



SAN LUIS OBISPO COUNTY

DEPARTMENT OF PLANNING AND BUILDING

Promoting the wise use of land - Helping to build great communities

January 28, 2016

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1360 New Wine Place
Templeton, CA 93465

Harvey Billig
P.O. Box 1414
Carmel, CA 93921-1414

SUBJECT: APPEAL OF HARVEY BILLIG
COUNTY FILE NUMBER: SUB2013-00052 / CO 14-0020
HEARING DATE: JANUARY 14, 2016

We have received your request on the above referenced matter. In accordance with County Real Property Division Ordinance Section 21.04.020, Land Use Ordinance Section 22.70.050, and the County Coastal Zone Land Use Ordinance 23.01.043, the matter will be scheduled for public hearing before the Board of Supervisors. A copy of the appeal is attached.

The public hearing will be held in the Board of Supervisors' Chambers, County Government Center, San Luis Obispo. As soon as we get a firm hearing date and the public notice goes out you will receive a copy of the notice.

Please feel free to telephone me at 781-5718 if you have any questions.

Sincerely,

Nicole Retana, Secretary
County Planning Department

CC: Holly Phipps, Project Manager
Karen Nall, Supervising Planner
Whitney McDonald, County Counsel

#912



INLAND APPEAL FORM

SAN LUIS OBISPO COUNTY DEPARTMENT OF PLANNING AND BUILDING
976 OSOS STREET • ROOM 200 • SAN LUIS OBISPO • CALIFORNIA 93408 • (805) 781-5600

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Please Note: An appeal should be filed by an aggrieved person or the applicant at each stage in the process if they are still unsatisfied by the last action.

PROJECT INFORMATION Name: BILLIG File Number: SUB 2013-00052

Type of permit being appealed: 00-2014-0020

- Plot Plan
- Site Plan
- Minor Use Permit
- Development Plan/Conditional Use Permit
- Variance
- Land Division
- Lot Line Adjustment
- Other: _____

- The decision was made by:
- Planning Director (Staff)
 - Building Official
 - Planning Department Hearing Officer
 - Subdivision Review Board
 - Planning Commission
 - Other _____

Date the application was acted on: January 14, 2016

- The decision is appealed to:
- Board of Construction Appeals
 - Board of Handicapped Access
 - Planning Commission
 - Board of Supervisors

BASIS FOR APPEAL

State the basis of the appeal. Clearly state the reasons for the appeal. In the case of a Construction Code Appeal, note specific code name and sections disputed). (Attach additional sheets if necessary)

SEE ATTACHED - BASIS FOR APPEAL + ATTACHMENTS

List any conditions that are being appealed and give reasons why you think it should be modified or removed.

Condition Number _____ Reason for appeal (attach additional sheets if necessary)

APPELLANT INFORMATION

Print name: E. MURRAY POWELL
 Address: 1610 TANAGER CT TEMPLETON CA 93465
 Phone Number (daytime): (805) 434-0707

We have completed this form accurately and declare all statements made here are true.

Signature: [Signature] Date: 1/28/2016

2016 JAN 28 PM 2:34
 SLO COUNTY
 PLANNING/BUILDING
 DEPT

OFFICE USE ONLY

Date Received: 1/28/16 By: [Signature]
 Amount Paid: \$ 850.00 Receipt No. (if applicable): 02152

**INLAND APPEAL FORM
BASIS FOR APPEAL**

PROJECT INFORMATION Name: Billig

File Number: SUB 2013-00052

CO 2014-0020

We are submitting this appeal to object to the approval of the Conditional Use Permit for the proposed Templeton 91 Bed Acute Care Psychiatric and 60 Bed Assisted Living facility approved by the SLO County Planning Commission on January 14, 2016. We are members of Concerned Citizens Preventing Unintended Consequences, a community group whose members include doctors, mental health professionals, bankers, CPA's, business owners and others residing in our community.

After considerable study of existing SLO County public and private mental health services and considering the project's operations as a proposed "Voluntary-At Will" facility, we have determined and it should be obvious to County Planning and The Board of Supervisors that a 91 bed Psychiatric Acute Care facility located in Templeton will not adequately serve the mental health care needs SLO County residents and will create a substantial number of negative environmental, social and economic impact issue in San Luis Obispo County. Based on available reliable data

We ask the Board to determine the type and size of Mental Care facility that would provide a reasonable level of care designed to provide mental health services SLO County residents and identify locations in the county where adequate support services and infrastructure exists to support the operation of an inpatient acute care facility. The Templeton location is not the place.

We have determined that a 15 – 20 bed Acute Care Inpatient Mental Care facility will meet the needs of SLO County residents for the foreseeable future. A 20 bed inpatient facility will provide services to more than 1,000 individuals a year. Reliable factual data indicates that less than 500 SLO County residents may need the proposed facility's services a year. The proposed 91 bed facility is designed to treat 4,750 patients a year to be fully utilized. Accordingly, 4,200 or more individuals a year (89% or more) will travel from areas outside of SLO County.

A substantial number of SLO County residents will not be offered services at the proposed facility. Medi-Cal insured adults (21-64 years of age) will not be treated at the facility. Adults comprise 60% of the County's population. Medi-Cal covers about 30% of SLO adults. The uninsured, including the uninsured homeless, will have to pay cash for treatment. Estimated daily costs are \$1,200 to \$1,600. Patients of all ages suffering from drug and alcohol addiction will not be treat at this facility.

The County Planning Department and the Planning Commission have failed to determine and identify a number of the substantial environmental, social and economic impacts that the operation of this facility will create in our County.

We ask the Board of Supervisors to reject the SLO Planning Commission's January 14, 2016 approval of this project's Conditional Use Permit. The basis for this appeal are presented in detail below:

- Failure to fairly consider the Templeton Area Advisory Group's (TAAG) comprehensive November final report.

- The SLO Planning Department's issuance of a Mitigated Negative Declaration is in violation of the California Environmental Quality Act (CEQA).
- The Conditional Use Permit approved by the Commission fails to restrict the operation of the project to the operational guidelines proposed by the applicants.
- The Planning Department and the Commission's failure to address the substantial negative financial and educational impacts the project will have on the Templeton School District (TUSD).
- The cumulative environmental effects that the proposed project and all future proposed projects may have on the area were not considered as required by State law.
- The project's 60 bed assisted living facility operational details were not reviewed by Planning and have not been adequately described in the record. This facility's impact on the environment and on the community has not been determined.
- The Planning Department and Commission's dismissal of the Templeton Community's opposition to the size and location of this project as expressed by the Templeton Area Advisory Group's (TAAG) rejection of this project by an unanimous 7 – 0 for the reasons presented in the TAAG report dated November 30, 2013.
- The Commission's failure to address the numerous deficiencies in the Planning Department's Initial Study and investigation of the project's effects on the environment.
- The Commission's failure to determine the appropriate size and location of the proposed project to efficiently serve the needs of all SLO County residents.
- The failure of the Planning Department, as the Lead Agency, to develop meaningful accurate information regarding the proposed operation of the project.
- The questionable legal guidance advice provided to the Commission by County's Legal Counsel during the Commission's December and January hearings cautioning the Commission to disregard the nature of the project's operation as a Psychiatric Acute Care facility.
- The County Counsel's instructions to the Commission during its December and January hearings that the Commission must consider the 91 bed Psychiatric facility to be a "typical medical facility".
- The SLO APCD's failure to issue its revised environmental review report and related documentation prior to the January 14, 2016 Commission hearing.
- The applicant's intentionally misleading publicity campaign designed to sway the public's opinion of the Psychiatric facility's effects on the community.
- The applicant's false and misleading representations made to the Planning Commission during the December and January hearings.
- The inaccurate and erroneous mitigations presented in the 105 page Mitigated Negative Declaration that is the basis for the approval of this project.
- Failure to address increased demands for SLO County public agency services that will be created as a result of this facility's operations.
- The 91 bed psychiatric acute care facility **will not** serve approximately one-half of SLO County's residents.

The basis and issues supporting this appeal are presented in detail below:

TAAG'S NOVEMBER 30, 2015 PROJECT REPORT

TAAG rejected this project in November 2014 with a unanimous 7 – 0 vote following an extensive public review of the project conducted over a period of several months. The final TAAG November 30, 2015 project report is attached as Exhibit 1 to this appeal notice and is incorporated by reference to this appeal. We agree with every issue discussed in this document. We object to the County Planning Department and the Planning Commission's obvious disregard for TAAG's opposition to locating this our community agrees with TAAG's opposition to this project.

FAILURE OF THE SLO COUNTY PLANNING DEPARTMENT TO COMPLY WITH CEQA

The SLO Planning Department, as the project's Lead Agency, has failed to comply with the California Environmental Quality Act (CEQA) law and guidelines. The approval of the Mitigated Negative Declaration (MND) on the basis of an Initial Study of this project rather than requiring the preparation of an EIR is a violation of CEQA.

CEQA sets forth guidelines for the conduct of an Initial Study. CEQA Section 15063 states in part "the Lead Agency shall conduct an initial study to determine if the project may have a significant effect on the environment." Subsection (a) (1) states that "All phases of project planning, implementation, and operation must be considered in the Initial Study of the project." Subsection (b) (1) states "If the agency determines that there is substantial evidence that any impact of the project, either individually or cumulatively, may cause a significant effect on the environment, regardless of whether the overall effect of the project is adverse or beneficial, the Lead Agency shall do one of the following:" The three options are essentially to prepare an EIR; use a previously prepared EIR; or determine pursuant to certain other existing EIR's or other environmental documentation which of the project's effects were adequately examined . . .

CEQA Section 15064. "Determining the Significance of the Environmental Effects Caused By A Project" states in (b) that "The determination of whether a project may have a significant effect on the environment calls for the careful judgement on the part of the public agency involved, based to the extent possible on scientific and factual data. Item (c) states that "The Lead Agency shall consider the views held by members of the public in all areas affected as expressed in the whole record before the agency." Item (f) states that "The decision as to whether a project may have one or more significant effects shall be based on substantial evidence in the record of the lead agency."

The Lead Agency concluded in Exhibit – A Findings Conditional Use Permit that "The establishment and subsequent operation or conduct of the use will not, . . . , be detrimental to the health, safety or welfare of the general public or persons residing or working in the neighborhood of use." The Planning Department did not base its conclusions and approval of the project on careful judgement or on scientific and factual data. We contacted the Project Planning Manager Holly Phipps and asked her to explain the nature of the detailed factual information that Planning reviewed that supports their conclusions and approval of the project. Ms. Phipp's response was "**Planning relied on the applicant's project description and did not perform any other reviews of the project's operations.**"

The project description presented in the MND that forms the basis for the Planning Department's Initial Study and its approval of the project. Taking the applicant's project description at face value does not comply with CEQA's requirements that "The determination of whether a project may have a significant effect on the environment calls for the careful judgement on the part of the public agency involved,

based to the extent possible on scientific and factual data.” For example the number of individuals that will be treated each year in the 91 bed facility is not disclosed in the project description or in Planning Department reports. There is no indication that this information was considered as part of Planning’s Initial Study. **The failure of SLO Planning to determine and provide this information to various responsible SLO County agencies involved in the review of this project has resulted in inaccurate determinations by responsible agencies regarding various environmental effects created by the project’s operations.**

THE APPROVED CONDITIONAL USE PERMIT DOES NOT RESTRICT THE FACILITY’S FUTURE OPERATIONS TO THE APPLICANT’S DESIGNATION AS A “VOLUNTARY FACILITY”.

The MND project description states that the facility will be licensed and operated as a facility that will only accept “voluntary patients”. A major concern to a large majority of Templeton area residents is the possible designation and licensing of the project as a LPS facility. The applicants have assured the community on many occasions that “The Hospital is not a forensic facility. A forensic facility treats criminals”. A LPS (Forensic) designated facility would allow for the treatment of legally committed individuals (5150, 5250 and others) held on involuntary legal holds. 5150, 5250 and other individuals are considered to “be a danger to themselves and/or to others”. This project can be designated and licensed to operate as both a voluntary and a LPS facility. A Public Record Request response from the SLO County Health Agency included documentation indicating that the applicants have engaged in discussions with the Agency to explore the possible designation the facility as an LPS operation “once the facility begins operations” (Exhibit 2).

The SLO County Health Agency/Behavioral Health Department submitted a report to the BOS regarding the Department’s current service delivery system at the BOS March 17, 2015 meeting. This report includes a 3 page report attachment (Exhibit 3) discussing the proposed Templeton psychiatric project. Certain comments from this report are quoted in the MND project description. The Agency report states in part “the operators could seek and obtain (from us) designation as a LPS receiving facility.

It is obvious that it will be financially beneficial to operate the facility as a dual Voluntary-LPS operation. This operation of this project as a LPS facility will substantially impact safety concerns in the area where the project is located.

PLANNING’S FAILURE TO DETERMINE THE IMPACT THAT OUT OF COUNTY PATIENTS WILL HAVE ON SLO COUNTY.

County Planning failed to identify and assess the impact that facility patients and other related individuals traveling from areas outside of SLO County to Templeton will have on our county. Reliable data and surveys do not exist that would support the number of SLO County residents in need of inpatient acute mental treatment. During the December 10th Commission hearing, SLO County Behavioral Health Department Administrator Anne Robin admitted that the SLO Health Agency and the BHD has failed to maintain accurate records regarding referrals of SLO County residents to acute mental care facilities. Ms. Robin stated in a meeting earlier this year that “there is some old survey around somewhere that we are trying to find”. She also stated that “I want this facility and I don’t care where it is or how big it is”. The SLO County Health Agency acknowledged in two Public Record Request responses (Exhibit 4) that they are unable to provide accurate data. However the October response

letter provide information for the prior four years indicating that an average of 227 individuals a year were referred to Acute Mental Care facilities as discussed below.

The SLO Tribune reported on October 11, 2015, as part of their four day series about this project, that a total of 714 individuals were transferred to inpatient acute care facilities outside of SLO County during 2014. (Exhibit 5). This data was provided to the Tribune by the California Statewide Health Planning and Development agency (OSHPD). The 714 number includes both "Voluntary" patients and "Involuntary" patients. Involuntary patients will not be treated by the Templeton Facility as presently proposed. The Tribune article says that "between 275 and 314 patients" were transferred from the SLO County 16 bed PHF Unit annually from 2012 to 2014. Using these numbers indicates that approximately 400 SLO County "voluntary" patients were treated at acute care mental facilities during 2014.

The OSHPD website describes this state agency "as the leader in collecting data and disseminating information about California's healthcare infrastructure. OSHPD promotes an equitably distributed healthcare workforce, and publishes valuable information about healthcare outcomes. OSHPD also monitors the construction, renovation, and seismic safety of hospitals and skilled nursing facilities." The OSHPD report appears to be the only reliable and accurate record of SLO County residents who have undergone inpatient acute mental care treatment.

As discussed above, to fully utilize the proposed 91 bed facility, about 4,700 patients a year will be admitted to the facility. Using the 2014 OSHPD data above indicates that about 4,200 individuals would be admitted to the proposed facility from areas outside of SLO County.

During the December 10th Planning Commission hearing, the applicant's presented two "surveys" claiming that either 50 beds per 100,000 of population or that 18 beds per 100,000 of population are needed in or County. The obvious contradiction between these two surveys raises the question as to whether either of these surveys represent the actual number of beds need in SLO County. Using the 18 bed/100,000 ratios indicates that a total 50 beds, not 140, would be needed in SLO County. The 50 bed number includes the County's 16 bed PHF Unit. Accordingly 34 beds private beds would be required in the proposed facility that would treat 1,773 "voluntary" patients a year. 1,200 more individuals than presently needed to serve SLO County residents. Obviously the applicants have failed to support their claims that a 91 bed facility is needed to "serve our community".

Other reliable factual data exists to support our position that approximately 400-500 SLO County residents a year require inpatient acute mental care. A California Hospital Association (CHA) report titled "Psychiatric Patient In Bed Data" presents several informative charts and data tables that identify available psych beds by California County. This report can be found on the CHA website at 'www.calhospital.org/PsychBedData'. This data supports our claim that the facility will draw a large number of patients from areas outside of SLO County. For example the CHA reports the following:

- The five neighboring counties Monterey, Santa Barbara, Kings, Kern and Fresno have a total population 2,935,000. The average acute psych bed count in these counties is 10 beds/100,000 of population for a total of 293 beds. Kings County has NO psych beds.
- SLO County will have a psych bed ratio of 38.55 beds /100,000 with the addition of the 91 bed proposed facility. (Includes the SLO PHF 16 bed unit).

- According to the CHA report's Psych Bed Distribution table, SLO County will have the HIGHEST resident to acute care bed ratio of any California County. More than 38.5 beds/100,000 of residents.
- Other interesting info in the CHA report discloses that 25 Calif. Counties have NO psych beds. 46 Calif counties have NO child/adolescent beds. 56 Calif. Counties have no "Gero" (over 64 years of age) patient psych beds.

Obviously these five neighboring counties and many other counties will be sending residents to the proposed Templeton facility for treatment.

NEGATIVE IMPACT ON THE TEMPLETON SCHOOL DISTRICT (TUSD): The Planning Department and the Commission have failed to consider the negative financial and educational services impact the proposed project will inflict on the District. The MND in Section 10. Public Services/Utilities (page 27 of 105) states that "The local school district (Templeton Unified School District-TUSD) will be responsible to educate the school age children at the facility. According to the District, depending on the needs of a particular student, these services can range from educational instruction to complex professional services such as nursing, physical therapy, speech and language therapy or intensive behavioral services." See TUSD Superintendent Koski's March 9, 2015 letter as (Exhibit 6) to the BOS. TUSD is obligated to commence services to the facility's school age patients on the first day that patients enter for treatment

The TUSD is possibly that most underfunded school district in SLO County. Approximately 2,500 students attend Templeton schools. The District receives about \$7,000 a year in funding per student. There is one district in our County that receives more than \$15,000 per student. The TUSD is legally obligated to provide both regular and special needs education services to every school age facility patient **from the first day that such patients are admitted to the facility.** The developers claim that one-half of the facility is designed to treat school age patients. This amounts to about 2,300 school age patients a year or 42 school age patients in the facility at any time. These numbers are based on the applicant's proposed operator representation in a letter (Exhibit 6) to TUSD Superintendent Joe Koski that claims that the estimated period inpatient treatment of patients is 5 to 8 days. We have used an average of 7 days to arrive at the 2,300 school age patient number.

99% or more of the facility's school age patients will come from areas outside of SLO County and from other SLO County districts. **TUSD WILL NOT BE REIMBURSED** for any costs associated with the special needs services provided to any facility school age patient who does not reside in the Templeton School District.

TUSD is presently under funded. Recently the District reduced its High School graduation class credit requirements from 285 credits to 250 credits in order to reduce classes and lower costs. Negotiations for salary and benefit increases with the Teachers Union are currently underway. Services provided to the proposed facility's school age students by the District will substantially reduce the quality of educational services available to TUSD resident students.

The Planning Department and the Commission have failed to consider the substantial negative impact that this project will have on the TUSD. Incredibly the MND states in Section 10 – Impacts that "In response to the District's written concerns, the applicant has stated that school age children at the facility will likely only spend short period of time at the facility (i.e. maximum of 14 days) and will not

attend local schools at that time (Schneider 2015). Schneider is the "CEO" of Vizion Health LLC, the applicants proposed operation of the proposed facility. These comments ignore the legal responsibilities of the TUSD related to the projects operations.

MND Section 10 in the caption Mitigation/Conclusion states that "School age children should not be at the hospital long enough to be place in TUSD schools. However, the proposed development on the site (the hospital and assisted living facility) will pay school fees per State Government Code 65995 et seq. and as set by TUSD. State Government Code 65996 provides "the exclusive methods of considering and mitigation impacts on school facilities." School fees addressed per Code Section 65995 are project development fees paid to school districts. **The use of developer fees is restricted to funding the development and construction of school facilities. These fees are not available for compensating school districts for regular educational services to students. See email from TUSD Business Officer Aaron Asplund (Exhibit 7) confirming the restriction of fees.**

Page 28 of 105 of the MND item "Mitigation/Conclusion" states "Regarding the cumulative effects, public facility (County) and school (State Government Code 65995 et seq.) fee programs have been adopted to address impact, and will reduce the cumulative impacts to less than significant levels. No additional project –specific mitigation measures are necessary." These comments as discussed above represent the applicant's attempt to avoid the significant impact the facility will have on TUSD by intentionally misleading the Commission on this issue. **The applicant's, during the December 10th commission hearing, intentionally misrepresented to the Commission that approximately \$87,000 in project development fees will be paid to the TUSD and that these fees may be used to pay for services provided to facility school age patients.** These claims were disputed by several speakers, including a former TUSD Board member, during the hearings public comment periods. This issue was also disputed in comment letters submitted to the Commission that are part of the record.

The negative impact on TUSD regarding its obligations to provide unreimbursed services is clearly unmitigated. This is the stuff that Attorney's live for! The Planning Department's acceptance of the applicant's claim that patients will not be in the facility long enough to attend school intentionally is misleading. The TUSD is responsible for providing services to school age patients at the facility. The fact that patients may not be able to physically attend TUSD school rooms does not relieve the District from it legal obligations to provide school age patient services.

FAILURE TO CONSIDER THE LACK OF MENTAL HEALTH CARE SUPPORT SERVICES IN THE AREA

The proposed mental facility will not provide out patient service to its patients. There are virtually no mental health support services operating in the Templeton area. The SLO North County area has a very limited amount of such services. 99% of effective mental health care involves out-patient services. Substantially all of SLO County's public and private out-patient and related support services are located south of the Cuesta Grade. SLO Planning failed to consider this issue during its review and approval process.

FAILURE TO ASSESS THAT COST OF THE FACILITY'S OPERATION PUBLIC SLO COUNTY'S AGENCIES

Planning has not assessed the impact that the proposed facility will have on SLO County's publically funded mental health care services including the County's 16 bed Psychiatric Health Facility (PHF Unit) located in San Luis Obispo. The PHF Unit is legally restricted to accepting no more than 16 patients at a time. The SLO Health Agency reports that PHF Unit houses an average of 15 inpatients at all times. The

applicant's acknowledge that voluntary "at will" patients have the legal right to leave the facility at any time. However, voluntary facility patients that are determined to be a danger to themselves and to others will be referred by the facility to the County. Accordingly, these patients will become the responsibility of the County Health Agency for further treatment at the County's unreimbursed expense. County treatment will involve inpatient care in the PHF Unit and referrals to group home care facilities located at various locations throughout California along with other taxpayer funded services.

THE PROPOSED FACILITY WILL NOT SERVE APPROXIMATELY HALF OF SLO COUNTY RESIDENTS.

Patient information presented in this appeal has assumed that the proposed facility's serves will be offered to all SLO County residents. This is not the case. Medi-Cal insured adults (21-64 years of age) will not be treated at the facility. Adults comprise 60% of the County's population. Medi-Cal covers about 30% of SLO adults. The uninsured, including the uninsured homeless, will have to pay cash for treatment. Estimated daily costs are \$1,200 to \$1,600. Patients of all ages suffering from drug and alcohol addiction will not be treat at this facility. We estimate that approximately 50% of the total number of SLO County's residents will not be eligible for treatment at the proposed Templeton facility.

THE COUNTY'S MISTAKEN ASSUMPTION THAT THE PROPOSED FACILITY SHOULD BE VIEWED AS A "TYPICAL MEDICAL FACILITY".

SLO County Counsel directed the Commission during the December and January hearings to consider the proposed facility to be a "typical medical facility". **The proposed Templeton facility is not a typical facility.** According to the applicant's, inpatient stays are limited to each patient's ability to pay for services to a maximum of 14 days. The SLO County's four "typical medical facilities" do not limit treatment periods for their patients. SLO County Hospitals accept all patients for care regardless of the ability to pay. The proposed Templeton facility will not accept the uninsured, the indigent or Medi-Cal insured adult patients".

Several Responsible County agencies involved in the assessment of various issues in connection County Planning's Initial Study of the project, mistakenly used "typical medical facility" data and assumptions in their review process. This has resulted in erroneous conclusions regarding the significance of environmental and other relevant impact issues associated with the project. For example the SLO County Air Pollution Control District's (APCD) 2014 Air Quality & GHG Impact Analysis, which applied the "typical medical facility" assumptions, produced erroneous emission and GHG production results. This resulted in the APCD's decision to conduct a second analysis of the project. Other agencies analyses such as the project's traffic reports may be in error and should be reviewed prior to approving this project.

APPROVAL OF THE PROJECT HEIGHT VARIANCE AND DISREGARD FOR THE TEMPLETON DESIGN PLAN

The project was approved by Planning with a height variance. The property's land use category standards require an average height of 35 feet. The "average" height of the hospital building is 44 feet. Certain areas of the building are up to 50 feet high above grade. Planning record Attachment 1 Exhibit – A/Findings states that "The height modification to allow a 44 foot structure is justified because 44 feet will not exceed the lifesaving equipment of the Templeton Fire Department and the height will not result in substantial detrimental effects on the enjoyment and use of adjoining properties."

Three comments:

- As more discussed below, the Templeton Fire Department has not commented in writing or otherwise that they have determined whether the Department has the ability to “exceed lifesaving operations” on the projects two proposed facilities.
- The hospital building east side walls are literally only several feet from adjacent existing professional office buildings. The hospital will tower over these office buildings and literally cast a large shadow on these adjoining buildings for a large part of the day.
- Planning used the argument that Twin Cities Hospital’s height is 55 feet to justify the project’s height variance. Existing height variances on structures build many years ago do not justify the approval of a variance on a currently proposed project.

The height of this project is substantially detrimental to the adjoining properties.

SLO APCD’S REVISED POLLUTION ASSESSMENTS: The SLO Air Pollution Control District (APCD) agreed that their Air Quality and GHG Analysis and findings set forth in the APCD’s January 28, 2015 letter to SLO Planning was in error and required revision.

We contacted the APCD Air Quality Specialist Andy Mutziger in early December and inquired as to the data used to perform the APCD’s original assessments. Mr. Mutziger indicated that the original assessment assumed that the proposed Psychiatric facility was a “typical medical facility” that assumed that all patients were local residents with short commute distances. Mr. Mutziger was advised that it appeared that a substantial majority of the project’s patients would be traveling from areas outside of SLO County. The APCD agreed that obvious out of county travel was not considered in the APCD’s original assessments of the project. A revised assessment was conducted by the APCD during December 2015 and January 2016 to account for a certain amount of out of county travel in their calculations. However the APCD did not issue a comprehensive revised assessment report by the January 14, 2016 Planning Commission hearing date. The revised findings were communicated to the Planning Department in an email (Exhibit 8) sent at 4:16 PM on January 13, 2016. This existence of this email was mentioned by the Project Manager Holly Phipp’s during the Commission’s January 14th hearing but the details were not disclosed. This email and related documents were not made available as part of the record to the public until sometime after January 14th. **The failure of the APCD to issue a revised comprehensive report in a timely manner prevented the Commission and the public from performing detailed reviews of the APCD’s revised assessments of the project prior to the Commission’s approval of the project’s Conditional Use Permit on January 14th.** Certain information such as the January 13th email and several Excel worksheets related to the revised review are now available as public records on Planning’s website. However preliminary reviews of this information indicates errors in the assumptions that formed the basis for the APCD’s revised assessments.

The MND indicates on page 12 of 105 in Table 1: Air Quality Significance Thresholds Evaluation- Operation that Greenhouse Gases (GHG) exceed the project’s annual threshold tonnage of 1,150 by 1,016 tons (88%) which is potentially significant. The MND indicates in Exhibit B – Mitigation Summary Table AQ-3 Commuting (Page 42 of 105) a single mitigation factor that states “The applicant shall work with SLO Regional Rideshare to implement and Employee Trip Reduction Plan.” This information was based on APCD’s 2014 assessment reported on January 28, 2015. Obviously out of county travel associated with facility patients and other travel related issues will not be mitigated by an employee ride share program. In our opinion an accurate revised APCD assessment will significantly increase the project’s GHG tonnage production and will require, at a minimum, additional acceptable mitigation

factors or lead to the possible conclusion that GHG production is a significant environmental factor requiring and EIR in accordance with CEQA.

APPLICANT'S PROJECT DESCRIPTION AND OPERATIONAL DESIGN DOES NOT CORROLATE WITH THE DEMOGRAPHICS OF SLO COUNTY

The MND Expanded Project Description Hospital-Behavioral Health states that the Hospital is designed to provide the following four independent units to house for patient age groups as follows:

1. 21 bed children's unit (Ages 6 to 12)
2. 21 bed adolescent unit (ages 13 to 18)
3. 20 bed gero-psychiatric unit adults (Ages 65 and up)
4. 21 bed acute adults (Ages 19 to 64)
5. Plus 8 "swing beds" that may be used as required by each group

This represents essentially an equal 25% split of the facilities services and physical design between the four patient age groups indicated above. Current US census information indicates that SLO County's population is comprised of the following: ages 6 to 18 (combined) 18.1%; ages 19 to 64 59.6%; and, adults 65 and older 17.5%. Obviously dedicating 50% of the facility to 6 to 18 years of age to serve 18% of the population and only dedicating 25% of the facility to serve 59% of the adult population does not provide adequate services to SLO County's largest adult population group. Obviously this proposed operational plan is doomed to fail. 6 to 12 year old patients are rare. Most similar psychiatric acute care facilities do not accept patients under 12 years old as there is very little demand for services in that age group. The point being that the applicant's project description fails to accurately present a viable truthful description of the project's proposed operations.

NEGATIVE IMPACT ON SLO COUNTY SHERIFF'S OFFICE: The applicants have made numerous representations to the community and to the Planning Department and the Planning Commission claiming that various law enforcement and fire agencies have "Approved this project." The Planning Department Project report in Attachment 1 – Exhibit-A/Findings Conditional Use permit states that "According to the County Sheriff's Office, the City of Santa Barbara Police Chief and operators of other similar facilities the proposed hospital will not pose a security threat to the community. The MND states on page 27 of 105 under Impacts that "the Sheriff's office has determined that the facility will not increase Sheriff Office calls for service beyond the normal cumulative increase in service needs of all development projects." This comment directly contradicts the Sheriff's June 10, 2015 letter (Exhibit 9) that clearly states in its concluding sentence that "When the construction phase of the project is complete, the added population will create added demand for Sheriff's Office services as well, with a continued increase in calls for service." The project's negative impact on Sheriff Office staffing and service creates a significant negative impact that requires mitigation. No required mitigations are indicated in the MND and Conditional Use Permit documents to address this issue.

Sheriff Parkinson' office disclosed that approximately 100 service calls during 2014 and 2015 have been answered during the past two years for Twin Cities Hospital which is similar in size to the proposed facility. Obviously a significant number of Sheriff service calls will be generated from the operation of the proposed facility.

The Planning Department record also includes three letters written by the Paso Robles, the Atascadero and the Morro Bay Police Chiefs to the Planning Department (Exhibit 10). Each of these letters are very similar in wording. Atascadero Chief Jerel Haley indicated that the three Chief's collaborated on their letters. These letters do not indicate the approval of the 91 bed Templeton facility by these law enforcement agencies.

TEMPLETON FIRE DEPARTMENT APPROVAL AND SERVICE LIMITATIONS: The applicants have represented to the Commission that the Templeton Fire Department "has approved the project". The MND, Section 10. PUBLIC SERVICES/UTILITIES states that "The Templeton Fire Department has reviewed the project and did not have concerns regarding the height of the the building and is recommending that the structure be equipped with fire sprinklers and that exterior stairways be provided." SLO County Planner Holly Phipps, the project manager, indicated during the hearing that the Fire Department "approved "this project in an October 17, 2014 letter (Exhibit 11). The letter only addresses four items "that will be required for the lot split". There are no comments regarding any approvals or recommendations for sprinklers and stairways or any other fire safety issues.

Current Templeton Fire Chief, Bill White, states in an email (Exhibit 15) dated January 14, 2016 that "the attached document (the October 17, 2014 letter) is the only correspondence from the Templeton Fire Department which gives very basic requirements. Once a full set of plans is received/submitted to the Templeton Fire Department . . . , we will review the plans for adherence to the Fire Code."

Templeton's Fire Department is a volunteer department with a very limited amount of equipment. There is some question whether available equipment is able to properly access the project's two facilities due to the extended height of the Psychiatric facility and the fact that the east side of the Psychiatric facility and three sides of the Assisted Living facility do not provide access to the Department's fire engines.

FAILURE TO DISCLOSE AND PERFORM A REVIEW OF PROPOSED 60 BED ASSISTED LIVING FACILITY'S OPERATIONS AS PART PLANNING'S INITIAL REVIEW

The MND and other project SLO Planning records do not indicate any details of the proposed Assisted Living facility's operations. We have questions that should have been addressed during Planning's Initial Review of the project. For example:

- Is the Assisted Living project a short term (14 days or less) or long term treatment facility?
- What insurance programs will be accepted?
- What patient support services such as transportation, medical care, and meals, therapy will be offered to occupants?
- Will qualified medical personnel be onsite 24 hours a day?
- What levels of staffing will be employed by the facility.
- What are the facilities estimated daily rates?

FAILURE TO CONSIDER THE NEEDS OF THE COMMUNITY

Please refer to the Templeton Area Advisory Group's (TAAG) November 30, 2015 report (Exhibit 1) submitted to the SLO Planning Department and the Planning Commission. This report presents many issues that support TAAG's unanimous rejection of this project on a 7 -0 vote. Many of the issues

presented report are issues that also support our objections regarding the approval of this project as it is currently proposed. The record clearly indicates that the Planning Department, as the Lead Agency responsible for determining the bases for approving the project's Conditional Use Permit (CUP) and the Planning Commission virtually ignored the issues presented in the TAAG report. We have incorporated TAAG's November 30, 2015 report in this appeal and ask that each issue be addressed during the Board's appeal process.

PROJECT APPLICANT'S LOSS OF CREDABILITY IN THE COMMUNITY

The project's applicants, Harvey and Melanie Billig and their agents, have conducted a misleading and dishonest publicity campaign for more than a year to convince SLO County residents and the County's Agencies that there "is a great need for this project in our community". The Billigs distributed a mailer (Exhibit 11) in March of 2015 to Templeton area residents that presented various false and misleading statements. These claims were also repeated by the applicants in various community meetings, a SLO Tribune opinion piece written by Melanie Billig. Certain questionable applicant claims and representations concerning the proposed operation of the facility are in the project's Planning Department record and were repeated during the Planning Commission's December and January hearings on this matter. Misleading and false statements presented in the mailer include the following:

- "When a patient is discharged, they **MUST** be returned to their place of residence of origin . . ." This is **false!** Individuals treated in this facility have no legal obligations whatsoever to return to their residence of origin.
- This is a secure facility? After encountering community opposition to his project, the applicant's modified their claims that this would be "a locked facility" to "this is an 'At Will' facility" to "this is a secure facility". The project is currently proposed to be operated as a "Voluntary Patient Facility". **Voluntary patients are free to leave at any time day or night. This is NOT a secure facility.**
- "The hospital will not adversely impact the Templeton Unified School District (TUSD) budget. The CEO of Vizion Health has offered to enter into contract with the TUSD to cover the cost of students who reside outside of TUSD". This is a false and misleading statement. The offer was made by Vizion Health CEO Mark Schneider in his April 27, 2015 letter (Exhibit 12) to TUSD Superintendent Joe Koski that states "that Vizion Health would pay for the cost of educating students who stay over 14 days in our proposed facility and are residents outside of TUSD." The letter goes on to say "The maximum stay at our crisis center is 14 days." Obviously not an offer to pay for TUSD services. Vizion Health LLC was incorporated in 2011, is a shell company that has never conducted operations of any kind. This corporation is not registered to operate in California.
- "The project is located in Templeton in the area designated as the regional medical center by the Templeton Community Design Plan **not in a residential area.**" This is a misleading statement. This project shares its rear property line with a 41 unit housing development currently under construction. Hundreds of homes are within very short walking distances (less than 5 – 10 minutes) of this project's location.
- "According to the California Hospital Association (CHA) Study, a county should have a minimum of 50 psychiatric beds per 100,000 of population. This means that our county should have a minimum of 136 beds". Based on recent US Census data our County would need 140 beds to satisfy this claim. This claim is based on a single "survey" promoted by the CHA which is a "trade

association" representing the "special interests" of its members". The SLO Tribune, an ardent supporter of this project, in their four day series of articles regarding this project reported that they were unable to substantiate the reasonableness of the CHA claim with any other sources. The applicant then contradicted their 50/100,000 claim during the December Commission hearing by presenting a second "survey" saying that 18 beds per 100,000 of population are needed in our County. This would result in the need for 50 SLO County beds rather than 140.

- "Last year, the County's Behavioral Health Department referred 350 patients for treatment to facilities outside of our county; this number does not include patients referred by private professionals." This number was disclosed in a SLO County Behavioral Health Department (SLO BHD) report (Exhibit 3) presented to the Board of Supervisors in March 2015. The March report and the SLO BHD's inaccurate and unreliable records are discussed in detail below. The point here is that the Billig's failed to disclose that essentially all of SLO BHD's patients are "involuntary" and in many cases "legally committed" individuals who would not be eligible for treatment in the Templeton facility as it is presently proposed. This 350 patient number was mentioned in several SLO Tribune opinion pieces written by Melanie Billig, by the Tribune and by other supporters of the project without disclosing the fact that BHD patients will not be admitted to the proposed facility.
- "Obtaining treatment outside our county creates a huge burden on our residents and their families." The applicant and many project supporters claim that a local facility is needed to provide family members and friends with ability to provide support for patients in a local facility and avoid costly and time consuming travel to distant treatment facilities. A review of policies of similar acute care mental facilities in California indicates that visitation hours are very limited. **In many cases visitation is limited to one hour a day and that visitation is discouraged during the inpatient treatment period. Vizion Health LLC CEO Mark Schneider, the applicants' proposed facility operator, in a letter to the SLO Air Pollution Control District (APCD) (Exhibit 16) in an attempt to minimize the effects that vehicle emissions and Green House Gases (GHG) generated by the facility's operations will have on the environment stated "Visitors are not encouraged due to the intensive care and need for stabilization".**

OTHER APPLICANT'S FALSE AND MISLEADING REPRESENTATIONS

The applicants have made numerous representations to the community and to the Planning Department and the Planning Commission claiming that various law enforcement and fire agencies have "Approved this project." The Planning Department Project report in Attachment 1 – Exhibit-A/Findings Conditional Use permit states that "According to the County Sheriff's Office, the City of Santa Barbara Police Chief and operators of other similar facilities the proposed hospital will not pose a security threat to the community." Letters from the SLO County Sheriff and the Santa Barbara Police chief are enclosed in the project record and are attached as Exhibit 8. The SLO Sheriff letter does not address "security threats". In fact the Sheriff letter addresses the serious understaffing of the Sheriffs' North County operation. An issue that the County has ignored for many years.

The Santa Barbara Police Chief letter (Exhibit 13) which states "My experience in Santa Barbara indicates that in fact there are no exacerbated threats to the public in neighborhoods around these facilities that provide mental health care". This letter is offered as part of the applicants effort to support their claims that the proposed facility will not pose a "security threat" that that public has raised as an important

issue concerning this project. The Santa Barbara Police Chief's opinion is not relevant to this matter. There is no comparison between Santa Barbara's experience with its fully staffed police department and the existence of a significant number of mental health outpatient and other mental health related support services to the Templeton's total absence of such services. It should be noted that many of Santa Barbara's mentally ill are referred to a Ventura inpatient acute care facility for treatment.

ABSENCE OF RELIABLE DATA TO SUPPORT THE NEED FOR A 91 BED FACILITY

Apparently **NO** reliable surveys or other data exists that accurately discloses SLO County's needs for an acute care mental facility designed to serve primarily SLO County residents. During the December 10th Commission hearing, the SLO County Behavioral Health Department Administrator Anne Robin disclosed that the Department has failed to maintain accurate records regarding referrals of SLO County residents to Acute Care Mental facilities. Ms. Robin stated in a meeting earlier this year that "there is some old survey around somewhere that we are trying to find". She also stated that "I want this facility and I don't care where it is or how big it is".

The SLO County Health Agency/Behavioral Health Department submitted a report (Exhibit 3) to the BOS regarding the Department's current service delivery system at the BOS March 17, 2015 meeting. This report included a 3 page report attachment (Exhibit 3) discussing the proposed Templeton psychiatric project. Certain comments made in this report are incorporated in the project's Planning Department reports and in the Mitigate Negative Declaration approved by the Commission on January 14, 2016. One comment in this report states "The SLO BHD has transported over 350 individuals a year to psychiatric hospitals in other areas" The report broke down this number into 51 minors, 161 adults, and 25 older adults for a total of 237 rather than the 350 individuals.

The SLO County Health Department acknowledged in two Public Record Requests responses (Exhibit 4) that they are unable to provide accurate data regarding referrals to acute care mental facilities with responses such as "There is no document that provides this information . . ." and "This information is not collected in a fashion that is available . . ." and other similar comments. . However the October 21, 2015 Health Agency response letter presented the following information was for the prior four years as noted below indicating an average of 227 individuals a year were referred to Acute Mental Care facilities by the Agency.

- FY 2014-2015 ended June 30. 147 Adults 86 Youths Total 233
- FY 2013-2014 ended June 30. 156 Adults 81 Youths Total 237
- FY 2012-2013 ended June 30 136 Adults 82 Youths Total 218
- FY 2011-2012 ended June 30 144 Adults 82 Youths Total 226

Obviously this data indicates a considerably lower number of patients referred by the SLO Health Agency than the SLO Health Agency's 350 patient referral number included in the BOS report. Please note that substantially all SLO County Health Agency patients are involuntarily committed individuals requiring mental care services provided by the SLO Health Agency and therefore **are not be eligible for admission to the proposed voluntary "at will" facility.**

The SLO Tribune reported in its October four article series on this issue that 714 patients were transferred during 2014 to acute care facilities in other counties. This information was provided by the

California Office of Statewide Health Planning and Development (OSHPD) at the Tribune's request. This number includes both SLO County voluntary patients that may be eligible for treatment at the proposed facility and SLO County involuntary patients that would remain in the care of the County Public Health Agency. After reducing the 714 number by either 233 or 350 involuntary acute care patients not eligible for treatment at the Templeton facility indicates that approximately 365 to 480 SLO County resident voluntary patients may have been admitted to the proposed Templeton Acute Care facility during 2014.

PROJECT WILL EXCLUDE 50% OF SLO COUNTY RESIDENTS FROM TREATMENT.

An estimated 50,000 SLO adults (21 to 64 yrs) are covered by Medi-Cal health insurance plans and **will not be eligible for services by the proposed facility.** That's the law! Adults comprise 60% of our County's population. The uninsured and homeless will not be admitted unless they pay cash. Individuals of all ages suffering alcohol and drug addiction will not be treated by this facility. Involuntary legally committed mental patients will not be admitted. They will remain, along with adult Medi-Cal patients, the responsibility of the SLO County Health Agency. **A well know mental care expert in the area says that "this facility will not treat 85% of the county's residents that need these services the most".** We estimate that only about 50% of SLO County residents will be eligible for treatment at this facility as presently proposed.

Summary

We request that the SLO County Board of Supervisors to reject the Planning Commission's approval of the Billig project based on the issues presented in this appeal.

By



E. Murray Powell, for

Concerned Citizens Preventing Unintended Consequences

January 28, 2016

EXHIBIT 1

Templeton Area Advisory Group
Templeton, CA 93465

November 30, 2015

San Luis Obispo County Planning Commission
County Government Center
San Luis Obispo, CA. 93408

RE: SUB2013-00052 CO14-0020 Billig

Subdivide a 4.89 acre parcel into 3.43 and 1.46 acre parcels at 1155 Las Tablas Road, Templeton, Calif. and a conditional use permit for the construction of a Psychiatric/ Behavioral Health hospital, and a separate Memory Care assisted living facility on each parcel, respectively.

Honorable Planning Commission:

The Templeton Area Advisory Group (TAAG) convened several meetings from August to November 2014, to address the proposed Psychiatric Hospital and Memory Care facilities. We heard from hundreds of concerned Templeton citizens, including many professionals in the medical fields. We have discussed this facility with members of Law Enforcement, Fire Departments, and Mental Health Professionals, other Mental Health facility operators, and San Luis Obispo County mental health employees. We have looked at this project from many angles and aspects and came to the following recommendation, and have outlined our concerns below:

Recommendation: *TAAG voted 7-0 to not support this project at this location.* We recommend the Planning Commission DENY the CUP for the many reasons why this is not the proper or needed facility in the proposed size, location and service level. Our concerns are detailed below:

Community Vision: TAAG has heard and analyzed community concerns about this project. We as a community recognize the need for additional levels of mental health services throughout the county. We have embraced more properly sized and focused facilities in the past, and new proposals that have recently been pre-referral reviewed. Templeton strongly believes that a more focused, properly sized facility with significantly more land, servicing seniors only, would be a better fit for the community, the mental health support services in Templeton, and the existing level of medical support in the community.

The Medical Community in Templeton came out in large numbers with a unified voice: This is not the type, size or location of a proper Mental Health facility for the County. Their reasons were many, but a few salient points were: Not designed with evidence based medical data (no professional survey or data was collected); the Community lacks social support services to support the hospital; the site is woefully inadequate to support a proper treatment program; the facility will not be supported by the infrastructure and supporting services of Templeton; the facilities will over-whelm the already existing shortage of medical professionals that Twin Cities Hospital and the North County suffer from today.

In reviewing similar service facilities located elsewhere in California, this facility is grossly negligent in land area size and design. Mental health treatment and Memory Care treatment both prescribe to large secure outdoor areas with landscaped grounds. Professionals at every level, and every other facility steadfastly stated this was a significant requirement for proper treatment. Neither of these facilities provides adequate grounds, and the Psychiatric hospital offers none.

This over-sized "catch-all" facility is NOT properly designed to serve the mental health needs of the entire county, is NOT properly placed, nor will it remain at a level of service proposed by the developer, as economics will dictate significant change to attain profitability, at the expense of the mentally ill, their families, and the Templeton community.

County demographics: The scope of this facility does not match the demographics or needs of the community or county. San Luis Obispo's Youth population (those under 18 years of age) is 18.3% (2010 census data), yet this hospital will have 50% of 91 beds for Youth. SLO County mental health personnel estimate the County needs an additional 3 youth beds, the establishment of that unit will

greatly lower the already sub-capacity load on the current PHF Unit, thus freeing up the additional County needed beds for local referrals.

This proposed project will immediately cause significant relocation of Youth patients from outside the area. Besides not having out-patient services for these children, Templeton does not have family services for housing the families who will come with these relocations. Templeton lacks a hotel or other housing options, and no out-patient services for complete families. Furthermore, the economic impact to the small Templeton Unified School District will be significant and negative.

The Senior (over 65 years of age) demographic is 16.9% of the population. A much smaller co-services facility serving Memory Care and the Mental health needs of Seniors, would be appropriate in this area, as previously approved.

The largest demographic is the county's adult population at 64.8%, a number that this facility may more deeply serve, but a group that the community has no out-patient services to support. This population also would make up a majority of the Involuntary Psych holds, a population better served in a larger city with a full complement of services to meet their needs.

Drainage and topography concerns: This project needs to conform to the Templeton Community Design Plan. The developers need to design the project to fit the terrain of the original property which is a gentle slope from Las Tables southerly to the housing project being developed to the south. This would be in conformance with the neighboring projects to the east and west of the property. The current plan uses extensive retaining walls which TAAG has serious concerns over considering the applicant's plans to build retention/detention structures in riparian habitat, and the high water table in this area.

TAAG has serious concerns on: The nature of the lower property being used for flood control; the lack of engineering solutions to determine if proposed wall foundations will be imbedded in structurally sound bedrock; the high water levels of the 1995 March floods which, with the proposed retaining walls, will flood the low-lying houses to the west and south; the building of such structures and the buildings they will support in seismically unstable soils. We are also concerned that the retaining walls will further channelize Toad Creek increasing the speed and flow causing flooding in downstream Templeton and specifically at the Main Street culverts.

The upstream Templeton-Bethel Park flood basin is dangerously over-subscribed to in terms of flood control, and this project will further exacerbate that dangerous condition. In addition, Bethel Park's flood basin has a direct drainage pipe into this property.

TAAG enters into the record this warning of recognized hazardous existing conditions and improper recognition of future damage potential by the Developer, Land-Owner, the County Planning Department, and Templeton Community Service District (all legally responsible for these issues).

This project also needs to conform to the Templeton Community Design Plan, the California Dept of Fish and Wildlife regulations, and the U.S. Dept of Fish and Wildlife, through the protection of the Toad Creek watershed (a recognized Blue-line stream and tributary to the Salinas River). In the recent Toad Creek Drainage Update performed by the Public Works Department of San Luis County (conducted by Paavo Ogren, and David Flynn) and the Templeton Area Advisory Group (TAAG) Toad Creek Ad Hoc Committee, this property was proposed as one of several designated water retention areas with a series of retention ponds to slow flow rates. This storm-water drainage and retention matter should be taken into consideration along with current law that requires that no project can create additional storm water load to Toad Creek storm volumes, and all additional drainage must be retained on the property.

Traffic: TAAG believes the Traffic studies used to define this project are grossly understated and do not address the increased regional and multi-region traffic traveling great distances to utilize this facility. Also the increased large truck traffic, the lack of existing queuing for delivery trucks, and the peak hour traffic congestion in an Emergency vehicle critical zone, considering the location of Twin Cities hospital, will severely impact traffic, traffic safety, and pedestrian safety in this corridor. The estimates of westerly traffic flow will push commercial traffic into residential streets with a high population of children. The small private road that will serve the large housing development south of this project

will not be large enough to serve all the houses, the Psychiatric Hospital, and the "land-locked" Memory Care facility of which there is no guarantee of it being built.

Furthermore, the County did not use the State law SB743 (Steinberg, 2013) required standard for Environmental Impact Analysis. For this referral, the County's environmental review of transportation impacts focuses only on the delay that vehicles experience at intersections and on roadway segments. That delay is measured using a metric known as "level of severity," or LOS. The Templeton interchange at 101 & Las Tablas Road is now designated a LOS II per the County's new Resource Management System (RMS) Guidelines. Mitigation for increased delay and traffic load does not exist, nor does it address the increase auto use and emissions and greenhouse gases.

The Planning Department is claiming a Negative Declaration on Environmental Impacts, when in reality, given the Applicant's statements that this facility will serve persons statewide. The new "Miles driven" standard, greenhouse gas production, and other new environmental requirements of CEQA have not been addressed. The over-sized and far-reaching targeted patient pool, and the Negative Declaration ruling, encourages excessive use of transportation from not only the County area, but as the applicant states, from a state-wide draw. Several more appropriately sized, and more regional facilities would reduce this need for extensive temporary relocation, and reduce greenhouse emissions, as SB743 requires.

Under SB 743, the focus of transportation analysis shifts from driver delay to reduction of greenhouse gas emissions, creation of multimodal networks and promotion of a mix of land uses. None of these required elements have been studied nor quantified. Therefore the CEQA required elements of the Transportation study have not been conducted, the Environmental review is incomplete and not minimal, and TAAG requests the Planning Commission require a full State-wide traffic miles driven assessment per State law (SB743) in a complete Environmental Impact Report.

Parking: The Memory Care facility has no parking space, NO emergency vehicle dedicated access space, and NO truck delivery space. This will require trucks to park in the middle of the drive zones of the closest parking area. This will create a major hazard to Emergency vehicle access, and a non-workable parking design, much worse than the County Planning Department's failed design at the Trader Joe's parking lot in west Templeton. Only this failure will do more than delay grocery shopping, it will cost lives when emergency vehicles and personnel can't access the Memory Care facility.

Furthermore, the Hospital project delivery area is inaccessible to typical delivery trucks that serve this area. The Developer's reassurance of small delivery vehicles is not accurate, nor controllable by that party. Much as the same failed promises at the Trader Joe's complex.

Neither facility has public or visitor / guest parking of adequate numbers for family visits to the 50% youth population. Templeton does not need additional design failures.

Public Safety: After investigating the size and scope of this facility, TAAG members have contacted facility operators, State Mental Health professionals, and County officials from similar facilities around the state. We have also contacted law enforcement personnel here locally and in other counties that house this type of facility. From this group of professionals, TAAG has discovered that this large multi-age group facility is not properly designed, not properly weighted to the populations needs, and will not be economically viable as presented by the developer. The economic realities of this facility, as presented by these numerous professionals, will require this facility to house California Welfare and Institutions Code 5150 (3 day), 5250 (14-day), and 5270 (30 day) Psychiatric holds. These individuals will represent a high profit to the Hospital, with no out-patient services for these patients upon release into the community. The County of San Luis Obispo operated a facility such as this in a more appropriate location where out-patient services do exist. The County closed this facility for lack of economic viability.

Applicant states Templeton Fire Department Chief has reviewed and signed off on this project. This is a blatant untruth. First off, there is no current Fire Chief, secondly, the Interim Chief has seen no final plans on this project. Furthermore, the Fire Dept. does not have adequate equipment to deal with a building of this magnitude. There is also not adequate room to evacuate the rear land-locked facility, as 3 sides have no possible vehicle access, nor emergency escape routes, due to well above grade design.

Templeton Area Advisory Group

Page 2

Zoning: Twin Cities Hospital and the closed SLO County Mental Health Hospital are zoned Public Facility. Templeton believes this property is not properly zoned for a large Hospital. This multi-use property also once included the area to the south, now being developed as housing. The land in this application is zoned Office/Professional, yet less than 2 acres will be developed as such. The Planning Department has ignored the Communities vision of proper development, by allowing "Discretionary" development on this property. A right neither embraced by Templeton nor proper planning.

Economic impact: Templeton Unified School District is still studying the large negative fiscal impacts this facility, as proposed, will have on the school district and community. TAAG and the community do not support these legal obligations that have significant negative fiscal impacts to Templeton schools, without developer mitigation. A topic the developer specifically stated they will not contribute mitigating funds to cover, then later suggested they may assist, but offer no enforceable or bonded mitigation.

State law: State regulations require the Planning process, and therefore the Planning Commission MUST consider and address ALL of the following:

1. Community Impact and Compatibility in the community and surrounding neighborhoods.
2. Environmental Impact under CEQA guidelines, including SB743 (not followed)
3. Community Health and Public safety in that the project and its use will not be detrimental to the health, safety, or welfare of the general public, or detrimental or injurious to nearby properties and neighborhoods.
4. Use will not generate a volume of traffic beyond the safe capacity of all current roads providing access to the project.
5. A balance of all testimony.

Given these concerns, TAAG respectfully requests the Planning Commission to deny the Conditional Use Permit to the Applicant as this project is significantly improper on this site for many technical reasons.

Respectfully submitted,

David C. La Rue, Ph.D.
Chairman
Templeton Area Advisory Group

cc: Board of Supervisors
TUSD, TCSD
TAAG Board Members

EXHIBIT 2

Fw: PRA from Mr. Powell
Laura Zarate to: Jeff Hamm

06/12/2015 09:22 AM

History: This message has been forwarded.

From: Anne Robin/MHS/COSLO
To: Msvizionhealth
Cc: Harvey Billig , Jan Hochhauser
Date: 11/10/2014 11:27 AM
Subject: Re: Health Agency Contact Form (response #795)

Yes, this is the misinformation that gets around if things are not clear. One of the biggest concerns is the "transport back to county of origin" so that people from other counties aren't "just released to the street". You may want to discuss how you have handled those aspects elsewhere.

Anne Robin, LMFT
Behavioral Health Administrator
SLO County Health Agency/Behavioral Health
805-781-4719

"I think the purpose of life is to be useful, to be responsible, to be honorable, to be compassionate. It is, after all, to matter: to count, to stand for something, to have made some difference that you lived at all" - Leo C. Rosten

Msvizionhealth | Anne: Thank you very much for this information. | 11/10/2014 10:58:03 AM

From: Msvizionhealth
To: "arobin@co.slo.ca.us"
Cc: Harvey Billig , Jan Hochhauser
Date: 11/10/2014 10:58 AM
Subject: Re: Health Agency Contact Form (response #795)

Anne,

Thank you very much for this information.

A couple of points of clarification.

The hospital in Templeton will not automatically be licensed to accept 5150 eligible patients. That would be something that might be done in coordination with your office, Twin Cities and other stakeholders. There are no plans to do that before opening. You also know that 5150s are not reserved for homeless or indigent patients. They're designed to protect any patient from harming themselves or others.

Also, it is not Vizion's immediate plan to sell the hospital once established. As you know, that sometimes happens. But Vizion is opening the hospital with the intention of running a state of the art center of excellence.

Im looking forward to discussing this with you tomorrow at lunch.

Respectfully,

Mark

Sent from my iPad

EXHIBIT 3

Proposed Templeton Psychiatric Hospital

Two Separate Facilities are being Proposed

- Proposed lot split to two parcels: one for a 96-bed Behavioral Health Facility (Psych Hospital); one for a 60-bed Assisted Living Facility (memory care) ???
- Both facilities proposed to be two story structures
- Facilities are expected to be managed by separate entities

X Assisted Living Facility — NOT FUNDED — MAY NEVER BE BUILT

- Designed to meet the needs of persons with memory impairments
- Appears to be the cause of no concerns among the neighbors

Behavioral Health Facility — WILL NOT TREAT DRUG ALCOHOL CASES

- Proposed to contain 96 beds contained in four pods of approximately 20 each plus swing beds
- Approximately one quarter of the beds are anticipated to be utilized by older adults (Medicare beneficiaries), one quarter by privately insured adults (21-64 yrs old), one quarter by adolescent aged youth and one quarter by younger children. As a privately owned and operated facility, they will be inclined to treat only privately insured adults, since Medi-Cal will not pay for their services. Medi-Cal will, on the other hand, pay for medically necessary inpatient services for youth. FALSE PLAN 70% ADULTS
- X • The facility might be operated for only voluntary admissions, or the operators could seek and obtain (from us) designation as an LPS receiving facility, which would allow them to retain and treat 5150/5250 patients against their will, if that were determined by BH Dept. to be in the best interests of the patient(s) and/or County.
- X • In either case, the type of individuals who seem to be generating the most neighborhood concern are the Medi-Cal (no private insurance) adults, particularly those who may be homeless (and likely discharged to the community rather than to a more stable placement). That is the one demographic that is the least likely to be a patient in the facility. As a voluntary facility, they will have essentially no patients in this demographic. As a designated LPS receiving facility, should they pursue that status, Medi-Cal adults would be the last category of patient we would transfer from the PHF, due to the lack of a third party payor (meaning the County would foot the bill).
- More details included in the attached two page summary.

LOCATION - SIB SO COUNTY 75% OF POPULATION
NO TEMPORARY SUPPORT SERVICES - SHOW SLO BRANCH

Proposed Freestanding Psychiatric Hospital in Templeton

The proposed facility in Templeton has raised many questions by community members. Safety has been a primary concern to the area neighbors.

5150
The Behavioral Health Department (BHD) supports the development of additional inpatient psychiatric care in the County. There are two potential designations for the proposed Templeton facility; one would be "LPS Designated" by the County, meaning the facility would be able to take patients on an involuntary basis, have a locked setting, and would be required to put all the patients' rights elements into place to ensure due process. Conversely, the facility could accept only voluntary patients. This would preclude the facility from "locking" the site to prevent exit; would not have a required patients' rights duty; and would provide a stricter range of admission criteria. For the County BHD, an LPS designated facility would be more beneficial. The vast majority of individuals in need of psychiatric hospitalization come in through an involuntary hold process (5150). All of the admissions to our Psychiatric Health Facility (PHF), and all of the individuals we have assisted to hospitals in other counties, have been involuntary. However, any additional beds, especially for youth and elders, would be an asset for care and efficiency.

The SLO BHD PHF treats primarily adults who are indigent or on Medi-Cal. We would continue to treat that population. The proposed Templeton facility, as a freestanding psychiatric facility, may not bill medi-cal for individual ages 21-64. For homeless individuals, individuals who are not already engaged in treatment, or individuals referred from the County jail, the PHF would remain the primary, if not sole, option for inpatient treatment. (Our PHF treated 87 individuals identified as homeless at admission in FY 13/14.)

The proposed psychiatric hospital in Templeton would fill several service gaps currently existing in San Luis Obispo County. The SLO BHD has transported over 350 individuals a year to psychiatric hospitals in other areas, as far reaching as Santa Rosa and Sacramento, due to inadequate capacity for treatment. These individuals include 51 minors, 161 adults, and 25 older adults. BHD drivers (PHF mental health worker aide staff) provide the transportation for these individuals to the out of county placement. Ambulance services are sometimes required, especially for individuals who are medically fragile.

MHONS 22%
PHF 68%
+6% 11%
Total 227

Our 16 bed psychiatric Health Facility (PHF) does not have sufficient treatment space to appropriately provide the range of services that are optimal for children who tend to have longer stays than adults. Nor is there sufficient safe space for frail elders who are subjected to the behaviors of some of our adult patients. As the sole "LPS Designated" receiving unit (involuntary treatment allowed) in the County, our facility treats individuals who are part of the public safety net and most in need of acute, involuntary care. We are also responsible to treat individuals requiring restoration to competency from the jail. Some of these individuals present serious behavior management issues and require additional staffing. It is clinically more appropriate that a child or elderly person receive treatment in a better suited facility, without exposure to some of our more actively acute adults.

For individuals who are transported to out of county facilities via ambulance, a special crew is called in. It can take several hours for a crew to become available, leaving the patient either in the Emergency Department or in the PHF longer than desirable. While the ambulance company does not reduce required services locally, the impact to crews who may have to travel up to 8

hours out of county with a minor can be taxing. This also reduces their availability for other shifts.

For family members, out of county hospitalizations reduce the efficacy of family based treatments and the ability of the patient to return home with a better prepared and informed family/support group. This may lead to additional hospitalizations if stabilizing efforts are unsuccessful due to lack of preparation and/or treatment within the family setting.

General Notes about Freestanding Psychiatric Hospitals

- Licensed by the State of California
- May be JCAHO accredited
- Provides structured, secure environment for people experience a high level of distress
- The goal of the program is first to stabilize the distressing or life-threatening symptoms of people who are in throes of the acute phase of a severe mental illness. Once stabilized, the program helps individuals realize their potential for creating the lives they desire for themselves, helping them transition back into the community as quickly as clinically appropriate.
- Funded through private insurance, Medicare, and most managed care plans.
- Medi-cal funding NOT available for patients ages 21-64

Treatment Services include

- Comprehensive evaluation and risk assessment
- Symptom management skills training
- Crisis planning and prevention
- Supportive counseling (group and individual)
- Medication administration, education and training
- Independent living skills training
- Dietary consultation
- Discharge planning and linkage to community support

Admission Criteria

- Individuals experiencing an acute exacerbation of symptoms of mental illness who require 24-hour supervision and/or assistance with psychiatric recovery
- Must be referred by a physician
- Most admissions are voluntary, however, a Freestanding Psychiatric Hospital may become designated to provide involuntary services

These facilities cannot accept individuals who:

- Have complex medical problems that cannot be treated on an outpatient basis
- Have a primary diagnosis of drug or alcohol abuse, or an eating disorder (but can be co-occurring)
- Are a registered sex offender

EXHIBIT 4



SAN LUIS OBISPO COUNTY HEALTH AGENCY

BEHAVIORAL HEALTH

2180 Johnson Avenue
San Luis Obispo, California 93401
805-781-4719 • FAX 805-781-1273

Jeff Hamm
Health Agency Director

Anne Robin
Behavioral Health Administrator

June 11, 2015

E. Murray Powell
1610 Tanager Ct.
Templeton, CA 93465

Re: PRA Request Pertaining to PHF Unit Capacity Issues

Dear Mr. Powell:

We are in receipt of your letter of June 3, 2015 requesting additional information regarding Behavioral Health services in the County, which will be treated as a Public Records Act request. Below, please find answers pursuant to the Act to the requests you submitted.

We will also, in addition to the requirements of the public records act request, endeavor to provide information as available and pertinent.

1. Please confirm that, if the Templeton facility is an "At Will" facility, the County's involuntary patients would not be eligible for admission to that facility as stated in your March 17th report."

It is correct that if the facility in Templeton is "at will", county involuntary patients will not be eligible for admission.

2. Provide an accurate count of total admissions to the PHF unit and the total number of out of county transfers for the four age groups indicated in your spreadsheet analysis for the fiscal years ended 6/2011, 6/2103, 6/2014, and 6/2015 (year to date).

There is no document which provides this information without considerable data mining. You have been provided information in prior correspondence. The information already provided was refined as available. You received information which is not generally collected, and therefore, as we explained in our emails, was either incomplete or an estimate. The information you were provided with came from hand counts of logs, not electronically generated records.

3. Provide accurate counts for each year indicated in 2. above that excludes admissions and out of county transfers of those patients diagnosed with drug and alcohol issues and patients that were transferred due to physical (not mental health) issues..

This information is not available without individual record review. However, due to the regulations regarding admission to the PHF, no patient with a primary drug and alcohol condition would have been admitted, therefor no transfers for this condition would have been made. The same applies for primary physical health conditions.

4. Provide the number of Cal Poly and Cuesta College students included in your counts for each year and age group.

Similarly, this information is not collected in a fashion that is available without reviewing individual records; nor is it collected definitively.

5. Provide the average number of days transfers were treated in out of county mental facilities for each age category for each year shown on your spreadsheet.

This information is not available in a record that is readily obtainable. The County mental health plan would only track payments for hospitalizations for Medi-Cal beneficiaries in-out of county placements. Due to the details of treatment authorizations, lack of payment for day of discharge, and other concerns related specifically to Medi-Cal, the payment information would not adequately represent lengths of stay. The County has no responsibility for tracking or payment for individuals with private insurance who are placed in out of county psychiatric care.

6. Provide the number of out of county transfers for each year and age category that required follow-up mental health out-patient services provided by the BHD and any other county agencies.

This information may be available; however, it is not available in an existing document or report. Secondly, if the "other county agencies" are not a contracted agency providing medically necessary treatment for Medi-Cal beneficiaries, the information is either not available or will not be complete.

7. Provide the details of discussions that the SLO BHD or other County agencies have had with the promoters of the Templeton facility especially regarding the designation of the facility as an LPS facility.

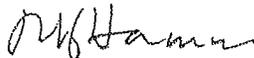
Under the Public Records Act, you are only entitled to have access to written records; no summaries of oral conversations will be provided to you under your Public Records Act request. Attached is the only responsive document concerning communications between the Behavioral Health Department and the owners of the proposed project regarding the facility serving as an LPS facility.

8. Please confirm our understanding that a second SLO County 16 bed PHF unit is legally allowed if located at a different location than the existing unit within the county.

This is correct.

As noted above, some responsive records are not available except through data mining. Per Government Code section 6253.9, you would be required to pay for all staff time and programming required to do this data mining. This process would also take a significant amount of time to complete. If you intend to pursue your Public Records Act request and are willing to pay the expenses required for programming and wait the necessary time to get additional records responsive to your request as outlined above, please clarify the scope of your request as discussed above and confirm your willingness to pay for any records that will be provided. The Department will then begin the necessary programming to extract the information we are able to provide in response to your request.

Sincerely,



Jeff Hamm
Health Agency Director

c: County Counsel

**Fw: PRA from Mr. Powell
Laura Zarate to: Jeff Hamm**

06/12/2015 09:22 AM

History: This message has been forwarded.

From: Anne Robin/MHS/COSLO
To: Msvizionhealth
Cc: Harvey Billig , Jan Hochhauser
Date: 11/10/2014 11:27 AM
Subject: Re: Health Agency Contact Form (response #795)

Yes, this is the misinformation that gets around if things are not clear. One of the biggest concerns is the "transport back to county of origin" so that people from other counties aren't "just released to the street". You may want to discuss how you have handled those aspects elsewhere.

Anne Robin, LMFT
Behavioral Health Administrator
SLO County Health Agency/Behavioral Health
805-781-4719

"I think the purpose of life is to be useful, to be responsible, to be honorable, to be compassionate. It is, after all, to matter: to count, to stand for something, to have made some difference that you lived at all" - Lao C. Rosten

Msvizionhealth Anne: Thank you very much for this information. 11/10/2014 10:58:03 AM

From: Msvizionhealth
To: "arobin@co.slo.ca.us"
Cc: Harvey Billig , Jan Hochhauser
Date: 11/10/2014 10:58 AM
Subject: Re: Health Agency Contact Form (response #795)

Anne,

Thank you very much for this information.

A couple of points of clarification.

The hospital in Templeton will not automatically be licensed to accept 5150 eligible patients. That would be something that might be done in coordination with your office, Twin Cities and other stakeholders. There are no plans to do that before opening. You also know that 5150s are not reserved for homeless or indigent patients. They're designed to protect any patient from harming themselves or others.

Also, it is not Vizion's immediate plan to sell the hospital once established. As you know, that sometimes happens. But Vizion is opening the hospital with the intention of running a state of the art center of excellence.

Im looking forward to discussing this with you tomorrow at lunch.

Respectfully,

Mark

Sent from my iPad

On Nov 10, 2014, at 12:05 PM, arobin@co.slo.ca.us wrote:

I'm forwarding this conversation to you so you are more directly aware of the community concerns> Mrs. Gamble is a former member of our behavioral health advisory board and is well thought of and connected in the area...

Anne Robin, LMFT
Behavioral Health Administrator
SLO County Health Agency/Behavioral Health
805-781-4719

"I think the purpose of life is to be useful, to be responsible, to be honorable, to be compassionate. It is, after all, to matter: to count, to stand for something, to have made some difference that you lived at all" - Leo C. Rosten

----- Forwarded by Anne Robin/MHS/COSLO on 11/10/2014 10:05 AM -----

From: Lynne Gamble <lygamble@gmail.com>
To: jhamm@co.slo.ca.us
Cc: arobin@co.slo.ca.us
Date: 11/08/2014 01:39 PM
Subject: Re: Fw: Health Agency Contact Form (response #795)

Dear Mr. Hamm: Thank you for responding. You must have heard about the Behavioral Health Center/hospital that would generally be welcomed in our county, treating alcohol and drug addiction, bi-polar conditions, depression, anxiety, etc.

We heard about the Behavioral Health Center/hospital that would be taking the 5150 -72 hour observation people- who could not be stabilized, often the worst of the severely mentally ill homeless population. These people would come from a tri county area, would receive 10 to 30 days of further treatment until stabilized, and then would be released in Templeton. Templeton is an unincorporated city of 10,000 residents and has no homeless facilities (food or shelter). Templeton Fire has already said that they do not have the capacity to be the first responders.

Ventura has such a behavioral health center/hospital and Santa Barbara sends its 5150 street people there when they can't be stabilized. It has reduced the homeless, street people problem in Santa Barbara, and has moved it to Ventura. These people are released in Ventura with so many days of medication and end up staying there and recycling through the system.

VizionHealth's Mark Schneider is an expert in start-up behavioral health facilities. Once established, they are sold to other companies. Dr. Harvey Billig, an ophthalmologist who lives in Santa Cruz, is trying to sell the property/project. His interest is in selling his property.

This has been discussed on KPRL radio for two days now, and I would contend that no

one in the North County area is anxious to grow the schizophrenic homeless population by importing them from other counties and releasing them in Templeton. Ventura has a program to provide bus money to homeless stranded there to their home cities. Perhaps, the proposed hospital could provide the same service, busing these released mental patients to their home cities or to a city with homeless facilities such as San Luis Obispo.

Thanks,

Lynne Gamble



SAN LUIS OBISPO COUNTY HEALTH AGENCY

2180 Johnson Avenue
San Luis Obispo, California 93401
805-781-4719

Jeff Hamm
Health Agency Director

October 21, 2015

E. Murray Powell
1610 Tanager Ct.
Templeton, CA 93465

Re: Public Records Request

Dear Mr. Powell:

The following is provided in response to your request for information:

1. Please confirm that, if the Templeton facility is an "At Will" facility, the County's involuntary patients would not be eligible for admission to that facility as stated in your March 17th report."

It is correct that if the facility in Templeton is "at will", county involuntary patients will not be eligible for admission.

2. Provide an accurate count of total admissions to the PHF unit and the total number of out of county transfers for the four age groups indicated in your spreadsheet analysis for the fiscal years ended 6/201, 6/2103, 6/2014, and 6/2015 (year to date).

There is no document which provides this information without considerable data mining. You have been provided information in prior correspondence. The information already provided was refined as available. You received information which is not generally collected, and therefore, as we explained in our emails, was either incomplete or an estimate. The information you were provided with came from hand counts of logs, not electronically generated records.

3. Provide accurate counts for each year indicated in 2. above that excludes admissions and out of county transfers of those patients diagnosed with drug and alcohol issues and patients that were transferred due to physical (not mental health) issues..

This information is not available without individual record review. However, due to the regulations regarding admission to the PHF, no patient with a primary drug and alcohol condition would have been admitted, therefore no transfers for this condition would have been made. The same applies for primary physical health conditions.

4. Provide the number of Cal Poly and Cuesta College students included in your counts for each year and age group.

This information is not collected in a fashion that is available without reviewing individual records, nor is it a data element specifically tracked in our data system.

5. Provide the average number of days transfers were treated in out of county mental facilities for each age category for each year shown on your spreadsheet.

This information is not available in a record that is readily obtainable. The County mental health plan

would only track payments for hospitalizations for Medi-Cal beneficiaries in out of county placements. Due to the details of treatment authorizations, lack of payment for day of discharge, and other concerns related specifically to Medi-Cal, the payment information would not adequately represent lengths of stay. The County has no responsibility for tracking or payment for individuals with private insurance who are placed in out of county psychiatric care.

6. Provide the number of out of county transfers for each year and age category that required follow-up mental health out-patient services provided by the BHD and any other county agencies.

This information may be available; however, it is not available in an existing document or report. Secondly, if the "other county agencies" are not a contracted agency providing medically necessary treatment for Medi-Cal beneficiaries, the information is either not available or will not be complete.

7. Provide the details of discussions that the SLO BHD or other County agencies have had with the promoters of the Templeton facility especially regarding the designation of the facility as an LPS facility.

Under the Public Records Act, you are only entitled to have access to written records; no summaries of oral conversations will be provided to you under your Public Records Act request. Attached is the only responsive document concerning communications between the Behavioral Health Department and the owners of the proposed project regarding the facility serving as an LPS facility.

8. Please confirm our understanding that a second SLO County 16 bed PHF unit is legally allowed if located at a different location than the existing unit within the county.

This is correct.

However, in the light of your ongoing request for updated information, we can provide you with the following:

PHF Admissions (all payor sources)	2014-2015	2013-2014	2012-2013	2011-2012
Adults:	972	1033	1132	1073
Youth:	150	176	169	143
Total:	1122	1209	1301	1216

Transfers to locked placement (all payor sources)				
Adults:	147	156 Hand count	136 Hand count	144 Hand count
Youth:	86	81 Hand Count	82 Hand Count	82 Hand count
Total:	233	237	218	226

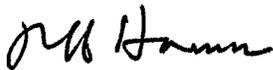
All ages 2014-2015	Total # TARs (Medi-Cal only, TAR facilities only)	137
All ages 2014-2015	Average length of stay in out-of-county hospital (Medi-Cal only, TAR facilities only.)	5.66 days

Some of the variances in data you may notice are due to several factors. One is hand-counting of transfers as opposed to our current (2014/2015) data which is in our electronic health record system. Some of the prior year data in our electronic health record system was not validated as the data sets

were still in development. As you can see however, during each fiscal year we have over 200 individuals *that we know of* who received care in out of county psychiatric facilities. The number provided to the Tribune of "275 to 314" transfers was based on the previously reported hand counts of calendar year logs compared to electronic record fiscal year counts. We acknowledge that the data has not been consistent, as we have not been required to track all out-of-county psychiatric placements. This is the best information available given the constraints.

As noted above, some responsive records are not available except through data mining. Per Government Code section 6253.9, you would be required to pay for all staff time and programming required to do this data mining. This process would also take a significant amount of time to complete. If you intend to pursue your Public Records Act request and are willing to pay the expenses required for programming and wait the necessary time to get additional records responsive to your request as outlined above, please clarify the scope of your request as discussed above and confirm your willingness to pay for any records that will be provided. The Department will then begin the necessary programming to extract the information we are able to provide in response to your request.

Sincerely,

A handwritten signature in black ink, appearing to read "Jeff Hamm". The signature is written in a cursive style with a large initial "J".

Jeff Hamm
Health Agency Director

EXHIBIT 5

THE TEMPLETON HOSPITAL PROPOSAL AT A GLANCE

Here's a look at some of the details and highlights of the Templeton behavioral health hospital proposal:

Property: 5-acre site at Las Tablas in Templeton, across from Twin Cities Community Hospital.

Property owners: Harvey and Melanie Billig of Carmel. The couple lived in San Luis Obispo County from about 1973 to 2000. She was an ophthalmologist; she was mayor of San Luis Obispo from 1981 to 1985.

Previous proposal: In 2007, the county approved a 192-bed assisted living facility. The Billigs dropped the plan because of financing and other issues.

Current proposal: 91-bed psychiatric hospital (previously named as 96 beds) and 55-to-60-bed memory care facility for patients with Alzheimer's disease and dementia. The 35,000-square-foot memory care facility would be built first. An operator has not yet been selected.

Psychiatric hospital details: The 70,000-square-foot behavioral health hospital would be operated by Vizion Health LLC, a new company based in Charlotte, N.C. The operator anticipates 1,000 patients the first year and about 2,520 patients annually after that. Patients would be in locked "care pods" grouped by age: a 21-bed unit for children ages 6 to 12; a 21-bed adolescent unit for ages 13 to 18; a 21-bed unit for adults 18 to 65; and a 20-bed unit for seniors 65 and older. Eight more "swing beds" could be moved among the pods as needed. Each pod would have a dining area, recreation area, nursing station and its own staffing. Patient stays would be voluntary and typically last eight to 10 days.

Treatment plans: Therapy and medication for conditions such as depression, anxiety disorder, suicidal thoughts, schizophrenia, social phobias, eating disorders, post-traumatic stress disorder in veterans, and attention deficit

hyperactivity disorder in children. No substance abuse treatment.

Insurance: Private insurance, Medicare, retired military health plans and other funding sources. Federal law prevents funding for Medi-Cal patients ages 16 to 64.

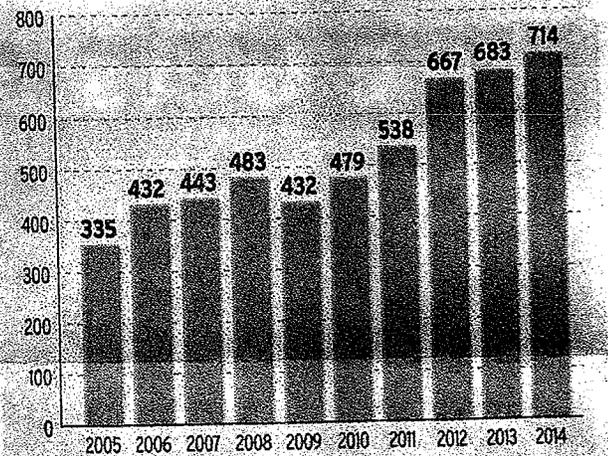
Discharge: Patients would need a doctor's assessment before discharge. Any patient deemed a danger to himself or others would be transferred to the county psychiatric facility.

Jobs: The psychiatric hospital would create about 200 medical and staff jobs; the memory care center would provide about 30. Each would generate additional jobs in the construction phases.

Quote: "It's a hospital for people in mental crisis, as opposed to a physical crisis. The fundamental process is ... they come in and stabilize the patient with a treatment process and then (patients) go back to their private psychologist and other outpatient care." — Melanie Billig

MORE LOCALS LEAVING FOR CARE

The number of residents seeking care outside of San Luis Obispo County has risen steadily over the past decade to totals that are now nearly double what they were 10 years ago, according to discharge records from California psychiatric facilities.



SOURCE: Office of Statewide Health Planning and Development

TRIBUNE GRAPHIC

nia Hospital Association.

The association recommends one bed per 2,000 people in any given population, to provide adequate psychiatric hospital care.

Under that standard, San Luis Obispo County should have 140 beds to serve its population of about 279,000. Instead, it has 16.

Other counties also don't meet the association's recommendation.

In 2012, the statewide bed rate was one for every 5,809 people while the nation's average was one bed for every 4,845 people, according to the association's study. With only 16 beds, San Luis Obispo County has one bed for every 17,437 residents.

Some opponents of the Templeton project are skeptical of a recommendation by an association that represents hospitals.

The Tribune looked for other psychiatric bed-to-population recommendations but was unable to find such standards among various state and federal agencies and organizations.

Questions about size

As the Templeton proposal heads to the Planning Commission, proponents and opponents continue to dispute the need for a psychiatric hospital of its size.

shows there wouldn't be enough demand to keep a 91-bed facility in business.

"Yes, we need more than the 16 beds, but is it 100?" Templeton resident Shirley Sigmund said of the proposed facility's capacity.

Robin said that, while she hasn't taken a position on the Templeton proposal, there is a need in the county for more beds.

"We have people calling hospitals every day and asking, 'What's your availability?' and working to move people," Robin said.

Medinger said the number of beds doesn't matter as much as having a local facility to begin with.

"I would personally guess that currently there are some people who don't get inpatient treatment at all because they either can't afford to go out of the county, are afraid to be further away, or, if children the parents don't want them that far away," she said.

Coming tomorrow: closer look at the county Psychiatric Health Facility

Stay connected with Tony Strickland by following @tstrickland on Twitter or visiting Facebook.com/SLOTribuneNorthCounty.

VIDEO ONLINE

make arrangements to send them to an out-of-county facility where they accept private insurance, because we only have 16 beds and a stack of Medi-Cal patients."

Statistics suggest need

One in four adults experiences mental illness in a given year, according to statistics from the National Alliance on Mental Illness, with 1 in 17 people having a condition such as schizophrenia, major depression or bipolar disorder.

About 20 percent of youth ages 13 to 18 experience severe mental disorders in a given year. For ages 8 to 15, the estimate is 13 percent, the statistics say.

For Medinger and her daughter, those statistics were more than numbers — they were their reality.

"Both of us were so afraid — her depression was so bad ... and she was so suicidal that I didn't know if I was going to lose her," Medinger said.

In 2014, 714 San Luis Obispo County residents of

'Both of us were so afraid — her depression was so bad ... and she was so suicidal that I didn't know if I was going to lose her.'

— Sherrie Medinger

and Development.

That figure includes patients transferred from the PHF and patients who checked in independently.

The county transferred between 275 and 314 patients from the PHF to out-of-county psychiatric hospitals annually from 2012 to 2014 for reasons ranging from lack of space locally, patients it can't serve and patients needing long-term stays, officials said.

Mark Schneider, the CEO of Vizion Health LLC, the company that would operate the Templeton psychiatric hospital, said he anticipates as many as 1,000 patients the first year and then about 2,520 patients a year after that.

Joseph of Atascadero, who didn't want his last

Joseph, now 30, was diagnosed with schizophrenia at 19 while away at college.

Today, his parents say their son's condition has worsened since they moved from Virginia two years ago. They attribute his regression to the area's lack of mental health services.

The family says being so far away is emotionally draining.

"You just want to hug him and you can't. And when he calls you, scared, you can't go to him and tell him it's OK," said his mother, Lisa Kania.

Overall, Robin said the PHF is adequate for the role it serves, but more psychiatric beds are needed in the county.

"SLO County really is

EXHIBIT 6



TEMPLETON UNIFIED SCHOOL DISTRICT

"Home of Tomorrow's Leaders"

960 Old County Road • Templeton • 93465 • (805) 434-5800 • FAX (805) 434-1473

March 9, 2015

San Luis Obispo County Board of Supervisors
1055 Monterey Street
San Luis Obispo, CA 93408

Dear Honorable Supervisors Arnold, Compton, Hill, Gibson, and Mecham:

I am writing on behalf of the Templeton Unified School District regarding the mental health hospital that Vision Health LLC is proposing to build on Las Tablas Road, in Templeton. We wanted to make sure that the Planning Commission is aware of the impact that the hospital may have upon the School District.

Under California law, students placed in a hospital are deemed residents of the school district in which the hospital is located. (Cal. Educ. Code §§ 48207, 56167.) Accordingly, the local school district is responsible for providing regular and special education to all hospitalized students, regardless of where the students' families reside.

Depending upon the needs of a particular student, these services can range from educational instruction to complex professional services such as nursing, physical therapy, speech and language therapy, or intensive behavioral services. It is likely that students who need hospitalization in a mental health facility will tend to have substantial special education needs.

The proposed hospital would have 96 beds, approximately 48 of which would be reserved for children and adolescents. It is anticipated that children from throughout California would be placed in the hospital. The School District would receive funding from the State for children in the hospital consistent with funding received for general education students; it would not receive additional funding to provide special education services to hospitalized students.

The School District currently has an average daily attendance of approximately 2,487, of whom approximately 220 qualify for special education supports and services. The hospital could thus increase the School District's special education student population by approximately 20%, with no accompanying increase in special education funding. This may result in a significant impact to the School District's special education and general fund budgets, and could impair the School District's ability to provide services to students who reside within Templeton.

San Luis Obispo County Planning Commission

March 9, 2015

Page Two

The School District recognizes that the decision whether to approve the hospital project is within the Planning Commission's purview, not the School District's, and the School District does not take a formal position regarding whether the project should be approved. However, we believe it is important that the Planning Commission be aware of the hospital's potential impact upon the School District. Please do not hesitate to contact me if you would like to further discuss the issues raised in this letter.

Sincerely,

A handwritten signature in black ink, appearing to read "Joe Koski", with a long, sweeping flourish extending to the right.

Joe Koski, Ed.D
Superintendent

EXHIBIT 7

From: **Murray J. Powell** murray@dfrios.com
Subject: Fw: Developer's Fees Email
Date: Today at 11:52 AM
To: Linda Gilbert tblonde408@yahoo.com

Sent from Surface

From: Murray Powell
Sent: Sunday, January 10, 2016 7:52 PM
To: greggelli@aol.com

Gregg - Email below confirming restriction on Developer fee use.

Murray

Sent from Surface

From: Shirley Sigmund
Sent: Monday, January 4, 2016 6:31 PM
To: Murray Powell
Cc: Gwen Pelfrey, Fred and Freita Russell, Gregg Ellison, greggelli@aol.com, david14larue@gmail.com

Here's the answer Murray.

Sincerely,
Shirley

Begin forwarded message:

From: Aaron Asplund <aasplund@templetonusd.org>
Date: January 4, 2016 at 8:53:02 AM PST
To: Shirley Sigmund <ssigmund@templetonusd.org>
Subject: Re: Developer's Fees

Hello Shirley,

We had a wonderful break and are ready to get back to it today!

I cannot comment on how much the fees will be that get assessed if the Billig project goes forward without knowing the square footage of the development. But yes, fees would be assessed to the facility as a commercial development. These fees collected by TUSD cannot be used for anything other than addressing school facility needs that arise from increased enrollment (deriving from new residential and commercial development in town). Therefore, the statement that the developer fees could be used to reimburse the District for the costs of providing services to school-aged patients at the facility is not accurate.

Hope this provides the clarification you are seeking.

Thanks,

Aaron

On Sun, Jan 3, 2016 at 10:07 PM, Shirley Sigmund
<ssigmund@templetonusd.org> wrote:

Hi Aaron,

I hope you and your family had a wonderful Winter Break!

I have a question from a friend in the community, and the question pertains to how developer's fees are distributed and assigned.

Specifically, the person heard (at the Board of Supervisors meeting where the Billig project was presented) this:

"One issue is the claim made that \$86,000 in developer fees will be paid to TUSD. Implying that these funds would be available for reimbursing the District for costs incurred in providing services to School age patients at the facility. One person said that the entire amount would be paid to TUSD but that the funds are intended for construction of new facilities and are not available to pay for services. What is the correct answer?"

Would you please let me know how I can best answer this person's questions about developer's fees?

Thank you so much,

Shirley

--

Shirley Sigmund

President of the Board of Trustees

Templeton Unified School District

This electronic mail transmission does not necessarily reflect the views and opinion of a majority of the Board of Trustees of Templeton Unified School District. A Board member's electronic communication may be subject to disclosure under the California Public Records Act. (Government Code 6250-6270)

--

Aaron Asplund

Chief Business Official

Templeton Unified School District

(805) 434-5810

EXHIBIT 8

From: Andrew Mutziger
To: Holly Phipps
Cc: Melissa Guise; pamelajardini; James Caruso
Subject: APCD's Review of the Dec 2015 Revised Billig Project's Air Quality Report
Date: 01/13/2016 04:16 PM
Attachments: PatientVisitorTripDistanceEstimationAJM.xlsx
BilligProjectOperationalPhaseUnmitigatedAirQualitySignificanceThresholdsEvaluation.xlsx
Trip_Rates_Worksheet_Supplement(1-11-16)-FromYorke-AJMReview.xlsx
APCDReviewOfTripReductionsIdentifiedInTheBilligDec2015AQreport.xlsx

Hi Holly,

The updated Dec 2015 air quality report for the Billig project:

- 1) Quantified the reductions in daily trips to the facility due to the longer patient stays with a behavioral health hospital relative to a standard hospital (see file: APCDReviewOfTripReductionsIdentifiedInTheBilligDec2015AQreport.xlsx);
- 2) Identified the distance to use for out of county patients/visitors (see file: PatientVisitorTripDistanceEstimationAJM.xlsx); and
- 3) Evaluated the project's air quality impacts with the assumption that 1/3 of the patient/visitor trips would be from outside of the county.

The APCD has accomplished detailed reviews of these changes and concur with the approach used by Yorke.

The criteria air pollutant side the updated report demonstrates that the project, with 1/3 of the trips being from out of county, would be below the CEQA significant level of 25 lb/day of ozone precursor emissions. Further, SLOCAPCD ran the CalEEMod model to investigate what the impacts would be if 50% and 100% of the patient/visit trips came from outside of the county. The results are that neither of these scenarios would result in the ozone precursor emissions being more than the 25 lb/day threshold. This is the same conclusion as the Sep 2015 version of the air quality report which did not account for patient/visitor trips from outside of the county.

The greenhouse gas impacts were over the 1,150 MT per year CEQA threshold in both the Sep and Dec 2015 versions of the air quality report. **The APCD's recommendation to mitigate these GHG impact to a level of insignificance will be for the project proponent to either:**
a) Demonstrate that the project is consistent with the Energy Wise Plan from the County (the county's climate action plan) or b) mitigate the excess impacts with off-site mitigation.

Note: The SLOCAPCD does not authorize releasing projects from the responsibility of mobile source GHG emissions as is shown at the bottom of Table 3-5 of the Dec 2015 report.

This project proposes to provide 91 beds for the behavioral health portion of the project. That is approximately 33 acute psychiatric inpatient beds/100,000 SLO County residents. This value is less than the 50 beds/100,000 people recommendation stated in the California Hospital Association's (CHA) report that was updated on 12 Sept 2014 and it is more than the California statewide average of about 17 beds/100,000 people which is also listed in the CHA report. This would indicate that the project could have patients/visitors from out of the county. As such, it was important to evaluate the air quality impact from out of county

patients/visitors. This evaluation is included in an APCD generated table found in file which expands on Table 3-5 of the Dec 2015 Yorke revised air quality report: BilligProjectOperationalPhaseUnmitigatedAirQualitySignificanceThresholdsEvaluation.xlsx

The APCD is satisfied with Dec 2015 air quality report with the exception of the GHG mitigation needs specified above. With regards to GHG, the APCD recommends that the County decide the "In-County" and "Out of County" patient percentages to use that will ensure that worst case emissions GHG impacts can be mitigated fully. If the project proponent elects to use off-site mitigation to address the GHG impacts, they will first need to assess the benefits of actual on-site GHG mitigation measures that will be implementing by the project. The project proponent will need to provide the final operational phase GHG emission evaluation for the project to the APCD for review and approval and work with the APCD to determine the off-site GHG mitigation approach that the project will use to bring their impact to a level of insignificance.

Please let me know if you have any questions.

Sincerely,

Andy Mutziger
Air Quality Specialist
San Luis Obispo County Air Pollution Control District
(805) 781-5956
fax: (805) 781-1002
www.slocleanair.org



EXHIBIT 9



Ian Parkinson
Sheriff - Coroner
1585 Kansas Avenue
San Luis Obispo, CA 93405

DATE: June 10th, 2015

TO: Holly Phipps- North County Team/Development Review

RE: Response to:
SUB2013-00052 CO14-0020 BILLIG- Proposed parcel map with CUP to subdivide 4.89 acres into two parcels of 3.43 acres and 1.46 acres and construction of an assisted living facility. Site location is 1155 Las Tablas Rd., Templeton.
APN: 040-280-056

PROJECT APPLICANT: Harvey E. Billig

PATROL REGION: North

CONTACT: Chief Rob Reid 805-781-4540
1585 Kansas Avenue rreid@co.slo.ca.us
San Luis Obispo, CA 93405

The San Luis Obispo County Sheriff's Office provides police and patrol services in the unincorporated areas of San Luis Obispo County. The County is divided into three areas; North, Coast, and South. The Sheriff's Office is headquartered from the operational facility near Camp San Luis Obispo. Each area has its own patrol station, which is supervised by a Commander. According to the Sheriff's Office, the ratio of deputies to population has not kept pace with population growth for many years. The current ratio is one deputy for every 967 people; an adequate level of service is approximately one deputy for every 750 people.

The proposed project site is located in the area of responsibility which is covered by our North County Substation, located at 356 N Main in Templeton. The North Station area of responsibility spans 1,400 square miles, which extends from the top of Cuesta Grade to the Monterey County line, and extends east to the Kern County line. Response times to the outlying County areas can be up to 45 minutes plus, depending on what is going on in the County at the time, as the deputies do not always respond from the patrol station.

With any added business or residence increase, there is direct correlation to increased law enforcement response. This project will add to the cumulative effect of community growth and the need for additional law enforcement staffing.

ATTACHMENT 7

The proposed site is not situated in a remote area, however it is important to keep in mind that using certain principles with any project are of great importance. Sufficient lighting from dusk to dawn is paramount. Frequent inventory of construction equipment and a record of serial numbers for that equipment are essential during the construction process. Surveillance equipment is another suggestion to consider for deterring criminal activity at the project site, or having on-site security is also recommended. By implementing these security measures, it may help to somewhat alleviate an increase in law enforcement calls for service during the construction phase, however, typically calls for service will still increase in these situations, which is of course a significant concern for the Sheriff's Office.

When the construction phase of the project is complete, the added population will create added demand for Sheriff's Office services as well, with a continued increase in calls for service.

Respectfully Submitted,

Marsha Mann – Crime Prevention Specialist
San Luis Obispo County Sheriff's Office
805-781-4483

EXHIBIT 10



CITY OF ATASCADERO POLICE DEPARTMENT

"Dedicated to Professional Service"



JEREL HALEY
Chief of Police

November 24, 2015

SLO County Planning Department
Attn: Planning Commission
976 Osos St.
San Luis Obispo, CA 93408

Re: Need for Additional Inpatient Psychiatric Resources

Dear Planning Commission,

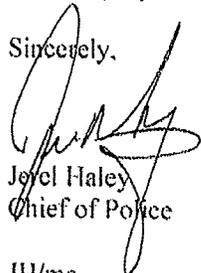
I am writing to ask for your support in procuring additional inpatient psychiatric resources in the County of San Luis Obispo.

As Chief of Police for the City of Atascadero Police Department, it is my job to provide for the safety and security of residents and visitors within the City of Atascadero, in addition to assisting our law enforcement partners in the county should the need arise. As first responders, it is our job to serve and protect individuals within our community who may be suffering from mental illness. Unfortunately, the resources necessary to tend to the needs of such individuals, whose mental state is fragile but show no criminal tendencies, is woefully inadequate.

Together with my law enforcement colleagues I am asking for the assistance of our partners at the County Psychiatric Health Facility (PHF) located in San Luis Obispo. The PHF is the only resource in this County for inpatient care and is often full as it has a limited licensed capacity. In addition, the PHF only serves as a short term treatment solution and it is not uncommon for our agency to return to the PHF with the same individual on multiple occasions as they have not been afforded the long term care needed to make a difference.

I urge you to consider the great need in our County for additional inpatient psychiatric resources and approve proposals that make sense and will benefit those in need.

Sincerely,


Jerel Haley
Chief of Police

JH/mc

5505 EL CAMINO REAL • ATASCADERO, CA 93422

General Business: (805) 461-5051 Administrative Services: (805) 470-3200 Watch Commander: (805) 470-3280 Fax: (805) 461-3702
www.atascadero.org

PASO ROBLES POLICE DEPARTMENT

November 25, 2015

SLO County Planning Department
Attn: Planning Commission
976 Osos St.
San Luis Obispo, CA 93408

Re: Need for Additional Inpatient Psychiatric Resources

Dear Planning Commission,

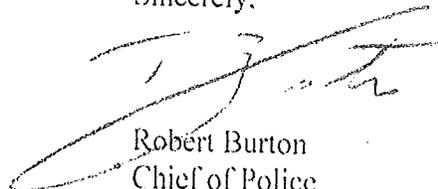
This letter is in support of additional inpatient psychiatric resources in the County of San Luis Obispo.

As a law enforcement executive in San Luis Obispo County, it is my job to provide for the safety and security of Paso Robles residents and visitors alike. Often times we are first responders to serve those in our community that are suffering from mental illness. In many of these cases we have very few resources to offer this segment of the community who have not committed a crime, but are in a fragile mental state and need assistance.

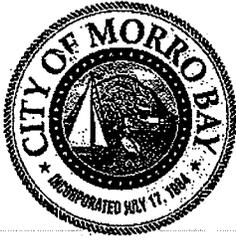
We ultimately seek the assistance of our partners at the County Psychiatric Health Facility (PHF) located in San Luis Obispo. The PHF is the only resource in this County for inpatient care and is often full as it has a limited licensed capacity. In addition, the PHF only serves as a short term treatment solution and it is not uncommon for our agency to return to the PHF with the same individual on multiple occasions as they have not been afforded the long term care needed to make a difference.

I urge you to consider the great need in our County for additional inpatient psychiatric resources and approve proposals that make sense and will benefit those in need.

Sincerely,



Robert Burton
Chief of Police



CITY OF MORRO BAY

POLICE DEPARTMENT
850 Morro Bay Boulevard
Morro Bay, CA 93442



San Luis Obispo County Planning Department
Attn: Planning Commission
976 Osos Street
San Luis Obispo, CA 93408

December 2, 2015

Re: Need for additional Inpatient Psychiatric Resources

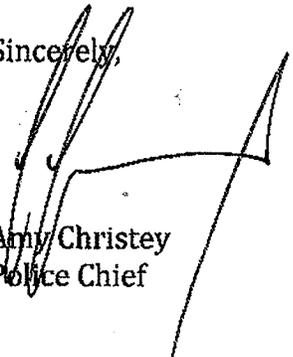
Dear Members of the Planning Commission,

The letter is in support of additional inpatient psychiatric resources in San Luis Obispo County. As a law enforcement executive in San Luis Obispo County, it is my job and responsibility to provide public safety services for Morro Bay residents and visitors to my community. Often times, law enforcement professionals are first responders to those in our community that are suffering from mental illness. In many cases, law enforcement professionals have few resources to offer community members who suffer from mental illness and have not committed a crime, but are in a fragile state and need assistance.

Morro Bay law enforcement professionals, and our partner agencies, seek the assistance of our partners at the County Psychiatric Health Facility (PHF) located in the City of San Luis Obispo. The PHF is the only resource in this County for inpatient care and is often full as it has a limited licensed capacity. Further, the PHF only serves as a short term treatment solution. It is not uncommon for my officers to return to PHF with the same individual on multiple occasions as that individual has not been afforded the long term care needed to make a difference.

I request that you consider the need in our County for additional inpatient psychiatric resources and approve proposals that will benefit those in need in Morro Bay and throughout San Luis Obispo County.

Sincerely,


Amy Christey
Police Chief

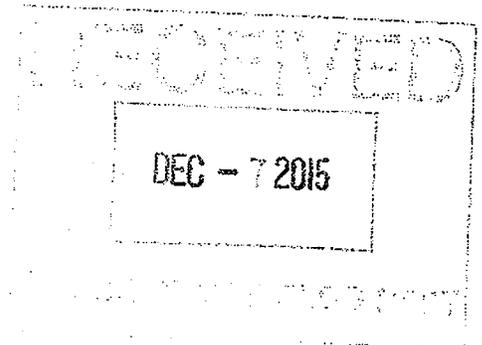


EXHIBIT 11

ATTACHMENT 7

BOARD OF DIRECTORS

Greg O'Sullivan
President
David LaCaro
Vice President

Judith Dietch
Director
Geoff English
Director
John T. Gannon, Jr.
Director



STAFF

Jeff Britz
General Manager

Bettina L. Mayer, P.E.
District Engineer

Laurie A. Ion
Assistant to GM/
Board Secretary

Jay Short
Utilities Supervisor

Natalie Klock
Finance Officer

Keith Aggson
Interim Fire Chief

Melissa Johnson
Recreation Supervisor

TEMPLETON COMMUNITY SERVICES DISTRICT

P.O. BOX 780 • 420 CROCKER STREET • TEMPLETON, CA 93465 • (805) 434-4900 • FAX: (805) 434-4820
www.templetoncsd.org

October 17th, 2014

Mr. Robert Winslow
9700 El Camino Real
Atascadero, Ca 93422

RE: New Development – 040-280-056 – 1155 Las Tablas Road

Dear Mr. Winslow,

The Development Plans submitted July 1st, 2014 for the Behavioral Health Hospital Facility and Assisted Living Facility project have been reviewed by the Templeton Fire Department. Based on a review of those plans and in accordance with the 2013 California Fire Code, as amended, the Templeton Fire Department will require the following for the lot split:

1. Confirm access to construction site during the lot split phase.
2. A minimum of an all-weather surface road and all fire hydrants are to be in place prior to any framing construction.
3. Parking will only be allowed in designated locations.
4. We are requesting that the landscape plan for the driveways limit the use of trees with canopies that will encroach into the drive-able area.

Please feel free to contact me at (805) 434-4911 if you have any questions.

Sincerely,

Keith Aggson - Interim Fire Chief

Cc: Jeff Britz, General Manager
Tina Mayer, District Engineer

EXHIBIT 12

Let's be informed about the issues regarding the Behavioral Health Hospital proposed in Templeton

The Hospital

- The Behavioral Health Hospital (Hospital) will provide private, acute, mental health care treatment to children, adolescents, adults, seniors and veterans who are your friends, neighbors and/or family members currently living in our community.
- This is a secure facility where patients will receive treatment for common behavioral health issues such as depression, anxiety and suicidal thoughts. The Hospital is not a forensic facility; a forensic facility treats criminals.
- When a patient is discharged, they must be returned to their residence of origin where they will receive continued treatment from their regular physician or transferred to a long term facility. They will not be released onto the streets of Templeton.

Our School District

- The Hospital will not adversely impact Templeton Unified School District's (TUSD) budget. If a child is admitted from outside TUSD's boundaries, the CEO of Vizion Health has offered to enter into a contract with TUSD to cover the cost for students who reside outside of TUSD.

Compliance with Templeton Community Design Plan

- **Office and Professional Zoning:** The project is located in Templeton in the area designated as the regional medical center by the Templeton Community Design Plan not in a residential area; it is located across the street from Twin Cities Community Hospital.
- **Parking:** The Hospital and the Memory Care/Assisted Living Facility are located on separate parcels but share a common access driveway, interior circulation and parking area. Templeton's Community Design Plan encourages shared parking.
- **Toad Creek:** The Hospital and the Assisted Living Facility buildings are sited outside the sensitive riparian areas. They are stepped in elevation to blend with the existing sloping topography creating a gradual transition between the proposed building areas and the riparian areas. Additionally, the riparian area will be enhanced through the project's landscaping since it will be an integral view shed to the Assisted Living Facility's wandering garden courtyard.

Size of the proposed Hospital

- According to the California Hospital Association Study, a county should have a minimum of 50 psychiatric beds per 100,000 population. This means that our county should have a minimum of 136 beds. The proposed Hospital accommodates 90 beds and is similar in size to Vineyard Hills Skilled Nursing Home which has 99 beds.

Patients

- Veterans will be admitted under the new VA Choice Program and Tricare and through private insurance. Children, adolescents and seniors will be accepted under MediCal. Federal law prohibits adults from being accepted under MediCal.

- 3
- Last year, the County's Behavioral Health Department referred 350 patients for treatment to facilities outside our county; this number does not include patients referred by private professionals. Obtaining treatment outside our county creates a huge burden on our residents and their families. Our County needs to provide local mental health services for their residents.

Jobs

- The creation of this state-of-the-art Hospital will be a tremendous benefit in bringing much needed new jobs to our area. The Hospital will employ approximately 200 professionals and vocational workers.

Impacts on local resources

- **Water/Sewer & Fire:** The project has a "will serve" letter from Templeton Community Services District for water and sewer and the fire plan has been approved by Templeton's Fire Department.
- **Traffic:** An independent traffic study was prepared and the project's projected traffic does not exceed the limits of Las Tablas Road; the study was reviewed and approved by the County's Public Work's Department.
- **Public Services:** The police and sheriff currently assist patients in crisis by transporting them to Twin Cities Hospital.
- **Storm water Drainage and Retention:** The project's storm water detention and retention basins comply with the County's Public Works Department's requirements and were designed by a local registered civil engineer.

Business Plan / Compliance with the County's Economic Element

- The County's Economic Element recognized five industry clusters that are responsible for ninety percent of the county's economic vitality; the Health Service industry is one of these clusters. Approval of the Hospital will create jobs for local residents. These jobs create tax revenues that pay for local public services. Also, these jobs/income allow residents to buy products and services from local suppliers which creates a ripple effect benefiting every business in the county.

This flyer is distributed to you from Dr. Harvey Billig who prior to his retirement held his medical practice here in Templeton for 25 years. Melanie Billig's career entailed public service on city council and mayor of San Luis Obispo.

Please send your letters of support to: County Planning & Building Department
976 Osos Street #200
San Luis Obispo, CA 93408
Attn.: Ms. Holly Phipps, Room #300

Or email to: Holly Phipps at hphipp@co.slo.ca.us
Frank Mecham at fmecham@co.slo.ca.us
Debbie Arnold at darnold@co.slo.ca.us

Dr. Billig and Melanie thank you for your support!

PRSR STD U.S. POSTAGE PAID Permit #4 93449
--

ECRWSS

----- ECRWSS EDDM -----
Postal Customer
Templeton, CA 93465

EXHIBIT 13

ATTACHMENT 7

April 27, 2015

Via Certified Mail

Joe Koski, Ed.D.
Superintendent
Templeton Unified School District
960 Old County Road
Templeton, CA 93465

Re: Mitigation of the Behavioral Health Hospital's Financial Impact on the Templeton Unified School District

Dear Dr. Koski:

A few days ago I received from a Templeton resident a copy of your March 9, 2015 letter from the Templeton Unified School District (TUSD) Board to the Board of Supervisors and Planning Commission concerning the potential for budgetary impacts relating to students from outside of TUSD who may be admitted to the proposed Behavioral Health Hospital. I was surprised not to have received this too. I understand the concern that you, the TUSD and Templeton residents have about this potential budgetary issue. I called your office numerous times in February and early March to discuss this issue with you. My calls were not returned.

March 16
As a result of my inability to communicate with you directly, I sent you an email dated March 19, 2015 (attached) stating that Vizion Health would pay for the cost of educating students who stay over 14 days in our proposed facility and who are residents outside of the TUSD. I also suggested in this letter that we formalize this intent in a contract (see attached email correspondence dated March 19, 2015). This offer still stands.

In the interim, I have spoken with several expert and other treatment facilities regarding these issues, length of stay, and school district residency requirements and reimbursement. My research has reaffirmed my conviction that generally there will be no need for services from the TUSD for students admitted to the hospital.

The proposed hospital is for acute behavioral health patients who are in crisis. Half of the beds are for children and adolescents. At this hospital, people come for evaluation, stabilization, treatment and then are referred to a long-term care facility or return home to their doctor's care. The maximum stay at our crisis care center is for 14 days. Most patients are there 5 to 8 days.

ATTACHMENT 7

The typical patient that comes to us is one who is depressed, has suicidal thoughts, and/or suffers from serious anxiety.

I hope this letter assures the TUSD, the residents of Templeton and you that Vizion Health is prepared to bear the expense for children and adolescents admitted to the hospital as expressed above and in my previous email.

Please let me know how you would like to proceed.

Sincerely,

Mark Schneider
President

cc: San Luis Obispo County Board of Supervisors
San Luis Obispo County Planning Commission
Ms. Holly Phipps, County Planner
Dr. & Mrs. Harvey Billig

Mon, Mar 16, 2015 10:10 am

Subject: Students at proposed acute mental health facility

From medforce medforce@aol.com

To jkoski jkoski@templetonusd.org

Cc hbillig hbillig@sbcglobal.net, smchesney smchesney@hotmail.com, annmiller916 annmiller916@gmail.com

Dr, Koski,

I hope this finds you well. I haven't spoken to you in a couple of weeks, but have done some research regarding children and adolescents that might be admitted to the proposed acute mental health hospital in Templeton.

After discussing the admission criteria, length of stay and home school district residency with several experts and treatment facilities, I have reaffirmed my conviction that there will be no need for services from the Templeton School District for the children admitted to the facility. They will either stay less than 14 days (by far the most likely scenario) or be too sick to attend any educational experience if they stay longer. I presume your research has reached the same conclusion. (This would not be the case for children placed in a Residential Treatment Facility with lengths of stay approaching 30-60 days. We are NOT that type of facility, and will not be licensed as such.)

However, to discourage any pessimism or confusion regarding this conclusion, Vizion wants to assure you that we are prepared to bear the expense of the outliers to the above scenario. Of course, we'll need to contract with you to memorialize this. Please let me know how you would like to proceed.

Sincerely,

Mark Schneider, CEO
Vizion Health
504 7178614

EXHIBIT 14



City of Santa Barbara

Police Department

www.sbpd.com
www.SantaBarbaraCA.gov

James Sanchez

Chief's Office
Tel: 805.897.2395
Fax: 805.897.2439

March 17, 2015

General Information
Tel: 805.897.2300
Fax: 805.897.2434

Ms. Holly Phipps, MCRP
County of San Luis Obispo
976 Osos Street, Room 300
San Luis Obispo, CA 93408

Animal Control
Tel: 805.963.1513
Fax: 805.963.1514

Dear Ms. Phipps,

Business Office
Tel: 805.897.2400
Fax: 805.897.2420

I am Chief of Police for the Santa Barbara Police Department. I understand you are the County of San Luis Obispo's Project Planner for a new non-forensic acute care psychiatric facility being proposed in Templeton, CA.

Community Services
Tel: 805.897.3717
Fax: 805.897.3733

The Architect for that project (Jan Hochhauser) contacted me inquiring about the Police Department's experience regarding facilities that service individuals with a need for mental health care in our community.

Dispatch
Tel: 805.897.2410
Fax: 805.897.2302

I worked with Jan Hochhauser when the Mental Health Association facility was proposed and approved on Garden Street. I am also familiar with the psychiatric unit at Santa Barbara Cottage Hospital, where we have an outstanding relationship.

Office of Emergency Services
Tel: 805.879.3725
Fax: 805.897.2420

Often the public has concerns about impacts to safety and security in neighborhoods around or near these facilities. My experience in Santa Barbara indicates that, in fact, there are no exacerbated threats to the public in neighborhoods around these facilities that provide mental health care. The Police Department's records / incident reporting does not indicate such a problem due to the presence of these facilities.

Parking
Tel: 805.897.2360
Fax: 805.897.2437

Furthermore, I believe that the ability to provide mental health care is a valuable resource that contributes to the general health, well-being, and public safety for our community.

Patrol
Tel: 805.897.2392
Fax: 805.897.2434

Should you have further questions, please do not hesitate to contact me.

Records
Tel: 805.897.2355
Fax: 805.897.2434

Sincerely,

Cam Sanchez

CS/bas

215 E. Figueroa St.
Santa Barbara, CA
93101

PO Box 539
Santa Barbara, CA
93102-0539

EXHIBIT 15

On Jan 14, 2016, at 11:37 AM, Chief <Chief@templetoncsd.org> wrote:

Jim,

I must apologize for not getting back to you sooner. The document you have attached to this email is the only correspondence from the Templeton Fire Department which gives very basic requirements. Once a full set of plans is received/submitted to the Templeton Fire Department and since we are the fire protection agency with jurisdiction, we will review the plans for adherence to the Fire Code. Finally, approval is not discretionary. If the plans comply with the Fire Code, they will be approved.

Please let me know, if you have any further questions.

Thank you.

Bill White – Fire Chief
Templeton Fire Department
206 5th St, Templeton, CA 93465

Work: (805) 434-4911
Email: Chief@templetoncsd.org
<http://www.templetoncsd.org>

<image001.png> *Community, Service and Protection*

EXHIBIT 16



To the County Air Pollution Control Officer:

4 December 2015

The proposed hospital in Templeton is planned and designed to have a maximum capacity of 91 patients. This is 46 beds less than the minimum suggested number of beds for San Luis Obispo County. The California Hospital Association has calculated a need for 138 acute psychiatric beds for San Luis Obispo County. So has the County's own Behavioral Health Integration Project Report.

Although we will not deny admission to this facility from other areas, our operational plan is designed to serve the residents of SLO County. It is not designed or intended for patients outside of the county.

Right now, residents seeking inpatient treatment from SLO County must travel hundreds of miles in their personal vehicles to be admitted. Their family, co-workers and friends must also make that trip. I have spoken to facilities as far south as Los Angeles and as far north as Santa Rosa who regularly admit patients from SLO County now because of the lack of services in SLO County. That means upwards of six hours on the road for each patient trip taken to far away facilities.

Behavioral health hospitals do not function like acute medical-surgical hospitals such as Twin Cities or French. Behavioral health hospitals do not have emergency rooms, ob-gyn services, radiology, etc. All of these are major traffic generators.

Patient stays at behavioral health hospitals average 5-10 days with emphasis on patient assessment, stabilization, treatment and discharge planning. Visitors are not encouraged due to the intensive care and need for stabilization. Comparing these two types of health care facilities is like comparing apples and oranges in terms of vehicle trip impact.

I cannot stress enough that the impact on traffic on the roads of California and San Luis Obispo County will be a positive one.

Sincerely,

A handwritten signature in black ink, appearing to read "Mark E Schneider".

Mark E Schneider
CEO and Founder
Vizion Health



San Luis Obispo County Department of Planning and Building
County Government Center San Luis Obispo, California 93408 Telephone: (805) 781-5600

Receipt #: 2220150000000002152
Date: 01/28/2016

1/28/2016
2:36:44PM

Line Items:

Case No	Last Name	Tran Code	Description	Revenue Account No	Amount Paid
		APPEAL	Appeal to Board of Supervisors Fee -	1420000-1000000000-142S23	850.00
			PDA -4350106		

Line Item Total: **\$850.00**

Payments:

Method	Payer	Bank No	Account No	Confirm No	How Received	Amount Paid
Check	E. MURRAY POWELL		1715		In Person	850.00

Payment Total: **\$850.00**
Balance