

Supporting Sustainable Recovery, Independence, and Wellness: 2017 Behavioral Health Administration Data Fact Sheet

The DSHS Behavioral Health Administration (BHA) funds and oversees quality behavioral health services in support of DSHS' mission to [transform lives](#). BHA's 2,958 teammates work to provide patients with the care they need in the most appropriate setting. This fact sheet reports data covering the breadth of services BHA provided to clients in **SFY 2016** across the continuum of care from community locations to state hospitals.

Expenditures¹

Total BHA expenditures in SFY 2016: approximately **\$1.3 billion**, distributed as follows:

- Community Mental Health (MH): **\$779.13** million.
- Community Substance Use Disorder (SUD) treatment: **\$221.69** million.
- State Psychiatric Hospitals: **\$296.21** million.

Clients Served

More than **200,000** clients received BHA mental health (MH) and substance use disorder (SUD) treatment services.² Approximately:

- **167,000** received MH services.
- **48,000** received SUD treatment services.
- **1,800** received treatment services in WA's three state psychiatric hospitals.³
- **129,000 adults** and **50,000 children** were Medicaid eligible.
- **22,000 adults** and **6,000 children** were non-Medicaid eligible.

Community-based Services²

<i>Mental Health</i>	Crisis	Outpatient	Inpatient
Adult	26,200	103,420	9,230
Youth	7,700	50,300	1,800
<i>SUD</i>	Outpatient	Residential	Opiate Substitution Treatment
Adult	28,000	7,500	10,000
Youth	3,730	800	*

American Indian/Alaskan Native Fee-for-Service⁴

	Outpatient	Residential	Opiate Substitution Treatment
Adult	1,690	472	754
Youth	86	42	*

SUD Prevention

BHA's total expenditures for SFY 2016 include **\$12.953** million for Community SUD Prevention & MH Promotion/Suicide Prevention services. Through this programming:

- More than **17,000** Washingtonians received SUD prevention services.
- Of this, **77%** participated in Evidence Based Programs (EBPs).

Page 1 Notes:

¹Does not include administrative expenditures.

²Full fiscal year data for community-based MH and SUD treatment services is not available. These figures cover the period from **July 1, 2015—March 31, 2016** only. Updates will be provided when data for SFY 2016 is complete. Figures rounded for ease of presentation.

³Data on services provided at the three state hospitals cover full SFY 2016 (July 1, 2015—June 30, 2016).

⁴The AI/AN SUD Fee-for-Service (FFS) program began April 1, 2016. Data covers clients served between **April 2016 and November 2016**.

*Data suppressed as client count is less than 10.

Recovery, Engagement, and Outreach Services¹

More than **10,000** clients received DBHR’s Recovery Support, Engagement, and Outreach Services. Of these clients, approximately:

- **1,000** received Housing and Recovery through Peer Services (HARPS), **150** received Bringing Recovery Into Diverse Groups through Engagement and Support (BRIDGES), and **100** received Permanent Options for Recovery Centered Housing (PORCH).
- **200** clients received Supported Employment services at three grant-funded sites.
- **1,400** clients received SUD Access to Recovery services.¹
- **250 peers** and **150 parents** and **youth** received Certified Peer Counseling (CPC) training through the Peer Support Program.
- Over **4,000 homeless individuals** received outreach services through the Projects for Assistance in Transition from Homelessness (PATH) in conjunction with BRIDGES.

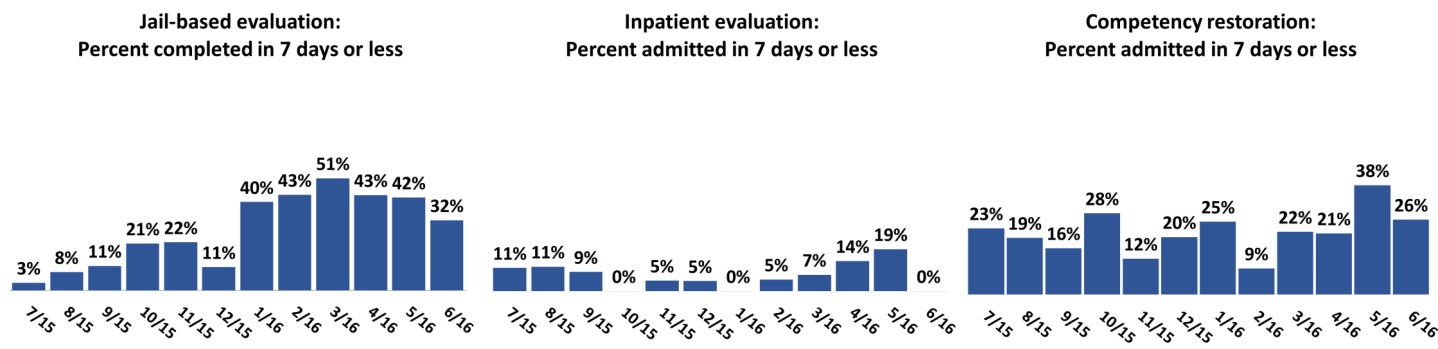
Client Satisfaction

- In 2015, **95% of adults** and **92% of youth** reported being very satisfied or mostly satisfied with the SUD treatment services they received.²
- In 2016, adult consumers gave general satisfaction with mental health services an average **score of 4** (on a scale of 1-5, 5 being best), youth consumers also a **score of 4**, and family consumers (caregivers of children under 13), a **score of 3.8**.³

Clients Served by State Hospital Facilities

Facility	Number of Patients ⁴		Annual (SFY) Average Daily Census		Annual (SFY) Average Length of Stay (days) ⁵		SFY Funded Capacity (beds)		Annual (SFY) Average Occupancy Rate ⁶	Discharged to Outpatient Services ⁷
	Civil	Forensic	Civil	Forensic	Civil	Forensic	Civil	Forensic	Hospital-wide	Civil only
Eastern State Hospital	435	195	138	79	102	142	192	125	84.7%	67%
Western State Hospital	383	720	403	232	380	109	557	285	97.3%	58%
Child Study & Treatment Center	41	N/A	36	N/A	318	N/A	47	N/A	95.1%	42%

Forensic Evaluation⁸ and Competency Services



Page 2 Notes:

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²Data are from the [Patients Speak Out: Adult Patient Satisfaction Survey 2015](#), DSE Report No. APSS.1 and Patients Speak Out: Youth Patient Satisfaction Survey 2015, DSE Report YPSS 01.2017 (coming soon).

³Data are from the Adult Consumer Survey 2016 and the Child/Family Consumer Survey 2016: Took Kit SESRC, WSU.

⁴Data on services provided at the three state hospitals cover SFY 2016. Civil and forensic in this table refers to patient’s legal status at admission. Legal status may change during a patient’s stay. The number of patients served is a count of unique clients.

⁵Average Length of Stay is calculated as the number of days a patient was in-residence between admission and discharge.

⁶At Eastern State Hospital (ESH), the number of funded beds for forensic services increased from 95 beds to 125 beds in SFY 2016. Beds came online starting in December 2015. ESH’s lower occupancy rate reflects the time it takes for new capacity to “go live.” In July 2016, ESH reported a forensic occupancy rate of over 90%.

⁷Discharged to Outpatient Services refers to patients admitted to non-crisis “routine” outpatient service within 7 days of discharge from the state hospital. As discharges is a count of all discharges, a client may be counted multiple times.

⁸In SFY 2016, the standard for jail-based evaluation was completion in 7 days or less. In July 2016, the standard changed to 14 days or less (data not shown).