HOUSE BILL REPORT ESSB 5522

As Reported by House Committee On:

Health Care

Title: An act relating to creating an office of mental health ombudsman.

Brief Description: Creating an office of mental health ombudsman.

Sponsors: By Senate Committee on Human Services & Corrections (originally sponsored by Senators Kastama, Hargrove, Thibaudeau, Winsley, Kohl-Welles, Long, Costa, Snyder, Deccio, Fraser and Rasmussen).

Brief History:

Committee Activity:

Health Care: 3/22/01, 3/29/01 [DPA].

Brief Summary of Engrossed Substitute Bill (As Amended by House Committee)

Creates a Mental Health Ombudsman in the Department of Community, Trade, and Economic Development.

HOUSE COMMITTEE ON HEALTH CARE

Majority Report: Do pass as amended. Signed by 12 members: Representatives Campbell, Republican Co-Chair; Cody, Democratic Co-Chair; Schual-Berke, Democratic Vice Chair; Ballasiotes, Conway, Darneille, Edmonds, Edwards, Marine, McMorris, Pennington and Ruderman.

Minority Report: Without recommendation. Signed by 2 members: Representatives Skinner, Republican Vice Chair; and Alexander.

Staff: Dave Knutson (786-7146).

Background:

The current Mental Health Ombudsman Program is run from within the Regional Support Networks (RSNs) and state psychiatric hospitals. There is also a quality review team process overseen by the Mental Health Division of the Department of Social and Health

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Services. Ombudsmen are required to be "functionally independent," but are employed by and often located within the RSNs. Some people have expressed concerns that ombudsmen are not free to act in an independent manner and may not have the authority that other state ombudsman programs have.

Summary of Amended Bill:

A Mental Health Ombudsman (MHO) is created. Services are provided by a nonprofit organization contracting with the Department of Community, Trade, and Economic Development (CTED). The CTED chooses the contractor through a competitive process, and provides some administrative support.

The Mental Health Ombudsman must investigate and resolve complaints at the lowest level appropriate, and to ensure that quality review teams are established. The MHO must establish a statewide reporting system, engage in outreach activities, establish a toll-free number, and report to the Legislature annually.

The Mental Health Ombudsman must develop and implement a working agreement with the long-term care ombudsman, the children and family services ombudsman, and the Washington Protection and Advocacy System to coordinate services. The MHO also must establish working agreements with each RSN, the state psychiatric hospitals, and the Mental Health Division. The RSNs and state hospitals must cooperate with the MHO and respond in writing to all recommendations, identifying the actions taken to address them.

The Legislature intends that CTED's state Mental Health Ombudsman Program expend no more than the amount currently expended on RSN and state hospital ombudsman services and quality review teams, and the amount spent by the Mental Health Division on staff support and training for the quality review teams and ombudsman services.

Amended Bill Compared to Engrossed Substitute Bill:

The mental health ombudsman will develop protocols to ensure there is no overlap and duplication with other ombudsman offices. The ombudsman may seek private funds for the operation of the office.

Appropriation: None.

Fiscal Note: Not Requested.

Effective Date of Amended Bill: The bill takes effect on July 1, 2002.

Testimony For: There should be an independent ombudsman office created to oversee

the mental health system. Individuals with a mental illness should have access to their own ombudsman.

Testimony Against: Existing ombudsman functions in Regional Support Networks and state psychiatric hospitals are working find and do not need to be changed. This bill will reduce current ombudsman functions to pay for new state staff in Olympia.

Testified: (In support) Senator Kastama, prime sponsor; David Lord, Washington Protection and Advocacy System; Tom Richardson, National Alliance for the Mentally Ill; Kary Hyre, Long-term Care Ombudsman; Steve Pearce, Citizens' Commission for Human Rights; Donna Obermeyer, Washington State Special Ed Coalition; Bruce Reeves, Senior Citizens' Lobby; and Marie Julie..

(Concerns) Jack Morris, Department of Social and Health Services; and Harry Steinmetz, Washington Association of Housing and Services for the Aging..

(Neutral) Nancy Hanna, Department of Community, Trade, and Economic Development.

(Oppose) George Walk, Pierce County; Jennifer Dailey-Helgestad and Stephanie Keck, Pierce County Ombudsman; Jean Wessman, Washington Association of Counties; and Jeff Larsen, Washington State Residential Care Council.

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