AGREEMENT KC-010-19

This Agreement is entered into between Kitsap County and the Kitsap Public Health District for the Crisis Response and Coordinated Care Project (Kitsap Connect).

I. Purpose

This Agreement is for the appropriation of \$380,105, for the purpose of augmenting state and federal funding of mental health, chemical dependency and therapeutic court programs and services with the goal of preventing and reducing the impacts of disabling chemical dependency and mental illness by creating and investing in effective, data-driven programs for a continuum of recovery-oriented systems of care per RCW 82.14.460 for the time period January 1, 2019 – December 31, 2019. Funding must be used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services. No funding provided under this Agreement may be used to supplant existing funding for these programs.

II. Collaboration and Collective Impact

The Kitsap Public Health District shall take the initiative to work with other systems to reduce fragmentation or duplication and to strengthen working relationships utilizing collective impact strategies. The Kitsap Public Health District will provide quarterly updates on collaborative efforts and outreach activities that will include issues mutually identified by the Kitsap Public Health District and respective systems that can be addressed through collective impact strategies. Examples of such systems include: mental health, aging, veterans, child protection and welfare, adult protection and welfare, education, juvenile justice, housing, employment services, primary health care plans and other publicly-funded entities promoting substance abuse and mental health services.

All entities providing services to working age adults and youth shall establish a connection with the local WorkSource system to ensure people have access to employment training and placement services.

III. Identification and Coordination of Available Funding Sources

The Kitsap Public Health District is required to identify and coordinate all available funding resources to pay for the mental health and chemical dependency services funded by this Agreement, including Federal (Medicaid and Affordable Care Act, etc.), State, local, private insurance and other private sources. The 1/10th of 1% funding should be utilized as a Payor of Last Resort.

IV. Project Description

This project will provide behavioral health services within the Crisis Intervention level of the continuum of care and addresses the following strategic goals:

- Improve the health status and wellbeing of Kitsap County residents.
- Reduce the number of chemically dependent and mentally ill youth and adults from initial or further criminal justice system involvement.
- Reduce the number of people in Kitsap County who recycle through our criminal justice systems, including jails and prisons.
- Reduce the number of people in Kitsap County who use costly interventions including hospitals, emergency rooms, and crisis services.

Kitsap Connect is a multi-disciplinary collective impact program that provides innovative outreach, engagement, and care coordination services to fifty (50) Kitsap residents in Bremerton and Central Kitsap who are inappropriately engaged with, and are the highest-utilizers of, costly health and social services including emergency medical services (EMS), emergency departments (ED), law enforcement and jail, and to those who are not effectively utilizing existing health and social resources. These practices place them at high risk for housing instability, eviction, homelessness, untreated or poorly managed mental illness, untreated chemical dependency, and complications from complex illness and disease.

V. Project Design

Kitsap Connect will provide care plans and outreach, engagement, and care coordination services. Care coordination will include accompaniment to behavioral health, housing, and social service appointments; tracking down official documents needed to secure housing or social security payments; coordinating transportation for clients to appointments; negotiating substance abuse recovery screening and placement; coordinating vital health care appointments necessary to stabilize the client's health; arranging for housing placement; and problem-solving when issues arise with service providers about client mis-behavior or non-compliance. Kitsap Connect will track progress for each client according to an established care plan, which the client participates in developing and modifying over time. Improvement in Knowledge, Behavior, and Status (KBS) within defined areas of concern for targeted intervention will be tracked including:

- Abuse a client's ability to identify abusive behavior, strategize a safety plan, and internalize information around boundary setting in relationship.
- Health Care Supervision client's obtaining preventative health care, receiving health care in a timely manner and following up on health care appointments – including behavioral health.
- Income clients increasing their awareness of financial and community resources, developing a budget and prioritizing spending, and having money to pay for bare necessities.

- Mental Health clients increasing their awareness of the effects of life stressors, coping skills, adverse mental health symptoms, and at least one treatment option for help; practicing mental health self-care.
- Residence
 — clients increasing their awareness of housing, resources, and tenant's rights; making an effort to look for stable housing and maintain housing; and identify household hazards.
- Substance Use client's awareness of the dangers of substance use, selfawareness of use.

VI. Project Outcomes and Measurements

The Kitsap Public Health District will participate in the Evaluation Plan for Treatment Sales Tax Programs. Programs or services implemented under the Treatment Sales Tax are monitored by the Citizens Advisory Committee. The Kitsap Public Health District will have an evaluation plan with performance measures developed in partnership with Kitsap Public Health District Epidemiologist. The emphasis will be on capturing data at regular intervals that can be used to determine whether Treatment Sales Tax funded programs met expectations. Some common measures will be identified that will be reported on. Evaluation efforts must include standardized data collection and reporting processes that produce the following types of information:

- · Quantity of services (outputs).
- Level of change occurring among participants (outcomes).
- Return-on-investment or cost-benefit (system savings) if evidence-based.
- Adherence to the model (fidelity).
- Common measures (to be identified by the Citizens Advisory Committee and Kitsap Public Health District staff that all programs must report on).

Data will be collected to monitor the following goals and objectives identified by the Kitsap Public Health District:

Goal #1: Improve the mental health and physical health and well-being of highly vulnerable clients.

Objective #1: By December 31, 2019, serve at least thirty (30) highly vulnerable, costly clients with established care plans.

Objective #2: By December 31, 2019, the following percent of enrolled clients (those participating at least three (3) months-does not have to be consecutive) will make progress on their tailored care plan as evidenced by improved Knowledge, Behavior and Status (KBS) scores:

Knowledge: 50%Behavior: 55%Status: 55%

Goal #2: Enhance linkages to comprehensive services including care coordination, access to medication, prompt access to benefits, health care.

Objective #3: By December 31, 2019, % to be determined of high utilizers of the Emergency Department and/or Emergency Medical Services clients will increase their number of primary care visits.

Objective #4: By December 31, 2019, % to be determinded of clients will be engaged or re-engaged with a mental health services at graduation.

Goal #3: Increase access to stable housing for those Kitsap County residents with mental illness and/or substance use disorders.

Objective #5: By December 31, 2019, % to be determined of clients who entered the program as homeless will be in either temporary or stable housing at time of discharge/graduation.

Objective #6: By December 31, 2019, 80% of clients report improvement in well-being as measured by an Anonymous Services Survey at exit of program.

Objective #7: By December 31, 2019, 80% of clients report moderate to high level of satisfaction with program as measured quarterly and at discharge with the internal Satisfaction Survey.

Goal #4: Reduce usage of costly health. social, and public services resulting in cost savings.

Objective #8: By December 31, 2019, at least 25 % of high utilizers enrolled in the program (those participating at least 12 months-does not have to be consecutive) decrease use of costly services compared to their baseline.

Objective #9: By December 31, 2019, there will be a statistically significant decrease in the average emergency services used by high utilizers enrolled in the program (those participating at least 12 months-does not have to be consecutive) compared to their baseline.

Objective #10: By December 31, 2019, Emergency Medical Services high utilizers enrolled in the program (those participating at least 12 months- does not have to be consecutive) reduce the number of calls by 30 % from baseline.

Objective #11: By December 31, 2019, 911 high utilizers enrolled in the program (those participating at least 12 months- does not have to be consecutive) reduce the number of calls by 30% from baseline.

Objective #12: By December 31, 2019, inappropriate or high emergency department utilizers enrolled in the program (those participating at least 12 months- does not have to be consecutive) reduce their number of Emergency Department visits by 15% from baseline.

Objective #13: By December 31, 2019, the number of jail bed days for enrolled participants (at least non/consecutive three months) statistically significantly decreased compared to year prior to services.

Goal #5: Improve system efficiency through enhanced coordination and collaboration of social, public, and health service providers.

Objective #14: By December 31, 2019, the following eight diverse agencies will have current Partner Service Agreements to refer to the program and participate in case conferences as appropriate.

Objective #15: By December 31, 2019, at least 20 High Utiliizer Care Coordination Team meetings will be held with a variety of diverse partner agencies.

Objective #16: By December 31, 2019, 90% of agencies participating in care coordination and/or on the Advisory Committee will report improved collaboration via a Systems Assessment Survey during the 4th Quarter of program.

VII. Data Collection

The Kitsap Public Health District will provide a Quarterly Report to the Kitsap County Human Services Department by April 30, July 31, October 31, 2019 and January 31, 2020 each year funding is received under this grant detailing progress made on program outcomes during the quarter, what other funding sources have been investigated, and what the future potential for alternative funding is. In addition, outcomes identified in the Evaluation Plan for Mental Health, Chemical Dependency and Therapeutic Court Programs will be reported.

VIII. Billing and Payment

Payments to Kitsap Public Health District shall be requested using an invoice form, which is supplied by the County. Kitsap Public Health District invoices must be sent to the County by the fifteenth (15th) calendar day after the end of the month.

The Kitsap Public Health District is authorized to receive payments in accordance with the cost reimbursable budget included under this Agreement. The Kitsap Public Health District will comply with the following standards as applicable.

Reimbursement Request – Upon Completion of each month, the Kitsap Public Health District must provide to the County a written explanation of expenditures which are less than 90% of, or more than 115% of the year-to-date budgeted total.

All payments to be made by the County under this Agreement shall be made to:

Kitsap Public Health District 345 6th Street, Suite 300 Bremerton, WA 98337 The Agreement shall not exceed the total amount indicated on the cover sheet of this Agreement and any other modifications hereof.

IX. <u>Duration</u>

This agreement is in effect from January 1, 2019 - December 31, 2019.

X. Amendments

This agreement may only be modified by one or more written amendments duly approved and executed by both parties.

XI. Attachments

The parties acknowledge that the following attachments constitute a part of this agreement:

Attachment A: Budget

This Agreement shall be effective January 1, 2019.

DATED this day Decounted, 2018. DATED this 4 day January 2019.

CONTRACTOR KITSAP PUBLIC HEALTH DISTRICT

Keith Grellner Administrator

DATED this 4 day January 2019.

KITSAP COUNTY BOARD OF COMMISSIONERS

EDWARD E. WOLFE, Chair

CHARLOTTE GARRIDO, Commissioner

ROBERT GELDER, Commissioner

ATTEST:

Dana Daniels, Clerk of the Board

Approved as to form by the Prosecuting Attorney's Office

Page 7 of 7 ATTACHMENT A: BUDGET SUMMARY/ESTIMATED EXPENDITURES

		100000					Departm	-			
-7	Expendit	ure F	Plan: Jan	uai	ry 1, 2019	- D	ecember 3	1,	2019		
Agency Name:	gency Name: Kitsap Public Health District									-	
Project Name:	Kitsap Conne										
Contract:	\$380,105	Contract #		KC-010-19							
Contract		1/1/2019		4/1/2019		7/1/2019		10/1/2019			Total
Line item		3/31/2019		6/30/2019		9/30/2019		12/31/2019		No.	Budget
Personnel		\$ 53,382.00		\$ 53,382.00		\$ 53,382.00		\$ 53,382.00		\$	213,528.00
Manager and Staff	(Program Relate		0,883.25		40,883.25		40,883.25		40,883.25		163,533.00
Fringe Benefits		1	2,498.75		12,498.75		12,498.75	_	12,498.75	_	49,995.00
Supplies & Equipn	nent	\$	2,010.00	\$	2,010.00	\$	2,010.00	\$	2,010.00	\$	8,040.00
Equipment							-		3=1		
Office Supplies							•				2
Client Incidentals			2,010.00		2,010.00		2,010.00	_	2,010.00		8,040.00
Administration		\$ 3	8,433.50	\$	38,434.50	\$	38,434.50	\$	38,434.50	\$	153,737.00
Advertising/Marketing			-		-						-
Professional Services		2	7,918.50		27,918.50		27,918.50		27,918.50		111,674.00
Communication			695.00		695.00		695.00		695.00		2,780.00
Insurance/Bonds			2		72	_	20			_	-
Postage/Printing							(#1)		(-)	_	N#7
Training/Travel/Transportation			500.00		500.00		500.00		500.00	_	2,000.00
% Indirect			9,320.00		9,321.00		9,321.00		9,321.00	_	37,283.00
Other (Describe):					•		8		-		**
Other (Describe):				-	-		(4)		-		
Operations & Mai	ntenance	\$	1,200.00	\$	1,200.00	\$	1,200.00	\$	1,200.00	\$	4,800.00
Janitorial Service			-						(7)		
Maintenance Contr	acts		- 2		12				-		-
Maintenance of Existing Landscapi			-		(*		(=)		7		-
Repair of Equipment and Property			22 12	_	74		120		2		
Utilites			=				H1				National Control
Leases			1,200.00		1,200.00		1,200.00		1,200.00		4,800.00
Other (Describe):				-	:(=)		-		-		(
Other		\$	(F)	\$		\$		\$		\$	· ·
Debt Service							-	_	-		
Other (Describe):			2	_	14		*		-	_	**
Other (Describe):			-				7.		-		*
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