

MEMORANDUM

TO: Clackamas County Board of County Commissioners (BCC)
FROM: Rodney Cook, Director, Health, Housing & Human Services
RE: Update on the Homeless Solutions Coalition of Clackamas County Resource Center in Oregon City – Plans for a Health Clinic Operated by the Health Centers Division
DATE: May 14, 2024

REQUEST:

Health, Housing & Human Services (H3S) is seeking to provide the Board with an update on the Homeless Solutions Coalition of Clackamas County's (HSCCC) development of the resource center in Oregon City. Specifically, staff will update the Board on the HSCCC's plans to include a health clinic in the resource center and their interest in the Health Centers Division (HCD) being the clinic operator.

BACKGROUND:

Since acquiring the former Miles Fiberglass building at 1516 Main Street in Oregon City, the Homeless Solutions Coalition of Clackamas County has been working with an architectural firm to design the buildout of its new 40,000 square foot resource center. The resource center will provide people experiencing housing insecurity or homelessness immediate access to on-site services and connection to other services delivered across the county's recovery-oriented system of care. The goal is to create a resource for the whole community, where local homeless service providers, other health and human services agencies, public safety partners, faith-based organizations, and other interested stakeholders can work together to address homelessness.

The current site design includes:

- 14,000 – 18,000 square feet for The Father's Heart and LoveOne to relocate their day center services from their current location. Day center services include hot meals, showers, laundry, coordinated housing access assessment, and case management.
- 8,000 – 11,000 square feet for a health center that will provide primary medical care, integrated behavioral healthcare, and a pharmacy.
- 4,000 square feet of flexible space for community based organizations and government agencies to deliver services and hold meetings.
- 4,000 square feet for a workforce coffee shop that will provide job training and employment opportunities for resource center clients.

The HSCCC has approached Health, Housing & Human Services with interest in the Health Centers Division being its health center operator. Staff have had preliminary discussions with

the HSCCC about the types of healthcare services it wants delivered on-site and whether there is a good business case for HCD to be the clinic operator.

H3S believes having HCD as the clinic operator would meet a number of county goals, including:

1. **More co-location and coordination of services to reduce barriers to access within the recovery-oriented system of care:** While the resource center is primarily a homeless services access point, most of people accessing homeless services will have unmet health needs.
2. **Increasing geographic distribution of services within the recovery-oriented system of care:** With the move to Lake Road, HCD has lost its footprint for delivering behavioral health services in Oregon City. This would restore that footprint and give the county another connection point for people to be assessed and referred to the future recovery center. It would leverage an existing county investment (the \$10.0 million grant) to provide new space, which is a unique and financially beneficial opportunity. HCD would have low occupancy costs due to the financial model of the resource center.
3. **Protecting HCD's catchment area as a federally qualified health center (FQHC):** The HSCCC intends to have a health center in the resource center whether that is HCD or not. Having another FQHC operating within HCD's service area would negatively impact HCD's financial position because a new FQHC is likely to assume some of HCD's existing patients and the associated revenue.

Based on early discussions with HSCCC, the services provided at the health center will match the priorities and needs of the anticipated population, which is primarily individuals with complex needs who are experiencing housing instability or homelessness. Services will include behavioral health (including drop-in), integrated addiction care, and chronic disease management.

Providing traditional behavioral health in Oregon is often challenging based on state regulations. This location will attempt to honor those challenges but also demonstrate innovative responsiveness to the unique needs of people experiencing homelessness that community health programs have struggled to provide. Many people currently served by The Father's Heart are already HCD patients, so the new clinic would be integrated with the rest of HCD's clinical system. This would present the opportunity for HCD to look at how existing staff can be utilized in this new clinic, but also expand specific services based on the needs of the population. For example, one key addition would likely be an embedded clinical pharmacist to focus on medication safety and management, including for opioid use disorder, to support the most vulnerable and complex medical and psychiatric patients.

The location in downtown Oregon City, with proximity to Clackamas County Parole and Probation, will allow the Clackamas County Sheriff's Office and others to ensure justice-involved individuals receive medications that will reduce overdoses and recidivism, and improve public safety. This would be a valuable expansion of existing partnerships.

For these reasons, H3S intends to proceed under the assumption that HCD will operate the health center in HSCCC's resource center. This will include continued engagement with HSCCC on:

- Building design and build out;
- Program planning, including the array of health care service to be offered and service coordination with other building tenants and county programs;
- Financial modeling to ensure the business model is sustainable; and
- HCD leadership joining H3S and Housing & Community Development leadership at HSCCC events promoting the resource center and county partnership.

H3S anticipates that the new health center will be sustainably funded by a combination of service revenue, funding from health system partners, and Supportive Housing Services funding, with SHS funds being used to close gaps where service revenue and health system funding does not fully cover operating costs.

Respectfully submitted,

Rodney A. Cook

Rodney Cook
Director, Health, Housing & Human Services