



# COMMUNICATIONS, AWARENESS & ADVOCACY

- NAMI Ending the Silence Program Development
- Launching a Community Information Exchange (CIE): A Tool for Whole Person Care
- OneCall: A Single Portal for Diversion



National Alliance on Mental Illness



Presented by:

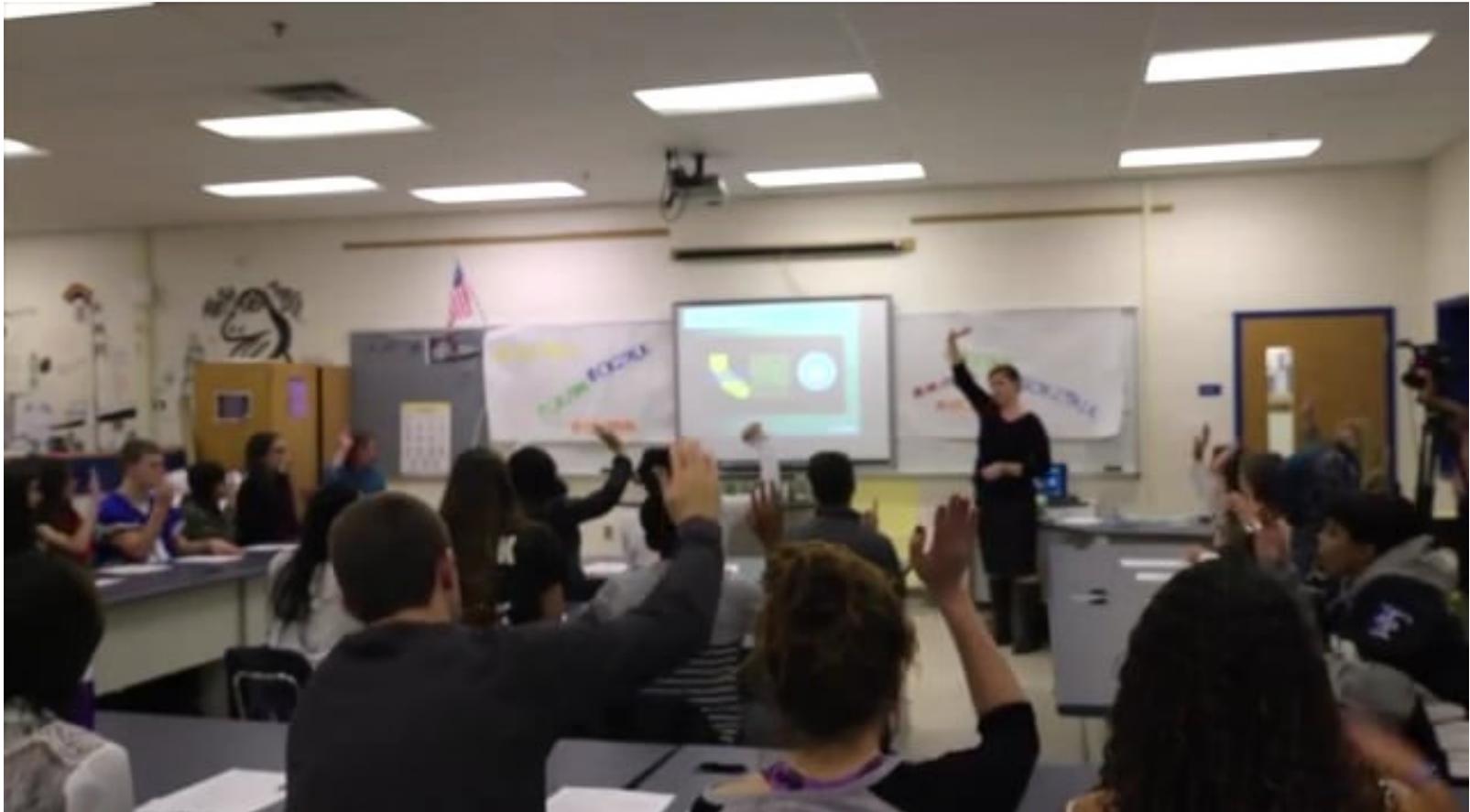
Deanna Roy – Education Assistant & Administrative Specialist

In Collaboration with:

Jenny Gruenberg – Youth Outreach Coordinator



# OVERVIEW OF CHALLENGE



# OVERVIEW OF CHALLENGE

Young Adult  
Presenter  
Age 18 -35  
Shares Their  
Recovery Story



Lead Presenter  
25-minute  
Educational  
PowerPoint

NAMI Ending the Silence  
FOR STUDENTS  
50-minute class period

NAMI Ending the Silence  
FOR STAFF  
1-hour staff meeting

NAMI Ending the Silence  
FOR FAMILIES  
1-hour after school

Evidence Based

# OVERVIEW OF CHALLENGE

- Utilization of Ending the Silence as a resource in schools, organizations, and workplaces.
- Identifying Ending the Silence presenters, specifically those between the ages of 18 and 35.

# PROGRESS TO DATE

- Hired a Youth Outreach Coordinator to oversee the Ending the Silence (ETS) program
- Met with school districts, organizations, and colleges/universities
- NAMI National ETS Young Adult Presenter social media recruitment campaign
- NAMI Washington offered 5 ETS trainings in 2019 and plans to offer 6 in 2020

# MOVING FORWARD

- Work with school districts to collaboratively integrate the Ending the Silence program as part of their mental health curricula.
- Partner with organizations that can help us identify stable young adult presenters.
- Create Ending the Silence Regional Workgroups

# VISION

- All schools in Washington state would utilize the NAMI Ending the Silence program.
- Eliminate stigma surrounding mental health/illness.

# HOW YOU CAN GET INVOLVED

1. I am interested in learning more about bringing Ending the Silence to a school, my community and/or place of work.
2. I want to host an Ending the Silence Presentation.
3. I would like to be trained as an Ending the Silence Lead Presenter.
4. I would like to be trained as an Ending the Silence Young Adult Presenter (age 18-35).
5. I know leaders in education or educational support organizations and I can help facilitate introductions.
6. I work in education or know someone who does. Please contact me.
7. I would like to attend the next conference call workgroup meeting on November 6, 2019 from 2:00-3:00pm.





# Launching a Community Information Exchange (CIE)

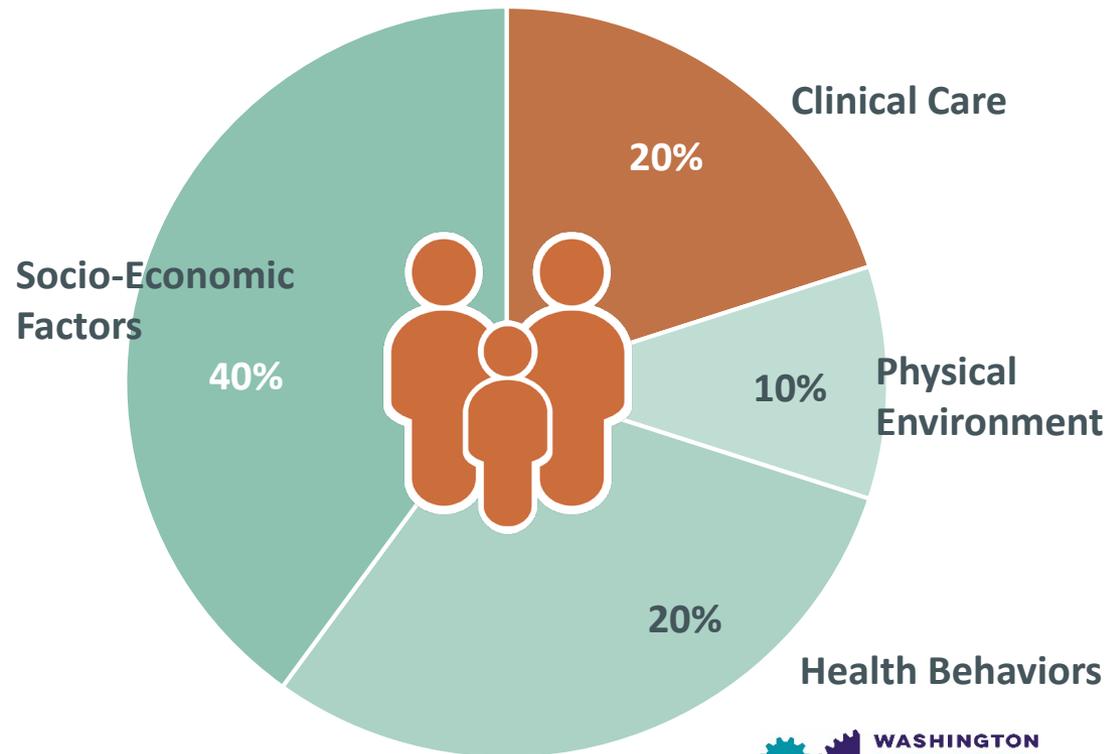
A Tool for Whole Person Care

Susan McLaughlin, Ph.D.  
HealthierHere

# OVERVIEW OF CHALLENGE

Clinical care represents only **1/5** of the factors that impact health outcomes.

*To improve the health of people in our community, we must effectively address the **social determinants of health.***



# OVERVIEW OF CHALLENGE

## Too Many Disparate Systems to Navigate



Education

Employment



Housing

Transportation



Emergency Healthcare



Food Access  
& Nutrition

Legal Services/  
Criminal Justice



Primary  
Medical Care



Paying for  
Medications



Senior or  
Disabled Care



Crisis Response



Substance  
Use Disorder  
Treatment



Behavioral  
Health



Specialty Care

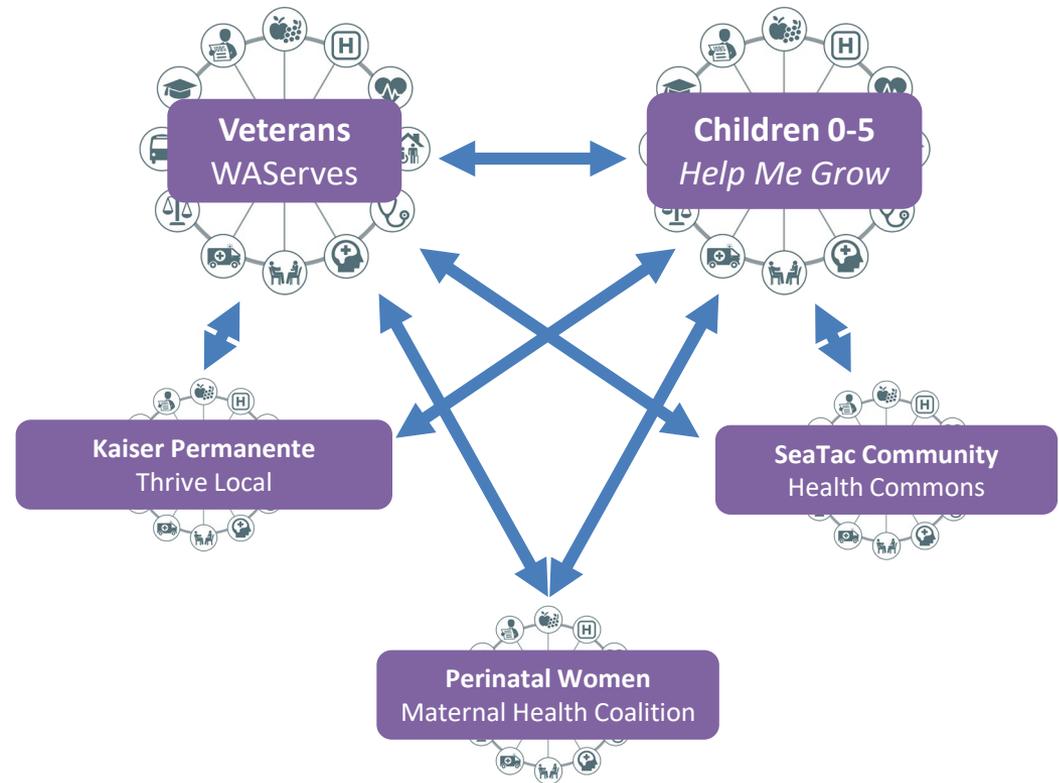


# PROGRESS TO DATE

- Leveraging Medicaid Transformation Project as opportunity for change
- Established a strong and diverse board
- Convened over 100 community and clinical partners to identify gaps and co-design solutions
- Prioritized bi-directional partnerships between community and clinical services as critical to success
- Determined that multiple organizations and initiatives are looking for this type of connectivity
- Established shared vision and agreement on alignment across those initiatives
- Launching data, technology and legal framework committees

# MOVING FORWARD

- Catalyze clinical-community linkages among HealthierHere partners
- Initial CIE capabilities will include:
  - *Up-to-date list of resources*
  - *Closed-loop referrals*
  - *Appropriate sharing of data*
- Connect existing and emerging CIEs where it makes sense



# TAKING ACTION

- Data, technology and legal expertise (for confidentiality protections and consent management)
- Community and Clinical providers to join the partner network
- Start-up resources to provide infrastructure/capacity to complete co-design and build partner network

# CO-CREATING A CONNECTED SYSTEM

*No matter where people enter the system...*

they receive the **appropriate care** and **community supports** to live healthier lives.

System is more **cost effective** and **sustainable**.

Community Information Exchange is one of several ways to strengthen clinical-community linkages



# VISION for a CIE

Stronger coordination of care for those in need by connecting people, service organizations, and community partners more quickly and more effectively – resulting in a healthier, more equitable community for all.

# HOW YOU CAN GET INVOLVED

- I want to contribute financial resources to support start up for CIE design and launch
- I want to provide legal expertise in privacy and confidentiality laws to assist in consent management and information sharing protocols
- I want to provide data and technology expertise to assist with evaluation and implementation
- I am a community-based organization and would like to join the provider network
- I am a clinical provider and would like to join the provider network
- I want to contribute business expertise to assist in the development of a sustainable "public utility" model for ongoing costs



# **OneCall: A Single Portal for First Responders**

**Brook Buettner**, King County Department of  
Community and Human Services

**Allie Franklin**, Crisis Connections Executive  
Director

# OVERVIEW OF CHALLENGE

Behavioral Health Crisis → First Responders



Law Enforcement



Emergency Medical Services



Fire

# OVERVIEW OF CHALLENGE

- Expected to be everybody's everything
- Want to get back to the field
- Jail and Hospital are always open and accepting new referrals/ "admissions"
- Jail and Emergency Department are not always the most appropriate settings for a person in crisis. If a safe alternative exists.

# PROGRESS TO DATE

3+ years of visioning and planning



Seattle



Public Health  
Seattle & King County



King County



TRUSTED COMMUNITY HEALTHCARE



# PROGRESS TO DATE

- Crisis Connections identified as provider
- Initial funding through City of Seattle
- Live with Seattle Police Department Oct. 1, 2019
- Training EMS Mobile Integrated Health Program (MIH) 10/28/19

# MOVING FORWARD

- Seattle Fire, King County EMS, King County Sheriff
- Building relationships with Divert-to-What resource providers
- Goals: Short term – create a single place where first responders can access less restrictive alternatives to prevent jail bookings and ED admissions.
- Long Term – leverage technology to create real time access for first responders to know about diversion options in the community and to refer to deeper navigation service screenings and connections for social services

# TAKING ACTION

To move forward, this project needs:

- Funding to scale to other parts of King County;
- Funding to pay for capacity to hold some beds open for diversion placements;
- Connections and collaboration with agencies who provide follow up navigation/ case management support in the community

# VISION

- Available to first responders across King County
- Available to community members – a OneCall for Help.
- System-wide dashboard that would show where there are gaps in the Diversion/ safety net which would allow the community to make targeted investments in prevention system
- Potential for collaboration with FQHC's to shift medical clearance visits from ED to community clinic sites.

# HOW YOU CAN GET INVOLVED

- Share ideas and connections to expand the diversion tool kit
- Advocate for increased funding to scale to whole County
- Advocate for more coordination and a single point of access/ information regarding diversion resources
- Advocate for more system support for next day appointment scheduling, enhanced next appointment scheduling



## COMMUNICATIONS, AWARENESS & ADVOCACY PANEL

- **Rep Lauren Davis**, WA State House of Representatives
- **Victor Loo**, Practice Innovation Director, Asian Counseling and Referral Service
- **Mike Schindler**, CEO, Operation Military Family Cares