



North Sound Behavioral Health Advisory Board

Agenda

November 5, 2024

1:00 p.m. – 3:00 p.m.

Call to Order and Introductions

Revisions to the Agenda

Approval of September Minutes

Announcements

Brief Comments or Questions from the Public

Island County Membership Vote – Julie Melville

Assisted Outpatient Treatment – Garrison Whaley-Sharp, North Sound ASO AOT Coordinator

Youth Navigator Program/Kid's Mental Health – Angela Fraiser-Powell, Youth Navigator Program Manager

Office of Behavioral Health Advocacy – Jeremy Smith, Behavioral Health Advocate

Executive Committee Report

Director's Report

Action Items

Old Business

- 2024 Advisory Board Officer Nominees
- 2025 Advisory Board Proposed Operating Budget Vote







New Business

- 2025 ASO Proposed Operating Budget Presentation
- Advisory Board Holiday Potluck
- Advisory Board New Time Proposal
- Legislative Debrief
- 2025 WA Behavioral Healthcare Conference

Report from Advisory Board Members

Reminder of Next Meeting

North Sound Behavioral Health Administrative Services Organization
Advisory Board Budget
October 2024

		All Conferences	Board Development	Advisory Board Expenses	Stakeholder Transportation	Legislative Session	Community Projects
	Total	Project # 1	Project # 2	Project # 3	Project # 4	Project # 5	Project # 6
Budget	\$ 20,000.00	\$ 7,000.00	\$ 4,500.00	\$ 4,000.00	\$ 800.00	\$ 3,000.00	\$ 700.00
Expense	(6,067.11)	\$ (392.00)	\$ (3,691.70)	\$ (1,809.81)	\$ (173.60)		
Under / (Over)							
Budget	\$ 13,932.89	\$ 6,608.00	\$ 808.30	\$ 2,190.19	\$ 626.40	\$ 3,000.00	\$ 700.00
							
		All expenses to attend Conferences	Advisory Board Retreat/Summit	Costs for Board Members (meals mileage, misc.)	Non- Advisory Board Members, to attend meetings and special events	Shuttle, meals, hotel, travel	

NORTH SOUND BH-ASO
AdBrd Transaction Detail by Account
October 2024

	Type	Date	Num	Name	Memo	Amount	Balance
56433 · Public Education							
5643300 · Advisory Board							
5643343 · Travel							
	Bill	10/22/2024	445	AA Dispatch-Yellow Cab	Batch # 152349	258.50	258.50
Total 5643343 · Travel						258.50	258.50
Total 5643300 · Advisory Board						258.50	258.50
Total 56433 · Public Education						258.50	258.50
TOTAL						258.50	258.50

North Sound Behavioral Health Administrative Services Organization
Advisory Board Budget
2025

Budget Expense Under / (Over) Budget		All Conferences	Board Development	Advisory Board Expenses	Stakeholder Transportation	Legislative Session	Community Projects
	Total	Project # 1	Project # 2	Project # 3	Project # 4	Project # 5	Project # 6
	\$ 20,000.00 0.00	\$ 7,000.00	\$ 4,500.00	\$ 4,000.00	\$ 800.00	\$ 3,000.00	\$ 700.00
	\$ 20,000.00	\$ 7,000.00	\$ 4,500.00	\$ 4,000.00	\$ 800.00	\$ 3,000.00	\$ 700.00
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DRAFT

North Sound Youth Behavioral Health Navigator Program

North Sound Advisory Board

Briefing

Background

On March 15, 2021, Governor Jay Inslee signed an emergency proclamation recognizing the current mental and behavioral health emergency among Washington's children and youth.

No single entity or system owns full responsibility for crises, and a single entity or system is not, on its own, sufficiently leveraged to address the multiple complexities necessary for a healthy system.

Given the multifactorial determinants of behavioral health for youth and Washington emergency department boarding numbers, potential solutions will require a variety of strategies and collaboration across our system.

Therefore, the Health Care Authority (HCA) has been partnering with Kid's Mental Health Pierce County and Developmental Disabilities Administration (DDA) to stand up teams in all regions across the state in three phases

Purpose

To support children, youth and families with complex behavioral health needs and challenges at the local level

Improve care coordination and collaboration across providers and systems through convening Multi-disciplinary Teams (MDTs)

Improve access to behavioral health and a wider array of other system services and supports

Work to capture community level data in order track trends and support needed change throughout the region

State - Directed Priorities

Multidisciplinary Team (MDT)

Includes representatives from local providers, administrative organizations, state agencies, community stakeholders, and youth/parents with lived experience

Hospital / Emergency Department Care Coordination

Priority access to MDTs are to be given to youth boarding in emergency departments due to lack of placement options.

Staffing

Identify and hire staff to lead the development, implementation and ongoing facilitation and management of the YNP.

Steering Committee Development

Develop a regional steering committee representing behavioral health providers, allied systems, emergency / crisis systems, payors and family / youth lead groups.

Website

Develop and maintain a regional Youth Navigator Program website to enable access to YNP support and other helpful information.

Data Collection

Submit monthly and quarterly data to the state to help identify gaps/needs and to inform state policy makers.

Implementation

What we are hoping to accomplish in the next 6 -12 months:

- Program Hiring
- Develop a community Steering Committee which could include:
 - Schools, Emergency Departments, Juvenile Justice, Pediatricians, BH providers, School Support providers, Youth and Family Peer Organizations, Tribes, DDA Case Managers, FYSPRTs, Regional CLIP, etc.
- Develop a regional Strategic Plan & Two (2) year Action Plan
- Regional Program Branding, Website and community referral structure
- Kids Mental Health Technical Assistance and continue statewide learning collaboratives

Informative Websites

Kids' Mental Health Washington

Kids Mental Health Washington – Supporting the behavioral health needs of Washington kids, youth and families.

Kids' Mental Health Pierce County

Kids Mental Health Pierce County – Linking arms to improve children's mental health in Pierce County

Youth Access and Resource Program (YARP) – Greater Columbia BH-ASO

YARP Greater Columbia – Youth Access and Resource Program (YARP) (kidsmentalhealthwa.org)

REACH - Spokane BH-ASO

Welcome to REACH | Spokane County, WA

Salish Youth Network Collaborative – Salish BH-ASO

Home - SYNC (salishbehavioralhealth.org)

Youth Behavioral Health Navigator Program- Southwest BH-ASO

Home - Kids Mental Health Southwest Washington (kidsmentalhealthsw.org)

Youth Behavioral Health Navigator Program – North Central BH-ASO

Questions or Recommendations

Angela Fraser-Powell

Youth Care Coordinator & Clinical Specialist

angela_fraser-powell@nsbhaso.org



Office of Behavioral Advocacy Training

Module I

Definition of Advocacy

Advocacy is a type of problem solving designed to protect personal rights, and to ensure a dignified existence. Advocacy is problem solving used to:

- § Protect rights or to change unfair, discriminatory or abusive treatment to fair, equal and humane treatment.
- § Improve services, gain eligibility for services, or change the amount or quality of services to better meet the needs of an individual or group.
- § Help get answers to questions about the behavioral health services

Types of advocacy

- System advocacy is changing “the system;” additionally, it is used to promote causes.
- Legal advocacy is what lawyers are paid to do.
- Legislative advocacy is designed to change laws.
- Self-advocacy involves advocating for oneself.
- Individual advocacy involves advocating for another person.

The first task of an advocate is to become fully informed.

Approaches to Advocacy

- The goal of an advocate is to obtain a favorable result at the lowest level possible. In most situations, an advocate can start out by contacting those who can make the change that the individual wants.
- At the provider level, the agency will generally have a contact person to whom the BHA reports the grievance. The BHA should discuss the best process with the agency.
- The following approaches to advocacy are organized from the most informal and lowest level to the most formal and highest level.

Approaches to resolve grievances

Grievance: Any expression of dissatisfaction with services is a grievance and the agency or BHASO or MCO must follow grievance procedures.

§ Empowerment and Self-Advocacy

§ Agency Resolution

§ Conciliation and Mediation

§ Confidential Agency Issues

§ Regulatory Agencies

Empowerment and Self-Advocacy

- Self-advocacy techniques allow individuals to bring about resolution of their own concerns.
- Effective empowerment orients individuals toward resolving future problems on their own.
- It cannot be over-emphasized that empowering individuals to self-advocate strengthens their recovery.
- Never do something for a person that they can do themselves.
- When a person expresses dissatisfaction with services, it is treated as a grievance, even when the BHA takes no active part in resolution.
- When a person contacts the BHA, it is considered a case if the BHA helps to resolve the situation in any way, including by coaching and

Agency Resolution

- Agencies and BHASO/MCOs also have responsibility to investigate and resolve grievances and appeals, and they are responsible for the formal responses to the person.
- Agency contacts and BHAs should work collaboratively in resolving grievances.
- The BHAs should convey the person's preferences, especially regarding agency staff contacting the person directly.
- BHAs can also set the stage by asking an individual if agency supervisors or managers can contact the person to discuss resolution.

Conciliation and Mediation

- When individual feels that self-advocacy will not resolve an issue and simple intervention is not effective, mediation techniques bring both parties together to arrive at a resolution that both parties can agree to.
- The person, the BHA, or the agency, or BHASO/MCO may ask for a meeting.
- The person should be asked if they would like the BHA to be present (this request should always be honored)
- The BHA is often present to help an individual express their wishes and problem solve.
- Conciliatory approach are sometimes part of the resolution.

Conciliatory approach

- Sometimes part of the resolution,
- Help an individual who feels wronged express their feelings directly and get closure.
- Intended to gain goodwill or make someone feel heard
- Ideally, both parties emerge from mediation with a working relationship and resolution they both can live with.

Confidential Agency Issues

- There are some issues, particularly personnel issues, where specific details of the resolution may not be shared with the BHA or individual.
- For example,
 - § a staff member has acted inappropriately, internal disciplinary action may be taken that is confidential.
 - § The agency might describe resolution as being disciplinary action taken, without providing detail. The agency must respect the confidentiality of staff as well as providing assurance to an individual that the grievance was addressed.
 - § Agency management may issue apologies even when a staff

Regulatory Agencies

- The BHA may assist the individual in enlisting the assistance of regulatory agencies for issues that fall outside the authority of the BHASO/MCO or agency.
- Regulatory agencies have the responsibility to enforce rules and laws.
- Although BHA do not directly assist a person with these issues, a person could be directed to:
 - § Department of Social and Health Services
 - § DOH: for safety issues at a facility
 - § The BHA and/or person should notify the BHASO and all regional MCOs of DOH complaints, as they will also have interest in the quality of their facilities.
- Healthcare Authority regarding benefits

Qualifications of an Advocate

An effective advocate brings, develops, and refines the following skills in the course of their work

Objectivity
Independence
Sensitivity and understanding
Culturally Sensitive
Persistence and patience
Knowledge and judgment
Assertiveness
Ethics and respect of others
Steps in the Advocacy Process

Objectivity

- An advocate must be able to listen and evaluate objectively and must know and recognize their own prejudices and tendencies.
- Effectiveness as an advocate will be determined by the degree of objectivity that is brought to a situation.
- We all have biases toward and against groups, beliefs, and sometimes, people.
- Most common biases on the part of a BHA is:
 - § The tendency to believe what an individual says against an agency or provider.
 - § Listen to both sides and work for a reasonable resolution
 - § The clinicians do not respect individual rights or are not recovery oriented.
 - § Assume there are misunderstandings or miscommunication on either party's part, rather than to assume wrongful behavior or ill intent.

Independence

- To effectively and credibly advocate for an individual, and to monitor the quality of services, an advocate must exercise independent judgment.
 - Make independent, fair and impartial judgments; avoid conflicting, social and political interests
 - Exercise fairly and without prejudice or favoritism
 - Make decisions based on merit; not the support or influence of others influence

Sensitivity and understanding

- Interest and empathy must be exhibited.
- Good communication skills are essential.
- Active listening. More information will be shared, and a more accurate reading of the individuals' desires will be obtained
 - § Listen attentively
 - § Understand what they're saying (ask clarifying questions)
 - § Reflect on what is being said
 - § Retain the information
 - § Listen without judging or jumping to conclusions
 - § Don't impose your opinions or solutions

Culturally Sensitive

§ Being aware that cultural differences and similarities between people exist without assigning them a value – positive or negative, better or worse, right or wrong.

§ Provide accommodations for language and other barriers

§ Think beyond race and ethnicity. A person's culture is shaped by more than the color of their skin or the way that they dress. It's shaped by the person's life experiences and traditions

Persistence and patience

- Be determined and secure enough to weather storms, deal with setbacks, and maintain energy over time.
- The abilities to be patient
- Model patience to the individual will be an asset in resolving conflict and advocating for system changes

Knowledge and judgment

- An advocate must understand what to ask for, whom to ask, and how to exercise judgment about what is and is not reasonable.
- Knowledge and judgment develop over time with experience.

Assertiveness

- An advocate is polite, but firm.
- An individual's concerns are not considered “petty.”
- There needs to be a good working relationship with others, while the advocate remains in control of the situation.
- Communicate with tact and be professional and respectful.

Ethics and respect for others

- The privacy and confidentiality of the individual must be respected
- The basic rules of ethical conduct must be observed to maintain credibility.
- Advocates must adhere to the code of confidentiality and other ethical obligations.

Steps in the Advocacy Process

- BHAs have responsibilities as advocates.
- Problem is identified and the BHA follows up with an investigation and then advocates for a solution.

Steps in the advocacy process include:

Problem definition	Analysis and reporting
Gatekeeper	Action planning
Information gathering	Assertive action
Negotiation	Follow-up
Resolution	

Problem definition

- Determine what the issue is.
- There may be many concerns, but it is wise to focus on the most important problems and those which can be readily resolved.
- Individuals must have an active role not only in identifying problems, but in defining their priority.

Gatekeeper

- The BHA or person should next go to the best “gatekeeper,” or person who can help them resolve the problem.
- In most agencies and BHASOs/MCOs, the BHAs reports issues and is an active partner in understanding what has occurred.

Information gathering

§ Depending on the situation, the

What information to gather

Who was involved

How did it happen

What happen

Why did it happen

Where did it happen

What resolution are they seeking

When did it happen

Any witness?

Negotiation

§ The BHA should be an active part of resolution negotiation.

§ BHAs may assist a person in expressing themselves and their needs or may advocate directly for an individual.

§ Working both with an individual and with agencies and BHASOs/MCOs, BHAs should be knowledgeable about possible solutions and be creative problem solvers.

§ Possible resolutions should always be discussed with an individual, including any limits or laws that may prevent getting what they want.

§ For example, a person could not file a grievance because an agency will not provide services because they do not have

Resolution

§Resolution is the outcome of the advocacy efforts of the consumer and the advocate in collaboration with the agency and/or BHASO/MCO.

§This takes many forms: plans of correction, changes in policy, agreements to accept training, an apology, reinstatement of a service, etc.

§From the start of the grievance process, the BHAs work with an individual to clarify what resolution they would like and to help negotiate past any difficulties.

§Majority of the time the agency or BHASO/MCO will

Analysis and reporting

- The BHA must analyze the information which has been gathered.
- Formerly generally submit a bi-annual formal report is issued to the BHASO, BHAB, and DBHR.
- BHA reporting is both objective, documenting the number and types of cases, and subjective, noting trends and making recommendation.



Office of Behavioral Health Advocacy (OBHA)

Overview of OBHA

- May 2021, HB 1086 passed (chapter 202, Laws of 2021). This bill transferred oversight of the Ombuds services from HCA to the Department of Commerce to create the OBHA
- July 2022, Peer Washington was awarded the OBHA contract from the Department of Commerce. We started building the program according to the Revised Code of Washington (RCW) 71.40
- On October 1, 2022, the behavioral health ombuds services transitioned from the Behavioral Health Administrative Service Organization (BH ASO) to the OBHA
- OBHA ensures that Behavioral Health Advocate services are accessible in the ten regions identified by the managed care organizations across Washington State

History of Behavioral Health Ombuds

- Before October 1, 2022, the Behavioral Health-Administrative Service Organization (BH-ASO) provided the oversight and ensured their region had a Behavioral Health Ombuds (BH Ombuds) service
- Services were provided in accordance with WAC 182-538D-0262 (repealed January 2023)
- BH Ombuds services had to be independent of the BH ASO
- BH ASOs contracted out the BH Ombuds service
 - § Four regions were operated by non-profit organizations
 - § Three regions were operated by an out-of-state BH organization
 - § Three regions were operated under independent contract with the BH Ombuds Specialist

What is the Office of Behavioral Health Advocacy (OBHA)?

- The Office of Behavioral Health Advocacy (OBHA) is an independent body protecting the interests of Washingtonians engaged in behavioral health services
- The OBHA directly upholds the rights of individuals who are experiencing challenges in the public and private behavioral health systems in any of the ten regions established across Washington State
- Office of Behavioral Health Advocacy (OBHA) uses a trauma-informed approach to enhance behavioral health awareness, promote self-empowerment, and increase access to services. We assist individuals, families, and communities across WA State with behavioral health needs and concerns

What is the Office of Behavioral Health Advocacy (OBHA)?

- All Team members are Peers with lived behavioral health experience

§ OBHA envisions the WA State Behavioral Health Systems are connected by compassionate support of one another by eliminating barriers to access and services. All persons are honored with the same rights through advocacy, inclusion, and collaboration. All voices are heard, and all concerns are addressed according to federal and state laws.

OBHA Responsibilities

- Provides oversight of the services and operations of the Behavioral Health Advocate (formerly Behavioral Health Ombuds)
- Educates the community and service providers about the services of Behavioral Health Advocates (BHA)
- Ensures there are BHA services in each of the ten managed care regions and accessible to anyone receiving or seeking behavioral health service regardless of funding
- Provides recommendations to local, regional, and statewide community and governmental entities to bring about changes in laws, rules, regulations, policies, and procedures that will improve the quality of behavioral health services for Washington's residents.

OBHA Responsibilities

- Centralize website and toll-free phone number (no wrong door)
- Statewide uniform reporting system
 - § Analyze data relating to complaints and conditions provided by behavioral health providers and facilities
 - § Monitor, develop, and recommend improvements in the implementation of Federal, State, and local laws, rules, regulations, and policies.
- § Establish a statewide advisory council: Meets the last Monday of every month from 10:00 AM to 1:00 PM
- Oversee the services BHAs in all 10 regions
- Certification training for BHAs

OBHA Responsibilities cont.

- Development and delivery of education programs and information on topics on but not limited to: (some virtual and some in person)
 - § Mental Health Advanced Directives (MHAD)
 - § Wellness Recovery Action Plans (WRAP)
 - § Crisis services and contacts
 - § Peer services and supports
 - § Family advocacy and rights
 - § Family-initiated treatment and other behavioral health service options for minors
 - § Involuntary treatment
 - § Telling your story to the legislature

OBHA

§ Will refer and track grievances that fall out of the BH Advocates jurisdiction (Note: all services are still self directed)

§ Department of Health

§ Department of Corrections Ombuds

§ DDA Ombuds

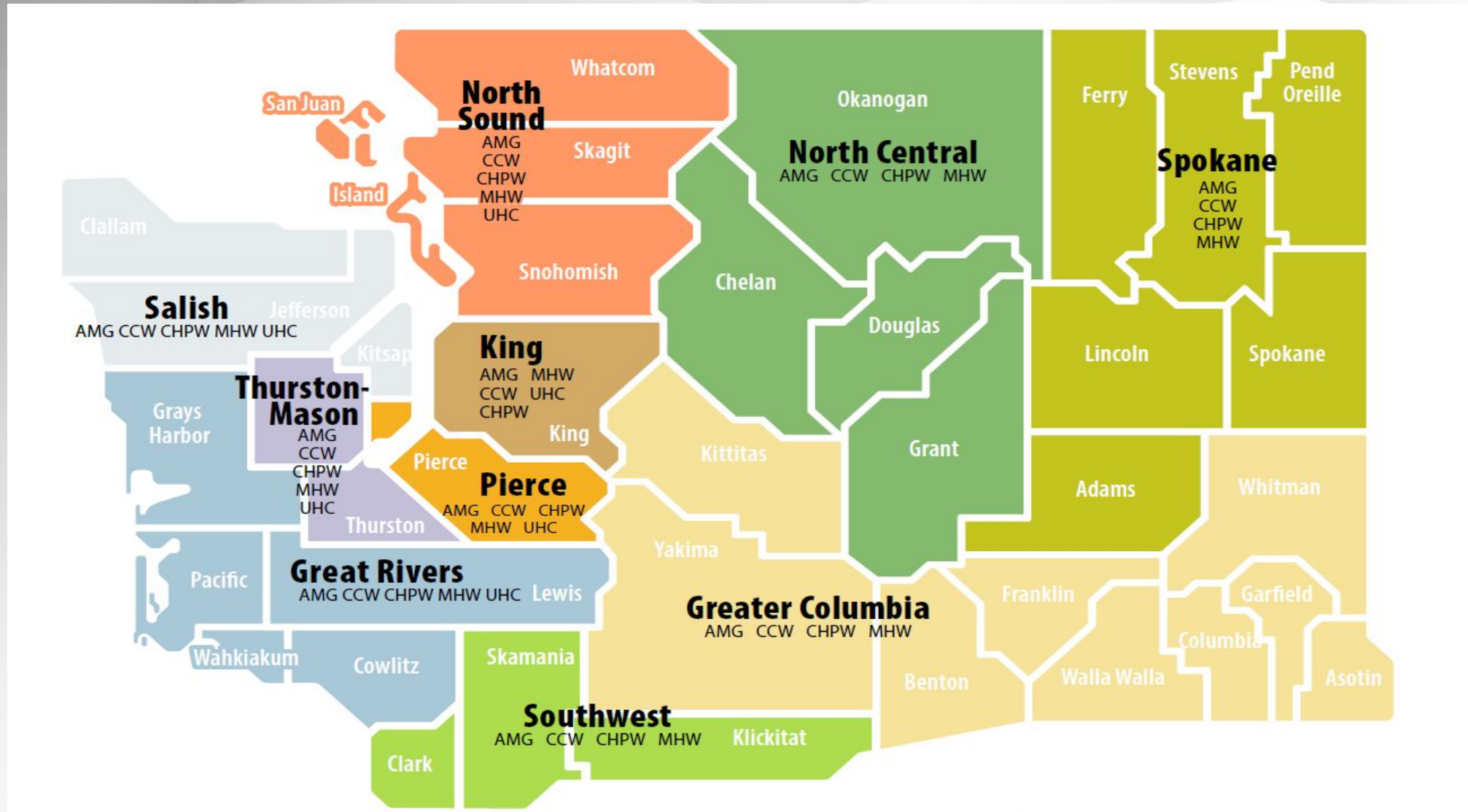
§ LTC Ombuds

§ Office of the Family and Children's Ombuds

§ State Hospitals (Western State, Eastern State, and Child Study)

§ Community Hospitals

Service Locations



What is a Behavioral Health Advocate (BHA)?

- Formerly known as Behavioral Health Ombuds.
- Peer Washington employee with lived experience within the behavioral health system.
- Will assist individuals and their supports with concerns they may have with:
 - § services they are receiving
 - § services previously received or are seeking services from a behavioral health service provider
 - § barriers to accessing behavioral health care

Behavioral Health Advocates (BHA)

- Promotes self-advocacy, empowering individual voice, and assists with developing not only confidence in their own voice but a sense of empowerment through promoting ownership of their individual recovery plan and goals.
- Supports individuals with the information, tools, and resources they need to advocate on their own behalf, or when requested by the individual, to step in to mediate or advocate on an individual's behalf with a service provider.
- Work collaboratively with the individual receiving services, their supports, providers, and funders of the behavioral health services with resolving complaints, grievances, appeals, and administrative hearings

BHA Services

- § Services are provided to adults, youth, and families with minors
- § Investigates and resolves behavioral health concerns at the lowest level possible
- § Supports individuals receiving behavioral health services
 - § Complaint (Agency Level)
 - § Grievance (Formal process at the funder level)
 - § Appeal
 - § Administrative Hearing process
 - § Will include family members and their supports at the request of the individual receiving behavioral health services
- § Provide information and resources
- § Assist with completing Mental Health Advanced Directives
- § Educates individuals, advocates, and providers and the community about the behavioral health advocacy process and services

BHA- Categories of Complaints and Grievances

- § Access
- § Dignity and respect
- § Quality/Appropriateness
- § Patient rights
- § Phone calls not returned
- § Service intensity, not available or coordination of services
- § Participation in treatment/consumer voice
- § Physicians, ARNPs, and medications
- § Financial and administrative services
- § Residential
- § Housing
- § Emergency services
- § Violation of confidentiality
- § Other rights (interpreters, cultural differences, MHAD)

BHA Responsibilities

§ Stays accessible
to individuals,
families and other
interested parties

BHAs do not:



- Provide behavioral health therapy or case management
- Disclose information without written consent
- Ensure any specific outcome
- Give legal advice
- Enforce a recommendation

Who is Eligible?

- Any person applying for, eligible for, or receiving behavioral health services
- Family member and their supports
- All services are FREE of charge and CONFIDENTIAL

*Eligibility
Criteria*



Quality Review Team (QRT).

In the future we will develop a QRT team in each region

- § Individuals with lived experience

- § Survey individuals at BH agencies regarding their experience with BH services and gather any recommendations that are reported

- § Volunteers



Region	Email	Counties	Phone numbers
Great Rivers	Greatrivers@OBHAdvocacy.org	Cowlitz, Grays Harbor County, Lewis, Pacific, Wahkiakum	360.561.2257
Greater Columbia	GreaterColumbia@OBHAdvocacy.org	Asotin, Benton, Columbia, Garfield, Franklin, Kittitas, Walla Walla, Whitman, Yakima	509.808.9790
King County	KingCounty@OBHAdvocacy.org	King County	206.265.1399
North Central	Northcentral@OBHAdvocacy.org	Chelan, Douglas, Grant, Okanogan	509.389.4485
North Sound	Northsound@OBHAdvocacy.org	San Juan, Skagit, Snohomish, Whatcom, Island	360.528.1799
OBHA	Info@OBHAdvocacy.org	Washington State Administration Office	360.292.5038
Pierce County	Piercecounty@OBHAdvocacy.org	Pierce County	253.304.7355
Salish	Salish@OBHAdvocacy.org	Clallam, Kitsap, Jefferson	360.481.6561
Southwest	Southwestern@OBHAdvocacy.org	Clark, Klickitat, Skamania	509.434.4951
Spokane	SpokaneRegion@OBHAdvocacy.org	Ferry, Stevens, Pend Oreille, Lincoln, Spokane, Adams	509.655.2839
Thurston	Thurstonmason@OBHAdvocacy.org	Thurston, Mason	360.489.7505



Contact Information

Michelle Tinkler, OBHA Director	Justin Blackwell, Program Director West	Gail Kogle, Program Director East
(360) 763-1225	(360) 561-2257	(509) 655-2839
michelle@OBHAdvocacy.org	justinb@OBHAdvocacy.org	gail@OBHAdvocacy.org
<p>203 4th Avenue East, Ste 207 Olympia, WA 98501 Website: OBHAdvocacy.org Email: Info@OBHAdvocacy.org Phone: (360) 292-5038 Toll-Free: (800) 366-3103 Fax: (206) 785-1393</p>		

Questions?



Thank
you!!

For Approval:**Skagit County Recovery Café**

- Skagit County Recovery Café has requested one time funding to offer an additional recovery circle and food for the members.
 - The annual amount is - \$24,000.00

Motion

North Sound BH-ASO-Skagit Recovery Café-PSC-24 for the purpose of providing funds to support the center's operations.

Compass Health

- Compass Health submitted an updated budget for crisis services in June. After a thorough evaluation and negotiation, we approved an increase to their crisis budget. The annual increase is due to staff wage increases, additional FTEs and costs associated with the increases.
 - The total annual increase is \$1,938,950.00. Compass Health provides 24/7 mobile crisis outreach in Island, San Juan, Skagit and Whatcom counties.

Motion#

North Sound BH-ASO-Compass Health-ICCN-23 Amendment 6 for the purpose of adding an ongoing increase to the crisis service budget. The contract term is January 1, 2023, through December 31, 2025, with an automatic one-year renewal on January 1, 2026, based on continued compliance with the terms of the contract

For Introduction:

- Health Care Authority (HCA) contracts to include funding for the period of July 1, 2024, through December 31, 2024.
- Downstream contracts for General Fund-State (GF-S) Mandatory Services (Crisis Outreach, Involuntary Treatment Act (ITA) Services, ITA inpatient, Secure Withdrawal Management and Proviso Funding)
- Downstream contracts for GF-S services within Available Resources (Mental Health & Substance Use Disorder Outpatient, Triage Services)

The downstream contracts follow the HCA contract. The funding for the downstream contracts is included in the same amendment, which is why you will see the same numbered amendment under different categories of funding

Health Care Authority (HCA)

HCA-NS BH-ASO-K-6897-03 is providing the GF-S funding for the period of January 1, 2025, through June 30, 2025.

- GF-S funding is stable from the previous contract period.
 - 6-month allocation is \$

Motion #25-

HCA-NS BH-ASO-K- providing the ASO GF-S funding and legislative proviso funds for the period of January 1, 2025 through June 30, 2025.

GF-S Mandatory Services

The following contracts provide mandatory behavioral health services. Funding for GF-S services is allocated every six (6) months.

- Compass Health
 - Mobile Crisis Adult & Youth Outreach Teams, ITA services, Child Youth and Family Crisis Outreach Team, Evaluation and Treatment Services and other provisos listed below.
 - Program for Assertive Community Treatment (PACT) services and continuing the reserve funds for flexible spending for PACT participants, staff training and short-term housing needs. These funds will be renewed until the reserve is depleted.
 - Crisis Services – 6-month allocation - \$
 - Community Outreach & Recovery Support (CORS) – 6-month allocation \$
 - PACT 6-month allocation - \$
 - PACT Proviso Reserve Funds 6-month allocation - \$
 - Behavioral Health Enhancement Funds 6-month allocation - \$
 - San Juan County HARPS Funds 6-month allocation - \$
 - Evaluation & Treatment Discharge Planner 6-month allocation - \$
- Conquer
 - Assisted Outpatient Treatment (AOT) in Snohomish County
 - 6-month allocation - \$
- Snohomish County
 - Mobile Crisis Outreach, ITA services
 - Proviso Funding-Jail Transition Services, Designated Cannabis Account, Trueblood Funds
 - Crisis Funds 6-month allocation - \$
 - Proviso Funds 6-month allocation \$
- Volunteers of America
 - Toll Free Crisis Hotline
 - Behavioral Health Enhancement Funds
 - Toll Free Crisis Line 6-month allocation - \$
 - Crisis Follow-up Services 6-month allocation - \$
 - Behavioral Health Enhancement Funds 6-month allocation \$
- Telecare
 - Evaluation and Treatment Services (Fee for Service)
 - E&T Discharge Planners
 - Behavioral Health Enhancement Funds
 - E&T Discharge Planner 6-month allocation - \$
 - Behavioral Health Enhancement Funds 6-month allocation \$
- Lifeline Connections
 - PACT services and continuing the reserve funds for flexible spending for PACT participants, staff training and short-term housing needs. These funds will be renewed until the reserve is depleted.

- PACT 6 -month allocation - \$
 - PACT Proviso Reserve Funds 6-month allocation - \$
- Lake Whatcom Center
 - PACT continuing the reserve funds in the amount of \$73,206.00 for flexible spending for PACT participants, staff training and short-term housing needs. These funds will be renewed until the reserve is depleted.
 - PACT 6-month allocation-\$
 - PACT Proviso Reserve Funds 6 – month allocation \$
- Evergreen Recovery Center
 - Behavioral Health Enhancement Funds
 - 6-month allocation - \$
 - 6-month allocation - \$
- Pioneer Human Services
 - Behavioral Health Enhancement Funds (Proviso Funds)
 - 6-month allocation \$
- Snohomish County Superior Court
 - Juvenile Treatment Services
 - 6-month allocation - \$
- Island County
 - Proviso Funding-Jail Transition Services, Designated Cannabis Account, Trueblood Funds
 - HARPS Housing Assistance
 - Proviso Funds 6-month allocation - \$
 - HARPS 6-month allocation - \$
- San Juan County
 - Proviso Funding-, Designated Cannabis Account
 - 6-month allocation - \$
- Skagit County
 - Proviso Funding – Jail Transition Services, Designated Cannabis Account, Trueblood Funds
 - 6-month allocation - \$
- Whatcom County
 - Proviso Funding – Jail Transition Services, Designated Cannabis Account, Trueblood Funds
 - 6-month allocation - \$

Motion #24-28

NS BH-ASO-Compass Health-ICCN-23 Amendment 7 to provide funding to continue services under this contract. The contract term is January 1, 2023, through December 31, 2025, with an automatic one-year renewal on January 1, 2026, based on continued compliance with the terms of the contract.

North Sound BH-ASO-Conquer Addiction-ICN-23 Amendment 2 to provide the funding to continue AOT services in Snohomish County. The contract term is August 1, 2023, through July 31, 2025, with an automatic one-year renewal on August 1, 2025, based on continued compliance with the terms of the contract.

NS BH-ASO-Snohomish County-ICCN-23 Amendment 6 to provide the funding to continue services under this contract. The contract term is January 1, 2023, through December 31, 2025, with an automatic one-year renewal on January 1, 2026, based on continued compliance with the terms of the contract.

NS BH-ASO-VOA-ICCN-23 Amendment 5 to provide the funding to continue services under this contract. The contract term is January 1, 2023, through December 31, 2025, with an automatic one-year renewal on January 1, 2026, based on continued compliance with the terms of the contract.

NS BH-ASO-Telecare-ICCN-23 Amendment 4 to provide the funding to continue services under this contract. The contract term is January 1, 2023, through December 31, 2025, with an automatic one-year renewal on January 1, 2026, based on continued compliance with the terms of the contract.

NS BH-ASO-Lifeline Connections-ICN-23 Amendment 5 to provide the funding to continue services under this contract. The contract term is January 1, 2023, through December 31, 2025, with an automatic one-year renewal on January 1, 2026, based on continued compliance with the terms of the contract.

NS BH-ASO-LWC-ICN-23 Amendment 4 to provide the funding to continue services under this contract. The contract term is January 1, 2023, through December 31, 2025, with an automatic one-year renewal on January 1, 2026, based on continued compliance with the terms of the contract.

NS BH-ASO-ERC-ICN-23 Amendment 5 to provide the funding to continue services under this contract. The contract term is January 1, 2023, through December 31, 2025, with an automatic one-year renewal on January 1, 2026, based on continued compliance with the terms of the contract.

NS BH-ASO-PHS-ICN-23 Amendment 4 to provide the funding to continue services under this contract. The contract term is January 1, 2023, through December 31, 2025, with an automatic one-year renewal on January 1, 2026, based on continued compliance with the terms of the contract.

NS BH-ASO-Snohomish County Superior Court-ICN-23 Amendment 5 to provide the funding to continue services under this contract. The contract term is January 1, 2023, through December 31, 2025, with an automatic one-year renewal on January 1, 2026, based on continued compliance with the terms of the contract.

NS BH-ASO-Island County-ICN-23 Amendment 6 to provide the funding to continue services under this contract. The contract term is January 1, 2023, through December 31, 2025, with an automatic one-year renewal on January 1, 2026, based on continued compliance with the terms of the contract.

NS BH-ASO-San Juan County-ICN-23 Amendment 4 to provide the funding to continue services under this contract. The contract term is January 1, 2023, through December 31, 2025, with an automatic one-year renewal on January 1, 2026, based on continued compliance with the terms of the contract.

NS BH-ASO-Skagit County-Interlocal-23 Amendment 6 to provide the funding to continue services under this contract. The contract term is January 1, 2023, through December 31, 2025, with an automatic one-year renewal on January 1, 2026, based on continued compliance with the terms of the contract.

NS BH-ASO-Whatcom County-ICN-23 Amendment 5 to provide the funding to continue services under this contract. The contract term is January 1, 2023, through December 30, 2025, with an automatic one-year renewal on January 1, 2026, based on continued compliance with the terms of the contract.

GF-S services within Available Resources

- Compass Health
 - SUD outpatient services in San Juan County (FFS)
 - Whatcom County Triage
 - 6-month allocation - \$
- Pioneer Human Services
 - Island, Skagit & Whatcom Withdrawal Management Services
 - 6-month allocation - \$
 - Behavioral Health Enhancement Funds (Proviso Funds)
 - 6-month allocation \$

Motion #25-

NS BH-ASO-Compass Health-ICCN-23 Amendment 7 to provide funding to continue services under this contract. The contract term is January 1, 2023, through December 31, 2025, with an automatic one-year renewal on January 1, 2026, based on continued compliance with the terms of the contract.

NS BH-ASO-PHS-ICN-23 Amendment 4 to provide the funding to continue services under this contract. The contract term is January 1, 2023, through December 31, 2025, with an automatic one-year renewal on January 1, 2026, based on continued compliance with the terms of the contract.

Weekly Crisis Metrics Report:

See attached.

Jail Modernization Task Force

The first meeting of the Jail Modernization Task Force occurred on 10/29. This meeting included a lot of generalized discussions about the system. The goal is to have a few achievable, fundable recommendations by mid-next year with a recommendation for more time to dig deeper in to any topics we are not able to cover in the allotted one year timeline.

Assessing Crisis System and any gaps

We are in the process of identifying gaps and issues in the Crisis System (DCRs and MRRCT).

- Snohomish: Meeting with Human Services team and the Snohomish County Sheriff to identify if there's a way to develop a program that expands Mobile Community Crisis Response Team(s) through a partnership with the Sheriff's office.
- Skagit: Engaging in conversations via the North Star Task Force on Behavioral Health Crisis and Co-Response.
- Whatcom: In addition to conversations we are having the with the county staff, we are also engaging in a listening tour with system stakeholders (providers, law enforcement, hospital staff, etc.) across the county November 18-22.
- Island: We have started meetings with Island County to discuss issues/gaps in the system.
- San Juan: We are working with law enforcement and county representatives to identify if a co-responder program could assist in meeting the crisis needs in San Juan County.

Hiring one position for Youth Navigator Program (Kids Mental Health):

North Sound ASO is currently hiring for one new position and recruiting for two existing positions:

- Youth Navigator Coordinator: This is the second position we are hiring for the Youth Navigator Program
- Medical Director
- Accountant

November 15th: HCA virtual presentation of RDA measures

North Sound BH-ASO has asked HCA to do a presentation of the RDA measures to all interested parties in our region. We are inviting County Coordinators, BOD's members, Advisory Board

members, and providers to this one hour virtual presentation. The RDA measures include reports on how our region are doing in comparison to the rest of the state on measurements like Substance Use Disorder Treatment rate, Psychiatric Inpatient 30-Day Readmission, Follow-up after Emergency Department Visit for Mental Illness and several others. It can be informative to understand how we are performing now, and where we may want to focus efforts in the next year. Please forward to any staff or partners you think would be interested.

North Sound BH-ASO 2025 Budget:

The North Sound BH-ASO 2025 Budget has been posted online and will be presented to the Board of Directors at the November meeting.