

2018 GRANT SUMMARY PAGE

MENTAL HEALTH, CHEMICAL DEPENDENCY, AND THERAPEUTIC COURTS RFP  
KITSAP COUNTY HUMAN SERVICES DEPARTMENT

Organization name: Kitsap County Sheriff's Office

Proposal Title: Behavioral Health Units

Please Check One  New Grant Proposal  Continuation Grant Proposal

Please check which area of the Continuum this project addresses:

<input type="checkbox"/> Prevention, Early Intervention and Training	<input type="checkbox"/> Medical and Sub-Acute Detoxification
<input type="checkbox"/> Crisis Intervention	<input type="checkbox"/> Acute Inpatient Care
<input type="checkbox"/> Outpatient treatment	<input checked="" type="checkbox"/> Recovery Support Services

**Proposal Summary:** The Kitsap County Sheriff's Office is requesting funds to help support the plan and implementation of behavioral health units within the facility. The jail would like to take a more therapeutic approach to inmates with severe behavioral health, and reduce their time being spent in segregation. Research shows that behavioral health inmates who are segregated actually decompensate more while incarcerated. Even though segregation for severe behavioral health inmates is the common practice, Kitsap County Sheriff's Office Jail wants to take a different approach. Allowing the time that these inmates are incarcerated to be more productive, therapeutic, and educational.

Requested Funds Amount: \$75,840.00

Matching/In-kind Funds Amount: \$ \_\_\_\_\_

Street Address: 614 Division Street MS#33

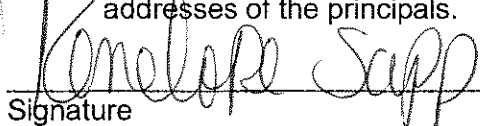
City: Port Orchard State: WA. Zip: 98366

Primary Contact: Penelope Sapp Phone: 360-362-6044 E-Mail: [psapp@co.kitsap.wa.us](mailto:psapp@co.kitsap.wa.us)

Non-Profit Status: 501C3 of the Internal Revenue Code?  Yes  No

Federal Tax ID Number: 91-6001348

- If incorporated, attach a list of the members of the Board of Directors, including names and addresses.
- If not incorporated (sole proprietor or partnership), attach a list of the names and addresses of the principals.


Lieutenant
7/3/17  
 Signature Title Date

2018 NARRATIVE TEMPLATE FOR NEW GRANT PROPOSALS

MENTAL HEALTH, CHEMICAL DEPENDENCY, AND THERAPEUTIC COURTS RFP  
KITSAP COUNTY HUMAN SERVICES DEPARTMENT

All New Proposals will be screened and rated based on the following Narrative information using the template below. The Narrative is limited up to 15 pages.

1. Organizational Capacity

A. **Organizational Governance**-The Kitsap County Sheriff's Office (KCSO) will be considered the lead organization and take the responsibility of fiscal management. Although KCSO is the lead, the partnership and commitment spans throughout the law enforcement agencies in Kitsap County. Sheriff Gary Simpson is the elected official who oversees the Sheriff's Office. The elected sheriff has the ability to appoint certain positions, which is considered the executive staff of the organization. Sheriff Simpson has appointed Undersheriff Gese, Chief of Patrol Steve Duckworth, Chief of Detectives/Support Services Dave White and Chief of Corrections Mark Rufener. Within the three divisions, patrol, detectives/support services, and corrections, a chief oversees their operations and staffing. The Sheriff employs 119 deputies, 91 corrections officers and 35.25 support staff. Each of the chiefs are responsible for their specific division and day-to-day operations.

Kitsap County is a local government and uses the modified accrual basis of accounting. The county uses fund accounting and reports on governmental, proprietary and fiduciary funds on its CAFR each year. Governmental funds include the general fund, special revenue funds, capital projects funds and debt service funds.

The county is decentralized and departments and offices are responsible for monitoring the financial activity in the funds and cost centers (business units) under their purview. The auditor's office is responsible for processing accounts payable and payroll, and for annual financial statement preparation (CAFR).

Departments and offices must comply with the county's purchasing policy (i.e. dollar amount thresholds for certain types of purchases require purchase orders or contracts). Individuals within departments and offices are authorized to approve invoices and payment vouchers. Departments and offices submit payment vouchers to the auditor's office for processing. The auditor's office audits the vouchers and, if they contain all required support and

authorizations/approvals, processes them for payment. Payments are issued daily.

Departments and offices submit employee timecard information to the auditor's office for payment (bi-weekly); employee timecards or time entry is approved at the department level by authorized individuals. The auditor's office payroll processes payroll for all county departments and offices.

Departments and offices are responsible for grant reporting and compliance. The auditor's office is responsible for annual SEFA preparation, audit (by the State Auditor's Office), and submission to the Federal Audit Clearinghouse.

The Sheriff's Office's fiscal operations are managed by the Administrative Manager who reports directly to the Undersheriff. The Administrative Manager is responsible for managing the financial aspects of the Sheriff's Office to include oversight of financial procedures, administrative functions of the Sheriff's Office cash receipting program, balancing accounts, managing cash balances, ensuring periodic internal audits are conducted to maintain compliance with the county's financial procedures, and all financial and activity grant reporting.

The Kitsap County Auditor's Office and the State Auditor's Office conduct periodic audits to ensure proper financial procedures are being followed. The Department of Justice also conducts periodic site visits to ensure proper procedures are followed with regard to federal grants.

The Sheriff's Office inventory and Jail were audited by the Washington State Auditor's Office for the period January 1, 2014 through December 31, 2014. They found we complied with applicable requirements and provided adequate safeguarding of public resources. We also complied with state laws and regulations and our own policies and procedures in the areas examined.

Department of Justice representative Jeffrey Felten-Green conducted an audit in June, 2017 of the Department of Justice Ed Byrne Grant. While the audit results have not been finalized, he indicated by phone he found nothing questionable

- B. History of Project Management-** The Kitsap County Sheriff's Office has obtained several grants from the Department of Justice to include a \$750,000 COPS grant and the Ed Byrne Memorial Justice Assistance Grant. The COPS grant was over the course of four years and required quarterly reports of wages, benefits, and activity. All reports were prepared and submitted on time. We have maintained proper documentation to include all financial and activity reports together with appropriate documentation of our reporting data. Each year we obtain a Department of Justice Ed Byrne grant for purchase of equipment and/or

salaries and benefits of law enforcement personnel. This grant also requires management of purchases and/or salaries and benefits to include staying within budget, ensuring only allowed items are reimbursed, and all quarterly, semi-annual, and final activity and financial reporting.

- C. **Staffing Capacity**-The Kitsap County Sheriff's Office Jail employs 91 corrections staff to supervise inmates. The focus of this proposal is our South Pod units, which is where our segregated inmates are housed. South Pod is supervised by 2 corrections officers on both days and swing shift, and one on graveyard. The actual officers change on a daily basis. The officers are in direct contact with these inmates, which includes de-escalating when there is a crisis, and gaining compliance to follow through with day-to-day operations expectations. The officers that will be working in our new behavioral health units will be required to attend the 40 hour crisis intervention class, as well as other training that relates to communication, de-escalation, and other skills that will help them interact with severe behavioral health appropriately. In addition to the officers, the classification team, 4 officers and one sergeant, oversee the management of these units. They are responsible for who is housed in these units, and who can be transitioned out to general population. Finally, the three lieutenants of the jail will work closely with staff, mental health providers, and outside resources, to help the behavioral health inmates' transition into general population or the community successfully.

Correct Care Solutions, the medical contractor at the jail, employs 2 fulltime mental health professionals, and one part-time. They are committed to assisting the inmates in the behavioral health pods with support and intervention techniques and skills that will help them while incarcerated and upon release. The mental health professionals will hold one-on-one sessions with the behavioral health inmates, as well as group sessions. Something that these inmates have not participated in while incarcerated in our jail, because they are often segregated. Through group sessions and the use of the workbooks on the tablets, the behavioral health inmates will be spending their time in jail, getting rehabilitating.

Kitsap Mental Health recently received a grant through Trueblood, which will allow 6 people to be hired for jail diversion. This staff will include a supervisor, behavioral court liaison, 2 screeners and 2 peers. The screeners will help with a diagnosis and the services that the inmates need, either treatment, medication, etc. The peers work with the inmates upon release, helping them to make appointments, and get into direct contact with the services they need. The behavioral health court liaison will connect those inmates who fit the requirements to join behavioral health court. The supervisor will oversee the progress. It is suspected that all of the inmate in the behavioral health units will be candidates for the jail diversion program under Kitsap Mental Health, since often these inmates are the ones considered to be high utilizers of services.

## **2. Community Needs and Benefit**

A. **Needs Assessment-** Segregation of severe behavioral health inmates is often the answer in many jails and prisons in order to deal with their disobedience. Segregation is defined where inmates are locked in their cell for 23 hours a day, and only come out for one hour a day. Correctional facilities feel that if they place behavioral health inmates in solitary confinement, it will lessen the chance of them breaking rules or becoming violent. Actually, it is the complete opposite. Research has shown that when a behavioral health inmates is segregated for a long period of time, their aggressive behavior and rule breaking gets worse. Solitary confinement can actually damage a behavioral health inmates even more so, causing them to have even more significant aggressive behavior and mental health issues. These offenders that are in confinement begin to lose their ability interact with people even more so compared to when they were in the community. They become bored and depressive, less able to interact with people than before. They often spend their entire time in jail segregated, and are expected to transition into the community lacking social skills. Kitsap County has always been progressive, working hard with inmates one on one, trying to get them integrated into general population before release in order to be more social. Often though, because our segregation units were built in a time when the approach to incarcerated was more punitive, the housing areas do not offer more appealing opportunities for behavioral health inmates to recover enough in order to be transitioned into general population, let alone the community.

In looking at collective impact, funding the behavioral health units in the jail, will help these inmates recover and develop skills that will be useful upon their release. Jails cannot continue to release inmates that are considered more violent and aggressive compared to when they were arrested. It is not safe for the community or law enforcement when they come in direct contact with them. Although there are many efforts to address behavioral health, the jail has identified a gap, and these are the inmates that are considered severe behavioral health.

Currently in South Pod, there are approximately 25 inmates in what would in the future be considered the behavioral health units. These numbers range from 25-40. While it is difficult to capture is a baseline, we can give you a general idea of who we are trying to focus on. Inmates that have been segregated for months, although we have tried to transition them to general population, we have not been successful because while they are segregated they get bored and act out, or become aggressive. These are the same people that return within weeks after

release only to be housed in segregation again. While they are in segregation they assault officers, flood cells, and plug toilets, costing the taxpayers a significant amount of money. We want to develop two units, one male and one female, with 8 cells in each. These 16 inmates will have access to group sessions, tablets and workbooks, and most importantly, they will be out with other severe behavioral health inmates for at least 6 hours a day, if not more. We anticipate that while the 16 behavioral health inmates are housed in these units, there will be others awaiting room in the adjoining units, true segregation. It is anticipated that the 16 rooms in the two units will be continually full. That number equates to 5,840 beds filled, but that is not a true number of different people. We plan on measuring our successes by keeping those behavioral health inmates who are normally housed in segregation in the behavioral health units or general population. We will also monitor their jail infractions, and recidivism.

- B. **Outreach-** Outreach is a key component to the success of the behavioral health units. The inmates that fit the guidelines of the behavioral health units will be solicited by classification, mental health, and other staff to be housed in these units. The inmates will be told that they must exhibit good behavior to remain housed in the units. While the 16 are in the two behavioral health units, staff and mental health will work on the others that are segregated. Getting them prepared for the transition when there is an opening. Encouraging positive behavior.

Collaborating with Kitsap Mental Health, not only with their jail diversion team, but the mental health professionals that will be working with these behavioral health inmates upon release. Utilizing the resources from the re-entry services we embedded within the jail, such as West Sound Treatment, Port Gamble, and Coffee Oasis, in providing services to this population, something that has never occurred before due to them being segregated. Additionally, we will be reaching out to South Kitsap Library for donations of self-help books to place in the units.

- C. **Link between Community Need and Strategic Plan-**As stipulated in the 2014 strategic plan of the Kitsap County Behavioral Health, we feel this proposal fits in several of the goals established. Improve the health status and wellbeing of Kitsap County residents. With the behavioral health pod, we will be working closely with the population that needs it the most, severe behavioral health. We want to improve their social skills while incarcerated, help find them resources, and deliver them back into our community improved and healthier. In the goal through the strategic plan we will help accomplish is reducing the number of people in Kitsap County who recycle through our criminal justice system and also the goal of reducing the number of people in Kitsap County who use costly interventions including hospitals, emergency rooms, and crisis services. We anticipate since we can spend time with these behavioral inmates working on skills, finding resources and using the peers through Kitsap Mental Health, this will reduce recidivism and also their use of costly. Allowing them the ability to

become established in this community, helping them find ways to be successful, even though they have struggles, will increase their success. When they are incarcerated, not taking their medications, and feel that they have nobody to turn to for help, they resort to utilizing the costly interventions.

As mentioned above, inmates that are segregated actually decompensate more from the current manic state they are in when arrested. Because we will have a captive audience in these behavioral units, we will offer a service that will be new to the jail, group therapy. We are taking an innovative approach, progressive, and turning our units into what would be considered a mental health facility versus a jail. These inmates will have the opportunity to work with mental health professionals in a more educational setting, not when they are in crisis. The inmates will also have access to tablets, which will have workbooks downloaded on them to provide them with more techniques and skills to cope. Finally, in collaboration with our medical providers and outside clinicians, making sure the behavioral health inmates receive their medications in jail, and understand where they can continue to receive refills upon release. Because most of the inmates that are released are on medication, we find that there is a gap, or maybe inability, for them to continue on their medication. The peers under Kitsap Mental Health will ensure that upon release the behavioral health inmates understand and are capable of receiving what they need.

### **3. Project Description**

- A. **Project Design**-The behavioral health units will be designed to reduce the amount of time that severe behavioral health inmates are locked in their cell. The units will be repainted more comforting colors, have televisions, electronic tablets, and furniture. Additionally they will have access to self-help books and various other reading resources to keep them busy. Because these inmates are used to being locked in a cell alone, we will start with four out interacting with each other. These four males and four females, separate units, will be out together for the 4-6 hours. After their timeout is over, we will have the others come out for another 4-6 hours. Because this is a new concept, we are not quite sure if we can allow all 8 males and all 8 females unlocked together to begin with. We hoping that we can do so, in order to increase their time out to a full day. Either way, these inmates will have activities to do while in the dayrooms together, either reading, watching educational shows, group therapy, or exercising. Which will be more appealing compared to being locked in a cell for 23 hours. While in their cells, they will be able to read and use the tablets with the workbooks we will download.

Tablets-16 I-pads will be purchased (one for each cell we have in these units) so mentally ill prisoners will have access to resources and apps that will educate them. Examples of the resources include Worksource, which provides information on finding employment. Kitsap Mental Health, which will provide them with contacts as they transition into the community. The tablets will allow

the prisoners to find the services they need upon release, to ease the transition. In addition to resources the tablets have the following apps downloaded:

- BellyBio-Free app that teaches a deep breathing technique useful in fighting anxiety and stress. A simple interface uses biofeedback to monitor breathing.
- Operation Reach Out-Literally a lifesaving app, this free intervention tool helps people who are having suicidal thoughts to reassess their thinking and get help.
- eCBT Calm-Provides a set of tools to help evaluate personal stress and anxiety, challenge distorted thoughts, and learn relaxation skills that have been scientifically validated in research on Cognitive Behavioral Therapy (CBT). Lots of background and useful information along with step-by-step guides.
- Deep Sleep with Andrew Johnson-Getting enough sleep is one of the foundations of mental health. A personal favorite I listen to all the time, this straightforward app features a warm, gentle voice guiding listeners through a Progressive Muscle Relaxation (PMR) session and into sleep.
- DBT Diary Card and Skills Coach- Based on Dialectical Behavior Therapy (DBT) developed by psychologist Marsha Linehan, this app is a rich resource of self-help skills, reminders of the therapy principles, and coaching tools for coping.
- Optimism- Allows them to track their moods, keep a journal, and chart recovery progress with this comprehensive tool for depression, bipolar disorder, and anxiety disorders. One of the most popular mood tracking apps available, with plenty of features.
- Magic Window – Living Pictures-Not technically a mental health app, it makes no miraculous claims about curbing anxiety. However, there is independent research indicating that taking breaks and getting exposure to nature, even in videos, can reduce stress. This app offers an assortment of peaceful, ambient nature scenes from beautiful spots around the world.

Mental Health and Life Skills Series for Adults/E-Book-This series of workbooks will be downloaded to all of the tablets and will provide activities for the mentally ill prisoners such as self-assessments, journaling, therapy, and various educational sections that will engage them in self-reflection, and help them develop life and coping skills. There are several different workbooks in this program which include:

- ✓ Anger & Aggression
- ✓ Building Resiliency
- ✓ Communication Skills
- ✓ Conflict Management
- ✓ Essential Work Skills
- ✓ Personal & Intimate Relationship Skills



- ✓ Practical Life Skills
- ✓ Substance Abuse & Recovery
- ✓ Wellness Lifestyle

These E-workbooks will provide many hours of activities that the prisoners can work on alone, together in a group, and with our mental health professionals. This will provide them with valuable skills and stimulation that they normally would not receive in segregation. When people are dealing with a mental issue, many of their basic life skills suffer. It becomes more difficult to manage stress, cope with change, communicate effectively, remain optimistic and maintain healthy relationships. The workbooks in this series address these life skills and more. Studies show that people with mental health issues get better and many recover completely. Recovery refers to the process in which people are able to live, work, learn, and participate fully in their communities. This is what Kitsap County Jail wants to focus on, in hopes that we may break the incarceration cycle and help our mentally ill prisoners get released and become more productive citizens in the community.

While housed in these units, they will be engaging in group therapy sessions with mental health professionals, and working with Kitsap Jail Diversion Team to transition into the community successfully with the services they need in order to avoid recidivism. The ability to interact and socialize while in the behavioral health units, will be another important piece to their success.

Currently we have 4 units within south pod that need to be more modernized, which includes painting and adding furniture. We are proposing to paint the units colors that are more attractive and calming to the person versus institutional browns or greys. Research shows that blues and greens are actually more soothing and will boost someone's mood. The first item on the timeline would be to hire paint contractors in order to have it done professionally and efficiently. Because we have to use an epoxy paint that is durable, but also toxic when applied, we cannot use inmate labor to complete this project. The painting timeline will take approximately 2 months.

During this time we will also be adding exercise equipment to the recreation yards adjacent to the behavioral health units. Exercise is a great outlet for anyone, and it is not different for the behavioral health inmates. They will be the only inmates authorized to use the equipment. This will take two weeks and will overlap with the painting.

Once the painting has been completed, we will add televisions, in security boxes to all four units. This will take 2 weeks

We are anticipating that in April of 2018, we can begin housing the inmates in the behavioral health units. At this point, we can begin all of the activities and programs, monitoring the success.

Training of corrections staff has already begun, with additional officers scheduled to attend the 40 hours Crisis Intervention Training class. Beginning late 2017, we plan to have 5 more trained and an additional 10 in 2018. All of the officers will be receiving agency training in preparation for the transition to the new behavioral health units. This training will begin in early January, and continue through the year to keep their skills current.

B. **Evaluation**-Attached is the evaluation worksheet that will provide a more in-depth explanation of goals, activities and objectives. Below is an overview.

- **Goals**-The first will be to transition away from transitional segregation model of behavioral health units. This is where we will change the condition of south pod from an institutional model, to more of a rehabilitative. Second goal is to train staff, we currently have 23 officers trained in the 40 hour crisis intervention course, and by the end of 2018, and we anticipate adding 15 more. Third goal is to have the behavioral health units open providing socialization skills, group therapy, and access to direct services to help transition into general population and/or the community. This is the goal where we anticipate seeing a successful transition into the community, and lower recidivism rates.
- **Activities**-The activities that are included in the first goal, the transition portion, is to begin the painting and cleaning off south pod. Adding furniture, televisions, and tablets to the units. The activities for the second goal is to send officers to crisis intervention training for those who have not attended, but want to work with the behavioral health inmates. Identify, develop, and provide additional training to officers that will be useful in supervising behavioral health management inmates. For the last goal, this is where we will identify the inmates that will be housed in these behavioral health units, introduce them to the units and the activities we will provide. They will attend group therapy and use the workbooks on the tablets to develop skills, access resources. The behavioral health inmates will increase the time they are out socializing and learning skills and techniques that will transfer into the community. They will work closely with mental health professionals and the jail diversion staff to help with services upon release.
- **Objectives**-Objectives for the first goal will be: We will complete the painting of the behavioral health units by the end of February, beginning of March. We will have all tablets, exercise equipment, and televisions in place by the end of February, beginning of March. For the second goal, officers we will increase the number of officers that have attended the 40 hour crises intervention training from 23 to 38 by the end of 2018. We will have completed additional training for supervising behavioral health inmates to all officers who work in the behavioral health units by December of 2018. Finally, for the third goal, reduce the amount of behavioral health inmates in

segregation. Reduce the amount of incident reports/discipline of these inmates. Increase access to services upon release. See a reduction of recidivism.

- C. **Evidence-based or Promising Practices-** The target population will be the males and females that are generally segregated because of their severe behavioral health and inability to be housed with the general population of inmates. We cannot pinpoint age, race/ethnicity, just that they have some sort of behavioral health disorder that hinders their ability to be housed with others due to safety concerns. The measurable outcomes will be when we can successfully integrate these individuals from segregation to behavioral health units, to either general population or the community. They will have time to socialize and develop coping skills.

What we know is that segregation is damaging to inmates, especially those with behavioral health issues. Disability Rights Washington (DRW) is continually monitoring jails and addressing their deficiencies when it comes to behavioral health inmates. In their report titled Cruel, but not Unusual: Solitary Confinement in Washington County Jail, they highlight how mentally ill inmates that are segregated could sustain "lifelong psychological effects." The DRW has visited our facility, and while we did not have any pressing concerns that felt needed to be addressed immediately, they wanted to remind us that there is a focus on jails using segregation less, because it is damaging to inmates, especially behavioral health. For the full report from DRW, please go to <http://www.disabilityrightswa.org/cruel-not-unusual-solitary-confinement-washingtons-county-jails>

The DRW will return to Kitsap County Jail, and when they do we want to see that we are progressive and working on rehabilitating our inmates. Additionally, we want to reduce the likelihood that we returning an aggressive person back into the community. We want to work hard with others to provide services upon release. For example, group therapy, there is a lot of information on how effective it is to inmates that receive it in prison. While we generally do not have as much time in a jail versus a prison, because of sentencing, the jails that have tried group therapy have seen positive results. We know that with the group sessions, tablets with activities, and the ability to socialize, we can help reverse some of the serious issues that behavioral health inmates face. The Human Rights Watch wrote an extensive document that shows the effects of segregation of mentally ill inmates in prison. Although we are a jail we face the same issues, but we are now trying to address them and be progressive. The document is at <https://www.hrw.org/reports/2003/usa1003/>

- D. **Community Collaboration, Integration and Collective Impact-**As mentioned earlier, we will be collaborating with the mental health professionals through Correct Care Solutions, our medical provider. These are the ones who will

provide support and intervention to the inmates, as well as group therapy as one-on-one. Additionally, we will have the 6 employees from Kitsap Mental Health Jail Diversion inside our facility permanently. The two screeners will score these individuals and see what type of services they need. The behavioral health court liaison will recommend some of these individuals for behavioral health court. The peers will play an important role in the assistance of transition from the jail to the community. This is where Kitsap Connect, WestSound Treatment, Coffee Oasis, and several other resources will be contacted to help provide the service and resources these behavioral health inmates need. There will be designated case managers, most likely from Kitsap Mental Health, who will also be an important variable to the success of these individuals. They are the key to helping those with behavioral health succeed. These peers are success stories themselves, so others will know that they can also achieve a normal functioning life. The supervisor will oversee the employees from Kitsap Mental Health jail diversion team.

The ability to collaborate with the resources that have either come to fruition because of the behavioral health funding, or through Trueblood, will be outstanding partners to make this all a success.

#### **4. Project Financial Feasibility**

##### **A. Budget Narrative-**The budget for this project will be as follows:

- Paint contractors-bids were received and the average to paint the interior of 4 units, including 40 cells, and the outer area of the pod is \$35,000.00. This includes supplies, but not the paint. We cannot use inmate labor for this function, because of liability concerns, so contractors will have to be hired.
- Paint-The bid for the paint is \$10,000.00
- Tablets-We need to purchase a tablet for each behavioral health inmate, which, 16, along with cases that are durable and avoid damage. The tablets and cases are \$500.00 each, multiplied by 16 is \$8,000.00
- Lifeskill E-books is \$260.00 for each of the 16 tablets, \$4160.00
- Televisions and security boxes. We are requesting to purchase 4 televisions along with the security boxes that avoid them from being destroyed. Each television, including the case is \$920.00 each, so the total would be \$3680.00
- Furniture-This furniture has to be designed for correctional facilities, in order to avoid, destruction and ensure safety. Want to purchase chairs, atamans and bookshelves. The total for the furniture will be \$10,000.00
- Rowing machine-So that behavioral health inmates can exercise \$2500.00
- Elliptical Machine-Another piece of exercise equipment \$2500.00

The total costs of the behavioral health units will be \$75,840.00

**B. Additional Resources and Sustainability**-Once the items are purchased, or in the case of painting completed, the transition from segregation to behavioral health units will be easy to accomplish. After the major purchases are made, the jail can sustain the behavioral units through regular maintenance and cleaning. The behavioral health pods will be able to sustain utilizing the mental staff from Correct Care Solutions and Kitsap Mental Health Jail Diversion Team. We contract with Correct Care Solutions and embedded those services into our contract. With Kitsap Mental Health, their employees were hired specifically to help people in jail, and keep them from returning. We are committed to change our culture and approach from segregation to behavioral health units. We continue to find re-entry services that provide resources to all inmates, and we are continue to grow in that area. We continually work on grants with other stakeholders to provide these services in the jail, because decreasing recidivism is our goal.

## EVALUATION WORKSHEET

### INSTRUCTIONS:

Evaluation is the collection of information about a program in a systematic and defined manner to demonstrate success, identify areas for improvement and lessons learned. Every program has at least one end goal and might have several – one or more activities are required to make progress toward meeting the goal. Progress is measured with one or more objectives that might cover an output (number of something) or outcome (change over time) due to the program. The type of outcome (column D) and expected timeframe for change (column E) should be defined. Objectives must follow the “SMART” guideline: specific, measurable, attainable, realistic, and time-bound (column C). Each objective should include an expected target result and completion date (“time-bound” part of column C).

New and continuing grant proposals must fill out the Evaluation Worksheet.

### DEFINITIONS:

<b>Goal:</b>	A broad statement or a desired, longer-term, outcome of a program. A program can have one or multiple goals. Each goal has a one or more related specific objectives that, if met, will collectively achieve the stated goal.
<b>Activity:</b>	Actions taken or work performed to produce specific outputs and outcomes.
<b>Objective:</b>	A statement of a desired program result that meets the criteria of being SMART (specific, measurable, achievable, realistic, and time-bound).
<b>Output:</b>	Results of program activities; the direct products or deliverables of program activities; such as number of: sessions completed, people served, materials distributed.
<b>Outcome:</b>	Effect of a program (change) - can be in: participant satisfaction; knowledge, attitude, skill; practice or behavior; overall problem; or a measure of return-on-investment or cost-benefit. Identify any measures that are “fidelity” measures for an evidence based practice.
<b>Timeline:</b>	Is the outcome expected to measure short-term, medium-term or a longer-term change? When will measurement begin? How often will measurement be done (frequency: quarterly, semi-annual, annual, other)?
<b>Baseline:</b>	The status of services or outcome-related measures before an intervention against which progress can be assessed or comparisons made. Should include data and time frame.
<b>Source:</b>	How and from where will data be collected?

EVALUATION WORKSHEET

PROJECT NAME: Behavioral Health Units

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE <small>Data and time</small>	G. SOURCE
Transitioning from the standard segregation model to a more therapeutic environment for behavioral health inmates	Cleaning and preparing of 45 housing units. Painting 40 cells, 4 dayrooms, and exterior of south pod in colors that are less institutional and more therapeutic,  Outfitting the 4 units with furniture that is less institutional, more therapeutic in nature.  Adding constructive outlets to these units housed in the behavioral health units: electronic tablets, televisions with helpful programming, various books, exercise equipment, etc.	Complete transition from current segregation units to behavioral health units in order to begin housing behavioral health inmates.	<input checked="" type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit  If applicable: <input type="checkbox"/> Fidelity measure	<input checked="" type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long  Start date: <u>January 1, 2017</u>  Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	Veering away from separation model to therapeutic	When the pod is ready for behavioral health
Ensure the staff who work in the behavioral health units are provided inmate management training in the areas of CIT and supervising inmates with behavioral health.	Provide staff that want to work in behavioral health units:  40 hour CIT course, if they have not already attended  Regular electronic training seminars  Internal and external training that involves supervising behavioral health inmates	Increase the amount of officers that have attended the 40 hour CIT by 15  Provide specific training related to supervising behavioral health inmates to all officers working in the pod.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit  If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long  Start date: <u>January 1, 2017</u>  Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	Currently only 23 corrections officers have attended the 40 CIT. Currently there is no training in supervising inmates in a behavioral health unit.	Training records
Running behavioral health units that provide	Identify inmates who fit the behavioral health model	Decrease in inmates with behavioral health housed in segregation	<input type="checkbox"/> Output <input checked="" type="checkbox"/> Outcome: Participant satisfaction	<input type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long	Baseline is that all severe	Jail data from headcount sheets, and

EVALUATION WORKSHEET

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE <small>Data and time</small>	G. SOURCE
<p>Inmates socialization, therapy, other outlets, and the setting up of wraparound services as appropriate, helping their transition to general population units and the community. Furthering their chances of successful re-integration into the community after release.</p>	<p>Provide them the ability to be socializing with other behavioral health inmates versus segregation</p> <p>Provide them with activities to educate and better prepare for re-entry, such as self-paced e-workbooks and group therapy</p> <p>Introduce them to resources from Trueblood grant</p>	<p>Reduction in minor/major infractions in the jail</p> <p>Reduction of calls to MHP for inmates in crisis</p>	<p><input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input checked="" type="checkbox"/> Outcome: Practice or behavior</p> <p><input type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:</p> <p><input type="checkbox"/> Fidelity measure</p>	<p>Start date: April 2017</p> <p>Frequency:  <input checked="" type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>behavioral health are segregated. Frequency of reports on these inmates range to 1-2 per day. This includes call to MHP.</p>	<p>infractions written and reports that a MHP was requested.</p>



## Total Agency or Departmental Budget Form

ATTACHMENT E

Agency Name: Kitsap County Sheriff's Office

Project: Behavioral Health Units 189675.46

Accrual

Cash

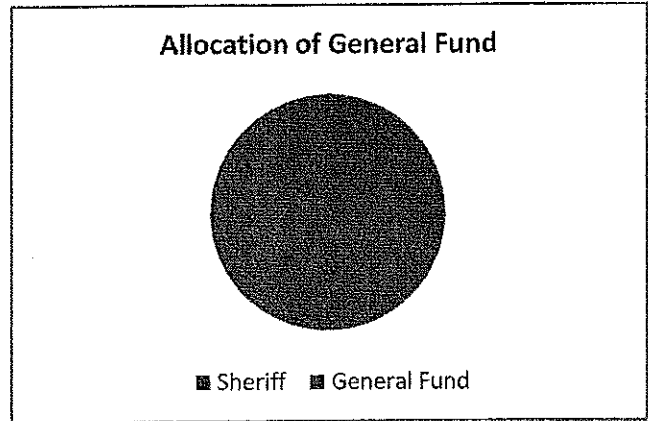
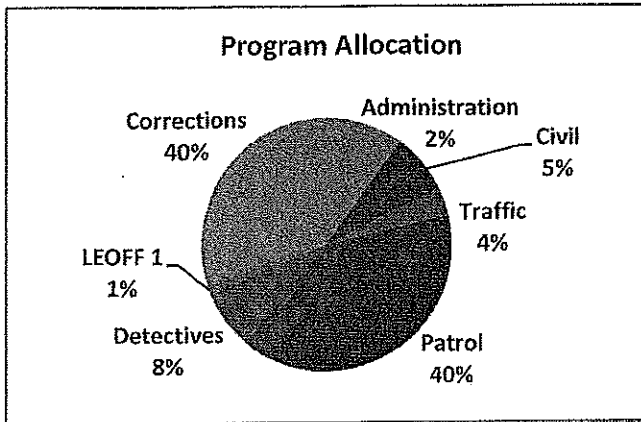
AGENCY REVENUE AND EXPENSES	2016		2017		2018	
	Actual	Percent	Budget	Percent	Budget	Percent
<b>AGENCY REVENUE</b>						
Federal Revenue	\$ 189,675.46	2%	\$ 5,000.00	0%	\$ 1.00	100%
WA State Revenue	\$ 45,229.57	1%	\$ 43,885.00	1%	\$ -	0%
Local Revenue	\$ 6,135,402.90	75%	\$ 6,768,322.00	77%	\$ -	0%
Private Funding Revenue		0%	\$ 1,918,444.00	22%	\$ -	0%
Agency Revenue	\$ 1,806,032.36	22%	\$ -	0%	\$ -	0%
Miscellaneous Revenue	\$ 23,067.87	0%	\$ 17,500.00	0%	\$ -	0%
<b>Total Agency Revenue (A)</b>	<b>\$ 8,199,408.16</b>		<b>\$ 8,753,151.00</b>		<b>\$ 1.00</b>	
<b>AGENCY EXPENSES</b>						
<b>Personnel</b>						
Managers		0%		0%	\$ 1.00	100%
Staff	\$ 18,754,538.70	54%	\$ 19,698,880.00	53%	\$ -	0%
Total Benefits	\$ 7,737,487.02	22%	\$ 8,192,678.00	22%	\$ -	0%
<b>Subtotal</b>	<b>\$ 26,492,025.72</b>	<b>77%</b>	<b>\$ 27,891,558.00</b>	<b>75%</b>	<b>\$ 1.00</b>	<b>100%</b>
<b>Supplies/Equipment</b>						
Equipment	\$ 160,476.62	0%	\$ 185,760.00	0%	\$ -	0%
Office Supplies	\$ 1,308,730.22	4%	\$ 1,353,850.00	4%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 1,469,206.84</b>	<b>4%</b>	<b>\$ 1,539,610.00</b>	<b>4%</b>	<b>\$ -</b>	<b>0%</b>
<b>Administration</b>						
Advertising/Marketing	\$ 4,520.42	0%	\$ 8,500.00	0%	\$ -	0%
Audit/Accounting	\$ -	0%	\$ -	0%	\$ -	0%
Communication	\$ 70,786.47	0%	\$ 71,500.00	0%	\$ -	0%
Insurance/Bonds	\$ -	0%	\$ -	0%	\$ -	0%
Postage/Printing	\$ 38,306.30	0%	\$ 31,850.00	0%	\$ -	0%
Training/Travel/Transportation	\$ 141,217.71	0%	\$ 159,100.00	0%	\$ -	0%
% Indirect	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 254,830.90</b>	<b>1%</b>	<b>\$ 270,950.00</b>	<b>1%</b>	<b>\$ -</b>	<b>0%</b>
<b>Ongoing Operations and Maintenance</b>						
Janitorial Service	\$ -	0%	\$ -	0%	\$ -	0%
Maintenance Contracts	\$ -	0%	\$ -	0%	\$ -	0%
Maintenance of Existing Landscaping	\$ -	0%	\$ -	0%	\$ -	0%
Repair of Equipment and Property	\$ 86,167.12	0%	\$ 163,850.00	0%	\$ -	0%
Utilities	\$ 404,036.87	1%	\$ 470,750.00	1%	\$ -	0%
Other (Describe) Contract Medical	\$ 1,670,460.59	5%	\$ 1,784,900.00	5%	\$ -	0%
Other (Describe) Rental leases	\$ 143,807.75	0%	\$ 160,900.00	0%	\$ -	0%
Other (Describe) Capital Outlay, dues, Intergov	\$ 291,513.95	1%	\$ 798,278.00	2%	\$ -	0%
<b>Subtotal</b>	<b>\$ 2,595,986.28</b>	<b>8%</b>	<b>\$ 3,378,678.00</b>	<b>9%</b>	<b>\$ -</b>	<b>0%</b>
<b>Other Costs</b>						
Debt Service	\$ 9,269.78	0%	\$ 9,600.00	0%	\$ -	0%
Other (Describe) Interfund Billing, computers,	\$ 3,611,182.55	10%	\$ 4,094,163.00	11%	\$ -	0%
<b>Subtotal</b>	<b>\$ 3,620,452.33</b>	<b>11%</b>	<b>\$ 4,103,763.00</b>	<b>11%</b>	<b>\$ -</b>	<b>0%</b>
<b>Total Direct Expenses</b>	<b>\$ 34,432,502.07</b>		<b>\$ 37,184,559.00</b>		<b>\$ 1.00</b>	

**NOTE: If an expenditure line item is larger than 10% of the budget, include an attachment showing detail.**

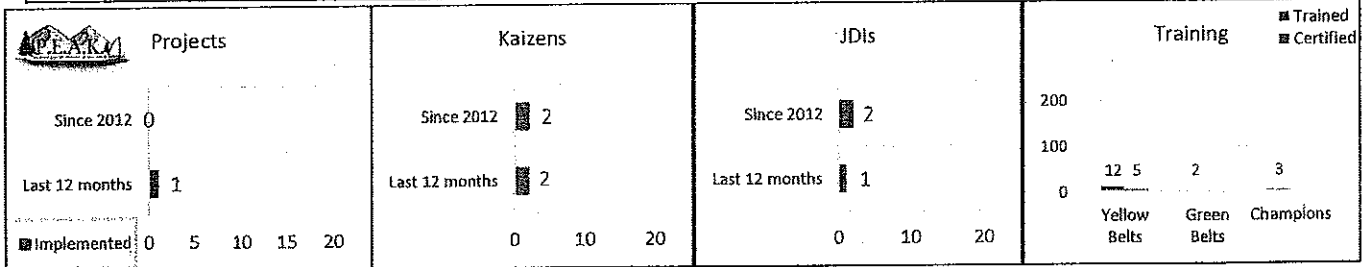


**Mission:**

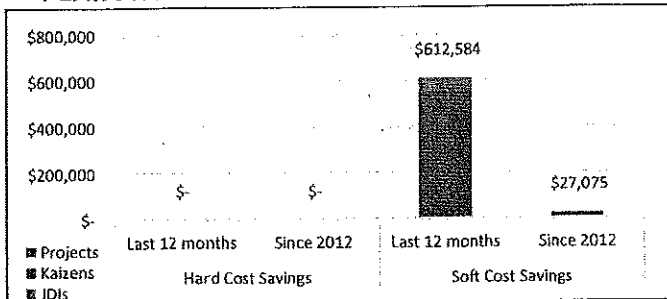
Through our vision and values, we are dedicated to providing quality public safety services in partnership with our diverse communities.



Revenue	2016	2017	Change
Taxes	\$2,194,221	\$2,904,879	32%
License and Permits	\$80,000	\$90,000	13%
Intergovernmental	\$2,892,181	\$3,912,328	35%
Charges for Services	\$141,744	\$141,744	0%
Fines and Forfeits	\$16,700	\$16,700	0%
Misc/Other	\$1,471,500	\$1,687,500	15%
<b>TOTAL REVENUE</b>	<b>\$6,796,346</b>	<b>\$8,753,151</b>	<b>29%</b>
Expenses	2016	2017	Change
Salaries & Benefits	\$26,547,665	\$27,891,558	5%
Supplies	\$1,412,650	\$1,539,610	9%
Services	\$2,928,401	\$2,973,100	2%
Interfund Payments	\$3,721,292	\$4,094,163	10%
Other Uses	\$41,600	\$686,128	1549%
<b>TOTAL EXPENSES</b>	<b>\$34,651,608</b>	<b>\$37,184,559</b>	<b>7%</b>
<b>FTEs (Full Time Equivalents)</b>	<b>242.25</b>	<b>242.25</b>	<b>0.00</b>



**PEAK PROGRAM COST SAVINGS**



**KEY OUTCOMES**

- 2015 and 2016 – Completed strategic plan partnering with members of the community, county government, and local law enforcement partners.
- 2016 – Conducted a cost/benefit analysis of Telestaff. Requested purchase of Telestaff again in 2017.
- 2016 – Conducted three Kaizens including booking, training, and financial processes.
- 2016 – Implemented CRM to track complaints.
- 2016 – Focused on more productive recruitment and effective and efficient background and hiring process.

## Special Project Budget Form

Agency Name: Kitsap County Sheriff's Office

Project: Behavioral Health Units

Enter the estimated costs associated with your project/program	Total Funds		Requested Funds		Other Matching Funds	
	Budget	Percent	Budget	Percent	Budget	Percent
<b>Personnel</b>						
Managers	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Staff	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Total Benefits	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ 40,840.00	54%	\$ 40,840.00	54%	\$ -	#DIV/0!
Office Supplies	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Other (Describe):	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 40,840.00</b>	<b>54%</b>	<b>\$ 40,840.00</b>	<b>54%</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Audit/Accounting	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Communication	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Insurance/Bonds	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Postage/Printing	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Training/Travel/Transportation	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
% Indirect (Limited to 10%)	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Other (Describe):	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Maintenance Contracts	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Utilities	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Other (Describe): Painting(labor and supplies)	\$ 35,000.00	46%	\$ 35,000.00	46%	\$ -	#DIV/0!
Other (Describe):	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Other (Describe):	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 35,000.00</b>	<b>46%</b>	<b>\$ 35,000.00</b>	<b>46%</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Other (Describe):	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 75,840.00</b>		<b>\$ 75,840.00</b>		<b>\$ -</b>	

NOTE: Indirect is limited to 10%

## Project Salary Summary

### Description

Number of Professional FTEs	0.00
Number of Clerical FTEs	0.00
Number of All Other FTEs	0.00
<b>Total Number of FTEs</b>	<b>0.00</b>

### Salary Information

Salary of Executive Director or CEO	\$	-
Salaries of Professional Staff	\$	-
Salaries of Clerical Staff	\$	-
Other Salaries (Describe Below)	\$	-
Description:	\$	-
Description:	\$	-
Description:	\$	-
<b>Total Salaries</b>	<b>\$</b>	<b>-</b>
Total Payroll Taxes	\$	-
Total Cost of Benefits	\$	-
Total Cost of Retirement	\$	-
<b>Total Payroll Costs</b>	<b>\$</b>	<b>-</b>



OFFICE OF  
Gary Simpson

# KITSAP COUNTY SHERIFF

614 DIVISION ST. MS-37 • PORT ORCHARD, WASHINGTON 98366 • (360) 337-7107 • FAX (360) 337-5780

July 31, 2017

Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

RE: Kitsap County Sheriff's Office Behavioral Health Units

I am writing to express the commitment of the Kitsap County Jail to develop a behavioral health pod. The project we are proposing will allow the jail to remain progressive, and at the same time keep the community, my staff, and the behavioral health inmates safe.

Historically the jail has been the place where behavioral health individuals can be brought to when there is no place else for them to go. We continue to applaud the efforts of Kitsap County and the Citizens Advisory Committee for your commitment in allocating funds that provide resources, but we still face challenges. We house many that fit into the behavioral health category, and many are considered high utilizers of the system. We believe that by transitioning our segregation units to more of a therapeutic environment, we can enhance the chances of the individuals with behavioral health issues to better succeed in the community.

We are committed to train our staff on crisis intervention and supervising behavioral health inmates, but we cannot do this alone. We would like to transition from the standard segregation model. This transition would be done by painting the units and cells colors that are more calming, offering the behavioral health inmates activities, and continuing to invite stakeholders in to provide resources these behavioral health people need.

In closing I would like to say that I am proud that my staff are committed to making positive changes in the community. They realize their role in Kitsap County is one of importance, and they continue to make a positive effort for change.

Sincerely,

A handwritten signature in black ink, appearing to read "Mark Rufener". The signature is fluid and cursive, written over a white background.

Mark Rufener  
Chief of Corrections  
For Sheriff Gary Simpson

June 28, 2017

Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

Dear Citizens Advisory Committee,

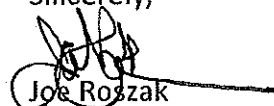
I am writing to express my support for the Kitsap County Jail to develop behavioral health housing units within their facility. The behavioral health units will be predominantly dedicated for the treatment of inmates with specialized needs, and whom cannot be housed in general population.

Research shows segregating inmates, especially those with mental illness, often increases negative behavioral problems and self-harming actions. In an attempt to step away from the standard isolation housing model, the Kitsap County Jail wants to take a progressive correctional approach and create housing units that are more calming, have more activities available, and will allow inmates with behavioral health concerns to socialize with each other. The units will not only help the inmates transition into general population faster, we anticipate an easier transition into the community upon release.

The plan developed by the Kitsap County Jail is not just to refurbish the jail's housing units. Inmates in these units will be provided the opportunity for individual and group therapy as appropriate with the various jail mental health professionals. Additionally, the jail plans to continue to work with community partners for wrap around services to help ensure success once released from incarceration. The plan also includes corrections staff that work in the jail based housing units to receive additional training, ie crisis intervention, to support the care and custody of this population.

I ask that you please consider allocating funds for this innovative approach that will be beneficial to the inmates in the jail with behavioral health needs. Specific to our commitment of services provided inmates in jail, KMHS anticipates some of the individuals housed will receive services provided through the Trueblood Jail Diversion Team (Screening, BH Court Liaison, Peer Re-entry Supports) as well possible services provided through a KMHS staff position currently located at the jail that conducts contractually identified duties under the Hargrove Act. We appreciate the opportunity to work together for the collective impact this new endeavor will have on the inmates receiving services and the community as a whole.

Sincerely,



Joe Roszak  
Chief Executive Officer



**KITSAP  
MENTAL  
HEALTH  
SERVICES**

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*President*

Leon Smith  
*President-Elect*

Peter A. Douvis  
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Carolyn Powers  
Wes Tallman  
Dennis Veloni

Joe Roszak  
*Chief Executive Officer*

*The mission of Kitsap  
Mental Health Services  
is to shape the future of  
mental health through  
state of the science  
service delivery,  
community partnerships  
and advocacy.*

Ph (360) 373-5031  
TDD (360) 478-2715  
Fax (360) 377-0458

5455 Almira Drive NE  
Bremerton, WA 98311-8331

[www.kitsapmentalhealth.org](http://www.kitsapmentalhealth.org)



*KMHS does not discriminate against  
any person on the basis of race, color,  
national origin, sex, disability, marital  
status, religion, ancestry, age, veteran  
status, or other protected status under  
applicable laws in its programs and  
activities.*

July 24, 2017

## Kitsap County

Letter of Commitment to provide Mental Health support for Behavioral Health Unit at Kitsap County Jail.

I am writing to express my support and commitment for the Behavioral Health Unit at Kitsap County Jail.

Correct Care Solutions, contracted through the Kitsap County jail, supports the Kitsap County Jails grant proposal because it is critical to have specialized programming and housing which effectively addresses the needs of individuals with behavioral health diagnoses while they are in custody. The population of jail has seen an increase in mental health needs across the board; part of this increase is those individuals with significant mental health needs who might require more supervision and boundaries than the general population. Many times, it is unavoidable to have these individuals in segregated housing to ensure safety and decrease risks to vulnerable adults. It is in the best interest of the community to have housing options within the jail that best meet the needs of this population. Programs and interventions such as these decrease safety concerns by holding these individuals appropriately accountable, as well as, providing appropriate supportive services for increased safety and continuity of care.

Correct Care Solutions, contracted through the Kitsap County jail, will commit the following resources to the proposal submitted by Kitsap County Jail:

- Continued support and intervention with residents who struggle with significant mental health.
- Crisis Management support and intervention.
- Suicide assessment and intervention.
- Training for officers in helpful and appropriate interventions and approaches to use with individuals with significant mental illness.

Correct Care Solutions, contracted through the Kitsap County jail, will provide the services of the Mental Health Coordinator who will be responsible for maintaining contact and collaborating resources with the Behavioral Health Unit and its staff. The Mental Health team will consult as needed with classification officers to appropriately identify individuals who might benefit from this type of environment. We believe this will provide a community who works collectively to redirect and restore the lives of adult participants and to reduce the likelihood of their return the justice system.

We believe our support and commitment will significantly improve the availability of specialized mental health housing in the county jail and we look forward to working with you on this exciting endeavor.

Thank you,

A handwritten signature in black ink, appearing to read "Elissa E. Baker LMHC". The signature is fluid and cursive, with the initials "LMHC" written in a slightly different style at the end.

Elissa E. Baker, LMHC

Correct Care Solutions

Kitsap County Jail

360-337-7019





# Sheriff's Office - 2016

Citizens of Klickitat County

**Sheriff**  
(Gary Stinson)  
C-1

**Under Sheriff**  
(Pat Goss)  
C-2

Office  
Public Affairs  
C-3

Office  
Administration  
C-4

Office  
Fiscal Services  
C-5

**Chief Of Patrol**  
(Steve Erickson)  
C-6

Administrative  
Support  
C-7

**Chief Of Investigations and Support Services**  
(David Hill)  
C-8

**Chief Of Corrections**  
(Mark Hoffman)  
C-9

Administrative  
Support  
C-10

Support Services  
Specialists  
C-11

Patrol  
Troop A  
C-12

Patrol  
Troop B  
C-13

Patrol  
Troop C  
C-14

Patrol  
Troop D  
C-15

Patrol  
Troop E  
C-16

Detective  
Troop A  
C-17

Detective  
Troop B  
C-18

Detective  
Troop C  
C-19

Detective  
Troop D  
C-20

Detective  
Troop E  
C-21

Detective  
Troop F  
C-22

Detective  
Troop G  
C-23

Investigative  
Support Services  
C-24

Civil Control  
Services  
C-25

Support Services  
Supervisor  
C-26

Civil Control  
Services  
C-27

Civil Control  
Services  
C-28

Civil Control  
Services  
C-29

Support  
Detachment  
C-30

Support  
Detachment  
C-31

Support  
Detachment  
C-32

Record Investigation  
Office  
C-33

Alternative  
Training Services  
C-34

Correctional  
Officers  
C-35

Chaplain  
C-36

Classification  
Program Services  
C-37

Correctional  
Officers  
C-38

Operations  
Detachment  
C-39

Operations  
Detachment  
C-40

Operations  
Detachment  
C-41

= Commissioned  
 = Non-commissioned