

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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Behavioral Health and Habilitation Administration
Office of Forensic Mental Health Services
PO Box 45050
Olympia, WA 98504-5050
(360) 725-2260

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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 74**.

This monthly report is submitted on Sept. 30, 2025 and primarily covers August 2025 activity. Additionally, this report displays Class Member data for competency services in two periods: July 1-July 31, 2025 and Aug. 1-31, 2025. The July data are considered “mature,” and the August 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

Since Aug. 15, 2024 BHHA’s Western State Hospital, Eastern State Hospital, and DSHS’ Behavioral Health & Treatment Center – Steilacoom Unit inpatient facilities have operated 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 BHHA 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 BHHA facilities are available in the [October 2024 Court Monitor Report](#).***

Analysis of Mature Data: April 1, 2015 Through July 31, 2025

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-July 2025
 - WSH: 326.9
 - ESH: 78.6
 - Both hospitals: 405.5
- Average monthly inpatient evaluation orders signed for April 2015-July 2025
 - WSH: 13.1
 - ESH: 8.5
 - Both hospitals: 21.7
- Average monthly restoration orders signed for April 2015-July 2025
 - WSH: 89.8*
 - ESH: 23.3
 - Both hospitals: 131.8*
 - Hospitals plus Behavioral Health and Treatment Center (BHTCs): 159.4**
- Average monthly BHTC restoration orders signed for August 2018-July 2025
 - BHTCs: 27.6**
- Average monthly OCRP restoration orders signed for Phase 1, 2, and 3 (All OCRP Locations):
 - July 2020-July 2025: 1.8***
 - November 2022-July 2025 (since start of Phase 2 services): 2.8***
 - August 2024-July 2025 (since start of Phase 3 services): 3.5***

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. MLCRP – Cascade Unit closed to patients on June 30, 2024.

*** OCRP treatment began in Phase 1 regions between July 1-Sept. 1, 2020, in the Phase 2 region on Oct. 31, 2022, and in Phase 3 regions between Aug. 1-Oct. 1 2024 and an additional facility in August 2025. 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 July Data

Orders:

- For July 2025, the number of jail-based evaluation orders assigned to WSH increased significantly by 81 orders to 557 (17.0%).
- ESH's jail-based evaluation orders increased moderately in July 2025, from 96 orders to 101 orders (5.2%).
- In July, inpatient evaluation orders at WSH increased from 21 to 23. ESH orders for July increased from one order in June to eight 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 155 restoration orders in July, a significant increase (34.8%) from June's 115 orders. ESH had 46 orders in July, a significant decrease (-14.8%) compared to June's 54 orders.
- In June's BHTC data, at 60 days data maturity, the BHTCs received a total of six restoration orders. This month, the July BHTC data is the initial month of mature data. At this time, 12 restoration orders were received. The July 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. MLCRP – Cascade Unit closed to patients on June 30, 2024.

Wait Times:

- Jail-based 14-day evaluation completion times at WSH decreased slightly (-0.9%) to 11.8 days on average in July 2025, from order to completion. ESH evaluation times increased slightly (3.3%) to 10.9 days in July. The combined average, across the system, stayed at 11.7 days on average to completion. Systemwide on time completion decreased slightly to 91 percent in July.
- The average inpatient evaluation admission wait time at WSH was 4.5 days in June, a significant decrease from 5.4 days in June. ESH's average wait time in July increased moderately to 5.1 days on average from 4.7 days in June. 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 4.7 days in July, a decrease (-4.4%) from 4.9 days in June. The ESH average admission wait time increased (11.6%) to 5.1 days in June, from 4.6 days in June.

Timeliness:

- At WSH, timely jail-based evaluation completion (within 14 days from receipt of order) in July 2025 was 90 percent. ESH's on time completion rate in July was **100 percent**, which they have now maintained for **six consecutive months**.
- At WSH, July's overall timeliness for inpatient evaluation admissions **stayed at a 100 percent** on time completion rate within 7 days from receipt of order. ESH's on time completion rate remained at **100 percent** for the **fourth consecutive month**.
- At both hospitals and the BHTCs combined, overall timeliness for inpatient restoration admissions for July decreased slightly to a 97 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 July, the total number of outliers among the three legal authorities (in-jail evaluations, inpatient evaluations, and inpatient restorations) increased from three to four. In-jail outliers increased from three to four, inpatient evaluations outliers remained at zero, and inpatient restorations outliers remained at zero.
- In July, the maximum days waiting for an in-jail evaluations outlier increased from 25 days to 30 days.
- In July, there were zero inpatient evaluations outliers.
- In July, there were zero inpatient restorations outliers.

Civil Conversion Cases

As of Aug. 31, 2025, there were 68 patients in-residence at ESH that had been converted from a forensic legal authority to a civil legal authority, with 12 patients having a special finding of violent felony (SFVF, formerly HB1114) determination. At WSH there were 169 civil conversion patients, with 47 SFVF determinations.

Table 1a. Long Term Civil Commitment: Patients with a Special Finding of Violent Felony (SFVF)

| | ESH | WSH | Total |
|---|-----|-----|-------|
| Total patients with 90-, 180-, and 365-Day Civil Conversion Commitments | 68 | 169 | 237 |
| Special Finding of Violent Felony (SFVF) | 12 | 47 | 59 |
| Not Special Finding of Violent Felony (SFVF) | 56 | 122 | 178 |
| Patients this reporting period who have received their first 90-, 180-, and 365-Day Civil Conversion Order | 10 | 30 | 40 |
| Special Finding of Violent Felony (SFVF) | 0 | 2 | 2 |
| Not Special Finding of Violent Felony (SFVF) | 10 | 28 | 38 |

Data Note:

Total patients is based on the in-residence population as of the snapshot date Aug. 31, 2025. Current Reporting Period is Aug. 1 – Aug. 31, 2025.

BHHA continues efforts to transfer non-SFVF civil patients out of the state hospitals to other state run facilities and HCA contracted Long-Term Civil Commitment (LTCC) facilities. Civil beds at Olympic Heritage Behavioral Health (OHBH) and the Oak Unit at Maple Lane continue to be used to their fullest extent, and the department is in routine communication with LTCC facilities regarding their bed availability. **Between March 2023 and June 30, 2025, 242 civil conversion patients from ESH and WSH transferred to LTCC beds.** LTCC facility transfer efforts do have limitations and each facility has varying restrictions on the patient population that they can serve, with common disqualifying criteria including complex medical needs, neurocognitive disorders, traumatic brain injuries, and significant behavioral issues.

Table 1b. Long Term Civil Commitment: Civil Conversion Patients Transferred from State Hospitals to long-term Civil Commitment Facilities

| Transferred to Long Term Civil Commitment (LTCC) Facility | 2023 total | Q1-2024 | Q2-2024 | Q3-2024 | Q4-2024 | Q1-2025 | Q2-2025 | Total |
|---|------------|-----------|-----------|-----------|-----------|-----------|-----------|------------|
| Navos | 14 | 5 | 13 | 6 | 2 | 4 | 6 | 50 |
| Recovery International | 5 | 4 | 5 | 2 | 4 | 7 | 8 | 35 |
| Telecare | 3 | 2 | 9 | 15 | 18 | 13 | 11 | 71 |
| University of Washington | | | 1 | 12 | | 7 | 3 | 23 |
| Wellfound | 24 | 13 | 8 | 5 | 2 | | 1 | 53 |
| South Sound Behavioral | 8 | | | | | | | 8 |
| Astria | | 2 | | | | | | 2 |
| Totals: | 54 | 26 | 36 | 40 | 26 | 31 | 29 | 242 |

Data Note:

Prior versions of this table included several Civil Commitment patients that were not civil conversion patients, as well as community partners that are no longer receiving patients.

Civil Conversion patients with an SFVF determination are not under consideration for transfer to LTCC facilities because of the public safety procedures set forth in RCW 10.77.139 and are currently only treated at state facilities. The department has plans to transition approximately 32 SFVF patients to the Baker Unit on the Maple Lane Campus once they open.

Table 1c. Long Term Civil Commitment: Civil Conversion Patients Transferred from State Hospitals to other State-run inpatient facility

| Transferred to Other State Facility | Q2-2024 | Q3-2024 | Q4-2024 | Q1-2025 | Q2-2025 | Total |
|-------------------------------------|-----------|-----------|-----------|-----------|-----------|------------|
| Maple Lane Oak Unit | 11 | 3 | 8 | 10 | 9 | 41 |
| Olympic Heritage Behavioral Health | 8 | 20 | 11 | 20 | 33 | 92 |
| Totals: | 19 | 23 | 19 | 30 | 42 | 133 |

Data Note:

Data matures over time, and these numbers may change from previous versions of this report.

Outlier Cases (Mature) July 2025

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 July 2025.
- 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 | 21 | 30 |
| Inpatient Evaluations | 0 | 0 | 0 |
| Inpatient Restorations | 0 | 0 | 0 |

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 2b. 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 | | | |
| 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 | | | |
| 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 | | | |
| Attorney No Response for Scheduling PR Eval | | | |
| Pending | | | |
| Unknown | 4 | | |
| Not Applicable ² | | | |

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 2c. 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 | | | |
| 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 | | | |
| Late Receipt of Court Order | | | |
| 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 July 2025, are mature Class Member status data. At the bottom of the table, August'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 | | | |
| Aug-24 | 485 | 0.4 | 0.0 | 0.6 | 0.0 | n/a | n/a | 482 | 12.3 | 13.0 | 81 % | 86 % | 88 % |
| 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 | 439 | 0.6 | 0.0 | 0.7 | 0.0 | n/a | n/a | 419 | 12.2 | 13.0 | 84 % | 88 % | 88 % |
| Jan-25 | 446 | 0.6 | 0.0 | 0.7 | 0.0 | n/a | n/a | 448 | 12.3 | 13.0 | 79 % | 81 % | 81 % |
| Feb-25 | 431 | 0.3 | 0.0 | 0.6 | 0.0 | n/a | n/a | 434 | 11.4 | 12.0 | 87 % | 89 % | 90 % |
| Mar-25 | 530 | 0.3 | 0.0 | 0.6 | 0.0 | n/a | n/a | 503 | 10.9 | 12.0 | 87 % | 91 % | 91 % |
| Apr-25 | 463 | 0.4 | 0.0 | 0.6 | 0.0 | n/a | n/a | 489 | 11.5 | 13.0 | 87 % | 91 % | 92 % |
| May-25 | 465 | 0.4 | 0.0 | 0.7 | 0.0 | n/a | n/a | 455 | 11.8 | 12.0 | 86 % | 90 % | 90 % |
| Jun-25 | 476 | 0.3 | 0.0 | 0.6 | 0.0 | n/a | n/a | 462 | 11.9 | 13.0 | 88 % | 92 % | 92 % |
| Jul-25 | 557 | 0.5 | 0.0 | 0.6 | 0.0 | 39.0 | 39.0 | 549 | 11.8 | 13.0 | 84 % | 89 % | 90 % |
| Aug-25 | 477 | 0.3 | 0.0 | 0.5 | 0.0 | 6.1 | 5.0 | 499 | 12.0 | 13.0 | 87 % | 92 % | 92 % |

Table 3 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 BHHA - 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 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 BHHA 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 | | | |
| 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 | n/a | n/a | 13 | 5.7 | 6.0 | 100 % | 100 % | 100 % |
| Feb-25 | 24 | 0.3 | 0.0 | 0.0 | 0.0 | n/a | n/a | 20 | 5.2 | 6.0 | 95 % | 100 % | 100 % |
| Mar-25 | 21 | 0.3 | 0.0 | 0.2 | 0.0 | n/a | n/a | 17 | 5.8 | 5.0 | 82 % | 88 % | 94 % |
| Apr-25 | 14 | 0.1 | 0.0 | 0.2 | 0.0 | n/a | n/a | 18 | 4.9 | 6.0 | 94 % | 94 % | 94 % |
| May-25 | 12 | 0.1 | 0.0 | 0.1 | 0.0 | n/a | n/a | 18 | 4.0 | 2.0 | 94 % | 94 % | 94 % |
| Jun-25 | 21 | 0.5 | 0.0 | 0.0 | 0.0 | n/a | n/a | 20 | 5.1 | 5.0 | 95 % | 100 % | 100 % |
| Jul-25 | 23 | 0.6 | 0.0 | 0.3 | 0.0 | n/a | n/a | 23 | 4.5 | 4.0 | 96 % | 100 % | 100 % |
| Aug-25 | 19 | 0.2 | 0.0 | 0.1 | 0.0 | n/a | n/a | 20 | 3.8 | 3.0 | 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 BHHA - 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 BHHA 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 | | | |
| 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 | 124 | 1.3 | 0.0 | 0.0 | 0.0 | n/a | n/a | 131 | 6.0 | 6.0 | 92 % | 95 % | 96 % |
| Nov-24 | 103 | 1.1 | 0.0 | 0.2 | 0.0 | n/a | n/a | 111 | 6.5 | 7.0 | 80 % | 92 % | 93 % |
| Dec-24 | 125 | 1.5 | 0.0 | 0.3 | 0.0 | n/a | n/a | 125 | 5.9 | 6.0 | 84 % | 90 % | 94 % |
| Jan-25 | 132 | 0.9 | 0.0 | 0.0 | 0.0 | n/a | n/a | 124 | 6.6 | 6.0 | 89 % | 94 % | 97 % |
| Feb-25 | 98 | 1.1 | 0.0 | 0.0 | 0.0 | n/a | n/a | 94 | 5.6 | 6.0 | 90 % | 95 % | 98 % |
| Mar-25 | 131 | 1.0 | 0.0 | 0.1 | 0.0 | n/a | n/a | 134 | 5.2 | 5.0 | 96 % | 99 % | 99 % |
| Apr-25 | 136 | 0.8 | 0.0 | 0.0 | 0.0 | n/a | n/a | 152 | 4.3 | 4.0 | 97 % | 97 % | 100 % |
| May-25 | 137 | 1.1 | 0.0 | 0.1 | 0.0 | n/a | n/a | 130 | 4.9 | 5.0 | 95 % | 96 % | 99 % |
| Jun-25 | 115 | 0.9 | 0.0 | 0.1 | 0.0 | n/a | n/a | 123 | 4.7 | 5.0 | 94 % | 96 % | 99 % |
| Jul-25 | 155 | 0.7 | 0.0 | 0.0 | 0.0 | n/a | n/a | 129 | 4.6 | 5.0 | 92 % | 93 % | 97 % |
| Aug-25 | 111 | 0.5 | 0.0 | 0.0 | 0.0 | 3.0 | 3.0 | 131 | 5.0 | 5.0 | 95 % | 95 % | 99 % |

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 BHHA - 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 BHHA 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 | | | |
| 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 | 19 | 2.8 | 0.0 | 0.1 | 0.0 | n/a | n/a | 20 | 5.4 | 6.0 | 100 % | 100 % | 100 % |
| Nov-24 | 6 | 10.1 | 1.0 | 0.0 | 0.0 | n/a | n/a | 9 | 12.3 | 6.0 | 78 % | 78 % | 78 % |
| 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 | 14 | 0.1 | 0.0 | 0.0 | 0.0 | n/a | n/a | 13 | 5.8 | 6.0 | 92 % | 92 % | 100 % |
| Feb-25 | 11 | 0.2 | 0.0 | 0.0 | 0.0 | n/a | n/a | 11 | 5.0 | 6.0 | 100 % | 100 % | 100 % |
| Mar-25 | 14 | 0.5 | 0.0 | 0.0 | 0.0 | n/a | n/a | 16 | 5.9 | 6.0 | 88 % | 94 % | 100 % |
| Apr-25 | 8 | 0.1 | 0.0 | 0.0 | 0.0 | n/a | n/a | 6 | 6.0 | 6.0 | 67 % | 83 % | 100 % |
| May-25 | 11 | 0.5 | 0.0 | 0.0 | 0.0 | n/a | n/a | 11 | 5.8 | 7.0 | 100 % | 100 % | 100 % |
| Jun-25 | 6 | 0.1 | 0.0 | 0.0 | 0.0 | n/a | n/a | 6 | 4.8 | 5.5 | 83 % | 83 % | 83 % |
| Jul-25 | 12 | 0.7 | 0.0 | 0.0 | 0.0 | n/a | n/a | 14 | 6.4 | 6.0 | 79 % | 86 % | 93 % |
| Aug-25 | 10 | 0.1 | 0.0 | 0.3 | 0.0 | n/a | n/a | 8 | 6.6 | 7.0 | 88 % | 100 % | 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 BHHA - 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 BHHA 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).

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. In August-October 2024, Phase 3 OCRP programs covering five additional counties and two additional BHASO regions began services. A third Phase 3 OCRP facility opened in August 2025. 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 Aug. 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 17**. Trueblood Implementation Steps of this report. The OCRP update in Table 17 begins on **page 66** 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 | | | | | | |
| 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 | n/a | n/a | 5 | 10.4 | 8.0 | 40 % | 80 % | 80 % |
| Feb-25 | 7 | 0.1 | 0.0 | 0.0 | 0.0 | n/a | n/a | 7 | 3.3 | 2.0 | 86 % | 86 % | 86 % |
| Mar-25 | 1 | 0.0 | 0.0 | 0.0 | 0.0 | n/a | n/a | 2 | 11.5 | 11.5 | 50 % | 50 % | 50 % |
| Apr-25 | 5 | 0.4 | 0.0 | 0.2 | 0.0 | n/a | n/a | 4 | 4.8 | 5.5 | 100% | 100% | 100% |
| May-25 | 1 | 0.5 | 0.5 | 0.0 | 0.0 | n/a | n/a | 2 | 2.5 | 2.5 | 100% | 100% | 100% |
| Jun-25 | 3 | 0.3 | 0.0 | 0.0 | 0.0 | n/a | n/a | 0 | n/a | n/a | n/a | n/a | n/a |
| Jul-25 | 4 | 0.1 | 0.0 | 0.0 | 0.0 | 33.0 | 33.0 | 3 | 2.3 | 2.0 | 100% | 100% | 100% |
| Aug-25 | 6 | 0.3 | 0.0 | 0.0 | 0.0 | 22.0 | 22.0 | 8 | 25.4 | 5.0 | 63 % | 63 % | 63 % |

Table 5c. Data Notes:

¹**The OCRP was implemented July 1, 2020.** The data are pulled from the BHHA 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 BHHA 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).

Data Tables 6 Through 11

Table 6. Class Member Status Eastern State Hospital-Jail-based Competency Evaluations

| TABLE 6. Class Member Status Eastern State Hospital – Jail-based Competency Evaluations ¹ | | | | | | | | | | | | | |
|--|----------------------------------|---|--------|-------------------------------|--------|---|--------|-------------------------------------|---|--------|---|---|--|
| MONTH | Court Orders Signed ² | Days from order signature to ³ : | | | | | | Court Orders Completed ⁴ | Days from order signed to completion ⁵ | | within 14 days from order signature date ^{5,6} | within 14 days from receipt of order ^{5,6} | within 14 days from receipt of order or 21 days from order signature date ⁵ |
| | | hospital receipt of order | | hospital receipt of discovery | | end of reporting month for incomplete referrals | | | | | | | |
| | | Average | Median | Average | Median | Average | Median | | Average | Median | | | |
| Aug-24 | 120 | 0.6 | 0.0 | 1.4 | 1.0 | n/a | n/a | 118 | 10.6 | 12.0 | 86 % | 99 % | 100 % |
| Sep-24 | 96 | 0.5 | 0.0 | 0.8 | 0.0 | n/a | n/a | 105 | 11.2 | 13.0 | 80 % | 97 % | 99 % |
| Oct-24 | 126 | 0.8 | 0.0 | 1.6 | 0.0 | n/a | n/a | 110 | 10.2 | 11.0 | 90 % | 100 % | 100 % |
| Nov-24 | 78 | 1.4 | 0.0 | 2.4 | 1.0 | n/a | n/a | 92 | 11.8 | 13.0 | 85 % | 93 % | 100 % |
| Dec-24 | 99 | 1.0 | 0.0 | 1.9 | 1.0 | n/a | n/a | 107 | 10.8 | 12.0 | 87 % | 99 % | 100 % |
| Jan-25 | 107 | 0.8 | 0.0 | 1.4 | 1.0 | n/a | n/a | 88 | 11.4 | 12.5 | 86 % | 99 % | 99 % |
| Feb-25 | 95 | 0.6 | 0.0 | 1.4 | 0.0 | n/a | n/a | 89 | 11.9 | 13.0 | 87 % | 100 % | 100 % |
| Mar-25 | 116 | 0.7 | 0.0 | 1.6 | 0.0 | n/a | n/a | 122 | 11.6 | 13.0 | 88 % | 99 % | 100 % |
| Apr-25 | 102 | 0.6 | 0.0 | 1.2 | 0.0 | n/a | n/a | 116 | 11.1 | 12.0 | 89 % | 98 % | 100 % |
| May-25 | 85 | 1.0 | 0.0 | 1.9 | 1.0 | n/a | n/a | 76 | 11.4 | 13.0 | 86 % | 93 % | 100 % |
| Jun-25 | 96 | 0.4 | 0.0 | 1.4 | 0.0 | n/a | n/a | 106 | 10.6 | 12.0 | 89 % | 100 % | 100 % |
| Jul-25 | 101 | 0.5 | 0.0 | 1.2 | 0.0 | n/a | n/a | 97 | 10.9 | 13.0 | 88 % | 100 % | 100 % |
| Aug-25 | 108 | 0.5 | 0.0 | 1.2 | 1.0 | 5.1 | 5.0 | 88 | 11.3 | 13.0 | 89 % | 100 % | 100 % |

Table 6 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 BHHA - 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 BHHA 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 7. Class Member Status Eastern State Hospital-Inpatient Competency Services

| TABLE 7. Class Member Status Eastern State Hospital – Inpatient Competency Services (Inpatient Evaluations) ¹ | | | | | | | | | | | | | |
|--|----------------------------------|---|--------|-------------------------------|--------|---|--------|-------------------------------------|---|--------|---|--|--|
| MONTH | Court Orders Signed ² | Days from order signature to ³ : | | | | | | Court Orders Completed ⁴ | Days from order signed to completion ⁵ | | Percent complete within 7 days from order signature date ^{5,6} | Percent completed within 7 days from receipt of order ^{5,6} | Percent completed within 7 days from receipt of order or within 14 days from order signature date ^{5,6} |
| | | hospital receipt of order | | hospital receipt of discovery | | end of reporting month for incomplete referrals | | | | | | | |
| | | Average | Median | Average | Median | Average | Median | | Average | Median | | | |
| Aug-24 | 10 | 0.3 | 0.0 | 3.3 | 0.0 | n/a | n/a | 8 | 6.0 | 6.5 | 75 % | 100 % | 100 % |
| Sep-24 | 5 | 0.0 | 0.0 | 0.0 | 0.0 | n/a | n/a | 8 | 6.9 | 4.5 | 63 % | 63 % | 63 % |
| Oct-24 | 3 | 0.3 | 0.0 | 0.7 | 1.0 | n/a | n/a | 2 | 5.0 | 5.0 | 100 % | 100 % | 100 % |
| Nov-24 | 9 | 1.0 | 1.0 | 0.2 | 0.0 | n/a | n/a | 8 | 7.0 | 7.0 | 75 % | 75 % | 75 % |
| Dec-24 | 10 | 0.8 | 0.0 | 1.5 | 0.0 | n/a | n/a | 11 | 4.6 | 4.0 | 82 % | 100 % | 100 % |
| Jan-25 | 11 | 0.8 | 0.0 | 2.8 | 2.5 | n/a | n/a | 10 | 5.0 | 5.0 | 70 % | 90 % | 100 % |
| Feb-25 | 12 | 3.4 | 0.0 | 2.8 | 0.0 | n/a | n/a | 10 | 6.1 | 6.5 | 80 % | 90 % | 90 % |
| Mar-25 | 3 | 5.7 | 0.0 | 0.0 | 0.0 | n/a | n/a | 7 | 10.3 | 6.0 | 57 % | 57 % | 71 % |
| Apr-25 | 6 | 0.0 | 0.0 | 0.0 | 0.0 | n/a | n/a | 6 | 4.7 | 4.5 | 100 % | 100 % | 100 % |
| May-25 | 8 | 0.0 | 0.0 | 0.4 | 0.0 | n/a | n/a | 6 | 4.5 | 4.0 | 67 % | 67 % | 100 % |
| Jun-25 | 1 | 0.3 | 0.0 | 0.3 | 0.0 | n/a | n/a | 3 | 4.7 | 5.0 | 100 % | 100 % | 100 % |
| Jul-25 | 8 | 0.1 | 0.0 | 0.2 | 0.0 | n/a | n/a | 8 | 5.1 | 6.0 | 100 % | 100 % | 100 % |
| Aug-25 | 15 | 0.2 | 0.0 | 0.3 | 0.0 | n/a | n/a | 15 | 4.7 | 5.0 | 100 % | 100 % | 100 % |

Table 7 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 BHHA - 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 BHHA 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 8. Class Member Status Eastern State Hospital-Inpatient Competency Restoration Services

| TABLE 8. Class Member Status Eastern State Hospital – Inpatient Competency Services (Restorations) ¹ | | | | | | | | | | | | | |
|---|----------------------------------|---|--------|-------------------------------|--------|---|--------|-------------------------------------|---|--------|---|--|--|
| MONTH | Court Orders Signed ² | Days from order signature to ³ : | | | | | | Court Orders Completed ⁴ | Days from order signed to completion ⁵ | | Percent complete within 7 days from order signature date ^{5,6} | Percent completed within 7 days from receipt of order ^{5,6} | Percent completed within 7 days from receipt of order or within 14 days from order signature date ^{5,6} |
| | | hospital receipt of order | | hospital receipt of discovery | | end of reporting month for incomplete referrals | | | | | | | |
| | | Average | Median | Average | Median | Average | Median | | Average | Median | | | |
| Aug-24 | 49 | 1.3 | 0.0 | 0.0 | 0.0 | n/a | n/a | 52 | 6.9 | 7.0 | 71 % | 96 % | 98 % |
| Sep-24 | 31 | 2.7 | 0.0 | 0.0 | 0.0 | n/a | n/a | 29 | 6.1 | 6.0 | 79 % | 90 % | 90 % |
| Oct-24 | 23 | 3.8 | 0.5 | 0.4 | 0.0 | n/a | n/a | 22 | 6.1 | 5.5 | 73 % | 86 % | 86 % |
| Nov-24 | 30 | 2.7 | 0.0 | 0.0 | 0.0 | n/a | n/a | 34 | 6.6 | 6.0 | 68 % | 85 % | 85 % |
| Dec-24 | 36 | 2.0 | 0.0 | 0.0 | 0.0 | n/a | n/a | 34 | 7.3 | 6.0 | 94 % | 94 % | 94 % |
| Jan-25 | 51 | 2.2 | 0.0 | 0.1 | 0.0 | n/a | n/a | 50 | 5.7 | 6.0 | 84 % | 88 % | 88 % |
| Feb-25 | 35 | 2.8 | 0.0 | 0.0 | 0.0 | n/a | n/a | 38 | 6.8 | 6.5 | 79 % | 82 % | 92 % |
| Mar-25 | 42 | 1.4 | 0.0 | 0.1 | 0.0 | n/a | n/a | 42 | 5.9 | 5.5 | 95 % | 95 % | 95 % |
| Apr-25 | 46 | 0.4 | 0.0 | 0.0 | 0.0 | n/a | n/a | 39 | 4.2 | 4.0 | 100 % | 100 % | 100 % |
| May-25 | 30 | 0.2 | 0.0 | 0.0 | 0.0 | n/a | n/a | 36 | 4.6 | 4.0 | 86 % | 86 % | 86 % |
| Jun-25 | 54 | 0.5 | 0.0 | 0.1 | 0.0 | n/a | n/a | 43 | 5.1 | 6.0 | 77 % | 91 % | 100 % |
| Jul-25 | 46 | 1.0 | 0.0 | 0.0 | 0.0 | n/a | n/a | 53 | 5.0 | 6.0 | 96 % | 100 % | 100 % |
| Aug-25 | 40 | 1.2 | 0.0 | 0.0 | 0.0 | 2.5 | 2.0 | 43 | 6.3 | 6.0 | 91 % | 93 % | 95 % |

Table 8 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 BHHA - 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 BHHA 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 9. Class Member Status at WSH and ESH (Totals)-Jail-based Competency Evaluations

| TABLE 9. Class Member Status at WSH and ESH (Totals) – Jail-based Competency Evaluations ¹ | | | | | | | | | | | | | |
|---|----------------------------------|---|--------|-------------------------------|--------|---|--------|-------------------------------------|---|--------|---|---|--|
| MONTH | Court Orders Signed ² | Days from order signature to ³ : | | | | | | Court Orders Completed ⁴ | Days from order signed to completion ⁵ | | within 14 days from order signature date ^{5,6} | within 14 days from receipt of order ^{5,6} | within 14 days from receipt of order or 21 days from order signature date ^{5,6} |
| | | hospital receipt of order | | hospital receipt of discovery | | end of reporting month for incomplete referrals | | | | | | | |
| | | Average | Median | Average | Median | Average | Median | | Average | Median | | | |
| Aug-24 | 605 | 0.4 | 0.0 | 0.7 | 0.0 | n/a | n/a | 600 | 12.0 | 13.0 | 82 % | 89 % | 91 % |
| Sep-24 | 547 | 0.3 | 0.0 | 0.7 | 0.0 | n/a | n/a | 555 | 12.6 | 13.0 | 82 % | 88 % | 89 % |
| Oct-24 | 626 | 0.4 | 0.0 | 0.7 | 0.0 | n/a | n/a | 631 | 12.4 | 13.0 | 82 % | 88 % | 88 % |
| Nov-24 | 432 | 0.5 | 0.0 | 0.9 | 0.0 | n/a | n/a | 477 | 12.1 | 13.0 | 84 % | 88 % | 90 % |
| Dec-24 | 538 | 0.7 | 0.0 | 0.9 | 0.0 | n/a | n/a | 526 | 11.9 | 13.0 | 85 % | 90 % | 90 % |
| Jan-25 | 553 | 0.6 | 0.0 | 0.8 | 0.0 | n/a | n/a | 536 | 12.2 | 13.0 | 80 % | 84 % | 84 % |
| Feb-25 | 526 | 0.3 | 0.0 | 0.8 | 0.0 | n/a | n/a | 523 | 11.5 | 13.0 | 87 % | 91 % | 91 % |
| Mar-25 | 646 | 0.4 | 0.0 | 0.8 | 0.0 | n/a | n/a | 625 | 11.1 | 12.0 | 87 % | 93 % | 93 % |
| Apr-25 | 565 | 0.4 | 0.0 | 0.7 | 0.0 | n/a | n/a | 605 | 11.4 | 13.0 | 87 % | 92 % | 93 % |
| May-25 | 550 | 0.5 | 0.0 | 0.8 | 0.0 | n/a | n/a | 531 | 11.7 | 12.0 | 86 % | 90 % | 92 % |
| Jun-25 | 572 | 0.3 | 0.0 | 0.7 | 0.0 | n/a | n/a | 568 | 11.7 | 13.0 | 88 % | 93 % | 94 % |
| Jul-25 | 658 | 0.5 | 0.0 | 0.7 | 0.0 | 39.0 | 39.0 | 646 | 11.7 | 13.0 | 84 % | 91 % | 91 % |
| Aug-25 | 585 | 0.4 | 0.0 | 0.6 | 0.0 | 5.8 | 5.0 | 587 | 11.9 | 13.0 | 87 % | 93 % | 94 % |

Table 9 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 BHHA - 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 BHHA 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 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 | | | |
| 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 | n/a | n/a | 23 | 5.4 | 5.0 | 87 % | 96 % | 100 % |
| Feb-25 | 36 | 1.4 | 0.0 | 0.8 | 0.0 | n/a | n/a | 30 | 5.5 | 6.0 | 90 % | 97 % | 97 % |
| Mar-25 | 24 | 1.4 | 0.0 | 0.2 | 0.0 | n/a | n/a | 24 | 7.1 | 5.0 | 75 % | 79 % | 88 % |
| Apr-25 | 21 | 0.1 | 0.0 | 0.2 | 0.0 | n/a | n/a | 25 | 4.7 | 6.0 | 96 % | 96 % | 96 % |
| May-25 | 20 | 0.0 | 0.0 | 0.2 | 0.0 | n/a | n/a | 24 | 4.1 | 3.5 | 88 % | 88 % | 96 % |
| Jun-25 | 22 | 0.5 | 0.0 | 0.0 | 0.0 | n/a | n/a | 23 | 5.0 | 5.0 | 96 % | 100 % | 100 % |
| Jul-25 | 31 | 0.5 | 0.0 | 0.3 | 0.0 | n/a | n/a | 31 | 4.6 | 5.0 | 97 % | 100 % | 100 % |
| Aug-25 | 34 | 0.2 | 0.0 | 0.1 | 0.0 | n/a | n/a | 35 | 4.2 | 4.0 | 100 % | 100 % | 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 BHHA - 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 BHHA 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 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 | | | |
| 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 | 197 | 1.2 | 0.0 | 0.0 | 0.0 | n/a | n/a | 187 | 6.3 | 6.0 | 88 % | 93 % | 95 % |
| Feb-25 | 144 | 1.5 | 0.0 | 0.0 | 0.0 | n/a | n/a | 143 | 5.9 | 6.0 | 88 % | 92 % | 97 % |
| Mar-25 | 187 | 1.0 | 0.0 | 0.1 | 0.0 | n/a | n/a | 192 | 5.4 | 5.0 | 95 % | 97 % | 98 % |
| Apr-25 | 190 | 0.7 | 0.0 | 0.0 | 0.0 | n/a | n/a | 197 | 4.3 | 5.0 | 97 % | 97 % | 100 % |
| May-25 | 178 | 0.9 | 0.0 | 0.1 | 0.0 | n/a | n/a | 177 | 4.9 | 5.0 | 93 % | 94 % | 97 % |
| Jun-25 | 175 | 0.8 | 0.0 | 0.1 | 0.0 | n/a | n/a | 172 | 4.8 | 5.0 | 90 % | 94 % | 99 % |
| Jul-25 | 213 | 0.8 | 0.0 | 0.0 | 0.0 | n/a | n/a | 196 | 4.8 | 5.0 | 92 % | 94 % | 97 % |
| Aug-25 | 161 | 0.6 | 0.0 | 0.0 | 0.0 | 2.6 | 2.0 | 182 | 5.4 | 5.0 | 93 % | 95 % | 98 % |

Table 11 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 BHHA - 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 BHHA 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".

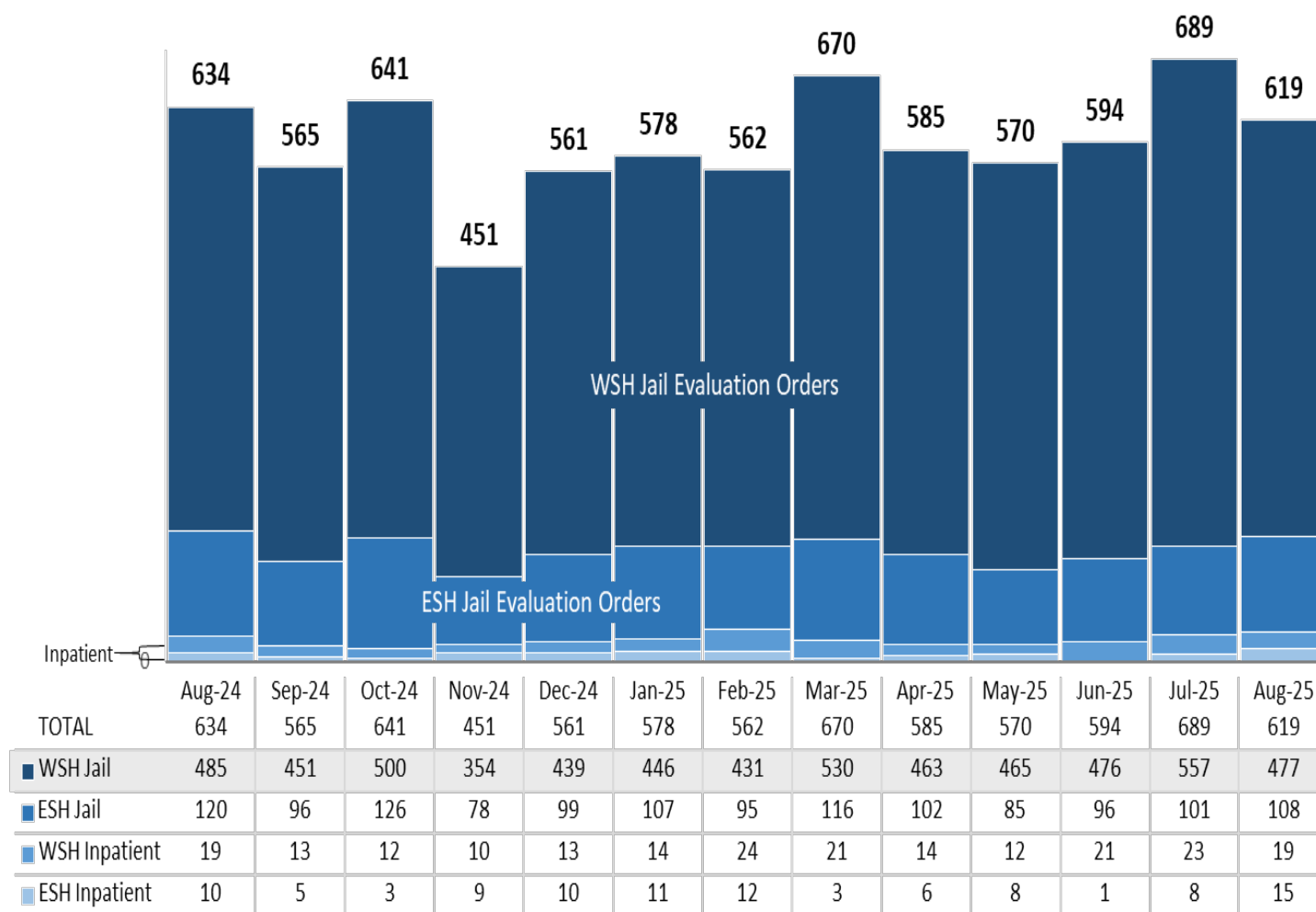
To comply with the new requirements, this report captures two additional sets of compliance information beginning in May 2017. The first is percentage of orders completed within 7 days from receipt of order (if the order was received within 0 and 7 days from order signature date) (or 7 days from the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

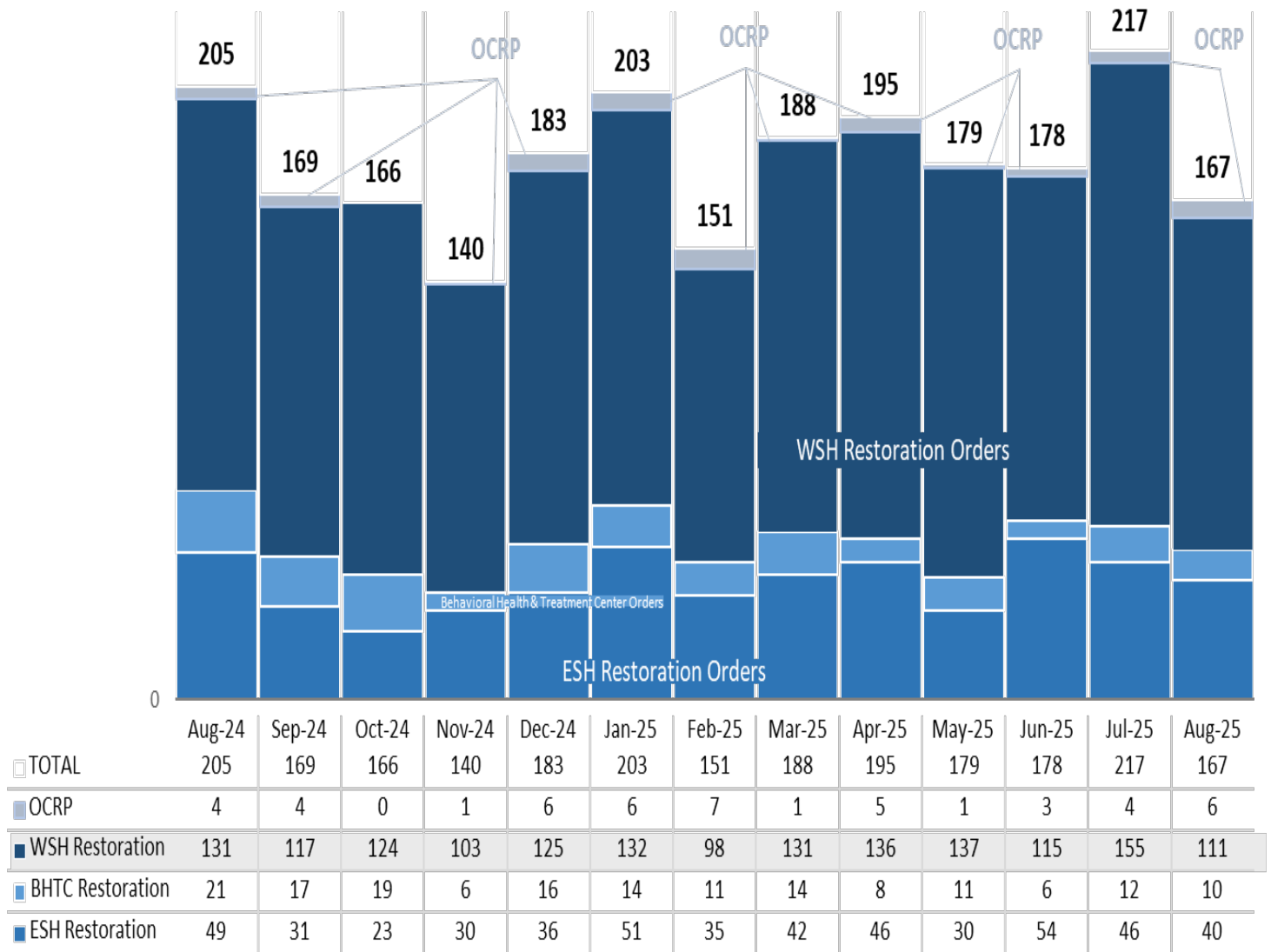
The following figures, Figures 1-6, present “first look” August 2025 data. The data are subject to change as they mature over a longer time horizon.

Figure 1. Signed Evaluation Orders for Trueblood Class Members



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

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

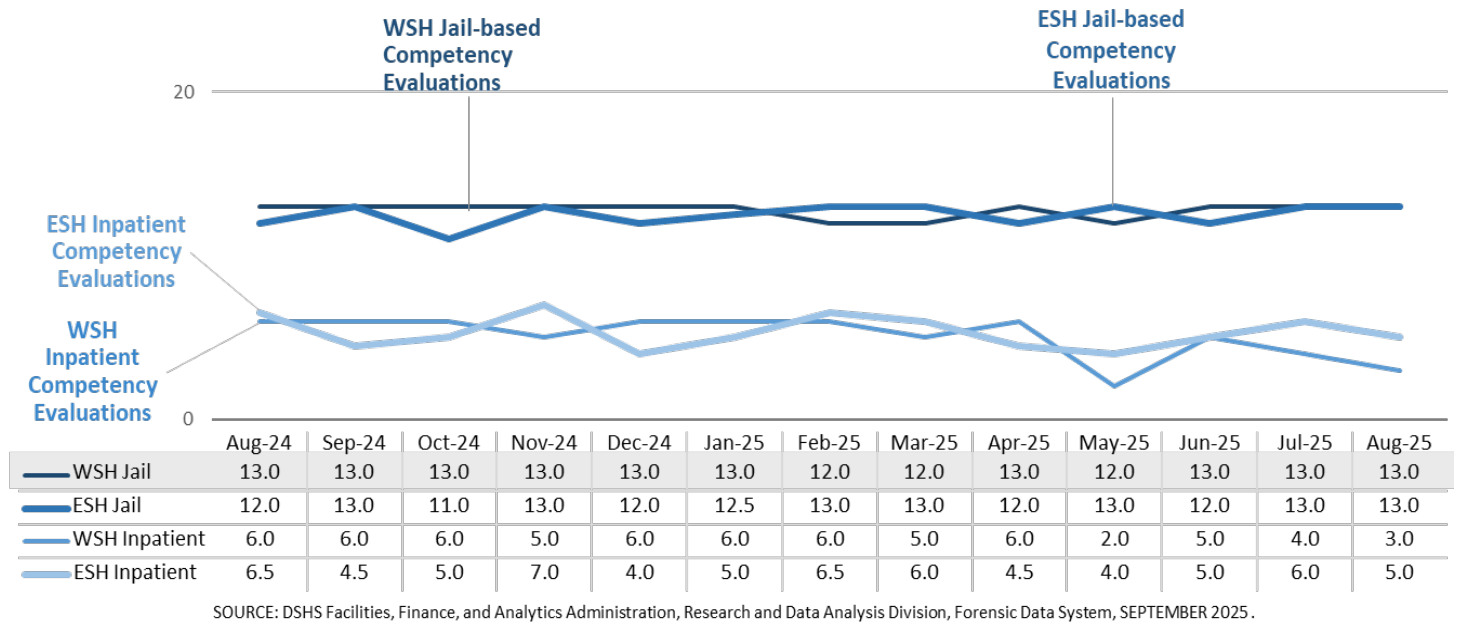


Figure 4. Average Days from Court Order Signature to Completed Evaluation

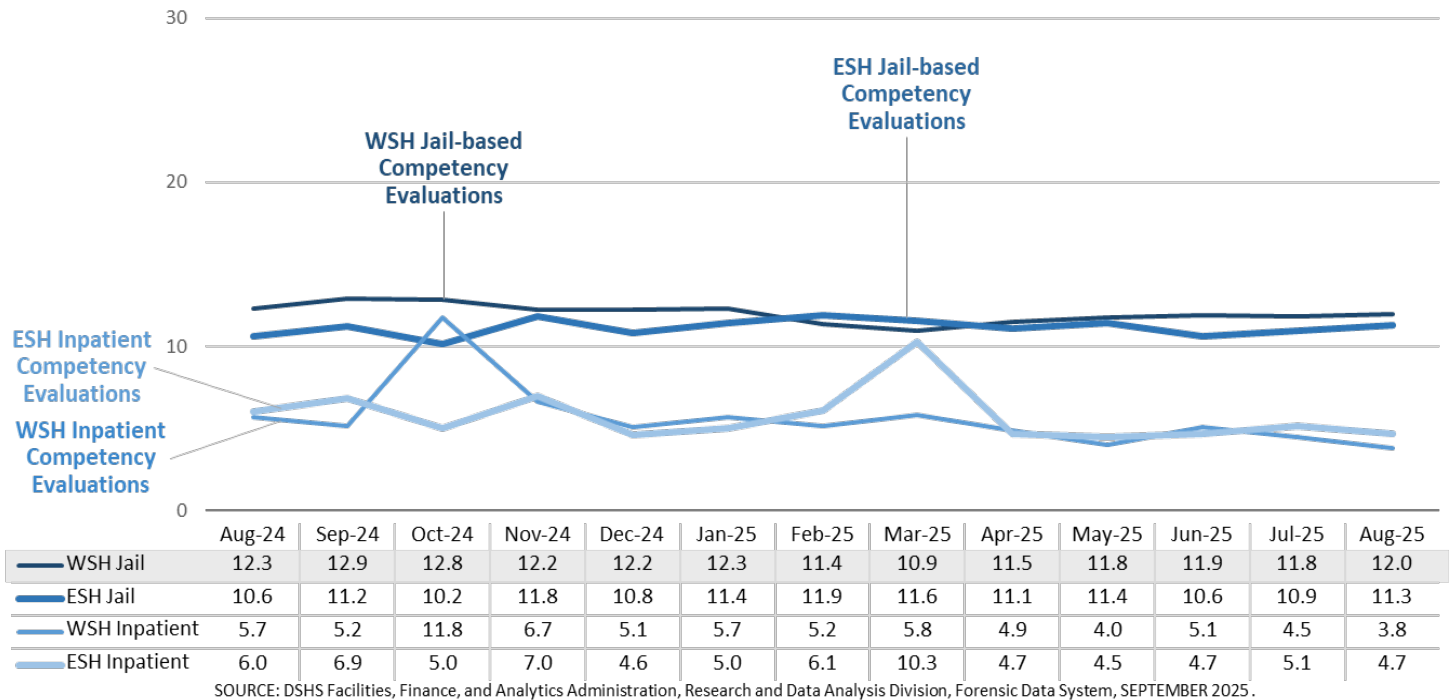


Figure 5. Median Days from Court Order Signature to Completed Restoration

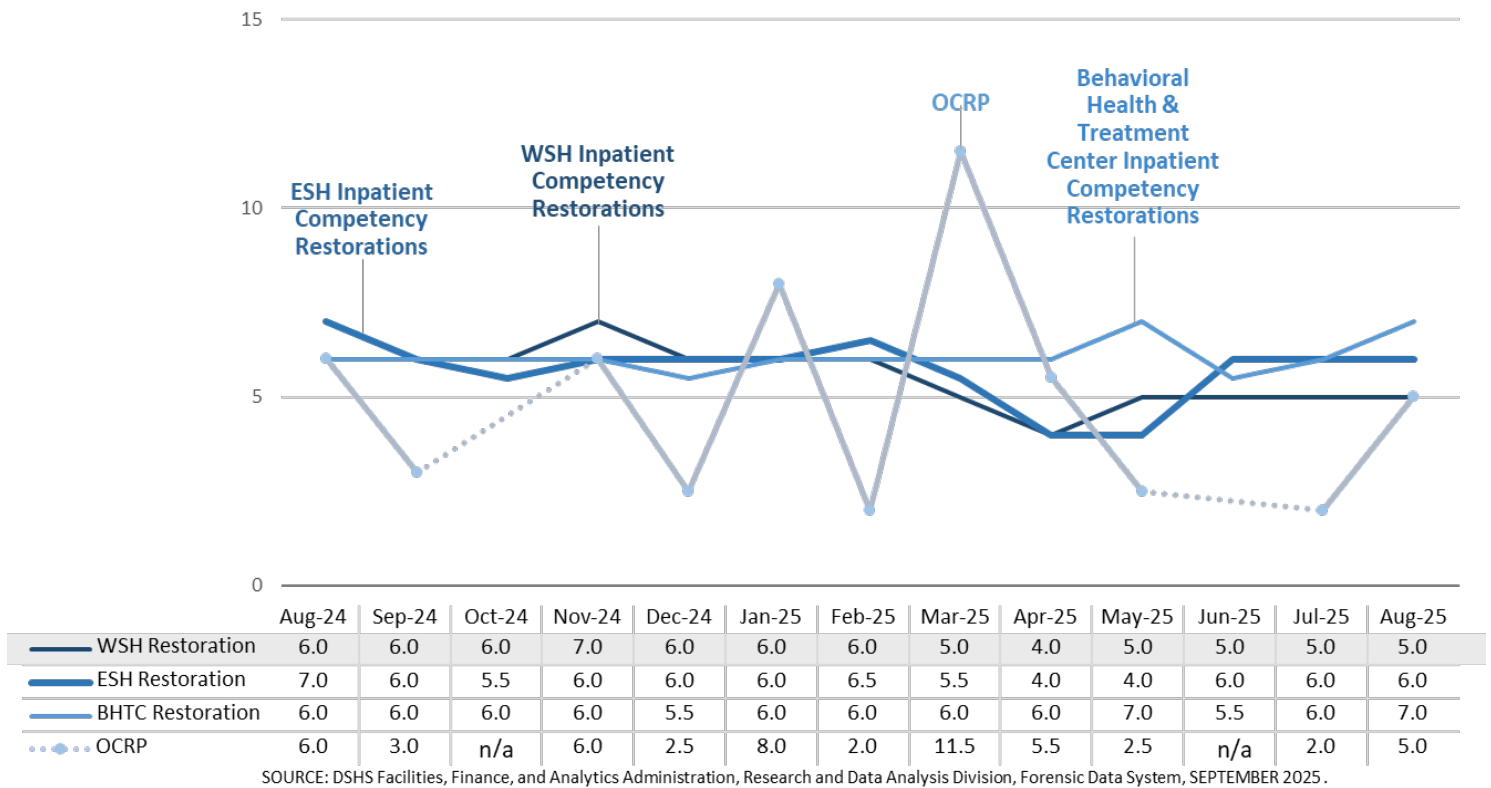
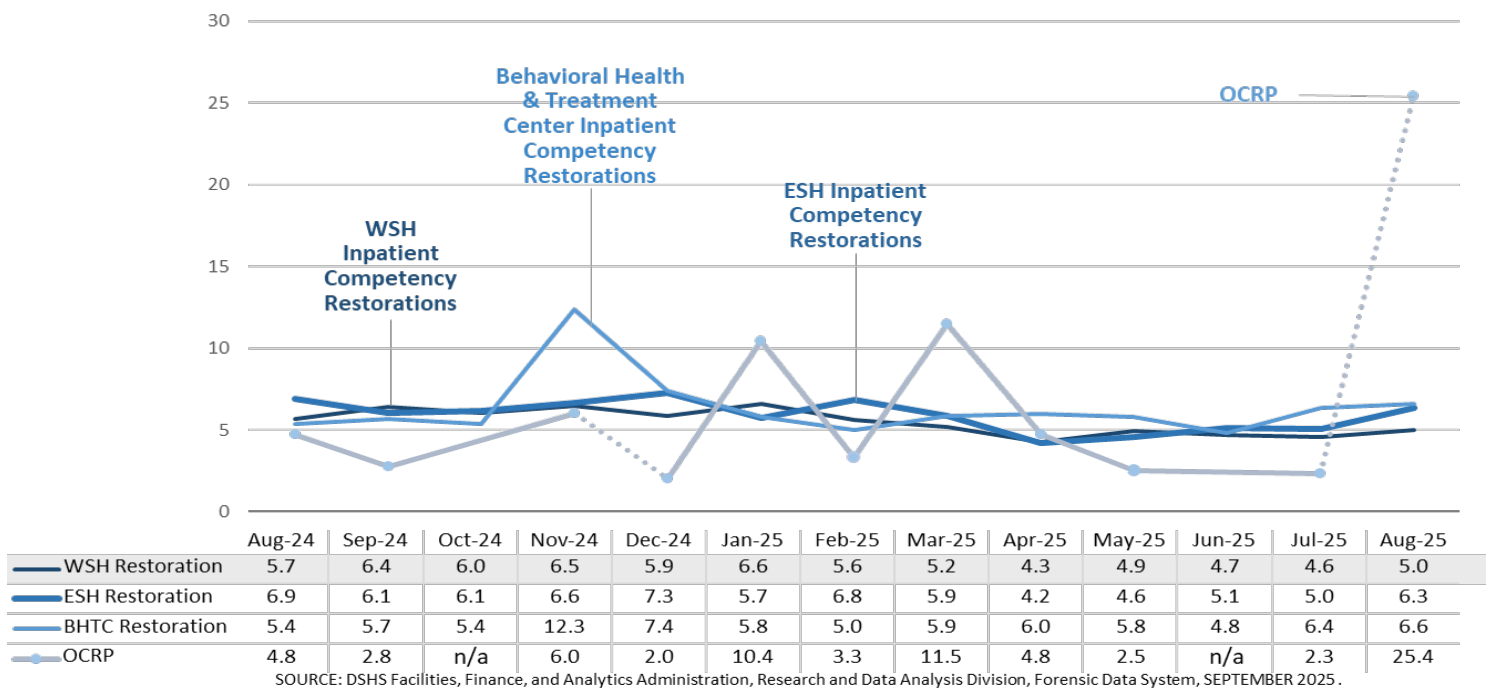


Figure 6. Average Days from Court Order Signature to Completed Restoration



Tables 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. August 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 | <i>Court Orders Signed</i> 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} |
| Aug-24 | 605 | 507 | 84 % | 544 | 90 % | 551 | 91 % |
| Sep-24 | 547 | 451 | 82 % | 481 | 88 % | 485 | 89 % |
| Oct-24 | 626 | 511 | 82 % | 544 | 87 % | 548 | 88 % |
| Nov-24 | 432 | 367 | 85 % | 390 | 90 % | 395 | 91 % |
| Dec-24 | 538 | 427 | 79 % | 455 | 85 % | 456 | 85 % |
| Jan-25 | 553 | 496 | 90 % | 516 | 93 % | 517 | 93 % |
| Feb-25 | 526 | 440 | 84 % | 464 | 88 % | 469 | 89 % |
| Mar-25 | 646 | 575 | 89 % | 601 | 93 % | 604 | 93 % |
| Apr-25 | 565 | 482 | 85 % | 521 | 92 % | 525 | 93 % |
| May-25 | 550 | 484 | 88 % | 504 | 92 % | 511 | 93 % |
| Jun-25 | 572 | 493 | 86 % | 525 | 92 % | 525 | 92 % |
| Jul-25 | 658 | 558 | 85 % | 602 | 91 % | 607 | 92 % |
| Aug-25 | 585 | 378 | 65 % | 400 | 68 % | 401 | 69 % |

Table 12 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 BHHA - 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 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 | <i>Court Orders Signed</i> ¹ | 7 DAYS OR LESS FROM ORDER SIGNATURE DATE | PERCENT 7 DAYS OR LESS FROM ORDER SIGNATURE DATE | ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER ^{1,2} | PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER ^{1,2} | ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE ^{1,2} | PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE ^{1,2} |
| 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 | 20 | 80 % | 24 | 96 % | 25 | 100 % |
| Feb-25 | 36 | 31 | 86 % | 32 | 89 % | 32 | 89 % |
| Mar-25 | 24 | 21 | 88 % | 21 | 88 % | 23 | 96 % |
| Apr-25 | 21 | 21 | 100 % | 21 | 100 % | 21 | 100 % |
| May-25 | 20 | 17 | 85 % | 17 | 85 % | 19 | 95 % |
| Jun-25 | 22 | 20 | 91 % | 22 | 100 % | 22 | 100 % |
| Jul-25 | 31 | 31 | 100 % | 31 | 100 % | 31 | 100 % |
| Aug-25 | 34 | 34 | 100 % | 34 | 100 % | 34 | 100 % |

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 BHHA - 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 | <i>Court Orders Signed</i> ¹ | 7 DAYS OR LESS FROM ORDER SIGNATURE DATE | PERCENT 7 DAYS OR LESS FROM ORDER SIGNATURE DATE | ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER ^{1,2} | PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER ^{1,2} | ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE ^{1,2} | PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE ^{1,2} |
| 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 | 197 | 173 | 88 % | 182 | 92 % | 186 | 94 % |
| Feb-25 | 144 | 131 | 91 % | 134 | 93 % | 141 | 98 % |
| Mar-25 | 187 | 179 | 96 % | 183 | 98 % | 186 | 99 % |
| Apr-25 | 190 | 180 | 95 % | 181 | 95 % | 185 | 97 % |
| May-25 | 178 | 169 | 95 % | 173 | 97 % | 178 | 100 % |
| Jun-25 | 175 | 154 | 88 % | 163 | 93 % | 171 | 98 % |
| Jul-25 | 213 | 200 | 94 % | 202 | 95 % | 207 | 97 % |
| Aug-25 | 161 | 148 | 92 % | 150 | 93 % | 156 | 97 % |

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 BHHA - 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. In August-October 2024, Phase 3 OCRP programs covering five additional counties and two additional BHASO regions began services. A third OCRP Phase 3 facility opened in August 2025. 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 Aug. 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**. Trueblood Implementation Steps of this report. The OCRP update in Table 17 begins on **page 59** 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 | <i>Court Orders Signed</i> ¹ | 7 DAYS OR LESS FROM ORDER SIGNATURE DATE | PERCENT 7 DAYS OR LESS FROM ORDER SIGNATURE DATE | ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER ^{1,2} | PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER ^{1,2} | ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE ^{1,2} | PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE ^{1,2} |
| 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 % |
| Feb-25 | 7 | 5 | 71 % | 5 | 71 % | 5 | 71 % |
| Mar-25 | 1 | 1 | 100 % | 1 | 100 % | 1 | 100 % |
| Apr-25 | 5 | 5 | 100 % | 5 | 100 % | 5 | 100 % |
| May-25 | 1 | 1 | 100 % | 1 | 100 % | 1 | 100 % |
| Jun-25 | 3 | 0 | 0 % | 0 | 0 % | 0 | 0 % |
| Jul-25 | 4 | 3 | 75 % | 3 | 75 % | 3 | 75 % |
| Aug-25 | 6 | 5 | 83 % | 5 | 83 % | 5 | 83 % |

Table 15 Data Notes:

¹**The OCRP was implemented July 1, 2020.** The data are pulled from the BHHA 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**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**According to the Settlement Agreement,** “For criminal defendants waiting in jail, an offer of admission to the community outpatient restoration services program will occur within the constitutional timelines for restoration as outlined by the Federal Court.” Therefore, this table captures the 3 compliance deadlines captured for inpatient competency restoration: 1) number and percent completed within 7 days from court order signature date (as stipulated from April 2015 to April 2017) and 2) number and percent of orders completed within 7 days from receipt

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

Resources Required to Provide Timely Competency Services

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 state made significant investments into Washington state's behavioral health system. These included additional beds, construction funding, and funding for other programs designed to streamline and improve patient care. For detailed information on specific state investments, review monthly reports from July 2023-June 2025 at [Monitor Reports](#).

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, including investments in additional beds, construction, staff retention, and funding for the purchase and operation of Olympic Heritage Behavioral Health. For detailed information on specific state investments, review monthly reports from July 2024-July 2025 at [Monitor Reports](#).

2025-2027 Budget Appropriations

The 2025-2027 biennium operating and capital budgets passed the legislature near the end of the 2025 legislative session. The Governor signed the budgets into law on May 20. Despite facing a revenue shortfall, DSHS is pleased to report the legislature funded DSHS' Trueblood obligations.

1. \$22 million to support expansion of the Maple Lane Campus to include Olympic, Pacific, and Rainier units.
2. Operating funds for Maple Lane Campus for 16 beds in Chelan unit.
3. Funds to keep Brockmann Campus in Vancouver in a “warm closure” status.
4. \$22.6 million for the design and installation of emergency power systems at CSTC and ESH (West Lake and East Lake campuses)
5. WSH: \$282 million to support construction over the 2025-2027 budget biennia for the new 350-bed forensic hospital and \$22.6 million to complete the design and construction of required improvements to the water distribution system across the WSH campus.
6. Olympic Heritage Behavioral Health: \$8.7 million to address the Joint Commission inspection citation and a reduced operating budget reflecting the current level of direct care staff needed to operate a 74-bed inpatient psychiatric facility.

A new 16 bed crisis triage and stabilization facility is also planned for the Thurston-Mason region, funded via a partnership with the Washington State Department of Commerce.

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: August 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 – 46 presented
- Licensed Practical Nurse – 1 presented
- Psychiatric Security Nurses – 2 presented
- Forensic Care Associates – 38 presented
- Mental Health Technicians – 49 presented
- Behavioral Health Specialists – 14 presented
- Psychology Associates – 15 presented
- Psychiatrist – 1 presented

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

- Registered Nurses – 56 presented
- Licensed Practical Nurses – 10 presented
- Psychiatric Security Nurses – 27 presented
- Behavioral Health Specialists – 90 presented
- Mental Health Technicians – 89 presented
- Forensic Care Associates – 136 presented
- Psychology Associates – 16 presented
- Psychiatrists – 3 presented
- Physicians – 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. BHHA 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 BHHA has continued this critical focus from 2022 through the first half of 2025. Even with these successful actions, BHHA continues to face high vacancy rates in several critical patient-centered job classes. As of early September 2025, vacancies in these classes now range between 14-42 percent. The ability to maintain current restoration capacity is a challenge, and staffing new physical capacity is also very challenging.

BHHA 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 letters to all licensed psychologists
- Paid recruitment ads in professional journals

Effective July 1, 2023, several new staff retention measures took 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 qualified for a one-time lump sum retention payment. Most employees received \$1,000. Certain represented employees may have received \$1,500.
- All employees in Washington General Service and Washington Management Service positions and working at our 24/7 facilities received a five-percent wage premium for hours worked on-site at the facilities.
- All employees received a four-percent cost of living adjustment. Effective July 1, 2024, all employees received 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:

- Extended 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.

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

To continue to increase staff recruitment and retention, the 2025 legislative session passed the following wage increases:

- Most employees received a three-percent cost of living adjustment effective July 1, 2025. Effective July 1, 2026, most employees are scheduled to receive an additional two-percent cost of living adjustment.
- Forensic Evaluators saw their range increase two salary bands on July 1, 2025.

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 65** for additional details.

Table 16. Monthly BHTC Data for Steilacoom Unit

| Data Elements | Aug 24 | Sep 24 | Oct 24 | Nov 24 | Dec 24 | 2024 Avg | Jan 25 | Feb 25 | Mar 25 | Apr 25 | May 25 | Jun 25 | Jul 25 | Aug 25 | 2025 Avg |
|--|--------|--------|--------|--------|--------|----------|--------|--------|--------|--------|--------|--------|--------|--------|----------|
| Census (last day of month) | 28 | 26 | 27 | 27 | 26 | 27.1 | 29 | 27 | 30 | 30 | 28 | 27 | 30 | 26 | 28.4 |
| Total patients admitted | 23 | 14 | 17 | 8 | 14 | 14.5 | 16 | 11 | 13 | 7 | 9 | 6 | 13 | 10 | 10.6 |
| Completed and found competent (1st Restoration) | 9 | 8 | 8 | 4 | 9 | 5.6 | 8 | 5 | 5 | 3 | 7 | 1 | 1 | 4 | 4.3 |
| Not likely restorable (transported back to jail) | 0 | 3 | 1 | 2 | 1 | 1.2 | 3 | 2 | 0 | 0 | 0 | 1 | 0 | 0 | 0.8 |
| Court Order lapsed (transported back to Jail) | 0 | 1 | 3 | 1 | 0 | 0.9 | 0 | 1 | 0 | 0 | 1 | 1 | 1 | 0 | 0.5 |
| Felony patients completed and found not likely restorable (1st Restoration) | 9 | 1 | 0 | 2 | 10 | 3.0 | 0 | 1 | 0 | 0 | 2 | 2 | 1 | 2 | 1.0 |
| Misdemeanor patients not restored (no further treatment by law) | 2 | 1 | 1 | 0 | 1 | 0.7 | 3 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0.5 |
| Total transferred to State Hospital for: | 2 | 4 | 1 | 2 | 0 | 2.2 | 0 | 0 | 1 | 0 | 1 | 0 | 1 | 5 | 1.0 |
| Physical aggression | 1 | 3 | 1 | 1 | 0 | 0.9 | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 1 | 0.4 |
| Sexually inappropriate behavior | 0 | 0 | 0 | 0 | 0 | 0.1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 |
| Medical reasons | 1 | 0 | 0 | 0 | 0 | 0.2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 |
| Due to court ordered treatment at SH | 0 | 1 | 0 | 1 | 0 | 0.7 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 2 | 0.4 |
| Other | 0 | 0 | 0 | 0 | 0 | 0.3 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0.1 |
| Total patients eloped | 0 | 0 | 0 | 0 | 0 | 0.1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 |
| Total recommended for early evaluation | 0 | 0 | 0 | 0 | 0 | 0.3 | 0 | 0 | 1 | 0 | 0 | 1 | 1 | 0 | 0.4 |
| Total recommended for 2nd 90-day order | 1 | 5 | 3 | 3 | 3 | 2.6 | 6 | 2 | 3 | 7 | 2 | 2 | 3 | 4 | 3.6 |
| Total recommended for 3rd 90-day order | 0 | 0 | 0 | 0 | 0 | 0.1 | 1 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0.3 |

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 Implementation Steps Taken and Planned: August 2025

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 August 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 | August 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 | 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. |

| | |
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| | <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> <p>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. A third iteration was completed at the end of 2024 and in early 2025 the main writer met with the forensic evaluators to answer any questions. Based on questions and feedback, a revised policy was completed at the end of April 2025. The updated policy continues to be under review and once finalized, notice will be sent to the union.</p> |
|--|--|

| 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. • 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 |

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|---|--|
| 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 54 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 64 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 turnover 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 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.</p> |
| 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 Q2 2025, 100-percent of forensic evaluators had competency evaluation reports audited by supervisors. A total of 185 competency evaluation reports were reviewed in Q2 2025.</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 Aug. 31, 2025, OFMHS has received 1,089 triage referrals from jail staff/defense. Of those referrals, 667 were approved, 315 referrals were denied, and 107 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.</p> |
| 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 |

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|---|---|
| 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, King-Maleng Regional Justice Center, Kittitas, Okanogan, Pacific, Pend Oreille, San Juan, Skagit, 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: Chehalis, Colville Tribes Corrections Detention Facility, Nisqually Tribe Corrections Center, and Yakama Nation Correction & Rehabilitation Facility. DSHS' competency restoration programs at SCRP, ESH, WSH, and HCA's OCRP sites 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 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, the Chelan County Jail, and the Skagit County Jail have been successfully upgraded to the current telehealth setup. DSHS is also having conversations regarding the new telehealth solution with the Clark, Klickitat, and Pierce County Jails. An agency e-mail address is available specifically for telehealth issues, and a telehealth committee meets regularly to review current needs and processes.</p> |

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| | <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 19,199 telehealth evaluations since August 2018. Clients or their attorneys have rejected 1.4% of attempts resulting in 18,925 completed telehealth evaluations. For the last 12 months, telehealth evaluations have averaged approximately 445 evaluations per month. This data is current through September 17, 2025.</p> |
|--|---|

| 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> <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.</p> |
| G2. 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. |

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| 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 transferred to WSH, SCRP, 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 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 Sept. 5, 2025, the census was 28.</p> <p>Currently, there is one vacant BHS3 position (formerly IC) on evening shift and three on-call positions. The nursing department has two vacant on-call positions, with one offer extended for hire to start Oct. 1, 2025.</p> <p>On Dec. 1, 2024 Byron Lockridge became the permanent program director for the Steilacoom Unit.</p> <p>The clinical services manager was filled on Dec. 16, 2024, by Dr. Woods. Dr. Woods finished NEO in December and started in Steilacoom Unit officially in January.</p> <p>The July 18, 2025 quarterly length of stay report indicates Steilacoom Unit has slightly shorter lengths of stay for 45-day orders. Refer to Table 15. OCRP Completed Restoration Orders by Month Court Order Signed for additional data on Steilacoom unit.</p> |
| G4. 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 & | Most of the Phase 1 OCRP providers maintained adequate space to accept referrals for all suitable individuals in their regions throughout July. We continue working to expand capacity in order to serve all appropriate |

| | |
|---|--|
| Barriers to Completion | <p>individuals, including adding new staff as part of Phase 4 program enhancements. Most providers have the new positions posted and are actively recruiting.</p> <p>In Pierce County, the OCRP and FHARPS providers have had a series of meetings during the first half of 2025, which culminated in the FHARPS provider creating an OCRP-dedicated house, which opened in June and continues to serve OCRP clients.</p> <p>Additionally, OCRP contractors continue to use support funds to assist with transitional housing and to acquire additional temporary housing and bed placements for OCRP-enrolled people.</p> |
| G5. 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 can serve up to fourteen OCRP-enrolled participants between their two OCRP-dedicated houses. They are providing Breaking Barriers competency restoration programming in the homes for residents.</p> <p>They continue providing competency restoration services to people at their outpatient location who are not enrolled in their housing. They continue providing extra support in the drop-in area where OCRP participants can access additional resources and participate in activities such as yoga.</p> |
| G6. 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 | In August, Peninsula Behavioral Health began taking referrals and serving participants in OCRP. Additionally, Olympic Health and Recovery Services and Kitsap Mental Health Services OCRP teams continue taking referrals and are serving participants in outpatient competency restoration services. |
| G7. Competency Restoration: OCRP enrollment | |
| Key Milestones | OCRP enrollment continues to increase. |

| | |
|---|---|
| Status/End Dates | Ongoing |
| Anticipated Outcome & Assumptions | <ul style="list-style-type: none"> Enrollment in OCRP increases as implementation of the three phases continues. |
| Results Achieved & Barriers to Completion | <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 Report and reported quarterly below and within Table 15. OCRP Completed Restoration Orders by Month Court Order Signed.</p> <p>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.</p> <p>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.</p> <p>The data below is from July 1, 2020, through March 31, 2025:</p> <ul style="list-style-type: none"> 323 unduplicated individuals enrolled <ul style="list-style-type: none"> 48 active 275 discharged Reasons discharged: <ul style="list-style-type: none"> 104 opined competent 71 conditional release revoked 34 charges dismissed 11 opined not competent 11 returned to jail 15 inpatient civil psychiatric care 5 opined not restorable 5 deaths 12 legal authority ended 2 inpatient medical care 4 other 1 transfer to other OCR program |

| | |
|---|---|
| | <ul style="list-style-type: none"> Discharge location: <ul style="list-style-type: none"> 177 community 42 state hospital 31 jail 6 BHTC 19 unknown <p>Source: Navigator Case Management system. Review the March 2025 SAR for data definitions.</p> |
| 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. Trueblood Implementation Steps**, 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 658 jail-based evaluation orders signed in July 2025, approximately 599 were completed within 14 days, which is 91%. 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> |
| 8. Remove barriers to the expenditure of the \$4.8 million in currently allocated diversion funds: | | | |
| D. Executing contracts for implementation by the selected providers. | April 15, 2016 | Complete | Prosecutorial diversion was funded for FY'26 effective July 1, 2025-June 30, 2026. |

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*

| | |
|--|-----------|
| <i>Jail-based evaluation orders</i> | 93 |
| <i>Inpatient competency orders</i> | 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 3, 6, 9. For item number three, the data can be viewed in Appendix A, Tables 4, 5a., 5b., 5c., 7, 8, 10, 11. Item number five's data is viewable in the non-numbered tables available in Appendix G.

Trueblood Programs



By agreement with the Court Monitor, completed requirements were removed from **Table 17**. Trueblood Implementation Steps and **Table 18**. Court Order Status Updates 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 | February 2016 | April 2020 |

| <i>Table Source</i> | <i>Title</i> | <i>Task Name</i> | <i>Date Completed</i> | <i>Date Removed</i> |
|---------------------|--|--|-----------------------|---------------------|
| | | people waiting for in-jail evaluations, requesting their help in doing so, and providing plans to get evaluations done through the use of extra duty pay and other methods available | | |
| | | 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.