

# SPOKANE COLLABORATIVE

## June 2021



# People Acknowledgement

*Every community owes its existence and vitality to generations from around the world who contributed their hopes, dreams, and energy to making the history that led to this moment. Some were brought here against their will, some were drawn to leave their distant homes in hope of a better life, and some have lived on this land since time immemorial.*

*Truth and acknowledgment are critical to building mutual respect and connection across all barriers of heritage and difference, so we begin this meeting acknowledging that we are on the ancestral lands of the Spokane Tribe of Indians and other tribes who are connected through a shared history of trade, celebration, and resources.*

*We make this acknowledgment to pay respects to their elders, past and present, whose knowledge remains on the land. Please take a moment to consider the many legacies of violence, displacement, migration, and settlement that bring us together here today. And please join us in continuing to learn about such truths and actions we can take towards restorative justice.*

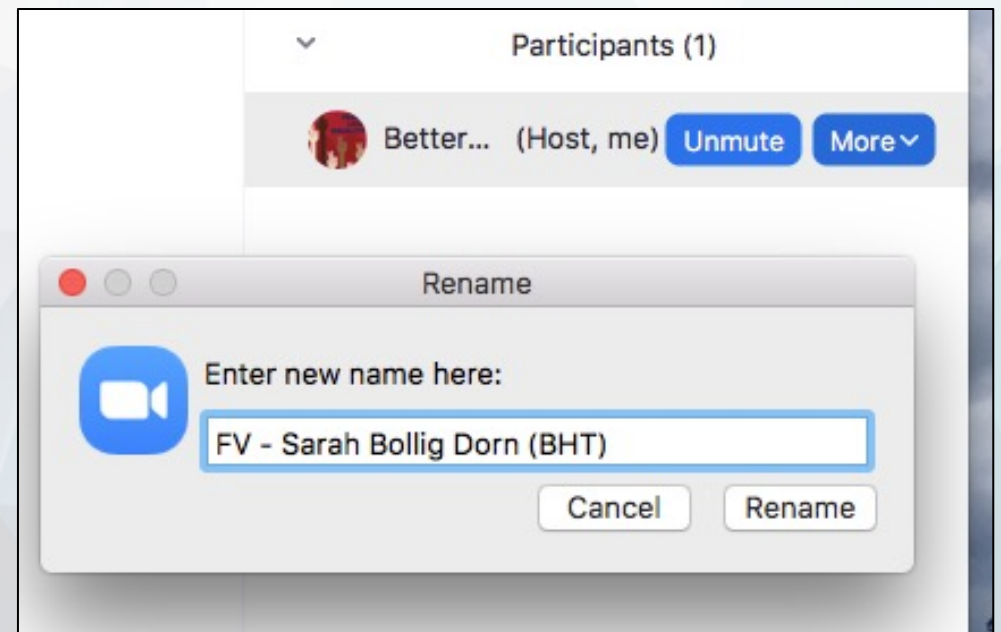
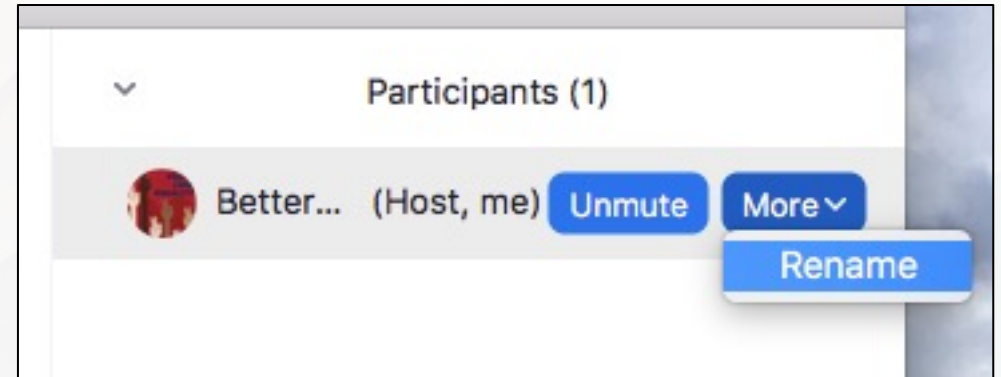
# Introductions & Reminders

## Update your name with workgroup & org name

- AH – Affordable Housing
- FV – Reducing Family Violence
- BH – Behavioral Health
- OH – Oral Health (*new!*)

## Examples:

- AH – Amber Johnson (SNAP)
- FV – Sara Rodgers (Spokane Regional Health Dist)
- OH – Reese Holford (BHT)



# Agenda

- Introductions & goals for the gathering
- LOI reminder
- Showcase: Crisis Response
- Partner shares
- BH resource guide review
- Equity workgroup work time

# Policy LOI Reminder

- Equity holdback bucket funds
  - \$65,000 allocated to fund policy related equity efforts
  - Collaborative Connections Team (CCT) will review applications at their monthly meeting
- [More information](#)
- [Application form](#)



# SPOKANE COLLABORATIVE MEMBER SHOWCASE





## “Coffee date?”

- See an opportunity to connect/partner with this organization?
- Request a “coffee date” with this organization by following the link in the chat!
- <https://www.surveymonkey.com/r/coffeedate>
- A BHT staff person will help make your connection!

# Partner Showcase

## **Crisis Response**

- Pioneer Human Services - Crisis Stabilization
- HCA & Frontier Behavioral Health - Trueblood



# Pioneer Human Services - Spokane

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Spokane Regional Stabilization Center



**P I O N E E R**

**HUMAN SERVICES**

**A CHANCE FOR CHANGE**



# Our Vision and Mission

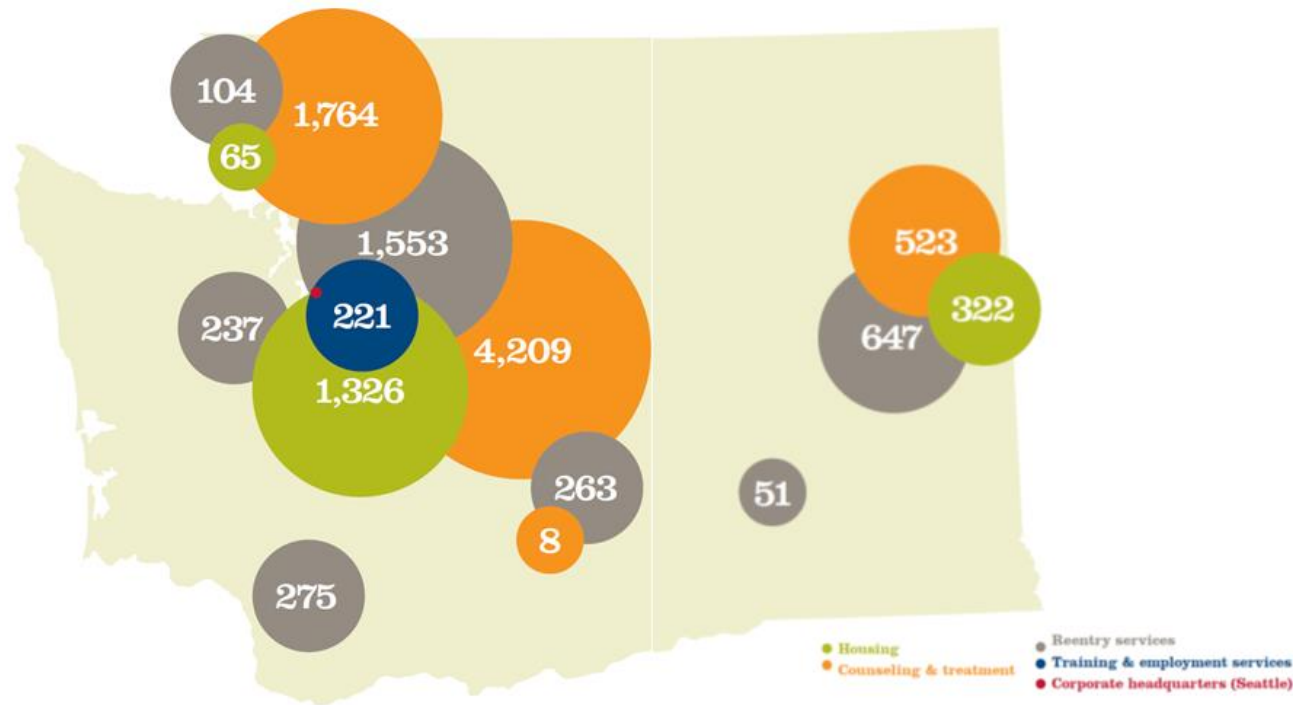
## Vision

Our vision is a world free from injustice, discrimination and mass incarceration, where everyone has the health, acceptance and opportunity to live their lives to their fullest potential.

## Mission

We are a social enterprise that partners with communities to transform society by honoring the humanity of people, reducing the impact of discriminatory mass incarceration and empowering people to live safe, healthy, productive lives through inspiration, affirmation and by overturning barriers.

# History



Founded in 1963

Started as a single half-way house in Seattle – today more than 50 programs across the state

Social enterprise manufacturing, construction, and food services

Employment training

Integrated behavioral health services

Supportive housing

Reentry programs

In Spokane, 41% of workforce have lived experience the justice system and mental health system



New Jail Diversion/  
Crisis Stabilization  
Center to Open Fall  
2021



Gardner Ave.

Cedar St.

# Crisis Situations





## Stabilization support and treatment alternative

**Welcoming environment (living room model), peer support, medical care, mental health and substance use treatment, detoxification, food and nutrition.**

**Designed with the voices of people with lived experience in jail and state hospitals.**

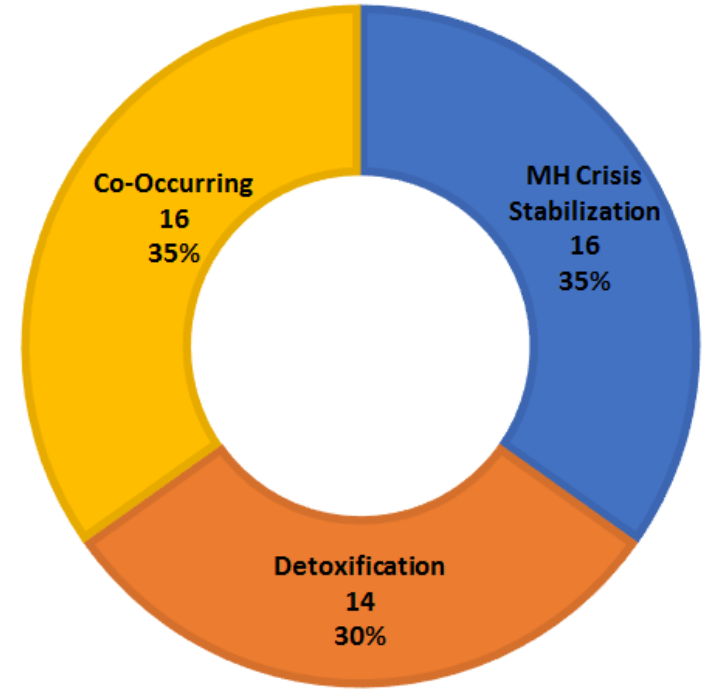
**Trauma informed and compassionate environment. Leadership and other staff with lived experience**







ULTI-PURPOSE



- 46 Beds total
- 16 Mental Health Stabilization (1-5 days)
- 14 Detoxification (1-5 days)
- 16 Residential and Co-Occurring Treatment (14-45 days)



# Aftercare and transition

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Warm hand-off referrals for treatment

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Housing options

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Peer support

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Transportation



# Location

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- Near Boone and Monroe in Spokane
- Close to outpatient services and medical care

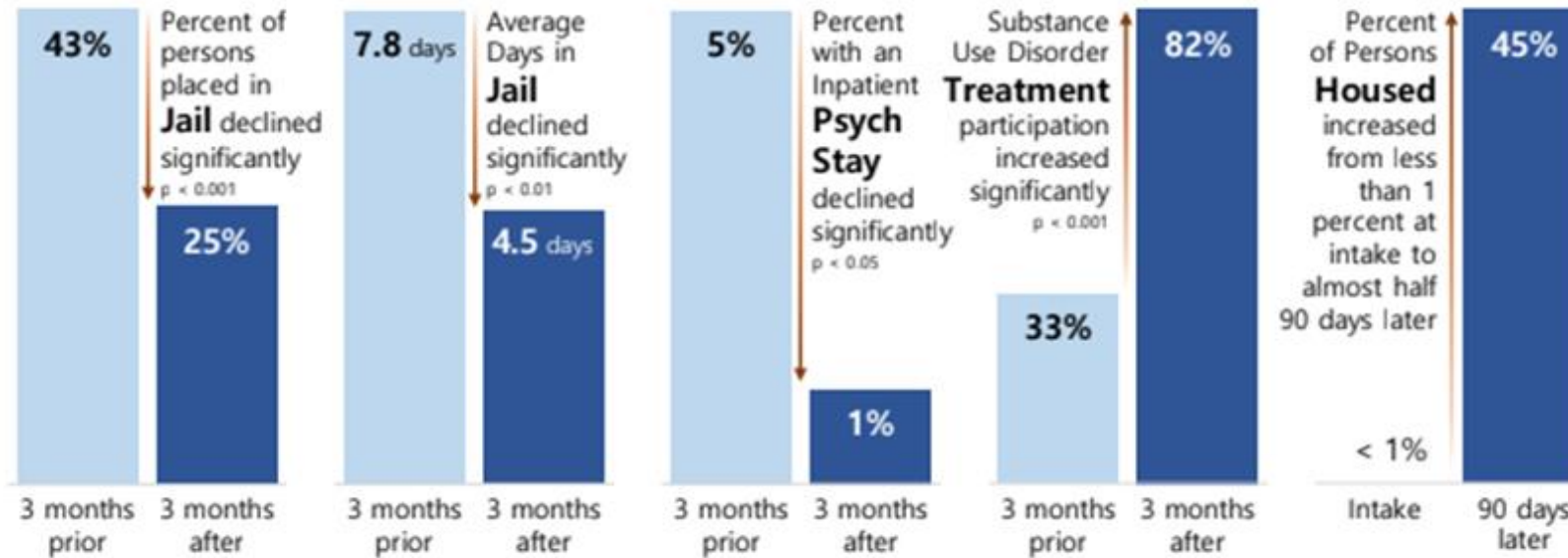
Cedar St.

Gardner Ave.



# Snohomish Diversion Center

FIGURE 1  
Pre-Post Comparisons for SDP Participants Enrolled through October 31, 2018





# Next Steps



ONGOING COMMUNITY  
ENGAGEMENT



TOURS AND FEEDBACK  
SESSIONS



ONGOING COMMUNICATION/  
IMPROVEMENT

# Partners and Collaborators

SPOKANE COUNTY	City of Spokane	Spokane Valley	SPOKANE REGIONAL LAW AND JUSTICE COUNCIL	IMPACTEED COMMUNITY MEMBERS	BETTER HEALTH TOGETHER
SPOKANE COUNTY BH- ASO	DSHS/HCA	TRIBAL PARTNERS	PROVIDENCE	MULTICARE	FRONTIER BEHAVIORAL HEALTH
TRIBAL PARTNERS	LAW ENFORCEMENT/FIRST RESPONDERS/911	MANAGED CARE ORGANIZATIONS (MCOS)	IMPACTED COMMUNITY MEMBERS	BH/MH PROVIDERS	DSHS/HCA
	BHT (ACH)	COURT SYSTEMS	DETENTION SERVICES	LOCAL, REGIONAL AND STATE PARTNERSHIP	



Questions?

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**P I O N E E R**

HUMAN SERVICES

A CHANCE FOR CHANGE

Jan Tokumoto  
Chief Operating  
Officer

**FRONTIER  
BEHAVIORAL HEALTH**

**TRUEBLOOD  
PROGRAMS**

# FRONTIER BEHAVIORAL HEALTH

## TRUEBLOOD GRANTS

- ▶ Co-responder teams funded by Seattle Foundation and Disability Rights of Washington
- ▶ Co-responder teams funded by the Washington Association of Sheriff and Police Chiefs (WASPC)
- ▶ Forensic Housing and Recovery through Peer Services (FHARPS)/Stabilization HARPS
- ▶ Forensic PATH
- ▶ Outpatient Competency Restoration Program (OCRCP)
- ▶ Mobile Crisis Response Unit

**Seattle Foundation:  
4 co-responder  
teams with SPD.**



**WASPC: 2 co-responder  
teams with SCSO; 2 co-  
responder teams with SPD**



## **CO-RESPONDER TEAMS**



**Mental Health Professionals co-respond with law enforcement officers to calls for service where an individual is experiencing a behavioral health crisis.**



# **FORENSIC HARPS** (FORENSIC HOUSING AND RECOVERY THROUGH PEER SERVICES)

## **Program Overview**

- ▶ Permanent Supportive Housing model
- ▶ \$1,200 subsidy per month for 6 months
- ▶ Client choice determine the appropriate housing option
- ▶ Coordination and collaboration with the landlord and involved community partners



## FORENSIC HARPS

### Eligibility:

- ▶ Ordered to outpatient competency restoration
- ▶ Frequent contact/intensive case management list
- ▶ Referred by Forensic Navigator for OCRP





Short-term voucher for hotel or motel for up to 14 days; 14-day extension allowed



Referral Source: Discharge planner at FBH's Stabilization Unit



Placement Agreement reviewed and agreed upon prior to setting up the hotel or motel



Regular contact by phone and/or face-to-face



Referred to Forensic HARPS for longer-term housing services

# STABILIZATION HARPS





## STABILIZATION HARPS

### Eligibility:

- ▶ At least one prior contact with the forensic mental health system in the past 24 months, or were brought to a Crisis Triage or Stabilization facility via arrest diversion;
  - ▶ Contact with the co-responder team
  - ▶ Admitted to ESH for competency evaluation/restoration
  - ▶ Cited and released by law enforcement with instruction to appear in court to determine need for competency evaluation
  - ▶ Symptoms of a MH or SUD and have been arrested frequently (high utilizer)
  - ▶ History of being a Trueblood Class Member



## STABILIZATION HARPS

### Eligibility:

- ▶ Need assistance accessing independent living options and would benefit from short-term housing assistance beyond the 14-day vouchers;
- ▶ Diagnosed with an acute behavioral health disorder and assessed to need housing support;
- ▶ Unstably housed;
- ▶ Currently not involved in OCRP;
- ▶ Does not meet Involuntary Treatment Act commitment criteria.



Engage with individuals who have frequent contact with the criminal justice and behavioral healthcare systems and connect them to services such as medical care, mental health treatment, housing and resources



FPATH will provide a warm handoff to community providers and remain engaged until the transition is secure

# FORENSIC PATH

(PROJECTS FOR ASSISTANCE IN TRANSITION FROM HOMELESSNESS)





## ELIGIBILITY:

- ▶ Individual utilizes the forensic mental health system often.
- ▶ Individual has prior referrals for competency evaluation or restoration, prior inpatient psychiatric treatment episodes, criminal justice involvement, and homelessness
- ▶ Services provided to individuals in the region

# FORENSIC PATH



## **ELIGIBILITY:**

Referred by court:  
misdemeanor or  
non-violent  
felony;

Forensic Navigator  
attached to the person

Person will be on a  
court order with  
conditions

## **CURRICULUM:**

Breaking Barriers CORE  
workbook

Competency  
restoration based on  
the individual's barriers  
to competency

# **OUTPATIENT COMPETENCY RESTORATION**



Receive referrals from Trueblood programs



Diversion from criminal justice system, EDs, inpatient psychiatric admission;



Individual is experiencing a behavioral health crisis or needs assistance with resources



Hours of operation 8 a.m. to 11 p.m. Monday through Friday; MCAT and Crisis Response Services cover hours when MCRU is not operational

# MOBILE CRISIS RESPONSE

- ▶ Phase IV grant for approximately \$20 million in total awards focused on providing housing and related residential supports for Trueblood Class Members
- ▶ FBH responded to the RFP. Proposal is for 10 housing units at Pioneer Pathways and 24 housing units with Catholic Charities Eastern Washington. 5-year housing resources.
- ▶ Notification of award will be in July. Funding begins in August 2021.

## **RFP - TRUEBLOOD HOUSING GRANT**



# QUESTIONS?

[jtokumoto@fbhwa.org](mailto:jtokumoto@fbhwa.org)

[slindgren@fbhwa.org](mailto:slindgren@fbhwa.org)

# Partner Showcase

**Spokane County LGBTQIA2s+ Life and Well-Being survey – SRHD & Spectrum**

**Community Investment Funds – Coordinated Care**

**Collaborative Care Lunch & Learn on June 24 – Providence**

**Others – open call!**



# Defining Engagement update

## **Goals & Opportunities:**

- Co-building expectations of each other as Collaborative partners & workgroup members.
- Define the direction of the Collaborative based on what is valuable and worth doing, according to member partners.

## **Next steps:**

- CCT leadership team identifying priorities based on defining engagement activity
- Creating a strategic plan for Collaborative and defining role of members (including support for talking about the Collaborative)
- Bring back to Collaborative in fall

# WORKGROUP WORK TIME



# BH Resource Guide Review

**With full Collaborative, take 2 minutes to review, check for your organization:**

- Organization is listed in the correct section(s)
- Contact number is correct
- Organization name is spelled correctly

**If anything is incorrect, post correct information in chat!**

# Workgroup Break-out

## **Housing workgroup**

- Outcomes matrix
- Storyboard review

## **Reducing Family Violence workgroup**

- Vote on SRHD fiscal manager designation & funds release

## **Behavioral Health workgroup**

- Continue planning for community focus groups on stigma & access

## **Oral Health workgroup**

- Next meeting: 1st Tues of July
- Update: Making corrections to the fliers and then will be printing 1000 of each. Working on translating the free broadband info into Marshallese so families can apply.