

Kitsap County Community Survey Results

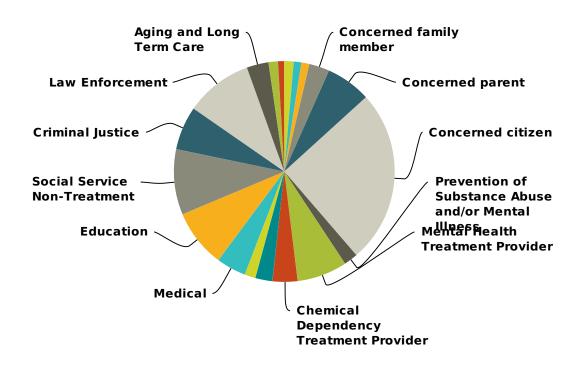
1/10th of 1% Mental Health, Chemical Dependency and Therapeutic Courts Results from

Kitsap County has a retail sales tax to fund a county wide infrastructure for behavioral health treatment programs and services. Substance abuse and mental health services are viewed as existing on a continuum of prevention, intervention, treatment and recovery support services. The 2014 Kitsap County Behavioral Health Strategic Plan identified key recommendations to address local gaps in these services and the community was asked to help us identify funding priorities for these local tax dollars. The survey was open from February 12, 2014 – April 7, 2014 and received 437 responses.

April 2014

Q1 Which best describes your role in planning chemical dependency, mental health and/or Therapeutic Court services in Kitsap County?

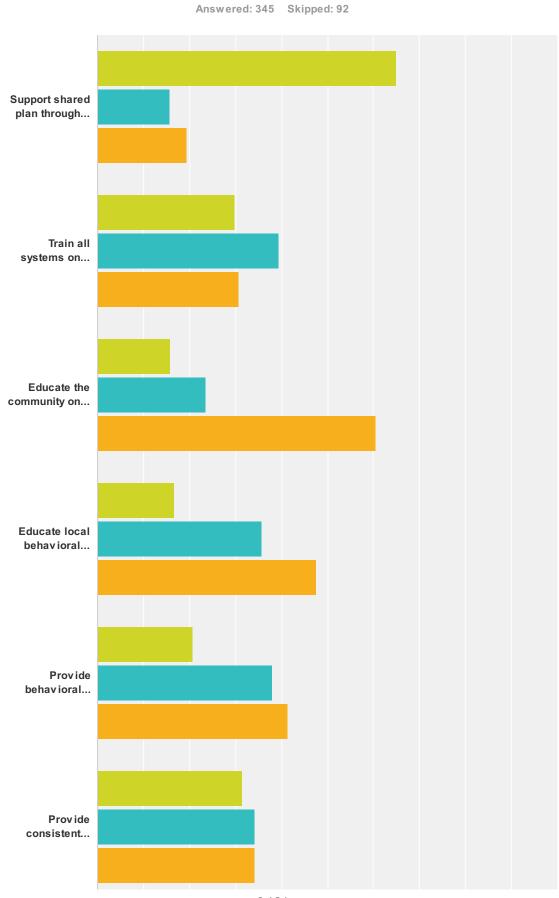
Answered: 437 Skipped: 0



swer Choices	Responses	
Appointed member of the Strategic Planning Team	1.37%	6
Appointed member of the Citizens Advisory Board	1.14%	5
Client/Consumer	1.14%	5
Concerned family member	2.97%	13
Concerned parent	6.64%	29
Concerned citizen	25.40%	111
Prevention of Substance Abuse and/or Mental IIIness	2.06%	9
Mental Health Treatment Provider	7.32%	32
Chemical Dependency Treatment Provider	3.66%	16
Co-occurring Treatment Provider	2.52%	11
Business	1.60%	7
Medical	4.35%	19
Education	8.47%	37
Social Service Non-Treatment	9.61%	42
Criminal Justice	6.41%	28

Law Enforcement	9.84%	43
Aging and Long Term Care	3.20%	14
Veteran	1.37%	6
Faith based organization	0.92%	4
Total		437

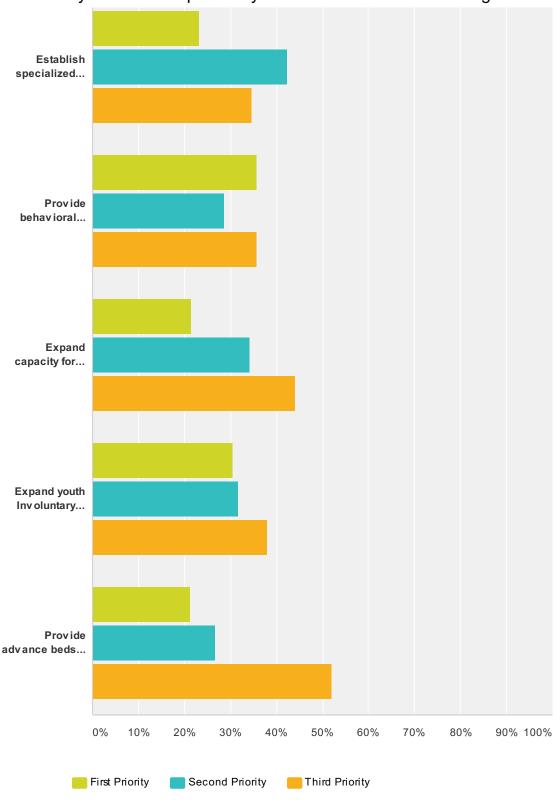
Q2 Please choose your top three funding priorities for Prevention, Early Intervention and Training.



Community Chemical Dependency and Mental Health Tax Ranking 2014 Embed strategies f... **Expand mental** health and... **Expand** evidence bas... **Provide** school-based... Conduct professional... Establish Suicide... 0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100% First Priority Second Priority Third Priority

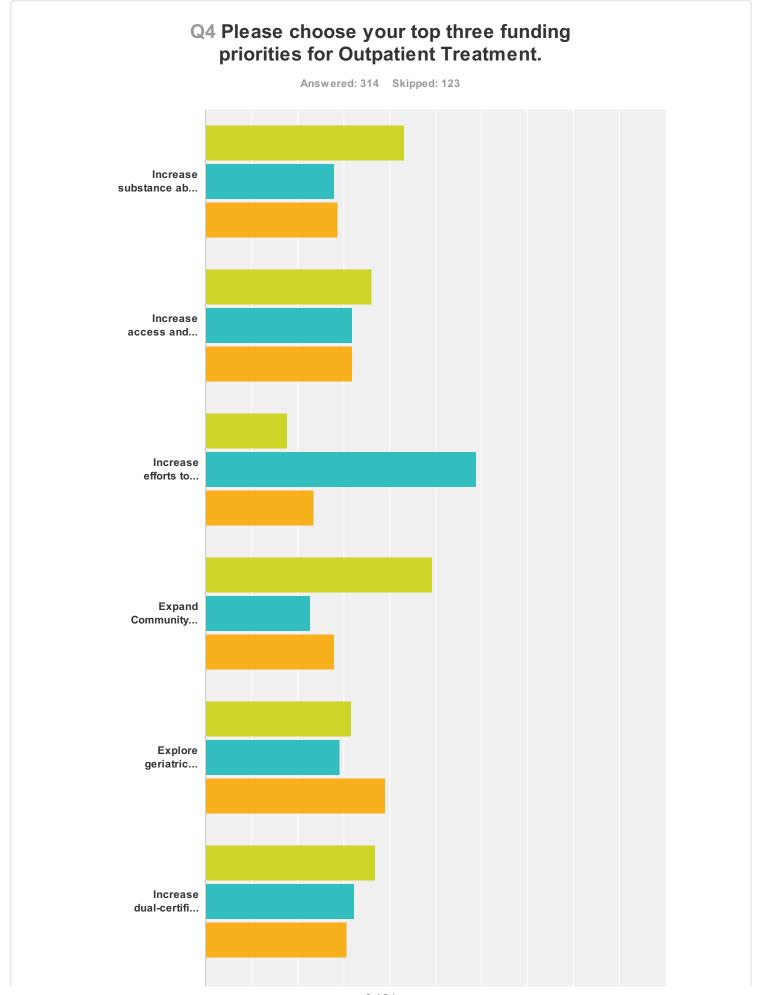
	First Priority	Second Priority	Third Priority	Total
Support shared plan through ongoing collaboration and increased care coordination among mental health, substance abuse, health and justice stakeholders through joint projects, blended funding, information sharing, and cross-training.	64.85% 107	15.76% 26	19.39% 32	165
Train all systems on community resources and behavioral health treatment options including inpatient, outpatient, medication assisted, detoxification services and crisis triage.	29.82% 34	39.47% 45	30.70% 35	114
Educate the community on Healthy Option Services and Medicaid Expansion.	15.79% 6	23.68% 9	60.53% 23	38
Educate local behavioral health treatment providers on Veteran's issues and available resources.	16.67% 7	35.71% 15	47.62% 20	42
Provide behavioral health education and training to providers working with the aging population.		37.93%	41.38% 12	29
Provide consistent behavioral health consultation to providers working with the aging population.		34.29% 12	34.29% 12	35
mbed strategies for working with individuals with behavioral health disorders within the xisting local CNA/ LPN/ nursing curriculum.		39.29%	46.43% 13	28
Expand mental health and substance abuse prevention coalitions county wide.	30.08% 37	34.96% 43	34.96% 43	123
Expand evidence based mental health and substance abuse early prevention and intervention parent programs (Example: Nurse-Family Partnership Program and Strengthening Families).	25.42% 30	43.22% 51	31.36% 37	118
Provide school-based mental health and substance use prevention education for students to include intervention, assessment, referral and treatment support.		31.06% 50	29.19% 47	161
Conduct professional development for educators, youth development and community agencies on youth mental health and substance abuse issues, concems and supportive intervention strategies.	16.85% 15	37.08% 33	46.07% 41	89
Establish Suicide Prevention, Screening and Referral options in schools and the community.	25.81% 24	41.94% 39	32.26% 30	93

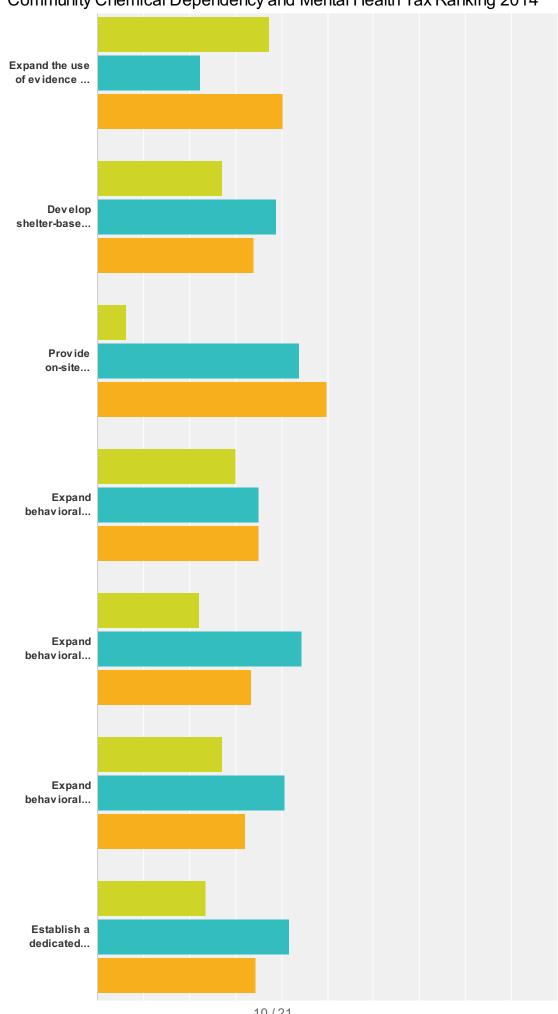
Community Chemical Dependency and Mental Health Tax Ranking 2014 Q3 Please choose your top three funding priorities for Crisis Intervention and Triage. Answered: 327 Skipped: 110 Develop county wide protoco... **Conduct crisis** intervention... Establish a Mobile Crisi... Provide crisis triage/respi...

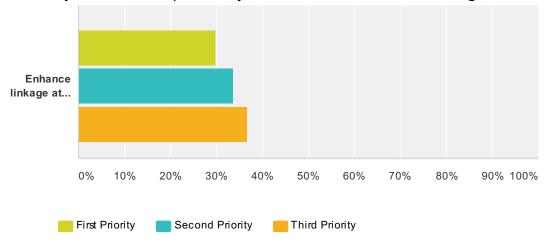


	First Priority	Second Priority	Third Priority	Tota
Develop county wide protocols for first responders responding to a call where mental illness or	42.05%	26.14%	31.82%	
substance use may be a factor.	37	23	28	88
Conduct crisis intervention training for all first responders countywide to respond to calls where	40.18%	37.50%	22.32%	
mental illness or substance use may be a factor.	45	42	25	11
Establish a Mobile Crisis Team and infrastructure to handle attempts by law enforcement or	34.55%	30.91%	34.55%	
mental health outreach teams to preempt entry into the legal system, jail or the hospital.	38	34	38	11

Provide crisis triage/respite and/or drop-off center alternative for individuals with behavioral	46.03%	31.75%	22.22%	
health needs not eligible for acute hospital or evaluation and treatment services but are in need of short term 24 hour services, including assessment and referral.	87	60	42	189
Sustain an adult diversion program for low level offenders with mental illness or substance	21.21%	42.42%	36.36%	
abuse disorders.	14	28	24	66
Establish specialized homeless outreach services, including specialized outreach to Veterans	20.31%	45.31%	34.38%	
with mental health or substance abuse issues.	13	29	22	64
Establish specialized geriatric outreach team to assist providers working with the aging	23.08%	42.31%	34.62%	
population.	6	11	9	26
Provide behavioral health screening, brief intervention, and referral for treatment for youth,	35.71%	28.57%	35.71%	
adults and older adults in primary care.	25	20	25	70
Expand capacity for 24 hour crisis response for youth through law enforcement training,	21.57%	34.31%	44.12%	
mobile crisis team, emergency housing and crisis triage.	22	35	45	102
Expand youth Involuntary Treatment Act/Crisis Response services, including crisis residential	30.38%	31.65%	37.97%	
center.	24	25	30	79
Provide advance beds for dementia patients who are not currently accepted by Western State	21.33%	26.67%	52.00%	
Hospital, Kitsap Mental Health or other providers.	16	20	39	75



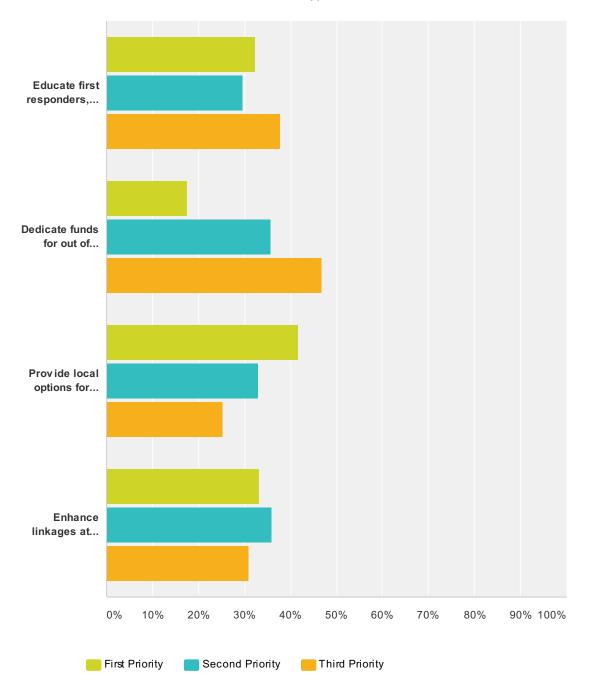




	First Priority	Second Priority	Third Priority	Tota
Increase substance abuse treatment funding for youth and adults who are not eligible for Medicaid, including individuals on Medicare, Veterans and do not have private insurance.	43.22% 51	27.97% 33	28.81% 34	11
ncrease access and options for medication assisted treatment.	36.17% 17	31.91% 15	31.91% 15	4
ncrease efforts to attract more providers within Kitsap County to provide pain and addiction consultations.	17.65% 6	58.82% 20	23.53% 8	3
Expand Community Mental Health Center services to include individuals who are not eligible for Medicaid.	49.24% 65	22.73% 30	28.03% 37	13
Explore geriatric population needs.	31.71% 13	29.27% 12	39.02% 16	2
Increase dual-certification among mental health and substance abuse treatment providers for addressing all of the individuals behavioral health needs.	36.92% 24	32.31% 21	30.77% 20	(
Expand the use of evidence and research based programs found to decrease depression, suicidal behavior and substance abuse among juvenile justice involved youth.		22.39% 15	40.30% 27	(
Develop shelter-based behavioral health prevention, outreach, assessment, intervention, eferral and treatment.		38.82% 33	34.12% 29	
Provide on-site behavioral health screening and referral to Superior, Municipal and District Courts.		43.75% 14	50.00%	
Expand behavioral health outreach, assessment, intervention, referral and treatment in the jail.		35.00% 14	35.00% 14	
Expand behavioral health outreach, assessment, intervention, referral and treatment in existing adult therapeutic courts.	22.22% 8	44.44% 16	33.33% 12	
Expand behavioral health prevention, outreach, assessment, intervention, referral and treatment within the juvenile justice system.		40.68% 24	32.20% 19	
Establish a dedicated behavioral health specialist to serve the juvenile detention facility, Individualized Treatment Court and be available for consultation to Probation Counselors dealing with the general probation population.	23.64% 13	41.82% 23	34.55% 19	
Enhance linkage at discharge to comprehensive services including care coordination, access to medication, prompt access to benefits, health care, housing with/without supportive services, and mental health & substance abuse treatment.	29.77% 39	33.59% 44	36.64% 48	1

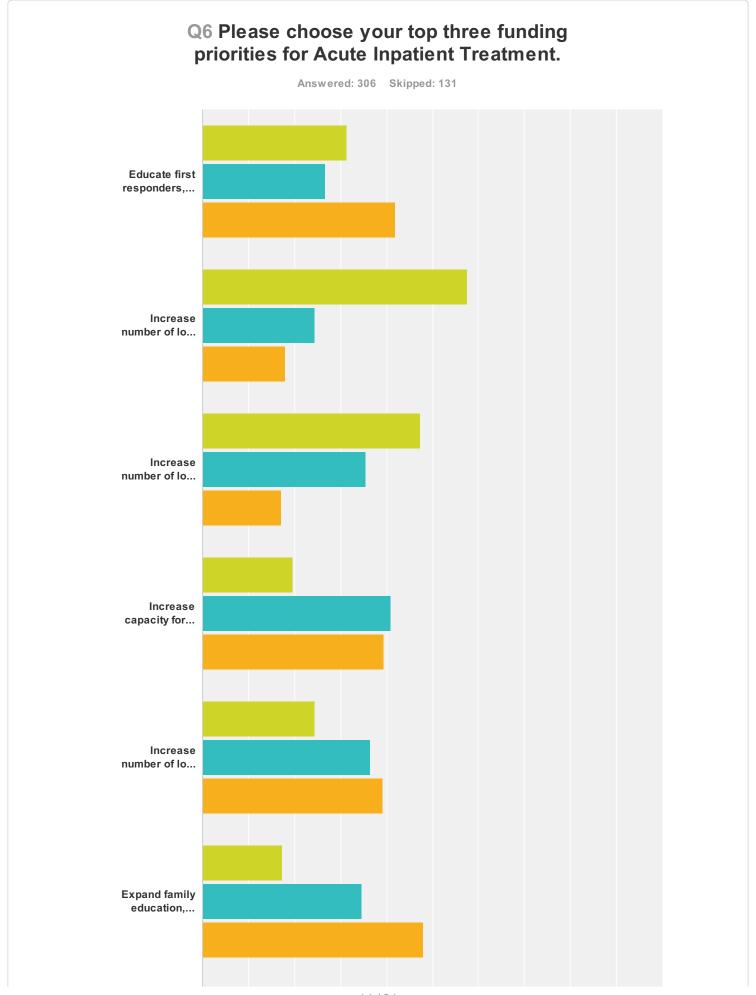
Q5 Please choose your top three funding priorities for Medical and Sub-Acute Detoxification.

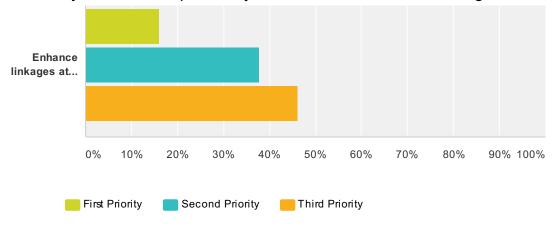
Answered: 312 Skipped: 125



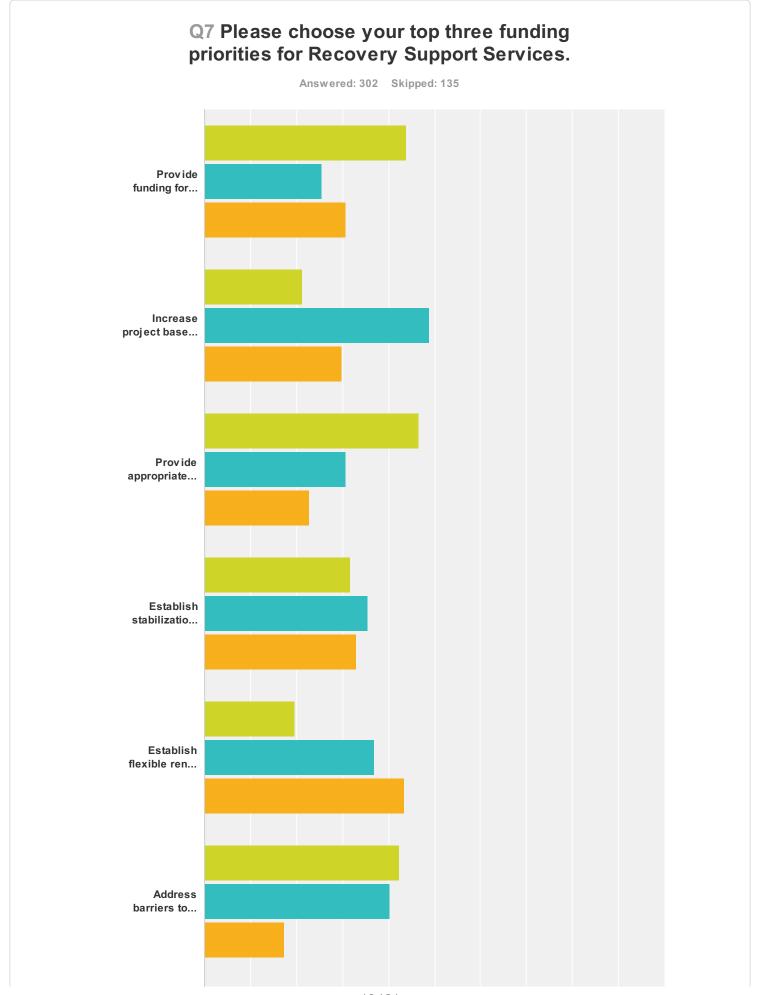
	First Priority	Second Priority	Third Priority	То
Educate first responders, mental health and housing program providers, and criminal justice staff on available Emergency Housing, Detoxification and Crisis Triage beds at Kitsap Recovery Center.	32.42% 83	29.69% 76	37.89% 97	2
Dedicate funds for out of county medical detoxification services for youth and adults, including those in the criminal justice system.	17.46% 22	35.71% 45	46.83% 59	1

Provide local options for medical detoxification.	41.76% 114	32.97% 90	25.27% 69	273
Enhance linkages at intake and discharge to comprehensive services including care	33.10%	35.94%	30.96%	
oordination, access to medication, prompt access to benefits, health care, and mental ealth & substance abuse treatment.	93	101	87	281

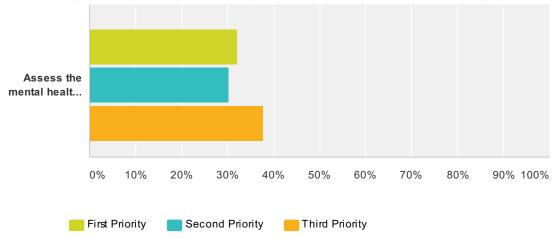




	First Priority	Second Priority	Third Priority	Total
Educate first responders, mental health and housing program providers, and criminal justice	31.40%	26.74%	41.86%	
staff on available inpatient substance abuse treatment beds at Kitsap Recovery Center.	27	23	36	86
Increase number of local residential substance abuse treatment beds for youth and adults.	57.61%	24.46%	17.93%	
	106	45	33	184
Increase number of local mental health inpatient beds for adults, including gero-psychiatric	47.34%	35.50%	17.16%	
peds.	80	60	29	169
Increase capacity for Program for Assertive Community Treatment (targeting 18-40 years olds	19.72%	40.85%	39.44%	
vith Axis 2 diagnosis).	14	29	28	71
ncrease number of local co-occurring disorder residential substance abuse/mental health	24.32%	36.49%	39.19%	
reatment beds.	36	54	58	148
Expand family education, involvement and support activities for individuals in residential	17.31%	34.62%	48.08%	
substance use disorder treatment.	18	36	50	104
Enhance linkages at intake and discharge to comprehensive services including care	16.03%	37.82%	46.15%	
coordination, access to medication, prompt access to benefits, health care, and mental health & substance abuse treatment.	25	59	72	156



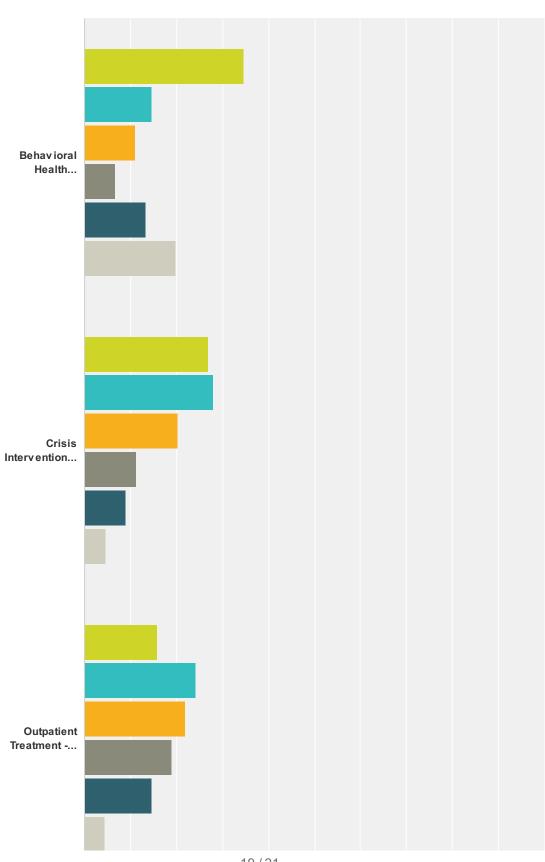
Community Chemical Dependency and Mental Health Tax Ranking 2014 Identify transportati... **Expand parent** and family... Increase wrap-around... Increase supportive... Explore local reimbursemen... **Explore local** cursory... Recruit existing...



	First Priority	Second Priority	Third Priority	Tot
Provide funding for recovery supportive services for individuals in treatment including child	43.86%	25.44%	30.70%	4.
care, transportation and employment.	50	29	35	1
Increase project based subsidized housing vouchers for individuals in Behavioral Health treatment.	21.28%	48.94% 23	29.79%	
	10		1.7	
Provide appropriate tailored subsidized housing and support services for homeless individuals	46.49%	30.70%	22.81%	
or persons at risk of homelessness with Behavioral Health issues.	53	35	26	1
Establish stabilization transition housing for individuals with Behavioral Health issues moving	31.65%	35.44%	32.91%	
from jail to treatment.	25	28	26	
Establish flexible rental assistance funds for individuals with Behavioral Health needs.	19.57%	36.96%	43.48%	
	9	17	20	
Address barriers to accessing treatment by increasing treatment options and locations in	42.31%	40.38%	17.31%	
Bainbridge Island, North and South Kitsap.	44	42	18	
Identify transportation barriers to getting to treatment and increase transportation options.	22.73%	30.30%	46.97%	
	15	20	31	
Expand parent and family education, involvement and support activities for youth and adults	23.08%	39.74%	37.18%	
in behavioral health treatment.	18	31	29	
Increase wrap-around services for serious emotionally disturbed youth.	37.08%	33.71%	29.21%	
	33	30	26	
Increase supportive services, case monitors, UA collection, incentives and pro-social activities	29.55%	29.55%	40.91%	
in all Juvenile Therapeutic Courts.	13	13	18	
Explore local reimbursement options implemented in Pierce and Clallam Counties.	16.67%	22.22%	61.11%	
	3	4	11	
Explore local cursory competency evaluation for out of custody, low risk offenders.	14.29%	35.71%	50.00%	
, , , ,	2	5	7	
Recruit existing organizations/individuals to develop a mental health support group similar to	25.00%	22.50%	52.50%	
AA/NA.	10	9	21	
Assess the mental health service needs of an aging population.	32.08%	30.19%	37.74%	
	17	16	20	

Q8 Please rank order your funding priorities for the full continuum of care (1 being the highest priority and 6 being the lowest.





Community Chemical Dependency and Mental Health Tax Ranking 2014 Medical and Sub-Acute... Acute **Inpatient Care** Recovery Support... 0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

6

	1	2	3	4	5	6	Tota
ehavioral Health Prevention, Early Intervention and	34.55%	14.62%	10.96%	6.64%	13.29%	19.93%	
raining	104	44	33	20	40	60	30
Crisis Intervention and Triage	26.91%	27.91%	20.27%	11.30%	8.97%	4.65%	
	81	84	61	34	27	14	30
Outpatient Treatment - Psychiatry, Medical and	15.95%	24.25%	21.93%	18.94%	14.62%	4.32%	
Medication Management, and Counseling	48	73	66	57	44	13	30
Medical and Sub-Acute Detoxification	2.66%	10.63%	15.95%	22.92%	19.93%	27.91%	
	8	32	48	69	60	84	30
Acute Inpatient Care	14.29%	12.96%	15.61%	22.92%	18.27%	15.95%	
	43	39	47	69	55	48	30
Recovery Support Services	5.65%	9.63%	15.28%	17.28%	24.92%	27.24%	
•	17	29	46	52	75	82	30