

**Summary of Stakeholder Comment  
On the Draft Mental Illness and Drug Dependency  
Implementation Plan  
May 20-June 3, 2008**

<b>Topic</b>	<b>Comment Summary</b>	<b>Name</b>	<b>Affiliation</b>	<b>Date</b>
<b>Aging/Senior Services</b>	1) We support strategies to fund prevention and early intervention to older adults. 2) recommend a level of funding proportionate to the population of older adults. 3) support funding for crisis intervention for older adults. 4) hope you will consider evidence based strategies tailored to older adults. 5) recommend outreach strategies targeted to older adults and adults with disabilities. 6) recommend multiple delivery settings, including senior centers and meal sites. 7) continue to be concerned about the lack of designated MIDD oversight committee spots for older adults or persons with disabilities.	Michael Miller, Chair	Seattle/King County Aging and Disability Services Advisory Council	5/30/08
	Why is there no older adult representation on the Advisory Board given the prevalence of depression and cognitive disorders that go along with aging?	Joanne Donahue	Senior Services	06/02/08
	Add a representative from the aging community to the advisory board prior to finalizing the MIDD plan.	Nancy Dapper	Alzheimer's Association	06/03/08
	This plan does not seem to visibly address the mental health needs of older adults. Does someone on your Board represent the needs of older adults? How were the needs of this population addressed in the plan?	Jobyna Nickum	Enumclaw Senior Center	06/03/08
<b>Consumers</b>	The Plan suffers from lack of input from consumer experts. To establish a more credible plan, King County will be required to overcome barriers to listening to consumers.	Leonard Haan	Consumer Advocate	06/02/08

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<b>Consumers</b>	Identifies a need for the implementation and expansion of peer-run support and mentorship programs, and peer support specialists at every point of contact in the criminal justice system.	Jill M.SanJule	Peer Advocate	06/03/08
	King County ICCD Clubhouse organizations should be considered as eligible providers through the RFP process, specifically in the area of supported employment.	Erica Horn Executive Director	Hero House	06/03/08
<b>Housing</b>	Good to see housing included in the plan.	TM Connor	King County Voter and Taxpayer	5/22/08
	Housing is important to the success of the MIDD	Solana Booth	Plymouth Housing Group	5/27/08
	Housing is important to success of the plan with Native American people. Provision of a safe, secure place to live is essential to recovery	Solana Booth	Indigenous Vision	5/27/08
	Basic permanent shelter for mentally ill persons is the most important factor in their treatment	Richard Loranzo	Plymouth Housing Group	5/27/08
	Housing is key to recovery.	Chris Hollinger	Citizen	5/27/08
	Housing is very important to success of the plan.	Annette Dawson	Case Manager	5/27/08
	Housing is very important to the success of the plan.	Kerrian Suglia	Citizen of Seattle	5/27/08
	Housing is an essential component to success of the plan.	Leslie Christian	Plymouth Housing Group, Board Chair	5/27/08
	Housing is critically important to success of the plan.	Tracey Wickersham	Plymouth Housing Group, Board Member	5/27/08
	Housing is a key component of the plan.	Gretchen Reade	Seattle Resident	5/27/08
	Housing is very important to success of the plan.	Donald Mitchell	Plymouth Housing Group	06/01/08

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<b>Housing</b>	Housing is very important to the success of the plan.	Jill Zarembo	Plymouth Housing Group	06/01/08
	I am pleased that housing development is a component of this plan.	Mary Stevens	Resident/Voter	06/02/02
	Outstanding plan. Recommendations 1) housing developers to explore other parts o the county to expand outside of Seattle, 2) use the “sweat equity” model used by NAMI GS., providing a tenant with the chance to help remodel the home they are moving into. There are several benefits of this model.	Nancy Cole	NAMI, Greater Seattle	06/02/08
	Seattle supports using \$18M of unspent 2008 funds for development of new housing units or rental assistance. Also supports establishing within the currently projected annual fund an ongoing Housing/Rental Assistance Fund, up to \$10M per year.	Marilyn Littlejohn	City of Seattle	06/03/08
<b>Specific Strategies in the Plan</b>	We need much more public awareness of adolescent suicide and a way to reach out to teens. I strongly support your draft plan, in particular strategy #4d for school-based suicide prevention.	Henry Berman	Physician, Specialist in Adolescent Medicine, Children’s Hospital	5/27/08
	1) Sexual Assault Services Strategy #14A: the coordinator position should be housed at the King County Coalition Against DV, as the coordination is focused on community programs. 2) Community Sexual Assault Programs are positioned to deliver mental health care to Sexual Assault victims. Funds for these programs should not be RFPd. 3) Unspent funds in the first year could support housing, but in future years, the priority should continue to be human services.	Debbie Doane	Children’s Response Center, Harborview	5/28/08

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<b>Specific Strategies in the Plan</b>	Excellent job. Peers and advocates are best able to reach those in need. Strategy #2B provide lifelong supported employment services to those few who would require it. Strategy #5A; don't forget the health needs of juveniles who wind up in the adult system. Strategy #6a Wraparound should be accessible at multiple points in the health and justice systems. A comprehensive plan and well worth the wait.	Ron Jaeger	Washington State Dads Network	06/01/04
	A thoughtful document that gives us hope for improved service delivery. Strategy 1f: allow existing provider agencies to participate. Strategy 2a: estimates for how much funding will reduce caseloads are overstated. #16a: we support the use of start-up funds for housing.	Faith Richie	Valley Cities Counseling and Consultation	06/02/08
	Strategy #1F: parent peers: targeted numbers are too high and no dollars are allocated for supervision. #6A: please RFP for new FTEs only. There is an existing system of care.	Kate Naseth	Provider	06/03/08
	Detailed feedback provided on multiple strategies. Concerns expressed about availability of services countywide and on the Eastside for some strategies.	Carrie Hite	Eastside Human Services Forum	06/02/08
	Strategy 1g: in its early stages Alzheimer's disease often produces symptoms similar to depression. Alzheimer's screening should be included to prevent misdiagnosis. Strategy 1f: clarify what considerations will be used to determine which patients will receive services.	Nancy Dapper, Executive Director	Alzheimer's Association	06/02/08
	Clarify language re peer support and parent partner family assistance programs. Are these or can they be an aspect of mental health programs? Supports the domestic violence and sexual assault strategies, particularly placing the coordinating role in an agency working in the field of anti-violence.	Ann McGettigan, President and Executive Director	King County Mental Health Providers Association and Seattle Counseling Service for Sexual Minorities	06/03/08

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<b>Specific Strategies in the Plan</b>	Supports the domestic violence and sexual assault plans, #13a, #13b and #14b The agencies identified in these plans were specified because they are the only agencies qualified to provide the services as intended. An RFP process should not be necessary. The coordinator position should be housed at the King County Coalition Against Domestic Violence, as a community-based agency with linkages to and credibility with providers. #16B: supports the allocation of unallocated 2008 funds, but ongoing allocation to this strategy should come back to the MIDD Oversight Committee.	Merril Cousin	King County Coalition Against Domestic Violence	06/03/08
	All of the strategies that refer to treatment for chemical dependency should include language that makes it clear that substance abuse treatment for adults is also included in the funding. This is important because adult treatment services paid for by State DASA funds are limited to chemical dependency treatment, with no funding for earlier intervention and prevention. MIDD funds do not have these limits.	Linda Brown	King County Alcohol and Chemical Dependency Board	06/03/08
	Clarify peer support services. Mental health agencies should support peer and parent support specialist services. Collaboration of domestic violence and sexual assault services with mental health services is a much-needed enhancement to the system.	Trish Blanchard	Sound Mental Health	06/03/08
<b>Various</b>	Supports use of MIDD funds for supportive housing services	Laura Schaak	Seattle resident	5/23/08
	Too much government babysitting instills in people a belief that they don't have to rely on themselves.	Jerry Forrell	Taxpayer, Kirkland	5/27/08
	Applauds policy goal #4: changes will be made in the criminal justice system to create more treatment options for the courts to support rehabilitation and recovery. Evaluation is important.	Sylvia Haven	46 <sup>th</sup> District Democrat	5/27/08
	There is an overlap between the Human Services Levy and the MIDD. DCHS will avoid duplication of services.	Edie Loyer Nelson	Human Service Levy Oversight Board	5/27/08

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<b>Various</b>	Excellent work. We hope the plan will be implemented without delay. Getting people into treatment voluntarily would be a challenge.	Mahinda Werake	Northwest Defenders Association	5/27/08
	Concerns that funds for caseload reduction will be used appropriately. Also, agencies have to provide comprehensive evidence-based trauma treatment for adults who are on disability and unable to work.	Mike Staszak	SEIU member and therapist at CPC	5/27/08
	The plan looks good. Let's get drug addicts and alcoholics out of the criminal side of things and get them the help they need.	Carolyn Ladniak	Citizen	5/27/08
	Concern re a family member with a severe and mental illness who falls through the cracks. She needs housing but can't get Section 8 housing. The MIDD plan could exclude her.	Sandra Melo	Family Member	5/29/08
	Please extend the deadline for comments. Two weeks is not ample time to evaluate the plan.	Helen Nilon	Commenting as a citizen, NAMI Eastside	06/01/08
	Appreciation that the plans focuses on the whole county, the mental health court component including individuals who may be unable to opt-in for lack of legal competency. Suggestion to continue the link between reentry case management for defendants, the crisis diversion center, and treatment and supportive housing services.	Alessandra Pollock	Seattle Municipal Court	06/02/08
	Thank you for your support of domestic violence and sexual assault victims. They are often the forgotten victims of crime who have mental health needs and concerns.	Barbara Langdon Executive Director	Eastside Domestic Violence Program	06/03/08
	Address the gender-specific needs for females in the juvenile justice system. Address the needs for prostitution-involved youth, including safe housing, community-based case management, culturally-specific trauma services for young women of color	Debra Boyer, PhD	Boyer Research/University of Washington	06/03/08

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	engaged in prostitution.			
<b>Various</b>	Supports the plan as written with the following comments: 1) supportive of the emphasis on increasing access to care for people with mental health issues who do not have Medicaid, 2) for 2009 and beyond, we expect that allocations for services be fully funded and housing will not be a significant portion of the allocations, 3) let RFPs only where necessary. 4) supportive of the domestic violence and sexual assault strategies, particularly placing the coordinating role in an agency working in the field of anti-violence.	Ann McGettigan, President	King County Mental Health Providers Association	06/03/08
	Keep RFP/RFQ processes to a minimum. Build on the strengths and effectiveness of the system and its providers.	Trish Blanchard	Sound Mental Health	06/03/08
	Moving forward with three things will be critical: 1. tracking outcomes and making appropriate mid-course corrections, 2. establishing linkages between the various MIDD strategies so those served have the greatest chance for recovery and stability, 3. coordinating efforts with funding partners. Provides detailed suggestions for several strategies.	Marilyn LittleJohn	City of Seattle	06-03/08
	Use funds to cover medications for those who voluntarily take them and have no way to cover the costs.	Jill SanJule	Advocate	06/03/08