



SALISH BEHAVIORAL HEALTH
ADMINISTRATIVE SERVICES ORGANIZATION
ADVISORY BOARD MEETING.

Providing Behavioral Health Services in
Clallam, Jefferson and Kitsap Counties

DATE: Friday, January 5, 2024
TIME: 10:00 AM – 12:00 PM
LOCATION: Cedar Room, 7 Cedars Hotel
270756 Hwy 101, Sequim, WA 98382

LINK TO JOIN BY COMPUTER OR PHONE APP:

****Please use this link to download ZOOM to your computer or phone:**

<https://zoom.us/support/download>.**

Join Zoom Meeting: <https://us06web.zoom.us/j/82883131701>

Meeting ID: 828 8313 1701

USE PHONE NUMBER and MEETING ID TO JOIN BY PHONE:

Dial by your location: 1-253-215-8782

Meeting ID: 828 8313 1701

A G E N D A

Salish Behavioral Health Administrative Services Organization – Advisory Board

1. Call To Order
2. Announcements/Introductions
3. Opportunity to Address the Board on Agenda Topics (limited to 3 minutes each)
4. Approval of Agenda
5. Approval of SBH-ASO Advisory Board Meeting Minutes for December 1, 2023 (Attachment 5)
6. Action Items
 - a. Approval of Federal Block Grant Plans (Attachment 6.a.1 and 6.a.2)
7. Informational Items
 - a. Washington State COD Conference Discussion – led by Helen Havens
 - b. Advisory Board Member Recruitment (Attachment 7.b.1, 7.b.2, 7.b.3, & 7.b.4)
 - c. Training Discussion for 2024
8. Opportunity for Public Comment (limited to 3 minutes each)
9. Adjournment

ACRONYMS

ACH	Accountable Community of Health
ASAM	Criteria used to determine substance use disorder treatment
BHAB	Behavioral Health Advisory Board
BH-ASO	Behavioral Health Administrative Services Organization
BHO	Behavioral Health Organization, replaced the Regional Support Network
CAP	Corrective Action Plan
CMS	Center for Medicaid & Medicare Services (federal)
COVID-19	Coronavirus Disease 2019
DBHR	Division of Behavioral Health & Recovery
DCFS	Division of Child & Family Services
DCR	Designated Crisis Responder
DDA	Developmental Disabilities Administration
DSHS	Department of Social and Health Services
E&T	Evaluation and Treatment Center (i.e., AUI, YIU)
EBP	Evidence Based Practice
EPSDT	Early and Periodic Screening, Diagnosis and Treatment
EQRO	External Quality Review Organization
FIMC	Full Integration of Medicaid Services
FYSPT	Family, Youth and System Partner Round Table
HARPS	Housing and Recovery through Peer Services
HCA	Health Care Authority
HCS	Home and Community Services
HIPAA	Health Insurance Portability & Accountability Act
HRSA	Health and Rehabilitation Services Administration
IMD	Institutes for the Mentally Diseased
IS	Information Services
ITA	Involuntary Treatment Act
MAT	Medical Assisted Treatment
MCO	Managed Care Organization
MHBG	Mental Health Block Grant
MOU	Memorandum of Understanding
OCH	Olympic Community of Health
OPT	Opiate Treatment Program
OST	Opiate Substitution Treatment
PACT	Program of Assertive Community Treatment
PATH	Programs to Aid in the Transition from Homelessness
PIHP	Prepaid Inpatient Health Plans
PIP	Performance Improvement Project
P&P	Policies and Procedures
QUIC	Quality Improvement Committee
RCW	Revised Code Washington
RFP, RFQ	Requests for Proposal, Requests for Qualifications
SABG	Substance Abuse Block Grant
SAPT	Substance Abuse Prevention Treatment
SBH-ASO	Salish Behavioral Health Administrative Services Organization
SUD	Substance Use Disorder
SYNC	Salish Youth Network Collaborative
UM	Utilization Management
VOA	Volunteers of America
WAC	Washington Administrative Code
WM	Withdrawal Management
WSH	Western State Hospital, Tacoma

[Full listing of definitions and acronyms](#)



Salish Behavioral Health
Administrative Services Organization

SALISH BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION ADVISORY BOARD MEETING

Providing Behavioral Health Services in
Clallam, Jefferson and Kitsap Counties

January 5, 2024

Action Items

A. APPROVAL OF FEDERAL BLOCK GRANT PLANS

Standard Block Grant

SBH-ASO is presenting updated Block Grant plans for January 1, 2024-June 30, 2024, and seeks the Board's approval of these plans. Both plans align with the calendar year 2024 budget which was approved by the Executive Board.

Mental Health Block Grant (MHBG)

MHBG plan provides funding for crisis stabilization, residential treatment, and outpatient treatment services. The plan also includes funding for supports including transportation, interpreter services, and training. The MHBG plan identifies an estimate of the number of people to be served in each category. SBH-ASO Administration allowance is also included. Allocations are in line with Advisory Board priorities. MHBG Co-Responder is a required category, and the allocation amount is pre-set by the Health Care Authority.

Substance Abuse Block Grant (SABG)

Funding is allocated for crisis services, which is categorized under "brief intervention" on this template. Brief intervention includes mobile crisis outreach services.

Funding has been allocated to support the distribution of naloxone across the region.

Interim services is a required category for all SABG Plans. This line item is limited as there has not historically been a need for interim services in the Salish region. Therapeutic Intervention Services for Children is also a required category and specifically intended for services to children in residential facilities serving Pregnant and Parenting Women (PPW).

Funding is also allocated to both sub-acute withdrawal management and Intensive Inpatient Residential Treatment which are line items under the "Out of Home Residential Services" category.

Under the "Recovery Supports" category, the following line items are allocated funding: Transportation for PPW, Transportation, and Childcare Services. Both Transportation for PPW and Childcare Services are required categories.

Under the "Other SABG activities" funding is allocated to for Interpreter Services and SBH-ASO Administrative allowance.

SABG Co-Responder is a required category, and the allocation amount is pre-set by the Health Care Authority.

Informational Items

A. WASHINGTON STATE COD CONFERENCE DISCUSSION

Helen Havens attended the Washington State Behavioral Health Conference. Helen will share information gathered with the full board.

B. ADVISORY BOARD MEMBER RECRUITMENT

Review of Advisory Board member recruitment materials and processes, including:

- Talking Points for Board Members
- Board Application Process
- Print Materials / Advertising
- Update from Board Members

C. TRAINING DISCUSSION FOR 2024

Discussion of training needs and suggestions for 2024.

**MINUTES OF THE
SALISH BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION
ADVISORY BOARD**

**Friday, December 1, 2023
10:00 a.m. - 12:00 p.m.
Hybrid Meeting
Cedar Room, 7 Cedars Hotel
270756 Hwy 101, Sequim, WA 98382**

CALL TO ORDER – Jon Stroup, SBH-ASO Behavioral Advisory Board Chair called the meeting to order at 10:02 a.m.

INTRODUCTIONS – Self introductions were conducted around the room.

ANNOUNCEMENTS – Jolene Kron provided SBH-ASO staffing updates. As of December 1, Stephanie Lewis is no longer the Administrator of the SBH-ASO. Effective November 27, 2023, Jolene Kron is the new Administrator. Amy Browning has shifted roles from Care Manager to Crisis Systems Supervisor.

OPPORTUNITY FOR PUBLIC TO ADDRESS THE BOARD ON AGENDA TOPICS – None.

APPROVAL of AGENDA –

MOTION: Stormy Howell moved to approve the agenda as submitted. Mary Beth Langenaur seconded the motion. Motion carried unanimously.

APPROVAL of MINUTES –

MOTION: Mary Beth Langenaur moved to approve the meeting minutes as submitted for the August 4, 2023 meeting. Diane Pfeifle seconded the motion. Motion carried unanimously.

ACTION ITEMS

➤ **ADVISORY BOARD MEMBER TERM EXTENSION**

Sandy Goodwick’s current term expires on December 31, 2023. Sandy has expressed interest in continuing her service. She would be eligible for a three (3) year extension of service (January 1, 2024 – December 31, 2026). Seeking board approval for the extension.

MOTION: Diane Pfeifle moved to approve an extension of Sandy Goodwick’s term from January 1, 2024 – December 31, 2026. Mary Beth Langenaur seconded the motion. Motion carried unanimously.

Gratitude shared for Sandy’s continued service on the Advisory Board.

INFORMATIONAL ITEMS

➤ **REVIEW OF 2024 BEHAVIORAL HEALTH ADVISORY BOARD MEETING SCHEDULE**

The Advisory Board is scheduled to meet on the following dates in 2024:

Friday, March 1

Friday, May 3

Friday, July 12

Friday, September 13

Friday, November 1

2024 Advisory Board meetings will continue to occur in a hybrid format (Zoom and 7 Cedars Hotel) from 10:00 am – 12:00 pm.

➤ **JANUARY 2024 TO JUNE 2024 BLOCK GRANT PLANS**

Block Grant Plans are reviewed and approved every 6 months due to contract changes. We are unable to provide the plans today due to pending budget information. We do not anticipate significant changes as the funding approved during the RFP process is reflected in these plans. We anticipate plans being completed by mid-December. The next Behavioral Health Advisory Board Meeting is scheduled in March. We have 2 options:

1. Call a meeting in January specifically to review and approve the plans
2. Review at the March meeting for approval

Question around whether any peer-run organizations have received federal block grant funding within the State of Washington, and if peer-run organizations within Clallam County have been presented with block grant funding opportunities. There are some peer-run organizations receiving block grant funding within Washington State. SBH-ASO expanded Block Grant RFP criteria to include peer-run organizations, however, Staff are not currently aware of any formal peer-run agencies providing services that would be eligible for Block Grant funding within the region.

Comment regarding the interest of peer-run organizations in procuring block grant funding. Staff will plan to directly outreach to peer organizations within the region to ensure they are aware of opportunities and support going forward.

Current plans relate to what has already been allocated based on the previous RFP process.

Board consensus to hold an additional Board meeting on January 5th to review block grant plans.

➤ **ANNUAL CODE OF ETHICS TRAINING AND DOCUMENT REVIEW**

The Behavioral Health Advisory Board is due for annual Code of Ethics training. Each BHAB member is asked to sign and return the agreement upon review of documents provided.

Brief review of Code of Ethics, noting confidentiality and conflicts of interest as being particularly relevant to Board activities.

➤ **WASHINGTON STATE COD CONFERENCE DISCUSSION**

Helen Havens attended the Washington State Behavioral Health Conference. Helen will share information gathered with the full board.

Discussion is deferred to the January 2024 meeting.

Reminder to Board Members of the opportunity to attend trainings or conferences of interest to help inform future Advisory Board work. Funds are available to cover lodging, meals, transportation, and registration fees. Board members who are interested in utilizing this benefit can reach out to Jolene.

➤ **REIMBURSEMENT PROCESS FOR BOARD MEMBERS**

The new form for reimbursement is available. This allows for easy submission of requests for mileage or other approved reimbursement. Receipts can be photographed on a cell phone or scanned and attached.

Staff provided a tutorial on using the form for meals, lodging, registration fees, and travel reimbursement. Overnight trips require an additional preapproval process.

Staff will verify status of W9 forms and the County process for receiving reimbursements by direct deposit.

➤ **BOARD MEMBER RECRUITMENT**

Opportunity to discuss ideas for recruitment of Board members.

Current Advisory Board Openings:

- 1 in Clallam County
- 2 in Jefferson County
- 1 in Kitsap County
- 1 Tribal Representative

Discussion around the importance of community representation and voice in the SBH-ASO decision making process, in particular representation of individuals with lived experience.

Recruitment ideas shared included additional resource fairs and community presentations in 2024, Board outreach to the Salish Recovery Coalition in January, newspaper advertisements, and Board members sharing about the Advisory Board through social media including Nextdoor. Staff will create a short write-up for Board members to distribute.

Discussion around SBH-ASO presentations in the community in 2024. Request to include the Office of Behavioral Health Advocacy to present on their services and how individuals can establish their own advance directives.

Of priority for 2024 is updating the SBH-ASO website to improve content and accessibility.

➤ **NALOXONE UPDATE**

Salish BHASO has 10 naloxone cabinets to distribute around the region. We are working to identify current resources and partnerships. To date, interest has been expressed by Quileute Tribe and Kitsap Transit.

SBH-ASO has been supporting naloxone distribution in the Salish region for the last five years.

Staff is seeking additional suggestions for locations to place naloxone cabinets in order to maximize resources and ensure equitable access across all three counties. Cabinets are intended to be placed in high-traffic areas.

Management of the cabinets will be negotiated with the partner organization. How each cabinet is serviced may vary based on the needs of that specific community.

Clallam County has placed several naloxone distribution boxes in the Community. Additional community partners have expressed interest in hosting boxes. Plan for Staff to connect with Clallam County HHS for further coordination. Staff has also connected with Kitsap Public Health to identify areas of high need that may benefit from a naloxone cabinet.

Board member location suggestions included the YMCA, warming centers, day centers, libraries, transit centers, and community/arts centers. Also recommended was additional public education around naloxone resources, including signage for host organizations and other community partners to use that indicate where to find distribution boxes in the community.

Community partners in need of naloxone can call the SBH-ASO Customer Service Line at 360-337-7050.

PUBLIC COMMENT

- None.

GOOD OF THE ORDER

- None.

ADJOURNMENT – Consensus for adjournment at 11:21pm

ATTENDANCE

BOARD MEMBERS	STAFF	GUESTS
<i>Present:</i>	Jolene Kron, SBH-ASO Administrator	Barb Jones, Jefferson County Public Health
John Stroup, Chair	Nicole Oberg, SBH-ASO Program Specialist	Kate Jasonowicz, CHPW
Sandy Goodwick	Doug Washburn, Director Human Services	Jenny Oppelt, Clallam Co. HHS
Stormy Howell		Thorn Sorensen
Mary Beth Langenaur		
Diane Pfiefler		
<i>Excused:</i>		
Helen Havens		

NOTE: These meeting notes are not verbatim.

BH ASO:	Salish BH-ASO
Counties:	Clallam, Jefferson and Kitsap
Current Date:	12.28.2023
Total MHBG Allocation:	\$329,354
Contact Person:	Jolene Kron
Phone Number:	360-337-4832
Email:	jkron@kitsap.org

**Section 1
Proposed Plan Narratives**

Needs Assessment	<p>Describe what strengths, needs, and gaps were identified through a need’s assessment of the geographic area of the region. To the extent available, include age, race/ethnicity, gender, and language barriers.</p> <p>Begin writing here : SBH-ASO gains insight into the regional strengths, needs and gaps through multiple mechanisms. This includes routine engagement with the SBH-ASO Provider Network, SBH-ASO Advisory Board, SBH-ASO Quality and Compliance Committee, each of the 3 Counties’ 1/10th of 1% Sales Tax Advisory Boards, and the Regional Office of Behavioral Health Advocacy (OBHA) for access to regional data on grievance data which reflects strengths, needs and gaps. Information is also gathered by engagement in community services groups including housing/homeless committees, local continuum of care meetings, and cross-system collaborations meetings. SBH-ASO also reviews community needs assessments as available.</p> <p>Gaps identified are access to services due to the rural and frontier geography within the region. Strengths identified are engagement of community and cross system partnerships. The SBH-ASO 2022 Community Needs Survey identified the following areas of unmet needs by survey respondents: Withdrawal management services, inpatient mental health services, childcare to support treatment, housing support and residential substance use disorder treatment. Note: The survey did not differentiate between income or insurance status.</p>
Cultural Competence *	<p>Provide a narrative summarizing how cultural competence overall, is incorporated within proposed projects. Identify what anticipated efforts will be taken to measure progress.</p> <p>Begin writing here : SBH-ASO integrates CLAS standards in all service provision. SBH-ASO values:</p> <ol style="list-style-type: none"> 1. We value individual and family strengths while striving to include their participation and voice in every aspect of care and development of policies and procedures. 2. We value and respect cultural and other diverse qualities of each individual. 3. We value services and education that promote recovery, resiliency, reintegration, and rehabilitation. 4. We work in partnership with allied community providers to provide continuity and quality care. 5. We treat all people with respect, compassion, and fairness. 6. We value the continuous improvement of services. 7. We value flexibility and creativity in meeting the needs of each individual. <p>The SBH-ASO will measure these projects through required FBG implementation and progress reports. The submitted monthly service reports to the SBH-ASO allow for monthly monitoring of project success, such as allocated funds being spent, and projected outcomes being met. SBH-ASO continues to engage with our Tribal partners through annual crisis planning with the Tribes in our region.</p>
Children’s Services	<p>Describe how integrated system of care will be provided for children with SED with multiple needs, including: social services, educational services, juvenile services, and substance use disorder services.</p> <p>Begin writing here : SBH-ASO provides support to children with SED through care coordination activities and facilitation of the CLIP committee. Enrollment in Medicaid is the first priority in facilitating access to services. SBH-ASO continues to partner with community entities including Children’s Administration, Juvenile Justice, Developmental Disabilities Administration, and community providers. SBH-ASO facilitates FYSVRT meetings and work to increase avenues for youth and family feedback.</p>
Public Comment/Local/ BH Advisory Board Involvement	<p>Describe how integrated system of care will be provided for children with SED with multiple needs, including: social services, educational services, juvenile services, and substance use disorder services.</p>

Begin writing here : SBH-ASO provides a forum for public comment at each Executive and Advisory Board meetings. SBH-ASO providers identify needs in part based on community surveys. The SBH-ASO Advisory Board uses community survey information to assist in identifying gaps and needs within the community and set priorities for future work. SBH-ASO staff engages with other regional behavioral health advisory boards and community organizations to encourage feedback and facilitate identification of community needs. Final feedback is incorporated into the plan development and the plan is approved by the SBH-ASO Advisory Board.

Outreach Services

Provide a description of how outreach services will target individuals who are homeless and how community-based services will be provided to individuals residing in rural areas.

Begin writing here : SBH-ASO staff engage with the housing continuum across the region. SBH-ASO facilitates the Housing and Recovery through Peer Supports (HARPS) Program across the region. HARPS funding is facilitated by Coordinated Entry as a means to engage our housing continuum to expand access to individuals within the community. HARPS subsidies are available in all areas of our region. These contractors provide outreach and facilitate access to the HARPS service team provides outreach in partnership with community stakeholders. SBH-ASO also provides oversight of the Peer Bridger and Recovery Navigator programs to provide outreach to individuals in the community and provide support toward recovery and stability.

Attachment 6.a.1

Section 2 Proposed Project Summaries and Expenditures				
Category/Subcategory	Provide a plan of action for each supported activity	Proposed #Children with SED	Proposed #Adults with SMI	Proposed Total Expenditure Amount
Engagement Services – Activities associated with providing evaluations, assessments, and outreach to assist persons diagnosed with SMI or SED, including their families, to engage in mental health services:				\$25,000.00
Assessment	<i>Begin writing here:</i>	0	0	Enter budget allocation for these proposed activities. \$0.00
Specialized Evaluations (Psychological and Neurological)	<i>Begin writing here:</i>	0	0	\$0.00
Service Planning (including crisis planning)	<i>Begin writing here:</i>	0	0	\$0.00
Educational Programs	<i>Begin writing here: Provide community based training on topics related to mental health including MH Frist Aid.</i>	5	10	\$25,000.00
Outreach	<i>Begin writing here:</i>	0	0	\$0.00
Brief Motivational Interviews	<i>Begin writing here:</i>	0	0	\$0.00
Facilitated Referrals	<i>Begin writing here:</i>	0	0	\$0.00
Warm Line: Please note that ALL costs that directly serve persons with SMI/SED and their families must be tracked.	<i>Begin writing here:</i>	0	0	\$0.00
<i>Outcomes and Performance Indicators:</i>				
Outpatient Services – Outpatient therapy services for persons diagnosed with SMI or SED, including services to help their families to appropriately support them.				\$60,000.00
Individual Evidenced-Based Therapies	<i>Begin writing here:</i>	1	15	Enter budget allocation for these proposed activities. \$40,000.00
Group Therapy	<i>Begin writing here:</i>	1	15	\$20,000.00

Family Therapy	<i>Begin writing here:</i>	0	0	\$0.00
Multi-Family Counseling Therapy	<i>Begin writing here:</i>	0	0	\$0.00
Consultation to Caregivers	<i>Begin writing here:</i>	0	0	\$0.00
<i>Outcomes and Performance Indicators:</i>				
Medication Services – Necessary healthcare medications, and related laboratory services, not covered by insurance or Medicaid for persons diagnosed with SMI or SED to increase their ability to remain stable in the community.				\$10,000.00
Medication Management	<i>Begin writing here:</i>	0	2	Enter budget allocation for these proposed activities. \$10,000.00
Pharmacotherapy	<i>Begin writing here:</i>	1	1	\$0.00
Laboratory Services	<i>Begin writing here:</i>	1	1	\$0.00
<i>Outcomes and Performance Indicators:</i>				
Community Support (Rehabilitative) – Community-based programs that enhance independent functioning for persons diagnosed with SMI or SED, including services to assist their families to care for them.				\$50,000.00
Parent/Caregiver Support	<i>Begin writing here:</i>	0	0	Enter budget allocation for these proposed activities. \$0.00
Skill Building (social, daily living, cognitive)	<i>Begin writing here:</i>	0	0	\$0.00
Case Management	<i>Begin writing here:</i>	1	15	\$50,000.00
Continuing Care	<i>Begin writing here:</i>	0	0	\$0.00

Behavior Management	<i>Begin writing here:</i>	0	0	\$0.00
Supported Employment	<i>Begin writing here:</i>	0	0	\$0.00
Permanent Supported Housing	<i>Begin writing here:</i>	0	0	\$0.00
Recovery Housing	<i>Begin writing here:</i>	0	0	\$0.00
Therapeutic Mentoring	<i>Begin writing here:</i>	0	0	\$0.00
Traditional Healing Services	<i>Begin writing here:</i>	0	0	\$0.00
Parent Training	<i>Begin writing here:</i>	0	0	\$0.00
<i>Outcomes and Performance Indicators:</i>				
Recovery Support Services – Support services that focus on improving the ability of persons diagnosed with SMI or SED to live a self-directed life, and strive to reach their full potential.				\$0.00
Peer Support	<i>Begin writing here:</i>	0	0	Enter budget allocation for these proposed activities. \$0.00
Recovery Support Coaching	<i>Begin writing here:</i>	0	0	\$0.00
Recovery Support Center Services	<i>Begin writing here:</i>	0	0	\$0.00
Supports for Self-Directed Care	<i>Begin writing here:</i>	0	0	\$0.00

Relapse Prevention/ Wellness Recovery Support	Begin writing here:	0	0	\$0.00
<i>Outcomes and Performance Indicators:</i>				
Other Supports (Habilitative) – Unique direct services for persons diagnosed with SMI or SED, including services to assist their families to continue caring for them.				\$7,000.00
Personal Care	Begin writing here:	0	0	Enter budget allocation for these proposed activities. \$0.00
Respite	Begin writing here:	0	0	\$0.00
Support Education	Begin writing here:	0	0	\$0.00
Transportation	Begin writing here: Bus tickets, bus passes or mileage reimbursement to assist with transportation to treatment.	5	25	\$4,000.00
Assisted Living Services	Begin writing here:	0	0	\$0.00
Trained Behavioral Health Interpreters	Begin writing here:	1	15	\$3,000.00
Interactive communication Technology Devices	Begin writing here:	0	0	\$0.00
<i>Outcomes and Performance Indicators:</i> 100% of individuals seeking services requiring interpreter services will have access to the culturally appropriate resource. Access to transportation including bus passes and gas vouchers for non-Medicaid individuals.				
Intensive Support Services – Intensive therapeutic coordinated and structured support services to help stabilize and support persons diagnosed with SMI or SED.				\$0.00
Assertive Community Treatment	Begin writing here:	0	0	Enter budget allocation for these proposed activities. \$0.00
Intensive Home-Based Services	Begin writing here:	0	0	\$0.00

Multi-Systemic Therapy	<i>Begin writing here:</i>	0	0	\$0.00
Intensive Case Management	<i>Begin writing here:</i>	0	0	\$0.00
<i>Outcomes and Performance Indicators:</i>				
Out of Home Residential Services – Out of home stabilization and/or residential services in a safe and stable environment for persons diagnosed with SMI or SED.				\$147,354.00
Crisis Residential/Stabilization	<i>Begin writing here:</i>	0	25	Enter budget allocation for these proposed activities. \$45,354.00
Adult Mental Health Residential	<i>Begin writing here:</i>	0	10	\$102,000.00
Children's Residential Mental Health Services	<i>Begin writing here:</i>	0	0	\$0.00
Therapeutic Foster Care	<i>Begin writing here:</i>	0	0	\$0.00
<i>Outcomes and Performance Indicators:</i>				
Acute Intensive Services – Acute intensive services requiring immediate intervention for persons diagnosed with SMI or SED.				\$0.00
Mobile Crisis	<i>Begin writing here:</i>	1	1	Enter budget allocation for these proposed activities. \$0.00
Peer-Based Crisis Services	<i>Begin writing here:</i>	1	1	\$0.00
Urgent Care	<i>Begin writing here:</i>	1	1	\$0.00
23 Hour Observation Bed	<i>Begin writing here:</i>	1	1	\$0.00

24/7 Crisis Hotline Services	<i>Begin writing here: Each individual within the Salish region will have access to toll-free crisis line services and referral.</i>	0	0	\$0.00
<i>Outcomes and Performance Indicators: Each individual within Salish region will have access as identified in reported encounters.</i>				
Non-Direct Activities – any activity necessary to plan, carry out, and evaluate this MHBG plan, including Staff/provider training, travel and per diem for peer reviewers, logistics cost for conferences regarding MHBG services and requirements, and conducting needs assessments.				\$30,000.00
Workforce Development/Conferences	<i>Begin writing here: Administrative Costs</i>	1	1	Enter budget allocation for these proposed activities. \$30,000.00
Grand Total				\$329,354.00

Attachment 6.a.1

Category/Subcategory	Provide a plan of action for each supported activity	Proposed #Children with SED	Proposed #Adults with SMI		Proposed Total Expenditure Amount
Co-responder funds to support grants to law enforcement and other first responders to include a mental health professional on the team of personnel responding to emergencies within regions					\$75,000
MHBG Co-responder	<i>Begin writing here: Behavioral Health Co-Responder will be paired with First Responder personnel to respond to Behavioral health calls.</i>	1	25		Enter budget allocation to this
					\$75,000.00

BH ASO:	Salish BH-ASO
Counties:	Clallam, Jefferson and Kitsap
Current Date:	12.28.2023
Total SABG Allocation:	\$1,132,110
Contact Person:	Jolene Kron
Phone Number:	360-337-4832
Email:	jkron@kitsap.gov

**Section 1
Proposed Plan Narratives**

Needs Assessment (required)	<p>Describe what strengths, needs, and gaps were identified through a need’s assessment of the geographic area of the region. To the extent available, include age, race/ethnicity, gender, and language barriers.</p> <p>Begin writing here: <i>SBH-ASO gains insight into the regional strengths, needs and gaps through multiple mechanisms. This includes routine engagement with the SBH-ASO Provider Network, SBH-ASO Advisory Board, SBH-ASO Quality and Compliance Committee, each of the 3 Counties’ 1/10th of 1% Sales Tax Advisory Boards, and the Regional Office of Behavioral Health Advocacy (OBHA) for access to regional data on grievance data which reflects strengths, needs and gaps. Information is also gathered by engagement in community services groups including housing/homeless committees, local continuum of care meetings, and cross-system collaborations meetings. SBH-ASO also reviews community needs assessments as available. Gaps identified are access to services due to the rural and frontier geography within the region. Strengths identified are engagement of community and cross system partnerships.</i></p> <p><i>The SBH-ASO 2022 Community Needs Survey identified the following areas of unmet needs by survey respondents: Withdrawal management services, inpatient mental health services, childcare to support treatment, housing support and residential substance use disorder treatment. Note: The survey did not differentiate between income or insurance status.</i></p>
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Cultural Competence (required)	<p>Provide a narrative summarizing how cultural competence overall, is incorporated within proposed projects. Identify what anticipated efforts will be taken to measure progress.</p> <p>Begin writing here: SBH-ASO integrates CLAS standards in all service provision. SBH-ASO values:</p> <ol style="list-style-type: none"> 1. We value individual and family strengths while striving to include their participation and voice in every aspect of care and development of policies and procedures. 2. We value and respect cultural and other diverse qualities of each individual. 3. We value services and education that promote recovery, resiliency, reintegration, and rehabilitation. 4. We work in partnership with allied community providers to provide continuity and quality care. 5. We treat all people with respect, compassion, and fairness. 6. We value the continuous improvement of services. 7. We value flexibility and creativity in meeting the needs of each individual. <p>The SBH-ASO will measure these projects through required FBG implementation and progress reports. The submitted monthly service reports to the SBH-ASO allow for monthly monitoring of project success, such as allocated funds being spent, and projected outcomes being met. SBH-ASO continues to engage with our Tribal partners through annual crisis planning with the Tribes in our region.</p>
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<p>Continuing Education for Staff (required)</p>	<p>Describe how continuing education for employees of treatment facilities is expected to be implemented.</p> <p>Begin writing here : SBH-ASO has strong relationships with providers. SBH-ASO meets quarterly with the provider network to provide system updates, problems solving, and training. SBH-ASO staff provide technical assistance support to all providers as needs arise. SBH-ASO encourages providers to engage in community training and provides resources as they are available. SBH-ASO provides oversight to agencies related to training plans and requirements as part of the Annual Monitoring Process.</p>
<p>Charitable Choice (required)</p>	<p>Provide a description of how faith-based organizations will be incorporated into your network and how referrals will be tracked.</p> <p>Begin writing here : There are currently no faith-based BHA's within our region. SBH-ASO will work to engage faith-based organizations involved in providing treatment and seek input regarding how they choose to be integrated into the public treatment system. Current programs coordinate with faith based organizations as needed to support individuals. Any requests for faith based services will be tracked through our care management staff.</p>
<p>Coordination of Services (required)</p>	<p>Provide a description of how treatment services are coordinated with the provision of other appropriate services including health, social, correctional and criminal justice, education, vocational rehabilitation and employment services.</p> <p>Begin writing here : Coordination with our provider network, community partners and MCO's is critical to the long-term success of the SBH-ASO. SBH-ASO Care Managers work to coordinate care for individuals who receive funded services. Outpatient providers use case managers to coordinate with community services including housing, employment, DSHS, DOC, and Children's Administration. SBH-ASO has participated in meetings to assist with in problem solving concerns related to care coordination of services for individuals across all counties. SBH-ASO participates in regional opioid programs to assist with development of community network response and facilitate care for individuals. SBH-ASO continues to work to support community members and community partners in accessing services by facilitating and maintaining relationships to provide coordination as needed.</p>
<p>Public Comment/Local Board /BH Advisory Board Involvement (required)</p>	<p>Describe how you facilitated public comment from any person, behavioral health association, individuals in recovery, families, and local boards in the development of this SABG Plan.</p> <p>Begin writing here : SBH-ASO provides a forum for public comment at each Executive and Advisory Board meetings. SBH-ASO providers identify needs in part based on community surveys. The SBH-ASO Advisory Board uses community survey information to assist in identifying gaps and needs within the community and set priorities for future work. SBH-ASO staff engages with other regional behavioral health advisory boards and community organizations to encourage feedback and facilitate identification of community needs. Final feedback is incorporated into the plan development and the plan is approved by the SBH-ASO Advisory Board.</p>
<p>Program Compliance (required)</p>	<p>Provide a description of the strategies that will be used for monitoring program compliance with all SABG requirements.</p> <p>Begin writing here : SBH-ASO works with providers to ensure adequate and timely submission of expenses reports/billing. Fiscal and Clinical components are reviewed in Annual Monitoring for each agency. Providers will also participate in routine SBH-ASO Quality and Compliance Committee meetings, complete monthly exclusionary reviews, and ensure signage posting to welcome reporting of any program integrity issues.</p>

<p>Recovery Support Services (optional)</p>	<p>Provide a description of how and what recovery support services will be made available to individuals in SUD treatment and their families.</p> <hr/> <p>Begin writing here: Transportation and childcare are funded in this plan. SBH-ASO providers are able to offer these services per contract. SBH-ASO Care Managers assist any individuals seeking services to connect to providers who can meet the requested need for support.</p>
<p>Cost Sharing (optional)</p>	<p>Provide a description of the policies and procedures established for cost-sharing, to include how individuals will be identified as eligible, how cost-sharing will be calculated, and how funding for cost-sharing will be managed and monitored.</p> <hr/> <p>Begin writing here: Note applicable</p>

Section 2 Proposed Project Summaries and Expenditures The * indicates a required component of the Proposed Project Summary and must be completed				
Category/Subcategory	Provide a plan of action for each supported activity	Proposed # PPW to be served	Outcomes and Performance Indicators	Proposed Total Expenditure Amount
Prevention & Wellness – Preventive services, such as drug use prevention and early intervention, are critical components of wellness:				\$455,000.00
*PPW Outreach (required)	<i>Begin writing here: Outreach and crisis intervention with Pregnant and Parenting women</i>	10	<i>Begin writing here: PPW are provided intervention services.</i>	Enter budget allocation for these proposed activities. \$5,000.00
Outreach to Individuals Using Intravenous Drugs (IUID)	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00
Brief Intervention	<i>Begin writing here: Brief intervention and crisis intervention services to individuals as part of the mobile crisis outreach service spectrum.</i>	0	<i>Begin writing here: Evidence of care coordination with referral sources to provide information on treatment services. Evidence of prioritization. Individuals receive triage, referral, and coordination of care.</i>	\$450,000.00
Drug Screening	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00
*Tuberculosis Screening (required)	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00
Engagement Services – Assessment/admission screening related to SUD to determine appropriateness of admission and levels of care. Education Services may include information and referral services regarding available resources, information and training concerning availability of services and other supports. Educational programs can include parent training, impact of alcohol and drug problems, anxiety symptoms and management, and stress management and reduction. Education services may be made available to individuals, groups, organizations, and the community in general. This is different than staff training. Treatment services must meet the criteria as set forth in Chapter 246-341 WAC.				\$500.00
Assessment	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	Enter budget allocation for these proposed activities. \$0.00
*Engagement and Referral (required)	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00
*Interim Services (required)	<i>Begin writing here: Provision of services for individuals on waitlist for access to treatment</i>	5	<i>Begin writing here: Provision of services for individuals on waitlist for access to treatment Monitor for compliance with waitlist policy and procedure.</i>	\$500.00
Educational Programs	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00
Outpatient Services – Services provided in a non-residential SUD treatment facility. Outpatient treatment services must meet the criteria as set forth in Chapter 246-341 WAC.				\$0.00
Individual Therapy	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	Enter budget allocation for these proposed activities. \$0.00
Group Therapy	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00

Family Therapy	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00
Multi-Family Counseling Therapy	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00
Medication Assisted Therapy (MAT) - Opioid Substitution Treatment	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00
Community Support (Rehabilitative) – Consist of support and treatment services focused on enhancing independent functioning.				\$0.00
Case Management	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	Enter budget allocation for these proposed activities. \$0.00
Recovery Housing	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00
Supported Employment	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00
Other Support (Habilitative) – Structured services provided in segments of less than 24 hours using a multi -disciplinary team approach to develop treatment plans that vary in intensity of services and the frequency and duration of services based on the needs of the client.				\$0.00
PPW Housing Support Services	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	Enter budget allocation for these proposed activities. \$0.00
Supported Education	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00
Housing Assistance	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00
Spiritual/Faith-Based Support	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00
Intensive Support Services – Services that are therapeutically intensive, coordinated and structured group-oriented. Services stabilize acute crisis and clinical conditions, utilizing recovery principles to help return individuals to less intensive outpatient, case management, and/or other recovery based services.				\$1,000.00
*Therapeutic Intervention Services for Children (required)	<i>Begin writing here: For services to children in residential treatment facilities serving PPW.</i>	2	<i>Begin writing here: Tracking use of Therapeutic Intervention services with monthly reporting</i>	Enter budget allocation for these proposed activities. \$1,000.00
Sobering Services	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00
Out of Home Residential Services – 24 hour a day, live-in setting that is either housed in or affiliated with a permanent facility. A defining characteristic is that they serve individuals who need safe and stable living environments in order to develop their recovery skills. Treatment services must meet the criteria as set forth in Chapter 246-341 WAC.				\$269,610.00
Sub-acute Withdrawal Management	<i>Begin writing here: Withdrawal management services as indicated by individual need</i>	1	<i>Begin writing here: Documentation of services by bed day and clinical supporting documentation upon authorization for services</i>	Enter budget allocation for these proposed activities. \$100,000.00

Crisis Services Residential/ Stabilization	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00
Intensive Inpatient Residential Treatment	<i>Begin writing here: Residential SUD services as indicated by individual need.</i>	1	<i>Begin writing here: Documentation of services by bed day and clinical supporting documentation upon authorization for services</i>	\$169,610.00
Long Term Residential Treatment	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00
Recovery House Residential Treatment	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00
Involuntary Commitment	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	\$0.00
Acute Intensive Services -24-hour emergency services that provide access to a clinician. The range of emergency services available may include but are not limited to direct contact with clinician, medication evaluation, and hospitalization. Services must meet the criteria as set forth in Chapter 246-341 WAC.				\$0.00
Acute Withdrawal Management	<i>Begin writing here:</i>	0	<i>Begin writing here:</i>	Enter budget allocation for these proposed activities. \$0.00
Recovery Supports –A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential. Recovery emphasizes the value of health, home, purpose, and community to support recovery.				\$111,000.00
*Interim Services (required)	<i>Begin writing here: See information in "Interim Services" line above</i>	0	<i>Begin writing here: See information in "Interim Services" line above</i>	Enter budget allocation for these proposed activities. \$0.00
*Transportation for PPW (required)	<i>Begin writing here: Provide individual bus ticket, bus passes, mileage reimbursement to aid in access to treatment.</i>	10	<i>Begin writing here:</i>	\$2,000.00
Transportation	<i>Begin writing here: Provide individual bus ticket, bus passes, mileage reimbursement to aid in access to treatment.</i>	0	<i>Begin writing here:</i>	\$9,000.00
*Childcare Services (required)	<i>Begin writing here: Provide childcare in a licensed on-site facility to increase access to treatment services.</i>	30	<i>Begin writing here: Track number of children accessing care and cost of program. Monthly report on usage</i>	Enter budget allocation for these proposed activities. \$100,000.00
*Other SABG activities (required) – any activity necessary to plan, carry out, and evaluate this SABG plan, including Continued Education/training, logistics cost for conferences regarding SABG services and requirements, capacity management infrastructure, and conducting needs assessments.				\$270,000.00
<i>Begin writing here: Administration and Interpreter Services. Naloxone program support including training and access.</i>				
Grand Total				\$1,132,110.00

Attachment 6.a.2

Category/Subcategory	Provide a plan of action for each supported activity	Proposed # PPW to be served if known.	Outcomes and Performance Indicators	Proposed Total Expenditure Amount
Co-responder - funds to support grants to law enforcement and other first responders to include a mental health professional on the team of personnel responding to emergencies within regions.				\$25,000
SABG Co-responder	Begin writing here: Behavioral Health Co-Responder will be paired with First Responder personnel to respond to Behavioral health calls.	0		\$25,000.00

SBH-ASO Advisory Board Recruitment Talking Points / Social Media Verbiage

Join the Salish BH-ASO Advisory Board!

Who We Are: SBH-ASO oversees behavioral health (mental health and substance use disorder) crisis services for all residents across Clallam, Jefferson, and Kitsap Counties. SBH-ASO also administers special programs including housing supports, peer services, and programs serving individuals connected to the justice system. Our Advisory Board collaborates with the SBH-ASO Executive Board to provide guidance on funding priorities and oversight for programs across the Salish region.

Who We Need: We are seeking volunteers with lived experience and/or a strong interest in behavioral health systems of care. Individuals of all ages and backgrounds are encouraged to apply. Your insights are valuable and can make a difference!

When We Meet: Meetings are held every other month on the first Friday from 10:00 am to 12:00 pm. You can join either in-person at 7 Cedars Hotel in Sequim or via Zoom. Advisory Board meetings are open to the public. If you would like to receive notifications of upcoming meetings, you can sign up for emails at

https://public.govdelivery.com/accounts/WAKITSAP/subscriber/new?topic_id=WAKITSAP_98.

Travel Compensation: Board members can receive compensation for travel expenses when attending in-person meetings or approved trainings and conferences.

Continuous Learning: As a Board member, you will have the opportunity to attend trainings and events that support Advisory Board work. Board members are empowered to stay up to date on current behavioral health topics and develop their strengths!

If you are interested in applying or have any questions – or would like to join a meeting as a guest, please contact Nicole Oberg, SBH-ASO Program Specialist at 360-337-4829 or noberg@kitsap.gov. We would be pleased to have you!



**Volunteer Application for Appointment to the
Salish Behavioral Health Administrative Services Organization
Advisory Board**

The following information will assist us in the selection process. Please help us in getting to know you.

Name _____

Contact Phone # _____ Contact E-mail _____

Mailing Address _____

City _____ State _____ Zip Code _____

Home Address (if different) _____

Occupation _____ Employer _____

Education _____

(please circle) Clallam, Jefferson, or Kitsap County Residence since: _____

Have you or any member of your immediate family received mental health services or those related to substance abuse through the public service system? Yes _____ No _____

Are you recovering from mental illness, alcohol or other drug dependency? Yes _____ No _____

(Optional) What ethnic minority group do you represent? _____

Affiliations

Within the past year, have you or a member of your immediate family been employed by, or on the board of directors of any agency that may be supported by state or county funds? Yes _____ No _____

If yes, agency name _____

Special Training

Have you received special training in human services, mental health or substance abuse disorder services?

Yes _____ No _____ If yes, please describe: _____

Availability to Attend Meetings

❖ Bimonthly daytime meetings? Yes _____ No _____ Bimonthly evening meetings? Yes _____ No _____

- Nights of the week you would be unable to attend meetings (exclude Friday, Saturday or Sunday)

❖ Available to attend committee meetings in addition to regular bimonthly meetings? Yes _____ No _____



Why are you applying for this appointment? _____

Which of your personal and/or professional interests prompted you to apply for this appointment?

Have you served on any County board, commission, committee, council or task force? If yes, please list:

Please list your qualifications for this appointment (include skills, activities, training, education).

What are your community interests (committees, organizations, special activities)? _____

Comments (optional)

In addition to the above, I wish to add: _____



Personal References *(Please provide the names of two non-relative references)*

1. Name _____ Phone # _____
Address _____ City/Zip _____
Relationship _____

2. Name _____ Phone # _____
Address _____ City/Zip _____
Relationship _____

I hereby certify that the information on this application is true and complete. My signature authorizes the program administrator to verify any of the information on this application and to secure information deemed necessary from employers and personal references in order to determine my suitability for the volunteer position I am seeking.

I also understand as a regional volunteer I will be performing services for civic, charitable or humanitarian reasons; I have not been promised and have no expectation of compensation for services rendered; and offer my services freely and without pressure or coercion, direct or implied, from the organization.

Signature Date

We welcome your willingness to serve the Clallam, Jefferson and Kitsap County region. Please return this application to: Nicole Oberg, Salish BH-ASO Program Specialist; 614 Division St. MS-23, Port Orchard, WA 98366; noberg@co.kitsap.wa.us; 360.337.4829

V-16 Updated December 2023



SALISH BEHAVIORAL HEALTH
ADMINISTRATIVE SERVICES ORGANIZATION
SERVING CLALLAM,
JEFFERSON, AND
KITSAP COUNTIES

Volunteers Needed

The Salish Behavioral Health Administrative Services Organization (SBH-ASO) is seeking volunteers to serve on its Advisory Board



We are looking for individuals who:

- Have lived experience with a behavioral health disorder, or family members
- Have interest in behavioral health systems of care

Help guide behavioral health services in your community!

For more information visit:

<https://www.kitsapgov.com/hs/Pages/SBH-ASO-ADVISORY-BOARD.aspx>

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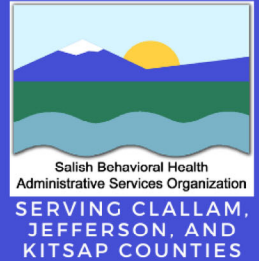
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Advisory Board Recruitment Graphic

Volunteers Needed



The Salish Behavioral Health Administrative Services Organization (SBH-ASO) is seeking volunteers to serve on its Advisory Board

Seeking individuals who:

- **Have lived experience with a behavioral health disorder, or family members**
- **Have interest in behavioral health systems of care**



**For more info contact
Nicole Oberg
360-337-4829
noberg@kitsap.gov**