

# Involuntary Treatment System Integration

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## Updates as of October 2018

HB 1713 Sec. 201 (2016) made changes to multiple aspects of the behavioral health system. This is an Update of the designated primary tasks since June, 2018.

Additionally the bill required that the state “ensure that at least one sixteen-bed secure detoxification facility is operational by April 1, 2018, and that at least two sixteen-bed secure detoxification facilities are operational by April 1, 2019” (RCW 71.05.760).

### How many facilities are currently open/operational?

On April 1, 2018 two adult facilities opened as schedule and are currently providing secure withdrawal management services with additional capacity than originally mandated by HB 1713.

- American Behavioral Health Services (ABHS) Chehalis, 21 beds
- American Behavioral Health Services (ABHS) Spokane, 24 beds

Currently there are 3 secure withdrawal management and stabilization (SWMS) facilities in development:

- Valley Cities King County: 32 adult facility beds
- Day Break Clark County: 3 youth facility beds
- Day Break Spokane County: 8 youth facility beds, female

HCA expects to have facility capacity options available within the timelines established in HB 1713.

### SWMS facility development

On or about August 2017, a letter of Interest was sent out to all agencies interested in developing secure withdrawal management and stabilization services. We received nine letters of interest from agencies interested in the development of SWMS facilities. To date, we continue to receive calls from agencies interested in SWMS development.

We are currently attempting to locate facilities interested in northeastern and southeastern Washington to provide withdrawal management in the areas we have identified as a serious need for services.

Omak/Okanogan, Toppenish, and Yakima regions are identified as service need locations.

### Budget/funding

We have received funding of \$4 million in the Governors Supplemental Budget to stand up two facilities (Capital/Commerce Supplemental Budget 2017-19).

The Department of Commerce, along with the Department of Social and Health Services, and the Health Care Authority, will issue grants through a competitive process to community hospitals, SWMS facilities and other community entities to expand and establish new capacity for behavioral health services across the state.

## Process to train Designated Mental Health Professionals (DMHPs) to become Designated Crisis Responders is ongoing

DBHR is committed to providing quarterly training for new staff hired after April 1, 2018, and continue to train Designated Crisis Responders until April 1, 2020. To date, DBHR has trained more than 500 DMHPs across the state and the training is ongoing.

In the process of measuring, examining, and testing to gauge effectiveness, we initiated training feedback questions. The majority of training participants requested more information, specifically on writing Involuntary Treatment Act (ITA) assessments; and review “criteria for diagnosing substance use disorders and information specifically on risk assessments in association with the presence of substance use disorders.”

DCRs expressed they would benefit from further substance use education to enhance their skills in presenting on the physiological effects of various classes of drugs and risk, as it would pertain to substance use disorders.

HCA/DBHR contracted with Spokane Falls Community College to provide this CDP online training opportunity. The CDP online training program offers 15 credits for content/review criteria for diagnosing substance use disorders and provides information on risk assessments in association with the presence of substance use disorders. Please refer to the WAC 246-811 and Washington State Department of Health website for details on full certifications.

This training opportunity was developed to enhance DCRs’ skills in carrying out their job duties as they relate to substance use disorders and the ITA. In addition to coursework, students are required to complete supervised experience hours as required by the state to receive full Chemical Dependency Professional status (WAC 246-811-046) and pass the credentialing exam.

## DBHR integrated with the Washington State Health Care Authority per SB 6312 (2014) Section 8

On July 1, 2018, the Behavioral Health Administration, Division of Behavioral Health and Recovery (DBHR) joined the Washington State Health Care Authority (HCA). Because we are no longer a part of the Department of Social and Health Services, we are subject to changes to our rules. If you would like to review the new DOH rules regarding the licensing and certification of behavioral health agencies, visit

<https://www.doh.wa.gov/LicensesPermitsandCertificates/FacilitiesNewReneworUpdate/BehavioralHealthAgencies/RulesinProgress>.