

Washington State Department of Social and Health Services

# Transforming Lives

## REPORT TO THE LEGISLATURE

### **Interim Report on Transitions from Western State Hospital into Aging and Long-Term Support Administration Settings**

ESSB 6656 Section 11

December 1, 2016

Aging and Long-Term Support Administration  
Home and Community Services/Community Living and Systems Support  
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## Executive Summary

The mission of the Aging and Long-Term Support Administration (AL TSA) is to transform lives by promoting choice, independence and safety through innovative services.

This interim report is submitted in response to the following requirement outlined in ESSB 6656, Section 11 (2) and (3) that reads as follows:

The Department of Social and Health Services (DSHS) must identify discharge and diversion opportunities for patients needing long-term care to reduce the demand for thirty beds currently being used for this population. A twenty-bed reduction must be realized by July 1, 2016, with a utilization reduction of ten additional beds by January 1, 2017. The resources being used to serve these beds must be reinvested within the state hospital budget in order to achieve patient and staff safety improvement goals.

DSHS must provide a progress report to the governor and relevant committees of the legislature by December 1, 2016 and a final report by August 1, 2017, describing the outcomes for these patients through June 30, 2017.

AL TSA works with Behavioral Health Organizations (BHO), Western State Hospital (WSH) and community providers when the state hospital identifies that an individual who is ready for discharge may have an unmet need for assistance with personal care services. AL TSA offers a variety of settings in which to receive personal care services and tailors these services to each individual's needs, goals and preferences. Individuals served in AL TSA settings receive mental health services through the state's Managed Care Organizations and Behavioral Health Organizations.

For the period of April 1, 2016 through October 31, 2016, AL TSA assisted in the relocation of **67** people. Of those, **58** were assessed as needing services funded through AL TSA and discharged with those services in place. The other **9** individuals were discharged from the hospital after a referral to AL TSA, but did not move into services provided by AL TSA, as their needs are being met by family or through other fund sources.

Of the **58** people discharged with AL TSA services, **53** or **92%** have a diagnosis of a severe and persistent mental illness. **62%** had no affiliation with AL TSA prior to their referral for discharge support from the state hospital or from another mental health setting. The remaining **38%** who had prior support from AL TSA while in the community have also had extensive histories with the mental health system.

In a review of admissions into WSH in 2015 and 2016 only 7% and 4% respectively had any history of services with AL TSA prior to the state hospital admission.

## Interim Report on Transitions from Western State Hospital into Aging and Long-Term Support Administration Settings

### Status of ALTSA Progress on Transitions between April 1 and October 31, 2016:

For the period of April 1, 2016 through October 31, 2016, ALTSA assisted in the relocation of **67** people. Of those, **58** were assessed as needing services funded through ALTSA and discharged with those services in place. The other **9** individuals were discharged from the hospital after a referral to ALTSA, but did not move into services provided by ALTSA, as their needs are being met by family or through other fund sources.

Under its Medicaid programs, ALTSA provides skilled nursing facility services and community alternatives to skilled nursing facilities. Alternatives to skilled nursing facilities are an individual's own home, or a licensed residential setting which includes adult family homes, assisted living facilities and enhanced services facilities. These settings all provide assistance with personal care services which includes activities of daily living such as bathing, dressing, mobility and medication assistance as well as instrumental activities of daily living such as meal preparation, housekeeping and essential shopping.

The chart, below, details the transitions from Western State Hospital between April 1-October 31, 2016 in which individuals relocated and were determined eligible for personal care assistance under ALTSA's Medicaid-funded programs:

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| SETTING                | King<br>County<br>BHO | North<br>Sound<br>BHO | Pierce<br>County<br>BHO | Salish<br>BHO | SW WA<br>RSA | Thurston<br>BHO | WSH to<br>HCS<br>Totals |
|------------------------|-----------------------|-----------------------|-------------------------|---------------|--------------|-----------------|-------------------------|
| AFH                    | 2                     |                       | 2                       |               | 1            |                 | 5                       |
| AFH-ECS                | 6                     | 7                     | 3                       | 1             | 3            | 5               | 25                      |
| AFH-RSN                | 4                     |                       | 2                       |               | 1            |                 | 7                       |
| AFH-SBS                |                       | 1                     | 3                       |               | 1            | 1               | 6                       |
| ALF-ECS                |                       |                       | 1                       |               |              |                 | 1                       |
| ESF                    | 1                     |                       | 3                       |               | 5            | 2               | 11                      |
| in-home                | 1                     |                       |                         |               | 1            |                 | 2                       |
| SNF                    |                       |                       | 1                       |               |              |                 | 1                       |
| <b>Grand<br/>Total</b> | <b>14</b>             | <b>8</b>              | <b>15</b>               | <b>1</b>      | <b>12</b>    | <b>8</b>        | <b>58</b>               |

#### Key to Chart:

Adult Family Home: Adult Family Homes (AFHs) are residential homes licensed to care for two to six residents. The homes are private businesses and provide the residents with a room, meals, laundry, supervision and personal care. The services provided to residents depend on the needs of each individual resident and the skill level of the provider. Some homes are able to provide nursing services or other special care and services. The cost of care varies depending on the level of care the resident requires.

Adult Family Home-ECS: Adult Family Homes with Expanded Community Services (ECS) provide AFH services as described above and also includes behavior support services from an outside contractor to work with the client and AFH caregivers to provide training and consultation on behavior triggers and de-

escalation techniques. This service also provides a rate enhancement to the provider for additional training, service planning and coordination activities with the provider of the behavioral support services.

Adult Family Home-BHO: Adult Family Homes where an exception to rate (ETR) is supported by the BHO.

Adult Family Home-SBS: Adult Family Homes with Specialized Behavior Support (SBS) provide AFH services, described above, and also includes behavior support services from an outside contractor to work with the client and AFH caregivers to provide training and consultation on behavior triggers and de-escalation techniques. The SBS contract provides an add-on rate to the AFH that funds additional staffing of 6-8 hours a day of caregiver staff to supplement the current staffing ratio in the AFH.

Assisted Living Facility-ECS: An Assisted Living Facility (ALF) is a privately-operated community setting licensed by DSHS to care for seven or more residents. ALFs provide housing, personal care services, some intermittent nursing services, and assume general responsibility for the safety and well-being of the resident. An ALF with an ECS includes behavior support services from an outside contractor to work with the client and ALF caregivers to provide training and consultation on behavior triggers and de-escalation techniques. The ALF-ECS contractor receives a rate enhancement for additional training, service planning and coordination activities with the provider of the behavioral support services.

Enhanced Services Facility (ESF): This new type of licensed residential facility is privately-operated and uses high staffing ratios and behavioral and environmental interventions to serve individuals who are no longer receiving active treatment at a state psychiatric hospital. These facilities offer behavioral support, personal care services with high staffing ratios and nursing, a combination that is not generally provided in other licensed long-term care settings. While behavior support is provided within the facility, the client continues to receive behavioral health services through the BHO. A facility may be licensed to serve up to 16 residents.

In-home: Personal care services are provided by a paid caregiver in a person's own home.

Nursing Facility: A Skilled Nursing Facility (SNF), or nursing home, provides 24-hour supervised nursing care, personal care, therapy nutrition management, organized activities, social services, room, board, and laundry.

Behavioral Health Organization (BHO) and SW Washington Regional Service Area (RSA): These organizations replaced former Regional Support Networks in April of 2016. BHOs and SW WA RSA contract with DSHS to purchase and administer mental health and substance use disorder treatment through managed care organizations for people with Medicaid coverage.

## **Demographics of those who have moved onto ALTSA services since April 1, 2016:**

Of the **58** people discharged with ALTSA services, **53** or **92%** have a diagnosis of a severe and persistent mental illness. **62%** had no affiliation with ALTSA prior to their referral for discharge support from the state hospital or from another mental health setting. The remaining **38%** who had prior support from ALTSA while in the community also have extensive histories with the mental health system due to severe and persistent mental health diagnoses.

The youngest person to move during this seven month period is 24 years old; the oldest is 82 years old. The median age of those who have moved is 55 years old.

In a review of admissions into WSH in 2015 and 2016 only 7% and 4% respectively had any history of services with ALTSA prior to the state hospital admit.

**Outcomes of those who have moved since April 1, 2016:**

As **of October 31, 2016**, the majority of the 58 individuals supported by ALTSA remain in their original placement, with the following exceptions:

- One individual who had Alzheimer's-related dementia was admitted to the hospital shortly after a move to an AFH; the individual returned to the AFH and died after a referral to hospice;
- Two individuals moved from AFH settings to skilled nursing facilities:
  - One moved to a SNF after a medical decline related to non-compliance with medical advice; and
  - One moved related to an expected decline in medical condition.
- One individual who was in an AFH with ECS services was detained to a local psychiatric bed and subsequently moved in with a family member and has chosen not to receive ALTSA-funded personal care.
- One individual who moved to an ESF was admitted to a medical hospital for psychiatric evaluation and a co-occurring medical need. That client remains at the medical hospital with an expectation of a return to the ESF once medically cleared.

**Diversion Activities:**

An additional 20 people have been assessed by ALTSA while in local evaluation and treatment facilities or local psychiatric beds and have relocated from those beds onto ALTSA-funded services.

**Enhanced Services Facility Update:**

In September 2016, the first ESF serving clients from WSH was licensed. Through October 31, 2016, **11** people have moved into the ESF from WSH. A twelfth client had been scheduled to move in mid-October but is not currently ready for discharge. Staff from WSH and ALTSA worked with the provider to identify another patient who is ready for discharge. The individual will move into the ESF when all transition planning activities are complete.