



**Mental Illness and Drug Dependency (MIDD)  
Oversight Committee (OC)  
October 28, 2010  
11:45 a.m.-12:15 p.m. networking lunch  
12:15 p.m. – 1:45 p.m.  
King County Chinook Building Rooms 121 & 123  
Meeting Notes**

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**Members:**

Karen Baker, designee for Donald Madsen, Claudia Balducci, Linda Brown, Catherine Cornwall, Alicia Glenwell, designee for Merrill Cousin, Zandrea Hardison, Mike Heinisch, Dennis Higgins, designee for Dwight Thompson, Darcy Jaffe, Norman Johnson, Bruce Knutson, Judge Barbara Linde, Jackie MacLean, Leesa Manion, designee for Dan Satterberg, Ann McGettigan, Barbara Miner, Alex O'Reilly, designee for Councilmember John Chelminiak, Alan Painter, designee for Rhonda Berry, Ericka Turley, designee for V. David Hocraffer, Janna Wilson, designee for David Fleming

**Other Attendees:**

Bryan Baird, John Bruels, Stacey Devenney, Tom Essex, Bill Hobson, Allison Howard, Tamara Johnson, Lisa Kimmerly, Melissa Lawrie, Anna Markee, Sherry McCabe, Harry McCarthy, Brandon Miles, Rose Quinby, Jean Robertson, Laurie Sylla, Mary Taylor, Shannon Thomas, Seiko Yamashita

**1. Welcome and Introductions, Co-Chair Linde~**

Co-Chair Linde called the meeting to order, welcoming the committee and introductions were made by each person in attendance.

**2. Approval of the Meeting Notes from the September 23, 2010 Meeting, Co-Chair Linde~**

Minutes were approved by consensus.

**3. MIDD Project Staff Report, Jackie MacLean, Department Director~**

Jackie began by introducing Anna Markee, Special Projects Manager, who will be taking the lead to rewrite the service improvement plan for the Veterans and Human Services Levy and the update of the Human Services Framework Policies.

*State budget cuts update*

Due to a severe state budget deficit, in October 2010, Washington State Governor Christine Gregoire directed across the board cuts of 6.287 percent impacting all state services.

The state Department of Social and Health Services' proposal is to cut non-Medicaid funding for mental health services by 16 percent, effective before the end of the state fiscal year (June 30, 2011). **The estimated cut to the King County mental health system is \$5.2 million for the remainder of this biennium.**

Reductions are also proposed to substance abuse services, developmental disabilities services, aging services, and a range of health services and economic supports for low-income individuals and families.

A summary of the estimated impacts to the programs and services directly provided by the Department of Community and Human Services (DCHS) is available at [http://www.kingcounty.gov/operations/DCHS/Services/~media/health/mentalHealth/DocumentsAndPDF/State\\_Budget\\_Cuts\\_Affecting\\_KCHS\\_10\\_22\\_10.ashx](http://www.kingcounty.gov/operations/DCHS/Services/~media/health/mentalHealth/DocumentsAndPDF/State_Budget_Cuts_Affecting_KCHS_10_22_10.ashx). The analysis also shows the cuts to related programs and services that will impact county residents.

**Next steps:** Given the magnitude of the state cuts, services in King County must be reduced. King County is developing several different scenarios and weighing the impacts to various programs and services under those different scenarios.

With the accumulated cuts taken over the last few years, the division is down to basic services provided with these funds such as crisis services, crisis clinic, screening for inpatient services, inpatient beds, evaluation treatment units, residential support services, etc. What is left, after the cuts have been taken between December 1, 2010 and June 30, 2011, is about \$24 million. DCHS must cut an additional \$5.2 million of that amount: a year's worth of cuts in the next seven months.

The DCHS is continuing to refine criteria for decision making to narrow the focus and discover what the priority is. DCHS proposed an initial array of cuts last week and shared it with our service providers and received feedback. Over the years, the mental health (MH), chemical dependency, and criminal justice systems have become very integrated and dependent on each other. When cuts are made, there are numerous impacts in different programs and services across the county. The division is also looking for any underexpended funds and any projected funds that will be underspent in the next month or so. Last year, part of the Executive's budget strategy involved scooping up all underexpended MIDD funds and putting that money toward the \$13 million MIDD dollars that were supplanted. In addition to that, DCHS is looking at the budgets to discover more underexpenditure that has not already been earmarked elsewhere. These funds may be available for one-time funding. Should funds be freed up, DCHS is looking at increasing supplantation to 40 percent. This option would only free up \$3 million. Taking \$3 million off existing MIDD programs will help to save core MH programs.

To date, there has been no official notice from the state, but DCHS is expecting to receive solid information by Monday, November 1, 2010. Updated information will be posted at the following link as it becomes available.

<http://www.kingcounty.gov/operations/DCHS/Services/StateBudgetCuts.aspx>. At the next MIDD meeting on December 2, DCHS hopes to have a full discussion and explain what is being recommended and what direction will be taken.

### **Member Comments**

**Mike:** inquired if the prioritization list has been of any help?

**Jackie:** The discussion later today will be to put it to use.

**Linda:** There's a policy statement of how priorities are being set. Is that on the web?

**Jackie:** It will go on there. There was an initial broad set we shared with providers, but it is currently being refined. At the moment, keeping very tight on the front door of the hospital, as the hospital is one of our most expensive resources; getting people out of the hospital and into a stable place in the community; protect public safety; and most importantly, crisis outreach.

After looking at the Tier One Services of the state contract, containing Level One and Level Two services, Jackie announced that the only Level Two services being continued right now is employment: recovery based philosophy. DCHS is down to Level One: highest priority services.

**Linda:** Looking at negotiating with the state on mandated services. What is the target there?

**Jackie:** There are two pieces to that. First, in the state contract, there are a few 100 percent mandated programs: the PACT team, expanded community services, and the PALS unit. We would like to cut purchasing beds, however, some of those things are budget provisos and we are not sure if the Governor has the authority to waive some of those budget provisos. The other piece is there are a lot of regulatory requirements, oversight, submission of staff, and administrative requirements we would like to begin to negotiate.

**Bruce:** Concerned about the 100 percent cut to Children's Crisis Outreach Response System (CCORS) of \$147,977 and expressed how critical it is and inquired about other funding sources. Since the county has been in the process of training police officers who have shown such enthusiasm for the service. The need for CCORS is greater than what we can currently provide and will only grow. Does anyone know what percentage of the CCORS budget is RSN funded?

**Rose Quinby:** It is about 18 percent of the total budget and 30 percent of the immediate budget.

**Ann:** One place we talked with the RSN about finding money for strategies was through the reserve. It would be a one time and for one year only, but the reserve could afford us to buy back critically acclaimed services. Providers definitely have had conversations with the county and stand ready to advocate.

**Norman:** Is there any excess revenue from MIDD?

**Jackie:** No, it is less revenue because the sales tax is coming in at \$40 million.

#### 4. **Co-Chairs Report, Co-Chair Linde~**

Co-Chair Linde welcomed new MIDD member, Claudia Balducci, Department of Adult and Juvenile Detention Director. Claudia brings a lot to the OC as a wonderful champion of human services, abundant knowledge of the justice system through serving on the Bellevue City Council, leading regional jail efforts, and with city and county governments.

Co-Chair Linde announced future MIDD meetings are being proposed as 90 minute meetings, since historically the meetings have ended early.

#### 5. **MIDD Crisis Diversion Services Strategy Update, Bill Hobson, Downtown Emergency Service Center~**

Downtown Emergency Service Center (DESC) was selected to provide all the crisis diversion services and sought out a site upon notification of that selection. A lease has been executed and a community notification process is underway. The site location will be 1600 S Lane Street, Seattle. This site was chosen because it is near Interstate 5, Interstate 90, a few blocks from Harborview Medical Center in the Jackson Place neighborhood and will be named the Crisis Solutions Center (CSC).

Mr. Hobson met with the co-chairs of the Jackson Community Council to discuss the project. One co-chair lives across the street from the CSC. The "edge" zoning is identified with everything east of the CSC as residential, everything west of the CSC as commercial. The CSC site itself is a zoned commercial site and has also been identified for institutional use. DESC will be applying for a building permit in a matter of days, and hopes to have a permit in hand by the end of 2010 or beginning of 2011.

Marpac Construction, LLC., a premier Seattle construction company, has been selected as the contractor. Marpac will take a 60-90 day construction process. After the construction process,

DESC will receive a Certificate of Occupancy from the city and a Department of Health final inspection for licensing. DESC has also applied for a residential treatment facility license through Division of Behavioral Health and Recovery.

DESC will host an informational public meeting about the CSC project on Tuesday, November 9, from 6:30 p.m. to 8 p.m., at the Giddens School at 620 20th Avenue S. Mr. Hobson invited the MIDD OC members to this critical meeting with other expected attendees to include Ian Goodhew, Prosecuting Attorney's Office; Pete Holmes, Seattle City Attorney, Sally Bagshaw and Tim Burgess, Seattle City Councilmembers; Deputy Chief Metz, Seattle Police Department, and possibly Sheriff Rahr. Mr. Hobson expects neighborhood opposition will decline when key stakeholders of the neighborhood see this project has a very high public policy priority. He spoke to the neighborhood council co-chairs and they definitely understand we need an alternative to taking people through very expensive revolving doors of jails and emergency services. He feels they will want to work with DESC to ensure DESC upholds operational protocols, addressing as many of their concerns as possible and creating ongoing dialogue between CSC senior staff and the neighborhood.

Program Manager interviews will be conducted next week in hopes of filling this position by December 1, 2010. Interviews will then proceed for the three supervisor positions to be filled by January 2011.

In addition, DESC is on the verge of negotiating a contract with Hank Steadman, a policy resource associate and international expert on pre-booking and post-booking diversion. Mr. Steadman was instrumental in convincing SAMHSA to add the GAIN center to its technical consultation. The GAIN center is 100 percent focused on the development of appropriate crisis diversion facilities. His work has led to the formulization of the concept of crisis diversion at SAMHSA. Scheduled for January 2011, shortly after hiring a project manager and supervisors of the three components of the overall program, Mr. Hobson has invited MIDD OC members, key players, and first responders for two days of technical assistance and project planning to discuss expectations and protocols. Mr. Steadman will return once the 85 new clinical staff are hired as well. Mr. Hobson is soft penciling a CSC open date of June 1, 2011.

Mr. Hobson disclosed he is a long-time neighborhood resident of 19 years, five blocks from the CSC site.

**6. Adult Drug Court Presentation (MIDD Strategy 15a), Judge McCarthy, Mary Taylor (Drug Court Manager), Tom Essex (Drug Court Treatment Liaison), Shannon Thomas and Allison Howard (Drug Court Housing Case Managers)**

Mary Taylor gave a brief overview of the presentation, beginning with the three components within strategy 15a: One young adult wraparound coordinator, 1.5 housing case managers, and a series of CHOICES classes.

Judge McCarthy defined Drug Court as a partnership between drug and alcohol treatment community and the courts. The purpose is to alter criminal behavior and promote abstinence from drugs and alcohol through the use of:

- Judicial supervision
- Different levels and modalities of treatment
- Drug testing, incentives, sanctions, case management
- Coordinated and comprehensive rehabilitative services

The King County Drug Court (KCDC) began in 1994, the 12th drug court in the country using a pre-adjudication model. Today there are approximately 2,300 drug courts throughout the United States. Judge McCarthy went on to describe the KCDC process that requires a level of commitment and accountability. Successful participants will graduate from KCDC and the charges are dismissed. If unsuccessful, the participant is terminated from KCDC and sentenced on the original charge.

Tom Essex quickly summarized recent changes in eligibility criteria, and participant characteristics such as:

- Delivery and Possession with Intent cases: from 19 percent to 60 percent of referrals
- 54 percent of young adults are charged with delivery or PWI
- Of the African American young adult population, 84 percent are charged with delivery or PWI
- 36 percent of Caucasian young adults face those charges
- Of the young adult population, 45 percent identified marijuana as their “first drug of choice”

Tom also discussed the role of the wraparound coordinator that may include:

- Identify significant others to be part of Wraparound Team
- Assess strengths and needs
- Coordinate with the treatment team
- Conduct team meetings
- Develop a care plan that meets needs & incorporates strengths
- Support participants in accessing resources identified in the care plan
- Incorporate Wraparound Team “voice” in treatment activities and goals

Shannon Thomas and Allison Howard discussed numerous aspects of Housing Case Management, touching on the drug court housing approach, provider networking and program expansion, housing outreach efforts, barriers and challenges, and future goals and projects.

Other credits include: the program has a 50 percent opt-in rate with a 70 percent completion rate: national average is about 65 percent.

To view the detailed presentation in its entirety, visit:

<http://www.kingcounty.gov/healthservices/MHSA/MIDDPlan/MIDDCommittees/OCMeetingMaterials.aspx>.

## **7. MIDD OC Member Check In**

Barb Miner announced King County employees interested in donating to the Employee Charitable Campaign can donate to Drug Court via the Evergreen Treatment Services entry in the program.

Zandy commented that state cuts are creating new gaps even as services are expanded.

Mike announced some opportunities coming in 2011. The Veterans and Human Services Levy is up for renewal and a possibility exists to expand it. Also, the bonds that built the sports stadiums in Seattle are set to sunset soon. Discussions are currently underway to repurpose those bonds. Mike encouraged everyone to invest time in these issues. Anyone who is interested, contact Mike Heinisch.

## 8. New Business

No comments.

## 9. Public Comment

**Tamera Johnson**, Youth In Action. Youth In Action was a recipient of a MIDD funded grant program for three years for Strategy 1f. This grant funded peer services for a family support organization and was recently terminated. Ms. Johnson inquired if a new Request for Proposal process was underway.

**Jackie** answered that MHCADSD has not been able to negotiate a contract.

**Co-Chair Linde** stated an answer may be provided at the December meeting.

**Linda** asked if any money that isn't expended is being looked for and reclaimed. If this is a negotiation process, does that money get scooped back in?

**Jackie** replied there is no decision at this time as that process has not yet begun.

**Rose Quinby**, Young Men's Christian Association (YMCA), CCORS program. Ms. Quinby thanked the OC for expanding strategy 7b, albeit revenues did not allow for that to be implemented yet. YMCA supports the providers association taking a systemic approach to preserve all crisis services, as well as other programs. The CCORS was cut by about 18 percent in the non-Medicaid budget. We go out to the homes 24-hours a day, seven days a week with Crisis Clinic to divert youth from psychiatric hospitalization as well as keeping families together. YMCA has successfully diverted 75 percent of hospitalizations, saving \$8,000 a day to the county and have stabilized 83 percent of families.

We really support the safety net approach.

Co-Chair Linde thanked everyone for coming. She reminded the OC the November and December meetings have been combined into one meeting and rescheduled for Thursday, December 2, 2010.

**ADJOURN at 1:45 p.m.**

**Next Meeting**

**December 2, 2010**

**King County Chinook Building**

**401 5th Avenue, Seattle, WA 98104**

**11:45 a.m. – 12:15 p.m. ~ Networking Lunch**

**12:15 p.m.– 1:45 p.m. ~ Meeting**

**Rooms 121 & 123**