## CLACKAMAS COUNTY BOARD OF COUNTY COMMISSIONERS

Sitting/Acting as (if applicable)
Policy Session Worksheet

Presentation Date: 2/2/22 Approx Start Time: 11:00 am Approx Length: 60 min

Presentation Title: American Rescue Plan Act Funds Request – First Installment Only

**Department:** County Administration

Presenters: Nancy Bush and Gary Schmidt

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

Approval of a portion of the County's American Rescue Plan Act (ARPA) funds disbursement for reminder of the first installment.

#### **EXECUTIVE SUMMARY:**

Clackamas County established an ARPA Work Group to assist the BCC with requests and management of the ARPA funding. As a part of the workgroup a Vision Statement and Purpose Statement was developed and accepted by the BCC on June 2, 2021.

Vision Statement: Clackamas Strong – Recover and Thrive

#### Purpose Statement:

Clackamas County has adopted a Recovery Framework with a focus on Resiliency and Recovery for the \$81.1 million the county will receive. We are committed to supporting Clackamas County residents, first responders, businesses, non-profits and other community partners who have been most impacted by COVID-19. In addition, Clackamas County continues to remain committed to communities and businesses of color. It is with these lenses that Clackamas County will allocate dollars to increase our ability to recover and be resilient to the next disaster, so that overall impacts to residents, businesses and community partners are minimized to the extent possible.

The American Rescue Plan Act (ARPA) of 2021 (H.R. 1319) is aimed at coping with the COVID-19 pandemic, including public health and economic impacts. The ARPA provides approximately \$362 billion, with Clackamas County's portion estimated at \$81.1 million. The first installment received in May 2021 was approximately \$41 million. The second installment will be no earlier than May 2022.

In an effort to expedite the disbursement of the dollars, the ARPA Work Group has been relying on the Interim Final Rule (IFR) to determine whether uses of funds are eligible under the Recovery Fund and will not be subject to recoupment. On January 6, 2022, the U.S. Department of Treasury released the Final Rule (FR), which is in effect now along with the IFR. However, beginning April 1, 2022 the FR will continue to be in effect and the IFR will end. The FR provides broader flexibility and greater simplicity in the program. Some of the major clarifications and changes are:

- Public Health and Negative Impacts:
  - Recipients may use funds for capital expenditures that support eligible COVID-19 public health direct response and economic response.

- Expanded the definition of "impacted" and "disproportionately impacted" in order to broaden the set of households that can receive assistance without further analysis.
- Broadens uses to restore and support government employment.
- Premium Pay:
  - Broadens the share of essential workers.
- Revenue Loss:
  - Offers standard allowance of revenue loss of \$10 million. Note: Clackamas County calculated revenue loss under the IFR.
- Water, Sewer, and Broadband Infrastructure:
  - Significantly broadens broadband infrastructure to address challenges of access, affordability and reliability.
  - Adds additional eligible water and sewer infrastructure investments, including lead remediation and stormwater management projects.

Staff presented a set of recommendations to the BCC on January 5, 2022. During that Policy Session, the BCC engaged in a robust discussion and requested additional information to facilitate their decision and requested staff to provide requests for the first installment only and to address the second installment after it is received.

Please see Attachment 1 for details of previous approvals and pie chart.

At this time the ARPA Workgroup members respectfully requests the Board to consider approval for the following from the first installment:

- Public Health/EOC COVID Response through December 2024: \$4,000,000 set aside for COVID-19 response, which includes EOC response and support. It is important to note that Public Health has approximately \$1,760,000 of state COVID-19 funding support remaining. The state dollars will be expended for allowable costs before County ARPA dollars are spent. The average cost of Public Health response to COVID-19 is \$720,000 monthly. The additional \$4,000,000 set aside for COVID-19 will bring the total to \$7,000,000 for COVID-10 response. If all the dollars are not spent by 2024 they will be reallocated to other projects to be approved by the BCC.
- Administration Costs related to ARPA funding requirements: \$2,000,000 to support staffing to administer the ARPA dollars, distribute, track and report dollars covering multiple departments for duration of the funding. Includes limited term staff/contracts for report specialist (1); Finance support (4); CBO/Non-Profit support (1); BCS/Business Support (1), training and support software for internal and external programs for tracking/reporting.
- Temporary Hotel Shelter/Other Warming Shelter Activities: \$156,000 to provide services to the underserved communities that are hardest hit by COVID-19 primarily during the winter months. This funding would supplement the limited state funding to provide enhanced emergency response to inclement weather by providing temporary hotel voucher/placements for houseless persons.

Total request for remainder of the first installment: \$6,156,000

1st Installment Remaining Funds	\$8,242,354
Current Request	\$6,156,000

Remaining Funds 1 <sup>st</sup> Installment if current request approved	\$2,086,35
FINANCIAL IMPLICATIONS (current year and ongoing):	
Is this item in your current budget? ⊠ YES □ NO	
What is the cost? \$6,156,000 from first installment What is the	ne funding source? ARPA Funds
STRATEGIC PLAN ALIGNMENT:	
<ul> <li>How does this item align with the County's Performant This item aligns with all five of the county's Performant</li></ul>	ce Clackamas goals:
LEGAL/POLICY REQUIREMENTS: Funding must abide by the U.S. Treasury IFR (through April 1 released on January 6, 2022 and is immediately effective.	I, 2022) and the FR, which was
PUBLIC/GOVERNMENTAL PARTICIPATION: This funding is intended to support the public health response COVID-19 pandemic. The ARPA Work Group published a pre 2021 to gather public feedback on community values related which was presented to the BCC on June 1, 2021.	eliminary survey throughout May
OPTIONS:  1. Allocate ARPA funds from the request list (attached).  2. Make no decisions today.	
RECOMMENDATION: Staff recommends Option 1: Allocate ARPA funds from the re	equested list above.
ATTACHMENTS: Attachment 1 – ARPA Funding BCC Approvals/Pie Chart – For Attachment 2 – Requests for first installment (Spreadsheet) Attachment 3 – Under Consideration for remainder of first installment (Spreadsheet) Attachment 4 – Clackamas Fire ARPA Proposal	•
SUBMITTED BY: Division Director/Head Approval Department Director/Head Approval County Administrator Approval	

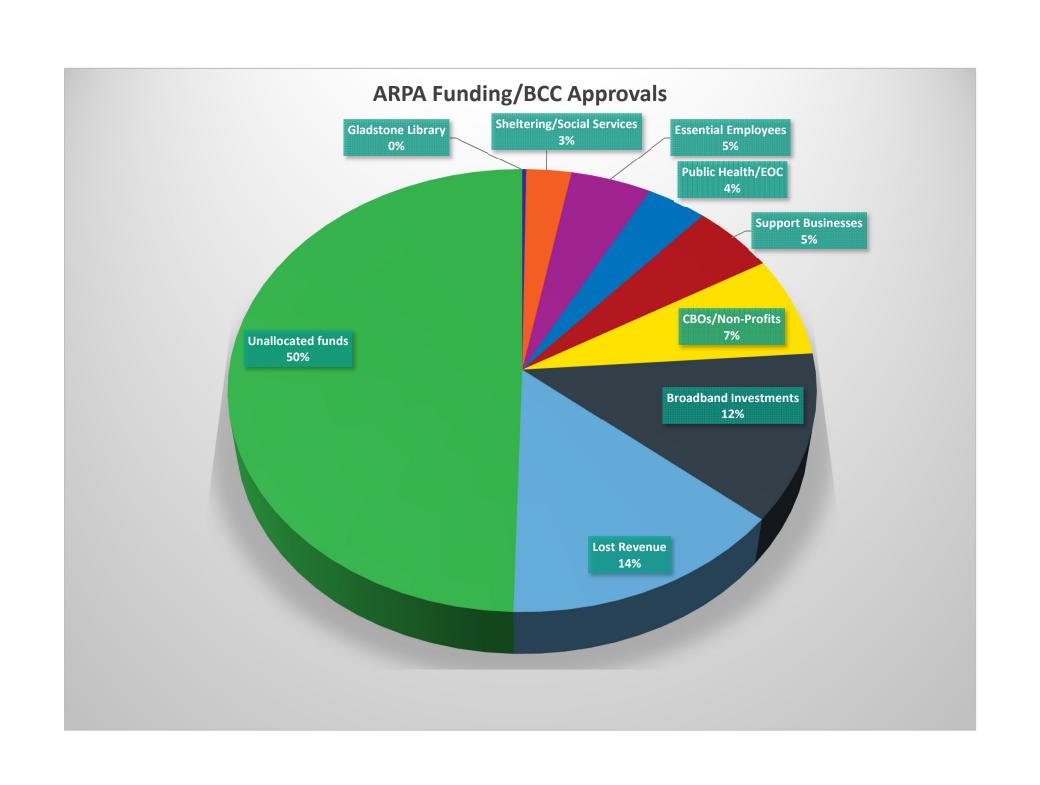
For information on this issue or copies of attachments, please contact \_\_\_\_\_\_\_ @ 503-\_\_\_\_\_

# **ARPA Funding BCC Approvals**

February 1, 2022

Clackamas Strong – Recover and Thrive

	1st Installment	2nd Installment
\$81,263,922	\$40,631,961	\$40,631,961
Approved 6.29.2021		
Essential Employees	3,000,000	
Public Health/Behavioral Health/EOC	1,500,000	1,500,000
Business Recovery Centers	150,000	
Approved 7.13.2021		
Support Businesses	4,000,000	
CBOs/Non-Profits	4,000,000	
CBOs/Non-Profits -Basic Needs	2,000,000	
Broadband	2,500,000	7,600,000
Approved 11.02.21		
Lost Revenue through December 2021	11,797,970	
Sheltering/Social Services	2,234,455	
Approved 11.23.21		
Gladstone Library	200,000	
Approved 01.27.22		
Essential Employee Taxes/PERS	1,007,182	
Approved Spending	32,389,607	9,100,000
Balance	\$8,242,354	\$31,531,961
Dalance	70,272,334	731,331,301



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1		Work	Group l	Request	ts First Ir	nstallment Fe	bruary 1	L, 2022	•	
2	Organization	Project	Amount Requested	Amount Approved	IFR/FR Compliant	Explanation of Program	Community Served/EDI Lens	Other funding sources	If so, how much?	Staff Notes
	Public Health/EOC	COVID on-going response	\$4,000,000		COVID response and recovery. Appears in both Rules. (Final Rule, pages 12 - 13; 364-365)	The Public Health Division is focused on activities that help reduce the spread of the COVID-19 virus, including contact tracing, disease investigation, technical assistance for workplaces, schools, and event organizers, community testing events, vaccination clinics, and outreach / education efforts in coordination with partners.		FEMA funding for vaccination clinics and BH ends January 31, 2022. State ARPA funding ends June 30, 2023 or when funding is exhausted. \$1,760,000 is remaining and the average per month for COVID response is \$720,000 for Clackamas County.	\$1,760,000	Recommend a total of \$7million set aside for COVID response. (3 plus additional 4 million). This request is in addition to the TOTAL \$3,000,000 approved for all of EOC/PH/BH approved for this purpose. Estimates are through December 2024 in hopes the majority of the response will be complete.  Recommend that budgets be presented to the BCC on a regular basis for this funding.
3	Multiple Department Staffing and needed software	Clackamas Funding Administration for ARPA Funding	\$2,000,000		Administrative services are approved. Recipients may use funds for administering the ARPA program including costs of consultants to support effective management and oversight, including consultation for ensuring compliance with legal, regulatory and other requirements. Direct costs such as implementation of programs, contract support, materials and supplies, etc. (FR pages 364 - 365).	Administrative services funding is needed in order to be fiscally responsible with the ARPA funding. It will ensure proper reporting so that the county's audit risk is reduced and less likelihood of returning dollars through the audit process. The administration dollars will support additional limited term staff or contractors to support programs, distribution, tracking and reporting dollars. Funding will also be used to provide reporting tools for complex reporting requirements, assistance to non-profits and businesses that need reporting assistance, training for those receiving ARPA funding in order to prepare them for receiving federal dollars.	non-profits as well as others directly			The amount of this request compares to other counties in Oregon and in many cases is a lower percentage than others.

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1		Work (	Group F	Request	ts First In	stallment Fe	bruary 1	., 2022	-	
2	Organization	Project	Amount Requested	Amount Approved	IFR/FR Compliant	Explanation of Program	Community Served/EDI Lens	Other funding sources	If so, how much?	Staff Notes
	H3S	Temporary Hotel Shelter/Other Warming Shelter Activities	\$156,000		assistance for individuals experiencing homelessness, either individual-level assistance (e.g. rapid housing services) or assistance for groups of individuals (e.g. master leases of hotels, motels, or similar facilities	Department of Health, Housing and Human Services, Social Services Division (SSD) seeks approval for funding to pay for hotel rooms for temporary housing participants during the winter inclement weather season and other warming center supports. This program provides safety and temporary housing to this vulnerable population while partner agencies assist them with obtaining permanent housing.	Provides services to those that are most impacted by COVID.			
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6										
/ 8										
9		Total Work Group Requests	\$6,156,000							

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	1					Under Cons	sideration				
-	2	Organization	Project	Amount Requested	Amount Approved	IFR/FR Compliant	Explanation of Program	Community Served/EDI Lens	Other funding sources	If so, how much?	Staff Notes
	S	afe Kids Coalition	Safe Kids Coalition	\$8,100,000		positive outcomes for youth and families	The Safe Kids Coalition for Clackamas County is requesting funding to allow local nonprofits to provide trauma-informed child safety services to thousands of at-risk children and youth through shared resources strategically invested in successful programs such as domestic violence services, medical assessments for suspected victims of child abuse, mental health treatment and suicide prevention, culturally specific prevention and family support, student mentoring and educational support, and residential services for traumatized youth.	most impacted by			
	C	CCOM	Go-Kits for Evacuations	\$25,000		Yes, may provide improvement in dense worksites for to prevent the spread of COVID. (FR page 48)	Radio kits will allow call takers and dispatchers to continue to answer 911 calls and dispatch the emergency resources that are needed. At the beginning of the pandemic, CCOM had 50% of staff quarantined due to exposure. This forced the remaining staff to work extremely long hours while those quarantining with no symptoms were able/willing to help out if needed resources were in place.				
	C C		Additional Dispatch Consoles (furniture & wiring)	\$85,000		Yes, may provide improvement in dense worksites for to prevent the spread of COVID. (FR page 48)	Would add 2 additional dispatch consoles to allow for social distancing and reduce the chances of exposure and the need for quarantining employees. The 2 additional consoles would be set up, with the appropriate distancing. CCOM is limited on floor space and only able to utilize 50% of current consoles due to spacing between employees, which can lead to staffing issues during peak times. The consoles will be added in the space that was the old training room.				

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	2	Organization	Project	Amount Requested	Amount Approved	IFR/FR Compliant	Explanation of Program	Community Served/EDI Lens	Other funding sources	If so, how much?	Staff Notes
	6		Set up of old EOC space with Flexible Furniture and Wiring	\$20,000			Due to limited space in the CCOM facility, staff were forced to set up a make-shift fire dispatch room in order to achieve proper distancing requirements. The dispatchers continue to work in temporary makeshift setups. Cords and wires are still running across the floor causing a safety issue. This request is to provide wiring so the space can be staged and provide an emergency dispatch room when needed and for COVID safety.	Serves all county residents.			
	7		Respite Rooms for Socially Distanced Meal Breaks and Rest	\$10,000		Yes, may provide improvement in dense worksites for to prevent the spread of COVID. (FR page 48)	•	Serves all county residents.			
	, C	CCOM	Evacuation Trailer	\$10,000		worksites for to prevent the spread of COVID. This is compliant as long as	Trailer would store Radio go-kits as well as additional furniture so that a dispatch center can be set up at another location. During the winter of 2020, we were forced to set up remote dispatch stations at the old OCPD building so that employees that were non-symptomatic, however, had been exposed would be able to continue to work. This building gave us the space and separation including HVAC systems that we needed to meet guidelines. The move proved difficult as our technicians had to move a lot of equipment in their personal vehicles. This trailer would allow us to be deployable on short notice.	Serves all county residents.			

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2	Organization	Project	Amount Requested	Amount Approved	IFR/FR Compliant	Explanation of Program	Community Served/EDI Lens	Other funding sources	If so, how much?	Staff Notes
9	Fairgrounds	New Livestock Barn at Fairgrounds	\$2,710,000		Venue for vaccine clinics are eligible. Must meet enhancement of pandemic operational needs/adaptations to public buildings to implement COVID-19. This project would also have to comply with capital projects. (FR page 56)	The venue is used for vaccination clinics and the new barn would allow better access to the public for drive-thru and distanced clinics.		State ARPA	\$4,790,000	
10	BCS	Gladstone Library	\$3,900,000	\$200,000	Underserved populations who fall within the Qualified Census Tract. Also provides services to assist in education/literacy to student populations facing negative impacts from COVID. Provides broadband centrality to enhance education for those underserve. (FR page 88)  Some items will need further capital investigation to ensure eligible.	community with services including		State ARPA (Dollars must be spent by December 2024)	\$500,000	\$200,000 of gap funding approved by BCC in November 2021.
11	BCS	Oak Lodge Library	\$8,600,000		Underserved populations who fall within the Qualified Census Tract. Also provides services to assist in education/literacy to student populations facing negative impacts from COVID. Provides broadband centrality to enhance education for those underserve. (FR page 88)  Some items will need further capital investigation to ensure eligible.	provide services to the community	Serving communities most impacted by COVID			Includes \$7,300,000 revenue bond and \$1,300,000 shortfall.

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Ī	2	Organization	Project	Amount Requested	Amount Approved	IFR/FR Compliant	Explanation of Program	Community Served/EDI Lens	Other funding sources	If so, how much?	Staff Notes
	12	Community Corrections	Mental Health Stabilization Housing	\$347,064		Provides services and housing to those most impacted by COVID. Transitional shelters/housing are eligible for those experiencing homelessness. (FR pg. 83)	with wrap-around services operated by Bridges to Change. This program is vital to	Tract			The program consists of 33 transitional beds for men with 4 live-in house managers and 8 transitional beds for women with 1 live-in house manager. Additionally, this funding will support 5 certified recovery mentors (CRM) and 1 program supervisor. These certified recovery mentors are gender-specific and utilize population-specific evidenced-based practices for justice-involved community members.

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2	Organization	Project	Amount Requested	Amount Approved	IFR/FR Compliant	Explanation of Program	Community Served/EDI Lens	Other funding sources	If so, how much?	Staff Notes
12	DTD/BCS	Economic Opportunity Activation in Clackamas County	\$500,000		Identification and response to identified economic impact related to COVID.  Eligible under Assistance to Small Businesses in the FR starting on page 142.	Expected outcomes and deliverables of the project include:  • An up-to-date summary of existing information and emerging trends influencing employment and industries;  • Business and Community Services division and the Land Use Planning division would facilitate a stakeholder advisory committee to develop a draft Vision and Goals for employment in unincorporated Clackamas County;  • Economic Opportunity Analysis will be produced to provide a clearer picture of the long term demand for employment land, by industry. Provide guidance on short term actions that will support the vision and goals;  • Policies in the Comprehensive Plan chapter: Economics will be reviewed, revised and updated;  • Economic Development Action Plan, will include a wide range of actions needed to support the Vision, Goals and Polices for a vibrant County.				Various actions need to be taken to insure that the vision and goals for employment and businesses within Clackamas County are aligned with the new realities of a postpandemic world. This project is designed to do just that.
14	WES/DTD	Thiessen Culvert Replacement & Kellogg Creek Restoration	\$801,635		Eligible under Water and Sewer Infrastructure in FR starting on page 264.	Replace an undersized culvert where SE Thiessen Road crosses Kellogg Creek. The creek currently passes through a 6-foot diameter round culvert which creates a backwater and floods the roadway and private property upstream.	Provides flood relief to homeowners in the area of the project.			
15	WES/DTD	WES/DTD Storm Water Repairs - Aldercrest Culvert Replacement & Kellogg Creek Restoration	\$508,400		Eligible under Water and Sewer Infrastructure in FR starting on page 264.	<b>.</b>	the area of the			

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2	Organization	Project	Amount Requested	Amount Approved	IFR/FR Compliant	Explanation of Program	Community Served/EDI Lens	Other funding sources	If so, how much?	Staff Notes
16		Clackamas Road Drainage Infrastructure	\$1,865,013		Eligible under Water and Sewer Infrastructure in FR starting on page 264.	Project would reduce flooding of properties near the SE Clackamas Road-Kellogg Creek crossing without replacing eh culvert or disrupting the wetland upstream of the crossing.  Landowner cooperation and an easement will be required for replacement of the storm pipe across private property.	Provides flood relief to homeowners in the area of the project.			
17		Behavioral Health Center Relocation (Courthouse impact)	\$4,000,000		If services are moved to a location that is more accessible to the population being served. Adaptations to facilities is covered under FR in capital improvements.		Vulnerable populations/hard est hit by COVID			
18	ccso	Jail Bunk Replacement	\$707,407		Yes, may provide improvement in dense worksites for to prevent the spread of COVID. This is compliant as long as related to COVID needs and not related to other disasters. (FR page 48)	Based on recent data and past attempts current jail bunk beds have provided a ligature point for those attempting suicide. Replace Bunks with new industry standard bunks to reduce ligature points for those individuals who wish to do self-harm. To limit the risk, we propose to purchase new adult in custody beds molded to limit ligature points and provide for durable, one piece, rotationally molded design for increased strength. It will be constructed of high impact "no break" polyethylene. No steel or wood components. Easy to clean and maintain, and flame retardant. The beds would be bolted to existing walls and able to be removed and relocated in the event of building a new correctional facility.	Vulnerable populations			The Clackamas County Jail would need 239 bunks to cover the entire facility with upgraded beds. The cost per bunk is estimated at \$2,834.34. This cost would total \$799,500.41 for entire facility. Installation costs are estimated in the \$40,000.00 range. At total cost of \$839,500.41 which is an increase from the original cost due to supply chain and material cost increases

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2	2	Organization	Project	Amount Requested	Amount Approved	IFR/FR Compliant	Explanation of Program	Community Served/EDI Lens	Other funding sources	If so, how much?	Staff Notes
1	9	CSO	Jail UVC Lights	\$81,612		worksites for to prevent the spread of COVID. This is compliant as long as related to COVID needs and not related to other disasters. (FR page 48)	Arc UVC Light, is a mobile whole-room UV-C disinfection system delivers ultraviolet-c to all surfaces that destroys over 99.99% of viruses, bacteria, and mold in 3500 square foot room in only a few minutes. The device automatically generates and transmits usage data via LTE connection. The data can be accessed via a dashboard to track compliance, or even to prove that hospital-grade UV-C was used to ensure safety for risk management. UVC reduces chemical consumption from displacing much of the bleach, hydrogen peroxide, and other chemical disinfectants typically used by staff savings on consumable PPE required for handling the chemicals it displaces. The UVC disinfection works against Corona Virus & Variants, Colds & seasonal Flu, C Diff, MRSA, E coli, and Norovirus. The jail requests two units.				

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1		Under Consideration								
2	Organization	Project	Amount Requested	Amount Approved	IFR/FR Compliant	Explanation of Program	Community Served/EDI Lens	Other funding sources	If so, how much?	Staff Notes
		Habitat for Humanity Affordable Homeownership Townhomes	\$800,000		to neighborhoods with high levels of economic opportunity and mobility for low-income residents, to help residents	Habitat for Humanity in partnership with Proud Ground is seeking funding to combine with a match from Lake Oswego to go towards the development of 23 townhomes in Lake Oswego that will be made permanently affordable through Proud Ground's land trust model.  Approving this funding would support the infrastructure items associated with developing the land, including water, sewer, utilities, street-lighting installments and permitting fees and transportation upgrades. This funding is being requested in order to provide a higher than average subsidy to ensure the development can be affordable. The timeline for this infrastructure installation project for the development is January through December 2022.	Vulnerable and underserved populations	Lake Oswego voted to provide \$800,000 of ARPA dollars for the project./Habitat for Humanity plans to provide about \$1,600,000 if Clackamas County provides \$800,000 of ARPA funding.	\$800,000	Habitat is currently under contract to purchase 1.92-acre property from a supporter of affordable housing located at the intersection of Boones Ferry Road and Upper Drive near schools, transportation, services, amenities and employment opportunities.
20		Community Paramedic Program	\$1,493,076		Support for vulnerable populations to access medical or public health services and eligible uses should help vulnerable or high-risk populations access services that mitigate COVID-19. (FG page 62).	Community Paramedics and Manger will be dedicated to serving all Clackamas County Health Equity Zones in a targeted universal approach. Each Community Paramedic will be assigned an area of responsibility and have a daily routine for	Serves homeless, children/adolesce nts, elderly, low-income, racial/ethnic minorities, rural/inner-city residents, special healthcare needs, gender specific needs.			The request is for staffing for three years. The total for one year is \$497,692.

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1	Under Consideration									
2	Organization	Project	Amount Requested	Amount Approved	IFR/FR Compliant	Explanation of Program	Community Served/EDI Lens	Other funding sources	If so, how much?	Staff Notes
22		2 Lucas Chest Compression Systems	\$33,500		Support for vulnerable populations to access medical or public health services and eligible uses should help vulnerable or high-risk populations access services that mitigate COVID-19. (FG page 62).	During the COVID pandemic Colton Fire responded to more calls for assistance then at any other time in the history of Colton Fire District. During this time volunteers have answered the calls but hampered by lack of front line staff and fears of getting COVID and putting loved ones in danger. The situation has led to less firefighters/EMTs available to do CPR. This request for ARPA dollars for 2 Lucas chest compression systems will allow responders to provide the patient uninterrupted chest compressions with a limited crew and give the patient, a resident of our county, the best chance for survival while helping to keep the responders safe from COVID and other diseases. It is difficult for small fire departments to fund better equipment due to budget constraints. If this project is approve the Lucas Chest compression systems will offer Colton Fire responders the chance to deliver uninterrupted chest compressions to give our community members the best chance for survival and protection for dedicated staff.				
23										
24		Total ARPA still Under Consideration	\$34,597,707							

# Clackamas Fire District #1



To: ARPA Internal Committee From: Clackamas Fire District No.1

Date: January 21, 2022

Subject: American Rescue Plan Act – County Wide Community Paramedic Plan

#### **Action:**

Hire three Community Paramedics and one Community Medicine Manager for a period of three years. The Community Paramedics and Manager will be dedicated to serving all Clackamas County Health Equity Zones in a targeted universal approach.

### **Background:**

Clackamas County needs Community Paramedics. A Community Paramedic is described very well in its title; they provide Community Medicine to the community, in the community. It's a resource that is skilled, knowledgeable, mobile, add most importantly, versatile. Community Paramedics (CP's) routinely increase access to care and resources to the county's most vulnerable and underserved populations, but their unique skillset also allows them to be redeployed in times of crisis. They respond to the changing needs of the community from the increasing epidemic of opioid and poly-pharma overdoses, pandemic viruses, mental/medical non-emergency repetitive calls for assistance, to catastrophic environmental events. The following paragraphs will outline our current Community Paramedic status, what county wide Community Medicine can do for the community, how many are needed, and where they would be positioned and highlight the variety of ways Community Medicine can enhance the county's response to the needs of the community and meet many of the goals described in the Blueprint for a Healthy Clackamas County.

Community Paramedicine is currently a program supported by Clackamas Fire District #1. The program supports one Community Paramedic to service the residents within Clackamas Fire boundaries. The daily duties/focus areas of the CP are categorized into four pillars. However, there are other supporting duties not mentioned. Outlined below are the four focus pillars:

- 1) Access to Care Increase access to care in all health equity zones through agency referrals.
- 2) Opioid/Polysubstance Misuse Identifying and engaging those surviving an opioid overdose (or suffering from substance use disorder) with recovery resources such as harm reduction tools (Naloxone), referrals and transportation to recovery services, housing, employment, primary and mental care, Peer Recovery Mentors, and barrier reduction/removal. (This portion of Community Medicine is called Project Hope and is partially supported by grant dollars and allows for county wide outreaches 10 hours a week)

- **3)** Vaccinations The CP program has partnered with Clackamas Public Health and Oregon health Authority to provide Flu, Hepatitis A/B, and Covid vaccines to houseless and vulnerable populations. Vaccines are administered in homeless camps, high vagrancy areas, and shelters.
- 4) Outreaches Referral for planned and emergent outreaches are made by fire agencies, law enforcement, Clackamas Mental health Center (crisis center) Adult protective Services, hospitals, and any county agency or Community based organization that feels a community member could benefit from additional services. These outreaches provide medical direction, referrals, barrier identification, and assistance to access resources. The partnerships with county and community-based agencies increases opportunities to provide health equity to populations that traditionally go underserved and have poor health outcomes. These engagement opportunities assist with establishing continued, sustainable care for a better quality of life.

#### The Plan-

Divide the county by its Health Equity Zones to optimize areas of responsibility between geography and population. Place a Community Paramedic in three strategic locations and have a centralized Community Medicine Manager. Provide community medicine throughout all of Clackamas County. Clackamas Fire will commit to providing emergency vehicles, equipment, and training. Providing county-based Community Medicine is in line with the Clackamas County EMS Council's Emergency Medical Services Strategic Plan for providing enhanced and equitable services throughout the county. County based Community Medicine reduces duplication of services, encourages collaboration across agencies, limits silo hiring and processes, reduces overall costs per agency, decreases health disparities, increases communication for wrap around supports and promotes community advocacy.

Deploy Community Paramedic's providing the same services outlined above with a county wide emphasis. They will collaborate with county and community agencies to assist with wrap around support services. An example of services and referrals include connections to food pantries, medical assessment for those hesitant to engage in primary care, housing (CHA), employment, mental health, recovery resources, temporary shelter, and access to harm reduction resources. Community Paramedics will provide a soft handoff for first responders to assist with their repeat callers utilizing the 911 system to meet their needs when services outside the 911 system are more appropriate (This allows for community advocacy while also allowing the first responders to be available for other emergencies). These partnerships will increase community health, trust, and provide for enhanced responses to both actual emergencies and non-emergent calls for service.

The Community Paramedics will respond to catastrophic events. Clackamas county has seen its share of these events in the past 24 months. Community Medicine has shown to be a key asset for the county while navigating these challenges. The pandemic highlighted the need for skilled, mobile, experienced persons to help support the needs of the vulnerable. Community Paramedics can be redeployed to assist with certain branches in an Emergency Operations center, go into the field to deliver services such as on-site vaccine administration and testing, and assist with medical care until sustainable services are able to be placed. The CP's knowledge and experience with

vulnerable populations and boots on the ground field work, make them a natural resource to assist coordinating services and events to support community goals. (Large scale and smaller vaccination events, showers and hygiene stations, respite shelters, etc.)

Wildfires, ice storms, and extreme heat events also plagued Clackamas County. These events, once called '100-year storms' will continue to disrupt, destroy, and displace. Having Community Paramedics in place will increase the county's ability to respond to the immediate needs, and limit the negative, and sometimes deadly, impact these events can have on all our residents, but especially our vulnerable and underserved. In the last fire event Clackamas Fire's Community Paramedic was able to enhance staffing at fire evacuation sites, provide medical attention where needed, and assist with the longer event of case management and sustainable relocation of fire victims. The ice storms brought new challenges for all agencies in the county. With the prolonged power outages, the sick and vulnerable had no power to run their medical equipment. Many of these people needed immediate assistance with oxygen replacement. The Community paramedic was a single resource unit capable to assist with alternatives, hotel sheltering, and delivering new oxygen bottles to those in need. This had many collateral benefits as it took pressure off first responders that were overwhelmed with 911 activations, overcrowded hospitals, and kept people away from congregate setting during the height of the Covid 19 pandemic where social distancing and isolation were strongly advised. The CP also had the ability to assist the houseless with additional blankets, hand warmers, hats, and gloves. The extreme heat event also had many challenges that the Community Paramedic was able to assist with. The CP's knowledge of houseless camps and mobility allowed for the distribution of water and tarps for shade, and medical assessments and interventions for dehydration and heat related emergencies.

General and emergent outreaches are one of the most needed and useful attributes of Community Paramedics and Community Medicine as a whole. The versatility and flexibility of the program allows for expanding services, increasing access to care, and the ability to serve those most in need.

<u>Implementation</u>- Each Community Paramedic will be assigned an area of responsibility. CP's will have a daily routine for scheduled and emergent outreaches. They will familiarize themselves with area resources, organizations, and county agencies. CP's will have the ability to respond directly to a scene when appropriate. (allowing first responders to be available for the next emergency call.) The CP's will be available to be redeployed in times of extreme need.

The CMM will receive referrals from county agencies, law enforcement, and other first responders. The referrals will then be submitted to the appropriate area of responsibility for engagement. The CMM will be responsible for ensuring all referrals have been properly addressed. The CMM will also be able to cover areas of responsibilities for time off and extended scene times for the CPs. Additional responsibilities for program management include data collection, budget reconciliation and earned leave policy. The Community Medicine program is ever evolving with the changing needs of the community. The descriptions above can change and adapt depending on trending community needs assessments.

# **Budget-**

Community Medicine Manager Base wage - \$123,824. Roll ups \$50,767.84. Total \$174,591.84

Community Paramedic Base wage - \$76,378.79. Roll ups \$31,314.98. Total \$107,693.98 x3

Total for 1 year - \$497,692

Total for 3 years - \$1,493,076

#### **Recommendation:**

Clackamas Fire is proposing a portion of the American Rescue Plan Act funds be used to support three Community Paramedics and one Community Medicine Manager for a total of three years. Three years ensures proof of concept and the ability to obtain sustainable funding. This process has already been in progress with health insurance Coordinated Care Organizations. There is currently legislative effort in progress that will allow Community Medicine to be a billable item through insurance. Additionally, individual agency funding options will be assessed. Concepts consistent with county dispatch services funding and other associated IGA models will be evaluated.

Why Community Medicine works - Community Medicine has many successful outcomes because it uses multi-faceted approaches. One of those is Targeted Universalism. That means we set universal goals, but they are perused by targeted processes to achieve these goals. Within the Targeted Universalism framework, goals are established for all groups concerned. The strategies developed are targeted upon how different groups are situated within structures, culture, geography, and socioeconomically to obtain the universal goal. Reducing disparities for priority populations will improve overall wellbeing for our community. Opening with racial equality as a goal will promote equality for all people in Clackamas County. Community Paramedics also employ trauma informed care. This helps recognize trauma as a risk factor for poor health. Understanding social determinants of health, and their effect on health outcomes helps guide our principal approach to provide appropriate care and resources for individuals. Knowing how Adverse Childhood Experiences (ACES) impact a person's future both mentally and physically, being able to identify those who experience ACES, allows us to use different strategies to help them achieve lifelong health and wellbeing. Another key factor is the program collaborative approach. Sharing resources, partnering with other agencies, and encouraging organizations to come out of silos increases what we can all accomplish, and almost eliminates duplicative efforts making the program efficient and cost effective. Community Medicine works because it provides services where they needed most, directly in the community.

In closing, Community Medicine has proven to be an innovative and vital way to serve the needs of the community beyond traditional means. Using the 911 system as the catch all is not sustainable and reduces the ability for first responders to be available for acute emergencies. Community medicine fills the gaps, advocates for community members, and is versatile and skilled enough to be

an asset in multiple situations. County wide Community Medicine will provide the platform for health equity and facilitate a healthier Clackamas County.

Thank you for your time and consideration,

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