

Notes

ATTENDEES

Sheriff Joe Nole; Jolene Kron, SBH-ASO; Dunia Faulx, JHC, Population Health; Peggy Webster, Affordable Housing; Milena Stott, Fletcher Group; Greg Brotherton, County Commissioner; Jim Novelli, DBH; Patrick Johnson, NAMI; Chief Tim McKern – Quilcene Fire Dept; Chief Bret Black, EJFR; James Kennedy, Criminal Justice John Nowak/Lori Fleming – Jefferson County CHIP/BHC.



Not Present: Apple Martine, Director, Community Health;

Links: Meeting [Slides](#), [Video](#), Notes and the [Strategic Framework package](#). Please note that meeting materials for all the 2021 CHIP age-band groups can be accessed from the Behealthyjefferson.com >> [CHIP 2021 Update page](#), and directly connected to at the [Working Age](#) webpage. Check there if you unexpectedly encounter a broken link in any of these meeting summaries.

MEETING NOTES

The group viewed a [proposed/draft of two Working Age-Band Strategic Frameworks](#).

- The first Framework reviewed was created using Jolene Kron’s input around some steps we could initiate to meet the objective of deploying available services in an optimized, cooperative manner between medical, behavioral health, social housing, and employment to address our county residents’ needs. She focused on two strategies:
 - The first strategy was to identify funding sources that are butting up against and crossing over each other to generate clarity in one place around the fractured resource systems in our community. With that understanding we can collectively better leverage them to address behavioral health challenges, ensure those with those challenges have housing and employment, and create an opportunity for our clients to become better parents, reduce intergenerational trauma and longterm recidivism.
 - The second strategy was around working with BHC membership to develop and adopt shared definitions: BH, crisis services, law enforcement, navigator, case manager, care coordinator, etc. This will especially help where we’re looking at collective data – where it’s hard to legitimately compare data when our language meaning isn’t consistent.

Discussion: [Chief Black noted](#) from EJFRs perspective there is an unsustainable avenue currently seeing a significant increase that impacts the critical 911 response service: this is where an ambulance is taken out of its 911 mission and dedicated to transferring a patient from JHC to another specialized facility. The instances of inter-facility transports have seen a

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significant increase in those types of transfers to mental health facilities. The ambulance is used in the absence of medical or physical need, but because of the lack of availability of someone who is capable of monitoring the mental-health patient in crisis while en route. This can take a 911 unit out of the mix for more than a half a day. He also noted some states are experimenting with a mental health transport mechanism with people who aren't from the 911 system, but are trained as the type of resource needed for the client who is involved in this type of transport.

– [Lori noted](#) the OCH Behavioral Health report had the transport issue listed in their top priorities. Hence the activity could focus on providing Jefferson County's moment with OCH's leadership on this issue.

- [Jim noted](#) in Illinois, the state put a grant out to fund transport companies to train up people to handle this. Perhaps we could develop something like this regionally.

- [Greg noted](#) SUD folks often need transport that we can include as well.

- [Milena noted](#) for there are lessons to learn from other parts of the state. For instance, there are transport companies who serve other counties to transport folks for SUD or Crisis, etc – proper training is definitely a requirement.

- [Jolene noted](#) it's important to be aware it's not just emergency transport, but ongoing outpatient transport access needs to general care in our rural area might be technically covered under Medicaid, is a challenge to meet, especially as funding has definitely dropped off. That said, there is a significant number of block grants coming, but they are one-time grants – so we want to be mindful of how we will sustain any program we start.

Action: It was agreed Lori/John work to add this topic of “a specific gap” to this framework. Chief Black will bring data to the group around the volume and profile of who we want to find a solution for. (Says this currently is running at about a once-a-day clip.)

- [Peggy took the group through](#) the second WAG Framework ([see page 3-4 at this link](#)) which was created using her input focused on strategies toward the goal of improving the Social Determinants of Health (SDOH) factors in Jefferson County and highlights three objectives, with related strategies and activities within each objective, along with necessary inputs. The three objectives focus on transitional supportive housing, permanent supportive housing and addressing poverty as a factor in substance use.

Discussion: [John](#) started the discussion. [Greg noted](#) there is a project underway to create an in-town facility that has transitional supportive housing and other components he'd like to talk about with Peggy and her grant whisperers.

- **Action:** Peggy/Greg to meet and discuss project Greg mentioned before next WAG meeting.

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NEXT MEETING SET FOR 05/13/21 @ 4PM

WAG GROUP FOCUS AND PURPOSE

The Working Age Group meets the second Thursday of each month from 4-4:30pm from now through August 2021. Our next meeting is scheduled for Thursday, March 11th @ 4pm. Evites have been sent to meeting attendees to save the date in your calendar. As we get nearer to each month's meeting day, that month's evite will be updated with links to the coming meeting's slides and other meeting materials.

- **Monthly meetings** will be held for the group to:
 - Complete the specific goal identification for each of the 2 priorities
 - Present relevant research WAG members have undertaken
 - Develop the strategic framework of for each goal, including 1-2 objectives and 2-3 strategies, and < 15 activities under those strategies to support the goals.
- Our intention is to **generate an updated** 2021 Community Health Improvement Plan (CHIP) **document draft by August, 2021** with the content generated by each of the three Age-Band Teams.