



Chewelah City Hall  
301 E. Clay Street  
P.O. Box 258  
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[www.cityofchewelah.org](http://www.cityofchewelah.org)

## Briefing Sheet

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To: Chewelah City Council  
From: Aaron Qualls, Chewelah Contract Planner, [aaron.qualls@scjalliance.com](mailto:aaron.qualls@scjalliance.com) / 509.835.3770, ext. 325  
Report: Dec 28, 2023  
Report: Jan 3, 2024  
Item: Council Workshop - DRAFT Code Updates for Community-based Behavioral Health Facilities

### Background:

On February 1, 2023, the City Council declared an emergency and adopted a City-wide moratorium for six (6) months on the acceptance and issuance of any licenses, permits, or approvals of applications for Intensive Behavioral Health Treatment Facilities, Specialized Dementia Care facilities, or other Behavioral Health Facilities within the City. The moratorium was subsequently extended and will end on Feb. 1, 2024. The purpose was so that city staff and Council members would have the time necessary to determine the appropriate zones, standards, and procedures by which behavioral health facilities may be allowed within the City of Chewelah and to adopt code amendments thereto. The amendments drafted affect three areas of Title 18 of Chewelah Municipal Code:

- §18.04.070 Definitions
- §18.08.020 use Classifications
- §18.12.160 Community-based Behavioral Health Facilities (new section)

The 60-day review period (required under RCW 36.70A.106) was received by the WA Department of Commerce on 11/29/2023 and will end on 1/28/2024. Staff also requested technical assistance which Commerce has provided. A SEPA Checklist is currently being drafted and city staff hopes to schedule a public hearing before the City Council following this workshop with any further changes incorporated.

### Summary of Proposed Amendments:

#### Definitions within both §18.04.040 and new §18.12.160 - Proposed Amendments/Additions

- Adding the following:
  - “Assisted Living Facilities”
  - “Child Day Cares” (adding home and mini-day cares)
  - “Group Homes for Children”
  - “Essential Public Facility”
  - “Community-based Behavioral Health Facility”, including the following facility types:
    - Crisis Stabilization Facilities
    - Dementia Care Facilities
    - Enhanced Services Facilities
    - Evaluation and Treatment Facilities
    - Intensive Behavioral Health Treatment Facilities

- Residential Care Facilities
  - Secure Withdrawal Management and Stabilization Facilities
- Amending the definition of “Adult Family Home” and removing the definition of “Family”

#### §18.08.020 Permitted Uses - Proposed Amendments:

- Allowance of Community-based Behavioral Health Facilities in the **Retail Business (R-B), Commercial Industrial (C-I) and Community Facility (C-F)** zones by conditional use permit (additional standards within new draft §18.12.160 below apply)
- Allowances for Assisted Living Facilities and Group Homes for Children
- Allowances for all types of child day cares (home, mini and centers)
- Referencing “Essential Public Facilities” siting process
- Other minor clarifications/amendments and use table organization

#### §18.12.160 Community-based Behavioral Health Facilities - Proposed New Section

- New and Existing Facilities:
  - Compliance with all licensing requirements
  - Requirement of a Management Plan
- New Facilities require a Type II Conditional Use Permit (CUP) and additional standards and findings apply:
  - Operations Plan required
  - 24-hour on-site supervisor required
  - Must be sufficiently served by all public services, including: utilities, access, transportation, education, police and fire, and social and health services
  - Must not be located within 880 ft of any pre-existing Behavioral Health Facility, public park, playground, recreation/community center, library, childcare center (all types), school, or game arcade
  - Must be shown to be compatible with surrounding properties (size, height, location, setback, arrangements buildings, and signage)
  - All applicable local, state, and federal licensing requirements & certifications required prior to certificate of occupancy

#### **Attachments:**

1. Commerce Comments and Staff Revisions to Draft §18.12.160
2. §18.12.160 Community-based Behavioral Health Facilities – Draft Clean Version
3. §18.08.020 Use Classifications - Proposed Amendments
4. §18.04.040 Definitions – Proposed Amendments

**Attachment 1**  
**Commerce Comments and Staff Revisions to Draft §18.12.160**

Washington State Department of Commerce, Growth Management Services  
 TA staff comments on Draft 18.12.160(C) Amendment – City of Chewelah  
 12/18/2023  
 12/27/23 – CITY RESPONSES AND REVISIONS

<i>RCW citations</i>	One or more RCW citations within the draft code are incorrect. We strongly advise checking RCW references to ensure they are accurate before finalizing the material for publication. Example from draft code: (RCW 70.97.010(5))
<i>Ongoing conditions</i>	We strongly advise against placing project-permitting conditions that apply to a facility’s operational activities as we consider it to be beyond the scope of permit issuance and potentially unenforceable through development permitting.
<i>Definitions/terms</i>	Recommendation: A definition for Outpatient Treatment/other treatment types might improve clarity and/or may offer a place to outline criteria.
<i>Management plans</i>	If including a requirement for management plans then we recommend closely following the example provided in Commerce guidance—see <a href="#">BHF Model Ordinance (pages 32-33)</a> . Commerce guidance contains an example ordinance which requires a written management plan. The example plan would be applicable to any “Enhanced Services Facility (ESF)” as defined by RCW 70.97.010. An ESF is listed in the guidance as a subset of community-based behavioral health facilities. The example ordinance it offers allows for permitting with an “approach specific to these types of facilities” as distinct from “standards and processes that apply to similar uses.” If utilizing language from the ESF section of the model guidance, consider limiting that use to ESFs then define ESFs within definitions and where applicable in the code to reduce risk of generalizing a specific term. Alternatively, see our comments regarding Operations Plans for a type of document that the guidance uses in a generalized context.
<i>Operations Plans</i>	Commerce guidance recommends including an Operations Plan <b>for informational purposes only and as part of the permitting process</b> —see <a href="#">BHF Model Ordinance (page 13)</a> . Jurisdictions do not have authority to approve or reject the plan contents and the recommendation strictly pertains to the application submittal. Consider defining an Operations Plan and/or terms used to describe contents of such plans or any similar requirements within the City’s draft/final ordinance. The BHF Model Ordinance provides the following description for an Operations Plan: <ul style="list-style-type: none"> <li>• Facility point of contact (email, phone)*</li> <li>• Process for communicating with neighboring residents and businesses</li> <li>• Policies and procedures to address neighborhood concerns</li> <li>• Numbers of residents and expected length of stay</li> <li>• Facility rules and regulations</li> <li>• Staffing plans (number and shifts)</li> <li>• Onsite parking plan and anticipated response calls</li> <li>• Safety and discharge plan**</li> </ul> <p>*We recommend seeking a facility (or management agency) email and 24-hour (staffed) emergency phone number instead of a primary point of contact. Staff shifts/scheduling practices of these or other business types vary according to organizational need and employee turnover is common reality. A call line is a more reasonable requirement.</p> <p>** If requiring discharge plans in the code then clarification may be useful. We suggest defining “Resident discharge plan” (see 18.12.160(C)-2e) or rewording as “Resident safety and discharge plan” to match the model ordinance cited above. Resident discharge plans are not necessarily standardized but personalized. As written, it is unclear if the draft code refers to a program’s discharge goals, some form of logic model, a sample patient discharge plan, or something else. Consider providing applicants with sample plans and/or samples for items such as discharge plans.</p>

**Commented [AQ1]:** Draft revised! Advise revising model ordinance.

**Commented [AQ2]:** Following the Burien example provided in the model ordinance, Management Plans are a licensing condition under BMC Chapter 19.17 Miscellaneous Use, Development and Performance Standards.

**Commented [AQ3]:** Added per model definition

**Commented [AQ4]:** As mentioned, the Buiren example provided (BMC §19.17.310) is a licensing requirement that is reflected in the below revised draft.

**Commented [AQ5]:** Thank you!

City of Chewelah  
18.12.160(C) (Draft)

2. Community-based Behavioral Health Facilities...Existing facilities must provide a management plan within three months of the effective date of this ordinance to the Chewelah City Clerk's Office...

3. Failure to provide quarterly reports or a written management plans pursuant to this section or as specified by an approved conditional use permit may be grounds for local permit revocation. Additionally, the revocation or expiration of any required state or federal licensing or certification at any time may be grounds for local permit revocation.

The City provides a permit for development, but a permit to operate relates to state requirements and licensures. Further, "permit revocation" is unnecessarily restrictive and may not be enforceable after the facility's development phase is complete and structures occupied. Once a facility is permitted then they have a reasonable right to expect continued licensing compliance will result in unhindered facility use. We consider section "quarterly reports" requirement 18.12.160(C) as beyond the scope of project permitting and recommend removal:

- Review of such reports may require special authorization or credentialing which a City Clerk or other staff may not possess to assess standards, such as staff-to-resident ratios. If the reviewing staff/City does not possess health/facility licensure authority then this requirement is unenforceable and unsuitable within the development permitting standards.
- Behavioral health services are licensed and regulated at provider- and facility-levels by state agencies ([BHF Model Ordinance, pages 11-12](#)).
- State licensure reviews occur annually and would remain unchanged for 3 quarters.

It may be allowable to define a provision that the facility must maintain their license with the state of Washington and/or proper business licensure. However we recommend limiting any requirements for proof of licensure to the time of submittal as part of a complete application. Otherwise, closing down a facility (structure) for safety reasons the City would need to have it declared unfit for human habitation, per RCW 35.80.

C-2h

~~h. Procedures for maintaining accurate and complete records~~

State requirements address records maintenance for health services. We advise striking this provision.

18.12.160(E) (Draft)

2. The proposed location is or will be sufficiently served by public services which may be necessary for the support and operation of the facility. These may include, but shall not be limited to, availability of utilities, access, transportation systems, education, police and fire facilities, and social and health services.

We recommend accounting for these needs within a capital facilities plan rather than within the CUP process. The local capital facilities plan consists of a forecast of future needs as well as proposed locations and capacities of new or expansions to facilities and services.

3. The proposed facility shall not be located within ~~one thousand feet (1,000 ft)~~ of any pre-existing Community-based Behavioral Health Facility, public park, playground, recreation/community center, library, childcare center (including all types of child day cares), school, or game arcade. The method of measurement shall be from the closest property line to the closest property line.

We recommend using 880 feet, which the state has recognized as a reasonable "community protection zone" from services like parks and schools ([RCW 9.94A.030](#)). Also consider: If a developer would like to offer one or more of these services at the same site – as current definitions suggest is possible, would the City waive the spacing requirement? If so, list related assumptions within the section.

**Commented [AQ6]:** Per the above and as recommended, a licensing requirement has been drafted below. Enforceability through the police power of the city is governed by CMC Chapter 1.24 - General Penalty.

**Commented [AQ7]:** Service impacts and concurrency are a typical required finding of fact through a CUP process, particularly for smaller jurisdictions where a single large development may have a disproportionate service impact as compared to larger jurisdictions. The city would prefer this remain. Below are some references that may seem to support this, but please let us know if we are off target.

"Local governments have flexibility regarding how to apply concurrency within their plans, regulations, and permit systems."  
<https://mrsc.org/explore-topics/planning/general-planning-and-growth-management/concurrency>

Each planning jurisdiction should produce a regulation or series of regulations which govern the operation of that jurisdiction's concurrency management system. This regulatory scheme will set forth the **procedures and processes** to be used to determine whether relevant public facilities have adequate capacity to **accommodate a proposed development**. In addition, the scheme should **identify the responses to be taken when it is determined that capacity is not adequate to accommodate a proposal**. Relevant public facilities for these purposes are those to which concurrency applies under the comprehensive plan. Adequate capacity refers to the maintenance of concurrency.  
WAC 365-196-840 (5)(a)

**Commented [AQ8]:** Thank you! The 1,000 feet was derived from the model ordinance project's "Key Observations" but are glad to provide a standard that is better recognized. The city will consider where spacing requirements may be waived.

**DRAFT 18.12.160 Community-based Behavioral Health Facilities**

**City of Chewelah**

**11/29/2023**

- A. Purpose and Intent. These regulations are intended to protect public health and safety by requiring safe operations of **Behavioral Health Facilities** for both the residents and the broader community. The purpose of this section is to allow and establish a review process for the location, siting, and operation of community-based behavioral health facilities that:
1. Increase access to behavioral health services and community amenities for individuals living with behavioral health conditions or disabilities.
  2. Allow such facilities to be sited in areas with appropriate conditions for the services being provided.
  3. Apply regulatory land use frameworks in the same manner for such facilities as for other facilities with similar scale and land use impacts.
  4. Apply permitting and entitlement processes appropriate to the scale of the facility and location that is efficient, predictable, and informed.
  5. Ensure that the health and safety of both residents and the broader community is maintained during facility operations.
- B. Facility Types and Definitions.

“Community-based Behavioral Health Facility” means a residential facility licensed and regulated by the State of Washington, staffed to provide on-site care and that is not a hospital or a group home (adult family home). For the purposes of this title, the following facilities shall be considered a Community-based Behavioral Health Facilities:

- Crisis Stabilization Facilities
- Dementia Care Facilities
- Enhanced Services Facilities
- Evaluation and Treatment Facilities
- Intensive Behavioral Health Treatment Facilities
- Residential Care Facilities
- Secure Withdrawal Management and Stabilization Facilities

“Crisis Stabilization Facility” means a short-term facility designed to assess, diagnose, and treat persons experiencing an acute crisis without the use of hospitalization that may be co-located with Evaluation and Treatment and Outpatient Treatment facilities. Peace officers may drop-off individuals if the facility chooses to provide involuntary services. Individuals are assessed to determine the need for civil commitment or other services. Facilities can offer short-term care for up to 24 hours and/or provide beds for overnight stays of approximately five days. (WAC 246-341-1140)

“Dementia Care Facility” means a facility that provides specialized long-term care services for persons with dementia. All facilities have delayed egress, an indoor wander path, and a safe, enclosed outdoor area that can be accessed independently. Stays are generally long-term, with residents aging in place and only moving if their care needs can no longer be safely met. (WAC 388-110-220 (2) (3))

“Enhanced Services Facility” ~~means a facility that provides support and services to persons for whom acute inpatient treatment is not medically necessary. means a residential long-term care facility that provides support and services to persons for whom acute inpatient treatment is not medically necessary. Mental health treatment is not provided on-site. The facility includes rooms for social activities and dining, bedrooms, bathrooms, a commercial kitchen, and offices.~~ (RCW 70.97.010(5)); ~~(WAC 388-107)~~

“Evaluation and Treatment Facility” means a short-term court-ordered treatment provided in a residential facility (can also be provided in a hospital setting). Includes 24-hour on-site care for the evaluation, stabilization, and/or treatment of residents for substance use, mental health, or co-occurring disorders. These facilities serve individuals for 5 or 14 day

Washington State Department of Commerce, Growth Management Services TA staff comments/responses – 12/27/2023

**Commented [AQ9]:** Advise updating Commerce model definitions document to reflect specific RCW reference.

NOTE: where both RCW and WAC is referenced, definitions have been revised to reflect the RCW definition only.

(short-term) and/or 90- and 180-day (long-term) civil commitments. They may also provide services to voluntary individuals. (WAC 246-341-1134)

“Intensive Behavioral Health Treatment Facility” means a community-based specialized residential treatment facility for individuals with behavioral health conditions, including individuals discharging from or being diverted from state and local hospitals, whose impairment or behaviors do not meet, or no longer meet, criteria for involuntary inpatient commitment under chapter 71.05 RCW, but whose care needs cannot be met in other community-based placement settings. means a residential facility that provides 24-hour supervision and specialized treatment for individuals with behavioral health conditions, including individuals discharging or being diverted from state and local hospitals, whose impairment or behaviors do not meet, or no longer meet, criteria for involuntary inpatient commitment, but whose care needs cannot be met in other community placement settings. Residents are placed there voluntarily and may include short-term or long-term stays. (RCW 71.24.025 (2933))- (WAC 246-341-1137)

**Commented [AQ10]:** Advise updating Commerce model ordinance to reflect current citation

“Outpatient Treatment” means behavioral health services provided through outpatient treatment. These agencies are sometimes licensed as a Behavioral Health Agency. (WAC 246-341)

“Residential Care Facility” means an establishment operated with twenty-four (24) hour supervision for the purpose of serving persons of any age under the jurisdiction of the criminal justice system or nine (9) or more persons of any age who, by reason of their circumstances or conditions, require a transitional nonmedical treatment program for rehabilitation and social readjustment; for example, work release programs, alcoholic treatment programs, drug rehabilitation centers, mental health programs, etc. This definition does not include prisons or conventional correctional institutions involving twenty-four (24) hour locked incarceration with little or no freedom of movement.

“Secure Withdrawal Management and Stabilization facility” means a facility operated by either a public or private agency or by the program of an agency which provides care to voluntary individuals and individuals involuntarily detained and committed under this chapter for whom there is a likelihood of serious harm or who are gravely disabled due to the presence of a substance use disorder. means a secure facility serving individuals for whom there is a likelihood of serious harm or who are gravely disabled due to the presence of a substance use disorder. Individuals are civilly committed to receive treatment in these facilities. They may also treat voluntary individuals. The average length of stay is 2-3 weeks. (RCW 71.05.020 (5452))

**Commented [AQ11]:** Advise updating model ordinance to reflect current definition and citation.

### C. ~~Licensing Requirements.~~

**Commented [AQ12]:** Modeled after Burien Code, per above.

1. All Community-based Behavioral Health Facilities are required to demonstrate compliance with all licensing requirements pursuant to Chapter 70.97 RCW, or as amended by the State Legislature.
2. A written management plan shall be provided by all Enhanced Services Facilities, Evaluation and Treatment Facilities, Intensive Behavioral Health Facilities, Residential Care Facilities, and Secure Withdrawal Management and Stabilization facilities for the City Administrator’s (or their designee’s) review and approval. At a minimum, a management plan shall address the following components:
  - a. Identify potential impact(s) on nearby residential uses and proposed methods to mitigate those impacts;
  - b. Identify the project management or agency responsible for the support staff and who will be available to resolve concerns pertaining to the facility. The plan shall specify procedures for updating any changes in contact information;
  - c. Identify staffing, supervision and security arrangements appropriate to the facility. A 24-hour on-site supervisor is required.
  - d. Identify a communications plan in the event that information to the surrounding neighborhood would be needed throughout the time the facility is in operation.

### C. ~~Operations plan required. Management plan and reporting required.~~

1. Community-based Behavioral Health Facilities must provide, in writing, quarterly reports to the Chewelah City Clerk’s Office with the following minimum components:

- ~~a. Status of all applicable local, state, and federal licensing and certifications.~~
- ~~b. Current number of residents and, as applicable, number of short term (30 days or less) residents since the last reporting cycle.~~
- ~~c. Current number of facility staff, including roles and responsibilities.~~

~~1. Community-based Behavioral Health Facilities must provide an Operations Plan a written management plan as a submission requirement for the permitting of new facilities or for redevelopment of existing facilities, including expansion. Existing facilities must provide a management plan within three months of the effective date of this ordinance to the Chewelah City Clerk's Office. Management Operations plans shall contain the following minimum components and shall be re-submitted to the city annually with any and all plan changes noted:~~

- ~~a. Facility point of contact (a facility email and 24-hour phone line)~~
- ~~b. a. Process for communicating with neighboring residents and businesses~~
- ~~c. a. Policies and procedures to address neighborhood concerns~~
- ~~d. a. Numbers of residents and expected length of stay~~
- ~~e. a. Facility rules and regulations~~
- ~~f. a. Staffing plans (number and shifts)~~
- ~~g. a. Onsite parking plan and anticipated response calls~~
- ~~h. Safety and discharge plan~~

- ~~a. Responsible management entity or agency and the primary point of contact for facility management available to address concerns pertaining to facility operation;~~
- ~~b. Staffing plan, including the anticipated number of staff and the number and length of shifts, and the roles and responsibilities of key staff;~~
- ~~c. Number of residents and anticipated lengths of stay;~~
- ~~d. Resident rules and regulations;~~
- ~~e. Resident Safety and discharge plan;~~
- ~~f. Supervision, security and emergency procedures;~~
- ~~g. Site/facility maintenance plan;~~
- ~~h. Procedures for maintaining accurate and complete records;~~
- ~~i. Communications plan in the event that information to the surrounding neighborhood would be needed, and~~
- ~~j. Procedures for any future changes to the Operations Plan Management Plan, including primary point of contact information.~~

~~2.1. Failure to provide quarterly reports or a written management plans pursuant to this section or as specified by an approved conditional use permit may be grounds for local permit revocation. Additionally, the revocation or expiration of any required state or federal licensing or certification at any time may be may be grounds for local permit revocation.~~

D. Conditional Use Permit Requirements.

1. Community-based Behavioral Health Facilities shall require a Type II Conditional Use Permit.

<sup>4</sup> See Commerce TA staff comments regarding Operations Plans and the BHF Model Ordinance (page 13)  
Washington State Department of Commerce, Growth Management Services TA staff comments/responses – 12/27/2023



2. In addition to the requirements for a complete application specified within CMC 18.20.030, Development Review Procedure, proposed Community-based Behavioral Health Facilities must provide a written Operations Plan ~~management plan~~ that shall contain the following minimum components pursuant to subsection C of this section:

- a. Facility point of contact (a facility email and 24-hour phone line)
- b. Process for communicating with neighboring residents and businesses
- c. Policies and procedures to address neighborhood concerns
- d. Numbers of residents and expected length of stay
- e. Facility rules and regulations
- f. Staffing plans (number and shifts)
- g. Onsite parking plan and anticipated response calls
- h. Safety and discharge plan

E. Approval criteria. In addition to all other standards required by this title and findings specified within CMC 18.16.020 (C)(2) for the approval of Type II Conditional Use Permits, the following additional criteria shall apply for Community-based Behavioral Health Facilities:

1. 24-hour on-site supervisor shall be required.
2. The proposed location is or will be sufficiently served by public services which may be necessary for the support and operation of the facility. These may include, but shall not be limited to, availability of utilities, access, transportation systems, education, police and fire facilities, and social and health services.
3. The proposed facility shall not be located within ~~one thousand feet (1,000 ft)~~ **eight hundred and eighty feet (880 ft)** of any pre-existing Community-based Behavioral Health Facility, public park, playground, recreation/community center, library, childcare center (including all types of child day cares), school, or game arcade. The method of measurement shall be from the closest property line to the closest property line.
4. The proposed facility and improvements shall be compatible with surrounding properties, including the size, height, location, setback, and arrangements of all proposed buildings, and signage.
5. All required local, state, and federal licensing requirements applicable to the proposed facility shall be required prior to issuance of a certificate of occupancy.

Attachment 2  
§18.12.160 Community-based Behavioral Health Facilities  
Draft Clean Version

**DRAFT CLEAN VERSION 18.12.160 Community-based Behavioral Health Facilities**

***City of Chewelah***

***12/28/2023***

- A. Purpose And Intent. These regulations are intended to protect public health and safety by requiring safe operations of Behavioral Health Facilities for both the residents and the broader community. The purpose of this section is to allow and establish a review process for the location, siting, and operation of community-based behavioral health facilities that:
1. Increase access to behavioral health services and community amenities for individuals living with behavioral health conditions or disabilities.
  2. Allow such facilities to be sited in areas with appropriate conditions for the services being provided.
  3. Apply regulatory land use frameworks in the same manner for such facilities as for other facilities with similar scale and land use impacts.
  4. Apply permitting and entitlement processes appropriate to the scale of the facility and location that is efficient, predictable, and informed.
  5. Ensure that the health and safety of both residents and the broader community is maintained during facility operations.

B. Facility Types and Definitions.

“Community-based Behavioral Health Facility” means a residential facility licensed and regulated by the State of Washington, staffed to provide on-site care and that is not a hospital or a group home (adult family home). For the purposes of this title, the following facilities shall be considered a Community-based Behavioral Health Facilities:

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- Dementia Care Facilities
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- Residential Care Facilities
- Secure Withdrawal Management and Stabilization Facilities

“Crisis Stabilization Facility” means a short-term facility designed to assess, diagnose, and treat persons experiencing an acute crisis without the use of hospitalization that may be co-located with Evaluation and Treatment and Outpatient Treatment facilities. Peace officers may drop-off individuals if the facility chooses to provide involuntary services. Individuals are assessed to determine the need for civil commitment or other services. Facilities can offer short-term care for up to 24 hours and/or provide beds for overnight stays of approximately five days. (WAC 246-341-1140)

“Dementia Care Facility” means a facility that provides specialized long-term care services for persons with dementia. All facilities have delayed egress, an indoor wander path, and a safe, enclosed outdoor area that can be accessed independently. Stays are generally long-term, with residents aging in place and only moving if their care needs can no longer be safely met. (WAC 388-110-220 (2) (3))

“Enhanced Services Facility” means a facility that provides support and services to persons for whom acute inpatient treatment is not medically necessary. (RCW 70.97.010(5));

“Evaluation and Treatment Facility” means a short-term court-ordered treatment provided in a residential facility (can also be provided in a hospital setting). Includes 24-hour on-site care for the evaluation, stabilization, and/or treatment of residents for substance use, mental health, or co-occurring disorders. These facilities serve individuals for 5 or 14 day (short-term) and/or 90- and 180-day (long-term) civil commitments. They may also provide services to voluntary individuals. (WAC 246-341-1134)

“Intensive Behavioral Health Treatment Facility” means a community-based specialized residential treatment facility for individuals with behavioral health conditions, including individuals discharging from or being diverted from state and local hospitals, whose impairment or behaviors do not meet, or no longer meet, criteria for involuntary inpatient commitment under chapter 71.05 RCW, but whose care needs cannot be met in other community-based placement settings. (RCW 71.24.025 (33));

“Outpatient Treatment” means behavioral health services provided through outpatient treatment. These agencies are sometimes licensed as a Behavioral Health Agency. (WAC 246-341)

“Residential Care Facility” means an establishment operated with twenty-four (24) hour supervision for the purpose of serving persons of any age under the jurisdiction of the criminal justice system or nine (9) or more persons of any age who, by reason of their circumstances or conditions, require a transitional nonmedical treatment program for rehabilitation and social readjustment; for example, work release programs, alcoholic treatment programs, drug rehabilitation centers, mental health programs, etc. This definition does not include prisons or conventional correctional institutions involving twenty-four (24) hour locked incarceration with little or no freedom of movement.

“Secure Withdrawal Management and Stabilization facility” means a facility operated by either a public or private agency or by the program of an agency which provides care to voluntary individuals and individuals involuntarily detained and committed under this chapter for whom there is a likelihood of serious harm or who are gravely disabled due to the presence of a substance use disorder. (RCW 71.05.020 (52))

C. Licensing Requirements.

1. All Community-based Behavioral Health Facilities are required to demonstrate compliance with all licensing requirements pursuant to Chapter 70.97 RCW, or as amended by the State Legislature.
2. A written management plan shall be provided by all Enhanced Services Facilities, Evaluation and Treatment Facilities, Intensive Behavioral Health Facilities, Residential Care Facilities, and Secure Withdrawal Management and Stabilization facilities for the City Administrator's (or their designee's) review and approval. At a minimum, a management plan shall address the following components:
  - a. Identify potential impact(s) on nearby residential uses and proposed methods to mitigate those impacts;
  - b. Identify the project management or agency responsible for the support staff and who will be available to resolve concerns pertaining to the facility. The plan shall specify procedures for updating any changes in contact information;
  - c. Identify staffing, supervision and security arrangements appropriate to the facility. A 24-hour on-site supervisor is required.
  - d. Identify a communications plan in the event that information to the surrounding neighborhood would be needed throughout the time the facility is in operation.

D. Conditional Use Permit Requirements.

1. Community-based Behavioral Health Facilities shall require a Type II Conditional Use Permit.
2. In addition to the requirements for a complete application specified within CMC 18.20.030, Development Review Procedure, proposed Community-based Behavioral Health Facilities must provide a written Operations Plan that shall contain the following minimum components:
  - a. Facility point of contact (a facility email and 24-hour phone line)
  - b. Process for communicating with neighboring residents and businesses
  - c. Policies and procedures to address neighborhood concerns
  - d. Numbers of residents and expected length of stay
  - e. Facility rules and regulations
  - f. Staffing plans (number and shifts)
  - g. Onsite parking plan and anticipated response calls
  - h. Safety and discharge plan

E. Approval criteria. In addition to all other standards required by this title and findings specified within CMC 18.16.020 (C)(2) for the approval of Type II Conditional Use Permits, the following additional criteria shall apply for Community-based Behavioral Health Facilities:

1. 24-hour on-site supervisor shall be required.
2. The proposed location is or will be sufficiently served by public services which may be necessary for the support and operation of the facility. These may include, but

shall not be limited to, availability of utilities, access, transportation systems, education, police and fire facilities, and social and health services.

3. The proposed facility shall not be located within eight hundred and eighty feet (880 ft) of any pre-existing Community-based Behavioral Health Facility, public park, playground, recreation/community center, library, childcare center (including all types of child daycares), school, or game arcade. The method of measurement shall be from the closest property line to the closest property line.
4. The proposed facility and improvements shall be compatible with surrounding properties, including the size, height, location, setback, and arrangements of all proposed buildings, and signage.
5. All required local, state, and federal licensing requirements applicable to the proposed facility shall be required prior to issuance of a certificate of occupancy.

Attachment 3  
§18.08.020 Use Classifications  
Proposed Amendments

**18.08.020 Use Classifications DRAFT Amendments**

**City of Chewelah**

**11/29/2023**

1. Table 18.08.020 provides examples of permitted, conditionally permitted, and expressly prohibited uses in the various base zones. Permitted uses are allowed as a matter of right. Because of considerations of traffic, noise, lighting, hazards, health and environmental issues, certain uses may be permitted subject to a conditional use permit. Expressly prohibited uses are those that are not clearly allowed in the zone. For purposes of this section the following apply:
  1. "P" indicates a permitted use.
  2. "C" indicates a use that requires a conditional use permit.
  3. "X" indicates expressly prohibited uses.
2. Uses allowed in the overlay zones are addressed in the applicable sections.

(Ord. No. 900, § 7, 8-3-2016)

**Table 18.08.020 Permitted, Conditionally Permitted and Prohibited Uses by Base Zone**

P = Permitted	C = Conditionally permitted	X = Expressly prohibited
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Uses may be affected if property is also an overlay district (see applicable overlay section)

	R-1	R-1B	R-3	R-B	C-I	APGC	C-F
<b>Residential</b>							
Single-family dwelling (including designated manufactured homes)	P	P	P	X	P(5)	P	X
Detached second unit	P	X	P	X	X	C	X
Duplex	P	P	P	P	P(5)	C	X
Multi-family, 3 units or more	X	X	P	P	P(5)	C	C
Renting rooms	P(4)	C	P(4)	P(4)	X	P(4)	X
Adult family home	P	P	P	C	X	P	P
<u>Group home for children</u>	<u>P</u>	<u>P</u>	<u>P</u>	<u>C</u>	<u>X</u>	<u>P</u>	<u>P</u>
<b>Commercial</b>							
Keeping of livestock	P	P	P	P	P	P	P
Temporary stands for sale of agricultural products	X	X	X	C	C	C	X
Housing for people with functional disabilities	P	P	C	X	X	X	C



	R-1	R-1B	R-3	R-B	C-I	APGC	C-F
Commercial nurseries and greenhouses	X	X	X	P	P	X	X
Domestic pets	P	P	P	P	P	P	P
Gardening or fruit raising (1)	P	P	P	P	X	P	P
Home occupation	P	P	P	P	X	P	P
Accessory uses and structures	P	P	P	P	P	P	P
Child day care _center	C	C	C	P	X	C	C
<u>Child day care - mini</u>	<u>C</u>	<u>C</u>	<u>C</u>	<u>P</u>	<u>X</u>	<u>C</u>	<u>X</u>
<u>Child day care - home</u>	<u>P</u>	<u>P</u>	<u>P</u>	<u>P</u>	<u>X</u>	<u>P</u>	<u>X</u>
Public garages	X	X	X	P	C	X	C
Telecommunication facilities	X	X	X	P	C	X	P
Temporary uses, including business, contractors, real estate offices	C	C	C	P	P	C	C
Manufactured home park	C(11)	C(11)	C	C	X	X	X
Medical and dental offices	X	X	X	P	P	X	C
<del>Clinic, hospital and</del> convalescent facilities	X	X	C	P	C	X	C
Museum, art galleries	C	C	P	C	P	P	P
Automotive showroom and supply store	X	X	X	P	P	X	X
Bakery, candy, ice cream and similar food manufacturing	X	X	X	P	P	X	X
Car or boat sales (new or used)	X	X	X	P	P	X	X
Motorcycle or motor scooter sales and repair	X	X	X	P	P	X	X
Antique stores	X	X	X	P	P	X	X
Catering services	X	X	X	P	P	X	X
Department stores, building supply outlets, floor covering and rug stores	X	X	X	P	P	X	X

	R-1	R-1B	R-3	R-B	C-I	APGC	C-F
Dressmaking and custom tailoring	X	X	X	P	P	X	X
Dry good stores	X	X	X	P	P	X	X
Financial institutions	X	X	X	P	P	X	X
Furniture stores including incidental repair and custom furniture upholstery	X	X	X	P	P	X	X
Restaurants, including drive ins	X	X	X	P	P	X	X
Private clubs, fraternities and lodges	X	X	X	P	P	X	X
Liquor stores, taverns, night clubs	X	X	X	P	P	X	X
Places of assembly, including auditorium, funeral home, art gallery, etc.	X	X	X	P	P	X	C
Tire shops, excluding tire recapping	X	X	X	P	P	X	X
Armories	X	X	X	C	P	X	X
Theaters, excluding drive-ins	X	X	X	P	P	X	X
Professional and general offices	X	X	X	P	P	X	X
Business and trade schools	X	X	X	P	P	X	X
Studios, commercial art, photography, film exchange, preprocessing	X	X	X	P	P	X	X
Printing establishments	X	X	X	P	P	X	X
Wholesale and mail order (not stocking goods on premises)	X	X	X	P	C	X	X
Service station	X	X	X	P(9)	C	X	X
Car wash	X	X	X	P(9)	C	X	X
Second hand store	X	X	X	P	P	X	X
Dry cleaning and laundry	X	X	X	P	P	X	X
Animal clinics	X	X	X	C	C	X	X
Hotel or motel	X	X	X	P	P	X	X

	R-1	R-1B	R-3	R-B	C-I	APGC	C-F
Mixed use (office, commercial and/or residential on a single parcel or in a single structure)	X	X	X	P	P	X	C
<b>Recreational</b>							
Amusement enterprises	X	X	X	P	P	X	X
Recreational vehicle park	X	X	X	C	C	P	X
Parks, playgrounds, golf course	P	P	P	X	X	P	P
Recreational camps	X	X	X	X	X	C	X
Golf course	C	C	C	X	X	P	C
<b>Industrial</b>							
On site hazardous waste storage and treatment (7)	X	X	X	P	P	X	X
Off site hazardous waste storage and treatment	X	X	X	X	C	X	X
Other similar retail wholesale and commercial businesses	X	X	X	P	P	X	X
Manufacture, assembly, compounding, packaging or treatment of products, similar to scientific, business or industrial machinery or instrumentation, food products, clothes or recreational equipment	X	X	X	X	P	C	X
Research, experimental or testing laboratories	X	X	X	X	P	X	X
Electrical Vehicle Charging Station - Level 1	P	P	P	P	P	P	P
Electrical Vehicle Charging Station - Level 2	P	P	P	P	P	P	P
Electrical Vehicle Charging Station - Level 3	X	X	X	P	P	C	P
Electrical Vehicle - Battery Exchange Station	X	X	X	P	P	C	C
Mini storage facilities	X	X	X	C	P	C	X
Warehouses	X	X	X	X	C(10)	X	X
Drop hammer or similar equipment	X	X	X	X	C(10)	X	X

	R-1	R-1B	R-3	R-B	C-I	APGC	C-F
<b>Community Facilities</b>							
Schools	C(3)	C(3)	C	C	X	C	C
<u>Assisted Living Facilities</u>	<u>C</u>	<u>C</u>	<u>C</u>	<u>C</u>	<u>X</u>	<u>C</u>	<u>C</u>
Churches and charitable institutions	C	C	C	C	X	C	C
Hospitals and nursing homes	C	X	C	C	X	C	C
<u>Community-based Behavioral Health Facilities</u>	<u>X</u>	<u>X</u>	<u>X</u>	<u>C(12)</u>	<u>C(12)</u>	<u>X</u>	<u>C(12)</u>
<del>Essential public service and utility</del> <u>Municipal buildings</u>	C	C	C	P	P	C	P
Public/private utilities	C	C	C	C	C	C	C
<u>Essential Public Facilities</u>	<u>(13)</u>	<u>(13)</u>	<u>(13)</u>	<u>(13)</u>	<u>(13)</u>	<u>(13)</u>	<u>(13)</u>

**Notes:**

1. Including sales of products, provided no retail stand, greenhouse, permanent sign or other commercial structure is erected.
2. RESERVED
3. Including specialty schools such as dance and music.
4. Not more than eight persons.
5. Occupied by a caretaker of the permitted use only.
6. RESERVED.
7. Accessory to a permitted activity generating hazardous waste, provided that the facility meets the state siting criteria adopted in RCW 70.105.210.
8. RESERVED
9. Drop hammers in areas adjoining residential zones will be permitted provided muffling equipment is installed to minimize the noise effect of such equipment if such noise would unduly interfere with the residential property.
10. Subject to a Planned Development permit.
11. Subject to site plan review and CMC 18.12.090.
12. Subject to additional standards provided in CMC 18.12.160 Community-based Behavioral Health Facilities.
- 11-13. Subject to an essential public facilities siting process pursuant to RCW 36.70A.200 and the Chewelah Comprehensive Plan.

Attachment 4  
§18.04.040 Definitions  
Proposed Amendments

**18.04.040 Definitions DRAFT Changes**  
**11/29/2023**

"Assisted living facility" means any home or other institution, however named, which is advertised, announced, or maintained for the express or implied purpose of providing housing, basic services, and assuming general responsibility for the safety and well-being of the residents, and may also provide domiciliary care. "Assisted living facility" shall not include facilities certified as group training homes pursuant to RCW 71A.22.040, nor any home, institution, or section thereof which is otherwise licensed and regulated under the provisions of state law providing specifically for the licensing and regulation of such home, institution or section thereof. Nor shall it include any independent senior housing, independent living units in continuing care retirement communities, or other similar living situations including those subsidized by the department of housing and urban development.

"Adult family home" means a dwelling in which person or persons provide personal care, special care, room and board to more than one (1) but not more than six (6) adults who are not related by blood or marriage to the person or persons providing the care. An adult family home may provide services to up to eight (8) adults upon approval under RCW 70.128.066. Those homes or facilities serving more than (8) persons or serving persons under the jurisdiction of the criminal justice system shall be considered a "Residential Care Facility" pursuant to CMC 18.12.160, Community-based Behavioral Health Facilities.

"Group Homes for Children" means a dwelling in which a person or persons provide personal care, special care, room and board to more than one (1) but not more than eight (8) juveniles who are not related by blood or marriage to the person or persons providing the care. Those homes or facilities serving more than eight (8) juveniles or serving juveniles under the jurisdiction of the criminal justice system shall be considered a "Residential Care Facility" pursuant to CMC 18.12.160, Community-based Behavioral Health Facilities.

"Child day care - center" means a facility providing for the care of thirteen (13) or more children. A child day care center shall not be located in a private residence unless a portion of the residence where the children have access is used exclusively for the children during the hours the center is in operation or is separate from the usual living quarters of the family.

"Child day care - home" means a person regularly providing care during part of the twenty-four-hour day to six (6) or fewer children in the family abode of the person or persons under whose direct care the children are placed.

"Child day care - mini" means a person or agency providing care during part of the twenty-four-hour day to twelve (12) or fewer children in a facility other than the family abode of the person or persons under whose direct care the children are placed, or for the care of seven (7) through twelve (12) children in the family abode of such person or persons.

Community-Based Behavioral Health Facilities – See CMC 18.12.160

"Essential public facility" means those facilities that are typically difficult to site, such as airports, state education facilities and state or regional transportation facilities as defined in RCW 47.06.140, regional transit authority facilities as defined in RCW 81.112.020, state and local correctional facilities, solid waste handling facilities, opioid treatment programs including both mobile and fixed-site medication units, recovery residences, harm reduction programs excluding safe injection sites, and inpatient facilities including substance use disorder treatment facilities, mental health facilities, group homes, community facilities as defined in RCW 72.05.020, and secure community transition facilities as defined in RCW 71.09.020. ~~facilities needed for the health, safety, and general welfare of the community, such as public service and utility buildings including libraries, fire and police stations, telephone exchanges, regulator and electric substations, pumping stations, and other similar uses.~~

~~"Family" means an individual or two or more persons related by blood or marriage or a group of not more than five persons (excluding servants) who need not be related by blood or marriage living together in a dwelling unit.~~

"Nursing home" means any home, place or institution which operates or maintains facilities providing convalescent or chronic care, or both, for a period in excess of twenty-four consecutive hours for three or more patients not related by blood or marriage to the operator, who by reason of illness or infirmity, are unable to properly to care for themselves. Care may include administration of medicines, preparation of special diets, giving of bedside nursing care, application of dressings and bandages, and carrying out of treatment prescribed by a licensed practitioner of the healing arts. Nothing in this definition shall be construed to include general hospitals in which surgery or obstetrics or both are performed, the care of persons suffering from a mental sickness, mental disorder or ailment.