

Trueblood Programs



Cassie Cordell Trueblood, et al., v. Washington State Department of Social and Health Services, et al. Monthly Report to the Court Appointed Monitor

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Trueblood Programs



Background

On April 2, 2015, the Court ordered the Department of Social and Health Services to file monthly reports with the Trueblood Court Monitor. DSHS reports on the efforts to comply with Court Orders to provide timely competency evaluation and restoration services to Class Members, as indicated below:

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 Feb. 8, 2016. Additional orders were issued on July 7, 2016, Aug. 15, 2016, and April 26, 2017. Narrative status updates on these orders begin on **page 68**.

This monthly report is submitted on February 28, 2025 and primarily covers January 2025 activity. Additionally, this report displays Class Member data for competency services in two periods: December 1, 2024-December 31, 2024, and January 1, 2025-January 31, 2025. The December data are considered “mature,” and the January data are a “first look” data set. In addition to the mature and first-look data discussed above, Tables 3-11 also show 11 additional months of mature data for a total of 13 months of mature and first-look data contained in each table. April 2015 is the baseline month for data analysis; please refer to Appendix A to view an entire set of the data contained in Tables 3-11.

The data are dynamic, and the most recent results generally will continue to change and become more reliable over time as the data mature. Likewise, due to the Trueblood lawsuit, case prioritization, civil conversion cases, triage cases, periodic lengthy wait times and other considerations, some cases will not show as completed cases in the data until the cases are resolved. The department cautions against comparing the data in this publication to other department publications due to differences in data maturity, time frames, databases, and other sourcing parameters that may not allow for a direct comparison.

Evaluation and restoration information specific to individual Class Members appears in this report’s appendices.

Class Member Status Summary Information

Infectious Disease Impacts to Facility Admissions

As of Aug. 15, 2024 BHA’s Western State Hospital, Eastern State Hospital, and DSHS’ Behavioral Health & Treatment Center – Steilacoom Unit inpatient facilities are operating without any COVID-19 related admissions restrictions.

The Washington State Department of Health no longer requires COVID-19 data tracked at the facility or at the county-level. Data is now aggregated to [larger regional areas](#). ***This report no longer includes monthly COVID-19 infection numbers by facility. If a BHA facility has admissions impacted by COVID-19 or another infectious disease in the future, any restrictions or closures will be reported. Final counts of reported COVID-19 cases in BHA facilities are available in the [October 2024 Court Monitor Report](#).***

Analysis of Mature Data: May 1, 2015 Through Dec. 31, 2024

Data 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-December 2024
 - WSH: 317.8
 - ESH: 77.4
 - Both hospitals: 395.1
- Average monthly inpatient evaluation orders signed for April 2015-December 2024
 - WSH: 12.8
 - ESH: 8.7
 - Both hospitals: 21.5
- Average monthly restoration orders signed for April 2015-December 2024
 - WSH: 87.5*
 - ESH: 22.2
 - Both hospitals: 128.8*
 - Hospitals plus Behavioral Health and Treatment Center (BHTCs): 157.9
- Average monthly BHTC restoration orders signed for August 2018-December 2024
 - BHTCs: 29.1**
- Average monthly OCRP restoration orders signed for July 2020-December 2024
 - Phase 1 and 2 OCRP (All Locations): 1.6***
- Average monthly OCRP restoration orders signed since the start of Phase 2 OCRP services, November 2022-December 2024
 - Phase 1 and 2 OCRP (All Locations): 2.6***

Referral Notes:

* From April 2015-July 2018, this figure also includes restoration orders for the BHTC's; therefore, these figures exceed the WSH figures, and the two hospital figures combined.

** Prior to Aug. 2018, BHTC data was combined with WSH. From Aug. 2018 onward, BHTC data is reported separately. Yakima CRP closed to patients on July 26, 2021.

*** OCRP treatment began in Phase 1 regions between July 1-Sept. 1, 2020, and in the Phase 2 region on Oct. 31, 2022. Only clients whose wait for treatment was jail-based are included in this data measure.

Summary Points Related to Orders and Timeliness Based on Mature December Data

Orders:

- For December 2024, the number of jail-based evaluation orders assigned to WSH increased significantly by 84 orders to 438 (23.7%).
- ESH's jail-based evaluation orders also increased significantly in December 2024, from 78 orders to 99 orders (26.9%).
- In December, inpatient evaluation orders at WSH increased from 10 to 13. ESH orders for December increased from nine orders to 10 for the month. Due to the small numbers of orders using the inpatient evaluation legal authority, there are often dramatic swings, in both the positive and negative directions, in the data from month-to-month.
- WSH received 126 restoration orders in December, a significant increase (22.3%) from November's 103 orders. ESH had 35 orders in December, also a significant increase (16.7%) compared to November's 30 orders.
- In November's BHTC data, at 60 days data maturity, the BHTCs received a total of 6 restoration orders. This month, the December BHTC data is the initial month of mature data. At this time, 16 restoration orders were received. The December BHTC order numbers may change further as the BHTC restoration order data tends to update more slowly than other facilities, and as a result may continue to change over the next 45-60 days.

Referral Notes:

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

Wait Times:

- Regarding jail-based 14-day evaluation completion times, WSH stayed steady at 12.2 days on average in December 2024, from order to completion. ESH evaluation times decreases moderately, by 8.5 percent to 10.8 days in November. The combined average, across the system, decreased 1.6-percent to 11.9 days on average to completion. Systemwide on time completion stayed steady at 90-percent in December.
- The average inpatient evaluation admission wait time at WSH was 5.1 days in December, a significant decrease from 6.7 days in November. ESH's average wait time in December also decreased significantly to 4.6 days on average from 7.0 days in November. 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 were 5.9 days in December, a moderate decrease (-8.7%) from 6.4 days in November. In contrast, the ESH average admission wait-time increased moderately to 7.3 days in December, from 6.6 days in November.

Timeliness:

- At WSH, overall timeliness for jail-based evaluation completion in December 2024 was an average 88-percent completion rate within 14-days from receipt of order. ESH's timely completion in December was a **100 percent** on time completion rate.
- At WSH, December's overall timeliness for inpatient evaluation admissions increased significantly to a **100 percent** on time completion rate within 7-days from receipt of order. ESH's on time completion rate also increased to a **100 percent** on time completion rate.
- At both hospitals and the BHTCs combined, overall timeliness for inpatient restoration admissions for December increased slightly to a 94 percent completion rate within 7-days.

Outliers:

For a full definition of outliers as it applies to Trueblood, please see the "Data Tables 2A. Through 2C." subsection.

- In December, the total number of outliers among the three legal authorities (in-jail evaluations, inpatient evaluations, and inpatient restorations) increased from four to five. In-jail outliers increased from two to four, inpatient evaluations outliers remained at zero, and inpatient restorations outliers decreased from two to one.

- In December, the maximum days waiting for an in-jail evaluations outlier decreased to 35 days from 64.
- Again, in December, there were zero inpatient evaluations outliers.
- In November, the maximum wait time for an inpatient restorations outlier increased from 74 days to 77 days.

Civil Conversion Cases

Between March 2023 and February 1st, 2025, 196 civil conversion patients from ESH and WSH transferred to HCA contracted Long-Term Civil Commitment (LTCC) community beds. The state hospitals are in routine communication with these facilities regarding their bed availability and transfer efforts have become a reliable tool to assist the state hospitals in keeping pace with the number of forensic patients that convert to a civil order. However, each of these facilities have varying limitations on the patient population that they can serve, with disqualifying criteria including complex medical needs, neurocognitive disorders, traumatic brain injuries, and significant behavioral issues.

Patients with a special finding of violent felony (SFVF, formerly HB 1114) determination are not eligible for transfer to LTCC facilities and are currently only treated at the state hospitals. As of February 1st, 2025, there were 13 SFVF patients at Eastern State Hospital and 49 SFVF patients at Western State Hospital. Table 1 outlines the LTCC civil conversion transfer efforts:

Table 1. Long Term Civil Commitment: Civil Conversion Patients Transferred from State Hospitals to Community Beds

LTCC Transfer Facility	Q1-2023	Q2-2023	Q3-2023	Q4-2023	Q1-2024	Q2-2024	Q3-2024	Q4-2024	All Time Totals
Astria					2	1			
Navos			12	2	5	19	6	2	1
Recovery International			3	2	4	6	2	4	1
South Sound Behavioral Health		8							
Telecare			2	1	2	7	15	18	1
University of Washington							12		2
Wellfound	3	11	8	2	13	12	5	2	
Quarterly Totals:	3	19	25	7	26	45	40	26	5

Data Source: Behavioral Health Administration - Civil Order Tracking System, Feb. 6, 2025.

Outlier Cases (Mature) November 2024

Data Tables 2A. Through 2C.

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 December 2024.
- 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 2a. 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	4	22	35
Inpatient Evaluations	0	0	0
Inpatient Restorations	1	77	77

Table 2 continues below and details reasons contributing to delays in completing evaluations for outlier cases. above lists the Trueblood definition of “Outlier Cases.”

Table 2b. Summary of Evaluator Delay Reasons

TABLE 1b. Continued SUMMARY OF EVALUATION DELAY REASONS ¹			
REASONS FOR DELAY IN DATABASE	In-Jail Evaluations	Inpatient Evaluations	Inpatient Restorations
Defendant No Show			
Defendant Reschedule			
Evaluator availability			
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			
Interpreter scheduling conflicts			
Defense Expert scheduling			
police reports			
Attorney No Show			
Jail conference room availability/scheduling issues			
Processor error/clerical error	1		
Delay in Report Distribution			
Client or other required evaluation personnel have contracted or been ex			
No COVID-safe option to conduct the evaluation			
Delay in Submission of Evaluation Report due to Staff Furlough			
Order Processing Delay due to Staff Furlough			
Late Assignment			
Pending			
Unknown	2		
Not Applicable ²			1

Table 2b Data Notes:

¹**Continued summary of evaluation delay reasons** 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.

²**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 2 concludes with a focus on the reasons outlier cases experience delays prior to and during the inpatient services admissions process.

Table 2c. Summary of Admission Delay Reasons

TABLE 1c. continued SUMMARY OF ADMISSION DELAY REASONS ¹			
REASONS FOR DELAY IN DATABASE	In-Jail Evaluations	Inpatient Evaluations	Inpatient Restorations
Bed availability			
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			1
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			
Jail Cannot Provide Transport			
Unknown			
Not Applicable ²	4		

Table 2c Data Notes:

¹**Continued summary of evaluation delay reasons** 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.

²**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

Data Tables 3 Through 5B.

The following series of tables present 13 months of Class Member status data. Descending from the top of the table, the first 12 months of data, ending with December 2024, are mature Class Member status data. At the bottom of the table, January’s 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. To view the complete set of Class Member status data, from April 2015 to present, please refer to Appendix A.

Table 3. Class Member Status Western State Hospital - Jail-based Competency Evaluations

TABLE 3. Class Member Status Western State Hospital – Jail-based Competency Evaluations ¹													
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		within 14 days from order signature date ^{5,6}	within 14 days from receipt of order ^{5,6}	within 14 days from receipt of order or 21 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Jan-24	419	0.3	0.0	0.9	0.0	n/a	n/a	438	15.9	14.0	62 %	66 %	67 %
Feb-24	376	0.4	0.0	1.0	0.0	n/a	n/a	395	14.4	14.0	70 %	75 %	76 %
Mar-24	408	0.4	0.0	0.8	0.0	n/a	n/a	390	13.7	14.0	73 %	76 %	76 %
Apr-24	463	0.4	0.0	0.7	0.0	n/a	n/a	450	12.8	13.0	80 %	85 %	85 %
May-24	461	0.5	0.0	0.8	0.0	n/a	n/a	477	13.1	13.0	78 %	81 %	82 %
Jun-24	445	0.4	0.0	0.7	0.0	n/a	n/a	410	13.5	14.0	73 %	80 %	81 %
Jul-24	494	0.4	0.0	0.5	0.0	n/a	n/a	511	13.2	14.0	77 %	82 %	84 %
Aug-24	486	0.4	0.0	0.6	0.0	n/a	n/a	483	12.3	13.0	81 %	86 %	87 %
Sep-24	451	0.3	0.0	0.7	0.0	n/a	n/a	450	12.9	13.0	83 %	86 %	87 %
Oct-24	500	0.3	0.0	0.6	0.0	n/a	n/a	521	12.8	13.0	81 %	85 %	86 %
Nov-24	354	0.3	0.0	0.5	0.0	n/a	n/a	385	12.2	13.0	84 %	87 %	87 %
Dec-24	438	0.3	0.0	0.7	0.0	n/a	n/a	419	12.2	13.0	84 %	88 %	88 %
Jan-25	444	0.2	0.0	0.6	0.0	3.4	3.0	446	12.3	13.0	79 %	81 %	81 %

Table 3 Data Notes:

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

²Court Orders Signed is the number of court orders signed in the specified month for those individuals waiting for competency services in jail and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month due to a class member entering jail from the community while awaiting a court-ordered competency service. This

number does not include court orders signed for individuals waiting for competency services outside of jail.

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

⁴**Court Orders Completed** is the number of cases completed in the month specified. Cases are completed if the 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 class member populations provided with monthly court report submissions. Counts since AUG-18 are from data recorded in the BHA Forensic Data System.

⁵**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.

⁶**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 4. Class Member Status Western State Hospital - Inpatient Competency Evaluation Services

TABLE 4. Class Member Status Western State Hospital – Inpatient Competency Services (Inpatient Evaluations) ¹													
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		Percent complete within 7 days from order signature date ^{5,6}	Percent completed within 7 days from receipt of order ^{5,6}	Percent completed within 7 days from receipt of order or within 14 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Jan-24	5	0.0	0.0	0.0	0.0	n/a	n/a	9	18.0	26.0	33 %	33 %	33 %
Feb-24	6	0.3	0.0	0.1	0.0	n/a	n/a	5	13.8	13.0	0 %	0 %	0 %
Mar-24	10	0.1	0.0	0.1	0.0	n/a	n/a	11	8.0	7.0	55 %	55 %	55 %
Apr-24	11	0.3	0.0	0.2	0.0	n/a	n/a	11	6.4	6.0	82 %	82 %	91 %
May-24	11	0.2	0.0	0.4	0.0	n/a	n/a	11	5.9	6.0	91 %	100 %	100 %
Jun-24	7	0.1	0.0	0.3	0.0	n/a	n/a	6	5.3	5.5	100 %	100 %	100 %
Jul-24	12	0.2	0.0	0.2	0.0	n/a	n/a	12	4.9	5.0	100 %	100 %	100 %
Aug-24	19	0.1	0.0	0.0	0.0	n/a	n/a	15	5.7	6.0	87 %	100 %	100 %
Sep-24	13	0.3	0.0	0.2	0.0	n/a	n/a	17	5.2	6.0	100 %	100 %	100 %
Oct-24	12	0.3	0.0	0.1	0.0	n/a	n/a	12	11.8	6.0	83 %	83 %	83 %
Nov-24	10	1.8	0.0	0.0	0.0	n/a	n/a	9	6.7	5.0	89 %	89 %	89 %
Dec-24	13	0.3	0.0	0.1	0.0	n/a	n/a	15	5.1	6.0	100 %	100 %	100 %
Jan-25	14	0.1	0.0	0.2	0.0	1.0	1.0	13	5.7	6.0	100 %	100 %	100 %

Table 4 Data Notes:

¹**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.

²**Court Orders Signed** is the number of court orders signed in the specified month for those individuals waiting for competency services in jail and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month due to a class member entering jail from the community while awaiting a court-ordered competency service. This number does not include court orders signed for individuals waiting for competency services outside of jail.

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

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

⁵**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.

⁶**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 5a. Class Member Status Western State Hospital - Inpatient Competency Restoration Services

TABLE 5a. Class Member Status Western State Hospital – Inpatient Competency Services (Restorations) ¹													
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		Percent complete within 7 days from order signature date ^{5,6}	Percent completed within 7 days from receipt of order ^{5,6}	Percent completed within 7 days from receipt of order or within 14 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Jan-24	95	1.1	0.0	0.1	0.0	n/a	n/a	146	19.2	20.0	16 %	18 %	18 %
Feb-24	105	1.0	0.0	0.1	0.0	n/a	n/a	87	12.6	12.0	16 %	18 %	20 %
Mar-24	82	0.6	0.0	0.0	0.0	n/a	n/a	114	10.0	10.0	33 %	36 %	38 %
Apr-24	121	0.3	0.0	0.0	0.0	n/a	n/a	116	5.3	6.0	87 %	90 %	97 %
May-24	152	0.4	0.0	0.4	0.0	n/a	n/a	133	5.2	5.0	88 %	89 %	95 %
Jun-24	91	0.5	0.0	0.0	0.0	n/a	n/a	103	6.5	6.0	83 %	86 %	94 %
Jul-24	146	1.2	0.0	0.2	0.0	n/a	n/a	141	5.2	6.0	93 %	96 %	98 %
Aug-24	131	1.2	0.0	0.2	0.0	n/a	n/a	138	5.7	6.0	94 %	95 %	97 %
Sep-24	117	1.1	0.0	0.2	0.0	n/a	n/a	110	6.4	6.0	95 %	96 %	98 %
Oct-24	125	1.3	0.0	0.0	0.0	n/a	n/a	131	6.0	6.0	92 %	95 %	96 %
Nov-24	103	1.0	0.0	0.2	0.0	n/a	n/a	112	6.4	7.0	80 %	92 %	93 %
Dec-24	126	1.4	0.0	0.3	0.0	n/a	n/a	125	5.9	6.0	84 %	90 %	94 %
Jan-25	133	0.9	0.0	0.0	0.0	1.0	1.0	126	6.6	6.0	89 %	94 %	97 %

Table 5a. Data Notes:

¹**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.

²**Court Orders Signed** is the number of court orders signed in the specified month for those individuals waiting for competency services in jail and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month due to a class member entering jail from the community while awaiting a court-ordered competency service. This number does not include court orders signed for individuals waiting for competency services outside of jail.

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

⁴**Court Orders Completed** is the number of cases completed in the month specified. Cases are completed if the client is admitted for services, the order is withdrawn or dismissed, or the

client is no longer waiting for services in jail. Counts prior to AUG-18 are taken from previously reported class member populations provided with monthly court report submissions. Counts since AUG-18 are from data recorded in the BHA Forensic Data System.

⁵**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.

⁶**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 5b. Class Member Status Residential Treatment Facilities - Inpatient Competency Restoration Services

TABLE 5b. Class Member Status Behavioral Health & Treatment Centers – Inpatient Competency Services (Restorations) ¹													
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		Percent complete within 7 days from order signature date ^{5,6}	Percent completed within 7 days from receipt of order ^{5,6}	Percent completed within 7 days from receipt of order or within 14 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Jan-24	11	2.3	0.0	0.0	0.0	n/a	n/a	33	26.8	23.0	3 %	3 %	3 %
Feb-24	42	0.4	0.0	0.1	0.0	n/a	n/a	37	8.7	7.0	68 %	73 %	73 %
Mar-24	17	1.4	0.0	0.0	0.0	n/a	n/a	19	10.3	11.0	26 %	37 %	37 %
Apr-24	22	0.7	0.0	0.0	0.0	n/a	n/a	26	5.5	6.0	88 %	96 %	100 %
May-24	11	0.5	0.0	0.3	0.0	n/a	n/a	15	5.7	6.0	100 %	100 %	100 %
Jun-24	13	0.7	1.0	0.1	0.0	n/a	n/a	10	5.2	5.0	90 %	90 %	90 %
Jul-24	21	0.3	0.0	0.0	0.0	n/a	n/a	20	5.3	6.0	100 %	100 %	100 %
Aug-24	21	0.6	0.0	0.2	0.0	n/a	n/a	21	5.4	6.0	100 %	100 %	100 %
Sep-24	17	0.9	0.0	0.3	0.0	n/a	n/a	16	5.7	6.0	88 %	94 %	100 %
Oct-24	18	2.9	0.0	0.1	0.0	n/a	n/a	20	5.4	6.0	100 %	100 %	100 %
Nov-24	6	11.2	1.0	0.0	0.0	n/a	n/a	8	13.3	6.0	75 %	75 %	75 %
Dec-24	16	2.2	0.0	0.0	0.0	n/a	n/a	16	7.4	5.5	88 %	88 %	94 %
Jan-25	13	0.1	0.0	0.0	0.0	n/a	n/a	13	5.8	6.0	92 %	92 %	100 %

Table 5b. Data Notes:

¹**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.

²**Court Orders Signed** is the number of court orders signed in the specified month for those individuals waiting for competency services in jail and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month due to a class member entering jail from the community while awaiting a court-ordered competency service. This number does not include court orders signed for individuals waiting for competency services outside of jail.

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

⁴**Court Orders Completed** is the number of cases completed in the month specified. Cases are completed if the client is admitted for services, the order is withdrawn or dismissed, or the client is no longer waiting for services in jail. Counts prior to AUG-18 are taken from previously

reported class member populations provided with monthly court report submissions. Counts since AUG-18 are from data recorded in the BHA Forensic Data System.

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

⁶From April 2015 April 2017, the inpatient evaluation and restoration compliance deadline was within 7 days from court order signature date. As of May 2017, DSHS compliance data are calculated and summarized in this table based on the modified deadline for inpatient competency evaluation and restoration services outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389, stating: “DSHS shall complete inpatient competency evaluation and restorations within the shorter of either a) 7 days from receipt of order or b) 14 days from signature of order”.

To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail). The second is percentage of all orders completed within either of the two compliance deadlines: 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail) or 14 days from order signature date (if the order was received after 7 days from order signature date).

The Outpatient Competency Restoration Program: Data Table 5C.

The OCRP element of the Trueblood Contempt Settlement Agreement that is managed by the Washington State Health Care Authority, 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 11 counties and four Behavioral Health Administrative Services Organization regions covered by Phases 1 and 2 of the Settlement Agreement. As of the end of May 2024, two Phase 3 OCRP programs covering five additional counties and two additional BHASO regions signed contracts with HCA. 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 Jan. 1-31, 2025. 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 5c., 15, Appendices A, and F. Figures 2, 5, and 6 represent the visual presentation of OCRP data in this report. Only data from Trueblood Class Members appears in the OCRP tables and figures. As a result, some months have no new OCRP data to report.

Most individuals ordered to OCRP will not appear in Table 5c. Table 5c. is restricted to class members, meaning individuals in jail waiting for competency restoration services at any time after the competency order is signed. Currently, most individuals ordered to OCRP are released from jail prior to the court signing the OCRP order and remain in the community until entry into OCRP. The total number of individuals enrolled in an Outpatient Competency Restoration Program (regardless of jail status) is provided in the Trueblood semi-annual report and reported quarterly in **Table 16** of this report. The OCRP update in Table 17 begins on **page 61** of this month's report. Table 5c. follows on the next page.

Table 5c. Class Member Status OCRP

TABLE 5c: Class Member Status Outpatient Competency Restoration Program (OCRP) ¹													
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		Percent complete within 7 days from order signature date ^{5,6}	Percent completed within 7 days from receipt of order ^{5,6}	Percent completed within 7 days from receipt of order or within 14 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Jan-24	4	0.0	0.0	0.0	0.0	n/a	n/a	3	6.7	8.0	33 %	33 %	33 %
Feb-24	0	0.0	0.0	0.0	0.0	n/a	n/a	1	24.0	24.0	0 %	0 %	0 %
Mar-24	2	0.5	0.5	0.0	0.0	n/a	n/a	2	0.5	0.5	100 %	100 %	100 %
Apr-24	4	0.3	0.0	0.0	0.0	n/a	n/a	2	1.0	1.0	100 %	100 %	100 %
May-24	5	0.4	0.0	0.0	0.0	n/a	n/a	7	1.6	2.0	100 %	100 %	100 %
Jun-24	4	0.0	0.0	0.0	0.0	n/a	n/a	4	4.8	6.0	100 %	100 %	100 %
Jul-24	2	0.0	0.0	0.0	0.0	n/a	n/a	2	0.5	0.5	100 %	100 %	100 %
Aug-24	4	1.5	1.0	0.0	0.0	n/a	n/a	4	4.8	6.0	100 %	100 %	100 %
Sep-24	4	18.0	1.5	0.0	0.0	n/a	n/a	4	2.8	3.0	100 %	75 %	100 %
Oct-24	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-24	1	0.0	0.0	0.0	0.0	n/a	n/a	1	6.0	6.0	100 %	100 %	100 %
Dec-24	6	0.3	0.0	0.0	0.0	n/a	n/a	6	2.0	2.5	100 %	100 %	100 %
Jan-25	6	0.5	0.5	0.0	0.0	29.0	29.0	4	6.0	7.0	50 %	100 %	100 %

Table 5c. Data Notes:

¹**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.

²**Court Orders Signed** is the number of court orders signed in the specified month for those individuals waiting for competency services in jail and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month due to a class member entering jail from the community while awaiting a court-ordered competency service. This number does not include court orders signed for individuals waiting for competency services outside of jail.

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

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

⁵**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.

⁶**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).

reported class member populations provided with monthly court report submissions. Counts since AUG-18 are from data recorded in the BHA Forensic Data System.

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

⁶From April 2015 April 2017, the inpatient evaluation and restoration compliance deadline was within 7 days from court order signature date. As of May 2017, DSHS compliance data are calculated and summarized in this table based on the modified deadline for inpatient competency evaluation and restoration services outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389, stating: “DSHS shall complete inpatient competency evaluation and restorations within the shorter of either a) 7 days from receipt of order or b) 14 days from signature of order”.

To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail). The second is percentage of all orders completed within either of the two compliance deadlines: 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail) or 14 days from order signature date (if the order was received after 7 days from order signature date).

⁵**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.

⁶**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).

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

⁶From April 2015 April 2017, the inpatient evaluation and restoration compliance deadline was within 7 days from court order signature date. As of May 2017, DSHS compliance data are calculated and summarized in this table based on the modified deadline for inpatient competency evaluation and restoration services outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389, stating: “DSHS shall complete inpatient competency evaluation and restorations within the shorter of either a) 7 days from receipt of order or b) 14 days from signature of order”.

To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail). The second is percentage of all orders completed within either of the two compliance deadlines: 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail) or 14 days from order signature date (if the order was received after 7 days from order signature date).

⁵**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.

⁶**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 (Totals)-Inpatient Competency Evaluation

TABLE 10. Class Member Status at WSH and ESH (Totals) – Inpatient Competency Services (Inpatient Evaluations) ¹													
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		Percent complete within 7 days from order signature date ^{5,6}	Percent completed within 7 days from receipt of order ^{5,6}	Percent completed within 7 days from receipt of order or within 14 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Jan-24	5	0.0	0.0	0.3	0.0	n/a	n/a	11	23.6	26.0	27 %	27 %	27 %
Feb-24	12	1.5	0.0	1.8	0.0	n/a	n/a	8	15.0	12.5	13 %	13 %	13 %
Mar-24	19	1.0	0.0	1.1	0.0	n/a	n/a	23	8.8	8.0	48 %	48 %	48 %
Apr-24	16	0.6	0.0	0.6	0.0	n/a	n/a	17	6.4	7.0	82 %	82 %	88 %
May-24	17	0.2	0.0	0.3	0.0	n/a	n/a	15	6.1	6.0	87 %	93 %	93 %
Jun-24	11	0.3	0.0	0.3	0.0	n/a	n/a	11	5.7	6.0	73 %	82 %	91 %
Jul-24	23	0.2	0.0	0.2	0.0	n/a	n/a	23	4.2	3.0	100 %	100 %	100 %
Aug-24	29	0.2	0.0	0.8	0.0	n/a	n/a	23	5.8	6.0	83 %	100 %	100 %
Sep-24	18	0.2	0.0	0.2	0.0	n/a	n/a	25	5.7	6.0	88 %	88 %	88 %
Oct-24	15	0.3	0.0	0.2	0.0	n/a	n/a	14	10.8	5.5	86 %	86 %	86 %
Nov-24	19	1.4	0.0	0.1	0.0	n/a	n/a	17	6.8	6.0	82 %	82 %	82 %
Dec-24	23	0.5	0.0	0.7	0.0	n/a	n/a	26	4.9	4.0	92 %	100 %	100 %
Jan-25	25	0.4	0.0	1.1	0.0	0.8	1.0	23	5.4	5.0	87 %	96 %	100 %

Table 10 Data Notes:

¹**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.

²**Court Orders Signed** is the number of court orders signed in the specified month for those individuals waiting for competency services in jail and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month due to a class member entering jail from the community while awaiting a court-ordered competency service. This number does not include court orders signed for individuals waiting for competency services outside of jail.

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

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

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

⁶From April 2015 April 2017, the inpatient evaluation and restoration compliance deadline was within 7 days from court order signature date. As of May 2017, DSHS compliance data are calculated and summarized in this table based on the modified deadline for inpatient competency evaluation and restoration services outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389, stating: “DSHS shall complete inpatient competency evaluation and restorations within the shorter of either a) 7 days from receipt of order or b) 14 days from signature of order”.

To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail). The second is percentage of all orders completed within either of the two compliance deadlines: 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail) or 14 days from order signature date (if the order was received after 7 days from order signature date).

Table 11. Class Member Status at WSH, ESH, and BHTCs (Totals)-Inpatient Competency Restoration Services

TABLE 11. Class Member Status at WSH and ESH, and BHTCs (Totals) – Inpatient Competency Services (Restorations) ¹													
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		Percent complete within 7 days from order signature date ^{5,6}	Percent completed within 7 days from receipt of order ^{5,6}	Percent completed within 7 days from receipt of order or within 14 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Jan-24	135	1.6	0.0	0.1	0.0	n/a	n/a	215	25.2	22.0	13 %	14 %	14 %
Feb-24	172	1.4	0.0	0.1	0.0	n/a	n/a	178	15.8	12.0	25 %	28 %	28 %
Mar-24	126	1.5	0.0	0.0	0.0	n/a	n/a	161	10.6	10.0	30 %	36 %	37 %
Apr-24	166	0.6	0.0	0.0	0.0	n/a	n/a	164	5.5	6.0	87 %	91 %	96 %
May-24	203	0.4	0.0	0.3	0.0	n/a	n/a	190	5.5	6.0	86 %	89 %	93 %
Jun-24	130	0.5	0.0	0.0	0.0	n/a	n/a	141	6.6	6.0	76 %	79 %	87 %
Jul-24	199	1.0	0.0	0.2	0.0	n/a	n/a	188	5.5	6.0	89 %	93 %	95 %
Aug-24	201	1.2	0.0	0.1	0.0	n/a	n/a	211	6.0	6.0	89 %	96 %	98 %
Sep-24	165	1.4	0.0	0.2	0.0	n/a	n/a	155	6.3	6.0	91 %	95 %	97 %
Oct-24	166	1.8	0.0	0.1	0.0	n/a	n/a	173	6.0	6.0	91 %	94 %	95 %
Nov-24	139	1.9	0.0	0.1	0.0	n/a	n/a	154	6.8	6.0	77 %	90 %	90 %
Dec-24	177	1.6	0.0	0.2	0.0	n/a	n/a	175	6.3	6.0	86 %	91 %	94 %
Jan-25	194	0.7	0.0	0.0	0.0	1.0	1.0	188	6.3	6.0	88 %	93 %	95 %

Table 11 Data Notes:

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

²Court Orders Signed is the number of court orders signed in the specified month for those individuals waiting for competency services in jail and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month due to a class member entering jail from the community while awaiting a court-ordered competency service. This number does not include court orders signed for individuals waiting for competency services outside of jail.

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

⁴Court Orders Completed is the number of cases completed in the month specified. Cases are completed if the client is admitted for services, the order is withdrawn or dismissed, or the client is no longer waiting for services in jail. Counts prior to AUG-18 are taken from previously reported

class member populations provided with monthly court report submissions. Counts since AUG-18 are from data recorded in the BHA Forensic Data System.

⁵**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.

⁶**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”.

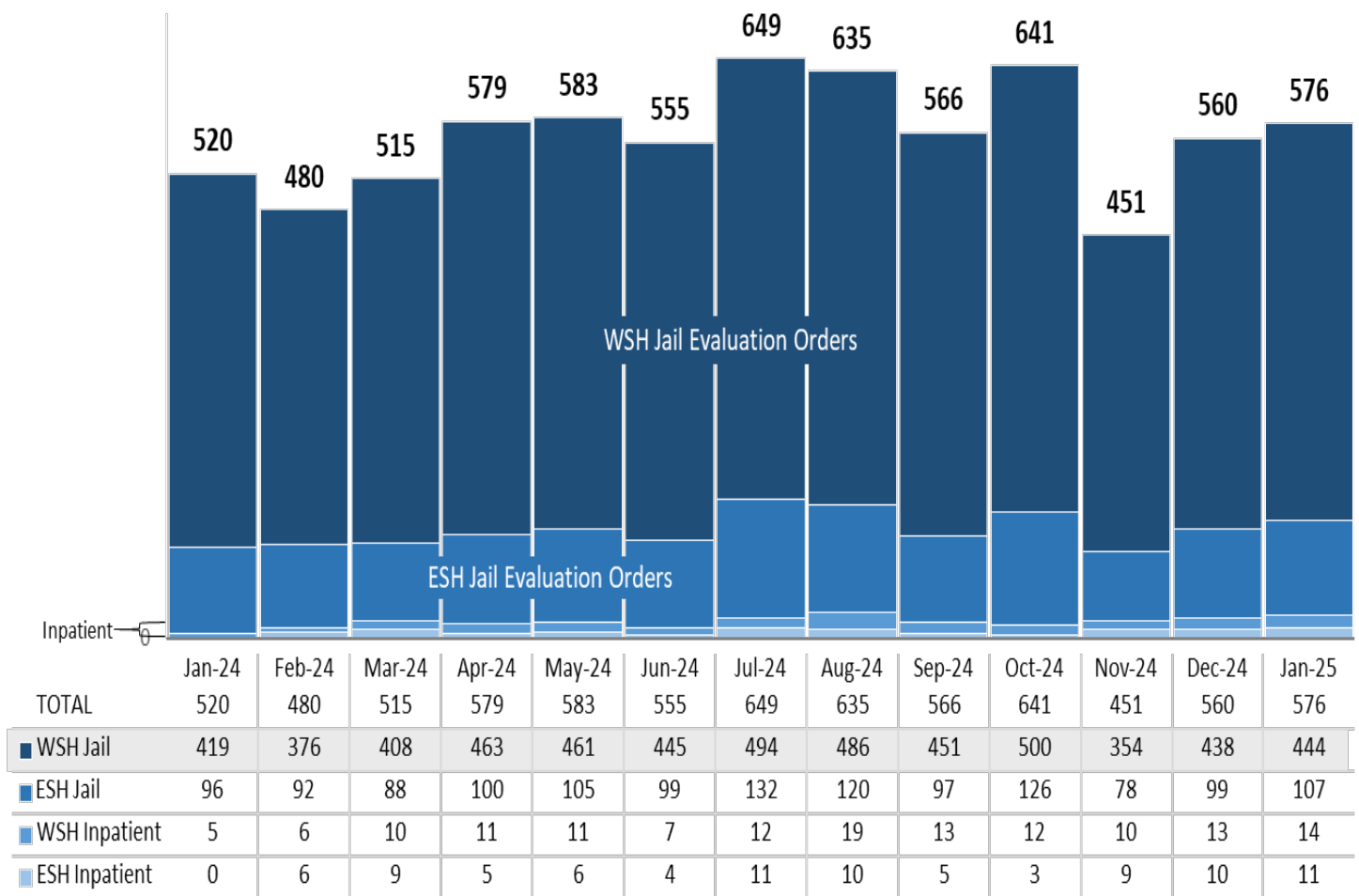
To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the 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

Data Graphs: Figures 1 Through 6

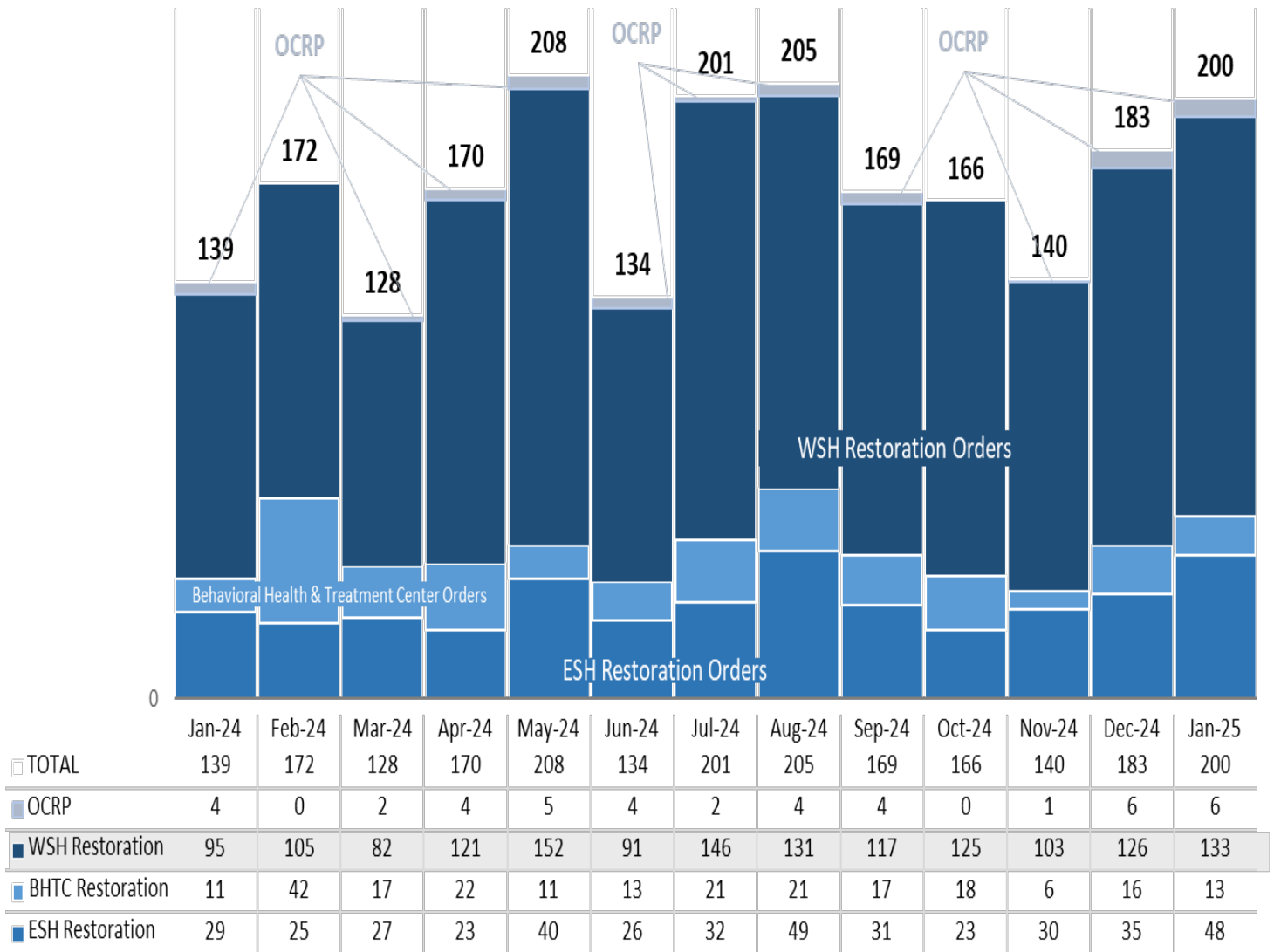
The following figures, Figures 1-6, present “first look” January 2025 data. The data are subject to change as they mature over a longer time horizon.

Figure 1. Signed Evaluation Orders for Trueblood Class Members



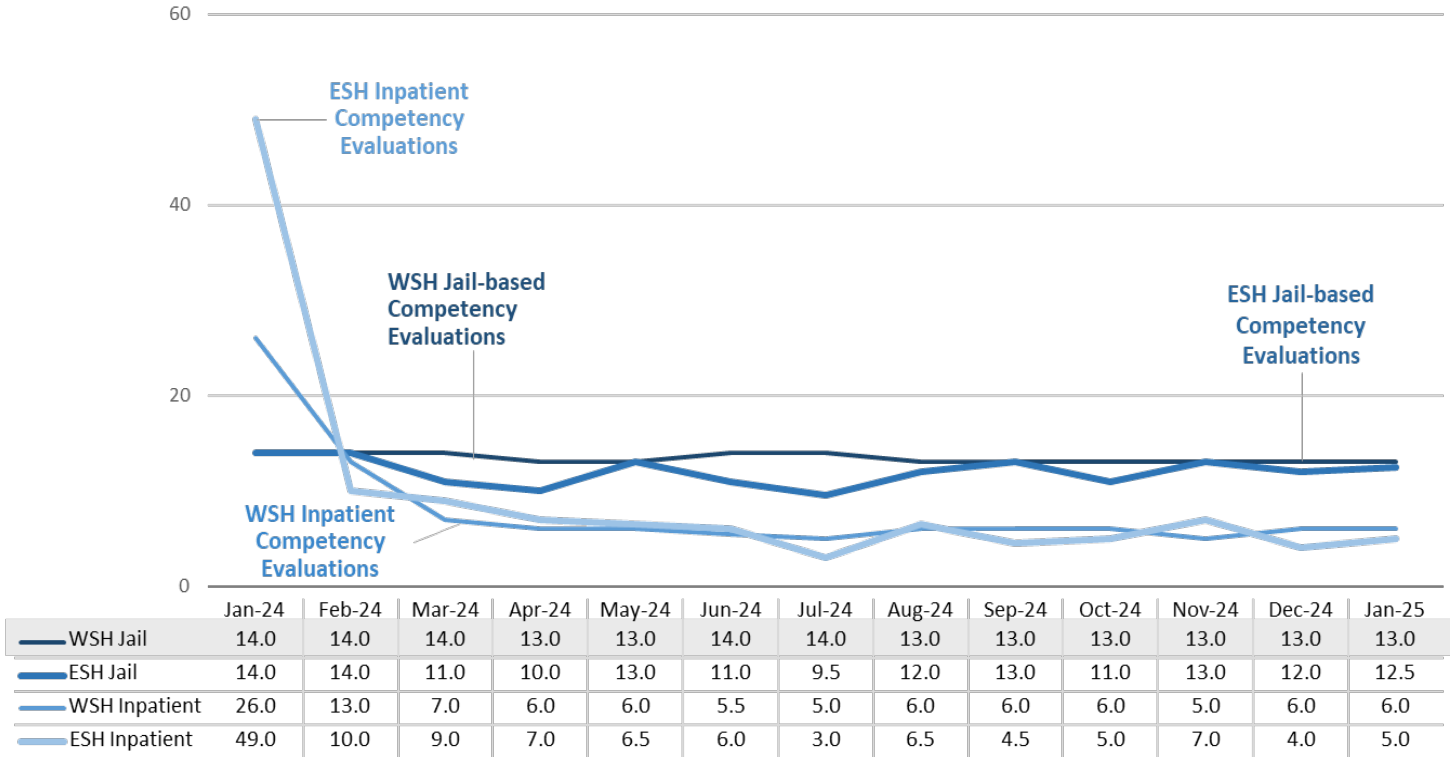
SOURCE: DSHS Facilities, Finance, and Analytics Administration, Research and Data Analysis Division, Forensic Data System, FEBRUARY 2025.

Figure 2. Signed Restoration Orders for Trueblood Class Members



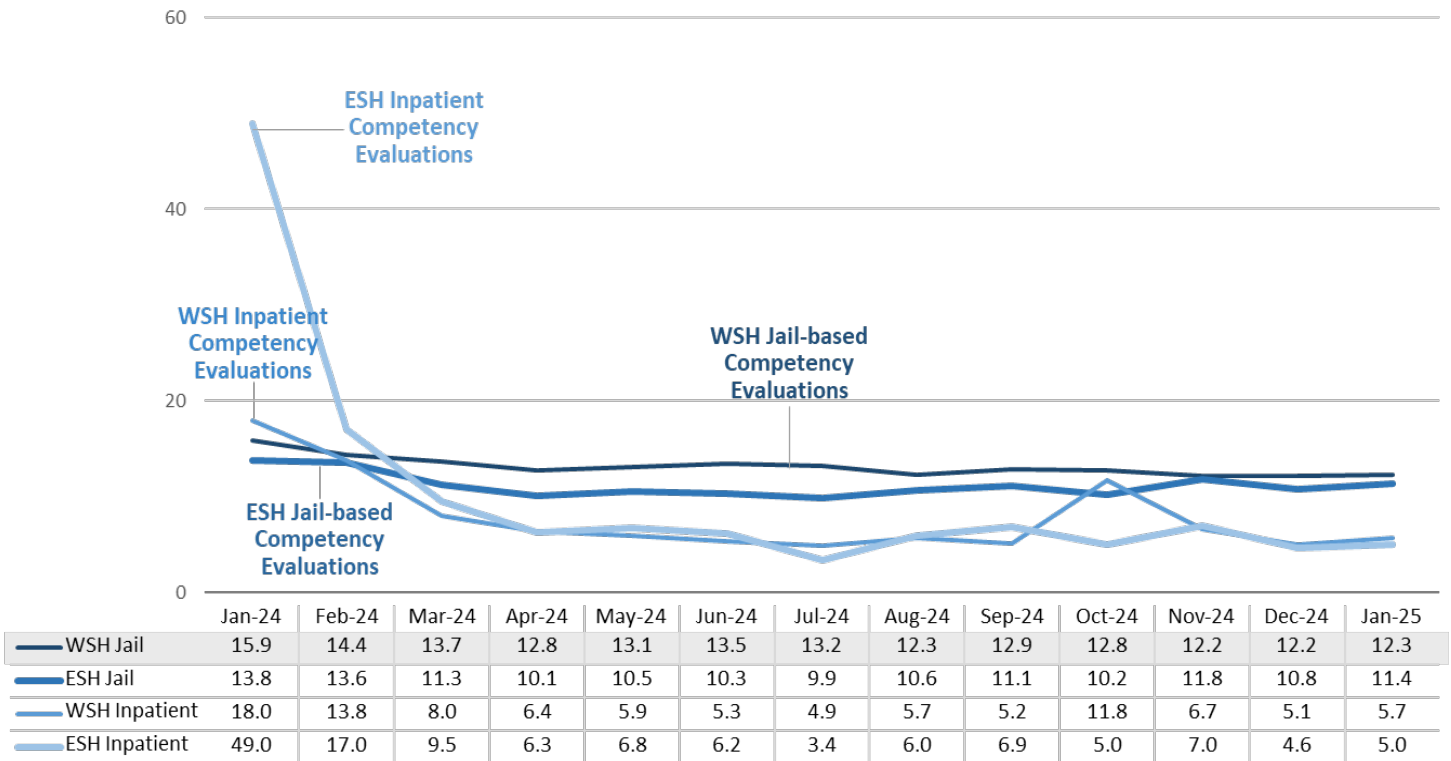
SOURCE: DSHS Facilities, Finance, and Analytics Administration, Research and Data Analysis Division, Forensic Data System, FEBRUARY 2025.

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



SOURCE: DSHS Facilities, Finance, and Analytics Administration, Research and Data Analysis Division, Forensic Data System, FEBRUARY 2025.

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



SOURCE: DSHS Facilities, Finance, and Analytics Administration, Research and Data Analysis Division, Forensic Data System, FEBRUARY 2025.

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

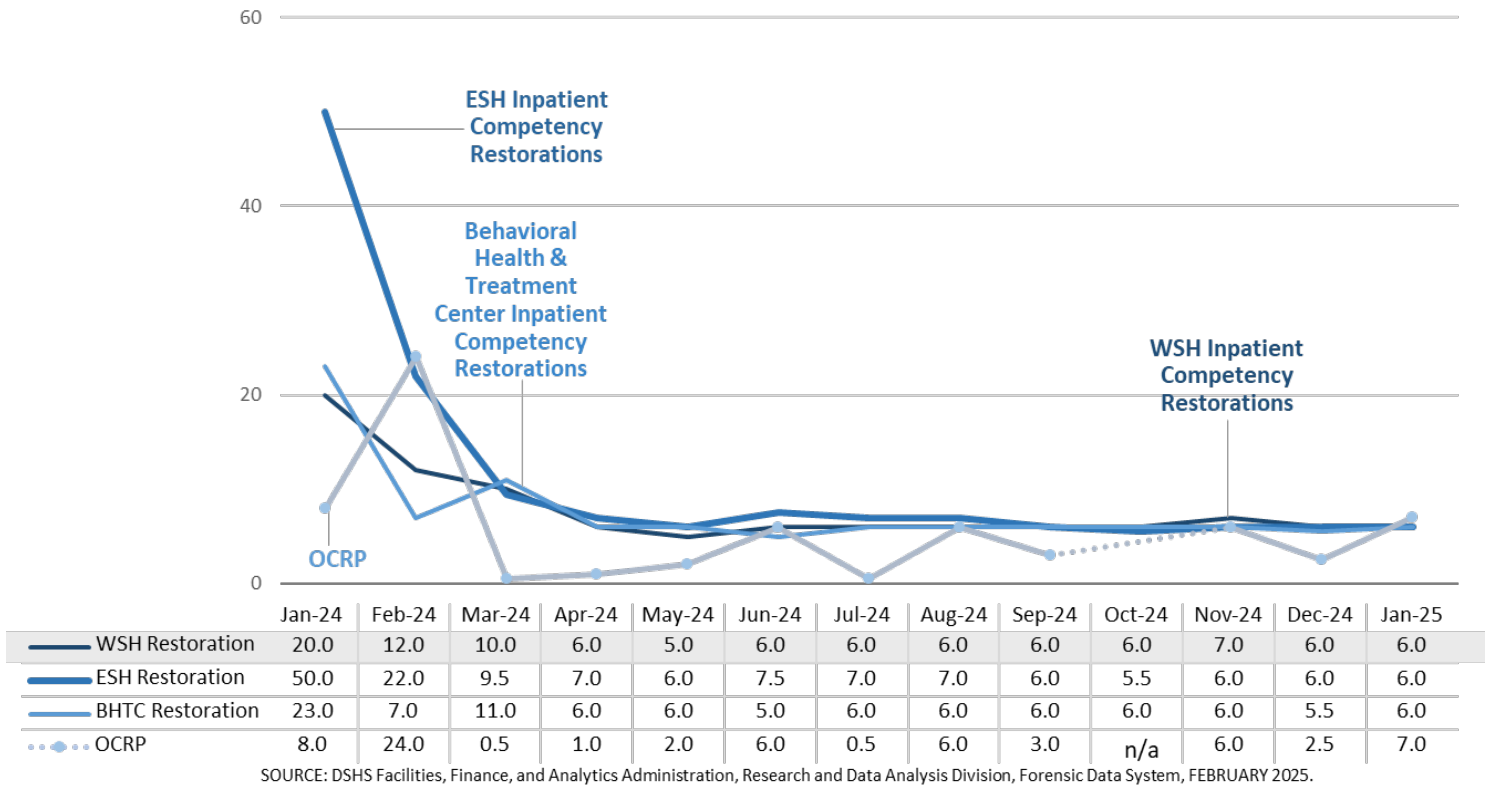
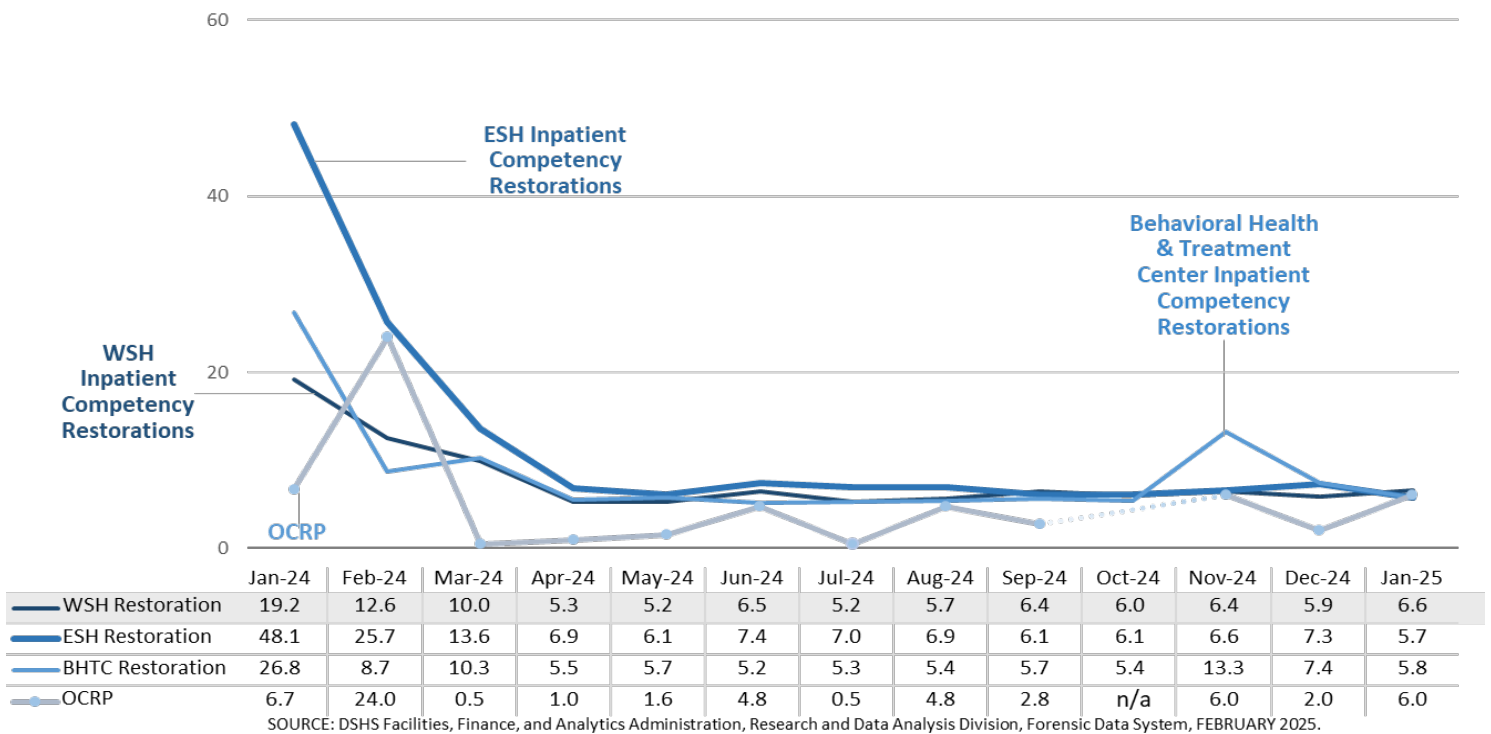


Figure 6. Average Days from Court Order Signature to Completed Restoration



Tables 12-15: Summary of Jail Evaluations, In-Patient Evaluations, and Restorations by Month Since February 2016

Data Tables 12 Through 15

The data presented in this section, from Tables 12-15 (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 3-11, which are based on the month the order packet was completed. January 2025 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 timely completion period. A rolling thirteen months is displayed in Tables 12-15. Tables 12-14 are presented in this first subsection followed by Table 15 in the subsequent subsection.

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

TABLE 12. TOTAL COMPLETED JAIL EVALUATION ORDERS BY MONTH COURT ORDER SIGNED ¹							
MONTH	Court Orders Signed ²	14 DAYS OR LESS FROM ORDER SIGNATURE DATE ³	PERCENT 14 DAYS OR LESS FROM ORDER SIGNATURE DATE ³	ORDERS COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER ^{3,4}	PERCENT COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER ^{3,4}	ORDERS COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER OR WITHIN 21 DAYS FROM ORDER SIGNATURE DATE ^{3,4}	PERCENT COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER OR WITHIN 21 DAYS FROM ORDER SIGNATURE DATE ^{3,4}
Jan-24	515	354	69 %	388	75 %	392	76 %
Feb-24	468	328	70 %	357	76 %	359	77 %
Mar-24	496	390	79 %	414	83 %	419	84 %
Apr-24	563	440	78 %	478	85 %	481	85 %
May-24	566	453	80 %	485	86 %	493	87 %
Jun-24	544	419	77 %	451	83 %	456	84 %
Jul-24	626	491	78 %	539	86 %	548	88 %
Aug-24	606	508	84 %	545	90 %	549	91 %
Sep-24	548	452	82 %	482	88 %	485	89 %
Oct-24	626	511	82 %	544	87 %	548	88 %
Nov-24	432	367	85 %	390	90 %	395	91 %
Dec-24	537	427	80 %	455	85 %	455	85 %
Jan-25	551	363	66 %	372	68 %	372	68 %

Table 12 Data Notes:

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

²Court Orders Signed is the number of court orders signed in the specified month for those individuals waiting for competency services in jail and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month due to a class member entering jail from the community while awaiting a court-ordered competency service. This number does not include court orders signed for individuals waiting for competency services outside of jail.

³From 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.

⁴From April 2015 April 2017, the inpatient evaluation and restoration compliance deadline was within 7 days from court order signature date. As of May 2017, DSHS compliance data are calculated and summarized in this table based on the modified deadline for inpatient competency evaluation and restoration services outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389, stating: "DSHS shall complete inpatient competency evaluation and restorations within the shorter of either a) 7 days from receipt of order or b) 14 days from signature of order".

To comply with the new requirements, this report captures two additional sets of compliance information beginning in May, 2017. The first is percentage of orders completed within 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail). The second is percentage of all orders completed within either of the two compliance deadlines: 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail) or 14 days from order signature date (if the order was received after 7 days from order signature date).

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

TABLE 13. TOTAL COMPLETED INPATIENT EVALUATION ORDERS BY MONTH COURT ORDER SIGNED ^{1,2}							
MONTH	Court Orders Signed ¹	7 DAYS OR LESS FROM ORDER SIGNATURE DATE	PERCENT 7 DAYS OR LESS FROM ORDER SIGNATURE DATE	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER ^{1,2}	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER ^{1,2}	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE ^{1,2}	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE ^{1,2}
Jan-24	5	3	60 %	3	60 %	3	60 %
Feb-24	12	1	8 %	1	8 %	1	8 %
Mar-24	19	12	63 %	12	63 %	12	63 %
Apr-24	16	14	88 %	14	88 %	15	94 %
May-24	17	13	76 %	15	88 %	16	94 %
Jun-24	11	10	91 %	10	91 %	10	91 %
Jul-24	23	23	100 %	23	100 %	23	100 %
Aug-24	29	20	69 %	24	83 %	24	83 %
Sep-24	18	18	100 %	18	100 %	18	100 %
Oct-24	15	15	100 %	15	100 %	15	100 %
Nov-24	19	14	74 %	16	84 %	16	84 %
Dec-24	23	23	100 %	23	100 %	23	100 %
Jan-25	25	18	72 %	20	80 %	21	84 %

Table 13 Data Notes:

¹**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.

²**Court Orders Signed** is the number of court orders signed in the specified month for those individuals waiting for competency services in jail and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month due to a class member entering jail from the community while awaiting a court-ordered competency service. This number does not include court orders signed for individuals waiting for competency services outside of jail.

³**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.

⁴**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. Total Completed Restoration Orders by Month Court Order Signed

TABLE 14. TOTAL COMPLETED INPATIENT RESTORATION ORDERS BY MONTH COURT ORDER SIGNED ^{1,2}							
MONTH	Court Orders Signed ¹	7 DAYS OR LESS FROM ORDER SIGNATURE DATE	PERCENT 7 DAYS OR LESS FROM ORDER SIGNATURE DATE	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER ^{1,2}	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER ^{1,2}	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE ^{1,2}	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE ^{1,2}
Jan-24	135	36	27 %	39	29 %	39	29 %
Feb-24	172	42	24 %	49	28 %	51	30 %
Mar-24	126	65	52 %	73	58 %	76	60 %
Apr-24	166	145	87 %	151	91 %	161	97 %
May-24	203	174	86 %	180	89 %	184	91 %
Jun-24	130	100	77 %	104	80 %	117	90 %
Jul-24	199	175	88 %	183	92 %	186	93 %
Aug-24	201	180	90 %	193	96 %	196	98 %
Sep-24	165	153	93 %	159	96 %	161	98 %
Oct-24	166	147	89 %	153	92 %	155	93 %
Nov-24	139	100	72 %	120	86 %	123	88 %
Dec-24	177	158	89 %	166	94 %	169	95 %
Jan-25	194	160	82 %	167	86 %	171	88 %

Table 14 Data Notes:

¹**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.

²**Court Orders Signed** is the number of court orders signed in the specified month for those individuals waiting for competency services in jail and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month due to a class member entering jail from the community while awaiting a court-ordered competency service. This number does not include court orders signed for individuals waiting for competency services outside of jail.

³**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.

⁴**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).

The Outpatient Competency Restoration Program: Data Table 15

The OCRP element of the Trueblood Contempt Settlement Agreement that is managed by the Washington State Health Care Authority, 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 11 counties and four Behavioral Health Administrative Services Organization regions covered in Phases 1 and 2 of the Trueblood Contempt Settlement Agreement. As of the end of May 2024, two Phase 3 OCRP programs covering five additional counties and two additional BHASO regions signed contracts with HCA. 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 Jan. 1-31, 2025. 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 5c., 15, Appendices A, and F. 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.

Most individuals ordered to OCRP will not appear in Table 15. Table 15 is restricted to class members, meaning individuals in jail waiting for competency restoration services at any time after the competency order is signed. Currently, most individuals ordered to OCRP are released from jail prior to the court signing the OCRP order and remain in the community until entry into OCRP. The total number of individuals enrolled in an Outpatient Competency Restoration Program (regardless of jail status) is provided in the Trueblood semi-annual report and reported quarterly in Table 17 of this report. The OCRP update in Table 17 begins on **page 53** of this month's report. Table 15 follows on the next page.

Table 15. OCRP Completed Restoration Orders by Month Court Order Signed

TABLE 15. OUTPATIENT COMPETENCY RESTORATION PROGRAM COMPLETED RESTORATION ORDERS BY MONTH COURT ORDER SIGNED ¹							
MONTH	Court Orders Signed ¹	7 DAYS OR LESS FROM ORDER SIGNATURE DATE	PERCENT 7 DAYS OR LESS FROM ORDER SIGNATURE DATE	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER ^{1,2}	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER ^{1,2}	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE ^{1,2}	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE ^{1,2}
Jan-24	4	1	25 %	1	25 %	1	25 %
Feb-24	0	0	n/a	0	n/a	0	n/a
Mar-24	2	2	100 %	2	100 %	2	100 %
Apr-24	4	4	100 %	4	100 %	4	100 %
May-24	5	5	100 %	5	100 %	5	100 %
Jun-24	4	4	100 %	4	100 %	4	100 %
Jul-24	2	2	100 %	2	100 %	2	100 %
Aug-24	4	4	100 %	4	100 %	4	100 %
Sep-24	4	4	100 %	3	75 %	4	100 %
Oct-24	0	0	n/a	0	n/a	0	n/a
Nov-24	1	1	100 %	1	100 %	1	100 %
Dec-24	6	6	100 %	6	100 %	6	100 %
Jan-25	6	3	50 %	5	83 %	5	83 %

Table 15 Data Notes:

¹The OCRP was implemented July 1, 2020. The data are pulled from the BHA Forensic Data System and Navigator Case Management System and based on the number of periods individuals waited for competency services in jail.

²Court Orders Signed is the number of court orders signed in the specified month for those individuals waiting for competency services in jail and any additional in-jail stays (i.e., periods of waiting for competency services in jail) starting in the specified month due to a class member entering jail from the community while awaiting a court-ordered competency service. This number does not include court orders signed for individuals waiting for competency services outside of jail.

³The 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.

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

of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail) and 3) the number and percent of all orders completed within either of two compliance deadlines: 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the beginning or notification of a period of waiting in jail) or 14 days from order signature date (if the order was received after 7 days from order signature date) (from May 2017 onward as outlined in the order DSHS received on 4/26/2017 adopting the Mediated Settlement Agreement, Dkt. # 389).

Resources Required to Provide Timely Competency Services

2017-2021 Budget Appropriations

The state invested significant resources into beds, staffing, and programs impacting Trueblood Class Members. For detailed information on specific investments, review monthly reports from August 2022 and earlier at [Monitor Reports](#). On Jan. 25, 2018, Judge Pechman approved contempt fine funds to remodel WSH's Steilacoom Unit. As a result, 30-bed Steilacoom Unit opened in August 2019.

2021-2023 Budget Appropriations

The COVID-19 pandemic emerged in Washington state in February 2020 resulting in costly pandemic-related expenditures and emergency budget reductions. COVID-19's fiscal impacts became less severe over time, and significant but time-limited federal resources became available to DSHS. For detailed information on specific state investments, review monthly reports from May 2021-March 2024 at [Monitor Reports](#).

2023-2025 Budget Appropriations

The FY'23 supplemental budget and the 2023-2025 biennium operating and capital budgets passed the legislature near the end of the 2023 legislative session. The Governor signed the budgets into law on May 16. Significant investments into Washington state's behavioral health system transformation have continued through this budget.

1. Operating funds to expand the Maple Lane Campus by adding the 32-bed Chelan and 32-bed Baker Units.
2. Operating funds for all 48 beds at Brockmann Campus in Vancouver to include the delivery of services by BHA (previous plans were for DSHS to operate 16 beds and for HCA to contract operations for two 16-bed units)
3. One-time funding to contract with the South Correctional Entity in King County to provide enhanced clinical services for misdemeanor and lower-level felony cases from the forensic admission wait list.
4. Implementation funds for the newly passed legislation, E2SSB 5440, which includes funds for additional jail-based and community-based personal recognizance competency evaluations; funds for expanded Trueblood Phase 3 implementation; and funds to create a forensic evaluation pilot site at the King County Correctional Facility to reduce delays and create efficiencies for Trueblood class members requiring competency evaluations.

5. Resources to address barriers for hard-to-place patients residing at the state hospitals who are ready and appropriate for discharge to a community setting.
6. One-time funding to pursue strategies to maximize existing forensic bed availability for Trueblood Class Members.
7. WSH: \$895 million in capital construction funding over the 2023-2025 and 2025-2027 budget biennia for the new 350-bed forensic hospital.
8. Maple Lane Campus: \$21.9 million to remodel 136 behavioral health beds and other improvements.
9. Brockmann Campus in Clark County: \$20.6 million for three civil 16-bed behavioral health treatment centers

2024 Supplemental Budget Appropriations

Governor Inslee signed the supplemental state operating and capital budgets into law on March 29, 2024 at the University of Washington's new Center for Behavioral Health and Learning, which opened in May 2024. He also signed a variety of other bills relating to behavioral health. Significant impacts to the behavioral health system include:

1. Olympic Heritage Behavioral Health: \$30 million to purchase the facility and \$14.6 million for capital improvements. \$135 million and 388 FTEs for the operation and infrastructure improvements at OHBH.
2. Forensic beds at WSH and ESH: \$31.1 million and 101.6 FTEs for 30 beds at WSH and eight beds at ESH.
3. Clinical Contracted Staffing: \$31.2 million for contracted nursing staff caused by high vacancy rates at the state hospitals, and to maintain safe operations and appropriate patient care.
4. Maple Lane Campus – \$15.6 million to backfill the federal revenue assumed in the previous enacted budget.
5. Child Study and Treatment Center – Gymnasium: \$1.9 million to replace the gymnasium flooring.
6. Recruit and Retain Staff – \$864,000 and 3.0 FTEs to support efforts for continued education for clinical and nursing staff, nurse recruiters, and postdoctoral program in psychology.

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, aiming to 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 Oct. 3, 2018. DSHS received the final report via webinar on Dec. 10, 2018.

Trueblood Key Accomplishments: January 2025

Recruiting

Talent Acquisition program staff continue to support hiring needs associated with ESH, WSH, and Steilacoom Unit.

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

- Registered Nurses – 23 presented
- Licensed Practical Nurses – 4 presented
- Psychiatric Security Nurses – 1 presented
- Psychiatric Social Workers – 4 presented
- Psychology Associates – 8 presented
- Forensic Care Associates – 33 presented
- Institution Counselors – 16 presented
- Mental Health Technicians – 54 presented

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

- Registered Nurses – 63 presented
- Licensed Practical Nurses – 2 presented
- Psychiatric Security Nurses – 18 presented
- Forensic Care Associates – 132 presented
- Institution Counselors – 26 presented
- Psychologist – 3 presented

Actions to Address Staffing Challenges

Competing for staff talent with the private sector in the context of the well-publicized post-pandemic workforce challenges has left many positions, especially at our treatment facilities, chronically short-staffed. BHA has identified and implemented creative solutions within our existing authority and partnered with executive leadership, state human resources, labor, and other partners to develop and implement innovative approaches to recruiting and retaining critical staff positions. In spring and summer 2022, DSHS completed several steps to alleviate staffing challenges. Steps taken included hiring more contractors and travel nurses, adding hiring recruitment resources to both WSH and ESH, especially to hire nurses, partnering with the Washington State Office of Financial Management to adjust pay ranges for certain positions, expanding our successful forensic evaluator training and recruitment post-doctoral program from three-to-five interns, and engaging a successful demand to bargain with labor partners to allow for contract evaluations to take place until vacancies can be filled. Implementing new policies and practices to attract and retain passionate, talented staff remains critical to success, and BHA has continued this critical focus through 2022 and 2023. Even with these successful actions, BHA continues to face high vacancy rates in several critical patient-centered job classes.

As of early February, vacancies in these classes now range between 21-41 percent. The ability to maintain current restoration capacity is a challenge, and staffing new physical capacity is also very challenging.

BHA has established a HQ-based staffing and outreach team focused on filling the newly established positions for the additional facilities being built as well as providing recruitment, outreach, and hiring support for vacancies within existing facilities and programs. This team has increased the partnerships, job fairs, and outreach connections with a focus on high schools, community colleges, trade schools, tribal governments, professional, and community organizations. Some of the strategic recruitment and outreach activities include:

- Program/facility-specific job fairs
- Position/discipline-specific job fairs (nursing, psychology, security guard)
- Veteran-focused hiring events
- Sending statewide letter to all licensed psychologists
- Paid recruitment ads in professional journals

Effective July 1, 2023, several new staff retention measures take effect with implementation of the 2023-2025 biennial budget and collective bargaining agreements.

- Staff who were hired on or before July 1, 2022 and remain employed on July 1, 2023 qualify for a one-time lump sum retention payment. Most employees receive \$1,000. Certain represented employees may receive \$1,500.
- All employees in Washington General Service and Washington Management Service positions, working at our 24/7 facilities receive a five-percent wage premium for hours worked on-site at the facilities.
- All employees receive a four-percent cost of living adjustment. Effective July 1, 2024, all employees are scheduled to receive an additional three-percent cost of living adjustment.
- Enacted targeted wage scale adjustments for critical positions.
- Extra duty pay for forensic evaluators and psychiatric social workers
- Extra duty pay for ARNPs (1 ¼ times the regular rate)
- Extra duty pay for physicians and psychiatrists (1 ¼ times the regular rate).

The 2024 legislative session passed several new pieces of legislation including measures designed to increase staff recruitment and retention, including:

- Extending eligibility of the Public Safety Employees Retirement System to staff of the Special Commitment Center and staff of the civil and not guilty by reason of insanity residential treatment facilities effective June 1, 2025.

- Adopting a social work licensure compact to make it easier to hire social workers from as many as 25 other states.
- Adopting a physician assistant compact, making it easier to hire PAs from as many as 16 other states.
- Outlines opportunities for out-of-state providers to provide telehealth services; allows providers to establish a patient relationship via telehealth.

Behavioral Health & Treatment Center Data

This section presents monthly data for the current month and the trailing year (13 months), with a year-over-year average comparison. DSHS Behavioral Health & Treatment Center – Steilacoom Unit is presented in Table 16 below. DSHS Behavioral Health & Treatment Center – Cascade Unit closed permanently on June 28, 2024. Please see Table 17’s section on Cascade Unit on **page 60** for additional details.

Table 16. Monthly BHTC Data for Steilacoom Unit

Data Elements	Jan 24	Feb 24	Mar 24	Apr 24	May 24	Jun 24	Jul 24	Aug 24	Sep 24	Oct 24	Nov 24	Dec 24	2024 Avg	Jan 25	2025 Avg
Census (last day of month)	27	30	28	27	27	28	24	28	26	27	27	26	27.1	29	29.0
Total patients admitted	20	10	15	9	17	12	15	23	14	17	8	14	14.5	16	16.0
Completed and found competent (1st Restoration)	8	1	6	4	2	5	3	9	8	8	4	9	5.6	8	8.0
Not likely restorable (transported back to jail)	0	0	1	2	0	2	2	0	3	1	2	1	1.2	3	3.0
Court Order lapsed (transported back to Jail)	0	0	1	1	4	0	0	0	1	3	1	0	0.9	0	0.0
Felony patients	7	1	2	1	0	1	2	9	1	0	2	10	3.0	0	0.0
Misdemeanor patients	0	0	1	1	0	1	0	2	1	1	0	1	0.7	3	3.0
Total transferred to State Hospital for:	0	1	5	4	3	0	4	2	4	1	2	0	2.2	0	0.0
Physical aggression	0	0	2	1	1	0	1	1	3	1	1	0	0.9	0	0.0
Sexually inappropriate behavior	0	0	0	0	0	0	1	0	0	0	0	0	0.1	0	0.0
Medical reasons	0	0	0	0	0	0	1	1	0	0	0	0	0.2	0	0.0
Due to court ordered treatment at SH	0	1	1	1	2	0	1	0	1	0	1	0	0.7	0	0.0
Other	0	0	1	2	1	0	0	0	0	0	0	0	0.3	0	0.0
Total patients eloped	0	0	1	0	0	0	0	0	0	0	0	0	0.1	0	0.0

Data Elements	Jan 24	Feb 24	Mar 24	Apr 24	May 24	Jun 24	Jul 24	Aug 24	Sep 24	Oct 24	Nov 24	Dec 24	2024 Avg	Jan 25	2025 Avg
Total recommended for early evaluation	0	0	1	0	1	1	0	0	0	0	0	0	0.3	0	0.0
Total recommended for 2nd 90-day order	0	5	4	1	2	4	0	1	5	3	3	3	2.6	6	6.0
Total recommended for 3rd 90-day order	0	0	0	0	0	1	0	0	0	0	0	0	0.1	1	1.0

Data Note:

The data are dynamic, and the most recent results generally will continue to change and become more reliable over time as the data mature. Likewise, due to the Trueblood lawsuit, case prioritization, civil conversion cases, triage cases, periodic lengthy wait times and other considerations, some cases will not show as completed cases in the data until the cases are resolved. The department cautions against comparing the data in this publication to other department publications due to differences in data maturity, time frames, databases, and other sourcing parameters that may not allow for a direct comparison.

Trueblood Programs



Trueblood Implementation Steps Taken and Planned: January 2024

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

As of the August 2024 report, several completed requirements have been removed from this table and are summarized in the new **Table 19**. Archived Achievements.

Table 17. Trueblood Implementation Steps

A. Court Appointed Monitor Coordination: Monthly reports	
Key Milestones	Released January 2025 report.
Status / End Dates	Complete
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> • Maintain compliance with the Court. • Use data to review and improve the provision of forensic services.
Results Achieved & Barriers to Completion	January 2025 report released to stakeholders.
B. Legislative Coordination: 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.	
Key Milestones	Consult key partners including out of state agencies.
Status/End Dates	Ongoing
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> • Expanded pool of forensic evaluators would help improve timeliness. Licensure would provide quality assurance and create professional standards for forensic evaluators. • Develop long-term certification of forensic evaluators, consistent with the Trueblood Court Monitor’s recommendations on mid- and long-term performance to implement a forensic certification program to sustain performance.

Results Achieved & Barriers to Completion	<p>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.</p> <p>Since May 2021, OFMHS’ has focused more on internal quality assurance/performance improvement for reports. The first step consisted of updating the forensic report writing guidelines, and the second step is the peer review and collaboration policy development process.</p> <p>In May 2021, next steps related to this process were discussed. Discussion focused on exploring further a peer review process and what associated training may look like for internal “credentialing.” With work being done on updating the evaluator guidelines manual, drafting the peer review policy was delayed until completion of the guidelines manual. The initial plan was to complete a draft of the peer review policy by Aug. 1, 2022. Due to extremely high numbers of competency evaluation referrals statewide, the due date had to be pushed back several times until Dec. 31, 2022.</p> <ul style="list-style-type: none"> • The Initial draft was completed with input from forensic evaluator staff from the six offices at the end of December. The policy was placed in PolicyTech for further review in January and February 2023. Policy was reviewed by supervisors and the director and edits were made. The revised policy was then sent out to the policy reviewers at the end of April. Once all reviews are completed by the policy team (which includes the attorney general’s office), the new draft will be shared with evaluators and labor. The next iteration of the draft was planned for October 2023. However, with the increase in in-patient competency referrals at WSH requiring staff to focus on completing evaluations, the next iteration for review is planned for January 2024. The subsequent draft was reviewed in early 2024 but with the continued increase in inpatient referrals, the assigned writer has not been able to resume work in updating the policy for its third iteration. The current plan is that the third and final draft will be completed by the end of 2024.
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C. Labor Coordination: Engage labor leaders and members.	
Key Milestones	Conduct ongoing bi-monthly meetings with labor leaders.
Status/End Dates	Ongoing
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> • Discuss policy, budget and operational changes likely required to comply with the Trueblood requirements.

	<ul style="list-style-type: none"> • Obtain staff necessary to safely support operation of additional forensic and civil beds at the state hospitals. • Obtain necessary psychiatrists and physicians to supplement services proved by employees at WSH to safely support the operation of additional forensic and civil beds.
Results Achieved & Barriers to Completion	No active demand to bargain for this reporting period.

D1. Data Collection and Fiscal Modeling: Monthly report data collection	
Key Milestones	Identify and obtain needed data.
Status/End Dates	Complete
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> • Obtain data for monthly reports and develop standardized reports to inform policy development and implementation.
Results Achieved & Barriers to Completion	Data collection is ongoing. The Forensic Data System technical team continues to meet bi-monthly with program staff and RDA. Reporting needs are identified, run through change control, and implemented as needed. This process is operationalized.
D2. Data Collection and Fiscal Modeling: Institute data audit process.	
Key Milestones	Review data and files of cases with anomalies to identify trends.
Status/End Dates	Complete
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> • Ensure completeness and accuracy of wait list data.
Results Achieved & Barriers to Completion	Data validation process is ongoing. IT project team and RDA analysts, research data anomalies to determine the cause, impact, and remediation needed.

E1. Human Resources: Hire OFMHS HQ positions.	
Key Milestones	Hire and onboard.
Status/End Dates	Complete
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> • Provided infrastructure for forensic services system; improved effective and timely competency services provision.

Results Achieved & Barriers to Completion	For evaluators, all authorized and required positions to enact Phase 1 have been filled.
E2. Human Resources: Hire additional hospital ward staff.	
Key Milestones	Conduct targeted hiring events; pursue contracting
Status/End Dates	In progress
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> 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.
Results Achieved & Barriers to Completion	<p>Talent Acquisition recruiting efforts continue.</p> <p>See page 49 for additional details on recruiting and retention initiatives.</p>

F1. Competency Evaluation: Build capacity for out-station sites.	
Key Milestones	Site agreements; Outstation sites operational
Status/End Dates	Complete
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> Increased capacity at out-station sites will reduce wait time for evaluations.
Results Achieved & Barriers to Completion	Most evaluations at outstation sites and all evaluations at BHTCs have been conducted by telehealth to reduce COVID-19 exposure risk and to increase efficiency. The telehealth system accommodates interpreter services and attorney requirements to be present. Refer to page 58 for additional information on telehealth sites and monthly data.
F2. Competency Evaluation: Coordinate with forensic mental health system partners.	
Key Milestones	Regular meetings with county stakeholders
Status/End Dates	Ongoing
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> Stakeholder meetings will focus on topics where collaborative work is required to meet the requirements of the Trueblood decision.
Results Achieved & Barriers to Completion	<p>The most recent bi-monthly stakeholder meeting in Pierce convened on Nov. 15, 2023. The next meeting has not yet been scheduled due to staff turn-over at Pierce County.</p> <p>OFMHS partners with King County’s Department of Behavioral Health and Recovery to convene a group to address issues related to Trueblood Class</p>

	Members. This group met monthly from May 2019 – May 2022, when the group moved to a new bi-monthly meeting cadence. Participants include police, behavioral health providers, shelter services, prosecutors, defenders, DRW, DSHS, and more. The last meeting was scheduled for Aug. 19, 2024.
F3. Competency Evaluation: Continue current county-conducted evaluation system until 2018.	
Key Milestones	Establish quality criteria for evaluation reports.
Status/End Dates	Ongoing
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> Obtain data needed from counties in order to meet Court ordered reporting requirements.
Results Achieved & Barriers to Completion	<p>The Quality Assurance program for competency reports began Nov. 1, 2017. Forensic evaluator supervisors use a manual of standards for competency evaluations and audit competency evaluation reports written by their direct reports.</p> <p>During Q4 2024, 73-percent of forensic evaluators had competency evaluation reports audited by supervisors. A total of 134 competency evaluation reports were reviewed in Q4 2024.</p>
F4. Competency Evaluation: Explore and pursue triage system possibilities.	
Key Milestones	Roll out Phase 2.
Status/End Dates	In progress
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> Establish an efficient evaluation to identify individuals who need inpatient services due to a serious mental health condition; who clearly do not require inpatient evaluation services; or who are clearly competent due to changes in their condition since the issuance of an evaluation order (i.e., no longer drug affected).
Results Achieved & Barriers to Completion	<p>As of Jan. 31, 2025, OFMHS has received 1,072 triage referrals from jail staff/defense. Of those referrals, 657 were approved, 313 referrals were denied, and 102 referrals were withdrawn before placement could be made</p> <p>On Nov. 2, 2016, OFMHS began calling jails holding in-custody defendants waiting 14 days for a competency evaluation. The calls notify jail staff of the Triage Consultation and Expedited Admissions process. Since tracking began, approximately 3,998 calls have been made including 10 calls to jails in December 2024. After several years performing these evaluation check calls, DSHS' experience is that they have brought no material benefit to class members and have only soured relations with jail partners. After consult with the plaintiffs, December 2024 was the final month of jail call checks and this metric will not be updated in future editions of this report. Each month staff</p>

	also complete and document administrative checks, within our data systems, on clients nearing 14 days. These checks have proven more valuable at ensuring that scheduled evaluations are completed, and any problems are tracked through to resolution.
F5. Competency Evaluation: Develop Telehealth video-conferencing systems to assist in the completion of evaluations.	
Key Milestones	State-wide implementation and utilization of technology.
Status/End Dates	Ongoing
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> 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.
Results Achieved & Barriers to Completion	<p>The telehealth system began operations in 2018 and has regularly expanded its ongoing operations to include additional partners. OFMHS continues to educate partners on this technology. With the COVID-19 pandemic, telehealth technology saw increased interest from entities seeking to continue evaluations while maximizing safety of clients and staff. As stakeholders have grown increasingly comfortable with telehealth technology, they have gained appreciation for telehealth evaluation’s efficiency for all parties.</p> <p>OFMHS has reached out to over 50 jails statewide to review and further expand telehealth use. Telehealth processes are used in the following county jails: Benton, Chelan, Clallam, Clark¹, Cowlitz², Ferry, Franklin, Grant, Grays Harbor, Island, Jefferson, King (note 2), King-Maleng Regional Justice Center, Okanogan, Pacific, San Juan, Snohomish, Spokane, Stevens, Thurston, Walla Walla, Whatcom, Whitman, and Yakima; in the following local jails: Aberdeen, Enumclaw, Forks, Hoquiam, Issaquah, Kent, Kirkland, Marysville, Nisqually, Puyallup, South Correctional Entity (SCORE), Sunnyside, and Yakima City jails, Airway Heights and Geiger Corrections facilities in Spokane, and in the following tribal jails: Colville Tribes Corrections Detention Facility, Nisqually Tribe Corrections Center, and Yakama Nation Correction & Rehabilitation Facility. DSHS’ competency restoration programs at SCRCP, ESH, WSH, and HCA’s OCRP in Spokane, Pierce, and Southwest Washington counties can also provide videoconferencing and telephonic presence of secondary parties. OFMHS continues to offer support to partners to assist in resolving barriers to telehealth implementation.</p> <p>OFMHS also continues to provide information and support those entities that have implemented a telehealth solution. Additionally, OFMHS has developed a small profile Microsoft Teams Room solution to increase telehealth capabilities in facilities, to reduce technical issues, and to move toward a standardized hardware and software package. This new solution is being</p>

	<p>installed in areas at the state hospitals and BHTCs for use in telehealth evaluations (installation has already been completed in some locations) and is also being offered to jails. The Yakima County Jail the Snohomish County Jail, and the Chelan County Jail have been successfully upgraded to the current telehealth setup. DSHS is also working with the Skagit County Jail to setup telehealth there. An agency e-mail address is available specifically for telehealth issues, and a telehealth committee meets regularly to review current needs and processes.</p> <p>¹Notes the ability for telephonic presence of defense counsel and interpreter in certain cases.</p> <p>²Hybrid process where the evaluator or the defense counsel is present in person to facilitate use of equipment with other parties remotely.</p> <p>Court orders have authorized 15,327 telehealth evaluations since August 2018. Clients or their attorneys have rejected 1.4% of attempts resulting in 15,111 completed telehealth evaluations. For the last 12 months, telehealth evaluations have averaged approximately 364 evaluations per month. This data is current through Feb. 12, 2025.</p>
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G1. Competency Restoration: SH addition 45 beds, WSH addition 40 beds, ESH addition of 50 beds	
Key Milestones	Bed occupancy with forensic patients.
Status/End Dates	Complete
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> Serves overall plan to add beds and expand State Hospital forensic bed capacity to meet Court ordered requirements.
Results Achieved & Barriers to Completion	<p>The Legislature funded the requests to operate 45 additional beds in Steilacoom Unit and the South Hall 5 ward and convert 60 civil beds to 42 forensic beds on two wards at WSH.</p> <p>South Hall's S5 expanded from 15 beds to 30. S5 reached full patient capacity in fall 2018. Steilacoom Unit BHTC opened on WSH's campus in late August 2019.</p> <p>WSH's wards' final configurations resulted in 40 new beds instead of 42, accommodating a seclusion room on each ward. E4 started admitting patients on Feb. 8, 2021, and E3 started admitting patients on Feb. 15, 2021.</p>

	The Legislature funded the request to renovate two 25-bed forensic competency restoration units at ESH. ESH's Ward 1N3 opened June 1, 2020. Ward 3N3 opened Aug. 3, 2020.
G2. Competency Restoration: Coordinate with forensic mental health system partners.	
Key Milestones	Regular meetings with county stakeholders
Status/End Dates	Ongoing
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> To meet or exceed the restoration rates at both state hospitals. Barring trigger events, hard closure date for YCRP was Dec. 31, 2021, and for Cascade Unit was June 30, 2024.
Results Achieved & Barriers to Completion	<p>The last patient transferred from YCRP on July 26, 2021. The program officially closed on Aug. 14. Comprehensive finished all close out activities per the ramp down plan.</p> <p>Cascade Unit began its ramp down at the end of May 2024. On June 11, 2024, all residents had transferred to WSH, SCRCP, or OCRP (only one resident to OCRP). Cascade Unit closed to class members on June 28, 2024.</p>
G3. Competency Restoration: Provide Restoration Treatment at YCRP and at DSHS Behavioral Health & Treatment Center – Maple Lane Campus - Cascade Unit	
Key Milestones	Restore patients to competency.
Status/End Dates	Complete
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> Obtain data needed from counties in order to meet Court ordered reporting requirements.
Results Achieved & Barriers to Completion	<p>The Quality Assurance program for competency reports began Nov. 1, 2017. Forensic evaluator supervisors use a manual of standards for competency evaluations and audit competency evaluation reports written by their direct reports.</p> <p>During Q3 2024, 100-percent of forensic evaluators had competency evaluation reports audited by supervisors. A total of 162 competency evaluation reports were reviewed in Q3 2024.</p>
G4. Competency Restoration: Provide Restoration Treatment at DSHS Behavioral Health & Treatment Center – Steilacoom Unit.	
Key Milestones	Open Steilacoom Unit; Restore patients to competency
Status/End Dates	Complete; Ongoing

Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> Identified alternate facility capacity to meet Trueblood compliance. Collaborated with Court parties to open the facility. To meet or exceed the restoration rates at both state hospitals.
Results Achieved & Barriers to Completion	<p>On Feb. 10th, 2025, the census was 29. It should be noted that the two rooms offline have been repaired and are back online.</p> <p>Currently, there is one vacant IC position and three on-call positions</p> <p>In June 2024, Byron Lockridge was appointed as the interim program director due to Dennis Suarez being on a leave of absence. On December 1st Dennis officially retired and Byron became the permanent program director .There is one RN2 vacancy on NOC shift. The RN4 position was filled in August.</p> <p>On June 1, 2024, Dr. Bolinger started her new role as the Chief Clinical Officer for the Maple Lane and Brockmann Campuses. Her position as Clinical Services Manager was filled on December 16, 2024, by Dr. Woods. Dr. Woods finished NEO in December and started in Steilacoom Unit officially in January</p> <p>The Oct. 15, 2024 quarterly length of stay report indicates Steilacoom Unit and the state hospitals have very similar lengths of stay for 45-day orders. The LOC for 90 days at Steilacoom Unit is lower than the other facilities. Refer to Table 15. OCRP Completed Restoration Orders by Month Court Order Signed for additional data on Steilacoom unit.</p>
G5. Competency Restoration: Implementation of OCRPs, Phase 1	
Key Milestones	Diversion programs are operational.
Status/End Dates	Complete
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> Development and implementation of OCRP in the Pierce, Spokane, and Southwest regions.
Results Achieved & Barriers to Completion	<p>The phase 1 OCRP providers maintained adequate space to accept referrals for all suitable individuals in their regions throughout January.</p> <p>OCRP contractors continue to use support funds to assist with transitional housing and to acquire additional temporary housing and bed placements for OCRP-enrolled persons.</p> <p>Most people ordered to OCRP will not appear in Tables 4c. or 14. Tables 4c. and 14 are restricted to class members, meaning people in jail at the time their competency restoration order is signed. Currently, most people ordered to OCRP are released from jail prior to the court signing the OCRP order. The total number of people enrolled in an Outpatient Competency Restoration Program (regardless of jail status) is provided in the Trueblood semi-annual</p>

report and reported quarterly in the text below within **Table 15. OCRP Completed Restoration Orders by Month Court Order Signed** of this report.

RDA provides periodic OCRP enrollment updates. The revised table counts align with SAR reporting. The counts in this section will not match those in Tables 4c. or 14, which are specific to class members (persons held in jail following an OCRP restoration order, see Tables 4c. or 14, footnote 2).

The OCRP providers ceased using Excel spreadsheets in March 2023 and are entering all data in the Navigator Case Management system.

The Trueblood semi-annual report is the primary reporting mechanism for Trueblood Settlement Agreement implementation programs. Aggregate counts will be provided quarterly in this report for monitoring purposes.

The data below is from July 1, 2020, through September 30, 2024:

- 264 unduplicated individuals enrolled
 - 34 active
 - 230 discharged

- Reasons discharged:
 - 90 opined competent
 - 62 conditional release revoked
 - 28 charges dismissed
 - 6 opined not competent
 - 10 returned to jail
 - 15 inpatient civil psychiatric care
 - 5 opined not restorable
 - 2 deaths
 - 7 legal authority ended
 - 2 inpatient medical care
 - 3 other

- Discharge location:
 - 143 community
 - 41 state hospital
 - 24 jail
 - 5 BHTC
 - 17 unknown

Source: Navigator Case Management system. Review the September 2024 SAR for data definitions:

<https://www.dshs.wa.gov/sites/default/files/BHSIA/FMHS/Trueblood/v5-1Trueblood-Semi-Annual-Report-10-w-Appendices-09302024.pdf>

G6. Competency Restoration: Implementation of OCRPs, Phase 2	
Key Milestones	Diversion programs are operational.
Status/End Dates	Complete
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> Development and implementation of OCRP in the King region.
Results Achieved & Barriers to Completion	<p>The Phase 2 OCRP provider continues to provide transitional supported housing for up to thirteen OCRP-enrolled participants between their two OCRP houses. They are providing Breaking Barriers competency restoration programming in the homes for the people housed there.</p> <p>They also continue to provide OCRP to people who are not enrolled in their OCRP housing. The office-based portion of the Community House OCRP moved to a new office building in January 2025. We are excited that the new space also has a drop-in area where OCRP participants can access additional resources and participate in activities such as yoga.</p>
G7. Competency Restoration: Implementation of OCRPs, Phase 3	
Key Milestones	Diversion programs are operational.
Status/End Dates	Phase 3, July 2023-June 2025
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> Development and implementation of OCRP in the Thurston/Mason and Salish regions.
Results Achieved & Barriers to Completion	Both Olympic Health and Recovery Services and Kitsap Mental Health Services OCRP teams are taking referrals and are serving participants in outpatient competency restoration services.
G8. Competency Restoration: County transport of patients	
Key Milestones	Coordinate with counties to develop transport protocols.
Status/End Dates	Ongoing
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> Ensure timely transport of patients to support delivery of competency services as directed in court order.
Results Achieved & Barriers to Completion	No issues were raised during this reporting period concerning county transport of patients.

H. Diversion Alternatives	
Task	Implement 2E2SSB 5177 (2015) provisions for dismissal of charges & referral to treatment.
Key Milestones	Diversion programs are operational.
Status / End Dates	Ongoing
Anticipated Outcome & Assumptions	<ul style="list-style-type: none"> Prosecutor can dismiss criminal charges without prejudice & refer to community-based mental health services.
Results Achieved & Barriers to Completion	OFMHS liaison and diversion specialist continues to monitor the programs and provides technical assistance as needed to address barriers. The liaison and diversion specialist has engaged the programs with technical assistance, brainstorming ways to overcome challenges. DSHS continues exploring options for enhancement and expansion of these programs.

Note:

By agreement with the Court Monitor, completed requirements were removed from *Table 17* beginning with the August 2024 report and moved to **Table 19**. Archived Achievements.

Data Note:

The data are dynamic, and the most recent results generally will continue to change and become more reliable over time as the data mature. Likewise, due to the Trueblood lawsuit, case prioritization, civil conversion cases, triage cases, periodic lengthy wait times and other considerations, some cases will not show as completed cases in the data until the cases are resolved. The department cautions against comparing the data in this publication to other department publications due to differences in data maturity, time frames, databases, and other sourcing parameters that may not allow for a direct comparison.

Trueblood Programs



Feb. 8, 2016 Court Order Status Report/Updates

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

As of the August 2024 report, several completed requirements have been removed from this table and the removed requirements from April 2020, May 2020, and August 2024 are summarized in **Table 19**. Archived Achievements.

Table 18. Court Order Status Updates

Requirements	Date	Status	Progress Notes
1. Implement a triage system to sort class members waiting for in-jail evaluations by the acuity of their mental illnesses and their current manifestations, by the seriousness of their crimes, and by the amount of resources their cases require:			
C. Reporting on the implementation and effectiveness of the triage plan in Defendants' monthly reports to the Court Monitor.	Beginning April 15, 2016	Ongoing	Refer to 3C. & 4C. below.
2. Eliminate the backlog of class members currently waiting for in-jail evaluations:			
E. Completing evaluations for all backlog cases (any patient waiting more than 14 days at the end of the month).	April 15, 2016	Ongoing	Of the 537 jail-based evaluation orders signed in December 2024, approximately 483 were completed within 14 days, which is 90.0%. This number may change as the data continue to mature.
3. Implement a triage system to sort class members waiting for in-hospital evaluations by the acuity of their mental illnesses and their current manifestations, by the seriousness of their crimes, and by the amount of resources their cases require:			
C. Reporting on the implementation and effectiveness of the triage plan in Defendants' monthly reports to CM.	Beginning April 15, 2016	Ongoing	For additional information, review "F4. Competency Evaluation: Explore and pursue triage system possibilities."

<i>Requirements</i>	<i>Date</i>	<i>Status</i>	<i>Progress Notes</i>
4. Implement a triage system to sort class members waiting for restoration services by the acuity of their mental illnesses and their current manifestations, by the seriousness of their crimes, and by the amount of resources their cases require:			
C. Reporting on the implementation and effectiveness of the triage plan in Defendants' monthly reports to CM.	Beginning April 15, 2016	Ongoing	For additional information, review "F4. Competency Evaluation: Explore and pursue triage system possibilities
5. Report on the implementation status of the CMS Plan of Correction:			
B. Reporting on the implementation status in Defendants' monthly reports to the CM.	Beginning March 15, 2016	Ongoing	<p>DSHS entered into a second System Improvement Agreement with the Centers for Medicare and Medicaid Services. This agreement ran from Nov. 2, 2017-July 2, 2018 and defense counsel shared it with Dr. Mauch on Nov. 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 with CMS. WSH was decertified July 9, 2018. WSH continues to work using Functional Work Teams towards CMS certification. ESH remains accredited by The Joint Commission and CMS certified.</p> <p>The Legislature funded the new hospital in phases, which will be required to meet COPs for CMS certification. The project broke ground on Oct. 17, 2024.</p>
6. Plan for recruiting and staffing 30 beds at WSH after compliance with CMS's terms of participation is achieved in March:			
C. Reporting on the implementation status of the plan and timeframe in Defendants' monthly reports to the CM.	Beginning April 15, 2016	Ongoing	DSHS entered into a second SIA with CMS. This agreement ran from Nov. 2, 2017-July 2, 2018 and defense counsel shared it with Dr. Mauch on Nov. 3, 2017. As a result of a court order in April, the department worked with Plaintiffs

<i>Requirements</i>	<i>Date</i>	<i>Status</i>	<i>Progress Notes</i>
			<p>and the Court Monitor in developing a bed capacity/expansion plan.</p> <p>WSH was resurveyed May 2018 and did not meet all the COP with CMS. WSH was decertified July 9, 2018. WSH continues to work using FWTs towards CMS certification. PSHB Sec. 204 budgeted for the 30 beds at WSH and was completed prior to CMS decertification.</p>
<i>8. Remove barriers to the expenditure of the \$4.8 million in currently allocated diversion funds:</i>			
D. Executing contracts for implementation by the selected providers.	April 15, 2016	Complete	Prosecutorial diversion was funded for FY'24 effective July 1, 2023-June 30, 2024.

Note:

By agreement with the Court Monitor, completed requirements were removed from **Table 17**. Trueblood Implementation Steps beginning with the April 2020, May 2020, and May 2024 reports and moved to **Table 19**. Archived Achievements.

Trueblood Programs



July 7, 2016 Contempt Order Status Updates

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

- (1) Monetary sanctions – fines are imposed on a per class member, per day basis. On the 15th of every month, DSHS is required to submit contempt fines data to the Court. These data were submitted to the Court on August 15, 2016 and will be included in this report, when finalized each month, as Appendices I, J, and K (if applicable);*
- (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.*

Aug. 15, 2016 Order Modifying Permanent Injunction as to In-Jail Competency Evaluations

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

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

DSHS implemented FDS on Aug. 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 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

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

Jail-based evaluation orders	93
Inpatient competency orders	85

(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.

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Trueblood Programs



By agreement with the Court Monitor, completed requirements were removed from *Table 17* beginning with the April 2020, May 2020, and May 2024 reports and moved here to **Table 19**. Archived Achievements.

Table 19. Archived Achievements

Table Source	Title	Task Name	Date Completed	Date Removed
15	Monthly RTF Data for Yakima			
		Monthly data for the current month and the trailing year (13 months), with a year-over-year average comparison	July 2021	October 2021
15	Monthly BHTC Data for Cascade Unit			
		Monthly data for the current month and the trailing year (13 months), with a year-over-year average comparison	June 2024	September 2024
17	Legislative Coordination			
		Implement Engrossed Substitute Senate Bill 6656: Funding applications.	Final recommendations of the Task Force were due December 2020.	August 2024
17	Data Collection and Fiscal Modeling			
		Forensic Data System design/ development	October 2019	August 2024
		FDS Post-implementation Processes	May 2021	August 2024
18	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			
		Producing a triage plan for review and comment	March 2016	April 2020
		Putting the triage plan into effect, after accounting for the comments received	March 2016	April 2020
18	Eliminate the backlog of class members currently waiting for in-jail evaluations			
		Formally notifying DSHS's forensic evaluators and Pierce County's panel evaluators of plan to eliminate the backlog of people waiting for in-jail evaluations, requesting their help in	February 2016	April 2020

<i>Table Source</i>	<i>Title</i>	<i>Task Name</i>	<i>Date Completed</i>	<i>Date Removed</i>
		doing so, and providing plans to get evaluations done through the use of extra duty pay and other methods available		
		Preparing a list of all backlog cases, organized by jail and by county	March 2016	April 2020
		Finalizing recruitment of evaluators to aid in the backlog elimination effort and setting a schedule for the evaluation of each backlog case	March 2016	May 2020
		Initiating the backlog elimination effort	March 2016	May 2020
18	Develop a reliable and valid client-level data system to support better management and accountability of the forensic services system			
		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	May 2024

Note:

Tables are labeled with their number at time of retirement.

Trueblood Programs



Appendices

Appendices A-G: Data Tables; Class Member Evaluation/Restoration Information; Class Member Restoration Information for the Cascade Unit and Steilacoom Unit Programs; Outpatient Competency Restoration Program; and Percent of Court Orders Received Within Three Days

The state submits this file with the DRAFT and FINAL reports, and it includes data tables as well as order received rate data.

Appendix H: Outliers and Delay Comments

The state submits this file with the DRAFT and FINAL report. It contains the outlier data and delay comments.

Appendix I: Calculation of Inpatient Contempt Fines

The state submits this file with the FINAL report only. It contains the calculation of inpatient contempt fines data.

Appendix J: Calculation of Jail-Based Contempt Fines

The state submits this file with the FINAL report only. It contains the calculation of in-jail contempt fines data.

Appendix K: Calculation of Outpatient Contempt Fines (If Applicable)

The state submits this file with the FINAL report only, and it contains the calculation of outpatient contempt fines data (Appendix K only appears in the report during months where outpatient contempt fines are accrued.).

Appendix L: Good Cause Exceptions

The state submits this file with the FINAL report only. It contains the good cause extension request data.