

**Incarceration Prevention Reduction Task Force
Crisis Stabilization Facility Committee**

9:30 a.m. – 11:00 a.m., July 18, 2019

Courthouse Fifth Floor Conference Room 513, 311 Grand Avenue, Bellingham WA

AGENDA

If you plan to bring handouts to this meeting, bring at least 10 for committee members and the file.

Topic	Requested Action	Presenter	Attachment
1. Call to Order			
2. Task Force Strategic Plan Program Inventory	Plot programs on strategic plan inventory map	N/A	1 - 3
3. Data collecting and reporting requirements in the service provider contracts and tenant agreements	Review & Discussion	N/A	4 - 5
4. Update on State audit of the Health Care Authority	Update	Anne Deacon	N/A
5. Other Business			
6. Public Comment			
7. Adjourn			

UPCOMING MEETINGS

IPR TASK FORCE Bi-monthly on various Mondays 9-11 a.m. Courthouse Rooms 513/514 311 Grand Ave., Bellingham	COMMITTEES				
	BEHAVIORAL HEALTH various Mondays 2:30-3:30 Health Department Creekside Room 509 Girard, B'ham	INDEX First Thursday 1:30-3:00 Courthouse Rooms 513/514, 311 Grand Avenue, B'ham	LEGAL & JUSTICE SYS. 2 nd Tuesday 11:30 am-1:30 pm Courthouse Room 514 311 Grand Ave., Bham	CRISIS STABILIZATION Bi-monthly 3 rd Thursday 9:30-11:00 a.m. Courthouse Room 513 311 Grand Avenue, B'ham	STEERING As needed 9:30-11:00 a.m. Courthouse Room 513 311 Grand Ave., Bham
August 12 October 14 December 16	August 12 September 16 October 14 November 12 (joint meeting w/ Legal & Justice Committee) December 16	August 1 October 3 December 5	August 13 September 10 October 8 November 12 December 10	July 18 September 19 November 21	August 1 October 3 December 5

The most up-to-date meeting schedule can be found online at:

<http://wa-whatcomcounty.civicplus.com/calendar.aspx?CID=40>,



Whatcom County Incarceration Prevention and Reduction Task Force

June 12, 2019

MEMORANDUM

TO: Incarceration Prevention & Reduction Task Force Members
FROM: Jill Nixon, Task Force Clerk
SUBJ: Staff Report on Custom Sequential Intercept Program Inventory

The Steering Committee is developing an overall strategic plan to guide the Incarceration Prevention and Reduction Task Force/Law and Justice Council in prioritizing projects and proposals that come before the Task Force. The first step in that process is to inventory existing programs that make an impact in preventing and/or reducing incarceration.

Steering Committee members identified the behavioral health sequential intercept as a model to organize these programs for the Task Force. When complete, this customized model will identify gaps in the system, where resources are lacking, and where priorities should be focused. A draft of the Sequential Intercept Program Inventory is attached. To complete the inventory, the Steering Committee has asked committees and their members to plot their agencies' programs at the appropriate points along the intercept continuum.

Background: In January 2018, the Task Force engaged in a prioritizing process with Crossroads Consulting in which various programs and recommendations, including those in the Vera Institute Final Report, were assigned to the Task Force Subcommittees. The Planning Session Final Report identified as a next step the need for the Steering Committee to develop an overall work plan for the Task Force. This has not yet been done. Furthermore, the Task Force enabling ordinance specifically directs the Task Force to develop or enhance programs "designed along a continuum that effectively reduces incarceration...."

Steering Committee members have also discussed how to prioritize new proposals that come forward. Through this discussion, they propose creating a strategic plan that would identify the current programs that exist, whether they are fully or partially funded and staffed, and gaps in services that need to be developed. Proposals for new programs would be submitted on a project proposal request for review form and submitted to the full Task Force for review and, if appropriate, placed along the continuum.

Request for Action:

Task Force committee members, on behalf of their representative agencies, may list their existing programs that make an impact in preventing and/or reducing incarceration, and indicate for each program where it should be located on the custom sequential intercept. Please bring this information to your next committee meeting or forward to Jill Nixon at jnixon@co.whatcom.wa.us by July 26.

INCARCERATION PREVENTION & REDUCTION TASK FORCE SEQUENTIAL INTERCEPT PROGRAM INVENTORY

Programs existing prior to convening the Incarceration Prevention and Reduction Task Force. Please add any programs that existed and were overlooked, above.

Programs developed or expanded through or in consultation with the Incarceration Prevention and Reduction Task Force

Intercept 0	Intercept 1	Intercept 2	Intercept 3	Intercept 4	Intercept 5
Community Services	Law Enforcement	Initial Detention/Initial Court Hearings	Jails/Courts	Reentry	Post-Incarceration Community Supports
<i>Programs in Place:</i>	<i>Programs in Place:</i>	<i>Programs in Place:</i>	<i>Programs in Place:</i>	<i>Programs in Place:</i>	<i>Programs in Place:</i>
<p>0.A</p> <ul style="list-style-type: none"> • Refer to Health Department, Human Services Division, for existing community health programs • Youth Street Outreach Team (NWYA) • GRACE • School District Prevention Programs • Whatcom Dispute Resolution Center 	<p>1.A</p> <ul style="list-style-type: none"> • Gang Prevention Programs • Homeless Outreach Team • Community Paramedic • Opiate Outreach and Engagement • Neighborhood Policing • Specialized training for law enforcement and first responders • Truancy/discipline school-based services • Law Enforcement CIT training • Crisis Triage (Mental Health and addiction stabilization services) • Specialized training for case managers • GRACE 	<p>2.A</p> <ul style="list-style-type: none"> • Mental Health Screening • Suicide Assessment • Superior Court & District Court Pretrial Assessment • Electronic Home Monitoring in Lieu of detention when applicable • District Court phone call reminders for select court calendars 	<p>3.A</p> <ul style="list-style-type: none"> • DUI Victim Impact Panel • Work and School release • In-custody work crew • Teen Court • Enhanced Drug Court • Family Treatment Court • Mental Health 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 EHM (sentenced) 	<p>4.A</p> <ul style="list-style-type: none"> • Short term housing to stabilize • Health Dept. Jail Reentry Program • Intensive case management • Prescriptions and access to prescriptions upon release • Specialized Behavioral Health Unit in District Court 	<p>5.A</p> <ul style="list-style-type: none"> • Specialized Behavioral Health Program • Community Outreach
<i>Programs in place with resource shortage:</i>	<i>Programs in place with resource shortage:</i>	<i>Programs in place with resource shortage:</i>	<i>Programs in place with resource shortage:</i>	<i>Programs in place with resource shortage:</i>	<i>Programs in place with resource shortage:</i>
<p>0.B</p>	<p>1.B</p> <ul style="list-style-type: none"> • Community Outreach and Recovery Support (CORS) 	<p>2.B</p> <ul style="list-style-type: none"> • Mental Health-Assisted Outpatient Treatment / Lesser Restrictive Orders (LRO) • Superior Court Pretrial Services Unit 	<p>3.B</p> <ul style="list-style-type: none"> • Vocational and Literacy Training for Offenders • Jail Medication Assisted Therapy (MAT) program • Dedicated housing for drug court participants • Increased warrant quash opportunities (?) 	<p>4.B</p> <ul style="list-style-type: none"> • Program for assertive community treatment (PACT) • Jail Reentry Services • SUD Treatment / Medicated Assisted Treatment • Mental Health Treatment 	<p>5.B</p> <ul style="list-style-type: none"> • Clean and sober housing

INCARCERATION PREVENTION & REDUCTION TASK FORCE SEQUENTIAL INTERCEPT PROGRAM INVENTORY

<i>Programs needed but not in existence:</i>	<i>Programs needed but not in existence:</i>	<i>Programs needed but not in existence:</i>	<i>Programs needed but not in existence:</i>	<i>Programs needed but not in existence:</i>	<i>Programs needed but not in existence:</i>
0.C	1.C • LEAD	2.C	3.C • Offender treatment for Domestic Violence • Young Adult Court • Young Adult reduced incarceration • Court processing and case workload efficiency improvements	4.C • Forensic program for Assertive Community Treatment (FACT) • Offender treatment for Domestic Violence	5.C • 24/7 staffed permanent supportive housing • Behavioral Health consultation to housing providers • Recovery house (3/4 way house after treatment)
Affordable supported housing is necessary 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 Information Needs and Data Exchange (INDEX) Subcommittee works to support policy and program data efficiency enhancements across all intercept levels.					
The Task Force will first prioritize specific requests from the Whatcom County Council.					

Programs existing prior to convening the Incarceration Prevention and Reduction Task Force. Please add any programs that existed and were overlooked, above.
Programs developed or expanded through or in consultation with the Incarceration Prevention and Reduction Task Force

DATA OUTCOMES, TRENDS, AND ISSUES: Triage Facility Committee:

Outcomes to Measure:		
	1	Diversion from criminal justice and/or hospital
	2	Maximum use of the facility
	3	Stabilizing an individual in a less restrictive environment
Trends to Track:		
	1	Daily Census
	2	Number of admissions per unit
	3	Number of denials
	4	Length of Stay
	5	Discharge disposition
	6	
3 Metrics to measure from 3 Annual Report topics (1 metric per topic):		
	1	
	2	
	3	
Interoperability Issues:		
		Connect the intake data from the triage center, social services, emergency department and other medical sources, law enforcement, possibly via claims data
		Consider whether the County, in concert with the managed care organizations (MCOs), could pay the regional Behavioral Health Organization (BHO) to collect all the data as a central repository
		Can law enforcement bill for, and consequently report on, transport data

Triage Facility Data Points

GOALS of Facility (OUTCOME MEASURES):

- ❖ Diversion from criminal justice and/or hospital
- ❖ Maximum utilization of facility
- ❖ Improved health and wellness of individuals who receive services

DATA POINTS (INTEROPERABILITY ISSUES/TRENDS):

1. Daily census
2. # of Admissions per unit
 - A. Referral source
 - 1) Hospital Psych unit step-down

- 2) Emergency Department
- 3) EMS drop-off
- 4) Law Enforcement drop-off
- 5) Treatment provider
- 6) Social Service provider (i.e., housing)
- 7) Self

3. # of Denials

A. Reason for denial

- 1) No bed capacity
- 2) Inappropriate referral
 - a. level of care not required (not acute enough)
 - b. higher level of care required
 - c. inability of unit to manage behaviors that pose a significant risk of harm to others

4. Length of Stay (and specify program)

5. Discharge disposition

A. Transferred

- 1) to in-patient treatment setting (MH or SUD)
- 2) to out-patient treatment provider (MH or SUD)
- 3) back to community treatment provider
- 4) to higher level of medical care

B. Left against clinical/medical advice

OTHER:

C. Medication Assisted Treatment initiated and connected to ongoing provider

D. Housing status upon discharge

- 1) Return to homelessness
- 2) Return to home with no further treatment