

Adolescent Substance Use Disorder Treatment Referral and Resource Guide



*Children don't care how much you know, until they know how much
you care.*



DBHR Division of Behavioral
Health and Recovery

Revised May 2014

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For help in placing youth, or updates for services, contact:

- | | | |
|---------------------------|---|-----------------------|
| • Harvey Funai | Behavioral Health Program Manager | (206) 272-2156 |
| • MeLinda Trujillo | Behavioral Health Program Manager | (360) 794-1365 |
| • Lauri Turkovsky | Behavioral Health Program Manager | (360) 725-3812 |
| • Ruth Leonard | Behavioral Health Program Manager | (360) 725-3742 |
| • Amy Martin | Behavioral Health Youth Treatment Manager | (360) 725-3732 |
| • Tara Smith | Behavioral Health Adult Treatment Manager | (360) 725-3701 |

Additional youth resources:

Call **866.TEENLINK (866.833.6546)** every evening 6-10pm

Youth online chat at www.866teenlink.org Monday, Tuesday & Thursdays 6-10pm

For 24-hour help for mental health, problem gambling and substance abuse, call **1-866-789-1511** or visit

www.waRecoveryHelpLine.org

Youth Treatment Services Continuum of Care

MISSION STATEMENT

Youth services will be provided in a culturally relevant environment and in a culturally sensitive manner, which respects the diversity of the targeted population. Youth treatment services will:

- Be responsive to low-income, indigent youth and families who are in need of a community-based continuum of care.
- Be provided in a manner which reduces barriers and increases access, engagement, retention, and completion.
- Foster collaboration and community responsiveness at all levels of care, with other state agencies, including the Children’s Administration (CA), Juvenile Justice and Rehabilitation Administration (JJ&RA), Regional Support Networks (RSNs), and coordinated with academic and/or vocational needs.
- Be coordinated to reduce eligibility, financial, and clinical barriers to treatment resources.
- Ensure that family members and other significant adults in the lives of the youth we serve are welcomed, encouraged, and assisted in participating in the treatment, no matter how difficult or complicated the issues faced by the family.

Introduction

This is a resource guide to youth treatment services contracted by the Department of Social and Health Services (DSHS) - Division of Behavioral Health and Recovery (DBHR). The guide will clarify terms and definitions and provide instructions to refer youth to outpatient or residential treatment services.

The goals of DBHR-contracted youth chemical dependency treatment are to provide each youth and his/her family with a structured, age-appropriate program, which includes, but is not limited to:

- a. Abstinence from alcohol and other drugs.
- b. Ancillary treatment services to family members, which may include birth, adoptive, foster parents, and other caring adults and youth.
- c. Comprehensive assessment of the youth's drug and alcohol use, his/her family and other support systems, school involvement, and other high risk behavior, including suicide risk, HIV/AIDS Brief Risk Assessment, etc.
- d. An assessment of adolescent development, including level of maturation, emotional stability and functioning, educational history, and learning ability.

Treatment should be provided which respects and addresses the age, gender, language, culture, ethnicity, and sexual orientation of participants and their family members.

DEFINITION AND REQUIREMENTS OF TREATMENT SERVICES

DBHR Certification: Certification is approval of a chemical dependency treatment program by DBHR. Certification of a program signifies that the program meets certain minimum standards as outlined in Washington Administrative Code (WAC) 388-877B includes a number of important references to youth counselors, outpatient and residential treatment, and treatment in schools.

Youth Contract Requirements: State certified outpatient and residential treatment programs have, as part of their contracts, specific guidelines for the treatment of youth, including specific assessment and counseling requirements, staffing ratios, reporting and referral requirements, etc. For specific information regarding

these contract requirements, contact your County Alcohol and Drug Coordinator, DBHR Behavioral Health Administrator, or the DBHR Behavioral Health Youth Treatment Manager.

Assessment: A thorough, multidimensional, individualized interview performed by a chemical dependency professional (CDP) to determine appropriateness for adolescent chemical dependency treatment. Either outpatient or residential treatment providers may conduct assessments. Often, agencies use a standardized, adolescent-specific chemical dependency assessment tool, such as the Global Assessment of Individual Needs (GAIN- I) or other appropriate assessment tools.

In compliance with Revised Code of Washington (RCW) 70.155.080 youth are prohibited from possessing tobacco products while participating in treatment services.

An assessment should include:

- a. An alcohol and drug use history.
- b. A family use pattern and addiction history.
- c. A description and assessment of existing support systems, including family and peer relationships and school involvement, and an assessment of high risk behaviors, including suicide risk evaluation and an HIV/AIDS Brief Risk Evaluation.
- d. An assessment of adolescent development, including level of maturation, emotional stability and functioning, educational history, and learning ability.

DESCRIPTION OF ADOLESCENT OUTPATIENT SERVICES

A. *Outpatient Treatment*

A state certified non-residential program, which provides chemical dependency assessments and an alcohol/drug-free counseling program for adolescents and young adults ages ten (10) through 17. Young adults ages 18 -20 may be served in youth agencies if appropriate. Collateral and family support services may also be provided to family members of youth clients. Clients under the age of ten (10) may be served with the approval of the DBHR contract manager. Outpatient treatment programs for youth are designed to diagnose, stabilize, counsel, and build family and social support systems, which promote abstinence and growth.

DBHR-funded youth outpatient services are funded through counties. A list of all these programs is located on **pages 11 - 25** of this booklet.

B. *Outreach Services (contracted services with certified agencies)*

Defined as initiating discussion with youth regarding alcohol and other drugs, possible consequences of usage, and education and information about services and resources for individuals affected by their own substance abuse or chemical dependency, or by that of significant people in their lives. Youth outreach services may include outreach to youth in schools, Children’s Administration (CA), Juvenile Justice and Rehabilitation Administration (JJ&RA), Juvenile Courts, or referred by agencies or individuals concerned about children.

DESCRIPTIONS OF ADOLESCENT WITHDRAWAL MANAGEMENT AND RESIDENTIAL TREATMENT SERVICES

A DBHR certified and state licensed residential facility, which is voluntary, alcohol and drug-free, designed for youth, and supports abstinence from alcohol and other drugs. Family and significant other treatment is

included, as well as relapse and long-term recovery education and counseling. Individual programs may provide, depending upon the level of care (outlined in this section), more intensive therapeutic interventions and services. Some residential facilities treating youth may be a part of a program, which also treats adults. DBHR-contracted youth providers must comply with safeguards for the treatment of youth, which include separate and distinct sleeping room assignments, and specific developmentally appropriate programming.

The county contracted youth providers may conduct assessments to determine clinical eligibility for residential services, by DBHR-funded residential facilities. The treatment descriptions listed in this section are meant to be brief overviews. For more details on levels of care, contact the DBHR Behavioral Health Youth Treatment Manager, Amy Martin at (360) 725-3732.

DBHR-funded **residential, withdrawal management, and treatment services** are funded directly from DBHR to individual providers. A list of these providers is located in the DBHR's "Directory of Chemical Dependency Treatment Services in Washington State," located at: <http://www.dshs.wa.gov/dbhr/dadirectory.shtml>

Financial assistance is available to those youth and families who qualify for residential treatment for the reimbursement of mileage and lodging (in-state only) associated with attendance at a DBHR-funded residential facility. See section on **Transportation Assistance/Family Hardship Program** on **Page 10** of this booklet.

Taking into consideration the results of an assessment using ASAM Criteria makes determination of the need for inpatient treatment. The assessment process would include information regarding the safety of the minor, the likelihood of deterioration of the minors' recovery if released and information received from collateral sources such as the parents, the patients' referral, probation, school, etc.

A. Youth Withdrawal Management/Crisis Stabilization Services

The purpose of the Withdrawal Management and Crisis Stabilization Services for youth is to provide a safe, temporary, protective environment for at-risk/runaway youth who are experiencing harmful effects of intoxication and/or withdrawal from alcohol and other drugs, in conjunction with emotional and behavioral crisis, including co-existing or undetermined mental health symptomology. This service will address the needs of and treatment outcomes for youth who need chemical dependency and other treatment services but who may not be able to access these services due to acute intoxication and medical, psychological, and behavioral problems associated with their alcohol/drug use. Withdrawal management services are considered residential treatment. See Age of Consent Section.

Withdrawal Management/Crisis Stabilization Services are available to youth, ages 13 - 17, who are:

1. Experiencing harmful intoxication substance-induced disorders and/or withdrawal from alcohol/other drugs.
2. Experiencing an episode of clear and present danger to harm self/others due to alcohol/drug intoxication and/or withdrawal, with associated emotional and behavioral problems.
3. Experiencing co-existing or undetermined mental health symptomologies, which need detoxification in order to make accurate assessment of treatment needs.

Youth under the age 13 or over age 17 may be served, based on clinical need and availability of age-appropriate services.

B. Level I Youth Basic Residential Treatment

Youth appropriate for this level of care include: Those ages 13 through 17 who evidence cognitive development of at least 11 years of age, have a primary diagnosis of chemical dependency, and require less clinical supervision and behavior management. A chemical dependency professional (CDP) will conduct a clinical assessment to participants, age 12 and younger, or age 18, 19, or 20, to determine their appropriateness for youth treatment.

Generally speaking, youth participants in Level I will not necessarily require intensive therapeutic intervention for other disorders, such as mental disorders or aggressive behavior, as part of primary chemical dependency treatment. Length of stay is variable, based on clinical needs determined by ASAM Criteria and program design.

Level I programs may admit youth that meet some of the clinical characteristics of a Level II-type client, if the decision is based on clinical assessment and program ability to meet the needs of the youth and their family.

C. *Level II Youth Intensive Residential Treatment*

Youth appropriate for this level of care include: Those ages 13 through 17 who meet the criteria for being both chemically dependent **and** with the symptoms of a mental health diagnosis (or potential diagnosis) requiring concurrent management with the treatment of a substance use disorder (e.g., attention deficit-hyperactivity disorder, depression, conduct disorder, etc.) and/or extreme family dysfunction, prior trauma due to emotional, physical, and/or sexual abuse, which may present a major risk of danger to the client and/or others, and high risk to not complete treatment. Participant's age 12 and younger, or ages 18, 19, or 20 may be served with clinical assessment of appropriateness for youth treatment.

Length of stay is variable based on ASAM Criteria, but usually will be longer than Level I treatment due to the need to address mental health symptoms or potential diagnosis. Level II programs are required to provide chemical dependency counseling staff trained in areas other than chemical dependency, such as developmental issues, abuse, anger, aggression, and behavior management. They are also required to provide a mental health specialist position, and some form of staff and/or physical security for youth who are at risk to leave treatment against clinical advice. Some Level II programs are locked or are secure facilities. Youth with serious criminal history, history of assaultive behavior, sexual assault, murder, or attempted murder may be refused admission to treatment, but only upon review by DBHR youth program managers.

Level II programs may serve youth who fit the Level I characteristics, but Level II clients will have assessment and admission priority.

D. *Youth Recovery House*

Youth appropriate for this service include: Those youth ages 13 through 17 who have completed residential chemical dependency treatment and who cannot immediately live with their legal guardians, parents, foster parents, or relatives, or other out-of-home placement. Youth ages 18, 19, or 20 may be served in a youth facility if assessed by a CDP as developmentally appropriate for a youth treatment program. Youth from both Level I and Level II programs may be served in Recovery House Programs. DBHR currently has four recovery houses available for youth completing inpatient treatment.

Recovery House Programs provide adequate structure and supervision, continued treatment emphasis on recovery and abstinence from alcohol and other drugs, and improvement of living skills,

including education and employment skills. The programs also provide access to community support systems, and youth participation in age-appropriate activities. The Recovery House Program is an extension of and transition from residential treatment.

E. Secure Treatment

Some Level I and Level II facilities provide interior/exterior security systems to reduce potential for youth running away.

HOW TO REFER YOUTH TO TREATMENT

Each DBHR-contracted youth provider is responsible for determining a youth's clinical and financial eligibility for treatment at that contracted facility. Those youth who have already been determined to meet Apple Health (formerly Medicaid) and/or have medical coupons will be eligible for DBHR-contracted outpatient and residential services. Income eligibility information may be accessed through the youth provider (*also see section on Early Periodic Screening Diagnosis and Treatment [EPSDT] on Page 9 of this booklet*). Other family resources may be used in combination with DBHR funds if appropriately determined, such as insurance or private pay.

Generally, it is best to refer a youth to an outpatient facility for the initial assessment, although residential facilities will provide assessments for DBHR-eligible youth without cost. The outpatient counselor can ensure that youth who are referred to residential services are referred back to the local outpatient program for continuing care support. Residential facilities will make every attempt to refer youth back to local outpatient services.

Although many youth reluctantly agree to enter treatment, there has been a small percentage of extremely resistant, defiant, runaway, non-offender youth whose parents have not been able to get them into treatment.

With enactment of the **At-Risk Runaway Youth Act**, known as the "**Becca Bill**," state legislators focused attention on a parent's right to provide for the protection of and to establish guidelines for their runaway, out-of-control youth. The "Becca Bill" gives parents additional options for accessing needed services. In support of this legislation, DBHR assists parents of youth with an At-Risk Youth (ARY) petition and those who are being admitted under the Involuntary Treatment Act (ITA). The ARY petition originates with the parent's local office of the DCFS, where a Family Reconciliation Services caseworker will assist the parent in filing the petition with Juvenile Court. *The ARY petition may be a helpful tool if all other avenues to get the youth into treatment have failed.*

Youth who may be experiencing immediate and life threatening consequences of chemical dependency, and who meet the incapacity criteria described in RCW 70.96A.140, may require involuntary commitment. A Designated Chemical Dependency Specialist initiates the ITA commitment after an investigation and evaluation of specific facts alleging that a youth is incapacitated as a result of chemical dependency (see Appendix I in the DBHR "Provider Directory").

BECCA Information

In the 1998 Legislative Session, Substitute Senate Bill 6208 was passed into law. The bill did not change the current laws regarding consent for outpatient and inpatient treatment, although they re-titled them as

"voluntary" treatment processes (listed in section "Age of Consent" in this Guide). The law added new procedures for that which is referred to as "parent-initiated" outpatient and inpatient treatment.

"Parent initiated" treatment allows a parent to bring a minor child to an outpatient or inpatient treatment provider to have the child assessed for admission, without the child's consent.

The new definition of "medical necessity" refers to inpatient care that will "alleviate a chemical dependency, or prevent the worsening of chemical dependency conditions that endanger life, or cause suffering or pain." Minor youth also have the right to petition the court for review of their continued stay in treatment. This and other safeguards will support the treatment of minors who are medically in need of treatment, but who refuse to consent or "volunteer" to be admitted.

In order to assist parents and treatment providers with the intent of all the Becca legislation, DBHR has defined "Becca-type" youth as those who have applied for treatment after going through any of the following processes:

- Parent-initiated admission of a non-consenting youth.
- Youth with At-Risk Youth (ARY) or Child In Need of Services (CHINS) petitions.
- Youth under an Involuntary Treatment Act (ITA) order pursuant to 70.96A.140.
- Youth referred after having been admitted to a DBHR-contracted Youth Withdrawal Management/Crisis Stabilization bed.
- Youth applying for admission as a "Self-Consent," whose parents are unwilling or unable to provide, consent, and who meet the definition of a CHINS youth.
- Native American youth referred by a tribal court with any of the above legal designations.

For Further Information about Youth Treatment Resources Including Assessment, Contact:

- Local County Alcohol and Drug Coordinator (listed in the Provider Directory)
- DBHR Behavioral Health Program Manager (listed on the inside cover of the Provider Directory).
- Amy Martin, DBHR Behavioral Health Youth Treatment Manager, at (360) 725-3732
- Washington Recovery Help Line (866-789-1511) or **866.TEENLINK (866-833-6546)** every evening 6-10pm

AGE OF CONSENT FOR YOUTH TREATMENT PROGRAMS

Parental authorization is required for **any** treatment of a minor **under age 13**.

- ***Outpatient chemical dependency treatment.*** Any person 13 years of age or older may give consent for counseling, care, treatment, or rehabilitation by a treatment program or by any person. Outpatient programs providing treatment to minors 13 years of age or older shall provide notice of the minor's request for treatment to the minor's parents within seven days **if** the minor signs a written consent authorizing the disclosure, **or** the treatment program director determines that the minor lacks capacity to make a rational choice regarding consent disclosure.
- ***Residential chemical dependency treatment (includes withdrawal management services).*** Parental consent is required for anyone **under the age of 18**, except that ***inpatient*** programs can now admit youth without a parental consent if the youth **meets the definition** of a Child in Need of Services. These youth should only be admitted if the youth has been living outside of the family home and the

parents are unavailable, unable, or unwilling to provide consent to treatment. Admitting a self-consenting youth is a determination made by the program to which the youth applies, based on information obtained by the program, and the program must document efforts to locate and engage the parents in the treatment process.

If legal custody is held by DSHS, the DSHS caseworker must be contacted to consent to residential chemical dependency treatment.

FAMILY PARTICIPATION

Family participation is encouraged and strongly recommended. A definition of family includes birth, adoptive, foster, stepparent, and marital relationships.

EARLY PERIODIC SCREENING, DIAGNOSIS, AND TREATMENT

This is a Medicaid funded preventative health care program for children and youth 20 years of age and younger. Washington State calls its Early Periodic Screening Diagnostic and Treatment (EPSDT) Program "Healthy Kids." In addition to providing for routine health concerns, any needed treatment identified in the EPSDT exam must be provided. For Medicaid youth who are substance-abusing, treatment must be provided if a health care practitioner through the EPSDT/Healthy Kids program identifies the need.

To assure that youth making application for services receive the full benefit of the EPSDT/Healthy Options program, DBHR-funded youth contractors shall screen each applicant and make referrals as follows:

- a. All youth shall be screened for financial eligibility and referred to the local DSHS Community Services Office (CSO), for Apple Health eligibility determination if the financial screen so warrants.
- b. Contracted programs shall refer Apple Health eligible youth that have not previously received an EPSDT/Healthy Options health screen to an EPSDT/Healthy Options primary health care provider for such services.

MEDICAL COUPONS FOR DBHR-FUNDED YOUTH IN RESIDENTIAL TREATMENT

When possible, youth who are referred to residential treatment, who do not currently have any medical coupons, should be assisted in attaining them **prior** to entering treatment. If coupons for medical assistance are not obtained prior to entering treatment, youth can be assisted by treatment staff upon admission to complete a form that can be mailed to the local DSHS, EMFS office. **To provide the most comprehensive medical and health services for DBHR-funded youth in treatment, contact the local EPSDT screener in your area.**

Federal Poverty Chart Guidelines, may be found by accessing the DBHR page of the DSHS Website at <http://www.dshs.wa.gov/pdf/dbhr/da/2009FederalPovertyLevels.pdf>

TRANSPORTATION ASSISTANCE/FAMILY HARDSHIP PROGRAM

A program intended to assist families of youth who are patients in DBHR-funded, residential chemical dependency treatment programs, and youth withdrawal management services. The program will assist families with travel and lodging costs to enable them to fully participate in the family treatment program. Eligibility is based on those families at the lowest income level with the least amount of resources, and who

are required to travel more than 50 miles one way to attend treatment activities. Priority is given for travel that is clinically required. Lodging, when required, is also reimbursable. *DBHR reimburses residential providers who, in turn, directly reimburse families.* Add language from contract that includes in-state only

PREGNANT AND POSTPARTUM YOUTH

These youth are eligible for all substance abuse treatment services available for the youth population in general, as well as some specialized services for pregnant women. Pregnant youth who might require withdrawal management and medical stabilization services are assessed through county Alcoholism and Drug Addiction Treatment and Support Act (ADATSA) Assessment Centers. Adolescents who require withdrawal management and medical stabilization services must be determined financially eligible through the local DSHS, CSO office.

Pregnant youth can receive withdrawal management and medical stabilization in a hospital-based intensive inpatient treatment program. There are presently a number of hospital-based intensive inpatient treatment programs across the state with a program for pregnant women. Some of these programs may have specific services for pregnant adolescents. See the following Appendix listing, in DBHR's Provider Directory titled: *DBHR Certified Hospitals Providing Intensive Inpatient Care for Chemical Using Pregnant Women (Appendix F); DBHR-Contracted Residential Services for Women and Children (Appendix E); and DBHR-Contracted Housing Support Services for Pregnant and Postpartum Women (Appendix D) which can be found on the web site at: <http://www.dshs.wa.gov/dbhr/directory.shtml>*

YOUTH OUTPATIENT CONTRACTORS

ADAMS COUNTY

Community Counseling Services

425 E Main Street
Othello, WA 99344
509-488-5611

ASOTIN COUNTY

Quality Behavioral Health

900 Seventh Street
Clarkston, WA 99403
509-758-3341

BENTON/FRANKLIN COUNTY

Community Health Center La Clinica

dba: Nueva Esperanza Counseling Center
720 W Court Street, Suite 8
Pasco, WA 99301
509-545-6506

Educational Service District 123

Youth Recovery Program
3918 W Court Street
Pasco, WA 99301
509-547-8441

Comprehensive Dependency Health Services

2715 Andrews Loop, Suite C
Pasco, WA. 99301
(509) 412-1051

Olympic Personal Growth Center

390 E Cedar Street
Sequim, WA 98282
360-681-8463

True Star Behavioral Health Services

1912 W 18th Street
Port Angeles, WA 98363
360-417-2282

West End Outreach Services (Forks)

Forks Community Hospital
530 Bogachiel Way
Forks, WA 98331
360-374-6177

CLARK COUNTY

Change Point, Inc.

10621 NE Coxley Drive, Suite #103
Vancouver, WA 98662
360-705-9378

Community Services Northwest

1601 E Fourth Plain Boulevard
Vancouver, WA 98660
360-397-8488

Daybreak Youth Services

11818 SE Mill Plain Boulevard, Suite 307
Vancouver, WA 98684
360-750-9635

First Step Community Counseling

415 N Morain Street, Suite A, B,C & D
Kennewick, WA 99336
509-735-6900

Lourdes Counseling Center

1175 Carondelet Drive
Richland, WA. 99352
509) 943-9104

Somerset Counseling Center

1305 Mansfield Street, Suite 5
Richland, WA 99352
509-942-1624

CHELAN/DOUGLAS COUNTY

Center for Alcohol and Drug Treatment

327 Okanogan Avenue
Wenatchee, WA 98801
509-662-9673

CLALLAM COUNTY

Jamestown S'Klallam Tribal Program

1033 Old Blyn Highway
Sequim, WA 98382
360-681-4626

Klallam Counseling Services (formerly Lower Elwha Tribal Program)

1026 E First Street, Suite 2
Port Angeles, WA 98362
360-452-4432

Makah Chemical Dependency Program

Front Street
Neah Bay, WA 98357
360-645-2461 *Serves Native Americans Only*

FRANKLIN COUNTY

(See Benton County listing)

GARFIELD COUNTY

Garfield County Human Services

856 Main Street
Post Office Box 758
Pomeroy, WA 99347
509-843-3791

GRANT COUNTY

Grant County Prevention and Recovery Center

1525 E Wheeler Road
Post Office Box 1217
Moses Lake, WA 98837
509-765-5402

GRAYS HARBOR COUNTY

Chehalis Tribal Recovery Program

420 Howanut Drive
Post Office Box 536
Oakville, WA 98568
360-273-5595

Quinault Indian Nation Treatment Program

116 Quinault Street
Taholah, WA 98587
360-276-8211 *Serves Native Americans Only*

Lifeline Connections

1601 E Fourth Plain Boulevard –
Building #17 - Suite A212
Vancouver, WA 98661
360-397-8246

COLUMBIA COUNTY

Blue Mountain Counseling

221 E Washington Street
Dayton, WA 99328
509-382-1164

COWLITZ COUNTY

Awakenings

206 ½ NW 2nd Ave.
Longview, WA 98632
360-423-2806

Cowlitz Tribal Treatment – Main Branch

1044 11th Avenue
Longview, WA 98632
360-575-3316

FERRY COUNTY

Northeast Washington Alliance

**Counseling Services-
Republic Chemical Dependency Unit**

65 N. Keller
Republic, WA 99166
509-775-2958

Center for Human Services

17018 15th Avenue NE
Seattle, WA 98155
206-362-7282

Center for Human Services

22105 23rd Drive SE
Bothell, WA 98021
206-362-7282

Central Youth and Family Services

1901 Martin Luther King Jr. Way S
Seattle, WA 98144
206-322-7676

Consejo Counseling and Referral Services

3808 S Angeline Street
Seattle, WA 98118
206-461-4880

Consejo Kent Youth Outpatient Services

515 W Harrison, Suite 109
Kent, WA 98032
206-461-4880

**Friends of Youth-Branch of Issaquah
Youth and Family Program**

414 Front Street N
Issaquah, WA 98027
425-392-6367

True North – ESD #113 - Aberdeen

1700 Cherry Street
Aberdeen, WA 98520
360-209-5420

ISLAND COUNTY

Island County Recovery Services

31640 State Route 20, Suite 1
Oak Harbor, WA 98277
360-679-7676

JEFFERSON COUNTY

Safe Harbor Recovery Center

686 Lake Street, Suite 400
Port Townsend, WA 98368
360-385-3866

KING COUNTY

Asian Counseling and Referral Services

3639 Martin Luther King Jr. Way S
Seattle, WA 98144
206-695-7606

Auburn Youth Resources

816 F Street SE
Auburn, WA 98002
253-939-2202

KING COUNTY CONT.

Sea Mar Renacer Youth Treatment Center

10001 17th Place S
Seattle, WA 98168
206-766-6960

Seattle Counseling Services

1216 Pine Street, Suite 300
Seattle, WA 98101
206-323-1768

Sound Mental Health

Administrative Offices
1600 E Olive Street
Seattle, WA 98122
206-302-2200

Sound Mental Health - Auburn

4238 Auburn Way N
Auburn, WA 98002
206-302-2200

Sound Mental Health - Bellevue

14216 NE 21st Street
Bellevue, WA 98007
206-302-2200 / 425-653-4900

Sound Mental Health – Capital Hill

1600 E Olive Street
Seattle, WA 98112
206-302-2200

Sound Mental Health - Northgate

9706 4th Avenue NE, #303
Seattle, WA 98115
206-302-2900

Sound Mental Health -Tukwila

6100 S Center Boulevard, 3rd floor
Tukwila, WA 98188

Integrative Counseling Services

701 N 36th Street, Suite 300
Seattle, WA 98103
206-216-5000

Kent Youth and Family Services

232 South Second Avenue, #201
Kent, WA 98032
253-859-0300

Muckleshoot Behavioral Health Program

39101 180th Avenue SE
Auburn, WA 98092
253-804-8752 *Serves Native Americans Only*

Northshore Youth and Family Services

10309 NE 185th Street
Bothell, WA 98011
425-485-6541

Renton Area Youth and Family Services

1025 S Third Street
Renton, WA 98055
425-271-5600

WAPI Community Services

Washington Asian/Pacific Islander
Families Against Substance Abuse (WAPIFASA)
3722 S Hudson Street
Seattle, WA 98118
206-223-9578

Youth Eastside Services-Main Facility

999 164th Avenue NE
Bellevue, WA 98008
425-747-4YES

Youth Eastside Services-Lake Washington

11829 97th Avenue NE
Kirkland, WA 98034
425-747-4YES

Youth Eastside Services- Redmond

16225 NE 87th Street
Redmond, WA 98052
425-869-6036 / 425-747-4937

KITSAP COUNTY

Cascade Recovery Center

9095 McConnell Avenue NW
Post Office Box 3452
Silverdale, WA 98383
360-698-7267

**Kitsap Adolescent Recovery Services
(KARS)**

1338 SW Old Clifton Rd
Port Orchard, WA 98366
360-337-5470

Kitsap Mental Health Services

5455 Almira Drive NE
Bremerton, WA 98310
360-373-5031

Port Gamble S'Klallam Tribe

206-444-7900

Therapeutic Health Services – Kent Branch

24823 Pacific Highway S, #103
Kent, WA 98032
206-681-0010

Therapeutic Health Services – Rainier Branch

5802 Rainier Ave S
Seattle, WA 98118
206-723-1980

Vashon Youth and Family Services

20110 Vashon Highway SW
Vashon Island, WA 98070
206-463-5511

**Washington Asian/Pacific Islander
Families Against Substance Abuse (WAPIFASA)**

606 Maynard Avenue S, Suite 106
Seattle, WA 98104
206-223-9578

LEWIS COUNTY

True North – ESD #113

2100 N National Avenue, Box 12
Chehalis, WA 98532
360-748-2274

LINCOLN COUNTY

Lincoln County Alcohol/Drug Center

510 Morgan Street
Post Office Box 152
Davenport, WA 99122
509-725-2111

MASON COUNTY

(See Thurston County listing)

OKANOGAN COUNTY

Colville Confederated Tribes

Tribal Headquarters
Nespelem, WA 99155
509-634-2600 *Serves Native Americans Only*

Colville Confederated Tribes – Omak Branch

507 Benton Street
Omak, WA 98841
509-422-7410 *Serves Native Americans Only*

Okanogan Behavioral Healthcare, Inc

1007 Koala Drive
Omak, WA 98841
509-826-5600

PACIFIC COUNTY

Shoalwater Bay Indian Tribe

2373 Old Tokeland Road, Building E
Tokeland, WA 98590
360-267-8126 *Serves Native Americans Only*

True North- ESD 113 - Pacific

22 Viking Way
Raymond, WA 98577
360-942-3271

Willapa Behavioral Health

(North Pacific County)

31912 Little Boston Road NE

Kingston, WA 98346
360-297-3412 *Serves Native Americans Only*

KITTITAS COUNTY

Alcohol and Drug Dependency Services

507 Nanum, Room 111
Ellensburg, WA 98926
509-925-9821

KLICKITAT COUNTY

Dependency Health Services-Goldendale

112 W Main Street
Goldendale, WA 98620-9286
509-773-5801

Dependency Health Services- White Salmon

432 NE Tohomish
White Salmon, WA 98672
509-493-3400

Pend Oreille County Counseling Services

101 S Garden Avenue
Newport, WA 99156
509-447-5651

PIERCE COUNTY

Community Counseling Institute, Inc

2502 Tacoma Avenue
Tacoma, WA 98402
253-759-0852

Consejo Counseling & Referral Service

5915 Orchard Street W, Unit B
Tacoma, WA 98466
253-385-1528

Foundation for Multicultural Solutions

El Camino Program
2316 S State Street, Suite B
Tacoma, WA 98405
253-572-3214

Puyallup Tribal Treatment Center

2209 E 32nd Street
Tacoma, WA 98404
253-593-0247 *Serves Native Americans only*

**Remann Hall Alcohol/Drug Development Program
(RHADD)**

Pierce County Juvenile Court
5501 6th Avenue
Tacoma, WA 98406
253-798-7900

The Center (Metropolitan Development Council)

721 S Fawcett Avenue #203
Tacoma, WA 98402
253-593-2740

SAN JUAN COUNTY

Compass Health – Friday Harbor

520 Spring Street
Friday Harbor, WA 98250
360-378-2669

300 Ocean Avenue
Raymond, WA 98577
Post Office Box 65
South Bend, WA 98586
360-875-9426

Willapa Behavioral Health
(South Pacific County)
2204 N Pacific Avenue
Long Beach, WA 98631
360-642-3787

PEND OREILLE COUNTY

Camas Path BHS - North
Kalispel Tribe of Indians
72 Camas Flat Road
Cusick, WA 99119
509-447-7412 *Serves Native Americans Only*

Compass Health – Lopez Island
46 Eads Lane, Lopez Village, Suite D
Lopez, WA 98261
360-378-2669

Compass Health – Orcas Island
1286 Mt. Baker Road, Suite B201 & B203
Eastbound, WA 98245
360-378-2669

SKAGIT COUNTY

Northwest ESD 189
1601 R Avenue
Anacortes, WA 98221
360-299-4010

Phoenix Recovery Services
1601 E College Way, Suite A
Mount Vernon, WA 98273 360-848-8437

SKAGIT COUNTY CONT.

Sea Mar Substance Abuse-Mt Vernon

1010 E College Way
Mount Vernon, WA 98273
360-428-8912

**Skagit Recovery Center-John King
Recovery House**

1905 Continental Place
Mt. Vernon, WA 98273
360-428-7835

Upper Skagit Tribe CD Tx Program

25959 Community Plaza Way
Sedro Woolley, WA 98284
360-854-7070 *Serves Native Americans Only*

SKAMANIA COUNTY

Skamania County Community Health

710 SW Rock Creek Drive
Stevenson, WA 98648
509-427-3850

SNOHOMISH COUNTY

Catholic Community Services-Everett

2610 Wetmore Avenue
Everett, WA 98201
425-258-5270

Catholic Community Services – Marysville

1227 2nd Street
Marysville, WA 98270
360-651-2366

Sea Mar Behavioral Health – Everett

5007 Claremont Way
Everett, WA 98203
425-609-5505

Sea Mar Behavioral Health - Lynnwood

19707 44th Avenue W, Suite 101
Lynnwood, WA 98036
425-977-2560

Sea Mar Behavioral Health - Monroe

14090 Fryelands Boulevard SE, Suite 347
Monroe, WA 98272
360-805-3122

Stillaguamish Tribe of Indians

17014 59th Avenue NE
Arlington, WA 98223
360-435-3985 *Serves Native Americans Only*

Therapeutic Health Services - Everett

9930 Evergreen Way, Building Z150
Everett, WA 98204
425-263-3006

Tulalip Tribal Behavioral Health Services (Youth)

2821 Mission Hill Road
Tulalip, WA 98271
360-716-4400 *Serves Native Americans Only*

THURSTON/MASON COUNTY CONT.

True North – ESD #113–Tumwater

6005 Tye Drive SW

SPOKANE COUNTY

Daybreak of Spokane

960 E 3rd Avenue
Spokane, WA 99202
509-624-3227 x 24

Daybreak of Spokane

(Valley Outpatient Program)
11711 E Sprague Avenue, Suite D4
Spokane, WA 99206
509-927-1991

Daybreak of Spokane

4001 North Cook Street
Spokane, WA 99207
509-444-7033

Excelsior Youth Center

3754 Indian Trail Road W
Spokane, WA 99208-4736
509-328-7041

N.A.T.I.V.E. Project

Alcohol/Drug Outpatient Program
1803 W Maxwell
Spokane, WA 99201-2831
509-325-5502

STEVENS COUNTY

**Northeast Washington Alliance
Counseling Services**

Chemical Dependency Unit
165 E Hawthorne Avenue
Colville, WA 99114
509-684-4597

**Northeast Washington Alliance
Counseling Services _Chewelah**

Chemical Dependency Unit
301 E Clay, Room #201
Chewelah, WA 99109
509-935-4808

THURSTON/MASON COUNTY

**Nisqually Tribal Substance Abuse and Prevention
Program**

4816 She-Nah-Num Drive SE
Olympia, WA 98513
360-459-5312 *Serves Native Americans Only*

**Northwest Indian Treatment Center
Squaxin Island Tribal**

70 Squaxin Lane SE
Shelton, WA 98584
360-426-9781 *Serves Native Americans Only*

St. Peter Chemical Dependency Center

4800 College Street SE
Lacey, WA 98503
360-456-7575 Toll Free: 1-800-332-0465

True North – ESD #113-Mason

807 W Pine Street
Shelton, WA 98584
360-427-2050

Central WA Comprehensive Mental Health

402 S 4th Avenue
Yakima, WA 98902

Tumwater, WA 98512
360-464-6870

True North – ESD #113– Yelm
1315 Yelm Highway
Yelm, WA 98597
360-458-6233

WAHAKIYAKUM COUNTY

Wahkiakum Chemical Dependency Services
42 Elochoman Valley Road
Cathlamet, WA 98612
360-795-8630

WALLA WALLA COUNTY

Serenity Point Counseling Service
912 S 2nd Avenue
Walla Walla, WA 99362
509-529-6036

WHATCOM COUNTY

Catholic Community Services Recovery Center
515 Lakeway Drive
Bellingham, WA 98225
360-676-2187

Lummi Counseling Services

2530 Kwina Road
Bellingham, WA 98226
360-384-2330 *Serves Native Americans Only*

Nooksack Tribe Genesis II

6750 Mission Road
Everson, WA 98247
360-966-7704 *Serves Native Americans Only*

WHITMAN COUNTY

Palouse River Counseling
340 NE Maple Street, #2
Pullman, WA 99163
509-334-1133

YAKIMA COUNTY

Behavioral Health Services
Yakima Valley Farm Workers Clinic
120 S 3rd Street, Suite 100
Yakima, WA 98901
509-575-8457

509-575-4024

Dependency Health Services

505 S 4th Avenue
Yakima, WA 98902
509-248-1200

Dependency Health Services

1319 Saul Road S
Sunnyside, WA 98944
509-837-2089

Merit Resources-Sunnyside

702 Franklin Avenue
Post Office Box 921
Sunnyside, WA 98944
509-837-7700

Merit Resources–Toppenish

321 W First Avenue
Toppenish, WA 98948
509-865-5233

Merit Resources–Wapato

312 W 2nd Street
Post Office Box 1067
Wapato, WA 98951
509-877-7271

Merit Resources–Yakima

315 N 2nd Street
Yakima, WA 98907
509-469-9366

Sundown M Ranch

2280 State Route 821
Yakima, WA 98901
Mailing Address:
Post Office Box 217
Selah, WA 98942
509-475-0990

Triumph Treatment Services

102 S Naches Avenue
Post Office Box 2849
Yakima, WA 98907
509-248-1800

Yakama Indian Nation Comprehensive

Alcoholism Program
20 Gunnyon Road
Toppenish, WA 98948
509-865-5121 *Serves Native Americans Only*

For an updated list, for other information, or to report changes, contact:

Amy Martin at 360-725-3732,
Toll Free at 1-877-301-4557, or via email at:
martiak2@dshs.wa.gov

For youth treatment at DBHR-certified private agencies that do not receive public funding, refer to the **DBHR “Provider Directory”** and find “YOUTH” under TREATMENT FOCUS of each listed agency.

**DBHR-FUNDED YOUTH RESIDENTIAL
CHEMICAL DEPENDENCY TREATMENT/DETOX SERVICES**

(Revised August 2013)

DBHR-funded youth treatment and detox beds are open to youth regardless of county of residence. It is recommended that services be used closest to adolescent's home, when possible. See further program description information in certified treatment program listings.

CLARK COUNTY

Level II Facilities:

Daybreak Youth Services-Vancouver

2924 Falk Road
Vancouver, WA 98661
360-750-9588 (14 DBHR Beds)
(Secure, males only)
for Admissions, call 888-454-5306 (26)

KING COUNTY

Youth Detox/Stabilization Facilities:

Lakeside Milam Recovery Center

10322 NE 132nd Street
Kirkland, WA 98034
425-823-3116/Toll Free: 800-231-4303

**Recovery Centers of King County
Detoxification Center**

1701 18th Avenue S
Seattle, WA 98144
206-325-5000

Level II Facilities:

Lakeside-Milam Recovery Center

12845 Ambaum Boulevard SW
Seattle, WA 98146
206-241-0890
Toll Free: 800-231-4303
(8 DBHR Beds)

Ryther

2400 NE 95th Street
Seattle, WA 98115
206-525-5050
(10 DBHR Beds)
(Secure, males only)

SeaMar Renacer Youth Facility

10001 17th Place S
Seattle, WA 98168
206-766-6960
(14 DBHR Beds; males, minority,
primarily King County)

PIERCE COUNTY

Youth Detox/Stabilization Facilities:

Tacoma Detoxification Center
721 S Fawcett Avenue, Room 100
Tacoma, WA 98402
253-593-2413

SKAGIT COUNTY

Youth Detox/Stabilization Facilities:

**Skagit Recovery Center -
John King Recovery House**
1905 Continental Place
Mount Vernon, WA 98273
360-428-7835

Recovery House Facilities:

**Skagit Recovery Center -
John King Recovery House**
1905 Continental Place
Mount Vernon, WA 98273
360-428-7835
(17 DBHR Beds)

SPOKANE COUNTY

Youth Detox/Stabilization Facilities:

Community Detox Services
312 W 8th Avenue
Spokane, WA 99204
509-477-4631

Level I Facilities:

**Healing Lodge of the Seven Nations –
Sage Program**
5600 E 8th Avenue
Spokane, WA 99212
509-533-6910
(9 DBHR Beds; males only)

**Healing Lodge of the Seven Nations –
Cedar Program**
5600 E 8th Avenue
Spokane, WA 99212
509-533-6910
(9 DBHR Beds; males only)

SPOKANE COUNTY CONT.

Level I Facilities:

**Healing Lodge of the Seven Nations –
Pelpalwichiya Program**

5600 E 8th Avenue
Spokane, WA 99212
509-533-6910
(7 DBHR Beds; females only)

Level II Facilities:

Daybreak Youth Services-Spokane

628 S Cowley Street
Spokane, WA 99202
509-624-3227
for Admissions, call 888-454-5306 (26)
(17 DBHR Beds)

Excelsior Youth Center

Starting Point
3754 W Indian Trail Road
Spokane, WA 99208-4736
509-328-7041
(11 DBHR Beds; males only)

Recovery House Facilities:

Excelsior Youth Center

Turning Point
3754 W Indian Trail Road
Spokane, WA 99208-4736
509-328-7041
(11 DBHR Beds; males only)

THURSTON COUNTY

Youth Detox/Stabilization Facilities:

**Providence St. Peter
Chemical Dependency Center**

4800 College Street SE
Lacey, WA 98503
360-459-8811

Level II Facilities:

**Providence St. Peter
Chemical Dependency Center**

4800 College Street SE
Lacey, WA 98503
360-459-8811
(9 DBHR Beds)

WHATCOM COUNTY

Level II Facilities:

SEAMAR/Visions

1603 E Illinois
Bellingham, WA 98226
360-647-4266 (17 DBHR Beds; females only)

Recovery House Facilities

SEAMAR/Visions

1603 E Illinois
Bellingham, WA 98226
360-647-4266 (6 DBHR Beds, females only)

YAKIMA COUNTY

Youth Detox/Stabilization Facilities:

Two Rivers Landing

504 S 3rd Avenue
Yakima, WA 98902
509-469-3727

Level I Facilities:

Sundown M Ranch

2280 State Route 821
Yakima, WA 98901
509-457-0990 (14 DBHR Beds)

Recovery House Facilities:

Sundown M Ranch

2280 State Route 821
Yakima, WA 98901
509-457-0990 (2 DBHR Beds)

See further program description information in certified treatment listing.
For assistance with difficult-to-place youth, call:
Amy Martin, Youth Treatment System Manager
at (360) 725-3732.

**The Division of Behavioral Health and Recovery has youth treatment contracts
with the following providers**

Level I

Sundown (Yakima)	(509) 457-0990	14 beds	<i>(Males and Females)</i>
Healing Lodge of Seven Nations (Spokane)	(509) 533-6910	7 beds	<i>(Females only)</i>
Healing Lodge of Seven Nations (Spokane)	(509) 533-6910	18 beds	<i>(Males only)</i>

Level II

Providence St. Peter Hospital (Lacey)	(360) 459-8811	9 beds	<i>(Males and Females)</i>
Lakeside – Milam (Burien)	(206) 241-0890	8 beds	<i>(Males and Females)</i>
Daybreak of Vancouver	(360) 750-9588	14 beds	<i>(Males Only)</i>
Daybreak of Spokane	(509) 624-3227	17 beds	<i>(Males and Females)</i>
Sea Mar Visions (Bellingham)	(360) 647-4266	17 beds	<i>(Females Only)</i>
Ryther Child Center (Seattle)	(206) 525-5050	10 beds	<i>(Males only)</i>
Excelsior Youth Center (Spokane)	(509) 328-7041	11 beds	<i>(Males only)</i>
Sea Mar Renacer (Seattle)	(206) 766-6960	14 beds	<i>(Males only; priority minority youth King County)</i>

**** Recovery House***

Skagit Recovery Center (Mt. Vernon)	(360) 428-7835	17 beds	<i>(Males and Females)</i>
Sundown (Yakima)	(509) 457-0990	2 beds	<i>(Males and Females)</i>
Excelsior Youth Center (Spokane)	(509) 328-7041	11 beds	<i>(Males Only)</i>
Sea Mar Visions (Bellingham)	(360) 647-4266	6 beds	<i>(Females Only)</i>

****Recovery House level; open to all appropriate youth from Level I, Level II Inpatient programs.***

“Hey I’m going to really miss all of you. You all have brought me along way believe it or not I just want to thank you guys for having the heart to be willing to help teens out like us. No matter how much hell ive put you guys through ill always remember you all – and always have you staff in my heart and love you guys for being here for me and helping me out. I use to hate you guys so much until I stopped to think you guys taught me how to respect people, myself, & that I don’t need drugs to live through life. Thanks so much to all of you for putting your time to us love always.” Phil

-Written to a staff member by a recovery house graduate.

“Before I realized that I needed help I was living in a hotel using every day and did hardly go outside exepet to go sell drugs for one of my friends or to go pick up some drugs from the conection’s and to go shoplifting. While I was doing these thing’s I was acting like I enjoyed myself but deep down inside I was completely misrable and hated life. I was slowly climbing the scale of self-destruction and became verry sick. I wanted to die and so I tried to kill myself and I ended up in detox and the sent me here or they tried to anyways because when I found out what this place was relly like I packed up and left and hitchhiked to Wenatchee stayed at my grandma for a copule day’s then tried to hitch hike to California but I got drunk and turned myself in. I made an agreement to go to treatment if they did not send me to jail because I had like 6 or 7 probation violations and then I got an out standing warent for leaving the city wile on probation and leaving with a court date still standing and so I came here.”

“Today I fell like a million dollars I am happy to be alive and I look pretty good. I’m gaining wait. I can run more than half a city block without dieing and I have 5 or 6 days untill I’ll be completely clean of any drug whatsoever in my body. Im excited for life. I want to get out and go to school and graduate with my class, and become a respectull sitizan get a good job and be relly helpful to my family when they need me, and not running away from my problems. I fell like I can go back out to the real world without a huge head and not push the people who love me away. Since I’ve been here I’ve dropped my ego so far down that I don’t think that could ever pick it back up to where it was when I first got here. I’ve learned that there is life after drugs and I relly hope to stay sober when I get out.”

Sincirly: James

