



April 17, 2013 Meeting Minutes

1. Meeting called to order at 2:00 PM by Chair Rochelle Doan.
2. Attendance: *Rochelle Doan – Chair, Darlene Cook – Vice Chair, Sarah VanCleve – Secretary, Chris Brunell – Member at Large, Penny Lamping, Monica Bernhard, Jenell DeMatteo, Beverly Kincaid, Susan Brown, Kirsten Jewell, Alex Fastle, Becky Boughton, Marta Holt, Shannon Bauman, Gina Lindal, Brianna McNamara, Linda Kerkes, Sara Marez-Fields, Linda Hollingsworth, Sheryl Piercy, Leann Weaver, Terry Schroeder*
3. Introductions were made around the table.
4. **Agenda Review:** No changes made.

Minutes: Chris Brunell moved and Penny Lamping seconded to approve the minutes as presented. The motion was approved.

Access to Mental Health Care – Kelly Schwab: Kelly started his presentation with a story that aptly illustrated the difference between a person who was mentally ill and one who is a danger to themselves or others. He went over some of the history of mental health care and the Involuntary Treatment Act (ITA). Prior to the ITA, it only took one person, not necessarily a medical professional, to have someone involuntarily committed. There now is a process that can be lengthy and has a high standard to meet in doing so. One example he gave was that if someone states they are going to take some pills and kill themselves, but doesn't have the pills right there available, they don't meet the standard of being a danger to themselves. A person can also be involuntarily committed due to being gravely disabled but this typically takes a series of calls before it will happen.

The process is that someone requests an evaluation; a Designated Mental Health Professional evaluates the person to determine if the person meets the criteria:

- Has a diagnosable mental illness AND
- Represents an immediate risk of harm to self, others or property OR
- They are unable to provide for basic needs of safety or health (gravely disabled) AND
- There is no less restrictive alternative available.

The DMHP may arrange for voluntary treatment if treatment is needed and the person is willing. If they are held involuntarily, they will initially be held for up to 72 hours (excluding weekends and holidays) and be evaluated. If the evaluation shows that inpatient care is required beyond the 72 hours, a petition will be filed with the court to hold for an additional 14 days. There are four outcomes that can come out of this petition: petition can be dropped for lack of evidence and patient is released; the judge can dismiss the case and release the patient; the patient is judged committable and will be held for short term commitment; or the judge will accept the patient's agreement to enter treatment voluntarily. If the patient is held for the 14 days, and it is felt that additional inpatient treatment is needed, another petition

will be filed to hold the individual for up to 90 days. A judge will make that determination and if committed, the individual will have a hearing every 180 days to determine if further inpatient treatment is required. At any point, if the patient agrees to an outpatient treatment plan, they may be released back to their community. They are monitored closely to ensure compliance with the plan.

Kelly went over some other items of interest. Adolescents are able to make their own decision about treatment at age 13. Persons with mental illness often learn what to say in order to keep them out of treatment. Many mental illnesses can be well controlled with medication. Although there is a huge population of homeless persons who are mentally ill, the goal of Kitsap Mental Health Services is to not discharge a person to homelessness.

There was a question about the interface between 211 and Housing Solutions Center (HSC). Kelly stated that he felt they have a good working relationship. 211 does not typically refer directly to most programs, unless it is DV and after hours calls. In all other instances, they will refer homeless persons to the HSC. The afterhours calls for women and women with children will be routed to St. Vincent de Paul or Georgia's House and then they will provide information to HSC the following business day. A drop-in shelter, like Kitsap Rescue Mission is working on, would be an answer to after-hours calls. Monica Bernhard stated that the HSC phone lines do direct people to 211 after hours.

There was also a question about getting hold of KMHS case managers. The case managers are out of the office most of the day typically, but should return calls. If calls aren't being returned, a supervisor could be contacted. Linda Kerkes also stated that for persons who are unstable, they could be placed in Kitsap Recovery Center's (KRC) Crisis Triage Center for a three-day stay for stabilization.

Homeless Housing Plan – Kirsten Jewell: The HHP is completed! The KRCC Board approved the plan on March 26. The final plan is on their website, on their Housing Grant Program page.

Combined Grant Program – Kirsten Jewell: The calendar will be on their website soon and all information will be in the NOFA, out April 26. Kirsten provided a few of the dates that are important:

- May 30 – **Mandatory Technical Assistance meeting** – 9 am to Noon at Norm Dicks Government Center. Important/helpful for person completing the application and/or budget to be present
- July 10 Noon – **End of Online Submission** – last date to submit applications
- Sept 20 – Grant Recommendations distributed – Begins public hearing process
- Oct 22 - KRCC Board acts on Grant recommendations for HHGP, AHGP, and County CDBG and HOME – end of public hearing
- Nov 6 – Bremerton City Council acts on City CDBG and HOME recommendations

Priority setting for the Homeless Housing Grant Program began with a brainstorm session on Tuesday with the Continuum of Care Coalition members. That will go to the Housing Funding Leadership Group (HFLG) and then to the Housing Advisory Team (HAT), a subcommittee of the KRCC Board. It will then be approved by the KCRCC Board at their meeting on May 28. Kirsten will bring the priorities to the May CoCC meeting for concurrence. At the CoCC Brainstorm session, one idea that was brought up was that there should be a balance between continued funding for ongoing projects and funding for new, innovative projects. The recommendation was to have 80% of the funding be reserved for continued projects and 20% for new projects. That recommendation will be passed on to the HFLG and HAT.

Coordinator Report – Terry Schroeder: Terry reported that she has input all the information she has the PIT count, and just received information about some agencies that needed to do a bit more input. She will send out a preliminary report with this week's TJ. She has also been working on the Housing Inventory Chart for the County Annual Report for Department of Commerce. She has sent in the

information she has received and sent out requests for more information in some cases. She attended the March Kitsap Housing Coalition meeting and the WLIHA Homeless Advisory Board meeting, where there was discussion about the conference and information from Commerce on some new projects. There also seemed to be a lot of interest in having discussions around topics. It might be something for the Executive Committee to schedule something like that for one of the CoCC meetings, instead of having a speaker.

WLIHA Conference to End Homelessness – Terry Schroeder: The date for early registration has passed, so the cost to attend is a little higher, but it is close and there is the option of attending just one day, which is very reasonable. Also, they are trying to get each county to donate a basket for the auction. It can be anything, but baskets representing the various counties are nice. Terry has some things left from last year, as she was unable to attend at the last minute. She will include those, but if anyone has anything else they would like to add, let Terry know.

Outside Homeless Committee – Darlene Cook: A lot of the time was spent talking with a South Kitsap couple, from New Life Church, who own the restaurant, “That One Place” and want to open transitional housing in South Kitsap. Walt stated that things are moving along with the overnight shelter, but there are still things that need to be done. Kitsap Rescue Mission got a new truck. There was some discussion of the emergency evacuation of vulnerable populations and it is felt that Department of Emergency Management has a handle on that.

Executive Committee – Rochelle Doan: There was discussion about the case management piece that came out of the HHP. There was a small workgroup, from the HHP Planning Committee, that looked at the definition for case management. There was discussion about having everyone using the same information/definition for case management when writing grants. Perhaps there could also be more coordination and shared information about how case management is done in various agencies. The possibility of a mobile program that would allow case managers to assist clients to access the services they need. It was felt that it would be productive to allow some time for a discussion of case management at one of the upcoming CoCC meetings.

AGENCY UPDATES

StandUp for Kids – Susan Brown: Susan passed around a brochure providing information about Adult Day Services that are provided at Canterbury Care Center, for impaired or frail seniors age 60 plus.

Housing Solutions Center – Monica Bernhard: Monica stated that she had brochures and cards for the HSC, if anyone needed some.

Georgia’s House/Weaver Foundation – Leann Weaver: Georgia’s House is turning 2! On Sunday at 2:00 pm, they are having their 2nd Birthday celebration and all are invited. They also have completed their remodel and have space for six additional beds. They serve women and women with children.

WorkSource – Linda Hollingsworth: Linda distributed a flyer for the upcoming Stand Down for Veterans that will be held on Saturday April 27, 2013 from 9 am to 2:30 pm at Sheridan Park Community Center in Bremerton.

The meeting adjourned at 4:00 pm.

Respectfully Submitted,

Sarah VanCleve, Secretary