

***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**

**October 31, 2021**

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## BACKGROUND

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On April 2, 2015, the Court ordered the Department of Social and Health Services (DSHS) to file monthly reports with the Trueblood Court Monitor on efforts to comply with Court Orders to provide timely competency evaluation and restoration services to Class Members. This monthly report is submitted on October 31, 2021 and covers the events of September 2021. 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 54.

This report provides the Class Member data for competency services displayed in two periods: August 1, 2021 – August 31, 2021 and September 1, 2021 to September 30, 2021. 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**

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

Due to the COVID-19 pandemic, and in an effort to protect both patients and staff in accordance with guidance from federal, state, and local health departments and the DSHS incident command center, forensic admissions at our residential facilities are occurring at a decreased capacity to ensure proper quarantining procedures for new admissions prior to being admitted to a non-quarantine ward as well as to maintain proper physical distancing. As of June 30, 2021, the state of Washington has officially re-opened subject to limited restrictions. BHA facilities continue to observe COVID-19 restrictions that are in place for medical facilities.

As of October 20, 2021, WSH has had 138 confirmed cases of COVID-19 in clients, including three deaths, and 294 confirmed cases in staff members, impacting many separate wards, including forensic wards. As of October 20, 2021, ESH has had 161 staff members and 45 clients test positive for COVID-19.

Our two residential treatment facilities have had positive COVID-19 test results with eight staff and one patient testing positive at FSCR. Maple Lane has had three staff test positive and zero patients. Each facility has reduced its census to accommodate social distancing. Across all BHA facilities, there have been 13 new staff cases in October and 13 new patient cases.

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 four 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 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.

This month's report covers events from September 1 – September 30, 2021. 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. Only data from Trueblood class members is reflected in the OCRP tables and figures. As a result, some months have no new OCRP data to report. OCRP is expected to go live in the Phase 2 region, King County, during the first quarter of 2022.

## **ANALYSIS OF MATURE DATA: MAY 1, 2015 THROUGH AUGUST 31, 2021**

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

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

- Average monthly jail-based evaluation orders signed for April 2015 - August 2021
  - Western State Hospital (WSH): 261.5
  - Eastern State Hospital (ESH): 62.6
  - Both hospitals: 324.1
  
- Average monthly inpatient evaluation orders signed for April 2015 - August 2021
  - WSH: 14.1
  - ESH: 9.0
  - Both hospitals: 23.1
  
- Average monthly restoration orders signed for April 2015 - August 2021
  - WSH: 77.5 \*
  - ESH: 17.8
  - Both hospitals: 95.3 \*
  - Hospitals plus Residential Treatment Facility (RTF's): 111.3
  
- Average monthly RTF restoration orders signed for August 2018 - August 2021
  - RTF's: 33.1 \*\*
  
- Average monthly OCRP restoration orders signed for July 2020 - August 2021
  - Phase 1 OCRP (All Locations): 0.5\*\*\*

\* From April 2015 to July 2018, this figure also includes restoration orders for 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. Yakima RTF closed to patients on July 26, 2021.

\*\*\* OCRP treatment began in two Phase 1 regions on July 1, 2020 and in the third Phase 1 region on September 1, 2020. Only client's whose wait for treatment was jail-based are included in this data measure.

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

### **Orders:**

- For August, the number of jail-based evaluation orders assigned to WSH set a new record high at 427.
- ESH's jail-based evaluation orders in August set a new record high for the third consecutive month at 120.
- In August, WSH received 22 inpatient evaluation orders, which is higher than the monthly average of 14.1 orders. ESH orders for the month of August increased to 12 orders.

- WSH received 125 restoration orders in August, exceeding the previous record high by three orders. ESH had 24 orders in August, which is a one order increase compared to July. The RTF's received 5 orders in August, which is a significant decrease from July.

\* Prior to August 2018, RTF data was included with the data for WSH. From August 2018 onward, RTF data is reported separately. Yakima RTF closed to patients on July 26, 2021.

**Wait Times:**

- Regarding jail-based 14-day evaluation completion times, WSH increased moderately to 13.4 days on average in August, from order to completion. ESH evaluation times decreased to an average of 13.2 days. The combined average, across the system, increased to 13.4 days from 13.0 days.
- The average inpatient evaluation admission wait time at WSH is currently 18.6 days in August a significant decrease from July. ESH's average wait time increased significantly to 27.6 days. 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 33.2 days, a moderate decrease from July. The ESH average admission wait time remained flat for the third consecutive month at 25.9 days in August.

**Timeliness:**

- At WSH, overall timeliness for jail-based evaluation completion decreased marginally in August at an average of 85-percent completion rate within 14-days from receipt of order. ESH's timely completion rate increased moderately to 76-percent in August.
- At both hospitals combined, August's overall timeliness for inpatient evaluation admissions increased to a 31-percent completion rate within 7-days from receipt of order.
- At both hospitals and the RTF's combined, overall timeliness for inpatient restoration admissions for August increased slightly to an 8-percent completion rate within 7-days.

## OUTLIER CASES (MATURE) AUGUST

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 August.*
- *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)**

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	12	21	42
Inpatient Evaluations	17	21	119
Inpatient Restorations	33	41	88



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 eight.

**Table 1b. Summary of Evaluator Delay Reasons**

TABLE 1b. Continued SUMMARY OF EVALUATOR DELAY REASONS <sup>1</sup>			
REASONS FOR DELAY IN DATABASE	In-Jail Evaluations	Inpatient Evaluations	Inpatient Restorations
Defendant No Show			
Defendant Reschedule	2		
Evaluator availability	1		
Police reports availability			
Relevant discovery availability			
Jail/Outside facility staffing issues			
Attorney scheduling conflicts	2		
Jail return/Discharge with no eval done			
Requires amended court order			
Charges adjudicated prior to eval			
New charges - wait for new court order			
Client released from custody & can't be located			
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	2		
Interpreter scheduling conflicts			
Defense Expert scheduling			
police reports	2		
Attorney No Show			
Jail conference room availability/scheduling issues			
Processor error/clerical error			
Delay in Report Distribution			
Client or other required evaluation personnel have contracted or been	2		
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			
Pending			
Unknown	4		
Not Applicable <sup>2</sup>		17	33

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

<sup>2</sup>Not 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.

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

**Table 1c. Summary of Admission Delay Reasons**

TABLE 1c. continued SUMMARY OF ADMISSION DELAY REASONS <sup>1</sup>			
REASONS FOR DELAY IN DATABASE	In-Jail Evaluations	Inpatient Evaluations	Inpatient Restorations
Bed availability		8	17
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		9	16
Not Applicable <sup>2</sup>	12		

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

<sup>2</sup>Not 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 mature class member status data for August. September data, highlighted in light orange are “first look” and are subject to change over time as the data matures. Data highlighted in salmon indicate a data value that has matured and has been updated during the most recent reporting period.

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

TABLE 2. Class Member Status Western State Hospital – Jail-based Competency Evaluations <sup>1</sup>													
MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		within 14 days from order signature date <sup>5,6</sup>	within 14 days from receipt of order <sup>5,6</sup>	within 14 days from receipt of order or 21 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
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	328	0.6	0.0	0.8	0.0	n/a	n/a	331	12.6	13.0	82 %	86 %	89 %
Nov-20	246	0.7	0.0	1.0	0.0	n/a	n/a	257	12.2	13.0	79 %	81 %	85 %
Dec-20	242	0.5	0.0	0.6	0.0	n/a	n/a	267	13.0	13.0	74 %	84 %	85 %
Jan-21	266	0.4	0.0	0.5	0.0	n/a	n/a	245	12.8	13.0	76 %	79 %	80 %
Feb-21	224	0.4	0.0	0.5	0.0	n/a	n/a	248	12.0	13.0	85 %	89 %	90 %
Mar-21	345	0.5	0.0	0.6	0.0	n/a	n/a	310	10.9	12.0	91 %	94 %	95 %
Apr-21	325	0.5	0.0	0.6	0.0	n/a	n/a	334	12.0	13.0	83 %	89 %	90 %
May-21	296	0.6	0.0	0.7	0.0	n/a	n/a	289	12.0	13.0	87 %	89 %	91 %
Jun-21	336	0.6	0.0	0.7	0.0	n/a	n/a	312	12.4	13.0	80 %	83 %	86 %
Jul-21	376	0.5	0.0	0.6	0.0	n/a	n/a	363	12.8	13.0	80 %	83 %	87 %
Aug-21	427	0.5	0.0	0.5	0.0	n/a	n/a	390	13.4	13.0	76 %	79 %	85 %
Sep-21	393	0.4	0.0	0.4	0.0	4.4	3.0	399	14.4	14.0	65 %	70 %	79 %

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

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

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

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

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

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

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

TABLE 3. Class Member Status Western State Hospital – Inpatient Competency Services (Inpatient Evaluations) <sup>1</sup>													
MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		Percent complete within 7 days from order signature date <sup>5,6</sup>	Percent completed within 7 days from receipt of order <sup>5,6</sup>	Percent completed within 7 days from receipt of order or within 14 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Sep-20	7	0.7	0.0	0.4	0.0	n/a	n/a	7	62.0	75.0	0%	0%	0%
Oct-20	15	1.1	0.0	1.0	0.0	n/a	n/a	13	54.8	51.0	0%	0%	0%
Nov-20	15	0.8	0.0	0.8	0.0	n/a	n/a	11	29.8	37.0	9%	9%	9%
Dec-20	17	0.4	0.0	0.2	0.0	n/a	n/a	10	39.0	47.5	10%	10%	10%
Jan-21	14	0.3	0.0	0.1	0.0	n/a	n/a	15	63.3	70.0	0%	0%	0%
Feb-21	9	0.3	0.0	0.2	0.0	n/a	n/a	16	38.0	29.0	6%	6%	6%
Mar-21	14	0.4	0.0	1.0	0.0	n/a	n/a	14	63.8	76.0	0%	0%	0%
Apr-21	12	0.3	0.0	1.0	0.0	n/a	n/a	19	34.7	38.0	0%	0%	0%
May-21	9	0.1	0.0	0.1	0.0	149.0	149.0	10	41.0	38.0	0%	0%	0%
Jun-21	19	0.2	0.0	0.0	0.0	149.0	149.0	14	24.8	30.0	21%	21%	21%
Jul-21	16	0.3	0.0	0.2	0.0	149.0	149.0	19	22.8	24.0	11%	11%	11%
Aug-21	22	0.4	0.0	0.5	0.0	56.6	50.5	11	18.6	15.0	27%	36%	36%
Sep-21	17	0.4	0.0	0.3	0.0	32.6	29.0	16	29.1	28.0	25%	25%	25%

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

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

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

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

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

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

**Table 4a. Class Member Status Western State Hospital – Inpatient Competency Restoration Services**

TABLE 4a. Class Member Status Western State Hospital – Inpatient Competency Services (Restorations) <sup>1</sup>													
MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		Percent complete within 7 days from order signature date <sup>5,6</sup>	Percent completed within 7 days from receipt of order <sup>5,6</sup>	Percent completed within 7 days from receipt of order or within 14 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Sep-20	55	2.5	0.0	0.7	0.0	n/a	n/a	58	59.2	51.5	7%	7%	9%
Oct-20	95	2.4	0.0	0.8	0.0	n/a	n/a	63	43.3	32.0	14%	14%	16%
Nov-20	67	2.6	0.0	0.3	0.0	n/a	n/a	78	45.3	32.0	12%	9%	12%
Dec-20	59	1.6	0.0	0.3	0.0	n/a	n/a	61	37.1	37.0	11%	13%	13%
Jan-21	54	1.8	0.0	0.3	0.0	n/a	n/a	59	60.6	64.0	3%	3%	5%
Feb-21	86	1.2	0.0	0.2	0.0	n/a	n/a	70	46.3	29.0	23%	23%	23%
Mar-21	69	1.1	0.0	0.1	0.0	n/a	n/a	103	55.7	47.0	9%	11%	12%
Apr-21	79	1.3	0.0	0.1	0.0	n/a	n/a	89	40.5	47.0	11%	12%	12%
May-21	73	1.7	0.0	0.5	0.0	n/a	n/a	70	26.4	33.5	20%	20%	23%
Jun-21	64	3.1	0.0	0.8	0.0	n/a	n/a	69	39.1	42.0	4%	9%	9%
Jul-21	110	2.6	0.0	0.7	0.0	66.5	66.0	76	37.1	39.5	8%	8%	8%
Aug-21	125	1.8	0.0	0.5	0.0	47.6	45.0	76	33.2	30.0	9%	9%	9%
Sep-21	131	1.2	0.0	0.2	0.0	32.0	29.0	66	37.1	35.0	12%	14%	15%

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

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

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

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

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

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

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

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

MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		Percent complete within 7 days from order signature date <sup>5,6</sup>	Percent completed within 7 days from receipt of order <sup>5,6</sup>	Percent completed within 7 days from receipt of order or within 14 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Sep-20	42	2.2	0.0	0.5	0.0	n/a	n/a	46	23.5	20.0	9%	9%	9%
Oct-20	50	2.5	0.0	4.3	0.0	n/a	n/a	41	32.1	28.0	10%	10%	10%
Nov-20	23	2.0	0.0	3.7	0.0	n/a	n/a	30	26.4	23.0	17%	17%	17%
Dec-20	47	1.9	0.0	3.0	0.0	n/a	n/a	35	36.3	34.0	11%	11%	11%
Jan-21	35	1.6	0.0	2.5	0.0	n/a	n/a	31	49.1	41.0	3%	3%	3%
Feb-21	30	0.7	0.0	0.3	0.0	n/a	n/a	37	45.5	37.0	0%	0%	0%
Mar-21	36	0.9	0.0	0.3	0.0	n/a	n/a	47	40.1	42.0	6%	6%	6%
Apr-21	39	2.1	0.0	0.4	0.0	n/a	n/a	48	24.4	21.0	17%	17%	17%
May-21	26	2.5	0.0	0.4	0.0	n/a	n/a	26	26.5	25.0	8%	8%	8%
Jun-21	23	2.6	0.0	0.3	0.0	n/a	n/a	32	28.9	27.0	0%	0%	3%
Jul-21	19	3.7	0.0	0.2	0.0	n/a	n/a	18	38.7	40.0	0%	0%	0%
Aug-21	5	5.5	0.0	0.0	0.0	n/a	n/a	10	52.8	45.0	0%	0%	0%
Sep-21	0	0.1	0.0	0.0	0.0	n/a	n/a	10	53.2	56.5	0%	0%	0%

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

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

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

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

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

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

**Table 4c. Class Member Status OCRP**

TABLE 4c: Class Member Status Outpatient Competency Restoration Program (OCRP) <sup>1</sup>														
MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		Percent complete within 7 days from order signature date <sup>5,6</sup>	Percent completed within 7 days from receipt of order <sup>5,6</sup>	Percent completed within 7 days from receipt of order or within 14 days from order signature date <sup>5,6</sup>	
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median				
		Average	Median	Average	Median	Average	Median							
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	
Nov-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	
Dec-20	3	4.7	4.0	0.0	0.0	n/a	n/a	3	5.7	5.0	67%	100%	100%	
Jan-21	0	n/a	n/a	n/a	n/a	n/a	n/a	0	n/a	n/a	n/a	n/a	n/a	
Feb-21	0	n/a	n/a	n/a	n/a	n/a	n/a	0	n/a	n/a	n/a	n/a	n/a	
Mar-21	0	n/a	n/a	n/a	n/a	n/a	n/a	0	n/a	n/a	n/a	n/a	n/a	
Apr-21	0	n/a	n/a	n/a	n/a	n/a	n/a	0	n/a	n/a	n/a	n/a	n/a	
May-21	0	n/a	n/a	n/a	n/a	n/a	n/a	0	n/a	n/a	n/a	n/a	n/a	
Jun-21	0	n/a	n/a	n/a	n/a	n/a	n/a	0	n/a	n/a	n/a	n/a	n/a	
Jul-21	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-21	0	n/a	n/a	n/a	n/a	n/a	n/a	0	n/a	n/a	n/a	n/a	n/a	
Sep-21	0	n/a	n/a	n/a	n/a	n/a	n/a	0	n/a	n/a	n/a	n/a	n/a	

<sup>1</sup>The 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.

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

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

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

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

<sup>6</sup>According 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 <sup>1</sup>													
MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		within 14 days from order signature date <sup>5,6</sup>	within 14 days from receipt of order <sup>5,6</sup>	within 14 days from receipt of order or 21 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Sep-20	79	0.8	0.0	2.1	0.0	n/a	n/a	86	12.3	9.5	77%	77%	85%
Oct-20	74	1.3	0.0	1.9	1.0	n/a	n/a	81	14.1	11.0	77%	78%	86%
Nov-20	68	1.5	1.0	2.0	1.0	n/a	n/a	62	11.6	12.0	77%	79%	85%
Dec-20	50	1.6	1.0	2.1	1.0	n/a	n/a	62	14.1	12.5	58%	65%	71%
Jan-21	81	1.5	1.0	1.8	1.0	n/a	n/a	76	12.9	13.0	70%	76%	83%
Feb-21	80	0.8	0.0	1.5	1.0	n/a	n/a	72	12.8	13.0	65%	76%	82%
Mar-21	83	1.1	1.0	1.5	1.0	n/a	n/a	81	12.0	11.0	68%	78%	88%
Apr-21	62	0.9	1.0	1.4	1.0	n/a	n/a	76	14.0	13.0	70%	70%	80%
May-21	86	1.1	1.0	1.4	1.0	n/a	n/a	64	11.8	12.0	77%	88%	88%
Jun-21	102	0.9	0.0	1.1	1.0	n/a	n/a	99	12.5	13.0	63%	73%	83%
Jul-21	106	0.5	0.0	1.0	0.0	n/a	n/a	115	13.8	14.0	57%	58%	68%
Aug-21	120	0.7	0.0	1.2	0.0	37.5	37.5	96	13.2	14.0	58%	68%	76%
Sep-21	92	0.6	0.0	1.4	1.0	6.4	3.0	97	16.7	14.0	49%	54%	60%

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

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

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

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

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

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



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

TABLE 6. Class Member Status Eastern State Hospital – Inpatient Competency Services (Inpatient Evaluations) <sup>1</sup>													
MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		Percent complete within 7 days from order signature date <sup>5,6</sup>	Percent completed within 7 days from receipt of order <sup>5,6</sup>	Percent completed within 7 days from receipt of order or within 14 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Sep-20	11	0.7	0.0	7.3	0.0	n/a	n/a	15	48.2	62.0	13%	13%	13%
Oct-20	20	0.9	0.5	6.4	0.0	n/a	n/a	14	40.0	14.5	29%	36%	50%
Nov-20	12	0.5	0.0	7.1	0.0	n/a	n/a	7	86.1	84.0	0%	0%	0%
Dec-20	14	0.5	0.0	5.8	0.0	n/a	n/a	19	49.8	35.0	0%	0%	0%
Jan-21	17	0.5	0.0	0.6	0.0	n/a	n/a	10	49.1	40.5	10%	10%	20%
Feb-21	14	0.4	0.0	0.5	0.0	n/a	n/a	29	46.0	45.0	0%	0%	17%
Mar-21	23	0.6	0.0	0.6	0.0	n/a	n/a	18	27.6	22.5	11%	11%	17%
Apr-21	8	0.7	1.0	0.6	0.0	n/a	n/a	22	29.9	29.0	5%	5%	14%
May-21	10	1.2	0.0	1.2	0.0	n/a	n/a	8	19.3	26.0	13%	13%	25%
Jun-21	8	1.1	0.0	1.5	0.0	n/a	n/a	11	17.8	24.0	0%	0%	36%
Jul-21	8	0.5	0.0	1.2	0.0	n/a	n/a	8	9.4	9.0	13%	13%	13%
Aug-21	12	0.4	0.0	0.3	0.0	41.6	38.0	5	27.6	28.0	20%	20%	20%
Sep-21	12	0.5	0.0	0.6	0.0	24.0	28.0	4	38.3	41.0	0%	0%	0%

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

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

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

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

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

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

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

TABLE 7. Class Member Status Eastern State Hospital – Inpatient Competency Services (Restorations) <sup>1</sup>													
MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		Percent complete within 7 days from order signature date <sup>5,6</sup>	Percent completed within 7 days from receipt of order <sup>5,6</sup>	Percent completed within 7 days from receipt of order or within 14 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Sep-20	28	0.7	0.0	0.5	0.0	n/a	n/a	24	62.1	62.0	4%	4%	4%
Oct-20	19	0.9	0.0	0.2	0.0	n/a	n/a	7	36.3	36.0	0%	0%	0%
Nov-20	21	0.8	0.0	0.0	0.0	n/a	n/a	10	27.8	25.5	20%	20%	20%
Dec-20	11	0.7	0.0	0.2	0.0	n/a	n/a	36	73.4	81.0	3%	3%	3%
Jan-21	19	1.8	1.0	0.3	0.0	n/a	n/a	20	52.0	73.0	30%	30%	30%
Feb-21	15	3.2	1.0	1.5	0.0	n/a	n/a	19	66.5	81.0	11%	11%	11%
Mar-21	16	3.3	1.0	1.4	0.0	n/a	n/a	26	37.9	34.5	12%	12%	12%
Apr-21	17	2.9	1.0	1.7	0.0	n/a	n/a	19	34.5	37.0	5%	5%	11%
May-21	16	0.7	1.0	0.0	0.0	n/a	n/a	15	34.1	28.0	0%	0%	0%
Jun-21	22	0.8	0.0	0.0	0.0	n/a	n/a	23	25.8	29.0	0%	0%	0%
Jul-21	23	0.6	0.0	0.0	0.0	n/a	n/a	12	25.8	24.0	0%	0%	0%
Aug-21	24	1.0	0.0	0.0	0.0	45.2	43.5	19	25.9	22.0	0%	0%	5%
Sep-21	26	0.9	0.0	0.0	0.0	21.3	21.0	17	43.2	48.0	12%	12%	12%

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

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

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

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

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

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

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

TABLE 8. Class Member Status at WSH and ESH (Totals) – Jail-based Competency Evaluations <sup>1</sup>													
MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		within 14 days from order signature date <sup>5,6</sup>	within 14 days from receipt of order <sup>5,6</sup>	within 14 days from receipt of order or 21 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Sep-20	388	0.5	0.0	0.9	0.0	n/a	n/a	378	11.9	12.0	80%	82%	85%
Oct-20	402	0.8	0.0	1.0	0.0	n/a	n/a	412	12.9	13.0	81%	84%	89%
Nov-20	314	0.8	0.0	1.2	0.0	n/a	n/a	319	12.1	13.0	78%	81%	85%
Dec-20	292	0.7	0.0	0.9	0.0	n/a	n/a	329	13.2	13.0	71%	81%	83%
Jan-21	347	0.6	0.0	0.8	0.0	n/a	n/a	321	12.9	13.0	74%	78%	81%
Feb-21	304	0.5	0.0	0.8	0.0	n/a	n/a	320	12.2	13.0	81%	86%	88%
Mar-21	428	0.6	0.0	0.8	0.0	n/a	n/a	391	11.2	12.0	86%	90%	94%
Apr-21	387	0.6	0.0	0.7	0.0	n/a	n/a	410	12.3	13.0	81%	85%	88%
May-21	382	0.7	0.0	0.8	0.0	n/a	n/a	353	12.0	13.0	85%	89%	91%
Jun-21	438	0.7	0.0	0.8	0.0	n/a	n/a	411	12.4	13.0	76%	81%	85%
Jul-21	482	0.5	0.0	0.7	0.0	n/a	n/a	478	13.0	13.0	74%	77%	82%
Aug-21	547	0.6	0.0	0.7	0.0	37.5	37.5	486	13.4	13.0	73%	77%	83%
Sep-21	485	0.5	0.0	0.6	0.0	4.9	3.0	496	14.9	14.0	62%	67%	75%

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

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

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

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

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

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

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

TABLE 9. Class Member Status at WSH and ESH State Hospital (Totals) – Inpatient Services (Inpatient Evaluations) <sup>1</sup>													
MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		Percent complete within 7 days from order signature date <sup>5,6</sup>	Percent completed within 7 days from receipt of order <sup>5,6</sup>	Percent completed within 7 days from receipt of order or within 14 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Sep-20	18	0.7	0.0	4.6	0.0	n/a	n/a	22	52.6	63.5	9%	9%	9%
Oct-20	35	1.0	0.0	4.1	0.0	n/a	n/a	27	47.1	36.0	15%	19%	26%
Nov-20	27	0.7	0.0	4.0	0.0	n/a	n/a	18	51.7	37.0	6%	6%	6%
Dec-20	31	0.4	0.0	3.0	0.0	n/a	n/a	29	46.1	35.0	3%	3%	3%
Jan-21	31	0.4	0.0	0.3	0.0	n/a	n/a	25	57.6	61.0	4%	4%	8%
Feb-21	23	0.4	0.0	0.4	0.0	n/a	n/a	45	43.1	41.0	2%	2%	13%
Mar-21	37	0.5	0.0	0.8	0.0	n/a	n/a	32	43.4	39.0	6%	6%	9%
Apr-21	20	0.5	0.0	0.8	0.0	n/a	n/a	41	32.1	30.0	2%	2%	7%
May-21	21	0.5	0.0	0.5	0.0	149.0	149.0	18	31.3	31.0	6%	6%	11%
Jun-21	27	0.5	0.0	0.5	0.0	149.0	149.0	27	20.5	24.0	19%	19%	33%
Jul-21	24	0.4	0.0	0.5	0.0	149.0	149.0	27	18.9	23.0	11%	11%	11%
Aug-21	34	0.4	0.0	0.4	0.0	51.1	49.0	16	21.4	16.5	25%	31%	31%
Sep-21	29	0.4	0.0	0.4	0.0	28.9	28.0	20	30.9	34.0	20%	20%	20%

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

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

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

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

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

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

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

TABLE 10. Class Member Status at WSH and ESH State Hospital, and RTFs (Totals) – Inpatient Services (Restorations) <sup>1</sup>													
MONTH	Court Orders Signed <sup>2</sup>	Days from order signature to <sup>3</sup> :						Court Orders Completed <sup>4</sup>	Days from order signed to completion <sup>5</sup>		Percent complete within 7 days from order signature date <sup>5,6</sup>	Percent completed within 7 days from receipt of order <sup>5,6</sup>	Percent completed within 7 days from receipt of order or within 14 days from order signature date <sup>5,6</sup>
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Sep-20	125	2.1	0.0	0.6	0.0	n/a	n/a	128	46.9	36.5	7%	7%	8%
Oct-20	164	2.2	0.0	1.0	0.0	n/a	n/a	111	38.7	31.0	12%	12%	13%
Nov-20	111	2.1	0.0	0.5	0.0	n/a	n/a	118	39.0	29.0	14%	12%	14%
Dec-20	117	1.5	0.0	0.6	0.0	n/a	n/a	132	46.8	43.0	9%	10%	10%
Jan-21	108	1.7	0.0	0.7	0.0	n/a	n/a	110	55.8	54.0	8%	8%	9%
Feb-21	131	1.3	0.0	0.4	0.0	n/a	n/a	126	49.1	37.0	14%	14%	14%
Mar-21	121	1.3	0.0	0.3	0.0	n/a	n/a	176	48.9	43.0	9%	10%	10%
Apr-21	135	1.7	0.0	0.4	0.0	n/a	n/a	156	34.8	38.0	12%	13%	13%
May-21	115	1.7	0.0	0.4	0.0	n/a	n/a	111	27.5	28.0	14%	14%	16%
Jun-21	109	2.6	0.0	0.6	0.0	n/a	n/a	124	34.0	33.5	2%	5%	6%
Jul-21	152	2.5	0.0	0.5	0.0	66.5	66.0	106	36.1	37.5	6%	6%	6%
Aug-21	154	2.0	0.0	0.4	0.0	47.4	44.5	105	33.8	30.0	7%	7%	8%
Sep-21	157	1.1	0.0	0.2	0.0	30.5	28.0	93	39.9	44.0	11%	12%	13%

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

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

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

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

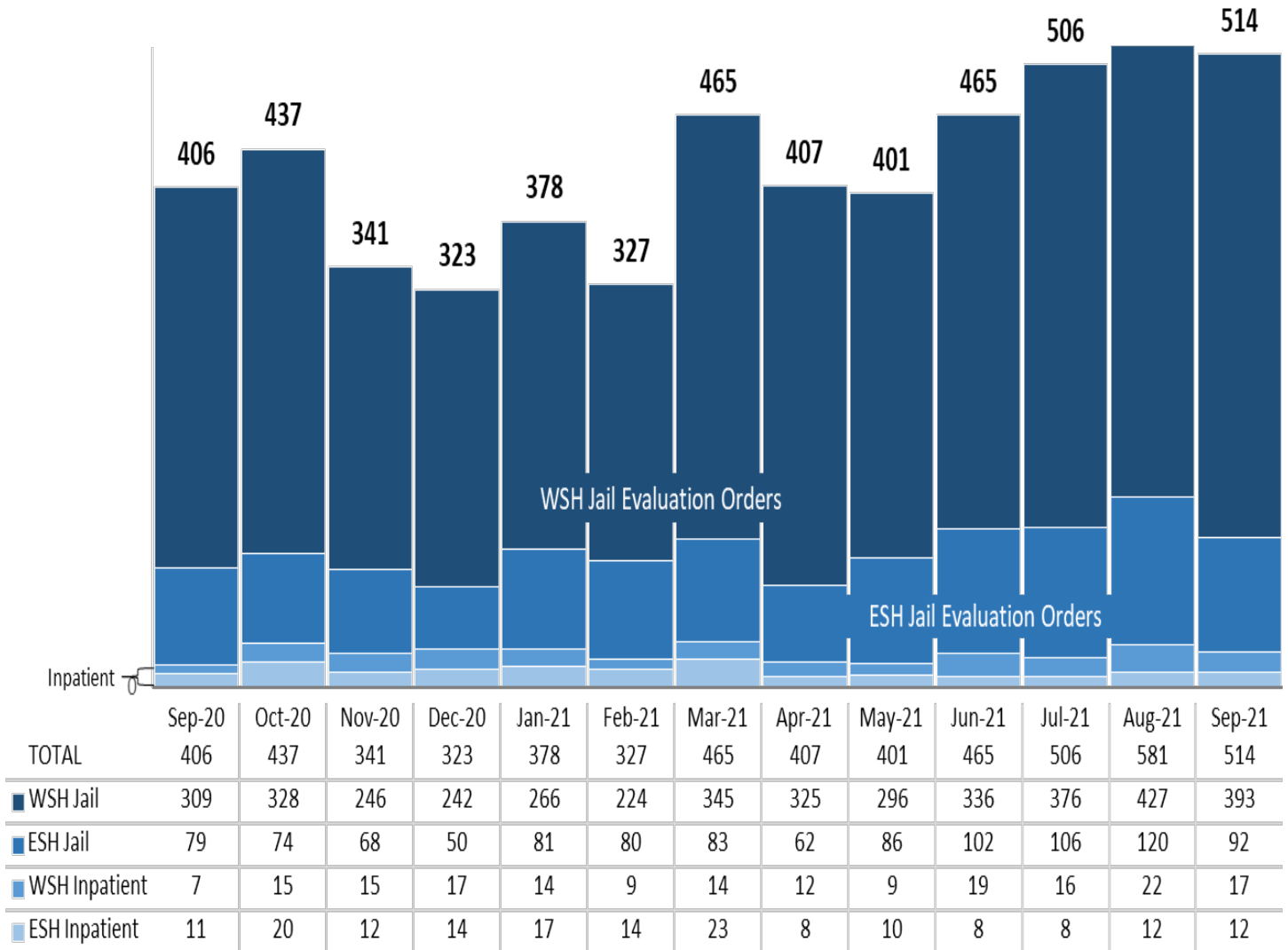
<sup>5</sup>From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: completion and the percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

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

## CLASS MEMBER STATUS DATA GRAPHS

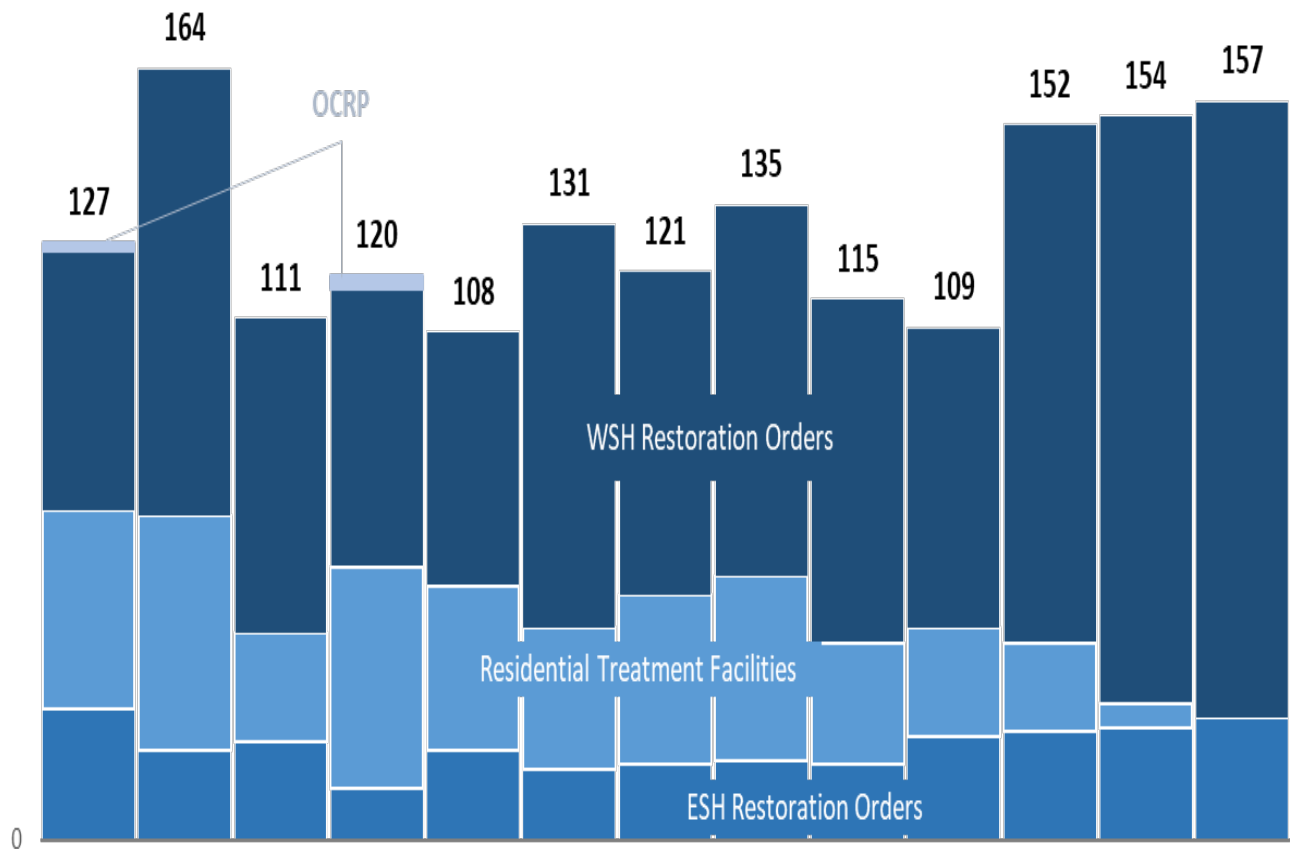
The following figures, Figures 1-6, present “first look” September data. The data are subject to change as they mature over a longer time horizon.

**Figure 1. Signed Evaluation Orders for Trueblood Class Members**



SOURCE: DSHS Facilities, Finance, and Analytics Administration, Research and Data Analysis Division, Forensic Data System, October 2021.

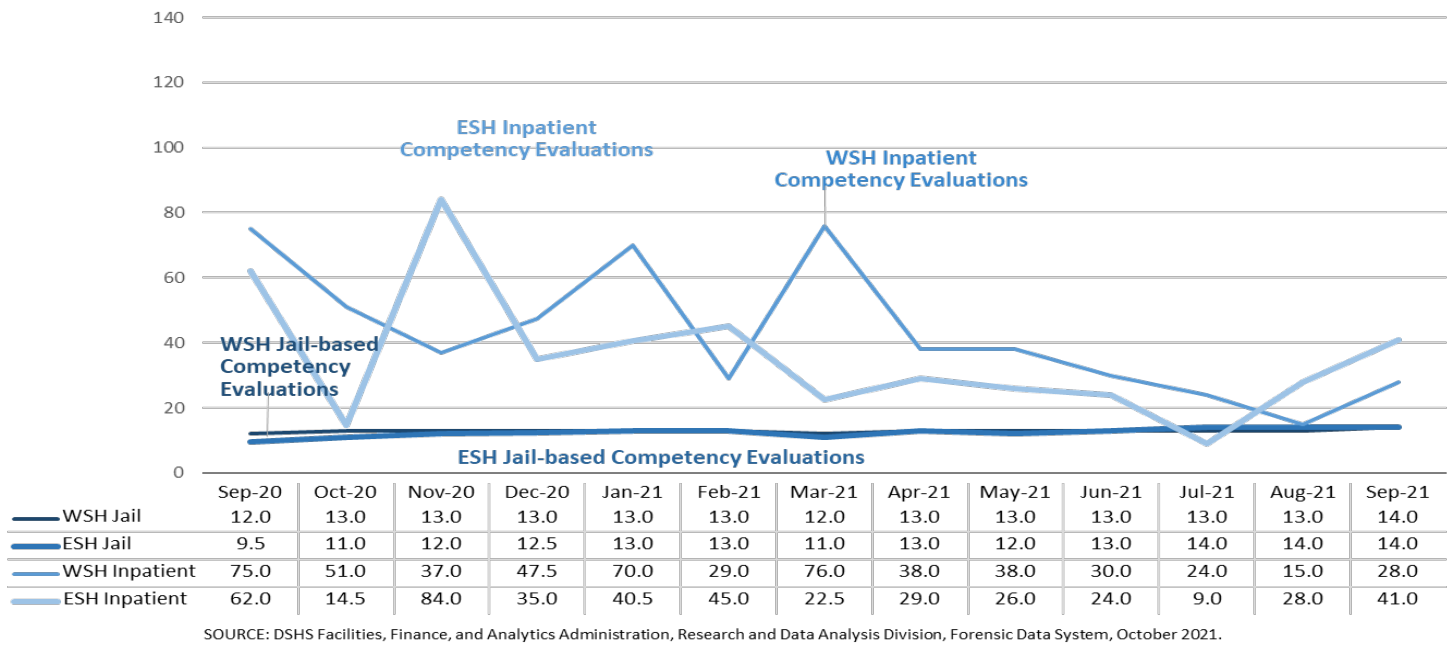
**Figure 2. Signed Restoration Orders for Trueblood Class Members**



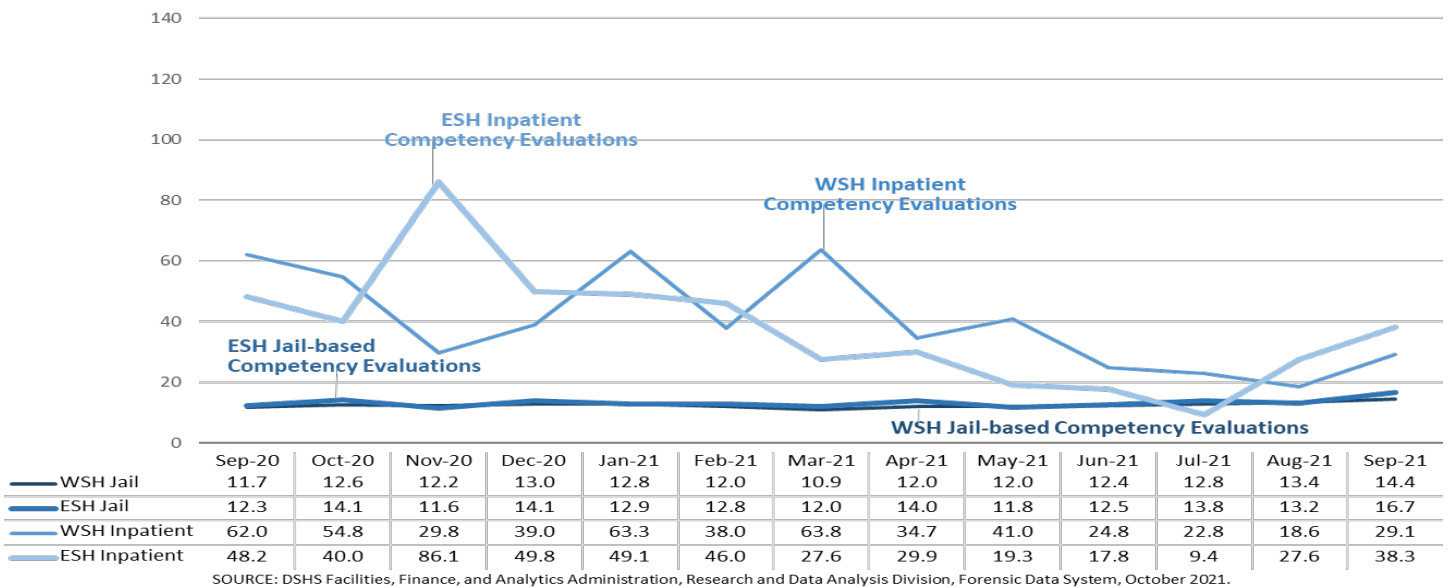
	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21
TOTAL	127	164	111	120	108	131	121	135	115	109	152	154	157
OCRP	2	0	0	3	0	0	0	0	0	0	0	0	0
WSH Restoration	55	95	67	59	54	86	69	79	73	64	110	125	131
RTF Restoration	42	50	23	47	35	30	36	39	26	23	19	5	0
ESH Restoration	28	19	21	11	19	15	16	17	16	22	23	24	26

SOURCE: DSHS Facilities, Finance, and Analytics Administration, Research and Data Analysis Division, Forensic Data System, October 2021.

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

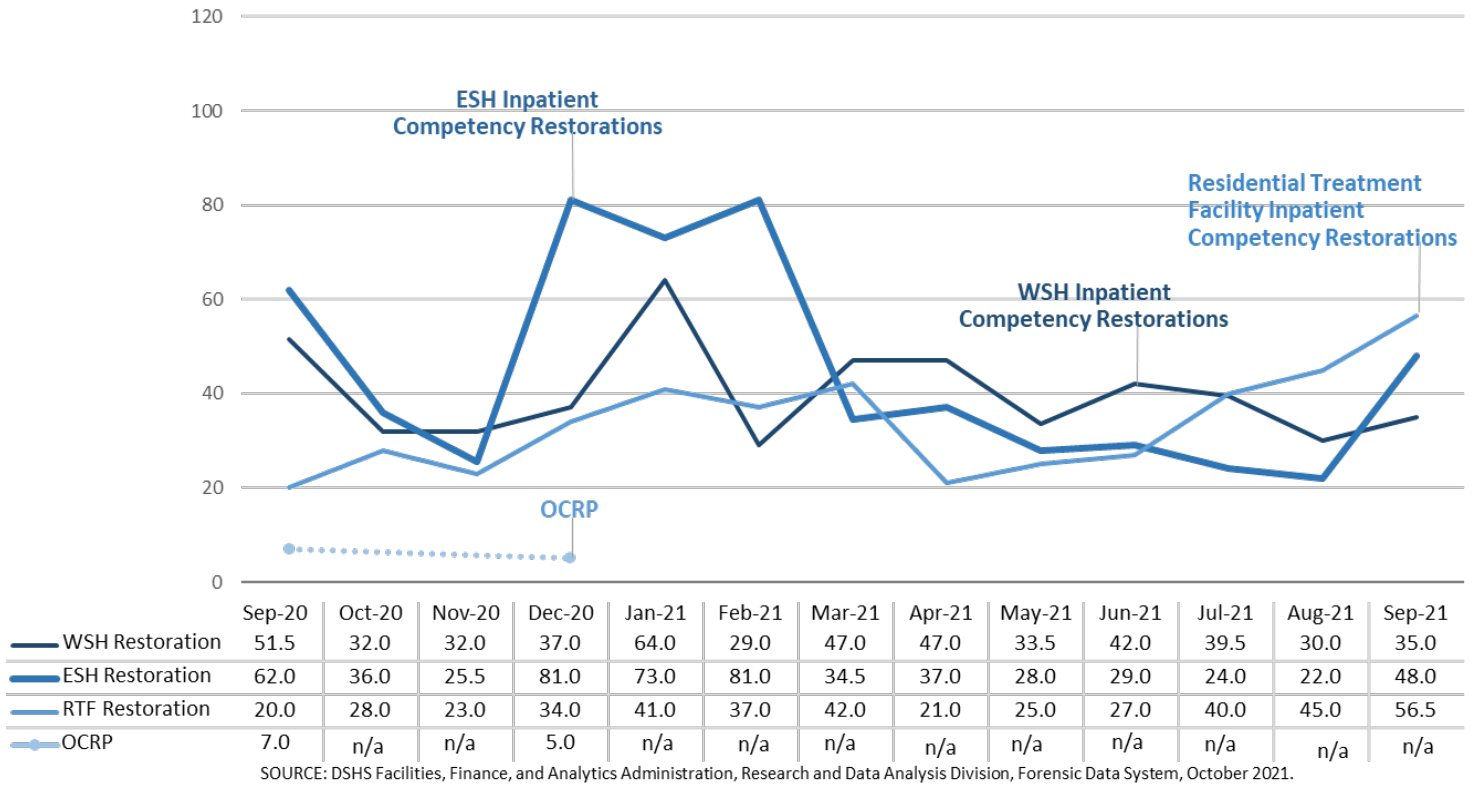


**Figure 4. Average Days from Court Order Signature to Completed Evaluation**

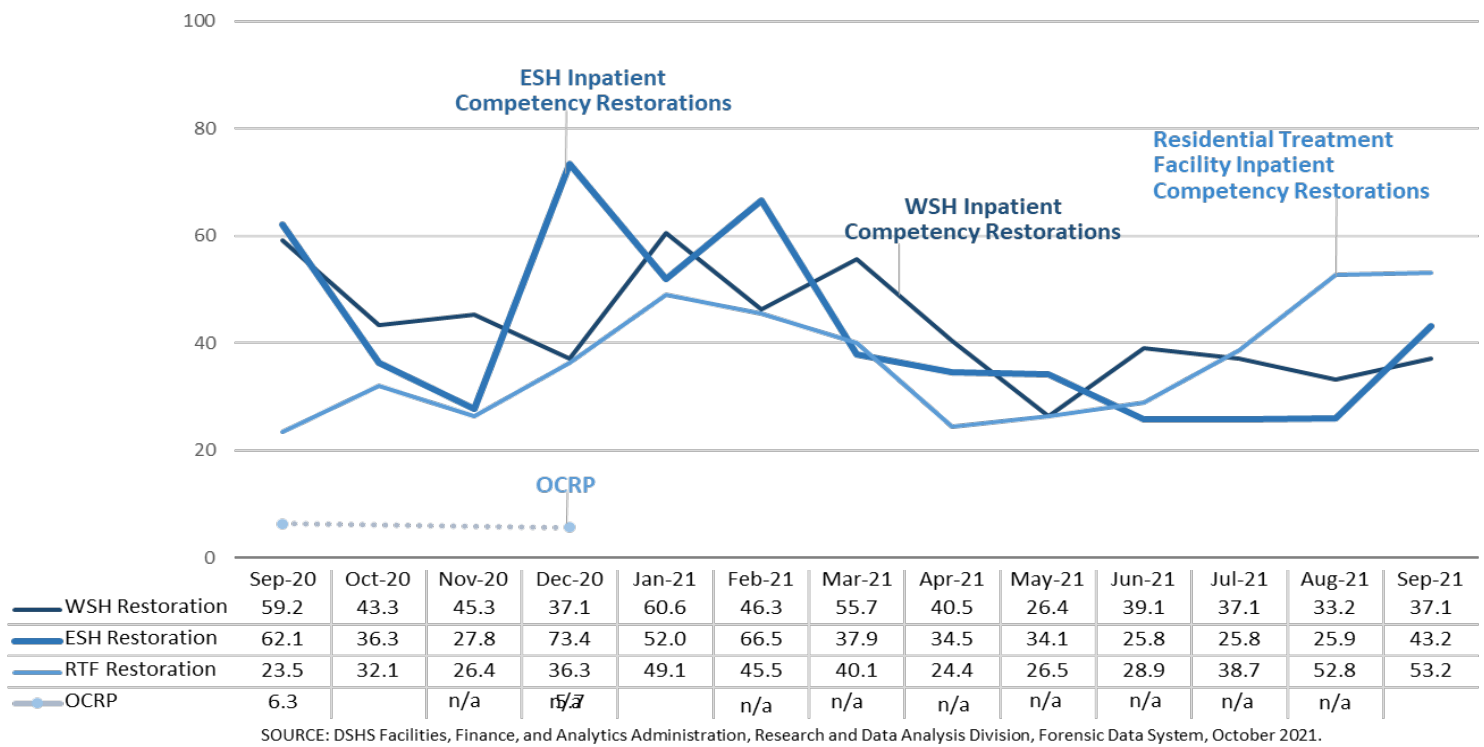




**Figure 5. Median Days from Court Order Signature to Completed Restoration**



**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. September 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

TABLE 11. TOTAL COMPLETED JAIL EVALUATION ORDERS BY MONTH COURT ORDER SIGNED <sup>1</sup>							
MONTH	Court Orders Signed <sup>2</sup>	14 DAYS OR LESS FROM ORDER SIGNATURE DATE <sup>3</sup>	PERCENT 14 DAYS OR LESS FROM ORDER SIGNATURE DATE <sup>3</sup>	ORDERS COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER <sup>3,4</sup>	PERCENT COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER <sup>3,4</sup>	ORDERS COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER OR WITHIN 21 DAYS FROM ORDER SIGNATURE DATE <sup>3,4</sup>	PERCENT COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER OR WITHIN 21 DAYS FROM ORDER SIGNATURE DATE <sup>3,4</sup>
Sep-20	388	308	79 %	320	82 %	337	87 %
Oct-20	402	324	81 %	337	84 %	349	87 %
Nov-20	314	224	71 %	247	79 %	255	81 %
Dec-20	292	219	75 %	234	80 %	245	84 %
Jan-21	347	282	81 %	296	85 %	300	86 %
Feb-21	304	238	78 %	256	84 %	272	89 %
Mar-21	428	355	83 %	375	88 %	387	90 %
Apr-21	387	326	84 %	342	88 %	352	91 %
May-21	382	301	79 %	319	84 %	322	84 %
Jun-21	438	329	75 %	341	78 %	366	84 %
Jul-21	482	370	77 %	384	80 %	414	86 %
Aug-21	547	342	63 %	372	68 %	419	77 %
Sep-21	485	218	45 %	228	47 %	238	49 %

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

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

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

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

**Table 12. Total Completed Inpatient Evaluation Orders by Month Court Order Signed**

TABLE 12. TOTAL COMPLETED INPATIENT EVALUATION ORDERS BY MONTH COURT ORDER SIGNED <sup>1,2</sup>							
MONTH	Court Orders Signed <sup>1</sup>	7 DAYS OR LESS FROM ORDER SIGNATURE DATE	PERCENT 7 DAYS OR LESS FROM ORDER SIGNATURE DATE	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER <sup>1,2</sup>	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER <sup>1,2</sup>	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE <sup>1,2</sup>	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE <sup>1,2</sup>
Sep-20	18	2	11%	2	11%	3	17%
Oct-20	35	4	11%	5	14%	6	17%
Nov-20	27	1	4%	1	4%	1	4%
Dec-20	31	1	3%	1	3%	1	3%
Jan-21	31	1	3%	1	3%	2	6%
Feb-21	23	1	4%	1	4%	6	26%
Mar-21	37	3	8%	3	8%	4	11%
Apr-21	20	0	0%	0	0%	2	10%
May-21	21	3	14%	3	14%	4	19%
Jun-21	27	3	11%	3	11%	7	26%
Jul-21	24	3	13%	4	17%	4	17%
Aug-21	34	4	12%	4	12%	4	12%
Sep-21	29	4	14%	4	14%	4	14%

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

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

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

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

**Table 13. Total Completed Restoration Orders by Month Court Order Signed**

TABLE 13. TOTAL COMPLETED RESTORATION ORDERS BY MONTH COURT ORDER SIGNED <sup>1,2</sup>							
MONTH	Court Orders Signed <sup>1</sup>	7 DAYS OR LESS FROM ORDER SIGNATURE DATE	PERCENT 7 DAYS OR LESS FROM ORDER SIGNATURE DATE	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER <sup>1,2</sup>	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER <sup>1,2</sup>	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE <sup>1,2</sup>	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE <sup>1,2</sup>
Sep-20	125	13	10%	13	10%	14	11%
Oct-20	164	11	7%	11	7%	12	7%
Nov-20	111	13	12%	11	10%	13	12%
Dec-20	117	12	10%	13	11%	13	11%
Jan-21	108	12	11%	12	11%	13	12%
Feb-21	131	15	11%	16	12%	16	12%
Mar-21	121	16	13%	17	14%	18	15%
Apr-21	135	19	14%	20	15%	21	16%
May-21	115	16	14%	16	14%	18	16%
Jun-21	109	3	3%	6	6%	7	6%
Jul-21	152	7	5%	7	5%	8	5%
Aug-21	154	7	5%	7	5%	7	5%
Sep-21	157	8	5%	9	6%	10	6%

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

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

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

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

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

TABLE 14. OUTPATIENT COMPETENCY RESTORATION PROGRAM COMPLETED RESTORATION ORDERS BY MONTH COURT ORDER SIGNED <sup>1</sup>							
MONTH	<i>Court Orders Signed</i> <sup>1</sup>	7 DAYS OR LESS FROM ORDER SIGNATURE DATE	PERCENT 7 DAYS OR LESS FROM ORDER SIGNATURE DATE	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER <sup>1,2</sup>	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER <sup>1,2</sup>	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE <sup>1,2</sup>	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE <sup>1,2</sup>
Sep-20	2	2	100 %	2	100 %	2	100 %
Oct-20	0	0	n/a	0	n/a	0	n/a
Nov-20	0	0	n/a	0	n/a	0	n/a
Dec-20	3	2	67 %	3	100 %	3	100 %
Jan-21	0	0	n/a	0	n/a	0	n/a
Feb-21	0	0	n/a	0	n/a	0	n/a
Mar-21	0	0	n/a	0	n/a	0	n/a
Apr-21	0	0	n/a	0	n/a	0	n/a
May-21	0	0	n/a	0	n/a	0	n/a
Jun-21	0	0	n/a	0	n/a	0	n/a
Jul-21	0	0	n/a	0	n/a	0	n/a
Aug-21	0	0	n/a	0	n/a	0	n/a
Sep-21	0	0	n/a	0	n/a	0	n/a

<sup>1</sup>The 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.

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

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

<sup>4</sup>According 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**

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### **2017-2019 BUDGET APPROPRIATIONS**

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 predesign, design, and renovation of WSH Building 29 to convert 60 civil beds into 42 additional forensic beds. Forty beds were built to allow seclusion rooms in the wards.

### **2019-2021 BUDGET APPROPRIATIONS**

DSHS, 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 and 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 BUDGET APPROPRIATIONS**

The COVID-19 pandemic emerged in Washington state in February 2020 and resulted in increased expenditures in response to the pandemic and in emergency budget reductions to partially counteract reduced revenues. Fortunately, as part of the biennial budget process COVID-19's fiscal impacts became less severe and federal resources were made available to DSHS. The funding listed below is for the 2021-2023 biennium unless otherwise noted:

1. \$27.4 million for two new 29-bed forensic competency restoration wards at WSH set to open in May 2022 and July 2022;
2. \$11.6 million to operate a new 16-bed civil long-term mental health inpatient facility in Grand Mound set to open November 2022;
3. \$5.8 million to operate a new 16-bed civil long term mental health inpatient facility in Vancouver set to open in April 2023;
4. \$9.3 million to remodel and operate Columbia Cottage at Maple Lane as a 30-bed facility for NGRI patients from WSH;
5. \$4.3 million and 20.5 FTEs to support human resources, pharmacy, security, laundry, food services and facilities for two new 25-bed competency restoration wards opened at ESH in fiscal year 2020 and 2021;
6. \$3.2 million and 12.0 FTEs for the Forensic Navigator Program to expand in to King County during Phase 2 of the Settlement Agreement;
7. \$3.2 million and 11.6 FTEs for Trueblood management support, to include project managers, records staff, research and data analysis support, and IT support;

8. \$52.9 million in capital funding for a 16-bed Behavioral Health Residential Treatment Facility at Maple Lane (operating costs listed in number 2 above) and a similar 48-bed facility in Clark County;
9. \$51 million for the design of a new 350-bed forensic hospital at WSH.

### **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 – SEPTEMBER 2021**

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

### **RECRUITING**

The recruiting numbers presented below are from September.

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

- Mental Health Technicians – 32 presented
- Licensed Practical Nurse – 1 presented
- Registered Nurses – 1 presented
- Psychiatric Social Worker – 7 presented
- Psychiatric Security Attendant – 17 presented

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

- Registered Nurses – 26 presented
- Licensed Practical Nurses – 12 presented
- Mental Health Technician – 75 presented
- Psychiatric Security Nurse – 2 presented
- Psychiatric Social Worker – 10 presented
- Institution Counselors – 34 presented
- Psychiatrist – 2 presented

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

- Registered Nurses – 4 presented
- Institution Counselors – 7 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. Maple Lane and FSCR are presented in their own table, Tables 15 and 16 in this section of the report.

**Table 15. Monthly RTF Data for Maple Lane**

Data Elements	Sep-20	Oct-20	Nov-20	Dec-20	2020 Avg	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	2021 Avg
Census (last day of month)	22	22	25	23	21.92	25	22	23	19	21	19	21	15	15	20.00
Total patients admitted	16	12	8	11	10.92	13	9	10	12	13	9	12	5	3	9.56
Completed and found competent (1st Restoration)	5	6	2	11	6.17	3	7	9	6	3	4	2	5	1	4.44
Not likely restorable (transported back to jail)	1	0	1	1	0.83	0	0	1	1	0	2	1	1	1	0.78
Court Order lapsed (Transported back to Jail)	0	1	0	0	0.08	0	0	0	0	0	0	0	0	0	0.00
Felony patients completed and found not likely restorable (1st Restoratio	0	0	0	0	0.17	0	0	0	1	0	1	0	0	0	0.22
Misdemeanor patients not restored (no further treatment by law)	4	0	1	1	0.92	0	1	0	1	1	1	2	1	1	0.89
Total transferred to State Hospital	1	1	0	0	0.50	3	0	0	3	0	3	1	1	1	1.33
For physical aggression	0	1	0	0	0.25	3	0	0	0	0	0	0	0	0	0.33
For sexually inappropriate behavior	0	0	0	0	0.00	0	0	0	1	0	0	0	1	0	0.22
For medical reasons	1	0	0	0	0.17	0	0	0	1	0	0	0	0	0	0.11
Due to court ordered treatment at SH	0	0	0	0	0.00	0	0	0	0	0	0	0	0	1	0.11
Other	0	0	0	0	0.08	0	0	0	1	0	3	1	0	0	0.56
Total patients eloped	0	0	0	0	0.00	0	0	0	1	0	0	0	0	0	0.11
Total recommended for early evaluation	2	2	0	4	1.83	2	3	1	2	0	2	2	2	2	1.78
Total recommended for 2nd 90-day order	0	3	4	3	2.33	4	2	1	3	4	4	4	5	2	3.22
Total recommended for 3rd 90-day order	0	0	0	0	0.00	0	0	0	1	0	0	0	0	0	0.11

**Table 16. Monthly RTF Data for Fort Steilacoom**

Data Elements	Sep-20	Oct-20	Nov-20	Dec-20	2019 Avg	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	2021 Avg
Census (last day of month)	20	25	25	20	20.58	22	22	21	22	19	21	21	18	10	19.56
Total patients admitted	10	11	5	4	7.50	11	9	7	11	5	10	9	5	3	7.78
Completed and found competent (1st Restoration)	2	2	1	3	3.33	1	2	0	4	3	5	2	2	3	2.44
Not likely restorable (transported back to jail)	1	2	1	1	0.67	1	0	0	4	1	0	2	0	0	0.89
Court Order lapsed (Transported back to Jail)	1	0	0	0	0.17	0	0	0	1	0	0	0	0	0	0.11
Felony patients completed and found not likely restorable (1st Restoration)	0	2	1	1	1.00	1	1	0	1	0	0	1	0	0	0.44
Misdemeanor patients not restored (no further treatment by law)	2	0	1	0	0.33	1	1	1	3	1	0	2	1	1	1.22
Total transferred to State Hospital	2	0	2	4	1.92	3	5	3	0	3	3	3	3	4	3.00
For physical aggression	0	0	0	1	1.00	1	3	1	0	1	0	1	3	0	1.11
For sexually inappropriate behavior	0	0	0	0	0.00	0	0	1	0	0	0	0	0	0	0.11
For medical reasons	0	0	0	0	0.08	0	0	0	0	0	1	0	0	0	0.11
Due to court ordered treatment at SH	1	0	2	3	0.50	1	1	0	0	2	2	2	0	4	1.33
Other	1	0	0	0	0.25	0	1	0	0	0	0	0	0	0	0.11
Total patients eloped	1	0	0	0	0.17	0	0	0	0	0	0	0	0	0	0.00
Total recommended for early evaluation	0	1	0	1	0.25	0	0	0	0	1	0	0	0	1	0.22
Total recommended for 2nd 90-day order	1	2	6	2	2.25	4	0	4	1	3	5	1	0	3	2.33
Total recommended for 3rd 90-day order	0	0	0	0	0.25	0	1	0	0	0	0	0	1	0	0.22

## TRUEBLOOD IMPLEMENTATION STEPS TAKEN AND PLANNED – AUGUST 2021

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

**Table 17. Trueblood Implementation Steps**

<b>Task</b>	<b>Key Milestones</b>	<b>Status / End Dates</b>	<b>Anticipated Outcome &amp; Assumptions</b>	<b>Results Achieved &amp; Barriers to Completion</b>
<b>Court Appointed Monitor Coordination</b>				
Monthly reports	Released September report.	Complete	<ul style="list-style-type: none"> <li>Maintain compliance with the Court.</li> <li>Use data to review and improve the provision of forensic services.</li> </ul>	Release of September report to stakeholders completed.
<b>Legislative Coordination</b>				
Implement Engrossed Substitute Senate Bill 6656: Funding applications.	Apply for funding from the Office of Financial Management from the Governor's Behavioral Health Innovation Fund relating to the state hospitals' forensic systems.	Complete	<ul style="list-style-type: none"> <li>Section 5(2) required OFM to contract with an external consultant to examine the current configuration and financing of the state hospital system and make recommendations on a number of different areas, including identification of the potential costs, benefits, and impacts associated with dividing one or both of the state hospitals into discrete hospitals to serve civil and forensic patients in separate facilities. The</li> </ul>	<p>The Select Committee for Quality Improvement in State Hospitals met on October 30, 2017 and on December 15, 2017. During the December 15, 2017 meeting, the department presented material on the three prosecutorial diversion programs funded in FY '18. Additionally, the Court Monitor provided an overview and update on the eight programs that received 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
			<p>consultant’s report was due to the Governor and Legislature by Oct. 1, 2016.</p> <ul style="list-style-type: none"> <li>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.</li> <li>Section 6 created the Governor's Behavioral Health Innovation Fund in the state treasury. Only the director of financial management or designee may authorize expenditures from that Fund, which are provided solely to improve quality of care, patient outcomes, patient and staff safety,</li> </ul>	<p><a href="https://www.governor.wa.gov/issues/issues/health-care-human-services/select-committee-quality-improvement-state-hospitals">https://www.governor.wa.gov/issues/issues/health-care-human-services/select-committee-quality-improvement-state-hospitals</a></p> <p>The committee sunset on July 1, 2019.</p> <p>The Behavioral Health Recovery System Transformation (BHRST) committee 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 23<sup>rd</sup> meeting:</p> <p><a href="https://app.leg.wa.gov/committeeschedules/Home/Documents/28006?//29870/01-01-2020/11-15-2020/Agenda///Bill/">https://app.leg.wa.gov/committeeschedules/Home/Documents/28006?//29870/01-01-2020/11-15-2020/Agenda///Bill/</a></p> <p>A meeting was not scheduled for November or December 2020. Additionally, no meetings have been held or scheduled in 2021.</p>

<b>Task</b>	<b>Key Milestones</b>	<b>Status / End Dates</b>	<b>Anticipated Outcome &amp; Assumptions</b>	<b>Results Achieved &amp; Barriers to Completion</b>
			and the efficiency of operations at the state hospitals.	
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.	Consult key partners including out of state agencies.	Ongoing	<ul style="list-style-type: none"> <li>Expanded pool of forensic evaluators would help improve timeliness. Licensure would provide quality assurance and create professional standards for forensic evaluators.</li> <li>Develop long-term certification of forensic evaluators, consistent with the Trueblood Court Monitor’s recommendations on mid- and long-term performance to implement a forensic certification program to sustain performance.</li> </ul>	Consultation with other states regarding certification of forensic evaluators continues through periodic videoconferences and follow-up contacts with key staff in other states. Information about credentialing from other states was shared with the forensic evaluator supervisors, and it was mentioned briefly in the April meeting. In May, the topic was on the agenda to discuss the next step(s) related to this process. Discussion focused on exploring further a peer review process and what associated training may look like for internal “credentialing.” One idea was to look at a forensic risk assessment training pilot to see if this could be a model for future “credentialing.” Forensic risk assessment training is planned for the month of August. Based on that pilot, the supervisors are working on a policy and will be sharing ideas in an upcoming multistate meeting in October for additional feedback.
<b>Labor Coordination</b>				
Engage labor leaders and members.	Conduct ongoing bi-monthly meetings with labor leaders.	Ongoing	<ul style="list-style-type: none"> <li>Discuss policy, budget and operational changes likely required to comply with the Trueblood requirements.</li> </ul>	DSSH 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. This workgroup met during the months of December, January, February, March, and April

<b>Task</b>	<b>Key Milestones</b>	<b>Status / End Dates</b>	<b>Anticipated Outcome &amp; Assumptions</b>	<b>Results Achieved &amp; Barriers to Completion</b>
			<ul style="list-style-type: none"> <li>Obtain staff necessary to safely support operation of additional forensic and civil beds at the state hospitals.</li> <li>Obtain necessary psychiatrists and physicians to supplement services proved by employees at WSH to safely support the operation of additional forensic and civil beds.</li> </ul>	<p>to produce recommendations for discussion in May 2021. The team met in May to discuss impasses, and it was decided to schedule two additional meetings with a facilitator to help keep the members on task and working on a new approach to extra duty pay. The two follow-up meetings were scheduled in June 2021. At the end of the second meeting, the group decided one more meeting in July was needed before returning to the bargaining table. The follow-up demand to bargain is being scheduled for September/October.</p> <p>Three additional demand to bargain notices have been filed related to 1. increasing evaluator reports from nine to 12 a month on the east side; 2. having evaluators follow patients from a jail-based evaluation to an inpatient evaluation; and 3. clarifying jail-based evaluation guidelines. All of these are being scheduled for meetings in September/October. All of these had initial meetings in September with follow-up meetings scheduled for October.</p>
<b>Data Collection and Fiscal Modeling</b>				
Monthly report data collection	Identify and obtain needed data.	Complete	<ul style="list-style-type: none"> <li>Obtain data for monthly reports and develop standardized reports to inform policy development and implementation.</li> </ul>	Data collection is ongoing. The Forensic Data System (FDS) technical team continues to meet bi-monthly with program (OFMHS) and data (Research and Data Analysis (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	<ul style="list-style-type: none"> <li>Ensure completeness and accuracy of wait list data.</li> </ul>	Data validation process is ongoing. IT project team, and RDA analysts, researched data anomalies to determine the cause, impact, and remediation needed.

<b>Task</b>	<b>Key Milestones</b>	<b>Status / End Dates</b>	<b>Anticipated Outcome &amp; Assumptions</b>	<b>Results Achieved &amp; Barriers to Completion</b>
Forensic Data System design/development	Analyze legacy applications data quality for potential data migration.	Complete	<ul style="list-style-type: none"> <li>• Integrated forensic system with consistent data entry and tracking of all class members from creation of court order for mental competency evaluation through completion of evaluation and/or restoration.</li> <li>• Provided capability for access by evaluators to client status changes, regardless of location, to reduce delays.</li> <li>• Provided a single platform for quality reporting, eliminating the variability currently inherent in leveraging legacy applications not meant for this purpose.</li> </ul>	
FDS Post-implementation Processes	Data migration clean-up	Complete	<ul style="list-style-type: none"> <li>• Some migrated data contained historical elements that needed to be cleaned up in the new system.</li> </ul>	Historical data load has been loaded into FDS and is available to approved roles.
	Usability	Complete	<ul style="list-style-type: none"> <li>• The system contains modules that align with roles of forensic activities</li> </ul>	The IT project team has modified search screens to show a more complete snapshot of the court order which has



<b>Task</b>	<b>Key Milestones</b>	<b>Status / End Dates</b>	<b>Anticipated Outcome &amp; Assumptions</b>	<b>Results Achieved &amp; Barriers to Completion</b>
			<p>and allows for controlled access by those same user roles. This controlled access prevents users from easily seeing activity for a court order that crosses many modules.</p> <ul style="list-style-type: none"> <li>• Modify search screens to reveal all court orders for individual clients.</li> <li>• To streamline the admissions process, create refined report for inpatient movement (Due In/Due Out Report).</li> </ul>	<p>eliminated the barriers resulting from role-based access. Roles are still limited in what data may be edited.</p> <p>System now directs users to all court 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"> <li>• Improve data integrity (date client status effectively changed, Forensic Evaluation Completion, Due In Date and Due Out Date)</li> <li>• Resolve missing data (CINs)</li> <li>• Built ability to link queues, status start dates and status due dates to changes in client data,</li> </ul>	<p>Client Status History table has been added to the database and user interface, user interface has been updated to capture updated Court Order Due Date for Forensic Evaluation Completion.</p> <p>New Client Identification Number confirmer has been trained, and we are requesting access to additional secondary systems for identifying clients.</p> <p>New structure for capturing client status has been released to users on April 17, 2019.</p>

<b>Task</b>	<b>Key Milestones</b>	<b>Status / End Dates</b>	<b>Anticipated Outcome &amp; Assumptions</b>	<b>Results Achieved &amp; Barriers to Completion</b>
			delay reasons and good cause extensions to changes in client status.	
	RDA reporting issues	Complete	<ul style="list-style-type: none"> <li>Ensure RDA is accounting for all/ correct elements when building reports.</li> </ul>	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.
<b>Human Resources</b>				
Hire OFMHS HQ positions.	Hire and onboard.	Complete	<ul style="list-style-type: none"> <li>Provide infrastructure for forensic services system and improve effective and timely provision of competency services.</li> </ul>	For evaluators, all authorized and required positions to enact Phase 1 have been filled.
Hire additional hospital ward staff.	Conduct targeted hiring events.	In progress	<ul style="list-style-type: none"> <li>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.</li> </ul>	Talent Acquisition recruiting efforts continue.  <b>See page 33 for additional details on recruiting.</b>
	Pursue contracting			
<b>Competency Evaluation</b>				
Build capacity for out-station sites.	Site agreements	N/A	<ul style="list-style-type: none"> <li>Increased capacity at out-station sites will reduce wait time for evaluation.</li> </ul>	Most evaluations at outstation sites and all evaluations at RTFs have been conducted by telehealth to reduce COVID-19 exposure risk for all parties. The tele-evaluations system is able to accommodate interpreter services and attorney requirements to be present. Data regarding the number of tele-evaluations is now more accurate due to improvements in FDS.
	Outstation sites operational	Complete		
Coordinate with forensic mental	Regular meetings with county stakeholders	Ongoing	<ul style="list-style-type: none"> <li>Stakeholder meetings will focus on topics where</li> </ul>	Quarterly meetings continue. Recently, an additional monthly meeting with Pierce County was added to

<b>Task</b>	<b>Key Milestones</b>	<b>Status / End Dates</b>	<b>Anticipated Outcome &amp; Assumptions</b>	<b>Results Achieved &amp; Barriers to Completion</b>
health system partners.			collaborative work is required to meet the requirements of the Trueblood decision.	<p>address outpatient restoration and forensic navigator processes. The ongoing larger stakeholder meeting in Pierce convened its most recent meeting on August 18. The October meeting was canceled, and the next meeting is scheduled for November 17.</p> <p>OFMHS is now partnering with King County’s Department of Behavioral Health and Recovery to convene a group to address issues related to Trueblood class members. This group has met monthly since May 2019, with the most recent meeting occurring September 27, 2021. The next meeting is set for October 18, 2021. Participants include police, behavioral health providers, shelter services, prosecutors, defenders, DRW, DSHS, and more.</p>
Continue current county-conducted evaluation system until 2018.	Establish quality criteria for evaluation reports.	Ongoing	<ul style="list-style-type: none"> <li>Obtain data needed from counties in order to meet Court ordered reporting requirements.</li> </ul>	<p>The Quality Assurance (QA) program for competency reports began November 1, 2017. Forensic evaluator supervisors utilize a manual of standards for competency evaluations and audit competency evaluation reports generated by their direct reports.</p> <p>During Q3 2021, 95.8-percent of forensic evaluators had competency evaluation reports audited by supervisors. A total of 99 competency evaluation reports were reviewed in Q3 2021. Q4 2021 data will be available in January 2022.</p>
Explore and pursue triage system possibilities.	Roll out Phase 2.	In progress	<ul style="list-style-type: none"> <li>Establish an efficient evaluation to identify individuals who need Inpatient services due to a serious mental health</li> </ul>	<p>As of September 30, 2021, OFMHS has received 570 triage referrals from jail staff/defense. Of those referrals, 354 were approved, 149 of the referrals were denied, 67 of these referrals were withdrawn before placement could be made. The data was recently</p>

<b>Task</b>	<b>Key Milestones</b>	<b>Status / End Dates</b>	<b>Anticipated Outcome &amp; Assumptions</b>	<b>Results Achieved &amp; Barriers to Completion</b>
			<p>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>	<p>reviewed and reconciled resulting in the updated numbers listed above.</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 2,798 calls have been made including 107 calls to jails in October 2021.</p>
<p>Develop Telehealth video-conferencing systems to assist in the completion of evaluations.</p>	<p>State-wide implementation and utilization of technology.</p>	<p>Ongoing</p>	<ul style="list-style-type: none"> <li>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.</li> </ul>	<p>The video conferencing system began operations in 2018 and is expanding its ongoing operations to include additional partners. OFMHS continues to educate courts and jails on this technology. With the COVID-19 pandemic, video technology is seeing more interest from entities seeking to continue evaluations while maximizing safety of clients and staff.</p> <p>OFMHS has reached out to 45 jails statewide to expand the use of the VC system. Working systems are utilized in the Colville Tribes Corrections Detention Facility and in the following county jails: Benton, Clallam, Cowlitz, Ferry, Franklin, Grant, Grays Harbor, Island, Klickitat, Kitsap, Mason, Okanogan, Pacific, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Whatcom, Whitman, and Yakima, and in the following local jails: Aberdeen, Issaquah, Kent, Puyallup, SCORE, and Yakima City jails.</p> <p>Court orders have authorized 3,038 telehealth evaluations since August 2018. 1.6% of attempts have been rejected by the client’s attorney or by the client</p>

<b>Task</b>	<b>Key Milestones</b>	<b>Status / End Dates</b>	<b>Anticipated Outcome &amp; Assumptions</b>	<b>Results Achieved &amp; Barriers to Completion</b>
				resulting in 2,990 completed telehealth evaluations. For the last 12 months, telehealth evaluations have averaged more than 170 evaluations per month. This data is reported through September 2021.
<b>Competency Restoration</b>				
SH addition 45 beds	Bed occupancy with forensic patients.	Complete	<ul style="list-style-type: none"> <li>Serves overall plan to add beds and expand State Hospital forensic bed capacity to meet Court ordered requirements.</li> </ul>	<p>The Legislature funded this request to operate 45 additional beds in building 27 FSCR and the South Hall 5 (S5) ward.</p> <p>S5 expanded from 15 beds to 30. S5 reached full patient capacity in fall 2018. FSCR opened as an RTF on WSH's campus in late August 2019.</p>
WSH addition 40 beds	Bed occupancy with forensic patients.	Complete	<ul style="list-style-type: none"> <li>Serves overall plan to add beds and expand State Hospital forensic bed capacity to meet Court ordered requirements.</li> </ul>	<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. The final configuration of the two wards resulted in 40 new beds instead of 42, in order to accommodate a seclusion room on each ward.</p> <p>COVID-19 limitations caused significant contractor and subcontractor construction delays. The Court granted an extension of time allowing additional time to complete construction and open the new wards to patients. E4 started admitting patients on February 8, 2021, and E3 started admitting patients on February 15, 2021.</p>

<b>Task</b>	<b>Key Milestones</b>	<b>Status / End Dates</b>	<b>Anticipated Outcome &amp; Assumptions</b>	<b>Results Achieved &amp; Barriers to Completion</b>
ESH addition of 50 beds	Bed occupancy with forensic patients.	Complete	<ul style="list-style-type: none"> <li>Serves overall plan to add beds and expand State Hospital forensic bed capacity to meet Court ordered requirements.</li> </ul>	<p>The legislature funded additional forensic beds in the 2019-2021 biennial budget. Over \$24 million was allocated to DSHS to renovate two 25-bed forensic competency restoration units at ESH.</p> <p>The ongoing COVID-19 emergency impacted construction activities. The Court granted a time extension, which allowed additional time to complete construction and open the new wards to patients. Ward 1N3 opened on June 1, 2020. Ward 3N3 opened on August 3, 2020.</p>
Provide Restoration Treatment at MLCRP.	Restore patients to competency.	Ongoing	<ul style="list-style-type: none"> <li>To meet or exceed the restoration rates at both state hospitals.</li> <li>Hard closure date set for June 30, 2024 unless trigger event occurs.</li> </ul>	<p>The quarterly length of commitment data pulled on July 27, 2021 shows that restoration patients on 45-day orders at MLCRP stay 37.3 days, which is comparable to the other two RTF's. This is shorter than both WSH and ESH. MLCRP's numbers are comparable with WSH for 90-day orders and shorter than ESH. MLCRP has a comparable length of stay to the other RTF's. MLCRP's average this quarter for a 90-day order was 80.2 days. <b>Table 15 on page 34 provides further details.</b></p> <p>On October 13, 2021, MLCRP's census was 19. Admissions are currently being monitored closely due to a staffing shortage on the DSHS side. Until more vacancies are filled the census will remain 20. To increase above 20, the director of RTFs will need to assess the staffing situation. As of October 13, there are eight permanent vacancies and six on-call vacancies. The program has one new hire in new employee orientation at WSH and three new hires starting NEO on October 15, 21. Recruitment efforts will continue until all permanent</p>

<b>Task</b>	<b>Key Milestones</b>	<b>Status / End Dates</b>	<b>Anticipated Outcome &amp; Assumptions</b>	<b>Results Achieved &amp; Barriers to Completion</b>
				<p>vacancies are filled. On-call vacancies are a continuous recruitment.</p> <p>The residential services manager, Tracy Grunenfelder, submitted his resignation on September 22, with an effective date of October 18. He accepted a job within OFMHS. The director of RTFs has been covering his job duties and will continue to do so until his position is filled. The recruitment was posted on October 8 and closes on October 17.</p>
Provide Restoration Treatment at YCRP.	Restore patients to competency.	Complete	<ul style="list-style-type: none"> <li>To meet or exceed the restoration rates at both state hospitals.</li> <li>Hard closure date set for December 31, 2021 unless trigger event occurs.</li> </ul>	The last patient was transferred out on July 26, 2021. The program officially closed on August 14. Comprehensive finished all close out activities per the ramp down plan.
Provide Restoration Treatment at FSCR.P.	Open Building 27.	Complete	<ul style="list-style-type: none"> <li>Identify alternate facility capacity to meet Trueblood compliance.</li> <li>Collaborate with Court parties to open the facility.</li> </ul>	<p>Dr. Yasuda started as the Medical Director on September 13. Dr. Park returned to his Physician 3 position on that date.</p> <p>On September 17, 2021, a newly hired RN4, Brenda Montgomery, began NEO. On October 11, she started working in the program. On October 1, 2021, a swing shift RN3 will begin NEO. Currently, the program is using two agency RNs. One of those positions is in the process of being filled permanently. The other position opens for recruitment soon.</p> <p>As of October 13, the census was 15. This is due to admissions being stopped in September due to staff</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				<p>testing positive for COVID. FSCRCP has been off COVID hold since the end of September and are slowly building up their census.</p> <p>The clinical services manager was filled on June 14 by Dr. Bolinger. The program has two psychologist 4 vacancies and the peer support position also remains vacant. The peer support recruitment remains open and interviews occur when there are applicants. The psychologist 4 recruitment remains open with little interest at this time. In October, the program reached an agreement with the union to use Locums temporarily. Leadership has been interviewing candidates and has found a possible full-time candidate and a possible part time candidate. They are currently working with the Locums agency and DOH on licensure and credentialing.</p> <p>It should be noted that both RTFs could face staffing challenges in October due to the Governor’s Proclamation regarding the COVID vaccine. The director of RTFs will update the Court Monitor and her team as the impacts become clearer.</p>
	Restore patients to competency.	Ongoing	<ul style="list-style-type: none"> <li>To meet or exceed the restoration rates at both state hospitals.</li> </ul>	The July 27 quarterly length of stay report indicates FSCRCP meets the restoration rates of the other RTF’s. FSCRCP has the shortest length of commitment for RTF’s for the 45-day felony competency orders averaging 34.0 days. <b>Table 16 on page 35 provides further details.</b>
Implementation of OCRPs	Diversion programs are operational.	Complete	<ul style="list-style-type: none"> <li>Development and implementation of OCRP in the Pierce, Spokane, and Southwest regions.</li> </ul>	OCRCP currently has three contracted providers in the Phase 1 regions. They are Frontier Behavioral Health (Spokane region), Greater Lakes Mental Health (Pierce region) and Lifeline Connections (Southwest region).



<b>Task</b>	<b>Key Milestones</b>	<b>Status / End Dates</b>	<b>Anticipated Outcome &amp; Assumptions</b>	<b>Results Achieved &amp; Barriers to Completion</b>
				<p>September 2021 presented with three new OCRP orders in the Phase 1 regions, compared to 8 orders in August 2021 (highest number of orders in a month since inception of the program). To date, OCRP has received 50 orders with 41 individuals who have completed intakes into the program. Two recently ordered participants are awaiting intake into the program.</p> <p>Eighteen of the 41 individuals who have been enrolled in OCRP have completed the program, with 11 of those restored to competency, six found incompetent to stand trial after OCRP and charges were dismissed, and one individual currently awaiting a court decision on competency.</p> <p>Removals from the program appear to have plateaued, averaging one removal per month for the past 3 months. Prior to that there had been no removal from the program since April 2021. A total of 13 participants have been removed due to non-compliance and have either had their charges dismissed or their conditional release revoked with subsequent admission to inpatient restoration.</p> <p>Data shows that most individuals ordered to OCRP have been coming from the personal recognizance caseload, meaning that these individuals had been in the community awaiting competency evaluation or inpatient restoration, and the court determined them appropriate for OCRP. For nearly all of these cases, a DSHS forensic navigator was not involved in the screening for the</p>

<b>Task</b>	<b>Key Milestones</b>	<b>Status / End Dates</b>	<b>Anticipated Outcome &amp; Assumptions</b>	<b>Results Achieved &amp; Barriers to Completion</b>
				<p>participants immediately prior to the order. Of the 50 individuals ordered to OCRP, only 18 of those were released directly from jail to the assigned forensic navigator. This number is significant because it means that individuals are being ordered to OCRP without confirmation from the forensic navigator that the person is recommended as clinically appropriate.</p> <p>Despite the barriers identified, HCA and DSHS work very diligently engaging court staff and forensic evaluators on OCRP and sharing information on the services provided and outcomes thus far. DSHS and HCA are also working closely with defense attorneys to identify those on their PR caseloads who they believe to be appropriate for OCRP, and we are requesting that they request the assistance of a forensic navigator before ordering those individuals to OCRP. DSHS and HCA are also looking at the idea of seeking OCRP orders for individuals who are currently in state hospital restoration units or restoration residential treatment facilities who are receiving a second competency order and assessing those individuals for appropriateness for OCRP services as an alternative to completing their entire restoration in a facility-based program.</p>
	<p>Diversion programs are operational.</p>	<p>Phase 2, July 2021 - June 2023</p>	<ul style="list-style-type: none"> <li>Development and implementation of OCRP in the King region.</li> </ul>	<p>Since March 2020, both HCA and DSHS have engaged King County in Phase 2 preparation by participating in the King County Competency Continuum workgroup as well as including representatives from King County in the OCRP Workgroup.</p>

<b>Task</b>	<b>Key Milestones</b>	<b>Status / End Dates</b>	<b>Anticipated Outcome &amp; Assumptions</b>	<b>Results Achieved &amp; Barriers to Completion</b>
				In July 2021, HCA continues reaching out to King County behavioral health provider agencies to inquire on their interest in providing OCRP in King County. To date, there are three agencies interested in providing the service. Two of those agencies are not licensed to work in King County. OCRP is continuing to target the one interested agency in King County while also contacting additional agencies to gauge interest.
County transport of patients	Coordinate with counties to develop transport protocols.	Ongoing	<ul style="list-style-type: none"> <li>Ensure timely transport of patients to support delivery of competency services as directed in court order.</li> </ul>	No issues were raised during this reporting period concerning county transport of patients.
<b>Diversion Alternatives</b>				
Implement 2E2SSB 5177 (2015) provisions for dismissal of charges & referral to treatment.	Diversion programs are operational.	Ongoing	<ul style="list-style-type: none"> <li>Prosecutor can dismiss criminal charges without prejudice &amp; refer to community-based mental health services.</li> </ul>	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 pursuant to the February 8, 2016 Court Order are shown in the table below.

**Table 18.** Court Order Status Updates

Requirements	Date	Status	Progress Notes
<b>1. Implement a triage system to sort class members waiting for in-jail evaluations by the acuity of their mental illnesses and their current manifestations, by the seriousness of their crimes, and by the amount of resources their cases require<sup>1</sup>:</b>			
C. Reporting on the implementation and effectiveness of the triage plan in Defendants' monthly reports to the Court Monitor (CM).	Beginning April 15, 2016	Ongoing	<b>Refer to 3C. &amp; 4C. below.</b>
<b>2. Eliminate the backlog of class members currently waiting for in-jail evaluations<sup>2</sup>:</b>			
E. Completing evaluations for all backlog cases (any patient waiting more than 14 days at the end of the month <sup>3</sup> ).	April 15, 2016	Ongoing	Of the 547 jail evaluation orders signed in July, 454 were completed within 14 days, which is 83.0%. This number is expected to rise as the data continue to mature.
<b>3. Implement a triage system to sort class members waiting for in-hospital evaluations by the acuity of their mental illnesses and their current manifestations, by the seriousness of their crimes, and by the amount of resources their cases require:</b>			
C. Reporting on the implementation and effectiveness of the triage plan in Defendants' monthly reports to CM.	Beginning April 15, 2016	Ongoing	For additional information, review the Task column in Table 17 labeled "Explore and pursue triage system possibilities" on pages 43-44.
<b>4. Implement a triage system to sort class members waiting for restoration services by the acuity of their mental illnesses and their current manifestations, by the seriousness of their crimes, and by the amount of resources their cases require:</b>			
C. Reporting on the implementation and effectiveness of the triage plan in Defendants' monthly reports to CM.	Beginning April 15, 2016	Ongoing	For additional information, review the Task column in Table 17 labeled: "Explore and pursue triage system possibilities" on pages 43-44.

<sup>1</sup> By agreement with the Court Monitor, long completed requirements 1.A. & 1.B. were removed from *Table 18* beginning with the April 2020 report.

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

<sup>3</sup> 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
<b>5. Report on the implementation status of the CMS Plan of Correction:</b>			
<p>B. Reporting on the implementation status in Defendants’ monthly reports to the Court Monitor.</p>	<p>Beginning March 15, 2016</p>	<p>Ongoing</p>	<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 and was shared with Dr. Mauch by defense counsel on November 3, 2017. As a result of a Court Order in April, the department worked with Plaintiffs and the Court Monitor in developing a bed capacity/expansion plan.</p> <p>WSH was resurveyed May 2018 and did not meet all the Conditions of Participation (COP) with CMS. WSH was decertified July 9, 2018. WSH continues to work using Functional Work Teams (FWTs) towards CMS certification. 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. A draft design of the new building has been developed. As of late 2020, pre-design work for the new hospital is complete. The legislature approved the department’s request for capital funding to advance the project through the full design phase, and the governor signed the capital budget into law.</p>
<b>6. Plan for recruiting and staffing 30 beds at WSH after compliance with CMS’s terms of participation is achieved in March:</b>			
<p>C. Reporting on the implementation status of the plan and timeframe in Defendants’ monthly reports to the Court Monitor.</p>	<p>Beginning April 15, 2016</p>	<p>Ongoing</p>	<p>DSHS entered into a second System Improvement Agreement with CMS. This agreement ran from November 2, 2017 to July 2, 2018 and 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>

<i>Requirements</i>	<i>Date</i>	<i>Status</i>	<i>Progress Notes</i>
			<p>WSH was resurveyed May 2018 and did not meet all the COP with CMS. WSH was decertified July 9, 2018. 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. A draft design of the new building has been developed. As of late 2020, pre-design work for the new hospital is complete. The legislature approved the department's request for capital funding to advance the project through the full design phase, and the governor signed the capital budget into law.</p>
<b>8. Remove barriers to the expenditure of the \$4.8 million in currently allocated diversion funds:</b>			
D. Executing contracts for implementation by the selected providers.	April 15, 2016	Complete	Prosecutorial diversion was funded for fiscal year 2022 effective July 1, 2021 – June 30, 2022.
<b>10. Develop a reliable and valid client-level data system to support better management and accountability of the forensic services system:</b>			
E. Implementing revisions to the existing system or initiating development of a new forensic data and management information system. (The decision was to initiate new system development efforts.)	January 2020	Complete	<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

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

- (1) Monetary sanctions – fines are imposed on a per class member, per day basis. On the 15<sup>th</sup> of every month, DSHS is required to submit contempt fines data to the Court. These data were submitted to the Court on August 15, 2016 and will be included in this report, when finalized each month, as Appendices I and J;*
- (2) Diversion plans – DSHS is ordered to develop, in consultation with the Court Monitor, plans for the expenditure of the contempt fines; and*
- (3) Wait time data – DSHS shall submit to the Court wait time data in a manner identical to the data submitted on June 17, 2016 in the declaration of Bryan Zolnikov. These data are included in this report in Tables 11-14.*

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

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*Pursuant to the August 15, 2016 Court Order, 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 FDS on August 1, 2018. The system's design provided for data elements needed to report to the courts including 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 FDS and its users 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. FAC also provides input during ongoing system optimization and future enhancements. Their recommendations are referred to the Governance Committee when appropriate. Governance meets at least monthly to monitor status, render final decisions on key topics, and prioritize future functionality ensuring that IT project work aligns with the needs of the Court and other stakeholders.



## APRIL 26, 2017 ORDER ADOPTING THE PARTIES' MEDIATED SETTLEMENT AGREEMENT

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As indicated below, the April 26, 2017 order partially adopting the parties' mediated settlement agreement, modified prior Court Orders regarding outreach, deadlines, and notification requirements specific to deadlines for evaluation and restoration services.

*Having reviewed the Joint Motion to Adopt the Mediated Settlement Agreement, Dkt. # 389, and discussed the proposed agreement with all Parties at the status hearings held on March 21, 2017 and April 18, 2017, the Court partially adopts the Agreement of the parties, and ORDERS that the prior orders of the Court are MODIFIED in the following manner:*

- (1) *Outreach: The Parties will jointly generate outreach documents to inform state courts of their statutory obligations to provide orders for competency services within twenty-four hours, as well as to inform the state courts of a summary of the Trueblood litigation and injunction. The Parties will jointly request the opportunity to present to Washington State judicial education programs and other outreach that the Parties jointly deem necessary to ensure third Parties are aware of their obligation to timely provide orders for competency services.*
- (2) *Deadline for in-jail evaluations: 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. Both sets of data will continue to be tracked in DSHS' monthly reports.*
- (3) *Deadline for in-patient evaluation and restoration services: DSHS shall admit class members for either inpatient competency evaluation or restoration within the shorter of either a) 7 days from receipt of order or b) 14 days from signature of order. Both sets of data will continue to be tracked in DSHS' monthly reports.*
- (4) *Receipt of Order: When sent electronically, orders are deemed received as of the time they are electronically transmitted to the Department.*
- (5) *Trigger Point for Notice to Plaintiffs' Counsel: If at any point in the future the percentage of orders received within 3 days of signature drops below the table 1 benchmarks for two consecutive months, the Parties shall meet and confer within 30 days to determine if there are factors within Defendants' control that are causing delays in order transmission that can be changed and/or if there are factors beyond the Defendants' direct control that the Parties can collaborate to influence in the direction of faster transmission of orders.*

**Table 1.** Percentage trigger for orders received within 3 days of signature

<b>Jail-based evaluation orders</b>	<b>93</b>
<b>Inpatient competency orders</b>	<b>85</b>

- (6) *Data Collection: Defendants will continue to track the data referenced in paragraphs 2, 3, and 5, above, and currently reflected in Appendix A of DSHS' Monthly Reports. Additionally, when DSHS issues its monthly reports, it will simultaneously provide the data from Appendix A in Excel format to Plaintiffs.*

*The Court ORDERS that from this point forward, calculation of compliance with the Court’s Injunction, Dkt. #131, calculation of compliance with the Modified Injunction as to In-jail Evaluations, Dkt. #303, calculation of contempt under the Order of Contempt, Dkt. #289, and any other aspect of the Court’s prior rulings that are not consistent with the Agreement text set forth above, are MODIFIED to be in conformance with this Order.*

The enumerated orders above, especially numbers two, three, and five, can be viewed in data presented within the monthly *Trueblood* report or in data displayed in the appendices that follow. For item two, the applicable data can be reviewed in Appendix A, Tables 2, 5, 8. For item number three, the data can be viewed in Appendix A, Tables 3, 4a., 4b., 4c., 6, 7, 9, 10. Item number five’s data is viewable in the non-numbered tables available in Appendix G.

## APPENDICES

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***Appendices A-G: Data Tables; Class Member Evaluation/Restoration Information; Class Member Restoration Information for the Maple Lane and 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 H: Outliers and Delay Comments***

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

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

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

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

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

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

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