Washington State Department of Social and Health Services

# Transforming Lives

## **REPORT TO THE LEGISLATURE**

### Clark County Residential Treatment Facility 2023 Status Report

Engrossed Second Substitute House Bill 5187, Section 202 (19)

December 1, 2023

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#### **EXECUTIVE SUMMARY**

The 2023 Washington State Legislature enacted Engrossed Substitute Senate Bill 5187 – the 2023-2025 Operating Budget. Section 202 (19) of the bill directs the Department of Social and Health Services to:

"... to operate the 48 bed Clark County facility to provide long-term inpatient care beds as defined in RCW 71.24.025. The department must use this facility to provide treatment services for individuals who have been committed to a state hospital pursuant to the dismissal of criminal charges and civil evaluation ordered under RCW 10.77.086 or 10.77.088. In considering placements at the facility, the department must maximize forensic bed capacity at the state hospitals for individuals in jails awaiting admission that are class members of Trueblood, et al. v. Department of Social and Health Services, et al., United States district court for the western district of Washington, cause no. 14-cv-01178-MJP. The department must submit a report to the office of financial management and the appropriate committees of the legislature by December 1, 2023, and December 1, 2024, providing a status update on progress toward opening the new facility."

Note: The budget proviso changes the program from the 2021-2023 budget proviso, in which DSHS was to operate 16 beds on this campus, with HCA to contract with community providers to operate the remaining 32 beds. DSHS will now operate all 48 beds. The impact of these changes will be reflected in this report.

This report is in response to that directive. The following summarizes progress towards opening the new facility.

#### **PROGRAM SCOPE**

The goal of the Civil Center for Behavioral Health at Brockmann Campus, hereafter referred to as the "program," is to serve adults on 90- or 180-day civil commitments under the Involuntary Treatment Act (ITA), specifically individuals who have been committed to a state hospital pursuant to the dismissal of criminal charges and a civil evaluation ordered under Revised Code of Washington (RCW) 10.77.086 or 10.77.088. The program will provide inpatient mental health treatment in a secure environment to assist people in stabilizing their acute psychiatric symptoms, reducing barriers to success in the community, and supporting the development and implementation of an individualized recovery plan. Following treatment, it is the goal of the program to transition residents back to the community or to a less-restrictive setting. The program will encourage residents to participate in long-term planning for mental health treatment and rehabilitation, and focuses on the following outcomes:

- 1. Identifying and addressing safety concerns and developing or strengthening behaviors, skills, and habits that will lead to a successful recovery; and
- 2. Improving personal care, social, communication, and practical living skills.

Treatment services will be provided through highly qualified and competent interdisciplinary treatment teams. The core treatment team consists of the resident, psychiatric provider, psychiatric nurse, social worker, psychologist, counselor, and/or recreational specialist. The treatment team members will individually and collectively assess and identify the underlying causes of the resident's Clark County RTF Page 3 of 8 2023 Status Report

admission to the program. The treatment team will work with the resident and any of their identified community supports, to include family members, to develop a treatment plan that includes measurable goals and objectives with interventions designed to assist the resident in achieving their recovery goals and developing a plan to transition back to the community that will best support these goals.

#### ACCREDITATIONS, LICENSURE AND REIMBURSEMENT

Currently, the plan is for the program to seek licensure by the Department of Health (DOH) as a Residential Treatment Facility (RTF) in accordance with Washington Administrative Code (WAC) 246-337. DSHS will also apply for campus Behavioral Health Agency licensure, with certification as an Adult Evaluation and Treatment program in accordance with WAC 246-341.

Given the expansion of the DSHS operated beds from 16 to 48, the campus will be considered an Institute of Mental Disease. The department will be working with a contractor to determine which accreditations and licensures will set the facilities up best for receiving federal reimbursement.

#### FACILITY PRE-DESIGN

The Department was appropriated funding to conduct a pre-design study for three 16-bed long term civil commitment residential treatment facility (Civil RTF) for a total of 48 beds. BRCA Design of Tacoma, WA was selected as the design firm. A multi-disciplinary team was established which included psychiatrists, licensed mental health clinicians, nurses, operational leadership, safety and security, project management staff, and staff from other DSHS divisions including the Maintenance and Operations Division, and the Office of Capital Programs.

The pre-design study determined the best location to be Clark County, WA with an anticipated project cost of \$50,917,000.

The facility concept included adequate size and specialized functionality to provide exceptional care and treatment. The physical environment was designed not only to be hardened and structured to reduce ligature and violence risks, but to do so in a warm, therapeutic space, allowing for optimal recovery. The facility design includes both single-and double-occupancy rooms, multiple meeting/training/therapy rooms, two outdoor experience spaces, and common and quiet areas. Additionally, the building was designed to blend into the natural environment with elements such as natural materials and colors allowing the facility to blend into the surrounding neighborhoods.

Preparation of design and land use documents began in February 2020 with the approval of the pre-design study by OFM. The design process included the pre-design team and was augmented with specialized operational team members as needed.

An additional \$38,125,000 was approved in the FY 21-23 biennium budget for the construction of the 48 Bed Civil RTF.

#### **USE-PERMITS**

The Department of Social and Health Services (DSHS) purchased a 20-acre site in Clark County north of Vancouver, WA. The property is zoned as Business Park (BP). Clark County defines types of uses that are permitted in Business Park zone. The purpose of the Business Park zone is to provide, "limited light manufacturing and wholesale trade, light warehousing, business and professional services, research, business, and corporate offices, and other similar compatible or supporting enterprises not oriented to the general public. (CCMC 40.230.085 A). These uses include but are not limited to limited manufacturing, retail, information (publishing, motion picture and sound recording, telecommunications, etc.), health care and social assistance, hospital, and nursing and residential care facilities. DSHS followed a conditional use permitting (CUP) process as requested by Clark County.

The CUP process included several engineering studies, land use investigation, and community outreach. This process began December 2020 with a preapplication meeting with Clark County. The project team collected and created countless documents in support of the CUP.

The CUP process provides the community:

- A definition of the proposed project.
- The opportunity to review the potential environmental and traffic impacts.
- An opportunity to discuss if the facility is a "good fit".

The CUP application was submitted to Clark County in June 2021 for consideration. The CUP permit was approved by Clark County's Hearing Examiner on August 10th, 2022.

#### **COMMUNITY OUTREACH**

The Department held three separate community outreach public meetings to understand community member concerns and to provide them with accurate information about the program and those who will be served:

- July 23, 2020, for a conditional use permit with the City of Vancouver.
- Nov. 4, 2021, from 4-6pm held at WSU Vancouver
- Nov. 9, 2021, from 5:30-7:30pm (virtual meeting)

Additionally, the Department also met with leaders at the Vancouver and Battle Ground School Districts, the Washington State University – Vancouver, and the Garner School for Arts and Sciences. Several news articles were also written about the project by local publications, and this continues to be the case as the project moves along.

The Department currently has an outfacing website with updated information for community members to read about the project and offered the ability to send personalized emails at the request of community members to stay informed throughout the siting and construction process.

#### TIMELINE

Hoffman Construction was hired as the general contractor responsible for completing construction. Site development permits were submitted to Clark County in October 2022. DSHS received the Conditional Use Permit (CUP) to develop the site in August 2022. Clark County only accepts applications for Building Permits after development permits are issued. Being so, building permits were applied for in October of 2022 and approved for issue in July of 2023. Construction is projected to take 21 months, which started May of 2023. Individual buildings will be completed and ready for occupancy one month apart. Upon attaining the building occupancy permit, BHA vendors will initiate an 8-week move-in process that will result in being operationally ready to accept the first residents in May 2025.

Activity	Schedule
Predesign	September 2019 – February 2020
Design	June 2020 – July 2021
Permitting	October 2022 – August 2023
Bidding and Contract Award	February 2023
Construction to Occupancy Permit	March 2023 – May 2025
Program Move-in & Readiness	March 2025-April 2025
Resident Admission	May 2025

Table 1: High level construction and admission schedule

#### **STAFFING MODEL**

This staffing model has been revised as clinical and operational policies and procedures have developed. Slight changes in staffing needs were identified to support full operations. This staffing model represents the base staffing needed to operate each unit annually and doesn't include one-time, shared, or support services.

Brockmann - Civil Center for Behavioral Health Proposed Staffing Plan						
Operations	FTE	Direct Care	FTE			
Civil RTF Program Director	1.0	Registered Nurse 3	7.8			
Administrative Assistant 3	1.0	Registered Nurse 2	7.8			
Medical Records (FRA3)	1.0	Program Specialist 3	3.9			
Rec & Athletics Specialist 2	1.0	Institutional Counselor 3	21.6			
Training Specialist	1.0	Licensed Practical Nurse	4.9			
Safety Officer*	0.3	Total	46.1			
Quality Assurance Manager	1.0	Facilities	FTE			
Total	6.3	Custodian 3	1.8			
Medical	FTE	Custodian 2	10.8			
Medical Director*	0.3	Facility Administrator (WMS 1)	1.0			
Medical ARNP*	0.3	Administrative Assistant 3	1.0			
Psych ARNP	1.0	Maintenance 3	3.6			
Director of Nursing*	0.5	Maintenance 2	1.8			

Total	2.2	Maintenance 1	7.2
Social Work & Rehab	FTE	Total	27.2
Clinical Services Manager	1.0	Information Technology	FTE
Psychiatric Social Worker 3	1.0	IT Customer Support - Entry	1.0
Psychologist 4	1.0	Total	1.0
Psych Associate	2.0		
Total	5.0		

\*Position will be shared with Maple Lane Campus

*Staffing numbers provided are based on full implementation (FY2025)* 

#### POLICIES AND PROCEDURES

Policy and procedures have been created for BHA's Residential Treatment Facilities, this included crosswalks of WACs and RCWs with a review of BHA Residential Treatment Facility and state hospital policies and procedures, as well as DOH requirements and CARF/Joint Commission recommendations, and adopting/editing where appropriate. Procedures will be modified as needed due to the location, co-mingling of the three units and to address other needs for these facilities.

#### SCREENING PROTOCOL

Residents must meet admission criteria which includes medical clearance and required diagnostic tests including review of vital signs, basic neurological screening, questions about substance use, medication use, etc. The screening will be completed by a licensed nurse and is designed to be repeated as necessary. Residents will also be assessed to ensure a cognitive functioning level sufficient to understand the facility's evacuation and shelter in place processes in the event of an emergency. Residents will need to have the ability to evacuate with limited staff assistance. Residents should be able to respond to alarms and/or staff direction and evacuate or shelter in place in an orderly and timely manner.

Exclusionary criteria for admission include:

- Any resident falling outside the medically determined parameters of the facility.
- Sexually violent offenders being detained pursuant to RCW 71.09.
- Residents with pending (not dismissed or otherwise disposed) felony charges.
- Residents requiring inpatient detoxification from alcohol and/or other drugs until after detoxification from substances has occurred.
- Residents with a primary diagnoses of substance use.
- Residents with severe developmental disabilities or organic brain syndromes that would preclude participation in emergency procedures.

A screening protocol has been developed to ensure that the needs of admissions can be met within the facility, this protocol is already being utilized to identify residents for BHA's civil commitment facility on the Maple Lane Campus. The screening protocol recommends when residents should be

referred to a state hospital bed at WSH or ESH due to their acuity/safety risk, acute care hospitals for medical needs or to the appropriate level of care in cases where the treatment is not available at the state hospital or the Brockmann Campus facility.

The screening protocol addresses:

- Physical health needs and appointments
- Infectious diseases requiring quarantine
- Physically and sexually violent behaviors
- Elopement risk
- Populations whose primary diagnosis require specialized services not available within the facility or those who will not benefit from the care provided in the facility due to:
  - o Dementia/Alzheimer's
  - Intellectual Disabilities/Autism
  - Traumatic Brain Injuries
  - Personality Disorders
  - Substance Use Disorders

Additional work is needed to finalize the protocol, including additional coordination with the HCA, University of Washington, and the state hospitals as the determination of the admission criteria for facilities serving individuals on 90- or 180-day civil commitment orders.

The Long-Term Civil Commitment Sub-Workgroup Transitions of Care/Discharge of Adult Civil to the Community, is a multi-agency workgroup which includes HCA, Home and Community Services, University of Washington and the Department. This group will be developing the workflow and admissions triaging for 90- and 180-day civil commitment orders. That system will include the BHA state hospitals and RTFs, University of Washington's involuntary treatment units, and HCA contracted 90- and 180-day civil commitment RTFs. The majority of civil residents will be transitioned to community settings; however, hard to serve individuals will continue to be served in state hospitals.

#### **COVID-19 IMPACT**

The COVID-19 pandemic has created some unique challenges to building and staffing new facilities. The primary impacts will likely occur when the contractors order materials that are in high-demand and low-availability. Another impact that is anticipated relates to the ongoing workforce shortage in behavioral health fields. The design and development teams have been thoughtfully planning with these factors in mind and utilizing strategies to minimize delays.