

 King County

MIDD

Supporting behavioral
health and recovery

2022 Summary Report



WELCOME

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This Summary Report provides an overview of the MIDD Behavioral Health Sales Tax Fund’s performance during 2022 and meets annual reporting requirements for the MIDD fund.¹ The complementary online MIDD Data Dashboard provides more comprehensive results and initiative-level details for 2022 and previous years. Most notably, the dashboard provides greater detail on geography, demographics, performance measures, and expenditures.

To fully explore MIDD’s overall results, visit the interactive [MIDD Data Dashboard](#).

[MIDD Data Dashboard](#)

For best viewing experience

This report is intended to be read on a screen and includes navigational links at the top of each page. For the best experience, using a PDF viewer rather than a web browser to navigate the report is recommended.

Alternate Formats: Call 206-263-9100
or TTY Relay 711

¹ MIDD is referred to in King County Code and related legislation as the mental illness and drug dependency fund, tax, or levy.

FROM THE EXECUTIVE

To the King County community,

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Sincerely,



Dow Constantine

Dow Constantine,
King County Executive

FROM THE KING COUNTY BEHAVIORAL HEALTH AND RECOVERY DIVISION DIRECTOR

To the King County community,

Welcome to the 2022 MIDD Summary Report and Data Dashboard!

In 2022, MIDD continued its two-decade record of supporting people to recover in the community, improve wellness, and avoid institutions like jail and hospitals. In this report, we are pleased to highlight how MIDD continues to be integral to the behavioral health system and moves the system closer to meeting residents' needs.

As behavioral health needs grow, it is imperative that we stabilize and strengthen the capacity of the community-based care system. Currently, the effects of behavioral health workforce and funding shortages are being felt acutely in our communities. Often, people can't be treated quickly. Wait times are long, and care is delayed or sometimes nonexistent. Demand for MIDD services remained high in 2022, and the impacts of staffing vacancies, pressures on system infrastructure, and growing need all converged this past year to challenge the system and the people it seeks to serve.

Given this, King County pursued additional approaches in 2022 to address systemic challenges that extend beyond what MIDD can address, and that have grown more pressing since the inception of MIDD programs in 2008.

In 2022, Executive Constantine introduced the Crisis Care Centers levy. The levy, passed by the County Council and then by voters in 2023, will create a countywide network of five crisis care centers, restore 111 residential treatment beds in the region, and invest in the recruitment and retention of the community behavioral health workforce. In 2022 and again in 2023, the state made significant investments in behavioral health, including Medicaid rate increases and a \$100 million investment in the provider workforce. With support from King County, many MIDD funded programs used these state funds to support hiring and retention bonuses and expand recruitment efforts.



As it is increasingly clear that more support and resources are needed to create a connected behavioral health crisis system, we revised our approach to sharing information about MIDD. The Summary Report showcases key outcomes and themes in MIDD's implementation in 2022. The report links throughout to the online MIDD Data Dashboard, an interactive tool that gives users the ability to dive deep into MIDD data and outcomes with powerful flexibility. The dashboard has details for each of MIDD's 52 initiatives, and demographics and outcome data for the fund overall and by initiative. It also contains fiscal and evaluation information. Provider and client stories will be shared on the DCHS blog and social media. Follow DCHS on Instagram at @kingcountydchs and on the department's blog, Cultivating Connections, at dchsblog.com, to find stories, blog posts, and videos that tell MIDD's story throughout the year.

I'm proud to offer this report with gratitude to MIDD's many partners. Thank you for your collaboration and your dedication to improving the resilience of our whole community.

PHOTO

UPDATED SIGNATURE

Isabel Jones, Interim Director,
King County Behavioral Health and Recovery Division



MIDD plays a critical role in King County's strategy to increase access to mental health and substance use disorder services. MIDD makes possible many of King County's most nimble responses to urgent community needs.

ABOUT MIDD

Since 2008, MIDD has funded high-quality programs and services that, collectively, reduce reliance on jails, emergency rooms, and hospitals, and create connections to community for King County residents most in need. MIDD is a local fund source created to address behavioral health needs in King County that otherwise go unmet by funding from state and federal sources.

MIDD POLICY GOALS

- 1 **Divert** individuals with behavioral health needs from costly interventions, such as jail, emergency rooms and hospitals.
- 2 **Reduce** the number, length and frequency of behavioral health crisis events.
- 3 **Increase** culturally appropriate, trauma-informed behavioral health services.
- 4 **Improve** health and wellness of individuals living with behavioral health conditions.
- 5 Explicit **linkage** with, and **furthering** the work of, King County and community initiatives.²

² King County Code 4A.500.309. <https://kingcounty.gov/code4A.500.309>

MIDD IN 2022

In 2022, MIDD funded 153 community partners who served 19,281 people across King County through 52 initiatives.

MIDD's investments across King County in 2022 resulted in reductions in behavioral health crisis episodes and reduced the use of costly and often traumatic interventions like psychiatric hospitals, emergency department admissions, and jail bookings for participants in MIDD programs. At the same time, MIDD helped people access a wide range of care in their community. See highlighted outcomes in blue.

The pandemic has had and continues to have a profound effect on mental health and substance use, with increasing numbers of people experiencing anxiety, depression, and loneliness. These challenges were compounded by the impacts of opioid and stimulant use, especially fentanyl, spread across the country and in our region in the past year, with overdoses growing to a record level in 2022.³ Layered on top is a behavioral health workforce shortage, where available staff and resources are often overwhelmed by the need for services, with workers underpaid, overworked, and stretched too thin.

MIDD participants experience fewer crisis episodes, emergency department admissions, jail bookings, and hospitalizations over time.

3 King County Fatal Overdose Dashboard. [Kingcounty.gov/depts/health/overdose-prevention/fatal-overdose](https://kingcounty.gov/depts/health/overdose-prevention/fatal-overdose)

OVERALL MIDD RESULTS HIGHLIGHTS IN 2022



crisis service episodes among adults, over the long term.⁴



emergency department admissions, over the long term.



jail bookings among adults, over the long term.



psychiatric inpatient admissions by program participants, over the long term.



percent of youth with no new additional crisis service episodes.



⁴ Long-term results are based on participants enrolled in 2019, comparing participant use of costly systems the year before MIDD enrollment to their third year of services. Long-term results for crisis service episodes instead compare the first year of services to the third year.

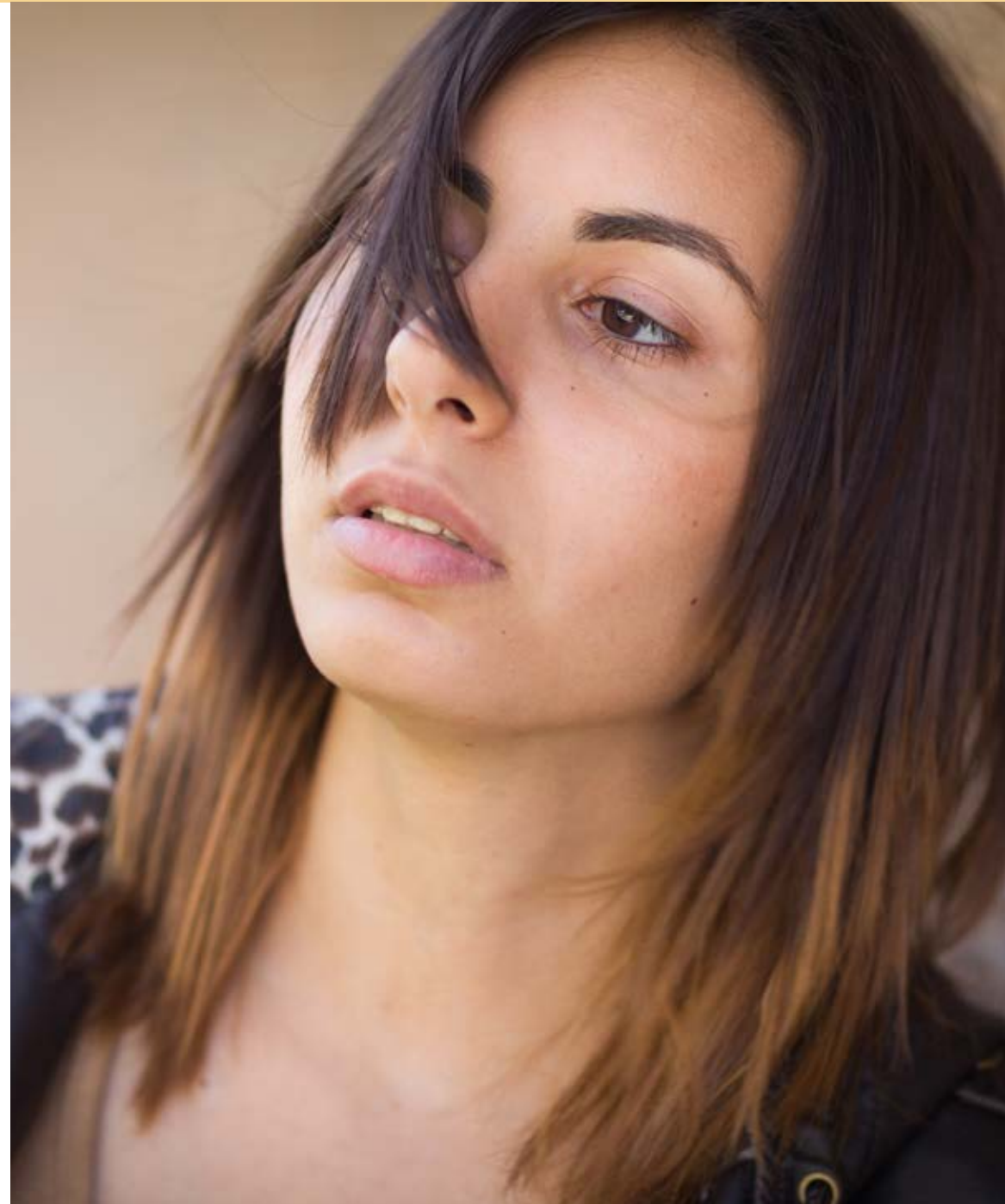
In the face of these challenges, MIDD's investments across the behavioral health spectrum serve as a foundational role within the system that yield short- and long-term benefits in participants' lives, while reducing pressure on a severely overextended and understaffed system. Many of King County's most nimble responses to behavioral health need in communities across the county were made possible by MIDD funds, including expanded access to next day appointments for substance use disorder, peer strategies to help people navigate their return to community after a psychiatric hospitalization, increased distribution of life-saving naloxone, and direct outreach to youth and adults experiencing homelessness in an effort to bring low-barrier treatment directly to people in need.

MIDD also funded upstream interventions to prevent or intervene early when behavioral health needs arise, keeping common and treatable challenges from growing into crises. MIDD initiatives help fill a need in the overall system that bolsters community-based response and helps the community heal from trauma, build coping skills, and utilize resources to stay well.

This report provides the MIDD fund's overarching 2022 results and describes outcomes from each of MIDD's strategy areas. It also includes discussion and data about key themes from the implementation of MIDD in 2022, such as the importance of meeting people where they are in the community, systemic challenges directly impacting the workforce, the importance of peers with lived experience, and the large returns on upstream investments in youth mental health.

[Visit the interactive MIDD Data Dashboard to see initiative level outcomes, under *Measuring MIDD performance*.](#)

[MIDD Data Dashboard](#)



MIDD STRATEGY AREAS

MIDD delivered programs and services across five strategy areas in 2022. MIDD supports services to enhance a countywide continuum of care that supports recovery and care in community, is focused on prevention, and reduces disparities.

Prevention and Early Intervention (PRI) initiatives ensure that people get the support they need to stay healthy and keep concerns from escalating. These initiatives help people stay healthy and keep behavioral health concerns from escalating. Programs include early assessment and brief therapies, as well as expanded access to outpatient care for those without Medicaid coverage. Programs equip clinicians, first responders, and community members with tools and resources to identify people who are at risk of behavioral health conditions and to respond in a culturally responsive way to those who need support for substance use or mental health concerns.

Initiatives under this strategy area include:

- PRI-01 Screening, Brief Intervention and Referral to Treatment
- PRI-02 Juvenile Justice Youth Behavioral Health Assessments
- PRI-03 Prevention and Early Intervention Behavioral Health for Adults Over 50
- PRI-04 Older Adult Crisis Intervention/Geriatric Regional Assessment Team
- PRI-05 School-Based Screening, Brief Intervention and Referral to Treatment
- PRI-06 Zero Suicide Initiative Pilot
- PRI-07 Mental Health First Aid
- PRI-08 Crisis Intervention Training - First Responders
- PRI-09 Sexual Assault Behavioral Health Services
- PRI-10 Domestic Violence and Behavioral Health Services and System Coordination
- PRI-11 Community Behavioral Health Treatment

Collectively, PRI initiatives reduce potential for harm and connect individuals with resources and services. In 2022, these initiatives served over 6,200 individuals. Outcomes across this strategy area include:

- Anxiety symptom scores improved for 76%-81% of participants (depending on the program).
- Depression symptom scores improved for 72%-80% of participants (depending on the program) for programs in the PRI strategy area.
- Adult jail bookings decreased between 66% and 82% (depending on the program) over the long-term.
- Emergency department visits decreased between 20% and 40% (depending on the program) over the long-term.

Crisis Diversion (CD) initiatives work to ensure that people in crisis get the help they need to avoid hospitalization or incarceration. Programs help people stabilize and get connected with community-based services through multiple channels, including expedited access to outpatient care, multidisciplinary outreach teams, crisis facilities, and alternatives to incarceration.

Initiatives under this strategy area include:

- CD-01 Law Enforcement Assisted Diversion
- CD-02 Youth Detention Prevention Behavioral Health Engagement
- CD-03 Outreach & In-Reach System of Care
- CD-04 South County Crisis Diversion Services
- CD-05 High Utilizer Care Teams
- CD-06 Adult Crisis Diversion Center, Respite Beds and Mobile Behavioral Health Crisis Team
- CD-07 Multipronged Opioid Strategies
- CD-08 Children’s Domestic Violence Response Team
- CD-09 Behavioral Health Urgent Care Walk-In Clinic Pilot⁵
- CD-10 Next Day Crisis Appointments
- CD-11 Children’s Crisis Outreach and Response System
- CD-12 Parent Partners Family Assistance
- CD-13 Family Intervention Restorative Services
- CD-14 Involuntary Treatment Triage
- CD-15 Wraparound Services for Youth
- CD-16 Youth Respite Alternatives⁶
- CD-17 Young Adult Crisis Stabilization
- CD-18 Response Awareness, De-escalation and Referral

In 2022, Crisis Diversion initiatives served over 9,300 individuals. Outcomes across this strategy area include:

- Adult crisis service episodes decreased between 57% and 90% (depending on the program) over the long-term.
- Psychiatric inpatient hospitalizations decreased between 15% and 48% (depending on the program) over the long-term.
- Adult jail bookings decreased between 60% and 84% (depending on the program) over the long-term.
- Emergency department visits decreased between 4% and 79% (depending on the program) over the long-term.

^{5, 6} Initiative not funded in the King County 2021-22 Adopted Budget

Recovery and Reentry (RR) initiatives help people become healthy and reintegrate into the community safely after a crisis. Services focus on the needs of the whole person to support recovery and sustain positive change. Programming includes providing stable housing, services for people experiencing homelessness, employment support services, peer-based recovery supports, and community reentry services after incarceration.

Initiatives under this strategy area include:

- RR-01 Housing Supportive Services
- RR-02 Behavioral Health Services at Community Center for Alternative Programs
- RR-03 Housing Capital and Rental
- RR-04 Rapid Rehousing-Oxford House Model
- RR-05 Housing Vouchers for Adult Drug Court
- RR-06 Jail Reentry System of Care
- RR-07 Behavioral Health Risk Assessment Tool for Adult Detention
- RR-08 Hospital Re-entry Respite Beds
- RR-09 Recovery Café
- RR-10 Behavioral Health Employment Services & Supported Employment
- RR-11a Peer Bridger Programs
- RR-11b Substance Use Disorder Peer Support
- RR-11c Peer Respite⁷
- RR-12 Jail-based Substance Use Disorder Treatment
- RR-13 Deputy Prosecuting Attorney for Familiar Faces
- RR-14 Shelter Navigation Services⁸
- RR-15 Pretrial Assessment and Linkage Services

MIDD initiatives in the Recovery and Reentry Strategy Area served over 3,400 individuals in 2022. Outcomes across this strategy area include:

- Adult jail bookings decreased between 47% and 96% (depending on the program) over the long-term.
- Emergency department visits decreased between 21% and 65% (depending on the program) over the long-term.
- Between 72% and 75% of program participants (depending on the program) reported reduced substance use among programs.

7, 8 Initiative not funded in the King County 2021-22 Adopted Budget

System Improvement (SI) initiatives strengthen access to the behavioral health system and equip providers to be more effective. Programs support the behavioral health workforce, improve the quality and availability of core services, and support community-initiated behavioral health projects.

Initiatives under this strategy area include:

- SI-01 Community-Driven Behavioral Health Grants
- SI-02 Behavioral Health Services in Rural King County
- SI-03 Quality Coordinated Outpatient Care
- SI-04 Workforce Development

Systems Improvement initiatives support King County's behavioral health system through several channels: community-designed, culturally and linguistically appropriate services; greater reach into rural unincorporated communities; implementation of quality improvement programming; and workforce development to support behavioral health countywide. Together, these initiatives improve the quality, reach, and availability of behavioral health services for all King County residents.

Together, Community Driven Behavioral Health Grant and Behavioral Health Services in Rural King County funded over 29 small agencies across King County to address the unique needs within their diverse communities.



Therapeutic Courts (TX) offer people experiencing behavioral health conditions an alternative to traditional criminal legal system proceedings and support them in achieving stability and avoiding further legal system involvement.

Initiatives under this strategy area include:

- TX-ADC Adult Drug Court
- TX-CC Community Court
- TX-FTC Family Treatment Court
- TX-JTRAC-BHR Juvenile Therapeutic Response and Accountability Court-Behavioral Health Response
- TX-RMHC Regional Mental Health Court and Regional Veterans Court
- TX-SMC Seattle Mental Health Municipal Court

MIDD invests in a system that supports recovery and care in community, is focused on prevention, and reduces disparities.

Therapeutic Court initiatives served over 1,000 individuals in 2022. Outcomes across this strategy area include:

- Adult jail bookings decreased between 74% and 83% (depending on the program) over the long-term.
- 72% of participants in Juvenile Therapeutic Response and Accountability Court had no new juvenile charges in the 12 months following enrollment in the program.

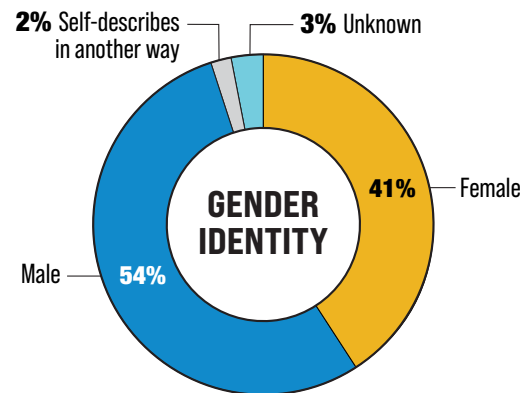
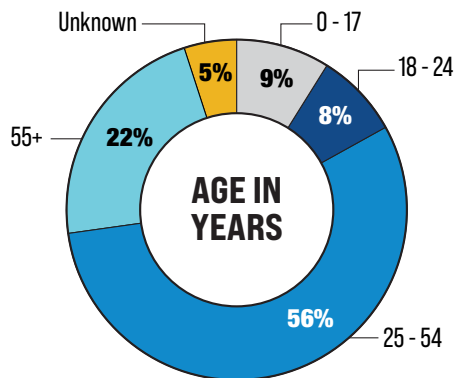
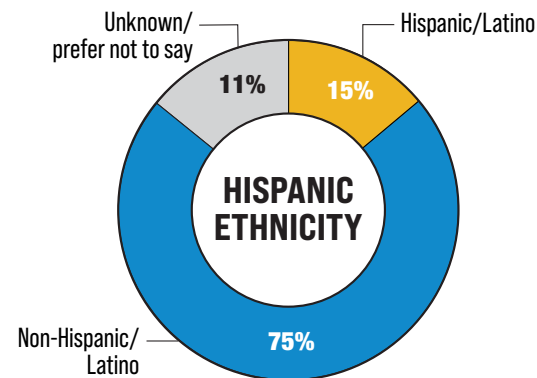
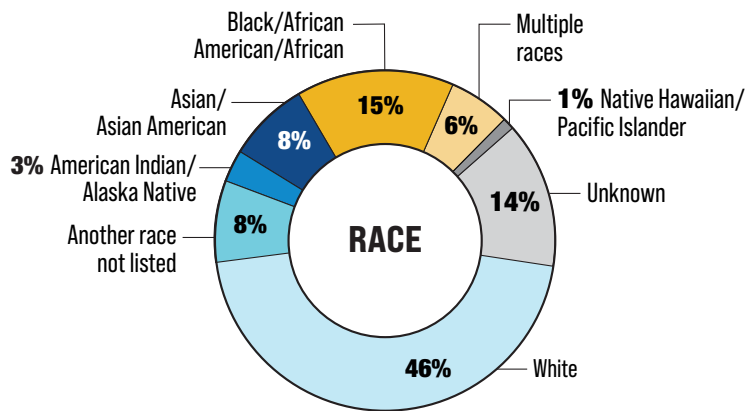
Visit the interactive MIDD Data Dashboard to see initiative level program descriptions and outcomes.

[MIDD Data Dashboard](#)

WHO MIDD SERVES

MIDD supports the health and well-being of residents throughout King County by funding programs that deliver services across the behavioral health continuum, including prevention and early intervention, crisis diversion, treatment, community reentry, and recovery services.

Total number served: 19,281



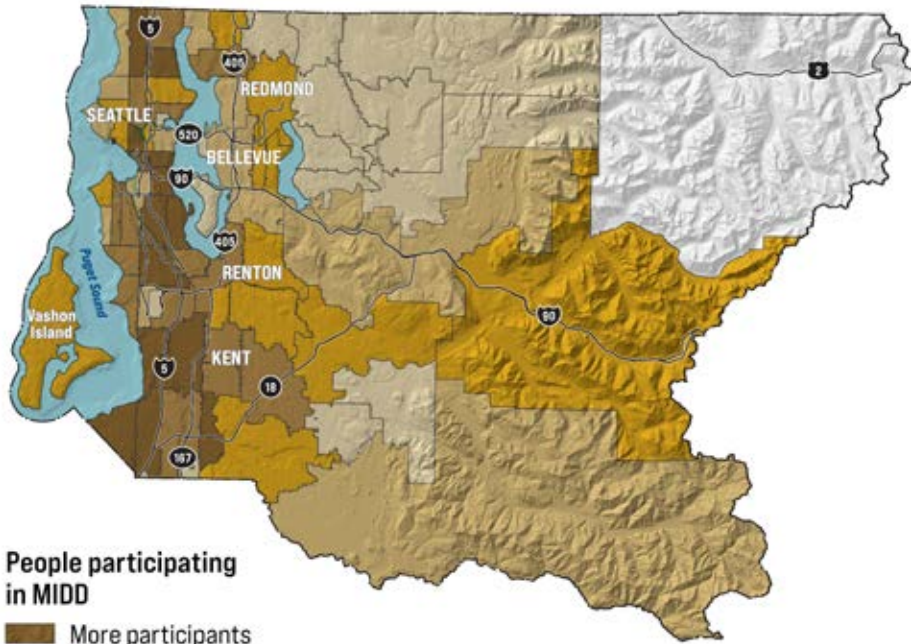
Visit the interactive [MIDD Data Dashboard](#) to see detailed demographic information, under *Who MIDD serves*.

[MIDD Data Dashboard](#)

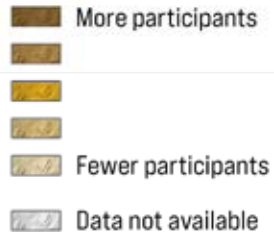
WHERE MIDD PARTICIPANTS LIVE

MIDD served people most in need across King County

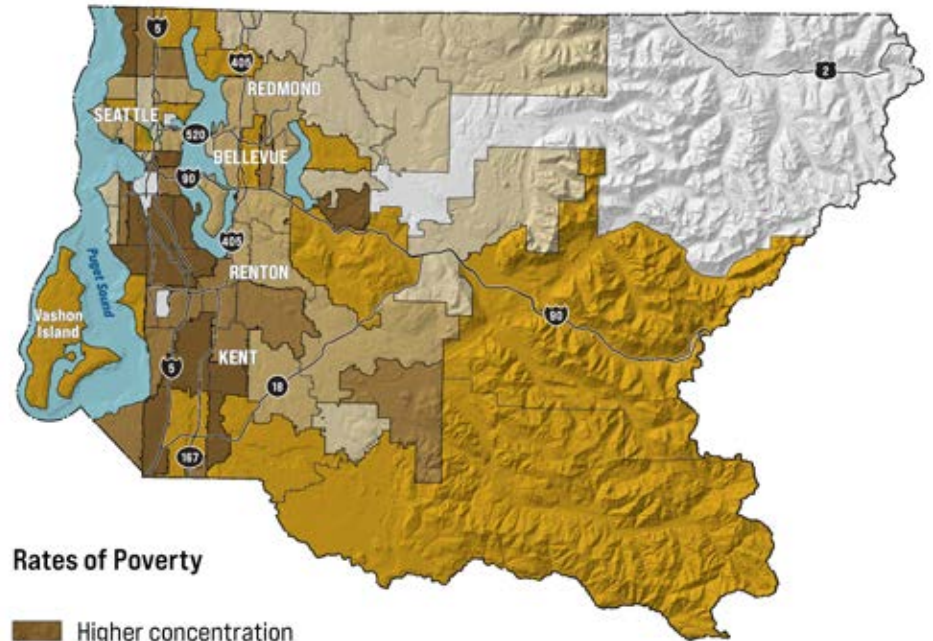
People participating in MIDD by zip code



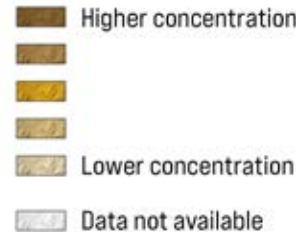
People participating in MIDD



Households living in poverty by zip code



Rates of Poverty



Visit the interactive MIDD Data Dashboard to see detailed demographic information, under *Where MIDD participants live*.

[MIDD Data Dashboard](#)

Care in Community | Workforce Challenges | Peer Impact | Youth Investments | Housing & Stability

MEETING PEOPLE WHERE THEY ARE

Over **4,800** people were engaged by MIDD-funded outreach programs, including Law Enforcement Assisted Diversion (LEAD), mobile crisis teams, or Medication for Opioid Used Disorder (MOUD) in shelters and encampments. These programs are central to King County's response to the fentanyl and overdose crisis.

Meeting people where they are located in the community increased participants' engagement with programs and services and greatly reduced interactions with costly systems. Collectively, MIDD-funded outreach programs contributed to the following outcomes:



Adult crisis service episodes **decreased** between

70%
and
89%

(depending on the program) over the long-term.



Adult jail bookings **decreased** between

60%
and
84%

(depending on the program) over the long-term.



Emergency department visits **decreased** between

39%
and
52%

(depending on the program) over the long-term.



Psychiatric inpatient hospitalizations **decreased** over

45%
over the long-term among

participants engaged by MIDD-funded mobile crisis teams.



Visit the interactive MIDD Data Dashboard to see initiative level outcomes, under *Measuring MIDD performance*.

[MIDD Data Dashboard](#)

BEHAVIORAL HEALTH WORKERS AND PROVIDERS FACED SYSTEMIC CHALLENGES

Across the spectrum from prevention to crisis intervention, the **two most widespread challenges** MIDD providers faced in 2022 were:



- 1 A workforce strained under the magnitude of the need without the wages or supports to help sustain and retain workers.



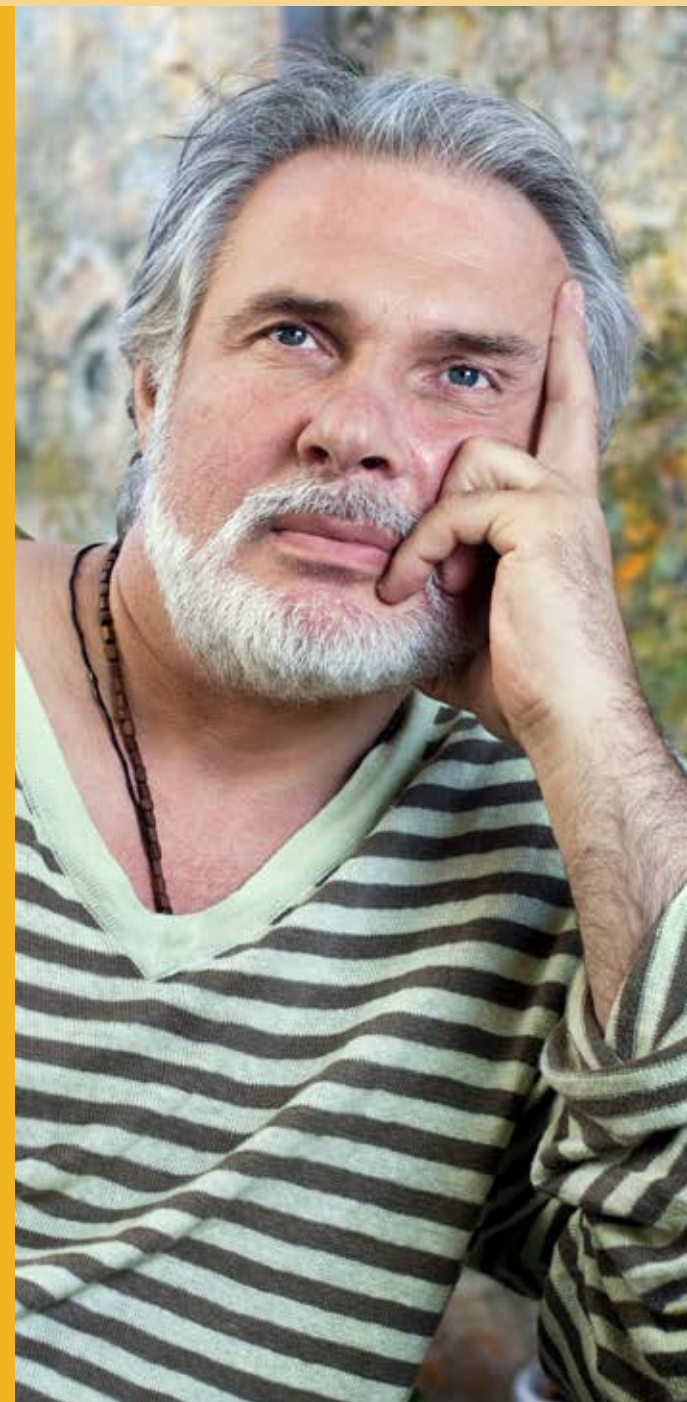
- 2 Growing demand for services and higher acuity of need.

Community-based providers facilitate and support recovery and stability for King County residents, yet chronic underinvestment in the behavioral health system creates and perpetuates structural challenges. MIDD supported providers with a seven percent economic adjustment in 2022, and MIDD System Improvement strategies provided additional funding to enable providers to outreach and engage vulnerable and hard-to-reach clients.

70% of MIDD initiatives reported staffing challenges in 2022, impacting service availability and delivery.

Visit the interactive MIDD Data Dashboard to see initiative level outcomes, under *Measuring MIDD performance*.

[MIDD Data Dashboard](#)



PEERS MAKE A DIFFERENCE

MIDD peer strategies served over 1,100 people in 2022. Peers are people who have lived experience in the recovery journey who can support others navigating similar situations. Peers can be an essential part of a multidisciplinary team in combination with clinicians. By bringing their shared understanding, respect, insight into navigating systems, and other challenges, peers can foster relationships that change lives.



Participants in **Peer Bridgers**, which helps people navigate their return to the community after being discharged from King County psychiatric hospitals, had a **73% reduction in psychiatric inpatient hospitalizations** and a **41% reduction in emergency department visits**.



Participants who engaged with **SUD Peer Support** had a **78% reduction** in jail bookings and **51% reduction** in emergency department visits.

Visit the interactive **MIDD Data Dashboard** to see initiative level outcomes, under *Measuring MIDD performance*.

MIDD Data Dashboard



INVESTING IN YOUTH MENTAL HEALTH AND PREVENTING CRISES

Over **1,000** youth were engaged in MIDD-funded services ranging from crisis outreach to wraparound supports. The importance of MIDD's investments upstream to intervene early on with youth facing behavioral health challenges in King County is underscored by the U.S. Surgeon General's rare public health advisory issued in late 2021 about the growing mental health crisis, with feelings of sadness, hopelessness, and suicidal thoughts and behaviors increasing by about 40 percent among young people in the ten years leading up to the pandemic.⁹



10,000 youth were screened in schools using the **School-Based Screening, Brief Intervention, and Referral to Treatment (School-Based SBIRT)** tool. When the screening identified an immediate safety concern, **81% of high school youth and 91% of middle school youth received a brief intervention.**



Over **90%** of the youth served by both the **Children's Crisis Outreach and Response System** and **Wraparound Services for Youth** had **no new crisis events** in the 12 months following their engagement in either program.



88% of youth involved in the criminal-legal system and served by **Family Intervention and Restorative Services** had **no new juvenile criminal charges filed** in the 12 months following their engagement in the program. Youth engaged with **Juvenile Justice Youth Behavioral Health Assessments** had similar success, with **73% having no new juvenile criminal charges.**

⁹ American Psychological Association. (2023). <https://www.apa.org/monitor/2023/01/trends-improving-youth-mental-health>

Visit the interactive MIDD Data Dashboard to see initiative level outcomes, under *Measuring MIDD performance*.

[MIDD Data Dashboard](#)

HOUSING LEADS TO INCREASED STABILITY

More than **1,000** people received housing support through MIDD-funded activities, including housing vouchers, rapid rehousing for people in early recovery, investments in construction and preservation of housing for individuals with behavioral health conditions and very low incomes.



Over 55% of adults experiencing chronic homelessness who were connected to permanent supportive housing through the **Housing Supportive Services** initiative **engaged with behavioral health services** and supports.

70%

Jail bookings decreased over 70% over the long-term among participants in MIDD programs providing housing support.

60%

Emergency department visits decreased over 60% over the long-term among participants in MIDD programs providing housing support.

70%

Over 70% of participants who received MIDD-funded housing vouchers and rapid rehousing reported **reduced substance use**.

Visit the interactive MIDD Data Dashboard to see initiative level outcomes, under *Measuring MIDD performance*.

[MIDD Data Dashboard](#)



MIDD EVALUATION

The MIDD evaluation aligns with the five policy goals adopted by the King County Council. MIDD initiatives link to one or more of these goals for the purposes of performance measurement and evaluation. The County evaluates progress toward each of the five MIDD goals to identify systems-level improvement and impact.

The MIDD evaluation uses a Results-Based Accountability (RBA) framework. The RBA framework asks questions about the quantity, quality, and impact of services:

- *How much did we do?*
- *How well did we do it?*
- *Is anyone better off?*

Visit the interactive [MIDD Data Dashboard](#) to see evaluation related information, under *How MIDD is evaluated*.

[MIDD Data Dashboard](#)



PROGRAM HIGHLIGHT

- Demand for naloxone, the medication that can reverse opioid overdose, grew significantly in 2022.
- **MIDD supported the distribution of 10,088 naloxone kits** through the Laced and Lethal mail order program, a **414% increase from 2021**.
- The **program distributed an additional 2,997 kits** to community stakeholders, a **69% increase from 2021**.

Read more about CD-07 Multipronged Opioid Strategies on the

[MIDD Data Dashboard](#)





CONTINUOUS IMPROVEMENT AND DATA INFORMED IMPLEMENTATION ADJUSTMENTS

MIDD applies a continuous improvement approach to its services to ensure that data and other information are used to inform program and process adjustments. In 2022, MIDD made several improvements to program implementation and administration based on opportunities identified by MIDD's partners or informed by data.

Continuous improvement efforts included incorporating equity and social justice more fully into program administration, addressing disproportional access to services and increasing inclusivity within MIDD-funded services, expanding models of service provision, incorporating new treatment approaches, and building a workforce that reflects the diversity of MIDD participants.

Seven MIDD initiatives used data to refine programming. These changes included implementing a Behavioral Health Interpreter Training Learning Collaborative to improve service delivery to people with limited English proficiency, developing innovative programming to keep youth engaged while awaiting services, and expanding the availability of next day appointments to include substance use disorder in addition to mental health.

Visit the [interactive MIDD Data Dashboard](#) to see a full list of changes to targets, under *How MIDD is improving*.

[MIDD Data Dashboard](#)



PROGRAM HIGHLIGHT

- Participants in **MIDD's Next Day Crisis Appointments** for mental health experienced a **90% reduction in crisis episodes** and a **52% reduction in emergency department visits** over the long term.
- Given this success, this initiative **expanded beyond mental health in 2022** to fund five agencies to provide next day crisis appointments for substance use disorders.

Read more about CD-10 Next Day Crisis Appointments on the

[MIDD Data Dashboard](#)

UPDATES TO PERFORMANCE MEASURE TARGETS

The implementation and evaluation of MIDD-funded programs requires occasional modifications as new information becomes available. Performance measure targets, which typically describe the anticipated number of people to be served by a MIDD initiative, should be considered in the context of system challenges, including workforce shortages. Targets are not typically adjusted from year to year to account for external system challenges but are maintained as a measure of initiative performance. However, MIDD may adjust performance targets when clear evidence exists that the original target was an over- or under-estimation of feasible service delivery.

In 2022, 21 of the 45 MIDD initiatives with established targets exceeded target numbers, and an additional 12 were within 20 percent of reaching the set target. Initiatives that did not meet their target number served for the year cited several difficulties with program implementation, including staffing challenges, changes to referral pathways, changes to eligibility criteria, and limited access to the jails. Jail access is starting to improve post COVID-19.

Visit the [interactive MIDD Data Dashboard](#) to see a full list of changes to targets, under *How MIDD is improving*.

[MIDD Data Dashboard](#)



PROGRAM HIGHLIGHT

The **Sexual Assault Behavioral Health Services initiative** continued its focus on providing **culturally appropriate** and **linguistically accessible services** to **Spanish speaking survivors** in South King County.

In 2022, 88% of survivors of sexual assault who received a repeat assessment showed improvement in symptoms.

Read more about PRI-09 Sexual Assault Behavioral Health Services on the

[MIDD Data Dashboard](#)





MIDD INVESTMENTS

2022 Procurement Update

MIDD partners with community-based organizations through contracts to deliver most MIDD-funded services. Competitive procurement processes are in place to support and promote coordination across funding sources as well as to expand access. MIDD-funded initiatives released eight procurements in 2022. Focus areas included expanding school-based screening in high schools, launching the Zero Suicide initiative, and implementing a pilot project in Contingency Management, an evidence-based behavioral therapy that provides motivational incentives to treat individuals living with substance use disorders.

Visit the interactive [MIDD Data Dashboard](#) to see all 2022 procurements, under *What MIDD invests in*.

[MIDD Data Dashboard](#)

2022 Financial Report

In 2022, MIDD sales tax revenues recovered to pre-pandemic levels. With an improved budget forecast in July 2021, most MIDD initiatives started 2022 with economic adjustments added to their restored baseline budgets. In addition, King County also reprogrammed \$1.8 million of underspent funds. These budget modifications reallocated funds appropriated in the adopted budget based on MIDD Advisory Committee guiding principles and with the formal support of the MIDD Advisory Committee.

While some initiatives struggled to spend their whole budget amount, largely due to workforce challenges, 71 percent of MIDD initiatives spent at least 90 percent of their allocation. Twenty-nine percent of which exceeded their 2022 budget allocations, as their budgets were increased with 2021 unspent funds.

Please note this table below shows year two spending against the 2021-22 biennial budget and reflects the financial status of the fund as of December 31, 2022.

STRATEGY AREA	2022 Budget	2022 Actuals	Percent Spent
Prevention and Early Intervention	21,111,634	16,815,785	80%
Crisis Diversion	27,234,186	22,690,048	83% ¹⁰
Recovery and Reentry	9,500,339	9,873,378	104% ¹¹
System Improvement	7,968,892	2,109,644	26% ¹²
Therapeutic Courts	12,944,554	11,571,518	89%
Special Projects	10,200,000	9,797,544	96%
Administration and Evaluation	4,705,523	3,298,811	70%
Total	99,065,128	76,156,728	77%

10 Two initiatives within this Strategy Area are supported by braided funds from other local funds. Term-limited funds were drawn down in 2022 prior to using MIDD funds.

11 Two initiatives within this Strategy Area received an allocation of unspent 2021 MIDD funds in 2022.

12 Initiative SI-03: Quality Coordinated Outpatient Care had lower actual expenditures than originally budgeted due to timing of startup, staffing challenges, and rollout and refinement of programming components.

Visit the interactive MIDD Data Dashboard to see all 2022 budgeted amounts and actual expenditures for individual initiatives, under *What MIDD invests in*.

[MIDD Data Dashboard](#)

ADVISORY COMMITTEE

The MIDD Advisory Committee is an advisory body to the King County Executive and King County Council that seeks to ensure that the implementation and evaluation of MIDD initiatives is transparent, accountable, collaborative, equity-focused, and effective.

The Advisory Committee is a unique partnership of leaders from the health and human services and criminal legal communities, bringing together a broad range of viewpoints, including people in recovery, community behavioral health providers, and policymakers.

Visit the [MIDD website](http://www.kingcounty.gov/MIDD) to see a roster of 2022 MIDD Advisory Committee members. www.kingcounty.gov/MIDD

PARTNERS

MIDD services are carried out in partnership with more than 150 behavioral health provider agencies, community organizations, non-profits, schools, and public or governmental agencies to improve behavioral health outcomes in King County.

Visit the [MIDD website](http://www.kingcounty.gov/MIDD) to see a list of MIDD partners. www.kingcounty.gov/MIDD

“We believe that all community members should have equitable access to affordable behavioral health services that respect and value their unique beliefs, cultures, identities, languages, lived experiences, and notions of health and well-being as strengths to promote recovery and resilience.”

Excerpt from MIDD Equity Definition, which guides the MIDD Advisory Committee’s recommendations to the King County Executive and the King County Council. Read the full definition here www.kingcounty.gov/MIDD



MIDD

Supporting behavioral health and recovery

