

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

July 31, 2019

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BACKGROUND

On April 2, 2015, the Court ordered the Department of Social and Health Services (DSHS) to file monthly reports with the *Trueblood* Court Monitor on efforts to comply with Court orders to provide timely competency evaluation and restoration services to Class Members. This monthly report is submitted July 31, 2019 and covers the events of June, 2019. This report also provides status updates on additional court order requirements.

On April 2, 2015, the Court ordered:

“Defendants shall file a report with the Monitor on the fifth day of every month, which shall include:

- (1) the number of days between when a court ordered provision of competency services and when provision was completed, for each person ordered to receive competency services during the previous month;*
- (2) data regarding the number of evaluators, bed capacity, physicians, and other resources needed to provide timely competency services;*
- (3) the steps taken in the previous months to implement this order;*
- (4) when and what results are intended to be realized by each of these steps;*
- (5) the results realized in the previous month;*
- (6) the steps planned to be taken in the following month;*
- (7) certification by Defendants that they are fully compliant with all deadlines that became due in the previous month;*
- (8) Defendants’ estimate for when the wait times will reach seven days or less, and all data relied on in making that estimate; and*
- (9) any other information the Monitor informs Defendants is necessary for the Monitor to fully review Defendants’ actions and advise the Court.”*

The April, 2015 order was modified on February 8, 2016. Additional orders were issued on July 7, 2016, August 15, 2016, and April 26, 2017. Status updates on these orders requiring narrative in this report begin on page 46.

This report provides the Class Member data for competency services displayed in two periods; May 1, 2019 – May 31, 2019 and June 1, 2019 – June 30, 2019. The May data are considered “mature” and the June data are a “first look” data set. April, 2015 is the baseline month for data analysis.

Specific Class Member evaluation and restoration information is included in the appendices to this report.

CLASS MEMBER STATUS SUMMARY INFORMATION

Analysis of Mature Data: May 1, 2015 through May 31, 2019

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

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

- Average monthly jail-based evaluation orders signed for April 2015-May 2019
 - WSH: 235.9
 - ESH: 56.2
 - Both hospitals: 292.1
- Average monthly inpatient evaluation orders signed for April 2015-May 2019
 - WSH: 16.3
 - ESH: 8.2
 - Both hospitals: 24.5
- Average monthly restoration orders signed for April 2015-May 2019
 - WSH: 83.2
 - ESH: 16.8
 - Both hospitals: 105.7*

* This figure includes orders outside either hospital (RTF's), therefore, this figure does not equal the two hospital figures combined.

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

Orders:

- The number of jail-based evaluation orders at WSH rose to 327 in May from 322 the previous month. This is significantly higher than the 235.9 average. ESH saw an increase to 84 orders from 69 the previous month, which is still well above the 56.2 average. Combined, the hospitals received 411 orders in May, which is also significantly above the 292.1 average.
- WSH received 13 inpatient evaluation orders which is below the 16.3 average. ESH had 9 inpatient evaluation orders, which is slightly higher than the 8.2 average. Orders at both sites totaled 22 which is slightly below the 24.5 average.
- WSH received 102 restoration orders which is significantly higher than the 83.2 average. ESH had 22 orders which is also significantly higher than the 16.8 average. There were 124 restoration orders across both hospitals which is also well above the 100.0 average as well.

Wait Times:

- Regarding jail-based 14 day evaluation completion times, WSH is at 12.4 days on average from order to completion and ESH is averaging 12.8 days. The combined average is 12.5 days.
- The average inpatient evaluation admission wait times at WSH is 22.8 days. ESH average is at 41.8 days. The combined average is 37.5 days.
- Restoration admission wait times at WSH is 40.1 days on average. The ESH average is 39.0 days. The combined average is 40.2 days.

Timeliness:

- At both hospitals combined, overall timeliness for jail-based evaluation completion is at a 79% completion rate within 14 days from receipt of order.
- At both hospitals combined, overall timeliness for inpatient evaluation admissions is at a 9% completion rate within 7 days from receipt of order.
- At both hospitals combined, overall timeliness for inpatient restoration admissions is at a 18% completion rate within 7 days.

Outlier Cases (Mature)

The monthly outlier population cases have been defined as:

* Population is active span cases from the "mature" data month (The month before the most recently completed month).

* Evaluation spans: are incomplete, or were completed after the end of the "mature" month and wait more than 20 days for an evaluation (In-Jail), or admission (Inpatient), or a change of client status to out of jail, or order withdrawn by the 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.

Type	Number of spans:	span begin to span end, or end of reporting period	
		Minimum Number of days	Maximum Number of days
In-Jail Evaluations	5	21	37
Inpatient Evaluations	18	22	76
Restorations	64	42	192

SUMMARY OF DELAY REASONS ¹			
REASONS FOR DELAY IN DATABASE	In-Jail Evaluations	Inpatient Evaluations	Restorations
Attorney scheduling conflicts	2		
Bed availability		13	64
Client released from custody & can't be located			
Defendant No Show			
Defendant Reschedule			
Defendant would not cooperate with evaluation			
Defendant would not participate without attorney present	1		
Defense Expert scheduling			
Evaluator availability			
Interpreter needed but court order did not request it			
Interpreter scheduling conflicts	3		
Jail return/Discharge with no eval done			
Jail/Outside facility staffing issues			
Medical Record/Collateral Information			
Other patient cooperation problem			
Police reports availability		5	
Relevant discovery availability			
Requires amended court order			
unknown	1		

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

CLASS MEMBER STATUS DATA TABLES**NOTE: June data are “first look” and are subject to change.****TABLE 1a. Class Member Status Western State Hospital – Jail-based Competency Evaluations**

TABLE 1a. 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						
Jun-18	284	0.5	0.0	0.6	0.0	5.0	3.0	277	9.7	9.0	72%	72%	73%
Jul-18	306	0.3	0.0	0.4	0.0	7.0	7.0	274	10.2	10.0	74%	74%	74%
Aug-18	312	0.3	0.0	0.7	0.0	n/a	n/a	330	10.4	10.0	94%	94%	94%
Sep-18	238	0.4	0.0	0.7	0.0	n/a	n/a	243	10.3	10.0	92%	94%	94%
Oct-18	305	0.5	0.0	0.7	0.0	n/a	n/a	290	11.1	11.0	89%	93%	93%
Nov-18	250	0.5	0.0	0.8	0.0	n/a	n/a	274	12.7	13.0	75%	78%	80%
Dec-18	226	0.5	0.0	0.7	0.0	n/a	n/a	230	10.9	11.0	90%	94%	95%
Jan-19	291	0.3	0.0	0.6	0.0	n/a	n/a	262	11.2	12.0	83%	86%	86%
Feb-19	233	0.5	0.0	1.0	0.0	n/a	n/a	230	12.5	12.0	78%	83%	84%
Mar-19	308	0.6	0.0	1.0	0.0	n/a	n/a	294	11.9	12.0	83%	86%	87%
Apr-19	322	0.4	0.0	0.6	0.0	n/a	n/a	346	11.7	12.0	83%	86%	86%
May-19	327	0.5	0.0	0.8	0.0	n/a	n/a	323	12.4	13.0	79%	84%	85%
Jun-19	301	0.6	0.0	1.0	0.0	6.6	6.0	277	12.8	13.0	75%	82%	84%

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

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

³Days from order signature to³ represents the number of days from the beginning of a period of waiting in jail for competency services to the specified timeframe (i.e., hospital receipt of order, hospital receipt of discovery, end of reporting month of incomplete referrals, and completion (or the end of a period of waiting in jail for competency services)).

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

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

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

TABLE 1b. Class Member Status Western State Hospital – Inpatient Competency Evaluation Services

TABLE 1b. 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							
Jun-18	9	1.7	0.0	1.7	0.0	25.1	17.0	9	33.7	40.0	5%	5%	5%	
Jul-18	14	1.8	0.0	1.8	0.0	21.5	18.0	6	41.8	42.0	0%	0%	0%	
Aug-18	8	1.5	0.0	0.1	0.0	n/a	n/a	9	46.2	48.0	0%	0%	0%	
Sep-18	8	1.3	0.0	0.3	0.0	n/a	n/a	11	51.5	50.0	0%	0%	0%	
Oct-18	14	0.7	0.0	0.6	0.0	n/a	n/a	13	48.0	47.0	0%	0%	0%	
Nov-18	13	2.1	0.5	2.1	0.5	n/a	n/a	12	37.4	38.0	0%	0%	0%	
Dec-18	12	2.1	0.5	2.1	0.5	n/a	n/a	14	33.9	35.5	7%	7%	7%	
Jan-19	17	2.8	0.0	3.1	0.0	n/a	n/a	15	33.6	41.0	13%	13%	13%	
Feb-19	10	3.3	0.0	3.6	0.0	n/a	n/a	12	40.7	48.5	8%	8%	8%	
Mar-19	12	3.2	0.0	3.6	0.0	n/a	n/a	20	27.5	26.5	30%	30%	30%	
Apr-19	11	5.4	0.0	5.7	0.0	74.5	74.5	9	25.8	21.0	11%	11%	11%	
May-19	13	1.2	0.0	1.9	0.0	48.5	42.5	5	22.8	14.0	20%	20%	20%	
Jun-19	10	1.1	0.0	1.7	0.0	32.8	27.5	11	39.1	40.0	0%	0%	0%	

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

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

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

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

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

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

TABLE 1c. Class Member Status Western State Hospital and Residential Treatment Facilities – Inpatient Competency Restoration Services

TABLE 1c. 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							
Jun-18	89	1.1	0.0	1.1	0.0	36.9	34.0	102	45.2	49.0	7%	7%	7%	
Jul-18	100	1.4	0.0	1.4	0.0	40.5	36.0	92	42.5	32.0	10%	10%	11%	
Aug-18	71	1.6	0.0	2.5	0.0	n/a	n/a	61	54.1	56.0	21%	20%	21%	
Sep-18	43	1.8	0.0	3.1	0.0	n/a	n/a	55	72.3	78.0	7%	7%	7%	
Oct-18	73	1.9	0.0	2.8	0.0	n/a	n/a	78	59.7	54.0	17%	17%	17%	
Nov-18	62	1.8	0.0	2.2	0.0	n/a	n/a	70	57.4	50.0	0%	20%	20%	
Dec-18	74	1.9	0.0	2.1	0.0	n/a	n/a	65	46.9	29.0	28%	31%	34%	
Jan-19	83	1.8	0.0	1.9	0.0	n/a	n/a	80	51.7	42.0	28%	29%	29%	
Feb-19	86	0.8	0.0	0.9	0.0	n/a	n/a	81	47.8	41.0	21%	25%	25%	
Mar-19	89	1.5	0.0	1.5	0.0	n/a	n/a	111	38.8	32.0	20%	21%	23%	
Apr-19	97	1.9	0.0	1.8	0.0	72.9	69.0	69	36.4	36.0	29%	29%	29%	
May-19	102	1.8	0.0	1.7	0.0	49.7	47.0	86	40.1	38.0	21%	21%	21%	
Jun-19	89	1.3	0.0	1.4	0.0	32.1	27.0	103	49.1	50.0	17%	17%	18%	

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

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

³Days from order signature to³ represents the number of days from the beginning of a period of waiting in jail for competency services to the specified timeframe (i.e., hospital receipt of order, hospital receipt of discovery, end of reporting month of incomplete referrals, and completion (or the end of a period of waiting in jail for competency services)).

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

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

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

TABLE 1c. Class Member Status Residential Treatment Facilities – Inpatient Competency Services (Restorations) ¹														
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		Percent complete within 7 days from order signature date ^{5,6}	Percent completed within 7 days from receipt of order ^{5,6}	Percent completed within 7 days from receipt of order or within 14 days from order signature date ^{5,6}	
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median				
		Average	Median	Average	Median	Average	Median							
Aug-18	25	1.6	0.0	0.9	0.0	n/a	n/a	20	24.7	24.0	5%	5%	5%	
Sep-18	34	1.6	0.0	1.4	0.0	n/a	n/a	22	29.5	31.0	18%	14%	18%	
Oct-18	43	1.5	0.0	1.5	0.0	n/a	n/a	31	28.2	32.0	13%	13%	13%	
Nov-18	24	1.4	0.0	1.4	0.0	n/a	n/a	25	29.6	26.0	0%	12%	12%	
Dec-18	32	1.2	0.0	1.3	0.0	205.0	205.0	31	43.4	42.0	23%	23%	23%	
Jan-19	27	2.2	0.0	2.7	0.0	205.0	205.0	29	62.4	69.0	14%	10%	14%	
Feb-19	23	1.0	0.0	1.3	0.0	168.0	168.0	25	56.2	63.0	20%	20%	20%	
Mar-19	32	0.9	0.0	1.3	0.0	168.0	168.0	34	42.0	42.0	21%	21%	21%	
Apr-19	35	1.9	0.0	1.9	0.0	168.0	168.0	33	32.7	40.0	30%	27%	30%	
May-19	12	1.3	0.0	0.9	0.0	168.0	168.0	32	41.1	46.5	16%	16%	19%	
Jun-19	5	0.9	0.0	1.0	0.0	168.0	168.0	24	45.0	49.5	13%	13%	13%	

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

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

³Days from order signature to³ represents the number of days from the beginning of a period of waiting in jail for competency services to the specified timeframe (i.e., hospital receipt of order, hospital receipt of discovery, end of reporting month of incomplete referrals, and completion (or the end of a period of waiting in jail for competency services)).

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

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

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

TABLE 2a. Class Member Status Eastern State Hospital – Jail-based Competency Evaluations

TABLE 2a. Class Member Status Eastern State Hospital – Jail-based Competency Evaluations ¹													
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		within 14 days from order signature date ^{5,6}	within 14 days from receipt of order ^{5,6}	within 14 days from receipt of order or 21 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Jun-18	68	0.8	0.0	1.9	1.0	7.6	5.0	59	14.3	14.0	39%	45%	45%
Jul-18	70	0.8	0.0	1.7	1.0	7.5	6.0	76	12.5	13.0	51%	53%	54%
Aug-18	79	0.9	0.0	5.5	0.0	n/a	n/a	61	11.8	12.0	84%	90%	90%
Sep-18	59	1.2	0.0	2.0	1.0	n/a	n/a	67	15.4	14.0	58%	66%	66%
Oct-18	87	1.0	0.0	1.5	1.0	n/a	n/a	82	13.5	13.0	70%	78%	78%
Nov-18	62	1.3	0.0	2.1	1.0	n/a	n/a	59	13.7	14.0	59%	66%	68%
Dec-18	56	1.0	0.0	1.9	1.0	n/a	n/a	77	13.9	13.0	69%	75%	77%
Jan-19	67	1.1	0.0	2.3	1.0	n/a	n/a	57	10.9	10.0	72%	74%	77%
Feb-19	61	1.8	0.0	3.0	1.0	n/a	n/a	56	14.0	14.0	61%	71%	71%
Mar-19	73	1.4	0.0	3.0	1.0	n/a	n/a	64	15.5	14.0	59%	70%	72%
Apr-19	70	1.3	0.0	2.6	1.0	67.0	67.0	78	13.0	13.0	68%	72%	77%
May-19	84	1.2	0.0	2.3	1.0	67.0	67.0	78	12.8	13.0	81%	87%	87%
Jun-19	96	1.1	0.0	1.9	1.0	11.6	11.0	94	12.9	14.0	69%	71%	79%

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

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

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

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

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

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

TABLE 2b. Class Member Status Eastern State Hospital – Inpatient Competency Services

TABLE 2b. 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						
Jun-18	10	0.7	0.0	2.9	1.0	7.8	5.0	8	24.7	23.0	0%	0%	0%
Jul-18	9	0.4	0.0	2.3	1.0	20.0	20.0	12	16.7	16.0	20%	20%	20%
Aug-18	9	0.3	0.0	0.6	1.0	n/a	n/a	9	27.2	33.0	11%	11%	11%
Sep-18	5	3.0	0.0	4.4	0.5	n/a	n/a	7	21.4	23.0	0%	0%	0%
Oct-18	8	2.5	0.0	3.9	1.0	n/a	n/a	8	13.9	15.5	38%	38%	38%
Nov-18	13	0.2	0.0	0.5	0.5	n/a	n/a	12	19.1	17.0	0%	17%	17%
Dec-18	15	0.5	0.0	2.1	1.0	n/a	n/a	10	19.0	18.5	10%	10%	10%
Jan-19	6	0.7	0.0	1.5	1.0	n/a	n/a	11	28.6	29.0	0%	0%	0%
Feb-19	6	1.1	1.0	0.9	1.0	n/a	n/a	6	16.2	16.0	17%	17%	17%
Mar-19	17	1.4	0.0	2.0	1.0	n/a	n/a	9	15.3	15.0	33%	33%	33%
Apr-19	15	4.0	0.0	4.2	1.0	89.0	89.0	8	25.5	25.5	13%	13%	13%
May-19	9	3.6	0.0	3.6	1.0	60.0	52.0	17	41.8	47.0	6%	6%	6%
Jun-19	9	4.3	0.0	3.8	1.0	27.7	18.0	8	49.0	50.5	0%	0%	0%

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

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

³Days from order signature to³ represents the number of days from the beginning of a period of waiting in jail for competency services to the specified timeframe (i.e., hospital receipt of order, hospital receipt of discovery, end of reporting month of incomplete referrals, and completion (or the end of a period of waiting in jail for competency services)).

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

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

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

TABLE 2c. Class Member Status Eastern State Hospital – Inpatient Competency Restoration Services

TABLE 2c. 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						
Jun-18	23	3.5	0.5	3.9	1.0	17.4	17.0	21	20.4	22.0	3%	3%	3%
Jul-18	18	3.5	0.0	3.8	1.0	16.4	15.0	18	26.4	28.0	9%	9%	9%
Aug-18	25	1.3	0.0	2.9	0.0	n/a	n/a	27	28.7	29.0	19%	19%	19%
Sep-18	18	2.4	0.0	3.3	0.0	n/a	n/a	23	19.3	21.0	22%	22%	22%
Oct-18	27	2.8	0.0	3.8	0.5	n/a	n/a	23	18.3	19.0	13%	13%	13%
Nov-18	23	1.3	0.0	1.4	0.0	n/a	n/a	23	19.0	17.0	0%	13%	13%
Dec-18	19	1.0	0.0	0.8	0.0	n/a	n/a	20	36.7	20.0	35%	35%	35%
Jan-19	23	0.8	0.0	0.9	0.0	n/a	n/a	25	24.8	28.0	28%	24%	28%
Feb-19	32	1.0	0.0	0.9	0.0	n/a	n/a	22	19.8	15.0	32%	32%	32%
Mar-19	23	0.7	0.0	0.6	0.0	n/a	n/a	22	17.5	21.5	27%	27%	27%
Apr-19	29	0.8	0.0	0.7	0.0	n/a	n/a	24	31.4	35.0	25%	25%	33%
May-19	22	1.1	1.0	1.1	0.5	37.9	33.0	20	39.0	45.0	10%	10%	15%
Jun-19	25	0.6	0.0	0.6	0.0	24.3	26.0	23	39.0	49.0	17%	17%	22%

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

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

³Days from order signature to³ represents the number of days from the beginning of a period of waiting in jail for competency services to the specified timeframe (i.e., hospital receipt of order, hospital receipt of discovery, end of reporting month of incomplete referrals, and completion (or the end of a period of waiting in jail for competency services)).

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

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

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

TABLE 3a. Class Member Status at WSH and ESH (Totals) – Jail-based Competency Evaluations

TABLE 3a. 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						
Jun-18	352	0.5	0.0	0.8	0.0	5.7	4.0	336	10.5	10.0	65%	67%	67%
Jul-18	376	0.4	0.0	0.7	0.0	7.1	7.0	350	10.7	11.0	69%	69%	70%
Aug-18	391	0.4	0.0	1.5	0.0	n/a	n/a	391	10.6	10.0	92%	93%	94%
Sep-18	297	0.5	0.0	1.0	0.0	n/a	n/a	310	11.4	11.0	85%	88%	88%
Oct-18	392	0.6	0.0	0.9	0.0	n/a	n/a	372	11.7	11.0	85%	90%	90%
Nov-18	312	0.7	0.0	1.1	0.0	n/a	n/a	333	12.9	13.0	72%	76%	77%
Dec-18	282	0.6	0.0	1.0	0.0	n/a	n/a	307	11.6	11.0	84%	89%	90%
Jan-19	358	0.4	0.0	0.9	0.0	n/a	n/a	319	11.1	12.0	81%	84%	85%
Feb-19	294	0.8	0.0	1.4	0.0	n/a	n/a	286	12.8	12.0	75%	80%	82%
Mar-19	381	0.7	0.0	1.3	0.0	n/a	n/a	358	12.6	12.5	79%	83%	85%
Apr-19	392	0.6	0.0	1.0	0.0	67.0	67.0	424	11.9	12.0	80%	83%	84%
May-19	411	0.7	0.0	1.1	0.0	67.0	67.0	401	12.5	13.0	79%	84%	85%
Jun-19	397	0.7	0.0	1.2	0.0	8.0	6.0	371	12.8	13.0	74%	79%	82%

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

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

³**Days from order signature to³** represents the number of days from the beginning of a period of waiting in jail for competency services to the specified timeframe (i.e., hospital receipt of order, hospital receipt of discovery, end of reporting month of incomplete referrals, and completion (or the end of a period of waiting in jail for competency services)).

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

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

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

TABLE 3b. Class Member Status at WSH and ESH State Hospital (Totals) – Inpatient Competency Evaluation

TABLE 3b. Class Member Status at WSH and ESH State Hospital (Totals) – Inpatient Services (Inpatient Evaluations) ¹														
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		Percent complete within 7 days from order signature date ^{5,6}	Percent completed within 7 days from receipt of order ^{5,6}	Percent completed within 7 days from receipt of order or within 14 days from order signature date ^{5,6}	
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median				
		Average	Median	Average	Median	Average	Median							
Jun-18	19	1.3	0.0	2.3	1.0	16.5	11.0	17	30.2	31.5	3%	3%	3%	
Jul-18	23	1.2	0.0	2.0	1.0	21.1	18.5	18	25.1	28.5	8%	8%	8%	
Aug-18	17	1.1	0.0	0.4	0.0	n/a	n/a	18	36.7	35.0	6%	6%	6%	
Sep-18	13	1.8	0.0	1.7	0.0	n/a	n/a	18	39.8	42.0	0%	0%	0%	
Oct-18	22	1.2	0.0	1.3	1.0	n/a	n/a	21	35.0	33.0	14%	14%	14%	
Nov-18	26	1.4	0.0	1.7	0.5	n/a	n/a	24	28.3	31.0	0%	8%	8%	
Dec-18	27	1.4	0.0	2.1	1.0	n/a	n/a	24	27.7	32.5	8%	8%	8%	
Jan-19	23	2.1	0.0	2.7	1.0	n/a	n/a	26	31.5	29.5	8%	8%	8%	
Feb-19	16	2.7	0.0	3.0	0.5	n/a	n/a	18	32.5	35.5	11%	11%	11%	
Mar-19	29	2.4	0.0	3.1	0.0	n/a	n/a	29	23.7	21.0	31%	31%	31%	
Apr-19	26	4.6	0.0	4.9	1.0	79.3	76.0	17	25.6	21.0	12%	12%	12%	
May-19	22	2.5	0.0	2.7	1.0	51.6	45.0	22	37.5	45.5	9%	9%	9%	
Jun-19	19	2.5	0.0	2.5	1.0	30.8	24.0	19	43.3	49.0	0%	0%	0%	

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

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

³Days from order signature to³ represents the number of days from the beginning of a period of waiting in jail for competency services to the specified timeframe (i.e., hospital receipt of order, hospital receipt of discovery, end of reporting month of incomplete referrals, and completion (or the end of a period of waiting in jail for competency services)).

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

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

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

TABLE 3c. Class Member Status at WSH and ESH State Hospital, and RTFs (Totals) – Inpatient Competency Restoration Services

TABLE 3c. Class Member Status at WSH and ESH State Hospital, and RTFs (Totals) – Inpatient Services (Restorations) ¹													
MONTH	Court Orders Signed ²	Days from order signature to ³ :						Court Orders Completed ⁴	Days from order signed to completion ⁵		Percent complete within 7 days from order signature date ^{5,6}	Percent completed within 7 days from receipt of order ^{5,6}	Percent completed within 7 days from receipt of order or within 14 days from order signature date ^{5,6}
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals			Average	Median			
		Average	Median	Average	Median	Average	Median						
Jun-18	112	1.4	0.0	1.5	0.0	34.8	25.0	123	41.0	28.5	7%	7%	7%
Jul-18	118	1.6	0.0	1.7	0.0	38.0	33.0	110	39.9	28.0	10%	10%	10%
Aug-18	121	1.5	0.0	2.1	0.0	n/a	n/a	108	42.3	30.5	18%	17%	18%
Sep-18	95	1.9	0.0	2.6	0.0	n/a	n/a	100	50.7	37.0	13%	12%	13%
Oct-18	143	1.9	0.0	2.6	0.0	n/a	n/a	132	45.1	31.5	15%	15%	15%
Nov-18	109	1.7	0.0	1.9	0.0	n/a	n/a	118	44.1	27.5	0%	17%	17%
Dec-18	125	1.6	0.0	1.7	0.0	205.0	205.0	116	44.2	29.0	28%	29%	31%
Jan-19	133	1.8	0.0	2.0	0.0	205.0	205.0	134	49.0	41.0	25%	24%	25%
Feb-19	141	0.9	0.0	1.0	0.0	168.0	168.0	128	44.6	38.5	23%	25%	25%
Mar-19	144	1.2	0.0	1.3	0.0	168.0	168.0	167	36.6	31.0	21%	22%	23%
Apr-19	161	1.7	0.0	1.7	0.0	85.6	69.0	126	34.5	36.0	29%	28%	30%
May-19	136	1.6	0.0	1.5	0.0	50.8	46.0	138	40.2	42.5	18%	18%	20%
Jun-19	119	1.1	0.0	1.2	0.0	32.4	27.0	150	46.9	49.0	16%	17%	18%

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

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

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

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

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

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

CLASS MEMBER STATUS DATA GRAPHS

NOTE: June data are “first look” and are subject to change.

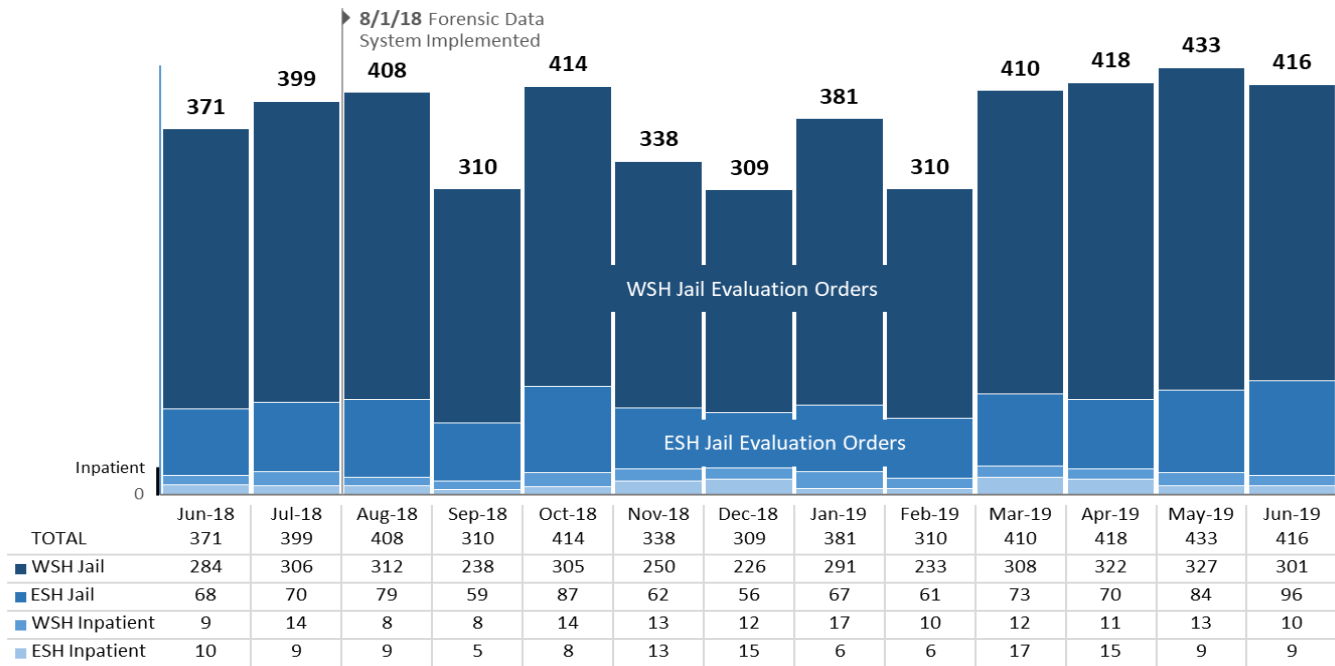
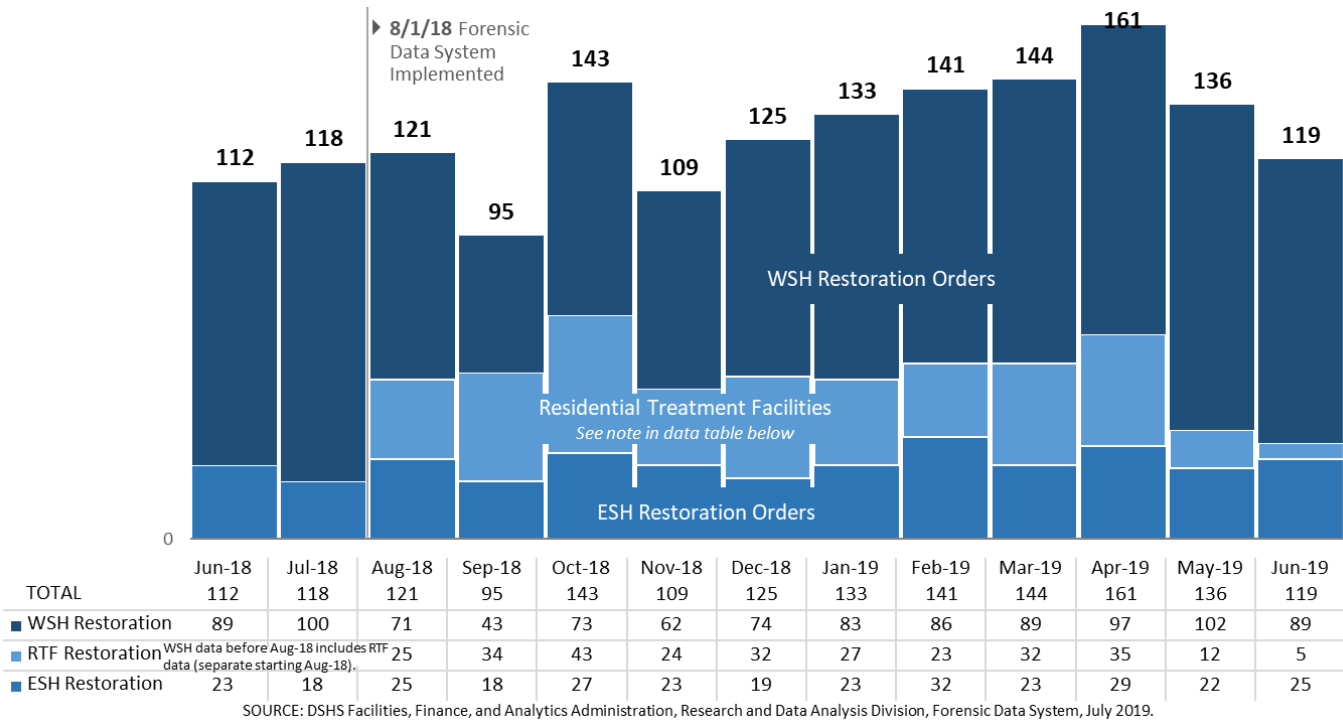
FIGURE 1. Evaluation Orders**FIGURE 2. Restoration Orders**

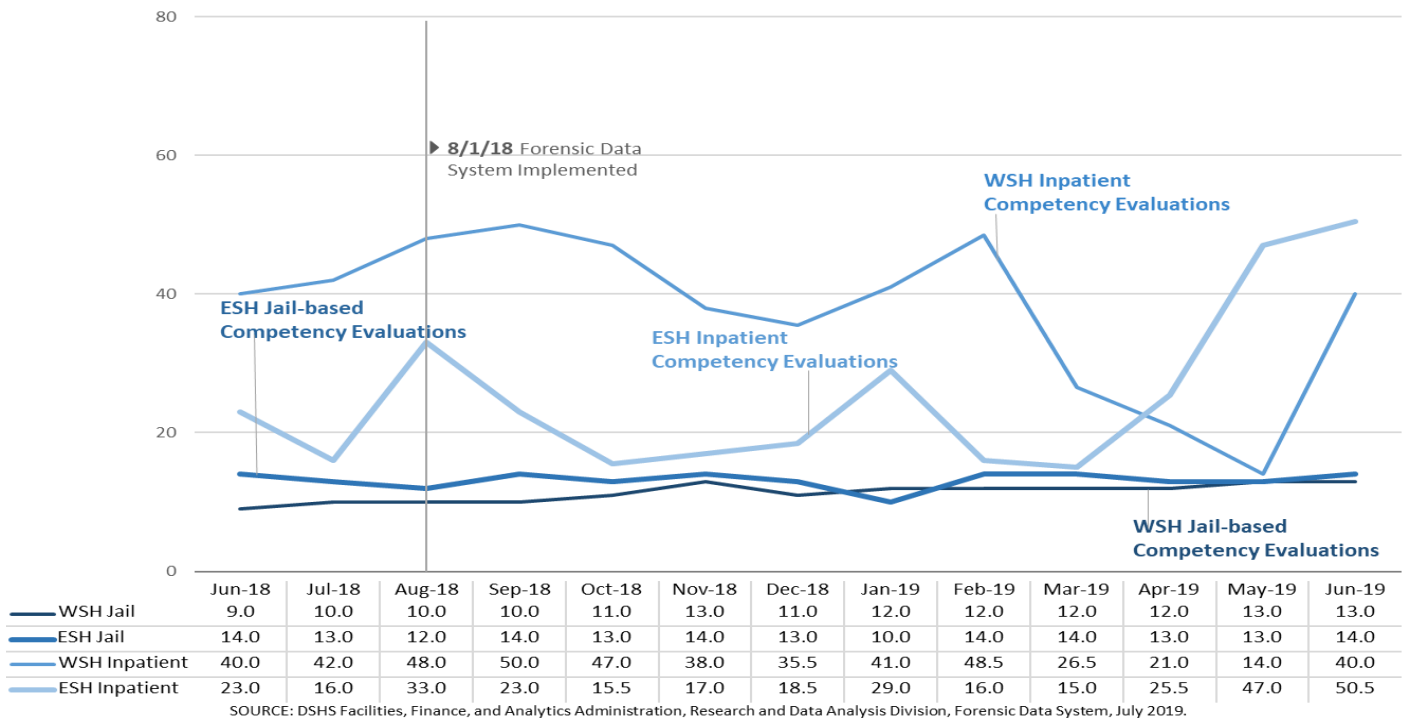
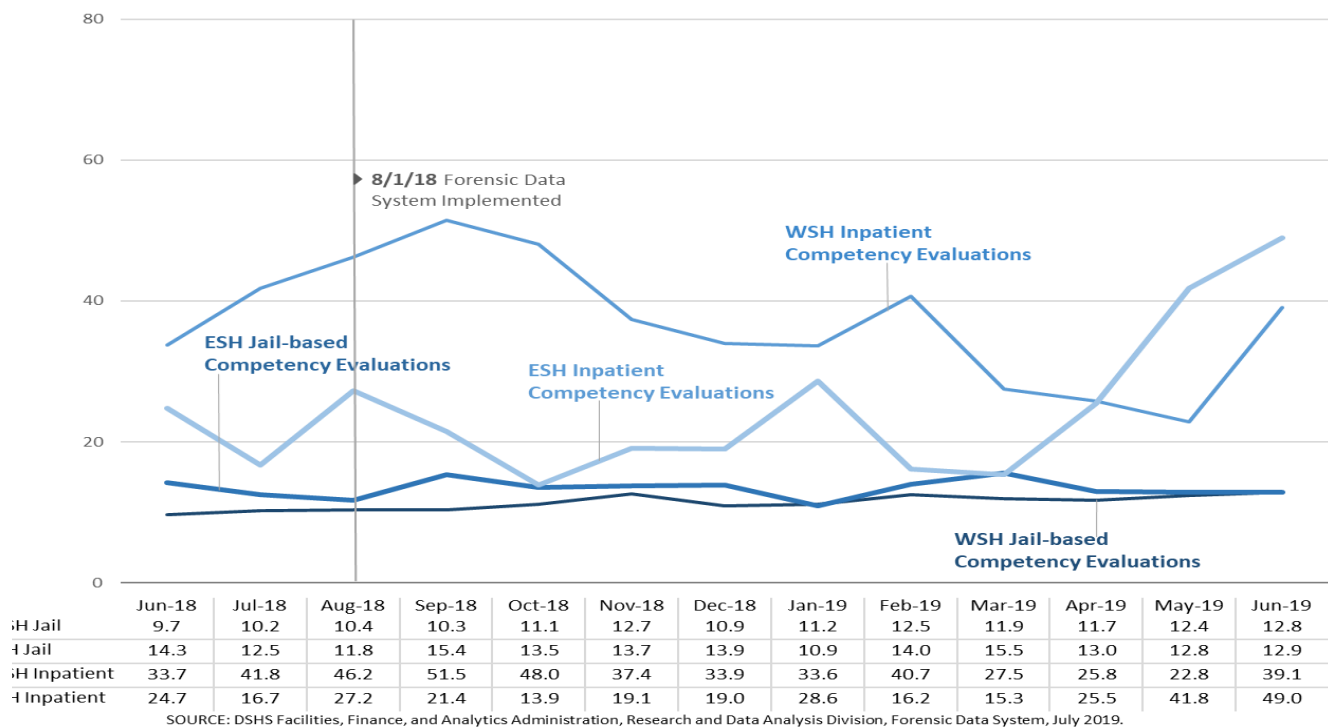
FIGURE 3. Evaluations – Median**FIGURE 4. Evaluations – Average**

FIGURE 5. Restorations - Median

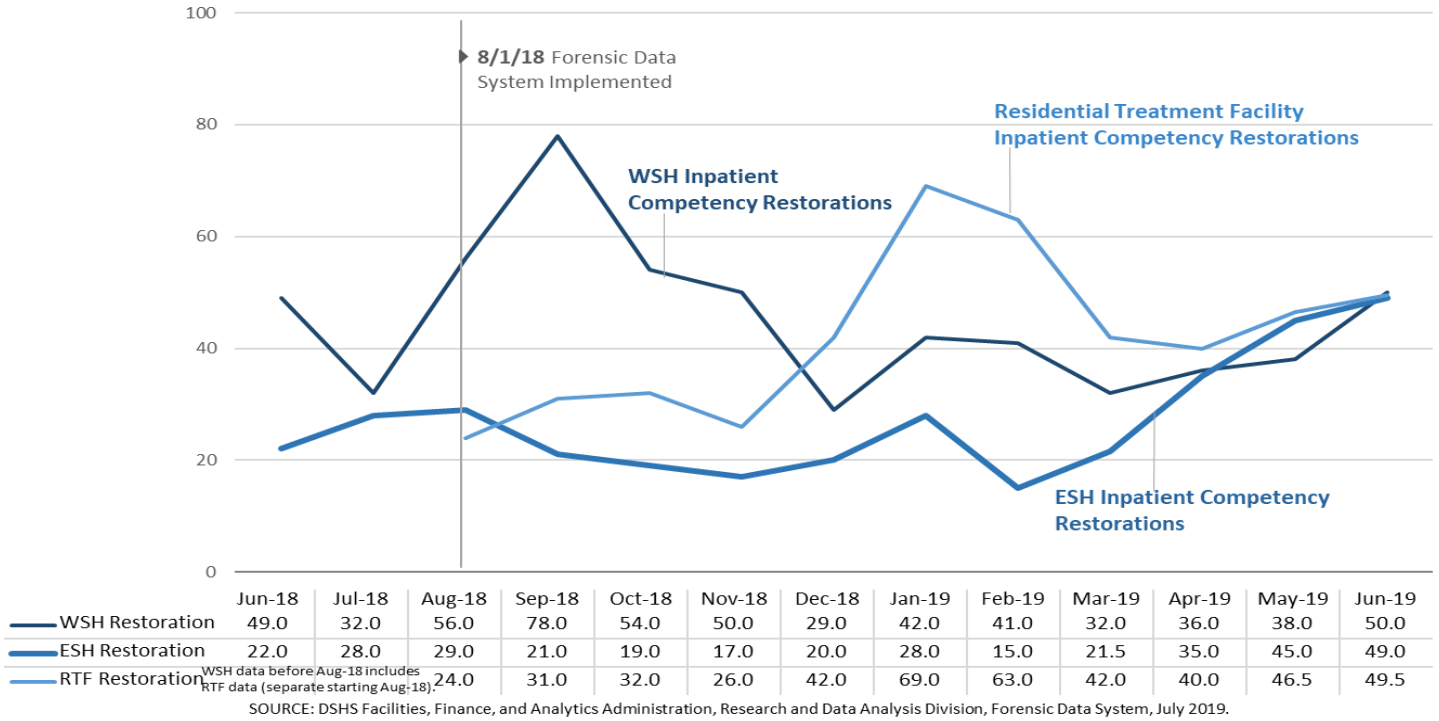
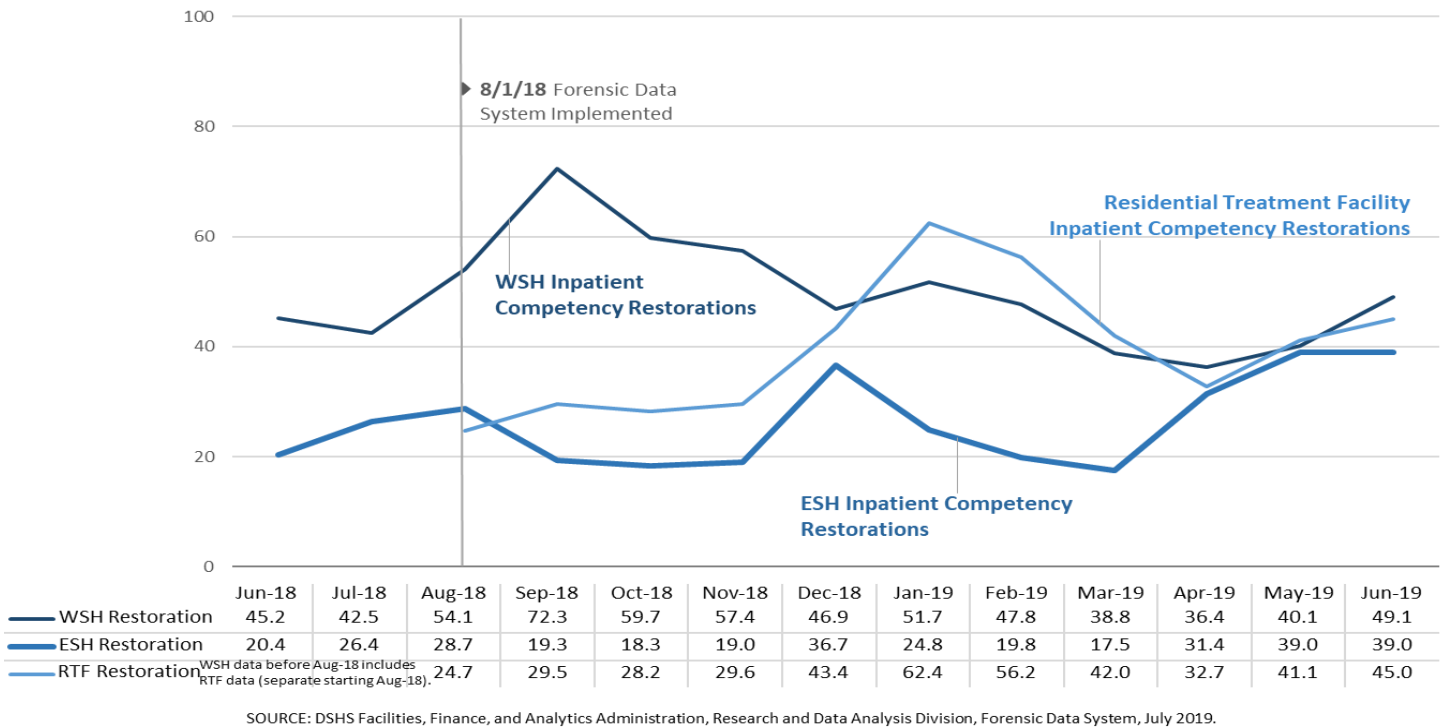


FIGURE 6. Restorations – Average



TABLES 4/5a-4/5c. Summary of jail evaluations, in-patient evaluations, and restorations by month since February 2016 (A rolling thirteen months is displayed). **NOTE: These data (percent days or less) are based on the month that the court order was signed and will therefore be different from the data shown in Tables 1-3, which is based on the month the order packet was completed. June numbers are first look, and percentages may change as many cases (those with orders at the end of the month) will close within the seven or fourteen day window.**

(TABLE 4a/5a) TOTAL COMPLETED JAIL EVALUATION ORDERS BY MONTH COURT ORDER SIGNED¹							
MONTH	<i>Court Orders Signed²</i>	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}
Jun-18	352	306	87%	318	90%	318	90%
Jul-18	376	343	91%	345	92%	346	92%
Aug-18	391	345	88%	352	90%	352	90%
Sep-18	297	254	86%	267	90%	269	91%
Oct-18	392	306	78%	327	83%	330	84%
Nov-18	312	244	78%	257	82%	260	83%
Dec-18	282	232	82%	241	85%	242	86%
Jan-19	358	285	80%	302	84%	307	86%
Feb-19	294	227	77%	244	83%	248	84%
Mar-19	381	299	78%	310	81%	312	82%
Apr-19	392	319	81%	333	85%	341	87%
May-19	411	303	74%	327	80%	331	81%
Jun-19	397	223	56%	234	59%	244	61%

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

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

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

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

(TABLE 4b/5b) 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}
Jun-18	19	0	0%	0	0%	0	0%
Jul-18	23	4	17%	4	17%	4	17%
Aug-18	17	1	6%	1	6%	1	6%
Sep-18	13	1	8%	1	8%	1	8%
Oct-18	22	2	9%	2	9%	2	9%
Nov-18	26	2	8%	2	8%	2	8%
Dec-18	27	2	7%	2	7%	2	7%
Jan-19	23	2	9%	2	9%	2	9%
Feb-19	16	3	19%	3	19%	3	19%
Mar-19	29	8	28%	8	28%	8	28%
Apr-19	26	2	8%	2	8%	2	8%
May-19	22	2	9%	2	9%	2	9%
Jun-19	19	0	0%	0	0%	0	0%

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

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

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

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

(TABLE 4c/5c) TOTAL COMPLETED RESTORATION ORDERS BY MONTH COURT ORDER SIGNED^{1,2}

MONTH	<i>Court Orders Signed</i> ¹	7 DAYS OR LESS FROM ORDER SIGNATURE DATE	PERCENT 7 DAYS OR LESS FROM ORDER SIGNATURE DATE	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER ^{1,2}	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER ^{1,2}	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE ^{1,2}	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE ^{1,2}
Jun-18	112	25	22%	25	22%	25	22%
Jul-18	118	23	19%	24	20%	25	21%
Aug-18	121	18	15%	17	14%	18	15%
Sep-18	95	14	15%	13	14%	14	15%
Oct-18	143	21	15%	22	15%	22	15%
Nov-18	109	19	17%	20	18%	20	18%
Dec-18	125	34	27%	35	28%	37	30%
Jan-19	133	32	24%	32	24%	34	26%
Feb-19	141	34	24%	37	26%	37	26%
Mar-19	144	31	22%	31	22%	33	23%
Apr-19	161	37	23%	36	22%	39	24%
May-19	136	25	18%	26	19%	29	21%
Jun-19	119	24	20%	24	20%	25	21%

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

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

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

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

RESOURCES REQUIRED TO PROVIDE TIMELY COMPETENCY SERVICES

Funding and Resources

The Washington State Legislature convened one regular and three consecutive special sessions between January 9, 2017 and July 20, 2017. The Legislature passed a 2017-19 operating budget in Substitute Senate Bill 5883 (SSB 5883) on June 30, 2017. Section 204 (2)(e) of the bill references \$25,053,000 in Fiscal Year 2018 (July 1, 2017 to June 30, 2018) and \$25,847,000 in Fiscal Year 2019 (July 1, 2018 to June 30, 2019) for implementation of efforts to improve the timeliness of competency restoration services pursuant to Chapter 5, Laws of 2015 (SSB 5889). The budget provides funding to operate an additional thirty bed forensic ward in Fiscal Year 2019 (July 1, 2018 to June 30, 2019), assuming the closure of one thirty bed civil ward and subsequent conversion to a forensic unit. The Aging and Long Term Services Administration, the Developmental Disabilities Administration, and Western State Hospital are already collaborating on targeted efforts to successfully discharge patients into the community to reduce the population of one civil ward by thirty patients, as contemplated by the Legislature. The Legislature also funded a twenty-four bed expansion at Yakima Residential Treatment Facility. The Department intended to move forward with this expansion to provide relief to class members. However, on November 1, 2017, Plaintiffs and the Department submitted a proposal to the court that would transition the operations planned for Yakima expansion to Building 27 at WSH. On November 21, 2017, at a status hearing in the Federal District Court, the Department with the Governor's office reiterated the plan to shift the expansion money from Yakima to Building 27 at WSH for operations if the court would release fine money to pay for the capital improvements. On January 25, 2018, Judge Pechman heard a motion to use contempt fine funds for the remodel of Building 27 and agreed, in principal, once a few minor changes were made to the plan. Therefore, in the FY 2018 Operating Supplemental Budget, the additional funds that were earmarked for the twenty-four bed expansion at the Yakima Residential Treatment Facility were removed.

The FY 2018 Supplemental Capital Budget includes \$3 million for renovation of 1N3 for twenty-five forensic and \$3.5 million for renovation of 3N3 to provide another twenty-five forensic beds at Eastern State Hospital. It also includes \$10.5 million in the 2017-19 biennium and a proposed \$9.6 million in the 2019-21 biennium for predesign, design, and renovation of Western State Hospital Building 29 to support sixty additional forensic beds.

2019-2021 Biennial Budget Summary for *Trueblood* Agreed Settlement

With legislative approval and the support of the Governor, the Department of Social and Health Services (DSHS), Health Care Authority (HCA) and the Washington State Criminal Justice Training Commission (CJTC) received the below funding that will benefit the implementation of the settlement agreement approved in the *Trueblood et al. v. DSHS* lawsuit.

The agreement implementation occurs in phases within different regions of the state. The first phase covers Pierce, Southwest and the Spokane regions. This agreement outlines five key areas of investment: competency evaluations, competency restoration, crisis diversion and supports, education and training, and workforce development.

Administration. \$2.5 million for positions for the 2019-21 biennium at both DSHS and HCA to administer the settlement agreement.

Competency evaluation. \$5 million to DSHS for 13 competency evaluator positions in fiscal year 2020 and five in fiscal year 2021. It also pays for two additional program manager and three administrative assistant positions to support the evaluators' work.

Competency restoration. \$1.89 million to HCA for outpatient competency-restoration teams.

Crisis services. Expanded crisis triage/crisis stabilization and mobile crisis services to divert individuals from potentially becoming class members was included within one item in the HCA budget. The total amount for these projects is \$10,233,000.

Diversion support. \$11 million to HCA for individuals with behavioral health issues arrested for misdemeanor crimes. This funding is for non-Medicaid costs associated with serving individuals in crisis triage, outpatient restoration or other programs that divert individuals with behavioral health disorders from the criminal justice system. This funding can also be used for housing supports.

Engagement and Outreach. Intensive case management services focused on individuals identified through a comprehensive data system that is based on history of services, risk scores and predictive modeling. \$4.7 million is allocated to HCA to create teams that will locate, engage and connect individuals identified as high utilizers with services and resources.

Housing supports. \$6.4 million allocated to HCA for four forensic Housing and Recovery through Peer Services (HARPS) teams in the Phase 1 regions. These teams provide supportive housing services and transitional housing vouchers for individuals referred for outpatient competency restoration, intensive case management and other populations under the settlement. Each team will consist of a housing support specialist, two peer specialists, and resources to support the transitional housing needs of individuals in the forensic system as well as resources to assist individuals transitioning from crisis services.

Forensic navigators. \$2.2 million to DSHS to fund nine forensic navigators, a new position established in the settlement agreement. Based on the agreement, navigators' work will begin in the Phase 1 Regions. The budget outlook assumes an additional nine positions in fiscal year 2021-23 for Phase 2 of the settlement.

Additional Forensic Bed Capacity. Over \$27 million allocated to DSHS for the addition of forensic bed capacity across the state. This includes two new 25-bed competency restoration units at Eastern State Hospital. In the 2017-19 budget, the Legislature allotted funding for the conversion of 42 beds from civil to forensic on two wards at Western State Hospital per the agreement.

The 2018 supplemental operating budget included funding for DSHS to begin operating 30 beds in building 27 on the grounds of Western State Hospital as a residential treatment facility in FY 2019. Funding was provided to increase resources available to operate this unit at a level similar to the forensic residential treatment facility being operated at Maple Lane.

Technical assistance to jails. \$633,000 to DSHS for positions to provide technical assistance and training to jails identified in the settlement agreement.

Crisis intervention training (CIT). \$899,000 for the CJTC to provide crisis intervention training to law enforcement agencies. There is also \$4 million allocated to CJTC to fund the WASPC co-responders.

Workforce development. \$653,000 to DSHS for job positions dedicated to workforce development activities as identified in the settlement agreement.

Enhanced Peer Support. Just over \$400,000 is allocated to HCA and one FTE to develop an enhanced continuing education curriculum for certified peer counselors on the criminal justice system. Funds and activities will focus on the curriculum development, materials to train and training costs.

Need Projections and Bed Capacity

During the June, 2017 *Trueblood* Status Hearing, Judge Pechman directed Dr. Danna Mauch to hire a contractor to conduct a Competency Services Bed Need Study to illustrate patient demand and bed need, and ultimately to determine the feasibility of, and timeframe for, compliance with Court orders. The impact of community based competency evaluation on the demand for inpatient CE/CR beds will also be measured.

The TriWest Group was selected as the contractor to complete this work within a 60-90 day timeframe. On October 13, 2017 TriWest requested and received aggregate level referral data from DSHS. DSHS provided TriWest the daily aggregate data on November 28, 2017. TriWest informed DSHS that they received word of conditional approval by the WSIRB on November 30, 2017. On February 1, 2018, TriWest informed DSHS that the WSIRB acknowledged receipt of their response to conditional approval and revised application. On April 9, 2018, TriWest provided DSHS a signed copy of the WSIRB approval that would allow DSHS to share client-level data for the study. DSHS updated the data that was prepared for TriWest in November of 2017 while waiting for the IRB approval to include more recent data through February, 2018. DSHS provided TriWest the client level data in April 2018 after receiving a copy of the WSIRB approval from TriWest.

TriWest provided an update on May 22, 2018. TriWest has been working with the client level data provided by DSHS including talking with DSHS data staff at the headquarters and the state hospitals to gain some understanding of data issues TriWest had identified. TriWest found those conversations helpful. However, they observed that some data challenges remain. TriWest is working on revising their coding for the bed model. TriWest also noted that they have provided an update to the Court Monitor so she is aware of the data issues and appreciates the efforts to troubleshoot and move forward.

On June 27, 2018, TriWest reported reviewing and analyzing the client-level data, as well as the model that calculates the number of historic beds needed to reduce wait times. TriWest reported they are in the process of transforming the model into a version that uses entirely de-identified data so it may be posted to the DSHS website.

TriWest reported to DSHS plans to have a draft to DSHS in early to mid-August 2018. On August 29, 2018, TriWest provided the following updates:

- TriWest conducted an internal review process that identified a change that was needed which required additional programming.
- TriWest made those changes and are hoping to provide the Court Monitor a report on the internal review mentioned above.
- TriWest will schedule a review with DSHS to clarify any questions before findings are presented to the court parties.

DSHS received the TriWest draft report from the Court Monitor on October 3, 2018. The report was presented to DSHS via webinar on December 10, 2018.

TRUEBLOOD KEY ACCOMPLISHMENTS – JUNE 2019

Talent Acquisition program staff Business Managers continue to support hiring needs associated with the Fort Steilacoom Competency Restoration Program for phase 3 of the remaining core FTE's.

RECRUITING:

During this reporting period:

- For Western State Hospital
 - Psychiatrist presented and has been interviewed by WSH.
 - Psychologists, 8 qualified Psychologists presented, 1 hired for WSH.
 - Adult or Family Medicine ARNP's, 13 qualified applicants presented for WSH.
 - Psychiatric ARNP, 2 qualified applicants presented for review.
 - Psychiatric ARNP, 1 qualified applicant presented. Interview scheduled for July 10 for Ft. Steilacoom Competency Restoration Program.
 - 81 Mental Health Technicians were presented for consideration for WSH.
 - RN 2 outreach continues. 90 applicants presented, 10 have been hired for Ft. Steilacoom Competency Restoration Program.
 - Physician outreach extended, 3 applicants presented previously were not selected for interview at Ft. Steilacoom Competency Restoration Program.
 - RN 3 Nursing Supervisor, hired at WSH.
 - Institution Counselor 2 interviews in progress. 317 applicants forwarded to date. And an additional 48 applicants presented for on call positions, 1 hired.
 - Center Medical Director applicant presented for review.
- Outpatient Competency Restoration Administrator hired and moved to Healthcare Authority.
- Psychologist 3 presented for consideration to Eastern State Hospital
- Talent Acquisition program staff Business Managers continue to support hiring needs associated with the Fort Steilacoom Competency Restoration Program for phase 3 of the remaining core FTE's.

RESIDENTIAL TREATMENT FACILITIES (RTF's) DATA:

Presents monthly data for the current calendar year, with a year-over-year average comparison.

YAKIMA

Data Elements	2018 Avg	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	2019 Avg
Census (last day of month)	22.1	23	21	23	23	22	22							22.3
Total patients admitted	9.8	15	11	11	12	14	5							11.3
Completed and found competent (1st Restoration)	6.5	8	7	6	10	11	1							7.2
Not likely restorable (transported back to jail)	0.8	2	0	0	0	0	1							0.5
Court Order lapsed (Transported back to Jail)	1.0	1	2	1	1	2	0							1.2
Felony patients completed and found not likely restorable (1st Restoration)	0.0	0	0	0	0	0	0							0.0
Misdemeanor patients not restored (no further treatment by law)	0.0	0	0	0	0	0	0							0.0
Total transferred to State Hospital	1.3	3	2	3	1	2	0							1.8
For physical aggression	0.3	1	0	1	0	0	0							0.3
For sexually inappropriate behavior	0.0	0	0	0	0	0	0							0.0
For medical reasons	0.8	2	2	2	1	2	0							1.5
Due to court ordered treatment at SH	0.0	0	0	0	0	0	0							0.0
Other	0.3	0	0	0	0	0	0							0.0
Total patients eloped	0.0	0	0	0	0	0	0							0.0
Total recommended for early evaluation	2.0	3	2	2	4	0	0							1.8
Total recommended for 2nd 90-day order	2.7	1	2	2	4	1	3							2.2
Total recommended for 3rd 90-day order	0.4	0	0	0	0	0	0							0.0

MAPLE LANE

Data Elements	2018 Avg	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	2019 Avg
Census (last day of month)	26.3	29	26	27	28	30	29							28.2
Total patients admitted	14.9	11	10	16	12	16	16							13.5
Completed and found competent (1st Restoration)	6.6	7	5	4	2	3	8							4.8
Not likely restorable (transported back to jail)	0.9	1	2	0	1	3	2							1.5
Court Order lapsed (Transported back to Jail)	0.0	0	0	0	0	0	0							0.0
Felony patients completed and found not likely restorable (1st Restoration)	0.1	1	0	0	0	1	0							0.3
Misdemeanor patients not restored (no further treatment by law)	2.6	1	1	2	3	3	2							2.0
Total transferred to State Hospital	1.0	2	0	1	1	1	1							1.0
For physical aggression	0.7	2	0	0	1	0	1							0.7
For sexually inappropriate behavior	0.1	0	0	0	0	0	0							0.0
For medical reasons	0.2	0	0	1	0	0	0							0.2
Due to court ordered treatment at SH	0.1	0	0	0	0	0	0							0.0
Other	0.0	0	0	0	0	1	0							0.2
Total patients eloped	0.0	0	0	0	0	0	0							0.0
Total recommended for early evaluation	3.8	3	5	4	2	4	0							3.0
Total recommended for 2nd 90-day order	3.6	3	2	3	8	6	2							4.0
Total recommended for 3rd 90-day order	0.3	0	1	2	1	0	2							1.0

REQUESTS FOR INFORMATION (RFI) RELEASES

Two Request for Information releases were completed during the months of February and August, 2017. Additionally, the plaintiffs provided a list of prospective interested individuals to conduct Competency to Stand Trial evaluations as possible contractors in the November 21, 2017 status hearing.

The Department reached out to the names provided by the plaintiffs in gathering information about logistical and financial needs to complete such evaluations. Contact was started in November and was completed in December, 2017. A total of thirty-one potential contractors were contacted, with 17 agreeing to speak with the Director of OFMHS. Data was shared in the status hearing on January 25, 2018 and the Court Monitor provided the recommendation of completing a third Request for Information with modifications to the deadline requirements and target individuals who responded positively during the outreach to apply.

The third RFI was drafted and sent to the court monitor, the Plaintiff attorneys, and the Attorney General's Office for review and comment. A final draft was completed and on February 28th, the third Request for Information was completed and distributed. The RFI closed on April 30 and a preliminary meeting was held with the Assistant Secretary in May 2018. A follow-up meeting was held on June 6, 2018.

The plan for having the capacity for increases in demand is being addressed in the *Trueblood* negotiation settlement proposal, which was submitted to the court on August 16, 2018. A revised negotiation settlement was submitted October 25, 2018 and preliminary approval was received on November 1, 2018. The final status hearing on the revised negotiation settlement was held on December 11, 2018 and approved by Judge Pechman the same day.

The Governor's budget released in December 2018 reflected an increase in forensic evaluators to provide the capacity to address any sudden increases in demand. The legislature funded the requested 18 evaluators over the next biennium at the close of session in April. The governor signed the budget in May and work has started in interviewing for positions with start dates after July 1, 2019. Thirteen evaluator positions were funded after July 1, 2019.

TRUEBLOOD IMPLEMENTATION STEPS TAKEN AND PLANNED—JUNE 2019

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Court Appointed Monitor Coordination				
Monthly Reports	Release June report	Complete	<ul style="list-style-type: none"> • Maintain compliance with the Court. • Use data to review and improve the provision of forensic services. 	Release of June report to Stakeholders completed.
Legislative Coordination				
Implement Engrossed Substitute Senate Bill (ESSB) 6656: Funding applications	Apply for funding from the Office of Financial Management (OFM) from the Governor's Behavioral Health Innovation Fund relating to the state hospitals' forensic systems.	<p>Passed legislature. Expires on July 1, 2019 per Section 14.</p> <p>Complete</p>	<ul style="list-style-type: none"> • Section 5(2) required OFM to contract with an external consultant to examine the current configuration and financing of the state hospital system and make recommendations on a number of different areas, including identification of the potential costs, benefits, and impacts associated with dividing one or both of the state hospitals into discrete hospitals to serve civil and forensic patients in separate facilities. The consultants' report was due to the Governor and Legislature by Oct. 1, 2016. • Section 5(3) required DSHS to contract for the services of an academic or independent state hospital psychiatric clinical care model consultant to examine the clinical role of staffing at the state hospitals. The consultants' 	<p>The Select Committee for Quality Improvement in State Hospitals met on October 30, 2017 and on December 15, 2017. During the December 15, 2017 meeting, the Department presented material on the three prosecutorial diversion programs currently being funded in 2017. Additionally, the Court Monitor provided an overview and update on the eight programs that received <i>Trueblood</i> Fine money for diversion services.</p> <p>In 2018, during the months of January, February, March, May, June, August, September, November, and December no hearings were scheduled.</p> <p>Meetings were held on the following dates: April 18, 2018, July 24, 2018, and the most recent meeting was held on October 18, 2018.</p> <p>In 2019, the first meeting of the year was held on January 7, 2019 with an agenda (and other meeting materials) found here:</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
			<p>report was due to the Governor and Legislature by Oct. 1, 2016.</p> <ul style="list-style-type: none"> Section 6 created the Governor's Behavioral Health Innovation Fund in the state treasury. Only the director of financial management or designee may authorize expenditures from that Fund, which are provided solely to improve quality of care, patient outcomes, patient and staff safety, and the efficiency of operations at the state hospitals. 	<p>https://www.governor.wa.gov/issues/issues/health-care-human-services/select-committee-quality-improvement-state-hospitals</p> <p>With the start of the legislative session on January 14, 2019, no meetings were scheduled in February, March or April. With session concluded, the Department waits for the next meeting to be scheduled. No meeting was scheduled in May or June and the committee ends on July 1, 2019. The Behavioral Health Recovery System Transformation (BHRST) committee will be convened after July 1, 2019 likely conducting similar work as the Select Committee.</p>
Consult with DOH about draft legislation requiring DOH certification of forensic evaluators to determine the need for a sunrise review	Consult DOH	Ongoing	<ul style="list-style-type: none"> Expanded pool of forensic evaluators would help improve timeliness. Licensure would provide quality assurance and create professional standards for forensic evaluators. Develop long-term certification of forensic evaluators, consistent with the <i>Trueblood</i> Court Monitor's recommendations on mid- and long-term performance to implement a forensic certification program to sustain performance. 	<p>An OFMHS Certification workgroup convened in September 2018 and proposed a plan of action for BHA leadership. In lieu of a formal Forensic Evaluator Certification program, the plan proposes an immediate emphasis on training opportunities.</p> <p>The <i>Trueblood</i> Settlement, Workforce Development, includes exploration of certification programs. New Workforce Development Specialist FTE(s), once hired in late 2019, will be assigned to this task.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Labor Coordination				
Engage Labor Leaders and Members	Conduct ongoing bi-monthly meetings with Labor leaders	Ongoing	<ul style="list-style-type: none"> • Discuss policy, budget and operational changes likely required to comply with the <i>Trueblood</i> requirements. • Obtain staff necessary to safely support operation of additional forensic and civil beds at the state hospitals. • Obtain necessary psychiatrists and physicians to supplement services provided by employees at Western State Hospital to safely support the operation of additional forensic and civil beds. 	<p>In 2018, a UMCC meeting was scheduled and held on February 27, 2018. An additional UMCC meetings with the forensic evaluators has been scheduled for October 2, 2018.</p> <p>A demand to bargain on juvenile evaluations was completed on June 22, 2018. Additional Labor meetings were held for the operations of Building 27 at WSH as an RTF during August with WFSE and SEIU. A second meeting with WFSE was held toward the end of August to answer remaining questions on the operations of Building 27.</p> <p>A demand to bargain with the Coalition was held on October 23, 2018. As a result of the meeting DSHS will be providing additional data relating to scope of work for pharmacy and medical staff. No meetings were scheduled in November with Labor and a meeting with WFSE was held in December as part of the normal UMCC conducted with forensic evaluators.</p> <p>No meetings were held in January and February of 2019. A meeting with WFSE was held March 15, 2019 to discuss the staffing at Building 27 with no further meetings scheduled in April, May, or June.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Data Collection and Fiscal Modeling				
Monthly report data collection	Identify and obtain needed data	Ongoing	Obtain data for monthly reports and develop standardized reports to inform policy development and implementation.	Data collection is ongoing.
Institute data audit process	Review data and files of cases with anomalies and identify trends	Ongoing	Ensure completeness and accuracy of wait list data.	Data validation process is ongoing. IT project team, and Research and Data Analysis (RDA) analysts, researched data anomalies to determine the cause, impact, and remediation required.
Forensic Data System Design/ Development	Build data models- Entity Relationship Diagram (ERD)	Complete	<ul style="list-style-type: none"> • Integrated Forensic System with consistent data entry and tracking of all class members from creation of court order for mental competency evaluation through completion of evaluation and/or restoration (whichever is later). • Provided capability for access by evaluators to client status changes, regardless of location, to reduce delays. • Provided a single platform for quality reporting, eliminating the variability currently inherent in leveraging legacy applications not meant for this purpose. 	The Project team continues to support the Forensic Data System, its users and Research and Data Analysis (RDA) to streamline the reporting process out of a new system.
	Finalized Gaps analysis	Complete		
	Finalized task list and timeline	Complete		
	Establish Project Governance	Complete		
	Analyze Legacy Applications Data Quality for potential data migration	In progress		
	Complete Technical Design for all Modules	May 2018		
	Complete training	June 2018		
	Implement new system	July 2018		

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Forensic Data System Post-implementation Processes	Data migration clean-up	In Process	Some Migrated Data contained historical elements that needed to be cleaned up in the new system.	Historical records need to be reloaded into the Forensic System Database. The project team will be analyzing the historical data load and presenting the finding to governance this month or next for guidance and recommendations.
	Usability	In Process	<ul style="list-style-type: none"> The system contains modules that align with roles of forensic activities and allows for controlled access by those same user roles. This controlled access prevents users from easily seeing activity for a court order that crosses many modules. Modify search screens to reveal all court orders for individual clients. To streamline the admissions process, create refined report for inpatient movement (Due In/Due Out Report). 	<p>The IT project team has modified search screens so show a more complete snapshot of the court order which has eliminated the barriers resulting from role based access. Roles are still limited in what data may be edited.</p> <p>System now directs users to all court order for a client, including the client's aliases.</p> <p>The Due In/Due Out Report has been modified to contain the essential fields for the hospital admission coordinators. Navigation for admission coordinators within FDS has been minimized.</p>
	System Data Issues	Partially Completed	<ul style="list-style-type: none"> Improve data integrity (date client status effectively changed, Forensic Evaluation Completion, Due In Date and Due Out Date) Resolve missing data (CINs) Built ability to link queues, status start dates and status due dates to changes in client data, delay reasons and good cause extensions to changes in client status. 	<p>Client Status History table has been added to the database and user interface, user interface has been updated to capture updated Court Order Due Date for Forensic Evaluation Completion.</p> <p>New Client Identification Number confirmer has been trained and we are requesting access to additional secondary systems for identifying clients.</p> <p>New structure for capturing client status has been released to users on April 17, 2019.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
	RDA Reporting Issues	In Process	Ensure RDA is accounting for all / correct elements when building reports.	<p>Once RDA is confident that their report queries are complete and accurate, the queries will be validated by the IT project team.</p> <p>RDA has expertise in the legacy database schemas and the court requirements. The IT project team has expertise in the new Forensic Data System schema and will continue to transfer that expertise to RDA.</p>
Human Resources				
Hire Office of Forensic Services HQ positions	Hire and Onboard	Complete	Provide infrastructure for forensic services system and improve effective and timely provision of competency services.	<p>In July and August 2018, no interviews were scheduled for the one vacant supervisor position located in Seattle. An application for a supervisor was received at the end of September. In early October, a decision was made to not interview based on the paucity of forensic experience.</p> <p>Two applicants were interviewed for the vacated outstation position (effective November 25, 2018) and the supervisor position in Seattle. An offer was made and accepted for the outstation supervisor position with a start date of December 1, 2018. In January 2019, the supervisor of the jail based evaluators based at WSH resigned; however a replacement was hired with a start date of February 1, 2019.</p> <p>The position for Seattle supervisor is filled. An offer was made and accepted on March 29, 2019 with a start date of May 16.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				<p>Interviews for the vacancies in the inpatient unit at WSH were conducted in January with positions offered in February 2019. One applicant will start April 1, 2019 and the other on June 1, 2019. In the month of April, the Department continued to recruit for the last evaluator vacancy to complete assessments at the Yakima Competency Restoration Program.</p> <p>Lastly, interviews for the thirteen available positions began in May to begin filling positions after July 1 2019. Five offers have been made in June with start dates ranging, so far, from July 16 to October 1. Two additional offers are scheduled to be made in early July with interviews on-going to fill the remaining vacancies.</p>
Hire additional hospital ward staff	Conduct targeted hiring events	In progress	Obtain required staff of all classes to safely and appropriately operate additional civil and forensic beds and to meet data collection, analysis and reporting needs.	Talent Acquisition recruiting efforts continue for WSH.
	Pursue contracting			
Competency Evaluation				
Build capacity for out-station sites	Site agreements	N/A	Increased capacity at out-station sites will reduce wait time for evaluation.	At the Yakima RTF, attorneys for all 18 evaluations conducted in June were requested to allow

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
	Out-station sites operational	Complete		interview by videoconferencing. Eight attorneys refused, four did not respond to repeated inquiries, and six agreed to allow videoconference interviews. One VC interview lacked audio, so the attorney additionally used his phone to participate. The other five evaluations allowing for VC interviews were done in person due to the timing of other evaluations.
Coordinate with forensic mental health system partners	Regular meetings with County Stakeholders	Ongoing	Stakeholder meetings will focus on topics where collaborative work is required to meet the requirements of the <i>Trueblood</i> Decision.	Quarterly stakeholder meetings continue to occur with Pierce County; most recently on June 12, 2019. OFMHS is now partnering with King County's Department of Behavioral Health and Recovery to convene a group to address issues related to the <i>Trueblood</i> class members. This group has now met twice, on May 31 and June 25, 2019. Participants include police, behavioral health providers, shelter services, prosecutors, defenders, DRW, DSHS and more.
Continue current county-conducted evaluation system until 2018	Establish quality criteria for evaluation reports	Ongoing	Obtain data needed from counties in order to meet court ordered reporting requirements.	The Quality Assurance (QA) program for competency reports began November 1, 2017. Forensic Evaluator Supervisors were provided with a manual of standards for competency evaluations and then audited competency evaluation reports generated by their direct reports. During Q2 2019, 82% of forensic evaluators had competency evaluation reports audited by

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				supervisors. A total of 48 competency evaluation reports were reviewed in Q2 2019. Q3 2019 data will be available after the end of September 2019.
Explore and pursue triage system possibilities	Roll out Phase II	In progress	Establish an efficient evaluation to identify individuals who: need inpatient services due to serious mental health condition; clearly do not require inpatient evaluation services; or are clearly competent due to changes in their condition since the issuance of an order for evaluation (such as no longer drug affected).	<p>As of June 30, 2019, OFMHS has received 342 triage referrals from jail staff/defense. Of those referrals, 214 were approved. 88 of the referrals were denied, and 40 of these referrals were withdrawn before placement could be made.</p> <p>On November 2, 2016 OFMHS began calling jails holding in-custody defendants waiting 14 days for a competency evaluation to notify jail staff of the Triage Consultation and Expedited Admissions (TCEA) process. In June 2019, 21 calls were made to jails and 12 referral requests submitted, 10 of which were accepted.</p> <p>Since tracking began, 2,188 calls have been made.</p> <p>The Triage Services Users Guides are completed and were distributed statewide, via a Listserv created by OFMHS which includes prosecutors, defense counsel, judges, jail staff and others.</p> <p>A revised edition of these Guides has been drafted. Feedback from the Court Monitor and Dr. Pinals has been received and has been incorporated into proposed final versions of the Guides, and submitted to the Court Monitor for her review.</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Develop Telehealth video-conferencing systems to assist in the completion of evaluations	State-wide implementation and utilization of technology	Ongoing	Establishing this technology in multiple locations around the state (especially in rural areas) will allow OFMHS to conduct more evaluations, thereby helping to meet Court ordered requirements.	The pilot evaluation of the Video Conferencing (VC) system was completed in February 2019, with 50 evaluations. The capability for attorneys to participate via three-way conference was also tested and is available. Dr. Luxton prepared a final manuscript evaluating the pilot program (presently in review at a peer-reviewed academic journal). Dr. Luxton and colleagues also published a second paper in the journal, Current Psychiatry Reports, regarding the use of VC for conducting competency to stand trial evaluations. The VC program is now in operational mode and will continue at the existing sites (four County Jails). Expansion to additional sites is not planned at this time. Dr. Luxton provided two training seminars on the topic in 2019. OFMHS continues to educate courts and jails on this technology in hopes of generating greater interest in, and utilization of, this technology.
Competency Restoration				
WSH – opening 30 forensic beds once 30 civil patients transition to community	Bed Occupancy with forensic patients	7/1/2018	Serves overall plan to add beds and expand State Hospital bed capacity to meet Court ordered requirements.	The 2017-19 budget provides funding to operate an additional thirty bed forensic ward in Fiscal Year (July 1, 2018 to June 30, 2019) 2019, assuming the closure of one thirty bed civil ward and subsequent conversion to a forensic unit. The Aging and Long Term Service Administration, the Developmental Disabilities Administration, and Western State Hospital are already collaborating on targeted efforts to successfully discharge patients into the community to reduce the population of one civil

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				<p>ward by thirty patients, as contemplated by the Legislature.</p> <p>South Hall 10 (S10) was reopened in May, 2018 for forensic patients after civil patients were either moved or discharged. S10 is to be for forensic patients who are committed by NGRI and are ready to begin to transition to the community. WSH is on track for these additional beds so long as they can maintain and retain new Psychiatrists to manage patient care.</p>
WSH addition 45 beds	Bed Occupancy with forensic patients	Ongoing		<p>The Legislature funded this request to operate 45 additional beds in building 27 and the S4 ward. The initial FY 2018 request can be found here:</p> <p>https://www.dshs.wa.gov/data/budget/2018/030-PL-CV-Forensic-Ward-Staffing.pdf</p> <p>Forensic 3 (F3) was opened in June, 2018 as another forensic admissions ward. F1 and F2 will continue to be the highest acuity for admission/restoration and F3 will add capacity for a similar, less acute admission/restoration program. South Hall 4 (S4) is expanding from 15 beds to 30. Because of the challenge to hire Psychiatrists, the expansion of S4 is moving more slowly, increasing by one bed per week, until WSH can get locum support or additional Psychiatrists hired.</p> <p>The legislature funded, in the 2019-2021 Biennial Budget (for purposes of the <i>Trueblood</i> Agreed</p>

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				Settlement) Additional Forensic Bed Capacity. Over \$27 million was allocated to DSHS for the addition of forensic bed capacity across the state. This includes two new 25-bed competency restoration units at Eastern State Hospital. In the 2017-19 budget, the Legislature allotted funding for the conversion of 42 beds from civil to forensic on two wards at Western State Hospital per the agreement.
Provide Restoration Treatment at the Maple Lane Competency Restoration Program (MLCRP)	Open Maple Lane facility	Complete	<ul style="list-style-type: none"> Identify alternate facility capacity to meet <i>Trueblood</i> compliance. Any competency restoration treatment program at Maple Lane is anticipated to transfer to operation at a State Hospital before DOC would be housing inmates on that campus. 	Also, see data table on page 24.
	Restore patients to competency	Ongoing		
Provide Restoration Treatment at the Yakima Competency Restoration Program (YCRP)	Open Yakima facility	Complete	Anticipated duration of one year and possible one year extension.	Also, see data table on page 24.
	Restore patients to competency	Ongoing		

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Provide Restoration Treatment at Building 27	Open Building 27	Ongoing	<ul style="list-style-type: none"> Identify alternate facility capacity to meet <i>Trueblood</i> compliance. Collaborate with court parties to open the facility. 	<p>AustinCina continues to revise construction plans to remodel the facility according to ongoing decisions made by the parties. This plan will inform OFMHS's operational project schedule which is under development.</p> <p>The parties meet via conference call every week to update on progress and plan next steps.</p> <p>The OFMHS Project Manager, Megan Celedonia, has broken the project down into 20 "buckets of work" (BOWs) for organizational and planning purposes. BOW teams include: staffing, policy development, admissions criteria, licensure/certification, communications, labor relations, parties liaison, construction, training, patient records, facility services, purchasing, budget/fiscal, IT, incident reporting system, emergency management planning, labor and industries insurance, contracts, ESH referrals, and project management.</p> <p>The OFMHS Project Manager's most recent Monthly Progress Report can be found at Appendix K.</p>
Outpatient Competency Restoration Programs (OCRP)	Diversion Programs are Operational	Ongoing	Development and implementation of outpatient competency restoration programs in King, Pierce, and Spokane Counties.	Outpatient competency restoration programs were included in the <i>Trueblood</i> settlement. The Governor's proposed budget for the 2019-2021 biennial budget included funding for the OCRP programs contemplated in the settlement. A workgroup has been convened with staff from both OFMHS and the State of Washington Health Care

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				Authority to plan for effective implementation of this new endeavor within the three Regions of the Settlement Agreement's first phase.
County transport of patients	Coordinate with counties to develop transport protocols	Ongoing	Ensure timely transport of patients to support delivery of competency services as directed in court order.	During the month of June there were no concerns or questions about transportation issues brought forward to the attention of DSHS.
Diversion Alternatives				
Implement 2E2SSB 5177 (2015) provisions for dismissal of charges & referral to treatment	Diversion Programs are Operational	Ongoing	Prosecutor can dismiss criminal charges without prejudice & refer to community-based mental health services.	OFMHS Liaison and Diversion Specialist will continue to monitor the programs and provide technical assistance as needed to address any barriers.
Increase diversion opportunities	Governor's Office to contract with diversion consultant	Complete	Hire a consultant to identify how best to divert persons with mental illness from the criminal justice system and identify appropriate funding mechanisms with appropriate stakeholders.	The Department engaged a jail /diversion consultant, who came out to DSHS in 2016 and provided a report at the end of that same year.

FEBRUARY 8, 2016 COURT ORDER STATUS REPORT/UPDATES

The status updates to the February 8, 2016 Court Order are shown below.

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, by:			
Requirements	Date	Status	Progress Notes
A. Producing a triage plan for review and comment	March 1, 2016	Complete	Complete
B. Putting the triage plan into effect, after accounting for the comments received	March 15, 2016	Complete	Complete
C. Reporting on the implementation and effectiveness of the triage plan in Defendants' monthly reports to the Court Monitor	Beginning April 15, 2016, ongoing	Ongoing	See 3c below and review task progress in "explore and pursue triage system possibilities."
2. Eliminate the backlog of class members currently waiting for in-jail evaluations by:			
A. Formally notifying DSHS's forensic evaluators and Pierce County's panel evaluators of plan to eliminate the backlog of people waiting for in-jail evaluations and requesting their help in doing so, and providing plans to get evaluations done through the use of extra duty pay and other methods available	February 15, 2016	Complete	Complete
B. Preparing a list of all backlog cases, organized by jail and by county	March 1, 2016	Complete	Complete
C. Finalizing recruitment of evaluators to aid in the backlog elimination effort and setting a schedule for the evaluation of each backlog case	March 1, 2016	Complete	Complete
D. Initiating the backlog elimination effort	March 7, 2016	Complete	Complete

E. Completing evaluations for all backlog cases (any patient waiting more than 14 days at the end of the month)	April 15, 2016, Ongoing	Ongoing	Of the 397 jail evaluation orders signed in June, 294 were completed within 14 days, which is 74.0%. This number is expected to rise once the data are mature.
3. Implement a triage system to sort class members waiting for in-hospital evaluations by the acuity of their mental illnesses and their current manifestations, by the seriousness of their crimes, and by the amount of resources their cases require, by:			
C. Reporting on the implementation and effectiveness of the triage plan in Defendants' monthly reports to the Court Monitor	Beginning April 15, 2016, ongoing	Ongoing	<p>As of June 30, 2019, OFMHS has received 342 triage referrals from jail staff/defense. Of those referrals, 214 were approved. 88 of the referrals were denied, and 40 of these referrals were withdrawn before placement could be made.</p> <p>The Triage Services Users Guides are completed and were distributed statewide, via a Listserv created by OFMHS which includes prosecutors, defense counsel, judges, jail staff and others.</p> <p>A revised edition of these Guides has been drafted. Feedback from the Court Monitor and Dr. Pinals has been received and has been incorporated into proposed final versions of the Guides, and submitted to the Court Monitor for her review.</p>
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, by:			
C. Reporting on the implementation and effectiveness of the triage plan in Defendants' monthly reports to the Court Monitor	Beginning April 15, 2016	Complete	<p>As of June 30, 2019, OFMHS has received 342 triage referrals from jail staff/defense. Of those referrals, 214 were approved. 88 of the referrals were denied, and 40 of these referrals were withdrawn before placement could be made.</p> <p>The Triage Services Users Guides are completed and were distributed statewide, via a Listserv created by OFMHS</p>

			<p>which includes prosecutors, defense counsel, judges, jail staff and others.</p> <p>A revised edition of these Guides has been drafted. Feedback from the Court Monitor and Dr. Pinals has been received and has been incorporated into proposed final versions of the Guides, and submitted to the Court Monitor for her review.</p>
5. Report on the implementation status of the CMS Plan of Correction by:			
B. Reporting on the implementation status in Defendants' monthly reports to the Court Monitor	Beginning March 15, 2016, ongoing	Ongoing	<p>DSHS entered into a second System Improvement Agreement with the Centers for Medicare and Medicaid Services. This agreement ran from November 2, 2017 to July 2, 2018. A copy of the agreement was shared with Dr. Mauch by Defense Counsel on November 3, 2017. As a result of a court order in April, the Department worked with Plaintiffs and the court monitor in developing a bed capacity/expansion plan.</p> <p>Western State Hospital (WSH) was resurveyed May 2018 and did not meet all the Conditions of Participation with CMS. As of July 9, 2018, WSH was decertified. Eastern State Hospital remains The Joint Commission accredited and CMS certified.</p>
6. Plan for recruiting and staffing 30 beds at WSH after compliance with CMS's terms of participation is achieved in March by:			
C. Reporting on the implementation status of the plan and timeframe in Defendants' monthly reports to the Court Monitor	Beginning April 15, 2016, ongoing	Ongoing	<p>DSHS entered into a second System Improvement Agreement with the Centers for Medicare and Medicaid Services. This agreement ran from November 2, 2017 to July 2, 2018. A copy of the agreement was shared with Dr. Mauch by Defense Counsel on November 3, 2017. As a result of a court order in April, the Department worked with Plaintiffs and the court monitor in developing a bed capacity/expansion plan.</p>

			Western State Hospital (WSH) was resurveyed May 2018 and did not meet all the Conditions of Participation with CMS. As of July 9, 2018, WSH was decertified. PSHB Sec. 204 budgeted for the 30 beds at WSH and was completed prior to CMS decertification.
8. Remove barriers to the expenditure of the \$4.8 million in currently allocated diversion funds by:			
D. Executing contracts for implementation by the selected providers	April 15, 2016	Complete	Prosecutorial diversion was funded for fiscal year 20202.
10. Develop a reliable and valid client-level data system to support better management and accountability of the forensic services system by:			
E. Implementing revisions to the existing system or initiating development of a new forensic data and management information system	To initiate new system development efforts- May 27, 2016	Phase 1 close out	<p>The Project team continues to support the Forensic Data System, its users and Research and Data Analysis (RDA) to provide increased data granularity for reporting out of a new system.</p> <p>Phase 1 is closing out and enhancements to the Forensic Data System have been prioritized by the Governance Committee for Phase 2.</p>

JULY 7, 2016 CONTEMPT ORDER STATUS UPDATES

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

1. Monetary sanctions – fines are imposed on a per class member, per day basis. On the 15th of every month, DSHS is required to submit contempt fines data to the court. These data were submitted to the court on August 15, 2016 and will be included in this report, when finalized each month, as Appendices M and N.
2. Diversion plans – DSHS is ordered to develop, in consultation with the Court Monitor, plans for the expenditure of the contempt fines.
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 Table 4.

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

Pursuant to the August 15, 2016 court order, DSHS must provide in-jail competency evaluations within 14 days of a signed court order. When an in-jail evaluation cannot be completed within 14 days and good cause applies (i.e., delay due to clinical reasons, attorney, interpreter, or defense expert), an extension from the ordering court must be secured or DSHS must immediately admit the individual to a state hospital to finish conducting the evaluation. In order to comply with the reporting requirements of the Court's 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 15th court order, DSHS identified a series of necessary changes that will enable DSHS to comply with the order, to include the following:

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

DSHS implemented the Forensic Data system 8/1/2018. Included in this design were the data elements needed to report to the courts. Included in the initial release is the implementation of the new forensic algorithm waitlist. Data was migrated from existing systems and provided the starting point for DSHS on 8/1. The Project team continues to support the Forensic Data System, its users and Research and Data Analysis (RDA) to provide increased data granularity for reporting out of a new system.

The Forensic Advisory Committee (FAC) is a regularly scheduled (twice a month) committee that provides business process clarification and recommendations to the technical team. The FAC will continue to meet to provide input during system optimization and future enhancements. Recommendations from the FAC may be referred to the Governance Committee when appropriate. The Governance Committee meets a minimum of monthly to monitor status and render final decisions on key topics. Governance also prioritizes the future functionality to ensure that the IT project work aligns with the needs of the court and other stakeholders.

APPENDICES

1. **Appendices A-F:**
This file is submitted with the DRAFT and FINAL reports and includes data tables as well as order received rate data.
2. **Appendix G:**
This file is submitted with the DRAFT and FINAL report and contains the Outlier data and delay comments.
3. **Appendix H:**
This file is submitted with the FINAL report and contains the calculation of inpatient contempt fines data.
4. **Appendix I:**
This file is submitted with the FINAL report and contains the calculation of in-jail contempt fines data.
5. **Appendix J:**
This file is submitted with the FINAL report and contains the good cause extension request data.
6. **Appendix K:**
This file is submitted with the DRAFT and FINAL report and contains the project manager's progress report on the Fort Steilacoom Competency Restoration Program.