



Health and Human Services - Chemical Dependency/ Mental Health 11323.511.

Mission Statement

Clallam County Health and Human Services (CCHHS) is dedicated to promoting and protecting the health, safety, and quality of life for all people in Clallam County.

Function

Administer dedicated behavioral health 1/10th of one percent sales tax funds through contracts for behavioral health services. This includes partial funding for Clallam County Therapeutic Courts—Living in Families Together (LIFT) Court, Drug Court, and Mental Health Court—as well as programs operated by the Clerk’s Office, Prosecuting Attorney’s Office, Harm Reduction Health Center, and clinical services within the Clallam County Jail and Juvenile Services. Responsibilities include ensuring provider compliance with contract requirements, developing and facilitating the Request for Proposals (RFP) and review process, and providing staff support to the Behavioral Health Advisory Board (BHAB).

Trends/Events

In 2019, CCHHS partnered with Kitsap Public Health District (KPHD) to develop a customized reporting system for behavioral health contractors. After KPHD reduced its role in 2024, Jefferson County Public Health joined efforts, providing an epidemiologist to support ongoing data collection and analysis. While this transition has presented challenges—particularly in onboarding the new epidemiologist and identifying the most appropriate software for a public-facing dashboard—annual reports continue to help track program outcomes and inform funding decisions. The partnership remains focused on increasing transparency through the development of an interactive data dashboard to show how behavioral health sales tax funds are being invested in the community.

Data collection of program outcomes from in-county funded programs in late 2023, providing a more accurate and transparent view of fund investments and associated outcomes. This effort enhances both public accountability and the BHAB’s decision-making. Additionally, billing practices among in-county funded programs have become more consistent, improving overall tracking quality.

In 2024, the BHAB approved reserving 25% of annual expenditures in the fund balance and using the remainder for a one-time, sustainable local behavioral health investment. The BHAB approved the allocation of \$2 million from fund reserves for the development of Peninsula Behavioral Health’s (PBH) North View housing project in Port Angeles, which will create 36 units of Permanent Supportive Housing. A contract for this project has been executed, and progress is underway.

Ongoing uncertainty and potential reductions in federal funding—particularly for Medicaid and other behavioral health support programs—pose significant risks to the stability of local behavioral health services. These challenges may lead to service disruptions, reduced access to care, and increased pressure on community-based providers. As a result, the need for flexible and sustainable local funding, such as the behavioral health sales tax, becomes increasingly critical to maintain core services, support innovative programs, and respond to emerging community needs.

In July of 2025 at the biannual retreat, BHAB discussed the potential use of additional fund reserves; however, due to lower-than-anticipated revenue in 2025, and in response to the ongoing uncertainty surrounding federal funding and Medicaid, the board opted to pause on further allocations. They are also considering holding back a greater portion of its routine RFP funds to maintain flexibility and ensure continued stability for programs.

Clallam County Mental Health Court was approved by the BOCC to utilize this fund in 2021, but through the utilization of grants the need has been delayed. Mental Health Court will pursue grant funding again, but may start utilizing this funding mid 2026. Mental health Court has engaged in an additional court specifically for veterans which is slated to utilize this funding as well.

With the recent establishment of the Integrated Clinical Services Department—merging medical and behavioral health care for both adults and juveniles—changes are underway in how behavioral health funds are allocated to these programs. Historically, Juvenile Services and the Jail operated with separate budgets; these have now been consolidated under the new department. As Medicaid billing and other funding sources are utilized, the long-term impact on the need for behavioral health sales tax funds for these programs remains to be seen.

In 2023, Clallam County began receiving opioid settlement funds. While a portion has been allocated, additional funding has been received and more is expected. In 2025, the Behavioral Health Advisory Board (BHAB) began working with the Board of Health to develop guidance for the strategic deployment of these funds. Although the process and priorities are still being refined, CCHHS is developing a gap analysis to better understand opioid-related needs in the county and support informed decision-making. The BHAB is likely to play a key role in any future RFP process related to the use of opioid settlement funds.

Goals

1. Continue to work with community behavioral health providers to assist in providing treatment, prevention, and support services for individuals across Clallam County.

2.

Monitor the progress of Peninsula Behavioral Health’s North View 36-unit Permanent Supportive Housing project, funded by a \$2.0 million allocation from fund reserves. Evaluate the benefits, risks, and impact of investing in innovative, long-term housing solutions.

3. Continue to work toward releasing a publicly accessible data dashboard that displays behavioral health sales tax investments, program performance metrics, and community outcomes to enhance transparency.

4. Track revenue trends closely and provide regular updates to the BHAB. Provide guidance on potential use of remaining fund reserves in light of changing funding landscapes, including federal and Medicaid uncertainties.
5. Collaboration between the Board of Health, BHAB, and other stakeholders to develop a strategic framework for the deployment of opioid settlement funds. Support the completion of a gap analysis and prepare for BHAB involvement in any future Request for Proposals (RFP) process.
6. Evaluate and refine the current grant application process that includes separate pathways for previously funded programs seeking renewal and new applicants requesting funding for the first time. This approach will decrease the burden of applying and reviewing proposals while ensuring transparency, equity, and appropriate review criteria for both continuing and emerging initiatives.

Workload Indicators

In-County Funded Programs	2023 Actual	2024 Actual	6/30/25 Actual
LIFT Court			
Number of adults receiving services through Therapeutic Court (LIFT)	10	36	18
Number of children receiving services through Therapeutic Court (LIFT)	12	55	25
Number of adults that graduated LIFT court	3	22	0
Number of children who achieved permanency without the need for a trial	4	8	3
Drug Court			
Number of clients receiving services through Drug Court	51	68	65
Number of clients that complete the Drug Court program successfully	7	19	15
Jail - Mental Health Professional			
Number of individuals served by MHP	388	703	128
Number of individuals served with mental health diagnosis	229	58	115
Number of individuals served with SUD diagnosis	239	368	108
Number of individuals served with co-occurring MH/SUD	195	330	97
Number of safe cell evaluations	53	53	16
Number of incarcerated individuals referred for SUD evaluation and subsequent treatment	128	164	33
Mental Health Court			
Numbers of clients receiving services through Mental Health Court	8		

Number of MH Court graduates		2	4
Prosecuting Attorney's			
Developing metrics	-	-	-
Harm Reduction Health Center			
HRHC - Average weekly participant encounters	60	134	200
Naloxone doses distributed	3,116	5,931	4,585
Naloxone training to community partners	98	276	39
Overdose reversals reported by participants	104*	356	116
OPCC staff wound care encounters	-	120	59
Partner SUD assessments	-	232	317
Juvenile & Family Services			
Total clients served	88	165	52
Number of individuals receiving MH services	25	50	9
Number of individuals receiving SUD services	28	69	26
Number of individuals receiving Co-Occurring services	35	44	17
Contracted through RFP Programs	2023 Actual	2024 Actual	6/30/25 Actual
Prevention/Early Intervention	532	1,433	419
- Outreach Events	4076	-	-
SUD/MH Housing and Shelter	223	324	20
Unfunded/Underfunded Behavioral Health Services	1672	2,251	231
West End Behavioral Health Services	20	20	36

Grant Funding Sources

This fund does not receive any grant revenue.

Revenues

	2023 Actual	2024 Actual	6/30/25 Actual	2026 Budget
Beginning Fund Balance	3,155,150	3,306,056	3,342,661	1,807,879
Taxes	1,991,513	2,034,895	937,404	2,157,000
Licenses and Permits	0	0	0	0
Intergovernmental Revenues	0	0	0	0
Charges for Goods and Services	0	0	0	0
Fines and Forfeits	0	0	0	0
Miscellaneous Revenues	0	0	0	0
Other Financing Sources	0	0	0	0
Transfers In	6,211	6,245	6,135	6,037
Total	5,152,874	5,347,196	4,286,201	3,970,916

Expenditures

	2023 Actual	2024 Actual	6/30/25 Actual	2026 Budget
Ending Fund Balance	3,306,056	3,342,661	2,323,181	843,820
Salaries and Wages	31,266	32,690	16,682	37,517
Personnel Benefits	14,240	14,654	7,347	15,252
Supplies	90	72	80	610
Other Services and Charges	1,746,943	1,865,987	1,899,431	2,990,871
Intergovernmental Services			0	0
Capital Outlays			0	0
Interfund Payments for Services	50,279	91,132	39,481	82,846
Transfers Out	4,000		0	0
Total	5,152,874	5,347,196	4,286,201	3,970,916

Staffing

	2023 Actual	2024 Actual	6/30/25 Actual	2026 Budget
Full Time Equivalents	0.50	0.50	0.50	0.50