

BEFORE THE WASHINGTON STATE
EXECUTIVE ETHICS BOARD

In the Matter of:

Laura Houde

Respondent.

No. 2022-037

STIPULATED FACTS,
CONCLUSIONS OF LAW AND
AGREED ORDER

THIS STIPULATION is entered into by Respondent, Laura Houde and Board Staff of the WASHINGTON STATE EXECUTIVE ETHICS BOARD (Board) through KATE REYNOLDS, Executive Director, pursuant to chapter 42.52 RCW, chapter 34.05 RCW, and WAC 292-100-090(1). The following stipulated facts, conclusions of law, and agreed order will be binding upon the parties if fully executed, and if accepted by the Board without modification(s), and will not be binding if rejected by the Board, or if the Respondent does not accept the Board's proposed modification(s), if any, to the stipulation. This stipulation is based on the following:

A. STIPULATED FACTS

1. On October 25, 2022, the Executive Ethics Board (Board) received a complaint alleging that Laura Houde (Ms. Houde), a Therapy Supervisor, and SeanPierre Adams, an Institution Counselor 3 (IC3),¹ at Western State Hospital (WSH) with the Department of Social and Health Services (DSHS), may have violated the Ethics in Public Service Act. According to the complainant, those violations included Activities Incompatible with Public Duties, Financial Interests in Transactions, Improperly Concealed Records, Special Privileges and Use of State Resources for Private Benefit or Gain.

¹ An investigation was opened on Mr. Adams as well. Refer to EEB case # 2022-038.

2. According to DSHS, Ms. Houde was originally hired by DSHS on June 20, 2016 as a Psychology Associate at the Special Commitment Center (SCC). On March 6, 2017, she moved to WSH. On November 5, 2018, she was promoted to Therapies Supervisor at WSH, which is the position she presently holds. According to DSHS, Ms. Houde has been the Therapies Supervisor for the Violence Reduction Team (VRT) since November of 2018. She supervises the Institutional Counselor 3's (IC3's) including Mr. Adams, who are members of the Violence Reduction Team (VRT) and typically work with the most violent patients at WSH.

3. According to the complainant, DSHS Secretary Jilma Meneses (Ms. Meneses) was sent an email from Ms. Houde and Mr. Adams regarding their allegation that WSH was stealing their proprietary information. In response, Ms. Meneses asked Lisa Yanagida (Ms. Yanagida), the Chief of Staff (COS), to look into the employee's grievance. Ms. Yanagida tasked Teresa Guy (Ms. Guy), Project Manager and Special Assistant to the COS, to lead this effort. According to the complainant, Melanie Roberts (Ms. Roberts), Office Chief HRBP, also was present at the "Listening Sessions."

4. According to the complainant, Ms. Houde and Mr. Adams provided the following documents as part of the listening sessions:

- A picture of a Certificate of Registration with Title of Work: Therapeutic Engagement and Stabilization Team (TEST).
- A three-page document of TEST including two case examples including DSHS/BHA patient data.
- Three separate emails from a Gmail account between Ms. Houde and Greg Roberts dated January 12, 2022, January 14, 2022, and March 18, 2022.
- An email from her Gmail account including a 122-page document containing a variety of emails and documents, to include the Consult Liaison Services program materials.

5. According to the complainant, because of the allegations made by Ms. Houde and Mr. Adams and the documents they provided, DSHS initiated an internal investigation. The

Investigative Report (IR) states that the investigation determined that Ms. Houde and Mr. Adams copyrighted DSHS/WSH material. The complainant states that the official copyrighted document indicates the material was created in 2020, and it was copyrighted in 2021.² According to the complainant, through forensic evaluation, metadata shows DSHS material was sent to personal email addresses for both employees.³

6. According to DSHS, Amy Colville (Ms. Colville), the Behavioral Health Administration (BHA) Investigations Administrator, conducted the investigation. DSHS provided Board staff with a copy of the documents Ms. Houde and Mr. Adams provided at the Listening Sessions and the DSHS IR, which included supporting documents. Board staff were also provided with the forensic evaluation conducted by the DSHS Forensic Investigator Jeff Madsen (Mr. Madsen).

7. According to the IR, the scope of the DSHS investigation was to determine whether Ms. Houde and Mr. Adams produced documents and curriculum for The Therapeutic Engagement and Stabilization Team (TEST) that Ms. Houde subsequently copyrighted in her capacity as the Therapies Supervisor for the VRT at WSH.

8. According to the IR, Ms. Houde completed DSHS Washington State Ethics in State Government online training on July 15, 2016, August 7, 2019 and July 6, 2022.

² Copyright: The exclusive legal right, given to an originator or an assignee to print, publish, perform, film, or record literary, artistic, or musical material, and to authorize others to do the same.

³ Board staff were provided with a copy of a nine page PowerPoint titled: Violence Reduction Team: Origins, Development and Outcomes. On the bottom of each page it states Therapeutic Engagement and Stabilization Team: Origins and Development Copyright 2020 All Rights Reserved. On page 5, it discusses the four phases of VRT Intervention.

9. According to DSHS, Mr. Madsen reviewed forensic evidence regarding Ms. Houde's accessed files/folders, Word documents, PowerPoint documents, Outlook emails, and her Recycle Bin (deleted items). The following was identified:⁴

- Ms. Houde emailed TEST & VRT documents or related content to her personal email address and vice versa a total of thirty-eight times.
- Ms. Houde authored a total of twenty-nine (29) TEST Word documents using her DSHS account, user alias HOUDELE.⁵
- Ms. Houde authored a total of ten TEST PowerPoint presentations using her DSHS account, user alias HOUDELE.
- Ms. Houde accessed TEST files and folders a total of three hundred eighty-three separate times between April 29, 2021 and August 31, 2022.
- Ms. Houde deleted TEST documents and files from her DSHS computer account on the following dates: August 12, 2022, nineteen (19) files; August 26, 2022, sixteen (16) files; and August 31, 2022, two (2) files.

10. According to the IR, the following interviews were conducted by DSHS Investigators.

Greg Roberts (Mr. Roberts)

11. According to the IR, Mr. Roberts was a consultant for BHA, specifically WSH, from September 2017 through June of 2020. His focus was Centers for Medicare & Medicaid Services (CMS) certification.

12. According to the IR, Mr. Roberts recalled that Ms. Houde contacted him in January of 2022 from her personal email account and wanted to discuss and possibly get his

⁴ Board staff were provided copies of the documents listed.

⁵ Although the IR refers to HOUDELE as an alias in their report, HOUDELE is Ms. Houde's assigned username and login with WSH/DSHS.

input regarding a program that she was creating to provide training to staff and de-escalation techniques for problematic patients.

13. The IR states that Mr. Roberts provided emails detailing their complete correspondence.⁶ He recalls providing Ms. Houde with some feedback regarding a TEST proposal that she forwarded to him to review. When asked about the “Four Points” he references within the email communications, Mr. Roberts said that he had presented these points to leadership many times during his contract at WSH. He stated, “This wasn’t unique, and this wasn’t a new idea of Laura’s.” He claims he had these four points written on his white board within his office at WSH on ward C1 during the tenure of his contract.

14. According to the IR, Mr. Roberts said he had a meeting with Ms. Houde on the telephone on one occasion, January 12, 2022. He did not recall if Mr. Adams was present for the phone call. Mr. Roberts did not recall specifics from the meeting, but guessed it was a general discussion about violence at state hospitals. His approach to this has been to ensure that staff are consistently assigned, that they work together as a team, are properly trained, and have leadership support. He said that those are the four (4) criteria to success in addressing patient violence. Since he always talks about that, he assumes that those four things were part of what was discussed.

15. According to an email sent from Ms. Houde to Mr. Roberts on January 12, 2022 at 12:37 pm, Ms. Houde made arrangements for a Zoom meeting at 2pm that day. She said in the email that Mr. Adams would also be participating in the meeting. According to the IR, during her interview, Ms. Houde stated “I was off grounds at a coffee shop, I put in leave for it” and added,

⁶ Board staff were provided with the emails.

“I might have been on my lunch.” The IR states that Leave Tracker documents from that date show Ms. Houde and Mr. Adams were present at work, and no leave slips were submitted.

16. According to the IR, Mr. Roberts was not under contract with DSHS during his communication with Ms. Houde. He said that he was providing her with “free advice” during their communications.

Holly Moser (Ms. Moser)

17. According to the IR, Ms. Moser was an IC3 for the VRT from approximately December of 2019 through March 2022. She recalls discussing TEST towards the end of her employment on the VRT. She noted that she was away from work from December 2021 through March 2022 and was present only one day in March before she transferred to her current position in Organizational Development.

18. She recalls the VRT members wanting a name that sounded better than VRT. They had seen from some of the patients that they didn’t want to work with the Violence Reduction Team because it had such a negative connotation. Therefore, the reason for the name change to TEST.

19. According to the IR, Ms. Moser said that the TEST documents they developed were done as a team while working as the VRT. They used data they collected as VRT members to show the hospital leadership what they were doing, as they felt “really good” about it. Part of the discussion regarding TEST came about because the VRT was going to lose their positions and they felt they had to fight to keep their jobs. The VRT was seeing positive behavior changes, so they gathered some of this data and put it into a booklet. She recalls that the data she collected, she shared with her supervisor (Ms. Houde) and the VRT members. She gathered the data from the hospital system, TABLEAU, from patient histories, and input from staff members.

20. Ms. Moser was shown an email sent from her DSHS email account to Mr. Adams on June 24, 2021 at 9:48 am with the *Subject Line: TEST Manual Print (002)* with an attachment. Ms. Moser recognized the document and claimed she didn't come up with all the information in the manual but provided some of it. She believed this was something they were putting together as a team and recalls that Ms. Houde had a lot of input. She believed that the goal was to present it as a team with a plan that they created.

21. Ms. Moser said that when she started on the VRT it was very disorganized. She and Mr. Adams came onboard about the same time, and they worked with Ms. Houde to try to develop something that was strategic in their interactions with the patients. According to the IR, Ms. Moser confirmed that she worked on the project from a DSHS computer in her capacity as a member of the VRT.

22. Ms. Moser was shown an email sent from her DSHS email account to Mr. Adams on June 17, 2021 at 9:52 am with the *Subject Line: VIOLENCE REDUCTION TEAM ORIGINS AND DEVELOPMENT FINAL REDACTED* and included an attachment. Ms. Moser recognized the document but didn't recognize the footer which read "Therapeutic Engagement & Stabilization Team Copyright 2020." According to the IR, Ms. Moser said she didn't place that within the document. She said it was a working document between the VRT and went back and forth between members who wanted to provide input. She was aware that while working at DSHS if you create a document it belongs to that entity. She believed the purpose of this document was to share with the hospital (WSH) safety committee.

23. Ms. Moser was shown an email she sent from her DSHS email account to Mr. Adams on June 24, 2021 at 11:51 am with "logo" attachment. Ms. Roberts said she recalled

developing the logo using two different images. She acknowledged developing this on a DSHS computer in her capacity as a member of the VRT.

24. Ms. Moser was shown an email from Ms. Houde's DSHS email account that she sent herself and Mr. Adams on June 16, 2021 at 2:16 pm with the *Subject Line*: "Book" with an attachment titled "Therapeutic Engagement & Stabilization Team." Ms. Moser recognized the documents and recalled it being a working document at the time that they were collaborating and throwing around ideas. She acknowledged assisting in developing this on a DSHS computer in her capacity as a member of the VRT.

25. According to the IR, Ms. Moser expressed concern that there was a copyright added; that they discussed TEST in June of 2021 and that according to the booklet the copyright is dated as 2020.

Gee Won, (Mr. Won)

26. According to the IR, Ms. Won has been a Psychologist 4 at WSH for the past six and a half years. She stated that she doesn't know much about TEST; just that it was developed by individuals at WSH, and she believed it was mostly what they were already doing to try to reduce violence and improve patient care. When asked if she provided consultation with TEST, she said she talked in general about ways to improve patient care. She added that it is a regular part of her job at WSH with various disciplines.

27. Ms. Won was shown an email sent from Ms. Houde's DSHS email account on December 21, 2021 at 2:26 pm to a personal email address with the *Subject Line*: "TEST," with attachments. Those attachments included "TEST Manual Copyright" and "TEST 11-22-21 Ppt."⁷

⁷ Board staff noted that at the bottom of the pages of the manual it showed Copyright 2021.

Ms. Won confirmed that this was sent to her personal email address and that she recognized the attached documents. The email references a meeting that took place earlier that day between her, Mr. Adams, and Ms. Houde. Ms. Won said she met with them on several occasions in the past because they were working and assisting with a violent patient. She didn't recall this specific meeting but stated that they likely discussed general ways to reduce violence, improve patient care and about getting "buy-in" from leadership, because there has been a huge push for the hospitals to reduce assaults.

28. Ms. Won doesn't recall why this email was sent to her personal email address but said that she and Ms. Houde have been friends for "a long time." Ms. Won said she has Ms. Houde's personal contact information. She couldn't say whether the meeting that occurred on this date was specifically regarding TEST or if it got wrapped up into a meeting about a patient.⁸

29. The IR states that within the body of the email, it said "Attached are the materials I gave you today for your records, and to share with Dr. Wainer." Ms. Won said that Dr. Wainer is a former WSH Psychiatrist and is known for being very involved with trauma-informed care and was very invested in reducing violence in his time at WSH. She believed that Ms. Houde and Mr. Adams were wondering if he had any helpful feedback in terms of interventions.

30. According to the IR, Ms. Won said that she believes that TEST was within Ms. Houde and Mr. Adams roles within VRT.

⁸ According to the IR, Leave Tracker documents show Ms. Houde and Mr. Adams were present at work on December 21, 2021 and that no leave slips was submitted.

Mark Cross (Mr. Cross)

31. According to the IR, Mr. Cross has been the Chief Clinical Officer at WSH since May of 2021. He began overseeing the VRT on April 20, 2022 and was Ms. Houde's direct supervisor. He said he first became aware of TEST at a meeting on April 11, 2022. Ms. Houde and Mr. Adams disclosed that they had something called TEST. Mr. Cross said that they refused to give any details or information about it, saying it was a work product. He said that a brief description was provided on April 14, 2022 via email to himself, Charles Southerland (Mr. Southerland), the Chief Executive Officer (CEO), and Dan Davis (Mr. Davis), Deputy CEO.

32. Because this description sounded a lot like VRT to Mr. Cross, he did a Google search for TEST and had no luck in finding anything on it being an existing, evidence/research-based approach. He then emailed Ms. Houde that he couldn't locate anything on TEST and asked her to please share with him the information. She told him that the reason he couldn't find anything was because she and Mr. Adams created TEST. Mr. Cross said there was no further information about TEST discussed.

33. According to the IR, Mr. Cross provided a document titled "Violence Reduction Team: Origins, Development & Outcomes." He was given this document on June 10, 2022. While reviewing the documents he noticed at the bottom the footer read: "Therapeutic Engagement & Stabilization Team Origins and Development, Copyright 2020 All Rights Reserved." That prompted him to call Ms. Houde on the phone and ask some questions about that. She replied that it was "On there by accident, ignore it."

34. According to Mr. Cross, at no time was he made aware of Ms. Houde's use of state resources nor did he ever have a discussion with her about it. He recalled having a conversation with her about concerns about HIPAA regarding a VRT document but was never made aware

of the use of state resources involving TEST. Mr. Cross said Ms. Houde was very “tightlipped” about the program and didn’t share anything with him. She had stated to him “We have an attorney,” and so forth. He was not aware if DSHS resources were used to develop it and he never gave permission to do so. Mr. Cross reiterated that, “it wasn’t discussed in any shape or form.”

Kevin Bovenkamp (Mr. Bovenkamp)

35. According to the IR, Mr. Bovenkamp has been the Assistant Secretary for the BHA since May of 2021. He recalled in the spring of 2022, sometime around March or April, attending a meet and greet type event at WSH with the new DSHS Secretary. During this meet and greet Ms. Houde and Mr. Adams approached him and wanted to discuss VRT and some changes that were being made.

36. Mr. Bovenkamp said they claimed that WSH was interfering with a proprietary product they had. Mr. Bovenkamp said he explained to them that he was going to support the Chief Executive Officer, Chief Clinical Officer, and Chief Medical Officer regarding proposed changes to VRT. They are his administrative and clinical leaders at the hospital, and he was going to go by their suggestions.

37. Mr. Bovenkamp said that Mr. Adams and Ms. Houde said they had an attorney and he informed them to do whatever they felt they needed to do but as far as work goes, they were going to proceed with proposed changes at the hospital. He believes that this was the first time they had disclosed that they had a copyright for the TEST product.

38. Mr. Bovenkamp was shown an email sent to him from Ms. Houde’s DSHS email account on November 22, 2021 at 4:04 pm with the *Subject Line*: “TEST Presentation,” with an attached PowerPoint presentation. He said that he and the the Chief Medical Officer for BHA Brian Waiblinger (Mr. Waiblinger) had a meeting with Ms. Houde and Mr. Adams in which they

presented a PowerPoint. At no time during the presentation was information presented that suggested to Mr. Bovenkamp that Ms. Houde and Mr. Adams had used WSH information or data. If so, he would have advised them not to do it. He briefly recalled the presentation being a sort of “sales pitch,” that they wanted to present to the governor on how they could save the hospital if it was restructured the way they wanted.

39. Mr. Bovenkamp said that besides the presentation referenced between himself and Mr. Waiblinger in November 2021, the only other meeting that occurred was approximately two months ago between himself, Ms. Houde, Mr. Adams, Mr. Waiblinger and the DSHS Secretary, Ms. Meneses. During this meeting, he got a sense that they were frustrated because WSH wasn’t going to use their program and the VRT was being blended with Consult Liaison Services (CLS). It was after this meeting that questions arose about where the information for the product they developed had come from. At no time was there a discussion that they were developing a program based on WSH patient data. His sense was that this was developed based on their prior experiences and was more conventional than anything.

SeanPierre Adams (Mr. Adams)

40. According to the IR, Mr. Adams has been an IC3 for VRT since December of 2019. Initially, Mr. Adams claimed that TEST was developed outside of WSH but acknowledged that part of the information they used was from WSH.

41. According to the IR, Mr. Adams was shown three TEST work products and he acknowledged that he and Ms. Houde developed the documents and added that Ms. Houde did most of the written parts.

42. When asked about the patient case examples, the graphs and feedback from staff and patients within these documents, he stated that he and Ms. Houde gathered that information

from WSH while working in their roles for the VRT. The psychiatric hospital that is referenced is WSH and the counselors referred to in the TEST documents are VRT staff members. They were putting examples from their work in the VRT together for BHA. They were gathering information to present to management, which they ultimately did. Mr. Adams acknowledges that the information was worked on at WSH, using WSH computers and, at times, using their home computers.

43. Because the information with TEST was essentially spotlighting their VRT work, Mr. Adams was asked why they did not just present it in that manner. He replied that they had presented it as VRT work throughout time and had provided management with “a book.” They were excited to show the work they had been doing and came up with the name TEST. Mr. Adams acknowledged that it was “VRT’s work and used it as TEST.” He said “[t]his is the actual program itself and the description of how we work here, because VRT didn’t have any structure at all, so we were creating something as we go.” They developed this program because they were going through a layoff process, and they wanted to show the good work they were doing. When he began on the VRT, he recalled there not being any real structure and members were confused about who they really were as the VRT.

44. Mr. Adams said their plan was to enhance the program to the point that TEST could be adopted at WSH and at other facilities as well. They continued to present this as the program “TEST” so others could see the opportunity to provide proper care for patients and inmates. He claimed that the goal was never to sell TEST, and that the only monetary benefit might come from a job title change. He was presented with email communication between Ms. Houde and Mr. Roberts in which Ms. Houde stated, “[o]ur main goal is to contract TEST with the state.” Mr.

Adams confirmed that the “Our “was representative of him and reiterated that the only monetary value that he saw possibly happening would come from a possible job title change.

45. Mr. Adams was shown an email sent on August 21, 2021 at 11:49 am with the *Subject Line: “PPT Updated”* from Ms. Houde’s DSHS email account to his DSHS email account and cc’d to his personal email account with the attached PowerPoint document. He recognized the document but stated that he mostly provided verbal input. He couldn’t recall the reason it was sent to his personal email address other than to review at home. Within the body of the email Ms. Houde stated, “I wanted to show you where I’m at with this before lunch.” When asked if they were both working on the document at the time of the email, he confirmed receipt of the email but didn’t recall when he opened it and read it, so he couldn’t say.

46. Mr. Adams said that during a Zoom meeting with management and Mr. Bovenkamp, they stated exactly where the data came from because it was examples of them working as VRT. He added that everyone was very aware that their examples came from working as VRT. One of the reasons they identified it as “TEST” was because they wanted to enhance what they were doing at WSH. He added, “Basically all we did was use the VRT examples and add it on to our vision of TEST.” He was unaware if during that meeting they had disclosed that they had copyrighted the material but added that Mr. Bovenkamp became aware.

47. According to the IR, initially, Mr. Adams said that Ms. Moser had nothing to do with the development of TEST. He was provided with three separate email communications with attachments from Ms. Moser. Upon further review of the emails and TEST documents, he stated that Ms. Moser was present in the initial stages while discussing TEST and she was trying to help develop it although according to Mr. Adams, some of the stuff she put together wasn’t up to par. Mr. Adams said that she was using data from WSH to put things together. Mr. Adams said

he was not aware if someone specifically asked Ms. Moser to assist in the project. He said that VRT personnel all just kind of jumped in to assist with it. Mr. Adams said that Ms. Moser developed a TEST logo, which she sent to him via email, and that she was doing this in her role as an IC3 with VRT.

48. Mr. Adams said that he and Ms. Houde gathered information for VRT, changed the term to read TEST, and then placed the information within the TEST documents and manual. He said the purpose of this was to develop the program for DSHS and said that management was aware that they were presenting this.

49. Mr. Adams said he that he had little to do with the actual written work for TEST. He said his work was more in the work itself, with patients and getting good results. Mr. Adams said that he and Ms. Houde had discussions outside of work to develop it and some at work to prepare for meetings with management; however, he said that it never interfered with their work at WSH.

Laura Houde (Ms. Houde)

50. According to the IR, Ms. Houde confirmed that her role as the Therapies Supervisor for the VRT is to develop tools, strategies, and interventions for the VRT. She and Mr. Adams obtained a copyright for TEST in June of 2021, and she said that TEST has not been initiated at WSH or anywhere else.

51. Ms. Houde was shown the three page briefing/overview document titled “Therapeutic Engagement and Stabilization Team (TEST)” Program created by Mr. Adams and Ms. Houde. Ms. Houde recognized the document and confirmed that she created it. She said that this document was created on her home computer; she also acknowledged that the (redacted) patient information and graphs were obtained from WSH. Additionally, she acknowledged that

the individuals referenced within the document as providing “Intensive daily engagement,” were VRT members.

52. Ms. Houde said that the reason this document says TEST is because they were trying to redefine the VRT because their efforts weren’t getting them anywhere. They decided to take a different approach to how the team was navigating through the hospital. Within this document it stated, “A referral was completed for TEST services,” Ms. Houde explained that it was actually for VRT services. That the term TEST is a “buzz” word in this document. She said that this document was shared with people within WSH to try to draw attention to a better way of doing things. She said that TEST is VRT, just with a different title because VRT was not functioning very well.

53. Ms. Houde was shown the T.E.S.T Manual 2nd Edition Copyright 2021. She said that she and Mr. Adams created this document on their off time using her laptop at home. She acknowledged that the psychiatric facility referenced throughout the manual is WSH and that the patient case examples and graphs are information and data that was gathered in her role as the Therapies Supervisor for VRT. When pointed out that within the copyrighted manual it refers to TEST and on the front cover of the manual TEST is an acronym used for Therapeutic Engagement & Stabilization Team and that wouldn’t that imply that the acronym throughout the manual is referring to the Therapeutic Engagement & Stabilization Team, Ms. Houde said that the manual had inaccurate information contained within. She acknowledged that the data within the manual was gathered in their role as members of VRT and was the same information contained within the first 3-page document that was presented to her.

54. Ms. Houde said that the information within the manual under “TESTimonials” was provided by staff and patients at WSH and given to VRT in their role as that team. She added

that the information within the manual seems to be inaccurate. According to the IR, the acronym TEST was added to the TESTimonials section within the manual, and she acknowledged removing the acronym VRT and adding TEST to the feedback throughout that section.

55. Ms. Houde was shown the PowerPoint document titled TEST: Therapeutic Engagement and Stabilization Team Program, Designed by Mr. Adams & Ms. Houde. She acknowledged that she created this with Mr. Adams partly at home and while working at WSH and that they were utilizing a DSHS computer.

56. According to the IR, she said that the (redacted) patient information and data were obtained within her role as the Therapies Supervisor. The IR states that a graph on the PowerPoint is shown which identifies "Test Start," and Ms. Houde said that this is the date in which VRT started working with the patient and claims that the document is inaccurate, that TEST was never initiated at WSH.

57. According to the IR, the T.E.S.T Therapeutic Engagement and Stabilization Team Manual 2nd Edition was presented again. She was asked how the referenced psychiatric facility, data, graphs, and feedback were all located within the manual they had copyrighted if TEST was never initiated at WSH. Ms. Houde said that the TEST Manual is essentially just an idea, but nothing had been initiated, which was the reason for bringing it to leadership and BHA. Additionally, she didn't recall if she has ever emailed any of the three (3) TEST work products from her DSHS email account to her personal email address.

58. Ms. Houde was shown screen shot pictures of the email communications between herself and Mr. Roberts that she provided to DSHS. She said Mr. Roberts was contacted based on his experiences and as a former consultant for WSH. She said first contact was made in January of 2021. She said she was unsure if he was still under contract with DSHS, specifically WSH at

the time. She said he provided some feedback, but she didn't recall if it was utilized or not. She was aware he presented on "Four Points" regularly to leadership while contracting at WSH and although there may be some similarities, these four points weren't utilized in the development of TEST.

59. According to Ms. Houde, her ideal foreseeable outcome in developing TEST and presenting it to management was that they were hoping to draw more attention to their efforts on the VRT because they were starting to see successful outcomes with cases. They wanted management to bring it to a larger scale so they could help more patients. The goal was never to sell TEST.

60. According to the IR, Ms. Houde was shown emails obtained from Mr. Roberts detailing their email correspondence. Within this email correspondence Ms. Houde wrote, "[o]ur main goal is to contract TEST with the state." According to the IR, Ms. Houde said that she misspoke when she wrote that, and the goal was never to contract with the state, but to implement the program.

61. Ms. Houde was shown a PDF document Titled "Violence Reduction Team (VRT) Caseload Report Out," created on June 25, 2020. She vaguely recognized the document and confirmed that she created it in 2019 or 2020. According to the IR, the patient case examples are the same case examples used within the TEST Manual 2nd Edition; however, the patient identifiers have been redacted.⁹ The graphs used within this VRT document are the same graphs referenced within the TEST Manual 2nd Edition and the outcomes within the VRT document are the same feedback referenced within the TESTimonials section in the TEST Manual 2nd Edition. However,

⁹ Board staff reviewed the document and noted that for the Clinical Presentation portion of the document, Ms. Houde used the first name and the first initial of the last name for the patient and included the patients age, background and gave a detailed description of the patient's treatment at WSH.

the acronym VRT is changed to read TEST. The feedback provided about VRT was changed to read TEST and included in the manual. Ms. Houde said that they were trying to create a story to support the program to show Mr. Bovenkamp and Ms. Meneses to show that something is working at WSH.

62. Ms. Houde was shown a 52-page PowerPoint titled “Therapeutic Engagement & Stabilization Team (TEST) Program created by Mr. Adams and Ms. Houde.” She recognized the document and acknowledged that she and Mr. Adams created it. According to the IR, records indicate that this document was created on a DSHS computer with the author alias listed as HOUDELE. Ms. Houde confirmed that HOUDELE is her alias and acknowledged that parts of this document were created in her role as the Therapies Supervisor and on a DSHS computer.

63. Ms. Houde was shown two additional PowerPoint presentations, with different styles, and layouts, all titled “Therapeutic Engagement and Stabilization Team” (16 pages and 22 pages respectively). Records indicate these were created on a DSHS computer with author alias HOUDELE. Ms. Houde said that these were created at WSH in her role as the Therapies Supervisor for VRT. She felt that this was de minimis use because she spent very limited time on them and did these as a clinician. The third PowerPoint appears to be a template and the others were unfinished. Ms. Houde did not believe that Mr. Adams assisted with the third document (5 pages).

64. Ms. Houde was shown a full-page Word Document that started with, “Good afternoon Mr. Talmadge, I recently stumbled upon an article you wrote for the Seattle Times titled WA’s broken mental health system and homelessness crisis are inextricably tied...”

65. According to the IR, records indicate that this document was created on June 7, 2022, from Ms. Houde’s user alias HOUDELE. She acknowledged that she created this

document on a DSHS computer in her role as the Therapies Supervisor for VRT. She said the document is a draft of an email. Mr. Talmadge wrote an article in the Seattle Times, and she wanted to reach out to him after talking with Mr. Bovenkamp and Ms. Meneses about the idea for TEST. After not hearing back from them, she sent him an email but can't recall if it was this exact content or not. She acknowledged creating this document in her role as the Therapies Supervisor for the VRT.

66. Ms. Houde was shown a 39-page Word Document for TEST. She recognized the document and acknowledged that she created it using a DSHS computer; adding that the parts at the end were a collaboration with Ms. Moser. She couldn't recall Mr. Adams assisting with this document. She acknowledged creating this in her role as the Therapies Supervisor for VRT and believed that it was minimal use of her time and that she completed all her other assigned duties.

67. Ms. Houde was shown a Word document titled "Program Proposal: Therapeutic Engagement and Stabilization Team (TEST)." She acknowledged creating this document, and although Mr. Adams' name is on it, she was unsure if he wrote any of it. She confirmed that it was created on a DSHS computer with her alias, and in her role as the Therapies Supervisor for the VRT. She added that it appears to be unfinished and was never routed anywhere.

68. Ms. Houde was shown two (2) colored word documents one is titled "VRT Origins & Development," (39 pages) and the other is titled "TEST Origins & Development," (32-pages). She acknowledged creating both documents using a DSHS computer under her alias HOUDELE and in her role as the Therapies Supervisor for the VRT. The information contained within both documents are relatively the same, however, the acronym VRT is changed to TEST throughout the second document. Ms. Houde stated, "Again because the idea for TEST came after VRT." At

the time they were attempting to present to upper management a new approach to reducing violence.

69. According to the IR, Ms. Houde was asked if stating “new approach,” but using information from a VRT document that was already created and then changing it to TEST, would in fact be a new approach. She replied, “[i]t would be a new name. We were realizing the VRT as it stood had a negative connotation so we were trying to do a new branding to help make violence reduction a more palliative program to the hospital so we could be more productive. That’s why after we were going through these changes we presented to Kevin Bovenkamp and Jilma to try to have upfront conversations about it.”

70. According to the IR, Ms. Houde was asked how changing the name would affect getting a copyright if the information was obtained as the VRT. Ms. Houde said, “[t]he only reason we got a copyright was because VRT was put through a layoff process in May of 2021, so we didn’t think there would be a program. We thought we were all going to go back to previous jobs and the whole program would be disbanded. The purpose of the copyright was to protect the work that was created.” She acknowledged that the work was created by her in her role as the Therapies Supervisor for DSHS.

71. Ms. Houde confirmed her personal email address and said she has sent minimal TEST documents and materials via email to and from her DSHS email account. Minimally to her would be considered very infrequent, doesn’t disrupt her work, cost the state anything or lead to security issues.

72. According to the IR, Ms. Houde was shown PowerPoint attachments to emails sent on May 11, 2022, 34-pages and May 17, 2022, 41-pages, from her DSHS email account to her personal email address. Ms. Houde said she believes May was when she tried to meet with

April Simms who is a part of the union. She sent these to her personal email address to work on them from home. According to the IR, records indicate that she emailed two very similar PowerPoints from her DSHS email account to her personal email address on May 27, 2022. Ms. Houde did not recall the reason for this and added “[p]robably to work on these at home. I always want to be within the de minimis use policy.” Ms. Houde said she was never under the impression that she couldn’t send documents to her personal email address.

73. Ms. Houde was shown an attachment to an email sent from her DSHS email account to her personal email address on December 10, 2021, with the *Subject Line*: “*TEST Proposal*.” Ms. Houde acknowledged that she created it but was unsure of why she sent it to her personal email address other than to presumably work on it from home.

74. According to the IR, within this document on page 3 is a section “Approved & Authority to Proceed,” with a signature line and “Approved by.” Ms. Houde said that this wasn’t ever approved; it was a template type document of a program description. The TEST Manual 2nd Edition, specifically page 6, was provided to Ms. Houde again. She was asked if you didn’t get approval, why was TEST implemented?” It was pointed out that according to the manual, it states, “TEST members went to work,” and “TEST began collecting data daily.” Ms. Houde said that the TEST manual is incorrect.

75. According to the IR, Ms. Houde was asked to explain the graphs that they had been discussing during the interview which stated, “TEST started,” and how that can be explained if it was never implemented at WSH. Ms. Houde said that they started to use the name TEST to get upper management to see there is a different method. She was asked what the different method was if the numerous TEST documents provided to upper management were actually VRT documents with the acronym simply changed to TEST. She replied “[a]n expansion of VRT, an

idea about TEST that we wanted to present to leadership. At the heart of TEST is the VRT program, but it also captures different elements through the system that can reduce violence. It expanded in the different members that could be a part of the team.”

76. Ms. Houde was shown an email she sent from her DSHS email account on December 21, 2021 to a personal Gmail address with two attachments titled: “TEST Manual Copyright” and “TEST 11-22-21 Ppt.” Within the body of this email, she wrote “Good afternoon Dr. Won. Thank you again for taking the time to meet with SeanPierre and me today. Attached are the materials I gave you today for your records and to share with Dr. Wainer.” She explained that after they met with Ms. Won on this day, she had requested a copy of the materials. She didn’t feel this was an issue as she had already shared the documents with Mr. Bovenkamp, and she was never told not to share them. She said Mr. Wainer is a former psychiatrist at WSH. Ms. Houde said they met in Ms. Won’s office and said this was on her lunchbreak. She didn’t ask Ms. Won to share the info with Mr. Wainer but recalled Ms. Won asking her if it would be ok if she forwarded the info to him.

77. Ms. Houde said that Ms. Moser created some of the initial documents for TEST but was unable to remember exactly which ones. She was doing this in her role as an IC3 for the VRT and was previously reporting to her as the Therapies Supervisor. She said Ms. Moser has a knack for creating documents and began doing this for the VRT to represent the work they were doing.

78. Ms. Houde was shown three emails sent to her DSHS email account from Ms. Moser’s DSHS account with different variations of a TEST Manual attached on June 16, 2021 at 7:18 am, June 23, 2021 at 1:20 pm, and June 24, 2021 at 8:17 am. Ms. Houde said she believes Ms. Moser was working on parts of the TEST manual and then was sending it to her. She was working

on these TEST documents within her role as an IC3 for the VRT. Ms. Houde said that she was authorized to create these documents using DSHS resources in her role as the Therapies Supervisor, as she is responsible to create interventions that work to reduce violence. She acknowledged that these documents would belong to DSHS.

79. According to the IR, Ms. Houde's computer history indicates that she deleted numerous TEST documents on August 12th, August 22nd, and August 26th of 2022 from her DSHS U-Drive. Ms. Houde said that she was cleaning out her "whole folder" on those dates and "reorganizing."

80. According to the IR, Ms. Houde was told that according to evidence it appears she was utilizing DSHS resources to include email accounts, various DSHS computers, and DSHS software in producing the curriculum for TEST in her capacity as the Therapies Supervisor for the VRT. Ms. Houde said that her use of state resources was minimal, and she was only using them in her capacity as the Therapies Supervisor to create different interventions to reduce violence.

81. Ms. Houde said she kept approaching leadership throughout the time she was creating the documents. She said she used her DSHS account to send communications with Mr. Bovenkamp and he never told her not to do that, so she wasn't under the impression that she wasn't doing anything wrong. She added that "[i]t was DSHS people that I was creating these documents for."

82. Ms. Houde said that management, specifically Mr. Bovenkamp and Mr. Cross knew she was creating these TEST work products in her role as the Therapies Supervisor for the VRT. When asked specifically about what was disclosed to Mr. Bovenkamp, she replied that she sent Mr. Bovenkamp a document from her DSHS email account so that would indicate use. She claims that Mr. Cross had a conversation with her regarding her use of state resources.

83. In a written response to Board staff, Ms. Houde said her role at WSH is Therapies Supervisor for the VRT. This team is responsible for providing support services to the most assaultive patients in the hospital. She said the VRT was established in 2017 and has been operating without a Position Description Form (PDF). Ms. Houde said that the VRT roles and responsibilities remain unclear and open to interpretation.

84. According to Ms. Houde, in May of 2021, the VRT received notice that their team would be eliminated due to the budget. She said that they met with hospital leadership on June 18, 2021, and came to an agreement with their union to where the VRT members would be able to keep their jobs and would remain as “The Violence Reduction Team.”

85. Ms. Houde said that they continued to work in their capacity as VRT members. She said through this they began developing a more comprehensive program to bring to hospital leadership that would address the underlying factors of inpatient violence. She said they wanted to demonstrate to hospital leadership that they could provide support beyond just working with the assaultive patient. She said that she and Mr. Adams came up with the idea for a Therapeutic Engagement and Stabilization Team (TEST).

86. Ms. Houde said she and Mr. Adams worked with the union to bring the idea to Mr. Bovenkamp. She said in November 2021 they met with Mr. Bovenkamp to share their ideas about TEST and he appeared to be interested in the idea. She said they did not hear from him even after consistently reaching out through the union.

87. According to Ms. Houde, in March 2022, hospital leadership introduced a new program to the hospital called Consult Liaison Services (CLS) (formerly known as ‘Consult Liaison Team.’) Ms. Houde said that at the end of a Town Hall, the Chief Executive Officer (CEO) Charles Southerland (Mr. Southerland) said he would set up a meeting with the WFSE union and

VRT to discuss their concerns. She said that during that meeting, she and Mr. Adams addressed their concerns about the CLS team information and seeing some of their ideas that they had previously shared with hospital leadership and Mr. Bovenkamp.

88. According to Ms. Houde, they met again with Mr. Southerland, Deputy Chief Executive Officer (DCEO) Daniel Davis (Mr. Davis), and Mr. Cross on April 11, 2022 during which they discussed some of the impact the CLS team was already having on their work as VRT members. Ms. Houde said during this meeting they reintroduced TEST and indicated they wanted to work with them to have it implemented at WSH. Ms. Houde said at Mr. Sutherland's request she sent a summary of TEST later that day as well as sending an email to their union representative to keep them apprised of all information and happenings.

89. According to Ms. Houde, on April 19, 2022 Mr. Southerland got back to them and asked if TEST was something they wanted the hospital to consider using and if they would be seeking some type of monetary payment if used. Ms. Houde said she let Mr. Southerland know that they saw TEST as a program that can assist a few facilities with improving safety. She said that they hoped to be part of the program and asked if they could meet again to discuss their ideas. She said that Mr. Southerland told them that he would have to forgo further discussions.

90. Ms. Houde said they had another meeting with Ms. Meneses, Mr. Bovenkamp and the Chief Medical Officer over BHA Brian Waiblinger (Mr. Waiblinger) on July 20, 2022. Ms. Houde said she and Mr. Adams shared a little bit about TEST and brought up some of their concerns with the newly implemented CLS team and the impact it was having on the work of the VRT. She said that Ms. Meneses then asked Mr. Bovenkamp to coordinate a meeting with a "facilitator" to discuss their concerns regarding the CLS team and their work.

91. According to Ms. Houde, other than a meeting with the Project Manager and Special Assistant to the former Chief of Staff, Teresa Guy (Ms. Guy) and HR Office Chief Melanie Roberts (Roberts) for an “information gathering” session to “fully understand their concerns” they did not hear anything further until September 21, 2022, when Ms. Houde received a “Notice of Investigation” letter and an “Alternate Assignment” letter. The investigation letter stated that she alleged WSH is “stealing” her “proprietary and intellectual property” and that she would be investigated for an ethics violation. Ms. Houde said she never made that statement, yet it was written in quotations.

92. Ms. Houde said she went through her email records and the only language she could find that she sent to Ms. Meneses was that we are “seeing our work replicated through another program at the hospital.”¹⁰

93. Ms. Houde said in regards to the allegations was that she engaged in “activities incompatible with public duties,” she said that she created TEST within her role as a supervisor over a team working with the most assaultive patients in the hospital who, to this day, still do not have a ‘position description form’ to operate under. Ms. Houde said she presented TEST to their union, hospital leadership, BHA leadership, and DSHS leadership, effectively working up the chain of command. At no point did anyone in her chain of command inform her that what she was doing was unethical or that it was incompatible with her role for the state.

94. Ms. Houde said that in regards to her having “financial interests in transactions,” she recognizes this is likely the first time two employees of Mr. Adams and her positions in WSH have presented a program of such magnitude to hospital leadership. Ms. Houde said that she and

¹⁰ Ms. Houde provided Board staff with a copy of that email.

Mr. Adams had hoped to be a part of that implementation as they see the full vision and know what has worked well for them around the hospital. According to Ms. Houde, from the start, she and Mr. Adams have been transparent with WSH leadership that they would like to have a role in helping to launch the program.

95. Regarding the allegation that she shared “Confidential Information/Improperly Concealed Records,” Ms. Houde said all records associated with TEST were shared with individuals affiliated with WSH to promote organizational effectiveness. Further, any information shared was redacted to ensure no confidential information was shared.

96. In regards to the allegations that she engaged in “Special Privileges and in the “use of persons, money, or property for private gain,” Ms. Houde said she can attest that the work she completed for TEST was not for personal gain but to promote organizational effectiveness for everyone’s benefit. This work was completed within her scope as the Therapies Supervisor for the VRT and this work was shared with her leadership at WSH, the union, and up her chain of command, as evidenced by the numerous emails, meetings, and further attempts to meet. Ms. Houde said she has used her own personal resources (time and money) to produce TEST materials.

97. Ms. Houde said that there were several opportunities for her leadership to inform her if what she was doing was not okay. Ms. Houde said she has always had positive performance evaluations. Ms. Houde said that she was not given feedback from any supervisors or managers within her chain of command. She said it feels like she was set up to fail.

98. Board staff emailed Ms. Houde to ask whether her if her intent was to develop this program for WSH, whether she considered it the property of DSHS, and about the copyright.

99. In a written response to Board staff, Ms. Houde said that when the VRT was put on the layoff list they wanted to capture their original ideas in the form of a copyright. She said

they consulted with an attorney to make sure they were going about the process in the right way and not violating any conditions of employment while trying to protect their ideas.

100. In regards to the different dates on the copyright, she said the copyright process required a “Year of Completion” date which they listed as 2020 as this was when they completed their original ideas. They did not obtain a copyright on those ideas until 2021, after their team was notified of the impending elimination/layoff and they believed they were losing their jobs.

101. Board staff requested a copy of Ms. Houde’s work email history and an image of her work computer from DSHS. Board staff were provided with the emails in a PST format for Ms. Houde for the period of January 2, 2018 through September 19, 2022.

102. Board staff were also provided with a forensic image of Ms. Houde’s work computer.¹¹ Other than the evidence provided by DSHS’s IR, Board staff found no other evidence related to these allegations or that Ms. Houde was using her work email or work computer for private benefit or gain.

103. On March 1, 2023, DSHS provided Board staff with a letter dated February 9, 2023 that was addressed to Ms. Houde from Sjan Talbot (Mr. Talbot), Deputy Assistant Secretary of BHA, with the *Subject Line: Notice of Dismissal*. According to the letter, Ms. Houde was dismissed from her position as a Therapies Supervisor effective immediately for violating DSHS Administrative Policy 18.64: Standard of Ethical Conduct for Employees, DSHS Administrative Policy 18.91: Use of Resources and DSHS Administrative Policy 15.15: Use of Electronic Messaging Systems and the Internet.

¹¹ Board staff processed the PST file and computer hard drive for Ms. Houde on a Forensic Recovery of Evidence Device (FRED) using the Magnet Axiom Digital Investigation Platform to acquire and analyze the PST file and computer hard drive.

B. CONCLUSIONS OF LAW

1. The Ethics in Public Service Act, Chapter 42.52 RCW, prohibits state employees from disclosing confidential information. RCW 42.52.050, states in pertinent parts, the following:

.....

(2) No state officer or state employee may make a disclosure of confidential information gained by reason of the officer's or employee's official position or otherwise use the information for his or her personal gain or benefit or the gain or benefit of another, unless the disclosure has been authorized by statute or by the terms of a contract involving (a) the state officer's or state employee's agency and (b) the person or persons who have authority to waive the confidentiality of the information.

(3) No state officer or state employee may disclose confidential information to any person not entitled or authorized to receive the information.

RCW 42.52.050(5) defines "confidential information" as:

(a) specific information, rather than generalized knowledge, that is not available to the general public on request or (b) information made confidential by law.

2. The Ethics in Public Service Act, Chapter 42.52 RCW, prohibits state employees from Securing Special Privileges for themselves or other persons. RCW 42.52.070 states:

(1) Except as required to perform duties within the scope of employment, no state officer or state employee may use his or her position to secure special privileges or exemptions for himself or herself, or his or her spouse, child, parents, or other persons.

3. The Ethics in Public Service Act, Chapter 42.52 RCW, prohibits state employees from Use of persons, money or property for private gain. RCW 42.52.160 states:

(1) No state officer or state employee may employ or use any person, money, or property under the officers or employees official control or direction, or in his or her official custody, for the private benefit or gain of the officer, employee or another.

WAC 292-110-010 Use of state resources states, in part:

.....

(3) **Permitted personal use of state resources.** This subsection applies to any use of state resources not included in subsection (2) of this section.

(a) A state officer or employee's use of state resources is de minimis only if each of the following conditions are met:

- (i) There is little or no cost to the state;
- (ii) Any use is brief;
- (iii) Any use occurs infrequently;
- (iv) The use does not interfere with the performance of any state officer's or employee's official duties;
- (v) The use does not compromise the security or integrity of state property, information systems, or software;
- (vi) The use is not for the purpose of conducting an outside business, in furtherance of private employment, or to realize a private financial gain; and
- (vii) The use is not for supporting, promoting the interests of, or soliciting for an outside organization or group.

C. AGGRAVATING AND MITIGATING FACTORS

In determining the appropriateness of the civil penalty, the Board reviewed the criteria in WAC 292-120-030. In the matter at hand, it is an aggravating factor these types of violations significantly reduce the public respect and confidence in state government employees. In the matter at hand, it is a mitigating factor that Ms. Houde was terminated from her position with DSHS as a result of the DSHS investigation.

D. STIPULATION AND AGREED ORDER

1. Pursuant to chapter 42.52 RCW, the Executive Ethics Board has jurisdiction over Laura Houde and over the subject matter of this complaint.
2. Under RCW 34.05.060, the Board can establish procedures for attempting and executing informal settlement of matters in lieu of more formal proceedings under the Administrative Procedures Act, including adjudicative hearings. The Board has established such procedures under WAC 292-100-090.
3. Pursuant to WAC 292-100-090(1), the parties have the authority to resolve this matter under the terms contained herein, subject to Board approval.

4. Laura Houde agrees that if any or all of the alleged violations were proven at a hearing, the Board may impose sanctions, including a civil penalty under RCW 42.52.480(1)(b) of up to \$5,000, or the greater of three times the economic value of anything received or sought in violation of chapter 42.52 RCW, for each violation found. The Board may also order the payment of costs, including reasonable investigative costs, under RCW 42.52.480(1)(c).

5. Laura Houde further agrees that the evidence available to the Board is such that the Board may conclude they violated the Ethics in Public Service Act. Therefore, in the interest of seeking an informal and expeditious resolution of this matter, the parties agree to entry of the stipulated findings of fact, conclusions of law and agreed order.

6. Laura Houde waives the opportunity for a hearing, contingent upon acceptance of this stipulation by the Board, or their acceptance of any modification(s) proposed by the Board, pursuant to the provisions of WAC 292-100-090(2).

7. If the Board accepts this stipulation, the Board agrees to release and discharge from all further ethics proceedings under chapter 42.52 RCW for any allegations arising out of the facts in this matter, subject to payment of the full amount of the civil penalty due and owing, any other costs imposed, and compliance with all other terms and conditions of the stipulation. Laura Houde in turn agrees to release and discharge the Board, its officers, agents and employees from all claims, damages, and causes of action arising out of this complaint and this stipulation.

8. If the Board accepts this stipulation, it does not purport to settle any other claims between Laura Houde and the Washington State Executive Ethics Board, the State of Washington, or other third party, which may be filed in the future. No other claims of alleged violations are pending against Laura Houde at this time.

9. If the Board accepts this stipulation, it is enforceable under RCW 34.05.578 and any other applicable statutes or rules.

10. If the Board rejects this stipulation, or if Laura Houde does not accept the Board's proposed modification(s), if any, this matter will be scheduled for an administrative hearing before the Board. If an administrative hearing is scheduled before the Board, waives any objection to participation by any Board member at the hearing to whom this stipulation was presented for approval under WAC 292-100-090(2). Further, Laura Houde understands and agrees that this stipulation as well as information obtained during any settlement discussions between the parties shall not be admitted into evidence during the administrative hearing, unless otherwise agreed by the parties.

11. Laura Houde agrees to pay a civil penalty in the amount of two-thousand-seven-hundred-fifty dollars (\$2,750) associated with violations of RCW 42.52.

12. The civil penalty in the amount two-thousand-seven-hundred-fifty dollars (\$2,750) is payable in full to the Washington State Executive Ethics Board within forty-five (45) days after this stipulation is signed and accepted by the Board, or as otherwise agreed to by the parties.

I. CERTIFICATION

I, Laura Houde, hereby certify that I have read this stipulation in its entirety, that my counsel of record, if any, has fully explained the legal significance and consequence of it. I further certify that I fully understand and agree to all of it, and that it may be presented to the Board without my appearance. I knowingly and voluntarily waive my right to a hearing in this matter and if the Board accepts the stipulation, I understand that I will receive a signed copy.

 5/19/23
Laura Houde Date
Respondent

Presented by:

 7/14/2023
KATE REYNOLDS Date
Executive Director

II. ORDER

Having reviewed the proposed stipulation, WE, THE STATE OF WASHINGTON EXECUTIVE ETHICS BOARD, pursuant to WAC 292-100-090, HEREBY ORDER that the Stipulation is

✓ ACCEPTED in its entirety;
____ REJECTED in its entirety;
____ MODIFIED. This stipulation will become the order of the Board if the Respondent approves* the following modification(s):

DATED this 14th day of July 2023.

Approved via Zoom

Jan Jutte, Chair

Approved via Zoom

Kelli Hooke, Vice Chair

Absent

Earl Key, Member

Shirley Battan

Shirley Battan, Member

Approved via Zoom

Megan Abel, Member

* I, Laura Houde, accept/do not accept (circle one) the proposed modification(s).

Laura Houde, Respondent

Date