



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 12th @ 3-4:30p on Zoom

Intention

Our work today is guided by clarity, respect, and unity, as we strengthen our shared commitment to a healthier, more connected community.



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: BHC Member Overview](#)
- [Ph 2 - Metrics Development](#)

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.

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.

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.

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.

Links

- [Feedback re: Governance Structure & Examples](#)
Pkt pp 17-24
- [Padlet](#) – Your Feedback



Voting Structure Options

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

Organizational Voting

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

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

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.

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.

Links

- [Feedback re: Voting Models & Examples - Pkt pp 25-30](#)
- [Padlet](#) – Your Feedback



Governance & Voting: Discussion and Next Steps

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](#)
Pkt pp 17-24
- [Feedback re: Voting Models & Examples](#) - Pkt pp 25-30
- [Padlet](#) – Your Feedback



Intro to Draft Member Roles & Contributions

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

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.
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Links

- [Canvas: BHC Member Overview](#) – Pkt pp 31 - 77
- [Ph 2 - Metrics Development](#) Pkt pp 78-82
- [Padlet](#) – Your Feedback



Suggested Key Areas for Member Feedback

Primary Activities and Responsibilities

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

Data Contributions

- Review Consortium-wide Phase 2 Metric Development Document

Collaboration and Representation

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

- [Canvas: BHC Member Overview](#) – Pkt pp 31 - 77
- [Ph 2 - Metrics Development](#)
Pkt pp 78-82
- [Padlet](#) – Your Feedback



Phase 2 of our Consortium Data Strategy

- Which metrics best reflect our shared goals?
 - What data is realistically feasible for each organization to track?
 - How we can support one another in creating a seamless, effective data collection process that serves the entire community?
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All consortium members are invited to engage in evolving and prioritizing the metrics shown in the linked document.

Links

- [Canvas: BHC Member Overview](#) – Pkt pp 31 - 77
- [Ph 2 - Metrics Development](#) Pkt pp 78-82
- [Padlet](#) – Your Feedback



Next Steps for Role Development

Between Now and December Meeting

- Review the draft roles individually with your organization and identify areas for adjustments.
- Prepare feedback on Consortium-wide Phase 2 Metric Development Document

December Meeting

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

- [Canvas: BHC Member Overview](#) – Pkt pp 31 - 77
- [Ph 2 - Metrics Development](#) Pkt pp 78-82
- [Padlet](#) – Your Feedback



BHAC-BHC MOU Development

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

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](#) – Pkt pp 83-85
- [Padlet](#) – Your Feedback



Key Components of the MOU-in-Development

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

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 12th 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

CONTEXT SETTING

A BHC Governance discussion took place on August 8, 2024, providing insights from a collaboratively reviewed document. Members expressed a desire to establish a clear mission and vision before developing the governance structure. To support this process, a survey was distributed to gather input on the Consortium's core purpose, goals, and governance from both collective and organizational perspectives.

GOVERNANCE-THEMED FEEDBACK SUMMARY

The BHC members' feedback suggests a strong preference for a governance model that promotes **collaborative and transparent decision-making**, **inclusive representation**, and **equitable voting rights**. There is a need for clarity in roles and responsibilities, as well as for a structure that is **efficient and adaptable**. The chosen model must also support **cross-sector collaboration** and **resource coordination** to achieve the Consortium's mission and strategic goals effectively. (See page 3 for Governance Structure examples, beginning with a hybrid structure and moving on to other examples starting on page 6.)

DETAILED GOVERNANCE STRUCTURE FEEDBACK THEMES

Feedback Themes on Governance Models

Desire for Inclusive & Balanced Representation

- **Member Input:** There is a clear emphasis on ensuring that all key stakeholders, organizations, and sectors have a voice in decision-making.
- **Implications:** The governance model should prioritize inclusivity, where both individual organizational needs and sector-wide perspectives are represented. Members seek a balance between organizational and sector-based input to ensure equitable representation without over-complicating the voting process.

Focus on Collaborative & Transparent Decision-Making

- **Member Input:** Many members expressed a preference for a governance model that fosters **collaborative decision-making** with open, transparent processes. They highlighted the importance of equal access to information and participation in decision-making to ensure trust and shared responsibility.
- **Implications:** This feedback aligns with the **Collaborative Governance Model**, where shared decision-making is key. However, it will be critical to establish clear processes to facilitate collaboration effectively and ensure transparency in how decisions are made and communicated.

Need for Efficient Processes & Clear Accountability

- **Member Input:** Some members expressed concerns about the potential complexity and time required to make decisions when every voice must be heard, particularly if consensus is required. There is also a need for **clear accountability** for decisions and outcomes.
- **Implications:** There is a recognition of the importance of efficient governance. A **Lead Agency Governance Model** could address this concern by providing clear accountability and a more centralized decision-making structure. However, it must be balanced with mechanisms to maintain collaboration and engagement from all members.

Clarity in Roles, Responsibilities & Voting Rights

- **Member Input:** Members emphasized the importance of defining clear roles, responsibilities, and voting rights within the governance structure. They want a system where the responsibilities of each voting member are understood, and decision-making processes are clearly outlined.
- **Implications:** Regardless of the chosen governance model, there is a need for a well-documented structure that specifies who has voting power, how votes are cast, and how leadership roles are distributed. This could also include **hybrid models** that combine organizational and sector-based representation to clarify roles.

Ensuring Equity & Preventing Power Imbalance

- **Member Input:** Concerns were raised about potential power imbalances, where larger organizations or sectors could disproportionately influence decisions. Members emphasized that the governance model should not favor any one group over others but should ensure **equitable decision-making**.
- **Implications:** An **equitable approach to representation** is crucial to prevent power imbalances. Both the **Collaborative and Sector-Based Voting Models** address these concerns by ensuring equal voting power or sector representation. A hybrid approach could also help balance interests between sectors and individual organizations.

Flexibility & Adaptability to Changing Needs

- **Member Input:** Members expressed a desire for a governance structure that is adaptable and responsive to the **changing needs of the community** and the Consortium's evolving priorities.
- **Implications:** A flexible governance model should allow for adjustments as the Consortium grows and its priorities shift. This could mean periodic reviews of governance processes, voting structures, and leadership roles to ensure they continue to align with the BHC's strategic goals.

Emphasis on Cross-Sector Collaboration & Resource Coordination

- **Member Input:** Given the BHC's strategic goals, many members highlighted the importance of ensuring that the governance structure supports cross-sector collaboration and coordinated use of resources to improve behavioral health services.

- **Implications:** The governance model should encourage active participation across sectors, fostering partnerships and resource-sharing. This aligns with a **Collaborative Governance Model** but requires mechanisms to ensure that resources are coordinated efficiently and that the governance model supports strategic priorities like harm reduction, stigma reduction, and prevention.

GOVERNANCE STRUCTURE EXAMPLES

HYBRID GOVERNANCE MODEL:

COLLABORATIVE LEADERSHIP WITH PROJECT DIRECTOR SUPPORT

Key Components

Steering Committee as the Governing Body

- A **Steering Committee** composed of representatives from key sectors (e.g., healthcare, law enforcement, public health, housing, recovery support) and representatives from member organizations. This committee holds the primary responsibility for setting strategic priorities, making decisions, and guiding the Consortium's activities.
- Each member represents both their **organization's interests** and the broader **sector's needs**, encouraging integrated perspectives and holistic decision-making.
- The **Steering Committee** meets regularly to review progress, make strategic decisions, and ensure alignment with BHC's vision, mission, and strategy.

BHC Project Director as Central Coordinator

- The **BHC Project Director** serves as the primary coordinator for the Consortium's activities, providing **day-to-day leadership, operational support, and coordination** among members.
- The **Project Director** acts as a facilitator, ensuring efficient implementation of Steering Committee decisions and enhancing collaboration across sectors.
- **Discovery Behavioral Health** serves as the fiscal agent, providing **financial oversight and support** to the Project Director. This ensures transparent and responsible management of funds to achieve BHC's objectives.
- While the Project Director leads operational tasks, they remain **accountable to the Steering Committee**, ensuring decisions reflect the collective priorities of the BHC.

Advisory Subcommittees for Strategic Focus Areas

- **Subcommittees or Working Groups** are formed around key strategic priorities (e.g., harm reduction, prevention, data collection, community engagement).
- Subcommittees are responsible for developing recommendations, conducting focused work, and bringing forth proposals for review by the Steering Committee.

- Membership in these subcommittees can be **inclusive of non-voting community members and subject-matter experts**, enabling diverse input and engagement on specific topics.

Balanced Voting Structure within the Steering Committee

- **Voting Rights:** Each Steering Committee member has one equal vote, regardless of whether they represent an organization or a sector, ensuring balanced representation.
- Decision-Making Approach:
 - **Major Decisions** (e.g., strategic priorities, significant resource allocations) require a **supermajority vote (e.g., 2/3 agreement)**, ensuring broad support while maintaining decision-making efficiency.
 - **Operational Decisions** (e.g., program updates, routine actions) may be made through a **simple majority vote** to avoid delays and ensure the BHC can respond quickly to emerging needs.

Regular Review & Adaptive Structure

- An **annual review process** will be built into the governance model to assess its effectiveness, ensuring that it remains aligned with BHC's strategic goals and the community's evolving needs.
- A **Governance Review Subcommittee** could be established to evaluate the structure and processes, gather feedback, and recommend changes as needed to improve the model.

How This Hybrid Model Addresses Feedback Themes

Inclusivity & Balanced Representation

- The **Steering Committee** ensures representation across all key sectors and member organizations. Voting equality prevents any single entity from dominating decisions, balancing both organizational and sector interests.

Collaborative & Transparent Decision-Making

- The **Project Director** facilitates transparent and inclusive processes, and the **Steering Committee** fosters a collaborative decision-making environment where diverse viewpoints are openly discussed.
- **Subcommittees** ensure that key focus areas receive attention and in-depth exploration, contributing to transparent and informed decision-making.

Efficient Processes & Clear Accountability

- The **Project Director** acts as a point of coordination, allowing for efficient operational management and clear leadership, while remaining accountable to the **Steering Committee** for strategic direction.
- The **fiscal oversight by Discovery Behavioral Health** ensures proper management of resources, enhancing financial accountability.

Clarity in Roles, Responsibilities & Voting Rights

- Clear distinctions are made between the Steering Committee's strategic leadership, the Project Director's operational coordination, and Discovery Behavioral Health's fiscal role.
- Voting processes are defined for major and operational decisions, maintaining both clarity and flexibility in how decisions are made.

Equity & Prevention of Power Imbalance

- The equal voting structure of the **Steering Committee** promotes equity and prevents power imbalances, ensuring all sectors have an equal voice in decisions.
- Input from diverse sectors and subcommittees reinforces balanced, holistic decision-making that reflects the broader interests of the behavioral health community.

Flexibility & Adaptability to Changing Needs

- The **annual review process** supports a dynamic governance model that can evolve to meet changing community needs and strategic shifts in BHC's priorities.
- Subcommittees provide flexibility by allowing in-depth focus on emerging issues and adapting efforts to new challenges.

Cross-Sector Collaboration & Resource Coordination

- The **Project Director's role** enhances collaboration across sectors, providing central coordination and facilitating partnerships.
- The involvement of **Discovery Behavioral Health as the fiscal agent** ensures that funds are managed responsibly, with strategic oversight from the Steering Committee to align resource allocation with BHC's goals.

Balancing Potential Tensions

- **Inclusivity vs. Efficiency:** The Steering Committee provides inclusive decision-making, while the Project Director ensures that operational tasks are carried out efficiently. The **supermajority vote** for major decisions balances the need for broad support with timely action.
- **Collaborative Governance vs. Centralized Coordination:** While the Steering Committee holds ultimate decision-making power, the Project Director provides centralized leadership to coordinate daily activities and drive actions forward, ensuring alignment with strategic priorities.

OTHER GOVERNANCE STRUCTURE EXAMPLES: BENEFITS AND CHALLENGES

Collaborative Governance Model

Overview: A **collaborative governance model** emphasizes shared leadership and decision-making across all member organizations. Representatives from each organization or sector work together to form a **governing board or steering committee** that is responsible for setting strategic priorities, making decisions, and guiding the Consortium's activities.

How It Works:

- **Shared Decision-Making:** Decisions are made collectively, often by consensus or through a voting process with clearly defined roles for each member.
- **Inclusive Representation:** All member organizations have representation on the governing body, and the structure supports equal input from all parties.
- **Subcommittees & Working Groups:** Specific tasks or projects may be managed by subcommittees or working groups that report back to the main governing board.

Benefits:

- **Inclusivity & Equal Voice:** Ensures that all member organizations or sectors have a voice in decision-making, promoting transparency and collaboration.
- **Cross-Sector Collaboration:** Encourages input from diverse sectors, fostering partnerships and a holistic approach to addressing community behavioral health needs.
- **Collective Ownership & Accountability:** Shared leadership promotes joint responsibility for outcomes and ensures that no single entity dominates the decision-making process.

Challenges:

- **Decision-Making Efficiency:** Collective decision-making can be time-consuming, particularly when achieving consensus among diverse perspectives.
- **Role Clarity:** Ensuring clarity of roles and responsibilities is critical; otherwise, collaborative governance can lead to confusion or overlap in leadership functions.
- **Risk of Dilution of Focus:** With multiple sectors and organizations represented, there is a potential for too broad a focus, leading to challenges in prioritizing strategic initiatives.

Lead Agency Governance Model

Overview: In a **lead agency governance model**, a single organization or agency acts as the main decision-making body and provides **centralized leadership** for the Consortium. While the lead agency coordinates the activities and governance of the BHC, input from other member organizations is incorporated through an advisory board or coalition.

How It Works:

- **Centralized Decision-Making:** The lead agency makes key decisions, manages resources, and drives the Consortium's activities in line with the mission and vision.
- **Advisory Structure:** An advisory board or coalition of member organizations provides input, recommendations, and expertise to guide the lead agency's decisions.
- **Accountability & Leadership Roles:** The lead agency is accountable for ensuring that the goals and priorities of the Consortium are met while seeking input from the advisory group.

Benefits:

- **Efficient Decision-Making:** Centralizing leadership and decision-making with a lead agency can streamline processes and lead to more efficient actions.
- **Clear Roles & Accountability:** The lead agency has clearly defined responsibilities for guiding the Consortium's activities, ensuring alignment with strategic priorities.
- **Focused Implementation:** Having one central body can help maintain a focused approach to initiatives and ensure that resources are used effectively.

Challenges:

- **Potential Imbalance of Power:** There may be concerns over the lead agency having too much authority or disproportionately influencing decisions, which could reduce collaborative input from other members.
- **Limited Cross-Sector Representation:** While an advisory board allows for input, the primary decision-making rests with the lead agency, which may not fully represent the diverse sectors involved in behavioral health.
- **Need for Strong Communication & Inclusion:** To ensure equitable input from all members, the lead agency must maintain open communication channels and actively engage advisory members in decision-making.

FACTORS TO CONSIDER WHEN CHOOSING A GOVERNANCE MODEL

Decision-Making Efficiency vs. Representation:

- Consider the need for **timely decision-making** versus the importance of **ensuring all voices are represented**. A collaborative governance model is more inclusive but can be slower, while a lead agency model is more streamlined but may not be as representative.

Accountability & Leadership:

- Think about the balance between **shared leadership responsibilities** and the desire for a **single point of accountability**. Collaborative governance promotes joint responsibility, while a lead agency provides clear leadership and accountability.

Adaptability & Sector Engagement:

- Evaluate how adaptable each model is to changing needs and how well it engages **diverse sectors and community perspectives**. The collaborative model fosters engagement across all sectors, while the lead agency model relies on the advisory group to represent those sectors.

Alignment with BHC's Mission, Vision, & Strategy:

- Reflect on which model best supports the **goals of the BHC**, including **stigma reduction, harm reduction, prevention, and community empowerment**. The chosen governance model should align with strategic priorities and enhance the BHC's ability to serve Jefferson County effectively.

NEXT STEPS FOR BHC MEMBERS

- **Reflect on Model Fit:** Consider which governance model aligns best with your expectations for collaboration, efficiency, and representation.
- **Discuss Preferences & Concerns:** Share thoughts on how each model might support or hinder the BHC's goals and structure.
- **Identify Key Governance Needs:** Think about specific governance needs, such as decision-making processes, leadership roles, and how to best engage all members in advancing the mission and vision.

CONTEXT SETTING

A BHC Governance discussion took place on August 8, 2024, providing insights from a collaboratively reviewed document. Members expressed a desire to establish a clear mission and vision before developing the governance structure. To support this process, a survey was distributed to gather input on the Consortium's core purpose, goals, and governance from both collective and organizational perspectives.

VOTING-THEMED FEEDBACK SUMMARY

BHC members' feedback suggests a need for a **balanced, equitable, and efficient voting structure** that respects the diverse perspectives within the Consortium. The preferred approach should be **inclusive, adaptable, and transparent**, with the ability to differentiate between major and routine decisions. An effective voting structure will ensure that **all members have an equitable voice**, maintain efficient decision-making, and reflect the Consortium's core values of **collaboration, transparency, and equity**. (See Page 4 for voting model examples.)

DETAILED VOTING STRUCTURE FEEDBACK THEMES

Balance Between Organizational and Sector-Based Representation

- **Member Input:** Members have discussed the importance of striking a balance between ensuring that all **member organizations** have a voice in the voting process while also representing the **diverse sectors** involved in behavioral health (e.g., healthcare, law enforcement, housing, mental health, and substance use services).
- **Implication:** There is a desire for a structure that allows individual organizations to express their specific interests while ensuring that voting reflects the broader sectoral priorities and needs, preventing any one organization from dominating the process.

Simplicity & Efficiency of the Voting Process

- **Member Input:** A recurring theme is the need for a voting process that is **simple and efficient**. Members want to avoid overly complicated rules that slow down decision-making or make the process difficult to navigate.
- **Implication:** There is an emphasis on establishing a voting system that allows for timely decisions without sacrificing representation or collaboration. A process that can distinguish between **routine operational decisions** and **strategic or policy decisions** might be preferred to streamline actions when possible.

Equity & Avoiding Power Imbalances

- **Member Input:** Concerns were raised about ensuring that all voting members have an **equitable voice**, particularly smaller organizations or sectors that may feel marginalized. Members are keen to avoid any power imbalance where larger or more influential entities dominate the voting outcomes.
- **Implication:** The feedback suggests a voting structure where **equal voting rights** are favored, and mechanisms are put in place to ensure that all votes carry equal weight, regardless of the size or perceived influence of the organization or sector.

Consensus-Building vs. Majority Voting

- **Member Input:** There is a mix of opinions on whether decisions should be made by **simple majority voting** or whether they should require **consensus or supermajority agreements**. Some members feel that consensus-based decisions foster collaboration and buy-in, while others believe that consensus can slow down decision-making and lead to diluted outcomes.
- **Implication:** A mixed approach may be favored, where **major decisions (e.g., strategic planning, funding allocation)** require a **supermajority vote (e.g., 2/3)** to ensure broad support, while **operational or routine decisions** could be handled by a **simple majority** to maintain efficiency.

Flexibility & Responsiveness to Different Types of Decisions

- **Member Input:** The feedback highlighted the importance of flexibility in the voting structure, acknowledging that not all decisions carry the same weight or urgency. Members noted that the voting process should be able to **differentiate between high-impact strategic decisions and more routine, operational matters**.
- **Implication:** A **tiered voting structure** might be suggested, where different decision types (e.g., policy changes, budget approvals, operational updates) have specific voting thresholds or processes tailored to their level of importance and urgency.

Transparent Processes & Clarity in Voting Roles

- **Member Input:** Transparency in the voting process was highlighted as crucial, with a clear outline of who is eligible to vote, how votes are cast, and how decisions are reached. Members also want to know their role and responsibilities within the voting process.
- **Implication:** Governance documents need to clearly define **voting rules, eligibility, and processes**, ensuring that all members understand how their vote impacts decisions and the overall direction of the Consortium.

Inclusivity & Empowering All Voices in the Decision-Making Process

- **Member Input:** Ensuring that all voices are included in decision-making, particularly those who may represent underserved or marginalized communities, was noted as important. This inclusivity extends to voting, where all sectors, including those who may not traditionally have as much influence, are empowered to shape decisions.
- **Implication:** Voting structures should be inclusive, perhaps providing mechanisms to ensure that sectors representing vulnerable populations or unique perspectives are not overshadowed by larger or more established organizations.

Periodic Review of Voting Structure

- **Member Input:** Recognizing that needs and priorities may evolve over time, members have indicated support for **periodic reviews of the voting structure**. This ensures that the structure remains relevant, equitable, and efficient as the Consortium grows and its work evolves.
- **Implication:** A built-in process for **reviewing and potentially updating** the voting structure allows for the flexibility to adapt to changes within the BHC and the broader community's behavioral health landscape.

VOTING MODEL EXAMPLES

Organizational Representation Voting Model

Overview: Each organization that is part of the BHC has one designated voting member, who votes on behalf of their organization.

Benefits

- **Clear Representation:** Ensures that each organization's interests and perspectives are represented directly in decision-making.
- **Streamlined Voting Process:** Decisions can be made efficiently since each organization casts a single vote, simplifying the process.
- **Accountability:** The voting member is clearly responsible for representing their organization's stance and communicating decisions back to their group.

Challenges

- **Limited Sector Representation:** If an organization represents multiple sectors or serves a diverse population, this model may limit how those broader sector needs are directly voiced.
- **Potential Imbalance:** Larger or more influential organizations might dominate decision-making if their interests are prioritized over smaller organizations or sectors.

Sector-Based Representation Voting Model

Overview: Voting members represent broader sectors (e.g., healthcare, public health, law enforcement, housing) rather than individual organizations. Each sector selects one or more representatives to vote on their behalf.

Benefits

- **Holistic Sector Perspectives:** Ensures that key sectors are well-represented, allowing a more comprehensive view of how decisions impact the entire behavioral health system.
- **Equitable Voice Across Sectors:** Allows for balanced representation across different sectors, preventing any single organization from having disproportionate influence.
- **Facilitates Cross-Sector Collaboration:** Encourages voting members to consider the needs and priorities of the entire sector rather than just their own organization.

Challenges

- **Consensus Building Required:** Representatives must actively engage with their sector to understand and represent the sector's position, which can be time-consuming and require substantial effort.

- **Risk of Diluted Organizational Input:** Individual organizations may feel their specific interests are not fully represented if they are grouped into a broader sector vote.
- **Complex Decision-Making:** Reaching consensus within sectors may be challenging, leading to longer decision-making processes.

Hybrid Model: Organizational & Sector-Based Voting

Overview: Combines elements of both organizational and sector-based representation. Voting members may represent their own organizations while also considering the broader sector's priorities, or certain votes are reserved for sector-wide decisions while others are organizational.

Benefits:

- **Balanced Representation:** Ensures that both individual organizations and broader sectors have a voice, creating a more holistic decision-making process.
- **Flexibility:** Can adapt to different types of decisions; some decisions might be best made with sector-focused input, while others might require direct organizational input.
- **Encourages Broad Engagement:** Members are encouraged to represent both their own organizational interests and the broader sector needs.

Challenges:

- **Potential Complexity:** The dual representation structure may make voting processes more complex and require additional clarification on when decisions are organizational vs. sector-based.
- **Possible Overlap or Confusion:** It may be unclear at times whether a voting member is representing their organization's interests or the sector's perspective, which could lead to conflicts or mixed messaging.
- **Decision-Making Process Clarity:** Governance documents must clearly outline when to apply organizational vs. sector-based voting to avoid confusion.

Consensus-Based Decision-Making Model

Overview: Decisions are made only when all voting members reach consensus, or at least a supermajority (e.g., 2/3 or 3/4 agreement), to ensure broad support across the group.

Benefits:

- **Inclusive & Collaborative:** Ensures that all voices are heard and considered, promoting a culture of collaboration and mutual understanding.

- **Builds Strong Buy-In:** Achieving consensus means decisions are well-supported and less likely to be met with resistance or conflict after the vote.
- **Encourages Comprehensive Dialogue:** Encourages thorough discussion on all issues to achieve agreement, ensuring that all perspectives are fully explored.

Challenges:

- **Time-Consuming:** Consensus-building can be a lengthy process, potentially slowing down decision-making and delaying action on urgent matters.
- **Difficulty in Achieving Consensus:** Reaching full or supermajority agreement may be difficult, particularly on contentious issues, leading to potential deadlocks.
- **Risk of Compromise on Effectiveness:** In seeking consensus, decisions might become watered down to accommodate all viewpoints, potentially reducing the impact of the final action.

Weighted Voting Model

Overview: Voting power is allocated based on specific criteria, such as organization size, funding contribution, or level of service provision. Some members may have greater voting weight based on these criteria.

Benefits:

- **Reflects Contribution & Impact:** Recognizes the different levels of investment and involvement among members, aligning voting power with the organization's contribution to the Consortium.
- **Streamlines Critical Decisions:** In cases where larger organizations or sectors have greater stakes in decisions, weighted voting can lead to more practical, efficient outcomes.

Challenges:

- **Equity Concerns:** Smaller organizations or those with fewer resources may feel they have less voice or power in decision-making.
- **Complex Process:** Calculating and managing voting weights can add complexity to the decision-making process, requiring additional clarity and transparency.
- **Potential Power Imbalance:** There is a risk that a small number of organizations with greater voting weight could dominate decisions, reducing the perceived inclusiveness and fairness of the process.



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DISCOVERY BEHAVIORAL HEALTHCARE

Representative/Alternate: Jim Novelli, CEO & _____

Sector Represented: County BHO, Mental Health and Substance Use Disorder Services

Interests Represented (Organizational, Sector Expertise, Broader Community Needs)

Primarily sector expertise with a focus on organizational interests. Representatives bring substantial knowledge of behavioral health services, offering insights into best practices, addressing patient needs, and influencing resource distribution aligned with BHC's mission to ensure equitable and accessible services.

Draft BHC Role Description

Discovery Behavioral Healthcare provides expertise in behavioral health, particularly in mental health and substance use disorder programs. Their role within BHC focuses on advocating for treatment support, policy influence to enhance service delivery, patient care, and effective resource allocation. BHC envisions them as a central figure in addressing service gaps and advancing behavioral health outcomes for Jefferson County.

Interests Represented

Primarily sector expertise with a focus on organizational interests. Representatives bring substantial knowledge of behavioral health services, offering insights into best practices, addressing patient needs, and influencing resource distribution aligned with BHC's mission to ensure equitable and accessible services.

Primary Activities within BHC

Discovery Behavioral Healthcare is anticipated to engage in:

- **Collaboration:** Working with BHC partners to align behavioral health resources and share best practices across organizations.
- **Program Development:** Expanding services to fill identified gaps in mental health and substance use treatment, particularly for individuals with severe mental illness (SMI).
- **Data Contribution:** Participating in data collection efforts that help track service utilization, client outcomes, and needs assessment, though current feedback suggests they may need guidance on specific metrics.
- **Advocacy:** Supporting policies and practices that improve access and continuity of care for behavioral health services.
- **Funding and Resource Alignment:** Contributing to BHC's shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available

resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County's behavioral health needs.

Governance Role

- **Policy Influence:** Helping to shape behavioral health policies that align with both community and organizational needs.
- **Sector Representation:** Advocate for the perspectives and needs of their sector, ensuring the behavioral health sector, ensuring its perspectives are represented in BHC decisions.
- **Collaborative Decision-Making:** Actively participate in BHC decision-making processes, contributing insights and expertise specific to their sector.
- **BHC Strategic Planning:** Engage in BHC strategic planning efforts by participating in community assessments, action plan development, contributing requested input to funding pursuits, and supporting project implementation. This role supports alignment with the BHC's Vision, Mission, and strategic intentions, enhancing access to behavioral health resources and improving outcomes across Jefferson County.

Exploring Potential Data Contribution

- **Treatment and Service Utilization Data:** Number of clients served, types of services provided (e.g., mental health counseling, substance use treatment), and client demographics.
- **Outcomes Data:** Metrics on treatment effectiveness, recovery rates, and client satisfaction or quality of life measures post-intervention.
- **Needs Assessment Data:** Trends in behavioral health issues presenting at clinics, service gaps, or unmet needs identified through client interactions.

Organizational Feedback from July '24 Survey

- **Why BHC?** DBH participates in BHC as the community mental health agency, aiming to ensure that other agencies are informed about the services and expertise they provide.
- **Impact Sought:** Their primary goal is to provide seamless access to behavioral health services and reduce waiting times for community members.
- **Primary Activities:** DBH provides a wide range of services across the behavioral health spectrum under one roof, allowing for continuity of care.
- **Specific Initiatives:** DBH aims to continue serving individuals with serious mental illnesses (SMI) and to expand and develop programs that address gaps in service.
- **Role:** Recognized as a key contributor to behavioral health care, drawing on the collective experience of their staff to support the community.

Alignment & Areas to Explore

Alignment: Discovery Behavioral Health's focus on comprehensive service provision aligns well with BHC's expectations, particularly in areas related to treatment and continuity of care. Their stated goal of expanding services and addressing service gaps aligns with BHC's mission to reduce community health disparities.

Areas to Explore

- **Data Contribution:** While DBH provides essential services, we have yet to explore their sharing specific data types with BHC. The BHC could benefit from data on treatment utilization, outcomes, and needs assessment, as well as other data DBH knows would be valuable in supporting the successful execution of the BHC's Vision, Mission and Strategic intentions.
- **Programmatic Expansion:** DBH's impact goals focus on access and continuity of care, but we have yet to explore specific initiatives related to measurable outcomes or effectiveness data. Identifying clear metrics on patient outcomes and unmet needs could better align DBH's contributions with BHC's data-driven objectives.
- **Service Focus vs. Broader Health Needs:** DBH's feedback highlights their role within their service scope but does not address broader public health impacts or systemic issues in behavioral health. There is an opportunity to explore how their focus could include public health-oriented metrics, such as demographic trends in service usage or treatment outcomes, that would support their alignment with BHC's broader objectives.



JEFFERSON HEALTHCARE

Representative/Alternate: Mike Glenn, CEO / Dunia Faulx, Chief Transformation and Government Affairs Office

Sector Represented: Hospital - Critical Access Hospital

Draft BHC Role Description

Jefferson Healthcare provides a healthcare system perspective, particularly in addressing mental health crises, substance use treatment, and the coordination of care across various medical services. Their role within BHC is essential for bridging hospital resources with behavioral health needs, assisting in identifying and addressing critical gaps in treatment, and supporting community health strategies.

Interests Represented

- **Organizational Expertise:** Sector expertise in healthcare service provision, with a focus on supporting mental health and substance use treatment within a hospital setting.
- **Broader Community Needs:** Balances organizational interests with a focus on broader community needs, offering insights into gaps within behavioral health services and helping to identify areas where hospital and community services can better align.

Primary Activities within BHC

Jefferson Healthcare is anticipated to engage in:

- **Collaboration:** Partnering with BHC members to align and optimize resources for shared goals in mental health and substance use services.
- **Advocacy:** Advocating for policies that support behavioral health access and improve care coordination between hospital services and community-based care.
- **Program Development:** Engaging in program development efforts to address immediate gaps in behavioral health crisis response and care continuity, particularly for individuals experiencing mental health or substance use crises.
- **Data Contribution:** Sharing relevant healthcare data to support BHC's objectives of tracking community needs, service effectiveness, and care coordination outcomes.
- **Funding and Resource Alignment:** Contributing to BHC's shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County's behavioral health needs.

Governance Role

Jefferson Healthcare's anticipated governance role within BHC includes:

- **Influencing Policy:** Shaping policies that align with both community behavioral health needs and healthcare system priorities, contributing to sustainable and effective health services.
- **Sector Representation:** Acts as a strong advocate for the healthcare system perspective, bringing hospital-based insights and resources are considered in BHC's decision-making processes, ensuring policies are inclusive and support community well-being.
- **Collaborative Decision-Making:** Actively participate in BHC decision-making processes, contributing insights and expertise specific to their sector.
- **BHC Strategic Planning:** : Actively participating in planning processes to enhance county-wide service delivery and improve the healthcare system's alignment with BHC's mission. Engage in BHC strategic planning efforts by participating in community assessments, action plan development, contributing requested input to funding pursuits, and supporting project implementation. This role supports alignment with the BHC's Vision, Mission, and strategic intentions, enhancing access to behavioral health resources and improving outcomes across Jefferson County.

Organizational Feedback from July '24 Survey

- **Why BHC?** Jefferson Healthcare participates in BHC to ensure patients and providers feel supported in behavioral health care.
- **Impact Sought:** The organization aims to enhance referral networks and community-based projects to improve access to behavioral health prevention and treatment services.
- **Primary Activities:** Focusing on securing local funding to support programs and ensure that providers meet community needs.
- **Specific Initiatives:** None explicitly provided.
- **Role:** Identified as a key contributor to the healthcare lens within BHC.

Alignment & Areas to Explore

Alignment: Jefferson Healthcare's commitment to supporting patients and enhancing referral networks aligns with BHC's goal of providing a comprehensive behavioral health system. Their focus on funding and supporting behavioral health services also aligns with BHC's vision of cross-sector collaboration for improved community care.

Areas to Explore:

- **Data Contribution:** Placeholder.



- **Specific Initiatives:** Jefferson Healthcare’s feedback does not highlight any specific initiatives or programs that directly address immediate behavioral health needs, such as crisis response or gap-filling initiatives. Developing targeted programs in these areas could enhance their alignment with BHC’s broader objectives.



JEFFERSON COUNTY PUBLIC HEALTH – BHC MEMBER OVERVIEW

Representatives: Apple Martine / Barb Jones

Sector Represented: Local Health Department

BHC Role Description

Jefferson County Public Health serves as a public health advocate and liaison, focusing on integrating public health policy, prevention strategies, and community health initiatives that impact behavioral health and substance use within the county. Their role includes aligning public health services with community needs, especially in areas related to substance use and behavioral health support.

Interests Represented

- **Organizational Expertise:** Sector expertise in public health, particularly in promoting wellness through policy implementation, prevention initiatives, and harm reduction strategies.
- **Broader Community Needs:** Addresses social determinants of health (e.g., housing stability, income) that influence behavioral health and substance use trends in the Jefferson County community.

Primary Activities within BHC

Jefferson County Public Health is anticipated to engage in:

- **Collaboration:** Working with BHC members to break down silos in behavioral health care, fostering cross-agency collaboration and shared strategies.
- **Harm Reduction Advocacy:** Promoting and implementing harm reduction approaches for substance use treatment and mental health support.
- **Community Health Promotion:** Developing and supporting programs to reduce stigma around mental health and substance use, and to increase access to preventive services.
- **Resource Building:** Enhancing resources for harm reduction services and educational outreach to other community-based organizations.
- **Funding and Resource Alignment:** Contributing to BHC's shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County's behavioral health needs.

Governance Role

Jefferson County Public Health's anticipated governance role within BHC includes:

- **Policy Influence:** Shaping public health policies that align with community behavioral health needs and support holistic health improvement.
- **Strategic Health Planning:** Contributing to strategic planning processes to ensure the inclusion of public health perspectives in behavioral health service delivery.
- **Sector Representation:** Advocating for public health's perspective and sector needs, including their role in behavioral health interventions such as harm reduction, disease prevention, and wellness promotion, ensuring policies are inclusive and support community well-being.
- **Collaborative Decision-Making:** Actively participate in BHC decision-making processes, contributing insights and expertise specific to their sector.
- **BHC Strategic Planning:** Engage in BHC strategic planning efforts by participating in community assessments, action plan development, contributing requested input to funding pursuits, and supporting project implementation. This role supports alignment with the BHC's Vision, Mission, and strategic intentions, enhancing access to behavioral health resources and improving outcomes across Jefferson County.

Organizational Feedback from July '24 Survey

- **Why BHC?** Jefferson County Public Health participates in BHC to reduce silos in behavioral health care and to foster collaborative ideas that improve behavioral health programming and services.
- **Impact Sought:** Aims to reduce overdose deaths, increase mobile harm reduction services, and reduce stigma surrounding mental health and substance use.
- **Primary Activities:** Focused on improving access to safe syringe disposal, vaccination, disease linkage services, and expanding harm reduction services. They also aim to build a mobile harm reduction team for the unhoused and enhance youth-targeted prevention programs.
- **Specific Initiatives:** Initiatives to improve health and safety in substance-using populations, provide support navigation for reliable connection, judgment-free healthcare, and resource navigation for basic needs.

Exploring Potential Data Contribution

- **Spaceholder**

Alignment & Areas to Explore

Alignment: Jefferson County Public Health's focus on harm reduction, prevention, and equitable access aligns well with BHC's goals of addressing behavioral health needs across Jefferson County. Their commitment to public health metrics and harm reduction data fits within BHC's



data contribution expectations, particularly around Community Health Indicators and Health Equity Metrics.

Areas to Explore:

- **Data Contribution:** Placeholder



JEFFERSON COUNTY SHERIFF'S OFFICE – BHC MEMBER OVERVIEW

Representatives: Joe Nole / ?Dave Fortino?

Sector Represented: Criminal Justice Entity - Law Enforcement (Jail)

BHC Role Description

The Jefferson County Sheriff's Office represents law enforcement's perspective in discussions on behavioral health, emphasizing the intersection of mental health crises, public safety, and substance use disorder within the justice system. Their role within BHC focuses on balancing public safety with community-based solutions, especially for individuals in crisis.

Interests Represented

- **Organizational Expertise:** Primarily sector expertise with a strong alignment to community needs, particularly around crisis intervention and jail management.
- **Broader Community Needs:** The Sheriff's Office seeks to collaborate on initiatives to decrease recidivism, improve mental health crisis responses, and promote public safety by providing appropriate care pathways for individuals with behavioral health needs.

Primary Activities within BHC

Jefferson County Sheriff's Office is anticipated to engage in:

- **Crisis Intervention:** Collaborating with BHC partners to develop and support crisis intervention programs that connect individuals with behavioral health resources instead of jail.
- **Diversion Initiatives:** Exploring and advocating for programs like mental health courts or drug courts to reduce incarceration rates for those in need of behavioral health services.
- **Policy Advocacy:** Working on policies that expand access to mental health/substance use disorder services for incarcerated individuals and promote alternatives to incarceration for those with behavioral health issues.
- **Funding and Resource Alignment:** Contributing to BHC's shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County's behavioral health needs.

Governance Role

Jefferson County Sheriff's Office's anticipated governance role within BHC includes:

- **Policy Influence:** Shaping behavioral health and public safety policies to promote harm reduction and reduce incarceration rates.

- **Sector Representation of Law Enforcement Needs:** Advocate for the integration of law enforcement and behavioral health services, ensuring that policies promote community safety and provide appropriate care for individuals in crisis, both in the field and within the jail. Additionally, work to ensure policies are inclusive and support overall community well-being.
- **Collaborative Decision-Making:** Actively participate in BHC decision-making processes, contributing insights and expertise specific to their sector.
- **BHC Strategic Planning:** Engage in BHC strategic planning efforts by participating in community assessments, action plan development, contributing requested input to funding pursuits, and supporting project implementation. This role supports alignment with the BHC's Vision, Mission, and strategic intention to enhance access to behavioral health resources and improving outcomes across Jefferson County.
- **Funding and Resource Alignment:** Contributing to BHC's shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County's behavioral health needs.

Organizational Feedback from July '24 Survey

- **Why BHC?:** The Sheriff's Office participates in BHC to improve coordination with community providers, expand access to services for underserved populations, and ensure that the Jefferson County Jail is not the primary mental health facility. They aim to connect individuals with the help they need from qualified professionals.
- **Impact Sought:** Their goal is to decrease recidivism and provide proper services for individuals in need.
- **Primary Activities:** Focusing on strategies to keep individuals out of jail who need services rather than incarceration and to reduce recidivism.
- **Specific Initiatives:** Advocacy for mental health/substance use services and providing supportive services for individuals while they are incarcerated.
- **View on Role:** The Sheriff's Office views itself as a key contributor to decision-making around harm reduction policies.

Exploring Potential Data Contribution

- **Placeholder**

Alignment & Areas to Explore

Alignment: The Jefferson County Sheriff's Office's objectives of reducing recidivism and advocating for harm reduction align well with BHC's goals to address community behavioral



health needs, especially through law enforcement's unique role. Their commitment to collaboration on crisis intervention and diversion programs is consistent with BHC's focus on developing integrated responses to behavioral health crises.

Areas to Explore:

- **Data Contribution:** Placeholder.

PORT TOWNSEND POLICE DEPARTMENT – BHC MEMBER OVERVIEW

Representative: Police Chief Tom Olson / ?Alternate?

Sector Represented: Criminal Justice Entity - Law Enforcement

BHC Role Description

The Port Townsend Police Department represents the law enforcement perspective in discussions on behavioral health, focusing on the intersection of mental health crises, public safety, and substance use disorder within the justice system. The department's role within BHC emphasizes balancing public safety with community-based solutions, particularly for individuals in crisis.

Interests Represented

- **Organizational Expertise:** Primarily sector expertise with a strong alignment to community needs, especially around crisis response and collaboration with behavioral health services.
- **Broader Community Needs:** The Police Department seeks to contribute to community safety by collaborating on initiatives that reduce incidents related to mental health crises and provide pathways to appropriate services.

Primary Activities within BHC

The Port Townsend Police Department is anticipated to engage in:

- **Crisis Intervention Collaboration:** Working with BHC partners to enhance crisis intervention strategies and direct individuals to behavioral health resources.
- **Community Safety Initiatives:** Supporting policies and programs that reduce harm, especially in substance use and mental health crisis contexts.
- **Partnership in Problem-Solving:** Engaging as a frontline resource and liaising with other agencies to ensure coordinated responses.

Governance Role

The Port Townsend Police Department's anticipated governance role within BHC includes:

- **Policy Influence:** Participating in the development of policies that balance public safety with the needs of individuals experiencing behavioral health crises to promote harm reduction and reduce incarceration rates.
- **Sector Representation of Law Enforcement Needs:** Advocate for the integration of law enforcement and behavioral health services, ensuring that policies promote community safety and provide appropriate care for individuals in crisis, both in the field and within the jail. Additionally, work to ensure policies are inclusive and support overall community well-being.

- **Advocacy for Resources:** Supporting efforts to secure resources that facilitate effective crisis response and diversion programs, thereby reducing the strain on law enforcement and promoting community well-being.
- **Collaborative Decision-Making:** Actively participate in BHC decision-making processes, contributing insights and expertise specific to their sector, particularly on matters that impact law enforcement's role in community behavioral health and harm reduction policies.
- **BHC Strategic Planning:** Engage in BHC strategic planning efforts by participating in community assessments, action plan development, contributing requested input to funding pursuits, and supporting project implementation. Contributions to planning and decision-making processes that align law enforcement perspectives with broader community behavioral health goals. This role supports alignment with the BHC's Vision, Mission, and strategic intention to enhance access to behavioral health resources and improving outcomes across Jefferson County.
- **Funding and Resource Alignment:** Contributing to BHC's shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County's behavioral health needs.

Organizational Feedback from July '24 Survey

- **Why BHC?:** The Police Department participates in BHC to gain a better understanding of community needs and identify ways they can support behavioral health initiatives.
- **Impact Sought:** Their primary goal is to reduce accidental deaths and ensure timely access to services for those in crisis.
- **Primary Activities:** The department aims to serve as a frontline resource and collaborate with other agencies to address community needs effectively.
- **Specific Initiatives:** No specific goals were provided for BHC involvement; however, the department emphasizes being good partners and problem solvers.
- **Governance Role:** They see their role as a partner in collaborative problem-solving, contributing to the shared mission of BHC.

Exploring Potential Data Contribution

- Placeholder



Alignment & Areas for Exploration

Alignment: The Port Townsend Police Department's focus on crisis response, collaboration with behavioral health services, and alignment with community safety objectives resonates well with BHC's goals. Their commitment to reducing harm and accidental deaths aligns closely with the BHC mission to enhance community behavioral health outcomes.

Areas for Exploration:

- **Data Contribution:** Placeholder

JEFFERSON COUNTY THERAPEUTIC COURTS – BHC MEMBER OVERVIEW

Representative: Brandon Mack / Rebecca Marriott

Sector Represented: Criminal Justice - Drug Court (Mental Health? Family?)

BHC Role Description

Jefferson County Therapeutic Courts provide insight into the legal aspects of behavioral health, specifically within therapeutic court systems such as drug courts. Their role includes advocating for policies and programs that integrate behavioral health treatment within the criminal justice framework, offering structured support for individuals facing behavioral health challenges as part of their rehabilitation.

Interests Represented

- **Organizational Expertise:** Sector expertise with strong ties to organizational interests, focusing on legal reforms, therapeutic court processes, and behavioral health support services.
- **Broader Community Needs:** The Therapeutic Courts aim to reduce recidivism and support participants' mental health recovery through a structured legal approach, fostering healthier outcomes within the community.

Primary Activities within BHC

Jefferson County Therapeutic Courts are anticipated to engage in:

- **Policy Advocacy:** Promoting policies that support therapeutic court programs and address behavioral health needs within the justice system.
- **Collaboration with Health Services:** Working with behavioral health providers to ensure integrated treatment options for participants.
- **Program Development:** Assisting in the development of initiatives aimed at reducing recidivism through structured support within therapeutic courts.
- **Legal Barriers & Challenges:** Providing insights into the barriers that individuals with behavioral health needs face within the legal system, such as access to legal counsel and housing post-release.

Governance Role

Jefferson County Therapeutic Courts are anticipated to engage in the following ways:

- **Policy Influence:** Shape policies that support legal reform and behavioral health treatment within therapeutic courts.

- **Sector Representation:** Advocate for the needs and perspectives of court participants, ensuring that policies align with therapeutic objectives, are inclusive and support community well-being.
- **Collaborative Decision-Making:** Actively participate in BHC decision-making, bringing a criminal justice perspective focused on rehabilitative and supportive solutions for individuals with behavioral health challenges.
- **BHC Strategic Planning:** Engage in BHC strategic planning efforts by participating in community assessments, action plan development, contributing requested input to funding pursuits, and supporting project implementation. This role supports alignment with the BHC's Vision, Mission, and strategic intentions, enhancing access to behavioral health resources and improving outcomes across Jefferson County.
- **Funding and Resource Alignment:** Contributing to BHC's shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County's behavioral health needs.

Organizational Feedback from July '24 Survey

- **Why BHC?:** Participation in BHC allows them to stay updated on partnerships and community resources, enhancing their ability to support court participants effectively.
- **Impact Sought:** Their primary goal is to foster high-quality care and reduce recidivism among participants.
- **Primary Activities:** The focus is on therapeutic courts, providing an opportunity for structured mental health support within the justice system.
- **Specific Initiatives:** Their initiatives aim to create opportunities for individuals in the justice system to address mental health needs within a supportive and structured environment.
- **Governance Role:** They view themselves as key contributors and representatives of participants in therapeutic courts.

Exploring Potential Data Contribution

- Placeholder
- **Court-Related Behavioral Health Data:** Tracking the number and types of cases involving behavioral health disorders, including case outcomes (e.g., sentencing to treatment vs. incarceration).

- **Program Participation & Success Rates:** Collecting data on client participation in therapeutic courts, compliance rates, and overall program success (e.g., reduced substance use, improved mental health).

Alignment & Areas to Explore

Alignment: The Therapeutic Courts' objectives to support mental health and reduce recidivism align with BHC's goals, especially in advocating for rehabilitative approaches within the justice system. Their focus on structured mental health support complements BHC's broader community wellness objectives.

Areas to Explore:

- **Data Contribution:** Because the Therapeutic Courts emphasize support and reducing recidivism, there is an opportunity to explore having the Courts provide detailed metrics on Court-Related Behavioral Health Data, Program Participation & Success Rates, and Legal Barriers & Challenges, along with any other data that would enhance BHC's data resources and facilitate evidence-based program adjustments.
- **Lived Experience:** Recruit and retain an individual with lived experience to hold one position on the BHC's the Voting Membership



JEFFERSON COUNTY DEFENDER'S OFFICE – BHC MEMBER OVERVIEW

Representative: Richard Davies / Alternate

Sector Represented: Criminal Justice - Defense

BHC Role Description

The Defender's Office provides crucial insight into the legal aspects of behavioral health, including drug courts, defense, and prosecution. They play an essential role in developing programs and policies that address behavioral health within the criminal justice framework. By advocating for legal reforms and therapeutic court processes, the Defender's Office contributes to a justice system that is responsive to the needs of individuals with behavioral health challenges.

Interests Represented

- **Organizational Expertise:** Sector expertise with a strong focus on organizational interests within the justice system, including legal reforms, therapeutic court processes, and supportive services that address behavioral health within the justice system.
- **Broader Community Needs:** The office supports broader community health by promoting policies that address legal and behavioral health challenges, reducing barriers for individuals with behavioral health needs who may encounter the legal system.

Primary Activities within BHC

The Defender's Office is anticipated to:

- **Collaborate with Justice Entities:** Work with Therapeutic Courts, law enforcement, and other criminal justice agencies to coordinate efforts around behavioral health needs within the justice system.
- **Advocate for Behavioral Health Resources:** Push for resources and programs that support behavioral health treatment as an alternative to traditional sentencing.
- **Policy Development:** Participate in developing policies that balance public safety with support for justice-involved individuals facing behavioral health challenges.
- **Funding and Resource Alignment:** Contributing to BHC's shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County's behavioral health needs.

Governance Role

Jefferson County Therapeutic Courts are anticipated to engage in the following ways:

- **Policy Influence:** Shape policies that support legal reform and behavioral health treatment within therapeutic courts.
- **Sector Representation:** Advocate for the needs and perspectives of court participants, ensuring that policies align with therapeutic objectives, are inclusive and support community well-being.
- **Collaborative Decision-Making:** Actively participate in BHC decision-making, bringing a criminal justice perspective focused on rehabilitative and supportive solutions for individuals with behavioral health challenges.
- **BHC Strategic Planning:** Engage in BHC strategic planning efforts by actively participating in community assessments, action plan development, contributing requested input to funding pursuits, and supporting project implementation. This role supports alignment with the BHC's Vision, Mission, and strategic intentions, enhancing access to behavioral health resources and improving outcomes across Jefferson County.
- **Advocate for Justice System Integration:** Ensure policies developed within BHC consider the intersection of behavioral health and legal needs, promoting a collaborative approach to reduce recidivism and support recovery.
- **Represent the Legal Perspective:** Provide the legal system's viewpoint in discussions, focusing on systemic challenges faced by individuals with behavioral health needs.

Organizational Feedback from July '24 Survey

- **Why BHC?** No input on survey.
- **Impact Sought:** No input on survey.
- **Primary Activities:** No input on survey.
- **Specific Initiatives:** No input on survey.

Exploring Potential Data Contribution

- Placeholder

Alignment & Areas to Explore

Alignment: The Defender's Office's focus on addressing legal barriers, advocating for therapeutic courts, and supporting behavioral health within the criminal justice system aligns well with BHC's commitment to integrating behavioral health services across sectors. Their expertise provides essential insights into the intersection of behavioral health and legal processes, particularly regarding court-mandated treatments and diversion programs.

Areas to Explore:

- **Data Contribution:** Placeholder.
- **Collaborative Initiatives:** Exploring joint initiatives with other criminal justice entities, such as the Sheriff's Office or Therapeutic Courts, could strengthen cross-sector alignment, especially in areas of diversion programs and post-release support.
- **Expansion of Advocacy Efforts:** While the Defender's Office is positioned to advocate for behavioral health needs within the justice system, there may be opportunities for the BHC to support them (and vice versa) in their role in policy development to address systemic barriers affecting justice-involved individuals with behavioral health issues.
- **Formalizing BHC Contributions:** Establishing specific, regular contributions to BHC's strategic initiatives and governance discussions will ensure the Defender's Office's input is consistently represented in BHC decisions, especially in matters related to legal support and therapeutic court alignment.

PROSECUTOR'S OFFICE – BHC MEMBER OVERVIEW

Representatives: James Kennedy

Sector Represented: Criminal Justice - Prosecutor

BHC Role Description

The Prosecutor's Office provides insight into the legal aspects of behavioral health, including drug courts, defense, and prosecution. They play a key role in developing programs and policies that address behavioral health within the criminal justice framework. By advocating for legal reforms and therapeutic court processes, the Prosecutor's Office helps support an integrated justice system that balances accountability with behavioral health support.

Interest Represented

- **Organizational Expertise:** Sector expertise with strong ties to organizational interests within the justice system.
- **Broader Community Needs:** Advocates for therapeutic court processes and supportive services that promote recovery and reduce recidivism among individuals with behavioral health issues.

Organizational Feedback from July '24 Survey

- **Why BHC?** No input on survey.
- **Impact Sought:** No input on survey.
- **Primary Activities:** No input on survey.
- **Specific Initiatives:** No input on survey.

Primary Activities within BHC

- **Collaborate with Justice Entities:** Work with Therapeutic Courts, law enforcement, and other criminal justice agencies to coordinate efforts around behavioral health needs within the justice system.
- **Advocate for Behavioral Health Resources:** Support resources and programs that address behavioral health needs as part of sentencing alternatives or therapeutic court options.
- **Policy Development:** Participate in developing policies within BHC that promote treatment and rehabilitation over incarceration when appropriate.
- **Funding and Resource Alignment:** Contributing to BHC's shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County's behavioral health needs.

Governance Role

The Prosecutor's Office is anticipated to:

- **Policy Influence:** Shape policies that support legal reform and behavioral health treatment within therapeutic courts.
- **Sector Representation:** Provide the prosecutorial viewpoint in discussions, with a focus on accountability and behavioral health integration in criminal justice responses.
- **Collaborative Decision-Making:** Actively participate in BHC decision-making, bringing a criminal justice perspective focused on rehabilitative and supportive solutions for individuals with behavioral health challenges.
- **BHC Strategic Planning:** Engage in BHC strategic planning efforts by actively participating in community assessments, action plan development, contributing requested input to funding pursuits, and supporting project implementation. This role supports alignment with the BHC's Vision, Mission, and strategic intentions, enhancing access to behavioral health resources and improving outcomes across Jefferson County.
- **Advocate for Justice System Integration:** Ensure policies developed within BHC consider the intersection of behavioral health and legal needs, promoting a collaborative approach to reduce recidivism and support recovery.

Exploring Potential Data Contribution

- Placeholder

Alignment and Areas to Explore

Alignment

The Prosecutor's Office's commitment to addressing behavioral health issues within the justice system aligns with BHC's goal of integrating behavioral health services across sectors. Their focus on therapeutic courts and supportive services complements BHC's mission to promote recovery and reduce recidivism.



Areas to Explore

- **Data Sharing:** Placeholder

EAST JEFFERSON FIRE AND RESCUE DISTRICT #1 – BHC MEMBER OVERVIEW

Representative: Bret Black / ?Alternate?

Sector Represented: District Emergency Medical Service Entity

BHC Role Description

East Jefferson Fire and Rescue District #1 represents the emergency medical perspective on behavioral health crises, focusing on immediate response, crisis intervention, and coordination between EMS and healthcare providers. Their role is critical in ensuring rapid response to behavioral health emergencies and providing continuity of care in collaboration with other healthcare and behavioral health entities.

Interest Represented

- **Organizational Expertise:** Sector expertise with a strong, community-oriented focus on emergency services and behavioral health response.
- **Broader Community Needs:** Committed to optimizing emergency response services for individuals experiencing behavioral health emergencies, ensuring efficient and effective intervention and follow-up care.

Organizational Feedback from July '24 Survey

- **Why BHC?:** East Jefferson Fire and Rescue supports BHC to strengthen collaboration with partners, which is essential for delivering services and improving outcomes. They also aim to optimize their services within the community.
- **Impact Sought:** Increase system understanding, expand access to services, and enhance system efficiency.
- **Primary Activities:** CARES Program.
- **Specific Initiatives:** Community Risk Reduction efforts.
- **Governance Role:** Participates as a voting member.

Primary Activities within BHC

East Jefferson Fire and Rescue District #1 is anticipated to engage in:

- **Emergency Response Coordination:** Actively participating in crisis response and collaborative efforts with healthcare and behavioral health providers.
- **Advocacy for Behavioral Health Interventions:** Promoting the use of specialized training and resources for EMS personnel in mental health crisis scenarios.
- **Community Education and Outreach:** Supporting community education initiatives on substance use, overdose prevention, and behavioral health crisis intervention.

- **Funding and Resource Alignment:** Contributing to BHC’s shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County’s behavioral health needs.

Governance Role

East Jefferson Fire and Rescue is anticipated to:

- **Influence BHC Strategic Planning:** Actively engage in the Assessment, Action Plan development, contribute requested input to funding pursuits, and participate in project implementation to support the BHC’s Vision, Mission, and strategic intentions.
- **Advocate for Integrated and Non-Urgent Response Policies:** Ensure BHC’s policies address the critical role of emergency response in behavioral health crises and non-urgent response, emphasizing a coordinated and community-focused approach.
- **Represent Emergency Medical Services:** Provide an EMS perspective in discussions, ensuring the integration of emergency response protocols in BHC initiatives for community health and safety.

Exploring Potential Data Contribution

- **Placeholder**

Alignment and Areas to Explore

Alignment

East Jefferson Fire and Rescue’s emphasis on crisis response, collaboration, and system efficiency aligns with BHC’s goals to integrate emergency and behavioral health services across sectors. Their focus on response time, intervention data, and training directly supports BHC’s objectives.

Areas to Explore

- **Enhanced Data Sharing:** Placeholder.
- **Co-Response Initiatives:** Collaborating with BHC to assess the effectiveness of available resources could enhance EJFR’s impact on community-based recovery initiatives.
- **Expanded Community Risk Reduction:** Building upon their existing Community Risk Reduction efforts to incorporate behavioral health awareness and prevention programs could broaden their contribution to BHC’s objectives.



QUILCENE FIRE DEPARTMENT DISTRICT #2 – BHC MEMBER OVERVIEW

Representative: Tim McKern / ?Alternate?

Sector Represented: District Emergency Medical Service Entity

BHC Role Description

Quilcene Fire Department District #2 represents the emergency medical perspective on behavioral health crises, with a focus on immediate response, crisis intervention, and coordination between EMS and healthcare providers. The department is dedicated to ensuring continuity of care for individuals experiencing behavioral health emergencies, particularly in the South End. Their role is critical in ensuring rapid response to behavioral health emergencies and providing continuity of care in collaboration with other healthcare and behavioral health entities.

Interest Represented

- **Organizational Expertise:** Sector expertise centered on providing emergency services and community-focused behavioral health response.
- **Broader Community Needs:** Quilcene Fire Department's role encompasses supporting behavioral health crisis management, ensuring safety, and promoting recovery among vulnerable populations, especially those interfacing with criminal justice..

Organizational Feedback from July '24 Survey

- **Why BHC?:** Quilcene Fire participates in BHC to serve as the “eyes and ears” for the South End, providing critical insights and support.
- **Impact Sought:** Increase recovery rates and reduce recidivism among clients interfacing with the criminal justice system.
- **Primary Activities:** Establishing common goals with other BHC members to promote unified messaging and coordinated action.
- **Specific Initiatives:** Reviewing available resources and evaluating their effectiveness.
- **Governance Role:** Actively contributes to decision-making around harm reduction policies within BHC.

Primary Activities within BHC

Quilcene Fire Department District #2 is anticipated to engage in:

- **Emergency Response Coordination:** Actively participating in crisis response and collaborative efforts with healthcare and behavioral health providers.
- **Advocacy for Behavioral Health Interventions:** Promoting the use of specialized training and resources for EMS personnel in mental health crisis scenarios.

- **Community Risk Reduction:** Supporting the development and implementation of risk reduction strategies to minimize behavioral health crises and improve community safety.
- **Funding and Resource Alignment:** Contributing to BHC's shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County's behavioral health needs.

Governance Role

Quilcene Fire Department District #2 is anticipated to:

- **Influence BHC Strategic Planning:** Actively engage in the Assessment, Action Plan development, contribute requested input to funding pursuits, and participate in project implementation to support the BHC's Vision, Mission, and strategic intentions.
- **Advocate for Integrated and Non-Urgent Response Policies:** Ensure BHC's policies address the critical role of emergency response in behavioral health crises and non-urgent response, emphasizing a coordinated and community-focused approach.
- **Represent Emergency Medical Services:** Provide an EMS perspective in discussions, ensuring the integration of emergency response protocols in BHC initiatives for community health and safety.

Exploring Potential Data Contribution

- **Placeholder**

Alignment and Areas to Explore

Alignment

Quilcene Fire Department's focus on crisis response, collaborative goal setting, and harm reduction aligns with BHC's mission to enhance community-based behavioral health support. Their commitment to improving recovery and reducing recidivism supports BHC's objectives in these areas.

Areas to Explore

- **Data Sharing:** Placeholder
- **Expanded Community Risk Reduction Collaboration:** Working with BHC to align risk reduction efforts with behavioral health needs could amplify preventive impacts.
- **Training Integration with Behavioral Health:** Joint training with BHC members on crisis response and mental health intervention could enhance service delivery and outcomes.



BRINNON FIRE DEPARTMENT DISTRICT #4 – BHC MEMBER OVERVIEW

Representative: Tim Manly / ?Alternate?

Sector Represented: District Emergency Medical Service Entity

BHC Role Description

Brinnon Fire Department District #4 represents the emergency medical perspective on behavioral health crises, focusing on immediate response, crisis intervention, and coordinated care between EMS and healthcare providers to ensure continuity of care for individuals experiencing behavioral health emergencies.

Interest Represented

- **Organizational Expertise:** Sector expertise in community-oriented emergency services in frontier geography, focusing on crisis intervention and supporting behavioral health in emergencies..
- **Broader Community Needs:** Aimed at enhancing safety, responding to behavioral health crises effectively, and supporting integrated emergency response to improve outcomes for at-risk individuals in the Brinnon area.
- **Organizational Feedback from July '24 Survey**
- **Why BHC?** No input on survey.
- **Impact Sought:** No input on survey.
- **Primary Activities:** No input on survey.
- **Specific Initiatives:** No input on survey.

Primary Activities within BHC

Brinnon Fire is anticipated to engage in:

- **Emergency Response Coordination:** Actively participating in crisis response and collaborative efforts with healthcare and behavioral health providers.
- **Advocacy for Behavioral Health Interventions:** Promoting the use of specialized training and resources for EMS personnel in mental health crisis scenarios.
- **Community Risk Reduction:** Supporting the development and implementation of risk reduction strategies to minimize behavioral health crises and improve community safety.
- **Funding and Resource Alignment:** Contributing to BHC's shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County's behavioral health needs.

Governance Role

Brinnon Fire is anticipated to::

- **Influence BHC Strategic Planning:** Actively engage in the Assessment, Action Plan development, contribute requested input to funding pursuits, and participate in project implementation to support the BHC's Vision, Mission, and strategic intentions.
- **Advocate for Integrated and Non-Urgent Response Policies:** Ensure BHC's policies address the critical role of emergency response in behavioral health crises and non-urgent response, emphasizing a coordinated and community-focused approach.
- **Represent Emergency Medical Services:** Offer insights to align BHC's work with emergency medical services in behavioral health interventions.

Exploring Potential Data Contribution

- **Placeholder**

Alignment and Areas to Explore

Alignment

Brinnon Fire's focus on crisis response, collaborative goal setting, and harm reduction aligns with BHC's mission to enhance community-based behavioral health support. Their emphasis on efficiency and readiness strengthens BHC's approach to integrated emergency responses..

Areas to Explore

- **Enhanced Data Sharing:** Placeholder.
- **Co-Response Initiatives:** Collaborating with BHC to assess the effectiveness of available resources could enhance BHC's impact on community-based recovery initiatives.
- **Unified Messaging Strategies:** Working closely with BHC to develop consistent messaging and resource promotion would support a cohesive approach to behavioral health crisis management.



COUNTY MEDICAL PROGRAM DIRECTOR – BHC MEMBER OVERVIEW

Representative: David Carlbom

Sector Represented: County Emergency Medical Service Entity

BHC Role Description

The County Medical Program Director provides medical oversight for county-level programs and services related to behavioral health delivered by Emergency Medical Services. This role is responsible for ensuring that medical policies and practices align with best practices for treatment and recovery, particularly in the areas of mental health and substance use disorders. Additionally, this role integrates behavioral health within county health frameworks to support seamless care delivery.

Interest Represented

- **Organizational Expertise:** Sector expertise focused on the intersection of medical oversight and behavioral health, ensuring program quality and adherence to medical standards.
- **Broader Community Needs:** The County Medical Program Director prioritizes addressing healthcare access issues, aligning medical and behavioral health services, and supporting preventative care to mitigate crisis situations.

Exploring Potential Data Contribution

- **Spaceholder.**

Organizational Feedback from July '24 Survey

- **Why BHC?** To ensure the seamless delivery of services to improve the health of Jefferson County citizens, especially those most vulnerable due to mental health or substance use disorder.
- **Impact Sought:** Emphasizes the importance of prevention in EMS response to fentanyl and other substance use crises, as reactive measures can be too late.
- **Primary Activities:** Building relationships to enhance educational initiatives around behavioral health.
- **Specific Initiatives:** Improve community health.
- **Governance Role:** Voting Member

Primary Activities within BHC

The County Medical Program Director is anticipated to engage in:

- **Oversight of Behavioral Health Protocols:** Ensuring that all prehospital behavioral health practices align with medical standards and county health objectives.

- **Educational Initiatives:** Providing leadership on community education regarding behavioral health risks, prevention, and response, particularly in EMS contexts.
- **Policy Development and Advocacy:** Working to create and support policies that improve access to behavioral health services and promote preventative care.
- **Funding and Resource Alignment:** Contributing to BHC's shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County's behavioral health needs.

Governance Role

The County Medical Program Director is expected to:

- **Influence BHC Strategic Planning:** Participate in Assessment, Action Plan development, contribute requested input to funding pursuits, and engage in project implementation to support BHC's Vision, Mission, and strategic goals.
- **Integrate Medical & Behavioral Health Policies:** Advocate for policies that bridge EMS and behavioral health needs, especially in crisis prevention and response.
- **Represent Medical Oversight Perspective:** Provide insights to align BHC's objectives with standards in medical and behavioral health integration.

Alignment and Areas to Explore

Alignment

The County Medical Program Director's focus on medical oversight, healthcare access, and prevention aligns well with BHC's goals for comprehensive behavioral health support and community well-being.

Areas to Explore

- **Data Sharing:** Placeholder
- **Strengthened EMS-BHC Coordination:** Expanding prevention-focused EMS protocols and improving coordination with behavioral health could further support BHC's crisis prevention initiatives.
- **Enhanced Community Education Programs:** Collaborate with BHC to develop and implement educational for pre-hospital providers that address behavioral health risks and preventative care within the county.

OLYCAP – BHC MEMBER OVERVIEW

Representatives: Heidi Morgan / Viola Ware

Sector Represented: Housing Assistance

BHC Role Description

OlyCAP provides input on housing needs, youth recovery programs, and services that address the social determinants of health related to mental health and substance use. Their role focuses on advocating for housing stability, wraparound services, and recovery-supportive environments for vulnerable populations, particularly those impacted by behavioral health challenges.

Interest Represented

- **Organizational Expertise:** Primarily organizational interests with strong sector expertise in housing assistance. They focus on stabilizing housing and providing wraparound services for individuals facing behavioral health challenges.
- **Broader Community Needs:** OlyCAP prioritizes housing security and support services for at-risk groups, understanding that stable housing is foundational to health recovery and stability.

Organizational Feedback from July '24 Survey

- **Impact Sought:** To provide housing security for those who need it most, emphasizing that recovery is difficult without stable shelter.
- **Primary Activities:** Outreach efforts to connect qualified individuals to services and ensure they are aware of available support.
- **Specific Initiatives:** Provides assistance for those experiencing food and housing insecurity.
- **Governance Role:** Acts as a community resource, working collaboratively to understand and meet community needs.

Primary Activities within BHC

OlyCAP is anticipated to engage in:

- **Advocacy for Housing as a Determinant of Health:** Championing housing stability as essential to mental health and substance use recovery.
- **Community Outreach & Engagement:** Ensuring that vulnerable populations are aware of housing and support services, especially within behavioral health contexts.
- **Supportive Housing Program Development:** Contributing expertise on developing programs that offer wraparound services for individuals facing both housing and behavioral health challenges.
- **Funding and Resource Alignment:** Contributing to BHC's shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available

resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County’s behavioral health needs.

Governance Role

OlyCAP is anticipated to:

- **Participate in BHC Strategic Planning:** Engage in Assessment, Action Plan development, provide input for funding pursuits, and participate in project implementation to advance the BHC’s Vision, Mission, and strategic objectives.
- **Advocate for Policy Integration:** Promote policies that align housing stability with health outcomes, addressing behavioral health through housing initiatives.
- **Represent Housing Assistance Perspective:** Provide insights into housing challenges, opportunities, and the critical role of stable housing in recovery and well-being for individuals affected by behavioral health issues.

Exploring Potential Data Contribution

- **Placeholder**

Alignment and Areas to Explore

Alignment

OlyCAP’s focus on housing stability, outreach, and support for vulnerable populations aligns closely with BHC’s mission to address foundational needs that impact mental health and substance use recovery.

Areas to Explore

- **Enhanced Data Collection on Housing Outcomes:** Data on the impact of stable housing on behavioral health outcomes would provide valuable insights for BHC’s broader objectives.
- **Increased Integration of Housing with Behavioral Health Services:** Exploring more integrated approaches to deliver wraparound support that addresses both housing and behavioral health needs.
- **Expanded Outreach Efforts:** Collaboration with BHC to improve outreach and education on housing assistance and its benefits for mental health and recovery.



MEMBER ORGANIZATION: OWL 360 (THE NEST/PFEIFFER/PARLIAMENT HOUSE)

Representative: Kelli Parcher / ?Alternate?

Sector Represented: Community Youth Housing & Recovery Environment

BHC Role Description

Provides input on housing needs, youth recovery programs, and services that address the social determinants of health related to mental health and substance use.

Interest Represented (Organizational, Sector Expertise, Broader Community Needs)

Primarily organizational interests with strong sector expertise. The representative focuses on housing stability, recovery environments, and wraparound services for vulnerable populations.

Primary Activities within BHC

- **Collaboration:** Engaging with BHC partners to enhance housing and recovery resources for youth, ensuring a cohesive approach to supporting young people with behavioral health needs.
- **Advocacy:** Promoting policies and initiatives that address the housing and recovery needs of youth at risk, helping to bridge housing stability with mental health and substance use support.
- **Program Development:** Supporting the development and implementation of wraparound services within BHC, with a particular focus on prevention for at-risk youth.
- **Funding and Resource Alignment:** Contributing to BHC's shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County's behavioral health needs.

Organizational Feedback from July '24 Survey

- **Why BHC?** We participate to improve coordination between our services and other community providers, and to expand access to care for underserved populations. We also want to ensure that the youth of Jefferson County are receiving supportive services and access to specific resources. Ideally, we can prevent youth from entering care systems unnecessarily, aiming to be part of the solutions for our community.
- **Impact Sought:** We aim to increase recovery rates and decrease recidivism among clients who interact with the criminal justice system. Additionally, we support clients to access systems before needing to enter into other multi-system crisis care.
- **Primary Activities:** We focus on supporting youth and young adult populations in both prevention and intervention to reduce risk and increase protective factors.

- **Specific Initiatives:** Improve transitional care for those in recovery, unsheltered, lacking education, or seeking skills for employment on high-risk factors.

Governance Role

- **BHC Strategic Planning:** Actively participating in assessment, action plan development, providing input for funding pursuits, and implementing projects to support BHC's Vision, Mission, and strategic intentions.
- **Decision-Making:** As a newer and smaller organization, OWL360 contributes to decision-making processes, offering insights from a youth-focused, community-oriented perspective.
- **Collaboration with BHC Partners:** OWL360 sees itself as a support to the overall behavioral health plan, working alongside other BHC members to address the needs of at-risk youth in the community.

Exploring Potential Data Contribution

- **Placeholder.**

Alignment & Areas to Explore

- **Alignment:** OWL360's focus on youth and young adult prevention and support aligns with BHC's goals, particularly regarding housing stability and mental health support. Their expertise in recovery and wraparound services is beneficial to BHC's broader objectives.
- **Areas to Explore - Data:** Placeholder.



MEMBER ORGANIZATION: SALISH BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION (SBH-ASO)

Representative: Jolene Kron / Alternate

Sector Represented: Behavioral Health Crisis & State Funded Non-Medicaid & Opioid Action Committee

BHC Role Description

Represents state-funded programs, crisis response, and initiatives related to opioid and other substance use, providing a policy and administrative perspective on the allocation of resources and service provision.

Interest Represented (Organizational, Sector Expertise, Broader Community Needs)

Sector expertise focused on aligning state resources with community needs. This role emphasizes leveraging state funding and programs to address local behavioral health priorities.

Primary Activities within BHC

- **Crisis Response Coordination:** Partnering with BHC to support and enhance crisis intervention services, including mobile crisis teams and hotline services.
- **Funding Allocation Insights:** Providing input on the allocation and management of state funds for behavioral health programs within the community.
- **Community Education and Advocacy:** Supporting system education and providing resources on naloxone access, peer support, and non-Medicaid services for individuals without access to alternative behavioral health resources.
- **Funding and Resource Alignment:** Contributing to BHC's shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County's behavioral health needs.

Exploring Potential Data Contribution

- Placeholder



Organizational Feedback from July '24 Survey

- **Why BHC?** My organization's primary function is to support behavioral health services, and I believe the BHC is an innovative model to engage all parts of the community in supporting this population.
- **Impact Sought:** Increase system understanding, increase access, and enhance the efficiency of systems.
- **Primary Activities:** Within the BHC, my organization's role is to provide a regional and statewide perspective related to behavioral health. The focus is on crisis services, peer work, naloxone access, and support for individuals who do not have access otherwise.
- **Specific Initiatives:** Continued system education.

Governance Role

- **BHC Strategic Planning:** Actively participating in assessment, action plan development, contributing requested input to funding pursuits, and project implementation to support BHC's Vision, Mission, and strategic intentions.
- **Policy Development:** Contributing to policy discussions to align state-funded behavioral health priorities with local needs.
- **Resource Allocation Guidance:** Providing insights on resource distribution to ensure effective use of state funds in addressing behavioral health service gaps.

Alignment & Areas to Explore

- **Alignment:** SBH-ASO's focus on state funding, crisis response, and community education aligns with BHC's goals, particularly in supporting underserved populations through crisis intervention and funding allocation insights.
- **Areas to Explore:** Data Placeholder.



MEMBER ORGANIZATION: NATIONAL ALLIANCE ON MENTAL ILLNESS (NAMI)

Representative: Patrick Johnson

Sector Represented: Community Mental Health Organization

BHC Role Description

Advocates for mental health services and support, providing input on policy, education, and community programs that address the needs of those with mental illness.

Interest Represented (Organizational, Sector Expertise, Broader Community Needs)

Community needs and perspective. This role is critical for providing insights from those directly impacted by behavioral health services, offering a voice that might otherwise be underrepresented.

Primary Activities within BHC

- **Community Advocacy & Education:** Engaging with the BHC to elevate mental health awareness, support education programs, and foster advocacy efforts that reach diverse community segments.
- **Policy & Program Development:** Contributing insights on the mental health needs of the community, informing policy development and community-based program initiatives.
- **Stigma Reduction:** Actively participating in efforts to reduce stigma associated with mental health issues and support community acceptance and understanding.
- **Funding and Resource Alignment:** Contributing to BHC's shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County's behavioral health needs.

Organizational Feedback from July '24 Survey

NO INPUT RECEIVED

- **Why BHC: ?**
- **Impact Sought: ??**
- **Primary Activities: ??**
- **Specific Initiatives: ??**

Governance Role

- **BHC Strategic Planning:** Actively participating in assessment, action plan development, contributing requested input to funding pursuits, and project implementation to support BHC's Vision, Mission, and strategic intentions.



- **Community Representation:** Serving as a voice for individuals with mental health challenges, advocating for policies and programs that align with the lived experiences of those impacted by mental illness.
- **Educational Outreach & Stigma Reduction:** Working collaboratively within the BHC to promote educational initiatives and decrease stigma associated with mental health.

Exploring Potential Data Contribution

- **Placeholder**

Alignment & Areas to Explore

- **Alignment:** NAMI's focus on education, advocacy, and stigma reduction aligns closely with BHC's mission to support mental health awareness and community support systems. Their input on client and family experiences is valuable for shaping programs that meet community needs.
- **Areas to Explore:** Data Placeholder
- **Lived Experience:** Recruit and retain someone with lived experience to hold one position on the BHC's the Voting Membership
- Encourage input on primary activities and specific initiatives could better integrate NAMI's perspective into BHC's strategic goals.

MEMBER ORGANIZATION: BELIEVE IN RECOVERY/GATEWAY TO FREEDOM**Representative(s):** Gabbie Caudill / Alternate**Sector Represented:** Behavioral Health Organization (Mental and Substance Use Disorder)**BHC Role Description**

Advocates for behavioral health treatment and support services, with a focus on mental health and substance use disorder programs. Provides input on policies that impact service delivery, patient care, and resource allocation.

Interest Represented (Organizational; Sector Expertise; Broader Community Needs)

- **Sector Expertise:** Primarily sector expertise with a focus on organizational interests.
- **Broader Community Needs:** Representatives bring in-depth knowledge of behavioral health services to inform discussions on best practices, patient needs, and resource allocation.

Organizational Feedback from July '24 Survey

- **Why BHC?** Our organization participates in the BHC to collaborate with other community partners and enhance the effectiveness of our mental health and substance use disorder services.
- **Impact Sought:** We aim to create a more integrated and accessible behavioral health system within the community through long-term impact.
- **Primary Activities:** Focuses on providing comprehensive mental health and substance use disorder treatment through outpatient services. Engages in care coordination, wraparound support, and outreach.
- **Specific Initiatives:** Expanding access to integrated mental health and substance use disorder treatment, improving care coordination across sectors, and reducing recidivism.

Primary Activities within BHC

- **Collaboration:** Actively engaging with BHC partners to streamline services and improve care continuity.
- **Advocacy:** Supporting initiatives that increase access to mental health and substance use disorder treatment.
- **Resource Development:** Assisting with funding pursuits and strategic planning to expand service capacity.
- **Funding and Resource Alignment:** Contributing to BHC's shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County's behavioral health needs.



Governance Role

BHC Strategic Planning: Participates in assessments, action plan development, contributing requested input to funding pursuits, and project implementation to support the BHC's Vision, Mission, and strategy intentions. Views its role as a key contributor in shaping policy, coordinating care, and driving initiatives aimed at improved behavioral health outcomes.

Exploring Potential Data Contribution

- **Placeholder.**

Alignment & Areas to Explore

Alignment:

Believe In Recovery/Gateway to Freedom's commitment to enhancing integrated mental health and substance use disorder services aligns well with BHC's goal of improving access to behavioral health services across the community. Their focus on seamless care coordination and securing strategic funding strongly supports BHC's mission to address gaps in behavioral health and recovery services.

Areas to Explore:

- **Data Contribution:** Placeholder.
- **Enhanced Collaboration:** Further integration with BHC's initiatives in outreach and prevention, focusing on shared goals to reduce stigma and improve service accessibility for underserved populations.
- **Funding Initiatives:** Identify opportunities to jointly pursue funding that targets innovative recovery models, outreach expansion, and wraparound services.

MEMBER ORGANIZATION: DOVE HOUSE/RECOVERY CAFÉ**Representative:** Brian Richardson / Alternate?**Sector Represented:** Community Recovery Environment Organization**BHC Role Description**

Focuses on supporting individuals in recovery through community-based programs, peer support, and safe environments that encourage behavioral health and substance use recovery.

Interest Represented (Organizational; Sector Expertise; Broader Community Needs)

- **Organizational:** Strong focus on community recovery services and supporting clients through stable environments, peer support, and recovery programs.
- **Sector Expertise:** Recovery and peer support services.
- **Broader Community Needs:** Represents the needs of individuals transitioning from incarceration or hospitalization into community support networks and aims to reduce stigma surrounding behavioral health and substance use recovery.

Organizational Feedback from July '24 Survey

- **Why BHC?:** "We participate in the Behavioral Health Consortium to help us coordinate services with other community providers and jointly address larger systemic challenges that cannot be addressed by ours or any one agency/program alone."
- **Impact Sought:** "Our goal is to be a long-term source of recovery support for anyone who needs it, regardless of insurance status, diagnosis, or number of relapses. We aim to fill gaps between incarceration, institutionalization, and hospitalization."
- **Primary Activities:** "We're creating a community of peer support for recovery which means helping underserved populations access resources."
- **Specific Initiatives:** "We serve folks who are new to the community recovery landscape, helping them navigate services, and providing long-term recovery support before, during, and after treatment stints or hospitalizations."
- **Governance Role:** "We believe we're uniquely positioned to build lasting relationships with both recipients and providers of services."

Primary Activities within BHC

- Develop and maintain community-based peer support programs that provide continuity of care and help individuals transition from institutional settings.
- Promote accessibility to behavioral health resources, focusing on underserved populations needing support during recovery transitions.

- Engage in collaborative outreach efforts with other BHC members to expand the reach of recovery and peer support services.
- **Funding and Resource Alignment:** Contributing to BHC's shared funding insights by tracking awarded and unawarded applications. This approach provides a clearer picture of available resources and funding criteria, helping the consortium identify service gaps and coordinate efforts to meet Jefferson County's behavioral health needs.

Governance Role

- **BHC Strategic Planning:** Participate actively in Assessment and Action Plan development, contribute requested input to funding pursuits, and support project implementation aligned with BHC's Vision, Mission, and strategic intentions.
- **Policy Advocacy:** Influence policies that foster recovery-focused environments and reduce stigma associated with behavioral health challenges.
- **Collaborative Partner:** Serve as a key voice for community-based recovery services, working with BHC members to improve system integration for individuals in recovery.

Exploring Potential Data Contribution

- **Placeholder.**

Alignment & Areas to Explore

Alignment:

Dove House/Recovery Café's focus on peer support, recovery environments, and addressing stigma aligns well with BHC's vision of equitable behavioral health access and community collaboration.

Areas to Explore:

- **Enhanced Data Sharing:** Placeholder.
- **Broader Community Engagement:** Explore ways to increase community awareness and reduce stigma through BHC-supported campaigns.

Collaboration in Housing Support: Jointly develop strategies to improve housing stability for individuals in recovery, with particular attention to transitional housing needs.

MEMBER ORGANIZATION: COUNTY COMMISSIONER'S OFFICE**Representative:** Greg Brotherton**Sector Represented:** County Commissioner**BHC Role Description**

The County Commissioner plays a critical role in connecting the Behavioral Health Consortium (BHC) with broader county and regional policy discussions, while also overseeing the county's financial commitment that sustains the BHC table. As a key representative, he advocates for behavioral health priorities across multiple platforms, amplifying the insights and needs identified within the Consortium. The Commissioner is instrumental in ensuring that BHC initiatives align with county objectives, and he brings valuable insights back to the Consortium to guide its long-term goals. Within the BHC, he serves as a grounding presence, facilitating dialogue between stakeholders, reinforcing the importance of collaboration, and supporting the Consortium's mission through his experience and influence.

Interest Represented (Organizational; Sector Expertise; Broader Community Needs):

Represents county governance with a focus on advocating for behavioral health needs across the community. Through his role, he enhances visibility for the Consortium's work, ensuring that insights and policy recommendations are communicated effectively to other key tables, particularly those related to funding and policy. His position enables him to both represent the Consortium's interests and monitor the use of county funds, thereby maintaining accountability and alignment with community objectives.

Exploring Potential Data Contribution:

While not a direct source of data, the Commissioner's role is pivotal in providing context on the county's behavioral health priorities and funding landscape. He offers insight into policy impacts and broader funding mechanisms, bridging information gaps between local and regional stakeholders.

Organizational Feedback from July '24 Survey:

- **Why BHC?** "I have been at this table since the beginning and continue to see its value. Great community building within a BH space is tough but really important."
- **Impact Sought:** "I just talk organizationally since I am not in a direct service role, and hope that together we can get our arms around the problem. How do you eat an elephant? One bite at a time."
- **Primary Activities:** "Public Health is more involved in the day-to-day, but as a policy leader in the county, I'm focused on sustaining what we have as a BHC and growing the good it does."

- **Specific Initiatives:** “See public health initiatives. The county itself is motivated to help all residents of the county.”
- **Governance Role:** “Public Health should have a louder voice than the county itself, though therapeutic courts and potentially other law and justice departments (juvenile justice for example).”

Primary Activities within BHC

The County Commissioner is an essential contributor to the BHC’s Strategic Planning, participating in the Assessment and Action Plan development, as well as providing input on funding strategies to support the Consortium’s Vision, Mission, and strategic intentions. His presence reinforces the Consortium’s work and aligns it with county priorities. Additionally, he plays a key role in endorsing resources and initiatives, facilitating strategic collaboration among stakeholders, and ensuring that the county’s financial contributions are used effectively to advance BHC goals.

Governance Role

In his governance role, the Commissioner serves as a steward of the county’s investment in the BHC, promoting transparency and accountability in the Consortium’s operations. He contributes to decision-making processes, helps drive coordination among county departments (such as therapeutic courts and public health), and advocates for the BHC’s long-term vision across different policy forums. His oversight ensures that county funds directed to the BHC are utilized to meet both the Consortium’s objectives and broader community needs.

Alignment & Areas to Explore:

- **Enhancing Cross-Departmental Coordination:** Leverage the Commissioner’s position to strengthen ties between therapeutic courts, public health, and other county services for a cohesive approach to behavioral health.
- **Strategic Funding Advocacy:** Utilize the Commissioner’s role to support funding pursuits and resource allocations that address behavioral health service gaps, reinforcing the county’s investment.
- **Promoting the BHC Vision Across Platforms:** Encourage the Commissioner to continue advocating for the BHC’s mission and goals in external forums, ensuring long-term support and alignment with county and regional objectives.

Establishing Consortium-Wide Metrics as a Foundation for Collaborative Data Collection

As we move into the second phase of data planning for the Behavioral Health Consortium (BHC), it has become clear that establishing a set of consortium-wide metrics is essential to support our vision of a unified, equitable behavioral health system. This approach will serve as a “north star” for aligning each member’s contributions and ensuring that data collection efforts are directly connected to our overarching goals.

The Purpose of Consortium-Wide Metrics

The intent behind defining consortium-wide metrics before pinpointing specific data contributions for each member organization is to create a shared framework. These metrics represent our collective priorities—measuring the accessibility, effectiveness, equity, and coordination of behavioral health services throughout Jefferson County. By identifying key indicators at the consortium level, we can facilitate a cohesive, data-driven approach that allows each organization to see how their efforts contribute to the larger mission of the BHC.

A Collaborative Beginning

This document serves as a trampoline for our data discussions, providing a structured starting point for conversations about what is realistically collectable and impactful within each member organization. It is intended to spark dialogue and collaboration, helping us refine these metrics together based on the unique capacities and data insights each organization can bring to the table. Through this collaborative process, we can tailor the final set of metrics to meet both the consortium’s strategic needs and the operational realities of each participating entity.

Phase Two of Our Consortium Data Strategy

In this second phase, we invite all consortium members to engage in refining and prioritizing these metrics. Together, we can determine:

- Which metrics best reflect our shared goals,
- What data is realistically feasible for each organization to track, and
- How we can support one another in creating a seamless, effective data collection process that serves the entire community.

Our goal is to build on these initial metrics, establishing a **baseline for ongoing, meaningful data collection** that will guide our decisions, enhance service coordination, and improve outcomes for all residents. This collaborative foundation will not only inform data collection for current BHC initiatives but also provide a roadmap for expanding and evolving our metrics as community needs and resources change.

CONSORTIUM-WIDE KEY METRIC DEVELOPMENT – POTENTIALS TO CONSIDER

Access to Services

- **Service Utilization:** Track the number of individuals accessing behavioral health services, segmented by service type (e.g., crisis intervention, outpatient therapy, substance use treatment, CARES, LEAD, REAL Team services).
- **Wait Times:** Monitor average wait times for access to behavioral health services, particularly for urgent services like crisis intervention, housing support, and specialized programs (CARES, LEAD, REAL Team).
- **Geographic and Demographic Access:** Breakdown service utilization by geographic location (e.g., rural vs. urban) and demographics (age, gender, ethnicity) to assess equity in access across all BHC programs.

Outcomes and Recovery Rates

- **Treatment Success Rates:** Percentage of individuals achieving positive outcomes, such as reduced symptoms or sustained recovery, following program completion.
- **Recidivism and Re-engagement:** Track rates of readmission or re-engagement in services, especially in programs like CARES, LEAD, and REAL Team, to measure impact on preventing further crisis or legal involvement.
- **Quality of Life Indicators:** Assess self-reported improvements in quality of life post-treatment, including housing stability, employment status, and social connections, to capture the broader impact of BHC programs.

Crisis Response and Intervention

- **Crisis Response Volume:** Record the number of behavioral health-related crisis calls and emergency interventions, broken down by responder type (e.g., EMS, law enforcement, REAL Team).
- **Response Times:** Track average response times for behavioral health crises and overdose responses, including follow-up times for community stabilization and specialized interventions.
- **Diversion Success Rates:** Measure the success rates of diversion programs (e.g., therapeutic courts, mental health diversion, LEAD) in reducing incarceration and supporting recovery outcomes.

Justice and Rehabilitation

- **Court-Linked Behavioral Health Outcomes:** Track behavioral health cases and outcomes for individuals participating in therapeutic court programs.

- **Program Participation and Compliance:** Monitor participation and compliance rates in therapeutic programs and diversion efforts, focusing on factors that support sustained recovery and rehabilitation.
- **Recidivism Reduction:** Measure reductions in re-offense rates among therapeutic court participants, evaluating the effectiveness of rehabilitation-focused justice interventions.
- **Barriers to Service Access for Justice-Involved Individuals:** Track access to behavioral health, housing, and support services for individuals transitioning out of the justice system to identify and address barriers.

Prevention and Community Outreach

- **Prevention Program Reach:** Track participation in preventive programs, such as mental health awareness workshops and school-based programs, aimed at reducing substance use and promoting mental well-being.
- **Community Awareness Levels:** Gather data on community awareness of behavioral health resources, using surveys to assess stigma reduction, mental health literacy, and awareness of programs like CARES, LEAD, and REAL Team.
- **Follow-Up and Retention in Prevention Services:** Monitor follow-up engagement for individuals initially involved in prevention programs to assess sustained involvement and retention.

Equity and Service Gaps

- **Service Coverage and Gaps:** Identify underrepresented service areas (e.g., housing support, outpatient mental health) and track efforts to address these gaps within programs like CARES and REAL Team.
- **Unmet Needs:** Conduct regular needs assessments, especially among vulnerable populations (e.g., youth, elderly, justice-involved individuals), to identify and address emerging behavioral health challenges.
- **Barrier Tracking:** Record common barriers to accessing behavioral health services, such as transportation or affordability, as reported by clients in each program.

Collaboration and Coordination

- **Referral Pathways:** Monitor the number and success rate of referrals between consortium partners, including continuity of care across service types (e.g., from LEAD or REAL Team to outpatient services).

- **Cross-Agency Training and Protocols:** Track participation in BHC-led training programs (e.g., crisis intervention, trauma-informed care), especially within CARES, LEAD, and REAL Team to support shared approaches.
- **Outcome of Collaborative Initiatives:** Evaluate the impact of joint initiatives, such as crisis response teams and co-located services, on cross-sector outcomes.

NEXT STEPS

Select Core Metrics

- From these updated metrics, identify core metrics that are achievable and directly aligned with the BHC's strategic priorities, including the new **Justice and Rehabilitation** category.
- This focus on core metrics will help clarify expectations for each member and provide a strong foundation for consistent data collection and tracking.

Prioritize Realistic Contributions by Member

- Law Enforcement and EMS:
 - Focus on Crisis Response and Intervention metrics, including response volume and times, and contribute to the Justice and Rehabilitation metrics where law enforcement data on diversion and crisis response overlap.
- Public Health and Healthcare Providers:
 - Emphasize *Access to Services* and *Outcomes and Recovery Rates*, particularly around tracking treatment success, service access, and demographic data to support equity goals.
- Community Organizations (e.g., Recovery Café/Dove House, OWL 360):
 - Focus on *Prevention and Community Outreach* metrics, tracking prevention program reach and community awareness. They can also contribute to **Equity and Service Gaps** by identifying barriers their clients face.
- Specialized Programs (CARES, LEAD, REAL Team):
 - Take the lead on metrics within the **Specialized Programs** category, and contribute to both *Crisis Response and Intervention* and **Justice and Rehabilitation** metrics, particularly for diversion success rates and post-crisis stabilization.

- Therapeutic Courts and Justice Partners (Prosecutor, Public Defender’s Office, Gateway to Freedom/Jail):
 - Primary responsibility for **Justice and Rehabilitation** metrics, including tracking recidivism reduction, therapeutic court compliance, and rehabilitation outcomes for justice-involved individuals.

Establish Benchmarks and Targets

Purpose: To ensure progress is measurable and creates shared benchmarks for success.

Process:

- For each metric, set initial benchmarks based on historical data or projected improvement targets. Examples include:
 - *Treatment Success Rates*: Establish a baseline success rate across behavioral health interventions and set incremental improvement targets.
 - *Recidivism Reduction*: Set a target reduction percentage for re-offense rates within therapeutic court and LEAD programs.
 - *Community Awareness*: Use initial survey results as a baseline for tracking improvements in public awareness of behavioral health resources over time.
- Regularly revisit these benchmarks to adjust targets based on emerging trends and community needs.

Data Collection Structure and Reporting

- **Frequency:** Define reporting frequencies for each metric type (e.g., monthly for crisis response, quarterly for community outreach).
- **Standardization:** Develop a unified reporting template for consistency across member data contributions, ensuring that each metric is reported in a comparable format.
- **Data Sharing and Privacy:** Address any confidentiality considerations, especially around justice-involved data, to ensure that data-sharing practices comply with privacy standards.

Engagement and Continuous Improvement

- **Support Member Engagement:** Emphasize how these metrics benefit each organization, fostering a sense of shared responsibility for collective outcomes.
- **Iterative Adjustments:** Treat this approach as a living framework, revisiting metrics, benchmarks, and reporting practices regularly to ensure they align with BHC’s evolving mission and the needs of the community.

OVERVIEW OF BHC AND BHAC ROLES WITHIN JEFFERSON COUNTY

The **Behavioral Health Consortium (BHC)** and the **Behavioral Health Advisory Committee (BHAC)** are distinct yet complementary entities within Jefferson County’s behavioral health system, each fulfilling unique roles while aligning on shared goals:

BHAC as County Funding Administrator role within JCPH

- Serves as Jefferson County’s primary administrator for specific behavioral health funds, including the 1/10th of 1% Hargrove tax funds and a portion of the opioid settlement funds, managed within the county’s public health office.
- Allocates funding to programs addressing mental health, substance use prevention, housing support, youth behavioral health, and therapeutic courts, ensuring resources support county-wide behavioral health priorities.

BHC as a Consortium

- Functions as an independent consortium that brings together stakeholders across public health, law enforcement, healthcare, and community organizations to create a cohesive and accessible behavioral health service network for the county.
- Funded directly from separate opioid settlement funds and grant pursuits, the BHC’s funding structure allows it the flexibility to address emerging community needs, support cross-sector projects, and foster collaboration across county agencies.

DISTINCT FUNDING AND OPERATIONAL INDEPENDENCE

BHAC’s County-Wide Funding Role

- Oversees targeted funds to address behavioral health needs through a structured RFP process, prioritizing county-wide behavioral health goals while aligning resources with program-specific requirements.

BHC’s Independent Funding Structure

- While focused on defining and addressing county goals, the BHC remains financially independent of BHAC-administered funds. This independence enables the BHC to quickly respond to community needs and mobilize collaborative projects that enhance Jefferson County’s behavioral health landscape.

GOALS OF THE MOU BETWEEN BHC AND BHAC

The **Memorandum of Understanding (MOU)** aims to formalize a non-hierarchical partnership that enhances collaboration, supports mutually identified priorities, ensures resource

alignment, and productive data sharing. The MOU will help integrate behavioral health efforts county-wide, enabling Jefferson County to create a unified response to behavioral health needs.

KEY AREAS OF THE PROPOSED MOU

Membership and Participation

- **Objective:** Establish **mutual representation** to enhance strategic alignment and active engagement across both entities. By including BHAC representatives in BHC discussions, and that BHC director has a seat on the BHAC committee, the MOU will support a cohesive approach to behavioral health across Jefferson County.
- **Action:** Designate BHAC committee members to participate in BHC sessions, with a focus on integrating Hargrove-funded programs and opioid settlement-supported initiatives. In turn, BHC's representation on the BHAC committee will bring consortium-level insights into funding deliberations, ensuring that BHAC allocations are informed by real-time community needs and broad consortium goals.

Data Sharing and Collaboration – Requires a Data Sharing Agreement as a subcomponent of the MOU, as that agreement may get updated asynchronously.

- **Objective:** Develop a data-sharing framework that combines BHC's community-level insights with BHAC's program-specific data, creating a holistic view of behavioral health needs and outcomes.
- **Action:** Establish a clear protocol for data exchange that allows both entities to benefit from shared insights. This approach will support clarified understanding of the county players funding and help track service impacts effectively.

Strategic Planning and Coordination

- **Objective:** Define roles and develop shared priorities through regular planning sessions to integrate services and reduce silos in behavioral health initiatives.
- **Action:** Create joint strategic planning sessions, where the BHC's consortium-driven goals can guide community-driven priorities, while BHAC's financial oversight ensures alignment with funding requirements and effectiveness across programs.

Funding Synergy and Project Collaboration

- **Objective:** Identify co-investment opportunities that leverage resources to meet shared goals, enhancing services such as harm reduction, housing, and youth behavioral health.
- **Action:** Review both entities' funding sources to identify joint project opportunities, ensuring coordinated use of resources. This alignment will support county-wide, cross-sector projects,

and integrate funding for under-utilized areas, including those managed by the BHAC, like therapeutic courts.

Procedural Details and Termination Clauses

- **Duration and Renewal:** Set the MOU for a fixed term (e.g., two years) with periodic reviews for renewal. This approach ensures the MOU remains responsive to changing community needs and aligns with the BHC’s strategic commitment to transparency and data-driven decision-making.
- **Amendments:** Allow for amendments through mutual agreement, with flexibility for periodic updates to specific sections, such as data-sharing protocols or role definitions. This supports innovation and cross-sector collaboration, allowing the MOU to adapt to emerging needs and evidence-based best practices.
- **Termination Clause:** Permit either party to terminate the MOU with 60 days’ written notice. Prior to termination, both parties agree to meet to explore alternatives, such as amendment or restructuring. This clause preserves service continuity and aligns with the BHC’s focus on resilience and holistic community well-being.
- **Dispute Resolution:** Include a two-step process for resolving disputes: initial informal mediation between the parties, escalating to third-party mediation if necessary. This process reinforces the BHC’s commitment to transparent governance and community-focused solutions.
- **Accountability and Reporting:** Require annual reporting from both parties to provide transparency into shared goals and achievements, with metrics focused on stigma reduction, service accessibility, and harm reduction. This reporting reinforces the BHC’s mission of equitable, person-centered care and aligns with its vision of fostering a resilient and unified Jefferson County.

ANTICIPATED OUTCOMES OF THE MOU

By establishing mutual representation within the BHC and BHAC committees, the MOU will:

- **Strengthen strategic alignment** between county-wide behavioral health funding and consortium priorities.
- Improve **integration and engagement** across agencies, particularly under-engaged groups.
- **Enhance data-informed decision-making** through consistent data sharing.
- **Optimize resource allocation**, across agencies, particularly those receiving funding from multiple regional funding avenues, creating a streamlined, resilient behavioral health network in Jefferson County.