



North Sound BH-ASO Annual Crisis Assessment

2023 Summary and Analysis of the North Sound BH-ASO Crisis System

**NORTH SOUND BEHAVIORAL HEALTH
ADMINISTRATIVE SERVICES ORGANIZATION**

2021 E. College Way, Suite 101, Mt. Vernon, WA 98273

360.416.7013|800.864.3555|F: 360.899.4754

www.nsbhaso.org

North Sound BH-ASO Annual Crisis Assessment

2023

Table of Contents

- Executive Summary..... 5
 - Summary Data and Analysis..... 9
 - Unduplicated People Served in Crisis System..... 10
- Regional Crisis Line (RCL) – Volunteers of America 11
 - Crisis Line Performance..... 13
 - Crisis Call Center Demographics 13
 - Age Group 13
 - Funding Source..... 14
 - Ethnicity 15
 - Primary Language..... 16
 - Gender 17
- Regional Designated Crisis Responder (DCR) Dispatches 17
 - Crisis Dispatch Performance Metrics 18
 - ITA Detentions and Detention Rates 19
 - Per Capita Detention Rates..... 20
 - Detentions..... 21
 - Population..... 21
 - Per Capita Detention rate 22
 - Regional Detention Rates..... 22
- DCR Investigation Metrics..... 24
 - Referral source 24
 - Partnering with Law Enforcement 25
 - Investigation Reasons 26
 - Investigation Outcomes 27
 - Investigation Outcome Grouping..... 29
 - Unavailable Detention Facility Reports..... 30
- Dispatch and Detainment History..... 32
- Place of Service for DCR Investigations..... 33
 - Place of Service for Investigation Compared by County..... 34
- Crisis Services – Mobile Rapid Response Crisis Teams 35
 - Comparison of Crisis Service Place of Service by Month 35
 - Count of Crisis Services by County and Place of Service..... 36

North Sound BH-ASO Annual Crisis Assessment

2023

- Telehealth Place of Service – Crisis and Investigation Services 37
- Crisis Service (H2011) Demographics..... 38
 - Age Group 39
 - Funding Source..... 39
 - Ethnicity 40
 - Primary Language..... 41
 - Gender 41
- Contract Crisis Metric Summary and Report Cross Reference 42
 - Exhibit E..... 42
 - 2022 Crisis Metric Deliverable 42
- Summary of Crisis System Coordination..... 43
 - List of Coordination Activities 43
 - Description of Coordination Activities 43
 - Criminal Justice System..... 44
 - Successes..... 45
 - Opportunities 45
 - At the Provider Level..... 45
 - Local Crisis Oversight Committees..... 45
 - Care Continuum - Project Highlights..... 47
- Summary of Crisis Plans 48
 - Background 48
 - Successes..... 48
 - Challenges 48
 - Care Coordination Protocols 48
- Summary of Strategies Used to Improve the Crisis System..... 49
 - Crisis line and Mobile Crisis Outreach 49
 - Crisis Stabilization and Withdrawal Management Facilities 49
 - Crisis Care Coordination and Management 49
 - Information and Data About the Disposition of Crisis Calls..... 49
 - Overview 49
 - Analysis 50
- System Coordination..... 51
 - Coordination of Referrals to Provider Agencies or MCOs for Case Management..... 51

North Sound BH-ASO Annual Crisis Assessment

2023

Awareness of Frequent Crisis Line Callers 51

Reduction of Law Enforcement Involvement with the Crisis System 51

Crisis System Data – Quality Improvement 52

Crisis Service Voice Project 53

2023 Key Opportunities 53

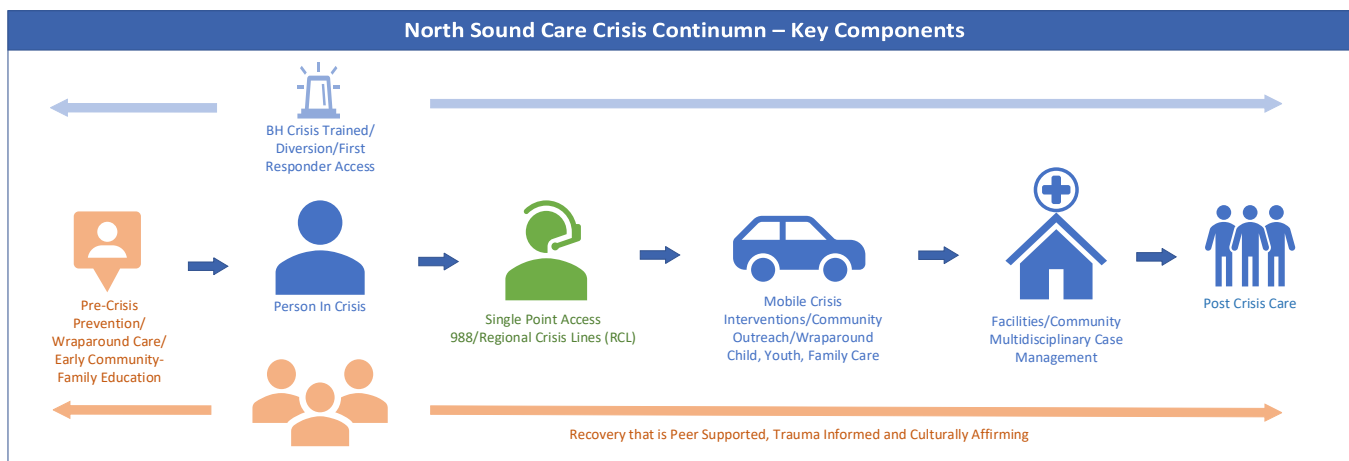
North Sound BH-ASO Annual Crisis Assessment 2023

Executive Summary

No single crisis is the same, and no single crisis requires the same intervention. Crisis services are available 24/7 and are intended as a no-wrong door safety net for “anyone, anywhere and anytime”. North Sound BH-ASO continues our mission to administer a comprehensive and integrated care crisis continuum that is an effective approach to suicide prevention and a defense in preventing unnecessary loss of life. This includes, but not limited to a continuum of services and programs such as our Regional Crisis Line (RCL), mobile crisis response and community outreach programs, crisis receiving facilities and post crisis follow up care that addresses the individual’s recovery needs, is peer supported, trauma informed and culturally affirming.

North Sound BH-ASO continues our partnership with the Health Care Authority (HCA) on implementing 988 that will include major regional service and infrastructure enhancements aimed to improve and provide a higher quality of crisis system response. Our commitment to integrating the full spectrum of crisis system best practices outlined by the Substance Abuse Mental Health Service Administration (SAMHSA) and the National Council for Behavioral Health and the National Association of Mental Health Program Directors (NAMHPD) will further strengthen a more robust care crisis continuum that is agile, responsive and provides individuals the care they need.

Although system challenges remain and service gaps persist, North Sound BH-ASO strives in partnership to ensure a well-integrated care crisis continuum.



North Sound BH-ASO’s prior [Annual Crisis Assessments](#) identified key regional opportunities to improve or expand service delivery as part of our strategic planning. One major theme continues for North Sound BH-ASO: leverage our region’s robust collaboration structure to implement new or enhanced services. This includes programs such as law enforcement, fire and EMS co-responders, Child, Youth and Family Crisis Teams (CYFCT), endorsed Mobile Rapid Response Crisis Teams (MRRCT), Youth Navigator Program (YNP) and building sustainability for existing programs such as the Recovery Navigator Program (RNP), Assisted Outpatient Treatment (AOT) and Homeless Outreach and Stabilization Teams (HOST). In addition, our crisis Behavioral Health Agencies (BHAs) have successfully embedded Mental Health Care Professionals (MHCP) and Certified Peer Counselors (CPC) within our Regional Crisis Line (RCL) and MRRCT teams.

North Sound’s five-county region has been fortunate to be awarded several Department of Commerce (DOC) capital grants for new or enhanced facilities to include Crisis Stabilization, 23-Hour Crisis Relief Centers, and Long-Term Civil Commitment facilities (LTCC). These investments will be a critical step in needed receiving facility capacity, though work continues to ensure sustainability of operations across payer systems.

North Sound BH-ASO Annual Crisis Assessment

2023

Lastly, the critical work to improve care coordination within a multi-payer system for crisis services continues. This includes information sharing and referral protocols between payers and providers for high need individuals. North Sound BH-ASO continues our regional project management and technical assistance, started in 2020, in partnership with Point Click Care (formally Collective Medical Technology), Managed Care Organizations (MCOs), Statewide Administrative Service Organizations (ASOs) and the Health Care Authority (HCA). North Sound BH-ASO continues our advocacy and recommendation for a practical, coordinated solution that allows information sharing for individuals experiencing a behavioral health crisis. In addition, North Sound BH-ASO and our county partners have supported information sharing platforms for law enforcement co-responder programs to better coordinate care and make referrals for ongoing services.

2023 marked a year of internal planning for our organization's strategic plan for racial justice for the services and programs we are funding. Following our 18-month Diversity Racial and Equity Initiative (DREI) we have begun mapping key initiatives in the coming years that will support our region's knowledge and action to address socioeconomic and racial inequalities in our system of care.

Our *2023 Annual Crisis Assessment* will focus on crisis services delivered and provide a summary of the development, implementation, and outcomes of activities and strategies used to improve the crisis system. We will also review previous opportunities identified in our 2022 Annual Crisis Assessment and outline a summary of our Community Information and Education Plan (CIEP) as well as our regional *Crisis Voice* initiative to integrate individual, family, and community voice into our strategic planning.

Executive summary of key findings for 2022:

A summary and analysis about each region's crisis system, to include information from the quarterly crisis system reports, callers funding sources (Medicaid, non-Medicaid, other) and caller demographics including age, gender, and ethnicity.

Report Reference Pages: [Summary of Data](#)

Key Findings

1. Regional Crisis Line (RCL) Activities

Calls to the Regional Crisis Line (RCL) have remained elevated since peaks experienced during 2020-2021.

- The monthly number of calls to the RCL decreased slightly, averaging 3,973 a month in 2023 down from 4,139 calls a month in 2022. The total number of annual calls decreased from 49,663 calls in 2022 to 47,681 in 2023.
- The RCL was able to meet the key metrics for answering calls within 30 seconds and kept the abandonment rate below 5%. Their performance significantly improved during 2023 with call abandonment rate remaining below 1% during the May to December reporting period.

2. ITA Investigation Activities

- The total number of dispatches for Involuntary Treatment Act (ITA) investigations slightly decreased from 4,807 in 2022 to 4,783 in 2023. Dispatches decreased throughout the year and represented a net decrease of 0.5% when compared with 2022.
- Average Designated Crisis Responder (DCR) ITA dispatch time continued to be under two (2) hours.

North Sound BH-ASO Annual Crisis Assessment

2023

- A. The detention “rate” per 10,000 population decreased from 2022 to 2023, 13.5 per 10,000 to 13.2. The number of average monthly detentions was 150.5 in 2022 and decreased to 149.8 in 2023 and was between 131 and 165 a month.

A summary of crisis system coordination activities with external entities, including successes and challenges. External entities addressed in the summary must include but are not limited to regional Managed Care Organizations (MCOs), community behavioral health providers, First Responders, partners within the criminal justice system, and Tribal entities.

Reference Pages: [Summary of Crisis System Coordination](#)

Key Findings

1. North Sound maintains an extensive array of regional coordination activities to include the North Sound BH-ASO/MCO Joint Operating Committee (JOC), Integrated provider meetings, County Crisis Coordination Meetings, and Crisis Services Leadership meetings.
2. North Sound BH-ASO and our County partners have implemented focused problem-solving collaboratives to include leadership representation from law enforcement, co-responder programs, crisis agencies and other outreach providers to coordinate service delivery and streamline information sharing.
3. In partnership with Tulalip Tribe, Snohomish County, HCA, and the Department of Health (DOH), various coordination meetings were held to support implementation of Tulalip’s Tribal DCR for 2024. North Sound BH-ASO provided technical assistance, DCR shadowing, and supported various coordination discussions in 2023 that will continue through 2024.
4. North Sound BH-ASO continued our partnership with regional Tribes and HCA on developing and implementing Tribal Crisis Coordination plans.
5. North Sound BH-ASO is actively partnered with HCA and our provider network through various state-wide and national workgroups for the planning and development of new program standards and services. This includes MRRCT, Community Based Teams, RNP, HOST, Co-Responder and CYFCT-MRSS.
6. North Sound and our crisis provider network continued our partnership with the State’s 988 and SB 1688 planning and participating in various state led workgroups to coordinate and improve the care crisis continuum.

Successes:

- Maintained and developed new automated reports to include MCO high utilizer care management reports, DCR ITA Hearing and Less Restrictive Alternative (LRA) reports, and Crisis-Trueblood Coordination reports. These reports are produced bi-monthly and uploaded to a SFTP site to aid in care coordination and referral efforts.
- Tulalip’s Tribal DCR was invited and attends North Sound BH-ASO’s Crisis Leadership structure and County Crisis Coordination meetings and currently implementing DCR protocols with Snohomish County Superior Court and local hospitals.
- Onboarded and trained crisis agencies to Point Click Care (PCC) platform that will support access to pertinent treatment and crisis plan information to include the development of a regional resource and training guide for providers as part of their onboarding with the platform.
- Supported the implementation of localized cross-system case coordination structures between DCRs, law-enforcement/first responders, co-responder programs and other providers directly involved in the care of an individual to better coordinate service delivery.

North Sound BH-ASO Annual Crisis Assessment

2023

- Held various local workgroups to develop and update stakeholder RCL and DCR workflows for emergency departments and law enforcement.

Challenges:

- Work remains to fully implement an information sharing platform across a multi-payer and provider network. Significant barriers to implementation include:
 - Ensuring state requirements support Medicaid information sharing with Administrative Service Organizations (ASOs) for appropriate coordination of crisis services.
 - Supporting a practical method for Behavioral Health Agencies (BHAs) to upload crisis plans or other pertinent treatment information into a shared repository to aid coordination.

A summary of how Individual’s crisis prevention plans are used to inform DCRs dispatched on crisis visits, reduce unnecessary crisis system utilization, and maintain the Individual’s stability. Include in the summary an analysis of the consistency of use and effectiveness of the crisis prevention plans.

Reference Pages: [Summary of Crisis Plans](#)

Key Findings

- Regional BHA Medicaid crisis prevention plans remain limited or not available to inform DCRs dispatched on crisis visits. Exceptions include DCR’s employed by larger BHAs in which the individual may be concurrently served on an outpatient or in a residential setting within the same entity. Our DCR network attempts to obtain any crisis prevention plan.
- North Sound’s Regional Crisis Line (RCL) can support the development of crisis preventions plans and if one is available can be provided as part of the DCR dispatch. Crisis Prevention plans are only relevant if the information is current to the individual’s circumstance. Key information within the crisis prevention plan includes natural supports, current treatment team or other providers are often the most useful for crisis teams to coordinate and exhaust all less restrictive alternatives.
- North Sound BH-ASO continues our recommendation for a practical solution to share critical information for individual experiencing a behavioral health crisis Fully implementing a system that reduces administrative or other technical barriers for BHAs to provide and allow access to crisis prevention plans will lead to better and more appropriate coordination of services.

Provide a summary of the development, implementation, and outcomes of activities and strategies used to improve the crisis system.

Reference Pages: [Summary of Strategies to Improve the Crisis System](#)

Key Findings

- Continued our regional crisis system budget analysis that evaluates funding and staffing needs to meet new state requirements.
- Maintained RCL funding and additional funding for suicide prevention follow up support.
- Implemented Child, Youth and Family Crisis Teams (CYFCT) and Mobile Response and Stabilization Services (MRSS).

North Sound BH-ASO Annual Crisis Assessment

2023

- Successfully embedded Mental Health Care Professionals (MHCP) and Certified Peer Counselors (CPC) within our Regional Crisis Line (RCL) and MRRCT teams.
- Expanded funding for law enforcement and first responder co-response programs.
- Expanded DCR capacity for law enforcement and first responder coordination.
- Implemented multi-party care coordination groups that focus on supporting high utilizers of the crisis system.
- Continued capacity funding for current crisis stabilization and withdrawal management facilities to serve non-Medicaid persons in Island, Snohomish, Skagit, and Whatcom counties.
- Continued ASO/County planning for new facilities to include 23-hour Crisis Relief Centers, Crisis Stabilization and Long-Term Civil Commitment Facilities.

Summary Data and Analysis

North Sound Crisis Calls Period From Jan-23 To Dec-23

	crisis calls	Calls Answered	Calls LT 30 sec	Average answer time (sec)	Calls Abandoned
Prior 12 mo. Avg	3,973	3,951	3,751	0:00:15	23
Min	3,511	3,483	3,300	0:00:12	4
Max	4,547	4,533	4,301	0:00:24	62
St dev	272	275	285	0:00:03	19
Dec-23	3,710	3,691	3,569	0:00:14	19
Current Month	✔	✔	✔	✔	✔

North Sound Investigations Period From Jan-23 To Dec-23

	invest.	detentions	MH invest.	SUD invest.	MH and SUD invest.	Referred from Law Enforcement	avg dispatch response time hrs.
Prior 12 mo. Avg.	399	150	248	21	125	38	1.52
Min	357	131	214	8	108	23	1.12
Max	448	165	268	31	149	53	1.93
Standard dev.	27	9	15	6	14	9	0.25
Dec-23	372	131	214	16	141	30	1.73
Current Month	✔	✘	✘	✔	✔	✔	✔

	Detentions and Commitments	Less Restrictive Options MH	Voluntary MH Treatment	Other	No Detention Due to Issues	Place of Service Prison - Correctional	
Prior 12 mo. Avg.	162	6	140	87	4	62	
Min	144	1	120	69	2	45	
Max	179	10	158	100	9	86	
Standard dev.	10	2	13	9	2	10	✔
Dec-23	144	8	134	79	7	58	✔
Current Month	✔	✔	✔	✔	✔	✔	✘

✔ Inside 2 stdev
✔ at 2 stdev
✘ outside 2 stdev

North Sound BH-ASO Annual Crisis Assessment 2023

Unduplicated People Served in Crisis System

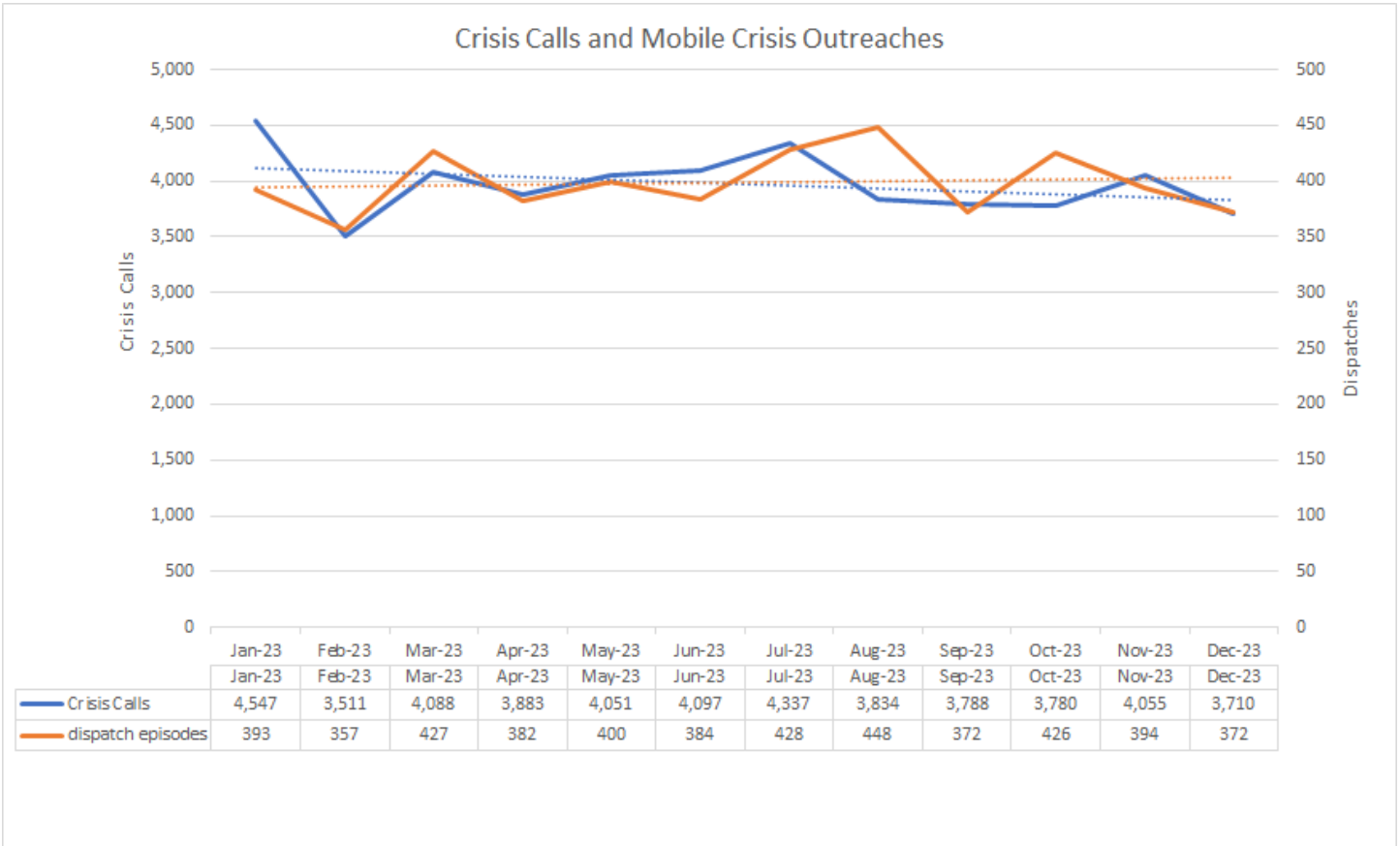
The table included below is an unduplicated count of people across all three crisis system services - crisis calls, ITA investigations and crisis services (MRRCT). All totals are unduplicated totals of people across the subcategories.

Unduplicated People	fund source		Medicaid Total	Non Medicaid			Non Medicaid Total	Undup. Total
	Medicaid			Crisis Call	Crisis Service	Investigation		
	Crisis Call	Crisis Service						
Month	Crisis Call	Crisis Service	Total	Crisis Call	Crisis Service	Investigation	Total	Total
Jan-23	496	395	891	435	330	341	953	1,665
Feb-23	478	359	837	353	301	300	834	1,510
Mar-23	501	422	923	437	357	361	997	1,728
Apr-23	432	366	798	375	303	322	862	1,474
May-23	484	401	885	426	315	353	945	1,628
Jun-23	466	356	822	421	319	346	926	1,572
Jul-23	447	319	766	483	328	372	990	1,578
Aug-23	396	316	712	471	320	381	991	1,528
Sep-23	384	302	686	427	269	280	846	1,383
Oct-23	378	286	664	426	302	356	917	1,412
Nov-23	359	278	637	386	292	328	857	1,329
Dec-23	354	285	639	385	266	319	838	1,323
Undup. Total	3,339	2,748	6,087	4,033	2,890	3,135	8,463	12,720

Unduplicated People	fund source		Medicaid Total	Non Medicaid			Non Medicaid Total	Undup. Total
	Medicaid			Crisis Call	Crisis Service	Investigation		
	Crisis Call	Crisis Service						
Month	Crisis Call	Crisis Service	Total	Crisis Call	Crisis Service	Investigation	Total	Total
2022	3,514	2,878	6,392	4,052	3,045	3,129	8,669	13,290
2023	3,339	2,748	6,087	4,033	2,890	3,135	8,463	12,720
Undup. Total	5,970	4,963	10,933	7,619	5,554	5,695	15,855	23,384

The table above shows a 4.3% decrease compared to 2022 in the number of unduplicated individual's receiving a crisis service in 2023. As discussed under *Crisis Calls* below, during 2023 we saw a moderate decrease in call volumes and individuals served through the Crisis Line.

North Sound BH-ASO Annual Crisis Assessment 2023



Regional Crisis Line (RCL) – Volunteers of America

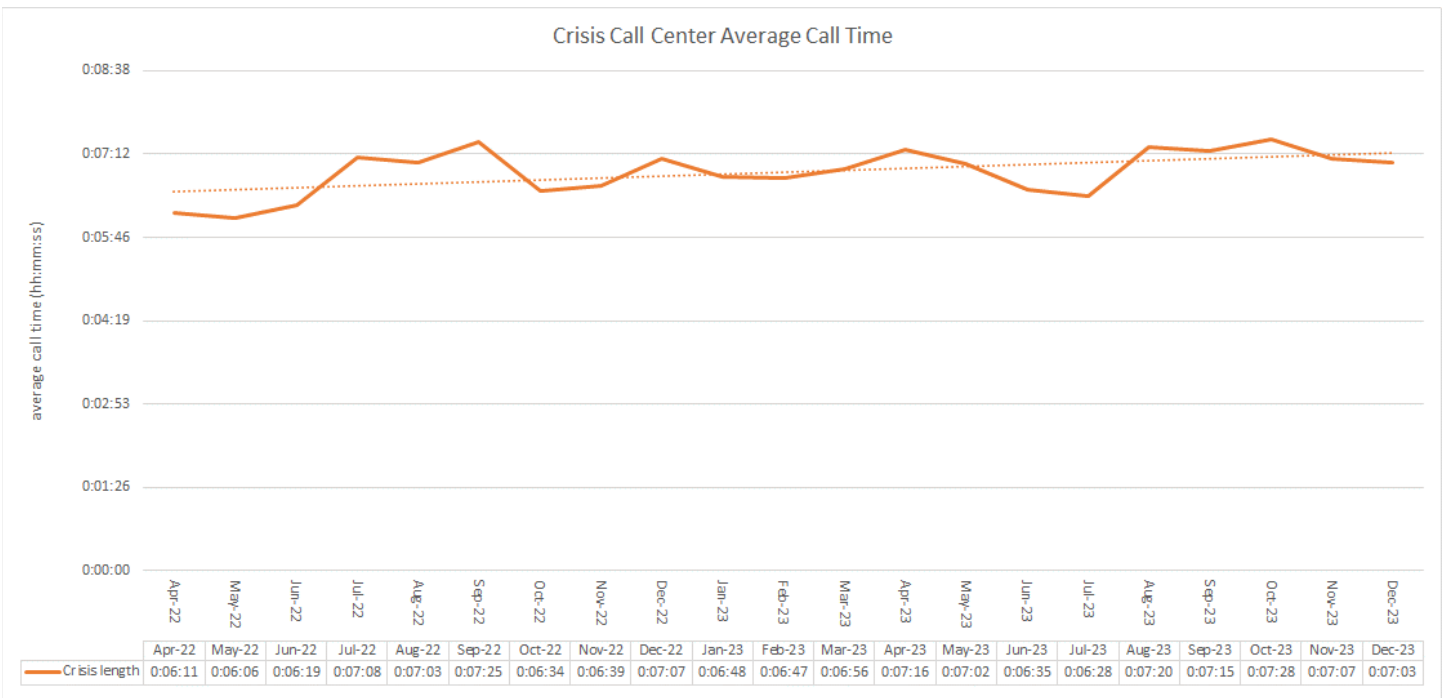
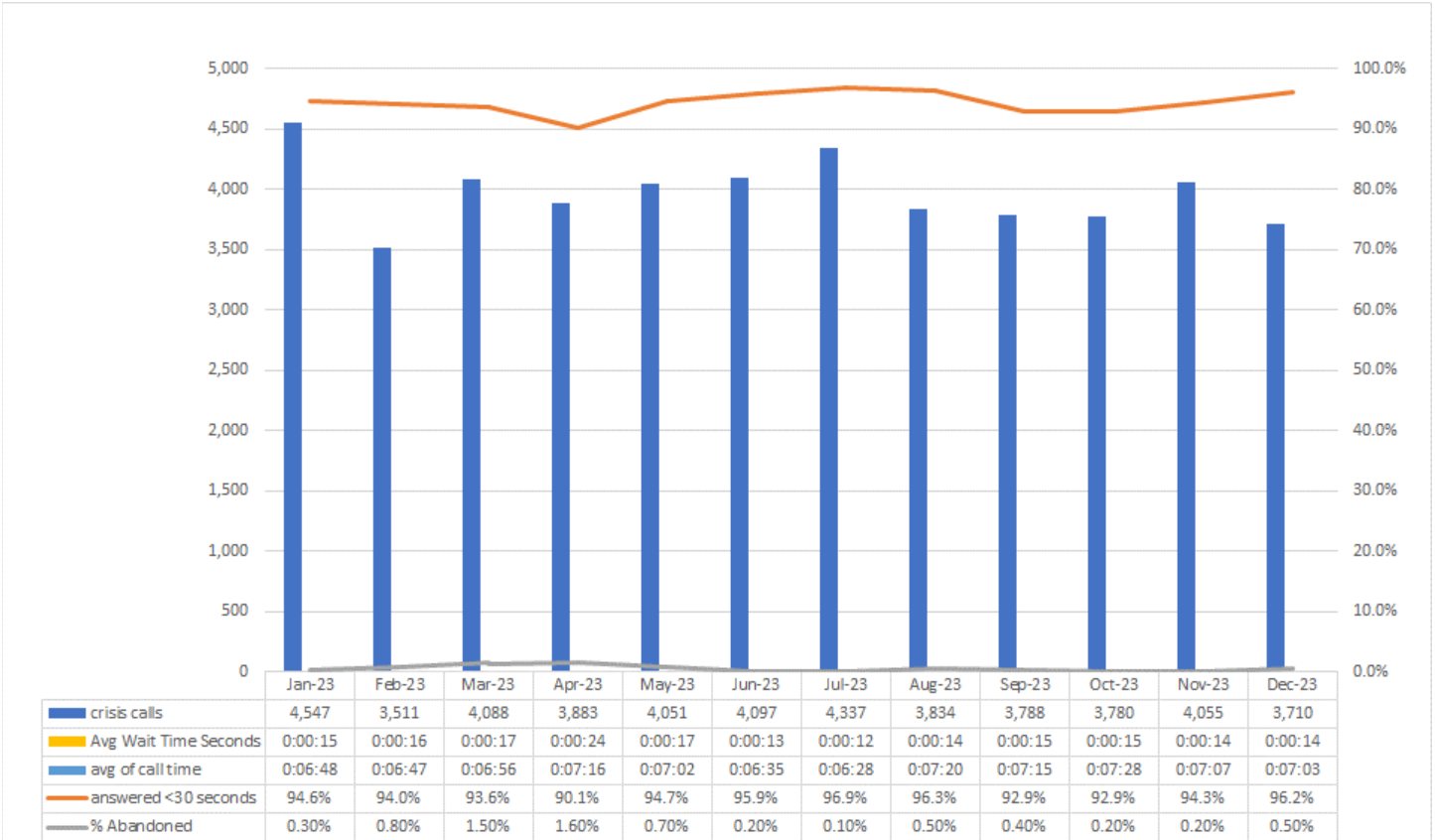
Crisis Lines are often the first point of contact for an individual experiencing a behavioral health crisis. Crisis Lines are available on a 24-hour basis and provide immediate interventions to stabilize and help link the individual to ongoing behavioral health and community support. Volunteers of America (VOA) has been North Sound Region’s centralized RCL for over 25 years and is staffed by professionally trained behavioral health professionals who employ a range of interventions from supportive listening and suicide prevention techniques to making immediate triage referrals for mobile crisis response. North Sound BH-ASO’s RCL plays a critical role in coordinating dispatch for DCRs and mobile crisis response. VOA is also our regional 988 contact hub and maintains coordination and warm handoff protocols between 988 and our RCL for DCR or MRCCT dispatch.

In 2023, North Sound’s RCL handled 47,681 total calls, which was a 4.0% increase from 2022 volumes. As indicated in the graph below “Crisis Calls Monthly Comparison”, the number of monthly crisis calls had a steady decreasing trend in 2023, with the most call volumes occurring in January with 4,547 total monthly crisis calls.

The percentage of calls answered in less than 30 seconds, percent of calls abandoned, and average wait times have continued extraordinary metric improvements begun in 2022 to the VOA crisis call line services. Staffing is reported as the primary cause of the improvement, but implementation of the 988 line coincides with these improvements also.

North Sound BH-ASO Annual Crisis Assessment 2023

Crisis Calls Monthly Comparison



North Sound BH-ASO Annual Crisis Assessment 2023

Crisis Line Performance

North Sound BH-ASO maintains HCA contract performance standards of 90% for all calls to be answered within 30 seconds and a call abandonment rate of less than 5%. These performance metrics replicate National call center standards and ensure callers are connected to a live clinician as soon as possible. Inbound crisis calls to the RCL are only answered by trained clinicians without placing the caller in a waiting queue. Call abandonment rate is defined as a caller who hangs up after 30 seconds prior to connecting to a live clinician.

VOA’s call performance consistently outperformed required metrics for 2023. VOA maintained an average 94.4% rate for calls answered in less than 30 seconds and 0.6% for abandonment rate.

As noted in the “Crisis Calls Monthly Comparison” graph above, crisis calls answered in less than 30 seconds did not fall below the 90% benchmark in 2023. The lowest monthly percent was 90.1% in April.

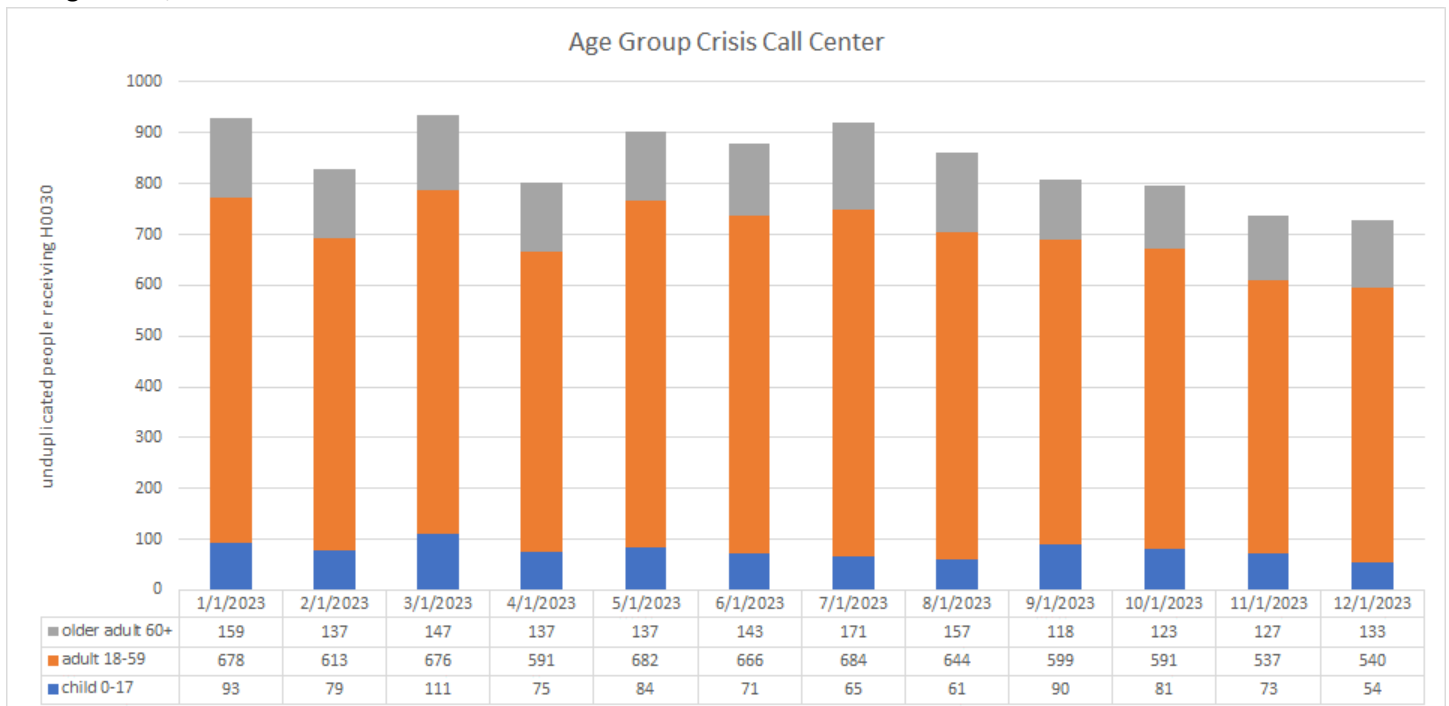
Call abandonment rate maintained a 5.0% or better performance. Call abandonment rate was the highest in Q2 of 2023 at 1.6% for the month of April, though there was sustained improvement month over month, with abandonment rate dropping to a low of 0.1% in July.

Crisis Call Center Demographics

Crisis caller demographic data is monitored monthly and reported as a quality improvement activity. Demographic data is routinely compared to population demographics to assess how the crisis system is serving the region’s population and whether service improvements can be identified to strengthen outreach efforts. Call demographics are difficult to obtain during a crisis call due to the nature of the service. VOA continues to attempt to collect as much demographic information as possible without causing stress or undue burden on the caller. We will briefly outline the demographic data for crisis call by Age Group, Funding Source, Ethnicity, Primary language, and Gender.

Age Group

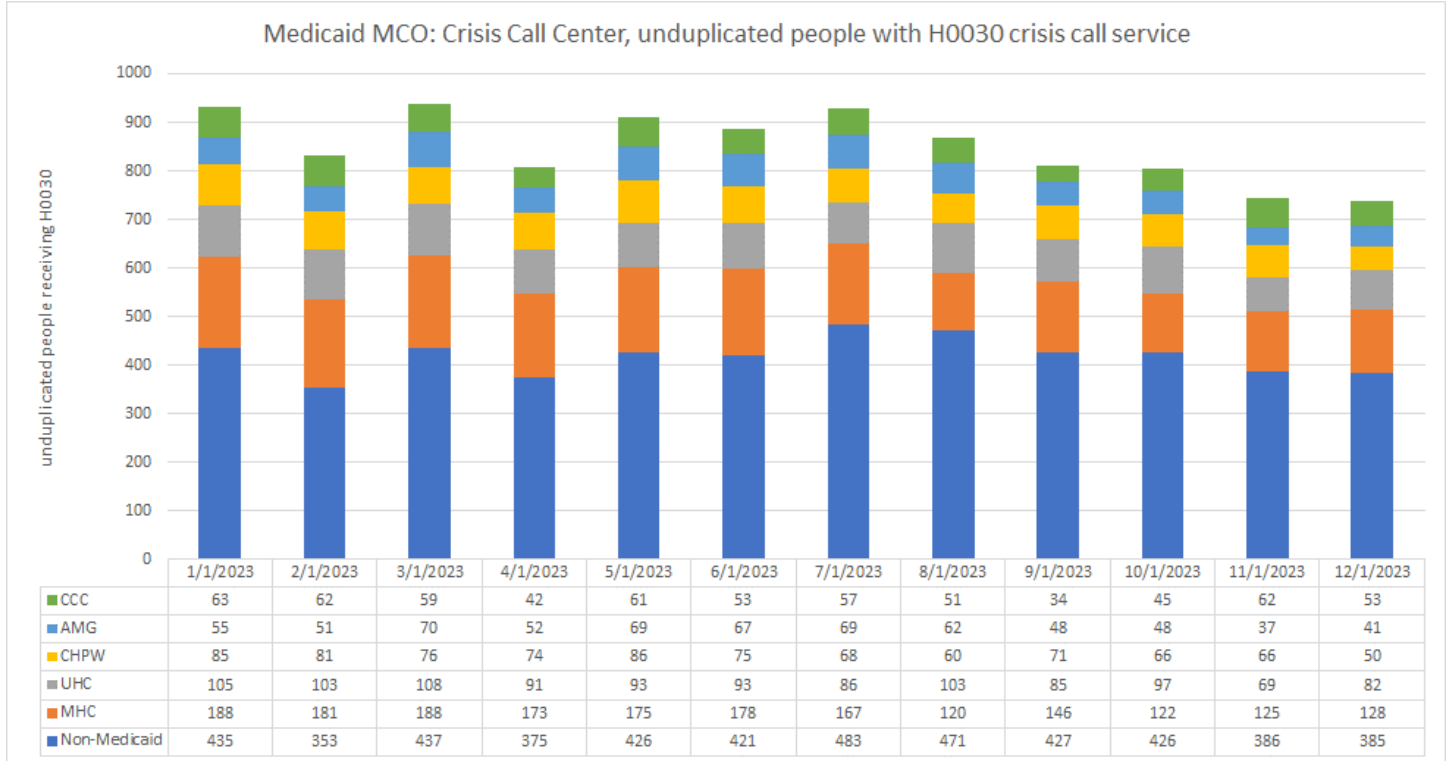
For ages 0-17, 18-59 and 60+



North Sound BH-ASO Annual Crisis Assessment 2023

Children aged 0-17 years of age represented 11.1% of crisis calls in 2023, while Adults aged 18-59 accounted for 72.9% and older adult 60+ years accounted for 16.3%. Although not the focus on this year’s report, VOA’s [Crisis Chat](#) program provides targeted suicide prevention and emotional support services with a high rate of children (0-17) and transition age (18-25) adults utilizing this service.

Funding Source

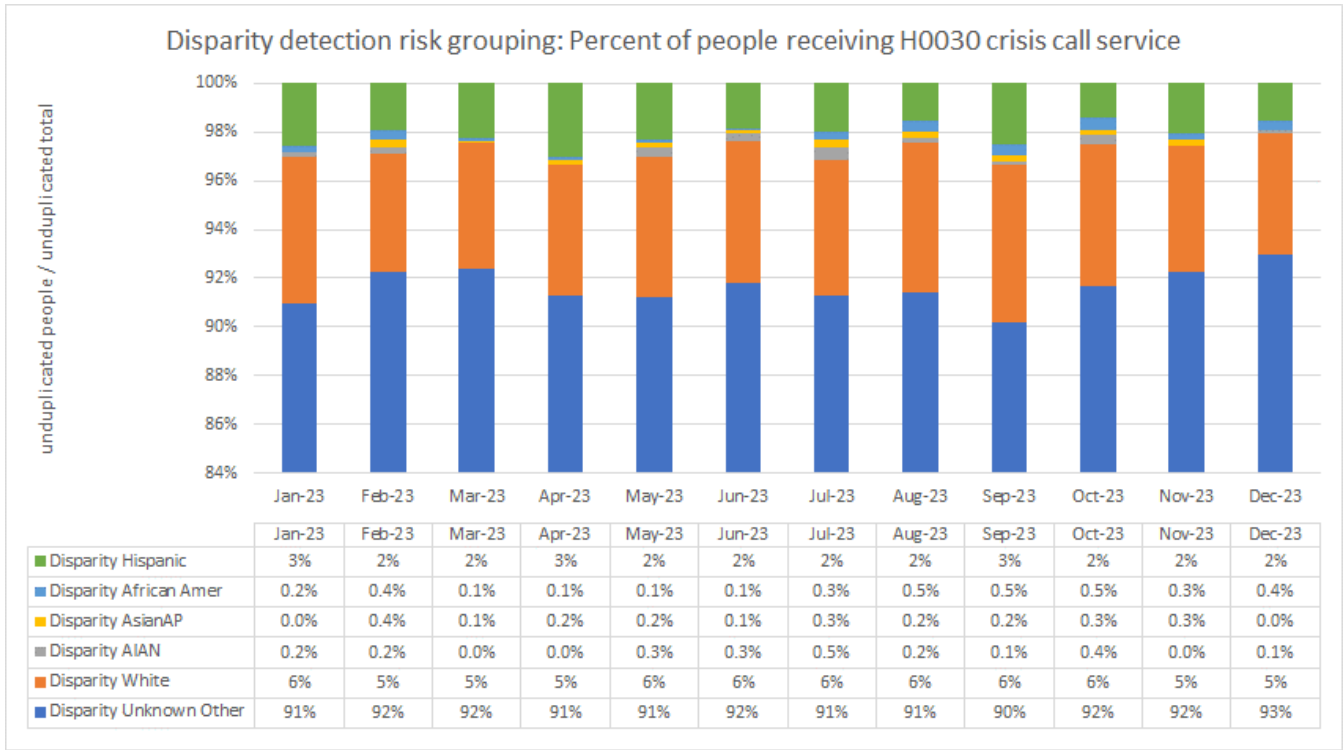


In 2023, 43.4% of the individuals accessing the crisis line were identified as belonging to an Apple Health Plan while 56.6% of the individuals were not linked to an Apple Health Plan at the time of the call. This contrasts with 2022 where 56.0% of individuals accessing the crisis line was identified as non-Medicaid, while 44.0% were identified to be connected to a Medicaid benefit and assigned to a Managed Care Organization (MCO).

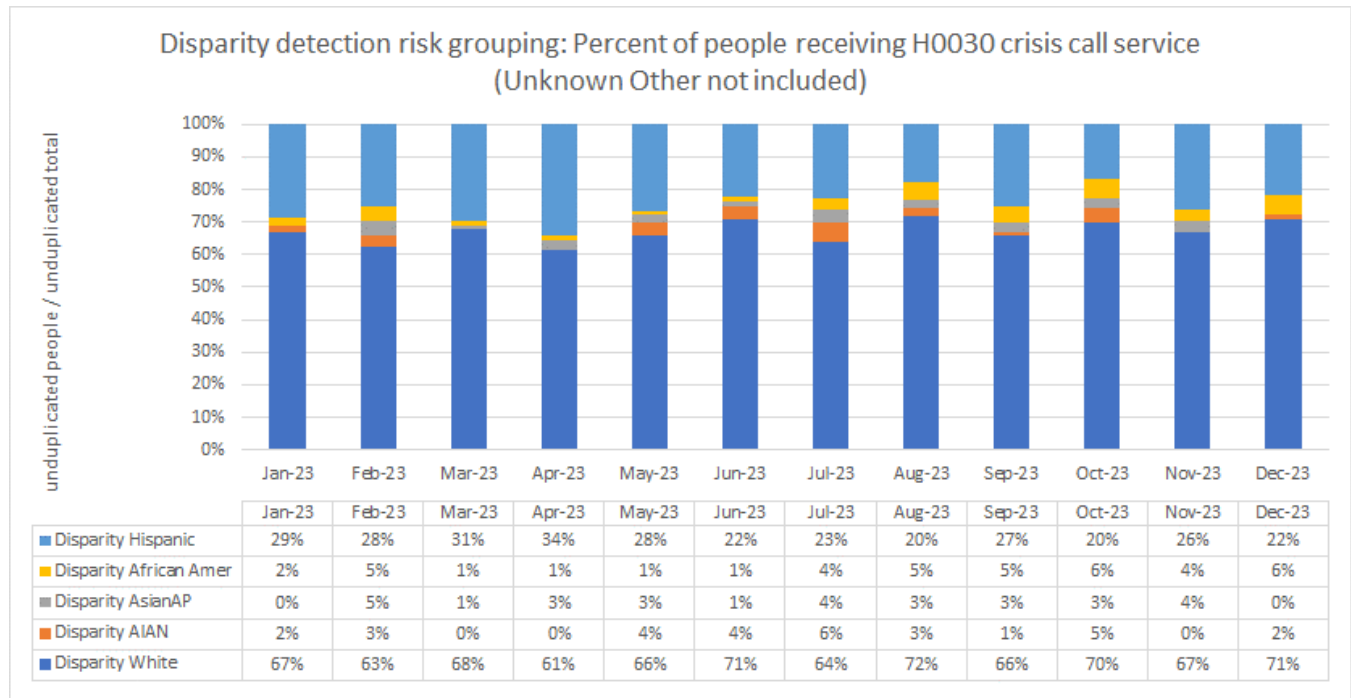
North Sound BH-ASO Annual Crisis Assessment 2023

Ethnicity

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



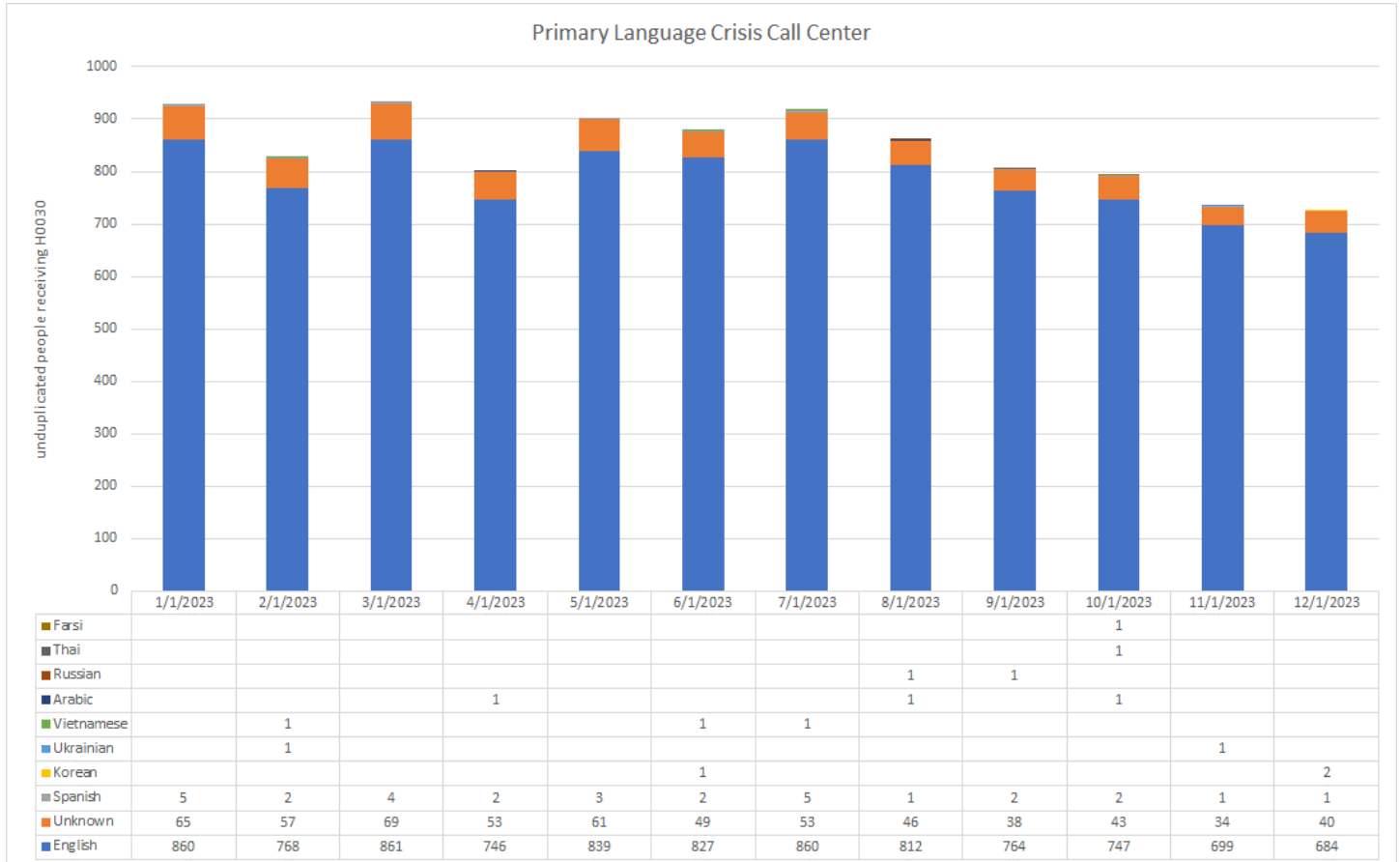
The below graph shows Ethnicity grouping when 'other / unknown group' is excluded.



North Sound BH-ASO Annual Crisis Assessment 2023

Primary Language

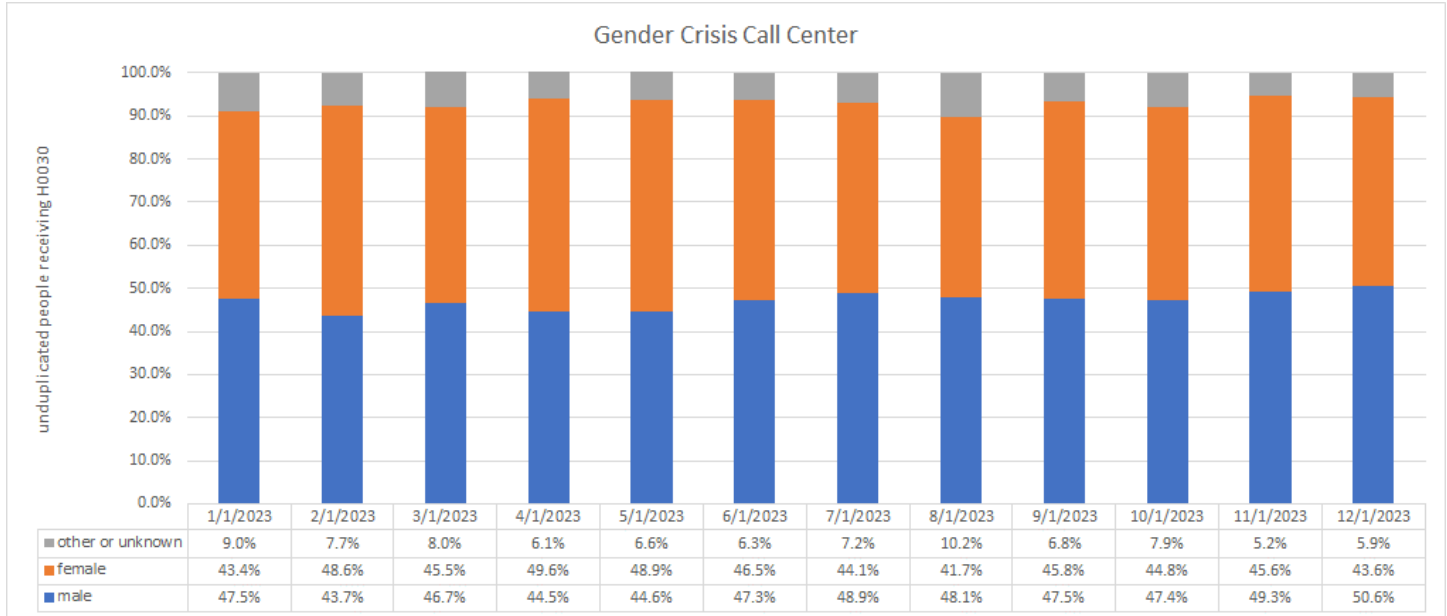
English as a primary language represented 93.0% of total 2023 calls to the RCL, while “unknown” represented 6.5%. As indicated below, callers with a primary language of Spanish, Korean, Ukrainian, Russian, Vietnamese, Arabic, Farsi, and Thai called into the crisis line at least once in 2023.



North Sound BH-ASO Annual Crisis Assessment 2023

Gender

The below graph shows a monthly comparison of gender of either Male, Female or Other/Unknown. In 2023, 47.6% callers identified as Male, 44.6% identified as Female and 8.1% identified as Other/Unknown. 2022 in comparison, was 46.9%, 44.1% and 9.2% respectively. Gender categories replicated state reporting.



Regional Designated Crisis Responder (DCR) Dispatches

In 2023, there was a total of 4,783 dispatches for an ITA investigation in the North Sound Region. A breakdown by county is shown in the table below. The North Sound Region saw a 0.64% decrease in regional DCR dispatches when compared to 2022.

year	county					Grand Total	
	year	Island	San Juan	Skagit	Snohomish		Whatcom
dispatches	2022	114	42	505	3,294	859	4,814
	2023	142	40	511	3,297	793	4,783
% dispatches	2022	2.4%	0.9%	10.5%	68.4%	17.8%	100.0%
	2023	3.0%	0.8%	10.7%	68.9%	16.6%	100.0%
Total dispatches		256	82	1,016	6,591	1,652	9,597
Total % dispatches		2.7%	0.9%	10.6%	68.7%	17.2%	100.0%

North Sound BH-ASO Annual Crisis Assessment

2023

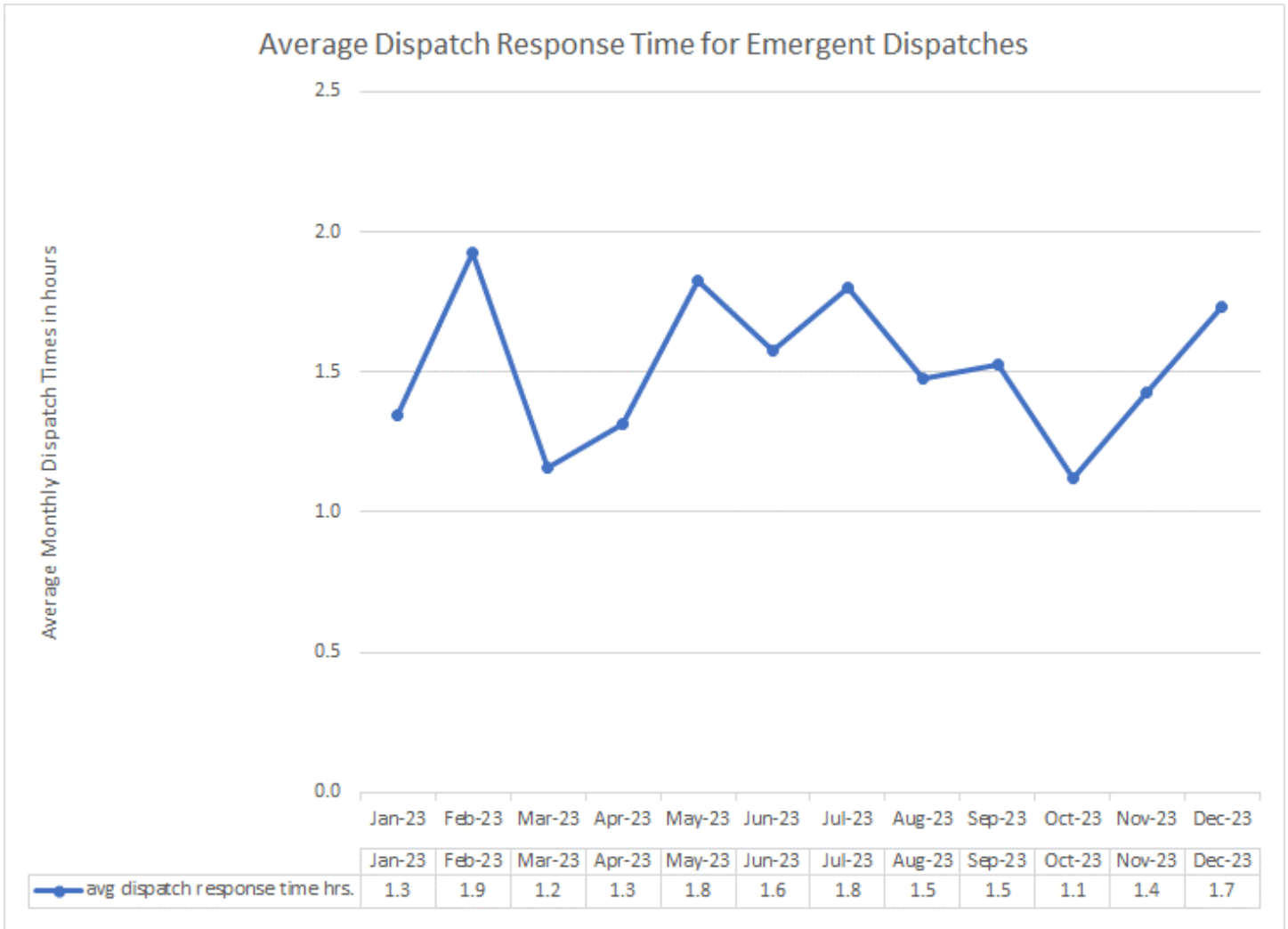
Crisis Dispatch Performance Metrics

Dispatch and ITA investigation data is captured through service transactions submitted by our DCR agencies. DCR response times are indicated as emergent (2-hours), or urgent (24-hours) requests. North Sound's RCL and DCR agencies triage referrals for dispatch and determine the response need according to North Sound BH-ASO's policies and procedures.

In 2023, DCR response for emergent (2-hour) dispatches continued to outperform the standard. The graph below shows average monthly DCR response times. 2023 Q1 and Q2 had a 6-month average of 1.5 hours, while Q3 and Q4 6-month also averaged 1.5 hours. The 2023 total percentage of emergent dispatches that were responded to within two (2) hours was 86.8%. The 2023 total percentage of urgent dispatches that were responded to within twenty-four (24) was 99.8%.

month	avg Time
1/1/2023	1.3
2/1/2023	1.9
3/1/2023	1.2
4/1/2023	1.3
5/1/2023	1.8
6/1/2023	1.6
7/1/2023	1.8
8/1/2023	1.5
9/1/2023	1.5
10/1/2023	1.1
11/1/2023	1.4
12/1/2023	1.7
Grand Total	1.5

North Sound BH-ASO Annual Crisis Assessment 2023



ITA Detentions and Detention Rates

The number of DCR investigations that resulted in an initial detention remained stable across all five counties in the North Sound Region. Compared to 2022’s total detentions of 1,808, there were 1,797 detentions in 2023 with a regional per capita rate of 13.2. As illustrated in the graph below “*Detentions per 10,000 Populations All Ages*”, detentions for all age ranges saw a decrease in the rate from 13.5 in 2022 to 13.2 in 2023.

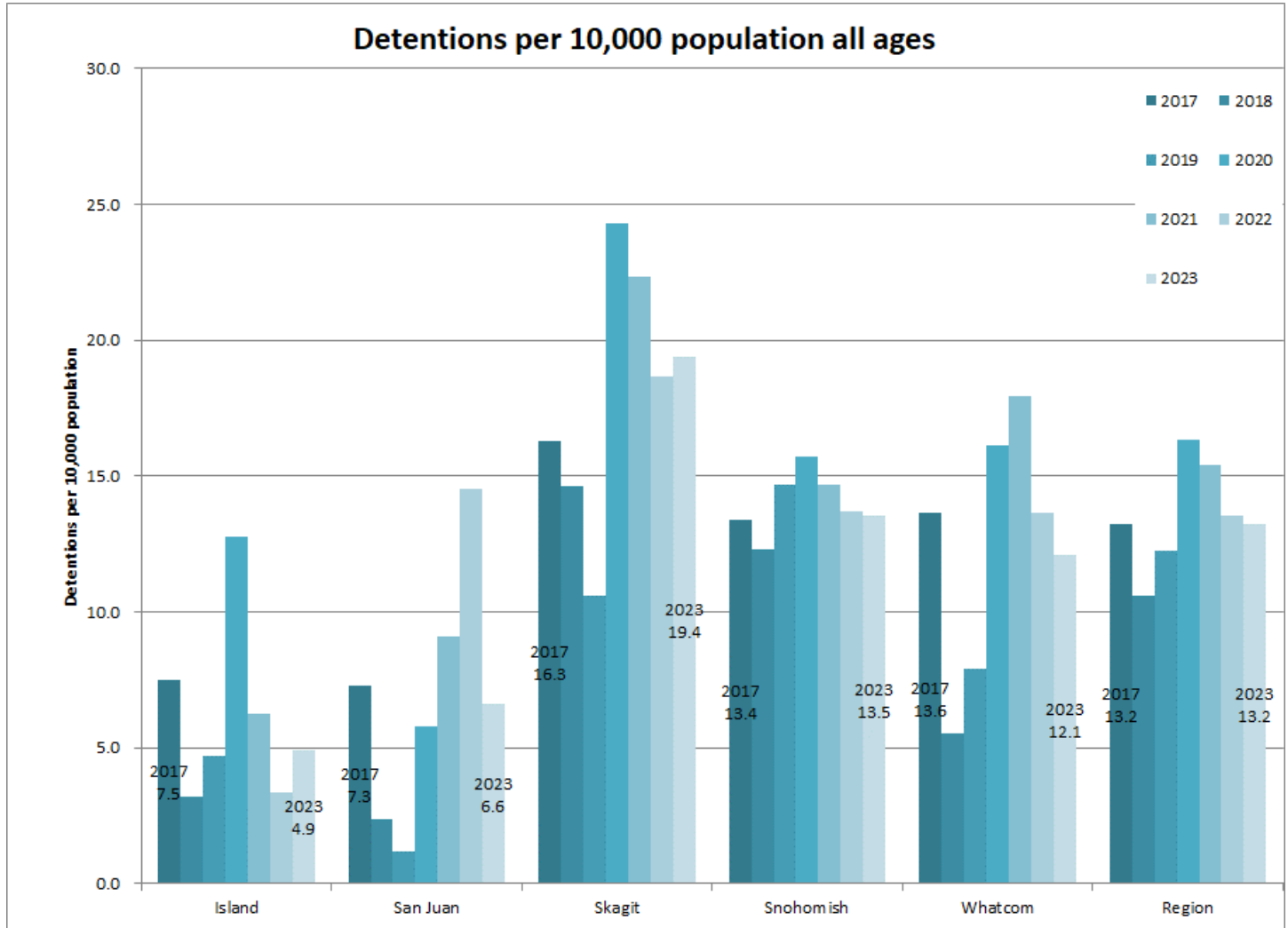
As you will note in the “*Detentions per 10,000 population*” grids below, comparing the rate of detentions in 2022 to 2023, there was a regional decrease from detentions to detentions per 10,000. Snohomish, Whatcom and San Juan counties saw a decrease in detentions when compared to the previous year while Island and Skagit County saw an increase.

The 2023 detention rate, which is a comparison of the number of DCR dispatches to initiated ITA holds, differed in trending between our two contracted crisis agencies. Snohomish County’s 2023 detention rate was 36%, which was the same as the 2022 rate. Compass Health’s detention rate for Skagit, Whatcom, Island County and San Juan County was 41% in 2023, also the same as the 2022 rate.

North Sound BH-ASO Annual Crisis Assessment 2023

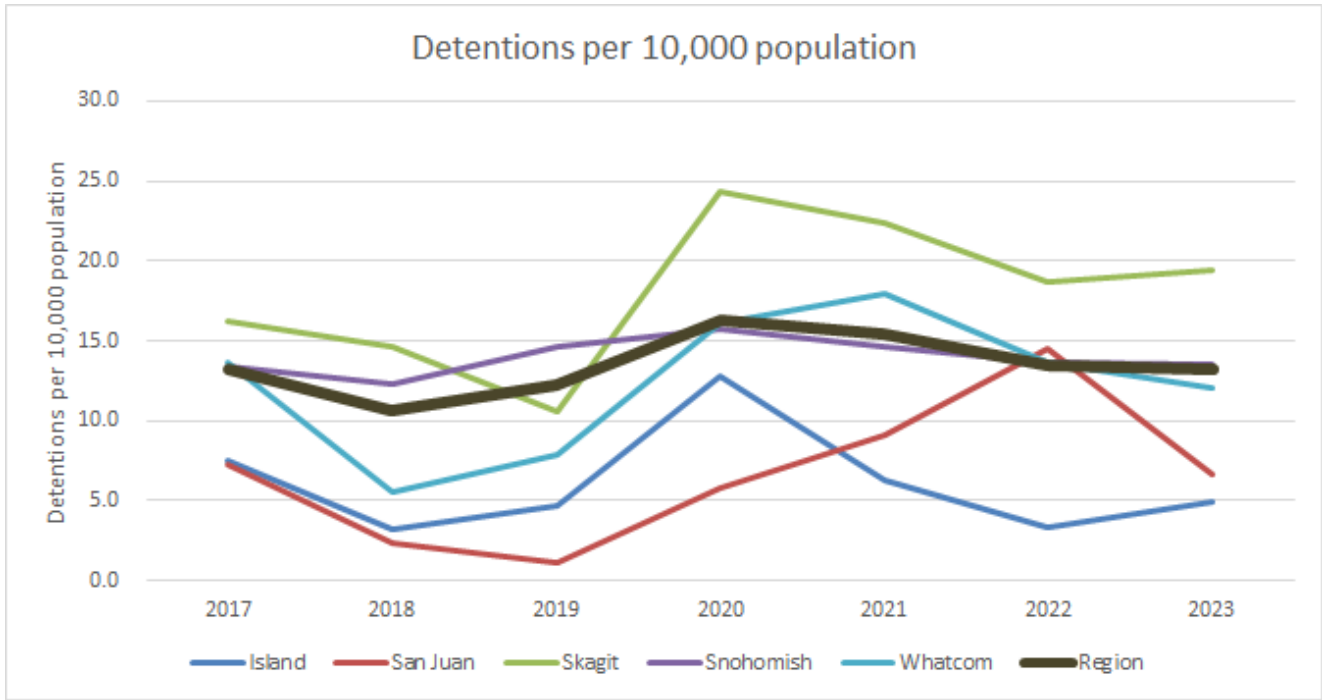
The region experienced an overall decrease in the number of total detentions and a decrease in regional detention rates from 2022 levels and the data shows we are now at the ITA services in 2016-2017. We discuss further in the report under [Dispatch and Detainment History](#), broader behavioral health service impacts.

Per Capita Detention Rates



North Sound BH-ASO Annual Crisis Assessment

2023



2023 is imputed based on current data available.

Detentions

detention count	year of detention							Proj.
County	2017	2018	2019	2020	2021	2022	2023	2023
Island	62	27	40	109	54	29	43	43
San Juan	12	4	2	10	16	26	12	12
Skagit	202	185	137	317	297	252	266	266
Snohomish	1,057	989	1,203	1,303	1,244	1,178	1,184	1,184
Whatcom	295	122	178	368	417	323	291	291
Grand Total	1,628	1,327	1,560	2,107	2,028	1,808	1,796	1,796

Population

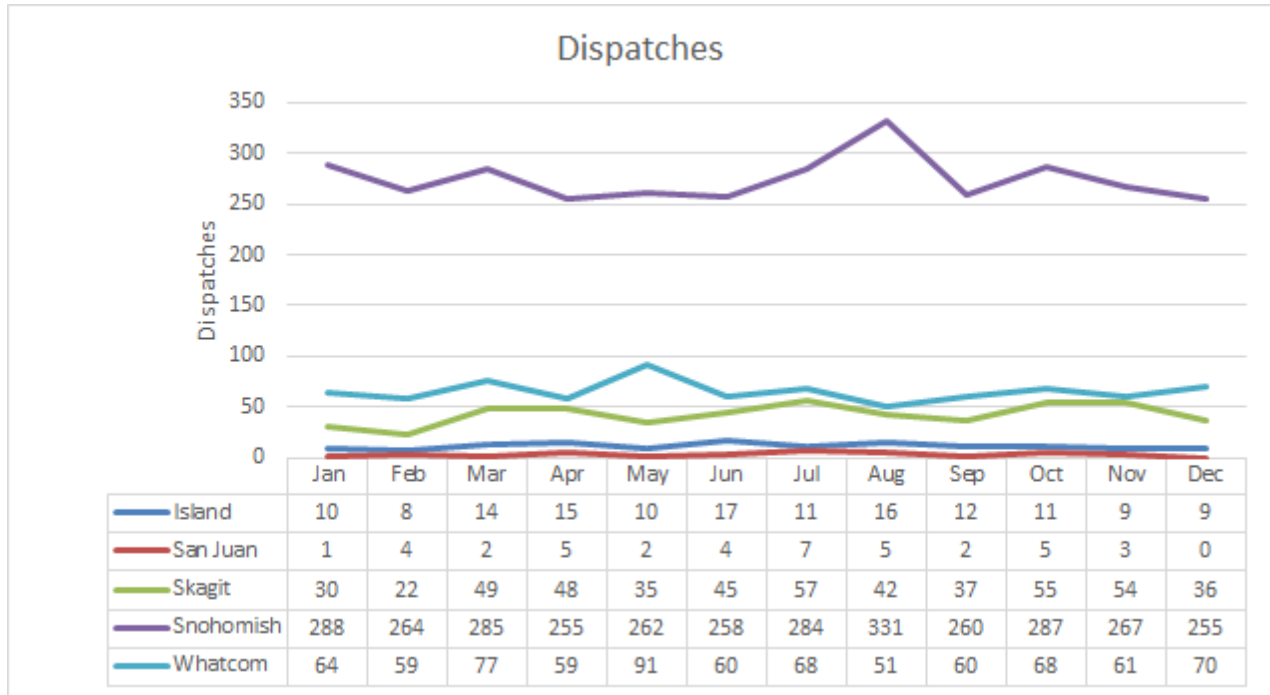
County	2017	2018	2019	2020	2021	2022	2023
Island	82,790	83,860	84,820	85,530	86,163	86,890	87,821
San Juan	16,510	16,810	17,150	17,340	17,630	17,898	18,182
Skagit	124,100	126,520	129,200	130,450	132,946	135,092	137,267
Snohomish	789,400	805,120	818,700	830,500	846,690	861,148	874,785
Whatcom	216,300	220,350	225,300	228,000	232,474	236,466	240,472
Grand Total	1,229,100	1,252,660	1,275,170	1,291,820	1,315,903	1,337,494	1,358,526

North Sound BH-ASO Annual Crisis Assessment 2023

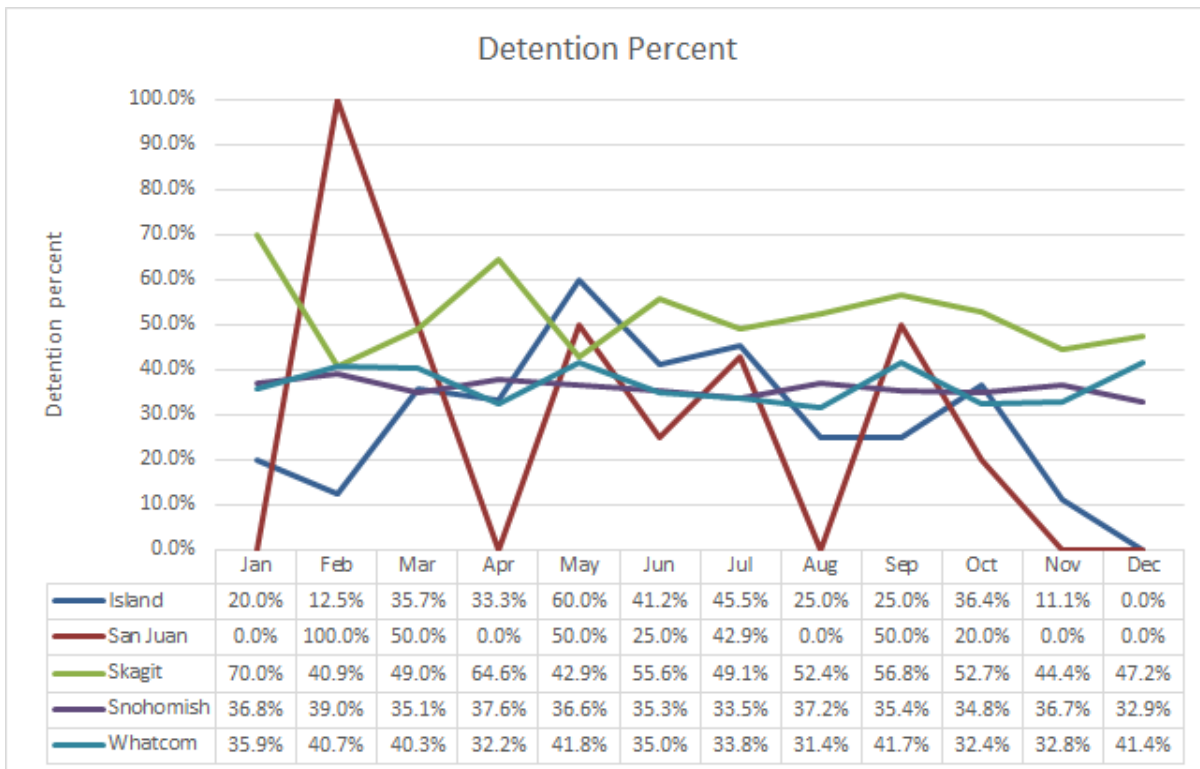
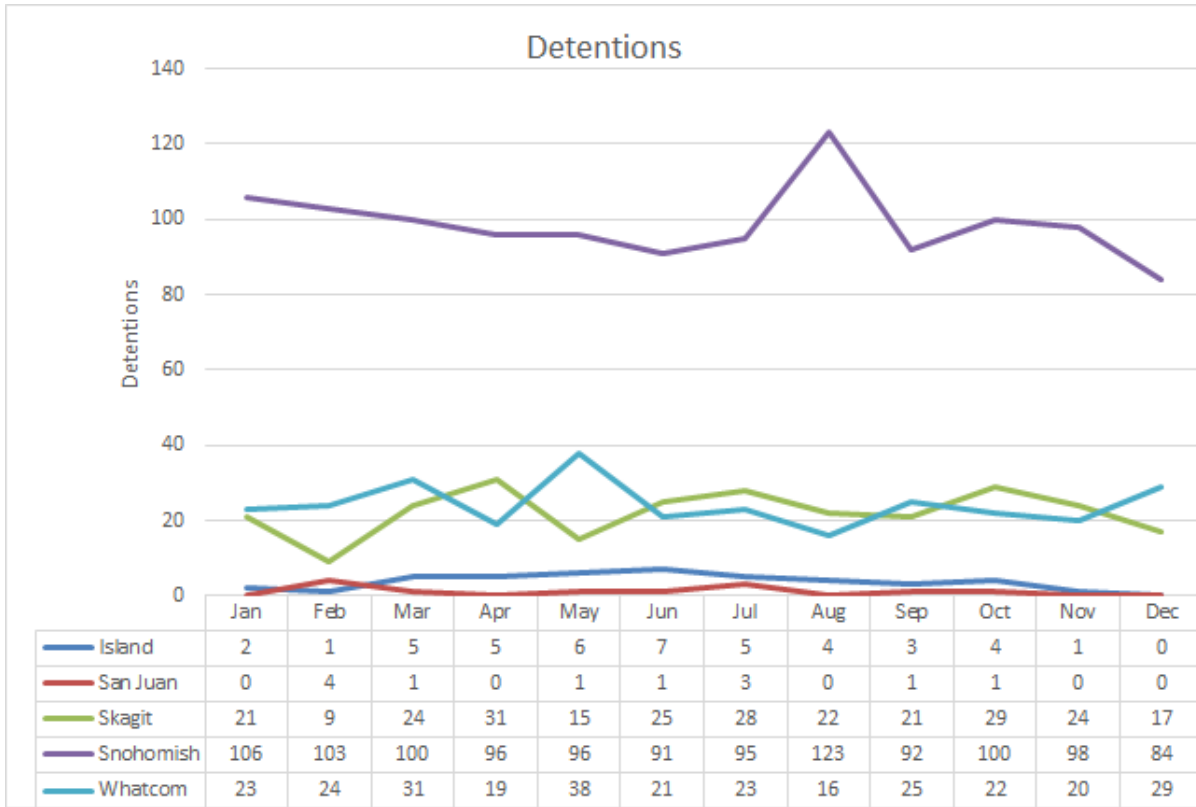
Per Capita Detention rate

Detention Rates per 10,000 Population							Projected
county	2017	2018	2019	2020	2021	2022	2023
Island	7.5	3.2	4.7	12.7	6.3	3.3	4.9
San Juan	7.3	2.4	1.2	5.8	9.1	14.5	6.6
Skagit	16.3	14.6	10.6	24.3	22.3	18.7	19.4
Snohomish	13.4	12.3	14.7	15.7	14.7	13.7	13.5
Whatcom	13.6	5.5	7.9	16.1	17.9	13.7	12.1
Region	13.2	10.6	12.2	16.3	15.4	13.5	13.2

Regional Detention Rates



North Sound BH-ASO Annual Crisis Assessment 2023



North Sound BH-ASO Annual Crisis Assessment

2023

DCR Investigation Metrics

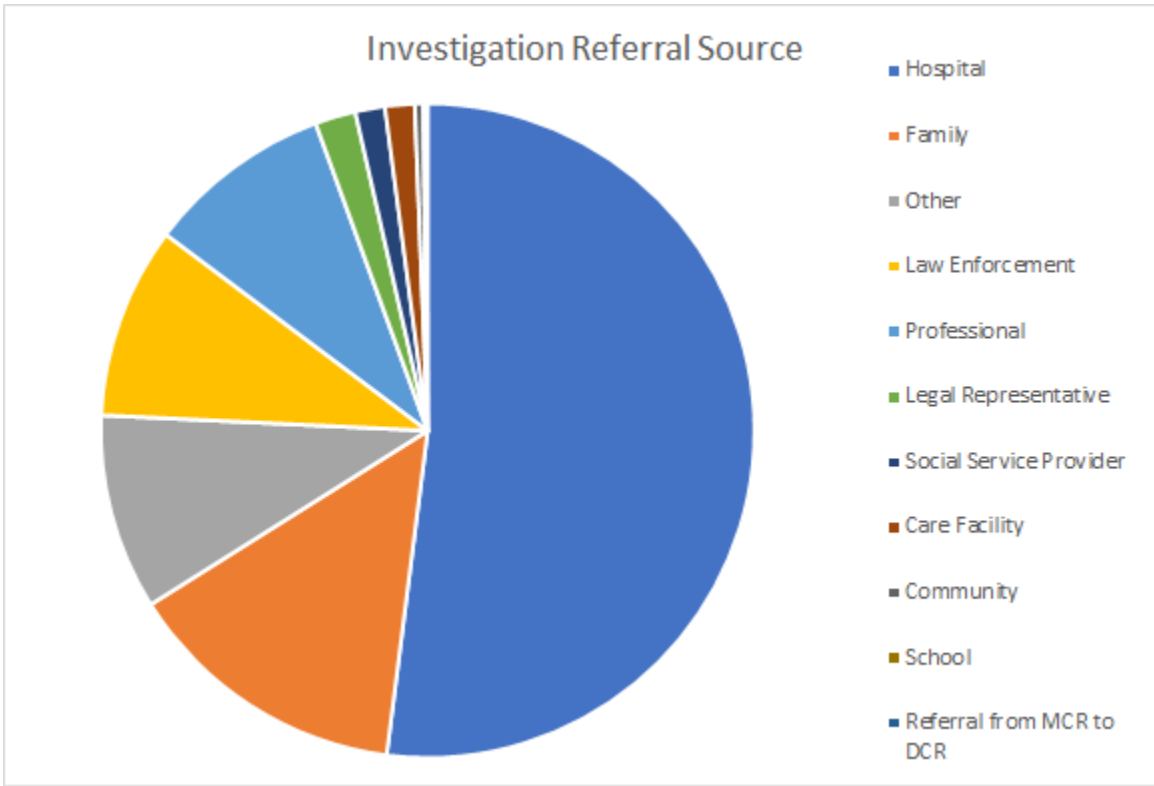
North Sound investigation data is monitored monthly to include DCR referral source, investigation reason, and outcome. This data is monitored for utilization purposes and illustrates how behavioral health and community partners are accessing crisis services, the underlying treatment need for ITA services and investigation outcomes, which could include diversion activity to more appropriate levels of care.

Referral source

As outlined in the 2023 *Investigation Referral Source* grid below, Hospital settings made the most referrals for DCR investigations, followed by family, “other”, law enforcement and Professional.

Sum of investigations referral source	county					Grand Total
	Island	San Juan	Skagit	Snohomish	Whatcom	
Hospital	83	18	316	1,568	501	2,486
Family	9	3	12	587	62	673
Other	4	1	65	333	59	462
Law Enforcement	42	16	105	210	80	453
Professional	2	1	5	409	23	440
Legal Representative	1		2	86	7	96
Social Service Provider	1		3	38	28	70
Care Facility			2	42	26	70
Community				18	2	20
School				6	1	7
Referral from MCR to DCR		1			2	3
Grand Total	142	40	510	3,297	791	4,780

North Sound BH-ASO Annual Crisis Assessment 2023



Partnering with Law Enforcement

Law enforcement referrals for ITA investigations increased 1.8% in 2023 compared to 2022 with a total number of referrals at 471. Compared to 2021, this would be a 2-year increase of 1.6%. County and local Law Enforcement partners continue to report unmet behavioral health needs likely not reflected in the number of referrals received by our crisis agencies.

% invest. referral source	county 2021	2022	2023	Grand Total
Hospital	62.2%	54.1%	52.0%	56.1%
Family	12.3%	14.6%	14.1%	13.6%
Other	7.1%	9.8%	9.7%	8.8%
Law Enforcement	7.9%	7.7%	9.5%	8.4%
Professional	6.0%	8.7%	9.2%	8.0%
Legal Representative	1.1%	1.7%	2.0%	1.6%
Care Facility	1.4%	1.1%	1.5%	1.3%
Social Service Provider	1.1%	1.2%	1.5%	1.2%
Community	0.6%	0.8%	0.4%	0.6%
School	0.1%	0.2%	0.1%	0.2%
Referral from MCR to DCR	0.2%	0.1%	0.1%	0.1%
Grand Total	100.0%	100.0%	100.0%	100.0%

North Sound BH-ASO Annual Crisis Assessment

2023

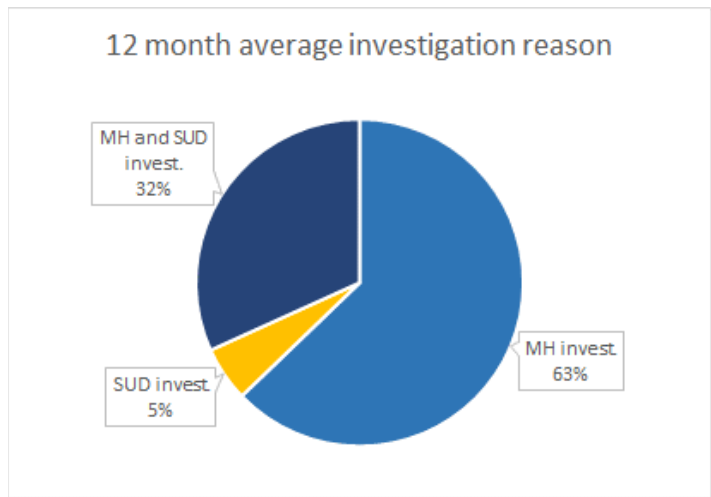
A potential reason for the increase in DCR referrals from law enforcement is the expansion criminal justice diversion programs in 2021-2022 to include the Recovery Navigator Program (RNP) and co-responder programs. North Sound continues our co-responder funding and implementation plan that includes funding initiatives with five (5) law enforcement agencies to embed behavioral health professionals and other staff to provide pre-arrest, early diversion engagement and case management for individuals who have frequent criminal legal system contact, at risk of arrest and have unmet behavioral healthcare needs.

In 2024 we aim to target our funding plan to expand capacity within Fire/EMS agencies. Law enforcement co-response programs marked a transition away from traditional H2011 Medicaid crisis services to a more community-based response model. North Sound BH-ASO is well positioned to support state planning to evaluate co-responder programs as a Medicaid billable service.

Name	Location/Jurisdiction	Funding Source
Whatcom County Co-Response Outreach	Bellingham, Whatcom County	State/Federal Funding, MHBG; GF-S; SABG
Snohomish County Sheriff Embedded SW	Snohomish County	Local Sales Tax, NSBHASO
Outreach Coordinator Program – Mount Vernon Police Department (expansion to MVP IOS – LEAD Model)	Mount Vernon Police Department Mount Vernon, Skagit County	Local Sales Tax, NSBHASO
Skagit County Sheriff’s Department	Skagit County	Local Sales Tax, NSBHASO
Island County Human Services – Co-Responder Behavioral Health Program	Island County	Local Sales Tax, NSBHASO

Investigation Reasons

Investigation reason is one metric to understand capacity needs for involuntary treatment. Investigation reasons are indicated as primarily related to mental health (MH), substance use disorder (SUD) or involved both MH and SUD. As indicated in the graph below, on average 37% of all investigations were related to some underlying SUD condition. Average monthly number of Investigations for SUD *only* decreased from 2022 levels at 19.8 to 2023 levels of 21.4, while MH *only* Investigations had an average of 248.0 and MH and SUD investigations had a monthly average of 125.4.



North Sound BH-ASO Annual Crisis Assessment 2023

Investigation Outcomes

Investigation outcomes are monitored monthly and outcome groupings are based on HCA defined categories. In the Investigation outcomes table below, you will see the percentage of investigations that either resulted in an initial ITA detention, referred to Less Restrictive (LRs), referred to Voluntary MH services, Unavailable Detention Facility Reports (No Bed Reports), or “Other”.

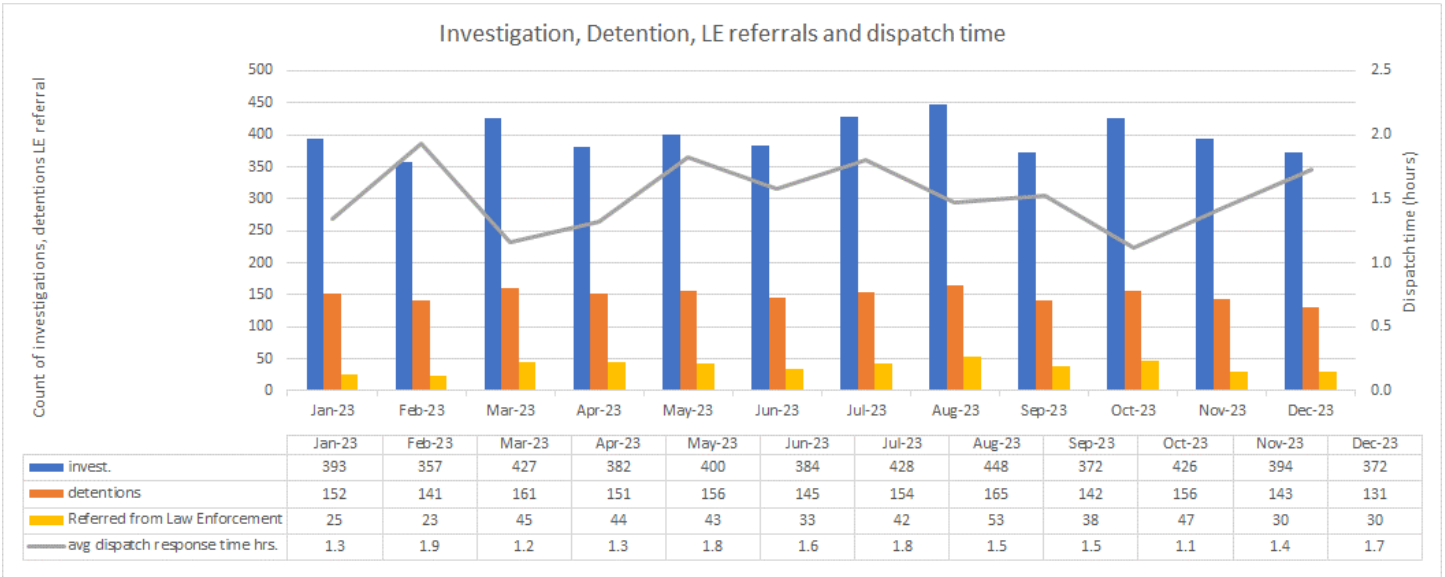
As the below tables indicate, the third most reported outcome, “Other” accounted for 21.7% of all investigation outcomes. For this report, “Other” is defined as “insufficient evidence to detain and the individual declined a referral to voluntary behavioral health services.”

DCR’s had a 26.6% reduction in No Detention Due to Issues category with a total of 47 (down from 64 in 2022), representing 0.98% of all investigations. Unavailable Detention Facility Reports are discussed further below.

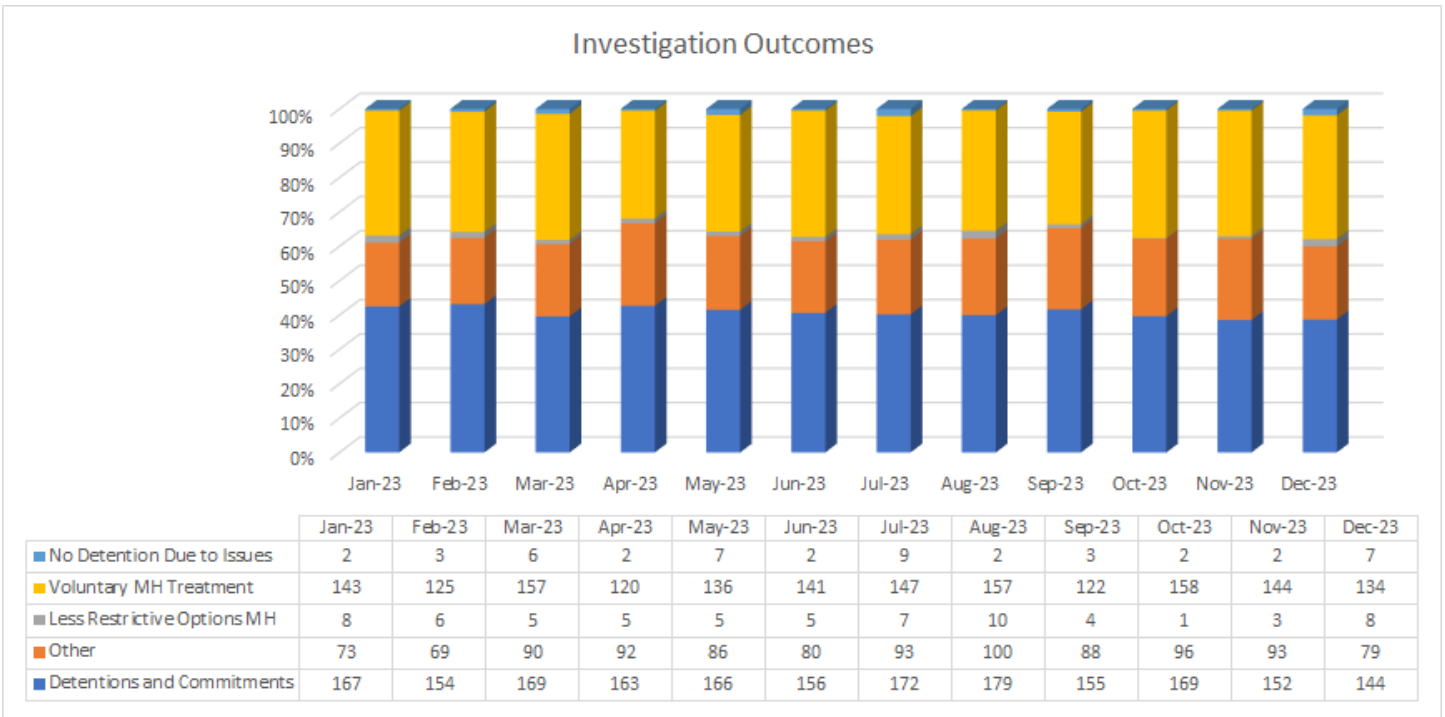
month	Detentions and Commitments	Other	Less Restrictive Options MH	Voluntary MH Treatment	No Detention Due to Issues
Jan-23	167	73	8	143	2
Feb-23	154	69	6	125	3
Mar-23	169	90	5	157	6
Apr-23	163	92	5	120	2
May-23	166	86	5	136	7
Jun-23	156	80	5	141	2
Jul-23	172	93	7	147	9
Aug-23	179	100	10	157	2
Sep-23	155	88	4	122	3
Oct-23	169	96	1	158	2
Nov-23	152	93	3	144	2
Dec-23	144	79	8	134	7
prior 12 mo. avg.	162	87	6	140	4
min	144	69	1	120	2
max	179	100	10	158	9

North Sound BH-ASO Annual Crisis Assessment 2023

North Sound Investigation Metrics over Time



Investigation Outcomes Over Time Percent of Total



North Sound BH-ASO Annual Crisis Assessment 2023

Investigation Outcome Grouping

The “State Investigation Outcome Group” grid below shows DCR investigation outcomes that mirror HCA investigation outcomes. As indicated, the *Detention and Commitment group* accounted for 40.69% of total outcomes, an increase of 0.06% from 2022 levels. Referrals to *Voluntary Mental Health Treatment* increased slightly from 2023 levels and accounted for 35.21%. Of the Voluntary MH Treatment group, *Referrals to Voluntary Outpatient Mental Health (MH) services* had the second largest percentage of reported outcomes at roughly 28.5%, a slight increase from 2022 levels. Referrals to *Voluntary Inpatient Services* had the third largest distinguishable outcome at 5.02%. Investigations with an outcome of either of the three (3) “other” groupings accounted for 21.72%.

State Group	Investigation Outcome	all invest. in period	Percent of total
Detentions and Commitments	Detention	1,760	36.80%
Detentions and Commitments	Detention to Secure Detox facility	37	0.77%
Detentions and Commitments	Returned to inpatient facility/filed revocation petition.	61	1.28%
Detentions and Commitments	Non-emergent detention petition filed	88	1.84%
Less Restrictive Options MH	Filed petition - recommending LRA extension.	67	1.40%
Voluntary MH Treatment	Referred to voluntary inpatient mental health services.	240	5.02%
Voluntary MH Treatment	Referred to acute detox	15	0.31%
Voluntary MH Treatment	Referred to chemical dependency inpatient program	11	0.23%
Voluntary MH Treatment	Referred to chemical dependency intensive outpatient program	7	0.15%
Voluntary MH Treatment	Referred to crisis triage	38	0.79%
Voluntary MH Treatment	Referred to sub acute detox	7	0.15%
Voluntary MH Treatment	Referred to voluntary outpatient mental health services.	1,363	28.50%
Voluntary MH Treatment	Referred to sobering unit	1	0.02%
Voluntary MH Treatment	Referred to chemical dependency residential program	1	0.02%
Voluntary MH Treatment	Referred for hold under RCW 70.96A	1	0.02%
Other	Other	843	17.62%
Other	Did not require MH or CD services	131	2.74%
Other	Referred to non-mental health community resources.	65	1.36%
No Detention Due to Issues	No detention - E&T provisional acceptance did not occur within statutory timeframes	11	0.23%
No Detention Due to Issues	No detention - Unresolved medical issues	33	0.69%
No Detention Due to Issues	No detention – Secure Detox provisional acceptance did not occur within statutory timeframes	3	0.06%
Grand Total	0	4,783	100.00%

North Sound BH-ASO Annual Crisis Assessment

2023

Unavailable Detention Facility Reports

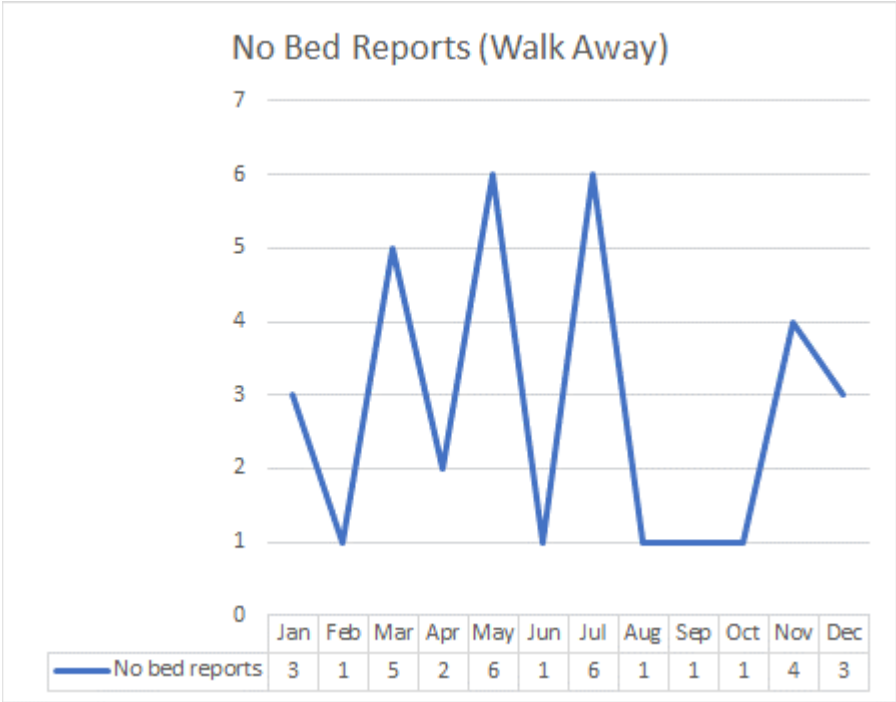
Unavailable Detention Facility Reports (No Bed Reports) are initiated if a DCR investigation meets detention grounds under RCW 71.05 or 71.34, but there are no Evaluation and Treatment (E&Ts) beds available and the DCR does not have the ability to place the individual under a Single Bed Certification (SBC). No Bed Reports (NBRs) are required to be filed to HCA within twenty-four (24) hours and ongoing DCR or MHP follow up and reassessments are coordinated between North Sound BH-ASO, our delegate RCL VOA and our DCR agencies.

As noted above, capacity for appropriate involuntary treatment (either at an E&T, SWMS or SBC setting) can impact the volume of DCR No Bed Reports. In 2023, the total number of DCR No Bed Reports decreased by 23 from 57 in 2022 to 34 in 2023. The largest number of NBRs were filed in Skagit, Whatcom, and Snohomish counties. As indicated in the grid below, NBRs disproportionately occurred in counties in which community hospitals are not certified to provide involuntary treatment under an SBC. A breakdown of NBRs by hospital is also outlined below.

No Bed Reports - County

walk aways investigation	County							Grand Total
	Island	San Juan	Skagit	Snohomish	Whatcom	Clallam	(blank)	
2020	25		19	18	2		1	65
2021	16	1	22	23	6			68
2022	8	1	22	19	6	1		57
Jan	2			4	1			7
Mar	2		1		1	1		5
Apr	1		4					5
May			2		1			3
Jun	2		1	3				6
Jul		1	1	2	1			5
Aug			2	4	2			8
Sep			2	1				3
Oct	1		2	2				5
Nov			3	2				5
Dec			4	1				5
Grand Total	49	2	63	60	14	1	1	190

North Sound BH-ASO Annual Crisis Assessment 2023



No Bed Reports - Hospital

walk aways investigation	hospital 2022	2023												Grand Total
		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
Cascade Valley Hospital	8	1		1		1		2		1			1	15
Island Health	1													1
Island Hospital	7			1		2		2						12
Olympic Medical Center	1													1
Peace Health United	1	1												2
Peace Island Health	2													2
Peace Island Medical											1			1
Providence	3													3
Providence - Colby	1													1
Providence			1											1
Providence, Everett	3													3
San Juan Co Jail	1													1
Skagit Valley	2			1								4	1	8
St Joes						1								1
St. Joes				1			1							2
St. Joes, Peace Health								1						1

North Sound BH-ASO Annual Crisis Assessment

2023

walk aways investigation	hospital 2022	2023												Grand Total
		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
St. Joseph	6													6
St. Joseph Medical Center				1										1
St. Josephs					1	1								2
St. Joseph's Hospital				1										1
Swedish Edmonds	2													2
Swedish Mill Creek	2													2
United General	10	1				1		1					1	14
Whidbey Health	4													4
Whidbey Health ED	3													3
Whidbey Medical Center									1					1
Grand Total	57	3	1	5	2	6	1	6	1	1	1	4	3	91

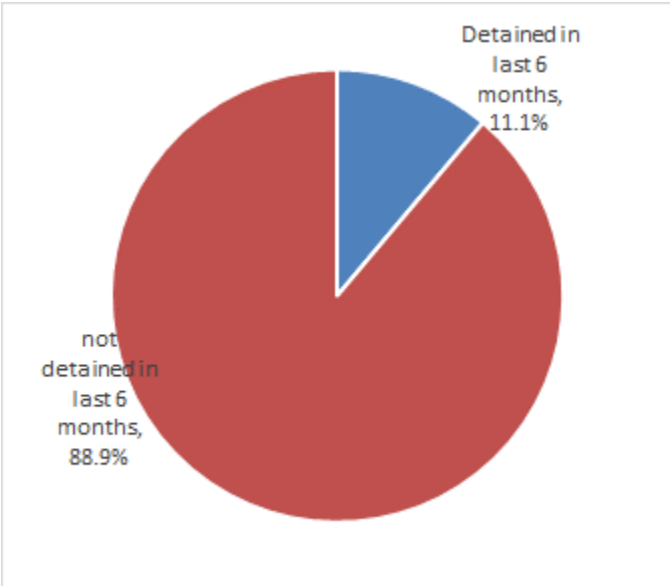
Dispatch and Detainment History

Involuntary detention history is the number of involuntary commitments that a single person experiences within a certain period. Understanding detainment history requires consideration of available less restrictive options. Medicaid and non-Medicaid capacity for residential treatment, intensive outpatient treatment, community wrap-around and case management programs and other treatment resources are critical in supporting recovery in community settings.

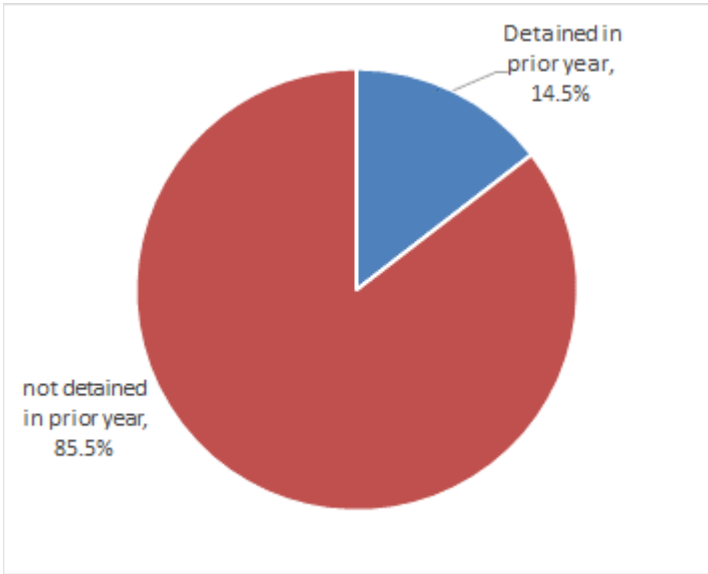
As the graph below illustrates, 11.1% of total DCR dispatches had at least one previous detainment in the past 6 months, which is consistent with 2022 data. DCR dispatches that had a prior detention in the past 12 months showed similar consistency with 2021 data at 14.5% for 2023.

Regional capacity of Crisis Stabilization and Triage beds may also contribute to detention rates. In 2019, mental health crisis stabilization capacity was reduced in Skagit County. Staff recruitment and retention further limited services and bed capacity across the region’s facilities. In 2023, mental health stabilization was further reduced in Snohomish County, as Compass Health’s Everett, WA Triage facility experienced a planned closure for a larger rebuild of a more extensive array of behavioral health services.

Detained Prior 6 Months



Detained Prior Year



Place of Service for DCR Investigations

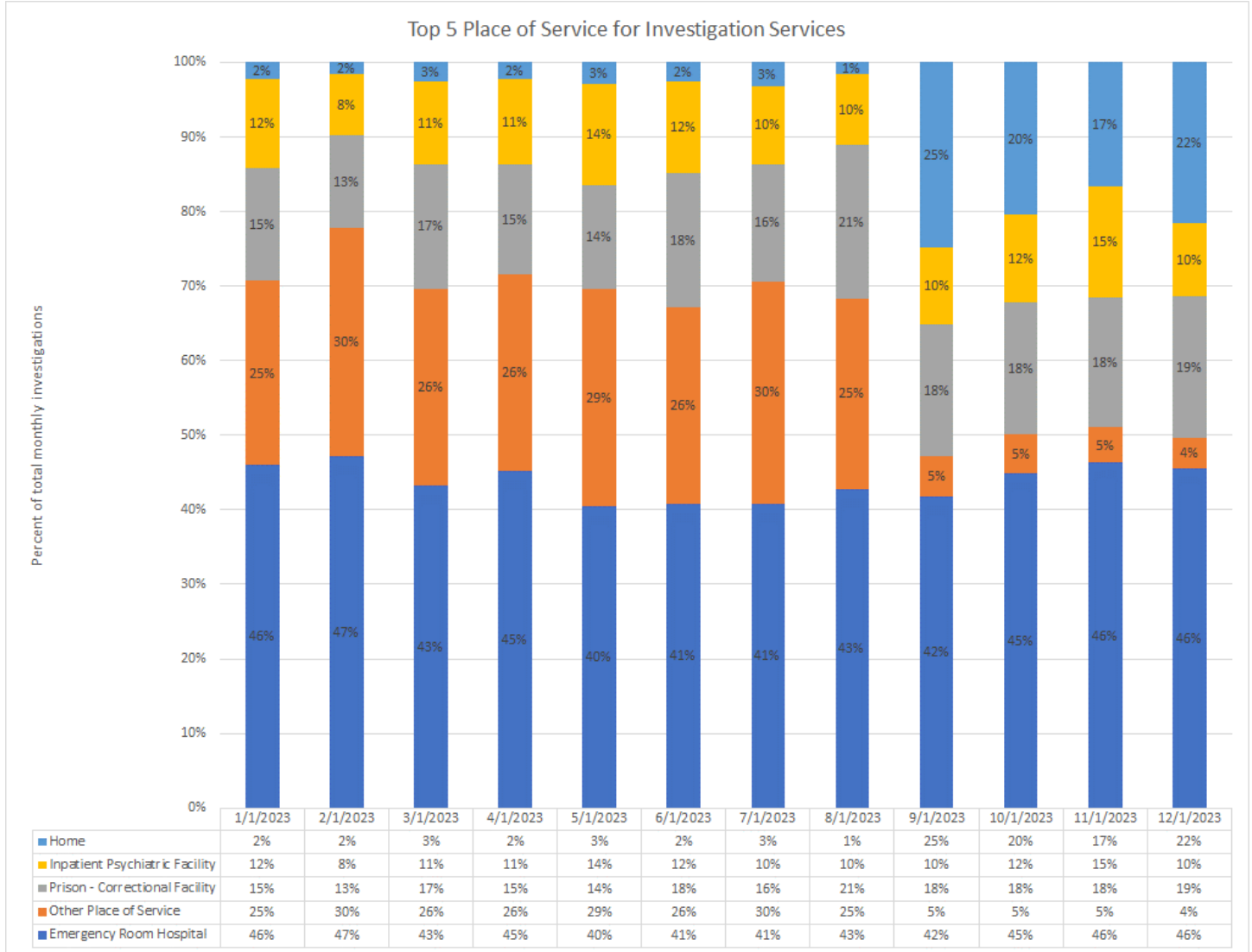
The place of service in which DCR’s are conducting ITA investigations is monitored monthly and indicates locations that DCR’s are most frequently outreaching. In addition, North Sound BH-ASO and our crisis agencies use place of service trends to improve response, coordination and follow up efforts. For this report, we are representing the top 5 places of service in which DCR conducted an ITA investigation.

Although the graph below indicates some monthly variation, place of services percentages by location has remained somewhat stable through 2023. Emergency rooms accounted for the most frequent place of service for DCRs at 44%, while “Other” accounted for 20%, inpatient psychiatric facilities 11%, Correctional Facilities 17% and Home at 8%. It

North Sound BH-ASO Annual Crisis Assessment 2023

should be noted that “Other” place of services typically represents unstaffed locations not represented in the place of service table below. An effort to reduce the other category in favor of more correct categories was begun in September 2023, increasing the use of the home category significantly.

Place of Service for Investigation Compared Monthly

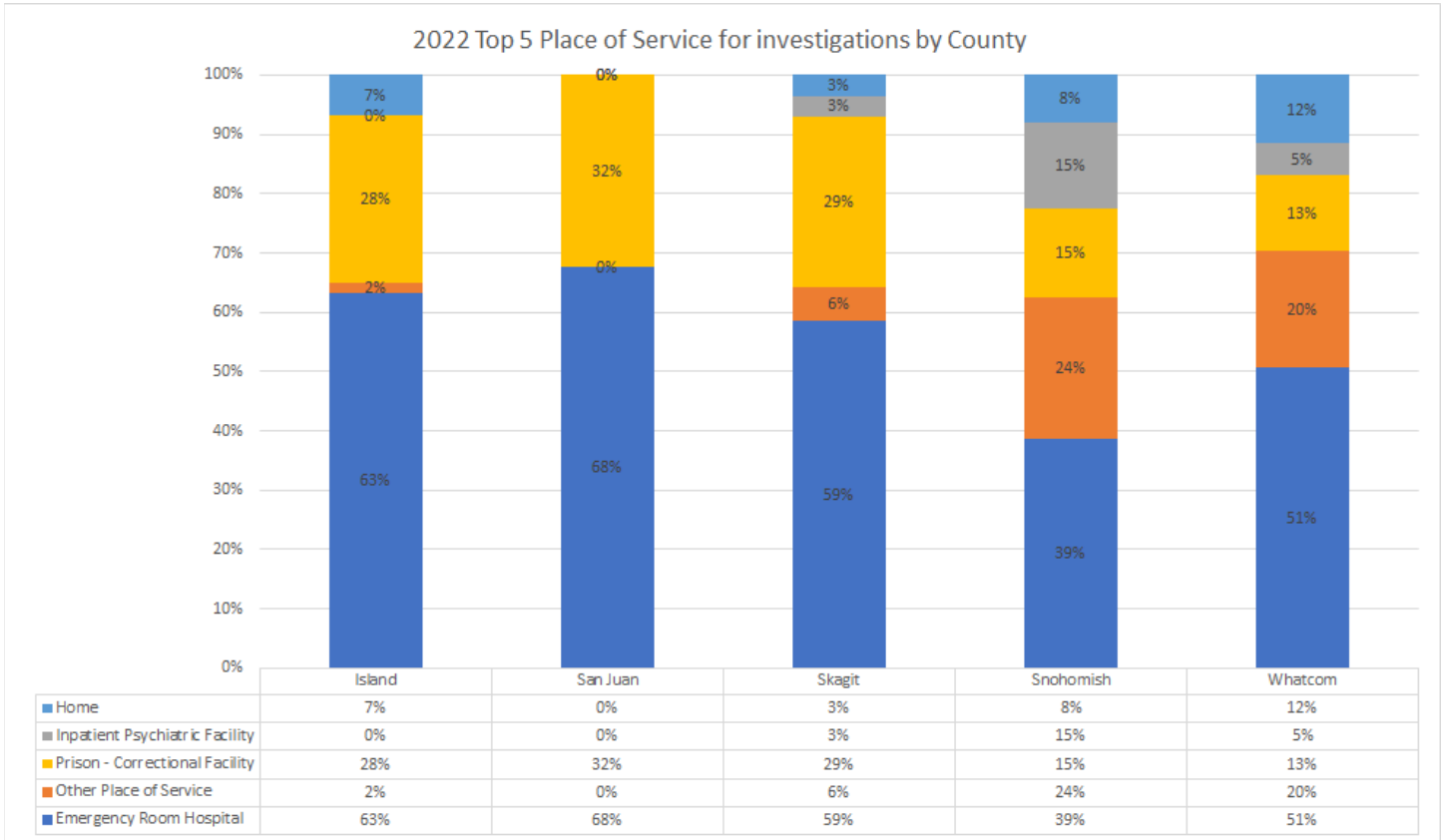


Place of Service for Investigation Compared by County

Distinguishing DCR investigation place of service by county is important to monitor, as each county may have a different array of resources, and those providers and organizations may vary in how they interface with the crisis system.

As illustrated in the summary below, the majority of DCR investigations conducted in emergency departments are occurring in San Juan County at 68%, which is also the case for DCR investigations coded as “Correctional” place of service at 32%, Snohomish County had the largest percentage of investigations occurring at ‘other place of service’ at 24% and the largest percent occurring at Inpatient Psychiatric Facility (15%).

North Sound BH-ASO Annual Crisis Assessment 2023



Crisis Services – Mobile Rapid Response Crisis Teams

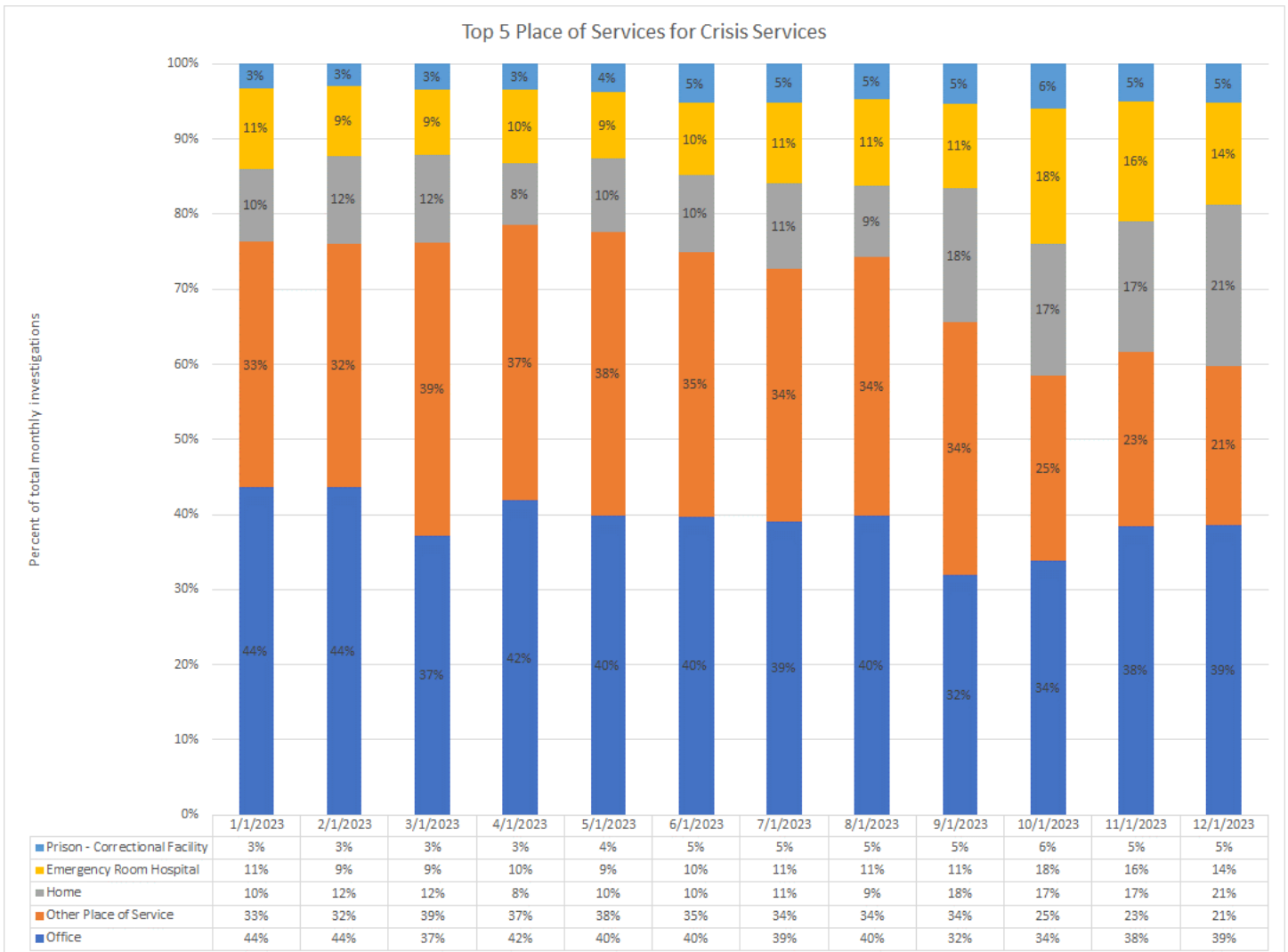
Mobile Rapid Response Crisis Teams (MRRCT) are voluntary crisis services (H2011) intended to provide stabilization support for individuals experiencing a crisis. A behavioral health crisis is defined as a turning point in the course of anything decisive or critical, a time, a stage, or an event or a time of great danger or trouble, whose outcome decides whether possible bad consequences will follow.

Comparison of Crisis Service Place of Service by Month

Similar to the DCR investigation place of services, monitoring MRRCT place of service is critical for our crisis agencies to strengthen response, coordination and referral protocols. For this report, we have provided a summary of the top 5 place of service.

Reviewing the total count of Crisis Services by location per month in the graph below, you will see that mobile crisis response conducted 16,572 outreaches. The largest percentage of services are coordinated through the crisis agency’s office 39%. The second largest is “Other” at 33%, Emergency Rooms accounted for 11%, personal residence (Home) at 12%, and jail settings accounted for 4%.

North Sound BH-ASO Annual Crisis Assessment 2023



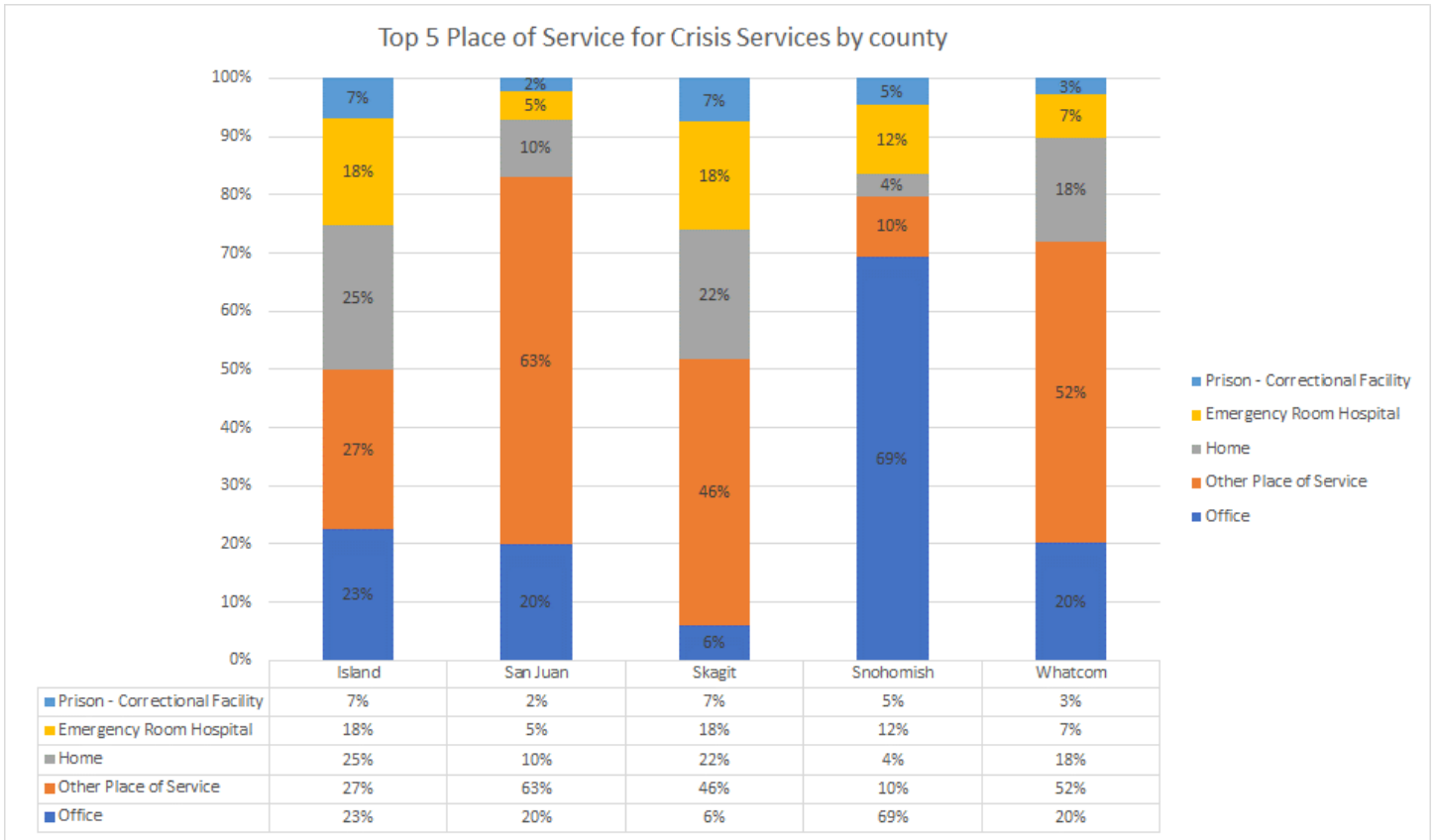
Count of Crisis Services by County and Place of Service

Distinguishing MRCCT place of service data by county, you will notice county differences in the volume of outreaches to specific locations. It is important to note that not all counties have services or facilities as outlined by the categories below. For example, the number of outreaches to a “community mental health center” may be disproportionately larger in one county due to current capacity.

Snohomish County had the largest percentage of MRCCT conducted from the office at 69%. Skagit and Island have the largest in emergency rooms tied at 18%.

Island has the highest percentage of services conducted in home at 25%. Skagit and Island are tied for the highest percent in jail at 7%. San Juan has the highest percent delivered at Other – 63%.

North Sound BH-ASO Annual Crisis Assessment 2023



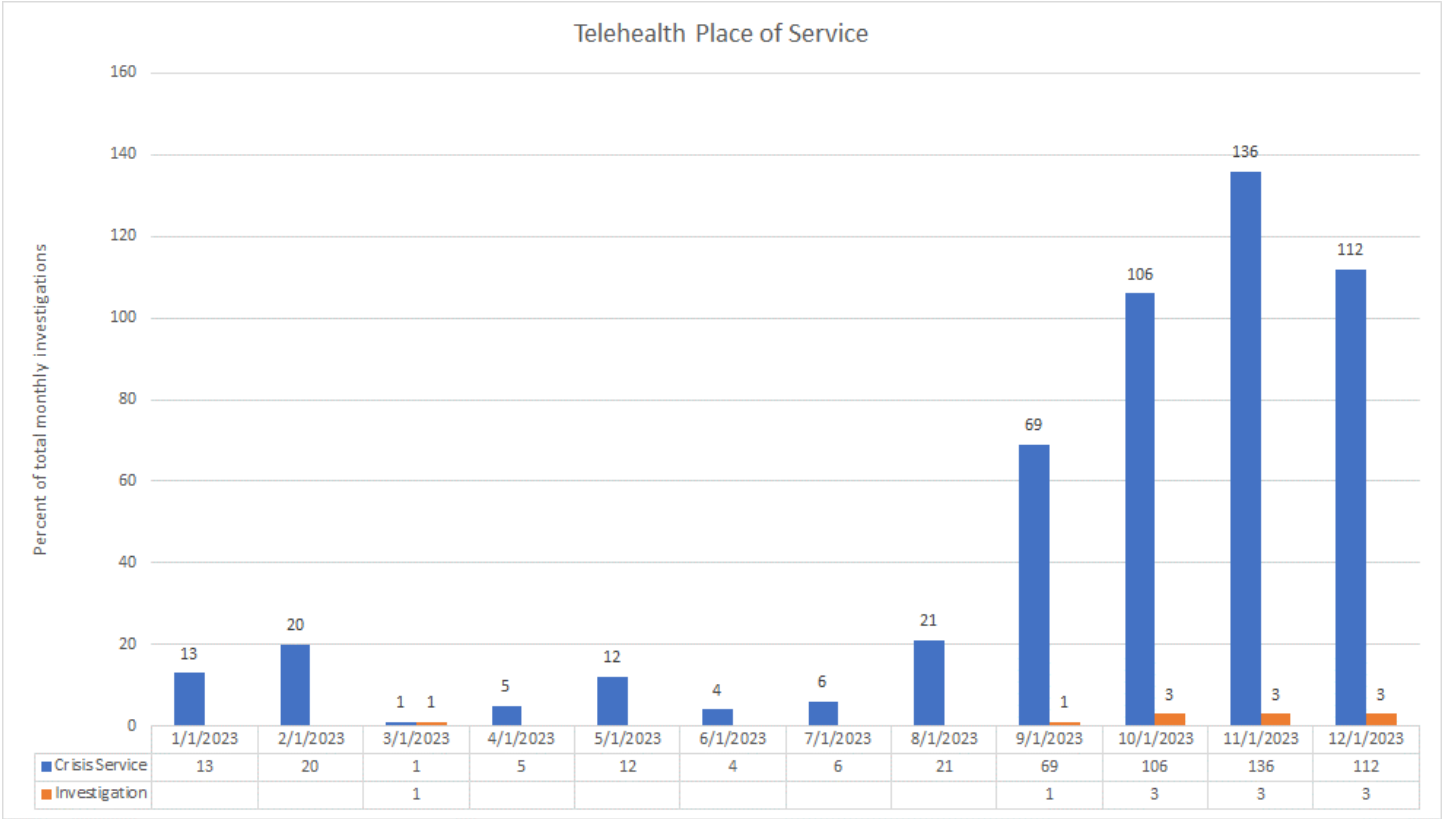
Telehealth Place of Service – Crisis and Investigation Services

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

Due to the nature of the service, MRCCT and ITA investigation services tend to be provided face-to-face at a location best suited by the individual. The graph below shows a large increase in the usage of telehealth services in the crisis system at the end of Q3, continuing through Q4 of 2023.

North Sound BH-ASO engaged a quality process with our crisis agencies in 2023 on the use of Telehealth for Crisis Services. As a result, North Sound BH-ASO and our crisis agency identified a telehealth coding discrepancy which was determined to be associated with how telehealth services are coded and staff education/training within the provider agency.

North Sound BH-ASO Annual Crisis Assessment 2023



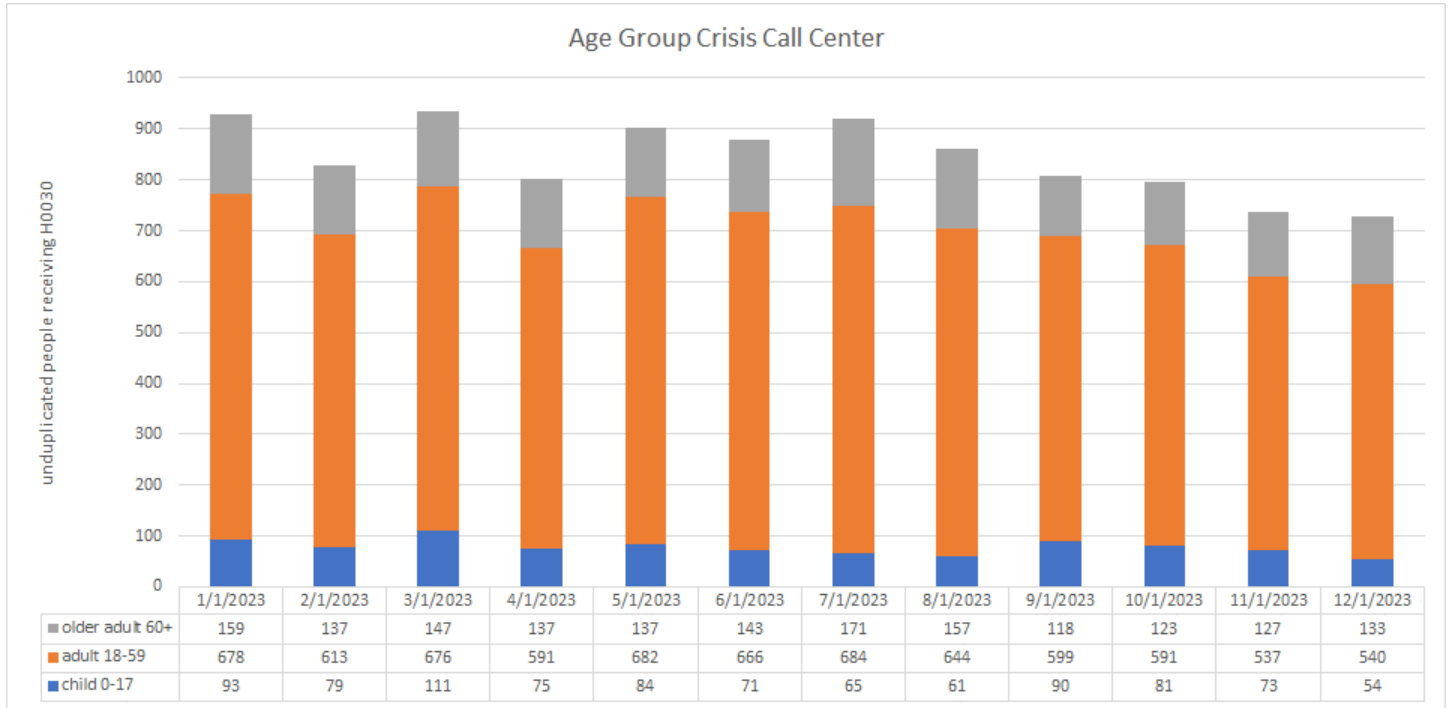
Crisis Service (H2011) Demographics

Crisis Service demographic data is monitored monthly and reported as a quality improvement activity. Demographic data for crisis services are compared to regional population demographics to assess how the crisis system is serving the region’s population and whether service improvements can be identified to strengthen outreach efforts. For this report, we will briefly outline crisis services by Age Group, Funding Source, Ethnicity, Primary language, and Gender.

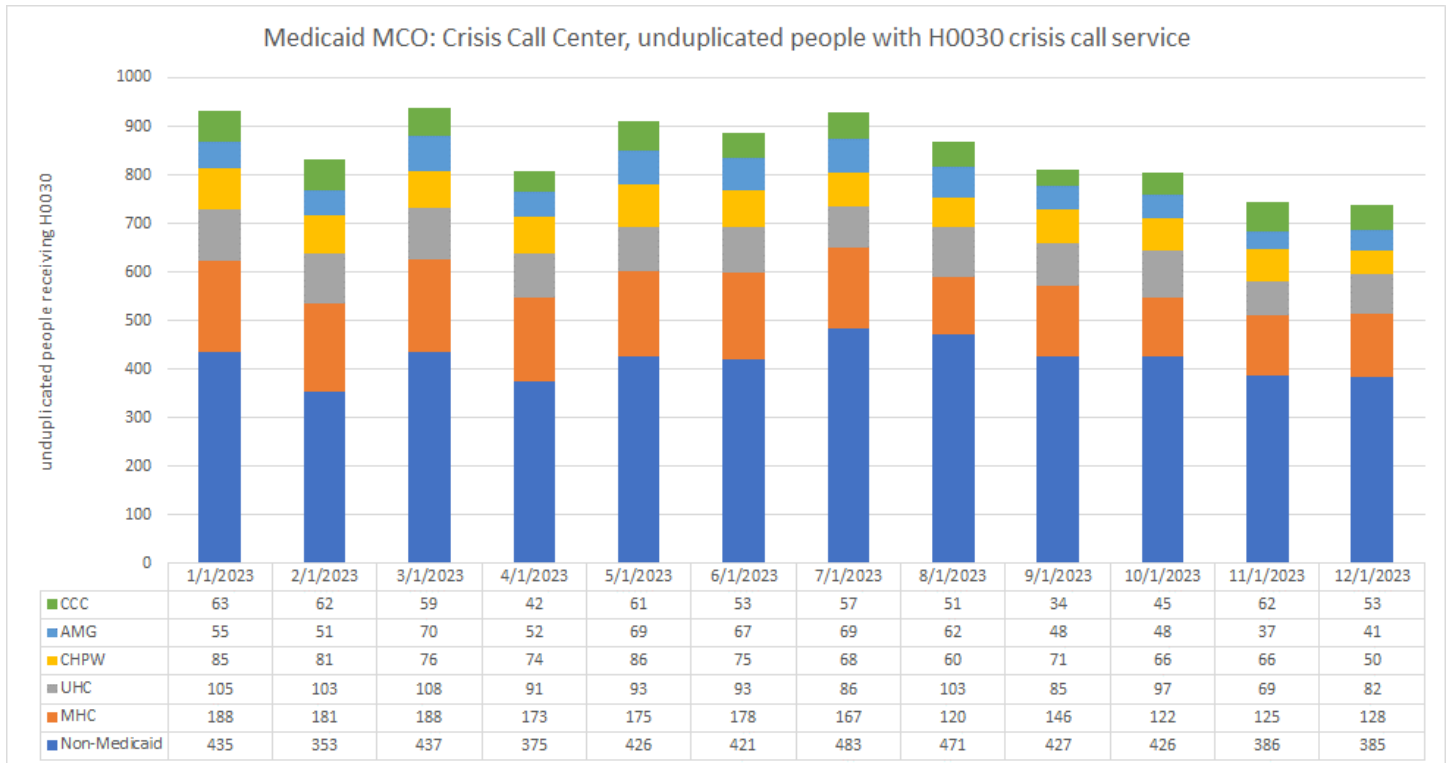
North Sound BH-ASO Annual Crisis Assessment 2023

Age Group

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

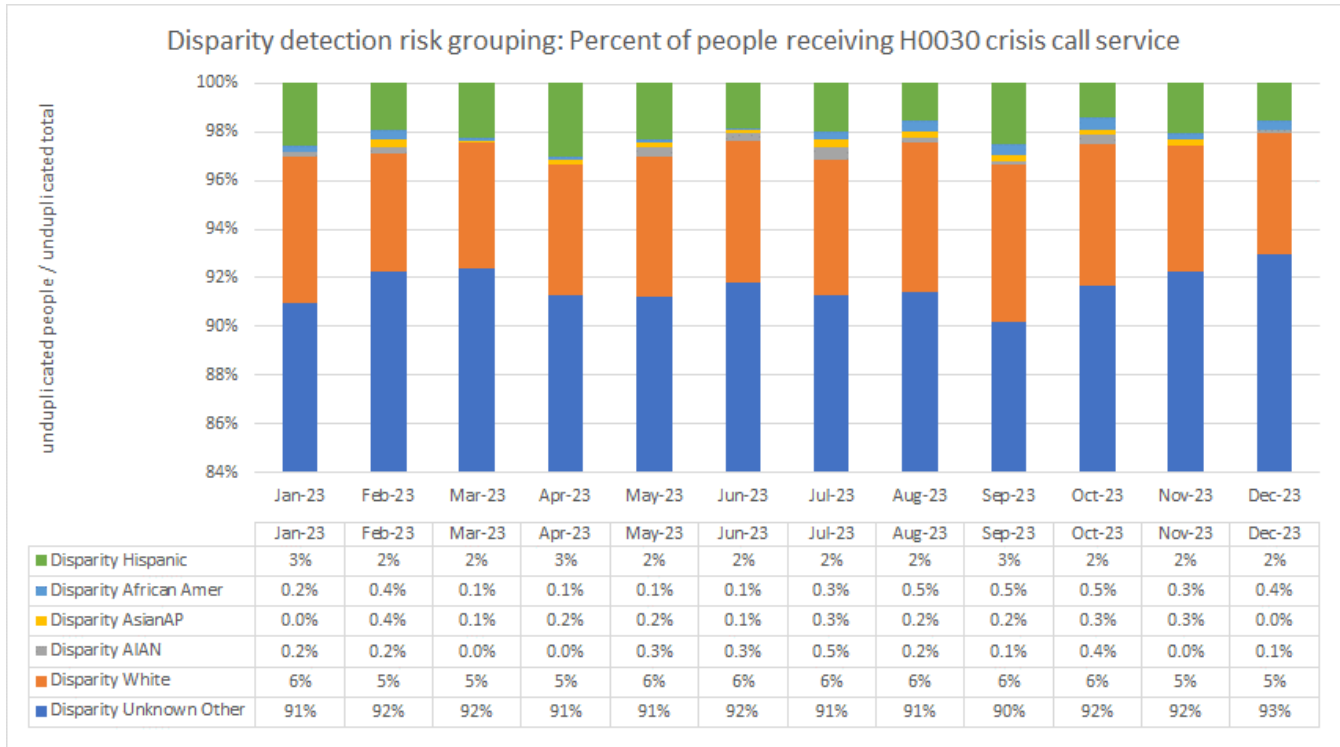


Funding Source

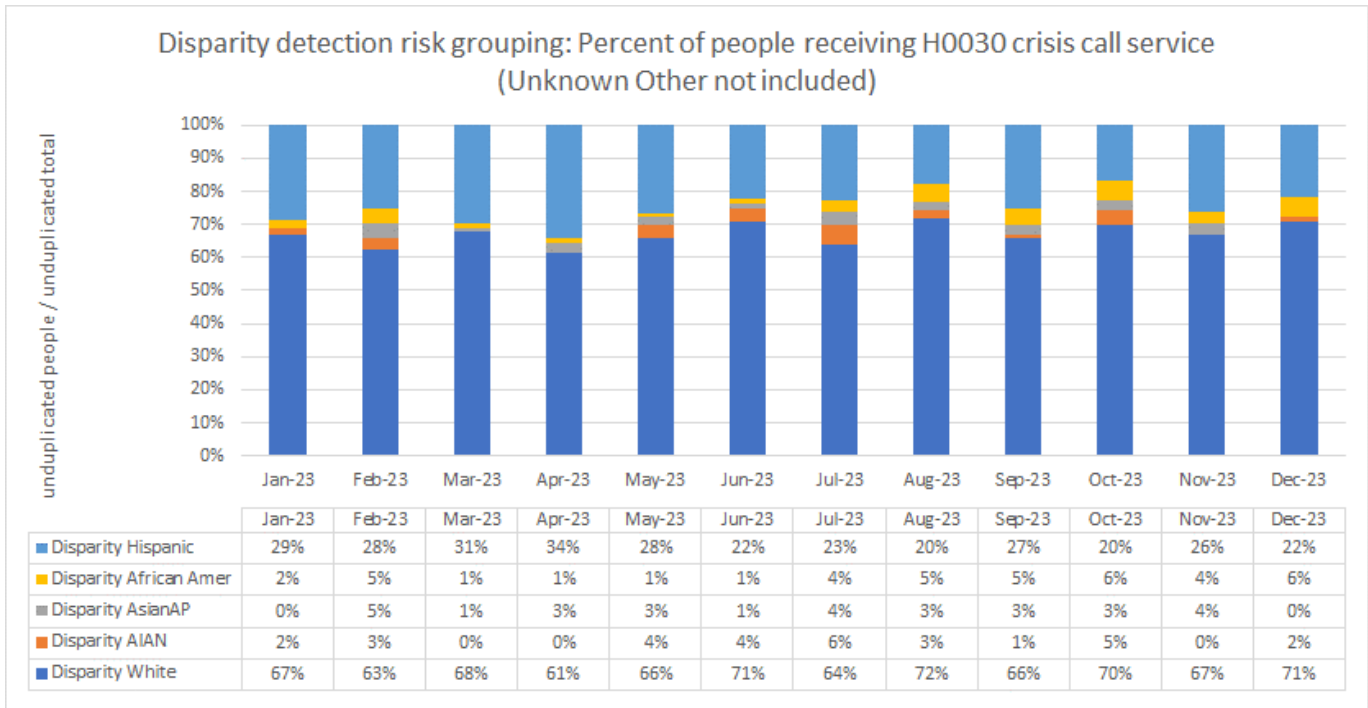


North Sound BH-ASO Annual Crisis Assessment 2023

Ethnicity

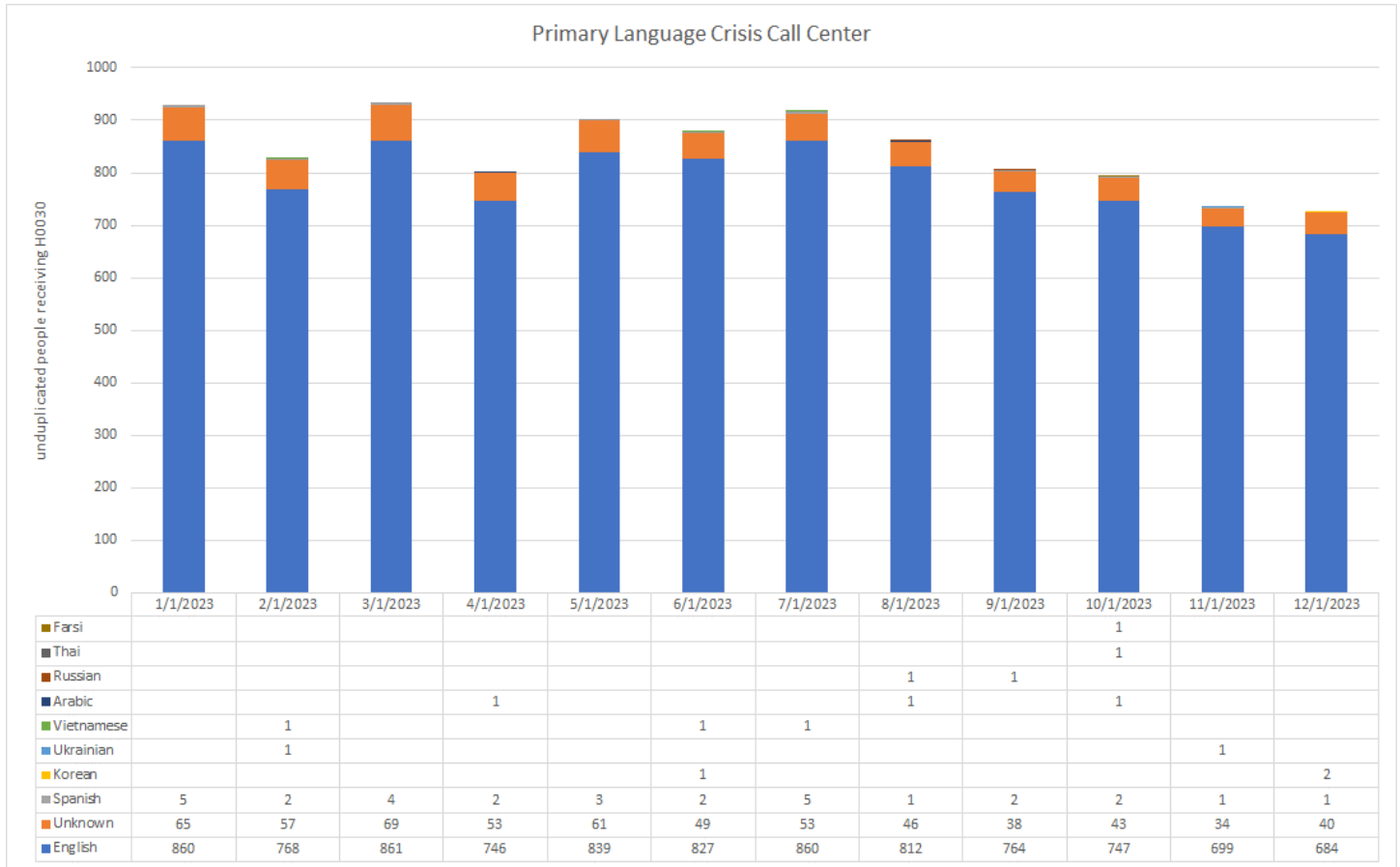


Taking out the other / unknown group

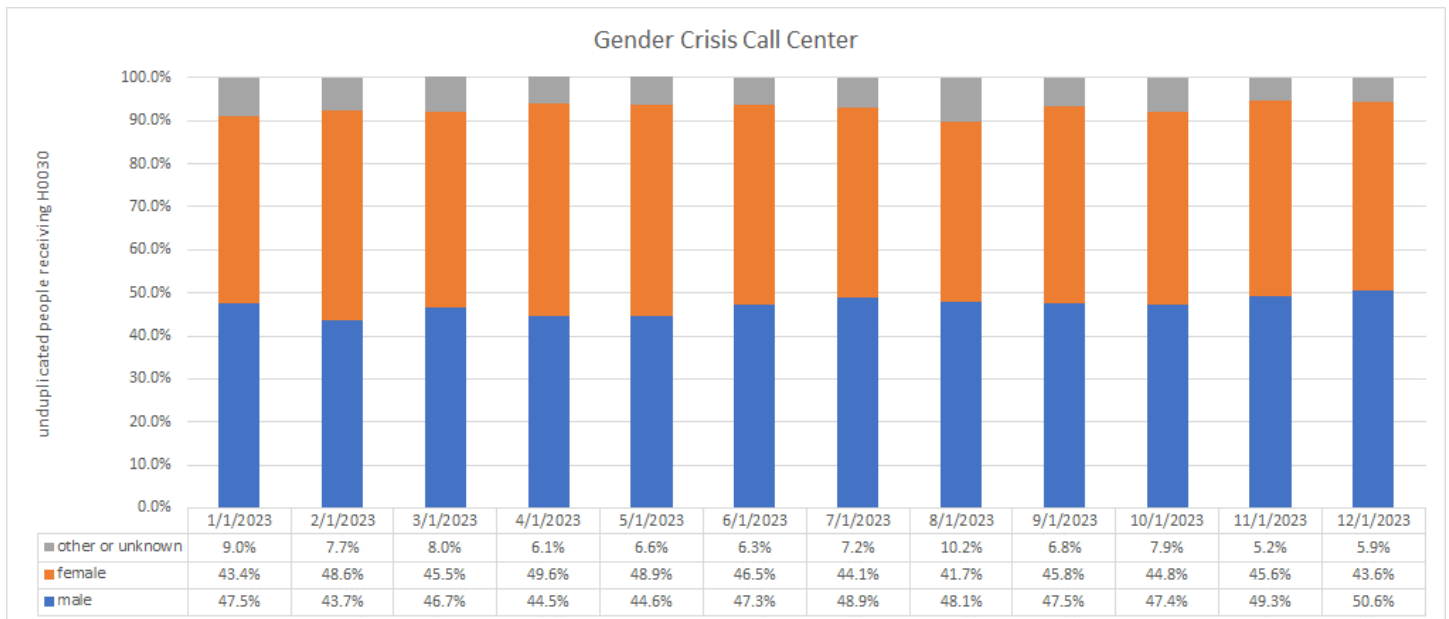


North Sound BH-ASO Annual Crisis Assessment 2023

Primary Language



Gender



North Sound BH-ASO Annual Crisis Assessment 2023

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.

2022 Crisis Metric Deliverable

	2023	Q1	Q2	Q3	Q4	total
Crisis Calls						
1a	Total number of crisis calls received	12,146	12,031	11,959	11,545	47,681
1b	Total number of crisis calls answered	12,043	11,932	11,920	11,511	47,406
1c	Average answer time of all crisis calls (seconds)	17	24	15	15	18
1d	Total number of calls to crisis line answered live within 30 seconds	11,428	11,264	11,414	10,905	34,106
1e	Percentage of crisis calls answered live within 30 seconds	94.1%	93.6%	95.4%	94.5%	94.4%
1f	Total number of calls to crisis line abandoned	103	99	39	34	240
1g	Percentage of crisis calls abandoned	0.8%	0.8%	0.3%	0.3%	0.6%
Mobile Crisis Team						
2a	Total number of face to face crisis contacts	1,579	1,613	1,868	1,892	6,952
2b	Percentage of EMERGENT mobile crisis outreach service requests/referrals that were responded to within two (2) hours	99.1%	99.1%	98.7%	99.0%	98.9%
2c	Percentage of URGENT mobile crisis outreach service requests/referrals that were responded to within twenty-four (24) hours	99.8%	99.9%	100.0%	99.9%	99.9%
DCR						
3a	Total number of ITA investigations	1,177	1,166	1,260	1,192	4,795
3b	Total number of ITA investigations conducted via telehealth	1	-	1	12	14
3c	Total number of ITA investigations not meeting detention criteria, resulting in a referral to outpatient treatment	345	331	339	359	1,374
3d	Total number of ITA investigations not meeting detention criteria, resulting in a referral to voluntary inpatient treatment	53	52	79	68	252
3e	Total number of ITA investigations resulting in detention or revocation	454	452	462	430	1,798
3f	Total number of ITA investigations resulting in detentions or revocations filed as SUD	6	2	5	8	21
3g	Total number of ITA investigations resulting in detentions or revocations filed as MH	446	477	437	425	1,785

North Sound BH-ASO Annual Crisis Assessment 2023

Summary of Crisis System Coordination

North Sound BH-ASO continues our extensive collaboration structure that it had historically used both as an RSN and BHO. As the key program function for North Sound BH-ASO, coordination around the care crisis continuum is one of our key focus areas.

List of Coordination Activities

Community System	Coordination Activity
Counties	County Coordinator Meetings County Crisis & BH provider meetings
Criminal Justice System	County Coordinator Meetings [Trueblood Misdemeanor Funds] County Crisis Oversight Meetings
First Responders	County Crisis Oversight Meetings Expansion of Mobile Crisis Outreach
Community Hospitals	County Crisis Oversight Meetings Hospital Contracting – Development of streamlined protocols
Behavioral Health Agencies	ASO/MCO Behavioral Health Provider Meetings Crisis Services Leadership Meetings
Crisis Stabilization Facilities	Behavioral Health Provider Meetings Continued ASO Funding for Crisis Stabilization Services
Managed Care Organizations	Joint Operating Committee MCO-ASO Clinical Coordination Meetings Integrated Provider Meetings CLIP Coordination Committee
Tribes	North Sound Tribal Coordination Meetings NS Accountable Community of Health Tribal Alignment Committee North Sound Crisis Leadership Structure

Description of Coordination Activities

Activity	Description
Joint Operating Committee	The joint technical workgroup chartered by the ILS to develop care coordination protocols. It is co-chaired by an MCO representative and the North Sound BH-ASO Director.
County Coordinator Meetings	North Sound BH-ASO staff meet monthly with the county behavioral coordinator leadership. Agendas include identifying local needs, strategies for coordinating crisis and non-Medicaid services across the region and coordinating with county criminal justice agencies. County staff are assisting North Sound BH-ASO with strategies to expand co-responder community response models

North Sound BH-ASO Annual Crisis Assessment

2023

County Crisis Oversight Committees	Each county hosts a “Crisis Oversight Committee”, or an equivalent group comprised of stakeholders from first responders, hospitals, BHAs and other social services and treatment providers. These local county committees share information across and identify strategies to improve crisis response services across all the different stakeholder systems.
Behavioral Health Provider Meetings	MCOs and North Sound BH-ASO jointly host a Behavioral Health Agency Provider Meeting. These meetings provide a forum for BHAs, MCOs and North Sound BH-ASO to provide updates, raise concerns and ask questions. Topics have included questions and concerns about billing, forms, and authorization policies. The regional BH provider meetings are also used to solicit concerns from providers regarding workforce, coordinating services or other system impacts.
MCO-ASO Clinical Coordination Meetings	North Sound BH-ASO continues to actively participate in the bi-monthly MCO & ASO Clinical Coordination Meetings.
Tribal Coordination Meetings North Sound ACH Tribal Alignment Committee	North Sound BH-ASO’s Executive Director and Tribal Coordination Liaison continues to partner in regional Tribal Coordination meetings, meetings of the Regional Tribal Coordinating Council, and the meetings of the North Sound ACH Tribal Alignment Committee. These meetings have provided a forum for providing updates on crisis services and detailed discussion of the ASO-Tribal Crisis Coordination activities.
Advisory Board	The North Sound Behavioral Health Advisory Board is to advocate for a system of care that is shaped by the voices of our communities and people using behavioral health services. The Advisory Board provides independent and objective advice and feedback to the North Sound BH-ASO Board of Directors and local jurisdictions, and county advisory boards and service providers.
Joint Stakeholder Problem Solving Workgroups	North Sound facilitates process and protocol problem solving discussions with crisis agencies, law enforcement leadership, hospitals, community BHAs aimed to preserve provider relations and coordinate better care and services.

Criminal Justice System

North Sound BH-ASO has worked diligently to develop partnerships with the criminal justice systems. The five North Sound Counties have been instrumental in bridging system relationships on behalf of the North Sound BH-ASO. Our criminal justice partnerships include county specific Crisis Oversight Committees, Law and Justice Councils, Interlocal Leadership Committee, contracting for services such as Juvenile Court Treatment Services, Criminal Justice Treatment Account (CJTA), Jail Transition Services (JTS) and Law Enforcement co-responder partnerships.

Diverting individuals from jails and/or an arrest into appropriate treatment services is a priority for the North Sound BH-ASO and its member counties.

North Sound BH-ASO Annual Crisis Assessment

2023

Successes

- Recovery Navigator Program (RNP) has been fully implemented in all counties within the North Sound Region.
- North Sound's Homeless Outreach and Stabilization Program (HOST) program was fully operational in 2023 while working in close collaboration with Snohomish County Sheriff's office and Everett, WA Police Department.
- Expanded capacity for DCR partnership with Law Enforcement to ensure appropriate in field response. This continues to be a huge success in responding appropriately to individuals in crisis. Law Enforcement has overwhelmingly been supportive of this type of intervention.
- North Sound BH-ASO continued our regional implementation of a co-responder funding Plan and solicited funding partnerships with several law enforcement agencies in Snohomish, Skagit, Island and Whatcom Counties.
- County Crisis Oversight Committees have been successful in bringing all the interested parties together including local Courts, Law Enforcement, Probation, and other stakeholders.
- Local Jails have benefited from Jail Transition Services and consider it an invaluable service for a stretched jail system.
- We are fortunate to have Law Enforcement Officers on our Behavioral Health Advisory Board. Their input on what is occurring in our communities provides North Sound BH-ASO direction on where our funds are best used to support the most vulnerable in our communities.
- Several counties in partnership with North Sound BH-ASO have expanded information sharing platforms that have enhanced coordination between county administered BH outreach programs to include community paramedics and co-responders.

Opportunities

- A five (5) county region with four jails, five courts and numerous Sheriff/Municipal Police agencies will continue to be an opportunity to strengthen our response to the vast criminal justice needs within the RSA.
- Regional co-responder forum – We continue to plan a regional co-responder lessening session following the Co-Responder Outreach Alliance (CROA) and University of Washington Retreat in 2023-2024. Our county and Law enforcement agencies have expressed a need to have a regional collaboration structure for co-responder programs.

At the Provider Level

Local Crisis Oversight Committees

In partnership with our five counties, North Sound BH-ASO supports the convening of local Crisis Oversight Committees that include local law enforcement, first responders, community hospitals, behavioral health agencies, Tribes, National Alliance on Mental Illness (NAMI), community organizations and crisis providers. Committee goals vary by county based on community and provider needs, though the basic structure focuses on strengthening the care crisis continuum with local entities. Below is a summary of the issues and topics addressed in 2023:

Snohomish County Crisis Oversight Committee

- DCR outreach and referral coordination.
- Capacity updates: Swedish Medical Center, PRMC, Evergreen Recovery Center, Everett Diversion Center, PACT & IOP Programs.
- Assisted Outpatient Treatment (AOT) implementation planning.

- Presentations from Various Criminal Justice Diversion programs.
- Opioid Response and overdose awareness/prevention.
- 988 Updates and discussions.
- Behavioral Health Agency Capacity - Less Restrictive Alternatives, PACT, etc.
- Regional Navigator Program (RNP) planning and updates.
- Identifying service and system gaps.
- Capacity, admission, and screening protocols.
- Legislative updates.

Skagit County Crisis Oversight Committee

- RCL and crisis service coordination with Law Enforcement.
- Established local crisis system, LE and hospital workflows.
- Opioid Response and overdose awareness/prevention.
- DOC awards and county planning for increased crisis stabilization capacity.
- DCR/Co-responder cross system workgroups.
- Skagit Regional Health.
- Regional Navigator Program (RNP) planning and updates.
- Law Enforcement presentations on current BH trends and volumes.
- 988 Updates and discussions.
- Skagit Crisis System Metrics – system utilization and trends.
- Legislative updates.

Whatcom County Crisis Oversight Committee

- Whatcom County Alternative Response Teams
- Crisis System coordination with county outreach programs – Ground Level Response and Coordinate Engagement (GRACE) and Law Enforcement Assisted Diversion (LEAD).
- Opioid Response and overdose awareness/prevention.
- Local EMS/Community Paramedic coordination with DCRs.
- 988 Updates and discussions.
- Crisis System coordination with Law Enforcement on cases requiring ED admission.
- Behavioral Health Agency education and information.

Island County Crisis Oversight Committee

- Implementation of cross system care coordination structures for high utilizers.
- Oak Harbor Crisis Stabilization Facility opening, referral and admission coordination.
- Presentations from Island County BH LE co-response program.
- BHA Capacity updates.
- Crisis system coordination with Island County Sherriff, hospital discharges.
- 988 Updates and discussions.

San Juan County Crisis Oversight Committee

- DCR/Mobile Crisis outreach protocols and coordination with San Juan Hospital
- Community needs – outpatient capacity, family resource center
- Addressing system gap for high intensity services for San Juan - Crisis System partnership with OP providers
- Crisis System Metrics – system utilization and trends
- Washington Legislative updates

North Sound BH-ASO Annual Crisis Assessment

2023

Care Continuum - Project Highlights

Regional Crisis Line (RCL)

North Sound BH-ASO and VOA continued our partnership on 988 and RCL planning for the North Sound Region. VOA has provided extensive education and information for regional providers on several new Tribal services to include the Native Resource Hub and the Native and Strong Lifeline. North Sound BH-ASO and VOA provided technical assistance and training for implementation of our region's Tribal DCR expansion. VOA RCL continues to be a critical partner in coordinating MCRRT and DCR service delivery.

Mobile Rapid Response Crisis Teams

North Sound BH-ASO and our contracted crisis agencies have been actively participating in the state's 988 planning and best practice developments. North Sound is well positioned to support the state's plan to expand endorsed MRCCT and community-based teams. In response to new contract and state requirements, we are undergoing a region wide funding assessment of mobile crisis response to include further expansion of Certified Peer Counselors (CPC) and Mental Health Care Professionals (MHCPs).

Child, Youth and Family Crisis Teams (CYFCT) – MRSS

Fully operationalized CYFCT-MRSS programs in Whatcom and Skagit County. Recruitment for the Snohomish County team is expected to be completed by Q2 of 2024. CYFCT-MRSS teams in Q2-Q3 focused on policy and program development and since January 2024, we've seen an increase in services.

Receiving Facility Capacity – A place to go.

Ensuring access to crisis stabilization and withdrawal management services continue to be a top priority for the region. We have included ongoing capacity funding for Skagit, Island and Whatcom facilities as part of our Federal Block Grant plan. North Sound's counties have been instrumental in supporting local coordination, accountability, and provision of these service for residents needing services.

North Sound BH-ASO is in active partnership with our counties on several new planned 23-Hour facilities in Whatcom and Snohomish County. New facilities complexes are planned in Skagit County to expand Crisis Stabilization beds.

Strengthen Follow-up/Post Crisis Care

Continue to fund capacity for MRRCT follow up/post-crisis care coordination and navigation support to include Certified Peer Counselors (CPC) and Mental Health Care Providers (MHCPs).

Assisted Outpatient Treatment (AOT)

In response to SB 5071, North Sound BH-ASO initiated an AOT project management plan to implement AOT services in the North Sound Region. We successfully hired our AOT Coordinator in 2022 who has directly supported coordination and collaboration with local Superior Courts, Behavioral Health Agencies (BHAs) that are providing services to persons on Less Restrictive Alternatives (LRAs), and other stakeholders across the state.

In 2023, North Sound issued a Request for Proposal (RFP) for AOT providers and awarded the contract. North Sound BH-ASO has supported a robust collaboration to include the AOT provider, Snohomish County Superior Court, DCRs, and other stakeholders to fully implement in 2024. North Sound will continue to advocate for continued funding for individuals in need of Less Restrictive Orders (LRA) to include AOT court orders. North Sound continues our extensive

North Sound BH-ASO Annual Crisis Assessment

2023

collaboration with our regional Superior Court partners on information sharing for individuals on Less Restrictive Orders (LROs), Conditional Releases (CRs) and AOT orders.

Non-Medicaid Access to Outpatient and Residential Services

Continue to fund outpatient and residential treatment for individuals that are not eligible for Medicaid to include expansion of child and youth residential services and adult telehealth services.

Homeless Outreach and Stabilization Teams (HOST)

North Sound BH-ASO is evaluating ways to supplement ESB 5476 funding for HOST expansion and continue to advocate for enhance Blake funding to support HOST programing within region.

Summary of Crisis Plans

Background

- As previously noted, we discussed a critical information gap that was created when health information for Medicaid members was moved from the former BHO to the 5 MCOs.
- The RCL, DCRs and MRCCTs no longer had reliable access to information about a person’s current treatment provider or the person’s current crisis plan. This created a gap in crisis treatment planning.

Successes

- Continued a regional project management support to the development of a data sharing platform hosted by Point Click Care (PCC - formally Collective Medical Technologies - CMT) that will allow crisis services staff to access treatment and crisis plan information on Medicaid members.

Challenges

- As indicated, full implementation of PCC relies on HCA contractual requirements with MCOs, BHA sponsorship agreements with MCOs, and incentives for agencies to input crisis plans into the platform.

Care Coordination Protocols

North Sound BH-ASO ensures that crisis system protocols are established that promote coordination, continuity, and quality of care for individuals receiving crisis services. As outlined above, our work continues on several key elements: (1) coordinating and accessing crisis prevention plans, and (2) supporting strategies to reduce unnecessary crisis system utilization and improve linkages to the most appropriate level of care.

Crisis services by design are not limited or reduced based on the person’s needs or how frequently they may require support. Strategies to reduce unnecessary crisis services must consider the individual’s unique treatment needs, personal circumstances, provider clinical judgement, available support systems and whether the individual’s recovery would be better supported in a different level of care.

The table below represents the average number of people identified as high-need or “high utilizer” by MCO and included as part of our bi-weekly reporting for possible care coordination engagement.

North Sound BH-ASO Annual Crisis Assessment

2023

Average number of People included on the bi-weekly high utilizer lists in 2023	AMG	CCC	CHPW	MHC	UHC	OTHER	Total
Count of People with 3 or more detentions or LRO revocations last 180 days	2.3	1.5	4.8	5.3	3.5	8.6	26.2
Count of People with 5 or more investigations in last 180 days and 0 in the last 30 days	0.9	0.9	3.1	3.5	1.9	3.7	13.8

Summary of Strategies Used to Improve the Crisis System

Crisis line and Mobile Crisis Outreach

- Fully funded RCL operations and RCL post-crisis/follow-up programming.
- Continued funding for Mobile Rapid Response Crisis Teams to include MHPs, SUDPs and expanded Certified Peer Counselors embedded in outreach teams.
- Implemented standalone Child, Youth and Family Crisis Teams (CYFCT) Mobile Rapid Response Crisis Teams based on the Mobile Response and Stabilization (MRSS) model.
Increased DCR capacity for in-field Law enforcement and first responder referrals.

Crisis Stabilization and Withdrawal Management Facilities

- Continued capacity funding for current crisis stabilization and withdrawal management services for non-Medicaid persons in Skagit, Island and Whatcom counties.
- Funded operational shortfalls for Crisis Stabilization and Withdrawal Management facilities in Skagit, Island and Whatcom counties.
- Continued our state-wide advocacy for a sustainable funding approach for facility-based stabilization services.

Crisis Care Coordination and Management

- Continued our external reporting to support care management and coordination for individuals.
- Continued our statewide advocacy and recommendations to implement data sharing protocols to support care coordination between entities for individuals receiving crisis services.
- Partnered across multiple systems to establish local care coordination protocols and workflows between entities.

Information and Data About the Disposition of Crisis Calls

Overview

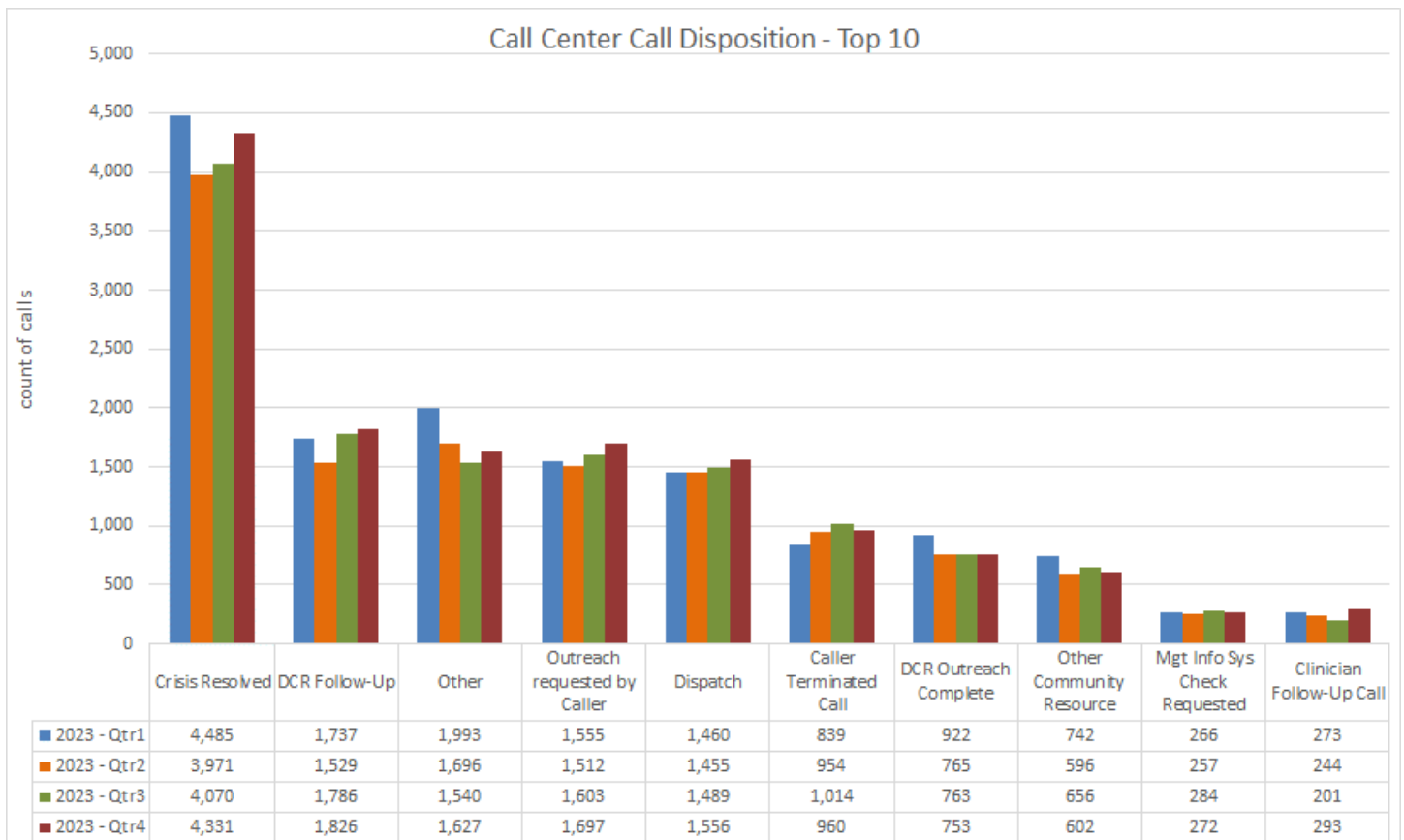
North Sound BH-ASO delegates Crisis Line services to VOA while providing oversight for performance and quality. VOA submits monthly performance metrics to North Sound BH-ASO in compliance with the delegation agreement outlined in contract. Call disposition is not a part of routine monitoring as it is not collected in any of the electronic transactions submitted to North Sound BH-ASO or required per the delegation agreement. North Sound BH-ASO requested VOA provide an annual extract of call disposition data for review by the North Sound BH-ASO IQMC.

North Sound BH-ASO Annual Crisis Assessment 2023

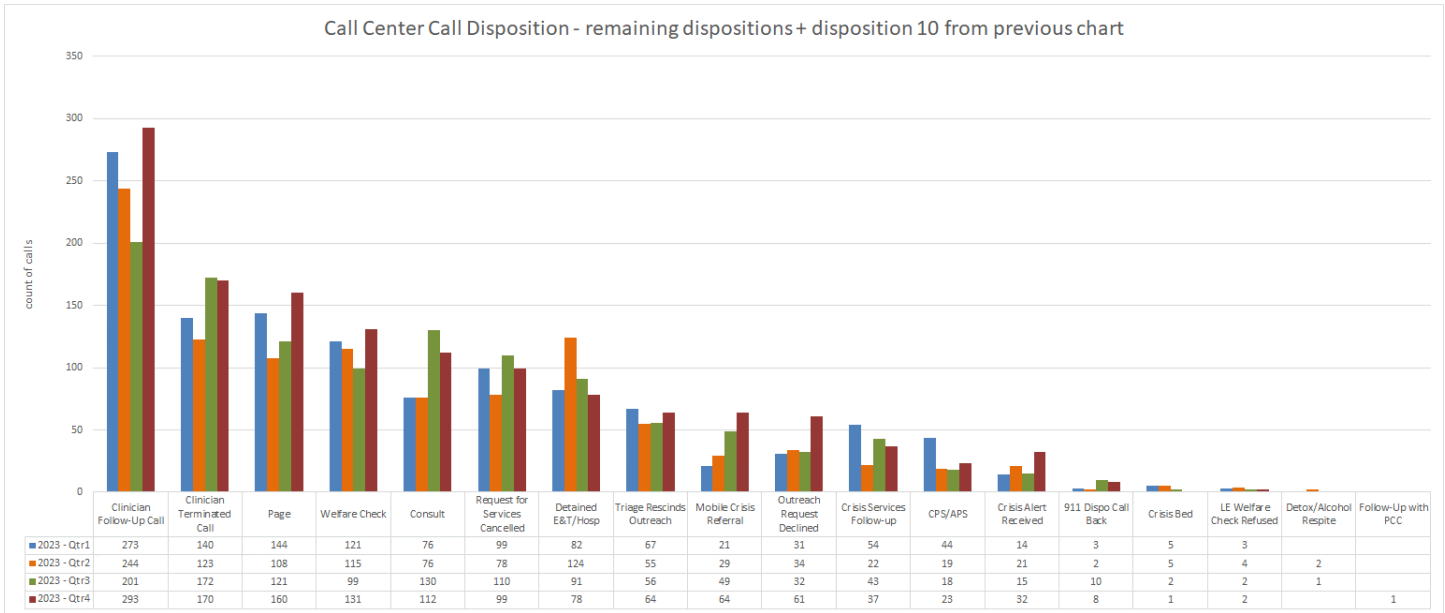
Analysis

The graphs below display all of the Crisis Line disposition reasons that were used during calendar year 2023. The top 10 are put into one graph for readability. The top 10 selections represent approximately 93.6% of the dispositions rendered. Of the top 10 selections “Crisis Resolved” was the most frequent selection at 28.92%. This disposition indicates the nature of the call was resolved while the individual was on the line with crisis line staff and no further intervention was necessary.

The second largest category, that represents 11.80% of the selections, selected was “DCR Follow-Up”. This displaces the former number two category “Other”, now third at 11.76% of the selections. The next 3 most represented selections, at 10.92%, 10.22% and 6.46% are “Outreach Requested by Caller”, “Dispatch” and “Caller Terminated Call” respectively. “Dispatch” and “Outreach Requested by Caller” indicate the need for further intervention with the individual and represent calls in which the crisis outreach team or a DCR would be sent out to the individual’s location to intervene. “DCR Follow-Up” is coordination with DCR’s.



North Sound BH-ASO Annual Crisis Assessment 2023



System Coordination

Coordination of Referrals to Provider Agencies or MCOs for Case Management

As identified in the [Summary of Crisis System Coordination](#) above, coordination of referrals between crisis agencies, community outreach teams (i.e., co-responders), Behavioral Health Agencies (BHA) or MCOs for case management is critical to ensure continuity of care for individuals in an active course of treatment for any acute or chronic behavioral health condition. North Sound BH-ASO is required to support the coordination or transfer of individual information, including assessments and crisis prevention plans with appropriate entities as needed.

Awareness of Frequent Crisis Line Callers

Collectively, frequent callers have a significant impact on crisis lines. The National Suicide Prevention Lifeline provides guidance for Crisis Call Centers to manage frequent callers as this can be challenging for clinical staff and impact program operations.

Our RCL coordinates directly with providers, community organizations, Indian Health Care Providers, Tribal authorities, MCOs and the ASO to facilitate cross-system case consultations to improve or tailor interventions that are in the best interest of the individual. North Sound BH-ASO and VOA independently track and monitor RCL utilization to include identifying Medicaid and non-Medicaid high utilizers.

Reduction of Law Enforcement Involvement with the Crisis System

As discussed in the [Referral Source – Partnering with Law Enforcement](#) analysis, North Sound BH-ASO continues to prioritize funding for targeted diversion behavioral health outreach programs with local law enforcement and first responder agencies. North Sound BH-ASO continues to advocate that behavioral health crisis and outreach in partnership with law enforcement and first responders that reduce criminal justice system involvement for individuals with mental health and substance use disorder treatment needs remains a critical element of the care crisis continuum in the North Sound Region.

North Sound BH-ASO Annual Crisis Assessment

2023

North Sound BH-ASO is committed to implement best practices for crisis care in alignment with the Substance Abuse Mental Health Service Administration (SAMHSA) National guidelines and the National Association of State Mental Health Program Directors (NASMHPD) that support reducing reliance on law enforcement, Fire, or EMS when possible. Building a coordinated behavioral health crisis system to include embedding or deploying resources within law enforcement, fire or EMS increases opportunities for individuals to connect directly with trained clinicians and resources.

Crisis System Data – Quality Improvement

North Sound BH-ASO processes and reviews crisis system data on a weekly, monthly, and annual basis. Data is shared and discussed in a multitude of venues that include both internal and external stakeholders.

Internal review is conducted by North Sound BH-ASO clinical and leadership staff through weekly report outs and other routine reporting structures. The North Sound BH-ASO Internal Quality Management Committee (IQMC) and Utilization Management (UM) Committees serve as monthly venues to review quality and utilization related crisis metrics to determine action steps if necessary. North Sound BH-ASO's Advisory Board, counties and external stakeholders play a critical role in discussing and making recommendations to IQMC or Leadership based on, among many variables, utilization data of crisis services. This organizational structure provides in-depth discussion and analysis of issues detected through the data or reported by external stakeholders. Individual cases and coordination activities are discussed during weekly clinical team meetings.

North Sound BH-ASO's staff and crisis agencies continue to collaborate at county and regional committees that are tasked with assessing system performance, developing, and improving service delivery, and building cross system relationships to improve access and outcomes. These local and regional committees/groups include:

- North Sound BH-ASO County Local Crisis Oversight (Snohomish, Skagit, Island, San Juan and Whatcom Counties)
- North Sound Joint Operating Committee
North Sound Crisis Service Leadership Group

In addition, North Sound BH-ASO staff and our crisis agencies participate as needed in our Advisory Board and Board of Directors meetings. These meetings provide valuable feedback from stakeholders that have intimate knowledge of North Sound BH-ASO operations and programs. This feedback is shared through internal routine committees and the regional committee groups described above.

The North Sound BH-ASO maintains a strong relationship with community providers and agencies. Feedback from our partners is integrated into regional and local strategies for quality improvement. This includes active participation of North Sound BH-ASO staff in county-based crisis oversight committees that focus on local issues and efforts related to crisis services. During 2022, Local Crisis Oversight committees continued to provide:

- Direct feedback from community stakeholders and partners. Our Local Crisis Oversight structure acts as a system feedback loop regarding service delivery strengths and opportunities for improvement.
- A venue for Improved collaboration and protocols between crisis services, law enforcement, Fire/EMS and critical emergency care.
- Maintained a cross-system dialogue about changes to the continuum of acute care services, to include program or facility capacity changes and coordination protocols.

North Sound BH-ASO Annual Crisis Assessment

2023

Crisis Service Voice Project

As a follow-up to our prior Crisis Annual Assessments, North Sound BH-ASO and our Advisory Board identified a needed action to develop a work plan to assess and incorporate individual and family voice into our strategic plan for crisis services.

In 2023, North Sound BH-ASO initiated an action plan that will focus on several objectives:

- Evaluate strategies and tools for crisis providers to assess and capture user experience following RCL and Mobile Crisis Response interventions.
 - Assess and develop a standardized survey method for community, family, and individuals to evaluate key aspects of the crisis system to include but not limited to:
 - Assess the degree to which marginalized communities feel comfortable accessing crisis services.
 - Assess equity of services across racial and ethnic populations.
 - Assess community perceptions of available mobile crisis response, the availability of peer supported interventions and DCR response.
- Assess individual's experience receiving crisis services.

The Crisis Voice project is proposed for 2024-2025 and we are planning on partnering with an external independent organization to support the work. This project will be critical to ensure crisis services in the region listen to and are guided by community voice and need.

2023 Key Opportunities

- North Sound BH-ASO's partnership with the state to fully implement new legislation for Mobile Rapid Response Crisis Teams (MRRCT) and support expansion of community-based teams.
- Fully fund the workforce expansion of crisis services to include the availability of community-based, multidisciplinary programming that meets best practice standards.
- Continue full implementation of Assisted Outpatient Treatment (AOT) in Snohomish County and continued advocacy for expanded resources to support BHAs providing LRA treatment.
- Support Tribal DCR expansion and provide technical, coordination and training support with DCRs, court systems and the hospital network.
- Fully Integrate our Diversity, Racial and Equity Initiative (DRIE) Strategic Plan in 2024.
- Continue to fully operationalize our Child, Youth and Family Crisis Teams (Mobile Response and Stabilization Services – MRSS).
- Continue to expand funding for co-responder programs embedding Behavioral Health professionals with law enforcement and first responders. Support expansion of co-responder programs as a Medicaid billable service.
- Support funding and coordination of service for new Crisis Stabilization and 23-hr Crisis Relief Centers.
- Continue to fund existing Crisis Stabilization and Withdrawal Management facilities and encourage their use as a central access point for crisis services for first responders and others.
- Continue regional implementation of data sharing platforms to provide access to pertinent treatment and crisis plan information for crisis agencies.
- Continue supporting regional system coordination with our crisis agencies, community outreach programs, key partners and stakeholders and broader Behavioral health network.