

# MEETING SUMMARY

## CRISIS RESPONSE IMPROVEMENT STRATEGY (CRIS) STEERING COMMITTEE MEETING SUMMARY

Thursday, May 19, 2022; 3:30 pm to 5:30 pm  
Zoom

*Meeting Agenda, Slides and Recording are available on the CRIS webpage:*  
<https://www.hca.wa.gov/about-hca/behavioral-health-recovery/crisis-response-improvement-strategy-cris-committees>

---

### ATTENDEES

#### STEERING COMMITTEE MEMBERS

[Amber Leaders](#), Office of Governor Jay Inslee  
[Bipasha Mukherjee](#), CRIS and Steering Committee member representing lived experience  
[Senator Manka Dhingra](#), Washington State Senate  
[Michele Roberts](#), Washington State Department of Health (DOH)

#### STEERING COMMITTEE MEMBERS ABSENT

[Representative Tina Orwall](#), Washington State House  
[Keri Waterland](#), Washington State Health Care Authority (HCA)

#### AMERICAN SIGN LANGUAGE (ASL) INTERPRETERS

Amanda Wilkes  
Andrea Medlock

#### COMMITTEE STAFF

Betsy Jones, Health Management Associates  
Nicola Pinson, Health Management Associates  
Suzanne Rabideau, Health Management Associates  
Elizabeth Tenney, Health Management Associates  
Mark Snowden, Harborview Medical Center  
Jamie Strausz-Clark, Third Sector Intelligence (3Si)

### WELCOME, INTRODUCTIONS, AND TECHNOLOGY REVIEW

Jamie Strausz-Clark, 3Si, convened the meeting and reviewed use of Zoom features to ensure understanding among meeting participants regarding use of Zoom technology for the meeting and expectations for committee members and public observers. Jamie also introduced the American Sign Language Interpreters to the meeting and reviewed how to pin their window to the screen.

Jamie Strausz-Clark, 3Si, welcomed everyone to the meeting and thanked Steering Committee members and members of the public for attending. Steering Committee members introduced themselves to the public. Mark

Snowden, Harborview Medical Center, offered a land acknowledgement, recognizing that he is a guest on tribal lands and honoring tribal ancestors and leaders as stewards of these lands.

## **MEETING OBJECTIVES AND AGENDA**

Jamie reviewed the meeting agenda and objectives for each agenda item. This meeting of the Washington Crisis Response Improvement Strategy Steering Committee had six objectives:

1. Continue to build and sustain collaborative relationships with each other.
2. Discuss and affirm vision and guiding principles for crisis response system.
3. Provide updates on development of the Section 109 Technical and Operational Plan.
4. Provide updates relevant to the Steering Committee.
5. Confirm action items and next steps.
6. Hear public comment. Jamie provided an overview of the public comment process to occur at the end of the meeting. Public comments are also welcome in written form at any point throughout the process and may be submitted to [HCAprogram1477@hca.wa.gov](mailto:HCAprogram1477@hca.wa.gov).)

Jamie noted two voting members were absent today, so the Steering Committee would vote on the vision statement via email after the meeting instead of during the meeting so all voting members could take part in the vote.

## **PERSONAL STORY**

Steering Committee member Bipasha Mukherjee introduced Laura Van Tosh as the speaker to share her personal story and experience in the behavioral health crisis system. Laura shared her experience with homelessness and homeless shelters in Oregon and described a time when she was involuntarily committed inside of a psychiatric unit for 30 days. Laura highlighted that she later learned about the availability of peer specialists, although she did not meet one peer specialist during her entire 30-day stay. This would have made a huge difference in her care. Laura underscored that peer workers are a critical resource for the future of Washington's crisis response system. A recording of this story is available on the CRIS webpage as part of the May 19 Steering Committee meeting recording (<https://www.hca.wa.gov/about-hca/behavioral-health-recovery/crisis-response-improvement-strategy-cris-committees#members>).

Steering Committee members thanked Laura for sharing her experience and reiterated the importance of involving individuals with lived experience in this work.

## **DISCUSSION: VISION FOR CRISIS RESPONSE SYSTEM**

CRIS Committee member Kashi Arora (Seattle Children's Hospital) and Suzanne Rabideau (Health Management Associates) presented the draft vision and guiding principles for Washington's crisis response and suicide prevention system for the Steering Committee's review. The draft vision and guiding principles were developed by the Ad Hoc Workgroup on Vision through meetings held March-May 2022 with input from the CRIS Committee, Rural & Agricultural, Lived Experience, and Tribal subcommittees, as well as the Children and Youth Behavioral Health Workgroup. The Ad Hoc Workgroup on Vision incorporated input from each of these groups into the final draft for Steering Committee review at this meeting. A summary of all comments

received and how these comments were addressed was provided with meeting materials (See Comments on Draft Vision and Guiding Principles at <https://www.hca.wa.gov/assets/program/CRIS-steering-committee-draft-vision-statement-and-principles-comments-20220519.pdf>, and Revisions to Draft Vision and Guiding Principles at <https://www.hca.wa.gov/assets/program/CRIS-steering-committee-draft-vision-and-principles-revisions-20220519.pdf>).

The vision statement is:

- 988, Washington’s Crisis Response: building understanding, hope, and a path forward for those in need, where and when they need it.
- Guiding Principles – People in crisis:
  - Timely access to high-quality, coordinated care without barriers
  - A welcoming response that is healing, trauma-informed, provides hope, and ensures people are safe
  - Person and family centered care
  - Care that is responsive to age, culture, gender, sexual orientation, people with disabilities, geographic location, language, and other needs
- Guiding Principles – The Crisis System is intentionally:
  - Grounded in equity and anti-racism
  - Centered in and informed by lived experience
  - Coordinated and collaborative across system and community partners
  - Empowered by technology that is accessible by all
  - Financed sustainably and equitably
  - Operated in a manner that honors tribal government-to-government processes

Steering committee members thanked the Ad Hoc Workgroup on Vision for their hard work on the statement and guiding principles and shared feedback:

- The process for providing input was great and this version is much more positive, clear, and direct. Creating a vision statement is so important and this final product looks good and much better than the version presented at the CRIS Committee last week, which was a good initial draft.
- Once this language is approved, there are a lot of ways to creatively message this information and develop visuals. There should also be several different ways to message this as Washington has so many different cultures and populations that may respond to different visuals.
- Michele Roberts, DOH, shared that DOH is working with the HCA and their communications staff on the marketing, promotion, and communications plan for the 988 launch in July and thereafter. This vision statement will be helpful in that communications process.

Jamie explained the voting process for the vision statement and shared that Steering Committee members will vote to affirm the vision statement and guiding principles via email. The results will be posted to the CRIS website. She thanked the Ad Hoc Workgroup on Vision and all the presenters for their hard work.

## SECTION 109 TECH/OP PLAN UPDATE

Kelly McPherson (State Health Information Technology Coordinator, HCA) provided an update on HCA's work in developing the Technical and Operational Plan required by HB 1477. HCA has completed a Draft Technical and Operational Plan, shared with the Technology Subcommittee and the Steering Committee for comments in January. This Draft Plan is available on the CRIS webpage at

<https://www.hca.wa.gov/assets/program/draft-leg-report-988-operational-plan.pdf>

HCA is currently working to develop the Final Technical and Operational Plan (Tech/Op Plan). The Final Plan will be a plan for how to procure necessary technology solutions to enable the implementation of HB 1477 and the functional requirements needed for technology systems and platforms. HCA identified functional requirements based on a review of the legislation, review of key reports (e.g. Ballmer Report), and interviews with key system subject matter experts (NSPL call centers, BH-ASOs, Crisis Providers, and others). HCA is gathering information from multiple sources to inform the Tech/Op Plan, as well as seeking input from the Technology Subcommittee, CRIS Committee, and Steering Committee. Vendors were identified for information gathering if the vendor was identified in 2+ sources (i.e., Ballmer Report, NSPLs, RCLs, Crisis Providers/Responders, States), and the vendor provides functionality required in HB 1477. HCA is also engaging review of other states systems, including: Arizona, Colorado, Georgia, Indiana, Michigan, Oklahoma, Oregon. HCA reviewed topics discussed with the Technology Subcommittee to date, and planned for future meetings. Please see meeting materials for further detail regarding these activities, available on the CRIS webpage at: <https://www.hca.wa.gov/assets/program/cris-steering-committee-meeting-presentation-20220519.pdf>

HCA plans to follow up with Steering Committee members with a request for guidance on Global Positioning System vs. geo-location and in-state call routing and back up. HCA is requesting feedback on these topics by June 2<sup>nd</sup>, and Health Management Associates will forward these documents to the Steering Committee shortly.

Steering Committee member discussion:

- Recognize the work that HCA is doing to interview and range of vendors. What is the status of scheduling vendor demonstrations for the Technology Subcommittee?
  - Recognition that demonstrations are important to help Technology Subcommittee understand how these platforms operate and to visually experience.
  - Seeking to leverage the extensive community expertise in technology as state explore technology design and solutions.
  - HCA is working with HMA to ensure Technology Subcommittee members have access to vendor demonstrations. To avoid potential conflicts for a future RFP process, HCA staff cannot be involved in scheduling or participating in the demonstrations. HCA plans to go over this issue with the Technology Subcommittee at the next meeting.
  - Would like to explore whether and how the Technology Subcommittee could potentially be engaged in a future RFP process. Senator Dhingra supported this idea. Participation by external experts in the RFP process is permitted and has been helpful in the past.

- Individual Technology Subcommittee members may have received outreach from vendors. Would like to schedule vendor demonstration with a more coordinated approach.
- Technology to store Mental Health Advance Directives will be critical to the system. HCA is currently reaching out to other states to learn more about their MHAD systems.
- Adaptable systems are necessary to make sure Washington can get what it needs. The state needs a platform that can keep changing as its needs change. One key design element HCA is looking at is a modular design. As technology evolves, this design approach would allow HCA to remove a component and replace with a new and better component. This design is part of the reason that HCA is looking at many different technologies and state systems.

## UPDATES

Betsy Jones, Health Management Associates, shared updates from recent subcommittee meetings that occurred in April. A compilation of all subcommittee meeting summaries to date is included in the HB 1477 Subcommittee Report (May 2022), available on the CRIS webpage:

<https://www.hca.wa.gov/assets/program/cris-subcommittee-Report-20220501.pdf>.

Betsy reviewed the process to develop recommendations to promote equity in services for individuals in diverse circumstances, as required by HB 1477. In March, the CRIS Committee provided input on embedding equity into the drafted High Level Workplan. Between April and June, HMA/BHI project staff will seek similar input from all Subcommittees. This input will be synthesized into major categories of recommendations (e.g., implementation, policy, capacity building) for the CRIS and Steering Committees to review.

Senator Dhingra and Representative Orwall recently led a team of elected officials to visit Arizona to better understand their crisis system and best practices. Senator Dhingra shared that she and Representative Orwall are planning to do a similar trip to the three different NSPL call center regions in Washington. They hope to make sure all partners in each area are involved to ensure there is engagement at every level. Further detail on these tours is forthcoming.

## ACTION ITEMS AND NEXT STEPS

Next steps and action items for the meeting:

- HMA will email Steering Committee members to request affirmation of the vision statement and guiding principles.
- HMA will also send HCA's briefing document regarding GPS vs. geo-location and in-state call routing and back up to Steering Committee members. HCA is requesting feedback by June 2<sup>nd</sup>.
- Jamie Strausz-Clark will work on a process for voting in the absence of a Steering Committee member at a meeting so that this process can be added to the charter.

## PUBLIC COMMENT PERIOD

Jamie Strausz-Clark opened the public comment period: 10 people signed up for public comment, and 3 members of the public commented. Individuals were allowed two minutes to provide comment. For individuals

with additional comments or time needed, Jamie highlighted the opportunity to submit public comment via email to: [HCAprogram1477@hca.wa.gov](mailto:HCAprogram1477@hca.wa.gov).

**MEETING ADJOURNED**