

BENTON-FRANKLIN BEHAVIORAL HEALTH ADVISORY COMMITTEE

March 9, 2023

2:00PM

Benton County Commissioners Meeting Room
7122 Okanogan Place – Suite E303
Kennewick, WA 99336

Agenda

- Call to Order
- Introduction of Members
- Approval of Minutes from 1/12/2023 meeting
- Approval of Minutes from 2/9/2023 meeting
- Public Comment
- Discussion Items
 - Report on trip to Spokane to review behavioral health facilities
 - RFP Discussion – path forward
- Public Comment
- Other Business
- Adjournment

Benton-Franklin Behavioral Health Advisory Committee
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BENTON-FRANKLIN BEHAVIORAL HEALTH ADVISORY COMMITTEE

Meeting Minutes | January 12, 2023

Call to Order: 2:00 PM

Introduction of Members: All voting and non-voting members introduced themselves.

Approval of December 8, 2022 Minutes: The committee members reviewed the December 8, 2023 committee meeting minutes. Jason Bliss moved to approve the minutes as presented, Sindi Saunders seconded. Minutes approved.

Public Comment: None.

Discussion Items:

1. Discussion on Mental Health Work Group Priorities List:

Matt Rasmussen brought forth this item for further discussion, originally brought forth at the November meeting, for priorities in the community:

- a. The Mental Health Work Group met to identify gaps in the community, determine the most important items for the community, and prioritize by implementation timeframe
- b. Priorities:
 - i. Field responder program
 - ii. Respite/diversion beds (for youth and adults)
 - iii. Access to a prescriber on an urgent basis
 - iv. Youth inpatient facility (children's long-term inpatient)
 - v. Adult evaluation and treatment center
 - vi. Day treatment services (for youth and adults)
 - vii. Eating disorder treatment
 - viii. Partial hospitalization, intensive outpatient with medication management, dialectical behavioral therapy (DBT) program to fidelity, transitional housing
- c. The committee discussed that the first three items on the previous list are ones that are likely to be established relatively quickly and how they are deployed.
- d. **Field Responder Program:**
 - i. Matt Rasmussen requested that the Sheriff's representatives discuss the deployment options for field responders with the chiefs and sheriffs locally.
 - ii. Sindi Saunders mentioned that there is an existing contract for a co-responder that they have been unable to fill due to some of the contract requirements. The existing contract is for \$100,000 and requires the person to be a staff employee (not a contract employee).
 - iii. Jason Bliss mentioned the models that are currently in place in Tempe, AZ as a good model and requested seeing how those agencies are set up.
 - iv. Chief Michael mentioned evaluating response times to ensure prompt response however the field responders are deployed.
 - v. The committee discussed potentially expanding the existing program operated by Comprehensive to have potentially faster response times.
 - vi. The first response model depends on what will work best for local agencies
 - vii. In Washington State 988 serves as a resource to the community, but there isn't a seamless way for them to transfer an emergency call to 911. Also, 988 cannot legally automatically

get a person's location upon calling. There isn't a way to transfer between 988 and 911 (either direction)

- viii. Right now, there isn't a very focused method for capturing data relating to 988 calls or 911 calls to the detail of specifying if a call is specifically behavioral health, SUD, etc.
- ix. LA County is a great example of a triage system for 911 to determine the level of response needed and which resources need to be included in the response
- x. Next steps:
 - 1. Have Law Enforcement and EMS representatives take this discussion back to their peer groups and colleagues to determine the preferred deployment of a field response program.
 - 2. Reach out to the groups in Arizona to send their models for us to look at
- xi. Motion: Jason Bliss moved and Chad Michael seconded to have Law Enforcement and EMS representatives take this discussion back to their peer groups and colleagues to determine the preferred deployment of a field response program and report back to the committee. Motion carried.

e. Respite/diversion beds:

- i. Would be something that could be established via direct contract with a contractor/provider
- ii. There is space for these types of programs in the old Kennewick General Hospital facility
- iii. Kyle Sullivan offered to connect with Gordon Cable and Cameron Fordmeier, to meet with providers in the area to determine what a diversion program/space could look like
- iv. Cameron Fordmeier brought up the need for beds for underserved and critical populations (Alzheimer's/dementia, autism, youth, developmental disabilities, etc.)
- v. Rebecca Grohs moved and ___ seconded to have the Benton County Human Services Department work with other members of the committee to reach out to providers in the area to determine what a diversion program could look like and report back to the committee.

f. Access to prescriber:

- i. Would be something that could be established via direct contract with a contractor/provider
- ii. Rebecca Grohs asked about the possibility of a telehealth prescriber rather than requiring in-person or local to expand the pool of options
- iii. Communications/outreach would need to happen to provide information to the public
- iv. The prescriber would function only on an interim basis and wouldn't be long-term
- v. The committee discussed the payment for services and funding available for services
- vi. Matt Rasmussen said he could reach out to the Benton County Jail to see if they have any data regarding the number of undocumented persons and behavioral health or mental health services provided
- vii. BJ Olson asked if there was a provider locally that would have access to data regarding services provided to undocumented persons – Grace Clinic and Farm Workers Clinics
- viii. Jason Bliss moved and Sindi Saunders seconded to have Rebecca Grohs research the telehealth options for access to a prescriber. Motion carried.

2. Update on Status of Request for Proposals:

- a. Matt Rasmussen updated the committee on the status of the RFP – including that the RFP response received previously was rejected and that the new RFP will be re-issued on Tuesday, January 17, 2023.
- b. Matt discussed working with members of the committee to reach out to specific providers in the community to let them know that the RFP is open for proposals to be received, should those groups be interested in applying.
- c. Gordon Cable requested that the RFP clarify the licensing requirements

- d. A representative from Comprehensive clarified that the Crisis Stabilization Unit would likely need to be licensed as a Residential Treatment Facility (RTF) that is certified as an Evaluation and Treatment (E&T) facility.

3. Discussion on Tours of Facilities: Added by Chairman, BJ Olson

- a. The committee members discussed their perceptions and experiences touring the two facilities that are to be used for the Recovery Center, and all comments expressed were positive.
- b. The County has invested money in boarding up the accessible windows to the KGH facility, which has significantly deterred vandalism and break-ins, which had previously escalated and caused significant damage.
- c. Rebecca Grohs asked if there was the possibility of leasing space to providers sooner that would eventually end up in the Recovery Center, prior to opening the various Recovery Center services.
- d. Brian Ace mentioned that leasing space in the buildings too early (prior to choosing a provider to operate the Recovery Center) could limit that provider and hinder the vision of having a “blank slate” to start.
- e. BJ Olson asked to confirm with committee members that there are no reservations with moving forward with the two facilities
 - i. Members expressed that while they would prefer the services be housed in one facility, the reality necessitated two separate facilities and at least they are in close proximity
 - ii. For all intents and purposes, there will still be a “one-stop shop” for law enforcement and other EMS to have a single point of contact in one facility.
 - iii. Sindi Saunders mentioned that now there are two facilities, there is more space for services to be provided that otherwise wouldn't have a place to go.
 - iv. Jason Bliss asked to confirm that both Counties' Commissioners are still on board with working together on the Recovery Center – Matt Rasmussen mentioned that individual Commissioners have requested bi-county meetings to discuss the Recovery Center (quarterly or on a different frequency)
- f. Erin Petty requested that the committee consider appointing specific members to be spokesperson for the committee – the bylaws state that the Chairman is the spokesperson
- g. Matt Rasmussen suggested that the Communications group meet to specify roles and a potential communication plan for the committee.

Public Comment:

1. An attendee mentioned they worked previously with licensing children's crisis beds and offered to assist however possible.
2. Another attendee requested clarification for which services were to be provided at the leased Bruneau facility and space needed for each unit, and that the committee needs to be aware that there may be space constraints.
3. Benton County Commissioner Jerome Delvin thanked the committee members for being on the committee and taking their time to serve the community.

Other Business:

1. Carla Prock asked for clarification regarding work groups, and whether it would be appropriate to bring in non-members to work group meetings to discuss these issues outside the committee, to then bring that information back to the overall committee.
2. Shyanne Palmus notified the committee that she is leaving Benton County and expressed her thanks to the committee for all the work they do and that she will assist however she can to assure continued success of the committee.

Adjourned: 3:22 PM

Benton-Franklin Behavioral Health Advisory Committee

Meeting Minutes ~ February 9, 2023

Call to Order: 2:00 PM

Introduction of Members: All voting and non-voting members introduced themselves.

Approval of January 12, 2023 Minutes: The minutes were not provided to all members and will be approved during the next meeting.

Public Comment: None.

Discussion Items:

1. Follow-up on mental health programs – BJ Olson

BJ Olson indicated that discussion at the last meeting included looking into various aspects and asked whether anyone was prepared to address the committee.

Chad Michael spoke about the community response model and was asked to come back with feedback received. He said that the co-responder with police did not work well and was looking for an independent response model with 30 minutes being too long. No other insights offered.

Rebecca Ghros met at the Health District with a few members as well as Health District staff. Ms. Ghros gave a presentation on the Substance Use Disorder (SUD) which included a long wish list but felt this was what the community needed and included the following:

- IP SUD Treatment
- Medically monitored withdrawal management
- 3.1 Level 23 hr Observation Unit
- Non-clinical sobering unit/social detox/low barrier entry
- Mobile Crisis Intervention – Rapid Bup initiation/bridge, prescriber, MHP on scene
- Naloxone Distribution – vending machine, OTC access, EMS/Police partnerships, BFHD, community events
- Access to fentanyl testing strips and other harm reduction strategies – safe use
- SUD Assessments – afterhours access, jail, hospital based
- MAT – Buprenorphine, vivitrol, methadone – awareness campaign, ED & jail MAT services, hospital education/IP initiation
- Services for chemically using while pregnant women – IP and OP
- Women & Children's - IP treatment allowing women to bring kids
- Juvenile Prevention – marijuana & alcohol use, school based & community education, awareness around services for youth, OSPI involvement
- Recovery coaches & peer counselors – training, integration into partner agencies/community, first line support for active users
- Transportation fund/services that can be tapped to help get to tx/services
- Laundry facilities – services for active users for harm reduction, onsite peer to connect to SUD services
- Drug courts – increased capacity

- Recovery Café like environments – connect to resources, staff with peer counselors, support for BH
- Resource for parents to call re: SUD issues with kids-testing information, guidance & education
- Childcare for people in residential SUD treatment
- Transitional services available OP & initiated during IP treatment-housing, employment, life skills
- Legal Aid Assistance Fund
- Juvenile Diversion Services (avoiding jail)
- Media Campaign – around SUD recovery & anti-stigma
- Partner with medical school programs/residency to improve SUD awareness and tx, workforce labor – nursing schools
- Consider need to support gender fluid individuals as we prepare for non co-ed settings
- Liaison w/Catholic Charities Low Barrier Housing
- Low Barrier homeless shelter

Brian Ace asked about the priority for services for pregnant women and asked about the reason on the services for chemically using while pregnant. Carla Prock indicated the number of women with infants born affected is tremendous and the hospital partners were struggling with that and would like to work toward implementing practices and identifying issues ahead of time. Kyle Sullivan said that multiple levels could be served and asked if anyone had any knowledge on that. Mr. Ghros indicated that the line is drawn on what is reimbursable. Joel Chavez spoke about what is reimbursable and what is not reimbursable and what funds could be accessed for certain services.

Ryan Washburn mentioned the PCap program for staying sober while pregnant as a pathway to treatment. Cindi Sonders asked what was the 3.1 level 23 hr observation unit with Rebecca Ghros indicating that they were wondering whether Lourdes would have capacity in their stabilization unit that could be tapped into. Sheriff Raymond made some clarifications on 23 hour services @ CBHS. Diana indicated that is where she worked and verified they do have the space but only for certain hours. Jason Bliss indicated Lourdes was partnering with a behavioral health agency who has been doing some of those services.

Rebecca reported on two telehealth vendors that could provide mental health support; one was Eleanor Health and the other provider was Able To and asked whether anyone was interested in doing a demo sort of like a team call with no commitment. Joel Chavez asked if Teledock could be looked at.

BJ Olson asked if anyone had an update on the discussion regarding undocumented persons and how significant or how large serving that population would be. No update provided.

2. Funding for 10.77 evaluations (mental health evaluations to determine competency for trial) – Matt Rasmussen

Matt Rasmussen reported that he was approached by the prosecuting attorney and OPD manager for Benton County to see if the committee would consider funding for mental health evaluations and competencies. Matt said that there were about 60 people who were waiting to stand trial that could not get their mental health evaluations done to determine whether they

were competent to stand trial or not. Those evaluations would cost about \$147,000, trial or no trial. Sheriff Raymond spoke on the difference between a court order evaluation or one through the therapeutic courts. Ryan Washburn said there is legislation now that would take the burden off of Eastern and Western State hospitals and putting it onto the jails. Cindi Sonders indicated that the legislation does require that counties use their own funds to pay for that; so, there's a lot of pushback with several larger counties filing lawsuits against legislation. Cindi asked if the committee allowed this funding if there was access as she thought the problem was not funding but rather Eastern being backed up. Mr. Rasmussen said that the idea was that we would contract with a psychiatrist due to the backlog in Eastern. Ms. Sonders confirmed that how she understood this was that if the evaluation was court ordered, then the state would be responsible for payment, but if not court ordered then this would be an alternative method to getting evaluations done quicker and we would contract with our own psychiatrist which Matt confirmed.

Brian Ace asked if the request was to have access to services or funding to reimburse those services. Mr. Rasmussen indicated that the county could pay directly even though this was an obligation of the State but would not be done for months or even years for some. He asked whether the Committee thought it was worth paying for or letting it run its natural course. Franklin County Sheriff Raymond gave a scenario about the evaluations being done in-custody court mandated or out-of-custody through therapeutic court. He said the money being taken in by the County could be used for therapeutic court. Sheriff Raymond also discussed, depending on the charge, judges making determinations on where to go for evaluations especially on murder type of charges. Matt said mainly these were District Court. Mr. Rasmussen indicated that he could get more information from the Prosecuting Attorney and OPD and bring back if there was interest. Rebecca Ghos asked whether a cost analysis could be performed with Sheriff Raymond wanting District Court judges' input. Joel Chavez asked about the benefit if the treatment availability was not there. Mr. Rasmussen said if there is no availability, there would be no benefit. Kyle Sullivan said it's about whether they are competent to stand trial or not.

Brian Ace said there was a deviation and asked what the RCW said about the use of funds. Mr. Ace asked what the intent of the law was; was it for the purpose of expediting a legal process or providing for the operation or delivery of chemical dependency or mental health treatment and asked Matt to pose that question or per Sheriff Raymond, holding a person accountable. Ms. Sonders said if there is a way to look into it, we should as she has had Franklin County judges and prosecuting attorneys reach out with concerns about this issue. Cindi said it was about seeing what the dynamics were such as the aspect of people who are mentally ill sitting in jail or whether it's about freeing up the jails and worth looking into it even if it means shortening the waitlist. Mr. Ace said that if that is the intent, he is more ok with it. Carla Prock said that type of proposal should come back to the committee. Gordon Cable, by phone, spoke about expanding services regarding felony barriers and attempting to restore them. He spoke about the jail providing restoration services and incorporating those. Mr. Rasmussen said that could be discussed as well. Sheriff Raymond said the intent was to intervene before people hit the felony barrier. Sheriff Raymond said whatever it took, is what we should be using the money. Cindi inquired whether it needed to be a psychiatrist or maybe could even be a physiologist. Matt would get more of a concrete plan and bring back to the committee.

3. Asking local providers to bring forward funding needs for committee consideration – Matt Rasmussen

Matt Rasmussen said that there are programs in the community that could use some funding while working on the recovery center and asked whether a request for proposals should be done. Mr. Rasmussen was willing to do a request for proposal to providers. Jason Bliss asked whether this should be a bi county request. Mr. Rasmussen said it is open to commissioners as there are services on both sides of the river. Sheriff Raymond said Franklin County has collected almost \$2 million in six months and have an additional \$4.5 million on top of that. Mr. Rasmussen said he got the report as well and Benton County needed to start spending funds. Erin Petty said it is a win win on multiple levels and wanted to see what the needs were.

Cindi said that supporting our local providers is a positive influence in our community as it would help members of the community. Carla said that identifying opportunities and priorities is a good thing as right now there are a lot of great ideas but no funding. Mr. Ace said it sounded great; but wanted clarity on the RFP. Mr. Rasmussen said he can put that in place and put some thought into it. Mr. Ace asked whether this would be open for internal or external programs. Mr. Rasmussen said there was cashflow in the tax of about \$2.6 million for the first quarter.

Mr. Chavez asked about sobering services and said this would be a good service to have here until the recovery center was done. He indicated currently there are no services for that due to funding. Sheriff Raymond said Mr. Chavez is welcome to go to Spokane with him to check out some facilities. Ms. Sonders said that was an amazing place. Sheriff Raymond said there is a pressing need to drop off people to sober them up. Sheriff Raymond rather see Franklin County using funds spent on that. Mr. Olson said he was hearing consensus to explore the possibility of requests for proposals and various areas and parameters that have been identified as needed in the community and bring to next meeting with Mr. Rasmussen confirming.

Public Comment:

An attendee said he had worked at La Clinica & Lourdes and that funding was low and would like to see a way to change the way to deliver services. He spoke about checking the legal services and the design as most clients were there only for 8 hours.

Leland Kerr, superintendent of the Kennewick Hospital District commended the committee for their work and was confident the group could achieve great things. He wanted to let the committee know to please expediate services and reminded them they did a feasibility study some time ago. Mr. Kerr also addressed the issue on the pediatric transition in being able to treat mothers who were addicted and the difficulty in finding trained personnel. He appreciated all the efforts being done.

Other Business:

1. Carla Prock wanted further discussion about where the corporate settlement dollars would potentially overlap with some of the sales tax dollars and how those could be pulled together and spent. Carla would like to see a presentation back to the committee about what the current processes were so that efforts were not duplicated. Mr. Rasmussen said they are looking at that in Benton County and that there was focus on the opioid settlement but was not a bi

county effort. Ms. Sonders said that depending on how that settlement was done is how the committee should make its recommendation.

2. Mr. Rasmussen updated on the RFP. He reported that the RFP was sent out and has heard that most didn't have the capacity. He didn't have a ton of feedback.
3. Ms. Prock said the Health District was working with community partners and will be getting data sharing information. She asked if anyone had any contact information to please share.

Adjourned: 3:01 PM

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