



## **North Sound Behavioral Health Advisory Board Agenda**

November 2, 2021  
1:00 p.m. – 3:00 p.m.

### **Call to Order and Introductions**

### **Revisions to the Agenda**

### **Approval of September Minutes**

### **Announcements**

- Advisory Board Resignation

### **Brief Comments or Questions from the Public**

### **Executive/Finance Committee Report**

### **Executive Director's Report**

- Diversity Racial Equity and Inclusion Consultants

### **Executive Director's Action Items**

- September Follow Up Questions – Michael McAuley

### **Old Business**

- Announcement of 2022 Chair and Vice Chair Nominees
- 2022 Pre-Meeting Training Topics
- 2021 COVID Months' Retrospective (Face to Face)

### **New Business**

- 2022 Advisory Board Proposed Operating Budget
- 2022 North Sound BH-ASO Proposed Operating Budget
- 2022 Legislative Priorities

### **Report from Advisory Board Members**

### **Reminder of Next Meeting**

### **Adjourn**



**North Sound Behavioral Health Advisory Board**

**October 5, 2021**

**1:00 – 3:00**

**Meeting Minutes**

**Empowering individuals and families to improve their health and well-being**

### **Members Present on Phone Zoom Meeting Platform:**

- Island County: Candy Trautman, Chris Garden
- San Juan: Diana Porter
- Skagit County: Duncan West, Jere LaFollete
- Snohomish County: Marie Jubie, Pat O'Maley-Lanphear, Fred Plappert, Michelle Meaker, Jack Eckrem
- Whatcom County: Arlene Feld, Kara Mitchell, Mark McDonald

### **Members Excused:**

- Island County:
- San Juan County:
- Skagit County: Ron Coakley
- Snohomish County: Joan Bethel, Jennifer Yuen
- Whatcom County: Alan Friedlob

### **Members Absent:**

- Island County:
- San Juan County:
- Skagit County:
- Snohomish County:
- Whatcom County:

**North Sound BH-ASO Staff:** Margaret Rojas, James Dixon, Maria Arreola (Recording).

### **Managed Care Organization Representation:**

- United Healthcare: Stacey Lopez
- Coordinated Care:
- Molina Healthcare: Kelly Anderson
- Community Health Plan of Washington [CHPW]:

### **Guests:**

## **Pre-Meeting Training**

Non pre-meeting month

## **Call to order and Introductions**

The meeting was called to order by Chair West at 1:02 p.m.

## **Revisions to the Agenda**

No revisions mentioned

## **Approval of August Minutes**

Motion made for the approval of September meeting minutes with written with the correction of conference statements. Motion seconded; Motion carried.

## **Announcements**

Patti Bannister from Skagit County has resigned from the Board. Patti left a message to all that love is what is going to help heal those with Substance Abuse Illness and care is what is going to give them hope that we are not giving up on them.

Candace Weingart Skagit Community Action, Resource Center Manager spoke of her interest in serving on the Board. Candace comes with a background in managing a day treatment center and is a License Mental Health Counselor. Candace has a passion for the system to help provide services for all people a risk to move them toward better outcomes.

Skagit county has one vacancy.

## **Brief Comments from the Public**

None

## **Executive Directors Report**

Joe reported on

- October Supplemental Budget Allocations
- Update on Workforce Development Activities
- COVID Federal Block Grant
- Crisis Services
- Continuing Impact of HB 1310 on Law Enforcement Assistance with Behavioral Health Crisis Services
- Recovery Navigator Program
- Community Behavioral Residential Assistance Program
- Annual HCA TeaMonitor Review
- New North Sound Evaluation and Treatment Center

### **Substance Use Disorder Regional Navigator Program: James Dixon**

James provided a brief update of the program. The plan has been submitted to the state. Once the plan is approved the funds can begin to move steps forward to get the program operational.

### **Executive Director's Action Items**

No action items to come before the Board.

### **Executive/Finance Committee Report**

The September Expenditures were reviewed and discussed. Motion to move the Expenditures to the Board of Directors for approval. Motion seconded. All in Favor. Motion Carried.

### **Old Business**

#### **Ad Hoc Committee Update**

A letter of interest will be set to Volunteers of America. The response will determine the dollar amount to help support there staff at there new facility.

The NAMI Whatcom proposal will be tabled until more information can be collected.

Chair West will draft a letter of interest to VOA. Maria will coordinate with organization staff to move forward with the process.

### **New Business**

#### **2022 Chair and Vice Chair Nominations open**

Nominating Committee was formed which is Candy, Michelle and Marie. Candy will Char this committee. Maria will coordinate with Candy regarding the virtual process.

Members were asked to send there nominations to Maria and Candy. Candy will verify nominees commitment.

#### **2021 Annual Advisory Board Winter Discussion**

Determination of in person or virtual discussion will take place this year. Further discussion will take place during the October meeting.

#### **Formation of Ad Hoc Committee – Peer Recruitment**

Ad Hoc Committee was formed of Fred, Arlene, Candy, Candace and Marie. Committee will discuss ways to help recruitment and retain current Peers.

### **Report from Advisory Board Members**

Approved by Advisory Board

**Reminder of Next Meeting**






Tuesday, November 2, 2021

**Adjourn**






Chair West adjourned the meeting at 2:50 p.m.

APPROVED

**North Sound Behavioral Health Administrative Services Organization**  
**Advisory Board Budget**  
**October 2021**

		All Conferences	Board Development	Advisory Board Expenses	Stakeholder Transportation	Legislative Session
	Total	Project # 1	Project # 2	Project # 3	Project # 4	Project # 5
Budget	<b>\$ 20,000.00</b>	\$ 9,900.00	\$ 1,000.00	\$ 9,000.00		\$ 100.00
Expense	0.00					
Under / (Over)						
Budget	\$ 20,000.00	\$ 9,900.00	\$ 1,000.00	\$ 9,000.00	\$ -	\$ 100.00
						
		All expenses to attend Conferences	Advisory Board Retreat/Summit	Costs for Board Members (meals mileage, misc.)	Non- Advisory Board Members, to attend meetings and special events	Shuttle, meals, hotel, travel

**North Sound Behavioral Health Administrative Services Organization  
Advisory Board Budget  
2022**

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	Total	Project # 1	Project # 2	Project # 3	Project # 4	Project # 5
Budget	<b>\$ 20,000.00</b>	\$ 9,900.00	\$ 1,000.00	\$ 9,000.00		\$ 100.00
Expense	0.00					
Under / (Over) Budget	\$ 20,000.00	\$ 9,900.00	\$ 1,000.00	\$ 9,000.00	\$ -	\$ 100.00
						
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# 2022 North Sound BH-ASO Proposed Operating Budget Overview

Presented by:  
Joe Valentine, Executive Director

# Agenda

- Budget Highlights
- New and Expanded Funding
- Challenges & Strategies
- 2022 Strategic Goals - Proposed
- Summary of 2021 Versus 2022 Revenues and Expenditures
- Revenue Forecast
- Expenditure Detail Overview
- Staffing – 2022 Organizational Chart

# Budget Highlights

- We continue to prioritize State General Fund and Federal Block Grant [FBG] dollars to support Crisis Services
- During 2021 we were also able to support services to non-Medicaid persons in Crisis and Withdrawal Management Facilities – the 2022 budget continues this support
- The Fiscal Closeout plan for the former BHO was accepted
- Two new sources of funding will allow us to continue to expand ASO funded behavioral health services in 2022: COVID FBG and new Legislative initiatives and provisos

# New and Expanded Funding

- Recovery Navigator Program
- Long Term Rental Assistance
- Added funding for Crisis Teams, including child/youth teams
- Funding for “co-responder” teams
- Whatcom County Pilot: Crisis Stabilization Diversion
- Whatcom County Pilot: Trauma Informed School Counseling
- COVID Block Grant Dollars

# Challenges & Strategies

Challenges	Strategies
Continued increase in calls to Crisis Line due to COVID and Workforce Shortages	Provided funding to VOA for additional staff and new call management system
Crisis Services Agencies still not able to access crisis plan or treatment provider information for Medicaid members	Developed an agreement with MCOs to jointly fund a data sharing platform that crisis agencies can use to access provider treatment information
COVID has complicated the ability of DCRs to conduct ITA evaluations	DCR agencies have been able to obtain PPEs and ASO funded the procurement and deployment of video conferencing equipment to be used by DCRs

# Challenges & Strategies [continued]

Challenges	Strategies
Workforce Shortages have created severe access to care problems	Facilitating a joint MCO/ASO workgroup to identify investments that can support the state's workforce development plan
HB 1310 led to reduction in assistance from law enforcement with crisis outreach	Expanding funding for co-responder programs to strengthen collaboration with law enforcement
Closure of BH-ASO office due to COVID	Provided equipment, training, and guidelines to enable ASO staff to continue to perform all functions virtually

# 2022 Strategic Goals - Proposed

1. Remain in full compliance with the HCA-BH ASO Contract
2. Support continuous process improvement in the Crisis Services System
3. Implement the updated Quality Management Plan
4. Continue to actively support planning to achieve the goals of physical/behavioral health care integration
5. Address the impacts of the COVID pandemic on staff, BHAs, and the community
6. Develop and implement a plan to address social equity and systemic racism
7. Effectively implement new state funded programs, e.g., Recovery Navigator, Long-Term Rental Assistance, Children's Crisis Team, etc.  
[New]

# Revenues & Expenditures

## 2021 vs. 2022

BUDGET	REVENUES	EXPENDITURES
2021 AMENDED	\$31,338,766	\$31,338,766
2021 PROJECTED	\$28,881,409	\$34,836,644
2022 PROPOSED	\$38,951,174	\$38,951,174



# Revenue Forecast

REVENUE SOURCE	2021 ADOPTED	2022 PROPOSED
Mental Health Block Grant	1,739,489	3,278,880
Substance Abuse Block Grant	3,571,126	5,339,865
Federal Grants [MAT-PDOA/HRSA	456,086	333,333
Medicaid Crisis MCO Contracts	4,287,847	5,102,632
State General Fund	13,689,008	15,186,567
State Proviso and Dedicated Funds	4,268,230	9,706,397
Investment Interest	20,000	3,500
<b>TOTAL REVENUE</b>	<b>28,031,786</b>	<b>38,951,174</b>

# Expenditure Detail

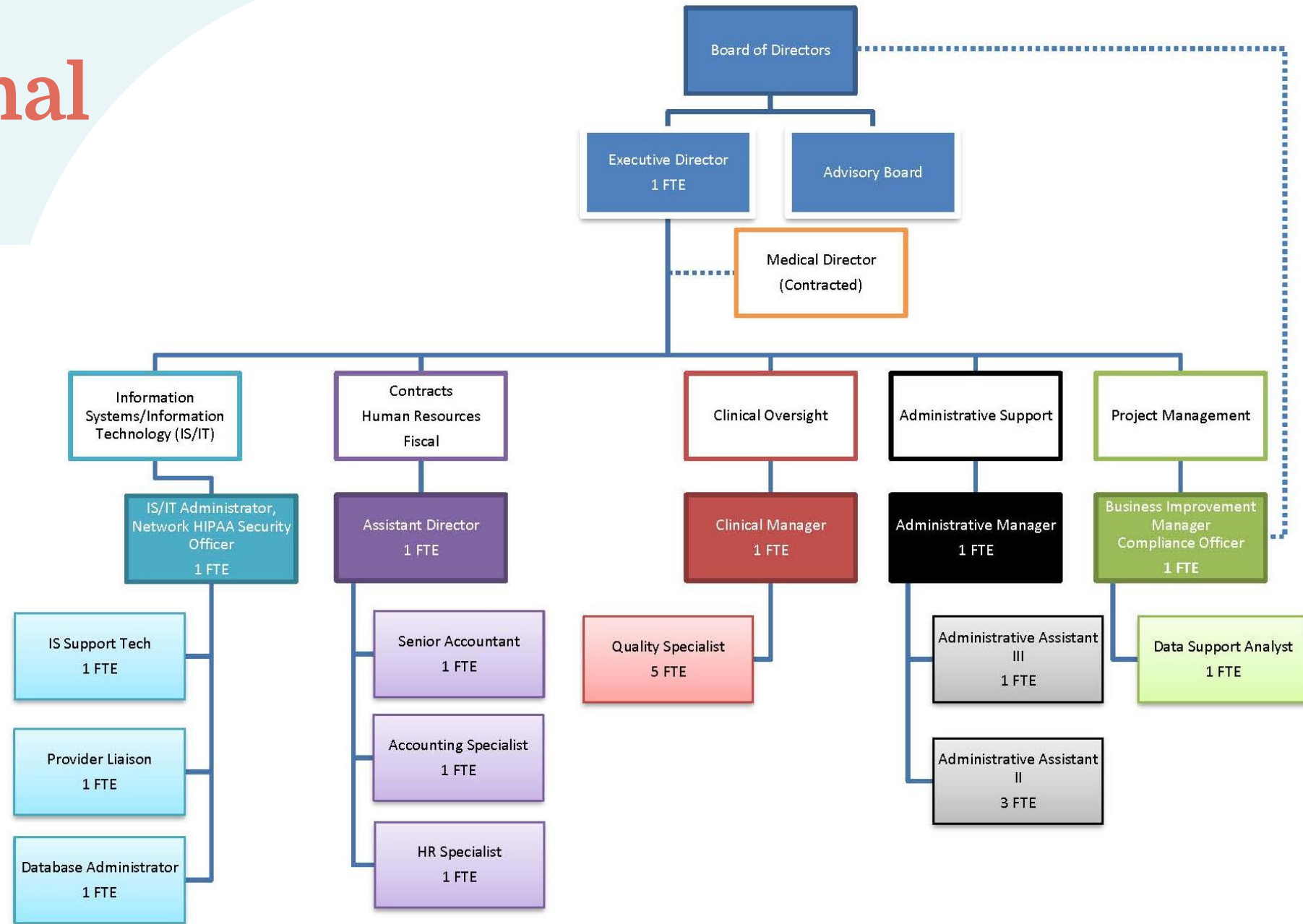
CATEGORY	2021 AMENDED*	2022 PROPOSED	Notes
Salaries & Benefits	2,824,060	3,246,304	Addition of 1FTE, increase of .5 FTE to 1 FTE. COLA Health Insurance Increase
Other Operating	1,237,041	1,106,318	Reduction of office operating expenses and rent
Sub-total Administration**	4,061,101	4,352,62,	
Behavioral Health Services***	27,277,665	34,598,552	Increased revenue: state proviso, Federal Block Grant, Medicaid
<b>TOTAL</b>	<b>31,338,766</b>	<b>38,951,176</b>	

\* Amended Budget

\*\* Includes Advisory Board

\*\*\* Includes Hospital Inpatient

# 2022 Organizational Chart





*Empowering individuals  
and families to improve  
their health and  
well-being.*

Serving Island, San Juan, Skagit, Snohomish and Whatcom Counties

**1. RECOVERY NAVIGATOR PROGRAM**

- We're waiting for Health Care Authority [HCA] to approve our Recovery Navigator Program [RNP] plan so they will release the funds and we can begin the contracting and procurement process. We provided additional details in response to their comments on the first draft of our plan.
- For Snohomish and Whatcom counties, the plan will be built in coordination with the existing LEAD programs in those counties.
- For Skagit, Island, and San Juan counties, we have identified the organizations interested in being part of the RNP system in those counties and will conduct a procurement process to identify the lead entity to manage the recovery navigators.

**2. COMMUNITY BEHAVIORAL RENTAL ASSISTANCE [CBRA]**

- We have completed the procurement process for the CBRA funds and have selected the lead entities that can meet the program requirements.
- In order to support the ability of providers to serve all counties, we have also added some of the funds set aside in our COVID Block Grant plan to provide complementary case management services.
- Any agency can refer persons for rental assistance to the lead entities.
- Contracts with the lead entities are being submitted to the Board of Directors for approval this month.
- Attached is an outline of the proposed CBRA plan. [attachment #1]

**3. COVID FEDERAL BLOCK GRANT PLAN**

- HCA has approved our proposed Mental Health and Substance Abuse Federal Block Grant plans. These plans will allocate funding based on the priorities identified in the multiple stakeholder surveys.
- Funding will either be added to existing contracts where the Block Grant plan proposed an expansion of a current program or will be allocated for new programs and services following a procurement process.

**4. CRISIS SERVICES**

- a) **Weekly Crisis Capacity Indicator Report** – through October 23 [attachment #2]. Calls to the Crisis Line and dispatches of mobile crisis outreach teams have increased over the last 3 weeks. The trend line for calls to the Crisis Line has continued to rise slowly throughout the year.

- b) **Crisis Services Dashboard** – also attached [attachment #3] is the Crisis Services dashboard that provides an unduplicated count of crises services provided by county through the month of September.

## 5. **HB 1310 UPDATE**

- We received a report from a meeting Representative Goodman and other legislators had with stakeholders on October 25 regarding suggested changes to HB 1310.
- There is a sense that legislators will propose adding clarifying language to HB 1310. Some of these provisions would include:
  - Authorizing the use of physical force under additional circumstances including behavioral health interventions or to perform life saving measures;
  - Clarifying that de-escalation tactics must be appropriate under the circumstances in order to be required rather than being exhausted before other tactics such as use of force are used; and,
  - Removing the tactic that officers should ‘leave the area’ in certain circumstances.

## 6. **WORKFORCE DEVELOPMENT**

- We received the results of a survey we sent to Behavioral Health agencies last month regarding their priorities for workforce recruitment and retention strategies. The top 3 areas identified by the BHAs were:
  - 1) Retention bonuses
  - 2) Recruitment bonuses
  - 3) Funding for Senior clinical staff to provide supervision and training.
- At the October 27 BH-ASO Administrators’ meeting, staff from the Workforce Training Board and HCA provided an overview of the various strategies the state is now pursuing.
- Attached is a summary of all the workforce bills passed in the last legislative session and the budget adds. [attachment 4]
- Also attached is a list of additional funding being provided by the Ballmer Group. [attachment 5]

## 7. **NORTH SOUND BH-ASO PROPOSED 2020 OPERATING BUDGET**

- The proposed North Sound BH-ASO Operating Budget is being presented at the November meetings of the Advisory Board and Board of Directors.
- Any changes recommended to it will be incorporated into the version to be presented for final adoption at the December 9 Board of Directors meeting.
- The December 9 BOD meeting will also include a public hearing on the proposed budget.

## Bridgeways

Community Behavioral Health Rental Assistance (CBRA) Funding						
Bridgeways	Island	San Juan	Skagit	Snohomish	Whatcom	Total
	N/A	N/A	N/A	CBRA \$77,187  SABG .25 FTE \$25,000	N/A	<b>\$102,187</b>

## Catholic Community Services

Community Behavioral Health Rental Assistance (CBRA) Funding						
Catholic Community Services	Island	San Juan	Skagit	Snohomish	Whatcom	Total
	N/A	N/A	CBRA \$88,524	N/A	N/A	<b>\$88,524</b>

## Compass Health

Community Behavioral Health Rental Assistance (CBRA) Funding						
Compass Health	Island	San Juan	Skagit	Snohomish	Whatcom	Total
	CBRA \$90,182  SABG .5 FTE \$50,000	CBRA \$18,277  SABG .5 FTE \$50,000	N/A	CBRA \$694,685	N/A	<b>\$903,144</b>

## Lake Whatcom Center

Community Behavioral Health Rental Assistance (CBRA) Funding						
	Island	San Juan	Skagit	Snohomish	Whatcom	Total

<b>Lake Whatcom Center</b>	N/A	N/A	N/A	N/A	CBRA \$209,724	<b>\$209,724</b>
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**Lifeline Connections**

<b>Community Behavioral Health Rental Assistance (CBRA) Funding</b>						
<b>Lifeline Connections</b>	Island	San Juan	Skagit	Snohomish	Whatcom	<b>Total</b>
			CBRA \$94,124		CBRA \$94,124	<b>\$188,250</b>

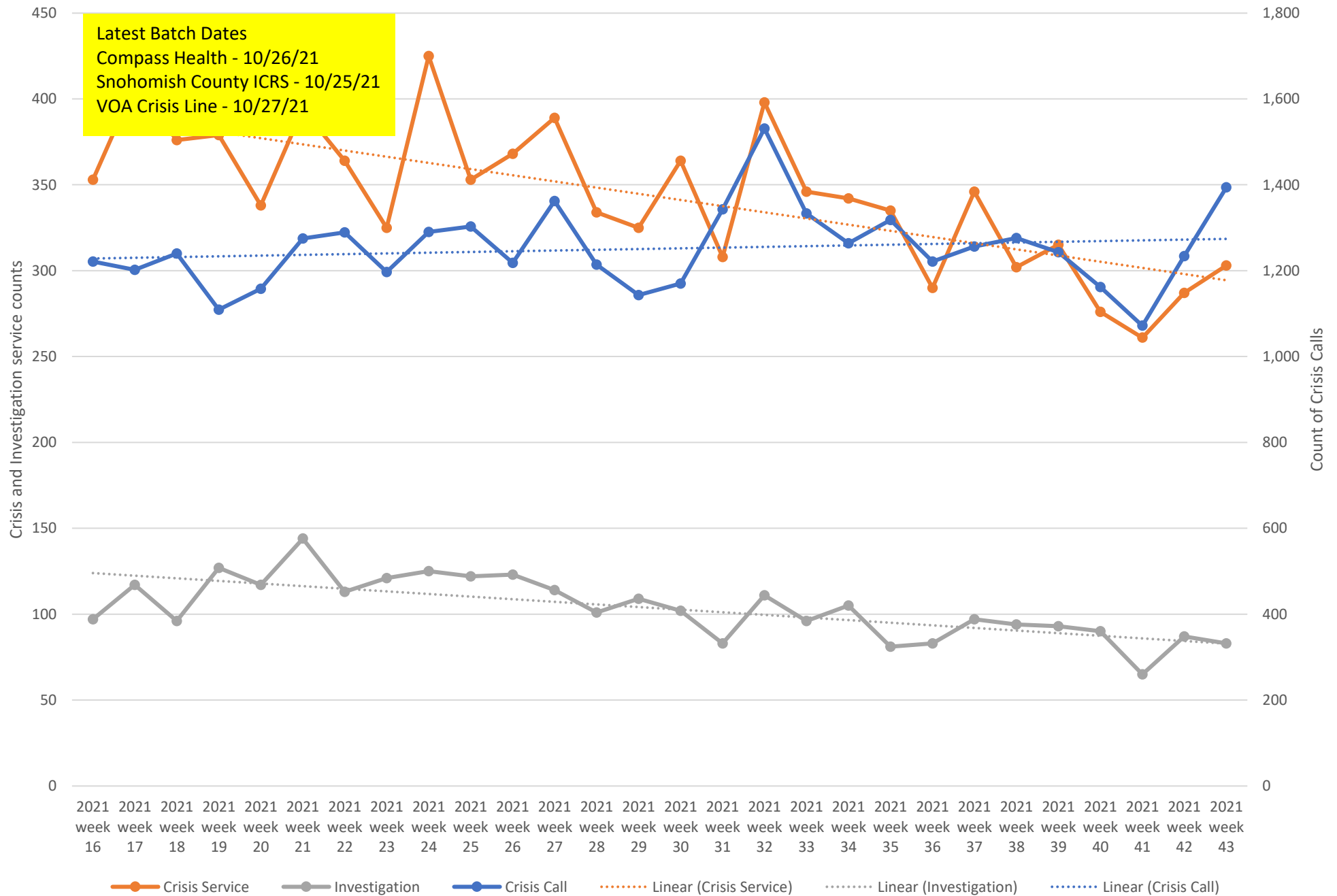




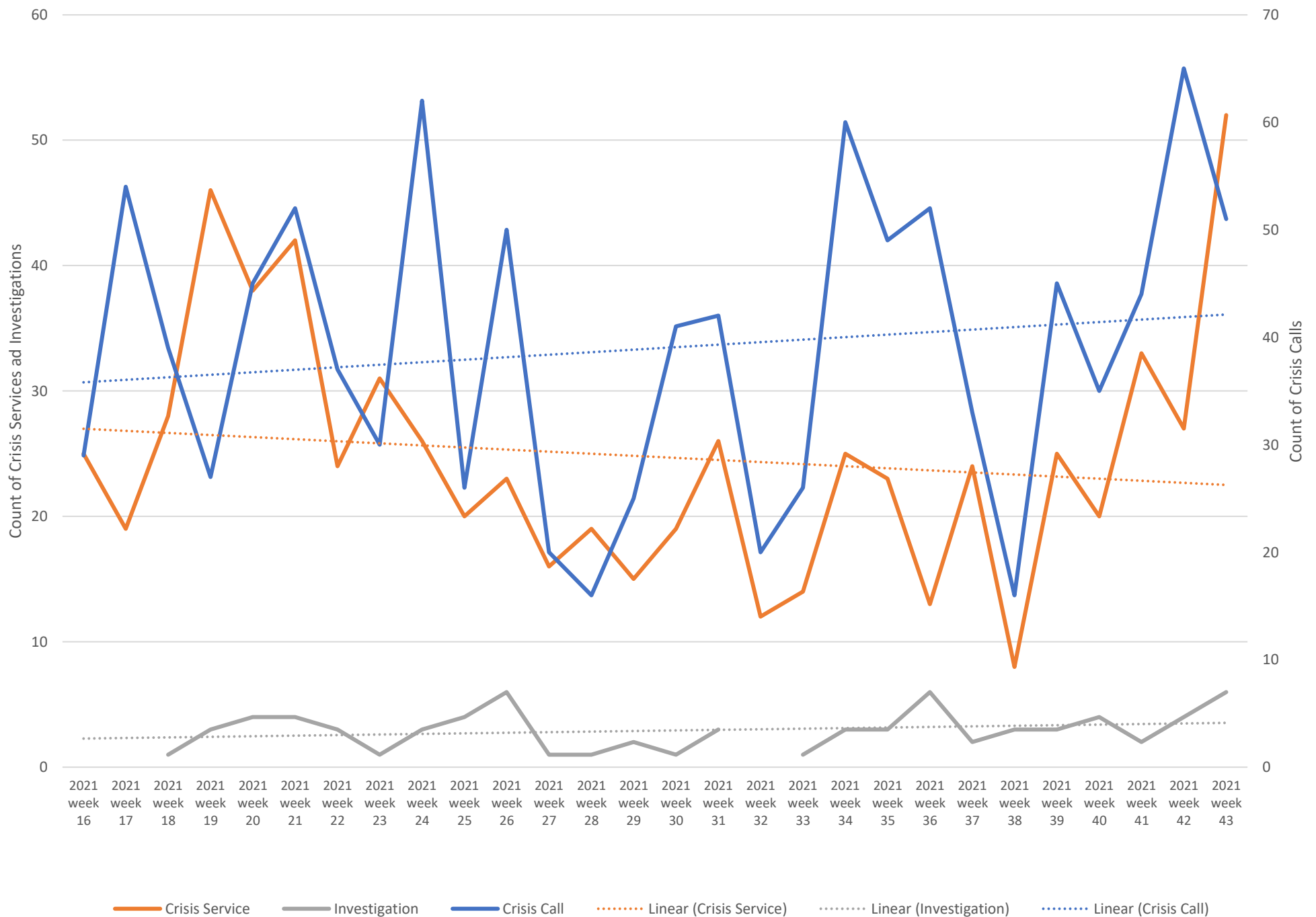
## Weekly Crisis Capacity Indicator Snapshot

Page 2	Crisis Data - dates 04/11/21 to 10/23/21
Page 3	Crisis Data: Ages 0-17 - dates 04/11/21 to 10/23/21
Page 4	All DCR Dispatches - dates 04/11/21 to 10/23/21
Page 5	Weekly Staff Count - Staff providing Crisis or Investigation services 04/11/21 to 10/23/21
Page 6	Average dispatch time for Emergent investigations from 04/11/21 to 10/23/21
Page 7	Hospital placement locations (Invol and Vol) - No adjustment has been made for timely data - recent weeks likely low
Page 8	Telehealth only, crisis and investigation services from 04/11/21 to 10/23/21
Page 9	Crisis Service Unit Percent - Crisis Service units divided by Crisis units + Investigation units
Page 10	Washington State Indicators of Anxiety or Depression Based on Reported Frequency of Symptoms During Last 7 Days
Page 11	Place of Service -Crisis Services, percent of total by week
Page 12	Place of Service -Investigations, percent of total by week
Page 13	New COVID-19 Cases Reported Weekly per 100,000 population - 11/03/20 to 10/27/21
Page 14	Total Hospitalized Adults - COVID-19 (confirmed or suspected) 7 day average
Page 15	HB 1310 Data collected with LE Declines 04/11/21 to 10/23/21
Page 16	HB 1310 Data collected with LE Response or Other 04/11/21 to 10/23/21

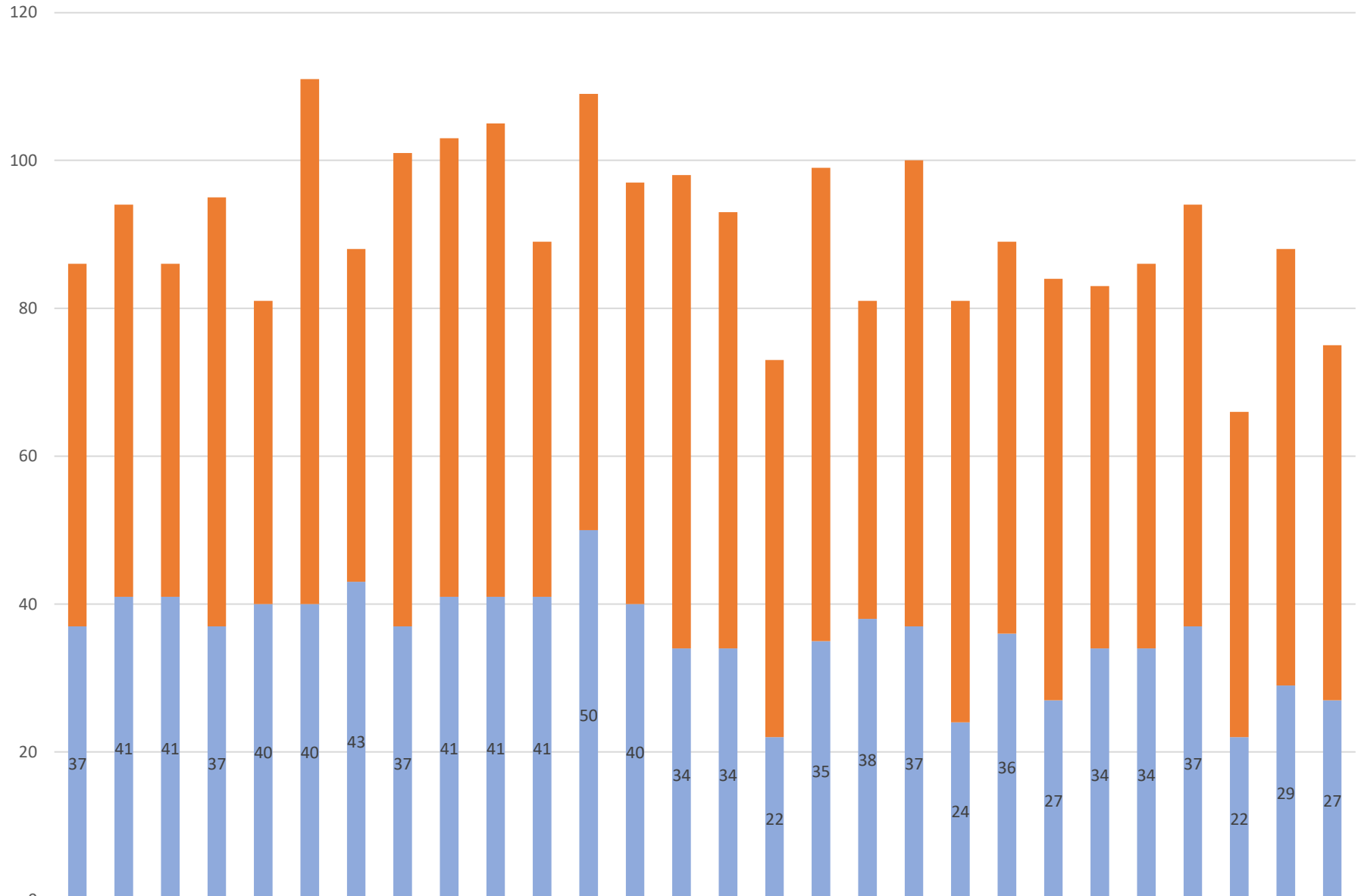
# Crisis Data - dates 04/11/21 to 10/23/21



Crisis Data: Ages 0-17 - dates 04/11/21 to 10/23/21



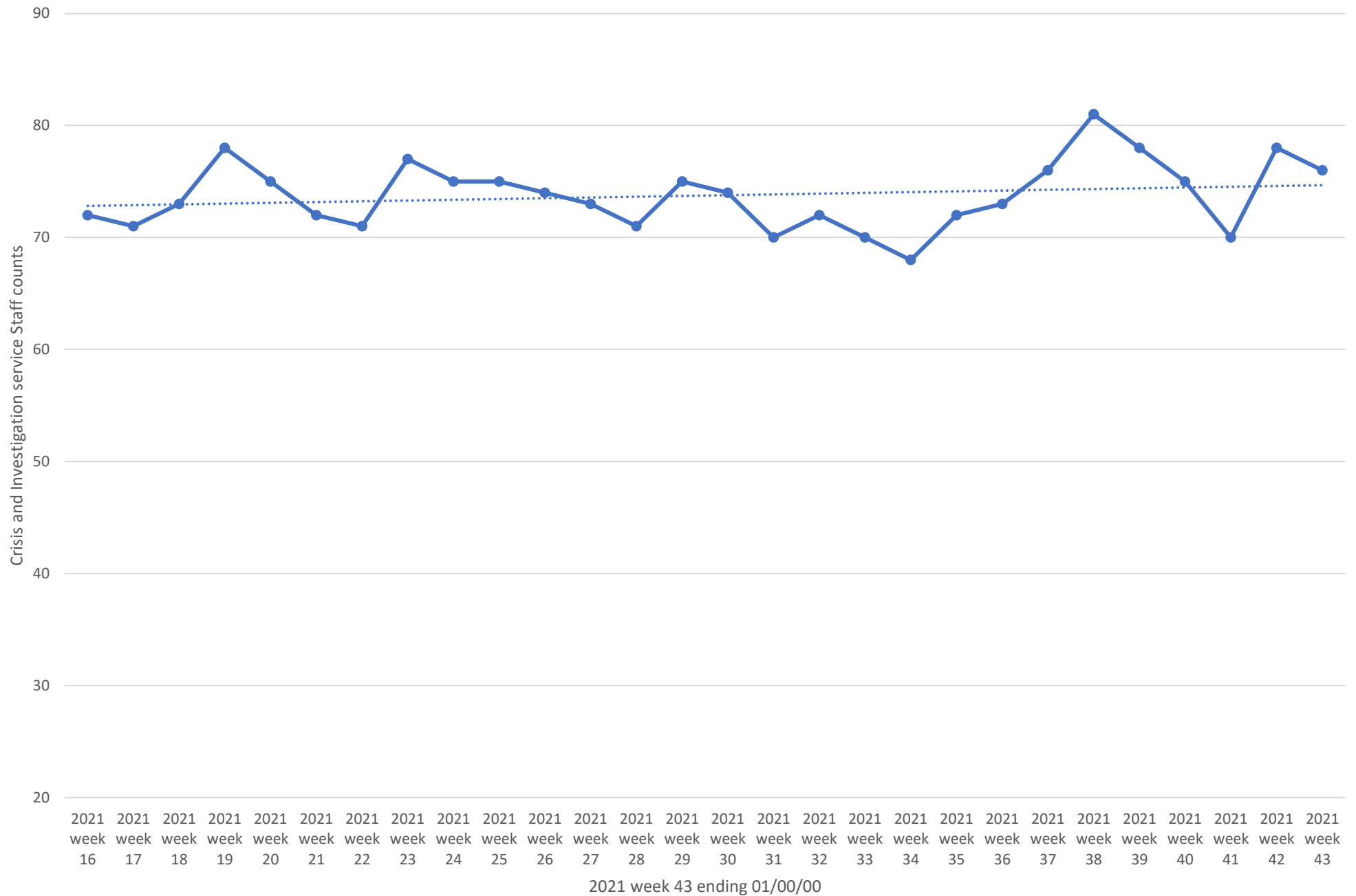
All DCR Dispatches - dates 04/11/21 to 10/23/21

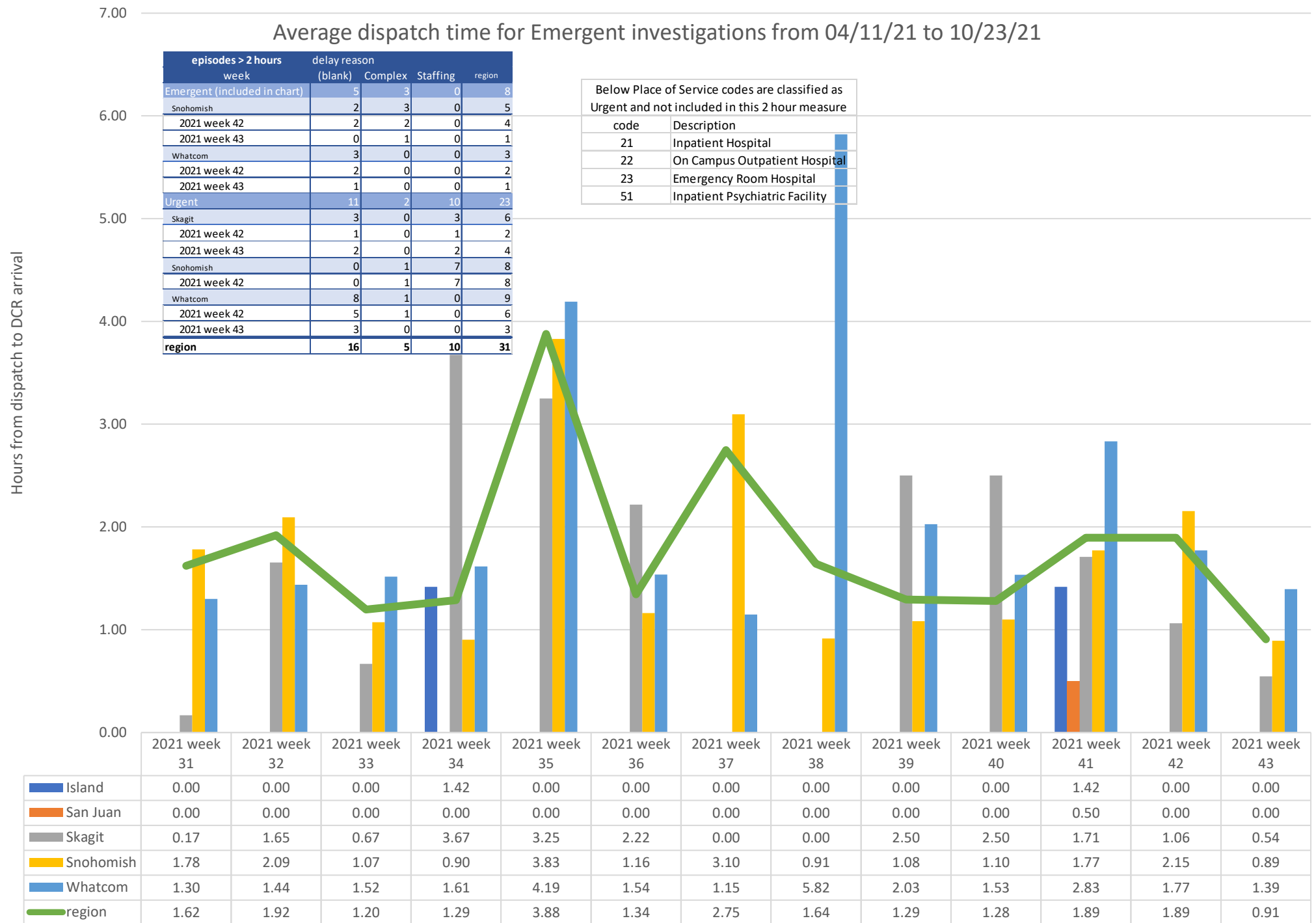


■ dispatch resulting in other outcome  
■ dispatch resulting in detention

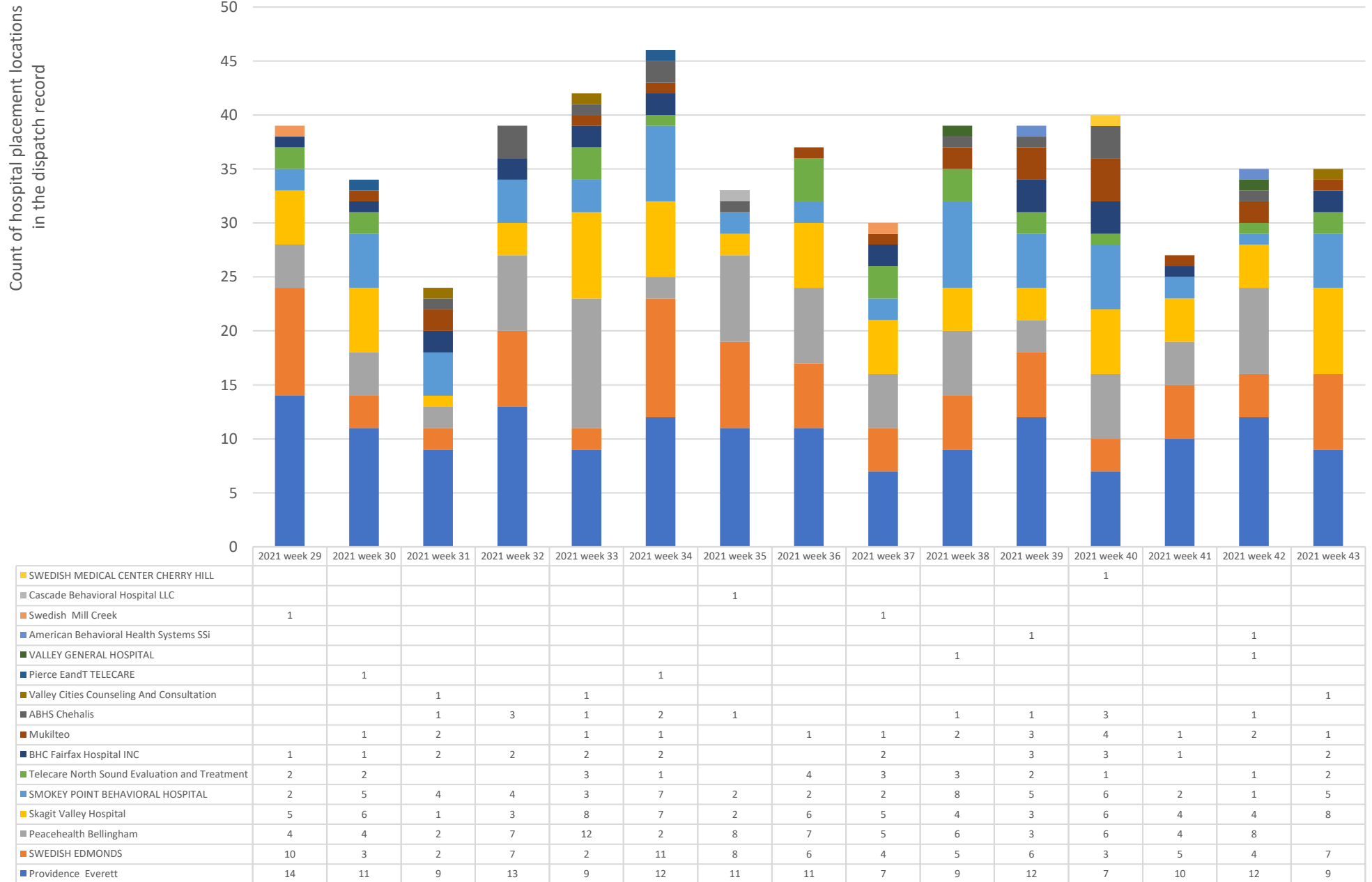
	2021 week 16	2021 week 17	2021 week 18	2021 week 19	2021 week 20	2021 week 21	2021 week 22	2021 week 23	2021 week 24	2021 week 25	2021 week 26	2021 week 27	2021 week 28	2021 week 29	2021 week 30	2021 week 31	2021 week 32	2021 week 33	2021 week 34	2021 week 35	2021 week 36	2021 week 37	2021 week 38	2021 week 39	2021 week 40	2021 week 41	2021 week 42	2021 week 43
dispatch resulting in other outcome	49	53	45	58	41	71	45	64	62	64	48	59	57	64	59	51	64	43	63	57	53	57	49	52	57	44	59	48
dispatch resulting in detention	37	41	41	37	40	40	43	37	41	41	41	50	40	34	34	22	35	38	37	24	36	27	34	34	37	22	29	27

Weekly Staff Count - Staff providing Crisis or Investigaion services 04/11/21 to 10/23/21

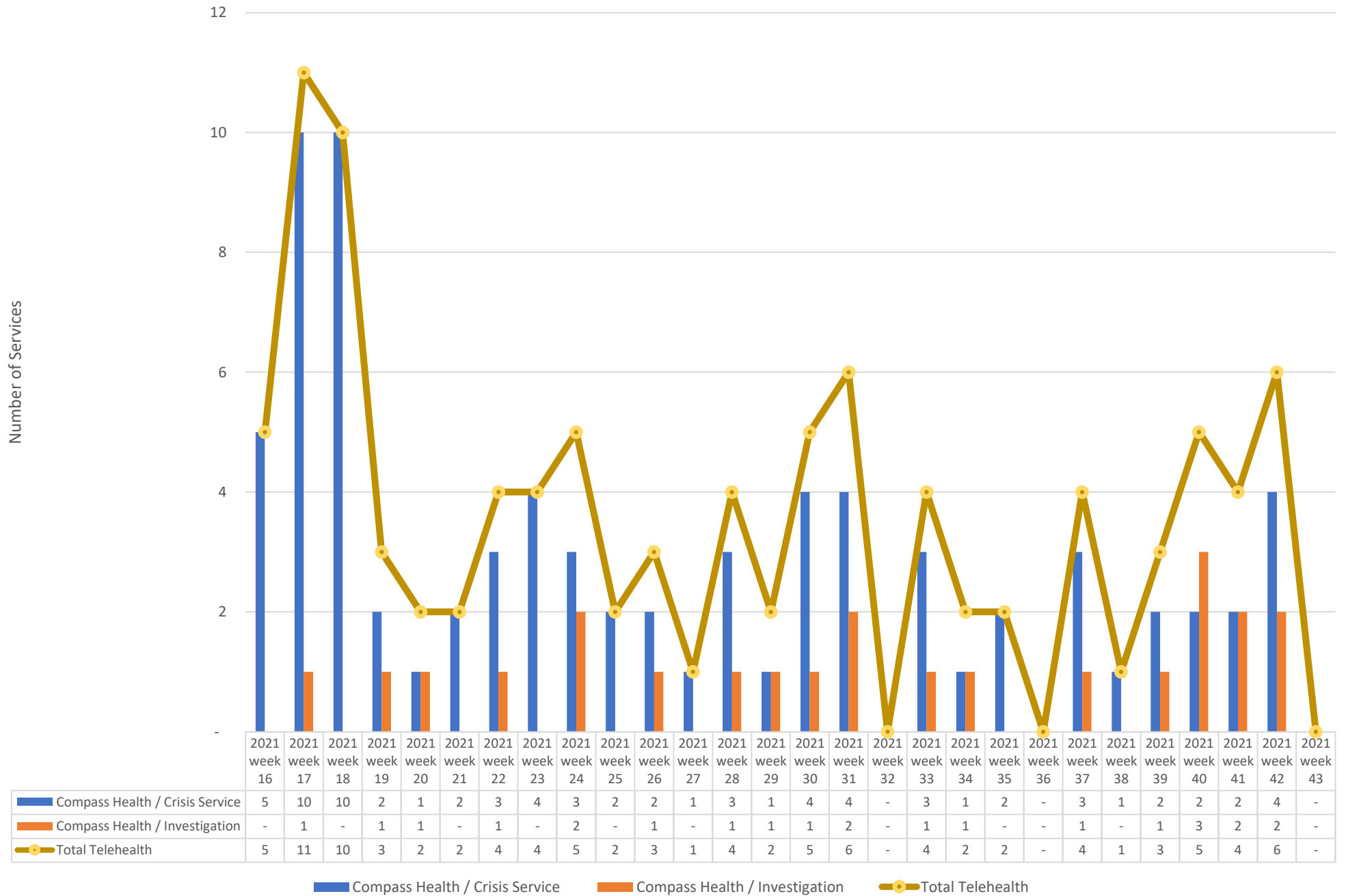




# Hospital placement locations (Invol and Vol) - No adjustment has been made for timely data - recent weeks likely low

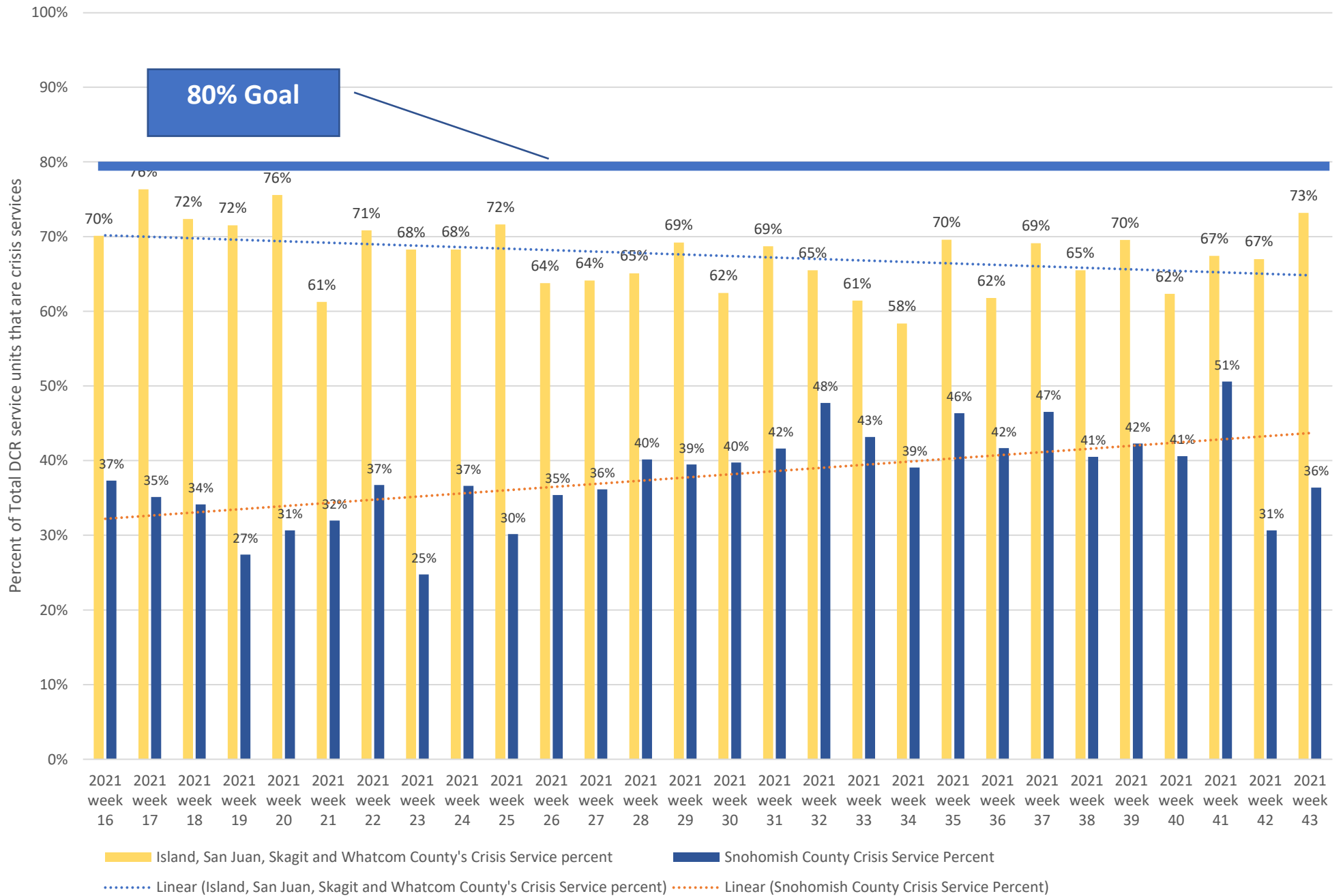


# Telehealth only, crisis and investigation services from 04/11/21 to 10/23/21





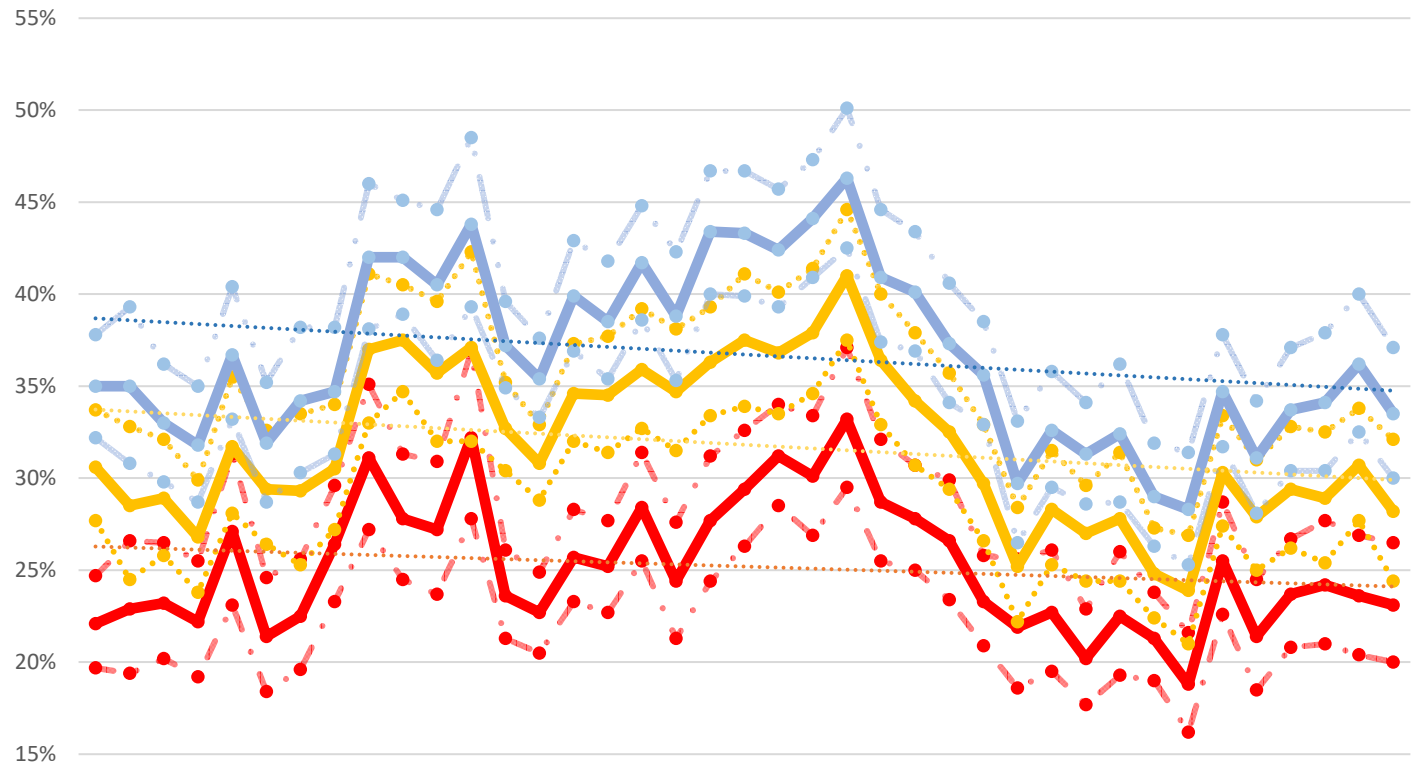
# Crisis Service Unit Percent - Crisis Service units divided by Crisis units + Investigation units












# Washington State Indicators of Anxiety or Depression Based on Reported Frequency of Symptoms During Last 7 Days

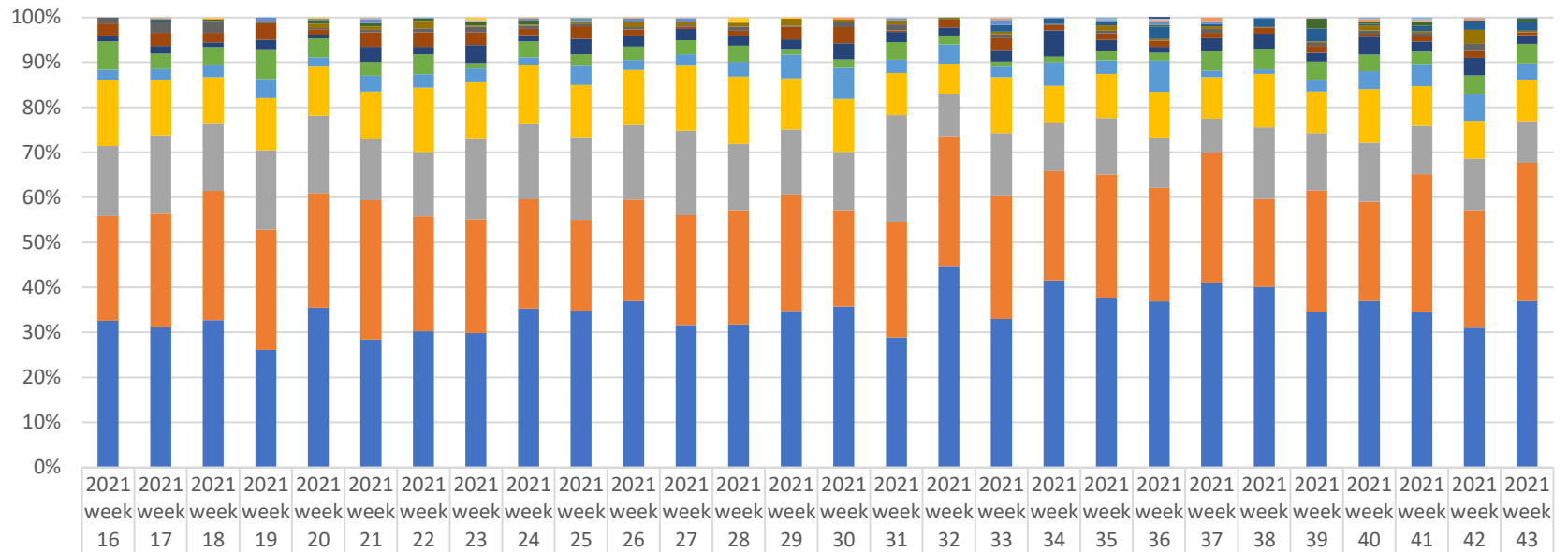
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<https://data.cdc.gov/NCHS/Indicators-of-Anxiety-or-Depression-Based-on-Repor/8pt5-q6wp>

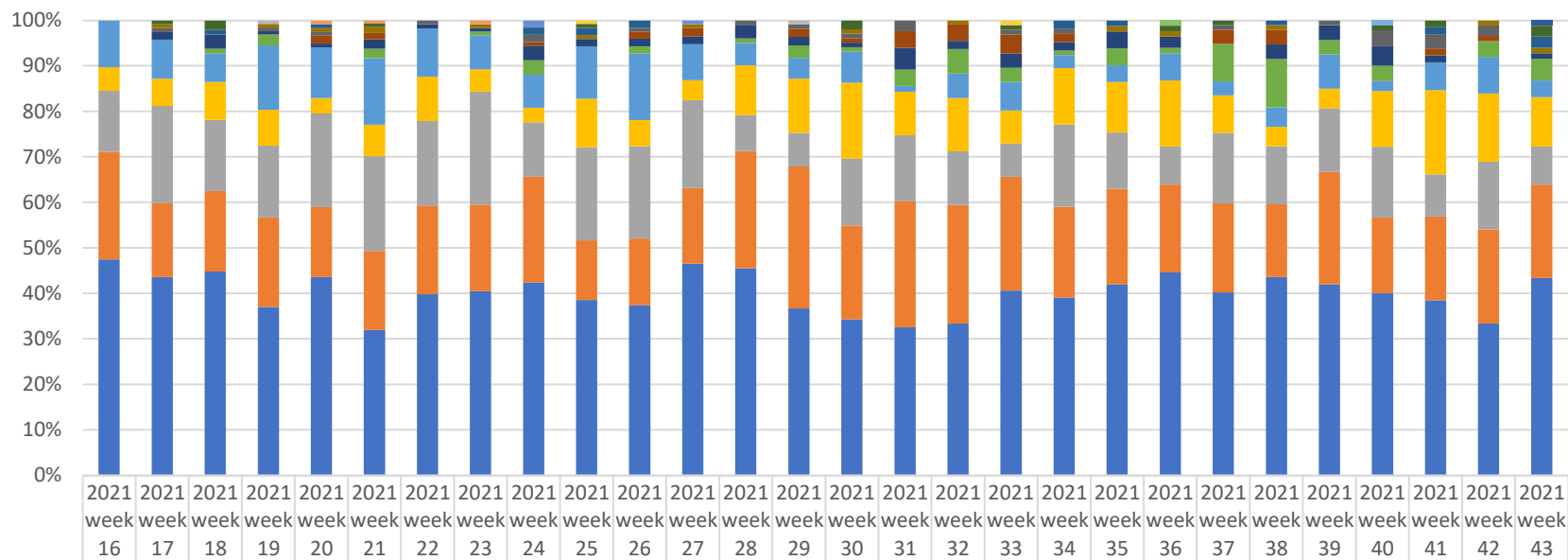


10%		23 Apr-05 May	07 May-12 May	14 May-19 May	21 May-26 May	28 May-02 Jun	04 Jun-09 Jun	11 Jun-16 Jun	18 Jun-23 Jun	25 Jun-30 Jun	02 Jul-07 Jul	09 Jul-14 Jul	16 Jul-21 Jul	19 Aug-31 Aug	02 Sep-14 Sep	16 Sep-28 Sep	30 Sep-12 Oct	14 Oct-26 Oct	28 Oct-09 Nov	11 Nov-23 Nov	25 Nov-07 Dec	09 Dec-21 Dec	06 Jan-18 Jan	20 Jan-01 Feb	03 Feb-15 Feb	17 Feb-01 Mar	03 Mar-15 Mar	17 Mar-29 Mar	14 Apr-26 Apr	28 Apr-10 May	12 May-24 May	26 May-07 Jun	09 Jun-21 Jun	23 Jun-05 Jul	21 Jul-02 Aug	04 Aug-16 Aug	18 Aug-30 Aug	01 Sep-13 Sep	15 Sep-27 Sep	29 Sep-11 Oct
 % with Symptoms of Depressive Disorder low conf. level		20%	19%	20%	19%	23%	18%	20%	23%	27%	25%	24%	28%	21%	21%	23%	23%	26%	21%	24%	26%	29%	27%	30%	26%	25%	23%	21%	19%	20%	18%	19%	19%	16%	23%	19%	21%	21%	20%	20%
 % with Symptoms of Depressive Disorder value		22%	23%	23%	22%	27%	21%	23%	26%	31%	28%	27%	32%	24%	23%	26%	25%	28%	24%	28%	29%	31%	30%	33%	29%	28%	27%	23%	22%	23%	20%	23%	21%	19%	26%	21%	24%	24%	24%	23%
 % with Symptoms of Depressive Disorder high conf. level		25%	27%	27%	26%	31%	25%	26%	30%	35%	31%	31%	37%	26%	25%	28%	28%	31%	28%	31%	33%	34%	33%	37%	32%	31%	30%	26%	26%	26%	23%	26%	24%	22%	29%	25%	27%	28%	27%	27%
 % with Symptoms of Anxiety Disorder low conf. level		28%	25%	26%	24%	28%	26%	25%	27%	33%	35%	32%	32%	30%	29%	32%	31%	33%	32%	33%	34%	34%	35%	38%	33%	31%	29%	27%	22%	25%	24%	24%	22%	21%	27%	25%	26%	25%	28%	24%
 % with Symptoms of Anxiety Disorder value		31%	29%	29%	27%	32%	29%	29%	31%	37%	38%	36%	37%	33%	31%	35%	35%	36%	35%	36%	38%	37%	38%	41%	36%	34%	33%	30%	25%	28%	27%	28%	25%	24%	30%	28%	29%	29%	31%	28%
 % with Symptoms of Anxiety Disorder high conf. level		34%	33%	32%	30%	36%	33%	34%	34%	41%	41%	40%	42%	35%	33%	37%	38%	39%	38%	39%	41%	40%	41%	45%	40%	38%	36%	33%	28%	32%	30%	31%	27%	27%	33%	31%	33%	33%	34%	32%
 % with Symptoms of Anxiety or Depressive Disorder low conf. level		32%	31%	30%	29%	33%	29%	30%	31%	38%	39%	36%	39%	35%	33%	37%	35%	39%	35%	40%	40%	39%	41%	43%	37%	37%	34%	33%	27%	30%	29%	29%	26%	25%	32%	28%	30%	30%	33%	30%
 % with Symptoms of Anxiety or Depressive Disorder value		35%	35%	33%	32%	37%	32%	34%	35%	42%	42%	41%	44%	37%	35%	40%	39%	42%	39%	43%	43%	42%	44%	46%	41%	40%	37%	36%	30%	33%	31%	32%	29%	28%	35%	31%	34%	34%	36%	34%
 % with Symptoms of Anxiety or Depressive Disorder high conf. level		38%	39%	36%	35%	40%	35%	38%	38%	46%	45%	45%	49%	40%	38%	43%	42%	45%	42%	47%	47%	46%	47%	50%	45%	43%	41%	39%	33%	36%	34%	36%	32%	31%	38%	34%	37%	38%	40%	37%

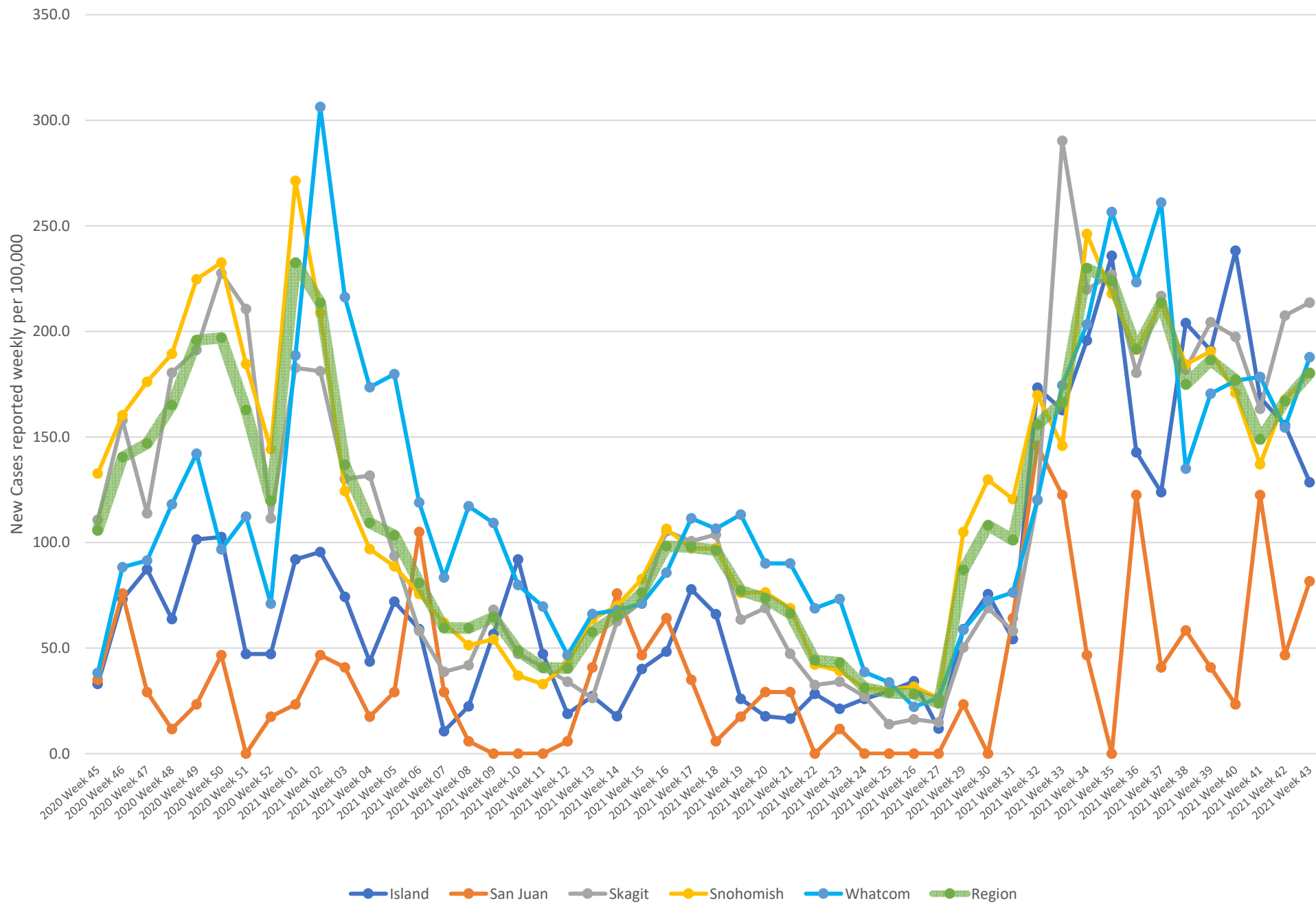
Place of Service -Crisis Services, percent of total by week



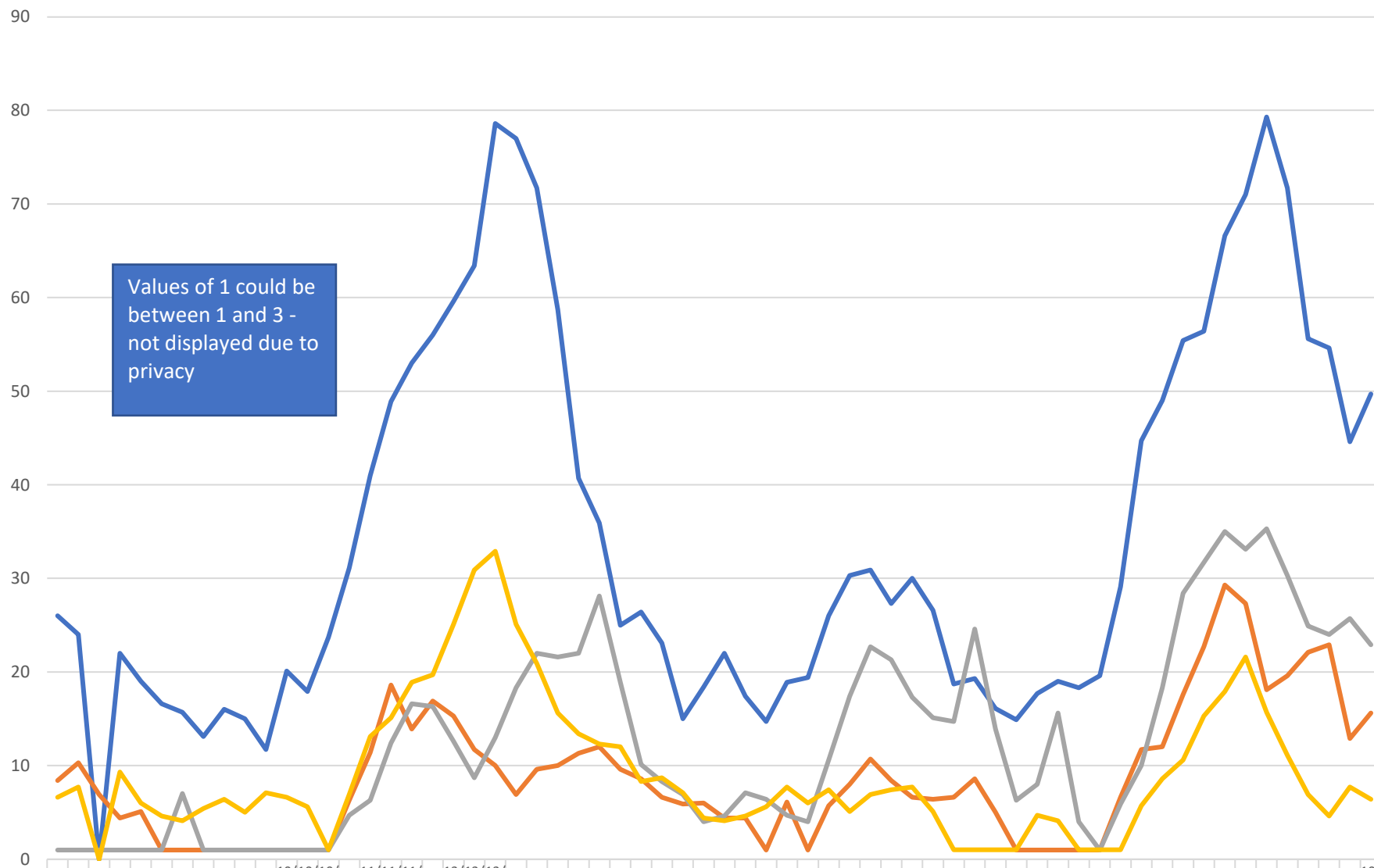
Place of Service -Investigations, percent of total by week



# New COVID-19 Cases Reported Weekly per 100,000 population - 11/03/20 to 10/27/21



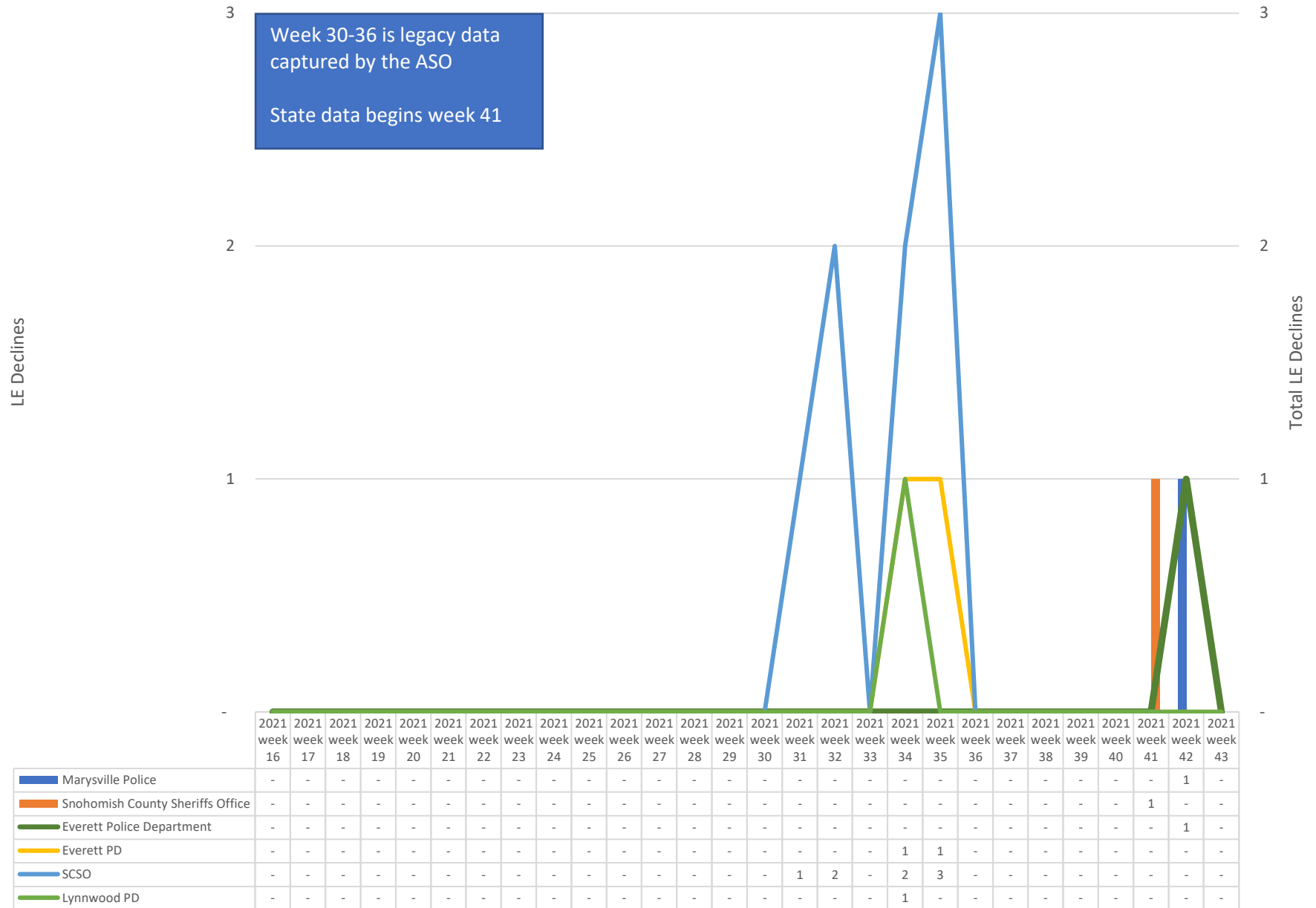
Total Hospitalized Adults - COVID-19 (confirmed or suspected) 7 day average

[illegible]

HB 1310 Data collected with LE Declines 04/11/21 to 10/23/21

Week 30-36 is legacy data captured by the ASO

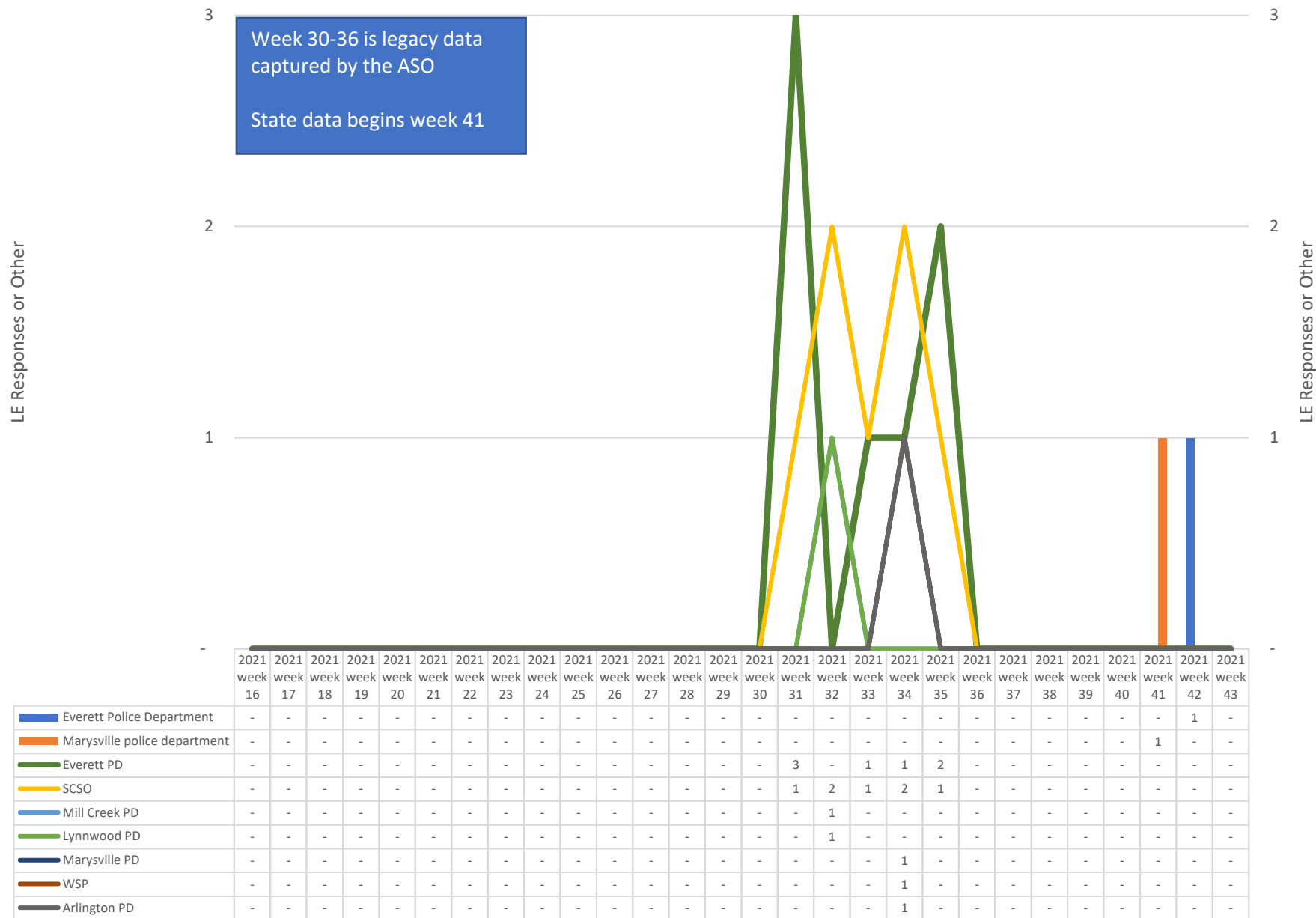
State data begins week 41



HB 1310 Data collected with LE Response or Other 04/11/21 to 10/23/21

Week 30-36 is legacy data captured by the ASO

State data begins week 41



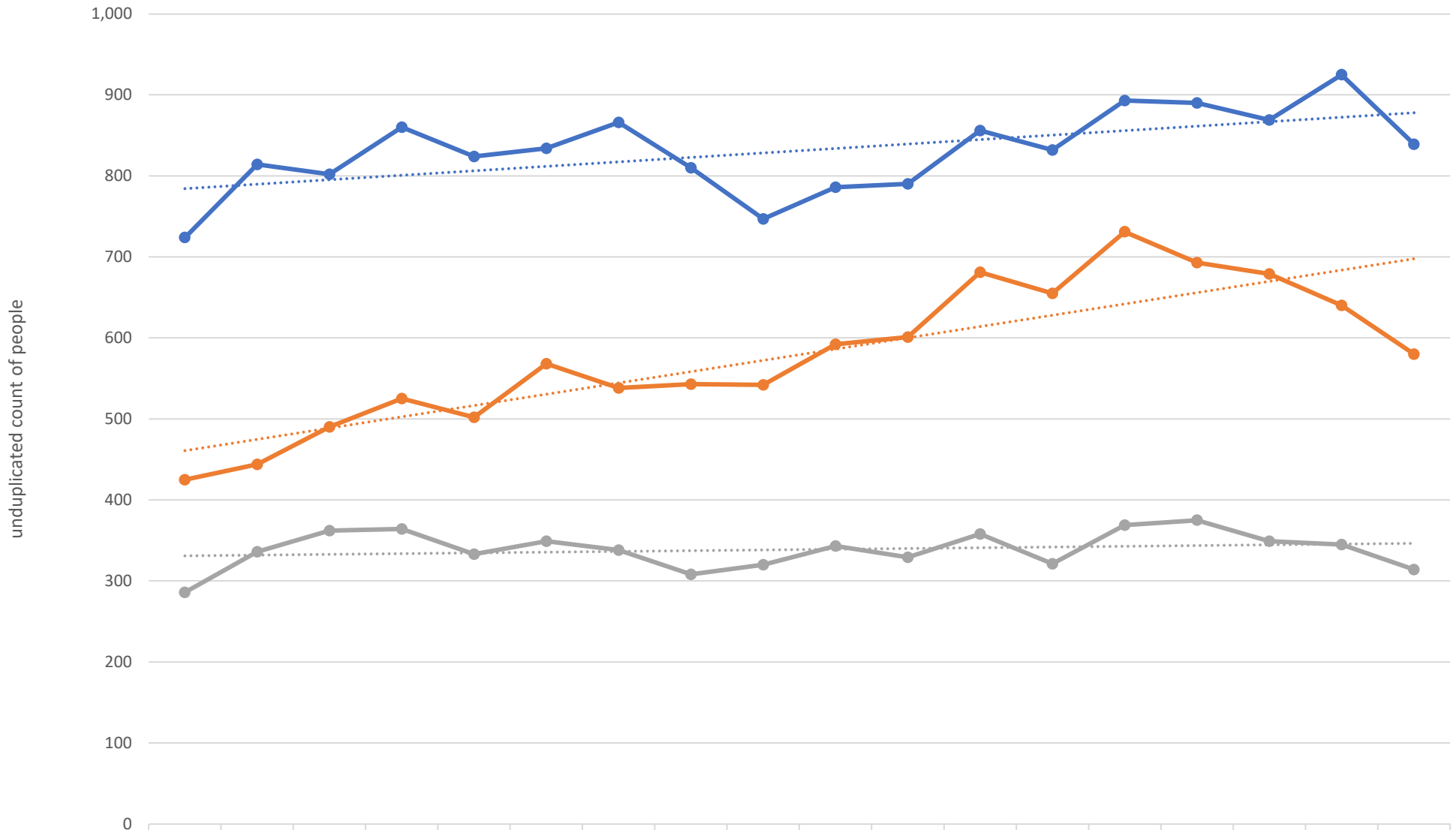




## North Sound Crisis System Dashboard

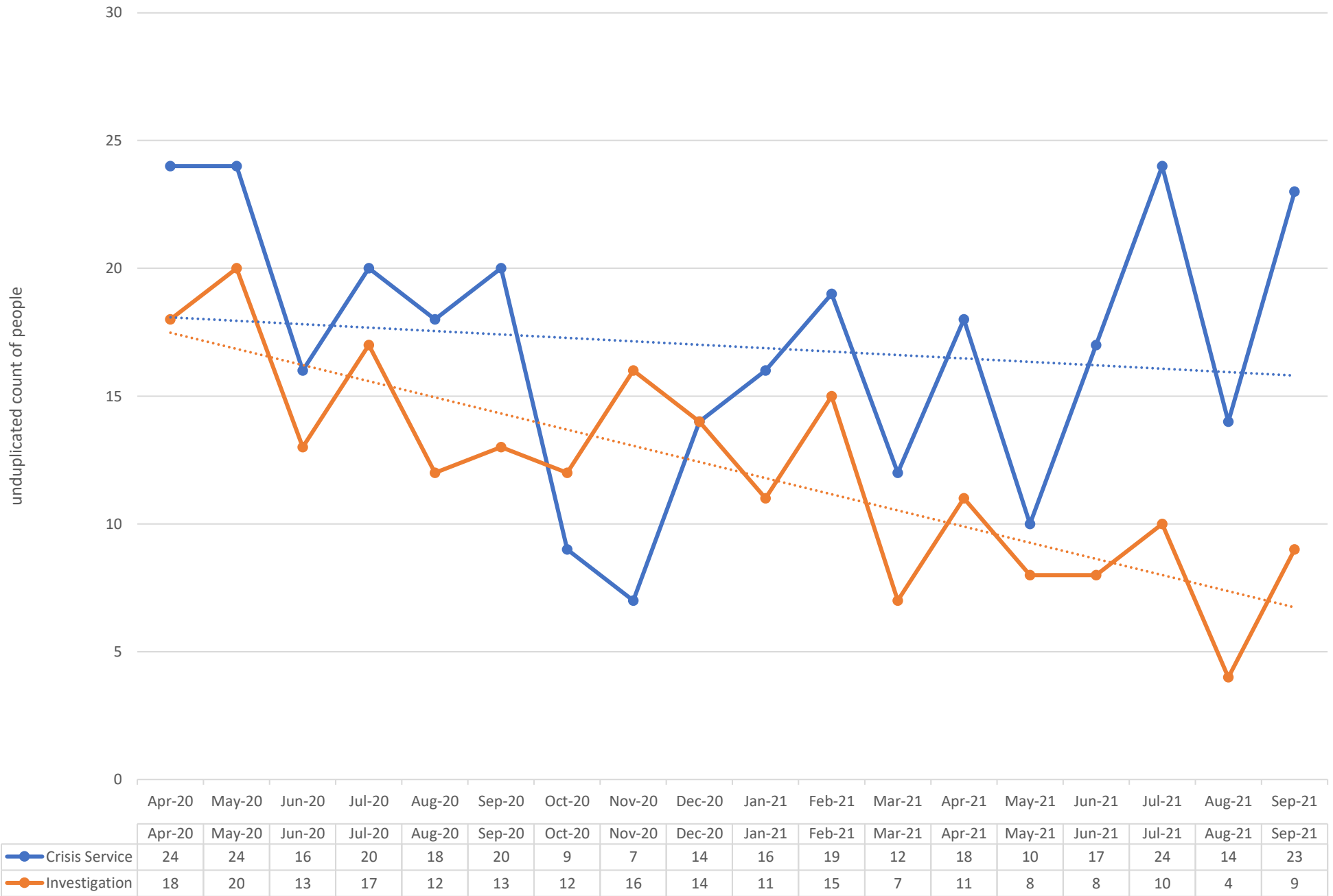
Page 2	Unduplicated People receiving a crisis system service
Page 3	Island - Unduplicated People receiving a crisis system service
Page 4	San Juan - Unduplicated People receiving a crisis system service
Page 5	Skagit - Unduplicated People receiving a crisis system service
Page 6	Snohomish - Unduplicated People receiving a crisis system service
Page 7	Whatcom - Unduplicated People receiving a crisis system service
Page 8	Region Designated Crisis Responder (DCR) Investigations
Page 9	Region DCR Investigation Referral Sources
Page 10	Region DCR Investigation Outcomes

# Unduplicated People receiving a crisis system service

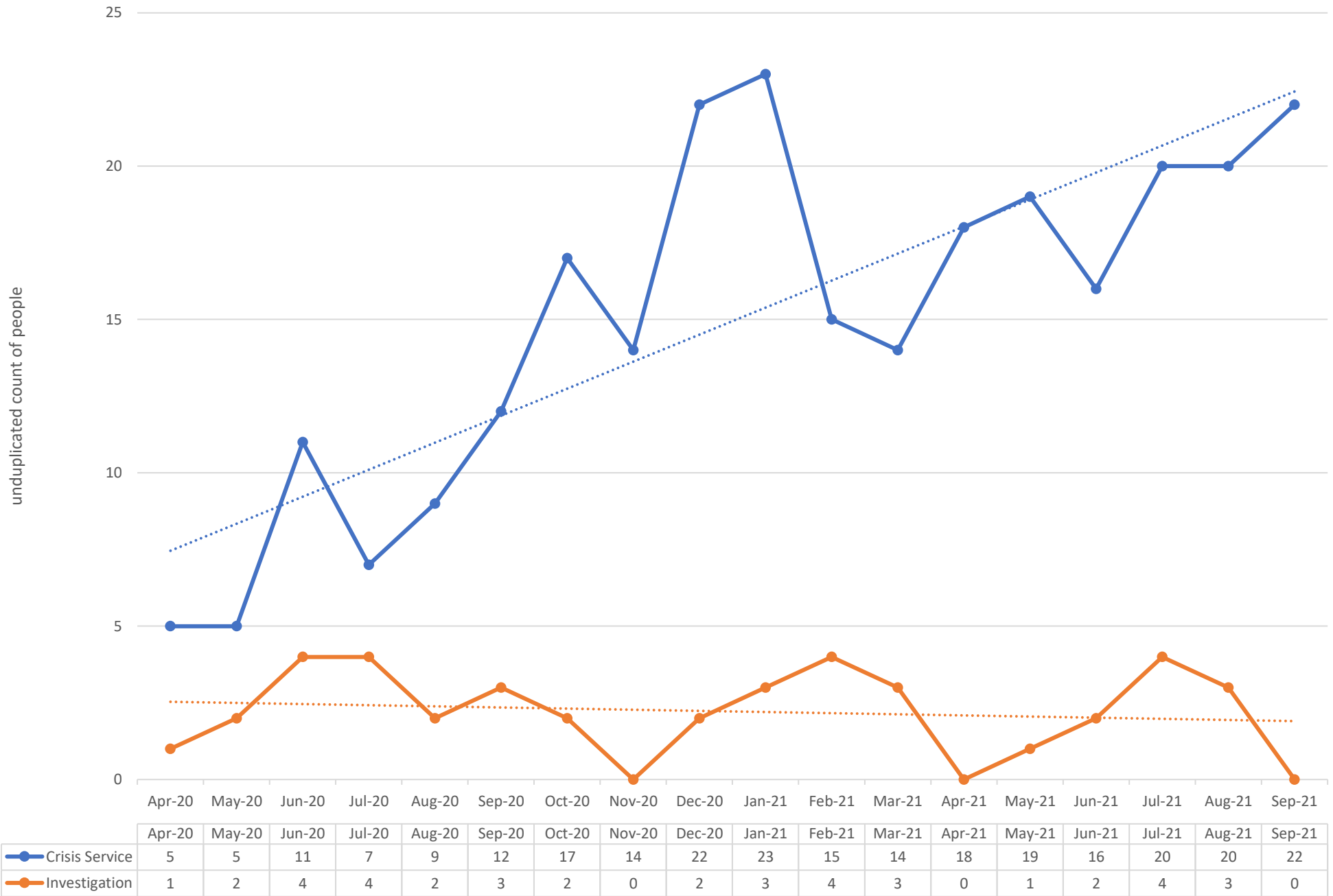


	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21
● Crisis Call	724	814	802	860	824	834	866	810	747	786	790	856	832	893	890	869	925	839
● Crisis Service	425	444	490	525	502	568	538	543	542	592	601	681	655	731	693	679	640	580
● Investigation	286	336	362	364	333	349	338	308	320	343	329	358	321	369	375	349	345	314

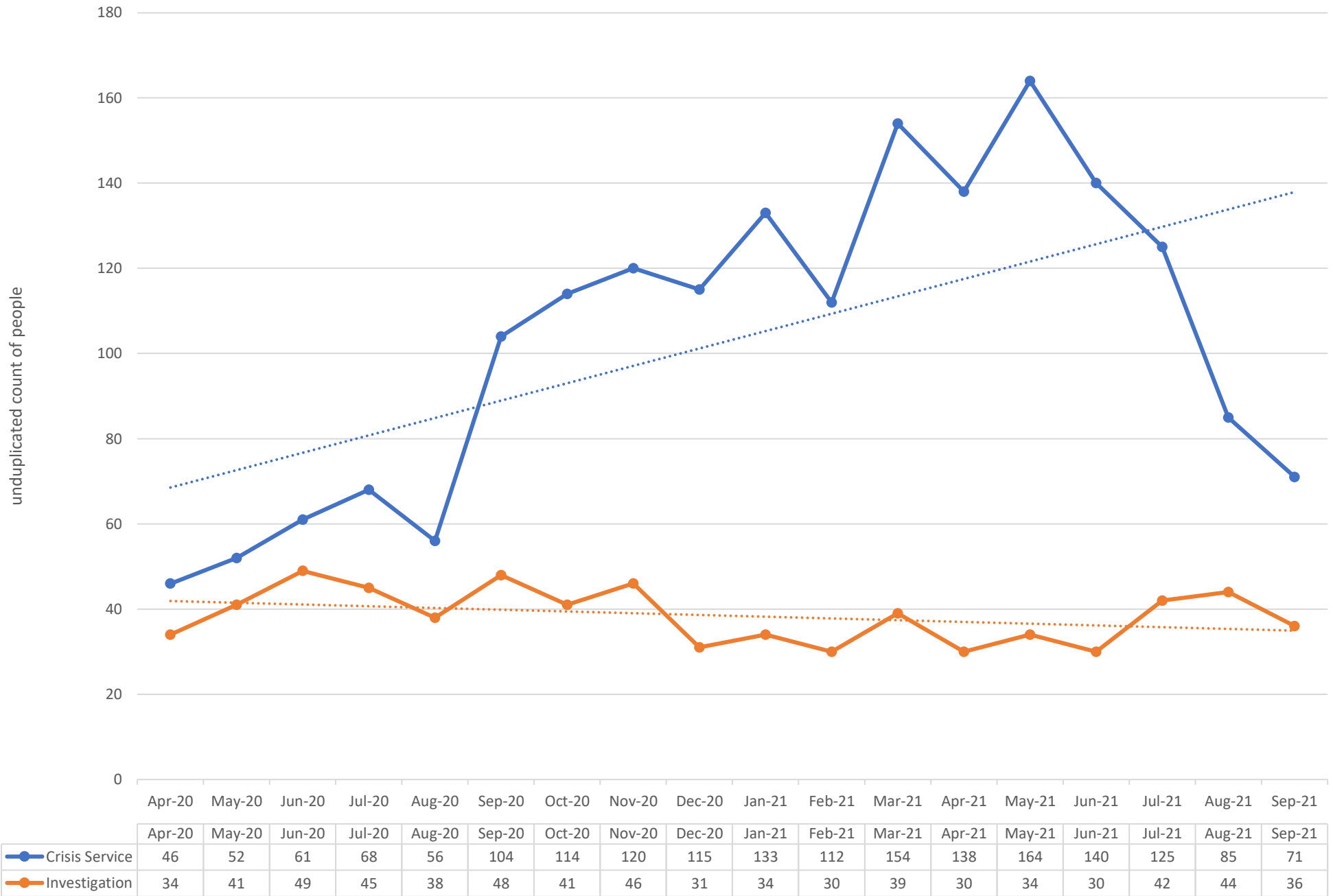
# Island - Unduplicated People receiving a crisis system service



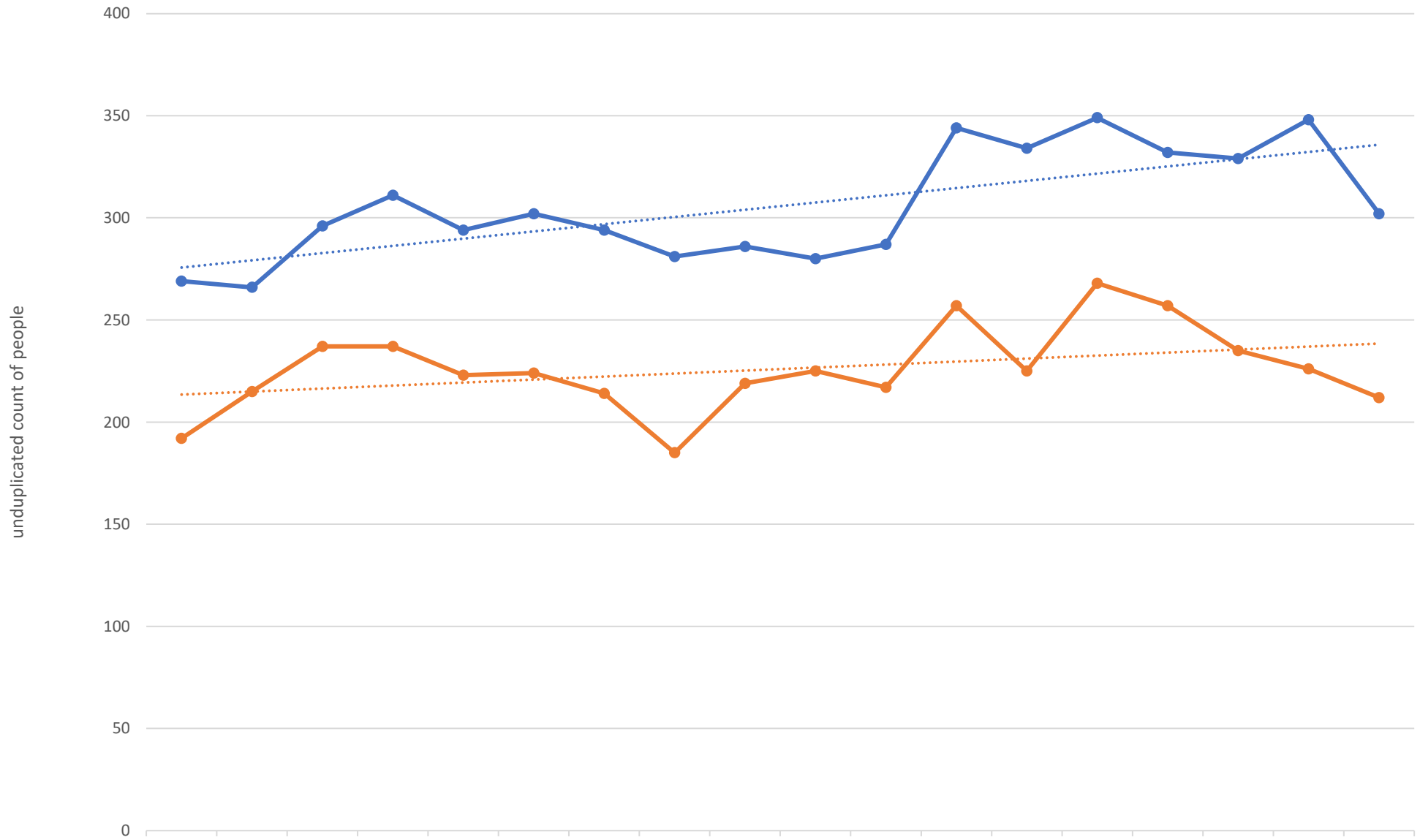
# San Juan - Unduplicated People receiving a crisis system service



# Skagit - Unduplicated People receiving a crisis system service

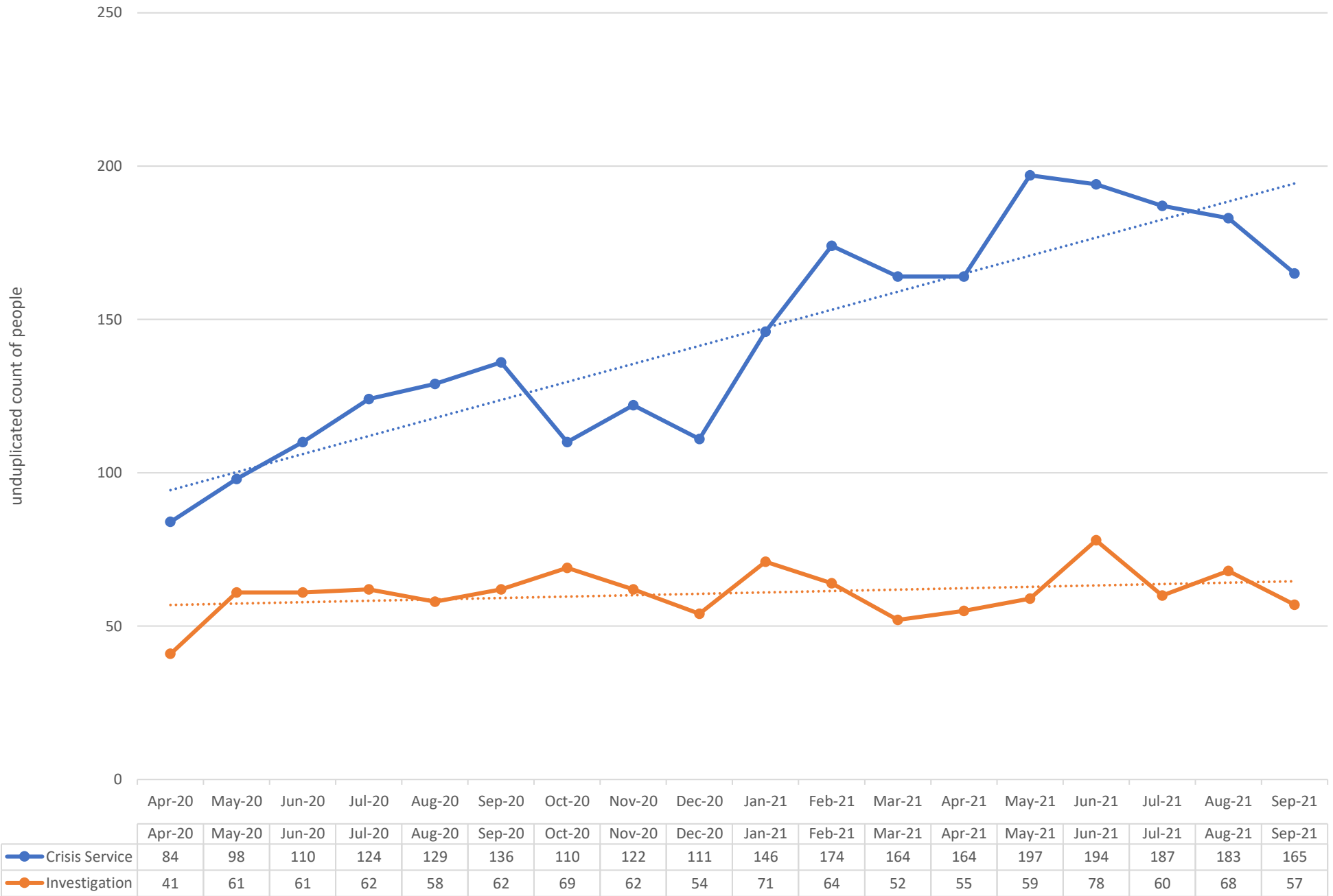


# Snohomish - Unduplicated People receiving a crisis system service

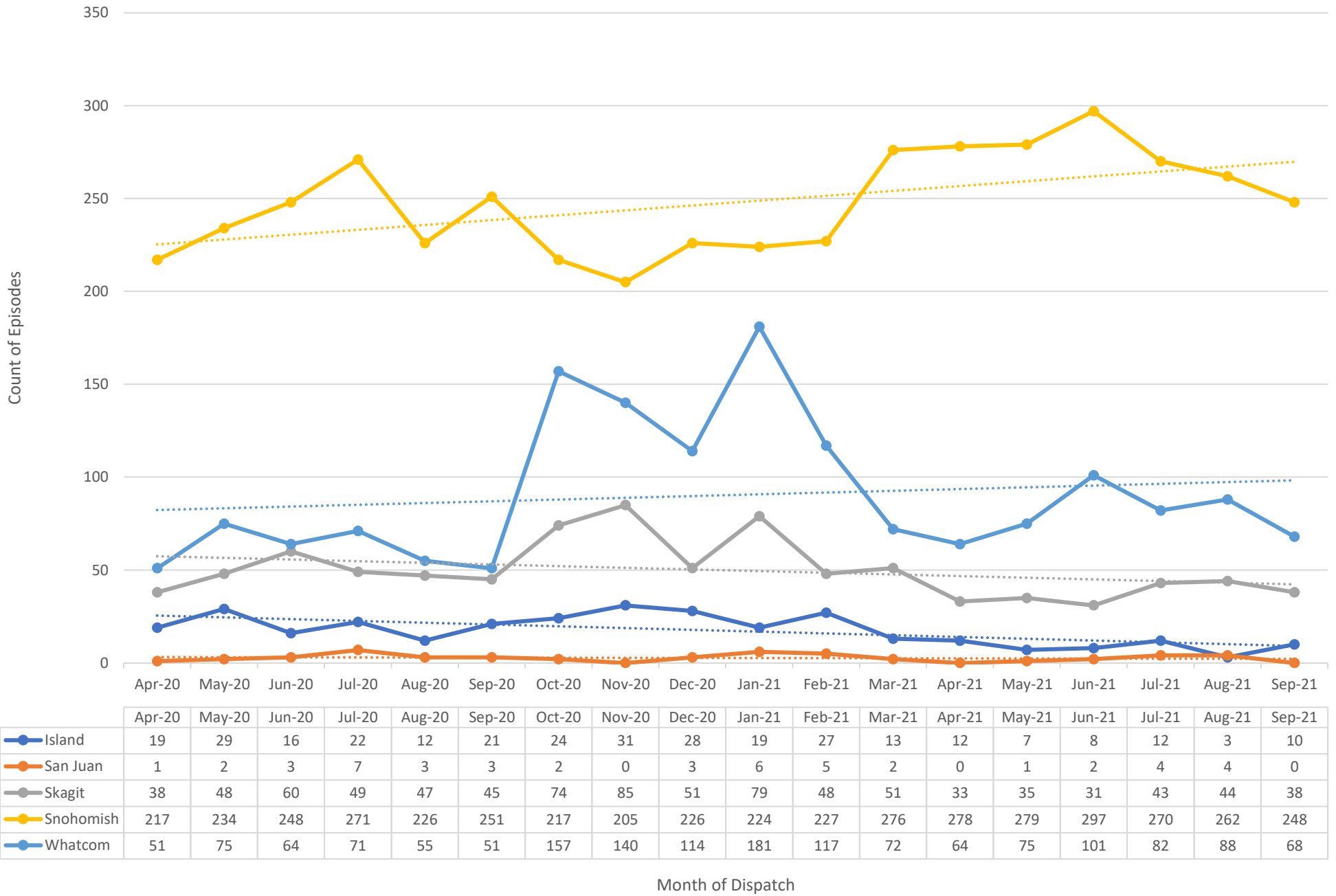


	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21
Crisis Service	269	266	296	311	294	302	294	281	286	280	287	344	334	349	332	329	348	302
Investigation	192	215	237	237	223	224	214	185	219	225	217	257	225	268	257	235	226	212

# Whatcom - Unduplicated People receiving a crisis system service

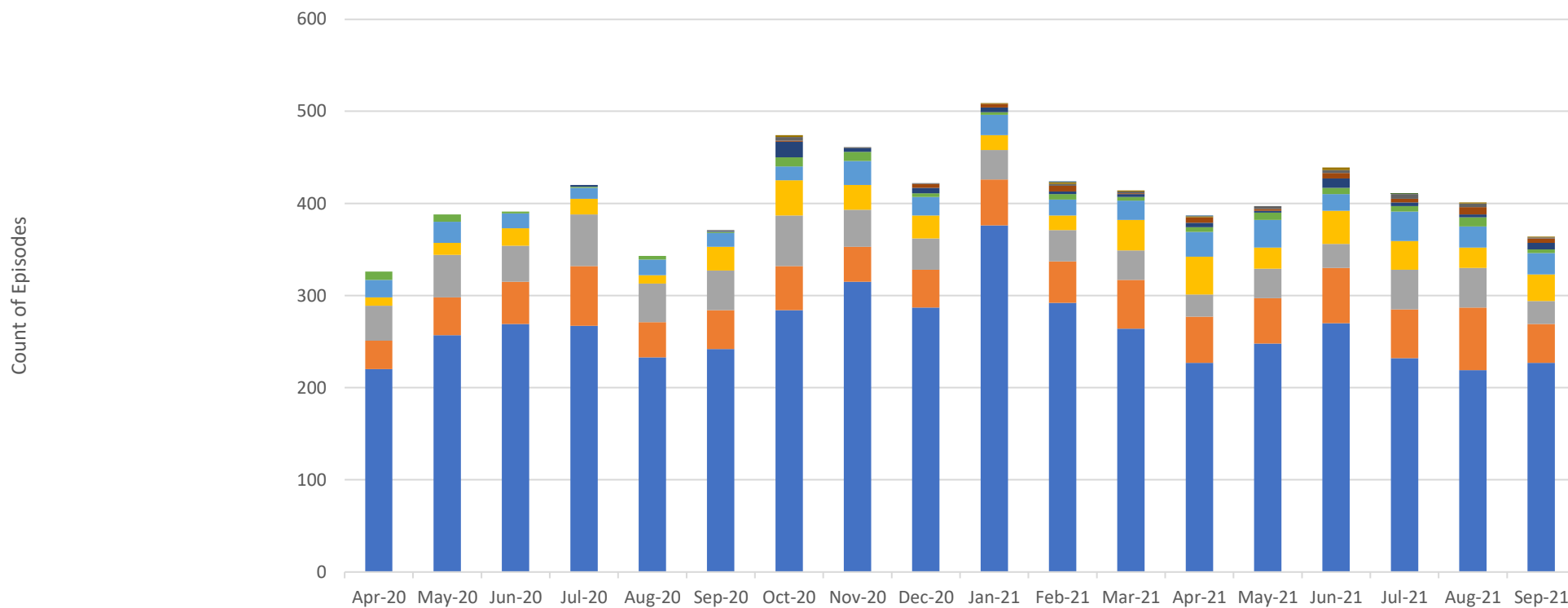


## Region Designated Crisis Responder (DCR) Investigations





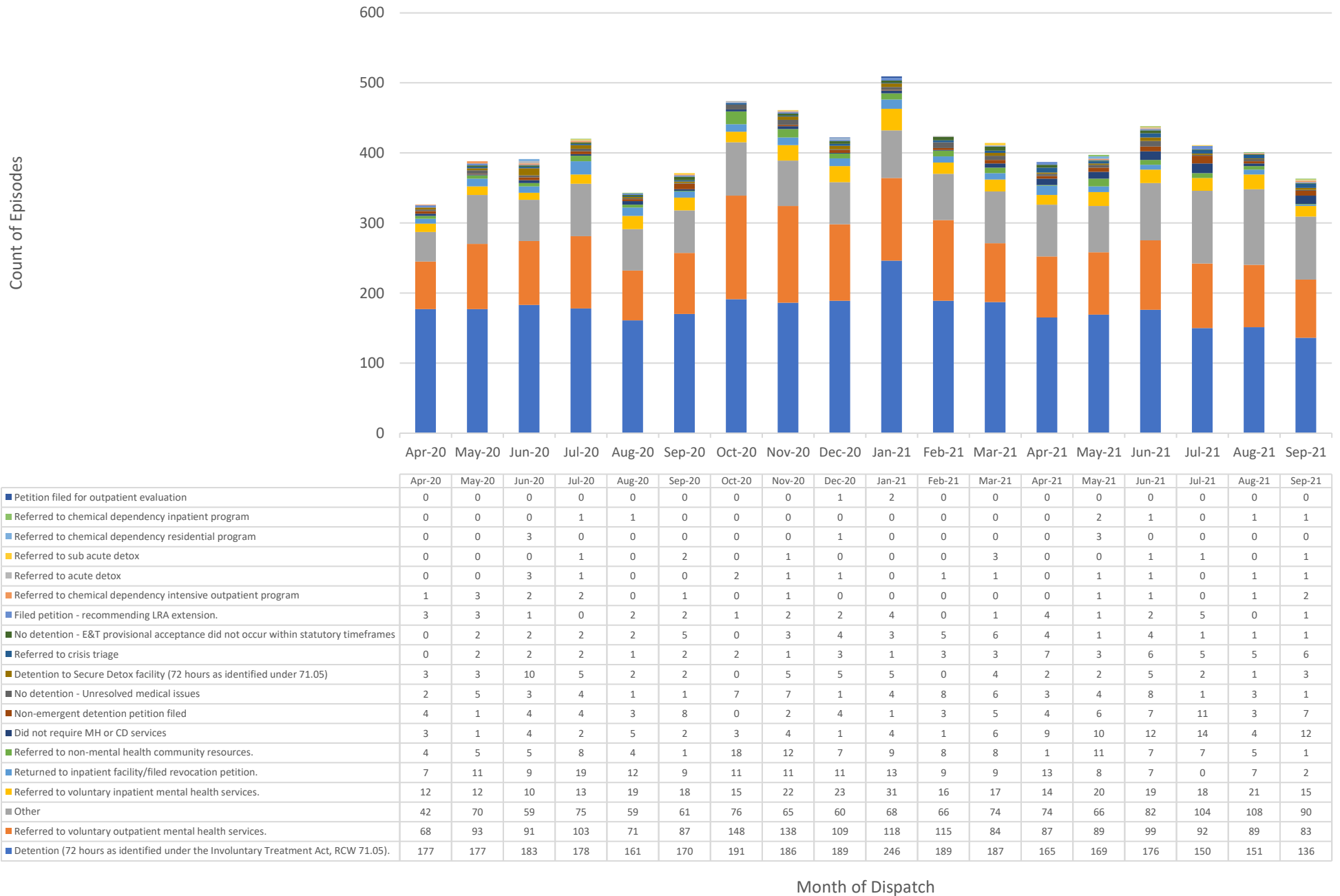
## Region DCR Investigation Referral Sources



	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21
Impact Team Law Enforcement Referral	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0
School	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0
Referral from MCR to DCR	0	0	0	0	0	0	2	0	0	1	2	1	1	0	3	0	1	1
Community	0	0	0	0	0	1	4	1	1	0	2	2	0	3	3	5	4	1
Legal Representative	0	0	0	0	0	0	1	0	4	4	6	1	6	2	6	4	8	5
Social Service Provider	0	0	0	2	0	1	17	4	6	5	3	3	5	2	10	4	3	7
Care Facility	9	8	2	1	4	1	10	10	4	3	6	4	5	8	7	6	10	4
Professional	19	23	16	12	17	15	15	26	20	22	17	21	27	30	18	32	23	23
Other	9	13	19	17	9	26	38	27	25	16	16	33	41	23	36	31	22	29
Law Enforcement	38	46	39	56	42	43	55	40	34	32	34	32	24	32	26	43	43	25
Family	31	41	46	65	38	42	48	38	41	50	45	53	50	49	60	53	68	42
Hospital	220	257	269	267	233	242	284	315	287	376	292	264	227	248	270	232	219	227

Month of Dispatch

## Region DCR Investigation Outcomes



## Behavioral Health Workforce Bills and Budget – Final

PASSED	DESCRIPTION	SPONSOR
SHB 1007	<p>Supervised experience through distance supervision</p> <p>Removes the limitations on the number of supervised experience hours that a person pursuing a license as a social worker may complete through distance supervision.</p>	Klippert
HB 1063	<p>Behavioral health credentials</p> <p>Allows the Department of Health to renew associate licenses or trainee certifications for certain behavioral health professionals in training additional times, due to barriers to testing or training resulting from a Governor-declared emergency.</p>	Harris
HB 1311	<p>SUD apprenticeships/certs</p> <p>Allows for persons participating in authorized apprenticeship programs to qualify for substance use disorder professional certification</p>	Bronoske
HB 1411	<p>Health care workforce eligibility for persons with prior involvement with the criminal justice system</p> <p>Prohibits the Department of Social and Health Services (Department) from automatically disqualifying a person who has a criminal record containing certain crimes from having unsupervised access to, working with, or providing care to vulnerable adults or children.</p> <p>Establishes a work group to identify an informed choice process to allow older adults and people with disabilities to hire an individual with a criminal record that would otherwise disqualify the person from providing paid home care services.</p> <p>Authorizes the Department to exercise its discretion regarding whether to permit or prohibit a person with a certificate of restoration of</p>	Simmons
HB 1504	<p>WEIA BH workforce expansion</p> <p>Adds workforce education and career connected learning as allowable uses of the Workforce Education Investment Account.</p> <p>Requires the Health Care Authority to establish a behavioral health workforce pilot program and provide training support grants to community mental health and substance use disorder treatment providers.</p> <p>Broadens the definition of "agency affiliated counselors" to include student interns.</p> <p>Requires that a portion of nonfederal funds in the Health Professional Loan Repayment program be prioritized for demographically underrepresented populations.</p> <p>Increases the cap on state match dollars for the Washington State Opportunity Scholarship Advanced Degrees Pathways Account to \$5 million per biennium</p>	Chopp

SB 5229	<p>Health equity continuing education requirement</p> <p>Requires the rule-making authority for each health profession to adopt rules requiring health care professionals to complete health equity education training at least once every four years.</p> <p>Requires health equity courses to teach skills that enable a health care professional to care effectively for patients from diverse cultures, groups, and communities, varying in race, ethnicity, gender identity, sexuality, religion, age, ability, and socioeconomic status.</p>	Randall
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Budget Adds	Report Due	Final
<b>Behavioral health loan repayment program (Student Achievement Council)</b> – increase loans within the behavioral health program.		\$4.125 m (2022) \$4.125 m (2023)
<b>Teaching clinic enhancement rate work group (HCA)</b> – develop a recommended teaching clinic enhancement rate for behavioral health agencies training and supervising students and those seeking their certification or license.	10/15/2021	\$150,000 (2022)
<b>BH Employment barriers related to background checks task force (HCA)</b> – to examine impacts and changes proposed to the use of criminal background checks in employment in behavioral health settings.	12/1/2021	\$100,000
<b>BH Apprenticeship program (L&amp;I)</b> – for implementation of HB 1311		\$22,000 (2022) \$78,000 (2023)
<b>Behavioral health workforce shortages assessment (WFTECB)</b> – in partnership with the office of the Governor, the health workforce council shall continue to assess workforce shortages across behavioral health disciplines and incorporate the recommended action plan completed in 2020.		\$240,000 (2022) \$240,000 (2023)
<p><b>Behavioral health workforce advisory committee (WFTECB)</b> – Monitor and report on the progress of recommendations from the board’s previous behavioral health workforce assessments and continue to develop policy and practice recommendations on emerging issues in behavioral health workforce.</p> <p>The report shall contain an analysis of behavioral health workforce shortages and challenges, data to inform systems change, and relevant policy recommendations and actions informed by the employer demand projection and talent development pipeline analyses.</p> <p>The board shall contract with a statewide nonprofit organization with expertise in promoting and supporting science, technology, engineering, and math education to provide a regional analysis of supply pipelines to current behavioral health care opportunities, at the secondary and postsecondary levels, and will identify gaps and barriers to programs that lead to high demand behavioral health occupations.</p> <p>In coordination with the board's employer demand projection analysis, the contractor will provide an analysis of the talent development pipeline to help inform the committee's work.</p>	12/1/2021 12/1/2022	\$375,000 (2022) \$375,000 (2023)

<b>Behavioral health workforce pilot program (HCA)</b> - provide incentive pay for individuals serving as clinical supervisors within community behavioral health agencies (HB 1504).		\$440,000 (2021) \$440,000 (2022)
<b>Behavioral health workforce grant program (HCA)</b> – for training support grants to mental health and substance use disorder providers. (HB 1504).		\$60,000 (2021) \$60,000 (2022)
<b>Behavioral Health Institute workforce development (HCA)</b> – includes developing a training for law enforcement officers focused on understanding substance use disorder and the recovery process and options and procedures for diversion from the criminal legal system; and, developing a curriculum for correctional officers and community corrections officers focused on motivational interviewing, recovery coaching, and trauma informed care.		\$1.8 million
<b>Behavioral Health Provider Relief Funding (HCA)</b> is provided one-time basis solely for the Authority to provide assistance payments to behavioral health providers that serve Medicaid and state-funded clients and have experienced revenue loss or increased expenses as a result of the COVID-19 pandemic.		\$31 million
<b>Behavioral Health Peer Recruitment (HCA)</b> - one-time funding solely for maintaining and increasing resources for peer support programs and for the authority to contract with an organization to assist with the recruitment of individuals to work as behavioral health peers with a specific focus on black, indigenous, and people of color communities.	12/1/2021 12/1/2022	\$1.762 Million
<b>Peer Crisis Response Training</b> Funding is provided for the authority to contract for the development of a specialized 40-hour crisis response training curriculum for behavioral health peer specialists and to conduct a minimum of one statewide training session during fiscal year 2022 and one statewide training session during fiscal year 2023		\$250,000
<b>Peer Emotional Support Network</b> Funding is provided for the authority to establish an emotional support network program for individuals employed as peer specialists. The authority must contract for these services which shall include, but not be limited to, facilitating support groups for peer specialists, support for the recovery journeys of the peer specialists themselves, and targeted support for the secondary trauma inherent in peer work.		\$500,000
<b>Provider Rate Increases for mental health and substance use disorder providers (HCA)</b>		\$97 million

### **Ballmer Gifts**

- \$24.8M for MHP graduate school scholarships
- \$3M for Bachelor's level behavioral health support specialists
- \$5.5M to BHI for behavioral health apprenticeships
- \$3M to BHI for crisis system redesign/988
- \$1.1M to WA Council for BH for clinical supervision
- \$400K to HCA to increase system uptake of peers
- \$500K in scholarships for ARNPs

For Approval-

**Health Care Authority**

- HCA is renewing the contract for Peer Path Finder services. This grant funds two (2) Peers to provide outreach and engagement to individuals who are homeless or at risk of becoming homeless. The annual funding for this contract is \$115,844. Lifeline Connections is the provider of these services in Skagit & Whatcom Counties.
- HCA is renewing the contract for Projects for Assistance in Transitions of Homelessness (PATH) services. This grant funds case management services to individuals who are homeless with the intent to enroll them in the PATH grant and connect them to community behavioral health services. The annual grant funding is \$219,026 with a 33% match provided by North Sound in the amount of \$73,008.75. Bridgeways is the provider of these services in Snohomish County. Bridgeways contract already includes the annual funding being approved in the motion below.

**Motion #XX-XX**

HCA-NS BH-ASO-K-5613 for the provision of Peer Path Finder Services in the North Sound Region. The term of this contract is September 30, 2021, through September 29, 2022.

HCA-NS BH-ASO-K-5620 for the provision of PATH Services in the North Sound Region. The term of this contract is October 1, 2021, through September 30, 2022.

**Lifeline Connections**

- Lifeline Connections provides Peer Path Finder services in Skagit & Whatcom counties. The funding is being passed through in the amount of \$115,844 for the period of October 1, 2021 through September 30 2022. This funding is a companion to the HARPS funding.
- Lifeline Connections also provides the HARPS team services and HARPS subsidies in Skagit & Whatcom counties. The next six-month HARPS funding is added to this amendment for the period of January 1, 2022, through June 30, 2022. North Sound received the annual HARPS funding in July 2021.

**Motion #XX-XX**

NS BH-ASO-Lifeline Connections-MHBG-20 Amendment 2 to provide the annual Peer Path Finder funding and the second half of the HARPS team and subsidy funding. The contract term is November 1, 2020, through June 30, 2022, with an automatic one-year renewal on July 1, 2022, based on continued compliance with the terms of the contract.

**Community Behavioral Health Rental Assistance (CBRA-Dept. of Commerce)**

These contracts are based on our CBRA plan which was presented at the October 14<sup>th</sup> Board of Directors meeting.

- Bridgeways will be managing a portion of the CBRA subsidies in Snohomish County. The funding is \$77,187 for the period of November 1, 2021, through June 30, 2022. Bridgeways is also receiving \$25,000 of Federal Block Grant funds for case management services.
- Catholic Community Services (CCS) will be managing the CBRA subsidies in Skagit County. The funding is \$88,524 for the period of November 1, 2021, through June 30, 2022.
- Compass Health will be managing CBRA subsidies in Island, San Juan and Snohomish Counties. The funding amount is \$90,182 in Island County, \$18,277 in San Juan County and \$694,685 for Snohomish County for the period of November 1, 2021, through June 30, 2022. Compass Health is also receiving \$100,000 (\$50,000 for Island and \$50,000 for San Juan) of Federal Block Grant funds for case management services.
- Lake Whatcom Center will be managing CBRA subsidies in Whatcom County. The funding amount is \$209,724 for the period of November 1, 2021, through June 30, 2022.

#### Motion#

NS BH-ASO-Bridgeways-CBRA ICN-21 to provide the CBRA rental assistance and case management services in Snohomish County. The contract term is November 1, 2021, through June 30, 2022, with an automatic one-year renewal on July 1, 2022, based on continued compliance with the terms of the contract.

NS BH-ASO-CCS-CBRA ICN-21 to provide the CBRA rental assistance in Skagit County. The contract term is November 1, 2021, through June 30, 2022, with an automatic one-year renewal on July 1, 2022, based on continued compliance with the terms of the contract.

NS BH-ASO-Compass Health-CBRA ICN-21 to provide the CBRA rental assistance in Island, San Juan and Snohomish Counties and case management services in Island and San Juan counties. The contract term is November 1, 2021, through June 30, 2022, with an automatic one-year renewal on July 1, 2022, based on continued compliance with the terms of the contract.

NS BH-ASO-Lake Whatcom-CBRA ICN-21 to provide the CBRA rental assistance in Whatcom County. The contract term is November 1, 2021, through June 30, 2022, with an automatic one-year renewal on July 1, 2022, based on continued compliance with the terms of the contract.



## 2021 Pre-Meetings, Site Visits, Conferences and Legislative Visits

Date	Pre-Meeting Topics	Note
January		
February		
March	Tribal Crisis Protocol Coordination	Lucy and Archelle - HCA
April	No Pre-Meeting	
May	Crisis Response and Stabilization - Compass Health	Amy Pereira
June	No Pre-Meeting	
July	<i>Summer Recess - No Pre-Meeting</i>	
August	SUD Regional Navigator Program	James Dixon
September	No Pre-Meeting	
October	Hospitalizations/WSH	JR Bigelow
November	Island County Opioid Outreach Program	
December	Holiday Potluck - TBD	
	PPW - Evergreen Recovery	
	Tribal 7.01	
	Tribal Behavioral Health	
	MAT - PDOA	
	MCO Board Representation Update	
	BH-ASO Crisis System Update	
	Board of Directors - Elected Officials	
	Snohomish County Opioid Outreach Program	
Date	Site Visits	Note
TBD	Smokey Point Behavioral Health	
TBD	Pioneer Center North	
TBD	Tri-County Crisis Stabilization Facility - Oak Harbor	
	Skagit Detox Center	
	Mukilteo Evaluation and Treatment Center - Remodel	
TBD	Brigid Collins Skagit or Whatcom Locations	
Date	Advocacy	Note
Date	Conferences	Location
June	WA Behavioral Healthcare Conference	
October	WA State Co-Occurring Disorders and Treatment Conference	



## NORTH SOUND BEHAVIORAL HEALTH ADVISORY BOARD

### 2021 LEGISLATIVE PRIORITIES

The North Sound Behavioral Health Advisory Board has solicited the input of persons in the North Sound region regarding behavioral health priorities to be addressed in the current legislative session. We appreciate the responsiveness of the Legislature to our input in previous years, as well as the additional investments the legislature has made in Crisis Services and Behavioral Health Facilities.

These investments have enabled the North Sound Behavioral Health Administrative Services Organization [BH-ASO] to expand funding for mobile crisis outreach and new Behavioral Health Facilities. For 2021, we urge continued investment in these services as well as other critical supports to stabilize the recovery of persons with behavioral health treatment needs.

#### 1. PROVIDE SUPPORT FOR SERVICES THAT SUPPORT THE SUCCESSFUL TRANSITION FROM CRISIS SERVICES AND INPATIENT TREATMENT.

- Provide flexible funding to support persons ready for discharge from the state hospitals or psychiatric inpatient facilities to pay for essential community-based services that would support their successful transition back to the community. These services would include additional supports for Adult Family Homes or Residential Treatment facilities, PACT or other intensive outpatient services, and transitional “step-down” facilities.
- Continue to support and expand “HARPS” housing vouchers and housing support services for low-income non-Medicaid persons and link these to new affordable housing projects providing behavioral health supportive services.

#### 2. CONTINUE TO PROVIDE OPERATING SUPPORT FOR NORTH SOUND REGION’S NEW BEHAVIORAL HEALTH FACILITIES

- Continue to provide operating support for the new behavioral health treatment facilities that the legislature funded in previous years.
- In 2021, the North Sound region will be bringing online new Triage, Withdrawal Management, SUD Residential Treatment, and Evaluation and Treatment facilities that were funded with a combination of legislative capital and local dollars. A total of 90 beds will soon be available. The new beds will both help fill the gap that will be created by the closure of Pioneer Center North as well as respond to the growing population and increased need for mental health treatment and substance use treatment – needs that have been exacerbated by the Opioid and COVID pandemics.

- In addition to providing operating support, state funding also allows these facilities to serve low-income persons not eligible for Medicaid. Historically, these persons represented about a third of the persons served.

### 3. ITA HEARING COURT COSTS

- Provide a separate legislative appropriation for Involuntary Treatment Act [ITA] Court Hearing costs and related expenses: this would include clear criteria for what the courts could charge for these services. Reimbursements to courts would be limited to the level of the legislative appropriation.
- This funding comes from the same state general fund appropriation that is used to pay for crisis services, Evaluation and Treatment services, inpatient hospitalization and other treatment services for low-income non-Medicaid persons. As the costs to courts, and the ASOs, for ITA court hearings have increased there has been proportionately less money to pay for treatment services.

### 4. RESIDENTIAL TREATMENT “TRANSITION” SERVICES

- Expand the availability of short-term “step-down” residential treatment services to facilitate the discharge of persons from the state hospitals or psychiatric inpatient facilities for both Medicaid and low-income non-Medicaid persons.
- Persons who are ready for discharge from psychiatric inpatient facilities often need a temporary placement back on the community while longer term placement options are being explored.