

SENATE BILL REPORT

SB 5807

As of January 19, 2022

Title: An act relating to improving behavioral health outcomes for adults and children by enhancing engagement of state hospitals with the patients, their family members, and natural supports.

Brief Description: Improving behavioral health outcomes by enhancing engagement of state hospitals.

Sponsors: Senators Warnick and Dhingra.

Brief History:

Committee Activity: Health & Long Term Care: 1/19/22 [w/oRec-BH].
Behavioral Health Subcommittee to Health & Long Term Care: 1/21/22.

Brief Summary of Bill

- Requires each state hospital to establish a Bureau of Family Experience (Bureau) by January 1, 2024, to enhance the engagement between state hospitals and a patient's family or natural supports.
- Requires each Bureau to offer support and training to family members or other caregivers, including access to the Psychosis REACH program and a trained family bridger.
- Requires the University of Washington to provided support to the Bureaus and to develop a training curriculum for family peer specialists.

SENATE COMMITTEE ON BEHAVIORAL HEALTH SUBCOMMITTEE TO HEALTH & LONG TERM CARE

Staff: Kevin Black (786-7747)

Background: State Hospitals. There are three state hospitals in Washington under the

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administration of the Department of Social and Health Services (DSHS): Western State Hospital and the Child Study & Treatment Center in Lakewood, and Eastern State Hospital in Medical Lake. The Child Study & Treatment Center treats minors aged 5 to 17 who are committed or referred for up to six months of inpatient treatment through the Children's Long-Term Inpatient Program, by managed care organizations or behavioral health administrative services organizations, or by the courts. The remaining two state hospitals treat adult involuntary patients who are either civilly committed for treatment through the Involuntary Treatment Act, or forensically committed for treatment related to criminal insanity or competency to stand trial through the criminal courts.

Psychosis REACH. Psychosis REACH is a family intervention for psychosis co-developed by faculty at the University of Washington Department of Psychiatry and Behavioral Sciences that delivers psychoeducation and illness management skills training to family caregivers in the community. The training, which is based in cognitive behavioral therapy principles, is currently offered to participants with an on-demand virtual training component followed by a live training event. Individuals who complete the training are provided access to a community board to connect with other caregivers who have completed the training. A family ambassador program offers family members who have completed the Psychosis REACH training program a structured opportunity to share their experiences, tips, and strategies with other families.

Family Bridger Program. The Family Bridger Program uses a model whereby families with lived experience with a loved one who has experienced psychosis are trained to provide support and resources to other families when their loved one with psychosis enters an emergency department, outpatient treatment, or inpatient care. The Family Bridger Program was developed at the University of Washington Department of Psychiatry and Behavioral Sciences using focus groups and a small-scale research study with support from anonymous donors, scheduled for dissemination in 2022.

Summary of Bill: Each state hospital must establish a Bureau of Family Experience (Bureau) by January 1, 2024, devoted to enhancing engagement between state hospitals and a patient's family or natural supports. The mission of the Bureau is to provide information, guidance, and support to family and caregivers to help them be effective in supporting the patient's recovery, and to provide a source of training for state hospital staff using cognitive behavioral therapy principles and the Psychosis REACH model.

The Bureau must establish contact with at least one family member or natural support identified by the patient and provide them with systems navigation information, education, and training, including a overview of state hospital systems, discharge process information, information about patient privacy, information about legal processes, and preparation to support the patient in the community. The Bureau must provide these persons with access to the Psychosis REACH training program and to family-to-family peer support from a family bridger. If the patient consents to the involvement of the family member or natural support in their care, the family member or natural support must also receive orientation to

visitation policies, guidance for communicating with the treatment team and the patient, and development of a family crisis support plan.

DSHS must contract with the University of Washington Department of Psychiatry and Behavioral Sciences to assist with the development of the Bureau. The staffing in each Bureau must include a director, one or more individuals licensed to provide social work or counseling services, and one or more individuals qualified to provide family peer specialist services. DSHS must develop a staffing ratio in consultation with the University of Washington.

The University of Washington must develop a training curriculum for family peer specialists by December 31, 2022.

Technical amendments clarify that the three state hospitals are Western State Hospital, Eastern State Hospital, and the Child Study & Treatment Center and update statutes to use respectful language.

Appropriation: None.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

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