

System of Care expansion grant

Overview

The Substance Abuse and Mental Health Administration (SAMHSA) awarded Health Care Authority the System of Care (SOC) expansion grant in October of 2022 for the implementation of Mobile Response and Stabilization Services (MRSS) in Pierce and Spokane counties.

The goals of the project include:

1. Ensuring that youth, families, and caregivers have access to a comprehensive array of crisis prevention, intervention, and stabilization services;
2. Preventing movement to more restrictive settings;
3. Increasing community awareness about youth behavioral health needs;
4. Infusing youth and family voice into the crisis system development and implementation; and
5. Developing infrastructure and data collection processes to support statewide MRSS sustainability.

This targeted MRSS programming leverages collaborative structures that catalyze dialogue with family-led organizations, community members, and policy makers to inform recommendations for system change. This work aims to shift the standard for community-based crisis service to a model that centers the needs of families and youth by implementing MRSS best practices across youth-serving systems. Within this model, family and youth define the crisis.

System of Care core values include:

- A family driven and youth guided/directed framework
- Importance of community-based services
- Delivery of services with cultural and linguistic humility to address health equity issues

Program elements

HCA partners with Spokane County Behavioral Health Organization (SCRBHO) and with Carelton to pilot the MRSS in Spokane and Pierce Counties.

82-0462 (10/23)

- Frontier Behavioral Health, Seneca Family of Agencies, and Catholic Community Services (CCS) are staffing, and developing policies and procedures to provide 72 hours of crisis intervention and up to 8 weeks of stabilization services to youth, regardless of insurance type.
- Clinical staff will participate in trainings to develop competencies in crisis de-escalation, harm reduction, trauma-informed care, and other relevant topics.
- In Year 1, providers in Pierce County have begun providing MRSS to non-Medicaid youth.

A Common Voice, Parent of Center Excellence (COPE) partners with regional implementation teams to embed System of Care values into all aspects of the MRSS programmatic design.

- COPE will partner with behavioral health agencies to coordinate support for parents and caregivers who are navigating the behavioral health system.
- COPE project will explore co-location models to embed parent partners in the crisis system in pilot regions.
- COPE and Washington State Community Connectors (WSCC) will convene events that invite parents and caregivers to share stories, provide crisis safety planning strategies, and to collaborate around the rollout of MRSS.

WSCC will work collaboratively with other State partners to develop an MRSS 101 training to educate communities, providers, and systems partners about the MRSS model. WSCC will also partner with HCA to explore qualitative data collection to help inform the development of a comprehensive continuum of care that meets the needs of youth with complex/co-occurring disorders and support needs.

The University of Washington will work together with providers, systems partners, and family-led organizations to develop Dialectical Behavioral Therapy (DBT) skills and Parent Management Training specifically for MRSS teams.

- This customized training will be used to educate both providers and caregivers about

important skills to help young people as they move from crisis into stabilization.

HCA continues to partner with Excelsior Wellness to pilot respite services for youth and family with behavioral health needs and will work with HCA partners to inform ongoing efforts to include respite as a Medicaid-billable service among Washington's continuum of care.

- Excelsior has served a total of 67 youth in the first three quarters of Year 1.

These partnerships are critical to developing a system of care that addresses trauma and the ongoing needs of children, youth, and young adult behavioral health crisis.

Data collection and evaluation

- Data collection is initiated to analyze potential disparities in outcomes based on race, ethnicity, and sexual orientation/gender identity for youth that engage in MRSS services.
- Data may also be used to track cross-systems involvement to better understand outcomes for youth in foster care or who have juvenile justice involvement.
- The Department of Social and Health Services (DSHS) Research and Data Analysis (RDA) division leads the program monitoring and evaluation according to a three-part plan that includes client-level and aggregate data to assess program effectiveness.

Key partners

- Department of Social and Health Services (DSHS), Research and Data Analysis (RDA)
- Washington State Community Connectors

- A Common Voice, Center of Parent Excellence
- Catholic Community Services
- Seneca Agency of Families
- Frontier Behavioral Health
- Excelsior Wellness
- Spokane County Regional Behavioral Health Organization
- Carelon
- University of Connecticut Innovations Institute

Federal fiscal year budget 2024

\$3,000,000.00

Oversight

- Health Care Authority (HCA), Division of Behavioral Health and Recovery (DBHR)
- Substance Abuse and Mental Health Services Administration (SAMHSA)

More information

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Additional information about child and youth behavioral health services in Washington:
www.hca.wa.gov/free-or-low-cost-health-care/i-need-behavioral-health-support/prenatal-child-and-young-adult-behavioral-health-services