

REPORT TO THE LEGISLATURE

House Bill 1086 Implementation Final Report

Engrossed Second Substitute House Bill 1086

June 30, 2023

Behavioral Health Administration
PO Box 45050
Olympia, WA 98504-98504
(360) 902-7792
<http://www.dshs.wa.gov/bha>

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EXECUTIVE SUMMARY

In 2021, the Legislature passed Engrossed 2nd Substitute House Bill 1086, creating the Office of Behavioral Health Consumer Advocacy. The non-profit organization PeerWA will operate as the Office of Behavioral Health Advocacy (OBHA). The OBHA contract went into effect on July 1, 2022. The Department of Social and Health Services (DSHS) has requirements to collaborate with OBHA and provide reports as to patient complaints and investigations. ESSB 5092 included proviso language which directs DSHS to submit a preliminary and final report on the number of monthly cases and follow-up investigations by December 1, 2022, and June 30, 2023, respectively. This report serves as the final report.

DSHS DUTIES FROM HOUSE BILL 1086

The Office of the Secretary of Department of Social and Health Services employs one Ombuds for The Special Commitment Center and the Behavioral Health Administration employs an Ombuds for the three state hospitals: Child Study and Treatment Center (CSTC), Eastern State Hospital (ESH), and Western State Hospital (WSH).

The BHA Patient Rights Ombuds was initially dedicated solely to patients receiving forensic services at ESH and WSH. The creation of OBHA and associated increased requirements for DSHS expanded the position to include both forensic and civil patients at the three state hospitals. This position now leads the BHA Office of the Patient Rights Ombuds (OPRO) and oversees two additional ombuds positions, one for ESH and one for WSH and CSTC. The Special Commitment Center Ombuds position is not affiliated with BHA OPRO.

In mid-September, OPRO met with OBHA to discuss our working relationship directed by E2SHB 1086. Additionally, we began collaboration on how both agencies would best fulfill the rest of the legislative requirements. Over the course of the next few months, DSHS worked with DSHS Contracts department to form a Data Sharing Agreement. This Agreement was signed by DSHS and OBHA in March 2023.

The DSHS/OBHA collaboration and systems creation processes are nearly complete. Upon request in March 2023, OBHA was provided contact information for every patient housing unit. This will assist OBHA's ability to quickly ascertain patient Releases of Information (ROI) allowing DSHS to conduct the required investigations and provide outcomes to OBHA.

LEGISLATIVE APPROVED EXPENDITURES AND DSHS REQUIREMENTS

The legislature approved \$360,000 from the General Fund for DSHS to implement E2SHB 1086. With these funds, DSHS created three new positions: two new Ombuds positions and one Management Analyst 4 position.

Budget Proviso:

“(t) \$360,000 of the general fund—state appropriation for fiscal year 2023 is provided solely for the department to implement Engrossed Second Substitute House Bill No. 1086 (behavioral health consumers). The amount in this subsection is provided solely for the

department's costs associated with providing access to and following up on referrals from behavioral health consumer advocates in state operated mental health facilities. The department must track the number of monthly cases in which access to behavioral health consumer advocates was provided for patients in state operated mental health facilities and the number of these which resulted in subsequent follow-up investigation by the department. The department must submit a preliminary report to the office of financial management and the appropriate committees of the legislature on the number of monthly cases and follow-up investigations by December 1, 2022, and a final report by June 30, 2023.”

From June to August 2022, DSHS posted job openings to fulfill the mandate to complete implementation of E2SHB 1086. In August, a WMS position titled “WSH Ombuds” was hired. The management analyst was hired in September and the final WMS position, ESH Ombuds, was filled in October.

In January 2023, DSHS began accepting referrals from OBHA. OPRO developed a comprehensive database to track types of complaints, complaints specific to facility, origin of complaints, number of complaints that needed follow-up or investigation, and complaint resolution (if appropriate pursuant to HIPPA constraints). Since January, there have been few referrals and none that OBHA required follow-up on. As OBHA increases its presence at the state hospitals, OPRO expects these referrals to increase substantially.

COMMUNICATION PLAN

OPRO implemented a communication and outreach initiative to ensure that patients, staff, and family members have information as to what the OBHA does, how to reach it, and how to file a complaint. DSHS is in the process of posting OBHA contact information at the state psychiatric hospitals and on the patient housing units. OPRO is hopeful this process will be completed in Summer 2023. Once patients and families have OBHA contact information, it is expected calls, complaints, and concerns will come in with regularity.

BHA/OPRO created a website presence that will allow family and community members to report complaints and give the public further information about the role of the OPRO. This work will be done in conjunction with OBHA to help ensure patients and families have access to that office as well.

CONCLUSION

DSHS is working collaboratively with OBHA as outlined in E2SHB 1086. The MOU/DSA was executed in March 2023, and outlines the duties and expectations of both DSHS and OBHA. DSHS will be fully operational in its requirements within E2SHB 1086 once OBHA has its systems fully functional and their internal process established once they are more well established at the state hospitals.