



Kitsap County Mental Health, Chemical Dependency & Therapeutic Court Programs

Second Quarter Report

April 1, 2024 – June 30, 2024



Kitsap County Mental Health, Chemical Dependency & Therapeutic Courts Program Quarterly Narrative Summary

Progress on Implementation and Program Activities:

Agency: Agape Unlimited

Program Name: AIMS

\$40,955

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter. If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

Our goal was to serve 15 clients, and we were able to serve 19 clients however 12 were enrolled with Agape. Seven were PCHS clients who mistakenly got scheduled on the AIMS calendar. Since Covid and the Blake's law we experienced a 32% client decrease. We are now seeing an increase and are up 14% to get back towards our original client count. We had one holiday, a scheduled vacation, and some illness with the LMHP that impacted our measures this quarter.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

We have strong partnerships and a robust referral system with other behavioral health organizations which assists the referral process. We have been monitoring census and utilization within our own agency and other behavioral health agencies to track trends to help us project any future changes. Our screening and eligibility requirements are very minimal with few disqualifying factors to ensure that eligible participants have quick access to services (contact within 24 hours). Many staff are trained to screen for program eligibility as well as to disseminate accurate information in appropriate forums to our target population. We are excited to be able to attend and host in-person meetings again which helps educate our partners on our programs more effectively than in prior online platforms. We will be attending large community events this summer to disseminate material to the community and other agencies in attendance.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

PCHS will support the entire salary, benefits and operational supplies needed for the fulltime LMHC through Medicaid billing and other revenue in 2024. PCHS will also continue this support in 2025.

Success Stories:

With the AIMS program, I have been able to get to a place in which I am accessing services with Skookum, I am staying clean and sober, and I can see my vocational counselor. I am using skills I have learned, I am making progress and recognizing and correcting my negative behaviors.

Agency: Agape Unlimited

Program Name: Treatment Navigator SUD

\$83,618

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter. If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

The Treatment Navigator program continues to be efficient and necessary for our organization. We have again exceeded our goals and objectives by decreasing the no-show rate and engaging many people in our services. We have also connected them to ancillary services that promote overall good health, stability, and effective treatment response. The treatment navigator finds new and innovative ways to help participants reduce barriers and get their needs met. Our treatment navigator has been instrumental in getting household items for our housing participants on the day of their move into our program.

Moreover, Agape's Treatment Navigator has recognized other critical needs that clients have, and we have been able to fulfill those additional requirements.

We have also received funds from another grant source to help pay for criminal histories, which has enabled clients to obtain the needed collaborating documentation for their appointments. Overall, the Treatment Navigator program has been a great success for our organization and has helped us fulfill our mission of providing quality healthcare services to our clients.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

We have partnered with multiple social service agencies to meet the needs of our clients and minimize expenses while providing a greater impact to the client. We work with DSHS, Abrahams house, therapeutic courts, KCR, KRC, Pacific Hope and Recovery, PCAP, Skookum, Scarlet Road and many more.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

The Agape treatment navigator has finished the requirements for their peer certification. However, we are waiting for the state exam to be offered before she can complete the peer process. We aim to have the Navigator certified as a peer counselor, which will allow us to offer a portion of the treatment navigator's expenses as a Medicaid billable service. We have established partnerships with local resources that have aided meet our client's needs.

Success Stories:

The treatment navigator is a great resource to have. The navigator is always smiling, happy, and willing to support me. The navigator is super easy to approach and professional. Any time I have needed the navigators assistance the navigator has been able to take care of me. The navigator has helped me get bus passes and if for some reason I miss the bus the navigator has been able to get me to critical appointments. The navigator has helped me get a cell phone which I needed to access services. I always appreciate the navigator for everything that has helped me in my recovery. I know the navigator helps a lot of people because I see her driving people and assisting someone in her office at all times. If there is someone who needs assistance, I always send them to the navigator. It would not have been so easy to get where I am without the navigator's help.

Agency: Bainbridge Youth Services

Program Name: Year Round Youth Counseling

\$105,000

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter. If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

BYS was able to achieve our goals for our free mental health therapy program in quarter 2:

*127 Kitsap County youth attended 1,434.5 hours of BYS mental health therapy in quarter 2:

-100% of BYS youth participants reported that they believed participating in BYS programs helped improve their mental health or overall well-being.

-90% of BYS youth participants reported that they believed they have gained new skills or a better understanding of themselves by participating in BYS programs.

*18 Kitsap County parents/caregivers participated in BYS counseling services and/or parent peer support groups in quarter 2. This included 115 hours of one-on-one counseling for Kitsap County parents/caregivers.

-100% of parents/caregivers reported feeling BYS services helped improve their abilities in their parenting.

-86% of parents reported gaining new skills or a better understanding of themselves through BYS services.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

BYS engages in various forms of outreach for youth. We partner with Kitsap public and private schools to provide resources to staff and connect resources to youth. We utilize bathroom stalls in the schools to display mental health flyers, which we update every other month. BYS therapists attend health classes to answer questions about mental health and provide resources. Additionally, BYS therapists, along with the BYS Youth Board and police department, visit schools to discuss high-risk behaviors and provide education to prevent future issues.

BYS maintains relationships with organizations such as Virginia Mason, Boys & Girls Clubs North Kitsap, Helpline House, and Kitsap Mental Health. We also collaborate with Kitsap police departments to coordinate care for both youth and families. This approach ensures more cohesive care and helps prevent children from falling through the cracks.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

BYS was awarded grant funding from the following funders in Quarter 2:

\$7,500 awarded through the Kitsap County Commission on Children and Youth - Adverse Childhood Experiences RFP.

BYS held our Annual Fun Run fundraiser on 4th of July, with over 1,200 runners participating and raising money for BYS. The Annual Fun Run is BYS's largest fundraising event of the year.

Success Stories:

*Youth Success Stories -

When BYS Youth were asked how BYS services have made a difference in their life, comments included:

-“It helps me process things in my life much better than just sitting on my problems. Talking about events in my week helps to resolve lingering feelings on them and work through anxiety & stress. Very helpful, I look forward to it every week. :) ”

-“Sometimes I just need to get it out and talk about whatever is on my mind, and I feel so safe doing that at BYS.”

*Parent/Caregiver Success Stories:

When asked how the parent peer support program has made a difference for them, parents reported:

-“It really helped me to not feel alone in my parenting journey”

-“It was really helpful to hear from other parents”

-“I feel like I'm not messing up as much as it feels sometimes”

When asked what skills or strengths they have gained, parents reported:

-“Community! A place to vent and process”

-“Learning how to share my experiences with others”

-“Importance of taking better care of myself and ways to balance that with my family's needs”

Agency: City of Bremerton

Program Name: Therapeutic Court

\$100,000

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter. If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

We have reached our goal to graduate our first participant, increase our number of participants and to increase our visibility.

Scheduling more defendants for observations to learn more about TC.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

Our support service specialist has increased his weekly outreach with community partnerships with the real teams, BPD Navigators, KCR and BHA.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

We increased new relationships at our resource fair and connected with treatment providers in Pierce County and King County.

Success Stories:

We held our first graduation with our June Resource Fair and increased the number of community partners in attendance. We had our clerks and probation department onsite.

Agency: Central Kitsap Fire Department

Program Name: CARES

\$375,000

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

Kitsap Fire CARES continues to meet and exceed identified goals. CARES consistently demonstrates a more than 60% reduction in chronic utilization of costly emergency response interventions in the 6 months following a CARES intervention. CARES provides a countywide field-based SUDP in partnership with Olympic Community of Health and the Kitsap Recovery Center which has demonstrated considerable effectiveness in successful field-based SUD interventions across teams. As an enhancement to the emergency medical system, CARES continues to demonstrate the ability to improve the health status of county residents through productive interventions and referrals and connections to area supports, services, and resources.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

Kitsap Fire CARES is successfully partnered with the following agencies:

- Kitsap County Mental Health, Chemical Dependency, and Therapeutic Court Program provides operational funding for three master's level social workers staffing the CARES teams.
- Salish Behavioral Health Administrative Services Organization for clinical staffing.
- Olympic Community of Health and Kitsap Recovery Center to provide a dedicated field-based CARES substance use disorder professional utilized by CARES teams countywide.
- Kitsap County Aging and Long-term Care, Knights of Columbus, and Boeing Bluebills for the provision of Fall Prevention and geriatric services.

Kitsap Fire CARES is in the final stages of formalizing a partnership with Saint Michael's/VMFH to provide multi-disciplinary street medicine services including low/no barrier access to an advanced medical provider.

Kitsap Fire CARES is also diligently working to address identified gaps in emergency and transitional housing and pursuing collaborative partnerships with area housing resources including the Kitsap County Homeless Encampment Action Response and Transitions (HEART) program and organizations such as Eagle's Wings, Kitsap Homes of Compassion, and Oxford.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

Kitsap Fire CARES is continually focused on building program sustainability through innovative and diverse funding streams. Recently, Kitsap Fire CARES became the recipient of a University of Washington and Co-Response Outreach Alliance grant that will allow the fire districts to conduct a feasibility study of becoming a licensed behavioral health agency (BHA). This move may enable CARES to bill for crisis support services provided by CARES licensed clinical social workers, such as crisis intervention and stabilization.

Additionally, CARES is investigating funding opportunities through the Health Care Authority (HCA) for community-based crisis teams, aligning with House Bill 1134, which involves collaboration with emergency medical service agencies and fire services. These strategies may enable CARES to operationally function in accordance with other mobile crisis teams and to receive the same identified funding and support.

Kitsap Fire CARES is also expanding partnerships that build organic sustainability. As an example, CARES is finalizing a contract with Saint Michaels/VMFA to provide an advanced medical provider alongside CARES teams. This collaboration is likely to yield a contract that provides financial commitments that continue funding CARES work.

Success Stories:

Between January and February, a patient reached out to emergency services approximately 100 times due to various concerns, mainly stemming from mental health issues. By collaborating with the patient's care team, educating emergency medical services (EMS) responders, coordinating with the Developmental Disabilities Administration (DDA), and involving other key stakeholders, we successfully employed diverse de-escalation techniques, engagement strategies, and supportive interventions. These efforts led to a notable decrease in the patient's calls to single-digit occurrences. Although the patient continues to contact 911, their interactions with

EMS have significantly diminished.

Cares 31 was involved with a patient who had experienced a recent fall, resulting in a diagnosis of a brain bleed. The patient's spouse reached out for support due to ongoing mobility challenges necessitating EMS assistance for lifting. Through proactive engagement, Cares 31 offered guidance on fall prevention to both the patient and his wife. Additionally, they facilitated the acquisition of medical equipment to alleviate mobility constraints within their residence. As a result of these interventions, the frequency of EMS calls from the patient has significantly decreased.

Agency: The Coffee Oasis

Program Name: Homeless Youth Intervention

\$289,000

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

The Fourth quarter of 2023 has been a rebuilding time for staff. We have replaced a Crisis outreach navigator, SUPD and changed managers for the program after having the same management for 5 years. This has affected our outcomes for this program. We are still seeking on SUPD in staffing.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

We are currently rebuilding and establishing good relations with the Bremerton Police and fire after many years of relationship we find that this needed reinvestment into these groups.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

This program is hugely impactful for the community we serve, and it is a priority to continue its success. TCO has multiple revenue streams for programming, including business sales from our cafes, grants, and donations. Our case management staff help youth who may not have insurance to become insured.

Success Stories:

He left the shelter in the first week of May and is now staying in a transition home in Gig Harbor; he is now being set up for independent housing. During that week, different staff drove him back and forth to appointments and helped him move into his new place. He also got news from a legal office that he will be receiving government financial compensation for the injustice he and other foster children received.

Agency: Eagles Wings

Program Name: Coordinated Care

\$300,000

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

We are on track to reach or exceed most of our evaluation metrics by the end of year. Of note, there continues to be outcomes in these reports that were not part of our Evaluation Worksheet. We will work with Hannah to fix these areas by end of year. Because of the continued lack of sustainable, predictable funding through Coordinated Entry, HEN waitlists, and the on-going pause on enrolling new participants into FCS, we have been unable to link as many participants as we had hoped to alternate housing stipends and funding supports this last quarter. As has historically been the case, finding alternative funding for operations, and finding affordable housing in community to transition participants to, both continue to be ongoing issues.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

We continue to collaborate with many community partners through bidirectional referrals and care coordination including HSC, HEN, Trueblood, Kitsap County therapeutic courts, Bremerton Municipal Therapeutic Court, PCHS, KMHS, Bremerton Housing Authority, WAQRR, etc.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

We continue to work to execute a \$1.2 million loan with the WA Dept of Commerce to acquire two properties which would create 4 units for Project-Based Vouchers, reduce rental/mortgage costs, and open more funds to go towards staffing and service offering. We continue to bill Medicaid for FCS for individuals that were enrolled before the statewide pause on enrolling new participants in FCS, which is still in effect at the time of this report. We also applied for a Phase V Trueblood grant which would support housing costs and intensive services for Trueblood Class Members. We have made it past the initial rounds of applications for this funding and have an interview in the coming weeks. We also continue to pursue contracts with the Health Care Authority and Department of Health to bill for services, including respite and behavioral health services.

Success Stories:

We are very happy to report that our partnership with BHA is helping us to get 25-30 participants a Housing Choice Voucher which will provide them with Permanent Subsidized Housing. As a result of this partnership with BHA, and our loan through the Department of Commerce/Apple Health and Homes, we will soon have Permanent Supportive Housing, and Project-Based Vouchers, as part of our housing continuum of care. Of the 159 people we have served year-to-date, 14.4% (n=23) have moved into stable housing, and 64.8% (n=103) remain housed with us. Still others have moved into other transitional programs, such as Agape's Transitional Housing, or moved in with friends and family. Less than 1% (n=3) were discharged due to known incarceration, and only 16.3 % (n=26) self-discharged or were discharged by EWCC for repeated violations.

Agency: Fishline

Program Name: Counseling Services

\$95,000

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

Goal 1: Aim to receive 5 referrals monthly or 15 referrals quarterly from partner agencies.

We nearly achieved this goal, which we believe was impacted by the summer months. During this period, individuals often travel and may not seek mental health therapy as regularly as they do when the weather is less inviting.

14 clients reported discovering our free counseling services by noticing the advertising on our building, through the market, and via Fishline staff, volunteers, and friends.

Goal 2: Strive to complete 5 intakes monthly or 15 intakes quarterly, see clients within 3 business days, and ensure 75% client satisfaction and improvement upon exit.

This goal was not fully met, attributed once again to the summer period and a decreased need for mental health therapist support.

This quarter, we completed 14 intakes. Our partnership with AMFM has been highly collaborative and beneficial for clients, helping to lower care barriers. We have also begun offering virtual appointments, which are well-received by clients pleased with this new option.

All new clients were contacted and scheduled within 3 business days, with over 80% seen within this timeframe. The main reason for not meeting with a counselor within 3 business days was due to client preference.

Goal 3: 75% of those seen by the counselor will be referred to a Fishline case manager/Schedule and attend quarterly meetings with other providers.

We have not achieved this goal and are considering setting new benchmarks, since the existing one has become difficult to reach because many of our clients are already involved with Fishline case managers or other service providers.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

During the second quarter, Fishline provided updates on our free counseling services at our monthly and quarterly community meetings. Our case managers and the Director of Programs and Services interacted with representatives from various agencies and took part in resource fairs.

In this quarter, we organized 10 Fishline tours for community members and different organizations. During these tours, we shared details about our services and consistently received positive feedback. We also held our Annual Community Open House, where we showcased a slideshow and discussed our programs with the attendees. Moreover, we shared information about this service with our donors, volunteers, and clients via our e-newsletter, and with the wider community through our social media channels.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

We are diligently seeking further grants and have introduced a variety of fundraising initiatives to boost donations year-round. Moreover, Fishline is thrilled to unveil a new Thrift Store, designed to enhance our existing thrift store, Second Season. Fishline Thrift welcomed the public on June 26, 2024, and has already observed a rise in revenue benefiting Fishline's programs and services.

Success Stories:

A person sought therapy due to feelings of apathy, hopelessness, and dissatisfaction in their marriage. The clinician employed mindfulness-based cognitive therapy, dialectical behavior therapy, and communication skills training. The client worked on reshaping detrimental thought patterns and enhancing communication with his spouse, leading to a reconsideration of the decision to divorce upon completing therapy. Engaging in daily mindfulness and meditation, the client felt more grounded and reconnected with his family, regaining a sense of contentment and optimism for the future. Additionally, the client successfully ceased nicotine use, a long-term habit, and read ten books in five months, a significant increase from his previous reading habits.

Agency: Flying Bagel

Program Name: Attachment Biobehavioral Catch-up Parent Coaching

\$200,000

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

Looking back at this quarter from the vantage point of August 1st, the referrals at that point were stable but slower than we would hope - see below for strategies we developed and began to implement to increase referrals. Apart from that, we have been moving toward our goals of certifying new parent coaches both under Flying Bagel Counseling Services and with our subcontractor, Kitsap Mental Health Services.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

Met with home visiting providers both in the regularly scheduled meeting held by Kitsap Public Health District and individually in order to discuss how to make referrals and how to support one another's work. Worked with other home visiting providers to plan and receive funding for a series of events for parents to build skill & community and meet home visiting providers. This is both to increase referrals and give parents the opportunity to meet providers and ask questions in a relatively low-stakes setting. These events will take place in late August-September and were funded through DCYF Strengthening Families Locally. I also networked with other therapists and spoke with a local pediatrician to share about ABC Parent Coaching and received referrals from both of these sources. Mary Rose also attended a training with staff from Kitsap Mental Health Services' IECMH program, which deepened that relationship. Mary Rose and Erika tabled at the county's DD Resource Fair, and we arranged to table at other events later in the summer including the Kitsap County Fair. Finally, Mary Rose attended the statewide Strengthening Families Locally conference and met with local and statewide providers, families, and policymakers and shared about the ABC program and the importance of infant and early childhood mental health.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

Applied to become a Behavioral Health Agency (in process), became approved as a group biller under HCA, and hired a credentialed to begin to apply for contracts with MCOs and commercial insurers as a group.

Success Stories:

We started to see some parent coaching cases wrapping up this quarter and should have some numbers back for how much impact ABC had on parental sensitivity soon! Also, Flying Bagel ABC parent coach Erika had her baby in May - he's an excellent little mascot for our parent coaching services!

Agency: Kitsap Brain Injury

Program Name: Support Groups and Classes

\$14,387

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

We've achieved a significant milestone with our 'Meet Survivors Where They Are' outreach/awareness campaign. On June 16th, we surpassed last year's site visits and pages viewed, indicating a promising growth trajectory for our organization. In the second quarter, we held 16 meetings and helped 382 survivors, averaging 23.875 attendees. This brings our total to 32 meetings and helping 759 brain injury survivors, a clear sign of the positive impact we're making and the promising future ahead. We resumed communication or reconnected with 7 brain injury survivors in the second quarter. We successfully added the Brain Injury Fundamentals training from the Brain Injury Alliance of America to help our facilitators. We increased the lowest wellness survey score by 10 percent.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

We welcome any and all collaboration to help our members. However, we have recently learned that you must produce a product that other organizations have identified as needing.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

We were recently informed that we were approved for the Port Gamble S'Klallam appendix X grant; however, we have not yet seen any funds. We also submitted our grant application to the community healer grant from the Department of Commerce.

Success Stories:

Many of our members have stated that our groups saved their lives.

Agency: Kitsap Community Resources

Program Name: ROAST

\$557,800

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

KCR is working to hire one more Housing Stabilization Specialist to expand our intensive case management caseload. Coordinated entry provided rental assistance to 279 households in Q2 and those individuals-maintained housing for at least one month prior. It was with the combined efforts of both Supportive Housing and Coordinated Entry that we were able to provide housing stabilization support to 465 unduplicated individuals and 286 households, which exceeds our current goal for the current grant year.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

Our ROAST Recovery Outreach Coordinators continue to provide outreach into inpatient treatment centers within the county. We have expanded collaboration with other outreach teams following our scope of work such as, REAL Team, West Sound Housing Navigator Team, Salvation Army.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

With the reimplementation of FCS back into our housing division; case managers are learning again to braid the FCS program with ongoing grants and funding sources so we can ensure that more of the grant dollars are spent on community needs and less on salary.

Success Stories:

George has been on ROAST case management since 2022 and chronically homeless for over five years. He disappeared for a while and was discovered during outreach at an encampment in Silverdale. We were about to get George into detox while someone watched his dog, then he went to stay at the Baymont with our emergency hotel funding. During this time George continued to check in with his Housing Stabilization Specialist. Seth, George's housing stabilization specialist, secured George a spot at Pendleton Place and provided move-in assistance with Rapid Rehousing CHG.

Agency: Kitsap County District Court

Program Name: Behavioral Health Court

\$433,762

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter. If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

The BHC program supported 36 unique individuals during the second quarter of 2024. Of the 10 individuals referred to the program, 4 entered, 3 are still pending and all have scored as high-risk/high-need on the RANT, meeting All Rise therapeutic court best practice standards for Target Population. Three participants exited the program this quarter, all as successful graduates. Exit interviews yield a 100% positive satisfaction rate. We ended the quarter with one participant on bench warrant status, whereabouts unknown.

Program incentives to sanctions ratios continue to exceed the minimum best practice standards of 4:1 at 19:1! While incentive options have expanded, so too has our ability to track incentives and sanctions. Additionally, participants have been exposed to more resources and treatment, increasing success, and reducing sanctionable behavior. We are still considering a fishbowl option for those in phase two and three to maintain program compliance.

We aim to improve recovery capital for participants to improve long-term success. This quarter 50% of those interested in vocational activities reached their goal and those seeking to obtain/maintain a driver's license are hitting their goals. 64% of participants responded favorably to the Quality-of-Life Enjoyment and Satisfaction Questionnaire. Which meets our established goal of 60% satisfaction.

Housing is a critical element in improving the success of our participants. Housing options remain limited, and it is not uncommon for program participants to vacillate between homelessness and housed states; 83% of second quarter new participants experienced homelessness at some point in the program. Of those, two are homeless at the conclusion of the quarter (33%). However, both of those individuals are in inpatient treatment and will seek housing prior to release.

Our program is expanding to offer more services and support to participants. We are looking at additional training to expand our Moral Reconciliation Therapy (MRT) classes with a class focused on trauma. We are utilizing the Ohio Risk Assessment System (ORAS) for participant risk assessment, and our new peer support (funded through state appropriated funding) started April 1, 2024, and has helped participants stay connected to the program.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

We continue to work closely with the Kitsap County Jail corrections and re-entry staff for in-custody assessments, court viewing and participant attendance, exit interviews, urinalysis collection, and jail bed day data collection. The re-entry team remains an invaluable resource to help bridge the gap for incarcerated participants. Together, we build a better re-entry plan for our participants that includes securing housing, coordinating warm hand-offs for release, medication coordination, and follow-up treatment appointments. Our constant communication reduces duplication of efforts as well.

Our team works closely with various departments of Kitsap Mental Health Services, and we continue to collaborate with assigned clinicians to determine treatment progress and obtain necessary documentation for the court file. Our trial partnership with MCS Counseling is working out well and we have agreed to expand trauma treatment referrals to BHC on a limited basis.

Kitsap Recovery Center remains a committed and valuable partner. James Hoag is present at staffing and court each week, provides in-service training for the court team, arranges evaluations and intakes, monitors urinalysis testing, files weekly reports with the court, and provides direct substance use treatment for most BHC participants. He has also been instrumental with obtaining in patient treatment for our in-custody participants, effectively getting them out of jail and into treatment quickly. KRC continues to provide conference space for our MRT groups.

We collaborate with several agencies for housing support including Oxford, Eagles Wings, Joemama's House, Kitsap Homes of Compassion, Agape, West Sound Treatment Center, Kitsap Community Resources, and Max Hale.

Our peer support has been very active in the community and frequently meets with community partners and also goes with participants to their activities at our partners' locations. She has had meetings with and made connections for our program with KCR, St. Vincent de Paul, KMH Clubhouse, Olympic College Transitional Studies (and other Olympic College contacts), Catholic Community Services (HEN), YWCA, Scarlet Road, DSHS and their vocational rehabilitation team, Connection Credit Union, DCYF, Kitsap Rescue Mission, Kitsap Legal Services, BAART clinic, Pendelton Place, Skookum, and the Kitsap homelessness and Housing Coalition. She has also met with and formed relationships with the KCSO re-entry team and KCSO crisis intervention coordinator. Her outreach has led to many more contacts within the community and greater opportunities for participant success. BHS Matt Duthie continues his work on the Diversity, Equity, Accessibility, and Inclusion Committee with KMHS. At the end of the May the Treatment Court Manager left to work at the Administrative Office of the Courts. Prior to that she would attend local and statewide CJTA meetings, coordinate with other jurisdictions through the Problem-Solving Court Coordinator's and CLJ Coordinator's listservs and is an active member of the WSADCP Training Committee. After her departure, the Court Administrator took on these roles and continued attending meetings, participating in listservs and reaching out to community partners. The Court Administrator was able to attend certification training to be a certified peer support supervisor. In July 2024, the court hired a new Treatment Court Manager.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

The district court requested general funding for the program specialist position as part of the 2024 budget request but that was not granted. As we begin to prepare the 2025 budget, the district court is again requesting that the program specialist position be made part of the general fund and also that the peer support position be made part of the general fund.

Success Stories:

We had 3 graduates this quarter. One in particular, had a great success story. This participant had NO sanctions, and made all appointments, thus was one of the few people to achieve this. Also though, this particular person was in the court due to a crime against her father, and had a no-contact order against her, and couldn't live at his house of course since that happened. During the last month of this program, and after his reaching out and much legal communication, she was able to get the NCO dropped, move back into her family home with her dad/mom/partner, and her parents even attended graduation and met me, to which they stated to me they were proud of her. Truly positive in many ways, including a restorative justice context, and something that rarely happens in our therapeutic court context like that.

From BHS Duthie: While it's always positive to have participants on my caseload get a job and established/regular employment, this quarter has seen exceptional strides in that area. TWO of my participants became managers at their jobs! One at Wendy's and one at Jimmy John's. Additionally, one participant has been back to doing outdoor work with trees and landscaping but is now taking the steps to re-start his own business doing such things. Truly exceeding our expectations in being productive and independent in their lives. Another BHC graduate this quarter has made amazing strides. She is in school and finished her first semester of college to get her SUDP. She just started her second full semester of full-time classes. She had A's in both of her classes, first semester. She is working part-time while in school but was full-time before school. She has been employee of the month 3 times in the past 9 months since starting work. She just started manager training for her store. She has a 90 day probation while in training but is already being paid as management. She has been

able to volunteer at her kid's elementary school and is working with the principal on starting a parents AA support group in the school. She is actively involved in her kid's lives again after CPS dropped their case. She is a sponsor for her kids baseball team and has been assisting with field trips and bought pizzas for their field day. This participant says: "I finally get to be the momma that the school reaches out to because they can actually rely on me!" She has her license again, 'new to her' car and insurance. She is active in her family again and excited for her future. She gives credit to herself first, for doing the hard work, but also the "ongoing and never faulting support from the BHC team". She is working on finding a house for herself and her kids. She has been saving and receives resources for their care along with family support. This will be her first home she has with her kids.

Our third graduate has done very well. He relapsed early on in the program; while still in Phase 1. He was bereaving the loss of his sister, who passed away while he was in jail the previous year. This was the one year anniversary of her passing, and the feelings were overwhelming. He relapsed that once and then reached out for supports. He got a therapeutic sanction for increased groups and more one on one appointments and daily calls. He was able to start therapy and start to grieve and process his feelings. He went on to complete MRT and graduate from CD treatment. He started and completed the long process of gaining acceptance into his tribe. This was a monumental step for him as his father refused to sponsor him until he had been clean for over a year and was focusing on himself. He got accepted into college and completed his first semester of welding with A's. He has started his second semester. He has been accepted back into his family and his mom asked to have the NCO rescinded so she can attend his graduation. He has been active in his niece and nephew's lives and living with them and his brother-in-law, his deceased sister's husband and kids. He has been driving them to and from school and sports practices. He attends all their games no matter the sport. He was previously not allowed to transport them or be around them alone due to his drug use but has now been a huge resource for his family. He accredits his continued support from BHC and his treatment providers. He stated, "It was the fact that you never gave up on me."

Agency: Kitsap County Juvenile Court

Program Name: Enhanced Juvenile Therapeutic Court

\$143,192

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

This quarter we had two objectives go unmet. In our Satisfaction Surveys only 75% of participants Agree or Strongly Agree that their mental health and physical health improved as a result of their participation in the Therapeutic Courts. No one felt that they Disagreed or Strongly Disagreed with those statements, but we had 4 participants who were undecided. But in the survey 94% were Satisfied or Highly Satisfied with their overall experience in the Therapeutic Courts. At this time, I don't believe there is a need for a change in evaluation or scope of work. The difference between meeting or exceeding the objectives listed above is 1 undecided participant.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

We actively collaborate with a number of community partners to make our programs effective and available to our youth after they have left the jurisdiction of the courts. Some, but not all, of our community partners are:

OESD

Agape' Unlimited

Kitsap Mental Health

HSYNC (for homeless youth and their families)

Institute for Family Development

Scarlett Road

The Dispute Resolution Center

Olive Crest

Peninsula Community Health Services

Head Start

Birth to Three

Parent Child Assistance Program (PCAP)

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

This year we will bill DCYF approximately \$130,000 to fund the salary of the Court Services Officer who oversees the Juvenile Drug Court and Individualized Treatment Court. The CCYJ has also committed to funding the salary of the Community Coordinator who supervises that caseload for Safe Babies for the next two years. At one time we used this grant to provide a Behavioral Health Specialist to provide mental health services to youth in our therapeutic courts, we have since taken on that salary and eliminated that part of the ask. Over the years our ask has evolved, increasing when we find something that will be beneficial to our youth, and decreasing when we take the cost on ourselves, or we find something is no longer needed. We will continue to ask for a modest amount of funds from this grant. I do not see a time where we will not be asking for some sort of funding through the Mental Health, Chemical Dependency and Therapeutic Court Sales Tax Grant.

Success Stories:

We had a youth who graduated from our KPAC program in December of 2023. He was a High-Risk youth who was on track to be a repeat offender, spend time in detention, and drop out of school. He entered the program a year earlier on a felony offense. He was missing school and struggling at home. He was referred to ILS and our Behavioral Health Specialist, as well as our Functional Family Therapy program. We incentivized school attendance and ILS helped him enroll and attend driving school. He passed all his classes this past year, has a car and is working. He is currently on track to graduate and hasn't reoffended since his graduation from the program.

Agency: Kitsap County Prosecuting Attorney

Program Name: Alternative to Prosecution

\$395,862

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

In Q2 of 2024, the Therapeutic Court unit saw a change with both the senior DPA and the second DPA who have both settled in quickly to the new roles. Q2 saw a dramatic increase in applications, from 69 to 110 total. With both the defense side and prosecution side becoming more settled and the lengthy homicide trial in the County completed, numbers are back to a higher level. Additionally, the average days from review to entry and application to entry decreased by a full week, meaning participants were getting in sooner, helping toward the goal of reducing the amount of incarceration prior to entry.

One number that remained the same is the days from application to review, which stayed at six, a day longer than our goal of five. The primary explanation for this is one outlier application that took 28 days to review. This application was submitted and then got lost in the shuffle somewhere in the process from receipt to getting to a DPA, leading to the significant delay. This is something that happens on occasion, but very rarely. Without this outlier, we met our goal of an average of five days from application receipt to review.

The number of accepted applicants also increased in Q2 by ten people. This includes one applicant accepted into THRIVE and three into our Veteran's Treatment Court, which tend to see lower numbers than other therapeutic courts. While these therapeutic courts have more specific entry requirements than others, there is hope that we will see continued applications as word gets out about these courts.

Graduations from therapeutic courts continued to remain steady as there were five from BHC, six each from Drug Court and Felony Diversion, and one from Veteran's Court. A steady or increasing number of graduates is always the goal and while there were two fewer in total, the amount of people completing this program remains positive.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

One of the biggest partners the TCU has in the community is the law enforcement community. Continued buy-in from them is key to making these programs work. The Senior DPA in the TCU recently was able to sit down with two deputies from the Kitsap County Sheriff's Office to discuss what was and was not working within the current policies and procedures of Adult Drug Court. Additionally, a recent graduate asked that her arresting officer be present at her graduation ceremony and he attended to watch the whole ceremony. Afterward, they were able to talk about the big transformation of the person he had arrested to who she had become through the drug court program. These continued efforts with law enforcement and their support of these programs will only help efforts to spread the word about the therapeutic court programs in Kitsap County.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

The Kitsap Prosecutor's Office is constantly seeking out grant opportunities to fund the TCU. Most grant options are not available to a prosecutor's office, especially a program that is in place. Our office also continues to request funding from the County Commissioners to support the TCU from the general fund without success. We have shown the impact of the therapeutic courts on community safety, but it has yet to pay off in the form of funding from the general fund.

Success Stories:

A Q2 graduate of drug court had this to say about the program during his last court date and graduation panel: "I have been doing the recovery thing since I was 17 years old, I can do that. Drug court is not just about abstaining from drugs, this is about working on your life too. Drug court has taught me how to be an adult and functioning member of society, which treatment alone could not have taught me"

Another Q2 graduate had this to say about drug court during his graduation panel and after graduation:

"I was sitting in my jail cell deciding on whether to pursue drug court or just plead guilty and go to prison. My defense attorney was trying to convince me to do drug court, but I really just wanted to plead guilty and go to prison, because I had done that before, and it was easy for me. I knew drug court would be hard work, so I really wanted the easier route of going to prison. But sitting there one weekend I decided to put in the work. Drug court is hard work, but it is the best decision I ever made"

Agency: Kitsap County Sheriff's Office

Program Name: Crisis Intervention Officer

\$158,635

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

I have no problem now with this evaluation. Although I still track my contacts manually in Excel, it's not overly time consuming to track contacts day to day now that evaluation has been modified as of Jan 1, 2024. When I reflect above results, what stands out most to me is "11 diversions". This means there were "11" times clients avoided jail incarceration for criminal acts. Although some of the "11" could have been booked into the jail legally while simultaneously requesting DCR evaluation (involuntary treatment assessment/ITA) inside the jail, these clients were "diverted" from the justice system (jail) in hopes an alternative to jail i.e., further evaluation and treatment could lead to behavioral improvement/s.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

*I'm often collaborating with Designated Crisis Responders (CRT @ KMH) as well as social workers at the hospital, CARES Teams, REAL Teams, etc. Primarily though, I work in consult with DCR Kathleen Mobilia at beginning of each shift to identify clients needing DCR evaluation (ITA/assessment). We also review non-emergent detention/apprehension court-orders needing served in the community; if DCR presence is expected to be beneficial during service of a detention order, DCR's will/can be present at time the client's detained by law enforcement, but there are times where I will take Patrol Deputies without a DCR and handle the service.

*I'm also, as CIC, frequently requested by KCSO's Civil Division Deputies to assist with eviction services where there's any behavioral health nexus involving person being evicted. As CIC, if person being evicted is expected to

be homeless once evicted and/or it's expected the person will become irate/suicidal/etc. (in-crisis) when evicted, I will involve local community partners such as KMH/CRT, Regional Navigator's (BPD, PPD), APS, CPS, CARES, REAL Team's, etc. to accompany KCSO for outreaches ahead of final eviction date with goal of engaging an alternative arrangement that doesn't require forcefully removing someone from a residence/apartment.

*I've developed solid working relationships with Behavioral Health Navigator's with Bremerton Police and Poulsbo Police; mostly, I respond and collaborate often with Rachelle Evinsky (Bremerton Police Navigator) as we frequently encounter the same clients who've ventured across NE Riddell Rd or other pockets of city/county areas. It's common for KMH to get back non-emergent or Joel's law detention/apprehension orders where the client needing detained i.e., admitted to hospital per court-order, is going in/out of our jurisdictions. When such occurs and/or for instance, as CIC I also assist Civil evictions within the city limits which BPD's Navigator, Rachelle, is quick to assist and engage city resources or otherwise which has allowed for safe, while humane outcomes.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

N/A.

Success Stories:

***When determining success, as much as I'd like to know how a client's progressing once admitted to a hospital and/or referred for evaluation/treatment pursuant RCW 71.05 or 71.34, HIPPA prevents me from knowing progression unless the client tells me in the future and/or if I learn through consultation with the local behavioral health agency (KMH) when encountering a familiar client involved in an active ITA (involuntary treatment assessment/investigation) i.e., there's imminent risk or immediate danger presented where HIPPA information can be shared. With this said, any success stories I provide are those when a serious risky/dangerous situation presented due to behavioral health disorder/s results in safe resolution without high-level force or unnecessary injury caused by any party.

*Of 120 contacts/encounters/events, CIC was involved in only "3" uses of force (UOF) which all were low-level techniques used to gain control over either resistive or combative client requiring handcuffing and/or gurney restraints for hospital transport. When considering I'm responsible for approximately "40" combined detentions/hospital admissions and some/few arrests/jail bookings so far in 2024, with none resulting in high level uses of force, to me, this speaks to successful implementation of evolving Crisis Intervention Training/s (tactics, skills) and state mandated Patrol Tactics Training/s. Current law enforcement training/s encourage more active listening, compassionate speech/tone, utilizing time, distance, shielding, cover, etc. I've personally witnessed benefit in not rushing behavioral health contacts while seeing benefit of actively listening to someone in crisis. There are times where a client's presentation clearly qualifies for emergency detention pursuant RCW 71.05 or 71.34, but situation/s can allow more time for additional responding resources (manpower, less lethal tools, etc.) which I've noticed more favorable/safer outcomes when such use/s of force must occur to ensure immediate safety.

*After punching two staff members and attempting to strangle another, a student in special education obtained a kitchen knife and scratched "DIE" into a bathroom door that a teacher had barricaded herself behind. The student said he was going to kill the barricaded teacher. As CIC, I responded with and additional Crisis Negotiation Team member. As CIC, I negotiated/communicated with the student from outside his barricade. After short while, the student complied with directions and subsequently was transported to St. Michael's Medical Center for further evaluation alternative to arrest as the student had a developmental disability and believed to lack mental state to knowingly and intelligently cause harm to his teachers.

*In late June, CIC responded with Patrol X 2 for welfare check of 68-year-old male. The wife called 911 from the hospital after her husband made suicidal statements over the phone that suggested imminence. Upon arrival, there was no answer, but the wife provided code access to the garage. There were exigent circumstances involved in checking her husband's welfare as he'd threatened to overdose on medications or ignite the gas line at his home. Once we gained entry into the garage, the husband appeared from the kitchen area absolutely irate with our presence while expressing suicidal means to end his troubling circumstances surrounding his wife not being able to return home. Utilizing time, distance, shielding, actively listening, getting below his level i.e., on

knee while another Deputy held safe cover, etc., we negotiated with the husband and slowly built genuine rapport as we had personal commonalities to relate with him. What initially seemed like an obvious emergent detention, evolved into the husband being deescalated and deemed "not suicidal". By the time we cleared our contact, the husband was extremely appreciative for KCSO's patience and understanding as to why he initially overreacted upon learning his wife's new prognosis. Follow-up contact occurred with the husband next day by me, CIC, and a DCR; the husband again expressed gratitude for KCSO's overall response and actions the day prior while presently bedside with his wife at the hospital who too expressed sincere appreciation

Agency: Kitsap County Sheriff's Office

Program Name: Crisis Intervention Training (CIT)

\$22,500

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

While we currently have not held any classes, three will be held in the 3rd quarter, a 40-hour CIT and 2 Advanced De-Escalation training courses. Between these three classes, there will be about 90 attendees. We hope to hold another 40-hour class at the end of the year.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

We collaborate a lot with CJTC to seek any extra funds they have to help pay for the 40-hour CIT classes. We also work very close with our resource providers in the community so that they can come teach during these courses and let officers/deputies understand the services they provide.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

We work hard to look to CJTC for funding of the 40 hour classes so that we can focus on the advanced classes.

Success Stories:

Cencom advised South Deputies of a suicidal detail. The subject, had sent a mass text out to family members that read, "I'm sorry everyone I can't do this anymore." Since then, her phone has been turned off and no one is able to reach Heather. She was reported to live alone at this address, does not own firearms and did not mention any means to harm self.

Deputies arrived and approached the residence. It appeared quiet and no movement was heard inside besides a dog barking on occasion. There was no vehicle in the driveway, but the residence had a garage which was closed. Deputies believed they could hear some sort of engine running inside the garage. Along the north side of the residence, Deputies found a window which looked into the garage. Inside they located the female inside her running vehicle with all the windows down.

Deputies forced entry into the garage and removed the unresponsive female. She slowly regained consciousness and was treated by medics. She was transported to the hospital for treatment with a mental health hold. South Deputies were dispatched to a suicidal subject with a firearm 2428 PINE TREE DR SE. The caller advised that her boyfriend was out in the shop with a loaded shotgun pointed at his chest. The caller stated that the suicidal subject was angry with her for calling Law Enforcement. South Deputies arrived in the area and staged Medics. The RP and her 1-year-old son were eventually able to exit the residence. She was moved away from the scene to a safe area.

A short time after the RP exited, the subject agreed to disarm and exit the residence. He was cooperative with Deputies and Medics. Medics were able to transport the subject to the hospital on an ITA.

Agency: Kitsap County Sheriff's Office

Program: Reentry Program

\$221,094

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

We continue to surpass the goals for this program. Our two reentry coordinators work very hard in the jail connecting people to services. We have had no problems exceeding the expectations of this grant. We continue to see success through the stories and the reduction of recidivism.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

We continue to collaborate with

New Start

KMH-Trueblood

KMH-Jail Services

KMH-Peer Pathfinder

Road To New Beginnings

Coffee Oasis)

Veteran Services

P-Cap

KRC

Agape

DSHS

Housing Solutions:

Scarlett Road

REAL Program

West Sound-Supportive Housing & Behavioral Health Liaison Services

Tribal Wellness

Coordination with MCO's (United Health, Moina, Coordinated Care, CHPW, WLP) & HCA

Peninsula Community Health Services (Referrals)

North Kitsap Recovery Resource Center

YMCA (Referrals and/or coordination)

WorkSource Referrals/coordination/visits

The Health Care Authority is another partner that helps provide the county funds to make sure our MAT program is running to the best of its ability

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

We continue to request that these positions be funded through the general fund, but with budget cut requests for 2025, that will not be possible. We continue to find grants, such as the money we receive for the MAT program. That money provides staffing and medication and continues to be a success.

Success Stories:

Working with West Sound & in New Start Housing

Male – Age 18

Earlier this year, 2024 he was booked for Malicious Mischief at Kitsap County Jail for one day and then PR'd. He came back a couple weeks later and was charged for Theft 3, Unlawful Possession of a Controlled Substance, and an FTA.

Reentry Services: We met with him a few days after being booked into KCJ. He was referred to New Start Housing / filled out their housing application, Housing & MH Liaison, completed his Chemical Dependency Assessment, referred him to Coffee Oasis and completed Housing Solutions application for financial aid and or housing.

During his release planning we provided resources for food, cash, WST, work, and school resources. We

encouraged him to work with West Sound Treatment and Coffee Oasis to get his needs met in the community. We were able to get him a backpack filled with clothing and some food from a grant we have from Amerigroup/Wellpoint. We also had appointments already made for his treatment intake and with New Start Housing prior to releasing. The Housing and Mental Health Liaison from West Sound worked with his attorney, so we could close any gaps and provide as much as possible for services.

We placed a jail hold on him for transportation so that the New Start Navigator could pick him up on the day he released from KCJ. She took him to DSHS, got his ID, and helped with getting his medical insurance active.

6/6/24

It was reported by West Sound that he found a sub-contracting job at the shipyard making \$51.50 an hour, which was 3 months after he released from KCJ.

He is:

Attending treatment and in compliance

Visitations with his kid

The mother of his child is also seeking help drug treatment

Female – Age 38

She was first booked at Kitsap County Jail in 2005, when she was 21 years old for forgery. She has been booked a total of 46 times at Kitsap County Jail with charges from Driving Under the Influence, FTA's, Theft, Criminal Trespass, and most recently Arson. A few years back she was an enrolled participant with a tribal reentry program and was unsuccessful due to the severity of her mental health.

Kitsap County Jail Reentry has met with her numerous times. She was booked twice in 2019, and once in 2020, 2021, 2022, and 2023.

Back in 2021, a Scarlet Road advocate met with her while in custody at Kitsap County Jail. The advocate reported, "She has been in and out of jail many times, and she was desperate to make a change. She was released, but struggled to connect to stabilizing resources, and ended up back in jail. Determined to try again, she connected with Scarlet Road through the jail again. With support from both Scarlet Road and REAL team, she went to inpatient treatment, and successfully made it through. She has been out of inpatient for two months now and is enthusiastically engaged in her treatment program. She lives in sober living, has engaged in her church community, and has reconnected with family. She is engaged in Scarlet Road's Aftercare program and is working towards goals. She stated that she has never been sober this long before, and that she feels good. She even had a triggering event recently when a friend passed away, and she was delighted at how she was able to regulate herself rather than relapse".

Unfortunately, she returned in 2022 and KCJ Reentry did a lot of wraparound services for her at that time.

Reentry Services:

During her last incarceration here, she was screened for Reentry services near the end of July 2023. Since she was charged with Arson, we were not sure if she would be doing any prison time. However, we still did the referral for mental health services and had her fill out paperwork for DSHS. She was seen by West Sound Real Team and by Scarlet Road a couple of times. She was trying to get accepted for Behavioral Health Court and if denied wanted to apply for Drug Court.

After 3.5 months in custody, she was released from KCJ early November 2023 and sentenced to 14 months in prison for Arson.

6/24/24

It was reported that she has released after serving around 8 months in prison. She has been doing very well for the last 2 months. She has remained in compliance with her housing, reports to Department of Corrections, and participating in Mental Health services.

The fact this gal shows up for Mental Health services

and checks in with DOC is a huge success for her!

Working with Agape' Treatment and in their transitional Housing

Male – Age 31

He started using and dealing drugs in his early teens and was first booked at Kitsap County Jail at the age of 18. Since then, he's been incarcerated 17 times at KCJ. His charges have ranged from minor in possession, Aslt 4, Escape from Community Custody, DUI, Criminal Trespass, and numerous FTA's.

He was engaged with a Tribal Reentry program a few years ago and stated that was the first time I was clean for almost a year. During that time, he was enrolled in the Welding Program at Olympic College, working in Seattle, and renting a private shared place. He started using drugs again and went back to his old habits.

He was at KCJ one time in August 2021 and served 23 days. KCJ Reentry met with him and provided him wraparound services when released. Then between January - July of 2023, he was booked into Kitsap County Jail four times. Reentry met with him and each time we gave him resources and hooked him up with appointments and services. During his last stay, KCJ Reentry services decided to refer him to a different treatment provider and connect him with male team member of Agape' Real for services. We felt that he needed a different team to work with him than prior. He was released from incarceration to in-patient treatment late September of 2023. He graduated after 1mo of treatment and stayed with his parents for a couple months until housing became available with Agape'.

April 24, 2024

I spoke with him directly and he reports; I am doing good. For the last 5.5 months or so, I have been living in Agape' Housing, engaged with outpatient treatment and I am still enrolled with the MAT Program. I am also in the process of applying for college again. I plan to start again when the new year comes in 2025, and I want to finish the Welding Program at Olympic College.

June 2024

It was reported by Agape' that he is doing extremely well! He is still engaged in services and now in OP (outpatient services) and living in their transitional housing. He will be graduating treatment in a month or so. When we last spoke near end of April, he was scheduled to start back in college January of 2025.

I was informed by the Real Team members, that he started back at Olympic College in the Welding Program early for the summer quarter 2024. It has been well over a year since he was last college. The last time this person was booked here at KCJ was 12 months ago!

Agency: Kitsap County Sheriff's Office

Program: POD

\$350,000

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter. If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

This past quarter has brought forth several challenges. We initially had 4 officers hired under this grant, leaving only three openings. We appeared to be on track and then in the last two months we had nine officers leave the agency, four to patrol, two retired, two went on to other professions and one did not pass probation.

Additionally, we do not have a robust candidate pool to hire from. With nine openings under the general fund and three more under the grant, we decided that it would be best if we paused the reentry pod and focused on hiring officers to cover regular operations, which is essential. The decision was not easy, and the four that we hired had begun their training to become high quality corrections officers and continue to care for those that suffer from behavioral health issues, but not in the reentry pod. We didn't feel it was right to ask the committee to put aside a large amount of money for this pod, when we realize, it is going to take at least another year to be fully staffed. We are looking at another option, which is a reentry officer that can escort people to a class and monitor as we have done in the past before the pandemic.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

Our reentry team collaborates with:

New Start

KMH-Trueblood

KMH-Jail Services

KMH-Peer Pathfinder
Road To New Beginnings
Coffee Oasis
Veteran Services
P-Cap
KRC
Agape
DSHS
Housing Solutions:
Scarlett Road
REAL Program
West Sound-Supportive Housing & Behavioral Health Liaison Services
Tribal Wellness
Coordination with MCO's (United Health, Moina, Coordinated Care, CHPW, WLP) & HCA
Peninsula Community Health Services (Referrals)
North Kitsap Recovery Resource Center
YMCA (Referrals and/or coordination)
WorkSource Referrals/coordination/visits
The Health Care Authority

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

We continue to seek grants to help offset the costs of reentry services.

Success Stories:

Working with West Sound & in New Start Housing

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Trespass, and most recently Arson. A few years back she was an enrolled participant with a tribal reentry program and was unsuccessful due to the severity of her mental health.

Kitsap County Jail Reentry has met with her numerous times. She was booked twice in 2019, and once in 2020, 2021, 2022, and 2023.

Back in 2021, a Scarlet Road advocate met with her while in custody at Kitsap County Jail. The advocate reported, " She has been in and out of jail many times, and she was desperate to make a change. She was released, but struggled to connect to stabilizing resources, and ended up back in jail. Determined to try again, she connected with Scarlet Road through the jail again. With support from both Scarlet Road and REAL team, she went to inpatient treatment, and successfully made it through. She has been out of inpatient for two months now and is enthusiastically engaged in her treatment program. She lives in sober living, has engaged in her church community, and has reconnected with family. She is engaged in Scarlet Road's Aftercare program and is working towards goals. She stated that she has never been sober this long before, and that she feels good. She even had a triggering event recently when a friend passed away, and she was delighted at how she was able to regulate herself rather than relapse".

Unfortunately, she returned in 2022 and KCJ Reentry did a lot of wraparound services for her at that time.

Reentry Services:

During her last incarceration here, she was screened for Reentry services near the end of July 2023. Since she was charged with Arson, we were not sure if she would be doing any prison time. However, we still did the referral for mental health services and had her fill out paperwork for DSHS. She was seen by West Sound Real Team and by Scarlet Road a couple of times. She was trying to get accepted for Behavioral Health Court and if denied wanted to apply for Drug Court.

After 3.5 months in custody, she was released from KCJ early November 2023 and sentenced to 14 months in prison for Arson.

6/24/24

It was reported that she has released after serving around 8 months in prison. She has been doing very well for the last 2 months. She has remained in compliance with her housing, reports to Department of Corrections, and participating in Mental Health services.

The fact this gal shows up for Mental Health services and checks in with DOC is a huge success for her!

Working with Agape' Treatment and in their transitional Housing

Male – Age 31

He started using and dealing drugs in his early teens and was first booked at Kitsap County Jail at the age of 18. Since then, he's been incarcerated 17 times at KCJ. His charges have ranged from minor in possession, Aslt 4, Escape from Community Custody, DUI, Criminal Trespass, and numerous FTA's.

He was engaged with a Tribal Reentry program a few years ago and stated that was the first time I was clean for almost a year. During that time, he was enrolled in the Welding Program at Olympic College, working in Seattle, and renting a private shared place. He started using drugs again and went back to his old habits.

He was at KCJ one time in August 2021 and served 23 days. KCJ Reentry met with him and provided him wraparound services when released. Then between January - July of 2023, he was booked into Kitsap County Jail four times. Reentry met with him and each time we gave him resources and hooked him up with appointments and services. During his last stay, KCJ Reentry services decided to refer him to a different treatment provider and connect him with male team member of Agape' Real for services. We felt that he needed a different team to work with him than prior. He was released from incarceration to in-patient treatment late September of 2023. He graduated after 1mo of treatment and stayed with his parents for a couple months until housing became available with Agape'.

April 24, 2024

I spoke with him directly and he reports; I am doing good. For the last 5.5 months or so, I have been living in Agape' Housing, engaged with outpatient treatment and I am still enrolled with the MAT Program. I am also in the process of applying for college again. I plan to start again when the new year comes in 2025, and I want to finish the Welding Program at Olympic College.

June 2024

It was reported by Agape' that he is doing extremely well! He is still engaged in services and now in OP (outpatient services) and living in their transitional housing. He will be graduating treatment in a month or so. When we last spoke near end of April, he was scheduled to start back in college January of 2025.

I was informed by the Real Team members, that he started back at Olympic College in the Welding Program early for the summer quarter 2024. It has been well over a year since he was last college.

The last time this person was booked here at KCJ was 12 months ago!

Agency: Kitsap County Superior Court

Program Name: Adult Drug Court

\$636,409

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

-We worked with 136 participants this quarter.

-45% or 55 participants have received Mental Health treatment this quarter.

-2.9% or 4 participants were discharged this quarter.

-4.4% or 6 participants graduated this quarter.

-53% or 72 participants have received MAT this quarter.

-100% of all program participants have met with our Ed/Voc Navigator within 90 days of admission into the program.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

None this quarter to report.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

We continue to explore Federal Grants and will apply as soon as the restrictions regarding what charges we can accept is modified so that our census does not decrease. We also just applied for a continuation of our HIDTA funding.

Success Stories:

Several of our Durg Court graduates have become certified as Peer Support professionals so that they can give back to our Kitsap community by helping people access treatment.

Our Alumni Association has started up sober softball, basketball, and fishing. The Softball and basketball teams play other sober teams in the area. Sober fishing was started by a graduate who loves to fish, and several current participants participate in that. One of our graduates was hired as a Treatment Assistant at KRC.

Agency: Kitsap County Superior Court

Program Name: Veterans Therapeutic Court

\$85,775

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

-We had 16 participants enrolled this quarter, and 3 new admissions.

-We had 1 discharge this quarter, or 6.2%.

-We had 1 person graduate this quarter.

-100% of program participant are screened using ASAM criteria.

-100% of all participants who screened as needing SUD treatment and were placed in treatment within 14 days of admission.

-100% of program participants' treatment plans are updated every 90 days.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

We were invited to give an overview of the Veteran's Treatment Court to the Kitsap County Veterans Advisory Board meeting. Members had lots of questions and were very supportive. We also asked if anyone would like to work with the Court to be a mentor for participants in the VTC. We stressed the need for female mentors. We then proceeded to have a participant/mentor "Meet and Greet" where mentors told their stories and military background and how they could help support participants. Participants were very receptive and phone numbers were exchanged. There is not at least one mentor at all VTC court sessions, and we hope to build a robust cadre of mentors from the community and also invite VTC graduates to become mentors as well.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

We continue to explore Federal Grants and will apply as soon as the restrictions regarding what charges we can accept is modified so that our census does not decrease. We also just applied for a continuation of our HIDTA funding.

Success Stories:

Our graduate this quarter was one of the first recipients of the Shelton tiny home community just built for homeless Veterans. He has also obtained the training to be a Peer Counselor and help others in the community access treatment and VA services.

Agency: Kitsap Homes of Compassion

Program Name: Housing Supports

\$300,000

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

We have fully integrated into the North Kitsap Resource Center. We are providing MH services there 2 days a week to N. Kitsap residents.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

Our work in Poulsbo is increasing and we anticipate having another staff person there 2 days a week for a total of 4 days week, beginning in September. We have been doing more collaborative work on Bainbridge Island with Helpline House.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

Our work in Poulsbo will eventually lead to contracted services. Which will help to create sustainability. We continue to work towards credentialing and contracts with our local MCO's. This would allow us to bill for services provided to Medicaid clients. Unfortunately, we are paused in adding new FCS clients.

Success Stories:

We have a programmatic success story related to a 43 year old female that chose to leave an adult family level placement to live independently. We have attempted to accommodate her in three homes over 1.5 years. Now our MH team are working to get her placed back in a higher level of care due to personal safety and the safety of others in the home. This is a success, because we gave someone an opportunity at independence and then were able to coordinate with multiple partners to ensure that she continues to be housed, but at a higher level of care.

Agency: Kitsap Mental Health Services

Program Name: Pendleton Place

\$200,000

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

We continue to provide supportive services to residents at Pendleton Place. We have 43 of 69 residents engaged in MH care, 10 of 69 engaged with SUD TX, and 62 of 72 engaged with PCP. We have met all objectives this quarter.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

We have worked with Bremerton Foodline to get senior commodities delivered, PCHS provides PCP services in our building, Kitsap Harvest is now providing fresh fruits and vegetables due to the seasonal availability. We continue to work with Bremerton Housing Authority as our property manager and to assist residents to move into an outside rental with housing choice vouchers after they move on from Pendleton Place. We also partner with MPSS Security to ensure safety on our property

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

We continue to seek funding by applying for all grants we qualify for. We also continue to obtain reimbursement through Foundational Community Supports for providing housing support services to qualified individuals. We have also sought and gained CIAH funds for Pendleton for 2024 calendar year.

Success Stories:

We have a resident who has been a patient with Kitsap Mental Health Services on and off since 1997. He struggles with stability and has been unhoused for many years, sometimes staying in sheds on private property. Since moving into Pendleton Place, he has been on and off with his mental health engagement and taking his meds. He has had issues with compliance with housing due to outbursts which we identified was due to him being unmedicated. We have been able to get him re-engaged with his provider and have his medications shipped here so that it is easier for him to take them. We are noticing marked improvement from him and are hopeful he will stabilize again and retain his housing.

Agency: Kitsap Public Health District

Program Name: Nurse Family Partnership

\$190,000

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

We have learned about and adapted our programs throughout this quarter to increase our engagement and retention. Beginning in May, we started offering Mama Moves Kitsap weekly in a consistent location and are finding that parents are more engaged in our support groups when they occur more regularly with a central location. During this quarter, we have been transitioning one of our NFP nurse home visitors to the management position. During this time, we have completed warm transfers of clients to other nurse home visitors, retaining them in the program. We have also hired to replace the vacant position. Throughout this transition, we have maintained caseloads, continued to graduate clients, and enrolled new clients to the program.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

Along with our CHW, we have a new public health educator who is contacting local mental health partners to maintain and update our community resource list for these services. During a monthly staff meeting we invited Flying Bagel, a local counseling agency that focuses on targeted short term intervention using ABC (Attachment Biobehavioral Catchup) to learn more about each program to increase referrals. Relationships with other home visiting agencies within the county have been strengthened by a Home Visiting Collaborative monthly meeting in

which resources and flyers are shared. Participants including representatives from Flying Bagel Counseling, OESD Head Start/Early Head Start and Parent Child Assistance Program (PCAP) which supports mothers who have used substances during pregnancy.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

KPHD continues to work on sustainable funding for the NFP program. We have found funding from different sources, use agency resources when needed, and are also researching additional grants and longer-term funding sources (like levies).

We have been having ongoing conversations with Healthy Start Kitsap (a nonprofit specifically begun to support the development of a program to decrease child abuse and neglect, which later partnered to bring NFP to Kitsap) within the Kitsap Community Foundation.

NFP National locates a government affairs manager in WA; this role builds new sources of support and partners with state agencies as they explore funding for home visiting through Medicaid and in partnership with Managed Care Organizations. This advocate for home visiting funding and policies at the state level helps to expand coverage to holistically support optimal maternal and infant outcomes with wrap-around support services.

Success Stories:

When Ashley signed up for NFP over 2 years ago, they were highly anxious about giving birth and becoming a parent. During NFP visit, most of the time was spent on the mental wellbeing of this client and anticipatory guidance and planning about support after their baby was born. Together with their NFP nurse, Ashley thoughtfully wrote their birth preferences and postpartum support plan to ensure that they felt supported and well informed during this huge life event. A few days after their birth during a visit, this client spoke about their birth story which included a hospital admission and unexpected c/section with the client describing the experience as traumatic. Through many NFP visits during the first year after birth, the nurse provided active listening, mindfulness techniques, and resources for therapy services to process and accept the events surrounding the birth. The client was able to establish care with a therapist she felt connected to, while utilizing the mindful tools from their NFP nurse and remembering the importance of self-compassion, leading to an improvement in their overall wellbeing. At a recent graduation, time was spent reflecting on their past experience as well as their current state of feeling bonded with their child, the ability to access resources for emotional wellbeing, and being well supported through family and friends.

Agency: Kitsap Recovery Center

Program: Person in Need ~ PIN

\$242,335

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

Our newest PIN team member has gotten up to speed rapidly and we are currently working a better format for reporting that is more intuitive. We have created some better resources for help outside the County for our higher MH clients and have been actively working on creating working partnerships with these and other entities as well.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

As stated above, we have been reaching out to other entities and actively seeking partnerships with them. As we establish new resources, we are testing them and sharing the results with the rest of the County team.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

We haven't made any headway on this so far this year.

Success Stories:

During this quarter, we engaged with an individual who worked very hard to stay engaged with finding and participating in treatment services, despite many challenges. He did not complete the first IIP episode we helped facilitate, however, after leaving that episode, he stayed in regular contact with the team, and continued to talk with us about his challenges, worked with us to collaborate and develop his personal goals, and made regular

effort to continue to stay in contact, not only responding to requests for check-ins, but also reaching out on his own to talk about how things were going for him. For this participant, being able to work with SUDPs appeared very impactful, because working with a counselor afforded him the opportunity to process his experiences, look at how to plan for barriers he'd encountered in the past, and request re-direction or support when needed. This participant utilized a very full range of what the PIN team has to offer. In addition, other agencies collaborated and communicated well with our team in regard to this participant, which was very helpful, especially for the benefit of the participant, when he was moving between locations and services, and in helping keep us informed of progress and continued needs.

Agency: Kitsap Rescue Mission

Program Name: On site Mental Health Services

\$260,694

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter. If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

YTD an average of 33% of shelter guests report experiencing mental health conditions, and 14% report experiencing SUD's. An average of 36% of our total population in shelter is engaged in MH treatment and 11% are engaged with the SUDP.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

KRM Continues to partner with Agape Unlimited, MCS Counseling Group, Peninsula Community Health Services and the Housing Solutions Center. We continue to work closely with Skookum and Goodwill Industries programs who provide case managed employment. We actively share about the mission and our work through presentations in the community and have ramped up our social media communications.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

We have developed and are actively rolling out our KRM Development Plan. Weekly videos and communications are being pushed out to our donors via our new View Spark platform. Our monthly mail appeal continues. Quarterly donor updates have ensued via zoom, and we continue to research grants for behavioral health support.

Success Stories:

An African American single mother with 6 children ages 1-13 recently (one with special needs), entered shelter at KRM after being asked to leave another community shelter and couch surfing with her children. She had no permanent place to stay and she struggled with untreated mental health diagnosis. After participating in a mental health assessment with the KRM LMHC, she was able to receive the therapy and support she needed to become stable and look toward her future. Working alongside the KRM Housing Navigator and Kitsap Legal Services, the guest was able to settle a prior eviction case and has now secured a 3 bedroom unit with help from a Section 8 voucher. We are so excited for this guest as she begins her new life and will continue to support her for 45 days after leaving shelter to ensure she is able to maintain her wellness and effectively run her new household.

Agency: Olympic Educational School District 114

Program Name: In Schools Mental Health Project

\$600,000

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter. If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

The OESD achieved program goals:

The projected number of elementary, middle, and high school students served is 407 for the grant cycle; to date 410 students (169 elementary, 133 middle school and 108 high school) have been served. In addition to the 410 students served, staff reported 199 drop in visits by students in need of crisis intervention, brief support and/or

information.

Note: The above information includes data from Ridgetop MS, Fairview MS, Woodlands Elementary and Pine crest Elementary; the services at these schools are currently funded by District ESSER dollars through June 2024.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

Professional Development for Schools:

A Crisis Response Training was provided to school staff in Bremerton SD on 5/15/2024. This course is geared for assisting school counselors and other crisis team members to be better prepared when responding to a crisis. This training provided:

- An opportunity to learn key crisis counseling skills and strategies for hosting a counseling support care station.
- An overview of the core components of psychological first aid (an evidence informed approach to helping student and family in the immediate aftermath of a disaster/crisis) with an opportunity to practice.
- A sample information packet for parents and teachers; and
- Information on how to conduct an operational review of the response, document lessons learned and prepare for follow up.

The OESD offered one staff training this quarter focused on strategies to teach self-awareness and self-regulation skills. Mindfulness tools and mindful movement activities that used when working with students impacted by their own behavioral health issues or others were explored.

Crisis Counseling Response:

The OESD coordinates and responds to tragic incidences that impact a school (i.e. car accident resulting in death of a student/students, suicide, drug overdose, death by violence). For this quarter, there were one coordinated effort for multiple days where OESD staff were mobilized and provided counseling support.

Committee Work:

The OESD staff continued participation on Kitsap County Suicide Awareness and Prevention Group, North Kitsap and Bremerton Community Prevention Wellness Coalition meetings and the regional Youth Marijuana Prevention Education Program.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

The OESD has completed a SWOT (strengths, weakness, opportunities, and threats) analysis and submitted for treatment licensing in May 2024. It takes several months before the license is awarded; and additional steps are required (i.e. obtaining electronic record keeping, hiring clinical supervisor, securing manage care organizations agreements) before the treatment services become available. It is also important to note, even if the OESD becomes licensed; only partial delivery of services will be eligible for reimbursement through Medicaid billing. The MHCDTCP grant funding is filling the gap in services to address prevention and early intervention of BH issues. These services generally do not meet the criteria for reimbursement.

Success Stories:

Secondary Program:

1. The Student Assistance Professional (SAP) was approached by a student who wanted to quit vaping. The SAP began worked through the Vaping Education/Intervention curriculum, built a quit plan, and the student has been vape free for 2 weeks.
2. The SAP received a phone call from a parent to share that they have noticed a huge shift in the student for the better. The parent shared the student is more social at home, talking to both more openly about their feelings and about their life/friendships/school day/etc. Overall, the students' demeanor has been more emotional rather than flat as it was before. The student also shared some things they have learned through services, specifically "ANT" thoughts (Automatic Negative Thoughts) and when they are stuck in a "thinking spiral" (thinking traps).

Elementary Program:

1. The MHT has been working with this student since December 2023. The initial referral mentioned suicidal ideations with a plan and intent, with involvement with Y-MCOT. In addition, the student endorsed disordered eating concerns, sharing that she ate less than 1 meal a day and felt fatigued/nauseous while in PE. Sessions focused on safety planning, building rapport, and finding the root of the depressive symptoms, motivations for change and disturbance in the experience of shape and weight. The MHT provided psychoeducation to understand what could happen from not eating and the psychological and medical consequences. In addition, replacing all-or-

nothing thinking and the development of new sources of self-esteem and enhancement of interpersonal skills was introduced. Positive affirmations that involve healthy body talk/body positivity were practiced. Through time, the student developed interests in art, music, spending time with friends, and looking forward to middle school. The student reports eating three healthy meals daily and is active in PE without feeling ill.

2. The Mental Health Therapist (MHT) began working with a student at the beginning of the school year, after having an emergency drop in meeting at the end of last school year. At that time, the student expressed suicidal ideation at school. Last year, following the death of their mom, the student expressed high anxiety and suicidal ideation. The MHT created a safety plan with student and her Father to ensure the student could stay safe, and informed school staff of the safety plan as well. The MHT provided lots of psycho-education about grief and anxiety to help the student understand her experience and feelings. The MHT worked with the student over the year using art and CBT therapy to help express and process her feelings around her mom's death. The student has reported no suicidal ideation this year, has developed coping skills for her anxiety and regularly expresses positive thinking to challenge her worries. The student is engaged with friends and school and her teacher reports that she is upbeat and doing well in class. The student also has shared feeling excited and ready to go to middle school next year.

Agency: One Heart Wild

Program Name: Animal Assisted Therapy

\$62,224

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

We are exceeding our goals for unduplicated clients seen. Our primary organization goals are to reduce the number of clients accessing grant funding to be seen by transitioning them to insurance. We are making steady progress on getting through the process of each therapist being credentialed with all local providers.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

We work closely with two of the highest risk schools in our region. We remain committed to being onsite at schools to reduce barriers for students accessing care. We have strong referral relationships with KMH, many of the hospital units serving youth, and we have developed new relationships this year with agencies providing inpatient care to youth. This has benefited us in being able to advocate and hand-off clients needing this level of care. One of our critical growth goals is to hire a case manager to serve so many of our clients who need additional support accessing many basic life needs, including accessing medical insurance.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

We set a goal this year to write two grants per month and have exceeded that goal to date. However, the grant market is more competitive than ever and while we have had successes, we will need to continue to learn and strategize how to be even more competitive in the future.

We are making great progress in getting our therapists paneled with insurance companies and moving clients over to that payment method. We have the clinical team currently able to bill 5 insurance companies and all of the rest are in process for each clinician. Most of the insurance companies have months log backlogs for credentialing.

We have completed a \$600,000 renovation project with Department of Commerce grant funds that includes building three new counseling cottages onsite (our first inside counseling spaces for clients). This will help us accommodate growth of our clinical team.

We have created a strong internship program for master's level mental health students in their final year. We currently have two interns working with us, one finishes in December, and one finishes next May. Interns go through our ROOTS Institute training program to learn the specialty of providing animal assisted therapy. These interns become excellent clinical staff prospects. We plan to hire our intern who finishes in December part-time in January.

With our BHA license, we can now have our master's level associate therapists obtain their Agency Counselor license while they are working to obtain the necessary hours to sit for their final licensing exam. The Agency

Counselor license allows us to access insurance billing under supervision - further increasing our earning potential.

Success Stories:

We are still a small and growing behavioral health agency. Our greatest success is the fact that we are still here and still finding our way to serving those in our community with the greatest needs and who face the most barriers.

Agency: Scarlet Road

Program Name: Specialized Rental Assistance

\$100,000

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

In Quarter 2 of 2024, Scarlet Road served 19 survivors of sexual exploitation through robust, wraparound case management. Through this grant funding in quarter 2, two adult survivors received lifesaving and empowering housing support. 84% of survivors engaged in therapeutic support, 55% accessed employment services, and 47% participated in Scarlet Road facilitated groups in order to work through their histories of trauma and to grow in their knowledge of resources, as well as to reduce triggers, and implement lasting coping skills and overall well-being. Mobile advocacy, connection with community resources, and assistance in navigating complex systems were offered to each client.

There are no needed changes to the evaluation or scope of work at this time.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

Scarlet Road continues to work with our partners in incarceration settings to support individuals in detention as well as those entering back into our community. Due to success seen with the screening tool, we have begun the process of implementing additional questions in classification at the jail to ensure that every person coming into the Kitsap County jail will be screened for sexual exploitation. This will not only help us connect with survivors further but will also increase our understanding of the severity of the issue by gathering much needed data. We continue to see high numbers of men and women in the jail respond to the KITE and request to meet with our advocates. Additionally, we connected with 3 survivors at our newly partnered facility, Mission Creek Corrections Center for Women.

The Scarlet Road brochure explaining available services at an accessible reading level for survivors of exploitation has been completed and distributed throughout the community. This brochure has been translated into 7 languages common in Kitsap County. Scarlet Road also printed and distributed flyers in the community to increase visibility of our services and people have since reached out for services. In Quarter 2, we provided support and training to the S'Klallam Tribe and connected with many other service providers to increase awareness of Scarlet Road's services within marginalized and vulnerable groups. Lastly, we hired a Spanish speaking advocate to better serve our Spanish speaking community.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

On May 18, Scarlet Road held our annual Restoring Hope Gala and raised over \$129,000 and had 6 sponsors. The gala created opportunity for connection with new people and established long term partnerships and monthly donors. In Quarter 2, Scarlet Road received grants to upgrade security and locks as well as technology through the Forest Foundation (\$5200) and the Rotary Club of Bremerton (\$500).

Success Stories:

Claire* had experienced sexual exploitation and trafficking at numerous points in her life through both her family and through organized crime rings. Her exploitation was broadcasted on online platforms further compromising her wellbeing and safety. A local community provider referred Claire over to our services and we began to work through her healing and goals. While she was temporarily housed, she wanted to find more permanent safe housing and work toward stability and self-sufficiency. A few months after she entered our program, we were able to assist her in finding a home and helped to pay for a deposit and first month of rent as well as find furniture to

furnish her space. With the stability of a home, she has been able to get important paperwork in order, establish a bank account for the first time, and work through her trauma with a therapist.

*name changed for confidentiality

Agency: Westsound Treatment Center

Program Name: New Start

\$387,741

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

Reflecting on the evaluation results and overall program efforts for this Quarter, several key achievements stand out that underscore the success and effectiveness of our services.

Achievements:

Comprehensive Care Provision: A significant accomplishment this quarter is that the program has been able to provide care for 100% of the clients assessed by WSTC. This demonstrates our exceptional capacity to meet the needs of every individual seeking support, highlighting our program's efficiency and commitment to ensuring that no client is left without the care they require. Our services are designed to accommodate a wide range of needs, affirming our ability to address the diverse requirements of our client base.

Effective Referral and Follow-Up Processes: The referral process has been highly effective, with only 5 clients being referred to level 3.5 (inpatient care). This low referral rate indicates that the majority of clients' needs are met within the levels of care provided by WSTC. Furthermore, WSTC's openness to providing follow-up care post-inpatient treatment underscores our dedication to continuity of care. Clients who were recommended to levels .5, 1.0, or 2.1 were successfully supported within our available services, demonstrating our capability to offer appropriate and targeted care.

Successful Engagement and Outreach: The New Start Navigator has played a pivotal role in client engagement this quarter. Notable accomplishments include:

Securing outpatient appointments for 20 unique individuals, reflecting effective case management and client scheduling.

Establishing contact with 22 unique individuals through proactive outreach efforts, which underscores our program's commitment to reaching and assisting those in need.

Making 17 unique re-engagement attempts with discharged clients, showcasing our dedication to maintaining support and connection with individuals who have previously benefited from our services.

Overall, the program has successfully provided services for 99.99% of all participants who desired our support this quarter. This near-total service provision rate highlights the program's exceptional ability to meet client needs and its overall effectiveness in delivering comprehensive care. Our achievements in care provision, effective referrals, and proactive engagement demonstrate our ongoing commitment to supporting our clients and addressing their needs efficiently and comprehensively.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

In this quarter, our collaborative efforts and outreach activities have effectively employed collective impact strategies to enhance service delivery and support for our clients. These efforts reflect a strong network of partnerships and a comprehensive approach to addressing client needs.

Collaborative Efforts:

Partnership Development: A key initiative this quarter involved the CEO working to establish an exclusive partnership with a Medication-Assisted Treatment (MAT) provider. Out of 49 people assessed, 32 were found eligible for MAT services. This partnership aims to integrate MAT more seamlessly into our service offerings, ensuring that clients who require these critical services can access them conveniently and efficiently.

Coordination with Housing Case Managers: Our Housing Case Managers have made significant strides in supporting residents by collaborating with various outside services. All 22 residents received assistance in

connecting with these external resources, demonstrating our commitment to providing holistic support that extends beyond immediate service needs to address broader aspects of clients' lives.

Outreach Activities:

Comprehensive Resource Provision: A total of 96 clients were outreached via email, receiving a diverse array of resources tailored to their needs. These resources included:

Referrals to REAL TEAM and SABG &/OR Liaisons for specialized support.

Connections to Mental Health Services, MAT services, and primary care providers.

Access to Harm Reduction Suppliers and online support groups (AA, NA, ACA, OA, CA, GA, CODA).

Information on housing options, emergency assistance (blankets, meals, clean water), and opportunities to participate in surveys for tracking needs and progress.

Utilization of External Organizations: Our outreach was bolstered by collaborating with a wide range of outside organizations. These collaborations facilitated referrals and extended our network of support, including:

DSHS (Department of Social and Health Services)

Housing Solutions

Pierce Co. Services

PCHS (Pierce County Human Services)

KMHS (Kitsap Mental Health Services)

ABHS (Associated Behavioral Health Services)

Benedicts House

DC (Drug Court)

DOC (Department of Corrections)

Pathways

Agape TR

James Oldham

KRC (Kitsap Recovery Center)

MAT (Medication-Assisted Treatment)

These collective impact strategies illustrate a coordinated effort to leverage partnerships, enhance resource availability, and improve client outcomes. By integrating services and utilizing a broad network of external organizations, we have been able to address a wide range of client needs comprehensively and effectively.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

To secure sustainable income sources, we have adopted a strategic approach encompassing private, local, state, and national funding avenues, reflecting our commitment to enhancing or replacing program elements and funding wherever possible.

Private Sector Initiatives:

We actively seek partnerships with private sector entities, including local businesses and philanthropic foundations. Our efforts involve leveraging corporate social responsibility (CSR) programs and applying for grants from private foundations aligned with our mission. Discussions with local corporations for sponsorships and in-kind donations are ongoing, and we are tailoring grant proposals to match private funders' priorities.

Local Funding Efforts:

Locally, we have strengthened ties with municipal and county governments to access funding opportunities. We have applied for local grants and engaged in community funding initiatives supporting health and social services. Expanding our local fundraising events and campaigns is also a priority, aimed at raising both financial support and community awareness.

State-Level Opportunities:

At the state level, we work closely with state agencies to identify and secure relevant funding. Applications for state grants focus on mental health services, substance abuse programs, and housing initiatives. We maintain communication with state legislators and policymakers to stay updated on funding opportunities and legislative developments, and we explore participation in state-funded pilot programs for additional support.

National Funding Sources:

Nationally, we target major federal grants and programs aligned with our service areas, such as those from the Substance Abuse and Mental Health Services Administration (SAMHSA) and the Department of Health and Human Services (HHS). We also seek collaborations with national non-profits and advocacy groups offering funding for program expansion and innovation, and we explore opportunities within national health initiatives and research grants.

Our diversified approach across private, local, state, and national levels aims to secure the resources needed to sustain and advance our programs, ensuring we effectively meet the needs of our clients.

Success Stories:

This quarter, the New Start Navigator has made notable strides in supporting participants, resulting in significant success stories. Key achievements include:

Engagement in Services: Several participants have made substantial progress by engaging in various treatment and support services. Noteworthy successes involve clients actively participating in mental health (MH) services and medication management, securing a place in the Drug Court (DC) program, and attending outpatient (OP) appointments regularly. These achievements highlight the Navigator's effective facilitation of access to critical services.

SMART Goals and Progress Tracking: The Navigator has meticulously logged client progress, creating SMART goals to address both achievements and barriers. Achievements include clients successfully engaging with MH services and being accepted into Drug Court, showcasing improved treatment adherence and judicial support.

Addressing Barriers: While challenges remain, including unmet needs for intensive inpatient beds, transportation issues, anger management symptoms, and inconsistent medication management, these barriers are also considered successes. By documenting and addressing these issues, the Navigator enables targeted intervention strategies to overcome obstacles and enhance overall treatment outcomes.

In summary, the Navigator's efforts this quarter illustrate substantial progress in participant engagement and service access, with a proactive approach to addressing barriers, ultimately driving successful outcomes and improved intervention planning.

This quarter, a remarkable success story emerged from the efforts of our New Start Team, highlighting significant progress for a participant born in the 1980s. This individual, who is actively engaged in treatment and residing in our supportive housing, is also caring for a young child within the same facility.

The participant has struggled with an addiction to opiates and methamphetamines. They self-described their addiction as "chaotic," often nodding out due to excessive opiate use. Despite multiple attempts at abstinence and expressing a desire for a better life, the participant faced substantial challenges. A recent trauma led to a relapse, exacerbating their already unmanageable substance use, which they described as uncontrollable. They also reported approximately 15 separate criminal charges, either guilty or pending, adding complexity to their situation. The participant has a history of being in prison and jail.

However, the progress achieved this quarter underscores their determination and the effectiveness of the support provided. The participant has actively engaged in their treatment plan, attending outpatient appointments and consistently working towards their recovery goals. The New Start Team's role has been pivotal in helping them access necessary resources, including mental health services and wrap-around services.

One of the most notable successes is their ongoing involvement in our housing program, which provides stability and a safe environment for both the participant and their young child. This housing stability is crucial in their recovery journey, offering a foundation upon which they can rebuild their life.

The New Start Team has diligently recorded these achievements and barriers, including the participant's commitment to improving their circumstances despite the challenges. Our real-time tracking allows for targeted interventions and continued support, addressing both immediate needs and long-term goals. The participant's story is a testament to their resilience and the impactful role of our services in facilitating meaningful progress and recovery.

At West Sound, our collective commitment reflects our deep dedication to this work. We recognize that overcoming barriers in treatment is a worthy struggle, and we take immense pride in the progress of each

individual we serve. Regardless of the number of relapses or challenges faced, we remain steadfast in our support. At West Sound, we are committed to offering unwavering services and providing the comprehensive care that this individual, and many others, rightfully deserve.

Agency: Westsound Treatment Center

Program Name: Resource Liaison

\$387,741

Reflecting on evaluation results and overall program efforts, describe what has been achieved this Quarter.

If objectives went unmet, why? Are there any needed changes in evaluation or scope of work?

This Quarter, we achieved all objectives successfully, with 43 release plans completed for inmates, ensuring their smooth reintegration into the community. Our comprehensive approach was supported by a diverse range of services, including domestic violence (DV) support, drug court assistance, and access to essential medical care like thyroid doctor appointments and Medicaid insurance. Additionally, employment and housing support were provided through organizations such as Worksource, Maynard's Employment, Bremerton Housing Authority, and Oxford Housing.

Further, our efforts were reinforced by financial and legal aid through Social Security, SSI, and legal assistance, as well as mental health services from South Sound Behavioral Hospital, Kitsap Mental Health, and Fairfax Behavioral. We also facilitated access to other critical resources, including food banks, service animals, and detox services. While all objectives were met, the increased demand for services highlighted a need for additional funding and staffing. To maintain and potentially enhance our level of service, securing extra resources will be crucial for sustaining our comprehensive support network and ensuring continued success in future quarters.

Briefly describe collaborative efforts and outreach activities employing collective impact strategies.

Our collaborative efforts and outreach activities this Quarter utilized collective impact strategies to provide comprehensive support to individuals. By partnering with a diverse network of organizations, we addressed a broad spectrum of needs effectively. Key collaborators included domestic violence (DV) support, DSHS, and drug court, which played crucial roles in legal and social support. We integrated services from grocery stores, Medicaid insurance, and SSI support to ensure basic needs and financial stability.

Employment and vocational barriers were tackled through partnerships with Worksource, Maynard's Employment, and Goodwill, while housing needs were met with Bremerton Housing Authority, Oxford Housing, and Home of Compassion. Health and wellness were prioritized with services from South Sound Behavioral Hospital, Kitsap Mental Health, and various medical providers including thyroid doctors.

To enhance our impact, we engaged out-of-county supports like Pacific Hope Recovery and Olalla Recovery Centers, and local resources such as Fishline, North Kitsap Resources, and SVDP for volunteering. Essential administrative support, including access to banking and birth certificates, was coordinated through our collaboration with organizations like DOC and Social Security.

This multi-faceted approach allowed us to address complex needs holistically, leveraging each partner's strengths to create a robust support system for those transitioning back into the community.

Please describe your sustainability planning – new collaborations, other sources of funding, etc.

To secure sustainable income sources for our program, we are actively pursuing federal grants and substantial awards on a rolling basis. These funding opportunities are critical to maintaining and expanding our comprehensive support services.

Success Stories:

Individual success story, please note, we have worked to support 108 unique individuals, 1 declined, for a total of 107 served. At a time of inflation, uncertainty, homelessness, liaisons is a success in simply its existence and full operation. We love our work, and the mission, and are grateful for each micro and macro moment of success.

After her release from jail, Maria first checked in with the Department of Corrections (DOC). She then moved on

to re-establish her insurance and complete necessary housing paperwork. Next, she visited the Department of Social and Health Services (DSHS) to set up her benefits.

Returning to her tasks, Maria completed the intake process for both treatment and housing at Fuller House. Each step was essential for her transition, and she efficiently managed the necessary paperwork and appointments to secure her stability and support services.

Program Success Story: Transforming Lives Through Collective Support

This Quarter, our program has achieved remarkable success in addressing the complex needs of individuals reentering society. Through a dedicated network of services and collaborative partnerships, we have significantly impacted the lives of many participants, overcoming barriers and facilitating successful transitions from incarceration to stability.

Our program focused on providing holistic support to individuals facing diverse challenges, including unstable housing, substance abuse, legal issues, and health care needs. Over the past few months, we have worked with numerous participants, each requiring a tailored approach to their unique circumstances.

One major area of success was our housing support. Many individuals faced immediate housing crises, including toxic living environments and homelessness. Our program facilitated connections with key housing resources such as Oxford Housing, Bremerton Housing Authority, and Home of Compassion. We also provided emergency solutions like hotel vouchers and temporary motel stays, ensuring that individuals had a safe place to stay while longer-term solutions were arranged.

Transportation emerged as a critical need for several participants. Many required rides to medical appointments, treatment facilities, and job interviews. Our coordination with local transportation services, including bus passes and rides to essential appointments, ensured that participants could access the services necessary for their recovery and reintegration.

In addition to housing and transportation, our program addressed legal and compliance issues. Participants coming out of incarceration often faced complex legal requirements, including restraining orders and court compliance. We worked closely with legal professionals and the Department of Corrections (DOC) to ensure that individuals understood and adhered to their legal obligations, providing guidance and support to navigate these challenges.

Substance abuse and mental health were significant areas of focus. Many participants needed assistance with Medication-Assisted Treatment (MAT) and mental health evaluations. We connected individuals with treatment providers like ABHS, South Sound Behavioral Hospital, and Kitsap Mental Health, facilitating access to crucial care that supported their recovery and overall well-being. For those needing inpatient care or detox services, we coordinated placements and follow-up care to ensure continuity of treatment.

Employment and vocational support were also key components of our success. Through partnerships with Worksource, Maynard's Employment, and Goodwill, we helped individuals address barriers to employment, such as acquiring necessary job skills and finding stable work. This support was instrumental in promoting financial independence and long-term stability.

Our outreach efforts were extensive, involving connections with a wide range of community organizations. From DV support and Social Security assistance to food banks and service animal providers, we created a comprehensive support system that addressed every aspect of participants' needs. We also worked with organizations like Fishline and North Kitsap Resources to provide additional support, ensuring that no need went unmet.

Throughout this Quarter, we successfully managed the release and transition plans for numerous individuals, offering peer support, treatment assessments, and comprehensive case management. Our collective impact strategy ensured that each participant received the necessary resources and support to overcome barriers and build a stable, productive life.

This collective effort highlights the profound impact of our program. By leveraging a broad network of partners and services, we have transformed the lives of many, facilitating their journey from incarceration to stability and success. As we continue to expand our reach and resources, we remain committed to supporting individuals in their pursuit of a better future.

**Kitsap County Mental Health, Chemical Dependency and
Therapeutic Court Programs Quarterly Fiscal Report January 1, 2024 - December 31, 2024**

| Second Quarter: April 1, 2024 - June 30, 2024 | | | | | | | | | | 2024 Revenue: \$7,811,208.00 | |
|--|-------------------|-----------------|----------|------------------|----------|-----------------|----------|------------------|----------|-------------------------------------|---------------------|
| Agency | 2024 Award | First QT | % | Second QT | % | Third QT | % | Fourth QT | % | 2024 Total | 2024 Balance |
| Agape (AIMS & Navigator) | \$ 124,573.00 | \$ 27,107.60 | 21.76% | \$ 34,033.71 | 34.91% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ 61,141.31 |
| Bainbridge Youth Services | \$ 105,000.00 | \$ 30,000.00 | 28.57% | \$ 40,000.00 | 53.33% | \$ | 0.00% | \$ | 0.00% | \$ | \$ 35,000.00 |
| Central Kitsap Fire (CARES) | \$ 375,000.00 | \$ 8,442.49 | 2.25% | \$ 31,860.09 | 8.69% | \$ | 0.00% | \$ | 0.00% | \$ | \$ 334,697.42 |
| City of Bremerton | \$ 100,000.00 | \$ 0 | 0% | \$ | 0.00% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ |
| The Coffee Oasis | \$ 289,000.00 | \$ 43,787.06 | 15.15% | \$ 52,482.15 | 21.40% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ 192,730.79 |
| Eagles Wings | \$ 300,000.00 | \$ 77,193.76 | 25.73% | \$ 109,555.57 | 36.51% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ 113,250.67 |
| Fishline NK | \$ 95,000.00 | \$ 50,960.00 | 53.64% | \$ 0 | 0.00% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ 44,040.00 |
| Flying Bagel | \$ 200,000.00 | \$ 81,279.33 | 40.63% | \$ 64,944.10 | 49.17% | \$ | 0.00% | \$ | 0.00% | \$ | \$ 53,776.57 |
| Kitsap Brain Injury | \$ 14,387.00 | \$ 1,906.85 | 13.25% | \$ 6,300.10 | 50.48% | \$ | 0.00% | \$ | 0.00% | \$ | \$ 6,180.05 |
| Kitsap Community Resources | \$ 557,800.00 | \$ 204,662.25 | 36.69% | \$ 197,260.07 | 55.85% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ 155,877.68 |
| Kitsap County District Court | \$ 433,762.00 | \$ 96,587.02 | 22.26% | \$ | 0.00% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ |
| Juvenile Therapeutic Courts | \$ 143,192.00 | \$ 31,703.04 | 22.14% | \$ | 0.00% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ |
| Kitsap County Prosecutors | \$ 395,862.00 | \$ 101,829.45 | 25.72% | \$ | 0.00% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ |
| Kitsap County Sheriff's Office CIO | \$ 158,635.00 | \$ 26,439.18 | 16.66% | \$ 66,097.95 | 50.00% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ 66,097.87 |
| Kitsap County Sheriff's Office CIT | \$ 22,500.00 | \$ 0 | 0% | \$ 0 | 0.00% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ 22,500.00 |
| Kitsap County Sheriff's Office POD | \$ 350,000.00 | \$ 16,749.11 | 4.78% | \$ | 0.00% | \$ | 0.00% | \$ | 0.00% | \$ | \$ |
| Kitsap County Sheriff's Office Reentry | \$ 221,094.00 | \$ 46,278.93 | 20.93% | \$ 63,941.12 | 36.57% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ 110,873.95 |
| Kitsap Superior Court (Adult Drug Court) | \$ 636,409.00 | \$ 126,431.91 | 19.86% | \$ | 0.00% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ |
| Kitsap Superior Court (Veterans) | \$ 85,775.00 | \$ 19,364.70 | 22.57% | \$ | 0.00% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ |
| Kitsap Public Health District NFP | \$ 190,000.00 | \$ 48,715.50 | 25.63% | \$ 48,249.12 | 34.15% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ 93,035.38 |
| Kitsap Homes of Compassion | \$ 300,000.00 | \$ 50,000.00 | 16.66% | \$ 125,000.00 | 50.00% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ 125,000.00 |
| Kitsap Recovery Center (PIN) | \$ 242,335.00 | \$ 34,039.02 | 14.04% | \$ 75,640.55 | 36.31% | \$ | 0.00% | \$ | 0.00% | \$ | \$ 132,655.43 |
| Kitsap Rescue Mission | \$ 260,694.00 | \$ 59,618.64 | 22.86% | \$ 56,844.97 | 28.27% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ 144,230.39 |
| Olympic ESD 114 | \$ 600,000.00 | \$ 95,000.65 | 15.83% | \$ 85,925.62 | 17.01% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ 419,073.73 |
| One Heart Wild | \$ 62,224.00 | \$ 15,555.99 | 24.99% | \$ 31,111.98 | 66.66% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ 15,556.03 |
| Kitsap Mental Health Services | \$ 200,000.00 | \$ 0 | 0% | \$ 0 | 0.00% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ 200,000.00 |
| Scarlet Road | \$ 100,000.00 | \$ 30,999.42 | 30.99% | \$ 22,998.26 | 33.33% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ 46,002.32 |
| West Sound Treatment Center (New Start) | \$ 387,741.00 | \$ 93,908.11 | 24.21% | \$ 148,756.71 | 50.62% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ 145,076.18 |
| West Sound Treatment Center (Liaison) | \$ 250,000.00 | \$ 81,714.23 | 32.68% | \$ 44,596.68 | 26.50% | \$ | 0.00% | \$ | 0.00% | \$ | \$ 123,689.09 |
| Total | \$ 7,040,214.00 | \$ 1,406,066.13 | 19.97% | \$ | 0.00% | \$ | 0.00% | \$ - | 0.00% | \$ | \$ |
| | | | | | | | | | | | |



Kitsap County Mental Health, Chemical Dependency & Therapeutic Court Programs Quarterly Summary Outputs and Outcomes Report

Second Quarter: April 1, 2024 – June 30, 2024

| Agency | Second QT Outputs | Second QT Outcomes |
|--|--|---|
| Agape Unlimited - AIMS Co-occurring Disorder Services Baseline: Unduplicated number of individuals served during the quarter | AIMS: <ul style="list-style-type: none">4 assessments, 47 Q119 total clients, 17 Q10 graduates, 0 Q1 Treatment Navigator: <ul style="list-style-type: none">129 assessments, 222 Q13 clients gained insurance, 6 Q10 clients gained photo ID's, 0 Q15 client filled out housing applications, 1 Q142 transports provided by navigator, 35 Q1 | AIMS: <ul style="list-style-type: none">139 SUD intakes AIMS questionnaire, 67 Q110.6 participants per month, 8.3 Q119 clients referred to AIMS services, 17 Q15 enrolled participants attended at least 1 appointment per month, 14 Q1 Treatment Navigator: <ul style="list-style-type: none">203 total clients, 321 Q1129 assessment appointments, 222 Q1 |
| Agape Unlimited – Navigator Baseline: Unduplicated number of individuals served during the quarter | <ul style="list-style-type: none">129 assessments conducted, 222 Q142 transports, 35 Q10 obtain Narcan, 3 Q1 | <ul style="list-style-type: none">67 individuals who no-showed but later successfully attended an appointment, 11 Q1203 total clients served, 321 Q1 |
| Bainbridge Youth Services Baseline: Unduplicated number of individuals served during the quarter | <ul style="list-style-type: none">1434.5 total youth counseling hours, 1368 Q1115 total adult counseling hours, 122 Q17 parents attending support groups, 8 Q10 Spanish-Language support groups, 0 Q1127 active youth clients, 139 Q162 clients discharged, 31 Q118 active adult clients, 18 Q1 | <ul style="list-style-type: none">15 clients on waitlist, 9 Q181 intakes or screenings, 42 Q181 total intakes, 42 Q1108 average number of program participants per month last QT, 99 Q1145 clients enrolled in BYS who attended at least one appointment per month last QT, 157 Q1145 total clients enrolled in AIMS, 157 Q1 |
| City of Bremerton – Therapeutic Court Baseline: Unduplicated number of individuals served during the quarter | <ul style="list-style-type: none">4 transports to treatment, 4 Q110 case management services, 6 Q1148 attendees for Resource Fair, 0 Q14 referrals to treatment programs, 4 Q1 | <ul style="list-style-type: none">7 individuals served with MH diagnosis, 4 Q19 individuals served with SUD diagnosis, 4 Q16 individuals served with co-occurring diagnosis, 4 Q13 applicants to Bremerton Therapeutic Court, 42 Q110 participants enrolled in 2024, 9 Q1 |

| Agency | Second QT Outputs | Second QT Outcomes |
|--|---|---|
| Central Kitsap Fire – CARES Baseline: Unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 1038 total contacts, 809 Q1 • 453 over the phone, 332 Q1 • 411 in person, 324 Q1 • 27 crisis response, 11 Q1 • 353 referral or follow-up, 202 Q1 • 199 work with family or caregiver, 110 Q1 • 2 dropped off to Crisis Triage Center, 0 Q1 | <ul style="list-style-type: none"> • 315 individuals served, 288 Q1 • 252 individuals referred to services, 209 Q1 • 166 individuals connected to services, 158 Q1 • 49 individuals receiving case management, 3 Q1 • 0 preventions 911, 0 Q1 • 6 hospital diversions – alternate destination, 1 Q1 • 6 hospital diversions -home, 1 Q1 • 11 relieved fire crew, 15 Q1 |
| The Coffee Oasis Baseline: unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 67 texts responded to on crisis line, 41 Q1 • 494 in-person crisis intervention outreach contacts, 481 Q1 • 4 unduplicated BH therapy sessions, 6 Q1 • 14 unduplicated BH SUD specific therapy sessions, 3 Q1 • 7 intensive case management sessions, 4 Q1 • 535 total clients served, 949 Q1 • 129 unduplicated crisis intervention outreaches, 481 Q1 | <ul style="list-style-type: none"> • 1355 youth in crisis who engaged in at least two contacts; call or text, 481 Q1 • 969 youth in crisis contacted, 481 Q1 • 67 texters in crisis, 43 Q1 • 43 crisis texts that are resolved over the phone or with community resources, 43 Q1 • 7 youth served by SUD professional by appointments, 3 Q1 • 6 in case management services who completed a housing stability plan including educational/employment goals, 4 Q1 • 16 homeless youth served by Coffee Oasis within management, 3 Q1 |
| Eagles Wings – Coordinated Care Baseline: unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 0 psychiatric intakes, 2 Q1 • 0 housing meetings, 196 Q1 • 0 case management encounters, 1400 Q1 • 0 services provided, 1600 Q1 • 122 unduplicated individuals served, 131 Q1 | <ul style="list-style-type: none"> • 41 unduplicated individuals served with medication management, 46 Q1 • 15 unduplicated individuals served in a therapeutic court program, 27 Q1 • 82 participants stably housed for 6 months, 84 Q1 • 57 participants EWCC has been able to engage or re-engage in mental health services, 60 Q1 • 28 participants who have transitioned from simple participation to community involved positions, 30 Q1 |
| Fishline NK Baseline: Unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 30 outreaches to the community about counseling services, 85 Q1 • 26 referrals from Fishline to counseling services, 26 Q1 • 4 referrals from counselor to Fishline, 6 Q1 • 341 counseling sessions, 336 Q1 • 14 clients served, 20 Q1 | <ul style="list-style-type: none"> • 4 referrals to Fishline received, 6 Q1 • 14 individuals assessed and seen within 3 days by Fishline therapist, 20 Q1 • 677 served with therapeutic counseling services, 336 Q1 • 10 clients referred to a case manager, 6 Q1 • 2 meetings held with referral agency North Kitsap Services, 1 Q1 |

| Agency | Second QT Outputs | Second QT Outcomes |
|---|--|--|
| Flying Bagel Baseline: unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 27 outreaches to the community about services, 25 Q1 • 2 referrals to Flying Bagel from agencies, 3 Q1 • 9 referrals to Flying Bagel for the community, 12 Q1 • 2 referrals to outside organizations, 3 Q1 • 3 intake sessions, 7 Q1 • 36 counseling sessions, 23 Q1 • 0 trainings, 2 Q1 • 8 clients served, 7 Q1 • 8 families engaged in services, 6 Q1 | <ul style="list-style-type: none"> • 2 pre-assessments completed, 7 Q1 • 1 post assessment completed, 0 Q1 • 3 children served ages 0-2, 2 Q1 • 5 children served ages 2-4, 5 Q1 • 25 referrals to Flying Bagel received, 15 Q1 • 5 referrals to outside agencies, 3 Q1 • 13 individuals receiving services, 7 Q1 • 6 individuals trained, 6 Q1 • 1 individual who became certified, 0 Q1 |
| Kitsap Brain Injury Baseline: unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 3 monthly educational groups, 3 Q1 • 75 total participants who attended monthly educational groups, 80 Q1 • 13 weekly support groups, 13 Q1 • 307 total participants who attended weekly support groups, 217 Q1 | <ul style="list-style-type: none"> • 382 total active participants, 297 Q1 • 382 participants who are there as supportive individuals, family seeking support etc., 3 Q1 • 25 QOLIBRI surveys completed, 29 Q1 • 25 who self-reported, 29 Q1 • 21 participants report an increase in positive mental health and well-being, 29 Q1 |
| Kitsap Community Resources - ROAST Baseline: Unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 9 referrals to mental health, 22 Q1 • 4 referrals to SUD services, 19 Q1 • 10 referrals to primary care, 27 Q1 • 4 referrals to employment and training services, 6 Q1 • 20 referrals to housing, 62 Q1 | <ul style="list-style-type: none"> • 0 average households on a caseload, 0 Q1 • 480 unduplicated individuals, 413 Q1 • 298 households, 255 Q1 • 296 households that have received rental assistance and maintained housing 1 month, 243 Q1 |
| Kitsap County District Court - Behavioral Health Court Baseline: Unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 13 service referrals provided, 53 Q1 • 5 individuals housed, 2 Q1 • 36 program participants, 32 Q1 • 10 program referrals, 9 Q1 • 0 participants terminated, 1 Q1 • 0 new participants, 0 Q1 • 634 incentives, 723 Q1 • 32 sanctions, 44 Q1 | <ul style="list-style-type: none"> • 1 reoffender in last quarter, 0 Q1 • 0 graduates from the past 18 months who reoffended, 0 Q1 • 3 graduates in past 6 months who completed a diversion program, 2 Q1 • 32 participants reported feeling favorable overall life satisfaction, 14 Q1 • 4 remain homeless or became homeless again in the last quarter, 5 Q1 • 13 participants who were trying to re-engage in vocational activities were successful, 14 Q1 • 5 participants trying to reobtain a driver's license were successful, 17 Q1 |

| Agency | Second QT Outputs | Second QT Outcomes |
|--|--|---|
| Kitsap County Juvenile Court Baseline: Unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 14 BHS sessions with ITC participants, 16 Q1 • 7 BHS sessions with JDC participants, 5 Q1 • BHS sessions with post-graduates, 588 Q1 • 45 UA tests for designer drugs, 150 Q1 • 509 incentives given, 588 Q1 • 83 sanctions given, 46 Q1 | <ul style="list-style-type: none"> • 11 BHS sessions with KPAC participants, 13 Q1 • 7 BHS sessions with Girls Court, 3 Q1 • 2 BHS sessions with Family Treatment Court, 7 Q1 • 7 BHS session with Safe Babies Court, 1 Q1 • 198 youth screened for use of designer drugs who test negative, 150 Q1 • 45 youth screened for use of designer drugs, 150 Q1 |
| Kitsap County Prosecutor's Office Baseline: Unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 34 treatment court entries, 24 Q1 • 4 BH court entries, 3 Q1 • 20 drug court entries, 17 Q1 • 6 felony diversion, 4 Q1 • 3 entries to veteran's court, 0 Q1 | <ul style="list-style-type: none"> • 80 applications, 52 Q1 • 44 pending entries, 21 Q1 • 12 opted out, 4 Q1 • 34 treatment court entries, 24 Q1 • 26 denied entry: 13 for criminal history, 5 for current charges, 2 for open warrants, 6 for other, 21 Q1 • 4 DOSA participants, 2 Q1 |
| Kitsap County Sheriff's Office Crisis Intervention Officer (CIO) Baseline: Unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 5 detentions, 11 Q1 • 11 diversions, 9 Q1 • 3 planned apprehensions, 4 Q1 • 121 911 Behavioral Health total contacts, 100 Q1 | <ul style="list-style-type: none"> • 34 CIC contacts where individual is transported to the Hospital, 23 Q1 • 66 contacts referred to REAL, VAB, CPS, etc., 27 Q1 • 5 CIC contacts where individual is arrested, 2 Q1 |
| Kitsap County Sheriff's Office Crisis Intervention Training (CIT) Baseline: Unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 0 CIT trainings, 0 Q1 • 0 total individuals served in Bainbridge Island, 0 Q1 • 0 total individuals served in Bremerton, 0 Q1 • 0 total individuals served Kitsap County Sheriff, 0 Q1 • 0 total individual served in Poulsbo, 0 Q1 • 0 total individual served in Port Gamble, 0 Q1 • 0 total individuals served in other, 0 Q1 | <ul style="list-style-type: none"> • 0 40-hour class to 30 different Kitsap County Deputies, 0 Q1 • 0 participants who successfully completed end-of-course mock scenes test, 0 Q1 • 0 total class participants, 0 Q1 |

| Agency | Second QT Outputs | Second QT Outcomes |
|---|--|--|
| Kitsap County Sheriff's Office Reentry Program Baseline: Unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 16 substance use disorder services, 25 Q1 • 2 mental health service, 1 Q1 • 115 co-occurring substance use disorder and mental health services, 123 Q1 • 133 participants, 123 Q1 • 81 participants receiving MAT, 73 Q1 | <ul style="list-style-type: none"> • 133 prisoners receiving services, 0 Q1 • 1383 jail bed days for participants post-program enrollment, 172 Q1 • 6799 jail bed days for participants pre-program enrollment, 4,256 Q1 • 49 return clients, 15 Q1 • \$1,492,917.30 monies saved based on jail bed day reductions, \$641,392.20 Q1 |
| Kitsap County Sheriff's Office POD Program Baseline: Unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 16 substance use disorder services, 25 Q1 • 2 mental health service, 1 Q1 • 115 co-occurring both substance use and mental health services, 123 Q1 • 59 referrals to Westsound, 114 Q1 • 17 referrals to Agape, 10 Q1 • 26 referrals to Scarlet Road, 27 Q1 | <ul style="list-style-type: none"> • 133 total participants, 149 Q1 • 81 participants receiving MAT medicated Assisted Treatment, 73 Q1 • 6799 jail bed days for participants pre-program enrollment, 4,256 Q1 • 1383 jail bed days for participants post-program enrollment, 172 Q1 • \$1,492,917.30 amount saved based on jail bed day reduction, \$641,392.20 Q1 • 55 return clients, 15 Q1 • 0 classes provided to participants in West POD, 0 Q1 • 0 POD weeks of operation, 0 Q1 |
| Kitsap County Superior Court Baseline: Unduplicated number of individuals served during the quarter | Adult Drug Court: <ul style="list-style-type: none"> • 25 attending college, 20 Q1 • 6 received OC GED, 3 Q1 • 10 created resumes, 5 Q1 • 20 obtained employment, 14 Q1 • 0 BEST business support training, 0 Q1 • 35 housing assistance, 46 Q1 • 14 licensing and education, 17 Q1 • 210 received job services, 201 Q1 Veterans Treatment Court: <ul style="list-style-type: none"> • 3 military trauma screening, 0 Q1 • 3 new participant added, 0 Q1 • 1 mental health referral, 0 Q1 | Adult Drug Court: <ul style="list-style-type: none"> • 136 active participants, 128 Q1 • 55 receiving COD services, 85 Q1 • 4 discharged, 5 Q1 • 6 graduates, 7 Q1 • 72 receiving MAT services, 75 Q1 Veteran's Treatment Court: <ul style="list-style-type: none"> • 16 participants screened using ASAM criteria within one week of admission to VTC, 15 Q1 • 14 participants screened positive for needing substance use treatment and placed at either American Lake or KRC within two weeks of that determination, 14 Q1 • 16 participant treatment plans reviewed/revised, if necessary, every 90 days by VA clinical provider recommendation, 15 Q1 |

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| | <ul style="list-style-type: none"> • 3 substance use disorder screening, 0 Q1 • 3 referral for substance use disorder treatment, 0 Q1 • 16 active participants, 15 Q1 • 1 participant discharged, 2 Q1 • 1 graduate, 0 Q1 • 3 active participants receiving MAT services, 3 Q1 | <ul style="list-style-type: none"> • 12 participants screened positive for needing mental health services were placed in treatment at VAMC or KMHS within 30 days of assessment, 15 Q1 |
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| Agency | Second QT Outputs | Second QT Outcomes |
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| Kitsap Homes of Compassion – Housing Supports Baseline: unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 98 unduplicated permanent supportive housing residents served, 103 Q1 • 46 unduplicated residents served who are in a sober home, 45 Q1 • 52 unduplicated residents served who are living in a low-barrier home, 58 Q1 • 7 total clients receiving psychiatric assessments, 4 Q1 • 23 total clients receiving case management, 7 Q1 • 30 total clients engaged in counseling services, 19 Q1 • 321 total clients engaged in mental health programming, 310 Q1 | <ul style="list-style-type: none"> • 2.9 months average duration of clients who stay housed, either in KHOC program or community housing, 2.9 Q1 • 2 months is what it takes clients engaged in supportive services such as counseling, to become housed, 2 Q1 • 0 reductions in emergency psychiatric services or hospitalizations, 2 Q1 • 0 self-reported data from clients on reducing psychiatric services or hospitalization, 19 Q1 • 6 self-reported data from clients on reducing law enforcement activities, 19 Q1 |
| Kitsap Mental Health Services Baseline: Unduplicated number of individuals served during the quarter | Pendleton Place: <ul style="list-style-type: none"> • 89 classes held for clients, 73 Q1 • 586 meetings with housing supports, 551 Q1 • 0 client meetings with Peer Support, 0 Q1 • 73 individuals housed, 73 Q1 • 69 individuals with mental health, 72 Q1 • 30 individuals with substance use disorder, 30 Q1 • 30 individuals with dual diagnosis, 30 Q1 • 4 individuals who terminated lease, 2 Q1 | Pendleton Place: <ul style="list-style-type: none"> • 62 residents who accessed primary care, 63 Q1 |
| Kitsap Public Health District Nurse Family Partnership Baseline: Unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 178 NFP nursing visits, 203 Q1 • 45 CHW or Public Health referrals, 46 Q1 • 44 mothers served in NFP, 45 Q1 • 36 infants served in NFP, 36 Q1 | <ul style="list-style-type: none"> • 110 CHW or Public Health management encounters, 58 Q1 • 8 postpartum group sessions held, 0 Q1 • 31 total mothers participating in support group sessions, 0 Q1 |

| Agency | Second QT Outputs | Second QT Outcomes |
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| Kitsap Recovery Center Person in Need (PIN) Baseline: Unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 46 referrals to higher level of inpatient services, 12 Q1 • 20 individuals who request substance use disorder services, 14 Q1 • 20 individuals who start detox, 10 Q1 • 4 individuals who started outpatient services, 1 Q1 • 8 individuals transferred to supportive housing, 1 Q1 | <ul style="list-style-type: none"> • 9 individuals who accepted housing after completing inpatient treatment, 1 Q1 • 14 individuals who were offered housing after inpatient treatment, 2 Q1 • 19 clients screened who entered services same day, 8 Q1 • 35 clients screened who entered treatment, 9 Q1 • 10 clients who left treatment not complete, 2 Q1 • 31 total who have exited treatment (complete and not complete), 8 Q1 |
| Kitsap Rescue Mission Baseline: Unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 4 assessments, 8 Q1 • 1 detox admits, 1 Q1 • 1 inpatient treatment admit, 0 Q1 • 1 outpatient admits, 5 Q1 • 0 sober living housing placements, 2 Q1 • 37 1:1 session, 239 Q1 • 228 1:1 session with MH provider, 208 Q1 • 2 911 calls, 0 Q1 • 7 emergency room engagements, 4 Q1 | <ul style="list-style-type: none"> • 21 individuals served, 0 Q1 • 15 individuals served with SUDP services, 47 Q1 • 6 individuals served with MH services, 0 Q1 • 0 individuals utilizing housing navigator services, 0 Q1 |
| Olympic Educational District 114 Baseline: Unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 1054 elementary contacts with clients, 997 Q1 • 625 middle school contacts with clients, 408 Q1 • 286 high school contacts with clients, 523 Q1 • 34 elementary drop-ins, 31 Q1 • 47 middle school drop-ins, 36 Q1 • 12 high school drop-ins, 26 Q1 • 314 elementary parent interactions, 252 Q1 • 45 middle school parent interactions, 30 Q1 • 30 high school parent interactions, 10 Q1 • 441 elementary staff contacts, 385 Q1 • 14 middle school staff contacts, 25 Q1 • 14 high school staff contacts, 41 Q1 • 154 unduplicated elementary students served, 138 Q1 • 94 unduplicated middle school students served, 98 Q1 • 85 unduplicated high school students served, 41 Q1 | <ul style="list-style-type: none"> • 410 students have received services at targeted elementary, middle, and high schools (year to date), 321 Q1 |

| Agency | Second QT Outputs | Second QT Outcomes |
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| One Heart Wild Baseline: unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 12 family coordinated sessions, 5 Q1 • 78 telehealth sessions, 61 Q1 • 4 mental health / behavioral health sessions, 4 Q1 • 146 animal assisted mental health treatment / behavioral health services, 179 Q1 • 84 youth clients, 105 Q1 • 7 adults served with a child, 7 Q1 • 361 youth reached through school, 354 Q1 | <ul style="list-style-type: none"> • 96 clients completed an intake, 76 Q1 • 12 clients have established care coordination plans with OHW, 11 Q1 |
| Scarlet Road Baseline: Unduplicated number of individuals served during the quarter | <ul style="list-style-type: none"> • 2 times flexible rental assistance provided, 12 Q1 • \$2510.89 spent for rental assistance, \$12,532.39 Q1 • 17 adult victims, 17 Q1 • 2 youth victims, 2 Q1 • 16 adult victims connected to LMH, 14 Q1 | <ul style="list-style-type: none"> • 9 adults receiving rental assistance, 8 Q1 • 15 adults received employment services, 5 Q1 • 10 needed employment services, 3 Q1 |
| West Sound Treatment Center – New Start Baseline: Unduplicated number of individuals served during the quarter | New Start Program: <ul style="list-style-type: none"> • 119 applications for New Start and Re-Entry, 116 Q1 • 49 assessments performed, 70 Q1 • 21 intakes performed, 35 Q1 • 90 transports to New Start/reentry clients, 58 Q1 • 96 referrals to the REAL team, 61 Q1 • 96 referrals to SABG for vocational need, 61 Q1 • 119 New Start/Re-Entry Clients, 167 Q1 • 22 housed participants, 26 Q1 | New Start Program: <ul style="list-style-type: none"> • 122 clients with a housing barrier who received sufficient referrals to housing (year to date), 26 Q1 • 49 clients with a housing barrier (year to date), 26 Q1 • 47 have visited a primary care physician within 30 days of entering sober living (year to date), 25 Q1 • 48 housed participants (year to date), 26 Q1 • 157 clients who need MH services connected to SIH (year to date), 61 Q1 • 91 clients who need mental health services (year to date), 61 Q1 • 9 clients who need mental health medication who report receiving mental health medication management (year to date), 4 Q1 • 9 clients who need mental health medication (year to date), 4 Q1 |

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| <p>West Sound Treatment Center – Resource Liaison</p> <p>Baseline: Unduplicated number of individuals served during the quarter</p> | <p>Resource Liaison Program:</p> <ul style="list-style-type: none"> • 54 transportation supports received, 48 Q1 • 38 housing supports received, 64 Q1 • 159 behavioral Health supports received, 129 Q1 • 108 harm Reduction supports received, 65 Q1 • 4 units received (cell phone or similar supports), 4 Q1 • 5 units received (ID or similar supports), 3 Q1 • 97 other supports received, 76 Q1 | <p>Resource Liaison Program:</p> <ul style="list-style-type: none"> • 107 clients completed a needs assessment, 128 Q1 • 20 clients successfully connected to resources of needs, 73 Q1 • 107 total individuals who have been supported with successful connections to services, 107 Q1 |
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