Service Inventory and Strategic Plan

December 2019
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IPR Task Force Members

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- David Doll, Chief, Bellingham Police Department
- Bill Elfo, Sheriff, Whatcom County Sheriff’s Office
- Arlene Feld, Citizen Representative
- Heather Flaherty, Citizen Representative
- Deborah Garrett, Superior Court Judge, Whatcom County
- Stephen Gockley, Health & Human Services Representative
- Dan Hammill, Bellingham City Council Member
- Deborah Hawley, Consumer Representative
- Mike Hilley, Emergency Medical Services (EMS) Manager, Dept. of Emergency Management Services, Whatcom County
- Jack Hovenier, Consumer Representative
- Raylene King, Municipal Court Administrator, City of Blaine
- Scott Korthuis, Mayor, City of Lynden
- Seth Fleetwood, Mayor, City of Bellingham
- Byron Manering, Executive Director, Brigid Collins Family Support Center
- Moonwater, Executive Director, Whatcom Dispute Resolution Center
- Eric Petersen, Washington State Department of Corrections
- Darlene Peterson, Municipal Court Administrator, City of Bellingham
- Dave Reynolds, Superior Court Administrator/Court Clerk, Whatcom County
- Eric Richey, Prosecutor, Whatcom County Prosecutor’s Office
- Tyler Schroeder, Deputy Executive, Whatcom County Executive’s Office
- Kevin Turner, Chief, Ferndale Police Department
- Bruce Van Glubt, District Court Administrator, Whatcom County
- Maia Vanyo, Chief Deputy Public Defender, Whatcom County Public Defender’s Office
- Greg Winter, Executive Director, Opportunity Council
Purpose

The Incarceration Prevention and Reduction (IPR) Task Force service inventory and strategic planning document serves several purposes. It catalogs existing programs and services, identifies gaps, and provides the Task Force a process to vet and prioritize new or expanded program proposals. For the service inventory to function as a strategic planning document, proposals for new programs would be submitted on a Project Proposal Request for Review form to the full Task Force for review and, if appropriate, placed along the continuum of services.

The plan is also an education and information tool for Task Force members, local governing bodies, and the public to determine whether existing programs and services have adequate resources and where new programs are needed. The intent of the IPR Task Force is for the plan to be a living document that evolves over time as new programs and projects are added or removed, to respond to changing trends in the community, and to adjust to emerging best practices in the criminal justice and behavioral health fields.

Background

In January 2018, the IPR Task Force engaged in a prioritizing process in which various proposed programs and recommendations were assigned to IPR Task Force Committees. The Planning Session Final Report identified that the next step was to develop an overall Task Force work plan. Furthermore, the Task Force enabling ordinance specifically directs the Task Force to develop or enhance programs “designed along a continuum that effectively reduces incarceration….”

In April 2019, the Steering Committee began the final phase of completing an overall strategic plan to identify and prioritize projects and proposals that come before the IPR Task Force. This strategic plan will identify gaps in the system, where resources are lacking, and where priorities should be focused.

Steering Committee members chose the behavioral health sequential intercept as a model to organize programs and services. In addition to traditional intercept levels found in behavioral health models, the Task Force added Intercept 0 to include early interventions and community investments in the social determinates of health that may protect against criminogenic risk factors.

The first step in creating a strategic plan was to inventory existing programs that make an impact on preventing and/or reducing incarceration. Committees identified existing programs, whether they’re fully or partially funded and staffed, and existing gaps in services. Programs were plotted at the appropriate points along the intercept continuum. Finally, the IPR Task Force defined how to use the service inventory as a strategic planning document.
Elements of the Sequential Intercept Model

The Sequential Intercept Model was developed by Mark Munetz, MD, Patricia A. Griffin, PhD, and Henry J. Steadman, PhD. It was developed as a conceptual model to inform community-based responses to the involvement of people with mental and substance use disorders in the criminal justice system. Within the criminal justice process, there are multiple points - called intercepts - in which a person with behavioral health disorders may be diverted into mental health and substance use disorder services.

**INTERCEPT 0: Community Services**

An individual’s chance of being incarcerated is influenced by a number of factors and experiences, many of which may take place before birth. At Intercept 0, agencies promote improved health and the reduction of criminal behavior through prevention, intervention, treatment, and aftercare (PITA).

- **Prevention** programs build foundations for healthy lives at the individual, family, and community level.
- **Intervention** programs identify emerging problems, target unhealthy behaviors and support individuals with mental illness, substance use disorder, housing instability and/or legal problems.
- **Treatment** programs provide treatment to stabilize individuals, including incarcerated individuals, with mental illness or substance use disorders.
- **Aftercare** programs focus on behavioral health support and housing stability, especially after treatment, to reinforce healthy behaviors and to support long-term recovery and crime-free lifestyles.

**INTERCEPT 1: Law Enforcement**

An individual’s first point of contact with law enforcement and/or emergency services happens at this intercept level. Officers and responders make critical decisions about whether an individual should be taken into custody. More and more often, untreated behavioral health issues such as mental illness and/or substance use disorder are prevalent in the criminal justice system. There is a strong correlation between substance use disorders and criminogenic behavior. In many cases, getting treatment for behavioral health issues is the best option for helping someone successfully exit the criminal justice system and become a healthier community member.
### INTERCEPT 2: Initial Detention/ Court Hearing

During pretrial detention and initial court hearings, an individual can be more thoroughly evaluated by behavioral health professionals who can make a recommendation on necessary treatment to judicial officers. Whenever possible, diversion to a restorative program is a preferred alternative to incarceration.

### INTERCEPT 3: Jail / Courts

Individuals who continue through the court process are screened for behavioral health disorders and may be diverted to a community court or specialized treatment court in which treatment is supervised by a judicial officer. If incarcerated post-conviction, jail-based programs help individuals begin treatment and/or learn skills necessary for a successful transition after release.

### INTERCEPT 4: Reentry

The transition from incarceration back to the community usually begins before release, and an individualized reentry plan is critical to a successful transition. Necessary factors of a plan include uninterrupted access to medical services and community-based programs, supportive family and friends, and reliable housing and employment.

### INTERCEPT 5: Post-Incarceration Community

When released from incarceration, an individual may engage in community-based programs that will continue to treat their mental health and/or substance use disorder and build on a foundation of healthy, positive, pro-social behaviors, with a goal of preventing future involvement in the criminal justice system.
<table>
<thead>
<tr>
<th>Intercept 0</th>
<th>Intercept 1</th>
<th>Intercept 2</th>
<th>Intercept 3</th>
<th>Intercept 4</th>
<th>Intercept 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Services</td>
<td>Law Enforcement</td>
<td>Initial Detention/Initial Court Hearings</td>
<td>Jails/Courts</td>
<td>Reentry</td>
<td>Post-Incarceration Community Supports</td>
</tr>
<tr>
<td><strong>Programs in Place:</strong></td>
<td><strong>Programs in Place:</strong></td>
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<tr>
<td>0.A</td>
<td>See list of services, including:</td>
<td>1.A</td>
<td>See list of services, including:</td>
<td>2.A</td>
<td>See list of services, including:</td>
</tr>
<tr>
<td>Appendix A: Health Department community health programs</td>
<td>Neighborhood Policing</td>
<td>Mental Health Screening</td>
<td>APPENDIX A: Health Department community health programs</td>
<td>Short term housing to stabilize</td>
<td>Specialized Behavioral Health Program</td>
</tr>
<tr>
<td>Community Paramedic</td>
<td>Specialized training for law enforcement, first responders, and case managers</td>
<td>Suicide Assessment</td>
<td>APPENDIX B.1 and B.2: Sheriff’s Office Corrections Bureau Programs</td>
<td>Prescriptions and access to prescriptions upon release</td>
<td>Community medication assisted treatment</td>
</tr>
</tbody>
</table>
| Community Outreach and Treatment | Law Enforcement Diversion | Pretrial Services | Enhanced Drug Court | Court & appt. text and phone reminders | Family assistance programs | GRACE Program | Crisis Stabilization Facility | Electronic Home Monitoring in Lieu of detention when applicable | Pretrial assessment and services | City Gate Supportive Housing |%
<p>| GRACE Program | Specialized training for case managers | Pretrial SCRAM, GPS EHM | Expanded EHM and pretrial release | Reduced fees and increased eligibility for jail alternatives | |
| Youth, Young Adult, Adult, and Family conflict resolution and skill-building | Warrant quash | Warrant quash | Court &amp; appt. text and phone reminders | |
| Homeless outreach and services | Behavioral Health staff in Public Defender’s Office | Behavioral Health staff in Public Defender’s Office | |
| Medication Assisted Treatment | | |
| | Programs in place with resource shortage: | Programs in place with resource shortage: | Programs in place with resource shortage: | Programs in place with resource shortage: | Programs in place with resource shortage: |
| 0.B | See list of services, including: | 1.B | See list of services, including: | 2.B | See list of services, including: | 3.B | See list of services, including: | 4.B | See list of services, including: | 5.B | See list of services, including: |
| Supportive housing for various populations | Community Outreach and Recovery Support (CORS) | Mental Health Screening | APPENDIX B.3: Sheriff’s Office Corrections Bureau Programs | Incarceration Reentry Services | Clean and sober housing | Employment resources | Specialized law enforcement officers and direct referral to Mobile Crisis Outreach Team | Outpatient Treatment / Lesser Restrictive Orders (LRO) | Community-based reentry service | Community SUD Treatment | |
| Employment resources | Specialized law enforcement officers and direct referral to Mobile Crisis Outreach Team | Superior Court pretrial services unit | Vocational and Literacy Training for Offenders | Connection to medical and BH Treatment, including DV | CJTA Rental Assistance | |
| | CSF funding non-Medicaid beds | | Jail (MAT) program | Jail Re-entry Specialist | Supportive Shelters | |
| | | | DV offender treatment | Expanded employment services | Improve pathway for voluntary removal of protection orders / DVSAS services |</p>
<table>
<thead>
<tr>
<th>Programs needed but not in existence:</th>
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<th>Programs needed but not in existence:</th>
</tr>
</thead>
</table>
| 0.C | See list of services, including:  
- Family support programs  
- Homeless services  
- Supportive housing for various populations  
- Employment resources | 1.C | See list of services, including:  
- CSF Discharge Plans  
- Additional crisis response officers and DCRs  
- Triage for juveniles | 2.C | See list of services, including:  
- Young adult court & reduced incarceration  
- Jail intensive case manager  
- Enhanced MAT program | 3.C | See list of services, including:  
- Reentry navigators  
- Warm handoff  
- Employment assistance  
- Benefits enrollment  
- Peer reentry specialists |
| 4.C | See list of services, including:  
- Supportive housing  
- ¼ recovery house  
- Employment assistance | 5.C | See list of services, including:  
- Supportive housing  
- ¼ recovery house  
- Employment assistance |

Affordable supportive housing is necessary across all intercept levels. The INDEX Subcommittee works to support policy and program data efficiency enhancements across all intercept levels.

In addition to expanding existing and developing new programs, the Task Force will continue to identify best practices and engage in ongoing review and monitoring of current programs for quality assurance purposes. The Task Force will first prioritize specific requests from the Whatcom County Council.
Items in blue indicate items that have been before the Incarceration Prevention and Reduction Task Force, or one of its committees.

A. Programs in Place:

- SEE APPENDIX A: Health Department, Human Services Division, community health programs
- Gang prevention programs
- Community Paramedic
- Opiate Outreach and Engagement
- GRACE Program
- School District Prevention Programs (various school districts)
- Homeless Outreach Team (HOT) (Opp. Council)
- Projects for Assistance in Transition from Homelessness (PATH)
- Community Medication Assisted Treatment (various agencies and medical professionals)
- Whatcom Dispute Resolution Center (WDRC) youth restorative practices/justice services and conflict resolution training
- WDRC adult conflict resolution training and skill building workshops
- Parent Child Assistance Program (PCAP)
- Brigid Collins Parenting Academy

B. Programs in place with resource shortage:

- Sex offender ADA accessible housing
- Affordable housing: clean and sober and other specialty housing
- Employment resources – include “second chance employers”
- Supportive shelters
- Eviction Prevention assistance

C. Programs needed but not existing:

- Safe Storage
- Northwest Youth Street Outreach Team (NWYS)
- Eliminate criminalization of homelessness
Items in blue indicate items that have been before the Incarceration Prevention and Reduction Task Force, or one of its committees.

### A. Programs in Place:

- Neighborhood Policing
- **Specialized training for law enforcement and first responders**
- Truancy/discipline school-based services
- **Law Enforcement crisis intervention team (CIT) training**
- Crisis Stabilization Facility (Mental Health and addiction stabilization services)
- Specialized training for case managers
- GRACE Program
- Behavioral health specialized law enforcement officers & deputies (multiple jurisdictions)
- **Law Enforcement Assisted Diversion (LEAD)**
- Mobile Crisis Outreach Team (MCOT)

### B. Programs in Place with Resource Shortage:

- Community Outreach and Recovery Support (CORS)
- Law enforcement direct referral to Mobile Crisis Outreach Team
- **Funding CSF beds for non-Medicaid individuals, especially 12-hour holds**
- Additional BH trained officers

### C. Programs Needed but Not Existing:

- **Seamless protocol for CSF discharge treatment plans for individuals admitted on a 12-hour peace officer hold**
- Dedicated DCR to BPD/WCSO
- DCR procedures evaluation
- **Triage Mental health triage unit for juveniles**
Items in blue indicate items that have been before the Incarceration Prevention and Reduction Task Force, or one of its committees.

A. Programs in Place:

- Mental Health Screening
- Suicide Assessment
- Superior Court & District Court Pretrial Assessment and Services Units
- Electronic Home Monitoring in Lieu of detention when applicable
- District Court phone call and text reminders for select court calendars
- District Court Pretrial Electronic Equipment Program
- Bellingham Municipal Court: Pretrial Risk Assessment
- Bellingham Municipal Court: Pretrial SCRAM
- Bellingham Municipal Court: Pretrial GPS EHM
- Bellingham Municipal Court: 2x/week warrant quash

B. Programs in place with resource shortage:

- Mental Health-Assisted Outpatient Treatment / Lesser Restrictive Orders (LRO)
- Superior Court Pretrial Services Unit

C. Programs needed but not existing:
Items in blue indicate items that have been before the Incarceration Prevention and Reduction Task Force, or one of its committees.

A. Programs in Place:

- **SEE APPENDIX B, Sections 1 and 2: Sheriff's Office Corrections Bureau Programs**
- DUI Victim Impact Panel
- Work and School release
- In-custody work crew
- Specialized courts (Teen, **Drug**, Mental Health, Family)
- **Enhanced Drug Court**
- Health Dept. Jail Behavioral Health Program
- **Sheriff's Office reduced barriers to jail alternatives (financial, minimum requirements, application process)**
- Expanded out-of-custody work crew
- Increased work release capacity
- District Court Post-Conviction Electronic Equipment Program
- Homeless Outreach Team (HOT)
- Coordinated Entry Referral Specialist
- Bellingham Municipal Court: Mental Health Court, DV Court, EHM in lieu of incarceration
- District Court High Risk DV Unit, court text messaging
- Juvenile Court Behavioral Health Program

B. Programs in place with resource shortage:

- **SEE APPENDIX B Section 3: Sheriff's Office Corrections Bureau Programs**
- Vocational and Literacy Training for Offenders, with bilingual accessibility
- Jail Medication Assisted Treatment (MAT) program
- Dedicated housing for drug court participants
- Increased warrant quash opportunities
- Housing Lab in Jail
- LROs – increased leverage, impact, and efficacy
- **DV offender treatment**

C. Programs needed but not existing:

- Young Adult Court
- **Young Adult reduced incarceration**
- Court processing and case workload efficiency improvements
- Brigid Collins family support services
- Intensive case manager for the jail
- MAT – include possibility of temporary release for evaluation and new treatment
Items in blue indicate items that have been before the Incarceration Prevention and Reduction Task Force, or one of its committees.

A. Programs in Place:

- Short term housing to stabilize
- Health Dept. Jail Reentry Program for individuals with behavioral health issues
- Prescriptions and access to prescriptions upon release
- Specialized Behavioral Health Unit in District Court
- GRACE

B. Programs in place with resource shortage:

- Jail Reentry Services, including from contracted jail service agencies
- Community-based reentry service
- Access to mental health treatment
- Sheriff Corrections: 2nd full-time re-entry specialist
- Goodwill re-entry employment services
- Employment resources – include “second chance employers”
- Expand work release
- Improve pathway for voluntary removal of protection orders / DVSAS services
- Brigid Collins family support services

C. Programs needed but not existing:

- Forensic program for Assertive Community Treatment (FACT)
- Reentry navigators
- Sheriff’s Office Corrections Bureau: Reentry services for release from incarceration other than Whatcom County jail.
- Warm handoff – reentry services
- Employment assistance
- D/C planning and mainstream benefits re-enrollment
- Peer re-entry specialists
INTERCEPT 5: Post-Incarceration Community Supports

Items in blue indicate items that have been before the Incarceration Prevention and Reduction Task Force, or one of its committees.

A. Programs in Place:

- Specialized Behavioral Health Program
- Community Outreach
- Peer-to-peer community supports (12-step programs, volunteer organizations)
- Community Medication Assisted Treatment
- GRACE
- WDRC adult conflict resolution training and skill building workshops
- Parent Child Assistance Program (PCAP)
- City Gate Supportive Housing

B. Programs in place with resource shortage:

- Behavioral health treatment (mental illness and substance use disorder)
- Clean and sober housing
- Community SUD Treatment
- CJTA Rental Assistance
- Supportive Shelters
- Domestic violence perpetrator treatment

C. Programs needed but not existing:

- 24/7 staffed permanent supportive housing
- Behavioral Health consultation to housing providers
- Recovery house (3/4 way house after treatment)
- Sex offender ADA accessible housing
- City Ambassadors / hiring program like Metropolitan Improvement District in Seattle
- Safe storage
APPENDIX A: Health Department, Human Services Division, community health programs........................................................................................................................................................................................................ Pages 13-14

APPENDIX B: Sheriff’s Office Corrections Bureau Programs ................................................. Page 15
Appendix A: **BH Sales Tax Programs & Services**

**Parenting Support for Healthy Childhoods and Upstream Prevention**
- Nurse Family Partnership*
- Strengthening Families
- Building Healthy Communities
- Community Coalitions
- Youth And Family Behavioral Health
- In-School Prevention / Intervention Services
- Communities in Schools
- Sendan Center
- Whatcom Dispute Resolution Center
- Community Resilience Research

**Drug Abuse Prevention for Adults**
- Prescription Take Back Pilot Program
- Prescription Lockboxes And Safe Storage
- Opiate Addiction Outreach & Education

**Behavioral Health Treatment & Support**
- Mental Health Crisis Triage Services
- Detox Services
- Substance Use Disorder Treatment Services
- Syringe Services Mobile Unit

**Specialty Court Programs And Other Legal Alternatives**
- Drug Court
- Family Treatment Court
- Mental Health Court

**Behavioral Health Support For Offenders In Criminal Justice System**
- Jail Behavioral Support and Re-Entry
- Psychotropic Medications and Community-Based Connections Upon Release
- Interim Housing
- Special Behavioral Health Unit in Probation
- Juvenile Court Behavioral Health Services

**Other Community Support Options**

**More Intense Housing and Behavioral Health Assistance**
- Staffed Permanent Supported Housing
- Transitional and Semi-Independent Housing Support (OC< Lydia Place, NWYS, 22 North, CityGate, SunHouses)
- Mental Health Services
- Behavioral Health Offender Domestic Violence
- Supported Employment for Youth (NWYS)
- Law Advocates- Access ID
- Professional Training & Workforce Development
- Crisis Intervention / Hostage Negotiation Training for First Responders*
- Sustainable Connections
- Sean Humphrey House

**Policy Development And System Coordination**
- Incarceration Prevention/Reduction Task Force
- Ground-level Response And Coordinated Engagement (GRACE)*
PROGRAMS & SERVICES WHICH ARE SUPPORTED BY OTHER FUNDING SOURCES

PARENTING SUPPORT FOR HEALTHY CHILDHOODS AND UPSTREAM PREVENTION
- Youth Street Outreach Team
- Parenting Academy
- Growing Together and Parent Child Assistance Program
- Youth Marijuana Prevention And Education

DRUG ABUSE PREVENTION FOR ADULTS
- Pharmaceutical Stewardship Ordinance

BEHAVIORAL HEALTH SUPPORT
- Mobile Crisis Outreach Team (MCOT)
- Program for Assertive Community Treatment (PACT)
- Substance Use Disorder Services

SPECIALTY COURT PROGRAMS AND OTHER LEGAL ALTERNATIVES
- Teen Court
- Non-Incarcerated Pretrial Supervision
- Electronic Home Detention / Monitoring
- DUI Victim Impact Panel
- Cite and Release

BEHAVIORAL HEALTH INTEGRATION WITH PUBLIC SAFETY AND FIRST RESPONDERS
- Neighborhood Police Officers and Deputies
- Community Paramedic

BEHAVIORAL HEALTH SUPPORT FOR OFFENDERS IN CRIMINAL JUSTICE SYSTEM
- Jail Behavioral Support and Re-Entry

OTHER SUPPORT OPTIONS FOR OFFENDERS INVOLVED IN THE CRIMINAL JUSTICE SYSTEM
- Work Release and School Release
- Offender Work Crews
- GED Program for Offenders
- Financial Literacy for Offenders

MORE INTENSE HOUSING AND BEHAVIORAL HEALTH ASSISTANCE
- Community Outreach and Recovery Support (CORS)
- Project for Assistance in Transition from Homelessness (PATH)
- Homeless Outreach Team (HOT)

POLICY DEVELOPMENT AND SYSTEM COORDINATION
- Incarceration Prevention/Reduction Task Force*
- Ground-level Response And Coordinated Engagement (GRACE)*
Whatcom County Sheriff’s Office Corrections Bureau Services: 
Alternatives and Programming

1. Programs in Conjunction with Full Custody:
   - Inmate worker programs, both inside the facilities and on the In-Custody Work Crew Program
   - GED preparation/tutoring
   - Whatcom Literacy Council (1 on 1 tutoring, as needed).
   - Bible Studies/ 1 on 1 Faith Based Counseling.
   - Domestic Violence and Sexual Assault Services (Group meetings and emergency notification resource for individuals who have been victims of Sexual Assault/Domestic Violence)
   - Assistance in resume writing, Interview Techniques and how to dress for a job interview.
   - Alcoholics Anonymous / Narcotics Anonymous
   - Homeless out-reach via the County HOT team.
   - Parents for Parents group
   - Work Source group counselling including how to prepare for an interview and finding work after incarceration.
   - Goodwill programming including transition services to Goodwill.

2. Services in Custody to assist with underlying medical, behavioral health issues:
   - Jail Health Programs involving Nurses, Physician, Advanced Registered Nurse Practitioner (ARNP), Dentist, and Medical Assistants.
   - Mental Health Services involving 2 full time Mental Health Professionals (MHP’s), 1 part-time Psychiatrist and 1 part time Psychiatric Advanced Registered Nurse Practitioner (ARNP-P). Provides crisis response and stabilization services, some crisis counseling and works with the emergency mental health system.
   - Medication Assisted Treatment for offenders with Opioid Use Disorder (Began 9/2018 and continuing to expand).

3. Projects needed, in process, or planning:
   - Improving information exchange between Corrections and other portions of the Criminal Justice System.
   - Expanding the in-custody work crew opportunities to pre-trial offenders.
   - Expansion of video visiting capabilities.
   - Additional availability of onsite counselling for chemical dependency.
   - Expanded inmate worker programs, both inside the facilities and on the In-Custody Work Crew Program
   - Expanded space for GED preparation/tutoring
   - Intensive case manager for jail inmates
Task Force members inventory the existing fully- or partially-funded programs throughout the community-wide system. Each program is identified to its appropriate place on the custom IPRTF Sequential Intercept Service Inventory.

The Task Force makes policy recommendations on current gaps in the system that need to be addressed, and considers proposals based on those gaps.

An individual or agency may propose a new or expanded program via the Project Review Request worksheet and submit to the full Task Force for review and possible assignment to committee.

The Task Force may assign projects to a particular committee for review and inclusion on the individual committee work plans or retain a project for full Task Force discussion, review, and possible recommendation.
Project Proposal: Request for IPRTF Review: PART A

Please complete the following questions as completely as possible:

Proposed by (include contact phone and email): ________________________________

Is this proposal specifically referred to the Task Force by the County Council? ______

Project description: ________________________________

How does this proposal fit into the Task Force’s purpose and function of incarceration prevention and reduction? (See WCC 2.46.020 & .030) ________________________________

Does the project require involvement of multiple jurisdictions and/or agencies, or an agency other than your own? If so, which agencies, and have they reviewed, commented on, or committed to the project? ________________________________

What is the project timeline for development, implementation, and ongoing monitoring? Will there be a phased implementation or a pilot program? ________________________________

What are the proposed capital and/or operational costs? ________________________________

What are anticipated funding sources, and is funding currently committed to the project? ________________________________

What will be the anticipated return on investment? ________________________________

Does the project follow evidence-based industry best practices to achieve the purpose of incarceration prevention and/or reduction? ________________________________

Are there similar programs already in place in other jurisdictions? Would this be a duplication of existing efforts? Could a successful program in another jurisdiction serve as a model for a program locally? ________________________________

Where would this project fall on the IPRTF Sequential Intercept Continuum? ____________

*If the proposal falls exclusively in Intercept 0, please complete Part B on the next page.*

Have there been IPRTF discussions on this or a similar project in the past? If so, when, and what was the outcome? ________________________________

Additional comments: ________________________________
If the proposal falls exclusively in Intercept 0, please complete the following questions as completely as possible:

The outcomes and intentions of a program are to reduce incarceration or the likelihood of involvement with the criminal justice system, versus prevention from unhealthy outcomes in general. Prevention efforts should be considered through the lens of incarceration rather than cataloging all community activities.

Prevention programs that may have an impact on reducing criminogenic risk factors, but do not include criminogenic risk factor reduction as a primary purpose of the program, are listed in (Document X).

How does the program target criminogenic risk factors?

Is reducing the likelihood of incarceration one of the specific intentions of the program?

If available, describe any evidence and/or research that demonstrates the intervention program reduces the likelihood of future incarceration and/or involvement in the criminal justice system.
### ACRONYMS

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>ADA</td>
<td>Americans with Disabilities Act</td>
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<tr>
<td>BH</td>
<td>Behavioral health</td>
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<tr>
<td>BHASO</td>
<td>(North Sound) Behavioral Health Administrative Services Organization (formerly NS Behavioral Health Organization: NSBHO)</td>
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<tr>
<td>BPD</td>
<td>Bellingham Police Department</td>
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<td>CIT</td>
<td>Crisis Intervention Training</td>
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<td>CJTA</td>
<td>Criminal Justice Treatment Account</td>
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<td>CORS</td>
<td>Community Outreach and Recovery Support</td>
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<td>CSF</td>
<td>Crisis Stabilization Facility</td>
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<td>D/C</td>
<td>Diversion</td>
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<td>DCR</td>
<td>Designated crisis responders</td>
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<td>DUI</td>
<td>Driving under the influence</td>
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<td>DV</td>
<td>Domestic Violence</td>
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<td>DVSAS</td>
<td>Domestic Violence &amp; Sexual Assault Services</td>
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<td>GPS</td>
<td>Global positioning system</td>
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<td>GRACE</td>
<td>Ground-level Response and Coordinated Engagement (Program)</td>
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<td>Law Enforcement Assisted Diversion</td>
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<td>LRO</td>
<td>Lesser restrictive orders</td>
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<td>SCRAM</td>
<td>Secure continuous remote alcohol monitor</td>
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<td>Substance use disorder</td>
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<td>TX</td>
<td>(medical and/or clinical) treatment</td>
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<tr>
<td>WCSO</td>
<td>Whatcom County Sheriff’s Office</td>
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<tr>
<td>PROGRAM:</td>
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<tr>
<td>Adult conflict resolution training and skill building workshop</td>
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<tr>
<td>Behavioral Health program (Adult &amp; Juvenile): Health Department</td>
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<tr>
<td>Brigid Collins Parenting Academy</td>
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<tr>
<td>Community Outreach and Recovery Support</td>
<td>CORS</td>
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<tr>
<td>Community Paramedic</td>
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<tr>
<td>Coordinated Reentry Referral</td>
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<tr>
<td>Criminal Justice Treatment Account</td>
<td>CJTA</td>
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<tr>
<td>Crisis Intervention Training</td>
<td>CIT</td>
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<tr>
<td>Crisis Stabilization Facility</td>
<td>CSF</td>
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<tr>
<td>Diversion planning &amp; mainstream benefits reenrollment</td>
<td>D/C</td>
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<tr>
<td>Domestic Violence offender treatment</td>
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<tr>
<td>DUI Victim Impact Panel</td>
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<td>Electronic home monitoring</td>
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<td>Eviction prevention assistance</td>
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<tr>
<td>Forensic Program for Assertive Community Treatment</td>
<td>FACT</td>
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<tr>
<td>Gang Prevention Programs (Health Dept.)</td>
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<tr>
<td>Global positioning system</td>
<td>GPS</td>
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<tr>
<td>High Risk DV Unit: District Court</td>
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<tr>
<td>Homeless Outreach Team</td>
<td>HOT</td>
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<tr>
<td>Housing: ADA accessible for sex offenders</td>
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<tr>
<td>Housing: affordable supportive housing</td>
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<tr>
<td>Housing: City Gate</td>
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<tr>
<td>Housing: clean and sober</td>
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<tr>
<td>Housing: dedicated for drug court participants</td>
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<tr>
<td>Housing: housing lab in the jail</td>
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<td>Intensive Case Management staff position in the jail</td>
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<tr>
<td>Jail Reentry Program: Health Dept.</td>
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<tr>
<td>Law Enforcement Assisted Diversion</td>
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<td>PROGRAM:</td>
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<td>Lesser restrictive orders</td>
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<td>Mental Health Screening in the jail</td>
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<td>Mobile Crisis Outreach Team</td>
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<td>Neighborhood Policing</td>
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<td>Northwest Youth Street Outreach Team</td>
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<td>Parent Child Assistance Program</td>
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<td>Phone call and text court and appointment reminders: multiple jurisdictions</td>
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<td>Prescription supply provided at reentry</td>
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<td>Pretrial Assessment: multiple jurisdictions</td>
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<td>Pretrial release services with monitoring: multiple jurisdictions</td>
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<tr>
<td>Program for Assertive Community Treatment</td>
<td>PACT</td>
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<tr>
<td>Projects for Assistance in Transition from Homelessness</td>
<td>PATH</td>
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<td>Reentry navigator program</td>
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<td>Reentry services for non-County jail incarceration</td>
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<td>Reentry services: community-based</td>
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<td>Reentry specialist Jail/Health Dept. contract</td>
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<td>Reentry: peer reentry specialists</td>
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<td>Safe Storage</td>
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<td>School District Prevention Programs</td>
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<td>Secure continuous remote alcohol monitor</td>
<td>SCRAM</td>
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<td>Specialized behavioral health unit: District Court</td>
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<tr>
<td>Specialized courts: teen, drug, mental health, family, DV, young adult</td>
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<td>SUD community treatment services</td>
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<td>Suicide Assessment in the jail</td>
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<td>Supportive shelters</td>
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<td>Training: CIT for law enforcement</td>
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<td>Training: specialized for case managers</td>
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<tr>
<td>Training: specialized for law enforcement &amp; first responders</td>
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<tr>
<td>Vocational &amp; Literacy Training in the jail</td>
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<tr>
<td>Warrant quash opportunities</td>
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<td>Work crew: in-custody and out-of-custody</td>
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<tr>
<td>Work release and school release</td>
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<tr>
<td>Youth Restorative Practices/Justice Services</td>
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