

## **WASPC Grant Renewal**

### **PROJECT DESCRIPTION**

Over the last four years the City of Redmond and the Redmond Police Department (RPD) have worked to develop a comprehensive, innovative approach to deal with the complex issues our region faces stemming from unprecedented increases in homeless individuals and the opioid addiction epidemic. On the forefront of those efforts is the addition of a dedicated Outreach Specialist embedded with our patrol response, who helps provide resources and housing solutions to our homeless community members. One of the first efforts of the Outreach Specialist was to create a Community Resource Center that brings representatives from many social service agencies together in one place at a set time and location every week. This proactive approach made Redmond an attractive choice to pilot the first Community Court in King County.

The approach of Community Court is to provide wraparound services to defendants charged with qualifying low-level misdemeanor crimes. Community Court utilizes the Redmond Community Resource Center to assist defendants in completing court required stipulations which mitigate or defer sentences. The benefits to the community are a lower rate of recidivism, community service hours performed by defendants, overall cost savings, and reduced crime. Individuals dealing with behavioral health challenges often will not qualify for this program because they are not far enough along on the recovery path to actively participate in the stipulations required by the court to mitigate or defer their charges.

The opportunity to maintain the dedicated Mental Health Professional to these existing programs would be a natural and much needed addition that would help us more effectively implement the Sequential Intercept Model of behavioral health services in our community.

Kent Hay is the Outreach Specialist who connects resources and services to the City's homeless population with a goal of helping them move into permanent housing. In 2017 Kent worked with over 200 individuals. He was able to facilitate 40 individuals into permanent housing. Kent works in conjunction with Redmond Police officers to identify individuals willing to participate in the steps necessary to move toward obtaining housing. One of the frequent barriers he encounters are the special needs of those suffering from mental health instability. He is often unable to provide those individuals with the services they require due to both inadequate resources and the demand of helping others who are more prepared to participate in the process of obtaining housing under the structure of current systems.

One of the service providers at the Community Court Resource Center is IKRON of Greater Seattle. IKRON provides integrated behavioral health and vocational services to low income residents of King County. IKRON already has an office located in Redmond, providing a suite of behavioral health services which include: mental health diagnostic assessment, individual and group counseling services, psychiatric services, substance use disorder services, case management, work readiness, job placement and retention and more. IKRON is certified through CARF International (Commission for Accreditation of Rehabilitation Facilities) and licensed through Washington State Division of Behavior Health and Recovery (DBHR) for multiple recovery, employment, and behavioral health services. IKRON ensures that all clinical

and direct services staff have the expertise and experience to address the needs of the participants served.

If the grant is renewed for RPD, we will continue to partner with IKRON to provide clinical staffing for the Mental Health Professional (MHP) and the future growth of the team. Our Mental Health Professional will continue to be state-licensed and credentialed to perform all of the duties and assessments afforded someone with licensure. The MHP will provide a critical enhancement to our existing field response that aligns with the Sequential Intercept Model by allowing for immediate behavioral health assessment and rapid access to treatment.

The MHP is able to work a flexible full-time schedule to accommodate the access and needs of the various shifts and squads for the department. The MHP will have their workspace in the Outreach Division of the Police Department. Redmond Police Dispatch, which is housed in the Police Department, will help to identify these situations as calls for service enter the 911 center. When there are no in-progress incidents, the MHP will be able to build critical relationships with other service providers and follow-up with clients from previous incidents as well as referrals from officers, Kent Hay and Community Court. Patrol Supervisors will have the discretion of activating this resource as needed.

## **PROJECT NEED**

In 2017 Redmond Police responded to 301 calls for service where people were evaluated for involuntary or voluntary mental health commitment. Of those calls, 285 resulted in a person being either voluntarily or involuntarily committed for mental health concerns. In addition, Redmond Police responded to 706 calls in 2017 where the clearing code indicated a mental health component was a factor in the call. These numbers, over 1000 responses in 2017, are indicative of how frequently Redmond officers are dealing with behavioral health issues. Having a trained and certified MHP responding with officers to these types of calls will be invaluable.

A feature of this grant is the data gathering aspect using the Open Lattice application. Like all communities in our region we have experienced a statistically significant increase in homeless individuals which carries with it an increase of behavioral health issues. Our current method of categorizing calls with a mental health element is to indicate the “nature” of the call when concluding it. The “nature” codes can be general, such as “mental/emotional, suicidal, break down, psychotic”. These codes do not allow for fine grain analysis, whereas the Open Lattice app may. The City has committed significant time and resources already to address these issues by investing in the embedded outreach worker model and Community Court. Adding an embedded MHP to ensure a more immediate and effective behavioral health response protocol is the next logical step toward a more holistic and effective first intercept strategy.

## **KEY PERSONNEL**

Captain Ron Harding of the Redmond Police Department and the Assistant Director of Community Planning will provide supervisory oversight of the Mental Health Field Response Team. Captain Harding will serve as the project manager. Planning Program Administrator/Outreach Specialist Kent Hay will work very closely with the MHP in the field as will all patrol officers and patrol supervisors. Operations Lieutenant Brian Coats will be the direct point of contact for the MHP and Kent Hay. IKRON Executive Director Tisza Rutherford will provide clinical supervisory oversight to the MHP contracted to work with the MHFRT and will liaison with Captain Harding and Asst. Director. Senior Systems Analyst Dan Werr is assigned to liaison with Open Lattice for integration with City of Redmond Information Technology services. The MHP will continue to provide direct services and response to the individuals in need of referrals. An additional duty will be to grow the MHFRT to incorporate the Crisis Intervention Team (CIT) training and foster the creation and development of a CIT Cadre of certified and tested patrol officers that would like to provide advanced crisis response to our community members.

## **PARTNERSHIP and COLLABORTION**

The MHP and Kent Hay have established a large and effective network of providers to assist in addressing the needs of our community. The original partnerships include: IKRON, Hopelink, Job Corps, DSHS, WorkSource, Eastside Legal Assistance Program, King County Library, HealthPoint, YWCA, Friends of Youth, Public Health, DOL, Lake Washington Technical Institute, Dispute Resolution Center, National Alliance on Mental Illness and others. Having this resource center has created an ability to provide rapid and effective interventions for participants of Community Court as well as other Redmond residents. We have also grown the list of partners to include: The Mobile Crisis Team, Northstar Case Management, Cedar Park Mechanics, Hero House, Sound, Meridian Center for Health, Valley Cities, Neighborcare Health, Public Health, Community Psychiatric Clinic, the King County Housing Authority, Redmond FIRE and EMS, The CIT Committee at the Criminal Justice Training Commission, the Crisis Clinic, the Seattle King County Clinic, and neighboring jurisdictions, just to name a few.

## **SERVICES**

- Describe the partnerships proposed for stabilization, observation, disposition and custodial transfer.

This program will leverage the City's partnerships with IKRON of Greater Seattle and the local organizations within the Community Resource Center. This will be achieved by ensuring the MHP continues to be an active member of the MHFRT team who will join the team in the field in response to emergency calls. The MHP provides the initial psychosocial needs assessment that will determine the services needed to reach stability. Depending on the degree of severity, the MHP can facilitate access to hospital admissions voluntarily or through custodial transfer or assist with transition back into the community.

In an effort to divert participants from inpatient admission whenever possible, multiple services may be provided simultaneously by different community providers and programs. IKRON can provide rapid access to mental health and substance use disorder treatment, medication management and monitoring, as well as employment support services. Other organizations within the Community Resource Center can provide assistance with health insurance, cash and food benefits, temporary shelter, transitional housing, transportation, remedial education, community support and additional vocational services.

The MHP for this project will continue to strengthen relationships with the local hospitals where Redmond behavioral health patients are most often taken. We want those social workers to know that this program will be a connection point for that patient when they are released. We believe that providing this type of seamless support will improve the likelihood of successful participation.

In addition, the MHP and the Outreach Specialist will continue to work together to facilitate ongoing access to behavioral health and other needed services. They will provide regular follow-up and intervention as needed to help keep individuals on track. The overall MHFRT will meet weekly to check in and make any adjustments that might be needed.

- What is the process for assessing participants for danger to self and others; what assessment resources will be used?

The assigned MHP continues to be the dedicated professional who will assess participants for danger to self and others. The MHP staff is trained in risk assessment prior to beginning services and at regular intervals during their work. Assessments include a face to face comprehensive psychosocial history that focuses on gathering complete information about past, recent, and present suicidal/homicidal ideation and behavior, gathering information about the participant's context and history, and synthesizing this information into a prevention-oriented suicide risk assessment anchored in the participant's life context.

- Explain which resources will be engaged for participants who are considered "high utilizers" upon referral, and ongoing.

This program aims to divert individuals at the earliest opportunity into community-based service alternatives, for crisis intervention, screening, assessment, and referral to treatment before an arrest is made, while simultaneously maintaining public safety. Evidence based practices show that "high utilizers" of systems in place benefit from rapid engagement, and high intensity services provided by a multidisciplinary team of professionals. The partnership with IKRON of Greater Seattle, as well as the access to our Community Resource Center partners will ensure that we can provide both a rapid response for immediate intervention as well as access to a full array of other services that may be needed. Typical resources needed by "high utilizers" definitely include behavioral health treatment and assistance finding or maintaining housing. In our experience, "high utilizers" generally require more frequent monitoring and follow-up which will be more possible with the addition of a dedicated MHP.

On the behavioral health front, IKRON provides a wraparound approach to care and utilizes Integrated Dual Disorder treatment as an integrated model of care that ensures quality, expedited services and low relapse rates. Participants receive immediate access to medication management and monitoring, psychotherapy, employment support as well as substance use disorder treatment. For individuals needing detoxification services, IKRON provides coordination with the King County Inpatient and Referral program, as well as Detox facilities in the area.

In terms of assistance with finding or maintaining housing, this falls into the expertise of Redmond's Outreach Specialist. Kent is skilled at establishing rapport with individuals who may have been unhoused for extended periods of time. He works to understand what motivation someone has and to learn about any family, friend or financial resources that may be available to work with. He is trained to conduct assessments for the King County Coordinated Entry System which determines priority eligibility for permanent supportive housing resources in the county. Kent has also established strong relationships with local housing providers directly and is often the first to learn of an available unit.

- Describe how individualized case plans will be developed and updated and how this information will be shared with the participant and the Mental Health Field Response Team.

Once a patient has been stabilized and a full assessment has been completed, The MHP will work with the individual to develop a comprehensive service plan. The plan will identify specific follow-up actions with timelines that the participant will agree to follow. Depending on the individual situation, the MHP will determine what specific follow-up they each will provide. In general, the MHP staying on point for any behavioral health treatment recommendations, and Kent being on point for supporting access to all other wraparound services needed. Regular patient updates will be shared at the weekly MHFRT meetings. Finally, daily briefings that coincide with the MHP shifts will continue to be attended by the MHP. Valuable information for follow-up and status of referred contacts from patrol will be provided to increase efficiency in getting individuals into treatment.

## **CONCLUSIONS**

In conjunction with this grant renewal application, we are providing a copy of the original grant outcomes. In it we highlight significant successes, barriers, partnerships, unexpected events, lessons learned, and our plans for the future of the work being done in the City of Redmond. If selected for a renewal, we will be able to continue the great work we have done and continue to grow this program for the city and our community members.