



Report to the Legislature

**Services to Persons with
Developmental Disabilities who are Discharged or
Diverted from State Hospitals or Individuals with
Community Protection Issues**

Chapter 518, Laws of 2005, Section 205(1)(d) Uncodified

August 15, 2006

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EXECUTIVE SUMMARY

Chapter 518, Laws of 2005, E1, Section 205(1) (d) requires the Department of Social and Health Services' Division of Developmental Disabilities (DDD) to report, within 45 days following each fiscal quarter, the number of persons served in the community through this section, where they were residing, what kinds of services they were receiving prior to placement, and the actual expenditures for all community services to support these clients. This proviso is intended to provide community residential supports, therapies and employment/day services to individuals who are discharged or diverted from state psychiatric hospitals and for individuals that qualify for the Community Protection Program.

BACKGROUND

Hospital Discharge

Providing services to individuals with developmental disabilities who are diagnosed with mental illness and/or are otherwise gravely disabled is a long-term state and national issue. Since 1985, the Washington State Legislature has periodically provided funding to enable some developmentally disabled clients to move out of state hospitals when community placement is recommended. Between the periods of August 1996-1998, however, the number of people with developmental disabilities at the state's two psychiatric hospitals grew from 53 to a high of 92.

In January 1999, the Washington Protection and Advocacy System filed a federal class action lawsuit (*Allen v DSHS*) alleging abuse and neglect of individuals with developmental disabilities at Western State Hospital (WSH). It further alleged that individuals were denied opportunities for discharge and community support, and that they were at risk for unnecessary involuntary commitment. A mediated settlement agreement was reached in December 1999. Among the terms of the agreement, the state agreed to request funding from the legislature to implement a 3-phase remedy titled the Division of Developmental Disabilities/Mental Health Division Collaborative Work Plan.

The supplemental budget passed in the 2000 Legislative Session included \$6,673,000 to fund Phases 1 and 2 of the collaborative work plan. Phase 3 of the work plan proposed to establish involuntary treatment facilities. Phase 3 was not initially funded. The Legislature instead required a comprehensive study of long-term treatment alternatives for individuals with developmental disabilities and mental illness. The report's recommendation was to continue to house involuntary treatment clients at the two state psychiatric hospitals.

The Legislature authorized funds to the Mental Health Division to support Phase 3 at the state psychiatric hospitals during the 2001-2003 Biennium.

In the 2005-2007 Biennium, the Legislature appropriated funds for DDD to provide community supports for thirty-five (35) individuals with developmental disabilities who are being diverted or discharged from the state psychiatric hospitals, or leaving the Department of Corrections custody and participating in the Dangerous Mentally Ill Offender program (DMIO), or individuals with community protection issues. These funds provided an average daily rate of \$300 per client. In the Supplemental 2006 budget period, the Legislature appropriated additional funds to support seven (7) persons, for a biennial total of forty-two (42) individuals.

STATUS

The Division of Developmental Disabilities has placed a total of twenty-two (22) individuals since July 2005 at an average daily rate of \$357.70 (see attached spreadsheet). Because the daily rate to support these individuals is above the legislative daily rate average, DDD anticipates that it will not be able to place any additional individuals within the fiscal year 2007 authorized budget. Because of this DDD will be asking for funds in a Supplemental 07 funding request and an increase in the daily average rate. DDD has also submitted a funding request to move 29 individuals from the state hospitals at an average daily rate of \$499 in the 2007-09 Biennium.

For the quarter April through June 2006, twelve (12) individuals have been served in this proviso.

Following is a description of the needs of five (5) individuals who meet the criteria "individuals discharged from state psychiatric hospitals", six (6) individuals who meet the criteria "individuals diverted from state psychiatric hospitals", and one (1) individual who meets the criteria "individuals being released from prison who need community protection services". There were no (0) individuals residing in the community with community protection issues placed this quarter. These client descriptions are provided to offer information about this particular population.

Individuals discharged from state psychiatric hospitals:

Prior to community placement, individuals served in state psychiatric hospitals receive habilitative mental health services at Western State Hospital (WSH) or Eastern State Hospital (ESH) as part of the DDD Habilitative Mental Health Unit. These inpatient services include skills building, group and individual counseling services, vocational services, coaching, and highly specialized individual treatment services and planning, including functional assessments and positive behavior support planning. Services at both state hospitals comply with requirements set forth in the Civil Rights of Institutionalized Persons Act, 42 USC 1997.

Client # 14 is a forty-two year old male with a diagnosis of Mild mental retardation, Dementia with delusions due to head trauma and Cerebral Vascular Accident (CVA), Generalized Anxiety Disorder, Deep Vein Thrombosis (DVT), and right knee Degenerative Joint Disease who was admitted to the state hospital after being found Not Guilty by Reason of Insanity (NGRI) for First Degree Robbery. Client # 14 had been admitted to the state hospital on one previous occasion for vandalizing his attorney's office. It took several years to stabilize client # 14 and when he had stabilized, plans were made for his discharge to the community. Funds from this proviso are being used to provide supported living residential services and supports by a certified community protection vendor, vocational services, and specialized therapy by a Sex Offender Treatment Professional (SOTP). Client # 14 receives medication and other mental health services from the local community mental health agency.

Client # 16 is a twenty-five year old female with a diagnosis of Mild mental retardation, Psychotic Disorder NOS, Seasonal Affective Disorder, Epilepsy, Bilateral hearing loss, and Post Traumatic Stress Disorder (PTSD) secondary to sexual abuse and trauma. Client # 16 was admitted to the state hospital on a civil commitment after being found incompetent to stand trial for First Degree Attempted Murder. Client # 16 attempted to light her bed-ridden housemate on fire. When client # 16 was determined ready for discharge by her treatment team plans were made to begin a slow transition to the community. Funds from this proviso are being used to provide supported living residential services and supports by a certified community protection vendor. Client # 16 receives medication and other mental health services from the local community mental health agency and is enrolled with a vocational services agency to assist with finding employment opportunities. Client # 16 is experiencing difficulty in the community and may need to return to the state hospital for further stabilization.

Client # 19 is a twenty-two year old male with a diagnosis of Mild mental retardation, PTSD, Bipolar Disorder, Oppositional Defiant Disorder and Obsessive-Compulsive Disorder who was admitted to the state hospital after being charged with Second Degree Assault and found not competent to stand trial. Client # 19 stabilized at the state hospital and funds from this proviso are being used to provide supported living residential services and supports by a certified community protection vendor. Client # 19 receives medication and other mental health services from the local community mental health agency and is working with a vocational provider to find employment.

Client # 20 is thirty-six year old male with a diagnosis of Mild mental retardation, Polysubstance Abuse, Psychosis NOS, Antisocial Personality Traits, and Left Eye Blindness who was admitted to the state hospital in 2005 for competency evaluation and restoration on charges of Unlawful Possession of a Controlled Substance. Charges were dismissed and client # 20 was civilly committed to the state hospital for treatment. Because his parents are unable to care for him at

home due to his highly assaultive and criminal history, funds from this proviso are being used to provide supported living residential services and supports by a certified community protection vendor. Client # 20 receives medication and other specialized mental health services from the local community mental health agency and is enrolled in a vocation services agency to assist with employment.

Client # 21 is a twenty-four year old male with a diagnosis of Mental retardation, unspecified, Paraphilia NOS, Impulse Control Disorder NOS, ADHD by history, Obesity, Sleep Apnea, Hyperlipidemia and Asthma who was admitted to the state hospital in 2001 on a civil commitment after being found wandering around a neighborhood touching young girls on the genitalia, cutting up his sisters clothes and masturbating on them. Client # 21 actively participated in treatment this past year and was determined ready for discharge by the treatment team. Funds from this proviso are being used to provide supported living residential services and supports by a certified community protection vendor. Client # 21 receives medication and other mental health services from the local community mental health agency, specialized therapies from an SOTP and is working with a vocational agency that is helping him secure gainful employment.

Individuals diverted from state psychiatric hospitals:

Client # 11 is a fifty-one year old male with a diagnosis of Mild mental retardation who had been residing at an Adult Family Home (AFH) until he began to have an increase in his fixations and assaults on women residents and staff. Client #11 has had long standing involvement with community mental health centers and law enforcement, and was admitted to an evaluation and treatment center for psychiatric treatment. Upon discharge from the treatment center he was homeless because his AFH provider was unable to support him due to his inappropriate and aggressive behaviors. Other AFH's were also unwilling to support him for similar reasons. Funds from this proviso are being used to provide supported living and vocational services & supports. Client # 11 receives medication and other mental health services from the local community mental health agency.

Client # 12 is a twenty-six year old male with a diagnosis of Mild mental retardation, Polysubstance Abuse, PTSD and Depression who was admitted to a community hospital after asking a police officer to kill him. Client # 12 had multiple previous admissions to psychiatric hospitals over the past two years including one admission to the state hospital. There are multiple reports of fighting, property crimes, petty theft, and reckless burning. Client # 12 had multiple episodes of suicidal ideation and gestures that included consuming large amounts of alcohol in an attempt to poison himself, attempted hanging and several medication overdoses. Client # 12 recently completed inpatient alcohol and drug treatment and expressed a desire to continue treatment and live a healthy lifestyle. Funds from this proviso are being used to provide supported living residential services and supports by a certified community protection vendor.

Client # 12 receives medication and other mental health services from the local community mental health agency and is enrolled in a vocational services agency to assist with finding employment opportunities. He continues to attend a support group for substance abuse.

Client # 13 is an eighteen year old female with a diagnosis of Moderate mental retardation, Factitious Disorder, Depression, PTSD and Obesity who has a long history of psychiatric inpatient treatment. Client # 13 was recently discharged from the hospital to a Division of Child and Family Services (DCFS) placement because her mother, who is also developmentally disabled, could no longer care for her. Unfortunately, client # 13's placement disrupted and she was admitted to a DDD funded diversion bed until arrangements could be made to find stable supports. Funds from this proviso are being used to provide supported living residential services and supports by a certified community protection vendor who also provides specialized therapy services. Client # 13 receives medication and other mental health services from the local community mental health agency.

Client # 15 is a twenty-one year old male with a diagnosis of Mild mental retardation, Impulse Control Disorder, Depression, Laurence Moon-Biedle Syndrome, Obesity and Sleep Apnea who also displays symptoms of exhibitionism and is sexually inappropriate with other vulnerable adults. Client # 15 was removed from his family home by Adult Protective Services (APS) due to neglect and he was placed into a diversion bed as an alternative to being admitted to the state psychiatric hospital. While at the diversion bed, a behavior support plan and cross system crisis plan was developed and he was stable enough to be placed in the community. Funds from this proviso are being used to provide supported living residential services and supports by a certified community protection vendor. Client # 15 receives medication and other mental health services from the local community mental health agency and receives employment support from the Division of Vocational Rehabilitation (DVR).

Client # 18 is a thirty year old male with a diagnosis of Down Syndrome, Generalized Anxiety Disorder, Depression, and Heart Disease who has a history of community psychiatric hospital admissions for assault and was admitted to a DDD funded diversion bed due to aggression. While at the diversion bed, the AFH provider gave notice stating that they could no longer support client # 18 due to his increasing behavioral challenges. Client # 18 was stabilized at the diversion bed where he received medications, a behavior support plan and crisis plan. Funds from this proviso are being used to provide supported living and vocation services and supports. Client # 18 receives medication and other mental health services from the local community mental health agency.

Client # 22 is a seventeen year old male with Severe mental retardation and multiple psychiatric diagnoses who was admitted to Child Study and Treatment Center in 2005 for severe behavioral issues. Upon the client's eighteenth birthday plans were being made to transfer him to Western State Hospital (WSH) unless a

community placement could be found. Client # 22's parents could not support the client in the family home due to his complex behavioral needs so funds from this proviso were used to provide supported living residential services and supports by a certified residential vendor. Client # 22 receives medication and other mental health services from the local community mental health agency.

Individuals being released from prison who need community protection services:

Client # 17 is a twenty-five year old male with a current diagnosis of Mild mental retardation, Fetishism, Sexual Masochism, Factitious Disorder and Substance Abuse Disorder who was released from prison on community supervision after completing an eighteen month sentence for molestation charges against a teen-age boy. Client # 17 is currently a Registered Level three Sex Offender. Prior to his incarceration for child molestation he was living in his own apartment and receiving Medicaid Personal Care (MPC) services. He initially refused Community Protection Program (CPP) services upon his release from prison and was homeless and living under a tarp in the woods or in jail for parole violations. Funds from this proviso are being used to provide supported living residential services and supports by a certified community protection vendor, vocational services and supports through a contracted vendor and specialized therapy by a SOTP. Client # 17 receives medication and other mental health services from the local community mental health agency.

STATE HOSPITAL ADMISSIONS ACTIVITY

There have been eight (8) admissions to WSH in the April through June 2006 reporting period. All eight admissions were for court-ordered competency restoration under RCW 10.77. No individuals were admitted for psychiatric treatment after being determined to be a danger to self and/or others as a result of a mental disorder under RCW 71.05.

At ESH, for the same reporting period, no individuals were admitted for court-ordered competency restoration under RCW 10.77 and one (1) individual was admitted for involuntary psychiatric treatment under RCW 71.05.

2005-2007
CPP PROVISO TRACKING OUTPLACEMENT TOTALS
Fourth Quarter Totals

| <u>Hospital & CPP Outplacements</u> | | <u>Type of Services</u> | | | | | | | <u>Expenditures</u> | |
|---|---------------|---------------------------|-------------------------------|----------------------------------|-------------------------------|--------------------------------|-------------------------|-----------------------------|-------------------------|------------------------------|
| <u>Region</u> | <u>Number</u> | <u>Previous Residence</u> | <u>Residential Start Date</u> | <u>Number of Days in Service</u> | <u>Residential Daily Rate</u> | <u>Day Services Daily Rate</u> | <u>Other Daily Rate</u> | <u>Therapies Daily Rate</u> | <u>Total Daily Rate</u> | <u>Total Expend. To Date</u> |
| 3 | 1 | WSH | 10/24/05 | 251 | \$ 428.30 | \$ 24.65 | \$ - | \$ 15.00 | \$ 467.95 | \$117,455.45 |
| 3 | 2 | WSH | 10/27/05 | 248 | \$ 408.28 | \$ 24.65 | \$ - | \$ 15.00 | \$ 447.93 | \$111,086.64 |
| 4 | 3 | WSH | 12/15/05 | 198 | \$ 447.16 | \$ 30.00 | \$ - | \$ 11.84 | \$ 489.00 | \$96,822.00 |
| 3 | 4 | Community Hospital | 01/17/06 | 165 | \$ 212.10 | \$ 24.00 | \$ - | \$ 15.00 | \$ 251.10 | \$41,431.50 |
| 6 | 5 | DOC | 01/23/06 | 159 | \$ 240.12 | \$ 30.00 | \$ - | \$ 15.00 | \$ 285.12 | \$45,334.08 |
| 5 | 6 | WSH | 02/12/06 | 139 | \$ 273.78 | \$ 20.00 | \$ 3.28 | \$ 15.00 | \$ 312.06 | \$43,376.34 |
| 5 | 7 | Community Hospital | 03/08/06 | 115 | \$ 274.41 | \$ - | \$10.00 | \$ 10.00 | \$ 294.41 | \$33,857.15 |
| 3 | 8 | WSH | 03/21/06 | 102 | \$ 759.99 | \$ 24.65 | \$50.00 | \$ 15.00 | \$ 849.64 | \$86,663.28 |
| 4 | 9 | Family Home | 1/20/2006 | 162 | \$ 247.88 | \$ 30.00 | \$ - | \$ 15.00 | \$ 292.88 | \$47,446.56 |
| 6 | 10 | DOC | 03/24/06 | 99 | \$ 240.12 | \$ 30.00 | \$ - | \$ 15.00 | \$ 285.12 | \$28,226.88 |
| 3 | 11 | Diversion Bed | 04/14/06 | 78 | \$ 214.78 | \$ 25.00 | \$16.67 | \$ - | \$ 256.45 | \$20,003.10 |
| 2 | 12 | Diversion Bed | 04/19/06 | 73 | \$ 277.42 | \$ 24.00 | \$ - | \$ - | \$ 301.42 | \$22,003.66 |
| 5 | 13 | Community Hospital | 04/20/06 | 72 | \$ 457.36 | \$ - | \$15.00 | \$ - | \$ 472.36 | \$34,009.92 |
| 5 | 14 | WSH | 05/01/06 | 61 | \$ 282.01 | \$ 20.00 | \$ - | \$ 15.00 | \$ 317.01 | \$19,337.61 |
| 1 | 15 | Diversion Bed | 05/08/06 | 54 | \$ 187.76 | | | \$ - | \$ 187.76 | \$10,139.04 |
| 6 | 16 | WSH | 05/08/06 | 54 | \$ 448.66 | \$ 30.00 | \$20.00 | \$ 15.00 | \$ 513.66 | \$27,737.64 |
| 5 | 17 | DOC | 05/22/06 | 40 | \$ 266.15 | \$ 20.00 | \$ 4.93 | \$ 15.00 | \$ 306.08 | \$12,243.20 |
| 4 | 18 | Diversion Bed | 06/01/06 | 30 | \$ 286.03 | \$ 24.00 | \$ - | \$ - | \$ 310.03 | \$ 9,300.90 |
| 2 | 19 | ESH | 06/06/06 | 25 | \$ 255.52 | \$ 24.00 | \$ - | \$ - | \$ 279.52 | \$ 6,988.00 |

2005-2007
CPP PROVISO TRACKING OUTPLACEMENT TOTALS
Fourth Quarter Totals

| <u>Hospital & CPP Outplacements</u> | | <u>Type of Services</u> | | | | | | | <u>Expenditures</u> | |
|---|---------------|---------------------------|-------------------------------|----------------------------------|-------------------------------|--------------------------------|-------------------------|-----------------------------|-------------------------|------------------------------|
| <u>Region</u> | <u>Number</u> | <u>Previous Residence</u> | <u>Residential Start Date</u> | <u>Number of Days in Service</u> | <u>Residential Daily Rate</u> | <u>Day Services Daily Rate</u> | <u>Other Daily Rate</u> | <u>Therapies Daily Rate</u> | <u>Total Daily Rate</u> | <u>Total Expend. To Date</u> |
| 6 | 20 | WSH | 06/08/06 | 23 | \$ 292.27 | \$ 20.00 | \$ 4.93 | \$ 15.00 | \$ 332.20 | \$ 7,640.60 |
| 5 | 21 | WSH | 06/08/06 | 23 | \$ 287.95 | \$ 20.00 | \$ 6.47 | \$ 15.00 | \$ 329.42 | \$ 7,576.66 |
| 4 | 22 | CSTC | 06/16/06 | 15 | \$ 288.17 | \$ - | \$ - | \$ - | \$ 288.17 | \$ 4,322.55 |
| Average for Outplacements | | | | | | | | | \$ 357.70 | \$833,002.76 |