

CATT PROGRAM DEVELOPMENT WORK GROUP (PDWG)

JUNE 2, 2022

MEETING SUMMARY

Virtual meeting – ZOOM

FACILITATORS: Kristin Burke, Kathy Prenevost

Agenda Item	Meeting Notes
1. Welcome	<p>Facilitators welcomed the group.</p> <p>We last met in February where we focused on sobering services for the CATT. We specifically talked about who the program should serve, whether the program should serve involuntary folks, and how the physical space should look.</p> <p>Today we will provide updates on the work that has occurred over the last four months, including continued planning and some restructuring of work groups.</p>
2. Project Updates	
a. Funding	<p>We did extensive work on estimating the budget late last year. We came up with a total estimated cost to purchase and renovate two buildings of \$40.5 million. It's possible, given inflation, that this amount is now higher, but that's why we included some contingency funds into the estimate.</p> <p>We have \$25.5 million secured, leaving a gap of \$15+ million.</p> <p>There were two key funding opportunities we were pursuing to help fill the gap between what we currently hold for the project and the estimated cost.</p> <p>Opportunities:</p> <ol style="list-style-type: none"> 1. Measure 110 – up to \$17 million 2. Opioid Settlement – up to \$12.7 million 3. Residential Development – \$1.5 million <p>What we know:</p> <ol style="list-style-type: none"> 1. Our grant application was approved on April 26, and we are waiting to hear the total amount. Our next steps are to meet with OHA staff to begin negotiations. The final amount should significantly fill the gap in capital funding. We may be in

	<p>good position to receive a higher portion of our request because OHA has expressed a desire to fund one-time requests to stabilize the commitment for ongoing services funding.</p> <p>2. Washington County stands to receive 12.7 million over 18 years. This amount may increase as additional settlements are approved. Our plan is not to use these funds for capital, if possible, but to support and stabilize operational costs, specifically for unfunded services such as sobering. The amount the county will receive from the settlement is not likely to be enough to fully fund sobering. For this reason, we reached out to the cities in Washington County who are also receiving a portion of the settlement to talk about whether they would like to partner with us.</p> <p>3. We have secured \$1.5 million in residential development money to support the residential treatment side of the CATT.</p> <p>The building at 17911 NW Evergreen Place, Beaverton, will house the CATT Intensive Services. This building is already owned by the county and is ready for us to begin the design work once the architect is selected. We have received permission from the commissioners to use the building for CATT and later this month we will go before the board to complete the transfer of the building for this use. The building should be vacant in June when 911 moves to their new building.</p> <p>The building at 5250 NE Elam Young Pkwy, Hillsboro, is currently under contract to purchase, pending final approval by the board. We hope to place the CATT Community Services here and eventually move the Hawthorn Crisis Clinic and staff from behavioral health here as well. We had hoped to have this building purchased by now. The delay is related to some zoning challenges and a text change is in process. There are a few more hurdles to get through, but we hope to get approval from our board to move forward with the purchase of the building in September.</p> <p>The two buildings are about four miles apart and we have a plan to provide transportation between the two locations, as well as transportation to the CATT from other areas of the county.</p> <p>We are needing to do a fair amount of community engagement around the two sites as not everyone is thrilled to have an SUD center located near them. We have started to meet with neighbors and have plans for open houses.</p>
<p>b. Buildings</p>	

c. De-stigma
campaign

We also felt that doing a media campaign that emphasizes recovery is possible and destigmatizes substance use disorders would be helpful. We are fortunate to have several resources available to help with this effort, including a \$30,000 grant from Trillium Health Plan, support from Tualatin Valley Community Television, and

	<p>a wonderful group of people we call “CATT Champions” who are sharing their very relatable, personal stories.</p> <p>We’ve done a fair amount of research on other existing campaigns, developed key messaging, identified our target audience, drafted some material, and will begin pushing out the messages later this year.</p> <p>Our campaign will be advertised mostly through social media.</p>
3. Project planning	<p><u>Provider Selection</u></p> <p>The review process is beginning for the clinical services provider RFP. We intend to award the contract in June. We received great input from Health Share, CareOregon, Trillium Health Plans and Yamhill CCO during the drafting of the RFP and they will also participate in the scoring. All four organizations have agreed to contract with the awarded provider. This has been an extremely collaborative process.</p> <p>While the CATT will not open for another two years, we want the provider on board now so they can assist with building design. They will join our CATT Leadership Team and inform the intensive services space design. The provider will refine the clinical services and begin planning for staffing and training. The awarded provider will be allowed to subcontract with additional providers, with approval by funders.</p> <p><u>Architect Selection</u></p> <p>We have selected Holst Architecture. They will be onboarded soon. We will orient them to the philosophy of the CATT and our building blocks. We will ensure that additional input is solicited from the subject matter experts.</p> <p><u>Project Organization</u></p> <p>We are restructuring the project organization for the development phase. We will combine committees and work groups where it makes sense, and add committees that will be necessary to advance the next phase. The provider and architect will play key roles in the new, simplified structure. During our planning for the development phase, we realized that while the PDWG was incredibly valuable in forming the foundation of the CATT, the project is shifting and the provider will take the lead in many areas. We felt that this was the right time to retire the PDWG.</p> <p><u>Public Safety Work Group</u></p> <p>There are two new work groups in the revised structure. We launched the Public Safety Work Group in May to provide guidance on the development and implementation of the CATT, especially around public safety. While safety is a primary concern, these partners will also help decide the triage and transport protocols and create a jail diversion procedure. We want to ensure that the</p>

	<p>coordination between the CATT and first responders is positive, collaborative and centered on the folks we will serve. This group will also address neighborhood concerns around perceptions of safety at the center. We are starting the work group with representatives from local law enforcement agencies and will later expand to include criminal justice partners.</p> <p>Service Delivery Advisory Committee This committee will be advisory to the leadership team, with the goal of helping inform how services are delivered. We will begin recruiting for this group once the provider is on board. While the PDWG laid the foundation for the project, the Service Delivery Advisory Committee will focus on the interface with other systems and the experience of the client. We want significant representation and perspective from both peers and system partners on this committee.</p> <p><u>Program Development Work Group is retired</u> This group began in early 2020, right before the pandemic. We met twice in person then transitioned to virtual meetings due to COVID-19. It is pretty amazing what we accomplished while trying to figure out how to meet virtually.</p> <p>The group has completed its work, which was foundational to the project. The county staff truly appreciate the commitment, time and energy from all of you during the past 28 months. Well done! We enjoyed working with all of you. Together we accomplished a lot, and it is time to celebrate the success.</p> <p>What is one takeaway you had from being a part of this project?</p> <ul style="list-style-type: none"> • It was a great experience! • It was nice to see and be able to work across the different systems. (Medicine is usually pretty siloed so it was nice to work with others). • It has been really nice to actually see folks with lived experience as part of the project. • This was done right.
<p>Key dates and next steps for the CATT</p>	<p>Timeline:</p> <p>July 2022 – June 2023: Design work</p> <p>Fall 2021 – Summer 2024: Construction</p> <p>Fall 2024: Final prep</p> <p>Late 2024: Begin staggered opening</p> <p>If you are interested in continuing with the project as we move into the development phase, let us know.</p> <p>Keep an eye out for our de-stigma campaign.</p> <p>Subscribe to our newsletter and encourage others to do so as well.</p>