

# CATT Steering Committee

November 19, 2020



**WASHINGTON COUNTY**  
**OREGON**

Department of Health and Human Services

# Meeting Overview

- Focus Group Findings
- Project Updates:
  - Building Blocks
  - Programs & Services
  - Follow-up with Comparative Programs
  - Implications of Measure 110
- Discussion

# Focus Group Findings

**Kathy Prenevost**, Addictions Program Supervisor

**Naomi Hunsaker**, Addictions Program Coordinator

# Local Focus Groups

- Certified Peer Mentors and clients from 4th Dimension's O'Rourke Recovery Center
- Certified Peer Mentors from MHAAO (Mental Health and Addiction Association of Oregon)
- Certified Peer Mentors working across settings in Washington County
- Certified Peer Mentors from Bridges to Change
- Leadership from IRCO (the Immigrant and Refugee Community Organization)
- Leadership from Women First (African American agency in Portland)
- Latino Network RAICES parenting group

# Services

*“Allow people to be  
who we are.”  
(Women First)*

- Choices for treatment should be driven by the client
- Services should be culturally responsive; staffing needs to include individuals from the BIPOC community
- Welcome families and include opportunities for family involvement
- Strong connections need to be made with after-treatment resources such as housing and employment

# Accessibility

*“Meet people where they are.”*  
(Bridges to Change)

- There needs to be a warm handoff to and from services and supports, and strong partnerships with community organizations
- Treatment must be available on-demand and offer rapid access to medication to support recovery
- There must be in-reach to the jail and hospitals
- There should be outreach to rural areas, culturally specific communities, and faith groups

# Facility Design

- The center needs to feel home-like and non-clinical
- Services must be co-located and near public transportation
- Have color, art, plants, and windows or outdoor areas
- Have a drop-in community space

# Safety

- Services need to be trauma informed
- Security and police cannot be visible
- Staff needs to represent our BIPOC community

*“Do not over promise anything. Let us know what we can and cannot do. Expectations need to be clear.” (Women First)*



# Client Experience

- The client's first encounter should be with someone with lived experience
- Provide welcoming waiting areas
- Have staff dress casually

*"We need people with personal experience, who are genuine, who care, and do not treat us just like a number." (O'Rourke Recovery Center)*

# Questions/Comments



**Center for Addictions  
Triage and Treatment**  
A Feasibility Study



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# Project Updates

**Kristin Burke, Behavioral Health Division Manager**



# Program Development Work Group

**Ann Martin**

Washington County Crisis Team –  
Hawthorn Walk-In Center

**Dave Mowry**

National Alliance on Mental Illness

**Dustin Sluman**

Washington Co. Emergency Responders

**Greg Bledsoe**

Oregon Health Authority

**Hannah Studer**

Bridges to Change

**J. Sean Fields**

Behavioral Health Council

**Jeremy Koehler**

Health Share of Oregon

**Joe Hromco**

Western Psychological and Counseling  
Services

**John Koch**

Washington County Sheriff's Office

**Kathy Prenevost**

Washington County Behavioral Health

**Katrina McPherson**

Oregon Health Sciences University

**Kristin Burke**

Washington County Behavioral Health

**Lydia Cortez-Hickox**

Citizen Advocate

**Matt Conrad**

Lifeworks Northwest

**Nick Ocon**

Washington County Behavioral  
Health

**Sheila Clark**

Washington County Community  
Corrections

**Stacie Andoniadis**

CareOregon

**Steven Youngs**

Bridges to Change

**Tristan Sundsted**

Washington County Sheriff's Office



## CATT BUILDING BLOCKS

The Building Blocks establish foundational guidance for the planning and potential development of the Center for Addictions Triage and Treatment. They were developed in 2020 by stakeholders from the project's Program Development Work Group and Leadership Team.

### ACCESSIBILITY

#### Core Value

Timely and on-going access to services is critical to the recovery journey of any Washington County resident.

#### Objectives

- Prioritize rapid access to SUD services
- Provide seamless entry into CATT from hospitals, the justice system and other key referral sources
- Work to significantly reduce barriers to care
- Ensure priority services are available on a 24/7 basis
- Strive for no wrong door, with multiple avenues to enter services at CATT

### SERVICES

#### Core Value

We believe that people can recover. Through partnerships and community connections, our services are comprehensive, coordinated and founded on evidence-based practices.

#### Objectives

- Ensure services are culturally responsive and supportive of all community members
- Actively engage community partners in all aspects of program development and planning
- Integrate and coordinate SUD treatment with mental health treatment
- Use a model where peers are active and integrated in all components of the program
- Coordinate care across service systems
- Place a high value on natural supports (i.e. family, friends, community) and engage wherever possible
- Ensure that the program is a viable alternative to jail for non-violent offenders
- Ensure that a harm-reduction approach is prevalent throughout the service array

### CLIENT EXPERIENCE

#### Core Value

Services are driven by the individual and are rooted in dignity, respect, safety, client-choice and timely access.

#### Objectives

- Focus services on meeting clients' self-stated goals with a philosophy of hope and resiliency
- Provide services that are responsive and welcoming to a diverse community
- Ensure the presence of staff that reflect the diversity of the individuals served
- Ensure a life experience perspective is present by integrating peers into all components of care
- Implement seamless transitions through services
- Establish the Center using trauma informed care principles

### FACILITY

#### Core Value

Design a welcoming and inclusive environment that allows services to be provided in a manner that is safe, comfortable and effective.

#### Objectives

- Locate close to public transportation
- Design space with flexibility in mind to accommodate changes in services and community need over time
- Build for long-term growth of community
- Anticipate dedicated or shared space needs of adjunct service providers
- Construct isolated community spaces for separation of services, client privacy and respect
- Utilize design features that promote safety, health and a trauma informed treatment environment
- Utilize furnishings that are durable yet comfortable, and easy to secure, clean and sanitize

### SAFETY

#### Core Value

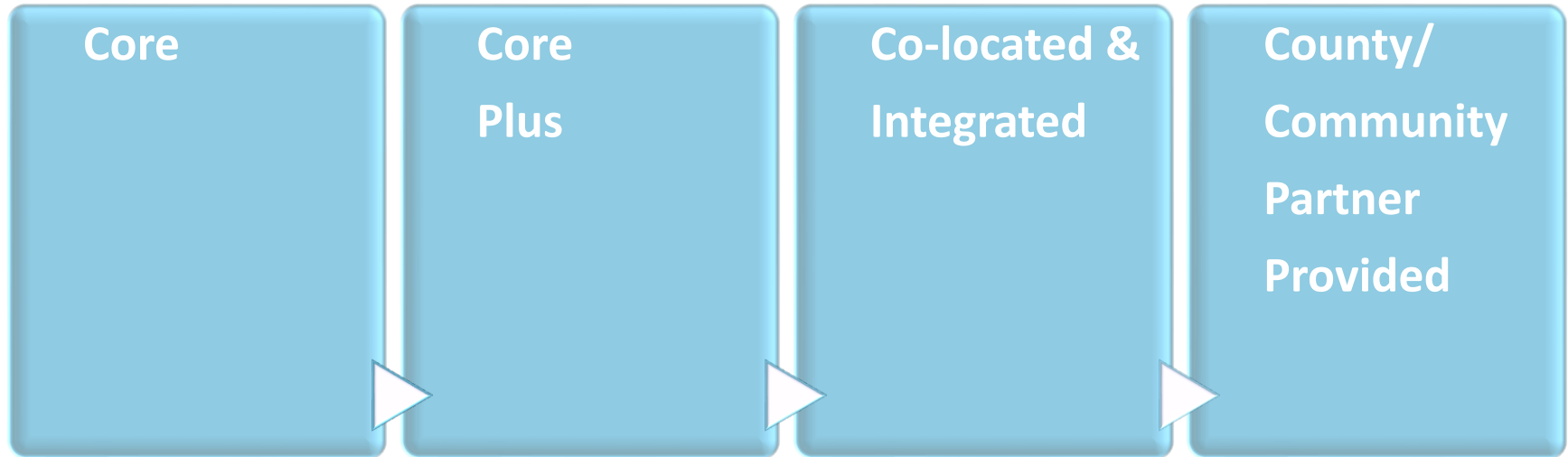
The safety of staff, clients, friends, families, and the community is of utmost importance.

#### Objectives

- Ensure that staff, client and community safety is a key element of facility design
- Research and adopt safety best practices for design and operations
- Establish critical staffing requirements
- Hire and train staff who are compassionate and supportive of clients
- Identify and address external threats to clients, such as domestic violence, through partnership with other organizations
- Clearly define, support, and communicate safety protocols to staff and clients

# Programs & Services:

## A Managed Approach



# Core

***These programs provide critical treatment infrastructure and are foundational to the program design.***

- Assessment
- Sobering
  - Alcohol/Opioids
  - Methamphetamine
- Respite
- Detox (withdrawal management)
- Residential
- Outpatient Stabilization (MAT induction)

# Core Plus

***Adding these programs  
when space and funding  
allow will be beneficial to  
individuals served at the  
CATT.***

- Outpatient SUD Treatment
- Supported Employment
- Transitional Housing
- Mental Health Treatment
- Drop-in Center (flex space)



# Co-located & Integrated

***These programs and services help clients address co-occurring needs. They should be integrated with CATT programs and located on the campus as space allows.***

- Medical Care
- Dental Care
- Child Care
- Benefits and Transportation Assistance
- Pharmacy

# Community/County Partner-Provided

***These supportive services enhance the likelihood of client success. While not located on the CATT campus, partnerships and collaboration should be formally established with consistent referral back and forth.***

- Supportive Housing
- Social Services
- Medical
- Dental
- Education / Family Support
- Animal Care
- Family Justice/Legal Services

# Questions/Comments



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# Follow-up with Comparative Programs

# Restoration Center (San Antonio, TX)



- Planning process:
  - Initiated by staff and elected officials as alternative to more jail beds
  - Lesson learned: decision-makers need to be at the table early
  - Location influenced by existing facilities (courts, jail, Haven for Hope, etc.)
- Interface with justice system partners:
  - Champions include San Antonio Police Chief
  - Emphasize training and regular check-ins
  - Importance of dispatch
  - Sharing justice system intake protocols



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# National Sobering Collaborative

- Consortium of providers focused on shared learning
- Very positive about separated sobering
- Emphasized admissions will grow as law enforcement and other referral sources become aware
- Shared protocols for admission, nursing and medical care

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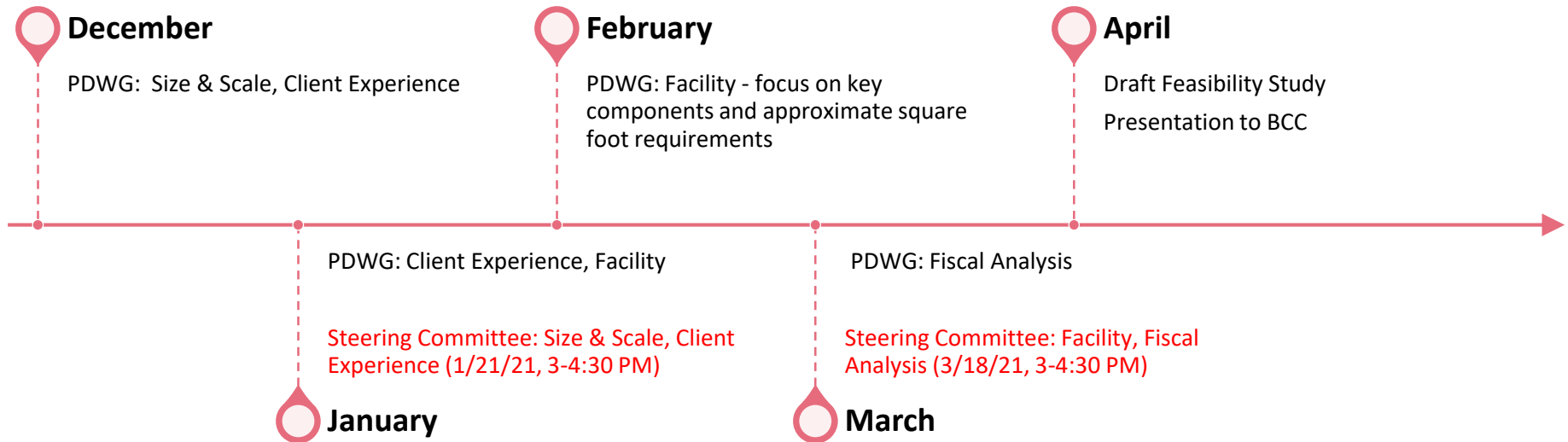
# Implications of Measure 110

- State has several workgroups set up
- Will have implications for schools and other organizations who receive THC funds
- Requires the creation of Addiction Recovery Centers
  - Available 24 hours/day
  - Assessment, support, case management and outreach



# Discussion:

# Next Steps:



# Building Blocks:

Foundational guidance for planning and potential development

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