

**Incarceration Prevention and Reduction Task Force**  
 Behavioral Health Ad Hoc Committee  
 Meeting Summary, March 31, 2016  
 Whatcom County Health Department  
 509 Girard Street, Bellingham WA 3 – 5pm

**Attendance**

<b>Present</b>	<b>Representing</b>
Bernstein, Jill	Citizen representative
Deacon, Anne	Whatcom County Human Services
Gribbin, Susan	Consumer
Lewis, Nicholas (proxy for Julie Finkbonner)	Lummi Tribal Council Member
Linville, Kelli	City of Bellingham, Mayor
Morgan, Irene	Restorative Community Coalition
Polidan, Randy	Unity Care NW
<b>Absent</b>	
Manering, Byron	Brigid Collins
Parks, Jeff (proxy for Sheriff Elfo)	Whatcom County Sheriffs' Office
Walker, Kathy (proxy for Dave McEachran)	Whatcom County Prosecutor's Office
Winter, Greg	Opportunity Council
<b>Staff</b>	
Gardner, Mark	City of Bellingham
Mitchell, Jackie	Whatcom County Health Department
Mowery, Perry	Whatcom County Health Department
Nixon, Jill	Whatcom County Council Office
Wight, Dean	WAHA, Lead Facilitator

**Meeting Summary**

**1. Call to Order**

Anne called the meeting to order and reviewed the work of the Committee to-date, with a review of the agreed-upon priorities in the Phase I Report. She noted the focus on early intervention, the need for re-entry services, recovery support, and the challenges faced in workforce development.

**2. Review SIM Template**

The Committee reviewed the SIM graphic presented by Anne. It was suggested that the graph be re-named to "Whatcom Community" rather than "Whatcom County". The color coding and content of each intercept were also reviewed.

The question of scope was briefly discussed as there are a number of programs and services that are "pre" Intercept One. No recommendation was reached regarding incorporating early intervention or youth services into this model.

**3. Evaluating Program Needs**

Key information includes:

- Treating mental illness alone does not improve law abiding behavior
- Focus should be on dynamic criminogenic risk factors (things we can change)

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- Washington State Institute on Public Policy has additional information re. effective solutions
- Stepping Up Initiative Resources
  - 4 key measures (with defined metrics)
    - Reduce the # of people booked into jail with BH disorders
    - Reduce the length of time people with MI stay in jail
    - Increase connections to community-based services and support
    - Reduce the # of people returning to jail

## 4. Criminogenic Risk Factors

Anne reviewed Criminogenic Risk Factors (see meeting handouts) with the Committee.

- Age you begin
- History of criminal behavior
- Anti-social patterns of behavior
- (references hand-out again)
  - Impulsiveness
  - Restlessly aggressive
  - Risk taking
  - Anti-social thinking and attitudes
    - Rationalizing your bad behavior
    - Minimization
    - Sense of entitlement
  - Criminal associates – hanging out with people that reinforce your thinking
- 4 other factors associated with but not predictive of criminal behaviors
  - Substance use
  - Poor familial relationships/dysfunctional families
  - Poor performance in school and/or work
  - Time is not spent doing positive social things; they hang out without positive or productive outlets

Anne also reviewed other factors that impact behavior, brain function (Adverse Childhood Experiences), and how mental illness and addiction are brain disorders that impact social and daily functioning, as well as judgment, decision-making, learning, thinking and mood.

## 5. Next Steps – Phase II Objectives

The group discussed the Phase II report that is due in November and that the focus of the Phase II report is the triage facility. Anne suggested that this Committee focus on programs and services needed “pre triage facility” and “post triage facility” so that when we have the facility available for use, there will be programs and services that support entry into and exit from the facility.

- LEAD-like programs (spread to the County as a whole)

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- CPIT – Mobile Crisis Team working with Law Enforcement
- Neighborhood policing
- Homeless Outreach Team
- Workforce development for care providers
- Expand SUD treatment and continuum of service levels
- Workforce development for citizens (supported employment)

Need to keep Triage committee and BH Advisory Board informed

Need to find ways to connect with the small cities

## 6. BH Ad Hoc Meeting Schedule

Whatcom County Health Department staff will send out a survey monkey to determine interest and availability as there appears to be a low turnout for the BH Ad Hoc Meetings.

## 7. Public Comment

None

## 8. Adjourned

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