

# ARREST AND JAIL ALTERNATIVES LAW ENFORCEMENT GRANT PROGRAM— 2020 ANNUAL REPORT

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With the passage of [House Bill 1767](#) in the 2019 Legislative Session, the Arrest and Jail Alternatives (AJA) Law Enforcement Grant program was established. The program is aimed at supporting local initiatives to properly identify criminal justice system-involved persons with substance use disorders and other behavioral health needs and engage those persons with therapeutic interventions and other services, the efficacy of which have been demonstrated by experience, peer-reviewed research, or which are credible promising practices, prior to or at the time of jail booking, or while in custody. Since the inception of the AJA Grant Program, the Washington Association of Sheriffs and Police Chiefs (WASPC) has worked closely with the Law Enforcement Assisted Diversion National Support Bureau (LEAD NSB) and the Washington Health Care Authority (HCA) to administer the program.

[RCW 36.28A.450\(9\)](#) requires WASPC to submit an annual report on the AJA Grant Program. To demonstrate WASPC's efforts a timeline of major milestones is provided. Additional information for each AJA grantee is included. WASPC concludes this report with considerations for moving forward.

WASPC is excited about the work of the AJA Grant Program recipients in each of their respective communities. We hope WASPC's enthusiasm for this program and its commitment to expand the AJA Grant Program are evident in the information included in this report.

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## AJA Major Milestones

### July 2019-Early December 2019

- WASPC hired a contract coordinator for the AJA Grant Program. The contract coordinator worked to understand Law Enforcement Assisted Diversion (LEAD®) and LEAD-like programs. The contract coordinator gathered information on law enforcement agencies engaged in or interested in LEAD® or LEAD-like programs.
- A memorandum of understanding (MOU) was presented to LEAD NSB for their provision of technical assistance to WASPC.
- WASPC worked closely with the HCA to develop a timeline for release of solicitations for LEAD® pilot programs and AJA Grant Program. It is important to note that the HCA was not bound to the same timeline for release of solicitations as WASPC. The WASPC solicitation was ready for release in October 2019.
- In December 2019, WASPC submitted the [2019 AJA Annual Report](#) as required by [RCW 36.28A.450\(9\)](#), with the considerations outlined in [RCW 36.28A.450.\(8\)\(b\)](#).
  - A copy of the report was forward to the Washington State Institute for Public Policy (WSIPP) and the Department of Social and Health Services Research and Data Division (RDD) for feedback on performance-based contracting and evidence-based evaluation framework. Without funding, WSIPP and RDD were not able to offer significant assistance in this area.

**December 2019**

- Changes in staffing for the AJA Grant Program occurred.
- In coordination with release of the HCA solicitation for similar programs under [SB 5380](#), WASPC released a [request for proposals](#) (RFP) for the AJA Grant Program on December 19, 2019. The grant program is aimed at supporting local initiatives to properly identify criminal justice system-involved persons with substance use disorders and other behavioral health needs and engage those persons with therapeutic interventions and other services. As outlined in [RCW 36.28A.450\(8\)\(a\)](#), the initial expected outcomes of the grant program include:
  - To reduce arrests, time spent in custody, and/or recidivism for clients served by the program;
  - To increase access to and utilization of nonemergency community behavioral health services;
  - To reduce utilization of emergency services;
  - To increase resilience, stability, and well-being for clients served; and
  - To reduce costs for the justice system compared to processing cases as usual through the justice system.
- WASPC re-engaged the Washington State Institute for Public Policy (WSIPP) and the Department of Social and Health Services Research and Data Division (RDD) to discuss program evaluation. Again, without funding, WSIPP and RDD were not able to offer significant assistance in this area.

**January 2020**

- WASPC received AJA applications from the Olympia Police Department, Port Angeles Police Department, Snohomish County Prosecuting Attorney's Office, Mason County Board of Commissioners and Thurston County Prosecuting Attorney's Office.
- WASPC reviewed AJA applications with LEAD NSB to determine eligibility for grant funding.
- LEAD NSB assisted WASPC in establishing a peer review panel in accordance with [RCW 36.28A.450\(2\)](#). Panel members\* included:
  - Sheriff Jim Raymond, Franklin County
  - Sheriff Mark Howie, Wahkiakum County
  - Representative John Lovick, 44<sup>th</sup> Legislative District
  - Jeanne McMinds, Director of Tribal Relations, Coordinated Care
  - Ahney King, Criminal Justice Liaison, Coordinated Care
  - Darya Farivar, Disability Rights Washington
  - Mitchell Riese, Assistant Attorney General, WA Attorney General's Office
  - Chief James Schrimsher, Algona Police Department
  - Chief Keven Dresker, Oak Harbor Police Department

*\*Not all panel members were able to participate in the review and scoring of applications.*

**February 2020**

- WASPC convened the review panel to score applications.
- WASPC and LEAD NSB conducted applicant interviews.
- WASPC and HCA met to discuss those applicants requesting funding under the AJA Grant Program and the HCA grant program established under [SB 5380](#). It was decided that HCA would fund those agencies that applied for funding from both grant programs and that WASPC would fund those agencies that applied for AJA funds.

**March 2020**

- WASPC awarded grants to the Olympia and Port Angeles Police Departments.

**April 2020**

- WASPC entered a memorandum of understanding with LEAD NSB for grantee technical assistance.
- The Port Angeles and Olympia Police Department Agreement for the Arrest and Jail Alternatives Grant Program were effective April 22, 2020. The grant agreements follow a traditional contract format with performance-based considerations. Funds for the AJA Grant Program come from a combination of state and federal Substance Abuse Block Grant funds and attention to allowable expenses and grant monitoring is demonstrated throughout each agreement.
  - WASPC confirmed that a case management system would be procured for the tracking of client engagement and metrics to be used in performance evaluation.

**May 2020**

- WASPC requested price information, using internal procurement procedures, for the purchase and implementation of a social service case management system for use by AJA grantees.
- WASPC released a [second request for proposals](#) for the AJA Grant Program on May 1, 2020. The second RFP was directed at eligible applicants in Eastern Washington to comply with the requirement that awards be geographically distributed on both the east and west sides of the crest of the Cascade mountain range per [RCW 36.28A.450\(7\)](#).
- LEAD NSB requested modifications to the draft memorandum of understanding for LEAD NSB's provision of technical assistance to WASPC. Upon implementation of the requested modifications, WASPC and LEAD NSB entered a memorandum of understanding for LEAD NSB's provision of technical assistance to WASPC.

**June 2020**

- In addition to grantee technical assistance, LEAD NSB provided limited technical assistance to interested applicants in the development of their program application for the second RFP.
  - WASPC received AJA applications from Comprehensive Healthcare (Walla Walla) and the Spokane County Regional Law and Justice Council.
  - WASPC reviewed AJA applications with LEAD NSB to determine eligibility for grant.
  - WASPC re-convened the review panel to score applications. Panel members\* included:
    - Sheriff Jim Raymond, Franklin County
    - Sheriff Mark Howie, Wahkiakum County
    - Representative John Lovick, 44<sup>th</sup> Legislative District
    - Jeanne McMinds, Director of Tribal Relations, Coordinated Care
    - Ahney King, Criminal Justice Liaison, Coordinated Care
    - Darya Farivar, Disability Rights Washington
    - Mitchell Riese, Assistant Attorney General, WA Attorney General's Office
    - Chief James Schrimpsheer, Algona Police Department
    - Chief Keven Dresker, Oak Harbor Police Department
- \*Not all panel members were able to participate in the review and scoring of applications.*
- WASPC and LEAD NSB conducted applicant interviews.
  - LEAD NSB provided baseline recommendations for performance metrics to be measured.
  - WASPC entered an agreement with a vendor for the implementation of a case management system on behalf of the Olympia and Port Angeles sites. The product was launched with training environments available to each site while customizations occurred.
    - WASPC understands the HCA subsequently adopted use of the same case management system by LEAD® pilot sites.

**July 2020**

- WASPC awarded grant funds to Comprehensive Healthcare (Walla Walla).

**August 2020**

- The Comprehensive Healthcare Agreement for the Arrest and Jail Alternatives Grant Program was effective August 1, 2020. The grant agreement follows a traditional contract format with performance-based considerations. Funds for the AJA Grant Program come from a combination of state and federal Substance Abuse Block Grant funds and attention to allowable expenses and grant monitoring is demonstrated throughout the agreement.
  - Funds were provided to Comprehensive Healthcare for the procurement of the AJA case management system. This change in contract design is in line with performance-based contracting.
- WASPC coordinated a discussion with HCA, LEAD NSB, RDD and the case management vendor to discuss performance metrics across AJA and LEAD® pilot sites and data collection.
  - It is important to note that no funding has been allocated or secured to support a formal evaluation of the AJA Grant Program. Should funds be allocated for this purpose, AJA sites will have collected the necessary metrics required for the evaluation.
  - WASPC understands that the HCA may have funding available to support a multi-site, cross-program evaluation of AJA and LEAD® pilot sites. Ongoing discussions regarding the potential to collaborate with HCA continue in this regard.

**September 2020**

- WASPC finalized the performance metrics to be collected by AJA sites. Performance metrics are as follows:
  - Participant Criminal Legal System Contacts
    - Number of police contacts related to criminal behavior/suspected criminal behavior
    - Number of arrests-categorize by type
    - Number of warrants
    - Number of criminal charges-categorize by type
    - Number of jail bookings
    - Number of jail bed days
  - Participant Emergency Medical System Contacts
    - Number of visits to an emergency room
    - Number of inpatient admits to hospital care
    - Number of contacts with fire/EMS
  - Participant Services received
    - Number of times team meets with participants-categorized by type: case management, peer counseling, brief outreach
    - Number of referrals to services-categorized by type: mental health, substance use disorder, medical, housing, insurance, benefits, food/shelter, employment, etc.
    - Number of connections to services-categorized by type: mental health, substance use disorder, medical, housing, insurance, benefits, food/shelter, employment, etc.
  - Readiness and progress toward goals
  - Percentage of all clients that receive a [URICA](#) score
  - Surveys (participant, community stakeholder and public safety stakeholder)
    - All surveys at baseline, 6-months and termination.
  - WASPC understands the HCA has adopted similar performance metrics for the LEAD® pilot sites. This will be helpful in a multi-site, cross-program evaluation.

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## AJA Grantees

In the enabling legislation for the Arrest and Jail Alternatives Grant Program, it was made clear that funding awarded under [RCW 36.28A.450](#) (AJA) and the Mental Health Field Response Grant Program (MHFR, [RCW 36.28A.440](#)) should remain “... separate and distinct...” from one another. To accomplish this, WASPC required sites that receive dual funds complete a Separation Plan allowing the sites and WASPC to distinguish which funds are being used for services down to the client level.

AJA Grant Program enabling legislation requires that sites receive technical assistance from the Law Enforcement Assisted National Support Bureau. LEAD NSB continues to provide sites with assistance surrounding policy and program development. The technical assistance has been well received by the sites with each site continually providing positive feedback.

Following a suggestion by LEAD NSB, and in an effort to standardize data collection efforts, WASPC selected a case management system for use by each of the AJA sites. Each site is involved in the implementation of the case management system specific to their site.

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### Olympia Police Department

The Olympia Police Department (OPD), in partnership with Catholic Community Services of Western Washington (CCSWW) applied for and received funding to expand the services of their existing Familiar Faces program into new areas of social need that align with the legislative goals set forth in [RCW 36.28A.450](#).

The total AJA grant award made to the Olympia Police Department was \$793,624 with \$413,624 of state funds and \$380,000 of federal Substance Abuse Block Grant funds. OPD, in partnership with CCSWW uses the funds awarded to provide intensive case management. Currently, CCSWW employs four peer navigators, a Mental Health Professional and a Program Manager to provide these services. CCSWW have also provided funds in their budget to provide clients with emergency supplies and temporary shelter.

With the approval of a Separation Plan on August 4, 2020, CCSWW began providing services to eligible community members. To date CCSWW has provided more than 1,820 hours of intensive case management and coordination services to 34 members of their target population. The standardized data collection to occur with the implementation of a multi-site case management system will provide the necessary information to evaluate the Familiar Faces program to the expected outcomes defined by [RCW 36.28A.450\(8\)\(a\)](#).



*Olympia Familiar Faces Partners: From left to right, Olympia PD Officer Corey Johnson, CCSWW Peer Navigator Monte Arnold, CCSWW Program Manager Neil Hilton, CCSWW Peer Navigator Candice Garman and Olympia PD Officer Austin Hanson.*

Shortly after the site's implementation, CCSWW coordinated meetings of its Policy Coordinating Group (PCG). Olympia's PCG has membership representing local and county governments to include prosecution and public defense, the business community and community members with lived experiences addressed by the program. This PCG's primary responsibility is to provide guidance on policy development and an opportunity for members of these different groups to discuss challenges the program faces in the community.



*Olympia Familiar Faces CCSWW Partners: From left to right, Program Manager Neil Hilton, Peer Navigator Monte Arnold, Peer Navigator Jennifer Piazza, Peer Navigator Nate Block, Mental Health Professional Anacelia Keen and Peer Navigator Candice Garman*

To demonstrate the impact of their programs for inclusion in this report, AJA grantees were asked to submit narratives of situations they believe are a direct result of the funds. The following was submitted for inclusion in this report.

A client who was referred to Familiar Faces because he was regularly exhibiting alarming, visibly psychotic behavior and self-harm has been showing far less distress. He comes to the office almost daily, where he says he feels safe and respected. Staff have taken the time to get to know him and patiently let him explain his worldview. As a result, he presents in the community as significantly more content and coherent, and generates far fewer concerned calls. He is now meeting basic needs like food and shelter that he had previously neglected, and has granted staff permission to communicate with family members concerned for his well-being whom he had previously isolated himself from. He notes that the accessibility of our staff has helped him recognize warning signs of explosive behavior, and that he is developing skills to better manage behaviors that would otherwise result in calls to law enforcement, emergency medical services, or designated crisis responders.

This individual faces outstanding legal obstacles, and has a history of missing court dates. Nate and Jennifer, the two Peer Navigators that work most closely with him, were able to write a letter to the judge detailing services provided and progress made, and then appeared in court to support him. The judge concluding that our client's voluntary participation in these supportive services as well as outpatient mental health treatment represented a preferable outcome to taking him into custody. While a "business as usual" approach would have put him back in either a corrections facility or a psychiatric hospital, community-based resources reduce strain on the public system while empowering the individual to make needed changes. With our assistance, he is for the first time checking in with Pretrial Services as required, and indicates that he has a better understanding of his legal obligations and stronger desire to successfully adhere to them. While his mental health struggles remain significant, he is more actively engaged with his recovery, and for the first time since he became homeless, feels that there are people who genuinely care about his wellbeing and have the skills to help him navigate his situation.

Familiar Faces Client Experience

When asked about what these funds means to the Olympia community, CCSWW Program Manager Neil Hilton responded:

*It is well-documented that traditional models of law enforcement do little to curb recidivism among individuals facing challenges such as homelessness and behavioral health problems. The Olympia Police Department has recognized that in order to best serve this community, innovative solutions are required that more directly target the unmet needs of those committing minor offenses or frequently presenting in states of crisis—simply citing or arresting them for their infractions is unlikely to resolve the fundamental issues that they face. The funding allocated by the AJA grant allows our city to be a statewide leader in changing the approach. The events of this year have put significant, public focus on the shortcomings of conventional policing on a local and national level, but programs like Familiar Faces put Olympia ahead of the curve. Additionally, from a strictly financial perspective, the investment in the novel solutions that Familiar Faces is able to offer can pay dividends when taking into account the way in which it enables law enforcement officers to focus on more significant issues, avoids processing individuals through the justice system as normal, and lessens the disproportionate impact that this population has on emergency services. The benefit to the community has begun and will continue to grow across multiple axes including reducing arrests, emergency service utilization, and costs, and increasing access to nonemergency behavioral health services. It is also important to consider that the vulnerable individuals we serve are members of our community as well, rather than separate from it, and that the benefits to their well-being enabled by this program cannot be overstated.*

*Frontline services in the AJA program are predominantly provided by certified peer counselors (CPCs) who have lived experience with homelessness, mental illness, addiction, and the justice system. CCSWW staff credit much of their successful relationship-building to the empathy and understanding that they can display to the individuals they serve due to shared life experience. Through a combination of intensive case management, advocacy, modeling behavior, and promoting personal responsibility, peer staff are able to walk with their clients on a path towards resilience and stability, while simultaneously working to benefit the system as a whole.*

I have lived a life that has enabled me to be specifically qualified to be of service to people like myself, who are living with alcoholism, addiction, mental illness, incarceration, homelessness, and for many, the terrifying, desperate belief that taking one's own life may be the only option to find peace. Powerful stigmas accompany all these realities, which my brothers and sisters we call clients live and breathe on a daily basis. These things that we have in common are what I believe to be the crux of what enables us to empower or be of service to them. More importantly than being able to share war stories or similar traumas as only we with this lived experience can, I can gratefully share my experience, strength, and hope through my ongoing recovery. I feel that this is why we're here—to show those we work with that recovery is possible.

Ironically, the losses, pains, and years I once thought to be wasted and tragic while deep in my addictions are actually a big part of the reason I am now in the privileged position to get to serve our people. Who knew that such a large gap in one's employment history could be the very reason for being employed in such a beautiful, meaningful, and important way.

Monte Arnold, Peer Navigator  
CCSWW

## Port Angeles Police Department

The Port Angeles Police Department (PAPD), in partnership with the Olympic Peninsula Community Clinic (OPCC) applied for and received funding for their REdisCOVERY program. This program emphasizes meeting clients where they are with the services they need most. This means they will meet clients where they are in life, and where they are in the community. The use of this best practice has been greatly expanded under the AJA grant program.

The total AJA grant award made to the Port Angeles Police Department was \$358,356 with \$217,031 of state funds and \$150,000 of federal Substance Abuse Block Grant funds. PAPD, in partnership with OPCC, uses the funds to provide intensive and light touch case management services to eligible community members. The standardized data collection to occur with the implementation of a multi-site case management system will provide the necessary information to evaluate the REdisCOVERY program to the expected outcomes defined by [RCW 36.28A.450\(8\)\(a\)](#).



*Port Angeles REdisCOVERY Partners from OPCC, Port Angeles Police Department and Port Angeles Fire Department.*

With the approval of a Separation Plan on June 8, 2020, OPCC began providing services to eligible community members. To date they have provided nearly 2,485 hours of intensive case management and coordination services to 109 members of their target population. In addition to these service hours, OPCC also recorded 83 medical volunteer hours.

To demonstrate the impact of their programs for inclusion in this report, AJA grantees were asked to submit narratives of situations they believe are a direct result of the funds. The following narrative is an excerpt from one that was submitted during the reporting period.

One of our first REdisCOVERY AJA program participants was a gentleman who had disengaged from everything: medical and mental health care, addiction treatment, probation, his tribe, and his children. He was unemployed, living in a county-run shelter specifically funded to temporarily house individuals adversely affected during the COVID pandemic. His mother, though already housed, had followed him to the shelter as he was unable to live independently of her, since he was experiencing debilitating panic attacks multiple times a day, every day.

After being accepted into the AJA intensive case management program, he was assigned to Viola, one of our most experienced case managers. Working with Viola, they identified and prioritized his needs and goals. One of the first steps in his case management was to medically stabilize him. Through another facet of our program, Olympic Peninsula Community Clinic Medical Director Dr. Gerald Stephanz started meeting him multiple times a week at on-site shelter clinics to diagnose and treat his medical and behavioral health needs.

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With his health concerns being addressed, Viola's next step was to dial his Parole Officer and hand him the phone to re-establish connection with his legal obligations. These two simple steps began to immediately relieve some of his anxiety.

Leveraging the Community Paramedicine component of the REdisCOVERY team, Port Angeles Fire Department Community Paramedic Daniel Montana searched 911 call history to determine that our participant has a history of being a high utilizer of 911 for his panic attacks, while also learning that he experiences much greater success and stability when involved with AA.

REdisCOVERY Light-Touch Case Manager Amber had recently arranged for the donation of multiple computers to the shelter where our participant resided, which allowed REdisCOVERY Navigator Kelly to assist him in signing up for his favorite AA meetings via Zoom. Meanwhile, Viola utilized the HealthCare Authority phone program to reconnect him to tribal healthcare and mental health.

Once he was able to establish 30 days of sobriety, we were able to refer him to the STAR program, a clean and sober transitional housing program where he took off. From there he needed much less-intensive management; he maintained sobriety, continued his outpatient treatment, remained engaged with his mental health programming, and obtained a part time job. He even signed up for martial arts classes. He began volunteering extra time at the greenhouse and kitchen at his transitional housing program, which is also a youth drop-in center, and completed all of his community service within the first 30 days of residence there.

He now sees his young adult children regularly, lives separate from his mother, paints native art, and plays music. His life is not absent of stress or anxiety, however that does not derail his job, his housing, or his relationships. He has carefully and meticulously developed the tools and the foundation with which to cope and manage his stress and anxiety now.

On top of all that, he has saved up several thousand dollars towards move-in costs for permanent housing. In October, he became our first graduate of our REdisCOVERY AJA Case Management program.

REdisCOVERY Participant Experience

When asked about the value of the AJA program to their organization and the community, Deputy Chief Jason Viada of the Port Angeles Police Department stated the following:

**Organizational Impact:**

*AJA funding means that we can focus not just on investigation, apprehension, and prosecution, but also on prevention. It is the next step in intensifying our focus on prevention. This project began in 2016 with an officer and social worker on foot patrol together contacting people and referring them to services. With AJA there is a specific focus on guiding people through the maze of service bureaucracies.*

**Community Impact:**

*AJA means that this community has a police department that is solving problems that the community wants solved in ways other than incarceration.*

When asked about the value of the AJA program to their organization and the community, OPCC Executive Director T. Scott Brandon stated:

**Community Impact:**

*We understand that the nature of the response during a time of crisis is critical to the outcome. After the implementation of WASPC-funded mental health field response, we saw a significant reduction of calls for service, and we have every reason to suspect 2020 data to show similar results from our new WASPC AJA program. Through crisis work, we know that it can become a cycle of crisis after crisis, it is why the system has “high utilizers” and high recidivism; the solutions in crisis work are temporary. What AJA programs provide is the ongoing problem solving: resource driven, goal focused support that solves problems beyond safety and focuses on quality of life for both the individual and the community.*

*“The increased support and interaction between local law enforcement and the REdisCOVERY AJA program has already been a great success, even if the data isn’t yet there to show long-term outcomes of the program. Officers are better able to perform their duties when high utilizers of emergency services are given access to support and services that help them make positive changes in their lives.”*

Mike French, Council Member  
City of Port Angeles

*It has been reported that about 80% of police calls are related to behavioral health concerns rather than issues of enforcing the law. AJA case management programs allow the specially-trained experts to intervene in behavioral health crises so that the accurate and most appropriate services are deployed once the crisis is resolved. Case managers provide linkages and follow up to directly address the causes of ongoing criminal justice involvement. They reduce the use of emergency services by those who have become familiar and because of a behavioral health issue has not found stability.*

*When a case manager describes to an officer how well an AJA participant is doing, after that participant was referred to the program because they were the subject of more than 80 calls for service per month, and the Officer responds, “Oh, I thought she had moved out of town,” it is a direct result of the AJA program. The individual is now fully engaged with behavioral health services, is supported on medication, and is housed safely. We’ve done our job and the officer has been able to better address other pressing community needs.*



REdisCOVERY Community Change Agents Viola Ware and Michael Salyer hand out masks to an individual experiencing homelessness. Photo credit [Jesse Major Photography](#)

**Organizational Impact:**

*Olympic Peninsula Community Clinic (OPCC) serves the health and wellness needs of under-served people on the Olympic Peninsula. The expansion of the REdisCOVERY program to include AJA case management allows OPCC to provide comprehensive, wraparound case management to community members who most need that intensive focus and support. AJA case managers often work with those who no one else knows what to do with, they can be hard to engage have lengthy legal histories and often have both behavioral health concerns and housing instability. Having someone to advocate on the AJA participant's behalf is essential in getting providers to re-open their doors to participants, to see an opportunity for change and to join in the work. Case managers not only demand that service agencies provide adequate services but they also help participants create realistic goals and work on the tasks to reach them.*

*“Having the additional REdisCOVERY team members working with some of the most intensive cases has made it easier for me to focus on other areas of responsibility. We all are able to be more efficient and effective when we work together to serve the community.”*

Daniel Montana, Community Paramedic  
Port Angeles Fire Department

*Within the Port Angeles Police Department, it means that once the law enforcement role is complete, Officers can provide an additional resource to help the individual to reduce their own risk of recidivism. Rarely do people WANT to go to jail and sometimes they just don't see the alternatives as possible. Having AJA programs give police departments another, positive tool to use to make an impact on the safety and wellbeing of the community they serve in. It helps the community to hold the participants accountable while still offerings equity in resources.*

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## Comprehensive Healthcare (Walla Walla)

Comprehensive Healthcare of Walla Walla (Comprehensive), in partnership with Blue Mountain Heart to Heart (BMHTH) applied for and received funds for the development and implementation of an innovative community partnership program that maintains fidelity with the Law Enforcement Assisted Diversion (LEAD®) principles and program elements. While details regarding the implementation of this program are still being developed, the final program will include the provision of mental health (therapy and crisis intervention) and substance abuse (Medication Assisted Treatment (MAT)) services to diversion eligible community members.

The total AJA grant award made to Comprehensive Healthcare was \$486,983 with \$119,325 of state funds and \$367,658 of federal Substance Abuse Block Grant funds. Comprehensive Healthcare, in partnership with BMHTH, are using the funds to develop a LEAD® program from the ground up. They are currently focusing on policy development and are working to implement a best practices program. In-lieu of providing a narrative that demonstrates the success of their program with the client population, WASPC asked management at Comprehensive Healthcare to provide information on the history and current development of their program. Division Director Regina Myers with Comprehensive provided the following narrative:

*Walla Walla is rural community in southeastern Washington State. We have limited resources and access to behavioral healthcare traditionally due to our remote location. We began a transformation in partnership with law enforcement agencies 3 years ago. Law enforcement officers were spending significant resources responding to behavioral health calls and were frustrated with our local crisis program. We responded to build relationships with no funding or additional resources officers and crisis responders began to carve out time for ride-alongs to conduct joint response; officers would send crisis people of concern or interest reports; and we began consistently meeting as partners to problem solve difficult cases. Officers were given direct access to crisis responders and supervisors for our behavioral health teams for follow up work. Even with this very positive partnership work we lack the ability to send a behavioral healthcare case manager to the field as an immediate response for the officer. This funding allowed our community to be innovative with partnerships and eliminate communication barriers between officers and providers, support officers with options rather than use of the emergency room or jail to support referents to services, and be intentional about how our resources are working together to reduce arrests and use of our emergency services departments. COVID has created overloading in our emergency department at Providence and this program is an essential component to support appropriate services in our community.*

*Three years ago, several meetings were held with community agencies talking about our local needs. Everyone in the room (law enforcement, corrections, schools, providers, county officials etc.) all agreed that we needed an option for the high utilizers of our emergency service and relief for our local jail. This program provides an evidence based answer to this problem. Our community is building capacity to provide more appropriate non-emergent services to high utilizers. The component we have been lacking in our response so far has been for our law enforcement partners in the field. We are grateful for this opportunity.*

*Our local stakeholders are meeting to build policy and procedures for program implementation. It has been helpful to bring prosecutors, law enforcement and corrections into joint understanding for harm reduction models and motivational interviewing. With the support, guidance and leadership from WASPC and LEAD our community is learning more about services, substance use and treatment options. We all remain cautiously optimistic about how this program will serve our residents. We have worked through difficult issues around inclusion into this program, the legal parameters and public safety to build a strong program based in LEAD. We are excited to have service providers like Comprehensive and Blue Mountain Heart to Heart in order to*

*“We were excited to join in the opportunity, and eager to collaborate on the project. We have a need in our community for behavioral health assistance...*

*Our biggest goal is to give whatever calls for service that we are responding to—the appropriate response. If that means a police contact and an arrest because it is a criminal offense, then that is appropriate and we will perform our duties in that fashion. If it is a behavioral health call and there is an alternative in which we can assist that individual with a better treatment plan, then by all means we want to be a part of that response.”*

*Kevin Braman, Captain  
Walla Walla Police Department*

*[Quote from Comprehensive Healthcare Community Report: Fall 2020](#)*

*provide [seamless] access to basic medical, intensive/assertive case management, substance use treatment, mental health treatment, housing support and medication management.*

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## Moving Forward

WASPC is excited about the work of the AJA Grant Program recipients in each of their respective communities. We look forward to an evaluation of each program to the expected outcomes as established in [RCW 36.28A.450\(8\)\(a\)](#). WASPC is confident that the implementation of a unified case management system at all AJA sites will allow for the consistent collection of data to be used in an evaluation of the program. As stated earlier in this report, WASPC is committed to ongoing discussions with the Health Care Authority regarding the possibility of a multi-site, cross-program evaluation of AJA and LEAD® Pilot sites. WASPC believes its commitment to this partnership and opportunity fulfil the evaluation component outlined in the [2019 AJA Annual Report](#).

[RCW 36.28A.450\(8\)\(b\)](#) called for WASPC to develop a plan, timetable and budget by December 1, 2019 to transition the grant program to a performance-based contracting format and to establish an evidence-based evaluation framework. In the [2019 AJA Annual Report](#), WASPC reported the intention to launch the AJA Grant Program under a performance-based contract framework. WASPC did not launch the AJA Grant Program under this model. In an effort to provide AJA sites grant funds without delay, WASPC opted to launch under a traditional contract model where reimbursement is provided to grantees upon submission of an invoice and completion of agreed upon activities. Since launching the AJA Grant Program, WASPC has discussed the performance-based contract requirement with partners at the HCA and LEAD NSB. WASPC believes the current contract model allows for oversight, especially for federal Substance Abuse Block Grant funds, flexibility, and timely reimbursement of expenses to grantees. WASPC has requested training materials from the HCA to better understand how we may transition the AJA Grant Program to a performance-based contract format. The HCA has responded with helpful materials. WASPC continues to seek training from other sources to help guide its process to transition to a performance-based contract model. Should the AJA Grant Program be funded in the next biennium, WASPC expects to implement more performance-based considerations into AJA grant agreements.

Funding for the AJA Grant Program was one-time funding for the 2019-2021 biennium, with all funds ending on June 30, 2021. WASPC has requested an additional \$5,387,320 to continue and expand the AJA Grant Program in the 2021-2023 biennium. We have identified investment and expansion of programs that support social services to address mental illness, substance use, and other adverse events shown to increase the likelihood of future criminal justice involvement as one of [WASPC's proposed reforms](#).



*Familiar Faces partner, Sergeant Amy King of the Olympia Police Department, provides a walking tour of Olympia to Port Angeles REdisCOVERY Program Director Amy Miller during an AJA multi-site meeting and learning opportunity.*