

**Department:** County Human Services      **Program Contact:** Devarshi Bajpai  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Proposed  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Detoxification and Supportive Housing are two vital steps to working towards long-term recovery and stability. Detoxification, a medically monitored inpatient service, is the primary entrance point into addiction services for many low income people who are facing a severe addiction. Supportive Housing is available for people who are homeless addicts who have completed detoxification and are continuing treatment. Benefiting from both clinical and housing support, clients move from active addiction, through treatment, with supportive housing assistance.

**Program Summary**

Alcohol and drug detoxification medically stabilizes a highly vulnerable and diverse client population. It prepares them for further alcohol and drug treatment and connects them to other services needed to resolve homelessness and health issues. There are approximately 2,400 admissions to detoxification annually.

Supportive Housing greatly increases post-detoxification treatment retention rates and promotes recovery. Supportive housing for people who are homeless addicts is one of the vital steps to working towards long-term recovery and stability. After detoxification, Supportive Housing addresses two interwoven challenges: without housing, clients lack the stability necessary to address the problems that lead to homelessness, and without supportive services, the client is likely to remain homeless due to unaddressed addiction issues.

Detoxification services are provided 24 hours/day, 7 days/week. Clients receive prescribed medication to ease withdrawal symptoms and acupuncture to reduce physiological stress so they are more likely to complete the process. The program includes an integrated medical clinic with primary care and dual-diagnosis services. Detoxification is provided in a culturally competent manner that includes a variety of services: counseling and case management, physical and mental health care, housing resources (permanent housing, rent assistance, eviction prevention), food and transportation, and economic independence (introduction to job training, employment referrals, benefits eligibility screening).

After detoxification, homeless clients who are entering outpatient treatment may be referred to supportive housing services. Supportive Housing (\$29 per unit per day) is an evidence-based, lower-cost resource when compared to either inpatient hospitalization (over \$2,348 per day) or residential treatment (\$120 per day), and we can provide less restrictive/expensive outpatient treatment while the individual is in Supportive Housing. Findings from a 2006 study of homeless adults in Portland showed a 36% reduction in community cost when supportive housing is provided. The 58 supportive housing units can each house 2 to 3 clients per year (3-4 month stays). Clients are helped by Housing Support Specialists to access key services that promote health, recovery, stability, and self-sufficiency.

**Performance Measures**

Measure Type	Primary Measure	FY13 Actual	FY14 Purchased	FY14 Estimate	FY15 Offer
Output	Number of admissions annually to detoxification <sup>1</sup>	2,413	2,400	2,370	2,400
Outcome	Percentage of supportive housing unit utilization <sup>2</sup>	94%	90%	94%	90%
Output	Number served in supportive housing units <sup>3</sup>	24	133	133	133

**Performance Measures Descriptions**

<sup>1</sup> An admission is a person completing the admission process. There can be multiple admissions.  
<sup>2</sup> Average length of stay in supportive housing is 14-15 weeks. Our outcome measures the annual utilization rate.  
<sup>3</sup> While the Current Year Estimate and Next Year Offer both indicate the number served in all 58 housing units, the FY13 number of 24 was for 8 beds in the FY13 Scale up Program Offer 25090B.

## Legal / Contractual Obligation

Contractual obligation: This program is funded with federal substance abuse prevention and treatment resources and state general funds through the State Oregon Health Authority (OHA) Addictions and Mental Health Division (AMH) contract. Program planning is developed based on AMH State Mental Health Grant Award requirements and submitted in the "Biennial Implementation Plan." Because Multnomah County accepts the State Mental Health Grant, we are obligated to spend funds in accordance with State Service Elements. Also, Local 2145 Beer & Wine Tax Revenues are provided to counties on a dedicated formula basis and are restricted to alcohol & drug services.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2014	2014	2015	2015
Contractual Services	\$1,410,343	\$2,081,207	\$1,410,343	\$2,081,207
<b>Total GF/non-GF</b>	<b>\$1,410,343</b>	<b>\$2,081,207</b>	<b>\$1,410,343</b>	<b>\$2,081,207</b>
<b>Program Total:</b>	<b>\$3,491,550</b>		<b>\$3,491,550</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$2,081,207	\$0	\$2,081,207
<b>Total Revenue</b>	<b>\$0</b>	<b>\$2,081,207</b>	<b>\$0</b>	<b>\$2,081,207</b>

## Explanation of Revenues

\$1540,762- State Mental Health Grant SAPT Block Grant: Based on FY14 grant award \$418,917 - Local 2145 Beer & Wine Tax Revenues: Based on FY14 grant award \$121,528 - State Mental Health Grant Flex Funds: Based on FY13 grant award

## Significant Program Changes

Last Year this program was: 25090 Addictions Detoxification & Post Detoxification