

**Department:** Health Department      **Program Contact:** Devarshi Bajpai  
**Program Offer Type:** Existing Operating Program      **Program Offer Stage:** As Adopted  
**Related Programs:**  
**Program Characteristics:**

**Executive Summary**

Alcohol and drug detoxification, or medically monitored withdrawal management, 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 detox services annually. Supportive Housing targets homeless addicted individuals who have completed detoxing from substances, providing additional engagement and stability to enhance outcomes of continued treatment.

**Program Summary**

The detoxification and stabilization program supports capacity for withdrawal management services to be provided 24 hours/day, 7 days/week under medical oversight. Clients receive prescribed medication to safely manage withdrawal symptoms and acupuncture to reduce physiological stress so they are more likely to complete the process. Services are also provided in an integrated medical clinic with primary care and dual-diagnosis capability and include culturally specific considerations for African American and Latino populations. Stabilization services include counseling; case management; referrals related to housing, food and transportation, and such economic independence resources as job training, employment referrals, benefits eligibility screening; and discharge linkage to continuing care treatment.

Supportive Housing greatly increases post-detoxification treatment engagement rates. For people who are homeless, addicted, and newly sober, it can be a vital resource in the work towards long-term recovery. Supportive Housing addresses two interwoven challenges: without housing, clients lack the stability necessary to address the problems that lead to homelessness, and without attached supportive services, the client is likely to remain homeless due to unaddressed addiction issues.

Supportive Housing (\$29/day) is an evidence-based, lower-cost resource when compared to either inpatient (up to \$900/day) or residential treatment (\$124/day), and we can provide less restrictive/expensive outpatient treatment while the individual is in Supportive Housing. 58 supportive housing units can each house two to three 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	FY16 Actual	FY17 Purchased	FY17 Estimate	FY18 Offer
Output	Number of admissions annually to detoxification <sup>1</sup>	2,559	2,400	2,564	2,400
Outcome	Percentage of supportive housing unit utilization <sup>2</sup>	94%	90%	94%	90%
Output	Number of individuals receiving supportive housing <sup>2</sup>	133	168	168	168

**Performance Measures Descriptions**

<sup>1</sup> An admission is a person completing the admission process. There can be multiple admissions per individual.

<sup>2</sup> Average length of stay in supportive housing is 14-15 weeks. Our outcome measures reflect the annual utilization rate (Measure 2) and estimated annual number of individuals housed (Measure 3).

## 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	2017	2017	2018	2018
Contractual Services	\$1,747,560	\$1,296,616	\$1,798,612	\$1,296,616
<b>Total GF/non-GF</b>	<b>\$1,747,560</b>	<b>\$1,296,616</b>	<b>\$1,798,612</b>	<b>\$1,296,616</b>
<b>Program Total:</b>	<b>\$3,044,176</b>		<b>\$3,095,228</b>	
Program FTE	0.00	0.00	0.00	0.00

Program Revenues				
Intergovernmental	\$0	\$1,296,616	\$0	\$1,296,616
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,296,616</b>	<b>\$0</b>	<b>\$1,296,616</b>

## Explanation of Revenues

\$ 1,226,409 - State Mental Health Grant: A&D Community Mental Health Block Grant based on IGA with State of Oregon.  
\$ 70,207 - State Mental Health Grant: A&D Community Behavioral and Substance Use Disorder Services based on IGA with State of Oregon.

## Significant Program Changes

Last Year this program was: FY 2017: 40089 Addictions Detoxification & Post Detoxification Housing