

OMBUDS SNAPSHOT

June 30, 2014

- Half-way through this 6-month reporting period we have opened issues on **60** NSMHA clients including **8** children and **3** seniors. A year ago at this point we had 29. We no longer count people with issues against hospitals in these statistics but we have helped an additional **6** people with letters of concern to hospitals.

- **14** people of these **60** NSMHA clients (**23%**) are non-Caucasian. **5** are Latino, **2** are African American, **2** are Native American/Alaskan Native and **5** are Asian/Pacific Islander. One client is a tribal member. There were **22** male and **38** female clients.

- **55** people have initiated what will soon be termed *Level 1 grievances*; with **78** issues of concern. There were no specific trends. Three **3** people have initiated what will be termed *complaints* on behalf of family members.

- There has been **1** Level 2 Grievance.

- There are no Appeal cases. There has been **1** new administrative hearing this period.

- We have broken out one of the primary categories of concern for you: *Other Consumer Rights Violations*

1. Two people felt they weren't given clear guidance about transferring to another provider.
2. Three people requested second opinions--two about involuntary titration of their benzodiazepines. One wanted psychotherapy for a disorder. One wanted a review of meds and diagnosis.
3. A person wanted to review their records; wanted to discuss an issue the clinician was uncomfortable discussing; alleged a potential threat to a family member; and wanted a new clinician.
4. A person needed assistance on a transfer of providers.
5. A person was concerned about confusion concerning their appointments.
6. A person alleges that their clinician's car smelled of alcohol when the clinician gave them a ride.
7. A person was denied access to Triage because of their body weight.

- We closely tracked our outcomes. Of our 60 clients, 31 people have open cases. 2 peoples' cases have been closed with information & referral. 23 people's cases have been closed through conciliation & mediation. And 4 people's cases were non-pursued. We followed up on those 4. Three had their needs met and decided not to pursue. One was referred to us by a friend but doesn't request our assistance.

New Issues: We have discussed these at NSMHA-Ombuds monthly meetings.

- DBHR sent us a document saying we should follow the RSN grievance policy when clients have grievances with hospitals. We thank NSMHA for working with DBHR to clarify that such is not the case.

- We had a revelation when we discovered that for a client released under a lesser-restrictive order, return to most-restrictive status means the client must again fully meet involuntary commitment protocol. We do all we can to inform and assist the family when a client doesn't follow their lesser-restrictive order.

- We asked NSMHA about opening cases on Medicaid expansion folks who receive services under one of the five managed care organizations (MCOs). NSMHA said no; they should submit their concerns to their MCO. The DBHR director agreed when we asked her. We currently have an email in to the Health Care Authority requesting clarification on how to best determine MCO clients. The DBHR director asked our liaison to provide training about this at September's State Ombuds meeting.

- The US Department of Health & Human Services issued guidance clarifying when providers may share information with family members and advocates. We reviewed it and didn't find any significant changes. The

guidance is at <http://www.hhs.gov/ocr/privacy/hipaa/understanding/special/mhguidance.html>

- We find that occasionally when a client complains about their clinician, the agency isn't readily informing the clinician of the complaint issues.

- We have had several family members say a provider denied access to their child because he or she is essentially non-verbal. They also told the child's PCPs and they called us. Upon investigation we find that usually that isn't the reason services were denied. We recommend NSMHA ask providers to clearly explain to the family members why the child is being denied per Medicaid access-to-care standards.

- It's frustrating when a client is hospitalized; then they discharge only to find that Medicaid has denied authorization for part of their hospital stay...without the client knowing. Now they have a large hospital bill. We appreciate that NSMHA is now having notices sent to the hospital. We recommend that when the VoA gatekeeper denies further treatment they make every effort to ensure the clients, or family members if the client is a child, are informed immediately.

North Sound Mental Health Administration (NSMHA)

MENTAL HEALTH ADVISORY BOARD

June 3, 2014

1:00 – 3:00pm

| | |
|-------------------------|---|
| Present: | Island: Candy Trautman San Juan: Skagit: Joan Lubbe Snohomish: Joan Bethel, Marie Jubie, Carolann Sullivan, Jennifer Yuen, Fred Plappert, Carolyn Hetherwick-Goza Whatcom: David Kincheloe, Mark McDonald, Michael Massanari, Larry Richardson |
| Excused Absence: | Island: San Juan: Skagit: Snohomish: Jeff Ross Whatcom: |
| Absent: | Island: San Juan: Peg LeBlanc Skagit: Jeannette Anderson Snohomish: Whatcom: |
| Staff: | Joe Valentine, Greg Long, Margaret Rojas, Joanie Williams recording |
| Guests: | Greg Wennerberg |

MINUTES

| TOPIC | DISCUSSION | ACTION |
|--|---|---------------------------------------|
| CALL TO ORDER AND INTRODUCTIONS | | |
| 1. Chair | Mark initiated introductions | Informational |
| REVISIONS TO THE AGENDA | | |
| 2. Chair | Mark asked if there were any revisions to the agenda. There were none mentioned. | Informational |
| COMMENTS FROM THE PUBLIC | | |
| 3. Chair | Carolyn complimented Greg W. for his faithful attendance at a previous Advisory Board. Greg W. spoke and said he was appreciative of NSMHA and the Advisory Board Committees continuing to work toward recovery. Joan L. thanked Greg for his comment and said it is nice to be appreciated. | Informational |
| APPROVAL OF MINUTES | | |
| 4. Chair | Mark asked the group to review the May minutes. A motion was made to approve the May minutes as written, motion was seconded and approved. | Motion carried to approve May minutes |
| 5. EXECUTIVE/FINANCE COMMITTEE a. Expenditures: A motion was made to made to forward the expenditures to the Board of Directors for approval. b. NAMI Conference: Mark asked the group if there was interest in attending the August 15-17 conference which will be in Vancouver this year, seven people said they are interested. Joanie will research travel and lodging cost and have it ready for the next meeting, which will be the July Retreat. The Board determined the NAMI Conference will be available only for Advisory Board Members, no scholarships will be awarded. | | |
| 6. STANDING BOARD OF DIRECTORS COMMITTEE REPORTS | | |
| Chair | a. Planning Committee: There was no May meeting so there is no brief. | Informational |
| | b. Quality Management Oversight Committee (QMOC) Report: Greg gave an overview of the QMOC Brief; he covered policy 1505 which is Authorization and Reauthorization for Ongoing Outpatient Services. Policy | Informational |

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| <p>Greg Long</p> | <p>1574 was discussed which covers the State Only Funding Plan-Mental Health Services. In addition, he talked about the Geriatric Transition Team, Crisis Capacity, Western State Hospital's Census and Performance Measures</p> <p>Joe noted future Advisory Board meetings will have relevant QMOC information presented. Candy spoke about the openings available for Advisory Board representation on QMOC and referenced the effectiveness of the committee.</p> | |
| <p>7. OLD BUSINESS</p> | | |
| <p>Chair</p> | <p>a. Behavioral Health Conference: It was asked when Joanie would be sending out the All Aboard Flyer for the conference. Joanie stated it will be sent out next week. Margaret noted that Greg L. will be riding the bus with the Advisory Board. Greg and Joe will be joining the Advisory Board for dinner on Wednesday and Thursday night.</p> | <p>Informational</p> |
| <p>8. EXECUTIVE DIRECTOR'S REPORT</p> | | |
| <p>a.) Joe talked about SB6312, the merging of chemical dependency and mental health services, creating the new Behavioral Health Organizations (BHOs), which will replace the Regional Support Networks (RSNs) by April 2016. He spoke about the Legislative Task Force which will make decisions on the requirements of the BHOs. On June 13th two critical issues will be discussed. The first issue is the boundaries of the regional service areas. The five counties in the North Sound voted to stay within the North Sound area and keep County control over Mental Health (MH) and Chemical Dependency (CD) services. The Counties have approved the planning processes to begin regarding the BHO. Joe spoke about the outlying counties and dialogue within other regions pertaining to County control and service areas. The second issue to be discussed at the June 13th meeting is to work on the details of merging MH and CD and converse on the rates set by the State. Upon the merger there will be one Per Member Per Month (PMPM) payment. NSMHA's first step is to reach out the CD Providers in the region and have listening sessions. The next step includes compiling the detailed plan of the BHO. The Advisory Board will discuss how the consumer and family voice will be represented within the new structure at the Retreat on July 1st.</p> <p>b.) Proposal for Evidence-Based Supported Housing Pilots was discussed. The pilots target outreach and prevention efforts to high risk vulnerable adults. Joe talked about the funding, activity, the identified team, background and the PORCH model.</p> <p>c.) A letter was received by Snohomish County School Superintendents asking NSMHA to expand the contract with Northwest Educational Services District (NWESD) to serve Snohomish County schools. Joe gave details on the activity and next steps.</p> <p>d.) Joe gave an update on the Regional Health Alliance (RHA) which is continuing to work on strategies to reduce boarding. He noted that David Kincheloe, (AB Member), is part of the RHA. The next RHA is meeting June 4th with focus on a regional conference for the all the hospitals regarding best practices in working with individuals entering the Emergency Department (ED) with behavioral health issues. He talked about the State awarding Planning Grants to establish Accountable Communities of Health.</p> <p>e.) NSMHA received money from the Federal Emergency Management Administration (FEMA) for Crisis Counseling Services in Darrington. NSMHA contracted with Volunteers of America (VOA) who trained a team of 10 people to perform outreach services. An extension and grant was requested so the community can continue to receive services for a period of 9 months. NSMHA will continue to work Catholic Community Services and Sunrise Services, in addition to VOA in continuing services with MH Professionals. Group discussion followed.</p> | | |
| <p>9. Joe</p> | <p>Action Items being brought to the Board of Directors</p> <p>a. Joe talked about the Action Items included in the Board Member packets. The items covered contracts/ amendments for County Jail Transition Services, County Interlocal Agreement, Program for Assertive Community Treatment (PACT), Wraparound/WISe, Mental Health Block Grant (MHBG), DSHS Mental Health Block Grant (MHBG), State Mental Health Contract (SMHC), and Division of Children and Family Services (DCFS).. A motion was made to forward the action items as presented to the Board of Directors for approval. Motion was seconded and approved.</p> <p>b. Policy 1574 was discussed by Greg under the QMOC report. A motion was made to approve the changes to the Policy. Motion was seconded and approved.</p> | <p>A motion carried to forward Action Items to the Board of Directors for approval</p> <p>A motion was carried to forward Policy 1574 changes to the Board of Directors for approval</p> |

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| <p>10. Margaret</p> | <p>Draft Retreat Discussion Items: The group engaged in conversation regarding the previously identified topics of interest for the Annual Advisory Board Retreat taking place next month on July 1st. Margaret referenced the hand out and asked for feedback from the Board Members on the discussion items she drafted from the prior conversation. She noted the Advisory Board (AB) will be giving their input regarding the upcoming BHO at the Retreat on July 1st. Peer involvement will be discussed. She asked the group to consider how consumers, families and family members outside the formal health care delivery system can inform policy with their experience and insight. Discussed followed. One member noted the importance of public input regarding the BHO transformation/integration. Joe said he may bring in someone from WAHA to talk about the various aspects of community involvement in the decision making process. An additional topic for discussion will be the scope of broader inclusion with CD representation on the Advisory Board.</p> <p>Candy volunteered to work with Margaret and the Facilitator on the Retreat agenda.</p> <p>Joe noted Joanie will send out an email regarding Retreat attendance.</p> | |
| <p>11. NEW BUSINESS - none</p> | | |
| <p>12. REPORT FROM ADVISORY BOARD MEMBERS:</p> <p>a) Tribal Conference: Mark, Joan B, Carolann, David, Larry, Carolyn, Marie, Candy AB members spoke on the various aspects of the conference which they found most beneficial. Overall, the feedback was very positive. Joe noted there is a PowerPoint Presentation available on our website.</p> | | |
| <p>13. COMMENTS FROM COUNTY ADVISORY BOARD REPRESENTATIVES</p> | | |
| <p>Island</p> | <p>Candy noted she didn't get to the Island County meeting, so she has no report</p> | <p>Informational</p> |
| <p>San Juan</p> | <p>No member present</p> | <p>Informational</p> |
| <p>Skagit</p> | <p>No report</p> | <p>Informational</p> |
| <p>Snohomish</p> | <p>Carolyn noted the Jail Transition situation. Fred said he spoke with Anji Jorstad about receiving a monthly email. He spoke on a lawsuit against the jail due to inadequate medical coverage resulting in the death of an individual.</p> | <p>Informational</p> |
| <p>Whatcom</p> | <p>David spoke on Whatcom's 1/10th of 1% monies to increase programs related to behavioral health issues in the schools. The development of Mental Health Court is moving forward. Crisis Triage Center is moving forward as well. Rainbow Recovery Center is being acquired by Compass Health via WCPC. The acquisition may bring about improvements, resulting in a higher level of functioning at the community center, he said. Mark noted the DSM5 Training took place in Whatcom County. David, Mark and Carolyn attended the training.</p> | <p>Informational</p> |
| <p>OTHER BUSINESS: none</p> | | |
| <p>ADJOURNMENT: Mark reminded the Advisory Board Members next month's meeting will be the annual retreat (July 1st) in LaConner. Meeting adjourned at 2:52pm</p> | | |

DRAFT not yet approved by Advisory Board

**North Sound Mental Health Administration (NSMHA)
 MENTAL HEALTH ADVISORY BOARD Annual Retreat
 Civic Garden Club, LaConner, WA
 July 1st, 2014
 12:45-1:00pm**

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|-------------------------|---|
| Present: | Island: Candy Trautman San Juan: Peg LeBlanc Skagit: Joan Lubbe Snohomish: Joan Bethel; Jennifer Yuen; Carolann Sullivan; Marie Jubie, Snohomish; Greg Wennerberg, Snohomish; Fred Plappert, Snohomish; Carolyn Hetherwick-Goza, Snohomish; Whatcom: David Kincheloe, Mark McDonald, Larry Richardson, Michael Massanari |
| Excused Absence: | Island: San Juan: Skagit: Snohomish: Jeff Ross Whatcom: |
| Absent: | Island: San Juan: Skagit: Jeannette Anderson Snohomish: Whatcom: |
| Staff: | Joe Valentine, Margaret Rojas, Joanie Williams recording |
| Guests: | Timothy Corey, Facilitator, Colibri Facilitation |

MINUTES

| TOPIC | DISCUSSION | ACTION |
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| ACTION ITEMS BEING BROUGHT TO THE BOARD OF DIRECTORS | | |
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| NAMI Conference Scholarships | <p>Mark asked Candy (Chair Emeritus) to speak about the recommendation from the Executive Finance Committee. She let the group know of the average cost per person (\$700-\$800) for the NAMI conference and informed the group of the determination to allow a maximum of 5 members to attend. The group was asked who was interested in attending: David, Greg, Mark and Jennifer said they were interested. Candy asked the group who was interested in attending the COD conference in October: Marie, Joan B, Fred and Candy voiced interest. CarolAnn and Peg may attend as well. Joanie will research cost for the COD conference and have it available for the August 5th Advisory Board meeting depending on availability of information.</p> <p>A motion was made to approve up to 5 Advisory Board members to attend the NAMI conference, motion was seconded and approved. A second motion was made to approve the remainder of the conference budget for Co-Occurring Disorders conference which takes place in October. Motion was seconded and approved.</p> | Motions approved |
| ADJOURNMENT | | |
| Chair | Meeting adjourned at 12:55 | Informational |

**Advisory Board Budget
January through June 2014**

| | All Conferences | Board Development | Advisory Board Expenses | Stakeholder Transportation |
|-----------------------|--------------------|----------------------|-------------------------------|-------------------------------|
| Total | Project # 1 | Project # 2 | Project # 3 | Project # 4 |
| Budget | \$ 13,900.00 | \$ 1,600.00 | \$ 12,490.00 | \$ 600.00 |
| Expense | (4,244.00) | (375.00) | (7,606.09) | (33.60) |
| Under / (Over) Budget | \$ 9,656.00 | \$ 1,225.00 | \$ 4,883.91 | \$ 566.40 |

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|--------------------------|----------------------------|--|--|
| BHC, NAMI, COD, OTHER | BOARDS SUMMIT (RETREAT) | Costs for Board Members (food, mileage, misc.) | Non-Advisory Board Members, to attend meetings and special events |
|--------------------------|----------------------------|--|--|

North Sound Mental Health Administration
Warrants Paid
June 2014

| Type | Date | Num | Name | Memo | Amount |
|-----------------------------|------------|----------------|--------------------------|----------------|------------------------|
| Advisory Board | | | | | |
| Travel | | | | | |
| Bill | 06/04/2014 | Apr-May2014 | McDonald, Mark | Batch # 105667 | 126.52 |
| Bill | 06/04/2014 | May2014 | McDonald, Mark | Batch # 105667 | 154.84 |
| Bill | 06/09/2014 | May2014 | AA Dispatch | Batch # 105756 | 1,241.00 |
| Bill | 06/09/2014 | May2014 | Kincheloe, David | Batch # 105756 | 122.08 |
| Bill | 06/09/2014 | May/June2014 | Kincheloe, David | Batch # 105756 | 155.12 |
| Bill | 06/09/2014 | Apr/May2014 | Trautman, Candy | Batch # 105756 | 156.80 |
| Bill | 06/09/2014 | June2014 | Yuen, Jennifer | Batch # 105756 | 47.04 |
| Bill | 06/17/2014 | 3429A | Airport Shuttle | Batch # 105866 | 645.00 |
| Bill | 06/17/2014 | 3429 | Airport Shuttle | Batch # 105866 | 869.00 |
| Bill | 06/17/2014 | 3429B | Airport Shuttle | Batch # 105866 | 820.00 |
| Bill | 06/17/2014 | Jan-Mar14 | Hetherwick-Goza, Carolyn | Batch # 105866 | 154.34 |
| Bill | 06/17/2014 | May2014 | Hansen, Ralph | Batch # 105866 | 8.50 |
| Bill | 06/24/2014 | May2014 | City Cab, Inc. | Batch # 105934 | 235.35 |
| Total Travel | | | | | <u>4,735.59</u> |
| Miscellaneous | | | | | |
| Bill | 06/04/2014 | TC2014-AdBd | NSRSN | Batch # 105667 | 1,625.00 |
| Bill | 06/17/2014 | July11Training | Compass Health | Batch # 105866 | 30.00 |
| Bill | 06/17/2014 | 2409 | WBHC | Batch # 105866 | 285.00 |
| Total Miscellaneous | | | | | <u>1,940.00</u> |
| Total Advisory Board | | | | | <u>6,675.59</u> |
| | | | | | <u>6,675.59</u> |
| | | | | | <u>6,675.59</u> |

**Advisory Board Budget
January through July 2014**

| | All Conferences | Board Development | Advisory Board Expenses | Stakeholder Transportation |
|------------------------------|--------------------|--------------------|-------------------------|----------------------------|
| | Project # 1 | Project # 2 | Project # 3 | Project # 4 |
| Total | | | | |
| Budget | \$ 13,900.00 | \$ 1,600.00 | \$ 12,490.00 | \$ 600.00 |
| Expense | (6,182.40) | (375.00) | (9,742.53) | (33.60) |
| Under / (Over) Budget | \$ 7,717.60 | \$ 1,225.00 | \$ 2,747.47 | \$ 566.40 |

| | | | |
|-----------------------|-------------------------|--|---|
| BHC, NAMI, COD, OTHER | BOARDS SUMMIT (RETREAT) | Costs for Board Members (food, mileage, misc.) | Non-Advisory Board Members, to attend meetings and special events |
|-----------------------|-------------------------|--|---|

North Sound Mental Health Administration
Warrants Paid
July 2014

| Type | Date | Num | Name | Memo | Amount |
|-----------------------|------------|---------------|----------------------------|----------------|------------------------|
| Advisory Board | | | | | |
| Supplies | | | | | |
| Bill | 07/01/2014 | May/June14 | Haggen Inc | Batch # 106040 | 337.88 |
| Bill | 07/16/2014 | June/July2014 | Williams, Joanie | Batch # 106224 | 25.74 |
| Bill | 07/22/2014 | July2014AdBd | Rojas, Margaret | Batch # 106289 | 33.44 |
| Total Supplies | | | | | <u>397.06</u> |
| Travel | | | | | |
| Bill | 07/01/2014 | 546-2014 | Howard Johnson Plaza Hotel | Batch # 106040 | 1,938.40 |
| Bill | 07/01/2014 | June2014 | Kincheloe, David | Batch # 106040 | 45.86 |
| Bill | 07/01/2014 | May/June-2014 | Kincheloe, David | Batch # 106040 | 489.47 |
| Bill | 07/01/2014 | June2014 | McDonald, Mark | Batch # 106040 | 517.13 |
| Bill | 07/08/2014 | June2014 | AA Dispatch | Batch # 106104 | 668.65 |
| Bill | 07/16/2014 | June2014 | Sullivan, Carolann | Batch # 106224 | 18.27 |
| Total Travel | | | | | <u>3,677.78</u> |
| Total Advisory Board | | | | | <u>4,074.84</u> |
| | | | | | <u>4,074.84</u> |
| | | | | | <u>4,074.84</u> |

North Sound Mental Health Administration

Regional Support Network for Island, San Juan, Skagit, Snohomish, and Whatcom Counties
Improving the mental health and well being of individuals and families in our communities

117 North First Street, Suite 8 • Mount Vernon, WA 98273

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Planning Committee Brief

July 18, 2014

Geriatric Transition Team

With funding received from the state to mitigate the impact of the Involuntary Treatment Act (ITA) expansion NSMHA developed this team with the contract going to Sunrise Services. This 5-person team will be for short-term support for transitioning from hospital to placement and covers the five counties. Sunrise will outstation to 3 counties and cover Island and San Juan as needed. Professional staff hired will be masters level and will be or will become geriatric specialists.

Peer Support Survey

NSMHA launched a survey to the provider network to assess the challenges encountered in hiring and retaining Certified Peer Counselors (CPCs) in the region. A survey for the CPCs is being developed to compare and develop strategy as NSMHA works to build a Peer Network in the region. One of the key items from the discussion was the need for more training; for both the Peers and those supervising them.

Housing Services Grant

NSMHA received a special grant from the State to work toward supported housing as a Medicaid modality. One part is a team of two peer counselors and a masters level professional to provide in-community support to people to keep them independent. There is also a housing stipend of \$1500 /per individual to assist with housing costs. NSMHA will seek a provider for this program.

Program for Assertive Community Treatment (PACT) Expansion

NSMHA is now operating a 100 slot PACT program in Snohomish and 50 slot programs in Skagit and Whatcom Counties. This is the first time NSMHA has expanded a PACT. NSMHA is requesting approval to expand the Whatcom PACT from a 50 to 80 beds program. It is effective and working well. It has consistently operated near or at capacity for several years. Funding is available to support this expansion without affecting other programs; Planning Committee gave their approval for this expansion.

\$8 Million Budget Increase/Adjustment

NSMHA has received a large increase in newly eligible Medicaid clients. The population increase translates into increased Medicaid revenue and cost to provide additional services. 5% of the funds are being budgeted for NSMHA operating, 95% of the funds are being budgeted for agency/county and other services. The budget adjustment will cover an additional quality specialist position at NSMHA to cover crisis services. Planning Committee gave their approval for the allocation of this additional funding.

QMOC Meeting Brief
June 25, 2014

Policy 1505-Authorization and Open Episodes

This policy was approved last month at QMOC but provider feedback on the difficulty of closing open episodes in the IS system required more discussion. NSMHA is concerned that state funded clients can come back for service at any time if their episode is open impacting State only funds and open episodes with multiple payers creates issues as well. NSMHA will set up a meeting with data and financial staff so new policy can become effective in early July.

Capacity Issues

Medicaid eligibles increased by 30% with the expansion and this has stretched service demand. We are required to meet the 10-day access timeline even with increased pressure on system and barriers to this were discussed. Staffing shortages was one item mentioned; QMOC will discuss this next month with data on the timelines presented.

Telepsychiatry

NSMHA was contacted by a company that is licensed in WA for telepsychiatry and encourages providers to look at options such as this to address some of the shortages such as emergency medication and service to rural areas. Some providers are using this option and they have a clinician in the room at the same time to ensure the best care. Some clients may still prefer face to face, but this will help with the shortage of prescribers.

Reporting Evidence Based Practices (EBPs)

The State wants to see EBPs reported in the data system and providers noted the CIS system is not set up for this and reporting instructions are not clear. Clinician training and certification in order to bill is also in question so NSMHA will research this and come back to committee.

Performance Measure on Diversion from Inpatient

A report on the performance measures of diversion from inpatient care. We look at the percentage of how often the DMHP/Crisis Worker goes out and the outcome is other than voluntary or involuntary inpatient. Providers in the region are improving; though some counties have a much higher rate. NSMHA is hoping that the intervention of increasing crisis workers in those counties will help.

Performance Measure on Utilization of Crisis Center

This performance measure has been gathering data over the last four years and shows significant improvement; NSMHA will continue to monitor this measure as we add nursing staff to the crisis centers and redesign some of them so these centers are able to admit more clients.

WSH Capacity Issues

NSMHA has been steadily over census the last 2.5 months and we pay a penalty for this. Many at WSH have not yet touched our system and we need a long-range plan to address getting people service before they reach crisis system. We have two planners at WSH and NSMHA staff also try to look at diversion options. We only divert about 1 in 10 people at this point. One of the largest barriers is suitable housing. We are converting Haven House to a Residential Treatment Facility (RTF) and looking at placing some in Adult Family Homes (AFH); which would have to come from state funding.

Advisory Board Retreat Meeting Notes

July 1st, 2014 9:00am-4:00pm

Members present: Joan Bethel, Snohomish; Jennifer Yuen, Snohomish; David Kincheloe, Whatcom; Carolann Sullivan, Snohomish; Candy Trautman, Island; Mark McDonald, Whatcom; Marie Jubie, Snohomish; Greg Wennerberg, Snohomish; Larry Richardson, Whatcom; Peg LeBlanc, San Juan; Fred Plappert, Snohomish; Carolyn Hetherwick-Goza, Snohomish; Michael Massanari, Whatcom; Joan Lubbe, Skagit; Joe Valentine, NSMHA; Margaret Rojas, NSMHA; Timothy Corey Facilitating; Joanie Williams recording

Absent: Jeannette Anderson, Skagit; Jeff Ross, Snohomish

Welcome and Introductions: Timothy opened the meeting and Mark welcomed the group to the annual Advisory Board Retreat. He acknowledged new member, Greg Wennerberg, and initiated introductions.

Overview of 2013 Retreat Priorities: Timothy gave a brief overview of the retreat graphic from 2013 which covered last year's key elements: Peer Support Services Network; Crisis Redesign Process; Children's Services Redesign; By-Laws Review; Health Care Reform Update and the Legislative Update.

Strategic Plan update:

Joe talked about the Strategic Plan Update and Dashboard: He noted the region is half way through our strategic plan/2013-2016. Group discussion took place as he covered the plan's 2014 tasks and accomplishments, as well as the completion percentages. Conversation ensued as Joe covered the four goals listed below:

Goal #1: Adapt the organizational structure of NSMHA to play a vital role in the regional implementation of Health Care Reform Initiatives to improve care coordination between primary health care and behavioral health services.

Goal #2: Develop innovative strategies to ensure all eligible individuals have equal access to quality behavioral health services.

Goal #3: Lead the North Sound Region in the development of Peer support and consumer involvement strategies.

Goal #4: Increase the capacity and skills of the public mental health workforce.

Peer Initiatives: Margaret and David spoke about the Certified Peer Counselor (CPC) Initiatives. The North Sound Mental Health Administration (NSMHA) has made a major strategic commitment to promote the employment of CPCs and Parent/Youth Partners for adults, young adults, transition-age youth and children who live with mental illnesses and/or chemical dependencies, and who receive services provided by the 19 NSMHA funded agencies in the North Sound region (Whatcom, Skagit, Island, San Juan and Snohomish counties). Funding for these agencies is provided by Medicaid and, to a lesser extent, block grants.

Discussion took place regarding the CPC encounters graph showing a slight increase in peer encounters since October 1, 2013. In addition, the survey was handed out to the group which included Provider responses to multiple questions on the use of CPCs. Many facets of the survey were covered: the method in which Providers publicize/advertise job openings, hiring Peer volunteers; effectiveness/preparedness of training provided for the CPCs; Provider challenges in hiring CPCs; retaining employed CPCs; future work-related training for CPCs and the need for additional training for CPC Supervisors.

Feedback and questions from the Advisory Board Members on Peer Initiatives: arbitrary/selective hiring process and on-going Certified Peer Counselor (CPC) training; past CPCs missing training hours prior to exam. Another member asked a question from the Provider's perspective, which area is CPC input most helpful, can the response provide guidance in the training offered? Joe Margaret and David responded to the question. The NAMI Basics course was mentioned which identifies mental illness early in youth and adolescence. Other feedback included language in NSMHA Request for Qualifications (RFQ); billing questions regarding Medicaid and the opportunities available for CPC upward mobility/career advancement. The stigma of mental illness was addressed, as well. Margaret noted this topic will continue to be covered at subsequent Advisory Board meetings. Additional feedback and recommendations will be discussed.

Accountable Communities of Health (ACH) Elya Moore: Joe introduced Elya Moore, Deputy Director of Whatcom Alliance for Health Advancement (WAHA). Elya handed out an executive summary on the North Sound Accountable Community of Health (NSACH) Planning Process. She gave an overview of WAHA and her role. She said the WAHA concept is very abstract, not defined or concrete, noting the goal of public and private collaborations working to improve the health of communities with an intentional effort to get existing community based organizations to work more cohesively with government agencies and businesses. She gave detail on the planning process and asked the Advisory Board for their input in identifying meaningful community engagement on health issues and health transformation.

Advisory Board responses to Elya's question:

*All NSMHA's counties coordinating/collaborating with all Advisory Boards

Advisory Board Retreat Meeting Notes

- *A venue for community WAHA meetings
- *Transportation to and from meetings
- *Concern over forming “another group”
- *Break down all silo structures
- *Cross system collaboration/identify and represent all sub-populations

Joe noted NSMHA will provide regular Accountable Communities of Health updates at future Advisory Board meetings as information becomes available.

Behavioral Health Organization: Joe referenced the hand out and gave a recap of the up-coming Behavioral Health Organization (BHO) which will eliminate/transform the Regional Support Networks (RSN)s by April 2016. The state will be integrating chemical dependency services and mental health services. The State contracts directly with the counties, who have direct contracts with Providers. Under the new legislation the service areas may change, which will be determined within a few months. The North Sound county councils are in agreement to retain the North Sound Region and operate the BHO. Joe noted NSMHA has the green light to put the plan together. The state will decide the rate, if the rates are too low, the counties may decide the risk is too high. Decisions will be made through the legislative task force; the task force will recommend the service areas, as well as the requirements for the BHO. The Planning process begins now. NSMHA has about a year to prepare the plan. Joe spoke about timelines and the specifics of the plan.

Joe asked the Advisory Board for their feedback on the following questions: **What should the AB structure be for the North Sound BHO? What perspectives should be represented? How big should it be? What should the Advisory Board representation and Role look like with the BHO?**

Advisory Board Responses: the AB is focused on the consumer; break down the wall; bring CD and MH together; consider a whole health advisory board; selection process, what will it look like?; MH/CD two different systems making integration difficult; feeding information into education support from birth to death; parity of collaboration; collaborative selection process (clearly defined criteria); whole health approach; advocate for additional funds; single stream of funds; consumer focus, getting the support needed; change word structure and definition (DSM 5) to decrease stigma; people first (a person with mental illness, verses a mentally ill person); need a referee/arbitrator for the CD funding stream verses MH funding stream to eliminate CD as first preference; address the disconnect with physical health and mental health treatments and vice versa; possibly a primary care person on the Board; use inclusive language; adequate medical knowledge for medical doctors understanding of psychiatry and vice versa; BH coverage for a veteran is long process, which is an issue; involve people from varied backgrounds, be more intentional; geographic representation; private medical insurance verses public mental health system; the term “behavioral health” has negative connotations; meanings are in people not in words; person in charge of selecting board members needs to be more stringent.

Advisory Board Advocacy: Margaret asked the Board the following questions: **Where have you advocated? Where would you like to advocate?** *responses:* input with Compass Whatcom; (Joe suggested Compass Whatcom coming to speak to the AB board, possibly in September). WISE program collaborative work verses adversarial approach; educational system advocates, government and non-profits and multiple other councils are key areas which bring about collaboration; consumers, peers, service recipients, people (titles) no longer consumer rights verses individual rights, advocates to be respectable of titles of others. Joe pointed out the handout regarding stigma. Recovery innovations was discussed; wholeness and integrated wellness; community and crisis.

Effective Messaging: Marie referenced the LEAD for a Change handout: Margaret talked about Marie’s advocacy at the legislative level. Marie spoke on her mother’s advocacy, as well as her own. She encouraged the group to advocate for themselves and family members and she gave success stories. She talked about Compass and her advocacy for a bus shelter. She spoke about attending meetings, writing letters on colored paper, sending emails and encouraged the group to voice their opinion. She said, “The more you advocate, the easier it gets”. She spoke about the benefits of keeping statements brief and to the point. She said, “Do your homework and treat the powerful decision makers as though they are everyday people”. “Keep listening and keep advocating”. She went on to say take others with you to the meetings and give small gifts, in turn, they will remember you. Compliment them on past accomplishments or something appropriately personal; “Your opinion matters.” “There are not enough individuals with psychiatric disabilities attending the legislative sessions.” “Wear comfortable shoes when going to Olympia, you will walk a lot”. Know your Legislators, go to the forums.”

Wrap Up: Joe complimented Marie for her representation on advocacy. He also commended the Advisory Board for being committed, articulate and involved. David says he feels heard on NSMHA’s Advisory Board and complimented Joe for ensuring the Advisory Board is, in fact, heard.

COD Conference Cost Sheet

Attendees: Marie, Joan B, Fred, Candy, Carolann, Peg, Margaret

Conference Date: October 6 & 7, Monday and Tuesday

Start time: 7:30am Monday morning, ending at 3:00pm on Tuesday

Registration cost: \$140.00 per person

Hotel: \$83.00 per person, per night

Cost of Driving Your Own Car

194 miles one way, or 388 miles round trip x .56 cents a mile = \$217.28

Drive time is 3 hours and 30 minutes. Taking your own car would include 3 dinner reimbursements, Sunday, Monday & Tuesday @ \$31.00 each. Breakfast and lunch are provided at conference on Monday and Tuesday. Hotel cost is \$83.00 per night, 2 nights are needed.

\$217.28 mileage + \$ 93.00 for three dinner reimbursements + \$140.00 conference registration + \$166.00 for two nights in hotel = **\$616.28**

Cost of taking the Greyhound Bus

Bus fare round trip is \$131.00 per person + one lunch stop @ \$15.00 on Sunday afternoon and three dinner stops @ \$31.00, Sunday, Monday and Tuesday. Breakfast and lunch are provided at conference on Monday and Tuesday. Conference registration \$140.00 + two nights in hotel \$166.00 = **\$545.00**

Additional Cost for Pre-Conference

Pre-Conference Session Sunday Oct. 5th, 9am-4pm, Screening, Brief Intervention, Referral and Treatment (SBIRT): \$30.00 session cost: additional hotel for Saturday night \$83.00, one additional dinner stop \$31.00 and one breakfast expense \$10.00, one lunch \$15.00 = **\$169.00 additional expense**

Additional Cost for Post-Conference

Post Conference Session Wednesday October 8, 8:00-noon/3:00pm (depending on number of CHs needed) class is on Ethics: \$30.00 session cost, additional hotel for Tuesday night \$83.00, additional breakfast \$10.00, lunch \$15.00 and dinner \$31.00 = **\$169.00 additional expense**

**Totals do not include any park and ride fees, mileage reimbursement to and from residence to bus station, convention venue and vice versa. Cost for Taxi is not included either.*



Program

Program Information

The general conference on Monday, October 6 – Tuesday, October 7 will offer five great keynotes and 50 [workshops](#) over **1.5 days** for the general conference. The general conference is offered at the low rate of \$140 for early bird and \$170 for regular [registration](#). **Early bird registration ends on August 14** by 5:00 pm. Participants may earn up to 13 CEHs, NBCC and NAADAC.

The NWATTC is also hosting a **no-cost** pre-conference which will be an all day SBIRT training for an additional 6 CEHs. This training is offered on Sunday, October 5 and has a MAX LIMIT. **Must be registered to attend, no drop ins. First-come, first-served. [Please read the flyer for more information.](#)**

During the general conference, there will also be a **no-cost** Suicide Management Workshop on Tuesday, October 7. This track will provide the CEHs needed for professional licensure or certification. This is offered at no additional cost for general conference participants and those who attend must participate all day on Tuesday in order to earn the full amount of suicide management hours (6 CEHs) for licensure. This workshop is 9am – 4pm, with an hour for lunch during the general conference lunch hour. **Note that this workshop ends 1 hour after the general conference on Tuesday afternoon. First-come, first-served. No pre-registration.**

After the general conference, there will be a post-conference Ethics workshop, available for only \$30 for the day. Professionals may earn four (4) or six (6) hours, depending on need for licensure or certification. This workshop will take place at the Yakima Convention Center as a post-conference on Wednesday, October 8. This workshop has a max limit. **Must be registered in advance to attend, no drop ins. First-come, first-served.**

The Department of Social and Health Services is also offering Consumer Scholarships and is requesting Award Nominations. **Both of these applications are due in the month of July. Scholarships are first-come, first-**

served. [Please submit an Award Nomination by Thursday, July 24.](#)

Book your lodging before rooms run out, visit the Travel Info page for group blocks and discounted rates.

Schedule and Location – Quick Facts

Yakima Convention Center

10 North 8th Street, Yakima, WA 98901

Toll-free: 800.221.0751

Local: 509.575.6062

The general conference begins at 7:30am on October 6 and ends at 3:00pm on October 7. For detailed information and the general conference and additional information about pre and post conference training opportunities, please visit [Conference Schedule](#).

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Conference Schedule

Yakima Convention Center

10 North 8th Street, Yakima, WA 98901

Toll-free: 800.221.0751

Local: 509.575.6062

Participants can earn up to 13 Continuing Education Hours (CEHs) for the general conference.

Pre- and post-conference options are available for additional CEHs:

1. The pre-conference [SBIRT workshop](#) on Sunday, October 5 is sponsored by the [NWATTC](#). This SBIRT workshop will be an additional 6 CEHs and is first-come, first-served. Must be registered in advance to attend. No drop ins.
2. The [Ethics Training post-conference workshop](#) on Wednesday, October 8 is partially sponsored by [DSHS/DBHR](#). Participants may earn an additional 4 or 6 hours for an additional \$30.
3. Up to an additional 12 CEHs for only \$30 in fees!

SUNDAY, OCTOBER 5, 2014 (Pre-Conference and Early Check-In)

| | |
|-------------------|---|
| 9:00 am – 4:00 pm | SBIRT Pre-Conference Training (50 max; first-come, first-served; must be registered in advance) |
| NOON – 6:00 pm | Early Registration & Check-in, Yakima Convention Center |

MONDAY, OCTOBER 6, 2014 (General Conference)

| | |
|------------------|---|
| Begins at 7:30am | Registration/Check-in/Continental Breakfast (<i>Registration Desk is Open All Day</i>) |
| 8:30 – 9:15 am | Keynote: Ken C. Winters, Ph.D, Director, Center for Adolescent Substance Abuse Research |
| 9:15 – 9:30 am | Division Welcome: Chris Imhoff, Director, DSHS/DBHR |
| 9:30 – 9:45 am | Welcome/Announcements: David Jefferson, Northwest ATTC |
| 9:45 – 10:00 am | <i>Break</i> |

| | |
|------------------|---|
| 10:00 – 10:45 am | Keynote: Dr. Gabor Mate, Best-Selling Author and Renown Speaker |
| 10:45 – 11:00 am | <i>Break</i> |
| 11:00 – 12:15 pm | Workshop I (10) |
| 12:15 – 1:15 pm | Lunch Provided |
| 1:15 – 2:15 pm | Keynote: Tonier “Toni” Cain, Consumer Advocate and Consultant |
| 2:15 – 2:30 pm | <i>Break</i> |
| 2:30 – 3:45 pm | Workshop II (10) |
| 3:45 – 4:00 pm | <i>Break</i> |
| 4:00 – 5:15 pm | Workshop III (10) |
| 5:15pm | Dinner on Your Own – Enjoy your evening! |
| Total | 7.5 CEHs |

TUESDAY, OCTOBER 7, 2014 (General Conference)

On Tuesday, there is a special offering of Suicide Management. This is a track, and is offered at no additional cost. Professionals must attend all day in order to earn the max amount needed for re-licensure and re-certification.

| | |
|------------------|--|
| Begins at 7:30am | Registration/Continental Breakfast (<i>Registration Desk is Open All Day</i>) |
| 8:00 – 9:15 am | Keynote: Donnie Goodman, Seattle Counseling Service |
| 9:15 – 9:30 am | Announcements: David Jefferson, Northwest ATTC |
| 9:30 – 9:45 am | <i>Break</i> |
| 9:45 – 10:45 am | Keynote: Dr. Stephen F. Grinstead, Developer, Addiction-Free Pain Management® System |
| 10:45 – 11:00 am | <i>Break</i> |
| 11:00 – 12:15 pm | Workshop IV (10) |
| 12:15 – 1:45 pm | Lunch Provided and Exemplary Service Awards Ceremony |
| 1:45 – 3:00 pm | Workshop V (10) |
| Total | 5.5 CEHs (Pick Up Certificates Before Leaving) |

WEDNESDAY, OCTOBER 8, 2014 (Post-Conference – Additional Fee)

| | |
|------------------------|---|
| 8:00 am – Noon/3:00 pm | Ethics Post-Conference Training (100 max; first-come, first-served, must be registered to attend) |
|------------------------|---|



Click on the times below to read more about workshop speakers and descriptions.

- [Workshop Session 1, October 6, 11:00am – 12:15pm](#)
- [Workshop Session 2, October 6, 2:30 – 3:45pm](#)
- [Workshop Session 3, October 6, 4:00 – 5:15pm](#)
- [Workshop Session 4, October 7, 11:00am – 12:15pm](#)
- [Workshop Session 5, October 7, 1:45 – 3:00pm](#)

Special Workshop – Tuesday, October 7 | 9:00am – 4:00pm | 6 CEHs towards suicide credential (30 MAX; first-come, first-served; those in attendance will attend this all day until 4:00pm, which is 1 hour later than the general conference)

Suicide Assessment, Management and Treatment

Stacey Chay, LAASW, MHP, Mental Health Care Coordinator, Spokane County RSN

This course will explore the theoretical foundation in the clinical assessment, treatment, and management of suicidal risk over time through treatment with suicidal persons. This course will provide instructions in “evidenced-based” and “best practices” for the treatment and case management with the suicidal person. This course will also include case scenario exercises that include therapeutic interventions, initial treatment planning and case notes, coordination of services and referral.

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Featured Speakers

Donnie Goodman



Donald ("Donnie") Goodman, MA/NCC, LMHP

Donnie Goodman was born and raised on the plains of South Dakota and Nebraska. He earned his undergraduate degree from Morningside College in Sioux City and his Master's Degree in Counseling from the University of South Dakota, Vermillion. During this period he also spent formative time working on the Rosebud Reservation in Mission. Donnie has been a National Certified Counselor since 1994. Donnie joined the staff of Seattle Counseling Service in 1995 as a youth and family counselor, was named the agency's Clinical Director in 2000 and Deputy Director in 2009. Donnie is a Licensed Mental Health Counselor with the state of Washington. His counseling specialties include youth, couples and families, and he is identified by Washington State as a Sexual Minority, Youth and Native American Mental Health Specialist. Donnie has program and clinical oversight responsibility for agency work including the areas of: HIV/AIDS, Harm Reduction, Sexual Assault and Domestic Violence, Gender Transitions, Mental Health and Addiction Services. Donnie has provided thousands of hours of individual supervision to therapists ranging from graduate student interns to well-seasoned professional therapists with decades of experience.

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Presentation Resource Information

Handouts will be provided electronically, as made available from presenters. Some resources are received prior to the conference, however, most are received during or after the conference. All resources approved for posting will be available below, listed by presenter name and presentation title.

This could also prove to be a valuable resource for participants who were not able to attend some presentations.

Downloads – Keynotes

[Walking the Tightrope of Pain Management and Addiction](#) – Dr. Stephen F. Grinstead, Dr. AD, LMFT

Downloads - Workshops

[Addressing Chronic Pain and Co-Existing Disorders](#) – Dr. Stephen F. Grinstead, Dr. AD, LMFT

[Overcoming Resistance and Denial for Effective Chronic Pain Management](#) – Dr. Stephen F. Grinstead, Dr. AD, LMFT

[Compassion Fatigue: Caring for Ourselves while Caring for Others](#) - Dr. Gabor Mate, Renowned Speaker and Bestselling Author

[The Hungry Ghost: A Biospsychosocial Perspective on Addiction, from Heroin to Workaholism!](#)- Dr. Gabor Mate, Renowned Speaker and Bestselling Author (Resource One)

[The Hungry Ghost: A Biospsychosocial Perspective on Addiction, from Heroin to Workaholism!](#)_ Dr. Gabor Mate, Renowned Speaker and Bestselling Author (Resource Two)

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The Co-Occurring Disorders and Treatment Conference is presented by the Washington State Department of Social and Health Services.



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2014 Exhibitors

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| Cascade Behavioral Hospital Tukwila, Washington | Crisis Clinic – Washington Recovery Helpline Seattle, Washington | Department of Social and Health Services/Behavioral Health and Service Integration Administration Olympia, Washington |
| DrCloudEMR Beaverton, Oregon | The Echo Group Conway, New Hampshire | Hazelden Center City, Minnesota |
| Hidden Spring Book Company Seattle, Washington | Lakeside-Milam Recovery Centers Kirkland, Washington | National Frontier and Rural Addiction Technology Transfer Center Reno, Nevada |
| Northwest Addiction Technology Transfer Center (NWATTC) Portland, Oregon | Olalla Recovery Center Seattle, Washington | Oxford House Inc. Centralia, Washington |
| Residence XII Kirkland, Washington | Singing Shaman Traders Newman Lake, Washington | Spectrum Health Services Tacoma, Washington |
| The Brain Injury Alliance of Washington Seattle, Washington | The Recovery Center at Valley Hospital Monroe, Washington | |

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Continuing Education

Continuing Education, Sign-In Requirements and Certificates

Continuing Education Hours, General Conference

Participants can earn up to thirteen (13) Continuing Education Hours (CEHs) for attending the general conference.

Here is the breakdown for days:

Monday, October 6: 7.5 hours

Tuesday, October 7: 5.5 hours

Licensure Approval

- National Association of Alcoholism and Drug Abuse Counselors (NAADAC)
- National Board for Certified Counselors (NBCC)

Participants may use the certificate to apply for CEHs from other certification/licensing boards. Please check with your board before submitting a certificate.

Sign-in Requirements and Digital Certificates, General

Conference

Participants must sign in at the registration desk **each morning** in order to receive credit for attendance for the general conference. Certificates for the general conference will be sent digitally to all participants AFTER the conference. Please notify the registration desk for adjustments on early departure certificates in advance. Certificates will not be mailed.

Sunday (Pre-Conference SBIRT Training) – six (6) CEHs

Sunday, October 5, 2014

9:00am – 4:00pm: NAADAC and NBCC (6 CEHs)

No cost; first-come, first-served

Sponsored by the NWATTC

If registration states it is full, please fax the flyer/from below to the NWATTC at 503-494-0183 to be placed on the waitlist.

[SBIRT_Flyer_06.03.2014](#) (updated – new speaker)

Certificates will not be mailed; please pick up a certificate before leaving. The NWATTC will provide participants who complete the course with a certificate of attendance onsite. The workshop will be held at the Yakima Convention Center.

SBIRT is a comprehensive, integrated, public health approach to the delivery of early intervention and treatment services for persons with substance use disorders, as well as those who are at risk of developing these disorders. Practitioners learn how to screen people for substance use disorder and apply a brief negotiated interview to build motivation for change and link to appropriate services. This presentation will discuss the research and rationale for widespread implementation of SBIRT; teach participants how to use common screening instruments, describe, demonstrate and educate participants on how to perform a brief negotiated interview; learn how SBIRT could be set-up in a clinic and explore protocols for referral to treatment.

Wednesday (Post-Conference Ethics Training) – four (4) or six (6) CEHs

Wednesday, October 8, 2014

8:00am – 12:00pm: Counselors (4 CEHs)

8:00am – 3:00pm: Mental Health Professionals (6 CEHs)

\$30 additional fee

Participants attending the Post-Conference Ethics Training must also sign in at the training in order to receive credit. Participants will receive a certificate for four (4) or six (6) hours at the close of the training on Wednesday, October 8.

Certificates will not be mailed; please pick up a printed certificate before leaving. The workshop will be held at the Yakima Convention Center.

The workshop will cover the Counselor's Code of Ethics, laws governing counseling and ethical decision-making, the ethical decision process and involve participant discussion.

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Awards

Exemplary Service Awards

- Application is due by 5:00 p.m. on **Thursday, July 24, 2014.**
- Awardees will be notified by 5:00 p.m. on **Thursday, August 7, 2014.**
- Download the Awards Nomination Form. **(Application period is closed.)**
- Complete the Online Nomination Form. **(Application period is closed.)**

Submit Applications to:

Original Application must be postmarked, emailed, faxed, or hand-delivered to:

Ruth Leonard

DSHS/DBHR

Mailing Address: PO Box 45330, Olympia, WA 98504-5330

Physical Location: 4500 10th Ave., Lacey, WA 98503

Email: ruth.leonard@dshs.wa.gov

Fax: 360.725.2280

Eligibility Criteria

Programs and Agencies

- To be considered for the award, nominated programs must be:
 - Providing treatment services to adolescents, adults, or special populations.

- Able to describe how the program incorporates evidence-based best practices.
- Able to document and demonstrate success by providing outcome research obtained through verifiable sources.
- In operation for a minimum of one year.

Individuals and Groups

- To be considered for the award, nominated individuals or groups must be:
 - strong treatment advocates, demonstrating good peer leadership and effective service delivery. (Candidates may be professionals or volunteers.)

Media, Business, Law Enforcement Partners and Others

- To be considered for the award, nominated individuals or organizations must:
 - have made substantial contributions to the advancement or promotion of treatment and recovery.

Selection Process

The DBHR Co-Occurring Disorders and Treatment Conference Planning Committee will conduct a review process. Reviewers will evaluate all applications based on the stated criteria and information provided by the person submitting the application. Every attempt will be made to ensure that awardees represent a range of demographic, ethnic, cultural, and geographic areas.

Benefits of the Exemplary Awards

Awardees will be honored at the Co-Occurring Disorders and Treatment Conference. The Exemplary Awards will recognize the efforts of dedicated individuals, programs, and supportive groups/organizations by celebrating their successes, and share their strategies with others in the field.

2014 Award Categories

- Lifetime Achievement
- Outstanding Collaborator
- Outstanding Service, Individual
- Promising Individual, New to the Field
- Innovative Program
- Consumer Advocate

Application Instructions

Applications must include the attached Application Cover Sheet and as many additional pages necessary to provide the requested information. Keep in mind that the information you provide will be all that the review committee has to

assess the nominee's suitability for an Exemplary Award. Applications with missing or otherwise incomplete information will not be successful. Supporting documentation may be included (such as photographs, support letters, news articles, brochures or audio or videotapes). *However, applications and supporting documentation will not be returned.*

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Travel Info

Accommodations & Transportation

Location



Yakima Convention Center

10 North 8th Street, Yakima, WA 98901

Toll-free: 800.221.0751

Local: 509.575.6062

Commuter Parking for Attendees

Complimentary parking is provided at the Yakima Convention Center for conference attendees.

Internet Access at Convention Center

The Yakima Convention Center offers complimentary wireless Internet. No password is required; use at your convenience. To inquire about the Internet access offered at the various conference hotels, please view the hotel's website or inquire when calling to make reservations.

Lodging Information

Holiday Inn

802 E. Yakima Ave.
Yakima, WA 98901
Phone: 509.494.7000

\$83.00/night plus tax*

Reference: 2014 Co-Occurring Disorders

Reservation Deadline: **Sunday, September 14, 2014**

**Quoted rate is for a single room; other fees may apply for more than one guest (\$103.00 + tax for double/\$113.00 + tax for triple/\$123.00 + tax for quad).*

***Room includes free gated parking. Hotel also has an indoor pool and jacuzzi. Hotel offers a cafe/restaurant, but no complimentary breakfast. Hotel is across the street from the conference venue. This hotel block will fill up fast. First-come, first-served.*

Additional Hotel Options

Fairfield Inn & Suites (Marriott)

137 N. Fair Avenue
Yakima, WA 98901
Phone: 509-452-3100

\$83.00/night plus tax*

Reference: DSHS Co-Occurring Disorders

Reservation Deadline: **Thursday, September 4, 2014**

Online Reservations:

Put in your check-in and check-out date

Click on "Special Rates and Awards"

Click on "group code"

*Enter **DSHDSHK** (king bed) or **DSHDSHD** (2 beds)*

Quoted rate is for a single room; other fees may apply for more than one guest (\$99.00** + tax for double/triple/quad).*

***Room includes **complimentary breakfast**, free Wi-Fi, free parking and an exercise room. Hotel also has an indoor pool and jacuzzi, is newly remodeled, has an in-room microwave and refrigerator. Hotel is less than a half mile from the conference venue, shares a parking lot with a restaurant, and is across the street from Target.*

Holiday Inn Express

1001 East A Street

Yakima, WA 98901

Phone: 509.249.1000

Toll free: 800.465.4329

\$83.00/night plus tax*

Reference: COD Conference 2014

Reservation Deadline: **Wednesday, September 10, 2014**

Price for one person per room. Schools are not tax exempt. (\$103.00** + tax for double/triple/quad).*

***All rooms include a refrigerator and microwave, in room coffee, iron and ironing board, and wireless Internet. Room rate includes a **complimentary breakfast** and free parking. Hotel also has an indoor pool and has an in-room microwave and refrigerator. Hotel is located across from the Convention Center, about a 5-minute walk.*

Ledgestone Suites

107 North Fair Avenue

Yakima, WA 98901

Phone: 509.453.3151

\$83.00/night plus tax*

Group Name: Co-Occurring Disorders and Treatment Conference

Reference Group Code: CODTC

Reservation Deadline: **Monday, September 15, 2014**

**Price is for a single queen suite with a pull-out sofa bed*

***Hotel is less than a half mile from the conference venue, shares a parking lot with a restaurant, and is across the street from Target. All suites are 30% larger than the average hotel room and are like one-bedroom apartments. All suites include a fully-equipped kitchen, spacious living room, separate bedroom, two flat screen televisions, well-lit work desk, and complimentary wireless internet. Hotel includes free parking, complimentary guest laundry, E-center, fitness center, coffee cart, contemporary atmosphere, professional staff and distinctive amenities.*

Red Lion Yakima

607 E. Yakima Ave.

Phone: 509.248.5900

Toll free: 800.733.5466

\$83.00/night plus tax*

Reference: Co-Occurring Disorders Conference

Reservation Deadline: **Friday, September 12, 2014**

**Quoted rate is for a single room; other fees may apply for more than one guest (\$103.00 + tax for double/\$113.00 + tax for triple/\$123.00 + tax for quad).*

***Room includes free parking. Hotel offers a cafe/restaurant, but no complimentary breakfast. Hotel shares the parking lot with the conference venue.*

Meals

Breakfast, lunch and an afternoon beverage/snack will be provided to all conference participants on Monday, October 6 and Tuesday, October 7.

Special Dietary Needs

If you are a vegetarian, please indicate this in the special accommodations field on the online or paper registration form. A vegetarian option will be provided for you during lunches. Breakfast is a buffet and will have vegetarian options. Participants with other special dietary needs such as gluten free or dairy free are welcome to include this information under special accommodations but there is no guarantee that the conference can accommodate all needs.

Transportation

Shuttle Service To/From Airport

Free hotel shuttle to and from airport is provided for those guests staying at the Red Lion Hotel or the Oxford Inn or

Suites. Please inquire about the shuttle service when making hotel reservations.

Taxi Service To/From Airport or Other Yakima Destinations

Cost is approx. \$20-\$25 to/from Yakima airport.

Local Taxi Companies

- A & J Taxi Company – 509.469.3316
- Jerry's Taxi – 509.454.8115
- Yakima Cab – 509.454.4555
- Black & White Cab Company – 509.248.2221
- Diamond Cab Company – 509.453.3133

Directions to Yakima Convention Center from Yakima Airport

- Upon exiting the airport
Right on Washington
Left on 16th Ave.
Stay on 16th Ave. for approx. 5 miles
Right on Yakima Avenue
Stay on Yakima Avenue until 8th St.
Yakima Convention Center is on the Left

Directions to Yakima Convention Center from I-90 East or West

- From I-90 take Exit #110 Yakima onto I-82 East
Take Exit #33B/Yakima Ave/Terrace Heights
Turn Right on East Yakima Ave
Turn Right on N 8th St.
Yakima Convention Center is on the Right

Yakima Travel Information

[Yakima Valley Convention and Visitors Bureau](#)

[Yakima Destination Information](#)

[City of Yakima Map](#)

[Area Restaurants](#)