



**Mental Illness and Drug Dependency (MIDD)
Oversight Committee
August 25, 2016
11:45 a.m.-12:15 p.m. networking lunch
12:15 p.m. – 2:00 p.m.
King County Chinook Building Rooms 121 & 123
Meeting Notes**

Members: Alex O'Reilly (designee for Lynne Robinson), Ann McGettigan, Barbara Miner, Brenda Fincher (designee for Dave Asher – by phone), Brigitte Folz (designee for Darcy Jaffe), Chelene Whiteaker (by phone), Dan Satterberg, Jeanette Blankenship, Jeanne Kohl-Welles, Jennifer DeYoung (designee for Patty Hayes), Jim Pugel (designee for John Urquhart) Johanna Bender (Co-Chair), Karyn Poblocki (designee for Mark Putnam), Lea Ennis, Mario Paredes (designee for Norman Johnson), Mary Ellen Stone, Mike Heinisch, Nancy Dow, Terry Mark (designee for Adrienne Quinn), William Hayes.

Other Attendees: A.J. McClure, Dan Story, Doug Crandall, Ellie Wilson-Jones, Elly Slakie, Emmy McConnell, Gail Stone, Graydon Andrus, Joe Cunningham, Kapena Pflum, Kelli Carroll, Kelly Rider, Kimberly Cisson, Kira Zylstra, Lauren Vlas, Laurie Sylla, Linda Morales, Lisa Kimmerly, Mary Taylor, Rachelle Wright, Ross Marzolf, Steve Andryszewski, Terra Rose, Titus Chembukha.

1. Welcome and Introductions, Co-Chair Bender

Members and guests introduced themselves by name and organization. Co-Chair Bender welcomed all attendees to the meeting. She asked those who had come to the meeting today to give public comment to sign in on the pink sheet at the back of the room. Public comment is limited to two minutes per person or three minutes per organization.

Co-Chair Bender announced that MIDD 2 was unanimously renewed by King County Council. Enormous praise was given to Ms. Carroll by the Council for this renewal process.

2. Review and Approve Meeting Minutes

No revisions were requested and consensus approval of the minutes for May 26 and June 23, 2016 was given.

3. Financial Update, Steve Andryszewski, Chief Financial Officer, Department of Community and Human Services (DCHS)

Mr. Andryszewski referenced the 2015/2016 MIDD Financial Plan handout. The '2015/2016 Estimated' column indicates where the budget is expected to finish for 2015/2016. This column reflects changes to the revenue – a \$1.5 million increase in the projected tax revenue – and the expenditures include some planned expenditures.

The Office of Performance, Strategy, and Budget has proposed to change the reserve requirements of the MIDD fund beginning January 1, 2017. The current reserve policy is 5.25 percent reserve of revenues; the proposed reserve requirements would be a 60-day expenditure reserve. That changes the reserve from \$6.3 million reserve in 2015 to an \$11.2 million reserve in 2017, the difference being reflected in the expenditure column of the MIDD

Financial Plan. The County wants to protect the MIDD fund going forward. The 2009 recession had major impacts on MIDD and service levels in the MIDD. The Office of Performance, Strategy, and Budget is attempting to mitigate service impacts and foresee any recessions in the next few years. The reason this expenditure is placed in 2015/2016 is these are one-time dollars and the reserve is one-time use (not for ongoing services).

The '2017/2018 Projected' and '2019/2020 Projected' columns reflect the Service Improvement Plan (SIP) presented to council. The expenditures for 2017/2018 include those detailed in the SIP and the expenditures for 2019/2020 include a standard inflation rate that is dictated by the Office of Performance, Strategy, and Budget. The reserve section is updated to reflect the 60-day reserve.

The 2015/2016 revenue projections increase the revenue by \$1.5 million; the 2017/2018 revenue projections increase the revenue by \$4.3 million. Ms. Blankenship commented the fact there is a revenue increase despite the increase in reserves is amazing and commended the change to a 60-day reserve.

4. Executive Decisions Update, Dwight Dively, King County Budget Director

Co-Chair Bender segued into a conversation about the transmission of the SIP. It was transmitted by the King County Executive to the Council today. The budget office made a few changes and those changes are what Mr. Dively is here to discuss today. See handout 'Summary of MIDD 2 SIP Changes,' which highlights the changes made in the version sent to Council.

Mr. Dively noted, as Mr. Andryszewski previously informed the committee, the revenue forecast went up and sales tax revenue is strong. There were previous assumptions on how much of existing services could be funded by Medicaid, which were overly optimistic; those were backed down. Some program costs were reconciled to be more accurate. Staged implementation of some of the initiatives were then analyzed. Several of the larger initiatives that cannot be deployed January 1, 2017; those figures were adjusted by \$3 million dollars for the biennium. That led to a remainder of MIDD 2 funds, which is indicated on the handout under 'Executive Decisions' and are subject to Council approval:

- Added \$200,000 to adding a second location for the Recovery Café;
- \$1 million increase in housing capital and rental;
- Funds for the FIRS Respite Center were added (\$750,000) with an expectation the City of Seattle would help fund the balance;
- Addition of \$900,000 for jail-based substance use disorder (SUD) treatment at the Maleng Regional Justice Center (MRJC) in Kent to increase access to treatment in jail and establish links to services upon release;
- \$1.4 million is reserved for the development of a young adult crisis facility;
- Added \$100,000 for planning of community courts for mental health/SUD ; and
- Addition of \$192,000 for a Deputy Prosecutor to manage and work with the Familiar Faces population.

Executive decisions total \$4.5 million in changes from the SIP submitted.

Questions and Discussion:

- It was confirmed that the staged implementation reductions would be returned for 2019/2020.

- The majority of the changes listed in Executive Decisions are one-time-use or adjustable use.
- Ms. Carroll confirmed the \$1.1 million of reduced Medicaid assumptions means more MIDD funds would go to those programs.
- Co-Chair Bender inquired where the funds for the Executive Decisions come from. Mr. Dively responded the majority of the funds come from the increased revenue forecast and the staged implementation programs that won't be live January 1, 2017.
- Mr. Heinisch reviewed the items under 'MIDD SIP Policy Revisions;' the rainy day reserve fund refers to the new 60-day expenditure reserve beginning 2017. He voiced appreciation for the priority use of fund balance for provider economic adjustments and the Emerging Issues initiative. Mr. Dively noted the policy intent of the provider economic adjustments percentage would match any adjustments made to the County human services programs budget on average.
- Ms. Dow noted the Consumers and Communities Subcommittee has been changed to a Consumers and Communities Ad Hoc Work Group. Ms. Carroll explained this is as a result of a conversation with the Prosecutor's Office; a subcommittee is technically made up of members from an existing committee. The Consumers and Communities group is not part of the MIDD Oversight Committee, therefore it cannot be a subcommittee.
- Ms. Miner asked how the Transition Recovery Program (TRP) fits in with the jail-based SUD treatment. Mr. Hayes answered that is yet to be determined; the goal is to create a transition from secure detention into a community program to continue treatment.
- Ms. McGettigan asked for clarification on the Executive Decisions that are one-time-only dollars. Mr. Dively explained: the Recovery Café needs to be sited and determined plausible; housing capital is entirely discretionary; the FIRS Respite Center is still a new initiative and can be evaluated in two years for usage and changes needed; SUD treatment in the jail is dependent on its success; the young adult crisis facility is a concept and how that happens and in what form is to be determined, and there may be alternative funding sources in the future; the court planning is one-time at this point; and Familiar Faces work is very dynamic and will also be evaluated in two years. Mr. Satterberg added the Familiar Faces work identified 1,400 people who have been booked four times in a 12-month rolling period, over three years. The idea is to evaluate individuals as during booking and try to figure out how they can keep from being "frequent fliers" through the jail system. It was determined a Deputy Prosecutor was important to assist in the legal help for individuals (pre-existing warrants, fees, minor criminal charges). This position will be devoted almost like a legal case manager to resolve old cases and warrants and ensure nothing in the legal system gets in the way of an individual's progress. If some of the familiar faces people can be stabilized, the volume of bookings overall can be reduced.
- Mr. Hayes confirmed the jail-based SUD treatment is still a concept. If there is no linkages to community treatment upon discharge, the individual will be back in custody in a matter of time. The hope is to have a program to support the transition from jail to the community where they can continue to work through their SUD issues. DCHS will be handling the contract for this.
- Ms. Folz voiced concern on the jail-based SUD treatment. She sat on the briefing paper review panel for the concept and there were many diverging points of view regarding it. She wanted to be sure the panels thoughts on the concept were heard by the Executive. Mr. Dively confirmed all the staff that worked on the concept were familiar with the evaluation work. Ms. Carroll commented that all of the notes from the briefing paper panels were gone over extensively with Mr. Dively's staff. She can confirm the materials prepared by the staff were absolutely reflective of the panels, but also incredibly objective. Ms. Folz

voiced her appreciation of the whole process.

- Mr. Heinisch noted several of the Executive Decisions are conceptual or tentative and asked why those items are not also staged. Mr. Dively confirmed they are staged; amounts have been adjusted down from the original suggestion.
- Mr. Paredes added when the process for the jail-based SUD treatment is established, programs that are culturally competent and linguistically appropriate need to be looked at to meet the capacity, as a majority of people in jail are people of color.

5. MIDD Semi-annual Progress Report – review and approve, Lisa Kimmerly, MIDD Evaluator, Behavioral Health and Recovery Division

Ms. Kimmerly stated this is the third year using this particular template, which is condensed and hopefully offers more readability (see handout for MIDD Year Eight Progress Report). Within this report is a renewal activities summary, performance projections, updates for the strategies with activity in the six months covered by the report, demographics, and service access interests.

There was opportunity to perform a qualitative analysis on open-ended data regarding youth SUD treatment. The key take away from that analysis was there are two motivators associated with reduction in youth substance use: employment and earning income. There was also large sample analysis performed on depression and anxiety for older adults, which showed both statistically and clinically significant reductions for those individuals.

This is the first report where the fiscal information is based on the biennial budget; in the past it's always been just annual. There is an overview included of the MIDD Oversight Committee meetings and actions as well as an updated publication of the evaluation matrices.

There have been some substantial changes to the report since the version included in the meeting packet was made:

- Changed the highlights featured on page 5;
- Updated the description of the Blue Courage training on page 11; and
- Added explanation on page 13 for the smaller denominators of some items.

Ms. Kimmerly supplied additional information regarding strategies that are currently not on pace to meet performance targets. Strategy 1c – emergency room substance abuse early intervention programs (page 6) has a red arrow, indicating they are at less than 65 percent of their annual target. This has been a dilemma throughout MIDD 1, where providers are choosing to provide services that take longer, prioritizing services that have potential to make more of a difference, which impacts their screening numbers.

For strategy 1d – mental health crisis next-day appointments (NDAs) and stabilization services, Ms. Kimmerly noted for some time the state had cut funding for NDAs and has recently re-instated that funding. There is some speculation on why this target is not being met, however, the contract monitors feel an underutilization of available NDAs slots. If an appointment is scheduled, 80 percent of individuals show up (i.e. not an issue of no-shows). Contract monitors will be doing more work around this strategy to try and get these numbers up.

Strategy 1f – Parent Partner and youth peer support assistance program sees both individuals and groups. All the group work is seeing great attendance, but unfortunately they are not meeting targets for one-on-one interactions. It is consistent with what they've done in the

past, but are not achieving the target that was set for them by the County. This may be due in part to late implementation and had a huge design change from the original number. We may be asking them to achieve a target that is not feasible. The group numbers certainly show the effort in their outreach.

Mr. Heinisch noted he has part of the group activities and they are always well-attended; however in the description of strategy 1f is missing. Ms. Kimmerly said the detail on the strategies beginning on page 7 only includes strategies that have had an update or change during the report time-period.

Strategy 8a – Family Treatment Court expansion is at 80 percent of their annual target, but it is believed they will meet the target. In 2014, the annual served lid was 90 children, and in 2015 the lid was raised to 120, but no changes were made to program. The family number seen is the same, but they are seeing families with fewer children.

The criminal diversion strategies are featured on page 10. There are fewer judges sentencing people to the Community Center for Alternative Programs (CCAP), therefore fewer people going to the education classes. For strategy 12d – behavior modification classes for CCAP clients, the person providing the MIDD-funded service was transitioned to serve only those with domestic violence issues. This is part of a research project and people are randomly assigned; so there is no control over how many people get assigned.

Co-Chair Bender asked for any questions or proposed revisions to the report. Mr. Heinisch asked if there is information on previous reports of any future activities (i.e. October of this year). Ms. Kimmerly noted there is a “next steps” section, but the reports are focused on the time period covered. Ms. Carroll confirmed the report is only discussing October through March, nothing after. Consensus approval for the report was reached.

6. MIDD Strategy Revision – Crisis Diversion (10b)

Co-Chair Bender stated the committee needs to address a revision to strategy 10b (two handouts in meeting packet). Ms. Carroll reviewed the modification process developed in 2009 and noted that, included in the SIP, clarification was added to identify triggers of three thresholds that would bring revisions to the Oversight Committee for review. Those thresholds are 1) a proposed change of funding of 15 percent or more, 2) a proposed elimination of a strategy, or 3) changes to provider resources, processes, funding methodology, full-time equivalent (FTE), request for proposal (RFP), or contract processes.

Susan Schoeld and Ms. Carroll drafted a revision summary for the strategy, which revises the requirement for chemical dependency professionals (CDPs) and chemical dependency professional trainees (CDPTs) certification/licensure for the Mobile Crisis Team (MCT) to a preferred qualification.

Mr. Andrus felt the requirement was a good idea initially, but challenges were expected as there are strict rules around licensing. Everyone hired for that position was required to at least be enrolled in CDPT classes. Over time, there has been more difficulty recruiting for the position due to workforce challenges, and that was the original reason for requesting the revision. There was an audit recently by the state Division of Behavioral Health and Recovery (DBHR) which determined the program wasn't able to fully comply with the licensing requirements, so this added to the decision to request this revision.

Ms. Folz asked if the licensed mental health professionals are Masters level clinicians; Mr. Andrus confirmed nearly all of the MCT are Masters level or working towards it. Mr. Heinisch expressed his respect for Mr. Andrus and the work he and the MCT does, however, this is a problem that nearly all providers are experiencing. Ms. Carroll commented the Behavioral Health and Recovery Division's medical director, Dr. Maria Yang, has been discussing for over a year the licensure challenges that exist at the state level and how to make progress towards revisions to those requirements. These challenges contribute to the constant staff turnover.

Mr. Paredes commented he is in support of the idea of dually-trained staff versus dually-licensed for the MCT, as long as core classes are covered. Mr. Andrus voiced a small concern on the withdrawal of the CDPT certification requirement, if a core group of classes are expected to be taken, those would not be paid for under the CDPT education County fund. Ms. Carroll did take note of the potential application of this revision to other initiatives or organizations and will be keeping an eye on the implementation of this. Ms. McGettigan strongly supports this change to the MCT program. Mr. Paredes noted it will reduce the administration work required with CDPTs, due to all work needing to be signed by a CDP.

7. Public Comment

None

8. Updates

Ms. Dow announced the Behavioral Health Advisory Board (BHAB) has chosen Lauren Davis as representative of the BHAB for the MIDD Oversight Committee, subject to Council approval. Ms. Carroll announced there will be no September meeting, and the special October 14 meeting is also canceled. The combined November/December meeting is December 8. The Steering Committee will be convened in mid-October/early-November. If OC members are interested in serving on the Steering Committee, email Ms. Carroll or the Co-Chairs.

The meeting was adjourned at 1:20 p.m.

Next Meeting: Thursday, October 27, 2016
King County Chinook Building, Rooms 121 & 123
401 5th Avenue, Seattle, WA 98104
11:45 a.m.-12:15 p.m. ~ Networking Lunch
12:15 p.m.-2 p.m. ~ Meeting