#### CLACKAMAS COUNTY BOARD OF COUNTY COMMISSIONERS

#### Policy Session Worksheet

Presentation Date: October 28, 2025 Approx. Start Time: 1:30pm Approx. Length: 30 Min

**Presentation Title:** Recovery Oriented System of Care Framework

**Department:** Health, Housing, and Human Services (H3S)

Presenters: Mary Rumbaugh, Director of Health, Housing, and Human Services

#### WHAT ACTION ARE YOU REQUESTING FROM THE BOARD?

None, Informational Only.

#### **EXECUTIVE SUMMARY:**

In April 2025, Commissioner West presented to the Board of County Commissioners a memo (see Attachment A) outlining Recovery Policies in a Care Continuum Framework. During the discussion of the memo, the Board asked H3S staff to review the department's current programming and service delivery system within this framework and provide the commissioners with these details.

H3S services within the framework span the services continuum:

- Prevention and Early Intervention
- Housing with Accountability and Readiness
- Substance Use and Mental Health Treatment Continuum
- Reentry and Workforce Readiness
- Criminal Justice and Public Safety Reforms
- Economic and Policy Reforms
- Aging and End-of-Life Care
- Changing Public Perception and Policy Momentum

In May 2025, H3S provided a written response to the framework (see Attachment B) and included the services and activities either provided by or funded through H3S that currently support the proposed framework.

#### FINANCIAL IMPLICATIONS (current year and ongoing):

Is this item in your current budget?	⊠X YES	□NO
What is the cost? \$ Varies across	divisions	

What is the funding source? Primarily grants (federal and state), State Medicaid, Metro Supportive Housing Services (SHS) and some County General Fund.

#### **STRATEGIC PLAN ALIGNMENT:**

How does this item align with your Department's Strategic Business Plan goals?

This item aligns with the following Department strategic priorities:

- Assist individuals and families in need to be healthy and safe
- Increase self-sufficiency
- Increase community safety and health
- Continually improve the efficiency and effectiveness of services
- How does this item align with the County's Performance Clackamas goals?

This item aligns with the County strategic priorities:

- Healthy People
- Safe, secure and livable communities
- o Public trust in good government

#### **LEGAL/POLICY REQUIREMENTS: N/A**

#### **PUBLIC/GOVERNMENTAL PARTICIPATION: N/A**

**OPTIONS:** None, Informational Only.

**RECOMMENDATION:** None, Informational Only.

#### **ATTACHMENTS:**

Attachment #A: Commissioner West's Memo to the BCC Attachment #B: H3S Services within a Recovery Framework

Attachment #C: Presentation Slides

#### **SUBMITTED BY:**

Division Director/Head Approval	
Department Director/Head Approval	Mary Rumbaugh via email 10.21.25
County Administrator Approval	

For information on this issue or copies of attachments, please contact Mary Rumbaugh @ 503-406-7005

#### **MEMORANDUM**

TO: Metro, Tri County Partners, Stakeholders

FROM: Ben West, MSN, BSN, RN

Clackamas County Commissioner, Metro President Work Group Co-Chair

**DATE: April 15, 2025** 

RE: Recovery Policies in a Care Continuum Framework

I drafted the below overview as an individual commissioner, informed by my experience as a registered nurse, public servant and policy maker. Ultimately, it comes down to the truth that we are all called to care. This is an overview of a continuum of care system that addresses homelessness through the lens of recovery policy. In 2023 the Clackamas County Board of County Commissioners adopted a resolution "Supporting a Recovery Oriented System of Care in Responding to the Addictions, Mental Health and Homelessness Crisis." I have tried to capture in the outline the holistic approach of this work.

This is not an all-inclusive list, nor an inventory of all of Clackamas County's programming. The funding sources and policies are complex and are not totally controlled by local jurisdictions.

This document is an illustration to start a regional conversation. What parts resonate with you? What do you see in your system already? What elements are missing? What is key to a functional, balanced, coordinated system?

#### **Core Philosophy**

Homelessness is not a one-size-fits-all problem, and solutions must be tailored to different populations based on their needs, capabilities, and willingness to engage with services. This plan integrates housing, treatment, accountability, economic incentives, and workforce sustainability to create a holistic, results-driven approach.

#### 1. Prevention & Early Intervention

- A. Diversion for Situational Homelessness
  - Expand emergency rental assistance, mediation services, and targeted support to prevent people from entering homelessness due to temporary crises (job loss, medical bills, eviction).
  - Implement real-time assessment and service matching at eviction courts and crisis response centers.
- B. Addressing "Treat Them and Street Them" in ERs
  - Shift hospital discharge policies to prevent premature discharges of homeless individuals with untreated medical conditions.
  - Create dedicated recuperative care centers to provide short-term medical stabilization before placement in housing or treatment programs.

• Implement hospital partnerships to coordinate care with shelter systems and long-term support services.

#### 2. Housing with Accountability & Readiness

#### A. Tiered Housing Model

- Rapid Rehousing (RRH): For individuals with temporary setbacks who can maintain housing with minimal support.
- Transitional & Sober Housing: For those needing structure before moving to independent living.
- Permanent Supportive Housing (PSH): For the chronically homeless who require long-term case management and services.
- Secured Psychiatric Care: For individuals with severe mental illness who are incapable of self-sufficiency.

#### B. Housing Readiness Programs

- Implement behavioral, mental health, and addiction recovery readiness programs before housing placement.
- Provide structured pathways from shelter to housing, with increasing responsibility and independence.

#### C. Oversight & Retention Strategies

- Require case management check-ins and participation in services for individuals in supportive housing.
- Establish housing retention programs that help tenants develop life skills, financial literacy, and conflict resolution strategies.

#### 3. Substance Abuse & Mental Health Treatment Continuum

#### A. Full-Spectrum Addiction Treatment

- Detox → Inpatient → Intensive Outpatient Plan → Sober Living → Therapeutic Communities
- Ensure seamless transitions between levels of care to prevent relapse.
- Expand access to Medication-Assisted Treatment (MAT) for opioid addiction while integrating behavioral therapy.

#### B. Secured Psychiatric Care for the Severely Mentally III

- Redefine "harm to self and others" to include chronic self-neglect and inability to function. (2025 legislation HB 2467, SB 171)
- Establish long-term psychiatric care facilities for those unable to live independently.

#### C. Crisis Stabilization & Recuperative Care

 Create crisis response centers to stabilize individuals in psychiatric or addiction crises. • Implement recuperative care programs to help medically fragile individuals recover before being placed in housing or programs.

#### 4. Reentry & Workforce Readiness

#### A. Extended & Tiered Reentry Programs

- Implement stair-step reintegration programs for individuals leaving incarceration, treatment, or street life.
- Provide transitional housing, workforce training, and structured mentorship.

#### B. Job Matching & Workforce Development

- Conduct meaningful assessments to place individuals in jobs suited to their skills and abilities.
- Establish apprenticeship programs, job training, and business partnerships.

#### 5. Criminal Justice & Public Safety Reforms

#### A. Expanding the Intercept Model

- Divert individuals into mental health and addiction treatment before incarceration.
- Expand specialty courts (drug court, mental health court, veterans court) to provide structured alternatives to jail.

#### B. Addressing Chronic Offenders

- Establish a specialized program for individuals with repeated low-level offenses tied to homelessness, addiction, or mental illness.
- Require structured rehabilitation instead of repeated incarceration.

#### 6. Economic & Policy Reforms

#### A. Addressing Welfare Benefits

- Reform benefit structures to provide gradual phase-outs instead of sudden cutoffs that discourage employment.
- Allow individuals to keep some benefits while earning income to encourage upward mobility.

#### B. Property Compensation for Frontline Workers

- Increase salaries and benefits for shelter staff, outreach teams, and program workers.
- Implement financial incentives and mental health support for workers to reduce burnout and turnover.

#### 7. Aging & End-of-Life Care

#### A. Homeless Hospice & Nursing Homes

 Develop specialized facilities for elderly and terminally ill homeless individuals. Partner with healthcare providers to ensure dignity in care.

#### 8. Changing Public Perception & Policy Momentum

#### A. Public Messaging & Narrative Shift

- Frame homelessness solutions around accountability, public safety, and economic benefits, not just compassion.
- Highlight success stories of tiered solutions and structured programs.

#### B. Grassroots Education & Political Engagement

- Mobilize community stakeholders through education campaigns.
- Engage policymakers with data-driven success models to push for funding and policy changes.

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#### **IMPLEMENTATION ROADMAP - Where to Start**

#### Phase 1 (0-2 Years): High-Impact, Low-Resistance Changes

- Establish diversion programs for situational homelessness.
- · Pilot recuperative care centers to reduce ER cycling.
- · Launch structured reentry programs with workforce pathways.
- Expand crisis stabilization and intercept model for specialty courts.

#### Phase 2 (3-5 Years): Structural Policy Reforms

- Implement tiered housing models with accountability measures.
- Reform benefit systems to remove welfare traps.
- Increase wages and support for frontline homeless service workers.

#### Phase 3 (5+ Years): Long-Term Systemic Change

- Develop secured psychiatric care for the severely mentally ill.
- Expand homeless hospice and long-term care facilities.
- Fully integrate structured addiction recovery pipelines.

#### **Final Thoughts**

This plan offers a balanced, structured, and realistic approach to homelessness that prioritizes prevention, accountability, economic incentives, and sustainability. By integrating housing with behavioral readiness, workforce development, and long-term care, we can create a scalable and results-driven model that addresses homelessness holistically and effectively.

The challenge is not just funding but shifting public perception, aligning policy with reality, and creating a system that empowers people rather than enabling cycles of failure.

The next step? Pilot this model in a targeted city or region and measure the outcomes—proving that real solutions require more than just housing.

#### **Recovery Policies in a Care Continuum Framework**

#### H3S funds the following services/supports:

Prevention & Early Intervention: A. Diversion for Situational Homelessness B. Addressing "Treat Them and Street Them" in ERs	<ul> <li>24/7 Crisis &amp; Support Line</li> <li>Street outreach</li> <li>Eviction prevention mediation (aka Landlord Tenant Mediation)</li> <li>Coordinated Housing Access (CHA)</li> <li>Resource Navigation</li> <li>Short Term Rental Assistance</li> <li>Elderly Rent Assistance</li> <li>Tenant's Rights and Resources</li> <li>Clackamas County Stabilization Center</li> <li>Youth substance use prevention</li> <li>Community Awareness &amp; Education (campaigns, community presentations, naloxone trainings)</li> <li>Safer prescribing of pain medications/alternative pain management</li> <li>Naloxone distribution (overdose prevention)</li> <li>Safe disposal and storage of medication/drugs</li> </ul>
Housing with Accountability & Readiness:  A. Tiered Housing Model  B. Housing Readiness Programs  C. Oversight & Retention Strategies	<ul> <li>Transitional Housing         <ul> <li>Veterans Village</li> <li>Clackamas Village</li> </ul> </li> <li>Serenity &amp; Haven Houses</li> <li>Transcending Hope house (10 Aid &amp; Assist beds)</li> <li>Motel Transitional Housing</li> <li>Seasonal Shelters</li> <li>Hotel/Motel Vouchers</li> <li>Facility-Based Shelters</li> <li>Rapid Rehousing</li> <li>Recovery Housing</li> <li>Veteran's Rental Assistance Program</li> <li>Bridges to Change Stabilization Housing</li> <li>Regional &amp; State Long-Term Rental Assistance</li> <li>Permanent Supportive Housing</li> <li>Housing Case Management</li> <li>Federal Housing Vouchers</li> <li>Affordable Housing</li> <li>Family Self-Sufficiency Programs</li> </ul>
Substance Abuse & Mental Health Treatment Continuum A. Full-Spectrum Addiction Treatment B. Secured Psychiatric Care for the Severely Mentally III	<ul> <li>Naloxone Distribution</li> <li>Withdrawal Management (detox)</li> <li>Outpatient Substance Use Treatment</li> <li>Medication Assisted Treatment</li> <li>Peer Recovery Services</li> <li>Clackamas County Stabilization Center</li> </ul>

C. Crisis Stabilization & Recuperative Care	<ul> <li>EMS/First Responder Buprenorphine and Naloxone initiatives</li> <li>Syringe Service Programs (SSPs) for prevention of disease transmission, overdose prevention, and connection to other primary and behavioral health services</li> <li>Recovery supports for overdose survivors         <ul> <li>Project Hope -partners with community paramedics, AMR, Fire</li> <li>Peer Recovery mentors</li> <li>Case Management</li> <li>Linkages to care and services</li> </ul> </li> <li>Mental Health (MH) Referral services</li> <li>24/7 Crisis &amp; Support Line</li> <li>24/7 Mobile Crisis Response</li> <li>Mental Health Navigation</li> <li>Involuntary Commitment Program (ICP)</li> <li>Outpatient Mental Health services</li> <li>Population specific MH services</li> </ul>
	<ul> <li>Population specific MH services</li> <li>Psychiatric Services</li> <li>School-based Mental Health services</li> <li>Licensed Mental Health Residential Treatment Homes</li> </ul>
	<ul><li>and facilities*</li><li>Licensed Adult Foster Homes*</li><li>Respite Services</li></ul>
	<ul> <li>Urgent Mental Health Walk-In Center</li> <li>Postvention (survivors of suicide loss)</li> <li>*County does not directly fund licensed residential services, but does provide coordination of referrals, and care coordination for residents.</li> </ul>
Reentry & Workforce Readiness A. Extended & Tiered Reentry Programs B. Job Matching & Workforce Development	<ul> <li>Employment/ Workforce Services</li> <li>Second Chance employment/workforce services (in County Jail)</li> <li>Supported Employment (fidelity, by outpatient providers)</li> </ul>
Criminal Justice Interventions & Public Safety Reforms A. Expanding the Intercept Model B. Addressing Chronic Offenders	<ul> <li>Criminal record expungement</li> <li>Specialty courts such as drug court, family treatment court and mental health court</li> <li>Jail Discharge/Diversion care coordinators</li> <li>Restorative program for juvenile offenders</li> <li>Medication for Opioid Use Disorder (MOUD) in jail</li> <li>Programs like Clackamas Substance Abuse Program (CSAP)</li> <li>Programs like Clackamas County Jail Program (CCJP)</li> <li>Programs like Clackamas Transition Center</li> </ul>
Economic & Policy Reforms  A. Addressing Welfare Benefits  B. Property Compensation for  Frontline Workers	OHA Workforce Incentives grant

Aging & End-of-Life Care	Money Management
A. Homeless Hospice & Nursing Homes	Senior Council Guardianship Program
	SHIBA
	Senior Companion Program
	Older Adult Behavioral Health Specialist (and Older Adult
	peers)
	Medical Respite Pilot Program
	Utility Support (Energy Assistance)
Changing Public Perception & Policy	Youth-focused substance use prevention
Momentum	Coalition-building (Clackamas Community Alliance,
A. Public Messaging & Narrative Shift	Clackamas County Prevention Coalition)
B. Grassroots Education & Political	Board appointed advisory councils across H3S (including
Engagement	BHD's Mental Health and Addictions Council) that
	address stigma and messaging across the County, and
	include representatives with lived experience



## Health, Housing & Human Services

POLICY SESSION: PROPOSED RECOVERY ORIENTATED FRAMEWORK

October 28, 2025 Mary Rumbaugh, H3S Director

# Prevention & Early Intervention – diversions for situational homelessness, addressing "treat them and street them" policy in ER's

- Street Outreach
- Resource Navigation
- Short term rental assistance
- Eviction Prevention
- Stabilization Center





## Housing with Accountability & Readiness - tiered housing model, housing readiness programs, oversight & retention strategies

- Transitional housing
- Rapid Rehousing
- Recovery Housing
- Permanent Supportive Housing
- Housing Case Management



Substance Abuse & Mental Health Treatment Continuum-full-spectrum addiction treatment, secured psychiatric care for the severely mentally ill, crisis stabilization & recuperative care

- Withdrawal Management (detox)
- Outpatient Substance Use Treatment
- Stabilization Center
- Involuntary Commitment Program (ICP)
- Licensed Mental Health Residential Treatment Homes and facilities

# Reentry & Workforce Readiness - extended & tiered reentry programs, job matching & workforce development

- Employment/ Workforce Services
- Second Chance employment/workforce
  - services (in County Jail)
- Supported Employment



# Criminal Justice Interventions & Public Safety Reforms - expanding the Intercept Model, addressing chronic offenders

- Specialty courts such as drug court, family treatment court and mental health court
- Jail Discharge/Diversion care coordinators
- Medication for Opioid Use Disorder (MOUD) in jail

## Economic & Policy Reforms - addressing welfare benefits, property compensation for frontline workers

### **H3S Services and Supports**

OHA Workforce Incentives grant

### Aging & End-of-Life Care - homeless hospice & nursing homes



- Senior Council Guardianship Program
- Older Adult Behavioral Health Specialist (and Older Adult peers)
- Medical Respite Pilot Program

Changing Public Perception & Policy Momentum - public messaging & narrative shift, grassroots education & political engagement

- Coalition-building
- Board appointed advisory councils



## **Current System Gaps**

- Lack of services in rural communities
- Access and availability across almost all services
- Inadequate investment (state and local)
- Competing priorities
- Overnight shelter

## What's Next?

- Focus on what is working well
- Understand the role of County versus State
- Alignment with BCC's Strategic Plan