

Public Focus. Proven Results.™
**WA Behavioral Health Assessment
 Project Overview**
(Live Document – updated 9.6.16)

The Office of Financial Management (OFM) has requested that Public Consulting Group (PCG) provide Project Management oversight to monitor the progress and synchronization of concurrent behavioral health system improvement initiatives. Table 1 below provides an overview of the current contracts and initiatives in progress at the state level.

Table 1: Identified Behavioral Health System Improvement Initiatives

Initiative	Lead State Agency Consultant	Overview	Goals / Recommendations
Behavioral Health Integration ESSB 6312	Governor's Office	Mental Health and Substance Use Service integration is complete. Full Integration by January 2020. BHI Executive Oversight Committee established.	Full Integration of Mental Health, Substance Use and Medical care services by January 2020.
Discharge Geropsych Planning Initiative ESSB 6656 Sect 11	DSHS	Reduce the demand for thirty beds currently being used by this population by identifying and discharging patients needing long-term care.	Move patients suited to services in the community to community settings. Redeploy resources to achieve patient and staff safety goals.
Discharge Planning Initiative ESSB 6656 Section 15	DSHS	Achieve 14-day discharge standard. <i>Effective July 2018.</i>	Reduce length of time between determination that person no longer requires active inpatient psychiatric treatment and transition to community.
Jail Diversion Study Executive Initiative	Governor's Office / Joplin Consulting	Assess the current status of and expansion opportunities for diverting people with mental illness from Washington's criminal justice system. Review of existing diversion programs across the state as well as national best practices. Interview stakeholders and summarize findings on legal, financial, or other barriers to diverting people with mental illness from Washington's criminal justice system.	Identify methods of enhancing the safe and appropriate diversion of people with mental illness from Washington's criminal justice system. Explore and summarize other states' successful use of Medicaid funding to support diversion for people with mental illness from criminal justice systems.
Mental Health System Assessment ESSB 6656	OFM / Public Consulting Group	Examine the current configuration of and financing for the state mental health system through data collection and assessment, best practices research and stakeholder engagement.	Recommendations topics: Financing structure and financial incentives for State hospitals and BHO's, best practice service delivery model for serving individuals in the least restrictive environment.
Clinical Staffing Model Consultant ESSB 6656 Sect 5(3); 2ESHB 2376	DSHS / OTB Solutions	Analysis and evaluation of current staffing levels at Western State and Eastern State Hospitals, research and compare to National benchmarks, best practice research and recommendations.	Recommend a clinical staffing model for Western State and Eastern State Hospitals. Focus on the use of interdisciplinary health care teams, barriers to recruitment and retention, responsiveness to patient needs and a culture of wellness and safety.

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Systems Improvement Agreement Executive response to CMS	DSHS / Clinical Services management	Conduct a Root Cause Analysis and Report, assist in the development and implementation of an Action Plan and to provide ongoing reporting to CMS related to Western State Hospital progress in implementation.	Identify gaps and recommendations in order for Western State Hospital to achieve full compliance with Medicare Conditions of Participation.
University of WA Training Unit 2ESHB 2376	DSHS / University of Washington	Create a high quality forensic teaching unit that improves the quality of patient care and draws future psychiatrists to the State hospitals.	Conduct an analysis and develop a plan, including an appraisal of risks, barriers and benefits to implementation of a forensic teaching unit.
Workforce Development Executive Initiative	Governor's Office / Workforce Training and Education Coordinating Board and University of WA	Workforce Training and Education Coordinating Board in collaboration with the University of Washington Center for Health Workforce Studies will assess Washington's behavioral health workforce to identify factors affecting access to behavioral health care in the state.	Develop recommended action plan/strategies to address workforce-related factors that affect access to behavioral health care in the state, including the workforce needed to meet the goal of integrated primary care and behavioral health by 2020. Recommendations will consider workforce distribution, pipeline, education/training, recruitment and retention.