

Washington State Department of Social and Health Services

Transforming
Lives

REPORT TO THE LEGISLATURE

Clark County Residential Treatment Facility 2022 Status Report

Engrossed Second Substitute House Bill 5092, Section 202(1)(p)

December 1, 2022

Behavioral Health Administration
PO Box 45050
Olympia, WA 98504-98504
(360) 338-5005
<http://www.dshs.wa.gov/bha>



Table of Contents

EXECUTIVE SUMMARY	3
PROGRAM SCOPE	3
ACCREDITATIONS, LICENSURE AND REIMBURSEMENT	4
FACILITY PRE-DESIGN	4
USE-PERMITS	4
COMMUNITY OUTREACH.....	5
TIMELINE.....	6
STAFFING MODEL	6
POLICIES AND PROCEDURES	7
SCREENING PROTOCOL	7
COVID-19 IMPACT	9

EXECUTIVE SUMMARY

The 2021 Washington State Legislature enacted Engrossed Substitute Senate Bill 5092 – the 2021-2023 Operating Budget. Section 202 (1) (p) of the bill directs the Department of Social and Health Services to:

“...prepare for opening a 16 bed facility located in Clark county 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 a civil evaluation ordered under RCW [10.77.086](#) or [10.77.088](#). The department must develop and implement a protocol to assess the risk of residents being considered for placement in this facility and determine whether the level of security and treatment services is appropriate to meet the resident's needs. The department must submit a report to the office of financial management and the appropriate committees of the legislature by December 1, 2022, providing a description of the protocol and a status update on progress toward opening the new facility.”

This report is in response to that directive. The following summarizes progress towards opening the new facility and provides a description of the protocol to assess the risk of residents considered for placement.

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 provides 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 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.

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 Behavioral Health Agency licensure, with certification as an Adult Evaluation and Treatment program in accordance with WAC 246-341.

The Department is committed to seeking accreditation for the Civil RTFs that supports high quality inpatient psychiatric care, and will be working to gain this accreditation.

The Department is working closely with the Health Care Authority (HCA) to ensure there is a process for Civil RTFs to be reimbursed within the state Medicaid Plan. Costs for room and board are not Medicaid eligible and will need to be addressed within the biennial budget.

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. The legislature defined the Department will operate one 16 bed RTF and the Health Care Authority (HCA) will procure vendors to the operate the other two 16 bed RTFs. 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 on the 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 the 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 2020 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 – 6 p.m. held at WSU Vancouver
- Nov. 9, 2021, from 5:30 – 7:30 p.m. (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 out-facing 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 and building permits were submitted to Clark County in October 2022. DSHS anticipates permits to be approved around December 2022. Construction is projected to take 18 months once started. Individual buildings will be completed and ready for occupancy one month apart. Upon attaining the building occupancy permit, BHA and HCA vendors will initiate an 8-week move-in process that will result in being operationally ready to accept residents in December 2024.

Table 1: High level construction and admission schedule

Activity	Schedule
Pre-design	September 2019 – February 2020
Design	June 2020 – July 2021
Permitting	October 2022 – December 2022
Bidding and Contract Award	November 2022
Construction to Occupancy Permit	March 2023 – September 2024
Program Move-in & Readiness	October 2024-November 2024
Resident Admission	December 2024

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 the facility 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 procedure development is in progress. The initial steps taken 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 CART recommendations, and adopting/editing where appropriate. Additional procedures will be developed as plans are made to operationalized policies.

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 draft screening protocol has been developed to ensure that the needs of admissions can be met within the facility. 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:
 - 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 service 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. Despite the potential impact, COVID-19 cannot be blamed for delays in this projects schedule.