

**Advisory Board
Holiday Potluck
December 4, 2012
12:00 - 1:00**

**Please bring something good to share
and let's enjoy a holiday meal together.
There is no pre-meeting scheduled so
we will enjoy the potluck at that time
before the regular meeting.**

NORTH SOUND MENTAL HEALTH ADMINISTRATION ADVISORY BOARD MEETING

Agenda

December 4, 2012
1:00 PM

1. Call to Order - Introductions, Chair
2. Revisions to the Agenda, Chair TAB 1
3. Comments from the Public
4. Ombuds Snapshot (bi-monthly) TAB 2
5. Approval of the November Meeting Minutes, Chair TAB 3
6. Executive/Finance Committee Report (come from committee)
7. Standing Board of Directors Committee Reports TAB 4
 - a. Planning Committee (available at the meeting)
 - b. Quality Management Oversight Committee (QMOC) (available at the meeting)
8. Old Business
9. Executive Director Report
10. Action Items Being Brought To The Board of Directors TAB 5
 - a. Action Items
 - b. Introduction Items
11. New Business
 - a. Clarification for San Juan County whether we will allow only phone attendance
 - b. Pre-meetings for 2013
12. Comments from County Advisory Board Representatives TAB 6
 - a. Island
 - b. San Juan
 - c. Skagit
 - d. Snohomish
 - e. Whatcom
13. Other Business TAB 7
 - a. Setting Agenda items
 - b. Minutes Format
 - c. By-Laws
14. Adjournment

NOTE: The next Advisory Board meeting will be January 8, 2013, in the NSMHA Conference Room due to the holiday.

OMBUDS SNAPSHOT December 4, 2012

Two months into our 6-month reporting period we have opened cases on **44** NSMHA clients including **4** children and at least **3** seniors.

Nearly a quarter of these people (**23%**) are non-Caucasians, suggesting our outreach to special populations continues to be effective. There were: **34** Caucasians; **3** African American; **1** Latino; **3** American Indian/Alaskan Natives; and **3** Asian American/Pacific Islander.

We've opened complaints on **40** people. There are **61** complaint occurrences: **15** in Consumer Rights; **11** in Physicians & Meds; **9** in Services Coordination/Intensity; **9** in Housing; **5** in Participation-in-Treatment; **5** in Dignity & Respect; **3** in Emergency Services; **2** in Access; **1** in Quality Appropriateness; and **1** in Violation of Confidentiality. There were **0** in Financial Services, Other Type, Unreturned Phone Calls, Transportation, and Residential Services.

There have been **2** provider-level grievance cases with **5** occurrences--**1** in Consumer Rights; **1** in Physicians & Meds; **1** in Housing; **1** in Services Coordination/Intensity; and **1** in Quality Appropriateness.

There have been **3** RSN Grievance cases with **7** occurrences--**1** in Physicians & Meds; **1** in Dignity & Respect; **2** in Consumer Rights; **1** in Financial Services; **1** in Services Coordination/Intensity; and **1** in Quality Appropriateness.

There were no new Appeal cases.

There are no new administrative hearings.

Other Report issues:

Breakout of Consumer Rights Complaints:

Client wishes to transfer services to another provider.

Client wants provider to stop threatening her with hospitalization.

Client says she is being threatened by a staff member and is being discharged from triage too soon.

Client claims race and age discrimination.

Client claims E&T staff members chart things she didn't say and try to get her to do things against her will.

Client requested second opinion due to disagreement on diagnosis.

Client wants people at involuntary commitment hearing but can't contact them due to her phone limitations.

Client claims her clinician didn't hear or believe what she said about things that happened to her in the past.

Client claims she didn't receive her rights while in involuntary commitment at a hospital.

Client didn't receive her consumer rights while in involuntary commitment at the E & T.

Client requested a new clinician.

Client says clinician was rude to her mother & requested medical documents of family member not in services.

Two young child clients need culturally appropriate services.

Client had no DBT; wasn't offered intensive outpatient services; medical conditions were wrongly documented.

Client claims he was mistreated by agency managers.

Client maintains she wasn't shown all her medical files upon request.

We received a complaint from a client who was prescribed a medication without having the potential side effects explained well. He states he was simply given a list of side-effects and asked to sign a waiver. One of the potential negative side effects was only referred to by medical terminology that he didn't understand. It wasn't until he looked it up on the Internet that he discovered how potentially harmful it was. He feels that he was pressured into taking a medication of which he didn't understand all the potential negative side effects. Another client complained that after being prescribed a higher dose of one of her meds she looked it up and found that people with kidney failure shouldn't take the medication. She says she has kidney failure. We recommend (1) that all providers review the meds lists they hand out to clients to ensure that all are written in simple English; and (2) that prescribers remain aware and mindful of the individual client's medical status.

We would like to acknowledge that the Skagit Valley REACH Center is adding more classes and activities to their monthly calendar, which makes the Center more attractive and provides a variety of options for their guests. According to Jeff Reynolds, Director, the Center is averaging 40+ guests a day and they include peers, professionals, and government officials, as well as law enforcement officers who like to stop by to see how things are going. We have heard positive comments from clients about the Center; such as, *“I’m glad there is a safe place to go hang out with others like me, and get help and information,”* and *“There is always something good going on there. I like the classes and other stuff.”*

The Advisory Board requested that we present on NSMHA complaint, grievance, appeal and administrative hearing processes. Today we will describe the Appeal process. Appeals don’t happen very often; at least that Ombuds are involved in. In an Appeal there has to be an “Action” to appeal. The “Action” is made known by a formal, written “Notice of Action” letter sent to the client by NSMHA. The letter explains an action NSMHA or a provider intends to take or has taken; the reasons for the action, and the right to request an appeal. Note that only “Medicaid eligible” folks receive the letter. If a non-Medicaid eligible person has an appeal type issue it is worked as an RSN-level Grievance. There are normal appeals and there are expedited appeals (that happen a lot quicker if approved by NSMHA as “expedited”). Requests for appeal that are initiated orally must be followed up with a signed written request by the enrollee or representative within 7 days. Appeals must be initiated within 20 calendar days of the receipt of the NSMHA Notice of Action or by the intended effective date of the proposed action whichever is later. If the client wishes to continue or reinstate previously authorized services during the Appeal process, the appeal must be initiated within 10 calendar days of the receipt of the NSMHA Notice of Action or by the intended effective date of NSMHA’s proposed action (whichever is later). However, the client must realize that if the final resolution of the appeal is not in their favor, NSMHA has the option of trying to recover the amount paid for the services provided to the enrollee while the appeal was pending. An Appeal meeting occurs where NSMHA will provide the client the opportunity to present evidence in person and in writing. Clients may invite anyone to the meeting. After the meeting NSMHA will mail a written Notice of Resolution. The process won’t exceed 43 days beyond the client’s request for an appeal date.

Here is a list of agencies showing where complaints and grievances came from:

AGENCY COMPLAINT/GRIEVANCE OCCURRENCE COUNTS

Bridgeways: 4 Occurrences

Dignity & Respect: 1

Housing: 1

Participation in Treatment: 1

Services Coordination/Intensity: 1

Catholic Community Services Mount Vernon: 0 Occurrences

Catholic Community Services Bellingham: 1 Occurrence

Consumer Rights: 1

Catholic Community Services Everett: 0 Occurrences

Compass Health, Aurora House: 0 Occurrences

Compass Health, Haven House: 0 Occurrences

Compass Health, Everett: 15 Occurrences

Consumer Rights: 1

Housing: 5

Physicians & Meds: 1

Services Coordination/Intensity: 1

RSN-level grievances:

Consumer Rights: 2

Dignity & Respect: 1

Financial & Admin Services: 1

Physicians & Meds: 1

Quality Appropriateness: 1

Services Coordination/Intensity: 1

Compass Health, Lynnwood: 3 Occurrences

Consumer Rights: 2

Services Coordination/Intensity: 1

Compass Health, Marysville: 5 Occurrences

Consumer Rights: 1

Physicians & Meds: 1

Provider-level grievances:

Consumer Rights: 1

Quality Appropriateness: 1

Services Coordination/Intensity: 1

Compass Health, Mount Vernon: 1 Occurrence

Consumer Rights: 1

Compass Health, Payee Office: 0 Occurrences

Compass Health, San Juan: 0 Occurrences

Compass Health, Smokey Point: 0 Occurrences

Compass Health, Snohomish: 3 Occurrences

Consumer Rights: 1

Participation in Treatment: 1

Services Coordination/Intensity: 1

Compass Health, Whidbey: 0 Occurrences

Snohomish Crisis & Triage Center: 2 Occurrences

Consumer Rights: 1

Emergency Services: 1

Snohomish PACT: 0 Occurrences

Interfaith: 0 Occurrences

Lake Whatcom Center: 4 Occurrences

Physicians & Meds: 1

Violation of Confidentiality: 1

Provider-level grievances:

Housing: 1

Physicians & Meds: 1

Lake Whatcom Residential & Treatment Center: 0 Occurrences

Whatcom PACT: 5 Occurrences

Consumer Rights: 1

Housing: 1

Physicians & Meds: 2

Services Coordination/Intensity: 1

Mukilteo Evaluation & Treatment Center: 7 Occurrences

Consumer Rights: 3

Services Coordination/Intensity: 1

Emergency Services: 1

Housing: 1

Dignity & Respect: 1

PeaceHealth Medical Center: 0 Occurrences

Skagit Valley Hospital: 3 Occurrences

Consumer Rights: 1

Dignity & Respect: 1

Physicians & Meds: 1

Sea Mar, Bellingham: 0 Occurrences

Sea Mar, Everett: 1 Occurrence

Access: 1

Sea Mar Lynnwood: 0 Occurrences

Sea Mar, Mount Vernon: 0 Occurrences

Skagit Triage Facility: 0 Occurrences

Snohomish County Involuntary Treatment Services: 1 Occurrence

RSN-level grievances:

Consumer Rights: 1

Whatcom County Involuntary Treatment Services: 1 Occurrence

Emergency Services: 1

Sunrise Services, Everett: 9 Occurrences

Consumer Rights: 1

Dignity & Respect: 1

Physicians & Meds: 2

Participation in Treatment: 2

Quality Appropriateness: 1

Services Coordination/Intensity: 2

Sunrise Services, Mount Vernon: 0 Occurrences

Whatcom Counseling & Psychiatric Clinic: 8 Occurrences

Consumer Rights: 1

Dignity & Respect: 1

Housing: 1

Participation in Treatment: 1

Physicians & Meds: 3

Services Coordination/Intensity: 1

VOA (Access Line, Gatekeeper & Care Crisis Line): 0 Occurrences

Hopelink (Medicaid Transportation): 0 Occurrences

NSMHA: 1 Occurrence

Access: 1

North Sound Mental Health Administration (NSMHA)
MENTAL HEALTH ADVISORY BOARD
November 6, 2012
1:00 – 3:00

Present:	Island: <i>Candy Trautman</i> Skagit: <i>Joan Lubbe</i> Snohomish: <i>Fred Plappert, Megan Anderson and CarolAnn Sullivan</i> Whatcom: <i>David Kincheloe and Mark McDonald</i>
Excused Absence:	Skagit: <i>Susan Ramaglia</i> Whatcom: <i>Russ Sapienza</i>
Staff:	<i>Joe Valentine, Margaret Rojas, Greg Long and Rebecca Pate</i>

MINUTES

TOPIC	DISCUSSION	ACTION
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CALL TO ORDER AND INTRODUCTIONS		
Chair Trautman	The Chair convened the meeting at 1:06. There was a pre-meeting presentation done by Opportunity Council regarding their Federal Block Grant Projects.	Informational
REVISIONS TO THE AGENDA		
Chair Trautman	The Chair asked for any revisions to the agenda and Megan added discussion of By-Laws, format for the minutes and the process for developing the meeting agenda.	Informational
COMMENTS FROM THE PUBLIC		
Chair Trautman	The Chair asked for any comments from the public and no one was present.	Informational
APPROVAL OF MINUTES		
Chair Trautman	The Chair asked for any revisions/corrections to the October minutes. Approval was delayed until the end of the meeting per Megan's request. Megan stated she want the minutes to reflect she requested appointment to Quality Management Oversight Committee (QMOC) and Planning Committee. Fred made a motion to approve the minutes as amended, David seconded and motion carried.	Informational Motion carried
FINANCE/EXECUTIVE COMMITTEE REPORT		
Fred Plappert	A recommendation was brought forward from committee to move expenditures forward to the Board of Directors for approval. Candy called for the vote by the full Board and motion carried. Another recommendation was to pay registration for a one day workshop, mileage reimbursement and meals for Candy and Mark so they could attend "Suicide Education Workshop" provided by Washington State Psychiatric Association. Candy called for the vote and motion carried. Candy stated she and Mark will report on this at the next meeting.	Informational Motion carried Motion carried
STANDING BOARD OF DIRECTORS COMMITTEE REPORTS		
	Planning Committee	
	Report was included in members packets for their review and reading pleasure.	Informational
	Quality Management Oversight Committee (QMOC) Report	
	Report was included in members packets for their review and reading pleasure.	Informational

OLD BUSINESS		
Chair Trautman	<p><u>Julie de Losada's Report on "Goal #3, Strategy 3.3 – Promote youth and family involvement at all levels of the system"</u> Julie gave a PowerPoint presentation and handouts with an overview of this goal. Joe mentioned NSMHA is going to be concentrating on this to ensure this program is accomplished.</p> <p><u>Continue to Offer the Co-Occurring Disorders (COD) Conference</u> A recommendation from Finance committee is to provide two scholarships for Advisory Board members only for the COD conference in 2013. Discussion followed. The vote was called and motion carried with four in favor and two opposed. Joe suggested that all known conference and workshops be discussed at a later date. It was agreed to put this on the January agenda.</p>	<p>Informational</p> <p>Preparation of a list of conferences for discussion in January 2013.</p> <p>Motion carried</p>
EXECUTIVE DIRECTOR'S REPORT		
Joe Valentine	Joe provided a PowerPoint presentation regarding the proposed 2013 NSMHA budget. He added this will come back before the Advisory Board for recommendation of approval by the Board of Directors in December. Candy thanked Joe for a nice presentation for clarity and understanding.	Bring the proposed 2013 NSMHA budget forward
ACTION ITEMS BEING BROUGHT TO THE BOARD OF DIRECTORS		
Joe Valentine	<p>ACTION ITEMS</p> <p>COUNTY</p> <p>NSMHA-ISLAND COUNTY-ADMINISTRATION-12 AMENDMENT 1 for the provision of increasing the funding on this Agreement by \$20,000 for a maximum consideration of \$71,032, the term of this Agreement remains the same.</p> <p>NSMHA-SAN JUAN COUNTY-ADMINISTRATION-12 AMENDMENT 2 for the provision of increasing the funding on this Agreement by \$9,167 for a maximum consideration of \$498,715. The term of this Agreement remains the same.</p> <p>NSMHA-SKAGIT COUNTY-ADMINISTRATION-12 AMENDMENT 2 for the provision of increasing the funding on this Agreement by \$20,834 for a maximum consideration of \$213,048. The term of this Agreement remains the same.</p> <p>NSMHA-WHATCOM COUNTY-ADMINISTRATION-12 AMENDMENT 1 for the provision of increasing the funding on this Agreement by \$30,834 for a maximum consideration of \$93,808. The term of this Agreement remains the same.</p> <p>STATE MENTAL HEALTH CONTRACT</p> <p>NSMHA-SNOHOMISH COUNTY-SMHC-11-13 AMENDMENT 3 for the provision of increasing the funding on this Agreement by \$277,000 for a maximum consideration of \$3,111,070. The term of this Agreement remains the same.</p> <p>PROFESSIONAL SERVICE CONTRACTS</p> <p>NSMHA-BROWN M.D.-PSC-13 for the provision of consulting with the NSMHA for Medical Director Services. Funding for this Agreement is \$36,000 for the term of January 1, 2013 through December 31, 2013.</p>	Informational

NSMHA-TURNER HR SERVICES-PSC-13 for the provision of consultation in matters of Human Resources. Funding for this Agreement is \$15,000. The term of this Agreement is January 1, 2013 through December 31, 2013.

NSMHA-LAKE WHATCOM-PSC-11-13 for the provision of janitorial services. Funding for this Agreement is \$14,098. The term of this Agreement is January 1, 2013 through December 31, 2013

ELECTRONIC HEALTH RECORD – FUND BALANCE

The following contracts are to support our providers in the development and implementation of Electronic Health Records. This funding was allocated during the fund balance RFP in September.

NSMHA-BRIDGWAYS-PSC-12-13 for the provision of developing and implementing an Electronic Health Record. Funding for this Agreement is \$139,452. The term of this Agreement is November 1, 2012 through December 31, 2013.

NSMHA-CCSNW-PSC-12-13 for the provision of developing and implementing an Electronic Health Record. Funding for this Agreement is \$61,970. The term of this Agreement is November 1, 2012 through December 31, 2013.

NSMHA-COMPASS HEALTH-PSC-12-13 for the provision of developing and implementing an Electronic Health Record. Funding for this Agreement is \$809,957. The term of this Agreement is November 1, 2012 through December 31, 2013.

NSMHA-INTERFAITH-PSC-12-13 for the provision of developing and implementing an Electronic Health Record. Funding for this Agreement is \$25,000. The term of this Agreement is November 1, 2012 through December 31, 2013.

NSMHA-LAKE WHATCOM-PSC-12-13 for the provision of developing and implementing an Electronic Health Record. Funding for this Agreement is \$44,231. The term of this Agreement is November 1, 2012 through December 31, 2013.

NSMHA-SEA MAR-PSC-12-13 for the provision of developing and implementing an Electronic Health Record. Funding for this Agreement is \$100,458. The term of this Agreement is November 1, 2012 through December 31, 2013.

NSMHA-SNOHOMISH COUNTY-PSC-12-13 for the provision of developing and implementing an Electronic Health Record. Funding for this Agreement is \$84,750. The term of this Agreement is November 1, 2012 through December 31, 2013.

NSMHA-SUNRISE SERVICES-PSC-12-13 for the provision of developing and implementing an Electronic Health Record. Funding for this Agreement is \$72,217. The term of this Agreement is November 1, 2012 through December 31, 2013.

NSMHA-WCPC-PSC-12-13 for the provision of developing and implementing an Electronic Health Record. Funding for this Agreement is \$368,500. The term of this Agreement is November 1, 2012 through December 31, 2013.

TRANSITIONAL HOUSING- FUND BALANCE

The following contract is to fund a 3 bed transitional house in Whatcom County. The funding shall be used for facility costs only. This funding was allocated during the fund balance RFP in September.

NSMHA-LAKE WHATCOM-PSC-13 for the provision of providing transitional housing in Whatcom County. Funding for this Agreement is \$36,000. The term of this Agreement is January 1, 2013 through December 31, 2013.

INTRODUCTION ITEMS

The following contracts are the County Administration contracts. The term of the contracts has been extended to allow time for the counties to expend the housing fund balance allocation. The total funding encompasses the county administration funds and the housing funds.

NSMHA-ISLAND COUNTY-ADMIN-13-14 for the provision of coordination and collaboration with the county in respect to the delegated functions and housing services for individuals with mental illness. Funding for this Agreement is \$. The term of this Agreement is January 1, 2013 through December 31, 2014.

NSMHA-SAN JUAN COUNTY-ADMIN-13-14 for the provision of coordination and collaboration with the county in respect to the delegated functions and housing services for individuals with mental illness. Funding for this Agreement is \$. The term of this Agreement is January 1, 2013 through December 31, 2014.

NSMHA-SKAGIT COUNTY-ADMIN-13-14 for the provision of coordination and collaboration with the county in respect to the delegated functions and housing services for individuals with mental illness. Funding for this Agreement is \$. The term of this Agreement is January 1, 2013 through December 31, 2014.

NSMHA-WHATCOM COUNTY-ADMIN-13-14 for the provision of coordination and collaboration with the county in respect to the delegated functions and housing services for individuals with mental illness. Funding for this Agreement is \$. The term of this Agreement is January 1, 2013 through December 31, 2014.

Joe mentioned the actions items for the County Admin contract amendments, Snohomish County SMHC amendment, Electronic Health Records (Professional Services Contracts (PSC)) and Transitional Housing contract are a result of fund balance monies. The next are the Professional Services Contracts with Dr. Brown, as NSMHA Medical Director, Kara Turner for Human Resources consultation and Lake Whatcom for janitorial services. Some discussion followed.

Joe called out the introductions items and stated these are for information/review and will go forward for approval next month.

Fred made a motion to recommend approval of the action items, Mark seconded and motion carried.

Motion carried

NEW BUSINESS		
Chair Trautman	The Chair asked for any new business and Rebecca mentioned there was an updated roster, RSN Administrators and regional map update in the members binder for inclusion in their orientation manual.	Informational Email corrected roster
COMMENTS FROM COUNTY ADVISORY BOARD REPRESENTATIVES		
Island	Candy said Island is having a one day Crisis Intervention Training (CIT) November 16 th for police, sheriff's and first responders with another one planned for early January.	Informational
San Juan	A brief was submitted by Barbara LaBrash and included in members packets for their review and reading pleasure.	Informational
Skagit	A brief was submitted by Rebecca Clark and included in members packets for their review and reading pleasure.	Informational
Snohomish	A brief was submitted by Nancy Jones and included in members packets for their review and reading pleasure. Fred and Megan mentioned they held a special meeting and discussed the following: Fred stated they meet with staff for a brainstorming session. Megan added the special meeting decided the County Advisory Board will continue to meet monthly but will meet jointly with Substance Abuse Board on a quarterly basis beginning in January.	Informational
Whatcom	A brief was submitted by Whatcom and included in members packets for their review and reading pleasure. David stated they have not met since July and the biggest item on the agenda will be discussion around the approval granted by the new County Executive for combining Mental Health/Substance Abuse Boards. We are working on developing the code and ordinance to be sent to board members via email for review and comment. We would like to explore/discuss having a 10-member board with equal representation from mental health consumers, alcohol/drug recovery members and professionals with knowledge of the field and on County Council appointee.	Informational
OTHER BUSINESS		
Chair	<i>By-Laws</i> Postponed due to time constraints. It was requested Megan submit her suggestions/recommendations in writing to Rebecca for distribution to the Advisory Board. <i>Agenda Items for Submission & Minutes Format</i> Postponed due to time constraints.	Informational Add to December agenda items setting, minutes format and By-Laws
ADJOURNMENT		
Chair	Fred made a motion to adjourn the meeting, seconded and motion carried. The meeting was adjourned at 3:01. The next meeting will be December 4, 2012, and will be the annual holiday potluck.	Informational Motion carried

REVISED MEMORANDUM

DATE: November 30, 2012
TO: NSMHA Advisory Board
FROM: Joe Valentine, Executive Director
RE: December 13, 2012, Board of Director's Agenda

Please find for your review the following that will go before the NSMHA Board of Directors at the December 13, 2012, meeting:

ACTION ITEMS

Executive Committee Personnel Motions:

The new position and reclassifications listed below are included in the 2013 NSMHA budget.

To approve the newly created position of Programmer/Developer Analyst to provide the technical expertise to develop programming that will interface with the electronic health records of the Health Care Plans and NSMHA providers.

To approve two reclassifications to reflect the additional job responsibilities and performance expectations, the two reclassifications are as follows:

Administrative Assistant position is reclassified as Administrative Assistant Coordinator; this position will coordinate the work of the support staff team.

Quality Specialist position is reclassified as Quality Specialist Coordinator of child/youth/family Policy and Programming, this position will lead the region's child/youth system redesign and ongoing monitoring/evaluation of the children's system of care.

COUNTY CONTRACTS

The following contracts are the County Administration contracts. The term of the contracts has been extended by one additional year to allow time for the counties to expend the housing fund balance allocation. The total funding encompasses the county administration funds and the housing funds.

REVISED MEMORANDUM

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NSMHA-ISLAND COUNTY-ADMIN-13-14 for the provision of coordination and collaboration with the county in respect to the delegated functions and housing services for individuals with mental illness. Funding for this Agreement is \$216,950 for a term of January 1, 2013 through December 31, 2014.

NSMHA-SAN JUAN COUNTY-ADMIN-13-14 for the provision of coordination and collaboration with the county in respect to the delegated functions and housing services for individuals with mental illness. Funding for this Agreement is \$1,035,137.33 for a term of January 1, 2013 through December 31, 2014.

NSMHA-SKAGIT COUNTY-ADMIN-13-14 for the provision of coordination and collaboration with the county in respect to the delegated functions and housing services for individuals with mental illness. Funding for this Agreement is \$350,534.67 for a term of January 1, 2013 through December 31, 2014.

NSMHA-WHATCOM COUNTY-ADMIN-13-14 for the provision of coordination and collaboration with the county in respect to the delegated functions and housing services for individuals with mental illness. Funding for this Agreement is \$477,718.67 for a term of January 1, 2013 through December 31, 2014.

**MEDICAL CARE SERVICES (MCS)-COMMUNITY HEALTH PLAN OF WASHINGTON (CWP)
PROVIDER CONTRACTS**

The following contracts are ongoing contracts serving Non-Medicaid individuals identified within a Community Health Clinic in need of mental health services. Individuals will receive short term mental healthcare/apply for ongoing RSN services.

NSMHA-COMPASS HEALTH-CHPW MCS-13 for the provision of passing through funding for mental health services to individuals who are on Medical Care Services, this is a limited benefit that allows for stabilization and access to NSMHA services when/if eligible. The maximum consideration for this agreement, based on 29 slot allocations, for an amount up to \$69,600 for a term of January 1, 2013 through December 31, 2013.

NSMHA-INTERFAITH-CHPW MCS-13 for the provision of passing through funding for mental health services to individuals who are on Medical Care Services, this is a limited benefit that allows for stabilization and access to NSMHA services when/if eligible. The maximum consideration for this agreement, based on 9 slot allocations, for an amount up to \$21,200 for a term of January 1, 2013 through December 31, 2013.

NSMHA-SEA MAR-CHPW MCS-13 for the provision of passing through funding for mental health services to individuals who are on Medical Care Services, this is a limited benefit that allows for stabilization and access to NSMHA services when/if eligible. The maximum consideration for this agreement, based on 23 slot allocations, for an amount up to \$55,200 for a term of January 1, 2013 through December 31, 2013.

REVISED MEMORANDUM

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PROVIDER CONTRACTS-FUND BALANCE

This funding was allocated during the Fund Balance RFP in September.

NSMHA-SUNRISE SERVICES-IDDT-13-14 for the provision of funding an Integrated Dual Disorder Treatment (IDDT) program, an Evidence Based Practice, in Skagit County. The maximum consideration for this Agreement is \$757,900 for a term of January 1, 2013 through December 31, 2014.

This funding allocation, which is Medicaid only, is being allocated to those providers that are over serving and not being compensated due to the CAP limit. This funding will raise the CAP limit on the following contracts.

NSMHA-INTERFAITH-MEDICAID-11-13 AMENDMENT 3 for the provision of allocating additional Medicaid funding to increase Interfaith's funding CAP by \$8,000 per month. The new maximum consideration on the Agreement is \$722,137 the term of the Agreement remains the same.

NSMHA-LAKE WHATCOM-MEDICAID-11-13 AMENDMENT 3 for the provision of allocating additional Medicaid funding to increase Lake Whatcom's funding CAP by \$11,000 per month. The new maximum consideration on the Agreement is \$1,537,893 the term of the Agreement remains the same.

NSMHA-SUNRISE SERVICES-MEDICAID-11-13 AMENDMENT 3 for the provision of allocating additional Medicaid funding to increase Sunrise Service's funding CAP by \$19,000 per month. The new maximum consideration on the Agreement is \$2,976,124 the term of the Agreement remains the same.

2013 NSMHA Operating budget

cc: Joe Valentine
County Coordinators
NSRSN Management Team

ADVISORY BOARD BY LAWS

ARTICLE I: PURPOSE

The purpose of the North Sound Mental Health Administration (NSMHA) Advisory Board is to provide independent advice to the North Sound Mental Health Administration Board of Directors and provide independent feedback to local jurisdictions and service providers.

Additionally, it is the purpose of the Advisory Board to advocate for the people we serve in the community, at the local Advisory Board, at the State Legislature and in Congress. It is our objective to promote the mission of NSMHA, *“Improving the mental health and wellbeing of the individuals and families in our communities”*. The North Sound Mental Health Administration Advisory Board is established in compliance with the **Interlocal Agreement Establishing A Mental Health Regional Support Network for Island, San Juan, Skagit, Snohomish and Whatcom Counties** executed in October 1989, and in compliance with the provisions of RCW, chapter 71.05, 71.24, 71.34, and applicable federal laws and regulations.

ARTICLE II: DUTIES

The duties of the North Sound Mental Health Administration Advisory Board shall be:

1. To provide oversight activities in order to advise the North Sound Mental Health Administration Board of Directors concerning the planning, delivery and evaluation of those mental health services which promote recovery and resilience and are the responsibility of the North Sound Mental Health Administration.
2. To provide a medium for public testimony regarding mental health concerns which are the responsibility of the North Sound Mental Health Administration. The Advisory Board will cover the cost of transportation to enable consumers to appear to give testimony.
3. To review and provide comment on all North Sound Mental Health Administration Strategic Plans, Quality Assurance Plans, and service delivery plans and budgets, which relate to mental health services before such plans and budgets are acted on by the North Sound Mental Health Administration Board of Directors.
4. To ensure the needs of all consumers within the region are met (including, but not limited to, the needs of people with special needs, the elderly, the disabled, children/youth, Native Americans, Gay, Lesbian, Bisexual, and Transgender (GLBT) individuals, and individuals who are low income), within the plans established by the North Sound Mental Health Administration Board of Directors.

5. To conduct site visits of North Sound Mental Health Administration service providers, special interest groups, Department of Social and Health Services (DSHS) agencies, private sector service providers, hospitals, and community programs. Site visits are designed to provide North Sound Mental Health Advisory Board members with first-hand information to provide informed recommendations to the North Sound Mental Health Administration Board of Directors.
6. To assist the North Sound Mental Health Administration with dissemination of information to the public who reside within the five (5) counties of the North Sound Mental Health Administration.
7. To perform such other duties as the North Sound Mental Health Administration Board of Directors, Department of Social and Health Services, and/or Mental Health Division may require.

ARTICLE III: MEMBERSHIP

1. The North Sound Mental Health Administration Advisory Board shall consist of twenty-one (21) members representing the five counties that make up the region, and three (3) regional Tribal members, as follows:

Island County	(3)	Three
San Juan County	(2)	Two
Skagit County	(3)	Three
Snohomish County	(8)	Eight
Whatcom County	(5)	Five
Tribes	(3)	Three
2. Each representative from each county shall have one vote. The three (3) regional tribal representatives shall share one vote.
3. Length of term and rotation of membership shall be determined by the code of each individual county which is party to the North Sound Mental Health Administration.
4. At least one (1) member from each county will be a voting member on that county's local Mental Health Advisory Board.
5. Fifty-one percent (51%) (WAC 388-865-0222 (2)), of the North Sound Mental Health Administration Advisory Board membership will be comprised of people who are consumers, family and foster-family members, or caregivers, including youths, older adults, or people with a disability, and/or parents of children who are emotionally disturbed, with at least one (1) representative from each county being a consumer. A representative from law enforcement shall be a member of the board.

6. The Mental Health Advisory Board will be representative of the demographic character of the region and of the ethnicity and broader cultural aspects of consumers being served.

ARTICLE IV: APPOINTMENT

1. Representatives of each county which is party to the North Sound Mental Health Administration Advisory Board shall be appointed according to each county's officially stipulated method of appointment.

ARTICLE V: OFFICERS

1. Officers of the North Sound Mental Health Administration Advisory Board shall include a Chair and a Vice-Chair. The Vice-Chair shall assume the office of Chair at the end of the Chair's term/s.
2. Term of office shall be for one (1) two (2)-year term, with the opportunity for re-nomination to serve one (1) additional year, for a maximum of three (3) consecutive years per person.
3. A slate of candidates shall be presented annually by the Nominating Committee at the November Advisory Board meeting. Elections, with nominations from the floor, shall occur at each December meeting. Officers shall assume duties beginning with the January meeting of the following year.

ARTICLE VI: COMMITTEES

1. Standing committees of the North Sound Mental Health Administration Advisory Board shall be:
 - a. Executive-Finance, and
 - b. Nominating.
2. The Executive-Finance Committee shall consist of the Chair, Vice-Chair, Chair Emeritus of the Advisory Board, and other members-at-large (not to exceed two), appointed by the Chair. Efforts will be made to ensure that at least one member of the Executive-Finance Committee has experience and/or understanding of financial management.
3. The Executive-Finance Committee shall convene to hear pressing matters of business which may arise during the interval between regularly scheduled Advisory Board meetings. The committee will review and make recommendations regarding all Advisory Board fiscal expenditures. Any decision made by the Executive Committee shall be subject to the ratification of the full Board at its next regularly scheduled meeting. The Executive-Finance Committee

shall review the by-laws once each calendar year for the purpose of amending them if necessary.

4. Members of the Nominating Committee shall be appointed by the Chair.
5. The Chair may establish and appoint members to Ad-Hoc Committees, as the need arises.
6. Committee appointments to the NSMHA Board of Directors Standing Committees shall be made by the Chair each January at the regular meeting of the NSMHA Advisory Board. The two standing committees are (a) Planning and (b) Quality Management Oversight. Membership appointments for each standing committee shall be in accordance with the respective standing committee charter.

ARTICLE VII: MEETINGS

1. The North Sound Mental Health Administration Advisory Board shall meet at least ten (10) times each year at a date and time mutually agreeable to the members of that Board. Any regularly scheduled meeting may be canceled at the discretion of the Chair.
2. Special meetings may be called by the Chair, as needed, and/or as requested by a minimum of one (1) member from each of three (3) of the five (5) counties which are party to the North Sound Mental Health Administration, by contacting the Chair. Special meetings shall be called within five (5) working days of the request, following notice of at least forty-eight (48) hours to all members of the Advisory Board.
3. Digital Conferencing, by phone or any other technological means will be granted twice to each member during a single calendar year. Exceptions may be granted by the Chair.
4. Committee meetings shall be held at the discretion of the Committee Chair.
5. *Robert's Rules of Order* shall govern all proceedings of the North Sound Mental Health Administration Advisory Board and committees, insofar as the *Rules* do not conflict with, or are not inconsistent with, the provision of these By-Laws.
6. The Board shall comply with the State of Washington Open Meetings Act (RCW 42.30).

ARTICLE VIII: QUORUM

1. The presence of at least fifty percent (50%) of the appointed representatives and at least three (3) of the five (5) counties which are party to the North Sound Mental Health Administration, shall constitute a quorum.
2. The Executive Committee quorum shall consist of a simple majority of the Executive Committee members.
3. Members of the Advisory Board attending via Digital Conferencing, by phone or any other technological means, shall be counted as present in determining the constitution of a quorum.

ARTICLE IX: RESIGNATION/TERMINATION

1. Following the absence of an Advisory Board member, a member of the Advisory Board's Executive-Finance Committee will contact that absentee member to ascertain their continued status on the Advisory Board.
2. After three (3) consecutive unexcused absences, or five (5) nonconsecutive unexcused absences per calendar year, the Chair, when possible, will request that the absent member be excused from the Board and that another person from the same county be appointed by the county authority as a representative to the NSMHA Advisory Board.