

MIDD 2 Initiative SI-02: Behavioral Health Services in Rural King County (NEW)

How does the program advance the adopted MIDD policy goals?

This program primarily addresses the adopted MIDD policy goal of “improve health and wellness of individuals living with behavioral health conditions.”

Currently, vast sections of King County have no publicly funded behavioral health clinic option.¹⁵⁷ Rural King County residents lack access to these service sites due to transportation barriers including long distances to behavioral health clinic sites in suburban cities, and very limited bus service in rural areas. In the case of Vashon Island, the only linkage to some aspects of the outpatient service continuum is via ferry.¹⁵⁸

This initiative’s grant process not only may address access issues common to rural communities nationally, but also concerns identified at a local level. Examples of these may include stigma associated with receiving care,¹⁵⁹ elevated rates of obesity, diabetes, and suicide,¹⁶⁰ and/or high prevalence of adverse childhood experiences which are a strong predictor of anxiety and other mental illnesses.¹⁶¹

1. Program Description

◇ A. Service Components/Design (Brief)

King County will provide small grants to support targeted community-initiated behavioral health-related services or programs designed by rural communities to address issues of common concern. This initiative will address the need to provide behavioral health assistance to people who live in underserved rural areas, cities in rural areas, or rural towns, that typically lack adequate access to behavioral health clinics and providers.

The grant program will serve the seven community service areas (CSAs) in King County, as well as identified underserved cities and towns adjoining these CSAs. The CSAs are: Bear Creek/Sammamish, Snoqualmie Valley/Northeast King County, Four Creeks/Tiger Mountain, Greater Maple Valley/Cedar River, Southeast King County, West King County unincorporated areas,¹⁶² and Vashon/Maury Islands. Adjoining cities and towns that would also be eligible may

¹⁵⁷ <http://kingcounty.maps.arcgis.com/apps/PublicInformation/index.html?appid=eaf2562bfde3437f8519fa90a2eaff0b>

¹⁵⁸ “Notes from Group Discussion: Snoqualmie Healthy Community Coalition, Sept 17, 2015, facilitators: Alan Painter and DeAnna Martin,” and “Vashon Social Services Network, August 14, 2015,” provided by Alan Painter, King County Community Services Area program manager. The unique transportation barriers experienced by Vashon Island residents were also highlighted in a January 2016 Best Starts for Kids focus group.

¹⁵⁹ “Notes from Group Discussion: Snoqualmie Healthy Community Coalition, Sept 17, 2015, facilitators: Alan Painter and DeAnna Martin,” and phone consultation with Ross Marzolf, January 2016. Participants in MIDD review and renewal focus groups in both Maple Valley (Southeast King County) and Preston (Snoqualmie Valley) in January 2016 identified stigma reduction campaigns and community education about mental illness as priorities for potential funding.

¹⁶⁰ King County Health Profile, December 2014.

¹⁶¹ Adverse Childhood Experiences ACES 2013 Report.

¹⁶² The West King County Unincorporated Areas CSA serves unincorporated pockets of West King County that are generally near suburbs where publicly funded behavioral health clinics are located. As a result, funding requests from this CSA will be expected to demonstrate that proposed projects are coordinated with any nearby existing providers and avoid duplication of efforts.

include Skykomish, Duvall, Carnation, Snoqualmie, North Bend, Covington, Maple Valley, Black Diamond and Enumclaw.¹⁶³

This approach will build upon or replicate the existing structures of King County's CSA Community Engagement Grant program,¹⁶⁴ the Best Starts for Kids (BSK) trauma-informed and restorative practices small grants initiative,¹⁶⁵ and/or the Community Organizing Program small grant initiative previously operated by King County DCHS. It will provide MIDD resources to enable local organizations or grassroots coalitions located within any CSAs or identified adjoining cities or towns to design specific initiative(s) that address key felt needs that relate to behavioral health treatment, prevention, recovery or service access.¹⁶⁶

Funded projects may include, but are not limited to:

- Community-initiated population health initiatives such as engagement efforts, classes, prevention/outreach campaigns, or one-time events related to mental health or substance abuse, and/or
- Specific behavioral health services requested by a rural community that are expected to meaningfully address its self-identified needs.¹⁶⁷

◇ B. Goals

As described above, this program will improve health and wellness primarily by promoting access to services and community self-determination in areas of King County that have very little access to publicly funded behavioral health care. It is intended to respect and support communities' rural character, as outlined in King County's Comprehensive Plan¹⁶⁸ and Countywide Planning Policies.¹⁶⁹

¹⁶³ The specific targeted geographic areas for this grant program may be adjusted in response to population trends and/or changes in the availability of behavioral health services in different communities.

¹⁶⁴ Information about the existing Community Engagement Grant program, administered by King County's Department of Natural Resources and Parks, is available at <http://www.kingcounty.gov/exec/community-service-areas/engagement-grants.aspx>.

¹⁶⁵ <http://www.kingcounty.gov/elected/executive/constantine/initiatives/best-starts-for-kids.aspx>. BSK's small grant RFP was launched in May 2017.

¹⁶⁶ In addition to locally conceived, community-generated ideas and programming, applicants have the option to request funds under this initiative to help bring existing program models to their area, if they do not already have access to such services.

¹⁶⁷ Any program proposals that involve funding for ongoing staff will need to address costs and obligations associated with employing personnel, including insurance, workers' compensation, taxes, benefits, and minimum wages.

¹⁶⁸ <http://www.kingcounty.gov/depts/executive/performance-strategy-budget/regional-planning/king-county-comprehensive-plan/2016Adopted.aspx>

¹⁶⁹ <http://www.kingcounty.gov/depts/executive/performance-strategy-budget/regional-planning/CPPs.aspx>

◇ C. Preliminary Performance Measures (based on MIDD 2 Framework)¹⁷⁰

1. How much? Service Capacity Measures

As the funded programs will be designed by multiple different communities and customized to their particular felt needs, it is not yet known how many individuals will be served. Furthermore, as funded projects change from year to year, the number of people served will vary annually. However, the number of people served will be tracked for each project and aggregated for the initiative as a whole. The number of participating agencies and programs will be tracked as well.

2. How well? Service Quality Measures

- Improved perception of health and behavioral health issues and disorders

3. Is anyone better off? Individual Outcome Measures

- Reduced behavioral health risk factors
- Improved wellness and social relationships

◇ D. Provided by: Contractor

This grant program will be administered by County staff in consultation with stakeholders from each geographic area. All funded programs and services would be delivered by organizations with strong ties to the local communities being served.

2. Spending Plan

Year	Activity	Amount
2017	Community-initiated, time-limited small grants to local organizations within identified underserved rural areas, cities in rural areas, and/or rural towns	\$350,000
2017 Annual Expenditure		\$350,000
2018	Community-initiated, time-limited small grants to local organizations within identified underserved rural areas, cities in rural areas, and/or rural towns	\$359,100
2018 Annual Expenditure		\$359,100
Biennial Expenditure		\$709,100

¹⁷⁰ Throughout 2017, review and refinement of Results-Based Accountability (RBA) performance measures for MIDD 2 initiatives will be conducted whenever applicable, in consultation with providers. Updates to performance measures that may result from this collaborative process will be reported in the next MIDD Annual Report in August 2018.

3. Implementation Schedule

◇ A. Procurement and Contracting of Services

This initiative will require periodic, low-barrier requests for proposals (RFPs) – no less frequently than annually – to facilitate the selection of time-limited community-driven projects for funding. The level of complexity and requirements for these proposals will vary depending on the amount of the funding request.

Applicant organizations will be expected to demonstrate that they have leveraged matching contributions,¹⁷¹ with specific match requirements to be determined. Matching contributions may come in the form of funding from other sources or donated time, space, or other in-kind resources. Match requirements may change in subsequent years if grants are renewed.

An accessible, low-barrier application or RFP process will be established to provide predictable timing and process by which communities could request funds. Organizations selected for funding via this community-driven grant initiative would establish contracts or monitoring agreements with King County covering each proposed program or service and its associated time period.

Each funded project will contribute information that will be used for the MIDD Evaluation. The information provided about each project will contribute to the overall measurement of quantity, quality, and impact for this initiative, as outlined in 1.C above.

Criteria for possible time-limited renewal of the projects may be developed.¹⁷² When renewed grants are sought for equivalent or substantively similar projects after the first year, funding will most commonly be renewed partially.

Processes and requirements specific to particular funding levels, based on known procurement mandates and the overarching goals of the initiative, are outlined below.¹⁷³

¹⁷¹ Match requirements are part of both the CSA small grant program and the Community Organizing Program small grant initiative previously operated by King County DCHS, after which this initiative is modeled.

¹⁷² As of 2017, there is an expected limit of three years of funding per project or service through this initiative, subject to change. Potential factors to be considered in the decision whether or not to renew funding for a project or service may include: (a) the volume of people served; (b) other performance measures (such as those as referenced above); (c) community feedback about project effectiveness and engagement/organizing work; (d) efforts to enroll project participants in Medicaid, as applicable; and/or (e) the degree to which other funding sources beyond MIDD have been or will be leveraged to continue the service.

¹⁷³ The amounts and requirements outlined here are current as of 2017, but may be adjusted to fit with any changes to County procurement rules or other considerations.

Mini-Grants

Mini-grants, up to a certain maximum dollar amount,¹⁷⁴ will be awarded at least two times per year, to be directly funded through a simplified process, allowing small grassroots organizations or coalitions (many of whom may not otherwise contract with the County) to receive funds without encountering the added requirements associated with formal County contracts. County staff would provide oversight of grant expenditures, allowing for the possibility of disbursing funds either via small advance payments combined with reconciliation against actual expenditures or via simple expenditure reimbursement.

Mid-sized Grants

Grants slightly higher the mini-grant threshold are referred to as mid-sized grants¹⁷⁵ and may be awarded on an annual basis, subject to available funding, using County contracting processes. Every effort will be made to minimize administrative burdens associated with these contracts, including reduced fiscal auditing requirements when possible.¹⁷⁶ Simplified contracting will be available as applicable, building on existing processes in place for contracting with providers for small special projects. Reduced or waived insurance requirements may be available depending on the type of program or service proposed.

◇ B. *Services Start date(s)*

The first application/RFP round could occur in late 2017 or early 2018 with services to begin by mid-2018. On an ongoing basis, start dates and service duration will vary widely by project.

4. Community Engagement Efforts

Outreach to experts, key community members and policymakers will be conducted during the second half of 2017 to gather input about the operations and criteria for the initiative. This outreach will be coordinated with relevant Best Starts for Kids and/or Veterans and Human Services Levy community engagement efforts whenever appropriate. This process is expected to inform the framing of the first application/RFP round and the ongoing procedures and priorities of the grant program. A broad communications effort is also expected to be launched to ensure that groups in eligible areas are aware of the existence of this new funding opportunity for community-driven behavioral health-related projects.

¹⁷⁴ As of 2017, the maximum mini-grant amount will be \$9,999 per year per organization, subject to change.

¹⁷⁵ As of 2017, any mid-sized grants are expected to be awarded with amounts between \$10,000 and \$24,999 per year per organization, subject to change. This will allow multiple projects to be funded in each geographic area each year. However, larger requests may be considered under certain circumstances for well-coordinated community-driven projects that reflect the participation of multiple stakeholders, up to a maximum amount. As of 2017, the maximum mid-sized grant amount is expected to be \$49,999 per year per organization, subject to change.

¹⁷⁶ The degree to which fiscal auditing may or may not be required for mid-sized grants will depend on the size of the grantee organization and the amount of government funding it receives, not the size of the grants.