

**REHABILITATION ADMINISTRATION
High Acuity Health Services**



2016 SUPPLEMENTAL BUDGET

Request	FY16	FY17	15-17
FTE	4.2	8.3	6.3
GF-State	\$388,000	\$793,000	\$1,181,000
Total	\$388,000	\$793,000	\$1,181,000

DECISION PACKAGE SUMMARY

The Rehabilitation Administration (RA) requests resources to provide improved health care services and supports to high acuity residents of the Special Commitment Center (SCC). By funding this request, RA will be able to provide health care services to a unique group of civilly committed residents with disabilities and multiple serious mental health issues. SCC will address issues highlighted by the Inspection of Care (IOC) team and Disability Rights Washington (DRW), and reduce the risk for increased levels of resident litigation related to unmet service needs.

PROBLEM STATEMENT

The SCC supports a broad range of residents, including those with significant disabilities and multiple serious mental health issues that make treatment and management of psychological issues more complicated. The mandated independent review of resident care (IOC) as well as last years' DRW visit highlighted concerns that healthcare services for these residents should be improved. In order to achieve the improvements, Registered Nurses (RN) would be assigned to the high acuity treatment units' service delivery team. The requested RN3s are needed to have nursing coverage associated with each program area. The IOC team acknowledged that years ago SCC had RN3s associated with each program area and the level of care was more appropriate to the residents' needs given the aging and medically fragile population. In addition, changes needed to the seclusion and restraint policies, which will allow for a more therapeutically indicated response to behavioral issues, require the care of a registered nurse for an individual in seclusion and/or restraint. To assist in limiting the number of seclusion and restraints needed, residents will be taught in their treatment to ask for medications as needed and to communicate regularly with the RN about their medications and medication side effects. Current clinical staffing levels, especially after the reductions taken in the 2015-2017 Biennial Budget, do not allow for this RN coverage. Additionally, the current RN staffing level will not support the additional duties that will be required with the introduction of a High Acuity Treatment model.

Certified Nursing Assistants (CNAs) are an essential part of the high acuity treatment units service delivery team to assist many residents who, for psychiatric or disability reasons, are required to have assistance with showering and other activities of daily living. SCC has had labor issues dealing with Residential Staff having to shower and or help facilitate other activities of daily living for the special needs populations. CNAs are trained for this activity.

Additional Psychology Associates will enable SCC to better meet the identified needs set forth by IOC (and DRW). SCC believes that steps such as establishing a Token Economy Program and utilizing the Mental Health First Aid model



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address critical concerns. In addition, SCC seeks to institutionalize a Psychiatric Emergency Response Team to be led by a clinical staff member. To offer the proper standard of care and avoid litigation SCC must also be able to continue to address the unique health needs of the high acuity residents. The addition of critical services is the best means by which the described program improvements can be implemented.

Failure to adequately provide staff will significantly increase the likelihood of further unfavorable evaluations by the IOC, DRW, and others who may review the program. Such reports will lead to increased litigation. The requested resources are believed to be the minimum resources needed for the implementation of the corrective plan to address healthcare services for high acuity residents. Specially trained staff such as health care professionals are necessary to provide the treatment and supports required for high acuity residents.

PROPOSED SOLUTION

This decision package requests funding for 8.3 FTEs.

- **Four RNs and 1.3 CNAs and backfill.** These staff will be assigned to the high acuity treatment units. With the development of the new seclusion and restraint policies that were recommended by the IOC (and DRW) to provide a more therapeutic response for behavioral issues of the residents with multiple serious mental health issues and disabilities, a RN must communicate with a licensed provider and oversee all seclusions and restraints for the facility. High acuity residents have the most need for seclusion and restraints, which will be mitigated with increased staffing levels. These staff will also provide residents with access to medical care and will monitor their required pharmacology needs.
- **Three Psychology Associates.** These staff will ensure coverage 16 hours a day, seven days a week, by a mental health professional for both high acuity units. This will partially meet the identified needs of DRW and the IOC.

EXPECTED RESULTS

By funding this request, SCC will be able to address concerns identified by independent reviewers with the healthcare staffing level supporting the needs of high acuity residents. If the 8.3 FTEs are added, the implementation of the described healthcare services is possible. A series of significant healthcare cuts that have been made to staffing levels due to ongoing budget concerns have jeopardized the continued provision of sufficient health care services at SCC, including high acuity residents. The additional resources are expected to significantly reduce the risk of further adverse findings by external reviewers and also decrease the risk of litigation by residents or organizations. When residents in this unique group are able to achieve release, these interventions and treatment services will improve safety and security in the community.

STAKEHOLDER IMPACT

Stakeholders will support this request as it makes progress toward providing high acuity residents with needed services, addresses concerns identified in the IOC and DRW reviews, and ensures statutory compliance.