



CLACKAMAS COUNTY SHERIFF

Sheriff Angela Brandenburg

Jesse Ashby, Undersheriff

Jenna Morrison, Undersheriff

Brad O'Neil, Undersheriff

10/02/2024

BCC Agenda Date/Item: _____

Board of County Commissioners
Clackamas County

Approval of a Grant Application to the Oregon Criminal Justice Commission for Jail-Based Medications for Opioid Use Disorder. Anticipated Grant Value is \$372,771 for 1 year. Funding is through the Oregon Criminal Justice Commission. No County General Funds are involved

Previous Board Action/Review	None		
Performance Clackamas	Ensure safe, healthy and secure communities.		
Counsel Review	Yes	Procurement Review	No
Contact Person	Nancy Artmann	Contact Phone	503-785-5012

EXECUTIVE SUMMARY: The purpose of the Jail-based Medications for Opioid Use Disorder Grant Program is to provide opioid use disorder treatment and transition planning services to persons in custody in local correctional facilities and tribal correctional facilities.

RECOMMENDATION: Staff recommends approval of this agreement.

Respectfully submitted,

Sheriff Angela Brandenburg

For Filing Use Only

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Financial Assistance Application Lifecycle Form

Use this form to track your potential award from conception to submission.

Sections of this form are designed to be completed in collaboration between department program and fiscal staff.

If renewal or direct appropriation, complete sections I, II, IV & V only. Section III is not required.

If Disaster or Emergency Relief Funding, EOC will need to approve prior to being sent to the BCC

****CONCEPTION****

Section I: Funding Opportunity Information - To Be Completed by Requester

Award type: Direct Appropriation (no application) Subrecipient Award Direct Award

Award Renewal? Yes No

Lead Fund # and Department:	100-21
Name of Funding Opportunity:	JAIL-BASED MEDICATIONS FOR OPIOID USE DISORDER GRANT PROGRAM

Funding Source: Federal – Direct Federal – Pass through State Local

Requestor Information: (Name of staff initiating form)	Nina Rathbone
Requestor Contact Information:	nrathbone@clackamas.us
Department Fiscal Representative:	Nina Rathbone
Program Name & Prior Project #: (please specify)	JMOUD_2025

Brief Description of Project:

The purpose of the Jail-based Medications for Opioid Use Disorder Grant Program is to provide opioid use disorder treatment and transition planning services to persons in custody in local correctional facilities and tribal correctional facilities.

Name of Funding Agency: CRIMINAL JUSTICE COMMISSION

Notification of Funding Opportunity Web Address: https://cjc-grants.smapply.io/prog/jail-based_medications_for_opioid_use_disorder_grant_program_23-25/

OR

Application Packet Attached: Yes No

Completed By: Nina Rathbone Date: 09/18/2024

**** NOW READY FOR SUBMISSION TO DEPARTMENT FISCAL REPRESENTATIVE ****

Section II: Funding Opportunity Information - To Be Completed by Department Fiscal Rep

Competitive Application Non-Competing Application Other

Assistance Listing Number (ALN), if applicable:	N/A	Funding Agency Award Notification Date:	11/2024
Announcement Date:	09/03/2024	Announcement/Opportunity #:	
Grant Category/Title	Jail-based Medications for Opioid Use Disorder Program	Funding Amount Requested:	\$372,771.00
Allows Indirect/Rate:	Yes	Match Requirement:	N/A
Application Deadline:	10/13/2024	Total Project Cost:	\$372,771.00
Award Start Date:	10/01/2024	Other Deadlines and Description:	Agreement expiration shall expire: 12/31/2025
Award End Date	09/30/2025		
Completed By:	Nina Rathbone	Program Income Requirements:	N/A
Pre-Application Meeting Schedule:			

Additional funding sources available to fund this program? Please describe:

Program is based on receiving funding.

How much General Fund will be used to cover costs in this program, including indirect expenses?

No general fund will be used.

How much Fund Balance will be used to cover costs in this program, including indirect expenses?

No fund balance will be used.

In the next section, limit answers to space available.

Section III: Funding Opportunity Information - To Be Completed at Pre-Application Meeting by Dept Program and Fiscal Staff

Mission/Purpose:

1. How does the grant/funding opportunity support the Department and/or Division's Mission/Purpose/Goals?

Providing opioid use disorder treatment and transition planning services to persons in custody in local correctional facilities and tribal correctional facilities ensuring safe, healthy and secure communities by promoting recovery and helping to end cyclical drug use and incarceration.

2. Who, if any, are the community partners who might be better suited to perform this work?

N/A

3. What are the objectives of this funding opportunity? How will we meet these objectives?

The proposed initiative will allow the Clackamas County Jail to partner with a community provider (CODA, Inc.) to expand access to evidence-based substance use treatment, specifically methadone, and support reentry and continuity of care when individuals are in custody of the Clackamas County Jail. The objectives of this funding opportunity will be to create or expand jail-based counseling and Medications for Opioid Use Disorder (MOUD) programs serving adults in custody with opioid use disorder. Clackamas County Jail will leverage these grant funds along with preexisting relationships with CODA, Inc. to launch Oregon's very first jail-integrated opioid treatment program (OTP), facilitating immediate connections to in-house opioid use disorder (OUD) treatment services such as stabilizing medications and addiction counseling.

4. Does the grant/financial assistance fund an existing program? If yes, which program? If no, what is the purpose of the program?

The Clackamas County Jail is seeking funding for an innovative project to expand and streamline access to OUD treatment, specifically methadone, within the Clackamas County Jail. The project focuses on implementing a methadone unit within the Clackamas County Jail to address the high rates of addiction and overdose among justice-involved individuals. This will be created through contract services with CODA, Inc., a community methadone provider.

Organizational Capacity:

1. Does the organization have adequate and qualified staff? If no, can staff be hired within the grant/financial assistance funding opportunity timeframe?

The Sheriff's Office does not currently employ a fully licensed and accredited Medication Unit housed within the Clackamas County Jail. If funding is obtained, the Sheriff's Office would contract for services with CODA Inc. to develop and begin implementation of the medication unit within the grant/financial assistance funding opportunity timeframe.

2. Are there partnership efforts required? If yes, who are we partnering with and what are their roles and responsibilities?

Currently, the Clackamas County Jail is not authorized to directly prescribe methadone to adults in custody (AIC). The Jail Medication Unit will be an extension of an existing, licensed, accredited Opioid Treatment Program (OTP), making the smaller unit fully authorized to operate in a location geographically separate from the existing OTP. This unit will be seamlessly integrated into the jail's existing corrections and healthcare operations, securely operated by CODA staff, and legally authorized to initiate and maintain MOUD for any qualifying AIC with an OUD.

3. If this is a pilot project, what is the plan for sun setting the project and/or staff if it does not continue (e.g. making staff positions temporary or limited duration, etc.)?

The Clackamas County Jail is seeking funding for an innovative project to expand and streamline access to OUD treatment, specifically methadone, within the Clackamas County Jail. The Sheriff's Office intention is to contract with CODA Inc. to avoid hiring temporary or limited duration staff.

4. If funded, would this grant/financial assistance create a new program, does the department intend for the program to continue after initial funding is exhausted? If yes, how will the department ensure funding (e.g. request new funding during the budget process, supplanted by a different program, etc.)?

The jail-based medication for opioid-use disorder grant program will provide funding to create or expand jail-based counseling and MOUD programs serving adults in custody with opioid use disorder.

Collaboration

1. List County departments that will collaborate on this award, if any.

None

Reporting Requirements

1. What are the program reporting requirements for this grant/funding opportunity?

Recipient must submit to CJC quarterly progress reports, beginning January 25, 2025, until the earlier of thirty (30) days after Grant funds are fully expended or thirty (30) days after the Completion Date. 2. CJC Quarterly Progress Report. 2a. Data and information related to the Recipient’s progress toward providing opioid use disorder treatment and transition planning services during the prior calendar quarter; and 2b. Any other Project information as CJC may reasonably request.

2. How will performance be evaluated? Are we using existing data sources? If yes, what are they and where are they housed? If not, is it feasible to develop a data source within the grant timeframe?

The project will utilize existing electronic health record (EHR) system, CODA and Clackamas County staff will collaborate to develop custom tracking and reporting mechanisms in order to provide the minimum quantitative data identified by the CJC and additional outcomes/metrics.

3. What are the fiscal reporting requirements for this funding?

Recipient must submit to CJC quarterly expenditure reports, beginning January 25, 2025, until the earlier of thirty (30) days after Grant funds are fully expended or thirty (30) days after the Completion Date. 1. CJC Quarterly Expenditure Report. 1a. Grant Funds spent during the prior calendar quarter, with brief description.

Fiscal

1. Are there other revenue sources required, available, or will be used to fund the program? Have they already been secured? Please list all funding sources and amounts.

No other revenue sources are required, available, or will be used to the fund the program at this time.

2. For applications with a match requirement, how much is required (in dollars) and what type of funding will be used to meet it (CGF, In-kind, local grant, etc.)?

N/A

3. Does this grant/financial assistance cover indirect costs? If yes, is there a rate cap? If no, can additional funds be obtained to support indirect expenses and what are those sources?

Administrative Costs: Administrative costs must not exceed 10 percent of the overall amount of grant funds awarded. Exceptions to this limitation may be granted by the CJC upon sufficient showing by the applicant. Tribal government applicants may request up to the tribal government’s federally negotiated indirect cost rate for the applicant.

Other information necessary to understand this award, if any.

Program Approval:

Melanie Menear

9/24/24



Name (Typed/Printed)

Date

Signature

**** NOW READY FOR PROGRAM MANAGER SUBMISSION TO DIVISION DIRECTOR ****

****ATTACH ANY CERTIFICATIONS REQUIRED BY THE FUNDING AGENCY. COUNTY FINANCE OR ADMIN WILL SIGN****

Section IV: Approvals

DIVISION DIRECTOR (or designee, if applicable)

Name (Typed/Printed)	Date	Signature
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DEPARTMENT DIRECTOR (or designee, if applicable)

Jenna Morrison, Undersheriff	09/24/24	
Name (Typed/Printed)	Date	Signature

FINANCE ADMINISTRATION

Elizabeth Comfort	9.24.2024	
Name (Typed/Printed)	Date	Signature

EOC COMMAND APPROVAL **WHEN NEEDED FOR DISASTER OR EMERGENCY RELIEF APPLICATIONS ONLY**

Name (Typed/Printed)	Date	Signature
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Section V: Board of County Commissioners/County Administration

(Required for all grant applications. If your grant is awarded, all grant awards must be approved by the Board on their weekly consent agenda regardless of amount per local budget law 294.338.)

For applications \$150,000 and below:

COUNTY ADMINISTRATOR	Approved: <input type="checkbox"/>	Denied: <input type="checkbox"/>
Name (Typed/Printed)	Date	Signature

For applications up to and including \$150,000 email form to BCC staff at CA-Financialteam@clackamas.us for Gary Schmidt's approval.

For applications \$150,000.01 and above, email form with Staff Report to the Clerk to the Board at ClerktotheBoard@clackamas.us to be brought to the consent agenda.

BCC Agenda item #: Date:

OR

Policy Session Date:

County Administration Attestation

County Administration: re-route to department at
and
Grants Manager at financegrants@clackamas.us
when fully approved.

Department: keep original with your grant file.