MEASURE 57 SUPPLEMENTAL FUNDS COVER PAGE

COUNTY NAME: Clackamas County

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2025-2027 M57 Supplemental Funds
Intervention Program Budget Summary

Program Expenses (please be detailed)	**23-25 M57 Supplemental Funds Carryover**	**25-27 M57 Supplemental Funds**	**Other State Funds**	**County/Local Funds**	**Total**
A. Supervision Related Personnel Costs Salaries and wages 1 FTE - Community Corrections Officer 2 - 1 FTE Community Corrections Counselor 1 FTE Human Services Assistant Payroll taxes and benefits		$861,210.12	$4,016,474.86	$2,963,738.52	$7,841,423.50
B. Materials and Services Vehicles & Fuel Residential Expenses: Room & Board — UA kits/labwork Janitorial/Laundry — Books Client Support Services — Office Supplies Building Maintenance — Allocated Costs		$98,886.88	$2,450,493.04	$1,017,861.96	$3,567,241.88
C. Treatment Provider and/or Contracted Professional Services A&D Special Services: 5.0 MH Specialists 160 hours/wk consultation Group Treatment Nurse/medical services Psych/med reviews MAT					
D. Sanction Costs *(by type)*					
E. Capital Outlay and Start-Up Costs					
Total		$960,097.00	$6,466,967.90	$3,981,600.48	$11,408,665.39

Program Description

Participant population to be served: M57 funds are requested by the Clackamas County Sheriff's Office (CCSO) to continue supporting and enhancing the Clackamas Substance Abuse Program (CSAP), which serves medium to high risk justice-involved men and women who meet criteria for substance use disorder. Over the past year, 19% of CSAP clients were Drug Court participants and 64% of all clients were downward departure probation cases and. 100% of Measure 57 funds received by CCSO are allocated to CSAP.

Program design, duration, and intensity:
CSAP provides residential treatment for both men and women, however, each gender is provided their own living and treatment space. This allows for gender responsive treatment and services to be provided for participants. All CSAP staff are trained in trauma informed care and cultural responsivity is considered in the development of inclusive group norms, staff interactions, and the delivery of CSAP curriculum.

While several approaches are used to address the criminal thought process, "Criminal Conduct & Substance Abuse Treatment" by Doctors Harvey Milkman & Kenneth Wanberg is the core curriculum and provides the foundation for CSAP's interventions. Individual counseling and therapy are provided, but the majority of interventions and work for participants is done in group settings, with an average of 32 hours of structured time provided each week.

CSAP consists of 4 distinct phases that align with the stages of change individuals tend to be in as they enter and progress through the program. The first 2 phases, known as Challenge to Change, and Commitment to Change, include interventions designed to address participants' belief structure that has led them to their criminality and substance abuse. At phase 3, known as Ownership of Change, individuals begin to make their transition back into the community. At this time, clients begin working for employers in the community and/or attend school, and attend community support meetings, all while continuing to build addiction recovery skills and relapse prevention planning in preparation for the 4th and final phase, known as Continuing Care / Action of Change, or aftercare.

On average, participants spend approximately 45 weeks in-house before transitioning back into the community. In phase 4, clients transition to living in recovery housing but return to the program to continue attending groups. During all phases, clients participate in random urine drug screens and are held accountable to their results.

The CSAP program is unique as clients transition through the program at their own pace and must demonstrate they are able to put into practice the skills being taught at CSAP. Participants must spend a minimum of 6 months in aftercare before they are eligible to graduate. While in aftercare clients are still attending groups and meeting with therapist for one-on-one counseling. Moreover, clients are frequently tested to ensure they are maintaining sobriety while in the community. Additionally, there is an alumni group, where clients continue to connect with peers and staff. This allows clients to continue to receive support even after they have graduated from the program.

Sanctions / Rewards: There are a wide array of both sanctions and rewards which can be used at CSAP. Sanctions include verbal and written warnings. Incident reports can be written on a client which usually include more severe consequences such as sanction time around the facility or community service on the work crew. In extreme cases a short jail sanction or termination from the program are used as a last resort. However, CSAP strives to use cognitive-behavioral interventions whenever possible. For example, it is not uncommon for a client to receive additional treatment work because of behavior. This work is individualized and aimed at addressing specific thinking errors, or core values and beliefs of the client, which are not aligned with social norms. Once the client completes the additional treatment work it is reviewed with either a clinician or a corrections counselor. After reviewing the work, the therapist / counselor can develop a plan to help support the client in addressing these issues as the client continues to progress in the program.

At times, when a client's behavior is more serious, the client may be moved to a previous phase of the program. While this is a consequence, it is not meant to be punitive, rather to address things which the client may have not fully grasped before moving to the next phase. The goal in moving a client back is to ensure that they have all the tools the need to be successful as the move through the program and eventually back to the community.

There are also several different incentives and rewards offered for CSAP participants through a contingency management program. Client earns "red tickets" to use a currency in a store operated by CSAP. In the past these tickets were earned by completing extra chores, helping in the kitchen etc. However, we have recently revamped this program. It is now all based on progress in treatment. For example, if a client phases up they are awarded tickets. Other things include

completing steps in Moral Reconation Therapy (MRT), following through with the steps of their behavioral change plans, treatment assignments and completing treatment goals. This shift has allowed clients to earn reinforcers by completing work that will be beneficial to their long-term change process.

The program offers additional reinforcers of behavior, such as outside activities organized by staff. These can include fishing trips, beach trips, golfing, going to see holiday lights, attending sporting events and attending culture-specific events. Clients must be taking steps to complete their treatment objectives, even if they are just beginning treatment. Clients are also allowed to go on social passes with family and friends after they have moved to phase two and are maintaining good standing. These passes can be removed if the client receives certain program violations.

Collaborations: CSAP has been in operation for over 25 years, working closely with the Clackamas County District Attorney's Office, the Clackamas Indigent Defense Corporation (Public Defenders) and the Circuit Court to identify individuals who meet criteria for CSAP, providing an alternative to incarceration and reducing prison usage.

As CSAP is part of CCSO, there is a strong working relationship with the Clackamas County Jail. CSAP staff are running pretreatment groups within the jail for both male and female Adults in Custody (AIC). These groups begin to show AIC that there is a different way to think. AIC begin to identify their criminal thinking and how this thinking impacts their behavior. Moreover, these pre-treatment groups have served as a gateway to have individuals enter the CSAP program. When there is a question how one might do in CSAP and they have been screened for CSAP, they can be moved in to pre-treatment groups. This allows CSAP staff to work with AIC and get a better sense how they will meet the expectations of CSAP.

There is also a relationship with the medical staff of the jail. This ensures a smoother process for those transferring from jail to CSAP. AIC are released with their needed medications, and community health has already connected with the individual to assure continuity of care once released.

CSAP also partners with community-based organizations in the area, including Bridges to Change, Mental Health and Addiction Association of Oregon, and 4D Recovery who provide a continuum of recovery support including housing, mentoring, community support groups, and transportation. CSAP has expanded collaboration with Clackamas County Health Centers, who provide 5 licensed clinicians to deliver services within the program. Health Centers also send a therapist to CSAP 1 day per week where they meet with clients in treatment to discuss Medication Assisted Treatment (MAT) and any other medical or dental needs. CSAP staff consult with Health Center representatives and the office of the Clackamas County Medical Director for assistance in navigating issues relating to MAT, other forms of health care, and accessibility issues.

HB 4002 impacts: CSAP has not experienced significant changes relating to HB 4002 thus far. CSAP has a great working relationship with our jail medical staff and clients enter the program either with actual medication or a prescription to have their medication filled. While at CSAP, clients are able to attend medical appointments with their own medical providers and/or can use Clackamas County Health Centers. Health Center staff coordinate services well with CSAP and assist with medication management.