

Familiar Faces Steering Committee

Meeting Summary

May 4, 2017, 9:00 - 10:30 am, Chinook Room 121 401 5th Avenue, Seattle

Members Present: Heather Aman, Stephanie Brennan, Siobhan Brown, Caedmon Cahill, Chris Cates, Shana Clinton, Megan Condon, Michelle Conley, Todd Clark, Bridgette Folz (via phone), Chloe Gale, John Gilvar, Kelly Harris, Willie Hayes, Turina James, Betsy Jones, Mikel Kowalczyk, Daniel Malone, Bette Pine, Michele Plorde, Adrienne Quinn, Genevieve Rowe, David Ruskin, Jeff Sakuma, Donna Tucker, Sidney Wilson

Staff Present: Jesse Benet, Margo Burnison, Travis Erickson, Susan McLaughlin, Martha Gonzalez, Deb Srebnik, Kira Zylstra

Welcome and Introductions

9:00 a.m.

Adrienne Quinn welcomed guest and asked for committee introductions. Adrienne congratulated the Familiar Faces team for their award from the Association for Counties for diversion innovation.

Medicaid Demonstration Update

9:05 – 9:15a.m.

Susan McLaughlin gave a brief update on the waiver for the committee. The ACH members were seated and had their 1st meeting in April. The state has contracted with Manat. Their main role is to monitor ACH development for the state and help maximize leverage to the state in October. There is a certification process to start paying for the ACH. The project portfolio will be weighted and will be funded depending on a matrix. The project planning had community meetings, another will take place May 5, 2017 for the diversion project at the Boeing Center. The meeting will involve the 3 different approaches for intervention to generate ideas for a project plan. Some projects are more developed. Integrated primary care into mental health will be meeting to navigate a plan, still working on specific guidance from the state. The challenge with Familiar Faces is size of population served it is not large enough on a stand-alone basis. There are consideration to broadening the criminal justice that affects enough Medicaid lives. This will be for services that are not reimbursed by Medicaid. The total sum for transition and diversion add up to the same as care coordination.

Waiver Projects: Transitional Care & Diversion Intervention

9:15-10:20a.m.

Travis shared a handout of the optional projects. Travis asked LEAD for updates on effective approaches. LEAD reported there is over 400 clients with pre-crime, many have outstanding warrants. The social contact is made from community, attorneys and police officers that interact with clients. All of East and West anywhere on a metro line with King County sheriffs and are coordinating with docks. They are working toward an expansion, hoping to expand South by 2019. Municipal prosecutor has been hired recently. They are meeting with judges to explain what LEAD does. Things to improve: if the alert systems could be made aware of the LEAD client status. It's hard for them to know if/when clients are arrested and released, 80% of clients are homeless in the city. With years of social work this only goes

down to 50%, homelessness is the biggest structural problem. LEAD has a difficult time housing clients because landlords do not want to rent even with vouchers. There are issues with CEA, there needs to be other solutions for rapidly housing clients. Between LEAD and VITAL both have housing issues. Chris has requested for release on Mondays not Fridays. Even with resources landlords do not cooperate. Rental history gaps hinder the access to clients being housed, most cannot even negotiate with a bigger deposit.

In LA they are looking at clients that hit all the services and costed out expenses. LA has started to stratify to collaborate path ways with intensive wrap around services. Looking at overlap it's a very big project.

Travis asked how we could fast track to the South in 2019. Mikel reported it was a provider issue there needs to be a team and space in the south end. The challenge of budget is also an obstacle, it takes a lot of work to build it up. The staffing is critical and the South end has one of the largest population problems. The population in the South has been very resistant Chris tried to engage the community with town hall meeting. He only had 3 referrals in one year, it was challenging changing the community mindset. Gradual expansion is taking place to involve the community and change the climate.

Judge Tucker believes the biggest challenge in South King County is the division of 3 different judicial regions. Right now the system along with agencies need to work on the same goal. In South King County there is a rotation that works against success. The local police, Burien, City of Kent and Auburn are looking for help. They are hoping for a community court similar to Spokane. Redmond has Homeless Coordinator that works with the community and the client. The community is engaged and opt for treatment instead of punishment.

H.O.S.T is a street outreach program that searches common known areas and by referrals. This is small voluntary team. Housing is their issue as well, when an outreach person can take a client to a unit and let them stay it is far more effective. There is some overlap and a segment that are not touching the systems. Some are suffering in their own silence, non-disruptive clients. LEAD works with H.O.S.T team and once a month they have a meeting and they collaborate on the best system and partner with triage. It is small scale and time intensive. Jail feels that H.O.S.T is critical service. The release planning refers to H.O.S.T often, slow process.

Mobile crisis team is also a resource that intersects with the system. Landlords don't have the support to work with people. That is something VITAL is testing right now. Chris reported they are successful with landlords that they communicate with.

Susan looked at the toolkit and what will be measured. The measurement is planning implementation on reporting and being paid. An incentive payment, a delivery system transformation and activities payment comes after success. As projects are designed with project partners when an incentive is earned, the ACH determines if measures are successful they provide payments. This is still being worked out because the ACH could decide to keep funds to invest in housing or other LEAD programs. Betsy informed the group that there is a large amount of money coming to ramp up project with reimbursement opportunity. Medicaid dollars cannot be used for buildings. New Medicaid benefit will be available to pay for permanent supportive housing and redirect money

Other obstacles to work around:

- In July clients will have Medicaid suspended upon incarceration. Statewide all counties will need to cooperate with State Authority. Approximately, 80% of clients are in jail for under 24 hours, Medicaid is turned back on after release.
- The MCO is not the primary care provider how do we design a system that allows care coordination that works with all MCO's and works with other service plans.

Travis asked Major Clark about creating a system upon intake and finding partners to go to jail such as H.O.S.T team, LEAD team. Outpatient mental health benefit enrollees have an automatic notification system. The structure is there to connect the client to existing services. Jesse and Meagan teach social workers on how to navigate the court system. Prosecutors and law enforcement make decision on how to process the client.

Community Announcements & Updates

10:20-10:25 a.m

Jesse reminded the group of the homework provided by Dr. Hackman for Tuesday the 9th from 9:30-4:30
Individuals that did not attend day 1 of the retreat are welcome to attend day 2.

Wrap Up and Adjourn

10:25-10:28 a.m.

Next Meeting: June 1, 2017

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401 Fifth Avenue, King County Chinook Room 121, Seattle