



**Program #40101 - Promoting Access To Hope (PATH) Care Coordination Continuum** 7/14/2022

**Department:** Health Department **Program Contact:** Jesse Benet  
**Program Offer Type:** Innovative/New Program **Program Offer Stage:** As Adopted  
**Related Programs:** 40085, 30407B  
**Program Characteristics:**

**Executive Summary**

Promoting Access To Hope (PATH) was developed as a joint effort by the Health Department Behavioral Health Division (BHD), the Joint Office of Homeless Services, Department of Community Justice, and the Multnomah County Chair's Office. PATH conducts outreach to engage and connect eligible adults in Multnomah County who are struggling with substance use disorder (SUD), houselessness, at risk of criminal justice involvement, with priority given to BIPOC persons. Individuals may also struggle with poverty, mental health acuity, physical health challenges, etc. PATH connects to a broad network of treatment providers that offer service and support at all levels of care. PATH offers culturally-specific services by staff that reflect those served and connects them to treatment and recovery support services responsive to individual cultural needs.

**Program Summary**

PATH conducts outreach to persons with problematic substance use who are also houseless and at risk of justice system exposure. PATH receives referrals through a variety of sources: community treatment and support providers, justice partners, Behavioral Health Crisis Line, other county programs, family members, community members, self referrals, etc. Services begin with the completion of an individual needs assessment to develop a service plan specific to each unique individuals' needs/goals. PATH staff then work with the individual to identify and engage in appropriate level of SUD treatment services and recovery supports, which might also include housing, physical health, mental health, employment, etc. PATH services are voluntary, person directed, and low barrier. PATH staff use approaches like motivational interviewing and harm reduction to meet people where they are so they can initiate their recovery journey. Staff collaborate with each individual to establish recovery goals, eliminate/navigate barriers to basic needs, and build a recovery foundation. PATH team members assist with placement to appropriate levels of SUD treatment and recovery support services and provide ongoing support to address deficits in social determinants of health. Harm reduction approaches are utilized based on individualized needs given individuals are often at various stages of readiness for treatment or change. Abstinence from substances or other high risk behaviors are not a requirement of these services, instead PATH staff take a person-centered approach and utilize motivational interviewing skills to encourage and identify readiness for change. Services are culturally competent, focused on individual needs/readiness, and trauma informed. The PATH program leads with race and focuses on equity through several key approaches: 1) involvement in internal county equity initiatives; 2) employing Knowledge, Skills and, Abilities (KSA) and dual language positions; 3) working with community providers to develop and enhance culturally specific and responsive SUD services; 4) participating in community initiatives that amplify community voices and perspectives to improve service quality and to address systemic racism in the service system overall; 5) working with existing culturally specific providers to ensure that individuals are placed in services that recognize and support their cultural identity as an integral part of their lifelong recovery. The PATH program employs KSA staff: African American, Latinx, and LGBTQIA2S+. PATH launched July 1, 2021, and in its first 6 months has engaged with 230 individuals, of whom 59% identify as BIPOC.

**Performance Measures**

Measure Type	Primary Measure	FY21 Actual	FY22 Budgeted	FY22 Estimate	FY23 Offer
Output	Number of unique individuals served annually in PATH outreach and care coordination services*	N/A	N/A	363	350
Outcome	Percentage of clients served annually in PATH Care Coordination that were successfully placed**	N/A	N/A	60%	60%

**Performance Measures Descriptions**

\*The total number of unique individuals referred through successful outreach (individuals are provided basic resources and services at this referral point), as well as those enrolled. Excluded from FY22 estimate: data for the PATH position reported in offer 40085-C and the Problem Gambling Coordinator position reported in offer 40086. \*\*Placed means clients are successfully referred and enrolled in community based SUD treatment and recovery support.

## Legal / Contractual Obligation

Oregon Health Authority, Intergovernmental Agreement for the Financing of Community Addictions and Mental Health Services.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2022	2022	2023	2023
Personnel	\$0	\$706,816	\$515,136	\$180,148
Contractual Services	\$0	\$0	\$25,002	\$0
Materials & Supplies	\$0	\$0	\$39,306	\$29,001
Internal Services	\$0	\$0	\$33,093	\$26,315
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$706,816</b>	<b>\$612,537</b>	<b>\$235,464</b>
<b>Program Total:</b>	<b>\$706,816</b>		<b>\$848,001</b>	
<b>Program FTE</b>	0.00	4.98	4.00	4.90

Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$235,464
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$235,464</b>

## Explanation of Revenues

This program generates \$13,285 in indirect revenues.

\$ 150,564 - Federal Ryan White Non Med Case Management

\$ 23,647 - Local 2145 Beer and Wine Tax

\$ 61,253 - State Mental Health Grant: A&D Peer Delivered Services based on IGA with State of Oregon.

## Significant Program Changes

### Last Year this program was:

PATH was a new program that combined the former Addictions Benefits Coordination (ABC) Team and LEAD programs (40085A/B). It revamped the ABC model with a broader scope geographically and a slightly different target population who struggle with SUD. Its emphasis is on BIPOC individuals and targets highneeds houseless with justice system involvement risk. The first half of FY22 included: setting up new internal systems, procedures and processes; hiring/onboarding new staff; transitioning/training existing staff to new roles; revamping data collection/ reporting systems to better track program performance measures; setting up referral partnerships for culturally specific services; etc. The FTE increase is a result of shifting staff from other programs to PATH as well as the budget balancing process. In addition, 1.00 FTE is added in FY 2023 funded by the Supportive Housing Services Measure funding in the Joint Office of Homeless Services (see 30407B).