

**Incarceration Prevention and Reduction Task Force
Joint Behavioral Health and Legal and Justice Systems Committees**

11:30 a.m. - 1:00 p.m., April 19, 2022, 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

- [Link to join Zoom Webinar](#)
- Call in phone number: (253) 215-8782
- Webinar ID: 810 6387 8393
- 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. 2022 Annual Report to County Council & County Executive 1

Discussion/Committee Co-Chairs

- Content included for each committee

3. Update on the Sequential Intercept Service Inventory (held from March meeting)

Update/Mike Parker

4. Reentry Services (held from March meeting) 2

Discussion

- Reentry Navigators
- Reentry protocols for treatment centers
- Current research and best practices
- Funding for services
- Asset mapping (Sequential Intercept + GARE)
 - What services are currently available
 - Identify gaps in connections
- Data

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 jlassite@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

<u>IPR TASK FORCE</u>	COMMITTEES				
Monthly 2 nd or 3 rd Monday 9-11 AM	<u>BEHAVIORAL HEALTH</u> Monthly 3 rd Tuesday 9:00-10:30 AM	<u>LEGAL & JUSTICE SYSTEMS</u> Monthly 2 nd Tuesday 11:30 AM – 12:30 PM	<u>CRISIS STABILIZATION FACILITY</u> Quarterly, 3 rd Thursday 9:30-11:00 AM	<u>INDEX</u> Bi-monthly 1 st Thursday 1:30-3:00 PM	<u>STEERING</u> Monthly Various Thursdays 11:00 AM - 12:30 PM
May 16 June 13 July 18 August 15 September 19 October 17 November 14 December 19	May 17 June 14*(11:30-1:00) July 19 August 16 September 20 (11:30-1:00) October 18 November 15 December 13* (11:30-1:00)	May 10 June 14 July 12 August 9 September 20* October 11 November 8 December 13	April 21 July 21 October 20	June 2 August 4 October 6 December 1	May 5 June 2 July 7 August 4 September 8 October 6 November 3 December 8

B. Progress Report: Behavioral Health

1. Monitoring emerging problems with new street drug trends
2. Review Potential State Funding Sources & Legislation
3. Monitor status of provider ride-along with law enforcement, alternate response teams
4. Jail Reentry (with LJS Committee)
5. Next Steps for Committee

E. Progress Report Legal and Justice Systems Committee

1. Domestic violence offender treatment
2. Competency and restoration
3. Jail Reentry (with Behavioral Health Committee)
4. Continue to refine the Pretrial Processes Unit and Risk Assessment
5. Next Steps for Committee

F. Progress Report Joint Behavioral Health and Legal and Justice Systems

1. Increase meetings to quarterly
2. Competency and restoration
3. Jail Reentry
4. Next Steps for the Joint Committees

DRAFT Sequential Intercepts 4 and 5: Dynamic Risk Factors

<p>Intercept 4 (I4): Reentry Intercept 5 (I5): Post-Incarceration Community Supports</p>
<p>Intercepts 4 & 5 <i>Programs in Place:</i></p>
<p>I4 Health Dept. Jail Reentry Program I5 Community Outreach I5 Offender Reentry Community Safety (ORCS) - DOC</p>
<p>Intercepts 4 & 5 <i>Programs in place with resource shortage</i></p>
<p>I4 Jail Reentry Services, including from contracted jail service agencies I4 Community-based reentry service I4 2nd Sheriff Corrections fulltime re-entry specialist</p>
<p>Intercepts 4 & 5 <i>Programs needed but not in existence:</i></p>
<p>I4 Forensic program for Assertive Community Treatment (FACT) I4 Reentry navigators I4 Sheriff's Office Corrections Bureau: Reentry services for release from incarceration other than Whatcom County jail I4 Warm Handoff I4 Discharge planning and mainstream benefits re-enrollment</p>

"Although each of the risk factors affect reentry, the magnitude of their individual effects are mediated by certain other factors that warrant tailored interventions. The factors discussed in this section include:"

- Race
- Gender
- Age
- Type of Crime
- Type of Community
- Income Level

HEALTH:
Programs in Place
 I4 Prescriptions and access to prescriptions upon release
 I4&5 GRACE Program
 I5 Specialized Behavioral Health Program
 I5 Community Medicated Assisted Treatment

Programs in place with resource shortage
 I4 Access to mental health treatment
 I5 Community SUD Treatment

Programs needed but not in existence

HOUSING:
Programs in Place
 I4 Short term housing for stabilization
 I5 City Gate Supportive Housing
 I5 Homeless Outreach Team (HOT)

Programs in place with resource shortage
 I5 24/7 staffed permanent supportive housing
 I5 Clean and sober housing
 I5 CJTA Rental Assistance
 I5 Supportive Shelters
 I5 Recovery house (3/4 way house after treatment)

Programs needed but not in existence
 I5 Behavioral Health consultation to housing providers
 I5 Sex offender ADA accessible housing
 I5 Safe storage

MENTORSHIP:
Programs in Place
 I4 Specialized Behavioral Health Unit in District Court

I5 Peer-to-peer community supports (12-step programs, volunteer organizations)

Programs in place with resource shortage

Programs needed but not in existence
 I4 Peer re-entry specialists

EMPLOYMENT:
Programs in Place

Programs in place with resource shortage
 I4 Goodwill reentry employment services
 I4 Employment resources, including "second chance employers"
 I4 Expand work release

Programs needed but not in existence
 I4 Employment assistance
 I5 City Ambassadors / hiring program like Metropolitan Improvement District in Seattle

SKILL DEVELOPMENT:
Programs in Place
 I5 WDRC adult conflict resolution training and skill building workshops

Programs in place with resource shortage

Programs needed but not in existence

SOCIAL NETWORKS:
Programs in Place
 I5 Parent Child Assistance Program (PCAP)

Programs in place with resource shortage
 I4&5 Improve pathway for voluntary removal of protection orders / DVSAS services
 I4 Brigid Collins Family Support Services

Programs needed but not in existence
 I4 DV Offender treatment

ORGANIZATION TYPE:

- Second Chance Act Grantees
- Community- and citizen-focused strategies
- Tailored approaches for specific populations

**Incarceration Prevention and Reduction Task Force:
Joint Behavioral Health Committee and Legal and Justice Systems Committee**

Meeting Summary for March 15, 2022

Agenda item links to YouTube video are functional at the time this meeting summary was created, however, YouTube links may change. Links in this document will not be updated. Please refer to the time notation on each agenda item.

1. Call to Order

Behavioral Health Committee Chair Dan Hammill called the meeting to order at 11:31 a.m. The meeting was held via remote-only Zoom Webinar.

Members Present: Doug Chadwick, Chris Cochran, Bill Elfo, Arlene Feld, Heather Flaherty, David Freeman, Dan Hammill, Deborah Hawley, Mike Hilley, Stephen Gockley, Raylene King, Rhyan Lopez, Jackie Mitchell, Perry Mowery, Mike Parker, Darlene Peterson, Eric Richey, Donnell Tanksley, Brien Thane, Bruce Van Glubt, Maia Vanyo,

Members Absent: Nathan Bajema, Brian Estes, Seth Fleetwood, Flo Simon, Michael G. Smith, Courtney Taylor

2. Competency and Restoration (Continued from December joint meeting)

Susan Copeland, Darla Dawson, Erik Nygård, and Thomas Kinlen, all of DSHS, were present at the meeting to give a presentation and discuss this agenda item.

Kinlen explained the Sell vs. United States case. Main points included:

- When an individual is in restoration, medication is almost always attempted. If the person does not agree to medication voluntarily the Sell case allows practitioners to force medication for the purpose of competency restoration after following a legal process.
- The facility would request a Sell hearing. If the prosecutor agrees, a hearing would be held in which the state would need to demonstrate a compelling state interest in forced medication.
- If the judge orders forced medication, facility staff will work with the patient to explain the process and administer the medication, which might involve a manual hold of the individual.
- This process can take anywhere from two to six weeks and often involves the individual being transported back to jail for the hearing.
- Copeland added that Residential Treatment Facilities (RTFs) cannot progress with treatment while waiting for a Sell order and explained what happens after the order comes through.

Parker asked if a Sell hearing can be held virtually to speed up the process. Copeland said that each RTF is set up to do that and it was determined that Whatcom County does remote Sell hearings as well.

Hammill asked if race and ethnicity are tracked at the RTFs and if treatment was provided for substance use disorder (SUD) at RTFs. Copeland responded that their RTFs are not licensed to do SUD treatment and that the Research and Data Analytic Team collects that data.

Gockley asked what the problems were with Whatcom and what improvements have been made. Copeland explained that there were time delays due to slow communication and setting the hearing dates. She added that things are improving. DSHS staff and committee members continued to discuss the delays and communication issues.

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Richey said that the first factor in a Sell hearing is determining that there is an important governmental interest in compelling medication, and that generally this would only be the case for felonies.

Committee members and the DSHS staff members continued to discuss competency restoration and processes within RTFs. Topics of discussion included:

- The prevalence of substance use disorder co-occurring with mental health issues and the ability of RTFs to administer medication for substance use disorder
- What happens to individuals after they are released from an RTF and how to provide a useful discharge summary to jails in order to facilitate a warm hand-off and prevent a return to the RTF
- Supports available in Whatcom County post-release, the gaps that still exist, and opportunities for added supports in the future

King brought up concerns about Senate Bill 5664, which will authorize officers to detain a mentally ill individual if they are not complying with medication requirements. She said that the last thing we want is to be detaining more mentally ill individuals.

Whatcom County Jail Chief Wendy Jones presented to the committee on the competency determination process. She shared a flow chart and went into detail about each step described on the chart. She pointed out steps in which longer delays may occur.

Committee members asked questions of Chief Jones regarding her presentation and other subjects related to the jail. Discussion ensued around topics including:

- The jail's ability to administer medication and the fact that they do not have people on staff who can provide psychological services and other resources needed to administer medication involuntarily.
- Remote competency evaluations, which are currently being done in Whatcom County, but can still be delayed since a judge has to make a legal declaration regarding competency after the medical determination has been made.
- Statistics regarding the number of inmates currently in the competency determination process. Chief Jones estimated that between 50 and 75 people go through the process each year.

Feld asked what needs to change and Jones replied that they need a way to move folks through the steps more quickly. She said the longer it takes to get someone through the system, the higher the chance that they will decompensate while in the jail. Vanyo explained the roadblocks to speeding up the process from the defense perspective.

Dawson said that if someone is waiting in jail for competency restoration and seems to be improving during that time, there is a process to request a re-evaluation, which could result in the individual being moved through the system more quickly. Vanyo commented that it is very rare for one of her clients to self-restore.

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Mitchell asked about Senate Bill 5664 and if it would help. Jones said that the biggest problem with the legislation is that there is nowhere to put folks who are detained for failing to follow instructions for community restoration.

3. Current Use Data on the Crisis Stabilization Center

This item was not discussed.

4. Reentry Services

This item was not discussed.

5. Update on the Sequential Intercept

This item was not discussed.

6. Other Business

Hammill asked if it was possible for there to be an additional joint meeting in April. It was decided that they would hold a joint meeting during the next scheduled Behavioral Health Committee on April 19.

7. Public Comment

Atul Deshmane thanked the committee members for the meeting and asked for the document from Chief Jones to be shared.

Brel Froebe asked if after an individual has gone through competency restoration, if they go back to trial and whether treatment would be sufficient rather than further prosecution if the root cause of the crime was mental illness. Richey replied that this issue is more complex than mental illness being the cause and treatment being the answer. King brought up the difference between competency and insanity.

8. Adjourn

The meeting adjourned at 1:05 P.M.