
Health Care & Wellness Committee

HB 2448

Brief Description: Concerning enhanced services facilities.

Sponsors: Representatives Schmick, Chambers and Cody.

Brief Summary of Bill

- Modifies admissions standards for enhanced services facilities to require that the person be medically and physically stable and updates the behavior- and history-related factors that must be considered when determining eligibility for admission.
- Changes the scope of care provided by enhanced services facilities from a focus on treatment to support and services.

Hearing Date: 1/28/20

Staff: Chris Blake (786-7392).

Background:

Enhanced services facilities provide treatment and services to persons who do not have a medical need for acute inpatient treatment and have been determined by the Department of Social and Health Services (Department) to be inappropriate for placement in other licensed facilities because of complex needs that result in behavioral and security issues. Enhanced services facilities are licensed by the Department. There are currently four licensed enhanced services facilities with 52 beds.

Enhanced services facilities may only provide services to residents who are at least 18 years old. If an enhanced services facility serves any resident under 65 years old, the facility may not have more than 16 residents. A person may be admitted to an enhanced services facility if the person:

- requires either: (1) daily care by or under the supervision of a mental health professional, substance use disorder professional, or nurse; or (2) assistance with three or more activities of daily living;

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- has: (1) a mental disorder or substance use disorder, (2) an organic or traumatic brain injury, or (3) a cognitive impairment that results in symptoms or behaviors requiring supervision and facility services; and
- has at least two of the following: (1) self-endangering behaviors that are frequent or difficult to manage; (2) aggressive, threatening, or assaultive behaviors that are frequent or difficult to manage and create a risk to the health or safety of residents or staff or a significant risk to property; (3) intrusive behaviors that put residents or staff at risk; (4) complex medication needs that include psychotropic medications; (5) a history or likelihood of unsuccessful placements in other facilities or a history of rejected applications to other facilities based on the person's behaviors, history, or security needs; (6) a history of frequent or protracted mental health hospitalizations; or (7) a history of offenses against a person or felony offenses creating substantial property damage.

An enhanced services facility may only admit residents whose needs can be safely and appropriately met through its staff, services, equipment, security, and building design.

Enhanced services facilities must assure that residents have several specified rights available to them. These rights include:

- adequate care and individualized treatment;
- the allowance of treatment by spiritual means through prayer;
- a reasonable choice of qualified health care providers for evaluation and treatment;
- the waiving of physician-patient privilege and psychologist-client privilege in proceedings regarding the administration of antipsychotic medications;
- personal rights related to clothing, personal purchases, storage space, visitors, telephone access, letter writing materials, decision making authority over the administration of antipsychotic medications, participation in treatment plans, authority to not have psychosurgery, contracts, and complaints to advocacy organizations;
- refusal of placement in an enhanced services facility; and
- appeals of decisions regarding eligibility for placement in an enhanced services facility.

Summary of Bill:

The eligibility standards for admission to an enhanced services facility are modified. The eligibility requirements related to level of care needs and type of care needs remain substantially the same, but are modified to reference "behavioral health," rather than "mental health" or "substance use disorders" separately. The eligibility requirements related to the person having two or more behavior- and history-related factors is updated in several ways. First, the person must have been assessed as being medically and physically stable. In addition, the seven factors for admission are modified as follows:

- The three behavior-related factors that include self-endangering behaviors, aggressive or assaultive behaviors, and intrusive behaviors are eliminated and replaced with two more general behavior-related factors related to: (1) exhibiting serious challenging behaviors within the last year; and (2) requiring caregivers with training in providing behavioral supports to adults with challenging behaviors.
- The factor related to the person having complex medication needs removes the inclusion of psychotropic medications, and instead references the person's inability to manage their complex medications affecting their ability to live in the community.

- The two factors related to histories of unsuccessful placements or protracted mental health hospitalizations are generally unchanged, except that the unsuccessful placements may be based on the person's general needs, not just security needs.
- The factor related to a person's criminal history is eliminated.
- Two new factors are added related to: (1) the person residing at a state mental hospital or psychiatric unit of a hospital and being found ready to discharge, and (2) the person having a history of an inability to remain medically or psychiatrically stable for more than six months.

Several terms related primarily to the repealed admissions standards for enhanced services facilities are removed.

The provision of treatment is removed from the scope of care provided by enhanced services facilities and is replaced with support or services. Accordingly, references and definitions related to treatment and medical providers are removed. Each resident must receive an individualized behavior support plan, rather than treatment plan. Enhanced services facilities must have sufficient staff who are trained to provide the residents with appropriate care and support, rather than treatment. The care and support includes behavioral health support, rather than mental health treatment, and supervision, rather than security. The enhanced services facility must provide support to acquire chemical dependency treatment, rather than provide such treatment at the facility. In addition, an enhanced services facility must have skilled nursing and support to acquire medical and behavioral health treatment services, rather than have staff to provide medical or habilitative treatment at the facility.

The rights of residents are updated to provide them with involvement in their service planning, rather than treatment planning. A resident's right to receive evaluation and treatment from their choice of provider is removed. A resident's right to have physician-patient and psychologist-client privileges waived in proceedings regarding the administration of antipsychotic medications is removed. The resident's right to not consent to the administration of antipsychotic medications or performance of electroconvulsant therapy is changed to allow the refusal of any medications. The authority for antipsychotic medications to be administered over a resident's objection in certain circumstances is removed. The resident's right to not have psychosurgery performed on them is removed.

Appropriation: None.

Fiscal Note: Preliminary fiscal note available.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.