



**KING COUNTY**

1200 King County Courthouse  
516 Third Avenue  
Seattle, WA 98104

**Signature Report**

**July 24, 2006**

**Motion 12320**

**Proposed No.** 2006-0324.1

**Sponsors** Ferguson, Patterson, Gossett,  
Lambert, Constantine and Phillips

1           A MOTION requesting the executive, superior court,  
2           district court, prosecuting attorney, public defender and the  
3           sheriff to develop and submit for council review and  
4           approval a phased action plan to prevent and reduce  
5           chronic homelessness and unnecessary involvement in the  
6           criminal justice and emergency medical systems and  
7           promote recovery for persons with disabling mental illness  
8           and chemical dependency by implementing a full  
9           continuum of treatment, housing and case management  
10          services.

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12  
13           WHEREAS, the King County correctional facility is often cited as the state's  
14          second largest mental health facility with a daily population of mentally ill persons higher  
15          than another other facility except Western State Hospital, and

16           WHEREAS, about two thirds of persons booked into King County jail facilities  
17          have chemical abuse and dependency issues, and

18           WHEREAS, the Juvenile and Adult Justice Operational Master Plans adopted in  
19           2000 and 2002, respectively, require the use of alternatives to incarceration, including  
20           treatment alternatives, therapeutic courts and placement in treatment following  
21           incarceration for people with serious mental illness and chemical dependency problems,  
22           and

23           WHEREAS, the county has reinvested a portion of the savings from reduced  
24           juvenile and adult incarceration to develop and expand treatment options that effectively  
25           address the underlying issues, prevent repeated involvement in the justice system and,  
26           thus, reduce the growth in county criminal justice costs, the main driver in the county  
27           general fund budget, and

28           WHEREAS, in implementing treatment options, the department of community  
29           and human services and the county criminal justice agencies have developed close  
30           working relationships and learned what programs effectively reduce reoffending and  
31           improve lives but have had difficulty making further progress due to restrictions and  
32           reductions in federal and state funding for treatment and lack of availability of  
33           appropriate housing options for a large portion of this population, and

34           WHEREAS, the almost exclusive focus of federal and state funds on Medicaid  
35           has eliminated options to treat people who have not yet gone through the lengthy  
36           eligibility process and has significantly reduced the ability to provide necessary services  
37           not covered by Medicaid such as crisis intervention, outreach and residential care, and

38           WHEREAS, new funding opportunities have arisen with the passage of the  
39           veterans and human services levy by King County voters in November 2005 and  
40           provisions by the state legislature for intensive community treatment teams for mentally

41 ill, for homeless housing and services and for the one-tenth of one percent sales tax  
42 option for counties to raise funds for mental health and chemical dependency treatment  
43 and therapeutic courts, and

44 WHEREAS, key leaders from the county criminal justice agencies and  
45 department of community and human services briefed the committee of the whole on  
46 June 19, 2006, regarding the problems and opportunities in caring for persons with  
47 disabling mental illness and chemical dependency, and

48 WHEREAS, all participants in the briefing agreed that the lack of access to  
49 ongoing treatment and housing leads to crises that, by default, require criminal justice  
50 interventions that are difficult, costly and most often not effective in resolving the  
51 problems, and

52 WHEREAS, the sheriff briefed the committee about the need for crisis  
53 intervention training to help the law enforcement handle people disturbed by mental  
54 illness and chemical dependency safely and effectively and about the need for a place,  
55 other than the jail, where someone in crisis can be brought for immediate assessment and  
56 placement in appropriate, ongoing care, and

57 WHEREAS, the director of the department of adult and juvenile detention briefed  
58 the committee about the problems that arise from booking people who are unstable and  
59 disabled due to mental illness and chemical dependency and about the need for both  
60 prebooking diversion and diversion after booking and before filing criminal charges, and

61 WHEREAS, the director of the department of adult and juvenile detention  
62 indicated that the average length of stay for all felony inmates is twenty-four days while  
63 the average length of stay for mentally ill inmates is one hundred fifty-eight days, and

64 WHEREAS, the per person per day cost of incarceration for unstable mentally ill  
65 persons in the jail psychiatric unit is about three hundred dollars per day as opposed to  
66 the average per person per day cost of ninety-five dollars, or an average cost per episode  
67 for an unstable mentally ill person of a little over forty-seven thousand dollars, and

68 WHEREAS, the assistant chief criminal deputy prosecuting attorney indicated to  
69 the committee that the need to evaluate whether a mentally ill person is competent to  
70 stand trial is the largest single contributor to lengthy stays of mentally ill persons, and

71 WHEREAS, competency evaluations are currently done by Western State  
72 Hospital, mostly at the hospital located in Pierce county, and jail inmates often wait  
73 several months before the hospital is able to admit them, and

74 WHEREAS, the director of the mental health and chemical abuse and dependency  
75 services division briefed the committee about the work he is undertaking along with the  
76 criminal justice agencies and housing programs to identify the continuum of services  
77 needed to move from dealing with repeated crises to providing for long term stability and  
78 recovery and about how they have learned through implementation of the justice  
79 operational master plans and the plan to end homelessness the importance of quick access  
80 to housing, treatment and case management, and

81 WHEREAS, the director of the mental health, chemical abuse and dependency  
82 services division noted that while improving access to treatment and housing from the  
83 criminal justice system is a key goal, it is also critical to improve access from other points  
84 in the community so people do not have to involve the police and courts in order to get  
85 help, and

86 WHEREAS, the chief judge of the adult drug court informed the committee that  
87 forty percent of drug court clients are homeless and eighty percent are unemployed,  
88 pointed out that there is a problem with time-limited housing arrangements creating new  
89 anxiety just as recovery is taking hold and highlighted the need for a source of support for  
90 case management since this component is not covered by state and federal funding and  
91 the need to address employment to assure long term recovery;

92 NOW, THEREFORE, BE IT MOVED by the Council of King County:

93 A. The executive, superior court, district court, prosecuting attorney, public  
94 defender and sheriff are requested, with assistance from council staff, to develop and  
95 submit for council review and approval an action plan to prevent and reduce chronic  
96 homelessness and unnecessary involvement in the criminal justice and emergency  
97 medical systems and promote recovery for persons with disabling mental illness and  
98 chemical dependency by implementing a full continuum of treatment, housing and case  
99 management services.

100 B. The continuum of services should address the treatment, rehabilitation,  
101 housing and case management needs of persons with disabling mental illness and  
102 chemical dependency, or both, by providing integrated packages of services and housing  
103 with varying levels of intensity and service mix to meet the range of needs of the  
104 identified target populations. The continuum should also provide for quick and easy  
105 access to services and housing from the streets and community and via partnerships with  
106 the criminal justice and emergency medical systems that provide a consistent assessment,  
107 eligibility and placement process that eliminates redundancy of information collection

108 and process for the clients and maximizes appropriate sharing of information for purposes  
109 of effective treatment and case management while also assuring public safety.

110 C. The action plan should be developed in three phases:

111 1. The first phase of the action plan should address steps that can be taken over  
112 the next six months to initiate development of a full continuum of services. The first  
113 phase should include a description of the kinds of service and housing improvements  
114 needed to achieve a full continuum and descriptions of specific proposed improvements  
115 using currently available resources. Phase I of the action plan should be submitted to the  
116 council by September 1, 2006, for review and approval together with the service  
117 improvement plan for the use of the regional human services levy for veterans and others  
118 in need;

119 2. The second phase of the action plan should address changes in criminal  
120 justice case processing to more effectively deal with people with disabling mental illness  
121 and chemical dependency when appropriate service and housing options are available in  
122 the community. The areas to be considered in this planning process are prearrest  
123 diversion, prebooking diversion, the use of deferred prosecutions, alternative sentencing  
124 methods including therapeutic courts, improvements to the processes for evaluating  
125 defendant competency and for involuntary commitment and improvements in screening,  
126 assessment and discharge planning that connect directly with community service  
127 engagement and placement. Phase II of the action plan should be submitted to the  
128 council by January 15, 2006, for review and approval; and

129 3. The third phase of the action plan should address what is needed to bring the  
130 continuum of services and the criminal justice system improvements identified in phase II

131 to full scale to meet the needs of the identified target populations in a cost-effective  
132 fashion. Phase III should include: a prevalence study of the mentally ill and chemically  
133 dependent populations currently involved in the local criminal justice system, psychiatric  
134 emergency and inpatient services, sobering and detoxification services and homeless  
135 services system; a description of the service changes, enhancements and additions  
136 necessary to meet the ongoing stabilization and recovery needs of the population; a  
137 projection of the additional costs of meeting these needs; a proposal for financing the full  
138 set of improvements to include consideration of the sales tax option provided by state

139 statute; and a cost-effectiveness and cost/benefit analysis of the proposed improvements.

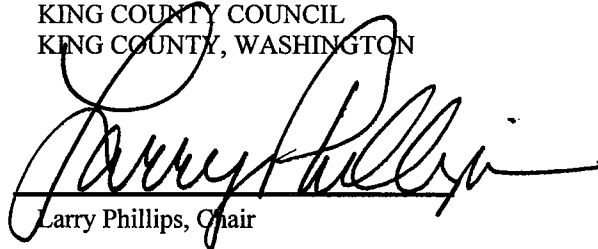
140 Phase III of the action plan should be submitted to the council by May 1, 2007.

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Motion 12320 was introduced on 7/17/2006 and passed by the Metropolitan King County Council on 7/24/2006, by the following vote:


Yes: 9 - Mr. Phillips, Mr. von Reichbauer, Ms. Lambert, Mr. Dunn, Mr. Ferguson, Mr. Gossett, Ms. Hague, Ms. Patterson and Mr. Constantine  
No: 0  
Excused: 0

KING COUNTY COUNCIL  
KING COUNTY, WASHINGTON



Larry Phillips, Chair

ATTEST:



Anne Noris, Clerk of the Council

**Attachments**      None