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## OAC Funds / Data Discussion

August 20, 2024, 4pm

Jefferson County's Behavioral Health Consortium (BHC) is supported by funding from HRSA's RCORP-Implementation Grant through August 2024 and Jefferson County Opioid Abatement Council funding through 2038



## Discussion – 08/20/24 Opioid Abatement Funds & Data

- JeffCo's Historical Collaborative Behavioral Health Efforts Since 2018
- Historical Data Collection Efforts and Challenges
- JeffCo's Incoming OAC Funding
- The Role of a Data Dashboard
- Spending Plans and Future Projects
- Considerations and Cross-Pollination of County-Specific Behavioral Health Funding Players
- Extra Stuff

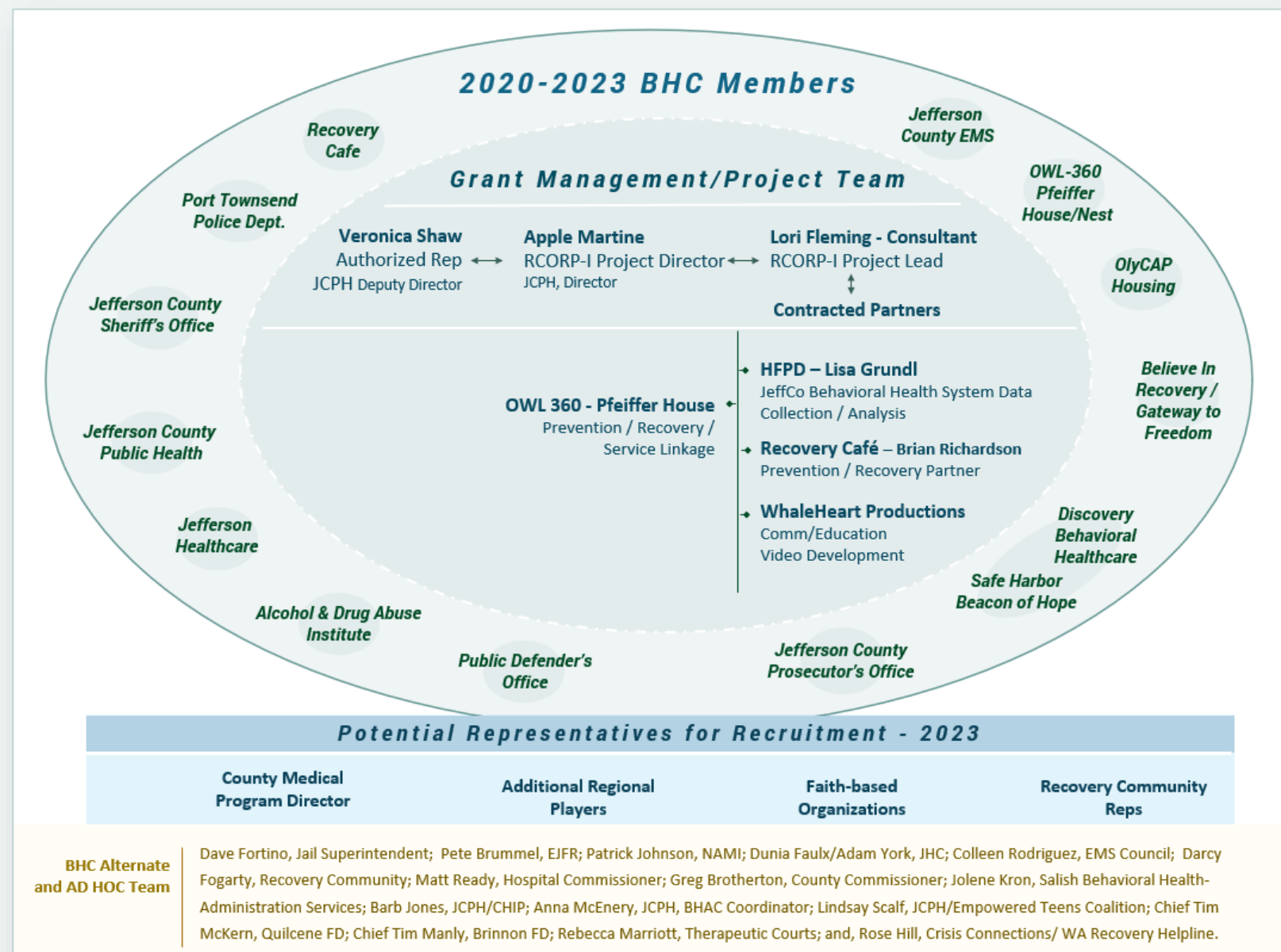


# BHC History





# BHC Overview



The Jefferson County Behavioral Health Consortium is focused on collaboratively developing and funding a collective seamless behavioral health system that allows our community members to navigate smoothly to needed services.

We have grown from 4 voting members in 2018, to 14 voting members in 2024.

The BHC and its work is supported by funding from HRSA's RCORP-Implementation Grant through August 2024 and Jefferson County's Opioid Abatement Council funding that continues through 2038.





# 2018 – 2021 Reporting Structure

County BOCC | Jefferson Healthcare | JC Public Health | City of Port Townsend

## CHIP

John Nowak / Lori Fleming

### CHA Execution – CHIP Development & Execution

Eliminate Youth Suicide  
Promote Positive Mental Health

CHIP Workgroup  
Youth Age Band

Improve Residents' Determinants of Health - Housing  
Improve service gaps for Medical & BH Care

CHIP Workgroup  
Working Age

Assess & address gaps to the  
support of County Seniors maintaining  
highest functional level possible

CHIP Workgroup  
Older Age

## Behavioral Health Consortium (BHC)

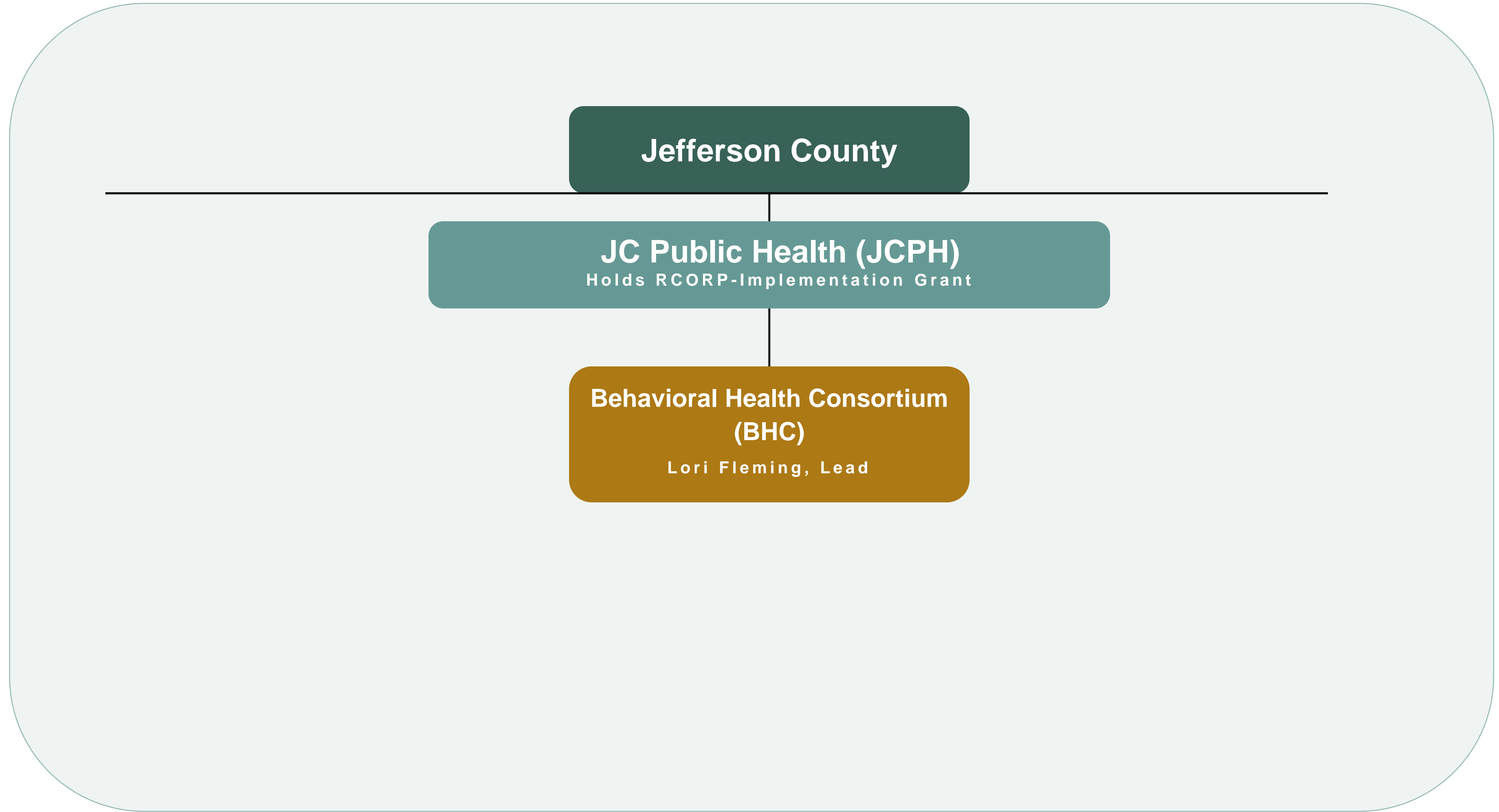
Funded by HRSA RCORP-Implementation Grant

- South County Harm Reduction Effort
- Pre Hospital BH Summit – led by Dr. Carlbom
- Data Collection, Analysis, Action Development
- Communications Campaign – Stigma, HR, BHC
- Provider / Prescriber Integration
- Coordination across Navigator Resources
- Friendly Faces - Care Coordination





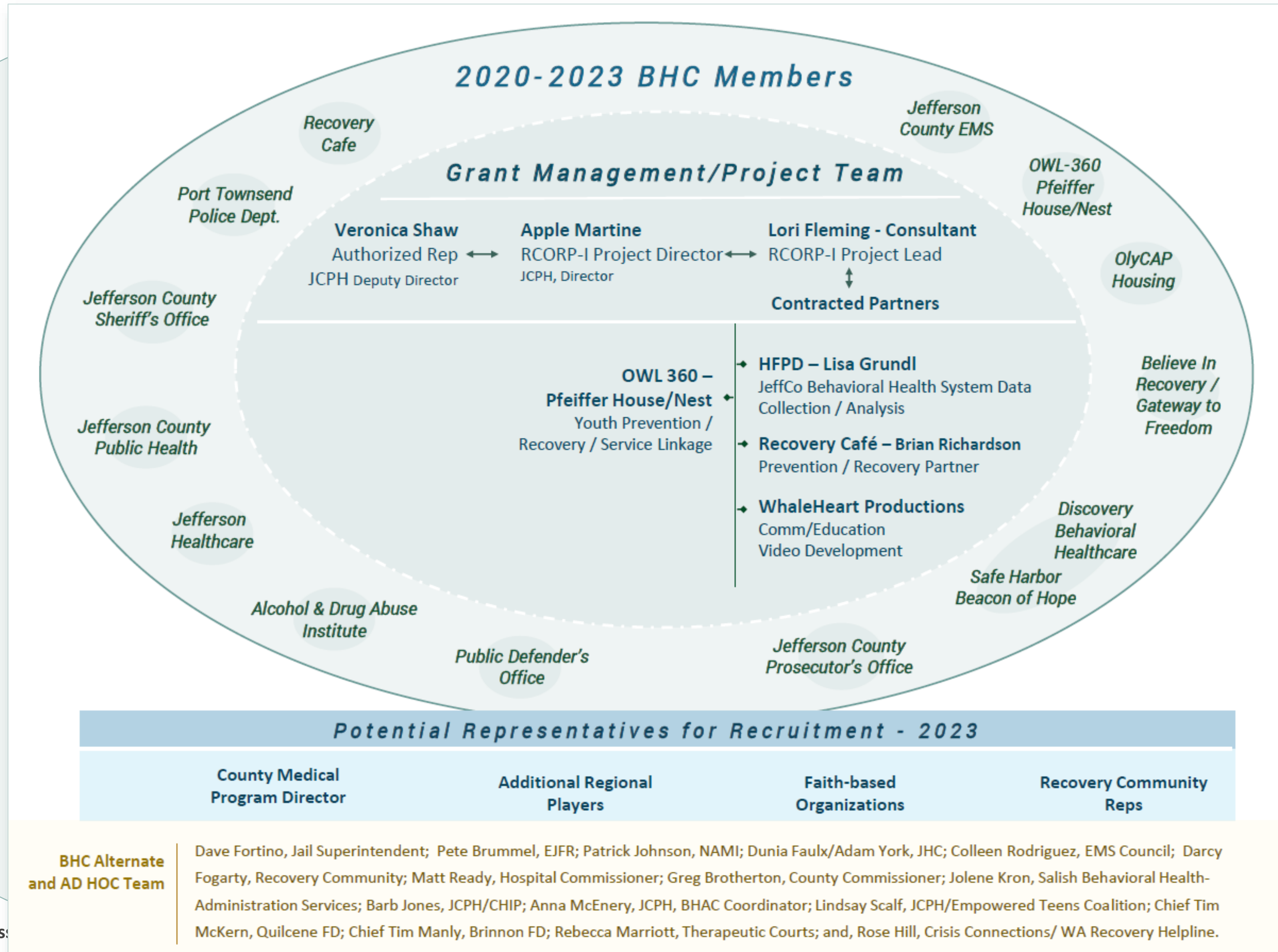
# Reporting Structure as of 11/2022







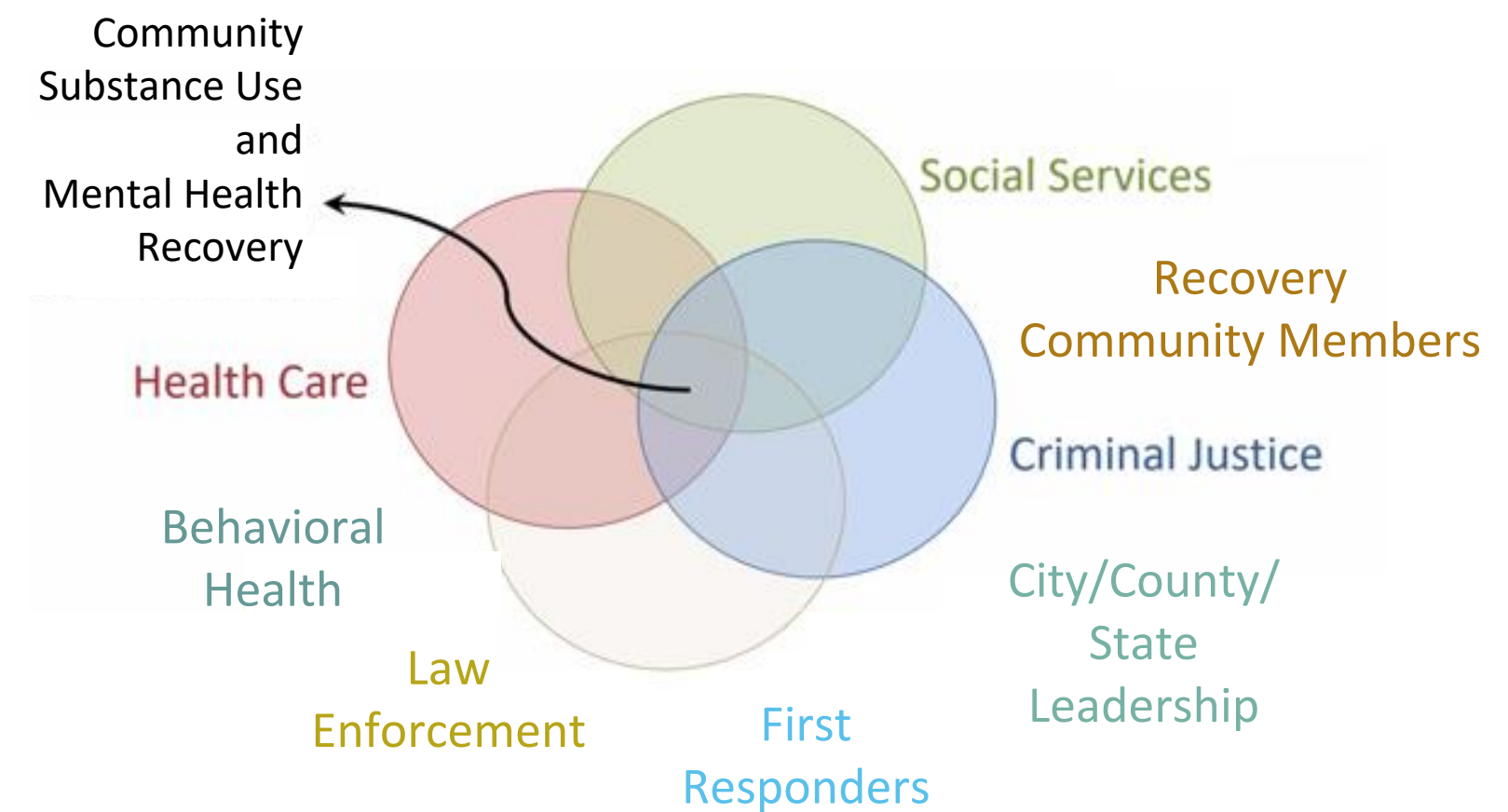
# Overview: Behavioral Health Consortium (BHC)





# BHC Uses a Systems Approach For Results

## How to Improve Jefferson County's Behavioral Health Recovery Rates?



### Systems Mindset

Recognition that a trend over time is the result of a system. Every system is perfectly designed to get the results it gets.

### Systems Thinking

The skill of discerning the system that drives given results

### Barriers to Systems Thinking

- Limits to cognitive capacity
- Limits to information access
- Cognitive bias
  - Selective Memory
  - Confirmation Bias
  - Short-term thinking
  - Overgeneralizing



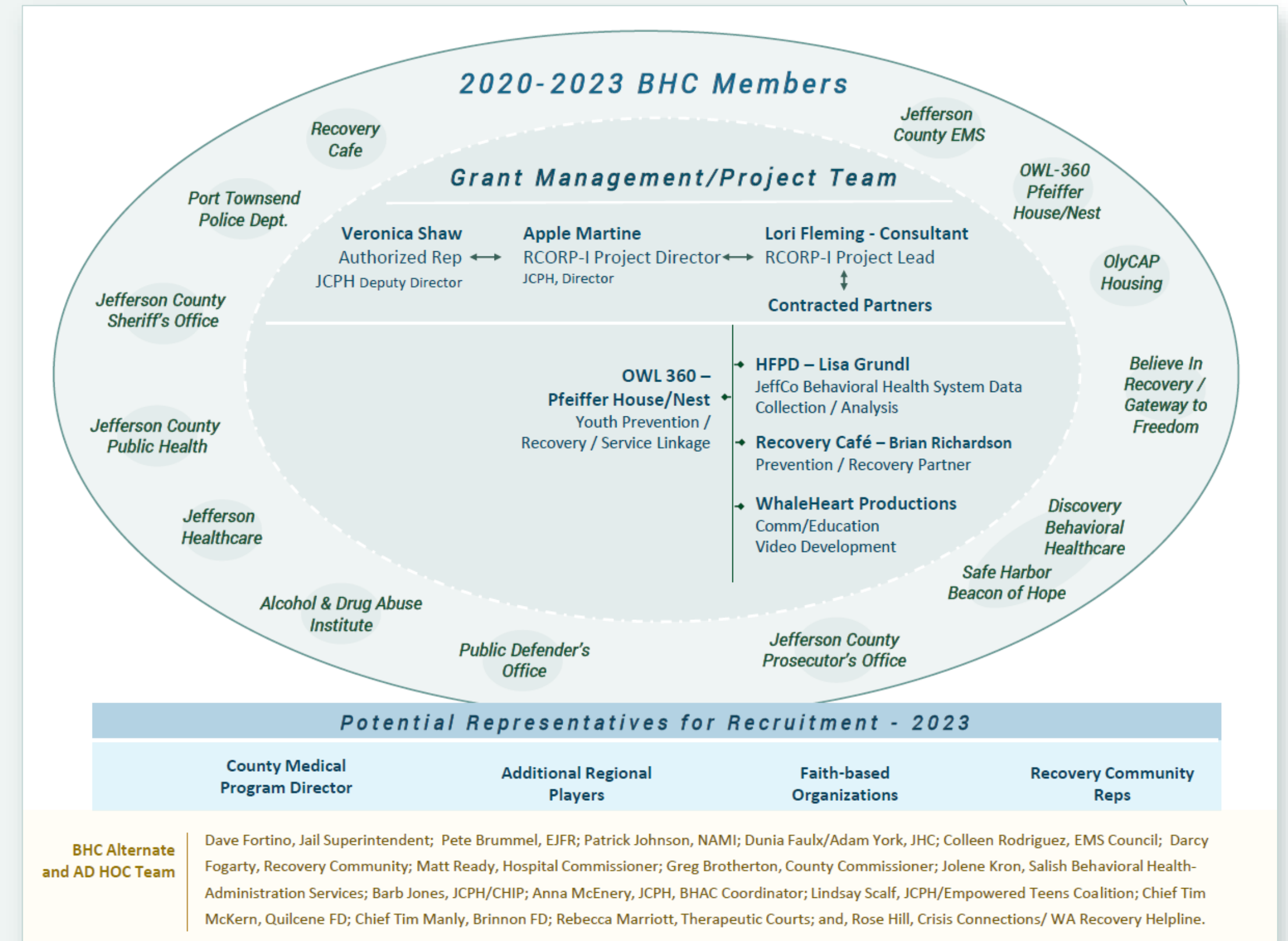




# Overview: Behavioral Health Consortium (BHC)

CHIP: Procured \$1.3M in Planning and Implementation Grants to address 2016 CHIP Mental Health and SUD Priority

- **A Table:** Where Behavioral health-relevant agencies and representatives develop awareness of each other's roles and priorities; develop and execute collaborative, coordinated strategies toward the collective's goal of improved access to local behavioral health services and eliminating substance overdose deaths.
- **Data:** Interagency leaders cooperatively share data at six-month intervals for collective analysis and interpretation; develop/update collective baseline and insight to the opportunities and impacts of our local level's behavioral health crisis need and actions.





# Overview: Behavioral Health Consortium (BHC)

Procured \$1.3M in Planning and Implementation Grants to address 2016 Plan's Mental Health and SUD Priority

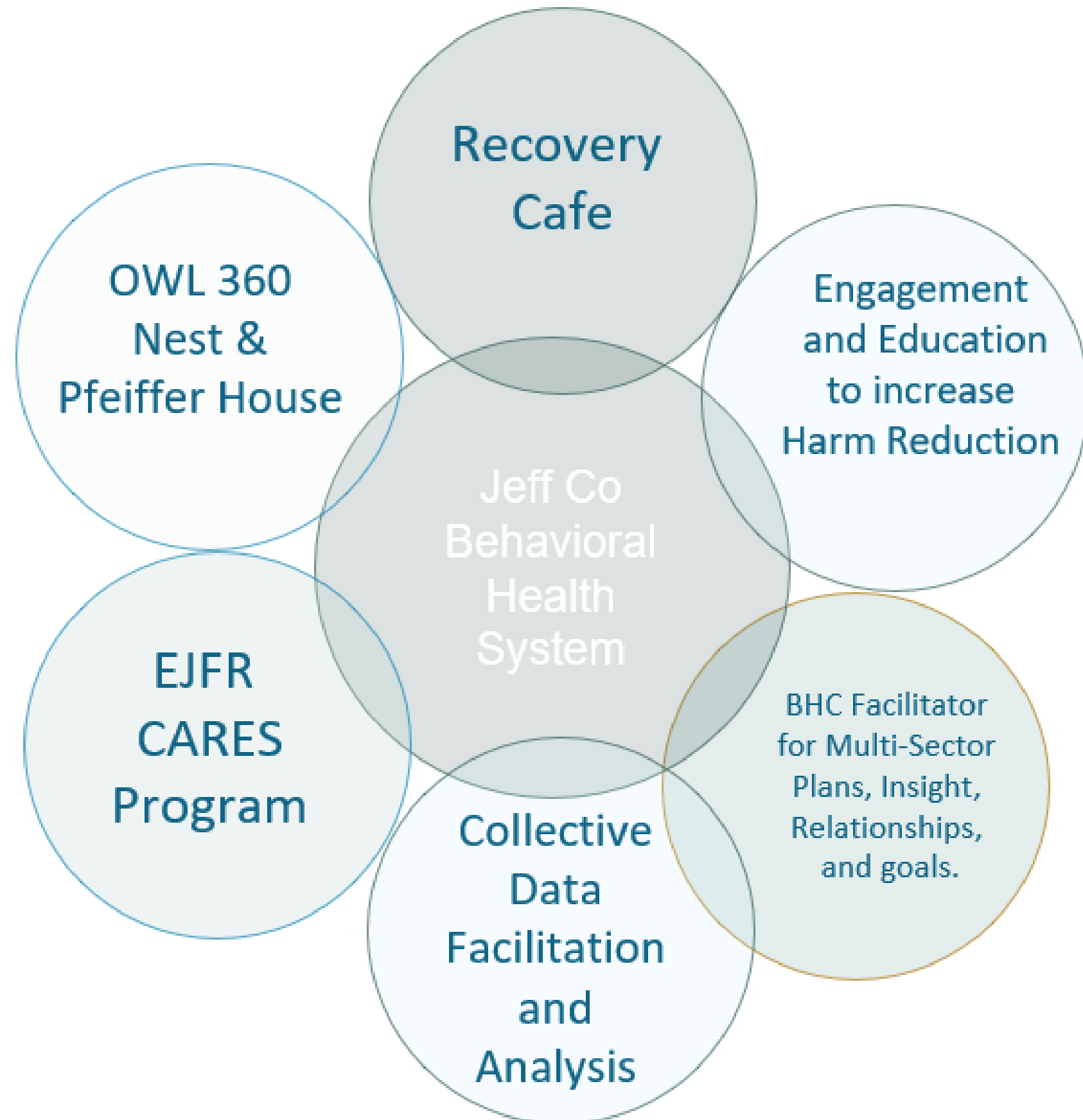
- Strategic Action:** Facilitates cross-sector strategic planning, execution, tracking, and plan updates  
 The BHC has threaded continuity throughout leadership transitions; participated in ICG Panel; and led the two Housing Taskforce RFP Panels in 2021.
- Program Funding:** Grant funds support the BHC's overhead costs, specific prevention, treatment, and recovery programs, and service wraparounds for Jefferson County residents through August 2023.

08/31/21 - Q4 Update: Jefferson County of (BHC) RCORP-I - Treatment Work Plan - Grant # GA1RH39564															
TASK NAME	START	END	TEAM MEMBER	Yr 1 Q1	Yr 1 Q2	Yr 1 Q3	Yr 1 Q4	Yr 2 Q1	Yr 2 Q2	Yr 2 Q3	Yr 2 Q4	Yr 3 Q1	Yr 3 Q2	Yr 3 Q3	Yr 3 Q4
<b>Treatment</b>				YEAR 1 - 2020 - 2021				YEAR 2 2021 - 2022				Year 3 2022 - 2023			
Reduce treatment barriers treatment by supporting integrated treatment and recovery, including integration with behavioral health, criminal justice system, dentistry, and social services. Use approaches 4 that minimize stigma/other barriers to care - Cont'd	Q1 2021	On-going													
g. Contribute to funding a Recovery Café Advocate role, ⇒ Work with individual to leverage Café as an intercept point to connect and integrate Recovery Café clients into wraparound social, medical and behavioral health-related services, ⇒ explore engaging providers to do bio-psych assessment services in a private room at the Café.	Q1 2021	On-going	Recovery Café, BHC, Grant Team					Work with leaders to determine role			Develop Comm Plan				
Y1Q4:Update:Trmt4g. - Some successes we've had this Quarter: Remaining open despite ever-changing COVID rules and restrictions. Increased our weekly Recovery Circles to 6. Hired a Kitchen Lead staff person. We also just recently started a partnership with Bayside Housing by having one of their Case Managers on-site at Recovery Café every other week to assist Members with housing applications.															
Activity Metrics: By 2022 decrease the number of Behavioral Health patients being seen by EMS and Law Enforcement by 10%, By 2025 reduced rates of incarceration for those with behavioral health issues by 10%, By 2025 reduced use of hospital ED for those with behavioral health needs by 10%.	On-going	On-going	Grant Team	On-going											
EJFR CARES Program	\$46,000.00	\$0.00	\$0.00	\$0.00	\$46,000.00	Funding for 2 months of newly established CARES Program									
Whaleheart Productions	\$11,865.00	\$0.00	\$0.00	\$0.00	\$11,865.00	Original Budget \$11,865 Approved 2/2023 Harm Reduction & Naloxone Education Video									
<b>Total Contractual</b>	<b>\$398,326.68</b>	<b>\$33,335.78</b>	<b>\$81,813.83</b>	<b>\$67,386.26</b>	<b>\$281,407.85</b>	<b>\$47,684.37</b>									
*Note: OWL360 underspent \$16,196.88 in Y2					<b>Remaining Funds to be Budgeted</b>										
Hence Indirect underspt	\$	5,390.32					<b>Total Remaining</b>	<b>\$73,278.36</b>							
<b>Revised Direct to be Budgeted</b>		<b>\$32,694.44</b>					<b>Direct to be budgeted</b>	<b>\$48,891.32</b>							
<b>Revised Indirect</b>		<b>\$18,996.72</b>					<b>Indirect Costs</b>	<b>\$24,387.04</b>							





# BHC's Monetary Support Toward a Seamless BH System



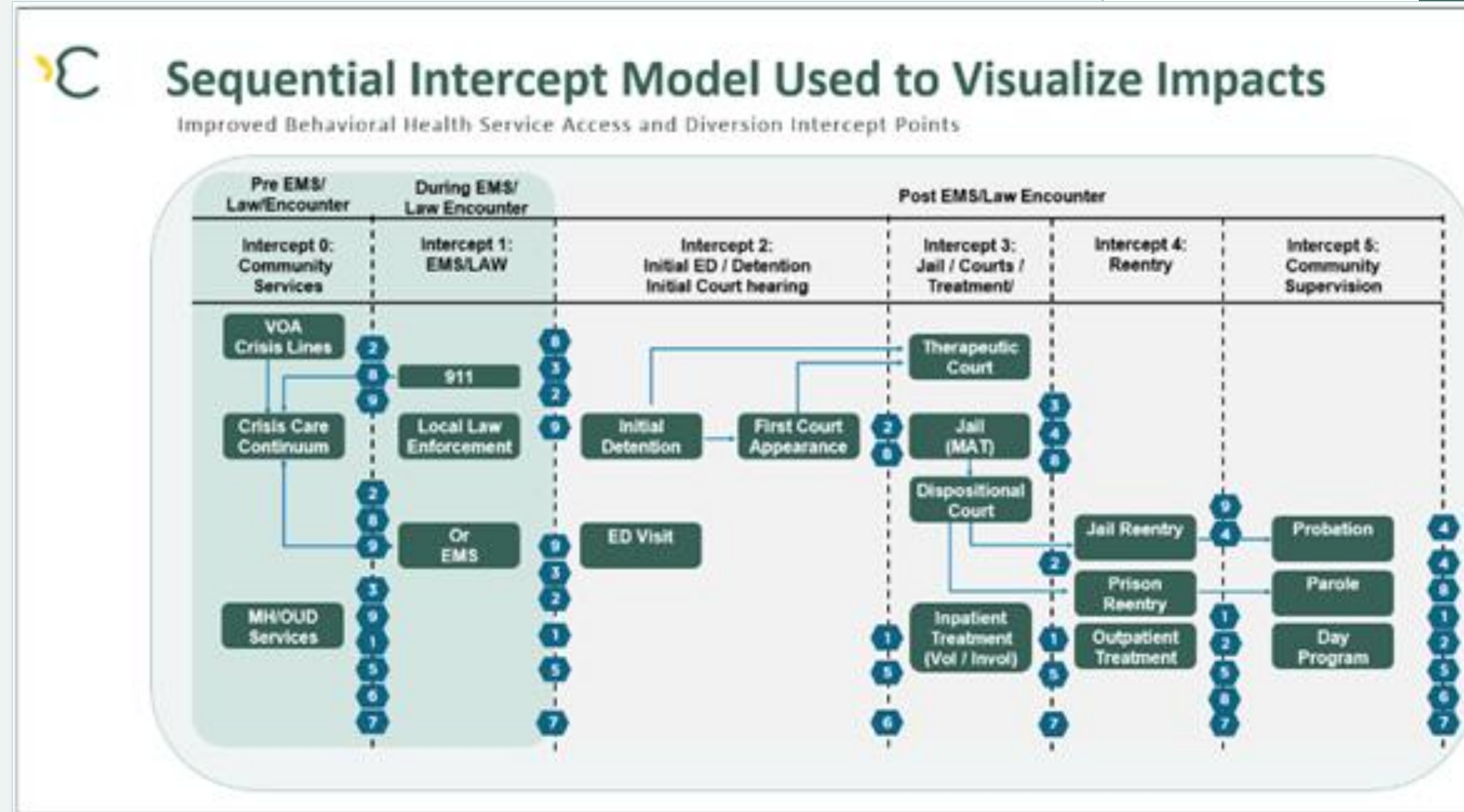
<b>PROGRAM</b>	<b>FUNDED 09/01/2020 - 08/2023</b>
RECOVERY CAFÉ / DOVE HOUSE	\$180,076.72
OWL 360 - PFEIFFER HOUSE / NEST	\$127,000.00
HFPD - DATA ANALYSIS & STRATEGY	\$ 33,940.00
ANYA CALLAHAN COMM/EDUCATION/ENGAGEMENT	\$ 20,445.00
COMMUNICATIONS WEBSITE TECH/GRAPHICS	\$ 14,463.00
EJFR CARES PROGRAM	\$ 46,000.00
SOUTH COUNTY HARM REDUCTION & ADDITIONAL COUNTY EMERGENCY NALOXONE BOXES/SUPPLIES	\$ 25,000.00
WHALEHEART PRODUCTIONS	\$ 11,865.00
<b>TOTAL PROGRAM ALLOCATIONS TO DATE</b>	<b>\$458,789.72</b>





# BHC Projects Update - August 2023

- ✓ 1. Increase Integration of Behavioral Health Therapy Provider and MAT Prescription
- ✓ 2. Gather/Analyze collective Data to provide baseline and feedback to measures implemented
- ✓ 3. Develop/maintain [online](#)/printed Resource Directory
- ✓ 4. Improve Jail-to-Community service connection
- ✓ 5. Fund Recovery Café for peer network development and recovery/prevention environment
- ✓ 6. Fund OWL360 for Youth Housing/Recovery/Prevention environment
- ✓ 7. Extend Harm Reduction Program Services into South County
- ✓ 8. Execute communication/education/integration efforts to address regional stigma
- ✓ 9. Coordinate and optimize navigator and care coordination services
- ✓ 10. Initiate collective case management for high utilizers of law/Hospital/EMS services



✓ Project Completed  
 ✓ Project In Progress



# Historical Data Collection





# BHC's Data Collection Efforts and Challenges

- **Data Sources**

Our data comes from a variety of sources including law enforcement, emergency medical services, hospitals, public health entities, and behavioral health service providers.

- **Challenges**

We've faced several challenges, particularly around data consistency, integration across stakeholders, and ensuring the accuracy of data related to opioid use and mental health.

- **Current Focus**

We are currently working on improving data integrity, establishing consistent data collection methods, and integrating data from various entities including Therapeutic Courts to create a comprehensive view of the impact of our programs.

- [BHC's 2020-2023 Collective Data Report](#)





# BHC's Data Efforts – Insights and Progress

- **Targeted Interventions:** Focus on high-need groups (MVPs, D2Ds, NTPs) for tailored, effective solutions.
- **Data Integration Progress:** Initial success in combining EMS, hospital, and behavioral health data, though consistency challenges remain. Need to add Therapeutic Court data and address the lack of consistent tracking/duplication on REAL, CARES, LEAD programs.
- **Rising Mental Health Needs:** Increased calls highlight growing awareness and need for mental health services – unclear data consistency undermines accurate assessment.
- **Collaborative Success:** Strong cross-sector partnerships and input gives an opportunity for siloed agencies to understand each other's critical metrics and agendas in a way we didn't before working to collaborate on cross-sector data collection.
- **Data Gaps Identified:** Early recognition of gaps in behavioral health data guides future improvements – unclear data consistency undermines accurate assessment.
- **Strategic Resource Use:** While none of this data addresses the impact of Housing and Transportation in our rural county, it has risen as the key areas of need, though care coordination is what the data that has been collected would point to.
- **Dashboard Investment:** Ensure data integrity before investing in high-end dashboards to enhance decision-making tools.

- [BHC's 2020-2023 Collective Data Report](#)



# BHAC - Overview

- **The Jefferson County Behavioral Health Advisory Committee (BHAC) administers funding from the Hargrove Initiative, also known as the 1/10th of 1% Sales and Use Tax Grant Program. This is a Washington State law that allows counties to impose a sales tax to fund mental health, substance abuse, and therapeutic court services. The law was passed in 2005 as part of the Omnibus Mental Health and Substance Abuse Act. Counties can use the funds to support programs and services such as:**
  - Youth mental health and treatment
  - Housing for chemical dependency or mental health services
  - Behavioral health stabilization
  - Gambling treatment services
  - Case management
  - Transportation
- The BHAC is equivalent to Snohomish County's CDMH.
- See overview of CDMH presented by Randy Hayden, Advisory Board Chair. ([See slides 3-11](#))



# BHAC Data

- [BHAC 2023 Data Report](#)
- [2023 BHAC Data Dashboard Links](#)
- [2022-2023 SBHC Final Data Report](#)

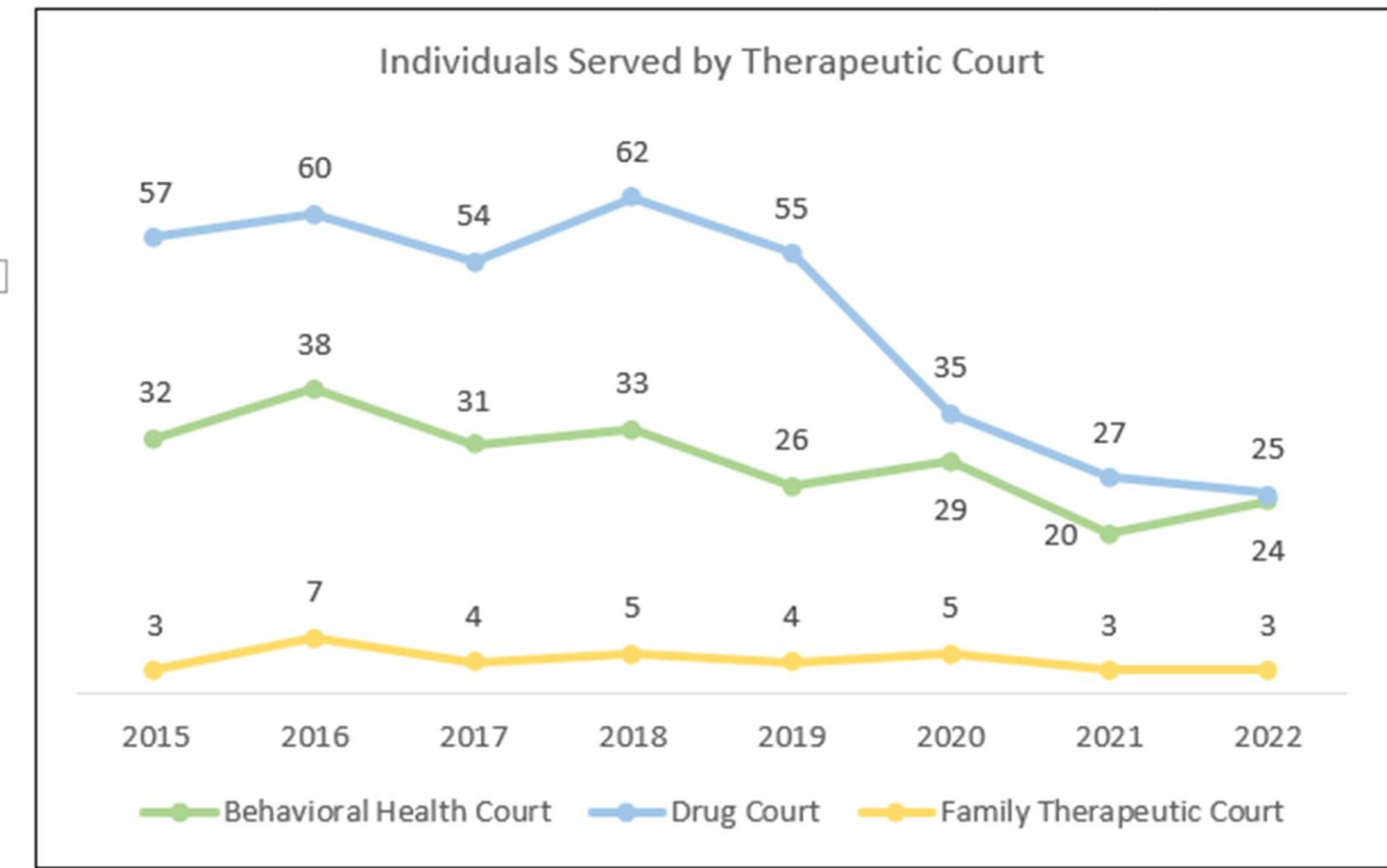
## 2022 Annual Report: Therapeutic Courts: Behavioral Health Court, Drug Court, and Family Therapeutic Court

**Program Description:** The therapeutic courts serve the population who are involved with the criminal justice system and would likely be incarcerated. The therapeutic courts provide an opportunity for participants to work on their underlying issues, therefore reducing the jail population and is an essential element of restorative justice.

	Behavioral Health Court							
	2015	2016	2017	2018	2019	2020	2021	2022
Individuals served	32	38	31	33	26	29	20	24
Graduates	2	5	6	10	1	6	1	6
Discharges	5	2	12	5	4	6	2	1

	Drug Court							
	2015	2016	2017	2018	2019	2020	2021	2022
Individuals served	57	60	54	52	55	35	27	25
Graduates	12	16	12	6	14	15	8	3
Discharges	11	13	24	5	17	3	6	8

	Family Therapeutic Court							
	2015	2016	2017	2018	2019	2020	2021	2022
Individuals served	3	7	4	5	4	5	3	3
Graduates	1	2	0	1	2	5	3	0
Children reunited	2	3	0	0	0	2	3	0
Discharges	0	1	0	1	0	0	0	1



Go to Page 8 of [BHAC's 2023 Data Report to Enlarge](#)

Link to review other relevant resources at the [BHC's Data Workgroup Resource page](#)







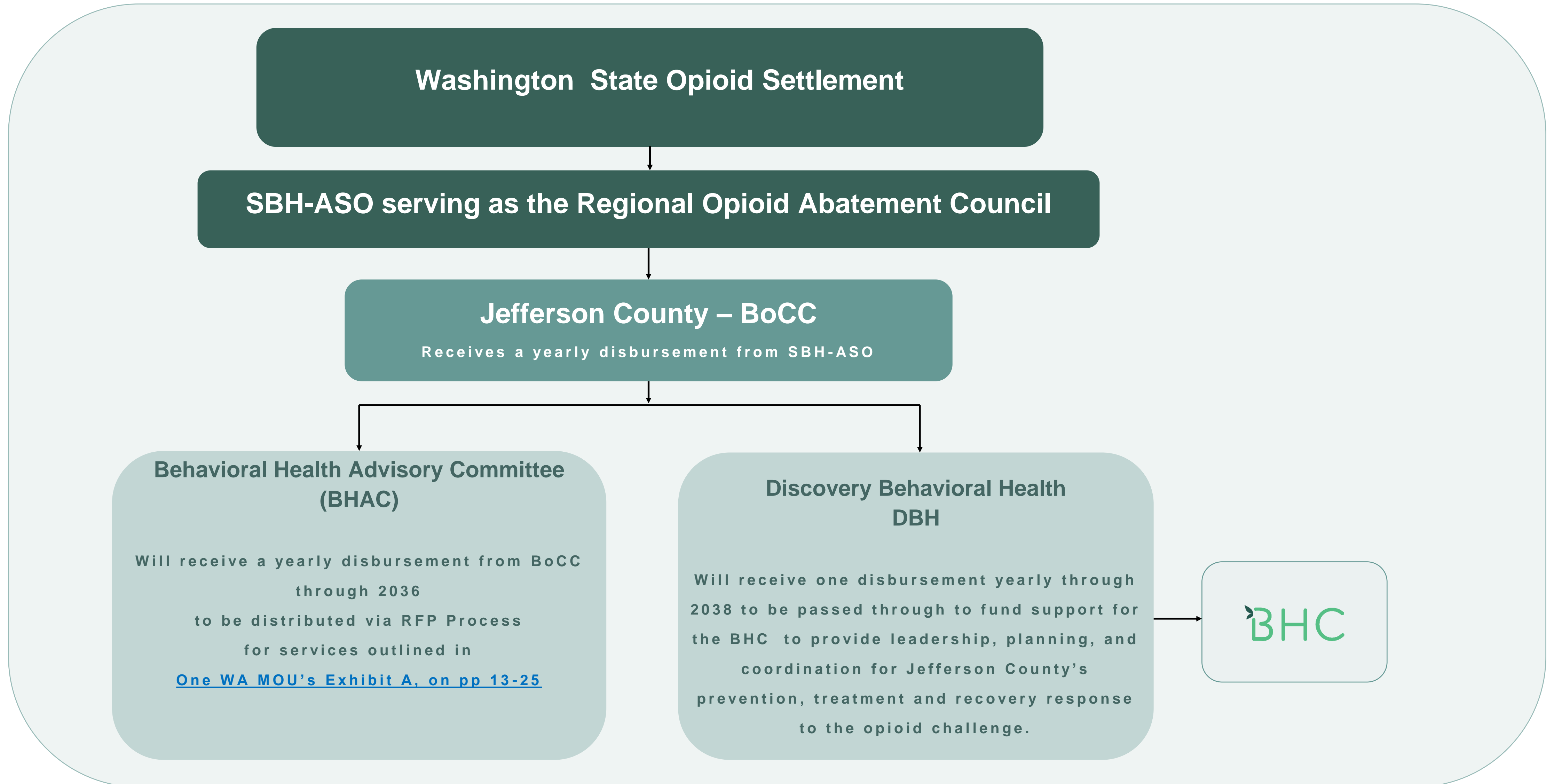
# JeffCo's OAC Funding







# Pathway for Opioid Abatement Funds Coming into Jefferson County





# Opportunity to Build on Respective Strengths



## BHAC

- Distributes 1/10<sup>th</sup> of 1% funding to the County's behavioral health service providers and programs.
- Hosts dashboard and collects data specific to BHAC-funded service providers and the services they provide with awarded funds, such as: Raw number of individuals served by the program; Basic client demographics; Number of individuals referred to: mental health services; substance use services; housing or social services; medical services; diverted from emergency services
- Will now additionally distribute Opioid Settlement funds focused to: Treat opioid use disorder; Support people in treatment and recovery; Provide connections to care; Address the needs of criminal justice involved persons; Address the needs of pregnant and/or parenting individuals and families; Prevent over-prescribing and ensure appropriate use of opioids; Prevent misuse of opioids; Prevent overdose deaths and other harms; and to first responders

## BHC

- A focused collective effort to support the development of a seamless behavioral health system that allows our community members to navigate smoothly to needed services. The BHC includes County agencies (i.e. hospital, public health, law enforcement, EMS, Public Defense, and Prosecutor's office) and local service organizations who collaboratively assess behavioral health landscape, set priorities, and pursue then provide collective funding.
- Works with HFPD, data analysis consultants, to analyze pre-hospital and HRSA-PIMS-data from across BHC members, including law enforcement, hospital, EMS, and member service providers.
- Will step into a leadership, planning, and coordination role for Jefferson County's prevention, treatment, and recovery response to the opioid challenge.
- Will continue to identify and pursue grant funding on behalf of the BHC to support the collective planning and implementation of collaboratively prioritized actions to improve the county's behavioral health system







# Current Opioid Settlement Funds

## APPENDIX A OPIOID SETTLEMENTS ESTIMATED ANNUAL PAYMENTS JEFFERSON COUNTY, WASHINGTON

ESTIMATED ABATEMENT PAYMENTS*							
Payment Year	Distributor	Janssen	WalMart**	Allergan	Teva	CVS	Walgreens
2022	\$70,766.72						
2023	\$36,262.38		\$71,485.24	\$13,265.27	\$11,989.61	\$14,744.11	\$28,716.20
2024	\$45,387.50		\$27,013.38	\$13,265.27	\$11,989.61	\$11,754.75	
2025	\$45,387.50		\$28,043.55	\$14,145.35	\$11,989.61	\$23,490.87	\$11,417.98
2026	\$45,387.50		\$1,030.17	\$15,606.21	\$11,989.61	\$23,490.87	\$11,417.98
2027	\$45,387.50		\$1,030.17	\$15,606.21	\$12,257.83	\$26,964.61	\$11,417.98
2028	\$60,295.72		\$1,030.17	\$15,606.21	\$14,105.43	\$27,636.32	\$11,417.98
2029	\$62,801.38			\$15,606.21	\$14,105.43	\$26,255.60	\$11,729.39
2030	\$62,801.38				\$14,105.43	\$24,874.88	\$20,350.85
2031	\$52,790.90				\$14,105.43	\$24,852.97	\$20,350.85
2032	\$52,790.90				\$14,105.43	\$24,852.97	\$20,350.85
2033	\$52,790.90				\$14,105.43		\$20,350.85
2034	\$52,790.90				\$14,105.43		\$20,350.85
2035	\$52,790.90				\$14,105.43		\$20,350.85
2036	\$52,790.90						\$40,701.69
2037	\$52,790.90						
2038	\$52,790.90						
<b>Totals:</b>	<b>\$896,804.78</b>		<b>\$129,632.68</b>	<b>\$103,100.73</b>	<b>\$173,059.71</b>	<b>\$228,917.95</b>	<b>\$248,924.30</b>

\* Local Government allocation of LG Share (50%) of Washington State Base and maximum Incentive Abatement Payments less estimated Government Fee Fund withholding.

\*\*Worst case maximum payment scenario. WalMart payments may be completed in as few as 3 years.

Opioid Settlement funds to be disbursed (less 10% for Opioid Abatement Council costs\*) from BoCC over 16 years as a pass through from DBH to BHC for to provide leadership, planning and coordination for Jefferson County's prevention, treatment and recovery response to the opioid challenge; and to search for and pursue additional collective funding for collaboratively defined priorities.

Opioid Settlement funds to be disbursed (less 10% for Opioid Abatement Council costs\*) from the BoCC to the BHAC over 14 years to be distributed via an RFP process for services outlined in One WA MOU's Appendix A. Additional pharmaceutical settlement fund amounts will likely be added to the funds shown to date.

\*The 10% of funds amount will be held until the costs associated with administration of these funds is clear. If there are remaining funds, those will also be distributed to the BoCC and on to the BHAC and to DBH-for-BHC.

### Resources

[WA State's 2021-22 Opioid and Overdose Response Plan](#)

[WA DOH Overdose Prevention, Recognition and Response web page](#)





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2029	\$62,801.38						
2030	\$62,801.38						
2031	\$52,790.90						
2032	\$52,790.90						
2033	\$52,790.90						
2034	\$52,790.90						
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3/2024: Distributor Fund Update for BHC:

A prepayment for Year 7 from a Distributor Settlement entity, in the amount of \$19,977.20, has come through the SBH-ASO and will be directed to Jefferson County for the BHC. Revised funding/timing is as follows:

2024 Funds	2028 Funds
\$45,387.50	\$60,295.72
+ \$19,770.20	- \$19,770.20
<b>\$65,157.70</b>	<b>\$40,525.52</b>
- 6515.70	- 4052.55
<b>\$58,642.00</b>	<b>\$36,472.97</b>

Opioid Settlement funds to be disbursed (less 10% for Opioid Abatement Council costs\*) from BoCC over 16 years as a pass through from DBH to BHC for to provide leadership, planning and coordination for Jefferson County's prevention, treatment and recovery response to the opioid challenge; and to search for and pursue additional collective funding for collaboratively defined priorities.

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\*\*Worst case maximum payment scenario. WalMart payments may be completed in as few as 3 years.

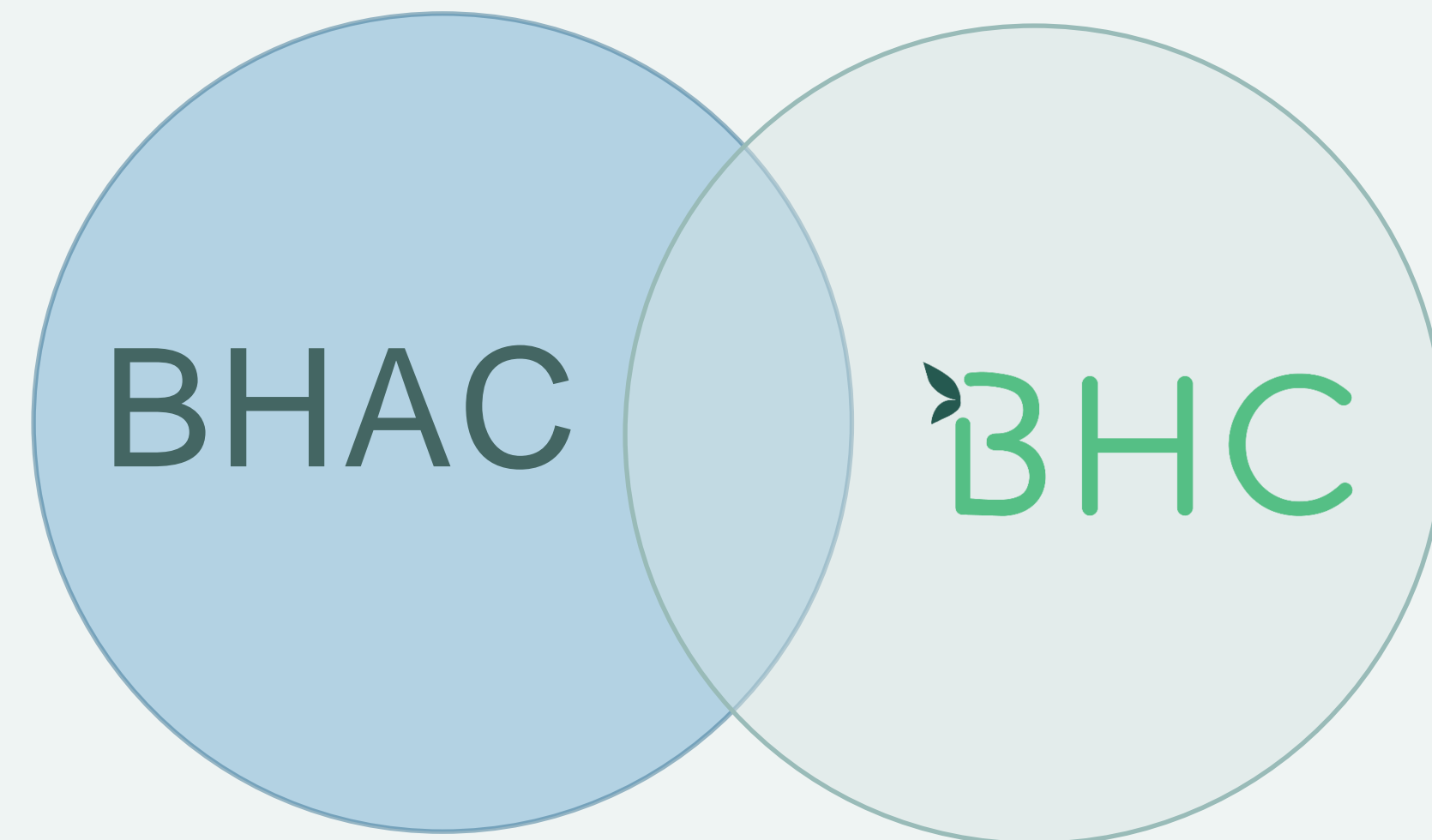


# Moving Forward



An MOU will be developed to explicitly define the intentional ways the BHAC and BHC will be linked going forward, including:

- Bring BHAC on as a BHC member to facilitate knowledge and insight exchanges to optimize BHAC administration of funds supporting Jefferson County's behavioral health services.
- Maximize the impact of the BHAC and BHC's data collection efforts to generate collaborative analysis and insight generation to support priority-setting and follow-on action.







# OAC Funding & BHC's Next Steps

## Build Organizational Infrastructure

- **Establish and Formalize BHC Phase 2** with MOU that includes governance, bylaws, meeting attendance requirements, and any relevant Data Sharing Agreements
- **Review BHC Members and Recruit** where needed
- **Develop and institute an MOU** that structures the BHC/BHAC linkages
- **Conduct Strategic Planning** integrating Insights from 5/30/24 BHAC Planning meeting
- **Complete Build-out and Maintain JeffCoBHC.org website**

## Advance BHC Initiatives

- **Provide leadership, planning, and coordination** for Jefferson County's prevention, treatment and recovery response to the opioid challenge
- **Define Data Collection and Analysis Priorities and Implement**
- **Pursue funding** to identify and plan interventions that advance the enhancement of patient care coordination across the care continuum: from pre-hospital care to post-acute discharge. (RHNDP-P App submitted 1/2024)
- **Continue Community Conversations to address BH-related stigma** throughout the County

Payment Year	Distributor	
2022	\$70,766.72	✓
2023	\$36,262.38	✓
2024	\$45,387.50	
2025	\$45,387.50	
2026	\$45,387.50	
2027	\$45,387.50	
2028	\$60,295.72	
2029	\$62,801.38	
2030	\$62,801.38	
2031	\$52,790.90	
2032	\$52,790.90	
2033	\$52,790.90	
2034	\$52,790.90	
2035	\$52,790.90	
2036	\$52,790.90	
2037	\$52,790.90	
2038	\$52,790.90	
<b>Totals:</b>	<b>\$896,804.78</b>	

\$96,326.19 was transmitted to DBH for “2022-2023 Opioid Settlement”. This funding will support BHC Administration and Initiatives through 9/2024.





# Updates: OAC Funding & BHAC's Next Steps

## May 30, 2024 – BHAC Planning Meeting Insights

See this [unofficial Meeting Note summary developed from the BHAC's session](#).

This document also provides an early look at how the BHC might proceed by integrating the assessment data gathered by the BHAC. BHC members plan to consider the BHAC's "assessment" content from the May 30, 2024 meeting as they articulate collaborative priorities for future action plans, funding pursuits, and project implementation. For details on identified needs, cross-referenced with the WA MOU Opioid Abatement Strategies, refer to Appendix A, starting on page 12.





# Data Dashboard Approach





# BHC's Data Dashboard Investment Considerations

- **Prioritize Data Consistency & Reliability**  
Ensure data collection processes are stable and trustworthy before major investments.
- **Avoid High-End Dashboards Prematurely**  
Premature investment in sophisticated dashboards is unwise if data lacks integrity.
- **Leverage Basic Tools Early On**  
Utilize simple tools for initial data analysis and trend identification.
- **Evolve with Data Maturity**  
Invest in advanced dashboards as data quality and consistency improve.



# Future Spending Plans



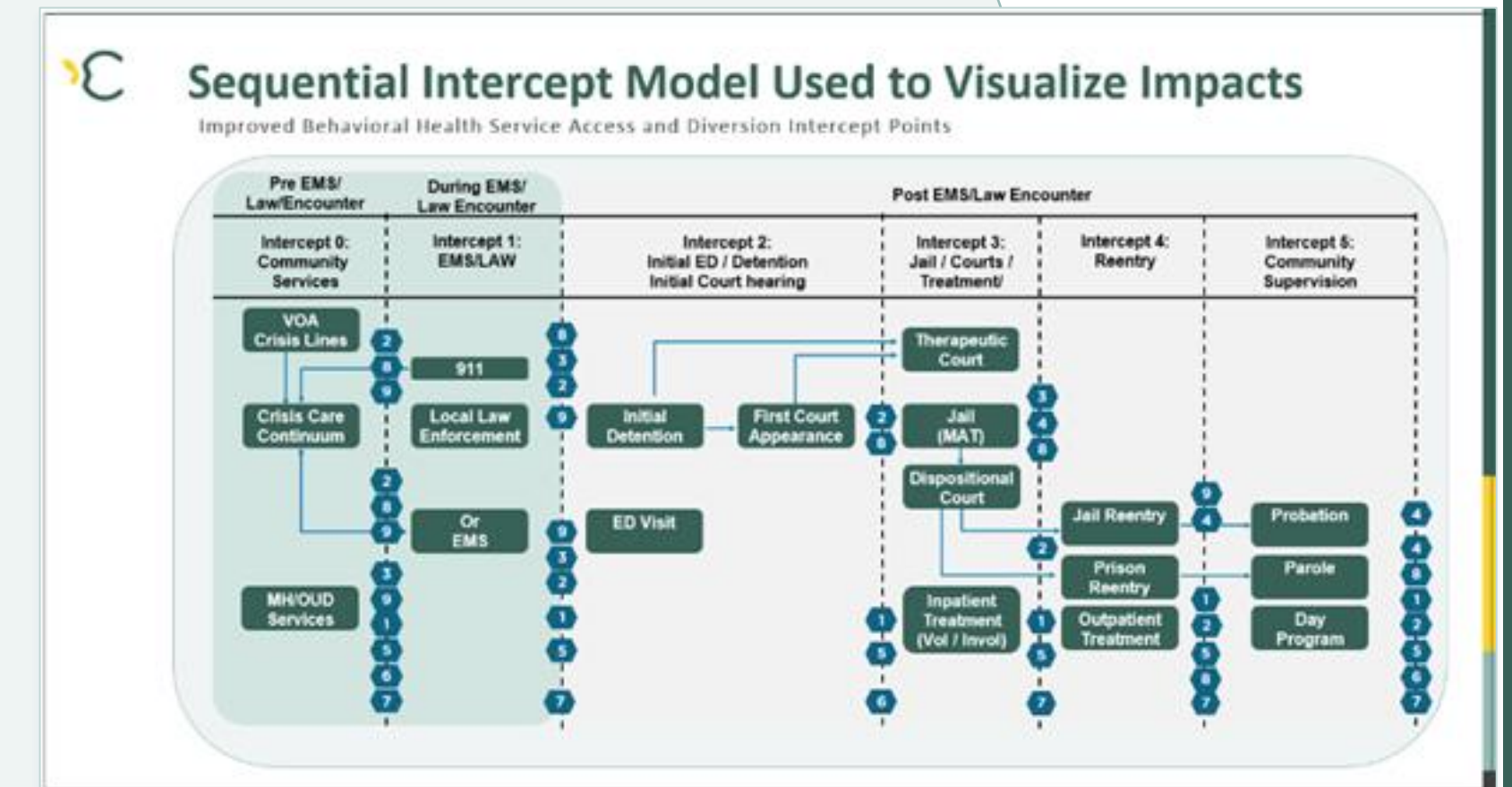




# Priorities – August 2024

The BHC's historical data collection and analysis pointed to the following as key areas for investment and action planning/implementation

- Care coordination amongst relevant Consortium members who are all intersecting with the same client. A specific subset of this is collective case management for high utilizers of law/Hospital/EMS services
- Coordinate and optimize navigator and on-the ground care coordination programs such as REAL Team, CARES, LEAD, etc.
- Harm Reduction: Naloxone education and Emergency box installation and profile-raising; relationship-building and intentional dialogue with those we are serving
- Execute expanded Community Conversations Initiative to address stigma related to mental health and substance use at all levels of the continuum.
- Although the BHC doesn't specifically collect data on the impact of housing and transportation in our rural county, the BHAC's 5/30/24 meeting suggests that these are the primary areas of need. However, they are likely too large to be fully addressed by Opioid Settlement funding alone.





# Naloxone Box Installation & Videos

The first 11 public access naloxone boxes are/will be placed:

1. Outside Believe In Recovery Offices
2. Recovery Café (up outside 24-hour access)
3. Port Townsend Library (inside by AED at checkout desk)
4. Port Hadlock Library  
(Installed inside, at back of the library by the DVDs/Media, access during library open hours)
5. Quilcene Fire Station (up outside the front door 24-hour access)
6. Brinnon Fire Station (up outside the front door 24-hour access)
7. Quilcene community center (up outside the front door 24-hour access)
8. Brinnon community center (up outside the front door 24-hour access)
9. Tri Area community center (up outside the front door 24-hour access)
10. Haines St. park and ride, transit station in PT. (Not up yet. Date TBD)
11. Four Corners transit station in Pt. Hadlock. (Not up yet. Date TBD)

**Help us identify where additional boxes could be installed!**

Ideas: DSHS, Water Street public restrooms, fairgrounds, boatyard, skatepark, Mountain View building

[Jefferson County's Free Naloxone Locations](#)

[SBH-ASO's Naloxone Location Map Development](#)

[Harm Reduction Video](#)

[Naloxone Training Video](#)





# BHAC's 5/30/24 Planning Meeting – Brainstorm Results

## Inferred Action List

- **Develop and Implement a Harm Reduction Resource Center** a daily operation, where various agencies offer support and provide a space for people.
- **Expand Existing Services rather than creating new ones.**
- **Enhance Transportation Services** such as a dial-a-ride service for SUD treatment; subsidize taxi services for transportation needs related to SUD treatment and recovery; Implement smaller, flexible transit services for immediate transportation needs.
- **Provide Supportive Services in Housing Locations:** Implement supportive services in housing locations and inpatient treatment facilities; Collaborate with tribes for inpatient facilities.
- **Improve Mental Health Crisis Response and Long-Term Options:** Increase access to mental health crisis response and long-term mental health options that accept Medicaid; Consider local stipends to providers for accepting Medicaid.
- **Enhance Peer Support Programs:** Support and expand peer support programs; Implement scholarship programs to attract peer support workers to Jefferson County.
- **Develop Systems Navigation:** Introduce a systems navigator role to assist individuals in accessing services and overcoming barriers.
- **Increase Wellness Education and Prevention Efforts:** Enhance wellness education and destigmatization efforts in schools and communities
- **Provide Wrap-Around Services:** Address the diverse needs of individuals in treatment and recovery, & admin support/meeting basic needs.

## Inferred Action List – Cont'd

- **Expand Housing and Supportive Housing Options**, including supportive housing options for individuals in recovery; housing for individuals with substance use disorder (SUD), including those in recovery; and small-scale assisted living options for individuals returning from treatment.
- **Implement Contingency Management Strategies:** Provide Visa cards loaded with cash for personal use as incentives for treatment adherence.
- **Increase Training for First Responders and Employers:** Develop standardized mental health and substance abuse training for first responders. Provide training for employers on how to work with and support employees in recovery.
- **Address Shelter Needs:** Develop emergency, long-term, and sober shelters; safe camping spaces for individuals who do not want to go into housing.
- **Develop Mobile Response Programs:** Implement mobile response programs to bring services to underserved areas.
- **Foster Collaboration Between BHC and BHAC**
- **Address Stigma and Discrimination:** within the community and among those struggling with addiction.
- **Improve Employment and Transitional Housing Services** to provide individuals in recovery with something to look forward to and help meet their basic needs.
- **Recruit More Mental Health Professionals**

[See BHAC 5/30 Meeting Summary, Follow-on BHC Exploration Topics, & Results Cross-walked with WA MOU Abatement Strategies Spreadsheet](#)







# Priorities – August 2024

The BHC's historical data collection and analysis pointed to the following as key areas for investment and action planning/implementation

- Care coordination amongst relevant Consortium members who are all intersecting with the same client. A specific subset of this is collective case management for high utilizers of law/Hospital/EMS services
- Coordinate and optimize navigator and on-the ground care coordination programs such as REAL Team, CARES, LEAD, etc.
- Execute expanded Community Conversations Initiative to address stigma related to mental health and substance use at all levels of the continuum
- While none of the data the BHC collects looks specifically at the impact of Housing and Transportation in our rural county, the BHAC's 5/30/24 meeting surfaced those two needs as the primary areas of need





# Jefferson County Patient Care Continuum Consortium (JCPCCC)

RHNDP-P Grant Funding Application Submitted January 2024

## Proposed Outputs

- CHA Report focused on NTP's, MVPs, and D2Ds
- Interventions Report
- Strategic and Sustainability Plans

## Proposed Outcomes

- Streamlined patient throughput and reduced unnecessary hospital visits
- Improved coordination and access for targeted patient groups
- Strategic framework for long-term improvements in rural healthcare.

## Jefferson Healthcare

Submitted by Jefferson Healthcare, on behalf of the Jefferson County Patient Care Continuum Consortium (JCPCCC), including Jefferson Healthcare, Discovery Behavioral Health Care, East County Medical Council, and Jefferson County Public Health.

This funding proposal aims to support the JCPCCC to create Strategic and Sustainability Plans focused on improving patient care coordination through data-based decision-making.

The planning effort proposed targets three specific groups:

- pre-hospital, non-transport patients,
- frequent emergency room visitors, and
- patients facing discharge challenges

## Performance Period

July 2024 - June 2025

## Budget

### Personnel

\$64,238 for project direction and facilitation.

### Travel, Supplies, and Other

\$5,000 for necessary operational expenses.

### Contractual Services

\$26,000 for expert advisory, data analysis, and legal compliance.

**Indirect Costs** \$4,761.90

**Total:** \$99,999.90.





# Considerations Going Forward?





# Considerations?

- **Start with Data Integrity**

Ensure data collection processes are consistent and reliable before making significant investments in a dashboard.

- **Phased Dashboard Investment**

Adopt a phased approach, beginning with basic tools and gradually advancing to more sophisticated solutions as data quality improves.

- **Leverage Funders and Stakeholders for broader Insights**

Engage funders (e.g., MAC Group, CDMH Committee, North Sound Behavioral Health Administrative Organization, North Sound Accountable Communities of Health) and stakeholders, including the populations we aim to support, to optimize funding and define data metrics that give insight around specific needs, particularly in rural areas, during priority-setting and planning.





**Extra Stuff😊**







# 8/2024 Snohomish Related Content

## Snohomish County Joint Information System: Drug Use Crisis Response Update August 1, 2024

### Latest data show lower rate of non-fatal overdoses so far this year compared to record-setting 2023

While overdose rates in Snohomish County remain alarmingly high, there is some good news in the latest data update.

After a record-setting 2023, the number of non-fatal opioid overdoses has been lower so far in 2024. However, they remain higher than earlier years. In 2023, there were an average 106 non-fatal overdoses each month, a steep climb from 2022's monthly average of 65. In the first half of 2024, there have been an average of 84 non-fatal opioid overdoses per month.

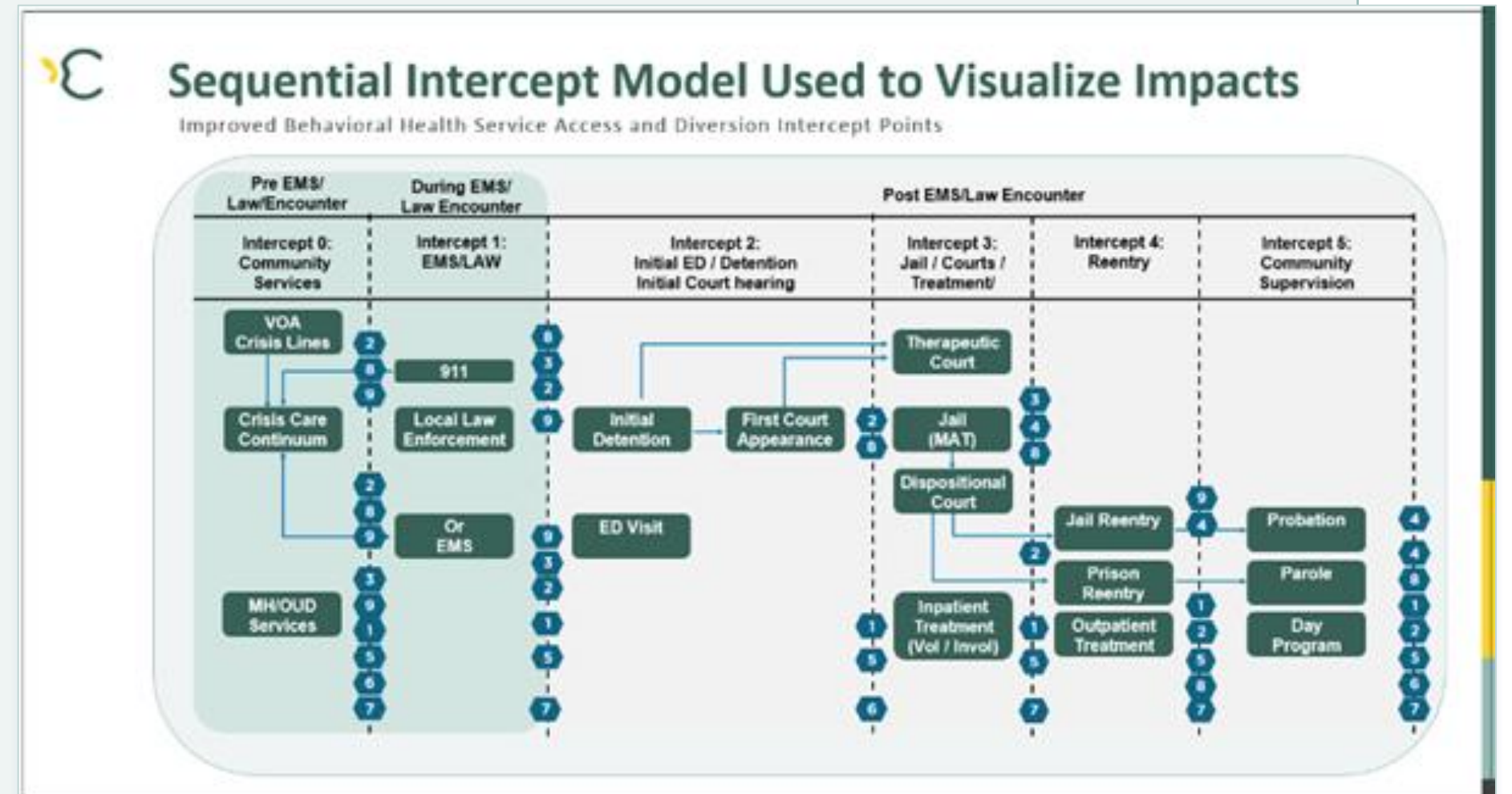
The data also show that disparities persist in the impact of the opioid crisis. Snohomish County residents who are Black/African American or American Indian/Alaska Native are over-represented in overdose numbers compared to their representation in the county population overall.

MAC Group partners continue to work toward reducing both fatal and non-fatal overdoses. Among recent efforts is a partnership with first responders to launch leave-behind programs with kits that include prevention information and naloxone. The Snohomish County Health Department's data team also has laid the groundwork for gathering data from a new field buprenorphine induction project working with emergency medical services (EMS).

The data dashboard at [www.snohomishoverdoseprevention.com/data](http://www.snohomishoverdoseprevention.com/data) is updated quarterly, and the latest update goes live this week.



- [MACPrevWkgrp 7/23/2024 Mtg Pkt](#)
- [SnoCoSIMS](#)
- [Beyond SIMS Doc](#)
- [We're in the same article!](#)







# North Sound Doing Something Similar?

## Olympic Connect Will Bring:

- Funding
  - o for case management for social needs
  - o to expand & enhance social needs resources & services
  - o to build capacity & provide training for CBWs
- Shared regional technology, including a regional resource directory
- Outreach, engagement, and communication
- Data, analytics, and reporting
- Continuous improvement

**Open Now!**

**FUNDING OPPORTUNITY**

**Community-Based Care Coordination Partners**

**ELIGIBLE APPLICANTS**

- Community & Social Service Organizations
- First Responders
- Government Agencies
- Health Care Organizations
- Public Health
- Tribal Partners
- Other organizations with presence in the Olympic region

**Materials:**

- Overview & Instructions
- Application (download)
- Frequently Asked Questions

**FUNDING OVERVIEW**

OCH seeks to contract with partners throughout the Olympic region (Clallam, Jefferson, Kitsap) to provide care coordination services to address community member social needs like housing, job training, childcare, food access, and more.

**KEY DATES**

DATE	EVENT
AUGUST 6	Application and details released
SEPTEMBER 10	Application deadline
EARLY OCTOBER	Virtual interviews with application finalists
OCTOBER 15	Final decisions
NOVEMBER 1	Contracts start

[See Overview of Olympic Peninsula ACH's CARES Connect Program that is just starting up.](#)

Maybe this is what Sound Pathways and Conquer are teaming up to do...or North Sound ACH?

Olympic Connect: A unified network of partners that seamlessly connects people to the support they need to thrive.

