

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

November 30, 2020

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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 November 30, 2020 and covers the events of October 2020. 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 60.

This report provides the Class Member data for competency services displayed in two periods: September 1, 2020 – September 30, 2020 and October 1, 2020 to October 31, 2020. The August data are considered “mature” and the September 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

TEMPORARY CHANGES TO ADMISSIONS PRACTICES AT WSH, ESH, AND THE RTFs DUE TO THE COVID-19 PANDEMIC – NOVEMBER UPDATE

Due to the COVID-19 pandemic, and in an effort to protect both patients and staff in accord with guidance from federal, state, and local health departments and the DSHS incident command center, forensic admissions at WSH and ESH are occurring at a decreased capacity to ensure proper quarantining procedures for new admissions prior to being admitted to a non-quarantine ward. There are no restrictions on legal authority and all forensic admissions are being accepted at both ESH and WSH effective July 24, 2020. Additionally, census at all three residential treatment facilities has been reduced by four-to-five patients to maintain proper physical distancing.

The Department of Health (DOH) has encouraged gradual admissions to WSH to limit exposure of COVID-19 among patients. As of November 25, 2020, WSH has had 40 confirmed cases of COVID-19 in patients and 111 confirmed cases in staff members, impacting many separate wards, including forensic wards. Thirty cases are currently active.

Initially, ESH did not experience any COVID-19 cases; however, more recently a number of cases have resulted in two wards placed on quarantine with admissions temporarily placed on hold and diverted to WSH and the RTFs in the early portion of July. By late July, ESH was able to resume admissions following quarantine procedures employed by WSH. As of November 25, 2020, ESH has had 62 staff members and 15 patients test positive for COVID-19. The outbreak remains active with 12 current cases among staff members.

Two of the three RTFs, Fort Steilacoom Competency Restoration Program (FSCR) and Yakima have now had positive COVID-19 test results with seven staff members testing positive at Yakima and one at FSCR. Due to COVID-19, each facility has reduced its census to accommodate social distancing.

These are temporary measures that are necessary in order to implement COVID-19 protections at WSH, ESH, and the RTFs, and DSHS will continue to increase forensic admissions to all five facilities as soon as that can safely be accomplished. These measures are a change from prior practice, and are subject to change at any time as additional information is received.

THE NEW OUTPATIENT COMPETENCY RESTORATION PROGRAM (OCRP)

The OCRP element of the Trueblood contempt settlement agreement that is managed by the Washington State Health Care Authority (HCA), provides an additional option for courts to order community-based restoration services in a less restrictive environment for defendants with appropriate acuity levels in the three Phase 1 regions. The intent of OCRP is to provide the most appropriate level of care to the individual, ideally closer to their home community. Providing restoration services in a safe and cost-effective environment, while utilizing the newly available community treatment program should hopefully reduce the number of people wait-listed to receive competency restoration in an inpatient setting.

On July 1, 2020, OCRP services debuted in two of the three Phase 1 regions of the Trueblood settlement, and on September 1, in the Southwest region. This month's report covers events from October 1 – October 31. Data from this month are considered "first-look" and are likely to change as they mature. Data tables reflecting OCRP services are included in Tables 4c., 14., and Appendix G. Figures 2, 5, and 6 represent the visual presentation of

OCRP data in this month's report. Additional figures and tables may be added as needed over the next several months as system configurations and data reporting needs are refined and finalized post go-live. As you will note on the tables' July data rows, zero Trueblood class member cases are listed. One case did enter OCRP in July. A misunderstanding in issuing multiple competing restoration orders and a mistimed release from jail resulted in the client not qualifying to be a class member. As a result, the client's data is not included in table below.

In August, two class members entered OCRP; however, a data entry error, which required developer-level intervention to correct, prevented proper data display of one August case until the October monthly report. As of early October, the case displays correctly.

In September, two new class members entered OCRP, one client each in the Pierce and Spokane regions. Two clients were removed from OCRP in September due to non-compliance with the program and were transferred to Eastern State Hospital and the Maple Lane Competency Restoration Program, respectively.

ANALYSIS OF MATURE DATA: MAY 1, 2015 THROUGH SEPTEMBER 30, 2020

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. ***Updated analysis will be provided for the mature September data in time for the final report.***

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

- Average monthly jail-based evaluation orders signed for April 2015 - September 2020
 - Western State Hospital (WSH): 253.4
 - Eastern State Hospital (ESH): 59.1
 - Both hospitals: 312.5

- Average monthly inpatient evaluation orders signed for April 2015 - September 2020
 - WSH: 14.0
 - ESH: 8.3
 - Both hospitals: 22.3

- Average monthly restoration orders signed for April 2015 - September 2020
 - WSH: 77.2 *
 - ESH: 17.7
 - Both hospitals: 94.9 *
 - Hospitals + Residential Treatment Facility (RTF's): 108.3

- Average monthly RTF restoration orders signed for August 2018 – September 2020
 - RTF's: 34.1 **

- Average monthly OCRP restoration orders signed for July 2020 – September 2020
 - Phase 1 OCRP (All Locations): 1.3***

* 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.

*** OCRP treatment began in two Phase 1 regions on July 1, 2020 and in the third Phase 1 region on September 1, 2020.

SUMMARY POINTS RELATED TO ORDERS AND TIMELINESS BASED ON MATURE SEPTEMBER DATA**Orders:**

- For September, the number of jail-based evaluation orders assigned to WSH increased moderately following a slight decline in August and following significant increases in the subsequent two months (19 percent in July and grew 16 percent in June), which followed February through April's significant declines (three-month drop of 53 percent).

- ESH's jail-based evaluation orders showed continued growth in September and have returned to pre-pandemic levels after five consecutive months of increases. Combined, the hospitals received 386 jail-based orders in September – a 53 percent increase during the six months inclusive of April-September, following three consecutive months of sharp declines (57 percent overall). At this time, the primary reasons for this rebounding demand appears to be the loosening COVID-19 pandemic

lockdown measures during Q2 2020, and an increase of cases that would normally be referred to WSH due to the pandemic's effects on WSH's operations. Numerous district and superior courts have significantly curtailed their criminal dockets, and many of the jails where our evaluators conduct client interviews have insufficient meeting space to observe social distancing and other important pandemic-related safety measures. As a result, many institutions have re-opened and are resuming modified operations.

- WSH again received seven inpatient evaluation orders in September, which is in-line with recent months, but it still remains substantially below the 14.0 monthly average. ESH had 11 inpatient evaluation orders, which on a small number of orders, is more than a five-fold increase from August and is above ESH's long-term average. Inpatient evaluation orders at both hospitals totaled 18, which remains below the 22.3 per month inpatient evaluation average.
- WSH received 58 restoration orders in September, a slight increase in orders compared to August and in line with July's order numbers. The average number of restoration orders is 77.2. ESH had 28 orders in September, which is significantly higher than any time in 2020. The RTF's received 37 orders, which is a 23 percent decrease compared to recent months. Thirty-seven orders is modestly higher than the monthly average of 34.1* orders.

* 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 increased slightly to 11.7-days on average in September, from order to completion. ESH evaluation times decreased significantly on average from 14.4-days to 12.3-days. The combined average, across the system, dropped moderately to 12.9-days.
- The average inpatient evaluation admission wait time at WSH is currently 62.0-days in September. ESH's average wait time decreased to 48.2-days in September. It is worth noting that the average inpatient evaluation wait times are subject to significant monthly swings in either direction due to the small numbers of patients being admitted and evaluated through this legal authority.
- Restoration admission wait times at WSH is 59.2-days on average in September, which represents a significant increase in wait times beginning back to April when the full effects of the COVID-19 pandemic began impacting operations. From April 2015-March 2020, the average restoration admission time at WSH was 62.1-days. From April 2020-August 2020, during the pandemic, the average admission time has been 63.0-days. The ESH average admission wait time is 49.2-days in August, which is a small to moderate decrease in wait times compared to recent months with the exception of July. August wait times at ESH decreased 39.5 percent from July, in a month that appears to be an outlier. The combined average admission wait time for inpatient restoration was 61.5-days in August, which represents an almost doubling in the wait time since the most recent wait time floor was established in March 2020 at 32.8-days.

Timeliness:

- At ESH, overall timeliness for jail-based evaluation completion increased slightly to an average 77 percent completion rate within 14-days from receipt of order. WSH's timely completion rate decreased to 84 percent in September.

- At both hospitals combined, September's overall timeliness for inpatient evaluation admissions increased to a nine percent completion rate within 7-days from receipt of order. This is a decrease from 13 percent on time completion during the prior month. Likewise, WSH had a zero percent on time completion rate in September and ESH has a 13 percent on time completion rate in September.
- At both hospitals and the RTF's combined, overall timeliness for inpatient restoration admissions for September was at a seven percent completion rate within 7-days. WSH also had a six percent completion rate within 7-days, the RTFs were at four percent for August, and the ESH increased significantly to nine in September.

OUTLIER CASES (MATURE) SEPTEMBER

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 September.
- 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 1a. Outlier Cases (Mature)

TABLE 1a. OUTLIERS FOR THE MONTH OF:		September-2020	
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	7	21	119
Inpatient Evaluations	20	21	126
Inpatient Restorations	41	41	96

Table 1 continues below detailing reasons contributing to delays in completing evaluations for outlier cases. The Trueblood definition for outliers is offered above on page 9.

Table 1b. Summary of Evaluator Delay Reasons

TABLE 1b. Continued SUMMARY OF EVALUATOR DELAY REASONS ¹			
REASONS FOR DELAY IN DATABASE	In-Jail Evaluations	Inpatient Evaluations	Inpatient Restorations
Defendant No Show			
Defendant Reschedule			
Evaluator availability	1		
Police reports availability			
Relevant discovery availability			
Jail/Outside facility staffing issues	2		
Attorney scheduling conflicts			
Jail return/Discharge with no eval done			
Requires amended court order	1		
Charges adjudicated prior to eval			
New charges - wait for new court order			
Client released from custody & can't be located	1		
Defendant would not participate without attorney present			
Defendant would not cooperate with evaluation			
Interpreter needed but court order did not request it			
Other patient cooperation problem			
Evaluator rejected by prosecutor			
Medical Record/Collateral Information	1		
Interpreter scheduling conflicts			
Defense Expert scheduling			
police reports	1	2	
Attorney No Show			
Jail conference room availability/scheduling issues	1		
Processor error/clerical error			
Delay in Report Distribution			
Client or other required evaluation personnel have contracted or been ex			
No COVID-safe option to conduct the evaluation			
Delay in Submission of Evaluation Report due to Staff Furlough			
Order Processing Delay due to Staff Furlough			
Late Assignment			
Unknown	2		
Not Applicable ²		18	41

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.

²Not Applicable indicates that none of the delays listed in the table apply to the competency service specified.

Finally, Table 1 concludes below with a focus on the reasons outlier cases are delayed prior to and during the admissions process for in-patient services.

Table 1c. Summary of Admission Delay Reasons

TABLE 1c. continued SUMMARY OF ADMISSION DELAY REASONS ¹			
REASONS FOR DELAY IN DATABASE	In-Jail Evaluations	Inpatient Evaluations	Inpatient Restorations
Bed availability		14	37
Medical clearance availability			
Police reports availability			
Relevant discovery availability			
NCIC/Processing			
Hospital staffing issues			
Jail/Outside facility staffing issues			
Jail return/Discharge with no eval done			
Requires amended court order			
Charges adjudicated prior to eval			
Other patient cooperation problem			
Evaluator rejected by prosecutor			
Medical Record/Collateral Information			
Awaiting Instructions from Court			
change from JH to PR			
Client released from custody & can't be located			
In Custody - Not In Jail			
in hospital - furlough from jail			
Medical Clearance Needed			
Client contracted or has been exposed to COVID-19			
Client Being Reevaluated			
Order Processing Delay due to Staff Furlough			
Unknown		6	4
Not Applicable ²	7		

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.

²Not Applicable indicates that none of the delays listed in the table apply to the competency service specified, or the case was completed within the compliance deadline with no delay reason recorded.

CLASS MEMBER STATUS DATA TABLES

The following series of tables present class member status data for September. October 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						
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	306	0.8	0.0	1.0	0.0	n/a	n/a	326	12.6	13.0	78 %	85 %	89 %
Dec-19	337	0.5	0.0	0.8	0.0	n/a	n/a	344	12.6	13.0	69 %	76 %	77 %
Jan-20	393	0.5	0.0	0.8	0.0	n/a	n/a	360	12.2	13.0	76 %	81 %	85 %
Feb-20	358	0.5	0.0	0.8	0.0	n/a	n/a	373	12.1	13.0	81 %	84 %	86 %
Mar-20	247	0.6	0.0	0.9	0.0	n/a	n/a	338	12.3	13.0	78 %	82 %	85 %
Apr-20	183	0.5	0.0	0.8	0.0	n/a	n/a	150	13.7	13.0	62 %	68 %	69 %
May-20	202	0.4	0.0	0.5	0.0	n/a	n/a	200	14.3	13.0	65 %	71 %	72 %
Jun-20	240	0.7	0.0	0.9	0.0	n/a	n/a	244	12.3	13.0	83 %	85 %	86 %
Jul-20	296	0.7	0.0	0.7	0.0	n/a	n/a	267	12.1	12.0	80 %	81 %	83 %
Aug-20	290	0.3	0.0	0.3	0.0	n/a	n/a	292	11.3	12.0	86 %	90 %	92 %
Sep-20	309	0.4	0.0	0.5	0.0	n/a	n/a	292	11.7	12.0	81 %	84 %	85 %
Oct-20	324	0.6	0.0	0.8	0.0	5.8	4.0	331	12.6	13.0	82 %	86 %	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						
Oct-19	2	0.4	0.0	0.5	0.0	n/a	n/a	10	51.2	54.5	10 %	10 %	10 %
Nov-19	7	0.9	0.0	0.9	0.0	n/a	n/a	7	35.3	46.0	0 %	0 %	0 %
Dec-19	2	0.9	0.5	0.9	0.5	n/a	n/a	6	36.8	30.0	0 %	0 %	0 %
Jan-20	8	0.0	0.0	0.0	0.0	n/a	n/a	3	22.7	26.0	0 %	0 %	0 %
Feb-20	9	0.1	0.0	0.1	0.0	n/a	n/a	6	19.8	21.5	0 %	0 %	0 %
Mar-20	3	0.2	0.0	0.2	0.0	n/a	n/a	6	42.8	48.5	17 %	17 %	17 %
Apr-20	4	0.2	0.0	0.3	0.0	n/a	n/a	0	n/a	n/a	N/A	N/A	N/A
May-20	4	0.5	0.0	0.6	0.0	n/a	n/a	1	0.0	0.0	100 %	100 %	100 %
Jun-20	10	0.5	0.0	0.5	0.0	n/a	n/a	8	55.1	18.0	0 %	0 %	0 %
Jul-20	5	0.3	0.0	0.2	0.0	n/a	n/a	3	44.7	51.0	0 %	0 %	0 %
Aug-20	7	0.4	0.0	0.3	0.0	85.0	85.0	11	116.0	132.0	0 %	0 %	0 %
Sep-20	7	0.7	0.0	0.4	0.0	59.0	59.0	7	62.0	75.0	0 %	0 %	0 %
Oct-20	16	1.0	0.0	0.9	0.0	19.5	11.0	12	52.4	49.5	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 4a. Class Member Status Western State Hospital – Inpatient Competency Restoration Services

TABLE 4a. 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						
Oct-19	100	4.4	0.0	4.6	0.0	n/a	n/a	100	32.4	29.0	29 %	31 %	31 %
Nov-19	64	4.4	0.0	4.4	0.0	n/a	n/a	68	29.3	24.0	25 %	26 %	28 %
Dec-19	82	3.1	0.0	3.1	0.0	n/a	n/a	81	32.1	36.0	31 %	33 %	35 %
Jan-20	58	2.2	0.0	2.3	0.0	n/a	n/a	68	40.0	38.5	15 %	18 %	18 %
Feb-20	61	2.2	0.0	2.4	0.0	n/a	n/a	56	39.9	41.5	9 %	11 %	11 %
Mar-20	57	1.8	0.0	1.9	0.0	n/a	n/a	59	25.6	23.0	12 %	14 %	15 %
Apr-20	41	1.9	0.0	1.9	0.0	n/a	n/a	29	41.2	34.0	14 %	14 %	14 %
May-20	30	1.8	0.0	1.8	0.0	n/a	n/a	25	63.6	43.0	0 %	0 %	0 %
Jun-20	39	1.6	0.0	1.6	0.0	n/a	n/a	41	89.8	87.0	2 %	2 %	2 %
Jul-20	58	4.0	0.0	1.6	0.0	n/a	n/a	43	36.9	22.0	7 %	7 %	19 %
Aug-20	52	1.5	0.0	0.7	0.0	73.5	74.0	66	83.2	80.0	6 %	6 %	6 %
Sep-20	58	1.6	0.0	0.7	0.0	53.0	51.0	58	59.2	51.5	7 %	7 %	9 %
Oct-20	124	1.5	0.0	0.8	0.0	26.5	18.0	59	44.1	32.0	12 %	12 %	14 %

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 4b. Class Member Status Residential Treatment Facilities – Inpatient Competency Restoration Services

TABLE 4b. 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						
Oct-19	43	1.4	0.0	1.4	0.0	n/a	n/a	47	41.1	48.0	17 %	19 %	19 %
Nov-19	54	1.1	0.0	1.2	0.0	n/a	n/a	40	28.0	32.5	30 %	30 %	30 %
Dec-19	37	1.2	0.0	1.3	0.0	n/a	n/a	41	27.1	27.0	22 %	22 %	22 %
Jan-20	47	0.6	0.0	0.5	0.0	n/a	n/a	48	41.2	42.5	4 %	4 %	4 %
Feb-20	16	1.4	0.0	1.3	0.0	n/a	n/a	33	36.7	34.0	6 %	6 %	6 %
Mar-20	29	1.5	0.0	2.0	0.0	n/a	n/a	31	36.9	33.0	3 %	3 %	3 %
Apr-20	26	1.2	0.0	3.1	0.0	n/a	n/a	25	33.2	27.0	8 %	12 %	12 %
May-20	18	0.8	0.0	0.8	0.0	n/a	n/a	21	47.4	38.0	0 %	0 %	0 %
Jun-20	26	1.5	0.0	1.6	0.0	n/a	n/a	23	43.8	41.0	9 %	9 %	9 %
Jul-20	30	3.6	0.0	1.1	0.0	n/a	n/a	35	36.8	33.0	3 %	3 %	3 %
Aug-20	48	2.5	0.0	0.3	0.0	n/a	n/a	32	21.9	21.0	3 %	3 %	3 %
Sep-20	37	2.3	0.0	0.4	0.0	n/a	n/a	46	23.5	20.0	9 %	9 %	9 %
Oct-20	9	2.6	0.0	0.5	0.0	n/a	n/a	40	32.9	28.5	8 %	8 %	8 %

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).

On July 1, 2020, OCRP services debuted in two of the three Phase 1 regions of the Trueblood settlement, and on September 1, 2020, services debuted in the Southwest region. This month’s report, covers events from October 1 – October 31. Table 4c. below is one of two OCRP data tables available in this monthly report.

As with any new program or process, it often takes some time to ensure all internal and external parties are functioning correctly within the new environment. As processes have been utilized in real world conditions, the courts, OCR providers, and our agencies have provided education and outreach where needed as well as adjusted processes to reflect lessons learned and actual operational experiences.

One case did enter OCRP in July. A misunderstanding in issuing multiple competing restoration orders and a mistimed release from jail resulted in the client not qualifying to be a class member. As a result, the client’s data is not included in table below. In August, two class members entered OCRP; however, a data entry error, which required developer-level intervention to correct, prevented one case from displaying correctly in the table below. The case displays correctly for the October report.

Table 4c. Class Member Status OCRP

TABLE 4c: Class Member Status Outpatient Competency Restoration Program (OCRP) 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						
Jul-20	0	n/a	n/a	n/a	n/a	n/a	n/a	0	n/a	n/a	n/a	n/a	n/a
Aug-20	2	0.0	0.0	0.0	0.0	n/a	n/a	1	4.0	4.0	100 %	100 %	100 %
Sep-20	2	0.0	0.0	0.0	0.0	n/a	n/a	3	6.3	7.0	100 %	100 %	100 %
Oct-20	0	n/a	n/a	n/a	n/a	n/a	n/a	0	n/a	n/a	n/a	n/a	n/a

¹The OCRP was implemented July 1, 2020. The data are pulled from the BHA Forensic Data System and Navigator Case Management System and 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.

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

⁴**Court Orders Completed** is the number of cases completed in the month specified. Cases are completed if the client is admitted for services, the order is withdrawn or dismissed, or the client is no longer waiting for services in jail. Counts are from data recorded in the BHA Forensic Data System and Navigator Case Management System.

⁵The 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.

⁶According to the Settlement Agreement, “For criminal defendants waiting in jail, an offer of admission to the community outpatient restoration services program will occur within the constitutional timelines for restoration as outlined by the Federal Court.” Therefore, this table captures the 3 compliance deadlines captured for inpatient competency restoration: 1) percent completed within 7 days from court order signature date (as stipulated from April 2015 to April 2017) and 2) percent 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) and 3) percent of all orders completed within either of 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) (from May 2017 onward as outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389).

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						
Oct-19	95	1.1	0.0	1.9	1.0	n/a	n/a	101	12.1	13.0	67 %	77 %	86 %
Nov-19	76	0.9	0.0	1.9	1.0	n/a	n/a	75	14.4	13.0	63 %	71 %	76 %
Dec-19	68	0.5	0.0	1.4	1.0	n/a	n/a	82	13.6	14.0	52 %	60 %	63 %
Jan-20	82	0.7	0.0	1.4	1.0	n/a	n/a	75	13.1	13.0	63 %	72 %	79 %
Feb-20	67	0.7	0.0	1.7	1.0	n/a	n/a	66	11.4	12.5	68 %	71 %	73 %
Mar-20	60	0.7	0.0	1.3	1.0	n/a	n/a	69	12.8	13.0	74 %	77 %	80 %
Apr-20	21	0.6	0.0	1.0	1.0	n/a	n/a	34	11.3	9.5	85 %	88 %	91 %
May-20	39	0.3	0.0	1.1	1.0	n/a	n/a	31	11.0	8.0	90 %	90 %	90 %
Jun-20	47	0.8	0.0	1.9	1.0	n/a	n/a	32	11.2	10.5	72 %	75 %	88 %
Jul-20	53	0.6	0.0	1.5	0.5	n/a	n/a	65	12.7	10.0	71 %	74 %	88 %
Aug-20	68	0.5	0.0	1.4	0.0	n/a	n/a	47	14.4	10.0	70 %	72 %	79 %
Sep-20	77	0.8	0.0	1.8	0.0	n/a	n/a	86	12.3	9.5	77 %	77 %	85 %
Oct-20	72	1.1	0.0	1.6	1.0	5.5	4.0	76	14.0	11.0	79 %	80 %	88 %

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						
Oct-19	6	0.1	0.0	2.0	0.0	n/a	n/a	11	36.8	41.0	0 %	0 %	9 %
Nov-19	10	0.3	0.0	0.4	0.0	n/a	n/a	8	24.5	20.5	13 %	13 %	13 %
Dec-19	13	0.3	0.0	0.6	0.0	n/a	n/a	11	21.6	21.0	18 %	18 %	36 %
Jan-20	11	0.1	0.0	0.4	0.0	n/a	n/a	9	19.2	23.0	11 %	11 %	11 %
Feb-20	4	0.2	0.0	0.4	0.0	n/a	n/a	8	26.3	22.0	25 %	25 %	38 %
Mar-20	7	0.3	0.0	2.1	0.0	n/a	n/a	5	56.0	56.0	0 %	0 %	0 %
Apr-20	2	0.4	0.0	2.3	0.0	n/a	n/a	4	16.8	12.0	50 %	50 %	50 %
May-20	3	0.1	0.0	2.7	0.0	n/a	n/a	3	48.3	44.0	0 %	0 %	0 %
Jun-20	16	0.8	0.0	1.1	0.0	132.5	132.5	2	108.0	108.0	0 %	0 %	0 %
Jul-20	13	0.6	0.0	0.7	0.0	117.5	115.5	5	36.4	28.0	20 %	20 %	40 %
Aug-20	2	0.7	0.0	0.8	0.0	110.4	103.0	11	66.2	55.0	0 %	0 %	0 %
Sep-20	11	0.7	0.0	1.2	0.0	85.9	92.0	15	48.2	62.0	13 %	13 %	13 %
Oct-20	23	0.8	0.0	0.9	0.0	33.6	18.0	13	42.5	22.0	31 %	38 %	46 %

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						
Oct-19	28	0.8	0.0	0.8	0.0	n/a	n/a	28	31.3	40.0	32 %	32 %	36 %
Nov-19	19	1.9	0.0	2.1	0.0	n/a	n/a	19	33.3	42.0	21 %	21 %	26 %
Dec-19	34	2.5	1.0	2.9	0.0	n/a	n/a	21	30.4	40.0	29 %	29 %	29 %
Jan-20	22	2.2	0.0	2.6	0.0	n/a	n/a	20	37.8	40.0	0 %	0 %	0 %
Feb-20	24	1.0	0.0	1.1	0.0	n/a	n/a	21	47.0	60.0	19 %	19 %	19 %
Mar-20	16	0.6	0.0	0.6	0.0	n/a	n/a	21	47.1	48.0	5 %	5 %	5 %
Apr-20	14	1.3	0.0	1.3	0.0	n/a	n/a	22	58.6	61.0	9 %	9 %	9 %
May-20	10	2.5	0.0	1.5	0.0	n/a	n/a	18	57.2	51.5	0 %	0 %	0 %
Jun-20	7	3.4	0.0	2.1	0.0	n/a	n/a	11	53.6	57.0	0 %	0 %	0 %
Jul-20	16	1.2	0.0	1.0	0.0	n/a	n/a	4	81.3	91.0	0 %	0 %	0 %
Aug-20	15	0.8	0.0	0.7	0.0	69.3	66.0	13	49.2	48.0	15 %	15 %	15 %
Sep-20	28	0.7	0.0	0.5	0.0	46.2	45.0	24	62.1	62.0	4 %	4 %	4 %
Oct-20	20	0.8	0.0	0.3	0.0	31.5	34.5	7	36.3	36.0	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 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						
Oct-19	506	0.8	0.0	1.1	0.0	n/a	n/a	475	11.6	12.0	81 %	86 %	90 %
Nov-19	382	0.8	0.0	1.2	0.0	n/a	n/a	401	13.0	13.0	75 %	82 %	86 %
Dec-19	405	0.5	0.0	0.9	0.0	n/a	n/a	426	12.8	13.0	66 %	73 %	75 %
Jan-20	475	0.5	0.0	0.8	0.0	n/a	n/a	435	12.4	13.0	74 %	80 %	84 %
Feb-20	425	0.6	0.0	1.0	0.0	n/a	n/a	439	12.0	13.0	79 %	82 %	84 %
Mar-20	307	0.6	0.0	1.0	0.0	n/a	n/a	407	12.3	13.0	77 %	81 %	84 %
Apr-20	204	0.5	0.0	0.8	0.0	n/a	n/a	184	13.3	13.0	66 %	72 %	73 %
May-20	241	0.4	0.0	0.6	0.0	n/a	n/a	231	13.8	13.0	68 %	73 %	74 %
Jun-20	287	0.7	0.0	1.1	0.0	n/a	n/a	276	12.2	13.0	82 %	84 %	86 %
Jul-20	349	0.6	0.0	0.9	0.0	n/a	n/a	332	12.2	12.0	78 %	80 %	84 %
Aug-20	358	0.3	0.0	0.6	0.0	n/a	n/a	339	11.8	12.0	84 %	87 %	90 %
Sep-20	386	0.5	0.0	0.8	0.0	n/a	n/a	378	11.9	12.0	80 %	82 %	85 %
Oct-20	396	0.7	0.0	0.9	0.0	5.7	4.0	407	12.9	13.0	81 %	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 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							
Oct-19	8	0.3	0.0	1.2	0.0	n/a	n/a	21	43.7	47.0	5 %	5 %	10 %	
Nov-19	17	0.6	0.0	0.7	0.0	n/a	n/a	15	29.5	26.0	7 %	7 %	7 %	
Dec-19	15	0.5	0.0	0.7	0.0	n/a	n/a	17	27.0	30.0	12 %	12 %	24 %	
Jan-20	19	0.1	0.0	0.2	0.0	n/a	n/a	12	20.1	23.0	8 %	8 %	8 %	
Feb-20	13	0.1	0.0	0.2	0.0	n/a	n/a	14	23.5	21.5	14 %	14 %	21 %	
Mar-20	10	0.2	0.0	1.2	0.0	n/a	n/a	11	48.8	50.0	9 %	9 %	9 %	
Apr-20	6	0.3	0.0	1.4	0.0	n/a	n/a	4	16.8	12.0	50 %	50 %	50 %	
May-20	7	0.3	0.0	1.5	0.0	n/a	n/a	4	36.3	30.0	25 %	25 %	25 %	
Jun-20	26	0.7	0.0	0.8	0.0	132.5	132.5	10	65.7	55.5	0 %	0 %	0 %	
Jul-20	18	0.5	0.0	0.5	0.0	117.5	115.5	8	39.5	31.5	13 %	13 %	25 %	
Aug-20	9	0.6	0.0	0.6	0.0	106.2	102.5	22	91.1	80.0	0 %	0 %	0 %	
Sep-20	18	0.7	0.0	0.9	0.0	80.5	83.5	22	52.6	63.5	9 %	9 %	9 %	
Oct-20	39	0.9	0.0	0.9	0.0	28.0	17.0	25	47.3	36.0	16 %	20 %	24 %	

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						
Oct-19	171	3.0	0.0	3.2	0.0	n/a	n/a	175	34.6	41.0	26 %	28 %	29 %
Nov-19	137	3.0	0.0	3.0	0.0	n/a	n/a	127	29.5	30.0	26 %	27 %	28 %
Dec-19	153	2.4	0.0	2.5	0.0	n/a	n/a	143	30.4	34.0	28 %	29 %	30 %
Jan-20	127	1.7	0.0	1.8	0.0	n/a	n/a	136	40.1	41.0	9 %	10 %	10 %
Feb-20	101	1.7	0.0	1.8	0.0	n/a	n/a	110	40.3	37.0	10 %	11 %	11 %
Mar-20	102	1.5	0.0	1.6	0.0	n/a	n/a	111	32.8	28.0	8 %	9 %	10 %
Apr-20	81	1.6	0.0	1.9	0.0	n/a	n/a	76	43.6	39.0	11 %	12 %	12 %
May-20	58	1.7	0.0	1.7	0.0	n/a	n/a	64	56.5	43.0	0 %	0 %	0 %
Jun-20	72	1.8	0.0	1.7	0.0	n/a	n/a	75	70.4	69.0	4 %	4 %	4 %
Jul-20	104	3.5	0.0	1.4	0.0	n/a	n/a	82	39.0	32.0	5 %	5 %	11 %
Aug-20	115	1.7	0.0	0.6	0.0	73.0	74.0	111	61.5	38.0	6 %	6 %	6 %
Sep-20	123	1.6	0.0	0.6	0.0	50.7	45.0	128	46.9	36.5	7 %	7 %	8 %
Oct-20	153	1.6	0.0	0.6	0.0	27.7	19.0	106	39.4	31.0	9 %	9 %	10 %

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.

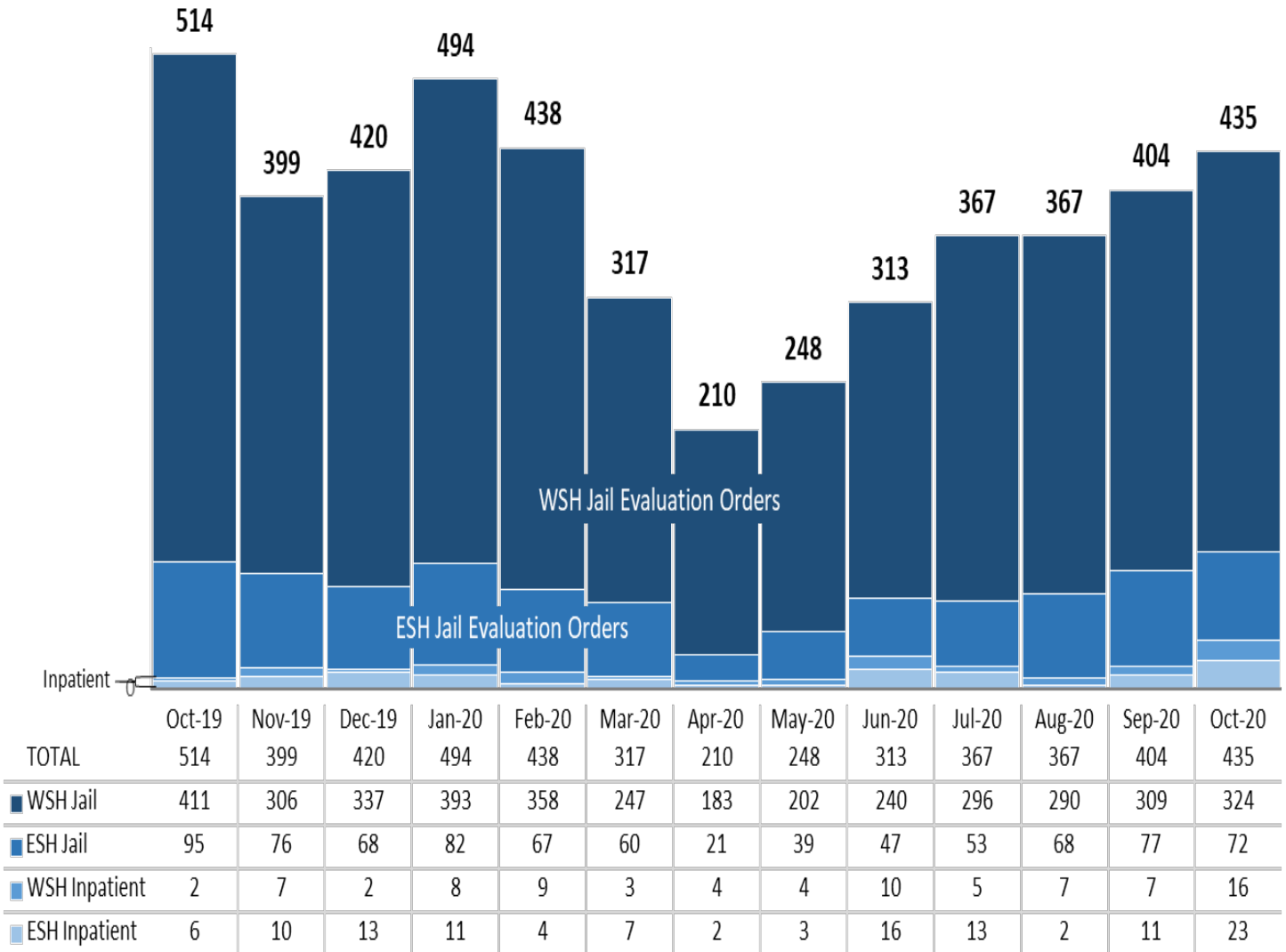
⁵From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: completion and the percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

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” October data. The data are subject to change as they mature over a longer time horizon.

Figure 1. Signed Evaluation Orders for Trueblood Class Members



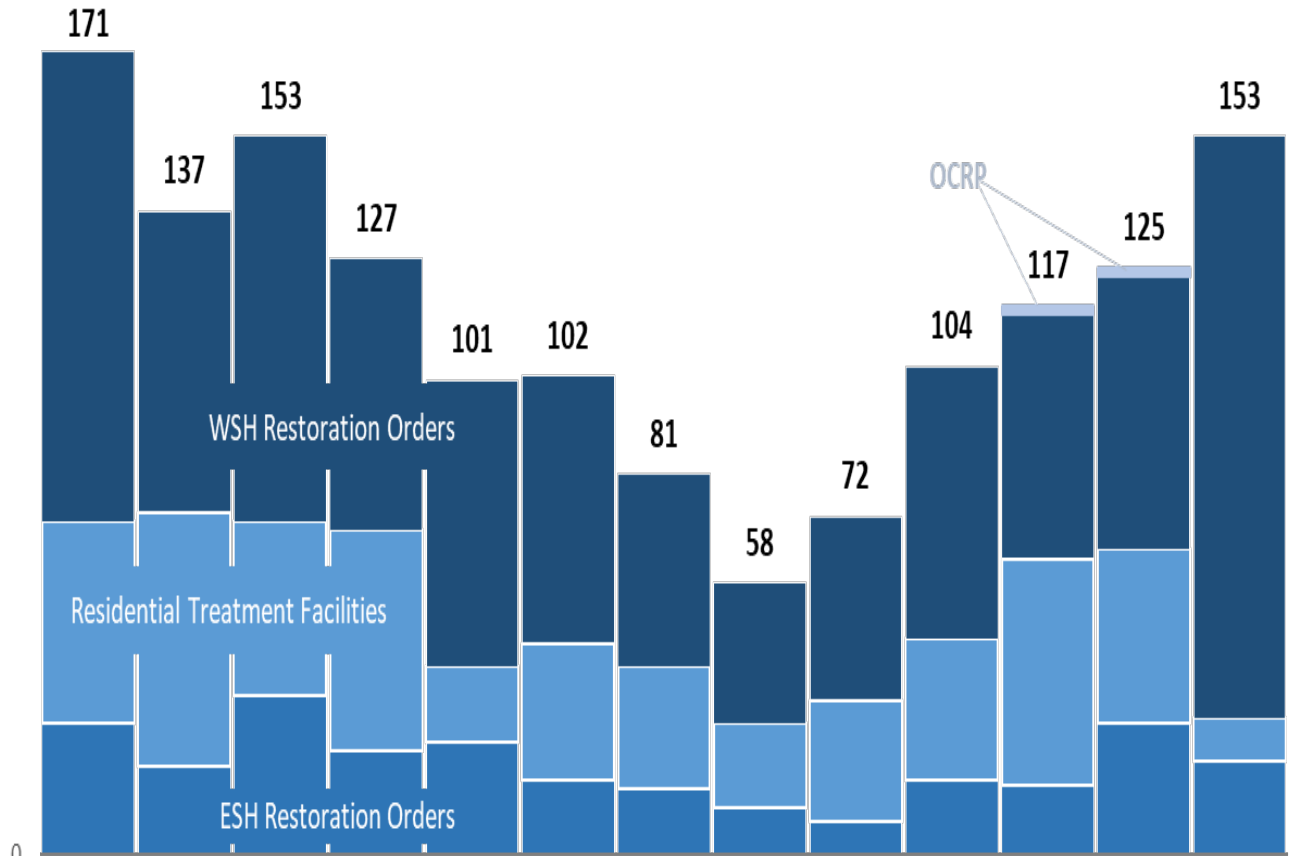
SOURCE: DSHS Facilities, Finance, and Analytics Administration, Research and Data Analysis Division, Forensic Data System, November 2020.

On July 1, 2020, OCRP services debuted in two of the three Phase 1 regions of the Trueblood settlement, and on September 1, 2020, services debuted in the Southwest region. This month’s report, covers events from October 1 – October 31. Figures 2, 5, and 6 on the following pages represent the visual presentation of OCRP data in this month’s report.

As with any new program or process, it often takes some time to ensure all internal and external parties are functioning correctly within the new environment. As processes have been utilized in real world conditions, the courts, OCR providers, and our agencies have provided education and outreach where needed as well as adjusted processes to reflect lessons learned and actual operational experiences.

One case did enter OCRP in July. A misunderstanding in issuing multiple competing restoration orders and a mistimed release from jail resulted in the client not qualifying to be a class member. As a result, the client’s data is not included in table below. In August, two class members entered OCRP; however, a data entry error, which required developer-level intervention to correct, prevented one case from initially displaying correctly in the table below. The case displays correctly for the October report.

Figure 2. Signed Restoration Orders for Trueblood Class Members



	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20
TOTAL	171	137	153	127	101	102	81	58	72	104	117	125	153
OCRP	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0	2	2	0
WSH Restoration	100	64	82	58	61	57	41	30	39	58	52	58	124
RTF Restoration	43	54	37	47	16	29	26	18	26	30	48	37	9
ESH Restoration	28	19	34	22	24	16	14	10	7	16	15	28	20

SOURCE: DSHS Facilities, Finance, and Analytics Administration, Research and Data Analysis Division, Forensic Data System, November 2020.

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

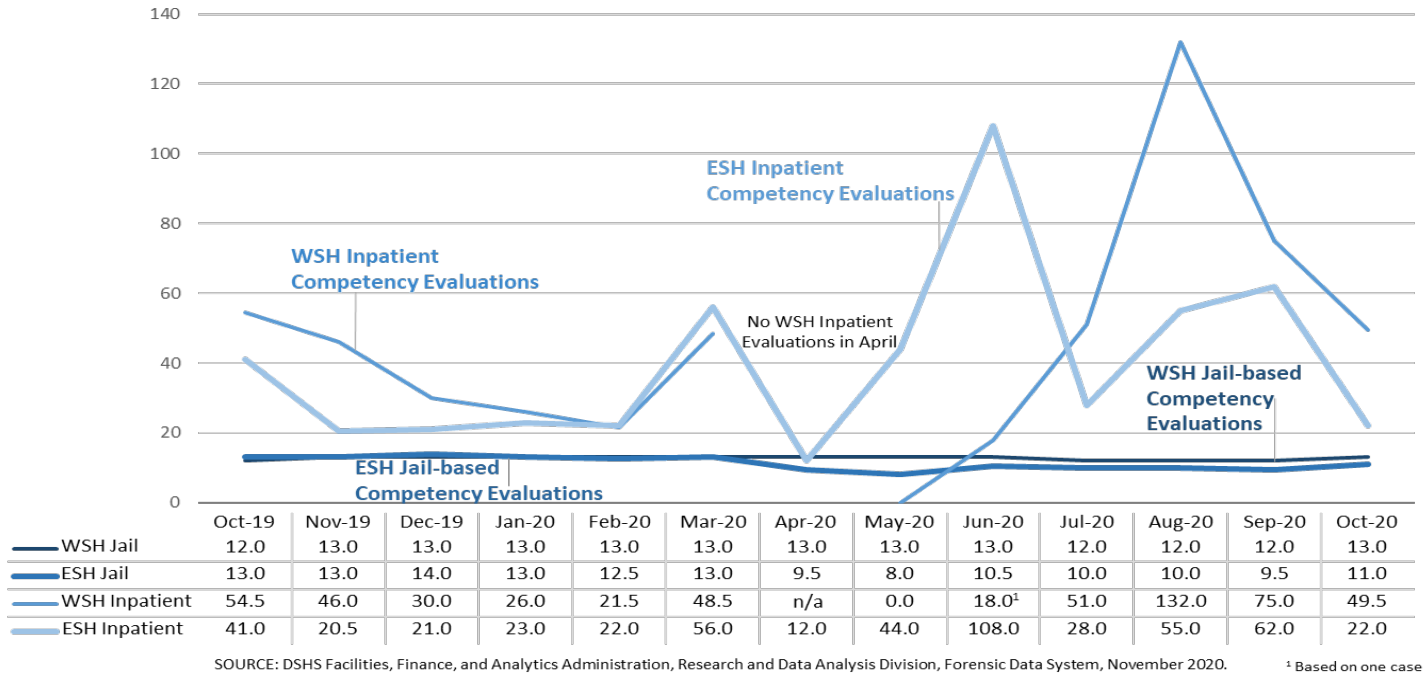


Figure 4. Average Days from Court Order Signature to Completed Evaluation

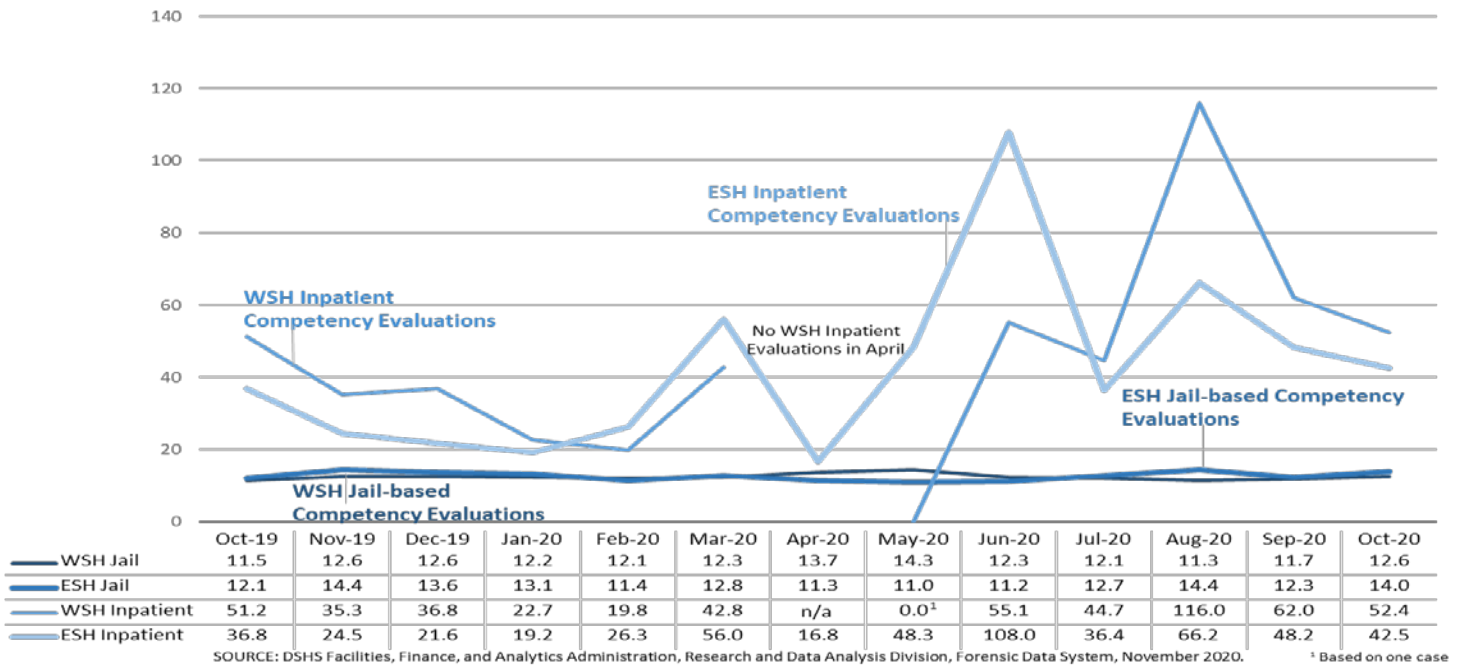


Figure 5. Median Days from Court Order Signature to Completed Restoration

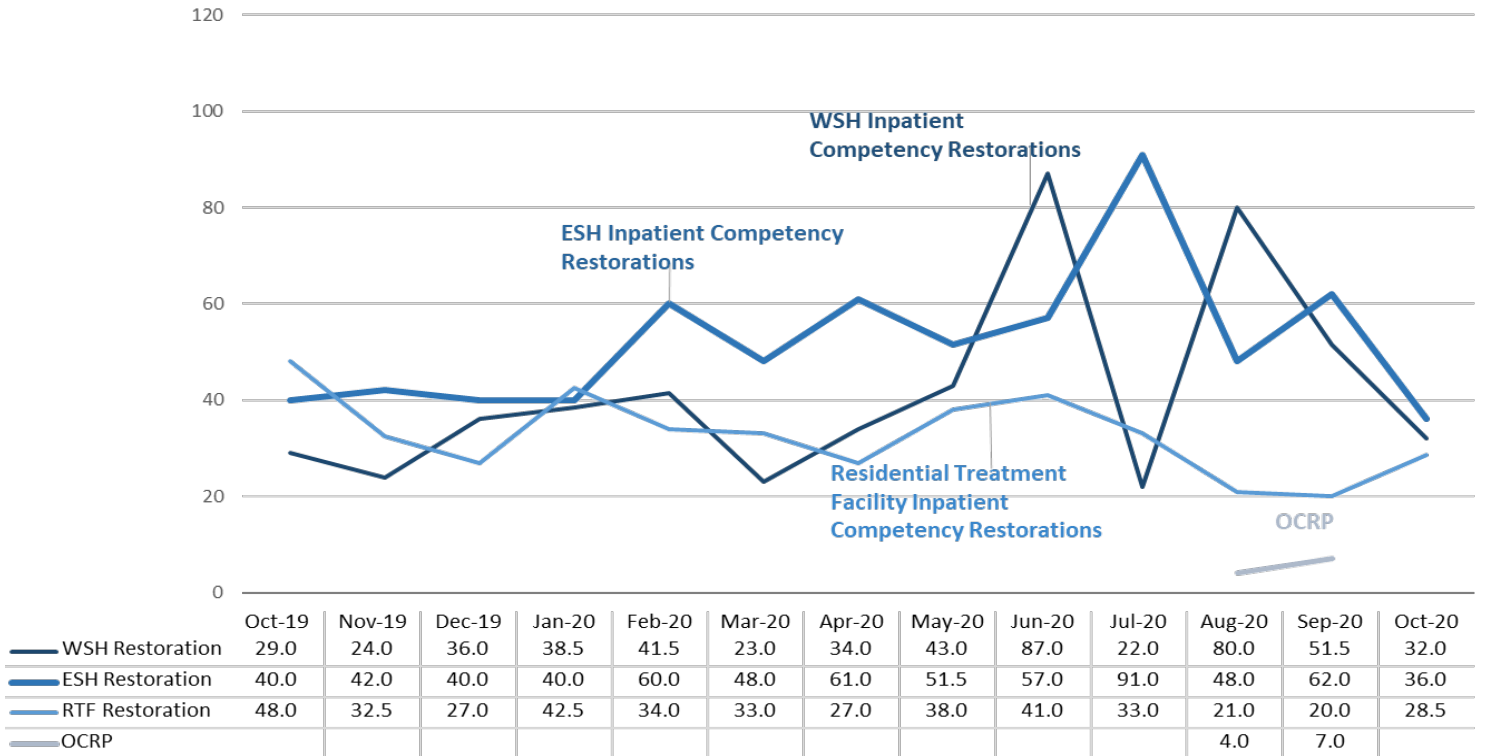
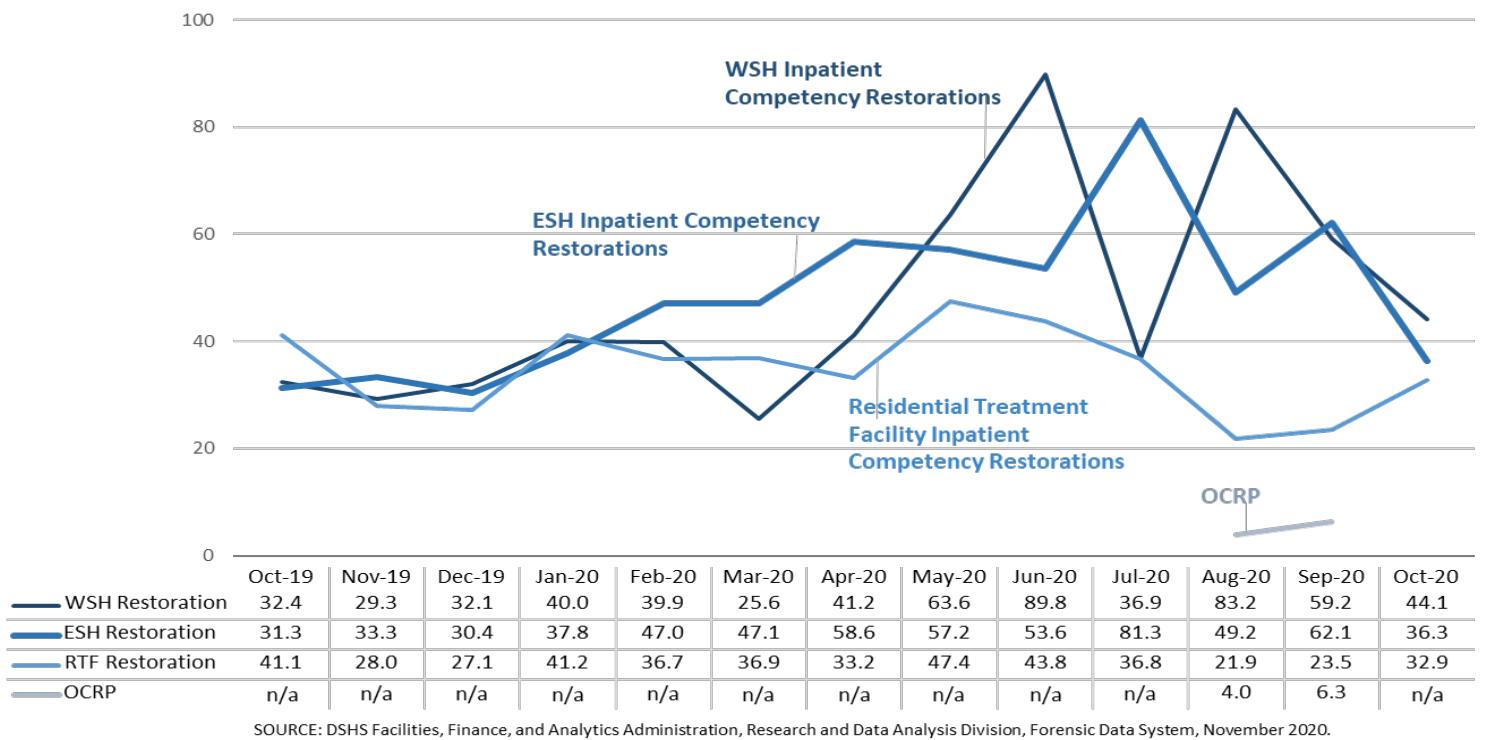


Figure 6. Average Days from Court Order Signature to Completed Restoration



TABLES 11-14: SUMMARY OF JAIL EVALUATIONS, IN-PATIENT EVALUATIONS, AND RESTORATIONS BY MONTH SINCE FEBRUARY 2016

The data presented in this section, from Tables 11-14 (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. October 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 11-14.

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

BY START MONTH							
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}
Oct-19	506	398	79 %	423	84 %	447	88 %
Nov-19	382	251	66 %	285	75 %	295	77 %
Dec-19	405	287	71 %	306	76 %	323	80 %
Jan-20	475	378	80 %	400	84 %	414	87 %
Feb-20	425	323	76 %	343	81 %	355	84 %
Mar-20	307	232	76 %	244	79 %	250	81 %
Apr-20	204	128	63 %	138	68 %	140	69 %
May-20	241	187	78 %	194	80 %	199	83 %
Jun-20	287	225	78 %	232	81 %	239	83 %
Jul-20	349	290	83 %	296	85 %	312	89 %
Aug-20	358	292	82 %	303	85 %	312	87 %
Sep-20	386	308	80 %	320	83 %	337	87 %
Oct-20	396	247	62 %	258	65 %	261	66 %

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.

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	Court Orders Signed 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}
Oct-19	8	1	13 %	1	13 %	2	25 %
Nov-19	17	1	6 %	1	6 %	2	12 %
Dec-19	15	2	13 %	2	13 %	3	20 %
Jan-20	19	3	16 %	3	16 %	3	16 %
Feb-20	13	1	8 %	1	8 %	2	15 %
Mar-20	10	1	10 %	1	10 %	1	10 %
Apr-20	6	1	17 %	1	17 %	1	17 %
May-20	7	1	14 %	1	14 %	1	14 %
Jun-20	26	0	0 %	0	0 %	1	4 %
Jul-20	18	1	6 %	1	6 %	1	6 %
Aug-20	9	0	0 %	0	0 %	0	0 %
Sep-20	18	2	11 %	2	11 %	3	17 %
Oct-20	39	4	10 %	5	13 %	5	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.

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	Court Orders Signed 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}
Oct-19	171	45	26 %	47	27 %	48	28 %
Nov-19	137	32	23 %	34	25 %	36	26 %
Dec-19	153	41	27 %	43	28 %	44	29 %
Jan-20	127	12	9 %	13	10 %	13	10 %
Feb-20	101	11	11 %	12	12 %	12	12 %
Mar-20	102	8	8 %	9	9 %	10	10 %
Apr-20	81	8	10 %	9	11 %	9	11 %
May-20	58	1	2 %	1	2 %	1	2 %
Jun-20	72	2	3 %	2	3 %	2	3 %
Jul-20	104	6	6 %	6	6 %	11	11 %
Aug-20	115	6	5 %	6	5 %	6	5 %
Sep-20	123	13	11 %	13	11 %	14	11 %
Oct-20	153	7	5 %	7	5 %	8	5 %

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.

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).

On July 1, 2020, OCRP services debuted in two of the three Phase 1 regions of the Trueblood settlement, and on September 1, 2020, services debuted in the Southwest region. This month's report, covers events from October 1 – October 31. Table 14. below is one of two OCRP data tables available in this monthly report.

As with any new program or process, it often takes some time to ensure all internal and external parties are functioning correctly within the new environment. As processes have been utilized in real world conditions, the courts, OCR providers, and our agencies have provided education and outreach where needed as well as adjusted processes to reflect lessons learned and actual operational experiences.

One case did enter OCRP in July. A misunderstanding in issuing multiple competing restoration orders and a mistimed release from jail resulted in the client not qualifying to be a class member. As a result, the client’s data is not included in table below. In August, two class members entered OCRP; however, a data entry error, which required developer-level intervention to correct, prevented one case from displaying correctly in the table below. The case displays correctly for the October report.

Table 14. OCRP Completed Restoration Orders by Month Court Order Signed

TABLE 14. OUTPATIENT COMPETENCY RESTORATION PROGRAM COMPLETED RESTORATION ORDERS BY MONTH COURT ORDER SIGNED ¹							
MONTH	Court Orders Signed 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}
Jul-20	0	0	N/A	0	N/A	0	N/A
Aug-20	2	2	100 %	2	100 %	2	100 %
Sep-20	2	2	100 %	2	100 %	2	100 %
Oct-20	0	0	N/A	0	N/A	0	N/A

¹The OCRP was implemented July 1, 2020. The data are pulled from the BHA Forensic Data System and Navigator Case Management System and 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.

³The 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.

⁴According to the Settlement Agreement, “For criminal defendants waiting in jail, an offer of admission to the community outpatient restoration services program will occur within the constitutional timelines for restoration as outlined by the Federal Court.” Therefore, this table captures the 3 compliance deadlines captured for inpatient competency restoration: 1) number and percent completed within 7 days from court order signature date (as stipulated from April 2015 to April 2017) and 2) number and percent 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) and 3) the number and percent of all orders completed within either of 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) (from May 2017 onward as outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389).

RESOURCES REQUIRED TO PROVIDE TIMELY COMPETENCY SERVICES

The state's 2017-19 operating budget appropriated \$51 million for implementation of efforts to improve 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 (FY) 2019, by converting one 30-bed civil ward. The Forensic ward re-opened in May 2018.

On January 25, 2018, Judge Pechman approved contempt fine funds to remodel Building 27. This resulted in the 30-bed FSCRCP opening on WSH's campus in August 2019. The state's FY'19 supplemental operating budget provided the funding to operate FSCRCP.

The FY 2018 supplemental capital budget included \$6.5 million to renovate ESH's 1N3 and 3N3 wards to provide another 50 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 closure and renovation of 60 civil beds into 42 additional forensic beds. Eventually 40 beds were built due to the necessity of including seclusion rooms in the wards.

DSHS, the HCA and the Washington State Criminal Justice Training Commission (CJTC) received the funding below that will benefit implementation of the contempt settlement agreement approved in the Trueblood et al. v. DSHS lawsuit. Phase 1 of the settlement's phased agreement 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 (all funding below is for the 2019-2021 biennium unless otherwise noted).

1. Administration: \$2.5 million for staff at DSHS and HCA to administer the contempt settlement agreement;
2. Competency evaluation: \$5 million for 18 competency evaluators at DSHS (13 in FY'20 and 5 in FY'21);
3. Competency restoration: \$1.89 million to HCA for OCRP; programs are active in the three Phase 1 regions;
4. Crisis services: \$10.23 million to HCA for expanded triage, stabilization, and mobile diversion services;
5. Diversion support: \$11 million to HCA to divert individuals with behavioral health issues from the criminal court system for misdemeanor crimes; funding for crisis triage, OCR services, and housing supports;
6. Engagement and Outreach: \$4.7 million to HCA for services identified to clients through comprehensive predictive data modeling; allows supportive FPATH outreach teams to connect high utilizers to services;
7. Housing supports: \$6.4 million to HCA's FHARPS teams for housing services and transitional housing vouchers for referrals from OCRP, FPATH, other Trueblood services, and transitioning from crisis services.
8. Technical assistance to jails & workforce development: \$1.28 million to DSHS for staff to provide technical assistance and training to jails, and to provide dedicated support to workforce development activities;
9. \$2.2 million to DSHS to fund nine forensic navigators, a new position/program established in the settlement agreement. Navigators' work began in the Phase 1 regions on July 1, 2020;

10. \$400,000 and one position to HCA to develop an enhanced continuing education curriculum for certified peer counselors covering the criminal court system; focuses on curriculum development, training materials, and training costs;
11. \$899,000 for the CJTC to provide crisis intervention training to law enforcement agencies; \$4 million to CJTC to fund the Washington Association of Sheriffs & Police Chiefs co-responders.

2021-2023 BIENNIAL BUDGET PROCESS FOR TRUEBLOOD AGREED SETTLEMENT

The COVID-19 pandemic emerged in Washington state in February 2020 and resulted in quarantines and economic closures to mitigate the virus, which also decreased state revenue such that the Office of Financial Management (OFM) mandated that Governor led executive agencies propose and enact 15 percent budget reductions as soon as possible. Generally, budget cuts impacting Trueblood-related programs were limited to temporary staff furloughs.

Trueblood partner agencies have submitted their 2021-2023 biennium budget requests to OFM for evaluation and potential inclusion in the Governor's biennial budget proposal to the legislature that will be released in mid-December. Enacted maintenance funding for current programs and potential funding for new requests may become available to this monthly report as soon as May 2021.

NEED PROJECTIONS AND BED CAPACITY

In June 2017, Judge Pechman directed the Court Monitor to have a competency services bed need study conducted to illustrate patient demand and bed need, to ultimately determine the feasibility, timeframe, compliance with court orders, and to measure the impact of community-based competency evaluation on the demand for inpatient competency evaluation and restoration beds. The TriWest Group was selected as the contractor to complete this work. The Court Monitor provided DSHS the draft report on October 3, 2018. DSHS received the finalized report via webinar on December 10, 2018.

TRUEBLOOD KEY ACCOMPLISHMENTS – OCTOBER 2020

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

RECRUITING

The recruiting numbers presented below are from October.

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

- Mental Health Technicians – 68 presented
- Psychiatric Security Attendant – 23 presented
- Psychologist – 1 presented
- RN's – 22 presented
- Psychiatrist – 1 presented

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

- Psychology Associate – 4 presented
- RN's – 90 presented
- LPN's – 17 presented
- Psychiatric Security Nurse – 10 presented
- Psychiatric Social Worker – 17 presented
- Psychiatric Security Attendant – 65 presented
- Institution Counselors – 84 presented
- Psychiatrist – 1 presented
- Occupational Therapist – 3 presented

Applicants presented to FSCR. P. for consideration are indicated below:

- Institution Counselors – 70 presented

Applicants presented for statewide consideration are indicated below:

- Psychologist (Forensic Evaluators) – 1 presented

RESIDENTIAL TREATMENT FACILITIES (RTF's) DATA

This section, presents monthly data for the current month and the trailing year (13-months), with a year-over-year average comparison. All three RTF's: Yakima, Maple Lane, and FSCRCP are presented in their own table, Tables 15-17 in this section of the report.

Table 15. Monthly RTF Data for Yakima

Data Elements	Oct-19	Nov-19	Dec-19	2019 Avg	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	2020 Avg
Census (last day of month)	24	24	21	22.83	21	23	23	20	19	20	19	18	20	20	20.30
Total patients admitted	14	8	6	11.00	12	10	10	6	5	8	8	7	7	9	8.20
Completed and found competent (1st Restoration) *	5	3	5	6.50	5	5	6	8	4	3	4	5	2	7	4.90
Not likely restorable (transported back to jail)	4	0	0	0.75	2	2	0	0	0	2	1	0	1	0	0.80
Court Order lapsed (Transported back to Jail) **	2	3	2	1.58	2	0	2	0	0	1	0	1	0	0	0.60
Felony patients completed and found not likely restorable (1st Restoration)	0	0	0	0.00	0	0	0	0	0	0	0	0	0	0	0.00
Misdemeanor patients not restored (no further treatment by law)	0	0	0	0.00	0	0	0	0	0	0	0	0	0	0	0.00
Total transferred to State Hospital	3	2	1	1.75	4	1	3	1	2	1	3	2	2	1	2.00
For physical aggression	0	1	1	0.50	1	1	0	0	0	0	1	1	0	1	0.50
For sexually inappropriate behavior	0	0	0	0.00	0	0	0	0	0	0	0	0	0	0	0.00
For medical reasons	2	0	0	1.08	1	0	2	0	0	0	1	0	0	0	0.40
Due to court ordered treatment at SH	1	0	0	0.08	0	0	0	1	2	1	1	1	1	0	0.70
Other ***	0	1	0	0.08	2	0	1	0	0	0	1	0	1	0	0.50
Total patients eloped	0	0	0	0.00	0	0	0	0	0	0	0	1	0	0	0.10
Total recommended for early evaluation	1	1	0	1.50	1	3	5	3	2	2	2	2	1	3	2.40
Total recommended for 2nd 90-day order	3	5	5	3.00	1	3	3	5	4	3	3	3	2	5	3.20
Total recommended for 3rd 90-day order	0	2	0	0.17	1	0	0	0	0	0	0	0	0	0	0.10
* Discharge was for a resident opined competent in jail and YCRC was not notified until after transporting him. Transport was scheduled the next day for pick up.															
** Patient was transported back to jail for Sell hearing. Case was dismissed and defendant was released.															
*** Transfer to MLCRP for interpreter services YCRC is unable to provide.															

Table 16. Monthly RTF Data for Maple Lane

Data Elements	Oct-19	Nov-19	Dec-19	2019 Avg	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	2020 Avg
Census (last day of month)	27	25	25	27.83	28	28	22	22	19	14	20	18	22	22	21.50
Total patients admitted	12	11	10	13.08	17	11	12	7	9	4	16	8	16	12	11.20
Completed and found competent (1st Restoration)	4	9	4	5.08	8	6	8	4	7	6	5	6	5	6	6.10
Not likely restorable (transported back to jail)	2	1	1	1.33	0	3	2	0	1	1	0	0	1	0	0.80
Court Order lapsed (Transported back to Jail)	0	0	0	0.00	0	0	0	0	0	0	0	0	0	1	0.10
Felony patients completed and found not likely restorable (1st Restoration)	0	1	0	0.25	0	1	0	0	0	1	0	0	0	0	0.20
Misdemeanor patients not restored (no further treatment by law)	0	0	1	1.67	0	0	1	1	0	1	0	2	4	0	0.90
Total transferred to State Hospital	1	2	1	1.50	2	0	0	0	1	0	0	1	1	1	0.60
For physical aggression	0	2	0	1.00	1	0	0	0	0	0	0	1	0	1	0.30
For sexually inappropriate behavior	0	0	0	0.00	0	0	0	0	0	0	0	0	0	0	0.00
For medical reasons	0	0	1	0.25	1	0	0	0	0	0	0	0	1	0	0.20
Due to court ordered treatment at SH	0	0	0	0.08	0	0	0	0	0	0	0	0	0	0	0.00
Other	1	0	0	0.17	0	0	0	0	1	0	0	0	0	0	0.10
Total patients eloped	0	0	0	0.00	0	0	0	0	0	0	0	0	0	0	0.00
Total recommended for early evaluation	3	4	3	3.17	2	4	4	2	0	2	0	0	2	2	1.80
Total recommended for 2nd 90-day order	5	2	6	4.08	1	6	1	3	1	2	0	4	0	3	2.10
Total recommended for 3rd 90-day order	0	0	1	0.67	0	0	0	0	0	0	0	0	0	0	0.00

Table 17. Monthly RTF Data for Fort Steilacoom

Data Elements *	Oct-19	Nov-19	Dec-19	2019 Avg	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	2020 Avg
Census (last day of month)	12	18	23	11.80	25	21	15	19	21	19	19	18	20	25	20.20
Total patients admitted	9	10	15	7.80	14	8	4	7	5	6	7	9	10	11	8.10
Completed and found competent (1st Restoration)	0	2	7	1.80	8	5	2	4	2	6	3	2	2	2	3.60
Not likely restorable (transported back to jail)	0	1	0	0.20	0	2	1	0	0	0	0	0	1	2	0.60
Court Order lapsed (Transported back to Jail)	0	2	6	1.60	0	0	0	0	0	0	0	1	1	0	0.20
Felony patients completed and found not likely restorable (1st Restoration)	1	0	0	0.20	3	2	1	0	0	0	1	1	0	2	1.00
Misdemeanor patients not restored (no further treatment by law)	0	0	1	0.20	0	0	0	0	0	0	1	0	2	0	0.30
Total transferred to State Hospital	1	0	1	0.60	0	4	5	0	1	3	1	1	2	0	1.70
For physical aggression	0	0	1	0.20	0	3	2	0	1	3	1	1	0	0	1.10
For sexually inappropriate behavior	0	0	0	0.00	0	0	0	0	0	0	0	0	0	0	0.00
For medical reasons	0	0	0	0.20	0	0	1	0	0	0	0	0	0	0	0.10
Due to court ordered treatment at SH	0	0	0	0.00	0	0	0	0	0	0	0	0	1	0	0.10
Other	1	0	0	0.20	0	0	2	0	0	0	0	0	1	0	0.30
Total patients eloped	0	0	0	0.00	0	0	0	0	0	0	0	1	1	0	0.20
Total recommended for early evaluation	0	0	0	0.00	0	0	0	0	0	0	1	0	0	1	0.20
Total recommended for 2nd 90-day order	2	3	0	1.00	2	3	1	2	2	3	2	1	1	2	1.90
Total recommended for 3rd 90-day order	0	0	0	0.00	0	0	0	0	2	0	1	0	0	0	0.30

* FSCRP began admitting patients on August 28, 2019

TRUEBLOOD IMPLEMENTATION STEPS TAKEN AND PLANNED – OCTOBER 2020

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

Table 18. Trueblood Implementation Steps

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Court Appointed Monitor Coordination				
Monthly Reports	Release October 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 October report to stakeholders completed.
Legislative Coordination				
Implement Engrossed Substitute Senate Bill 6656: Funding applications	Apply for funding from the Office of Financial Management 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 Trueblood 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.</p> <p>No meeting was scheduled in December 2019 or January 2020 with the Legislative session beginning on January 13, 2020. Additionally, no meetings were scheduled for February through August. A meeting of the BHRST committee occurred on September 25, 2020 and a follow-up meeting scheduled on October 23, 2020. The agenda and other meeting materials can be found here for the October 23rd meeting:</p> <p>https://app.leg.wa.gov/committeeschedules/Home/Documents/28006?//29870/01-01-2020/11-15-2020/Agenda///Bill/</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
<p>Consult with key partners and stakeholders, including out of state agencies, regarding potential legislation, potential certification of forensic evaluators, and other opportunities to enhance quality assurance.</p>	<p>Consult key partners including out of state agencies.</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 Trueblood 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 has completed the new Forensic Mental Health Training and Certification training curriculum, and preliminary training of Enhanced Peer Specialists was delivered in April. The two-day workshop will be made available to other OFMHS employees (including new Forensic Evaluators), Forensic Navigators, Competency Restoration staff, and external learners, including jail staff, forensic peer-support specialists, and outpatient care providers, etc. OFMHS collaborated with HCA on this program, and the program will be required for new peer-support specialists working in forensic roles (FHARPS, FPATH, and OCRP).</p> <p>The COVID-19 pandemic has altered the plans and method for delivery of training. Subsequent delivery of this training, to other identified groups, is being planned and is subject to conditions imposed by the COVID-19 situation. Training topics for the Jail Technical Assistance webinar series have been identified for the remainder of 2020, and scheduling for these sessions is underway.</p> <p>Options for credentialing or certification of Forensic Evaluators and other positions in the forensic behavioral health workforce are under review in light of the recently received gaps-analysis report completed by Groundswell, Inc.</p> <p>Initial discussion and collaboration continues with Utah and other states. A meeting occurred on September 10, 2020 with five states participating. Representatives from Utah and Oregon presented information related to the</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				<p>credential process (Utah regarding its current process and Oregon its past experience). Correspondence continues with representatives from other states, and additional updates are expected later this fall.</p>
Labor Coordination				
<p>Engage Labor Leaders and Members</p>	<p>Conduct ongoing bi-monthly meetings with labor leaders.</p>	<p>Ongoing</p>	<ul style="list-style-type: none"> • Discuss policy, budget and operational changes likely required to comply with the Trueblood 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>DSHS scheduled a demand to bargain on extra-duty pay for the month of October at labor’s request. The demand to bargain led to the agreement to form a workgroup to explore wording changes that best fit the work of the forensic evaluators.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Data Collection and Fiscal Modeling				
Monthly report data collection	Identify and obtain needed data.	Complete	Obtain data for monthly reports and develop standardized reports to inform policy development and implementation.	Data collection is ongoing. The FDS technical team continues to meet bi-monthly with program (OFMHS) and data (RDA). Reporting needs are identified, ran through Change Control, and implemented as needed. This process is operationalized.
Institute data audit process	Review data and files of cases with anomalies and identify trends.	Complete	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
			<p>activity for a court order that crosses many modules.</p> <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). 	<p>System now directs users to all court orders for a client, including the client's aliases.</p> <p>The Due In/Due Out Report has been modified to contain the essential fields for the hospital admission coordinators. Additional requirements will be gathered to best meet the needs of admission coordinators.</p>
	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. 	<p>Client Status History table has been added to the database and user interface, user interface has been updated to capture updated Court Order Due Date for Forensic Evaluation Completion.</p> <p>New Client Identification Number confirmer has been trained, and we are requesting access to additional secondary systems for identifying clients.</p> <p>New structure for capturing client status has been released to users on April 17, 2019.</p>
	RDA Reporting Issues	Complete	<p>Ensure RDA is accounting for all / correct elements when building reports.</p>	<p>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.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
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.	All 18 new positions added for Fiscal Year 20-21 have been filled. Recruiting continues to fill the three remaining vacant evaluator positions. The supervisor position for the east side has been filled and will start November 1, 2020, and the Seattle supervisor position was also filled with a start date of January 1, 2021.
Hire additional hospital ward staff	Conduct targeted hiring events.	In progress	Obtain required staff of all classes to safely and appropriately operate additional civil and forensic beds and to meet data collection, analysis and reporting needs.	Talent Acquisition recruiting efforts continue. See page 34 for additional details on recruiting.
	Pursue contracting			
Competency Evaluation				
Build capacity for out-station sites	Site agreements	N/A	Increased capacity at out-station sites will reduce wait time for evaluation.	All evaluations at outstation sites have been conducted by telehealth to reduce COVID-19 exposure risk for all parties. The system used for the tele-evals is able to accommodate attorney requirements to be present.
	Outstation sites operational	Complete		
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 Trueblood Decision.	Quarterly stakeholder meetings continue to occur with Pierce County. The most recent meeting was on October 21, 2020. The next meeting will be held November 18. OFMHS is now partnering with King County’s Department of Behavioral Health and Recovery to convene a group to address issues related to Trueblood class members. This group has met monthly since May 2019, with the most recent meeting occurring on August 10, 2020. The next meeting is set for November 23, 2020. Participants include police, behavioral health providers, shelter services, prosecutors, defenders, DRW, DSHS, and more.

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				Additional information will be available in time for the final report.
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 2020, 78.7-percent of forensic evaluators had competency evaluation reports audited by supervisors. A total of 72 competency evaluation reports were reviewed in Q3 2020. Q4 2020 data will be available in January 2021. A new evaluator supervisor was hired for the Eastern Regional Office (ERO) and will start employment on November 1, 2020. The Northern Regional Office (NRO) evaluator supervisor position was also recently hired and starts January 1, 2021.</p>
Explore and pursue triage system possibilities	Roll out Phase 2.	In progress	Establish an efficient evaluation to identify individuals who need inpatient services due to a serious mental health condition; who clearly do not require inpatient evaluation services; or who are clearly competent due to changes in their condition since the issuance of an order for evaluation (i.e., no longer drug affected).	<p>As of October 31, 2020, OFMHS has received 464 triage referrals from jail staff/defense. Of those referrals, 277 were approved, 126 of the referrals were denied, and 61 of these referrals were 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. Since tracking began, approximately 2,378 calls have been made including 30 calls to jails in October.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
<p>Develop Telehealth video-conferencing systems to assist in the completion of evaluations</p>	<p>State-wide implementation and utilization of technology.</p>	<p>Ongoing</p>	<p>Establishing this technology in multiple locations around the state (especially in rural areas) will allow OFMHS to conduct more evaluations, thereby helping to meet Court ordered requirements.</p>	<p>The pilot evaluation of the video-conferencing (VC) system was completed in February 2019 with 50 evaluations. The VC program is now in operational mode and continues at two of the pre-existing sites (two county jails). OFMHS provided two training seminars on the topic in 2019.</p> <p>Jennifer Popchockhakim is now point person on VC expansion and its feasibility. OFMHS continues to educate courts and jails on this technology to generate greater interest in and utilization of this technology. With the COVID-19 pandemic, and high levels of infection in many Washington state counties, video technology is seeing more interest from jails and other entities seeking to continue evaluations while minimizing physical contact/proximity of clients and staff.</p> <p>OFMHS has reached out to 21 westside and 17 eastside jails to expand the use of the VC system. The westside jails include city and county jails in Skagit, Issaquah, King (King County Correctional Facility, and Maleng Regional Justice Center), South Correctional Entity (SCORE) in Des Moines, Klickitat, Skamania, Kitsap, Kent, Pierce, Thurston, Mason, Lewis, Aberdeen, Grays Harbor, Whatcom, Clallam, Pacific, Cowlitz, and Clark. Working systems have been established at SCORE, Kent jail, Thurston County, Kitsap County, Klickitat County, Whatcom County, and the Issaquah and Aberdeen jails. These add to existing connections established earlier in Snohomish, and Island Counties. OFMHS continues to</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				<p>work towards initiating the system with the other facilities.</p> <p>The jails on the eastside include county jails in, Spokane, Stevens, Ferry, Okanogan, Pend Oreille, Chelan, Kittitas, Grant, Benton, Douglas, Walla Walla, Franklin, Adams, Whitman, Lincoln, Columbia, and the Airway Heights Correctional Center. Spokane County jail has conducted a successful video evaluation and is working on configuring additional equipment. Working systems have been established in the Ferry, Benton, Franklin, Grant, Okanogan, Whitman, and Stevens County jails. Yakima County jail remains operational as an original pilot site. OFMHS continues to work with several jails and to provide ongoing support to the operational systems.</p> <p>Technical support is ongoing for established VC systems at Western State Hospital, Maple Lane, and Yakima.</p> <p>Since August 2018, more than 850 video conferences have been authorized by court order. Fewer than 2.5% of attempts have been rejected by the client’s attorney. Approximately 1.0% of attempts were rejected by the client. Over the last twelve months, video conferences are typically used for more than 60 evaluations per month. This data is mature through October 2020.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Competency Restoration				
SH 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>Previously, the Legislature funded conversion of a civil ward to a 30-patient forensic ward. South Hall 10 re-opened in May 2018 and is serving NGRI patients who are ready to begin transitioning to the community.</p> <p>The Legislature funded this request to operate 45 additional beds in building 27 FSCRCP 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>FSCRCP opened late-August 2019 and is endeavoring to reach the 30-patient census when feasible. As of October 31, 2020, the census goal was 25, which they met. FSCRCP has a new Locums psychiatrist, and they will continue to slowly raise their census until they reach a census of 25. Due to COVID-19, the census will be capped at 25 to allow social distancing in groups and at meals.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
WSH addition 40 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>WSH is beginning the conversion of current staff positions to fill positions on the new CFS E3/E4 Wards (<i>Trueblood</i>). Schedules are currently being reviewed for final installation of furniture, equipment and supplies. The final configuration of the two wards will result in 40 new beds instead of 42, in order to accommodate a seclusion room on each ward.</p> <p>Major unexpected construction challenges are being overcome, although there are timeline impacts that are delaying the remaining work to be completed until at least mid-November.</p> <p>Additional delays are occurring in construction because of limitations being experienced by the contractor, a disruption in supply chain deliveries including materials, and availability of workforce. The contractor is operating at 50 percent of the pre-COVID-19 workforce, and the plumbing sub-contractor is also significantly affected by staffing delays. Construction is proceeding, and at this time, the final date of completion is primarily impacted by a materials shortage and delay in receiving the necessary materials. The anticipated completion date is expected to be around November 18. It should be noted the state of emergencies declarations have been careful to keep both WSH and ESH included in the essential</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				<p>construction categories, but that has not fully mitigated these disruptions. As a result, the Court granted an extension of time allowing additional time to complete construction and open the new wards to patients.</p> <p>As of November 23, WSH has had 40 patients and 99 staff infected with COVID-19. At times, this has significantly curtailed admissions.</p>
<p>ESH addition of 50 beds</p>	<p>Bed occupancy with forensic patients.</p>	<p>Partially Complete</p>	<p>Serves overall plan to add beds and expand State Hospital forensic bed capacity to meet Court ordered requirements.</p>	<p>The legislature funded, in the 2019-2021 biennial budget (for purposes of the Trueblood contempt settlement agreement), additional forensic bed capacity.</p> <p>Over \$24 million was allocated to DSHS for the addition of forensic bed capacity at ESH. These funds support two new 25-bed competency restoration units at ESH.</p> <p>The installation of equipment, supplies, and the final walk through at E3/E4 and 1N3/3N3 successfully occurred in early August.</p> <p>Most staff positions are filled for the new wards, and recruitment efforts have slowed due to the pandemic. ESH has adopted several strategies to mitigate the virus' impact; however, fully staffing these positions remains an ongoing challenge.</p> <p>The ongoing COVID-19 emergency impacted</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				<p>construction activities. Toward the end of construction, notable impacts included:</p> <p>Although ESH beds had been fully on track for completion within the timeframe, the contractor invoked the force majeure clause (citing the “pandemic” term) to suspend work. It should be noted the state of emergencies declarations were careful to keep both WSH and ESH included in the essential construction categories, but that did not fully mitigate disruptions. As a result, the Court granted an extension of time, which allowed additional time to complete construction and open the new wards to patients.</p> <p>Ward 1N3 opened on June 1. As of November 25, the current census is 10 patients. Ward 3N3 opened on August 3 and as of November 25, the census is six patients. A recent outbreak of COVID-19, infecting a total of 62 staff and 15 patients, as of November 23, has significantly slowed patient admissions. As a result of COVID-19, each ward is limited to a maximum of 23 patients.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Provide Restoration Treatment at 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 Table 15 on page 35.</p> <p>The quarterly Length of Commitment data pulled on October 13, 2020 shows that restoration patients on 45-day orders at MLCRP stay longer than patients at the other two RTF's on 45-day orders. MLCRP's numbers are comparable with WSH. This quarter ESH had a shorter stay for both 45-day orders and 90-day orders compared to all three RTF's.</p>
Provide Restoration Treatment at 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 Table 16 on page 36.</p> <p>As for the quarterly Length of Stay report that was pulled on October 13, 2020, the Yakima program is meeting the restoration rates of WSH and the RTF's with the exception of having the longest restoration rate for 90-day orders, 80.0-days, compared to an average of 45-to-55-days at the other sites. This quarter, ESH had a shorter stay for both 45-day orders and 90-day orders compared to all three RTF's and WSH.</p>
Provide Restoration Treatment at FSCR	Open Building 27	Complete	<ul style="list-style-type: none"> • Identify alternate facility capacity to meet Trueblood compliance. • Collaborate with Court parties to open the facility. 	<p>Our DSHS Medical Director, Dr. Waiblinger is filling in as the interim FSCR Medical Director. As of November 13, 2020, the census was at 24. Due to COVID-19, the census will be capped at 25 to allow social distancing in groups and at meals.</p> <p>On October 5, the Psychiatric ARNP had completed WSH and OFMHS' NEO training and had started working in the unit. Dr. Waiblinger will be mentoring her since this is her first appointment as a Psychiatric ARNP. The program will be recruiting for a half-time psychiatrist</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				<p>since Dr. Waiblinger is only allotted to work in the program 0.40 FTE.</p> <p>The recruitment for the half-time psychiatrist is still being worked on. The PDF will have to go back through class and comp since it was originally allocated as a full-time position. Currently, the program has a Locums psychiatrist filling this role.</p>
	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 Table 17 on page 36.</p> <p>As for the quarterly length of stay report pulled on October 13, 2020, FSCR is meeting the restoration rates of WSH and the other RTF's. They currently have the shortest length of commitment for 90-day second felony competency orders averaging 44-days. This quarter, ESH had a shorter stay for both 45-day orders and 90-day orders compared to all three RTF's and WSH.</p>
<i>Implementation of OCRPs</i>	Diversion programs are operational.	Partially Complete	Development and implementation of OCRP in the Pierce, Spokane, and Southwest regions.	<p>OCRP was funded as part of the 2019-2021 biennial budget. This funding allowed for HCA to contract with community behavioral health providers in the Phase 1 regions through a Request for Information (RFI) and Request for Proposals (RFP) process that began in September 2019 and concluded with finalized contracts with an OCRP provider in each Phase 1 implementation regions in April 2020. Contractors include: Frontier Behavioral Health (Spokane Region), Greater Lakes Mental Health (Pierce Region) and Lifeline Connections (Southwest Region).</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				<p>An OCRP workgroup including staff from DSHS and HCA was convened in August 2019 that worked to develop a community-based program model for OCRP, RFI and RFP language, community outreach and regional workgroup presentations, and procedural and policy language. The OCRP workgroup has also developed policy language regarding removal from OCRP to an inpatient level of care, transportation agreements, a policy for determining clinical appropriateness for OCRP, and proposed WAC language to govern the program. This workgroup is ongoing.</p> <p>HCA and DSHS have continually worked together to provide outreach and education to implementation regions. This outreach and education has included targeted events with implementation region courts. OCRP providers were also trained in the Breaking Barriers Competency Restoration Program, they received specialized training on how to work with individuals with intellectual and developmental disabilities, and they were able to visit FSCR to observe treatment programming live. Ongoing technical assistance is provided by the OCRP administrator and DSHS clinical staff.</p> <p>On July 1, 2020, two of the three implementation regions went live serving OCRP participants. The Southwest region had requested a delayed start date due to hiring challenges as a result of the Covid-19 pandemic. The Southwest region went live on September 1, 2020.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				As of October 31, 2020, nine individuals have been ordered to receive OCRP services, with four of those nine returned to an inpatient restoration setting due to non-compliance. HCA and DSHS are working together to identify ways to engage Phase 1 courts in order to increase the number of individuals referred to the programs.
	Diversion programs are operational.	Phase 2, July 2021- June 2023	Development and implementation of OCRP in the King region.	HCA, in partnership with DSHS, is working to engage King County for Phase 2 of the Trueblood program implementation. Since March 2020, both HCA and DSHS have been participating in the King County Competency Continuum workgroup that includes membership from King County law enforcement, defense council, prosecution, judges, county staff, and advocates. HCA and DSHS will also be targeting community partner groups of court and jail staff to begin the stakeholding process for OCRP.
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.	No issues were raised during this reporting period concerning county transport of patients.
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 19. 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 require¹:			
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 evaluations²:			
E. Completing evaluations for all backlog cases (any patient waiting more than 14 days at the end of the month ³)	April 15, 2016	Ongoing	Of the 386 jail evaluation orders signed in September, 309 were completed within 14 days, which is 80.0%. 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 Table 18 labeled " Explore and pursue triage system possibilities " on page 45.
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	Beginning April 15, 2016	Ongoing	For additional information, review the Task column in Table 18 labeled: " Explore and pursue triage system possibilities " on pages 45.

¹ By agreement with the Court Monitor, long completed requirements 1.A. & 1.B. were removed from *Table 19* beginning with the April 2020 report.

² By agreement with the Court Monitor, long completed requirements 2.A. & 2.B. were removed from *Table 19* beginning with the April 2020 report, and 2.C. & 2.D. were removed from *Table 18* beginning with the May 2020 report.

³ Under a previously completed section of this order, requirement 2.C., a targeted objective to recruit forensic evaluators, was satisfied.

Requirements	Date	Status	Progress Notes
Defendants' monthly reports to the Court Monitor			
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	<p>DSHS entered into a second System Improvement Agreement with the Centers for Medicare and Medicaid Services (CMS). This agreement ran from November 2, 2017 to July 2, 2018. A copy of the agreement was shared with Dr. Mauch by defense counsel on November 3, 2017.</p> <p>As a result of a Court Order in April, the department worked with Plaintiffs and the Court Monitor in developing a bed capacity/expansion plan.</p> <p>WSH was resurveyed May 2018 and did not meet all the Conditions of Participation (COP) with CMS. As of July 9, 2018, WSH was decertified. WSH continues to work using Functional Work Teams (FWTs) towards CMS certification.</p> <p>ESH remains accredited by The Joint Commission and CMS certified.</p> <p>The Legislature funded design of a new hospital, which will be required to meet all the COPs for CMS certification. Currently, this project is within the pre-design phase with aspects of the overall plan being developed. A draft design of the rough outline of the new building has been developed.</p>

Requirements	Date	Status	Progress Notes
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. WSH continues to work using Functional Work Teams (FWTs) towards CMS certification. PSHB Sec. 204 budgeted for the 30 beds at WSH and was completed prior to CMS decertification.</p> <p>The Legislature funded design of a new hospital, which will be required to meet all the COPs for CMS certification. Currently, this project is within the pre-design phase with aspects of the overall plan being developed. A draft design of the rough outline of the new building has been developed.</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 2021.

<i>Requirements</i>	<i>Date</i>	<i>Status</i>	<i>Progress Notes</i>
10. Develop a reliable and valid client-level data system to support better management and accountability of the forensic services system:			
<p>E. Implementing revisions to the existing system or initiating development of a new forensic data and management information system. The decision was to initiate new system development efforts.</p>	<p>January 2020</p>	<p>Complete</p>	<p>Project governance has established a normal data / reporting meeting with RDA, OFMHS, and the project technical team.</p> <p>Data errors now generate RDA errors reports that are sent to OFMHS key personnel. Workflow issues are directed to OFMHS for adoption and technical issues are reviewed by the technical team for design changes.</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 J and K;*
- (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 11-14.*

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

Pursuant to the August 15, 2016 Court Order, the department 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 the department to comply with the Order, including 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-H: Data Tables; Class Member Evaluation/Restoration Information; Class Member Restoration Information for the Maple Lane, Yakima, Fort Steilacoom Programs, & Outpatient Competency Restoration Program; 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 I: Outliers and Delay Comments

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

Appendix J: Calculation of Inpatient Contempt Fines

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

Appendix K: 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 L: Good Cause Exceptions

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