

# CLACKAMAS COUNTY BOARD OF COUNTY COMMISSIONERS

## Policy Session Worksheet

**Presentation Date:** July 13, 2021 **Approximate Start Time:** 2:30 pm **Approximate Length:** One Hour

**Presentation Title:** Supportive Housing Services Funds-Behavioral Health Services with focus on Substance Use Treatment Services

**Department:** Health Housing & Human Services

**Presenters:** Jill Smith-HACC, Mary Rumbaugh-Behavioral Health Division

**Other Invitees:** N/A

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

Staff to provide background and information on current behavioral health services with a focus on substance use services available in Clackamas County and the allowable uses of the Supportive Housing Funds for housing and treatment.

### **EXECUTIVE SUMMARY:**

At the request of the Board, H3S, HACC and Behavioral Health Division (BHD) staff are answering questions, and presenting on current needs, as it relates to Clackamas County residents accessing behavioral health services.

The term “behavioral health’ includes mental health and substance use disorder treatment services. The delivery system for mental health versus substance use are very different, with a more significant investment in mental health, historically, than substance use. While an overview is being provided on the mental health services in Clackamas County, there will be more focus on providing information about the substance use delivery system in Clackamas County and the tri-county area. The focus is also on the behavioral health treatment services that are publicly funded and accessed by Clackamas County residents who are on the Oregon Health Plan or uninsured.

### **Behavioral Health Treatment Services Overview**

Health Share of Oregon has 321 providers in their network, serving the tri-county. Of these, 85 provide outpatient substance use treatment services, and there are 207 mental health outpatient providers. There is an array of behavioral health treatment services including specialty services such as detox for substance use disorder or Assertive Community Treatment (ACT) - a focus on transitioning individuals with mental health conditions from the state hospital and helping the individual remain in the community with ‘wraparound’ services. A comprehensive directory for individuals to search for providers based on location, type of services, specialties and language is available at <https://healthshare-bhplan-directory.com/>. Clackamas County Behavioral Health also contracts with local non-profit behavioral health providers to provide services to Clackamas County residents who are uninsured. This includes Clackamas County’s own Health Centers-Behavioral Health Clinics, Lifeworks NW, Cascadia Behavioral Health and CODA.

Development of additional behavioral health services would require partnership with the two Coordinated Care Organizations (CCOs) in the tri-county (Health Share and Trillium Community Health), the State of Oregon-Oregon Health Authority, and to be based on a comprehensive needs assessment. Clackamas Behavioral Health Division is hosting a large community meeting this summer with the CCOs and substance use non-profits to understand the needs that they are seeing for the residents they are serving.

## **Mental Health Treatment Services**

1. ***What is the current system capacity?*** While there is likely an adequate network of mental health providers in Clackamas and the tri-county area, the current issue is a workforce shortage. This is resulting in long waits to get appointments for ongoing services, and sometimes up to several months depending on the provider. Programs like the Clackamas County Mental Health Center that provide an urgent mental health walk-in clinic, ensure a safety net for these individuals seeking more immediate need mental health services. It also provides short term stabilization services until the individual can become established with an ongoing mental health provider in the community.
2. ***Are facilities available locally or regionally?*** In addition to an array of outpatient services, there are eight foster homes, nine residential programs (secure and non-secure) and a supported living program (RainGarden) in Clackamas County.
3. ***What are the current mental health needs of Clackamas County residents?*** It is difficult to measure a point in time need for these services. However, we know, that in 2019, 12% of Clackamas County residents enrolled in Oregon Health Plan and accessed one or more mental health services. That rate increased by another 2% in 2020. This increase was likely due to the telehealth treatment model, which appears to meet the needs of many residents experiencing mental health conditions.

In the 2021 legislative session, most behavioral health related bills focused on mental health services including a state-wide coordinated crisis number, 9-8-8, investments in mobile crisis response and responding to individuals struggling with mental health conditions. The biggest gap for an adequate array of services remains within the substance use treatment

## **Substance Use Treatment Services**

1. ***How is the current system capacity?*** There is no marker for the 'right size' of capacity to need. Most programs, such as detox and outpatient programs do have same day or next day access with a longer wait for residential (within a week or two). County residents can access programs in Clackamas County as well as programs in the metro area.
2. ***Are facilities available locally or regionally?*** In Clackamas County: 18 SUD Outpatient; 0 SUD Residential; 3 Medication-Assisted Treatment; 0 Detox or Sobering Centers. There is adequate/immediate access to outpatient services. The challenge is that Clackamas County does not have detox in our county.
3. ***What is the current need of Clackamas County residents?*** It is difficult to accurately measure "need" but we know, that in 2019, 5.4% of CC residents who are on the Oregon Health Plan accessed one or more SUD services, with that rate decreasing to 4.7% in 2020. The reduction in 2020 is directly related to COVID-19, as the recovery model for substance use includes following a 12 step program with in-person individual and group support. Due to COVID-19, most services moved to telehealth, - not the preferred method for individuals seeking substance use treatment services. We expect to see an increase in demand and access as providers move back to in-person treatment.

There will be future funding available through Measure 110 that the county and non-profits should consider applying for to address community based services needed to support the residents of Clackamas County.

In almost all situations for ongoing recovery, the individual must first obtain and maintain stable housing before they can fully access and utilize treatment services.

## **Supportive Housing Services Measure**

1. ***Can SHS create a new or expanded service network?*** A broad array of mental health and addiction and recovery services are eligible for Supportive Housing Service (SHS) funding. Services are eligible if they are directly connected to successfully housing people experiencing homelessness. Examples of this success include outreach and

housing placement, ongoing case management, mental health treatment, addiction and recovery services, employment supports, peer supports, and more. These and other supportive services can be funded by the SHS program as a component of housing placement and retention services for people experiencing or at risk of homelessness, with an emphasis on people experiencing or at risk of long-term homelessness, and who have one or more disabling conditions.

The SHS Local Implementation Plan, unanimously approved by the Housing Authority Board on 4/13/21 and the Metro Regional Oversight Committee on 5/24/21, includes a commitment to improved behavioral health services alignment with housing and homelessness programs. As the plan states, in implementing the SHS measure the Housing Authority “will consider and invest in strategies that bring flexible, client-centered behavioral health services to housing and homeless services programs, especially with the skills and expertise of peer recovery specialists and culturally specific services. Community-based behavioral health connectors and peer supports will work with housing navigators, shelters providers, and resident services staff to coordinate housing plans and health care supports. These workers will connect people to the mental health care and addiction treatment or recovery services suited to their needs and responsive to their desire for service. Behavioral health and peer support programs funded through the SHS program are intended to enhance the behavioral health system of care, not replace existing levels of service or supplant funding for existing services. These investments will create alternative methods of service delivery focused on serving people experiencing housing instability and homelessness, and bringing behavioral health services into the community, shelters, and housing programs to support health, well-being and housing stability over time. The expansion of federal and state behavioral health investments is still critical to meet the needs of people with mental health conditions and addictions. SHS community-based behavioral health programs will often need to refer people to existing behavioral health services for adequate care.”

### **Priority Populations**

Communities of color and those disproportionately impacted by homelessness.

- At least 75% of funding must be utilized to serve people with disabilities experiencing, or at risk of, prolonged homelessness, and with extremely low incomes
- Up to 25% of funding can be used for people experiencing episodic homelessness, or at risk of homelessness.

### **SHS Regional Values**

Lead with racial equity, fund proven solutions, leverage existing capacity, evolve systems to improve, demonstrate outcomes and impact, and ensure transparent oversight and accountability.

### **FINANCIAL IMPLICATIONS (current year and ongoing):**

Is this item in your current budget?  YES  NO

What is the cost? TBD

What is the funding source? SHS Funds

### **STRATEGIC PLAN ALIGNMENT:**

Ensure healthy, safe, and secure communities

**LEGAL/POLICY REQUIREMENTS:**

N/A

**PUBLIC/GOVERNMENTAL PARTICIPATION:**

N/A

**OPTIONS:**

N/A

**RECOMMENDATION:**

N/A

**ATTACHMENTS:**

N/A

**SUBMITTED BY:**

Division Director/Head Approval \_\_\_\_\_

Department Director/Head Approval *Mary A. Rumbaugh*

County Administrator Approval \_\_\_\_\_

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