

EXHIBIT A

Whatcom County Public Health, Safety and Justice Initiative

BACKGROUND

Whatcom County has an opportunity to plan for a criminal justice system that is built to address the root causes of incarceration and designed with rehabilitation as a goal. Considerations such as financial commitments, jail location and size, diversion programs, behavioral health services provided inside the jail and in the broader community, and bail and prosecution reforms must be examined. The underlying project is envisioned to be a multi-phased needs assessment for Whatcom County's criminal justice policy, public safety, and facility needs that incorporate community based preventative services for behavioral and mental health treatment, rehabilitation, and alternatives to jail. The needs assessment will include robust public outreach efforts and incorporate the community's vision for Whatcom County criminal justice and behavioral health services.

History:

The Whatcom County Sheriff's Office currently operates two jail facilities: a Main Jail facility within the Public Safety Building in downtown Bellingham, opened in 1984, and an interim minimum security facility (known as the Work Center), which opened at a remote site in 2006. Both facilities house male and female, pre-trial and post-conviction, and misdemeanor and felony offenders. The Main Jail is a full service facility that provides incarceration services for 11 court systems and is the entry point for most arrestees. It holds all higher classification offenders, all pre-arraignment offenders, and all special needs offenders, as well as a mix of general population offenders. It was originally designed for 148 offenders and there has been extensive retrofitting and remodeling to this facility to provide additional offender bed space. The Work Center currently holds minimum and low-medium security offenders, work release offenders and in-custody work crews as well as the staff offices and processing space for the entire alternative to full incarceration programs (Jail Alts) supervised by the Sheriff's Office. The Work Center was built for 148 offenders, with 2 additional short term high security beds. The Work Center averages 130 minimum or low-medium custody and alternative corrections inmates daily. The Work Center also provides additional capacity as an interim solution for crowding at the Main Jail. A recent report by Design2Last (2016) indicated that the minor shifting of functions between the Main Jail and the Work Center will not result in significant relief from crowding in the Main Jail. The Work Center was intended to be a short term solution while the County began the planning process for a new jail facility that would bring all corrections functions back to a single site.

Jail populations are declining as an apparent result of a combination of jail population control measures and the effects of pre-trial judicial decisions on bail or release, including a District Court pre-trial Electronic Home Monitoring (EHD) program, which is facilitated by the Sheriff's office EHD staff and various cities' use of private vendors to monitor pre-trial offenders. The average daily population (ADP) in the Main Jail downtown decreased from 230 in 2015 to approximately 193 in mid-year 2019. There is evidence of this same trend at the Work Center whose ADP reduced from 106 in 2015 to 79 in 2019 and for the Jail's post-conviction EHD program, which moved from 22 to 12 during the same time span. Due to lack of space in the current facilities, Whatcom County and the local municipalities are currently sending eligible offenders to the Yakima County Jail for housing. A combined total of 19 people per day are being housed at the Yakima County Jail for the local court systems. The Whatcom County Corrections system is currently overseeing approximately 316 offenders per day as of mid-year 2019.

The Main Jail facility, located in the Public Safety Building, is crowded and has deteriorating infrastructure requiring major investments. Issues include, but are not limited to, failures of the security electronics, insufficient video surveillance, outdated locking mechanisms, failing plumbing (both fresh water and waste), and some structural concerns created as part of remodeling for more housing space.

It is a 1970's-era linear design jail with poor lines of sight and no ADA qualified housing areas, and is operated on an indirect supervision model. The County has remodeled and retrofitted almost all of the original program, office, and storage space in this facility to provide offender housing.

The Main Jail was recently evaluated (Design2Last, 2016) for needed repairs to keep the jail open for 5-7 years. The report identified 18 significant building deficiencies requiring over \$10 million in repair costs. The Main Jail building also does not have a smoke evacuation system, which would cost an additional \$4 million to install. Due to the hollow core concrete slab construction of the building, it would not be feasible without significant cost and risks to the building's structural integrity, and would require relocation of all inmates and workers during the work. The estimated future costs of maintenance over the next 20 years are \$27 million. These estimated costs cover ongoing maintenance of an existing facility, which does not currently have space for needed behavioral health services.

The County provides jail behavioral health services and re-entry services. Services are provided by a local non-profit in the form of a coordinated team. The team responds to an average of 336 non-urgent referrals per month within 24 hours with a focus on delivering crisis services and providing symptom stabilization. The lack of confidential space at the Main Jail results in nearly one third of all behavioral health services being conducted by phone as opposed to "in person". The lack of dedicated space at the Main Jail often causes corrections staff to consume available space for immediate health and safety issues. This leaves behavioral health services with no dedicated space for follow up services, limiting the behavioral health team to providing crisis services and symptom stabilization.

Achievements:

With much focus, energy, collaboration, and innovation, Whatcom County has been able to reduce incarceration by 15% over the last 12 months (Sheriff's report). Incarceration reduction, diversion, and prevention have remained priorities in the community's conversation and agenda. With the failure of two jail ballot measures (2015 and 2017), the County conducted a listening tour in 2018, holding 7 sessions across the County and asking community members what they'd like to see happen and why they did or did not support the jail ballot measures. The consistent feedback reflected a desire to prioritize diversion and treatment for substance use disorders and mental health and a preference for a smaller jail than previously proposed, preferably located downtown.

Whatcom County, the Cities of Whatcom County, and the community have continued to show support and leadership on efforts to take a more holistic view of criminal justice and behavioral health issues in the last few years. This has been brought to the forefront with ongoing work and achievements of the Incarceration Prevention and Reduction Task Force (IPRTF), made up of a broad range of participants including representatives from organizations involved in criminal justice and law enforcement, policy makers, service providers, members of the public and consumers of the services throughout Whatcom County. The accomplishments related to improving the systems around criminal justice and behavioral health in the last few years include, but are not limited to:

- Pretrial Services Unit in Whatcom County Superior Court
- Crisis Stabilization Facility (in process) to allow for increased diversion opportunities for those with behavioral health issues
- Ground-level Response and Coordinated Engagement (GRACE) program to reduce unnecessary incarceration
- Information and Needs Data exchange committee to increase the consistency and transparency of criminal justice data
- Law Enforcement Assisted Diversion (LEAD) program (in process),
- Sherriff's Office Behavioral Health Diversion Program

- Bellingham Police Department, Behavioral Health Officer
- Recovery Housing for people with behavioral health disorders in the Justice system

Desired Outcomes:

Whatcom County has recognized the need for a new jail facility to provide a safer, more secure, and healthier environment for those who work, visit and are incarcerated within the public safety/justice facility and intends to have a funding proposal no later than November 2020. The funding proposal should factor in costs for diversion, alternatives and treatment for substance use disorders and mental health, and future growth projections. A facility design and alternative analysis should include at least two serious community-supported options for location, size and design of a new justice center. A needs assessment will analyze existing behavioral health programs and identify gaps in funding and programs offered. The final report will document a robust community engagement effort and quality feedback from the public that informs the needs assessment, location options, and facility designs.

PROPOSED DESCRIPTION OF SERVICES:

The services to be provided will include, but not be limited to:

Phase One: Develop a Behavioral Health and Public Safety Needs Assessment

The needs assessment should evaluate Whatcom County's behavioral health services both within the jail and available to the broader community, current criminal justice system and programs, and current and future incarceration needs and projections. The scope of work for the needs assessment component will include, but not be limited to, the following items:

1. The consultant will work with the Technical Advisory Committee to identify any data requirements. The consultant will analyze and assess the data currently being collected and data gaps which may exist. This work will be done in consultation with the Incarceration Prevention and Reduction Task Force's (IPRTF) Information Needs and Data Exchange subcommittee.
2. The consultant will review existing data, information and reports that have been developed on this subject, including but not limited to the following:
 - a. IPRTF's Report and information
<http://www.co.whatcom.wa.us/2052/Incarceration-Prevention-and-Reduction-T>
 - b. Vera Institute Final Report
<http://www.co.whatcom.wa.us/DocumentCenter/View/31476>
 - c. Behavioral Health Program Reports and Information
<http://wa-whatcomcounty.civicplus.com/668/Behavioral-Mental-Health>
 - d. DLR Group's 2013 Pre-Design and Needs Report
<http://whatcomcounty.us/DocumentCenter/View/1014/Needs-Assessment--Predesign-Report-PDF>
 - e. Building Assessment Studies and Cost Estimates for Capital Improvements at the Jail (Public Safety Building) and Work Center (Design2Last, 2016)
 - f. Whatcom County Jail Planning Task Force Report and Recommendations (2012)
 - g. A review of National Commission on Correctional Health Care (NCCHC) "Standards for Health Services in Jails" and "Standards for Mental Health Services in Correctional Facilities," where applicable
 - h. A review of the NCCHC's most recent audit of the Whatcom County Jail
 - i. Whatcom County Adult Corrections Facilities and Sheriff's Headquarters Master Plan and Requirement Analysis (Omni-Group, Inc. and HDR Engineering), 2010

- j. Site Evaluation Report, Whatcom County Adult Correction Facilities and Sheriff's Headquarters, HDR Engineering, 2010
 - k. Washington State Sentencing Requirements
 - l. Review of report from the Whatcom County Jail Listening Tour and Whatcom County Resolution 2019-036 statement of public health, safety, and justice facility planning principles and the resolutions that are referred to within
 - m. Whatcom County Behavioral Health Facility Planning Report: Envisioning a New Substance Use Disorder Continuum of Care, 2016:
<http://www.co.whatcom.wa.us/DocumentCenter/View/38757/The-Whatcom-County-Behavioral-Health-Facility-Plan>
 - n. Whatcom County Annual BH Fund Report (2017):
<http://www.co.whatcom.wa.us/DocumentCenter/View/35843/2017-Whatcom-County-Annual-BH-Fund-Report>
 - o. Behavioral Health Program Report, 2014
 - p. Whatcom County Jail Behavioral Health Data, 2015
3. The Main Jail provides services to 11 court systems. The consultant will collect data and statistics on jail usage from all jail users and identify where other users of the jail can rely more on alternative solutions to reduce incarceration.
 4. The consultant will include a Financial Asset Mapping section in the needs assessment that includes a review of Whatcom County and the Cities' current sources of funding and how the funding is used. The consultant will evaluate gaps in funding for existing programs and/or gaps in programs offered.
 5. The consultant should include in the needs assessment an examination of the various factors contributing to the current correctional center population. This study should examine county population growth trends, crime trends, changes in laws, practices within the behavioral health and criminal justice system, alternative and diversion programs, and other factors and requirements of law that have or will affect the number of pretrial defendants and sentenced offenders who are detained in the County jail and the lengths of their stays. The section will provide a framework for community dialogue about answering the question, "Who should be legally required to be in jail?"
 6. The consultant will document the recommendations of the Incarceration Prevention and Reduction Task Force (IPRTF) to divert pre-trial and sentenced individuals to alternatives programs that will further reduce incarceration as well as recommend services that would further reduce incarceration rates, including but not limited to pre-arrest, post-arrest, re-entry, housing, and service delivery capacity for providers and community-based treatments.
 7. The consultant will provide an overview of evidence-based behavioral health service practices within a jail facility.
 8. The consultant will include in the needs assessment a study of the inmate population, including demographics by race, ethnicity, gender, medical conditions, and disabilities, in order to describe the jail population and provide information useful for developing design specifications about the types and number of bed spaces that will be needed to accommodate inmates in the County Jail. This should include
 - a. Estimated number of total beds, with 5 year incremental estimates, needed for a 25-year planning period
 - b. Housing space requirements, including specialized housing for people with acute behavioral health needs, utilizing national guidelines
 - c. Detailed inmate population profile to be used in determining types and allocations for offender housing
 - d. Estimations of the specific housing allocations (Including but not limited to: Maximum security single cells, multi-cell housing, dormitory, medical/mental health, acute mental health, substance withdrawal medication assisted treatment, medical isolation with negative pressure, intake, behavior modification and behavior management, and ADA/special needs)

- e. Identification and evaluation of potential changes in judicial, prosecutorial and corrections policies that may impact jail populations and length of stay
- f. Identification and evaluation of potential changes in law enforcement and corrections policies that may impact offender bookings
- g. County population trends, with emphasis on an analysis of the specific demographics that may have a disproportionate impact on the jail population
- h. Infrastructure space (both internal and external) needed to support offender housing.
- i. Impacts of jail alternatives and/or diversion programs on offender population growth, to include programs not currently utilized by Whatcom County but which have proven successful in other jurisdictions of a similar size
- j. Potential impacts of criminal justice system and behavioral health initiatives/best practices on jail population
- k. Potential impacts of this facility and its location on all components of the criminal justice system such as jail operations, including behavioral health and medical services, law enforcement, the Courts, Prosecutor, and Criminal Defense Bar, including the ability to provide medical and behavioral health services
- l. Potential impacts of state laws and policies, including funding which can impact services provisions for large percentages of inmate populations

Phase Two: Alternatives and Designs

The report should be based on the findings of the Behavioral Health and Public Safety Needs Assessment and include innovative recommendations on behavioral health and jail facilities and programs. The scope of work for the needs report should include, but not be limited to, the following items:

1. A summary of recommended programmatic needs prioritizing reduced incarceration, diversion and in jail treatment for behavioral health services and medication assisted treatment, and comprehensive services for post-release.
2. Recommendations of additional behavioral health services and associated facility space, beyond the construction and operation of the recently approved 32 bed crisis stabilization facility are needed to further the community's investment in prevention, treatment, rehabilitation and alternatives to jail.
 - a. Summarize and document the findings from the 2016 facilities plan, which analyzes stand-alone behavioral health facilities and behavioral health services or programs that are currently not provided in the jail facility but should be provided in the future.
3. Recommendations of a replacement jail including developing design specifications about the types and number of bed spaces that will be needed to accommodate inmates in the County jail as we plan for future growth in Whatcom County while considering the continued investments in prevention and diversion programs. The recommendations should include, but not be limited to, the following:
 - a. The consultant should assist the County in assembling a list of options that will include at least two alternatives for jail construction including location, size and design, including
 - b. Potential reuse of the current downtown jail property/facility;
 - c. Construction of a new innovative, multipurpose building that is integrated into the community and provides access to comprehensive criminal justice and behavioral health services, both in jail and upon release from jail
 - d. Recommendations for confidential office space for outsourced services, especially for critical behavioral health services
 - e. Recommendations for proposed locations, which may include downtown Bellingham (preferred by listening tour attendees), Irongate, or other feasible locations discovered through the needs assessment
 - f. Improvements or expansions to maximize the continued use of the Jail Work Center, including behavioral health and medical services at 2030 Division Street, Bellingham

- g. New Sheriff's Office space either co-located or separately located to recommended sites
- 4. Analysis of capital costs and ongoing operational costs of the recommending facilities, and should illustrate the pros and cons of each option as they relate to ongoing expenses and design capabilities. Operational costs should consider transportation costs, where applicable.
- 5. Examine feasible financing strategies, including but not limited to philanthropic and grant support, social impact bonds, current County operational support, a ballot measure for a sales tax or a property tax, and/or other means of financing the services and facilities identified through this process.
- 6. Preliminary analysis on site considerations including environmental impacts and surrounding land uses of recommended sites.

Phase Three: Develop Conceptual Design:

Based on the needs assessment and facility needs report, development of a conceptual design, anticipated staffing levels, including anticipating staffing for behavioral health and medical services, operational budget. This should include:

1. The conceptual design should include at a minimum:
 - a. Evaluation of building designs as they apply to Whatcom County and the requirements of the local jurisdiction in which the building may be located.
 - b. Evaluation of single building vs. campus design with linked detention structures and the impacts of each on essential behavioral health and medical services.
 - c. Evaluation of a separate Sheriff's Office Headquarters building vs a Headquarters connected to the detention facility.
 - d. Evaluation of separate and distinct space for behavioral health services, including office spaces for staffing. Flexible space which could accommodate either contracted staffing or hired staff to provide the services is preferred.
 - e. Evaluation of incorporation of agency-wide operational and support functions into a consolidated main facility to include, but not be limited to:
 - i. Property impound and storage,
 - ii. Evidence impound and storage,
 - iii. Training and briefing rooms,
 - iv. Employee ancillary support facilities, including those necessary to implement robust behavioral health services (lockers, changing rooms, activity and break spaces, etc.),
 - v. Equipment storage,
 - vi. Interview and meeting rooms, and
 - vii. Offices
 - f. Estimated square footage, including separate and distinct footprint for behavioral health and medical services.
 - g. Building(s) orientation.
 - h. Traffic.
 - i. Access points.
 - j. Compatibility or conflicts with adjoining uses, including access to post-release services such as employment and housing services.
 - k. Impact of technology on design and operations.
 - l. Ability to gain LEED Silver certification.
 - m. Development of cost estimates for design and construction to a level sufficient to assist in decision making.
 - n. Consideration for location, site orientation, and design for valuable integration into the community and access to post-release services.

2. Estimation of anticipated staffing levels as they relate to items listed in the Conceptual Design section. To include at minimum:
 - a. Custody staff,
 - b. Sheriff's Office staff (e.g. administration, custody, programs, support, etc.),
 - c. Ancillary Criminal Justice staff (e.g., attorneys, paralegals, court clerks),
 - d. Ancillary County staff.(e.g., maintenance, finance),
 - e. Contract staff for outsourced services such as food service and medical, and
 - f. Anticipated growth over a 25 year planning period.
3. Creation of an estimated Operational Budget. Given the anticipated facility size, location, utility expenses, design and staffing formulas, develop annual operations budget estimate with anticipated growth over a 25-year planning period.

Phase Four: Public Engagement

A critical element of completing the needs assessment is reaching out to community stakeholders at all phases of the project in order to build awareness about the study, understand public preferences, and utilize feedback to guide the direction of the final report. The public outreach process should develop champions in the community to support the final report recommendations. The project team's target audience includes local government agencies, advocacy groups and non-profits, residents, and business owners. Whenever possible, the team should seek opportunities to meet people at convenient times and locations, going beyond a traditional community meeting, and provide avenues through which stakeholders can actively obtain information about the project, provide feedback, and ask questions.

To provide a consistent source of information to the public for this project, the consultant team will rely on a County project manager to distribute information about the project to the public and stakeholders. The County project manager will also be the point of contact for questions and comments from the public and stakeholders. The consultant team will develop all communications material for the project including draft and final deliverables, meeting presentations, and meeting agendas, including all materials appropriate for distribution via the web. The County project manager and County staff on the Technical Advisory Committee will approve all materials prior to distribution.

The consultant team will work with the County at the beginning of the project to refine and confirm a Public Engagement Plan (PEP). The overall objectives of the PEP are to reach a broad range of stakeholders to engage them in a comprehensive discussion about their criminal justice and behavioral health priorities for the community. The Public Engagement Plan (PEP) will include guidelines about target audiences and tools for communication.

1. **Target Audience:** The consultant team will work with the following groups to provide project information, solicit feedback, and cultivate champions for the project:
 - a. Technical Advisory Committee (TAC): A core group of 4-5 County staff members will serve on the TAC. Their main role will be to provide information to facilitate the work of the consultant team (such as data, previous plans, etc.) and review all materials prior making them public. The TAC will meet every two weeks throughout the project, or as needed to prepare adequately for project tasks and approve materials prior to distribution.
 - b. Stakeholder Advisory Committee (SAC): The SAC will be made up of 10-20 members including criminal justice and behavioral health professionals, elected officials, non-profit agencies, advocates, and other key stakeholders as identified by County. The SAC will provide key direction on the development of the study and meet approximately four (4) times over the course of the project.

- c. Boards and Commissions: Board and commission members will be informed about project progress, asked for feedback and direction, and engaged in the distribution of information to their communities. The consultant team will work with the following Whatcom County boards and committees:
 - Incarceration Prevention and Reduction Task Force
 - Behavioral Health Advisory Committee
 - Public Health Advisory Board
 - d. County Council: Project updates will be provided to the County Council. The consultant team will present to the County Council at 3 key milestones of the project to provide updates on project progress and solicit feedback and direction.
 - Results of the Needs Assessment
 - Review of preliminary recommendations
 - Draft findings and report
 - e. Bellingham City Council and Small City Partnership
The consultant team will coordinate with the Bellingham City Council and the Small City Partnership to solicit feedback early in the process and after a draft report is developed. The effort will include approximately 3 meetings.
 - f. Public: The consultant team will coordinate with the County project manager to distribute information to the public and solicit feedback through a variety of tools and techniques.
2. **Communications Tools**: The consultant team will use a variety of outreach tools, including but not limited to the following:
- a. Outreach Materials: The consultant team and the County will work collaboratively on all outreach materials. The consultant team will generate designs and provide materials. The County will review all materials prior to public distribution. All materials should have a consistent graphic design. Outreach materials will include:
 - Project webpage content, including FAQs, (hosted by the County)
 - Project fact sheet
 - Outreach Packet: social media, newsletter blurbs with images for outreach
 - Email blast content (distributed by the County)
 - Survey/Project informational outreach postcard
 - Survey Results Summary Sheet
 - Public Outreach Summary Report
 - Press releases
 - Presentations for stakeholder meetings
 - b. 1-on-1 Interviews: The consultant team will conduct 1-on-1 interviews with elected officials and other key community leaders to solicit feedback on the project and the community's criminal justice and behavioral health needs. In addition, the consultant will interview current providers of medical, mental health and substance use disorder services. The consultant will conduct approximately twelve (12) 1-on-1 interviews.
 - c. Online Survey: The consultant team will develop an online survey to build awareness of the study and understand priorities related criminal justice and behavioral health needs in our community. The online survey will be hosted by the consultant team and advertised by the County. The County, Board members, SAC members, and other stakeholder agencies will promote the project and survey through social media platforms (Facebook, Twitter) and newsletters. The survey will run for 3-4 weeks. A summary document of survey responses will be posted on the project webpage and included as a chapter in the final report.
 - d. Email Sign Up and Email Blasts: An email contact list will be developed for this project. The consultant team will provide the County email address sign ups from all the events and presentations, and draft email blasts for the County to distribute at key intervals in the project.

- e. Public Events: Public events will take place at three key points in the project. At these events, the consultant team will present on the progress of the plan and provide a variety of interactive ways to gather feedback from attendees. To the extent possible, public events should be held in coordination with other community events. The PEP should prioritize going to where people are (large community events), rather than holding special project specific events and asking the public to attend.
 - Phase 1: Outreach for the project and existing conditions overview/feedback
 - Phase 2: Update on recommendations (programs and draft designs)
 - Phase 3: Presentation and feedback on draft report (recommendations)
3. Evaluation of Efforts: Specific techniques will be evaluated by the consultant team at key intervals. For example, the consultant will review survey response numbers and emails in the project contact list and identify additional outreach methods to increase numbers if needed. The consultant will also review feedback received on the survey and at public events, and evaluate how respondent demographics compare to those of the county as a whole. In addition, the project team will document overall outreach success in numbers of people reached through the process and various outreach elements. A summary chapter on public engagement will be provided as part of the final report.