

Behavioral Health Agencies P O. Box 47877 Olympia, WA 98504-7877 360-236-4700



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Opioid Treatment Program (OTP) Community Relations Plan

Agency Name Northwest Integra	ated Health	Credential Number	
Agency Administrator <u>Azam Chaud</u>	hary	Date	
Mailing Address PO BOX 39680			
city Lakewood	State WA_	Zip Code 98	444
Phone (enter 10 digit number) 253-304-	2759 Email Ad	dress AZACHA	@ NWIH. Com
Proposed Site Location Address 1415 E	72nd ST Ta	coma WA 984	104
This template is designed to comply with requireme			enter for Substance

The plan is separated into three parts:

• Part One - Pre-licensure Community Relations Plan

Part one must be **completed** and submitted with the licensing application.

• Part Two - Interim Community Relations Plan

Part two must be submitted to the department prior to the license being issued. The interim community relations plan is designed to document community concerns that may arise between submission of the application and issuance of an OTP license and certification by DOH. It is also used to document the mitigation plan related to the concerns identified.

• Part Three - On-going Community Relations Plan

The on-going community relations plan outlines the agency's proposed on-going community relations efforts after the facility has opened. This may be reviewed by the department during inspections.

Part One

Pre-licensure Community Relations Plan

Step 1:

Contact the county and/or city legislative authority and/or the Tribal authority, as applicable, in order to secure a location for the new opioid treatment program that meets county, city, or tribal land use ordinances.

Identify the legislative authority by contacting:

• Washington Association of County Officials (360) 943-1812, and/or

• Association of Washington Cities (360 753-4137, and/or

NOV 27 2024 DOH/HSQA/OCS CREDENTIALING

• The Tribal Administrative Office (If proposed site is on a tribal reservation or tribal trust land, the county is not required to be notified.)

Once the appropriate authorities have been identified, hold a meeting with them to discuss the proposed site of the program and to obtain a list of all pertinent stakeholder groups in the area. Documentation of these meetings will be required.

Regulatory Reference: WAC 246-341-1005

Authority Contact	Telephone Number	Email Address	Responsible Person
City JOHN HINES	253-591-5100	JHINES 1 @ City of tacomo	Deputy Mayor & Connic Nember
County JANI HITCHE	N 253-798-3308	Jani. hitchen @ Pierce Count	CHAIR HEALTH ?
Tribal NA			HUMAN SERVICER COMMITTE
Meeting Held With	Date of Meeting	Attendees	Issues and Outcomes
City 🗶	10/31/2024	Connect Member Kristing Wa	
County K	Multiple separate	Faul Herrera, Ryan Mello	FULLY 84 DONG
Tribal N/A		Ccouncil Members?	FULLY SUPPORT -
1,		Councis	(2)
		A	war. titt

Step 2:	See	attached	_	Next	Page
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Work with the authorities or their designee to develop a community relations plan that includes documentation of strategies used to obtain stakeholder input regarding the proposed location. Stakeholder groups should include publicly elected representatives, potential referral sources such as substance abuse programs, social and health services providers and medical providers, business organization leaders, community and health planning agency directors, grassroots community organization leaders, such as neighborhood associations and schools, local police and law enforcement, and religious and spiritual leaders.

Regulatory Reference: WAC 246-341-1005

Stakeholder Group	Identified Representatives	Date contact made/ meeting held	Issues and Outcomes
		RECEIVED	
		NOV 27 2024	
		DOH/HSQA/OCS CREDENTIALING	

Part One Step 2 72nd Community Relations

		Date contact made/meeting		Representitive contact
takeholder Group	Identified Representatives	held	Issues and Outcomes	information
			no concerns at this time. Left	
sspresso 4U	Barista	11/1/2024	card with barista for owner.	253-472-2363
			Left card for manager with	
			contact information to address	1 1 5
Vendy's	JoseECEIVED	11/1/2024	any concerns.	253-473-1659
	27 2024		No concerns at this time.	
	NOV 27 2024		Provided Contact inforamtion	
COM Noile	MAH/HSQA/OCS	11/1/2024	for any future concerns	253-472-0125
T&M Nails	CREDENTIALING	11/1/2024	Left card for owner with contact	
			information to address any	
	Employee	11/1/2024	concerns.	253-476-3887
Subway	Employee	11/1/2024	No conerns at this time. Confirmed	
			need in the area for treatment	1
			options. Left card with contact	
			information for any future	
Dollar Tree	Julie,Manager	11/1/2024	concerns	509-900-6608
			No concerns at this time.	
	1		Provided Contact inforamtion	
Liguor Wine & Tobacco	Simon, Owner	11/1/2024	for any future concerns	206-446-4515
			No conerns identified. Left card	
	•		for manager with contact	
			information to address any	-
Anchor Physical Therapy	Reception	11/1/2024	concerns.	253-474-7474
			10 SAMOD SAMOD	
			No concerns at this time.	
	4.		Provided Contact inforamtion	8
Fresenius Kidney Care	Kevan Johnson, Director	11/1/2024	for any future concerns	253-474-2310
			No concerns at this time.	
- P	Acres de la companya del companya de la companya de la companya del companya de la companya de l		Provided Contact inforamtion	2
<u>.</u>	D	11/1/2024		252 402 2022
DSHS	Reception	11/1/2024	for any future concerns	253-428-3200

Step 3:

Document any concerns identified by stakeholders and any suggested mitigation alternatives proposed by stakeholders.

Regulatory Reference: 2015 CSAT Guidelines, p. 16-17: Community Relations and Education

Concerns Identified	Stakeholder(s) Concerned	Suggested Mitigation Alternatives
N/A		
	RECEIVED	
	NOV 27 2024	
	DOH/HSQA/OCS CREDENTIALING	

Step 4:

Document the mitigation tasks that the OTP will use to address concerns, which concern(s) each task will address, the target date for the task to be implemented, and the resolution date.

Mitigation Task	Concerns Addressed by Task	Target Date	Resolution Date
	RECEIVED		
	NOV 27 2024		
	DOH/HSQA/OCS CREDENTIALING		

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Interim Community Relations Plan

Step 1:

Document any new concerns identified and contact made or meetings held with the additional stakeholders.

Stakeholder Group	Identified Representatives	Date Contact made/ meeting held	Agenda and Outcomes
4/4		RECEIVED NOV 27 2024 OH/HSQA/OCS CREDENTIALING	
		OH/HSQA/OCS CREDENTIALING	

Ste	p	2	•

Document any new concerns identified by stakeholders that weren't addressed previously and any suggested mitigation alternatives proposed by stakeholders. After the public hearing, DOH will send the proposed OTP a copy of any stakeholder concerns which should be added to this part of the community relations plan.

Regulatory Reference: 2015 CSAT Guidelines, p. 16-17: Community Relations and Education

New Concerns Identified	Suggested Mitigation Alternatives
67/1X	CEIVED
DO! CR	CEIVED V 27 7024 V/HSQA/OCS EDENTIALING

Step 3:

Document the mitigation tasks that the proposed OTP will use to address the new concerns, which concern(s) each task will address, who is responsible for leading the task, the target date for the task to be implemented, and the resolution date. After addressing the concerns, including those from the public hearing, submit this part of the community relations plan to DOH for posting on the public webpage.

Mitigation Task	Concerns Addressed by Task	Person Responsible	Target Date	Resolution Date
				2.
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
	7/1	RECEIVED		
		NOV 27 2024		
	Di C	OH/HSQA/OCS CREDENTIALING		
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