



Study Session

SS

Milwaukie City Council

COUNCIL STUDY SESSION

City Hall Community Room, 10501 SE Main Street
& Zoom Video Conference (www.milwaukieoregon.gov)

AGENDA

APRIL 8, 2025

Council will hold this meeting in-person and by video conference. The public may come to City Hall or join the Zoom webinar. This meeting will not be aired live, it will be recorded and broadcast later.

For Zoom login visit <https://www.milwaukieoregon.gov/citycouncil/city-council-study-session-2>.

Written comments may be delivered to City Hall or emailed to ocr@milwaukieoregon.gov.

Note: agenda item times are estimates and are subject to change.

Page #

1. Supervisory Control and Data Acquisition (SCADA) Demonstration – Discussion (5:15 p.m.)

Staff: Peter Passarelli, Public Works Director

2. Per- and Polyfluoroalkyl Substances (PFAS Update) – Discussion (6:15 p.m.)

Staff: Peter Passarelli, Public Works Director

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3. Council Reports (6:45 p.m.)

4. Adjourn (7:00 p.m.)

Meeting Accessibility Services and Americans with Disabilities Act (ADA) Notice

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Servicios de Accesibilidad para Reuniones y Aviso de la Ley de Estadounidenses con Discapacidades (ADA)

La ciudad se compromete a proporcionar igualdad de acceso para reuniones públicas. Para solicitar servicios de asistencia auditiva y de movilidad, favor de comunicarse a la Oficina del Registro de la Ciudad con un mínimo de 48 horas antes de la reunión por correo electrónico a ocr@milwaukieoregon.gov o llame al 503-786-7502. Para solicitar servicios de traducción al español, envíe un correo electrónico a espanol@milwaukieoregon.gov al menos 48 horas antes de la reunión. El personal hará todo lo posible para responder de manera oportuna y atender las solicitudes. La mayoría de las reuniones del Consejo de la Ciudad se transmiten en vivo en el [canal de YouTube de la ciudad](#) y el Canal 30 de Comcast dentro de los límites de la ciudad.

Executive Sessions

The City Council may meet in executive session pursuant to Oregon Revised Statute (ORS) 192.660(2); all discussions are confidential; news media representatives may attend but may not disclose any information discussed. Final decisions and actions may not be taken in executive sessions.



COUNCIL STUDY SESSION

City Hall Community Room, 10501 SE Main Street
& Zoom Video Conference (www.milwaukieoregon.gov)

MINUTES

APRIL 8, 2025

Council Present: Councilors Adam Khosroabadi, Robert Massey, and
Council President Will Anderson, and Mayor Lisa Batey

Council Absent: Councilor Rebecca Stavenjord

Staff Present: Joseph Briglio, Assistant City Manager
Nicole Madigan, Deputy City Recorder

Peter Passarelli, Public Works Director

Mayor Batey called the meeting to order at 5:17 p.m.

1. Supervisory Control and Data Acquisition (SCADA) Demonstration – Discussion

Passarelli provided a demonstration on the city's SCADA system which operates the city's drinking water wells and storage facilities. **Passarelli** and Council discussed how the system operates.

2. Per- and polyfluoroalkyl substances (PFAS Update) – Discussion

Passarelli provided an update on PFAS, a group of synthetic chemicals used in firefighting foams and other commercial products since the 1940s, shared the impacts of the chemicals on people and wildlife, along with the history of their regulation. **Passarelli** outlined new federal regulations adopted in 2024 requiring compliance by April 2029 and explained the impacts of those changes on the city's water system.

Passarelli reviewed where Milwaukie's groundwater wells were in connection with contamination sites. The group discussed why water was regulated over the contaminants themselves.

Passarelli reviewed past and recent monitoring efforts, noting sampling in 2023 and 2024 found slightly elevated PFAS levels at several wells, though entry-point testing showed lower levels due to treatment blending. **Passarelli** stated that while it's not yet certain the city will be required to treat, the indicators suggest treatment will likely be necessary, and shared that the city received a \$125,000 grant to conduct a feasibility study. **Passarelli** presented potential treatment technologies, where those treatment facilities would be located, and which wells needed to be treated.

The group discussed residual byproducts of treatment, cost implications, funding strategies, and federal and state compliance timelines. The estimated cost for treatment and associated upgrades was approximately \$22 million.

Passarelli shared that litigation was underway against major manufacturers for contamination damages, and Milwaukie had filed claims in several settlements.

The group reviewed maps of well locations, contamination susceptibility, and aquifer travel times, which would guide future planning and prioritization.

3. Council Reports

Mayor Batey introduced a discussion on the city's board, committee, and commission recruitment. **Madigan** reviewed the number of applications received, the number of

vacancies, and the structure of the upcoming interview process. Council discussed panel assignments and when to pre-screen candidates. The group agreed to interview all applicants when the number of applicants was seven or fewer. For committees with more than seven applicants, a paper-only pre-screening process would be used, involving the mayor, assigned Council member, staff liaison, and board/committee chair. **Madigan** noted that pre-screening would be completed in April, with interviews scheduled for May and appointments in June.

The group acknowledged the high number of applications received this year.

Mayor Batey and **Council President Anderson** provided updates on recent Supportive Housing Services (SHS) and Clackamas County Coordinating Committee (C4) meetings. The group discussed regional challenges and models related to housing-first and recovery-oriented systems of care. Council reviewed materials from Clackamas County about current SHS investments and planned facilities, including the county stabilization center to be located in Milwaukie.

Mayor Batey provided an update on a recently attended Metro Mayors Consortium, offered to share additional housing policy materials collected from that meeting, and requested input from Council on vision statements for SHS goals.

Mayor Batey briefly touched on legislative updates, noting that Council would be discussing Oregon House Bill (HB) 2138 during their next Council meeting and shared that Milwaukie's funding request for the Milwaukie Bay Park (MBP) project had been submitted and was awaiting a decision.

Councilor Khosroabadi shared an update from the recent Clackamas County Community Action Board (CAB) meeting, including statistics on life expectancy for unhoused individuals and the importance of stable housing in addressing addiction and mental health issues.

Mayor Batey and **Council President Anderson** briefly discussed scattered sites.

4. Adjourn

Mayor Batey adjourned the meeting at 7:22 p.m.

Respectfully submitted,



 Nicole Madigan, Deputy City Recorder

COUNCIL STAFF REPORT

To: Mayor and City Council
Emma Sagor, City Manager

Date Written: March 27, 2025

Reviewed: Jennifer Garbely, City Engineer

From: Peter Passarelli, Public Works Director

Subject: **Per- and Polyfluoroalkyl Substances (PFAS) Update**

ACTION REQUESTED

Council is asked to receive a presentation concerning per- and polyfluoroalkyl substances (PFAS) and their potential impacts to the city's drinking water system and potential mitigation.

HISTORY OF PRIOR ACTIONS AND DISCUSSIONS

[March 19, 2024](#): An update on PFAS was presented by staff and discussed with Council.

[February 18](#): Council adopted a resolution authorizing the mayor to sign a forgivable loan financing contract with the State of Oregon for \$125,000 in federal funding for a PFAS feasibility study.

ANALYSIS

On April 10th, 2024, the Environmental Protection Agency (EPA) adopted new drinking water rules concerning PFAS. PFAS are a group of chemicals that have been in production since the 1940s and have been widely used in common items like nonstick cookware and stain-resistant fabrics, as well as in firefighting foams and products. These compounds break down slowly and can therefore persist in the environment. There is evidence that continued exposure to PFAS can cause adverse health effects. The new rule establishes the maximum contaminant level (MCL) to 4.0 ppt for the most common PFAS chemicals perfluorooctanoic acid (PFOA) and perfluorooctane sulfonate (PFOS) and a hazard index-based method for four additional PFAS compounds.

The new rules will require the city to conduct initial monitoring within the first three years after April 2024 at all entry points to the distribution system. This monitoring will be conducted on a quarterly basis during a 12-month period. Compliance with the rule will be based on the annual running average of the sample results.

The EPA's fifth Unregulated Contaminant Monitoring Rule (UCMR) required monitoring for 29 PFAS compounds. Milwaukie took samples for this in February 2024 and in fall of 2024 and detected the presence of results in four of the samples. that slightly exceeded the April 2024 adopted standard for PFOS. These results are in the table below. It is expected that additional compliance sampling will continue to detect the presence of PFOS slightly above the MCL. To achieve compliance with the adopted PFAS rules the city will need to treat and remove the contaminants by 2029.

Per- and Polyfluoroalkyl Substances (PFAS) February 2024						
				Location Sampled		
Substance	Unit	Oregon Health Advisory Level (HAL)	Adopted New MCL	Upper Treatment Plant	Lower Treatment Plant	Stanley Well 6
Perfluorooctanoic acid (PFOA)	ppt	30 ppt	4 ppt	ND	ND	ND
Perfluorooctanesulfonic acid (PFOS)	ppt	30 ppt	4 ppt	4.5	6.3	ND
Per- and Polyfluoroalkyl Substances (PFAS) Fall 2024						
				Location Sampled		
Substance	Unit	Oregon Health Advisory Level (HAL)	Adopted New MCL	Upper Treatment Plant	Lower Treatment Plant	Stanley Well 6
Perfluorooctanoic acid (PFOA)	ppt	30 ppt	4 ppt	ND	ND	ND
Perfluorooctanesulfonic acid (PFOS)	ppt	30 ppt	4 ppt	4.2	7	ND

Next Steps:

Staff will continue to test and monitor water quality in compliance with state and federal requirements to ensure a safe water supply. Staff will begin quarterly sampling in the 2nd quarter of 2025 from all entry points into the distribution system as well as samples from each well. Staff are working with water quality engineers to evaluate cost effective treatment options to remove PFAS from the water. Potential conceptual options will be discussed at the April 8 study session. These options include centralized treatment and decentralized treatment. Staff are also pursuing federal and state grants and loans to reduce the impact to ratepayers, most recently \$125,000 for a PFAS feasibility study using funds made available from the Bipartisan Infrastructure Law (BIL) Clean Water State Revolving Fund Emerging Contaminants (EC) Supplemental Appropriation. Upon completion of the study, the city will be eligible for additional funding for PFAS treatment improvements under the BIL-EC appropriation.

CLIMATE IMPACTS

Future capital work associated with mitigating impacts of PFAS will also consider the impacts of potential treatment system and will look for ways to reduce energy consumption within those treatment processes.

EQUITY IMPACTS

Clean quality drinking water is critical, and it is important to reinvest in the city's infrastructure to ensure that the city can provide this critical commodity. These investments come at a cost to all ratepayers. The city will continue to provide low-income assistance to eligible utility customers to mitigate impacts on those customers.

BUDGET IMPACTS

The presence of PFAS in the local aquifer will result in the need to install additional treatment to remove PFAS, which will require additional capital and operating expenditures. The feasibility study will consider and document the potential costs for staff to consider in future budgeting cycles.

WORKLOAD IMPACTS

Future work related to PFAS will be a collaborative effort between public works and engineering departments.

COORDINATION, CONCURRENCE, OR DISSENT

Not applicable.

STAFF RECOMMENDATION

Not applicable.

ALTERNATIVES

Not applicable.

ATTACHMENTS

None



CITY OF MILWAUKIE

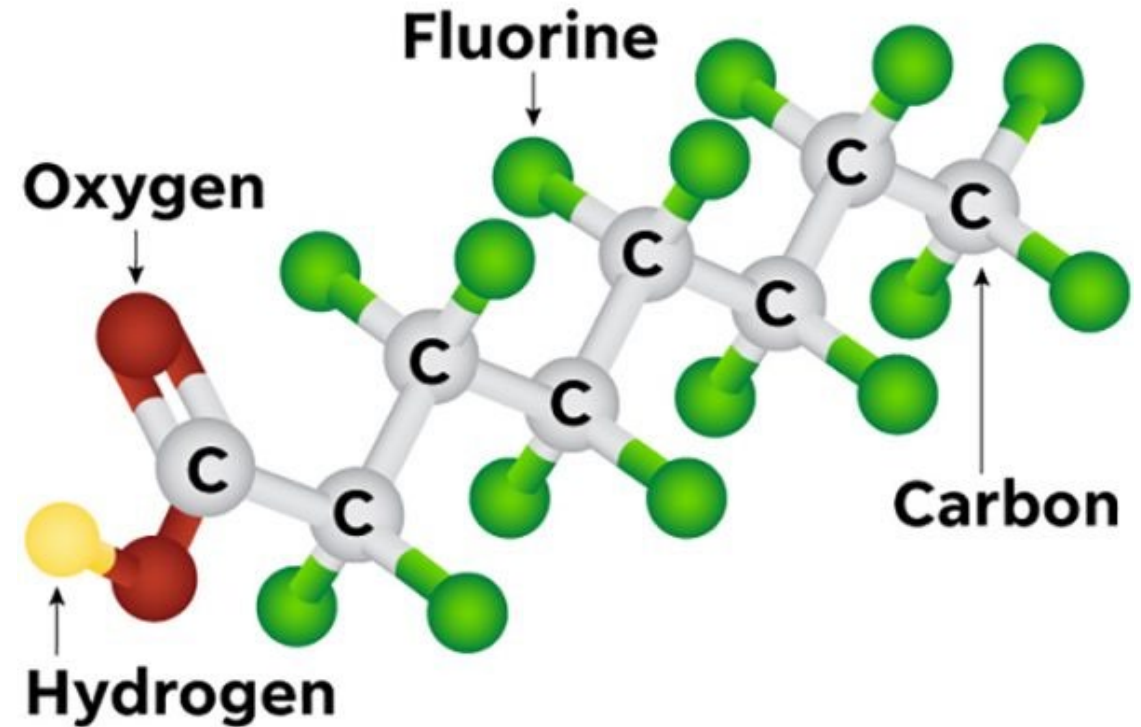
Per- and Polyfluoroalkyl Substances (PFAS)

April 8, 2025



Per- and Polyfluoroalkyl Substances (PFAS)

- PFAS are synthetic chemicals that have been manufactured and used by a broad range of industries since the 1940s.
 - Most commonly known - PFOS & PFOA
- PFAS are used in many applications because of their unique physical properties such as resistance to high and low temperatures, resistance to degradation, and nonstick characteristics.
 - used in firefighting foam, electronics manufacturing, chrome-plating, paper manufacturing, and other consumer and industrial uses.
- PFAS' have been detected worldwide in the air, soil, and water.
- Persistent, bioaccumulative, and associated health impacts
- There is evidence that continued exposure above specific levels to certain PFAS may cause adverse health effects.



PFAS Regulation



- **EPA's Final Rule Announcement:**
 - In April 2024, the EPA announced the final National Primary Drinking Water Regulation for six PFAS compounds.
- **State Adoption**
 - States have **two years** to adopt these new requirements and apply for primacy approval to oversee their implementation.
 - State regulations must be at least as stringent as the EPA's standards.
 - **Monitoring and Compliance Deadlines for Public Water Systems:**
 - **Initial Monitoring:** Must be completed by **April 26, 2027**.
 - **Compliance Monitoring:** Begins after initial monitoring and includes public notification and Consumer Confidence Report updates as necessary.
 - **Full Compliance:** All systems must comply with the MCLs by **April, 2029**.
- **EPA Support and Funding:**
 - EPA is providing guidance and **\$1 billion** in funding through the Infrastructure Investment and Jobs Act to assist with PFAS testing and treatment.

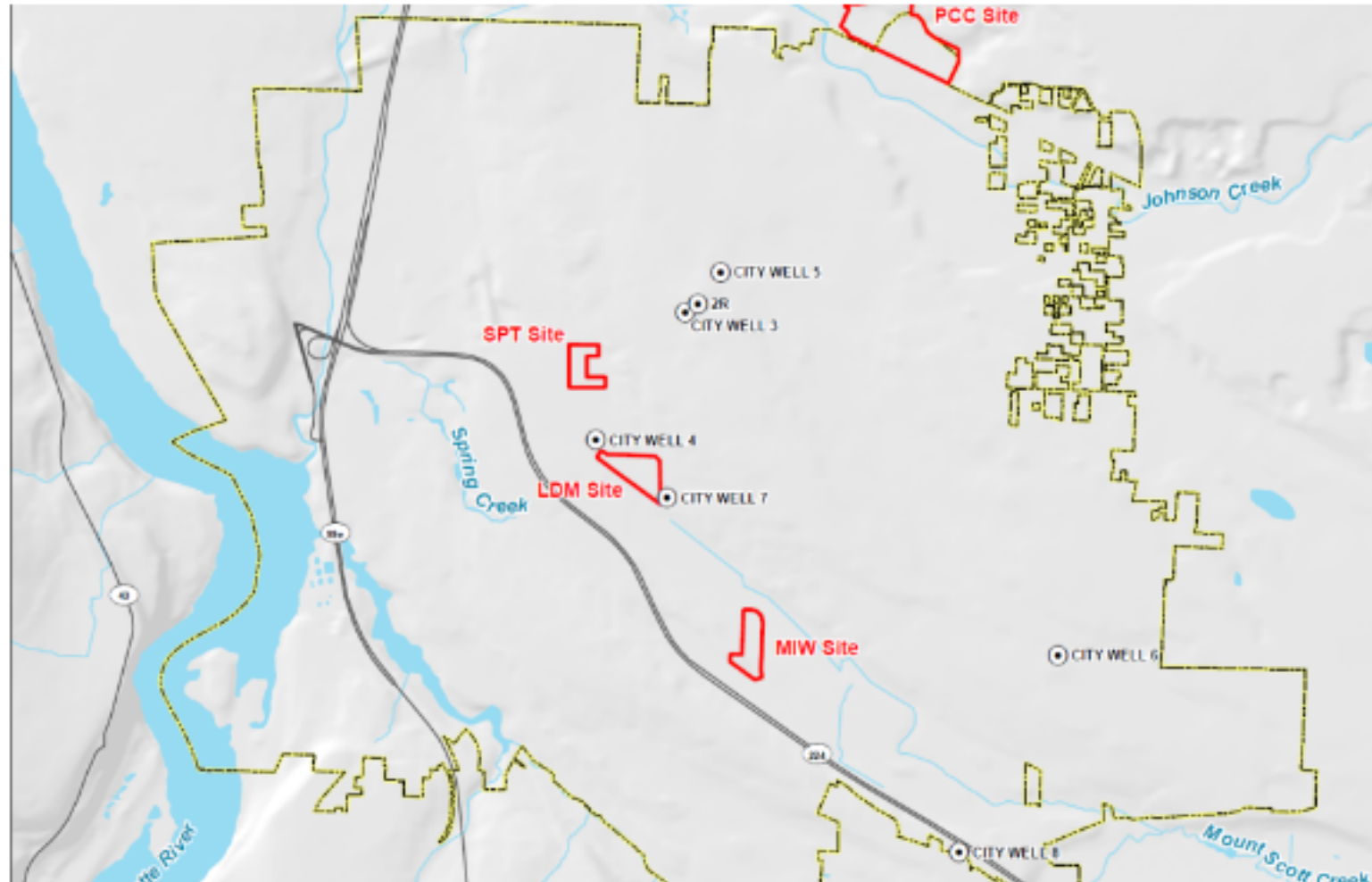
Regulatory Levels: Summary



Chemical	Maximum Contaminant Level Goal (MCLG)	Maximum Contaminant Level (MCL)
PFOA	0	4.0 ppt
PFOS	0	4.0 ppt
PFHxS	10 ppt	10 ppt
HFPO-DA (GenX chemicals)	10 ppt	10 ppt
PFNA	10 ppt	10 ppt
Mixture of two or more: PFHxS, PFNA, HFPO-DA, and PFBS	Hazard Index of 1 (unitless)	Hazard Index of 1 (unitless)

*Compliance is determined by running annual averages at the sampling point

City of Milwaukie Groundwater Wells



- Six active wells
- Depths of ~300 to ~400 feet
- Completed in alluvial material that is not hydraulically isolated from surficial activities

Sampling Results at PMW-4

Table 1. PFAS Concentrations in Monitoring Well PMW-4.
City of Milwaukie, Oregon.

Method			EPA 533 (ppt)				
Screening Criteria			PFOA	PFOS	PFBS	PFHxS	PFHxA
OHA-HALs			30	30	--	--	--
EPA Proposed MCL			4	4	--	--	--
Sample ID	Sample Date	Sample Type					
PMW-4-20230720	7/20/2023	Primary	4.7	9.03	7.06	5.4	ND U
PMW-4-FD-20230720	7/20/2023	Field Duplicate	4.7	8.67	7.64	5.71	3.08

Notes

Orange highlight = Result exceeds the referenced OHA-HAL

Yellow highlight = Result exceeds the referenced proposed MCL

BOLD: Detection

EPA: Environmental Protection Agency

MCL: Maximum Contaminant Level

OHA-HAL: Oregon Health Authority Health Advisory Level

ND = Not Detected

U = Result not detected above the referenced laboratory detection limit

-- = Not analyzed or not applicable

ppt = parts per trillion

PFAS and Milwaukie

- Retest and expand sampling to additional monitoring wells
 - Sampled in January 2024 –Detected
 - Depths PMW- 1(118ft), PMW-2 (142 FT) and PMW-4 (189.5 ft)

Table 2. PFAS Concentrations in Monitoring Wells PMW-1, PMW-2, and PMW-4.
City of Milwaukie, Oregon.

Method			EPA 533 (ppt)							
Screening Criteria			PFOA	PFOS	PFBS	PFBA	PFHxS	PFHxA	PFHpA	PFPeA
OHA-HALs			30	30	--	--	--	--	--	--
EPA Proposed MCL			4	4	--	--	--	--	--	--
Sample ID	Sample Date	Sample Type								
PMW-1-20240201	2/1/2024	Primary	4.72	9.90	7.83	5.66	6.67	4.57	2.87	7.35
PMW-1-FD-20240201	2/1/2024	Field Duplicate	5.02	9.78	7.70	6.53	6.50	4.98	2.89	8.31
PMW-2-20240201	2/1/2024	Primary	5.18	12.5	5.10	ND U	4.38	3.16	2.01	3.81
PMW-4-20240201	2/1/2024	Primary	3.50	8.82	8.82	ND U	5.47	2.78	ND U	3.02

Notes

Orange highlight = Result exceeds the referenced OHA-HAL

Yellow highlight = Result exceeds the referenced proposed MCL

BOLD: Detection

EPA: Environmental Protection Agency

MCL: Maximum Contaminant Level

OHA-HAL: Oregon Health Authority Health Advisory Level

-- = Not analyzed or not applicable

ppt = parts per trillion

ND = Not Detected

U = Result not detected above the referenced laboratory detection limit

Unregulated Contaminant Monitoring Rule – 5 (UCMR-5) Sampling

Per- and Polyfluoroalkyl Substances (PFAS) February 2024						
				Location Sampled		
Substance	Unit	Oregon Health Advisory Level (HAL)	Adopted New MCL	Upper Treatment Plant	Lower Treatment Plant	Stanley Well 6
Perfluorooctanoic acid (PFOA)	ppt	30 ppt	4 ppt	ND	ND	ND
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Well Sampling



PFAS Well Site Sample Survey Results

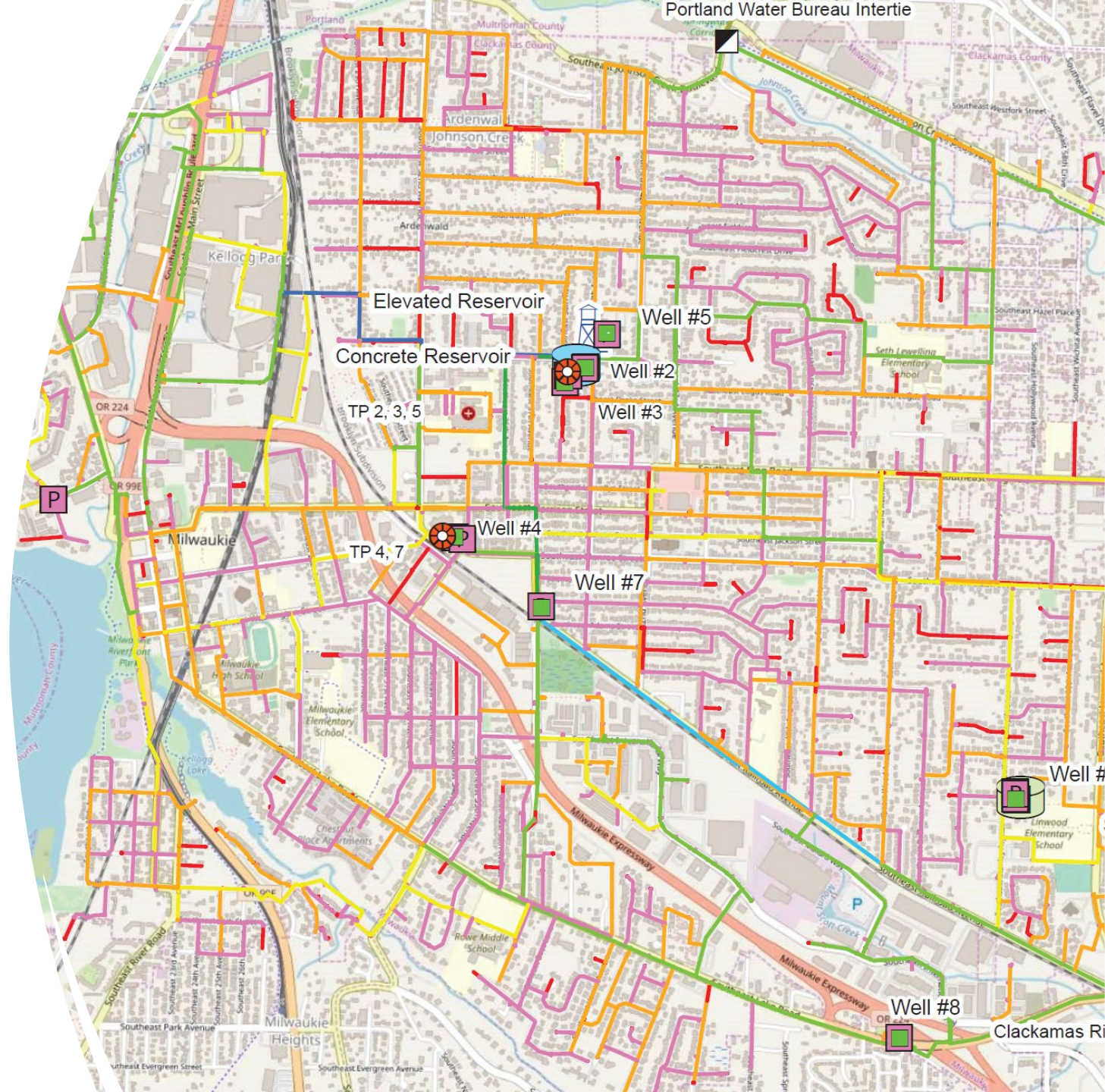
Hazard Index:	<1				
Well 3	0.48				
Well 2R	0.18				
Well 5	0.21				
Well 4	0.45				
Well 7	0.21				
Well 8	0.00				

$$\text{Hazard Index (1 unitless)} = \left(\frac{[\text{HFPO-DA}_{\text{ppt}}]}{[10 \text{ ppt}]} \right) + \left(\frac{[\text{PFBS}_{\text{ppt}}]}{[2000 \text{ ppt}]} \right) + \left(\frac{[\text{PFNA}_{\text{ppt}}]}{[10 \text{ ppt}]} \right) + \left(\frac{[\text{PFHxS}_{\text{ppt}}]}{[10 \text{ ppt}]} \right)$$

	MCLs 4.0 ppt		MCLs 10 ppt			MCLs 2000 ppt
	PFOA	PFOS	PFNA	PFHxS	HFPO-DA	PFBS
Well 3	5.7	9.1	0	4.8	0	2.5
Well 2R	1.2	2.1	0	1.8	0	0
Well 5	1.3	2.2	0	2.1	0	0
Well 4	6.1	11	0	4.5	0	4
Well 7	2.9	5.4	0	2.1	0	1.5
Well 8	0	0	0	0	0	0

What does all this mean?

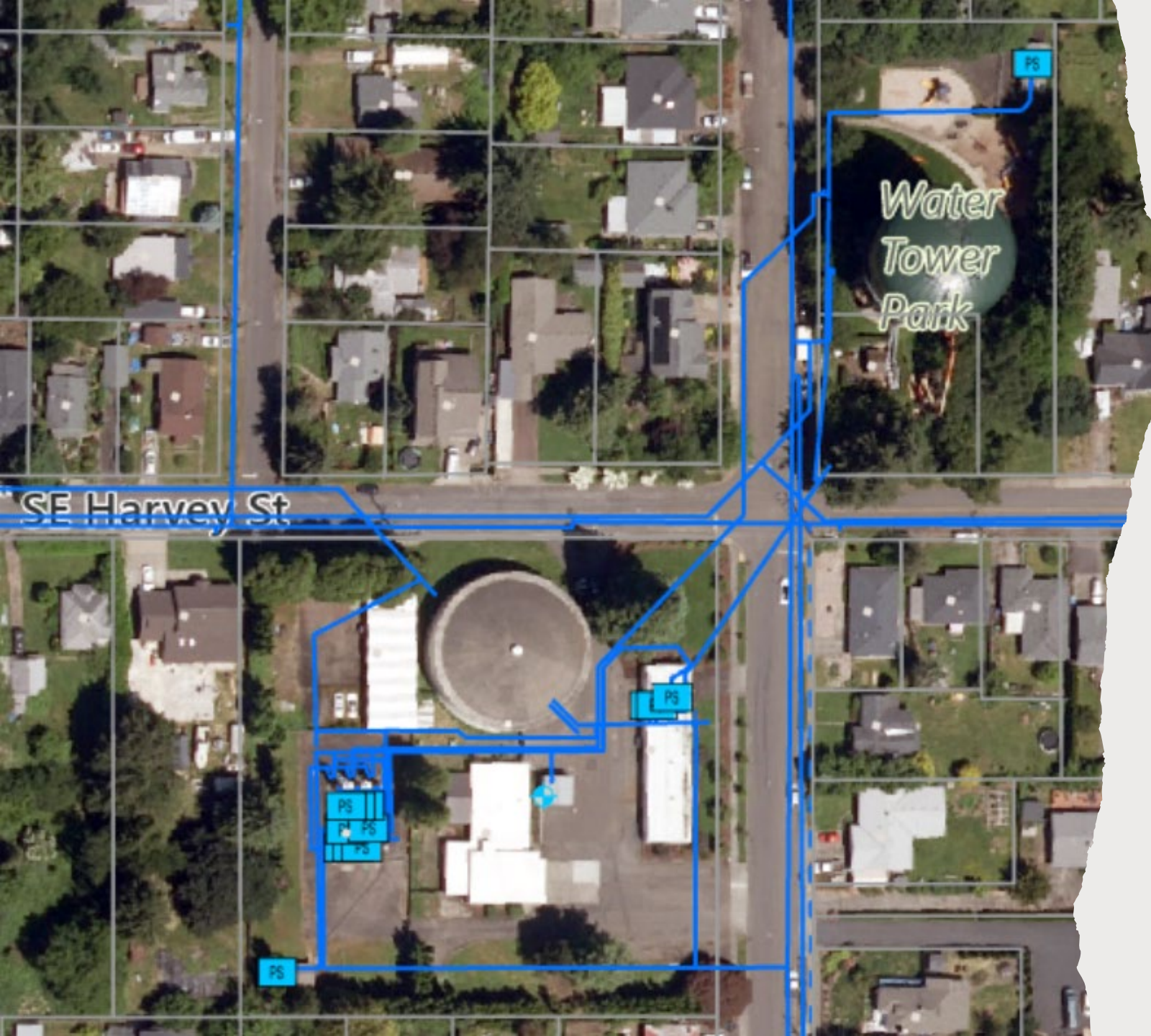
- We will most **likely** need to treat for PFAS
- Working with Consultant Team –RH2 and WSC
- Feasibility Study
 - OBDD Funded - \$125K
 - RFQs due – April 21
- Compliance Sampling



Treatment Concepts Contemplated



- Location
 - Centralization of Treatment
 - Consolidate Treatment at 40th and Harvey
 - Expanded water facilities on Site
 - Decentralized Treatment
- Treatment Techniques
 - Granular Activated Carbon (GAC):
 - GAC is a common and effective method for removing PFAS from water through adsorption, where PFAS molecules stick to the surface of the carbon.
 - Ion Exchange Resins:
 - These resins, made from synthetic materials, attract and hold PFAS molecules, preventing them from passing through the water.
 - Engineered Adsorbents
 - Engineered media, which include clay based (Fluorosorb) and corn based (dexsorb) media are designed to capture and bind PFAS in drinking water similar to GAC.
 - High-Pressure Membrane Systems (Reverse Osmosis and Nanofiltration):
 - These systems use membranes that filter out PFAS molecules, with reverse osmosis being particularly effective.
 - Residuals Management



40th and Harvey

Consolidated Treatment



- (Upper Treatment Plant) 40th and Harvey
 - Wells 2R, 3 and 5
 - Currently pump to concrete reservoir on site
- Lower Treatment Plant (Oak and Railroad)
 - Wells 4 and 7
 - 18" water main to elevated storage
- Well 6
 - Stanley Reservoir
- Well 8

Timeline and Cost



- Target – Construction Beginning -1st Quarter 2027
 - Completion 18 -24 months
- Planning Level Estimate -\$22M
 - Funding Options
 - Safe Drinking Water Revolving Loan Fund (SDWRLF)
 - Submitted Letter of Interest in Feb 2025
 - BIL-EC SDWRLF
 - Submitted Letter of Interest in Feb 2024
 - Feasibility Study -\$125K

PFAS Litigation

- Class action lawsuit: In re Aqueous Film-Forming Foams (AFFF) Products Liability Litigation (MDL 2873).
- Lawsuit sought damages related to PFAS contamination.
- Four major manufacturers settled their claims: Tyco, BASF, DuPont, 3M.
- Milwaukie is eligible to participate in all four settlements and recently filed claims in the Tyco and BASF cases (DuPont and 3M will come later).
- It is unclear how much money our claims will generate. Use of settlement proceeds is not limited to use on PFAS-related issues but can be used to offset costs related to water sampling and monitoring, treatment system upgrades, and long-term environmental protection.
- Milwaukie could consider filing suit against the non-settling defendants or await potential settlements in those cases.

PFAS

Thank you!

Questions?

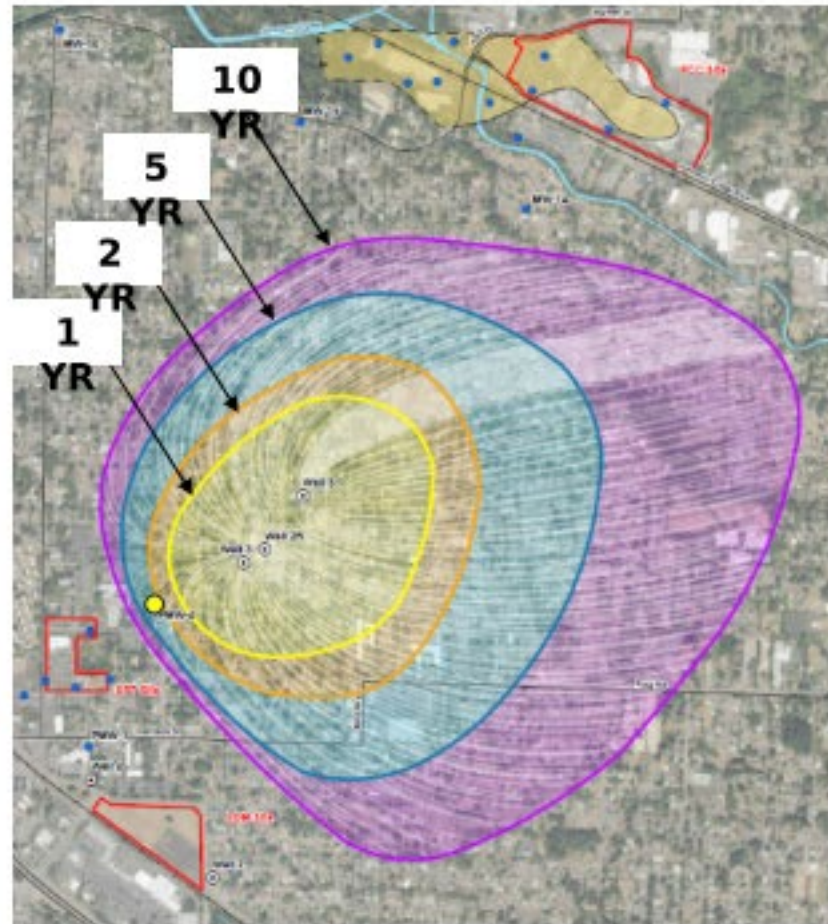
Peter Passarelli

Public Works Director

503-786-7614

passarellip@milwaukieoregon.gov

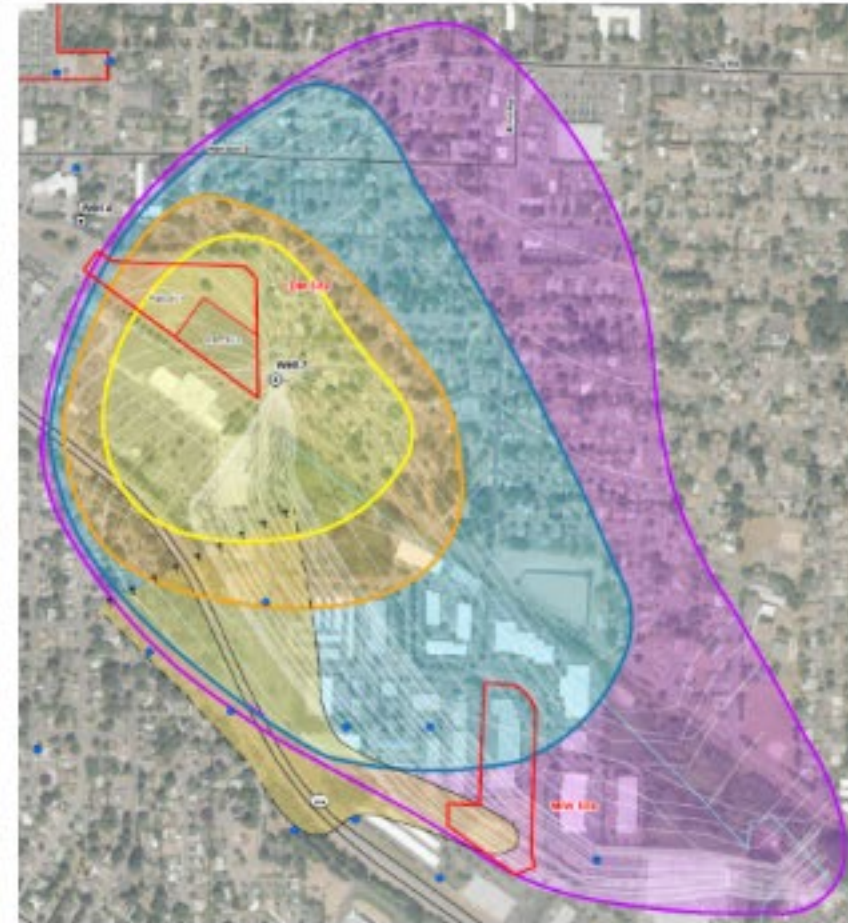
City of Milwaukie Capture Zones



Well 2R, Well 3, Well 5



Well 4



Well 7

Well Susceptibility Analysis

- Identify potential sources within the 10 year time-of-travel of each City well based on:
 - EDR Report (88 potential PFAS sources)
 - Historically unsewered areas
 - Fire station locations
- Applied a scoring system to identify relative risk of potential impact

Table 2. Relative Potential for PFAS Impacts

City Production Well Name	Total Sites	(1) Total Weighted Score	(2) Potential Maximum Score	(3) Normalized Score
Well 8	28	69	202	34.2%
Wells 2R, 3, and 5	16	40	118	33.9%
Well 7	28	53	202	26.2%
Well 4	15	26	111	23.4%
Well 6	1	3	13	23.1%



SS Agenda Item

3

Council Reports

From: [Lisa Batey](#)
To: [City Council](#); [Laura Weigel](#); [Jennifer Garbely](#)
Subject: State Rail Plan and Harmony Road grade separation
Date: Tuesday, April 8, 2025 10:58:46 AM

Nicole/Scott: Please add this email to the record for tonight's meeting.

All:

I mentioned my concerns about the Harmony Road intersection in our recent TSP discussion, and then independently that intersection recently came up in the Bike Milwaukie Facebook group when discussing the Metro survey for RFFA funding for the bike/ped path project. I came across this 2022 testimony submitted by former Mayor Gamba about the need for grade separation at Harmony/Linwood/Railroad/Lake.

https://www.oregon.gov/odot/RPTD/RPTD%20Committee%20Meeting%20Documents/RAC%20State%20Rail%20Implementation%20Documents/5.1_Appendix%20D%20Outreach_2022-12-02.pdf

That prompted me to reach out to Adam Argo, a Milwaukie resident and former Planning Commissioner, who is a Senior Planner for ODOT Rail, to inquire about the status of the State Rail Plan. My exchange with Adam is below – the Rail Plan work is ongoing and they have a survey which is live right now – see yellow highlight below. [I was initially having trouble with the link, which the Help Desk resolved – if you get an “unsafe link” kind of message, please reboot your device, and if that doesn't work, please reach out to the Help Desk.]

I just completed the survey – the fourth (orange) section is where you can map comments on railroad concerns anywhere in the city (I posted about a dozen).

I will be sharing with Bike Milwaukie and various other folks around town who I know have concerns about various issues with the railroads and encourage you to do the same.

Lisa M. Batey, Mayor (she/her)
City of Milwaukie
E-mail: bateyl@milwaukieoregon.gov
Message line: 503-786-7512

From: ARGO Adam <Adam.ARGO@odot.oregon.gov>
Sent: Friday, April 4, 2025 12:32 PM

To: Lisa Batey <BateyL@milwaukieoregon.gov>

Subject: RE: State Rail Plan and Harmony Road grade separation

This Message originated outside your organization.

Hi Lisa – it is great to hear from you!

I'm glad you are looking into the update to the State Rail Plan. I want to ensure that you are aware of the status of this project:

- This work is in progress, with expected finalization of the plan update by the end of 2025/beginning of 2026, where the Oregon Transportation Commission will review the update and take action to recommend for official adoption.
- We are in fact at the onset of major public outreach for the State Rail Plan Update. We have a public survey that is currently live – the survey includes an interactive map feature for participants to indicate location-based rail needs. I encourage you to participate in the survey and to share it with your City of Milwaukie colleagues as well. THE LINK TO THE PUBLIC SURVEY IS [HERE](#).
- I will ensure that the issue around the Harmony Road rail crossing is brought to the project team for consideration in the development of policies and priorities in the State Rail Plan update. Also, there will be a public comment period when the project team releases the Draft State Rail Plan update, anticipated to be late summer/fall 2025. If you haven't done so already, I recommend that you sign up for project updates (CLICK [HERE](#)) so you are notified when the public comment period begins.

Please let me know if you have any more questions/need anything else from me.

Best Regards,

~Adam

Adam Argo, AICP (he/him)
Principal Planner
Oregon Department of Transportation
Policy, Data, Analysis Division
503.986.3510
Adam.ARG@odot.oregon.gov

From: Lisa Batey <BateyL@milwaukieoregon.gov>

Sent: Friday, April 4, 2025 11:43 AM

To: ARGO Adam <Adam.ARG0@odot.oregon.gov>

Subject: State Rail Plan and Harmony Road grade separation

You don't often get email from bateyl@milwaukieoregon.gov. [Learn why this is important](#)

This message was sent from outside the organization. Treat attachments, links and requests with caution. Be conscious of the information you share if you respond.

Hello, Adam!

I hope all is well with you. I know it's a crazy time in the transportation world, between federal cuts and the Oregon legislative session.

I was looking at the state rail plan work at this site:

<https://www.oregon.gov/odot/RPTD/Pages/Oregon-State-Rail-Plan.aspx>

Is the 2024 plan done? Is public outreach ongoing?

I ask because I remain concerned about the need for grade separation at the Harmony Road intersection. By way of reminder, former Mayor Mark Gamba submitted comments on that back in 2022 in response to high-speed rail planning:

https://www.oregon.gov/odot/RPTD/RPTD%20Committee%20Meeting%20Documents/RAC%20State%20Rail%20Implementation%20Documents/5.1_Appendix%20D%20Outreach_2022-12-02.pdf

I would appreciate knowing what the latest is on this and whether there are any upcoming opportunities for the City of Milwaukie to plug in on this.

Thanks!

--Lisa

Lisa M. Batey, Mayor (she/her)

City of Milwaukie

E-mail: bateyl@milwaukieoregon.gov

Message line: 503-786-7512



BOARDS AND COMMITTEES ANNUAL RECRUITMENT

VACANCIES & APPLICATIONS

Current Vacancies and upcoming terms ending:

BC	Current Vacant Positions	Positions w/Terms Ending 6/30	Interested in serving another term	Total Vacancies	# Apps	# of alternate Apps	TOTAL positions on BC	Youth Position s	Notes
Arts	1	5	3	3	15	6	11	Y	Current vacancy is youth position
Audit	1	2	2	1	7	2	5	N	
Budget	1	0	n/a	1	5	1	5	N	
CUAB									
ESC	1	5	4	2	4	1	10	N	
Library	3	3	3	3	16	6	9	Y	One vacancy is a youth position
MRCCAC	0	0	n/a	0	4	3	10	Y	
PARB	1	5	2	4	9	5	10	Y	
PC	0	1	1	0	3	2	7	N	
PSAC	0	1	0	1	3	5	11	N	
Tree	1	2	2	1	6	6	7	N	
	9	24	17	16	72	37	85		



MAYOR'S PROPOSED PANEL ASSIGNMENTS

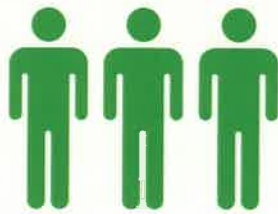
- Council President Anderson: PSAC, Arts
- Councilor Khosroabadi: PC, ESC, Tree
- Councilor Massey: PARB, Audit, Budget/CUAB
- Councilor Stavenjord: MRCCAC, Library





Clackamas County believes recovery is possible for anyone who suffers from either substance use disorder or other mental health disorders.

People with mental health conditions or those recovering from addiction don't belong in jails or emergency rooms – they need treatment. Lake Road Health Center expands our recovery resources in outpatient counseling and treatment services for mental health and substance use needs. Located in Milwaukie, the center expands our addiction and mental health services.



Select services for adults

- Adult mental health treatment program
- Adult substance abuse treatment program
- Peer support specialists
- Employment programs



Select services for children

- Child and family mental health treatment program
- Youth substance abuse treatment program
- Parent/family support and education
- Education support services

Every path to recovery is different. Our Lake Road Health Center is a critical addition to our recovery-oriented system of care, where residents will access our network of resources. It is one of six priority investments, including our recovery campus, stabilization center, recovery housing, Caring Place, and Clackamas Village.



Clackamas County believes recovery is possible for anyone suffering from housing instability or homelessness.

Many homeless people need structured support, supervision, and skill-building to move into stable and permanent housing. The Clackamas Village is modeled after the county's successful Vets Village and will be a safe place to overcome trauma, tackle barriers to obtaining housing, and rebuild a support network. All residents will develop individualized, goal-oriented service plans toward obtaining permanent housing. Located in the North Clackamas area, Clackamas Village expands our housing services.



24
housing
units

Clackamas Village will have eight three-bedroom sleeping modules

Village residents will access the county's network of services onsite. This includes personalized case management, housing navigation and placement, physical and mental health care, financial education, and other services to increase self-sufficiency.

Every path to recovery is different. The Clackamas Village is a critical addition to our recovery-oriented system of care, where residents will access our network of resources. The village is one of six priority investments, including our recovery campus, recovery housing program, stabilization center, Caring Place, and Lake Road Health Center.



Caring Place



Clackamas County believes recovery is possible for anyone suffering from housing instability or homelessness.

In 2023, Clackamas County gave \$10 million to the nonprofit Homeless Solutions Coalition of Clackamas County in support of the future Caring Place, a homeless services resource center. The facility will help people navigate community safety net programs and connect them directly with housing, services and other public benefits. A community health center and trusted community nonprofits will be on site. Located in Oregon City, Caring Place expands our community's housing services resources.



The center will provide many services that a person exiting homelessness may need

- Basic needs
- Benefits enrollment
- Counseling
- Employment services
- Housing application assistance
- Social services

Every path to recovery is different. Caring Place is a critical addition to our recovery-oriented system of care, where residents will access our network of resources. It is one of six priority investments, including our recovery campus, recovery housing program, stabilization center, Clackamas Village, and Lake Road Health Center.



Recovery Housing



Clackamas County believes recovery is possible for anyone suffering from housing instability or homelessness.

The county's Housing Authority plans to sell 75 homes from its inventory to local nonprofit service providers to offer tailored services throughout the county that will complement and expand our existing housing services.

Tailored services may complement other county investments



Monitored supervision
needs for **stabilization
center patients**



Addiction recovery needs for
recovery campus patients



Housing needs for
homeless patients
throughout our system

Every path to recovery is different. Our recovery housing program is a critical addition to our recovery-oriented system of care, where residents will access our network of resources. It is one of six priority investments, including our recovery campus, stabilization center, Caring Place, Clackamas Village, and Lake Road Health Center.

Part of our recovery-oriented system of care





These flagship investments, along with the county’s existing programs and services, will ensure people in need will have access to a recovery pathway based on their unique needs.

Core services

Recovery Campus (Unincorporated North Clackamas, 2026/27)
For housed or homeless persons struggling with substance use disorder. Integrated services including mental health, transitional housing and peer support.



Stabilization Center (Unincorporated Milwaukie, 2025)
For persons experiencing a behavioral health crisis (anxiety attacks, hallucinations) and need short-term help to manage or overcome the crisis.



Clackamas Village (Unincorporated North Clackamas, 2025)
A transitional housing community for homeless residents. Provides pods or tiny homes to live in while accessing on-site services.



Caring Place (Oregon City, 2025)
A one-stop resource center for homeless residents with extensive services (housing support, health care, etc.).



Recovery Housing (Countywide, 2025)
The Housing Authority of Clackamas County will sell 75 homes to buyers serving our system of care (e.g., nonprofits delivering transitional housing).



Lake Road Health Center (Unincorporated Milwaukie, 2025)
For people needing expanded mental health and substance use disorder services.





Addiction, mental health issues, and homelessness are complex and often interconnected. In April 2023, the county took a bold approach to address these issues by establishing a **recovery-oriented system of care**. A coordinated network of services, this system builds on the strengths and resiliencies of individuals, families, and communities. Our goal? To ensure that individuals struggling with substance use disorder receive timely person-centered support, treatment, and resources to help them achieve and sustain long-term recovery.

Every path to recovery is different.

For this reason, our approach looks at helping those in need with an eye toward strengthening core services in three key areas.



Addiction

Substance use disorder



Mental health



Housing

The county already provides many services and programs aimed at substance use disorder, mental health issues, and housing insecurity. Our focus on recovery expands our services that strengthen our existing network of resources.





Clackamas County believes recovery is possible for anyone suffering with addiction (substance use disorder) or from homelessness.

Untreated substance use disorder can lead to homelessness, inappropriate placement in jails and emergency rooms, and broken families. Our recovery campus will provide a single location with extensive treatment and services (including mental health) so that individuals can get the help they need when they need it. We offer paths tailored to unique needs, without artificial timelines. Located in North Clackamas and offering transitional housing onsite, the campus expands both our addiction and housing services.



Entering the center

Adults seeking help can voluntarily use our center. Referrals come from hospitals, families, law enforcement and more.



Staying & recovering

People will receive treatment and social services when they need it (immediately), where they need it (all under one roof).



Continuity of care

Peers with lived experience will offer support throughout each person's journey reentering society, including help navigating the county's network of resources.

Every path to recovery is different. The recovery campus is a critical addition to our recovery-oriented system of care, where residents will access our network of resources. The campus is one of six priority investments, including our stabilization center, recovery housing program, Caring Place, Clackamas Village, and Lake Road Health Center.



Clackamas County believes recovery is possible for anyone who suffers from mental health disorders or a short-term crisis.

People experiencing a mental health crisis don't need a jail or emergency room – they need short-term treatment to regain stability as part of their recovery. The stabilization center will operate 24/7 for residents experiencing crises like panic attacks, hallucinations, or other mental health disorders. Located in Milwaukie, the center will also offer transitional housing for homeless persons, expanding our mental health and housing services.



Entering the center

Admission is voluntary. Referrals come from county law enforcement, health care providers, and mobile crisis responders.



Staying & recovering

Our comfortable and safe center will provide short-term support and coping skills until patients are through the crisis. Homeless patients will be provided housing.



Continuity of care

Mental health sufferers in crisis often do not have enough support to get back on their feet. Our center provides a network of resources to help guide them over the long term.

Every path to recovery is different. The stabilization center is a critical addition to our recovery-oriented system of care, where residents will access our network of resources. The center is one of six priority investments, including our recovery campus, recovery housing program, Caring Place, Clackamas Village, and Lake Road Health Center.

From: Lisa Batey <BateyL@milwaukieoregon.gov>
Sent: Tuesday, April 8, 2025 11:37 PM
To: _City Council <CityCouncil@milwaukieoregon.gov>
Subject: SHS work group materials

All – follow-up on tonight’s SHS discussion. Please do not reply – bring any questions to next week’s meeting.

Nicole, please add this email plus attachments to the Study Session record.

Some resources distributed last week:

Homeless Strategic Initiatives (HSI) Webinar Follow Up:

Thank you to all who attended last Monday’s webinar. If you were not able to participate or would like to review again please visit this link to the video: [HSI Webinar](#)
Also included below are additional resources and companion materials to the HSI report:

- Homeless Strategic Initiatives (HSI): Stabilization Report, https://homelessstrategicinitiatives.org/wp-content/uploads/2025/03/HSI-Stabilization-Services-Report_2025.pdf
- Related HSI Report: [Resolving Homelessness: The Critical Need for a Substance Use Disorder System of Care](#)
- HUD Housing Policy Brief: Recovery Housing: <https://files.hudexchange.info/resources/documents/Recovery-Housing-Policy-Brief.pdf>
- USICH: <https://usich.gov/guidance-reports-data/federal-guidance-resources/federal-resources-addressing-behavioral-health>
- Lund Report: <https://www.thelundreport.org/content/solutions-floated-oregons-hospital-boarding-problem>

From: Victor Sin <Victor.Sin@oregonmetro.gov>
Sent: Tuesday, April 8, 2025 12:23 PM
Subject: Follow Up - April 7th President's Work Group Meeting

Mimecast Attachment Protection has deemed this file to be safe, but always exercise caution when opening files.

This Message originated outside your organization.

To President's Work Group Members –

A huge appreciation to you all for your engagement and fruitful discussions yesterday. As a quick follow up, attached are the materials provided to each of you at your tables.

This includes:

- The shared definitions documents
- Addendum of the case studies
- Slide deck
- Vision framework (homework)

As reminder on the vision framework homework:

- Take three copies of the framework to use for your ideation.
- Collaborate with your colleagues to fill in each with a vision, mission, goals, and KPIs.
- You're welcome to adjust the framework as needed. You don't need to use the array.
- But please follow the provided definitions of vision, mission, goals, and KPIs.

Please bring these filled out vision frameworks to the next meeting or if you are able, you can email them to me ahead of our next meeting on the 21st. We'll be sending out additional follow up meeting materials later this week so stay tuned. Thank you again.

Kindly,
Victor

Victor Sin, MBA (He/Him)
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Vision Framework – Definitions

To support a productive conversation, it is important for workgroup members to have a shared understanding of the terms used. While some organizations may use the following terms interchangeably, aligning on their specific meanings is essential. Below are commonly understood definitions for each term.

For illustration, examples from a fictional education-focused initiative are provided, where the theory of change suggests that providing access to free, engaging books will increase reading, leading to improvements in comprehension scores, which are linked to higher high school graduation rates.

- **Vision:** High-level, inspirational statement of what we hope to achieve in the future.
 - *Example: “All students have access educational supports needed to graduate from high school”*
- **Mission:** What we’re doing to work toward the vision.
 - *Example: “Our mission is to provide free high-interest books to increase students’ desire to read and learn”*
- **Goal:** A measurable change, result, or benefit that occurs because of a program or activity.
 - *Example: “Students participating in our program will graduate at a higher rate”*
- **Key Performance Indicator (KPI):** Quantifiable measures of performance over time for a specific goal.
 - *Example: “Reading comprehension scores on the third and fifth grade Oregon English Language Arts Summative Tests.”*

Additional definitions

The following supplemental definitions are part of the vision framework but will not be used in the Work Group visioning exercise on April 7, 2025.

- **Output:** Immediate, direct result of an action.
 - *Example: “Our program distributed 4,000 free books to fourth and fifth grades statewide in 2024.”*
- **Action:** The activities undertaken to achieve the goal.
 - *Example: “Send free books to fourth and fifth grade classrooms with below-average reading comprehension scores on the third grade assessment.”*
- **Data Elements:** Specific data collected by service providers to track programmatic outputs and key performance indicators.
 - *Examples: “Household Income”, “Age Group”, “Disabling Condition”, “Placement Address”, “Program Exit Date”, “Referral Provided”, “Service Provided”, “Race/ethnicity”, “Housing Move-In Date”, etc.*



Metro President's Work Group

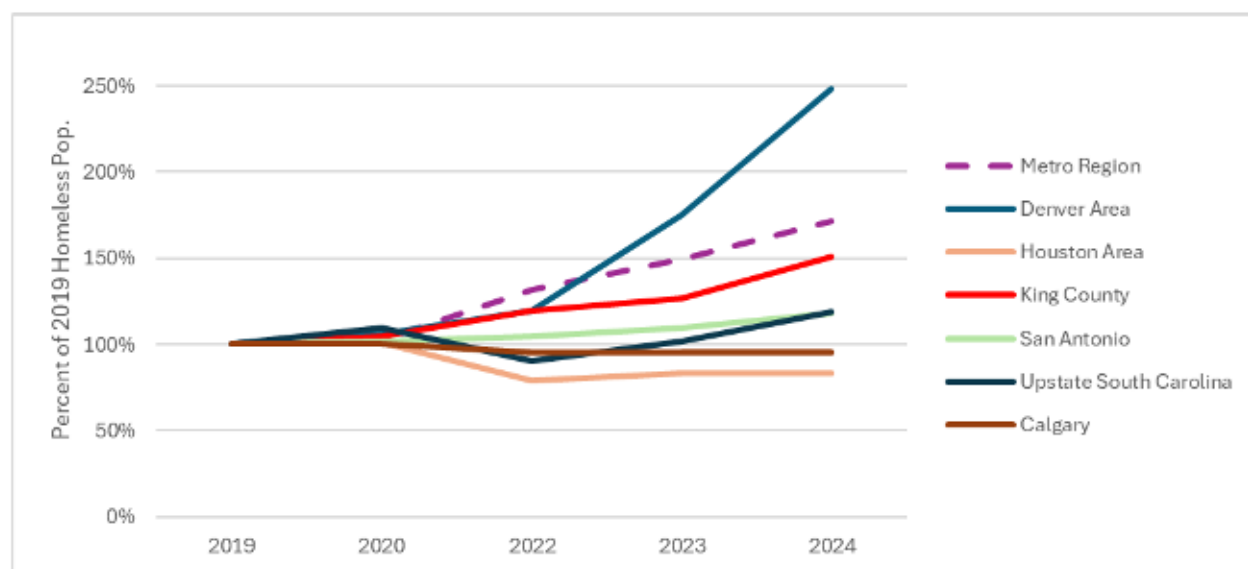
April 3, 2025 | Case Studies Addendum

ADDENDUM INFORMATION FOR CASE STUDIES

Members of the Metro President's Work Group requested additional information regarding the Case Studies presented on March 10, 2025. Below is a list of these requests:

- Historical Point-in-Time Count data (combined and individual case studies)
- Market and supply conditions
- Median income
- Program costs*
- Program costs per outcomes**
- Public data/finance dashboard
- Racial disparities in homelessness representation
- Other as appropriate: Jurisdictional or other unique and notable areas
- Interaction between sub-regions (Denver & King County only)

Historical Point-in-Time Count data for all case studies (2019-2024)



* - Program costs

Note: The dollar amounts presented for all case studies are based on publicly available documents, which may be incomplete and not easily comparable across communities.

Costs for an entire homeless services system are challenging to gather without direct consultation of multiple entities including the Continuums of Care (CoC), state, federal and non-profit partners. Typical CoC funding sources include federal funds through HUD and Veterans Affairs, state funding, and local tax revenue. While funding from government entities is legally required to be publicly available, funding from non-profit service providers also includes private foundation grants,

fundraising campaigns and other private sources. Non-profits can be guarded about reporting their additional funding sources and amounts can and do change year-to-year.

It is challenging to obtain a comprehensive and accurate picture from every non-profit provider to effectively quantify the total cost of the homeless services system, even within our own region. Given the limited data available online, it is not possible to accurately determine the overall costs of the homeless services systems included in each case study.

**** - Program costs per outcomes**

Note: There is insufficient publicly available data to assess this question for all case studies. Therefore, it is not included in this addendum.

Achieving a comprehensive understanding of the cost of program outcomes is a significant challenge, due to the same obstacles that hinder the collection of a complete funding picture across a community's homeless services system. Additional factors include underfunded data systems, insufficient staffing for data analysis, limited resources for data collection and entry, fragmented funding mechanisms, and the separation of participant/outcomes data from financial data across different systems. Furthermore, service providers often take steps to address gaps and meet needs as they arise. Few funding sources provide the necessary resources to conduct in-depth financial analysis on efficient and effective program outcomes.

Calgary, Alberta, Canada

North star: “Guiding the fight against homelessness” and “We envision the day when homelessness is rare, brief, and non-recurring — perhaps an episode in someone’s life, but never a condition that defines one’s life.”

Population: 1,491,900 (2024)
Point in time count (2024):
Total individuals - 2,782

KPIs

- People no longer experiencing homelessness
- People housed
- People diverted from emergency shelter to immediate housing services
- Additional KPIs set by provincial government
- Reductions in public services
 - Emergency room visits
 - Court appearances
 - Emergency medical services (EMS) uses
 - Hospital stays
 - Police interactions
 - Incarcerations

The [Calgary Homeless Foundation](#) (CHF) uses a Homeless Management Information System (HMIS) to develop KPIs that measure progress toward community goals. It also helps monitor if services are being deployed most efficiently and effectively towards the desired outcome and to identify and triage immediate service needs.

Structure

In Calgary, government ministries and a network of agencies known as Calgary’s Homeless-Serving System of Care serve people experiencing homelessness.

CHF is a nonprofit hub that has been leading and coordinating efforts to end homelessness. However, in December 2024 the provincial government announced that this model will soon change.

CHF has been serving as a central system planner, funder and data-driven decision-maker to improve housing and support services for vulnerable populations. Under this model, the foundation and six other organizations have acted as local hubs and received a lump sum of government money, which they distribute to smaller organizations in their area. This system uses real-time data-driven insight to track homelessness trends through pooled data of all clients served.

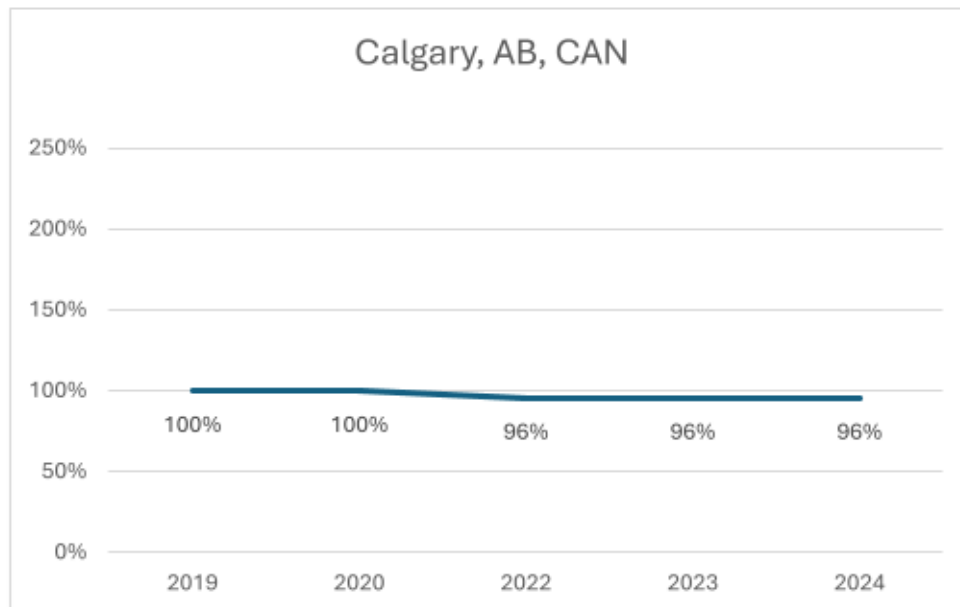
Under the provincial government’s new plan, funding distribution will shift from nonprofit hubs to the government, which will distribute the funding in the form of government grants.

Program highlights

[The Alberta Recovery Model](#) is recovery-oriented system of care with a coordinated network of personalized, community-based services for people at risk of or experiencing addiction and mental health challenges. It provides access to a full continuum of services and support from prevention and intervention to treatment and recovery. The Alberta Recovery Model was developed by the Government of Alberta and is administered by Recovery Alberta, one of four public health ministries in Alberta.

CALGARY ADDENDUM

- **Historical Point-in-Time Count data (2019-2024)**
 - [2024 Point-in-Time Count Report](#)
 - [2024 Point-in-Time Infographic](#)



- **Market conditions**
 - 2024 Fair Market Rent (1-bedroom): CAD\$1,468 (Approx. USD \$1,034)
 - The typical home price is nearly five times the average Calgary household's annual income. (*Statistics Canada, 2021*)
 - The residential vacancy rate is 5.2%. (*Statistics Canada, 2021*)
- **Housing supply conditions**
 - To match affordable housing supply in other cities, Calgary would need to build over 22,000 units by 2025.
- **Median income**
 - In Calgary, the minimum wage is \$15.00 CAD (\$10.95 USD). As of 2020, the median household income in Calgary was \$98,000 CAD (\$73,500 USD).
- **Program cost***
 - The Calgary Homelessness Foundation reported total expenditures of \$52.6M (\$39.45M USD) on homeless services programs in Fiscal Year 2023.
- **Public data dashboard**
 - https://homelesshub.ca/community_profile/calgary/
- **Racial disparities in homelessness representation**
 - An estimated 41% of people experiencing homelessness in Calgary have Indigenous ancestry.

- **Other conditions**

- Alberta, Canada, has a comprehensive federal and provincial safety net with publicly funded systems, including healthcare, welfare income, social assistance, federal and provincial child benefits, subsidized higher education, and various federal tax credits and benefits.

Denver, Colorado

North stars: "A region where everyone has a safe, stable place to call home"

Population (2024): 3,245,276
Counties: 7
Point in Time Count (2023):
Total Individuals – 14,281

KPIs

Metro Denver Homeless Initiative (MDHI) reports on the following measures in an annual [State of Homelessness](#) report:

- People experiencing homelessness via Point in Time count
- Number of people assessed and prioritized for housing via Coordinated Entry
- Youth experiencing housing instability via McKinney-Vento
- Tracking racial disparities and causes of homelessness using HMIS
- Tracking select economic and housing market indicators

MDHI focuses on real-time quality data which means they can account for everyone experiencing homelessness by name in each population. This Quality By-Name List (BNL) helps the program understand the scope of homelessness in each subregion, describes the inflow and outflow on an ongoing basis, and helps measure progress towards ending it. MDHI also partners with [Community Solutions](#) to certify data, assuring 100% data reliability.

Regional goals

By end of year 2024:

- 9/9 subregions achieve quality data for Veterans
- 4/9 subregions achieve functional zero for Veterans
- 33% reduction in the number of Veterans actively experiencing homelessness across 9 sub-regions
- Build out data infrastructure in HMIS to support all subpopulations (families, youth, single adults, chronically homeless)

By end of year 2027:

- Have quality all singles data in 9/9 subregions
- Have quality data for youth in the region
- Have quality data for families in the region
- Have reached functional zero in all subregions for Veterans
- Have 4 subregions ended homelessness for at least one of the following subpopulations (all singles, chronic singles, families)

Structure

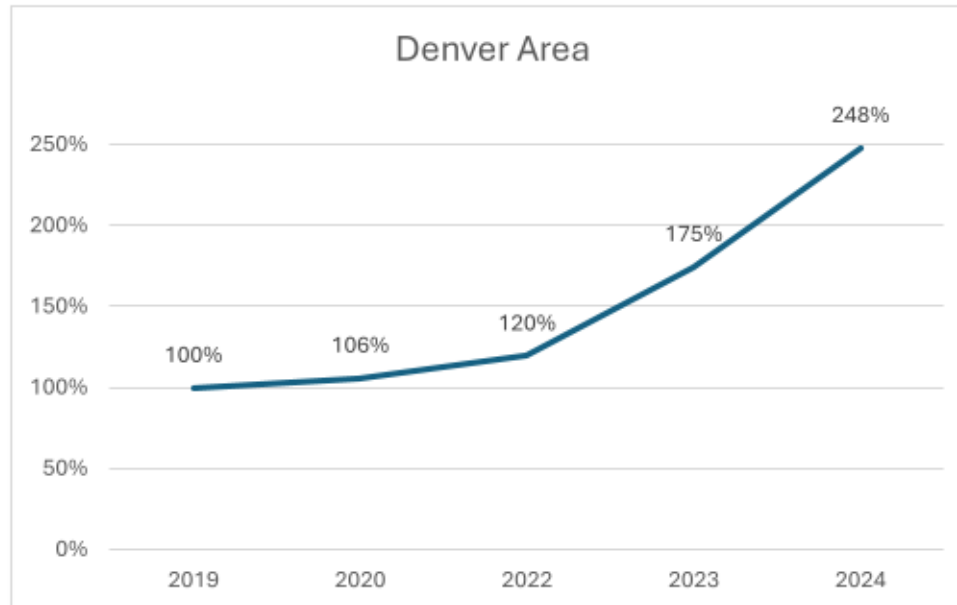
The [Metro Denver Homeless Initiative](#) (MDHI) is a regional continuum of care (CoC) encompassing seven counties and 40 municipalities. MDHI coordinates CoC applications and reporting for the continuum through the support of a membership organization, which facilitates several committees to involve interested and affected parties including a Coordinating Committee with broad participation, a Community Design Team for coordinated entry partners, and a Youth Work Group for providers serving youth. MDHI's efforts broadly align with the [Community Solutions Built for Zero methodology](#) for achieving functional zero for specific subpopulations via targeted, data driven investments.

Program highlight

The Denver region achieved functional zero for veteran homelessness using the Built for Zero methodology, a data-driven approach aimed at ending homelessness by creating systems that prevent, detect, and rapidly resolve homelessness for specific populations. MDHI transitioned its HMIS software, enabling better data customization and integration with the VA's system. MHDH established subregions, [updated its HMIS](#) to allow for better collaboration and integration, and set time-bound population-specific data quality goals.

DENVER ADDENDUM

- **Historical Point-in-Time Count data (2019-2024)**
 - [2024 Point-in-Time Count Dashboard](#)
 - [State of Homelessness 2023](#)



- **Market conditions**
 - 2024 Fair Market Rent (1-bedroom): \$1,830.
 - The typical home price is more than six times the average household's annual income.
 - The residential vacancy rate is 4.8%.
- **Housing supply conditions**
 - Overall, 67% buildable land (meaning no excessive slope; minimal water features and wetlands; this typically allows for outward expansion.)
 - Land use regulations are relatively high, ranking 15th out of 54 large metros.
 - Residential permit approvals for the greater Denver area are at their lowest levels since 2020. 16,382 residential permits issued in 2024; this is a 32.3% **decrease** from the number of permits issued in 2018.
- **Median income**
 - In 2023, the minimum wage was \$14.17, and the median household income was \$102,718. The average renter wage was \$28.99, while the housing wage for a 2-bedroom Fair Market rental is \$35.84.
- **Program cost***
 - Metro Denver Homeless Initiative (MDHI) reported total expenditure of \$481.2 million on homeless services programs in Fiscal Year 2022.
- **Public data dashboard**
 - [All in Denver data dashboard](#)
- **Racial disparities in homelessness representation**

- People from certain racial and ethnic groups, including American Indian/Alaskan Native, Black or African American, multiracial, and Native Hawaiian/Pacific Islander, are disproportionately represented in the population experiencing homelessness.

Interaction between Denver-area sub-regions:

As requested by members of the Work Group, Metro staff met with MDHI staff to learn more about their approach to subregions. The following is a summary of that conversation:

- **Sub-regions**
 - Nine subregions include seven counties, the City of Aurora (HUD entitlement community covering three counties), and the Tri-Cities area of Sheridan, Littleton and Englewood.
 - MDHI meets monthly to ensure alignment with best practices around core functions.
- **Coordinated entry**
 - MDHI implemented a comprehensive CE system across all subregions
 - Resources may be shifted between regions if available, with flexibility for people to access services in other locations if needed.
- **Data**
 - The same Homeless Management Information System (HMIS) is used statewide across all Continuum of Care organizations.
- **Regional alignment**
 - Built for Zero model used to align goals and definitions across regions.
 - Regional Coordination Team helps manage consistency across all nine subregions.
 - Local preferences exist and conflicts arise (e.g., opposition to Housing First model), but funding requirements help incentivize alignment.

Houston, Texas

North star: "Ensure homelessness is rare, brief and nonrecurring"

Population: 2,319,119 (2024)
Counties: 3
Point in Time Count (2024):
Total individuals - 3,280

KPIs

- Length of time homeless
- Returns to homelessness
- Number of homeless persons
- Increased income
- First time homeless
- Exits from street outreach
- Exits to permanent housing destinations
- Exits to or retention of permanent housing

Houston, Texas has developed a north star to inform the specific actions and strategies included in their [5-year Community Plan to End Homelessness](#). Coalition staff and consultants use KPIs to determine service gaps and new resources and strategies to work towards the goals and priorities defined in the plan.

Structure

Houston's local homeless response system is a collective of more than 100 partners called [The Way Home](#) a regional Continuum of Care (CoC) that receives federal funds to administer homelessness response. It includes homeless service agencies, local governments, public housing authorities, the local Veterans Affairs office, and other nonprofits and community stakeholders. It encompasses Harris, Fort Bend, and Montgomery counties, Texas.

The Way Home has committed to ending homelessness in the greater Houston region and has defined "Ending homelessness" to mean preventing it when possible and ensuring homelessness is rare, brief, and one-time when not preventable.

[The Coalition for the Homeless of Houston/Harris County \(CFTH\)](#), a nonprofit, is the lead agency to The Way Home which coordinates community strategies to address homelessness.

Since its inception in 2011, The Way Home has achieved a 63% reduction in homelessness in the greater-Houston area, and more than 32,000 people have been housed. This is done through a coordinated system using real time data to track progress and address program and service gaps.

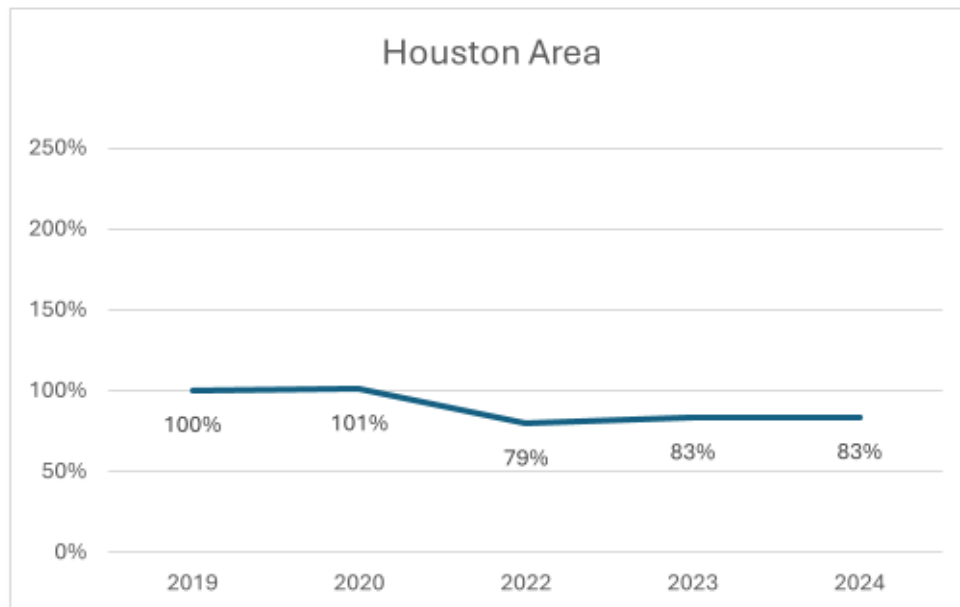
Program highlights

Housing First: The Way Home bases its programs on a Housing-First model. HUD defines "Housing First" as "an approach to quickly and successfully connect individuals and families experiencing homelessness to permanent housing without preconditions and barriers to entry, such as sobriety, treatment or service participation requirements. Supportive services are offered to maximize housing stability and prevent returns to homelessness as opposed to addressing predetermined treatment goals prior to permanent housing entry."

Lot size reform: In 1998, a policy change in Houston reduced the city's minimum-lot-size requirement and enabled development of over 34,000 town houses from 2007 to 2020. In 2013, the policy was expanded to cover nearly the entire city. Paired with Houston's reduced requirements for building setback and heights, the minimum lot sizes enabled more housing development throughout the city.

HOUSTON ADDENDUM

- **Historical Point-in-Time Count data (2019-2024)**
 - [2024 Point-in-Time Count & Survey Analysis](#)
 - [2024 Point-in-Time Count & Survey Fact Sheet](#)



- **Market conditions**
 - 2024 Fair Market Rent (1-bedroom): \$1,135
 - The typical home price is nearly four times the average household's annual income.
 - The residential vacancy rate is 8.3%.
 - Example: 34,000 town houses built from 2007 to 2020
- **Housing supply conditions**
 - 73.4% buildable land (meaning no excessive slope; minimal water features and wetlands; this typically allows for outward expansion.)
 - Land use regulations are low, ranking 34th out of 54 large metros.
 - Building codes, such as reduced minimum lot sizes and minimal zoning regulations, aim to increase production and support the development of a diverse range of housing options.
 - 54,746 residential permits issued in 2024; a 9% **increase** from the number of permits issued in 2018.
- **Median income**
 - Presently, the minimum wage is \$7.25, and as of 2023 the median household income was \$72,336.
- **Program cost***
 - Coalition for the Homeless reported total expenditure of \$26.9 million on homeless services in Fiscal Year 2023.
- **Public data dashboard**
 - [System performance dashboard](#)
 - [Project performance dashboard](#)

- [Community performance dashboard](#)
- **Disparities in homelessness representation**
 - While Black/African American represent 21% of the total population of Harris County, they comprised more than 60% of those experiencing homelessness.
- **Other conditions**
 - **Government and organizational partners**
 - Cities of Houston, Pasadena and Conroe
 - Harris, Fort Bend and Montgomery Counties
 - Harris County Housing Authority
 - U.S. Department of Housing and Urban Development (HUD)
 - More than 100 service provider and coordinated access program partners.

King County, Washington

North star: “Bring unsheltered people inside in a way that meets their needs for safety, stability and healing, as quickly as possible to prevent death and further harm”

Population (2023): 2,262,713

Counties: 1

Point in Time Count (2023):

Total Individuals – 16,868

KPIs

King County looks at the following KPIs to assess the baseline number of households accessing the homelessness response system and the number of households entering the homelessness response system. With these baseline numbers, the program then tracks KPIs across their [Five-Year Plan \(2023-2028\)](#).

- Number of households accessing the system
- Number of households entering the system
- Number of households exiting to permanent housing
- Returns to homelessness at 6-, 12- and 24-months post-program exit
- Number of temporary and permanent housing units in the system
- Throughput of temporary and permanent housing units in the system
- Utilization of temporary and permanent housing units in the system

Where possible, these measures are further broken down by:

- Household type: Single adults, families with children, and youth and young adults
- Race and ethnicity
- Program type: Emergency shelter/housing, transitional housing, day center, safe haven, rapid-rehousing, diversion, safe parking

A Path Forward goals

In its [Five-Year Plan \(2023-2028\)](#), the region has set the following goals across system levels, each with a list of prioritized “key actions” further outlined (beginning on page 29):

- Every service provider has the resources to implement best practices and can recruit and retain necessary staff
- All service providers can coordinate response with better data capacity, every sub-region has services, and all disproportionately impacted sub-populations are served
- Multiple systems of care can coordinate to ensure supportive transitions and leverage every opportunity to prevent homelessness

Structure

The [King County Regional Homelessness Authority](#) (KCRHA) serves as the continuum of care for King County and the dozens of cities within it. A partnership between City of Seattle and King County, KCRHA was created in 2019 with the aim of regionalizing homeless services, creating a consistent strategy across cities and reducing administrative burden by centralizing the greater Seattle area’s homelessness response funding under a single authority. In August 2024, the City and county approved a revised Interlocal Agreement, consolidating the agency’s implementation and

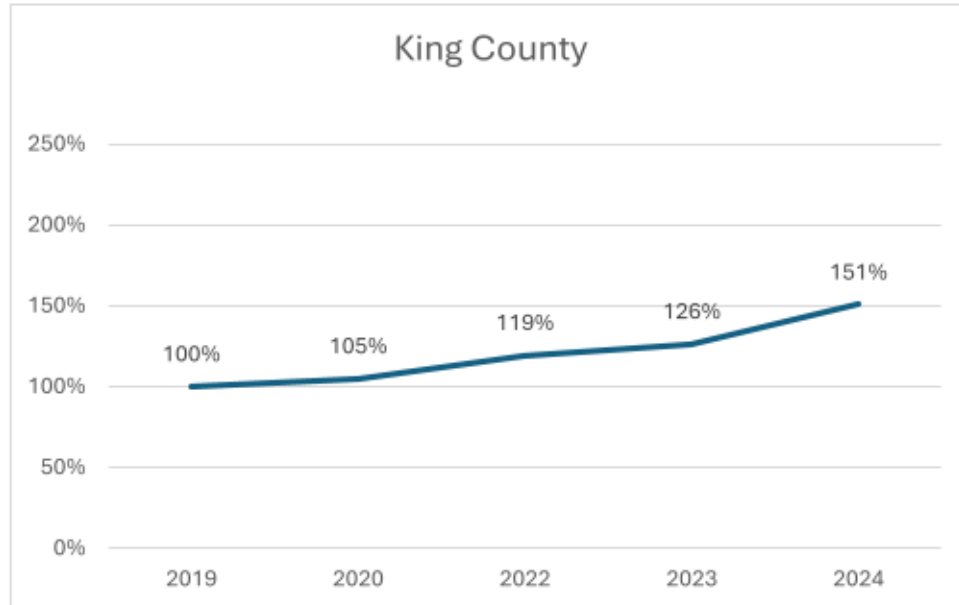
governing boards into a single entity composed primarily of elected officials with the goals of streamlining oversight, and enhancing transparency, coordination, and accountability.

Program highlight

KCRHA collaborates with state and local jurisdictional partners and organizations in the [Encampment Resolution Initiative](#), which focuses resources on specific prioritized encampments, offering permanent housing placement opportunities as sites are being cleared. In King County, the program has placed 90% of residents in targeted camps into housing.

KING COUNTY ADDENDUM

- **Historical Point-in-Time Count data (2019-2024)**
 - [2024 Point-in-Time Count one-pager](#)
 - [King County Point-in-Time County dashboard](#)



- **Market conditions**
 - 2024 Fair Market Rent (1-bedroom): \$2,269
 - The typical home price is more than seven times the average household's annual income.
 - The residential vacancy rate is 7%
- **Housing supply conditions**
 - 38.9% buildable land (meaning excessive slopes, ample water and wetlands are geographical constraints.)
 - Land use regulations are high, ranking 4th out of 54 large metros.
 - Decreasing residential permit approvals in King County. 10,650 residential permits issued in 2024; a 42.3% decrease from the number of permits issued in 2018.
- **Median income**
 - Presently, the minimum wage in Seattle is \$20.76, and the minimum wage for unincorporated King County is \$20.29. The median household income for King County was \$120,824 in 2024.
- **Program cost***
 - King County Regional Homelessness Authority reported the following expenditures on homeless services programming in Fiscal Year 2023:
 - Permanent Supportive Housing/other Permanent Housing: \$19.5mil
 - Rapid Re-Housing: \$36.8mil
 - Emergency housing/shelter (including "safe park" sites): \$114.6mil
 - Safety on the street: \$3.8mil
 - Outreach: \$8.3mil

- Coordinated entry: \$4.1mil
- Homelessness prevention: \$31.1mil
- Program administration (incl. wage support for providers): \$29.6mil
- Other expenditures: \$5.4mil
- ***Total expenditures: \$253.3 mil***
- **Public data dashboard**
 - <https://kcrha.org/regional-homelessness-data/>
- **Racial disparities in homelessness representation**
 - Black or African American individuals make up 19% of the homeless population, while constituting only 6% of the county's total population.
- **Sub-regions**
 - In 2022, King County Homelessness Authority performed a "[Sub-Regional Analysis](#)" to support the collective clarity of available resources and where to apply additional resources and coordination. Seven sub-regions were identified, and a Regional Services Database was created to track resources in detail.
 - Cities and sub-regions have the option of signing an administrative service agreement with the KCRHA, to further unify and coordinate strategies and services. Cities outside of Seattle are also represented on our [Governing Committee](#) by the [Sound Cities Association](#).
 - A Sub-Regional Planning Team within KCRHA coordinates in the community and attends over 20 coalition and regional tables to provide updates and receive feedback from partners.
 - On October 8, the City of Seattle and King County [approved a new agreement](#) to streamline the governance structure of the KCRHA.

San Antonio, Texas

North stars: “Ensure everyone has a place to call home” and “Significantly and efficiently reduce homelessness”

Population (2024): 2,319,119

Counties: 2

Point in Time Count (2024):

Total Individuals - 3,398

KPIs

The following are baseline metrics developed by [Close to Home](#), the CoC lead agency for San Antonio and Bexar County.

- People experiencing homelessness
- People experiencing unsheltered homelessness
- Returns to homelessness from positive housing exits from the homeless response system
- People experiencing homelessness for the first time
- Positive housing exits from the homeless response system

2025 Alliance to House Everyone One-Year Action Plan Strategic Objectives

Additional KPIs were developed for eight strategic objectives outlined in its [2025 One-Year Action Plan](#). Each of the 2025 Strategic Objectives are evaluated using one or more of these baseline metrics. Additionally, each objective includes key performance indicators (KPI) critical to understanding the impact of actions taken in support of the objectives in 2025.

- Prevent Homelessness and Reduce Inflow
- Expand Housing Options and Accelerate Housing Placements
- Strengthen Homeless Response & Services for Youth & Young Adults
- Improve Coordination & Access to Domestic Violence Services
- Improve Access to Healthcare Services
- Strengthen Street Outreach Coordination
- Effectively Address Equity and Accessibility
- Strengthen System and Program Capacity

Example:

Strategic Objective - Prevent Homelessness and Reduce Inflow

Baseline KPI

- Number of households and individuals experiencing homelessness for the first time
- Number of first-time homeless households and individuals enrolled in a prevention program

2025 KPI

- Complete a coordinated prevention analysis with the City of San Antonio (COSA), Bexar County, and the United Way

Structure

Since 2016, [Close to Home](#) has been HUD's Continuum of Care (CoC) lead agency for San Antonio and Bexar County and is the backbone nonprofit organization providing funding, education and accountability to organizations that address homelessness and housing insecurity in the region. Close to Home secures and distributes funding for direct service providers in the housing and homelessness sectors and provides guidance to improve local policies and programs.

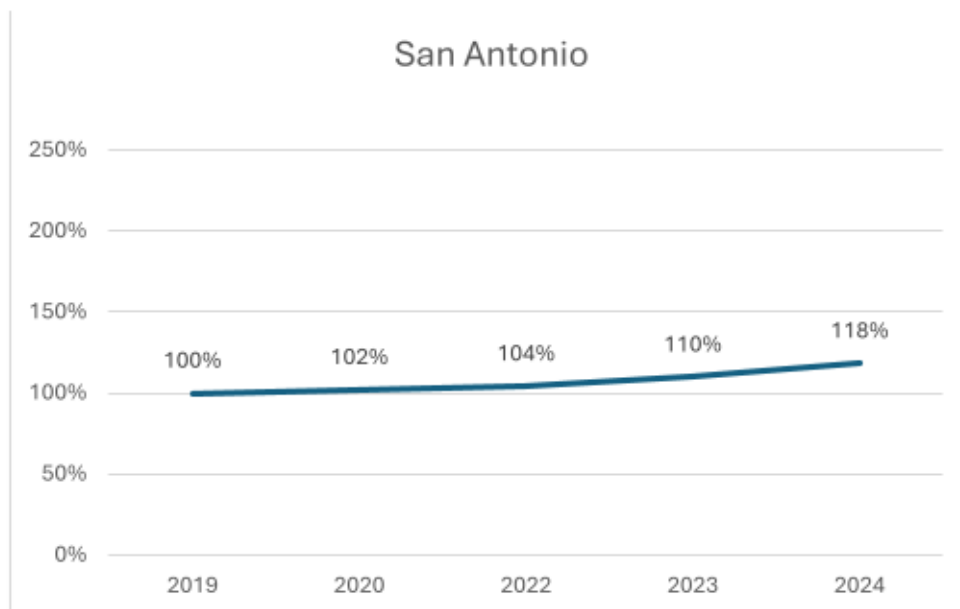
The [Alliance to House Everyone](#) is the HUD Continuum of Care (CoC) group of approximately 50 organizations that collaborate to address homelessness in the Bexar County region. With the support and direction of the lead agency, Close to Home, the Alliance to House Everyone convenes to share information, provide training opportunities, recommend coordination strategies, and address service gaps or resource needs. As the CoC lead, Close to Home supports the Alliance to House Everyone by securing funding, providing guidance, and improving local policies and programs. Together, Close to Home and the Alliance work toward reducing homelessness.

Program Highlight

[Haven for Hope](#), a 22-acre, 1,600-person shelter in San Antonio. The facility serves 85% of the city's total homeless population and offers opportunities for individuals to have a safe place to sleep indoors, hot meals, shower and laundry services, and access to numerous community resources.

SAN ANTONIO ADDENDUM

- **Historical Point-In-time Count data (2019-2024)**
 - [2024 Point-in-Time Count: State of Homelessness report](#)



- **Market conditions**
 - 2024 Fair Market Rent (1-bedroom): \$1,234.29
 - The typical home price is nearly four times the average household's annual income.
 - The residential vacancy rate is 9.3%
- **Housing supply conditions**
 - 89.5% buildable land: no excessive slope, no water or wetlands, which allows for outward expansion and lowered land costs
 - Land use regulations are relatively low, ranking 29th out of 54 large metros.
 - Stable rate of residential permitting in the San Antonio area, although cooling-off from a boom that occurred in 2022.
 - 8,311 residential permits issued in 2024; a 14.2% **increase** from the permits issued in 2018.
- **Median income**
 - Presently, the minimum wage is \$7.25, and as of 2023 the median household income for the greater San Antonio area was \$69,807.
- **Program cost***
 - Close to Home reported the following expenditure on homeless services in Fiscal Year 2020 (*the most recent year funding data is readily publicly available*):
 - Shelter and supportive services: \$10.8mil
 - Permanent supportive housing: \$5.5mil
 - Rapid Re-housing: \$6.3mil
 - Homelessness prevention: \$1.2mil
 - Outreach: \$1.2mil

- Behavioral health: \$4.2mil
 - ***Total expenditure: \$29.2mil***
- **Public data dashboard**
 - [System dashboard](#)
 - [Encampment dashboard](#)
 - [SMM Low-Barrier Non-Congregate Shelter](#)
- **Racial disparities in homelessness representation**
 - Black or African American individuals make up 19% of the homeless population, while constituting only 6% of the county's total populations.

Upstate South Carolina

North star: "To prevent, reduce and end homelessness through the coordination of agencies in our communities."

Population: 1,585,3999 (2023)

Counties: 13

Point in Time Count (2023):

Total individuals – 1,669

KPIs

- Length of time homeless
- Returns to homelessness
- Number of homeless persons
- Increased income
- First time homeless
- Exits from street outreach
- Exits to permanent housing destinations
- Exits to or retention of permanent housing

Implementing and maintaining a Homeless Management Information System (HMIS) allows the Upstate South Carolina program to compete more effectively for federal funding to support the work of preventing homelessness. Their KPIs are determined by data points captured in HMIS which allows for better management of client data, coordinated services, helps guide resource allocation, and streamline service delivery.

Structure

The Upstate Continuum of Care serves the 13 counties in Upstate South Carolina and is made up of more than 80 agencies. The nonprofit [United Housing Connections](#) is the lead agency in the CoC's efforts throughout 13 counties and is the collaborative applicant for the HUD CoC Program Grant.

HMIS in South Carolina is integrated for a more inclusive approach that enhances the ability to refer those needing services all over the state.

In 2023, the Upstate CoC began the process of developing a Diversity, Equity and Inclusion Committee that reinforces its "dedication to creating and maintaining an environment that is inclusive of all persons.

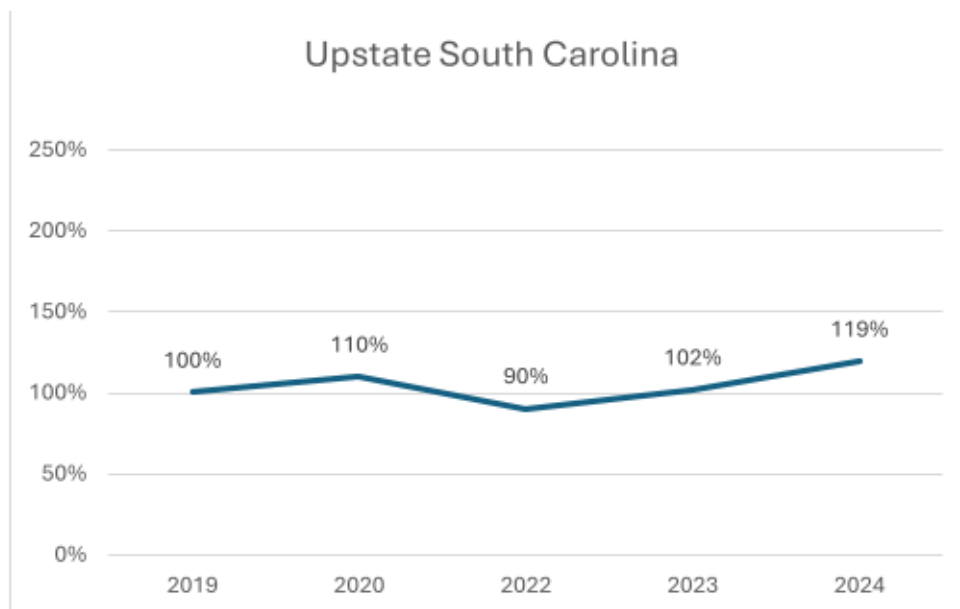
Program Highlights

Upstate South Carolina's regional coordination focuses primarily on funding and data sharing. Individual counties and cities have recently [announced](#) their own [initiatives](#) focused on connecting individuals to housing and shelter closer to their communities.

The City of Spartanburg, in acknowledging the rise in the presence and complexity of homelessness and the ongoing challenges that arise with it within the past few years, created the Homeless Engagement and Response Team (HEART). The HEART team operates with the following goals of reducing the number of homelessness by 10%, successfully refer at least 75% of homeless residents to resources within Spartanburg, and to engage in at least 12 educational opportunities with the community within the next year.

UPSTATE SOUTH CAROLINA ADDENDUM

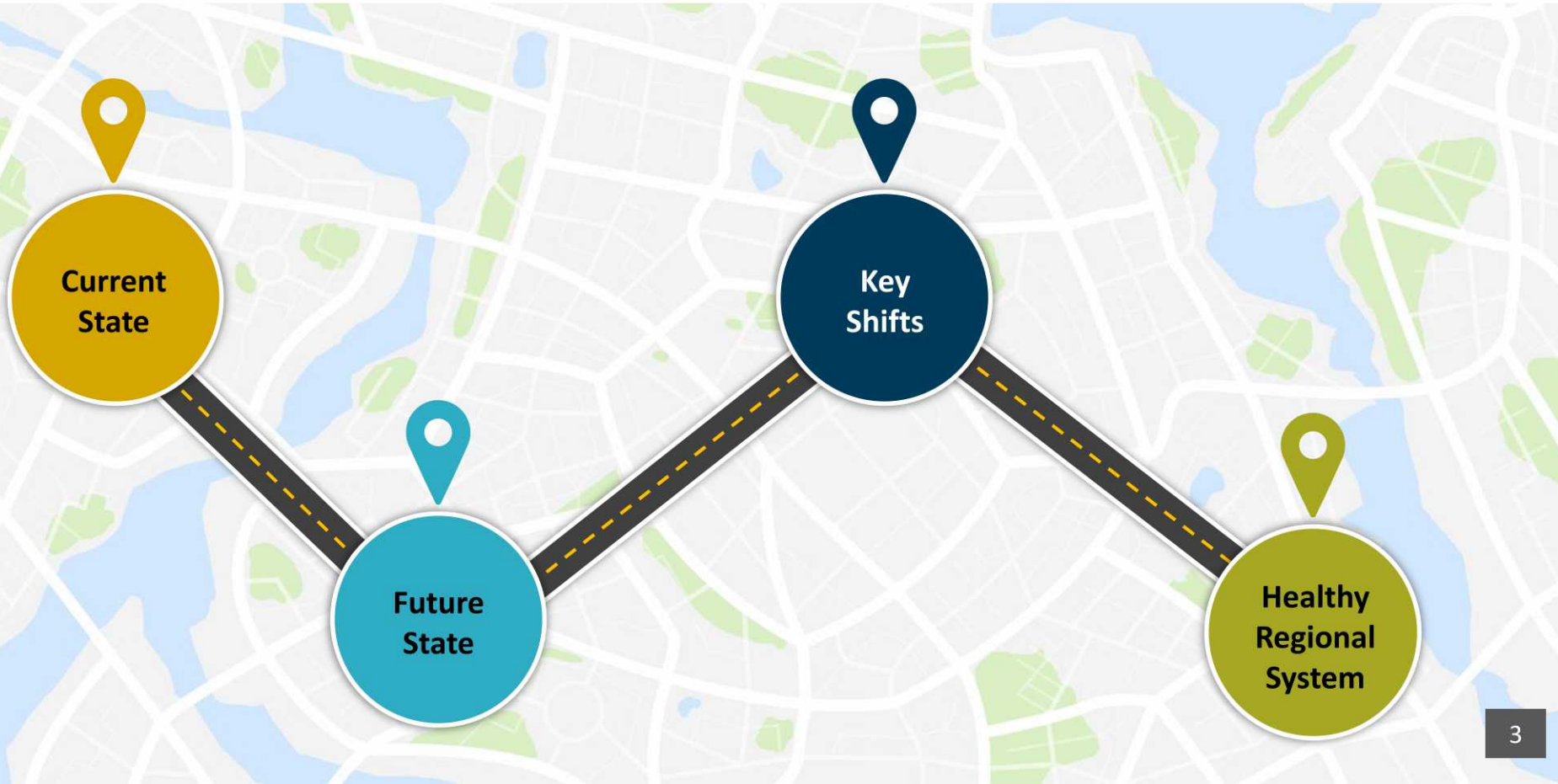
- **Historical PIT data for Case Study (2019-2024)**
 - [2023 Annual Homelessness Assessment Report](#)



- **Market conditions**
 - 2024 Fair Market Rent (1-bedroom) is \$841.
 - The typical home price is less than four times the average household's annual income.
 - The residential vacancy rate is 9%.
- **Housing supply conditions**
 - 81.4% buildable land; no excessive slope, no water or wetlands, which allows for outward expansion and lowered land costs
 - Land use regulations are very low. If included in the ranking cited in other Case Studies, the region would rank 50th out of 55 large metros
 - Low building code, zoning and minimum lot size regulations.
 - Residential building permits are increasing rapidly in the Upstate area. 13,421 residential permits issued in 2024; a 33.8% **increase** from the permits issued in 2018 and a 70% increase since 2015.
- **Median income**
 - Presently, the minimum wage is \$7.25, and as of 2023 the median household income was \$65,942.
- **Program cost**
 - *Publicly available information was insufficient to report this information.*
- **Public data dashboard**
 - PIT Dashboard: <https://www.upstatecoc.org/2023pit-dashboard>

- **Racial disparities in homelessness representation**
 - In 2023, the majority (72.1%) of residents in Upstate South Carolina identify as White. However, the majority (55.5%) of persons assessed for their Coordinated Entry System Prioritization List identified as Black, African, or African American.
 - [2024 Racial Disparities Study Summary](#)

Building a Shared Regional Foundation – Four Key Steps



Building a Shared Regional Foundation – Four Key Steps



Current SHS regional goals (10-year)

- **Reduce barriers** to housing stability for communities of color
- **Connect at least 5,000 households** experiencing homelessness to permanent supportive housing (Population A)
- **Stabilize at least 10,000 households** at risk of or experiencing homelessness in permanent housing (Population B)

Current SHS regional metrics (10-year summary)

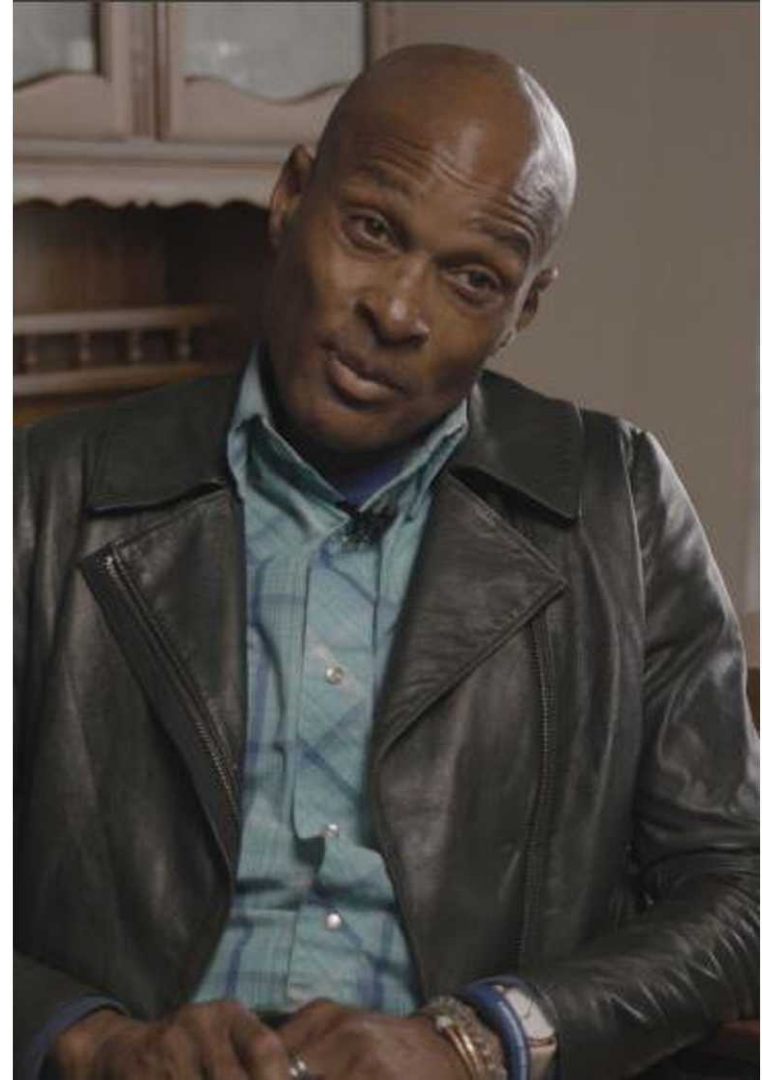
- Housing placements and homelessness preventions by housing intervention type
- Pop A & B household placements
- Housing retention rates
- Length of homelessness and returns to homelessness
- Funds and services leveraged through other systems

An outreach success story

“I resided in a tent for three years, but I had a vision...that I would be a better man for myself and my community. I want everybody to be somebody, to be the best that they can be. It makes everything a little bit easier when you have housing.”

-Brian Mitchell

Source: Multnomah County's FY23-24 SHS Annual Report



Building a Shared Regional Foundation – Four Key Steps



Group Conversations

Building a Shared Regional
Foundation



Building a Shared Regional Foundation



YOUR NAMES:

HEALTHY REGIONAL SYSTEM

What are the characteristics of a healthy, integrated regional system?

✓ WHAT IT IS:

✗ WHAT IT ISN'T:

KEY SHIFTS

What shifts in thinking, action, and approach are needed to move from where we are to where we want to be?

FUTURE STATE

What's our vision of success for the region?
What core beliefs drive our approaches and actions?



Share back

- Please take about 3 minutes per group to share your key highlights for Question 1:
 - What does a healthy regional system look like?

Next Steps for April 21

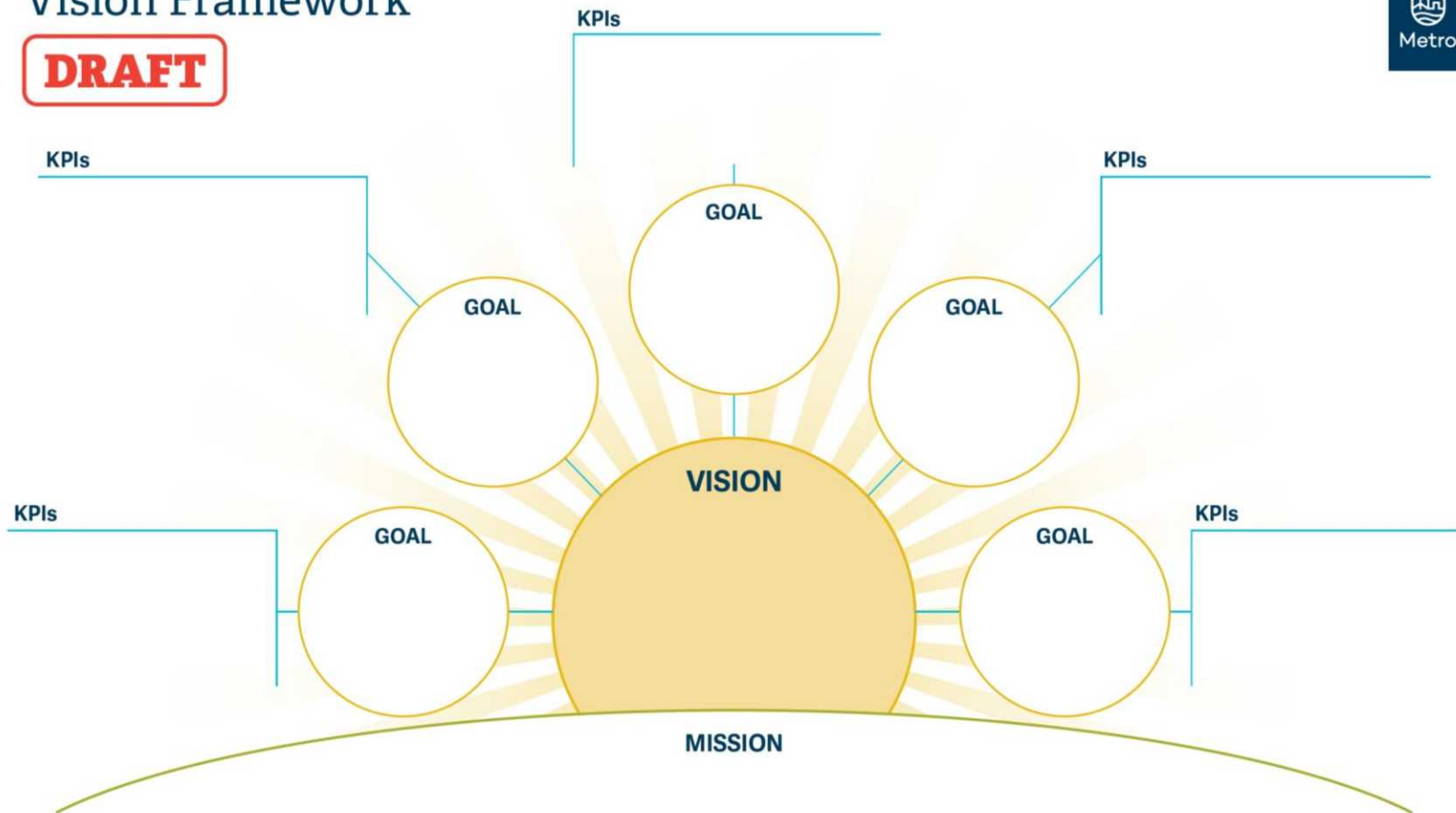
Context Setting



Vision Framework



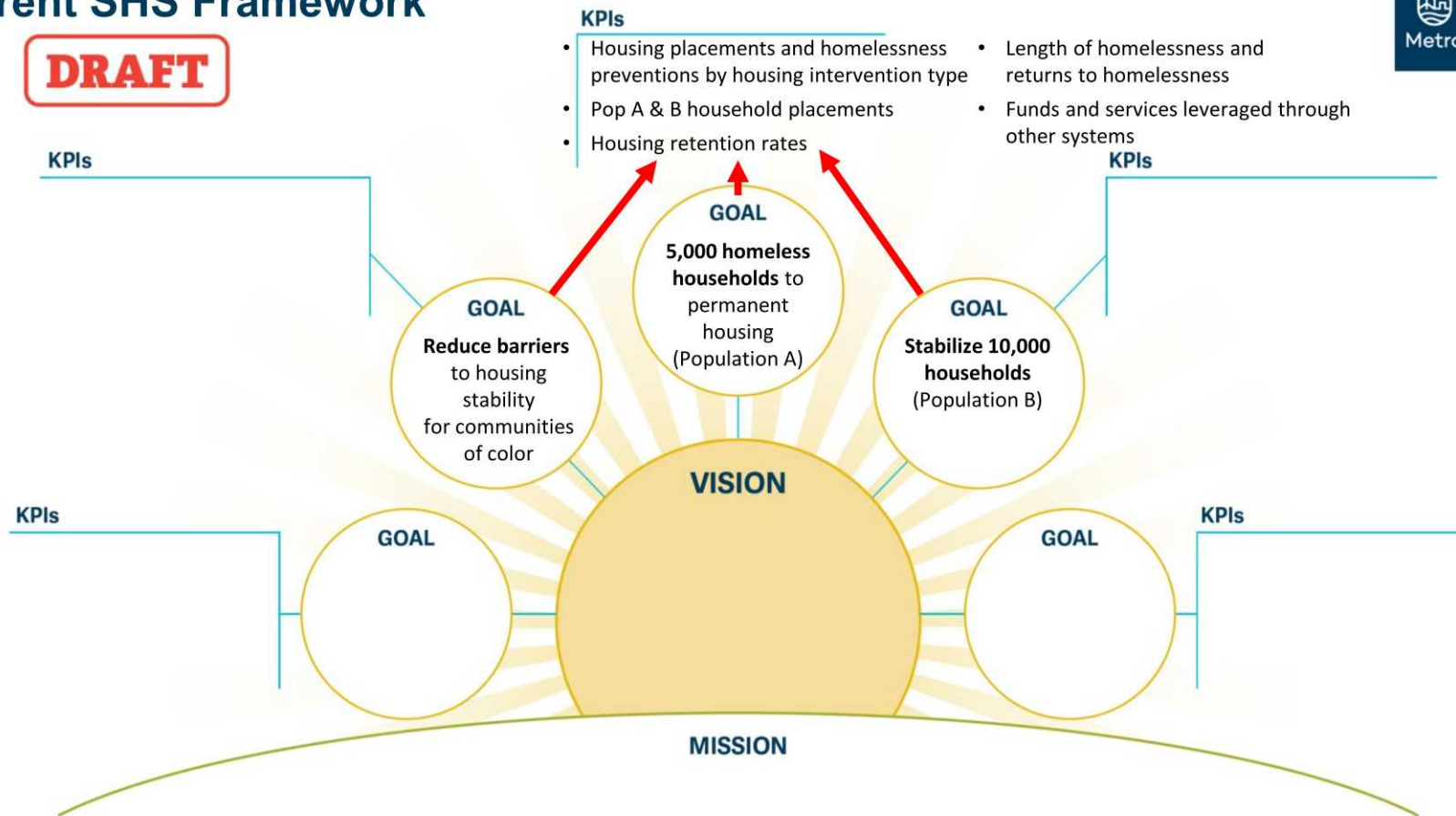
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Current SHS Framework



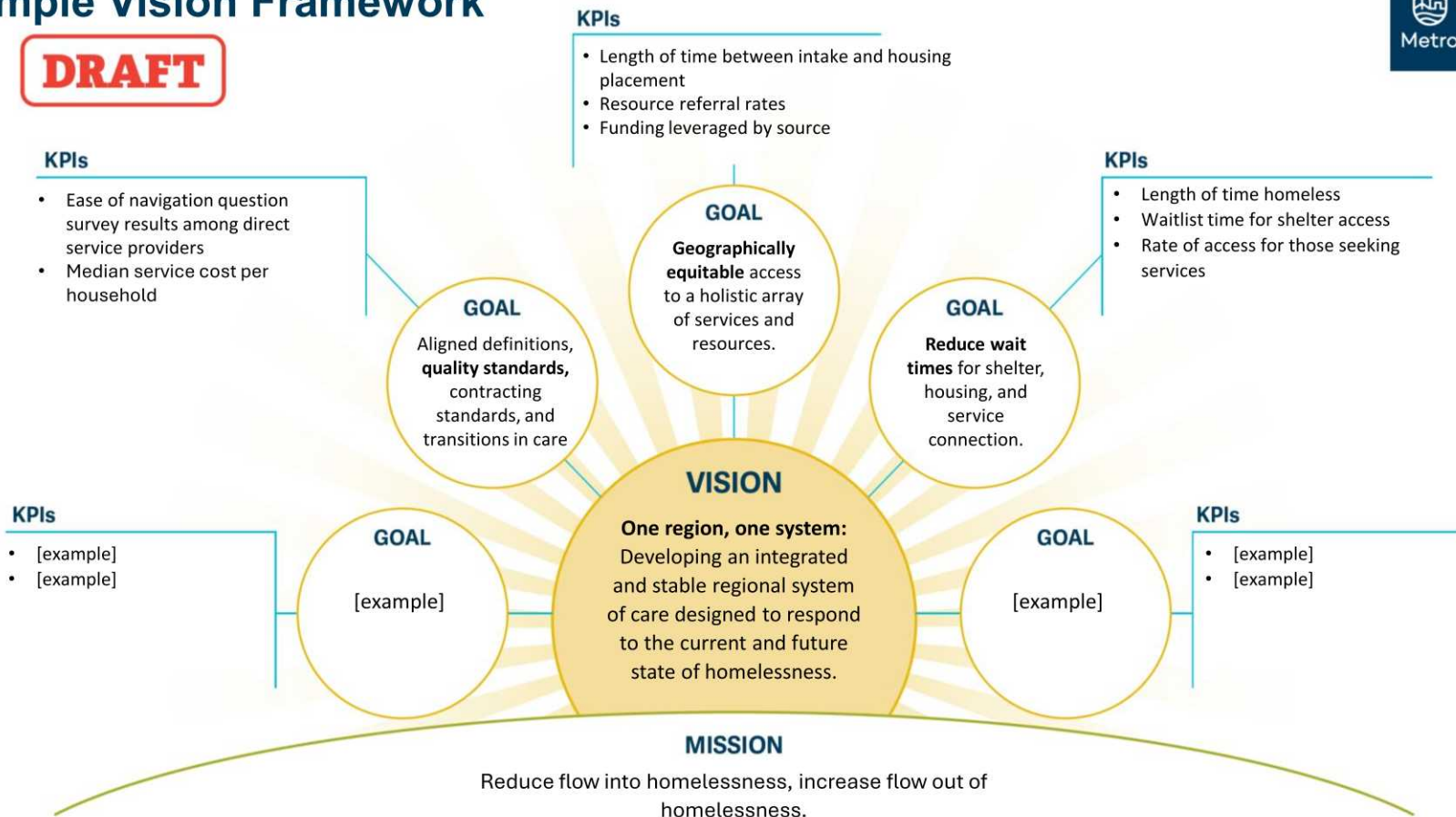
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Example Vision Framework



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Next steps

- Take **three copies of the framework** to use for your ideation.
- Collaborate with your colleagues to fill in each with a **vision, mission, goals, and KPIs**.
- You're welcome to **adjust the framework** as needed...
- But please **follow the provided definitions** of vision, mission, goals, and KPIs.
- Bring your **work on April 21** or email it to Metro in advance.

Vision Framework

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