NORTH SOUND MENTAL HEALTH ADMINISTRATION

ADVISORY BOARD MEETING AGENDA

September 1, 2015

1:00pm-3:00pm

	1.00pm-5.00pm	
1.	Call to Order - Introductions, Chair	
2.	Revisions to the Agenda, Chair	
3.	Comments from the Public	
4.	Approval of the August Meeting Minutes	TAB 1
5.	Review upcoming Pre-Meeting and identify questions	TAB 2
6.	Executive/Finance Committee Report a. Approval of the August Expenditures b. By-Laws (Available at meeting)	TAB 3
7.	Standing Board of Directors Committee Reports a. Planning Committee b. Quality Management Oversight Committee (Available at meeting)	TAB 4
8.	Old Business a. Advocacy Priorities: Discuss gaps/initiatives for child/youth services b. AB Recruitment Process c. Evaluation and Treatment Center/ Sept. 9th Open House d. Shuttle Quote/Legislative Session 2016	TAB 5
9.	Executive Director Report	
10.	Action Items Being Brought To The Board of Directors a. Action Items/ Memorandum (Available at meeting)	TAB 6
11.	New Business a. AB Poll for 2016 Board Meetings	TAB 7
R	eport from Advisory Board Members a. Greg and Mark-NAMI Conference	
	Comments from County Advisory Board Representatives a. Island b. San Juan c. Skagit d. Snohomish e. Whatcom Other Business	

<u>NOTE:</u> The next Advisory Board meeting will be **October 6**th in the NSMHA Conference Room.

14. Adjournment

North Sound Mental Health Administration (NSMHA) MENTAL HEALTH ADVISORY BOARD August 4, 2015

1:00 – 3:00pm

Island: Candy Trautman
San Juan: Peg LeBlanc (via phone)
Skagit: Jeannette Anderson, Joan Lubbe
Snohomish : Greg Wennerberg, Carolyn Hetherwick Goza, Marie Jubie, Joan Bethel,
Fred Plappert, Carolann Sullivan
Whatcom: David Kincheloe, Rachel Herman, Michael Massanari
Island:
San Juan:
Skagit:
Snohomish: Jennifer Yuen
Whatcom: Mark McDonald
Island:
San Juan:
Skagit:
Snohomish: Jeff Ross
Whatcom: Larry Richardson
Joe Valentine, Margaret Rojas, Joanie Williams recording
Bobbie Pereira, Lisa Uren, Linda Kehoe, Chuck Davis

MINUTES

TOPIC	DISCUSSION	ACTION	ı
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CALL TO ORDER AND	INTRODUCTIONS	
Chair	David initiated introductions and said Mark will be out today.	Informational
	He introduced Rachel Herman, the new Whatcom County Advisory Board Member. He asked her to speak about her background.	
	She said she has over 10 years' experience in the chemical dependency field, working in an outpatient facility for adolescents and families. She is currently the Regional Manager for a local Planned Parenthood affiliate, and would like to keep updated on Behavioral Health Care matters.	
REVISIONS TO THE A	GENDA	
Chair	David asked if there were any revisions to the agenda, there were	Informational
	none.	
COMMENTS FROM T	HE PUBLIC	
Chair	Bobbie spoke about the personal benefit of attending the Behavioral Health Conference (BHC). She was an Advisory Board (AB) Scholarship Recipient. She also said she would like to be an Advisory Board Member once there is an opening with Snohomish County.	Informational
	Linda Kehoe spoke about the North Sound Peer Network and the Steering Committee recently formed with Certified Peer Counselors. The Network's mission is to inform people of recovery services and resources. The Network is following the outline for Consumer Voices are Born (CVAB). She asked the Advisory Board to spread the word about the Network. Linda will provide the Advisory Board with	

meeting information, as it becomes available. David asked the Advisory Board to follow up with Linda if they are interested in being part of the network.

David said he will be leaving at 1:30 today and Candy would be taking over as Chair.

OMBUDS: Chuck gave an overview of the Ombud's Snapshot.

A suggestion was made for Chuck and Pat Morris to present an AB Pre-Meeting regarding Dispute Resolution. Joanie will add this to the AB's Pre-meeting document.

REVIEW UPCOMING PRE-MEETING AND IDENTIFY QUESTIONS

Chair

Peg will be speaking about early prevention at the Elementary School level during the next Pre-meeting. The Advisory Board members were asked to email Joanie any questions they may have for Peg. Below are two of the questions they would like her to address:

informational

- 1) How do you include parents in the preventative services?
- 2) Are Special Education students included in the services?

Peg noted she will be addressing these questions, as well as others on September $\mathbf{1}^{\text{st}}$.

EXECUTIVE/FINANCE COMMITTEE

Approval of the July expenditures: Candy asked the Members to review the expenditures, a motion was made to forward the expenditures to the Board of Directors (BOD) for approval. All approved, none opposed, none abstained. She also noted that the Executive Finance Committee (EFC) approved the business portion minutes from the July Retreat.

Motion approved to forward expenditures to the BOD

Revised Reimbursement Policy: Joe spoke about Policies 4512 and 3031.

He noted the Board of Directors approved the meal allowance revisions in Policy 3031. AB Members will have the same meal limits as NSMHA Staff, Policy 4512 will reference Policy 3031 as to the allowances. The breakfast reimbursement meal limit increased from \$10.00 to \$12.00, lunch increased from \$15.00 to \$17.00 and dinner decreased from \$31.00 to \$27.00.

He went on to say there seems to be lack of clarity among some Board Members regarding the parameters around the allowable meal reimbursement while traveling to and from business meetings. He said the intent of the policy is to reimburse the cost of the actual meal, which is in compliance with Federal regulations.

Action Item: A motion was made to approve the meal limitations as presented. All were in favor, none opposed.

Motion approved to approve revised meal limitations

Fred was reviewing Policy 4512 and noted that Valley Taxi is no longer in business, Joanie will ensure the policy gets revised.

	T	
	Behavioral Health Conference (BHC) Evaluations: Candy asked the	
	Advisory Board Members to look over the evaluations from the	
	scholarship recipients of the Behavioral Health Conference. Bobbie	
	Pereira, Wanda Waters and Nancy Storm submitted the evaluations	
	to the AB for review. One scholarship recipient did not turn in the	
	form, Joanie will send an email.	
	By Law Revisions: Candy noted the revisions are still in progress and	
	will be presented at the next meeting. Revisions will be made on	
	Article 5; Officers, and Article 9; Resignation/Termination.	
STANDING BOARD O	F DIRECTORS COMMITTEE REPORTS	
	Planning Committee –Candy referenced the report in each member	Informational
	binder.	
	Quality Management Oversight Committee (QMOC) Report	
	Candy referenced the report in each member binder.	Informational
OLD BUSINESS	<u>'</u>	
	Advisom Poord Advisors Priorities Children's Comisses	Informational
Chair	Advisory Board Advocacy Priorities, Children's Services:	imormational
	Joe said during the next meeting the Advisory Board will identify key gaps (from the last two Pre-Meeting Presentations) regarding children's services and begin to discuss the gaps.	
	Greg spoke about interest in hearing information on incarceration	
	and the juvenile justice system. Peg will speak about this during the September 1 st pre-meeting.	
	Jeannette asked for Peg to speak about children in school once they have experienced an Adverse Childhood Experience (ACE). Joanie will add these topics to Peg's list.	
	AB BHO Configuration: Joe led the group in conversation regarding the Retreat discussion on the configuration of the Behavioral Health Organization's (BHO) Advisory Board (AB). Joe asked the group to revisit the criteria. He said a recommendation from the Advisory Board is needed in forming the BHO AB. The draft plan needs to be done by September. The final plan will be presented to the Board in October.	
	Joe referred to the criteria that the AB came up with during the Retreat and each item was covered. He noted some additional items. No more than 25 members will sit on the Board, individuals with lived experience will be added, a seat for law enforcement will be offered, seats will be offered to tribal authorities, and (number of seats will be discussed with the State). He asked the AB to decide if any of the criteria is problematic and/or if there was additional criteria they would like submitted. Joe said a proposal will be written up with the criteria incorporated which will be submitted to the AB in September. The State is potentially approving the plan in January, it is proposed that the new inter-local agreement be signed in February, as well as recruiting new Board Members. Joanie will develop a recruitment brochure to be distributed to attract new members. Joe will be sharing the criteria with the County Coordinators on	
	Thursday regarding size and composition. NSMHA will propose	

applications be reviewed by an AB sub-committee and then submitted to the County with recommendation if the candidates meet the criteria, or not.

Co-Occurring Disorders (COD) Conference: Candy led the group in conversation regarding interest in attending the COD Conference.

The members interested in attending are Mark, Greg, Joan B, Jennifer and Carolann. Candy asked Joanie to send out an email to the group in case any additional members would like to attend.

EXECUTIVE DIRECTOR REPORT

Joe said several new portions of legislation were adopted this year. He spoke about Joel's Law which went into effect July 24th. The legislature will provide funding for the court costs. He covered the difference between Joel's Law and Mandated Out-Patient Treatment.

Joe spoke about the BHO Plan; the outline will be presented during the September meeting. The inter-local agreement is being revised.

There will be an open house for the Evaluation and Treatment Center (E&T) September 9th, Joanie will make travel arrangements for members.

The children's Wraparound with intensive services (WISe) was discussed, as well as the State's increase in number of children being served. DSHS is asking us to double the number of children to be served in our WISe program by next April.. Joe added there is a challenge in recruiting sufficient workforce.

Northwest NWESD is terminating the contract with NSMHA, the funding will be given to existing Providers to serve the kids in the schools.

ACTION ITEMS BEING BROUGHT TO THE BOARD OF DIRECTORS

Joe spoke about the Action Items which will be going to the Board of Directors next week. A motion was made to forward the Action Items to the Board of Directors for approval. Motion was seconded and approved. All were in favor, none opposed.

Motion approved to forward Action Items to the Board of Directors

Public Forum: Joe said a Public Forum is tentatively scheduled for October 30th regarding the plan to replace the Sedro Woolley facility. The forum will probably be held at the Skagit County Commissioner's Office. Advisory Board will get and invitation. The time has yet to be determined.

NEW BUSINESS: Sedro Woolley Evaluation and Treatment Facility (E&T) was mentioned above.

REPORT FROM ADVISORY BOARD MEMBERS

Greg Wennerberg: Recovery Web Tools:

Greg spoke about cell phone applications for various mental health conditions. He passed out a document with the web site and diagnoses types which have apps.

Legislative Session; Shuttle for Group Visit:

Greg spoke about a trip for the AB to attend the legislative session once, maybe twice. A motion was made to provide a budget in 2016 for Board Member transportation to the legislative session, in January or February 2016 (he emphasized not on Martin Luther King Day). The motion was seconded and approved. Details will be worked out in advance. Joanie will research travel options. This will be on the agenda for the next meeting. Greg and Marie will come up with a report to be presented at the September meeting. Joe reminded Greg that the date needs to be identified and scheduled ahead of time with the various legislative offices so their calendars are marked for the visit. Greg talked about getting a room where the legislators will come. There was communication regarding having a one page document of bullet items ready to go ahead of time.

Tom Sebastian's Pre-Meeting regarding bus shelter:

Greg spoke about Tom Sebastian's visit to the Advisory Board. He talked about various items that he felt needed revisited. He noted there was low attendance the day Tom spoke.

Carolyn Hetherwick-Goza:

Funding for Counselors to Assist during Community Outreach Dinner:

Carolyn spoke about a program her church offers feeding the community Wednesday evenings. She asked for funding either from NSMHA or the County to pay for two counselors to offer resources for the homeless and those with substance use disorders, as well as mental health issues. Joe asked Carolyn to write up her request and submit it to Joanie. Joe said he will talk to Cammy once he receives the letter.

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COMMENTS FROM COUNTY ADVISORY BOARD REPRESENTATIVES					
Island					
San Juan					
Skagit Jeannette noted Carolyn's request could be modeled across the Informational					
	nation and could be an Evidence Based Practice.				
Snohomish					
Whatcom					
,					
ADJOURNMENT:					
Chair	Candy adjourned the meeting at 3:00pm	Informational			

Advisory Board Budget January through August 2015

		All	Board Development	Advisory Board Expenses	Stakeholder Transportation
	Total	Project # 1	Project # 2	Project # 3	Project # 4
Budget	\$ 34,000.00	\$ 14,896.00	\$ 1,700.00	\$ 17,204.00	\$ 200.00
Expense	(17,056.78)	(5,540.39)	(501.72)	(11,014.67)	
Under / (Over) Budget \$ 1	\$ 16,943.22 \$	\$ 9,355.61 \$	\$ 1,198.28 \$	\$ 6,189.33 \$	\$ 200.00
		V	•	\$	\$

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

North Sound Mental Health Administration Warrants Paid August 2015

08/27/15

Type	Date	Num	Name	Memo	Amount	Balance
Advisory Board	ard					
Travel						
Bill	08/04/2015	July2015	AA Dispatch	Batch # 110893	260.25	260.25
Bill	08/04/2015	Apr-July2015	Kincheloe, David	Batch # 110893	158.93	419.18
Bill	08/04/2015	Nov-Dec2014	Kincheloe, David	Batch # 110893	153.44	572.62
Bill	08/04/2015	July2015	Yuen, Jennifer	Batch # 110893	73.88	646.50
Bill	08/11/2015	June-July2015	Trautman, Candy	Batch # 110979	128.80	775.30
Bill	08/20/2015	24835	Board of Regents/CASAT	Batch # 111116	840.00	1,615.30
Bill	08/20/2015	July2015	NAMI Conference Tickets	Batch # 111112	701.61	2,316.91
Bill	08/20/2015	July2015	Greyhound ticket	Batch # 111112	95.00	2,411.91
Bill	08/20/2015	July2015	Greyhound ticket	Batch # 111112	85.00	2,496.91
Total Travel	vel			•	2,496.91	2,496.91
Miscellaneous	neous					
Bill	08/20/2015	2984	Everett Community College	Batch # 111112	501.72	501.72
Total Mis	Total Miscellaneous			•	501.72	501.72
Total Advisory Board	ry Board				2,998.63	2,998.63
Grand Total					2,998.63	2,998.63
				•	2.998.63	2.998.63

North Sound Mental Health Administration

Regional Support Network for Island, San Juan, Skagit, Snohomish, and Whatcom Counties Improving the mental health and well being of individuals and families in our communities

117 North First Street, Suite 8 • Mount Vernon, WA 98273

360.416.7013 • 800.684.3555 • Fax 360.416.7017 • Email nsmha@nsmha.org • Web Site http://nsmha.org

Planning Committee Meeting Brief August 21, 2015

Overview of Behavioral Health Organization Plan (BHO)

The first rough draft of the plan outline was presented; the summary plan is due to the State by October 30th. An overview of the work accomplished to date and an outline of the plan was discussed. We are looking at rates and what the service components will be in developing co-occurring services and the structure of the RSN will need to change to a more formal structure. Two large components of the planning process are communications and workforce development. A communication plan to notify enrollees, providers and others of the integration of SUD services; including accessing SUD services via the Access line is needed as a network of SUD providers is established. The need to increase the workforce and provide ongoing training and also facilitate staff in getting their Chemical Dependency Professional (CDP) certifications will be addressed. There is a workgroup meeting coming up on September 11th to take a look at the development of the fiscal model.

Overview of Geriatric Transition Team

Ruth Fielding the program supervisor attended the meeting to give an overview of the program. The program has been up and running for nine months and is still hiring to fill all positions. The program serves all five counties with the goal to address dementia, mental health and challenging behaviors that make it difficult to place or maintain enrollees in long term facilities and adult family homes. Another aspect of the program is training, coaching and mentoring of caregivers to understand and address the challenging behaviors. To date the program has had 118 referrals with 67 that were eligible for the program; of those 19 are on a waitlist that is being addressed as staffing is completed.

Mental Health Services for Kids Outside the RSN

Anji Jorstad

Mental Health Supervisor

Snohomish County

Presentation Overview

- Mental Health Issues for Kids
- If There is a Crisis
- Access and Eligibility
- Service Providers-What is Working
- Gaps
- Resources
- Questions/Discussion



Mental Health Issues are Common for Children and Teens

According to the US Surgeon General:

- One in five children will suffer from a diagnosable mental health condition each year.
- One in ten kids will have symptoms that are significant enough to seriously affect their functioning in school, at home, and in the community.
- In any given year, only 20% of children with mental illness are identified and receive mental health services.

Some reasons can include:

- The stigma often associated with mental illness
- Lack of knowledge regarding mental health issues
- Difficulty accessing or paying for services
- Kids who do not receive the care they need are:
- More likely to struggle in school
- Less likely to graduate from high school
- Likely to have difficult family and social relationships and are at a higher risk for family and social conflicts
- At higher risk for delinquency

Did You Know?

- Mental illness can affect anybody regardless of race, ethnicity, gender, age, or socio-economic background.
- Mental illness is not caused by poor decisions.
- Mental illness affects a person's physical, mental, and emotional wellbeing.
- 50% of mental illness begins by age 14.
- Suicide is the second leading cause of death for ages 15-24.
- One in five children who need mental health care actually receives it.

Information sources: National Alliance on Mental Illness, National Institute of Mental Health, Substance Abuse and Mental Health Services Administration, Mayo Clinic

If There Is a Crisis

Crisis Intervention

• If there is no immediate physical danger but still need emotional support and/or crisis intervention

Care Crisis Line at 1-800-584-5578 (toll-free) or 425-258-4357 for 24/7 support.

Online crisischat.org between 3:00 pm - 11:30 pm Monday-Friday.

National Suicide Prevention Lifeline for 24/7 assistance toll-free at 1-800-273-8255

To get an immediate mental health assessment for your child, the **Care Crisis Access Line ,thru** VOA ,is the point of contact to determine next steps and resources. Their number is 1-888-693-7200 or 425-212-3900.

Expedited assessments

Inpatient Hospitalization

If the Care Crisis Line dispatches a <u>Designated Mental Health Professional</u> 24/7 to evaluate a child, and it is determined they will need inpatient psychiatric care, it is important to know ones rights and responsibilities around <u>Parent Initiated</u> <u>Treatment</u> (PIT). The Emergency Room Social Worker will explain this process.

Seattle Children's Hospital -To get admitted the ER outpatient team, at a local hospital, need to contact the Psychiatry Unit Admissions Team ASAP--an admission and can only be accomplished by having the patients current care providers initiate a request for inpatient care. Call 206-987-2055 and ask for the Admissions Coordinator. The best way to assure an admission is to bring the child to their emergency room.

Access and Eligibility Options

If Child Does Not Meet Access to Care Standards

- Individual is determined to have a mental illness a covered diagnosis in the list of Covered Childhood Disorders. DSHS maintains this list – contains most major Axis I and Axis II disorders. Does not include Autism, Asperger's Disorder, and Pervasive Developmental Delays.
- Some diagnoses require additional criteria documenting that there is a high level of impairment in order to qualify.
- Impairment and needs must be the result of mental illness.
- Intervention is deemed to be necessary to improve, stabilize, or prevent deterioration of functioning.
- Individual is expected to benefit from the intervention.
- Individual need would not be more appropriately met by any other formal or informal system or support.
- Children under the age of six may not readily fit diagnostic criteria. For them, eligibility is determined on the basis of functional impairment related to the symptoms of an emotional disorder.

All Apple Care Managed Care Organizations have a mental health benefit

Apple Health = 5 MCO's (Non Severely Emotionally Disturbed)

- Community Health Plan of Washington CHPW
- Molina Healthcare
- Amerigroup
- United Healthcare
- Coordinated Care

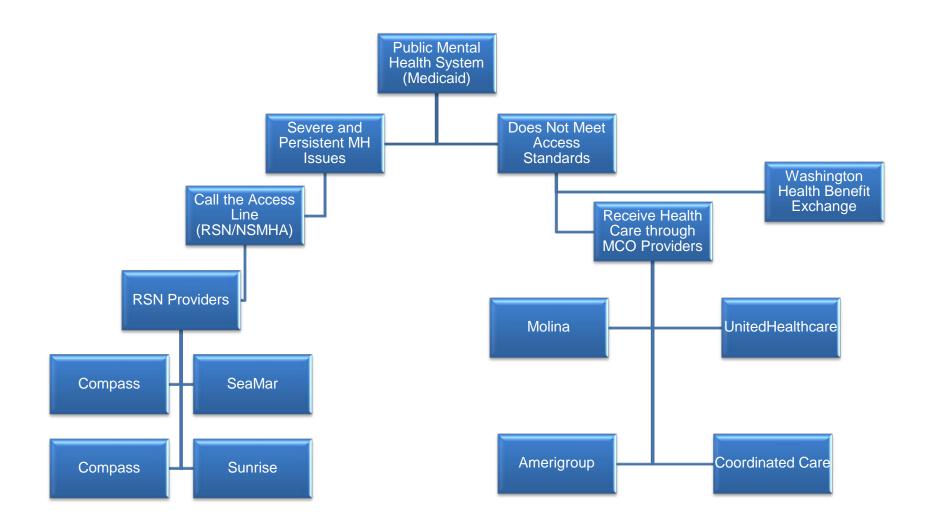
Washington Health Benefit Exchange www.wahbexchange.org

1-855-923-4633

-137-400 % of Federal Poverty Level

Private Insurance No Insurance

Public Mental Health System



Service Providers for Children

County Funding 1/10 of 1% Sales Tax funded programs

- SSA's-12 in 15 schools-Edmonds, Everett, Granite Falls and Mukilteo
- Snohomish County Music Project
- 8 Family Support Centers
- Wayout
- Denney Juvenile Justice Center
- 211 gives information about available programs
- Snohomish County Children's Mental Health Liaison

Gaps

- Lack of child psychiatrists
- Private insurance with copay or deductible that is cost-prohibitive
- Lack of mental health services in the schools
- Lack of alcohol and drug services in the schools
- Lack of services for kids 18-21
- Rural communities lack services

Resources

- Below are some credible **Phone Apps** that can address concerns you or someone you know may be experiencing:
- Bullying App http://store.samhsa.gov/apps/knowbullying/index.html
- Suicide App http://store.samhsa.gov/apps/suicidesafe/index.html

Some Helpful Websites:

- Substance Abuse and Mental Health Administration https://findtreatment.samhsa.gov/
- National Alliance on Mental Illness http://www.nami.org
- National Institute of Mental Health http://www.nimh.nih.gov/index.shtml
- For support around Bullying <u>www.stopbullying.gov</u>
- The National **Suicide Prevention** Lifeline (www.suicidepreventionlifeline.org offers 24/7 emotional support via their hotline 1-800-273-TALK. The calls are free and confidential and anyone is welcome to call, especially after experiencing a loss.
- Concerned about Someone Online? http://emotiontechnology.com/concerned-for-someone-online/

Comments/Questions

Contact Information:

Anji Jorstad

Snohomish County Mental Health Supervisor

425-388-7211

Liza Patchen-Short

Snohomish County Children's Mental Health Liaison

425-388-7254

Notes from Retreat regarding AB BHO July 7, 2015

Configuration Advisory Board Configuration: Joe led the group in conversation regarding the BHO Advisory Board. He listed the WACs, Lived Experience, County Boards, Criteria, Size, County Role and the AB Role on the flip chart and went on to speak about the requirements for the BHO Advisory Board which was followed by group conversation. The requirements are listed below.

Detailed Plan Request Behavioral Health Organization Advisory Board Membership, Exhibit F

The Behavioral Health Organization must maintain an Advisory Board that is broadly representative of the demographic character of the region. Composition of the Advisory Board and the length of terms must be provided to DSHS upon request and meet the following requirements:

- Be representative of the geographic and demographic mix of service population
- Have at least 51% of the membership be persons with lived experience, parents or legal guardians of persons with lived experience and/or self-identified as a person in recovery from a behavioral health disorder.
- Law Enforcement representation
- County representation, when the BHO is not a County operated BHO
- No more than four elected officials
- No employees, managers or other decision makers of subcontracted agencies who have the authority to make policy or fiscal decisions on behalf of the subcontractor.
- Three year term limit, multiple terms may be served, based on rules set by the Advisory Board.

Discussion followed after Joe read the Detailed Plan Request. The Advisory Board dialogued and came up with the desirable criteria on the configuration which is listed below.

Outcomes of BHO Advisory Board Discussion on Desirable Criteria for Configuration:

- Committed to integrated health approach/diverse population of representatives
- Deal with others perspectives
- Possible nomination committee model/recommendations given to County
- Deciding who the candidates are who have "lived experience"
- Willingness to participate in training and education on the entire range of behavioral disorders
- Collect Board Member stipulation criteria from Counties
- Prospective Nominees attend one or two meetings to determine fit
- Encourage Board Members to suggest candidates/Some kind of recruitment method
- Reach out to Substance Use Community/Develop a Process
- Advisory Board active in screening and selecting candidates
- Geographic consideration of rural areas / attracting more members to include Veterans / Cultural Diversity/ Youth/ Parents of Youth/ Age / Language
- Parents of children with lived experience
- Professional Members on the Board
- County proportion composition verses numeric composition
- Learn from County experiments/ successes and lessons learned

Size of the Board was discussed. The general consensus was no more than 25 members would be best. Different viewpoints were voiced, as well as lessons learned from the county integrated boards, noting the requirement for the county boards will no longer be mandated.

In closing, the group will continue to think about desirable criteria regarding the diverse people groups. The next AB Meeting will attempt to determine more definitive recommendations around the criteria. Joe will get feedback from the County Coordinators and bring it back to the AB Board.

You're Invited: North Sound E&T

Telecare Corporation and North Sound Mental Health Administration are pleased to announce the opening of North Sound E&T, a 16-bed hospital providing acute psychiatric treatment to individuals diagnosed with a serious mental illness. This much-needed facility will serve adults in the North Sound Region who are in crisis and need a 24-hour, structured treatment program. Please join us to celebrate the opening of North Sound E&T.

When: September 9th, 2015

Where: North Sound E&T 7825 North Sound Drive, Sedro Woolley, WA 98284

RSVP: by August 31st to Daphne Phillips dphillips@telecarecorp.com





Hi Joanie,

We have a 9 passenger van and a 20 passenger mini bus. Seems the van is too small, but just in case..

Price for each as follows:

Van \$800 Mini bus \$930

Please let me know if you have any questions or if you would like to book.

Thank you!

Colby Loney | Bellair Charters / Airporter Shuttle Charter Coordinator phone: 360.543.9379 colby@bellaircharters.com | www.bellaircharters.com

Your transportation solution since 1985





On Aug 26, 2015, at 4:50 PM, Joanie Williams < <u>Joanie_Williams@nsmha.org</u>> wrote:

Colby,

We need a quote for a shuttle or van to take up to 10 people to the Capitol Building in Olympia. We don't have an exact date but it will be on a Thursday in January.

The driver would make stops along the way and leave Mount Vernon probably around 7 am; and not getting back until around 7pm the same day.

Joanie Williams
Administrative Coordinator
North Sound Mental Health Administration
117 N. 1st St., Ste. 8
Mount Vernon, WA 98273
Joanie Williams@nsmha.org
360.416.7013 x 645 - Fax 360.416.7017

Meeting Poll 2016					
The NSMHA AB Meetings must take place the first week of the month, prior to the Board of Directors Meeting					
Monday Morning 9am-1pm	Monday mid-day 11-3pm	Monday afternoon 1-5pm			
Tuesday Morning 9am-1pm	Tuesday mid-day 11-3pm	Tuesday afternoon 1-5pm			
Wednesday Morning 9am-1pm	Wednesday mid-day 11-3pm	Wednesday afternoon 1-5pm			
Thursday Morning 9am-1pm	Thursday mid-day 11-3pm	Thursday afternoon 1-5pm			
Friday Morning 9am-1pm	Friday mid-day 11-3pm	Friday afternoon 1-5pm			
Leave Meetings on the current day and time, 1 st Tuesday of the month, 11-3pm					