



Mason Thurston
System of Care Partnership (SOCP)
Regional Family Youth System Round Table Partnership
August 27, 2021 Summary Meeting Notes

A Youth Tri-lead called the meeting to order and made the following requests and announcement for participants to:

- mute their device when not speaking;
- avoid over-talking by waiting for others to finish speaking;
- use chat or raise a hand if using video or say your name before speaking if not using video, when you want to make a comment;
- stay on topic as we move through the agenda;
- feel free to share a question or comment after each agenda item.

The Youth Tri-lead then asked the convener to read through the roster to sign in participants and then read the vision, mission and eight-part comfort agreement.

A Family Tri-lead then read the goals for the day;

- Use of Force & Crisis Response
- Substance Use Disorder Treatment Information
- Share Time

A System Tri-lead let the group know that Sgt. Jason Casebolt with the Thurston County Sheriff's Office would share information about the new laws and response to crisis situations. Sgt. Casbolt's email address: Jason.Casebolt@co.thurston.wa.us

Following are highlights from that conversation:

- Sgt. Casebolt points out that sheriff's deputies will still respond to calls but the new laws have greatly restricted their ability to proceed and they will sometimes need to walk away when they feel that the situation will end up with a use of force. Restrictions mean that there is no ability to detain without probable cause for arrest.
 - When responding to calls for individuals in crisis, if the person is not willing to go voluntarily, there isn't much we can do. We can ask the person if they agree and if they do, then it's easy. But if the person says no it could end up in a use of force confrontation.
 - The Involuntary Treatment Act says law enforcement could assist when an individual poses a threat to self or others and transport the individual to the hospital, but the new use of force law took that assistance away.

- The new law says there will be potential criminal sanctions for officers if they are not acting in good faith, but they are looking for clarification.
- One law says you have to do it and another says you are prohibited. It is a complicated mess because there are conflicts in the laws. One thing is clear, that the new laws encourage less lethal options.
- The Catholic Community Services (CCS) participant and stated that this is a change for our culture and thanked the deputy for being here. Then asked what the deputy would like us (CCS) to know as crisis partners and possible scenarios. Also, what are next steps to help clarify the disconnect between the law and the bill.
- Sgt. Casebolt responded with scenarios. We meet a Designated Crisis Responder (DCR) in the field and I've got a signed order and they go to contact that person and is willing. The individual knows they are in crisis and will go voluntarily, so we detain the individual and take them to St. Peter's. Under the new bill we would go in person and the individual becomes confrontational and says, I'm not going anywhere-it is possible that it could end up with use of force. When this happens, I don't have a legal right to make them do something they are not willing to do. We could be liable if we force them to. Criminally and civilly liable.
 - We need clarification between the Involuntary Treatment Act (ITA) and House Bill 1310 and we are floundering right now. Link for House Bill 1310: <https://app.leg.wa.gov/billsummary?BillNumber=1310&Year=2021&Initiative=false>
 - ITA allows us to detain someone who is imminent threat to self or others and take them in for treatment. Link to the emergency detention of persons with behavioral health disorders-Procedure. RCW (Revised Code of Washington) 71.05.153
 - <https://app.leg.wa.gov/RCW/default.aspx?cite=71.05.153>
Effective until July 1, 2026.
- Another scenario from Sgt. Casebolt: A guy tries to light himself on fire and starts running down the highway (state route 12) naked. We had to use a taser and take him to St. Peter's. The ITA allows us to use reasonable force in protecting the community, but House Bill 1310 is in direct conflict with this. It allows us to walk away in certain situations, not use force or take it to that level. I don't think that was their (lawmakers) intention, but we don't want to subject people (deputies) to civil or criminal liability.
 - Sad part of it is that if someone is gravely disabled or living in squalor, it doesn't allow us to transport them to the hospital.
 - If we could get some wording maybe about good faith, but liability is so high at this point.
- The CCS participant share that in some ways, backing away in a crisis situation is a very effective technique, actually best practice. The first thing we teach staff to do is to give space and time to a person in crisis. Often that's all you need to do to de-escalate.
- A parent stated that she understands that House Bill 1310 and ITA are in conflict and asked if Sgt. Casebolt knows who sponsored the bill and is the DCR on their own.
- The deputy (Casebolt) responded that they would never leave a DCR in a dangerous situation, but we'll tell them it's time for us to go and we're doing this also with the fire

department. We've had many meetings with the DCR and fire department and understand it is a difficult situation. They may be put in jeopardy and we're trying to come up with a solution including forming a crisis response team like they have in the city of Olympia. The legislature talked about response with crisis team but it would be done a long time afterwards. We've taken law enforcement out of that role but placed no one in their place.

- The parent mentioned the Cahoots program and the deputy said they are looking to put that together, but somebody has to get hurt before that will be a reality. The House Bill (1310) says if a person is an immediate threat to themselves or others and we were to go out to the house and the person says they're going to kill themselves, that would be an imminent or immediate threat.
- A parent shared that they have a child with Autism and is aggressive when they are upset. They decide to walk down the road in the middle of the street. I call law enforcement and they won't respond.
- Sgt. Casebolt responds that this is a difficult situation and there is another bill about juveniles. We would not be arresting this child and would not be able to use force in that situation. We could attempt to detain them with no use of force. But officers are at risk if they engage with your child and he punches or kicks an officer and they use force, then they're not covered and have placed themselves in a situation where they were not justified to detain because there was no cause. Some departments have gone too far in the opposite direction and don't want to respond. The legislature was clear that they do not want force used against juveniles.
 - The new bills have taken a lot away also. For example, in the situation when a youth is a runaway we would normally detain them or call Child Protective Services if the parents declined them. We cannot use force if the juvenile declines even though this is a dangerous situation.
- Another parent shared that he has a son with Autism and there are times when he may need help with his behaviors.
- The deputy responded that hopefully their (parent's) police department will have the tools to deal with different situations. Training will be required by the Criminal Justice Training Commission (CJCT) <https://cjtc.wa.gov/> and we've employed tactics that are helpful in those situations.
- A parent said that officers should be getting paid more if they are getting more training and dealing with all the extra mental health services. 'I'm a domestic violence survivor and unfortunately I've been put into a mental health crisis over these bills. I have a 99 year protection order and want people to know how much this is affecting everyone. It has thrown myself and my children into a mental health crisis due to not enough protection related to no probable cause, no protection and no team to protect us. I want people to realize this.
- The CCS participant asked if there was anyone in the group that supports people affected by domestic violence.
 - The Squaxin Island Tribe participant said that they do but there are some restrictions including a certain radius.

- Sgt. Casebolt responds that next steps are related to clarify things. The Washington Association of Sheriffs and Police Chiefs <https://www.waspc.org/> to include the governing body have raised concerns as well as the DCR's and governor's office <https://www.governor.wa.gov/> are to clear up obscurities in these bills and we are hoping to see clarification in the next legislative session (2022). It's in their court now.
- The Squaxin Island Tribe participant said that this has been politicized, some weaponize it, some work to de-escalate and some see it as defunding. The officers on the Andy Griffith show were experts in de-escalating. Andy would try to de-escalate and those were simpler times. Different agencies were trying to implement it. As a Native person and with Native children, I'm scared and we don't call the police because we don't want someone to get shot. A family who had an elder, and a diabetic elder can look like psychosis with a non-Native partner. Native women are criminalized as victims. I hope the bill will help us overcome these things and Andy Griffith will show up. I have seen some great police calls and it's worked out well when the officer knows the person and they get into the ambulance. In general, I support this and would not want to see officers not get paid. I want to see people getting help. I know that you are an officer and not a mental health counselor.
- A parent asked if they are responsible for what happens if we cannot do anything and you cannot do anything.
- Sgt. Casebolt responded saying that the parent is responsible for their children until they are age 18. But if you and we are unable to control a situation that the liability would not fall on you. The liability would probably fall on law enforcement. I think you would have a good argument that you would not be responsible.
- The same parent asked about school situations and asked who is responsible. No response unless they are ruining property or hurting someone? I guess parents are lucky if they have a special needs kid. I don't have to feel bad about keeping my child home.
- Sgt. Casebolt responded that he is a former school resource officer and this is a good question. This is something we are dreading in September when we're back in that situation. We are anticipating not good things. But there is training out there and resource officers are trained with some exceptions.
- Another parent said that her fear is about when my child needs to be de-escalated. How can we prove ourselves as parents if we de-escalate and tackle them to the ground, parents can end up in courts with that. I haven't used force but she whacked me and someone could assume I've abused her/them.
- Sgt. Casebolt responded by asking if the parent was concerned that if they use force against the child, in that situation? Retaliating is kind is not okay, but if you need to restrain your child, you have the right to discipline within reason. There is a law that gives you that right: <https://app.leg.wa.gov/RCW/default.aspx?cite=9A.16.100>
The optics don't look good but in an investigation and as a parent/citizen protecting yourself, attempting to de-escalate, I would hope no parent would end up in the legal system. We see it both ways, my child's out of control, threatening and they slapped them in the mouth (within reason), mother punches child and breaks their nose (not within reason).

- The same parent asked if there are any ID cards that show someone has Autism and some responded with ideas about bracelets and cards.

A Family Tri-lead then let the group know that Sara Ellsworth with Educational Services District 113 (ESD 113) would be presenting information about Substance Use Disorder treatment programs. Highlights below:

- Sara shared some background on ESD's and that there are nine across the state. Link: <https://www.k12.wa.us/about-ospi/about-school-districts/educational-service-districts>
ESD 113 serves five counties. Pacific and Mason are shared with other ESD's. Mason county is half ESD 113 and half ESD 114.
- Sara let the group know that there are other providers but she is presenting programs that provide both Substance Use Disorder treatment and mental health treatment.
 - Link for True North Program: <https://www.truenorth113.org/>
 - Link for Providence St. Peter's Chemical Dependency Center: <https://www.providence.org/locations/wa/st-peter-hospital/chemical-dependency-center#tabcontent-1-pane-2>
- Sara mentioned Evidence Based Practices (EBP's) and that behavioral health is critical in schools. Also, that Washington state students experience significant mental health needs, do not connect with services in the community and reference the 2018 Healthy Youth Survey (link below).
 - <https://guides.lib.uw.edu/hsl/ebp/learn>
 - <https://www.doh.wa.gov/DataandStatisticalReports/DataSystems/HealthyYouthSurvey>
 - Depression and anxiety don't necessarily translate to a diagnosis.
 - The real issue is when there are high mental health needs and substance use is introduced into that situation. All of these issues are interconnected and need to be targeted early.
 - Youth with co-occurring needs are 80% likely to drop out of school.
- Assessments/Evaluations are provided and locations are listed on the website (link above). There is a referral form for parents, but the phone number on the site is always the quickest way to get things started and normally youth can get in within a couple of days.
- The Providence St. Peter's treatment program on College Street (link above) was presented next with a PowerPoint that was sent to the group and can be requested by contacting the convener: familyalliancewashington@gmail.com
 - Highlights as follows:
 - This program has a new director for youth and adult services, Tendai Masiriri and here is an excerpt from the PowerPoint:

- Tendai is our new Director of Behavioral Health and joined us last year. He is responsible for the management and operation of behavioral health services including St Peter Hospital psychiatric inpatient, psychiatric emergency services, intensive outpatient programs for substance use disorders and mental health treatment, older adult outpatient services, Providence Medical Group Psychiatry Clinics for the Southwest Service Area, and Providence Community Care Center in Olympia
- This is an intensive outpatient treatment program and uses Seven Challenges modeled on Twelve Step programs:
 - 1. We decided to open up and talk honestly about ourselves and about alcohol and other drugs.
 - 2. We looked at what we liked about alcohol and other drugs, and why we were using them.
 - 3. We looked at our use of alcohol and other drugs to see if it has caused harm or could cause harm.
 - 4. We looked at our responsibility and the responsibility of others for our problems.
 - 5. We thought about where we seemed to be headed, where we wanted to go, and what we wanted to accomplish.
 - 6. We made thoughtful decisions about our lives and about our use of alcohol and other drugs.
 - 7. We followed through on our decisions about our lives and drug use. If we saw problems, we went back to earlier challenges and mastered them.
- The Squaxin Island Tribe participant mentioned that they had never had much luck at St. Pete's or Providence facilities. This is giving me hope. I'm interested in the slides.
- A parent comments: I think this is great information as the school year is rapidly approaching and there will be more in-person opportunities to observe any problematic behavior or direct student requests for help at school.
- Other questions from parents:
 - Are these (True North) resources at the schools? Through the counselors?
 - Sara responded yes, that the True North student assistance counselors provide information/resources. This school year the ESD network will be expanding behavioral health services in tier one and tier two, expanding to 96 new student assistance professionals for mental health treatment.
 - From the convener: The True North website <https://www.truenorth113.org/> provides information about locations where services are provided as well as contact information. Locations are listed by county and individual school buildings.

- From the Convener: You can use this link to find a graphic for Multi-Tiered Systems of Support using this link and scrolling down:
 - <https://www.pbisrewards.com/blog/what-is-mtss/>
 - Are private schools or homeschoolers registered with their district provided with these resources?
 - Sara answered yes, that youth usually receive services at one of our branch offices. They may also choose to engage in telehealth, which is always an option and True North has a day treatment program.
 - We were having trouble and didn't get much help.
 - Sara answered that COVID has impacted engagement, but school districts have provided space and support for these services.
- The Squaxin Island Tribe participant asked about whether youth could still sign in on their own for these programs?
 - Sara then talked about the age of consent (13) and there have also been changes because of Family Initiated Treatment. We (True North) appreciate Family Initiated Treatment as an opportunity for parents to get their kid into treatment. But more often we see parents who do not want their kid in treatment than want to get them into treatment. 13 year-olds get to decide if their parents will be involved and we talk with kids about how that might be beneficial. Sara offered her email sellsworth@esd113.org if anyone has questions.

A Family Tri-lead explained introduced share time and explained that the original purpose was to not only share program updates, but also any success or concern you want to bring to the group.

- The Squaxin Island Tribe participant shared that they are running an emergency rental assistance program. Tribal members are prioritized and then others can apply, including those families that experience domestic violence. Feel free to contact Charlene Abrahamson at cabrahamson@squaxin.us for more information or if you know of someone who may be eligible.
- Family Alliance for Mental Health reminded the group about their Thursday evening support group for all parents. Visit www.familyallianceformentalhealth.com for more information about support and resources.
- One of the youth tri-leads reminded the group about Youth-Only meetings on first Fridays at 3 pm. Requests for youth to be added to the invitation list can be sent to: familyalliancewashington@gmail.com
- A Family Tri-lead shared that she was impressed by the conversation with Sgt. Casebolt. She also shared that she is in recovery from COVID and feeling better and a system participant thanked her for sharing.
- Another parent shared that a parent was not at the meeting because her husband has COVID.

The meeting was adjourned after the Family Tri-lead thanked everyone for their participation and it was announced that the next meeting would be on September 24th.

