

Behavioral Health Model Ordinance & Communications Toolkit

IACC Online Conference

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Agenda

1. Behavioral Health Facilities Program Overview
2. Behavioral Health Model Ordinance & Guidance
3. Communications Toolkit
4. Next Steps & Contact Information



Behavioral Health Transformation



Governor's Behavioral Health Plan

The [Governor's Behavioral Health Transformation Plan](#) calls for the development of more community-based behavioral health facilities to provide individuals treatment closer to their home.

The Governor's Plan calls for:

- Broader [continuum of care](#) in community-based settings
- Transition for civil patients out of state hospitals
- New investments in the workforce and infrastructure

Behavioral Health Facilities Program

As a result, Commerce's Behavioral Health Facilities Program has made awards to 127 community-based behavioral health projects since the 2013-15 biennium.

Commerce opened a new application round on October 1. Funds will be awarded in March of 2022.

2019-2021 Behavioral Health Facilities



- 90-180 Day Civil Commitment
- Children and Minor Youth
- Dementia Care
- Direct Appropriation
- Enhanced Services Facility
- Intensive Behavioral Health
- Peer Respite
- Regional Needs
- Secure Withdrawal Management and Stabilization
- Trueblood

2021-23 Behavioral Health Facilities Allocations

Facility Type	Funding Allocation
90/180 Day Civil Commitment Beds	\$18 M
Crisis Stabilization (Trueblood, King County)	\$12 M
Enhanced Services Facilities	\$11.6 M
Dementia Care	\$10 M
Intensive Behavioral Health	\$9.4 M
Regional Needs	\$2.4 M
Peer Respite	\$2 M
Crisis Stabilization	\$2 M
Children and Minor Youth	\$2 M
Secure Withdrawal Management & Stabilization	\$2 M
TOTAL	\$71.4 M

Model Ordinance & Guidance



Model Ordinance Authorized in 2019-21 Budget

To support transformation, the 19-21 state budget tasked Commerce with developing a model ordinance **for cities and counties to utilize** in siting community-based behavioral health facilities.

Objective: To provide useful planning guidance so that local governments can readily update policies and codes to allow siting and development of new and innovative community-based behavioral healthcare projects.

This model ordinance...

- Presents some challenges as zoning, development standards, and land use regulatory frameworks vary by jurisdiction
- Will not necessarily make siting less challenging if there is community concern or opposition, but it can create a common framework/language to address known issues.
- **Communications Toolkit** is an accompanying resource

Definition: Community-based Behavioral Health Facility - Residential facility licensed and regulated by the State of Washington, with up to 24 beds, staffed to provide on-site care and that is not a hospital or a group home.

Model Ordinance and Guidance Approach

- Intended to serve as a resource to provide guidance, standard definitions, and example code language
- Acknowledges jurisdictions may allow facilities through existing zoning and/or use the Essential Public Facilities (EPF) process
 - Thus, provides jurisdictions the option to adopt the model ordinance in whole, in part, or not at all

Essential Public Facilities

[WAC 365-196-550](#) states the normal development review process should be used, when possible, rather than the EPF process.

- If existing code does not address behavioral health facilities, [adopting the model ordinance](#) may help provide definitions and criteria to accommodate facilities.
- Otherwise, the EPF process is available as behavioral health facilities are covered by it. Section 3(a) notes that "Cities and counties may not use their comprehensive plan or development regulations to preclude the siting of EPFs."

Model Ordinance: Orientation

Introduction

The Washington State Legislature charged the Department of Commerce with developing a Model Ordinance for cities and counties to utilize for siting community-based behavioral health facilities (ESSB 6168 (2020), Section 127 (27)). BERK Consulting was hired by Commerce and guided by an Advisory Committee made up of representatives from the Association of Washington Cities (AWC); Department of Health (DOH); Department of Social & Health Services (DSHS); the Governor's Office; Health Care Authority (HCA); housing, health and human services providers; Tribes and local governments; and the Washington State Association of Counties.

Document Orientation

The right-hand column or textbox in this document contains additional definitions, regulatory guidance, and commentary.

Additional information on the Behavioral Health Model Ordinance Project can be found on the Department of Commerce webpage at: <https://www.commerce.wa.gov/building-infrastructure/capital-facilities/behavioral-health-model-ordinance-project/>

We want your feedback

Siting of behavioral health facilities is relatively new and evolving. If there are changes or additions you think should be made to this document or to the Communications Toolkit (available at the [project webpage](#)), please visit the project webpage and reach out to the project contact.

Information in the right-hand column throughout this document contains additional definitions, regulatory guidance, and commentary.

Project Team:

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Background

It is the purpose of this ordinance to promote the public health, safety, and general welfare supporting the goals of the **Community Behavioral Health Services Act, Chapter 71.24 RCW**, and the statewide Integrated Managed Care (IMC) Policy.

Specifically, these goals are to:

- Develop a community-based behavioral health system to assist people experiencing mental illness or a substance use disorder to retain a respected and productive position in the community.
- Encourage the development of regional behavioral health services with adequate local flexibility to assure eligible people in need of care access to the least-restrictive treatment alternative appropriate to their needs, and the availability of treatment components to assure continuity of care.
- Coordinate physical health, mental health, and substance use disorder treatment services to help provide whole-person care.

These goals will require participation from jurisdictions across the state. Jurisdictions through their zoning can support community providers in expanding capacity and establishing new facilities for behavioral health services.

This model ordinance was developed to assist cities and counties by providing definitions and code language to facilitate siting community-based behavioral health facilities.

Mental health issues are among the most common health conditions in the United States. As many as 50% of people will be diagnosed with a mental health illness at some point¹ and 20% of Americans experience a mental illness each year.² Every community is affected. It is essential that people have equal access to behavioral healthcare in their home community. We all have a role to play in ensuring residents of Washington State have an opportunity for wellbeing.

Integrated Managed Care expanded the state's Apple Health (Medicaid) program to include mental health and substance use disorder treatment services to provide whole-person care. Completed January 1, 2020, it represents a statewide transition to regional privately managed care organizations (MCOs), non-profit accountable communities of health (ACHs), and behavioral health administrative service organizations (BH-ASOs).¹

Local Government Input

As part of this project, we held focus groups with staff and elected officials from cities and counties to understand local experiences and perspectives about these issues, including processes and requirements, challenges, opportunities, and ideas on what should be included in a model ordinance. A summary of what we heard is available at the [project webpage](#).

Addressing Stigma

Stigma around mental health can engender fear of the populations served, which may produce community opposition to facilities. Other community concerns include parking and noise impacts and ensuring provider accountability for maintenance and operations.

This ordinance supports the land use decision-making process but won't necessarily lessen community opposition. An accompanying **Communications Toolkit** (available at the [project webpage](#)) addresses broader issues related to fear, stigma, and misinformation.

Conference Session Code

BEHAVIORAL

Communications Toolkit



Communications Toolkit Objectives

- Provide general education and raise awareness of behavioral health issues and City planning
- Provide strategies for local governments and behavioral health facility developers in anticipation of community concerns
- Share resources and real-world examples to leverage in communications

Toolkit Formats:

- [Web-Based Toolkit](#)
- [Downloadable PDF](#)

Next Steps & Contact Information



For more information

Behavioral Health Facilities Program

<https://www.commerce.wa.gov/building-infrastructure/capital-facilities/behavioral-health-bed-grants/>

Model Ordinance Project

<https://www.commerce.wa.gov/building-infrastructure/capital-facilities/behavioral-health-model-ordinance-project/>

Next Steps

Competitive Grant Process

- Open October 1 – December 1, 2021
- Awards announced March 2022

Implementation

- Technical Assistance to grantees and jurisdictions related to the model ordinance and siting
- Gather feedback from grantees, jurisdictions, and others to improve materials



Thank you!



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