

Department:	Health Department	Program Contact:	Kim Toevs
Program Offer Type:	Existing Operating Program	Program Offer Stage:	As Adopted
Related Programs:	40010B		

Program Characteristics:
Executive Summary

Access to sterile injection equipment is proven to reduce transmission of hepatitis C, HIV/AIDS, and bacterial infections. The national opioid crisis and rising methamphetamine use have led to increased injection drug use and, in turn, the need for sterile syringe access and harm reduction services. The Harm Reduction program provides syringe exchange, naloxone distribution, and resources that work to increase client readiness and linkage to substance use treatment services. In recent years, the program has increased technical assistance to counties throughout Oregon to improve harm reduction service availability outside of the Portland-metro area.

Program Summary

The harm reduction program works with people who may not be ready to stop substance use, offering strategies to reduce risks and negative outcomes associated with injection drug use for individuals and the larger community. 66% of clients report homelessness/unstable housing and rely on low barrier access to services and supplies offered through Harm Reduction programming. Services incorporate trauma-informed risk reduction counseling and referrals based on readiness for change. Strategies include promoting one-time use of sterile syringes and other supplies, which is crucial to prevent hepatitis C, HIV, and hepatitis B transmission.

The Harm Reduction program offers access to services at field-based and clinical sites. These access points reduce barriers faced by persons who inject drugs (PWID), such as stigma associated with drug use and housing status, through focus on building trusting relationships. The clinical site also provides low barrier wound/abscess care, sexual health services for people not typically engaged in health care, and an on-site Addiction Benefit Coordinator. In 2019 Oregon Health Plan expanded hepatitis C treatment access to PWID. With this expansion of HCV treatment to PWID, the program optimizes ability to engage clients in HCV/HIV testing and linkage to treatment. In 2019, the program was able to extend testing opportunities to field-based services.

Opioid overdose prevention and naloxone distribution help clients, first responders, and other community members recognize and respond to an overdose. While prescription drug overdose (OD) deaths recently declined in Oregon, statewide data shows an increase in OD death due to illicit drugs. Multnomah County has the highest OD deaths in Oregon, and the program continues to improve response by expanding kit distribution at sites and training other service providers to carry and distribute naloxone. Harm Reduction clients reported 1,146 OD reversals in FY19, an increase of 25%. To support overdoses prevention efforts, staff provide regional and statewide technical assistance and capacity building training, allowing local community-based organizations to buy naloxone through the program. Additionally, staff work with partners to coordinate system-level strategies.

Performance Measures

Measure Type	Primary Measure	FY19 Actual	FY20 Budgeted	FY20 Estimate	FY21 Offer
Output	Number of syringe exchange client encounters	47,418	50,545	47,284	50,545
Outcome	Number of overdose rescues reported	1,146	939	1,313	1,508
Output	Number of syringes collected	6,813,964	7,300,000	7,068,741	7,300,000
Output	Number of naloxone doses distributed	7,944	7,228	15,085	17,235

Performance Measures Descriptions

1) Visits to MCHD and Outside In. 2) Overdose rescues reported to MCHD and Outside In. 3) Includes MCHD and Outside In. 4) Increase in doses distributed due to additional federal funding. Clients from MCHD and Outside In.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2020	2020	2021	2021
Personnel	\$440,903	\$406,947	\$378,241	\$716,736
Contractual Services	\$278,838	\$96,000	\$286,187	\$156,019
Materials & Supplies	\$528,625	\$111,975	\$692,501	\$96,830
Internal Services	\$228,986	\$46,499	\$273,244	\$83,858
Total GF/non-GF	\$1,477,352	\$661,421	\$1,630,173	\$1,053,443
Program Total:	\$2,138,773		\$2,683,616	
Program FTE	4.24	3.43	3.49	6.31

Program Revenues				
Intergovernmental	\$0	\$646,421	\$0	\$1,023,013
Other / Miscellaneous	\$0	\$0	\$100,000	\$0
Service Charges	\$0	\$15,000	\$0	\$30,430
Total Revenue	\$0	\$661,421	\$100,000	\$1,053,443

Explanation of Revenues

This program generates \$83,858 in indirect revenues.
 \$ 433,562 - HIV Prevention Block Grant
 \$ 30,430 - Medicaid Reduction Clinic FFS
 \$ 341,217 - OHA HIV Harm Reduction
 \$ 248,234 - SAMHSA Naloxone Project (SOR)

Significant Program Changes

Last Year this program was: FY 2020: 40061-20 Harm Reduction

For FY21, Harm Reduction will utilize Federal SAMHSA pass-through funding (\$248,234) to support expanded naloxone distribution.