

Incarceration Prevention and Reduction Task Force

Meeting Summary, April 04, 2016

Whatcom County Courthouse, Rooms 513/514

311 Grand Avenue, Bellingham WA

Attendance

Present	Representing
Anderson, Angela	Whatcom County Public Defender
Bernstein, Jill, Co-Chair	Citizen Representative
Deacon, Anne	Whatcom County Human Services
Elfo, Bill	Whatcom County Sheriff
Gockley, Stephen	Whatcom Alliance for Health Advancement
Finch, Leslie (proxy for Chris Phillips)	PeaceHealth St. Joseph Medical Center
Gribbin, Susan	Consumer
Hammill, Daniel	City of Bellingham, City Council
Heydrich, Alfred	Whatcom County Superior Court Commissioner
Lewis, Nickolaus (proxy for Julie Finkbonner)	Lummi Tribal Council
Kruse, Betsy	North Sound Mental Health Administration
Linville, Kelli	City of Bellingham, Mayor
Manering, Byron	Brigid Collins
Mann, Ken	Whatcom County Council Member
McEachran, Dave	Whatcom County Prosecutor's Office
Morgan, Irene	Restorative Community Coalition
Peterson, Darlene	Bellingham Municipal Court
Polidan, Randy	Unity Care NW
Absent	
Brubaker, Jeff	Bellingham Fire Department
Hovenier, Jack, Co-Chair	Consumer Representative
Knapp, Michael	Ferndale PD
Moonwater	Whatcom Dispute Resolution Center
Schroeder, Tyler	Whatcom County Executive's Office
Winter, Greg	Opportunity Council
Staff	
Wight, Dean - Lead	

Meeting Summary

1. Call to Order

The meeting was called to order by Jill Bernstein, Co-Chair.

The agenda was modified to include an update from the City of Bellingham on new efforts to prevent and reduce incarceration.

The meeting summary from March 7, 2016 was reviewed, no changes.

Concerns were expressed about information sharing, the need for report-outs to the larger Task Force, and the challenges for staff with multiple meetings (ad hoc).

The meeting schedule for the Task Force was accepted without vote or discussion.

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2. Steering Committee Update

Staffing Changes

Ken informed the Task Force that the County and WAHA have decided that WAHA will no longer providing services to support the work of the Task Force. There is a new RFQ going out for facilitation, and the County will be providing administrative support for the Task Force, effective May 01, 2016. The County will also be assuming responsibility for maintaining the website for Task Force-related information.

Materials from TF Members and Members of the Public

Ken also informed the Task Force that the Steering Committee recommends that materials submitted for Task Force review by Task Force members and members of the public be handled in the following way:

- Treat everything submitted as public comment
- Hand out a list of submissions at each Task Force meeting
- House all information on the County website, with links

3. Triage Committee Update

Dean provided the Triage Committee Report, which included a set of recommendations approved by the Triage Committee for Task Force Consideration.

1. The development of two 16-bed units joined in one building off a common foyer and intake space.
2. Further analysis to determine whether the 16-bed mental health unit should be voluntary or involuntary, and the need for a 10-minute drop-off wait for law enforcement/emergency medical services
3. Consideration of two location options
 - a. Current Crisis Triage Facility location on Division Street
 - b. Proximity to Medical Center/downtown area

The Task Force had an extensive discussion related to the recommendations of the Triage Committee, key points and questions as follows:

- Pending needs assessment will have an impact on mental health bed recommendation
- Whatcom County is pursuing support from the state for capital costs
- Kitsap County is a frontrunner in developing a facility like this, the Kitsap experience will provide useful information to the Task Force
- The need for a sufficient continuum of care after people leave the Triage facilities
- Regulatory requirements around the 16 bed limitation
- Clarification as to why a 10 minute drop-off is important to law enforcement and emergency medical services

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- Complexity of measuring actual need when behavioral health services have been underfunded for a significant amount of time
- Gap identified in state contracting with the Tribes and the impact that gap may have on Lummi/Nooksack
- The need to explore voluntary vs. involuntary and the differences between a 12 hour hold due to criminal behavior for law enforcement purposes verses a 72 hour hold for mental health involuntary treatment
- Original promise to the community that the location on Division Street would be temporary, current thinking that Division Street is a better location for services and the facility hasn't had a negative impact on the neighborhood

4. Behavioral Health Committee Update

Anne responded to an earlier inquiry regarding the closure of Pioneer Center North and informed the Task Force that Whatcom County Health Department is putting together a plan with recommendations for replacement of inpatient residential beds needed for Whatcom County that includes:

- 2 residential/inpatient SUD facilities (50 – 60 beds total)
- Stepdown recovery house program (up to 30 beds) (WIP) up to 30 – 60 day stay with transition to stable housing
- Enhanced services at the Triage facility with true addiction stabilization center (with Medication Assisted Treatment)

Anne updated the Task Force as to the work of the Behavioral Health Ad Hoc Committee. Their most recent meeting focused on criminogenic risk factors, and included information about how behavioral health treatment alone does not decrease criminal behavior. Key points from the meeting include:

- Program review will need to include assessment of risk factors addressed
- Identification of 4 key questions to ask
 - What data do we want to collect
 - What are policies and processes that need to be implemented
 - What do we have in place already, where do we make improvements
 - What is our capacity as a community to add more

The Behavioral Health Ad Hoc Committee is focusing priorities on triage facility 'front door' and 'back door' to the facility (divert from jail and into triage facility, and to create the necessary support services once someone is ready to leave)

Jill asked Lummi and the City of Bellingham to report at the next Task Force meeting on their recent efforts to reduce incarceration.

5. Justice Committee Update

Fred brought the issue of the scope of work for the Justice Ad Hoc Committee to the Task Force for discussion and decision. He noted that there is a lack of clarity and consensus

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among the Committee members as to what their focus should be. He believes that the scope should be narrow, confined to the legal system. He also reviewed the items identified by the Justice Committee in the Phase I report that require further exploration as potential recommendations for system improvements.

Stephen stated that there is substantial contingent that is concerned with the broader scope of work, and believes that there should be efforts to look at upstream factors that lead to criminal behaviors. He thinks that there may be a need for a 4th Ad Hoc group to look at root causes and community health issues, gather information, identify best practices, and perform mapping.

Anne and Dave expressed concern about capacity of the Committee and staff. Anne also noted that there are subject matter experts already involved in this work in the community.

Irene, Daniel and Byron expressed support for the broader scope.

There was some discussion as to whether or not this broader scope fit into the Behavioral Health Ad Hoc Committee's work.

Ken Mann made a motion that the Committee be renamed the Legal & Justice Systems Committee and that its focus be limited to those elements within the legal and justice systems. The motion was seconded by Angela Anderson. The motion passed with an 18 – 3 vote.

Jill asked Stephen and Daniel to meet with Anne and come up with a recommendation to the Task Force as to how the broader issues could be addressed.

6. City of Bellingham Update

Darlene Peterson updated the task force on two changes that the City has made:

- Transporting people to Yakima
 - Nothing on this side of the mountains open to COB within budget
 - 30 transported to date (all sentenced)
 - Returned after sentence completed
 - Have had a number of people complete their sentences
 - Getting feedback from public defenders
 - Incentive, 1/3 good time if people choose to go to Yakima.
 - If > 14 days, get a full physical examination
 - Being away from family is an obstacle
 - Transport is a challenge
- Electronic Home Monitoring (post-conviction)
 - Expanding to pre-trial soon
 - Contract with Friendship Diversion Services

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- GPS system monitoring
- Based in Salt Lake City
- Monitoring downloads if in a blackout zone (24 hour download)
- Whenever an order issued to put someone on home detention, automatic review w/in 2 weeks – if no issue, hearing cancelled, if an issue – hearing.
- Up to 11 at one time w/in the 6 week history
- 4 – 5 violations (one serious)
- Several people released from jail, finishing sentence on EHM
- As of March, 31 defendant's screened, 30 eligible
- 3 part screening tool
 - RCW (prohibited offenses)
 - NCIC (national crime information center – nationwide check)
 - Risk assessment for pre-trial (10 questions) if too many 'yeses' you will not qualify
- Finding a higher success rate
- Exploring RCW's to know what the boundaries are
- Taking a conservative approach
- Over one year's worth of time put on EHM
- 11 – 13 that have served their sentences and are complete
- Tracking data on jail days saved (manual process at this time).

Ken Mann asked about the cost of EHM as compared to incarceration, and about the risk assessment completed by the city because of potential liability.

- A day in jail costs the City of Bellingham \$98, EHM is \$14/day if an individual is on both alcohol and location monitoring, \$25/day
- Diversion Street location for EHM enrollment was a barrier, City of Bellingham has financial screening and program enrollment into EHM at the Courthouse

Jill requested regular updates from the City of Bellingham.

7. Public Comment

Joy Gilfilen thanked the Task Force for their work and encouraged them to take a broader vision of the needs assessment and inquire about the needs of the community as well as the needs of the bureaucracy.

8. Meeting Adjourned at 11:27 am.