

I. Statement of the Problem

A. Tribal Information: The Makah Tribe is a federally recognized Indian Tribe of approximately 2,940 enrolled members on a forty-seven square mile reservation located in Neah Bay, WA. Bordered to the north by the Strait of Juan de Fuca and to the west by the Pacific Ocean, the Makah Reservation is the most northwestern point on the contiguous United States. The closest hospitals and shopping centers are located in Port Angeles and Forks, located 75 and 60 miles away, respectively, which makes the Makah Reservation quite remote as well as rural. Neah Bay often experiences rough winters where the annual rainfall is well above 100 inches per year; windstorms can have wind gusts up to 100 mph. The heavy rainfall typically results in mudslides over the only road to Neah Bay, which can suspend access both in and out of Neah Bay, essentially cutting residents off from the outside world. As the residents of Neah Bay are located so far away, and at times must rely solely on their own resources during storms and emergencies, it is paramount that the tribe has a system in place that provides guidance of authority and assistance.

The Makah signed a Treaty with the United States government in 1855 that transferred most of their tribal land, in exchange for guarantees of the continuation of certain whaling, hunting, fishing, and gathering rights as well as a continued provision of education and medical care by the U.S. Government. It was not until the Makah Constitution was enacted in 1936 that the reservation, for the first time since 1855, was brought back under tribal control. The 1936 Makah Constitution established a tribal council, a tribal court and defined its duties, powers and limitations. The 1936 constitution further specifically adopts a Bill of Rights, including civil liberties (freedom of religion, conscience, speech, press, assembly, and association). By doing so, the Makah Tribal Court system is constitutionally created and

its operations are further defined by tribal code. The Makah Tribe is governed by a five person council, who serve staggered three-year terms. The Makah Tribal Council (MTC) is ultimately responsible for the policies and procedures of the Makah Tribal Organization and oversees the administration of the various programs and services provided to tribal and community members.

B. *Tribal Organization Information*: The Makah Tribe has two departments that oversee the public safety and judicial aspects of the justice system: Neah Bay Public Safety and the Makah Tribal Court, respectively. ***Neah Bay Public Safety***: Strives to be the premier law enforcement agency by building trust, creating partnerships, and sharing leadership within the community for a safer Makah Reservation. Neah Bay Public Safety is comprised of the Police Department, Corrections / Dispatch, Natural Resources Enforcement (NRE), Methamphetamine Grant Coordinator, Animal Control, Emergency Medical Services (EMS), Emergency Preparedness Office and the Volunteer Fire Department. The Police Department consists of the Chief of Police, one Sergeant, one Detective, six Patrol Officers, and a Support Specialist. Corrections and Dispatch consist of one Specialty Officer Sergeant (Corrections / Dispatch), three Specialty Officers (Corrections / Dispatch) and one Relief Specialty Officer. Corrections consists of one Sergeant and two Corrections Officers. Natural Resources Enforcement (NRE) has one Sergeant and two NRE Officers. Emergency Medical Services (EMS) has one full time Coordinator, one Assistant Coordinator and Emergency Medical Technicians (EMT's). The Fire Department has a Fire Chief, Assistant Fire Chief and a trained Volunteer Staff.

Neah Bay Public Safety has been dealing with several major issues this year that include: drug dealing, drug abuse, theft, DUI and physical control of a motor vehicle while under the

influence. In 2017, NBPS responded to a total of 1,745 calls for service. While 25% of the calls are attributed to intoxication, drug possession, possession of drug paraphernalia, and speeding- the majority of officers are responding to warrant arrest, domestic violence, and theft.

Adult Corrections Center: In 2016, the new Adult Corrections Center (ACC) and Public Safety offices officially opened. This new facility was made possible with DOJ grant funds and tribal hard dollars in 2011. The ACC has 16 beds, with the cells built to ACA and BIA compliant standards. There are ADA compliant cells to accommodate individuals with disabilities. The new facility also has visitation rooms, conference room/training room, day room and a larger outside recreational area. The areas of improvement, such as exterior parking and storage areas, will be completed this year. The total amount of incarcerations for the ACC in FY2017 was 231, with an average of 19 new admissions per month. Last year, we were the second Tribal Agency nationwide to launch the Tribal Access Program (TAP). This has expanded our ability to enter information into NCIC and help address the major gap of protective orders (temporary and permanent) in to the National Data base. We also now have the ability to perform finger print based background checks and in custody submissions.

Natural Resources Enforcement: Program-Mission/Philosophy: The responsibilities are to enforce compliance of all fishing, hunting, and forestry products; to enforce compliance on members and non-members that violates the regulations and ordinances of the Makah Tribe.

The Makah Tribal Court: Provides judicial services for the community involving criminal actions, civil actions and juvenile matters to include: criminal offenses, civil disputes, and cases brought forward by Makah Family Services (MFS), such as minors-in-need-of-care, and custody and placement issues. Makah Tribal Court in 2016 includes the following

programs and projects: Makah Healing to Wellness Court, development of a Domestic Violence Court, Makah Law and Order Code updates/revisions and grant management. Staffing of the Makah Tribal Court includes the Chief Judge, Associate Judge, Court Clerk, Deputy Court Clerk, Healing to Wellness Court & Domestic Violence Court Coordinator, Court Administrator and Support Specialist. Of the 249 charges filed by the Prosecutor's office, approximately 45% were either drug-related or DUI/Traffic/Motor Vehicle related. The services provided by the Makah Tribal Court include:

This program is based upon best practice standards for tribal drug courts, including wrap-around case management provided by a case manager, Judge, chemical dependency providers, mental health providers, law enforcement, probation, prosecution and public defenders. MHC is currently a grant funded program that will continue through September 30, 2019. This grant provides funding for two healing court positions; one case manager and one part time support specialist.

There are currently 14 clients in the Makah Healing Court program that have entered the program through various referral points such as a deferred sentence order, probation referral and self-referral without a criminal charge. As a baseline, participants are required to meet with the MHC case manager weekly, obtain a chemical dependency evaluation and follow all recommendations, attend weekend check-ins at the Neah Bay Police Department and attend four self-help meetings per week and random urinalysis screenings. In addition, this program assists participants with obtaining their driver's licenses, education and employment, transportation, child care and plans to pay off fines/restitution. Last year, three clients graduated from IOP and are now in Out-Patient (OP). Two clients received their driver's licenses and two clients are now working full-time. Two clients went to an in-patient

treatment facility and successfully completed. Clients have participated in several cultural events held by the Healing Court program, including olive shell gathering and cleaning, drum making and basket weaving.

Domestic Violence Court: Having considered the current and expected court case load and types of DV cases as well as other factors; it is realized that we don't need to develop a new court system with different court procedures, i.e., such as the Healing Court. Instead, a specialized Domestic Violence docket is most feasible whereby DV cases will be heard by the same judge. Also note that DV cases may originate from either the Criminal division and or the Juvenile/MINOC division—with proper measures taken to protect confidentiality. The models for each division will apply the Court's philosophy focusing on the goals and principles of healing, respect, and accountability. It is expected that a cultural component will be added also, which will strengthen commitment toward accomplishing these goals. Thus, the Makah Tribal Court will have a separate Domestic Violence Court docket spacing for DV cases to be heard and seen to completion. In line with our purpose, principles and goals -- accountability and rehabilitative services for offenders will be required of DV offenders. Toward achieving this end, a certified DV counselor for perpetrators is available for the offenders group in Neah Bay twice a month.

SORNA Requirement: The Makah Tribal SORNA program is fully compliant with the U.S. SMART Office, and we provide sex offender registry services through our adult probation officer.

Juvenile Detention: Makah juvenile offenders are either detained in Clallam County Juvenile Detention/Crisis Residential Center in Port Angeles, or they are placed in relative or family homes on or off the reservation.

Services for Victims of Crimes: The Makah Tribe is currently working to further define the coordination within the various departments who provide services to crime victims and/or survivors. The majority of services that are offered are provided through a variety of “silos” including: *Makah Family Services (MFS):* MFS provides child protection services, foster care, and protection for vulnerable adults and juvenile probation. MFS has formal partnerships with Washington State for the Tribal/State coordination of National Indian Child Welfare Act cases occurring off reservation as well as other services. *Integrative Medicine Department-* provides non-medical treatment such as physical therapy, massage therapy, and acupuncture. Makah Recovery Services, a program within the Integrative Medicine Department, provides physical & mental health care services as well as chemical dependency outpatient treatment services. MRS began providing direct mental health care counseling services in 2011. Before this time, patients who needed this type of service had to travel an hour to Forks or even further to Port Angeles, which meant that in actual practice mental health care was extremely limited and not culturally congruent. The MRS program has grown in staff in the years since implementation, offering two counselors for Mental Health Care Therapy who focus on children and teens. MRS also has three Chemical Dependency Professionals who provide chemical dependency assessments, counseling services, groups, as well as intensive outpatient treatment activities. What has made this successful is the large amount of cultural integration, making the treatment services much more relevant to the clients, therefore promoting long-term success. In the past year, MRS had served 90 unduplicated clients, conducted 52 assessments, had 510 patient encounters for Intensive-Outpatient Treatment (IOP), conducted 272 one-on-one counseling sessions, and had 154 participants in the weekly group. An additional 27 clients completed the program.

C. Crime Rate Reports: Meth Grant Coordinator:

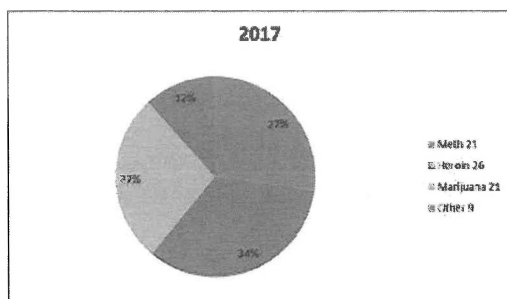


Figure 1, 2017 NBPS Drug Related cases

The information in this document was collected from the NBPS ITI reporting system where our police officers have recorded the following data: whether or not a child was affected by the person(s) in the case; whether the suspect(s) were a male or female; type of drug(s) and weights that were confiscated in the

incident; if paraphernalia was present; date; and money that may have been seized. Based on the information that was gathered, some of the cases had drugs sent out for enhanced lab testing.

Figure 1 is a graph representation of the accumulative data in *Attachment 1, NBPS Full Report 2011-2017*.

In the table below, these are the cases from 2013-2017 that have case information indicating children under the age of 18 involved in any way with criminal acts involving illicit drugs on the Makah Reservation; whether the children themselves were the offender or if the parent/guardian were the offender. Any case involving minors and illegal substances has thus deemed the children involved as "At Risk" or "Drug Endangered Children" (DEC): any child who may be exposed to chronic or recreational drug use. The main goal of the NBPS DEC Initiative is to break that cycle of generational status quo. Many children have grown up in an environment that exposes them to not only drug use, but the dangers of the people who may be using around them.

Makah Tribe Comprehensive Opioid Abuse Site-Based Program Application NARRATIVE
 FY 2018

Year	Case Count	Cases Involving Children	Percentage
2013	38	5	13%
2014	42	6	14%
2015	57	12	21%
2016	74	20	27%
2017	63	23	36%

It is important to note that while alcohol is classified as an illegal substance on the Makah Reservation, these statistics do not include those cases presently. As clearly indicated in the table, both the cases themselves as well as the amount of cases involving children have risen sharply in the past few years. Not only is there an increase in both drug-related arrests and amount of cases that have DEC identified, the only healthcare facility on the Makah Reservation, The Sophie Trettevick Indian Health Center (STIHC) and the Makah EMT Department have seen an increase in death by opioid overdose, as well as non-fatal opioid overdoses. This epidemic of addiction has rattled our small community leading the tribe to take pro-active and preventative action to curb the amount of fatalities in three very tangible ways: 1) by dispersing Naloxone overdose kits to community members, tribal departments, and other areas within the community so that immediate action can be taken in the event of an overdose at just about any location within the Makah Reservation, 2) by training community members to be Recovery Coaches, thereby increasing the amount of people trained to assist those on the road to recovery within our community, 3) offering people in the community addicted to opioids the option of taking the vivitrol injection. In the time period of November 2013 to May 2018, STIHC has dispensed a total of 282 Naloxone kits. Of those, 267 were 2mg Naloxone syringes + nasal spray adaptors and 11 were kits with the new prepackaged 4mg Narcan nasal spray. This is a significant number of overdose kits for a community of our size, and according to reports

generated by the Portland Area Indian Health Service (IHS), STIHC procured the 2nd highest amount of Narcan among IHS/Tribal clinics in the Portland Area 2013-2017.

Makah Tribal Court statistics reflect that in 2016, a total of 152 criminal cases were filed, and of those 152 cases, approximately 49 were drug-related criminal cases. These resulted in 33 convictions and three referrals to Makah Healing Court. Additionally, 55% of the Makah Tribal General Assistance caseload have substance abuse and/or addiction issues, meaning over half of those who are unemployed and receiving GA benefits are not work-ready.

Despite the implementation of the Makah Healing Court, Domestic Violence Court, and direct intensive outpatient treatment within the Makah Recovery Services, there are still tribal and community members who do not qualify for these services. While we have endeavored to provide holistic, wrap-around services-and have experienced success within those programs- the key component is that this is available *after* a crime or offense has been committed. Self-referral for these services is an option that few take advantage of. With funding from the Comprehensive Opioid Abuse Program, we intend to establish a multidisciplinary response team that includes NBPS and EMTs, prosecutors, Makah Tribal Court, Makah Recovery Services while providing a safe and welcoming environment, as outlined in *Section II. Project Design and Implementation* of this narrative.

II. Project Design and Implementation: The Makah Wellness Team participated in a Wellness Retreat in January 2018 where 30 participants individually shared what our team should be focusing on. The top 6 themes in order of popularity are: support the youth, create positive team morale, substance abuse, after-care for recovery, spreading awareness, and collaboration.

A. *Makah Healing Together House* Using the results from the retreat as a guiding tool, multiple departments within the Makah Tribal Organization have developed the concept of a “Healing Together House” (HTH). The HTH will consist of a drop-in center that offers a safe place where the following services will be available: recovery coaching, case management, education and awareness events, and support to families. This concept fits perfectly within the COAP grant under Category 1: First Responder Partnerships. The purpose of category 1 is to establish a coordinated multidisciplinary response team that includes law enforcement and other first responders, treatment providers, public health providers, hospital based program providers, prosecutors, the court and so forth. Through collaboration, we will develop a pre-arrest or post-arrest diversion program for individuals who commit low level, non-violent offenses to community-based substance abuse and behavioral health services. The HTH project will support a LEAD (Law Enforcement Assisted Diversion) Program as an alternative to the judicial system, addressing those who cycle in and out of the system with no resolution to their true underlying needs. LEAD is an alternative method offered during early intervention saving Makah Healing Court (modeled after Drug Court) and the traditional court system for high level high need drug offenders. By taking this approach we will be able to intervene at an earlier point of addiction rather than waiting for an offense that could cause harm or fatality to oneself, family, and community as a whole. Through the Wellness Team’s collaboration and the Circles of Care project we have identified the following public health issues in our community: addiction, co-occurring disorders, historical/generational trauma, and homelessness. With this tactic we are able to offer a suited wrap around approach. We plan on working in collaboration with the following programs: Makah Tribal Court, Sophie Trettevick Indian Health Center, Makah Tribal

Housing Department, Makah Wellness Team members, Neah Bay Public Safety, and the Northwest Tribal Epidemiology Center (The Epicenter).

To support the HTH project, we will establish a drop-in center to provide services such as 24 hour safe place, recovery coaching and simply a space to share meals and provide education with a community. This grant includes two new positions: a HTH Case Manager and HTH Coordinator. We believe in addition to our existing programs, a drop-in center would provide the added support to clients who enter the LEAD project. The HTH staff would be a non-residential center for adults that provides connections to services and offers a friendly safe environment that naturally discourages drug use and other illegal activities. The HTH is one of the locations where law enforcement, the HTH Case Manager, HTH Coordinator, and their client can meet. The Case Manager will provide and coordinate case management for those in the LEAD program, information about local resources to those who frequent the center, and regular classes and activities that are focused around wellness, recovery, rehabilitation and education. The HTH Coordinator will collaborate with local service providers in the community to fulfill scheduled activities and will also be responsible for coordinating those who will staff the center after hours and ensure the required process is followed. We will hire these two positions within four month of funding notification and utilize two additional months to plan programmatic principles. This includes obtaining LEAD Certification and develop the guidelines and timelines of the program as well as creating the client agreement template.

In the past five years, the Makah Tribe invested in Recovery Coach training, and has found that many are passionate about recovery. However, follow up on how those trained can benefit the recovery community in an organized manner is still lacking. The Case Manager in

partnership with Makah Recovery Services will seek those who have been trained and request their assistance at the Healing Together House by filling in after regular business hours.

Offenders who have been cited with a low level, non-violent offense will be referred to the HTH Program, who will provide an alternative, such as counseling or participation in other programs. The offender will have one year to successfully complete the requirements that are established and agreed upon by both the HTH Case Manager and the offender. Should the offender re-offend or leave the program unfinished, the original charges that were the catalyst for entry into the HTH will be filed. Offenders will always have the choice to join the program or not; additionally, self-referral into the program will always be available for anyone.

III. Capabilities and Competencies

A. Program Manager: The HTH Project will be managed by Jasper Bruner, Chief of Police and manager of the Neah Bay Public Safety Programs. Since returning to the Makah Tribal Organization in 2015, Chief Bruner has successfully implemented grants that include a one million dollar relocation of the ACC, expansion of the police force, additional training and equipment for both police officers, EMT crews, fire responders, and working closely with the Makah Tech Team Chair to develop a communications infrastructure and expansion strategy. Chief Bruner has 18 years of police officer experience and three years of department management experience. *Responsibilities:* Chief Bruner will directly supervise the HTH Coordinator, ensure the required reporting is completed, and manage the budget.

B. HTH Case Manager: This will be a new position added into the Makah Tribal Organization. While the Chief of Police will oversee the program, it is critical that the Case

Manager's office is physically placed in a neutral location so people will feel welcome and relaxed. We envision that the HTH location to be in our new housing sub-division, either in a house identified as transitional housing or in an office space located at our supportive housing center. A desirable candidate for this position would be one who is familiar with "the system" i.e. the intensive outpatient program, drug court, the Makah Law and Order Code, and/or Makah Family Services. While not a requirement of the position, perhaps a recent graduate of the Makah Recovery Services who is turning their life around would be well-suited for this position: someone who has been there once and knows what the program participants are going through. By doing this, we are not only helping our people recover and contribute to the community, we are also increasing our community capacity to self-heal. The Case Manager will be responsible for case management oversight for all clients, meet regularly to monitor progress and service needs in other areas, closely monitor progress of the project and report regularly to the Chief of Police, and become a part of the Makah Wellness Team.

C. HTH Coordinator: The HTH Coordinator will be the point of contact for the program, and responsible for implementing the program plan, assisting offenders (who will then be considered *clients* upon entry of the HTH Program) to obtain services including, but not limited to: individual counseling, group therapy, inpatient/outpatient services, community service projects, housing services, health care services, adult education classes, and other services offered by the tribe that are available to the client. The HTH Coordinator will also be responsible for tracking the overall activities such as meetings and encounters with both clients and community members. The HTH Coordinator will plan monthly activities to

encourage community member's participation and it is anticipated through this conduit, community members will be in support of not only the program but the clients as well.

D. Organizational Capacity: [REDACTED] has been employed with the Makah Tribe in the Administrative Services Department (ASD) for [REDACTED] years, and has the ability to step into any position within ASD to ensure that business is conducted and completed on a daily basis. [REDACTED] has been the [REDACTED] for approximately [REDACTED] years, ensuring each and every grant and contract the Makah Tribe has obtained annually-which fluctuates from 120 to 130 each year-remains in compliance in regards to budgets, reporting, and project management. [REDACTED] will serve as the Makah Tribe's Financial Contact for this grant.

IV. Data Collection Plan & Goals and Objectives: As stated in *Section B. Capabilities and Competencies, ii. HTH Coordinator*, the Coordinator of the program will be responsible for implementing the program plan.

A. Goal 1: Establish HTH Project and guidelines.

1. Objective 1.A: Advertise & hire both the HTD Case Manager and Coordinator Positions. We anticipate this will take four to six months to complete.
2. Objective 1.B: Establish & set up the office including furnishing the office, and begin orientation to the organization as well as the project.
3. Objective 1.C: Develop the guidelines and timelines of the program and develop the client agreement template.

B. Goal 2: Provide a diversion option for low-level drug offenders, first time offenders or recitative low-level offenders who are not currently in formal justice system.

1. Objective 2.A: Referral to HTH/ LEAD Program by the arresting police officer. This will give the officer the option to bring the arrestee into the LEAD program or continue with the criminal charges in the formal justice system.
 2. Objective 2.B: Once the referral is made to the HTH/ LEAD Coordinator a review of the referrals background & criminal history will be performed for clearance of the acceptance into the LEAD program.
 3. Objective 2.C: During the initial meeting with the referred client the LEAD program coordinator will review the contract with the client along with the rules and regulations of the program. The meeting will also be the first time the coordinated services will be presented.
 4. Objective 2.D: The client will have choices of goals to reach with in the outlined time period set by the Case Manager. The support services goals will be monitored by the coordinator and reported back to the Chief of Police at the milestone point set out in the contract.
 5. Objective 2.E: Continual monitoring of the client in strict guidance of the contract. This will ensure that the client and services provided are working with in the LEAD program guidelines for a successful completion of the program.
- C. Goal 3: Create a trend report detailing the amount of client encounters, court cases regarding opioid/drug-related cases. This will be the tool utilized to determine the effectiveness of the HTH Project.
1. Objective 3.A: Annual measurement of program performance, client goals and performance of the program objectives, evaluation of HTH/ LEAD program by Tribal

partner supportive agencies. Make changes to the program that is a fit for the Makah Tribe and its commitment to Healthy People and Community.

- V. **Expected Outcomes:** We expect that the early stage diversionary tactics will cause three specific rate reductions as a result of this program, lower opioid abuse and overdose rates, lower arrest rates and court cases, and lower inmate rates.

A. Lower Opioid Abuse and Overdose Rates: Intervening at an earlier stage of the addiction process will reduce the actual abuse and therefore the overdose rates.

B. Lower Arrest Rates/Court Cases: Utilizing the principles of the LEAD Program, we anticipate the amount of arrest rates, and consequently filed court cases, will decrease. In the long run, this will help to alleviate the burden on the tribally funded portion of these areas.

C. Lower Inmate Rates: Again, with applying the LEAD Program doctrines, another result expected is the reduction of inmate rates at the Adult Correction Center, which in turn will reduce the amount of funding spent to house and transport inmates.

D. Healthier Community: When put in perspective of family and community, addiction has a ripple effect that impacts all the members of the family and community. Addressing the addiction, or even potential addiction, at an early stage provides a platform upon which clients are given alternatives to create an environment where they are able to flourish and thrive to become contributing members of the family and community, to help others who may need it, and to find their own purpose which was never to become an addict or die of an overdose.