



## Legislation Details (With Text)

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**On agenda:**      **Final action:** 6/18/2024

**Enactment date:** 7/1/2024      **Enactment #:** 19783

**Title:** AN ORDINANCE adopting the crisis care centers levy implementation plan, required by Ordinance 19572, Section 7.A., to govern the expenditure of crisis care centers levy proceeds from 2024 to 2032 to create a regional network of five crisis care centers, restore and expand residential treatment capacity, and increase the sustainability and representativeness of the behavioral health workforce in King County.

**Sponsors:** Pete von Reichbauer, Girmay Zahilay, Teresa Mosqueda

**Indexes:** Crisis Connections, Crisis Intervention Program

**Code sections:**

**Attachments:** 1. Ordinance 19783, 2. A. Crisis Care Centers Levy Implementation Plan 2024-2032, dated June 2024, 3. A. Crisis Care Centers Levy Implementation Plan 2024-2032, dated May 17, 2024, 4. A. Crisis Care Centers Levy Implementation Plan 2024-2032, 5. 2024-0011transmittal letter, 6. 2024-0011 DCHS CCC Financial Plan, 7. 2024-0011 fiscal note, 8. 2024-0011 Legislative Review Form, 9. 2024-0011 Crisis Care Centers Initiative Briefing\_021424RPC, 10. Legislative Schedule for Proposed Ordinance 2024-0011, 11. 2024-0011\_SR\_CCC-IP\_RPC3.13, 12. ATT4. Crisis Care Centers Initiative Briefing\_021424RPC, 13. 2024-0011\_SR\_CCC-IP\_RPCMay.docx, 14. ATT6. ExecStaffResponses\_April2024.docx, 15. 2024-0011\_SR\_CCC-IP\_RPCMay17, 16. ATT7. S1\_AttAMay17\_bar, 17. ATT7.A. S1\_AttA\_Striker\_May17\_CLEAN, 18. ATT8. S1\_AttA\_Striker\_May17\_TRACKCHANGES\_ILLUSTRATIVEPURPOSEONLY, 19. 2024-0011\_LineAmendmentTracker\_May17, 20. 2024-0011\_Striker S1\_May17\_bar, 21. 2024-0011\_AttA\_to the Striker\_May17\_CLEAN, 22. 2024-0011\_Amd1toS1\_PvR\_missingfinplantext\_khm, 23. 2024-0011\_Amd2toS1\_Perry\_Metrokhmv2 bar, 24. 2024-0011\_Amd3toS1\_Perry\_ArrivalDataCollection+Reportingkhm bar, 25. 2024-0011\_Amd4toS1\_PvR\_KCDevelops\_v2khm bar, 26. 2024-0011\_Amd5toS1\_SCA\_ScoringSMERepkhm bar, 27. 2024-0011\_Amd6toS1\_Moore\_GoodNeighborkhm bar COPY, 28. 2024-0011\_Amd7toS1\_SCA\_BHABaptNotification, 29. 2024-0011\_SR\_CCC-IP\_HHSJune4, 30. ATT6\_Question Responses, 31. 2024-0011\_SR\_CCC-IP\_RPCJune12, 32. 2024-0011\_Amd1\_KCPurchaseSiteFacility\_06102024\_PvR, 33. 2024-0011\_Amd2\_CorrectDateAttAkhm bar\_PvR, 34. 2024-0011\_RevisedSR\_CCC-IP\_RPCJune12

Date	Ver.	Action By	Action	Result
6/18/2024	3	Metropolitan King County Council	Passed	Pass
6/12/2024	2	Regional Policy Committee	Recommended Do Pass Substitute	Pass
6/4/2024	2	Metropolitan King County Council	Re-referred	
6/4/2024	2	Health and Human Services Committee	Recommended Referred to Another Committee	Pass
5/17/2024	1	Regional Policy Committee	Recommended Do Pass Substitute	Pass
5/8/2024	1	Regional Policy Committee	Deferred	
3/13/2024	1	Regional Policy Committee	Deferred	

2/14/2024	1	Regional Policy Committee	Deferred
1/16/2024	1	Metropolitan King County Council	Introduced and Referred

Clerk 12/29/2023

AN ORDINANCE adopting the crisis care centers levy implementation plan, required by Ordinance 19572, Section 7.A., to govern the expenditure of crisis care centers levy proceeds from 2024 to 2032 to create a regional network of five crisis care centers, restore and expand residential treatment capacity, and increase the sustainability and representativeness of the behavioral health workforce in King County.

STATEMENT OF FACTS:

1. Federal and state investments in public behavioral health systems have been inadequate for decades. As funding for behavioral health services has remained inadequate, the needs of people in King County who are living with mental health and substance use conditions, collectively referred to as behavioral health conditions, have grown.
2. Among people enrolled in Medicaid in King County in 2022, 45,000 out of 88,000, which is 51 percent, of adults with an identified mental health need did not receive treatment, and 21,000 of 32,000, which is 66 percent, of adults with an identified substance use need did not receive treatment.
3. The gap in accessing behavioral health services is not evenly experienced across King County's population. There are significant inequities in service access and utilization among historically and currently underserved communities. Black, Indigenous, and People of Color populations are more frequently placed in involuntary treatment while having the least access to routine behavioral health care.
4. The scale of suffering related to mental health conditions and substance use remains persistently elevated. 1,229 people died by suicide in Washington in 2021, equivalent to 15.3

out of every 100,000 people, which is the 27th highest rate nationally. 292 people died by suicide in King County in 2021. Suicide deaths increased nationally by 2.6 percent from 2021 to 2022. Youth are especially impacted. According to the 2021 Healthy Youth Survey, 18.6 percent of King County's 8th graders considered suicide in past year, and 8.8 percent made attempts. Among Washington's 10th graders in 2021, 51.6 percent of gender-diverse youth and 42.4 percent of youth identifying as LGBTQIA+ considered suicide, and 22.7 percent and 17.9 percent attempted suicide, respectively.

5. Deaths related to drug overdose are increasing at unprecedented rates. The annual number of overdose deaths in King County have nearly doubled in just three years, from 508 deaths in 2020 to 1,001 in 2022, and the number of fatal overdoses in 2023 has already exceeded that total. There are significant disparities in overdose deaths by race and ethnicity. The age-adjusted rate of fatal overdoses in King County is the highest in the American Indian/Alaska Native community and is five times higher than non-Hispanic White King County residents.

6. The Federal Substance Abuse and Mental Health Services Administration ("SAMHSA") released its National Guidelines for Behavioral Health Crisis Care in 2020. Those guidelines call for the creation of crisis facilities, referred to by SAMHSA as "somewhere to go" for people in crisis to seek help. SAMHSA's guidelines envision crisis facilities as part of a robust behavioral health crisis system that also includes the 988 Suicide and Crisis Lifeline, referred to as "someone to call," and mobile crisis teams, described as "someone to respond."

7. As of December 2023, the Crisis Solutions Center, operated by Downtown Emergency Service Center and requiring mobile team, first responder or hospital referral for entry, is the only voluntary behavioral health crisis facility for the entirety of King County, and a walk-in urgent care behavioral health facility does not exist in King County. For youth in King County, there is not a crisis facility option at all.

8. King County's behavioral health crisis service system relies heavily on phone support and outreach services, with very few options of places for persons to go for immediate, life-saving care when in crisis.
9. A coalition of community leaders and behavioral health providers issued recommendations to Seattle and King County in an October 13, 2021, letter that included recommendations to "expand places for people in crisis to receive immediate support" and "expand crisis response and post-crisis follow up services."
10. Multiple behavioral health system needs assessments have identified the addition of crisis facilities as top priorities to improve community-based crisis services in King County. Such assessments include the 2016 recommendations of the Community Alternatives to Boarding Task Force called for by Motion 14225, a Washington state Office of Financial Management behavioral health capital funding prioritization and feasibility study in 2018, and a Washington state Health Care Authority crisis triage and stabilization capacity and gaps report in 2019.
11. King County is losing mental health residential treatment capacity that is essential for persons who need more intensive supports to live safely in the community due to rising operating costs and aging facilities that need repair or replacement. As of October 2023, King County had a total of 240 mental health residential beds for the entire county, down 115 beds, or nearly one third, from the capacity in 2018 of 355 beds.
12. As of October 2023, King County residents who need mental health residential services must wait an average of 25 days before they are able to be placed in a residential facility.
13. The 2023 King County nonprofit wage and benefits survey found that employee compensation is a key factor contributing to nonprofit employees leaving the sector, even though they are satisfied with their jobs overall.
14. A 2023 King County survey of member organizations of the King County Integrated Care

Network found that found that there were approximately 600 staff vacancies across the agencies that responded to the survey, a 16-percent total vacancy rate at King County community behavioral health agencies, and there is still a need to hire more behavioral health workers to support the growing behavioral health care needs in the community.

15. In September 2022, alongside a broad coalition of elected officials, behavioral health workers and providers, emergency responders, and businesses, the executive announced a plan to address King County's behavioral health crisis and improve the availability and sustainability of behavioral health care in King County through a nine-year property tax levy known as the crisis care centers levy.

16. On February 9, 2023, King County adopted Ordinance 19572 to provide for the submission of the crisis care centers levy to the voters of King County.

17. King County voters considered the levy as Proposition No. 1 as part of the April 25, 2023, special election, and fifty-seven percent of voters approved it.

18. The passage of Proposition No. 1 authorized the crisis care centers levy that will raise proceeds from 2024 to 2032 to create a regional network of five crisis care centers, restore and expand residential treatment capacity, and increase the sustainability and representativeness of the behavioral health workforce in King County.

19. Ordinance 19572, Section 7.A., requires the executive to develop and transmit for council review and adoption by ordinance an implementation plan for the crisis care centers levy. The implementation plan, once effective, will govern the expenditure of the levy's proceeds until the crisis care centers levy expires in 2032. The required implementation plan is Attachment A to this ordinance.

20. Ordinance 19572, Section 7.C., enumerates specific requirements for the implementation plan. The crisis care centers levy implementation plan 2024-2032, Attachment A to this

ordinance, responds to the requirements set out by Ordinance 19572, Section 7.C., by: describing the purposes of the levy; describing the strategies and allowable activities to achieve the levy's purposes; describing the financial plan to direct the use of levy proceeds; describing how the executive will seek and incorporate federal, state, philanthropic and other resources when available; describing the executive's assumptions about the role of Medicaid funding in the financial plan; describing the process by which King County and partner cities will collaborate to support siting of new capital facilities that use proceeds from the levy for such facilities' construction or acquisition; describing a summary and key findings of the community engagement process; describing the process to make adjustments to the financial plan; describing the advisory body for the levy; describing measurable results and a coordinated performance monitoring and reporting framework; describing how the levy's required online annual report will be provided to councilmembers, the regional policy committee or its successor, and the public; and describing how crisis response zones described in the levy will promote geographic distribution of crisis care centers.

BE IT ORDAINED BY THE COUNCIL OF KING COUNTY:

SECTION 1. The crisis care centers levy implementation plan 2024-2032,

Attachment A to this ordinance, is hereby adopted to govern the expenditure of crisis care centers levy proceeds as authorized under Ordinance 19572.