

**Remote HHS and Public Safety
Meeting Agenda**
April 14, 2026 at 5:30 PM
Remote Meeting



MEMBERS
Councilor Anna Bullett, District 4, Chair
Councilor April Fournier, At-Large
Councilor Sarah Michniewicz, District 1
Councilor Wesley Pelletier, District 2

To submit written public comment on an agenda item, email HHSPS@portlandmaine.gov. Submissions must be received by 12:00 pm the day before the Health & Human Services and Public Safety meeting to guarantee their inclusion in the agenda packet. All submissions must include the commenter's name and legal address. To help ensure your comment is submitted for the correct item, please include the name of the agenda item (see below).

The Health & Human Services and Public Safety Committee will conduct this meeting remotely via Zoom pursuant to the Remote Meeting Policy adopted by the Portland City Council. Allow your computer to install the free Zoom app to get the best meeting experience. If you are not able to attend live either in person or via Zoom, a recording will be available in the [Agenda Center](#) following the meeting.

You are invited to a Zoom webinar!

When: Apr 14, 2026 05:30 PM Eastern Time (US and Canada)

Topic: Remote HHS and Public Safety Meeting

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Join via audio:

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+1 929 205 6099 US (New York)

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+1 312 626 6799 US (Chicago)

+1 689 278 1000 US

+1 719 359 4580 US

+1 253 205 0468 US

+1 253 215 8782 US (Tacoma)

+1 346 248 7799 US (Houston)

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+1 386 347 5053 US

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International numbers available: <https://portlandmaine-gov.zoom.us/j/84411111111>

1. Announcements
2. Review and Approval of Minutes from March 10, 2026
 - a. Draft minutes
3. Health & Human Services Department 2025 Annual Report (Maggie McLoughlin, HHS Director)
An overview of what the Barron Center, Elder Affairs, Public Health, and Social Services accomplished in 2025.
 - a. 2025 HHS Annual Report
4. Winter Warming Shelter Update (Maggie McLoughlin, HHS Director)
This update is a standing agenda item through the end of winter warming shelter operations in April.
5. FY27 Winter Warming Planning (Maggie McLoughlin, HHS Director)
Staff will seek guidance from the Committee regarding considerations for winter warming shelter next winter.
 - a. Staff memo
6. Public Safety Update (Mark Dubois, Police Chief)
A standing public safety update that alternates each month between the Police and Fire departments.
7. Next Meeting: May 12, 2026

Health & Human Services and Public Safety Committee

March 10 2026, 5:30 PM Remote Meeting

Committee Attendance:

Anna Bullett, Chair (District 4), Sarah Michniewicz (District 1), (Wesley Pelletier (District 2).
April Fournier (At-Large)

Councilor Attendance: Kate Sykes (District 5), Regina Phillips (District 3)

City Staff:

Adam Harr, Executive Assistant; Greg Jordan, Assistant City Manager; Mark Dubois, Police Chief; Maggie McLoughlin, Director of HHS; Dena Libner, Assistant City Manager; Chad Johnston, Fire Chief; Aaron Geyer, Social Services Director; Caity Hager, Emergency Management Coordinator.

1. Announcements

- This meeting will end then the Committee will go into executive session.

2. Review and Approval of Minutes from February 10, 2026

- Councilor Fournier moved to approve the minutes and seconded by Councilor Pelletier. The minutes were approved unanimously 4-0.

3. Winter Warming Shelter Update

- Social Services Director Geyer gave an update:
 - Operated 39 nights to date.
 - 18 nights longest uninterrupted streak.
 - 3,661 OT hours.
 - 389 unduplicated guests.
 - Average of 39 people per night with the last 6 nights opened averaging in the 20s.
 - Spent \$166,271 of the grant so far.
 - Have added blizzard and ice storm warming to activation threshold.

4. FY27 Winter Warming Shelter Planning

- Operations expectations for the Winter Warming Shelter next winter.
 - Constraints and how to overcome those constraints.
- How expectations were or were not met and how the
 - Include summer in this conversation.

Committee questions and concerns

- Councilor Fournier said the public is concerned when the temperature dips below 32 degrees. Based on our current experience, can we look at how many nights higher thresholds would entail and the associated costs? 20, 30 degrees or freezing)
 - Data available:

- 25 and below would be 77 nights.
 - 32 would be the bulk of the winter.
- Councilor Sykes said the wet and cold combination seems to be the most difficult to manage.
 - Would like to be open when people need to stay dry.
 - Would like to activate staff quicker than 48 hours.
- Chair Bullett is interested in looking at the OT and comms costs may be on par with full time a staff needed to move away from the threshold activation to be an emergency shelter open every night for this cohort.
 - Cares about the burnout of staff, including middle managers who stepped up.
- Councilor Michniewicz said that if the threshold were 40 degrees it would be open all winter and cost over \$1 million.
- The Committee is interested in looking at three scenarios:
 - 40 degrees
 - 32 degrees
 - A model that's open nightly (2 FTEs)
 - A non profit operator.
 - Input from community partners.
- The above threshold scenarios would all likely need to be funded for a nightly basis.
- There are lots of potential costs and the building itself affects cost and staffing structure.
 - Seasonal model (not threshold)
 - On peninsula
 - ~712,000
 - Could be extraordinarily higher.
 - 1 million for full window through April.
 - Off peninsula
 - Transportation adds to costs and logistic issue in storms.
 - It is unclear if Maine State Housing Authority funds will be available.
- Consensus on exploring a nightly basis for the winter season, staff will prepare a written summary on possible costs to see if the committee would seek to recommend funding through the FY27 operating budget.
 - If we are bringing on staff, there are benefit costs.
- Is this a potential for CDBG?
 - Likely eligible in the Social Services category but the deadline has passed.
 - Recommendations could be amended by HEDC or the Council.
- Councilor Pelletier asked if expenses would be eligible under opioid settlement fuds.
 - It could be if it was part of a day space but a stand-alone warming shelter would require an amendment.
 - Councilor Sykes would approve an amendment.
 - Can add to the HHS&PS workplan.

5. Emergency Shelter

- City of Portland operated shelters together served 1,641 Unique shelter clients who collectively had 164,884 bed nights and made 522 shelter-to-housing placements.
 - 2 low-barrier shelters for single adults:
 - Homeless Services Center (HSC)

- 166 Riverside
 - Family Shelter
 - Apartment style
 - 146-bed capacity
 - Serves approximately 42 families
 - < 5% of guests report Portland as their last residency
- Wrap around services
- Temporary winter warming shelter

6. Public Safety Update: Fire Dept.

- All hands is essentially a first alarm.
 - Everyone in the station is needed.
- 2 alarm brings in another company
- 3 alarm seeks aid from other communities.
- Is there a reason medcu 3 does so much transport?
 - Likely the aging population in the area.
- What is meant by “outside fire”?
 - Wide range such as trash fire on congress street, mulch fires from discarded smoking material.
 - Building fires include housefires (any structure)
- Shoutout to the companies and station serving Stevens Ave. (and the rest of the City).
- Rise in numbers: 50% increase in EMS calls since 2005.
 - Reasons? Is it related to populations that are not residents of Portland or unsheltered transient people? If so, is there regional funding available?
 - A large part of the workload serves our most vulnerable people.
 - The volume of work goes up with scope, not population.
 - May go to more community paramedicine in a person’s living room vs going to the emergency department.
 - Nationwide trend.
- Councilor Michniewicz asked if overall OD transports have declined like the OD deaths?
 - No, it has stayed consistent.

Next meeting is April 14, 2026.

Councilor Michniewicz moved to adjourn, and was seconded by Councilor Fournier. The motion passed unanimously 4-0 and the meeting adjourned at 6:24 PM.



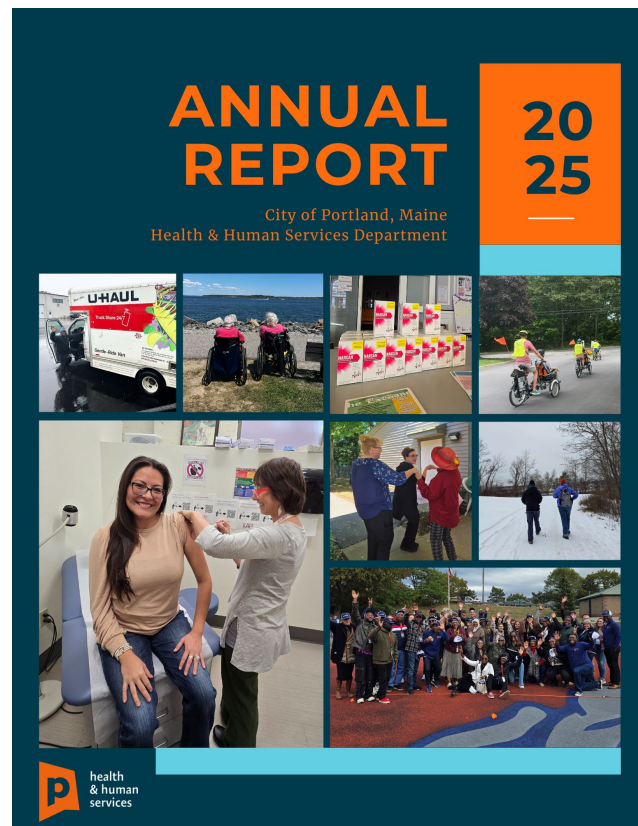
2025 Annual Report

Health & Human Services Department

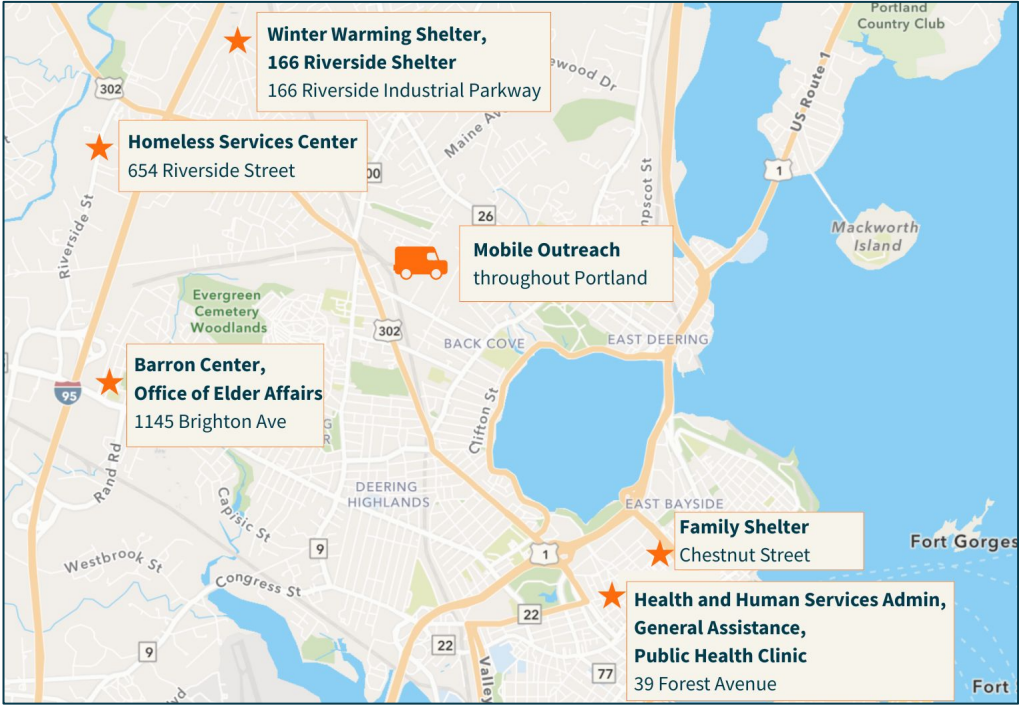
April 14, 2026

Report Highlights

- Ensuring Excellence in Long-Term Care
- Fostering an Age-Friendly Community
- Working to Address Homelessness
- Cultivating a Healthier Community
- Opioid Settlement Funds
- Community Partnership Highlights



Services and Locations



Ensuring Excellence in Long-Term Care



Barron Center

As a city-owned and operated facility, the Barron Center serves as a compassionate home for Portland residents requiring skilled nursing and rehabilitative services.

Highlights

- **193** unique residents served
- Clientele had statistically higher MaineCare enrollment (**81%**) and higher psychiatric diagnoses (**77%**)
- **40,246** bed nights provided

Fostering an Age-Friendly Community



Office of Elder Affairs

The Office of Elder Affairs (OEA) strives to creatively and collaboratively address issues that present hardships for Portland residents as they age.

Highlights

- Age-Friendly Summit event
- **455** patients received care through senior outreach nursing
- **132** shovelers were connected with **121** households through the Volunteer Snow Shoveling program
- **69** Adult Day Program clients received **16,222** service hours of programming

Our Work to Address Homelessness



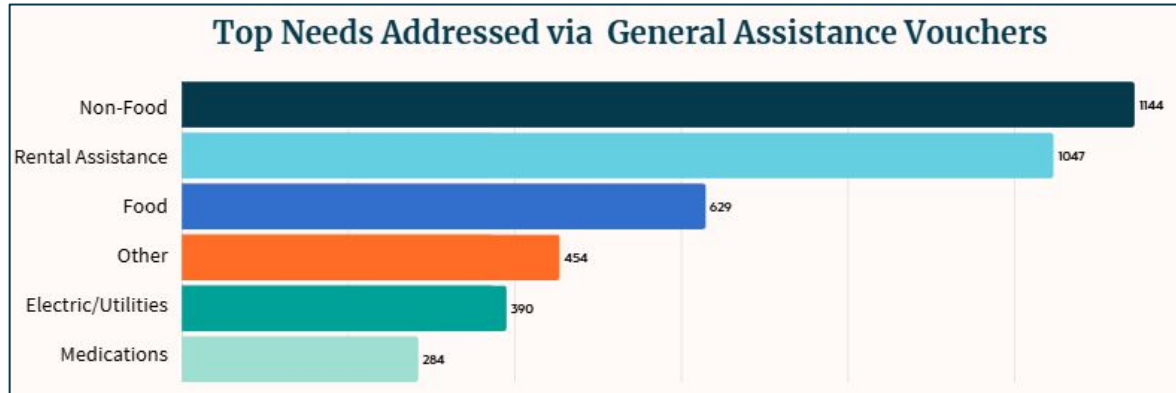
Social Services Division

We utilize a comprehensive, multi-pronged strategy centered on four key pillars of service: Prevention and Diversion, Outreach, Emergency Shelters, and Housing Support.

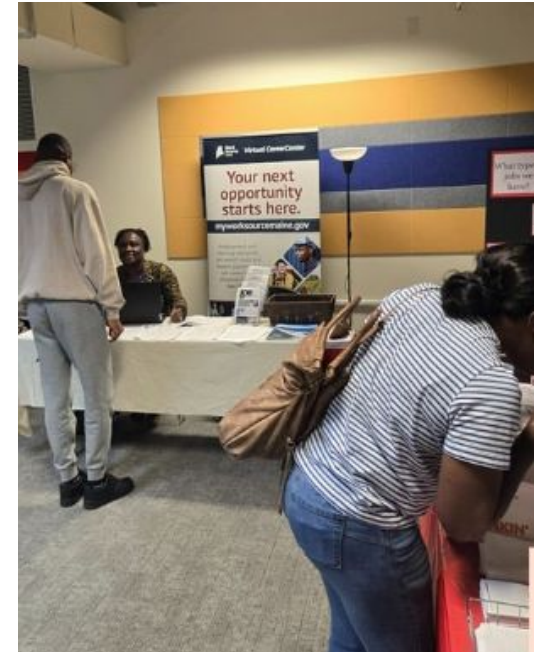
This continuum allows us to support our clients at every stage of their journey, addressing immediate crises while fostering long-term resilience.

We also operate Portland's General Assistance, a critical safety net that assists Portland residents with temporary financial assistance for basic needs.

General Assistance Highlights



- **3,948** households were eligible and received assistance.
- **53%** clients needed rental assistance for less than 3 months.
- Helping Individuals Regain Employment (HIRE) Program returned in May 2025 and **466** clients were connected with potential employers.



Shelter Highlights

- **1,641** unique individuals (including **79** families) utilized the year-round, city-run shelters
 - **164,883** bed nights were provided (over **451** years of homelessness)
 - Separately, the Winter Warming Shelter served **382** unique guests

Housing Highlights

- **682** individuals were successfully placed into housing
 - **67** long term* shelter guests were successfully placed into permanent housing.
 - **160** individuals (including **31** families) were housed without entering the shelter system through Project HOPE (Housing Opportunities for People in Encampments) and the Resettlement program.

*Long term stay defined as staying at a shelter 180 days out of a 365 day period



Cultivating a Healthier Community



Portland Public Health

Portland Public Health is Maine's only accredited local public health agency. Recognizing that health is more than just the absence of disease, PPH focuses on proactive prevention, health promotion, and the elimination of barriers to care.

We strive to deliver free or low-cost programming while working with patients and community partners to navigate the healthcare landscape and deliver the essential services Portland deserves.

Prevention Programming Highlights

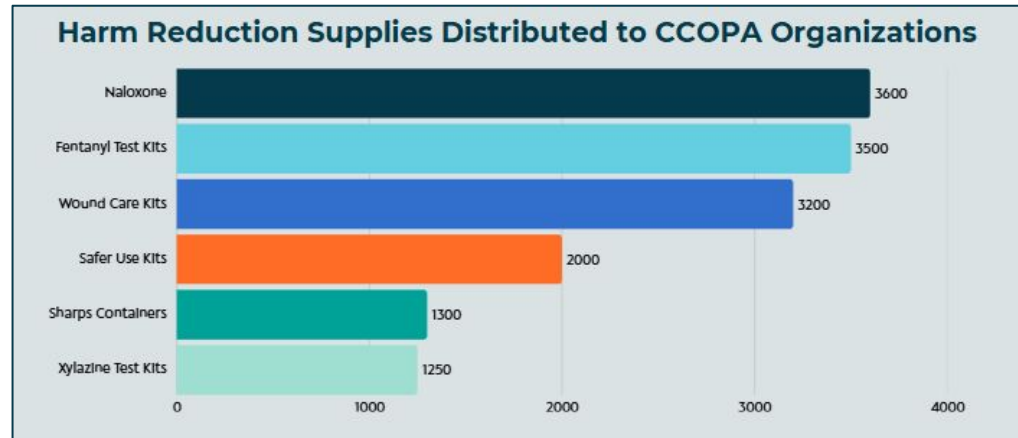
- **2,913** adults and children reached on how to make nutritious choices on a SNAP-eligible budget
- **10** local municipalities formalized new lactation-friendly policies
- **172** professionals and students were trained to respond to large-scale public health emergencies and bioterrorist events
- The **All-Hazard Base Plan** was finalized

Clinical Programming Highlights

- **215** patients received no-cost primary care through the Portland Community Free Clinic
- **101** patients received no-cost optometry consults and eyewear
- **860** patients received comprehensive sexual healthcare through the STD Clinic
- **110** patients utilized DoxyPEP following its introduction at the STD Clinic
- **97** pregnant/postpartum patients received clinical care and health education
- **2,886** patients were vaccinated and the immunization clinic now hosts walk-in clinics twice a week

Harm Reduction Highlights

- **31,916** Naloxone doses distributed*
- **857** Community reversals*
- **86%** Return rate of syringes safely collected and disposed by the Syringe Services Program
- **4,516** Client referrals to medical care, case management, substance use treatment, and recovery options
- **31%** Decrease in non-fatal overdoses across Cumberland County



**Reported by Cumberland County Overdose Prevention Alliance (CCOPA), a coalition of 20 partner organizations*

Opioid Settlement Funds



OSF Overview

The opioid crisis remains a critical public health challenge and the City of Portland is dedicated to utilizing its Opioid Settlement Funds (OSF) to implement evidence-based abatement strategies.

Projects

1. **Seasonal Half-Day Space** - St. Vincent de Paul Soup Kitchen
2. **Project HOPE** - City of Portland Social Services, CommonSpace, Milestone, Preble Street
3. **Syringe Redemption Project** - City of Portland Public Health
4. **Project Lifeline** - City of Portland Mobile Medical Outreach and MaineHealth
5. **Contingency Management**

Community Partnership Highlights



Food Distribution Pilot

City of Portland, Preble Street, Milestone Recovery, Hope Squad, and First Parish Church partnered to launch a food distribution pilot program.

An average of **83** individuals are served daily, with more than **7,798** participant-encounters.

Shelter Guest Community Programming

Supported by a generous donation from the Maine Community Foundation, the City's HEDC and HHS Department's partnered with Maine Boys to Men, Hearts of Pine, In Her Presence, and Maine Afro Yoga Project to enhance mental health and life skills for asylum-seeking shelter guests.

PARTNERSHIP

Thank you to our partners! Your collaboration and dedication are essential and amplify our collective impact on the community.



...and more!



Contact mmcloughlin@portlandmaine.gov



To: Health and Human Services & Public Safety Committee
Councilor Anna Bullett, Chair

MEETING DATE

April 14, 2026

AGENDA ITEM

Agenda Item # 5 - Winter Warming Shelter Planning FY27

PURPOSE

Provide information regarding potential warming shelter operations and costs to inform Committee consideration of policy changes for the FY27 season.

COMMITTEE WORK PLAN/CITY COUNCIL GOAL ALIGNMENT

The Council included reducing chronic homelessness in its 2026 Council Common Goals. The Health and Human Services and Public Safety (HHS&PS) Committee included a review of shelter missions in its 2026 workplan.

BACKGROUND

The City of Portland operates multiple shelters nightly throughout the year. In FY26, the City-operated emergency winter warming shelter (WWS) is supplemental, providing shelter to an additional 50+ individuals. The FY26 model for winter warming is a threshold-based, low-barrier shelter that is triggered when there is snow accumulation of more than 10 inches or a daily low temperature of 15°F. The current warming shelter is based at 166 Riverside Industrial Parkway, with shuttle service transferring clients to and from the peninsula. This facility is not guaranteed to be available in the FY27 season.

In March 2026, the HHSPS Committee discussed the strengths and weaknesses of the threshold-based model. While this model is limited in service provision and requires reliance on staff capacity and willingness to work overtime, it is more cost-effective. A model that includes daily seasonal operation provides more consistent services, but would require seasonal staffing and associated higher costs.

Cost Analysis

The following estimates should be taken as very rough estimates and most illustrative when considered as comparatives between one another. The true cost of services is highly dependent

on the location and building layout of the WWS site, as that determines the number of staff needed to safely operate the facility, and if dedicated transportation services are necessary.

For the sake of comparison, the following figures represent several assumed conditions:

- A 5,000 square foot building;
- Clean sight lines within the building, allowing for a minimum staffing level;
- Market rates for sq. footage for 5,000 sq/ft buildings on-peninsula range from annual amounts of \$12-\$35/sq ft, while off-peninsula they range from \$11-\$23/sq ft. This model assumes the upper limit of those ranges with a 15% contingency for a shorter-term lease;
- Estimated lease costs associated with the upper end of annual lease rates, with variation for on and off the peninsula;
- Staffing costs that reflect City of Portland wages and benefits for direct service staff time.

	On-peninsula	Off-peninsula	Details
Threshold-based model, 50 nights	~336,000	~\$334,000	Overtime staffing model
Peak season daily operations (Dec 1-March 15)	~\$769,000	~\$838,000	Seasonal staffing model
All season daily operations (Nov 15-April 30)	~\$1.17 million	~ \$1.28 million	Seasonal staffing model
Details	Does not include transportation	Incorporates transportation	

Operator

The cost estimates above are rough estimates based on City-led operations. If funding were appropriated for this program, the City may also allocate this funding to a private operator.

Funding source

WWS funds have historically been made available through the Maine State Housing Authority’s winter warming funding, typically released in the late summer and awarded in early fall. However, it is not clear how much funding will be available this season.

FISCAL IMPACT

Costs associated with operations at a rented facility are noted in the table above. Impact to the general fund would be dependent on revenue source. No fiscal impact would occur until a recommended expenditure is approved by the City Council as part of the FY27 operating budget.

CONCLUSION(S)

The key barriers to improving the City of Portland's WWS model are the lack of a physical building suitable for a seasonal warming shelter and the funding required for full-time seasonal operations. While shifting to a seasonal shelter model is the most effective means to ensure increased availability of services, it is associated with a significant additional fiscal impact.

PREPARED BY

Maggie McLoughlin
Director
Health and Human Services

RELEVANT COMMITTEE DOCUMENTS

Commonspace Memo (January 2025)- [Link](#)
Warming/Cooling Center Memo (April 2025)- [Link](#)
Winter Warming Threshold Update (January 2026)- [Link](#)
Winter Warming FY27 Shelter Planning Memo- [Link](#)
Winter Warming Plan- [Link](#)