\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ENGROSSED SECOND SUBSTITUTE SENATE BILL 5243**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**State of Washington 64th Legislature 2015 Regular Session**

**By** Senate Ways & Means (originally sponsored by Senators Honeyford, King, Keiser, Conway, and Chase)

AN ACT Relating to services provided by residential habilitation centers; and amending RCW 71A.20.180.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

**Sec.**  RCW 71A.20.180 and 2011 1st sp.s. c 30 s 6 are each amended to read as follows:

((~~(1) By December 31, 2011, the department shall:~~

~~(a) Close Frances Haddon Morgan residential rehabilitation center and relocate current residents consistent with the requirements of section 7 of this act; and~~

~~(b) Establish at least two state operating living alternatives on the campus of the Frances Haddon Morgan center, if residents have chosen to receive care in such a setting and subject to federal requirements related to the receipt of federal medicaid matching funds.~~

~~(2)(a) Upon August 24, 2011, the department shall not permit any new admission to Yakima Valley School unless such admission is limited to the provision of short-term respite or crisis stabilization services. Except as provided in (b) of this subsection, no current permanent resident of Yakima Valley School shall be required or compelled to relocate to a different care setting as a result of chapter 30, Laws of 2011 1st sp. sess.~~

~~(b)~~)) (1)(a) The Yakima Valley School shall ((~~continue to~~)) operate as a residential habilitation center ((~~until such time that the census of permanent residents has reached sixteen persons. As part of the closure plan, at least two cottages will be converted to state-operated living alternatives, subject to federal requirements related to the receipt of federal medicaid matching funds~~)). The Yakima Valley School must operate crisis stabilization beds and respite service beds as the capacity of the school allows and as the needs of the community require, subject to the availability of amounts appropriated for this specific purpose.

(b) As of the effective date of this section, no new long-term admissions are permitted.

((~~(3) To assure the successful implementation of subsections (1) and (2) of this section,~~)) (2) The department, within available funds:

(a) Shall establish state-operated living alternatives, within funds specifically provided in the omnibus appropriations act, to provide community residential services to residential habilitation center residents transitioning to the community under chapter 30, Laws of 2011 1st sp. sess. who prefer a state-operated living alternative. The department shall offer residential habilitation center employees opportunities to work in state-operated living alternatives as they are established;

(b) May use existing supported living program capacity in the community for former residential habilitation center residents who prefer and choose a supported living program;

(c) ((~~Shall continue to staff and operate at Yakima Valley School crisis stabilization beds and respite service beds at the existing bed capacity as of June 1, 2011, for individuals with developmental disabilities requiring such services;~~

~~(d)~~)) Shall establish up to eight state-staffed crisis stabilization beds and up to eight state-staffed respite beds based upon funding provided in the omnibus appropriations act and the geographic areas with the greatest need for those services; ((~~and~~

~~(e)~~)) (d) Shall establish regional or mobile specialty services evenly distributed throughout the state, such as dental care, physical therapy, occupational therapy, and specialized nursing care, which can be made available to former residents of residential habilitation centers and, within available funds, other individuals with developmental disabilities residing in the community; and

(e) Shall continue to provide respite services in residential habilitation centers and continue to develop respite care in the community.

**--- END ---**