



Washington Association of
**SHERIFFS &
POLICE CHIEFS**

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Executive Director

September 1, 2022

Bernard Dean
Chief Clerk of the House
Deliver to: clerk.chief@leg.wa.gov

Sarah Bannister
Secretary of the Senate
Deliver to: senate.secretary@leg.wa.gov

RE: RCW 36.28A.440—Mental Health Field Response Grant Program

Chief Clerk Dean and Secretary Bannister:

Per RCW 36.28A.440, the Washington Association of Sheriffs and Police Chiefs is submitting its annual report on the Mental Health Field Response Teams Program. This report is submitted in compliance with RCW 43.01.036.

Please direct questions to Jamie Weimer at 360-486-2419 or jweimer@waspc.org.

Sincerely,

A handwritten signature in black ink that reads "Steven D. Strachan".

Steven D. Strachan
Executive Director

MENTAL HEALTH FIELD RESPONSE GRANT PROGRAM—2022 ANNUAL REPORT

Introduction

During the 2020-2021 session, the Washington Legislature continued its commitment to fund the Mental Health Field Response (MHFR) Teams Program and appropriated \$2 million for grants and operation of the program in the 2020 and 2021 Supplemental Operating Budgets. In addition to these funds, the Washington Health Care Authority (HCA) awarded the Washington Association of Sheriffs and Police Chiefs (WASPC) \$1 million to assist in implementation of elements of the *Trueblood Settlement Agreement*¹ for the period of July 1, 2021 to June 30, 2022.

WASPC operates the MHFR program as outlined in RCW 36.28A.440². The purpose of the program is to assist local law enforcement to establish and/or expand mental health field response capabilities, utilizing mental health professionals (MHPs) to professionally, humanely, and safely respond to crises involving persons with behavioral health issues with treatment, diversion, and to reduce incarceration.

With a 2021 change in statute³, WASPC is required to submit an annual report to the governor and appropriate committees of the legislature on the program by September 1 of each year the program is funded. WASPC's report includes information on the grant recipients, use of funds, participation of mental health professionals, and feedback from the grant recipients for the period of July 1, 2021 to June 30, 2022.

This report concludes with lessons learned and recommendations. While the Mental Health Field Response Program supports local communities to professionally, humanely, and safely respond to crises involving persons with behavioral health issues, there is room for improvement. MHFR grant recipients routinely report the need for more mental health providers, more housing resources, more treatment beds, and more resources to address basic needs of community members in crisis.

Grants to Use Sequential Intercept Model

WASPC has focused on programs where crisis intervention trained MHPs are immediately available to officers or to respond in person when called. Additionally, mental health field response programs are required to include staff and short-term services to reduce the likelihood the individual will have future criminal justice system involvement.

WASPC adopted the Sequential Intercept Model (SIM) Intercept 1, as outlined below, as part of the original grant requirements in 2018. The SIM is used by many stakeholders as a guide to behavioral health service system transformation, and more specifically as a tool to identify strategies to better respond to the needs of people with behavioral health conditions who come into contact with the criminal justice system. This model consists of five points of interception at which one might intervene to prevent vulnerable individuals from deeper involvement with the justice system.

¹ [Trueblood et al v. Washington State DSHS | DSHS](#)

² [RCW 36.28A.440: Mental health field response grant program. \(wa.gov\)](#)

³ [5092-S.SL.pdf \(wa.gov\)](#) (page 233)

Intercept 1: Law Enforcement—Pre-Arrest Diversion. The first point of intercept includes interactions with law enforcement personnel, who sometimes serve as first responders during mental health emergencies and can be key partners to behavioral health and emergency services personnel. Interventions at this intercept have in the past been largely focused on the education and training of police officers in their capacity as first responders. WASPC went beyond training and added the component of co-response with MHPs to Intercept 1 through this grant program.

Data Collection Tool

WASPC has contracted with the software company Julota in the amount of \$548,801.00 for the period of July 1, 2021 to June 30, 2023.

Julota agreed to license all WASPC MHFR program grantees' access to a web-based and mobile integrated software system for tracking services provided to persons needing assistance on a platform, which is called "Julota Impact." The Julota Impact system tracks outcomes and services associated with the co-responder/field response teams. Implementation of the Julota Impact system is supported by Trueblood expansion funds awarded by the Washington Health Care Authority (HCA).

Julota collaborated with representatives from the Spokane MHFR program to create a tailored experience that collects relevant participant demographics and encounter data for all MHFR programs. WASPC and Julota are in the final stages of fine-tuning reports through the Julota Impact system. WASPC looks forward to providing more detailed program information in the 2023 annual report.

Mental Health Field Response Grants: July 1, 2021 to June 30, 2022

The WASPC MHFR Grant Review Committee met in May and June 2021 and awarded 14 grants to the following agencies for the period of July 1, 2021 to June 30, 2022. Grant Review Committee Members included: Chief James Schrimpsheer (Algona Police Department), Chief Gregory Cobb (Union Gap Police Department), Chief Scott Bieber (Walla Walla Police Department), Sheriff Joe Nole (Jefferson County Sheriff's Office), Sheriff John Snaza (Thurston County Sheriff's Office), Siobhan Brow (Community Health Plan of Washington), Martiann Lewis (Salish BH-ASO), Kim Goodman (WASPC) and John McGrath (WASPC).

Grant Awards—Lead Agency	Award Amount	Amount Spent	Persons Contacted
Des Moines Police Department	\$314,561.10	\$292,573.17	161
Hoquiam Police Department	\$86,015.79	\$65,202.77	171
Jefferson County Sheriff's Office	\$116,817.60	\$77,978.81	95
Kirkland Police Department	\$75,500.00	\$47,103.92	249
Kitsap County Sheriff's Office	\$ 204,216.00	\$73,157.11	214
Longview Police Department	\$ 194,535.94	\$194,535.88	429
Marysville Police Department	\$ 262,500.00	\$96,588.71	216
Pierce County Sheriff's Office	\$487,900.00	\$341,365.06	1,494
Port Angeles Police Department	\$114,000.00	\$114,000.00	516
Poulsbo Police Department	\$ 82,640.00	\$75,782.41	278
Skagit County Sheriff's Office	\$174,000.00	\$145,000.00	322
Spokane County Sheriff's Office	\$1,783,533.00	\$1,550,657.70	4,413
Vancouver Police Department	\$636,986.40	\$148,694.51	181
Wenatchee Police Department	\$73,017.60	\$56,322.43	421
Total	\$4,606,223.43	\$3,278,962.48	9,160

Des Moines Police Department (Lead Agency)

Partnering with Algona Police Department, Auburn Police Department, Black Diamond Police Department, Federal Way Police Department, Kent Police Department, Pacific Police Department, Renton Police Department and Tukwila Police Department

The South King County Co-Responder Program is a partnership that includes the police departments of Algona, Auburn, Black Diamond, Des Moines, Federal Way, Kent, Pacific, Renton and Tukwila along with the King County Behavioral Health and Recovery Division (BHRD) and King County Behavioral Health agencies to provide a coordinated response to those in South King County experiencing mental health crisis and emergencies. This partnership between law enforcement and mental health professionals is the collaborative effort necessary to respond to community members in need. This shared approach improves engagement with people experiencing crises and reduces the rate in which individuals experiencing mental health crises are incarcerated.

The mental health co-responders engaged directly with officers from the participating law enforcement agencies and are employees of a licensed behavioral health agency. The co-responders respond from the Des Moines Police Department Sub-Station. This location borders three of the participating agency jurisdictions.

This program experienced a significant delay in startup due to the lack of available mental health staff. After four months, the positions were filled, and the teams were able to respond to calls for service.

Following a recent City Council decision allocating and allowing the use of local funds to support program efforts, the City of Des Moines decided not to reapply for MHFR funds from WASPC for the 2022 state fiscal year.

Total persons contacted from July 1, 2021 to June 30, 2022: 161

PROGRAM HIGHLIGHT

“BHRT was able to support a client for several months as the client made their way through homelessness and eventually was able to access Supportive Housing and moved into their own apartment unit in the month of [redacted]. The client utilized various shelter settings to include the "Tiny Homes" model before securing their own permanent home. The client was supported in strengthening their relationship with their outpatient mental health provider, [redacted], throughout their time with BHRT but due to intermittent crisis also needed to access temporary stabilization at a local behavioral health hospital in [redacted], [redacted], for a few days, before finally being housed. The client is working on improving strained familial relations as well as striving to re-enter the job market to further support their recovery journey.”

December 2021 Monthly Report

Hoquiam Police Department (Lead Agency)

Partnering with Aberdeen Police Department and Cosmopolis Police Department

The Hoquiam Police Department, along with the Aberdeen and Cosmopolis Police Departments, were awarded funding for a single full-time navigator position to incorporate a MHP into their mental health field response planning and services.

The Behavioral Health Navigator Program goals are to give patrol officers and officers in the city jail access to a police behavioral health navigator who can assist with connecting individuals with behavioral health needs (to include mental health and/or substance abuse) to available social services and resources.

The navigators perform outreach to individuals who are at risk of entering or who have entered the criminal justice system. Police navigators share information with patrol officers which may assist them in the field, as well as with officers providing custody and care of inmates in the Aberdeen City Jail.

Total persons contacted from July 1, 2021 to June 30, 2022: 171

PROGRAM HIGHLIGHT

“A successful intervention for the Behavioral Health Navigator (BHN) within The Harbor involves an individual exhibiting negative behaviors within the community related to aging, such as dementia or Alzheimer’s. Positive outcomes may not immediately be apparent... Additionally [the BHN is], assisting adult children living outside the community towards the various professionals necessary to develop a response to age related issues, such as bill paying, shopping, and/or doctor ... Moreover, directing adult children to the recourses might also involve finding professionals to help with decisions regarding POA [power of attorney] or guardianship resources, especially when entertaining the decision to have a parent with severe memory issues move into long-term memory care facility. Other resources related to short-term assistance while waiting on appointments such as, compiling the various in-take forms from the variety of organizations helps ensure steps in the process are not missed causing greater wait times before a resolution for the situation. The Navigator reaches out almost daily to do a wellness check before starting the day at the department to do a wellness check reminding the aging parent to “follow the notes” taped on the wall, especially the notes regarding behaviors resulting with LE engagement. Sometimes it’s successful, some days it’s not, but on the days it’s not, the Navigator is able to assist Animal Control by keeping the aging owner’s dog in the home because a trust has been developed and the individual allows the Navigator to help the dog when they are in the area jail awaiting the process to play out.”

Submitted August 2022

Jefferson County Sheriff's Office (Lead Agency)

Partnering with Port Townsend Police Department

The Jefferson County Sheriff's Office (JCSO) embedded one mental health professional (Navigator) into its patrol division. The JCSO Navigator works alongside the Port Townsend Police Department Navigator, fulfilling several roles that include, but are not limited to, in-person response to calls for service with deputies to address behavioral health related issues and assist with de-escalation; when appropriate, recommend diversion alternatives to arrest; provide appropriate referrals to community members seeking services; and conduct outreach to high-risk or vulnerable populations (i.e., individuals experiencing homelessness, severely and chronically mentally ill, and older adults).

Total persons contacted from July 1, 2021 to June 30, 2022: 95

PROGRAM HIGHLIGHT

“Navigator was called out for a welfare check on an individual. The individual was drunk, depressed and wanting to end his life by not eating and drinking himself to death. The EMT's were called in and the individual agreed to be transported to the hospital. The Navigator informed the REAL Team in Jefferson County about the individual so that when he was released there would be some follow up. As a result of the Navigator and the REAL Team working together, the individual eventually accepted treatment and is now participating in a treatment program. This individual would most likely be dead if the Navigator and community resources had not worked together to help this individual.”

January 2022 Monthly Report

Kirkland Police Department (Lead Agency)

Partnering with Shoreline Police Department, Kenmore Police Department, Lake Forest Park Police Department and Bothell Police Department

Kirkland Police Department, and the other agencies requested continued funding for their Response, Awareness, De-escalation, & Referral (RADAR) Navigator Program. The goals of RADAR are to:

- Develop and share individualized de-escalation strategies to reduce police use-of-force incidents during encounters with people with behavioral health conditions and developmental disabilities.
- Collaborate with a mental health professional (RADAR Navigator) to connect individuals with behavioral health conditions and developmental disabilities to ongoing services and treatment.
- Reduce repeat encounters with first responders and increase the effectiveness of police responses.
- Create cost effective community-policing strategies and promote increased collaboration between deputies, persons with behavioral health conditions and developmental disabilities, caregivers, and families.

The RADAR Navigator Program gives police vital assistance when they respond to calls that involve persons with behavioral health issues. A MHP works side-by-side with an officer, to provide immediate crisis intervention, more sophisticated diagnostic assessment and follow up. The Navigator MHP provides coordination for longer term community support. Families in crisis often do not know where to

go to get help for their loved ones. This model allows for the education of the family and individuals about services available so that they can better advocate on their behalf.

The MHP works with responding officers as a Crisis Intervention Team (CIT) to direct a person into services that deal with an emergent need, crisis assessment, de-escalation, service referrals and case management. The need for an MHP is not always clear until the team arrives on a scene. As outlined in the following example not all cases are clear cut mental health issues, but as a professional, the MHP can most always be of use.

Currently there are three RADAR Navigator MHPs. With the funds provided through this grant, the hours have increased from volunteer hours in some jurisdictions up to 60 hours per week covering all shifts for all five departments. MHFR grant funded navigators account for approximately 20 hours per week.

Total persons contacted from July 1, 2021 to June 30, 2022: 249

PROGRAM HIGHLIGHT

“...the Navigator and an officer responded to a 911 call from a group home about an individual who had walked away, stating that she was suicidal. The Navigator and the officer encountered her in the parking lot of a local cannabis store, agitated and stating that she didn’t have enough money to buy what she wanted. The Navigator was able to de-escalate her and avoid incident, and she eventually safely returned to her group home. There was no assigned community care system that could work with this community member when she left her group home and was agitated in the community.”

April 2022 Monthly Report

Kitsap County Sheriff’s Office (Lead Agency)

Partnering with Port Orchard Police Department and South Kitsap Fire

The Kitsap County Sheriff’s Office (KCSO) subcontracts with Kitsap Mental Health Services (KMHS) for a full time Designated Crisis Responder (DCR), sited at the office in Silverdale, a central point in the large geographic territory covered by the KCSO. The DCR spends their day paired with a deputy responding to calls for service involving individuals in crisis, following up on referrals or providing follow up services to individuals they’ve interacted with in the past. The DCR also provides guidance during calls for suicide, mental health, or behavioral health issues. The DCR is able to provide assessments including secure inpatient placement if an individual met the threshold for evaluation and treatment services. The DCR provides connections to the appropriate diversion alternative for persons not requiring detainment to a psychiatric facility or hospital, and able to be diverted from jail.

Short term alternatives include the Kitsap County Crisis Triage Center, Kitsap Recovery Center Detox, several shelters, facilitated outpatient treatment through walk-in access for their first visit to KMHS, calls to a person’s case manager, visits by a KMHS Peer Specialist, or information and referral for service information such as a food bank, legal assistance or the Housing Solutions Center.

Overall, the relationship with the patrol officers and the DCR has been positive, often with a favorable outcome. The program is able to de-escalate and assist individuals using a comprehensive approach. The DCR and the dedicated Crisis Intervention Deputy have exceeded KCSO’s expectations to get much needed help to those with very difficult cases. They have been able to respond to active scenes as well as follow up on individuals who need more long-term solutions in the community in which they live,

thereby reducing future crisis calls. Unfortunately, based on the calls for services there have been more individuals that needed assistance than KCSO had the ability to serve.

Total persons contacted from July 1, 2021 to June 30, 2022: 214

PROGRAM HIGHLIGHT

“The Deputy/DCR Team responded to the scene of an individual who was not in behavioral control and who was refusing to leave the scene. This is a known person to Mental Health and LE, someone who has a history of violence, substance use, mental health issues and incarcerations. There were at least five other deputies who responded. We were able to provide de-escalation which resulted in this person finally leaving the area without any force being used.”

August 2021 Monthly Report

Longview Police Department (Lead Agency)

Partnering with Kelso Police Department, Kalama Police Department, Woodland Police Department, Castle Rock Police Department, and Cowlitz County Sheriff’s Office

The Longview Police Department, with all the law enforcement agencies in Cowlitz County, along with Columbia Wellness was awarded funding to continue a coordinated Mental Health Field Response Team. The City of Longview dedicated funding through the city’s general fund budget to establish a contract with Columbia Wellness for two mental health professionals to respond with Longview Police Officers to calls where individuals are in crisis. With this grant funding, two additional mental health professionals worked as part of a countywide approach to provide immediate triage and access to cognitive and behavioral health resources.

Total persons contacted from July 1, 2021 to June 30, 2022: 429

PROGRAM HIGHLIGHT

“BHU responded with officers to an individual who was naked in a swimming pool that was not his own. The individual reported that he had just swam across the river and had taken unknown substances. The individual was able to provide identifying information but was otherwise unable to respond to questions and required redirection due to attempting to ingest non-food objects. BHU was able to keep the individual calm and engaged while awaiting an ambulance, and to verbally coax client into voluntarily going to the local emergency department.”

October 2021 Monthly Report

Marysville Police Department (Lead Agency)

Partnering with Arlington Police Department and Lake Stevens Police Department

The Marysville Police Department in partnership with the Arlington Police Department, Lake Stevens Police Department, and Compass Health implemented a coordinated Mental Health Field Response Team. The Mental Health Field Response Team was a new program dedicated to the expeditious delivery of treatment, and similar resources, to persons exhibiting signs and symptoms of mental and behavioral health concerns.

During its time in operation, the partners were able to develop relationships that allowed them to provide services that had not been previously available in their community to individuals in crisis.

The program was ultimately dissolved prior to the end of the grant period. It was decided that local efforts on behalf of the Marysville Police Department would continue by utilizing locally available funds.

Total persons contacted from July 1, 2021 to June 30, 2022: 216

PROGRAM HIGHLIGHT

“A youth was dropped off to the Lake Stevens Police Department by shelter staff as they were unable to stay at the facility for more than 24 hours. Youth had been at an inpatient facility and had been staying at shelters on the street since release. MHP spent a long time working with client to create a plan that client felt safe doing. Biological parent was contacted who reunited with youth.”

January 2022 Monthly Report

Pierce County Sheriff's Department (Lead Agency)

Partnering with Bonney Lake Police Department, Buckley Police Department, DuPont Police Department, Fife Police Department, Eatonville Police Department, Edgewood Police Department, Fircrest Police Department, Gig Harbor Police Department, Milton Police Department, Orting Police Department, Pierce Transit Police Department, Puyallup Police Department, Puyallup Tribal Police Department, Roy Police Department, Ruston Police Department, Steilacoom Police Department, Sumner Police Department, and University Place Police Department

The Pierce County Sheriff's Department (PCSD) program operates with co-responders who are embedded with the deputies who work in the precincts and detachments throughout Pierce County. PCSD has sought to improve mental health field response and diversion from incarceration through modified or expanded law enforcement practices in partnership with mental health professionals. This program is designed to be staffed with designated crisis responders and not case managers. During initial contact, the designated crisis responders assess the risk and determine the level of services that may be required to meet an individual's mental health or substance use needs.

The co-responders deployed in the field are able to assist law enforcement with call de-escalation and move the participant toward services rather than jail. The established network provides links to services such as medical treatment, behavioral mental health services, job and housing placement assistance and

other needs.

PCSD partners with MultiCare’s behavioral health department to provide mental health and substance use disorder outpatient services and psychiatric inpatient services for adolescents, adults, and geriatrics. MultiCare is also linked with community providers such as Metropolitan Development Center’s Detox Center, the Recovery Response Stabilization Center, Comprehensive Life Resources, Greater Lakes Mental Health, Sea Mar, Kawachee, and local evaluation and treatment facilities.

The primary goal of this program is to divert the individual from jail or an emergency room and intervene during the crisis and refer/coordinate to case management services of an individual’s choice based on their preference, location or funding.

Providers for services include but are not limited to: MultiCare’s behavioral health outpatient (mental health, substance use, and Program for Assertive Community Treatment (PACT), Greater Lakes Mental Health, Comprehensive Life resources (mental health and homeless services), Northwest Integrated Health (substance use disorders) and a few others. The case management services may include individual sessions, referral for psychiatric evaluations, assistance with housing and care coordination with managed care organizations.

Following a recent Pierce County Council decision allocating and allowing the use of local funds to support program efforts, the County decided not to reapply for MHFR funds from WASPC for the 2022 state fiscal year.

Total persons contacted from July 1, 2021 to June 30, 2022: 1,494

PROGRAM HIGHLIGHT

“I will refer to this client as RT. Deputy Bradley Crawford requested I assist with RT. I was a bit far because I was returning from a call out in Gig Harbor but Deputy Crawford was more than happy to wait for me on scene given RT’s extensive history within the not only the criminal justice system, but in mental health. RT has a significant mental health impairment, exacerbated by drug use, resulting in acute psychosis and on-going fire starting. RT has been arrested numerous times and detained in various mental health settings but they never seem to stick. This has often resulted in RT being released too soon and becoming ill yet again. When he is ill, he tends to start fires (which has resulted in him setting himself on fire in the past). The day I was requested, RT was delusional, non-sensical, and disorganized. He had even followed a woman home from a local gas station and started a small fire nearby. His presentation that day resulted in me filing for initial detention but I voiced concern that he would be released too soon because this is what has happened in the past. Deputy Crawford was aware of his history and spent the time in writing an amazing witness declaration and even testifying in the mental health court the next week. With this, this gave my petition more strength and a well-rounded perspective into RT’s criminal history that is not readily available in his medical records. Because of this, he has continued to get the treatment he has so desperately needed for many years. Additionally, when Deputy Crawford assisting RT into the ambulance, he ensured that his dignity stayed intact, making sure RT’s pants stayed up and that RT did not fall given his unsteady gait. I would like to recognize Deputy Crawford’s compassion, patience, and advocacy for this vulnerable person within our community.”

July 2021 Monthly Report

Port Angeles Police Department (Lead Agency)

Partnering with Sequim Police Department and Clallam County Sheriff's Office

The Port Angeles Police Department (PAPD) continued to partner with the Olympic Peninsula Community Clinic (OPCC) and designed a coordinated response program called REdisCOVERY to address the needs of persons with behavior health issues. PAPD encounters persons multiple times a day who need services that often includes both short and long-term mental health services. PAPD found that persons referred or newly introduced to services showed a much higher rate of follow through than those for whom services were simply recommended.

The REdisCOVERY program partnership between PAPD and OPCC started in 2017. The REdisCOVERY program's objective is to expand resources available to the program in the form of additional trained staff that coordinates outreach efforts between PAPD, OPCC, the Port Angeles Fire Department, the Clallam County Sheriff's Office and the Sequim Police Department.

Total persons contacted from July 1, 2021 to June 30, 2022: 516

PROGRAM HIGHLIGHT

"While doing co-response with PAPD, I met a woman who is living in her trailer at the shelter. She has been struggling with a lot of mental health frustration and anxiety. I met her because of several welfare calls and code enforcement issues with her trailer. After the first few interactions, I was able to help her over to the Housing Resource Center to set up an appointment for an intake. She also connected with other resources for getting support emotionally. Her interactions with law enforcement have been extensive and nothing has been showing improvement. Now she is able to reach out to her support system and find help. Therefore, a simple welfare check has turned into watching a participant engage and find help to empower her in her journey to find housing and stability.

May 2022 Monthly Report

Poulsbo PD (Lead Agency)

Partnering with Port Gamble S'Klallam Tribal Police Department

The Poulsbo Police Department has successfully managed a four-department co-response/field response program since 2018. For two years, the program paired police Navigators with police officers in Poulsbo, Bainbridge Island, Port Orchard and Bremerton. In December of 2020, County grant funding for a four-city Navigator program expired, leaving all of the participating cities responsible for their own Navigator programs. The City of Poulsbo committed \$50,000 in 2021 for a part-time Navigator position, and with the additional funding from this grant, Poulsbo was able to hire a full-time employee. The Poulsbo Navigator primarily assists Poulsbo police and residents of Poulsbo but is available to help other agencies and individuals when possible/appropriate.

Navigators respond with officers to calls involving individuals whose behavior is affected by mental illness, mental health and substance use disorders. More frequently, they take police referrals about these encounters after police contact and follow up with outreach—either independently or with an

officer. The aim of Navigator outreach is to connect people to needed services. Navigators help individuals understand treatment options, and for example, rules related to insurance. They make appointments, coordinate the work of care providers, and bring individuals experiencing crisis or at risk of crisis to Designated Crisis Responders' attention. Systems navigated include behavioral health (mental health, substance use), primary care, benefits, and housing.

The Poulsbo Police Department decided not to reapply for MHFR funds from WASPC for the 2022 state fiscal year.

Total persons contacted from July 1, 2021 to June 30, 2022: 278

PROGRAM HIGHLIGHT

"...the BHN responded with officers to a call of an individual who was manic. The individual's partner was very concerned as they had never seen them manic before. The individual was not meeting ITA criteria and had not done anything criminal. The BHM was able to talk with both parties providing them with alternative options. Both parties agreed to participate with a mental health counselor later that day. The BHN helped them navigate the appointment and what to expect. The partner later reached out to the BHN stating they both felt better and that things are now stable."

February 2022 Monthly Report

Skagit County Sheriff's Office (Lead Agency)

Partnering with Burlington Police Department and Sedro Woolley Police Department

The Skagit County Sheriff's Office requested funding to expand the Compass Health's Integrated Model of Police and Crisis Teams (IMPACT) program. IMPACT is structured as a true partnership between licensed mental health clinicians and local law enforcement. Each officer is partnered with a licensed mental health clinician, and they respond jointly. The funding provided by this program paid for two mental health clinicians to be assigned to the Sheriff's Office.

The five identified goals for the IMPACT Program include:

1. To provide early and voluntary behavioral health intervention and increase access to behavioral health services.
2. Reduce calls for service which require a level of expertise outside the scope of law enforcement.
3. De-escalation of community members experiencing a mental health crisis.
4. Decrease use of 911 system for non-emergent calls by high utilizers of services.
5. Improve community relationships by offering interventions to high-risk community members in need of additional supportive services.

The program was ultimately dissolved prior to the end of the grant period. It was decided that local efforts on behalf of the Skagit County Sheriff's Office would continue by utilizing locally available funds.

Total persons contacted from July 1, 2021 to June 30, 2022: 322

PROGRAM HIGHLIGHT

“IMPACT works as part of a Mobile Crisis Outreach Team (MCOT). A family who has a teenager that consistently runs away and threatens suicide contacted the law enforcement program manager directly to see if IMPACT could help. The family was interviewed about needs and referred to MCOT. MCOT met with the teen at his house and developed a plan to get him referred to the WISE program, an intensive outpatient program for teens. The family was relieved and thankful.”

August 2021 Monthly Report

Spokane County Sheriff’s Office (Lead Agency)

Partnering with Spokane Police Department and Spokane Valley Police Department

The goal of the joint Spokane County Sheriff and Spokane Police Department program was to create a patrol-based unit to address calls for service regarding individuals who are in a behavioral health crisis. A reduction in the number of service calls to high utilizers that required patrol response were identified, and their needs addressed. This increased their ability to provide services and resources to those experiencing behavioral health crises.

Each co-deployed team is an officer/deputy paired with a master’s level clinician. Each team is required to have a minimum of 30 crisis contacts each month. Co-deployed teams offer resources to individuals in crisis before they meet Involuntary Treatment Act (ITA) criteria and therefore reduce the rate of recidivism, emergency room visits and incarceration. Additionally, they build rapport, identify a baseline behavior and mitigate often high-risk situations due to the program’s interaction with those in crisis.

The unit has had a measurable impact on patrol and is an invaluable resource to local law enforcement agencies. Long term solutions have been identified for high utilizers and, while still a work in progress, many of the identified high utilizers have reduced their calls for service to patrol. The unit has been able to identify needs on patrol and implement changes. Local media has produced multiple stories on the unit to include the change in their responses due to COVID-19.

Total persons contacted from July 1, 2021 to June 30, 2022: 4,413

PROGRAM HIGHLIGHT

“In March, a female called requesting the BHU. She had heard about the unit from friends and the phone number from Compassionate Addiction Treatment. She was suffering from COD to include bipolar 1, anxiety, depression, and PTSD. She was a massive drug user and used Heroin, Meth, and “Blue Mexis” (Fentanyl). She had used Heroin recently right before BHU contacted her up because she was scared of withdrawals and also thought she may be arrested and going to jail. Her physical appearance was emaciated with her body covered in open sores. She wanted to get stable so she could work on getting on her feet for housing and work. Our initial conversation involved her being extremely manic and not making any sense. She was telling BHU weird stories about her kids. She believed her kids were involved in a sex trafficking ring throughout different apartment complexes—specifically her four-year-old was being held against his will in a shipping container and raped repeatedly.

This was not accurate. At the time she had a call for service two weeks prior screaming outside a women's shelter about her children being held hostage inside. She had no recollection of this.

Radio advised the female currently had warrants. Her warrants were to include: Theft 2, Theft 3-Shoplifting, and False Statements. Her warrants fell within the criteria to be diverted from our regional diversion center. BHU transported her to the facility where she was admitted.

On 5/19/22 BHU saw the female and barely recognized her at all because she had put on weight, was healthy and her open sores on her face had disappeared. She was thankful for having access to BHU, and how willing we were to work with her. She was also extremely thankful for getting her into treatment. She is working for a local shelter, and trying to move into the next step of actually having independent housing. She stated without the help of BHU she would not have been able to achieve her goals.”

May 2022 Monthly Report (1)

Vancouver Police Department (Lead Agency)

Partnering with U.S. Department of Veteran Affairs Police Department and Burlington Northern Santa Fe Railroad Police Department

The Vancouver Police Department, in coordination with Sea Mar Community Health Centers, had initially intended to add full-time dedicated personnel for field deployment, but experienced hiring difficulties during their last grant period due to a combination of factors. During this grant period, they determined that it would be more effective to add new positions to the baseline and deploy more experienced mental health professionals in the field as a rotating assignment, while new hires developed experience and familiarity with the system before being assigned to the field work rotation.

The Co-Responder Team is a collaborative partnership with local law enforcement within the Vancouver Police Department service area to foster proactive working relationships and enhance access to crisis services in Clark County. These program goals included supporting individuals involved in emergency 911 calls with accessing evidence based rapid response behavioral health supports (trauma informed care, risk assessment, safety planning, assisting with access to treatment/providers, provision of peer support services, etc.).

These services and collaborations further support a larger goal of diverting the people they serve from unnecessary involvement in the criminal justice system. Sea Mar and VPD utilizes a 10-15-minute Co-Responder response time goal as a measure of rapid response to in-progress 911 calls with police officers on scene. In addition to diverting the need for incarceration, Co-Responder has sought to provide individuals with the resources and behavioral health supports they need for stabilization to avoid hospitalization (and/or higher level of care involvement) and maintain a successful presence in the community.

Though the City applied and was awarded funds for the 2022 state fiscal year, they ultimately declined their award, citing a lack of staffing resources needed to comply with data collection and other requirements on the part of their community-based service provider.

Total persons contacted from July 1, 2021 to June 30, 2022: 181

PROGRAM HIGHLIGHT

“The Mental Health Co-Responder Team (CRT) was recently called by law enforcement officers to the scene of a domestic violence call that had evolved into a mental health situation. After CRT mental health professional staff arrived, police were able to leave the scene. CRT staff engaged with the individual and were able to help her to calm down. While she declined to be referred for mental health services that night, she was able to safety plan, engage in conversation, and increase her ability to have health communication skills after interacting with CRT. CRT also referred her to the Adult Mobile Crisis program for follow up. The person of concern expressed she would call for crisis assistance if she needed it.

February 2022 Monthly Report

Wenatchee Police Department (Lead Agency)

Partnering with East Wenatchee Police Department, Chelan County Sheriff’s Office and Douglas County Sheriff’s Office

In 2015, Wenatchee Police Department (WPD) partnered with Catholic Family and Child Services, now known as Catholic Charities Serving Central Washington, to provide crisis response services to law enforcement. Catholic Charities remains the contract service provider for Crisis and Mental Health services for Chelan and Douglas Counties. The initial focus was on high volume contacts to divert them from being a draw on public safety and law enforcement and provide behavioral health services. The program grew from a single staff member from Catholic Charities who responded to requests from officers with WPD to a small staff of Designated Crisis Responders (DCRs) with Designated Mental Health Professionals (DMHPs) who respond to calls for service from WPD, the East Wenatchee Police Department, the Chelan County Sheriff’s Office, and the Douglas County Sheriff’s Office.

The Agencies work together closely and expanded coverage has become invaluable to the successful diversion of patients into services instead of involuntary commitment or arrest. Additionally, the rapid response to the field has delivered improved public and agency perception of mental health workers in this region.

The City of Wenatchee worked with Chelan County to transfer responsibility for this site’s services to the Chelan County Sheriff’s Office for state fiscal year 2022 with the intent of further expanding services to more areas in rural Central Washington

Total persons contacted from July 1, 2021 to June 30, 2022: 421

PROGRAM HIGHLIGHT

“A client, her boyfriend and her dogs were traveling from Seattle back to North Dakota. The couple ran out of gas in a Walmart parking lot and they were out of money. The two argued and the male destroyed the client’s cell phone. Wenatchee Police Department responded and the male was arrested. Responding officers recognized the client had mental health issues and she was now alone and stuck in the Walmart lot. Officers called Diversion. Diversion met with the client and was able to get food and water to her and her pets. Diversion was able to locate a contact for the client at her home in North Dakota. Diversion coordinated with Housing Outreach to get gas vouchers for the client who was now able to head toward home.”

April 2022 Monthly Report (1)

Mental Health Field Response Team Grants: July 1, 2022 to June 30, 2023

The WASPC Mental Health Field Response Grant Review Committee met in May and June 2022 and awarded nine grants to the following agencies for the period of July 1, 2022 to June 30, 2023. Grant Review Committee Memmbers included: Chief James Schrimpsher (Algona Police Department), Chief Dan Yourkoski (Normandy Park Police Department), Sheriff Joe Nole (Jefferson County Sheriff’s Office), Sheriff John Snaza (Thurston County Sheriff’s Office), Siobhan Brow (Community Health Plan of Washington), Jolene Kron (Salish BH-ASO), Kim Goodman (WASPC), John McGrath (WASPC), Jamie Weimer (WASPC) and Steven Briggs (WASPC). WASPC looks forward to sharing more information about the efforts of our MHFR grantees in our 2023 Annual Report.

Grant Awards—Lead Agency	Award Amount	Amount Spent	Persons Contacted
Chelan County Sheriff’s Office	\$175,503.74		
Hoquiam Police Department	\$120,214.47*		
Jefferson County Sheriff’s Office	\$108,994.25		
Kirkland Police Department	\$79,687.00		
Kitsap County Sheriff’s Office	\$109,339.00*		
Longview Police Department	\$209,620.00		
Port Angeles Police Department	\$259,020.00		
Spokane County Sheriff’s Office	\$2,146,220.10		
Total	\$3,208,598.56		

*Final award amount pending.

With funds remaining for this award period, WASPC expects to award additional funds in the coming months.

Lessons Learned

WASPC continues to hear from its members that the biggest challenge they continue to face to implement co-responder programs is the ability to hire or maintain employment with a mental health professional or to contract with a service provider for the services of a mental health provider. This is especially apparent in the rural areas of our state. **There are not enough trained and experienced mental health professionals to meet the demands and needs of behavioral health providers in the state.** This will continue to be a challenge for the foreseeable future.

Additionally, we continue to hear that **infrastructure to meet the needs of MHFR and other similar programs is woefully inadequate.** It is increasingly difficult to connect participants to limited housing, treatment, and other resources.

Recommendations

WASPC recommends that the legislature consider taking action to improve and strengthen the Mental Health Field Response Teams Program.

- Expand state funds for the program to include, but not limited to, those areas outlined in the *Trueblood Settlement Agreement*. WASPC is committed to expansion of funds up to \$10 million.
- Provide limited Public Records Act exemptions for the data entered into WASPC's data collection tool. WASPC is committed to report aggregate data in yearly reports to the Legislature; however, there are some concerns regarding the additional burdens placed upon grant recipients and WASPC.
- Address lack of mental health professionals available to serve community members in crisis.
- Address lack of treatment availability for community members with behavioral health issues.
- Address lack of housing and resources for other basic needs for community members with behavioral health issues.

We look forward to working with the legislature and stakeholders to make necessary program modifications and expansions of the program.

Additional Information

Additional information concerning WASPC's Mental Health Field Response Grant Program can be found at <http://www.waspc.org/mental-health-field-response-teams-program>.