



*Whatcom County Incarceration Prevention
and Reduction Task Force*

DRAFT 2019 Annual Report

June 30, 2019

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Task Force Committees may include Task Force members, their proxies, or other agency staff or community members.

TABLE OF CONTENTS

Introduction and Executive Summary	5
2019 Annual Report	8
Introduction.....	8
Legal and Justice Committee.....	9
Behavioral Health Committee.....	17
Crisis Stabilization Facility Committee.....	22
INDEX Committee.....	25

I. Introduction and Executive Summary

TASK FORCE STATEMENT OF PURPOSE. The Incarceration Prevention and Reduction Task Force was formed by an ordinance of the Whatcom County Council in 2015 to review Whatcom County’s criminal justice and behavioral health programs and recommend changes to reduce incarceration of individuals struggling with mental illness and chemical dependency, and to reduce jail use by pretrial defendants who can be safely released. The Task Force includes a broad range of participants including representatives from organizations involved in criminal justice and law enforcement, policy makers, service providers, members of the public, and consumers of services. In 2019, the Task Force’s role was broadened by the County Council to also serve as the County’s Law and Justice Council, responding to a requirement in state law and creating an ongoing oversight function for the group.

The Task Force has established four committees to work on criminal justice or behavioral health issues and needs. A *Crisis Stabilization Facility Committee* is advising the County on the development of an expanded crisis facility. A *Legal and Justice System Committee* is examining reforms in law enforcement and justice system practices. A *Behavioral Health Committee* is identifying ways to improve delivery of mental health and substance use disorder services. In 2018, a new *Information Needs and Data Exchange (INDEX) Committee* was formed to improve data systems, information-sharing across jurisdictions, and availability of outcome data. Progress in the prior year is noted briefly below.

Legal and Justice System Committee

- ***Pretrial Services Unit Established; Work Continues on Risk Assessment tool***

A risk assessment tool for pretrial release decisions, and a capacity to monitor defendants who are released, have been demonstrated to be an effective tool to reduce incarceration. The Legal and Justice System Committee’s Pretrial Processes Work Group has worked to develop a pretrial program for Superior Court. A manager has been hired to oversee a pretrial services unit, and the Court has retained a data scientist to identify risk factors that are predictive of failures to appear in court or of committing a new crime. This information will be used to produce a tool that is neutral to racial and other factors that can result in disparate treatment.

- ***Drug Court Gets National Review***

Drug Court provides a method of sentencing that voids criminal charges in exchange for successful participation in substance use disorder treatment and other activities. The Drug Court team engaged technical experts through the National Association of Drug Court Professionals (NADCP) to review the operations of the program for adherence to national standards. Resulting recommendations include improving criteria for eligibility; adopting standardized assessments of participant risks and needs; and, ensuring that contracted providers use best practices.

- ***Improved Services are Available at Local Courts***

A Moral Reconciliation Therapy (MRT) program has been established at District Court that uses cognitive-behavioral therapy to address substance abuse, domestic violence, trauma, and other issues. A separate MRT program has been created for domestic violence perpetrators, and capacity will be expanded as more probation officers receive training.

- ***Medically Assisted Treatment (MAT) now available in the County Jail***

A Medically Assisted Treatment (MAT) program was implemented in September 2018 to assist those with opioid use disorder to withdraw under medical supervision. A second phase was implemented in February 2019 to allow the use of an opioid substitute for offenders already on a community maintenance program. A third phase will begin later this year and will initiate medication for individuals willing to work with a community provider upon reentry.

Behavioral Health Committee

- ***The GRACE program is now operational***

The Ground-level Response and Coordinated Engagement (GRACE) program works to reduce episodes of unnecessary and costly contacts with law enforcement, EMS, the hospital emergency department, and the jail. SeaMar Community Health Center was selected as the GRACE administrative hub and the program is now operational. A Program Manager has been hired, and most other staff positions have been filled. The program is operating throughout the entire county.

- ***Crisis Response and Behavioral Health Capacity is Increasing***

The County conducted a multi-agency behavioral health training in 2019, including training on behavioral health disorders and brain dysfunction, and hoarding disorders. In addition, the number of Medication Assisted Treatment (MAT) providers offering services in Whatcom County has more than doubled in the prior two years. Lastly, the County Sheriff and City of Bellingham Police Department are adding officers with behavioral health expertise to their staffs, and Ferndale is adding a community paramedic to its Fire Department.

- ***Local Leaders Participate in Young Adult Policy Academy***

Local and state leaders are participating in a grant-funded multi-city process to develop policies to reduce young adult incarceration. The Bellingham/Whatcom team's plan includes writing a multijurisdictional resolution focusing on measures that will reduce the number of young adults jailed for 72 hours or less, a factor associated with long-term adverse outcomes. The resolution calls for prioritizing prevention of young adult incarceration, developing an in-field crisis response capacity, and for complete operational funding for the Crisis Stabilization Facility.

Crisis Stabilization Facility Committee

- ***Crisis Stabilization Facility Ready to Break Ground***

A new 32 bed dual mental health treatment/substance use stabilization facility will be developed on County property on Division Street in Bellingham. County staff have hired an architectural firm and design work is currently in the final stages. The County is ready to submit plans to the City, and a request for construction bids has been prepared. Groundbreaking should occur this summer, with project completion expected 12 to 14 months thereafter.

- ***State Operational Funding has been Secured for 2020-21***

Although a stabilization facility is expected to receive Medicaid dollars for some services, services for the 30% of people not enrolled in Medicaid may not be reimbursed. County staff and local elected leaders worked with our legislative representatives in Olympia to secure \$1 million in the 2020-21 state budget for supplemental operating funds. The budget proviso also instructed the Health Care Authority to devise a plan by the end of 2019 to provide long-term funding for this and similar centers.

- ***Facility Operations Plans are Being Developed***

The Crisis Stabilization Facility Committee has worked with County Department of Health staff to develop criteria for the future services at the center. The facility will operate under a “recovery model” although 12-hour involuntary holds may occur in the mental health side of the facility under limited circumstances. Providers will conduct on-site medical clearances for admission and work to optimize drop-offs by law enforcement and EMS. Both sets of operations will be able to prescribe and manage administration of medications.

INDEX Committee

- ***A Data Inventory has been Completed***

Committee members from a number of jurisdictions created an inventory of data that can be made available to support the work of the Task Force and help improve justice operations. Specific data points to be collected were identified through the work of the Task Force’s committees, the final report from the Vera Institute of Justice, and a list of primary data elements from Dr. James Austin, JFA Institute. Committee members also identified system barriers to good information and to information-sharing and worked to solve these problems.

- ***Data Availability is Being Improved***

Lack of timely information on the status of inmates held in custody can impede timely case processing. County technical staff are working with the INDEX committee to develop reports on inmate status. Each court agency will receive a customized report on inmates’ time served as sentenced by the courts, and city prosecutors will receive a point-in-time report on who is in jail on their city cases. Another project will revamp the County’s web pages to enhance the availability and clarity of data available to the public and policy makers.

- ***Data on Young Adult Offenders age 18 to 24 Developed for Policy Academy***

A local team consisting of City and County Council members, state representatives, and city and County staff requested data on young adult incarceration to inform their work in the grant-funded national Policy Academy. The Committee’s technical workgroup developed a Young Adult Inmate report to provide statistics on bookings, average length-of-stay, and top offenses for young adults aged 18 to 24.

II. 2019 Annual Report: Incarceration Reduction Programs and Initiatives

A. Introduction

The Incarceration Prevention and Reduction Task Force was formed by the Whatcom County Council in 2015. Its purpose, as stated in Whatcom County Code Chapter 2.46, is to “...continually review Whatcom County’s criminal justice and behavioral health programs and make specific recommendations to safely and effectively reduce incarceration of individuals struggling with mental illness and chemical dependency, and minimize jail utilization by pretrial defendants who can safely be released.” The Task Force is made up of participants from a broad range of sectors, including local judicial and law enforcement agencies, behavioral health organizations, local government executive and legislative representatives, members of the public, and consumers of services. In 2019, the Task Force role was broadened to also serve as the County’s Law and Justice Council, fulfilling a requirement in state law and creating an ongoing oversight and coordination function for the group.

The Task Force has established four Committees to work on specific criminal justice or behavioral health issues:

- A *Crisis Stabilization Facility Committee* is supporting development of an expanded Crisis Stabilization Facility for initial treatment of individuals experiencing acute behavioral health issues and to provide an alternative to jail and the hospital emergency department.
- A *Legal and Justice System Committee* is examining reforms in law enforcement and judicial practices to safely divert more people from jail, or reduce time in incarceration when possible.
- A *Behavioral Health Committee* is identifying ways to improve delivery of mental health and substance use disorder treatments to help people avoid entanglement with the justice system, or help them successfully transition out of it.
- An *Information Needs and Data Exchange (INDEX) Committee* is working to improve data availability, provide jurisdictions with data to improve operations, and making information on incarceration trends available to the public and policy makers.

This report summarizes a broad range of activities and outcomes resulting from the work of the Task Force and its involved agencies.

A BRIEF OVERVIEW OF TASK FORCE ACTIVITIES.

In 2018, the Legal and Justice Committee formed a working group to accelerate the development of a pretrial risk assessment tool and a pretrial services program, and significant progress has been made, including the inauguration of a pretrial services program. A number of improvements to the Drug Court are also being implemented. Now that construction money has been secured and design work for a stabilization facility have been completed, the Crisis Stabilization Facility Committee is focusing on refinements to the operational model, and on ensuring adequate long-term operational funding for the facility.

The new INDEX Committee, focused on improving data availability and quality, is developing measures to track progress and facilitating improvements in data systems and cross-jurisdictional information-sharing. A number of improvements to data collection capacity have been identified and are in the early stages of being made

operational. The Behavioral Health Committee supported the inauguration of the new Ground-Level Response and Coordinated Engagement (GRACE) program to provide care coordination and case management to people who are frequent utilizers of various systems. A hub organization to coordinate GRACE is under contract, staff have been hired, and the program is now in operation countywide. Behavioral health response capacity in law enforcement is also increasing.

Expanded treatment for opiates is another critical element for our community—especially new capacity for Medically Assisted Treatment (MAT) regimens that have been shown to be effective in ameliorating the effects of addiction. Local capacity in the community has increased, and new MAT programs in the jail are being phased in.

Despite these gains, certain issues highlighted in last year’s report remain. While the County is ready to break ground on its Crisis Stabilization Facility, financing mechanisms to fully fund this and similar facilities statewide long-term are not yet in place. Although a state budget proviso will help shore up funding for the next two years, the Crisis Stabilization Facility Committee remains vigilant in its efforts to secure sustained funding.

Housing remains an issue. Housing is needed post-incarceration, during treatment programs, and for those with long-term behavioral health needs. While local program partners have been successful in procuring funding for housing for Drug Court participants and other individuals in local treatment programs, capacity remains insufficient.

Specifics of activities and accomplishments of the Task Force and its committees are detailed below. Where applicable, issues or barriers to progress are also identified, along with possible solutions to those barriers.

B. Progress Report: Legal and Justice System Committee

Members of the Legal and Justice System Committee have engaged in a wide array of recent initiatives. Activities included development of a pretrial risk assessment tool and of a pretrial services unit, improvements to the Whatcom County Drug Court, warrant reduction efforts, and expansion of access to jail alternative programs. Specific initiatives, progress, and remaining issues are discussed below.

PRETRIAL RISK ASSESSMENT AND PRETRIAL SERVICES

Goals: There are two goals for improvements to pretrial practices:

Despite gains in the prior year, certain issues highlighted in last year’s report persist, including housing availability and full funding of the Crisis Stabilization Facility.

- Select and implement an accurate assessment tool for judges to use in identifying defendants who may be conditionally released while awaiting trial, and in ordering release conditions for those defendants.
- Implement a program for monitoring defendants on pretrial release.

Context: Roughly three-fifths of Whatcom County Jail inmates are awaiting trial, most of them in Superior Court. However, unlike with the District Court, the Superior Court has no probation department or other resources to assure that these people will appear in court as ordered and refrain from violent crime in the meantime, leaving judicial officers with bail as the only option. Very few pretrial defendants can pay even a modest bail.

The Pretrial Processes work group was formed in early 2018 as a part of the Legal and Justice System Committee, with two purposes: to identify and implement pretrial monitoring and referral services for appropriate defendants; and, to help the courts select the most effective tool to assist judicial officers in determining the defendants for whom pretrial services will be an effective alternative to bail. Chaired by Superior Court Judge Deborra Garrett, the group includes a District Court judge, the administrators of both Superior and District Courts, representatives of the Prosecutor's Office and the Public Defender, a victims' advocate, and two members of the Legal and Justice Systems Committee.

At about the same time, the State court system formed a multi-stakeholder Pretrial Reform Task Force to assess needs for pretrial reform on a statewide level and to recommend appropriate legislation. Two members of the work group participated in that state task force. The interaction with colleagues elsewhere working on the same issues proved extremely valuable. The state task force concluded its work at the end of 2018 and the local work group has found its reports and recommendations helpful in charting a course for Whatcom County.

Progress: Working with the Superior and District Courts, the Pretrial Processes work group is achieving both its goals.

Pretrial Services Unit: The work group studied the experiences of many jurisdictions and found that pretrial monitoring and reminder services have been effective in many courts. The services vary, but core services common to most pretrial services units include text and telephone reminders of upcoming court dates; regularly scheduled check-ins or other required contact with defendants awaiting trial; regular monitoring to assure that the pretrial defendant does not incur new charges; and referrals to appropriate treatment and mental health services. Working with the administration of the Superior Court, the work group recommended graduated steps in developing pretrial services and programs. With funding approved by the County Council, the Court conducted a search and hired a manager to establish a Pretrial Services Unit within the Superior Court. This manager is developing operating protocols and policies, initiating monitoring services approved by the judicial officers, and recommending additional services. A second staff member will be hired within the next several months.

Reliable demographic information is essential for every pretrial services program to identify the defendants who are most likely to respond to pretrial monitoring and services, and to assess the impacts of those services on an ongoing basis after services are implemented. Working with the Superior Court administrator who began compiling demographic information specific to pretrial issues, the work group worked to identify demographic experts familiar with the process of compiling and assessing information about jail populations. With the assistance of the Washington Administrator of Courts, the

group retained Dr. Andrew Peterson to assess the 2018 jail population by crimes charged, criminal history, bail set, and other pertinent information. Dr. Peterson has done a preliminary assessment, based on 2018 information, and will assess the impacts of pretrial services on an ongoing basis.



Work group members wanted a risk assessment tool that was understandable and transparent rather than one using an unknown and inaccessible algorithm.

Pretrial Risk Assessment Tool: The use of pretrial risk assessment instruments in making pretrial release decisions has gained wide currency in the national movement for criminal justice reform, based on research establishing that data-informed decisions are sounder and more consistent than those resting only on one individual's subjective conclusions. Pretrial risk assessment instruments give the judicial officer information, based on a defendant's criminal history, current charges, court attendance in the past, and similar factors, that indicates whether a defendant is likely to fail to return to court when required and whether a defendant is likely to commit a crime while awaiting trial. These factors help ensure compliance with existing state court rules that call for pretrial release of low risk individuals.

A risk assessment tool gives information to the judicial officer, who ultimately decides what release conditions are appropriate for a given defendant. Risk assessment tools are helpful to the judicial officer because they give pertinent background information and prioritize specific elements of that information for the judicial officer's consideration. They give more weight to those factors that experience has shown to be most predictive of success or failure pretrial. The assessment is a helpful tool for the judicial officer, who remains the ultimate decision maker.

The work group carefully considered the pros and cons of adopting a risk assessment instrument and studied various versions of such instruments used elsewhere in the state and nationally. The work group established criteria for its approach that would rely on accepted best practices in the field. Members agreed that a risk assessment instrument should be used to inform a judicial officer's decision, with the decision ultimately based on the judicial officer's discretion and experience. They also agreed that a risk assessment instrument should be statistically validated at adoption to ensure that it accurately predicted risk for the local population. Members favored an instrument using information that was both reliable and quickly obtainable. They also wanted a risk assessment instrument that would be understandable, simple to use, and transparent in its application, rather than one that produced results through an unknown and inaccessible formula or algorithm. Finally, the tool must produce results that are neutral as to racial, ethnic, and other factors which have resulted in disparities in other areas of law enforcement and criminal justice administration. This can be achieved with careful and frequent demographic monitoring and updating, which will indicate which factors are truly predictive for the Whatcom County population.

The work group consulted with the Superior Court judges to identify a tool that best meets these criteria and will continue to work with the Court on the application and continuing validation of its risk assessment tool.

The Pretrial Processes work group also consulted with Dr. Andrew Peterson, a criminal justice data scientist employed by the Washington Administrative Office of the Courts who was an advisor to the state Pretrial Reform Task Force. In part using the statewide courts database, Dr. Peterson analyzed

hundreds of Whatcom County Superior Court and District Court cases compiled since May 2018 to determine the factors that best predict the risks of a failure to return to court or to commit a new violent crime, and his work is shaping the final form that a local pretrial risk assessment instrument will take. He will also continue assisting the Whatcom County effort by re-validating that instrument while it is in use, including testing for its neutrality on racial and ethnic factors, and recommending adjustments he thinks are necessary. The work group's reliance on this expertise furthers its commitment to a rigorous, evidence-based approach to developing a pretrial program.

DRUG COURT IMPROVEMENTS

Goal: Effective engagement with high-quality treatment and appropriate support services for as many defendants with substance use disorder as possible, as an alternative to prosecution and incarceration.

Context: The drug court program involves staff from the prosecutor's office, the Superior Court bench, the Public Defender's office, and treatment professionals. Since the Whatcom County Drug Court program was established in the 1990's, the use of therapeutic courts has spread widely and an extensive body of research has looked carefully at practices that are effective for promoting successful treatment interventions and a redirection of drug court participants away from cyclical incarceration and into more productive and healthy lives. Over the last few years, some Drug Court team members have viewed the program as working well, while others have raised questions about how participants are selected, whether the program could divert even more individuals from jail, and whether treatment services were as robust as possible.

Progress:

Assessment of local practices: In 2018, with the encouragement of the Legal and Justice Systems Committee, the Drug Court team engaged technical assistance experts through the National Association of Drug Court Professionals (NADCP) to assess whether the Whatcom County Drug Court utilized current evidence-based practices and to recommend improvements if needed. Team members completed detailed questionnaires about the operation of the program and a NADCP-affiliated evaluator conducted a two-day site visit to Whatcom County in February 2019 to observe and talk to the team members.

A report of this assessment, with recommendations for possible improvements, was received on May 1 of 2019. The evaluators noted the leadership of Judge Raquel Montoya-Lewis, and commended the entire team for requesting technical assistance to implement best practices and for its dedication to the program. Among other points, the assessment report recommended improving the legal criteria for eligibility, adopting validated, standardized assessments of participants' risks and needs to better guide services, strengthening the expectation of evidence-based practices with treatment providers, and pursuing grant funding to address program needs. Both the Drug Court team itself and the Legal and Justice Systems Committee will work on ways to implement the changes suggested.

Development of supported housing: The Opportunity Council, in partnership with Lifeline Connections, intends to rehabilitate a property in Bellingham for the purpose of creating a Recovery House that will serve people who are committed to their recovery from substance use disorders, and who will benefit from a high level of support from professional staff. The project will be located at a property on Girard Street, formerly a recovery house and detox program owned by PeaceHealth, that has been vacant for

over ten years. The two buildings will be rehabilitated to Washington Department of Health standards for a Level 4 Recovery Residence (as specified by the National Alliance for Recovery Residences).

This type of program provides peer-supported services plus life skills and clinical programming by a licensed treatment provider. This level of care includes a high degree of daily structure and 24/7 staffing. In addition, the program includes mental health services provided by mental health professionals on staff. This project adds a significant, missing component to our local continuum of care. The emphasis of this level of care is equipping participants for the next phase of recovery, which could be another residential level of care, or independent living and employment.

This project was inspired by recommendations from Whatcom County's Incarceration Prevention and Reduction Taskforce, the Drug Court program staff, and Superior Court Judge Montoya-Lewis, who approached Opportunity Council seeking solutions to the housing stability challenges of Drug Court participants. Project partners expect that Whatcom County Drug Court and Whatcom County Mental Health Court will be primary sources of referrals to the Recovery House program.

Opportunity Council was awarded a \$1,000,000 grant for the capital costs of the rehabilitation, and Whatcom County Health Department and Lifeline Connections helped to secure the operating funding. Opportunity Council is in the early design phase and anticipates construction starting later this year, hoping to begin delivering services in late 2019.



The Drug Court assessment report recommended improving the legal criteria for eligibility and adopting validated, standardized assessments of participants' risks and needs.

SHORTENING CASE PROCESSING TIMES

Goal: Reduce the time people are held in jail, especially pretrial, by enhancing the efficiency of Court operations and decision-making.

Context: The Vera Institute's Final Report to the Task Force noted that cases in Whatcom County courts progress from initiation to resolution more slowly than state standards call for and cited this as one of the reasons there are more defendants in the jail than necessary on any given day. The Legal and Justice Systems Committee suggested that this factor would be an area amenable to improvement, with a resulting reduction in incarceration.

Progress: The Prosecutor's Office and the Public Defender's Office have begun discussing possible steps to reduce delays in case processing time and have presented preliminary proposals to the Superior Court judicial officers. At present, this discussion is on-going. The Legal and Justice System Committee will seek periodic progress reports and will lend any assistance it can to the effort.

CHANGES AT COURTS OF LIMITED JURISDICTION

Goal: The purpose of changes at the municipal and district courts include the following:

- Expand capacity for alternative sentencing at courts of limited jurisdiction
- Provide effective prevention therapies where applicable
- Provide pretrial services and notifications to reduce warrants

Progress:

District Court: An MRT (Moral Reconciliation Therapy) program has been established. MRT is a proprietary systematic, cognitive-behavioral treatment system that uses tailored approaches to address substance abuse, domestic violence, trauma, and other issues. This program draws its participants from Mental Health Court clients and individuals assigned to the probation office's Behavioral Health Unit. The MRT program is being evaluated for its effectiveness with this population.

A separate DV-MRT program has also been established for clients being supervised for domestic violence cases. There is one group currently operating with a nearly full cohort of 9 clients. Two additional Probation Officers will be attending training in May and will also become certified to conduct these classes. These additional trained staff will give the Whatcom County Probation Office the option of increasing the number of treatment group sessions offered.

Having shown its effectiveness, the District Court's text message reminder program now sends reminders to defendants for all probation appointments, scheduled substance testing, and court hearings in District Court and the Bellingham, Blaine, Everson, Lynden and Sumas Municipal Courts. (In October, the department also began texting reminders for Superior Court's arraignment and out-of-custody plea calendars). Finally, District Court in the past year formed a Pretrial Unit with four current staff members credentialed as Certified Pretrial Services Professionals with the National Association of Pretrial Services Agencies.

Bellingham Municipal Court: As of March of 2019, more than 1,000 Bellingham Municipal Court defendants have completed sentences on Electronic Monitoring rather than in Whatcom County Jail. This has enabled those defendants to remain employed, attend school, continue with treatment, keep children in their custody, attend medical appointments and still be held accountable for their actions. The City subsidizes any defendant who is indigent so that inability to pay never prevents a defendant from serving their time on Electronic Monitoring instead of in the jail. This program has resulted in a savings to the City of over \$2 million dollars.

The City has also recently hired a Jail Alternatives and Diversion Manager to oversee this program and to help the City explore additional alternatives to incarcerating nonviolent offenders through diversion programs and expansion of other jail alternatives.

Small Cities Municipal Courts. Since August of 2018 the Municipal Courts for the Cities of Blaine, Everson, and Sumas have established a contract to allow for Electronic Monitoring as an alternative to being housed at the Whatcom County Jail. The three cities combined have used GPS monitoring on 24 individuals for a combined total use of 763 days as of June 2019. This has allowed individuals qualified for the program to be held accountable for their actions while remaining employed and continuing with treatment programs. The total savings for the three cities as an alternative to being held in Whatcom County Jail was \$79,352. The courts are also allowing some defendants to be released pre-trial with alcohol monitoring devices, some of whom may have otherwise remained in jail with a high bail.

LAW ENFORCEMENT AND JAIL INITIATIVES

Goal: Goals in this area are threefold:

- Ensuring the best services are provided to vulnerable populations in contact with law enforcement by adopting a liaison and problem-solving approach that connects people with appropriate social service agencies to reduce future calls for service and incarceration;
- Provide better access to jail alternative programs to reduce incarceration and the need for warrants;
- Provide better access to needed services within the jail, and at re-entry.

Context: Many 911 calls have a mental health/substance abuse component. Because of the lack of dedicated follow-up, these particular incidents may result in repeated calls for help by the individual, the individual's family, or simply by a concerned citizen who is witnessing the crisis. The goal of these changes is to provide appropriate care to persons in crisis while reducing repeat calls for service. This is done by taking a proactive approach to mental health issues and substance abuse in Whatcom County and in the City of Bellingham.

Progress: Both the Whatcom County Sheriff's office and the Bellingham Police Department are enhancing their ability to properly respond to individuals with behavioral health issues. Changes are described below.

Sheriff's Office Crisis Intervention Deputy. The Whatcom County Sheriff's Office established a Crisis Intervention deputy position in 2018 to assist the Patrol Division to effectively intervene and de-escalate crisis situations involving persons with behavioral health issues. The Crisis Intervention deputy works to divert subjects experiencing ongoing crisis issues from the criminal justice system prior to their arrest for a criminal act. The Crisis Intervention deputy will also divert chronic utilizers of 911 services to the appropriate service providers, including referring participants to the GRACE program. These diversions are expected to reduce the cost of incarceration and court proceedings, limit the continued response time deputies must spend returning to deal with the same individuals, lessen the impact crisis situations have on limited law enforcement resources, and increase deputies' ability to handle other calls for service and conduct proactive patrols.

The current Crisis Intervention deputy, Jamie Collins, began serving in this role in September 2018. Prior to that time, he attended basic and advanced training in Crisis Intervention and de-escalation, as well as spending time with established Crisis Intervention programs of the Seattle Police Department and King County Sheriff's Office. In addition, Deputy Collins expects to complete his graduate study for a master's degree in counseling psychology in early 2020.

The Crisis Intervention deputy will be a liaison between the Sheriff's Office and the behavioral health community and other social service organizations. The Crisis Intervention deputy meets on a regular basis with behavioral health providers to ensure that persons experiencing crisis are being connected with the services they need. The Crisis Intervention deputy collaborates on behavioral health issues with the Incarceration Prevention and Reduction Task Force's Behavioral Health Committee, the County Health Department's GRACE program, the Bellingham Police Department's Crisis Prevention Intervention Team (CPIT), and the Crisis Oversight committee.

Over the past year, the Sheriff's Office has seen a 33% increase in calls for service related to mental health. To address the growing needs of the community, the Sheriff's Office received authorization to hire a second Crisis Intervention deputy in 2019 and anticipates assigning the new deputy by mid-summer. The Sheriff's Office is also working with the Prosecuting Attorney's Office in planning a Law Enforcement Assisted Diversion (LEAD) program and believes that this will provide increased options to the Crisis Intervention Deputies.

BPD Behavioral Health Officer. The Bellingham Police Department has recently completed a staff reorganization which has allowed the department to place one current commissioned FTE into the position of Behavioral Health Officer. This position performs analogous duties to that of the Bellingham Fire Department's Community Paramedic. This change will become effective the first part of June and the department's Behavioral Health Officer will be Zach Serad.

Operationally, Bellingham's plan incorporates one commissioned police officer position for proactive follow-up with those individuals who are showing signs of mental illness/substance use issues and are identified as having multiple or high-risk contacts with police. Potential contacts, and subsequent follow-ups, will be determined by the BH officer after reviewing police reports or from referrals through other patrol officers/organizations, including the Community Paramedic. The Behavioral Health Officer will contact and work with those individuals to assess and make connections with appropriate resources within our community, including the GRACE program.

Reduction of warrants. Warrants are issued by the court and direct deputies and other officers to take persons into custody. The Sheriff's Office does not have the unilateral ability to ignore these requirements. However, the Sheriff's Office continues to work very closely with the District Court to reduce incarceration, and the court probation office has adopted a system of phone and text messages of upcoming court dates to reduce failures to appear. The Sheriff's Office also facilitates the placement and monitoring of electronic home monitoring devices on *pre-trial defendants*. The Sheriff's Office does not supervise these people but rather reports violations of the conditions of monitoring to District Court probation which determines the appropriate course of action. This arrangement satisfies liability concerns previously expressed by the Prosecuting Attorney's Office. In 2018, 63 offenders participated in the pre-trial program reducing incarceration needs for those people by 5,314 bed days. The program was expanded in late 2018 and in just the first two months of 2019, 2,663 jail bed days were diverted into this program. It is important to emphasize that this electronic home detention program is not the same program the Sheriff's Office employs for monitoring those convicted and sentenced offenders who may require a higher degree of supervision and which is operated entirely by the Sheriff's Office (a more intensive and costly program).

Jail alternative programs: The County Council's policy change to eliminate a requirement that all jail alternative programs to be self-supporting (often requiring a defendant to pay) has resulted in a reduction of jail bed days. The out-of-custody jail work crews (day reporting) led to a reduction of 2,663 jail bed days in 2018, which was 58% more jail bed days avoided than in 2016.

Out-of-county transfers: Due to issues involving safety, infrastructure and security system reliability, the Sheriff's Office continues to limit the jail population through control measures that include transfers by the County and other users of the jail to out-of-county facilities. Control measures are also necessitated when failing infrastructure and life-safety systems require cells and even entire cell blocks be taken out of use for extended periods of time. The Sheriff's Office and the City of Bellingham Prosecutor's Office have worked together closely to avoid transferring inmates to Yakima whenever possible and divert them instead to alternative programs or housing in the jail work center. Total bed day use for the jail dropped approximately 2% from 2017 to 2018 with an average daily population drop from 319 to 314. These efforts help avoid some consequences of separating inmates from their family and support systems and should result in more use of work programs.

Community services connections for inmates: The Sheriff's Office has engaged community partners to help inmates succeed upon re-entry into the community. This has included the engagement of the

Homeless Outreach Team with homeless offenders; Literacy Council (assisting with reading and writing skills); Goodwill (to help offenders with criminal records attain employment); Domestic Violence and Sexual Assault Services (counseling for victims); Bible studies; one-on-one faith-based counseling; GED preparation; Alcoholics/Narcotics Anonymous; and Parents for Parents (peer-based parents involved with dependency proceedings).

Medically Assisted Treatment (MAT) for opioid use disorder: Phase one of a program that was under development for over a year was implemented in September 2018 to assist those affected by opiate use disorder to withdraw with medical supervision. Phase two was implemented in February 2019 and allows the use of an opioid substitution for offenders on a community maintenance program. Phase three will begin later this year and will assist addicts to withdraw and work with a community provider in an opioid substitution program. Questions about the availability of MAT in the jail were the subject of a pending lawsuit, which was recently dismissed by agreement of the parties as a result of these steps.

C. Progress Report: Behavioral Health Committee

The Behavioral Health Committee works collaboratively across jurisdictions to support the creation of programs that provide effective mental health and substance use disorder treatment available to all County residents. Milestones in 2018 include implementation of the Ground-level Response and Coordinated Engagement (GRACE) program to integrate behavioral health services and reduce inappropriate use of the jail and emergency response systems, securing of grants for development of a Recovery House level of care in the substance use disorder (SUD) treatment system, and an expansion of multi-agency training on behavioral health issues, including hoarding and the neuroscience of behavioral health disorders.

IMPROVEMENTS IN BEHAVIORAL HEALTH SERVICES AND COORDINATION

Goal: Provide effective coordination to meet the needs of frequent users of health and criminal justice resources, and reduce the use of and costs incurred by the criminal justice and emergency response systems through the provision of effective behavioral health programs and services.

Context: A portion of the population served in the criminal justice system is often challenged with poor health, behavioral health disorders, and/or unstable housing or homelessness. Some individuals will frequently require emergency responses from law enforcement or Emergency Medical Services (EMS). Whatcom GRACE is a program developed to provide care coordination services to individuals who frequently use the crisis system or draw law enforcement responses. GRACE has three goals:

- Increase public safety
- Reduce use and costs of criminal justice and emergency response systems
- Improve health and well-being of individuals with complex needs

Progress: Recent activities to implement GRACE and other support services include the following,

- **Procurement of GRACE provider.** A “Request for Qualifications” (RFQ) was released in spring 2018 seeking an agency to serve as the “hub” of the GRACE program, and SeaMar Community Health Center was selected for this role. SeaMar has hired a Program Manager for GRACE and all other staff positions have been filled except for a nurse practitioner. SeaMar is currently in the

process of interviewing and hiring an ARNP for GRACE. The program is operating throughout the entire county. The GRACE team is now working from an office located at 800 Chestnut, although they continue to have care managers at workstations at Fire Districts and law enforcement locations as needed to promote collaboration.

- **Health information sharing.** The County has created new mechanisms to facilitate sharing of protected health information among GRACE partners. Release of Information forms have been developed with expert consultation from a health care attorney to ensure privacy of individuals served, while also allowing for optimal coordination of care while in the GRACE program. The County and SeaMar are working to customize an information system for GRACE use now being used by the North Sound Accountable Community of Health as a care coordination platform, and to explore “application programming interfaces” that will allow more automated information sharing between EMS, law enforcement, jail and health care systems on GRACE members served. The first such interface being explored is with ImageTrend application, a data sharing software currently being implemented by all Fire District EMT services throughout the County. The Team is also exploring alternative care coordination information systems if needed in the future.
- **GRACE capacity.** Program capacity is increasing. A total of four case managers have been hired, and a nurse practitioner will be added to meet the needs of those with other health needs. Community partnerships continue to develop, and an expansion of the Community Paramedic model to include Ferndale will add another cooperating partner to the program. To date, the program is providing case management services for around 60 people, with a caseload potential of approximately 80 individuals.
- **Recovery House level of care.** The county is working with the Opportunity Council and Lifeline Connections in the remodel and operational startup of a new enhanced co-occurring disorder Recovery House level of care. This program will be staffed 24/7 with mental health and chemical dependency professionals, peer counselors, and technicians. The target populations will primarily be Drug Court, Mental Health Court, and GRACE participants. Recovery House level of care is a step down from inpatient substance use disorder (SUD) treatment intended to provide additional support and treatment for people to maintain gains achieved during inpatient treatment. The goal is to open Recovery House services by summer 2020. (See discussion of this item under the Legal and Justice Systems Committee for additional background information).
- **Criminal Justice Treatment Account funding.** The County successfully increased access to assessments and treatment for eligible people in the jail, in addition to providing rental assistance for drug court, mental health court, and GRACE participants discharging from inpatient substance use disorder (SUD) treatment through the state Criminal Justice Treatment Account (CJTA) funds. A local panel oversees CJTA funds and makes recommendations about service priorities.

Issues and opportunities:

- The ability to share necessary protected health information among the various GRACE providers has been a significant challenge. Care coordination among healthcare providers is allowed under the laws of confidentiality to some extent. However, sharing protected health information with law enforcement is more difficult without a Release of Information signed by the GRACE member to allow it.

- The target population is often reluctant to accept services and requires sophisticated engagement practices to include them in the GRACE program.
- The lack of suitable housing is a challenge for GRACE members and other individuals who have frequent interface with the criminal justice system.
- In 2019, commercial health insurance plans will become the primary funders of behavioral health services for individuals covered under Medicaid. The County is working closely with these managed care organizations as well as the GRACE hub agency to ensure that Medicaid-eligible services delivered to GRACE members are fully reimbursed.
- The Community Outreach and Recovery Support (CORS) program provides professional support and peer coaching to Whatcom County residents in need. After 18 months of outreach in the community, the program is experiencing funding challenges. CORS has historically received funding from the Federal Mental Health Block Grant (MHBG) with a smaller portion coming from the Behavioral Health Program fund. With implementation of Fully Integrated Managed Care in July 1, 2019, MHBG funds will be reallocated to community crisis services and will no longer be available to support CORS. CORS is an important resource in the community and has effectively served many individuals at the Lighthouse Mission, Francis Place, 22 North and other housing and resource locations. The County is reviewing options for continued funding of this valuable program.

The GRACE program target population is often reluctant to accept services and requires sophisticated engagement practices.

IMPROVED CRISIS RESPONSE AND SUBSTANCE USE DISORDER TREATMENT

Goal: Reduce jail admissions/readmissions through improved crisis response and treatment.

Context: A high number of people in jail have substance use disorders (SUDs) and co-occurring (mental health and SUD) disorders—68% and 44% respectively.¹ Other data indicate a rise in opioid use and its consequences—such as opioid-related arrests, overdoses, detox and treatment admissions, and Hepatitis C. Equally important, people with mental illness can experience escalation of behavior to the level of criminal involvement unless law enforcement is sufficiently trained in crisis de-escalation and management. Although a basic level of crisis training is now required of all law enforcement officers in Washington State, and many agencies exceed basic requirements, additional behavioral health expertise may be needed in certain cases to prevent escalation of crises.

Progress: Targeted efforts to address crisis and addiction can be effective in reducing jail admissions and readmissions. Activities include:

- ***Crisis Training and Response Capability in Law Enforcement.*** Crisis Prevention and De-escalation Training for law enforcement has proven to reduce or avert arrests while also connecting individuals to appropriate services. In 2018, the Sheriff's Office added a position for a Crisis Intervention Deputy to respond to persons in crisis and follow up with services, and

¹ Data are for people on Medicaid only; however, 86% of inmates in the jails had been enrolled in Medicaid at some point over the previous five years. See Paula Henzel et al., "Behavioral Health Needs of Jail Inmates in Washington State," Department of Social and Health Services, Research and Data Analysis, January 2016.

Bellingham is adding a behavioral-health trained officer in 2019. (See additional discussion of this topic in the Legal and Justice System Committee Section).

- **Multi-agency behavioral health training.** Coordination to update multi-agency and practitioner training needs included training on behavioral health disorders and brain dysfunction and hoarding disorders.

Opiate Use Disorder Treatment. Since 2016, the number of Medication Assisted Treatment (MAT) providers offering services in Whatcom County has more than doubled. Two additional agencies provide full-service MAT, and an additional agency provides MAT and substance use disorder treatment. Adults of all ages are accessing these services with the largest percentage of recipients in the 26 to 35 year old age range.

- **MAT at the Whatcom County Jail.** The jail has implemented a medication assisted treatment (MAT) program to help people who are withdrawing from opioids while incarcerated. The program currently tapers individuals not actively involved in treatment and continues MAT services for those enrolled in treatment programming. The program also assists individuals released from the jail with connection to community-based services for continuing care.

Issues and Opportunities:

- Methamphetamine use is on the rise again, yet there is no effective treatment medication. Methamphetamine is a stimulant, and often individuals under the influence demonstrate agitated or aggressive behaviors that can lead to a law enforcement response. Not only is methamphetamine addiction difficult to treat effectively, but smoking the drug has potential to contaminate housing units which creates challenges in finding safe and stable housing for individuals struggling with methamphetamine addiction.
- Complex behavioral health issues, especially for those people who are incarcerated, often stem from early childhood, repeated traumatic events. The multi-system trainings coordinated by the Health Department will include dissemination of trauma-informed approaches (TIA) throughout the criminal justice and law enforcement systems, and include behavioral health and housing partners.
- More treatment services for people with co-occurring substance use and mental health disorders are needed in the community. The county recently welcomed a new outpatient SUD treatment provider, Lifeline Connections, located on the Guide Meridian in Bellingham. An inpatient SUD treatment facility is also slated to open in spring of 2019, which will be the first such facility for adults in the county. These additions will expand access to services for adults with SUD.

YOUNG ADULT INCARCERATION PREVENTION INITIATIVE

Goal: Prevent young adults from entering the criminal justice system

Context: In 2018, a John D. and Catherine T. MacArthur foundation grant was secured to focus on young adult (aged 18-24) incarceration prevention. A team was formed consisting of representatives from the City of Bellingham and Whatcom County Councils, Washington State House of Representatives and Senate, and Bellingham and Whatcom County staff. This team, in coordination with National League of

Cities, National Association of Counties, and the National Conference of State Legislatures, has worked alongside stakeholders from Indianapolis, Overland Park, Albuquerque, and Kalamazoo.

Team members are the following:

- City Councilmember April Barker
- City Councilmember Dan Hammill
- County Councilmember Barry Buchanan
- Whatcom County Probation Manager Bruce Van Glubt
- Whatcom County Health Department Human Services Manager Anne Deacon
- Bellingham City Attorney Peter Ruffatto
- Washington State Representative Roger Goodman
- Washington State Representative Sharon Shewmake
- Washington State Representative Debra Lekanoff
- Washington State Senator Jeannie Darneille

The Bellingham/Whatcom team's workplan is to create a joint City/County/small cities resolution that prioritizes prevention of young adult incarceration, emphasizes in-field crisis and mobile responses and interventions, prioritizes an operational funding solution for the Crisis Stabilization Facility, and tracks data to evaluate successes, challenges and further needs.

Progress: Thus far, biennial operational funding for the Crisis Stabilization Facility has been secured but the long-term solution has not been worked out at the state legislature. The joint resolution has been reviewed and approved by City and County executives and presented to the small city mayors. A final draft has been completed. The resolution calls for the following changes:

1. Identify the multiple efforts and initiatives currently in operation in the community focused on reducing the exposure of youth and young adults to the criminal justice system;
2. Coalesce these efforts along a continuum of Prevention, Intervention, Treatment and Support, aligning with the Sequential Intercept Model as appropriate across jurisdictions in Whatcom County including service and nonprofit sectors, Tribes, education institutions, and foundations;
3. Create a system for improved data collection, analysis, reporting, and responsive action across all sectors, to include fiscal and asset mapping and gap analyses;
4. Develop cultural competencies in staff and incorporate into processes throughout the various criminal justice systems in an effort to eliminate racial disparities; and
5. Prioritize policy development and funding that invests in growing healthy and resilient children, youth and young adults through prevention and early intervention programs.

Issues and opportunities: A sustainable funding model has yet to be created at the State level. Upstream diversions that include youth and family supports will be required to achieve greater success in young adult incarceration prevention. Differing data systems across jurisdictions need better alignment and reporting capabilities. Stable housing continues to be a barrier for many young adults who have or have had exposure to adverse social determinants of health that can lead them into contact with the criminal justice system.

D. Progress Report: Crisis Stabilization Facility Committee

Introduction: Whatcom County currently owns a Crisis Triage Facility that houses 13 treatment beds, with eight dedicated to substance withdrawal management services and five to mental health stabilization services. The demand for these services has increased beyond the current building's capacity, resulting in a situation where first responders are often unable to use the facility. As a result, people end up in the hospital or in the jail instead of being diverting to treatment alternatives. The ordinance creating the Incarceration Prevention and Reduction Task Force called for the Task Force to work to create a new facility to "assist with jail and hospital diversion of individuals struggling with mental illness and chemical dependency." The Crisis Stabilization Facility Committee has worked steadily since the Task Force's inception to help create this new center.

Substantial progress has been made. In 2018, construction funding was secured, an architectural design was completed, and a public meeting to introduce the facility was held. Current activities include establishing contracts with agencies to operate the center, working with the selected contractors to refine the operational model for the center, and securing long-term funding to operate the facility.

CRISIS STABILIZATION FACILITY CONSTRUCTION, OPERATIONS, AND FUNDING

Goal: Provide a safe location with appropriate services for law enforcement and other first responders for individuals in behavioral health crisis who might otherwise end up in jail or in the emergency department of the hospital.

Context: The current space allocated to crisis stabilization has proven inadequate to the needs of first responders and the community. Present capacity of eight detox beds and five mental health beds will be increased to 16 acute substance withdrawal management (detox) beds and 16 mental health stabilization (triage) beds at a new facility near the current facility on Division Street in Bellingham. This will provide law enforcement and emergency services personnel with more options for individuals with acute behavioral health needs. The aim is to provide an alternative to incarceration and link people to the appropriate mental health and substance use disorder services. Increased capacity will also reduce unnecessary use of costly emergency department services.

Securing reliable and sustainable operational funding for the center is a critical issue. In accordance with State legislative mandate, behavioral health and medical care are being integrated, with Medicaid Managed Care Organizations (MCOs) becoming primary funders for Medicaid behavioral health services. While it is likely that the services provided at the crisis stabilization facility will be reimbursed for Medicaid enrolled individuals, there is some concern that funding for non-Medicaid individuals may not be sufficient to meet the need. Historical data indicates that approximately 30% of the population currently served at these facilities in this region are not Medicaid enrolled. Commercial Health Plans do not pay for these stabilization services typically. As a result of uncertain operational funding, some similar facilities planned elsewhere in the state have been canceled or postponed.

Progress: The Crisis Stabilization Facility Committee has made progress in the following areas.

Facility Planning and Construction:

- A total of \$9.5 million in state funds were secured in 2018, supplementing \$3 million in local funds and allowing design and permitting work for the facility to proceed. County staff hired an architectural firm and design work is currently in the final stages. The County is ready to submit plans to the City, and a request for construction bids has been prepared. Bids are expected to be requested soon, and groundbreaking is expected to occur this summer, with project completion 12 to 14 months thereafter.



A state budget proviso provides funding for the center for the next two years, but ongoing mechanisms for full funding of all services still need to be identified.

Operational Planning:

- State dollars secured for 2020-21 operations. As stated above, while partial operational funding for the center is likely, full reimbursement for all services remains uncertain. County staff and local elected leaders worked with our legislative representatives in Olympia to secure \$1 million in supplemental operating funds in the 2020-21 state budget. The budget proviso also instructed the Health Care Authority to “...coordinate with crisis stabilization providers, managed care organizations, and behavioral health administrative services organizations throughout the state to identify payment models that reflect the unique needs of crisis stabilization and crisis triage providers. The report must also include an analysis of the estimated gap in nonmedicaid funding for crisis stabilization and triage facilities throughout the state. The authority must provide a report to the office of financial management and the appropriate committees of the legislature on the estimated nonmedicaid funding gap and payment models by December 1, 2019.” This type of facility aligns with Governor Inslee’s plan to develop a number of regional treatment facilities around the state, so the need for a sustainable funding plan is not limited to our local facility.
- Further development of the service delivery model. The Crisis Stabilization Facility Committee has worked with County Department of Health staff to develop criteria for the future providers of services at the center. Both sets of operations will adopt a “recovery model” under Substance Abuse and Mental Health Services Administration (SAMHSA’s) ten [Guiding Principles of Recovery](#). Providers will be expected to conduct on-site medical clearances for admission and to optimize drop-offs by law enforcement and EMS. Both sets of operations will be able to prescribe and manage administration of medications. The facility will have showers and laundry facilities. As indicated in released RFQs, the following elements will be included for the different sides of the facility.
 - Mental health stabilization services. This side of the center will be licensed as a “Residential Treatment Facility” and also be certified for “Triage – Involuntary Services.” Involuntary holds may occur under state statute [RCW 10.31.110](#) and are limited to 12 hours. These involuntary holds are initiated by law enforcement under the criminal code. Those held involuntarily may be shifted to a voluntary hold if circumstances warrant and the provider is encouraged to do so whenever possible. The facility will be managed for 85% occupancy at a minimum. Additional requirements for a mental health provider include:

- Managing disruptive or dangerous client behavior in the least restrictive, intrusive manner
 - Minimizing seclusion and restraint used in an involuntary setting
 - Collaborating with a Substance Abuse Disorder treatment provider co-occupying the facility
 - Planning, coordinating and transferring care upon discharge, to include medications and ongoing care in other appropriate facilities, agencies, or under the supervision of a mental health professional
- *Substance Withdrawal Management Services.* The contracted organization will provide withdrawal management services at 3.2 and 3.7 ASAM (American Society of Addiction Medicine) levels of care. The facility will be licensed as a [Residential Treatment Facility](#) and will receive program certification for Withdrawal Management services for adults. This side of the facility will provide strictly voluntary services. Additional requirements for a provider include:
 - Initiating Medication Assisted Treatment for both withdrawal management purposes as well as maintenance
 - Monitoring client health and wellbeing during the withdrawal phase
 - Collaborating with the mental health treatment provider co-occupying the facility
 - Planning, coordinating, and transferring ongoing care upon discharge including any necessary medication
- *Data collection.* Providers will collect data to monitor operations and improve operations. Data to be collected include:
 - Number of transfers from one unit to another
 - Discharges to other services
 - Number of voluntary/involuntary stays
 - Readmissions
 - Denials of admission and reason for denial

Issues and Opportunities: As noted in last year’s annual report, a key issue in the coming months include securing long-term *operational funding*. Ensuring optimal funding for an expanded center that allows for 24/7 operations is a key to a successful program. The success of the facility will be limited without sufficient resources to support individuals once they have stabilized and are ready to be discharged.

Areas that the Task Force will be working on in the coming months are:

- Advocating for full state funding for operations, and adequate reimbursement via the MCOs
- Ensuring service integration between the GRACE program, crisis services and Crisis Stabilization Facility operations
- Advocating for increased affordable housing units for vulnerable populations
- Ensuring that protocols are developed so that the facility can be a point of discharge from the hospital Emergency Department to “step-down” services without overwhelming the facility

- Identify other entities that benefit from reduced utilization and that should participate in helping to fund the facility – such as the hospital and law enforcement



E. Progress Report: Information Needs and Data Exchange (INDEX) Committee

Introduction. Access to accurate and timely data is necessary to measure progress in reducing incarceration. In late 2018 the Task Force created a new Information Needs and Data Exchange (INDEX) Committee to develop data collection and reporting capacity. The committee is working across many jurisdictions to identify or develop useful data and program information to measure progress in reducing jail use and to document the use of jail alternatives. Data is also being developed to track the effectiveness of programs. Lastly, the committee is facilitating information-sharing across jurisdictions to support improved operation of justice programs and facilitate cross-jurisdictional system improvements.

Goals: The mission of the INDEX Committee is to develop a data collection and reporting system that accurately informs policymakers when considering programmatic changes necessary to minimize jail use and improve efficiency in the criminal justice system. To achieve the mission, the INDEX Committee is:

- Developing baseline statistics on jail use to determine whether programmatic changes are successful.
- Establishing measures for a realistic and achievable percentage decrease in the jail population.
- Identifying how to assess performance and establish metrics that measure the success of each new initiative.
- Identifying where data is a barrier to implementing various initiatives and work to fill those gaps.

- Identifying data that can indicate the presence of racial, poverty, gender, and other social and economic disparities in the criminal justice system.
- Maximizing the accuracy of a data collection system by integrating the system across all jurisdictions.
- Allowing policymakers to refine processes, improve the way things work, and then observe outcomes.

Context: The INDEX Committee structure includes a Technical Subcommittee and a Policy Subcommittee. The Policy Subcommittee, consisting of the entire Task Force, drives the process and guides the work of the technical subcommittee. The Technical Subcommittee includes the information technology and agency staff who work with the systems and data to measure outcomes. The Technical Subcommittee interacts with the Policy Subcommittee to identify options to achieve those outcomes and identifies existing data or develops improved data practices to monitor progress.

Progress: Since the Committee's first meeting in October 2018, it has completed the following projects or activities.

- ***The INDEX Technical Subcommittee has completed a data inventory.*** Initial INDEX Technical Subcommittee meetings were spent with each participant identifying data their jurisdiction collects and the software platform in which it's collected. Specific data points were identified through the work of the Task Force's committees, the final report from the Vera Institute of Justice, and a list of primary data elements from Dr. James Austin, JFA Institute. Law enforcement and court departments in Whatcom County, Bellingham, Blaine, and Sumas identified which of these data elements they collect at various points of contact with an individual. (Click here to see the [data matrix](#)).

Technical Committee members cited the lack of interoperability among various collection systems as a significant barrier to maximizing the efficiency of their operations. Because there is not one universal repository for criminal justice data for all users in the county, common data points must be entered multiple times into different systems at various points in the processes or up-to-date data may not be available in real time. Some software systems are antiquated, and new systems being implemented don't provide all the necessary information. INDEX Technical Subcommittee members now have an opportunity to communicate their specific needs for shared data, and solutions are quickly being identified.

- ***The Technical Subcommittee has achieved significant operational improvements.*** The INDEX Technical Subcommittee members discussed the lack of accurate or accessible data necessary to make critical decisions about a particular case, such as how much credit is already given to an inmate for time served. The subcommittee formed a small group of individuals who meet as a workgroup to develop a more dynamic and interactive reporting process for disseminating information on the current jail population. The workgroup participants include representatives from County and Bellingham information technology staff, courts, public defenders, prosecutors, and the Sheriff's Office. The workgroup identified five main target audiences and developed draft reports from the Sheriff's Office Records Management System (Spillman). Those five target audiences are:

- Courts
- Public Defender
- Prosecutor
- Public and private entities
- Policy-makers

Progress to date includes the following:

Development of reports on inmates. Workgroup participants expressed the need for more detailed and up-to-date information on inmates currently held in the jail. Lt. Caleb Erickson from the Sheriff's Office, and County Information Technology (IT) Manager Perry Rice are working with city and county representatives to develop an accurate and timely reporting system to verify credited time served and other factors specific to a particular inmate. Each court agency will receive a customized report from the jail's Spillman system to document inmates' time served as sentenced by the courts. City prosecutors will receive a point-in-time report on who is in the jail on their city cases. While all reports will have a consistent look and format, the data content on each form is being customized to meet the needs of each jurisdiction, such as reporting either by case number or by person. IT staff have identified a reporting server that can deliver these new reports to each jurisdiction and are working to implement the program. In addition to these static reports, the workgroup members are considering how to provide a more dynamic report on current jail inmate data.

Enhancement of data on the County website. One option for gaining access to detailed information is via the Sheriff's Office online inmate databases, available on the Bureau of Corrections' website. The workgroup identified website database models in other counties that currently provide a more robust level of data via their websites. County IT staff are working to migrate the Sheriff's Office website to another server that will allow more access on jail information to key users and the public. The targeted information for the public and for private entities will be delivered via updated website information to include dynamic clickable fields and updates for all inmates in custody, bookings, and releases.

- **The INDEX Technical Subcommittee assisted Policy Academy participants by producing data on young adult offender length-of-stay.** The Intergovernmental Policy Academy is an incarceration reduction project sponsored by the MacArthur Foundation, National Association of Counties (NACO), National League of Cities (NLC) and the National Conference of State Legislatures (NCSL). The Policy Academy's focus is reducing incarceration for young adults (18-24). A primary objective of the local team is to reduce the amount of time young adults spend in jail. Studies show that incarceration for more than 72 hours is particularly traumatic for young adults. The team is working with the INDEX Technical Subcommittee to collect data relative to length of stay for the young adult population. This in turn can be utilized to develop policies to reduce length of stay. The workgroup has developed a Young Adult Inmate report to provide statistics on bookings, inmates, average length-of-stay, and top offenses for young adults aged 18 to 24. (See graphic of Young Adult Inmates).

Issues and Opportunities: The INDEX Technical Subcommittee members discussed the need for data to serve two purposes and pinpointed the differences in how data can be collated, interpreted, and disseminated to serve either a policy or operational function:

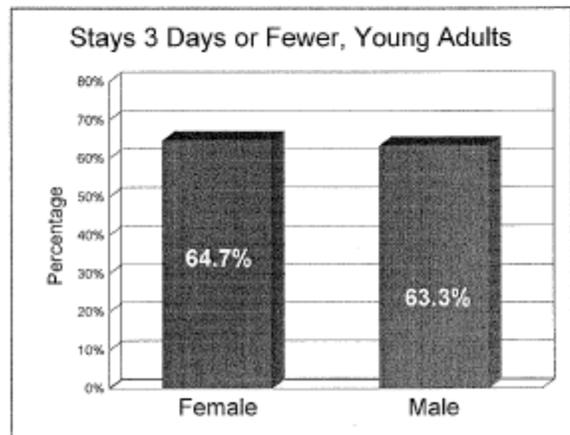
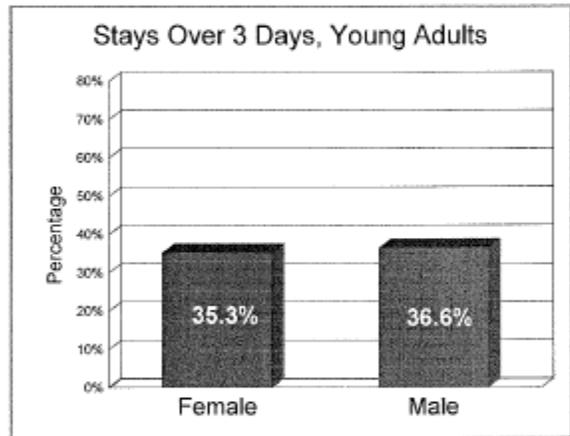
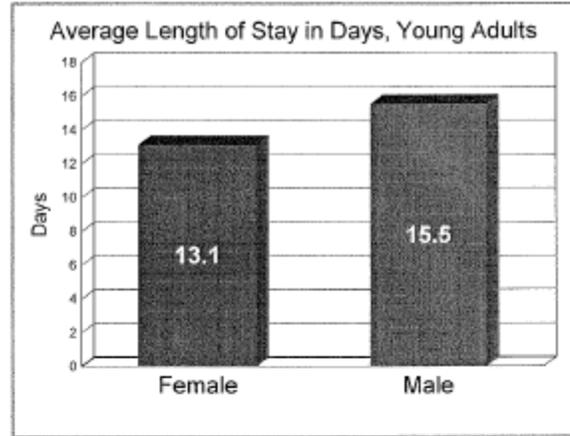
- Policy data: Analytics for policy-makers to use for program evaluation and improvement is crucial for program monitoring. Data must allow jurisdictions to engage in trend analysis and provide historic records and information.
- Operational data: Data must be accessible to provide a snapshot of information on a particular person.

One of the most significant challenges is program interoperability among all agencies. This includes data collected and maintained by State agencies through their own criminal justice databases. Many of the courts of limited jurisdiction in Whatcom County, including District Court and the municipal courts, rely on the statewide systems to function. In an effort to collaborate with State agencies that manage a significant amount of the data on which local courts and criminal justice representatives rely, the INDEX Technical Subcommittee met in March 2019 with representatives from the Administrative Office of the Courts (AOC) regarding the AOC’s Courts of Limited Jurisdiction case management system (CLJ-CMS) project. Subcommittee members expressed the crucial need for compatible data systems to function as efficiently as possible, and plan to stay engaged with the State as they navigate this project.

Next Steps: The INDEX Committee continues to work on the tasks identified in the mission statement. Those beginning tasks include:

- Identifying data points not collected
- Identifying baseline information across all data points
- Developing accurate definitions and a glossary of terms that includes national standards, which can be applied uniformly across all agencies and jurisdictions to create clarity in the data reports

To assist in completing its beginning tasks, the Committee will identify potential consultant resources to further define the policy questions for the Task Force based on the more accurate data being collected.



Source: Whatcom County Sheriff’s Office

The Policy and Technical Subcommittees will continue to collaborate to ensure they are responsive to the needs the Task Force outlined in the original request. Collaboration with the Intergovernmental Policy Academy will continue to identify any other data that would contribute to the goal of reducing incarceration of young adults.

Technical subcommittee members have begun discussing a potential work item to improve operational efficiencies by creating a process for courts to convey sentencing information to the jail. Current messaging between a court and the jail can be inconsistent and unclear. Jail staff have indicated the need for one universal form for all jurisdictions. Also, the technical subcommittee will continue to engage the AOC on its Courts of Limited Jurisdiction case management system (CLJ-CMS) project.