

Incarceration Prevention and Reduction Task Force: Behavioral Health Committee

9:00 - 10:30 a.m., November 16, 2021, Remote-only virtual meeting

If you require special assistance to participate, please contact the County Council Office at least 96 hours in advance.

Link to join Zoom Webinar

Attendees will join the Zoom Webinar without audio or video controls. Webinar Host will invite attendees to speak at the appropriate time during the meeting

- [Webinar join link](#)
- Call in phone number: (253) 215-8782
- Webinar ID: 872 1859 2936
- Password: 17783

AGENDA

Land Acknowledgement Statement: Before we begin, we acknowledge that we are gathered on the traditional and unceded territory of the Lummi, Nooksack, Samish and Semiahmoo People who have cared for and tended this land since time immemorial. Truth and acknowledgment are critical to building mutual respect and connection across all barriers of heritage and difference. We begin this effort to acknowledge what has been buried by honoring the truth. We pay respect to their elders past and present. Please take a moment to consider the many legacies of violence, displacement, migration, and settlement that bring us together here today. And please join us in uncovering such truths at any and all public events.

Packet Pages

1. **Call to Order**
2. **Task Force Communications** 1 – 3
 - Action: Identify 2-5 targeted public relations and communication key messages regarding past, current, or future Task Force initiatives
3. **Continued review of priority items** 4 – 5
Discussion
4. **Agenda items for December Joint Meeting with Legal & Justice Systems Committee**
Discussion
5. **Other Business**
6. **Public Comment**
 1. If you would like to speak, virtually “raise your hand.”
 - a. Online: select the Raise Hand icon
 - b. Phone: Press *9
 2. When called upon to speak, unmute your microphone. Inform the Webinar Host if you would like to enable your video during your comments.
 3. Please state your full name for the record.
 4. Staff will disable your microphone when you are done speaking.
7. **Adjourn**

Meeting summary of the previous meeting is included at the end of the packet for information only. Committee members may suggest changes and/or corrections to the draft summary to jnixon@co.whatcom.wa.us. Audio recordings are the official meeting record and can be found on the IPRTF and committee [website](#).

Upcoming Meetings

Visit the [Task Force website meeting calendar](#) for the most up-to-date meeting schedule

At this time, all meetings are held via remote-only Zoom Webinar

IPR TASK FORCE	BEHAVIORAL HEALTH COMMITTEE	LEGAL & JUSTICE SYSTEMS COMMITTEE	CRISIS STABILIZATION FACILITY COMMITTEE	INDEX COMMITTEE	STEERING COMMITTEE
Monthly on various Mondays 9-11 AM	Monthly, 3rd Tuesday 9:00-10:30 AM	Monthly, 2 nd Tuesday 11:30 AM – 1:00 PM	Bi-monthly, 3 rd Thursday 9:30-11:00 AM	Bi-monthly, 1 st Thursday 1:30-3:00 PM	Various Thursdays 11:00 AM-12:30 PM
December 13	December 14 (Joint)	December 14 (Joint)	(None)	(None)	December 2

I. Background

Whatcom County Incarceration Prevention and Reduction Task Force is a County Council-appointed body of local elected officials, law enforcement and criminal justice officers, courts, citizens, public health professionals, and social service agencies to reduce incarceration through enhanced services along the entire continuum of care, from prevention to post-incarceration.

People with mental illness and chemical dependency have a significant impact on the criminal justice system, jail population, and emergency medical system. Many people return to jail or the emergency room repeatedly as a result of behavioral health struggles. These individuals, and the community as a whole, are better served through robust prevention, treatment, and diversion programs.

Since the Task Force was founded in 2015, it has achieved a number of major accomplishments in the community. However, those efforts have largely gone unnoticed by our residents. Therefore, the Task Force will engage a communications strategist individual or team to assist us with improving our public communication efforts.

II. Statement of Work

1. Phase 1 - Develop and implement communications campaign

Goal: Work with the IPRTF and its Steering Committee to create a public communication campaign for 3 or 4 Task Force initiatives, projects, key focus areas, activities, or messages to communicate to the target audience(s). The goal of the campaign is to significantly raise awareness of and educate the community about recent achievements and current and future activities. A successful campaign will use public communication best practices that will enhance and optimize the IPRTF's current efforts with:

- Public information and outreach
- Consultation that requests feedback from the public
- Public participation that engages the public in informed dialog with the Task Force

Tasks:

Meet (in-person or remotely) with Steering Committee to:

1. Review overall goals, expectations, and outcomes of the contract
2. Review and refine a core message for 3 or 4 Task Force initiatives and projects
3. Discuss potential target audience groups for each core message
4. Review the Task Force's current communications efforts and capabilities and discuss potential improvements

Draft Scope of Work for Consultant on IPRTF Communications Strategy

Analyze and recommend (via written and/or phone consultation) a campaign strategy that can be implemented immediately. The recommendation will include, for each initiative or project:

1. Final, refined message
2. Target audience group, including local media
3. A toolkit of messaging materials
4. Content distribution channel(s) and/or strategy

Coordinate and conduct campaign for each initiative, once approved by the full Task Force.

All content and messaging must use plain language, using the federal plain language guidelines.

See: <https://www.plainlanguage.gov/>

Develop a process for evaluating the success of the communication campaign.

2. Phase 2 - Develop communications framework for future achievements and initiatives

Goal: Develop a communications framework that the Task Force, Steering Committee, and staff can implement when future achievements and initiatives arise. A successful communications framework will:

- Create a standardized process and design for a variety of different topics and key messages
- Define best practices and guidance for creating engaging content and messaging
- Include a toolkit of communication materials that can be used as templates for future communications
- Determine the most effective content distribution channels for each target audience group

Tasks:

Educate and provide written tips and guidance to the IPRTF members and/or staff on how to create an effective message and content that is tailored to a specific audience, using best practices for public communication of local government information. Task Force members should be able to create a targeted message on a topic and direct staff to develop and deliver related content.

Create templates for content and outreach materials that can be used in future campaigns, such as brochures, infographics, community presentations, press releases and other media announcements, newsletters, social media content, and other marketing materials

Identify all potential target audience groups, such as policy-makers, Tribes, BIPOC community, low-income communities, individuals with lived experience in the criminal justice system, service providers, partner agencies, business owners and employees, local media, community influencers, etc.

Analyze and identify where the target audience groups get their news and how they prefer to engage with local government.

Determine the most strategic communication methods for each target audience group, including: content attributes (for example, the effectiveness of personal stories vs. data), outreach materials, and distribution channels, such as optimizing the use of the County website, direct outreach, social media, speaking at events, public forums, infographics, newsletters, traditional media, and other materials, etc..

Evaluate the current communication efforts to determine what is working, what is not working, and what is missing.

Create a final report to the Task Force that includes:

1. An Excel spreadsheet that lists all target audience groups and the appropriate content type and distribution channel(s) for each group
2. Templates for future marketing and outreach materials
3. Recommendations for improvements to existing communications efforts

III. Qualifications

The individual consultant and/or team should have:

- Minimum of **4** years' experience in a marketing communications field
- Minimum of **2** years' experience with web-based marketing campaigns
- Demonstrated experience in public relations and communications from a government agency
- Excellent writing/editing and verbal communication skills
- Graphical design and layout experience
- Knowledge of social media strategies highly desired

Priority Item	Total Points
<p>O. Service Capacity. Expand local behavioral health staff capacity however possible, such as establishing training programs at local colleges or using local funds that don't have as many restrictions as State or federal funds. Review opportunities to enhance retention of said personnel through comp/benefits etc.</p> <ul style="list-style-type: none"> • Action Item: The Health Department is working with the Behavioral Health Administrative Services Organization (BH-ASO) and Health Care Authority on the lack of a workforce being a statewide issue that needs a statewide response. Health Department staff can let this committee know how it can support this effort. 	115
<p>N. Racial Equality. Apply a GARE overlay to everything the committee does, including determining priorities and recommending new programs and services.</p>	109
<p>G. Juvenile SUD. Enhanced juvenile SUD treatment and services</p> <ul style="list-style-type: none"> • Action item: Parker and Hammill stated they will work with the Health Department to look for youth SUD treatment service models in other areas and possible schedule a presentation at a later meeting. (<i>July 2021</i>) 	106
<p>H. Crisis Response. Dedicated mental health professionals in ride-along program with law enforcement, similar to the Impact Program in Skagit County.</p>	106
<p>C. Reentry and Warm Handoff. Enhance existing connection gaps between the emergency department and the crisis stabilization center. Care navigators/coordinators for people leaving incarceration or the Crisis Stabilization Center.</p>	102
<p>F. Meth Use. Methamphetamine treatment and recovery. Are there additional services to provide for people who want to recover? Examine the problems of meth use in supportive housing.</p>	98
<p>J. Upstream. Prevention, such as a children's initiative, align with Healthy Whatcom recommendations on enhancing Youth Mental Health services</p>	97
<p>E. Reentry and Warm Handoff. Evaluate the need for additional services for inmates being released from incarceration as a result of the Blake Decision: behavioral health treatment</p>	95
<p>L. Data and Program Review. Work with other committees, such as INDEX, to make sure the IPRTF has pertinent data to assess current conditions and evaluate outcomes. Review niche issues at the nexus of behavioral health and criminal justice and recommend promising new practices</p>	94
<p>K. Funding. House Bill 1590, House Bill 1406, Economic Impact Development (EDI) funds, the real estate excise tax (REET) fund, learn how funds are being spent from the one-tenth of one percent sales tax, and review other potential funding options</p>	92
<p>B. Reentry and Warm Handoff. Jail Reentry, including on-boarding the new full-time reentry specialist. Can the reentry specialist work outside the jail to maximize the possibility of a successful warm hand-off?</p>	87
<p>M. Data and Program Review. Determine what services are already in place and working in the community. Teacher training, including trauma-informed work</p>	87

D. Reentry and Warm Handoff. Develop better transportation between service programs, both in and outside of Whatcom County	81
I. Program Review. Review outcomes of the new recovery house	80
A. Covid Impacts Assessment. Needs assessment of how Covid has impacted the behavioral health population across Intercept Stages/PITA continuum.	73
NEW. Expand co-responder teams to include opiate/drug overdose responses.	9
