



LYNNWOOD CITY COUNCIL

Work Session

City Hall Council Chambers

19100 44th Ave W

Lynnwood WA 98036

TUESDAY, JUNE 1, 2021

6:00 PM

-
1. Roll Call
 2. Oath of Office
 - A. Oath of Office - Council Position #2
Stephen Moore, Lynnwood Municipal Court Judge
 3. Work Session Item
 - A. Briefing: Regional Growth Center Subarea Planning
Ashley Winchell, AICP, Community Planning Manager and Karl Almgren, AICP,
City Center Program Manager
[05-17-2021_COUNCIL PPT PRESENTATION_final2.pdf](#)
 - B. Discussion: New drug possession laws
Council President Hurst
[ESB5476.pdf](#)
 - C. Briefing No. 4/6: Transportation; Operations and Maintenance Update
Public Works Director Franz and Operations and Maintenance Manager Jared
Bond
[Transportation O&M Council briefing 6 1 2021.pdf](#)
 4. Mayor Comments and Questions
 5. Council Comments

Adjourn

CITY COUNCIL 2.A
CITY OF LYNNWOOD
CITY COUNCIL

TITLE: Oath of Office - Council Position #2

DEPARTMENT CONTACT: Karen Fitzthum, City Council

SUMMARY:

Judge Moore to administer the Oath of Office for Council Position #2

DEPARTMENT ATTACHMENTS

Description:

CITY COUNCIL 3.A
CITY OF LYNNWOOD
CITY COUNCIL

TITLE: Briefing: Regional Growth Center Subarea Planning

DEPARTMENT CONTACT: Ashley Winchell, Development and Business Services

SUMMARY:

This agenda item is to brief the City Council on the upcoming Regional Growth Center Subarea Plan and planning for Sound Transit's Everett Link Extension.

DEPARTMENT ATTACHMENTS

Description:

[05-17-2021_COUNCIL PPT PRESENTATION_final2.pdf](#)



LYNNWOOD
WASHINGTON

A great deal more

Regional Growth Center Subarea Planning

City Council
June 1, 2021

*Ashley Winchell, AICP, Community Planning Manager
Karl Almgren, AICP, City Center Program Manager*

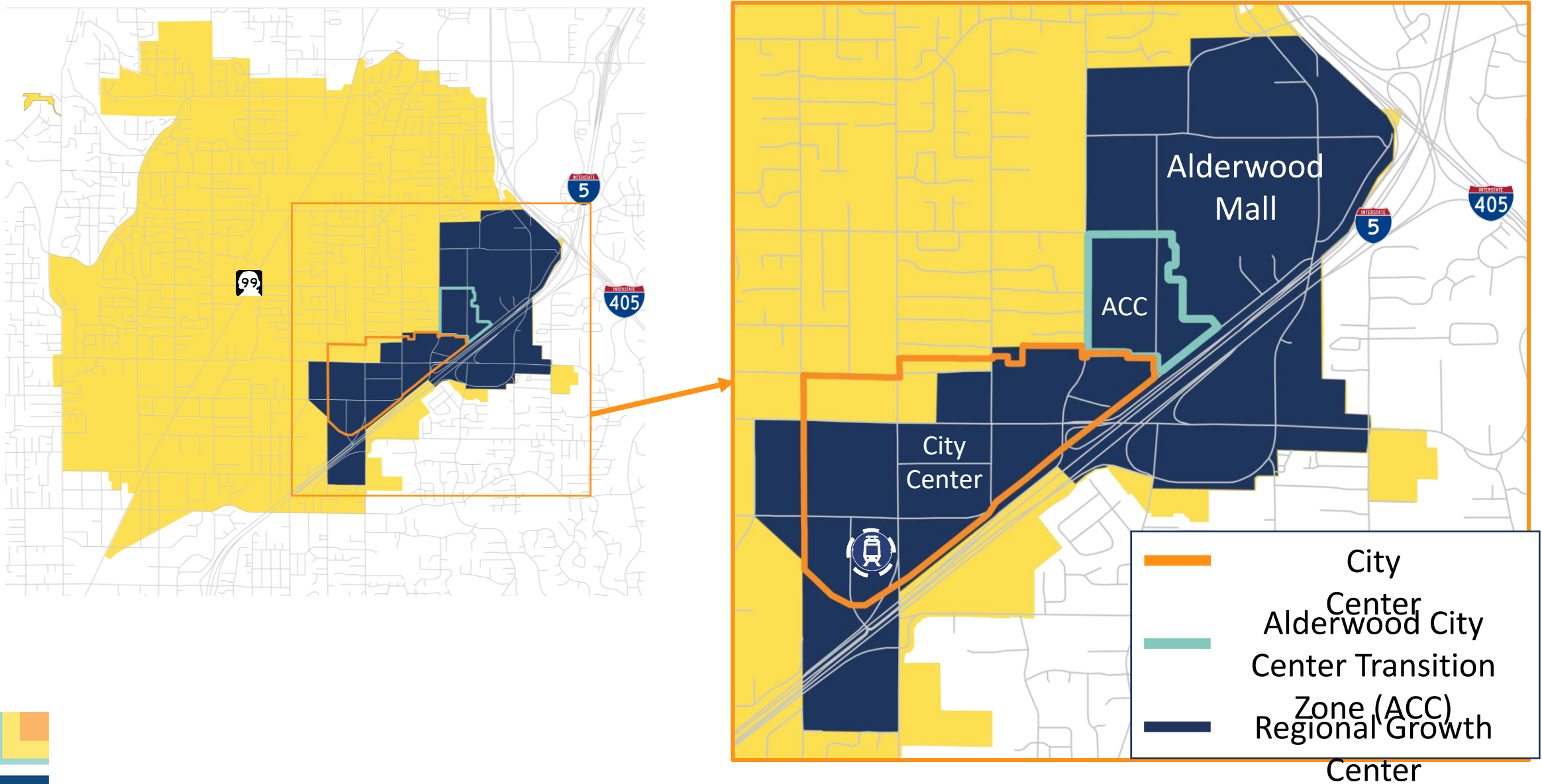
What is a Regional Growth Center?

- Puget Sound Regional Council
- Metro, Urban, Industrial
- Where are other Regional Growth Centers (RGC)?
 - Cascade Industrial Center
 - Everett Metro
 - Paine Field/Boeing
 - Lynnwood & Canyon Park



- Urban Growth Area
- Regional Growth Center - Urban
- Regional Growth Center - Metro
- Manufacturing Industrial Center - Growth
- Manufacturing Industrial Center - Employment

Where is the Regional Growth Center?



Framework

Growth Management Act (GMA)

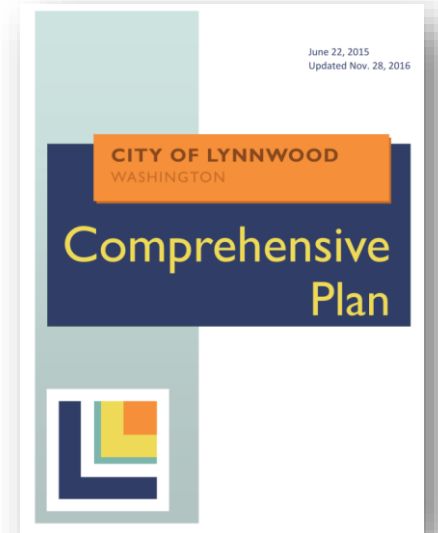
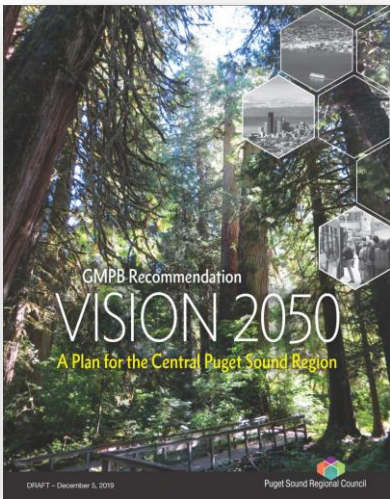
Multicounty Planning Policies (MPPs)

Countywide Planning Policies

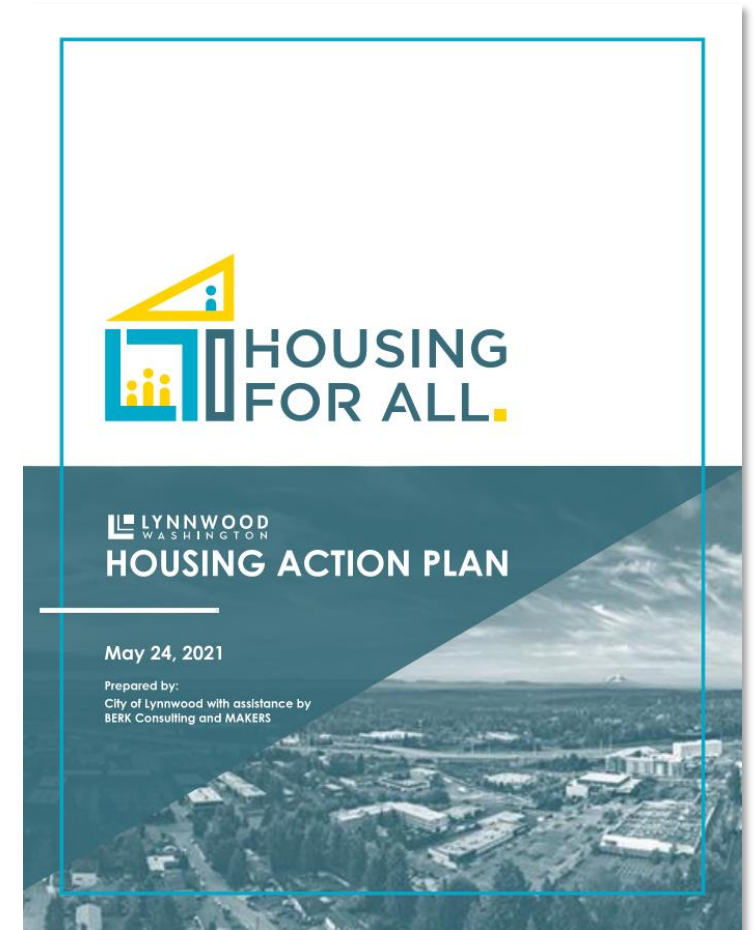
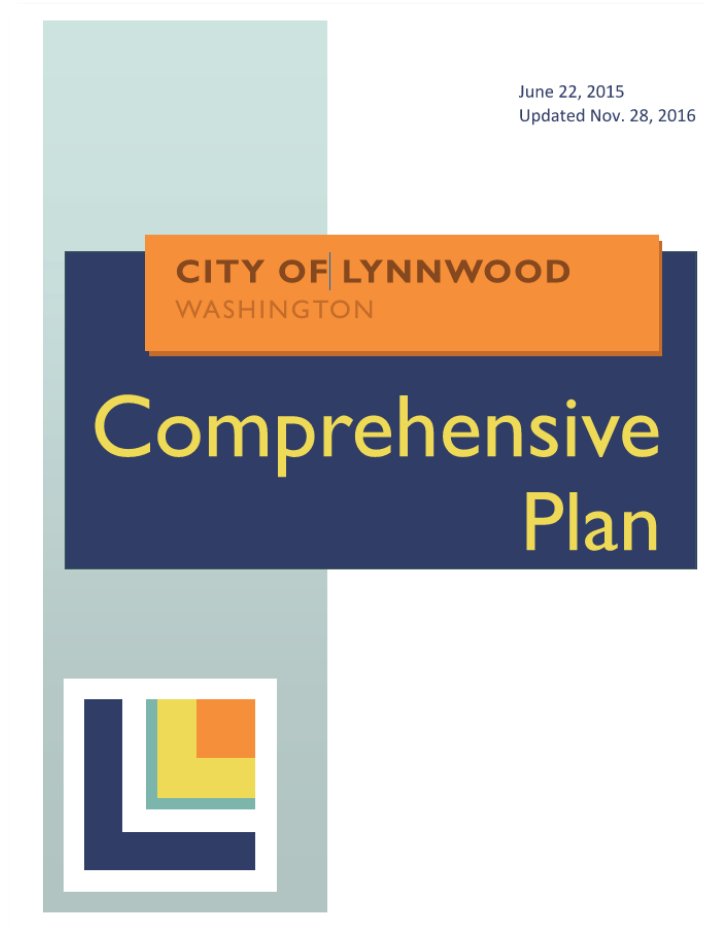
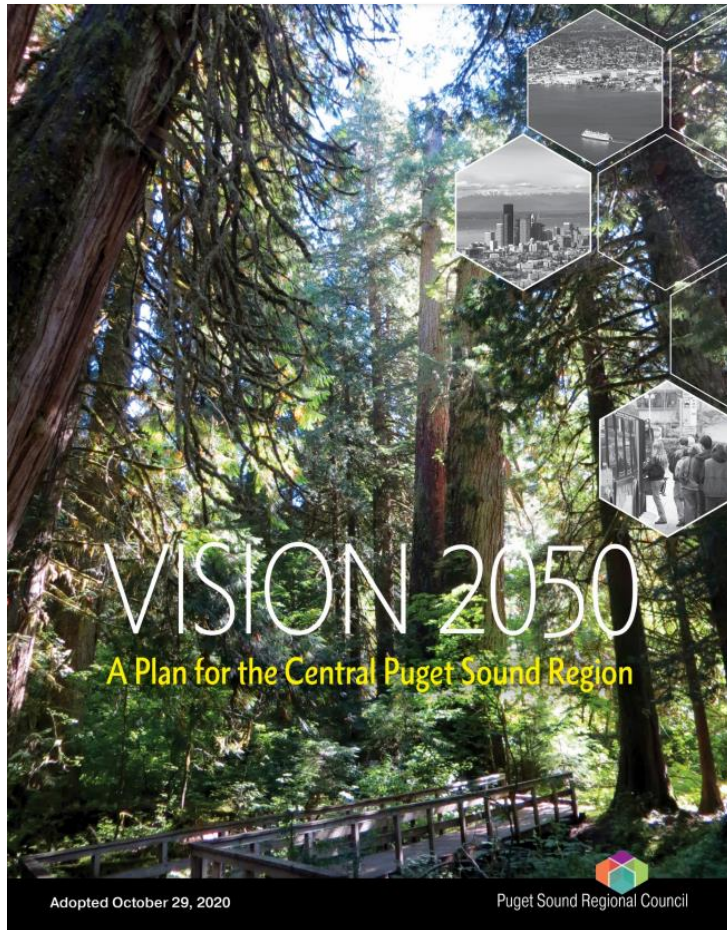
Lynnwood
Comprehensive Plan

Regulations

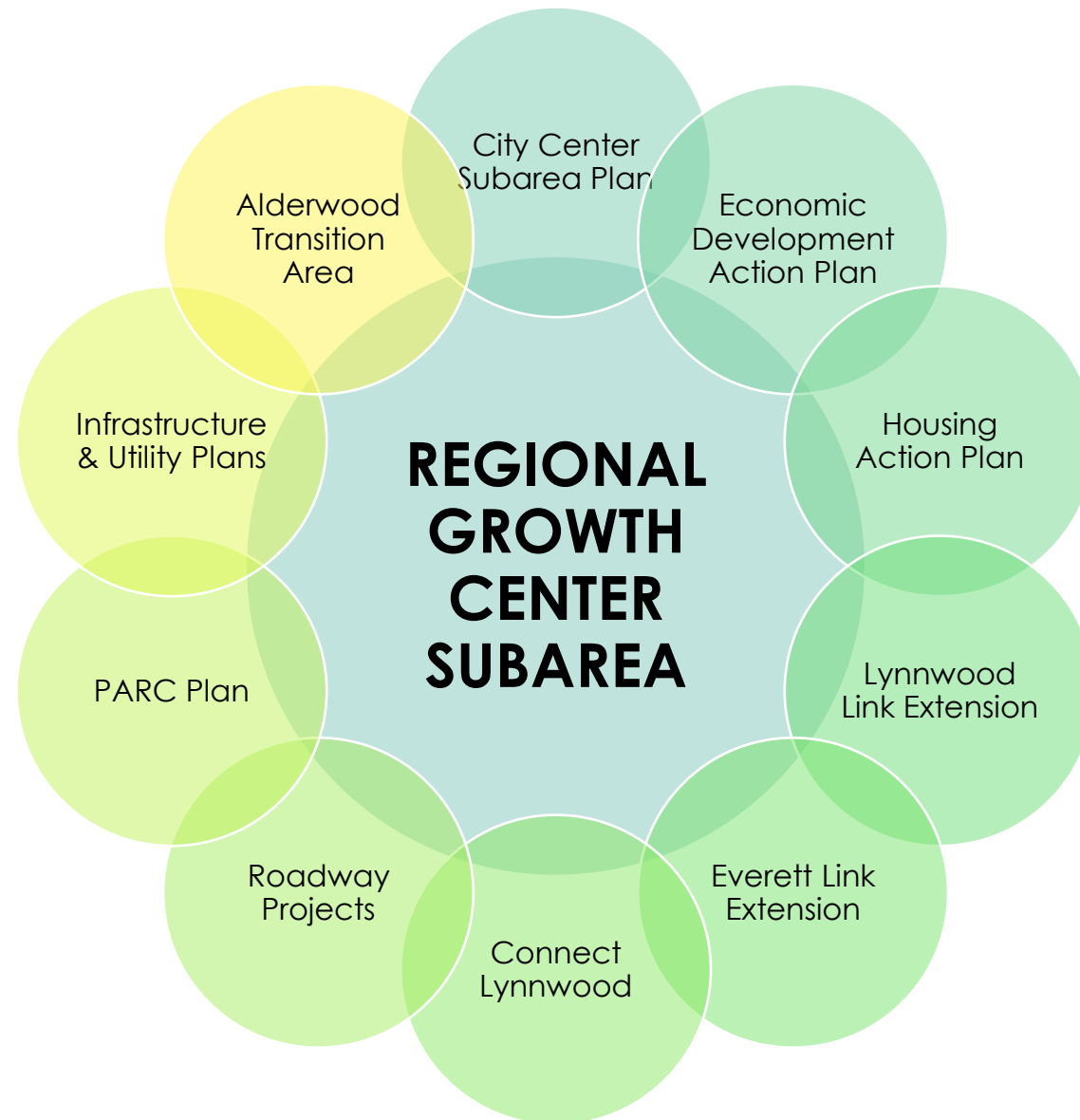
Projects



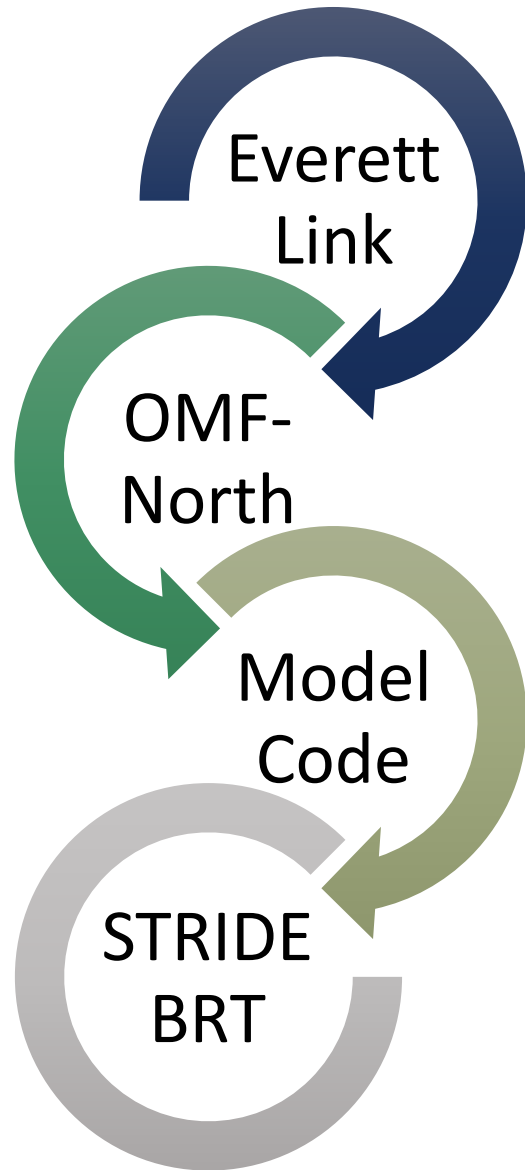
Existing Planning Framework & Policies



Knit the plans together



ST3 Projects



Everett Link Extension

ST3 Representative Project

- Identifies mode, corridor and stations
- **Length:** 16 miles
- **Stations:** Six stations, plus one provisional (unfunded) station; parking services at Mariner and Everett locations
- Operations & Maintenance Facility
- **Daily Project Riders:** 37,000-45,000 (2040)
- Start of Service (ST3 Plan): 2036

**All project delivery dates currently under review due to the Board realignment process.*



Model Code Partnership



**Consistency for
Development
& Approvals**



**Transit
Oriented
Development**



**Strategic
Housing &
Employment**



**Organizational
Excellence**



Timeline

2021			2022		2023	2024	
RGC Subarea Plan		*Launch 09/21	Plan Development			*Adopt. 06/24	
Comp. Plan Update	Ongoing					*Adopt. 06/24	
Model Code Partnership (ST)		Gap Analysis & Case Studies	Code Development		*MCP Adopt.		
EVLE & OFM (ST)		Alt. & Dev. Scenario	Pref. Alt. ID’ed	Concept Engineer Review	Preliminary Engineering and EIS		

What is next for Council?

- Council Budget authority for subarea plan contract
- Regular Sound Transit Updates
- Regular Regional Growth Center and Comprehensive Plan Updates

CITY COUNCIL 3.B
CITY OF LYNNWOOD
CITY COUNCIL

TITLE: Discussion: New drug possession laws

DEPARTMENT CONTACT: Lisa Harrison, City Council

SUMMARY:

Discuss changes in state law regarding drug possession and how it affects the LMC.

DEPARTMENT ATTACHMENTS

Description:

[ESB5476.pdf](#)

CERTIFICATION OF ENROLLMENT

ENGROSSED SENATE BILL 5476

67th Legislature
2021 Regular Session

Passed by the Senate April 24, 2021
Yeas 26 Nays 23

President of the Senate

Passed by the House April 24, 2021
Yeas 80 Nays 18

**Speaker of the House of
Representatives**

Approved

Governor of the State of Washington

CERTIFICATE

I, Brad Hendrickson, Secretary of the Senate of the State of Washington, do hereby certify that the attached is **ENGROSSED SENATE BILL 5476** as passed by the Senate and the House of Representatives on the dates hereon set forth.

Secretary

FILED

**Secretary of State
State of Washington**

ENGROSSED SENATE BILL 5476

AS AMENDED BY THE HOUSE

Passed Legislature - 2021 Regular Session

State of Washington

67th Legislature

2021 Regular Session

By Senators Dhingra, Hasegawa, Hunt, Kuderer, Lovelett, Nguyen, Pedersen, Rivers, Robinson, Saldaña, and Wellman

Read first time 03/24/21. Referred to Committee on Ways & Means.

1 AN ACT Relating to responding to the State v. Blake decision by
2 addressing justice system responses and behavioral health prevention,
3 treatment, and related services for individuals using or possessing
4 controlled substances, counterfeit substances, and legend drugs;
5 amending RCW 69.50.4011, 69.50.4013, 69.50.4014, 69.41.030,
6 69.41.030, 69.50.412, 9.94A.518, 13.40.0357, 2.24.010, 2.24.040,
7 9.94A.728, and 10.64.110; reenacting and amending RCW 10.31.110;
8 adding new sections to chapter 71.24 RCW; adding a new section to
9 chapter 43.101 RCW; adding a new section to chapter 10.31 RCW;
10 creating a new section; prescribing penalties; making appropriations;
11 providing an effective date; providing expiration dates; and
12 declaring an emergency.

13 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

14 NEW SECTION. **Sec. 1.** A new section is added to chapter 71.24
15 RCW to read as follows:

16 (1) The authority, in collaboration with the substance use
17 recovery services advisory committee established in subsection (2) of
18 this section, shall establish a substance use recovery services plan.
19 The purpose of the plan is to implement measures to assist persons
20 with substance use disorder in accessing outreach, treatment, and
21 recovery support services that are low barrier, person centered,

1 informed by people with lived experience, and culturally and
2 linguistically appropriate. The plan must articulate the manner in
3 which continual, rapid, and widespread access to a comprehensive
4 continuum of care will be provided to all persons with substance use
5 disorder.

6 (2)(a) The authority shall establish the substance use recovery
7 services advisory committee to collaborate with the authority in the
8 development and implementation of the substance use recovery services
9 plan under this section. The authority must appoint members to the
10 advisory committee who have relevant background related to the needs
11 of persons with substance use disorder. The advisory committee shall
12 be reflective of the community of individuals living with substance
13 use disorder, including persons who are Black, indigenous, and
14 persons of color, persons with co-occurring substance use disorders
15 and mental health conditions, as well as persons who represent the
16 unique needs of rural communities. The advisory committee shall be
17 convened and chaired by the director of the authority, or the
18 director's designee. In addition to the member from the authority,
19 the advisory committee shall include:

20 (i) One member and one alternate from each of the two largest
21 caucuses of the house of representatives, as appointed by the speaker
22 of the house of representatives;

23 (ii) One member and one alternate from each of the two largest
24 caucuses of the senate, as appointed by the president of the senate;

25 (iii) One representative of the governor's office;

26 (iv) At least one adult in recovery from substance use disorder
27 who has experienced criminal legal consequences as a result of
28 substance use;

29 (v) At least one youth in recovery from substance use disorder
30 who has experienced criminal legal consequences as a result of
31 substance use;

32 (vi) One expert from the addictions, drug, and alcohol institute
33 at the University of Washington;

34 (vii) One outreach services provider;

35 (viii) One substance use disorder treatment provider;

36 (ix) One peer recovery services provider;

37 (x) One recovery housing provider;

38 (xi) One expert in serving persons with co-occurring substance
39 use disorders and mental health conditions;

(xii) One expert in antiracism and equity in health care delivery systems;

(xiii) One employee who provides substance use disorder treatment or services as a member of a labor union representing workers in the behavioral health field;

(xiv) One representative of the association of Washington health plans;

(xv) One expert in diversion from the criminal legal system to community-based care for persons with substance use disorder;

(xvi) One representative of public defenders;

(xvii) One representative of prosecutors;

(xviii) One representative of sheriffs and police chiefs;

(xix) One representative of a federally recognized tribe; and

(xx) One representative of local governments.

(b) The advisory committee may create subcommittees with expanded participation.

(c) In its collaboration with the advisory committee to develop the substance use recovery services plan, the authority must give due consideration to the recommendations of the advisory committee. If the authority determines that any of the advisory committee's recommendations are not feasible to adopt and implement, the authority must notify the advisory committee and offer an explanation.

(d) The advisory committee must convene as necessary for the development of the substance use recovery services plan and to provide consultation and advice related to the development and adoption of rules to implement the plan. The advisory committee must convene to monitor implementation of the plan and advise the authority.

(3) The plan must consider:

(a) The points of intersection that persons with substance use disorder have with the health care, behavioral health, criminal, civil legal, and child welfare systems as well as the various locations in which persons with untreated substance use disorder congregate, including homeless encampments, motels, and casinos;

(b) New community-based care access points, including crisis stabilization services and the safe station model in partnership with fire departments;

(c) Current regional capacity for substance use disorder assessments, including capacity for persons with co-occurring

1 substance use disorders and mental health conditions, each of the
2 American society of addiction medicine levels of care, and recovery
3 support services;

4 (d) Barriers to accessing the existing behavioral health system
5 and recovery support services for persons with untreated substance
6 use disorder, especially indigent youth and adult populations,
7 persons with co-occurring substance use disorders and mental health
8 conditions, and populations chronically exposed to criminal legal
9 system responses, and possible innovations that could improve the
10 quality and accessibility of care for those populations;

11 (e) Evidence-based, research-based, and promising treatment and
12 recovery services appropriate for target populations, including
13 persons with co-occurring substance use disorders and mental health
14 conditions;

15 (f) Options for leveraging existing integrated managed care,
16 medicaid waiver, American Indian or Alaska Native fee-for-service
17 behavioral health benefits, and private insurance service capacity
18 for substance use disorders, including but not limited to
19 coordination with managed care organizations, behavioral health
20 administrative services organizations, the Washington health benefit
21 exchange, accountable communities of health, and the office of the
22 insurance commissioner;

23 (g) Framework and design assistance for jurisdictions to assist
24 in compliance with the requirements of RCW 10.31.110 for diversion of
25 individuals with complex or co-occurring behavioral health conditions
26 to community-based care whenever possible and appropriate, and
27 identifying resource gaps that impede jurisdictions in fully
28 realizing the potential impact of this approach;

29 (h) The design of recovery navigator programs in section 2 of
30 this act, including reporting requirements by behavioral health
31 administrative services organizations to monitor the effectiveness of
32 the programs and recommendations for program improvement;

33 (i) The proposal of a funding framework in which, over time,
34 resources are shifted from punishment sectors to community-based care
35 interventions such that community-based care becomes the primary
36 strategy for addressing and resolving public order issues related to
37 behavioral health conditions;

38 (j) Strategic grant making to community organizations to promote
39 public understanding and eradicate stigma and prejudice against

persons with substance use disorder by promoting hope, empathy, and recovery;

(k) Recommendations for diversion to community-based care for individuals with substance use disorders, including persons with co-occurring substance use disorders and mental health conditions, across all points of the sequential intercept model;

(l) Recommendations regarding the appropriate criminal legal system response, if any, to possession of controlled substances;

(m) Recommendations regarding the collection and reporting of data that identifies the number of persons law enforcement officers and prosecutors engage related to drug possession and disparities across geographic areas, race, ethnicity, gender, age, sexual orientation, and income. The recommendations shall include, but not be limited to, the number and rate of persons who are diverted from charges to recovery navigator services or other services, who receive services and what type of services, who are charged with simple possession, and who are taken into custody; and

(n) The design of a mechanism for referring persons with substance use disorder or problematic behaviors resulting from substance use into the supportive services described in section 2 of this act.

(4) The plan and related rules adopted by the authority must give due consideration to persons with co-occurring substance use disorders and mental health conditions and the needs of youth. The plan must include the substance use outreach, treatment, and recovery services outlined in sections 2 through 4 of this act which must be available in or accessible by all jurisdictions. These services must be equitably distributed across urban and rural settings. If feasible and appropriate, service initiation shall be made available on demand through 24-hour, seven days a week peer recovery coach response, behavioral health walk-in centers, or other innovative rapid response models. These services must, at a minimum, incorporate the following principles: Establish low barriers to entry and reentry; improve the health and safety of the individual; reduce the harm of substance use and related activity for the public; include integrated and coordinated services; incorporate structural competency and antiracism; use noncoercive methods of engaging and retaining people in treatment and recovery services, including contingency management; consider the unique needs of rural communities; and have a focus on services that increase social determinants of health.

1 (5) In developing the plan, the authority shall:

2 (a) Align the components of the plan with previous and ongoing
3 studies, plans, and reports, including the Washington state opioid
4 overdose and response plan, published by the authority, the roadmap
5 to recovery planning grant strategy being developed by the authority,
6 and plans associated with federal block grants; and

7 (b) Coordinate its work with the efforts of the blue ribbon
8 commission on the intersection of the criminal justice and behavioral
9 health crisis systems and the crisis response improvement strategy
10 committee established in chapter . . . , Laws of 2021 (Engrossed
11 Second Substitute House Bill No. 1477).

12 (6) The authority must submit a preliminary report by December 1,
13 2021, regarding progress toward the substance use recovery services
14 plan. The authority must submit the final substance use recovery
15 services plan to the governor and the legislature by December 1,
16 2022. After submitting the plan, the authority shall adopt rules and
17 enter into contracts with providers to implement the plan by December
18 1, 2023. In addition to seeking public comment under chapter 34.05
19 RCW, the authority must adopt rules in accordance with the
20 recommendations of the substance use recovery services advisory
21 committee as provided in subsection (2) of this section.

22 (7) In consultation with the substance use recovery services
23 advisory committee, the authority must submit a report on the
24 implementation of the substance use recovery services plan to the
25 appropriate committees of the legislature and governor by December
26 1st of each year, beginning in 2023. This report shall include
27 progress on the substance use disorder continuum of care, including
28 availability of outreach, treatment, and recovery support services
29 statewide.

30 (8) For the purposes of this section, "recovery support services"
31 means a collection of resources that sustain long-term recovery from
32 substance use disorder, including for persons with co-occurring
33 substance use disorders and mental health conditions, recovery
34 housing, permanent supportive housing, employment and education
35 pathways, peer supports and recovery coaching, family education,
36 technological recovery supports, transportation and child care
37 assistance, and social connectedness.

38 (9) This section expires December 31, 2026.

1 NEW SECTION. **Sec. 2.** A new section is added to chapter 71.24
2 RCW to read as follows:

3 (1) Each behavioral health administrative services organization
4 shall establish a recovery navigator program. The program shall
5 provide community-based outreach, intake, assessment, and connection
6 to services and, as appropriate, long-term intensive case management
7 and recovery coaching services, to youth and adults with substance
8 use disorder, including for persons with co-occurring substance use
9 disorders and mental health conditions, who are referred to the
10 program from diverse sources and shall facilitate and coordinate
11 connections to a broad range of community resources for youth and
12 adults with substance use disorder, including treatment and recovery
13 support services.

14 (2) The authority shall establish uniform program standards for
15 behavioral health administrative services organizations to follow in
16 the design of their recovery navigator programs. The uniform program
17 standards must be modeled upon the components of the law enforcement
18 assisted diversion program and address project management, field
19 engagement, biopsychosocial assessment, intensive case management and
20 care coordination, stabilization housing when available and
21 appropriate, and, as necessary, legal system coordination. The
22 authority must adopt the uniform program standards from the
23 components of the law enforcement assisted diversion program to
24 accommodate an expanded population of persons with substance use
25 disorders, including persons with co-occurring substance use
26 disorders and mental health conditions, and allow for referrals from
27 a broad range of sources. In addition to accepting referrals from law
28 enforcement, the uniform program standards must provide guidance for
29 accepting referrals on behalf of persons with substance use
30 disorders, including persons with co-occurring substance use
31 disorders and mental health conditions, from various sources
32 including, but not limited to, self-referral, family members of the
33 individual, emergency department personnel, persons engaged with
34 serving homeless persons, including those living unsheltered or in
35 encampments, fire department personnel, emergency medical service
36 personnel, community-based organizations, members of the business
37 community, harm reduction program personnel, faith-based organization
38 staff, and other sources within the criminal legal system, as
39 outlined within the sequential intercept model. In developing
40 response time requirements within the statewide program standards,

1 the authority shall require, subject to the availability of amounts
2 appropriated for this specific purpose, that responses to referrals
3 from law enforcement occur immediately for in-custody referrals and
4 shall strive for rapid response times to other appropriate settings
5 such as emergency departments.

6 (3) Subject to the availability of amounts appropriated for this
7 specific purpose, the authority shall provide funding to each
8 behavioral health administrative services organization for the
9 development of its recovery navigator program. Before receiving
10 funding for implementation and ongoing administration, each
11 behavioral health administrative services organization must submit a
12 program plan that demonstrates the ability to fully comply with
13 statewide program standards. The authority shall establish a schedule
14 for the regular review of behavioral health administrative services
15 organizations' programs. The authority shall arrange for technical
16 assistance to be provided by the LEAD national support bureau to all
17 behavioral health administrative services organizations.

18 (4) Each behavioral health administrative services organization
19 must have a substance use disorder regional administrator for its
20 recovery navigator program. The regional administrator shall be
21 responsible for assuring compliance with program standards, including
22 staffing standards. Each recovery navigator program must maintain a
23 sufficient number of appropriately trained personnel for providing
24 intake and referral services, conducting comprehensive
25 biopsychosocial assessments, providing intensive case management
26 services, and making warm handoffs to treatment and recovery support
27 services along the continuum of care. Program staff must include
28 people with lived experience with substance use disorder to the
29 extent possible. The substance use disorder regional administrator
30 must assure that staff who are conducting intake and referral
31 services and field assessments are paid a livable and competitive
32 wage and have appropriate initial training and receive continuing
33 education.

34 (5) Each recovery navigator program must submit quarterly reports
35 to the authority with information identified by the authority and the
36 substance use recovery services advisory committee. The reports must
37 be provided to the substance use recovery services advisory committee
38 for discussion at meetings following the submission of the reports.

1 NEW SECTION. **Sec. 3.** A new section is added to chapter 71.24
2 RCW to read as follows:

3 (1) Subject to the availability of amounts appropriated for this
4 specific purpose, the authority shall establish a grant program to:

5 (a) Provide treatment services for low-income individuals with
6 substance use disorder who are not eligible for medical assistance
7 programs under chapter 74.09 RCW, with priority for the use of the
8 funds for very low-income individuals; and

9 (b) Provide treatment services that are not eligible for federal
10 matching funds to individuals who are enrolled in medical assistance
11 programs under chapter 74.09 RCW.

12 (2) In establishing the grant program, the authority shall
13 consult with the substance use recovery services advisory committee
14 established in section 1 of this act, behavioral health
15 administrative services organizations, managed care organizations,
16 and regional behavioral health providers to adopt regional standards
17 that are consistent with the substance use recovery services plan
18 developed under section 1 of this act to provide sufficient access
19 for youth and adults to meet each region's needs for:

20 (a) Opioid use disorder treatment programs;

21 (b) Low-barrier buprenorphine clinics;

22 (c) Outpatient substance use disorder treatment;

23 (d) Withdrawal management services, including both subacute and
24 medically managed withdrawal management;

25 (e) Secure withdrawal management and stabilization services;

26 (f) Inpatient substance use disorder treatment services;

27 (g) Inpatient co-occurring disorder treatment services; and

28 (h) Behavioral health crisis walk-in and drop-off services.

29 (3) Funds in the grant program must be used to reimburse
30 providers for the provision of services to individuals identified in
31 subsection (1) of this section. The authority may use the funds to
32 support evidence-based practices and promising practices that are not
33 reimbursed by medical assistance or private insurance, including
34 contingency management. In addition, funds may be used to provide
35 assistance to organizations to establish or expand services as
36 reasonably necessary and feasible to increase the availability of
37 services to achieve the regional access standards developed under
38 subsection (2) of this section, including such items as training and
39 recruitment of personnel, reasonable modifications to existing
40 facilities to accommodate additional clients, start-up funding, and

1 similar forms of assistance. Funds may not be used to support the
2 ongoing operational costs of a provider or organization, except in
3 relation to payments for specific service encounters with an
4 individual identified in subsection (1) of this section or for
5 noninsurance reimbursable services.

6 (4) The authority must establish regional access standards under
7 subsection (2) of this section, subject to the availability of
8 amounts appropriated for this specific purpose, by January 1, 2023,
9 and begin distributing grant funds by March 1, 2023.

10 NEW SECTION. **Sec. 4.** A new section is added to chapter 71.24
11 RCW to read as follows:

12 (1) Subject to the availability of amounts appropriated for this
13 specific purpose, the authority shall establish the expanded recovery
14 support services program to increase access to recovery services for
15 individuals in recovery from substance use disorder.

16 (2) In establishing the program, the authority shall consult with
17 the substance use recovery services advisory committee established in
18 section 1 of this act, behavioral health administrative services
19 organizations, regional behavioral health providers, and regional
20 community organizations that support individuals in recovery from
21 substance use disorders, including individuals with co-occurring
22 substance use disorders and mental health conditions, to adopt
23 regional expanded recovery plans that are consistent with the
24 substance use recovery services plan developed under section 1 of
25 this act to provide sufficient access for youth and adults to meet
26 each region's needs for:

- 27 (a) Recovery housing;
- 28 (b) Employment pathways, support, training, and job placement,
29 including evidence-based supported employment program services;
- 30 (c) Education pathways, including recovery high schools and
31 collegiate recovery programs;
- 32 (d) Recovery coaching and substance use disorder peer support;
- 33 (e) Social connectedness initiatives, including the recovery café
34 model;
- 35 (f) Family support services, including family reconciliation
36 services;
- 37 (g) Technology-based recovery support services;
- 38 (h) Transportation assistance; and
- 39 (i) Legal support services.

(3) Funds in the expanded recovery support services program must be used to reimburse providers for the provision of services to individuals in recovery from substance use disorders, including individuals with co-occurring substance use disorders and mental health conditions. In addition, the funds may be used to provide assistance to organizations to establish or expand recovery support services as reasonably necessary and feasible to increase the availability of services to achieve the regional expanded recovery plans developed under subsection (2) of this section, including such items as training and recruitment of personnel, reasonable modifications to existing facilities to accommodate additional clients, and similar forms of assistance.

(4) The authority must establish regional expanded recovery plans under subsection (2) of this section, subject to the availability of amounts appropriated for this specific purpose, by January 1, 2023, and begin distributing grant funds by March 1, 2023.

NEW SECTION. **Sec. 5.** A new section is added to chapter 71.24 RCW to read as follows:

(1) Subject to the availability of amounts appropriated for this specific purpose, the authority shall establish a homeless outreach stabilization transition program to expand access to modified assertive community treatment services provided by multidisciplinary behavioral health outreach teams to serve people who are living with serious substance use disorders or co-occurring substance use disorders and mental health conditions, are experiencing homelessness, and whose severity of behavioral health symptom acuity level creates a barrier to accessing and receiving conventional behavioral health services and outreach models.

(a) In establishing the program, the authority shall consult with behavioral health outreach organizations who have experience delivering this service model in order to establish program guidelines regarding multidisciplinary team staff types, service intensity and quality fidelity standards, and criteria to ensure programs are reaching the appropriate priority population.

(b) Funds for the homeless outreach stabilization transition program must be used to reimburse organizations for the provision of multidisciplinary outreach services to individuals who are living with substance use disorders or co-occurring substance use and mental health disorders and are experiencing homelessness or transitioning

1 from homelessness to housing. The funds may be used to provide
2 assistance to organizations to establish or expand services as
3 reasonably necessary to create a homeless outreach stabilization
4 transition program, including items such as training and recruitment
5 of personnel, outreach and engagement resources, client engagement
6 and health supplies, medications for people who do not have access to
7 insurance, and similar forms of assistance.

8 (c) The authority must establish one or more homeless outreach
9 stabilization transition programs by January 1, 2024, and begin
10 distributing grant funds by March 1, 2024.

11 (2) Subject to the availability of amounts appropriated for this
12 specific purpose, the authority shall establish a project for
13 psychiatric outreach to the homeless program to expand access to
14 behavioral health medical services for people who are experiencing
15 homelessness and living in permanent supportive housing.

16 (a) In establishing the program, the authority shall consult with
17 behavioral health medical providers, homeless service providers, and
18 permanent supportive housing providers that support people living
19 with substance use disorders, co-occurring substance use and mental
20 health conditions, and people who are currently or have formerly
21 experienced homelessness.

22 (b) Funds for the project for psychiatric outreach to the
23 homeless program must be used to reimburse organizations for the
24 provision of medical services to individuals who are living with or
25 in recovery from substance use disorders, co-occurring substance use
26 and mental health disorders, or other behavioral and physical health
27 conditions. Organizations must provide medical services to people who
28 are experiencing homelessness or are living in permanent supportive
29 housing and would be at risk of homelessness without access to
30 appropriate services. The funds may be used to provide assistance to
31 organizations to establish or expand behavioral health medical
32 services as reasonably necessary to create a project for psychiatric
33 outreach to the homeless program, including items such as training
34 and recruitment of personnel, outreach and engagement resources,
35 medical equipment and health supplies, medications for people who do
36 not have access to insurance, and similar forms of assistance.

37 (c) The authority must establish one or more projects for
38 psychiatric outreach to the homeless programs by January 1, 2024, and
39 begin distributing grant funds by March 1, 2024.

1 (3) Subject to the availability of amounts appropriated for this
2 specific purpose, the authority shall increase contingency management
3 resources for opioid treatment networks that are serving people
4 living with co-occurring stimulant use and opioid use disorder.

5 (4) Subject to the availability of amounts appropriated for this
6 specific purpose, the authority shall develop a plan for implementing
7 a comprehensive statewide substance misuse prevention effort. The
8 plan must be completed by January 1, 2024.

9 (5) Subject to the availability of amounts appropriated for this
10 specific purpose, the authority shall administer a competitive grant
11 process to broaden existing local community coalition efforts to
12 prevent substance misuse by increasing relevant protective factors
13 while decreasing risk factors. Coalitions are to be open to all
14 stakeholders interested in substance misuse prevention, including,
15 but not limited to, representatives from people in recovery, law
16 enforcement, education, behavioral health, parent organizations,
17 treatment organizations, organizations serving youth, prevention
18 professionals, and business.

19 **Sec. 6.** RCW 10.31.110 and 2019 c 326 s 3 and 2019 c 325 s 5004
20 are each reenacted and amended to read as follows:

21 (1) When a police officer has reasonable cause to believe that
22 the individual has committed acts constituting a crime, and the
23 individual is known by history or consultation with the behavioral
24 health administrative services organization, managed care
25 organization, ~~((behavioral health administrative services~~
26 ~~organization,))~~ crisis hotline, ~~((or))~~ local crisis services
27 providers, or community health providers to ~~((suffer from))~~ have a
28 mental disorder or substance use disorder, in addition to existing
29 authority under state law or local policy, as an alternative to
30 arrest, the arresting officer is authorized and encouraged to:

31 (a) Take the individual to a crisis stabilization unit as defined
32 in RCW 71.05.020. Individuals delivered to a crisis stabilization
33 unit pursuant to this section may be held by the facility for a
34 period of up to twelve hours. The individual must be examined by a
35 mental health professional or substance use disorder professional
36 within three hours of arrival;

37 (b) Take the individual to a triage facility as defined in RCW
38 71.05.020. An individual delivered to a triage facility which has
39 elected to operate as an involuntary facility may be held up to a

1 period of twelve hours. The individual must be examined by a mental
2 health professional or substance use disorder professional within
3 three hours of arrival;

4 (c) Refer the individual to a (~~mental health professional~~)
5 designated crisis responder for evaluation for initial detention and
6 proceeding under chapter 71.05 RCW; (~~or~~)

7 (d) Release the individual upon agreement to voluntary
8 participation in outpatient treatment;

9 (e) Refer the individual to youth, adult, or geriatric mobile
10 crisis response services, as appropriate; or

11 (f) Refer the individual to the regional entity responsible to
12 receive referrals in lieu of legal system involvement, including the
13 recovery navigator program described in section 2 of this act.

14 (2) If the individual is released to the community from the
15 facilities in subsection (1)(a) through (c) of this section, the
16 mental health provider or substance use disorder professional shall
17 make reasonable efforts to inform the arresting officer of the
18 planned release prior to release if the arresting officer has
19 specifically requested notification and provided contact information
20 to the provider.

21 (3) In deciding whether to refer the individual to treatment
22 under this section, the police officer must be guided by local law
23 enforcement diversion guidelines for behavioral health developed and
24 mutually agreed upon with the prosecuting authority with an
25 opportunity for consultation and comment by the defense bar and
26 disability community. These guidelines must address, at a minimum,
27 the length, seriousness, and recency of the known criminal history of
28 the individual, the mental health history of the individual, if
29 available, the substance use disorder history of the individual, if
30 available, the opinions of a mental health professional, if
31 available, the opinions of a substance use disorder professional, if
32 available, and the circumstances surrounding the commission of the
33 alleged offense. The guidelines must include a process for clearing
34 outstanding warrants or referring the individual for assistance in
35 clearing outstanding warrants, if any, and issuing a new court date,
36 if appropriate, without booking or incarcerating the individual or
37 disqualifying (~~him or her~~) the individual from referral to
38 treatment under this section, and define the circumstances under
39 which such action is permissible. Referrals to services, care, and
40 treatment for substance use disorder must be made in accordance with

1 protocols developed for the recovery navigator program described in
2 section 2 of this act.

3 (4) Any agreement to participate in treatment or services in lieu
4 of jail booking or referring a case for prosecution shall not require
5 individuals to stipulate to any of the alleged facts regarding the
6 criminal activity as a prerequisite to participation in ~~((a mental~~
7 ~~health treatment))~~ the alternative response described in this
8 section. ~~((The))~~ Any agreement is inadmissible in any criminal or
9 civil proceeding. ~~((The agreement does))~~ Such agreements do not
10 create immunity from prosecution for the alleged criminal activity.

11 (5) If ~~((an individual violates such agreement and the mental~~
12 ~~health treatment alternative is no longer appropriate))~~ there are
13 required terms of participation in the services or treatment to which
14 an individual was referred under this section, and if the individual
15 violates such terms and is therefore no longer participating in
16 services:

17 (a) The ~~((mental health))~~ behavioral health or service provider
18 shall inform the referring law enforcement agency of the violation,
19 if consistent with the terms of the program and applicable law; and

20 (b) The original charges may be filed or referred to the
21 prosecutor, as appropriate, and the matter may proceed accordingly,
22 unless filing or referring the charges is inconsistent with the terms
23 of a local diversion program or a recovery navigator program
24 described in section 2 of this act.

25 (6) The police officer is immune from liability for any good
26 faith conduct under this section.

27 NEW SECTION. Sec. 7. A new section is added to chapter 43.101
28 RCW to read as follows:

29 (1) Beginning July 1, 2022, all law enforcement personnel
30 required to complete basic law enforcement training under RCW
31 43.101.200 must receive training on law enforcement interaction with
32 persons with substance use disorders, including persons with co-
33 occurring substance use disorders and mental health conditions, and
34 referral to treatment and recovery services and the unique referral
35 processes for youth, as part of the basic law enforcement training.
36 The training must be developed by the commission in collaboration
37 with the University of Washington behavioral health institute and
38 agencies that have expertise in the area of working with persons with
39 substance use disorders, including law enforcement diversion of such

1 individuals to community-based care. In developing the training, the
2 commission must also examine existing courses certified by the
3 commission that relate to persons with a substance use disorder, and
4 should draw on existing training partnerships with the Washington
5 association of sheriffs and police chiefs.

6 (2) The training must consist of classroom instruction or
7 internet instruction and shall replicate likely field situations to
8 the maximum extent possible. The training should include, at a
9 minimum, core instruction in all of the following:

10 (a) Proper procedures for referring persons to the recovery
11 navigator program in accordance with section 2 of this act;

12 (b) The etiology of substance use disorders, including the role
13 of trauma;

14 (c) Barriers to treatment engagement experienced by many with
15 such disorders who have contact with the legal system;

16 (d) How to identify indicators of substance use disorder and how
17 to respond appropriately in a variety of common situations;

18 (e) Conflict resolution and de-escalation techniques for
19 potentially dangerous situations involving persons with a substance
20 use disorder;

21 (f) Appropriate language usage when interacting with persons with
22 a substance use disorder;

23 (g) Alternatives to lethal force when interacting with
24 potentially dangerous persons with a substance use disorder;

25 (h) The principles of recovery and the multiple pathways to
26 recovery; and

27 (i) Community and state resources available to serve persons with
28 substance use disorders and how these resources can be best used by
29 law enforcement to support persons with a substance use disorder in
30 their communities.

31 (3) In addition to incorporation into the basic law enforcement
32 training under RCW 43.101.200, training must be made available to law
33 enforcement agencies, through electronic means, for use during in-
34 service training.

35 **Sec. 8.** RCW 69.50.4011 and 2003 c 53 s 332 are each amended to
36 read as follows:

37 (1) Except as authorized by this chapter, it is unlawful for
38 ((any)):

1 (a) Any person to create((~~r~~)) or deliver((~~r~~ or possess)) a
2 counterfeit substance; or

3 (b) Any person to knowingly possess a counterfeit substance.

4 (2) Any person who violates subsection (1)(a) of this section
5 with respect to:

6 (a) A counterfeit substance classified in Schedule I or II which
7 is a narcotic drug, or flunitrazepam classified in Schedule IV, is
8 guilty of a class B felony and upon conviction may be imprisoned for
9 not more than ten years, fined not more than twenty-five thousand
10 dollars, or both;

11 (b) A counterfeit substance which is methamphetamine, is guilty
12 of a class B felony and upon conviction may be imprisoned for not
13 more than ten years, fined not more than twenty-five thousand
14 dollars, or both;

15 (c) Any other counterfeit substance classified in Schedule I, II,
16 or III, is guilty of a class C felony punishable according to chapter
17 9A.20 RCW;

18 (d) A counterfeit substance classified in Schedule IV, except
19 flunitrazepam, is guilty of a class C felony punishable according to
20 chapter 9A.20 RCW;

21 (e) A counterfeit substance classified in Schedule V, is guilty
22 of a class C felony punishable according to chapter 9A.20 RCW.

23 (3) A violation of subsection (1)(b) of this section is a
24 misdemeanor. The prosecutor is encouraged to divert such cases for
25 assessment, treatment, or other services.

26 **Sec. 9.** RCW 69.50.4013 and 2017 c 317 s 15 are each amended to
27 read as follows:

28 (1) It is unlawful for any person to knowingly possess a
29 controlled substance unless the substance was obtained directly from,
30 or pursuant to, a valid prescription or order of a practitioner while
31 acting in the course of his or her professional practice, or except
32 as otherwise authorized by this chapter.

33 (2) Except as provided in RCW 69.50.4014, any person who violates
34 this section is guilty of a ~~((class C felony punishable under chapter~~
35 ~~9A.20 RCW))~~ misdemeanor.

36 (3) The prosecutor is encouraged to divert cases under this
37 section for assessment, treatment, or other services.

38 (4)(a) The possession, by a person twenty-one years of age or
39 older, of useable marijuana, marijuana concentrates, or marijuana-

1 infused products in amounts that do not exceed those set forth in RCW
2 69.50.360(3) is not a violation of this section, this chapter, or any
3 other provision of Washington state law.

4 (b) The possession of marijuana, useable marijuana, marijuana
5 concentrates, and marijuana-infused products being physically
6 transported or delivered within the state, in amounts not exceeding
7 those that may be established under RCW 69.50.385(3), by a licensed
8 employee of a common carrier when performing the duties authorized in
9 accordance with RCW 69.50.382 and 69.50.385, is not a violation of
10 this section, this chapter, or any other provision of Washington
11 state law.

12 ((+4+)) (5)(a) The delivery by a person twenty-one years of age
13 or older to one or more persons twenty-one years of age or older,
14 during a single twenty-four hour period, for noncommercial purposes
15 and not conditioned upon or done in connection with the provision or
16 receipt of financial consideration, of any of the following marijuana
17 products, is not a violation of this section, this chapter, or any
18 other provisions of Washington state law:

- 19 (i) One-half ounce of useable marijuana;
20 (ii) Eight ounces of marijuana-infused product in solid form;
21 (iii) Thirty-six ounces of marijuana-infused product in liquid
22 form; or
23 (iv) Three and one-half grams of marijuana concentrates.

24 (b) The act of delivering marijuana or a marijuana product as
25 authorized under this subsection ((+4+)) (5) must meet one of the
26 following requirements:

- 27 (i) The delivery must be done in a location outside of the view
28 of general public and in a nonpublic place; or
29 (ii) The marijuana or marijuana product must be in the original
30 packaging as purchased from the marijuana retailer.

31 ((+5+)) (6) No person under twenty-one years of age may possess,
32 manufacture, sell, or distribute marijuana, marijuana-infused
33 products, or marijuana concentrates, regardless of THC concentration.
34 This does not include qualifying patients with a valid authorization.

35 ((+6+)) (7) The possession by a qualifying patient or designated
36 provider of marijuana concentrates, useable marijuana, marijuana-
37 infused products, or plants in accordance with chapter 69.51A RCW is
38 not a violation of this section, this chapter, or any other provision
39 of Washington state law.

1 **Sec. 10.** RCW 69.50.4014 and 2015 2nd sp.s. c 4 s 505 are each
2 amended to read as follows:

3 Except as provided in RCW 69.50.401(2)(c) or as otherwise
4 authorized by this chapter, any person found guilty of knowing
5 possession of forty grams or less of marijuana is guilty of a
6 misdemeanor. The prosecutor is encouraged to divert cases under this
7 section for assessment, treatment, or other services.

8 **Sec. 11.** RCW 69.41.030 and 2019 c 55 s 9 are each amended to
9 read as follows:

10 (1) It shall be unlawful for any person to sell, deliver, or
11 knowingly possess any legend drug except upon the order or
12 prescription of a physician under chapter 18.71 RCW, an osteopathic
13 physician and surgeon under chapter 18.57 RCW, an optometrist
14 licensed under chapter 18.53 RCW who is certified by the optometry
15 board under RCW 18.53.010, a dentist under chapter 18.32 RCW, a
16 podiatric physician and surgeon under chapter 18.22 RCW, a
17 veterinarian under chapter 18.92 RCW, a commissioned medical or
18 dental officer in the United States armed forces or public health
19 service in the discharge of his or her official duties, a duly
20 licensed physician or dentist employed by the veterans administration
21 in the discharge of his or her official duties, a registered nurse or
22 advanced registered nurse practitioner under chapter 18.79 RCW when
23 authorized by the nursing care quality assurance commission, a
24 pharmacist licensed under chapter 18.64 RCW to the extent permitted
25 by drug therapy guidelines or protocols established under RCW
26 18.64.011 and authorized by the commission and approved by a
27 practitioner authorized to prescribe drugs, an osteopathic physician
28 assistant under chapter 18.57A RCW when authorized by the board of
29 osteopathic medicine and surgery, a physician assistant under chapter
30 18.71A RCW when authorized by the Washington medical commission, or
31 any of the following professionals in any province of Canada that
32 shares a common border with the state of Washington or in any state
33 of the United States: A physician licensed to practice medicine and
34 surgery or a physician licensed to practice osteopathic medicine and
35 surgery, a dentist licensed to practice dentistry, a podiatric
36 physician and surgeon licensed to practice podiatric medicine and
37 surgery, a licensed advanced registered nurse practitioner, a
38 licensed physician assistant, a licensed osteopathic physician
39 assistant, or a veterinarian licensed to practice veterinary

1 medicine: PROVIDED, HOWEVER, That the above provisions shall not
2 apply to sale, delivery, or possession by drug wholesalers or drug
3 manufacturers, or their agents or employees, or to any practitioner
4 acting within the scope of his or her license, or to a common or
5 contract carrier or warehouse operator, or any employee thereof,
6 whose possession of any legend drug is in the usual course of
7 business or employment: PROVIDED FURTHER, That nothing in this
8 chapter or chapter 18.64 RCW shall prevent a family planning clinic
9 that is under contract with the health care authority from selling,
10 delivering, possessing, and dispensing commercially prepackaged oral
11 contraceptives prescribed by authorized, licensed health care
12 practitioners: PROVIDED FURTHER, That nothing in this chapter
13 prohibits possession or delivery of legend drugs by an authorized
14 collector or other person participating in the operation of a drug
15 take-back program authorized in chapter 69.48 RCW.

16 (2)(a) A violation of this section involving the sale, delivery,
17 or possession with intent to sell or deliver is a class B felony
18 punishable according to chapter 9A.20 RCW.

19 (b) A violation of this section involving possession is a
20 misdemeanor. The prosecutor is encouraged to divert such cases for
21 assessment, treatment, or other services.

22 **Sec. 12.** RCW 69.41.030 and 2020 c 80 s 41 are each amended to
23 read as follows:

24 (1) It shall be unlawful for any person to sell, deliver, or
25 knowingly possess any legend drug except upon the order or
26 prescription of a physician under chapter 18.71 RCW, an osteopathic
27 physician and surgeon under chapter 18.57 RCW, an optometrist
28 licensed under chapter 18.53 RCW who is certified by the optometry
29 board under RCW 18.53.010, a dentist under chapter 18.32 RCW, a
30 podiatric physician and surgeon under chapter 18.22 RCW, a
31 veterinarian under chapter 18.92 RCW, a commissioned medical or
32 dental officer in the United States armed forces or public health
33 service in the discharge of his or her official duties, a duly
34 licensed physician or dentist employed by the veterans administration
35 in the discharge of his or her official duties, a registered nurse or
36 advanced registered nurse practitioner under chapter 18.79 RCW when
37 authorized by the nursing care quality assurance commission, a
38 pharmacist licensed under chapter 18.64 RCW to the extent permitted
39 by drug therapy guidelines or protocols established under RCW

1 18.64.011 and authorized by the commission and approved by a
2 practitioner authorized to prescribe drugs, a physician assistant
3 under chapter 18.71A RCW when authorized by the Washington medical
4 commission, or any of the following professionals in any province of
5 Canada that shares a common border with the state of Washington or in
6 any state of the United States: A physician licensed to practice
7 medicine and surgery or a physician licensed to practice osteopathic
8 medicine and surgery, a dentist licensed to practice dentistry, a
9 podiatric physician and surgeon licensed to practice podiatric
10 medicine and surgery, a licensed advanced registered nurse
11 practitioner, a licensed physician assistant, or a veterinarian
12 licensed to practice veterinary medicine: PROVIDED, HOWEVER, That the
13 above provisions shall not apply to sale, delivery, or possession by
14 drug wholesalers or drug manufacturers, or their agents or employees,
15 or to any practitioner acting within the scope of his or her license,
16 or to a common or contract carrier or warehouse operator, or any
17 employee thereof, whose possession of any legend drug is in the usual
18 course of business or employment: PROVIDED FURTHER, That nothing in
19 this chapter or chapter 18.64 RCW shall prevent a family planning
20 clinic that is under contract with the health care authority from
21 selling, delivering, possessing, and dispensing commercially
22 prepackaged oral contraceptives prescribed by authorized, licensed
23 health care practitioners: PROVIDED FURTHER, That nothing in this
24 chapter prohibits possession or delivery of legend drugs by an
25 authorized collector or other person participating in the operation
26 of a drug take-back program authorized in chapter 69.48 RCW.

27 (2)(a) A violation of this section involving the sale, delivery,
28 or possession with intent to sell or deliver is a class B felony
29 punishable according to chapter 9A.20 RCW.

30 (b) A violation of this section involving possession is a
31 misdemeanor. The prosecutor is encouraged to divert such cases for
32 assessment, treatment, or other services.

33 NEW SECTION. **Sec. 13.** A new section is added to chapter 10.31
34 RCW to read as follows:

35 (1) For all individuals who otherwise would be subject to arrest
36 for possession of a counterfeit substance under RCW 69.50.4011,
37 possession of a controlled substance under RCW 69.50.4013, possession
38 of 40 grams or less of marijuana under RCW 69.50.4014, or possession
39 of a legend drug under RCW 69.41.030(2)(b), in lieu of jail booking

1 and referral to the prosecutor, law enforcement shall offer a
2 referral to assessment and services available pursuant to RCW
3 10.31.110 or other program or entity responsible for receiving
4 referrals in lieu of legal system involvement, which may include the
5 recovery navigator program established under section 2 of this act.

6 (2) If law enforcement agency records reflect that an individual
7 has been diverted to referral for assessment and services twice or
8 more previously, officers may, but are not required to, make
9 additional diversion efforts.

10 (3) Nothing in this section precludes prosecutors from diverting
11 or declining to file any charges for possession offenses that are
12 referred under RCW 69.50.4011, 69.50.4013, 69.50.4014, or
13 69.41.030(2)(b) in the exercise of their discretion.

14 **Sec. 14.** RCW 69.50.412 and 2019 c 64 s 22 are each amended to
15 read as follows:

16 (1) It is unlawful for any person to use drug paraphernalia to
17 plant, propagate, cultivate, grow, harvest, manufacture, compound,
18 convert, produce, process, or prepare(~~(, test, analyze, pack, repack,~~
19 ~~store, contain, conceal, inject, ingest, inhale, or otherwise~~
20 ~~introduce into the human body))~~) a controlled substance other than
21 marijuana. Any person who violates this subsection is guilty of a
22 misdemeanor.

23 (2) It is unlawful for any person to deliver, possess with intent
24 to deliver, or manufacture with intent to deliver drug paraphernalia,
25 knowing, or under circumstances where one reasonably should know,
26 that it will be used to plant, propagate, cultivate, grow, harvest,
27 manufacture, compound, convert, produce, process, or prepare(~~(, test,~~
28 ~~analyze, pack, repack, store, contain, conceal, inject, ingest,~~
29 ~~inhale, or otherwise introduce into the human body))~~) a controlled
30 substance other than marijuana. Any person who violates this
31 subsection is guilty of a misdemeanor.

32 (3) Any person eighteen years of age or over who violates
33 subsection (2) of this section by delivering drug paraphernalia to a
34 person under eighteen years of age who is at least three years his or
35 her junior is guilty of a gross misdemeanor.

36 (4) It is unlawful for any person to place in any newspaper,
37 magazine, handbill, or other publication any advertisement, knowing,
38 or under circumstances where one reasonably should know, that the
39 purpose of the advertisement, in whole or in part, is to promote the

1 sale of objects designed or intended for use as drug paraphernalia.
2 Any person who violates this subsection is guilty of a misdemeanor.
3 (5) It is lawful for any person over the age of eighteen to
4 possess sterile hypodermic syringes and needles for the purpose of
5 reducing blood-borne diseases.

6 **Sec. 15.** RCW 9.94A.518 and 2003 c 53 s 57 are each amended to
7 read as follows:

8 TABLE 4

9 DRUG OFFENSES
10 INCLUDED WITHIN EACH
11 SERIOUSNESS LEVEL

- 12 III Any felony offense under chapter
13 69.50 RCW with a deadly weapon
14 special verdict under RCW
15 ((9.94A.602)) 9.94A.825
16 Controlled Substance Homicide (RCW
17 69.50.415)
18 Delivery of imitation controlled
19 substance by person eighteen or
20 over to person under eighteen
21 (RCW 69.52.030(2))
22 Involving a minor in drug dealing
23 (RCW 69.50.4015)
24 Manufacture of methamphetamine
25 (RCW 69.50.401(2)(b))
26 Over 18 and deliver heroin,
27 methamphetamine, a narcotic from
28 Schedule I or II, or flunitrazepam
29 from Schedule IV to someone
30 under 18 (RCW 69.50.406)

Over 18 and deliver narcotic from
Schedule III, IV, or V or a
nonnarcotic, except flunitrazepam
or methamphetamine, from
Schedule I-V to someone under 18
and 3 years junior (RCW
69.50.406)

Possession of Ephedrine,
Pseudoephedrine, or Anhydrous
Ammonia with intent to
manufacture methamphetamine
(RCW 69.50.440)

Selling for profit (controlled or
counterfeit) any controlled
substance (RCW 69.50.410)

II Create(~~(;)~~) or deliver(~~(; or possess)~~) a
counterfeit controlled substance
(RCW 69.50.4011(1)(a))

Deliver or possess with intent to
deliver methamphetamine (RCW
69.50.401(2)(b))

Delivery of a material in lieu of a
controlled substance (RCW
69.50.4012)

Maintaining a Dwelling or Place for
Controlled Substances (RCW
69.50.402(1)(f))

Manufacture, deliver, or possess with
intent to deliver amphetamine
(RCW 69.50.401(2)(b))

Manufacture, deliver, or possess with
intent to deliver narcotics from
Schedule I or II or flunitrazepam
from Schedule IV (RCW
69.50.401(2)(a))

1 Manufacture, deliver, or possess with
2 intent to deliver narcotics from
3 Schedule III, IV, or V or
4 nonnarcotics from Schedule I-V
5 (except marijuana, amphetamine,
6 methamphetamines, or
7 flunitrazepam) (RCW
8 69.50.401(2) (c) through (e))

9 Manufacture, distribute, or possess
10 with intent to distribute an
11 imitation controlled substance
12 (RCW 69.52.030(1))

13 I Forged Prescription (RCW 69.41.020)
14 Forged Prescription for a Controlled
15 Substance (RCW 69.50.403)

16 Manufacture, deliver, or possess with
17 intent to deliver marijuana (RCW
18 69.50.401(2)(c))

19 ~~((Possess Controlled Substance that is~~
20 ~~a Narcotic from Schedule III, IV,~~
21 ~~or V or Nonnarcotic from~~
22 ~~Schedule I-V (RCW 69.50.4013)~~

23 ~~Possession of Controlled Substance~~
24 ~~that is either heroin or narcotics~~
25 ~~from Schedule I or II (RCW~~
26 ~~69.50.4013)))~~

27 Unlawful Use of Building for Drug
28 Purposes (RCW 69.53.010)

29 **Sec. 16.** RCW 13.40.0357 and 2020 c 18 s 8 are each amended to
30 read as follows:

31 **DESCRIPTION AND OFFENSE CATEGORY**

32		JUVENILE DISPOSITION
33	JUVENILE	CATEGORY FOR
34	DISPOSITION	ATTEMPT, BAILJUMP,
35	OFFENSE	CONSPIRACY, OR
36	CATEGORY DESCRIPTION (RCW CITATION)	SOLICITATION

1		Arson and Malicious Mischief	
2	A	Arson 1 (9A.48.020)	B+
3	B	Arson 2 (9A.48.030)	C
4	C	Reckless Burning 1 (9A.48.040)	D
5	D	Reckless Burning 2 (9A.48.050)	E
6	B	Malicious Mischief 1 (9A.48.070)	C
7	C	Malicious Mischief 2 (9A.48.080)	D
8	D	Malicious Mischief 3 (9A.48.090)	E
9	E	Tampering with Fire Alarm Apparatus	E
10		(9.40.100)	
11	E	Tampering with Fire Alarm Apparatus	E
12		with Intent to Commit Arson (9.40.105)	
13	A	Possession of Incendiary Device	B+
14		(9.40.120)	
15		Assault and Other Crimes Involving	
16		Physical Harm	
17	A	Assault 1 (9A.36.011)	B+
18	B+	Assault 2 (9A.36.021)	C+
19	C+	Assault 3 (9A.36.031)	D+
20	D+	Assault 4 (9A.36.041)	E
21	B+	Drive-By Shooting (9A.36.045)	C+
22		committed at age 15 or under	
23	A++	Drive-By Shooting (9A.36.045)	A
24		committed at age 16 or 17	
25	D+	Reckless Endangerment (9A.36.050)	E
26	C+	Promoting Suicide Attempt (9A.36.060)	D+
27	D+	Coercion (9A.36.070)	E
28	C+	Custodial Assault (9A.36.100)	D+
29		Burglary and Trespass	
30	B+	Burglary 1 (9A.52.020) committed at	C+
31		age 15 or under	
32	A-	Burglary 1 (9A.52.020) committed at	B+
33		age 16 or 17	
34	B	Residential Burglary (9A.52.025)	C
35	B	Burglary 2 (9A.52.030)	C

1	D	Burglary Tools (Possession of)	E
2		(9A.52.060)	
3	D	Criminal Trespass 1 (9A.52.070)	E
4	E	Criminal Trespass 2 (9A.52.080)	E
5	C	Mineral Trespass (78.44.330)	C
6	C	Vehicle Prowling 1 (9A.52.095)	D
7	D	Vehicle Prowling 2 (9A.52.100)	E
8		Drugs	
9	E	Possession/Consumption of Alcohol	E
10		(66.44.270)	
11	C	Illegally Obtaining Legend Drug	D
12		(69.41.020)	
13	C+	Sale, Delivery, Possession of Legend	D+
14		Drug with Intent to Sell (69.41.030(2)(a))	
15	E	Possession of Legend	E
16		Drug (69.41.030(2)(b))	
17	B+	Violation of Uniform Controlled	B+
18		Substances Act - Narcotic,	
19		Methamphetamine, or Flunitrazepam	
20		Sale (69.50.401(2) (a) or (b))	
21	C	Violation of Uniform Controlled	C
22		Substances Act - Nonnarcotic Sale	
23		(69.50.401(2)(c))	
24	E	Possession of Marihuana <40 grams	E
25		(69.50.4014)	
26	C	Fraudulently Obtaining Controlled	C
27		Substance (69.50.403)	
28	C+	Sale of Controlled Substance for Profit	C+
29		(69.50.410)	
30	E	Unlawful Inhalation (9.47A.020)	E
31	B	Violation of Uniform Controlled	B
32		Substances Act - Narcotic,	
33		Methamphetamine, or Flunitrazepam	
34		Counterfeit Substances (69.50.4011(2)	
35		(a) or (b))	

1	C	Violation of Uniform Controlled	C
2		Substances Act - Nonnarcotic Counterfeit	
3		Substances (69.50.4011(2) (c), (d), or (e))	
4	((€)) E	Violation of Uniform Controlled	((€)) E
5		Substances Act - Possession of a	
6		Controlled Substance (69.50.4013)	
7	C	Violation of Uniform Controlled	C
8		Substances Act - Possession of a	
9		Controlled Substance (69.50.4012)	
10		Firearms and Weapons	
11	B	Theft of Firearm (9A.56.300)	C
12	B	Possession of Stolen Firearm	C
13		(9A.56.310)	
14	E	Carrying Loaded Pistol Without Permit	E
15		(9.41.050)	
16	C	Possession of Firearms by Minor (<18)	C
17		(9.41.040(2)(a) (vi))	
18	D+	Possession of Dangerous Weapon	E
19		(9.41.250)	
20	D	Intimidating Another Person by use of	E
21		Weapon (9.41.270)	
22		Homicide	
23	A+	Murder 1 (9A.32.030)	A
24	A+	Murder 2 (9A.32.050)	B+
25	B+	Manslaughter 1 (9A.32.060)	C+
26	C+	Manslaughter 2 (9A.32.070)	D+
27	B+	Vehicular Homicide (46.61.520)	C+
28		Kidnapping	
29	A	Kidnap 1 (9A.40.020)	B+
30	B+	Kidnap 2 (9A.40.030)	C+
31	C+	Unlawful Imprisonment (9A.40.040)	D+
32		Obstructing Governmental Operation	
33	D	Obstructing a Law Enforcement Officer	E
34		(9A.76.020)	
35	E	Resisting Arrest (9A.76.040)	E
36	B	Introducing Contraband 1 (9A.76.140)	C

1	C	Introducing Contraband 2 (9A.76.150)	D
2	E	Introducing Contraband 3 (9A.76.160)	E
3	B+	Intimidating a Public Servant	C+
4		(9A.76.180)	
5	B+	Intimidating a Witness (9A.72.110)	C+
6		Public Disturbance	
7	C+	Criminal Mischief with Weapon	D+
8		(9A.84.010(2)(b))	
9	D+	Criminal Mischief Without Weapon	E
10		(9A.84.010(2)(a))	
11	E	Failure to Disperse (9A.84.020)	E
12	E	Disorderly Conduct (9A.84.030)	E
13		Sex Crimes	
14	A	Rape 1 (9A.44.040)	B+
15	B++	Rape 2 (9A.44.050) committed at age 14	B+
16		or under	
17	A-	Rape 2 (9A.44.050) committed at age 15	B+
18		through age 17	
19	C+	Rape 3 (9A.44.060)	D+
20	B++	Rape of a Child 1 (9A.44.073)	B+
21		committed at age 14 or under	
22	A-	Rape of a Child 1 (9A.44.073)	B+
23		committed at age 15	
24	B+	Rape of a Child 2 (9A.44.076)	C+
25	B	Incest 1 (9A.64.020(1))	C
26	C	Incest 2 (9A.64.020(2))	D
27	D+	Indecent Exposure (Victim <14)	E
28		(9A.88.010)	
29	E	Indecent Exposure (Victim 14 or over)	E
30		(9A.88.010)	
31	B+	Promoting Prostitution 1 (9A.88.070)	C+
32	C+	Promoting Prostitution 2 (9A.88.080)	D+
33	E	O & A (Prostitution) (9A.88.030)	E
34	B+	Indecent Liberties (9A.44.100)	C+
35	B++	Child Molestation 1 (9A.44.083)	B+
36		committed at age 14 or under	

1	A-	Child Molestation 1 (9A.44.083)	B+
2		committed at age 15 through age 17	
3	B	Child Molestation 2 (9A.44.086)	C+
4	C	Failure to Register as a Sex Offender	D
5		(9A.44.132)	
6		Theft, Robbery, Extortion, and	
7		Forgery	
8	B	Theft 1 (9A.56.030)	C
9	C	Theft 2 (9A.56.040)	D
10	D	Theft 3 (9A.56.050)	E
11	B	Theft of Livestock 1 and 2 (9A.56.080	C
12		and 9A.56.083)	
13	C	Forgery (9A.60.020)	D
14	A	Robbery 1 (9A.56.200) committed at	B+
15		age 15 or under	
16	A++	Robbery 1 (9A.56.200) committed at	A
17		age 16 or 17	
18	B+	Robbery 2 (9A.56.210)	C+
19	B+	Extortion 1 (9A.56.120)	C+
20	C+	Extortion 2 (9A.56.130)	D+
21	C	Identity Theft 1 (9.35.020(2))	D
22	D	Identity Theft 2 (9.35.020(3))	E
23	D	Improperly Obtaining Financial	E
24		Information (9.35.010)	
25	B	Possession of a Stolen Vehicle	C
26		(9A.56.068)	
27	B	Possession of Stolen Property 1	C
28		(9A.56.150)	
29	C	Possession of Stolen Property 2	D
30		(9A.56.160)	
31	D	Possession of Stolen Property 3	E
32		(9A.56.170)	
33	B	Taking Motor Vehicle Without	C
34		Permission 1 (9A.56.070)	
35	C	Taking Motor Vehicle Without	D
36		Permission 2 (9A.56.075)	
37	B	Theft of a Motor Vehicle (9A.56.065)	C

1		Motor Vehicle Related Crimes	
2	E	Driving Without a License (46.20.005)	E
3	B+	Hit and Run - Death (46.52.020(4)(a))	C+
4	C	Hit and Run - Injury (46.52.020(4)(b))	D
5	D	Hit and Run-Attended (46.52.020(5))	E
6	E	Hit and Run-Unattended (46.52.010)	E
7	C	Vehicular Assault (46.61.522)	D
8	C	Attempting to Elude Pursuing Police	D
9		Vehicle (46.61.024)	
10	E	Reckless Driving (46.61.500)	E
11	D	Driving While Under the Influence	E
12		(46.61.502 and 46.61.504)	
13	B+	Felony Driving While Under the	B
14		Influence (46.61.502(6))	
15	B+	Felony Physical Control of a Vehicle	B
16		While Under the Influence (46.61.504(6))	
17		Other	
18	B	Animal Cruelty 1 (16.52.205)	C
19	B	Bomb Threat (9.61.160)	C
20	C	Escape 1 ¹ (9A.76.110)	C
21	C	Escape 2 ¹ (9A.76.120)	C
22	D	Escape 3 (9A.76.130)	E
23	E	Obscene, Harassing, Etc., Phone Calls	E
24		(9.61.230)	
25	A	Other Offense Equivalent to an Adult	B+
26		Class A Felony	
27	B	Other Offense Equivalent to an Adult	C
28		Class B Felony	
29	C	Other Offense Equivalent to an Adult	D
30		Class C Felony	
31	D	Other Offense Equivalent to an Adult	E
32		Gross Misdemeanor	
33	E	Other Offense Equivalent to an Adult	E
34		Misdemeanor	
35	V	Violation of Order of Restitution,	V
36		Community Supervision, or Confinement	
37		(13.40.200) ²	

¹Escape 1 and 2 and Attempted Escape 1 and 2 are classed as C offenses and the standard range is established as follows:

1st escape or attempted escape during 12-month period - 28 days confinement

2nd escape or attempted escape during 12-month period - 8 weeks confinement

3rd and subsequent escape or attempted escape during 12-month period - 12 weeks confinement

²If the court finds that a respondent has violated terms of an order, it may impose a penalty of up to 30 days of confinement.

JUVENILE SENTENCING STANDARDS

This schedule must be used for juvenile offenders. The court may select sentencing option A, B, C, or D.

OPTION A

JUVENILE OFFENDER SENTENCING GRID

STANDARD RANGE

CURRENT OFFENSE CATEGORY	A++	129 to 260 weeks for all category A++ offenses				
	A+	180 weeks to age 21 for all category A+ offenses				
	A	103-129 weeks for all category A offenses				
	A-	30-40 weeks	52-65 weeks	80-100 weeks	103-129 weeks	103-129 weeks
	B++	15-36 weeks	52-65 weeks	80-100 weeks	103-129 weeks	103-129 weeks
	B+	15-36 weeks	15-36 weeks	52-65 weeks	80-100 weeks	103-129 weeks
	B	LS	LS	15-36 weeks	15-36 weeks	52-65 weeks
	C+	LS	LS	LS	15-36 weeks	15-36 weeks
	C	LS	LS	LS	LS	15-36 weeks
	D+	LS	LS	LS	LS	LS
PRIOR ADJUDICATIONS	D	LS	LS	LS	LS	LS
	E	LS	LS	LS	LS	LS
		0	1	2	3	4 or more

NOTE: References in the grid to days or weeks mean periods of confinement. "LS" means "local sanctions" as defined in RCW 13.40.020.

(1) The vertical axis of the grid is the current offense category. The current offense category is determined by the offense of adjudication.

(2) The horizontal axis of the grid is the number of prior adjudications included in the juvenile's criminal history. Each prior felony adjudication shall count as one point. Each prior violation, misdemeanor, and gross misdemeanor adjudication shall count as 1/4 point. Fractional points shall be rounded down.

(3) The standard range disposition for each offense is determined by the intersection of the column defined by the prior adjudications and the row defined by the current offense category.

(4) RCW 13.40.180 applies if the offender is being sentenced for more than one offense.

(5) A current offense that is a violation is equivalent to an offense category of E. However, a disposition for a violation shall not include confinement.

OR

OPTION B

SUSPENDED DISPOSITION ALTERNATIVE

(1) If the offender is subject to a standard range disposition involving confinement by the department, the court may impose the standard range and suspend the disposition on condition that the offender comply with one or more local sanctions and any educational or treatment requirement. The treatment programs provided to the offender must be either research-based best practice programs as identified by the Washington state institute for public policy or the joint legislative audit and review committee, or for chemical dependency treatment programs or services, they must be evidence-based or research-based best practice programs. For the purposes of this subsection:

(a) "Evidence-based" means a program or practice that has had multiple site random controlled trials across heterogeneous populations demonstrating that the program or practice is effective for the population; and

1 (b) "Research-based" means a program or practice that has some
2 research demonstrating effectiveness, but that does not yet meet the
3 standard of evidence-based practices.

4 (2) If the offender fails to comply with the suspended
5 disposition, the court may impose sanctions pursuant to RCW 13.40.200
6 or may revoke the suspended disposition and order the disposition's
7 execution.

8 (3) An offender is ineligible for the suspended disposition
9 option under this section if the offender:

10 (a) Is adjudicated of an A+ or A++ offense;

11 (b) Is fourteen years of age or older and is adjudicated of one
12 or more of the following offenses:

13 (i) A class A offense, or an attempt, conspiracy, or solicitation
14 to commit a class A offense;

15 (ii) Manslaughter in the first degree (RCW 9A.32.060);

16 (iii) Assault in the second degree (RCW 9A.36.021), extortion in
17 the first degree (RCW 9A.56.120), kidnapping in the second degree
18 (RCW 9A.40.030), drive-by shooting (RCW 9A.36.045), vehicular
19 homicide (RCW 46.61.520), hit and run death (RCW 46.52.020(4)(a)), or
20 manslaughter 2 (RCW 9A.32.070); or

21 (iv) Violation of the uniform controlled substances act (RCW
22 69.50.401(2) (a) and (b)), when the offense includes infliction of
23 bodily harm upon another or when during the commission or immediate
24 withdrawal from the offense the respondent was armed with a deadly
25 weapon;

26 (c) Is ordered to serve a disposition for a firearm violation
27 under RCW 13.40.193;

28 (d) Is adjudicated of a sex offense as defined in RCW 9.94A.030;
29 or

30 (e) Has a prior option B disposition.

31 **OR**

32 **OPTION C**

33 **CHEMICAL DEPENDENCY/MENTAL HEALTH DISPOSITION ALTERNATIVE**

34 If the juvenile offender is subject to a standard range
35 disposition of local sanctions or 15 to 36 weeks of confinement and
36 has not committed a B++ or B+ offense, the court may impose a
37 disposition under RCW 13.40.160(4) and 13.40.165.

38 **OR**

OPTION D
MANIFEST INJUSTICE

If the court determines that a disposition under option A, B, or C would effectuate a manifest injustice, the court shall impose a disposition outside the standard range under RCW 13.40.160(2).

Sec. 17. RCW 2.24.010 and 2013 c 27 s 3 are each amended to read as follows:

(1) There may be appointed in each county or judicial district, by the judges of the superior court having jurisdiction therein, one or more court commissioners for said county or judicial district. Each such commissioner shall be a citizen of the United States and shall hold the office during the pleasure of the judges making the appointment.

(2)(a) There may be appointed in counties with a population of more than four hundred thousand, by the presiding judge of the superior court having jurisdiction therein, one or more attorneys to act as criminal commissioners to assist the superior court in disposing of adult criminal cases. Such criminal commissioners shall have power, authority, and jurisdiction, concurrent with the superior court and the judges thereof, in adult criminal cases, to preside over arraignments, preliminary appearances, initial extradition hearings, and noncompliance proceedings pursuant to RCW 9.94A.6333 or 9.94B.040; accept pleas if authorized by local court rules; appoint counsel; make determinations of probable cause; set, amend, and review conditions of pretrial release; set bail; set trial and hearing dates; authorize continuances; accept waivers of the right to speedy trial; and authorize and issue search warrants and orders to intercept, monitor, or record wired or wireless telecommunications or for the installation of electronic taps or other devices to include, but not be limited to, vehicle global positioning system or other mobile tracking devices with all the powers conferred upon the judge of the superior court in such matters.

(b) Criminal commissioners shall also have the authority to conduct resentencing hearings and to vacate convictions related to *State v. Blake*, No. 96873-0 (Feb. 25, 2021). Criminal commissioners may be appointed for this purpose regardless of the population of the county served by the appointing court.

1 (c) The county legislative authority must approve the creation of
2 criminal commissioner positions.

3 **Sec. 18.** RCW 2.24.040 and 2009 c 28 s 1 are each amended to read
4 as follows:

5 Such court commissioner shall have power, authority, and
6 jurisdiction, concurrent with the superior court and the judge
7 thereof, in the following particulars:

8 (1) To hear and determine all matters in probate, to make and
9 issue all proper orders therein, and to issue citations in all cases
10 where same are authorized by the probate statutes of this state.

11 (2) To grant and enter defaults and enter judgment thereon.

12 (3) To issue temporary restraining orders and temporary
13 injunctions, and to fix and approve bonds thereon.

14 (4) To act as referee in all matters and actions referred to him
15 or her by the superior court as such, with all the powers now
16 conferred upon referees by law.

17 (5) To hear and determine all proceedings supplemental to
18 execution, with all the powers conferred upon the judge of the
19 superior court in such matters.

20 (6) To hear and determine all petitions for the adoption of
21 children and for the dissolution of incorporations.

22 (7) To hear and determine all applications for the commitment of
23 any person to the hospital for the insane, with all the powers of the
24 superior court in such matters: PROVIDED, That in cases where a jury
25 is demanded, same shall be referred to the superior court for trial.

26 (8) To hear and determine all complaints for the commitments of
27 minors with all powers conferred upon the superior court in such
28 matters.

29 (9) To hear and determine ex parte and uncontested civil matters
30 of any nature.

31 (10) To grant adjournments, administer oaths, preserve order,
32 compel attendance of witnesses, and to punish for contempts in the
33 refusal to obey or the neglect of the court commissioner's lawful
34 orders made in any matter before the court commissioner as fully as
35 the judge of the superior court.

36 (11) To take acknowledgments and proofs of deeds, mortgages and
37 all other instruments requiring acknowledgment under the laws of this
38 state, and to take affidavits and depositions in all cases.

1 (12) To provide an official seal, upon which shall be engraved
2 the words "Court Commissioner," and the name of the county for which
3 he or she may be appointed, and to authenticate his official acts
4 therewith in all cases where same is necessary.

5 (13) To charge and collect, for his or her own use, the same fees
6 for the official performance of official acts mentioned in
7 subsections (4) and (11) of this section as are provided by law for
8 referees and notaries public.

9 (14) To hear and determine small claims appeals as provided in
10 chapter 12.36 RCW.

11 (15) In adult criminal cases, to preside over arraignments,
12 preliminary appearances, initial extradition hearings, and
13 noncompliance proceedings pursuant to RCW 9.94A.6333 or 9.94B.040;
14 accept pleas if authorized by local court rules; appoint counsel;
15 make determinations of probable cause; set, amend, and review
16 conditions of pretrial release; set bail; set trial and hearing
17 dates; authorize continuances; ~~((and))~~ accept waivers of the right to
18 speedy trial; and conduct resentencing hearings and hearings to
19 vacate convictions related to *State v. Blake*, No. 96873-0 (Feb. 25,
20 2021).

21 **Sec. 19.** RCW 9.94A.728 and 2018 c 166 s 2 are each amended to
22 read as follows:

23 (1) No person serving a sentence imposed pursuant to this chapter
24 and committed to the custody of the department shall leave the
25 confines of the correctional facility or be released prior to the
26 expiration of the sentence except as follows:

27 (a) An offender may earn early release time as authorized by RCW
28 9.94A.729;

29 (b) An offender may leave a correctional facility pursuant to an
30 authorized furlough or leave of absence. In addition, offenders may
31 leave a correctional facility when in the custody of a corrections
32 officer or officers;

33 (c)(i) The secretary may authorize an extraordinary medical
34 placement for an offender when all of the following conditions exist:

35 (A) The offender has a medical condition that is serious and is
36 expected to require costly care or treatment;

37 (B) The offender poses a low risk to the community because he or
38 she is currently physically incapacitated due to age or the medical
39 condition or is expected to be so at the time of release; and

1 (C) It is expected that granting the extraordinary medical
2 placement will result in a cost savings to the state.

3 (ii) An offender sentenced to death or to life imprisonment
4 without the possibility of release or parole is not eligible for an
5 extraordinary medical placement.

6 (iii) The secretary shall require electronic monitoring for all
7 offenders in extraordinary medical placement unless the electronic
8 monitoring equipment interferes with the function of the offender's
9 medical equipment or results in the loss of funding for the
10 offender's medical care, in which case, an alternative type of
11 monitoring shall be utilized. The secretary shall specify who shall
12 provide the monitoring services and the terms under which the
13 monitoring shall be performed.

14 (iv) The secretary may revoke an extraordinary medical placement
15 under this subsection (1)(c) at any time.

16 (v) Persistent offenders are not eligible for extraordinary
17 medical placement;

18 (d) The governor, upon recommendation from the clemency and
19 pardons board, may grant an extraordinary release for reasons of
20 serious health problems, senility, advanced age, extraordinary
21 meritorious acts, or other extraordinary circumstances;

22 (e) No more than the final twelve months of the offender's term
23 of confinement may be served in partial confinement for aiding the
24 offender with: Finding work as part of the work release program under
25 chapter 72.65 RCW; or reestablishing himself or herself in the
26 community as part of the parenting program in RCW 9.94A.6551. This is
27 in addition to that period of earned early release time that may be
28 exchanged for partial confinement pursuant to RCW 9.94A.729(5)(d);

29 (f) No more than the final six months of the offender's term of
30 confinement may be served in partial confinement as home detention as
31 part of the graduated reentry program developed by the department
32 under RCW 9.94A.733;

33 (g) The governor may pardon any offender;

34 (h) The department may release an offender from confinement any
35 time within ten days before a release date calculated under this
36 section;

37 (i) An offender may leave a correctional facility prior to
38 completion of his or her sentence if the sentence has been reduced as
39 provided in RCW 9.94A.870;

1 (j) Notwithstanding any other provisions of this section, an
2 offender sentenced for a felony crime listed in RCW 9.94A.540 as
3 subject to a mandatory minimum sentence of total confinement shall
4 not be released from total confinement before the completion of the
5 listed mandatory minimum sentence for that felony crime of conviction
6 unless allowed under RCW 9.94A.540; and

7 (k) Any person convicted of one or more crimes committed prior to
8 the person's eighteenth birthday may be released from confinement
9 pursuant to RCW 9.94A.730.

10 (2) Notwithstanding any other provision of this section, an
11 offender entitled to vacation of a conviction or the recalculation of
12 his or her offender score pursuant to *State v. Blake*, No. 96873-0
13 (Feb. 25, 2021), may be released from confinement pursuant to a court
14 order if the offender has already served a period of confinement that
15 exceeds his or her new standard range. This provision does not create
16 an independent right to release from confinement prior to
17 resentencing.

18 (3) Offenders residing in a juvenile correctional facility
19 placement pursuant to RCW 72.01.410(1)(a) are not subject to the
20 limitations in this section.

21 **Sec. 20.** RCW 10.64.110 and 1977 ex.s. c 259 s 1 are each amended
22 to read as follows:

23 (1) Following June 15, 1977, except as provided in subsection (3)
24 of this section, there shall be affixed to the original of every
25 judgment and sentence of a felony conviction in every court in this
26 state and every order adjudicating a juvenile to be a delinquent
27 based upon conduct which would be a felony if committed by an adult,
28 a fingerprint of the defendant or juvenile who is the subject of the
29 order. When requested by the clerk of the court, the actual affixing
30 of fingerprints shall be done by a representative of the office of
31 the county sheriff.

32 (2) The clerk of the court shall attest that the fingerprints
33 appearing on the judgment in sentence, order of adjudication of
34 delinquency, or docket, is that of the individual who is the subject
35 of the judgment or conviction, order, or docket entry.

36 (3) Amended judgment and sentences issued pursuant to *State v.*
37 *Blake*, No. 96873-0 (Feb. 25, 2021), are exempt from the
38 fingerprinting requirements in subsection (1) of this section when
39 there are no additional offenses of conviction from the original

1 judgment and sentence and the defendant is in custody in a
2 correctional facility. In such cases, the amended judgment and
3 sentence shall reference the original judgment and sentence and the
4 fingerprints affixed thereto.

5 NEW SECTION. **Sec. 21.** The *State v. Blake* reimbursement account
6 is created in the state treasury. Moneys in the account may be spent
7 only after appropriation. Expenditures from the account may be used
8 only for state and local government costs resulting from the supreme
9 court's decision in *State v. Blake*, No. 96873-0 (Feb. 25, 2021), and
10 to reimburse individuals for legal financial obligations paid in
11 connection with sentences that have been invalidated as a result of
12 the decision.

13 NEW SECTION. **Sec. 22.** The appropriations in this section are
14 provided to the health care authority community behavioral health
15 program and are subject to the following conditions and limitations:

16 (1) The following sums, or so much thereof as may be necessary,
17 are each appropriated: \$25,000,000 from the state general fund for
18 the fiscal year ending June 30, 2022; and \$20,000,000 from the state
19 general fund for the fiscal year ending June 30, 2023. The amounts in
20 this subsection are provided solely for the authority to contract
21 with behavioral health administrative service organizations to
22 implement the statewide recovery navigator program established in
23 section 2 of this act and for related technical assistance to support
24 this implementation. This includes funding for recovery navigator
25 teams to provide community-based outreach and case management
26 services based on the law enforcement assisted diversion model and
27 for technical assistance support from the law enforcement assisted
28 diversion national support bureau.

29 (2) The following sums, or so much thereof as may be necessary,
30 are each appropriated: \$1,673,000 from the state general fund for the
31 fiscal year ending June 30, 2022; \$3,114,000 from the state general
32 fund for the fiscal year ending June 30, 2023; and \$3,890,000, from
33 the general fund-federal account for the fiscal biennium ending June
34 30, 2023. The amounts in this subsection are provided solely for the
35 authority to implement clubhouse services in every region of the
36 state.

37 (3) The following sums, or so much thereof as may be necessary,
38 are each appropriated: \$5,000,000 from the state general fund for the

1 fiscal year ending June 30, 2022; and \$7,500,000 from the state
2 general fund for the fiscal year ending June 30, 2023. The amounts in
3 this subsection are provided solely for the authority to implement
4 the homeless outreach stabilization team program, pursuant to section
5 5(1) of this act.

6 (4) The following sums, or so much thereof as may be necessary,
7 are each appropriated: \$2,500,000 from the state general fund for the
8 fiscal year ending June 30, 2022; and \$2,500,000 from the state
9 general fund for the fiscal year ending June 30, 2023. The amounts in
10 this subsection are provided solely for the authority to expand
11 efforts to provide opioid use disorder medication in city, county,
12 regional, and tribal jails.

13 (5) The following sums, or so much thereof as may be necessary,
14 are each appropriated: \$500,000 from the state general fund for the
15 fiscal year ending June 30, 2022; and \$500,000 from the state general
16 fund for the fiscal year ending June 30, 2023. The amounts in this
17 subsection are provided solely for the authority to expand opioid
18 treatment network programs for people with co-occurring opioid and
19 stimulant use disorder.

20 (6) The following sums, or so much thereof as may be necessary,
21 are each appropriated: \$1,400,000 from the state general fund for the
22 fiscal year ending June 30, 2022; and \$1,400,000 from the state
23 general fund for the fiscal year ending June 30, 2023. The amounts in
24 this subsection are provided solely for behavioral health
25 administrative service organizations to develop regional recovery
26 navigator program plans pursuant to section 2 of this act and to
27 establish positions focusing on regional planning to improve access
28 to and quality of regional behavioral health services with a focus on
29 integrated care.

30 (7) The following sums, or so much thereof as may be necessary,
31 are each appropriated: \$75,000 from the state general fund for the
32 fiscal year ending June 30, 2022; and \$75,000 from the state general
33 fund for the fiscal year ending June 30, 2023. The amounts in this
34 subsection are provided solely for the authority to contract with an
35 organization with expertise in supporting efforts to increase access
36 to and improve quality in recovery housing and recovery residences.
37 This funding shall be used to increase recovery housing availability
38 through partnership with private landlords, increase accreditation of
39 recovery residences statewide, operate a grievance process for
40 resolving challenges with recovery residences, and conduct a recovery

capital outcomes assessment for individuals living in recovery residences.

(8) The following sums, or so much thereof as may be necessary, are each appropriated: \$500,000 from the state general fund for the fiscal year ending June 30, 2022; and \$500,000 from the state general fund for the fiscal year ending June 30, 2023. The amounts in this subsection are provided solely for the authority to provide short-term housing vouchers for individuals with substance use disorders.

(9) The following sums, or so much thereof as may be necessary, are each appropriated: \$250,000 from the state general fund for the fiscal year ending June 30, 2022; and \$250,000 from the state general fund for the fiscal year ending June 30, 2023. The amounts in this subsection are provided solely for the authority to issue grants for substance use disorder family navigator services.

(10) The following sums, or so much thereof as may be necessary, are each appropriated: \$200,000 from the state general fund for the fiscal year ending June 30, 2022; and \$200,000 from the state general fund for the fiscal year ending June 30, 2023. The amounts in this subsection are provided solely for the authority to convene and provide staff and contracted services support to the recovery oversight committee established in section 1 of this act.

(11) The following sums, or so much thereof as may be necessary, are each appropriated: \$2,565,000 from the state general fund for the fiscal year ending June 30, 2022; and \$2,565,000 from the state general fund for the fiscal year ending June 30, 2023. The amounts in this subsection are provided solely for staff and contracted services support for the authority to develop and implement the recovery services plan established in section 1 of this act and to carry out other requirements of this act. Within these amounts, funding is provided for the authority to:

(a) Establish an occupational nurse consultant position within the authority to provide contract oversight, accountability, performance improvement activities, and to ensure medicaid managed care organization plan compliance with provisions in law and contract related to care transitions work with local jails.

(b) Establish a position within the authority to create and oversee a program to initiate and support emergency department programs for inducing medications for patients with opioid use disorder paired with a referral to community-based outreach and case management programs.

1 NEW SECTION. **Sec. 23.** The appropriation in this section is
2 provided to the administrative office of the courts and is subject to
3 the following conditions and limitations:

4 The following sums, or so much thereof as may be necessary, are
5 each appropriated: \$2,250,000 from the state general fund for the
6 fiscal year ending June 30, 2022; and \$2,250,000 from the state
7 general fund for the fiscal year ending June 30, 2023. The amounts in
8 this subsection are provided solely to fund grants for therapeutic
9 courts operated by municipalities and district courts. The
10 administrative office of the courts must allocate grant funding based
11 upon a formula established by the administrative office of the
12 courts. The formula must distribute the grant funding equitably
13 between those therapeutic courts located east of the crest of the
14 Cascade mountains and those therapeutic courts located west of the
15 crest of the Cascade mountains. Multiple jurisdictions served by a
16 single municipal court or district court may apply for funds as a
17 single entity. Local jurisdictions receiving grant funding for
18 therapeutic courts must use funding to identify individuals before
19 the courts with substance use disorders or other behavioral health
20 needs and engage those individuals with community-based therapeutic
21 interventions.

22 NEW SECTION. **Sec. 24.** The appropriation in this section is
23 provided to the department of commerce and is subject to the
24 following conditions and limitations:

25 The following sums, or so much thereof as may be necessary, are
26 each appropriated: \$500,000 from the state general fund for the
27 fiscal year ending June 30, 2022; and \$1,000,000 from the state
28 general fund for the fiscal year ending June 30, 2023. The amounts in
29 this subsection are provided solely for the department to provide
30 grants for the operational costs of new staffed recovery residences
31 which serve individuals with substance use disorders who require more
32 support than a level 1 recovery residence.

33 NEW SECTION. **Sec. 25.** The appropriation in this section is
34 provided to the criminal justice training commission and is subject
35 to the following conditions and limitations:

36 The following sums, or so much thereof as may be necessary, are
37 each appropriated: \$150,000 from the state general fund for the
38 fiscal year ending June 30, 2022; and \$150,000 from the state general

1 fund for the fiscal year ending June 30, 2023. The amounts in this
2 subsection are provided solely for the commission to compensate
3 trainer time to deliver the curriculum related to law enforcement
4 interactions with persons with a substance use disorder pursuant to
5 section 7 of this act.

6 NEW SECTION. **Sec. 26.** Sections 1 through 11 and 13 through 21
7 of this act are necessary for the immediate preservation of the
8 public peace, health, or safety, or support of the state government
9 and its existing public institutions, and take effect immediately.

10 NEW SECTION. **Sec. 27.** Section 11 of this act expires July 1,
11 2022.

12 NEW SECTION. **Sec. 28.** Section 12 of this act takes effect July
13 1, 2022.

14 NEW SECTION. **Sec. 29.** Sections 8 through 10, 12, 15, and 16 of
15 this act expire July 1, 2023.

16 NEW SECTION. **Sec. 30.** If any provision of this act or its
17 application to any person or circumstance is held invalid, the
18 remainder of the act or the application of the provision to other
19 persons or circumstances is not affected.

--- END ---

CITY COUNCIL 3.C
CITY OF LYNNWOOD
CITY COUNCIL

TITLE: Briefing No. 4/6: Transportation; Operations and Maintenance Update

DEPARTMENT CONTACT: Bill Franz, Public Works

SUMMARY:

Public Works will provide a briefing update on the status of our streets and traffic operations and maintenance functions.

DEPARTMENT ATTACHMENTS

Description:

[Transportation O&M Council briefing 6 1 2021.pdf](#)

Transportation Operations and Maintenance Update

Presentation to City Council

June 1, 2021

City of Lynnwood Vision Statement

“To invest in efficient, integrated, local and regional transportation systems.”

National Citizen Surveys

Residents' concerns about transportation and traffic are among the highest, if not the highest rated, in surveys.

Components of Transportation

6/1/21 Operations & Maintenance Briefing

Operations and Maintenance

Traffic Signal Maintenance

- Traffic operations center
- Signal timing
- Routine maintenance

Traffic Signal Rebuild Program

- Signal poles
- Cabinets
- Wiring
- Push buttons

Street Maintenance

- Potholes/Crack sealing 3/15/21
- Lane Striping/Traffic Signs
- Vegetation Control 9/8/20

Pavement Program

- Chip seal 3/15/21
- Overlays 3/15/21

ADA Program/Sidewalks

- ADA Transition Plan 9/21/20
- Sidewalk maintenance/repair 9/21/20

New Capital Projects

Nonmotorized

- New sidewalks/trails
- Bike lanes Scriber Creek Trail 2/16/21

Transportation Capital Projects

- Capacity 196th St Project 11/16/20,
- Safety 4/5/21
- Economic

Traffic Planning/Policy

- Growth forecasting/modeling
- Level of Service
- Traffic Safety Plan
- Complete Streets Policy
- Active Transportation Plan
- Park Access Study
- School Safety Study 9/16/20

Funding

- Traffic Impact Fees
- Transportation Benefit District
- Grants
- Real-Estate Excise Tax
- Economic Development Investment Fund
- City general funds

Red dates represent dates discussed with Council

This evening's discussion

3 Main Areas of Transportation Needs

- Routine Maintenance and Operations
- Capital Infrastructure Reinvestment
- Capital Infrastructure Investment Projects

Traffic Signal Operations



Traffic Signal Operation

- Repair, maintenance and upgrades of traffic signal and interconnect systems
- Full rebuild of old traffic signals
- Operation of Traffic Management Center at City Hall

Statistics:

- 65 Traffic Signals
- 20 Lighted Pedestrian Crossings

Current Annual Funding:

- \$650,000 for Operations and Maintenance

Annual Funding Needed:

- \$800,000 ideally



Traffic Crew:

Total FTE's = 4

- 1 Traffic Engineer
 - Performs traffic engineering, development plan review and approvals, etc.
 - Network engineer for Intelligent Transportation System of 65 remote signal controllers, fiber network, and Traffic Management Center Central Server
- 1 Asst. Traffic Engineer/Project Manager
 - Assists Traffic Engineer
 - Performs corridor timing
 - Performs traffic modeling
- 2 Traffic Signal Technicians
 - Maintains 65 traffic signals and City owned street lights

Street Crews: Routine M&O



Street Crews Responsibilities

- 300 Lane Miles of Streets
- 120 Miles of Sidewalks
- 4400 Traffic Signs
- 160,000 Traffic Buttons
- 95,000 Square Feet of Thermoplastic
- 1000 Gallons of Paint

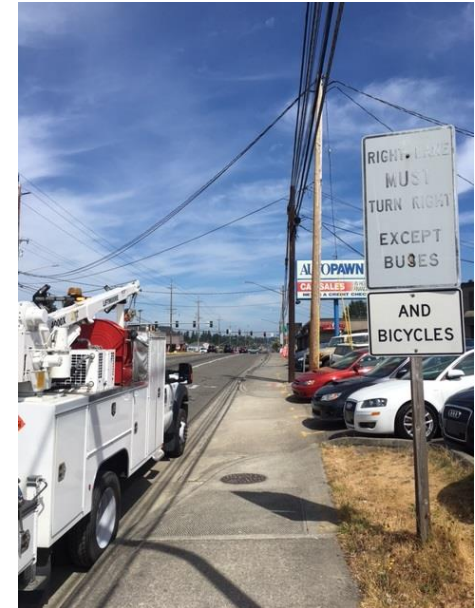
Street Crew:

Total FTE's = 5.25

- 1 Supervisor, shared with Stormwater
 - Provides oversight, tracking, management
- 1 Foreman, shared with Stormwater
 - Schedules work, supervises, occasionally assists crews in field
- 4 Maintenance Workers
 - Functions individually or in as a crew depending on need to maintain all of system except traffic signals and street lights

Street and Traffic Crews: Resource thoughts.

- 2021-22 Biennial Budget: \$5.2M
- Historic Revenues stagnant
 - General Fund: ~\$2M
 - Gas Tax: ~\$1.9M
- TBD Funds: \$760,000 and growing
- No. of FTE's has not increased
- More reactive than proactive
- Falling behind



Fund 111: Street Fund Context and Comparison

Budgets	FTE's			Yearly Budget		
	1992	2021	%Change	1992	2021	Amt Changed
Street Fund	11	9.25	-16%	\$ 1,375,950	\$ 2,674,605	1.9 times
General Fund Total	203	267.35	+32%	\$ 16,826,261	\$ 49,100,169	2.9 times

Transportation Funding: Needs and Revenues

Maintenance Only

Program:	Estimated Biennial Need:	2021-2022 Budget	General Fund Allocation	MV Fuel Tax	Other (licences, permits, investments, etc.)	REET Funds	TBD Contribution from \$20 Tabs (\$500k/yr)	Utility Contribution to Street Overlays
Operations & Maint., Street Fund 111	\$ 6,000,000	\$ 5,349,209	\$ 2,041,065	\$ 1,865,123	\$ 683,021		\$ 760,000	

What Does This All Mean?

- We are falling dangerously behind with implications to:
 - Safety
 - Economic Development
 - Long-term Financial Sustainability
 - Aesthetics
 - Meeting capacity needs of the future
 - Achieving the City's Vision

Specific Concerns:

These are indicative of types of issues that we don't have time to address well:



Next Steps

Two more transportation briefings this year.

- Transportation planning and analysis
- Summary of Funding Challenges



Thank you!