Late Backup

Budget Item	Top 10 Council Indicator	Metrics and Strategies	Amount
Gus Garcia Health Clinic Feasibility and Design	Accessibility to quality health care services (Health & Environment)	Years of potential life lost before age 75 per 100,000 population.	\$150,000 one time cost for
		Percentage of residents ≥ age 65 who received a core set of preventive clinical services in the past 12 months	feasibility
		Incorporate health considerations into program and policy decision-making, taking into account the influence of race, income levels, education, and the built environment on health outcomes (City Auditor identified Rundberg/Lamar as one of top 2 areas for lack of these services)	\$150,000 one time cost for design
		Provide and/or support initiatives that can connect those seeking wellness and medical care with the appropriate providers, and help them navigate and overcome critical barriers to obtaining health and mental health services	
		Convene partners to create innovative, outcome-focused, patient-centered approaches that enhance Austin's health system by clearly defining roles and responsibilities, reducing duplication of services, leveraging resources, filling community gaps in services, and advancing collective community health strategies.	
Relationship violence prevention/emergency programming	Fair Administration of Justice (Safety)	Percentage of residents who feel safe at home, at work, and in community	\$300,000 prevention
		Part 1 violent crime rate per 1,000 population and percentage change in that rate	\$300,000 emergency safety
		Percentage of residents who say they trust the City's public safety services	
	Community Compliance With	Years of potential life lost before age 75 per 100,000 population	
		Number and percentage of unique individuals incarcerated in local jail, state prison, or federal prison, or jailed awaiting trial	-
	Reduction of Violent Crime* (Safety)	Pursue evidence-based strategies to address root causes of harm, crime, and lack of public safety.	
	*This indicator is		
	not one of		
	Council's top ten		
	indicators.		

Tenant	Housing	Number of unsubsidized affordable market-rate units	\$110,000 preserving
Support/Housing Safety	(Economic Opportunity & Affordability)	Number of subsidized and incentivized rental units considered to be affordable	affordable housing/housing safety (CCF) \$115,000 preserving affordable housing/housing safety through pop-ups (GF)
		Number of persons experiencing homelessness	
		Number of people who return to homelessness after moving into housing	
	Homelessness (Economic Opportunity & Affordability)	Develop and act on recommendations to reduce number of households and businesses displaced from Austin due to unaffordability	
		Define and enact our response to homelessness focusing on efficient and effective use of our resources to address disparities, prevent homelessness, and support housing stability	
		Increase equity in our community by allocating City resources based on greatest need and in ways that have the highest impact	
		Engage community members on the matters that impact them in ways that are timely, convenient, meaningful and honor their communication preferences	
Addiction arrest diversion/walk-in clinic	Fair Administration of Justice (Safety)	Number of suicides and unintentional overdose deaths	\$125,000
		Number and percentage of unique individuals incarcerated in local jail, state prison, or federal prison, or jailed awaiting trial	·.
-	Accessibility to quality health care services, both physical and mental (Health & Environment)	Percentage of people who report 5 or more poor mental health days within the last 30 days	
		Years of potential life lost before age 75 per 100,000 population	
		Provide and/or support initiatives that can connect those seeking wellness and medical care with the appropriate providers, and help them navigate and overcome critical barriers to obtaining health and mental health services	
		Pursue evidence-based strategies to address root causes of harm, crime, and lack of public safety.	
		Improve positive outcomes in the justice system by understanding the perspectives of those who interact with the adult and juvenile justice systems (crime victims, defendants, etc.). Increase information-sharing across partner organizations, with an initial focus on increasing access to services and alternatives to adjudication (formal decision by a judge)	
Planning Improved	Accessibility to quality health care services, both physical and	Percentage of people who report 5 or more poor mental health days within the last 30 days	\$75,000-\$100,000
Response to Mental Health Issues		Years of potential life lost before age 75 per 100,000 population	
		Percentage of residents who say they trust the City's public safety services	

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	mental (Health & Environment)	Percentage of community members (public safety consumers) who say they feel the response to their emergency was delivered effectively	
		Percentage of people who say they were treated fairly during our enforcement and judicial processes	
	Fair Administration of Justice (Safety)	Number and percentage of use of force incidents	
		Number and percentage of our responders who have completed initial and continuing training related to serving vulnerable and diverse community members (examples: mental, behavioral health, de-escalation training)	
·		Number and percentage of unique individuals incarcerated in local jail, state prison, or federal prison, or jailed awaiting trial	
		Pursue evidence-based strategies to address root causes of harm, crime, and lack of public safety.	
		Improve positive outcomes in the justice system by understanding the perspectives of those who interact with the adult and juvenile justice systems (crime victims, defendants, etc.). Increase information-sharing across partner organizations, with an initial focus on increasing access to services and alternatives to adjudication (formal decision by a judge)	
		Convene partners to create innovative, outcome-focused, patient-centered approaches that enhance Austin's health system by clearly defining roles and responsibilities, reducing duplication of services, leveraging resources, filling community gaps in services, and advancing collective community health strategies.	

Keep successful programs going for community members in need:

- A) Prevent the reduction in AISD programs (~\$400K)

 B) Prevent the reduction in EMCOT (***)
- C) Prevent the reduction in deportation defense (\$90K)
- **D)** Prevent the reduction in workforce development

Keep our promises to address the harm of sexual assault kit backlog:

E) Two more sexual assault survivor counselors