

March 20, 2025 - Community Meeting - Question & Answer

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Panel of Speakers:

Jessica Vega Pederson, *Multnomah County Chair*

Meghan Moyer, *District 1 Commissioner*

Robert Stewart, *Multnomah County Sheriff's Office Captain of Law Enforcement Division*

Brian Hughes, *Portland Police Bureau Central Precinct Commander*

Skyler Bocker-Knapp, *City of Portland Director of Portland Solutions*

Heather Mirasol, *Multnomah County Health Department Director of Behavioral Health*

Anthony Jordan, *Multnomah County Health Department Addictions Senior Manager*

Marc Harris, *Multnomah County Health Department Strategic Initiatives Manager*

Dan Zalkow, *Multnomah County Director of Facilities and Property Management*

Dorothy Elmore, *Multnomah County Workplace Security Director*

Introduction to the Project:

The Chair began the Community Meeting by first recognizing the work done by Commissioners Brim-Edwards and Moyer, as well as Oregon State Representative Rob Nosse. Their contributions have been vital to making the Coordinated Care Pathway Center (Pathway Center) and the future Sobering and Crisis Stabilization Center a reality. The purpose of this meeting was to inform the public about the plans and purpose of the Sobering and Crisis Stabilization Center. This includes the services that will be provided at the Center, updates concerning the acquisition and renovation of a facility at 1901 SE Grand, and an overview of the neighborhood engagement process.

Sobering & Crisis Stabilization Center Project



1901 SE Grand Avenue, Portland, Oregon

Also important was providing a space for the public to give feedback and ask questions of the team.

Commissioner Moyer expressed her strong support for the Center. She noted her passion for recovery and helping people on the path to recovery. She also wants to ensure that the Center commits to being a good neighbor by being responsive to feedback and concerns from her constituents.

Addictions Senior Manager, Anthony Jordan, provided an overview of the Sobering & Crisis Stabilization Center Plan, location, and process. He started with an overview of the deflection program and the establishment of the Coordinated Care Pathway Center (Pathway Center) in October 2024. Phase II of the Pathway Center will open at the current temporary site at 980 SE Pine Street by May 2025. It offers 13 sobering stations and provides services such as comfort medications, observation, and discharge planning (sobering services opened April 30). He notes that this is not medically managed detox services (aka withdrawal management), but provides comfort medications and retains individuals for less than a 24 hour period. This will continue to be a destination for law enforcement, first responders, and other partners to transfer intoxicated individuals as a safer alternative to jail or the Emergency Department.

Pathway Center services will eventually move to the permanent location at 1901 SE Grand Ave. At this location, withdrawal management services, medication assisted treatment with buprenorphine, deflection services, sobering services, and care coordination will be provided.

A request for proposals (RFP) for providing these services will be published in Spring 2025 with selection of operator(s) in Summer 2025. Multiple vendors may be able to qualify to provide these services. The vendor(s) will have an opportunity to assist the County in design development of the facility and operations.

Director of Facilities and Property Management, Dan Zalkow, gave an overview of acquisition progress of a permanent facility. The County has identified a site to purchase located at 1901 SE Grand Ave. The due diligence period ended on March 4th of this year. There is a closing date of April 3 (the County did close on the property on April 3). The County submitted an emergency shelter application to the City for zoning approval (it was approved in March 2025)

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After purchase, the next step is to complete design and then do a major upgrade. This includes extensive work on the infrastructure such as the HVAC and electrical systems. The County has been working with Scott Edwards Architects on programming and conceptual design for many months. Fortis Construction will submit an initial draft budget and project schedule for renovation of the site this March or April (these were submitted in late March).

County Workplace Security Director, Dorothy Elmore outlined steps that the County will take to keep spaces safer within the facility and surrounding area. Handouts summarized resources available to let people know who to call for what issues and when. This includes services like 911, Portland Street Response, 311, the County Behavioral Health Call Center, and the County Security Operations Center. The County will use best practices from the current Pathway Center to inform the security plan for the permanent Sobering and Crisis Stabilization Center. At the Pathway Center, there are 3 security officers at the facility itself, with bag check, no weapons and drugs policies in place. Officers also perform regular patrols around the Pathway Center. There is 24/7 video surveillance both within the facility and externally around the facility. These approaches are working. There have been minimal complaints since the Pathway Center opened. Crime rates in the area have actually decreased since opening.

Health Department Strategic Initiatives Manager, Marc Harris, outlined the plan for ongoing neighborhood engagement surrounding the planning and opening of the permanent facility. This engagement approach is split into four stages - Stage One (where we are currently) is community outreach meetings with partners such as business councils, neighborhood associations, and governmental entities like the City. Postcard mailings went out to residents in the vicinity of the proposed site, as well as geo-located social media advertisements. Neighborhood stakeholders were invited to submit public testimony at a Board of County Commissioners meeting scheduled on April 17, 2025.

Stage Two of the Engagement Plan includes informational posters and meetings after the facility operator is selected from the Request For Proposal (RFP) process. This stage will likely continue through Winter 2025/26. Stage Three will include continuing to meet with neighborhood advisory groups to develop a Good Neighbor Advisory Council (GNAC) and develop a signed Good Neighbor Agreement (GNA). Stage Four occurs post opening of the permanent facility and is a sustaining collaboration with neighborhood stakeholders to adhere to the GNA.

Question & Answer Session

Building and Site

Q: What was the thought process around the location of this permanent facility? If this facility is successful, would this permanent facility be able to be replicated out in East Portland?

A: It was important to establish the size or scale of the facility first and we knew it needed to be centrally located. The facility on Grand Avenue met all needs. There is a lot of need for these services downtown and in East County. The County continues to work with community-based organizations to provide peer based support and outreach teams in East County. The addition of Portland Street Response shuttling and building out additional transportation options, including for East County, can also help to get individuals to and from the facility.

Q: What is the completion schedule for the permanent facility?

A: The first schedule provided by the General Contractor shows a project completion date of summer 2027.

Q: How was Fortis selected as the contractor for the permanent facility? Was this put out for bid?

A: The selection process was similar to what the County uses for library bond capital projects. It is called a CMGC (construction manager/general contractor) project delivery method which undergoes a formal procurement early in the design phase. The construction manager provides both pre-construction services, such as cost estimating and constructability reviews, and then the construction services themselves. It is a close collaborative process that helps the construction company provide input on cost and schedule, and provide a guaranteed maximum price, which is negotiated by the County. This helps inform the design process while staying competitive.

Q: Regarding the cost of this project, what will be put into place to prevent cost overruns?

A: Fortis Construction will put together a proposal that includes what is called a guaranteed maximum price. If accepted, we will have high confidence in costs going forward. This maximum price offer is open to negotiation.

Q: How will the cost of acquisition, renovation, and ongoing operations be affected by the County's budget issues?

A: The funds for this project come from a combination of sources. The current Pathway Center is funded by the State and County. The County is continuing to identify additional capital and operating funds, including potential City funding. The deflection program will continue to be funded through the State Criminal Justice Commission. One-time-only State capital funds covers purchase of the Sobering and Crisis Stabilization Center facility and a portion of renovation costs. Once the permanent facility opens, the operator will be able to bill Coordinated Care Organizations (CCOs) and other insurance for withdrawal management and medication assisted treatment services to recoup some of the ongoing operational costs.

Program Development

Q: How many beds and staff will be on hand at the permanent facility?

A: We are planning for a facility with up to 50 beds, and 24/7 staffing. Provider responses to the Request For Proposal (RFP) solicitation will help determine staffing ratios. Staffing will include medical, clinical, peer, and support staff.

Q: What is the anticipation of the impact of the addition of these beds? Will there be more sobering centers set up if this is successful?

A: The temporary site with sobering services will give us indications of program impact and inform what to include in the permanent program. The County expects the services offered to be a positive intervention that creates additional paths to treatment and recovery.

Q: What is the difference between sobering services and withdrawal management?

A: Sobering services are short-term (less than 24 hours) and focus on stabilization of the individual. These services keep individuals under observation, monitor vitals, and provide comfort medications as appropriate.

Withdrawal management (aka detox) is a medically or clinically managed inpatient program that assists individuals to safely withdraw from the physical effects of psychoactive substances. Withdrawal Management can take from 1-14 days depending on the substance and acuity of the individual. Individuals can transition from sobering services to withdrawal management.

Q: In closing the original Hooper sobering facility in 2019, the reason given was that individuals brought in were too medically complex to treat. What procedures will be put in place at the permanent facility for medically complex individuals that are brought in?

A: There will be procedures in place to provide medical assessments and screenings at the permanent facility intake. This will ensure that the services provided are medically appropriate and sufficient to treat the individual. With sobering services, the facility will provide comfort medications. These can also include medications for calming. If the individual has medical and/or behavioral health needs that are too complex for the permanent facility to treat onsite, they will be transferred to an appropriate hospital emergency department.

Q: What will be the approach to safety and security?

A: The permanent facility will have security officers on-site. They will communicate 24/7 with the County Security Operations Center to dispatch officers as needed to and around the facility. The facility will also be in direct contact with the Multnomah County Sheriff's Office and Portland Police Bureau.

Q: There were safety concerns around the deflection site [the Coordinated Care Pathway Center]. Even though access to the facility is by responder referral only, there seems like there is nothing stopping an individual who is brought into the facility from leaving once they arrive, and then remaining in the immediate vicinity of the facility. Are individuals who are brought into the facility held against their will?

A: Portland Police Bureau acknowledges their ongoing partnership with the County to support the Pathway Center. At first, drop-off only for individuals was thought to be problematic. Law enforcement ensures that the handoff of the individuals to the facility staff member is done within the clinic. Individuals are handcuffed until they are brought inside to intake. There have been very few individuals who leave the facility shortly after they arrive. Of the individuals who leave, half leave on their own, and the other half request transportation to services or another location. There has been no sign of increased crime in the area since the Pathway Center opened. The area around the facilities is prioritized for cleanup and removal of illegal camping sites by the city.

Q: Will transfers of individuals to the permanent facility be limited to only law enforcement officials?

A: Initially yes, only law enforcement and first responders will be able to refer individuals to the permanent facility. Utilization and capacity levels will be continuously reviewed along with facility needs. Provider referrals will be phased in as services stabilize in a new environment and further partnerships develop.

Q: How do law enforcement officers assess individuals to see if they should be transferred to the facility vs. Unity/emergency department? Who is on staff at the facility to determine that? What about management of individuals with co-occurring disorders?

A: Law enforcement has training and field protocols that help officers determine what facility is most appropriate for individuals. The County continues to work with system partners such as Unity and Providence to establish the most effective pathways for highly acute individuals who are not appropriate for our services. The Pathway Center partners with Tuerk House who has medical and clinical staff on-site to assess individuals and refer them to higher levels of care as needed. The deflection program has provided the County with best practices and a solid base to develop systems for the permanent facility. The last thing law enforcement wants to do is bring a person who is too acutely sick to the facility.

Q: For those involved in the planning and opening of the Behavioral Health Resource Center (BHRC) downtown, they may remember the process as difficult as there were a lot of individuals in one place and capacity was underestimated.

A: This facility is different from the BHRC. The BHRC is a day center, shelter, and bridge housing program and not a sobering and withdrawal management facility. The BHRC has a completely different intake process. Clients wait in line first thing in the morning blocks away from the building at an outreach van and receive entry via a ticket issued for specific times and services.

The Sobering and Crisis Stabilization Center is a referral by agency only facility. This means that only law enforcement, first responders, and other partners will bring individuals into the facility. Transportation logistics in and out of the facility will be offered and arranged. Many individuals at the existing Pathway Center want to return to where they were picked up or be transported to services. This is a different intake process than current withdrawal management facilities that have a set time of day for intakes.

Q: The neighborhood acknowledges that there is a need for sobering services in the city and appreciates the responder referral model that includes individuals being transported to the permanent facility. There are future concerns about the site turning into something else that may change the responder referral model, such as a safe injection or consumption site. Will there be something in the Good Neighbor Agreement that will prohibit a change in the use of the facility?

A: There are no conversations at this time regarding development of a safe use, injection or consumption site within the county. The County does not foresee any programmatic changes happening for the facility and considering any changes would be a long-term process that would be discussed with neighborhood stakeholders.DRAF

Q: What will be the animal policy for the permanent facility? Many individuals who may be eligible for these services have animal companions and may not be willing to go to the facility for services if they cannot bring their animals.

A: We are aware of this and are working on how to address this issue.

Neighborhood Engagement

Q: How can interested individuals contribute to the drafting of a Good Neighbor Agreement (GNA)?

A: As part of the community engagement plan, an advisory group will be set up with the Hosford Abernethy Neighborhood District (HAND) and the Central Eastside Industrial Council (CEIC) to invite additional perspectives and ideas to draft a GNA that prioritizes community agreements. The advisory council can suggest ideas and approaches to outreach in the neighborhood, and reporting structures for quality of life. It is suggested that community members sign up for the permanent facility mailing list for regular updates. Subscribing to the HAND email list will connect folks to broader neighborhood information and opportunities to participate. Components of the GNA can be informed by existing GNAs from other projects in the area such as the Clinton Triangle Temporary Alternative Shelter Site and Avalon Village micro-housing.