

**NORTH SOUND MENTAL HEALTH ADMINISTRATION  
ADVISORY BOARD MEETING**

**Agenda  
May 6, 2014  
1:00 PM**

1. Call to Order - Introductions, Chair (2 min)
2. Revisions to the Agenda, Chair (1 Min)
3. Comments from the Public (5 min)
4. Approval of the April Meeting Minutes, Chair (1 min) TAB 1
5. Executive/Finance Committee Report (10 min) TAB 2
  - Approval of Expenditures
6. Standing Board of Directors Committee Reports (5 min) TAB 3
  - Planning Committee
  - Quality Management Oversight Committee [Available at meeting]
7. Old Business (10 min) TAB 4
  - Final Scholarship Application Forms
8. Executive Director Report (10 min) TAB 5
9. Action Items Being Brought To The Board of Directors (5 min)
  - Action Items Memorandum [Available at meeting]
  - Approval of Redesign of Crisis Services Plan
10. New Business (3 min) TAB 6
  - Utilization Report
11. Report from Advisory Board Members
  - E&T Visit April 16
12. Comments from County Advisory Board Representatives (5 min)
  - a. Island
  - b. San Juan
  - c. Skagit
  - d. Snohomish
  - e. Whatcom
13. Other Business (3 min) TAB 7
  - Island County Letter
  - Chair Emeritus Comments
14. Adjournment

NOTE: The next Advisory Board meeting will be **June 3**, 2014 in the NSMHA Conference Room.

**North Sound Mental Health Administration (NSMHA)**  
**MENTAL HEALTH ADVISORY BOARD**  
**April 1, 2014**  
**1:00 – 3:00pm**

<b>Present:</b>	<b>Island:</b> <b>San Juan:</b> Peg LeBlanc (on the phone) <b>Skagit:</b> Joan Lubbe <b>Snohomish:</b> Carolyn Hetherwick Goza, Carolann Sullivan, Marie Jubie, Joan Bethel, Jennifer Yuen, Fred Plappert, Jeff Ross <b>Whatcom:</b> David Kincheloe, Mark McDonald
<b>Excused Absence:</b>	<b>Island:</b> Candy Trautman <b>San Juan:</b> <b>Skagit:</b> <b>Snohomish:</b> <b>Whatcom:</b>
<b>Absent:</b>	<b>Island:</b> <b>San Juan:</b> <b>Skagit:</b> <b>Snohomish:</b> <b>Whatcom:</b> Larry Richardson
<b>Staff:</b>	Joe Valentine, Margaret Rojas, Joanie Williams recording
<b>Guests:</b>	

**MINUTES**

TOPIC	DISCUSSION	ACTION
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<b>CALL TO ORDER AND INTRODUCTIONS</b>		
Chair	The meeting convened at 1:07 and Mark initiated introductions	Informational
<b>REVISIONS TO THE AGENDA</b>		
Mark asked if there were any revisions to the agenda. Advisory Board Retreat, Lunch Arrangements and NAMI Basics topics were requested and added to the agenda.		
<b>COMMENTS FROM THE PUBLIC</b>		
Chair	None present	Informational
<b>OMBUDS Semi-Annual Report</b>		
Chuck Davis	Chuck gave a report on the grievance occurrences, complaints and appeals from October 1, 2013- March 31, 2014. He gave an overview on the role of the Ombuds in addition to collaboration activities with NSMHA. It is estimated the region's complaint rate is 4% or less. Chuck included Ombud's recommendations to NSMHA. It was requested that at the next presentation Chuck review the complaint/grievance categories. Discussion followed.	Informational
<b>APPROVAL OF MINUTES</b>		
Chair	The March Minutes were reviewed. There was one revision noted, Joanie will amend the past minutes. There was motion made to accept the minutes. Motion was seconded and approved.	Motion approved to accept minutes as amended
<b>EXECUTIVE/FINANCE COMMITTEE</b>		
<b>Co-Occurring Disorders Conference</b>	Mark inquired as to the interest level of members attending the Co-Occurring Disorders Conference on October 6 & 7, 2014. Jeanette, David and Mark are interested. Peg may be interested.	Informational

<b>Approval of Expenditures</b>	A motion was made to recommend the expenditures to the Board of Directors for approval.	<b>Motion approved to forward expenditures to the Board of Directors</b>
<b>STANDING BOARD OF DIRECTORS COMMITTEE REPORTS</b>		
	<b>Planning Committee</b>	
	The March meeting was canceled, no brief available	<b>Informational</b>
	<b>Quality Management Oversight Committee (QMOC) Report</b>	
	QMOC Brief was included in Member binders	<b>Informational</b>
<b>OLD BUSINESS</b>		
<b>Tribal Registrations</b>	Conversation took place regarding Advisory Board Members attending the Tribal Conference which takes place on May 13 <sup>th</sup> and 14 <sup>th</sup> . Mark, Joan L, and David are going and no hotel room is needed. Jeanette, Carolyn, Marie, Joan B, Fred and Marilyn are attending and would like a hotel room. Carolann is attending Tuesday only. Candy let the Board know she is attending, as well and does not need a room.	<b>Informational</b>
<b>Dignity and Respect Conference Evaluations</b>	Margaret gave an overview of the Dignity and Respect Conference Evaluations. Discussion followed. She noted the overall feedback was positive.	
<b>EXECUTIVE DIRECTOR'S REPORT</b>		
<b>Oso Mudslide and NSMHA participation</b>	Joe spoke on NSMHA's participation in assisting victims of the mudslide in Oso. He and Sandy Whitcutt have been involved in meetings concerning the Public Mental Health System supporting victims, families and others impacted by the tragedy. He talked about the involvement of the Volunteers of America (VOA), in addition to Catholic Community (CCS) Children Services deploying child mental health counselors for affected school children. He spoke on Federal Funding Assistance for specific disaster counseling. The State will receive the funds and contract with an agency, in turn, train and deploy counselors. Joe went on to talk about two Disaster Resource Centers in Arlington and Darrington and said NSMHA agencies will have a presence there. Group discussion followed which included the assistance of the Green Cross.	<b>Informational</b>
<b>Increasing County Medicaid Administrative Services</b>	Joe talked about the Legislative budget. There was no additional money provided for Chemical Dependency to offset the loss of reimbursement from the transition to Medicaid, but money was provided for Community Mental Health Services, to include operating funds for three additional Evaluation and Treatment Facilities within the state but no capitol funding was provided. Funding was established for three new Programs of Assertive Community Treatment (PACT) teams in King, Pierce and Spokane Counties. Funding for Recovery Supportive Services will be allocated to NSMHA, Greys and Greater Columbia RSNs. Joe talked about the status on Crisis Redesign moving ahead and he gave details, in addition to the redesign and expansion of the Mobile Outreach Teams (MOTs). The specific recommendations will be presented to the Advisory Board in May and June. He spoke about the merger of Whatcom Compass Health and Whatcom Counseling and Psychiatric Clinic. Joe talked about NSMHA incorporating recovery principles with the Evaluation and Treatment (E&T) and Triage Centers. Group	<b>Informational</b>

<p><b>Behavioral Health Integration</b></p>	<p>conversation followed.</p> <p>Joe discussed the Behavioral Health Integration and the Decision Paper which will be presented to the Board of Directors (BOD) next week. Joe asked for comments and suggestions from the Advisory Board which will be added to his report. He spoke about the Legislature passing bill which will integrate Mental Health (MH) and Chemical Dependency (CD). He gave specifics on the three options and engaged the AB in discussion. The notes below are a brief overview of their feedback:</p> <ul style="list-style-type: none"> <li>✓ <b>David:</b> noted the positive aspects of integration, as it pertains to the future of the Advisory Board, it would broaden the Advisory Board’s perspective.</li> <li>✓ <b>Joan L:</b> talked about funding issues from past experiences. She cautions NSMHA regarding MH and CD integration.</li> <li>✓ <b>Michael:</b> asked for clarification from Joe pertaining to NSMHA’s current funding status verses the integration model.</li> <li>✓ <b>Jeanette:</b> does not want the State to control the Advisory Board, there will be a major disconnect with consumers. She noted the importance of Peer involvement. She would like the E&amp;T in Sedro Wolley re-opened.</li> <li>✓ <b>Michael:</b> is in favor of a model which is cohesive to local consumer input.</li> <li>✓ <b>Fred:</b> in favor of local control.</li> <li>✓ <b>David:</b> had a question on Joe’s form regarding one of the ‘pros’ on Option 3, which states “May bring new resources into the system from the managed care organization”. He would like to know if this could be added as a ‘pro’ on Option 1. Joe summarized, noting expertise could be shared across the systems. The two strategies can inform one another, to include Peers.</li> <li>✓ <b>Marie:</b> chemical dependency and mental health integration should have taken place years ago.</li> <li>✓ <b>Carolyn:</b> expressed concerns from Snohomish County past practices regarding separate money streams for mental health and chemical dependency. Joe summarized the thought with lessons learned from county experiences, (integrated funding will bring the two together).</li> <li>✓ <b>Joan B:</b> stated the counties caused the above issue which Carolyn talked about. She elaborated on the funding portion.</li> <li>✓ <b>David:</b> Would like to see Evidence Based Practices (EBPs) implemented in treatment with co-occurring disorders. Integrate funding and treatment modalities.</li> </ul>	
<p><b>ACTION ITEMS BEING BROUGHT TO THE BOARD OF DIRECTORS</b></p>		
<p><b>Memorandum</b></p>	<p>The Action Items were included in each member binder; Joe gave an overview of each. A motion was made to forward the action items to the Board of Directors for approval. Motion was seconded and approved.</p>	<p><b>Motion made to forward the action items to the BOD</b></p>
<p><b>NEW BUSINESS</b></p> <p><b>NAMI Walk / Out of the Darkness Walk:</b> flyers were included in the binders for the members, should they choose to participate in the community walks. Carolyn noted NAMI is having a Snohomish County walk, as well.</p> <p><b>Site Visit April 16<sup>th</sup>, 10:30: Mukilteo E&amp;T</b> Margaret talked about the site visit and asked who was interested in attending. David, Marie, Joan Bethel, Jennifer, Carolyn Mark and Fred voiced interest. Margaret said the group can carpool from NSMHA or members could meet at the site. It was determined NSMHA will send out a follow up email to interested members; Joanie will do this.</p>		

**RETREAT:** Mark initiated discussion about the upcoming Retreat in July. Location, food, areas of focus and the use of Facilitator was discussed. One of the topics suggested was to dialogue about the changes that will take place from the Behavioral Health Integration viewpoint. Another suggestion was to look at last year's retreat summary page and incorporate the goals with the probable integration changes. Joe suggested a discussion to structure the future involvement of consumers, community and family involvement with the future Behavioral Health Organization (BHO), as well as the Regional Health Alliance (RHA). He also suggested adding an update on the PEER support network. The location of LaConner was discussed, in addition to last year's Sub-Committee. Joe said volunteers will be requested for the Retreat Sub-committee at the next meeting. The volunteers will work on the retreat agenda. Joanie will have a hand out available at the next meeting with the Retreat topics identified from this meeting. Joanie will research available locations and dates and bring it to the May meeting, as well.

**Conference Scholarship Applications:** Conversation took place regarding the application process. Joanie will email the Advisory Board (AB) scholarship application and the Behavioral Health Conference (BHC) registration to Providers with a deadline for scholarship requests, to ensure enough time is allowed for the Application Review Committee to review and approve requests before the BHC scholarship cut-off date. By the next meeting Joanie will have the forms printed for the Advisory Board to review. It was determined the Tribal Conference is excluded from the Review Committee because there is not enough time to review applications before the event.

**Lunch Provision:** There was group dialogue regarding NSMHA Staff ordering Advisory Board lunches, as well as discussion regarding members purchasing their own lunch. The group voted to determine whether NSMHA AB should go back to the previous way of ordering lunch for the group as a whole, versus the current new way of members bringing their own lunch, or Joanie ordering individual lunches for each member. All but two members voted in approval for group lunch to be provided by NSMHA. It was also determined the other members who did not want to take part in the group lunch could purchase their own lunch and provide an expense form for reimbursement, up to \$15.00. The head count for the group lunch will be determined through RSVPs when the request for agenda items is sent out.

Jeanette requested the Advisory Board have a party for the PEERS to celebrate recovery. Joe suggested the Dignity and Respect Committee take on this request.

**NAMI Basics:** Carolyn talked about the NAMI Basics and early identification of children with Mental Illness. She passed out flyers. Joe said Margaret would send the flyer out through our email distribution list to Providers. Joe suggested having Julie do a pre-meeting on WISE. Joanie will check with Julie to see when she is available.

**REPORT FROM ADVISORY BOARD MEMBERS**

**COMMENTS FROM COUNTY ADVISORY BOARD REPRESENTATIVES**

No comments from the counties were given in interest of time

Island		Informational
San Juan		Informational
Skagit		Informational
Snohomish		Informational
Whatcom		Informational

**OTHER BUSINESS**

none

**ADJOURNMENT**

Chair	The meeting adjourned at 2:58pm	Informational
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**Advisory Board Budget  
January through April 2014**

	All Conferences	Board Development	Advisory Board Expenses	Stakeholder Transportation
Total	Project # 1	Project # 2	Project # 3	Project # 4
Budget	\$ 28,590.00	\$ 13,900.00	\$ 1,600.00	\$ 12,490.00
Expense	(4,270.68)	(375.00)	(3,862.08)	600.00

Under / (Over) Budget \$ 24,319.32

BHC, NAMI, COD, OTHER	BOARDS SUMMIT (RETREAT)	Costs for Board Members (food, mileage, misc.)	Non- Advisory Board Members, to attend meetings and special events

**North Sound Mental Health Administration**  
**Warrants Paid**  
**April 2014**

	Type	Date	Num	Name	Memo	Amount
<b>Advisory Board</b>						
<b>Travel</b>						
	Bill	04/01/2014	March2014	Bilson, Dan G.	Batch # 104858	33.60
	Bill	04/01/2014	March2014	Kincheloe, David	Batch # 104858	262.98
	Bill	04/01/2014	March2014	McDonald, Mark	Batch # 104858	107.09
	Bill	04/09/2014	March2014	AA Dispatch	Batch # 104963	503.25
	Bill	04/09/2014	April2014	Yuen, Jennifer	Batch # 104963	47.04
	Bill	04/29/2014	April2014	Kincheloe, David	Batch # 105257	242.26
	Bill	04/29/2014	April2014	McDonald, Mark	Batch # 105257	153.74
	<b>Total Travel</b>					<u>1,349.96</u>
<b>Miscellaneous</b>						
	Bill	04/09/2014	538734	Mister T Trophies	Batch # 104963	92.23
	Bill	04/09/2014	April2014	NSRSN (Petty Cash)	rent/deposit Town of LaConner	375.00
	<b>Total Miscellaneous</b>					<u>467.23</u>
	<b>Total Advisory Board</b>					<u>1,817.19</u>
						<u>1,817.19</u>
						<u><b>1,817.19</b></u>

## **Planning Committee Brief**

April 18, 2014

### **The Planning Committee met on April 18<sup>th</sup> and discussed the following topics:**

- **WISe Capacity Study:** Wraparound, Inclusive of Intensive Services (WISe) is a new child and youth program adhered to by the Department of Behavioral Health and Recovery (DBHR) as part of the TR Lawsuit settlement. Cost and data was discussed in addition to the State's plans to develop a case rate to reimburse services provided using the WISe model. A certification process for Clinicians is required. Snohomish, Whatcom and Skagit will start utilizing the WISe model July 1<sup>st</sup>.
- **CPET Update:** Children's Policy Executive Team (CPET) is a cross system, cross county committee, approximately 20 years old, with the vision of children and families obtaining what they need without system barriers. Committee goals for 2014 were discussed at the January Retreat, assisted by an Oregon State University Facilitator. The outcome of the retreat identified work plans for the group. The current work plan includes family driven, youth guided elements. CPET may also pilot blended fiscal supports specific to Family Driven-Youth Guided outcomes. Next spring CPET will have its fourth System of Care Institute conference.
- **Next Steps Crisis Service Redesign:** Following group discussion, approval was made to forward the following topics to the Advisory Board and Board of Directors:
  - (1.) Increase the Capacity and Utilization of Triage Centers
  - (2.) Integrate Voluntary Emergency Service and Mobile Outreach Teams into a Single Program Model
  - (3.) Improve Coordination and Community Outreach
  - (4.) Enhance Crisis Services in Rural Areas
- **Formation of Behavioral Health Organization:** Creation of a Behavioral Health Organization (BHO) was discussed, which will be taking place within the North Sound region. Information on the background, legislation, options, stake holder workgroups, task force, reporting time lines and integration was reviewed. The contracts for the BHOs will begin April 2016. NSMHA's Executive Director will keep the Committee updated as the plan unfolds.



## Guide for Scholarship Applicants

Here are some ideas and resources for you to use in your search for funding. We hope that you find them useful!

### Possible Sources of Additional Funding:

- Your Employer, or other Private Businesses
- Community Mental Health Agencies
- Managed Care Organizations
- Health Insurance Companies
- Religious/Spiritual Organizations (e.g., Churches, Mosques, Synagogues, Temples, etc.)
- Boards/Committees you may be a member of
- State Mental Health, Protection & Advocacy, or Chemical Dependency Councils/Boards/Committees
- Local or State or National Non-Profit Groups
- City or County Mental Health Authorities
- Washington State Department of Behavioral Health (DBHR), Office of Consumer Partnerships
- Peer-Operated or Peer-Run Organizations in your area
- Hospitals / Medical Centers
- Charitable Foundations
- Consumer Groups
- Civic Organizations (e.g., Lions, Rotary, Kiwanis, Elks, VFW, etc.)

### Some Tips on How to Ask for Funding:

- Don't wait to ask for financial help. Many other people need help, too. So, act early.
- Keep trying. Don't be discouraged. Be persistent. Don't give up. You may have to ask many organizations to get the help you need.
- Ask friends or family for cash for this conference (instead of gifts) on special occasions (your birthday, anniversary, etc.).
- Start a savings account, and put a little money in it each month.
- Do chores for others in exchange for a small fee or cash gift. Hold a bake sale, walk a friend's dog every day, give friends' dogs a bath or brushing, wash cars, clean houses, help someone with gardening, weeding, or trimming bushes and trees, babysit, etc.
- Ask yourself how important it is to go to the conference. Not buying something (a new cell phone or clothes) can help you save money that you can spend getting to this conference.
- If you're employed, speak with your employer about giving you training funds.
- Remember that it's ok to ask your friends or colleagues to help you with fundraising.
- Discuss, with your friends and colleagues what your goals or purposes are for attending the conference. Your goals might be related to your own recovery, to your work, or to helping others.
- When speaking with a potential funding source, remember to emphasize what you are going to get from attending this event:

- Knowledge and skills that will help you better support others.
  - Knowledge about innovative and effective programs that you can bring back to your own workplace.
  - A “network” of new (and old) colleagues that will serve as personal and professional resources.
  - New knowledge about the most recent research.
- If you decide to ask an organization for help, offer to speak to them *after* the conference about what you learned, and how that will benefit the community and others. It’s also a wonderful opportunity for them to learn a bit about the benefits of peer support.
  - If the person you meet with at an organization cannot give you help, ask them if they know someone else at another organization who might be able to help you.
  - Remember that you didn’t get this far in your recovery by accepting failure. You got where you are through perseverance, creativity and a positive attitude!

**Here's a Sample Email/Letter that you can use:**

[Date]

Dear [Name of person you're writing to],

I am a [your county's name] County resident with a mental illness. I am involved in our community in the following ways:

[Something you do to help others];

[Something else you do to help others]; and

[Something else you do to help others].

I want to attend the [Name] Conference in [City], [State], from [Date] to [Date] to learn more, to share ideas with others, and to better prepare myself to help other people with mental illnesses in our community. But, in order to attend, I need financial help.

The Registration Fee for the conference is \$\_\_\_\_ .

My travel costs will be \$\_\_\_\_ .

My hotel room will cost \$\_\_\_\_ .

My meals will cost \$\_\_\_\_ .

I would appreciate any assistance with these expenses that you can provide.

Sincerely,

[Leave space here for your handwritten signature]

[Your full name]

[Your mailing address]

[Your telephone number]

[Your email address]

**NSMHA Conference Evaluation Form**

Your Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Name of Event \_\_\_\_\_

Date(s) of Event \_\_\_\_\_

Location of Event \_\_\_\_\_

**How satisfied were you, overall, with the program/event/workshop/conference?**

(Circle a number, where 1 = Completely Satisfied, and 5 = Completely Disappointed.)

Completely Satisfied   1   2   3   4   5   Completely Disappointed

**Please tell us (in no more than a few sentences) WHY you felt that way:**

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**Based on your experience at the Event, do you believe that it met its stated objectives?**

Yes / No

**Please tell us (in no more than a few sentences) WHY you felt that way:**

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**When you applied for an Advisory Board Scholarship, you stated some reasons why you wanted to attend the Event. Did the Event meet your expectations?**

Yes / No

**Please list between 1-3 component(s)/events(s)/session(s)/workshop(s) you found most useful, and tell us why you found them useful?**

Name of Session \_\_\_\_\_

Why was it useful? \_\_\_\_\_

Name of Session \_\_\_\_\_

Why was it useful? \_\_\_\_\_

Name of Session \_\_\_\_\_

Why was it useful? \_\_\_\_\_

**To what extent did the program provide you with new knowledge and/or skills?**

(Circle a number, where 1 = More than You Expected, and 5 = Less than You Expected)

More than Expected    1   2   3   4   5    Less than Expected

**Please tell us (in no more than a few sentences), what knowledge or skills you acquired:**

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**Please rate whether you believe that the program/event/workshop/conference was worth the expense.**

(Circle one number, where 1 = Well Worth the Cost, and 5 = Not Worth the Cost At All.)

Well Worth the Cost    1   2   3   4   5    Not Worth the Cost



**North Sound Mental Health Administration  
Advisory Board**

**[NAME OF CONFERENCE] Scholarship Application**

The Advisory Board of the North Sound Mental Health Administration (NSMHA) is pleased to offer scholarships to residents of Island, San Juan, Skagit, Snohomish, or Whatcom counties who have lived experience with a mental illness, or with mental illness and chemical dependency (co-occurring disorders), and to parents/guardians of children who have lived experience with a mental illness, so that those residents may attend behavioral health conferences and training events in Washington State. We do this to promote recovery, and to provide opportunities to learn about mental illness and chemical dependency.

Scholarships will be awarded on a first-come, first-served basis, based on the following:

- 1) Completing the application, below;
- 2) Your responses to four questions, below;
- 3) A recommendation from someone of standing in the community; and
- 4) Your signed agreement to fulfill all requirements as noted on the application (see "Agreement," below).

If you are awarded a scholarship, the NSMHA Advisory Board will pay for the following expenses:

- 1) Conference Registration Fee, which pays for the following:
  - a) All sessions, meetings and workshops included in the event;
  - b) Up to 3 meals per day (excluding those provided at the conference or training event);
- 2) Hotel Room (double-occupancy), if an overnight stay is required;
- 3) Transportation to and from the conference or training event using the least expensive option; and
- 4) Incidental expenses *as allowed by NSMHA's Fiscal Policy*, determined on a case-by-case basis. (We recommend that you budget for incidentals since NSMHA may not be able to pay for them.)

**Please mail all materials to the address below, BEFORE [DATE]:**

**NORTH SOUND MENTAL HEALTH ADMINISTRATION  
ADVISORY BOARD CONFERENCE SCHOLARSHIP APPLICATION  
117 N. 1<sup>st</sup> St.  
Suite 8  
Mount Vernon, WA 98273**

## Conference Scholarship Application

Please print your answers below as you want the information to be seen by others. *Please do not use abbreviations or acronyms.*

<b>Conference Name:</b>		<b>Location:</b>	
<b>Dates:</b>			
<b>Are you a resident of Washington State? Yes / No    Your County? _____</b>			
<b>What organization do you work for?</b>			
<b>Your Name:</b>			
<b>Your Mailing Address (in the blanks below):</b>			
Street		Apt./Suite/Unit	
City	State	Postal Code	
Home Phone (    )		Cell Phone (    )	
Email:			
<b>Name of Emergency Contact Person:</b>			
Street		Apt./Suite/Unit	
City	State	Postal Code	
Home Phone (    )		Cell Phone (    )	
Email:			



## Conference Scholarship Application Questions

*On a separate piece of paper*, please answer the following questions. Your answers are very important because the review committee will use them to decide whether to award you a scholarship.

- (1) Why do you want to attend this conference?
- (2) How will you communicate to other people, or to organizations with which you are affiliated, what you learn at this conference?
- (3) What are the specific issues, related to your lived experience with a mental illness, or with both a mental illness and a chemical dependency (co-occurring disorders), in which you are most interested? *Why?*

If you are a parent/guardian of a child who has lived experience with a mental illness, or with both a mental illness and a chemical dependency (co-occurring disorders), what are the specific issues with which you are most interested? *Why?*

## Conference Scholarship Application Requirements

- You must complete the application above;
- You must provide at least one (1) written recommendation (from someone who can write about why she or he thinks you should attend this conference);
- You must answer the questions above, in writing, on a separate piece of paper; and
- You must submit all of the requested information by [DATE].
- To be eligible for this scholarship you must:
  - Be someone with lived experience with a mental illness, or with mental illness and a chemical dependency (co-occurring disorders), or the parents/guardians of children with lived experience with a mental illness, , or with mental illness and a chemical dependency (co-occurring disorders), who resides in Island, San Juan, Skagit, Snohomish, or Whatcom counties in Washington State;
  - Agree to present to the North Sound Mental Health Administration Advisory Board (orally, or in writing, or both) an evaluation about how you benefitted from attending the conference; and
  - Complete a simple, written evaluation form.

If you agree to these requirements, and wish to be considered for a scholarship, please sign below.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**North Sound Mental Health  
Crisis Services Redesign  
Implementation Plan**

**Summary:**

In October, 2012, NSMHA undertook a comprehensive review of the mental health crisis services system with the goals of:

- Creating a better coordinated system;
- Increasing responsiveness to the other community institutions that respond to persons in crisis; and,
- Preparing for the anticipated increase in requests for mental health crisis assessments.

After extensive stakeholder input from county oversight committees, mental health professionals, hospitals, law enforcement, consumers, Advisory Board members and others, NSMHA and the North Sound County Mental Health Coordinators developed and prioritized a set of recommendations to strengthen the responsiveness of the mental health crisis services system.

Some of these recommendations will require changes or additions to existing policies and protocols, some will require amendments to the existing contracts with the Community Mental Health Agencies providing mental health crisis services, and some will require a re-procurement process using an RFP or RFQ. The proposed implementation actions and decisions needed are listed below.

<b>Recommendation</b>	<b>Implementation</b>	<b>Decisions Needed</b>
<b>1. Increase the capacity and utilization of Triage Centers.</b>	1.1 Appropriate new state funding to support on-site nursing services.	Board has approved allocation of the new funding
	1.2 Establish protocol for on-site medical screening	Will be incorporated into contract terms
	1.3 Create access to emergency medications	Program design enhancement
	1.4 Create an on-going regional work group with the Triage Centers and individual Triage Oversight Committees for Skagit and Whatcom	Will be incorporated into contract terms
	1.5 Develop streamlined processes for law enforcement drop-offs	Will be incorporated into contract terms
	1.6 Improve the facility design at the Whatcom County Triage	Whatcom County will fund the facility enhancements

Recommendation	Implementation	Decisions Needed
<b>2. Integrate Voluntary Emergency Services and Mobile Outreach Teams into a single program model.</b>	2.1 Design an integrated Voluntary Emergency Services and Mental Health Outreach program model and issue an RFP/RFQ to select the provider for the integrated model.	Board will need to approve moving forward with a new model and RFP/RFQ
	2.2 Identify options for funding increased outreach services, including expanded hours for the new teams.	New budget will need to be approved, including: <ul style="list-style-type: none"> <li>• Revised cost allocation formula to reflect increased crisis services to Medicaid persons;</li> <li>• Re-prioritization of State-only funds</li> <li>• Possible leveraging of local county dollars</li> </ul>
	2.3 Develop a jointly funded pilot with Skagit County to test the use of integrated mental health/CD crisis services	Board approval will be needed for Contract/MOU with Skagit County
<b>3. Improve Coordination and Community Outreach</b>	3.1 Develop revised protocols to provide MHP consultation to Emergency Departments to support hospital discharge planning. Include protocols to redirect medically cleared persons in crisis to the Triage Centers.	<ul style="list-style-type: none"> <li>• Revised protocol under development</li> <li>• Will be incorporated into budget and contract requirements for the new Voluntary Emergency Services and Outreach Program</li> </ul>
	3.2 Upload the mental health crisis plans into the “Emergency Department Information Exchange” system [EDIE] for use by ED staff. 3.3 Include more specific details in the crisis plans so that they provide more useful information to ED staff	Develop the NSMHA policy and protocols for updating Crisis Plans to EDIE.  New policy will be developed to require more detail in crisis plans.
	3.4 Develop clear protocols for law enforcement on how to use and access the mental health system.	New protocols will be developed and field tested with one or more law enforcement agencies.

Recommendation	Implementation	Decisions Needed
	3.5 Participate in Law Enforcement training days on an ongoing basis to provide updated information on how to use and access the mental health crisis system	<ul style="list-style-type: none"> <li>• Will be included in the contract requirement for mental health crisis service providers.</li> <li>• County human service departments will also support using the enhanced Medicaid administration funds.</li> </ul>
	3.6 Reinforce the requirement for PACT teams to consistently provide after-hours crisis response to PACT enrollees.	Contract requirements will be clarified and additional training provided if necessary.
	3.7 Develop a specialized Children’s Crisis Response Team	Working with Snohomish County to jointly fund a pilot program based on the King County program model
<b>4. Enhance Crisis Services in Rural Areas</b>	4.1 Fund an additional bed in the Skagit County Triage Center to be made available on a priority basis to Island County	Funding and protocol for use will be included in the Skagit Triage Center contract amendment
	4.2 Provide RSN support to the Island County Mental Health Outreach Worker	Funding will be included in the enhanced Medicaid Administration contract with Island county to support linkages with Medicaid
	4.3 Work with San Juan county to create options for crisis stabilization on the islands	<ul style="list-style-type: none"> <li>• Work with San Juan county stakeholders on strategies.</li> <li>• Funding for voluntary transport of persons to medical facilities is included in the enhance Medicaid contract with San Juan County.</li> </ul>
	4.4 Use tele-health technology to improve access to psychiatric consultation.	<ul style="list-style-type: none"> <li>• NSMHA and Compass Health are participating in a pilot with Peace Health in Friday Harbor.</li> <li>• Sunrise Services is also testing the use of tele-behavioral health in east Skagit and Snohomish Counties</li> </ul>

**Crisis Services Redesign  
Implementation Timetable**

<b>Implementation Action</b>	<b>Timetable</b>
1. Amend contracts with Triage Centers to award funding for nursing services and incorporate new requirements for medical screening and coordination with law enforcement.	April 1, 2014
2. Clarify 24/7 response requirements in PACT contracts and provide additional training and technical assistance as necessary.	July 1, 2014
3. Integrate and re-bid Voluntary Emergency Services and Mobile Outreach Teams	September 1, 2014 – release RFP or RFQ December, 2014 – Approval of contract awards by Board January 1, 2015 – implement new contracts
4. Develop and field test new protocols and policies for: <ul style="list-style-type: none"> <li>• Hospital ED and MHP consultation</li> <li>• Law Enforcement</li> <li>• Crisis Service Plan formats and uploading to EDIE</li> </ul>	May – September, 2014 – Draft and review with stakeholders October 1, 2014 – issue new policies and/or field test new protocols
5. Develop pilot programs to test models for specialized crisis services: <ul style="list-style-type: none"> <li>• Skagit County pilot for integrated Mental Health/CD Crisis Response</li> <li>• Snohomish County Children’s Crisis Response Team</li> <li>• San Juan County Crisis Stabilization options</li> </ul>	September 1, 2014 – January, 2015 – develop RFPs or RFQs October, 2014 – February, 2015 – release RFPs or RFQs November, 2014-March, 2015– Board approval of contracts January 1 – April 1, 2015 – implement new contracts

# North Sound Mental Health Administration Monthly Utilization Management Dashboard

## NSMHA Region

	1	2	3	4	5	6	7	8	9	10	11	12	13	13	14	15
Month	Number of Medicaid Eligibles	Number of Medicaid clients with an open outpatient primary episode	Number of non-Medicaid clients with an open outpatient primary episode	Average Hours of Service for clients with an open outpatient episode	Average Hours of Service for clients receiving a service during the month	Number of Hospitalizations	Number of Individuals with more that 1 hospitalization in the past 30 days	Number of 72-hour Involuntary Detentions	Average Daily Census at WSH	Average Daily Census at North Sound E&T	Average Percent Utilization at North Sound E&T	Average Daily Census at Snohomish E&T	Average Percent Utilization at Snohomish E&T	Total Calls to VOAWW	Total Calls to VOA Crisis Line	Total Calls to VOA Triage Line
Jan-13	147,042	9,252	1,867	2.70	2.56	168	20	98	98			15	94.0%	4,455	3,034	1,421
Feb-13	147,431	9,337	1,856	2.52	2.38	152	11	108	99			13	82.7%	4,825	3,154	1,671
Mar-13	147,118	9,555	1,888	2.67	2.52	151	12	121	100			14	89.5%	4,163	2,739	1,424
Apr-13	146,766	9,707	2,041	2.73	2.59	194	16	125	99			16	97.3%	5,089	3,442	1,647
May-13	147,114	9,962	2,018	2.77	2.63	209	22	130	98			15	94.5%	5,576	3,365	2,211
Jun-13	146,903	10,023	2,087	2.57	2.47	187	26	123	97			15	95.1%	5,593	3,621	1,972
Jul-13	147,717	10,100	2,109	2.79	2.63	189	25	127	101			15	95.8%	5,632	3,563	2,069
Aug-13	147,581	10,118	2,177	2.77	2.60	179	25	116	102			15	94.8%	5,378	3,412	1,966
Sep-13	146,260	10,101	2,306	2.49	2.35	165	27	123	100			15	94.4%	5,738	3,760	1,978
Oct-13	146,756	10,298	2,399	2.77	2.60	187	16	122	100			15	95.8%	5,396	3,549	1,847
Nov-13	148,773	10,511	2,363	2.40	2.26	157	13	123	99			16	98.7%	5,401	3,539	1,862
Dec-13	147,340	10,499	2,509	2.32	2.22	144	13	105	101			15	91.9%	4,998	3,227	1,771
Jan-14	172,117	11,069	2,293	2.60	2.44	171	15	129	98			16	99.0%	5,842	3,482	2,360
Feb-14	185,250	11,529	2,238	2.46	2.33	154	10	111	101			15	95.8%	5,031	3,091	1,940
Average	151,726	10,147	2,154	2.61	2.47	172	18	119	100			15	94.2%	5,223	3,356	1,867

WCPC data up to date

Stabilization services not included in hours of service computations

**Number of Medicaid Eligibles:** DSHS-MHD Title XIX Totals from MAA.

**Calls to VOA:** data comes from monthly call report. Mar'12 data is imputed from the prior and post 2 months

**Average Daily Census at WSH:** Daily Census data compiled from WSH Report from Cache system.

**Number of Medicaid Eligibles:** There is a three month lag in final numbers from the state.

**E&T Census and Utilization data:** Daily Census data compiled from Daily E&T Census reporting.

All other data derived from NSMHA-CIS from provider data submitted to NSMHA.

**Number of Hospitalizations:** With the new CIS, There is a change from the past in how the hospitalization data is reported to NSMHA. This data is only reported at the completion of the hospitalization. Therefore, recent months data is not an accurate reflection of hospitalization activity.

Overall, There is a settling of the data coming from the providers. Recent months data appears low and is therefore not being reported as complete data has not yet been uploaded to NSMHA CIS.

NS E&T closed as of October 2011.

**North Sound Mental Health Administration**  
**Monthly Utilization Management Dashboard**  
**Island County**

	1	2	3	4	5	6	7	8
Month	Number of Medicaid Eligibles	Number of Medicaid clients with an open outpatient primary episode	Number of non-Medicaid clients with an open outpatient primary episode	Average Hours of Service for clients with an open outpatient episode	Average Hours of Service for clients receiving a service during the month	Number of Hospitalizations	Number of Individuals with more than 1 hospitalization in the past 30 days	Number of 72-hour Involuntary Detentions
Jan-13	7,162	293	48	2.75	2.74	18	0	13
Feb-13	7,213	306	44	2.33	2.35	9	1	5
Mar-13	7,236	312	44	2.73	2.65	12	2	8
Apr-13	7,177	311	59	2.61	2.56	10	0	10
May-13	7,178	325	53	2.72	2.70	14	4	8
Jun-13	7,183	331	62	2.70	2.69	13	3	7
Jul-13	7,156	344	58	2.77	2.79	12	1	7
Aug-13	7,107	352	65	2.97	2.95	15	3	10
Sep-13	7,080	357	72	2.94	2.93	15	2	13
Oct-13	7,147	381	75	2.99	3.00	13	1	8
Nov-13	7,216	393	78	2.73	2.73	5	0	5
Dec-13	7,168	400	78	2.59	2.61	5	0	5
Jan-14	8,700	427	69	3.20	3.13	13	0	16
Feb-14	9,489	485	65	2.91	2.93	11	0	11
Average	7,444	358	62	2.78	2.77	12	1	9

**North Sound Mental Health Administration**  
**Monthly Utilization Management Dashboard**  
**San Juan County**

	1	2	3	4	5	6	7	8
Month	Number of Medicaid Eligibles	Number of Medicaid clients with an open outpatient primary episode	Number of non-Medicaid clients with an open outpatient primary episode	Average Hours of Service for clients with an open outpatient episode	Average Hours of Service for clients receiving a service during the month	Number of Hospitalizations	Number of Individuals with more than 1 hospitalization in the past 30 days	Number of 72-hour Involuntary Detentions
Jan-13	1,329	82	26	2.57	2.25	3	1	3
Feb-13	1,342	86	22	1.86	1.95	0	0	0
Mar-13	1,357	79	25	3.74	3.48	4	0	6
Apr-13	1,346	75	28	2.70	2.18	6	0	6
May-13	1,366	83	24	2.72	2.68	1	0	1
Jun-13	1,348	83	25	2.28	2.13	1	0	2
Jul-13	1,404	88	24	2.44	2.47	3	2	1
Aug-13	1,389	89	27	2.15	2.04	1	0	1
Sep-13	1,362	83	30	1.95	1.94	1	0	0
Oct-13	1,343	83	30	2.48	2.39	1	0	1
Nov-13	1,363	85	30	2.14	1.67	4	0	2
Dec-13	1,419	85	34	2.02	1.79	1	1	0
Jan-14	2,045	90	28	2.74	2.52	1	0	1
Feb-14	2,339	98	24	2.33	2.06	2	0	2
Average	1,482	85	27	2.44	2.25	2	0	2



**North Sound Mental Health Administration  
Monthly Utilization Management Dashboard  
Skagit County**

	1	2	3	4	5	6	7	8
Month	Number of Medicaid Eligibles	Number of Medicaid clients with an open outpatient primary episode	Number of non-Medicaid clients with an open outpatient primary episode	Average Hours of Service for clients with an open outpatient episode	Average Hours of Service for clients receiving a service during the month	Number of Hospitalizations	Number of Individuals with more than 1 hospitalization in the past 30 days	Number of 72-hour Involuntary Detentions
Jan-13	20,848	1,082	218	2.83	2.80	13	1	11
Feb-13	20,828	1,083	225	2.62	2.65	26	3	25
Mar-13	20,916	1,152	221	2.70	2.74	19	1	21
Apr-13	20,873	1,163	257	2.76	2.85	27	4	19
May-13	20,900	1,200	241	2.91	3.03	32	4	22
Jun-13	20,875	1,230	239	2.69	2.72	30	6	25
Jul-13	21,139	1,247	247	2.99	3.03	32	6	20
Aug-13	21,254	1,242	248	2.90	2.97	23	6	17
Sep-13	21,053	1,238	273	2.78	2.84	23	6	24
Oct-13	21,345	1,294	277	2.93	3.01	25	2	17
Nov-13	21,346	1,318	273	2.49	2.54	18	2	17
Dec-13	20,983	1,296	276	2.44	2.59	17	1	22
Jan-14	23,881	1,372	245	2.61	2.81	17	2	7
Feb-14	25,564	1,441	234	2.80	2.91	15	2	14
Average	21,558	1,240	248	2.75	2.82	23	3	19

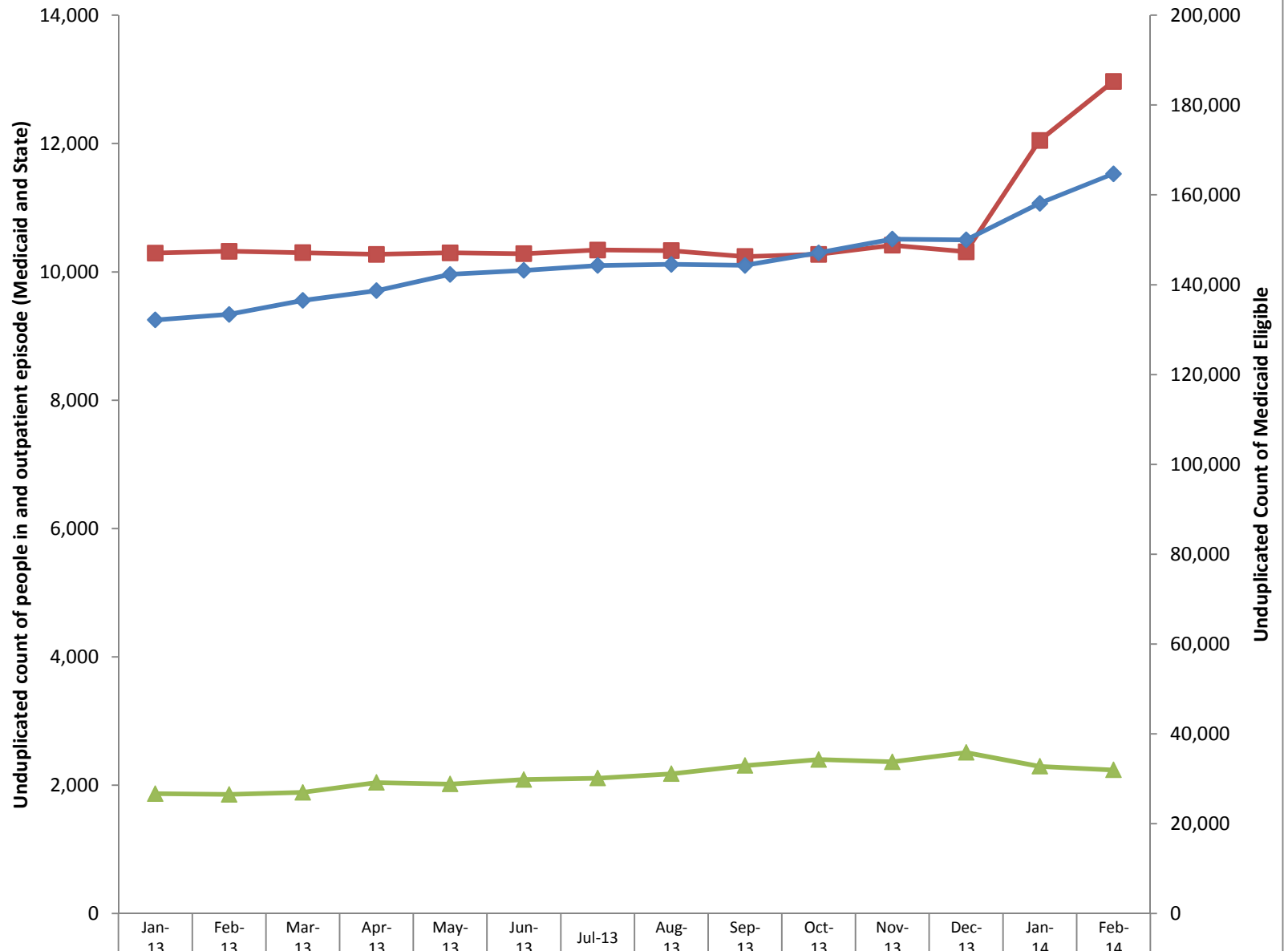
**North Sound Mental Health Administration  
Monthly Utilization Management Dashboard  
Snohomish County**

	1	2	3	4	5	6	7	8
Month	Number of Medicaid Eligibles	Number of Medicaid clients with an open outpatient primary episode	Number of non-Medicaid clients with an open outpatient primary episode	Average Hours of Service for clients with an open outpatient episode	Average Hours of Service for clients receiving a service during the month	Number of Hospitalizations	Number of Individuals with more than 1 hospitalization in the past 30 days	Number of 72-hour Involuntary Detentions
Jan-13	85,346	5,041	956	2.48	2.21	85	14	39
Feb-13	85,544	5,150	965	2.35	2.07	78	6	48
Mar-13	85,197	5,250	991	2.51	2.22	75	6	50
Apr-13	85,012	5,314	1,052	2.61	2.31	95	8	55
May-13	85,139	5,473	1,073	2.60	2.29	93	9	55
Jun-13	85,110	5,552	1,109	2.45	2.20	87	11	53
Jul-13	85,429	5,566	1,109	2.59	2.25	92	10	55
Aug-13	85,306	5,565	1,155	2.59	2.25	84	13	51
Sep-13	84,569	5,590	1,221	2.25	1.96	79	10	50
Oct-13	84,680	5,656	1,275	2.54	2.20	88	8	56
Nov-13	86,007	5,789	1,265	2.12	1.88	75	5	71
Dec-13	85,216	5,805	1,361	2.04	1.84	72	9	44
Jan-14	98,220	6,024	1,218	2.28	1.98	62	4	47
Feb-14	105,289	6,235	1,204	2.24	1.99	65	2	41
Average	87,576	5,572	1,140	2.40	2.12	81	8	51

**North Sound Mental Health Administration  
Monthly Utilization Management Dashboard  
Whatcom County**

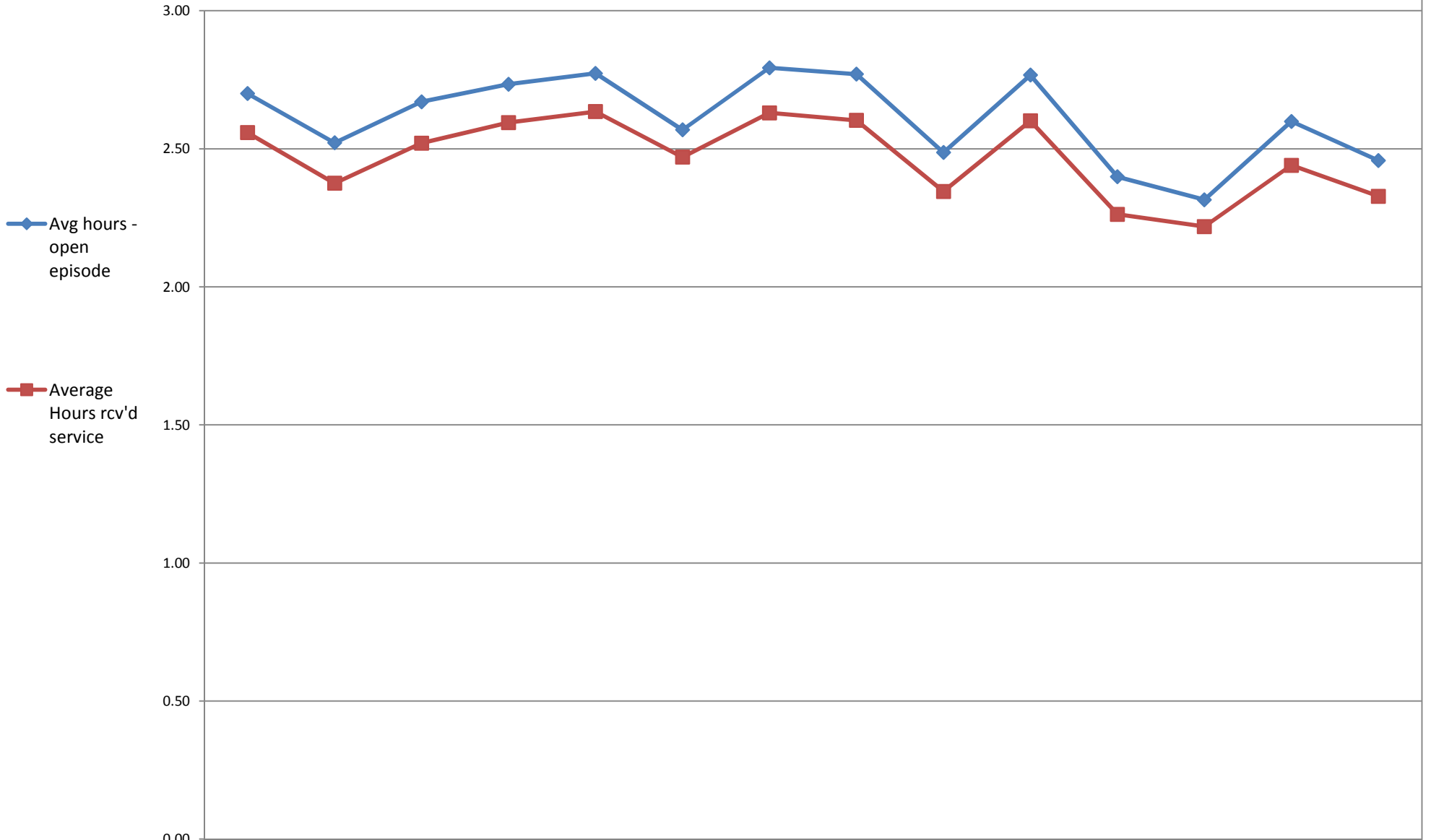
	1	2	3	4	5	6	7	8
Month	Number of Medicaid Eligibles	Number of Medicaid clients with an open outpatient primary episode	Number of non-Medicaid clients with an open outpatient primary episode	Average Hours of Service for clients with an open outpatient episode	Average Hours of Service for clients receiving a service during the month	Number of Hospitalizations	Number of Individuals with more than 1 hospitalization in the past 30 days	Number of 72-hour Involuntary Detentions
Jan-13	28,088	2,224	459	2.92	2.93	35	4	23
Feb-13	28,211	2,214	443	2.71	2.72	28	1	22
Mar-13	28,155	2,244	455	2.72	2.73	30	2	26
Apr-13	28,137	2,270	467	2.76	2.77	34	2	25
May-13	28,250	2,319	453	2.81	2.79	42	4	27
Jun-13	28,095	2,291	476	2.48	2.50	43	6	21
Jul-13	28,258	2,298	486	2.86	2.83	35	6	24
Aug-13	28,150	2,308	499	2.80	2.77	43	3	27
Sep-13	27,858	2,284	522	2.57	2.57	34	9	23
Oct-13	27,905	2,297	534	2.80	2.79	41	4	26
Nov-13	28,374	2,330	540	2.64	2.62	32	3	17
Dec-13	28,167	2,328	557	2.41	2.39	28	2	23
Jan-14	34,187	2,435	502	2.59	2.59	47	7	31
Feb-14	37,084	2,530	492	2.56	2.54	42	6	27
Average	29,209	2,312	492	2.69	2.68	37	4	24

### Medicaid Eligible and Outpatient Episodes



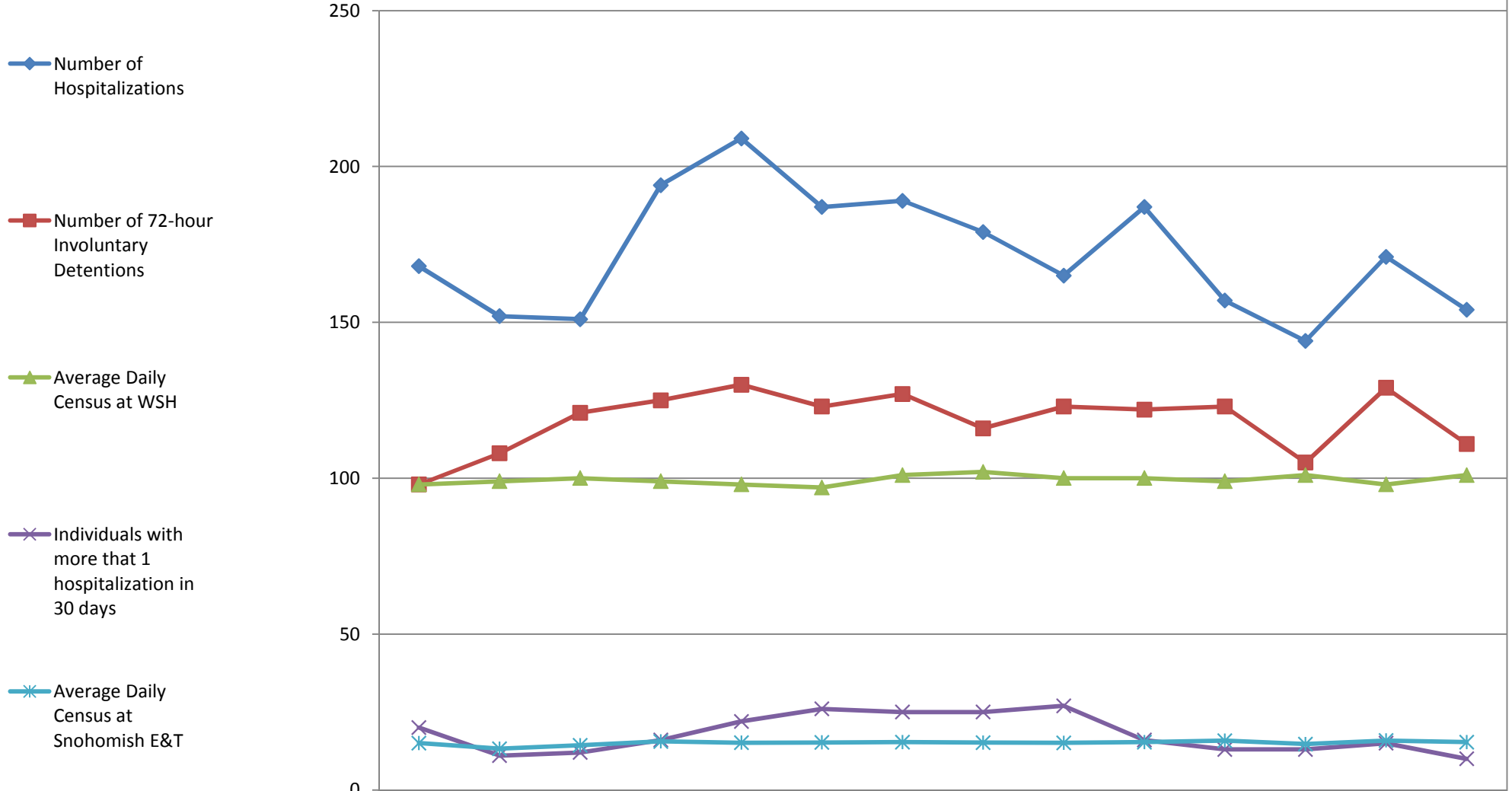
	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14
Medicaid Eligible	147,042	147,431	147,118	146,766	147,114	146,903	147,717	147,581	146,260	146,756	148,773	147,340	172,117	185,250
Medicaid open outpatient episode	9,252	9,337	9,555	9,707	9,962	10,023	10,100	10,118	10,101	10,298	10,511	10,499	11,069	11,529
Number of non-Medicaid open outpatient episode	1,867	1,856	1,888	2,041	2,018	2,087	2,109	2,177	2,306	2,399	2,363	2,509	2,293	2,238

### Average hours of Outpatient Service



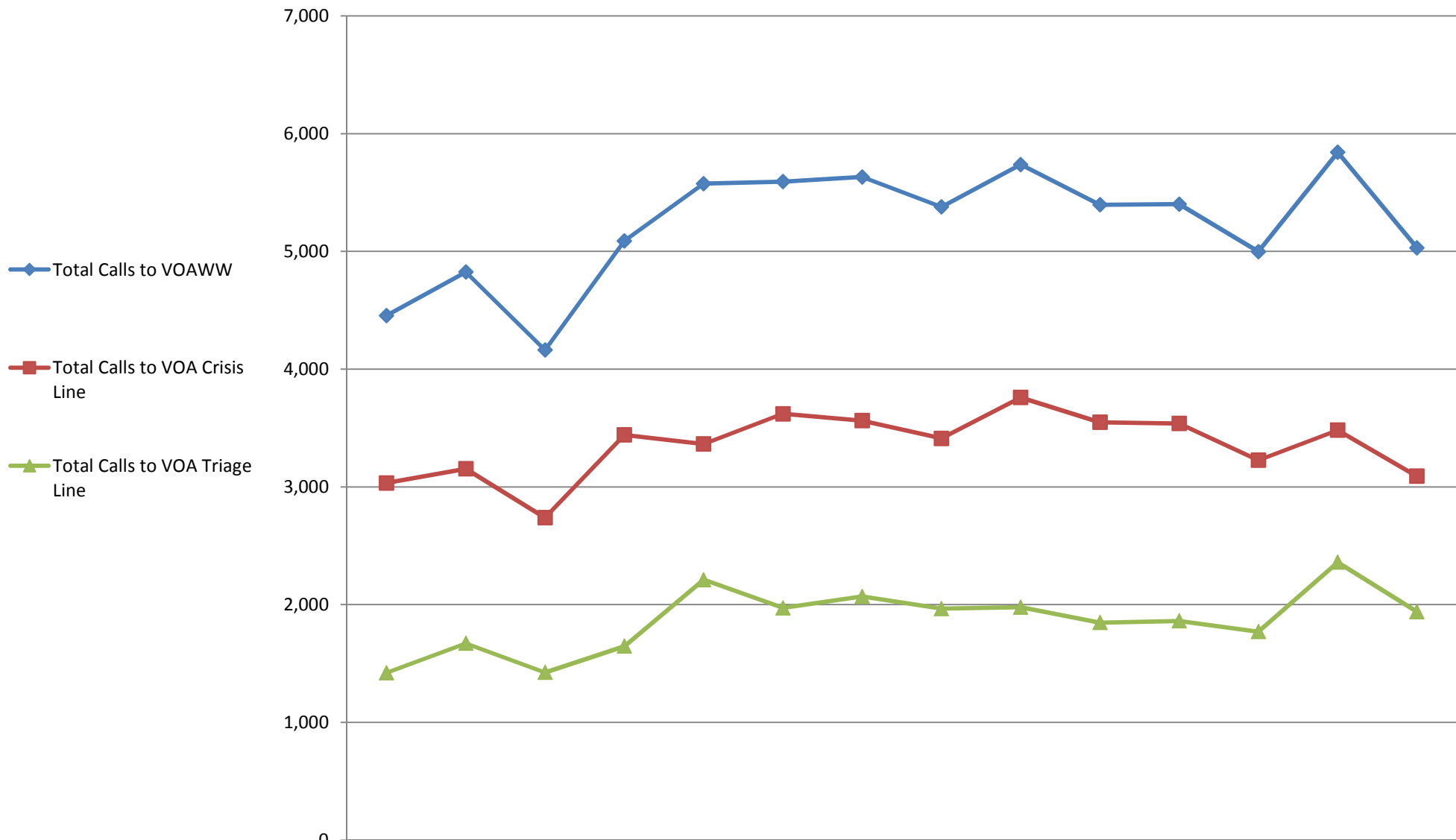
	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14
Avg hours - open episode	2.70	2.52	2.67	2.73	2.77	2.57	2.79	2.77	2.49	2.77	2.40	2.32	2.60	2.46
Average Hours rcv'd service	2.56	2.38	2.52	2.59	2.63	2.47	2.63	2.60	2.35	2.60	2.26	2.22	2.44	2.33

# Hospitalizations, Detentions and Readmissions

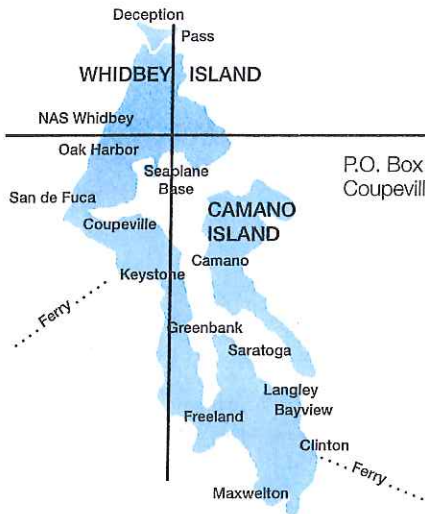


	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14
Number of Hospitalizations	168	152	151	194	209	187	189	179	165	187	157	144	171	154
Number of 72-hour Involuntary Detentions	98	108	121	125	130	123	127	116	123	122	123	105	129	111
Average Daily Census at WSH	98	99	100	99	98	97	101	102	100	100	99	101	98	101
Individuals with more than 1 hospitalization in 30 days	20	11	12	16	22	26	25	25	27	16	13	13	15	10
Average Daily Census at Snohomish E&T	15	13	14	16	15	15	15	15	15	15	16	15	16	15

## VOA Calls



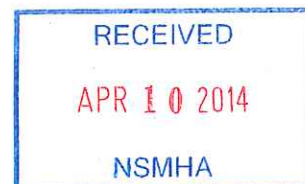
	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14
Total Calls to VOAWW	4,455	4,825	4,163	5,089	5,576	5,593	5,632	5,378	5,738	5,396	5,401	4,998	5,842	5,031
Total Calls to VOA Crisis Line	3,034	3,154	2,739	3,442	3,365	3,621	3,563	3,412	3,760	3,549	3,539	3,227	3,482	3,091
Total Calls to VOA Triage Line	1,421	1,671	1,424	1,647	2,211	1,972	2,069	1,966	1,978	1,847	1,862	1,771	2,360	1,940



## Island County Board of Commissioners

P.O. Box 5000  
Coupeville, Washington 98239-5000

Phone: (360) 679-7354  
From Camano: (360) 629-4522  
From S. Whidbey: (360) 321-5111  
Fax: (360) 679-7381  
[www.islandcounty.net](http://www.islandcounty.net)



April 7, 2014

North Sound Mental Health Administration Advisory Board  
Annette Calder, Executive Assistant  
117 N. 1st St., Ste. 8  
Mount Vernon, WA 98273

To the members of the North Sound Mental Health Administration Advisory Board,

As part of National Volunteer week, the Board of Island County Commissioners wants to thank you very much for serving on the North Sound Mental Health Administration Advisory Board. It is a privilege to have you serve Island County. You truly make a difference in the lives of the residents in our community. Please accept our heartfelt thank you for your time, energy, and service.

Best regards,  
Board of County Commissioners  
Island County, Washington

Jill Johnson, Chair

Kelly Emerson, Member

Helen Price Johnson, Member



BEFORE THE BOARD OF COUNTY COMMISSIONERS  
OF ISLAND COUNTY, WASHINGTON

PROCLAMATION

IN THE MATTER OF PROCLAIMING }  
THE WEEK OF APRIL 6-12, 2014 AS } RESOLUTION C-32-14  
NATIONAL VOLUNTEER WEEK }  
IN ISLAND COUNTY }

*WHEREAS*, volunteering one's time, talents and resources has been an integral part of our American heritage, and it is essential that this tradition of giving and sharing to preserve and improve the quality of life for all citizens in our communities continues; and

*WHEREAS*, by investing their time, energy and valuable skills, volunteers develop innovative approaches to address many of the concerns and needs of our community; and

*WHEREAS*, volunteers provide a spirit of helping that multiplies in value when each citizen reaches out to assist another and their time cannot be measured in terms of dollars; and

*WHEREAS*, each day volunteers throughout Island County work tirelessly to make a difference in the lives of our children, adults, and elderly; by volunteering at senior centers and shelters for those in need; mentoring our youth; helping to make our neighborhoods safer places to live; watching over our beaches, forests and natural resources; providing stewardship of our local history and by assisting at parks, local festivals and fairs; and

*WHEREAS*, many citizens donate their time and talent by serving on local government Boards, Commissions and Committees; and

*WHEREAS*, Island County appreciates its volunteers and encourages citizens to become involved in their neighborhoods, communities and local government; *NOW, THEREFORE*,

*BE IT HEREBY PROCLAIMED THAT* we the Island County Board of Commissioners do hereby proclaim the week of April 6-12, 2014, as **NATIONAL VOLUNTEER WEEK** in Island County and we urge all residents to recognize, support and commend these special volunteers.

APPROVED this 24<sup>th</sup> day of March, 2014.



BOARD OF COUNTY COMMISSIONERS  
ISLAND COUNTY, WASHINGTON

Jill Johnson, Chair

Kelly Emerson, Member

Helen Price Johnson, Member

ATTEST:

  
Debbie Thompson, Clerk of the Board