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Щоб попросити переклад або спеціальні послуги для осіб з особливими потребами, зверніться до нас, скориставшись такими контактними даними: **publichealthcontract@clackamas.us** | **503-742-5350**.

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publichealthcontract@clackamas.us | **503-742-5350**。

Để yêu cầu dịch vụ dịch thuật hoặc điều chỉnh liên quan đến tình trạng khuyết tật, vui lòng liên hệ với chúng tôi qua **publichealthcontract@clackamas.us** | **503-742-5350.**

Clackamas County
www.clackamas.us

Health, Housing & Human Services
CLACKAMAS COUNTY

Mary Rumbaugh,
Director

December 03, 2026

BCC Agenda Date/Item: _____

Board of County Commissioners
Clackamas County

Approval of Amendment #2 to a Revenue Intergovernmental Agreement with Oregon Health & Science University for the Oregon Care Coordination Program. Total Amendment value is $38,979 and 1 year. Total value is $195,603 for 3 years. Funding through Oregon Health & Science University. No County General Funds are involved.

Previous Board Action/Review
Original: March 20, 2025 Agenda Item, 250320IIID1
Amendment #01, December 18, 2025 Agenda Item, 251218 IV.G5
Performance Clackamas: Healthy People
Counsel Review: Yes – Andrew Naylor
Procurement Review: No
Contact Person: Kim La Croix
Contact Phone: 971-806-0004

EXECUTIVE SUMMARY: The Clackamas County Public Health Division (CCPHD) of the Health, Housing, and Human Services Department requests approval of Amendment #2 to the Revenue Intergovernmental Agreement with Oregon Health, & Science University (OHSU) for the Oregon Care Coordination Program (CaCoon).

CCPHD received grant funding from OHSU to continue the Oregon Care Coordination Program (CaCoon). This grant allows CCPHD to provide a community Health Nurse to facilitate community-based and family-centered care coordination for children with special needs. Specific services include assessment of needs, coordination of healthcare and other services, and knowledge of comprehensive local services. CaCoon services support vulnerable children to access needed services and improve their quality of life and health outcomes. Children served by the CaCoon program make fewer visits to the emergency department and have higher rates of immunizations, well-child care, and dental care.

Amendment #2 extends the term by 1 year and adds funding. This Amendment is effective October 1, 2026, per OHSU.

RECOMMENDATION: Staff respectfully recommends the Board of County Commissioners approve Amendment #2 to the Revenue Grant Agreement (11969) and authorize Chair Roberts or his designee to sign on behalf of Clackamas County.

Respectfully submitted,

Mary Rumbaugh

Mary Rumbaugh,
Director of Health, Housing, & Human Services

For Filing Use Only

FDP SUBAWARD AMENDMENT
Amendment Number 2 – CC#11969

Pass-through Entity (PTE)	Subrecipient
Institution/Organization ("PTE") Entity Name: Oregon Health & Science University Contact Email Address: spasub@ohsu.edu Principal Investigator: Ben Hoffman	Institution/Organization ("Subrecipient") Entity Name: Clackamas County acting by and through its Health, Housing, and Human Services Department, Public Health Division Contact Email Address: JWeber2@clackamas.us Principal Investigator: Cassandra Stewart UEI: NVWKAVB8JND6
Project Title: Title V FY2024-2029 "Maternal and Child Health Services Block Grant"	
PTE Federal Award No. via OHA 184038	Federal Awarding Agency: DHHS HRSA Maternal and Child Hlth Bureau via OHA

Cumulative Budget Period(s):	Amount Funded This Action:	Subaward No:
Start Date: 10/01/2024 End Date: 09/30/2028	$38,979.00	1029202_CLACKAMAS

Effective Date of Amendment:	Total Amount of Federal Funds Obligated to Date:	Subject to FFATA:	Automatic Carryover:
10/01/2026	$195,603.00	☒ Yes ☐ No	N/A - Fixed

Amendment(s) to Original Terms and Conditions

This Amendment revises the above-referenced Subaward Agreement as follows:

The "Subaward Budget Period" end date listed in the Subaward Agreement is hereby amended from 09/30/2026 to 09/30/2027.

An additional $38,979.00 is awarded to Subrecipient. Accordingly, the "Amount Funded This Action" and "Incrementally Estimated Total" in the Subaward Agreement are both hereby amended from $38,979.00 to $195,603.00.

Attachments A-I, A-II, A-III, B, C, D, and E in the Subaward Agreement are hereby replaced in their entirety with Attachments A-I, A-II, B, C-I, C-II, and D, attached hereto.

All other terms and conditions of this Subaward Agreement remain in full force and effect.

For clarity: all amounts stated in this amendment are in United States Dollars.

By an Authorized Official of PTE	By an Authorized Official of Subrecipient
_____ Date: _____ Dawn M. Geoppinger Subout Grants & Contracts Administrator	_____ Date: _____ Name: Title:

Oregon Center for Children and Youth with Special Health Needs

Introduction

2026-2030 Oregon Title V CYSHCN - National Priorities:

- Medical Home
- Health Care Transition

2026-2030 Oregon Title V CYSHCN - State Priorities:

- Person and Family-Centered Care
- Caregiver Support

Population of Focus – children and youth with special health care needs (CYSHCN):
"Children with special health needs are those who have or are at risk for a chronic physical, developmental, behavioral or emotional condition and who also require health and related services of a type or amount beyond that required by children generally (McPherson, et al., 1998, p. 138)."

Subcontractors are local public health authorities (LPHAs) who agree to:

- adhere to the scopes of work.
- complete services for CYSCHN and their parent/caregiver (if applicable) as described in this contract.
- submit all required deliverables as outlined in Attachment C-II.

Attachment A-II

Oregon Center for Children and Youth with Special Health Needs

SCOPE OF WORK: CaCoon

CaCoon is a relationship and strength-based public health nurse (PHN) home visiting program. CaCoon home visitors partner with families with children and/or youth with disabilities or unique health care needs. They support them to access and coordinate quality healthcare and the community supports they have a right to.

GOALS

- Improve the health and well-being of children and youth with special health care needs (CYSHCN) and their families through public health home visiting.
- Increase families' knowledge, skills and confidence to care for their CYSCHN.
- Partner with families to coordinate care and services for their CYSCHN.

ELIGIBILITY

The Maternal and Child Health Bureau (MCHB) defines children and youth with special health care needs (CYSHCN) as "children who have or are at increased risk for chronic physical, developmental, behavioral, or emotional conditions. They also require health and related services of a type or amount beyond that required by children generally."

CaCoon program services are available to:

- Any child, birth through 20 years of age (up to their 21st birthday), who fits the above definition and has a diagnosis detailed in the "Diagnosis" column of Table 2 in the State Plan Amendment. Public Health Nurses may use their professional judgement if a client has a chronic health condition or disability that is not specifically identified on the list by assigning "Other chronic conditions not listed."
- Parents or primary caregivers of enrolled children or youth. Eligibility is detailed in TCM OARs 410-138-0020 and 410-138-0040 Table 1.
- Children and their families may be seen without regard to economic or insurance status based on local agency policy.

Local programs are encouraged to assess the needs in their community, as well as their program capacity, and target a specific population within the eligibility lists. Please inform the CaCoon consultant of these plans.

Attachment A-II

RESPONSIBILITIES

The subcontractor's Principal Investigator (PI) is responsible for compliance with this subcontract. The PI may designate an alternate (CaCoon Lead) to serve as the principal point of contact with OCCYSHN. Subcontractors will adhere to the standards detailed in the Babies First!/CaCoon Manual and the CaCoon Standards (Attachment C-I). Subcontractors will participate in OCCYSHN's evaluation activities, including:

- Pilot activities: Local implementing agency (LIA) staff will complete a total of two Care Coordination Measurement Tools (CCMTs) and provide feedback to OCCYSHN staff on the tool and process.
- Case studies: Select LIA staff will support case study implementation for up to three CaCoon clients.
- These activities should require 12 hours or less of LIA staff time.

To meet contract requirements, the CaCoon Accountability Report must also be submitted after the end of the fiscal year.

Attachment B

Oregon Center for Children and Youth with Special Health Needs

Use of Allotment Funds [Section 504]

The SUBAWARDEE may use funds for the provision of health services and related activities (including planning, administration, education, and evaluation) consistent with its application. It may also purchase technical assistance if the assistance is required in implementing programs funded by Title V.

Funds may be used for salaries and other related expenses of National Health Services Corps personnel assigned to the State.

Funds may not be used for cash payments to intended recipients of health services or for purchase of land, buildings, or major medical equipment.

Funds may not be provided for research or training to any entity other than a public or non-profit private entity.

Funds may not be used for inpatient services, other than for children with special health care needs or high-risk pregnant women and infants or other inpatient services approved by the Associate Administrator for Maternal and Child Health. Infants are defined as persons less than one year of age.

Funds may not be used to make payments for any item or service (other than an emergency item or service) furnished by an individual or entity excluded under Titles V, XVIII (Medicare), XIX (Medicaid), or XX (Social Services Block Grant) of the Social Security Act.

MCH Block Grant funds may not be transferred to other block grant programs.

All funds must spent in accordance with Title V guidance, OCCYSHN program guidance and Federal Uniform guidance.

Attachment C-I

Oregon Center for Children and Youth with Special Health Needs
CaCoon (CAre COordinatiON) Program

Mission: The Oregon Center for Children and Youth with Special Health Needs (OCCYSHN) improves the health, development, and well-being of all of Oregon's children and youth with special health care needs.

Vision: All of Oregon's children and youth with special health care needs (CYSHCN) are supported by a system of care that is family centered, community-based, coordinated, accessible, comprehensive, continuous, and culturally competent.

Population of Focus – Children and Youth with Special Health Care Needs (CYSHCN):
The federal Maternal and Child Health Bureau defines children with special health needs as "those who have or are at increased risk for a chronic physical, developmental, behavioral or emotional condition and who also require health and related services of a type or amount beyond that required by children generally." (McPherson, M., Arango, P., Fox, H. et al. (1998). A new definition of children with special health care needs. *Pediatrics* 102:137-140.)

CaCoon Program:
CaCoon is a statewide public health program that provides community-based care coordination through registered nurse home visiting for families with CYSHCN.

CaCoon Program Eligibility:
CaCoon program services are available to:

- Any child, birth through 20 years of age (up to their 21st birthday), who fits the above definition and has a diagnosis detailed in the "Diagnosis" column of Table 2 in the State Plan Amendment. Public Health Nurses may use their professional judgement if a client has a chronic health condition or disability that is not specifically identified on the list by assigning "Other chronic conditions not listed."
- Parents or primary caregivers of enrolled children or youth. Eligibility is detailed in TCM OARs 410-138-0020 and 410-138-0040 Table 1.
- Children and their families may be seen without regard to economic or insurance status based on local agency policy.

Local programs are encouraged to assess the needs in their community, as well as their program capacity, and target a specific population within the eligibility lists. Please inform the CaCoon consultant of these plans.

CaCoon Standards:

1. Establish and maintain a triage system that prioritizes CaCoon services for the most vulnerable children and youth with special health care needs.

2. In situations where home visiting services are unavailable for a referred individual, at a minimum:

- Ensure the client/family has access to a primary care medical home.
- Notify the referral source that CaCoon services will not be provided and provide rationale for denial.

3. Contact with family is initiated preferably within three (3) business days (up to ten (10) business days, if needed) of receiving the referral.

4. Collaborate with the client's broader care team* to assess the following:
   - Client/family's strengths, needs, and goals.
   - Client/family's health literacy status, and related health-related learning needs.
   - Client's functional status and limitations and ability for activities of daily living, and participating in school and recreation.
   - Ensure appropriate screenings and referrals regarding physical, developmental, mental and behavioral health, and oral health as per American Academy of Pediatrics Bright Futures guidelines, in coordination with primary and subspecialty health care providers.
   - Access to primary and needed subspecialty health care providers, therapies and social supports.
   - Access to supportive medical and/or adaptive equipment and supplies, e.g. suction machine, wheelchair, medications, formula, and feeding tube.
   - Screening regarding Social Determinants of Health as per American Academy of Pediatrics Bright Futures guidelines.
   - Client/family's emergency and disaster preparedness planning.
   - For youth aged 12 years and older, assess youth and family preparedness for transition to adult health care, education, work, and independence.
   - Client/family's satisfaction regarding services they receive.

5. In partnership with the client/family and the broader care team*, nurses serving CaCoon clients will develop a nursing plan of care which:
   - Addresses identified needs.
   - Includes goals, progress notes, and plans for discharge from CaCoon services.
   - Addresses access to appropriate care, services and resources.
   - Demonstrates evidence of effective cross-systems care coordination, including:
     - Timely and appropriate referral to needed services and community resources.
     - Identification and problem-solving around barriers to referral follow-up.
     - Identification and elimination of redundancy of services.
     - Timely and informative updates that are shared with appropriate members of the broader care team*, including the primary care provider and the family.
   - Demonstrates evidence of client/family-centeredness, including:
     - Strategies to increase the client/family's health literacy capacity (e.g. how to obtain, process, and understand health information to facilitate informed decision about health care).
     - Client/family partnership.

    - Interventions that increase the client/family's capacity to implement the nursing plan of care, e.g. caregiver support, teaching, and provision of anticipatory guidance.
  - Ensures cultural and linguistic sensitivity and responsiveness.
  - Provides for visits that are sufficient in frequency and length to achieve the goals outlined in the care plan.
  - Anticipates and supports youth transition to adult health care, work, and independence.
  - Is re-evaluated as required with changing circumstances, but at least every six months.

6. Collect required data on client visits and enter it into the state-designated data system (THEO) within ten (10) business days of visiting the client.

7. CaCoon staff and supervisor(s) actively participate in education that improves their CaCoon practice:
   - New staff should complete the Babies First!/CaCoon Orientation Checklist and attend the Babies First!/CaCoon Virtual Orientation (which takes place in June and December of each year).
   - All CaCoon staff should attend their annual OCCYSHN Regional Meeting.
   - All CaCoon staff should attend the monthly Nurse Home Visiting Community of Practice.

8. Designate a CaCoon Lead. The CaCoon Lead has the skills and authority to lead the CaCoon program, assure accountability for contracted responsibilities, and to be the key point of contact with OCCYSHN. The CaCoon Lead submits the Annual CaCoon Accountability Report and the Shared Care Planning End-of-Year Report, if applicable.

**In addition to the primary care provider and the family, the broader health care team for CYSHCN may include:*

- ✓ *Childcare and/or respite care*
- ✓ *Community Connections Network (CCN)*
- ✓ *Dentist/Orthodontist*
- ✓ *Department of Human Services – Child welfare*
- ✓ *Developmental Disabilities (DD) Services*
- ✓ *Durable medical equipment agency*
- ✓ *Early Intervention/ Early Childhood Special Education (EI/ECSE)*
- ✓ *Emergency medical services*
- ✓ *Exceptional Needs Care Coordinator (ENCC) at the Coordinated Care Organization (CCO)*
- ✓ *Family to Family (F2F) or other family support organization*
- ✓ *Housing supports*
- ✓ *Medical specialists*
- ✓ *Mental health services*
- ✓ *Occupational therapy*
- ✓ *Pharmacy*

- ✓ *Physical therapy*
- ✓ *School systems, including special education*
- ✓ *Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)*
- ✓ *Speech therapy*
- ✓ *Supplemental Security Income (SSI)*
- ✓ *Transportation supports*

Attachment C-II

Local Health Department (LHD) Deliverables Checklist: CaCoon

Done	Due Date/Prompt	Item	Subcontractor Responsibility
	After subcontract is fully executed	**First Invoice**	Subcontractor submits **signed** invoice to spasub@ohsu.edu after contract execution.
	By 12/15/26	**OCCYSHN Evaluation Activities**	Subcontractor's required staff participate in CaCoon Evaluation Pilot Activities.
	By 09/30/27	**OCCYSHN Evaluation Activities**	Subcontractor's required staff participate in CaCoon Evaluation Case Studies.
	09/30/27	**FY25 Contract Period ends**	
	By 11/5/27	**CaCoon Accountability Report**	Unique weblink to be sent to CaCoon Lead in September 2027. Lead completes report and submits via Qualtrics.
	By 11/15/27	**Final Invoice with Certification of Completion**	Final Invoice with Certification of Completion to be emailed to subcontractor in September 2025. Subcontractor submits **signed** final invoice to spasub@ohsu.edu. Must be labeled **FINAL.**

Attachment D

Clackamas County
FY27 Activity Breakdown and Payment Schedule

Clackamas County

CaCoon Base Funding	CaCoon Formula Funding	Total Subcontract
$10,000.00	$28,979.00	$38,979.00

This subcontract will be paid in the following installments:

	Direct Costs	Indirect Costs	Total Costs
LHD to invoice OHSU an initial 60% as soon as subcontract is fully executed	$21,261.27	$2,126.13	$23,387.40
LHD to invoice OHSU the FINAL 40% after LHD has submitted all required deliverables	$14,174.18	$1,417.42	$15,591.60
Total Funding	$35,435.45	$3,543.55	$38,979.00