



## SALISH BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION

### ADVISORY BOARD MEETING

Providing Behavioral Health Services in  
Clallam, Jefferson and Kitsap Counties

**DATE:** Friday, November 1, 2024  
**TIME:** 10:00 AM – 12:00 PM  
**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>**.\*\*

Join Zoom Meeting: <https://us06web.zoom.us/j/88389419000>

Meeting ID: 883 8941 9000

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

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

Meeting ID: 883 8941 9000

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### **A G E N D A**

#### Salish Behavioral Health Administrative Services Organization – Advisory 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 Advisory Board Meeting Minutes for September 13, 2024 (Attachment 5) [page 5]
6. Informational Items
  - a. Annual Code of Conduct Training [page 3] (Attachment 6.a.1 [page 12] and 6.a.2 [page 15])
  - b. Salish BHASO Behavioral Health Advisory Board Orientation [page 3]
  - c. 2025 Advisory Board Priorities & Strategic Planning [page 3]
7. Opportunity for Public Comment (limited to 3 minutes each)
8. Adjournment

## ACRONYMS

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



## SALISH BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION ADVISORY BOARD MEETING

Providing Behavioral Health Services in  
Clallam, Jefferson and Kitsap Counties

**November 1, 2024**

### **Informational Items**

#### A. ANNUAL CODE OF CONDUCT TRAINING

The Behavioral Health Advisory Board is due for annual Code of Conduct training. Each BHAB member is asked to sign and return the agreement upon review of documents provided.

#### B. SALISH BHASO BEHAVIORAL HEALTH ADVISORY BOARD ORIENTATION

Salish BHASO Staff will facilitate an orientation to familiarize both new and existing members of the Behavioral Health Advisory Board with the history of the organization and essential aspects of the Advisory Board. The orientation will include review of the following topics:

- History of the Salish Behavioral Health Administrative Services Organization
- Advisory Board bylaws and the roles and responsibilities of board members
- Community outreach and engagement efforts
- Information on training opportunities for board members
- Guidelines for travel reimbursement related to board activities
- Current membership, vacancies, and recruitment efforts

#### C. 2025 ADVISORY BOARD PRIORITIES & STRATEGIC PLANNING

Opportunity for the Advisory Board to discuss and identify priorities for 2025. By reflecting on Advisory Board historical priorities, insights from the 2024 SUD Summit, and board-identified training needs, this strategic planning session will guide the Advisory Board in making recommendations to the Executive Board at the February 2024 combined meeting.

### Historical Board Priorities:

- Overarching Priorities:
  - Integrative Behavioral Health Continuum: Emphasizing peer-directed services as part of a comprehensive behavioral health model.
- Mental Health Priorities:
  - Housing support services and access to affordable housing
  - Childcare services
  - Children's intensive services (including inpatient care)
  - A full spectrum of intensive services (including peer respite services, stabilization, and inpatient services)
- SUD Priorities:
  - Housing support services and access to affordable housing
  - Childcare services
  - A full spectrum of intensive services (including withdrawal management, stabilization, and residential services)

### SUD Summit-Identified Gaps/Needs:

1. MAT Detox Locally, dual detox locally/more local detox beds
2. Transportation
3. Safe use sites/more harm reduction
4. Discrimination or stigma from providers/community partners
5. More funding for peers/direct service staff
6. Lack of youth in patient/services

### Training Priorities Identified in 2024:

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

**MINUTES OF THE  
SALISH BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION  
ADVISORY BOARD**

**Friday, September 13, 2024  
10:00 a.m. - 12:00 p.m.  
VIRTUAL ONLY**

**CALL TO ORDER** –Stormy Howell, SBHASO Behavioral Advisory Board Vice Chair called the meeting to order at 10:07 a.m.

**INTRODUCTIONS** – Self introductions were conducted around the room.

**ANNOUNCEMENTS** – None.

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

**APPROVAL of AGENDA** –

**MOTION:** Lori Fleming moved to approve the agenda as submitted. Sandy Goodwick seconded the motion. Motion carried unanimously.

**APPROVAL of MINUTES** –

**MOTION:** Lori Fleming moved to approve the meeting minutes as submitted for the July 12, 2024 meeting. Kathryn Harrer seconded the motion. Motion carried unanimously.

**ACTION ITEMS**

➤ **APPROVAL OF FEDERAL BLOCK GRANT PLANS**

Salish BHASO will present updated Block Grant plans for July 1, 2024 – June 30, 2025 and seeks the Board’s approval of these plans. Current plans align with the approved budget and allocations determined during the RFP review.

Mental Health Block Grant (MHBG)

MHBG plan provides funding for crisis stabilization, residential treatment, and outpatient treatment services. The plan also includes funding for supports including transportation, interpreter services, and training. The MHBG plan identifies an estimate of the number of people to be served in each category. SBH-ASO Administration allowance is also included. Allocations are in line with Advisory Board priorities. MHBG Co-Responder is a required category, and the allocation amount is pre-set by the Health Care Authority.

Substance Abuse Block Grant (SABG)

Funding is allocated for crisis services, which is categorized under “brief intervention” on this template. Brief intervention includes mobile crisis outreach services.

Funding has been allocated to support the distribution of naloxone across the region.

Interim services is a required category for all SABG Plans. This line item is limited as there has not historically been a need for interim services in the Salish region. Therapeutic Intervention Services for Children is also a required category and specifically intended for services to children in residential facilities serving Pregnant and Parenting Women (PPW).

Funding is also allocated to both sub-acute withdrawal management and Intensive Inpatient Residential Treatment which are line items under the “Out of Home Residential Services” category.

Under the “Recovery Supports” category, the following line items are allocated funding: Transportation for PPW, Transportation, and Childcare Services. Both Transportation for PPW and Childcare Services are required categories.

Under the “Other SABG activities” funding is allocated to for Interpreter Services and SBH-ASO Administrative allowance.

SABG Co-Responder is a required category, and the allocation amount is pre-set by the Health Care Authority

*Discussion around the scope and limitations of block grant funding. Funding is often braided with existing funding or other service line items to support target populations.*

*Discussion regarding specific block grant allocations, including childcare services, therapeutic services for youth, pregnant and parenting women (PPW), and other recovery supports.*

**MOTION: Lori Fleming moved to approve the Federal Block Grant Plans for July 1, 2024 – June 30, 2025 as presented. Sandy Goodwick seconded the motion. Motion carried unanimously.**

➤ **ADVISORY BOARD MEMBERSHIP REVIEW**

Appointment of Advisory Board Chair

Jon Stroup, current Board Chair, will be stepping down effective September 13, 2024. Staff requests nominees from the Advisory Board for Board Chair.

Open Board Appointments

The SBHASO Advisory Board Membership includes three representatives from each county and two Tribal Representatives. Open appointments include one seat for Clallam County, one seat for Kitsap County, and one Tribal Representative seat.

*Staff have received an application for the open Kitsap County seat.*

**MOTION: Lori Fleming moved to nominate the Stormy Howell as the Salish Behavioral Health Administrative Services Organization Behavioral Health Advisory Board Chair. Sandy Goodwick seconded the motion. Motion carried unanimously.**

**MOTION: Mary Beth Lagenaur moved to nominate Lori Fleming as the Salish Behavioral Health Administrative services Organization Behavioral Health Advisory Board Vice Chair. Kathryn Harrer seconded the motion. Motion carried unanimously.**

➤ **APPROVAL OF 2025 BEHAVIORAL HEALTH ADVISORY BOARD MEETING SCHEDULE**

Staff are proposing a change in the cadence of Advisory Board meetings from the first Friday of every other month to the third Friday to align with existing Executive Board meetings. 2025 meeting dates are as follows:

March 21, 2025  
 May 16, 2025  
 July 18, 2025  
 September 19, 2025

Staff are also proposing two meetings outside of the regular meeting cadence for joint strategic planning and priority setting with the Executive Board and Advisory Board.

February 21, 2025  
December 5, 2025

*Discussion at the November meeting will focus on providing an overview of previous Advisory Board priorities, followed by an open dialogue to identify future priorities in preparation for the combined meeting in February. (majority of meeting)*

*Staff noted that priorities have evolved over time due to changes in Executive Board and Advisory Board membership, as well as community needs. Recent expansion in Advisory Board membership, along with organizational changes, provides an ideal opportunity to realign goals and establish a clear path forward.*

**MOTION: Diane Pfeifle moved to approve the 2025 Behavioral Health Advisory Board meeting schedule as presented. Mary Beth Lagenaur seconded the motion. Motion carried unanimously.**

## INFORMATIONAL ITEMS

### ➤ **CULTURALLY AND LINGUISTICALLY APPROPRIATE SERVICES (CLAS) TRAINING**

Ileea 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

2. 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. Provide 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

9. 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.

*Discussion regarding translation services and the mechanisms available for individuals to notify SBHASO of any concerns related to culturally and/or linguistically appropriate care provided by SBHASO-contracted providers.*

#### ➤ **TRAINING AND CONFERENCE OPPORTUNITIES FOR BOARD MEMBERS**

SBHASO has funding to support training and conference attendance for Board Members. Upcoming conferences that may be of interest include:

**The COD and Treatment Conference** takes place on October 8 – 9, 2024 in Yakima. The conference brings together experts from Washington and nationwide to discuss innovative approaches for treating Co-occurring Disorders. More information about the conference can be found on the WA State COD and Treatment Conference website at <https://wacodtx.org/>

**The Washington Council for Behavioral Health's Annual Conference**, scheduled for June 11-13, 2025, in Kennewick, WA, will continue its focus on supporting recovery in the context of ongoing changes within the behavioral health landscape. Attendees can expect sessions on policy updates, innovative therapeutic interventions, and strategies for enhancing the behavioral health workforce, with an emphasis on addressing the unique challenges faced by providers in Washington State. <https://www.thewashingtoncouncil.org/>



**The National Crisis Continuum Conference (CrisisCon) 2025**, will focus on advancing crisis response systems across the United States. It will cover topics such as the latest in mobile crisis teams, crisis stabilization units, and the 988 suicide and crisis lifeline. This event is geared towards professionals seeking to enhance their understanding and effectiveness in crisis intervention and mental health crisis services.

<https://www.crisiscon.org/>

**NatCon25**, organized by the National Council for Mental Wellbeing, will take place from May 5 – 7, 2025, in Philadelphia, PA. This event will gather leaders in mental health, addiction treatment, and policy to explore the latest trends, research, and practices aimed at promoting mental wellbeing. The conference will feature sessions on integrated care, social determinants of mental health, and innovative community-based approaches.

<https://www.thenationalcouncil.org/event/>

**Peerpocalypse 2025**, taking place May 5 – 8, 2025 in Seaside, Oregon, will continue to emphasize the importance of peer support in the recovery journey for individuals with mental health and substance use challenges. The conference will include workshops, keynote speeches, and networking opportunities focused on peer-led initiatives, advocacy, and the evolving role of peer support workers in behavioral health systems.

<https://www.mhaoforegon.org/peerpocalypse>

Board Members that are interested in attending trainings or conferences can reach out to Nicole Oberg, Salish BHASO Program Specialist.

## ➤ **TRAINING UPDATES**

### Jefferson and Clallam Reentry Simulation

Salish BHASO, in partnership with Kitsap Strong, will be hosting a Reentry Simulation 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.

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

### Emotional CPR

Emotional CPR (eCPR) is a peer-developed and peer-led education program designed to teach people how to assist others through emotional crises by connecting, empowering, and revitalizing individuals in distress.

Salish BHASO plans to host a 3-hour virtual eCPR training to reach a broad community audience. After consulting with eCPR training staff and considering various formats, the 3-hour option was chosen for its flexibility to accommodate diverse schedules of potential participants. eCPR training is also available for specific populations including youth and law enforcement.

*The reentry simulation will be staffed by individuals with lived experience of incarceration. There are 75 participant registration slots available.*

➤ **NALOXONE DIRECTORY UPDATE**

The Salish BHASO Naloxone Directory has been updated to include cabinets provided by community partners. The directory can be accessed at <https://www.kitsap.gov/hs/Pages/SBHASO-Naloxone-Directory.aspx>. It is also accessible via this QR code:



➤ **OFFICE OF BEHAVIORAL HEALTH ADVOCACY (OBHA)**

The Office of Behavioral Health Advocacy hosts the Salish Region Behavioral Health Forum on the last Tuesday of each month from 3:00 pm – 5:00 pm. The forum provides a space to share behavioral health experiences, trends, concerns, and possible solutions. A flyer with Zoom information is attached.

*Staff suggested identifying a designated SBHASO Advisory Board representative to attend at monthly forum meetings.*

**PUBLIC COMMENT**

- None.

**GOOD OF THE ORDER**

- SBHASO Staff will reach out to coordinate an orientation for new Advisory Board members.

**ADJOURNMENT** – Consensus for adjournment at 11:56 a.m.

**ATTENDANCE**

BOARD MEMBERS	STAFF	GUESTS
<i>Present:</i>	Jolene Kron, SBHASO Administrator/Clinical Director	
Diane Pfeifle	Nicole Oberg, SBHASO Program Specialist	
Lt. Casey Jinks	Ileea Clauson, SBHASO Operations Manager	
Kathryn Harrer	Doug Washburn, Human Services Director	
Lori Fleming		

Mary Beth Lagenaur		
Sandy Goodwick		
Stormy Howell		
<b>Excused:</b>		
Helen Havens		
Jon Stroup		

**NOTE: These meeting notes are not verbatim.**



## SALISH BH-ASO POLICIES AND PROCEDURES

**Policy Name:** CODE OF CONDUCT

**Policy Number:** CP304

**Effective Date:** 1/1/2020

**Revision Dates:**

**Reviewed Date:** 3/22/2023

**Executive Board Approval Dates:** 1/15/2021

### PURPOSE

To outline the scope, responsibilities, operational guidelines, and activities employed by the Salish Behavioral Health Administrative Services Organization (SBH-ASO) to ensure maintenance of an environment that facilitates ethical decision making in accordance with federal and state laws and regulations.

### POLICY

The SBH-ASO is committed to ensuring that all staff and associates conduct their activities professionally, ethically, and in compliance with all applicable state and federal statutes, regulations, and guidelines applicable to Federal Health Care programs and with all SBH-ASO Policies and Procedures.

SBH-ASO establishes this Code of Conduct to ensure that the SBH-ASO community, which includes employees (paid and volunteer) and board members, will know and understand expectation of behavior.

This Code is not meant to answer every question that might arise in daily activities; however, it does provide guidelines, direction, and resources that can be used to respond to matters and circumstances in the course of SBH-ASO duties. No set of guidelines, including these, can ever substitute for the sound judgment, common sense, and personal integrity required to meet the challenges of the job.

All SBH-ASO employees (paid and volunteer) and board members are responsible for understanding and adhering to this Code of Conduct. Inherent in this Code are the following principles by which all employees (paid and volunteer) and board members, as applicable, will abide:

Principle 1 - Legal Compliance and Ethical Business Practices

- 1.1 Business conducted complies with all relevant local, state, and federal laws, rules, and ordinances.
- 1.2 Business practices are conducted truthfully, fairly, and without deception.
- 1.3 Facilities and resources are used solely for the benefit of the SBH-ASO.
- 1.4 The SBH-ASO does not discriminate. The SBH-ASO believes in the fair and equitable treatment of Individuals, providers, employees (paid and volunteer), and board members.
- 1.5 SBH-ASO employees (paid and volunteer) and board members conduct all activities in accordance with the highest ethical standards.
- 1.6 SBH-ASO cooperates with government inquiries and investigations as required by law.

#### Principle 2 – Confidentiality

- 2.1 Employees (paid and volunteer) and board members abide by the Health Insurance Portability and Accountability Act (HIPAA), applicable policies and procedures, and 42 CFR Part 2. The confidentiality of all medically and clinically sensitive and personal and proprietary information is protected.
- 2.2 Proprietary information is protected and only shared with employees (paid and volunteer) and board members having a need to know such information to perform their job responsibilities.

#### Principle 3 - Avoid Real and Apparent Conflicts of Interest

- 3.1 All SBH-ASO employees (paid and volunteer) and board members are obligated to avoid situations or conduct that could influence (or appear to influence) objective decisions in the performance of assigned duties and responsibilities—or that could raise questions as to the honesty and integrity of SBH-ASO or negatively impact its reputation.
- 3.2 Business transactions with vendors, contractors, and other third parties shall be transacted free from offers or solicitation of gifts and favors or other improper inducements in exchange for influence or assistance in a transaction.

#### Principle 4 - Protection of Assets

- 4.1 All SBH-ASO employees (paid and volunteer) and board members will strive to preserve and protect the assets of SBH-ASO by making prudent and effective use of the SBH-ASO's resources and properly and accurately reporting its financial condition.

### **PROCEDURE**

All employees (paid and volunteer) and board members are responsible to:

1. Know the existing laws, regulations, and ordinances relevant to the management of a multi-member government behavioral health system.

## Attachment 6.a.1

2. Conduct business in a professional manner that respects the rights and decisions of others, fosters cooperation and integration, respects diversity and is in the best interest of the SBH-ASO.
3. Professionally participate in the development, adoption, and adherence to relevant policies to be used in the management of the SBH-ASO.
4. Ensure the Individual's voice is heard and considered prior to making policy decisions.
5. Improve the public knowledge and perception of SBH-ASO and the SBH-ASO provider network.
6. This Code of Conduct Policy and Procedure, which clearly reflects the standards of conduct, will be reviewed on an annual basis and updated as necessary.
7. All SBH-ASO employees (paid and volunteer) and board members will review and attest to this Code of Conduct by signing an attestation annually.

**MONITORING**

1. Consequences for noncompliance by SBH-ASO employees (paid and volunteer) will rely on Kitsap County Personnel Policies and Procedures.
2. All parties are encouraged to suggest changes or additions to this Code. The Code augments, but does not limit, specific policies and procedures of the SBH-ASO.
3. Reports of any concerns may be made to a manager, supervisor, or to the Compliance Officer.
4. Managers and supervisors are further required to report allegations reported to them and to report any known or suspected violations of any laws, acts, statutes or regulations that they discover in the performance of their supervisory duties. Reports can be made to the Compliance Officer.
5. If you know of a violation but fail to report it, you could be considered a party to the violation.
6. Anyone who ever feels retaliated against for making a report should contact the Compliance Officer immediately.



## Salish Behavioral Health Administrative Services Organization Code of Conduct Attestation

Attestation/Affirmation for all Board Members and Employees (paid and volunteer):

I attest and affirm that I will strictly follow the policies and guidelines of the Code of Conduct of the Salish Behavioral Health Administrative Services Organization (SBH-ASO) as they apply to me. My observance of these policies and guidelines is a condition of my working with or participating in the SBH-ASO.

- I hereby acknowledge that I have received, on the date below, a copy of the SBH-ASO Code of Conduct Policy and Procedure CP304.
- I have read the document, understand its meaning, and agree to conduct myself in accordance with these policies and guidelines.
- I understand that violations of the Code of Conduct, or failure to take action mandated by this Code of Conduct are grounds for disciplinary action.

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Signature

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Print Name

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Date

Reviewed: 3/22/2023