

***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

December 31, 2019

Behavioral Health Administration
Office of Forensic Mental Health Services
PO Box 45050
Olympia, WA 98504-5050
(360) 725-2260
Fax: (360) 407-0304



TABLE OF CONTENTS

BACKGROUND4

CLASS MEMBER STATUS SUMMARY INFORMATION5

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

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

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

CLASS MEMBER STATUS DATA TABLES8

CLASS MEMBER STATUS DATA GRAPHS17

TABLES 11-13: SUMMARY OF JAIL EVALUATIONS, IN-PATIENT EVALUATIONS, AND RESTORATIONS BY MONTH SINCE FEBRUARY 201620

RESOURCES REQUIRED TO PROVIDE TIMELY COMPETENCY SERVICES23

FUNDING AND RESOURCES23

2019-2021 BIENNIAL BUDGET SUMMARY FOR TRUEBLOOD AGREED SETTLEMENT23

NEED PROJECTIONS AND BED CAPACITY25

TRUEBLOOD KEY ACCOMPLISHMENTS – NOVEMBER 2019.....26

RECRUITING26

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

TRUEBLOOD IMPLEMENTATION STEPS TAKEN AND PLANNED – NOVEMBER 201929

FEBRUARY 8, 2016 COURT ORDER STATUS REPORT/UPDATES44

JULY 7, 2016 CONTEMPT ORDER STATUS UPDATES48

AUGUST 15, 2016 ORDER MODIFYING PERMANENT INJUCTION AS TO IN JAIL COMPETENCY EVALUATIONS49

APPENDICES51

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.....51

Appendix H: Outliers and Delay Comments51

Appendix I: Calculation of Inpatient Contempt Fines.....51

Appendix J: Calculation of Jail-Based Contempt Fines51

Appendix K: Good Cause Exceptions51

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. Signed Evaluation Orders for Trueblood Class Members	17
Figure 2. Signed Restoration Orders for Trueblood Class Members	17
Figure 3. Median Days from Court Order Signature to Completed Evaluation	18
Figure 4. Average Days from Court Order Signature to Completed Evaluation	18
Figure 5. Median Days from Court Order Signature to Completed Restoration	19
Figure 6. Average Days from Court Order Signature to Completed Restoration	19
Table 11. Total Completed Jail Evaluation Orders by Month Court Order Signed	20
Table 12. Total Completed Inpatient Evaluation Orders by Month Court Order Signed	21
Table 13. Total Completed Restoration Orders by Month Court Order Signed	22
Table 14. Monthly RTF Data for Yakima	27
Table 15. Monthly RTF Data for Maple Lane	27
Table 16. Monthly RTF Data for Fort Steilacoom	28
Table 17. Trueblood Implementation Steps	29
Table 18. Court Order Status Updates.....	44

BACKGROUND

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 December 31, 2019 and covers the events of November 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 44.

This report provides the Class Member data for competency services displayed in two periods: October 1, 2019 – October 31, 2019 and November 1, 2019 – November 30, 2019. The October data are considered “mature” and the November 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

ANALYSIS OF MATURE DATA: MAY 1, 2015 THROUGH OCTOBER 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-October 2019
 - Western State Hospital (WSH): 246.6
 - Eastern State Hospital (ESH): 59.1
 - Both hospitals: 305.7

- Average monthly inpatient evaluation orders signed for April 2015- October 2019
 - WSH: 15.6
 - ESH: 8.3
 - Both hospitals: 23.9

- Average monthly restoration orders signed for April 2015- October 2019
 - WSH: 82.8 *
 - ESH: 17.5
 - Both hospitals: 100.3 *
 - Hospitals + Residential Treatment Facility (RTF's): 108.6

- Average monthly RTF restoration orders signed for August 2018- October 2019
 - RTF's: 30.8 **

* From April 2015 to July 2018, this figure also includes orders from the RTF's; therefore, these figures exceed the WSH figures and the two hospital figures combined.

** Prior to August 2018, RTF data was combined with WSH. From August 2018 onward, RTF data is reported separately.

SUMMARY POINTS RELATED TO ORDERS AND TIMELINESS BASED ON MATURE OCTOBER DATA

Orders:

- The number of jail-based evaluation orders assigned to WSH surged 39.8% from an already challenging 21% above average in September to a record 411 in October. ESH's orders also grew 11.8% to 95 after trending flat between July and October. Combined, the hospitals received 506 jail-based orders in October, a new record and 33.5% increase over September. This is really a historic demand trend. Four of the last seven months have tied or set new records for jail-based evaluations in our State system. Eight consecutive months have seen evaluations of at least 375, and three of those months exceeded 450 evaluations. Part of the explanation for this trend is illustrated below in the collapsing demand for inpatient competency evaluation services.

- WSH received 2 inpatient evaluation orders which is substantially lower than the 15.6 average and a 75% decrease compared to September's already low number of orders. ESH had 7 inpatient evaluation orders, which is slightly below their 8.3 average. Orders at both hospitals totaled 9, which

is a significant 62.3% drop from the 23.9 monthly inpatient evaluation average.

- WSH received 111 restoration orders, a 54.2% increase compared to September. The average number of restoration orders is 82.8. ESH had 26 orders in October, which is significantly higher than the 17.5. The RTF's received 31 orders, which is on target with their monthly average of 30.8 * orders. There were 168 restoration orders across both hospitals and the RTF's, which is a 43.6% increase compared to the previous month and a new record for restoration orders. These record high orders remain well above the 100.3 average for the hospitals as well as the 108.6 * hospitals plus RTF's average.

* Prior to August 2018, RTF data was included with the data for WSH. From August 2018 onward, RTF data is reported separately.

Wait Times:

- Regarding jail-based 14-day evaluation completion times, WSH improved slightly to 11.5 days on average from order to completion and ESH experienced a slight performance decline and is now averaging 12.3 days. The combined average is 13.1 days.
- The average inpatient evaluation admission wait time at WSH is 50.5 days, a 19.2% improvement over September. ESH's average declined moderately to 38.1 days. The combined average improved modestly to 44.3 days.
- Restoration admission wait times at WSH is 31.9 days on average, a 27.7% improvement over September. The ESH average is 32 days, which is a modest improvement compared to September. The combined average admission wait time for inpatient restoration is 34.7 days, which is a 20.8% improvement over September.

Timeliness:

- At both hospitals combined, overall timeliness for jail-based evaluation completion remained the same at an 86% completion rate within 14 days from receipt of order.
- At both hospitals combined, overall timeliness for inpatient evaluation admissions is at a 5% completion rate within 7 days from receipt of order. This is a decrease from the prior month.
- At both hospitals and the RTF's combined, overall timeliness for inpatient restoration admissions improved moderately to a 26% completion rate within 7 days.

OUTLIER CASES (MATURE) – OCTOBER 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 October 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: October-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	5	23	76
Inpatient Evaluations	9	24	45
Restorations	18	42	162
SUMMARY OF DELAY REASONS ¹			
REASONS FOR DELAY IN DATABASE	In-Jail Evaluations	Inpatient Evaluations	Restorations
Attorney No Show			
Attorney scheduling conflicts	2		
Bed availability		8	18
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			
Police reports availability	2	1	
Processor error/clerical error			
Relevant discovery availability			
Requires amended court order			
unknown	2		

¹An 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 November. November 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 ¹													
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		within 14 days from order signature date ^{5,6}	within 14 days from receipt of order ^{5,6}	within 14 days from receipt of order or 21 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
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	10.8	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	11.7	12.0	82%	86%	86%
May-19	326	0.5	0.0	0.9	0.0	n/a	n/a	321	12.3	13.0	79%	83%	85%
Jun-19	306	0.7	0.0	1.0	0.0	n/a	n/a	280	12.9	13.0	75%	81%	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	368	0.7	0.0	1.1	0.0	n/a	n/a	360	11.7	12.0	81%	86%	89%
Sep-19	294	0.6	0.0	0.9	0.0	n/a	n/a	328	12.0	13.0	84%	87%	89%
Oct-19	411	0.7	0.0	1.0	0.0	n/a	n/a	374	11.5	12.0	84%	88%	91%
Nov-19	294	0.8	0.0	0.9	0.0	6.8	8.0	327	12.6	13.0	78%	85%	89%

¹Data 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.

²Court 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.

³Days from order signature to³ 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)).

⁴Court 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.

⁵From 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.

⁶From 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) ¹													
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		Percent complete within 7 days from order signature date ^{5,6}	Percent completed within 7 days from receipt of order ^{5,6}	Percent completed within 7 days from receipt of order or within 14 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
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	28.8	30.0	26%	26%	26%
Apr-19	11	5.4	0.0	5.7	0.0	n/a	n/a	10	24.8	20.0	10%	10%	10%
May-19	15	3.8	0.0	4.6	0.0	n/a	n/a	5	22.8	14.0	20%	20%	20%
Jun-19	11	3.1	0.0	4.8	0.5	n/a	n/a	11	31.0	36.0	9%	9%	9%
Jul-19	4	5.3	0.0	7.4	0.0	n/a	n/a	10	46.6	49.5	0%	0%	0%
Aug-19	18	4.1	0.0	5.2	0.0	n/a	n/a	11	47.7	54.0	9%	9%	9%
Sep-19	8	1.2	0.0	1.3	0.0	74.0	74.0	13	62.5	42.0	8%	8%	8%
Oct-19	2	0.4	0.0	0.5	0.0	74.0	74.0	11	50.5	54.0	9%	9%	9%
Nov-19	7	0.9	0.0	0.9	0.0	28.8	25.5	7	35.3	46.0	0%	0%	0%

¹Data 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.

²Court 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.

³Days from order signature to³ 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)).

⁴Court 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.

⁵From 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.

⁶From 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) ¹													
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		Percent complete within 7 days from order signature date ^{5,6}	Percent completed within 7 days from receipt of order ^{5,6}	Percent completed within 7 days from receipt of order or within 14 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Nov-18	62	1.8	0.0	2.2	0.0	n/a	n/a	70	57.5	50.0	0%	20%	20%
Dec-18	74	1.9	0.0	2.1	0.0	n/a	n/a	66	46.7	28.5	27%	30%	33%
Jan-19	82	1.8	0.0	1.9	0.0	n/a	n/a	82	51.7	42.0	27%	28%	28%
Feb-19	85	0.8	0.0	0.9	0.0	n/a	n/a	83	47.5	41.0	22%	25%	25%
Mar-19	88	1.5	0.0	1.5	0.0	n/a	n/a	109	38.6	32.0	19%	20%	22%
Apr-19	93	1.9	0.0	1.8	0.0	n/a	n/a	67	35.4	35.0	30%	30%	30%
May-19	89	3.4	0.0	3.4	0.0	n/a	n/a	87	39.5	35.0	21%	21%	21%
Jun-19	83	3.4	0.0	3.7	0.0	n/a	n/a	110	46.4	49.0	17%	18%	19%
Jul-19	64	4.1	0.0	4.6	0.0	n/a	n/a	73	36.7	37.0	27%	26%	27%
Aug-19	80	3.8	0.0	4.1	0.0	n/a	n/a	74	39.8	40.0	26%	27%	28%
Sep-19	72	4.2	0.0	4.4	0.0	64.5	64.5	82	44.1	42.0	20%	22%	22%
Oct-19	111	3.7	0.0	3.9	0.0	40.6	39.0	102	31.9	29.0	29%	32%	32%
Nov-19	103	1.8	0.0	1.9	0.0	23.9	24.0	66	29.9	24.5	26%	26%	27%

¹Data 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.
²Court 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.
³Days from order signature to³ 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)).
⁴Court 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.
⁵From 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.
⁶From 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) ¹													
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		Percent complete within 7 days from order signature date ^{5,6}	Percent completed within 7 days from receipt of order ^{5,6}	Percent completed within 7 days from receipt of order or within 14 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
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	33	40.9	41.0	27%	27%	27%
Jan-19	27	2.2	0.0	2.7	0.0	n/a	n/a	28	61.9	67.5	14%	11%	14%
Feb-19	22	0.9	0.0	1.3	0.0	n/a	n/a	25	56.2	63.0	20%	20%	20%
Mar-19	32	0.8	0.0	1.2	0.0	n/a	n/a	34	42.0	42.0	21%	21%	21%
Apr-19	39	1.7	0.0	1.8	0.0	n/a	n/a	33	32.7	40.0	30%	27%	30%
May-19	30	2.4	0.0	2.1	0.0	n/a	n/a	33	39.9	46.0	18%	18%	21%
Jun-19	30	2.1	0.0	2.2	0.0	n/a	n/a	26	41.6	48.5	19%	19%	19%
Jul-19	30	2.0	0.0	2.1	0.0	n/a	n/a	40	41.5	45.5	18%	18%	20%
Aug-19	42	2.0	0.0	2.1	0.0	n/a	n/a	28	39.9	43.5	25%	25%	25%
Sep-19	22	1.4	0.0	1.6	0.0	n/a	n/a	28	50.4	57.0	14%	14%	14%
Oct-19	31	0.7	0.0	0.7	0.0	n/a	n/a	45	42.7	49.0	16%	16%	16%
Nov-19	11	0.4	0.0	0.5	0.0	n/a	n/a	39	28.7	33.0	28%	28%	28%

¹Data 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.
²Court 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.
³Days from order signature to³ 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)).
⁴Court 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.
⁵From 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.
⁶From 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 ¹													
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		within 14 days from order signature date ^{5,6}	within 14 days from receipt of order ^{5,6}	within 14 days from receipt of order or 21 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Nov-18	62	1.3	0.0	2.1	1.0	n/a	n/a	60	13.6	14.0	60%	67%	68%
Dec-18	56	1.0	0.0	1.9	1.0	n/a	n/a	79	13.8	13.0	70%	76%	77%
Jan-19	67	1.1	0.0	2.2	1.0	n/a	n/a	55	10.6	9.0	73%	75%	78%
Feb-19	61	1.8	0.0	3.0	1.0	n/a	n/a	57	14.3	14.0	60%	70%	70%
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	77	13.0	13.0	81%	87%	87%
Jun-19	95	1.1	0.0	1.9	1.0	n/a	n/a	95	13.2	14.0	68%	71%	78%
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	83	0.6	0.0	1.0	0.0	n/a	n/a	87	11.2	10.0	70%	71%	84%
Sep-19	85	0.8	0.0	1.3	1.0	n/a	n/a	75	11.7	12.0	73%	81%	85%
Oct-19	95	1.1	0.0	1.9	1.0	60.0	60.0	101	12.3	13.0	67%	77%	86%
Nov-19	76	0.9	0.0	2.0	1.0	10.5	5.0	74	15.3	13.0	64%	72%	77%

¹Data 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.

²Court 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.

³Days from order signature to³ 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)).

⁴Court 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.

⁵From 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.

⁶From 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 6. Class Member Status Eastern State Hospital – Inpatient Competency Services (Inpatient Evaluations) ¹													
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		Percent complete within 7 days from order signature date ^{5,6}	Percent completed within 7 days from receipt of order ^{5,6}	Percent completed within 7 days from receipt of order or within 14 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Nov-18	13	0.2	0.0	0.5	0.5	n/a	n/a	13	19.0	18.0	0%	15%	15%
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	n/a	n/a	8	49.0	50.5	0%	0%	0%
Jul-19	11	3.9	0.0	0.6	0.0	n/a	n/a	11	42.4	42.0	0%	0%	9%
Aug-19	10	0.3	0.0	0.5	0.0	n/a	n/a	15	30.0	28.0	20%	20%	20%
Sep-19	13	0.3	0.0	2.0	0.5	n/a	n/a	9	27.4	19.0	11%	11%	22%
Oct-19	7	0.1	0.0	4.8	1.0	37.3	37.0	11	38.1	42.0	0%	0%	9%
Nov-19	8	0.3	0.0	3.8	1.0	21.0	12.0	8	30.6	38.5	13%	13%	13%

¹Data 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.

²Court 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.

³Days from order signature to³ 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)).

⁴Court 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.

⁵From 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.

⁶From 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)¹

MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		Percent complete within 7 days from order signature date ^{5,6}	Percent completed within 7 days from receipt of order ^{5,6}	Percent completed within 7 days from receipt of order or within 14 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
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	21	1.1	1.0	1.1	0.5	n/a	n/a	20	39.3	47.0	10%	10%	15%
Jun-19	26	0.5	0.0	0.9	0.0	n/a	n/a	24	37.3	48.0	21%	21%	25%
Jul-19	28	0.7	0.0	1.2	0.0	n/a	n/a	30	34.1	44.0	23%	23%	27%
Aug-19	21	0.8	0.0	1.4	0.0	n/a	n/a	23	35.7	48.0	30%	30%	30%
Sep-19	23	0.6	0.0	1.1	0.0	n/a	n/a	28	36.0	47.0	32%	32%	32%
Oct-19	26	0.8	0.0	0.9	0.0	39.3	37.5	28	32.0	40.0	29%	29%	32%
Nov-19	18	0.9	0.0	0.9	0.0	18.8	18.0	19	33.3	42.0	21%	21%	26%

¹Data 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.

²Court 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.

³Days from order signature to³ 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)).

⁴Court 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.

⁵From 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.

⁶From 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 ¹													
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		within 14 days from order signature date ^{5,6}	within 14 days from receipt of order ^{5,6}	within 14 days from receipt of order or 21 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Nov-18	312	0.7	0.0	1.1	0.0	n/a	n/a	334	12.8	13.0	72%	76%	78%
Dec-18	282	0.6	0.0	1.0	0.0	n/a	n/a	309	11.6	11.0	84%	89%	90%
Jan-19	358	0.4	0.0	0.8	0.0	n/a	n/a	317	11.1	12.0	81%	84%	85%
Feb-19	294	0.8	0.0	1.4	0.0	n/a	n/a	287	12.9	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	398	12.4	13.0	79%	84%	85%
Jun-19	401	0.8	0.0	1.2	0.0	n/a	n/a	375	13.0	13.0	73%	79%	82%
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	451	0.7	0.0	1.0	0.0	n/a	n/a	447	11.6	12.0	79%	83%	88%
Sep-19	379	0.6	0.0	1.0	0.0	n/a	n/a	403	12.0	12.0	82%	86%	88%
Oct-19	506	0.8	0.0	1.2	0.0	60.0	60.0	475	11.6	12.0	81%	86%	90%
Nov-19	370	0.8	0.0	1.1	0.0	7.7	8.0	401	13.1	13.0	75%	82%	87%

¹Data 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.

²Court 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.

³Days from order signature to³ 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)).

⁴Court 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.

⁵From 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.

⁶From 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) ¹													
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		Percent complete within 7 days from order signature date ^{5,6}	Percent completed within 7 days from receipt of order ^{5,6}	Percent completed within 7 days from receipt of order or within 14 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Nov-18	26	1.4	0.0	1.7	0.5	n/a	n/a	25	27.8	29.0	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	n/a	n/a	18	25.1	21.0	11%	11%	11%
May-19	24	3.6	0.0	4.1	1.0	n/a	n/a	22	37.5	45.5	9%	9%	9%
Jun-19	20	3.6	0.0	4.4	1.0	n/a	n/a	19	38.6	48.0	5%	5%	5%
Jul-19	15	4.6	0.0	4.3	0.0	n/a	n/a	21	44.4	46.0	0%	0%	5%
Aug-19	28	2.5	0.0	3.5	0.0	n/a	n/a	26	37.5	46.0	15%	15%	15%
Sep-19	21	0.8	0.0	1.6	0.0	74.0	74.0	22	48.2	36.5	9%	9%	14%
Oct-19	9	0.2	0.0	2.4	0.0	46.5	40.5	22	44.3	46.5	5%	5%	9%
Nov-19	15	0.6	0.0	2.3	0.5	24.6	25.0	15	32.8	41.0	7%	7%	7%

¹Data 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.

²Court 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.

³Days from order signature to³ 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)).

⁴Court 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.

⁵From 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.

⁶From 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) ¹													
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		Percent complete within 7 days from order signature date ^{5,6}	Percent completed within 7 days from receipt of order ^{5,6}	Percent completed within 7 days from receipt of order or within 14 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
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	118	43.6	28.5	29%	31%	32%
Jan-19	132	1.8	0.0	2.0	0.0	n/a	n/a	135	48.9	40.0	24%	24%	25%
Feb-19	139	0.9	0.0	1.0	0.0	n/a	n/a	130	44.5	38.5	23%	25%	25%
Mar-19	143	1.2	0.0	1.3	0.0	n/a	n/a	165	36.5	30.0	21%	21%	22%
Apr-19	161	1.7	0.0	1.7	0.0	n/a	n/a	124	33.9	35.5	29%	28%	31%
May-19	140	2.8	0.0	2.8	0.0	n/a	n/a	140	39.6	42.0	19%	19%	20%
Jun-19	139	2.6	0.0	2.9	0.0	n/a	n/a	160	44.3	49.0	18%	19%	20%
Jul-19	122	2.9	0.0	3.3	0.0	n/a	n/a	143	37.5	42.0	24%	23%	25%
Aug-19	143	2.8	0.0	3.2	0.0	n/a	n/a	125	39.1	45.0	26%	27%	28%
Sep-19	117	2.9	0.0	3.2	0.0	64.5	64.5	138	43.8	45.5	21%	22%	22%
Oct-19	168	2.5	0.0	2.7	0.0	40.5	39.0	175	34.7	41.0	26%	27%	28%
Nov-19	132	1.5	0.0	1.5	0.0	23.3	24.0	124	30.1	32.5	26%	26%	27%

¹Data 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.

²Court 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.

³Days from order signature to³ 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)).

⁴Court 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.

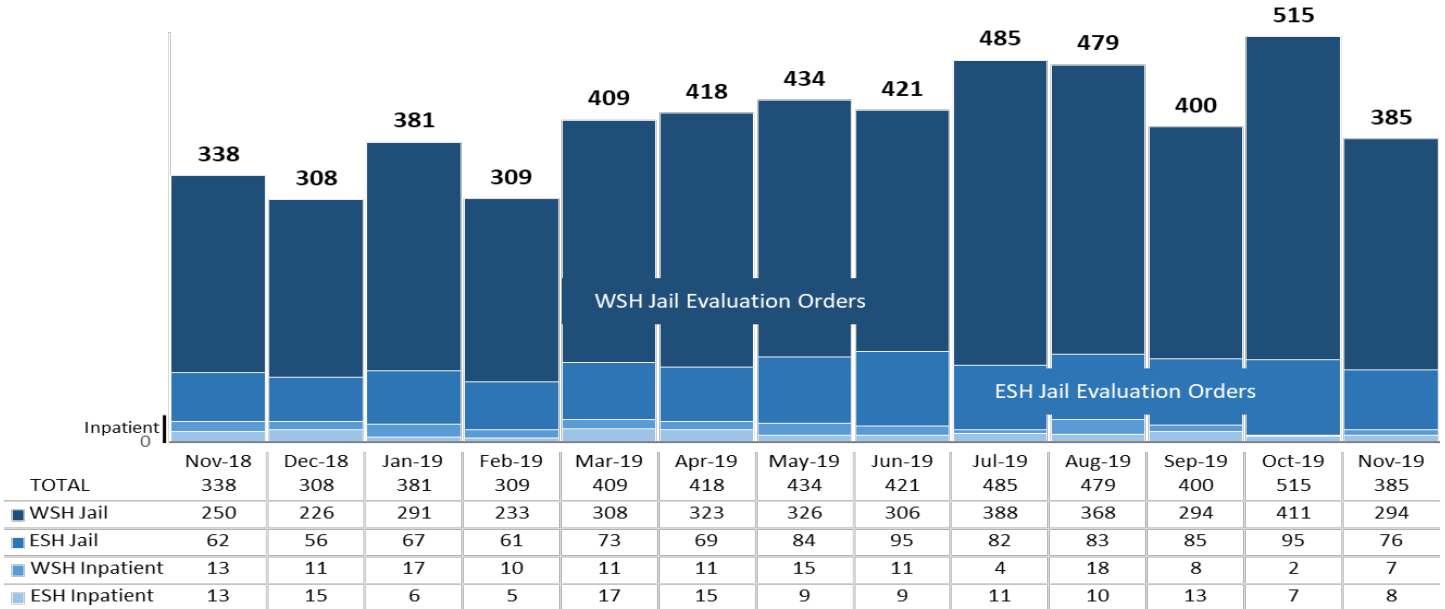
⁵From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: completion and the percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

⁶From 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

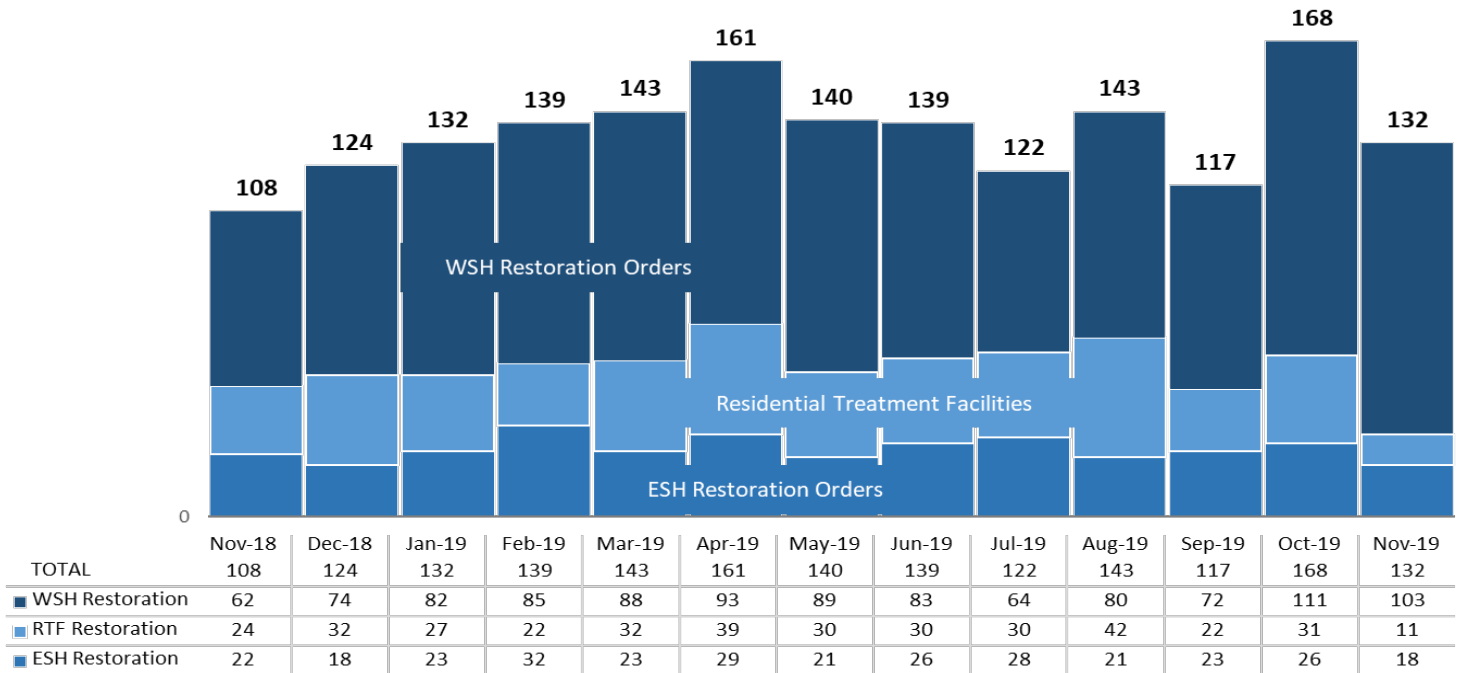
The following Figures, Figures 1-6, present “first look” November data and are subject to change.

Figure 1. Signed Evaluation Orders for Trueblood Class Members



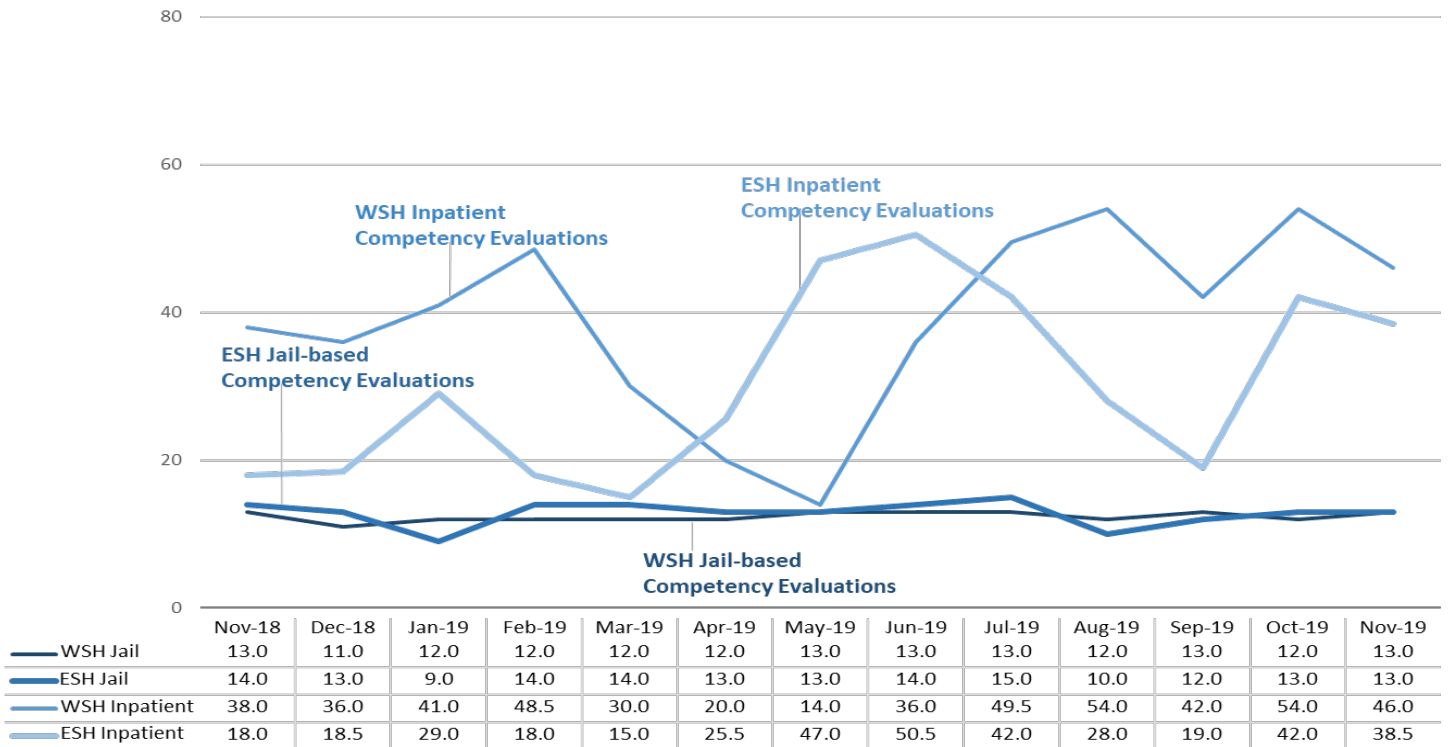
SOURCE: DSHS Facilities, Finance, and Analytics Administration, Research and Data Analysis Division, Forensic Data System, December 2019.

Figure 2. Signed Restoration Orders for Trueblood Class Members



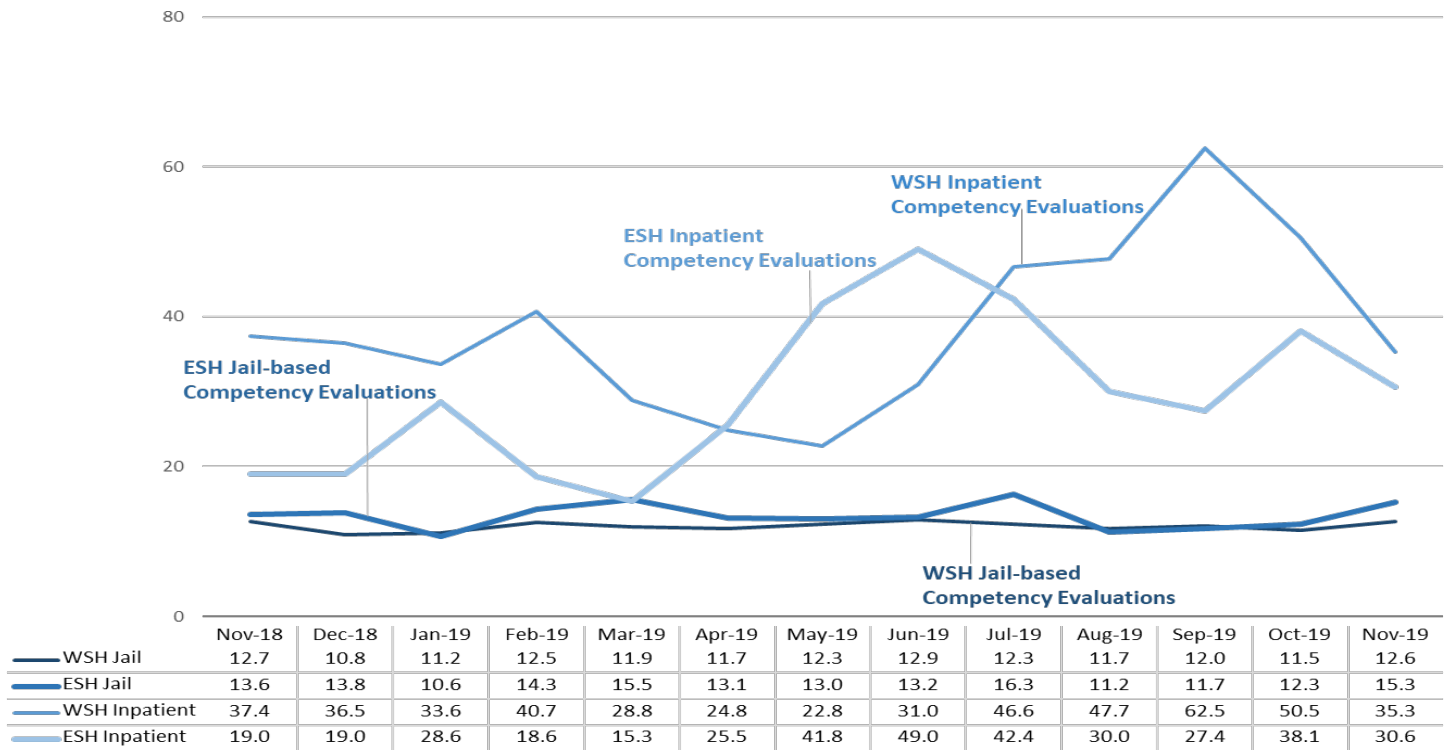
SOURCE: DSHS Facilities, Finance, and Analytics Administration, Research and Data Analysis Division, Forensic Data System, December 2019.

Figure 3. Median Days from Court Order Signature to Completed Evaluation



SOURCE: DSHS Facilities, Finance, and Analytics Administration, Research and Data Analysis Division, Forensic Data System, December 2019.

Figure 4. Average Days from Court Order Signature to Completed Evaluation



SOURCE: DSHS Facilities, Finance, and Analytics Administration, Research and Data Analysis Division, Forensic Data System, December 2019.

Figure 5. Median Days from Court Order Signature to Completed Restoration

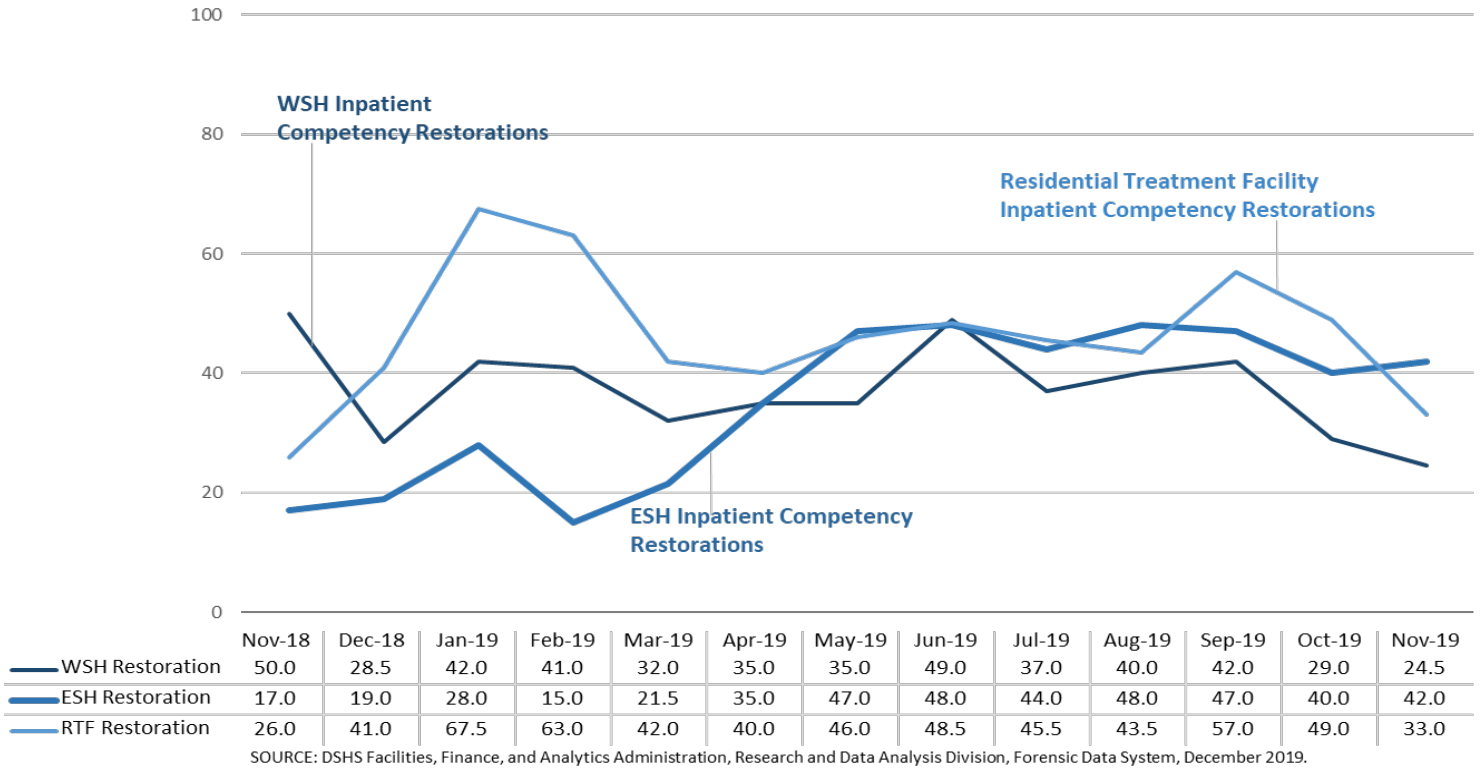
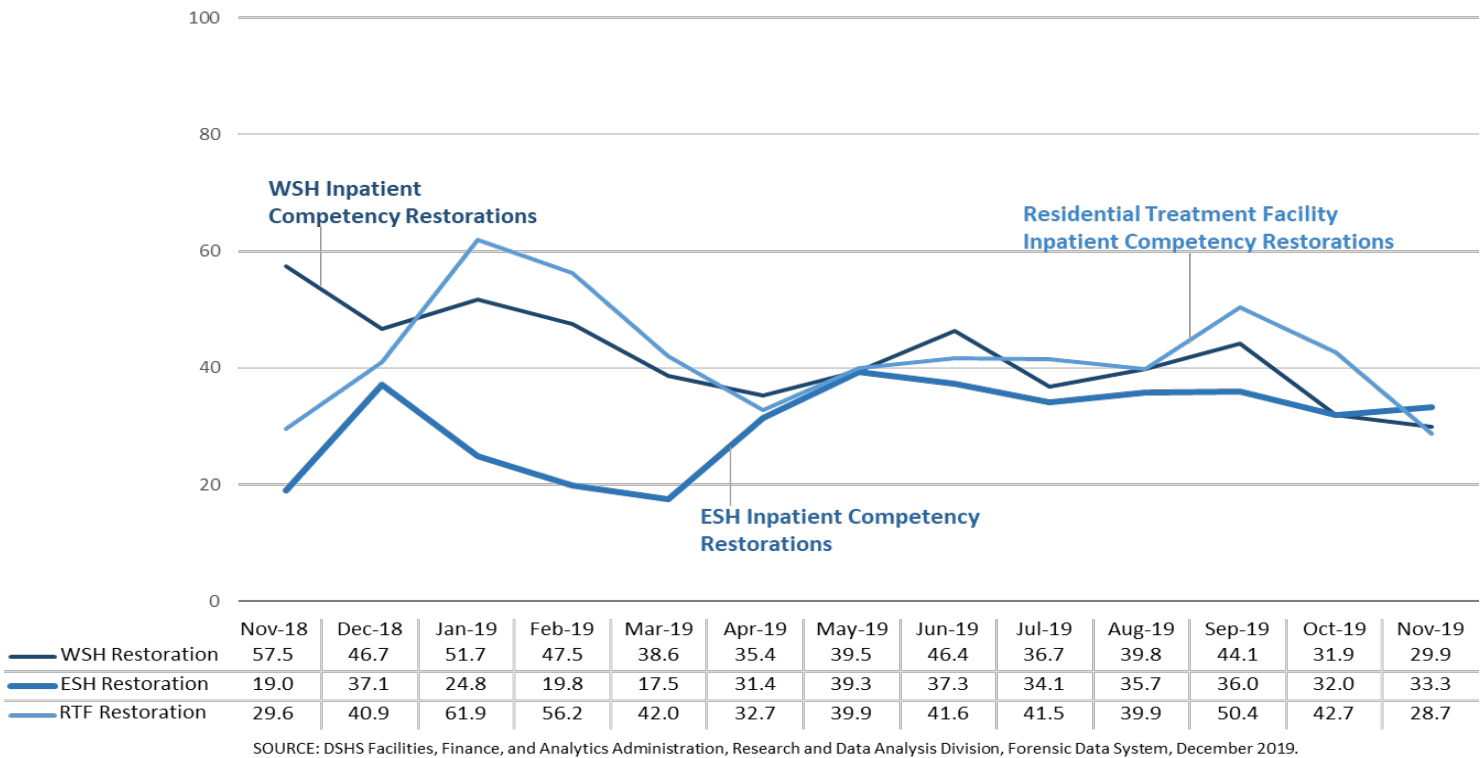


Figure 6. Average Days from Court Order Signature to Completed Restoration



TABLES 11-13: SUMMARY OF JAIL EVALUATIONS, IN-PATIENT EVALUATIONS, AND RESTORATIONS BY MONTH SINCE FEBRUARY 2016

The data presented in this section, from Tables 11-13 (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. November 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 11-13.

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

TABLE 11. TOTAL COMPLETED JAIL EVALUATION ORDERS BY MONTH COURT ORDER SIGNED ¹							
MONTH	Court Orders Signed ²	14 DAYS OR LESS FROM ORDER SIGNATURE DATE ³	PERCENT 14 DAYS OR LESS FROM ORDER SIGNATURE DATE ³	ORDERS COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER ^{3,4}	PERCENT COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER ^{3,4}	ORDERS COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER OR WITHIN 21 DAYS FROM ORDER SIGNATURE DATE ^{3,4}	PERCENT COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER OR WITHIN 21 DAYS FROM ORDER SIGNATURE DATE ^{3,4}
Nov-18	312	244	78%	257	82%	260	83%
Dec-18	282	233	83%	242	86%	243	86%
Jan-19	358	284	79%	301	84%	306	85%
Feb-19	294	227	77%	244	83%	248	84%
Mar-19	381	299	78%	310	81%	312	82%
Apr-19	392	317	81%	331	84%	340	87%
May-19	410	303	74%	325	79%	329	80%
Jun-19	401	289	72%	307	77%	318	79%
Jul-19	470	347	74%	367	78%	381	81%
Aug-19	451	352	78%	380	84%	400	89%
Sep-19	379	318	84%	332	88%	340	90%
Oct-19	506	398	79%	423	84%	446	88%
Nov-19	370	197	53%	214	58%	223	60%

¹Data 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.

²**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.

³From 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.

⁴From 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 12. Total Completed Inpatient Evaluation Orders by Month Court Order Signed

TABLE 12. TOTAL COMPLETED INPATIENT EVALUATION ORDERS BY MONTH COURT ORDER SIGNED ^{1,2}							
MONTH	<i>Court Orders Signed</i> ¹	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 ^{1,2}	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER ^{1,2}	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE ^{1,2}	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE ^{1,2}
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	28	4	14%	4	14%	5	18%
Sep-19	21	2	10%	2	10%	2	10%
Oct-19	9	1	11%	1	11%	2	22%
Nov-19	15	1	7%	1	7%	2	13%

¹Data 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.

²**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.

³From 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.

⁴From 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 13. Total Completed Restoration Orders by Month Court Order Signed

TABLE 13. TOTAL COMPLETED RESTORATION ORDERS BY MONTH COURT ORDER SIGNED ^{1,2}							
MONTH	<i>Court Orders Signed</i> ¹	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 ^{1,2}	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER ^{1,2}	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE ^{1,2}	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE ^{1,2}
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	139	34	24%	37	27%	37	27%
Mar-19	143	30	21%	30	21%	32	22%
Apr-19	161	37	23%	36	22%	39	24%
May-19	140	26	19%	27	19%	30	21%
Jun-19	139	30	22%	30	22%	31	22%
Jul-19	122	32	26%	31	25%	34	28%
Aug-19	143	34	24%	37	26%	38	27%
Sep-19	117	29	25%	30	26%	30	26%
Oct-19	168	44	26%	46	27%	47	28%
Nov-19	132	31	23%	31	23%	33	25%

¹Data 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.

²**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.

³From 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.

⁴From 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

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 (FY) 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 funded an additional 30-bed forensic ward in Fiscal Year 2019, contingent on the closure of one 30-bed civil ward and its subsequent conversion to a forensic unit. The Aging and Long Term Services Administration (AL TSA), the Developmental Disabilities Administration (DDA), and WSH collaborated on targeted efforts to successfully discharge patients into the community to reduce the population of one civil ward by 30 patients. The ward re-opened as a forensic ward in May 2018.

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 the Yakima expansion to Building 27 at WSH. On November 21, 2017, at a status hearing in the Federal District Court, the Department and 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 capital expansion at the Yakima RTF were removed.

The FY 2018 supplemental capital budget included \$3 million for renovation of ESH's 1N3 for 25 forensic beds and \$3.5 million for renovation of 3N3 to provide another 25 forensic beds at ESH. 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 Washington State 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. An RFP is in progress to potentially award contracts in the three Phase 1 settlement regions to operate Outpatient Competency Restoration Programs (OCRPs). Contracts awarded, as a result of this RFP, should enable OCRP programs to begin operations by July 1, 2020.

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. For the current, biennium, recruitment is in progress for the first Forensic Navigators. Two-to-three advance hires will work on program development prior to the July 1, 2020 launch of the navigator program.

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 60 civil beds to 42 forensic beds 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. Building 27 opened to patients in late August 2019 as the Fort Steilacoom Competency Restoration Program (FSCRPs).

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

In June 2017, Judge Pechman directed Court Monitor, 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 was also measured. The TriWest Group was selected as the contractor to complete this work.

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 – NOVEMBER 2019

Talent Acquisition program staff Business Managers continue to support hiring needs associated with FSCRCP.

RECRUITING

The recruitment numbers presented below are from November.

Applicants presented to Eastern State Hospital for consideration are indicated below:

- Psychologists, 2 reported hires
- RN2's, 3 reported hires
- RN3's, 2 reported hires

Applicants presented to Western State Hospital for consideration are indicated below:

- 7 Psychologists presented, 4 hired
- 1 Psychiatrist presented
- Institutional Counselor 3's, 20 presented, 2 job offers made
- RN Medical Nurse Consultants, 3 presented

Applicants presented to FSCRCP for consideration are indicated below:

- Psychologist, 1 presented
- RN2's, 13 reported hired

RESIDENTIAL TREATMENT FACILITIES (RTF's) DATA

Presents monthly data for the current calendar year, with a year-over-year average comparison. For the October report, a new table was added to this section to include RTF data for the new FSCR that opened in late-August 2019.

Table 14. 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	Sep-19	Oct-19	Nov-19	2019 Avg
Census (last day of month)	22.1	23	21	23	23	22	22	24	23	24	24	24	23.0
Total patients admitted	9.8	15	11	11	12	14	5	20	7	9	14	8	11.5
Completed and found competent (1st Restoration)	6.5	8	7	6	10	11	1	9	6	7	5	3	6.6
Not likely restorable (transported back to jail)	0.8	2	0	0	0	0	1	2	0	0	4	0	0.8
Court Order lapsed (Transported back to Jail)	1.0	1	2	1	1	2	0	2	1	2	2	3	1.5
Felony patients completed and found not likely restorable (1st Restoration)	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0
Misdemeanor patients not restored (no further treatment by law)	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0
Total transferred to State Hospital	1.3	3	2	3	1	2	0	3	1	0	3	2	1.8
For physical aggression	0.3	1	0	1	0	0	0	1	1	0	0	1	0.5
For sexually inappropriate behavior	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0
For medical reasons	0.8	2	2	2	1	2	0	2	0	0	2	0	1.2
Due to court ordered treatment at SH	0.0	0	0	0	0	0	0	0	0	0	1	0	0.1
Other	0.3	0	0	0	0	0	0	0	0	0	0	1	0.1
Total patients eloped	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0
Total recommended for early evaluation	2.0	3	2	2	4	0	0	0	0	5	1	1	1.6
Total recommended for 2nd 90-day order	2.7	1	2	2	4	1	3	1	3	6	3	5	2.8
Total recommended for 3rd 90-day order	0.4	0	0	0	0	0	0	0	0	0	0	2	0.2

Table 15. 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	Sep-19	Oct-19	Nov-19	2019 Avg
Census (last day of month)	26.3	29	26	27	28	30	29	30	29	29	27	25	28.1
Total patients admitted	14.9	11	10	16	12	16	16	16	15	12	12	11	13.4
Completed and found competent (1st Restoration)	6.6	7	5	4	2	3	8	3	6	6	4	9	5.2
Not likely restorable (transported back to jail)	0.9	1	2	0	1	3	2	3	0	0	2	1	1.4
Court Order lapsed (Transported back to Jail)	0.0	0	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	0	1	0.3
Misdemeanor patients not restored (no further treatment by law)	2.6	1	1	2	3	3	2	4	3	0	0	0	1.7
Total transferred to State Hospital	1.0	2	0	1	1	1	1	1	4	3	1	2	1.5
For physical aggression	0.7	2	0	0	1	0	1	1	3	2	0	2	1.1
For sexually inappropriate behavior	0.1	0	0	0	0	0	0	0	0	0	0	0	0.0
For medical reasons	0.2	0	0	1	0	0	0	0	1	0	0	0	0.2
Due to court ordered treatment at SH	0.1	0	0	0	0	0	0	0	0	1	0	0	0.1
Other	0.0	0	0	0	0	1	0	0	0	0	1	0	0.2
Total patients eloped	0.0	0	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	4	3	4	3.2
Total recommended for 2nd 90-day order	3.6	3	2	3	8	6	2	6	4	2	5	2	3.9
Total recommended for 3rd 90-day order	0.3	0	1	2	1	0	2	0	0	1	0	0	0.6

Table 16. Monthly RTF Data for Fort Steilacoom

Data Elements *	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	2019 Avg
Census (last day of month)								2	4	12	18	9.0
Total patients admitted								2	3	9	10	6.0
Completed and found competent (1st Restoration)								0	0	0	2	0.5
Not likely restorable (transported back to jail)								0	0	0	1	0.3
Court Order lapsed (Transported back to Jail)								0	0	0	2	0.5
Felony patients completed and found not likely restorable (1st Restoration)								0	0	1	0	0.3
Misdemeanor patients not restored (no further treatment by law)								0	0	0	0	0.0
Total transferred to State Hospital								1	0	1	0	0.5
For physical aggression								0	0	0	0	0.0
For sexually inappropriate behavior								0	0	0	0	0.0
For medical reasons								1	0	0	0	0.3
Due to court ordered treatment at SH								0	0	0	0	0.0
Other								0	0	1	0	0.3
Total patients eloped								0	0	0	0	0.0
Total recommended for early evaluation								0	0	0	0	0.0
Total recommended for 2nd 90-day order								0	0	2	3	1.3
Total recommended for 3rd 90-day order								0	0	0	0	0.0

* FSCRCP opened August 28, 2019

TRUEBLOOD IMPLEMENTATION STEPS TAKEN AND PLANNED – NOVEMBER 2019

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

Table 17. Trueblood Implementation Steps

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Court Appointed Monitor Coordination				
Monthly Reports	Release November report	Complete	<ul style="list-style-type: none"> Maintain compliance with the Court. Use data to review and improve the provision of forensic services. 	Release of November report to Stakeholders completed.
Legislative Coordination				
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"> 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 consultant's report was due to the Governor and Legislature by Oct. 1, 2016. 	<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. Meetings were held on the following dates: April 18, July 24, and October 18, 2018.</p> <p>In 2019, the first meeting of the year was held on January 7, 2019 with an agenda (and other meeting materials) found here:</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
			<ul style="list-style-type: none"> Section 5(3) required DSHS to contract for the services of an academic or independent state hospital psychiatric clinical care model consultant to examine the clinical role of staffing at the state hospitals. The consultant’s report was due to the Governor and Legislature by Oct. 1, 2016. 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. 	<p>https://www.governor.wa.gov/issues/issues/health-care-human-services/select-committee-quality-improvement-state-hospitals</p> <p>The committee sunset on July 1, 2019.</p> <p>The Behavioral Health Recovery System Transformation (BHRST) committee was 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 committee first met on September 26, 2019. A second meeting was held on November 12, 2019. The agendas and other meeting materials can be found here:</p> <p>https://app.leg.wa.gov/committeeschedules#//29870/07-01-2019/12-08-2019/Schedule///Bill/</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
<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"> Expanded pool of forensic evaluators would help improve timeliness. Licensure would provide quality assurance and create professional standards for forensic evaluators. 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. 	<p>The OFMHS Workforce Development team is implementing a new Forensic Mental Health Training and Certification program, to be implemented by May 1, 2020. The two-day workshop is open to all OFMHS employees (including new Forensic Evaluators), Forensic Navigators, Competency Restoration staff, and external learners, including jail staff/correctional officers, forensic peer-support specialists, and outpatient care providers, etc. OFMHS is collaborating with HCA on this program and the program will be required for new peer-support specialists.</p> <p>OFMHS is not currently pursuing Forensic Evaluator specific certification at this time, although the need will be re-assessed as part of statewide forensic mental health staff gaps analysis conducted by Groundswell, Inc. and the OFMHS workforce development team. This report is due in June 2020.</p> <p>Dr. Dave Luxton, Workforce Development Administrator departed OFMHS at the end of November. Recruitment for this position in the <i>Trueblood</i> settlement is underway.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Labor Coordination				
Engage Labor Leaders and Members	Conduct ongoing bi-monthly meetings with Labor leaders	Ongoing	<ul style="list-style-type: none"> • Discuss policy, budget and operational changes likely required to comply with the <i>Trueblood</i> requirements. • Obtain staff necessary to safely support operation of additional forensic and civil beds at the state hospitals. • 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. 	<p>In 2018, a Union Management Communication Committee (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 the Washington Federation of State Employees (WFSE) and Service Employees International Union. 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/FSCRCP with no further meetings scheduled in April, May, June, July, August, September, or October. The next WFSE meeting was held on November 12, 2019. This meeting focused on providing an update on the operations of FSCRCP and closing out the initial demand to bargain. As a result of</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				<p>this meeting, quarterly UMCC meetings will be scheduled beginning in 2020.</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 after hours coverage for the FSCR. A meeting with WFSE is being planned for November to check-in with the progress of FSCR after being operational for several months.</p>
Data Collection and Fiscal Modeling				
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.

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Forensic Data System Design/ Development	Analyze Legacy Applications Data Quality for Potential Data Migration	Complete	<ul style="list-style-type: none"> • 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). • Provided capability for access by evaluators to client status changes, regardless of location, to reduce delays. • Provided a single platform for quality reporting, eliminating the variability currently inherent in leveraging legacy applications not meant for this purpose. 	The Project team continues to support the Forensic Data System (FDS), its users, and RDA to streamline the reporting process out of the new system.
FDS 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	Complete	<ul style="list-style-type: none"> • 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 	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.

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
			activity for a court order that crosses many modules. <ul style="list-style-type: none"> • Modify search screens to reveal all court orders for individual clients. • To streamline the admissions process, create refined report for inpatient movement (Due In/Due Out Report). 	System now directs users to all court orders for a client, including the client’s aliases. The Due In/Due Out Report has been modified to contain the essential fields for the hospital admission coordinators. Additional requirements will be gathered to best meet the needs of admission coordinators.
	System Data Issues	Complete	<ul style="list-style-type: none"> • Improve data integrity (date client status effectively changed, Forensic Evaluation Completion, Due In Date and Due Out Date) • Resolve missing data (CINs) • 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. 	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. New Client Identification Number confirmer has been trained, and we are requesting access to additional secondary systems for identifying clients. New structure for capturing client status has been released to users on April 17, 2019.
	RDA Reporting Issues	Complete	Ensure RDA is accounting for all / correct elements when building reports.	RDA has expertise in the legacy database schemas and the court requirements. The IT project team has expertise in the new FDS schema and will continue to transfer that expertise to RDA.
Human Resources				
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

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				<p>bringing the total number of accepted positions since June to eight.</p> <p>Two applicants (one from September and one from October) were hired with start dates of November 1 and February 16, 2020. Additionally, a position for a forensic evaluator on the east side was filled bringing the total number of staff hired since July 1, 2019 to 12. For the contempt settlement agreement only one additional position on the east side of the state needs to be filled. A few vacant positions still need to be filled as well. Recruitment activities continued with advertisements placed in various sources in November; however, only one interview was conducted in November (with no offer being made). Plans to recruit at conferences in January and March to assist with recruitment will be made in December.</p> <p>Furthermore, both supervisor positions and administrative support positions (two) have also been filled since July 1, 2019.</p>
Hire additional hospital ward staff	Conduct targeted hiring events Pursue contracting	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. See page 26 for additional details on recruiting.
Competency Evaluation				
Build capacity for out-station sites	Site agreements	N/A		The Yakima, Maple Lane and Fort Steilacoom facilities now each have designated forensic evaluators assigned to

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
	Out-station sites operational	Complete	Increased capacity at out-station sites will reduce wait time for evaluation.	the facility, allowing for timely completion of post-restoration evaluations.
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 meeting was on October 2, 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. The next meeting is set for October 7. 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 Q3 2019, 66% of forensic evaluators had competency evaluation reports audited by supervisors. A total of 68 competency evaluation reports were reviewed in Q3 2019. Q4 2019 data will be available after the end of December 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	As of November 30, 2019, OFMHS has received 380 triage referrals from jail staff/defense. Of those referrals, 239 were approved. Ninety-three of the referrals were denied, and 48 of these referrals were

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
			do not require inpatient evaluation services; or who are clearly competent due to changes in their condition since the issuance of an order for evaluation (i.e., no longer drug affected).	<p>withdrawn before placement could be made.</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 November 2019, 7 calls were made to jails and 6 referral requests submitted, 6 of which were accepted while 1 was withdrawn prior to a decision.</p> <p>Since tracking began, 2,260 calls have been made.</p>
Develop Telehealth video-conferencing systems to assist in the completion of evaluations	State-wide implementation and utilization of technology	Ongoing	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>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). Dr. Luxton provided two training seminars on the topic in 2019.</p> <p>With Dr. Luxton’s recent departure from OFMHS, a new staff member will be selected to conduct a gap analysis to determine where VC expansion is feasible. 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, more than 90 video conferences have been completed and approximately 15.6% of attempts were rejected by the client’s attorney. Video conferences are typically used 5-10 times per month. This data is current through November 2019.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Competency Restoration				
WSH – opening 30 forensic beds once 30 civil patients transition to community	Bed occupancy with forensic patients	Complete	Serves overall plan to add beds and expand State Hospital forensic bed capacity to meet Court ordered requirements.	<p>The 2017-19 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. AL TSA, the DDA, and WSH collaborated to successfully discharge patients into the community to reduce the population of one civil ward by 30 patients.</p> <p>South Hall 10 (S10) reopened in May 2018 for forensic patients after civil patients were either moved or discharged. S10 is utilized by forensic patients who are committed NGRI and are ready to begin transitioning to the community.</p>
WSH addition 45 beds	Bed occupancy with forensic patients	Partially Complete	Serves overall plan to add beds and expand State Hospital forensic bed capacity to meet Court ordered requirements.	<p>The Legislature funded this request to operate 45 additional beds in building 27 (Ft. Steilacoom Competency Restoration Center – FSCR P) and the South Hall 5 (S5) ward. The initial FY 2018 request can be found here: https://www.dshs.wa.gov/data/budget/2018/030-PL-CV-Forensic-Ward-Staffing.pdf</p> <p>Forensic 3 (F3) opened in June 2018 as another forensic admissions ward. F3 adds capacity for a less acute admission/restoration program. S5 expanded from 15 beds to 30. S5 reached full patient capacity in fall 2018.</p> <p>FSCR P recently opened and is in the process of expanding its patient counts over time until it reaches full capacity. At the end of November, FSCR P is at 60% of capacity and increasing steadily.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
WSH addition 42 beds	Bed occupancy with forensic patients	In Progress	Serves overall plan to add beds and expand State Hospital forensic bed capacity to meet Court ordered requirements.	<p>In the 2017-19 budget, the Legislature allotted funding for the conversion of 60 beds from civil to 42 forensic beds on two wards at Western State Hospital per the settlement.</p> <p>Construction is expected to end in April or May 2020 with the units furnished, equipped, and supplied by late June.</p>
ESH addition of 50 beds	Bed Occupancy with Forensic Patients	In Progress	Serves overall plan to add beds and expand State Hospital forensic bed capacity to meet Court ordered requirements.	<p>The legislature funded, in the 2019-2021 biennial budget (for purposes of the <i>Trueblood</i> Agreed Settlement), additional forensic bed capacity.</p> <p>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 ESH.</p> <p>Early recruitment activities are in progress to staff these new units. Construction is expected to conclude in April or May, and the units are expected to begin accepting patients by the end of June 2020.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Provide Restoration Treatment at the Maple Lane Competency Restoration Program (MLCRP)	Restore Patients to Competency	Ongoing	<ul style="list-style-type: none"> • To meet or exceed the restoration rates at both state hospitals. • Hard closure date set for June 30, 2024 unless the trigger event occurs. 	<p>Also, see data <i>Table 14</i> on page 27.</p> <p>As of the quarterly average length of stay report completed October 2019, the days to competency are mixed across sites. Patients at Maple Lane have a longer length of stay for second 90-day restorations, but they have shorter length of stay, compared to the State hospitals, for 45-day first felony and 29-day misdemeanor restorations.</p>
Provide Restoration Treatment at the Yakima Competency Restoration Program (YCRP)	Restore Patients to Competency	Ongoing	<ul style="list-style-type: none"> • To meet or exceed the restoration rates at both state hospitals • Hard closure date set for December 31, 2021 unless the trigger event occurs. 	<p>Also, see data <i>Table 15</i> on page 27.</p> <p>As of the quarterly average length of stay report completed October 2019, YCRP's days to competency are in line with the average across sites for 45-day first felony patients. Both 90-day first and second felony patients currently exceed the restoration times at the State hospitals.</p>
Provide Restoration Treatment at the FSCR	Open Building 27	Complete	<ul style="list-style-type: none"> • Identify alternate facility capacity to meet <i>Trueblood</i> compliance. • Collaborate with Court parties to open the facility. 	<p>Admissions will be increasing from two to three patients a week starting the week of November 18, 2019.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
	Restore Patients to Competency	Ongoing	<ul style="list-style-type: none"> To meet or exceed the restoration rates at both state hospitals. 	<p>Also, see data <i>Table 16</i> on page 28.</p> <p>The early FSCR data showing days to restoration averages for 45-day first felony patients are encouraging; however, it remains too early for FSCR data to provide meaningful and valid comparisons across treatment sites.</p>
Implementation of OCRPs	Diversion Programs are Operational	Ongoing	Development and implementation of OCRP in King, Pierce, and Spokane Counties.	<p>OCRPs 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 HCA 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. The finalized implementation model draft will be sent to workgroup participants for comment and review.</p> <p>Implementation WebEx presentations were facilitated on September 20, September 23, and September 27th for the purpose of distributing information about program planning and to gather insight and information from potential community providers.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				The program model was finalized November 1, 2019. The OCRP planning group is meeting with the three implementation regions throughout the month of November to discuss region-specific details of the programs. Request for Proposals for OCRP services will be released by November 30, 2019.
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 September there were no concerns or questions about transportation issues brought forward to the attention of DSHS.
Diversion Alternatives				
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.

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 18. Court Order Status Updates

Requirements	Date	Status	Progress Notes
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:			
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. & 4C. below.
2. Eliminate the backlog of class members currently waiting for in-jail evaluations:			
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

Requirements	Date	Status	Progress Notes
C. Finalizing recruitment of evaluators to aid in the backlog elimination effort and setting a schedule for the evaluation of each backlog case	March 1, 2016	Complete	Complete
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 370 jail evaluation orders signed in November, 278 were completed within 14 days, which is 75.0%. This number is expected to rise once the data are mature.
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:			
C. Reporting on the implementation and effectiveness of the triage plan in Defendants' monthly reports to the Court Monitor	Beginning April 15, 2016	Ongoing	For additional information, review the Task column in <i>Table 17</i> labeled " Explore and pursue triage system possibilities " on pages 37-38.
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:			
C. Reporting on the implementation and effectiveness of the triage plan in Defendants' monthly reports to the Court Monitor	Beginning April 15, 2016	Ongoing	For additional information, review the Task column in <i>Table 17</i> labeled: " Explore and pursue triage system possibilities " on pages 37-38.
5. Report on the implementation status of the CMS Plan of Correction:			
B. Reporting on the implementation status in Defendants' monthly reports to the Court Monitor	Beginning March 15, 2016	Ongoing	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.

Requirements	Date	Status	Progress Notes
			<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 COPs for CMS certification.</p>
6. Plan for recruiting and staffing 30 beds at WSH after compliance with CMS's terms of participation is achieved in March:			
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. 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 COPs for CMS certification.</p>
8. Remove barriers to the expenditure of the \$4.8 million in currently allocated diversion funds:			
D. Executing contracts for implementation by the selected providers	April 15, 2016	Complete	Prosecutorial diversion was funded for fiscal year 2020.

Requirements	Date	Status	Progress Notes
10. Develop a reliable and valid client-level data system to support better management and accountability of the forensic services system:			
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 FDS, its users, and RDA to provide increased data granularity for reporting out of a new system.</p> <p>Phase 1 is closing out and enhancements to the FDS have been prioritized by the Governance Committee for Phase 2.</p>

JULY 7, 2016 CONTEMPT ORDER STATUS UPDATES

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 15th 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 I and J;
- (2) Diversion plans – DSHS is ordered to develop, in consultation with the Court Monitor, plans for the expenditure of the contempt fines; and
- (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 Tables 11-13.

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

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 FDS on 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 FDS, 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

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.