SUMMARY and FISCAL NOTE*

Department:	Dept. Contact:	CBO Contact:
LEG	Ann Gorman/507-4126	

1. BILL SUMMARY

Legislation Title: A RESOLUTION supporting King County's Crisis Care Centers Levy and urging Seattle voters to vote "Yes" on the passage of this levy on the April 25, 2023, special election ballot.

Summary and Background of the Legislation: On January 31, 2023, the King County Council passed Ordinance 2022-0399, concerning funding for mental health and substance use disorder services and providing for the submission of a property tax levy (the "Crisis Care Centers Levy") in excess of the levy limitation contained in chapter 84.55 RCW, which would authorize an additional nine-year levy for collection beginning in 2024 at \$0.145 per \$1,000 of assessed valuation. Through 2032, funds collected via the levy would total approximately \$1.25 billion.

Levy funds would support the creation of five Crisis Care Centers where King County residents can obtain walk-in urgent care for behavioral health concerns and provide increased funding for mental health residential treatment. They will also make various investments to support the County's current and future behavioral health workforce. If the levy is passed by voters, the anticipated cost to the owner of a median-value home would be approximately \$121 in 2024. King County would develop a detailed spending plan for levy funds by the end of 2023.

2. CAPITAL IMPROVEMENT PROGRAM

Does this legislation create, fund, or amend a CIP Project?

_ Yes <u>X</u> No

Yes _X_ No

If yes, please fill out the table below and attach a new (if creating a project) or marked-up (if amending) CIP Page to the Council Bill. Please include the spending plan as part of the attached CIP Page. If no, please delete the table.

Project Name:	Project I.D.:	Project Location:	Start Date:	Total Project Cost Through 2028:

3. SUMMARY OF FINANCIAL IMPLICATIONS

Does this legislation amend the Adopted Budget?

If there are no changes to appropriations, revenues, or positions, please delete the table below.

Appropriation change (\$):	General Fund \$		Other \$	
	2023	2024	2023	2024

^{*} Note that the Summary and Fiscal Note describes the version of the bill or resolution as introduced; final legislation including amendments may not be fully described.

Estimated revenue change (\$):	Revenue to General Fund		Revenue to Other Funds	
	2023	2024	2023	2024
Positions affected:	No. of Positions		Total FTE Change	
	2023	2024	2023	2024

Does the legislation have other financial impacts to The City of Seattle that are not reflected in the above, including direct or indirect, short-term or long-term costs? No.

Are there financial costs or other impacts of *not* implementing the legislation? No.

If there are no changes to appropriations, revenues, or positions, please delete sections 3.a., 3.b., and 3.c. and answer the questions in Section 4.

4. OTHER IMPLICATIONS

- a. Does this legislation affect any departments besides the originating department? No.
- **b.** Is a public hearing required for this legislation?
- c. Is publication of notice with *The Daily Journal of Commerce* and/or *The Seattle Times* required for this legislation?
 No.
- **d.** Does this legislation affect a piece of property? No.
- e. Please describe any perceived implication for the principles of the Race and Social Justice Initiative. Does this legislation impact vulnerable or historically disadvantaged communities? What is the Language Access plan for any communications to the public?

The King County Crisis Care Centers levy, described above, seeks to build, restore and maintain investments that help people move from mental and behavioral health crisis to recovery. The insufficiency of current resources in this area disproportionately impacts those without private insurance, who are more likely to be members of vulnerable or historically disadvantaged communities.

Dan Malone, the executive director of the Downtown Emergency Service Center (DESC), recently told a reporter that the current need for on-scene crisis response exceeds the capacity of DESC's Mobile Crisis Team (MCT). He further commented that when the MCT can't respond, the person experiencing a crisis often ends up either in the emergency room or booked into a jail for a minor crime, although what is needed is a safe place to meet basic

needs and address the cause of the crisis. The result is the effective criminalization of poverty and mental and behavioral health crisis issues. Since Black and brown people are overpoliced thus overrepresented in jail populations, the Crisis Care Centers levy's future funding of such safe places will significantly benefit them and their families.

f. Climate Change Implications

1. Emissions: Is this legislation likely to increase or decrease carbon emissions in a material way?

No.

- 2. Resiliency: Will the action(s) proposed by this legislation increase or decrease Seattle's resiliency (or ability to adapt) to climate change in a material way? If so, explain. If it is likely to decrease resiliency in a material way, describe what will or could be done to mitigate the effects.

 No.
- g. If this legislation includes a new initiative or a major programmatic expansion: What are the specific long-term and measurable goal(s) of the program? How will this legislation help achieve the program's desired goal(s)?

Summary Attachments (if any):

Summary Attachment 1 - King County Crisis Care Centers Levy - Crisis Care Centers Summary Attachment 2 - King County Crisis Care Centers Levy - Residential Treatment

Facilities

Summary Attachment 3 - King County Crisis Care Centers Levy – Supporting and Growing our Behavioral Health Workforce



Crisis Care Centers Levy



Creating a regional network of crisis care centers, preserving and increasing residential treatment beds, and investing in a robust behavioral health workforce.

Places to Go in a Crisis— Five New Crisis Care Centers Across the Region



What is a Crisis Care Center?

A place for people to go in a behavioral health crisis for immediate treatment and care. A regional network of five Crisis Care Centers will provide a nearby place that isn't the emergency room or jail where people in crisis can get same-day access to multiple types of behavioral health crisis stabilization services.

Right now, there is not a single walk-in behavioral health urgent care facility in King County. When people in crisis have no place to go for care, too many end up in jails or emergency rooms. Instead, a Crisis Care Center will provide a safe place in community specifically designed, equipped and staffed for behavioral health urgent care. These Centers will provide immediate mental health and substance use treatment and promote long-term recovery. First responders, mobile crisis teams, families, and people in crisis themselves need places that provide same-day, no-wrong-door crisis care.

With the right care, people can and do get better. The five Crisis Care Centers will:



Open 24 hours, seven days a week as a behavioral health urgent care clinic



Offer a multidisciplinary staff team, including peers with lived experience



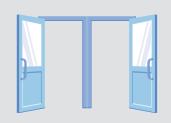
Deliver on-site evaluation for involuntary treatment when necessary



Screen and triage treatment needs for people seeking care for themselves and for those referred by first responders, crisis response teams, and family members



Accept any person, with or without insurance



Provide a crisis stabilization bed for short-term behavioral health treatment for up to 14 days

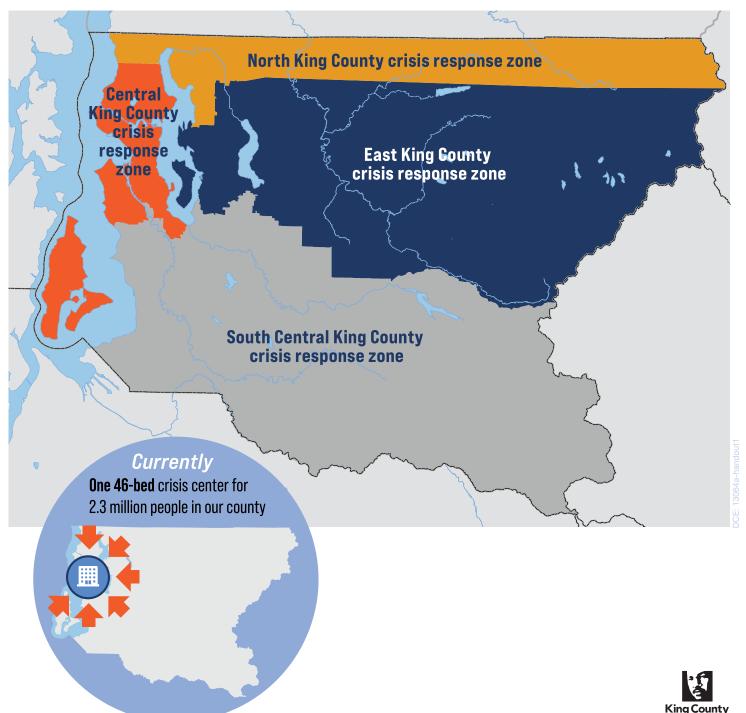


The absence of walk-in, regionally distributed crisis care units leads to higher costs, unnecessary travel, long wait times, and delays to time-sensitive care.

Without behavioral health urgent care, too often people must choose between no care or placement in jails or emergency rooms

Geographic distribution of Crisis Care Centers

The five Crisis Care Centers will be distributed geographically across the county so that first responders, crisis response teams, families and individuals have a place nearby to turn to in a crisis. **One center will serve youth younger than age 19, and at least one will be established in each of these four subregional zones:**





Crisis Care Centers Levy



Creating a regional network of crisis care centers, preserving and increasing residential treatment beds, and investing in a robust behavioral health workforce.

Places to Recover— Residential Treatment Facilities

King County has lost one-third of residential treatment beds at a time our region needs more behavioral health care facilities.



Cascade Hall press conference

Residential treatment facilities provide:

- 24/7 treatment in a safe, supportive environment where people can receive intensive services to stabilize and recover from behavioral health conditions
- Access to treatment and recovery in a community-based setting, avoiding or shortening more costly hospital stays
- Long-term treatment as opposed to jail or institutionalization

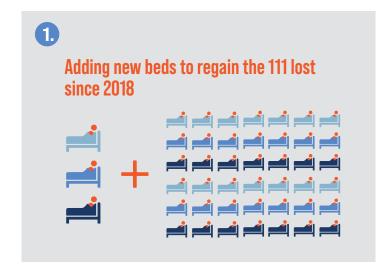
Residential treatment supports clients in their recovery journey by helping them identify and overcome barriers to basic living skills and developing and practicing those skills. Geared toward longer stays, residential treatment can be the best and most cost-effective treatment. Clients have meals provided, receive reminders for activities of daily living such as reminders to shower, do laundry, eat meals, take any prescribed medication, clean their room, schedule and attend doctor's appointments, attend group meetings on-site, and participate in outings.



Loss of capacity means a loss of care

King County is rapidly losing residential treatment capacity due to rising operating costs and aging facilities that need repair or replacement. There were not enough residential treatment beds in the first place.

The Crisis Care Centers Levy will provide funding to restore mental health residential treatment to 2018 levels. This funding will reinforce existing, licensed facilities that may otherwise close, restore facilities that recently closed where possible, and create new ones by:



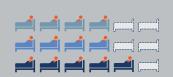


Current residential treatment capacity

People who need a behavioral health supportive housing unit or psychiatric residential treatment bed find that providers **reach capacity** by mid-month.



In 2018, 355 beds providing community-based residential care for people with mental health residential needs existed in King County.
Today, only 244 of these beds are available.



Loss of 1 in 3 residential treatment beds in since 2018.



As of July 2022, King County residents who need mental health residential services must wait an average of **44 days** before they are able to be placed in a residential facility.







Crisis Care Centers Levy



Connecting the behavioral health crisis system to be more effective, more accessible, and more equitable so every person in King County can thrive.

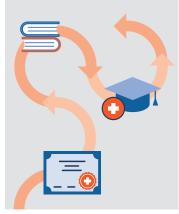
It Takes People to Treat People— Supporting and Growing our Behavioral Health Workforce King County has an opportunity to create a robust, representative, and well-supported workforce of the future. Together, we can reset the benchmark and have a sustainable behavioral health system that meets the needs of King County residents.

Too many behavioral health workers cannot afford to live in the communities they serve. Too few people are joining this profession, and too many people are leaving it.

The Crisis Care Centers Levy will support the behavioral healthcare workforce through investments like these:

Keeping our workers:

 Promote career pathways to access higher education, credentialing, training and wrap-around supports



Increasing worker wages:

- Provide equitable and competitive compensation for workers at Crisis Care Centers
- Invest in retaining more, and more representative, people in community-based behavioral healthcare



Recruiting new workers:

 Invest in apprenticeship programs with funding for mentors, books, and tuition



Reducing costs for workers:

 Reduce costs of living, such as insurance, childcare, caregiving, or fees or tuition associated with training and certification, where possible



Currently

The 2021 King County nonprofit wage and benefits survey showed that many nonprofit employees delivering critical services earn wages at levels that make it difficult to sustain a career doing community-based work in this region.

Currently

A 2021 King County survey of member organizations of the King County Integrated Care Network found that job vacancies at these community behavioral health agencies were at least double what they were in 2019.



Currently

Providers cited professionals' ability to earn more in medical systems or private practice, and the high cost of living in the King County region, as the top reasons their workers were leaving community behavioral health care, in the same

member survev. "I help my clients during the day, and then in the evening I'm looking for a place to live and using the same services I recommend to my clients."

> - Behavioral health peer, who is homeless despite having a full-time job, at a roundtable discussion with Executive Constantine



