimization of the Family Connects program including community demand, staffing support, and fiscal stewardship.



- WIC’s great success at reaching and serving more families in Deschutes County has resulted in increased staff workload and coverage pressures. The challenge will be to meet this demand and prepare for continued increase in participants while maintaining awareness of fiscal constraints.

FY 25 Funding Changes

- There is a proposal in the FY26 state budget that, if passed, will eliminate the 40% LPHA match for Babies First! and CaCoon visit revenue. Based on FY24 visits, this would have resulted in an additional \$240,000 for those programs.

FY 26 Program Changes

- During FY25, the decision was made to close the reproductive health clinics and move from providing direct reproductive health services to assuring robust access to these services in our community, through community partners.
- Midway through FY25, the WIC and Public Health front desk teams were combined into a single Public Health Front Desk team. This will address changing workloads with the closing of the clinics, increased caseloads in WIC, and balancing of workloads. This combining of teams allows for cross-training, increased administrative support to staff, sustainability, and will improve the experience of clients and the public.

FTE Changes and Detail

Position	FTE FY25	FTE FY26	Change
ADMIN SUPPORT SPEC	2	2	
MANAGER CLINICAL SERVICES	0.2	0	-0.2
LANGUAGE ACCESS COORDINATOR	0.5	0	-0.5
ADMIN SUPPORT TECH	6.8	0	-6.8
MEDICAL ASSISTANCE, CERTIFIED	0.3	0	-0.3
NURSE PRACTITIONER	1	0	-1
PHYS CLINICAL SVC	0.5	0	-0.5
PUBLIC HEALTH ED I	2.6	2.6	
PUBLIC HEALTH ED II	4	4	
PUBLIC HEALTH ED III	0.75	0.75	
PUBLIC HTH NURSE II	6.35	7.35	1
PUBLIC HTH NURSE III	2	1	-1
REGISTERED DIETITIAN	1.4	1.4	
SUPERVISOR ADMIN	1	0	-1
SUPERVISOR HLTH SERV	3	2	-1
Grand Total	32.4	21.1	-11.3



Deschutes County Health Services
Reserve Funds
OHP Mental Health Reserve
Fund 270

RESOURCES	FY 2025 Revised	% of Budget	FY25 Projected	%	FY 2026 Requested	% of Budget	\$ Variance	% Change
Beginning Working Capital (BWC)	\$ 26,211,425	81%	\$ 26,211,425	81%	\$ 35,585,802	75%	\$ 9,374,377	36%
Capitation	690,000	2%	298,265	1%	-	0%	(690,000)	-100%
Interest Revenue	576,000	2%	936,913	3%	907,000	2%	331,000	-3%
CCBHC PPS	4,750,100	15%	10,305,812	32%	10,922,200	23%	6,172,100	6%
Interfund Transfers	-	0%	32,256	0%	-	0%	-	-100%
General Fund Subsidy	-	0%	-	0%	-	0%	-	~
		0%		0%		0%		
Total Resources	\$ 32,227,525	100%	\$ 37,784,671	117%	\$ 47,415,002	100%	\$ 15,187,477	25%
REQUIREMENTS								
Materials & Services	4,266,163	25%	2,198,869	13%	11,130,299	23%	6,864,136	406%
Overhead	-	0%	-	0%	-	0%	-	~
Contingency	-	0%	-	0%	847,936	2%	847,936	~
Reserve for Future Use	12,961,362	75%	35,585,802	207%	35,436,767	75%	22,475,405	0%
								~
Total Requirements	\$ 17,227,525	100%	\$ 37,784,671	219%	\$ 47,415,002	100%	\$ 30,187,477	25%

SCENARIO - No Medicaid Changes (Status Quo)

\$ 16,560,302	25% operating expenses
12,784,000	Remaining capital reserve
6,092,465	Discretionary (\$) remaining in FY26

SCENARIO - 20% Medicaid Enrollment Reduction

1,086,506	Discretionary (\$) remaining in FY26
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Deschutes County Health Services
Operating Fund
Health Services Department
Fund 274

RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Requested	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ 12,456,527	13%	\$ 9,744,273	10%	\$ (2,712,254)	-22%
Government Grants & Payments	41,565,289	44%	36,124,668	39%	(5,440,621)	-13%
Capitation and FFS	22,318,149	24%	23,087,649	25%	769,500	3%
Charges for Services	3,478,748	4%	3,409,406	4%	(69,342)	-2%
Miscellaneous	1,256,894	1%	1,494,062	2%	237,168	19%
Interfund Grants	199,000	0%	1,094,969	1%	895,969	450%
Interfund Payment	-	0%	-	0%	-	~
Transfer In - OHP Reserve	4,266,163	5%	11,130,299	12%	6,864,136	161%
Transfer In - Acute Services	626,000	1%	-	0%	(626,000)	-100%
Transfer In - TRT	276,572	0%	376,572	0%	100,000	36%
Transfer In - Fund 165 (Video Lottery Fund)	250,000	0%	108,770	0%	(141,230)	-56%
Transfer In - General Fund	7,218,715	8%	6,808,300	7%	(410,415)	-6%
Total Resources	\$ 93,912,057	100%	\$ 93,378,968	100%	\$ (533,089)	-1%

REQUIREMENTS

Personnel	\$ 58,826,382	63%	\$ 64,152,894	69%	\$ 5,326,512	9%
Materials & Services	16,956,159	18%	8,902,161	10%	(8,053,998)	-47%
ISFs	6,342,919	7%	7,007,199	8%	664,280	10%
Capital Outlay	1,932,000	2%	5,176,842	6%	3,244,842	168%
Transfers Out	1,996,086	2%	610,712	1%	(1,385,374)	-69%
Contingency	6,797,662	7%	7,069,018	8%	271,356	4%
Reserve for Future Use	1,060,849	1%	460,142	0%	(600,707)	-57%
Total Requirements	\$ 93,912,057	100%	\$ 93,378,968	100%	\$ (533,089)	-1%

FTE

424.30

417.63

(6.67)

(2.00) LTD
 (1.50) BHRN
 (3.17) Eliminated Clinic and
 Infection Prev.



Deschutes County Health Services

FY 2026 Proposed Budget - Department Summary by Program

PUBLIC HEALTH	Budget				County General Fund				GF % of Budget		FTE		
	FY 2025	FY 2026	Change	Chg %	FY 2025	FY 2026	Change	Chg %	FY 2025	FY 2026	FY 2025	FY 2026	Change
Access to Clinical & Preventive Services	\$ 7,043,028	\$ 5,399,194	\$ (1,643,834)	-23.3%	\$ 2,433,775	\$ 1,639,187	\$ (794,588)	-32.6%	34.6%	30.4%	32.40	21.10	-11.30
Communicable Disease	2,977,658	2,724,659	(252,999)	-8.5%	919,332	1,413,247	493,915	53.7%	30.9%	51.9%	13.40	10.80	-2.60
Emergency Prep	958,315	982,406	24,091	2.5%	118,867	327,643	208,776	175.6%	12.4%	33.4%	6.10	6.00	-0.10
Environmental Health	2,398,038	2,907,141	509,103	21.2%	-	338,519	338,519	~	0.0%	11.6%	12.00	12.00	0.00
Prevention	6,113,515	4,644,166	(1,469,349)	-24.0%	1,319,807	1,179,807	(140,000)	-10.6%	21.6%	25.4%	17.60	17.50	-0.10
Public Health Administration*	3,273,982	4,022,775	748,793	22.9%	338,661	338,661	-	0.0%	10.3%	8.4%	9.45	9.55	0.10
TOTAL PUBLIC HEALTH	\$ 22,764,536	\$ 20,680,341	\$ (2,084,195)	-9.2%	\$ 5,130,442	\$ 5,237,064	\$ 106,622	2.1%	22.5%	25.3%	90.95	76.95	-14.00

BEHAVIORAL HEALTH	Budget				County General Fund				GF % of Budget		FTE		
	FY 2025	FY 2026	Change	Chg %	FY 2025	FY 2026	Change	Chg %	FY 2025	FY 2026	FY 2025	FY 2026	Change
Access and Integrated Services	\$ 3,965,409	\$ 4,324,335	\$ (358,926)	-8.3%	\$ -	\$ -	\$ -	-	0.0%	0.0%	33.30	34.43	1.13
Comprehensive Care for Youth and Families	10,719,591	11,614,664	895,073	8.3%	365,518	-	(365,518)	-100.0%	3.4%	0.0%	47.50	47.50	0.00
Crisis Services	9,018,132	9,341,824	323,692	3.6%	326,519	-	(326,519)	-100.0%	3.6%	0.0%	43.70	35.70	-8.00
Intellectual & Developmental Disabilities	9,236,915	9,586,044	349,129	3.8%	1,346,236	1,346,236	-	0.0%	14.6%	14.0%	49.85	49.85	0.00
Intensive Adult Services	12,372,252	10,886,441	(1,485,811)	-12.0%	50,000	50,000	-	0.0%	0.4%	0.5%	58.10	43.09	-15.01
Forensic and Acute Services	-	4,295,376	4,295,376	-	-	-	-	-	-	0.0%	0.00	17.50	17.50
Outpatient Complex Care	9,793,027	10,136,286	343,259	3.5%	-	-	-	-	0.0%	0.0%	40.50	40.00	-0.50
Behavioral Health Administration & Pass-thru*	11,135,882	7,268,242	(3,867,640)	-34.7%	-	-	-	-	0.0%	0.0%	8.50	10.41	1.91
TOTAL BEHAVIORAL HEALTH	\$ 66,241,208	\$ 67,453,212	\$ 1,212,004	1.8%	\$ 2,088,273	\$ 1,396,236	\$ (692,037)	-33.1%	3.2%	2.1%	281.45	278.48	-2.97

ADMINISTRATIVE SERVICES**	Budget				County General Fund				GF % of Budget		FTE		
	FY 2025	FY 2026	Change	Chg %	FY 2025	FY 2026	Change	Chg %	FY 2025	FY 2026	FY 2025	FY 2026	Change
Department Administration	\$ 8,514,721	\$ 10,089,373	\$ 1,574,652	18.5%	\$ -	\$ 175,000	\$ 175,000	~	0.0%	1.7%	51.90	62.20	10.30
Department Infrastructure & Transfers	11,642,925	12,762,555	1,119,630	9.6%	-	-	-	~	0.0%	0.0%	0.00	0.00	0.00
TOTAL ADMINISTRATIVE SERVICES	\$ 20,157,646	\$ 22,851,928	\$ 2,694,282	13.4%	\$ -	\$ 175,000	\$ 175,000	~	0.0%	0.8%	51.90	62.20	10.30

TOTAL HEALTH SERVICES (w/ intrafund transfers)**	\$ 109,163,390	\$ 110,985,481	\$ 1,822,091	1.7%	\$ 7,218,715	\$ 6,808,300	\$ (410,415)	-5.7%	6.6%	6.1%	424.30	417.63	-6.67
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TOTAL HEALTH SERVICES (w/o intrafund transfers)***	\$ 93,912,057	\$ 93,378,968	\$ (533,089)	-0.6%	\$ 7,218,715	\$ 6,808,300	\$ (410,415)	-5.7%	7.7%	7.3%			
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Deschutes County Health Services Public Health

Portion of Total GF Subsidy
Request



77%

RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Requested	% of Budget	\$ Variance	
Beginning Working Capital	\$ 4,038,789	18%	\$ 2,814,551	14%	\$ (1,224,238)	-30%
Federal Grants & Payments	162,746	1%	72,532	0%	(90,214)	-55%
State Grants & Payments	7,337,450	32%	7,101,139	34%	(236,311)	-3%
Capitation and Medicaid	1,971,102	9%	1,403,350	7%	(567,752)	-29%
Local Grants	335,182	1%	576,185	3%	241,003	72%
Charges for Services	2,866,844	13%	2,417,006	12%	(449,838)	-16%
Other Revenue	50,105	0%	105	0%	(50,000)	-100%
Interfund Grants	42,000	0%	264,730	1%	222,730	530%
Transfer In - OHP Mental Health Reserve	303,304	1%	308,337	1%	5,033	2%
Transfer In - TRT	276,572	1%	376,572	2%	100,000	36%
Transfer In - Video Lottery Funds	250,000	1%	108,770	1%	(141,230)	-56%
Transfer In - County General Fund	5,130,442	23%	5,237,064	25%	106,622	2%
Total Resources	\$ 22,764,536	100%	\$ 20,680,341	100%	\$ (2,084,195)	-9%

REQUIREMENTS

Personnel	\$ 12,936,888	57%	\$ 12,541,761	61%	\$ (395,127)	-3%
Materials & Services	2,928,583	13%	1,795,108	9%	(1,133,475)	-39%
Capital Outlay	-	0%	-	0%	-	~
Department Overhead	3,776,417	17%	3,788,884	18%	12,467	0%
Transfers Out	1,173,640	5%	-	0%	(1,173,640)	-100%
Contingency	1,949,008	9%	2,554,588	12%	605,580	31%
Total Requirements	\$ 22,764,536	100%	\$ 20,680,341	100%	\$ (2,084,195)	-9%

90.95

76.95

(14.00)

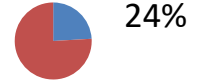
FTE

(1.0) LTD
(7.8) PH Front Office, Vital Records to Admin
(1.5) Language Access and Snr QA to Admin
(3.7) Regular eliminated (Clinic and Infection Prev.)



Deschutes County Health Services
 Public Health Service Area
Access to Clinical & Preventive Services
 HSPHDIRECT, HSCLINICAL

Portion of GF Subsidy Request



RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Proposed	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ 137,368	2%	\$ 542,007	10%	\$ 404,639	295%
Government Grants & Payments	3,323,479	47%	2,751,500	51%	(571,979)	-17%
Medicaid - Capitation	360,000	5%	391,000	7%	31,000	9%
Charges for Services	738,406	10%	75,500	1%	(662,906)	-90%
Miscellaneous	50,000	1%	-	0%	(50,000)	-100%
Interfund Payment	-	0%	-	0%	-	~
General Fund Subsidy	2,433,775	35%	1,639,187	30%	(794,588)	-33%
Total Resources	\$ 7,043,028	100%	\$ 5,399,194	100%	\$ (1,643,834)	-23%

REQUIREMENTS

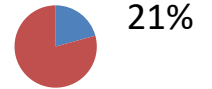
Personnel	\$ 4,441,255	63%	\$ 3,232,785	60%	\$ (1,208,470)	-27%
Materials & Services	812,723	12%	594,855	11%	(217,868)	-27%
Capital Outlay	-	0%	-	0%	-	~
Intrafund Payment	(69,434)	-1%	(200,000)	-4%	(130,566)	188%
Department Overhead	1,664,517	24%	1,616,952	30%	(47,565)	-3%
Transfers Out	-	0%	-	0%	-	~
Contingency	193,967	3%	154,602	3%	(39,365)	-20%
Total Requirements	\$ 7,043,028	100%	\$ 5,399,194	100%	\$ (1,643,834)	-23%

FTE **32.40** **21.10** (11.30)



Deschutes County Health Services
 Public Health Service Area
Communicable Disease
 HSCOMMDIS

Portion of GF Subsidy Request



RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Proposed	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ 23,308	1%	\$ 8,800	0%	\$ (14,508)	-62%
Government Grants & Payment	2,030,998	68%	1,298,592	48%	(732,406)	-36%
Charges for Services	4,020	0%	4,020	0%	-	0%
Miscellaneous	-	0%	-	0%	-	~
Interfund Payment	-	0%	-	0%	-	~
General Fund Subsidy	919,332	31%	1,413,247	52%	493,915	54%
Total Resources	<u>\$ 2,977,658</u>	100%	<u>\$ 2,724,659</u>	100%	<u>\$ (252,999)</u>	-8%

REQUIREMENTS

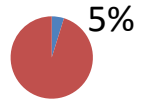
Personnel	\$ 1,993,629	67%	\$ 1,788,664	66%	\$ (204,965)	-10%
Materials & Services	245,463	8%	79,149	3%	(166,314)	-68%
Capital Outlay	-	0%	-	0%	-	~
Department Overhead	738,566	25%	839,365	31%	100,799	14%
Transfers Out	-	0%	-	0%	-	~
Contingency	-	0%	17,481	1%	17,481	~
Total Requirements	<u>\$ 2,977,658</u>	100%	<u>\$ 2,724,659</u>	100%	<u>\$ (252,999)</u>	-8%

FTE	13.40	10.80	(2.60)
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Deschutes County Health Services
 Public Health Service Area
Emergency Preparedness & Recovery
 HSEMERPREP

Portion of GF Subsidy Request



RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Proposed	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ (37,840)	-4%	\$ 37,100	4%	\$ 74,940	-198%
Government Grants & Payments	877,288	92%	617,663	63%	(259,625)	-30%
Charges for Services	-	0%	-	0%	-	~
Miscellaneous	-	0%	-	0%	-	~
Interfund Payment	-	0%	-	0%	-	~
General Fund Subsidy	118,867	12%	327,643	33%	208,776	176%
Total Resources	\$ 958,315	100%	\$ 982,406	100%	\$ 24,091	3%

REQUIREMENTS

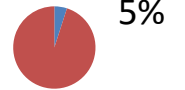
Personnel	\$ 471,457	49%	\$ 680,370	69%	\$ 208,913	44%
Materials & Services	245,325	26%	14,100	1%	(231,225)	-94%
Capital Outlay	-	0%	-	0%	-	~
Department Overhead	213,145	22%	287,803	29%	74,658	35%
Transfers Out	-	0%	-	0%	-	~
Contingency	28,388	3%	133	0%	(28,255)	-100%
Total Requirements	\$ 958,315	100%	\$ 982,406	100%	\$ 24,091	3%

FTE	6.10	6.00	(0.10)
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Deschutes County Health Services
 Public Health Service Area
Environmental Health
 HSENVIRON

Portion of GF Subsidy Request



RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Proposed	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ (75,436)	-3%	\$ -	0%	\$ 75,436	-100%
Government Grants & Payments	296,405	12%	323,943	11%	27,538	9%
Charges for Services	1,650,497	69%	1,759,337	61%	108,840	7%
TRT Transfer	276,572	12%	376,572	13%	100,000	36%
Video Lottery Funds	250,000	10%	108,770	4%	(141,230)	-56%
General Fund Subsidy	-	0%	338,519	12%	338,519	~
Total Resources	\$ 2,398,038	100%	\$ 2,907,141	100%	\$ 509,103	21%

REQUIREMENTS

Personnel	\$ 1,710,104	71%	\$ 1,865,500	64%	\$ 155,396	9%
Materials & Services	53,860	2%	220,252	8%	166,392	309%
Capital Outlay	-	0%	-	0%	-	~
Department Overhead	634,074	26%	819,940	28%	185,866	29%
Transfers Out	-	0%	-	0%	-	~
Contingency	-	0%	1,449	0%	1,449	0%
Total Requirements	\$ 2,398,038	100%	\$ 2,907,141	100%	\$ 509,103	21%

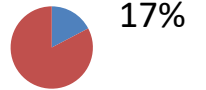
0

FTE	12.00	12.00	-
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Deschutes County Health Services
 Public Health Service Area
Prevention
 HSPREVENT

Portion of GF Subsidy Request



RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Proposed	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ 1,886,282	31%	\$ 23,075	0%	\$ (1,863,207)	-99%
Government Grants & Payments	2,150,000	35%	2,356,900	51%	206,900	10%
Charges for Services	474,026	8%	578,254	12%	104,228	22%
Miscellaneous	-	0%	-	0%	-	~
OHP Mental Health Reserve	241,400	4%	241,400	5%	-	0%
Interfund Grants	42,000	1%	264,730	6%	222,730	530%
General Fund Subsidy	1,319,807	22%	1,179,807	25%	(140,000)	-11%
Total Resources	\$ 6,113,515	100%	\$ 4,644,166	100%	\$ (1,469,349)	-24%

REQUIREMENTS

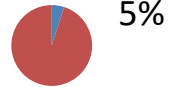
Personnel	\$ 2,475,249	40%	\$ 2,771,732	60%	\$ 296,483	12%
Materials & Services	1,314,567	22%	626,541	13%	\$ (688,026)	-52%
Capital Outlay	-	0%	-	0%	\$ -	~
Intrafund Transfer	-	0%	-	0%	\$ -	~
Department Overhead	1,112,730	18%	1,039,035	22%	\$ (73,695)	-7%
Transfers Out	1,173,640	19%	-	0%	\$ (1,173,640)	-100%
Contingency	37,329	1%	206,858	4%	\$ 169,529	454%
Total Requirements	\$ 6,113,515	100%	\$ 4,644,166	100%	\$ (1,469,349)	-24%

FTE **17.60** **17.50** **(0.10)**



Deschutes County Health Services
 Public Health Service Area
Public Health Administration
 HSPHGEN

Portion of GF Subsidy Request



RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Proposed	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ 2,105,108	48%	\$ 2,203,569	39%	\$ 98,461	5%
Government Grants & Payments	768,310	18%	1,413,608	25%	645,298	84%
Charges for Services	-	0%	-	0%	-	~
Miscellaneous	-	0%	-	0%	-	~
OHP Mental Health Reserve	61,904	1%	66,937	1%	5,033	8%
Division Overhead Payments (1)	1,082,632	25%	1,636,807	29%	554,175	51%
General Fund Subsidy	338,661	8%	338,661	6%	-	0%
Total Resources	\$ 4,356,615	100%	\$ 5,659,582	100%	\$ 1,302,967	30%

REQUIREMENTS

Personnel	\$ 1,845,194	42%	\$ 2,202,710	39%	\$ 357,516	19%
Materials & Services	326,080	7%	460,211	8%	134,131	41%
Capital Outlay	-	0%	-	0%	-	~
Intrafund Payment	-	0%	-	0%	-	~
Department Overhead	496,017	11%	822,596	15%	326,579	66%
Transfers Out	-	0%	-	0%	-	~
Contingency	1,689,324	39%	2,174,065	38%	484,741	29%
Total Requirements	\$ 4,356,615	100%	\$ 5,659,582	100%	\$ 1,302,967	30%

FTE **9.45** **9.55** **0.10**

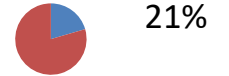
Note: (1) Division Overhead Payments are intra-division transfers made by each program to pay for division-specific overhead.
 Intrafund activity does not require legal budget appropriation, and is, therefore, a reconciling item to the legal budget request.
 When Division Overhead Payments are removed from the program budget, it will agree with the Summary by Program Budgets.



Deschutes County Health Services

Behavioral Health

Portion of GF Subsidy Request



RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Requested	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ 4,946,976	7%	\$ 3,554,722	5%	\$ (1,392,254)	-28%
Federal Grants & Payments	824,623	1%	-	0%	(824,623)	-100%
State Grants & Payments	29,166,322	44%	26,049,482	39%	(3,116,840)	-11%
Local Grants	2,020,060	3%	985,500	1%	(1,034,560)	-51%
OHP Capitation & Fee for Service	21,458,990	32%	22,661,749	34%	1,202,759	6%
Charges for Services	582,026	1%	661,120	1%	79,094	14%
Other Revenue	408,079	1%	492,202	1%	84,123	21%
Interfund Grants	157,000	0%	830,239	1%	673,239	429%
Transfer In - County General Fund	2,088,273	3%	1,396,236	2%	(692,037)	-33%
Transfer In - OHP Mental Health Reserve	3,962,859	6%	10,821,962	16%	6,859,103	173%
Transfer In - Acute Services	626,000	1%	-	0%	(626,000)	-100%
Total Resources	\$ 66,241,208	100%	\$ 67,453,212	100%	\$ 1,212,004	2%

REQUIREMENTS

Personnel	\$ 37,998,825	57%	\$ 41,950,930	62%	\$ 3,952,105	10%
Materials & Services	11,393,405	17%	4,221,104	6%	(7,172,301)	-63%
Capital Outlay	1,932,000	3%	5,176,842	8%	3,244,842	168%
Department Overhead	11,474,916	17%	13,817,629	20%	2,342,713	20%
Transfers Out	445,000	1%	216,000	0%	(229,000)	-51%
Contingency	1,936,213	3%	1,610,565	2%	(325,648)	-17%
Reserve for Future Use	1,060,849	2%	460,142	1%	(600,707)	-57%
Total Requirements	\$ 66,241,208	100%	\$ 67,453,212	100%	\$ 1,212,004	2%

FTE

281.45

278.48

(2.97)

(1.0) LTD

(1.5) BHRN

(1.0) BH Front Office to Admin

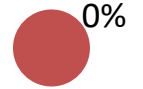
+0.53 FTE from Clinic converted to BH Tech

* Figures may not add due to rounding.



Deschutes County Health Services
 Behavioral Health Service Area
Access and Integrated Services
 HSACCESS, HSMEDICAL, HSINTEGRAT

Portion of GF Subsidy Request



RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Proposed	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ 405,043	10%	\$ 762,958	18%	\$ 357,915	88%
Government Grants & Payments	148,766	4%	668,643	15%	519,877	349%
CCBHC PPS	-	0%	-	0%	-	~
OHP Capitation & FFS	3,054,806	77%	2,833,755	66%	(221,051)	-7%
Charges for Services	20,000	1%	26,200	1%	6,200	31%
OHP Mental Health Reserves	336,794	8%	10,579	0%	(326,215)	-97%
Interfund Grants	-	0%	22,200	1%	22,200	~
General Fund Subsidy	-	0%	-	0%	-	~
Total Resources	\$ 3,965,409	100%	\$ 4,324,335	100%	\$ 358,926	9%

REQUIREMENTS

Personnel	\$ 5,446,845	137%	\$ 6,071,855	140%	\$ 625,010	11%
Materials & Services	564,922	14%	643,323	15%	78,401	14%
Capital Outlay	-	0%	-	0%	-	~
Department Overhead	(2,116,201)	-53%	(2,440,844)	-56%	(324,643)	15%
Transfers Out	-	0%	-	0%	-	~
Contingency	14,420	0%	50,001	1%	35,581	247%
Reserve for Future Use	55,423	1%				
Total Requirements	\$ 3,965,409	100%	\$ 4,324,335	100%	\$ 414,349	9%

FTE	33.30	34.43	1.13
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Deschutes County Health Services
 Behavioral Health Service Area
Comprehensive Care for Youth and Families
 HSINTYOUTH

Portion of GF Subsidy Request



RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Proposed	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ 1,371,966	13%	\$ 530,000	5%	\$ (841,966)	-61%
Government Grants & Payments	3,366,118	31%	2,678,615	23%	(687,503)	-20%
OHP Capitation & FFS	5,349,406	50%	5,904,255	51%	554,849	10%
CCBHC PPS	-	0%	-	0%	-	~
Charges for Services	266,583	2%	325,900	3%	59,317	22%
OHP Mental Health Reserves	-	0%	2,175,894	19%	2,175,894	~
Interfund Transfer	-	0%	-	0%	-	~
General Fund Subsidy	365,518	3%	-	0%	(365,518)	-100%
Total Resources	\$ 10,719,591	100%	\$ 11,614,664	100%	\$ 895,073	8%

REQUIREMENTS

Personnel	\$ 6,431,891	60%	\$ 6,898,105	59%	\$ 466,214	7%
Materials & Services	889,681	8%	746,980	6%	(142,701)	-16%
Capital Outlay	-	0%	-	0%	-	~
Department Overhead	3,398,019	32%	3,919,579	34%	521,560	15%
Transfers Out	-	0%	-	0%	-	~
Contingency	-	0%	50,000	0%	50,000	~
Total Requirements	\$ 10,719,591	100%	\$ 11,614,664	100%	\$ 895,073	8%

FTE	47.50	47.50	-
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Deschutes County Health Services
 Behavioral Health Service Area
Crisis Services
 HSCRISIS

Portion of GF Subsidy Request



RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Proposed	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ 120,898	1%	\$ 649,142	7%	\$ 528,244	437%
Government Grants & Payments*	7,355,651	82%	4,532,722	49%	(2,822,929)	-38%
OHP Capitation & FFS	920,634	10%	904,000	10%	(16,634)	-2%
CCBHC PPS	-	0%	-	0%	-	~
Charges for Services	19,950	0%	16,250	0%	(3,700)	-19%
OHP Mental Health Reserves	244,480	3%	2,687,910	29%	2,443,430	999%
Interfund Transfer/Grant	30,000	0%	551,800	6%	521,800	1739%
General Fund Subsidy	326,519	4%	-	0%	(326,519)	-100%
Total Resources	\$ 9,018,132	100%	\$ 9,341,824	100%	\$ 323,692	4%

REQUIREMENTS

Personnel	\$ 5,932,590	66%	\$ 5,367,726	57%	\$ (564,864)	-10%
Materials & Services	828,504	9%	1,288,627	14%	460,123	56%
Capital Outlay	-	0%	-	0%	-	~
Department Overhead	1,892,697	21%	2,130,669	23%	237,972	13%
Transfers Out	-	0%	-	0%	-	~
Contingency	364,341	4%	554,802	6%	190,461	52%
Total Requirements	\$ 9,018,132	100%	\$ 9,341,824	100%	\$ 323,692	4%

FTE 43.70 35.70 (8.00)



Deschutes County Health Services
 Behavioral Health Service Area
Forensic and Acute Services
 HSFORENSIC

Portion of GF Subsidy Request



RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Proposed	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ -	~	\$ 20,000	0%	\$ 20,000	~
Government Grants & Payments	-	~	2,992,248	70%	2,992,248	~
OHP Capitation & FFS	-	~	77,804	2%	77,804	~
CCBHC PPS	-	~	-	0%	-	~
Charges for Services	-	~	2,000	0%	2,000	~
OHP Mental Health Reserves	-	~	1,074,085	25%	1,074,085	~
Interfund Grants	-	~	129,239	3%	129,239	~
General Fund Subsidy	-	~	-	0%	-	~
Total Resources	<u>\$ -</u>	~	<u>\$ 4,295,376</u>	100%	<u>\$ 4,295,376</u>	~

REQUIREMENTS

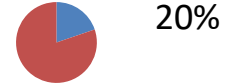
Personnel	\$ -	~	\$ 2,365,868	55%	\$ 2,365,868	~
Materials & Services	-	~	315,663	7%	315,663	~
Capital Outlay	-	~	-	0%	-	~
Department Overhead	-	~	1,144,706	27%	1,144,706	~
Transfers Out	-	~	-	0%	-	~
Contingency	-	~	469,139	11%	469,139	~
Total Requirements	<u>\$ -</u>	~	<u>\$ 4,295,376</u>	100%	<u>\$ 4,295,376</u>	~

FTE	-	17.50	17.50
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Deschutes County Health Services
 Behavioral Health Service Area
Intellectual & Developmental Disabilities (I/DD)
 HSIDD

Portion of GF Subsidy Request



RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Proposed	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ 251,682	3%	\$ 257,223	3%	\$ 5,541	2%
State Grants & Payments	5,922,809	64%	7,309,789	76%	1,386,980	23%
State Miscellaneous (Match)	1,716,088	19%	672,796	7%	(1,043,292)	-61%
Charges & Services	100	0%	-	0%	(100)	-100%
General Fund Subsidy	1,346,236	15%	1,346,236	14%	-	0%
Total Resources	\$ 9,236,915	100%	\$ 9,586,044	100%	\$ 349,129	4%

REQUIREMENTS

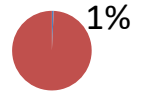
Personnel	\$ 6,230,989	67%	\$ 6,852,579	71%	\$ 621,590	10%
Materials & Services	1,117,916	12%	361,020	4%	(756,896)	-68%
Capital Outlay	-	0%	-	0%	-	~
Department Overhead	1,728,328	19%	2,366,052	25%	637,724	37%
Transfers Out	-	0%	-	0%	-	~
Reserve for Future Use	159,682	2%	6,393	0%	(153,289)	-96%
Total Requirements	\$ 9,236,915	100%	\$ 9,586,044	100%	\$ 349,129	4%

FTE	49.85	49.85	-
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Deschutes County Health Services
 Behavioral Health Service Area
Intensive Adult Services
 HSADLTINT

Portion of GF Subsidy Request



RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Proposed	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ 1,214,011	10%	\$ 630,849	6%	\$ (583,162)	-48%
Government Grants & Payments	6,306,522	51%	3,414,332	31%	(2,892,190)	-46%
CCBHC PPS	-	0%	-	0%	-	~
OHP Capitation & FFS	4,035,459	33%	4,121,421	38%	85,962	2%
Misc Revenue	407,889	3%	492,202	5%	84,313	21%
Charges for Services	31,199	0%	16,300	0%	(14,899)	-48%
OHP Mental Health Reserves	200,172	2%	2,034,337	19%	1,834,165	916%
General Fund Crime Prevention	127,000	1%	127,000	1%	-	0%
General Fund Subsidy	50,000	0%	50,000	0%	-	0%
Total Resources	\$ 12,372,252	100%	\$ 10,886,441	100%	\$ (1,485,811)	-12%

REQUIREMENTS

Personnel	\$ 6,820,296	55%	\$ 5,458,634	50%	\$ (1,361,662)	-20%
Materials & Services	1,290,315	10%	428,171	4%	(862,144)	-67%
Capital Outlay	97,000	1%	42,000	0%	(55,000)	-57%
Department Overhead	3,530,618	29%	4,510,455	41%	979,837	28%
Transfers Out	-	0%	-	0%	-	~
Contingency	573,702	5%	447,181	4%	(126,521)	-22%
Reserve for Future Use	60,321	0%				
Total Requirements	\$ 12,372,252	100%	\$ 10,886,441	100%	\$ (1,425,490)	-12%

FTE 58.10 43.09 (15.01)



Deschutes County Health Services
 Behavioral Health Service Area
Outpatient Complex Care
 HSADULT, HSNOCO, HSSOCO

Portion of GF Subsidy Request



RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Proposed	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ 1,111,822	11%	\$ 192,550	2%	\$ (919,272)	-83%
Government Grants & Payments	827,194	8%	1,049,595	10%	222,401	27%
OHP Capitation & FFS	7,271,244	74%	7,996,514	79%	725,270	10%
CCBHC PPS	-	0%	-	0%	-	~
Charges for Services	243,544	2%	274,470	3%	30,926	13%
OHP Mental Health Reserves	339,223	3%	623,157	6%	283,934	84%
General Fund Subsidy	-	0%	-	0%	-	~
Total Resources	\$ 9,793,027	100%	\$ 10,136,286	100%	\$ 343,259	4%

REQUIREMENTS

Personnel	\$ 5,608,441	57%	\$ 6,178,196	61%	\$ 569,755	10%
Materials & Services	285,012	3%	204,610	2%	(80,402)	-28%
Capital Outlay	-	0%	-	0%	-	~
Department Overhead	3,788,136	39%	3,743,480	37%	(44,656)	-1%
Transfers Out	-	0%	-	0%	-	~
Contingency	19,087	0%	10,000	0%	(9,087)	-48%
Reserve for Future Use	92,351	1%				
Total Requirements	\$ 9,793,027	100%	\$ 10,136,286	100%	\$ 435,610	4%

FTE	40.50	40.00	(0.50)
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Deschutes County Health Services
 Behavioral Health Service Area
Behavioral Health Administration and Pass-thru
 HSBHGEN

Portion of GF Subsidy Request



RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Proposed	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ 471,555	4%	\$ 512,000	5%	\$ 40,445	9%
Government Grants & Payments	6,367,857	51%	3,716,242	37%	(2,651,615)	-42%
OHP Capitation & FFS	827,441	7%	824,000	8%	(3,441)	0%
CCBHC PPS	-	0%	-	0%	-	~
OHP Mental Health Reserves	2,842,190	23%	2,216,000	22%	(626,190)	-22%
Charges for Services	840	0%	-	0%	(840)	-100%
Interfund Transfer	626,000	5%	-	0%	(626,000)	-100%
Division Overhead Payments (1)	1,419,719	11%	2,889,368	28%	1,469,649	104%
General Fund Subsidy	-	0%	-	0%	-	~
Total Resources	\$ 12,555,602	100%	\$ 10,157,610	100%	\$ (2,397,992)	-19%

REQUIREMENTS

Personnel	\$ 1,527,774	12%	\$ 2,757,967	27%	\$ 1,230,193	81%
Materials & Services	6,417,055	51%	232,710	2%	(6,184,345)	-96%
Capital Outlay	1,835,000	15%	5,134,842	51%	3,299,842	180%
Department Overhead	673,038	5%	1,332,900	13%	659,862	98%
Transfers Out	445,000	4%	216,000	2%	(229,000.00)	-51%
Contingency	964,663	8%	483,191	5%	(481,472)	-50%
Reserve for Future Use	693,072	6%	-	0%	(693,072)	-100%
Total Requirements	\$ 12,555,602	100%	\$ 10,157,610	100%	\$ (2,397,992)	-19%

FTE **8.50** **10.41** **1.91**

Note: (1) Division Overhead Payments are intra-division transfers made by each program to pay for division-specific overhead.
 Intrafund activity does not require legal budget appropriation, and is, therefore, a reconciling item to the legal budget request.
 When Division Overhead Payments are removed from the program budget, it will agree with the Summary by Program Budgets.



Deschutes County Health Services
Administrative Services & Infrastructure (incl. Director's Office)
HSDIRECTR, HSADMIN, HSALL

Portion of Total GF Subsidy
Request



RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Requested	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ 3,470,762	17%	\$ 3,375,000	15%	\$ (95,762)	-3%
Federal Grants & Payments	-	0%	-	0%	-	~
State Grants & Payments	132,289	1%	362,380	2%	230,091	174%
OHP Capitation & Fee for Service	474,674	2%	-	0%	(474,674)	-100%
Charges for Services	29,878	0%	331,280	1%	301,402	1009%
Other Revenue	798,710	4%	1,001,755	4%	203,045	25%
Transfer In - OHP Reserve	-	0%	-	0%	-	~
Admin Overhead Payments	15,251,333	76%	17,606,513	77%	2,355,180	15%
Transfer In - General Fund	-	0%	175,000	1%	175,000	~
Total Resources	\$ 20,157,646	100%	\$ 22,851,928	100%	\$ 2,694,282	13%

REQUIREMENTS

Personnel	\$ 7,890,669	39%	\$ 9,660,203	42%	\$ 1,769,534	22%
Materials & Services	2,634,171	13%	2,885,949	13%	251,778	10%
Capital Outlay	-	0%	-	0%	-	~
Department Overhead	-	0%	-	0%	-	~
ISFs	6,342,919	31%	7,007,199	31%	664,280	10%
Transfers Out	377,446	2%	394,712	2%	17,266	5%
Contingency	2,912,441	14%	2,903,865	13%	(8,576)	0%
Total Requirements	\$ 20,157,646	100%	\$ 22,851,928	100%	\$ 2,694,282	13%

51.90

62.20

10.30

FTE

Note: (1) Admin Overhead Payments are intrafund transfers made by each program to pay for department-specific overhead.

* Figures may not add due to rounding.

+7.8 PH Front Office
+1.0 BH Front Office
+1.5 Language Access Coordinator and Snr. QA



Deschutes County Health Services
 Administration
Director's Office and Administrative Services
 HSADMIN, HSDIRECTR

Portion of GF Subsidy Request



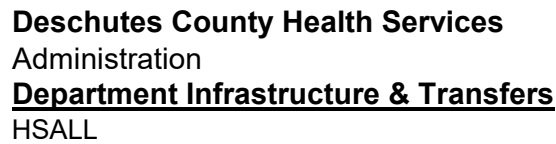
RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Proposed	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ 666,975	8%	\$ 365,000	4%	\$ (301,975)	-45%
Government Grants & Payments	12,000	0%	362,380	4%	350,380	2920%
Charges for Services	-	0%	325,000	3%	325,000	~
OHP Capitation & FFS	474,674	6%	-	0%	(474,674)	-100%
Other Revenue	475,210	6%	243,055	2%	(232,155)	-49%
Interfund Payment	-	0%	-	0%	-	~
Admin Overhead Payments (1)	6,885,862	81%	8,618,938	85%	1,733,076	25%
General Fund Subsidy	-	0%	175,000	2%	175,000	~
Total Resources	\$ 8,514,721	100%	\$ 10,089,373	100%	\$ 1,574,652	18%

REQUIREMENTS

Personnel	\$ 7,680,657	90%	\$ 9,448,111	94%	\$ 1,767,454	23%
Materials & Services	342,733	4%	541,262	5%	198,529	58%
Capital Outlay	-	0%	-	0%	-	~
Department Overhead	-	0%	-	0%	-	~
Transfers Out	25,000	0%	-	0%	(25,000)	-100%
Contingency	466,331	5%	100,000	1%	(366,331)	-79%
Total Requirements	\$ 8,514,721	100%	\$ 10,089,373	100%	\$ 1,574,652	18%

FTE **51.90** **62.20** **10.30**

Note: (1) Admin Overhead Payments are intrafund transfers made by each program to pay for department-specific overhead.
 Intrafund activity does not require legal budget appropriation, and is, therefore, a reconciling item to the legal budget request.



0%

RESOURCES	FY 2025 Revised	% of Budget	FY 2026 Proposed	% of Budget	\$ Variance	% Change
Beginning Working Capital	\$ 2,803,787	24%	\$ 3,010,000	24%	\$ 206,213	7%
Government Grants & Payments	150,167	1%	6,280	0%	(143,887)	-96%
Other Revenue	323,500	3%	758,700	6%	435,200	135%
Transfer In - Mental Health Reser	-	0%	-	0%	-	~
Admin Overhead Payments (1)	8,365,471	72%	8,987,575	70%	622,104	7%
General Fund Subsidy	-	0%	-	0%	-	~
Total Resources	\$ 11,642,925	100%	\$ 12,762,555	100%	\$ 1,119,630	10%

REQUIREMENTS

Personnel	\$ 210,012	2%	\$ 212,092	2%	\$ 2,080	1%
Materials & Services	2,291,438	20%	2,344,687	18%	53,249	2%
Capital Outlay	-	0%	-	0%	-	~
Department Overhead	6,342,919	54%	7,007,199	55%	664,280	10%
Transfers Out	352,446	3%	394,712	3%	42,266	12%
Contingency	2,446,110	21%	2,803,865	22%	357,755	15%
Total Requirements	\$ 11,642,925	100%	\$ 12,762,555	100%	\$ 1,119,630	10%

FTE

1

1

Note: (1) Admin Overhead Payments are intrafund transfers made by each program to pay for department-specific overhead. Intrafund activity does not require legal budget appropriation, and is, therefore, a reconciling item to the legal budget request.



Department	Fund	Object	Request Type (Replacement/New)	Equipment Name	Description (For replacements enter old vehicle info, vin, make & model, salvage value etc..)	Estimated Cost	Estimated Life (Years)	Description of Additional Resources (if any)	Justification
Health Services	274	490230	New	Remodel Adult Foster Home		600,000		HB 5202 - BH Housing	Remodel of Adult Foster Home for Intellectual and Developmental Disabilities needs in Redmond. Home will serve individuals with a co-occurring intellectual and developmental disability and Mental Health Condition, making it the first program of its kind in our region.
Health Services	274	490230	New	MH Adult Foster Homes		2,534,842		HB 5202 - BH Housing	Purchase and remodel of one to two 6 bed Mental Health Adult Foster Homes to support individuals with a serious mental illness. Funding may also allow for some support of a 15 bed sub acute Child Psychiatric Facility.
Health Services	274	490230	New	CCYF Building		2,000,000		OHP Behavioral Health Reserves	Includes the programming, permitting, architecture, and other costs to purchase a lot or building in Bend.
Health Services	274	490422	New	Subaru Ascent		42,000		OHA SE 12 Settlement Funding	Staff assigned to SE12 (rental assistance) activities are required to travel throughout Deschutes county, supporting seriously mentally ill clients in gaining and maintaining housing. This team provides in-home behavioral health supports and care coordination. Staff transport clients daily to support them with activities of daily living and accessing community resources.

DESCHUTES COUNTY - REQUESTED BUDGET LEVEL
FISCAL YEAR 2026

4/3/2025

FUND 270 - OHP-Mental Health Services

OBJECT - DESCRIPTION -----	FY 2023 ACTUALS -----	FY 2024 ACTUALS -----	FY 2025 ADJ BUDGET -----	YTD END OF JUN'25 -----	FY 2026 REQUESTED -----	\$ BDGT CHG FR FY 2025 -----	% BDGT CHG FR FY 2025 -----
* Resources							
301000 - BEG NET WORKING CAPITAL	14,141,782	19,143,132	26,211,425	26,211,425	35,585,802	9,374,377	35.76
334013 - CCBHC Grant	0	5,278,805	4,750,100	2,118,330	10,922,200	6,172,100	129.94
335019 - OHP Capitation	5,359,024	1,612,924	690,000	298,265	0	-690,000	-100.00
361011 - Interest-Pooled Investments	232,530	587,584	576,000	719,768	907,000	331,000	57.47
* Total - Resources	19,733,335	26,622,444	32,227,525	29,347,788	47,415,002	15,187,477	47.13

DESCHUTES COUNTY - REQUESTED BUDGET LEVEL
FISCAL YEAR 2026

4/3/2025

FUND 270 - OHP-Mental Health Services

OBJECT - DESCRIPTION -----	FY 2023 ACTUALS -----	FY 2024 ACTUALS -----	FY 2025 ADJ BUDGET -----	YTD END OF JUN'25 -----	FY 2026 REQUESTED -----	\$ BDGT CHG FR FY 2025 -----	% BDGT CHG FR FY 2025 -----
* Material & Services							
430625 - ISF Administration	1,625	1,439	0	0	0	0	0.00
430628 - ISF BOCC	389	346	0	0	0	0	0.00
430630 - ISF Finance	1,095	2,124	0	0	0	0	0.00
430631 - ISF Finance-HR Proj Reserve	253	39	0	0	0	0	0.00
450903 - Local Grants	241,400	0	0	0	0	0	0.00
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* Total - Material & Services	244,762	3,948	0	0	0	0	0.00
* Transfer Out							
491274 - Transfers Out - Health Servi	345,442	407,071	4,266,163	0	11,130,299	6,864,136	160.90
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* Total - Transfer Out	345,442	407,071	4,266,163	0	11,130,299	6,864,136	160.90
* Contingency							
501971 - Contingency	0	0	0	0	847,936	847,936	100.00
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* Total - Contingency	0	0	0	0	847,936	847,936	100.00
*							
521851 - Reserve for Future Expenditu	0	0	15,000,000	0		-15,000,000	-100.00
521874 - Reserve for OHP Future Expen	0	0	12,961,362	0	35,436,767	22,475,405	173.40
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* Total -	0	0	27,961,362	0	35,436,767	7,475,405	26.73

DESCHUTES COUNTY - REQUESTED BUDGET LEVEL
FISCAL YEAR 2026

4/3/2025

FUND 270 - OHP-Mental Health Services

OBJECT - DESCRIPTION	FY 2023 ACTUALS	FY 2024 ACTUALS	FY 2025 ADJ BUDGET	YTD END OF JUN'25	FY 2026 REQUESTED	\$ BDGT CHG FR FY 2025	% BDGT CHG FR FY 2025
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*** TOTAL FUND 270 RESOURCES	19,733,335	26,622,444	32,227,525	29,347,788	47,415,002	15,187,477	47.13
*** TOTAL FUND 270 REQUIREMENTS	590,203	411,019	32,227,525	0	47,415,002	15,187,477	47.13

DESCHUTES COUNTY - REQUESTED BUDGET LEVEL
FISCAL YEAR 2026

4/3/2025

FUND 274 - Health Services

OBJECT - DESCRIPTION -----	FY 2023 ACTUALS -----	FY 2024 ACTUALS -----	FY 2025 ADJ BUDGET -----	YTD END OF JUN'25 -----	FY 2026 REQUESTED -----	\$ BDGT CHG FR FY 2025 -----	% BDGT CHG FR FY 2025 -----
* Resources							
301000 - BEG NET WORKING CAPITAL	13,942,649	12,519,113	12,456,527	12,456,527	9,744,273	-2,712,254	-21.77
322051 - Marriage Licenses	7,160	0	0	0	0	0	0.00
322052 - Divorce Filing Fees	63,178	0	0	0	0	0	0.00
331001 - Federal Grants	1,838,903	1,321,402	987,369	254,682	72,532	-914,837	-92.65
332010 - Federal Reimbursements	551,202	0	0	0	0	0	0.00
332015 - Medicare Reimbursement	235,074	318,284	195,557	299,810	385,438	189,881	97.10
334012 - State Grant	16,940,975	19,410,464	21,743,769	15,915,114	22,146,345	402,576	1.85
334014 - Child Devel & Rehab Center	22,318	37,197	37,197	14,879	49,789	12,592	33.85
334015 - State Grant Rollover	1,615,285	1,265,316	6,449,638	4,405,607	4,671,993	-1,777,645	-27.56
335011 - State Miscellaneous	7,751,386	4,965,077	7,270,050	7,214,164	4,856,787	-2,413,263	-33.19
335018 - OHP Fee for Service	31,245	32,173	24,485	26,018	34,900	10,415	42.54
335018 - OHP FFS	5,256,164	5,777,316	4,764,259	4,207,394	5,645,320	881,061	18.49
335019 - OHP Capitation	12,088,181	17,439,562	17,529,405	12,662,118	17,407,429	-121,976	-0.70
335037 - Medicaid	1,942,773	2,333,463	2,213,893	1,617,136	2,146,300	-67,593	-3.05
335044 - Mental Health Tax	161,412	188,547	177,574	95,634	177,799	225	0.13
335048 - Family Planning Exp Project	152,985	83,152	75,000	29,140	0	-75,000	-100.00
335084 - HB 3400/3295 MJ Distribution	0	64,610	60,000	47,688	56,000	-4,000	-6.67
338011 - Local Government Grants	1,050,243	1,604,807	2,355,242	1,445,459	1,561,685	-793,557	-33.69
343013 - Other Revenue - Misc	1,224,182	1,550,783	761,230	269,701	597,270	-163,960	-21.54
345013 - Patient Insurance Fees	679,426	815,545	687,680	535,479	710,200	22,520	3.27
345014 - Patient Fees	69,108	74,832	73,946	30,488	30,430	-43,516	-58.85
345018 - Vital Records - Birth	67,853	71,268	73,000	57,666	80,000	7,000	9.59

DESCHUTES COUNTY - REQUESTED BUDGET LEVEL
FISCAL YEAR 2026

4/3/2025

FUND 274 - Health Services

OBJECT - DESCRIPTION -----	FY 2023 ACTUALS -----	FY 2024 ACTUALS -----	FY 2025 ADJ BUDGET -----	YTD END OF JUN'25 -----	FY 2026 REQUESTED -----	\$ BDGT CHG FR FY 2025 -----	% BDGT CHG FR FY 2025 -----
* Resources							
345019 - Vital Records - Death	286,305	264,988	245,000	197,239	245,000	0	0.00
345501 - EH Day Care	28,377	30,441	32,246	22,419	27,573	-4,673	-14.49
345502 - EH Pool Construction Permit	9,165	4,032	8,820	14,117	14,847	6,027	68.33
345503 - EH Pool & Spa Fee	188,553	221,932	236,250	256,114	265,125	28,875	12.22
345504 - EH Pool Plan Review	9,776	4,704	8,925	12,607	12,726	3,801	42.59
345505 - EH School Cafeteria Inspect	25,778	26,002	29,925	7,883	34,275	4,350	14.54
345506 - EH Tourist Facility	56,484	61,950	82,090	81,290	90,143	8,053	9.81
345507 - EH TF Penalty Fee	0	412	735	3,733	1,591	856	116.46
345508 - EH Resid Institute Inspect	0	293	1,549	1,769	1,877	328	21.17
345509 - Outdoor Mass Gathering	266	0	582	35	38	-544	-93.47
345521 - EH Restaurant Fee	733,461	820,620	868,350	889,331	954,450	86,100	9.92
345522 - EH Restaurant Plan Review	26,407	26,144	28,313	14,313	25,452	-2,861	-10.10
345526 - EH Restaurant Penalty Fee	5,179	8,052	8,400	7,200	4,242	-4,158	-49.50
345527 - EH Temp Restaurant Fee	42,474	50,717	54,600	28,175	53,025	-1,575	-2.88
345528 - EH Restaurant Re-Inspect Fee	0	657	690	0	531	-159	-23.04
345529 - Commissary/Base Ops Rvw	1,332	1,499	2,940	1,172	1,273	-1,667	-56.70
345540 - EH FHC Payments (Other Juris	45,680	37,025	50,400	16,303	42,420	-7,980	-15.83
345541 - EH Food Handler Card	430	630	500	570	594	94	18.80
345542 - EH FHC Replacement	0	10	30	0	33	3	10.00
345543 - EH Swimming Pool Penalty Fee	0	1,050	930	1,350	478	-452	-48.60
345545 - EH Misc Services/Training Fe	1,220	686	308	4,516	5,303	4,995	1621.75
345547 - EH Mobile Food Unit Fee	131,514	153,076	187,037	176,629	190,890	3,853	2.06
345548 - EH Mobile Food Unit Penalty	2,250	300	2,772	0	1,591	-1,181	-42.60

DESCHUTES COUNTY - REQUESTED BUDGET LEVEL
FISCAL YEAR 2026

4/3/2025

FUND 274 - Health Services

OBJECT - DESCRIPTION -----	FY 2023 ACTUALS -----	FY 2024 ACTUALS -----	FY 2025 ADJ BUDGET -----	YTD END OF JUN'25 -----	FY 2026 REQUESTED -----	\$ BDGT CHG FR FY 2025 -----	% BDGT CHG FR FY 2025 -----
* Resources							
345549 - EH Mobile Food Unit Plan Rev	26,935	33,483	31,500	13,335	18,029	-13,471	-42.77
351026 - NSF Fees	60	120	105	60	105	0	0.00
352013 - Seizure-Forfeiture	8,000	0	0	0	0	0	0.00
361011 - Interest-Pooled Investments	390,781	737,122	317,000	570,721	752,000	435,000	137.22
361019 - Interest - Other	56	133	190	145	0	-190	-100.00
363012 - Rentals	4,585	12,964	6,500	6,734	6,700	200	3.08
365001 - Grants - Private	785,239	572,317	933,099	734,212	735,257	-197,842	-21.20
365011 - Donations	350	501	0	550	0	0	0.00
371012 - Suicide Prevention	241,400	0	0	0	0	0	0.00
371018 - General Fund Crime Prev Gran	127,000	0	127,000	95,250	127,000	0	0.00
372001 - Interfund Pmts From GF	0	0	42,000	0	967,969	925,969	2204.69
372255 - Interfund Pmts From Fund 255	620,000	620,000	0	0	0	0	0.00
372276 - Interfund Pmts From Fund 276	90,000	0	0	0	0	0	0.00
391001 - Transfer In-General Fund	5,648,912	6,050,314	7,218,715	0	6,808,300	-410,415	-5.69
391160 - Transfer In-TRT	418,417	368,417	276,572	207,429	376,572	100,000	36.16
391165 - Transfer In - Fund 165	0	0	250,000	250,000	108,770	-141,230	-56.49
391255 - Transfer In-Sheriff's Office	0	0	30,000	30,000	0	-30,000	-100.00
391270 - Transfer In-OHP Mental Healt	345,442	407,071	4,266,163	0	11,130,299	6,864,136	160.90
391276 - Transfer In-Acute Care Servi	0	0	626,000	625,142	0	-626,000	-100.00
 * Total - Resources	 75,993,527	 80,390,575	 93,912,057	 65,855,051	 93,378,968	 (533,089)	 (0.57)

DESCHUTES COUNTY - REQUESTED BUDGET LEVEL
FISCAL YEAR 2026

4/3/2025

FUND 274 - Health Services

OBJECT - DESCRIPTION	FY 2023 ACTUALS	FY 2024 ACTUALS	FY 2025 ADJ BUDGET	YTD END OF JUN'25	FY 2026 REQUESTED	\$ BDGT CHG FR FY 2025	% BDGT CHG FR FY 2025
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* Personnel Services							
410101 - Regular Employees	31,066,837	31,417,279	37,105,401	24,040,970	38,917,884	1,812,483	4.88
410201 - Extra Help (Temp Employee)	293,513	306,197	199,000	343,886	646,129	447,129	224.69
410301 - Overtime	72,289	120,024	107,726	122,113	179,900	72,174	67.00
410401 - Time Management	406,008	234,891	126,900	157,131	182,497	55,597	43.81
410999 - Personnel Clearing	0	0	(2,880,471)	0	(3,698,551)	818,080	28.40
420101 - Health-Dental Ins (ISF)	6,734,917	8,854,157	11,676,224	8,173,673	12,844,382	1,168,158	10.00
420102 - Retiree Health Insurance	34,876	41,370	41,628	22,078	40,340	-1,288	-3.09
420201 - PERS Employee-Employer	6,273,725	7,051,800	8,671,892	5,446,040	10,860,403	2,188,511	25.24
420202 - PERS - Fund 575 for D-S	430,606	451,186	332,511	210,573	573,179	240,668	72.38
420301 - FICA	2,374,223	2,386,419	2,813,123	1,828,536	2,948,909	135,786	4.83
420401 - Workers' Comp Insurance	191,332	178,220	193,136	136,502	17,660	-175,476	-90.86
420403 - Workers' Comp Insurance - Ri	0	0	0	0	171,752	171,752	100.00
420501 - Unemployment Insurance	126,169	122,624	124,425	108,296	123,963	-462	-0.37
420601 - Life-Long Term Disability	122,152	127,814	170,010	88,539	193,480	23,470	13.81
420801 - Paid Leave Oregon	61,117	124,055	144,877	95,123	150,967	6,090	4.20
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* Total - Personnel Services	48,187,764	51,416,037	58,826,382	40,773,459	64,152,894	5,326,512	9.05
* Material & Services							
430305 - Architect-Design	395	17,715	0	24,550	0	0	0.00
430312 - Contracted Services	3,380,456	3,862,723	4,334,619	2,171,263	3,280,753	-1,053,866	-24.31
430322 - Education Providers	16,052	4,430	20,036	8,550	0	-20,036	-100.00
430330 - Expert Witness Testimony	9,345	10,123	12,500	5,883	12,500	0	0.00
430334 - Interpreter	40,673	12,996	24,482	11,283	40,375	15,893	64.92

DESCHUTES COUNTY - REQUESTED BUDGET LEVEL
FISCAL YEAR 2026

4/3/2025

FUND 274 - Health Services

OBJECT - DESCRIPTION -----	FY 2023 ACTUALS -----	FY 2024 ACTUALS -----	FY 2025 ADJ BUDGET -----	YTD END OF JUN'25 -----	FY 2026 REQUESTED -----	\$ BDGT CHG FR FY 2025 -----	% BDGT CHG FR FY 2025 -----
* Material & Services							
430336 - Investigations	283	73	150	88	150	0	0.00
430346 - Mailing Service	65,085	29,579	65,000	10,561	35,000	-30,000	-46.15
430350 - Medical	0	545	0	945	0	0	0.00
430352 - Medical Laboratory	15,818	12,837	26,000	7,143	4,000	-22,000	-84.62
430378 - Temp Help-Admin	151,793	0	0	0		0	0.00
430380 - Temp Help-Labor	651,934	471,475	185,852	615,781	488,572	302,720	162.88
430382 - Testing Services	0	1,107	0	0	0	0	0.00
430388 - Transportation	86,355	96,962	52,800	73,981	48,180	-4,620	-8.75
430399 - Prof-Tech Services - Other	28,503	5,674	13,335	12,995	17,888	4,553	34.14
430510 - Archive Fees	8,712	11,675	11,670	14,521	14,520	2,850	24.42
430550 - Interfund Payment	946	820	0	616		0	0.00
430620 - ISF Facilities	921,685	1,339,078	1,462,567	1,096,925	1,554,736	92,169	6.30
430625 - ISF Administration	402,740	433,057	563,953	422,965	915,022	351,069	62.25
430628 - ISF BOCC	96,314	104,109	217,440	163,080	0	-217,440	-100.00
430630 - ISF Finance	516,160	639,242	704,702	528,526	794,227	89,525	12.70
430631 - ISF Finance-HR Proj Reserve	62,633	11,618	0	0	0	0	0.00
430640 - ISF Legal	295,480	314,396	380,300	285,225	361,359	-18,941	-4.98
430650 - ISF Human Resources	543,193	609,399	707,236	530,427	737,476	30,240	4.28
430660 - ISF Information Technology	1,333,679	1,461,938	2,015,179	1,511,384	2,314,244	299,065	14.84
430661 - ISF IT Reserve	61,928	71,712	291,542	218,656	330,135	38,593	13.24
440110 - Electricity	90,292	125,512	100,220	96,707	102,726	2,506	2.50
440120 - Water and Sewer	30,172	35,555	32,800	23,603	33,620	820	2.50
440130 - Natural Gas	35,403	35,799	9,100	20,650	9,328	228	2.51

DESCHUTES COUNTY - REQUESTED BUDGET LEVEL
FISCAL YEAR 2026

4/3/2025

FUND 274 - Health Services

OBJECT - DESCRIPTION -----	FY 2023 ACTUALS -----	FY 2024 ACTUALS -----	FY 2025 ADJ BUDGET -----	YTD END OF JUN'25 -----	FY 2026 REQUESTED -----	\$ BDGT CHG FR FY 2025 -----	% BDGT CHG FR FY 2025 -----
* Material & Services							
440140 - Rentals - Miscellaneous	4,260	0	0	0	0	0	0.00
440210 - Car Wash	0	0	0	0	3,000	3,000	100.00
440220 - Custodial-Janitorial	524	16,823	33,800	41,922	40,406	6,606	19.54
440240 - Garbage-Recycling-Shredding	15,790	15,189	8,840	12,716	15,000	6,160	69.68
440305 - Building and Grounds R & M	12,890	183,759	27,540	36,313	17,375	-10,165	-36.91
440320 - Equipment (Office) R & M	4,939	8,425	5,511	1,016	6,000	489	8.87
440330 - Maintenance Agreements	52,426	54,579	60,650	34,818	61,000	350	0.58
440350 - Software Maint Agreements	360,856	438,083	400,460	344,848	540,750	140,290	35.03
440355 - Vehicle R & M	1,633	1,386	225	5,284	175	-50	-22.22
440420 - Building Rental	207,269	398,636	533,440	280,484	329,577	-203,863	-38.22
440430 - Client Stabilization	63,288	47,918	155,481	29,150	98,615	-56,866	-36.57
440440 - Copier-Printer Rental-Leases	51,027	59,993	71,300	39,602	60,000	-11,300	-15.85
440460 - Inter-fund Building Rental	29,100	29,100	29,100	21,825	0	-29,100	-100.00
440480 - Rental Equipment, Non-Office	346	29,784	225	0	225	0	0.00
440610 - Media-Subscrip Books Video	15,118	16,020	15,750	5,155	12,440	-3,310	-21.02
450010 - Memberships & Dues	49,070	49,097	49,290	47,733	49,840	550	1.12
450020 - Professional Licenses/Fees	29,246	31,463	38,512	16,012	25,500	-13,012	-33.79
450030 - Conferences & Seminars	42,064	44,054	81,091	26,650	63,121	-17,970	-22.16
450040 - Education & Training	69,791	65,586	134,553	47,576	137,958	3,405	2.53
450041 - Tuition Reimbursement	0	16,742	2,700	3,751	7,500	4,800	177.78
450050 - Bank & Trustee Charges	18,210	30,202	8,660	25,192	14,000	5,340	61.66
450070 - Software Licenses	208,246	204,973	192,325	129,856	149,779	-42,546	-22.12
450091 - Recruitment	12,393	1,565	1,800	0	400	-1,400	-77.78

DESCHUTES COUNTY - REQUESTED BUDGET LEVEL
FISCAL YEAR 2026

4/3/2025

FUND 274 - Health Services

OBJECT - DESCRIPTION -----	FY 2023 ACTUALS -----	FY 2024 ACTUALS -----	FY 2025 ADJ BUDGET -----	YTD END OF JUN'25 -----	FY 2026 REQUESTED -----	\$ BDGT CHG FR FY 2025 -----	% BDGT CHG FR FY 2025 -----
* Material & Services							
450094 - Program Expense	273,842	265,426	581,667	163,192	362,422	-219,245	-37.69
450098 - Dept Employee Recognition	0	7,355	11,404	2,886	9,366	-2,038	-17.87
450110 - Fees & Permits	84,763	94,069	86,057	19,724	112,775	26,718	31.05
450150 - Property Taxes	299	14	0	54	0	0	0.00
450210 - General Liability Charges	122,259	127,149	129,692	97,269	123,207	-6,485	-5.00
450220 - Property Damage Charges	35,254	37,153	38,497	28,873	40,807	2,310	6.00
450230 - Vehicle Insurance Charges	33,164	33,660	42,570	31,928	42,075	-495	-1.16
450310 - Communication-Phone/Pager	228,032	229,790	355,322	146,820	195,198	-160,124	-45.06
450320 - Data Lines (Fiber T-1)	44,855	48,469	48,000	33,770	45,000	-3,000	-6.25
450410 - Advertising - Promo & Announ	67,955	173,035	231,379	70,918	93,424	-137,955	-59.62
450510 - Printing&Binding-General	26,761	39,436	23,830	19,623	20,770	-3,060	-12.84
450820 - Travel-Accommodations	51,950	50,196	86,044	45,666	55,053	-30,991	-36.02
450830 - Travel-Airfare	16,918	21,894	19,800	11,346	12,225	-7,575	-38.26
450840 - Travel-Car Rental	252	842	764	331	1,250	486	63.61
450850 - Travel-Ground Trans-Parking	2,389	3,445	4,150	2,113	3,700	-450	-10.84
450860 - Travel-Meals	12,028	14,205	26,165	10,206	18,129	-8,036	-30.71
450870 - Travel-Mileage Reimb	45,070	47,842	61,467	20,868	46,162	-15,305	-24.90
450903 - Local Grants	63,040	11,400	13,000	9,000	0	-13,000	-100.00
450909 - OHP Individual Flex Funds	3,588	0	4,500	(151)	7,000	2,500	55.56
450912 - Client Assistance Cards	39,208	40,210	22,110	37,296	14,995	-7,115	-32.18
450914 - Client Support Flex - Indige	171	0	0	0		0	0.00
450920 - Grants&Contributions-Misc	870,785	116,478	5,635,935	2,000,000	0	-5,635,935	-100.00
450925 - Grants - Medical Projects	39,646	53,878	79,959	41,016	0	-79,959	-100.00

DESCHUTES COUNTY - REQUESTED BUDGET LEVEL
FISCAL YEAR 2026

4/3/2025

FUND 274 - Health Services

OBJECT - DESCRIPTION -----	FY 2023 ACTUALS -----	FY 2024 ACTUALS -----	FY 2025 ADJ BUDGET -----	YTD END OF JUN'25 -----	FY 2026 REQUESTED -----	\$ BDGT CHG FR FY 2025 -----	% BDGT CHG FR FY 2025 -----
* Material & Services							
450985 - Grants - Local Match	908,927	936,512	1,268,910	410,408	1,112,163	-156,747	-12.35
450998 - Refunds & Adjustments	20,750	83,419	9,716	32,201	18,625	8,909	91.69
450999 - Cash (Over) Short	0	(118)	0	0	0	0	0.00
460109 - Automotive Supplies	2,261	57	0	253	0	0	0.00
460112 - Bldg & Grounds Supplies	9,424	73,286	3,682	10,509	3,207	-475	-12.90
460115 - Custodial-Janitorial Supp	2,004	2,664	1,000	0	1,000	0	0.00
460121 - Educational Supplies	58,162	5,715	14,353	3,544	9,306	-5,047	-35.16
460124 - Equip Rep & Maint Supplies	0	0	0	0	17,400	17,400	100.00
460127 - Lab-Testing Supplies	6,183	19,441	11,775	6,184	20,950	9,175	77.92
460133 - Medical Supplies	129,918	121,208	77,650	247,883	77,970	320	0.41
460140 - Office Supplies	78,154	101,561	89,158	53,687	72,219	-16,939	-19.00
460145 - Postage	39,131	38,436	41,324	24,201	34,695	-6,629	-16.04
460148 - Program supplies	101,920	151,768	355,187	62,452	256,732	-98,455	-27.72
460160 - Prescriptions and Medicines	144,891	32,776	72,520	5,466	2,975	-69,545	-95.90
460163 - Safety supplies	505	5,431	300	672	300	0	0.00
460175 - Uniforms	5,495	2,663	550	2,031	588	38	6.91
460180 - Vaccines	3,790	55,182	10,000	5,012	10,000	0	0.00
460220 - Gas-Diesel-Oil	72,791	80,931	67,950	48,086	82,350	14,400	21.19
460230 - Heating Oil-Propane	965	355	1,000	1,464	1,000	0	0.00
460320 - Meeting Supp (Food etc.)	15,561	34,470	33,113	12,572	32,420	-693	-2.09
460610 - Computers & Peripherals	217,659	187,505	260,635	147,992	179,890	-80,745	-30.98
460620 - Equipment - Office	33,444	23,645	27,970	4,557	23,525	-4,445	-15.89
460635 - Furn & Fixt - Non-Office	0	8,405	0	1,125	0	0	0.00

DESCHUTES COUNTY - REQUESTED BUDGET LEVEL
FISCAL YEAR 2026

4/3/2025

FUND 274 - Health Services

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* Material & Services							
460640 - Furn & Fixt Office	160,950	189,416	358,380	54,660	16,265	-342,115	-95.46
460655 - Signage	7,470	4,152	4,797	565	2,880	-1,917	-39.96
460665 - Tools & Equipment	18,108	23,651	4,060	1,501	1,870	-2,190	-53.94
472070 - Interfund Pmts To Fund 070	25,000	0	0	0	0	0	0.00
* Total - Material & Services	14,220,207	15,061,997	23,299,078	12,935,983	15,909,360	(7,389,718)	(31.72)
* Capital Outlay							
490210 - Building - Remodel	12,300	8,079	0	0	0	0	0.00
490230 - Building	0	0	0	31,600	5,134,842	5,134,842	100.00
490355 - Leasehold Improvement	0	236,721	1,740,000	0	0	-1,740,000	-100.00
490422 - Automobiles & SUVs	314,204	87,952	157,000	41,185	42,000	-115,000	-73.25
490430 - Furniture & Fixtures	92,830	161,569	0	0	0	0	0.00
490445 - Technology Improvements	78,309	71,321	35,000	0	0	-35,000	-100.00
490460 - Office Machines & Equipment	6,494	12,450	0	0	0	0	0.00
* Total - Capital Outlay	504,137	578,091	1,932,000	72,785	5,176,842	3,244,842	167.95
*							
* Total -	0	0	0	0	0	0	0.00
* Transfer Out							
491001 - Transfers Out - General Fund	0	0	1,173,640	1,165,061	0	-1,173,640	-100.00
491070 - Transfers Out - General Coun	0	181,000	0	0	0	0	0.00

DESCHUTES COUNTY - REQUESTED BUDGET LEVEL
FISCAL YEAR 2026

4/3/2025

FUND 274 - Health Services

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* Transfer Out							
491090 - Transfers Out - Project Deve	0	15,000	0	0	0	0	0.00
491463 - Transfers Out - Campus Impro	320,710	381,749	470,000	80,309	216,000	-254,000	-54.04
491535 - Trans Out FF&C 2012	0	0	0	0	30,285	30,285	100.00
491680 - Transfers Out-Vehicle Replcm	241,596	300,174	352,446	264,335	364,427	11,981	3.40
* Total - Transfer Out	562,306	877,923	1,996,086	1,509,704	610,712	(1,385,374)	(69.40)
* Contingency							
501971 - Contingency	0	0	6,797,662	0	7,069,018	271,356	3.99
* Total - Contingency	0	0	6,797,662	0	7,069,018	271,356	3.99
*							
521851 - Reserve for Future Expenditu	0	0	1,060,849	0	460,142	-600,707	-56.63
* Total -	0	0	1,060,849	0	460,142	(600,707)	(56.63)
*** TOTAL FUND 274 RESOURCES	75,993,527	80,390,575	93,912,057	65,855,051	93,378,968	-533,089	-0.57
*** TOTAL FUND 274 REQUIREMENTS	63,474,414	67,934,048	93,912,057	55,291,931	93,378,968	-533,089	-0.57

Limited Growth Strategies by Department

1. Department/Office:

Health Services – Public Health

2. Limited Growth Target:

\$190,000 from limited growth; \$1,800,000 original funding gap

3. What % of Total Budget is the Department/Office's Limited Growth Target:

0.8%

4. Over the past three years, what trends are observed about the Department / Office's total budget utilization?

On average, Public Health underspent its budget by approximately \$1.5M, expending 91% of budget. However, this fluctuated from \$2.3M in FY 2022 and \$795K in FY 2024. While Public Health budgets for vacancy savings, the amount under budget correlates to higher levels of vacancy rates (above what was budgeted). For instance, FY 2022 experienced \$2.3M under budget with an average 15% vacancy (3% budgeted) whereas FY 2024's average vacancy was 9% (6% budgeted) and was under budget by \$795K. The amount of reimbursement grants can further misconstrue numbers; meaning, while actuals may be under budget, there may not be revenue received for expenses not incurred.

5. Over the past three years, what trends are observed about the Department / Office's vacancy rate?

Over the past three years, the vacancy rate fluctuated--a high of 23% in June 2022 and low of 4% in July 2024 (which is closer to pre-Covid levels). Over this timeframe, the average vacancy rate has been 11%.

6. Please describe limited growth strategies here.

As Public Health looks ahead to FY 2026, many state awards remain flat, Covid-related emergency funding ends, community needs shift, and county funding becomes limited. The identified funding need of \$1.8 million is addressed through the following strategies:

Approximately 30% of the savings comes from proactively assessing programs and service needs during FY 2025, resulting in ending some direct services (such as the Reproductive Health clinical services) and transitioning other services to community-based organizations (such as the Ryan White Program). The decision to end clinical services took into account decreased patient utilization, increased community access, increased access to OHP, and longer lasting birth control options. This resulted in fiscal savings that will be applied to FY 2026 to mitigate the impacts of limited growth targets and increased personnel and indirect costs in FY 2026.

Approximately 10% savings comes from eliminating 1.0 FTE, a vacant Infection Prevention Specialist. Several other positions are also ending, including 2.0 FTE limited duration staff and 3.7 FTE related to the Reproductive Health Clinic.

Limited Growth Strategies by Department

Approximately 30% of the savings necessary is resolved through actively seeking additional funding—both competitive grants as well as negotiating and leveraging enhanced payment models. (e.g., PacificSource and Medicaid Administrative Claims (MAC) reimbursement).

- The Prevention Program actively sought and was awarded several local and state funding opportunities, a net increase of approximately \$300,000 in FY 2026. This, coupled with a higher indirect rate of 15% instead of 10% on most grants, provided an opportunity to redistribute County General Funds to Environmental Health to assist in offsetting the County investment and higher fees.
- The department negotiated a higher per member per month rate with its Coordinated Care Organization for the Perinatal Care Continuum, increasing revenue by \$50,000 annually.
- The department is training and adding additional individuals to the MAC program in FY 2026, a program that allows for enhanced Medicaid reimbursement with a local match. It is anticipated to add \$240,000 in additional Medicaid revenue.

Approximately 30% of limited growth target-related savings comes from Environmental Health (EH), which had approximately \$665,000 gap when maintaining TRT investment at the FY 2025 level. To address this, the department is employing a number of strategies, such as:

- Reclassify an anticipated vacant Environmental Health Specialist III to an Environmental Health Specialist II, savings of approximately \$34,000;
- Increase EH fees an average of 5 percent, additional revenue of \$100,000;
- Reallocate County General Funds from other departmental programs to offset, including \$140,000 from Prevention (due to new grants identified as stated above), \$86,000 from closure of Reproductive Health Clinics, and \$112,000 from Behavioral Health;
- Request continued Video Lottery Fund investment of \$208,770, a 16 percent reduction from FY 2025 allocation. Board approved \$108,770 of Video Lottery funds and \$100,000 of Transient Room Tax revenue.

FY 25-26 Proposed Budget Presentation

Health Services

Janice Garceau, HS Director

Holly Harris, BH Director

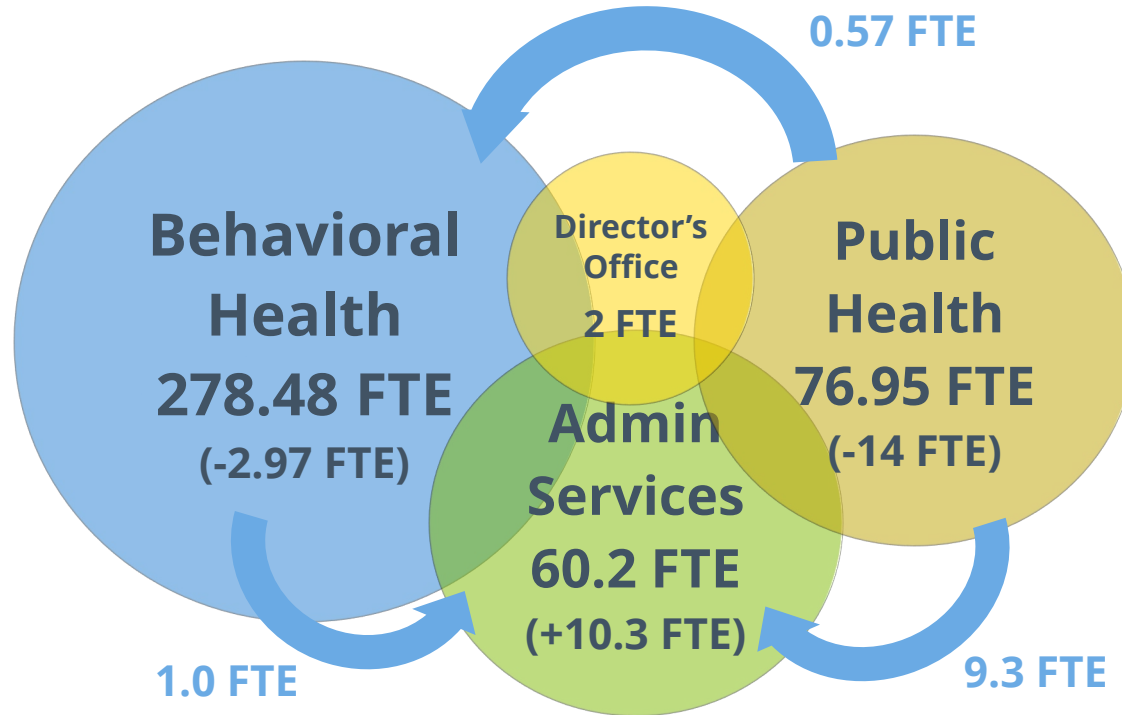
Heather Kaisner, PH Director

Cheryl Smallman, Business Officer



May 14, 2025

Health Services Overview



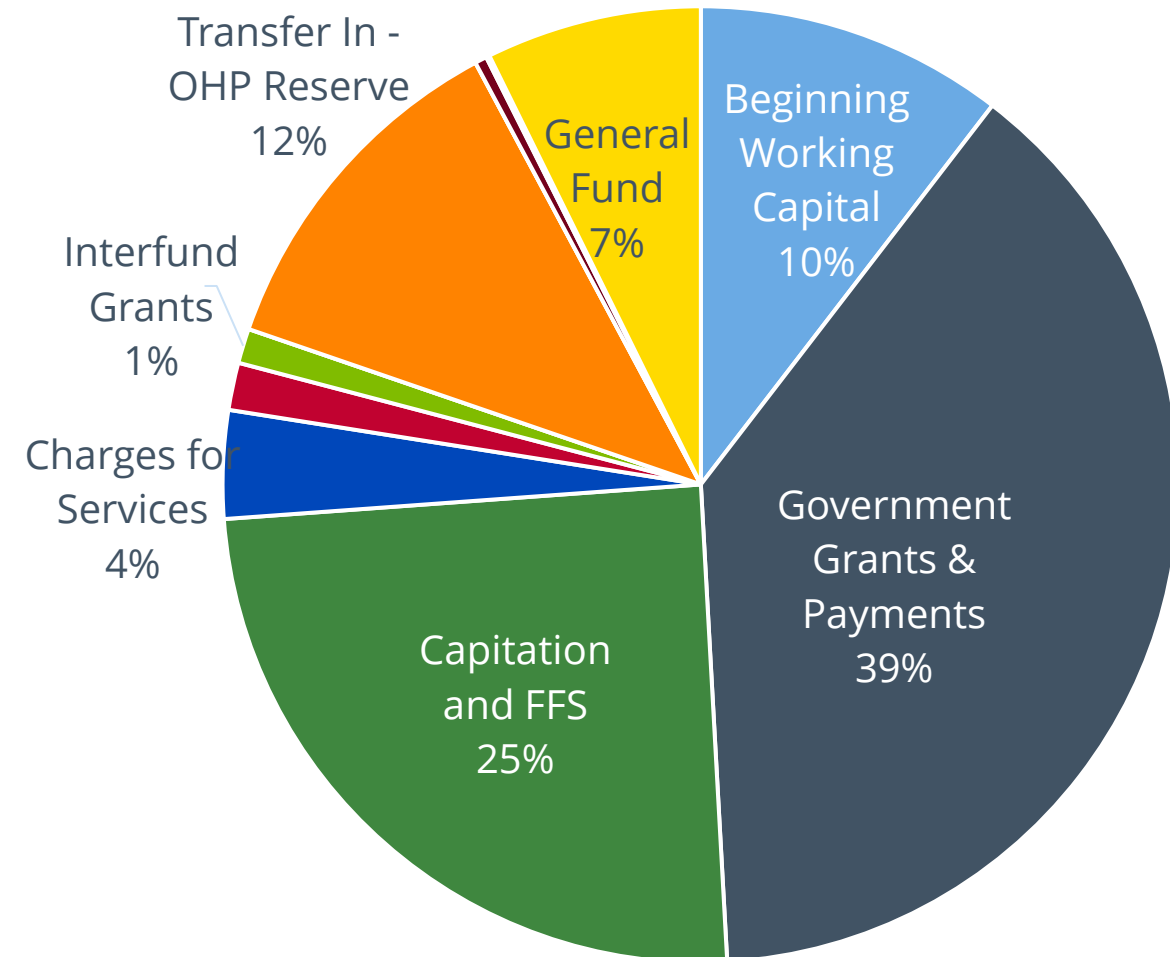
Mission:

To promote and protect the health and safety of our community.

-6.67 FTE (2 limited duration, 4.67 Regular) from FY 2025



Health Services Fund 274 Overview

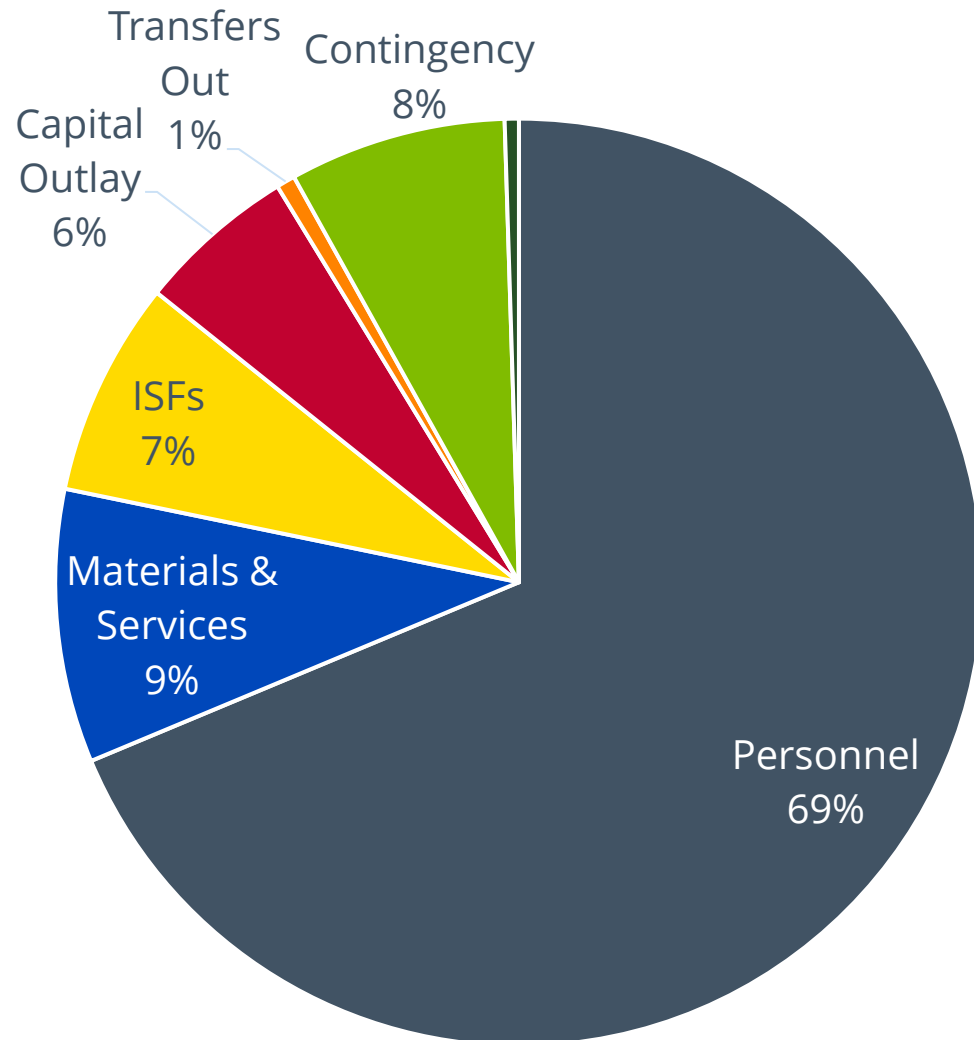


FY 2026 RESOURCES

- Government Grants & Payments (+13%)
- Capitation & FFS (+3%)
- Charges for Services (-2%)
- Transient Room Tax (+36%)
- County General Fund (-6%)



Health Services Fund 274 Overview



FY 2026 REQUIREMENTS

- Personnel (+9%)
- M&S (-47%)
- ISFs (+10%)
- Major one-time expenditures
 - La Pine Remodel (\$216K)
 - Bend Space (\$2M)
 - HB 5202 - BH Housing (\$3.1M)



FY 2026 Department Fiscal Issues

Short-term Fiscal Issues

- Funding instability
- Temporary Federal and State funds ending
- Increasing personnel and indirect costs

Long-term Fiscal Issues

- Medicaid funding
- Public Health funding
- Crisis Program – After-hours Stabilization Center services
- Space in Downtown Area
- Client and case acuity



FY 2026 Initiatives



Community

Building Trust and Engagement

Outcomes

Addressing Emerging Challenges

Resiliency

Navigating Complex Funding Dynamics



FY25 Challenges – Staying Steady



Federal Change & Uncertainty

- Unprecedented uncertainty in funding
- Critical informational resources shifting daily

Acuity of Basic and Health Needs

- Housing, housing, housing...and housing
- Increased economic pressure on those we serve and the systems that support them
- Limited Resources to address acute & chronic conditions: chronic disease, infectious disease outbreaks and addiction

Administrative Staffing Constrained

- Increasing costs, ISFs and indirect cost allocation limitations constrain adequate administrative staffing



Behavioral Health Outlook

Community Mental Health Program (CMHP)

Designated by Local Mental Health Authority (LMHA) to provide services mandated by ORS 430.610

Mandated Services

CMHPs have direct responsibility for services that have legal implications or impact individual rights

Civil Commitment
Aid & Assist
Psychiatric Security
Review Board (PSRB)

Core Services

CMHPs are required to ensure core services by rule (OARs) or contract (County Financial Assistance Awards)

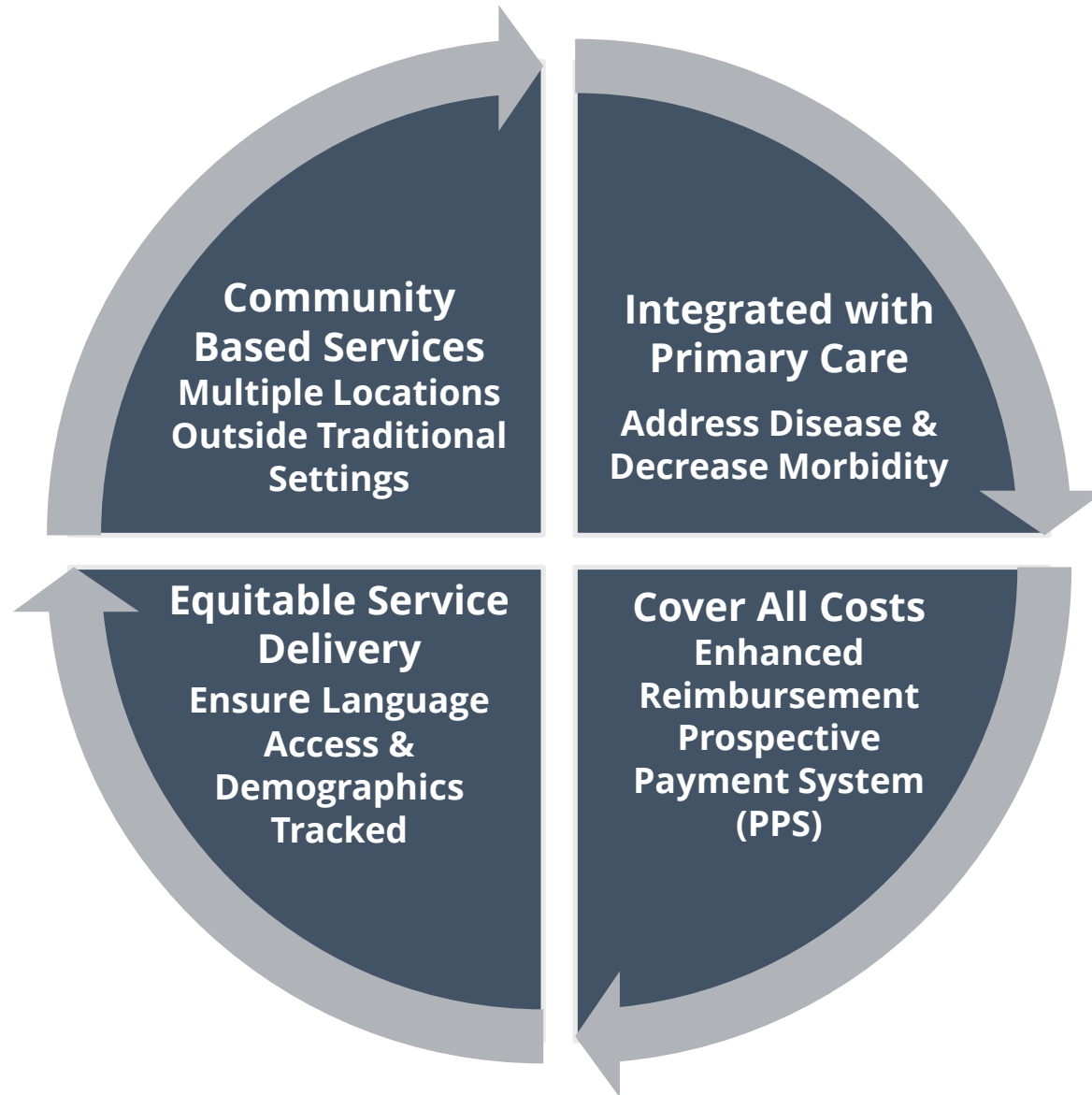
24/7 Crisis Services, Forensic Diversion, EASA, ACT, Youth Wraparound, Older Adult Services, and others

Safety Net Services

CMHPs are required to ensure provision of community based services not provided elsewhere

School Based Health Centers, MH & Substance Use Outpatient, Employment & Housing Supports, CCBHC, etc.

Certified Community Behavioral Health Clinic since 2017¹¹⁴



- CCBHC status required profound system change and improvements
- **CCBHC generated over \$30 Million in revenue since 2017**
- **Deschutes County outperforming Oregon CCBHCs on nearly every metric**
- **CCBHC funded through HB 4002, which reformed M110 in 2024. Up for inclusion in State Medicaid Plan. *No longer a pilot program.***



FY 2025 BH Highlights

- Secured contract for a 16-bed Secure Residential Treatment Facility (SRTF) in Redmond. Scheduled to open July 2026.
- Purchased a 5-bed Adult Foster Home to serve individuals with IDD/Co-Occurring Mental Health. In process to purchase a second 5-bed AFH for individuals with mental health conditions.
- Implemented workforce initiatives aimed at improving retention and recruitment including a scholarship program, paid internship program, and stipends.



FY 2026 BH Five-Year Forecast

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029	FY 2030
Ending Working Capital	\$ 41,739,274	\$ 43,807,480	\$ 40,583,054	\$ 30,111,107	\$ 23,001,982	\$ 17,464,659

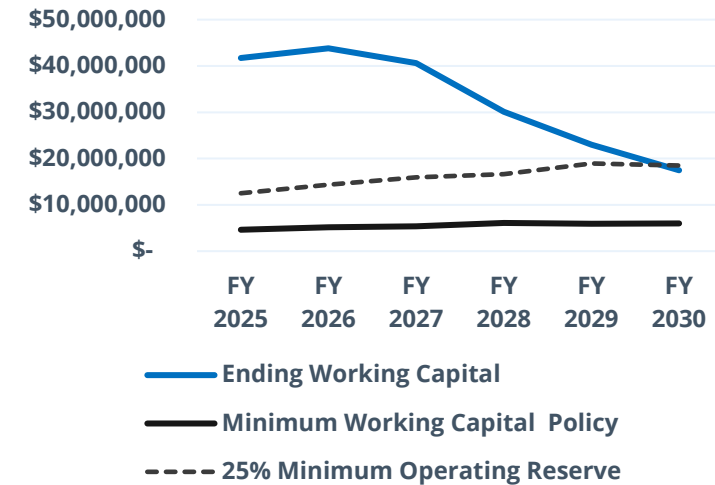
Revenue

Beginning Working Capital	\$ 34,318,057	\$ 41,739,274	\$ 43,807,480	\$ 40,583,054	\$ 30,111,107	\$ 23,001,982
All other Revenues	65,219,790	66,211,199	63,628,815	65,666,259	67,256,986	69,319,857
Total Revenue	\$ 99,537,847	\$ 107,950,473	\$ 107,436,295	\$ 106,249,313	\$ 97,368,093	\$ 92,321,839

Expenditures

Personnel	\$ 42,410,304	\$ 49,389,286	\$ 52,138,348	\$ 54,671,512	\$ 57,331,334	\$ 60,197,901
Materials and Services	9,351,287	6,988,917	6,798,140	6,918,051	7,040,360	7,165,116
Capital	1,027,488	2,042,000	1,795,000	8,000,000	2,989,000	-
Debt Service	23,319	23,319	23,319	23,319	23,319	23,319
Transfers Out	4,986,175	5,699,471	6,098,434	6,525,324	6,982,097	7,470,844
Total Expenditures	\$ 57,798,573	\$ 64,142,993	\$ 66,853,241	\$ 76,138,206	\$ 74,366,111	\$ 74,857,180
Ending Working Capital	\$ 41,739,274	\$ 43,807,480	\$ 40,583,054	\$ 30,111,107	\$ 23,001,982	\$ 17,464,659

Five-Year Forecast



FY 2026 BH -20% Medicaid Enrollment

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029	FY 2030
Ending Working Capital	\$ 41,739,274	\$ 38,779,957	\$ 29,919,479	\$ 22,912,415	\$ 15,320,358	\$ 6,399,233

Revenue

Beginning Working Capital	\$ 34,318,057	\$ 41,739,274	\$ 38,779,957	\$ 29,919,479	\$ 22,912,415	\$ 15,320,358
All other Revenues	65,219,790	66,211,199	63,628,815	65,666,259	67,256,986	69,319,857
Medicaid - 20% Enrollment Reduction	-	(5,027,523)	(6,636,052)	(6,535,117)	(6,471,932)	(6,383,802)
Total Revenue	\$ 99,537,847	\$ 102,922,950	\$ 95,772,720	\$ 89,050,621	\$ 83,697,469	\$ 78,256,413

Expenditures

Personnel	\$ 42,410,304	\$ 49,389,286	\$ 52,138,348	\$ 54,671,512	\$ 57,331,334	\$ 60,197,901
Materials and Services	9,351,287	6,988,917	6,798,140	6,918,051	7,040,360	7,165,116
Capital	1,027,488	2,042,000	1,795,000	-	-	-
Debt Service	23,319	23,319	23,319	23,319	23,319	23,319
Transfers Out	4,986,175	5,699,471	6,098,434	6,525,324	6,982,097	7,470,844
Cost Savings	-	-	(1,000,000)	(2,000,000)	(3,000,000)	(3,000,000)
Total Expenditures	\$ 57,798,573	\$ 64,142,993	\$ 65,853,241	\$ 66,138,206	\$ 68,377,111	\$ 71,857,180
Ending Working Capital	\$ 41,739,274	\$ 38,779,957	\$ 29,919,479	\$ 22,912,415	\$ 15,320,358	\$ 6,399,233

Five-Year Forecast



Public Health Outlook

Unique & Mandated Role of Local Public Health Authority

ORS 431.413. , ORS 431.001

Communicable Disease Prevention & Management

- Communicable Disease and STI Investigation & Control
- Tuberculosis Case Management
- Immunizations

Environmental Health & Preparedness

- Environmental Health Services
- Emergency Preparedness & Response

Maternal & Child Health

- Nurse Home Visiting
- Women Infants & Children (WIC)

Prevention & Health Promotion

- Suicide Pre/Post-vention & Reporting
- Substance Use & Overdose Prevention
- Tobacco Prevention

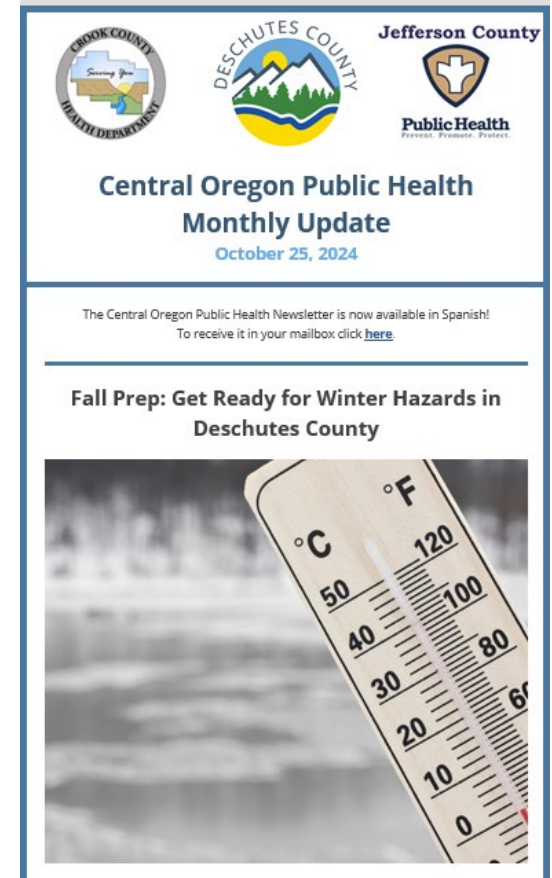
Vital Records

- Birth & Death Certificates



FY 2025 PH Highlights

- ❖ Healthy Schools prevented **1 in 5** behavioral health-related ED visits for ages 11-17.
- ❖ **100%** of syphilis cases interviewed and treated, including **3 pregnant women** to prevent congenital syphilis.
- ❖ **17% increased participation in WIC** over last 2 years, after 2 decades of declining caseloads. **87%** are working families.
- ❖ Public Health Newsletter reached a **~42,500** people/month



Limited Growth Impacts

Strategies to meet Target Savings of \$1.8 million:

- Reduced direct clinical services
- Achieved additional funding and leveraged current funding models
- Identified Environmental Health cost savings, increased fees 5%, reallocated CGF

Impacts to community and clients:

- Timeliness of access and disruption of care for clients
- Greater reliance on Medicaid and one-time grants
- Maintain EH service levels while minimizing cost increases to businesses



FY 2026 PH Five-Year Forecast

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029	FY 2030
Ending Working Capital	\$ 3,517,118	\$ 3,357,226	\$ 2,221,131	\$ 845,793	\$ (898,358)	\$ (2,984,091)

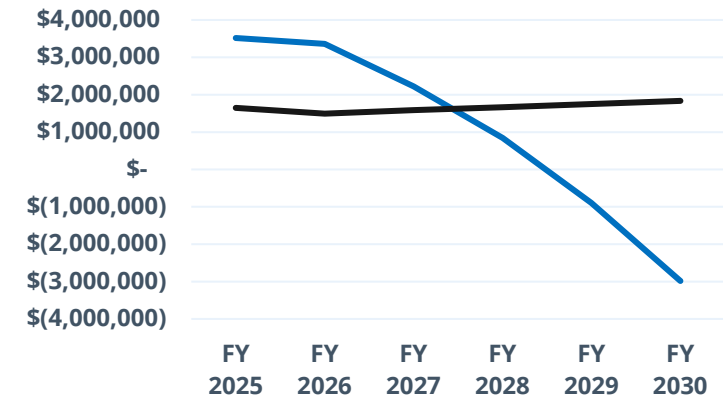
Revenue

Beginning Working Capital	\$ 4,975,895	\$ 3,590,801	\$ 3,357,226	\$ 2,221,131	\$ 845,793	\$ (898,358)
All other Revenues	19,170,643	18,430,735	18,699,275	19,439,693	20,102,591	20,847,699
Total Revenue	\$ 24,146,538	\$ 22,021,536	\$ 22,056,501	\$ 21,660,824	\$ 20,948,384	\$ 19,949,341

Expenditures

Personnel	\$ 14,651,478	\$ 14,763,608	\$ 15,754,508	\$ 16,542,233	\$ 17,369,345	\$ 18,237,812
Materials and Services	3,327,829	2,191,296	2,235,261	2,280,106	2,325,847	2,372,503
Capital	-	-	-	-	-	-
Debt Service	6,966	6,966	6,966	6,966	6,966	6,966
Transfers Out	2,643,147	1,702,440	1,838,635	1,985,726	2,144,584	2,316,151
Total Expenditures	\$ 20,629,420	\$ 18,664,310	\$ 19,835,370	\$ 20,815,031	\$ 21,846,742	\$ 22,933,432
Ending Working Capital	\$ 3,517,118	\$ 3,357,226	\$ 2,221,131	\$ 845,793	\$ (898,358)	\$ (2,984,091)

Five-Year Forecast



— Ending Working Capital
— Minimum Working Capital Policy



FY 2026 PH Five-Year Forecast

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029	FY 2030
Ending Working Capital	\$ 3,517,118	\$ 3,357,226	\$ 3,010,637	\$ 2,855,255	\$ 2,446,254	\$ 1,879,403

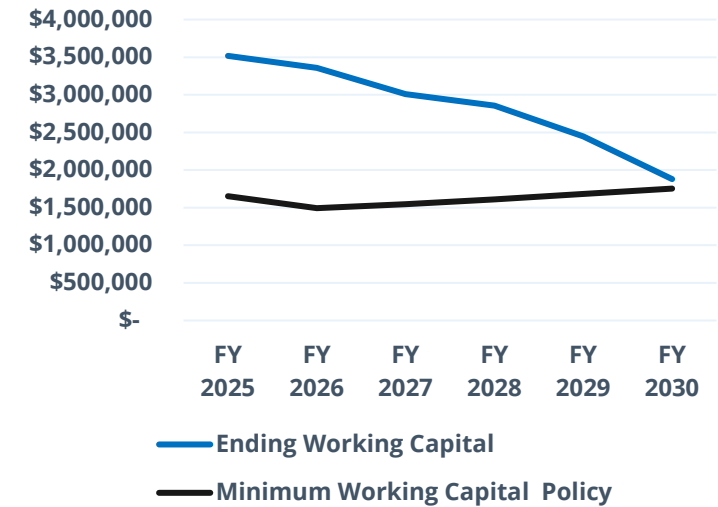
Revenue

Beginning Working Capital	\$ 4,975,895	\$ 3,590,801	\$ 3,357,226	\$ 3,010,637	\$ 2,855,255	\$ 2,446,254
All other Revenues	19,170,643	18,430,735	18,699,275	19,439,693	20,102,591	20,847,699
2% Surprise			300,000	500,000	500,000	500,000
Total Revenue	\$ 24,146,538	\$ 22,021,536	\$ 22,356,501	\$ 22,950,330	\$ 23,457,846	\$ 23,793,953

Expenditures

Personnel	\$ 14,651,478	\$ 14,763,608	\$ 15,754,508	\$ 16,542,233	\$ 17,369,345	\$ 18,237,812
Materials and Services	3,327,829	2,191,296	2,235,261	2,280,106	2,325,847	2,372,503
Capital	-	-	-	-	-	-
Debt Service	6,966	6,966	6,966	6,966	6,966	6,966
Transfers Out	2,643,147	1,702,440	1,838,635	1,985,726	2,144,584	2,316,151
Cost Savings			(489,506)	(719,956)	(835,149)	(1,018,882)
Total Expenditures	\$ 20,629,420	\$ 18,664,310	\$ 19,345,864	\$ 20,095,075	\$ 21,011,593	\$ 21,914,550
Ending Working Capital	\$ 3,517,118	\$ 3,357,226	\$ 3,010,637	\$ 2,855,255	\$ 2,446,254	\$ 1,879,403

Five-Year Forecast



FY 2026 PH Opportunities & Unknowns

- Federal Funding
- Revenue generating services
- Community partner collaboration
- Public Health Modernization (state funding)



Thank you



April 14, 2025

Dear Deschutes County Board of County Commissioners and Budget Committee:

This letter is to confirm Bend-La Pine Schools' commitment to work with you for years to come through the Healthy Schools initiative, including our commitment to 50% matching funding. We have seen extensive benefit to our districts' students and families and staff and administrators in this short amount of time and we are eager to maintain this momentum.

This partnership has resulted in dramatic health benefits for our students. For example, we have preliminary results indicating that, for the 2024 calendar year, 21% (84 of 408) of expected behavioral health emergencies were prevented. Healthy Schools has prevented emergencies related to behavioral health by:

- improving linkages to care and community resources for prevention and early intervention,
- reducing policy-to-practice and research-to-practice gaps in Health curriculum and instruction,
- increasing health communications and engagement opportunities for families, and
- improving coordination as a "Whole School, Whole Community, Whole Child" system of support for prevention efforts.

Schools are being asked to do more and more in order to address growing public health issues and crises (such as vaping, youth mental health, opioid use). Healthy Schools has helped to ensure that prevention expertise is reaching our students and staff and not resting on the shoulders of our teachers and administrators to do work that they were not trained in. This allows our teachers and administrators to focus on the work they do best.

Thank you for this opportunity to partner and strengthen our community together.



Dr. Steven Cook
Superintendent, Bend-La Pine Schools



Sunriver Service District

541-593-8622
ssdadmin@sunriversd.org
57475 Abbot Dr, Sunriver
PO Box 2108, Sunriver, OR 97707



MEMORANDUM

Date: May 14, 2025
To: Deschutes County Budget Committee
From: Sunriver Service District Board and Staff
RE: Fiscal Year '26 Budget Summary

The Sunriver Service District is pleased to deliver its Fiscal Year '26 Budget for approval. The District remains conscious of its mission to provide public safety for the Sunriver community and support partners in the surrounding area. We also remain diligent in our use of taxpayer funds.

'24/'25 Fiscal Year Recap

While the District is projecting to finish FY'25 under budget with a surplus, this was mostly accomplished through a lack of staffing in key Police Department positions. We have taken significant action to fill these positions, and do not expect significant savings in personnel again for the upcoming fiscal year. The District also continued its transition of HR, Finance, and Legal to in-house or less expensive contract services. Our public safety building project was finished on-time and on-budget, though several open items remain deferred to be addressed later.

'25/'26 Fiscal Year

For FY'26 the District is monitoring staffing levels. We will hold the Police Captain position open for at least half a year while the new Police Chief looks at organizational efficiencies. We are also evaluating fire reorganization but have not modeled that into the budget at this time. The District continues to look at the Reserve plans given the addition of the new building and future maintenance costs.

Operating Fund

The Operating Fund (715) supports the personnel, materials and services necessary for the District to function. Revenues are budgeted to grow at 3.2%, as the District bounds are mostly developed. Personnel costs are increasing at 6.7% due to cost-of-living wage increases required by labor contracts and increases in insurance, while materials and services costs remain flat. Combined with the Reserve Fund contribution, overall expenses are growing at 5.2%.

Department Changes/Goals

Police Department

- Evaluating a reorganization to reduce administrative overhead.
- Continued focus on recruiting and retention.
- Adding seasonal resources, such as bike patrol.

Fire Department

- Continue to evaluate staffing models and overall organizational structure.
- Integration of some training and command coverage with La Pine Fire.
- Evaluate overtime budget and ways to be more fiscally responsible.

Administration Department

- Administering health and wellness programs for employees.
- The Administration budget now manages district-wide expenses.
- Maintain financial policy compliance using contracted CPA resource.
- Explore ways to reduce District contract costs.

Reserve Fund

Reserve Fund (716) resources are budgeted to remain flat given interest income, as well as a net recovery contribution from Fund 715. The proposed capital requests include replacement of one Fire vehicle, and replacement of end-of-service life-saving equipment. Police will evaluate the addition of rifle suppressor equipment to aid training and protect hearing. The District is expecting a significant impact on the Reserve Fund in the future due to replacement of a first-line ambulance.

Public Safety Building Fund

The Public Safety Building Fund (717) is dedicated to the building construction project and levy proceeds to repay the building loan. The multi-year project to remodel the existing fire station and add on a police station for an all-inclusive public safety building is functionally completed. There are some deferred projects that the District will evaluate, with funding in the FY'26 plan to repave our south fire apron. All activities are on hold pending a completed reserve analysis. The District continues to be diligent in maintaining the schedule and costs of the new building to not further burden taxpayers.

Future Initiatives

The District is engaging in new bargaining contracts for Police and Fire. It was agreed to delay Police negotiations for six months to accommodate changes on both the management and union side. Fire contract is currently in bargaining and may extend into the fiscal year. All departments have modeled a 3% personnel salary increase in this budget. The District acknowledges the need to be increasingly conscious of costs given the inability to increase tax collection rates for the foreseeable future. We continue to explore a variety of options to address revenue and costs.

We appreciate your work on the Budget Committee and respectfully ask for approval of the Sunriver Service District FY'26 budget. Thank you.

Budget Summary FY 2026 - Sunriver Service District

	General Fund (715)	Reserve Fund (716)	Public Safety Building Fund (717)	Sunriver Service District Total
Beginning Working Capital	\$ 4,135,822	\$ 2,916,902	\$ 174,312	\$ 7,227,036
State Government Payments	105,000	-	-	105,000
Property Taxes	6,401,127	-	866,588	7,267,715
Charges for Services	264,454	-	-	264,454
Fines and Fees	15,000	-	-	15,000
Interest Revenue	125,000	100,000	100,000	325,000
Other Non-Operational Revenue	15,000	-	-	15,000
Transfers In	-	150,000	-	150,000
Total Resources	\$ 11,061,403	\$ 3,166,902	\$ 1,140,900	\$ 15,369,205
Personnel Services	\$ 5,853,053	\$ -	\$ -	\$ 5,853,053
Materials and Services	1,055,704	-	-	1,055,704
Debt Service	-	-	832,471	832,471
Capital Outlay	-	131,348	180,000	311,348
Transfers Out	150,000	-	-	150,000
Contingency	40,000	75,000	100,000	215,000
Unappropriated Reserves	3,962,646	2,960,554	28,429	6,951,629
Total Requirements	\$ 11,061,403	\$ 3,166,902	\$ 1,140,900	\$ 15,369,205

Sunriver Service District
715 Operating Fund - Working Cap

	FY 24-25							FY 25-26
	Actual	Actual	Budget	Actual YTD		Year End Proj		Budget
	FY 22-23	FY 23-24	FY 24-25	4/2/2025	% of Bud	Amount	% of Bud	Requested
Beg Net Working Capital	6,194,356	3,720,249	4,023,939	3,962,367	98%	3,962,367	98%	4,135,822
Revenues	5,994,585	6,255,800	6,746,368	6,517,059	97%	6,718,696	100%	6,925,581
TOTAL RESOURCES	12,188,941	9,976,049	10,770,307	10,479,426	97%	10,681,063	99%	11,061,403
REQUIREMENTS								
Police	1,880,788	2,071,414	2,538,428	1,665,972	66%	2,241,917	88%	2,587,342
Bike	47,133	54,629	40,561	16,741	41%	55,554	137%	55,393
Fire	2,903,681	2,997,304	3,367,006	2,446,897	73%	3,326,112	99%	3,600,993
Admin	312,091	555,586	605,240	471,017	78%	576,659	95%	665,029
Total Dept Requirements	5,143,693	5,678,932	6,551,235	4,600,627	70%	6,200,241	95%	6,908,757
Excess of Rev over Exp	850,892	576,868	195,133	1,916,432		518,455		16,824
End Net Working Capital before Transfer & Contingency	7,045,248	4,297,117	4,219,072	5,878,799		4,480,822		4,152,646
CAPITAL OUTLAY								
Trans to Reserve Fund	(325,000)	(334,750)	(345,000)	-	0%	(345,000)	100%	(150,000)
Trans to Public Safety Bldg	(3,000,000)	-	-	-	0%	-	0%	-
CONTINGENCIES AND WORKING CAPITAL								
Contingencies	-	-	(95,000)	-	0%	-	0%	(40,000)
Excess including capital and contingencies								(173,176)
End Net Working Capital	3,720,248	3,962,367	3,779,072	5,878,799	156%	4,135,822	109%	3,962,646

Sunriver Service District
716 Capital Reserve Fund - Resources

FUND 716 RESOURCES									
		Actual FY 22-23	Actual FY 23-24	FY 24-25					FY 25-26
				Budget FY 24-25	Actual YTD		Year End Proj		Requested FY 25-26
Account Number	Account Description				4/2/2025	% of Bud	Amount	% of Bud	
716-0000-301-0000	Beg Net Working Capital	2,429,582	2,556,480	2,832,119	2,852,661	101%	2,852,661	101%	2,902,620
716-0000-361-1100	INTEREST INCOME-RSVE	76,291	136,536	100,000	98,105	98%	100,000	100%	100,000
716-0000-392-1200	PROCEEDS F/A DISPOSITION	-	-	-	-	-	-	-	-
716-0000-331-1200	GRANT REVENUE	5,000	-	-	-	-	-	-	-
REVENUES		81,291	136,536	100,000	98,105	98%	100,000	100%	100,000
716-0000-391-5000	SSD Fund 715	325,000	334,750	345,000	-	-	345,000	100%	150,000
TRANSFERS IN		325,000	334,750	345,000	-	-	345,000	100%	150,000
TOTAL RESOURCES		2,835,873	3,027,766	3,277,119	2,950,766	90%	3,297,661	101%	3,152,620
TOTAL REQUIREMENTS		2,708,975	2,731,584	3,227,160	3,026,076	94%	3,247,702	101%	3,108,968
NET CHANGE IN WORKING CAPITAL		126,898	296,182	49,959	(75,310)	-151%	49,959	100%	43,652
ENDING WORKING CAPITAL		2,556,480	2,852,662	2,882,078	2,777,351	96%	2,902,620	101%	2,946,272

Sunriver Service District
717 Capital Reserve Fund Budget for Fiscal Year 2025-2026 - Resources

FUND 717 RESOURCES					9				
		Actual	Actual	FY 24-25					FY 25-26
				Budget	Actual YTD		Year End Proj		Requested
Account Number	Account Description	FY 22-23	FY 23-24	FY 24-25	4/2/2025	% of Bud	Amount	% of Bud	FY 25-26
	Tax Rate/\$1000 Assessed Value								\$0.47
	Assessed Value - from 715 workbook								1,900,829,889
	Actual/Assumed Collection Rate								97%
717-0000-301-0000-1	Beg Net Working Capital	6,972,769	12,576,691	4,328,248	4,501,334	104%	4,501,334	104%	174,312
717-0000-311-1200-1	Deschutes County TRT Funds	4,000,000	2,000,000	2,000,000	2,000,000	100%	2,000,000	100%	-
717-0000-311-1300-1	Bank Loan	-	-	-	-	-	-	-	-
717-0000-311-1400	Levy Proceeds	774,208	807,485	836,329	802,973	96%	825,000	99%	866,588
717-0000-361-1100	Interest Earned	395,474	539,894	150,000	121,916	81%	162,555	108%	100,000
REVENUES		5,169,682	3,347,379	2,986,329	2,924,889	98%	2,987,555	100%	966,588
717-0000-391-5000	TRANSFERS IN REVENUE	3,000,000	-	-	-	-	-	-	-
TRANSFERS IN		3,000,000	-	-	-	-	-	-	-
TOTAL RESOURCES		8,169,682	3,347,379	2,986,329	2,924,889	98%	2,987,555	100%	966,588
TOTAL REQUIREMENTS		2,565,760	11,422,736	7,028,398	5,547,090	79%	7,314,577	104%	1,112,471
NET CHANGE IN WORKING CAPITAL		5,603,923	(8,075,357)	(4,042,069)	(2,622,201)	65%	(4,327,022)	107%	(145,883)
ENDING WORKING CAPITAL / CONTINGENCY		12,576,691	4,501,334	286,179	1,879,133	657%	174,312	61%	28,429



To: Deschutes County Commissioners

From: Todd Rich, Chief of Police

RE: Executive Budget Summary Fiscal Year 2026

This year's proposed budget is not substantially different to previous years.

Income

The Black Butte Ranch Service District ("District") is seeking a new, increased five-year local option levy on May 20th of this year. If approved, the new local option levy rate will increase to \$0.78 per \$1,000, up from its current \$0.65 per \$1,000. The new local option levy rate, combined with increases in property values, are projected to raise an additional \$128,020 for FY 26.

Personnel

Staffing

Several staff changes occurred in the District over the past 12 months including the appointment of a new Chief of Police, and the retiring of our sergeant and administrative manager. The sergeant position was not replaced; however, the administrative manager was replaced. The District's Managing Board has chosen not to back fill the department's 5th officer position to reduce costs. Our current staffing levels are as follows:

Chief of Police
Lieutenant
(4) Officers
Administrative Manager
(2) Part-time seasonal volunteers

Collective Bargaining Agreement

The District has negotiated a new collective bargaining agreement with the patrol officers pending final approval in the next few weeks. The new CBA will maintain the same level of protection and benefits enjoyed by the officers up to now, with the addition of a 15% pay



raise over the next two years. Black Butte officers are the lowest paid in Central Oregon and this new CBA will take a meaningful step to bring them closer to their counterparts.

PERS

The District is subject to significant increases in the required PERS contributions for the upcoming 2025-2027 period. These increases range between 128.5% and 197.6% depending on the employee's PERS category. According to PERS, these increases are mainly driven by the Transition Liability Surplus Rate coming to an end.

Health Insurance

Health insurance costs for our sworn employees will remain in line with previous years while the health insurance premiums for our administrative employees through the Deschutes County Health Insurance Plan have risen.

Personnel Summary

Despite some significant increases in a few categories, our personnel services budget has stayed at a level that will not push the overall budget beyond our resources. This occurred due to our reduction in staff, and obtaining more accurate costs of individual personnel items. The FY 2025 budget was also significantly over budgeted in health insurance and PERS, allowing us to absorb those new costs.

Material and Services

The FY 2026 Material and Services category has grown 6.0%, down from the previous year's 16% increase.

Capital

The total capital outlay for FY 26 is \$63,464 with the bulk of that being used for the purchase of the administrative vehicle.



Summary

This budget reflects a more accurate accounting of the needs of the District versus years prior. Reduction in staff levels and more accurate accounting will help offset the increased costs in salaries, PERS, and health insurance.

We do not have any concerns or requests for assistance at this time and hope to end FY 2026 with a further increase in our reserves to ensure the longevity of the District.

Respectfully submitted,

Todd Rich
Chief of Police

Budget Summary FY 2026 - Black Butte Ranch

	FY 2023 Actual	FY 2024 Actual	FY 2025 Budget	FY 2026 Proposed	FY 2026 Approved	FY 2026 Adopted	% Chg FY 2026
Beginning Working Capital	\$ 1,474,044	\$ 1,501,532	\$ 1,298,231	\$ 1,835,923	\$ -	\$ -	41%
Property Taxes	1,242,797	1,297,595	1,296,000	1,464,488	-	-	13%
Charges for Services	13,200	13,200	13,200	13,200	-	-	0%
Interest Revenue	44,461	72,160	-	50,000	-	-	-
Other Non-Operational Revenue	22,952	22,896	40,000	250	-	-	-99%
Total Resources	\$ 2,797,454	\$ 2,907,383	\$ 2,647,431	\$ 3,363,860	\$ -	\$ -	27%
Personnel Services	\$ 980,276	\$ 1,025,067	\$ 1,195,831	\$ 1,132,062	\$ -	\$ -	-5%
Materials and Services	242,249	254,893	318,040	339,265	-	-	7%
Capital Outlay	33,495	154,534	12,000	63,464	-	-	429%
Contingency	-	-	350,000	400,000	-	-	14%
Reserve for future expenditure	-	-	44,293	700,000	-	-	1480%
Unappropriated Ending Fund Balance	-	-	727,267	729,069	-	-	0%
Total Requirements	\$ 1,256,020	\$ 1,434,495	\$ 2,647,431	\$ 3,363,860	\$ -	\$ -	27%

Black Butte Ranch Police Department Special District
FY 2026 Proposed Budget

	2022-2023 Actual	2023-2024 Actual	2024-2025 Adopted	2025-2026 Proposed
Resources				
Beginning Net Capital	\$ 1,474,044	\$ 1,501,532	\$ 1,298,231	\$ 1,835,923
Prop Tax Collect				
98 - BBR CSD@1.049	762,666	797,342	788,000	828,468
99 - BBR CSD Loc Opt @\$\$.55	-	-	-	-
99 - BBR CSD Loc Opt @\$\$.65	472,577	494,063	488,000	-
99 - BBR CSD Loc Opt @\$\$.78	-	-	-	616,020
Prior Year Tax Collections	7,554	6,190	20,000	20,000
LGIP Interest	44,461	72,160	-	50,000
All Other Income	22,952	22,896	40,000	250
BBR Corporation Contract	12,000	12,000	12,000	12,000
BBR Association Contract	1,200	1,200	1,200	1,200
Total Revenue	\$ 2,797,454	\$ 2,907,383	\$ 2,647,431	\$ 3,363,860
Personnel Services				
Police Chief (1 FTE)	\$ 111,204	\$ 122,865	\$ 119,818	\$ 126,000
Police Lieutenant (1 FTE)	-	22,262	93,500	98,175.00
Police Sergeant (1 FTE in 22)	86,439	89,541	-	-
Patrol Officer (5 FTE in 22)	295,971	315,972	355,325	315,832
CSO (1 PTE)	28,657	16,445	-	-
PTO Payoff	10,095	-	36,000	26,000
Office part-time	-	-	-	1,200
Admin Manager (1 FTE)	71,546	71,663	75,246	79,008
Overtime	23,657	13,043	25,000	30,000
Certification pay	6,900	6,675	9,000	12,700
Public Information Officer	-	-	-	4,000
Firearm Instructor	938	638	900	1,200
Longevity	135	-	-	4,736
Medicare	9,182	9,556	11,500	12,705
Social Security	4,212	5,020	6,000	4,000
PERS Employeeer Portion	119,944	99,741	150,000	216,124
PERS Employee 6%	33,980	61,721	31,080	23,531
State Unemployment Insurance	627	446	772	850
Workers Comp	13,586	23,388	17,850	18,500
WBF - Workers Benefit Fund	194	180	-	300
Long Term Disability Insurance - Union				475
Health/Dental Insurance	163,011	165,913	263,340	156,725
Guest Instructors			500	-
Total Personnel	\$ 980,276	\$ 1,025,067	\$ 1,195,831	\$ 1,132,062
M&S				
Deschutes County Services	\$ 35,496	\$ 26,436	\$ 69,000	\$ 52,462
Bank Fees	286	1	-	-
Payroll Processing	2,383	2,570	-	3,000
Advertising	600		2,000	750
Association Dues and Fees	11,401	23,532	3,000	30,653
Meeting Supplies	218	221	-	-

	2022-2023	2023-2024	2024-2025	2025-2026
	Actual	Actual	Adopted	Proposed
Subscriptions	7,121	5,708	23,000	4,175
Office and Supplies	9,964	11,390	15,000	15,000
Ammunition/Range	2,455	2,478	3,000	3,000
Communication Services	13,003	17,259		20,560
Telephone	-	-	12,520	-
Penalties fines	-	-	-	-
Equipment Maintenance and Repairs	-	-	5,000	5,000
Non-Capital Equipment	8,738	2,598	10,500	8,500
AED Equipment and Maintenance	554	889	-	-
Insurance Premiums (vehicle and property)	24,905	30,012	27,500	35,000
Vehicle Operations	32,617	37,170	-	44,750
Travel/Milage	223	-	2,000	4,000
Vehicle R&M	-	-	15,000	-
Gas/Diesel/Oil	-	-	23,520	-
Building Rental/Utilities	68,819	64,205	61,000	67,895
Emergency Preparedness	-	-	-	2,000
Professional Service	-	-	-	1,020
Auditing/Account Services	5,220	11,672	10,000	10,000
Legal	-	4,998	12,000	12,000
Education and Training	6,944	4,545	9,000	7,000
Uniforms	8,412	7,059	10,000	10,000
Community Programs	-	-	-	2,500
Misc	2,891	2,150	5,000	-
Total M&S	\$ 242,249	\$ 254,893	\$ 318,040	\$ 339,265
Capitol Equipment				
Automobiles and SUVs	7,980	131,310	12,000	53,764
Capital Equipment	25,515	23,224	-	9,700
Total Capital	\$ 33,495	\$ 154,534	\$ 12,000	\$ 63,464
General Operating Contingency	\$ -	\$ -	\$ 350,000	\$ 400,000
Reserved for future expenditure	-	-	44,293	700,000
Unappropriated Ending Fund Balance	-	-	727,267	729,069
Total Revenue	\$ 2,797,454	\$ 2,907,383	\$ 2,647,431	\$ 3,363,860
Total Expenditures	1,256,020	1,434,495	2,647,431	3,363,860
Fund Balance	\$ 1,541,434	\$ 1,472,888	\$ -	\$ -

From: [Whitney Hale](#)
Cc: [Nick Lelack](#); [Erik Kropp](#); [Robert Tintle](#); [Camilla Sparks](#)
Subject: Elected Officials Compensation Committee Update
Date: Friday, March 14, 2025 10:46:10 AM
Attachments: [EO Salary Survey Data.xlsx](#)
[Outlook-Deschutes .png](#)

Bcc Elected Officials,

Good Morning,

This morning the Elected Officials Compensation Committee met, reviewed the attached data and recommendations from HR Answers, and recommended compensation rates for elected officials for FY 2026. All rates were approved unanimously, with the exception of the vote on commissioner compensation, which was a 2-1 vote. The committee's recommendations (included below) will be voted on by the full Budget Committee in May.

Classification	Recommendation
Assessor	Recommend 0% adjustment.
Clerk	Recommend 0% adjustment.
Commissioner*	Recommend multiplying proposed salary of \$142,899 by three (size of current Board) and dividing that number by five (size of future Board) which results in a FY 2026 salary of \$85,739.40.
DA*	Recommend an adjustment to the County portion to bring total compensation to \$255,031.70.
Sheriff	Recommend 0% adjustment.
Justice of the Peace	Recommend 0% adjustment.
Treasurer	Recommend 0% adjustment.

Please feel free to reach out if you have any questions - I'm happy to connect.

Best,
Whitney



ELECTED OFFICIALS COMPENSATION BOARD MEETING

9:00 AM, FRIDAY, MARCH 14, 2025

Allen Room - Deschutes Services Building - 1300 NW Wall St – Bend

(541) 388-6570 | www.deschutes.org

AGENDA

MEETING FORMAT: In accordance with Oregon state law, this meeting is open to the public and can be accessed and attended in person or remotely, with the exception of any executive session.

Zoom Meeting Information: This meeting may be accessed via Zoom using a phone or computer.

- To join the meeting via Zoom from a computer, use this link: <http://bit.ly/3h3oqdD>.
- To join by phone, call 253-215-8782 and enter webinar ID # 899 4635 9970 followed by the passcode 013510.

CALL TO ORDER

AGENDA ITEMS

1. Review of data assembled from the selected comparables (Marion, Lane and Clackamas counties, and private sector compilations from two survey sources)
2. Discussion of FY 2026 compensation levels for elected officials

ADJOURNMENT



DESCHUTES COUNTY

Summary Elected Officials - FY26 Compensation Board Survey Data as 7/1/2025

This survey includes the following elected positions:

Assessor
Clerk
Commissioner
District Attorney
Sheriff
Justice of the Peace
Treasurer

Salary data was collected from the following Oregon Counties:

	<u>Population</u>
Clackamas	423,228
Lane	380,181
Marion	346,763
Deschutes	210,543

<https://worldpopulationreview.com/us-counties/states/or>

County Compensation Board: <https://www.oregonlaws.org/ors/204.112>

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COLA Summary and Director Pay Reference
Compensation Board Blank Recommendation Page
Elected Official Total Compensation Survey Summary

Elected Official Compensation Survey Detail Pages

Assessor
Clerk
Commissioners
District Attorney
Sheriff
Justice of Peace
Treasurer/Chief Financial Officer



**ELECTED OFFICIALS - FY26 COMPENSATION BOARD
SUMMARY OF EMPLOYEE BENEFITS
March, 2025**

	Oregon Public Employees Retirement System - PERS	Deferred Compensation (457 Plan) - Employer Paid	Deferred Compensation (457 Plan) - Employee Paid	Longevity Pay
	The IAP component of the pension program is a defined contribution plan and is funded by contributions of 6% of the subject salary. Deschutes County pays the 6% contribution on behalf of the employee.	<i>Employer Matching Contributions</i>	<i>Voluntary Employee Elections for either pre-tax or after-tax (Roth) Contributions into retirement plan</i>	FY25 - \$95 per month, for every 5 years of Service
County Assessor	All are Offered Same Coverage	County matches 3%	All are Offered Same Coverage	Eligible - amount depends on Years of Service
County Clerk	All are Offered Same Coverage	County matches 3%	All are Offered Same Coverage	Eligible - amount depends on Years of Service
County Commissioners	All are Offered Same Coverage	County matches 3%	All are Offered Same Coverage	Not Eligible - voted in FY17
District Attorney	All are Offered Same Coverage	County matches 3%	All are Offered Same Coverage	Eligible - amount depends on Years of Service
County Sheriff	All are Offered Same Coverage	County matches 3%	All are Offered Same Coverage	Eligible - amount depends on Years of Service
Justice of Peace	All are Offered Same Coverage	County matches 3%	All are Offered Same Coverage	Eligible - amount depends on Years of Service
County Treasurer	All are Offered Same Coverage	County matches 3%	All are Offered Same Coverage	Eligible - amount depends on Years of Service
Department Heads	All are Offered Same Coverage	Not Eligible	All are Offered Same Coverage	Eligible - amount depends on Years of Service

	Time Management Leave (TML)	Paid Leave Oregon (PLO)	Health/Dental/Vision/Prescrip	Deschutes Onsite Clinic & Rx (DOC)
	<i>Accrued paid time off, Sell-back TML</i>	<i>State Plan</i>	<i>\$95/month EE Only \$116/month EE+Dependents</i>	<i>Onsite Health & Wellness services (no cost) and Rx (reduced cost) to enrollees of DC Health Plan</i>
County Assessor	Salaried, no use of TML	Not Eligible	All are Offered Same Coverage	All are Offered Same Coverage
County Clerk	Salaried, no use of TML	Not Eligible	All are Offered Same Coverage	All are Offered Same Coverage
County Commissioners	Salaried, no use of TML	Not Eligible	All are Offered Same Coverage	All are Offered Same Coverage
District Attorney	Salaried, no use of TML	Not Eligible	All are Offered Same Coverage	All are Offered Same Coverage
County Sheriff	Salaried, no use of TML	Not Eligible	All are Offered Same Coverage	All are Offered Same Coverage
Justice of Peace	Salaried, no use of TML	Not Eligible	All are Offered Same Coverage	All are Offered Same Coverage
County Treasurer	Salaried, no use of TML	Not Eligible	All are Offered Same Coverage	All are Offered Same Coverage
Department Heads	Eligible - Accrued paid time off, Sell-back TML	Eligible - State Plan	All are Offered Same Coverage	All are Offered Same Coverage

	Life Insurance & Accidental Death & Dismemberment (AD&D) - Employer Paid	Life Insurance & Accidental Death & Dismemberment (AD&D) - For Dependents - Employer Paid	Voluntary Supplemental Life & AD&D - Employee Paid	Long-Term Disability (LTD) - Employer Paid
	<i>1x Annual Salary, up to \$100k - 100% of Premiums paid by Employer</i>	<i>\$5,000/dependent</i>	<i>Plans vary Amount Depends on elected coverage</i>	<i>Pays a percentage of income when unable to work because an injury or illness, 66.67% of monthly covered earnings, up to \$6,000 benefit per month.</i>
County Assessor	All are Offered Same Coverage	All are Offered Same Coverage	All are Offered Same Coverage	All are Offered Same Coverage
County Clerk	All are Offered Same Coverage	All are Offered Same Coverage	All are Offered Same Coverage	All are Offered Same Coverage
County Commissioners	All are Offered Same Coverage	All are Offered Same Coverage	All are Offered Same Coverage	All are Offered Same Coverage
District Attorney	All are Offered Same Coverage	All are Offered Same Coverage	All are Offered Same Coverage	All are Offered Same Coverage
County Sheriff	All are Offered Same Coverage	All are Offered Same Coverage	All are Offered Same Coverage	All are Offered Same Coverage
Justice of Peace	All are Offered Same Coverage	All are Offered Same Coverage	All are Offered Same Coverage	All are Offered Same Coverage
County Treasurer	All are Offered Same Coverage	All are Offered Same Coverage	All are Offered Same Coverage	All are Offered Same Coverage
Department Heads	All are Offered Same Coverage	All are Offered Same Coverage	All are Offered Same Coverage	All are Offered Same Coverage

	Flexible Spending Accounts	Other Miscellaneous Supplemental Benefits		
	<i>Employee election to set-aside pre-tax dollars to pay for out-of-pocket healthcare or dependent care costs, up to annual IRS maximum.</i>	<i>AFLAC, Legal Shield, etc.</i>		
County Assessor				
County Clerk	All are Offered Same Coverage	All are Offered Same Coverage		
County Commissioners	All are Offered Same Coverage	All are Offered Same Coverage		
District Attorney	All are Offered Same Coverage	All are Offered Same Coverage		
County Sheriff	All are Offered Same Coverage	All are Offered Same Coverage		
Justice of Peace	All are Offered Same Coverage	All are Offered Same Coverage		
County Treasurer	All are Offered Same Coverage	All are Offered Same Coverage		
Department Heads	All are Offered Same Coverage	All are Offered Same Coverage		



DESCHUTES COUNTY
Compensation Board - Recommendation Summary
Elected Officials - FY26
Changes effective July 1, 2025

Elected Officials	FY25 Adjustment Recommendation	Notes/Consideration
Assessor	0	Role is 15% above the goal* at base pay and 16% above at total pay
Clerk	0	Role is 10% above the goal* at base pay and 12% above at total pay
Commissioners	up to 6%	Role is 6% below the goal* at base pay and 6% below at total pay
District Attorney	up to 17%	Role is 17% below the goal* at base pay and 15% below at total pay
Sheriff	0	Role is 1% above the goal* at base pay and 2% below at total pay, in addition the role is 19% above the next in command at the highest potential step (7)
Justice of Peace	0	Role is 9% above the goal* at base pay and 10% above at total pay
Treasurer	0	Role is 4% above the goal* at base pay and 5% above at total pay

***County Compensation Philosophy: 5% above Market Average**
FY26 Recommended Cost of Living Adjustment: 0

Recommendations made with the goal to maintain County's Compensation Philosophy.

Revised Survey only data reflects recommended FY26 COLAs for Deschutes County data.

Data collected from:

Clackamas County	
Lane County	
Marion County	
Economics Research Institute	All Industry, \$438M, Geo Level to Deschutes County
Comp Analyst	All Industry, \$200-500M, Geo Level to Deschutes County

DESCHUTES COUNTY FY25 ELECTED OFFICIALS SALARY SURVEY
Annual Compensation Comparison Summary
Survey Data as of June 30, 2025

COUNTY	Assessor		Clerk		Commissioner		District Attorney (State & County Portion)		Sheriff		Justice of Peace (annualized, currently @ .60FTE)		Treasurer		PERS	Deferred Comp*
	Base Salary	Total Pay	Base Salary	Total Pay	Base Salary	Total Pay	Base Salary	Total Pay	Base Salary	Total Pay	Base Salary	Total Pay	Base Salary	Total Pay		
Clackamas	\$ 158,469	\$ 177,913	\$ 128,101	\$ 143,819	\$ 130,214	\$ 146,191	\$ 286,320	\$ 301,265	\$ 228,639	\$ 256,693	\$ 134,270	\$ 150,745	\$ 151,958	\$ 170,603	Yes - 6%	6.27%
Lane	\$ 147,118	\$ 166,145	\$ 133,286	\$ 143,949	\$ 114,026	\$ 128,245	\$ 229,666	\$ 235,520	\$ 189,530	\$ 224,231	\$ 120,390	\$ 130,022	\$ 162,531	\$ 172,283	Yes - 6%	2.00%
Marion	\$ 150,821	\$ 171,182	\$ 132,392	\$ 150,265	\$ 125,923	\$ 142,923	\$ 225,194	\$ 233,385	\$ 203,029	\$ 230,438	\$ 123,261	\$ 139,901	\$ 123,677	\$ 140,373	Yes - 6%	7.50%
ERI (Oregon)	no match	no match	\$ 126,542	\$ 131,186	\$ 174,213	\$ 180,641	\$ 218,339	\$ 226,396	no match	no match	no match	no match	\$ 189,075	\$ 196,052		3.67%
Comp Analyst (Oregon)	\$ 183,263	\$ 140,822	\$ 138,700	\$ 145,219	No Match	No Match	\$ 330,300	\$ 345,824	no match	no match	no match	no match	\$ 141,300	\$ 147,941		4.70%
Deschutes	\$ 183,263	\$ 204,463	\$ 152,885	\$ 167,822	\$ 135,364	\$ 147,547	\$ 231,847	\$ 245,165	\$ 219,472	\$ 245,107	\$ 145,747	\$ 163,570	\$ 168,036	\$ 183,159	Yes - 6%	3.00%
Average (excludes DC):	\$ 159,918	\$ 164,015	\$ 131,804	\$ 142,888	\$ 136,094	\$ 149,500	\$ 257,964	\$ 268,478	\$ 207,066	\$ 237,121	\$ 125,974	\$ 140,223	\$ 153,708	\$ 165,450		
% DC Compared:	12.74%	19.78%	13.79%	14.86%	-0.54%	-1.32%	-11.26%	-9.51%	5.65%	3.26%	13.57%	14.27%	8.53%	9.67%		
Average +5% (excludes DC):	\$ 167,914	\$ 172,216	\$ 138,394	\$ 150,032	\$ 142,899	\$ 156,975	\$ 270,862	\$ 281,902	\$ 217,419	\$ 248,977	\$ 132,272	\$ 147,234	\$ 161,394	\$ 173,723	State	
% DC Compared:	8.38%	15.77%	9.48%	10.60%	-5.57%	-6.39%	-16.83%	-14.98%	0.94%	-1.58%	9.25%	9.99%	3.95%	5.15%		
50th Percentile (excludes DC):	\$ 154,645	\$ 168,664	\$ 132,392	\$ 143,949	\$ 128,069	\$ 144,557	\$ 229,666	\$ 235,520	\$ 203,029	\$ 230,438	\$ 123,261	\$ 139,901	\$ 151,958	\$ 170,603		
% DC Compared:	15.62%	17.51%	13.40%	14.23%	5.39%	2.03%	0.94%	3.93%	7.49%	5.99%	15.43%	14.47%	9.57%	6.86%		
75th Percentile (excludes DC):	\$ 177,064	\$ 176,230	\$ 135,993	\$ 147,742	\$ 163,213	\$ 172,029	\$ 308,310	\$ 323,545	\$ 228,639	\$ 256,693	\$ 134,270	\$ 150,745	\$ 175,803	\$ 184,167		
% DC Compared:	3.38%	3.84%	11.05%	11.96%	-20.57%	-16.59%	-32.98%	-31.97%	-4.18%	-4.73%	7.87%	7.84%	-4.62%	-0.55%		

Notes:
Notes: Elected Officials are on a standard 173.33/2080 Pay Schedule
Total Pay includes any Add Pays, such as Auto Allowance, but does not include standard cell phone, etc
457 Contribution for DC Elected Officials is a "match" - maximum 3%
Lane County provides 2% deferred comp into a 457 for all non-represented positions, including elected, with the exception of commissioners who have declined it
Longevity pay is included in Total Pay summary for DC officials, County Commissioners do not receive Longevity Pay.
Comparators do not pay longevity pay to any of their elected officials.
DA: Base and total salaries include State of Oregon monthly salary
For non-elected positions, where applicable, annual salary represents top of pay range

DESCHUTES COUNTY FY26 ELECTED OFFICIALS SALARY SURVEY
Survey Data as of June 30, 2025

Assessor

The Deschutes County Assessor is responsible for identifying all taxable properties within the County and assigning values and property taxes to those properties. The County Assessor also prepares the County's annual assessment roll.

County	Annual Salary	PERS Contribution	401(K)/457 Contribution	Other Add Pay (Auto, Longevity, Etc.)	Total Pay			
Clackamas (elected, Assessment & Tax)	\$158,469	6.0%	6.27%		\$177,913			
Lane (elected, Assessment & Tax)	\$147,118	6.0%	2.0%	\$6,720	\$166,145			
Marion (elected, Assessment & Tax)	\$150,821	6.0%	7.5%		\$171,182			
ERI (Oregon) - No Match	no match							
Comp Analyst (Oregon) - Appraisal Manager	\$134,500		4.7%		\$140,822			
Deschutes (elected, does not have Tax) - w/4% FY25 COLA	\$183,263	6.00%	3.00%	\$4,440	\$204,463			
Average (excludes DC):	\$ 147,727				\$ 164,015			
% DC Compared:	19%				20%			
Average +5% (excludes DC):	\$ 155,113				\$ 172,216			
% DC Compared:	15%				16%			
50th Percentile (excludes DC):	\$ 148,970				\$ 168,664			
% DC Compared:	19%				18%			
75th Percentile (excludes DC):	\$ 156,557				\$ 176,230			
% DC Compared:	15%				14%			
2nd in Command N424/Step 7								
Deputy Director, Assessor	Annual Salary	PERS		Longevity	Total Pay			
FY25 - 4% COLA	\$ 167,390	6%		\$ 4,560.00	\$182,267			
% Diff Assessor to Deputy	9%							

Notes:
 ORS 308.005 "Assessor" as defined, includes Deputy Assessor. [Amended by 1979 c.689 §25; 1981 c.804 §28; 1995 c.79 §123]
 Lane receives a car allowance of \$560/mo (6,720 per year)
 Lane County is Home Rule

DESCHUTES COUNTY FY26 ELECTED OFFICIALS SALARY SURVEY
Survey Data as of June 30, 2025

Clerk

The County Clerk is chief election official, official keeper of all public records, processing all real property transactions, plats, Commissioners' Journal documents and Board of Property Tax Appeal petitions, and also issues marriage and antique dealers licenses and accepts passport applications.

County	Annual Salary	PERS Contribution	401(K)/457 Contribution	Other Add Pay (Auto, Longevity, Etc.)	Total Pay
Clackamas	\$128,101	6.00%	6.27%		\$143,819
Lane (non-elected)	\$133,286	6.00%	2.0%		\$143,949
Marion	\$132,392	6.00%	7.5%		\$150,265
ERI (Oregon) - Records Management Manager	\$126,542		3.7%		\$131,186
Comp Analyst (Oregon) - Records Manager	\$138,700		4.7%		\$145,219
Deschutes w/4% FY25 COLA	\$152,885	6.00%	3.00%	\$1,110	\$167,822
Average (excludes DC):	\$ 131,804				\$ 142,888
% DC Compared:	14%				17%
Average +5% (excludes DC):	\$ 138,394				\$ 150,032
% DC Compared:	10%				12%
50th Percentile (excludes DC):	\$ 132,392				\$ 143,949
% DC Compared:	15%				17%
75th Percentile (excludes DC):	\$ 135,993				\$ 147,742
% DC Compared:	12%				14%

2nd in Command		
N415	Min	Max
Elections/Recording Supervisor	\$ 77,420.49	\$ 103,750.84
% Diff Clerk to Supervisor:	49%	
FY25 COLA- 4%:	\$ 80,517.31	\$ 107,900.88
% Diff Clerk to Supervisor:	47%	

DESCHUTES COUNTY FY26 ELECTED OFFICIALS SALARY SURVEY
Survey Data as of June 30, 2025

Commissioner

The Board of County Commissioners is comprised of three elected officials who serve four-year terms. The Board is elected at large, serves as the public's elected advocate, and is the policy making body of Deschutes County government. The Board's duties include executive, judicial (quasi-judicial), and legislative authority over policy matters of countywide concern.

County	Annual Salary	PERS Contribution	401(K)/457 Contribution	Other Add Pay (Auto, Longevity, Etc.)	Total Pay
Clackamas	\$130,214	6.00%	6.27%		\$146,191
Lane	\$114,026	6.00%	0.0%	\$6,960	\$128,245
Marion	\$125,923	6.00%	7.5%		\$142,923
ERI (Oregon) - Board/Commission Member	\$174,213		3.7%		\$180,641
Comp Analyst (Oregon)	No Match				
Deschutes - w/4% FY25 COLA	\$135,364	6.00%	3.0%		\$147,547
Average (excludes DC):	\$ 136,094				\$ 149,500
% DC Compared:	-1%				-1%
Average +5% (excludes DC):	\$ 142,899				\$ 156,975
% DC Compared:	-6%				-6%
50th Percentile (excludes DC):	\$ 128,069				\$ 144,557
% DC Compared:	5%				2%
75th Percentile (excludes DC):	\$ 163,213				\$ 172,029
% DC Compared:	-21%				-17%

Notes:

Longevity Pay eliminated for DC Commissioners and added to base pay in FY17

1 DC Commissioner has elected Not to participate in 3% Deferred Comp match

Lane receives a car allowance \$670/month, \$8040/year; Commissioners are currently waiving 2% DefComp

Clackamas offers Chair 2% more per month

DESCHUTES COUNTY FY26 ELECTED OFFICIALS SALARY SURVEY
Survey Data as of June 30, 2025

District Attorney

The District Attorney's Office represents the State of Oregon in all criminal cases filed in Deschutes County, advocating for victim's rights and enforcing the laws of the State of Oregon.

County	Total Base Pay	State Salary	County Stipend	PERS Contribution	401(K)/457 Contribution	Other Add Pay (Auto, Longevity, Etc.)	Total County Pay	Total Base Pay	Total Pay
Clackamas	\$286,320	\$164,520	\$121,800	6.00%	6.27%		\$136,745	\$286,320	\$301,265
Lane	\$229,666	\$164,520	\$65,146	6.00%	2.00%	\$8,040	\$71,000.45	\$229,666	\$235,520
Marion	\$225,194	\$164,520	\$60,674	6.00%	7.50%		\$68,865	\$225,194	\$233,385
ERI (Oregon) - General Counsel	\$218,339	\$218,339			3.7%			\$218,339	\$226,396
Comp Analyst (Oregon) - General Counsel	\$330,300	\$330,300			4.7%			\$330,300	\$345,824
Deschutes - w/4% FY25 COLA on stipend	\$231,847	\$164,520	\$67,327	6.00%	3.00%	\$6,660	\$80,645	\$231,847	\$245,165
Average (excludes DC):	\$ 257,964						\$ 92,203	\$ 257,964	\$ 268,478
% DC Compared:	-11%						-14%	-11%	-10%
Average +5% (excludes DC):	\$ 270,862						\$ 96,813	\$ 270,862	\$ 281,902
% DC Compared:	-17%						-20%	-17%	-15%
50th Percentile (excludes DC):	\$ 229,666						\$ 71,000	\$ 229,666	\$ 235,520
% DC Compared:	1%						12%	1%	4%
75th Percentile (excludes DC):	\$ 308,310						\$ 136,745	\$ 308,310	\$ 323,545
% DC Compared:	-33%						-70%	-33%	-32%

Chief Deputy DA		Min	Max	FY25 COLA		FY26 Longevity		Total Pay (At max)
N428		\$ 152,413.45	\$ 204,248.91	4%		\$ 4,560.00		\$ 216,978.87
% Diff DA (DC & State) to Deputy:								

Deputy to DA %	14%
----------------	-----

Notes:
Lane receives a car allowance of \$670/mo (8040 per year) - included as Other Add Pay

DESCHUTES COUNTY FY26 ELECTED OFFICIALS SALARY SURVEY
Survey Data as of June 30, 2025

Sheriff

The Deschutes County Sheriff's Office is a full service organization providing patrol, criminal investigations, corrections, civil and search and rescue. Special operations include a Marine Patrol, K-9 units, and Forest Patrol.

County	Annual Salary	PERS Contribution	401(K)/457 Contribution	Other Add Pay (Auto, Longevity, Etc.)	Total Pay
Clackamas	\$228,639	6.00%	6.27%		\$256,693
Lane	\$189,530	6.00%	2.00%	\$18,091.78	\$224,231
Marion	\$203,029	6.00%	7.50%		\$230,438
Agregator Survey - ERI (Oregon)	no match				
Agregator Survey - Comp Analyst (Oregon)	no match				
Deschutes - w/4% FY25 COLA	\$ 219,471.91	6.00%	3.00%	\$5,550	\$245,107
Average (excludes DC):	\$ 207,066				\$ 237,121
% DC Compared:	6%				3%
Average +5% (excludes DC):	\$ 217,419				\$ 248,977
% DC Compared:	1%				-2%
50th Percentile (excludes DC):	\$ 203,029				\$ 230,438
% DC Compared:	7%				6%
75th Percentile (excludes DC):	\$ 228,639				\$ 256,693
% DC Compared:	-4%				-5%

2nd in Command	Min Pay	Max Pay	Reflects FY25 COLA & Longevity Rates	Longevity
Captain, N4256	\$ 132,926.56	\$ 178,134.53	4%	\$ 5,700.00
% Diff Sheriff to Captain	-39%	-19%		

Notes:

OARs: Sheriff's salary shall be fixed in an amount which is not less than that for any member of the Sheriff's staff

Lane County - receives a car allowance of \$670/mo, \$8040 per year (increased 2023) and an additional 6% Advanced DPSST certification pay - - included as Other Add Pay

DESCHUTES COUNTY FY26 ELECTED OFFICIALS SALARY SURVEY
Survey Data as of June 30, 2025

Justice of the Peace

Justice Court is a state court administered by the County, under the direction of an elected Justice of the Peace. Justice Court handles traffic and ordinance violations, small claims and certain civil matters.

County	Annual Salary	PERS Contribution	401(K)/457 Contribution	Other Add Pay (Auto, Longevity, Etc.)	Total Pay
Clackamas (Atty)	\$134,270	6.00%	6.27%		\$150,745
Lane <i>(reflects FT salary, currently at .5 FTE)</i>	\$120,390	6.00%	2.00%		\$130,022
Marion	\$123,261	6.00%	7.50%		\$139,901
ERI (Oregon)	no match				
Comp Analyst (Oregon)	no match				
Deschutes (also Atty) - w/FY25 4% COLA <i>(reflects FT salary, currently at .6 FTE)</i>	\$145,747	6.00%	3.00%	\$4,440	\$163,570
Average (excludes DC):	\$ 125,974				\$ 140,223
% DC Compared:	14%				14%
Average +5% (excludes DC):	\$ 132,272				\$ 147,234
% DC Compared:	9%				10%
50th Percentile (excludes DC):	\$ 123,261				\$ 139,901
% DC Compared:	15%				14%
75th Percentile (excludes DC):	\$ 134,270				\$ 150,745
% DC Compared:	8%				8%

<i>Reflects FY25 4% COLA</i>	Min	Max
2nd Cmnd: Court Admin, N418	\$ 88,770.28	\$ 118,960.58
<i>% Diff JoP to Administrator:</i>	18%	

Notes:

JOP an attorney: DC, Clackamas, and Marion
30% of time spent on small claims, 50% on traffic trials and arraignments, 20% of time on admin and misc.

DESCHUTES COUNTY FY26 ELECTED OFFICIALS SALARY SURVEY
Survey Data as of June 30, 2025

Treasurer

The Finance Department is responsible for collection of property taxes, accounting services, treasury management and financial advice to Administration and the Board of County Commissioners

County	Annual Salary	PERS Contribution	401(K)/457 Contribution	Other Add Pay (Auto, Longevity, Etc.)	Total Pay
Clackamas (elected)	\$ 151,957.94	6.00%	6.27%		\$ 170,603.18
*Lane (non-elected)					
Budget/Financial Planning Manager					
County Treasurer	\$ 162,531.20	6.00%			\$ 172,283.07
Marion (elected)	\$ 123,676.80	6.00%	7.50%		\$ 140,373.17
ERI (Oregon) - Treasury Director	\$189,075		3.7%		\$ 196,051.87
Comp Analyst (Oregon) - Treasury Manager	\$141,300		4.7%		\$ 147,941.10
Deschutes County (elected) @.5 w/FY25 4% COLA	\$84,018	6.00%	3.00%		\$ 91,579.54
Deschutes County (1.0 Equivalent) w/FY25 4% COLA	\$168,036	6.00%	3.00%		\$ 183,159.09
Average (excludes DC):	\$ 153,708				\$ 165,450.48
% DC Compared: (1.0 Equivalent)	9%				10%
Average +5% (excludes DC):	\$ 161,394				\$ 173,723.00
% DC Compared: (1.0 Equivalent)	4%				5%
50th Percentile (excludes DC):	\$ 151,958				\$ 170,603.18
% DC Compared: (1.0 Equivalent)	10%				7%
75th Percentile (excludes DC):	\$ 175,803				\$ 184,167.47
% DC Compared: (1.0 Equivalent)	-5%				-1%

*Notes:

Lane: Max step 9 is shown above - range is \$118,768 - \$162,531

		FY25 Rates		
CFO Pay Grade:	N427	MIN	MID	MAX
FY25	4% COLA	\$69.79	\$80.79	\$93.52
		\$145,172.85	\$168,035.86	\$194,522.95



ELECTED OFFICIALS COMPENSATION BOARD MEETING MINUTES

9:00 am

FRIDAY March 14, 2025

Allen Room
Live Streamed Video

Present were Board members Jim Fister; Krisanna Clark-Endicott (via Zoom); and Judy Trego. Also present were County Administrator Nick Lelack; Deputy County Administrator Erik Kropp; Deputy County Administrator Whitney Hale; Chief Financial Officer Robert Tintle; Budget & Financial Planning Manager Cam Sparks; and BOCC Executive Assistant Brenda Fritsvold (via Zoom).

This meeting was audio and video recorded and can be accessed on Deschutes County's YouTube channel <https://www.youtube.com/watch?v=3hWD4KcNong&feature=youtu.be>.

CALL TO ORDER: The meeting was called to order at 9:01 am.

Board Member Jim Fister reviewed the agenda and explained that the purpose of the meeting is to set compensation amounts for the County's elected officials in FY 2026 which takes effect on July 1, 2025.

Laurie Grenya, president and owner of HR Answers, presented data returned from surveying the designated comparables for the County—namely, the counties of Marion, Lane, Clackamas—in addition to private industry data from two survey sources, filtered according to both budget and staff size.

Grenya explained how the information was collected, noting that the three counties used as comparables are also undergoing compensation reviews and therefore their compensation amounts are subject to change.

Noting that the Board will set the base pay of each position, subject to intermediate approval by the Budget Committee and final approval by the Board of County Commissioners, Grenya reminded that the County's compensation philosophy is to pay 5% above the base pay average. She then reviewed the recommended adjustment for each position along with the reasons for each recommendation, saying that no adjustment is recommended for some of the positions.

Fister said last year or the year before, the County's compensation amounts were determined to be below goal in most of the elected official positions. He questioned why several of the positions now show as above goal.

Grenya responded that happened as a result of looking at the full market using the all-industry survey sources, which includes private market data in addition to that from the public sector.

Trego reminded that the last few years, the Elected Officials Compensation Board worked to increase the pay for positions which were determined to be underpaid.

In response to Fister, Budget & Financial Planning Manager Cam Sparks said the general CPI currently utilized by the County is 2.5%.

- Assessor

It was noted that the current compensation for the position of Assessor is 15% above the County's compensation philosophy goal at base pay and 16% above that goal at total pay,

Motion: Trego moved approval of the recommendation of no adjustment to the compensation for the Assessor position in FY 2026. Clark-Endicott seconded the motion, which carried 3 – 0.

- Clerk

It was noted that the current compensation for the position of Clerk is 10% above the County's compensation philosophy goal at base pay and 12% above that goal at total pay,

Motion: Trego moved approval of the recommendation of no adjustment to the compensation for the Clerk position in FY 2026. Clark-Endicott seconded the motion, which carried 3 – 0.

- Commissioner

Fister noted that the Commissioner's current salary is \$135,364, and the recommendation is to increase it to \$142,899.

Discussion ensued that Lane and Marion Counties each have five-member County Commissioner Boards. Clark-Endicott noted that all three comparable counties have populations higher than Deschutes County.

With regard to the voter-approved measure to expand the Board of County Commissioners from three to five, Fister noted that the Elected Officials Compensation Board is determining compensation only for the current three Commissioners at this time as the two additional Commissioners will not take office until January 1, 2027.

Trego spoke to the job description, duties and role of County

Commissioners; noted that each Commissioner decides the amount of time to spend on the job; and pointed out that their compensation was increased the past two years. Saying that the financial condition of the County must be considered, she was concerned about the projected additional \$300,000 needed to compensate another two Commissioners and supported spreading the total amount paid to the current three Commissioners between the five who will serve on the expanded BOCC.

Grenya said when looking at compensation, the assumption is that everyone is performing well. She added that the current three Commissioners will continue to do the same amount of work until the other two are added.

Clark-Endicott agreed with Trego about the budgetary constraints and said the BOCC positions are not meant to be career positions—rather, Commissioners are elected to represent the constituency in matters concerning local government. She said anyone interested in running to be a Commissioner should know how much the compensation will be before they file to run.

Noting that CEOs of private companies are paid very well, Fister said lowering the BOCC salary or holding it steady could disincentivize some people from running for these positions.

Trego and Clark-Endicott said it is difficult to compare these positions with any in the private sector, since the BOCC entails public service to the community.

Following discussion, the proposed salary for Commissioners was reached by multiplying the recommended amount (\$142,899) by three and dividing it by five.

Motion: Trego moved to set the amount of Commissioner compensation at \$85,739 in FY 2026. Clark-Endicott seconded the motion, which carried 2 – 1 (Fister opposing).

- District Attorney (DA)

It was noted that this position is compensated at 17% below the County's compensation philosophy goal at base pay and 15% below that goal at total pay. While the State pays the majority of the DA's salary, the County has historically elected to pay an additional amount.

Saying that compensation increases above 10% are unheard of in

government as well as in private industry, Grenya recommended an increase of 10% or 11% to meet the average of the market compensation for this position.

~~*Motion:* Trego moved to increase the District Attorney's compensation to \$255,031.70. Clark-Endicott seconded the motion, which carried 3 – 0.*~~

Budget & Financial Planning Manager Cam Sparks reminded that the State pays most of the DA's salary. Subsequent to receiving advice from County Counsel Dave Doyle, the following motion was made:

**Motion:* Trego moved to strike the previous approved motion relating to the District Attorney's salary and approve an adjustment to the County-paid portion of the DA's salary to bring the position's total pay to \$255,031.71. Clark-Endicott seconded the motion, which carried 3 – 0.

- Sheriff

It was noted that the current compensation for the position of Sheriff is 1% above the County's compensation philosophy goal at base pay and 2% below at total pay,

Fister spoke to the position of Undersheriff and the need to avoid compression between the Sheriff and Undersheriff compensation levels. Deputy County Administrator Whitney Hale shared that the compensation range for the position of Undersheriff is \$139,570 - \$187,037.

Discussion ensued regarding the larger sizes of the comparable counties, the fact that the FY 2026 COLA may be 2.5%, and the appropriateness of making no change to the Sheriff's salary at this time but looking at it again next year.

Motion: Trego moved approval of the recommendation of no adjustment to the compensation for the Sheriff position in FY 2026. Clark-Endicott seconded the motion, which carried 3 – 0.

- Justice of the Peace

The current compensation for this position was reviewed along with those from the three counties used as comparables. It was noted that this position is currently compensated at 9% above the County's compensation philosophy goal at base pay and 10% above that goal at total pay.

Motion: Trego moved approval of the recommendation of no adjustment to the compensation for the Justice of the Peace position in FY 2026. Clark-Endicott

seconded the motion, which carried 3 – 0.

- Treasurer

The current compensation for this position was reviewed along with those from the three counties used as comparables. This position is compensated on the basis of a half-time basis; the current compensation amount is 4% above the County's compensation philosophy goal at base pay and 5% above that goal at total pay.

Motion: Trego moved approval of the recommendation of no adjustment to the compensation for the Treasurer position in FY 2026. Clark-Endicott seconded the motion, which carried 3 – 0.

ADJOURN:

Being no further items to come before the Board, the meeting was adjourned at 10:08 am.

RESPECTFULLY SUBMITTED:

A handwritten signature in blue ink, appearing to read "Bronale Fitzmaurice", is written over a horizontal line.

RECORDING SECRETARY