

# SALISH BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION EXECUTIVE BOARD MEETING

Providing Behavioral Health Services in Clallam, Jefferson and Kitsap Counties

DATE: Friday, August 16, 2024

TIME: 9:00 AM - 11:00 AM

**LOCATION:** Cedar Room, 7 Cedars Hotel

270756 Hwy 101, Sequim, WA 98382

#### LINK TO JOIN BY COMPUTER OR PHONE APP:

\*\*Please use this link to download ZOOM to your computer or phone: https://zoom.us/support/download.\*\*

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Meeting ID: 892 8318 5750

#### **USE PHONE NUMBER and MEETING ID TO JOIN BY PHONE:**

Dial by your location: 1-253-215-8782

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#### AGENDA

Salish Behavioral Health Administrative Services Organization – Executive Board

- 1. Call To Order
- 2. Announcements/Introductions
- 3. Opportunity to Address the Board on Agenda Topics (limited to 3 minutes each)
- 4. Approval of Agenda
- 5. Approval of SBH-ASO Executive Board Minutes for June 21, 2024 (Attachment 5) [page 8]
- Action Items
  - a. Budget Approval for July 1, 2024 December 31, 2024 Adjustments [page 4]
- 7. Informational Items
  - a. Culturally and Linguistically Appropriate Services (CLAS) Training [page 4]
  - b. Jefferson and Clallam Re-entry Simulation [page 5]
  - c. Housing Program Review [page 6]
  - d. Olympic Community of Health Updates [page 7]

8. 9.	e. Behavioral Health Advisory Board (BHAB) Update [page 7]  f. Opioid Abatement Council (OAC) Update [page 7]  Opportunity for Public Comment (limited to 3 minutes each)  Adjournment

#### **ACRONYMS**

ACH	Accountable Community of Health	ITA	Involuntary Treatment Act
АОТ	Assisted Outpatient Treatment	MAT	Medical Assisted Treatment
ASAM	American Society of Addiction Medicine	мсо	Managed Care Organization
вна	Behavioral Health Advocate; Behavioral Health Agency	мнвс	Mental Health Block Grant
внав	Behavioral Health Advisory Board	MOU	Memorandum of Understanding
BHASO	Behavioral Health Administrative Services Organization	осн	Olympic Community of Health
САР	Corrective Action Plan	оѕт	Opiate Substitution Treatment
смѕ	Center for Medicaid & Medicare Services (Federal)	ОТР	Opiate Treatment Program
СРС	Certified Peer Counselor	PACT	Program of Assertive Community Treatment
CRIS	Crisis Response Improvement Strategy (WA State Work Group)	PATH	Programs to Aid in the Transition from Homelessness
DBHR	Division of Behavioral Health & Recovery	PIHP	Prepaid Inpatient Health Plans
DCR	Designated Crisis Responder	P&P	Policies and Procedures
DCYF	Division of Children, Youth, & Families	QACC	Quality and Compliance Committee
DDA	Developmental Disabilities Administration	RCW	Revised Code Washington
DSHS	Department of Social and Health Services	R.E.A.L.	Recovery. Empowerment. Advocacy. Linkage.
E&T	Evaluation and Treatment Center (i.e., AUI, YIU)	RFP, RFQ	Request for Proposal, Request for Qualifications
EBP	Evidence Based Practice	SABG	Substance Abuse Block Grant
FYSPRT	Family, Youth, and System Partner Round Table	SRCL	Salish Regional Crisis Line
НСА	Health Care Authority	SUD	Substance Use Disorder
нсѕ	Home and Community Services	SYNC	Salish Youth Network Collaborative
HIPAA	Health Insurance Portability & Accountability Act	TEAMonitor	HCA Annual Monitoring of SBHASO
HRSA	Health and Rehabilitation Services Administration	им	Utilization Management
IMC	Integration of Medicaid Services	WAC	Washington Administrative Code
IMD	Institutes for the Mentally Diseased	WM	Withdrawal Management
IS	Information Services	WSH	Western State Hospital, Tacoma
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## SALISH BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION EXECUTIVE BOARD MEETING

Providing Behavioral Health Services in Clallam, Jefferson and Kitsap Counties

#### Friday, August 16, 2024

#### Action Items

#### A. <u>BUDGET APPROVAL FOR JULY 1, 2024 – DECEMBER 31, 2024</u> ADJUSTMENTS

Review of budget changes made in January and July contract amendments.

#### Informational Items

### A. <u>CULTURALLY AND LINGUISTICALLY APPROPRIATE SERVICES (CLAS)</u> TRAINGING

lleea Clauson, SBHASO Operations Manager, will facilitate a CLAS training of CLAS Domain Four: Engagement, Continuous Improvement, and Accountability, for the Board

Culturally and linguistically appropriate service (CLAS) Standards are intended to advance health equity, improve health, and help eliminate health care disparities by establishing a blueprint for health and health care organizations. The National CLAS standards were first developed by the Office of Health and Human Services (HHS) Office of Minority Health in 2000.

These 15 standards are broken down into 4 domains:

#### A. Principal Standard

- 1. Provide effective, equitable, understandable and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.
- B. Governance, Leadership, and Workforce
  - Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources.
  - 3. Recruit, promote, and support culturally and linguistically diverse governance, leadership, and workforce that are responsive to the population in the service area.
  - 4. Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.

#### C. Communication and Language Assistance

- 5. Offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them, to facilitate timely access to all healthcare services.
- 6. Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally, and in writing.
- 7. Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.
- 8. Provider easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.

#### D. Engagement, Continuous Improvement and Accountability

- Establish culturally and linguistically appropriate goals, policies, and management accountability, and infuse them throughout the organization's planning and operations.
- 10. Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into measurement and continuous quality improvement.
- 11. Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes and to inform service delivery.
- 12. Conduct regular assessments of community health assets and needs and use the results to plan and implement services that respond to the cultural and linguistic diversity of populations in the service area.
- 13. Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.
- 14. Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identify, prevent, and resolve conflicts or complaints.
- 15. Communicate the organization's progress in implementing and sustaining CLAS to all stakeholders, constituents, and the general public.

#### B. <u>JEFFERSON AND CLALLAM RE-ENTRY SIMULATION</u>

Salish BHASO, in partnership with Kitsap Strong and Up from Slavery, will be hosting a Reentry Simulation tentatively on November 8th. This event will spotlight the unique challenges faced by individuals reentering the community after incarceration and aims to drive systemic change through an immersive experience.

The simulation will provide participants with a firsthand perspective of the barriers and difficulties faced by those transitioning from incarceration back into their communities. By "walking in the shoes" of returning citizens, attendees will gain invaluable insights into the obstacles they encounter and the need for resilient, supportive resources.

This event is designed to inspire and inform both formal and informal leaders in Clallam and Jefferson Counties. The simulation aims to highlight the importance of a trauma-informed approach and effective planning in efforts to reduce recidivism and support successful reentry. Participation in the simulation will contribute to creating a

more supportive and understanding environment for those navigating reentry.

Board members are invited to assist in outreach and enrollment efforts within their communities. Location and registration information will be shared with the Board as soon as it is available.

#### C. HOUSING PROGRAM DATA

The Salish BHASO Housing Program provides housing supports and subsidies for the behavioral health population. The program consists of 3 components: Housing and Recovery through Peer Supports (HARPS) Services, HARPS Subsidies, and Community Behavioral Health Rental Assistance (CBRA). Washington State Health Care Authority provides funding for HARPS services and subsidies as well as Governors Funding for individuals leaving state facilities. Washington Department of Commerce provides funding for CBRA. Combined funding for the housing program is approximately \$1.6 million per year.

Staff will share SBHASO Housing Program data for FY2023 and FY2024.

#### FY2023 (July 1, 2022 – June 30, 2023)

Unduplicated individuals who received peer support from the HARPS Service Team

Kitsap Mental Health Services 120 Total
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Unduplicated individuals who received SBHASO Housing Program subsidies

Regional Total: 451

Kitsap Community Resources	347 Total
HARPS	320
CBRA	35
Olympic Community Action Programs	39 Total
HARPS	25
CBRA	14
Serenity House of Clallam County	65 Total
HARPS	50
CBRA	30

#### FY2024 (July 1, 2023 – June 30, 2024)

Unduplicated individuals who received peer support from the HARPS Service Team

Health Services 92 Total	Kitsap Mental Health Service
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Unduplicated individuals who received SBHASO Housing Program subsidies

Regional Total: 502

Kitsap Community Resources	391 Total
HARPS	343
CBRA	39
Governor's Fund	11
Olympic Community Action Programs	40 Total
HARPS	31
CBRA	8
Governor's Fund	4
Serenity House of Clallam County	71 Total
HARPS	49
CBRA	41
Governor's Fund	1

#### D. OLYMPIC COMMUNITY OF HEALTH UPDATES

Olympic Community of Health update.

#### E. BEHAVIORAL HEALTH ADVISORY BOARD (BHAB) UPDATES

Jon Stroup, current Board Chair, has resigned for personal reasons. We are sad to see him go. Jon has served this board in some capacity for many years. Jon's final Advisory Board meeting will be September 13, 2024.

SBHASO continues recruitment for 1 seat in Callam and 1 Tribal representative. We will also start recruitment to fill the opening in Kitsap.

Current Board members have expressed interest in increasing engagement in SBHASO supported community events.

#### F. OPIOID ABATEMENT COUNCIL UPDATE

Staff is continuing work to develop tracking mechanisms for this funding. We have received notice of payment for this year's distributor payment. Once the deposit is received, we will complete disbursement to Jefferson and Clallam for all funds received to date.

Jansen/J&J final settlement agreement received July 30, 2024. We have not received a table of expected payment for this settlement. The methodology mirrors previous settlements.

### MINUTES OF THE SALISH BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION EXECUTIVE BOARD

Friday, June 21, 2024 9:00 a.m. - 11:00 a.m. Hybrid Meeting Cedar Room, 7 Cedars Hotel 270756 Hwy 101, Sequim, WA 98382

CALL TO ORDER - Commissioner Mark Ozias called the meeting to order at 9:00 a.m.

**INTRODUCTIONS** – Self introductions were conducted.

**ANNOUNCEMENTS - None.** 

OPPORTUNITY FOR PUBLIC TO ADDRESS THE BOARD ON AGENDA TOPICS - None.

APPROVAL of AGENDA -

MOTION: Commissioner Rolfes moved to approve the agenda as presented. Commissioner Eisenhour seconded the motion. <u>Motion carried unanimously.</u>

#### **APPROVAL of MINUTES -**

MOTION: Commissioner Eisenhour moved to approve the meeting notes as submitted for the April 19, 2024 meeting. Theresa Lehmann seconded the motion. <u>Motion carried</u> unanimously.

#### **ACTION ITEMS**

#### > APPROVAL OF AMENDED ADVISORY BOARD BY-LAWS

Staff is seeking the Executive Board's approval of the attached amended Advisory Board By-Laws. The Advisory Board reviewed the existing By-laws in full at the May 1, 2024, meeting and proposed the following revisions:

Section 3.b. "Representation"

- Replace "consumers or parents or legal guardians" with "individuals or chosen family".

Section 5, "Attendance"

- Add "Meetings are held in a hybrid format. Members are encouraged to attend meetings in person."

Sections 6.c, "Notice" and Section 12, "Staffing"

- Replace "The Kitsap County Human Services Department" with "Salish Behavioral Health Administrative Services Organization

Section 6.e "Meeting Location

- Add "All meetings are held in a hybrid format, with the option to attend remotely via Zoom or by phone."

Section 11, "Compensation"

- Replace "Director of the Kitsap County Human Services Department" with "Salish Behavioral Health Administrative Services Organization Administrator"

With Executive Board approval these changes will be effective immediately.

MOTION: Theresa Lehmann approved the amended Advisory Board By-Laws as presented. Commissioner Rolfes seconded the motion. <u>Motion carried unanimously.</u>

#### > 2024 POLICY AND PROCEDURE UPDATES

Staff is seeking the Executive Board's approval of the revised Policies and Procedures. HCA/BHASO Contract changes and overall SBH-ASO growth and process improvements necessitated Policy and Procedure updates. A spreadsheet has been included which summarizes the changes made to these Policies and Procedures. See attachments 6.b.1 (page 21), 6.b.2 (page 22), and supplemental packet 6.b.3.

The following policies have been revised and are included for the Board's approval:

AD101	Policy Development and Review
AD102	Provider Network Selection and Management
AD104	Credentialing and Recredentialing of Providers
AD105	Customer Service
CL209	SBH-ASO Recovery Navigator Program
CL210	SBH-ASO Behavioral Health Housing
CA403	Individual Rights
IS602	Data Integrity
UM803	Authorization for Payment of Psychiatric Inpatient Services
UM805	Crisis Stabilization Services in Crisis Stabilization or Triage Facility
PS908	Workstation and Portable Computer Use

MOTION: Heidi Eisenhour moved to approve the revised Policies and Procedures as presented. Commissioner Rolfes seconded the motion. Motion carried unanimously.

Policies and procedures are reviewed twice yearly to compare with current contracts and WACs. Policies with minor changes (grammar, punctuation, etc.) are marked as reviewed and are not presented to the Board. Policies and procedures with substantive changes are presented for approval by the Executive Board.

Question regarding the timeliness of contract and related communication with the Health Care Authority. Persistent delays and communication issues related to biannual HCA contracts present challenges, particularly for smaller subcontracted agencies related to cash flow.

The language in UM803 was updated for from Parent-initiated to Family-Initiated Treatment (FIT), allowing for a broader definition of family.

#### **INFORMATIONAL ITEMS**

#### > NALOXONE PROJECT UPDATES

Salish BHASO has been committed to providing support to individuals with opiate disorders. As an organization, we have been distributing naloxone to our communities over the past 5 years. This has been achieved through a partnership with Washington Department of Health and funding from our Health Care Authority Contract. Additional funding has been allocated to support continued expansion of naloxone access across the Salish region.

In 2023, SBHASO ordered ten naloxone cabinets to support ease of distribution across the three counties. To date, we have partnered with the following organizations and successfully mounted cabinets at their locations:

- Agape Unlimited, Bremerton
- BAART Programs, Bremerton
- Discovery Behavioral Healthcare, Port Townsend (2 cabinets)
- Hoh Tribe, Forks
- · Olympic Community Action Program, Port Townsend
- Olympic Personal Growth Center, Sequim
- Port Gamble S'Klallam Tribe, Kingston
- Quileute Tribe, La Push (2 cabinets)
- Reflections Counseling Services Group
- Salvation Army, Bremerton
- · West Sound Treatment Center, Port Orchard

In 2024, SBHASO ordered an additional 25 naloxone cabinets of various sizes. Staff continue to work with local public health departments and community partners to identify interested parties and determine additional locations to place cabinets.

SBHASO has distributed 1,348 naloxone kits to partners and community members from March through May.

Staff will provide an update and demonstration of the naloxone map.

Salish BHASO continues to meet with Kitsap Transit regarding installation of naloxone boxes at transit centers. A formal agreement has been drafted and is under review by Kitsap Transit's legal team. Cabinets have already been ordered to install once details are finalized.

Discussion around future outreach to farming communities within the region, possibly starting with Farmers Market managers, as well as the Washington State Ferries.

Question around goals for cabinet installation. Salish BHASO is open to partnering with any agency that expresses interest, to make naloxone as widely available across the region as possible.

Regarding areas of high need, South Kitsap has been identified as an area with high overdose response. Other potential partnerships include Kitsap Mental Health Services and community food pantries.

Salish BHASO continues to collaborate with the Department of Health to expand naloxone access in the region. This includes providing access to intramuscular naloxone.

SBHASO Staff provided a demonstration of the Naloxone Directory. Information about other naloxone cabinets and distribution points can be sent to Kelsey Clary at <a href="kclary@kitsap.gov">kclary@kitsap.gov</a>.

Plan to follow up with county commissioners about future placement of naloxone boxes at county buildings. Clallam County Health and Human Services currently has cabinets at each of their locations and is planning to begin including naloxone in the first aid kits in the courthouse.

Question about how the distribution cabinets are being utilized and the experiences of those agencies/property owners who currently have a cabinet mounted. Suggested consideration

of current experience to spread awareness and support destigmatization of naloxone distribution for those partners who may be more hesitant. SBHASO has a reporting mechanism that includes number of kits distributed, host challenges, cabinet damage, and additional support needed.

There have been several naloxone-related trainings provided in Clallam, Jefferson, and Kitsap County for both direct service staff and the community.

#### SALISH BHASO HOUSING PROGRAM OVERVIEW

The Salish BHASO Housing Program provides housing supports and subsidies for the behavioral health population. The program consists of 3 components: Housing and Recovery through Peer Supports (HARPS) Services, HARPS Subsidies,

and Community Behavioral Health Rental Assistance (CBRA). Washington State Health Care Authority provides funding for HARPS services and subsidies as well as Governors Funding for individuals leaving state facilities. Washington Department of Commerce provides funding for CBRA. Combined funding for the housing program is approximately \$1.6 million per year.

These 3 components provide housing support services and subsidies to individuals who meet program criteria. The population served includes individuals with behavioral health needs, with priority given to individuals exiting treatment facilities.

The HARPS service team provides direct housing support services to individuals in Kitsap County. This program provides peer-based support to individuals with unmet housing needs across the spectrum. This could include being unhoused, at risk of being unhoused, or needing support to maintain housing. The goal of peer support is also intended to assist with reintegration back to community after inpatient or residential treatment. This service team in contracted through Kitsap Mental Health.

Housing subsidies provide direct payments to landlords to support housing placement and maintenance. HARPS subsidies are intended to be short term (up to 3 months) and can provide for a variety of housing cost including deposits, arrears, and utilities. CBRA is intended to be a permanent housing subsidy for individuals with the goal of filling the gap toward more standard housing programs like section 8. Subsidy funding is contracted through Coordinated Entry providers in all 3-counties. This structure is unique to Salish BHASO.

In order to receive state funds, recovery residences must be accredited by the Washington Alliance of Quality Recovery Residences (WAQRR). This is a new requirement as of 2023. Staff will share a list of certified recovery residences with the Board.

Salish BHASO has partnered with Coordinated Entry in each County to provide Housing Program subsidies. This includes Serenity House for Clallam County, Olympic Community Action Programs (OlyCAP) in Jefferson County, and Kitsap Community Resources (KCR) in Kitsap County. This is to ensure equity between substance use and mental health populations.

Question regarding stability of funding. Funding is considered stable. The Department of Health continues to request additional funds at the state level for the CBRA program. Housing continues to be an area of high need both in the region and statewide.

Plan for Salish BHASO Staff to share data around individuals served at the next Executive Board meeting.

#### FINANCIAL OVERVIEW

Salish BHASO had a meeting with HCA in May regarding the draft budget for July 1, 2024. The budget includes many continuing funding sources. New funding sources this cycle include funding to support Mental Health Sentencing Alternatives for individuals involved in the legal system. We will also receive another one-time allocation of funding for enhancement of crisis system coordination secondary to 988 to be expended by June of 2025. There is also additional funding to increase youth stabilization by adding team members to existing your crisis teams. The Peer Bridger program received additional funding for staffing costs as this program funding had been unchanged since program inception. The was also an increase in Trueblood crisis stabilization costs.

It is anticipated that SBHASO will partner with therapeutic courts and DOC to deploy Mental Health Sentencing Alternatives (MHSA) funding in the region.

SBHASO will provide an updated budget at the next Executive Board meeting.

One-time crisis enhancement funding included \$600,000 in 2023 and \$500,000 in 2024. SBHASO will use these funds to continue expanding crisis teams.

Question regarding use of one-time funds to support workforce development. SBHASO is utilizing some funding for hiring bonuses and retention incentives. The focus has been on retention incentives for existing programs.

HCA has also allocated funding to expand the youth mobile crisis outreach team. In conjunction with Medicaid funding, this would support adding three staff to existing teams. Additionally, funding allows for continued expansion of post-crisis stabilization services.

Salish BHASO is preparing for an on-site HCA fiscal audit to occur on July 22 and 23.

#### > BEHAVIORAL HEALTH ADVISORY BOARD (BHAB) UPDATE

Jon Stroup, Chair, will provide an update on behalf of the Advisory Board.

In May, the Advisory Board identified the following training priorities:

- 1. Behavioral Health System Changes
- 2. Behavioral Health Crisis Response for Law Enforcement and First Responders
- 3. Community-focused Behavioral Health Trainings
- 4. Trauma Sensitivity
- 5. Youth-focused trainings

Staff are engaged in identifying existing training resources.

Updates provided by Jolene on behalf of Jon Stroup and the Advisory Board. The Board continues to recruit for one open Clallam County seat and one Tribal Representative.

#### > OPIOID ABATEMENT COUNCIL DISCUSSION

Staff is continuing work to develop tracking mechanisms for this funding.

Recent activities related to funding includes the pharmacy settlement funding being released for those listed on the table below.

The initial round of pharmacy settlement payments were received March 15, 2024. SBHASO will be coordinating with each county on a spending plan for these funds.

Walmart Payment 1	\$1,166,276.77
Allergan Payment 1	\$133,111.47
Teva Payment 1	\$120,119.71
Walgreens Payment 1	\$171,481.84
Walgreens Payment 2	\$115,357.61
CVS Payment 1	\$148,229.07
Total Payments	\$1,854,576.47

Salish BHASO is currently working with partners to solidify funding plans.

Jefferson County recently hosted a retreat with their Behavioral Health Advisory Council and community stakeholders to discuss funding priorities and identify opportunities for use of opiate funding in their community.

Janssen/J&J/Kroger agreements are currently sitting with settlement entities to determine if they will sign on to the final agreement.

Washington State has been working on a dashboard to share opiate funding information and has included Opiate Abatement Councils in the feedback process.

One-time Janssen settlement funds in the amount of \$2.4 million has been received.

Salish BHASO is working with stakeholders to identify needs, including the Regional SUD Summit in April and a follow-up meeting in July.

Discussion around establishing an annual or biannual regional opioid settlement check-in to share strategies, feedback (what is working/not working), and see where priorities align. This would also provide the opportunity for the OAC to share information from the statewide workgroup and what other regions are doing with funding.

The statewide dashboard is still in process.

#### **PUBLIC COMMENT**

- Lori Fleming, Jefferson County Behavioral Health Consortium, shared appreciation for engagement in stigma-related community conversations in Jefferson County.
- Jenny Oppelt shared updates on opioid settlement fund usage in Clallam County. Funds
  are being used to expand services at the harm reduction health center. Clallam County is
  also considering using funds to provide wraparound services for folks exiting incarceration.

#### **GOOD OF THE ORDER**

Celeste Schoenthaler provided an Olympic Community of Health update. Current work
includes collaboration with HCA and DOH, as well as other funders to establish
community care hubs. Care hubs are a network of regional partners and community health
workers aimed at creating a coordinated and effective system for addressing social needs.

- Funding opportunities will be shared during the Summer, which include expanding capacity in the region and funding to support a community-based workforce.
- Believe in Recovery in Jefferson County is now fully licensed to provide a full spectrum of behavioral health services.
- Jamestown healing clinic is working with the Clallam County Sheriff's Department to support incarcerated individuals with medication-assisted treatment.
- HCA has recently been focused on community outreach around HB1515 network adequacy standards. They will be presenting at the SBHASO August Integrated Providers Meeting.

#### **ADJOURNMENT – Consensus for adjournment at 10:45 am**

#### **ATTENDANCE**

BOARD MEMBERS	STAFF	GUESTS
Commissioner Mark Ozias	Jolene Kron, SBHASO Administrator/Clinical Director	G'Nell Ashley, Reflections Counseling Services Group
Commissioner Heidi Eisenhour	Nicole Oberg, SBHASO Program Specialist	Jenny Oppelt, Clallam County Health & Human Services
Commissioner Christine Rolfes		Lori Fleming, Jefferson County Behavioral Health Consortium
Theresa Lehman, Tribal Representative		Conor Wilson, Kitsap Sun
Celeste Schoenthaler, OCH Executive Director		
Excused:		
None.		

NOTE: These meeting notes are not verbatim.