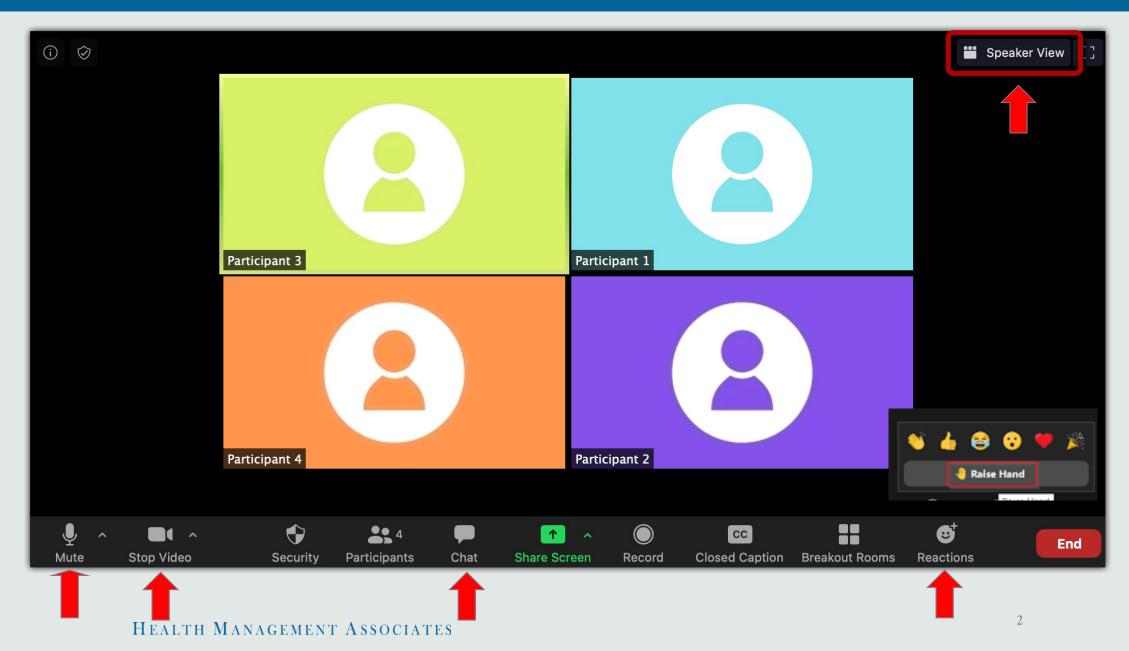




Zoom Technology Moment: Committee Members





AGENDA

- Welcome, Intros, Agenda review
- Presentations and Discussions:
 - DOH Presentation and Discussion Crisis Response
 System Technology Platform User Experience
 - HCA- progress from the 988-Regional Crisis Line Workgroup, crisis service actuarial efforts, and recently awarded SAMHSA grant.
 - HMA- process to prioritize recommendations for the January 1, 2024 Committee Progress Report.
- **Open Discussion:** Continue mtg topic + anything else
- Next meeting:
 - MON November 13TH 1.00 PM 3.00 PM



Washington Speaks ARE YOU INTERESTED IN?

- Sharing your story with the CRIS or CRIS Steering Committee?
- Receiving support and feedback from others with lived experience in preparing to share your story?
- Supporting others in preparing to share their story?

To join our CRIS Lived Experience group training let us know in chat or e-mail <u>bthompson@healthmanagement.com</u>



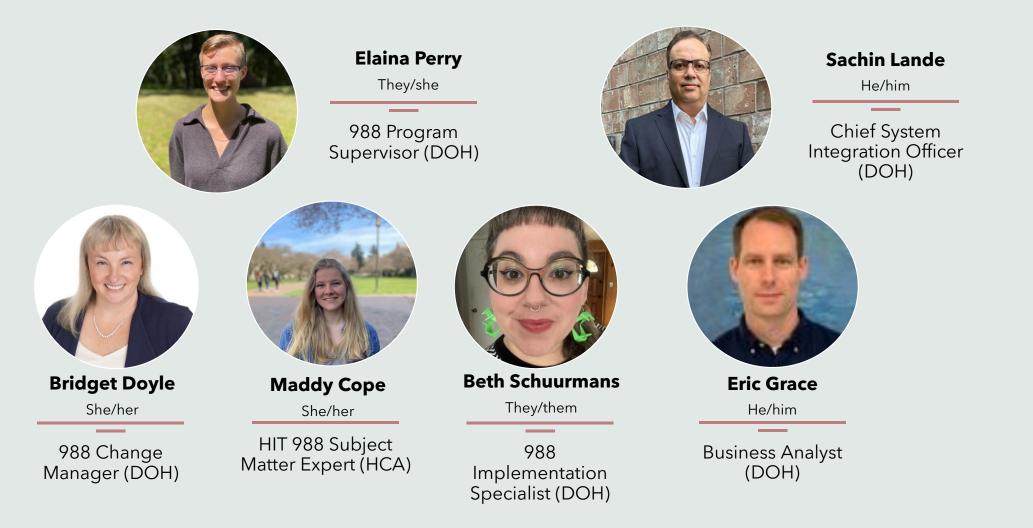


Washington State Health Care Authority

PEOPLE-CENTERED DESIGN

988 Program Update

988 Personas Workgroup: Department of Health and HCA Team Members



988 High-Level Update and User Personas

DOH AND HCA UPDATE

Agenda

1. Context: Why personas?

- 1. Definition of personas
- 2. This presentation explains ways the 988 program and technical architecture solution will benefit from personas creation, the process thus far, and what is next

2. Collaborative process for designing personas

- 1. Background on what we've done to develop personas
- 2. Review and provide feedback regarding call taker persona archetype
- 3. Review questions to inform creation of caller personas anchored in lived experience

3. Questions and Feedback

4. Next Steps

1. Post-meeting opportunity to respond to questions to inform the caller persona design

988 High-level IT Systems Update

- DOH and HCA are entering the Request for Proposal (RFP) period from vendors.
- The goal of the RFP period: Procurement of a statewide system that can respond to mental health crisis calls, texts, and chats. This system will incorporate the expanded crisis services outlined in House Bills 1477 and 1134. These bills build on the legislation that established 988 as the 3-digit dialing code for the 988 Suicide & Crisis Lifeline on July 16, 2022.
- We will share more information on the RFP phase as we have it.
- DOH and HCA are taking a people-centered approach in developing the RFP by collecting feedback from users about their preferences and needs for the new system.
- We are inviting you to partner with us on the development of personas that will be influence the design and build of the new statewide system, and to develop communication and training plans as the new system is developed and rolled out.

Persona Definition

 Personas are an approximation of a segment of users who might use the 988 technical platform. Some personas may reflect a narrow population of users, while other personas sometimes referred to as archetype personas may be more broad in their descriptions.

988 Persona Development Process

- Our human-centered design focus considers user personas to guide the system's design.
- We invited crisis center partners (Crisis Connections, Frontier Behavioral Health, Volunteers
 of America Western Washington, and Native & Strong Lifeline) to help guide persona
 development.
- Their input will help us reflect on ways we can best serve future system users as we consider vendor proposals.
- CRIS LE Subcommittee and Tribal Subcommittee feedback will further deepen our understanding of our partners and communities as we design the system architecture to serve

What has been done so far: User Personas

- 1. DOH met with 28 staff from Washington's 3 988 Lifeline Centers and the Native & Strong Lifeline in 7 virtual sessions to gather feedback on *call-taker, supervisor* and *caller personas* in August and September 2023.
- 2. These centers provided **265** responses to the *call-taker* and *supervisor* personas that led to dozens of helpful refinements and the discovery of a necessary *clinician shift lead* persona.
- 3. We categorized responses from crisis center staff related to *staff* persona types into 5 main themes: 911 Linkage, Data & Reporting, Geolocation, Staff, Capacity & Training, and Systems Navigation & Accessibility
- 4. Lifeline center staff also provided **429** responses to inform *caller* personas from their perspective. While many staff have LE, we recognize the need for more LE feedback to create caller personas.
- 5. With thousands of callers and no unified means of collecting caller feedback, LE Subcommittee input is invaluable to the agencies. This feedback guides the design of user personas that are grounded in LE, diverse, and broadly representative of experiences engaging with crisis systems.

Timeline To Date: 7 personas workshops held by DOH with 988 Lifeline 10/28: CRIS LE 11-16-30/2023: DOH presents Centers and Respond to Native & Strong Questions to personas to Lifeline provide data **CRIS** Steering providing that will help Committee and Tribal feedback on the persona 3/31/2024: Subcommittee **Finalize RFP** design personas 10/16/2023: 11/1-16/2023: 12/2023: Review Call-DOH and HCA Personas are Taker Person will create dataused for the with CRIS Lived informed creation of User Stories that Experience(LE) personas to Subcommittee inform humanenable the RFP and key centered requirements to questions for design and 988 be completed Call-Maker systems and provide Persona architecture context for vendors approach

Today's Approach

- 1. An archetype *call-taker* persona was created for you to review. This persona has been refined to include Lifeline call center feedback.
- 2. An intentional list of questions were designed to deepen understanding of *caller* personas in the context of your lived experience and understanding of others with lived experience.
- 3. CRIS LE will have an opportunity to provide feedback to DOH to inform our people-centered design both on this call and afterwards via a follow-up survey.
- 4. As we listen to caller experiences across the continuum of a person in crisis making a crisis call, text, or chat, we'd like to get insight on what callers:
 - a. Think & feel (thoughts)
 - b. Express or say and do (voice)
 - c. Hear & observe from others (family members, community, society influences)
 - d. Experience: Pains and gains in the context of experiencing the support system

Center Call Taker Archetype	Persona 1 (Roberta)			
Demographics	Age: 25. Lives in Burlington, WA with 2 pet rabbits			
Background	Holds a Bachelors, Lived Experience, 3 months experience as a 988 crisis counselor professional			
Challenges & Pain Points	Being a crisis call taker is emotionally demanding, experiences vicarious trauma, activation of her own trauma. Lack of an integrated crisis system makes it difficult to quickly connect someone with local resources.			
Motivations & Values	Desire to save lives, active listening, understanding callers' needs			
Description	Passionate about behavioral and mental health, volunteer experience during college			
Short-Term Goals	Enhanced crisis intervention skills, team-building, and training activities			
Long-Term Goals	Additional training/certifications in behavioral health counseling, increased earnings for a mortgage			
Spectrum (H)/Context (V)	Permanent			
Type of Context	ADHD, hands-on tech learning, microlearning, intentional breaks			
	Temporary			
	Excited for upcoming vacation			
	Situational			
	Unable to attend in-person trainings due to remote work			
Workday	Log in to multiple systems and have 3-7 different systems open to support each caller, document calls, check emails/follow-ups			

Feedback Questions

1. What are your reactions about this *call-taker* archetype persona? What are outliers or exceptions we should be aware of?

The remaining questions (2 - 4) are related to *call makers* experience and will provide data on how the system can best support callers.

- 2. Do you think there any difference in services requested based on identifiable characteristics (youth, parents, people calling from healthcare facilities, agricultural community members, students calling from school, people calling for general resources like housing, rural callers, or others)?
- 3. What current accessibility challenges should we know about as we design the future systems?
- 4. What are some specific challenges or needs for callers who are part of marginalized populations (e.g., Native & Indigenous, LGBBTQIA2S+, Rural, People with Disabilities, Veterans and others)?

LE Feedback Questions: Persona Development



Next Steps

Input from today's CRIS LE Subcommittee and LE responses to the post-call survey will be combined with feedback from other Crisis Centers and used to inform Caller Personas.

We will collect the feedback you provided us today <u>and</u> offer you the opportunity to give feedback **throughout the month of October** via a Microsoft Forms survey that you will receive via email. Please complete the Forms survey **by October 26th**.

We will create caller personas and archetypes and share caller personas with the 988 program team at HCA and DOH. This will help us:

- Center the architecture, design, and build of system requirements
- Write user stories
- Ultimately make the RFP decision in a way that anchors the choice in lived experience

Questions or Feedback?

Thank you!



To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil.rights@doh.wa.gov.

HB 1477 COMMITTEE RECOMMENDATIONS & INCORPORATING LIVED EXPERIENCE INPUT

- Developed 'synthesis' documents based on CRIS and Subcommittee engagement to synthesize gaps in Washington's behavioral health crisis response system, progress to date on addressing these gaps, and potential actions and opportunities to further address these gaps.
 - Someone to Call
 - Someone to Come
 - A Safe Place to Be
- Synthesis documents reflected input from the Lived Experience Subcommittee.
 - Lived Experience Subcommittee meeting summaries, written feedback, listening sessions.
- At the September 19th CRIS meeting, engaged exercise with CRIS Committee members to identify priority recommendations for the January 1, 2024 Committee Progress Report
 - Placed dots to indicate priorities (Lived Experience CRIS members given different color dots to elevate visibility of lived experience priorities). This was <u>not</u> a voting exercise.
 - Followed up to gather input from CRIS members who could not attend.

Current Work Underway

- Consolidating Recommendations (removing duplicates, grouping recommendations)
- Classifying recommendations in the following categories of future work:
 - Alignment with existing agency implementation work or policy proposal
 - Alignment with 2024 legislative priority
 - Alignment with 2024 CRIS priority
 - Action to TBD
- Sharing consolidated recommendations with the Steering Committee and CRIS Committee on October 19th
 - Will share with Lived Experience Subcommittee for input to Lived Experience CRIS members

September	October	Novem	ber		December
Development of Synthesis Documents September 19 th CRIS Meeting	Draft Committee Progress Report for CRIS Committee Review and Feedback	November 7 th CRIS Meeting	Feed Draf	egrate CRIS back into the t Committee gress Report	December 18 th Steering Committee Meeting Approve HB 1477 Committee Progress Report
Synthesis documents provided to inform CRIS Committee discussions and prioritization of opportunities to improve the system.		CRIS Member Review and Input on Draft Committee Progress Report	Committee Meeting Provide direction for the January 2024 Committee Progress Report		January 1, 2024: HB 1477 Committee Progress Report Submitted



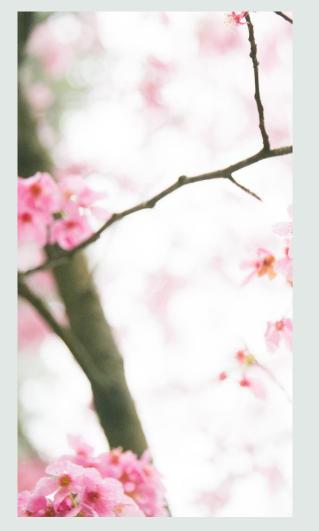
DATA SUMMARY

Торіс	Safe PLACE to CALL	Safe TEAM to COME	Safe PLACE to BE		
Data and Reporting	5	10	2		
Capacity	3	10	16		
Cross System Coordination and Alignment	6	11	2		
Equity and Safety	12	9	3		
System Navigation and Accessibility	7	3	5		
	33	43	28		
	404				

104



QUESTIONS & DISCUSSION



Choirs use staggered breathing when it is impossible for each individual singer to get through the sustained note or phrase without running out of breath. Singers in the same part take short breaths at different times to create the illusion that the overall sound created by the choir is one single unbroken line.

How we stay hopeful

\$JJJJJJJ





#We can apply Ragnar, Relay for Life, Staggered breath singing ideas to the work we do!

We Work - We Rest

We Take Turns!

We do it Together!

WHAT WE COVERED

- To share your lived experience story at the CRIS mtg, let us know in chat or e-mail <u>bthompson@healthmanagement.com</u>
 - Presentations & Discussion:
 - DOH Presentation and Discussion Crisis Response System Technology Platform User Experience
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Links and Resources

- **DOH Personas Feedback Form:**
 - <u>https://forms.office.com/Pages/ResponsePage.aspx?id=F-</u>
 <u>LQEU4mCkCLoFfcwSfXLTsGrQ753Q9Jp56mur7fkD5UQUJGUEpERDBSVTNJQTRCQjIKOUIJRF</u>
 <u>E4RS4u</u>
- DOH emails:
 - elaina.perry@doh.wa.gov
 - <u>Chantel.Wang@doh.wa.gov</u>
 - **CRIS Website:**
 - <u>https://www.hca.wa.gov/about-hca/programs-and-initiatives/behavioral-health-and-</u> recovery/crisis-response-improvement-strategy-cris-committees