Six-Month Report on Non-Law Enforcement Co-Response Grants

May 15, 2026

Prepared for the Washington State Health Care Authority
by BHCore, a UW School of Social Work research and innovation center.

BHCORE BEHAVIORAL HEALTH
CRISIS OUTREACH RESPONSE AND EDUCATION

Six-month status Report

May 15, 2026

The Behavioral Health Crisis, Outreach and Education Center (BHCore) was established in 2024 at the University of Washington. BHCore serves the crisis response community in Washington state by providing training opportunities, funding innovative programs, supporting workforce development, and collecting data that helps shape policy and improve behavioral health service delivery. The Center appreciates the critical importance of 911 responders in the crisis system, and supports frontline responders including police officers, firefighters, emergency medical technicians, co-responders, social workers, mental health counselors, dispatchers, and peers as a part of its efforts. The UW School of Social Work administers BHCore, which is informed by a wide range of subject-matter experts in behavioral health, first response and individuals with lived experience.

The Washington state legislature provided funding during the 2023-2024 legislative session to support non–law-enforcement agencies operating co-response programs. The intent of this proviso was twofold: (1) To build additional capacity for Fire/EMS departments who are responding to behavioral health calls to employ co-response teams and (2) to encourage high quality, standardized behavioral health training for Fire/EMS.

The Health Care Authority (HCA) contracts with the University of Washington's Behavioral Health Crisis Outreach Response and Education (BHCore) to manage proviso funds to carry out this legislative intent. BHCore oversees capacity grants to fire/EMS agencies, offers training to departments and trains trainers in specialized behavioral health response (COAST), and maintains a data dashboard to share information about emergency system diversion and other program activity.

In 2024-2025, nine Fire/EMS agencies were awarded innovation grants through BHCore. Eight offered Coast training to their departments. Information on those grants and training outcomes are available here. https://bhcore.org/wp-content/uploads/2025/01/BHCore-Grant-reportFINAL5.pdf

In 2026-2027, six Fire/EMS agencies were awarded grants by BHCore along with one behavioral health agency partnering with a Fire Department. The period of performance for these grants is January 2026-June 2027.

This report provides an overview of the 2026-2027 innovation grant program, the current status of BHCore grantees, an update on BHCore training and the BHCore data dashboard.

Innovation Grant Award Process

Applications were accepted from fire/EMS agencies interested in creating, expanding, or sustaining co-response services.

Following meetings with the Washington Health Care Authority and Department of Health, four key innovation areas for awarding grants were established and advertised:

- **Engagement in efforts to support suicidal patients through community-based care.** Agencies applying for this innovation area shall propose plans to divert patients from emergency rooms, connect them to community-based care post-ER discharge, provide follow-up and caring contacts, work with medical directors to revise response protocols based on suicide prevention pathways, and/or build collaborative relationships with other service providers in the region.

- **Engagement in efforts to proactively address behavioral health needs through field-based medication administration programs** that include brief interventions and coordinated care with community partners. Eligible programs may focus on opioid use disorder, alcohol use disorder, or the need for antipsychotic medications in the field.

- **Engagement in efforts to utilize and supervise peer support specialists** as part of a co-response team or work with peers through a referral pathway.

- Engagement in efforts to employ multidisciplinary teams to respond to behavioral health emergencies/referrals in **underserved areas of the state** where there is a co-response desert.

BHCore announced the availability of 2026-2027 innovation grants in the fall of 2025 and issued a request for proposals on October 30, 2025. BHCore Fire Innovation Grant Program Manager Kim Hendrickson held a grant information session on October 30, 2025. Information was provided about the application process, timeline, and grantee expectations.

Nineteen applicants responded to this solicitation on or before the deadline date of December 1, 2025. Of these nineteen applicants, one was incomplete. The remaining eighteen were reviewed by a committee composed of representatives from the Department of Health, four Fire/EMS agencies (one recently retired), an Accountable Community of Health (ACH), a Behavioral Health Administrative Services Organization, and BHCore Grant Program Manager Kim Hendrickson. BHCore Project Facilitator Jennifer Cohen served as scribe. Review members were geographically diverse, working in regions in Western, Central, and Eastern Washington.

Based on scoring and the review group's interest in innovation and geographic diversity, the following applicants were chosen along with award amounts:

Increasing accessibility to behavioral health medications in field:

Port Angeles Fire in partnership with Clallam County Fire District #2, Clallam County Fire District #4, Lower Elwha Klallam Tribe	$270k
Riverside Fire Authority	$270k
Conquer Health in partnership with Everett Fire (and potentially South County Fire EMS)	$400k to fund Fire/Conquer field team partnership
Walla Walla Fire Department	$270k

Adopting suicide prevention strategies:

Snohomish County Fire District #5	$270k

Use of peers on co-response team:

Yakima County Department of EMS	$270k

Serving areas of the state without current co-response services:

Anacortes Fire, City of Anacortes, City of Mt. Vernon, Skagit County Sheriff's Office, Skagit County Public Health	270k-with clear guidance that funds cannot be used for police co-response.

Update on Awardees

As of May, 2026, all departments have signed contracts with the University of Washington and have made significant progress on starting/expanding their programs.

Increasing accessibility to behavioral health medications in field:

Port Angeles Fire in partnership with Clallam County Fire District #2, Clallam County Fire District #4, Lower Elwha Klallam Tribe	Port Angeles Fire is using funds to support its co-response program and buprenorphine administration/post overdose response program It is also expanding services into underserved rural and Tribal Areas, expanding coverage from 10.2 square miles to over 170 square miles. The Department continues to develop strong community partnerships as part of its overdose response strategy. Notably, it is working with Olympic Medical Center and ScalaNW to develop a pre-hospital, hospital, and post hospital care continuum to encourage medication assisted treatment for patients with substance use disorders.
Riverside Fire Authority	Riverside Fire is currently hiring another community paramedic to join its existing CARES team and strengthen its overdose response program. It aims to have all paramedics equipped with buprenorphine and long-acting injectable (LAI) medication to treat psychosis. Riverside Fire works closely with a local medication assisted treatment clinic and crisis center to facilitate handoffs to care. They recently established an alternative destination protocol that can be used by fire and EMS countywide to avoid unnecessary hospitalization.
Conquer Health in partnership with Everett Fire (and potentially South County Fire EMS)	Conquer is creating a RESPONSE team to work closely with Everett Fire and other fire/EMS partners. The RESPONSE team consists of a psychiatric nurse prescriber and a case manager that accept fire/EMS referrals. The team will respond to individuals with severe mental illness and substance use disorders who are high utilizers of emergency services. The team can prescribe and administer antipsychotic (and other) medications and provide warm handoffs to community services.
Walla Walla Fire Department	Walla Walla Fire is creating a department wide overdose response program that includes medical resource technicians and a provider able to provide prescriptions. Pending approval by DOH, all paramedics are able to administer buprenorphine. The Department is also working on protocols related to a long-acting antipsychotic injectable. By delivering medications in homes and in the field, Walla Walla Fire aims to reduce the need for involuntary holds, transport, and hospitalization when safe and clinically appropriate. The Department's CARES program has also started a crisis and community engagement canine program. Wally is being trained as a therapy dog and will be a part of behavioral health outreach efforts.

Adopting suicide prevention strategies:

Snohomish County Fire District #5	The Department has hired a new, district wide Community Resource Emergency Medical Technician (CREMT). The CREMT accepts referrals involving behavioral health issues from all fire/EMS personnel and is specifically working to improve the Department's suicide prevention capacity through early medical assessment, suicide risk awareness, and referral partners.

Use of peers on co-response team:

Yakima County Department of EMS	Funding is being used to create the new SPRINT program that partners EMTs from Yakima EMS with rapid response peers from Triumph Treatment Center. The team includes a psychiatric nurse who can prescribe and administer medications for opioid use disorder. The SPRINT team will respond to 911 calls involving opioid related overdose. Yakima County continues to experience one of the highest overdose death rates in Washington State, with current treatment capacity unable to meet local needs. Yakima EMS' multidisciplinary approach will reduce fatalities, connect people to treatment, and reduce strain on emergency systems.

Serving areas of the state without current co-response services:

Anacortes Fire, City of Anacortes, City of Mt. Vernon, Skagit County Sheriff's Office, Skagit County Public Health	Skagit County Public Health is hiring a new Mental Health Professional to support the Anacortes Fire Department Outreach Team. Funds are also being used to support a Mobile Integrated Healthcare Provider jointly funded by the Burlington and Sedro-Wooley Fire Departments and the Community Social Worker and Community Paramedic positions at the Anacortes Fire Department. As the co-response program in Skagit County expands, new referral processes and technology are being put in place to better coordinate care.

Additional Innovation Grant Activities

Behavioral Health Training

All grantees are required to partner with BHCore to offer *COAST: A Roadmap for Fire/ EMS Responding to Behavioral Health Calls* in their departments. COAST is designed to provide an overarching approach for responding to behavioral health related calls and includes modules on the overlapping qualities of physical health and behavioral health symptoms, strategies to build safety and rapport, and connecting patients to community resources both during and after crisis situations. COAST training includes two specialized modules of increasing importance to fire/EMS responders: overdose response and responding to calls involving suicide attempts and suicidal behavior.

A COAST "train the trainer" session for representatives from all programs is scheduled for July 9 and 10 at the University of Washington. All departments will offer COAST in their departments at least once in 2026 and 2027.

In addition, all grantees were invited to send co-responders to POISE, BHCore's 40-hour training for crisis responders across the crisis response continuum. Three departments (Snohomish Fire, Port Angeles Fire, Riverside Fire) sent team members to participate in this training.

Data Collection Enhancements

BHCore works with Rainbow Health to develop a data dashboard to show how innovation grant programs are diverting individuals from unnecessary emergency room utilization and connecting patients to community care. This dashboard will be live on the BHCore website in June 2026 and will provide real time information about department practices in hospital diversion and alternative destination transportation.

Peer to Peer Learning & Technical Assistance

BHCore encourages peer-to-peer learning among their fire/EMS grantees. Agencies starting up co-response programs are partnered with agencies who have established programs, and three opportunities were offered between January and May for program staff to meet and share experiences. BHCore provides ongoing access to webinars and in-person conference opportunities including a monthly learning collaborative with partners at the University of Washington Addictions, Drug and Alcohol Institute (ADAI) to share emerging best practices around buprenorphine administration in the field and other overdose responses.

Quarterly technical assistance is provided by BHCore Program Manager Kim Hendrickson and BHCore Research and Evaluation Manger Hyun-Jun Kim. Administrative support is available to all grantees by Project Facilitator Jennifer Cohen.