

## WHATCOM COUNTY

Public Health, Safety and Justice Needs Assessment 2.11.20



#### PRESENTING TODAY



JEFF BRADLEY
Project Director



JEFF GOODALE
Justice Programmer



JAY FARBSTEIN
Criminal Justice Analysis +
Assessments



GREG BARKER
Criminal Justice Analysis +
Assessments



DR. ROBIN TIMME
Behavioral Health Analysis +
Assessments



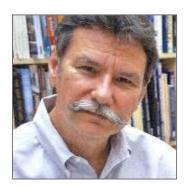
TODD BUCHANAN
Principal-in-Charge



LEVI RIPPY
Project Manager



MARCI WAGONER
Public Outreach + Engagement



DAVE CHRISTENSEN
Client Liaison



#### **Provide Whatcom County a progressive solution that:**

- Meets <u>Your</u> Needs
- Enhances Public Health, Safety, Justice
- Diverts From Custody
- Gains Community Support
- Passes Bond Issue
- Results in a New Effective Facility for the County
- Is Affordable



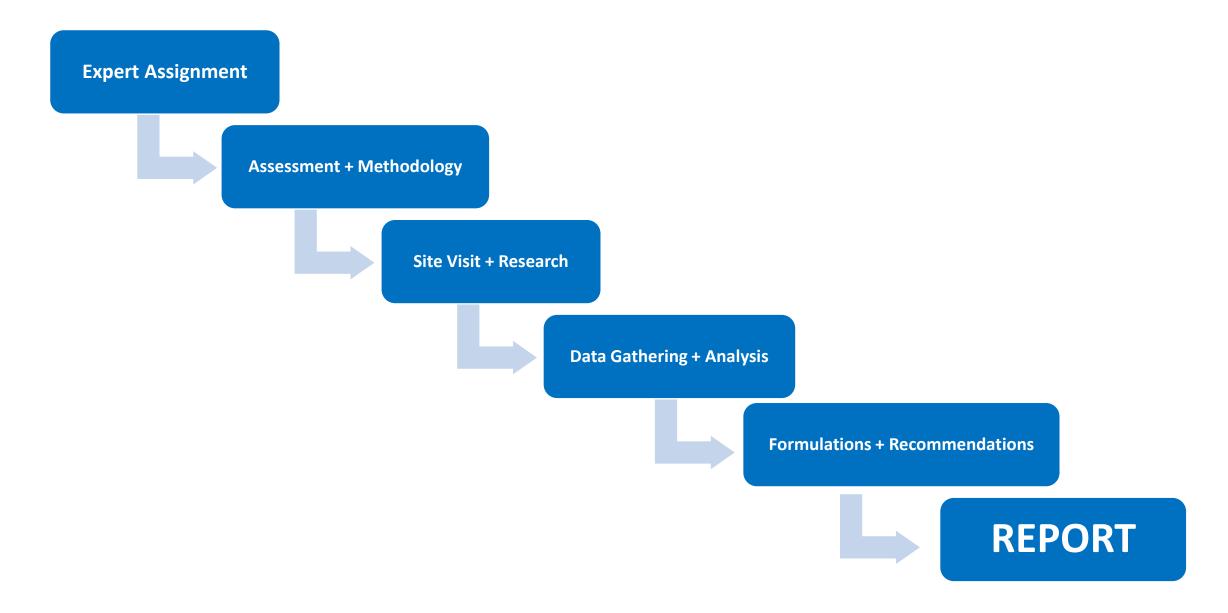
#### WHY US

- We have assembled a team of the best experts in the country
- Our assessments have resulted in **community solutions** for counties just like yours
- Whatcom County Experience We understand where you are in this process
- We're expert but also local and committed

# PATH TO SOLUTIONS



## **Needs Assessment**



## **Needs Assessment**

#### PHILOSOPHY & APPROACH

## **Facility**



## **Community**

- Part of the Community
- Current Population and Bed Counts
- Track the Flow: Booking → Re-Entry
- Match Programming to Needs
- Diversion and Re-Entry Efforts
- Policies and Procedures
- Staffing Analysis
- Training and Facility Culture

- Philosophy: Straddle the Wall
- Develop a "Continuum of Care"
- Co-Location and Adjacencies
- Relationship Between Secure/Non-Secure
- Jail Population Drivers
- Diversionary Options + Philosophy
- Community Resources + Available Services
- Opportunities

## **Needs Assessment**

### **INNOVATION**

## **Facility**



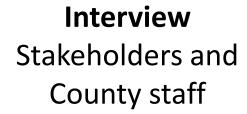
## **Community**

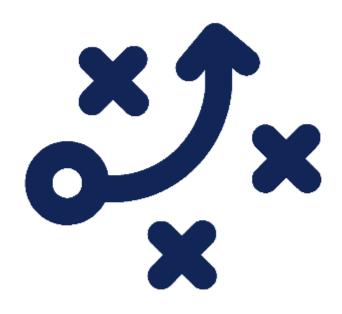
- Principle of Normalization
- Impact of Built Environment
- Evidence-Based Programming
- Direct Supervision
- Comprehensive Interdisciplinary Treatment
- Re-Entry and Re-Integration

- Bring the Community Into the Jail
- Space for Intakes and Connectivity
- Social Services, Public Health, Transportation
- Related to Crisis Intervention Teams (CIT)
- Treatment or Rehabilitative Ideal
- Voluntary vs. Involuntary Engagement

## **HOW WE WORK – Engagement**







Draft a **Public Engagement Plan**informed by interviews,
2018 listening tour, and
IPRTF



Charter the

Stakeholder Advisory

Committee



## **HOW WE WORK – Stakeholder Engagement**

**Engage** the community about the project

Build a comprehensive and **transparent** process

**Enable community** to provide project recommendations and guide direction

Develop a community-supported project that can **move forward** 



Shoreline Sidewalk
Prioritization Plan Advisory
Committee

## **HOW WE WORK – Public Engagement**

#### **Public Events**

 Moderated Expert Panels to Educate participants on issues and trends

#### **Public Outreach**

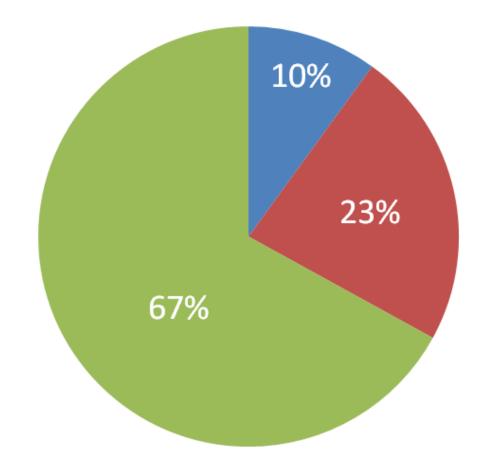
 Moderated Expert Panels to Educate participants on issues and trends



## **Operational Analysis**

#### Over 30 Year Time Frame

- Capital Cost
- Financing
- Staffing
- Operations & Maintenance
- Inmate Management



- Construction Cost
- 0 & M
- Staffing

# KEY TRENDS + CONSIDERATIONS



## **Current Trends**

- Diversion
- Reentry/Continued access to Treatment
- Continuum of Care
- Family reunification
- Medical & Mental Health in unit
- Borrowed Light
- Perimeter Chase vs Rear Chase
- Video Visitation/Open Booking
- Sustainability/Well Design





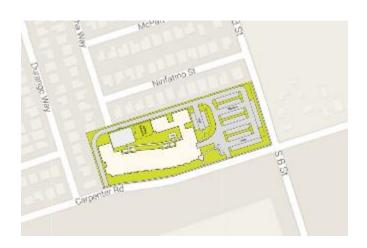
## Medical + Mental Health

- Continuum of Care, Security and treatment on same page
- Continued access to treatment/outpatient
- Diversion
- Understanding Behavior and Treatment Needs to adjust:
  - Observation & Security
  - Therapeutic Environment
  - Light/Air/Sound Controls



## **HOW WE WORK – Site Considerations**

**EXAMPLE: San Joaquin County – Community Corrections Center – SWOT Analysis** 





Helpful	Harmful
Strengths  • A one-story structure would fit on this site.  • Reasonable standoff distances for security level.  • 60-bed expansion potential.  • No environmental red flags.  • Essentially level site.  • Good solar access.  • Comparable cost to other option.	<ul> <li>Weaknesses</li> <li>Flood hazard mitigation required.</li> <li>Street improvements may be necessary.</li> <li>Deed restricts redress for aircraft noise.</li> <li>Site is barely large enough and imposes constraints on layout.</li> </ul>
Opportunities  • Effective access to transit routes.  • Emergency response times meet goals.  • Boundary area between residential and industrial.  • Use arguably compatible with city General Plan.  • Site owned by a willing seller.  • Easy access and visibility for visitors.  • Utilities available (but only one stubbed to site).	<ul> <li>Threats</li> <li>Core services 4 miles away.</li> <li>Highly visible to adjacent residences and close to elementary school – could result in NIMBY response.</li> <li>Near slightly elevated crime area.</li> </ul>

## Downtown, High Rise Considerations

- Access to medical and mental health
- Utility Planning
- Recreation & Daylight
- Life Safety
- Vertical Circulation
- Systems Selection





## Remote, Single Level Considerations

- Access to continued support and services
- Visitation burden
- Transportation/Operational Costs
- Access to Justice Services
- Utilities

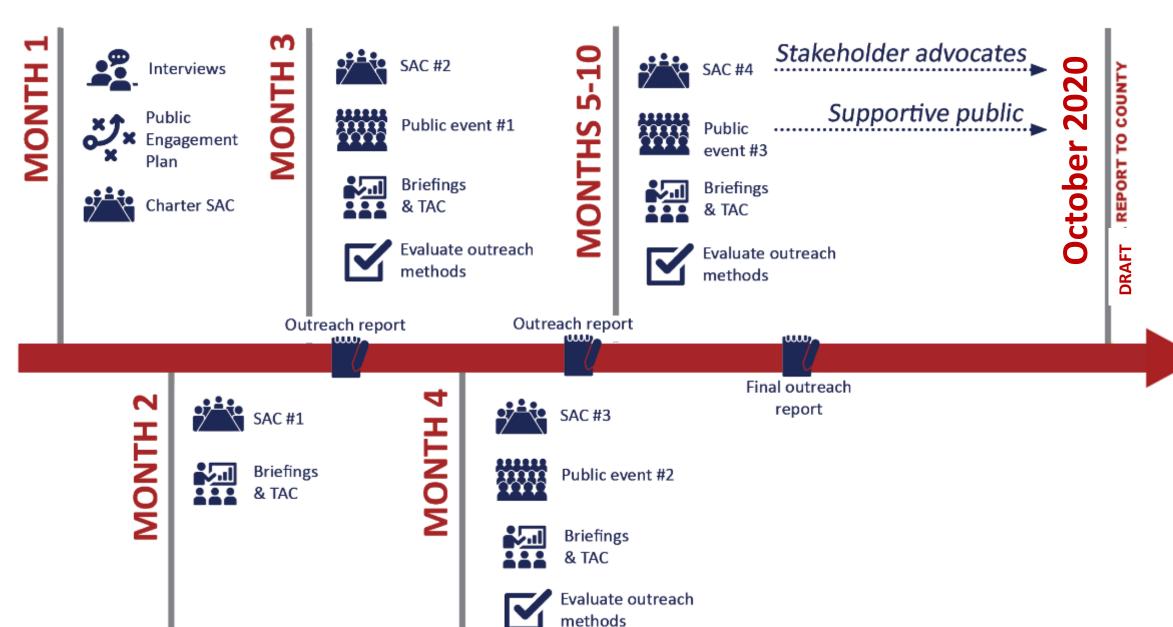


## **Sustainability for your Project**

- Right Size Building
- Building Orientation
- Minimize Site Impact
- Geothermal Opportunity
- Pervious Paving
- Additional Insulation
- Water Usage Strategies



## Public Engagement completion at Ballot language presentation



# SAN MATEO

























## NASHVILLE













## INDIANAPOLIS











## MODESTO, CA

















