



We support and empower all people with or affected by HIV, reduce stigma, and provide the LGBTQ+ community with compassionate healthcare.

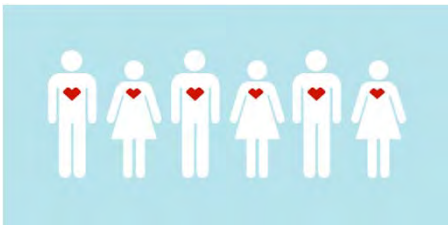


Overview of CAP's Services

Prevention & Healthcare



- Community Education Services
 - Tabling at community events
- Testing
 - 3 days a week at CAP office
 - PIVOT at PRISM
 - Other locations in metro region



- Prism
 - LGBTQ+ focused Primary care health center in SE Portland
 - Specialized services for the transgender community
- Other services
 - Prevention w/ Positives
 - PrEP Navigation
 - Insurance Navigation & Enrollment

Washington County Testing

- Free HIV/Syphilis/Chlamydia/Gonorrhea Testing at:
 - Beaverton Clinic Mondays from 2pm-7pm
 - Hillsboro Clinic Thursday from 1pm-5pm
- Twice monthly HIV Testing at Virginia Garcia Memorial Health Center
 - 2nd Friday of the month from 2pm-4pm
 - 4th Friday of the month from 2pm-4pm
- Host of other testing events throughout the year in partnership with:
 - Salud Migrant Camps, Home Plate Youth Services, Binational Health Week Health Fair & Washington County Public Health
- New online intervention at Beaverton Clinic for YMSM called Keep It Up!

Southwest Washington Services

- Medical Case Management
- Wellness Case Management
- Service Navigation
- Insurance Enrollment
- Housing Case Management
- Peer Support
- HIV/STI Testing

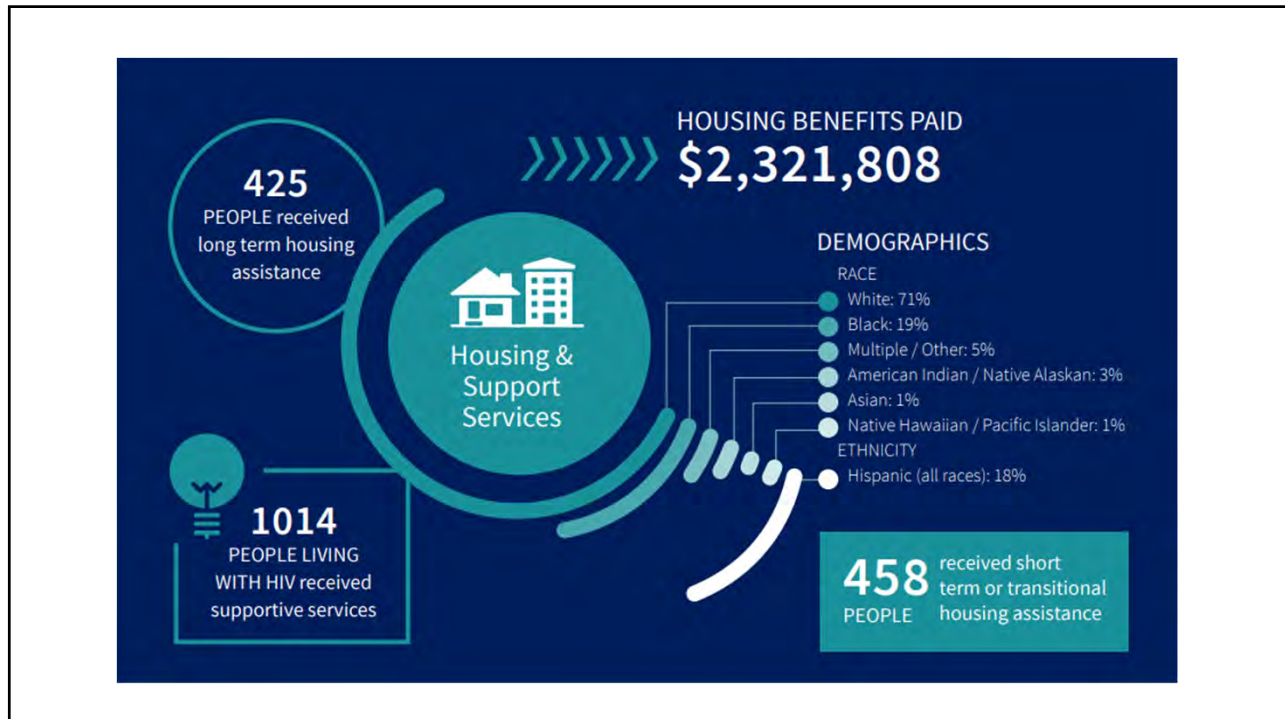
Vancouver Office



Longview Office



Housing & Support Services



How to connect a client to CAP services

Connect

Intake Process

1. Person calls CAP at 503-223-5907 or comes in to schedule an intake with Service Center Coordinator (7 scheduled a week).
2. Person is advised to bring HIV verification, health insurance card, ID proof of residency, and proof of income, if applicable.
3. Intakes are approximately 1-2 hours and cover basic demographic information, household information, housing status, HIV status information, psychosocial information (MH, SA), and criminal history.
4. The following services are provided (depending on need) in an intake or at follow-up appointment.
 1. Assistance with the Housing Waitlist Application and Coordinated Access application.
 2. Information and referrals to external services and agencies.
 3. Internal referrals and connections to CAP services.



CareLink



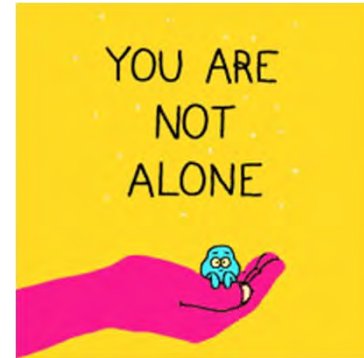
- Navigation services for people that:
 - Are newly diagnosed
 - Have been out of medical care for 6+ months
 - Are transitioning out of incarceration
- Services include:
 - Help engaging in medical care
 - Link to mental health and substance abuse services
 - Connect to food, clothing, and housing resources
 - Education about living with HIV

MAI & Navigation Services

- CAP has two MAI (Minority AIDS Initiative) employees who work with the Latinx and Black Community
- Two Housing Navigators to help individuals on our waitlist get connected to support services & apply for subsidized housing if they have income.
- Capacity to do offsite intakes & Coordinated Access Assessments

Peer Support

- Work with people who are experiencing substance abuse disorder and mental illness
- Connect to treatment and mental health services
- Coordinate medical care and accompany to appointments
- Identify and accompany to social activities
- Help individuals maintain and retain housing
- Help coordinate and access resources
- Host a monthly peer recover group on every 3rd Wednesday from 2:30-4pm



Other Support Services

- CAP Service Center – open daily (M-Th 12:30-4:30pm & F 12:30-3:00pm) to provide information on CAP services, employment or housing applications and connections to community resources. Computers available.
- Camp KC – week long camp for children whose lives have been affected by HIV/AIDS
- Bridges to Work employment program for people living w/ HIV/AIDS and HIV negative trans-identified individuals
- Latino & African American Services navigation
- Mental Health support with an embedded Cascadia counselor
- Furniture Warehouse Program
- Aging Well Program
- Steps 1 on 1 counseling



Emergency Rent Assistance

- Emergency Rent Assistance
 - Application fees
 - Rent assistance to prevent an eviction
 - Utility assistance to prevent shut off
 - Assistance with move in costs
 - Mortgage assistance

**FINAL
NOTICE**

Housing Readiness Services

- The Housing Readiness Coordinator meets with clients to assist them in developing long term housing goals, address screening barriers, and complete activities to become better prepared to obtain and maintain housing
- Who is eligible?
 - Folks who are on the CAP housing Wait List but not yet assigned a subsidy
- How to access:
 - The Housing Readiness Coordinator is in the Service Center on Tuesdays and Fridays from 9 am-noon to assist with housing related activities and questions.

ACTION PLAN



Housing Case Management Services

CAP's Housing Case Managers help program participants:

- Address barriers to housing including eviction or poor rental history, criminal history, poor credit, and lack of rental history
- Find and secure housing
- Compile necessary documentation and complete housing-related paperwork
- Communicate productively with landlords
- Address tenancy issues



Housing Case Management – Who Qualifies?

- Provided to everyone with a CAP-controlled rent subsidy
- As capacity allows, case management may be provided to people who do not have a rent subsidy, but:
 - Have income, but need help searching for housing
 - Have a non-CAP-managed subsidy (ie: Section 8) that they need help placing
 - Are in danger of losing their current housing
 - Are homeless or unstably housed and need more help securing housing than is available in CAP's Service Center



Housing and Treatment

- What happens to a client's housing when they go to treatment?
 - CAP will continue to pay clients' rent for up to 90 days while in a treatment program
 - Housing case managers can also advocate to landlords on behalf of clients while in treatment
 - If a client has a voucher, but has not placed it, housing case manager will search for apartments with client while they are in treatment
 - Housing case managers will coordinate with client's medical team, peer support, counselors, probation officers, etc., to ensure a safe discharge plan



Any Questions?

