Incarceration Prevention Reduction Task Force Crisis Recovery Facility Committee

9:30 a.m. - 11:00 a.m., March 21, 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 15 for committee members and the file

The meeting summary of the previous meeting is attached for information only. Changes to the summary can be submitted to the Committee Clerk. The audio recording on the Committee website is the official meeting record.

	Topic	Requested Action	Presenter	Packet Pages	
Call to Order Election of Committee Chair		Motion and Vote	N/A	N/A	
2.	Discussion of content for the Crisis Recovery Facility Committee report to the Incarceration Prevention & Reduction Task Force 2019 annual plan	Review & Assign	Mark Gardner	N/A	
3.	Construction bid award and ground breaking	Review information	Tyler Schroeder	N/A	
4.	Update on the status of the Crisis Stabilization Center operator/provide Request for Proposals/Qualifications (RFP/Q) submittals	Review information	Health Dept.	N/A	
5.	Discuss possibility of creating an operational workgroup	Discussion	N/A	N/A	
6.	Update on operational funding (Referred from January committee meeting)	Review information	Health Dept.	N/A	

- 7. Next Steps: Ideas & Further Information
 - Review assigned tasks
 - Next meeting topics
- 8. Other Business
- 9. Public Comment
- 10. Adjourn

UPCOMING MEETINGS AND EVENTS

IPR TASK FORCE Bi-monthly on	COMMITTEES									
various Mondays 9-11 a.m. Courthouse Rooms 513/514 311 Grand Ave., Bellingham	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	TRIAGE FACILITY Bi-monthly 3rd 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					
April 15 June 10	April 15 May 13	April 4 May 2	April 9 May 14	May 16 July 18	April 4 May 30					
August 12	June 10 July 8	June 6 July 11**	June 11 July 9	,	August 1					

Whatcom County Incarceration Prevention and Reduction Task Force TRIAGE FACILITY COMMITTEE				SHORT-TERM											
	1	2	3	4	5	6	7	8	9	10	11	12			
1. With guidance from the Whatcom County Health Department and involvement of other key stakeholders, the Triage Facility Committee supports, plans for, and monitors progress to ensure development of a programmatically effective and financially sustainable Triage and Crisis Stabilization facility for Whatcom County. The Triage Facility Committee recognizes the value of the work being undertaken by the County's Health as well as Administrative Services Departments, in the following areas:															
Facility design & construction	Insert	In progress													
Securing operational funding	Insert	In Progress													
Program design and RFP development and review	Insert	In progress													
Developing operating procedures, outreach, and training	Insert	Not started													
Developing progress metrics and outcome measures	Insert	Not started													
Ongoing performance management reporting	Insert	Not started													
Other as needed:	Insert	Not started													
2. With the aim of ensuring that the Triage Center programming is effectively integrated with new and existing programs, the Triage Facility Committee will collaborate and coordinate its work with the Incarceration Prevention and Reduction Task Force (IPRTF) Behavioral Health Committee and the County Behavioral Health Advisory Committee. Specifically, the Triage Facility Committee will identify behavioral health services that will be needed to support the successful operation of the Triage Center, (e.g. service enriched housing) and make recommendations to the full Task Force regarding opportunities for advocacy. Report from the IPRTF Behavioral															
Health Committee (monthly)	Insert	Not started													
Report from the Behavioral Health Advisory Committee (quarterly)	Insert	Not started													
Use the data collected to inform their conversations	Insert	Not started													
Other as needed:	Insert	Not started													

Incarceration Prevention and Reduction Task Force Crisis Recovery Facility Subcommittee

DRAFT Meeting Summary for January 17, 2018

1. Call To Order

Committee Chair Chris Phillips called the meeting to order at 9:30 a.m. at the Courthouse Fifth Floor Conference Room 513, 311 Grand Avenue, Bellingham.

Members Present: Jack Hovenier, Chris Phillips, Tyler Schroeder, Jeff Parks, Michael

McAuley, Anne Deacon (for Perry Mowery)

Also Present: Stephen Gockley, Michael Lilliquist

Members Absent: Jerry DeBruin, Todd Donovan, Perry Mowery

Review October 18, 2018 Meeting Summary

There were no changes

2. Update from Anne Deacon on the status of the Crisis Stabilization Center operator/provider Request for Proposals/Qualifications (RFP/Q)

Deacon stated reported on project design updates and changes, including meeting space, the plan that must be submitted to the Department of Health, and the process for writing three requests of proposals/qualifications:

- Triage
- Withdrawal Management (detox)
- Operating the commercial kitchen

Deacon submitted a handout of the 10 Fundamental Components of Recovery from the Substance Abuse and Mental Health Services Administration (SAMSA) (on file) and spoke about the recovery model.

The Committee members discussed the possibility of the service provider or a subcontractor also operating the kitchen; ensuring that the kitchen operator contract includes a dietician and ensures clients get good, healthy foods, rather than the cheapest foods that would lower the bid; the outstanding quality of the food service vendor at the hospital; including the *10 Fundamental Components of Recovery* in the RFQ; designing the aesthetic of the building so it's more welcoming and less institutional; what is necessary for successful diversion from the emergency department, including:

- For withdrawal management, onsite medical clearance screening, access to a lab, and access to a prescriber
- For mental health triage, intensive attention at intake is necessary. They will have to
 work with law enforcement to figure out the profile of the person who best benefits from
 mental health triage for successful diversion from arrest and incarceration

The Committee members discussed the possibility of creating an very focused operational working group of law enforcement, emergency department personnel, and the triage center service provider.

Incarceration Prevention and Reduction Task Force Crisis Recovery Facility Subcommittee

DRAFT Meeting Summary for January 17, 2018

- The working group would function at or before opening of the new facility to ensure they
 don't have the same problems as the existing facility in not being effective at diversion
 from the emergency department.
- Protocols must be established before the facility opens and first responders must have a training period.
- Too many patients who need seclusion and restraint at intake may overwhelm the provider. If the RFP/Q will include protocols and operations, there may be value to having an operating working group sooner.
- Allow law enforcement and emergency medical services (EMS) personnel have input on developing the protocols.
- Get cross-sector input into the formation of the RFP/Q.
- When the timing is right, the Health Department should convene a cross-sector operational group with people who work on the ground and have authority to make decisions.
- Include language in the contract that the service provider will participate in cross-sector conversations and in training as directed by the Health Department.

The Committee continued to discuss the timing of design, construction, and the RFP/Q.

3. Possibility of developing a sobering center in the current triage facility space

The Committee members discussed:

- · The potential different uses for the current facility and
- Whether it would be appropriate for the Task Force to have an opinion on the use only if the potential use would result in incarceration prevention or reduction
- Operational funding for the triage facility
- A legislative bill to incentivize managed care organizations (MCOs) to be aware of the need for criminal justice diversion
- The technical and the political influences on operational funding
- Operational costs should factor in replacement costs
- If there are any advantages or disadvantages to the triage facility to use the space in the future, the committee can consider it again

4. Next Steps: Ideas & Further Information

Upcoming agenda items at the March meeting could include:

- A discussion of the RFP/Q submittals
- Status of the operational work group

Continue discussion at the Steering Committee on operational funding through fee-for-service versus cost-based reimbursement. Contract with someone to write a white paper on that can be used to make the case in favor of cost-based reimbursement.

5. Other Business

Incarceration Prevention and Reduction Task Force Crisis Recovery Facility Subcommittee

DRAFT Meeting Summary for January 17, 2018

Committee members discussed Chris Phillips' upcoming retirement.

McAuley described his work on homeless housing issues.

6. Public Comment

There was no public comment.

7. Adjourn

The meeting adjourned at 10:48 a.m.