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# BHC Governance Discussion

November 14, 2024, 3:30pm

Jefferson County's Behavioral Health Consortium (BHC) is supported by the  
Jefferson County Opioid Abatement Council funding through 2038



## Agenda: BHC Voting Member Meeting 11/14/2024 @3:30p

- Meeting Overview – 5 Minutes
- Vision, Mission, and Strategy Ratification – 10 Minutes
- Governance and Voting Structure Options – 25 Minutes
- Draft Member Roles and Contributions – 10 Minutes
- BHAC-BHC MOU Development Primer – 5 Minutes
- Review Members/Sectors Summaries & Potential Contributions – 5 Minutes
- Wrap Up and Next Steps – 5 Minutes

Next Meeting: ?December 12<sup>th</sup> @ 3-4:30p on Zoom?



# Today's Goals

- **Establish Shared Direction**

- Ratify Vision, Mission, and Strategy Statements to solidify our guiding principles.

- **Introduce and Explore Key Structures**

- Present options for Governance and Voting models based on member feedback.

- **Initiate Member Role Development**

- Review draft roles and contributions, inviting reflection and feedback for further alignment.

- **Lay the Foundation for BHC-BHAC Collaboration**

- Introduce the Memorandum of Understanding (MOU) to formalize partnership goals.

- **Prepare for December Decision-Making**

- Outline next steps and ensure readiness for more in-depth discussions at our upcoming meeting.

## Links

- [Governance Development-Related Materials webpage](#)
- [Proposed Vision, Mission, and Strategic Statements for Ratification](#)
- [Feedback re: Governance Structure & Examples](#)
- [Feedback re: Voting Models & Examples](#)
- [BHAC-BHC MOU Development Primer](#)
- Canvas for BHC Member Overview will be provided during the meeting
- [10/01/24: Member Survey Response Table](#)

## Feedback Links

- [Padlet](#) where you can enter your comments by section



# Proposed BHC Statements for Our Next Phase

A ratification vote will be taken for these statements at today's BHC Voting Member Meeting

## Vision

A resilient and unified Jefferson County where every individual has equitable, timely access to coordinated behavioral health services, free from stigma and focused on prevention, fostering a community of holistic well-being and empowered recovery.

## Mission

We lead cross-sector collaboration by engaging both partner and non-partner organizations in innovative solutions. Through community initiatives and data-driven strategies, we aim to reduce stigma, address gaps in prevention, treatment, and recovery services, and ensure equitable, person-centered behavioral health care for all Jefferson County residents.

## Strategic

The BHC will strengthen cross-sector partnerships, engage in transparent governance, and develop collaborative initiatives informed by best practices, data, and community feedback to reduce stigma, improve access to behavioral health services, support harm reduction, and promote prevention. We will coordinate resources efficiently to address service gaps, maximize funding opportunities, and respond adaptively to the evolving needs of Jefferson County residents.



# Governance Structure Options

**Goal: Establish a transparent, balanced structure for decision-making and accountability.**

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## Collaborative Model

Key Features: Equal decision-making authority among members, emphasis on consensus-building, recommended for fostering shared ownership.

Considerations: May require more time for decisions, high emphasis on inclusivity.

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## Lead Agency Model

Key Features: Centralized leadership with specific roles for each member, recommended for streamlined decision-making.

Considerations: Potentially faster decisions but less emphasis on equal representation.

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## Hybrid Model

Key Features: Combines collaborative and lead agency approaches, flexible leadership roles with collective input on major decisions.

Considerations: Balances efficiency and representation, adaptable as the Consortium grows.

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### Links

- [Feedback re: Governance Structure & Examples](#)
- [Padlet](#) – Your Feedback



# Voting Structure Options

**Goal: Establish a voting system that is fair, efficient, and represents all voices.**

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## Organizational Voting

Key Features: Voting power based on member organization, supports balanced sector representation.

Considerations: Emphasizes sector representation, suitable for broad member bases.

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## Sector-Based Voting

Key Features: Voting grouped by sector, such as healthcare, public safety, or community services, ensures sector needs are equally represented.

Considerations: Encourages collaboration within sectors, may require consensus-building within each group.

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## Hybrid Model

Key Features: Aiming for decisions all members agree on; voting used as a backup if consensus cannot be reached..

Considerations: Prioritizes inclusion and shared responsibility, may be slower for urgent decisions.

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### Links

- [Feedback re: Voting Models & Examples](#)
- [Padlet](#) – Your Feedback



# Governance & Voting: Discussion and Next Steps

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## Reflection Questions

- “Which governance model aligns best with our mission and member diversity?”
  - “How can each voting model support transparent and effective decision-making?”
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## Next Steps

- Members to review models in-depth and consider their organization’s perspective.
  - Formalize governance and voting decisions in December meeting.
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### Links

- [Feedback re: Governance Structure & Examples](#)
- [Feedback re: Voting Models & Examples](#)
- [Padlet](#) – Your Feedback



# Intro to Draft Member Roles & Contributions

**Goal: Outline preliminary roles to support Consortium objectives and encourage member feedback.**

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## Purpose of Draft Roles

- Provide a starting framework to support our Vision, Mission, and Strategy.
- Encourage collaborative input to tailor roles based on each member's expertise and priorities.

## Guiding Principles

- Flexibility: Roles are adaptable to fit each organization's strengths and evolving needs.
- Inclusivity: Feedback from all members is essential to align roles with organizational goals.

### Links

- [Canvas for BHC Member Overview](#) will be provided during the meeting
- [Padlet](#) – Your Feedback



# Suggested Key Areas for Member Feedback

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## Primary Activities and Responsibilities

- Do the outlined activities resonate with your organization's goals within the Consortium?

## Data Contributions

- Are the proposed data-sharing expectations feasible for your organization?

## Collaboration and Representation

- How can we adjust the roles to better represent your sector's needs and strengths?
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### Links

- [Draft BHC Member Roles documents will be sent during our meeting](#)
- [Padlet](#) – Your Feedback



# Next Steps for Role Development

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## Between Now and December Meeting

- Review the draft roles individually with your organization and identify areas for adjustments.
- Prepare feedback on alignment, expectations, and data-sharing feasibility.?

## December Meeting

- Discussion and refinement of roles based on Member feedback.
  - Exploration of any additional contributions or representation needs.
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### Links

- [Draft BHC Member Roles documents will be sent during our meeting](#)
- [Padlet](#) – Your Feedback



# BHAC-BHC MOU Development

**Goal:** Formalize a collaborative framework aligning BHAC and BHC goals and resources for county-wide impact.

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## Purpose of MOU

- Non-hierarchical partnership: Support mutual priorities in behavioral health across Jefferson County.
- Aligned goals: Facilitate resource sharing, data integration, and shared strategic planning.

## MOU Benefits

- Strengthens coordination between BHAC (funding administrator) and BHC (consortium of service providers).
- Enables a unified approach to behavioral health needs and solutions.

### Links

- [BHAC-BHC MOU Development Primer](#)
- [Padlet](#) – Your Feedback



# Key Components of the MOU-in-Development

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## Membership and Participation

- Mutual representation to promote active engagement and strategic alignment.

## Data Sharing and Collaboration

- Establishes data protocols that combine BHAC's program data with BHC's community-level insights.

## Strategic Planning and Coordination

- Joint planning sessions to synchronize initiatives and avoid duplication of efforts.

## Funding Synergy

- Identifies opportunities for co-investment to maximize resources for community impact.
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### Links

- [BHAC-BHC MOU Development Primer](#)
- [Padlet](#) – Your Feedback



# Initial Action Areas and Next Steps

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## For Today's Meeting

- Introduce the MOU goals and structure.
- Gather initial questions or concerns to address in future discussions

## Upcoming Actions

- BHC Members review the Primer and identify key interests or potential adjustments.
  - Engage in discussion at December 12<sup>th</sup> meeting and confirm what we will give the BHAC as the BHC's starting point.
  - Work with BHAC to craft the final MOU, and consider for ratification by March '25
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### Links

- [BHAC-BHC MOU Development Primer](#)
- [Padlet](#) – Your Feedback



# Next BHC Governance Meeting



Thursday, December 12th, 2024

@3:00p on Zoom



# Acronym Sheet

**BH** – Behavioral Health

**BHAC** – Behavioral Health Advisory Committee

**BHC** – Behavioral Health Consortium

**BoCC** – Board of County Commissioners

**CAP** – Communication Action Plan

**CARES** – Community Assistance Referral & Education Service

**DBH** – Discovery Behavioral Health

**DCR** – Designated Crisis Responder

**DUI** – Driving Under the Influence

**ED** – Emergency Department

**EJFR** – East Jefferson Fire Rescue

**EMS** – Emergency Medical Services

**JCPH** – Jefferson County Public Health

**JeffCo** – Jefferson County

**JHC** – Jefferson Healthcare

**JCSO** – Jefferson County Sheriff's Office

**HFPD** – Health Facilities Planning & Development Consultants

**HRSA** – Health Resources and Services Administration

**ITA** – Involuntary Treatment Assessment

**MAT** – Medically Assisted Treatment

**MH** – Mental Health

**MOUD** – Medications for Opioid Use Disorder

**NAMI** – National Alliance of Mental Illness

**OAC** – Opioid Abatement Council (SBH-ASO)

**OD** – Opioid Use Disorder

**PTPD** – Port Townsend Police Department

**PWUD** – People Who Use Drugs

**RHNDP-P1** – Rural Health Network Development Program –  
Planning (HRSA Grant Awarded 2018-2019)

**RCORP-P2** – Rural Community Opioid Response Program –  
Planning (HRSA Grant Awarded 2019-2020)

**RCORP-I** – Rural Community Opioid Response Program – Implementation (HRSA  
Grant Awarded 2020-2023 w/ 1 year No Cost Extension thru 8/2024)

**R.E.A.L.** – Recovery, Empowerment, Advocacy, Linkage

**SBH-ASO** – Salish Behavioral Health – Administrative Services Organization

**SSP** – Syringe Service Exchange

**SUD** – Substance Use Disorder

**TBH** – To Be Hired

**VOA** – Volunteers of America – Crisis Line (1-888-910-0416)

**Vol** - Voluntary

**Invol** – Involuntary