

Program # 25080A - Adult Addictions Treatment Continuum

Version 2/15/2013 s

Lead Agency: County Human Services Program Contact: Devarshi Bajpai

Program Offer Type: Existing Operating

Related Programs:

Program Characteristics: In Target

Executive Summary

The adult treatment continuum consists of: outpatient addictions treatment including various counseling options; medication management and relapse prevention; residential treatment (intensive addictions services in a 24-hour setting); community recovery (aftercare services for clients learning to live sober); and a specialized program for persons who are severely addicted, diagnosed with multiple problems, and homeless. The continuum will serve approximately 3,500 clients next year. Research shows that every dollar invested in addiction treatment yields a cost offset of up to \$11.05 in other publicly-supported services.

Program Description

The Oregon Health Authority estimates 300,000 Oregonians have a diagnosable substance use disorder, roughly 18% of those needing addiction services access treatment, and more than 40% of those who try to get help experience barriers related to cost or lack of insurance. The overall goal of addiction treatment is to have as many clients as possible successfully complete treatment and maintain sobriety. Our successful completion rate is almost 50%, higher than the national rate of 45%.

Our adult treatment continuum supports recovery and a return to a healthy lifestyle by offering access to addictions treatment that addresses the negative consequences of alcohol and other drugs and teaches prosocial alternatives to addictive behaviors through clinical therapy, skills building, and peer delivered services. Community recovery support programs provide a variety of clean and sober social support activities for clients and their families.

Services are delivered throughout Multnomah County by a network of state licensed providers. These providers are culturally competent and many have bilingual staff. Outpatient treatment allows a client to work, go to school, attend job training, socialize, and otherwise carry on a normal life. The system treats about 3,500 outpatient clients annually.

Residential treatment provides intensive services in a 24/7 setting with clients living in the treatment center during their course of treatment, usually for two to six months. Clients needing this level of care often have multiple failures in outpatient treatment, often related to the severity and length of their addiction, as well as risk factors like chronic unemployment and housing problems. Residential treatment serves about 500 clients annually.

Treatment helps clients shift from ambivalence and denial about their addiction to acceptance and incentive to change.

Clients address issues that are barriers to recovery, and develop strategies and skills to overcome them. Providers also address the self sufficiency needs of each client through help with: parenting skills; stress and anger management; housing issues; independent living skills; referrals for physical and mental health issues; linkages to employment services; and recreation and healthy use of leisure time.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY11-12)	Current Year Purchased (FY12-13)	Current Year Estimate (FY12-13)	Next Year Offer (FY13-14)
Output	Number served in treatment (all levels)	3,501	3,500	3,714	3,500
	Percentage of clients who successfully complete ¹ treatment (Outpatient)	49.0%	58.0%	49.0%	50.0%

Performance Measure - Description

¹ "Successful completion of treatment" is defined as the client meeting the American Society of Addiction Medicine's Patient Placement Criteria for the Treatment of Substance-related Disorders, Second Edition Revised (ASAM PPC 2R) discharge criteria, completing at least two thirds of their treatment plan goals, and demonstrating 30 days of abstinence.

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 and Wine tax revenues are provided to counties on a dedicated formula basis and are restricted to alcohol and drug services.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2013	2013	2014	2014
Personnel	\$276,476	\$584,547	\$187,838	\$621,162
Contracts	\$2,690,421	\$8,013,766	\$2,750,954	\$5,326,380
Materials & Supplies	\$17,907	\$840	\$3,513	\$7,155
Internal Services	\$51,536	\$8,425	\$19,922	\$66,407
Total GF/non-GF:	\$3,036,340	\$8,607,578	\$2,962,227	\$6,021,104
Program Total:	\$11,6	43,918	\$8,983,331	
Program FTE	2.70	5.99	1.50	6.33
Program Revenues				
Intergovernmental	\$0	\$8,607,578	\$0	\$6,021,104
Total Revenue:	\$0	\$8,607,578	\$0	\$6,021,104

Explanation of Revenues

\$293,046 - State Mental Health Grant Local Admin: Based on FY13 grant award

\$103,350 - State Mental Health Grant Special Projects: Based on FY13 award

\$1,803,195 - State Mental Health Grant A&D Adult Residential: Based on FY13 award

\$1,054,500 State Mental Health Grant A&D Adult Residential Capacity: Based on FY13 award.

\$301,563 - State Mental Health Grant A&D Dependent Child Res.: Based on FY13 award

\$2,309,067 - State Mental Health Grant Flex Funds: Based on FY13 award

\$156,383 - Local 2145 Beer and Wine Tax Revenues: Based on FY13 revenue projections

\$2,962,227 - County General Fund

Significant Program Changes

Significantly Changed

Last year this program was: #25080, Adult Addictions Treatment Continuum

This program offer reflects a reduction of about \$2.6 million in state funding and pass through budget. The state residential alcohol and drug treatment funds are moving to the Coordinated Care Organization (Health Share of Oregon) for FY14.