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

June 30, 2020

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BACKGROUND

On April 2, 2015, the Court ordered the Department of Social and Health Services (DSHS) to file monthly reports with the *Trueblood* Court Monitor on efforts to comply with Court Orders to provide timely competency evaluation and restoration services to Class Members. This monthly report is submitted May 31, 2020 and covers the events of April 2020. This report also provides status updates on additional Court Order requirements. On April 2, 2015, the Court ordered:

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

(1) the number of days between when a court ordered provision of competency services and when provision was completed, for each person ordered to receive competency services during the previous month;

(2) data regarding the number of evaluators, bed capacity, physicians, and other resources needed to provide timely competency services;

(3) the steps taken in the previous months to implement this order;

(4) when and what results are intended to be realized by each of these steps;

(5) the results realized in the previous month;

(6) the steps planned to be taken in the following month;

(7) certification by Defendants that they are fully compliant with all deadlines that became due in the previous month;

(8) Defendants' estimate for when the wait times will reach seven days or less, and all data relied on in making that estimate; and

(9) any other information the Monitor informs Defendants is necessary for the Monitor to fully review Defendants' actions and advise the Court.

The April 2015 order was modified on February 8, 2016. Additional orders were issued on July 7, 2016, August 15, 2016, and April 26, 2017. Status updates on these orders requiring narrative in this report begin on page 55.

This report provides the Class Member data for competency services displayed in two periods: April 1, 2020 – April 30, 2020 and May 1, 2020 to May 31, 2020. The April data are considered "mature" and the May data are a "first look" data set. April 2015 is the baseline month for data analysis.

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

CLASS MEMBER STATUS SUMMARY INFORMATION

TEMPORARY CHANGES TO ADMISSIONS PRACTICES AT WSH AND ESH DUE TO THE COVID-19 PANDEMIC

Due to the COVID-19 pandemic, and in an effort to protect both patients and staff in accord with guidance from federal, state, and local health departments and the DSHS incident command center, some forensic admissions are temporarily being diverted from WSH. Felony conversions will continue to be admitted to WSH at this time. The Department of Health (DOH) has encouraged the limitation of admission to WSH to limit exposure of COVID-19 among patients. To date, WSH has had 8 confirmed cases of COVID-19 in patients and 33 confirmed cases in staff members, impacting 8 separate wards, including forensic wards. In addition, 15% of staff across all disciplines (including those needed to process new admissions such as doctors, nurses, and social workers) are on leave due to meeting high risk criteria. This is in addition to staff who are on leave due to illness. Due to staffing shortages, WSH needed to decrease the number of active wards in order to protect patients and maintain the appropriate staff to patient ratios.

Because the numbers of COVID-infected patients and staff remained low, as of the week of May 11, 2020, admissions to WSH began expanding using a cautious, phased approach consistent with recommendations from DOH. While the hospital will continue to work with attorneys to conduct hearings remotely for individuals already admitted to WSH (such as Sell or competency hearings), if the hearing cannot be held remotely and the individual is returned to jail, re-admissions to WSH will resume for those individuals returning with an additional competency restoration order, such as a second 90-day or 180-day. NGRI admissions also resumed at WSH the week of May 11, 2020.

During the week of May 25, 2020, admissions continued to expand as beds become available. In addition to the cases already being admitted, admissions will focus on first 90-day restoration orders and as additional beds become available, 45-day restoration orders will be added. Furthermore, expedited admissions and transfers from Residential Treatment Facilities (RTF) will be admitted to WSH. As patients are admitted, they will be subject to a 14-day stay on a quarantine ward to ensure they are symptom-free prior to being transferred to other wards. Inpatient competency evaluations, 45-day orders, and misdemeanor competency restorations will continue to be diverted to ESH and, and wherever possible for inpatient restoration, to the RTFs. RTF screening and admissions are currently planned to continue for the available beds, and the RTFs will continue to focus on admissions for west side patients.

For competency evaluation and restoration admissions to ESH, the process has been modified and three beds have been allocated to west side cases and the alternating between east and west side cases has ceased the week of May 25th. DSHS is continuing to encourage and accept triage referrals and prioritize triage admissions where clinically appropriate, and triage admissions will be made to both WSH and ESH. In addition, out-of-custody admissions are temporarily suspended statewide.

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

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

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

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

- Average monthly jail-based evaluation orders signed for April 2015 - April 2020
  - Western State Hospital (WSH): 252.2
  - Eastern State Hospital (ESH): 59.3
  - Both hospitals: 311.6

- Average monthly inpatient evaluation orders signed for April 2015 - April 2020
  - WSH: 14.4
  - ESH: 8.4
  - Both hospitals: 22.8

- Average monthly restoration orders signed for April 2015 - April 2020
  - WSH: 79.4 *
  - ESH: 18.3
  - Both hospitals: 97.7 *
  - Hospitals + Residential Treatment Facility (RTF's): 109.4

- Average monthly RTF restoration orders signed for August 2018 - April 2020
  - RTF's: 34.0 **

* From April 2015 to July 2018, this figure also includes orders from the RTF's; therefore, these figures exceed the WSH figures and the two hospital figures combined.
** Prior to August 2018, RTF data was combined with WSH. From August 2018 onward, RTF data is reported separately.

SUMMARY POINTS RELATED TO ORDERS AND TIMELINESS BASED ON MATURE APRIL DATA

Orders: The number of jail-based evaluation orders assigned to WSH declined steeply (approximately 26%) in April following February and March's significant declines (two-month drop of 37%). The two-month decline was enough to leave evaluations below WSH's monthly average, which has not occurred in at least one year and possibly longer. ESH's jail-based evaluation orders again dropped moderately in March, resulting in a two-month decrease of 28-percent. Combined, the hospitals received 204 jail-based orders in April – a two-month 52-percent decline compared to February's 425 evaluation orders. The historic yearlong demand surge resulting in repeated all time record numbers of cases evaluated appears to be on hold for now as March's evaluation numbers are now below average and April's first-look numbers appear even smaller. At this time, the primary reasons for this change appears to be the COVID-19 pandemic. Numerous district and superior courts have significantly curtailed their criminal dockets, and many of the jails where our evaluators conduct client interviews have insufficient meeting space to observe social distancing and other important pandemic-related safety measures.

- WSH received 3 inpatient evaluation orders, which is substantially lower than the 14.4 monthly average but improves on the previous two-months' of zero orders. ESH had 6 inpatient evaluation orders, which is below their 8.4 monthly average. Orders at both hospitals totaled 9, which is a 60.5-

percent decrease from the 22.8 per month inpatient evaluation average.

- WSH received 34 restoration orders, a significant decline in orders compared to March. The average number of restoration orders is 79.4. ESH had 29 orders in April, which is a slight increase in orders compared to March. The RTF's received 18 orders, which is a moderate decline compared to March and remains significantly below their monthly average of 34.0* orders. There were 81 restoration orders across both hospitals and the RTF's which is a significant decrease compared to the calendar year Q4 in 2019 and January 2020.

* Prior to August 2018, RTF data was included with the data for WSH. From August 2018 onward, RTF data is reported separately.

Wait Times:

- Regarding jail-based 14-day evaluation completion times, WSH increased to 13.7 days on average in April, from order to completion. After a brief pause in several consecutive months of improvement, ESH evaluation times declined again on average to 11.3 days. The combined average, across the system, increased to 13.3 days.

- The average inpatient evaluation admission wait time at WSH is currently zero as no orders were received. WSH did not receive any new court orders for inpatient evaluations in March or April. ESH's average wait time dipped on an extremely small patient comparison size. It is worth noting that the average inpatient evaluation wait times are subject to significant monthly swings in either direction due to the small numbers of patients being admitted and evaluated through this legal authority.

- Restoration admission wait times at WSH is 37.3-days on average, a significant increase in wait time as compared to March. The ESH average is 61.0 days, which is a significant increase in wait times compared to March. The combined average admission wait time for inpatient restoration was 43.9 days in April, a significant increase in wait times compared to March.

Timeliness:

- At ESH, overall timeliness for jail-based evaluation completion increased significantly to an average 88% completion rate within 14 days from receipt of order. WSH's completion rate decreased to 68%.

- At both hospitals combined, overall timeliness for inpatient evaluation admissions is at a 67% completion rate within 7 days from receipt of order. This is a significant decline from the prior month.

- At both hospitals and the RTF's combined, overall timeliness for inpatient restoration admissions increased to a 12% completion rate within 7 days.

OUTLIER CASES (MATURE) APRIL

Evaluations and restorations not completed within standard timelines become outliers. The monthly outlier population cases have been defined as:

- Population is active span cases from the "mature" data month. Currently, the "mature" month April.
- Evaluation spans: are incomplete, or were completed after the end of the "mature" month and wait more than 20-days for an evaluation (In-Jail), or admission (Inpatient), or a change of client status to out of jail, or order withdrawn by court.
- Restoration spans: are incomplete, or were completed after the end of the "mature" month and wait more than 40-days for admission, or a change of client status to out of jail, or order withdrawn by the court.

Table 1. Outlier Cases (Mature)

TABLE 1a. OUTLIERS FOR THE MONTH OF: April-2020			
Type	Number of spans:	span begin to span end, or end of reporting period	
		Minimum Number of days	Maximum Number of days
In-Jail Evaluations	12	22	56
Inpatient Evaluations	14	23	78
Restorations	67	41	162

Table 1 continues below detailing reasons contributing to delays in completing evaluations for outlier cases. The *Trueblood* definition for outliers is offered on page 6.

TABLE 1b. Continued SUMMARY OF EVALUATOR DELAY REASONS[1]			
REASONS FOR DELAY IN DATABASE	In-Jail Evaluations	Inpatient Evaluations	Restorations
Defendant No Show			
Attorney No Show			
Attorney scheduling conflicts	5		
Charges adjudicated prior to eval			
Client or other required evaluation personnel have contracted or been exp			
Client released from custody & can't be located			
Defendant Reschedule			
Defendant would not cooperate with evaluation	1		
Defendant would not participate without attorney present			
Defense Expert scheduling			
Delay in Report Distribution			
Evaluator availability			
Evaluator rejected by prosecutor			
Interpreter needed but court order did not request it			
Interpreter scheduling conflicts	1		
Jail conference room availability/scheduling issues	1		
Jail return/Discharge with no eval done			
Jail/Outside facility staffing issues			
Medical Record/Collateral Information			
New charges - wait for new court order			
No COVID-safe option to conduct the evaluation	8		
Other patient cooperation problem			
police reports	3		
Police reports availability			
Processor error/clerical error			
Relevant discovery availability			
Requires amended court order			
Unknown	1		
Not Applicable[2]		14	67

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

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

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

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

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

TABLE 1c. continued SUMMARY OF ADMISSION DELAY REASONS[1]			
REASONS FOR DELAY IN DATABASE	In-Jail Evaluations	Inpatient Evaluations	Restorations
Bed availability			
Awaiting Instructions from Court			
change from JH to PR			
Charges adjudicated prior to eval			
Client contracted or has been exposed to COVID-19			
Client released from custody & can't be located			
Evaluator rejected by prosecutor			
Hospital staffing issues			
In Custody - Not In Jail			
in hospital - furlough from jail			
Jail return/Discharge with no eval done			
Jail/Outside facility staffing issues			
Medical clearance availability			
Medical Clearance Needed			
Medical Record/Collateral Information			
NCIC/Processing			
Other patient cooperation problem			
Police reports availability			
Relevant discovery availability			
Requires amended court order			
Unknown		14	67
Not Applicable[2]	12		

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

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

CLASS MEMBER STATUS DATA TABLES

The following series of tables present class member status data for April. May data are "first look" and are subject to change.

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

TABLE 2. Class Member Status Western State Hospital – Jail-based Competency Evaluations[1]

MONTH	*Court Orders Signed*[2]	Days from order signature to[3]: hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals		*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]
		Average	Median	Average	Median	Average	Median		Average	Median			
May-19	327	0.5	0.0	0.8	0.0	n/a	n/a	321	12.2	13.0	79 %	83 %	85 %
Jun-19	306	0.7	0.0	1.0	0.0	n/a	n/a	280	12.9	13.0	75 %	81 %	84 %
Jul-19	388	0.6	0.0	1.0	0.0	n/a	n/a	379	12.3	13.0	75 %	79 %	80 %
Aug-19	368	0.7	0.0	1.1	0.0	n/a	n/a	360	11.7	12.0	81 %	86 %	89 %
Sep-19	294	0.6	0.0	0.9	0.0	n/a	n/a	328	12.0	13.0	84 %	87 %	89 %
Oct-19	411	0.7	0.0	1.0	0.0	n/a	n/a	374	11.5	12.0	84 %	88 %	91 %
Nov-19	306	0.8	0.0	1.0	0.0	n/a	n/a	326	12.6	13.0	78 %	85 %	89 %
Dec-19	337	0.5	0.0	0.8	0.0	n/a	n/a	344	12.6	13.0	69 %	76 %	77 %
Jan-20	393	0.5	0.0	0.8	0.0	n/a	n/a	360	12.2	13.0	76 %	81 %	85 %
Feb-20	358	0.5	0.0	0.8	0.0	n/a	n/a	373	12.1	13.0	81 %	84 %	86 %
Mar-20	247	0.6	0.0	0.9	0.0	n/a	n/a	338	12.3	13.0	78 %	82 %	85 %
Apr-20	183	0.5	0.0	0.8	0.0	n/a	n/a	150	13.7	13.0	62 %	68 %	69 %
May-20	200	0.4	0.0	0.5	0.0	6.5	5.0	201	14.3	13.0	65 %	71 %	72 %

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

[2]**Court Orders Signed** is the number of court orders signed in the specified month 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 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.

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

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

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

TABLE 3. Class Member Status Western State Hospital – Inpatient Competency Services (Inpatient Evaluations)[1]

MONTH	*Court Orders Signed*[2]	Days from order signature to[3]:						*Court Orders Completed*[4]	Days from order signed to completion[5]		Percent complete within 7 days from order signature date[5,6]	Percent completed within 7 days from receipt of order[5,6]	Percent completed within 7 days from receipt of order or within 14 days from order signature date[5,6]
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals							
		Average	Median	Average	Median	Average	Median		Average	Median			
May-19	15	3.8	0.0	4.6	0.0	n/a	n/a	5	22.8	14.0	20 %	20 %	20 %
Jun-19	11	3.1	0.0	4.8	0.5	n/a	n/a	12	30.6	30.0	8 %	8 %	8 %
Jul-19	4	5.5	0.0	7.7	0.0	n/a	n/a	10	46.6	49.5	0 %	0 %	0 %
Aug-19	18	4.2	0.0	5.4	0.0	n/a	n/a	11	47.7	54.0	9 %	9 %	9 %
Sep-19	8	1.3	0.0	1.4	0.0	n/a	n/a	13	51.9	40.0	15 %	15 %	15 %
Oct-19	2	0.4	0.0	0.5	0.0	n/a	n/a	10	51.2	54.5	10 %	10 %	10 %
Nov-19	7	0.9	0.0	0.9	0.0	n/a	n/a	7	35.3	46.0	0 %	0 %	0 %
Dec-19	2	0.9	0.5	0.9	0.5	n/a	n/a	6	36.8	30.0	0 %	0 %	0 %
Jan-20	8	0.0	0.0	0.0	0.0	n/a	n/a	3	22.7	26.0	0 %	0 %	0 %
Feb-20	5	0.0	0.0	0.0	0.0	n/a	n/a	6	19.8	21.5	0 %	0 %	0 %
Mar-20	0	0.0	0.0	0.0	0.0	n/a	n/a	6	42.8	48.5	17 %	17 %	17 %
Apr-20	0	N/A	n/a	N/A	n/a	n/a	n/a	0	n/a	n/a	N/A	N/A	N/A
May-20	3	1.7	1.0	1.7	1.0	14.0	14.0	1	0.0	0.0	100 %	100 %	100 %

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

[2]**Court Orders Signed** is the number of court orders signed in the specified month 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.

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

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

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

TABLE 4a. Class Member Status Western State Hospital – Inpatient Competency Services (Restorations)[1]

MONTH	*Court Orders Signed*[2]	Days from order signature to[3]: hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals		*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]
		Average	Median	Average	Median	Average	Median		Average	Median			
May-19	81	3.5	0.0	3.4	0.0	n/a	n/a	85	39.2	35.0	21 %	21 %	21 %
Jun-19	82	3.6	0.0	5.2	0.0	n/a	n/a	107	46.0	49.0	18 %	19 %	20 %
Jul-19	59	4.4	0.0	6.7	0.0	n/a	n/a	65	35.1	29.0	29 %	28 %	29 %
Aug-19	76	4.0	0.0	5.9	0.0	n/a	n/a	68	41.4	45.5	24 %	25 %	26 %
Sep-19	73	4.7	0.0	6.6	0.0	n/a	n/a	80	44.0	42.0	20 %	23 %	23 %
Oct-19	100	4.4	0.0	4.6	0.0	n/a	n/a	100	32.4	29.0	29 %	31 %	31 %
Nov-19	64	4.4	0.0	4.4	0.0	193.0	193.0	68	29.3	24.0	25 %	26 %	28 %
Dec-19	82	3.1	0.0	3.1	0.0	172.5	172.5	81	32.1	36.0	31 %	33 %	35 %
Jan-20	57	2.2	0.0	2.3	0.0	142.0	137.0	68	40.0	38.5	15 %	18 %	18 %
Feb-20	61	2.2	0.0	2.3	0.0	120.1	111.0	56	39.9	41.5	9 %	11 %	11 %
Mar-20	50	1.8	0.0	1.9	0.0	104.0	102.0	59	25.2	21.0	12 %	14 %	15 %
Apr-20	34	2.1	0.0	2.1	0.0	80.5	74.5	28	37.3	25.5	14 %	14 %	14 %
May-20	29	2.0	0.0	1.9	0.0	57.8	47.0	25	64.6	52.0	0 %	0 %	0 %

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

[2]**Court Orders Signed** is the number of court orders signed in the specified month 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.

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

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

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

TABLE 4b. Class Member Status Residential Treatment Facilities – Inpatient Competency Services (Restorations)[1]

MONTH	***Court Orders Signed***[2]	Days from order signature to[3]:						***Court Orders Completed***[4]	Days from order signed to completion[5]		Percent complete within 7 days from order signature date[5,6]	Percent completed within 7 days from receipt of order[5,6]	Percent completed within 7 days from receipt of order or within 14 days from order signature date[5,6]
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals							
		Average	Median	Average	Median	Average	Median		Average	Median			
May-19	38	2.4	0.0	2.2	0.0	n/a	n/a	35	40.1	46.0	17 %	17 %	20 %
Jun-19	31	1.9	0.0	2.0	0.0	n/a	n/a	28	41.1	48.5	18 %	18 %	18 %
Jul-19	34	1.8	0.0	1.8	0.0	n/a	n/a	47	43.7	48.0	15 %	15 %	17 %
Aug-19	46	1.9	0.0	1.9	0.0	n/a	n/a	35	38.3	42.0	29 %	29 %	29 %
Sep-19	22	0.7	0.0	0.8	0.0	n/a	n/a	29	48.5	57.0	14 %	14 %	14 %
Oct-19	43	1.4	0.0	1.4	0.0	n/a	n/a	47	41.1	48.0	17 %	19 %	19 %
Nov-19	54	1.1	0.0	1.2	0.0	n/a	n/a	40	28.0	32.5	30 %	30 %	30 %
Dec-19	37	1.2	0.0	1.3	0.0	n/a	n/a	41	27.1	27.0	22 %	22 %	22 %
Jan-20	47	0.6	0.0	0.6	0.0	n/a	n/a	48	41.2	42.5	4 %	4 %	4 %
Feb-20	16	1.4	0.0	1.3	0.0	n/a	n/a	33	36.7	34.0	6 %	6 %	6 %
Mar-20	24	1.6	0.0	1.7	0.0	n/a	n/a	30	37.7	34.5	3 %	3 %	3 %
Apr-20	18	1.4	0.0	1.6	0.0	n/a	n/a	23	34.7	32.0	9 %	13 %	13 %
May-20	3	0.5	0.0	0.5	0.0	n/a	n/a	20	46.6	35.5	0 %	0 %	0 %

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

[2]**Court Orders Signed** is the number of court orders signed in the specified month 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.

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

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

DSHS Research and Data Analysis

Data Sources: previously submitted monthly reports (data before AUG-2018), BHA FORENSIC DATA SYSTEM (data since AUG-2018)

Date of Report: **6/3/2020**

Table 5. *Class Member Status Eastern State Hospital – Jail-based Competency Evaluations*

TABLE 5. Class Member Status Eastern State Hospital – Jail-based Competency Evaluations[1]

MONTH	*Court Orders Signed*[2]	Days from order signature to[3]:						*Court Orders Completed*[4]	Days from order signed to completion[5]		within 14 days from order signature date[5,6]	within 14 days from receipt of order[5,6]	within 14 days from receipt of order or 21 days from order signature date[5,6]
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals							
		Average	Median	Average	Median	Average	Median		Average	Median			
May-19	84	1.2	0.0	2.3	1.0	n/a	n/a	77	12.8	13.0	81 %	87 %	87 %
Jun-19	95	1.1	0.0	1.9	1.0	n/a	n/a	95	13.2	14.0	68 %	71 %	78 %
Jul-19	80	1.3	0.0	2.0	1.0	n/a	n/a	86	16.3	15.0	43 %	51 %	58 %
Aug-19	83	0.6	0.0	0.9	0.0	n/a	n/a	86	11.0	10.0	70 %	71 %	84 %
Sep-19	85	0.8	0.0	1.3	1.0	n/a	n/a	75	11.7	12.0	73 %	81 %	85 %
Oct-19	95	1.1	0.0	1.9	1.0	n/a	n/a	101	12.1	13.0	67 %	77 %	86 %
Nov-19	76	0.9	0.0	1.9	1.0	n/a	n/a	75	14.4	13.0	63 %	71 %	76 %
Dec-19	68	0.5	0.0	1.4	1.0	n/a	n/a	82	13.6	14.0	52 %	60 %	63 %
Jan-20	82	0.7	0.0	1.4	1.0	n/a	n/a	75	13.1	13.0	63 %	72 %	79 %
Feb-20	67	0.7	0.0	1.7	1.0	n/a	n/a	66	11.4	12.5	68 %	71 %	73 %
Mar-20	59	0.7	0.0	1.3	1.0	87.0	87.0	69	12.8	13.0	74 %	77 %	80 %
Apr-20	21	0.6	0.0	1.0	1.0	87.0	87.0	34	11.3	9.5	85 %	88 %	91 %
May-20	39	0.3	0.0	1.1	1.0	13.3	4.5	31	11.0	8.0	90 %	90 %	90 %

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

[2]**Court Orders Signed** is the number of court orders signed in the specified month 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 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.

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

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

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

TABLE 6. Class Member Status Eastern State Hospital – Inpatient Competency Services (Inpatient Evaluations)[1]

MONTH	*Court Orders Signed*[2]	Days from order signature to[3]:						*Court Orders Completed*[4]	Days from order signed to completion[5]		Percent complete within 7 days from order signature date[5,6]	Percent completed within 7 days from receipt of order[5,6]	Percent completed within 7 days from receipt of order or within 14 days from order signature date[5,6]
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals							
		Average	Median	Average	Median	Average	Median		Average	Median			
May-19	10	3.5	0.0	3.6	1.0	n/a	n/a	17	39.3	44.0	6 %	6 %	6 %
Jun-19	9	4.3	0.0	3.7	1.0	n/a	n/a	8	47.1	50.5	0 %	0 %	0 %
Jul-19	10	4.0	0.0	0.5	0.0	n/a	n/a	11	40.3	41.0	0 %	0 %	9 %
Aug-19	9	0.4	0.0	0.5	0.0	n/a	n/a	15	28.7	21.0	20 %	20 %	20 %
Sep-19	13	0.3	0.0	2.0	0.0	n/a	n/a	9	24.7	16.0	11 %	11 %	22 %
Oct-19	6	0.1	0.0	2.0	0.0	n/a	n/a	11	36.8	41.0	0 %	0 %	9 %
Nov-19	10	0.3	0.0	0.4	0.0	n/a	n/a	8	24.5	20.5	13 %	13 %	13 %
Dec-19	13	0.3	0.0	0.6	0.0	n/a	n/a	11	21.6	21.0	18 %	18 %	36 %
Jan-20	11	0.1	0.0	0.4	0.0	n/a	n/a	9	19.2	23.0	11 %	11 %	11 %
Feb-20	8	0.2	0.0	0.4	0.0	104.2	107.0	8	26.3	22.0	25 %	25 %	38 %
Mar-20	9	0.3	0.0	1.5	0.0	89.8	92.5	5	56.0	56.0	0 %	0 %	0 %
Apr-20	6	0.3	0.0	1.3	0.0	76.9	77.5	3	16.0	5.0	67 %	67 %	67 %
May-20	4	0.1	0.0	1.4	0.0	61.3	67.0	4	53.0	55.5	0 %	0 %	0 %

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

[2]**Court Orders Signed** is the number of court orders signed in the specified month 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.

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

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

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

TABLE 7. Class Member Status Eastern State Hospital – Inpatient Competency Services (Restorations)[1]

MONTH	*Court Orders Signed*[2]	Days from order signature to[3]:						*Court Orders Completed*[4]	Days from order signed to completion[5]		Percent complete within 7 days from order signature date[5,6]	Percent completed within 7 days from receipt of order[5,6]	Percent completed within 7 days from receipt of order or within 14 days from order signature date[5,6]
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals							
		Average	Median	Average	Median	Average	Median		Average	Median			
May-19	21	1.1	1.0	1.1	0.5	n/a	n/a	20	39.3	47.0	10 %	10 %	15 %
Jun-19	26	0.5	0.0	0.9	0.0	n/a	n/a	24	37.3	48.0	21 %	21 %	25 %
Jul-19	28	0.7	0.0	1.2	0.0	n/a	n/a	30	34.1	44.0	23 %	23 %	27 %
Aug-19	21	0.8	0.0	1.4	0.0	n/a	n/a	23	35.7	48.0	30 %	30 %	30 %
Sep-19	22	0.6	0.0	1.1	0.0	n/a	n/a	28	36.0	47.0	32 %	32 %	32 %
Oct-19	28	0.8	0.0	0.8	0.0	n/a	n/a	28	31.3	40.0	32 %	32 %	36 %
Nov-19	19	1.9	0.0	2.1	0.0	n/a	n/a	19	33.3	42.0	21 %	21 %	26 %
Dec-19	34	2.5	1.0	2.9	0.0	n/a	n/a	21	30.4	40.0	29 %	29 %	29 %
Jan-20	23	2.2	0.0	2.6	0.0	n/a	n/a	20	37.8	40.0	0 %	0 %	0 %
Feb-20	24	1.0	0.0	1.1	0.0	n/a	n/a	21	47.0	60.0	19 %	19 %	19 %
Mar-20	27	0.7	0.0	0.7	0.0	69.6	68.0	21	47.1	48.0	5 %	5 %	5 %
Apr-20	29	1.1	0.0	1.1	0.0	54.1	54.5	23	61.0	62.0	9 %	9 %	9 %
May-20	24	1.2	0.0	1.0	0.0	39.7	38.5	19	57.5	52.0	0 %	0 %	0 %

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

[2]**Court Orders Signed** is the number of court orders signed in the specified month 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.

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

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

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

TABLE 8. Class Member Status at WSH and ESH (Totals) – Jail-based Competency Evaluations[1]

MONTH	*Court Orders Signed*[2]	Days from order signature to[3]:						*Court Orders Completed*[4]	Days from order signed to completion[5]		within 14 days from order signature date[5,6]	within 14 days from receipt of order[5,6]	within 14 days from receipt of order or 21 days from order signature date[5,6]
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals							
		Average	Median	Average	Median	Average	Median		Average	Median			
May-19	411	0.7	0.0	1.1	0.0	n/a	n/a	398	12.4	13.0	79 %	84 %	85 %
Jun-19	401	0.8	0.0	1.2	0.0	n/a	n/a	375	13.0	13.0	73 %	79 %	82 %
Jul-19	468	0.7	0.0	1.1	0.0	n/a	n/a	465	13.0	13.0	69 %	74 %	76 %
Aug-19	451	0.7	0.0	1.0	0.0	n/a	n/a	446	11.6	12.0	78 %	83 %	88 %
Sep-19	379	0.6	0.0	1.0	0.0	n/a	n/a	403	12.0	12.0	82 %	86 %	88 %
Oct-19	506	0.8	0.0	1.1	0.0	n/a	n/a	475	11.6	12.0	81 %	86 %	90 %
Nov-19	382	0.8	0.0	1.2	0.0	n/a	n/a	401	13.0	13.0	75 %	82 %	86 %
Dec-19	405	0.5	0.0	0.9	0.0	n/a	n/a	426	12.8	13.0	66 %	73 %	75 %
Jan-20	475	0.5	0.0	0.8	0.0	n/a	n/a	435	12.4	13.0	74 %	80 %	84 %
Feb-20	425	0.6	0.0	1.0	0.0	n/a	n/a	439	12.0	13.0	79 %	82 %	84 %
Mar-20	306	0.6	0.0	1.0	0.0	87.0	87.0	407	12.3	13.0	77 %	81 %	84 %
Apr-20	204	0.6	0.0	0.8	0.0	87.0	87.0	184	13.3	13.0	66 %	72 %	73 %
May-20	239	0.4	0.0	0.6	0.0	7.4	5.0	232	13.8	13.0	69 %	73 %	74 %

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

[2]**Court Orders Signed** is the number of court orders signed in the specified month 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 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.

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

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

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

TABLE 9. Class Member Status at WSH and ESH State Hospital (Totals) – Inpatient Services (Inpatient Evaluations)[1]

MONTH	*Court Orders Signed*[2]	Days from order signature to[3]:						*Court Orders Completed*[4]	Days from order signed to completion[5]		Percent complete within 7 days from order signature date[5,6]	Percent completed within 7 days from receipt of order[5,6]	Percent completed within 7 days from receipt of order or within 14 days from order signature date[5,6]
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals							
		Average	Median	Average	Median	Average	Median		Average	Median			
May-19	25	3.6	0.0	4.1	1.0	n/a	n/a	22	35.5	41.0	9 %	9 %	9 %
Jun-19	20	3.6	0.0	4.4	1.0	n/a	n/a	20	37.2	42.0	5 %	5 %	5 %
Jul-19	14	4.8	0.0	4.4	0.0	n/a	n/a	21	43.3	42.0	0 %	0 %	5 %
Aug-19	27	2.6	0.0	3.6	0.0	n/a	n/a	26	36.8	46.0	15 %	15 %	15 %
Sep-19	21	0.9	0.0	1.6	0.0	n/a	n/a	22	40.8	34.0	14 %	14 %	18 %
Oct-19	8	0.3	0.0	1.2	0.0	n/a	n/a	21	43.7	47.0	5 %	5 %	10 %
Nov-19	17	0.6	0.0	0.7	0.0	n/a	n/a	15	29.5	26.0	7 %	7 %	7 %
Dec-19	15	0.5	0.0	0.7	0.0	n/a	n/a	17	27.0	30.0	12 %	12 %	24 %
Jan-20	19	0.1	0.0	0.2	0.0	n/a	n/a	12	20.1	23.0	8 %	8 %	8 %
Feb-20	13	0.1	0.0	0.2	0.0	104.2	107.0	14	23.5	21.5	14 %	14 %	21 %
Mar-20	9	0.2	0.0	1.2	0.0	89.8	92.5	11	48.8	50.0	9 %	9 %	9 %
Apr-20	6	0.3	0.0	1.3	0.0	76.9	77.5	3	16.0	5.0	67 %	67 %	67 %
May-20	7	0.3	0.0	1.4	0.0	56.6	60.5	5	42.4	44.0	20 %	20 %	20 %

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

[2]**Court Orders Signed** is the number of court orders signed in the specified month 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.

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

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

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

TABLE 10. Class Member Status at WSH and ESH State Hospital, and RTFs (Totals) – Inpatient Services (Restorations)[1]

MONTH	*Court Orders Signed*[2]	Days from order signature to[3]:						*Court Orders Completed*[4]	Days from order signed to completion[5]		Percent complete within 7 days from order signature date[5,6]	Percent completed within 7 days from receipt of order[5,6]	Percent completed within 7 days from receipt of order or within 14 days from order signature date[5,6]
		hospital receipt of order		hospital receipt of discovery		end of reporting month for incomplete referrals							
		Average	Median	Average	Median	Average	Median		Average	Median			
May-19	140	2.8	0.0	2.8	0.0	n/a	n/a	140	39.5	42.0	19 %	19 %	20 %
Jun-19	139	2.7	0.0	3.8	0.0	n/a	n/a	159	43.8	49.0	18 %	19 %	20 %
Jul-19	121	2.9	0.0	4.3	0.0	n/a	n/a	142	37.7	42.0	23 %	23 %	25 %
Aug-19	143	2.8	0.0	4.1	0.0	n/a	n/a	126	39.5	45.0	26 %	27 %	28 %
Sep-19	117	3.0	0.0	4.2	0.0	n/a	n/a	137	43.3	45.0	21 %	23 %	23 %
Oct-19	171	3.0	0.0	3.2	0.0	n/a	n/a	175	34.6	41.0	26 %	28 %	29 %
Nov-19	137	3.0	0.0	3.0	0.0	193.0	193.0	127	29.5	30.0	26 %	27 %	28 %
Dec-19	153	2.4	0.0	2.5	0.0	172.5	172.5	143	30.4	34.0	28 %	29 %	30 %
Jan-20	127	1.7	0.0	1.8	0.0	142.0	137.0	136	40.1	41.0	9 %	10 %	10 %
Feb-20	101	1.7	0.0	1.8	0.0	120.1	111.0	110	40.3	37.0	10 %	11 %	11 %
Mar-20	101	1.5	0.0	1.5	0.0	94.3	84.5	110	32.8	28.0	8 %	9 %	10 %
Apr-20	81	1.6	0.0	1.6	0.0	69.9	61.5	74	43.9	42.5	11 %	12 %	12 %
May-20	56	1.5	0.0	1.4	0.0	50.2	42.5	64	56.9	45.5	0 %	0 %	0 %

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

[2]**Court Orders Signed** is the number of court orders signed in the specified month 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.

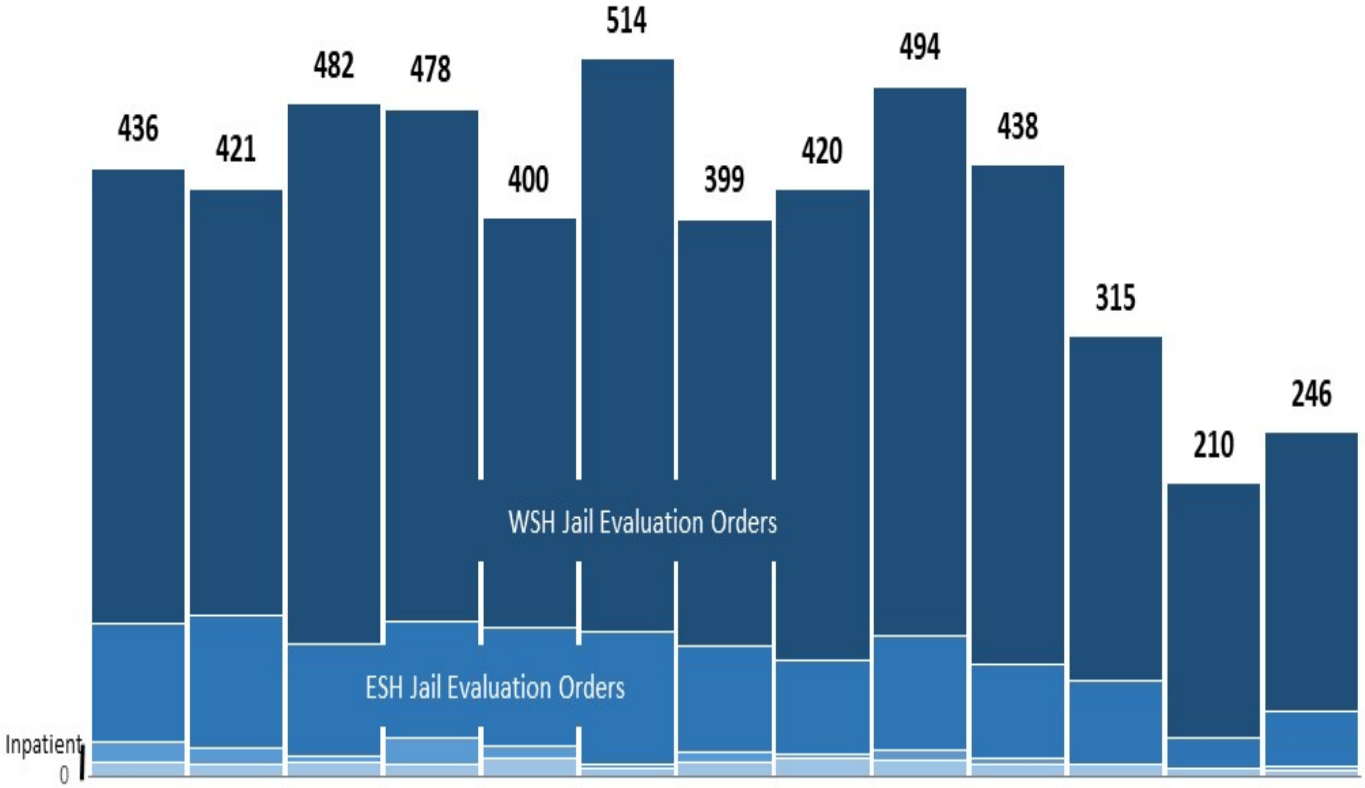
[5]From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: completion and the percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

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

CLASS MEMBER STATUS DATA GRAPHS

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

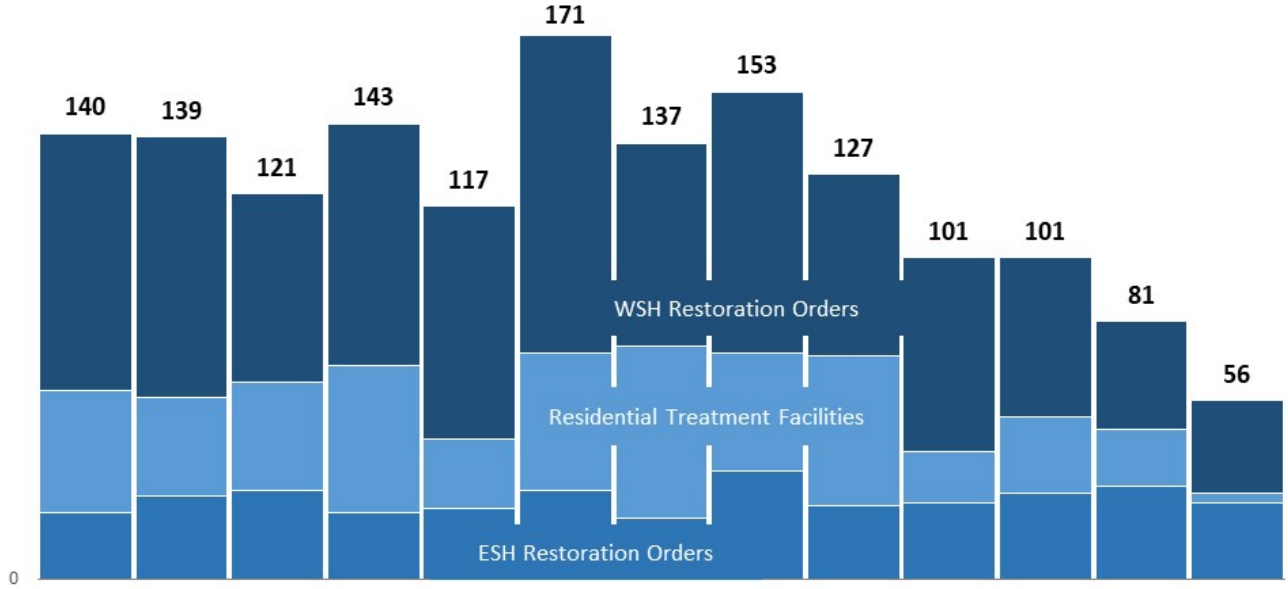
Figure 1. *Signed Evaluation Orders for Trueblood Class Members*



	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20
TOTAL	436	421	482	478	400	514	399	420	494	438	315	210	246
WSH Jail	327	306	388	368	294	411	306	337	393	358	247	183	200
ESH Jail	84	95	80	83	85	95	76	68	82	67	59	21	39
WSH Inpatient	15	11	4	18	8	2	7	2	8	5	0	0	3
ESH Inpatient	10	9	10	9	13	6	10	13	11	8	9	6	4

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

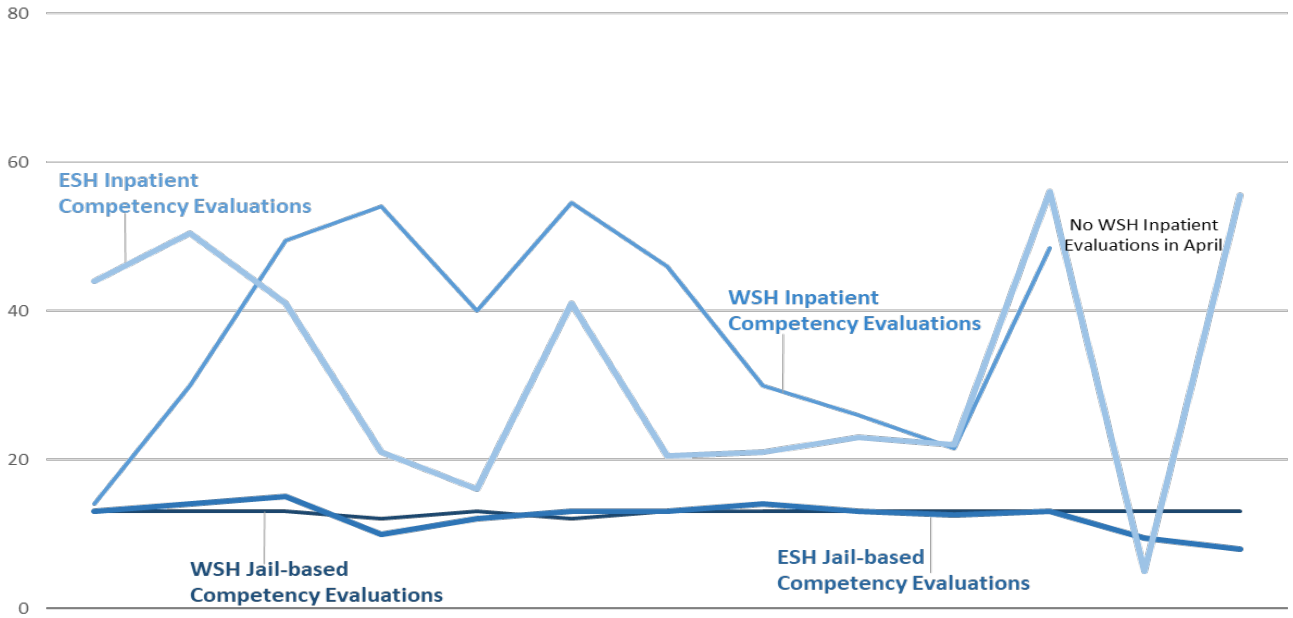
Figure 2. *Signed Restoration Orders for Trueblood Class Members*



	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20
TOTAL	140	139	121	143	117	171	137	153	127	101	101	81	56
WSH Restoration	81	82	59	76	73	100	64	82	57	61	50	34	29
RTF Restoration	38	31	34	46	22	43	54	37	47	16	24	18	3
ESH Restoration	21	26	28	21	22	28	19	34	23	24	27	29	24

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

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

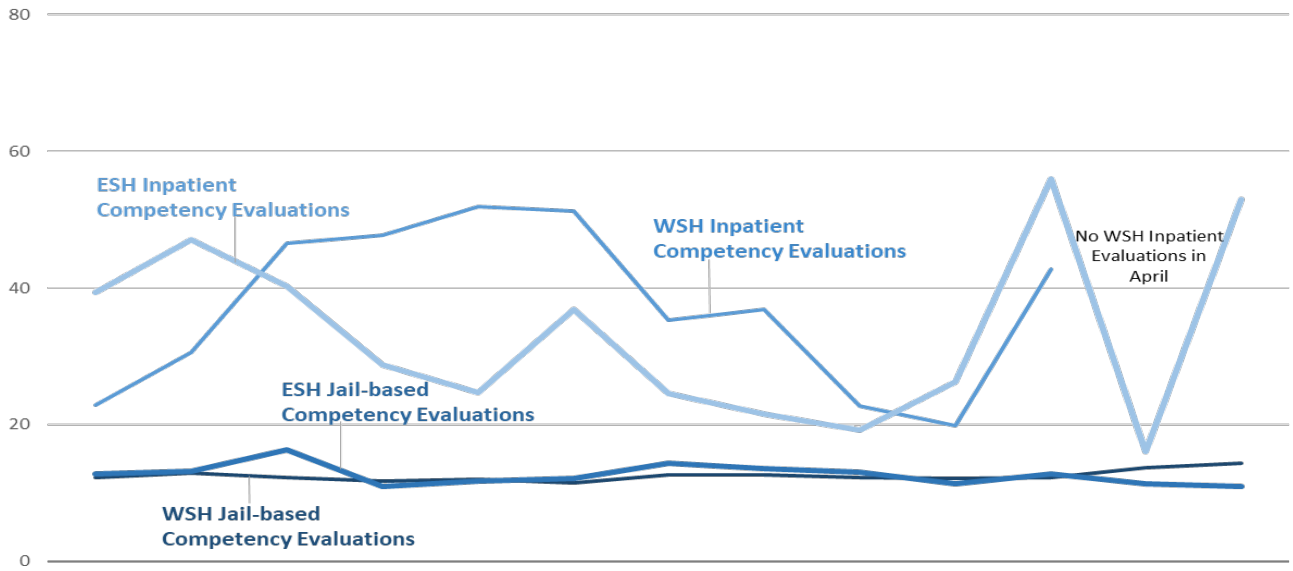


	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20
WSH Jail	13.0	13.0	13.0	12.0	13.0	12.0	13.0	13.0	13.0	13.0	13.0	13.0	13.0
ESH Jail	13.0	14.0	15.0	10.0	12.0	13.0	13.0	14.0	13.0	12.5	13.0	9.5	8.0
WSH Inpatient	14.0	30.0	49.5	54.0	40.0	54.5	46.0	30.0	26.0	21.5	48.5	n/a	0.0 [1]
ESH Inpatient	44.0	50.5	41.0	21.0	16.0	41.0	20.5	21.0	23.0	22.0	56.0	5.0	55.5

[1] Based on one case

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

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

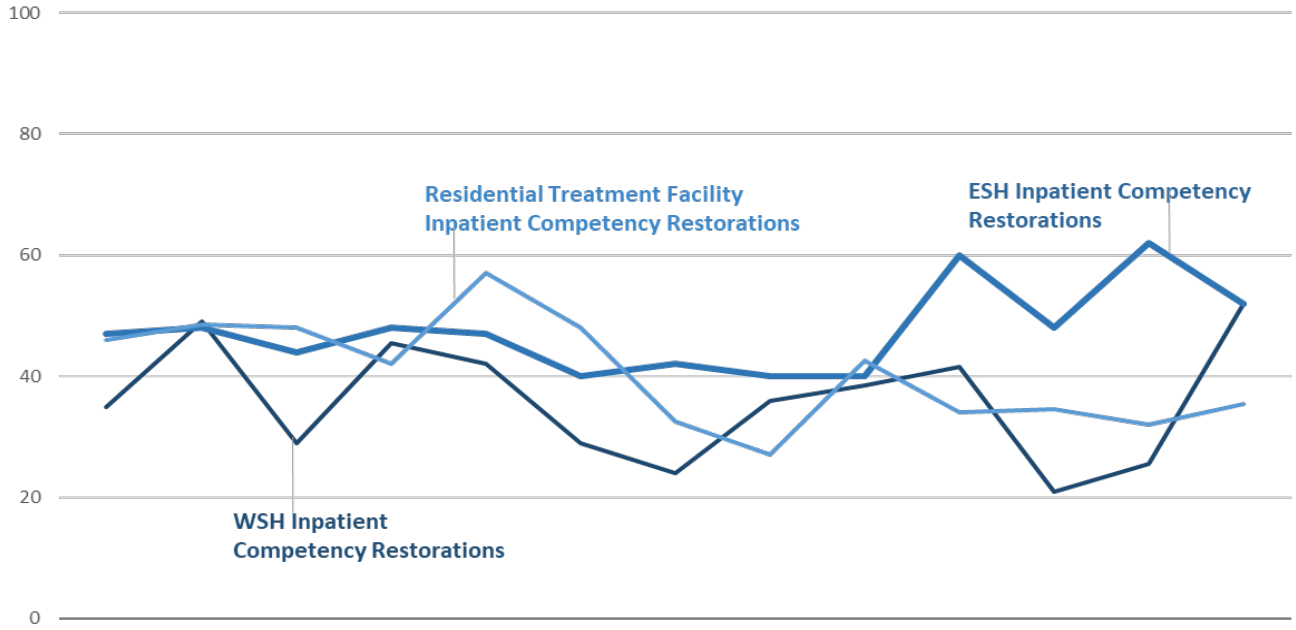


	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20
WSH Jail	12.2	12.9	12.3	11.7	12.0	11.5	12.6	12.6	12.2	12.1	12.3	13.7	14.3
ESH Jail	12.8	13.2	16.3	11.0	11.7	12.1	14.4	13.6	13.1	11.4	12.8	11.3	11.0
WSH Inpatient	22.8	30.6	46.6	47.7	51.9	51.2	35.3	36.8	22.7	19.8	42.8	n/a	0.0 [1]
ESH Inpatient	39.3	47.1	40.3	28.7	24.7	36.8	24.5	21.6	19.2	26.3	56.0	16.0	53.0

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

[1] Based on one case

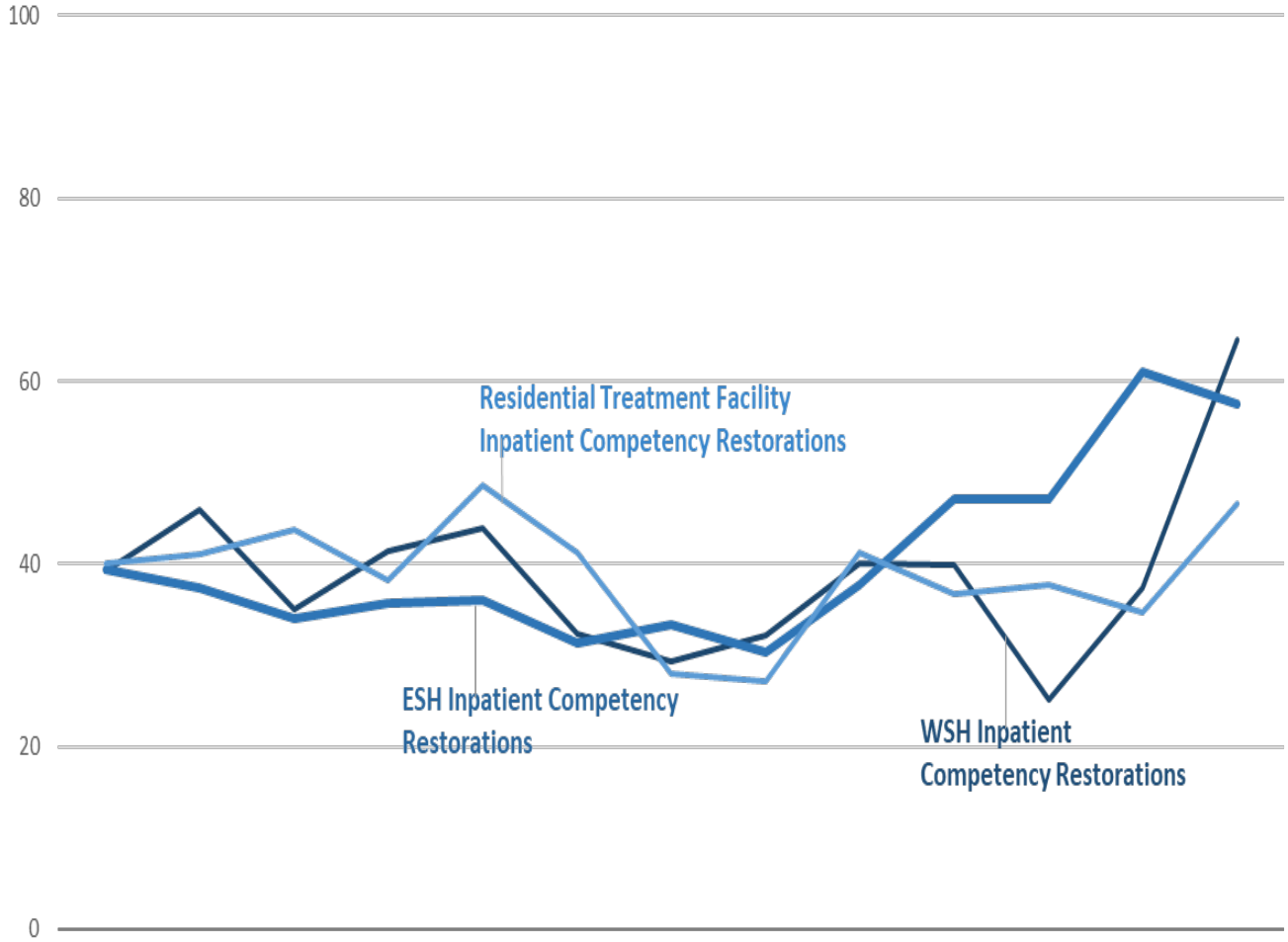
Figure 5. *Median Days from Court Order Signature to Completed Restoration*



	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20
WSH Restoration	35.0	49.0	29.0	45.5	42.0	29.0	24.0	36.0	38.5	41.5	21.0	25.5	52.0
ESH Restoration	47.0	48.0	44.0	48.0	47.0	40.0	42.0	40.0	40.0	60.0	48.0	62.0	52.0
RTF Restoration	46.0	48.5	48.0	42.0	57.0	48.0	32.5	27.0	42.5	34.0	34.5	32.0	35.5

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

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



	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20
WSH Restoration	39.2	46.0	35.1	41.4	44.0	32.4	29.3	32.1	40.0	39.9	25.2	37.3	64.6
ESH Restoration	39.3	37.3	34.1	35.7	36.0	31.3	33.3	30.4	37.8	47.0	47.1	61.0	57.5
RTF Restoration	40.1	41.1	43.7	38.3	48.5	41.1	28.0	27.1	41.2	36.7	37.7	34.7	46.6

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

TABLES 11-13: SUMMARY OF JAIL EVALUATIONS, IN-PATIENT EVALUATIONS, AND RESTORATIONS BY MONTH SINCE FEBRUARY 2016

The data presented in this section, from Tables 11-13 (percent days or less), are based on the month that the Court Order was signed and will therefore be different from the data shown previously in Tables 2-10, which are based on the month the order packet was completed. May numbers are first look, and percentages may change as many cases (those with orders at the end of the month) will close within the seven or fourteen day window. A rolling thirteen months is displayed in Tables 11-13.

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

TABLE 11. TOTAL COMPLETED JAIL EVALUATION ORDERS BY MONTH COURT ORDER SIGNED[1]

MONTH	*Court Orders Signed* [2]	14 DAYS OR LESS FROM ORDER SIGNATURE DATE[3]	PERCENT 14 DAYS OR LESS FROM ORDER SIGNATURE DATE[3]	ORDERS COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER[3,4]	PERCENT COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER[3,4]	ORDERS COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER OR WITHIN 21 DAYS FROM ORDER SIGNATURE DATE[3,4]	PERCENT COMPLETED WITHIN 14 DAYS FROM RECEIPT OF ORDER OR WITHIN 21 DAYS FROM ORDER SIGNATURE DATE[3,4]
May-19	411	303	74 %	325	79 %	330	80 %
Jun-19	401	289	72 %	307	77 %	318	79 %
Jul-19	468	346	74 %	366	78 %	379	81 %
Aug-19	451	352	78 %	380	84 %	401	89 %
Sep-19	379	318	84 %	332	88 %	340	90 %
Oct-19	506	398	79 %	423	84 %	446	88 %
Nov-19	382	251	66 %	285	75 %	295	77 %
Dec-19	405	287	71 %	306	76 %	323	80 %
Jan-20	475	378	80 %	400	84 %	414	87 %
Feb-20	425	323	76 %	343	81 %	355	84 %
Mar-20	306	232	76 %	244	80 %	250	82 %
Apr-20	204	128	63 %	138	68 %	140	69 %
May-20	239	131	55 %	136	57 %	137	57 %

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

[2]**Court Orders Signed** is the number of court orders signed in the specified month 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]From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: orders completed and percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

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

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

TABLE 12. TOTAL COMPLETED INPATIENT EVALUATION ORDERS BY MONTH COURT ORDER SIGNED[1,2]

MONTH	***Court Orders Signed*** [1]	7 DAYS OR LESS FROM ORDER SIGNATURE DATE	PERCENT 7 DAYS OR LESS FROM ORDER SIGNATURE DATE	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER[1,2]	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER[1,2]	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE[1,2]	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE[1,2]
May-19	25	2	8 %	2	8 %	2	8 %
Jun-19	20	1	5 %	1	5 %	1	5 %
Jul-19	14	0	0 %	0	0 %	1	7 %
Aug-19	27	4	15 %	4	15 %	4	15 %
Sep-19	21	3	14 %	3	14 %	4	19 %
Oct-19	8	1	13 %	1	13 %	2	25 %
Nov-19	17	1	6 %	1	6 %	2	12 %
Dec-19	15	2	13 %	2	13 %	3	20 %
Jan-20	19	3	16 %	3	16 %	3	16 %
Feb-20	13	1	8 %	1	8 %	2	15 %
Mar-20	9	1	11 %	1	11 %	1	11 %
Apr-20	6	1	17 %	1	17 %	1	17 %
May-20	7	1	14 %	1	14 %	1	14 %

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

[2]**Court Orders Signed** is the number of court orders signed in the specified month 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]From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: orders completed and percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

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

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

TABLE 13. TOTAL COMPLETED RESTORATION ORDERS BY MONTH COURT ORDER SIGNED[1,2]

MONTH	***Court Orders Signed*** [1]	7 DAYS OR LESS FROM ORDER SIGNATURE DATE	PERCENT 7 DAYS OR LESS FROM ORDER SIGNATURE DATE	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER[1,2]	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER[1,2]	ORDERS COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE[1,2]	PERCENT COMPLETED WITHIN 7 DAYS FROM RECEIPT OF ORDER OR WITHIN 14 DAYS FROM ORDER SIGNATURE DATE[1,2]
May-19	140	26	19 %	27	19 %	30	21 %
Jun-19	139	30	22 %	30	22 %	31	22 %
Jul-19	121	31	26 %	30	25 %	33	27 %
Aug-19	143	34	24 %	37	26 %	38	27 %
Sep-19	117	29	25 %	30	26 %	30	26 %
Oct-19	171	45	26 %	47	27 %	48	28 %
Nov-19	137	32	23 %	34	25 %	36	26 %
Dec-19	153	41	27 %	43	28 %	44	29 %
Jan-20	127	12	9 %	13	10 %	13	10 %
Feb-20	101	11	11 %	12	12 %	12	12 %
Mar-20	101	8	8 %	9	9 %	10	10 %
Apr-20	81	8	10 %	9	11 %	9	11 %
May-20	56	0	0 %	0	0 %	0	0 %

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

[2]**Court Orders Signed** is the number of court orders signed in the specified month 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]From AUG-2018 onward, the following data elements exclude periods of waiting for competency services in jail that have not yet ended: orders completed and percent completed variables. Once the waiting period has ended, those cases will be included in the wait-time and percents.

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

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 the 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 (FY) 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 funded an additional 30-bed forensic ward in Fiscal Year 2019, contingent on the closure of one 30-bed civil ward and its subsequent conversion to a forensic unit. The Aging and Long Term Services Administration (ALTSA), the Developmental Disabilities Administration (DDA), and WSH collaborated on targeted efforts to successfully discharge patients into the community to reduce the population of one civil ward by 30 patients. The ward re-opened as a forensic ward in May 2018.

The Legislature also funded a 24-bed expansion at the Yakima RTF. 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 the Yakima expansion to Building 27 at WSH. On November 21, 2017, at a status hearing in the Federal District Court, the Department and the Governor's office reiterated plans 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 supplemental operating budget, the additional funds that were earmarked for the 24-bed capital expansion at the Yakima RTF were removed.

The FY 2018 supplemental capital budget included $3 million for renovation of ESH's 1N3 for 25 forensic beds and $3.5 million for renovation of 3N3 to provide another 25 forensic beds at ESH. It also included $10.5 million in the 2017-19 biennium and proposed $9.6 million in the 2019-21 biennium for predesign, design, and renovation of WSH Building 29 to support 60 additional forensic beds.

2019-2021 BIENNIAL BUDGET SUMMARY FOR TRUEBLOOD AGREED SETTLEMENT

With legislative approval and the support of the Governor, DSHS, the Washington State Health Care Authority (HCA) and the Washington State Criminal Justice Training Commission (CJTC) received the funding listed below 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 5 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. An RFP is in progress to potentially award contracts in the three Phase 1 settlement regions to operate Outpatient Competency Restoration Programs (OCRP). Contracts awarded, as a result of this RFP, should enable OCRP programs to begin operations by July 1, 2020.

Crisis Services. Expanded crisis triage/crisis stabilization and mobile crisis services to divert individuals from potentially becoming class members was included 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 services 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 funded during the 2021-23 biennium for Phase 2 of the settlement. For the current, biennia, recruitment is in progress for the first Forensic Navigators. Three advance hires are working on program development prior to the July 1, 2020 launch of the navigator program. Recruitment for the remaining six navigator positions begins soon.

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 ESH. In the 2017-19 budget, the Legislature allotted funding for the conversion of 60 civil beds to 42 forensic beds on two wards at WSH per the agreement. The final configuration of the two wards will result in 40 new beds instead of 42, in order to accommodate a seclusion room on each ward.

The 2018 supplemental operating budget included funding for DSHS to begin operating 30 beds in building 27 on the grounds of WSH as a RTF in FY 2019. Funding was provided to increase resources available to operate this unit at a level similar to the forensic RTF being operated at Maple Lane. Building 27 opened to patients in late August 2019 as the Fort Steilacoom Competency Restoration Program (FSCRP).

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 Washington Association of Sheriffs & Police Chiefs 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 and 1.0 FTE is allocated to HCA to develop an enhanced continuing education curriculum for certified peer counselors on the criminal justice system. Funds and activities will focus on curriculum development, materials to train, and training costs.

NEED PROJECTIONS AND BED CAPACITY

In June 2017, Judge Pechman directed Court Monitor, 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 competency evaluation and competency restoration beds was also measured. The TriWest Group was selected as the contractor to complete this work.

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 – MAY 2020

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

RECRUITING

The recruiting numbers presented below are from May.

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

- LPN's – 2 presented
- RN's – 64 presented
- Psychologist – 1 presented

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

- RN's – 116 presented
- LPN's – 18 presented
- Institution Counselor – 142 presented
- Psychiatric ARNP – 4 presented
- Psychiatric Security Attendant – 107 presented
- Psychiatric Security Nurse – 54 presented
- Mental Health Technician – 193 presented
- Psychologist – 6 presented

Applicants presented to FSCRP for consideration are indicated below:

- Psychologist (Forensic Evaluator Supervisor) – 1 presented
- Institutional Counselor – 25 presented

RESIDENTIAL TREATMENT FACILITIES (RTF's) DATA

This section, presents monthly data for the current month and the trailing year, with a year-over-year average comparison. FSCRP, shown in Table 16, opened in late-August 2019, so the current table presents data from its entire operational history.

Table 14. *Monthly RTF Data for Yakima*

Data Elements	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	2019 Avg	Jan-20	Feb-20	Mar-20	Apr-20	May-20	2020 Avg
Census (last day of month)	22	22	24	23	24	24	24	21	22.83	21	23	23	20	19	21.20
Total patients admitted	14	5	20	7	9	14	8	6	11.00	12	10	10	6	5	8.60
Completed and found competent (1st Restoration)	11	1	9	6	7	5	3	5	6.50	5	5	6	8	4	5.60
Not likely restorable (transported back to jail)	0	1	2	0	0	4	0	0	0.75	2	2	0	0	0	0.80
Court Order lapsed (Transported back to Jail) *	2	0	2	1	2	2	3	2	1.58	2	0	2	0	0	0.80
Felony patients completed and found not likely restorable (1st Restoratio	0	0	0	0	0	0	0	0	0.00	0	0	0	0	0	0.00
Misdemeanor patients not restored (no further treatment by law)	0	0	0	0	0	0	0	0	0.00	0	0	0	0	0	0.00
Total transferred to State Hospital	2	0	3	1	0	3	2	1	1.75	4	1	3	1	2	2.20
For physical aggression	0	0	1	1	0	0	1	1	0.50	1	1	0	0	0	0.40
For sexually inappropriate behavior	0	0	0	0	0	0	0	0	0.00	0	0	0	0	0	0.00
For medical reasons	2	0	2	0	0	2	0	0	1.08	1	0	2	0	0	0.60
Due to court ordered treatment at SH	0	0	0	0	0	1	0	0	0.08	0	0	0	1	2	0.60
Other	0	0	0	0	0	0	1	0	0.08	2	0	1	0	0	0.60
Total patients eloped	0	0	0	0	0	0	0	0	0.00	0	0	0	0	0	0.00
Total recommended for early evaluation	0	0	0	0	5	1	1	0	1.50	1	3	5	3	2	2.80
Total recommended for 2nd 90-day order	1	3	1	3	6	3	5	5	3.00	1	3	3	5	4	3.20
Total recommended for 3rd 90-day order	0	0	0	0	0	0	2	0	0.17	1	0	0	0	0	0.20

* March 2020: Client was returned to jail for a Sell hearing. No Sell hearing was held, and instead, the client's charges were dismissed without prejudice.

Table 15. *Monthly RTF Data for Maple Lane*

Data Elements	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	2019 Avg	Jan-20	Feb-20	Mar-20	Apr-20	May-20	2020 Avg
Census (last day of month)	30	29	30	29	29	27	25	25	27.83	28	28	22	22	19	23.80
Total patients admitted	16	16	16	15	12	12	11	10	13.08	17	11	12	7	9	11.20
Completed and found competent (1st Restoration)	3	8	3	6	6	4	9	4	5.08	8	6	8	4	7	6.60
Not likely restorable (transported back to jail)	3	2	3	0	0	2	1	1	1.33	0	3	2	0	1	1.20
Court Order lapsed (Transported back to Jail)	0	0	0	0	0	0	0	0	0.00	0	0	0	0	0	0.00
Felony patients completed and found not likely restorable (1st Restoration)	1	0	0	0	0	0	1	0	0.25	0	1	0	0	0	0.20
Misdemeanor patients not restored (no further treatment by law)	3	2	4	3	0	0	0	1	1.67	0	0	1	1	0	0.40
Total transferred to State Hospital	1	1	1	4	3	1	2	1	1.50	2	0	0	0	1	0.60
For physical aggression	0	1	1	3	2	0	2	0	1.00	1	0	0	0	0	0.20
For sexually inappropriate behavior	0	0	0	0	0	0	0	0	0.00	0	0	0	0	0	0.00
For medical reasons	0	0	0	1	0	0	0	1	0.25	1	0	0	0	0	0.20
Due to court ordered treatment at SH	0	0	0	0	1	0	0	0	0.08	0	0	0	0	0	0.00
Other	1	0	0	0	0	1	0	0	0.17	0	0	0	0	1	0.20
Total patients eloped	0	0	0	0	0	0	0	0	0.00	0	0	0	0	0	0.00
Total recommended for early evaluation	4	0	5	1	4	3	4	3	3.17	2	4	4	2	0	2.40
Total recommended for 2nd 90-day order	6	2	6	4	2	5	2	6	4.08	1	6	1	3	1	2.40
Total recommended for 3rd 90-day order	0	2	0	0	1	0	0	1	0.67	0	0	0	0	0	0.00

Table 16. *Monthly RTF Data for Fort Steilacoom*

Data Elements *	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	2019 Avg	Jan-20	Feb-20	Mar-20	Apr-20	May-20	2020 Avg
Census (last day of month)	2	4	12	18	23	11.80	25	21	15	19	21	20.20
Total patients admitted	2	3	9	10	15	7.80	14	8	4	7	5	7.60
Completed and found competent (1st Restoration)	0	0	0	2	7	1.80	8	5	2	4	2	4.20
Not likely restorable (transported back to jail)	0	0	0	1	0	0.20	0	2	1	0	0	0.60
Court Order lapsed (Transported back to Jail)	0	0	0	2	6	1.60	0	0	0	0	0	0.00
Felony patients completed and found not likely restorable (1st Restoration)	0	0	1	0	0	0.20	3	2	1	0	0	1.20
Misdemeanor patients not restored (no further treatment by law)	0	0	0	0	1	0.20	0	0	0	0	0	0.00
Total transferred to State Hospital	1	0	1	0	1	0.60	0	4	5	0	1	2.00
For physical aggression	0	0	0	0	1	0.20	0	3	2	0	1	1.20
For sexually inappropriate behavior	0	0	0	0	0	0.00	0	0	0	0	0	0.00
For medical reasons	1	0	0	0	0	0.20	0	0	1	0	0	0.20
Due to court ordered treatment at SH	0	0	0	0	0	0.00	0	0	0	0	0	0.00
Other	0	0	1	0	0	0.20	0	0	2	0	0	0.40
Total patients eloped	0	0	0	0	0	0.00	0	0	0	0	0	0.00
Total recommended for early evaluation	0	0	0	0	0	0.00	0	0	0	0	0	0.00
Total recommended for 2nd 90-day order	0	0	2	3	0	1.00	2	3	1	2	2	2.00
Total recommended for 3rd 90-day order	0	0	0	0	0	0.00	0	0	0	0	1	0.20

* FSCRP began admitting patients on August 28, 2019

TRUEBLOOD IMPLEMENTATION STEPS TAKEN AND PLANNED – MAY 2020

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

Table 17. *Trueblood Implementation Steps*

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Court Appointed Monitor Coordination				
Monthly Reports	Release May report	Complete	• Maintain compliance with the Court. • Use data to review and improve the provision of forensic services.	Release of May report to stakeholders completed.
Legislative Coordination				
Implement Engrossed Substitute Senate Bill 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.	Complete	• Section 5(2) required OFM to contract with an external consultant to examine the current configuration and financing of the state hospital system and make recommendations on a number of different areas, including identification of the potential costs, benefits, and impacts associated with dividing one or both of the state hospitals into discrete hospitals to serve civil and forensic patients in separate facilities. The consultant's report was due to the Governor and Legislature by Oct. 1, 2016.	The Select Committee for Quality Improvement in State Hospitals met on October 30, 2017 and on December 15, 2017. During the December 15, 2017 meeting, the Department presented material on the three prosecutorial diversion programs funded in FY '18. Additionally, the Court Monitor provided an overview and update on the eight programs that received *Trueblood* fine money for diversion services. In 2018, during the months of January, February, March, May, June, August, September, November, and December, no hearings were scheduled. Meetings were held on the following dates: April 18, July 24, and October 18, 2018. In 2019, the first meeting of the year was held on January 7, 2019 with an agenda (and other meeting materials) found here:

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
			• Section 5(3) required DSHS to contract for the services of an academic or independent state hospital psychiatric clinical care model consultant to examine the clinical role of staffing at the state hospitals. The consultant's report was due to the Governor and Legislature by Oct. 1, 2016. • Section 6 created the Governor's Behavioral Health Innovation Fund in the state treasury. Only the director of financial management or designee may authorize expenditures from that Fund, which are provided solely to improve quality of care, patient outcomes, patient and staff safety, and the efficiency of operations at the state hospitals.	https://www.governor.wa.gov/issues/issues/health-care-human-services/select-committee-quality-improvement-state-hospitals The committee sunset on July 1, 2019. The Behavioral Health Recovery System Transformation (BHRST) committee was convened after July 1, 2019, likely conducting similar work as the Select Committee. No meetings were scheduled in the months of July or August. The committee first met on September 26, 2019. A second meeting was held on November 12, 2019. The agendas and other meeting materials can be found here: https://app.leg.wa.gov/committeeschedules#//29870/07-01-2019/12-08-2019/Schedule///Bill/ No meeting was scheduled in December 2019 or January 2020 with the Legislative session beginning on January 13, 2020. Additionally, no meetings were scheduled in February, March, April, and May.

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Consult with DOH about draft legislation requiring DOH certification of forensic evaluators to determine the need for a sunrise review	Consult DOH	Ongoing	• Expanded pool of forensic evaluators would help improve timeliness. Licensure would provide quality assurance and create professional standards for forensic evaluators. • Develop long-term certification of forensic evaluators, consistent with the *Trueblood* Court Monitor's recommendations on mid- and long-term performance to implement a forensic certification program to sustain performance.	The OFMHS workforce development team has completed the new Forensic Mental Health Training and Certification training curriculum, and preliminary training of Enhanced Peer Specialists was delivered in April. The two-day workshop will be made available to other OFMHS employees (including new Forensic Evaluators), Forensic Navigators, Competency Restoration staff, and external learners, including jail staff, forensic peer-support specialists, and outpatient care providers, etc. OFMHS collaborated with HCA on this program and the program will be required for new peer-support specialists. The COVID-19 pandemic has altered the plans and method for delivery. Subsequent delivery of this training, to other identified groups, is being planned and is subject to conditions imposed by the COVID-19 situation. Options for credentialing or certification of Forensic Evaluators and other positions in the forensic behavioral health workforce are under review in light of the recently received gaps-analysis report completed by Groundswell, Inc.

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	• Discuss policy, budget and operational changes likely required to comply with the *Trueblood* requirements. • Obtain staff necessary to safely support operation of additional forensic and civil beds at the state hospitals. • Obtain necessary psychiatrists and physicians to supplement services proved by employees at Western State Hospital to safely support the operation of additional forensic and civil beds.	No labor meetings were scheduled in May. A UMCC for forensic evaluators is scheduled for mid-June.
Data Collection and Fiscal Modeling				
Monthly report data collection	Identify and obtain needed data	Complete	Obtain data for monthly reports and develop standardized reports to inform policy development and implementation.	Data collection is ongoing. The FDS technical team continues to meet bi-monthly with program (OFMHS) and data (RDA). Reporting needs are identified, ran through Change Control, and implemented as needed. This process is operationalized.
Institute data audit process	Review data and files of cases with anomalies and identify trends	Complete	Ensure completeness and accuracy of wait list data.	Data validation process is ongoing. IT project team, and Research and Data Analysis (RDA) analysts, researched data anomalies to determine the cause, impact, and remediation required.

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Forensic Data System Design/ Development	Analyze Legacy Applications Data Quality for Potential Data Migration	Complete	• Integrated Forensic System with consistent data entry and tracking of all class members from creation of court order for mental competency evaluation through completion of evaluation and/or restoration (whichever is later). • Provided capability for access by evaluators to client status changes, regardless of location, to reduce delays. • Provided a single platform for quality reporting, eliminating the variability currently inherent in leveraging legacy applications not meant for this purpose.	The Project team continues to support the Forensic Data System (FDS), its users, and RDA to streamline the reporting process out of the new system.
FDS Post-implementation Processes	Data Migration Clean-up	In Process	Some Migrated Data contained historical elements that needed to be cleaned up in the new system.	Governance has deferred the load of the data sets from legacy systems. RDA is working on a dataset that might provide a better lookup for evaluators. That dataset will be reviewed when ready.
	Usability	Complete	• The system contains modules that align with roles of forensic activities and allows for controlled access by those same user roles. This controlled access prevents users from easily seeing	The IT project team has modified search screens to show a more complete snapshot of the court order which has eliminated the barriers resulting from role based access. Roles are still limited in what data may be edited.

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
			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).	System now directs users to all court orders for a client, including the client's aliases. The Due In/Due Out Report has been modified to contain the essential fields for the hospital admission coordinators. Additional requirements will be gathered to best meet the needs of admission coordinators.
	System Data Issues	Complete	• 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.	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. New Client Identification Number confirmer has been trained, and we are requesting access to additional secondary systems for identifying clients. New structure for capturing client status has been released to users on April 17, 2019.
	RDA Reporting Issues	Complete	Ensure RDA is accounting for all / correct elements when building reports.	RDA has expertise in the legacy database schemas and the court requirements. The IT project team has expertise in the new FDS schema and will continue to transfer that expertise to RDA.
Human Resources				
Hire Office of Forensic Services HQ positions	Hire and Onboard	Complete	Provide infrastructure for forensic services system and improve effective and timely provision of competency services.	All 13 positions that were funded for fiscal year 2020 have been hired (the last three staff members start on June 1, 2020). Work has started on hiring staff for the fiscal year 2021 contempt settlement agreement requirements while addressing any pre-existing vacancies. For the month of May, the office is still

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				working through the process (e.g., reference checks) to make an offer to a candidate for the Seattle evaluator supervisor position. The supervisor position for the east side continues to be recruited for with an interview scheduled in early June with an interested candidate. One evaluator interview was conducted in May, but the candidate took a position at a different facility.
Hire additional hospital ward staff	Conduct targeted hiring events Pursue contracting	In progress	Obtain required staff of all classes to safely and appropriately operate additional civil and forensic beds and to meet data collection, analysis and reporting needs.	Talent Acquisition recruiting efforts continue. **See page 31 for additional details on recruiting.**
Competency Evaluation				
Build capacity for out-station sites	Site agreements Outstation sites operational	N/A Complete	Increased capacity at out-station sites will reduce wait time for evaluation.	All evaluations at outstation sites have been conducted by telehealth to reduce COVID-19 exposure risk for all parties. The system used for the tele-evals is able to accommodate attorney requirements to be present.
Coordinate with forensic mental health system partners	Regular meetings with County Stakeholders	Ongoing	Stakeholder meetings will focus on topics where collaborative work is required to meet the requirements of the *Trueblood* Decision.	Quarterly stakeholder meetings continue to occur with Pierce County. The most recent meeting was on May 20, 2020. The next meeting is set for June 17, 2020. OFMHS is now partnering with King County's Department of Behavioral Health and Recovery to convene a group to address issues related to the *Trueblood* class members. This group has now met monthly since May 2019, with the most recent meeting occurring on May 18, 2020. The next meeting is set for June 15, 2020. Participants

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				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 Q1 2020, 79.4-percent of forensic evaluators had competency evaluation reports audited by supervisors. Please note that one region had an open supervisor position during Q1 2020; precluding this region, the percentage increased to 100-percent. A total of 59 competency evaluation reports were reviewed in Q1 2020. Q2 2020 data will be available in July 2020.
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 a serious mental health condition; who clearly do not require inpatient evaluation services; or who are clearly competent due to changes in their condition since the issuance of an order for evaluation (i.e., no longer drug affected).	As of May 31, 2020, OFMHS has received 430 triage referrals from jail staff/defense. Of those referrals, 260 were approved. 113 of the referrals were denied, and 57 of these referrals were withdrawn before placement could be made. 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 January 2020, seven calls were made to jails. Since tracking began, more than 2,260 calls have been made. *Issues concerning the recent monthly numbers have emerged. A new staff person and backup assumed this role on June 1.* They have been trained on making the

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				calls, completing the documentation, and are beginning to build updated processes and guidelines as they make the calls to jails now independently. *Full updates, including this June activity, will be forthcoming in the July monthly report.*
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 VC program is now in operational mode and continues at three of the existing sites (three county jails). OFMHS provided two training seminars on the topic in 2019. With Dr. Vess' transfer from the evaluator supervisor position at NRO to workforce development administrator at OFMHS HQ, Jennifer Popchockhakim is now point person on VC expansion and its feasibility. OFMHS continues to educate courts and jails on this technology to generate greater interest in and utilization of this technology. With the COVID-19 pandemic, and high levels of infection in many Washington state counties, video technology is seeing more interest from jails and other entities seeking to continue evaluations while minimizing physical contact/proximity of clients and staff. OFMHS has reached out to 20 westside and 16 eastside jails to expand the use of the VC system. The westside jails include city and county jails in Skagit, Issaquah, King (KCCF and MRJC), SCORE in Des Moines, Klickitat, Skamania, Kitsap, Kent, Pierce, Thurston, Mason, Lewis, Aberdeen, Grays Harbor, Whatcom, Clallam, Pacific, and Clark. Working systems have been established at SCORE,

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				Kent jail, Thurston County, Klickitat County, and the Issaquah and Aberdeen jails. These add to existing connections established earlier in Snohomish, and Island Counties. OFMHS continues to work towards initiating the system with the other facilities. The jails on the eastside include county jails in, Spokane, Stevens, Ferry, Okanogan, Pend Oreille, Chelan, Kittitas, Grant, Benton, Douglas, Walla Walla, Franklin, Adams, Whitman, Lincoln, and the Airway Heights Correctional Center. Working systems have been established in the Ferry, Benton, Franklin, Grant, Okanogan, Whitman, and Stevens County jails. Yakima County jail remains operational as an original pilot site. OFMHS continues to work with several jails and to provide ongoing support to the operational systems. Technical support for VC has also been occurring for established systems at Western state Hospital, Maple Lane, Yakima, and SCORE. Since August 2018, more than 210 video conferences have been authorized by court order. Approximately 8% of attempts were rejected by the client's attorney and approximately 1% of attempts were rejected by the client. Video conferences are typically used 6-9 times per month. This data is current through May 2020.

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Competency Restoration				
SH addition 45 beds	Bed occupancy with forensic patients	Partially Complete	Serves overall plan to add beds and expand State Hospital forensic bed capacity to meet Court ordered requirements.	Previously, the Legislature funded conversion of a civil ward to a 30-patient forensic ward. South Hall 10 re-opened in May 2018 and is serving NGRI patients who are ready to begin transitioning to the community. The Legislature funded this request to operate 45 additional beds in building 27 (Ft. Steilacoom Competency Restoration Center – FSCRP) and the South Hall 5 (S5) ward. The initial FY 2018 request can be found here: https://www.dshs.wa.gov/data/budget/2018/030-PL-CV-Forensic-Ward-Staffing.pdf Forensic 3 (F3) opened in June 2018 as another forensic admissions ward. F3 adds capacity for a less acute admission/restoration program. S5 expanded from 15 beds to 30. S5 reached full patient capacity in fall 2018. FSCRP opened late-August 2019 and is endeavoring to reach the 30-patient census when feasible. As of the week of June 9, 2020, the census goal was 20. FSCRP has a new *locums* psychiatrist, and they will continue to slowly raise their census until they reach a census of 25. Due to COVID-19, the census will be capped at 25 to allow social distancing in groups and at meals.

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
WSH addition 40 beds	Bed occupancy with forensic patients	In Progress	Serves overall plan to add beds and expand State Hospital forensic bed capacity to meet Court ordered requirements.	In the 2017-19 budget, the Legislature allotted funding for the conversion of 60 beds from civil to 42 forensic beds on two wards at Western State Hospital per the settlement. WSH is beginning the conversion of current staff positions to fill positions on the new CFS E3/E4 Wards (*Trueblood*). Schedules are currently being reviewed for final installation of furniture, equipment and supplies. The final configuration of the two wards will result in 40 new beds instead of 42, in order to accommodate a seclusion room on each ward. Major unexpected construction challenges are being overcome, although there are timeline impacts that are delaying the remaining work to be completed until September or October. Additional delays are occurring in construction because of limitations being experienced by the contractor, a disruption in supply chain deliveries including materials, and availability of workforce. The contractor is operating at 50-percent of the pre-COVID-19 workforce, and the plumbing sub-contractor is also significantly affected by staffing delays. While construction is proceeding, the full impact of these disruptions will not be known until the future becomes more certain, and state of emergency related restrictions are lifted or eased. It should be noted the state of emergencies declarations have been careful to keep both the WSH and ESH included in the essential

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				construction categories, but that has not fully mitigated these disruptions.
ESH addition of 50 beds	Bed Occupancy with Forensic Patients	In Progress	Serves overall plan to add beds and expand State Hospital forensic bed capacity to meet Court ordered requirements.	The legislature funded, in the 2019-2021 biennial budget (for purposes of the *Trueblood* Agreed Settlement), additional forensic bed capacity. Over $24 million was allocated to DSHS for the addition of forensic bed capacity at ESH. These funds support two new 25-bed competency restoration units at ESH. Ward 1N3 is open as of June 1. As of June 12, the current census is seven patients. Ward 3N3 is nearing completion of construction at the end of May and should be ready to accept patients in July. 76-percent of staff positions are filled for the new wards, and recruitment efforts have slowed due to the pandemic. ESH has adopted several strategies to mitigate the virus' impact; however, fully staffing these positions remains an ongoing challenge.

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				The ongoing COVID-19 emergency has been expected to impact construction activities, and recent impacts to the schedule are indicated as follows: Although ESH beds had been fully on track for completion within the timeframe, the contractor has recently invoked the *force majeure* clause (citing the "pandemic" term) to suspend work. The full impact of this disruption will not be known until the future becomes more certain, and state of emergency related restrictions are lifted or eased. It should be noted the state of emergencies declarations have been careful to keep both the WSH and ESH included in the essential construction categories, but that has not fully mitigated these disruptions.
Provide Restoration Treatment at the Maple Lane Competency Restoration Program (MLCRP)	Restore Patients to Competency	Ongoing	• To meet or exceed the restoration rates at both state hospitals. • Hard closure date set for June 30, 2024 unless the trigger event occurs.	**Also, see data *Table 14* on page 32.** As of the quarterly average length of commitment (LOC) report completed April 15, 2020, the days to competency are mixed across sites. On the current report, patients at the Maple Lane Competency Restoration Program have a longer LOC for second 90-day restorations.

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Provide Restoration Treatment at the YCRP	Restore Patients to Competency	Ongoing	• To meet or exceed the restoration rates at both state hospitals • Hard closure date set for December 31, 2021 unless the trigger event occurs.	**Also, see data *Table 15* on page 33.** As of the quarterly average length of commitment report completed April 2020, YCRP's days to competency are in line with the average across sites for 45-day first felony patients.
Provide Restoration Treatment at the FSCRP	Open Building 27	Complete	• Identify alternate facility capacity to meet *Trueblood* compliance. • Collaborate with Court parties to open the facility.	As of March, due to the vacant Chief Medical Officer position, and a lack of on-site psychiatry, the census has been running below 20. Our DSHS Medical Director, Dr. Waiblinger is filling in. As of May 11, 2020, the census was at 21. FSCRP has a new *locums* psychiatrist starting this week and they will continue to slowly raise their census until they reach a census of 25. Due to COVID-19, the census will be capped at 25 to allow social distancing in groups and at meals. As of June 12, 2020 the census is 20. It should be noted that there has been a decrease in referrals to all RTF's.
	Restore Patients to Competency	Ongoing	• To meet or exceed the restoration rates at both state hospitals.	**Also, see data *Table 16* on page 33.** The early FSCRP data showing days to restoration averages for 45-day first felony patients are 39.5 days. At FSCRP length Of Commitment for 90-day first currently exceeds that of the state hospitals. As of June 12, 2020, the LOS for a resident at FSCRP averages at 60.3 days.

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
Implementation of OCRPs	Diversion Programs are Operational	Ongoing	Development and implementation of OCRP in King, Pierce, and Spokane Counties.	OCRPs were included in the Trueblood settlement. The Governor's proposed budget for the 2019-2021 biennium included funding for the OCRP programs contemplated in the settlement. A workgroup has been convened with staff from both OFMHS and HCA to plan for effective implementation of this new endeavor within the three regions of the Settlement Agreement's first phase. A Request for Information (RFI) was issued September 4, 2019 with an amendment issued September 9 to correct the RFI number. The finalized implementation model draft will be sent to workgroup participants for comment and review. Implementation WebEx presentations were facilitated on September 20, September 23, and September 27th for the purpose of distributing information about program planning and to gather insight and information from potential community providers. The program model was finalized November 1, 2019. The OCRP planning group is meeting with the three implementation regions throughout the month of November to discuss region-specific details of the programs. Request for Proposals (RFP) for OCRP services will be released by November 30, 2019. The OCRP RFP was posted on November 27, 2019 with a closing date of January 17, 2020.

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				A bidder's conference was held via WebEx on December 18, 2019. Discussion included the staffing model, scope of caseloads, services and service area, competency restoration/evaluation pathways and the RFP process. The OCRP Administrator, OCRP Project Manager, and OCRP Planning Group Co-Lead have been attending regularly scheduled court services steering committee meetings in the program regions in order to be present for questions or discussion regarding OCRP. OCRP apparent successful bidders for the Southwest and Spokane regions were announced on February 10, 2020. Another contractor for the Pierce region was announced later in February. Contracts with Statement of Work and individual provider budgets are being developed with a goal of having the contracts executed by April. The OCRP Administrator and Project Manager will be participating in a "Roadshow" along with members of the Forensic Navigator team to meet with and engage staff and officials with the county court systems in Phase 1 regions. As of April 1, 2020, three contracts have been executed, with one provider per region. DSHS and HCA are working together to provide training and to create policy for specific processes, such as client

Task	Key Milestones	Status / End Dates	Anticipated Outcome & Assumptions	Results Achieved & Barriers to Completion
				removal from OCRP to an inpatient level of care and transportation agreements. A policy for determining clinical appropriateness for OCRP referral has been finalized. OCRP has been contracted in the three Phase 1 implementation regions with contractors Greater Lakes Mental Health (Pierce Region), Lifeline Connections (SW Region) and Frontier Behavioral Health (Spokane Region). The model was developed between DSHS and HCA, in consultation with Groundswell, Inc., and will incorporate the Breaking Barriers Competency Restoration Program as part of the model interventions. Full training of teams is scheduled for June 15-18, 2020, and the program is on track to go-live on July 1, 2020. Washington Administrative Code (WAC) for the program is also in development and scheduled to be complete by December 31, 2020.
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 this reporting period, resumed admission of competency restoration patients into WSH. OFMHS also coordinated a meeting with the Pierce County Jail leadership team to explain this, which was appreciated by the Pierce County Jail team.
Diversion Alternatives				
Implement 2E2SSB 5177 (2015) provisions for dismissal of charges & referral to treatment	Diversion Programs are Operational	Ongoing	Prosecutor can dismiss criminal charges without prejudice & refer to community-based mental health services.	OFMHS Liaison and Diversion Specialist will continue to monitor the programs and provide technical assistance as needed to address any barriers.

FEBRUARY 8, 2016 COURT ORDER STATUS REPORT/UPDATES

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

Table 18. *Court Order Status Updates*

Requirements	Date	Status	Progress Notes
1. Implement a triage system to sort class members waiting for in-jail evaluations by the acuity of their mental illnesses and their current manifestations, by the seriousness of their crimes, and by the amount of resources their cases require[1]:			
C. Reporting on the implementation and effectiveness of the triage plan in Defendants' monthly reports to the Court Monitor	Beginning April 15, 2016	Ongoing	**Refer to 3C. & 4C. below.**
2. Eliminate the backlog of class members currently waiting for in-jail evaluations[2]:			
E. Completing evaluations for all backlog cases (any patient waiting more than 14 days at the end of the month[3])	April 15, 2016	Ongoing	Of the 204 jail evaluation orders signed in April, 135 were completed within 14 days, which is 66.0%. This number is expected to rise once the data are mature.
3. Implement a triage system to sort class members waiting for in-hospital evaluations by the acuity of their mental illnesses and their current manifestations, by the seriousness of their crimes, and by the amount of resources their cases require:			
C. Reporting on the implementation and effectiveness of the triage plan in Defendants' monthly reports to the Court Monitor	Beginning April 15, 2016	Ongoing	For additional information, review the Task column in *Table 17* labeled ***"Explore and pursue triage system possibilities"*** on pages 41-42.
4. Implement a triage system to sort class members waiting for restoration services by the acuity of their mental illnesses and their current manifestations, by the seriousness of their crimes, and by the amount of resources their cases require:			
C. Reporting on the implementation and effectiveness of the triage plan in	Beginning April 15, 2016	Ongoing	For additional information, review the Task column in *Table 17* labeled: ***"Explore and pursue triage system possibilities"*** on pages 41-42.

[1] By agreement with the Court Monitor, long completed requirements 1.A. & 1.B. were removed from *Table 18* for the April 2020 report.
[2] By agreement with the Court Monitor, long completed requirements 2.A. & 2.B. were removed from *Table 18* for the April 2020 report, and 2.C. & 2.D. were removed from *Table 18* for the May 2020 report.
[3] Under a previously completed section of this order, requirement 2.C., a targeted objective to recruit forensic evaluators, was satisfied.

Requirements	Date	Status	Progress Notes
Defendants' monthly reports to the Court Monitor			
5. Report on the implementation status of the CMS Plan of Correction:			
B. Reporting on the implementation status in Defendants' monthly reports to the Court Monitor	Beginning March 15, 2016	Ongoing	DSHS entered into a second System Improvement Agreement with the Centers for Medicare and Medicaid Services (CMS). This agreement ran from November 2, 2017 to July 2, 2018. A copy of the agreement was shared with Dr. Mauch by defense counsel on November 3, 2017. 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. WSH was resurveyed May 2018 and did not meet all the Conditions of Participation (COP) with CMS. As of July 9, 2018, WSH was decertified. WSH continues to work using Functional Work Teams (FWTs) towards CMS certification. ESH remains accredited by The Joint Commission and CMS certified. The Legislature funded design of a new hospital, which will be required to meet all the COPs for CMS certification. Currently, this project is within the pre-design phase with aspects of the overall plan being developed. A draft design of the rough outline of the new building has been developed.
6. Plan for recruiting and staffing 30 beds at WSH after compliance with CMS's terms of participation is achieved in March:			
C. Reporting on the implementation status of the plan and timeframe in	Beginning April 15, 2016	Ongoing	DSHS entered into a second System Improvement Agreement with CMS. This agreement ran from November 2, 2017 to July 2, 2018. A copy of the

Requirements	Date	Status	Progress Notes
Defendants' monthly reports to the Court Monitor			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. WSH was resurveyed May 2018 and did not meet all the COP with CMS. As of July 9, 2018, WSH was decertified. WSH continues to work using Functional Work Teams (FWTs) towards CMS certification. PSHB Sec. 204 budgeted for the 30 beds at WSH and was completed prior to CMS decertification. The Legislature funded design of a new hospital, which will be required to meet all the COPs for CMS certification. Currently, this project is within the pre-design phase with aspects of the overall plan being developed. A draft design of the rough outline of the new building has been developed.
8. Remove barriers to the expenditure of the $4.8 million in currently allocated diversion funds:			
D. Executing contracts for implementation by the selected providers	April 15, 2016	Complete	Prosecutorial diversion was funded for fiscal year 2020.
10. Develop a reliable and valid client-level data system to support better management and accountability of the forensic services system:			
E. Implementing revisions to the existing system or initiating development of a new forensic data and management information system. The decision was to initiate new system development efforts.	January 2020	Complete	Project governance has established a normal data / reporting meeting with RDA, OFMHS, and the project technical team. Data errors now generate RDA errors reports that are sent to OFMHS key personnel. Workflow issues are directed to OFMHS for adoption and technical issues are reviewed by the technical team for design changes.

JULY 7, 2016 CONTEMPT ORDER STATUS UPDATES

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

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

(2) Diversion plans – DSHS is ordered to develop, in consultation with the Court Monitor, plans for the expenditure of the contempt fines; and

(3) Wait time data – DSHS shall submit to the Court wait time data in a manner identical to the data submitted on June 17, 2016 in the declaration of Bryan Zolnikov. These data are included in this report in Tables 11-13.

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

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

(1) Develop a list of data elements needed to comply with the Court Order to include additional delay data;

(2) Develop a data dictionary to define the data elements needed;

(3) Develop a process of reporting the information to the courts for the exception requests;

(4) Identify the cutoff date for seeking an exception;

(5) Develop a standardized form that can be used for seeking good cause exceptions;

(6) Develop an operating procedure to guide evaluators through the new good cause process;

(7) Coordinate with the Attorney General's Office to ensure adequate representation;

(8) Develop a process for collecting the data to report to the courts for the exceptions and to maintain for monthly reporting;

(9) Develop a model for the delays and the data pertaining to the delays; and

(10) Modify the current IT systems or develop a new database in which to maintain the information once all above steps are completed.

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

The Forensic Advisory Committee (FAC) meets semi-monthly and provides business process clarification and recommendations to the technical team. The FAC will continue to meet to provide input during system optimization and future enhancements. Recommendations from the FAC may be referred to the Governance Committee when appropriate. The Governance Committee meets at least monthly to

monitor status and render final decisions on key topics. Governance also prioritizes the future functionality to ensure that the IT project work aligns with the needs of the Court and other stakeholders.

APPENDICES

Appendices A-G: Data Tables; Class Member Evaluation/Restoration Information; Class Member Restoration Information for the Maple Lane, Yakima, & Fort Steilacoom Programs; and Percent of Court Orders Received Within Three Days

This file is submitted with the DRAFT and FINAL reports and includes data tables as well as order received rate data.

Appendix H: Outliers and Delay Comments

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

Appendix I: Calculation of Inpatient Contempt Fines

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

Appendix J: Calculation of Jail-Based Contempt Fines

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

Appendix K: Good Cause Exceptions

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