

**Jefferson County  
Board of County Commissioners**

**Agenda Request**

**To:** Board of County Commissioners  
**From:** Barbara Carr, Juvenile Court Administrator  
**Date:** Week of April <sup>25</sup>~~4~~, 2011  
**Subject:** Interlocal Agreement between Kitsap County  
And Jefferson County – Detention Facilities

**Statement of Issue:**

Kitsap County provides secure detention services for Jefferson County Juvenile and Family Court Services. This Interlocal Agreement for 2011 is inclusive of the arrangement around the transportation for juveniles by Kitsap County Detention staff.

**Analysis:**

We are extremely happy with the services/arrangements we have around detaining Jefferson County youth in the Kitsap Youth Center. A closer investigation around detention services took place in 2010 and resulted in our continuing relationship with the Kitsap County Juvenile Court and added the important benefit of transport.

**Alternatives:**

Not enter into this Agreement. Kitsap would refuse to serve detention youth from Jefferson County.

**Fiscal Impact:**

The expenditures related to this relationship with Kitsap County are already included in the 2011 budget of the Juvenile and Family Court.

**Recommendation:**

That the BOCC sign the 4 original Interlocal Agreements as presented. I will then send them to Kitsap County for signature.

Reviewed by:

 3/30/11  
Phillip Morley, County Administrator

**INTERLOCAL AGREEMENT  
BETWEEN  
KITSAP COUNTY AND JEFFERSON COUNTY  
PROVISION OF JUVENILE DETENTION FACILITIES**

Whereas, Kitsap County has and maintains a juvenile detention facility at the Kitsap County Youth Services Center pursuant to RCW 13, et. seq;

Whereas, Jefferson County does not possess sufficient facilities to lodge youth under the age of eighteen 18 who are alleged or adjudicated juvenile offenders, BECCA contempt, or Dependency contempt youth pursuant to the laws of the State of Washington;

Whereas, it will benefit both Kitsap County and Jefferson County by limiting costs associated with the detention of Jefferson County youth and helping Kitsap County to obtain revenue from beds that might otherwise sit empty;

Whereas, Kitsap County is a political subdivision of the State of Washington and Jefferson County is also a political subdivision of the State of Washington;

Now, therefore, in accordance with the Inter-local Cooperation Act (RCW 39.34), the counties of Kitsap and Jefferson enter into this agreement. The parties agree as follows:

**I. GENERAL CONDITIONS**

- A. Effective Date of Agreement. The effective date of this agreement shall be upon execution of this agreement by the parties.
- B. Length of Term. The term of this agreement is one year, commencing upon the execution of this agreement, and terminating on December 31, 2011 unless cancelled by either party or modified by mutual agreement of the parties.
- C. Termination. This agreement may be terminated by either party upon thirty (30) days written notice to the other party.

- D. Completed Expression of Agreement and Modification. The parties agree that this agreement is the completed expression of the terms hereto, and any oral representations or understandings not incorporated herein are excluded. Further, any modification of this agreement shall be in writing and signed by both parties.
- E. Contractor Administrator. This agreement shall be administered for Kitsap County by William G. Truemper, Jr., Detention Manager for the Kitsap County Juvenile Department, Kitsap County Youth Service Center, 1338 SW Old Clifton Road, Port Orchard, Washington, 98366 and by Barbara Carr, Director of Juvenile Services for Jefferson County, PO BOX 1220, Port Townsend, Washington 98368.

## II. SPECIFIC TERMS AND CONDITIONS:

- A. Detention. Kitsap County will provide secure custody/detention for juveniles detained pursuant to RCW 13, et.seq., in accordance with the rules, policies, and procedures governing the detention of juveniles.
- B. Admission
- (1) Youths who are not alleged or adjudicated offenders, CHIN's contempts, ARY's contempts, or Dependency contempts, shall not be referred for custody.
  - (2) Jefferson County shall certify, by the act of presenting a youth for detention, that the youth is legally detainable. Kitsap County shall bear no responsibility to screen referrals against Kitsap County specific detention criteria, a true copy of which is attached hereto and incorporated herein as Exhibit A, and legal standards for detention. Jefferson County shall defend and hold Kitsap County harmless for any legal action resulting from the detention of a youth wrongfully presented by Jefferson County for detention and shall pay any judgment assessed against Kitsap County for wrongly detaining a Jefferson County youth.
  - (3) Prior to presenting a youth for detention, Jefferson County shall contact the detention center and obtain verification that Kitsap County will accept the youth for detention. All pertinent court orders concerning a youth being presented for detention shall be provided to the detention staff at the time the youth is presented for detention. All known psycho-social history shall be conveyed in writing to Detention Facility personnel.
  - (4) Any youth who is unconscious, intoxicated due to alcohol or drugs, or gravely disabled will not be accepted into detention.
  - (5) Any youth with significant injuries, or who reports that he or she is currently experiencing significant medical problems, may be accepted in detention only when approved fit for detention by a medical doctor or emergency room medical staff.

- (6) Kitsap County will provide five (5) guaranteed beds to Jefferson County. Of the five (5) guaranteed beds, Jefferson County will reimburse Kitsap County for two (2) beds per day, whether occupied or not by Jefferson County youth. Jefferson County will additionally reimburse Kitsap County for the third (3rd<sup>th</sup>), fourth (4th) and fifth (5<sup>th</sup>) guaranteed beds, if occupied by a Jefferson County youth. Regarding those non-guaranteed beds, Kitsap County reserves the right to release a Jefferson County youth should overcrowding at the detention facility necessitate such a release. Jefferson County will make arrangements for pick-up of such youth.
- (7) Should a youth be rejected for admission or released from detention, Jefferson County shall arrange within six (6) hours of the time when the youth was rejected or released, to pick up the youth. The parties will take all reasonable steps to insure that the pick-up is completed within six (6) hours but it shall not be a breach of this agreement if the pick-up is not completed within that six (6) hour time frame.
- (8) Jefferson County shall, to the fullest extent practicable, provide all information regarding its detainees as is routinely required by the detention facility. Such information shall include any known accommodation requirements for detainees pursuant to the Americans with Disabilities Act and the information identified on the detention facilities' Intake Assessment Record, a true copy of which is attached hereto and incorporated herein by the reference.

### **III. TRANSPORTATION:**

- A. Jefferson County shall assume the financial responsibility for costs necessary to secure emergent medical evaluations and/or treatment, or transportation to support the reasonable necessary operational needs of the Department.
- B. Cost for transportation performed by Kitsap County staff under the circumstances described in Section IIIA above shall be the Internal Revenue Service mileage rate in effect at the time of the service performed and \$28.00 per hour.
- C. Jefferson County will be providing transportation for detainees upon release from custody for any reason.
- D. Kitsap County will provide transportation of detainees to and from court in Jefferson County and after arrest per the mutually agreed upon protocol for the transport of youth after arrest and for court hearings.
- E. Cost for transportation performed by Kitsap County staff under the circumstances described in Section IIID above shall be the Internal Revenue Service mileage rate in effect at the time the service is performed.

- F. Jefferson County shall arrange to pick up the detainee within six (6) hours of notification of the release date and time from the detention center. The parties will take all reasonable steps to insure that the pick-up is completed within six (6) hours of the release date and time but it shall not be a breach of this agreement if the pick-up is not completed within that six (6) hour time frame.
- G. A detainee serving a sentence or commitment will not be held beyond his/her sentence or commitment expiration date and time.

#### **IV. MEDICAL TREATMENT**

- A. KITSAP COUNTY shall provide to Jefferson County detainees at no additional charge those routine medical services that are provided to other detainees for which the health care provider does not render a separate billing for providing care to a specific individual.
- B. Jefferson County shall reimburse Kitsap County for dental services, prescription drugs, and for medical services for which a health care provider renders a separate billing for providing care to a specific Jefferson County detainee.
- C. Detention orders shall include language giving consent to emergency medical treatment to the Detention Manager of Kitsap County Youth Services Center.
- D. In the event that a Jefferson County detainee is hospitalized, Kitsap County will immediately contact Jefferson County Juvenile Department. Jefferson County will determine and notify Kitsap County whether it requires custodial security during the period of hospitalization. If custodial security is required, Jefferson County will be responsible for the cost of the custodial security provided.

#### **V. FEES:**

- A. The basic fee for detention/custody shall be One Hundred Dollars (\$100.00) per day, per detained youth.
- B. A billable custody day shall be defined as all or any part of any calendar day.
- C. Transport costs shall be reimbursed at the Internal Revenue Service mileage rate in effect at the time the service is performed.

#### **VI. BILLINGS:**

- A. Kitsap County shall bill Jefferson County for detention costs on a monthly basis, or at a time convenient to the financial management of Kitsap County.

- B. Bills for mileage related to transport shall be billed on a monthly basis and on a bill separate from regular detention costs.
- C. Jefferson County shall pay all billings in a timely manner, not to exceed thirty (30) days from the date of billing.

**VII. INSURANCE/HOLD HARMLESS:**

- A. Jefferson County is a member of the Washington Counties Risk Pool, which provides joint self-insurance liability for its member Counties. In fulfilling its obligation to maintain insurance coverage under this agreement, Jefferson County shall give Kitsap County written notice thirty (30) days prior to any modification of its full participation as a member County in the Washington Counties Risk Pool.
- B. Jefferson County agrees to defend, indemnify, and hold harmless Kitsap County, its appointed and elected officials, employees or agents from and against all liability, loss, cost, damage, and expense, including costs of attorneys fees in defense thereof because of actions, claims or lawsuits, alleging damages sustained by any person or property including death at any time resulting therefrom, arising from, or alleged to have arisen from Jefferson County's performance of (or its alleged failure to perform) its obligations under this agreement, Jefferson County's negligent act or omissions related to this agreement or as a consequence of any wrongful or negligent act or omission by a Jefferson County detainee.
- C. Further, Jefferson County hereby waives on its behalf any claims and demands against Kitsap County and agrees to hold Kitsap County free and harmless from all liability for costs of other person(s) from such loss, damage or injury, caused by or arising from any act or omission of Jefferson County, or any of its agents, employees, or elected officials, together with all costs, judgments, reasonable attorneys fees and expenses arising therefrom.
- D. Kitsap County agrees to defend, indemnify, and hold harmless Jefferson County, its appointed and elected officials, employees or agents from and against all liability, loss, cost, damage, and expense, including costs of attorneys fees in defense thereof because of actions, claims or lawsuits, alleging damages sustained by any person or property including death at any time resulting therefrom, arising from, or alleged to have arisen from Kitsap County's performance of (or its alleged failure to perform) its obligations under this agreement, Kitsap County's negligent act or omissions related to this agreement or as a consequence of any wrongful or negligent act or omission by Kitsap County.
- E. Further, Kitsap County hereby waives on its behalf any claims and demands against Jefferson County and agrees to hold Jefferson County free and harmless from all liability for costs of other person(s) from such loss, damage or injury, caused by or arising from any act or omission of Kitsap County, or any of its agents, employees, or elected officials,

together will all costs, judgments, reasonable attorneys fees and expenses arising therefrom.

**VIII. LEGAL REPRESENTATION OF DETAINEE:**

Jefferson County shall be responsible for responding to detainees' request for legal assistance or legal representation. If a Jefferson County detainee makes a request for legal assistance or representation to a Kitsap County detention officer, or elected or appointed official while detained in the Kitsap County facility, Kitsap County shall be responsible for notifying Jefferson County as soon as practicable.

**IX. APPLICATION OF DETENTION RULES:**

Kitsap County Detention Rules and Practices shall be applicable, except in cases of conflict with this agreement. In the event of such conflict, this agreement will control.

**X. RELEASE FROM DETENTION:**

- A. Any Jefferson County detainee shall be released, upon demand, to any Jefferson County law enforcement officer or officer of the Jefferson County Juvenile Court.
- B. Any Jefferson County detainee shall be released upon written direction or verified verbal direction of the Jefferson County Juvenile Court or officer thereof.

**XI. NON-DETENTION CUSTODY SERVICES:**

Non-detention custody services shall not be affected by this agreement. Court services, probation services, or the like, shall continue to be the responsibility of Jefferson County and are not subject to this agreement.

**XII. FILING:**

The parties will file this agreement with their respective County Auditors Office and with the Secretary of the State of Washington pursuant to Chapter 39.34 RCW.

In witness thereof, the parties hereto have approved and executed this agreement, this  
\_\_\_\_\_ day of \_\_\_\_\_ 2011 .

BOARD OF COUNTY COMMISSIONERS  
JEFFERSON COUNTY

\_\_\_\_\_  
Commissioner Phil Johnson

\_\_\_\_\_  
Commissioner John Austin

\_\_\_\_\_  
Commissioner David Sullivan

Attest:

\_\_\_\_\_  
LORNA DELANEY, Clerk of the Board

Approved as to form only:

*David Alvany* 3/22/2011  
\_\_\_\_\_  
Jefferson County Prosecutor's Office



In witness thereof, the parties hereto have approved and executed this agreement, this  
\_\_ day of \_\_\_\_\_, 2011 .

KITSAP COUNTY BOARD OF COMMISSIONERS

\_\_\_\_\_  
CHARLOTTE GARRIDO, Chair

\_\_\_\_\_  
STEVE BAUER, Commissioner

\_\_\_\_\_  
JOSH BROWN, Commissioner

ATTEST:

\_\_\_\_\_  
DANA DANIELS, Clerk of the Board

**LAW ENFORCEMENT CRITERIA FOR DETENTION**

Detention Criteria is Required on New Charges. Please check the appropriate box as well as provide a brief Probable Cause narrative.

<p><b>I</b>    <input type="checkbox"/> <b>Probable FTA</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> History of prior escapes</li> <li><input type="checkbox"/> Prior Failure to Appear</li> <li><input type="checkbox"/> No verifiable home address (may be parental home or foster care)</li> <li><input type="checkbox"/> Runaway report on file</li> <li><input type="checkbox"/> Resides out of the county or state</li> </ul>	<p>Narrative:</p>
<p><b>II</b>    <input type="checkbox"/> <b>Threat to Self</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> History of mental illness (not currently symptomatic)</li> <li><input type="checkbox"/> History of treatment for mental illness</li> </ul>	<p>Narrative:</p>
<p><b>III</b>    <input type="checkbox"/> <b>Threat to Community Safety</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Weapon in possession</li> <li><input type="checkbox"/> Threats to harm, including threats to potential victim</li> <li><input type="checkbox"/> Criminal history of A or B offenses within last year</li> <li><input type="checkbox"/> Domestic violence offenses (RCW 10.99)</li> <li><input type="checkbox"/> Other</li> </ul>	<p>Narrative:</p>
<p><b>IV</b>    <input type="checkbox"/> <b>Interfering with Witness</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> By phone</li> <li><input type="checkbox"/> In person</li> <li><input type="checkbox"/> Through third party</li> </ul>	<p>Narrative:</p>

**WEEKEND PROBABLE CAUSE INSTRUCTIONS**

Weekend:            Friday, 0000 hours - Saturday, 1600 hours  
 3 Day Weekend:    Friday, 0000 hours - Sunday, 1600 hours

**VOICE MAIL:    (360) 337-5755**

A response to EACH of the following IS MANDATORY to assure that the suspect will remain in custody. Omission of any item may require the suspect to be released.

Give complete description of all information available to satisfy each element of the offense.

- |  |  |
|--|--|
| <input type="checkbox"/> Suspect's Name & Date of Birth            | <input type="checkbox"/> Date/Time of Arrest                               |
| <input type="checkbox"/> Specify Crime of Arrest and Date of Crime | <input type="checkbox"/> Name of Arresting Officer                         |
| <input type="checkbox"/> Probable Cause for Arrest                 | <input type="checkbox"/> Home Number or Pager Number for Arresting Officer |
| <input type="checkbox"/> Agency Case Number                        |  |
- (Number is required to assure that the prosecutor can reach the officer if there are any questions re: probable cause.)

**WRITTEN PROBABLE CAUSE STATEMENTS WILL NOT BE ACCEPTED.**

# PROTOCOL

## DETENTION OF JUVENILES IN KITSAP COUNTY

Law enforcement officers arresting a juvenile in Kitsap County will follow the attached guidelines for detaining juveniles.

### Regarding medical clearance:

No juvenile will be detained by Kitsap County Juvenile Detention if in need of medical attention. Juveniles who are injured, who are drunk or high on drugs, who are suicidal, will be detained only after an appropriate health care professional has provided emergency health care and provided the arresting officer with a medical clearance.

### Regarding mandatory detentions:

The list of SHOCAP juveniles is on record with each police department and the Sheriff.

SHOCAP juveniles and juveniles with a firearm in violation of state statute or local ordinance and juveniles with an Escape 1, 2 or 3 will be detained until the prosecutor determines sufficiency to charge.

### Regarding criteria for detention:

The arresting officer will determine probable cause and thus whether an offense is an A, B, C, D or E, divisible or not.

The accompanying list of offenses is type coded (BOLD/UPPERCASE PRINT, *Small Italic Print*, Normal Print) to indicate offenses requiring mandatory detention, mandatory release, and those which may be either released or detained.

Information necessary for applying the criteria, such as prior failure to appear or criminal history can be obtained by calling the Kitsap County Juvenile Detention staff at (360) 8767059.

If some information, such as criminal history, remains unknown after the juvenile is at detention, the arresting officer can expect to leave. Detention staff will resolve those ambiguities, and detain or release.

### Regarding decision to detain:

Arresting officers should check the reasons for detention on the law enforcement assessment chart and leave a copy with the detention staff.

Arresting officers who are uncertain about the appropriateness of a detention should check with their supervisor.

Juvenile detention staff will make an independent assessment of the need for detention. This assessment will occur when the juvenile is presented or within a few hours thereafter if some information is not immediately available.

The Juvenile Court Administrator and his staff will conduct a several month assessment of this method of managing intake decisions. Data from that assessment will be used by law enforcement agencies, judges, prosecutors, and the juvenile court administration to tailor intake decisions to the availability of detention space.

# Juvenile Disposition Categories

Offense Category	Attempt, Bail Jump Conspiracy or Solicitation	Offense Category	Attempt, Bail Jump Conspiracy or Solicitation
<b>ARSON AND MALICIOUS MISCHIEF</b>			
A	B+	<i>Possession/Consumption of Alcohol (9A.44.270)</i>	E
B	C	Illegally Obtaining Legend Drug (69.41.020)	D
C	D	Sale, Delivery, Possession of Legend Drug with Intent to sell (69.41.030)	D+
D	E	<i>Possession of Legend Drug (69.41.030)</i>	E
B	D	<b>VIOLATION OF UNIFORM CONTROLLED SUBSTANCES ACT - NARCOTIC SALE (69.50.401(A)(1)(ii))</b>	B+
C	E	Violation of Uniform Controlled Substances Act - Non narcotic Sale (69.50.401(a)(1)(iii))	C
D	E	<i>Possession of Marijuana &lt;40 grams (69.50.401(e))</i>	E
A	B+	C Fraudulently Obtaining Controlled Substance (69.50.403)	C
<b>ASSAULT AND OTHER CRIMES INVOLVING PHYSICAL HARM</b>			
A	B+	Sale of Controlled Substance for Profit (69.50.410)	C+
B+	C+	<i>Unlawful Intimidation (9A.7A.020)</i>	E
C+	D+	<b>VIOLATION OF UNIFORM CONTROLLED SUBSTANCES ACT - NARCOTIC COUNTERFEIT SUBSTANCES (69.50.401(b)(1)(i))</b>	B
D+	E	Violation of Uniform Controlled Substances Act - Non narcotic Counterfeit Substances (69.50.401(b)(ii)(iv))	C
D+	E	Violation of Uniform Controlled Substances Act - Possession of a Controlled Substance (69.50.401(d))	C
D+	E	Violation of Uniform Controlled Substances Act - Possession of a Controlled Substance (69.50.401(c))	C
<b>BURGLARY AND TRESPASS</b>			
B+	C+	<b>FIREARMS AND WEAPONS</b>	E
B	C	CARRYING LOADED PISTOL WITHOUT PERMIT (9.41.060)	E
D	E	POSSESSION OF FIREARMS BY MINOR (< 18) (9.41.040(1)(e)) >	C
D	E	POSSESSION OF DANGEROUS WEAPON (9.41.260)	E
D	E	INTIMIDATING ANOTHER PERSON BY USE OF WEAPON (9.41.270)	E
<b>DOMESTIC VIOLENCE</b>			
D+	E	<b>HOMICIDE</b>	A
D/E	E	MURDER 1 (9A.32.030)	B+
D/E	E	MURDER 2 (9A.32.050)	C+
D	E	MANSLAUGHTER 1 (9A.32.060)	D+
*	E	MANSLAUGHTER 2 (9A.32.070)	C+
	E	VEHICULAR HOMICIDE (46.61.520)	C+

# Juvenile Disposition Categories

Offense Category	Attempt, Bail Jump Conspiracy or Solicitation	Offense Category	Attempt, Bail Jump Conspiracy or Solicitation
<b>KIDNAPPING</b>			
A	KIDNAP 1 (9A.40.020)	A	RAPE 1 (9A.44.040)
B+	KIDNAP 2 (9A.40.030)	A-	RAPE 2 (9A.44.050)
C+	Unlawful Imprisonment (9A.40.040)	C+	Rape 3 (9A.44.060)
<b>MOTOR VEHICLE RELATED CRIMES</b>			
E	<i>Driving without a License (46.22.024)</i>	D+	RAPE OF A CHILD 1 (9A.44.073)
C	Hit and Run - Injury (46.52.020(4))	B	RAPE OF A CHILD 2 (9A.44.076)
D	<i>Hit and Run - Attended (46.52.020(5))</i>	B	INCEST 1 (9A.64.020(1))
E	<i>Hit and Run - Unattended (46.52.016)</i>	C	INCEST 2 (9A.64.020(2))
C	Vehicle Assault (46.61.522)	D+	<i>Indecent Exposure (Victim &lt;14) (9A.88.010)</i>
C	Attempting to Elude Pursuing Police Vehicle (46.61.024)	E	<i>Indecent Exposure (Victim 14 or over) (9A.88.010)</i>
E	<i>Reckless Driving (46.61.509)</i>	B+	PROMOTING PROSTITUTION 1 (9A.88.070)
D	<i>Driving while Under the Influence (46.61.516)</i>	C+	Promoting Prostitution 2 (9A.88.080)
D	<i>Vehicle Fowling (9A.52.100)</i>	E	O & A (Prostitution)(9A.88.030)
C	Taking Motor Vehicle without Owner's Permission (9A.56.070)	B+	INDECENT LIBERTIES (9A.44.100)
C	TAKING MOTOR VEHICLE WITHOUT OWNER'S PERMISSION (9A.56.070) AND ATTEMPTING TO ELUDE PURSUING POLICE VEHICLE(46.61.024)	B+	CHILD MOLESTATION 1 (9A.44.083)
		C+	Child Molestation 2 (9A.44.086)
		C	
<b>OBSTRUCTING GOVERNMENTAL OPERATION</b>			
D	<i>Obstructing a Public Servant (after 304) (9A.76.020)</i>	B	<u>THEFT, ROBBERY, EXTORTION AND FORGERY</u>
E	<i>Resisting Arrest (9A.76.040)</i>	C	THEFT 1 (9A.56.030)
B	INTRODUCING CONTRABAND 1 (9A.76.140)	D	Theft 2 (9A.56.040)
C	Introducing Contraband 2 (9A.76.150)	D	Theft 3 (9A.56.050)
E	<i>Introducing Contraband 3 (9A.76.160)</i>	B	THEFT OF LIVESTOCK (9A.56.080)
B+	INTIMIDATING A PUBLIC SERVANT (9A.76.180)	C	Forgery (9A.60.020)
B+	INTIMIDATING A WITNESS (9A.72.110)	A	ROBBERY 1 (9A.56.200)
		B+	ROBBERY 2 (9A.56.210)
		B+	EXTORTION 1 (9A.56.120)
		C+	Extortion 2 (9A.56.130)
		B	POSSESSION OF STOLEN PROPERTY I (9A.56.150)
		D	<i>Possession of Stolen Property 2 (9A.56.160)</i>
		D	<i>Possession of Stolen Property 3 (9A.56.170)</i>
		C	Taking Motor Vehicle Without Owner's Permission (9A.56.070)
		D+	
		E	
		E	
		E	
		E	
		E	

Mandatory Detention: **BOLD / UPPER CASE PRINT**  
Mandatory Releases: *Small Italic Print (These alleged offenses are divertible, if the juvenile has no prior original history (as defined by RCW 13.40.020(9)).*  
May Detain: *Normal Print*

# Juvenile Disposition Categories

Attempt, Ball Jump  
Conspiracy or Solicitation

Offense  
Category

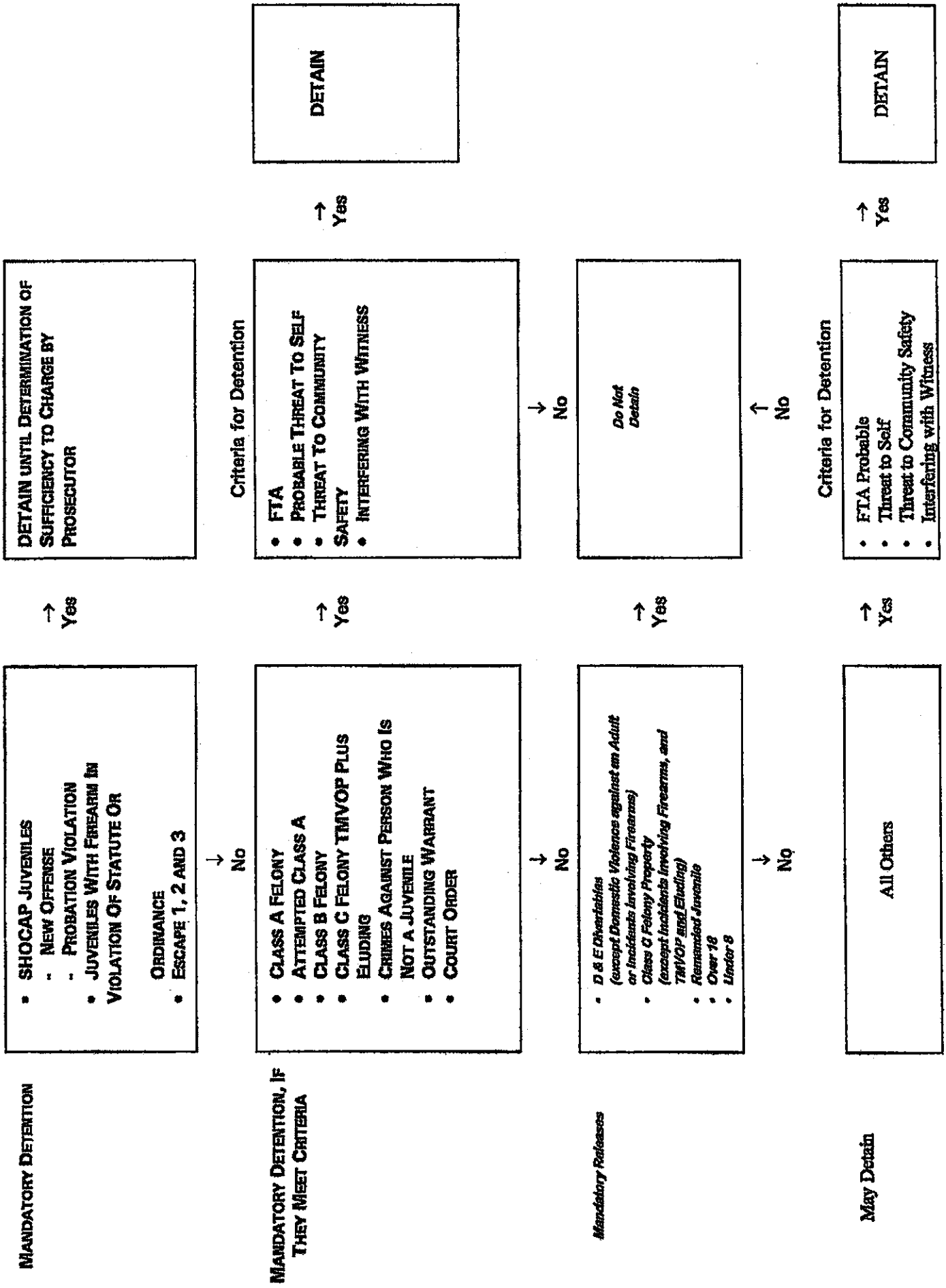
**OTHER**

B	BOMB THREAT (9.61.160)	C
C	ESCAPE 1 (9A.76.110)	C
C	ESCAPE 2 (9A.76.120)	C
D	ESCAPE 3 (9A.76.130)	E
C	Failure to Appear in Court (10.19.130)	D
E	<i>Obscene, Harassing, Etc. Phone Calls (9.61.290)</i>	E
A	OTHER OFFENSE EQUIVALENT TO AN ADULT CLASS A FELONY	B+
B	OTHER OFFENSE EQUIVALENT TO AN ADULT CLASS B FELONY	C
C	Other Offense Equivalent to an Adult Class C Felony	D
D	<i>Other Offense Equivalent to an Adult Gross Misdemeanor</i>	E
E	<i>Other Offense Equivalent to an Adult Misdemeanor</i>	E
V	Violation of Order of Restitution, Community Supervision or Confinement (13.40.200)	V

Mandatory Detention: **BOLD / UPPER CASE PRINT**  
Mandatory Releases: *Small Italic Print (These alleged offenses are divertable, if the juvenile has no prior criminal history (as defined by RCW 13.40.020(9)).*

10/04/10

# LAW ENFORCEMENT ASSESSMENT



# REQUEST FOR DETENTION

Juvenile Arrested: \_\_\_\_\_ (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) DOB: \_\_\_\_\_

AKA: \_\_\_\_\_ Parents notified: Yes \_\_\_\_\_ No \_\_\_\_\_

Date of Arrest: \_\_\_\_\_ Location: \_\_\_\_\_ Time: \_\_\_\_\_ Hours

**CAUSE FOR ARREST/CHARGES:**

Offense	Degree	Bail	<i>Check the Appropriate Class Below</i>			Date of Offense
			Felony	Gross Misd.	Misd.	
AT, CON, PZ, FA, SOL, COM, DV, WP, SM, DR, DUI						
AT, CON, PZ, FA, SOL, COM, DV, WP, SM, DR, DUI						
AT, CON, PZ, FA, SOL, COM, DV, WP, SM, DR, DUI						
AT, CON, PZ, FA, SOL, COM, DV, WP, SM, DR, DUI						

(AT = Attempt; CON = Conspire; PZ = Protected Zone; FA = Firearm; SOL = Solicit; COM = Complicity; SM = Sexual Motivation; WP = Weapon; DV = Domestic Violence; DR = Drug Related; DUI = Driving Under the Influence)

**(Domestic Violence Victim Information (Use INITIALS ONLY for Juvenile Victims))**

Victim #1 \_\_\_\_\_ DOB: \_\_\_\_\_

Victim #2 \_\_\_\_\_ DOB: \_\_\_\_\_

THE JUVENILE IS TO BE DETAINED AS THE RESULT OF A COURT ORDER, IN THAT:

Warrant No.: \_\_\_\_\_ JRA Warrant No.: \_\_\_\_\_ Court Order No.: \_\_\_\_\_

IF DETENTION IS BEING REQUESTED FOR REASONS OTHER THAN A COURT ORDER OR PAROLE HOLD, THE REVERSE SIDE OF THIS FORM MUST BE COMPLETED.

Arresting Officer: \_\_\_\_\_ Agency: \_\_\_\_\_ Badge No.: \_\_\_\_\_

Transporting Officer: \_\_\_\_\_ Agency: \_\_\_\_\_ Badge No.: \_\_\_\_\_

Report No.: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Hours

Vehicle Impound Location (if applicable): \_\_\_\_\_

**DO NOT WRITE IN THIS BOX - JUVENILE DETENTION USE ONLY**

Comments:

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Approved  Not Approved

Detention Officer: \_\_\_\_\_

Accepted  Not Accepted

Acting Lead Worker/ Detention Supervisor/Detention Manager:

\_\_\_\_\_





School Name:

Grade:

KITSAP COUNTY JUVENILE DETENTION CENTER
HEALTH SERVICES

Parental Consent for Medical Treatment

I, \_\_\_\_\_, parent/legal guardian of \_\_\_\_\_, a detainee at the Kitsap County Juvenile Detention facility (KCJDF), do hereby give my consent for the routine and/or emergency medical or dental care and immunizations as deemed necessary by the Health Services staff or the Detention Management staff.

In the event my child develops a medical or dental problem beyond the capabilities of the KCJDF Health Services, I authorize the medical or dental facility, the medical or dental provider to which my child is referred, to evaluate and treat as indicated.

I further authorize the medical or dental facility, the medical or dental provider to release such information as may be needed for the completion of hospital claims, to any insurer or to the KCJDF and Health Services for the determination of follow-up treatment.

I also agree to be financially responsible for any and all medical and dental care, including prescriptions that may be necessary for my child.

I further authorize the KCJDF staff, under the direction of the Health Services staff, to administer any approved prescription or over-the-counter medications, to my child pursuant to the prescribed medical indications and directions on the container. All approved medications given my child shall be appropriately recorded.

Emergency medical care will be provided at Group Health Cooperative in Port Orchard, at Harrison Memorial Hospital (HMH) Urgent Care Clinic, Port Orchard; the Emergency Room, HMH, or the Emergency Room, Naval Hospital, Bremerton, (dependent upon acuteness, urgency and eligibility for care), unless otherwise specified.

Our family physician is \_\_\_\_\_ and, if possible, should be notified in order to provide emergency and continuing medical care for my child.

This authorization is valid from this date of this authorization until the minor has completed all detention time under this Cause Number as ordered by the Court, or until the minor has reached the age of consent. (Ref: Bill Truemper's Memo of 11/7/95)

Table with 3 columns: Medical Insurance, Contract Number, Group Number. Row 1: DSHS medical coupons, please give PIC Number.

If possible, please attach a photocopy of the coupon or insurance card.)

Parent / Guardian / Other

Date Time

Witness #1

Date Time

Verbal Consent

Verbal consent given by \_\_\_\_\_, parent or legal guardian of \_\_\_\_\_ for the medical or dental care listed above by telephone conference with the Detention Intake Officer. (Two Detention Officers' signatures are required when receiving verbal medical consent)

Witness #1 \_\_\_\_\_, Detention Officer
Witness #2 \_\_\_\_\_, Detention Officer

Date: \_\_\_\_\_ Time: \_\_\_\_\_
Date: \_\_\_\_\_ Time: \_\_\_\_\_

Comments: