

August 1, 2017

The Honorable Joe McDermott  
Chair, King County Council  
Room 1200  
C O U R T H O U S E

Dear Councilmember McDermott:

I am pleased to transmit to you the King County Mental Illness and Drug Dependency (MIDD) implementation and evaluation plans as required by Ordinance 18407 to be submitted to King County Council by August 3, 2017. There are two proposed motions included with this transmittal letter relating to MIDD for the period of 2017 to 2025 (known as MIDD 2).

1. A proposed motion approving the MIDD 2 Implementation Plan, and
2. A proposed motion approving the MIDD 2 Evaluation Plan.

The MIDD Service Improvement Plan (SIP) adopted by the Council via Ordinance 18406 in November 2016 is the blueprint for MIDD 2. The SIP outlines the fundamental policies, goals and operational components of MIDD 2. The MIDD 2 implementation and evaluation plans provide the specific, detailed working components of MIDD 2 called for by the Council in Ordinance 18407. The SIP and the two plans transmitted today are intended to work together to provide a full picture of MIDD 2 for policymakers, stakeholders and the public. The plans also build on our very successful nine years operating and evaluating MIDD services and programs.

**MIDD 2 Implementation Plan:** This plan provides the following implementation details:

- A schedule of implementation of initiatives, programs and services outlined in the MIDD Service Improvement Plan
- Discussion of needed resources: staff, information and provider contracts
- Outcomes and performance measures
- Procurement and contracting information
- Community engagement efforts
- How the initiative advances the County's mental health and chemical dependency policy goals

- Updated biennial spending plan and financial plans.

Since the MIDD sales tax was extended in November, County staff have been working to implement MIDD 2 initiatives. The plan I am transmitting today details the implementation status and plans for all MIDD 2 initiatives. Of the 53 MIDD 2 initiatives, 22 are new. The majority of MIDD 1 initiatives have been continued into MIDD 2. The 53 MIDD 2 initiatives are grouped into three implementation categories: 1) new initiatives; 2) existing MIDD 1 programs continued into MIDD 2 that are to be modified; and 3) existing MIDD 1 programs continued in MIDD 2 with no substantive change. The new initiatives are in varying stages of execution:

- Of the 22, 14 are to be directly allocated to providers following the decision model for determining the need for Request For Proposals/Competitive Procurement that was included in the adopted Service Improvement Plan.
- Of the 14, nine initiatives have already been contracted.
- The remaining eight new initiatives will go through some type of procurement process (Request for Proposals, Request for Information or Request for Qualifications).

The Department of Community and Human Services (DCHS) is driving innovation to move services from silos that are difficult for people and organizations to navigate to an integrated, coordinated approach that fosters collaborations and results in better individual and population outcomes. As noted in the adopted Service Improvement Plan, MIDD 2 reflects systems integration “silo busting” principles so that services are person-centered, not program-centered.

Ongoing planning and implementation of MIDD initiatives in MIDD 2 occurs in collaboration with initiatives like Best Starts for Kids and the Veterans and Human Services Levy, and also includes partnerships in the housing, employment and developmental disabilities service areas for procurement and contracting, contract management, performance measures and data reporting whenever appropriate.

An example of DCHS and MIDD’s intentional systems integration work is the development of MIDD’s new youth and young adult crisis and diversion initiatives, known collectively as “Safe Spaces.”<sup>1</sup> In response to community feedback,<sup>2</sup> DCHS and Executive staff collaborated with providers and other stakeholders to develop a comprehensive crisis intervention and diversion approach to serving youth who would otherwise be booked into juvenile detention.

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<sup>1</sup> The initiatives that together constitute Safe Spaces are: CD-02 Youth and Young Adult Homelessness, CD-16 Youth Behavioral Health Alternatives to Secure Detention initiatives, and CD-17 Young Adult Crisis Facility. Additional information on these three initiatives is included on pages 79, 127, and 130.

<sup>2</sup> Among others, the County’s Juvenile Justice Equity Steering Committee provided key input regarding the lack of diversion options for children, youth, families and young adults in crisis that helped shape program design.

This approach is also consistent with the principles of King County's plans for behavioral health integration and health and human services transformation, which call for reduced fragmentation across systems, increased flexibility of services and coordination of care, and strong emphasis on prevention, recovery and elimination of disparities for marginalized populations.

**MIDD 2 Evaluation Plan:** This plan provides the following evaluation details:

- Process and outcome evaluation components
- A proposed schedule for evaluations
- Performance measurements and performance measurement targets and performance measures
- Data elements that will be used for reporting and evaluations
- Overarching principles
- Evaluation framing questions and approaches that will guide MIDD 2 evaluation and performance measurement for 2017 through 2025.

The MIDD 2 Evaluation Plan articulates the primary purpose of MIDD evaluation: to determine the progress of MIDD-supported programs toward meeting the adopted MIDD policy goals. It revises and builds on the Evaluation Framework for MIDD 1 services and programs based on feedback from stakeholders and guidance from evaluation experts. The evaluation of MIDD 2 will utilize a Results Based Accountability (RBA) approach to performance measurement, using categories of how much (quantity), how well (quality), and is anyone better off (impact).

In 2016, the King County Office of Performance, Strategy and Budget (PSB) conducted an assessment of the MIDD 1 evaluation approach as part of the MIDD Comprehensive Retrospective Report required by Ordinance 17998. The report examined opportunities to strengthen the MIDD 2 evaluation, and put forward 10 principal recommendations that informed its revision. The PSB recommendations, along with actions taken and planned for the MIDD 2 evaluation, are included in the plan I am transmitting today. The MIDD Advisory Committee, through its Evaluation Work Group, also provided guidance to County staff on the approach, composition and priorities for the MIDD 2 evaluation improvements.

Enhancing and improving the MIDD 2 evaluation and reporting continues in partnership with providers and the MIDD Advisory Committee. An annual MIDD evaluation summary report will be submitted to the Council each August for review and approval. The first annual report will be transmitted in August 2018.

**Major Change Drivers:** As acknowledged in the SIP, the financial and policy environment that the behavioral health system is operating in is one of ongoing evolution and transition. Major change drivers that could impact MIDD investments include:

- Physical and behavioral health integration
- Washington's 1115 Medicaid waiver and demonstration project
- Potential changes to the Affordable Care Act and Medicaid expansion, and/or
- Changes to Medicaid reimbursement rates.

These issues and their potential impacts are discussed in detail in the MIDD 2 Implementation Plan. DCHS is taking a prudent approach in light of uncertainties of the environment. The department is assessing the MIDD and working to develop contingency options should there be major shifts in Medicaid that would necessitate commensurate changes to MIDD funding allocations and programming. Additionally, a Medicaid Reconciliation Reserve has been established in the MIDD Fund financial plan to ensure MIDD initiatives that assumed a certain amount of Medicaid funding will remain whole should Medicaid funding decline.

**Commitment to Collaboration and Transparency:** I am committed to keeping policymakers and stakeholders updated on the progress of MIDD 2 implementation, particularly in light of the environmental factors that have the potential to impact MIDD over the next several months and coming years. In the spirit of continued communication and transparency that were the hallmarks of MIDD renewal, I will communicate updates on implementation of MIDD initiatives and other key MIDD impacting elements to the Council via the annual report transmitted each August. At the operational level, DCHS staff will update providers through written updates and at monthly Behavioral Health Partnership meetings, and the MIDD Advisory Committee at its monthly meetings.

**MIDD 2's Balanced Approach:** The implementation and evaluation plans I am transmitting to you reflect the balanced approach of MIDD 2: strategic investments, innovation, consistency and responsiveness. By balancing continuing and new initiatives in its implementation plan, MIDD 2 provides consistent support for the innovative and effective service array that was initiated during MIDD 1, while also making significant strategic investments via new initiatives to address current service system gaps. MIDD 2 builds on the successes of MIDD 1 while continuing to position the County to successfully address the evolution of behavioral health moving forward.

**Contribution to Strategic Plan Goals:** MIDD contributes to the King County Strategic Plan's Health and Human Services domain. MIDD is one important strategy by which King County works to improve the health and well-being of all people. As noted in the updated strategic goals and vision adopted by the Council in 2015 via Motion 14317, MIDD is a key feature of the County's efforts to achieve health outcomes via processes that are equitable and fair, financially sustainable, regionally collaborative and high-quality.

**Report Production:** It is estimated that the MIDD 2 Implementation Plan required 326 staff hours to produce, costing \$22,705, and that the MIDD 2 Evaluation Plan required 255 hours to produce, costing \$17,292.

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August 1, 2017

Page 5

If you have any questions, please feel free to contact Adrienne Quinn, Director, Department of Community and Human Services, at 206-263-9100.

Sincerely,

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King County Executive

Enclosures

cc: King County Councilmembers

ATTN: Carolyn Busch, Chief of Staff

Melani Pedroza, Clerk of the Council

Carrie S. Cihak, Chief of Policy Development, King County Executive Office

Dwight Dively, Director, Office of Performance, Strategy and Budget

Adrienne Quinn, Director, Department of Community and Human Services (DCHS)

Jim Vollendroff, Director, Behavioral Health and Recovery Division, DCHS