



King County

Behavioral Health and Recovery Division

Department of Community and Human Services

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TO: MIDD Advisory Committee

FM: Susan Schoeld, Crisis Diversion Program Manager, Behavioral Health and Recovery Division (BHRD)

RE: CD-06: Adult Crisis Diversion Center, Respite Beds, and Mobile Behavioral Health Crisis Team Budget Increase

Background Information:

The Crisis Solutions Center (CSC), operated by the Downtown Emergency Service Center (DESC), provides King County first responders with alternative options to jail and hospital settings when engaging with individuals, age 18 and older, in behavioral health crisis. The intent of the facility is to stabilize and support individuals in the least restrictive setting possible, while identifying and directly linking them to appropriate and ongoing services in the community. The CSC has three program components – Crisis Diversion Facility (CDF), Crisis Diversion Interim Services (CDIS) and Mobile Crisis Team (MCT) – which together stabilize and support people in the least restrictive setting possible, while identifying and directly linking them to ongoing services in the community.

Rationale for Revision:

The CSC is a critical part of King County's crisis system. It must be maintained in order to keep the system functional. This program is often a primary resource for people who are in crisis and who are not part of the outpatient system. Designated Mental Health Professionals (DMHPs) refer clients to CSC who are in crisis, but do not meet the criteria for being involuntarily detained. Law enforcement, fire departments, and Emergency Medical Services personnel utilize this resource to avoid unnecessary hospitalization and/or jail stays. In addition, first responders and the Crisis Clinic refer clients to CSC who are in crisis but who are not currently enrolled with community behavioral health providers. The CSC programs work to build trust, reduce barriers to treatment and other supportive services, and keep individuals from cycling through inappropriate criminal justice and emergency systems, by connecting them to appropriate services to address their behavioral health needs.

DESC's extensive market research to determine prevailing competitive wages for the array of staff positions at the CSC's three program components has indicated that for the past several years the agency has been less able to successfully recruit or retain behavioral health provider staff than it was when the CSC was launched, due largely to the inability to offer competitive wages within the available funding provided by MIDD. Addressing wage-gap issues at the current funding levels will result in significant staffing reductions which may make the service model not viable. Staff to client ratios would substantially worsen, thereby decreasing program efficacy and increasing staff turnover.

King County recognizes the need for salaries to be adjusted to reflect a more equitable range, and that this is an issue throughout the behavioral health system. King County's MIDD plays a unique role for the CSC, as MIDD was the founding funder and remains the primary sustaining fund source for CSC programming that benefits people in crisis countywide.

CSC is also encountering a concurrent increase in facility costs due to a substantial increase in rental costs. (The funding level for the CSC program in 2019-20 will be determined as part of the County's biennial budget process.) Going forward, the ongoing financial feasibility of the current Seattle location will be assessed, with the understanding that DESC will begin to look for more sustainable options.

Therefore, a one-time \$900,000 (17%) increase in MIDD funding for 2018 is proposed, in order to ensure the continued availability and effectiveness of this essential crisis service by addressing wage-gap issues that threaten needed staffing levels, and providing short-term assistance with rising facility costs.

The intent of the initiative will not be impacted. This revision allows programming to continue at levels that maintain needed staffing ratios for the facility, including the personnel who provide essential service linkages to help people achieve stability after their stay at the CSC.