

***Cassie Cordell Trueblood, et al., v. Washington State Department of  
Social and Health Services, et al.***  
***Case No. C14-1178 MJP***  
**FINAL Monthly Report to the Court Appointed Monitor**

**September 30, 2019**

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**TABLE OF CONTENTS**

BACKGROUND ..... 4

CLASS MEMBER STATUS SUMMARY INFORMATION ..... 5

**ANALYSIS OF MATURE DATA: MAY 1, 2015 THROUGH JULY 31, 2019** ..... 5

**SUMMARY POINTS RELATED TO ORDERS AND TIMELINESS BASED ON MATURE JULY DATA** ..... 5

OUTLIER CASES (MATURE) – July 2019 ..... 7

CLASS MEMBER STATUS DATA TABLES ..... 8

CLASS MEMBER STATUS DATA GRAPHS ..... 17

TABLES 11-16: SUMMARY OF JAIL EVALUATIONS, IN-PATIENT EVALUATIONS, AND RESTORATIONS BY MONTH SINCE FEBRUARY 2016 ..... 20

RESOURCES REQUIRED TO PROVIDE TIMELY COMPETENCY SERVICES ..... 23

**FUNDING AND RESOURCES** ..... 23

**2019-2021 BIENNIAL BUDGET SUMMARY FOR TRUEBLOOD AGREED SETTLEMENT** ..... 23

**NEED PROJECTIONS AND BED CAPACITY** ..... 25

*TRUEBLOOD* KEY ACCOMPLISHMENTS – AUGUST 2019 ..... 26

**RECRUITING** ..... 26

**RESIDENTIAL TREATMENT FACILITIES (RTF’s) DATA** ..... 27

*TRUEBLOOD* IMPLEMENTATION STEPS TAKEN AND PLANNED – AUGUST 2019 ..... 28

JULY 7, 2016 CONTEMPT ORDER STATUS UPDATES ..... 46

AUGUST 15, 2016 ORDER MODIFYING PERMANENT INJUCTION AS TO IN JAIL COMPETENCY EVALUATIONS ..... 46

APPENDICES ..... 48

**Appendices A-G:** Data Tables; Class Member Evaluation/Restoration Information; Class Member Restoration Information for the Maple Lane, Yakima, & Fort Steilacoom Programs; and Percent of Court Orders Received Within Three Days ..... 48

**Appendix H:** Outliers and Delay Comments ..... 48

**Appendix I:** Calculation of Inpatient Contempt Fines ..... 48

**Appendix J:** Calculation of Jail-Based Contempt Fines ..... 48

**Appendix K:** Good Cause Exceptions ..... 48

**Appendix L:** Fort Steilacoom Competency Restoration Program Progress Report ..... 48

**Table of Tables and Figures**

**Table 1.** Outlier Cases (Mature) ..... 7

**Table 2.** Class Member Status Western State Hospital – Jail-based Competency Evaluations ..... 8

**Table 3.** Class Member Status Western State Hospital – Inpatient Competency Evaluation Services..... 9

**Table 4.** Class Member Status Western State Hospital and Residential Treatment Facilities – Inpatient Competency Restoration Services..... 10

**Table 5.** Class Member Status Eastern State Hospital – Jail-based Competency Evaluations..... 11

**Table 6.** Class Member Status Eastern State Hospital – Inpatient Competency Services ..... 12

**Table 7.** Class Member Status Eastern State Hospital – Inpatient Competency Restoration Services ..... 13

**Table 8.** Class Member Status at WSH and ESH (Totals) – Jail-based Competency Evaluations ..... 14

**Table 9.** Class Member Status at WSH and ESH State Hospital (Totals) – Inpatient Competency Evaluation ..... 15

**Table 10.** Class Member Status at WSH and ESH State Hospital, and RTFs (Totals) – Inpatient Competency Restoration Services..... 16

**Figure 1.** Evaluation Orders ..... 17

**Figure 2.** Restoration Orders..... 17

**Figure 3.** Evaluations – Median..... 18

**Figure 4.** Evaluations – Average..... 18

**Figure 5.** Restorations – Median ..... 19

**Figure 6.** Restorations – Average ..... 19

**Table 11/12.** Total Completed Jail Evaluation Orders by Month Court Order Signed ..... 20

**Table 13/14.** Total Completed Inpatient Evaluation Orders by Month Court Order Signed..... 21

**Table 15/16.** Total Completed Restoration Orders by Month Court Order Signed ..... 22

**Table 17.** Monthly RTF Data for Yakima ..... 27

**Table 18.** Monthly RTF Data for Maple Lane ..... 27

**Table 19.** Trueblood Implementation Steps ..... 28

**Table 20.** Court Order Status Updates..... 41

## BACKGROUND

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On April 2, 2015, the Court ordered the Department of Social and Health Services (DSHS) to file monthly reports with the *Trueblood* Court Monitor on efforts to comply with Court Orders to provide timely competency evaluation and restoration services to Class Members. This monthly report is submitted September 30, 2019 and covers the events of August 2019. This report also provides status updates on additional Court Order requirements.

On April 2, 2015, the Court ordered:

*Defendants shall file a report with the Monitor on the fifth day of every month, which shall include:*

- (1) the number of days between when a court ordered provision of competency services and when provision was completed, for each person ordered to receive competency services during the previous month;*
- (2) data regarding the number of evaluators, bed capacity, physicians, and other resources needed to provide timely competency services;*
- (3) the steps taken in the previous months to implement this order;*
- (4) when and what results are intended to be realized by each of these steps;*
- (5) the results realized in the previous month;*
- (6) the steps planned to be taken in the following month;*
- (7) certification by Defendants that they are fully compliant with all deadlines that became due in the previous month;*
- (8) Defendants' estimate for when the wait times will reach seven days or less, and all data relied on in making that estimate; and*
- (9) any other information the Monitor informs Defendants is necessary for the Monitor to fully review Defendants' actions and advise the Court.*

The April 2015 order was modified on February 8, 2016. Additional orders were issued on July 7, 2016, August 15, 2016, and April 26, 2017. Status updates on these orders requiring narrative in this report begin on page 48.

This report provides the Class Member data for competency services displayed in two periods: July 1, 2019 – July 31, 2019 and August 1, 2019 – August 31, 2019. The July data are considered “mature” and the August data are a “first look” data set. April 2015 is the baseline month for data analysis.

Specific Class Member evaluation and restoration information is included in the appendices to this report.

## CLASS MEMBER STATUS SUMMARY INFORMATION

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### ANALYSIS OF MATURE DATA: MAY 1, 2015 THROUGH JULY 31, 2019

Note: These data are based on number of days from signature and not the new timeframes as described in the April 26, 2017 Court Order.

The average monthly referrals for each type of service are as follows:

- Average monthly jail-based evaluation orders signed for April 2015-July 2019
  - Western State Hospital (WSH): 240.2
  - Eastern State Hospital (ESH): 57.4
  - Both hospitals: 297.6
- Average monthly inpatient evaluation orders signed for April 2015-July 2019
  - WSH: 16.0
  - ESH: 8.2
  - Both hospitals: 24.2
- Average monthly restoration orders signed for April 2015-July 2019
  - WSH: 82.6
  - ESH: 17.2
  - Both hospitals: 99.8
  - Hospitals + Residential Treatment Facility (RTF's): 106.7 \*
- Average monthly RTF restoration orders signed for August 2018-July 2019
  - RTF's: 30.0 \*\*

\* This figure includes orders from the Yakima, Maple Lane, and Fort Steilacoom RTF's; therefore, this figure exceeds the two hospital figures combined.

\*\* Prior to August 2018, RTF data was combined with WSH.

### SUMMARY POINTS RELATED TO ORDERS AND TIMELINESS BASED ON MATURE JULY DATA

#### Orders:

- The number of jail-based evaluation orders at WSH increased more than 20% to 388 in July from 306 the previous month. This is significantly higher than the 240.2 average. ESH saw a decrease to 82 orders from 95 the previous month, which continues well above the 57.4 average. Combined, the hospitals received 470 orders in July, which is also significantly above the 297.6 average.
- WSH received 4 inpatient evaluation orders which is substantially below the 16.0 average. ESH had 11 inpatient evaluation orders, which is higher than the 8.2 average. Orders at both sites totaled 15, which is significantly below the 24.2 average.
- WSH received 72 restoration orders, which is lower than the 82.6 average. ESH had 29 orders, which is significantly higher than the 17.1 average. The RTF's received 20 orders, which is below the monthly average of 30.0 \* orders. There were 121 restoration orders across both hospitals and the RTF's, which is also well above the 99.8 average for the hospitals as well as the 106.7 \* hospitals plus RTF's average.

#### Wait Times:

- Regarding jail-based 14 day evaluation completion times, WSH is at 12.3 days on average from order to completion and ESH is averaging 16.3 days. The combined average is 13.0 days.

- The average inpatient evaluation admission wait times at WSH is 46.6 days. ESH average is at 42.4 days. The combined average is 44.4 days.
- Restoration admission wait times at WSH is 37.4 days on average. The ESH average is 34.1 days. The combined average is 37.9 days.

**Timeliness:**

- At both hospitals combined, overall timeliness for jail-based evaluation completion is at a 69% completion rate within 14 days from receipt of order.
- At both hospitals combined, overall timeliness for inpatient evaluation admissions is at a 0% completion rate within 7 days from receipt of order.
- At both hospitals and the RTF's combined, overall timeliness for inpatient restoration admissions is at a 23% completion rate within 7 days.

\* Prior to August 2018, RTF data was included with the data for WSH.

## OUTLIER CASES (MATURE) – July 2019

Evaluations and restorations not completed within standard timelines become outliers. The monthly outlier population cases have been defined as:

- Population is active span cases from the “mature” data month. Currently, the “mature” month is July 2019 (The month before the most recently completed month.).
- Evaluation spans: are incomplete, or were completed after the end of the “mature” month and wait more than 20-days for an evaluation (In-Jail), or admission (Inpatient), or a change of client status to out of jail, or order withdrawn by court.
- Restoration spans: are incomplete, or were completed after the end of the “mature” month and wait more than 40-days for admission, or a change of client status to out of jail, or order withdrawn by the court.

**Table 1.** Outlier Cases (Mature)

Table 1. Outliers for the Month of: July-19			
Type	Number of spans:	span begin to span end, or end of reporting period	
		Minimum Number of days	Maximum Number of days
In-Jail Evaluations	3	21	22
Inpatient Evaluations	19	21	107
Restorations	50	41	162

Table 1. Summary of Delay Reasons <sup>1</sup>			
REASONS FOR DELAY IN DATABASE	In-Jail Evaluations	Inpatient Evaluations	Restorations
Attorney No Show			
Attorney scheduling conflicts			
Bed availability		17	50
Charges adjudicated prior to eval			
Client released from custody & can't be located			
Defendant No Show			
Defendant Reschedule			
Defendant would not cooperate with evaluation			
Defendant would not participate without attorney present	1		
Defense Expert scheduling			
Evaluator availability			
Evaluator rejected by prosecutor			
Interpreter needed but court order did not request it			
Interpreter scheduling conflicts			
Jail conference room availability/scheduling issues			
Jail return/Discharge with no eval done			
Jail/Outside facility staffing issues			
Medical Record/Collateral Information			
New charges - wait for new court order			
Other patient cooperation problem	1		
Police reports availability		2	
Processor error/clerical error			
Relevant discovery availability			
Requires amended court order			
unknown	1		

<sup>1</sup>An incomplete case may have more than one delay reason. Therefore, the number of delay reasons may be greater than the number of outlier cases.

## CLASS MEMBER STATUS DATA TABLES

The following series of tables present class member status data for August. August data are “first look” and are subject to change.

**Table 2. Class Member Status Western State Hospital – Jail-based Competency Evaluations**

TABLE 2. Class Member Status Western State Hospital – Jail-based Competency Evaluations <sup>1</sup>													
MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		within 14 days from order signature date <sup>5,6</sup>	within 14 days from receipt of order <sup>5,6</sup>	within 14 days from receipt of order or 21 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Aug-18	312	0.3	0.0	0.7	0.0	n/a	n/a	330	10.4	10.0	94%	94%	94%
Sep-18	238	0.4	0.0	0.7	0.0	n/a	n/a	243	10.3	10.0	92%	94%	94%
Oct-18	305	0.5	0.0	0.7	0.0	n/a	n/a	290	11.1	11.0	89%	93%	93%
Nov-18	250	0.5	0.0	0.8	0.0	n/a	n/a	274	12.7	13.0	75%	78%	80%
Dec-18	226	0.5	0.0	0.7	0.0	n/a	n/a	230	10.9	11.0	90%	94%	95%
Jan-19	291	0.3	0.0	0.6	0.0	n/a	n/a	262	11.2	12.0	83%	86%	86%
Feb-19	233	0.5	0.0	1.0	0.0	n/a	n/a	230	12.5	12.0	78%	83%	84%
Mar-19	308	0.6	0.0	1.0	0.0	n/a	n/a	294	11.9	12.0	83%	86%	87%
Apr-19	323	0.4	0.0	0.7	0.0	n/a	n/a	347	11.8	12.0	82%	86%	86%
May-19	326	0.5	0.0	0.9	0.0	n/a	n/a	322	12.3	13.0	79%	84%	85%
Jun-19	306	0.7	0.0	1.0	0.0	n/a	n/a	279	12.8	13.0	75%	82%	84%
Jul-19	388	0.6	0.0	1.0	0.0	n/a	n/a	379	12.3	13.0	75%	79%	80%
Aug-19	363	0.6	0.0	1.0	0.0	5.0	3.0	360	11.7	12.0	81%	86%	89%

<sup>1</sup>Data before - AUG-2018 is previously reported data from the legacy data systems. Data from AUG-2018 onward, is updated data pulled from the new BHA - Forensic Data System and is based on the number of periods individuals waited for competency services in jail.

<sup>2</sup>Court Orders Signed is the number of court orders signed in the specified month and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month because a class member entered jail from the community while awaiting a court-ordered competency service.

<sup>3</sup>"Days from order signature to" represents the number of days from the beginning of a period of waiting in jail for competency services to the specified timeframe (i.e., hospital receipt of order, hospital receipt of discovery, end of reporting month of incomplete referrals, and completion (or the end of a period of waiting in jail for competency services)).

<sup>4</sup>Court Orders Completed is the number of cases completed in the month specified. Cases are completed if the report is sent to the court, the order is withdrawn or dismissed, or the client is no longer waiting for services in jail. Counts prior to AUG-18 are taken from previously reported classmember populations provided with monthly court report submissions. Counts since AUG-18 are from data recorded in the BHA Forensic Data System.

<sup>5</sup>From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: completion and the percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

<sup>6</sup>From April 2015 to June 2016, the in-jail evaluation compliance deadline was within 7 days from court order signature date, and from July 2016 to April 2017, the in-jail evaluation compliance deadline was within 14 days from court order signature date. As of May 2017, DSHS compliance data are calculated and summarized in this table based on the modified deadline for in-jail competency evaluations outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389, stating: "DSHS shall complete in-jail competency evaluations within the shorter of either a) 14 days from receipt of order or b) 21 days from signature of order". To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 14 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 14 days from the beginning or notification of a period of waiting in jail). The second is percentage of all orders completed within either of the two compliance deadlines: 14 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 14 days from the beginning or notification of a period of waiting in jail) or 21 days from order signature date (if the order was received after 7 days from order signature date). In addition, starting in August 2018, the in-jail evaluation compliance calculations are adjusted based on Good Cause Extensions granted by the court.



**Table 3. Class Member Status Western State Hospital – Inpatient Competency Evaluation Services**

TABLE 3. Class Member Status Western State Hospital – Inpatient Competency Services (Inpatient Evaluations) <sup>1</sup>													
MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		Percent complete within 7 days from order signature date <sup>5,6</sup>	Percent completed within 7 days from receipt of order <sup>5,6</sup>	Percent completed within 7 days from receipt of order or within 14 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Aug-18	8	1.5	0.0	0.1	0.0	n/a	n/a	9	46.2	48.0	0%	0%	0%
Sep-18	8	1.3	0.0	0.3	0.0	n/a	n/a	11	51.5	50.0	0%	0%	0%
Oct-18	14	0.7	0.0	0.6	0.0	n/a	n/a	13	48.0	47.0	0%	0%	0%
Nov-18	13	2.1	0.5	2.1	0.5	n/a	n/a	12	37.4	38.0	0%	0%	0%
Dec-18	11	2.1	0.0	2.1	0.0	n/a	n/a	13	36.5	36.0	0%	0%	0%
Jan-19	17	2.8	0.0	3.1	0.0	n/a	n/a	15	33.6	41.0	13%	13%	13%
Feb-19	10	3.3	0.0	3.6	0.0	n/a	n/a	12	40.7	48.5	8%	8%	8%
Mar-19	11	3.3	0.0	3.7	0.0	n/a	n/a	19	28.9	30.0	26%	26%	26%
Apr-19	11	5.4	0.0	5.7	0.0	136.5	136.5	10	24.8	20.0	10%	10%	10%
May-19	15	3.8	0.0	4.6	0.0	129.3	135.0	5	22.8	14.0	20%	20%	20%
Jun-19	11	3.1	0.0	4.8	0.5	129.3	135.0	11	31.0	36.0	9%	9%	9%
Jul-19	4	5.3	0.0	7.4	0.0	129.3	135.0	10	46.6	49.5	0%	0%	0%
Aug-19	18	4.1	0.0	5.2	0.0	32.6	16.0	11	47.7	54.0	9%	9%	9%

<sup>1</sup>Data before - AUG-2018 is previously reported data from the legacy data systems. Data from AUG-2018 onward, is updated data pulled from the new BHA - Forensic Data System and is based on the number of periods individuals waited for competency services in jail.

<sup>2</sup>Court Orders Signed is the number of court orders signed in the specified month and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month because a class member entered jail from the community while awaiting a court-ordered competency service.

<sup>3</sup>"Days from order signature to" represents the number of days from the beginning of a period of waiting in jail for competency services to the specified timeframe (i.e., hospital receipt of order, hospital receipt of discovery, end of reporting month of incomplete referrals, and completion (or the end of a period of waiting in jail for competency services)).

<sup>4</sup>Court Orders Completed is the number of cases completed in the month specified. Cases are completed if the client is admitted for services, the order is withdrawn or dismissed, or the client is no longer waiting for services in jail. Counts prior to AUG-18 are taken from previously reported classmember populations provided with monthly court report submissions. Counts since AUG-18 are from data recorded in the BHA Forensic Data System.

<sup>5</sup>From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: completion and the percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

<sup>6</sup>From April 2015 April 2017, the inpatient evaluation and restoration compliance deadline was within 7 days from court order signature date. As of May 2017, DSHS compliance data are calculated and summarized in this table based on the modified deadline for inpatient competency evaluation and restoration services outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389, stating: "DSHS shall complete inpatient competency evaluation and restorations within the shorter of either a) 7 days from receipt of order or b) 14 days from signature of order". To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail). The second is percentage of all orders completed within either of the two compliance deadlines: 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail) or 14 days from order signature date (if the order was received after 7 days from order signature date).

**Table 4. Class Member Status Western State Hospital and Residential Treatment Facilities – Inpatient Competency Restoration Services**

**TABLE 4. Class Member Status Western State Hospital – Inpatient Competency Services (Restorations)<sup>1</sup>**

MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		Percent complete within 7 days from order signature date <sup>5,6</sup>	Percent completed within 7 days from receipt of order <sup>5,6</sup>	Percent completed within 7 days from receipt of order or within 14 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Aug-18	71	1.6	0.0	2.5	0.0	n/a	n/a	61	54.1	56.0	21%	20%	21%
Sep-18	43	1.8	0.0	3.1	0.0	n/a	n/a	55	72.3	78.0	7%	7%	7%
Oct-18	73	1.9	0.0	2.8	0.0	n/a	n/a	77	60.5	54.0	16%	16%	16%
Nov-18	62	1.8	0.0	2.2	0.0	n/a	n/a	70	57.4	50.0	0%	20%	20%
Dec-18	74	1.9	0.0	2.1	0.0	n/a	n/a	65	46.9	29.0	28%	31%	34%
Jan-19	82	1.8	0.0	1.9	0.0	n/a	n/a	81	52.1	42.0	27%	28%	28%
Feb-19	86	0.8	0.0	0.9	0.0	n/a	n/a	81	47.8	41.0	21%	25%	25%
Mar-19	89	1.5	0.0	1.5	0.0	n/a	n/a	110	38.4	31.5	20%	21%	23%
Apr-19	93	1.9	0.0	1.8	0.0	n/a	n/a	69	36.4	36.0	29%	29%	29%
May-19	86	1.9	0.0	1.8	0.0	114.0	114.0	88	39.6	35.5	20%	20%	20%
Jun-19	84	1.9	0.0	2.1	0.0	77.3	76.5	110	47.5	49.0	17%	18%	19%
Jul-19	72	1.4	0.0	1.7	0.0	55.9	53.0	71	37.4	39.0	27%	25%	27%
Aug-19	102	0.8	0.0	1.0	0.0	30.8	24.0	65	42.6	47.0	23%	25%	26%

<sup>1</sup>Data before - AUG-2018 is previously reported data from the legacy data systems and includes both WSH and RTF data for those months in this table. Data from AUG-2018 onward, is updated data pulled from the new BHA - Forensic Data System, is based on the number of periods individuals waited for competency services in jail, and only includes WSH data for those months in this table.

<sup>2</sup>Court Orders Signed is the number of court orders signed in the specified month and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month because a class member entered jail from the community while awaiting a court-ordered competency service.

<sup>3</sup>Days from order signature to<sup>3</sup> represents the number of days from the beginning of a period of waiting in jail for competency services to the specified timeframe (i.e., hospital receipt of order, hospital receipt of discovery, end of reporting month of incomplete referrals, and completion (or the end of a period of waiting in jail for competency services)).

<sup>4</sup>Court Orders Completed is the number of cases completed in the month specified. Cases are completed if the client is admitted for services, the order is withdrawn or dismissed, or the client is no longer waiting for services in jail. Counts prior to AUG-18 are taken from previously reported classmember populations provided with monthly court report submissions. Counts since AUG-18 are from data recorded in the BHA Forensic Data System.

<sup>5</sup>From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: completion and the percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

<sup>6</sup>From April 2015 April 2017, the inpatient evaluation and restoration compliance deadline was within 7 days from court order signature date. As of May 2017, DSHS compliance data are calculated and summarized in this table based on the modified deadline for inpatient competency evaluation and restoration services outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389, stating: "DSHS shall complete inpatient competency evaluation and restorations within the shorter of either a) 7 days from receipt of order or b) 14 days from signature of order". To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail). The second is percentage of all orders completed within either of the two compliance deadlines: 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail) or 14 days from order signature date (if the order was received after 7 days from order signature date).

**TABLE 4. Class Member Status Residential Treatment Facilities – Inpatient Competency Services (Restorations)<sup>1</sup>**

MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		Percent complete within 7 days from order signature date <sup>5,6</sup>	Percent completed within 7 days from receipt of order <sup>5,6</sup>	Percent completed within 7 days from receipt of order or within 14 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Aug-18	27	1.6	0.0	0.9	0.0	n/a	n/a	20	24.7	24.0	5%	5%	5%
Sep-18	34	1.6	0.0	1.4	0.0	n/a	n/a	22	29.5	31.0	18%	14%	18%
Oct-18	43	1.5	0.0	1.5	0.0	n/a	n/a	31	28.2	32.0	13%	13%	13%
Nov-18	24	1.4	0.0	1.4	0.0	n/a	n/a	25	29.6	26.0	0%	12%	12%
Dec-18	32	1.2	0.0	1.3	0.0	n/a	n/a	32	42.2	41.5	25%	25%	25%
Jan-19	27	2.2	0.0	2.7	0.0	n/a	n/a	29	62.4	69.0	14%	10%	14%
Feb-19	23	0.9	0.0	1.3	0.0	193.0	193.0	25	56.2	63.0	20%	20%	20%
Mar-19	32	0.8	0.0	1.2	0.0	193.0	193.0	34	42.0	42.0	21%	21%	21%
Apr-19	39	1.7	0.0	1.8	0.0	193.0	193.0	33	32.7	40.0	30%	27%	30%
May-19	30	2.4	0.0	2.1	0.0	193.0	193.0	33	39.9	46.0	18%	18%	21%
Jun-19	29	2.1	0.0	2.2	0.0	193.0	193.0	26	41.6	48.5	19%	19%	19%
Jul-19	20	2.2	0.0	2.3	0.0	193.0	193.0	40	41.5	45.5	18%	18%	20%
Aug-19	8	3.6	0.0	3.5	0.0	193.0	193.0	30	42.2	47.5	23%	23%	23%

<sup>1</sup>Data before - AUG-2018 is not included because during those months, the RTF data was combined with the WSH data. Data from AUG-2018 onward, is updated data pulled from the new BHA - Forensic Data System and is based on the number of periods individuals waited for competency services in jail.

<sup>2</sup>Court Orders Signed is the number of court orders signed in the specified month and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month because a class member entered jail from the community while awaiting a court-ordered competency service.

<sup>3</sup>Days from order signature to<sup>3</sup> represents the number of days from the beginning of a period of waiting in jail for competency services to the specified timeframe (i.e., hospital receipt of order, hospital receipt of discovery, end of reporting month of incomplete referrals, and completion (or the end of a period of waiting in jail for competency services)).

<sup>4</sup>Court Orders Completed is the number of cases completed in the month specified. Cases are completed if the client is admitted for services, the order is withdrawn or dismissed, or the client is no longer waiting for services in jail. Counts prior to AUG-18 are taken from previously reported classmember populations provided with monthly court report submissions. Counts since AUG-18 are from data recorded in the BHA Forensic Data System.

<sup>5</sup>From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: completion and the percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

<sup>6</sup>From April 2015 April 2017, the inpatient evaluation and restoration compliance deadline was within 7 days from court order signature date. As of May 2017, DSHS compliance data are calculated and summarized in this table based on the modified deadline for inpatient competency evaluation and restoration services outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389, stating: "DSHS shall complete inpatient competency evaluation and restorations within the shorter of either a) 7 days from receipt of order or b) 14 days from signature of order". To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail). The second is percentage of all orders completed within either of the two compliance deadlines: 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail) or 14 days from order signature date (if the order was received after 7 days from order signature date).

**Table 5. Class Member Status Eastern State Hospital – Jail-based Competency Evaluations**

TABLE 5. Class Member Status Eastern State Hospital – Jail-based Competency Evaluations <sup>1</sup>													
MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		within 14 days from order signature date <sup>5,6</sup>	within 14 days from receipt of order <sup>5,6</sup>	within 14 days from receipt of order or 21 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Aug-18	79	0.9	0.0	5.5	0.0	n/a	n/a	61	11.8	12.0	84%	90%	90%
Sep-18	59	1.2	0.0	2.0	1.0	n/a	n/a	68	15.5	14.0	57%	65%	65%
Oct-18	87	1.0	0.0	1.5	1.0	n/a	n/a	81	13.0	13.0	70%	79%	79%
Nov-18	62	1.3	0.0	2.1	1.0	n/a	n/a	59	13.7	14.0	59%	66%	68%
Dec-18	56	1.0	0.0	1.9	1.0	n/a	n/a	78	13.9	13.0	69%	76%	77%
Jan-19	67	1.1	0.0	2.2	1.0	n/a	n/a	56	10.6	9.5	73%	75%	79%
Feb-19	61	1.8	0.0	3.0	1.0	n/a	n/a	56	14.0	14.0	61%	71%	71%
Mar-19	73	1.4	0.0	3.0	1.0	n/a	n/a	64	15.5	14.0	59%	70%	72%
Apr-19	69	1.3	0.0	2.6	1.0	n/a	n/a	77	13.1	13.0	68%	71%	77%
May-19	84	1.2	0.0	2.3	1.0	n/a	n/a	78	13.0	13.0	81%	87%	87%
Jun-19	95	1.1	0.0	1.9	1.0	n/a	n/a	94	12.9	14.0	69%	71%	79%
Jul-19	82	1.3	0.0	2.0	1.0	n/a	n/a	86	16.3	15.0	43%	51%	58%
Aug-19	81	0.4	0.0	0.7	0.0	4.0	3.0	87	11.2	10.0	70%	71%	83%

<sup>1</sup>Data before - AUG-2018 is previously reported data from the legacy data systems. Data from AUG-2018 onward, is updated data pulled from the new BHA - Forensic Data System and is based on the number of periods individuals waited for competency services in jail.

<sup>2</sup>Court Orders Signed is the number of court orders signed in the specified month and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month because a class member entered jail from the community while awaiting a court-ordered competency service.

<sup>3</sup>"Days from order signature to" represents the number of days from the beginning of a period of waiting in jail for competency services to the specified timeframe (i.e., hospital receipt of order, hospital receipt of discovery, end of reporting month of incomplete referrals, and completion (or the end of a period of waiting in jail for competency services)).

<sup>4</sup>Court Orders Completed is the number of cases completed in the month specified. Cases are completed if the report is sent to the court, the order is withdrawn or dismissed, or the client is no longer waiting for services in jail. Counts prior to AUG-18 are taken from previously reported classmember populations provided with monthly court report submissions. Counts since AUG-18 are from data recorded in the BHA Forensic Data System.

<sup>5</sup>From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: completion and the percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

<sup>6</sup>From April 2015 to June 2016, the in-jail evaluation compliance deadline was within 7 days from court order signature date, and from July 2016 to April 2017, the in-jail evaluation compliance deadline was within 14 days from court order signature date. As of May 2017, DSHS compliance data are calculated and summarized in this table based on the modified deadline for in-jail competency evaluations outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389, stating: "DSHS shall complete in-jail competency evaluations within the shorter of either a) 14 days from receipt of order or b) 21 days from signature of order". To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 14 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 14 days from the beginning or notification of a period of waiting in jail). The second is percentage of all orders completed within either of the two compliance deadlines: 14 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 14 days from the beginning or notification of a period of waiting in jail) or 21 days from order signature date (if the order was received after 7 days from order signature date). In addition, starting in August 2018, the in-jail evaluation compliance calculations are adjusted based on Good Cause Extensions granted by the court.

**Table 6. Class Member Status Eastern State Hospital – Inpatient Competency Services**

TABLE 2b. Class Member Status Eastern State Hospital – Inpatient Competency Services (Inpatient Evaluations) <sup>1</sup>													
MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		Percent complete within 7 days from order signature date <sup>5,6</sup>	Percent completed within 7 days from receipt of order <sup>5,6</sup>	Percent completed within 7 days from receipt of order or within 14 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Jul-18	9	0.4	0.0	2.3	1.0	20.0	20.0	12	16.7	16.0	20%	20%	20%
Aug-18	9	0.3	0.0	0.6	1.0	n/a	n/a	9	27.2	33.0	11%	11%	11%
Sep-18	5	3.0	0.0	4.4	0.5	n/a	n/a	7	21.4	23.0	0%	0%	0%
Oct-18	8	2.5	0.0	3.9	1.0	n/a	n/a	8	13.9	15.5	38%	38%	50%
Nov-18	13	0.2	0.0	0.5	0.5	n/a	n/a	12	19.1	17.0	0%	17%	17%
Dec-18	15	0.5	0.0	2.1	1.0	n/a	n/a	10	19.0	18.5	10%	10%	20%
Jan-19	6	0.7	0.0	1.5	1.0	n/a	n/a	11	28.6	29.0	0%	0%	9%
Feb-19	5	1.2	1.0	1.0	1.0	n/a	n/a	5	18.6	18.0	0%	0%	0%
Mar-19	17	1.4	0.0	2.0	1.0	n/a	n/a	9	15.3	15.0	33%	33%	56%
Apr-19	15	4.0	0.0	4.2	1.0	n/a	n/a	8	25.5	25.5	13%	13%	13%
May-19	9	3.6	0.0	3.6	1.0	n/a	n/a	17	41.8	47.0	6%	6%	6%
Jun-19	9	4.3	0.0	3.8	1.0	43.0	48.0	8	49.0	50.5	0%	0%	0%
Jul-19	10	4.1	0.0	0.6	0.0	26.6	26.0	11	42.4	42.0	0%	0%	9%

<sup>1</sup>Data before - AUG-2018 is previously reported data from the legacy data systems. Data from AUG-2018 onward, is updated data pulled from the new BHA - Forensic Data System and is based on the number of periods individuals waited for competency services in jail.

<sup>2</sup>Court Orders Signed is the number of court orders signed in the specified month and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month because a class member entered jail from the community while awaiting a court-ordered competency service.

<sup>3</sup>Days from order signature to<sup>3</sup> represents the number of days from the beginning of a period of waiting in jail for competency services to the specified timeframe (i.e., hospital receipt of order, hospital receipt of discovery, end of reporting month of incomplete referrals, and completion (or the end of a period of waiting in jail for competency services)).

<sup>4</sup>Court Orders Completed is the number of cases completed in the month specified. Cases are completed if the client is admitted for services, the order is withdrawn or dismissed, or the client is no longer waiting for services in jail. Counts prior to AUG-18 are taken from previously reported classmember populations provided with monthly court report submissions. Counts since AUG-18 are from data recorded in the BHA Forensic Data System.

<sup>5</sup>From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: completion and the percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

<sup>6</sup>From April 2015 April 2017, the inpatient evaluation and restoration compliance deadline was within 7 days from court order signature date. As of May 2017, DSHS compliance data are calculated and summarized in this table based on the modified deadline for inpatient competency evaluation and restoration services outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389, stating: "DSHS shall complete inpatient competency evaluation and restorations within the shorter of either a) 7 days from receipt of order or b) 14 days from signature of order". To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail). The second is percentage of all orders completed within either of the two compliance deadlines: 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail) or 14 days from order signature date (if the order was received after 7 days from order signature date).

**Table 7. Class Member Status Eastern State Hospital – Inpatient Competency Restoration Services**

TABLE 7. Class Member Status Eastern State Hospital – Inpatient Competency Services (Restorations) <sup>1</sup>													
MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		Percent complete within 7 days from order signature date <sup>5,6</sup>	Percent completed within 7 days from receipt of order <sup>5,6</sup>	Percent completed within 7 days from receipt of order or within 14 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Aug-18	25	1.3	0.0	2.9	0.0	n/a	n/a	27	28.7	29.0	19%	19%	19%
Sep-18	18	2.4	0.0	3.3	0.0	n/a	n/a	23	19.3	21.0	22%	22%	22%
Oct-18	27	2.8	0.0	3.8	0.5	n/a	n/a	23	18.3	19.0	13%	13%	13%
Nov-18	22	1.3	0.0	1.4	0.0	n/a	n/a	23	19.0	17.0	0%	13%	13%
Dec-18	18	1.1	0.0	0.8	0.0	n/a	n/a	19	37.1	19.0	37%	37%	37%
Jan-19	23	0.8	0.0	0.9	0.0	n/a	n/a	25	24.8	28.0	28%	24%	28%
Feb-19	32	1.0	0.0	0.9	0.0	n/a	n/a	22	19.8	15.0	32%	32%	32%
Mar-19	23	0.7	0.0	0.6	0.0	n/a	n/a	22	17.5	21.5	27%	27%	27%
Apr-19	29	0.8	0.0	0.7	0.0	n/a	n/a	24	31.4	35.0	25%	25%	33%
May-19	22	1.1	1.0	1.1	0.5	109.0	109.0	20	39.0	45.0	10%	10%	15%
Jun-19	26	0.6	0.0	0.9	0.0	94.0	94.0	23	39.0	49.0	17%	17%	22%
Jul-19	29	0.7	0.0	1.2	0.0	49.8	44.0	30	34.1	44.0	23%	23%	27%
Aug-19	20	0.8	0.0	1.4	0.0	34.6	30.5	24	35.0	48.0	29%	29%	29%

<sup>1</sup>Data before - AUG-2018 is previously reported data from the legacy data systems. Data from AUG-2018 onward, is updated data pulled from the new BHA - Forensic Data System and is based on the number of periods individuals waited for competency services in jail.

<sup>2</sup>Court Orders Signed is the number of court orders signed in the specified month and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month because a class member entered jail from the community while awaiting a court-ordered competency service.

<sup>3</sup>"Days from order signature to" represents the number of days from the beginning of a period of waiting in jail for competency services to the specified timeframe (i.e., hospital receipt of order, hospital receipt of discovery, end of reporting month of incomplete referrals, and completion (or the end of a period of waiting in jail for competency services)).

<sup>4</sup>Court Orders Completed is the number of cases completed in the month specified. Cases are completed if the client is admitted for services, the order is withdrawn or dismissed, or the client is no longer waiting for services in jail. Counts prior to AUG-18 are taken from previously reported classmember populations provided with monthly court report submissions. Counts since AUG-18 are from data recorded in the BHA Forensic Data System.

<sup>5</sup>From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: completion and the percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

<sup>6</sup>From April 2015 April 2017, the inpatient evaluation and restoration compliance deadline was within 7 days from court order signature date. As of May 2017, DSHS compliance data are calculated and summarized in this table based on the modified deadline for inpatient competency evaluation and restoration services outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389, stating: "DSHS shall complete inpatient competency evaluation and restorations within the shorter of either a) 7 days from receipt of order or b) 14 days from signature of order". To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail). The second is percentage of all orders completed within either of the two compliance deadlines: 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail) or 14 days from order signature date (if the order was received after 7 days from order signature date).

**Table 8. Class Member Status at WSH and ESH (Totals) – Jail-based Competency Evaluations**

TABLE 8. Class Member Status at WSH and ESH (Totals) – Jail-based Competency Evaluations <sup>1</sup>													
MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		within 14 days from order signature date <sup>5,6</sup>	within 14 days from receipt of order <sup>5,6</sup>	within 14 days from receipt of order or 21 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Aug-18	391	0.4	0.0	1.5	0.0	n/a	n/a	391	10.6	10.0	92%	93%	94%
Sep-18	297	0.5	0.0	1.0	0.0	n/a	n/a	311	11.5	11.0	85%	88%	88%
Oct-18	392	0.6	0.0	0.9	0.0	n/a	n/a	371	11.6	11.0	85%	90%	90%
Nov-18	312	0.7	0.0	1.1	0.0	n/a	n/a	333	12.9	13.0	72%	76%	77%
Dec-18	282	0.6	0.0	1.0	0.0	n/a	n/a	308	11.6	11.0	84%	89%	90%
Jan-19	358	0.4	0.0	0.8	0.0	n/a	n/a	318	11.1	12.0	81%	84%	85%
Feb-19	294	0.8	0.0	1.4	0.0	n/a	n/a	286	12.8	12.0	75%	80%	82%
Mar-19	381	0.7	0.0	1.3	0.0	n/a	n/a	358	12.6	12.5	79%	83%	85%
Apr-19	392	0.6	0.0	1.0	0.0	n/a	n/a	424	12.0	12.0	80%	83%	84%
May-19	410	0.7	0.0	1.1	0.0	n/a	n/a	400	12.5	13.0	79%	84%	85%
Jun-19	401	0.8	0.0	1.2	0.0	n/a	n/a	373	12.8	13.0	74%	79%	83%
Jul-19	470	0.7	0.0	1.2	0.0	n/a	n/a	465	13.0	13.0	69%	74%	76%
Aug-19	444	0.6	0.0	0.9	0.0	4.8	3.0	447	11.6	12.0	79%	83%	87%

<sup>1</sup>Data before - AUG-2018 is previously reported data from the legacy data systems. Data from AUG-2018 onward, is updated data pulled from the new BHA - Forensic Data System and is based on the number of periods individuals waited for competency services in jail.

<sup>2</sup>Court Orders Signed is the number of court orders signed in the specified month and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month because a class member entered jail from the community while awaiting a court-ordered competency service.

<sup>3</sup>Days from order signature to<sup>3</sup> represents the number of days from the beginning of a period of waiting in jail for competency services to the specified timeframe (i.e., hospital receipt of order, hospital receipt of discovery, end of reporting month of incomplete referrals, and completion (or the end of a period of waiting in jail for competency services)).

<sup>4</sup>Court Orders Completed is the number of cases completed in the month specified. Cases are completed if the report is sent to the court, the order is withdrawn or dismissed, or the client is no longer waiting for services in jail. Counts prior to AUG-18 are taken from previously reported classmember populations provided with monthly court report submissions. Counts since AUG-18 are from data recorded in the BHA Forensic Data System.

<sup>5</sup>From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: completion and the percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

<sup>6</sup>From April 2015 to June 2016, the in-jail evaluation compliance deadline was within 7 days from court order signature date, and from July 2016 to April 2017, the in-jail evaluation compliance deadline was within 14 days from court order signature date. As of May 2017, DSHS compliance data are calculated and summarized in this table based on the modified deadline for in-jail competency evaluations outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389, stating: "DSHS shall complete in-jail competency evaluations within the shorter of either a) 14 days from receipt of order or b) 21 days from signature of order". To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 14 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 14 days from the beginning or notification of a period of waiting in jail). The second is percentage of all orders completed within either of the two compliance deadlines: 14 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 14 days from the beginning or notification of a period of waiting in jail) or 21 days from order signature date (if the order was received after 7 days from order signature date). In addition, starting in August 2018, the in-jail evaluation compliance calculations are adjusted based on Good Cause Extensions granted by the court.

**Table 9. Class Member Status at WSH and ESH State Hospital (Totals) – Inpatient Competency Evaluation**

TABLE 9. Class Member Status at WSH and ESH State Hospital (Totals) – Inpatient Services (Inpatient Evaluations) <sup>1</sup>													
MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		Percent complete within 7 days from order signature date <sup>5,6</sup>	Percent completed within 7 days from receipt of order <sup>5,6</sup>	Percent completed within 7 days from receipt of order or within 14 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Aug-18	17	1.1	0.0	0.4	0.0	n/a	n/a	18	36.7	35.0	6%	6%	6%
Sep-18	13	1.8	0.0	1.7	0.0	n/a	n/a	18	39.8	42.0	0%	0%	0%
Oct-18	22	1.2	0.0	1.3	1.0	n/a	n/a	21	35.0	33.0	14%	14%	19%
Nov-18	26	1.4	0.0	1.7	0.5	n/a	n/a	24	28.3	31.0	0%	8%	8%
Dec-18	26	1.4	0.0	2.1	1.0	n/a	n/a	23	28.9	33.0	4%	4%	9%
Jan-19	23	2.1	0.0	2.7	1.0	n/a	n/a	26	31.5	29.5	8%	8%	12%
Feb-19	15	2.8	0.0	3.1	1.0	n/a	n/a	17	34.2	38.0	6%	6%	6%
Mar-19	28	2.5	0.0	3.2	0.5	n/a	n/a	28	24.5	22.0	29%	29%	36%
Apr-19	26	4.6	0.0	4.9	1.0	136.5	136.5	18	25.1	21.0	11%	11%	11%
May-19	24	3.6	0.0	4.1	1.0	129.3	135.0	22	37.5	45.5	9%	9%	9%
Jun-19	20	3.6	0.0	4.4	1.0	129.3	135.0	19	38.6	48.0	5%	5%	5%
Jul-19	15	4.6	0.0	4.3	0.0	91.4	115.0	21	44.4	46.0	0%	0%	5%
Aug-19	26	2.6	0.0	3.6	0.0	28.4	15.0	25	38.9	49.0	12%	12%	12%

<sup>1</sup>Data before - AUG-2018 is previously reported data from the legacy data systems. Data from AUG-2018 onward, is updated data pulled from the new BHA - Forensic Data System and is based on the number of periods individuals waited for competency services in jail.

<sup>2</sup>Court Orders Signed is the number of court orders signed in the specified month and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month because a class member entered jail from the community while awaiting a court-ordered competency service.

<sup>3</sup>Days from order signature to<sup>3</sup> represents the number of days from the beginning of a period of waiting in jail for competency services to the specified timeframe (i.e., hospital receipt of order, hospital receipt of discovery, end of reporting month of incomplete referrals, and completion (or the end of a period of waiting in jail for competency services)).

<sup>4</sup>Court Orders Completed is the number of cases completed in the month specified. Cases are completed if the client is admitted for services, the order is withdrawn or dismissed, or the client is no longer waiting for services in jail. Counts prior to AUG-18 are taken from previously reported classmember populations provided with monthly court report submissions. Counts since AUG-18 are from data recorded in the BHA Forensic Data System.

<sup>5</sup>From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: completion and the percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

<sup>6</sup>From April 2015 April 2017, the inpatient evaluation and restoration compliance deadline was within 7 days from court order signature date. As of May 2017, DSHS compliance data are calculated and summarized in this table based on the modified deadline for inpatient competency evaluation and restoration services outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389, stating: "DSHS shall complete inpatient competency evaluation and restorations within the shorter of either a) 7 days from receipt of order or b) 14 days from signature of order". To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail). The second is percentage of all orders completed within either of the two compliance deadlines: 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail) or 14 days from order signature date (if the order was received after 7 days from order signature date).

**Table 10. Class Member Status at WSH and ESH State Hospital, and RTFs (Totals) – Inpatient Competency Restoration Services**

TABLE 10. Class Member Status at WSH and ESH State Hospital, and RTFs (Totals) – Inpatient Services (Restorations) <sup>1</sup>													
MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		Percent complete within 7 days from order signature date <sup>5,6</sup>	Percent completed within 7 days from receipt of order <sup>5,6</sup>	Percent completed within 7 days from receipt of order or within 14 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Aug-18	123	1.5	0.0	2.1	0.0	n/a	n/a	108	42.3	30.5	18%	17%	18%
Sep-18	95	1.9	0.0	2.6	0.0	n/a	n/a	100	50.7	37.0	13%	12%	13%
Oct-18	143	1.9	0.0	2.6	0.0	n/a	n/a	131	45.5	32.0	15%	15%	15%
Nov-18	108	1.7	0.0	1.9	0.0	n/a	n/a	118	44.1	27.5	0%	17%	17%
Dec-18	124	1.6	0.0	1.7	0.0	n/a	n/a	116	44.0	29.0	28%	30%	32%
Jan-19	132	1.8	0.0	2.0	0.0	n/a	n/a	135	49.3	42.0	24%	24%	25%
Feb-19	141	0.8	0.0	1.0	0.0	193.0	193.0	128	44.6	38.5	23%	25%	25%
Mar-19	144	1.2	0.0	1.3	0.0	193.0	193.0	166	36.3	30.5	21%	22%	23%
Apr-19	161	1.7	0.0	1.7	0.0	193.0	193.0	126	34.5	36.0	29%	28%	30%
May-19	138	1.9	0.0	1.8	0.0	138.7	114.0	141	39.6	42.0	18%	18%	20%
Jun-19	139	1.7	0.0	1.9	0.0	84.4	79.0	159	45.3	49.0	18%	18%	19%
Jul-19	121	1.4	0.0	1.7	0.0	56.8	52.0	141	37.9	42.0	23%	23%	25%
Aug-19	130	1.1	0.0	1.4	0.0	32.4	25.0	119	41.0	48.0	24%	25%	26%

<sup>1</sup>Data before - AUG-2018 is previously reported data from the legacy data systems. Data from AUG-2018 onward, is updated data pulled from the new BHA - Forensic Data System and is based on the number of periods individuals waited for competency services in jail.

<sup>2</sup>Court Orders Signed is the number of court orders signed in the specified month and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month because a class member entered jail from the community while awaiting a court-ordered competency service.

<sup>3</sup>Days from order signature to<sup>3</sup> represents the number of days from the beginning of a period of waiting in jail for competency services to the specified timeframe (i.e., hospital receipt of order, hospital receipt of discovery, end of reporting month of incomplete referrals, and completion (or the end of a period of waiting in jail for competency services)).

<sup>4</sup>Court Orders Completed is the number of cases completed in the month specified. Cases are completed if the client is admitted for services, the order is withdrawn or dismissed, or the client is no longer waiting for services in jail. Counts prior to AUG-18 are taken from previously reported classmember populations provided with monthly court report submissions. Counts since AUG-18 are from data recorded in the BHA Forensic Data System.

<sup>5</sup>From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: completion and the percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

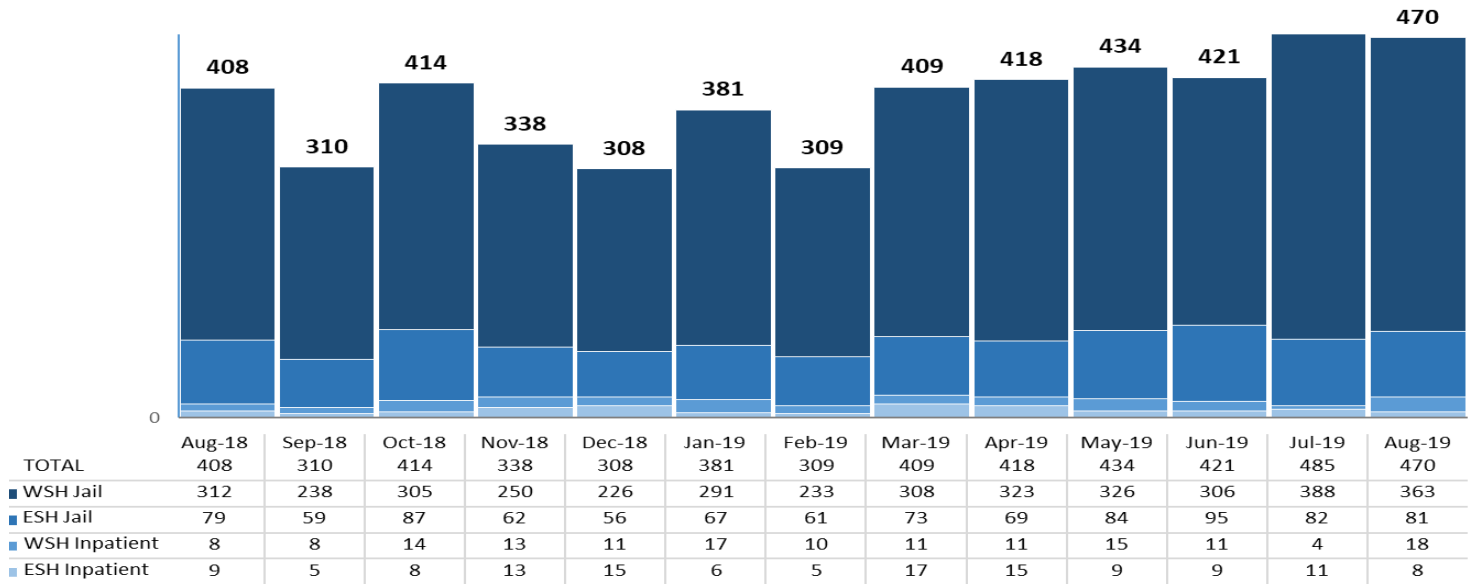
<sup>6</sup>From April 2015 April 2017, the inpatient evaluation and restoration compliance deadline was within 7 days from court order signature date. As of May 2017, DSHS compliance data are calculated and summarized in this table based on the modified deadline for inpatient competency evaluation and restoration services outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389, stating: "DSHS shall complete inpatient competency evaluation and restorations within the shorter of either a) 7 days from receipt of order or b) 14 days from signature of order". To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail). The second is percentage of all orders completed within either of the two compliance deadlines: 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail) or 14 days from order signature date (if the order was received after 7 days from order signature date).



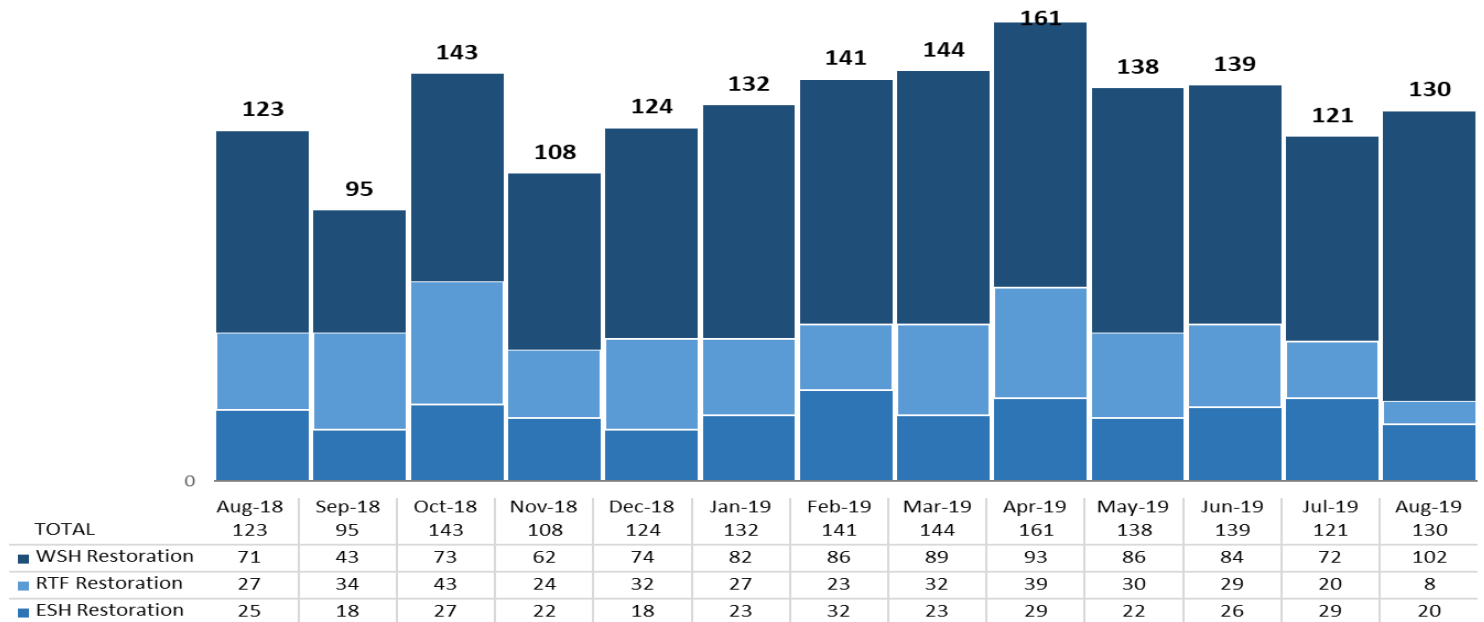
## CLASS MEMBER STATUS DATA GRAPHS

The following Figures, Figures 1-6, present “first look” August data and are subject to change.

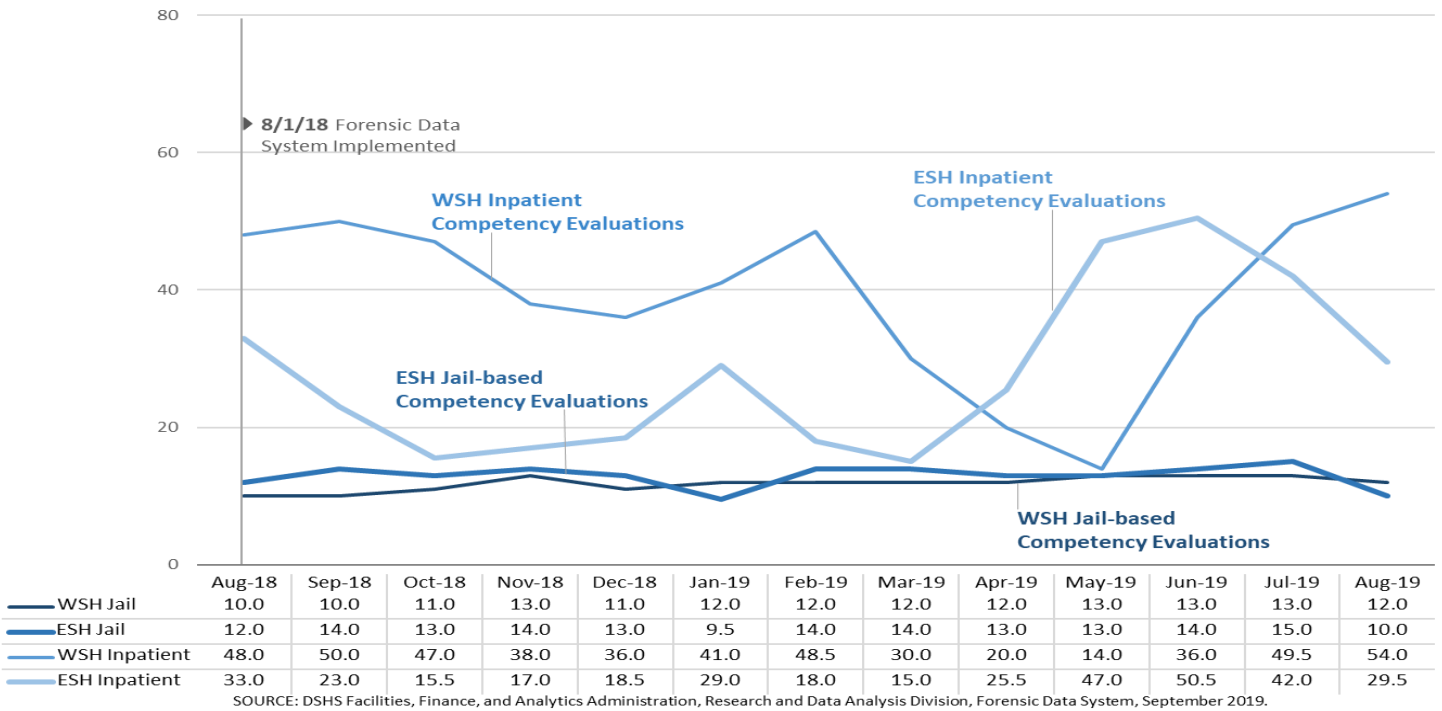
**Figure 1. Evaluation Orders**



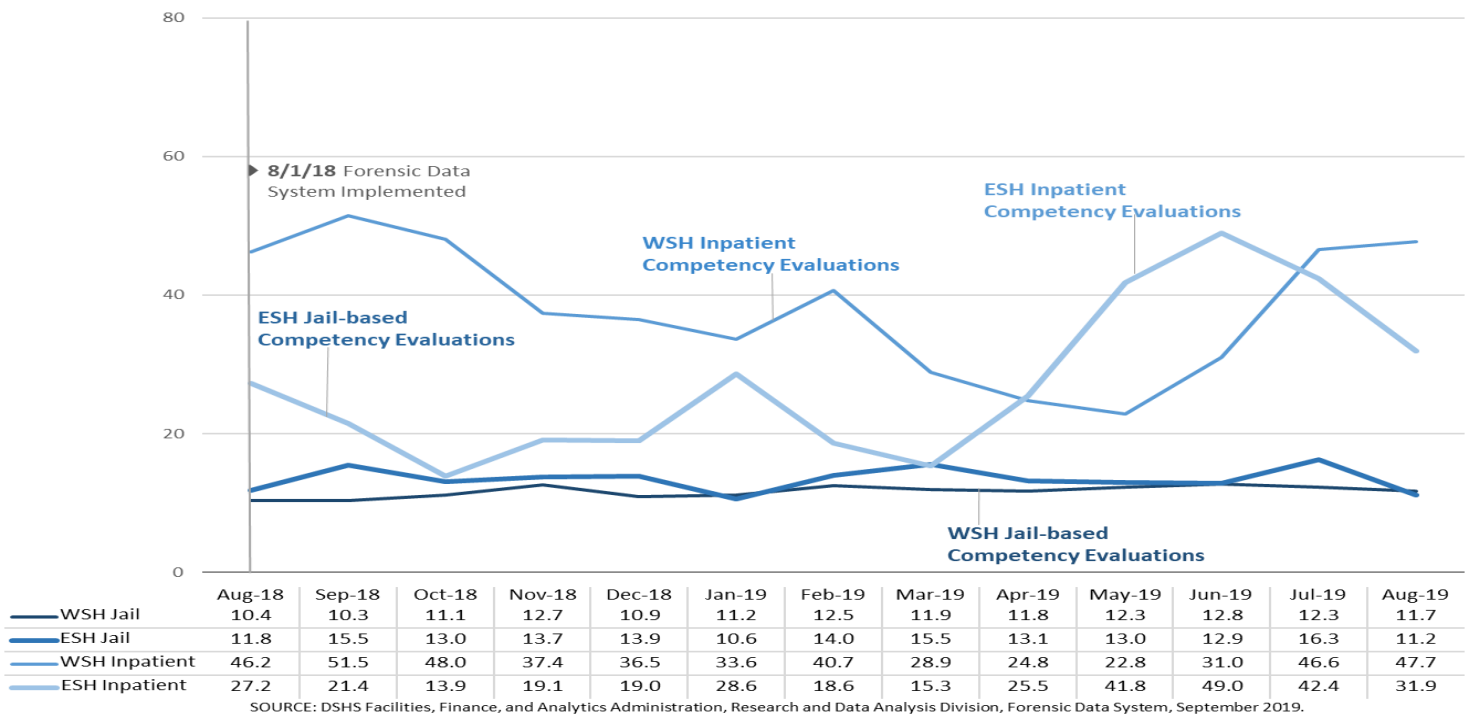
**Figure 2. Restoration Orders**



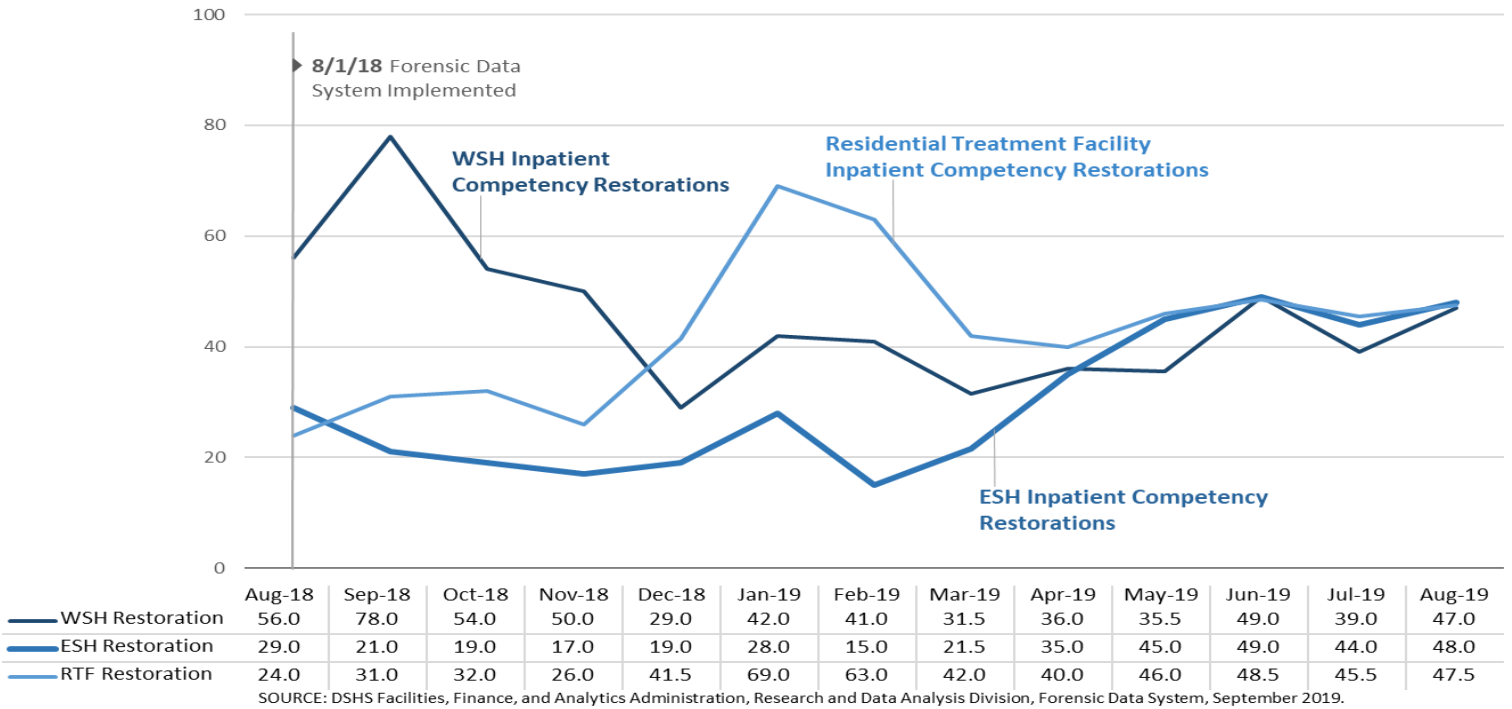
**Figure 3. Evaluations – Median**



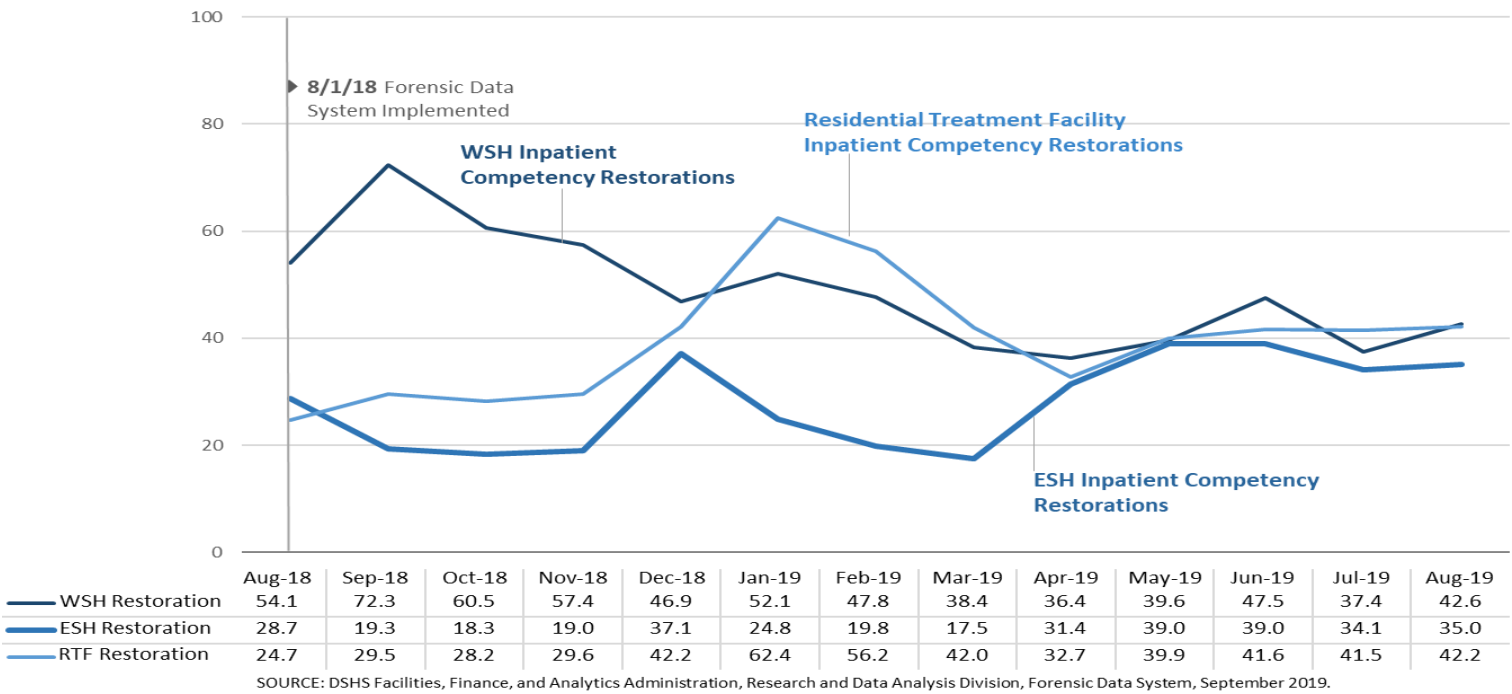
**Figure 4. Evaluations – Average**



**Figure 5. Restorations – Median**



**Figure 6. Restorations – Average**



**TABLES 11-16: SUMMARY OF JAIL EVALUATIONS, IN-PATIENT EVALUATIONS, AND RESTORATIONS BY MONTH SINCE FEBRUARY 2016**

The data presented in this section, from Tables 11-16 (percent days or less), are based on the month that the Court Order was signed and will therefore be different from the data shown previously in Tables 2-10, which are based on the month the order packet was completed. August numbers are first look, and percentages may change as many cases (those with orders at the end of the month) will close within the seven or fourteen day window. A rolling thirteen months is displayed in Tables 11-16.

**Table 11/12. Total Completed Jail Evaluation Orders by Month Court Order Signed**

TABLE 11/12 TOTAL COMPLETED JAIL EVALUATION ORDERS BY MONTH COURT ORDER SIGNED <sup>1</sup>							
MONTH	Court Orders Signed <sup>2</sup>	14 DAYS OR LESS FROM ORDER SIGNATURE DATE <sup>3</sup>	PERCENT 14 DAYS OR LESS FROM ORDER SIGNATURE DATE <sup>3</sup>	ORDERS COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER <sup>3,4</sup>	PERCENT COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER <sup>3,4</sup>	ORDERS COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER OR WITHIN 21 DAYS FROM ORDER SIGNATURE DATE <sup>3,4</sup>	PERCENT COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER OR WITHIN 21 DAYS FROM ORDER SIGNATURE DATE <sup>3,4</sup>
Aug-18	391	345	88%	352	90%	352	90%
Sep-18	297	254	86%	267	90%	269	91%
Oct-18	392	306	78%	327	83%	330	84%
Nov-18	312	244	78%	257	82%	260	83%
Dec-18	282	233	83%	242	86%	243	86%
Jan-19	358	285	80%	302	84%	307	86%
Feb-19	294	227	77%	244	83%	248	84%
Mar-19	381	299	78%	310	81%	312	82%
Apr-19	392	318	81%	332	85%	341	87%
May-19	410	302	74%	326	80%	330	80%
Jun-19	401	289	72%	307	77%	318	79%
Jul-19	470	347	74%	367	78%	380	81%
Aug-19	444	262	59%	280	63%	295	66%

<sup>1</sup>Data before - AUG-2018 is previously reported data from the legacy data systems. Data from AUG-2018 onward, is updated data pulled from the new BHA - Forensic Data System and is based on the number of periods individuals waited for competency services in jail.

<sup>2</sup>Court Orders Signed is the number of court orders signed in the specified month and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month because a class member entered jail from the community while awaiting a court-ordered competency service.

<sup>3</sup>From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: orders completed and percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

<sup>4</sup>From April 2015 to June 2016, the in-jail evaluation compliance deadline was within 7 days from court order signature date, and from July 2016 to April 2017, the in-jail evaluation compliance deadline was within 14 days from court order signature date. As of May 2017, DSHS compliance data are calculated and summarized in this table based on the modified deadline for in-jail competency evaluations outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389, stating: "DSHS shall complete in-jail competency evaluations within the shorter of either a) 14 days from receipt of order or b) 21 days from signature of order". To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 14 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 14 days from the beginning or notification of a period of waiting in jail). The second is percentage of all orders completed within either of the two compliance deadlines: 14 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 14 days from the beginning or notification of a period of waiting in jail) or 21 days from order signature date (if the order was received after 7 days from order signature date). In addition, starting in August 2018, the in-jail evaluation compliance calculations are adjusted based on Good Cause Extensions granted by the court.

**Table 13/14. Total Completed Inpatient Evaluation Orders by Month Court Order Signed**

TABLE 13/14 TOTAL COMPLETED INPATIENT EVALUATION ORDERS BY MONTH COURT ORDER SIGNED <sup>1,2</sup>							
MONTH	Court Orders Signed <sup>1</sup>	7 DAYS OR LESS FROM ORDER SIGNATURE DATE	PERCENT 7 DAYS OR LESS FROM ORDER SIGNATURE DATE	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER <sup>1,2</sup>	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER <sup>1,2</sup>	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE <sup>1,2</sup>	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE <sup>1,2</sup>
Aug-18	17	1	6%	1	6%	1	6%
Sep-18	13	1	8%	1	8%	2	15%
Oct-18	22	2	9%	2	9%	2	9%
Nov-18	26	2	8%	2	8%	2	8%
Dec-18	26	1	4%	1	4%	3	12%
Jan-19	23	2	9%	2	9%	2	9%
Feb-19	15	2	13%	2	13%	2	13%
Mar-19	28	7	25%	7	25%	9	32%
Apr-19	26	2	8%	2	8%	2	8%
May-19	24	2	8%	2	8%	2	8%
Jun-19	20	1	5%	1	5%	1	5%
Jul-19	15	0	0%	0	0%	1	7%
Aug-19	26	3	12%	3	12%	3	12%

<sup>1</sup>Data before - AUG-2018 is previously reported data from the legacy data systems. Data from AUG-2018 onward, is updated data pulled from the new BHA - Forensic Data System and is based on the number of periods individuals waited for competency services in jail.

<sup>2</sup>Court Orders Signed is the number of court orders signed in the specified month and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month because a class member entered jail from the community while awaiting a court-ordered competency service.

<sup>3</sup>From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: orders completed and percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

<sup>4</sup>From April 2015 April 2017, the inpatient evaluation and restoration compliance deadline was within 7 days from court order signature date. As of May 2017, DSHS compliance data are calculated and summarized in this table based on the modified deadline for inpatient competency evaluation and restoration services outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389, stating: "DSHS shall complete inpatient competency evaluation and restorations within the shorter of either a) 7 days from receipt of order or b) 14 days from signature of order". To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail). The second is percentage of all orders completed within either of the two compliance deadlines: 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail) or 14 days from order signature date (if the order was received after 7 days from order signature date).

**Table 15/16. Total Completed Restoration Orders by Month Court Order Signed**

TABLE 15/16 TOTAL COMPLETED RESTORATION ORDERS BY MONTH COURT ORDER SIGNED <sup>1,2</sup>							
MONTH	<i>Court Orders Signed</i> <sup>1</sup>	7 DAYS OR LESS FROM ORDER SIGNATURE DATE	PERCENT 7 DAYS OR LESS FROM ORDER SIGNATURE DATE	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER <sup>1,2</sup>	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER <sup>1,2</sup>	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE <sup>1,2</sup>	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE <sup>1,2</sup>
Aug-18	123	20	16%	19	15%	20	16%
Sep-18	95	14	15%	13	14%	14	15%
Oct-18	143	20	14%	21	15%	21	15%
Nov-18	108	19	18%	20	19%	20	19%
Dec-18	124	34	27%	35	28%	37	30%
Jan-19	132	32	24%	32	24%	34	26%
Feb-19	141	34	24%	37	26%	37	26%
Mar-19	144	31	22%	31	22%	33	23%
Apr-19	161	37	23%	36	22%	39	24%
May-19	138	26	19%	27	20%	30	22%
Jun-19	139	29	21%	29	21%	30	22%
Jul-19	121	32	26%	31	26%	34	28%
Aug-19	130	30	23%	32	25%	33	25%

<sup>1</sup>Data before - AUG-2018 is previously reported data from the legacy data systems. Data from AUG-2018 onward, is updated data pulled from the new BHA - Forensic Data System and is based on the number of periods individuals waited for competency services in jail.

<sup>2</sup>**Court Orders Signed** is the number of court orders signed in the specified month and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month because a class member entered jail from the community while awaiting a court-ordered competency service.

<sup>3</sup>From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: orders completed and percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

<sup>4</sup>From April 2015 April 2017, the inpatient evaluation and restoration compliance deadline was within 7 days from court order signature date. As of May 2017, DSHS compliance data are calculated and summarized in this table based on the modified deadline for inpatient competency evaluation and restoration services outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389, stating: "DSHS shall complete inpatient competency evaluation and restorations within the shorter of either a) 7 days from receipt of order or b) 14 days from signature of order". To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail). The second is percentage of all orders completed within either of the two compliance deadlines: 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail) or 14 days from order signature date (if the order was received after 7 days from order signature date).

## RESOURCES REQUIRED TO PROVIDE TIMELY COMPETENCY SERVICES

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### **FUNDING AND RESOURCES**

The Washington State Legislature convened one regular and three consecutive special sessions between January 9, 2017 and July 20, 2017. The Legislature passed the 2017-19 operating budget in Substitute Senate Bill 5883 (SSB 5883) on June 30, 2017. Section 204(2)(e) of the bill references \$25,053,000 in Fiscal Year 2018 (July 1, 2017 to June 30, 2018) and \$25,847,000 in Fiscal Year 2019 (July 1, 2018 to June 30, 2019) for implementation of efforts to improve the timeliness of competency restoration services pursuant to Chapter 5, Laws of 2015 (SSB 5889). The budget provided funding to operate an additional 30-bed forensic ward in Fiscal Year 2019, assuming the closure of one 30-bed civil ward and subsequent conversion to a forensic unit. The Aging and Long Term Services Administration (AL TSA), the Developmental Disabilities Administration (DDA), and WSH are already collaborating on targeted efforts to successfully discharge patients into the community to reduce the population of one civil ward by 30 patients, as contemplated by the Legislature. The Legislature also funded a 24-bed expansion at the Yakima RTF. The Department intended to move forward with this expansion to provide relief to class members. However, on November 1, 2017, Plaintiffs and the Department submitted a proposal to the Court that would transition the operations planned for Yakima expansion to Building 27 at WSH. On November 21, 2017, at a status hearing in the Federal District Court, the Department with the Governor's office reiterated plans to shift the expansion money from Yakima to Building 27 at WSH for operations if the Court would release fine money to pay for the capital improvements. On January 25, 2018, Judge Pechman heard a motion to use contempt fine funds for the remodel of Building 27 and agreed, in principal, once a few minor changes were made to the plan. Therefore, in the FY 2018 supplemental operating budget, the additional funds that were earmarked for the 24-bed expansion at the Yakima RTF were removed.

The FY 2018 supplemental capital budget included \$3 million for renovation of 1N3 for 25 forensic and \$3.5 million for renovation of 3N3 to provide another 25 forensic beds at Eastern State Hospital. It also included \$10.5 million in the 2017-19 biennium and proposed \$9.6 million in the 2019-21 biennium for pre-design, design, and renovation of WSH Building 29 to support 60 additional forensic beds.

### **2019-2021 BIENNIAL BUDGET SUMMARY FOR TRUEBLOOD AGREED SETTLEMENT**

With legislative approval and the support of the Governor, DSHS, the Health Care Authority (HCA) and the Washington State Criminal Justice Training Commission (CJTC) received the funding listed below that will benefit the implementation of the settlement agreement approved in the *Trueblood et al. v. DSHS* lawsuit.

The agreement implementation occurs in phases within different regions of the state. The first phase covers Pierce, Southwest, and the Spokane regions. This agreement outlines five key areas of investment: competency evaluations, competency restoration, crisis diversion and supports, education and training, and workforce development.

**Administration.** \$2.5 million for positions for the 2019-21 biennium at both DSHS and HCA to administer the settlement agreement.

**Competency Evaluation.** \$5 million to DSHS for 13 competency evaluator positions in fiscal year 2020 and 5 in fiscal year 2021. It also pays for two additional program manager and three administrative assistant positions to support the evaluators' work.

**Competency Restoration.** \$1.89 million to HCA for outpatient competency restoration teams.

**Crisis Services.** Expanded crisis triage/crisis stabilization and mobile crisis services to divert individuals from potentially becoming class members was included within one item in the HCA budget. The total amount for these projects is \$10,233,000.

**Diversion Support.** \$11 million to HCA for individuals with behavioral health issues arrested for misdemeanor crimes. This funding is for non-Medicaid costs associated with serving individuals in crisis triage, outpatient restoration, or other programs that divert individuals with behavioral health disorders from the criminal justice system. This funding can also be used for housing supports.

**Engagement and Outreach.** Intensive case management services focused on individuals identified through a comprehensive data system that is based on history of services, risk scores, and predictive modeling. \$4.7 million is allocated to HCA to create teams that will locate, engage, and connect individuals identified as high utilizers with services and resources.

**Housing Supports.** \$6.4 million allocated to HCA for four forensic Housing and Recovery through Peer Services (HARPS) teams in the Phase 1 regions. These teams provide supportive housing services and transitional housing vouchers for individuals referred for outpatient competency restoration, intensive case management, and other services under the settlement. Each team will consist of a housing support specialist, two peer specialists, and resources to support the transitional housing needs of individuals in the forensic system as well as resources to assist individuals transitioning from crisis services.

**Forensic Navigators.** \$2.2 million to DSHS to fund nine forensic navigators, a new position established in the settlement agreement. Based on the agreement, navigators' work will begin in the Phase 1 Regions. The budget outlook assumes an additional nine positions funded during the 2021-23 biennium for Phase 2 of the settlement.

**Additional Forensic Bed Capacity.** Over \$27 million allocated to DSHS for the addition of forensic bed capacity across the state. This includes two new 25-bed competency restoration units at ESH. In the 2017-19 budget, the Legislature allotted funding for the conversion of 42 beds from civil to forensic on two wards at WSH per the agreement.

The 2018 supplemental operating budget included funding for DSHS to begin operating 30 beds in building 27 on the grounds of WSH as a RTF in FY 2019. Funding was provided to increase resources available to operate this unit at a level similar to the forensic residential treatment facility being operated at Maple Lane.

**Technical Assistance to Jails.** \$633,000 to DSHS for positions to provide technical assistance and training to jails identified in the settlement agreement.

**Crisis Intervention Training (CIT).** \$899,000 for the CJTC to provide crisis intervention training to law enforcement agencies. There is also \$4 million allocated to CJTC to fund the Washington Association of Sheriffs & Police Chiefs co-responders.

**Workforce Development.** \$653,000 to DSHS for job positions dedicated to workforce development activities as identified in the settlement agreement.

**Enhanced Peer Support.** Just over \$400,000 and 1.0 FTE is allocated to HCA to develop an enhanced continuing education curriculum for certified peer counselors on the criminal justice system. Funds and activities will focus on curriculum development, materials to train, and training costs.



## **NEED PROJECTIONS AND BED CAPACITY**

During the June 2017 *Trueblood* Status Hearing, Judge Pechman directed Dr. Danna Mauch to hire a contractor to conduct a Competency Services Bed Need Study to illustrate patient demand and bed need, and ultimately to determine the feasibility of, and timeframe for, compliance with Court orders. The impact of community based competency evaluation on the demand for inpatient competency evaluation and competency restoration beds will also be measured.

The TriWest Group was selected as the contractor to complete this work within a 60-90 day timeframe. On October 13, 2017, TriWest requested and received aggregate-level referral data from DSHS. DSHS provided TriWest the daily aggregate data on November 28, 2017. TriWest informed DSHS that they received notice of conditional approval by the Washington State Institutional Review Board (WSIRB) on November 30, 2017. On February 1, 2018, TriWest informed DSHS that the WSIRB acknowledged receipt of their response to conditional approval and revised application. On April 9, 2018, TriWest provided DSHS a signed copy of the WSIRB approval that would allow DSHS to share client-level data for the study. DSHS updated the data that was prepared for TriWest in November 2017 while waiting for the IRB approval to include more recent data through February 2018. DSHS provided TriWest the client level data in April 2018 after receiving a copy of the WSIRB approval from TriWest.

TriWest provided an update on May 22, 2018. TriWest has been working with the client-level data provided by DSHS including talking with DSHS data staff at headquarters and the state hospitals to gain some understanding of data issues TriWest had identified. TriWest found those conversations helpful. However, they observed that some data challenges remain. TriWest is working on revising their coding for the bed model. TriWest also noted that they have provided an update to the Court Monitor, so she is aware of the data issues and appreciates the efforts to troubleshoot and move forward.

On June 27, 2018, TriWest reported reviewing and analyzing the client-level data, as well as the model that calculates the number of historic beds needed to reduce wait times. TriWest reported they are in the process of transforming the model into a version that uses entirely de-identified data, so it may be posted to the DSHS website.

TriWest reported plans to have a draft to DSHS in early to mid-August 2018. On August 29, 2018, TriWest provided the following updates:

- TriWest conducted an internal review process that identified a change that was needed and which required additional programming.
- TriWest made the change and is hoping to provide the Court Monitor a report on the internal review mentioned above.
- TriWest will schedule a review with DSHS to clarify any questions before findings are presented to the Court parties.

DSHS received the TriWest draft report from the Court Monitor on October 3, 2018. The report was presented to DSHS via webinar on December 10, 2018.

## **TRUEBLOOD KEY ACCOMPLISHMENTS – AUGUST 2019**

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Talent Acquisition program staff Business Managers continue to support hiring needs associated with the Fort Steilacoom Competency Restoration Program for phase 3 of the remaining core FTE's.

### **RECRUITING**

During this reporting period:

- Candidates presented to Eastern State Hospital for consideration
  - 2 Psychiatrist candidates
  - 9 RN-3 candidates
  - 5 Psychologists presented, 1 hired
  
- Candidates presented to Western State Hospital for consideration
  - 3 Psychiatrist candidates
  - 2 Psychiatrists presented for Center Medical Director, offer in process
  - 3 Physician candidates
  - 2 Psychiatric ARNP's hired
  - 2 Adult or Family Medicine ARNP's hired
  - 2 Psychologists presented (14 total), 4 hired
  
- Candidates presented to Ft. Steilacoom Competency Restoration Program
  - 13 RN-2's hired
  - 2 RN-3's hired
  - 505 Institution Counselor-2 applicants presented; 29 hired
  - Recruiting efforts halted for Physician 2 and Psychiatric ARNP as locums are being used

**RESIDENTIAL TREATMENT FACILITIES (RTF's) DATA**

Presents monthly data for the current calendar year, with a year-over-year average comparison. Beginning in October, a new table will be added to this section to include RTF data for Fort Steilacoom.

*Table 17. Monthly RTF Data for Yakima*

Data Elements	2018 Avg	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	2019 Avg
Census (last day of month)	22.1	23	21	23	23	22	22	24	23	22.63
Total patients admitted	9.8	15	11	11	12	14	5	20	7	11.88
Completed and found competent (1st Restoration)	6.5	8	7	6	10	11	1	9	6	7.25
Not likely restorable (transported back to jail)	0.8	2	0	0	0	0	1	2	0	0.63
Court Order lapsed (Transported back to Jail)	1.0	1	2	1	1	2	0	2	1	1.25
Felony patients completed and found not likely restorable (1st Restoration)	0.0	0	0	0	0	0	0	0	0	0.00
Misdemeanor patients not restored (no further treatment by law)	0.0	0	0	0	0	0	0	0	0	0.00
Total transferred to State Hospital	1.3	3	2	3	1	2	0	3	1	1.88
For physical aggression	0.3	1	0	1	0	0	0	1	1	0.50
For sexually inappropriate behavior	0.0	0	0	0	0	0	0	0	0	0.00
For medical reasons	0.8	2	2	2	1	2	0	2	0	1.38
Due to court ordered treatment at SH	0.0	0	0	0	0	0	0	0	0	0.00
Other	0.3	0	0	0	0	0	0	0	0	0.00
Total patients eloped	0.0	0	0	0	0	0	0	0	0	0.00
Total recommended for early evaluation	2.0	3	2	2	4	0	0	0	0	1.38
Total recommended for 2nd 90-day order	2.7	1	2	2	4	1	3	1	3	2.13
Total recommended for 3rd 90-day order	0.4	0	0	0	0	0	0	0	0	0.00

*Table 18. Monthly RTF Data for Maple Lane*

Data Elements	2018 Avg	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	2019 Avg
Census (last day of month)	26.3	29	26	27	28	30	29	30	29	28.5
Total patients admitted	14.9	11	10	16	12	16	16	16	15	14.0
Completed and found competent (1st Restoration)	6.6	7	5	4	2	3	8	3	6	4.8
Not likely restorable (transported back to jail)	0.9	1	2	0	1	3	2	3	0	1.5
Court Order lapsed (Transported back to Jail)	0.0	0	0	0	0	0	0	0	0	0.0
Felony patients completed and found not likely restorable (1st Restoration)	0.1	1	0	0	0	1	0	0	0	0.3
Misdemeanor patients not restored (no further treatment by law)	2.6	1	1	2	3	3	2	4	3	2.4
Total transferred to State Hospital	1.0	2	0	1	1	1	1	1	4	1.4
For physical aggression	0.7	2	0	0	1	0	1	1	3	1.0
For sexually inappropriate behavior	0.1	0	0	0	0	0	0	0	0	0.0
For medical reasons	0.2	0	0	1	0	0	0	0	1	0.3
Due to court ordered treatment at SH	0.1	0	0	0	0	0	0	0	0	0.0
Other	0.0	0	0	0	0	1	0	0	0	0.1
Total patients eloped	0.0	0	0	0	0	0	0	0	0	0.0
Total recommended for early evaluation	3.8	3	5	4	2	4	0	5	1	3.0
Total recommended for 2nd 90-day order	3.6	3	2	3	8	6	2	6	4	4.3
Total recommended for 3rd 90-day order	0.3	0	1	2	1	0	2	0	0	0.8

**TRUEBLOOD IMPLEMENTATION STEPS TAKEN AND PLANNED – AUGUST 2019**

The table below shows implementation steps taken and planned and is updated for the current reporting period.

**Table 19. Trueblood Implementation Steps**

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
<b>Court Appointed Monitor Coordination</b>				
Monthly Reports	Release August report	Complete	<ul style="list-style-type: none"> <li>Maintain compliance with the Court.</li> <li>Use data to review and improve the provision of forensic services.</li> </ul>	Release of August report to Stakeholders completed.
<b>Legislative Coordination</b>				
Implement Engrossed Substitute Senate Bill 6656: Funding applications	Apply for funding from the Office of Financial Management (OFM) from the Governor's Behavioral Health Innovation Fund relating to the state hospitals' forensic systems.	Complete	<ul style="list-style-type: none"> <li>Section 5(2) required OFM to contract with an external consultant to examine the current configuration and financing of the state hospital system and make recommendations on a number of different areas, including identification of the potential costs, benefits, and impacts associated with dividing one or both of the state hospitals into discrete hospitals to serve civil and forensic patients in separate facilities. The consultants' report was due to the Governor and Legislature by Oct. 1, 2016.</li> <li>Section 5(3) required DSHS to contract for the services of an academic or independent state hospital psychiatric clinical care model consultant to</li> </ul>	<p>The Select Committee for Quality Improvement in State Hospitals met on October 30, 2017 and on December 15, 2017. During the December 15, 2017 meeting, the Department presented material on the three prosecutorial diversion programs funded in FY '18. Additionally, the Court Monitor provided an overview and update on the eight programs that received <i>Trueblood</i> fine money for diversion services.</p> <p>In 2018, during the months of January, February, March, May, June, August, September, November, and December no hearings were scheduled.</p> <p>Meetings were held on the following dates: April 18, 2018, July 24, 2018, and October 18, 2018.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
			<p>examine the clinical role of staffing at the state hospitals. The consultants' report was due to the Governor and Legislature by Oct. 1, 2016.</p> <ul style="list-style-type: none"> <li>Section 6 created the Governor's Behavioral Health Innovation Fund in the state treasury. Only the director of financial management or designee may authorize expenditures from that Fund, which are provided solely to improve quality of care, patient outcomes, patient and staff safety, and the efficiency of operations at the state hospitals.</li> </ul>	<p>In 2019, the first meeting of the year was held on January 7, 2019 with an agenda (and other meeting materials) found here: <a href="https://www.governor.wa.gov/issues/issues/health-care-human-services/select-committee-quality-improvement-state-hospitals">https://www.governor.wa.gov/issues/issues/health-care-human-services/select-committee-quality-improvement-state-hospitals</a></p> <p>The committee sunset on July 1, 2019.</p> <p>The Behavioral Health Recovery System Transformation (BHRST) committee will be convened after July 1, 2019 likely conducting similar work as the Select Committee. No meetings were scheduled in the months of July or August. The first meeting of the committee is scheduled for September 26, 2019.</p>
<p>Consult with DOH about draft legislation requiring DOH certification of forensic evaluators to determine the need for a sunrise review</p>	<p>Consult DOH</p>	<p>Ongoing</p>	<ul style="list-style-type: none"> <li>Expanded pool of forensic evaluators would help improve timeliness. Licensure would provide quality assurance and create professional standards for forensic evaluators.</li> <li>Develop long-term certification of forensic evaluators, consistent with the <i>Trueblood</i> Court Monitor's recommendations on mid- and long-term performance to implement a forensic certification program to sustain performance.</li> </ul>	<p>An OFMHS Certification workgroup convened in September 2018 and proposed a plan of action for BHA leadership. In lieu of a formal Forensic Evaluator Certification program, the plan proposes an immediate emphasis on training opportunities.</p> <p>The <i>Trueblood</i> Settlement, Workforce Development, includes exploration of certification programs. New Workforce Development Specialist FTE(s), once hired in late 2019, will be assigned to this task.</p>
<p><b>Labor Coordination</b></p>				

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Engage Labor Leaders and Members	Conduct ongoing bi-monthly meetings with Labor leaders	Ongoing	<ul style="list-style-type: none"> <li>• Discuss policy, budget and operational changes likely required to comply with the <i>Trueblood</i> requirements.</li> <li>• Obtain staff necessary to safely support operation of additional forensic and civil beds at the state hospitals.</li> <li>• Obtain necessary psychiatrists and physicians to supplement services proved by employees at Western State Hospital to safely support the operation of additional forensic and civil beds.</li> </ul>	<p>In 2018, a UMCC meeting was held on February 27. An additional UMCC meeting with the forensic evaluators was held October 2, 2018.</p> <p>A demand to bargain on juvenile evaluations was completed on June 22, 2018. Additional Labor meetings were held for the operations of Building 27 at WSH as an RTF during August with WFSE and SEIU. A second meeting with WFSE was held toward the end of August to answer remaining questions on the operations of Building 27.</p> <p>A demand to bargain with the Coalition was held on October 23, 2018. As a result of the meeting DSHS provided additional data relating to scope of work for pharmacy and medical staff. No meetings were scheduled in November with Labor and a meeting with WFSE was held in December as part of the normal UMCC conducted with forensic evaluators.</p> <p>No meetings were held in January and February of 2019. A meeting with WFSE was held March 15, 2019 to discuss the staffing at Building 27 with no further meetings scheduled in April, May, June, July, or August.</p> <p>The outstanding demand to bargain with the Coalition continued in August with a meeting on August 28, 2019. Focus of the meeting was on physician afterhours coverage for the Fort Steilacoom Competency Restoration Program.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
<b>Data Collection and Fiscal Modeling</b>				
Monthly report data collection	Identify and obtain needed data	Ongoing	Obtain data for monthly reports and develop standardized reports to inform policy development and implementation.	Data collection is ongoing.
Institute data audit process	Review data and files of cases with anomalies and identify trends	Ongoing	Ensure completeness and accuracy of wait list data.	Data validation process is ongoing. IT project team, and Research and Data Analysis (RDA) analysts, researched data anomalies to determine the cause, impact, and remediation required.
Forensic Data System Design/ Development	Analyze Legacy Applications Data Quality for Potential Data Migration In progress		<ul style="list-style-type: none"> <li>• Integrated Forensic System with consistent data entry and tracking of all class members from creation of court order for mental competency evaluation through completion of evaluation and/or restoration (whichever is later).</li> <li>• Provided capability for access by evaluators to client status changes, regardless of location, to reduce delays.</li> <li>• Provided a single platform for quality reporting, eliminating the variability currently inherent in leveraging legacy applications not meant for this purpose.</li> </ul>	The Project team continues to support the Forensic Data System, its users, and Research and Data Analysis (RDA) to streamline the reporting process out of a new system.

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Forensic Data System Post-implementation Processes	Data Migration Clean-up	In Process	Some Migrated Data contained historical elements that needed to be cleaned up in the new system.	Governance has deferred the load of the data sets from legacy systems. RDA is working on a dataset that might provide a better lookup for evaluators. That dataset will be reviewed when ready.
	Usability	In Process	<ul style="list-style-type: none"> <li>• The system contains modules that align with roles of forensic activities and allows for controlled access by those same user roles. This controlled access prevents users from easily seeing activity for a court order that crosses many modules.</li> <li>• Modify search screens to reveal all court orders for individual clients.</li> <li>• To streamline the admissions process, create refined report for inpatient movement (Due In/Due Out Report).</li> </ul>	<p>The IT project team has modified search screens to show a more complete snapshot of the court order which has eliminated the barriers resulting from role based access. Roles are still limited in what data may be edited.</p> <p>System now directs users to all court order for a client, including the client’s aliases.</p> <p>The Due In/Due Out Report has been modified to contain the essential fields for the hospital admission coordinators. Navigation for admission coordinators within FDS has been minimized.</p>
	System Data Issues	Partially Completed	<ul style="list-style-type: none"> <li>• Improve data integrity (date client status effectively changed, Forensic Evaluation Completion, Due In Date and Due Out Date)</li> <li>• Resolve missing data (CINs)</li> <li>• Built ability to link queues, status start dates and status due dates to changes in client data, delay reasons and good cause extensions to changes in client status.</li> </ul>	<p>Client Status History table has been added to the database and user interface, user interface has been updated to capture updated Court Order Due Date for Forensic Evaluation Completion.</p> <p>New Client Identification Number confirmer has been trained, and we are requesting access to additional secondary systems for identifying clients.</p> <p>New structure for capturing client status has been released to users on April 17, 2019.</p>
	RDA Reporting Issues	In Process	Ensure RDA is accounting for all / correct elements when building reports.	Once RDA is confident that their report queries are complete and accurate, the queries will be validated by the IT project team.



Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				RDA has expertise in the legacy database schemas and the court requirements. The IT project team has expertise in the new Forensic Data System schema and will continue to transfer that expertise to RDA.
<b>Human Resources</b>				
Hire Office of Forensic Services HQ positions	Hire and Onboard	Complete	Provide infrastructure for forensic services system and improve effective and timely provision of competency services.	For evaluator positions, five offers were made in June with start dates ranging from July 16 to October 1. Through July, seven total offers have been made and accepted. In August, OFMHS staff attended a national conference (American Psychological Association) to recruit. An offer was made in August and was accepted bringing the total number of accepted positions since June to eight. A second applicant was offered but declined a position. Lastly, a third applicant was interviewed for a position on the east side and the plan is to make an offer in September. Interviews will continue until all positions are filled.
Hire additional hospital ward staff	Conduct targeted hiring events	In progress	Obtain required staff of all classes to safely and appropriately operate additional civil and forensic beds and to meet data collection, analysis and reporting needs.	Talent Acquisition recruiting efforts continue.  <b>See page 26 for additional details on recruiting.</b>
	Pursue contracting			
<b>Competency Evaluation</b>				
Build capacity for out-station sites	Site agreements	N/A	Increased capacity at out-station sites will reduce wait time for evaluation.	A forensic evaluator has been assigned to the Ft. Steilacoom CRP, and will be responsible for all post-treatment competency evaluations there.
	Out-station sites operational	Complete		

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Coordinate with forensic mental health system partners	Regular meetings with County Stakeholders	Ongoing	Stakeholder meetings will focus on topics where collaborative work is required to meet the requirements of the <i>Trueblood</i> Decision.	<p>Quarterly stakeholder meetings continue to occur with Pierce County. The most recent was on June 12, 2019.</p> <p>OFMHS is now partnering with King County’s Department of Behavioral Health and Recovery to convene a group to address issues related to the <i>Trueblood</i> class members. This group has now met monthly since May 2019, with the most recent meeting occurring on July 22. Participants include police, behavioral health providers, shelter services, prosecutors, defenders, DRW, DSHS, and more.</p>
Continue current county-conducted evaluation system until 2018	Establish quality criteria for evaluation reports	Ongoing	Obtain data needed from counties in order to meet Court ordered reporting requirements.	<p>The Quality Assurance (QA) program for competency reports began November 1, 2017. Forensic Evaluator Supervisors were provided with a manual of standards for competency evaluations and then audited competency evaluation reports generated by their direct reports.</p> <p>During Q2 2019, 82% of forensic evaluators had competency evaluation reports audited by supervisors. A total of 48 competency evaluation reports were reviewed in Q2 2019. Q3 2019 data will be available after the end of September 2019.</p>
Explore and pursue triage system possibilities	Roll out Phase II	In progress	Establish an efficient evaluation to identify individuals who need inpatient services due to a serious mental health condition; who clearly do not require inpatient evaluation services; or who are clearly competent due to changes in their	As of August 31, 2019, OFMHS has received 360 triage referrals from jail staff/defense. Of those referrals, 224 were approved. 91 of the referrals were denied, 44 of these referrals were withdrawn before placement could be made, and 1 request is still in process.

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
			<p>condition since the issuance of an order for evaluation (i.e., no longer drug affected).</p>	<p>On November 2, 2016, OFMHS began calling jails holding in-custody defendants waiting 14 days for a competency evaluation to notify jail staff of the Triage Consultation and Expedited Admissions (TCEA) process. In August 2019, 20 calls were made to jails and 6 referral requests submitted, 2 of which were accepted.</p> <p>Since tracking began, 2,234 calls have been made.</p> <p>The Triage Services Users Guides are completed and were distributed statewide, via a Listserv created by OFMHS, which includes prosecutors, defense counsel, judges, jail staff, and others.</p> <p>A revised, updated, edition of these Guides has now been finalized, with input from the Court Monitor and Dr. Pinals.</p> <p>DSHS is holding three separate webinar trainings on the Triage system, as follows. The Triage training for jail staff will be held 9/16/2019. The training for attorneys will be held on 9/17/2019. The training for DSHS Reviewers of Triage requests will be held on 9/23/2019. Additionally, the recorded version of the training will be available electronically via the OFMHS website following the trainings.</p> <p>DSHS will be providing the updated Users Guides to the Triage System to all participants in these</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				<p>trainings. We will also be posting the updated Guides to the OFMHS website, and will provide a link to the updated Guides via our Listserv.</p>
<p>Develop Telehealth video-conferencing systems to assist in the completion of evaluations</p>	<p>State-wide implementation and utilization of technology</p>	<p>Ongoing</p>	<p>Establishing this technology in multiple locations around the state (especially in rural areas) will allow OFMHS to conduct more evaluations, thereby helping to meet Court ordered requirements.</p>	<p>The pilot evaluation of the Video Conferencing (VC) system was completed in February 2019 with 50 evaluations. The VC program is now in operational mode and will continue at the existing sites (four County Jails). Expansion to additional sites is not planned at this time. Dr. Luxton provided two training seminars on the topic in 2019. OFMHS continues to educate courts and jails on this technology in hopes of generating greater interest in and utilization of this technology.</p> <p>Since August 2018, 69 video conferences have been completed and 14 were rejected by the client's attorney. Video conference was utilized four times in August 2019.</p>
<p><b>Competency Restoration</b></p>				
<p>WSH – opening 30 forensic beds once 30 civil patients transition to community</p>	<p>Bed Occupancy with forensic patients</p>	<p>7/1/2018</p>	<p>Serves overall plan to add beds and expand State Hospital bed capacity to meet Court ordered requirements.</p>	<p>The 2017-19 budget provides funding to operate an additional 30-bed forensic ward in Fiscal Year 2019, assuming the closure of one 30-bed civil ward and subsequent conversion to a forensic unit. AL TSA, the DDA, and Western State Hospital are already collaborating on targeted efforts to successfully discharge patients into the community to reduce the population of one civil ward by 30 patients, as contemplated by the Legislature.</p> <p>South Hall 10 (S10) was reopened in May 2018 for forensic patients after civil patients were either</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				<p>moved or discharged. S10 is to be for forensic patients who are committed by NGRI and are ready to begin to transition to the community. WSH is on track for these additional beds so long as they can maintain and retain new psychiatrists to manage patient care.</p>
<p>WSH addition 45 beds</p>	<p>Bed Occupancy with forensic patients</p>	<p>Ongoing</p>		<p>The Legislature funded this request to operate 45 additional beds in building 27 and the S4 ward. The initial FY 2018 request can be found here:</p> <p><a href="https://www.dshs.wa.gov/data/budget/2018/030-PL-CV-Forensic-Ward-Staffing.pdf">https://www.dshs.wa.gov/data/budget/2018/030-PL-CV-Forensic-Ward-Staffing.pdf</a></p> <p>Forensic 3 (F3) was opened in June 2018 as another forensic admissions ward. F1 and F2 will continue to be the highest acuity for admission/restoration and F3 will add capacity for a similar, less acute admission/restoration program. South Hall 4 (S4) is expanding from 15 beds to 30. Because of the challenge to hire psychiatrists, the expansion of S4 is moving more slowly, increasing by one bed per week, until WSH can get locum support or additional psychiatrists hired.</p> <p>The legislature funded, in the 2019-2021 biennial budget (for purposes of the <i>Trueblood</i> Agreed Settlement), additional forensic bed capacity. Over \$27 million was allocated to DSHS for the addition of forensic bed capacity across the state. This includes two new 25-bed competency restoration units at Eastern State Hospital. In the 2017-19 budget, the</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				Legislature allotted funding for the conversion of 42 beds from civil to forensic on two wards at Western State Hospital per the agreement.
Provide Restoration Treatment at the Maple Lane Competency Restoration Program (MLCRP)	Restore Patients to Competency	Ongoing	<ul style="list-style-type: none"> <li>• Hard closure date set for June 30, 2024 unless the trigger event occurs.</li> </ul>	<b>Also, see data table on page 27.</b>
Provide Restoration Treatment at the Yakima Competency Restoration Program (YCRP)	Restore Patients to Competency	Ongoing	<ul style="list-style-type: none"> <li>• Hard closure date set for December 31, 2021 unless the trigger event occurs.</li> </ul>	<b>Also, see data table on page 27.</b>
Provide Restoration Treatment at Building 27	Open Building 27	Complete	<ul style="list-style-type: none"> <li>• Identify alternate facility capacity to meet <i>Trueblood</i> compliance.</li> <li>• Collaborate with Court parties to open the facility.</li> </ul>	<p>Ft. Steilacoom Competency Restoration Program opened at Building 27 in August. Work is ongoing to wrap up remaining construction and maintenance items, which would allow additional numbers of patients to be accepted for restoration services.</p> <p>The OFMHS Project Manager, Megan Celedonia, has broken the project down into 20 “buckets of work” (BOWs) for organizational and planning purposes.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				<p>BOW teams include: staffing, policy development, admissions criteria, licensure/certification, communications, labor relations, parties liaison, construction, training, patient records, facility services, purchasing, budget/fiscal, IT, incident reporting system, emergency management planning, labor and industries insurance, contracts, ESH referrals, and project management.</p> <p>The OFMHS Project Manager’s most recent Monthly Progress Report can be found at Appendix K.</p>
	Restore Patients to Competency	Ongoing	We accepted our first two patients on 8/28 and 8/29. We transferred our second patient out on 9/5/19 due to medical reasons. Our next two patients are due in on 9/11 and 9/12.	Work is ongoing to wrap up remaining construction and maintenance items. Facility issues are being resolved to allow admission of additional patients.
Outpatient Competency Restoration Programs (OCRP)	Diversion Programs are Operational	Ongoing	Development and implementation of outpatient competency restoration programs in King, Pierce, and Spokane Counties.	<p>Outpatient competency restoration programs were included in the <i>Trueblood</i> settlement. The Governor’s proposed budget for the 2019-2021 biennial budget included funding for the OCRP programs contemplated in the settlement.</p> <p>A workgroup has been convened with staff from both OFMHS and the State of Washington Health Care Authority to plan for effective implementation of this new endeavor within the three regions of the Settlement Agreement’s first phase.</p> <p>RFI issued September 4, 2019, with an amendment issued September 9 to correct the RFI number.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				<p>The finalized implementation model draft will be sent to workgroup participants for comment and review.</p> <p>The goal is to finalize a model prior to release of a Request for Proposals for OCRP services on November 1, 2019.</p>
County transport of patients	Coordinate with Counties to Develop Transport Protocols	Ongoing	Ensure timely transport of patients to support delivery of competency services as directed in court order.	During the month of August there were no concerns or questions about transportation issues brought forward to the attention of DSHS.
<b>Diversion Alternatives</b>				
Implement 2E2SSB 5177 (2015) provisions for dismissal of charges & referral to treatment	Diversion Programs are Operational	Ongoing	Prosecutor can dismiss criminal charges without prejudice & refer to community-based mental health services.	OFMHS Liaison and Diversion Specialist will continue to monitor the programs and provide technical assistance as needed to address any barriers.
Increase diversion opportunities	Governor's Office to Contract with Diversion Consultant	Complete	Hire a consultant to identify how best to divert persons with mental illness from the criminal justice system and identify appropriate funding mechanisms with appropriate stakeholders.	The Department engaged a jail/diversion consultant, who came out to DSHS in 2016 and provided a report at the end of that same year.



## FEBRUARY 8, 2016 COURT ORDER STATUS REPORT/UPDATES

The status updates to the February 8, 2016 Court Order are shown in the table below.

**Table 20.** Court Order Status Updates

Requirements	Date	Status	Progress Notes
<b>1. Implement a triage system to sort class members waiting for in-jail evaluations by the acuity of their mental illnesses and their current manifestations, by the seriousness of their crimes, and by the amount of resources their cases require:</b>			
A. Producing a triage plan for review and comment	March 1, 2016	Complete	Complete
B. Putting the triage plan into effect, after accounting for the comments received	March 15, 2016	Complete	Complete
C. Reporting on the implementation and effectiveness of the triage plan in Defendants' monthly reports to the Court Monitor	Beginning April 15, 2016	Ongoing	Refer to 3C. below.
<b>2. Eliminate the backlog of class members currently waiting for in-jail evaluations:</b>			
A. Formally notifying DSHS's forensic evaluators and Pierce County's panel evaluators of plan to eliminate the backlog of people waiting for in-jail evaluations, requesting their help in doing so, and providing plans to get evaluations done through the use of extra duty pay and other methods available	February 15, 2016	Complete	Complete
B. Preparing a list of all backlog cases, organized by jail and by county	March 1, 2016	Complete	Complete
C. Finalizing recruitment of evaluators to aid in the backlog elimination effort	March 1, 2016	Complete	Complete

Requirements	Date	Status	Progress Notes
and setting a schedule for the evaluation of each backlog case			
D. Initiating the backlog elimination effort	March 7, 2016	Complete	Complete
E. Completing evaluations for all backlog cases (any patient waiting more than 14 days at the end of the month)	April 15, 2016	Ongoing	Of the 444 jail evaluation orders signed in August, 350 were completed within 14 days, which is 79.0%. This number is expected to rise once the data are mature.
<b>3. Implement a triage system to sort class members waiting for in-hospital evaluations by the acuity of their mental illnesses and their current manifestations, by the seriousness of their crimes, and by the amount of resources their cases require:</b>			
C. Reporting on the implementation and effectiveness of the triage plan in Defendants' monthly reports to the Court Monitor	Beginning April 15, 2016	Ongoing	<p>As of August 31, 2019, OFMHS has received 360 triage referrals from jail staff/defense. Of those referrals, 224 were approved. 91 of the referrals were denied, 44 of these referrals were withdrawn before placement could be made, and 1 request is still in process.</p> <p>The Triage Services Users Guides are completed and were distributed statewide, via a Listserv created by OFMHS, which includes prosecutors, defense counsel, judges, jail staff, and others.</p> <p>A revised, updated, edition of these Guides has now been finalized, with input from the Court Monitor and Dr. Pinals.</p> <p>DSHS is holding three separate webinar trainings on the Triage system, as follows. The Triage training for jail staff will be held 9/16/2019. The training for attorneys will be held on 9/17/2019. The training for DSHS Reviewers of Triage requests will be held on 9/23/2019. Additionally, the recorded version of the training will be available electronically via the OFMHS website following the trainings.</p>

Requirements	Date	Status	Progress Notes
			<p>DSHS will be providing the updated Users Guides to the Triage System to all participants in these trainings. We will also be posting the updated Guides to the OFMHS website and will provide a link to the updated Guides via our Listserv.</p>
<p><b>4. Implement a triage system to sort class members waiting for restoration services by the acuity of their mental illnesses and their current manifestations, by the seriousness of their crimes, and by the amount of resources their cases require:</b></p>			
<p>C. Reporting on the implementation and effectiveness of the triage plan in Defendants' monthly reports to the Court Monitor</p>	<p>Beginning April 15, 2016</p>	<p>Ongoing</p>	<p>As of August 31, 2019, OFMHS has received 360 triage referrals from jail staff/defense. Of those referrals, 224 were approved. 91 of the referrals were denied, 44 of these referrals were withdrawn before placement could be made, and 1 request is still in process.</p> <p>The <i>Triage Services Users Guides</i> were completed and distributed statewide, via a Listserv created by OFMHS, which includes prosecutors, defense counsel, judges, jail staff, and others.</p> <p>A revised, updated, edition of these guides has now been finalized, with input from the Court Monitor and Dr. Pinals.</p> <p>DSHS is holding three separate webinar trainings on the Triage system, as follows. The Triage training for jail staff will be held September 16, 2019. The training for attorneys will be held on September 17, 2019. The training for DSHS Reviewers of Triage requests will be held on September 23, 2019. Additionally, the recorded version of the training will be available electronically via the OFMHS website following the trainings.</p> <p>DSHS will provide the updated <i>Users Guides to the Triage System</i> to all participants in these trainings. We will also</p>

Requirements	Date	Status	Progress Notes
			post the updated guides to the OFMHS website and will provide a link to the updated guides via our Listserv.
<b>5. Report on the implementation status of the CMS Plan of Correction:</b>			
B. Reporting on the implementation status in Defendants' monthly reports to the Court Monitor	Beginning March 15, 2016	Ongoing	<p>DSHS entered into a second System Improvement Agreement with the Centers for Medicare and Medicaid Services (CMS). This agreement ran from November 2, 2017 to July 2, 2018. A copy of the agreement was shared with Dr. Mauch by defense counsel on November 3, 2017. As a result of a Court Order in April, the Department worked with Plaintiffs and the Court Monitor in developing a bed capacity/expansion plan.</p> <p>WSH was resurveyed May 2018 and did not meet all the Conditions of Participation (COP) with CMS. As of July 9, 2018, WSH was decertified. ESH remains accredited by The Joint Commission and CMS certified.</p> <p>WSH continues to work using Functional Work Teams (FWTs) towards CMS certification. The legislature funded design of a new hospital, which will be required to meet all the COP for CMS certification.</p>
<b>6. Plan for recruiting and staffing 30 beds at WSH after compliance with CMS's terms of participation is achieved in March:</b>			
C. Reporting on the implementation status of the plan and timeframe in Defendants' monthly reports to the Court Monitor	Beginning April 15, 2016	Ongoing	<p>DSHS entered into a second System Improvement Agreement with CMS. This agreement ran from November 2, 2017 to July 2, 2018. A copy of the agreement was shared with Dr. Mauch by defense counsel on November 3, 2017. As a result of a Court Order in April, the Department worked with Plaintiffs and the Court Monitor in developing a bed capacity/expansion plan.</p> <p>WSH was resurveyed May 2018 and did not meet all the COP with CMS. As of July 9, 2018, WSH was decertified.</p>

Requirements	Date	Status	Progress Notes
			<p>PSHB Sec. 204 budgeted for the 30 beds at WSH and was completed prior to CMS decertification.</p> <p>WSH continues to work using Functional Work Teams (FWTs) towards CMS certification. The legislature funded design of a new hospital, which will be required to meet all the COP for CMS certification.</p>
<b>8. Remove barriers to the expenditure of the \$4.8 million in currently allocated diversion funds:</b>			
D. Executing contracts for implementation by the selected providers	April 15, 2016	Complete	Prosecutorial diversion was funded for fiscal year 2020.
<b>10. Develop a reliable and valid client-level data system to support better management and accountability of the forensic services system:</b>			
E. Implementing revisions to the existing system or initiating development of a new forensic data and management information system	To initiate new system development efforts- May 27, 2016	Phase 1 close out	<p>The project team continues to support the Forensic Data System, its users, and Research and Data Analysis (RDA) to provide increased data granularity for reporting out of a new system.</p> <p>Phase 1 is closing out and enhancements to the Forensic Data System have been prioritized by the Governance Committee for Phase 2.</p>

## **JULY 7, 2016 CONTEMPT ORDER STATUS UPDATES**

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The three status updates required in the July 7, 2016 Court Order are below.

1. Monetary sanctions – fines are imposed on a per class member, per day basis. On the 15<sup>th</sup> of every month, DSHS is required to submit contempt fines data to the Court. These data were submitted to the Court on August 15, 2016 and will be included in this report, when finalized each month, as Appendices H and I.
2. Diversion plans – DSHS is ordered to develop, in consultation with the Court Monitor, plans for the expenditure of the contempt fines.
3. Wait time data – DSHS shall submit to the Court wait time data in a manner identical to the data submitted on June 17, 2016 in the declaration of Bryan Zolnikov. These data are included in this report in Table 4.

## **AUGUST 15, 2016 ORDER MODIFYING PERMANENT INJECTION AS TO IN JAIL COMPETENCY EVALUATIONS**

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Pursuant to the August 15, 2016 Court Order, DSHS must provide in-jail competency evaluations within 14 days of a signed court order. When an in-jail evaluation cannot be completed within 14 days and good cause applies (i.e., delay due to clinical reasons, attorney, interpreter, or defense expert), an extension from the ordering court must be secured or DSHS must immediately admit the individual to a state hospital to finish conducting the evaluation. In order to comply with the reporting requirements of the Court Order, DSHS identified a need to revise both the current process used for seeking extensions from the criminal court, as well as the data collected during that process. Since the August 15 Court Order, DSHS identified a series of necessary changes that will enable DSHS to comply with the Order, to include the following:

1. Develop a list of data elements needed to comply with the Court Order to include additional delay data;
2. Develop a data dictionary to define the data elements needed;
3. Develop a process of reporting the information to the courts for the exception requests;
4. Identify the cutoff date for seeking an exception;
5. Develop a standardized form that can be used for seeking good cause exceptions;
6. Develop an operating procedure to guide evaluators through the new good cause process;
7. Coordinate with the Attorney General's Office to ensure adequate representation;
8. Develop a process for collecting the data to report to the courts for the exceptions and to maintain for monthly reporting;
9. Develop a model for the delays and the data pertaining to the delays; and
10. Modify the current IT systems or develop a new database in which to maintain the information once all above steps are completed.

DSHS implemented the Forensic Data System August 1, 2018. Included in this design were the data elements needed to report to the courts. Included in the initial release is the implementation of the new forensic algorithm waitlist. Data was migrated from existing systems and provided the starting point for DSHS on August 1. The Project team continues to support the Forensic Data System, its users and the RDA unit to provide increased data granularity for reporting out of a new system.

The Forensic Advisory Committee (FAC) meets semi-monthly and provides business process clarification and recommendations to the technical team. The FAC will continue to meet to provide input during

system optimization and future enhancements. Recommendations from the FAC may be referred to the Governance Committee when appropriate. The Governance Committee meets at least monthly to monitor status and render final decisions on key topics. Governance also prioritizes the future functionality to ensure that the IT project work aligns with the needs of the Court and other stakeholders.

## APPENDICES

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### **Appendices A-G:** Data Tables; Class Member Evaluation/Restoration Information; Class Member Restoration Information for the Maple Lane, Yakima, & Fort Steilacoom Programs; and Percent of Court Orders Received Within Three Days

This file is submitted with the DRAFT and FINAL reports and includes data tables as well as order received rate data.

### **Appendix H:** Outliers and Delay Comments

This file is submitted with the DRAFT and FINAL report and contains the Outlier data and delay comments.

### **Appendix I:** Calculation of Inpatient Contempt Fines

This file is submitted with the FINAL report only and contains the calculation of inpatient contempt fines data.

### **Appendix J:** Calculation of Jail-Based Contempt Fines

This file is submitted with the FINAL report only and contains the calculation of in-jail contempt fines data.

### **Appendix K:** Good Cause Exceptions

This file is submitted with the FINAL report only and contains the good cause extension request data.

### **Appendix L:** Fort Steilacoom Competency Restoration Program Progress Report

This file is submitted with the DRAFT and FINAL report and contains the project manager's progress report on the Fort Steilacoom Competency Restoration Program.