<u>2SHB 1394</u> - S AMD TO WM COMM AMD (S-3941.1/19) **726**By Senator Braun

ADOPTED 04/17/2019

- On page 9, line 11, after "(4)" insert "Establish requirements for the ability to provide services and an appropriate level of care to individuals with intellectual or developmental disabilities. The requirements must include staffing and training;
- 5 (5)"
- Renumber the remaining subsections consecutively and correct any internal references accordingly.
- 8 On page 19, beginning on line 25, strike all of section 10 and 9 insert the following:
- 10 "NEW SECTION. Sec. 10. By July 1, 2020, the health care 11 authority and the department of social and health services, 12 consultation with the department of health, the department 13 children, youth, and families, representatives from providers serving children's inpatient psychiatric needs in each of the three largest 14 cities in Washington, representatives from behavioral health and 15 16 developmental disability service providers, and representatives from 17 developmental disability advocacy organizations including individuals and families of individuals who need or receive behavioral health and 18 19 developmental disability services, must provide recommendations to 20 governor's office and the appropriate committees of the 21 legislature relating to short-term and long-term residential 22 intensive behavioral health and developmental disability services for 23 youth and adults with developmental disabilities and behavioral 24 health needs who are experiencing, or are in danger of experiencing, 25 discharging from inpatient behavioral health treatment barriers 26 received in community hospitals or state hospitals. 27 recommendations must address the needs of youth and adults with developmental or intellectual disabilities separately and: (1) 28 Consider services necessary to support the youth or adult, the youth 29 30 adult's family, and the residential service provider 31 preparation for and after discharge, including in-home behavioral

- 1 health and developmental disability supports that may be needed after
- 2 discharge to maintain stability; (2) establish staffing and funding
- 3 requirements that provide an appropriate level of treatment for
- 4 residents in facilities, including both licensed mental health
- 5 professionals and developmental disability professionals; and (3) for
- 6 youth clients, consider how to successfully transition a youth to
- 7 adult services without service disruption."
- 8 On page 21, after line 32, insert the following:
- 9 "NEW SECTION. Sec. 13. A new section is added to chapter 71A.12 10 RCW to read as follows:
- 11 (1) Subject to the availability of amounts appropriated for this
- 12 specific purpose, the developmental disabilities administration of
- 13 the department of social and health services shall track and monitor
- 14 the following items and make the deidentified information available
- 15 to the office of the developmental disabilities ombuds created in RCW
- 16 43.382.005, the legislature, the Washington state hospital
- 17 association, and the public upon request:
- 18 (a) Information about clients receiving services from a provider
- 19 who are taken or admitted to a hospital. This includes:
- 20 (i) The number of clients who are taken or admitted to a hospital
- 21 for services without a medical need;
- 22 (ii) The number of clients who are taken or admitted to a
- 23 hospital with a medical need, but are unable to discharge once the
- 24 medical need is met;
- 25 (iii) Each client's length of hospital stay for nonmedical
- 26 purposes;
- 27 (iv) The reason each client was unable to be discharged from a
- 28 hospital once the client's medical need was met;
- 29 (v) The location, including the type of provider, where each
- 30 client was before being taken or admitted to a hospital; and
- 31 (vi) The location where each client is discharged.
- 32 (b) Information about clients who are taken or admitted to a
- 33 hospital once the client's provider terminates services. This
- 34 includes:
- 35 (i) The number of clients who are taken or admitted to a hospital
- 36 for services without a medical need;

- 1 (ii) The number of clients who are taken or admitted to a 2 hospital with a medical need, but are unable to discharge once the 3 medical need is met;
- 4 (iii) Each client's length of hospital stay for nonmedical 5 purposes;
- 6 (iv) The reason each client was unable to be discharged from a hospital once the client's medical need was met;
 - (v) For each client, the reason the provider terminated services;
- 9 (vi) The location, including the type of provider, where each 10 client was before being taken or admitted to a hospital; and
 - (vii) The location where each client is discharged.

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- 12 (2) A provider must notify the department when a client is taken 13 or admitted to a hospital for services without a medical need and 14 when a client is taken or admitted to a hospital with a medical need 15 but is unable to discharge back to the provider, so that the 16 department may track and collect data as required under subsection 17 (1) of this section.
 - (3) The definitions in this subsection apply throughout this section unless the context clearly requires otherwise.
- 20 (a) "Hospital" means a facility licensed under chapter 70.41 or 21 71.12 RCW.
 - (b) "Provider" means a certified residential services and support program that contracts with the developmental disabilities administration of the department of social and health services to provide services to administration clients. "Provider" also includes the state-operated living alternatives program operated by the administration."

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ADOPTED 04/17/2019

- On page 22, line 4, after "RCW;" insert "adding a new section to chapter 71A.12 RCW;"
 - EFFECT: (1) Requires the Department of Health to establish requirements for intensive behavioral health treatment facilities that include the ability to provide services and an appropriate level of care to persons with intellectual or developmental disabilities. Amends the work group established to recommend residential treatment options for youth with developmental disability and behavioral health

treatment needs to: Extend the report date to July 1, 2020; include short-term and long-term residential placements; include recommendations for adults as well as youth; and transfer the responsibility to create the recommendations to the Health Care Authority and Department of Social and Health Services, in consultation with specified stakeholders.

- (2) Subject to appropriation, requires the Developmental Disabilities Administration of the Department of Social and Health Services (DSHS) to track and monitor the following items and make deidentified information available to the DD Ombuds, Legislature, Washington State Hospital Association, and the public:
- (a) The number of clients receiving developmental disabilities services who are taken to a hospital;
- (b) The number of clients taken to a hospital once their developmental disability services are terminated by a provider;
- (c) For the clients in (a) and (b) of this subsection, whether or not the client had a medical need, their length of stay in the hospital, location, whether they experienced barriers to discharge, and for clients in (b) of this subsection, the reason for termination of provider services.
- (3) Requires developmental disabilities services providers to notify DSHS when a client is taken to the hospital without a medical need and when a client is admitted to a hospital with a medical need but is unable to discharge back to the provider.

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