

Whatcom County Stakeholders' Forum

April 1, 2009

(But not April Fool's - this is the real deal!)

PUBLIC HEALTH
ALWAYS WORKING FOR A SAFER AND
HEALTHIER WASHINGTON



Stakeholders' Forum Agenda

- 9:00 Welcome/Introductions
- 9:30 Human Services Overview
- 9:50 Current Resources
- 10:15 Identifying Community Needs
- 11:00 Mapping Community Needs
- 12:00 Thank you!

Introduction to Omnibus ESSB 5763 (Hargrove Bill)

People with MH, CD and COD are more likely than the general population to be:

- Confined in a correctional institution.
- Become homeless.
- Become involved with CPS or involved in a dependency proceeding.
- Lose state and federal benefits.

RCW 82.14.460 - Sales and use tax for chemical dependency or mental health treatment services or therapeutic courts.

Counties may authorize, fix and impose a 1/10th of 1% sales and use tax for the purpose of:

- Provision of new or expanded chemical dependency or mental health treatment services.
- Operation or delivery of a new or expanded therapeutic court program.

RCW 82.14.460 Sales & Use Tax (Continued)

- Includes, but is not limited to:
 - Treatment services
 - Case management
 - Housing

that are a component of a coordinated chemical dependency or mental health treatment program or service.

- Moneys shall not supplant except for lapsed federal funding.

RCW 26.12.250, Section 2

Therapeutic Courts

“Therapeutic court” - A court with special calendars or dockets designed for the intense judicial supervision, coordination, and oversight of treatment provided to parents and families who have substance abuse or mental health problems and who are involved in dependency proceedings.”

Therapeutic Courts (cont'd)

Therapeutic courts are designed to reduce :

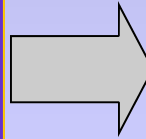
- Child abuse and neglect.
- Out-of-home placement of children.
- Termination of parental rights.
- Substance abuse or mental health symptoms among parents or guardians and their children.

RCW 70.96A.325 - Methamphetamine addiction programs — Counties authorized to seek state funding.

- Counties that pass the 1/10th of 1% sales tax may seek up to \$100,000 additional funding for treatment of people with methamphetamine addiction.
- Funding is available until 2010 and may not supplant existing funding. (Only 1 year for Whatcom)
- Counties that receive \$100,000 must submit a plan for expenditure and reports to the state.

***Court Treatment Programs serve
a higher proportion of meth users in Whatcom County***

Whatcom Court Treatment Programs serve a higher proportion of methamphetamine users than community-based treatment.



Drug Court Programs:

Juvenile – any use – 32%
Adult – primary use – 28%
Family – any use – 97%

Community Treatment :

any use – 20%
primary use – 10%



***DRUG COURTS REDUCE
CRIME BY AS MUCH AS 35%***

How we arrived here:

- A Citizen's Group met over several months.
- Advocates, professionals, citizens discussed possibilities with Health Department input.
- The group outlined some examples of programs to help the Council better understand the potential impact of the tax.
- Health Department's Comprehensive Behavioral Health Plan (CBHP) incorporated these examples.
- July 22nd , the Council's public hearing was held with over 250 people attending and 50 people speaking.
- Council passed the tax and Executive Kremen signed it into law (County Code 3.37).

Comprehensive Behavioral Health Plan (CBHP)

- The plan incorporated several other plans:
 - NSMHA Strategic Plan
 - County's Substance Abuse Strategic Plan
 - County's Law & Justice plan
 - County's Ten Year Plan to End Homelessness
 - Peace Health Behavioral Health Stakeholder Assessment
 - Whatcom Prosperity Project

Whatcom County - Sales and Use Tax Ordinance (County Code, Chapter 3.37)

Goals:

1. Reduction of the number of mentally ill and chemically dependent citizens using costly interventions like jail emergency rooms, and hospitals.
2. Reduction of the number of citizens who recycle through jail, emergency rooms, and hospitals
3. Reduction of incidence and severity of chemical dependency and mental disorders in youth and adults
4. Diversion of mentally ill and chemically dependent youth and adults from justice system involvement.

Pending Senate Bill 5301/5433

Counties with a population of less than 1.5 million may supplant existing funds up to:

- 50 percent in calendar year 2010.
- 40 percent in calendar year 2011.
- 30 percent in calendar year 2012.
- 20 percent in calendar year 2013.
- 10 percent in calendar year 2014.

Whatcom County Demographics

2006 - Population of the County – 181,800

Total Medicaid Eligible and Low Income:

- Youth – 17,884 (42% of all youth 0-20)
- Adults – 40,031 (29% of all adults)

- 12% of Whatcom County's population is Medicaid Eligible.
- 14.7% of WA workers are uninsured.

Whatcom County Demographics

Mental Illness

Prevalence Rates

- Youth with Mental Illness – 1,544
(8.6% of youth 0-17 need services)
- Adults with Mental Illness – 2,923
(7.3% of adults need services)

Gap (people in need of treatment)

- Youth with Mental Illness – 586
(38% of youth cannot get treatment)
- Adults with Mental Illness – 529
(18% of adults cannot get treatment)



Whatcom County Demographics Substance Abuse & Dependency

Prevalence Rates:

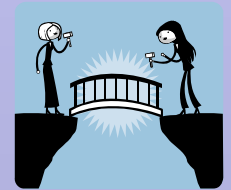
- Youth alcohol use (last 30 days) – 22% (Whatcom)
- Adult alcohol use (last 30 days) – 58% (WA State)

Treatment admissions (Whatcom County):

- Youth alcohol use (last 30 days) – 221 per 100,000
- Adult alcohol tx. admission rate – 438 per 100,000

Gap:

- Youth in need of treatment – 77% (WA State)*
- Adults in need of treatment – 74% (Whatcom)*
(9th highest in the state)



**(% <200% FPL not getting treatment), DASA Trends Report (2007)*

Jail Census & Data

- Average Daily Census in 2008 - 428
 - Main Jail - 281
 - Interim Work Center – 147
- Incarcerated people who have mental disorder
=20-23%
- Incarcerated people with substance use disorder
=80-95%
- Whatcom County Resident Prison Inmates
500 released each year
500 on active supervision

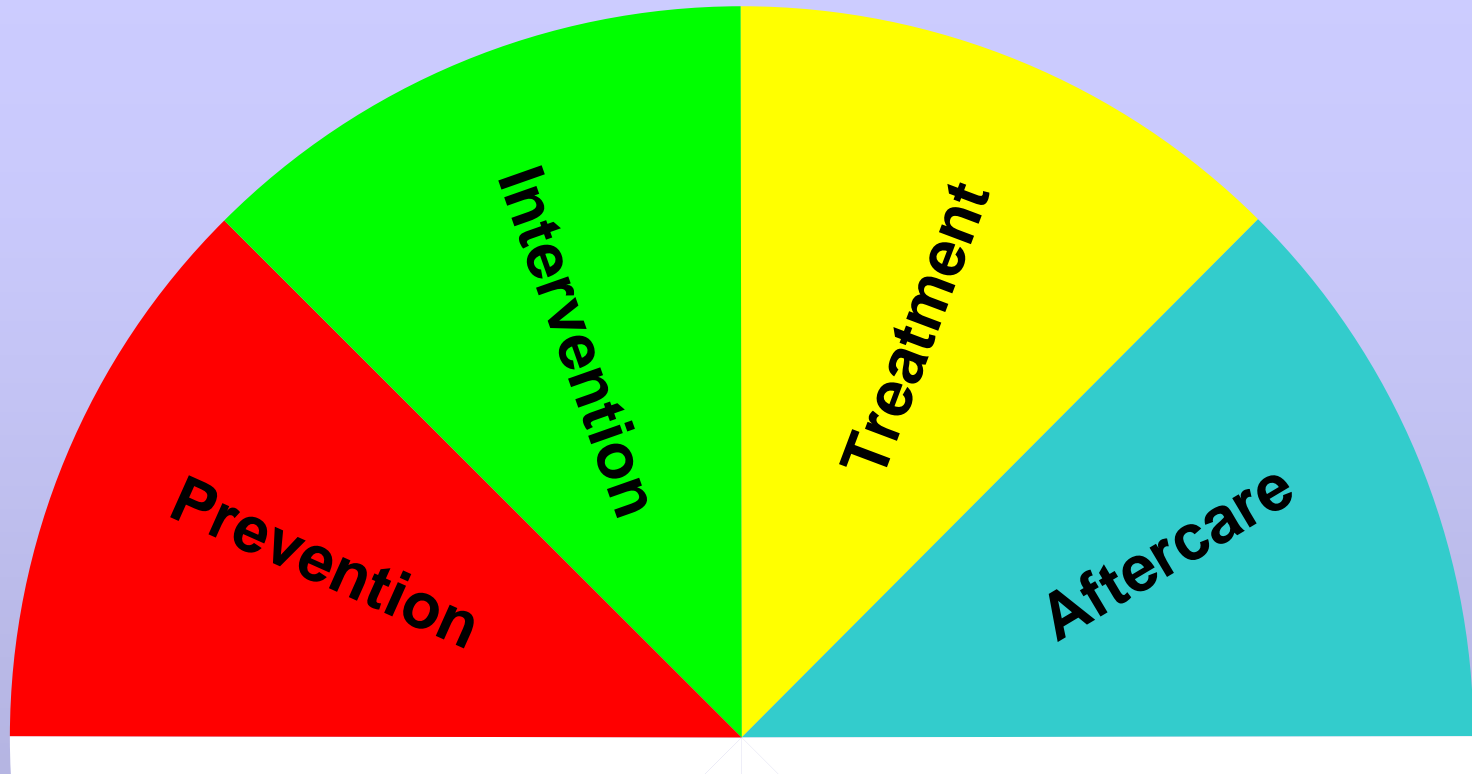


Focus On Planning – Why?

**Build Bridges
Instead of Walls:
Vision &
Priorities**



Prevention, Intervention, Treatment and Aftercare, (PITA) Overview



PITA Definitions

PREVENTION

- Services designed to prevent or delay the use and misuse of drugs and alcohol and to reduce the occurrence and/or symptoms of mental disorders.

INTERVENTION

- Services designed to identify hard-to-reach individuals and engage them in services or to prevent further development of a substance use and/or mental disorder.

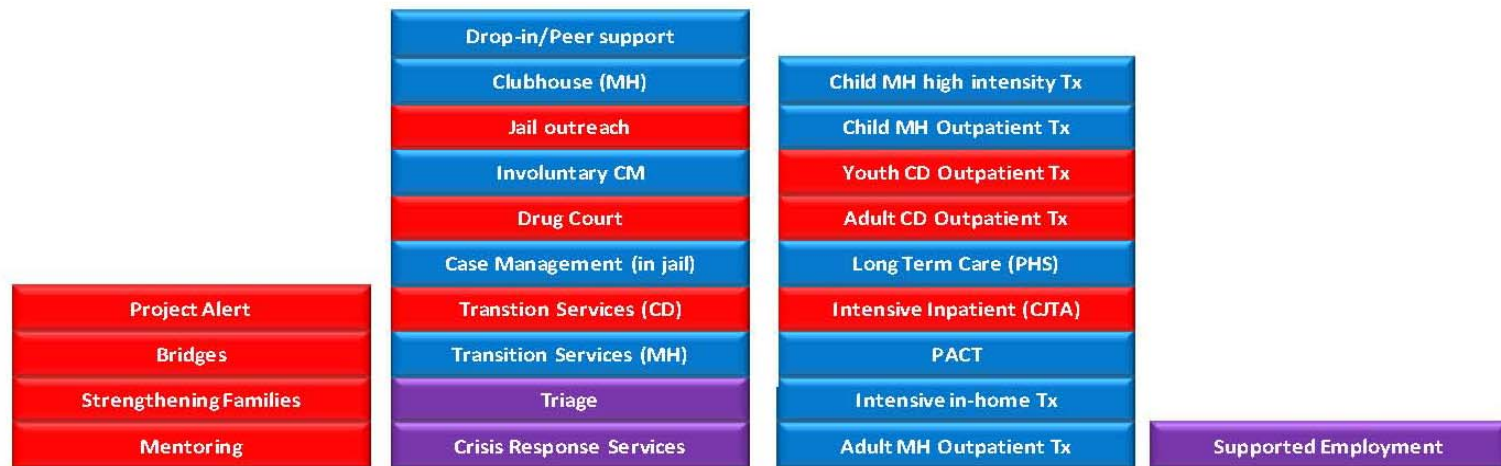
TREATMENT

- Services which positively impact substance use and/or mental disorders and educate people about their illness, support their recovery, and promote their resiliency.

AFTERCARE

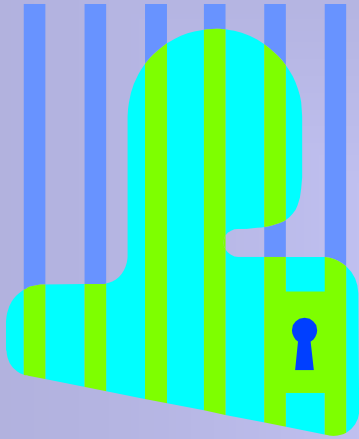
- Support services for on-going care and the maintenance of recovery.

Current County Public Funded Services



PUBLIC FUNDING FOR WHATCOM COUNTY SERVICES

- North Sound Regional Support Network (NSMHA)
- Division of Alcohol and Substance Abuse (DASA)
- County Millage (MH)
- Liquor Tax Profits
- Projected Sales Tax Revenue
- Housing & Homeless Grants & Fees

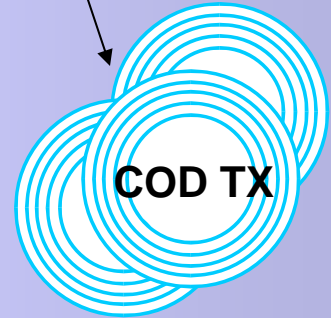
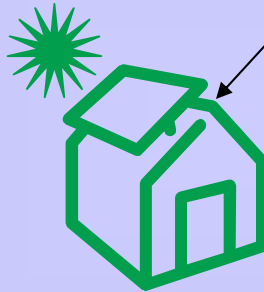


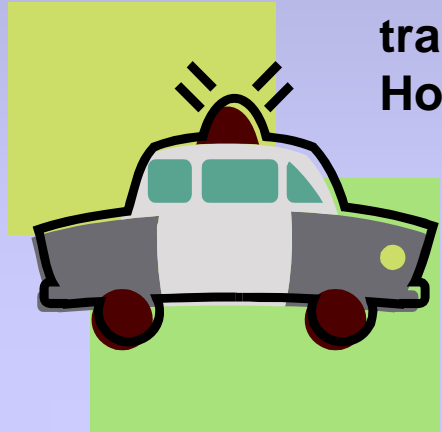
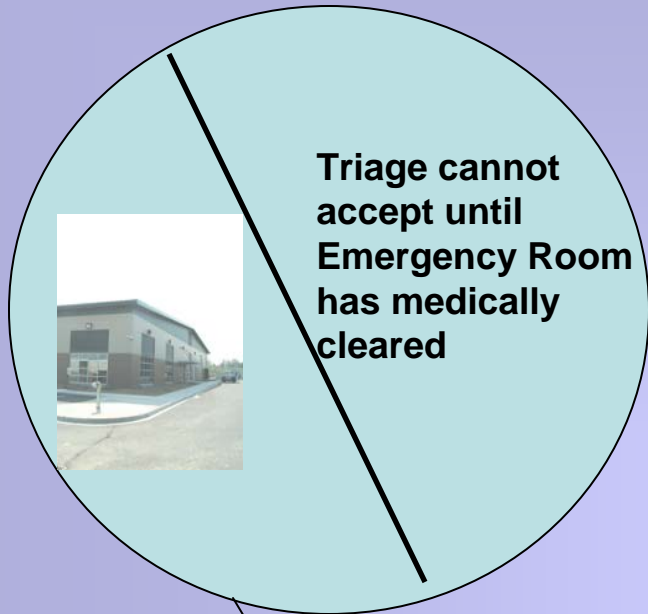
Incarcerated single woman with co-occurring disorders and two children



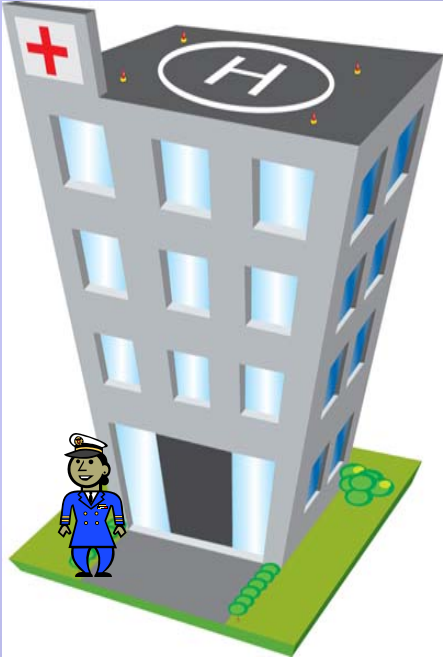
Sees Jail Mental Health Professional

Identification/Assessment/Release Planning





Officer must transport to Hospital



Officer waits for medical clearance



Officer Encounters Person with SMI &/or ETOH

Officer Considers Triage

Family Treatment Court



Due to CD,
family has child
placed into
dependency



The parents
have low wage
jobs and little
money.



No
Treatment



Decompensation

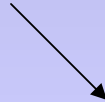


Compromised Housing

Housing for SMI & CD people



No money for medication



Questions for Small Groups

- What prohibits you from being successful/effective/efficient in your work with clients?
- What systems issues prohibit you from being successful?
- What would your clients say they need to most successfully benefit from your services?

Note Cards

Briefly describe a program or services that could be established/expanded to address one of the identified gaps.

- Identify the PITA category, if possible
- 50 words or less, please
- Give us your contact information
- Tape it to the relevant area of need within the appropriate PITA category
- Write another one!

Contact Information

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