



Behavioral health & comprehensive opioid response

2019

Invest in Washington's behavioral health system.

- 1 Increase funding for the state's behavioral health & opioid response systems.
- 2 Reinvest in the mental health field response grant program.
- 3 Provide additional tools to encourage investments in supportive housing.

1 The behavioral health and opioid epidemics are devastating families and overwhelming law enforcement and social services. In 2016 alone, there were 694 deaths and 1,828 hospitalizations due to opioid overdoses in Washington's communities. Nearly a quarter (24.3%) of adults with mental illness in Washington State reported that they were not able to receive the treatment they needed (**HB 1394/SB 5431** and **HB 1331/SB 5380**).

2 The mental health field response grant program provides funds for local police departments to hire mental health professionals. These professionals partner with officers in the field to help connect individuals with services rather than defaulting into the criminal justice system. Since its inception, the co-response grant program has been widely praised by law enforcement, mental health advocates, and lawmakers at the state and local level.

Washington ranks 28th nationally in access to mental health professionals.

- 3 Washington's cities are facing an acute lack of supportive housing for individuals with long-term behavioral health challenges and opioid addiction. To increase the ability of cities to provide supportive housing, AWC supports:
- Strengthening city decision-making role in allocating resources provided to counties to address housing and homelessness in cities
 - Providing greater authority and reimbursements to exempt affordable housing projects from development fees
 - Expanding and refining the Multifamily Tax Exemption Program (**SB 5366**)
 - Extending the authority to use REET for affordable and supportive housing (**HB 1219/SB 5195**)

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Additional information

Trueblood settlement

After the 2015 trial known as Trueblood, the federal court ordered the Washington State Department of Social and Health Services (DSHS) to move individuals facing criminal charges out of jail and into treatment facilities within 7-14 days when they are in need of competency evaluation and restoration services. Demand for these services continues to rise, and people with serious mental illness worsen as they wait in jail for their competency evaluation. The intent of the settlement agreement is to provide for systemic reforms of the competency evaluation and restoration services system. Additionally, the settlement, focuses on arrest diversion and community-based supports for people with serious mental illness.

Cities face significant challenges in trying to address individuals for whom long-term care services simply do not exist. As a result, these individuals end up on city streets and often cycle in and out of contact with local law enforcement and the criminal justice system. Although the settlement agreement includes a phased-in approach in several counties, cities support including all parts of the state in this new approach.

Opioid response

Cities greatly appreciate the steps the Legislature took in the 2018 session to pass the secure drug-take back law. This historic legislation will reduce the availability and abuse of unused prescriptions opioids as patients will now have access to safely dispose of unneeded medications. It is now time for the Legislature to take bold action to reduce the number of prescription opioids in our cities.

Cities support proposals that:

- Allow pharmacists to partially fill prescriptions upon request of the prescriber or patient
- Require practitioners to discuss alternatives when prescribing opioid-based drugs
- Required practitioners to register for the Prescription Monitoring Program and to take continuing education courses on best practices
- Connect certified peer counselors with individuals who have had a non-fatal overdose
- Mandate additional safety measures such as warning statements, risks, and safe disposal information

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