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Clackamas County
www.clackamas.us

September 10, 2026.

BCC Agenda Item: _____

Board of County Commissioners
Clackamas County

Approval of Amendment #1 to a Personal Services Contract with The Father's Heart Street Ministry for a homeless medical respite housing pilot program. Amendment value is

\$925,303.25. Total Agreement Value is \$1,208,836.25 for 2 years. Funding is through Supportive Housing Services funds.

Previous Board Action/Review: No County General Funds are involved.

Original September 4, 2025 – BCC 20250904 IV.H.8

Performance Clackamas: Ensure safe, healthy, and secure communities. **Counsel Review:** Yes: Andrew Naylor
Contact Person: Vahid Brown

Procurement Review: N/A
Contact Phone: 971-334-9870

EXECUTIVE SUMMARY: The Housing and Community Development Division (HCDD) of the Health, Housing & Human Services Department requests approval of Amendment #1 to a Contract (#12213) with The Father's Heart Street Ministry for implementation of a Medical Respite pilot program.

Medical Respite care is acute and post-acute care for people experiencing homelessness who are not ill enough to remain in a hospital but are too ill to recover on the streets. Medical respite programs provide shelter, food, and medical care to participants, enabling them to heal and recover for 1-3 months, resulting in improved health and housing outcomes. This Amendment enables The Father's Heart to implement Phase II of the pilot program, which includes the provision of nursing support and administration in designing and implementing a Medical Respite program in partnership with County staff. The pilot will initially have five Medical Respite beds, with the long-term goal of increasing to 20 Medical Respite beds in Clackamas County.

Phase II of this pilot program will utilize \$925,303.25 in SHS funds to cover start-up costs; however, County staff are collaborating with regional partners to secure long-term funding for Medical Respite, ideally through Medicaid funding. No County General Funds are involved.

RECOMMENDATION: Staff respectfully requests that the Board of County Commissioners approve Amendment 1 to this Contract (12213) with The Father's Heart and authorize Chair Roberts, or his designee, to sign on behalf of Clackamas County.

Respectfully submitted,

Mary Rumbaugh
Director of Health, Housing and Human Services

AMENDMENT #1
TO THE CONTRACT DOCUMENTS WITH THE FATHER’S HEART STREET
MINISTRY FOR MEDICAL RESPITE PROGRAM
Contract #12213

This Amendment #1 is entered into between The Father’s Heart Street Ministry (“Contractor”) and Clackamas County (“County”), on behalf of its Housing and Community Development Division of the Health, Housing and Human Services Department, and shall become part of the Contract documents entered into between both parties on September 4, 2025 (“Contract”).

The Purpose of this Amendment #1 is to make the following changes to the Contract:

1. ARTICLE I, Section 2. **Scope of Work** is hereby amended as follows:
Contractor shall perform the additional Work described in **Exhibit A to this Amendment #1**, attached hereto and incorporated by this reference herein.
2. ARTICLE I, Section 3. **Consideration** is hereby amended as follows:
In consideration for Contractor performing additional Work during the term of this Contract, County shall pay Contractor an amount not to exceed \$925,303.25.

Consideration is on a reimbursement basis in accordance with the revised budget set forth in **Exhibit B to this Amendment #1**, attached hereto and incorporated by this reference herein. The total Contract compensation will not exceed \$1,208,836.25.

Budget line items within categories may be changed with written agreement by both parties. County may approve, in writing, adjustments to budget line item amounts provided the maximum Contract amount is not exceeded.

ORIGINAL CONTRACT	\$ 283,533.00
AMENDMENT #1	\$ 925,303.25
TOTAL AMENDED CONTRACT	\$ 1,208,836.25

3. ARTICLE I, Section 4. **Invoices and Payments** is hereby amended to add the following:

The County, at its sole discretion, may provide quarterly advances to Contractor (“Advanced Funds”). The advance amount may vary based on past spending and revenue, as reported via monthly reconciliation statements submitted by Contractor.

In lieu of monthly invoices, Contractor will submit monthly reconciliation statements showing spending and program revenue, due the 15th of the following month.

Contractor may only use the Advanced Funds for purposes of paying Contractor’s eligible expenses incurred between the effective date of the Contract and when Contractor’s first monthly reconciliation statement is submitted.

For the month of the contract year when advanced funds are fully spent down, which is anticipated to be May or June, Contractor shall submit a final reconciliation statement that details the use of the remaining Advanced Funds, if any. If the Advanced Funds do not fully cover eligible Work performed by Contractor, Contractor shall submit an invoice for the remaining amounts owed. The invoice amount shall be reduced by the remaining Advanced Funds.

If there are any Advanced Funds remaining after the final reconciliation statement is submitted and no further amounts are owed to Contractor for Work performed, or if the Contract is terminated prior to expiration of its term for any reason, the remaining Advanced Funds must be returned to County within ten (10) business days of the termination date of the Contract.

Prior to County advancing the Contractor the Advanced Funds, Contractor must submit an advance request, in a form acceptable to the County, that details the amount of Advanced Funds requested, the specific purposes for which the Advanced Funds will be used, and such other information as the County may require.

If the Advanced Funds request is approved by the County, County will issue payment of the Advanced Funds within 30 days of approval.

Advanced Funds do not increase the maximum compensation amount set forth above. Contractor shall not submit invoices for, and County will not be obligated to pay, any amount in excess of the maximum compensation amount set forth above.

The Advanced Funds are not intended to be used to expand the Work beyond the eligible expenses incurred for the ninety-day period in accordance with the terms of this Contract.

Contractor's use of Advanced Funds for any purpose not expressly permitted by this Contract, or failure to return Advanced Funds in accordance with the provisions above, constitutes a misuse and is a breach of the Contract. Upon such breach, and in addition to any other right or remedy provided at law, in equity, or in this Contract, County may require Contractor to immediately repay all or a portion of the Advanced Funds, terminate the Contract, and/or reduce any pending invoice for Work performed by the amount of misused Advanced Funds.

[Signatures in the following page]

Except as expressly amended above, all other terms and conditions of the Contract shall remain in full force and effect. By signature below, the parties agree to this Amendment #1, effective upon the date of the last signature below.

The Father's Heart Street Ministry

Clackamas County

Brandi Johnson 08/05/2026

Authorized Signature Date

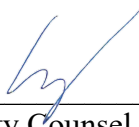
Brandi Johnson, Executive Director
Printed Name

Signature Date

Name: _____

Title: _____

Approved for Legal Sufficiency:

 08/06/2026

County Counsel Date

EXHIBIT A
PERSONAL SERVICES CONTRACT
SCOPE OF WORK

County is implementing a Medical Respite program. Medical respite care is acute and post-acute care for people experiencing homelessness who are not ill enough to remain in a hospital but are too ill to recover on the streets. County is engaging Contractor to create and develop the Medical Respite Program. Contractor will hire initial staff to create the program and provide specific deliverables within 30-60 days following receipt of County advance funding.

Phase I Scope

Contractor will create a Medical Respite Care program that includes these key components:

- Fully accessible, American with Disabilities Act (ADA) compliant rooms;
- Assistance to cook three meals a day, or the ability to provide three meals a day, ideally based on an individual's needs/dietary restrictions;
- Staff who have medical experience, ideally including at least one Registered Nurse ("RN") to assist with nursing plan implementation (and development if needed) or at a minimum, medical staff including Licensed Practical Nurse (LPN) or Certified Medical Assistants (CMAs);
- Staff who are willing to provide attendant care and tasks that they have been trained to provide by certified or licensed medical staff, as required;
- Staffing patterns that ensure staff are available 24 hours a day including staff who can assist with coordinating medical and transportation needs;
- Policies and procedures which outline intake and discharge practices, individual rights during a stay at a medical respite program, allowances and disallowances during the program, person-centered planning and service delivery to ensure medical needs are met or coordinated by the medical respite program, and other policies and procedures as outlined here: <https://nimrc.org/standards-for-medical-respite-programs/>;
- Data collection in the Homeless Management Information System (HMIS) and in the Collective Medical System;
- Sustainability plans to maintain medical respite programs post-contract; and
- Compliance with all applicable state and federal privacy and confidentiality laws including, but not limited to, the Health Insurance Portability and Accountability Act of 1996 and its implementing regulations ("HIPAA"), which include the Standards for the Privacy of Individually Identifiable Health Information (the "Privacy Rule"), the Standards for Electronic Transactions, and the Security Rule (45 C.F.R. Parts 160–64), and the Privacy provisions (Subtitle D) of the Health Information Technology for Economic and Clinical Health Act and its implementing regulations (the "HITECH Act") (collectively, and as amended from time to time, the "HIPAA Rules"). Contractor will not transmit personally identifiable health information to County.

The Medical Respite Program will contain the following Medical Respite Services (MRS):

1. A primary care discharge plan and nursing care plans as applicable.
 - a. The Contractor will have a RN on staff or the ability to contract with an RN to write and/or train on nursing care plans;
 - b. The Contractor must have staff who are willing to deliver attendant care services;
 - c. The Contractor must have staff who be available and able to respond 24 hours a day, 7 days a week;
 - d. The Contractor must have staff who are willing to coordinate care including scheduling appointments for follow up, assisting with outpatient care such as wound care, and transportation help;
2. Provide three meals a day.
 - a. Ideally this will be done based on the person's needs/dietary restrictions. For instance, if someone wants to cook or wants to learn more about cooking and has a new diet, they will have access to a kitchen, food and staff to assist with cooking;
3. Develop policies and procedures which outline:
 - a. Intake procedures, how participants will be selected for Medical Respite, etc.;
 - b. Person centered and client focused requirements for respite such as:
 - i. Will pets be allowed;
 - ii. How can visits occur;
 - iii. How will personal items and medications be secured;
 - iv. What rules must be followed to remain in medical respite;
 - v. What accommodations can a person require;
 - c. Procedures to guide how hospital discharge and nursing care plans will be followed by all staff, including policies and procedures for how staff will be trained for each individual's needs;
 - d. Discharge procedures, including:
 - i. When a person discharges;
 - ii. What services will be provided upon discharge, etc.
 - e. The grievance process
4. Utilize databases such as HMIS and tracking to demonstrate the effectiveness of medical respite, such as the cost of programming, and to perform continuous quality improvement.

Deliverables include:

1. Ensuring appropriate staffing levels;
2. Writing and implementing policy and procedures as outlined by National Institute for Medical Respite Care (NIMRC) best-practices;
3. Services will begin within 30-60 days following receipt of County advance funding;

4. Ensuring beds are fully occupied for medical respite, as agreed upon by Clackamas County and Contractor;
5. Quarterly reports demonstrating:
 - a. How many beds are available, and for how long
 - b. How many beds are occupied, and for how long
 - c. How many staff are trained and working
 - d. Staff turnover rates, and other information
 - e. Cost of delivering services
 - f. Compliance with budget
 - g. Grievances and responses

Clackamas County will also review the budget and negotiate with Contractor to ensure cost effectiveness and sustainability, but also that deliverables are possible within available budget. Clackamas County will work for approximately 4-6 months directly with Contractor to assist with staff training, policy and procedure writing, person-centered planning training and writing and implementation.

In order to fully develop and implement Medical Respite services within 30-60 days following receipt of County advance funding, Contractor must submit a timeline within 2 weeks of the Contract. The timeline must include:

1. Staff recruitment (hiring of executive and nursing staff as well as direct support staff)
2. Policy and procedure development start and finish
3. Staffing plan and needs
4. Staff training policies
5. Timeline for phasing in direct support staff to begin the program
6. Timeline for identifying needed supplies and cost

Upon finalization of the staffing plan and policies/procedures, the Contractor must submit an updated budget for the phase in of direct support staff and implementation of the program to include:

1. Staff cost
2. Food cost
3. Other programmatic costs. The budget must also consider revenue from hospital systems.

Phase II Scope

During Phase II of this program, Contractor will rent a property for use as medical respite. Contractor is solely responsible for obtaining any and all licenses, approvals, authorizations, or other permits from any permitting authority sufficient to operate a medical respite program at the Property.

The Medical Respite Program is a pilot program, and will initially have 5 medical respite beds, with the long-term goal of increasing to 20 medical respite beds in Clackamas County.

Additional Deliverables for Phase II include:

1. Furnishing the house before opening;
2. Building a fence around the property within 3 months of opening;
3. Seeking tax exempt status for the lease of any property in accordance with applicable law, if such exemption is available;
4. Finalizing policies and procedures (approved by County) before opening;
5. Obtaining all licenses, authorizations, or approvals from all permitting authorities sufficient to operate a medical respite including, but not limited to, all real property use permits authorizing use of leased property for its intended purpose, and all staff licenses necessary to perform medical respite duties;
6. Implementation of all policies, procedures, and safeguards necessary to comply with applicable HIPAA rules;
7. Hiring all 6 care staff before opening;
8. Training staff before opening;
9. Accepting at least one referral within the first 2 weeks of opening;
10. Being at capacity (5 people) within 2 months of opening; and
11. Reporting on staffing at least monthly (i.e. how many staff, turn over, etc.)

Contractor may, in its discretion, establish contracts with other organizations and hospitals to provide respite services. However, funds provided under this Contract must only be used for participants referred to Contractor by County or through a referral process approved by the County.

EXHIBIT B
PERSONAL SERVICES CONTRACT
BUDGET

The Father's Heart Street Ministry #12213 FY 26/27		
Line Item Category	Narrative/Description	Funds Requested
SOTS - Medical Respite		
Personnel		
Program Director 1FTE		\$90,000
Nurse .8FTE		\$83,400
House Admin/Case Mgr 1FTE		\$70,000
Care Aides 6FTE	\$22 hr x 40 hrs	\$274,560
Food Procurement Lead .25FTE		\$18,750
Taxes & Benefits	20%	\$107,342
Personnel Subtotal:		\$644,052
Program Operations - Materials and Supplies		
Mileage		\$2,000
Cell Service		\$600
Devices	Computers/Wifi/Accessories	\$1,500
Education & Training		\$5,000
Staff Prof. Development		\$5,000
Office Supplies		\$1,200
Contracted Services		\$11,250
Utilities		\$11,000
Insurance		\$8,000
Medical Supplies		\$6,000
Food/Nutrition		\$21,900
Software		\$3,898
Program Operations - Materials and Supplies Subtotal:		\$77,348
Capacity Building/Program Ramp-up		
Renovation/Construction		\$6,980
Security System		\$3,000
AED and Fire Extinguishers		\$1,875
Van Lease	**Vehicle Lease NOT purchase.	\$25,000
Patient Furnishings		\$11,850
Appliances		\$6,000
Office Furniture/Equipment		\$1,550
Medical Supplies		\$2,000
Non-medical Supplies		\$2,000
Capacity Building Subtotal:		\$60,255
Indirect Administration		
Overhead/Admin 15%		\$117,248.25
Indirect Subtotal:		\$117,248.25
SOTS - Medical Respite Subtotal:		\$898,903.25
Medical Respite Rent Accrual		
Housing Support		
Rent	To pay rent on Medical Respite House @ \$2,200 per month	\$26,400
Medical Respite Rent Accrual Subtotal:		\$26,400
Medical Respite Rent Accrual Subtotal:		\$26,400.00
FY26/27 Total Budget:		\$925,303.25