



Statement of Work

Assisted Outpatient Treatment (AOT)

PURPOSE

Assisted Outpatient Treatment (AOT) programs provide court order intensive community based, wrap-around treatment as an earlier intervention to inpatient hospitalization and intended to stabilize and support individuals in community settings. AOT programs prioritize individuals on AOT orders, though ensure program capacity to serve individuals on Less Restrictive Orders (LROs). AOT programs will coordinate and collaborate with court systems, Designated Crisis Responders (DCRs), and other stakeholders and system partners within their region to support an individual's successful recovery and engagement in services.

DEFINITIONS

Assisted Outpatient Treatment (AOT)

A form of Less Restrictive Alternative designed as an earlier intervention for somewhat less acute patients but who still face significant risks and for whom voluntary outpatient treatment is not sufficient. (RCW [71.05.148](#))

AOT Service Provider

A behavioral health agency contracted with the North Sound BH-ASO to provide AOT services.

AOT Program

A program within an AOT service provider which provides the contractually required AOT services.

Least Restrictive Alternative (LRA) Treatment

A program of individualized treatment in a less restrictive setting than inpatient treatment that includes the services described in RCW [71.05.585](#).

SERVICE POPULATION

BHA's will provide services to priority populations for whom standard outpatient services are inefficient to meet their needs, however for whom involuntary inpatient treatment may not prove necessary. Individuals qualifying for AOT services:

- Have a diagnosed behavioral health disorder;
- Are unlikely to survive safely in the community without supervision and are substantially deteriorating, or require intensive treatment in order to prevent a relapse or deterioration that would be likely to result in grave disability or a likelihood of serious harm to themselves or to others;
- Have a history of lack of compliance with treatment for their behavioral health disorders that has caused, at least twice within the last 36 months, hospitalization, emergency medical care treatment, or incarceration, or, at least once in the last 48 months, violent acts;
- Are unable to have their recovery and stability ensured by any treatment less restrictive than AOT;
- And are believed to benefit from AOT services.

SERVICES

In accordance with applicable RCW 71.05 and 71.34 requirements, AOT is a court ordered outpatient service by Behavioral Health Agencies (BHA)'s providing Less Restrictive Alternative (LRA) Treatment. The BHA contracted for the AOT program services will include, but are not limited to:

- An intake evaluation with the provider of the less restrictive alternative treatment.
- A psychiatric evaluation, a substance use disorder evaluation, or both.
- A schedule of regular contacts with the provider of the treatment services for the duration of the order.
- Development of a transition plan addressing access to continued services at the expiration of the order.
- Development of an individual crisis plan.
- Consultation about the formation of a mental health advance directive under chapter [71.32](#) RCW.
- Monitoring of and Notification to appropriate stakeholders of non-compliance.
- Facilitation of the individual's required appearances in court.
- Efforts to eliminate barriers to obtain prescriptions medications where applicable.
- Development of whole person treatment plans with individuals that includes personal goals as well as those ordered by the court.
- Ongoing and consistent outpatient therapy for the duration of the AOT order.
- Ongoing and consistent peer support for the duration of the AOT order.
- Ongoing and consistent case management for the duration of the AOT order.
- Facilitation of connection to resources such as housing assistance, job applications, and medical appointments.
- Assistance preparing for and attending required court appearances, as well as attending and supporting the individual during said appearances.
- Access to 24/7 crisis response services.
- Adhering to state-wide AOT best practice guidelines as they develop.

PROGRAM STAFFING

BHA's will employ a multidisciplinary team that includes licensed professionals and appropriate lines of supervision, which may include, but is not limited to:

- A Licensed Psychiatric Prescriber (M.D. or ARNP)
- Mental Health Providers
- Substance Use Disorder Providers
- Certified Peer Counselors
- Bachelor's Level Case Managers
- An Administrative Assistant
- A Court Liaison

A supervisor appointed and deemed qualified by the director of the AOT service provider will provide staff access to trainings and educational resources to include, but not limited to:

- Motivational interviewing
- Strength-based and harm reduction interventions
- Trauma-informed practices
- Cultural humility
- Mental Health First Aid
- Conflict resolution and de-escalation techniques
- Suicide risk assessment and prevention

- Overdose prevention, recognition, and response
- Law enforcement or first responder sponsored trainings.
- Situational influences on mental health
- Comprehensive, wraparound interventions

COORDINATION

1. AOT programs will coordinate closely with emergency services, criminal justice systems, inpatient/residential service providers, DCR offices, tribal governments, and Indian Health, to determine individuals who would qualify for AOT services.
2. AOT programs will coordinate and collaborate with court systems, contractors providing services to Individuals released on AOT orders, and other stakeholders within their region to coordinate ongoing services.
3. AOT programs will coordinate with the ASO AOT coordinator for the purpose of LRA/AOT monitoring AOT programs will coordinate with the ASO on the Superior court hearing processes, hearing outcomes and monitoring.

DATA/REPORTING

BHA's will submit all required service data and transactions in compliance with North Sound BH-ASO Data Guide, SERI reporting requirements and/or North Sound BH-ASO Supplemental Provider Guide. North Sound BH-ASO may request additional program reporting that demonstrates the AOT implementation progress, effectiveness, and utilization of the pilot program.

DELIVERABLES

Not Applicable (see data/reporting)