



## North Sound Behavioral Health Advisory Board

### Agenda

September 1, 2020

1:00 p.m. – 3:00 p.m.

**Call to Order and Introductions**

**Revisions to the Agenda**

**Approval of August Minutes**

**Announcements**

**Brief Comments or Questions from the Public**

**Executive/Finance Committee Report**

— **Approval of August Expenditures**

**Executive Director's Report**

**Old Business**

— **Visual Art and Poetry Contest**

**New Business**

— **MCO Representative Questions**

**Report from Advisory Board Members**

**Reminder of Next Meeting**

**Adjourn**



North Sound Behavioral Health Advisory Board

August 4, 2020

1:00 – 3:00

Meeting Minutes

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

**Members Present on Phone GoToMeeting Platform:**

- **Island County:** Brittany Wright, Chris Garden, Candy Trautman
- **San Juan:**
- **Skagit County:** Duncan West, Patti Bannister, Jere LaFollete
- **Snohomish County:** Marie Jubie, Fred Plappert, Pat O'Maley-Lanphear, Jack Eckrem
- **Whatcom County:** Arlene Feld, Kara Mitchell, Michael Massanari, Mark McDonald

**Members Excused:**

- **Island County:**
- **San Juan County:** Diana Porter
- **Skagit County:** Ron Coakley
- **Snohomish County:** Jennifer Yuen, Joan Bethel
- **Whatcom County:**

**Members Absent:**

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

**North Sound BH-ASO Staff:** Joe Valentine, James Dixon, Linda Crothers, Maria Arreola (Recording).

**Managed Care Organization Representation:**

- **United Healthcare:** Allan Fischer
- **Coordinated Care:** Naomi Herrera
- **Molina Healthcare:** Kelly Anderson
- **Community Health Plan of Washington [CHPW]:** Marci Bloomquist

**Guests:** Katelyn Morgan [Ombuds]

Approved by Advisory Board

### **Pre-Meeting Training**

Pre-Meeting trainings are on hold until further notification.

### **Call to order and Introductions**

The meeting was called to order by Chair O'Maley-Lanphear at 1:03 p.m.

### **Revisions to the Agenda**

No revisions mentioned

### **Approval of July Minutes**

Motion made for the approval of the July meeting minutes as written, motion seconded, all were in favor, motion carried.

### **Announcements**

- Arlene spoke of the Whatcom county incarceration reduction task force. The purpose is to work with the criminal justice system to safely reduce incarceration of individuals suffering from mental health and substance use disorder. The Crisis Stabilization facility expanding to serve a larger population. The facility serves individuals in need of withdrawal management and assists with access to behavioral health services.
- Pat spoke of the launch of Washington state Department of Health Corona Survey. This will help forecast the needs of the behavioral health, social and economic areas in Washington.

### **Brief Comments from the Public**

- None

### **Executive Directors Report**

Joe reported on

- Update on North Sound BH ASO Facility Closure
- Crisis Services
- Department of Health "Behavioral Health Impact Situation Report"
- First Annual Report of Number of Persons Served
- Trueblood Misdemeanor Diversions Funds
  - James Dixon, North Sound BH-ASO Quality Specialist who has expertise in the Substance Use Disorder area, spoke to the Board of funding for each county. James answered questions from members regarding diversion funds.
- Proposed Update of the North Sound BH-ASO Mission, Vision and Values to Reflect Community Racial Equity
- Annual Health Care Authority Review
- Startup Funding for the new Whatcom County "Crisis Stabilization Facility"
- COVID Weekly Dashboard

Approved by Advisory Board

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

The July Expenditures were reviewed and discussed. Chair O'Maley-Lanphear moved the motion for approval, motion seconded, all in favor, motion carried.

### **Old Business**

#### **North Sound BH-ASO Mission Vision and Values**

Members reviewed the revised Mission, Vision and Values. The revision reflects the awareness of systematic racism and impact on behavioral health. Motion was made to approve the revised North Sound BH-ASO Mission, Vision and Values and move to the Board of Directors for approval. Motion was seconded. All in favor. Motion carried.

#### **Visual Art and Poetry Contest Theme**

Suggested themes were brought back from the Ad Hoc committee meeting. Members determined the theme to be "This is my story of hope".

### **New Business**

#### **Linda Crothers, North Sound BH-ASO Quality Specialist – Needle Exchange Update**

Linda provided information from Island, Skagit, Snohomish and Whatcom counties. Whatcom county has significantly been impacted by the pandemic. Skagit county has had an increase in services. The national overdose 2019-2020 data was shared. Washington state numbers have significantly grown.

#### **Managed Care Organization Questions**

Managed Care Organization representatives will be asked to attend the September and October meetings to address drafted questions from the board. This opportunity will open communication of what was learned during the first year of integration and how the Board can continue to support the system. Drafted questions will be sent to members for feedback prior to the September meeting. Maria will schedule the MCO representatives for the September and October meetings.

#### **Advisory Board Bylaw revisions**

An Ad Hoc meeting was created to revise the Bylaws. The revisions are to reflect virtual meeting attendance and include social equity. Revised Bylaws will be brought back to the October meeting.

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

Fred spoke on the Compass Health website article regarding the Broadway campus redevelopment.

Marie gave her appreciation to Darren the North Sound BH-ASO staff who assisted with her laptop issues. She is now able to connect to online meetings and email.








#### **Reminder of Next Meeting**

Tuesday, September 1, 2020 via GoToMeeting Platform

#### **Adjourn**

Chair O'Maley-Lanphear adjourned the meeting at 2:56 p.m.

**North Sound Behavioral Health Administrative Services Organization  
Advisory Board Budget  
Aug-2020**

		All Conferences	Board Development	Advisory Board Expenses	Stakeholder Transportation	Legislative Session	Video Contest	Contest Support
	Total	Project # 1	Project # 2	Project # 3	Project # 4	Project # 5	Project # 6	Project # 7
Budget	<b>\$ 20,000.00</b>	\$ 4,500.00	\$ 1,000.00	\$ 10,200.00		\$ 1,200.00	\$ 3,100.00	\$ 700.00
Expense	(3,564.32)	(600.00)		(1,474.87)		(1,139.45)	(350.00)	
Under / (Over) Budget	\$ 16,435.68	\$ 3,900.00	\$ 1,000.00	\$ 8,725.13	\$ -	\$ 60.55	\$ 2,750.00	\$ 700.00
								
		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	All Expenses for Video Contest	Any Funding Received for the Video Contest

# North Sound BH ASO Executive Director's Report

## Advisory Board

September 1, 2020

### 1. POTENTIAL MOVE OF NORTH SOUND BH-ASO OFFICE

- We are considering the option of exercising the one-time early termination of our existing 10-year lease [this is the 5<sup>th</sup> year we've been in this building] and moving out of our current facility.
- We have located another building on College Way that would be smaller but easily accommodate our new staffing size. We would save over \$16,000 a month for an annual savings of over \$194,000.
- This move would have to be approved by our Board of Directors.

### 2. CRISIS SERVICES

- Our Crisis Services agencies continue to see the impact of the COVID pandemic on the need for crisis Services.
- Below are some of the key metrics pulled from our two regular Crisis Services reports:  
*Weekly Crisis Capacity Indicator Report* – through **August 22** [attached]  
*North Sound Crisis Metrics Report*” for **July** [attached]

Service	Metric	Source
Calls to the Crisis Line	Continue trend upward and are now at their highest point since the beginning of the year	Indicator Report – Page 2 Metrics Report-Page 4
Percentage of Abandoned Calls	In June and July, climbed above the target of 5% up to 9.1%	Metrics Report – Page 6
Crisis Services	Both Voluntary Crisis Services and ITA investigations have been trending upward since the beginning of the year	Indicator Report – page 2 Metrics Report-Page 4
Detentions and Commitments	Were higher in July than the average for the last 6 months	Metrics Report-Page 4
DCR staffing capacity	Remains stable with slight increase	Indicator Report-Page 3
Crisis Services Dispatches	Continue to be under the 2-hour target	Indicator Report – page 4 Metrics Report – page 4
Hospital placements	Providence Everett has born the brunt of hospital placements, but they were a little more evenly distributed in the last 2 weeks	Indicator Report – page 5
Use of Telehealth for ITA evaluations	Has climbed steadily over the last 7 weeks	Indicator Report -page 6

- As we reported last month, we are working with VOA to increase their capacity to handle the increased calls.
- With the additional funding the ASO provided they have hired and brought on 2 new staff.
- They are also close to selecting a vendor for a call management system that will allow them to have their staff work remotely.

### 3. DEPARTMENT OF HEALTH (DOH) STATEWIDE FORECAST OF THE BEHAVIORAL HEALTH IMPACT OF COVID-19

- DOH has issued its August update to its forecast of the projected behavioral health impacts from COVID-19 [attached]. Some issues to note include:
  - ✓ Certain populations, such as ethnic and racial minorities, disadvantaged groups, persons in lower socio-economic status, and essential workers, are experiencing disproportionately more significant behavioral health impacts.
  - ✓ Substance use will continue to be a problematic coping choice with the potential for further increases later this year.
  - ✓ Substance use issues will be an exacerbation of pre-existing problematic behavior.
  - ✓ In Washington, the highest risk of suicide will occur between October and December. Seasonal affective disorder can worsen mental health challenges at this time of year.

### 4. ANNUAL HEALTH CARE AUTHORITY REVIEW

- As reported last month, our Annual HCA Review is scheduled for **September 29**. The review is being conducted by the “Team Monitor” HCA review team.
- We’ve assembled an extensive list of documents to be submitted by **September 3**.
- Assembly of these documents required hundreds of hours by ASO staff.

### 5. MASK DISTRIBUTION

- The North Sound BH-ASO has agreed to be one of the distribution points for the 2.5 million masks acquired by the North Sound Accountable Community of Health.
- These are to be distributed to organizations throughout the North Sound region.
- About half are cloth, and half are KN 95.
- Please let Maria know if you’re interested in receiving some.





## **6. COVID WEEKLY DASHBOARD**

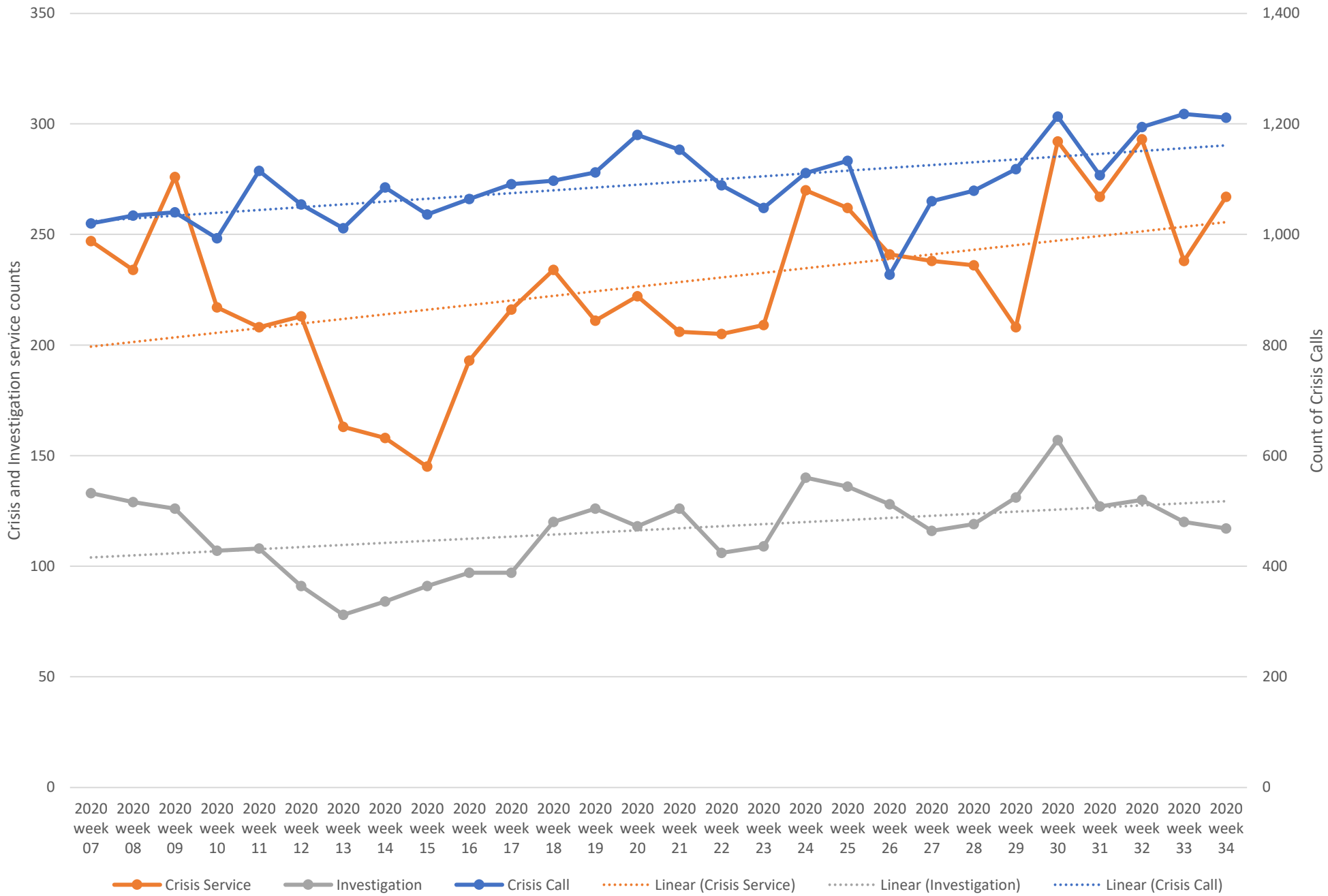
- Dennis Reagan, our Data Analyst, updates daily “COVID-19 Dashboards” that summarize COVID cases and death information for each of the 5 counties
- These are posted on our ASO website at: <https://nsbhaso.org/covid>



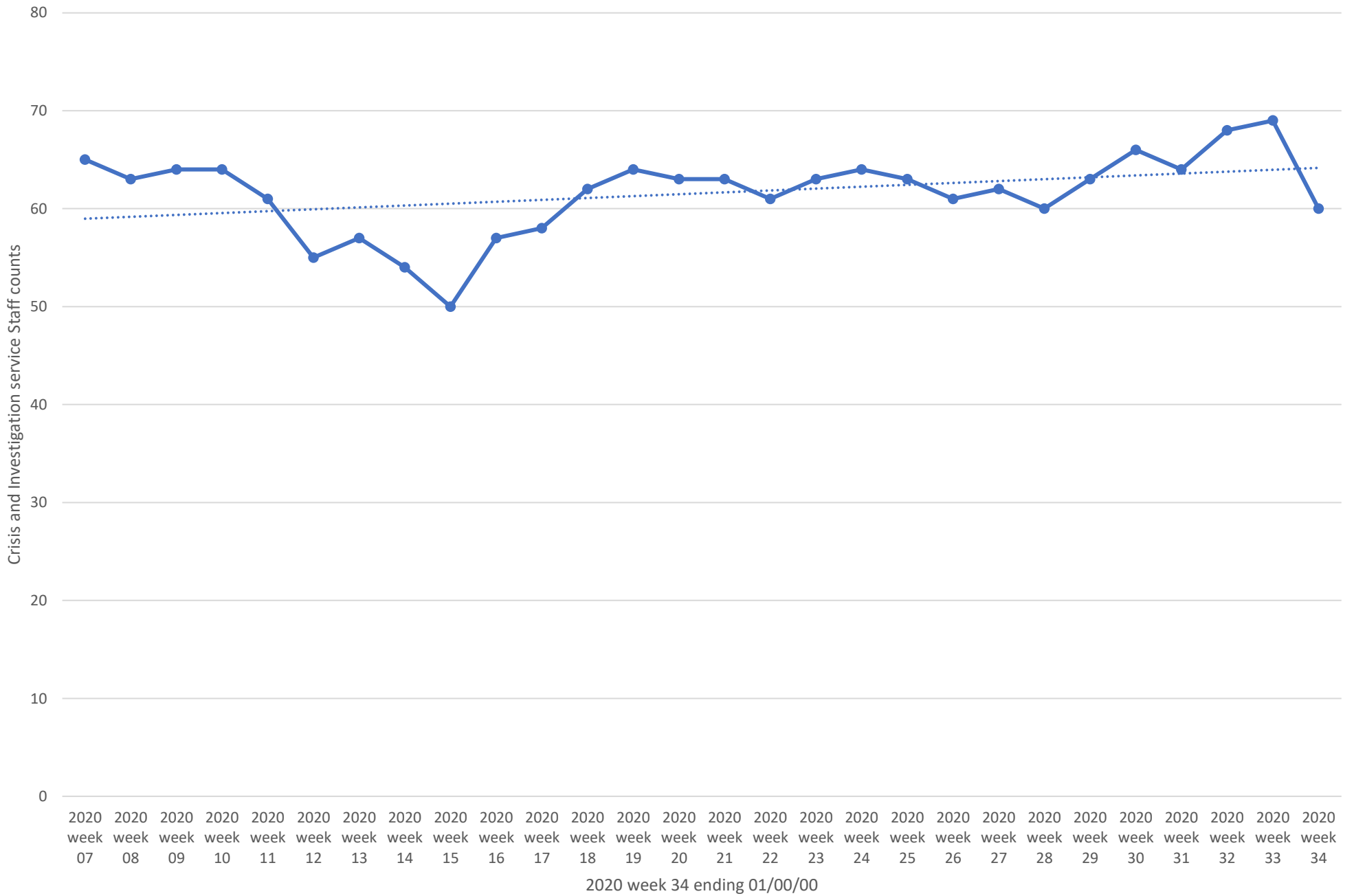
## Weekly Crisis Capacity Indicator Snapshot

Page 2	Crisis Data - dates 02/09/20 to 08/22/20
Page 3	Weekly Staff Count - Staff providing Crisis or Investigation services 02/09/20 to 08/22/20
Page 4	Average dispatch time for investigations from 02/09/20 to 08/22/20
Page 5	Hospital placement locations (Invol and Vol) - No adjustment has been made for timely data - recent weeks likely low
Page 6	Telehealth only, crisis and investigation services from 05/10/20 to 08/22/20
Page 7	Crisis Service Unit Percent - Crisis Service units divided by Crisis units + Investigation units
Page 8	New COVID-19 Cases Reported Weekly per 100,000 population - 03/30/20 to 08/24/20
Page 9	Place of Service -Crisis Services, percent of total by week
Page 10	Place of Service -Investigations, percent of total by week

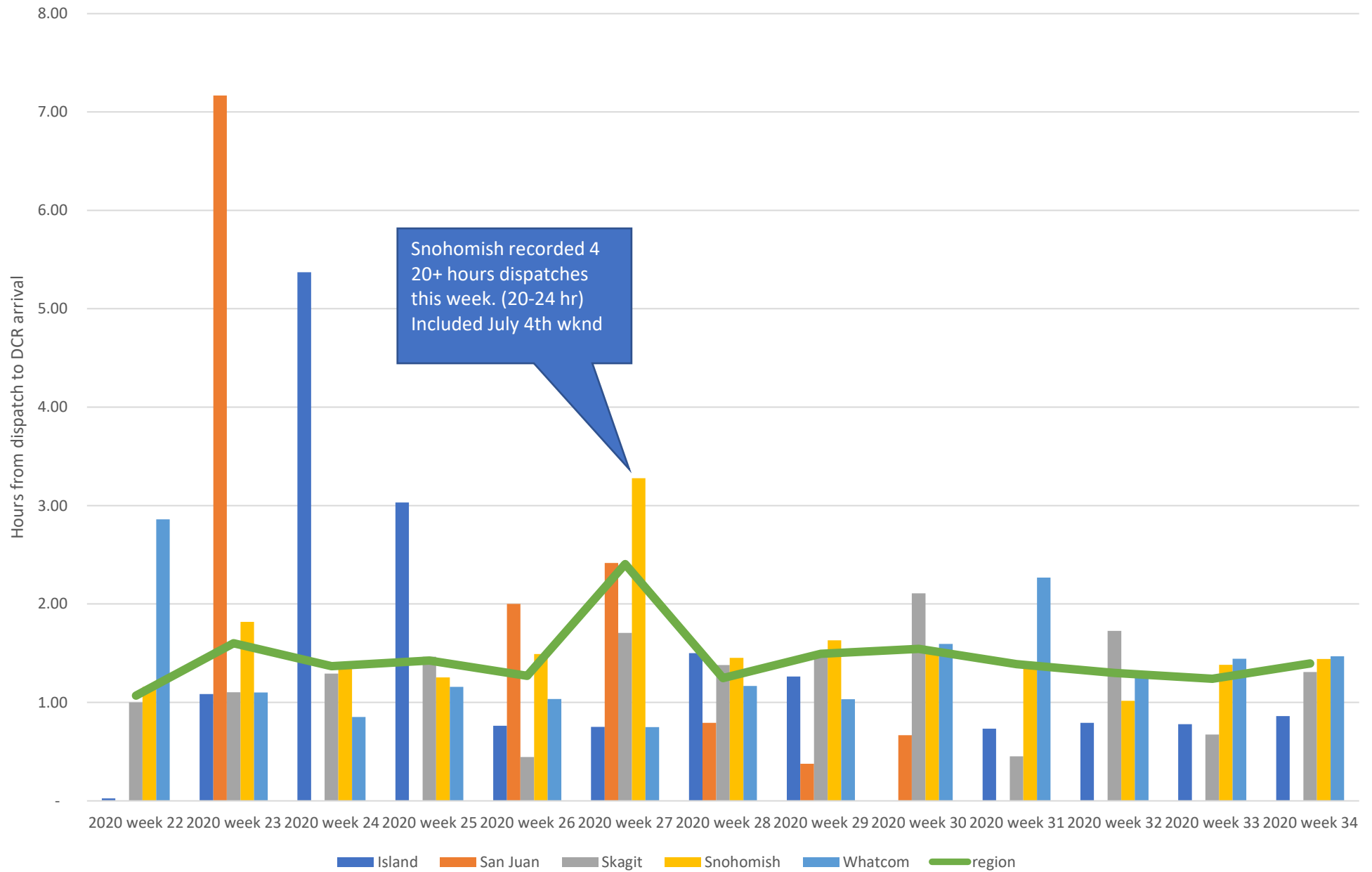
### Crisis Data - dates 02/09/20 to 08/22/20



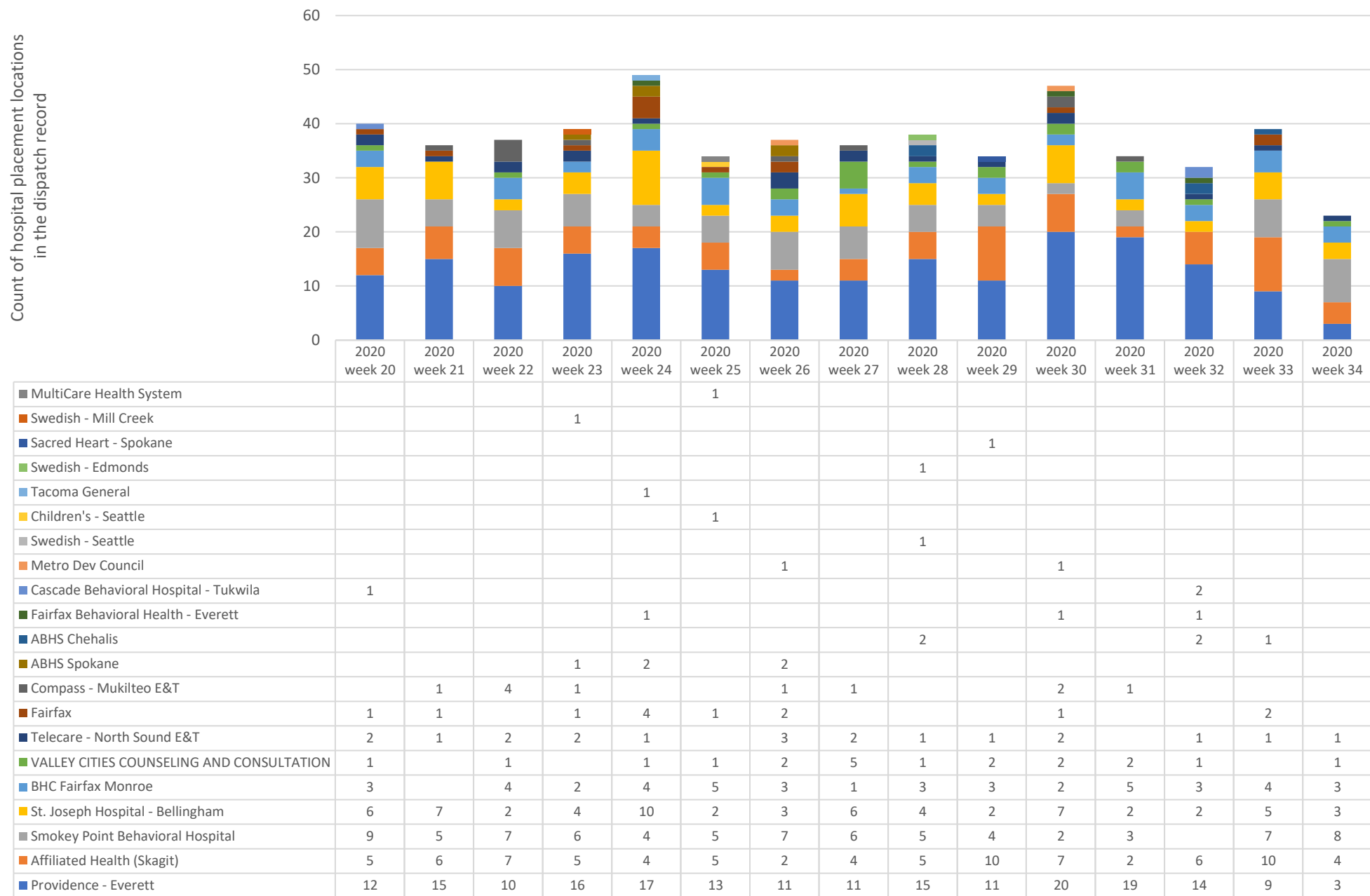
### Weekly Staff Count - Staff providing Crisis or Investigation services 02/09/20 to 08/22/20



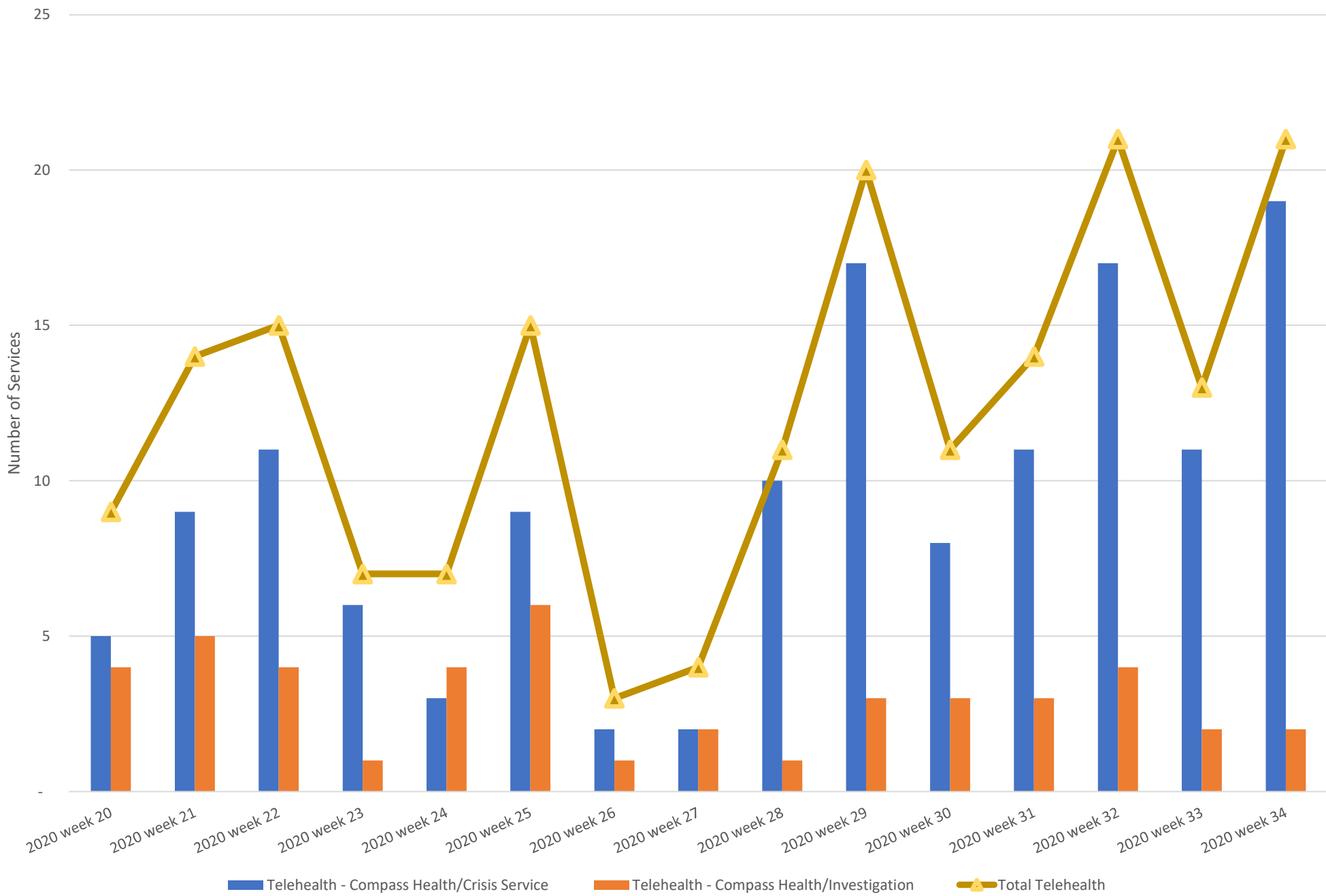
# Average dispatch time for investigations from 02/09/20 to 08/22/20



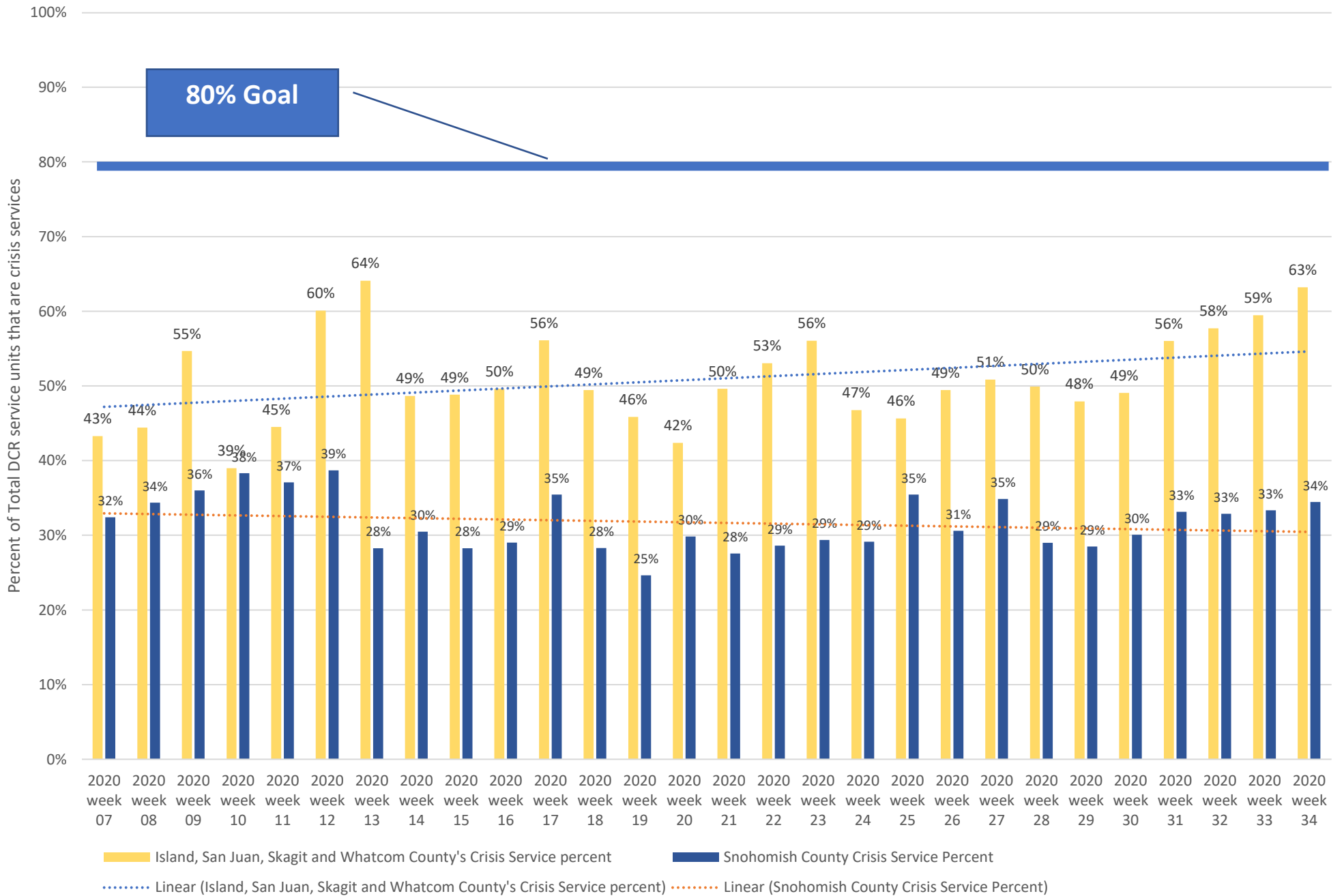
## Hospital placement locations (Invol and Vol) - No adjustment has been made for timely data - recent weeks likely low



### Telehealth only, crisis and investigation services from 05/10/20 to 08/22/20

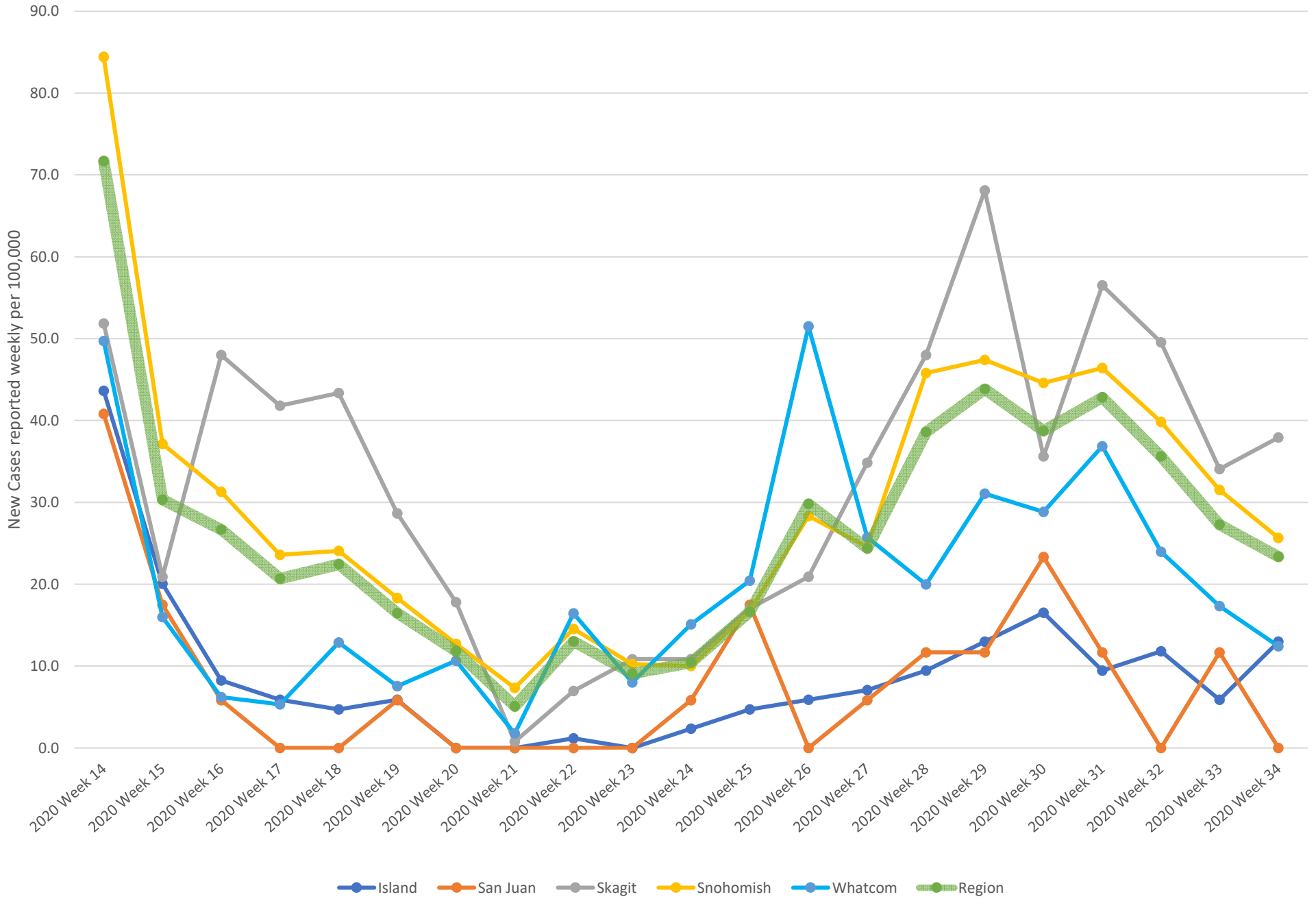


# Crisis Service Unit Percent - Crisis Service units divided by Crisis units + Investigation units

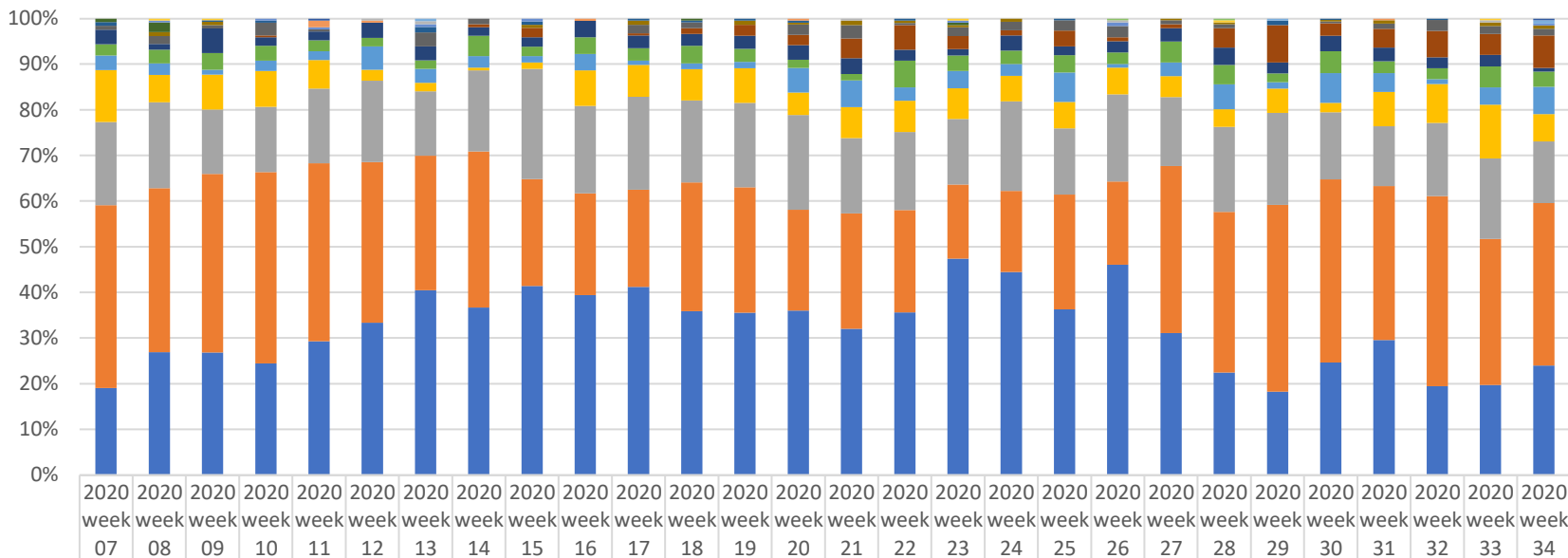




# New COVID-19 Cases Reported Weekly per 100,000 population - 03/30/20 to 08/24/20

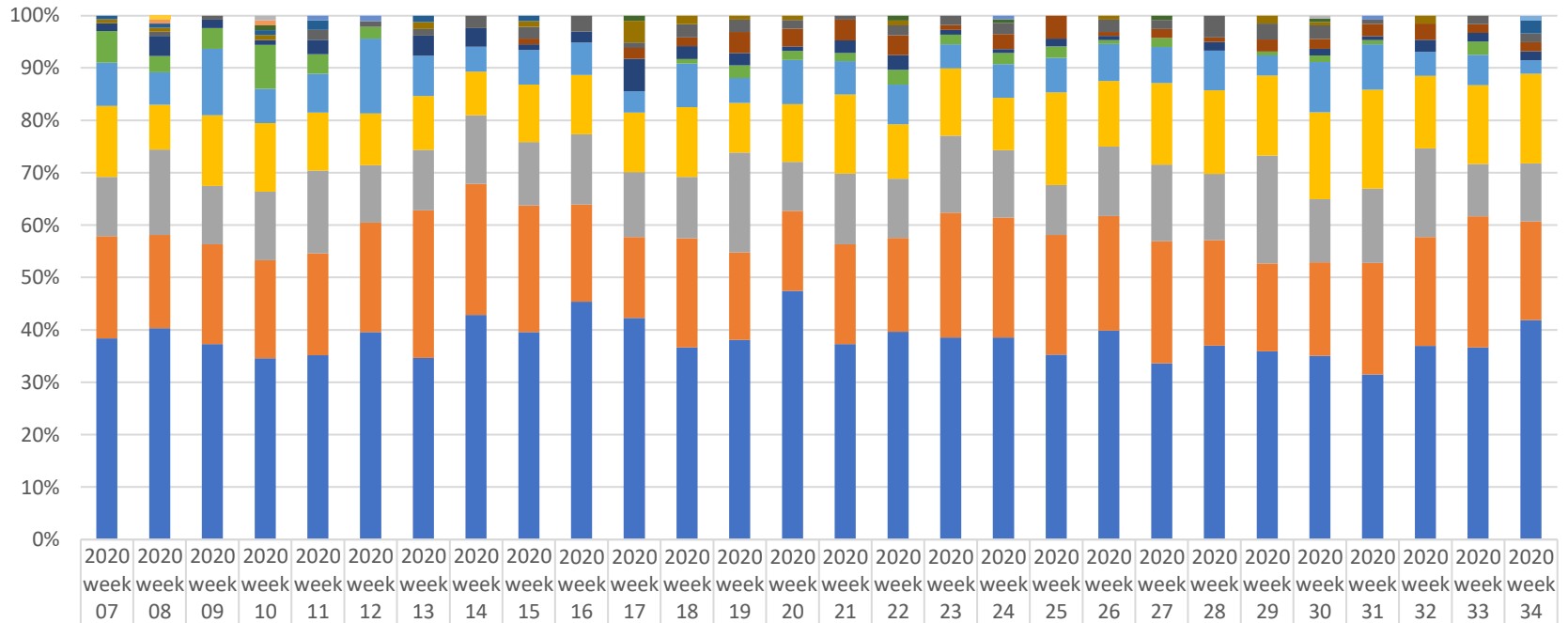


Place of Service -Crisis Services, percent of total by week



	2020 week 07	2020 week 08	2020 week 09	2020 week 10	2020 week 11	2020 week 12	2020 week 13	2020 week 14	2020 week 15	2020 week 16	2020 week 17	2020 week 18	2020 week 19	2020 week 20	2020 week 21	2020 week 22	2020 week 23	2020 week 24	2020 week 25	2020 week 26	2020 week 27	2020 week 28	2020 week 29	2020 week 30	2020 week 31	2020 week 32	2020 week 33	2020 week 34
Skilled Nursing Facility				1																								1
Psych. Fac.-Partial Hosp							1	1													1	1						
Custodial Care Facility								1															1					2
Nursing Facility		1	1														1						1				1	
On Campus - Outpatient Hospital						1	1								1						1						1	
Psych. Residential					3	1				1				1												1		
Community Mental Health Center		1		1	1		1		1								1				2							1
School	2	5										1					1											
Group Home	2		1	1			2		1		1	1	1	1	1	1				1				2	1		1	
Homeless Shelter		2	2						1		2		2	1	2	1	1	2			1	1		1	2		2	2
Assisted Living Facility	2	4	2	6	1		5	2			4	3		5	6	1	4	5	6	6	2	2		1	3	7	4	4
Telehealth				1				1	3		1	3	5	5	9	11	6	3	9	2	2	10	17	8	11	17	11	19
Prison - Correctional Facility	8	3	15	4	4	7	5	3	3	7	6	6	6	7	7	5	3	9	5	6	7	9	5	10	8	7	6	2
Inpatient Psychiatric Facility	6	7	10	7	5	4	3	7	3	7	6	9	6	4	3	12	7	8	10	6	11	10	4	14	7	7	11	9
Inpatient Hospital	8	6	3	5	4	11	5	4	2	7	2	3	3	12	12	6	8	7	17	2	7	13	3	19	11	3	9	16
Home	28	14	21	17	13	5	3	1	2	15	15	16	16	11	14	14	14	15	15	14	11	9	11	6	20	25	28	16
Emergency Room – Hospital	45	44	39	31	34	38	23	28	35	37	44	42	39	46	34	35	30	53	38	46	36	44	42	43	35	47	42	36
Office	99	84	108	91	81	75	48	54	34	43	46	66	58	49	52	46	34	48	66	44	87	83	85	117	90	122	76	95
Other Place of Service	47	63	74	53	61	71	66	58	60	76	89	84	75	80	66	73	99	120	95	111	74	53	38	72	79	57	47	64

Place of Service -Investigations, percent of total by week



	2020 week 07	2020 week 08	2020 week 09	2020 week 10	2020 week 11	2020 week 12	2020 week 13	2020 week 14	2020 week 15	2020 week 16	2020 week 17	2020 week 18	2020 week 19	2020 week 20	2020 week 21	2020 week 22	2020 week 23	2020 week 24	2020 week 25	2020 week 26	2020 week 27	2020 week 28	2020 week 29	2020 week 30	2020 week 31	2020 week 32	2020 week 33	2020 week 34	
Custodial Care Facility																													1
Residential SUD		1																											
Nursing Facility				1																				1					
School		1		1																									
Psych. Residential					1	1													1							1			
Homeless Shelter				1							1					1		1			1			1					
Community Mental Health Center	1	1		1	2		1		1																				3
Group Home	1	1		1		1		1	1		4	2	1	1		1				1			2	1		2			
Office		1	1		2	1	1	2	2	3	1	3	3	2	1	2	2	3		3	2	5	4	4	4	1	2	2	
Telehealth									1		2	2	5	4	5	4	1	4	6	1	2	1	3	3	3	4	2	2	
Assisted Living Facility	2	5	2	1	3		3	3	1	2	6	3	3	1	3	3	1	1	2	1		2		2	1	3	2	2	
Home	8	4	5	9	4	2						1	3	2	2	3	2	3	3	1	2		1	2	1		3		
Prison - Correctional Facility	11	8	16	7	8	13	6	4	6	6	4	10	6	10	8	8	5	9	9	9	8	9	5	15	11	6	7	3	
Inpatient Hospital	18	11	17	14	12	9	8	7	10	11	11	16	12	13	19	11	14	14	24	16	18	19	20	26	24	18	18	20	
Other Place of Service	15	21	14	14	17	10	9	11	11	13	12	14	24	11	17	12	16	18	13	17	17	15	27	19	18	22	12	13	
Inpatient Psychiatric Facility	26	23	24	20	21	19	22	21	22	18	15	25	21	18	24	19	26	32	31	28	27	24	22	28	27	27	30	22	
Emergency Room - Hospital	51	52	47	37	38	36	27	36	36	44	41	44	48	56	47	42	42	54	48	51	39	44	47	55	40	48	44	49	



# North Sound Crisis Metric and Reporting

**Call Center, DCR dispatch and Crisis Services**

Crisis Calls, Triage Calls, Dispatches, Investigations and Crisis Services

Prepared By Dennis Regan 8/21/2020

NORTH SOUND BEHAVIORAL HEALTH  
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# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

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# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

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# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

### Executive Summary

#### Early Warning Metric Dashboards

### North Sound Crisis Calls Period From Jan-20 To Jul-20

	crisis calls	Calls Answered	Calls LT 30 sec	Average answer time (sec)	Calls Abandoned
Average	2,352	2,231	2,058	0:00:17	121
Min	1,982	1,883	1,883	0:00:09	93
Max	2,666	2,461	2,353	0:00:25	211
St dev	232	206	146	0:00:06	41
Jul-20	2,664	2,422	1,993	0:00:27	242
Current Month	✔	✔	✔	✔	✘

### North Sound Investigations Period From Jan-20 To Jul-20

	invest.	detentions	MH invest.	SUD invest.	MH and SUD invest.	Referred from Law Enforcement	avg dispatch response time hrs.
Average	374	170	222	18	135	32	1.28
Min	317	133	186	11	105	25	1.08
Max	418	193	246	25	147	39	1.38
Standard dev.	35	19	19	5	15	5	0.09
Jul-20	418	185	246	25	147	38	1.31
Current Month	✔	✔	✔	✔	✔	✔	✔

	Detentions and Commitments	Less Restrictive Options MH	No Detention Due to Issues	Voluntary MH Treatment	Other
Average	185	4	4	110	71
Min	143	0	1	82	46
Max	209	11	7	122	87
Standard dev.	21	3	2	13	12
Jul-20	209	0	3	122	84
Current Month	✔	✔	✔	✔	✔

- ✔ Inside 2 stdev
- ⚠ at 2 stdev
- ✘ outside 2 stdev

#### Areas outside limits

##### Crisis Calls metrics outside limits

Number of calls abandoned has increased beyond 2 standard deviations of the average. Calls abandoned are up to 9.1% up from the previous high last month -7.9%, pushing the one year average to 5.1%. The contract performance goal is 5%. Calls answered in 30 seconds or less is down to 74.8% (90% goal) in June.

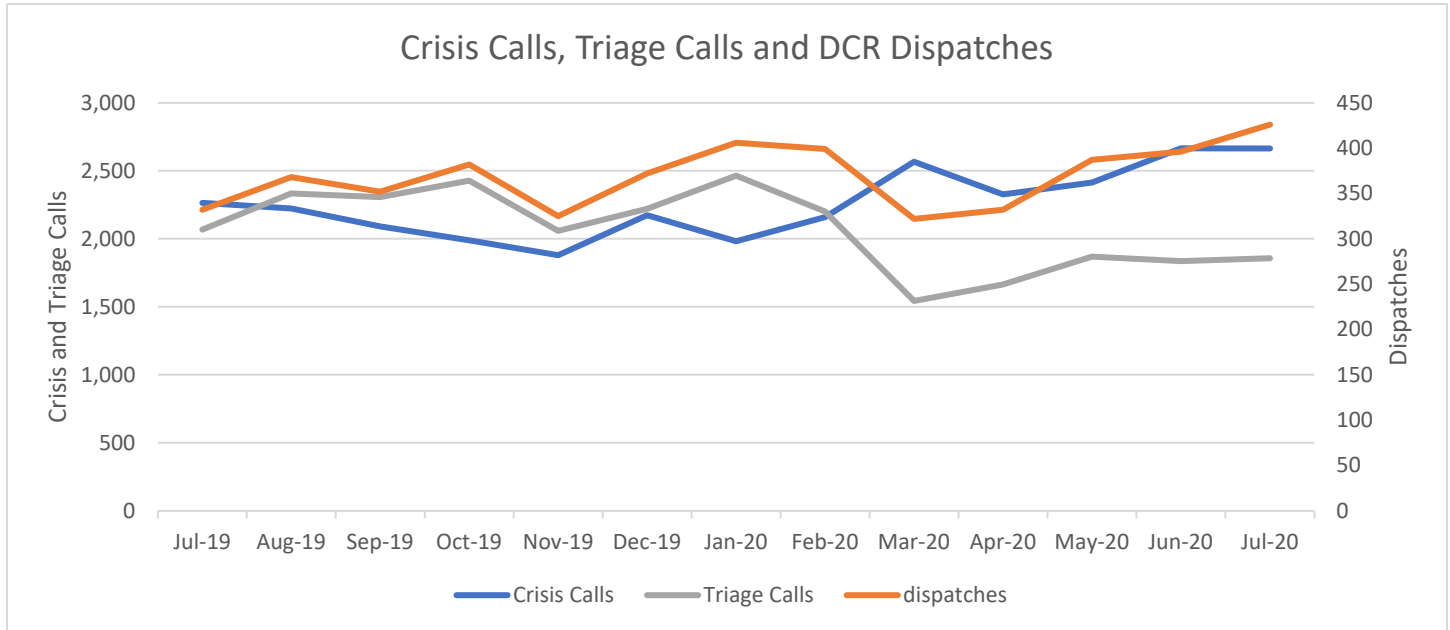
##### Investigation metrics outside limits

No measures outside limits.

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

### Crisis Calls, Triage Calls and DCR Dispatches



Crisis Calls: Inbound public calls or outbound/follow up calls related to care management activities.

Triage Calls: Primarily used as a Professional line for triaging and coordinating Mobile Crisis Outreaches Services.



# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

### Crisis Call Center

Volunteers of America is the contractor for crisis calls and triage calls.

The Crisis Call Center is not meeting the 90% goal for calls answered in less than 30 seconds for a one year average (89.0%). The current month is 74.8%.

The Crisis Call Center one year average is not meeting the 97% internal goal for calls not abandoned - the contract required 5.0% is being met . The current month is not meeting either goal (9.1%).

### Crisis Calls

#### Period From Jul-19 To Jul-20

	Avg Monthly calls	Avg % answered < 30	Avg % abandoned
Jul-20	2,664	74.8%	9.1%
Average	2,261	89.0%	4.0%
Min	1,880	74.8%	1.3%
Max	2,666	95.0%	9.1%

### Monthly Crisis Call metrics

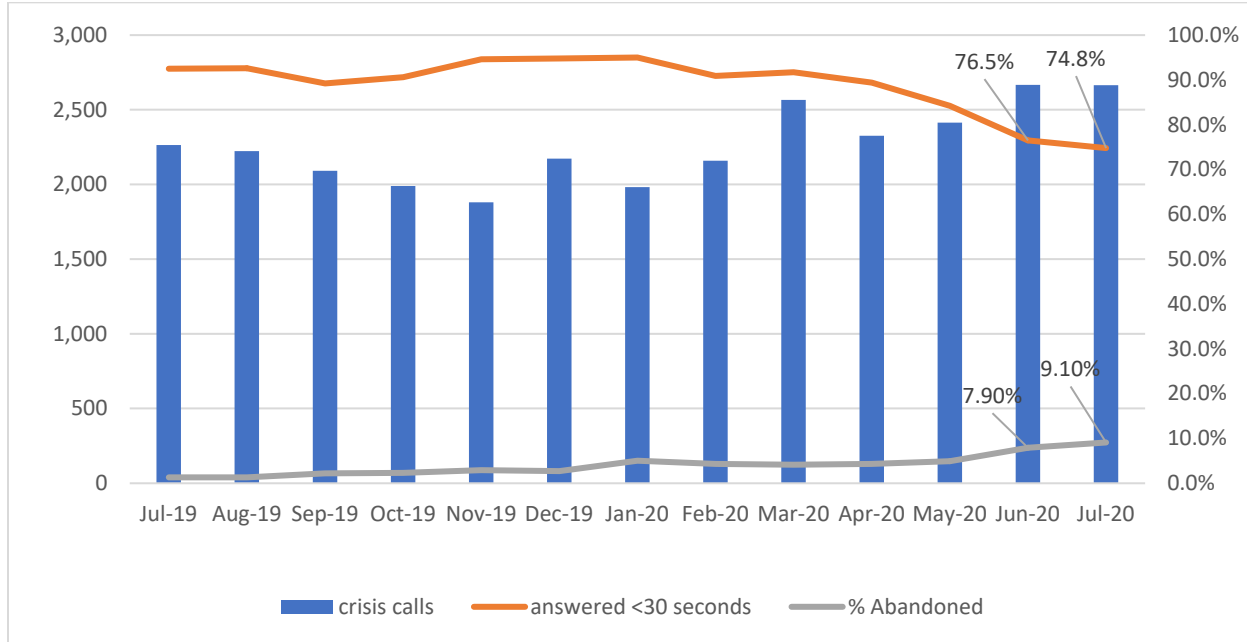
Month	crisis calls	answered <30 seconds	% Abandoned
Jul-19	2,264	92.5%	1.30%
Aug-19	2,223	92.6%	1.30%
Sep-19	2,091	89.2%	2.20%
Oct-19	1,989	90.6%	2.30%
Nov-19	1,880	94.6%	2.90%
Dec-19	2,173	94.8%	2.70%
Jan-20	1,982	95.0%	5.00%
Feb-20	2,159	90.9%	4.30%
Mar-20	2,566	91.7%	4.10%
Apr-20	2,326	89.4%	4.30%
May-20	2,414	84.2%	4.90%
Jun-20	2,666	76.5%	7.90%
Jul-20	2,664	74.8%	9.10%

The goal for calls answered in less than 30 seconds is 90%, the current month is not meeting the goal -74.8%. The contact goal for % Abandoned is less than 5%, the current month is not meeting that target.

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

### Crisis Calls monthly comparison



# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

### Triage Call Center

The Triage Call Center is tasked with providing immediate and direct contact with behavioral health professionals providing services in the region. It provides Crisis services workers and Designated Crisis Responders a direct phone link to coordinate services.

The Triage Call Center is not meeting the 90% goal for calls answered in less than 30 seconds. The one year average is 86.2% - less than the 90% goal. The most recent month is 81.9%, not meeting the goal.

The Triage Call Center is meeting the 95% goal for calls not abandoned in the current month. The one year average is 96.6%, meeting the 95% goal.

### Triage Calls

#### Period From Jul-19 To Jul-20

	Avg Monthly calls	Avg % answered < 30	Avg % abandoned
Jul-20	1,857	81.9%	4.3%
Average	2,065	86.2%	3.4%
Min	1,543	71.6%	1.5%
Max	2,465	93.0%	5.7%

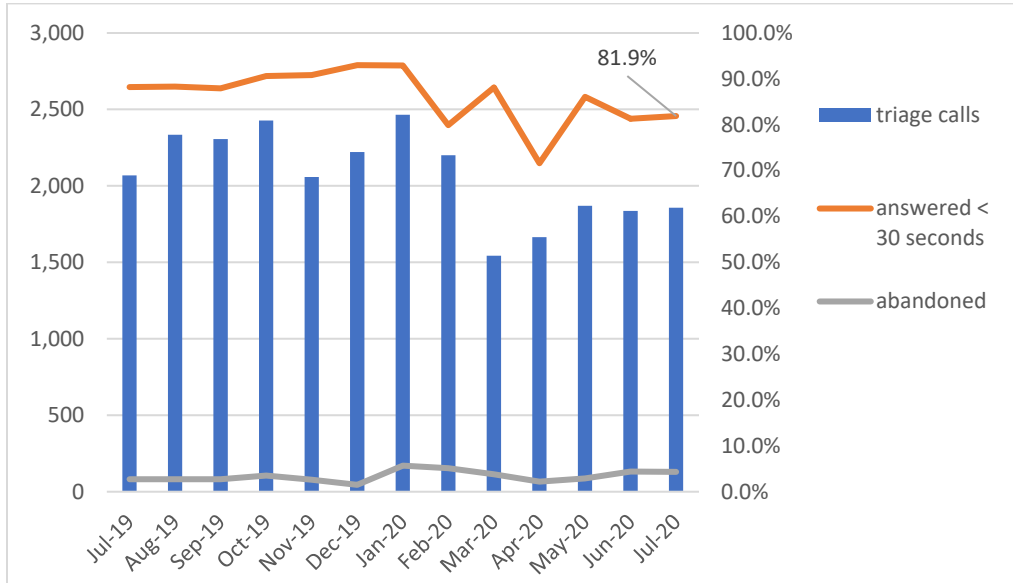
### Monthly Triage Call metrics

Month	triage calls	answered < 30 seconds	abandoned
Jul-19	2,068	88.2%	2.7%
Aug-19	2,334	88.3%	2.7%
Sep-19	2,306	87.9%	2.7%
Oct-19	2,427	90.6%	3.5%
Nov-19	2,058	90.8%	2.6%
Dec-19	2,221	93.0%	1.5%
Jan-20	2,465	92.9%	5.7%
Feb-20	2,200	79.9%	5.1%
Mar-20	1,543	88.1%	3.8%
Apr-20	1,664	71.6%	2.2%
May-20	1,869	86.1%	2.9%
Jun-20	1,836	81.3%	4.4%
Jul-20	1,857	81.9%	4.3%

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

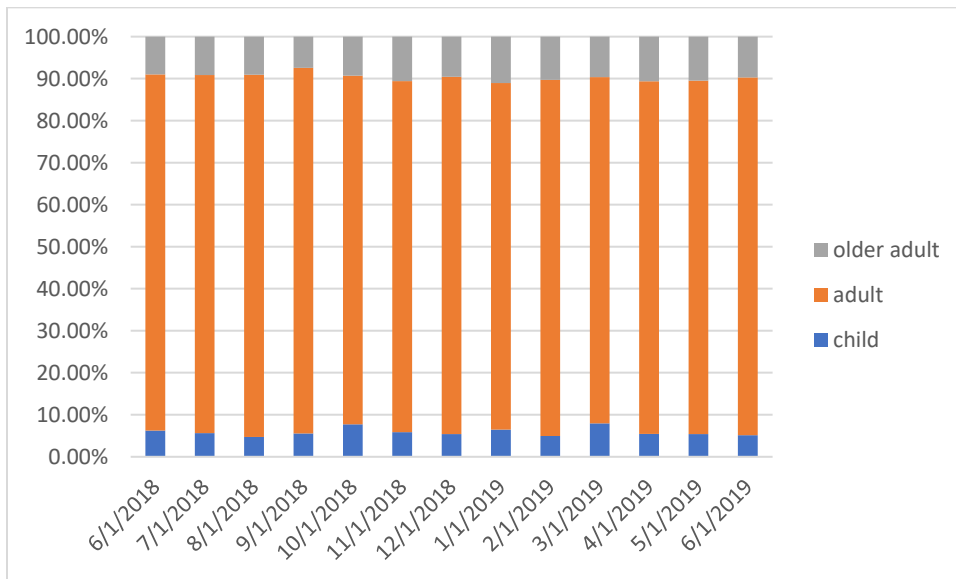
### Triage Calls monthly comparison



### Call Center Demographics

#### Age Group

For ages 0-17, 18-59 and 60+

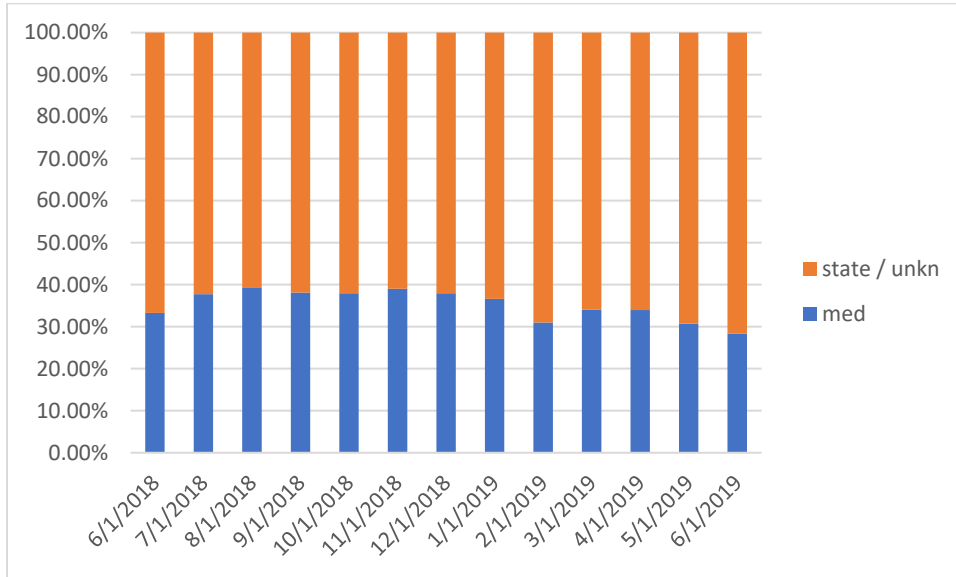


# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

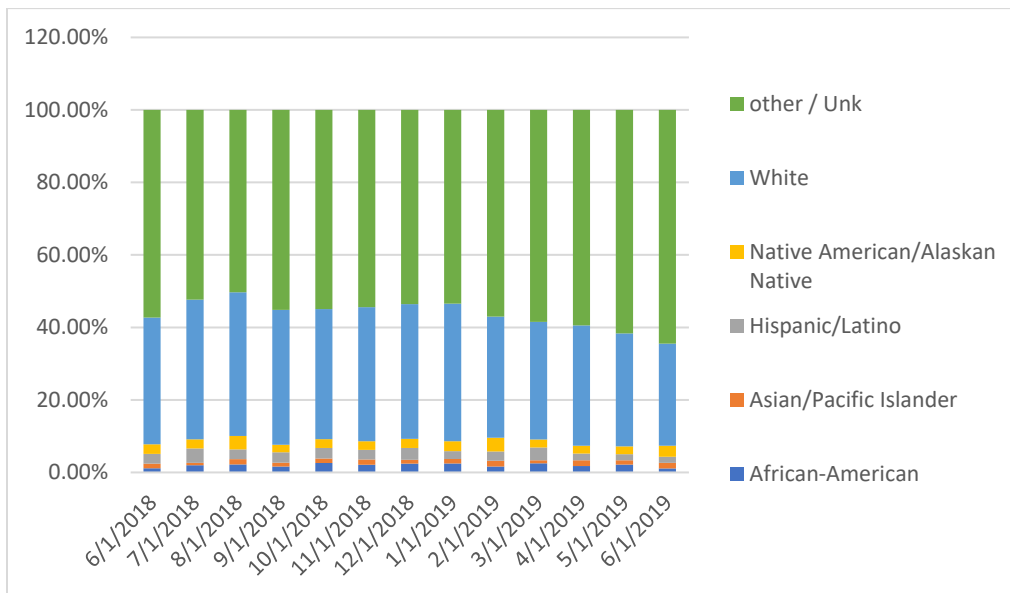
### Funding Source

Med = people in the North Sound BHO payment file.



### Ethnicity

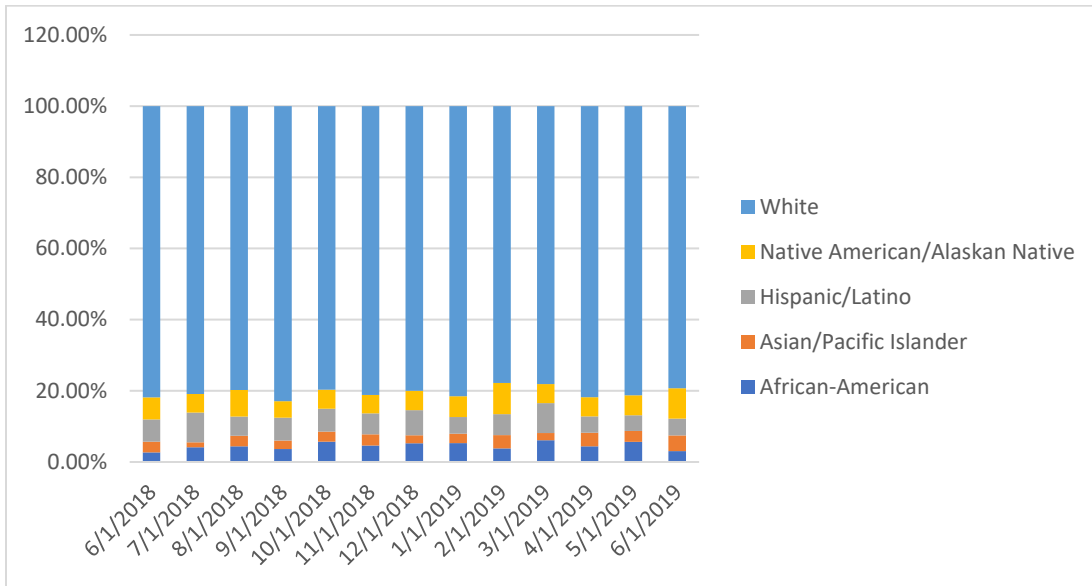
The largest group in ethnicity is other / unknown because often the ethnicity is not provided.



# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

Taking out the other / unknown group

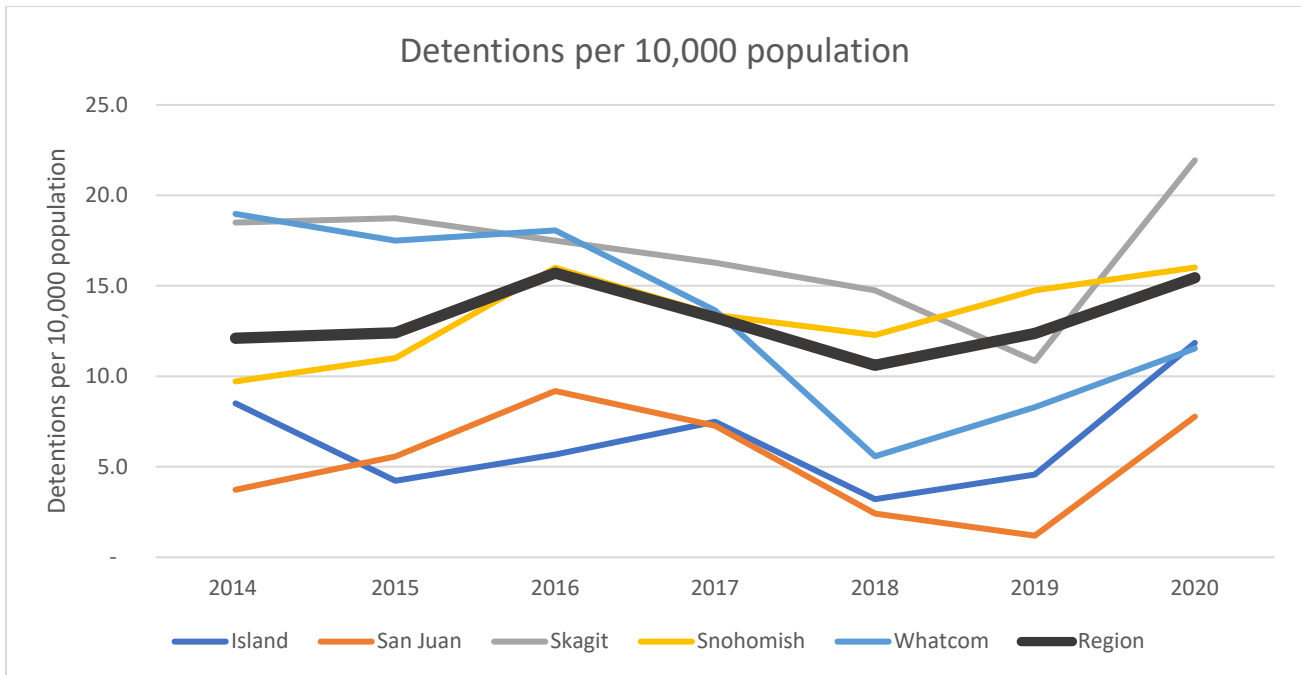
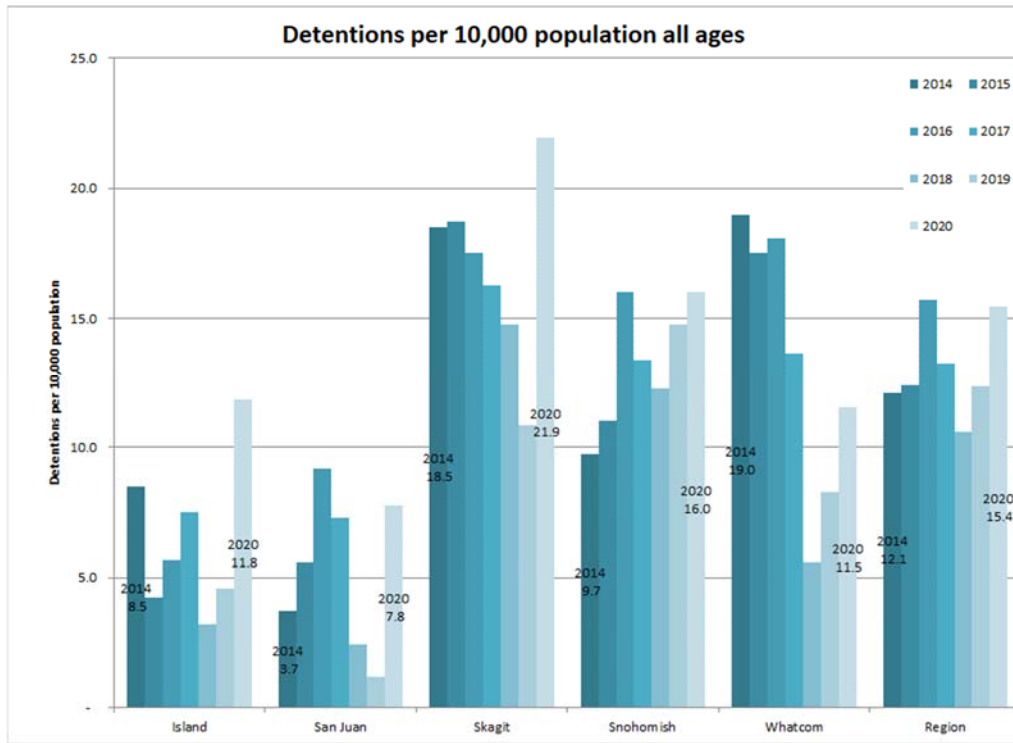


# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

### Dispatches, Detentions and Detention Rates

#### Per Capita Detention Rates



2020 is imputed based on current data available

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

### Detentions

72 hour  
detentions

as of 8/6/2020

detention count	year of detention							Proj.
County	2014	2015	2016	2017	2018	2019	2020	2020
Island	68	34	47	62	27	39	62	102
San Juan	6	9	15	12	4	2	8	13
Skagit	221	226	214	202	185	138	172	283
Snohomish	720	834	1,236	1,057	989	1,211	816	1,341
Whatcom	394	367	384	295	122	184	158	260
<b>Grand Total</b>	<b>1,409</b>	<b>1,470</b>	<b>1,896</b>	<b>1,628</b>	<b>1,327</b>	<b>1,574</b>	<b>1,216</b>	1,999

### Population

	2014	2015	2016	2017	2018	2019	2020
population	2014 est	2015 est	2016 est	2017 est	2018 trend	2019 trend	2020 trend
Island County	80,000	80,600	82,910	82,790	84,245	85,340	86,008
San Juan County	16,100	16,180	16,320	16,510	16,620	16,785	16,935
Skagit County	119,500	120,620	122,270	124,100	125,485	127,225	128,833
Snohomish County	741,000	757,600	772,860	789,400	805,330	821,230	837,465
Whatcom County	207,600	209,790	212,540	216,300	218,770	222,025	225,140
<b>Grand Total</b>	<b>1,164,200</b>	<b>1,184,790</b>	<b>1,206,900</b>	<b>1,229,100</b>	<b>1,250,450</b>	<b>1,272,605</b>	<b>1,294,380</b>

### Per Capita Detention rate

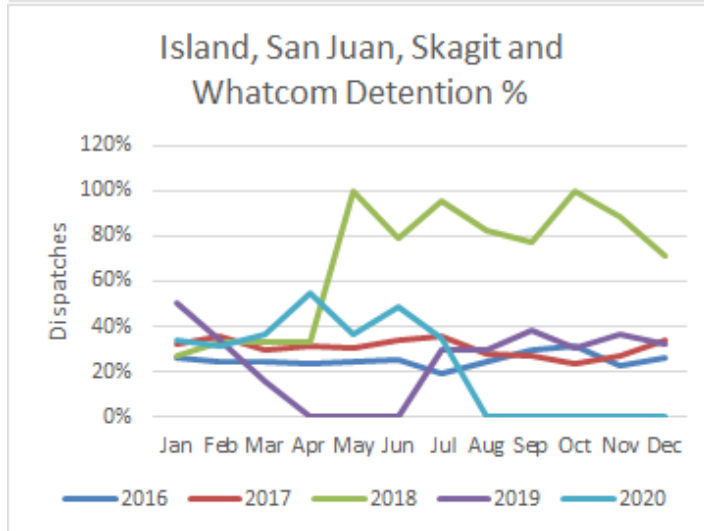
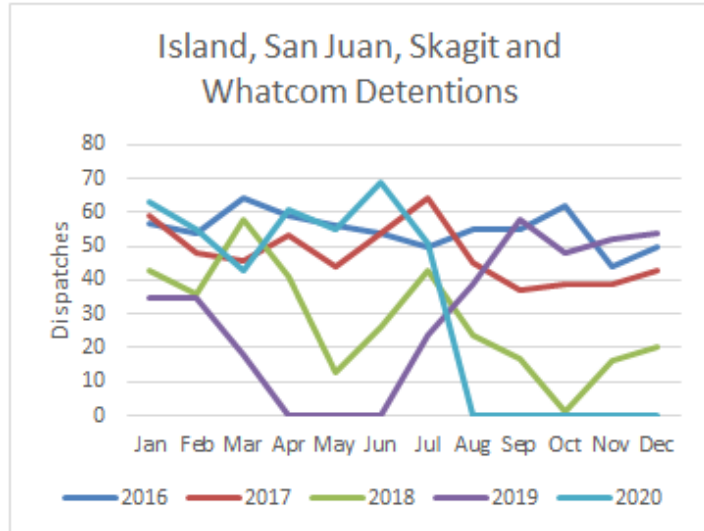
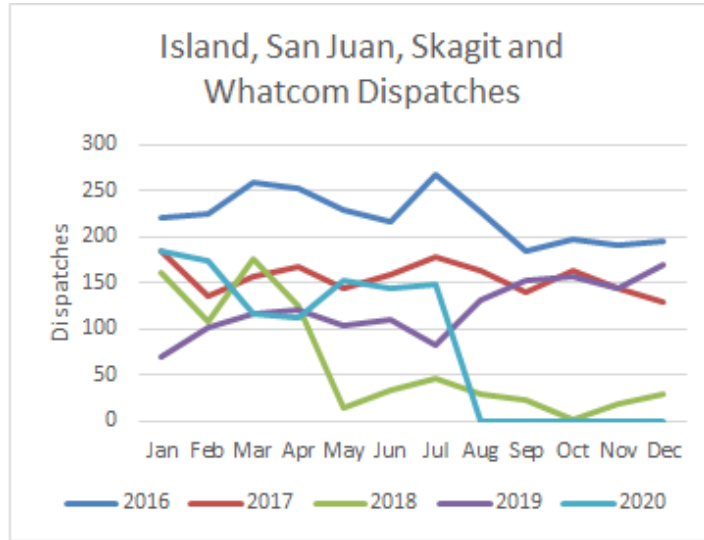
county	2014	2015	2016	2017	2018	2019	2020
Island	8.5	4.2	5.7	7.5	3.2	4.6	11.8
San Juan	3.7	5.6	9.2	7.3	2.4	1.2	7.8
Skagit	18.5	18.7	17.5	16.3	14.7	10.8	21.9
Snohomish	9.7	11.0	16.0	13.4	12.3	14.7	16.0
Whatcom	19.0	17.5	18.1	13.6	5.6	8.3	11.5
Region	12.1	12.4	15.7	13.2	10.6	12.4	15.4



# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

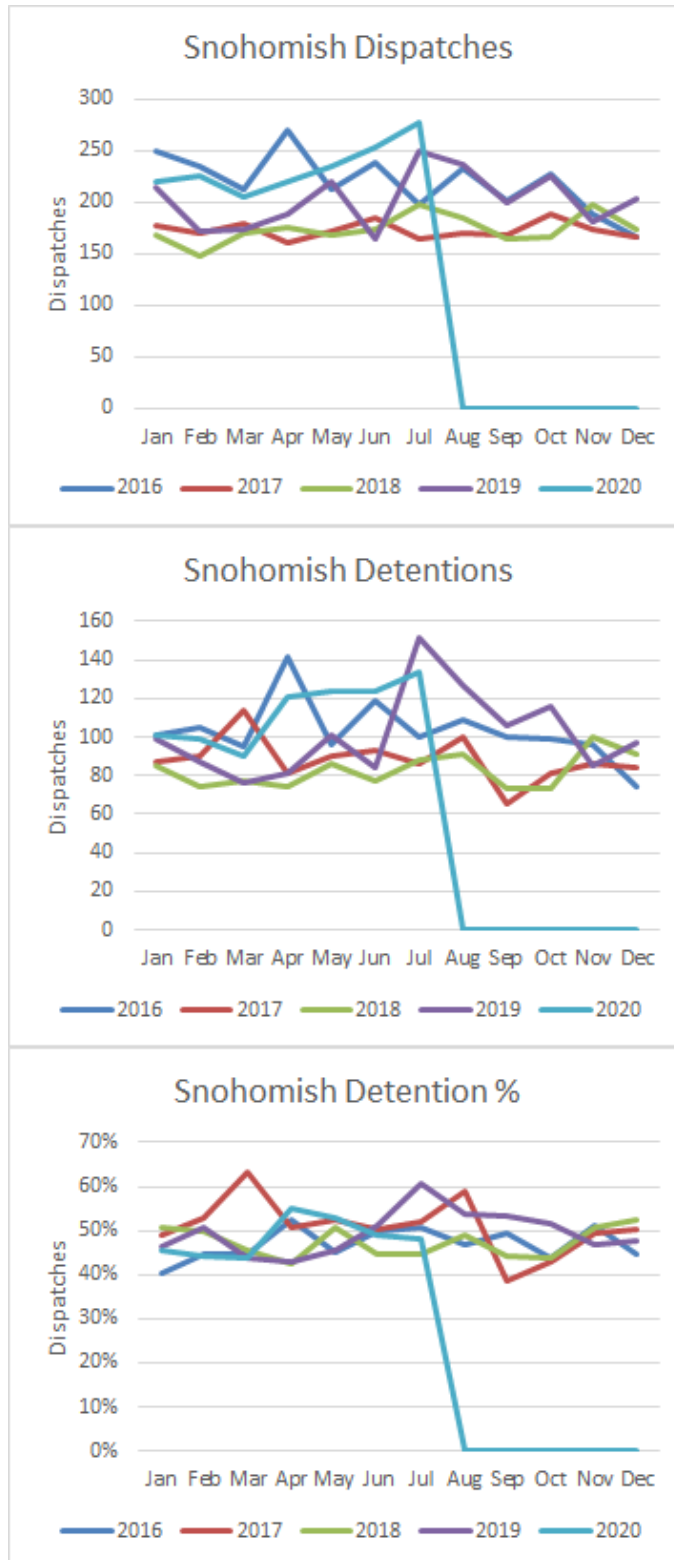
Island, San Juan, Skagit, and Whatcom



# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

Snohomish



# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

### Dispatch, Detention and Detention Rate Values

#### Count of Dispatches

Island, San Juan, Skagit and Whatcom

Count of dispatches month	Year				
	2016	2017	2018	2019	2020
Jan	220	185	161	70	185
Feb	225	135	108	102	174
Mar	259	157	175	117	117
Apr	253	168	124	121	112
May	230	145	13	104	152
Jun	216	158	33	109	143
Jul	267	179	45	82	148
Aug	228	163	29	132	7
Sep	184	139	22	153	
Oct	198	164	1	157	
Nov	191	145	18	143	
Dec	194	128	28	169	
<b>Grand Total</b>	<b>2,665</b>	<b>1,866</b>	<b>757</b>	<b>1,459</b>	<b>1,038</b>

Snohomish

Count of dispatches month	Year				
	2016	2017	2018	2019	2020
Jan	250	177	168	214	221
Feb	235	170	148	172	225
Mar	212	180	170	173	205
Apr	271	160	175	188	220
May	213	171	169	221	235
Jun	238	185	173	164	253
Jul	198	165	198	250	278
Aug	233	170	185	236	48
Sep	202	168	165	199	
Oct	227	189	167	225	
Nov	188	174	197	182	
Dec	166	167	173	203	
<b>Grand Total</b>	<b>2,633</b>	<b>2,076</b>	<b>2,088</b>	<b>2,427</b>	<b>1,685</b>

#### Count of Detentions

Island, San Juan, Skagit and Whatcom

Sum of detention month	Year				
	2016	2017	2018	2019	2020
Jan	57	59	43	35	63
Feb	54	48	36	35	55
Mar	64	46	58	18	43
Apr	59	53	41	0	61
May	56	44	13	0	55
Jun	54	54	26	0	69
Jul	50	64	43	24	51
Aug	55	45	24	39	3
Sep	55	37	17	58	
Oct	62	39	1	48	
Nov	44	39	16	52	
Dec	50	43	20	54	
<b>Grand Total</b>	<b>660</b>	<b>571</b>	<b>338</b>	<b>363</b>	<b>400</b>

Snohomish

Sum of detention month	Year				
	2016	2017	2018	2019	2020
Jan	101	87	85	99	101
Feb	105	90	74	87	99
Mar	95	114	77	76	90
Apr	142	81	74	81	121
May	96	90	86	101	124
Jun	119	93	77	84	124
Jul	100	86	88	152	134
Aug	109	100	91	127	23
Sep	100	65	73	106	
Oct	99	81	73	116	
Nov	96	86	100	85	
Dec	74	84	91	97	
<b>Grand Total</b>	<b>1236</b>	<b>1057</b>	<b>989</b>	<b>1211</b>	<b>816</b>

#### Detention Percents

Island, San Juan, Skagit and Whatcom

detentions / dispatches	2016	2017	2018	2019	2020
Jan	26%	32%	27%	50%	34%
Feb	24%	36%	33%	34%	32%
Mar	25%	29%	33%	15%	37%
Apr	23%	32%	33%	0%	54%
May	24%	30%	100%	0%	36%
Jun	25%	34%	79%	0%	48%
Jul	19%	36%	96%	29%	34%
Aug	24%	28%	83%	30%	43%
Sep	30%	27%	77%	38%	
Oct	31%	24%	100%	31%	
Nov	23%	27%	89%	36%	
Dec	26%	34%	71%	32%	
<b>Grand Total</b>	<b>25%</b>	<b>31%</b>	<b>45%</b>	<b>25%</b>	<b>39%</b>

Snohomish

detentions / dispatches	2016	2017	2018	2019	2020
Jan	40%	49%	51%	46%	46%
Feb	45%	53%	50%	51%	44%
Mar	45%	63%	45%	44%	44%
Apr	52%	51%	42%	43%	55%
May	45%	53%	51%	46%	53%
Jun	50%	50%	45%	51%	49%
Jul	51%	52%	44%	61%	48%
Aug	47%	59%	49%	54%	48%
Sep	50%	39%	44%	53%	
Oct	44%	43%	44%	52%	
Nov	51%	49%	51%	47%	
Dec	45%	50%	53%	48%	
<b>Grand Total</b>	<b>47%</b>	<b>51%</b>	<b>47%</b>	<b>50%</b>	<b>48%</b>

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

### Crisis System Overview

#### Unduplicated people served in crisis system

The table included below is an unduplicated count of people across all three crisis system services - crisis calls, investigations and crisis services. All totals are unduplicated totals of people across the subcategories.

Unduplicated People Agency/fund source/modality	Month								Undup. Total
	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	
Compass Health	229	225	227	167	166	191	207	218	1,244
Medicaid	122	126	118	98	84	95	108	118	651
Crisis Service	122	126	118	98	84	95	108	118	651
Non Medicaid	179	176	180	119	132	153	164	168	1,010
Crisis Service	87	86	95	64	74	84	93	95	562
Investigation	133	143	143	86	94	119	125	125	780
Snohomish County ICERS	340	392	342	318	288	292	316	332	1,945
Medicaid	138	176	132	133	134	137	149	171	867
Crisis Service	138	176	132	133	134	137	149	171	867
Non Medicaid	283	311	292	263	247	254	281	280	1,687
Crisis Service	180	194	193	162	135	131	154	146	1,075
Investigation	195	197	199	187	189	207	237	234	1,254
VOA Crisis Line	794	844	835	785	723	814	803	860	4,784
Medicaid	346	383	405	377	381	437	420	470	2,268
Crisis Call	346	383	405	377	381	437	420	470	2,268
Non Medicaid	455	469	439	414	353	385	388	395	2,695
Crisis Call	455	469	439	414	353	385	388	395	2,695
<b>Undup. Total</b>	<b>1,363</b>	<b>1,461</b>	<b>1,404</b>	<b>1,270</b>	<b>1,177</b>	<b>1,297</b>	<b>1,326</b>	<b>1,410</b>	<b>7,973</b>

#### Crisis Services in conjunction with investigation services

Documenting crisis services on the same day before and after the investigation is important to encourage and quantify the diversion and recovery work being done around investigations. Follow up services do the same for crisis services occurring the next two days. It's important to note this is a new measure and no goals or expectations have been set for it yet. All measures in this section are 7/1/2019- ytd. Please note that all of this information is service, not units of service. A service can have multiple units depending on length of the service.

#### Same Day and Follow on Summary

	Percent of investigations with <b>Same Day</b> service
<b>Compass Health</b>	82.7%
<b>Snohomish County ICERS</b>	63.5%

Percent of investigations with <b>Follow-Up</b> service - not same day
20.0%
19.4%

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

### Same Day Crisis Services by County

#### Investigation Services not units Beginning 7/1/2019

services agency	County Island	San Juan	Skagit	Snohomish	Whatcom	Grand Total
Compass Health	213	37	616		1,066	1,932
No Same Day	26	5	224		79	334
Same day Crisis Service	187	32	392		987	1,598
Snohomish County ICRS				3,820		3,820
No Same Day				1,396		1,396
Same day Crisis Service				2,424		2,424

#### Investigation Services not units Beginning 7/1/2019

services agency	County Island	San Juan	Skagit	Snohomish	Whatcom	Grand Total
Compass Health	100.00%	100.00%	100.00%	0.00%	100.00%	33.59%
Same day Crisis Service	87.79%	86.49%	63.64%		92.59%	82.71%
No Same Day	12.21%	13.51%	36.36%		7.41%	17.29%
Snohomish County ICRS	0.00%	0.00%	0.00%	100.00%	0.00%	66.41%
Same day Crisis Service				63.46%		63.46%
No Same Day				36.54%		36.54%

### Follow On Crisis Services by County

#### Investigation Services not units Beginning 7/1/2019

services agency	County Island	San Juan	Skagit	Snohomish	Whatcom	Grand Total
Compass Health	213	37	616		1,066	1,932
Follow up - not same day	42	9	73		263	387
No Follow-up	171	28	543		803	1,545
Snohomish County ICRS				3,820		3,820
Follow up - not same day				742		742
No Follow-up				3,078		3,078

#### Investigation Services not units Beginning 7/1/2019

services agency	County Island	San Juan	Skagit	Snohomish	Whatcom	Grand Total
Compass Health	100.00%	100.00%	100.00%	0.00%	100.00%	33.59%
Follow up - not same day	19.72%	24.32%	11.85%		24.67%	20.03%
No Follow-up	80.28%	75.68%	88.15%		75.33%	79.97%
Snohomish County ICRS	0.00%	0.00%	0.00%	100.00%	0.00%	66.41%

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

Investigation Services not units Beginning 7/1/2019

services agency	County Island	San Juan	Skagit	Snohomish	Whatcom	Grand Total
Follow up - not same day				19.42%		19.42%
No Follow-up				80.58%		80.58%

### North Sound Crisis Dispatch Metrics

The North Sound Investigation data is captured in the North Sound ASO data system through the ICRS contact sheet data submitted by Designated Crisis Responders (DCR's).

Current Investigation Data Used

*Total Investigations/detentions/response and LE referral*

month	invest.	detentions	avg dispatch response time hrs.	Referred from Law Enforcement	detention percent
Jan-20	394	164	1.3	36	42%
Feb-20	392	154	1.4	39	39%
Mar-20	317	133	1.3	31	42%
Apr-20	327	182	1.3	27	56%
May-20	377	179	1.1	30	47%
Jun-20	395	193	1.3	25	49%
Jul-20	418	185	1.3	38	44%
prior 6 mo. avg.	374	170	1.3	32	46%
min	317	133	1.1	25	39%
max	418	193	1.4	39	56%

### Investigation Reasons

month	MH invest.	SUD invest.	MH and SUD invest.	Percent SUD related
Jan-20	231	17	146	41%
Feb-20	238	16	138	39%
Mar-20	186	12	119	41%
Apr-20	211	11	105	35%
May-20	212	23	142	44%
Jun-20	227	23	145	43%
Jul-20	246	25	147	41%
prior 6 mo. avg.	222	18	135	41%
min	186	11	105	35%
max	246	25	147	44%

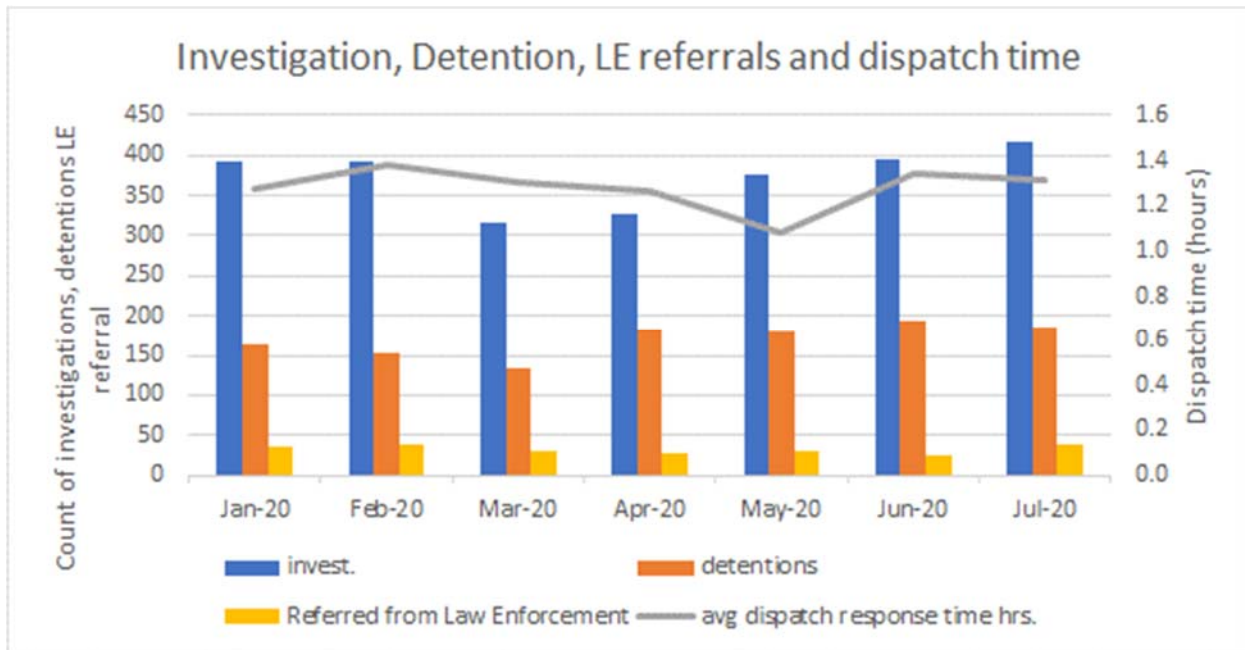
# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

### Investigation Outcomes

month	Detentions and Commitments	Voluntary MH Treatment	Less Restrictive Options MH	No Detention Due to Issues	Other
Jan-20	189	122	3	6	74
Feb-20	169	118	11	7	87
Mar-20	143	101	3	1	69
Apr-20	193	82	4	2	46
May-20	189	107	3	7	71
Jun-20	206	115	1	5	68
Jul-20	209	122	0	3	84
prior 6 mo. avg.	185	110	4	4	71
min	143	82	0	1	46
max	209	122	11	7	87

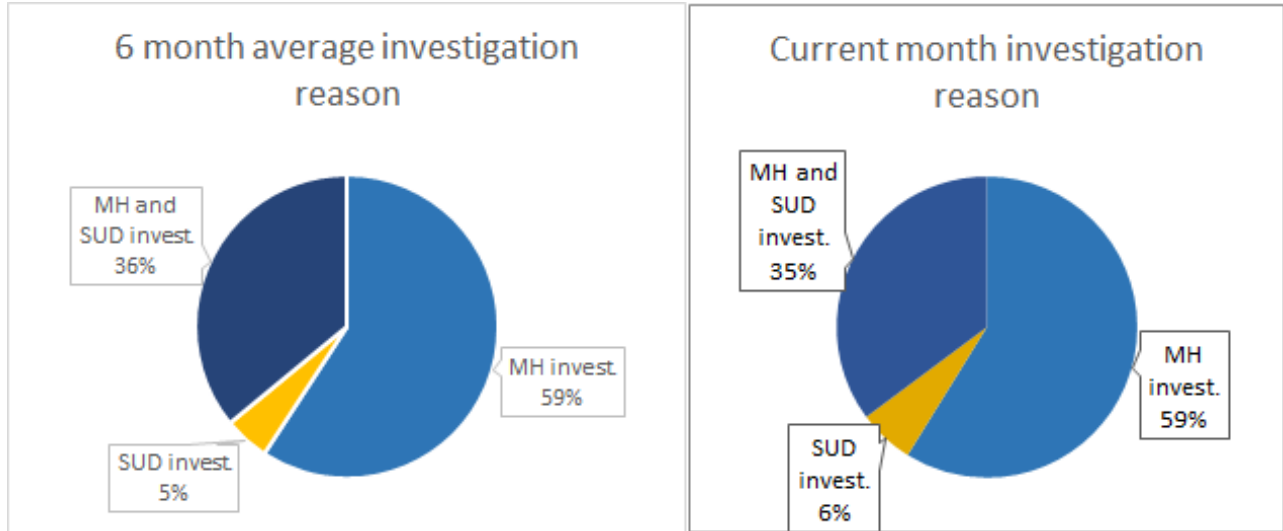
North Sound Investigation Metrics over Time graph



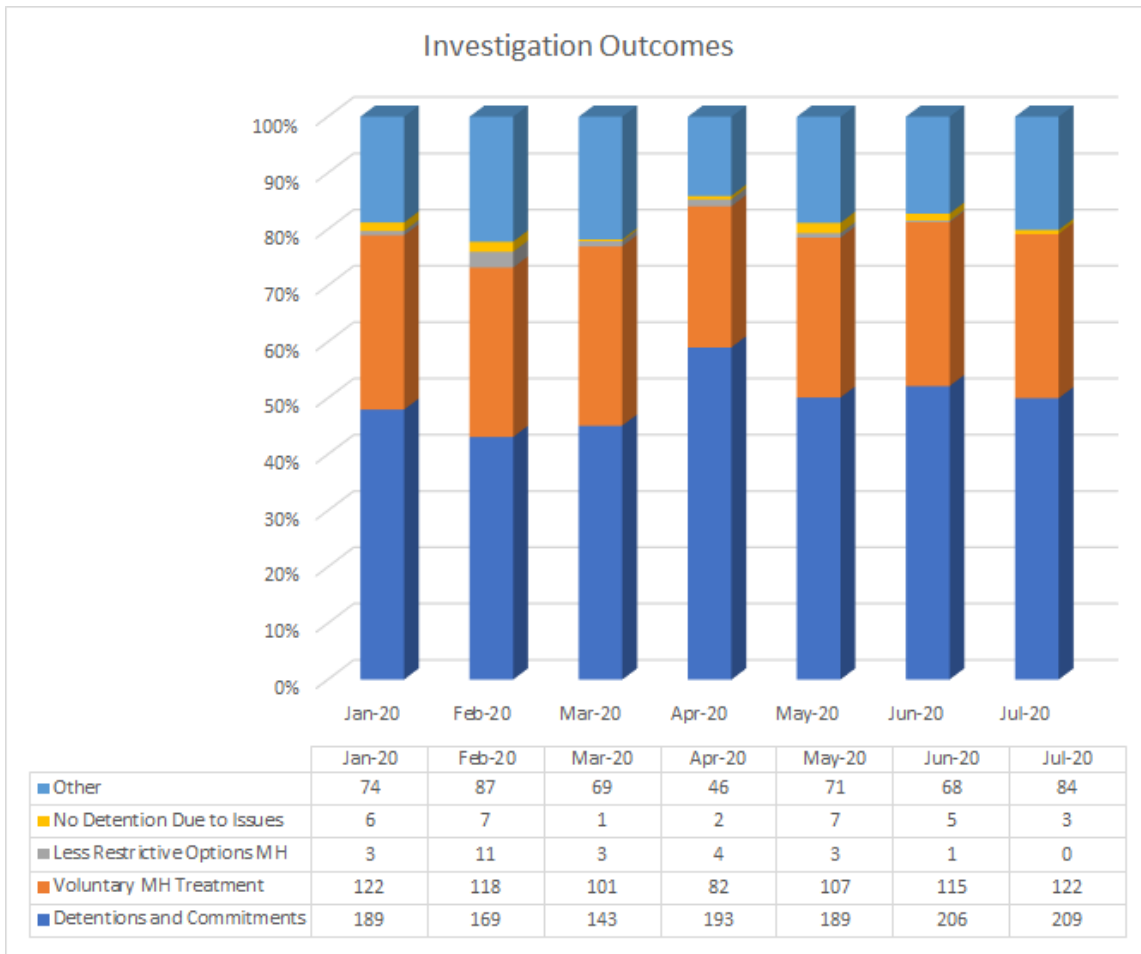
# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

Investigation Reason Percentages Pie Charts



Investigation Outcomes over time percent of total chart





# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

### Investigation Outcome Grouping

Investigation outcomes are grouped to duplicate the investigation outcomes published by the state. This includes the 6 months prior to the previous month and the current previous month – 7 months total.

State Group	Investigation Outcome	all invest. in period
Detentions and Commitments	Detention (72 hours as identified under RCW 71.05).	1,158
Detentions and Commitments	Detention to Secure Detox facility (72 hours as identified under 71.05)	30
Detentions and Commitments	Returned to inpatient facility/filed revocation petition.	90
Detentions and Commitments	Non-emergent detention petition filed	20
Less Restrictive Options MH	Filed petition - recommending LRA extension.	25
No Detention Due to Issues	No detention - E&T provisional acceptance did not occur within statutory timeframes	8
No Detention Due to Issues	No detention - Unresolved medical issues	23
Voluntary MH Treatment	Referred to crisis triage	14
Voluntary MH Treatment	Referred to voluntary inpatient mental health services.	85
Voluntary MH Treatment	Referred to voluntary outpatient mental health services.	643
Voluntary MH Treatment	Referred to chemical dependency intensive outpatient program	16
Voluntary MH Treatment	Referred to acute detox	4
Voluntary MH Treatment	Referred to chemical dependency residential program	3
Voluntary MH Treatment	Referred to sub acute detox	1
Voluntary MH Treatment	Referred to chemical dependency inpatient program	1
Other	Referred to non-mental health community resources.	35
Other	Other	441
Other	Did not require MH or CD services	23
<b>Grand Total</b>	<b>Total</b>	<b>2,620</b>

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

### People with Dispatches and Detain history

#### Detained prior 6 months

unduplicated people	DCR Dispatches to people that were:		Grand Total	% of dispatches to people detained in prior 6 months	
	dispatch month	Detained in last 6 months			not detained in last 6 months
2019		320	2,690	2,755	12%
Jan		35	207	236	15%
Feb		24	210	232	10%
Mar		37	221	254	15%
Apr		41	225	265	15%
May		38	253	288	13%
Jun		45	207	250	18%
Jul		35	260	291	12%
Aug		27	299	320	8%
Sep		31	262	285	11%
Oct		37	283	313	12%
Nov		44	226	267	16%
Dec		46	264	306	15%
2020		282	1,750	1,836	15%
Jan		51	277	320	16%
Feb		70	256	316	22%
Mar		41	223	262	16%
Apr		51	236	278	18%
May		64	253	305	21%
Jun		53	294	342	15%
Jul		65	287	344	19%
Aug		6	45	51	12%
<b>Grand Total</b>		<b>556</b>	<b>4,257</b>	<b>4,322</b>	<b>13%</b>

#### Detained prior year

unduplicated people	DCR Dispatches to people that were:		Grand Total	% of dispatches to people detained in prior year	
	dispatch month	Detained in prior year			not detained in prior year
2019		401	2,589	2,755	15%
Jan		55	186	236	30%
Feb		43	190	232	23%

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

unduplicated people	DCR Dispatches to people that were:		Grand Total	% of dispatches to people detained in prior year
	dispatch month	Detained in prior year		
Mar	47	210	254	22%
Apr	65	200	265	33%
May	53	238	288	22%
Jun	53	199	250	27%
Jul	50	245	291	20%
Aug	32	294	320	11%
Sep	31	262	285	12%
Oct	37	283	313	13%
Nov	44	226	267	19%
Dec	46	264	306	17%
<b>2020</b>	<b>333</b>	<b>1,674</b>	<b>1,836</b>	<b>20%</b>
Jan	53	275	320	19%
Feb	72	254	316	28%
Mar	49	215	262	23%
Apr	60	226	278	22%
May	82	235	305	27%
Jun	73	274	342	21%
Jul	80	271	344	23%
Aug	9	42	51	18%
<b>Grand Total</b>	<b>674</b>	<b>4,156</b>	<b>4,322</b>	<b>16%</b>

### Investigation Services

Investigation encounter services are submitted in the 837p transaction as per the current SERI and has a place of service code selected.

Investigations do not include services prior to the rights being read or after the determination has been made. Place of Service is from the applicable Place of Service code.

- From current SERI found here: <https://www.hca.wa.gov/billers-providers-partners/behavioral-health-recovery/service-encounter-reporting-instructions-seri>

“An evaluation by a Designated Crisis Responder (DCR) for the purpose of determining the likelihood of serious harm to self, others or gravely disabled due to a mental or substance use disorder. The DCR accepts, screens, and documents all referrals for an ITA investigation. The DCR informs the person being investigated for involuntary detention of his/her legal rights as soon as it is determined that an ITA investigation is necessary.”

Specifically excluded are:

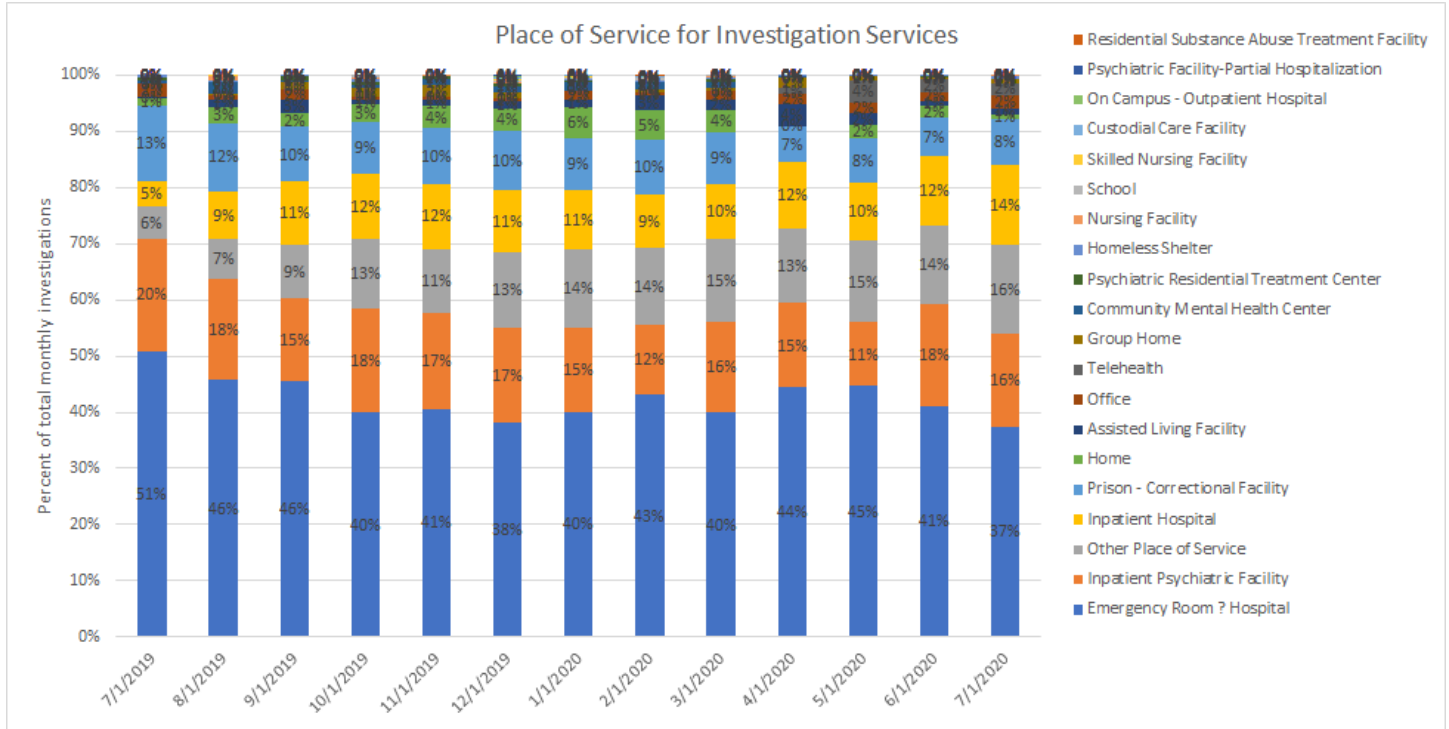
# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

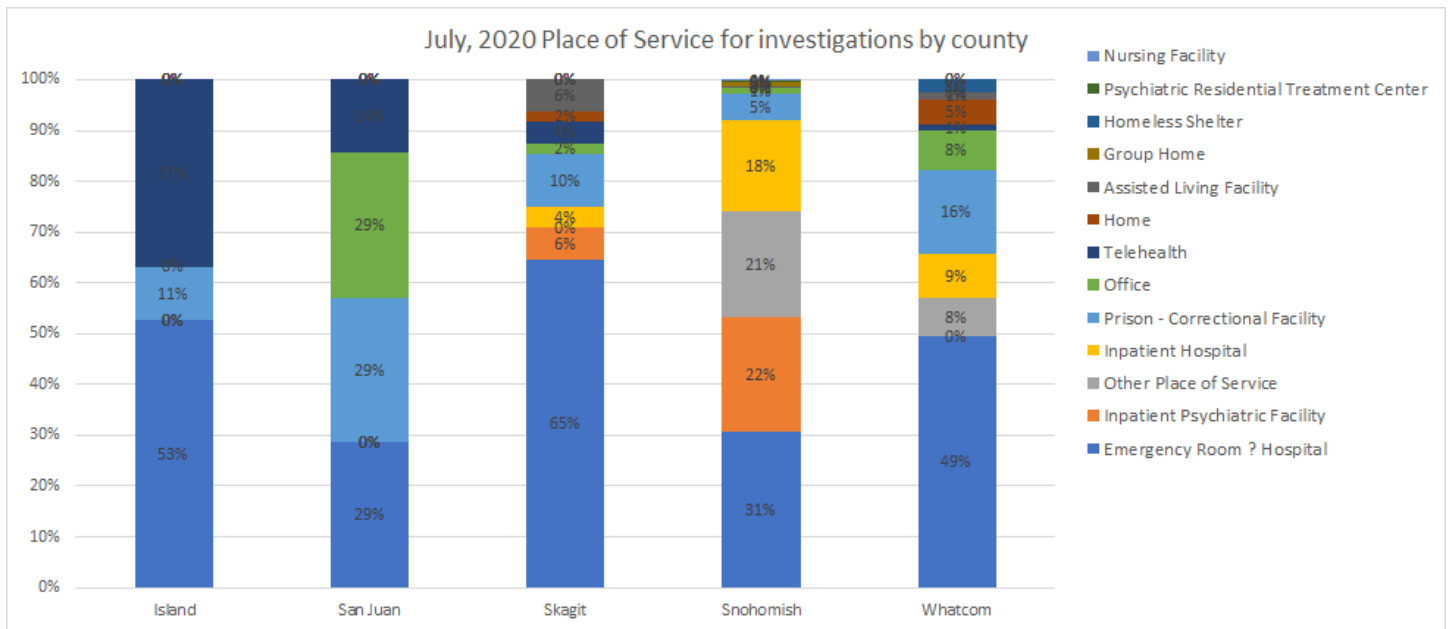
“Activities performed by a DCR that are determined not to be an investigation, include but are not limited to, crisis services and community support. These activities are reported under the appropriate service type.”

### Place of Service for Investigation Services

#### Place of Service for Investigation compared monthly



#### Place of Service for Investigation compared by County for the most recent month



# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

### Count of place of Service by month and County

Count of Investigations Place of Service and month	county					Grand Total
	Island	San Juan	Skagit	Snohomish	Whatcom	
Emergency Room ? Hospital	137	13	340	1,369	544	2,403
7/1/2019	10		30	87	36	163
8/1/2019	3		18	132	45	198
9/1/2019	6	1	35	113	38	193
10/1/2019	8	2	27	105	49	191
11/1/2019	12	2	17	79	44	154
12/1/2019	13	2	24	91	39	169
1/1/2020	13		37	98	44	192
2/1/2020	17		29	102	53	201
3/1/2020	10	2	17	93	31	153
4/1/2020	16		19	107	35	177
5/1/2020	13		23	125	45	206
6/1/2020	6	2	33	123	46	210
7/1/2020	10	2	31	114	39	196
Inpatient Psychiatric Facility			28	878	7	913
7/1/2019			1	63		64
8/1/2019			3	74		77
9/1/2019			1	61		62
10/1/2019			1	86	1	88
11/1/2019			4	60	1	65
12/1/2019			2	71	2	75
1/1/2020			5	67		72
2/1/2020			2	55	1	58
3/1/2020			2	59	1	62
4/1/2020				59	1	60
5/1/2020			2	50		52
6/1/2020			2	90		92
7/1/2020			3	83		86
Other Place of Service	5	4	6	655	42	712
7/1/2019			1	15	2	18
8/1/2019			1	28	2	31
9/1/2019	1			35	4	40
10/1/2019	2			52	6	60
11/1/2019		1		38	4	43
12/1/2019				55	4	59
1/1/2020		2	1	58	5	66

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

Count of Investigations Place of Service and month	county					Grand Total
	Island	San Juan	Skagit	Snohomish	Whatcom	
2/1/2020	1	1		57	5	64
3/1/2020				55	1	56
4/1/2020				51	2	53
5/1/2020			2	65		67
6/1/2020	1		1	69	1	72
7/1/2020				77	6	83
<b>Inpatient Hospital</b>	<b>11</b>		<b>22</b>	<b>533</b>	<b>48</b>	<b>614</b>
7/1/2019			1	10	4	15
8/1/2019			4	28	5	37
9/1/2019			1	44	3	48
10/1/2019	2		1	48	4	55
11/1/2019	1		4	36	3	44
12/1/2019	2		4	40	4	50
1/1/2020	1		1	45	4	51
2/1/2020	1		1	39	3	44
3/1/2020	1			32	5	38
4/1/2020				46	1	47
5/1/2020	2		1	44	1	48
6/1/2020	1		2	55	4	62
7/1/2020			2	66	7	75
<b>Prison - Correctional Facility</b>	<b>15</b>	<b>8</b>	<b>115</b>	<b>192</b>	<b>198</b>	<b>528</b>
7/1/2019			11	11	21	43
8/1/2019	1		13	13	25	52
9/1/2019		2	11	11	17	41
10/1/2019	2		7	13	22	44
11/1/2019	3		3	16	15	37
12/1/2019			17	14	15	46
1/1/2020	2	2	15	16	9	44
2/1/2020	2		12	15	17	46
3/1/2020	1		2	23	9	35
4/1/2020			6	9	11	26
5/1/2020		2	4	15	15	36
6/1/2020	2		9	16	9	36
7/1/2020	2	2	5	20	13	42
<b>Home</b>	<b>8</b>	<b>1</b>	<b>16</b>		<b>141</b>	<b>166</b>
7/1/2019					4	4
8/1/2019	1		3		8	12
9/1/2019		1	3		6	10

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

Count of Investigations Place of Service and month	county					Grand Total
	Island	San Juan	Skagit	Snohomish	Whatcom	
10/1/2019	1				14	15
11/1/2019			1		14	15
12/1/2019	2		2		14	18
1/1/2020	2		2		23	27
2/1/2020	2		4		18	24
3/1/2020					15	15
5/1/2020					11	11
6/1/2020					10	10
7/1/2020			1		4	5
<b>Assisted Living Facility</b>	<b>2</b>	<b>4</b>	<b>60</b>	<b>21</b>	<b>4</b>	<b>91</b>
7/1/2019				1		1
8/1/2019			5	1		6
9/1/2019			8	3		11
10/1/2019		1	1	2		4
11/1/2019	1		3			4
12/1/2019			5			5
1/1/2020	1		2	3		6
2/1/2020		1	4	5	2	12
3/1/2020		1	5	1		7
4/1/2020		1	11	3		15
5/1/2020			9	1		10
6/1/2020			4		1	5
7/1/2020			3	1	1	5
<b>Office</b>	<b>3</b>	<b>5</b>	<b>11</b>	<b>25</b>	<b>36</b>	<b>80</b>
7/1/2019				5	2	7
8/1/2019				2	2	4
9/1/2019	2			2	3	7
10/1/2019			1	2		3
11/1/2019				1	1	2
12/1/2019			1	2		3
1/1/2020			1	4	3	8
2/1/2020					3	3
3/1/2020			1	2	3	6
4/1/2020	1		2		5	8
5/1/2020			2		6	8
6/1/2020		3	2	1	2	8
7/1/2020		2	1	4	6	13
<b>Telehealth</b>	<b>29</b>	<b>1</b>	<b>13</b>		<b>3</b>	<b>46</b>

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

Count of Investigations Place of Service and month	county					Grand Total
	Island	San Juan	Skagit	Snohomish	Whatcom	
4/1/2020	2		2			4
5/1/2020	14		4		1	19
6/1/2020	6		5		1	12
7/1/2020	7	1	2		1	11
<b>Group Home</b>	<b>1</b>			<b>31</b>	<b>12</b>	<b>44</b>
8/1/2019					1	1
9/1/2019	1			4	1	6
10/1/2019				5	2	7
11/1/2019				4	4	8
12/1/2019				2	2	4
2/1/2020				1	1	2
3/1/2020				2		2
4/1/2020				7		7
5/1/2020				2	1	3
6/1/2020				1		1
7/1/2020				3		3
<b>Community Mental Health Center</b>				<b>43</b>		<b>43</b>
7/1/2019				2		2
8/1/2019				9		9
9/1/2019				1		1
10/1/2019				3		3
11/1/2019				4		4
12/1/2019				5		5
1/1/2020				7		7
2/1/2020				7		7
3/1/2020				4		4
4/1/2020				1		1
<b>Psychiatric Residential Treatment Center</b>			<b>1</b>	<b>8</b>	<b>9</b>	<b>18</b>
7/1/2019				1	1	2
9/1/2019				2	1	3
10/1/2019					2	2
11/1/2019				1	1	2
12/1/2019			1	1	1	3
1/1/2020				1	1	2
3/1/2020					2	2
6/1/2020				1		1
7/1/2020				1		1
<b>Homeless Shelter</b>					<b>14</b>	<b>14</b>



# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

Count of Investigations Place of Service and month	county					Grand Total
	Island	San Juan	Skagit	Snohomish	Whatcom	
7/1/2019					1	1
8/1/2019					1	1
9/1/2019					1	1
10/1/2019					3	3
1/1/2020					1	1
2/1/2020					1	1
3/1/2020					1	1
4/1/2020					1	1
5/1/2020					1	1
6/1/2020					1	1
7/1/2020					2	2
<b>Nursing Facility</b>			1	4	3	8
8/1/2019				2	1	3
10/1/2019					1	1
11/1/2019					1	1
12/1/2019			1			1
3/1/2020				1		1
7/1/2020				1		1
<b>School</b>		1	2	4		7
10/1/2019			1	1		2
12/1/2019			1			1
1/1/2020				1		1
2/1/2020				2		2
3/1/2020		1				1
<b>Skilled Nursing Facility</b>	1			2		3
8/1/2019				1		1
12/1/2019				1		1
1/1/2020	1					1
<b>Custodial Care Facility</b>	1				2	3
12/1/2019					1	1
1/1/2020	1					1
2/1/2020					1	1
<b>On Campus - Outpatient Hospital</b>					1	1
12/1/2019					1	1
<b>Psychiatric Facility-Partial Hospitalization</b>				1		1
12/1/2019				1		1
<b>Residential Substance Abuse Treatment Facility</b>				1		1
2/1/2020				1		1

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

Count of Investigations Place of Service and month	county					Grand Total
	Island	San Juan	Skagit	Snohomish	Whatcom	
<b>Grand Total</b>	<b>213</b>	<b>37</b>	<b>615</b>	<b>3,767</b>	<b>1,064</b>	<b>5,696</b>

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

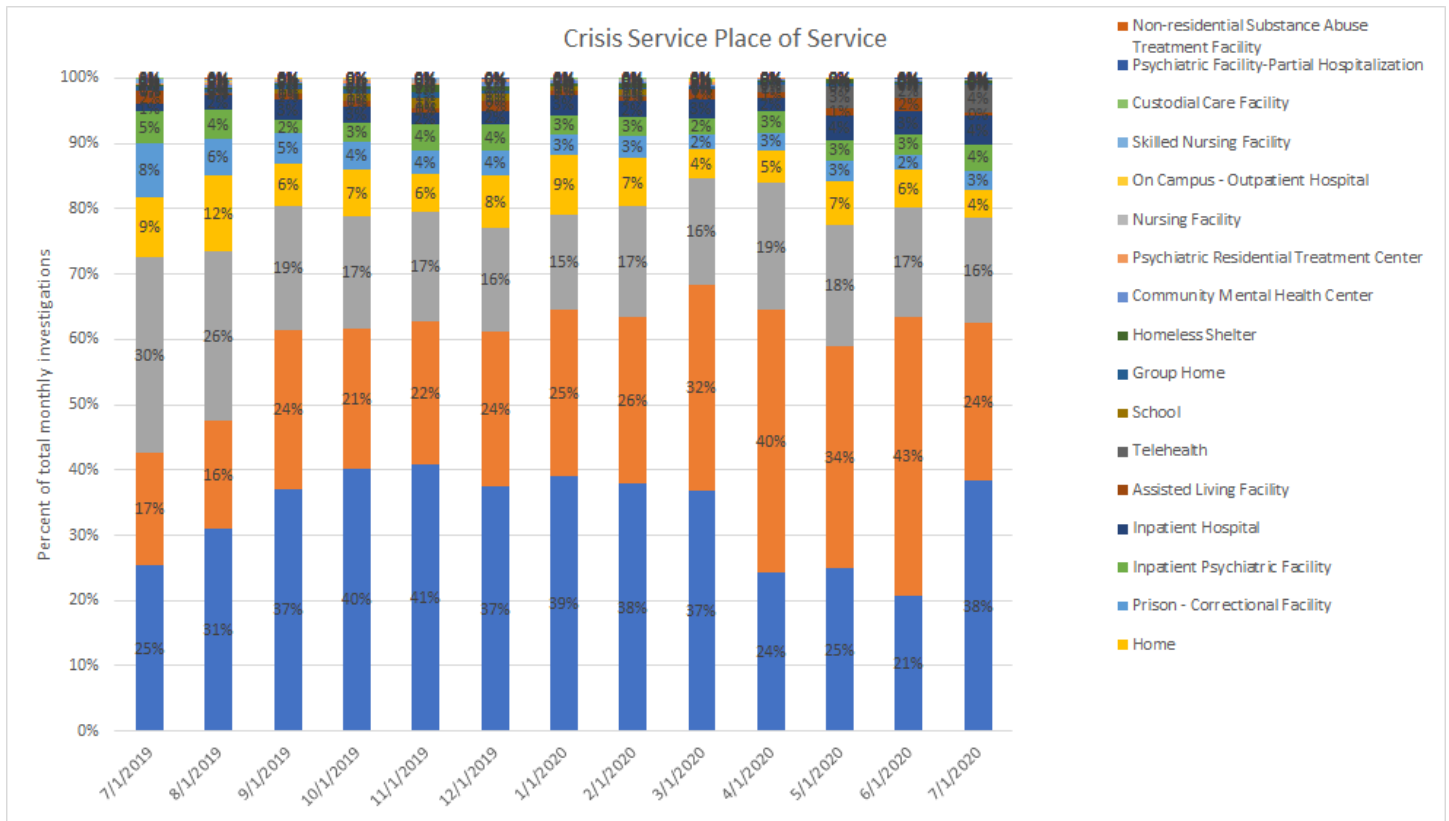
### Crisis Services – not Hotline

Crisis services are submitted as service per the SERI:

“Evaluation and treatment of mental health crisis for all individuals experiencing a crisis. A mental health crisis is defined as a turning point in the course of anything decisive or critical, a time, a stage, or an event or a time of great danger or trouble, whose outcome decides whether possible bad consequences will follow.”

They include hotline calls (cpt H0030) discussed in the beginning of this report and Crisis interventions (cpt H2011), covered below

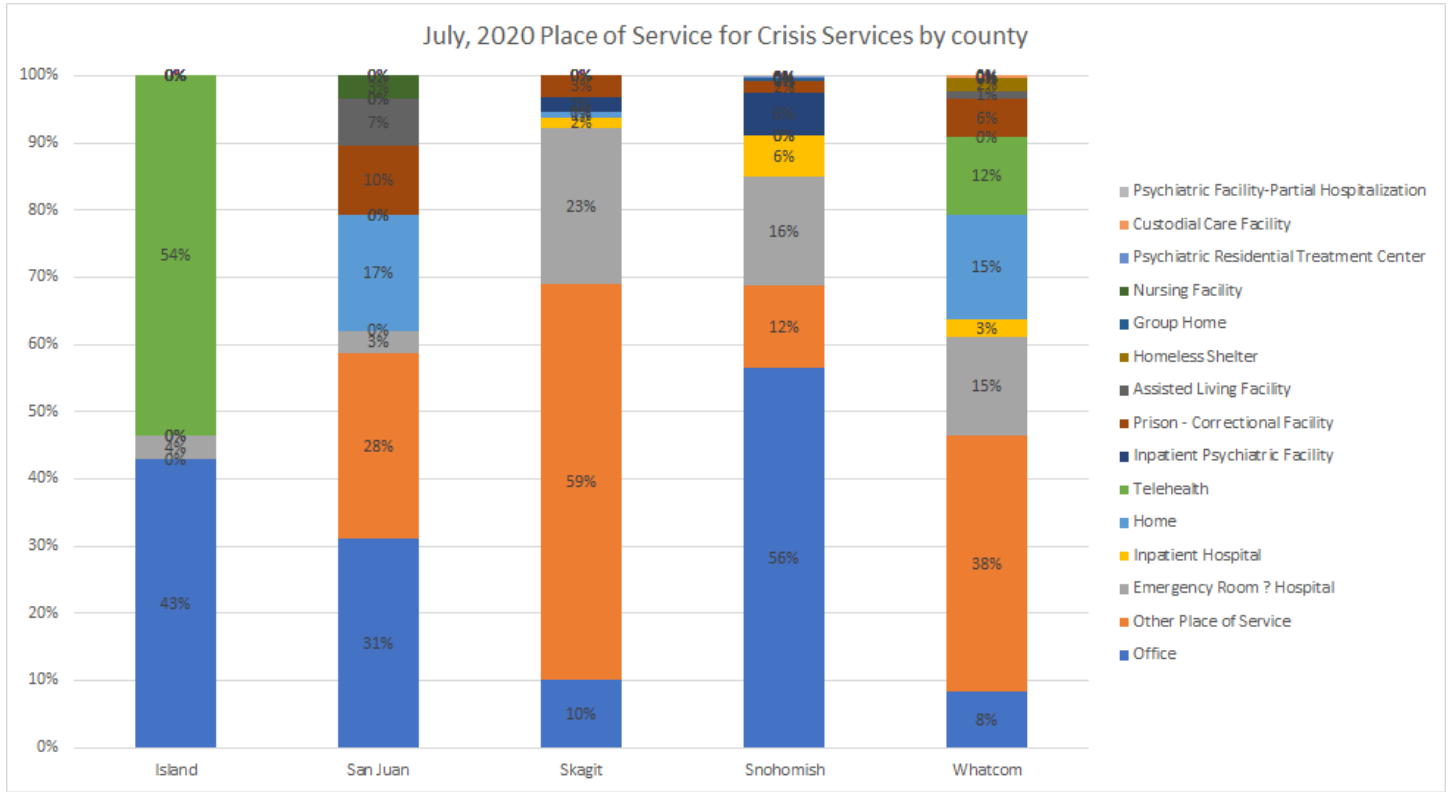
### Comparison of Crisis Service Place of Service by Month



# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

### Comparison of Crisis Service Place of Service by County



### Count of Crisis Services by month and Place of Service

Count of services place of service	Month*					Grand Total
	Mar-20	Apr-20	May-20	Jun-20	Jul-20	
Other Place of Service	275	332	310	462	266	1,645
Office	319	201	228	224	421	1,393
Emergency Room ? Hospital	141	161	168	181	176	827
Home	38	42	63	61	47	251
Inpatient Hospital	26	17	33	37	49	162
Inpatient Psychiatric Facility	20	27	29	34	43	153
Prison - Correctional Facility	21	22	28	26	34	131
Telehealth	1	8	30	22	46	107
Assisted Living Facility	13	8	12	22	5	60
Homeless Shelter		3	6	3	5	17
Group Home	3	3	3	1	3	13
Community Mental Health Center	3	1		3		7
Psychiatric Residential Treatment Center	4	1	1		1	7

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

Count of services place of service	Month*					Grand Total
	Mar-20	Apr-20	May-20	Jun-20	Jul-20	
On Campus - Outpatient Hospital	2		1	1		4
Psychiatric Facility-Partial Hospitalization				1	1	2
School		1		1		2
Custodial Care Facility	1				1	2
Nursing Facility				1	1	2
Skilled Nursing Facility	1					1
<b>Grand Total</b>	<b>868</b>	<b>827</b>	<b>912</b>	<b>1,080</b>	<b>1,099</b>	<b>4,786</b>

### Count of Crisis Services by County and Place of Service

Count of Crisis Services Place of Service and month	county					Grand Total
	Island	San Juan	Skagit	Snohomish	Whatcom	
Office	143	41	451	2,922	475	4,032
7/1/2019	4		40	81	14	139
8/1/2019	3		68	114	30	215
9/1/2019	6	1	45	239	33	324
10/1/2019	9		64	303	46	422
11/1/2019	9		40	247	60	356
12/1/2019	14	4	22	243	64	347
1/1/2020	18	4	31	302	34	389
2/1/2020	23	3	24	293	40	383
3/1/2020	10	1	31	239	38	319
4/1/2020	14	1	17	128	41	201
5/1/2020	10	8	44	139	27	228
6/1/2020	10	8	11	170	25	224
7/1/2020	12	9	13	364	22	420
8/1/2020	1	2	1	60	1	65
Other Place of Service	78	55	415	1,625	1,054	3,227
7/1/2019	3		13	47	32	95
8/1/2019	5		12	58	39	114
9/1/2019	6	5	18	110	72	211
10/1/2019	3	1	20	140	60	224
11/1/2019	2	1	15	105	67	190
12/1/2019	5	7	9	129	70	220
1/1/2020	15	6	27	134	71	253

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

Count of Crisis Services Place of Service and month	county					Grand Total
	Island	San Juan	Skagit	Snohomish	Whatcom	
2/1/2020	9	1	19	121	108	258
3/1/2020	5		25	146	99	275
4/1/2020	11	2	50	160	109	332
5/1/2020	8	9	47	140	106	310
6/1/2020	6	14	77	245	120	462
7/1/2020		8	76	80	101	265
8/1/2020		1	7	10		18
<b>Emergency Room ? Hospital</b>	<b>79</b>	<b>13</b>	<b>235</b>	<b>1,297</b>	<b>528</b>	<b>2,152</b>
7/1/2019	10		23	97	34	164
8/1/2019	6		8	121	45	180
9/1/2019	14	1	19	98	35	167
10/1/2019	9	1	16	105	49	180
11/1/2019	8	3	9	84	43	147
12/1/2019	8	2	10	92	36	148
1/1/2020	4	2	17	78	45	146
2/1/2020	6	1	18	93	53	171
3/1/2020	1		13	95	32	141
4/1/2020	3		20	111	27	161
5/1/2020	9		16	101	42	168
6/1/2020		2	28	104	47	181
7/1/2020	1	1	30	104	39	175
8/1/2020			8	14	1	23
<b>Home</b>	<b>14</b>	<b>17</b>	<b>111</b>		<b>663</b>	<b>805</b>
7/1/2019	5		11		34	50
8/1/2019		1	23		56	80
9/1/2019		4	11		41	56
10/1/2019		1	11		63	75
11/1/2019	1		7		42	50
12/1/2019	1		7		66	74
1/1/2020	3		12		76	91
2/1/2020	3		9		63	75
3/1/2020	1		6		31	38
4/1/2020			1		41	42
5/1/2020			11		52	63
6/1/2020		6	1		54	61
7/1/2020		5	1		41	47
8/1/2020					3	3
<b>Prison - Correctional Facility</b>	<b>6</b>	<b>7</b>	<b>85</b>	<b>153</b>	<b>185</b>	<b>436</b>

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

Count of Crisis Services Place of Service and month	county					Grand Total
	Island	San Juan	Skagit	Snohomish	Whatcom	
7/1/2019			8	16	21	45
8/1/2019			6	11	22	39
9/1/2019	2	2	12	8	16	40
10/1/2019	2		6	16	21	45
11/1/2019		1	5	13	13	32
12/1/2019			11	13	12	36
1/1/2020			10	13	8	31
2/1/2020			9	11	15	35
3/1/2020	1		2	9	9	21
4/1/2020			3	9	10	22
5/1/2020		1	1	13	13	28
6/1/2020	1		7	8	10	26
7/1/2020		3	4	12	15	34
8/1/2020			1	1		2
<b>Inpatient Psychiatric Facility</b>			<b>25</b>	<b>358</b>	<b>13</b>	<b>396</b>
7/1/2019			1	25	1	27
8/1/2019			2	28		30
9/1/2019			2	16		18
10/1/2019			1	26	3	30
11/1/2019			3	29	3	35
12/1/2019			5	32	1	38
1/1/2020			3	27		30
2/1/2020				26	2	28
3/1/2020			1	18	1	20
4/1/2020				25	2	27
5/1/2020			2	27		29
6/1/2020			2	32		34
7/1/2020			3	40		43
8/1/2020				7		7
<b>Inpatient Hospital</b>	<b>4</b>		<b>16</b>	<b>269</b>	<b>41</b>	<b>330</b>
7/1/2019				4	2	6
8/1/2019			3	9	4	16
9/1/2019			1	24	3	28
10/1/2019	2		2	19	4	27
11/1/2019			2	11	2	15
12/1/2019			1	16	2	19
1/1/2020			1	25	5	31
2/1/2020				23	2	25

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

Count of Crisis Services Place of Service and month	county					Grand Total
	Island	San Juan	Skagit	Snohomish	Whatcom	
3/1/2020	1		1	19	5	26
4/1/2020				16	1	17
5/1/2020	1		2	28	2	33
6/1/2020			1	34	2	37
7/1/2020			2	40	7	49
8/1/2020				1		1
<b>Assisted Living Facility</b>	<b>4</b>	<b>24</b>	<b>14</b>	<b>21</b>	<b>59</b>	<b>122</b>
7/1/2019	2	1	4	3	1	11
8/1/2019					2	2
9/1/2019				2	5	7
10/1/2019		2		4	2	8
11/1/2019	1				5	6
12/1/2019		1	1	3	9	14
1/1/2020		1		3	2	6
2/1/2020		1	1	2	4	8
3/1/2020		6	1	1	5	13
4/1/2020		4		2	2	8
5/1/2020	1	2		1	8	12
6/1/2020		4	7		11	22
7/1/2020		2			3	5
<b>Telehealth</b>	<b>43</b>	<b>8</b>			<b>60</b>	<b>111</b>
8/1/2019					2	2
9/1/2019		1				1
2/1/2020		1				1
3/1/2020		1				1
4/1/2020	3	5				8
5/1/2020	17				13	30
6/1/2020	8				14	22
7/1/2020	15				31	46
<b>School</b>		<b>1</b>	<b>8</b>	<b>17</b>	<b>32</b>	<b>58</b>
9/1/2019			3		2	5
10/1/2019			2	1	9	12
11/1/2019			2	8	3	13
12/1/2019				1	9	10
1/1/2020		1		3	3	7
2/1/2020			1	2	6	9
4/1/2020				1		1
6/1/2020				1		1



# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

Count of Crisis Services Place of Service and month	county					Grand Total
	Island	San Juan	Skagit	Snohomish	Whatcom	
<b>Group Home</b>	2		2	37	11	52
7/1/2019				3	1	4
8/1/2019				3		3
9/1/2019	1			5	1	7
10/1/2019				6	1	7
11/1/2019				5	4	9
12/1/2019				2	2	4
2/1/2020	1		2	1		4
3/1/2020				2	1	3
4/1/2020				3		3
5/1/2020				2	1	3
6/1/2020				1		1
7/1/2020				3		3
8/1/2020				1		1
<b>Homeless Shelter</b>	1	1	1		48	51
7/1/2019					1	1
8/1/2019					1	1
9/1/2019					2	2
10/1/2019					5	5
11/1/2019					9	9
12/1/2019					6	6
1/1/2020		1			4	5
2/1/2020	1				4	5
4/1/2020					3	3
5/1/2020			1		5	6
6/1/2020					3	3
7/1/2020					5	5
<b>Community Mental Health Center</b>				32		32
7/1/2019				1		1
8/1/2019				3		3
9/1/2019				2		2
10/1/2019				5		5
11/1/2019				1		1
12/1/2019				6		6
1/1/2020				3		3
2/1/2020				4		4
3/1/2020				3		3
4/1/2020				1		1

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

Count of Crisis Services Place of Service and month	county					Grand Total
	Island	San Juan	Skagit	Snohomish	Whatcom	
6/1/2020				3		3
Psychiatric Residential Treatment Center				9	13	22
7/1/2019					1	1
8/1/2019				1		1
9/1/2019				1		1
10/1/2019				1	4	5
11/1/2019				1	1	2
12/1/2019				2	2	4
1/1/2020					1	1
3/1/2020				2	2	4
4/1/2020					1	1
5/1/2020					1	1
7/1/2020				1		1
Nursing Facility		1	3	1	11	16
8/1/2019					2	2
9/1/2019			2			2
10/1/2019			1		1	2
11/1/2019					4	4
1/1/2020					1	1
2/1/2020					3	3
6/1/2020				1		1
7/1/2020		1				1
On Campus - Outpatient Hospital	1	2	1		6	10
8/1/2019					1	1
9/1/2019					1	1
10/1/2019					1	1
11/1/2019			1			1
12/1/2019					1	1
1/1/2020					1	1
3/1/2020		1			1	2
5/1/2020		1				1
6/1/2020	1					1
Skilled Nursing Facility				7	1	8
7/1/2019				3		3
8/1/2019				2		2
11/1/2019				1		1
2/1/2020					1	1

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

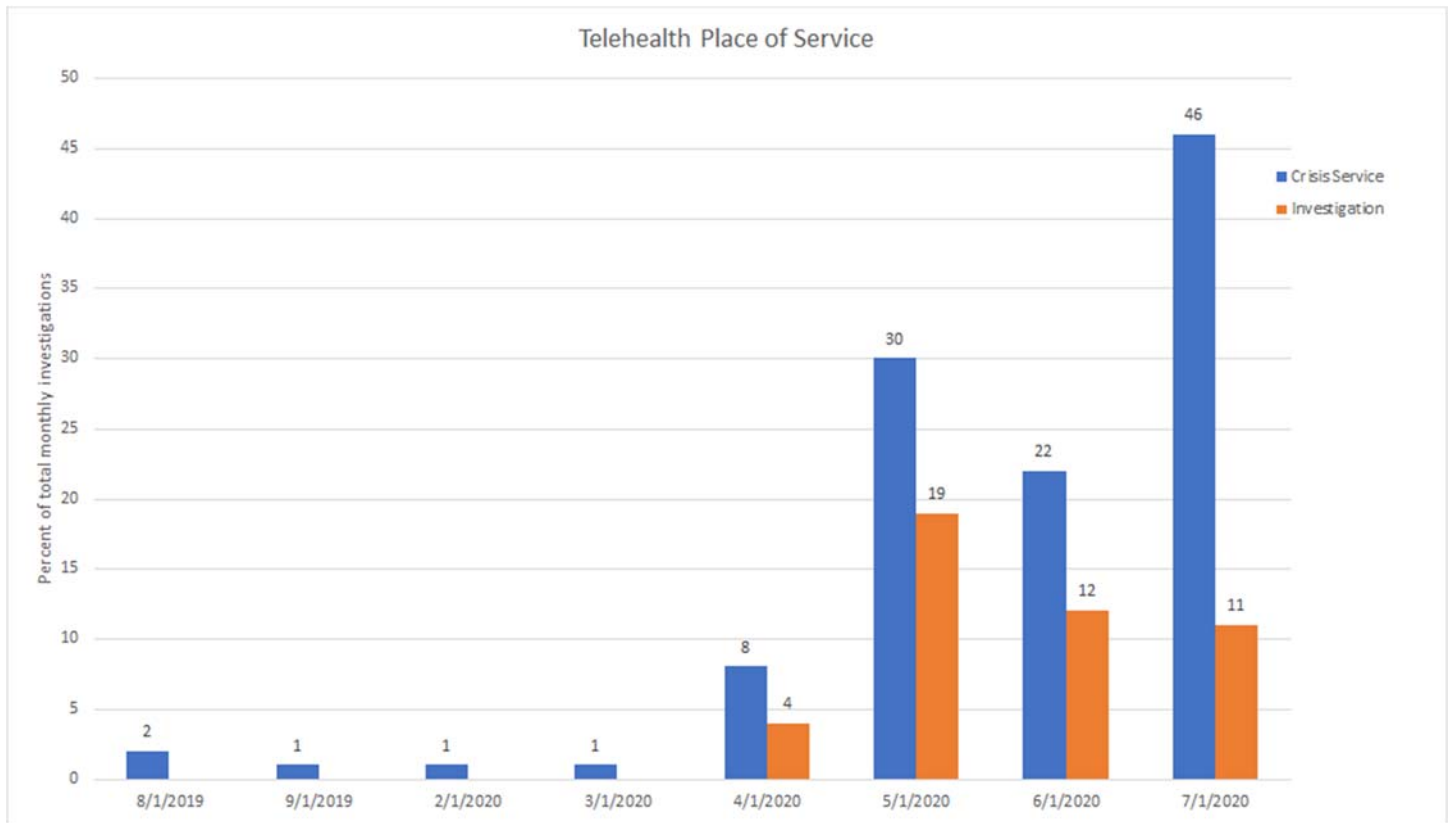
Count of Crisis Services Place of Service and month	county					Grand Total
	Island	San Juan	Skagit	Snohomish	Whatcom	
3/1/2020				1		1
Custodial Care Facility	1				4	5
7/1/2019					1	1
1/1/2020					1	1
2/1/2020					1	1
3/1/2020	1					1
7/1/2020					1	1
Psychiatric Facility-Partial Hospitalization				3		3
12/1/2019				1		1
6/1/2020				1		1
7/1/2020				1		1
Non-residential Substance Abuse Treatment Facility				1		1
8/1/2019				1		1
<b>Grand Total</b>	<b>376</b>	<b>170</b>	<b>1,367</b>	<b>6,752</b>	<b>3,204</b>	<b>11,869</b>

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

### Telehealth Place of Service – Crisis and Investigation Services

Telehealth Services utilize Place of Service code '2' and modifier 'GT'.



# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

### Contract Crisis Metric Summary and Report Cross Reference

#### Exhibit E

The Appendix E format is submitted Quarterly to HCA. It is submitted to the North Sound BH ASO Utilization Management Committee prior to submission.

#### Current Quarter Appendix E

	2020Qtr3	month 1	month 2	month 3	total
<b>Crisis Calls</b>					
1a	Total number of crisis calls received	2,664	0	0	2,664
1b	Total number of crisis calls answered	2,422	0	0	2,422
1c	Average answer time of all crisis calls (seconds)	27	00	00	27
1d	Percentage of crisis calls answered live within 30 seconds	75	0	0	75
1e	Percentage of crisis calls abandoned	9	0	0	9
<b>Mobile Crisis Team</b>					
2a	Total number of face to face crisis contacts	436	53	-	489
<b>DCR</b>					
3a	Total number of DCR events	407	53	-	460
3b	Total number of DCR events resulting in a referral to outpatient treatment	103	7	-	110
3c	Total number of DCR events resulting in a referral to voluntary inpatient treatment	14	1	-	15
3d	Total number of DCR events resulting in detention under ITA	181	25	-	206

#### Last Submitted Appendix E

	2020Qtr2	month 1	month 2	month 3	total
<b>Crisis Calls</b>					
1a	Total number of crisis calls received	2,326	2,414	2,666	7,406
1b	Total number of crisis calls answered	2,226	2,296	2,455	6,977
1c	Average answer time of all crisis calls (seconds)	14	20	25	20
1d	Percentage of crisis calls answered live within 30 seconds	89	84	77	83
1e	Percentage of crisis calls abandoned	4	5	8	6
<b>Mobile Crisis Team</b>					
2a	Total number of face to face crisis contacts	433	465	497	1,395
<b>DCR</b>					
3a	Total number of DCR events	321	372	381	1,074
3b	Total number of DCR events resulting in a referral to outpatient treatment	69	91	91	251
3c	Total number of DCR events resulting in a referral to voluntary inpatient treatment	12	12	10	34
3d	Total number of DCR events resulting in detention under ITA	178	176	187	541

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

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### Other Highlighted Metrics

The ASO Contract currently has included metrics for reporting, included below is the report cross reference and current performance:

1. Crisis System Call Center Performance Metrics (one Year average included)
  - A. Ninety percent of crisis calls are answered live within thirty seconds.
    - See page 6.
      - 89.0% Average, 74.8% in June
  - B. Call abandonment rate of less than five percent for the crisis line.
    - See page 6.
      - 4.0%- The current month is 9.10%
  - C. Provide direct line access to all mobile crisis outreach teams for necessary support and information assistance after dispatch so no caller waits more than thirty seconds for a live answer.
    - See page 8.
      - 86.2% Average. Current month 81.9%
2. Crisis Reporting
  - A. Call Center Reports
    - See page 9 for demographic information.
    - See page 19 for Crisis call dispatch information. Analysis of calls, callers, dispositions, origin of call (e.g., home, emergency room, community, provider), referral sources, and other relevant information to make recommendations and assist in improving the crisis response system.
  - B. Mobile Crisis Team
    - i. The number and percentage of persons referred to the program for mobile outreach, monitored monthly.
      - See Dispatches on page 16
    - ii. The number and percentage of persons successfully diverted from Emergency Rooms and/or ITA commitments, monitored quarterly.
      - See Dispatches on page 16
  - C. Other
    - i. Mobile crisis outreach dispatch, time of arrival, and disposition of response.
      - See page 19 for dispatch time
      - See page 20 for outcome
    - ii. The number of unique individuals served in the crisis system by fund source and service type on a monthly and year to date basis.
      - See Page 17
    - iii. Number of individuals who are repeat utilizers of the crisis system, monitored quarterly and year to date and compared to prior year, and reported by frequency of utilization.
      - See page 23

# North Sound Crisis Metric and Reporting

## Call Center, DCR dispatch and Crisis Services

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### Data Files and Locations used for report preparation

Detentions and Investigation specific data from ICRS contact sheets

[\\w2k16-file\Staff\dennis\\_regan\Documents\Investigation\\_ICRS\Investigation\\_ICRS\\_20200807.xlsx](\\w2k16-file\Staff\dennis_regan\Documents\Investigation_ICRS\Investigation_ICRS_20200807.xlsx)

ASO Crisis System Data – Unique served, Same Day and Follow-on

[\\w2k16-file\departments\Fiscal\\_DA\Payment\\_Computation\ASO\\_Crisis\ASO\\_Crisis\\_20200807.xlsx](\\w2k16-file\departments\Fiscal_DA\Payment_Computation\ASO_Crisis\ASO_Crisis_20200807.xlsx)

Call Center, Triage Center and Outpatient Service data

[\\w2k16-file\departments\Quality\\_Specialists\Reports\HCA\Crisis\CrisisData\\_20200807.xlsx](\\w2k16-file\departments\Quality_Specialists\Reports\HCA\Crisis\CrisisData_20200807.xlsx)

Past Exhibit E

[\\w2k16-file\departments\Quality\\_Specialists\Reports\ExhibitE\ExhibitE\\_Data\\_20200710.xlsx](\\w2k16-file\departments\Quality_Specialists\Reports\ExhibitE\ExhibitE_Data_20200710.xlsx)

Current Exhibit E

[\\w2k16-file\departments\Quality\\_Specialists\Reports\ExhibitE\ExhibitE\\_Data\\_20200807.xlsx](\\w2k16-file\departments\Quality_Specialists\Reports\ExhibitE\ExhibitE_Data_20200807.xlsx)

PDF copy of this report

[\\w2k16-file\Shared\Reports\DataRequests\Crisis\NorthSound\\_CrisisMetrics\\_20200807.pdf](\\w2k16-file\Shared\Reports\DataRequests\Crisis\NorthSound_CrisisMetrics_20200807.pdf)

Word working document

[\\w2k16-file\departments\Quality\\_Specialists\Reports\HCA\Crisis\NorthSound\\_CrisisMetrics\\_20200807.docx](\\w2k16-file\departments\Quality_Specialists\Reports\HCA\Crisis\NorthSound_CrisisMetrics_20200807.docx)

## AUGUST UPDATE

# Statewide High-Level Analysis of Forecasted Behavioral Health Impacts from COVID-19

## Purpose

This document provides a brief overview of the potential statewide behavioral health impacts from the COVID-19 pandemic. The intent of this document is to communicate potential behavioral health impacts to response planners and organizations or individuals who are responding to or helping to mitigate the behavioral health impacts of the COVID-19 pandemic.

## Bottom Line Up Front

- The COVID-19 pandemic continues to strongly influence behavioral health symptoms and behaviors across the state due to its far-reaching medical, economic, social, and political consequences. This forecast is heavily informed by disaster research and response and the latest national and international data and findings specific to this pandemic. Updates will be made monthly to reflect changes in baseline data.
- Ongoing behavioral health impacts in Washington will likely be seen in phases (see Figure 1 and Figure 2), peaking around 6–9 months after the initial outbreak.<sup>1,2</sup> This will likely coincide with a potential increase in infections in the fall months when more people are indoors, which is a pattern consistent with previous pandemics.
- Washington is currently experiencing a slow extension of the first wave of the pandemic as represented by a continuous and steady increase in COVID-19 cases following the phased reopening that began in June 2020.
- Heading into the fall months of 2020, the behavioral health outcomes from COVID-19 for most people are related to experiences of social isolation, fears of the unknowns around further restrictions and economic losses, and stress and pressure related to the balance of childcare and work. However, this may change as COVID-19 cases continue to increase, increasing medical risks for greater numbers of people<sup>3</sup> and relapses related to addiction.<sup>4,5,6</sup>
- Experiences of social isolation are associated with increased behavioral health problems, such as depression, anxiety, mood disorders, psychological distress, post-traumatic stress disorder (PTSD), insomnia, fear, stigmatization, low self-esteem, and lack of self-control.<sup>3</sup>



DOH 820-097 August 2020

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## Reactions and Behavioral Health Symptoms in Disasters

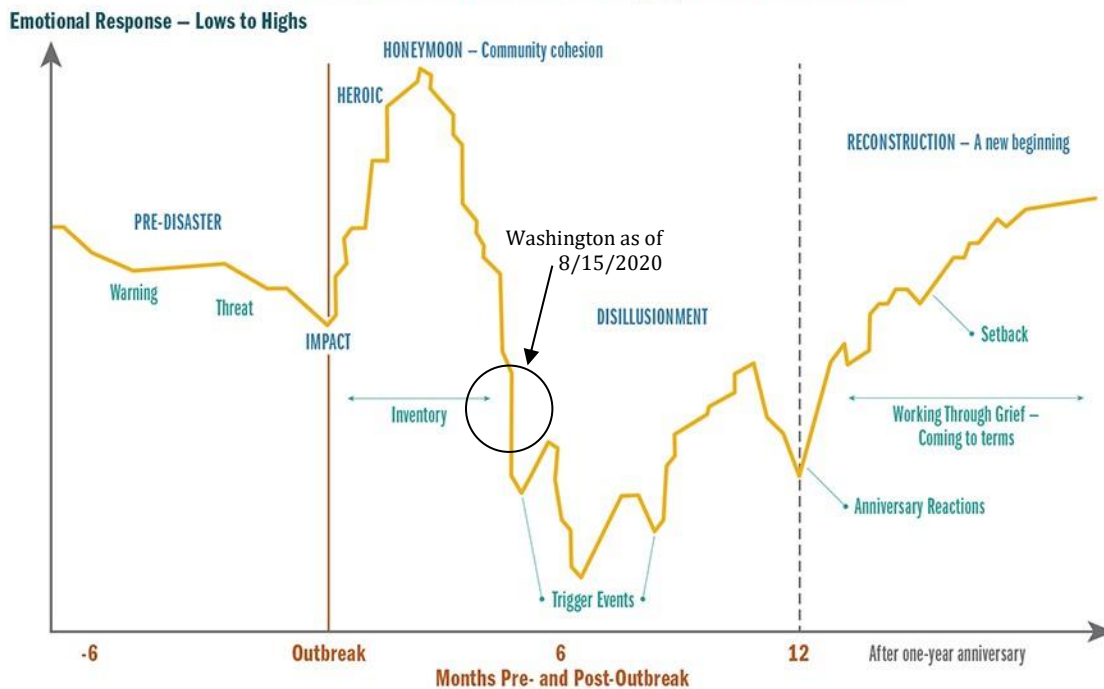


Figure 1: Phases of reactions and behavioral health symptoms in disasters. Adapted from the Substance Abuse and Mental Health Services Administration (SAMHSA)<sup>7</sup>

### Phase-Related Behavioral Health Considerations

**Behavioral health symptoms will likely present in phases.**<sup>1,2</sup> For each phase in the disaster response and recovery cycle, there are known corresponding behavioral health symptoms and experiences for many people in the affected community. As the COVID-19 pandemic is a natural disaster impacting us on a national level, **every individual and community is affected in some way.** The unique characteristics of this pandemic are trending towards depression as a significant behavioral health outcome in Washington. This may change dramatically if there is a drastic increase in the number of COVID-19 cases in September and October. In that case, increased symptoms of anxiety and post-traumatic stress disorder (PTSD) related to fears of illness or death from the virus will likely result.<sup>8,9</sup>

Certain populations, such as ethnic and racial minorities, disadvantaged groups, those of lower socioeconomic status, and essential workers, are experiencing disproportionately more significant behavioral health impacts.<sup>10,11,12,13,14</sup> Healthcare workers, law enforcement officers, educators, and people recovering from critical care may experience greater behavioral health impacts than the general population. The [COVID-19 Behavioral Health Group Impact Reference Guide](#) (DOH publication number 821-104) provides detailed information on how people in specific occupations and social roles are uniquely impacted.

### The Disillusionment Phase of Disaster Response & Recovery

Moving into the *disillusionment phase* can be uncomfortable and challenging for communities. During this time, individuals, groups (non-profits and other organizations), and businesses are often confronted with the limitations of disaster assistance and support. Individuals and communities may feel abandoned as the gap between community needs and available

resources widens. As we move towards the fourth quarter of 2020, financial resources that were more plentiful in earlier phases may be limited or nonexistent.

Depression is one of the most common emotional responses heading into the disillusionment phase. In Washington, the beginning of this phase coincides with changes in seasonal conditions, as daylight hours become shorter and the weather worsens. The combination of these circumstances is likely to result in an increase in symptoms of seasonal affective disorder.<sup>15</sup>

In September, it is likely that socially disruptive behaviors will continue to be seen on a larger community scale as one expression of *emotional burnout* due to the length and pervasiveness of the pandemic, stressors related to economic pressures, and divisiveness among people and groups. Substance use will continue to be a problematic coping choice for many, with the potential for further increases moving into the late months of 2020.

Law enforcement is likely to continue seeing a disproportionate increase in violent crimes compared to this time period in 2019.<sup>16</sup> Sadness and grief or loss are the most common experiences for many individuals in the disillusionment phase. Law enforcement officers may see a higher number of calls related to suicide during this time.

If COVID-19 cases dramatically increase in the fall months, along with resulting significant social and economic disruption, one of the large-scale outcomes will likely include a *trauma cascade*. This is a situation in which parts of the disaster recovery cycle can be repeated or prolonged, during which people may have a reduced ability to emotionally recover from the disaster due to additional or ongoing impacts on their lives.<sup>1,17,18</sup>

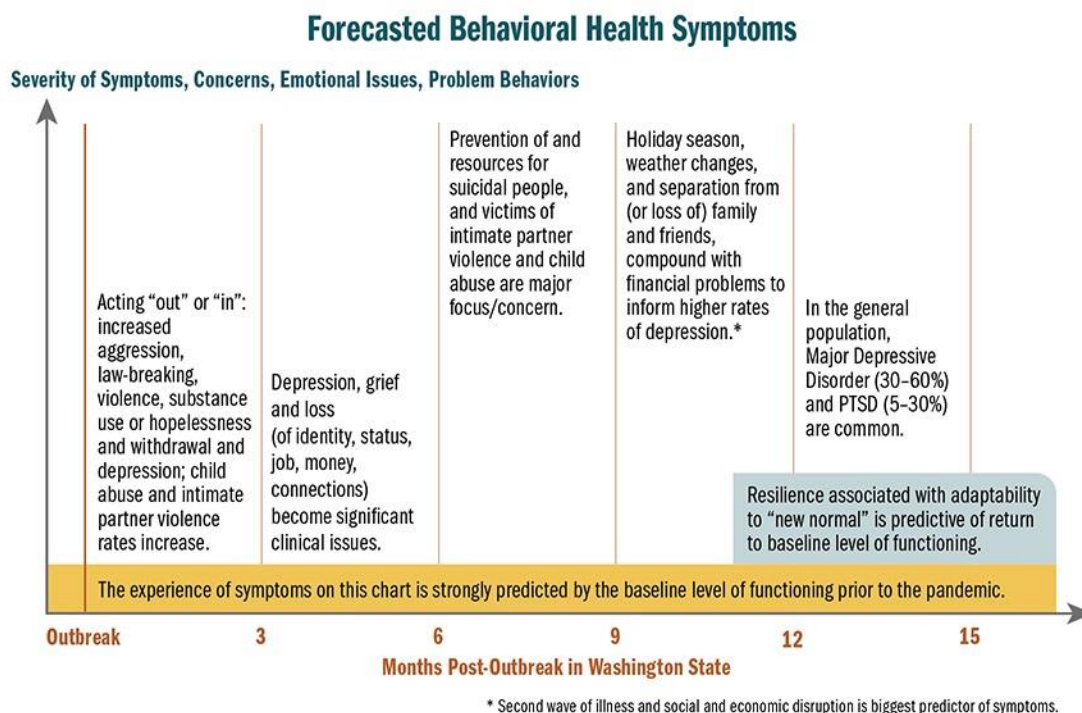


Figure 2: Forecasted behavioral health symptoms.

## Specific Areas of Focus for August and September 2020

### Children and Families

#### Resuming Academic Instruction: In-Person and Distance Learning

The decision around in-person or distance learning is difficult for parents and school districts alike. Both options present unique benefits and risks. Regardless of how instruction is delivered, children often struggle with their behavior, mood, and learning when they are in the middle of a disaster.

Common, short-term responses you might see in children include the following:<sup>19,20,21</sup>

- Difficulty paying attention, having a hard time focusing on schoolwork
- Trouble remembering what they learned, trouble remembering to complete tasks
- Too much energy, acting too silly
- Feeling really tired all of the time, having a hard time sleeping
- Stomachaches or headaches
- Being irritable, cranky, crying often, or having tantrums
- Blurting, having a hard time thinking before they act

Many parents and caregivers have very strong feelings about in-person versus distance learning. Despite disagreement about which method of learning is best, almost everyone is worried for their children's health, safety, and development during this time. When weighing the merits of each learning option for students, it is important for parents, caregivers, and schools to consider the ways in which the behavioral health of their children is being affected by the pandemic, and the impacts to their students' ability to learn, retain new information, and advance academically. Refer to the [COVID-19 Behavioral Health Toolbox for Families](#) for tips on how to navigate some of the emotional responses that families may experience during the COVID-19 pandemic. The toolbox provides general information about common emotional reactions of children, teens, and families during disasters. Families, parents, caregivers, and educators can use this information to help children, teens, and families recover from disasters and grow stronger.

#### Child Abuse

Child abuse and domestic violence increase significantly in post-disaster settings, such as the COVID-19 pandemic.<sup>22,23</sup> Traumatic brain injuries (TBIs) are the most common form of injury due to child abuse after a disaster. In a virtual learning setting, an abuser may be present during all interactions between the child and educator. This may change and limit opportunities to ask directly about abuse and neglect and to make inquiries into whether or not a child feels safe in the home. Typical cues that teachers may use to spot signs of abuse or neglect are often unavailable in a virtual environment.

Signs of child abuse that may be visible in a virtual setting may include the following:

- Abnormal levels of participation in online classes (e.g., being unusually vocal and disruptive, having difficulty paying attention, or being very withdrawn)
- Extremely flat or blunted emotional expression (e.g., not laughing or interacting appropriately to social cues with peers)
- Unusual degree of physical disarray (e.g., clothing is noticeably dirty, not properly fitted, or inappropriate for weather or age; hair or skin is noticeably dirty or unwashed)
- Observable bruising on face, head, neck, hands, wrists, shoulders, or arms

- Excessive sleepiness or lethargy (e.g., putting their head down, excessive yawning, difficulty concentrating, falling asleep during instruction)

## Masks and Face Coverings

The spread of COVID-19 is causing many changes and disruptions to daily life. Children and families are navigating complex issues with school, childcare, emotion regulation, and behavior. Another significant change is the statewide mask mandate, requiring everyone age 2 years and older wear a mask or face covering when in a public space.<sup>24</sup> While some children won't have any trouble with it, other children may struggle with wearing a face covering. It's a new sensation, it can slip around, and it impacts their natural tendency to put things in their mouth.

Some ways to help a child adjust to mask wearing are to:

- Model the behavior yourself
- Engage children with making or decorating their own masks
- Have them wear the mask for brief periods of time to get used to them (i.e., while dancing to a favorite song)

Refer to the [Helping kids to wear cloth face coverings article](#) and [infographic](#) for more detailed information and ways to support younger children in wearing face coverings.

## Parenting and Working from Home

Managing the variety of responsibilities and demands of working from home while also balancing childcare and self-care can be overwhelming and have significant negative effects on behavioral health for children, adolescents, and adults. As we move into the fall months and educational instruction resumes, families with parents and caregivers working from home should try to create a helpful structure in their daily schedule. Establishing a plan or daily schedule for everyone in the household can help create a sense of stability and comfort during a time when there are many unknowns. To the extent that is possible, recognizing that it may not be an option for many people, work areas should be separated from family or home areas with physical boundaries (e.g., doors, room dividers, a separate table) in order to help the brain mentally separate work from home.

## Substance Use

Many individuals and communities are experiencing a significant lack of control over their personal and environmental circumstances in the current stage (6–7 months post-impact) of the pandemic. As we move further into the disillusionment stage, the need to manage distressing or difficult feelings related to stress and frustration may become problematic by manifesting in substance use for some. When individuals feel loss of control along with associated stress, worry, and fear, it is very common for those feelings to be expressed outwardly in the form of frustration and anger. These feelings are frequently managed with substance use.

Additionally, mixed messaging at the federal level, messaging from states, and varying degrees of media coverage related to COVID-19 risks and potential outcomes have created a high baseline level of uncertainty within many communities. For many people in Washington, it is likely that the summer months of 2020 will include a significant sense of frustration and higher rates of substance use than might otherwise typically be present. **Most, but not all, substance use issues will be an exacerbation of pre-existing problematic behavior.**<sup>25</sup> Given the extended period of unknowns, restrictions associated with the pandemic, and additional stressors

associated with the potential for multiple waves and subsequent disruption, substance use will likely surpass typical post-disaster levels.

## Violence and Aggression

Hot weather is often correlated with an increase in physical violence and aggression.<sup>26</sup> Coupled with the potential for problematic substance use which tends to reduce impulse control, an increase in the number of physical assaults and property crimes is expected in the summer months as the weather gets warmer, including arson associated with aggression.

As individuals move into the *disillusionment phase*, they often experience several extreme stressors and significant negative events, such as fear of getting sick or loss of loved ones,<sup>18,27</sup> unemployment,<sup>17,27</sup> or property loss.<sup>17,27,28</sup> Individuals often feel powerlessness and a loss of control as a result of these acute experiences.<sup>27,28</sup> This leads individuals to direct their feelings (like anger, frustration, sadness, fear, and anxiety) either towards themselves by acting “in” or towards others by acting “out.”<sup>27,28,29</sup> Both self-harm and interpersonal violence increase significantly after disasters.<sup>27</sup> This refers to how people are expressing themselves and their emotions in the context of a disaster response timeline, not expressions due to underlying causes or larger-scale social issues, which could also be drivers of behavior.

There is evidence that nationally, people’s behaviors and emotions are intensified by the experience of COVID-19. They are acting in ways they normally wouldn’t in circumstances without the stressors and impacts of the pandemic, which can **intensify** and **magnify** existing feelings of distress, anger, fear, and aggression. There have been significant increases in handgun sales. In Washington, the number of federal background checks for handgun sales was 61% higher in March–July 2020 than the number for the corresponding period in 2019.<sup>30</sup> This may present more risk for gun violence, including suicide.<sup>31</sup> **The most acting “out” behavior related to the COVID-19 pandemic is likely to continue until there is a significant decrease in the number of hot days and an increase in rainy or cooler days.**

Violence against women increases after every type of disaster or emergency.<sup>32</sup> Rates of intimate partner violence and child abuse have increased significantly in Washington. Weekly surveys of Washington law enforcement agencies indicate that domestic violence offenses remain elevated at levels 14% higher than those in 2019.<sup>33</sup> However, these data only represent 25–30% of law enforcement agencies any given week. Based on data from previous disasters, it is likely that—even among reporting agencies—the true number of domestic violence cases is significantly higher.

## Social Connection, Travel, and Resilience Building

The continued development of *psychological resilience* (adaptability and flexibility, connection, purpose, and hope) in the summer months should be strongly encouraged. New opportunities to spend time outdoors with an increase in warm and pleasant weather should be leveraged when conditions allow. [State health guidelines outline considerations for safe travel](#), and local health departments may also have guidelines. Encouraging people to engage in **healthy outdoor activities as a way of active coping is highly recommended when group size is limited appropriately, safe physical distancing can be maintained, and face coverings are worn.**

Continuing to reconnect and engage with loved ones and family members from whom many people have been separated should also be encouraged when these encounters can be done outdoors, at a safe physical distance, and with appropriate safety measures in place (e.g., hand washing and face coverings).

*Community resilience* is the capacity of individuals and households within a community to absorb, endure, and recover from the impacts of a disaster. Approximately 50% of Washington residents have one or two risk factors that can threaten resilience, including unemployment, being a single parent, lower socioeconomic brackets, or pre-existing medical conditions.<sup>34</sup> Resilience can be actively developed both on individual and community levels. Creative social connection, as part of resilience, can also be encouraged and developed. It can be amplified to increase social connection. This helps reduce behavioral health symptoms and encourages development of active coping skills for the population at large.

The typical long-term response to disaster is **resilience**, rather than disorder.<sup>1,35</sup> Resilience is something that can be intentionally taught, practiced, and developed for people across all age groups. Resilience can be increased by:<sup>36</sup>

- Becoming **adaptive** and psychologically **flexible**.
- Focusing on developing social **connections**, big or small.
- Reorienting and developing a sense of **purpose**.
- Focusing on **hope**.

Community support groups, lay volunteers, law enforcement, first responders, and social organizations and clubs are resources that can be developed to help reduce behavioral health symptoms for the general population. These should be leveraged to take pressure off of depleted or unavailable professional medical and therapeutic resources throughout 2020.

### Specific Areas of Focus for Transition into September 2020

Medical and specialty providers, organizations, and facilities should attempt to develop resources and staffing to address behavioral health impacts of the pandemic. Support strategies need to be tailored based on the current phase of the incident and the target population.

There are a number of additional factors and considerations that impact behavioral health to take into account as fall approaches:

- Ending of some local (county and city) eviction moratoriums, unless deferred, may result in unstable housing and housing crises for people who have experienced unexpected decreases in income or unemployment.
- Ending of federal support programs (e.g., Payroll Protection Act, supply distribution) may cause communities to realize that there are substantial gaps between their needs and available resources.
- An eventual return to baseline levels of functioning for many people should occur around 14 months after the initial outbreak. **This is assuming that the rates of infection do not continue to significantly increase and that a sense of the new normal is underway.**
- In Washington, the highest risk of suicide will likely occur between October and December 2020. This is consistent with known cycles of disaster response patterns. Seasonal affective disorder worsens mental health challenges at this time of year due to increased hours of darkness and inclement weather. Winter holidays can also worsen mental health challenges for many people, as they are often an emotionally and financially difficult time of year.
- Given the current sociopolitical climate, election season will also likely have a strong impact on the behavioral health of Washingtonians.<sup>37</sup>

### Possible Pandemic Wave Scenarios for COVID-19 and Forecasted Behavioral Health Symptoms

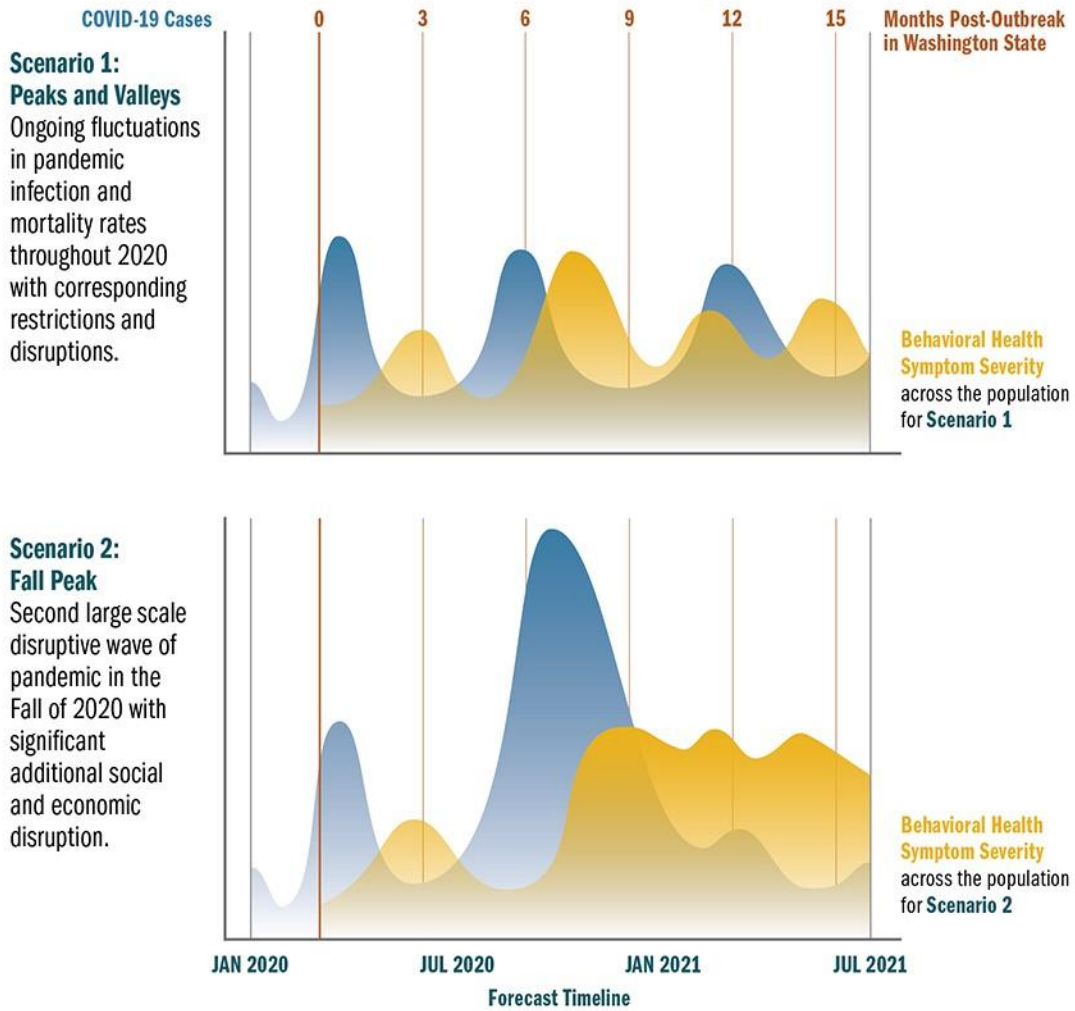


Figure 3: Possible pandemic wave scenarios for COVID-19 and forecasted behavioral health symptoms.

## Key Things to Know

- Approximately 650,000 Washingtonians were receiving treatment for behavioral health needs prior to the COVID-19 outbreak.<sup>38</sup>
- Approximately 700,000 Washingtonians have mental health concerns, but were **not** receiving services prior to the outbreak.<sup>38</sup>
- While only 4–6% of people typically develop symptoms of PTSD after a disaster (equivalent to 380,000 individuals in Washington), **this number can vary quite a bit depending on the type of disaster. It is often higher among first responders and medical personnel if the disaster is more chronic, widespread, children are hurt or injured, and burnout is likely.**<sup>39,40</sup>
- Rates of PTSD have been much higher (10–35%) in some places more directly impacted by a critical incident.<sup>41</sup> Although rates of PTSD may not reach such critical levels in Washington, it is anticipated that **rates of depression are likely to be much higher (potentially 30–60% of the general population, which is equivalent to 2.25 million to 4.5 million people in Washington<sup>41</sup>) due to the chronic and ongoing social and economic disruption in people’s lives as a result of the COVID-19 pandemic.** This is a much higher rate than typical after a natural disaster where there is a single impact point in time.
- If we are to experience an additional fall peak of illness as a function of this pandemic, significant behavioral health reactions or functional impairments may be experienced by approximately 45% of the population.<sup>42,43</sup>
- The most common symptoms of trauma in children and teens in the context of disaster recovery include eating too much or too little, difficulty sleeping, having bad dreams or nightmares, sleeping too much or too little, changes in behavior, and difficulty learning and remembering new things. It is also very common for children and youth of all ages to experience some regression, such as acting like they did as a younger child.<sup>44</sup>
- Suicide and drug overdose rates are both highly influenced by unemployment.<sup>10,45,46,47</sup> For every 1% increase in the unemployment rate, there is a corresponding 1.6% increase in the suicide rate<sup>45</sup> and an increase of one drug overdose death per 300,000 people.<sup>46</sup> In Washington, approximately 1,231 people die from suicide annually and 1,173 people die from drug overdose annually.
  - The unemployment rate in Washington was 9.8% in June 2020,<sup>48</sup> 5.5 percentage points higher than June 2019. If sustained, this could result in an additional 108 deaths annually by suicide and an additional 140 deaths annually by drug overdose.
- In the context of post-disaster recovery, individuals often utilize substances as a way to relieve psychological suffering. As such, disasters are linked to increased use of tobacco, cannabis, and alcohol.<sup>49</sup>
  - Prior to COVID-19, approximately 24% of individuals with mood disorders reported using alcohol or drugs to relieve symptoms, 10% of individuals with an anxiety disorder reported self-medicating with alcohol, 3% of individuals with an anxiety disorder reported self-medicating with alcohol and drugs, and 21% of individuals with PTSD reported using alcohol and other drugs to relieve their psychological symptoms.<sup>49</sup> **Due to the extended nature of a pandemic, it is likely that self-medication and use of substances of all types will increase significantly over the next 6–9 months.**
    - As compared to June 2019, cannabis tax collections for June 2020 were up 31%.<sup>50</sup> There has also been a corresponding rise in alcohol-related emergency department visits in 2020.<sup>51</sup>



- Given these increases, healthcare providers should suggest both healthy alternatives for coping and sources of support. For additional resources, visit [DOH's Behavioral Health Resources & Recommendations webpage](#) for providers.
- Based on population data for Washington and known cycles of common psychological responses to disasters, as well as the latest outcome data specific to COVID-19, **we can reasonably expect that approximately three million Washingtonians will experience clinically significant behavioral health symptoms over the next two to five months. Symptoms of depression will likely be the most common, followed by anxiety and acute stress.** These symptoms will likely be strong enough to cause significant distress or impairment for most people in this group.
- Weekly survey data suggest that over 1.9 million Washington adults are experiencing symptoms of anxiety on at least most days, and over 1.4 million are experiencing symptoms of depression on at least most days (Figure 4).<sup>52</sup>

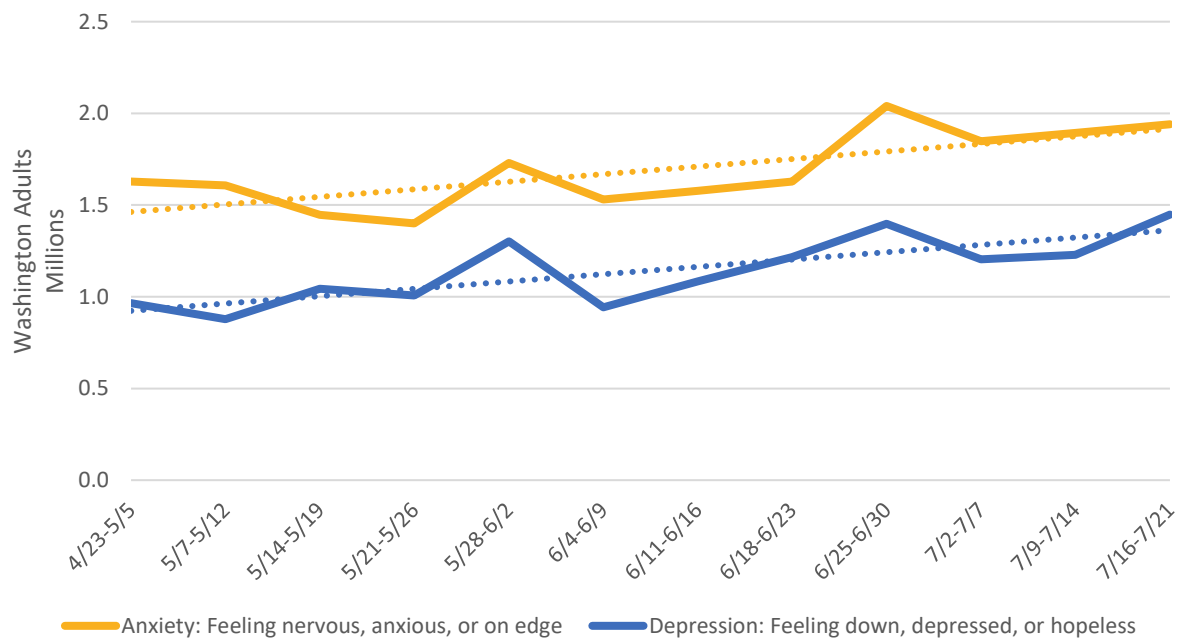


Figure 4: Estimated Washington adults experiencing symptoms of anxiety and depression at least most days, by week: April 23–July 21 (Source: U.S. Census Bureau)

- It is important to note that these numbers likely do not reflect the total number of individuals that will be able to seek and access services. Capacity building should include creative and flexible service provision, particularly within rural communities and underserved populations, with specific mindfulness around cost of services, access to technology (e.g., for telehealth), availability of services, and stigma related to behavioral health.
- An eventual return to pre-pandemic baseline levels of functioning by April or May 2021 is anticipated for many people. However, this is dependent on the level of disruption caused by a potentially dramatic increase in COVID-19 cases in the fall of 2020 or winter of 2021.<sup>1,2</sup>

## Background Data and Analysis

### National Prevalence Rates

#### Mental illness, behavioral health diagnoses, and demographics<sup>53,54</sup>

- Generalized anxiety disorder = approximately 1.0% of adolescents, 2.7% adults
- Panic attacks = 11.2% of adults
- Panic disorder = approximately 2–3% of adolescents and adults
- Mood disorders = approximately 9.7% of adults
- Depression = 10–20% of adults<sup>55</sup>
- Post-traumatic stress disorder (PTSD): 3.6% of adults<sup>53</sup>

#### National prevalence rates for substance-related disorders<sup>53,54,56</sup>

- Nicotine dependence = 11.0% of adults
- Alcohol use disorder = approximately 4.6% of adolescents, 8.5% of adults
- Cannabis use disorder = approximately 2.3% of adolescents, 5% of young adults, and 0.8% of adults
- Opioid use disorder = approximately 0.6% of adolescents, 1.1% of young adults, and 0.8% of adults

### Washington Data

- Population: Approximately 7.6 million
- Percentages with baseline serious mental illness
  - Adults 18 and over = 5.3%<sup>38</sup> (or 400,044 people)
  - Young adults from 18–25 = 6.2%<sup>38</sup> (or 29,014 people)
- Percentage of adults 18 and over with any mental illness who received treatment: 45.6% (approximately 650,000 people or 8% of the total population of Washington)<sup>38</sup>
- Depression = 12.7% in Washington, 41.1% of whom received mental health services<sup>38</sup>
- Death rates<sup>57</sup>
  - Annual suicide rate = approximately 16.2 per 100,000
  - Annual drug overdose death rate = approximately 15.4 per 100,000

## Acknowledgements

This document was developed by the Washington State Department of Health's Behavioral Health Strike Team for the COVID-19 response. The strike team is a group of clinical psychologists, psychiatrists, and therapists who are professionals in disaster relief and behavioral health. Lead authors from the strike team are Kira Mauseth, Ph.D. and Stacy Cecchet, Ph.D., ABPP. Other contributing authors include Tona McGuire, Ph.D., Nick Fradkin, MPH, MPA, Lareina La Flair, MPH, Ph.D., and Lindsay Gorgen.

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NORTH SOUND BEHAVIORAL HEALTH ADVISORY BOARD  
MANAGED CARE ORGANIZATION QUESTIONS

1. What strategies are being developed for sustainability of the behavioral health provider network? Additionally, what strategies have you implemented to fill an unmet need and/or expand services in your service areas? (i.e.: Pediatric Services; Hospitalization or Residential Services, Geriatric specific mental health services).
2. Under your current processes the Advisory Board members are not able to participate in the MCO Quality Oversight Committees due to discussion of patient specific information. From your perspective what could the Advisory Board do or provide that would be helpful to your MCO to enhance services; reduce barriers and /or help in planning for expansion of services in 2020/2021?
3. What did your MCOs learn from the first year on Integrated Managed Care in the North Sound region? What were the successes and challenges? How can we establish a process to receive ongoing data (unidentified) on service provision, i.e.: aborted or dropout rates for services; successful completions; wait list related issues; identified service gaps – either geographic or program availability.
4. How/what is your MCO doing currently towards efforts to dismantle systemic racism?
5. With COVID restrictions being in place for the foreseeable future what exceptions have you established for (reimbursable) remote telehealth and case management services? Have you considered changes in reimbursement for agencies providing residential/inpatient services to help compensate for need to have 50% or more restriction on occupancy?