



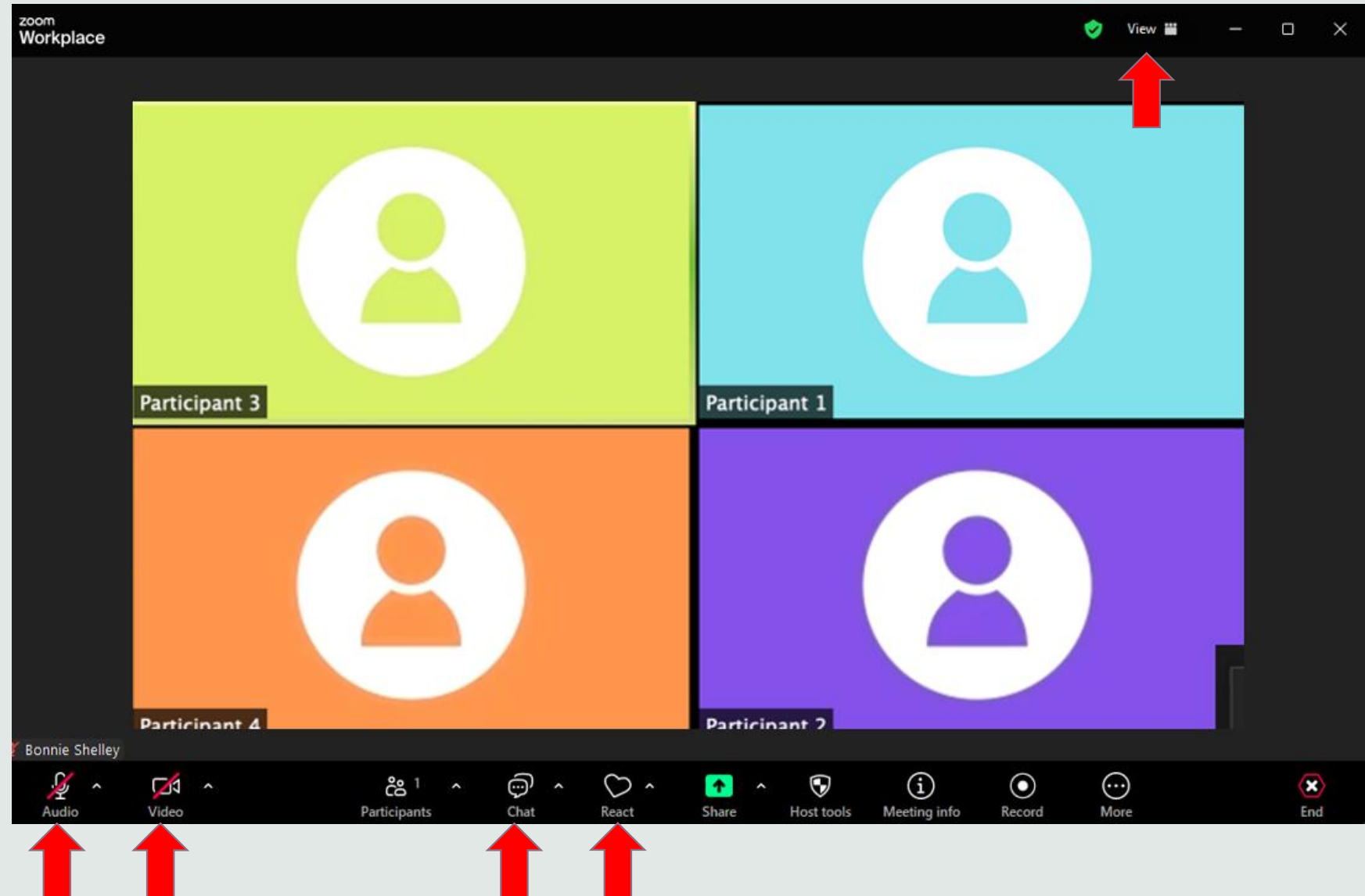
Zoom Technology Moment: Committee Members

-The "Audio" and "Video" buttons are in the bottom left corner. These help you mute and unmute or turn your video on or off.

-The "Chat" button is just left of the bottom center of the screen.

-The "React" button is to the right of the chat button. You can find the "Raise Hand" function here.

-In the top right corner is the "View" button. This helps you change the way you view the meeting.



AGENDA

- **Welcome, Intros, Agenda review**
- **MRSS**
- **Lived Experience Collaborative Update**
 - *Bill of Rights*
 - *Kirkland Connections*
- **Community Updates and Opportunities**
- **Open Discussion - Current Events**
- **Next Meeting - Mon. October 13th, 2025 1 PM - 3 PM**

To access these slides scan





2025 Meetings, Mondays 1-3 PM

- **October 13th**
- **November 10th**
- **December 8th**

*** Information on how to join the meeting will be sent out one week in advance of each meeting, as well as posted to the HCA Website.**



Comfort Agreement

Here is our comfort agreement from the last meeting:

- Keep an open mind when others are sharing.
- Experiences are different. Be respectful of differences.
- "Step up and step back."
- Listen and don't judge.
- Keep things confidential and do not disclose without consent.
- Agree to disagree,
- Assume best intent.
- Active listening.
- Do not interrupt others when they speak.

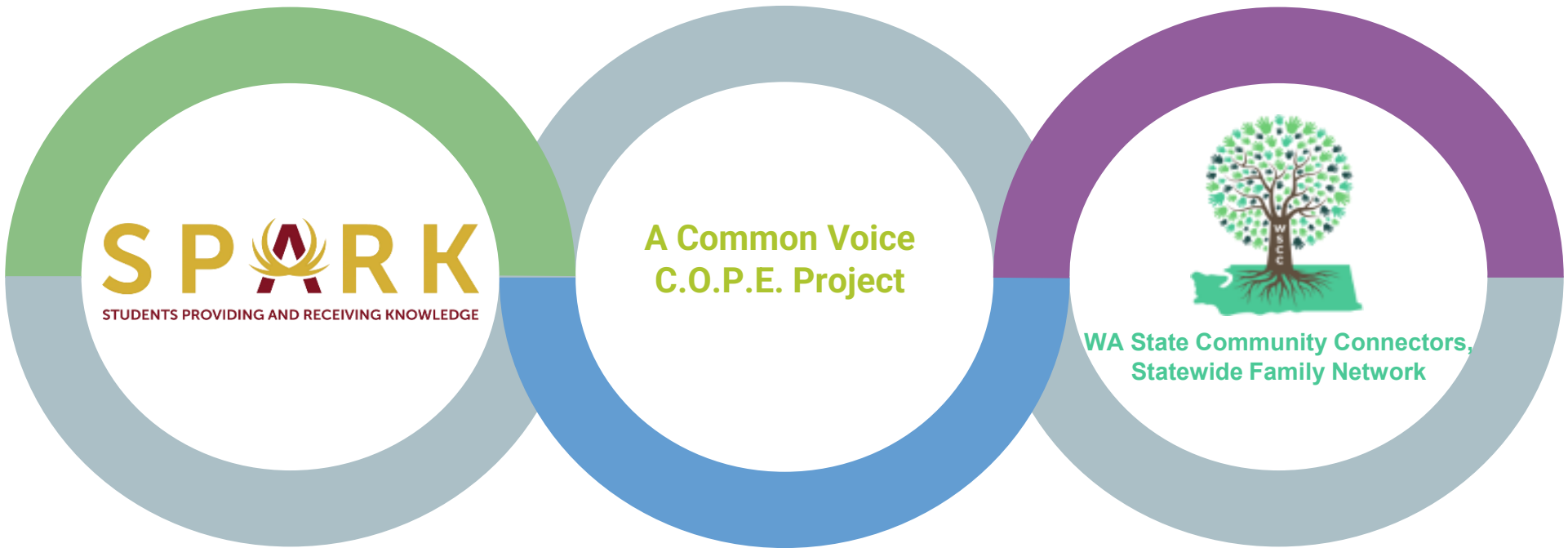


Is there anything that should be added or updated?



Youth & Family Mobile Response & Stabilization Services (MRSS)

MRSS Youth, Family and System partnership



Washington State and System of Care

- ▶ Health Care Authority believes every child, youth, young adult, and family should have access to behavioral health services delivered to them in their most effective and preferred environment.
- ▶ Our work is guided by the System of Care philosophy, developed in the 1980's to address well-documented problems in the mental healthcare systems for children and youth with behavioral health needs and their families
- ▶ Programs should align with the System of Care Philosophy – 3 core values:
 - ▶ Family and Youth Driven services, policies and programs
 - ▶ Community based solutions
 - ▶ Culturally and linguistically responsive care, policies and programs

What is a "Crisis" when a Caregiver Calls?

- ☐ "My child was just suspended from school."
- ☐ "My child is having outbursts and destroying things in my home."
- ☐ "The therapist said my teen is suicidal and needs to be inpatient."
- ☐ "I keep having to get my child from daycare for hitting."
- ☐ "I don't know what's wrong, but my kid is moody and isolating."
- ☐ "I can't get my kid to wake up and go to school."
- ☐ "My child grabbed a pizza cutter and tried to cut their arm."
- ☐ "When my kids return from their dad, they won't listen to me."

History of Washington State's Crisis System

HCA contracts with BH-ASO regions for crisis services

North Sound: 1-800-584-3578

King: 1-866-427-4747

Pierce: 1-800-576-7764

Salish: 1-888-910-0416

Thurston/Mason: 1-800-270-0041

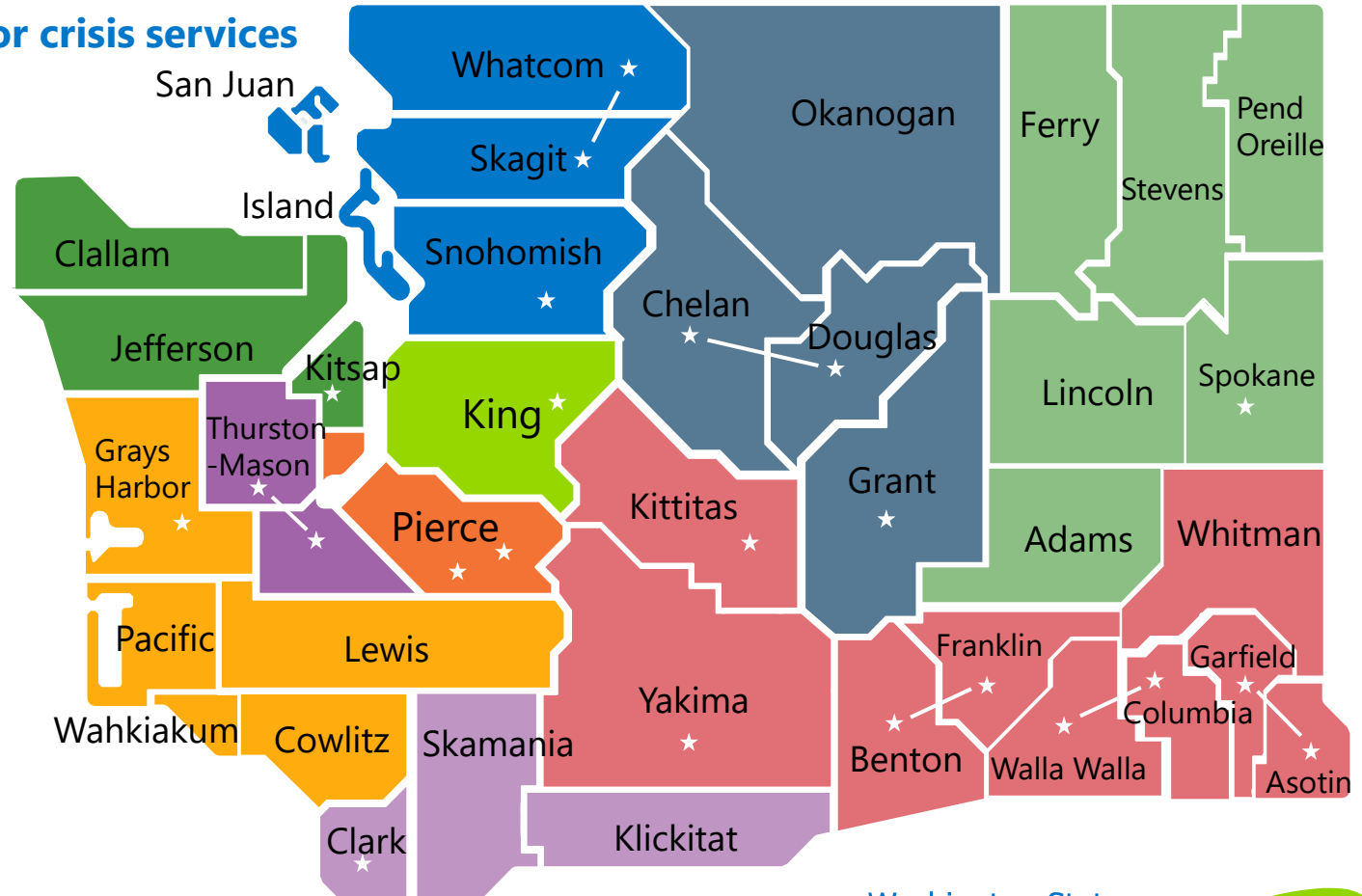
Great Rivers: 1-800-803-8833

Southwest: 1-800-626-8137

North Central: 1-800-852-2923

Spokane: 1-877-266-1818

Greater Columbia: 1-888-544-9986

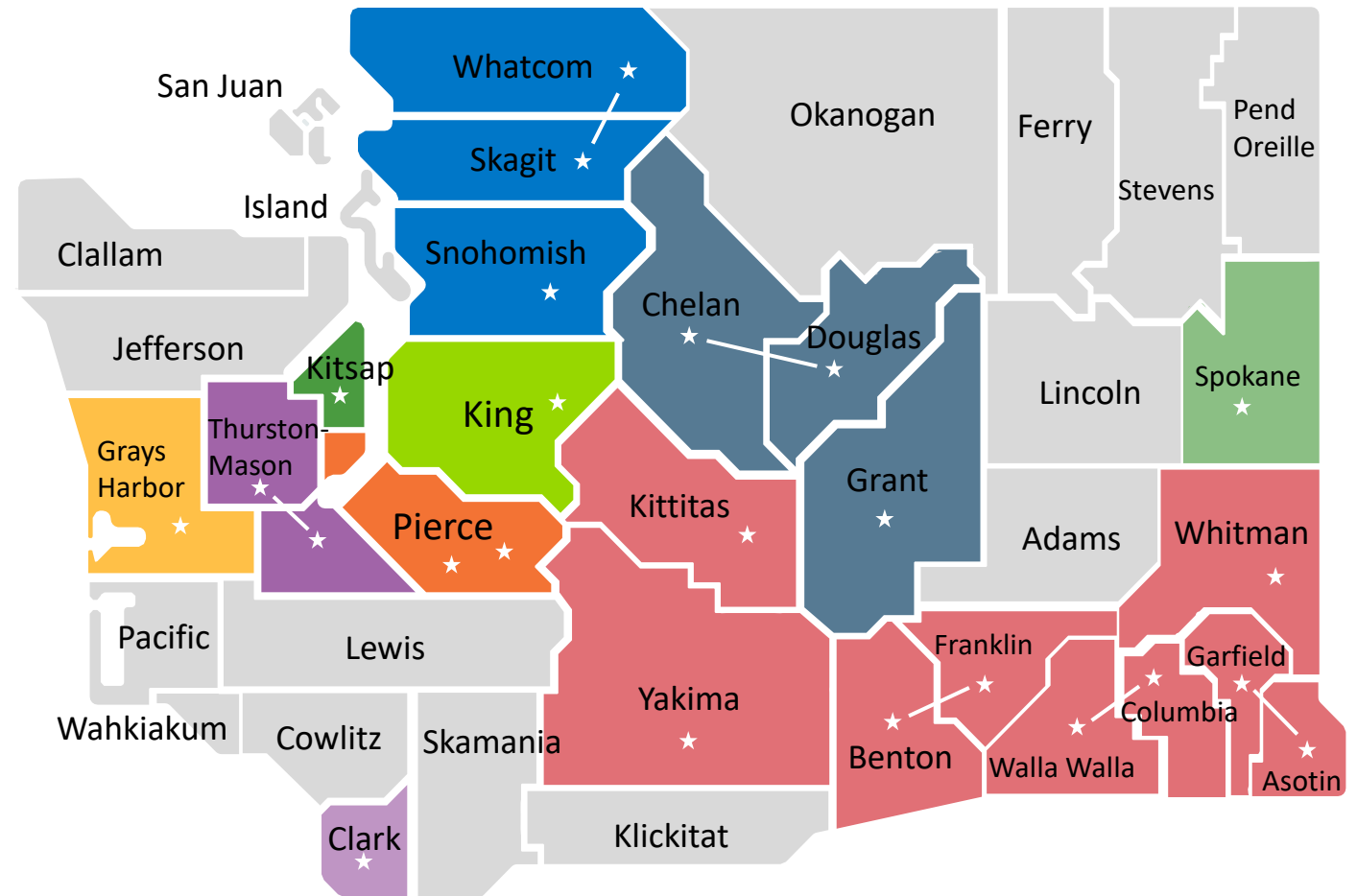


SAMHSA and NASMHPD Best Practices



Mobile Response and Stabilization Services – Youth Teams

- ▶ [Explore the full list of Mobile Response and Stabilization Services providers by county.](#)



MRSS delivers upstream & downstream support

If you can imagine a youth or family being in crisis is like someone falling into a river, MRSS goes upstream to find out why & provides connection and support downstream to prevent return to the crisis phase.

Enhancing MRSS teams for youth

01 Expand the definition of crisis to whatever the person experiencing in the situation defines it as to reduce barriers to identify potential solutions

02 Reduce unnecessary contact with law enforcement, fire, EMS, and emergency departments for behavioral health crisis situations whenever possible.

03 Initial crisis in-home response for up to 72 hours insurance blind



04 Provide a robust crisis workforce who are well trained to respond and address urgent needs.

05 Include peer support in crisis work to build rapport and give people someone to connect with who has similar experience/s

06 Address systemic barriers by addressing the needs of underserved populations

What is certified peer support specialist?



Parent peer specialist



A formal member of the behavioral health treatment team whose role is to serve the family and help them engage and actively participate with their team, in their community and make informed decisions that drive the treatment plan and goals. They are qualified through their lived, personal experience as the parent/caregiver of a child or youth with complex emotional/behavioral needs and hold a peer certification.

What is certified peer support specialist?



Youth peer specialist



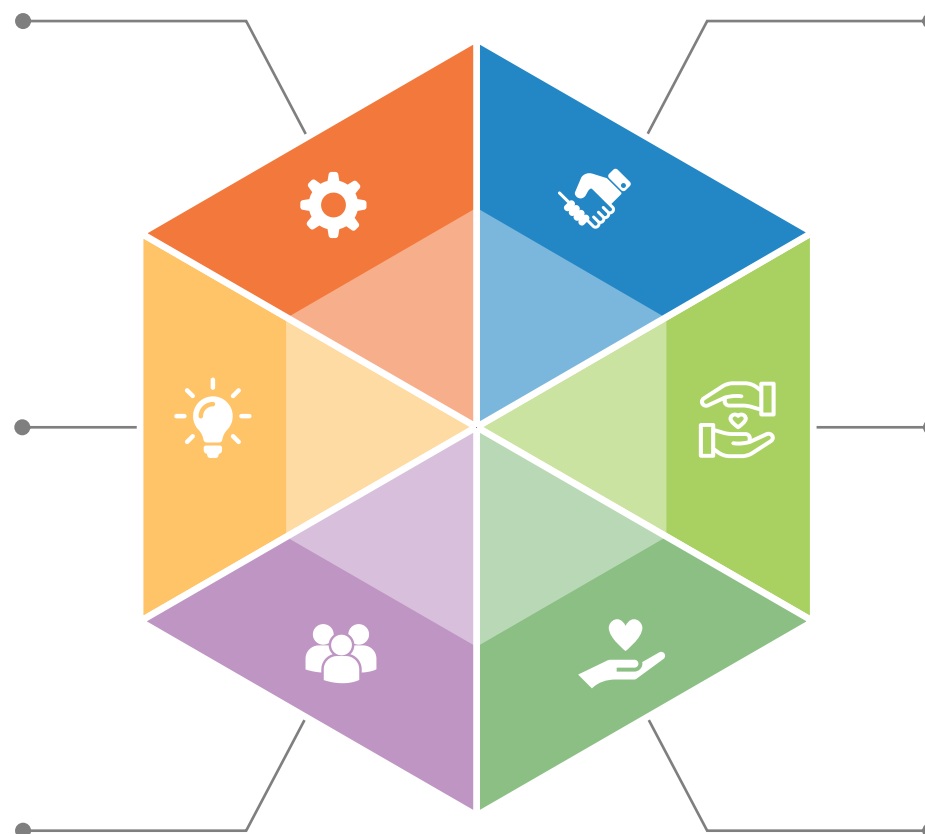
A formal member of the behavioral health treatment team, likely between the ages of 18-30, whose role is to serve the youth and help them engage and actively participate with their team, in the community and make informed decisions that drive the treatment plan and goals. They are qualified through their lived personal experience as a youth and hold a peer certification.

What does a parent and youth peer specialist do?

Support a youth or family in identifying services and activities that promote recovery and lead to increased meaning and purpose.

Empower youth and families in developing their own goals.

Share their own recovery stories that are relevant and helpful in overcoming the obstacles faced by youth and families.



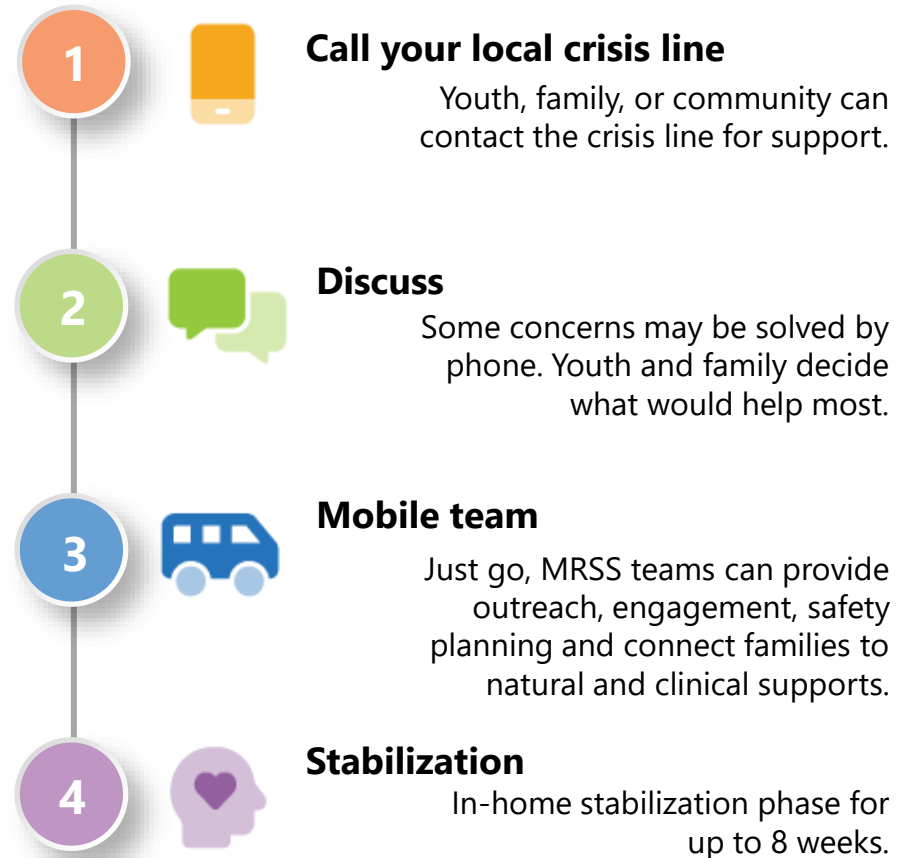
Connecting youth and families with community supports and services to reach their goals.

Serve as a collaborator.

Model skills in recovery and self-advocacy

Envisioning Mobile Response and Stabilization Services

- ▶ Provides rapid in-person support for youth and families during an **emergent** crisis within 2 hrs. of call.
- ▶ Provides rapid in-person response for youth and families during an **urgent** crisis within 24 hrs. of call
- ▶ Follow up for 1-3 days
- ▶ The stabilization phase is a service that can begin on day 4.
- ▶ Families have access to the MRSS team 24/7



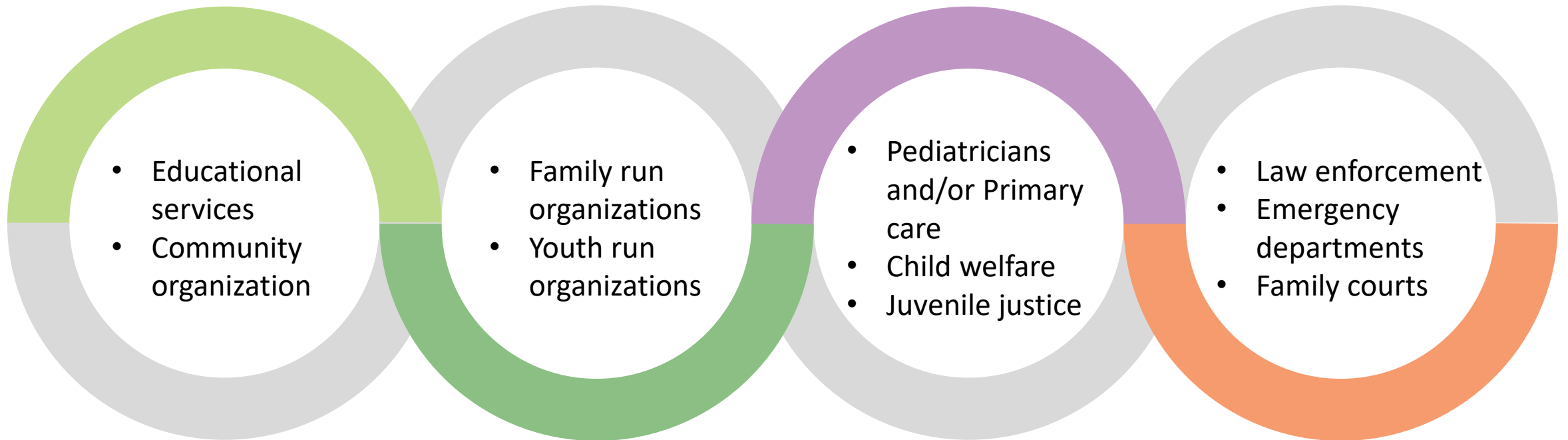
Mobile Response phase – initial response

- ▶ In the first 72-hours this is what to expect
 - ▶ Parent/caregiver and/or child, youth define the crisis
 - ▶ In-person contact within 2 hours of request at location of the youth
 - ▶ The team will provide developmentally appropriate:
 - Crisis de-escalation
 - Crisis assessment
 - Safety planning
 - ▶ If the youth or family agrees, the team can open an **MRSS intervention**:
 - The team can follow up for the next 72 hours
 - Peer support is included

Stabilization Services Phase

- ▶ **In-home** stabilization phase begins on day 4 of the **MRSS Intervention**
- ▶ *Up to 8 weeks* of in-home and community-based stabilization
 - ▶ Families should expect an intensity of services and regular appointments
 - ▶ Teams will work with the youth and family to determine strengths and needs
 - ▶ Activities may include skill building, brief therapy and safety planning
 - ▶ Teams will work with the youth and caregiver to identify and connect them with activities such as school, sporting activities, arts and other extra curricular activities
 - ▶ Peer support for youth and/or caregiver
 - ▶ Therapeutic referrals, care coordination and warm handoffs to ongoing care
 - ▶ Access to support from the team 24/7

Community collaboration partners



MRSS improves outcomes

- ▶ Youth are stabilized in the home and community, with the goal of preventing additional crisis for youth and family.



Build trust
between families,
youth, and
systems.



Reduce contact
with law
enforcement and
Emergency
Department visits



Connect with
services and
supports including
peer support and
community supports



Improve access and
reducing trauma for
youth and families

What is a "Crisis" when a Caregiver Calls?

- ✓ "My child was just suspended from school."
- ✓ "My child is having outbursts and destroying things in my home."
- ✓ "The therapist said my teen is suicidal and needs to be inpatient."
- ✓ "I keep having to get my child from daycare for hitting."
- ✓ "I don't know what's wrong, but my kid is moody and isolating."
- ✓ "I can't get my kid to wake up and go to school."
- ✓ "My child grabbed a pizza cutter and tried to cut their arm."
- ✓ "When my kids return from their dad, they won't listen to me"

Children's MRSS – Mobile Response Stabilization Services



Catholic Community Services
Thurston – Mason Counties

How does Mobile Crisis support youth and families?

- Youth or family calls 360-480-5721 or dials 988.
- “Crisis” is defined by the family.
- Response is ALWAYS offered.
- A response team = clinician and a peer.
- **Goal** = Arrive within 60 minutes.



Our Motto: **Just Go.**

- The child is stabilized in the community – most of the time in the home.
- 24/7 response services.
- Families are served daily for 3 days – minimum 2 in-person.
- Families are provided resources, connected to longer term options.
- **Outcomes:** Reduced detention, arrests, hospitalizations, and ER visits.

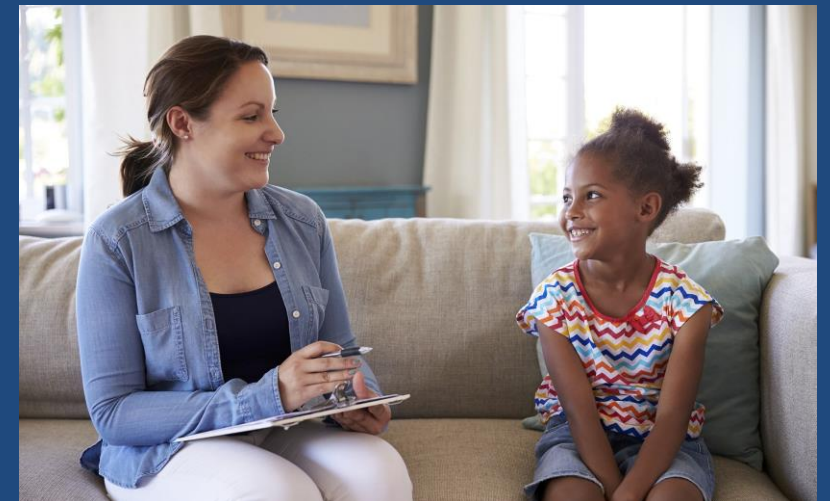
Who utilizes MRSS?

- **Hospitals** – safety planning for discharge and in home supports
- **Schools** – provide immediate support to youth and families. Decrease distress in school environment.
- **Parents** – provide immediate support to youth and families. Crisis de-escalation, resource provision, connection to community partners
- **Law enforcement/juvenile justice** – support mental health services in detention, reduce law enforcement engagement with youth
- **Friends, family, neighbors** – Anyone can access – they define the crisis
- **Mental health/doctors** – crisis support beyond their current capacity

What is stabilization?

Around 8 weeks of service to stabilize youth in their homes and community

- 24/7 in-person response.
- Connects with natural, formal, and informal supports.
- Uses evidence based interventions
- Provides resources and connects to community providers
- Services twice weekly plus parent and/or youth peer services
- Family and youth driven



Community Input Matters:

- System of Care / Steering Committee
 - Parents
 - Youth
 - Medical providers - hospitals
 - Tribes
 - Educators
 - First responders – fire/police
 - DCR's – adult MRSS
 - Support service providers
 - etc



Transition to Responding to All Youth

Referral Process, Challenges,
and Opportunities

Transition Overview

Shift to serving
all youth has
gone smoothly

No reports of
youth being
turned away

Access has
broadened
successfully

Referral Sources

Referrals mainly through RCL and Crisis Connections directly

988 integrated via Crisis Connections

Most referrals still come from these two sources

988 vs Crisis Connections

988 staff call more often for clarification

Referrals from 988 can be inconsistent

Staff sometimes lack depth of training on crisis programs

Most noticeable with CORS-YA referrals

Safety & Process Concerns

Referrals sometimes made
without family awareness



Creates safety and
coordination challenges



Need stronger upfront
communication

Provider Line Issues

Occasional
difficulty reaching
provider line

Multiple call
attempts
sometimes needed

Affects response
time and efficiency

Opportunities for Improvement

Additional
training for 988
staff

Clearer referral
process
guidance

Better
communication
with families

Improve
provider line
responsiveness

A vertical strip on the left side of the slide shows a close-up of pink cherry blossoms on a dark branch, with some flowers in sharp focus and others blurred in the background.

Lived Experience Collaborative Plans

CRIS LINK

- Bill of Rights
- Kirkland Connections – No response to emails yet.





Community

- * Resources

- * Information

- * Opportunities





Open Discussion & — Sharing



Native & Strong Lifeline expands access with text and chat

New services provide 24/7 mental health support for all Indigenous people in Washington

OLYMPIA – The [Native & Strong Lifeline](#), Washington's suicide-prevention, crisis, and help line for all Native and Indigenous people in the state, now offers text and chat services. These new options expand the line's efforts to provide culturally affirming support for American Indian and Alaska Native people experiencing thoughts of suicide, substance use concerns, mental health crises, or emotional distress.

New services, same Indigenous-centered approach

The [Native & Strong Lifeline](#) is a subnetwork of the [988 Suicide & Crisis Lifeline](#) and is administered by [Volunteers of America Western Washington](#) (VOAWW). VOAWW is one of Washington's 988 Lifeline crisis centers. Since its launch in November 2022, the Native & Strong Lifeline has answered over 15,000 calls and has received an average of more than 600 calls per month this year.

How to contact the Native & Strong Lifeline:

- **Call:** 988 then press 4
- **Text:** N8V to 988
- **Chat:** Select the "All Native people in Washington state" box in the pre-chat survey when [chatting online](#).

The Native & Strong Lifeline is free, confidential, and available 24/7/365. It's available to all Tribal and Indigenous people in Washington or anyone contacting the line from a Washington area code.

Our [website](#) is your source for a *healthy dose of information*. Get updates by following us on [social media](#).

Washington Thriving

Help Shape How Washington State Helps Young People With Behavioral Health

We're asking for **20-25** minutes of your time because what you share will directly inform the actions of state lawmakers who decide how to spend millions of dollars on behavioral health services and supports for children, youth, and young adults in Washington State. Your answers may become the foundation for new laws, funding decisions, and programs that could help thousands of families across Washington. Whether you're a young person, parent or caregiver, work with young people, or just care about your community, your voice will help build a better behavioral health system for the next generation.

The final survey in the Washington Thriving feedback survey series is now **live!** This is a critical opportunity for you to provide your input on the Strategic Plan before the plan is finalized and submitted to the legislature in November.

[Click here to learn more and take Survey 5](#)

[Washington Thriving feedback series](#)

www.washingtonthriving.org/about



Our Conference Agenda is Live!

The National Federation of Families will be hosting its Annual Conference virtually this November 3rd, 5th, and 7th. The event will welcome hundreds of family members, key researchers, administrators, policymakers, youth, clinicians, and other stakeholders across the nation and Canada.

Join our virtual conference for:

- Powerful plenary sessions that will set the tone for our virtual conference and spark meaningful conversations. Stay tuned for further details very soon.
- **55 presenters from 23 states and Canada and 32 organizations** that will share professional expertise, lessons from the field, and lived experience in our 6 focus areas:
 - Fatherhood Initiatives
 - Supporting Families and their Loved Ones Through the Lifespan
 - Supporting families with Co-occurring Disorders
 - Lessons from the Field
 - Youth Workforce Development / Emerging Youth and Young Adult

Event Information:

Virtual: Nov. 3rd, 5th, and 7th 2025

3-Day Virtual Conference Registration

Individual registration fee: **\$230 per person.** For organization or group viewing of **10 or more**, please [contact us](#) for discounted pricing.

[**REGISTER TO ATTEND**](#)

[**VIEW THE SCHEDULE**](#)

THE FAMILY COLLECTIVE



AVAILABLE ON:



WITH THE NATIONAL FEDERATION OF FAMILIES AND THE
NATIONAL FAMILY SUPPORT TECHNICAL ASSISTANCE CENTER

The Family Collective podcast centers the lived experiences of families whose loved ones experience mental health and/or substance use disorders during their lifetime. Each episode shares powerful personal stories of courage, connection, and resiliency—reshaping how we understand recovery. Together, these conversations explore how families navigate challenges, nurture resiliency, and redefine what healing looks like.

[Join us on Spotify](#)

[Join us on Apple Podcast](#)

Only7Seconds is excited to announce the launch of its newest upstream prevention program in support of youth mental and behavioral health and wellness.

Club7 is a youth-led club where youth mobilize around the need for social health and connection to decrease the epidemic of loneliness in their spaces and prevent the mental and physical health challenges chronic loneliness and isolation can cause.

Only7Seconds welcomes inquiries about how this program can support youth focused programs throughout Washington.

Learn more at <https://only7seconds.com/clubs>
Melissa Hosten at Melissa@Only7Seconds.com

ADVANCING PRIORITIES SERIES

UPCOMING

SEPT 16 10:30AM-12

(VIRTUAL)

JUVENILE SENTENCING IN WA STATE

FEATURING:

- KATIE HURLEY, KING COUNTY DEPT. OF PUBLIC DEFENSE
- CHRISTINE SIMONSMEIER & LINNEA ANDERSON, WA ASSOCIATION OF JUVENILE COURT ADMINISTRATORS
- RICHARD MENDEL, THE SENTENCING PROJECT

Join a panel of experts for a dynamic discussion that will cover Washington State's approach to juvenile sentencing, how it compares to other states, and the long-term effects of incarceration on young people. We'll also explore effective sentencing alternatives.

This timely session will provide important context as Washington continues to grapple with possible sentencing reforms.

FUTURE TOPICS

AN ADVOCATE'S GUIDE TO USING THE
ARREST & COURT DASHBOARDS

BEST PRACTICES FOR SECURE
FACILITY SETTINGS

RESTORATIVE JUSTICE IN SCHOOL
DISCIPLINE

PROTECTION OF JUVENILE RECORDS

VICTIMS' COMPENSATION & ALTERNATIVES TO
JUVENILE COURT-ORDERED RESTITUTION

[REGISTER HERE](#)

[Advancing Priorities Series](#)

For more details: www.dcyf.wa.gov/practice/practice-improvement/ojj/wa-pcjj/legislative-committee/advancing-priorities

**Be the change you want to see.
Become a Certified Peer Support
Specialist and inspire
others along the way!
*Your lived experience is
the only experience needed.***

Who is a Certified Peer Support Specialist?

- Someone who had mental health or substance use disorder lived experience and helps others going through similar challenges.
- Someone who helped a family member with mental health or substance use disorder lived experience and supports other families with their loved ones.
- Someone who helps others recognize and build confidence in their own strengths and ability to succeed in their recovery.
- Someone who connects people with activities and services that support recovery and creates a sense of purpose.

[Read the Certified Peer Support Specialist flyer](#)

1, What are the steps to credentialing? Why should I get credentialed?

Training:

- 80 Hours
 - Hybrid: 40 hours in-person and 40 hours virtual, OR
 - Fully virtual: 80 hours virtual
- Build on your personal experience and gain a rich mix of peer support skills, such as:
 - Active listening
 - Empathy and compassion
 - Communications
 - Motivational interviewing
 - Crisis Management

Application:

- Complete the Certified Peer Support Specialist Trainee application via the Department of Health (DOH).

Experience:

- Your lived experience is the only experience you need to enroll in training.
- Complete 1,000 supervised hours of on-the-job experience

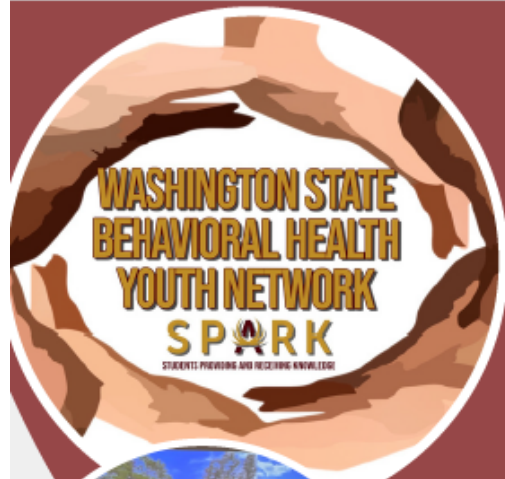
2. Can an existing Certified Peer Counselor get the Certified Peer Support Specialist credential?

- Yes, they need to complete the gap training and apply with DOH to transition to a Certified Peer Support Specialist.
- You can bill Apple Health (Medicaid) for your services. Currently, only Apple Health reimburses for peer support services.
- Ensure professional standards with ongoing education.
- Be a part of a recognized and credentialed workforce.

Explore More:

Visit the HCA website to learn more about Peer Support.

<https://www.hca.wa.gov/billers-providers-partners/program-information-providers/peer-support>



Join our YOUTH NETWORK DEVELOPMENT TEAM

Connecting youth and youth adults statewide—coastal, rural, suburban, and metro. **Your voice matters!** Share your story, shape mental health and substance use services, and be part of the change. **Applications close September 20, 2025.**

REQUIREMENTS TO JOIN:

- Identify as a person with lived experience
- Ages 18-35 years old
- Desire to collaborate and make a change

ROLES AND RESPONSIBILITIES :

- COORDINATE EVENTS
- BUILD RELATIONSHIPS
- ATTEND FYSPTS
- FACILITATE GROUPS

ORIENTATION

Date: Sept. 26-28th

In-Person

Address:

3801 Zintel Way, Suite A120
Kennewick, WA 99337



<https://forms.gle/gRRWcC7r8gxuJYLXA>

**FOR MORE INFORMATION
CONTACT :**

yn@wayouth.us

Washington State
Health Care Authority



#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

- **Welcome, Intros, Agenda review**
 - **Interoperable Workgroup Update**
 - **Lived Experience Collaborative Update**
 - *Upcoming guests and topics*
 - **988 Help-Seeker Bill of Rights**
 - **Community Updates and Opportunities**
 - **Open Discussion - Current Events**
 - **Next Meeting - Mon. August 11th, 2025 1 PM - 3 PM**
- 