

SENATE BILL REPORT

SB 5243

As Reported by Senate Committee On:
Health Care, February 19, 2015

Title: An act relating to services provided by residential habilitation centers.

Brief Description: Concerning services provided by residential habilitation centers.

Sponsors: Senators Honeyford, King, Keiser, Conway and Chase.

Brief History:

Committee Activity: Health Care: 2/02/15, 2/19/15 [DPS-WM, w/oRec].

SENATE COMMITTEE ON HEALTH CARE

Majority Report: That Substitute Senate Bill No. 5243 be substituted therefor, and the substitute bill do pass and be referred to Committee on Ways & Means.

Signed by Senators Becker, Chair; Dammeier, Vice Chair; Frockt, Ranking Minority Member; Bailey, Brown, Cleveland, Conway and Rivers.

Minority Report: That it be referred without recommendation.

Signed by Senators Angel, Jayapal, Keiser and Parlette.

Staff: Kathleen Buchli (786-7488)

Background: The Developmental Disabilities Administration within the Department of Social and Health Services (DSHS) provides support and services to persons with developmental disabilities. Services include case management, needs assessments, support in activities of daily living, employment, and rehabilitative therapies. DSHS also provides medical, dental, and pharmaceutical services to persons with developmental disabilities. Services may be provided in three different service settings: in the client's own home; in a community residential home; or in a Residential Habilitation Center (RHC). Washington operates four RHCs which are established in statute to provide services and housing for persons with developmental disabilities: Rainier School in Buckley; Lakeland Village in Medical Lake; Fircrest School in Shoreline; and Yakima Valley School in Selah. Another facility located in Bremerton, Francis Haddon Morgan, was closed on December 31, 2011.

Yakima Valley School was designated as a Nursing Facility in 1994. Currently about 260 direct care and support staff provide 24-hour nursing care, a full spectrum of clinical and

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therapeutic programs, and recreation and activities to about 108 individuals who reside on campus. Yakima Valley School also offers planned respite services, which include medical, nursing, dental, therapeutic, dietary, psychiatric, and recreation programs. Beginning on August 24, 2011, new admissions, other than short-term respite or crisis stabilization services, have not been permitted to Yakima Valley School. Yakima Valley School continues to operate until the number of permanent residents reaches 16 people.

Summary of Bill (Recommended Substitute): References to the now-closed Francis Haddon Morgan are removed from statute. The restrictions on Yakima Valley School relating to not accepting new admissions and operating until the population reaches 16 persons is removed, thereby opening Yakima Valley School to new admissions. Yakima Valley School must use its facilities to develop an evaluation and treatment center and to provide evaluation and treatment crisis services. It must also operate crisis stabilization beds and respite service beds as the capacity of the school allows and as the needs of the community require. DSHS must continue to provide respite services in RHCs and continue to develop respite care in the community so that clients are able to access services where they choose.

EFFECT OF CHANGES MADE BY HEALTH CARE COMMITTEE (Recommended Substitute): Requires the Yakima Valley School to develop an evaluation and treatment center and to provide crisis stabilization beds and respite service beds.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony on Original Bill: PRO: Yakima Valley can add three new beds without increasing costs and there are cottages on site that can be opened. We need to do this for the families. Community care is not appropriate for all people. This bill is a product of the 2012 Developmental Disability Task Force; this was a recommendation of the task force. People who need RHC services must be allowed to live in them. It costs just as much to provide services in an RHC as it does to provide those services in the community. RHCs provide more services than what is available in the community. Moving people from RHCs to community settings provides client confusion and can be fatal to some residents. There is a need for respite care; Yakima Valley has 16 beds which doesn't meet the needs of the community. The staff in the RHCs are the experts and are used to assisting the hard-to-manage people.

CON: We need to change where people are served and we are moving to having people being served in the community. It costs more to keep people in RHCs. There are still more people on the waitlist waiting for community respite and residential services; the money used to pay for RHC services could pay for community services instead. Our members who have lived in institutions compare that to living in a prison. The RHC option is scary for our members. The RHCs should be closed; many people who have lived in the RHCs now live in the community successfully.

Persons Testifying: PRO: Senator Honeyford, prime sponsor; Rick Jensen, Paul Strand, ACTION DD; John Mahaney, Julianne Moore, citizens.

CON: Diana Staddon, Arc of WA ; Noah Seidel, Self Advocates in Leadership; Eric Matthes, Arc of King County.