S-2547.1

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**SECOND SUBSTITUTE SENATE BILL 5483**

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**State of Washington 66th Legislature 2019 Regular Session**

**By** Senate Ways & Means (originally sponsored by Senators Braun, Keiser, Palumbo, Sheldon, Becker, Short, Wilson, C., Hunt, Kuderer, and Darneille)

AN ACT Relating to improving services for individuals with developmental disabilities; adding a new section to chapter 71A.12 RCW; creating a new section; and declaring an emergency.

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

NEW SECTION. **Sec.**  The legislature finds that:

(1) The office of the developmental disabilities ombuds is a private, independent office focused on improving the lives of persons with developmental disabilities in Washington state. It is the duty of the developmental disabilities ombuds to monitor procedures and services provided to people with developmental disabilities; review facilities and residences where services are provided; resolve complaints about services; and issue reports on the services provided.

(2) The office of the developmental disabilities ombuds has identified a systemic issue of adults with developmental disabilities being stuck in hospitals without any medical need because there is no alternative setting available to discharge the individual.

(3) Many of the individuals that are unable to discharge from the hospital are clients of the developmental disabilities administration of the department of social and health services. In some cases, these clients were receiving residential services and went to the hospital for a medical condition, but when the client was ready for discharge, their residential services provider had terminated services. Other clients were dropped off at the hospital by their residential service provider because the residential service provider could no longer manage the client's care.

(4) It is not in the public or the client's interest for hospitals to be used for clients that do not have medical needs. Further, changes must be made to the developmental disabilities administration's service delivery system to ensure clients have access to services that keep them in the community and prevent inappropriate hospital stays.

NEW SECTION. **Sec.**  A new section is added to chapter 71A.12 RCW to read as follows:

(1) Subject to the availability of amounts appropriated for this specific purpose, the department shall track and monitor the following items and make the deidentified information available to the office of the developmental disabilities ombuds created in RCW 43.382.005, the legislature, the Washington state hospital association, and the public upon request:

(a) Information about clients receiving services from a provider that are taken to a hospital. This includes:

(i) The number of clients that are taken to a hospital without a medical need;

(ii) The number of clients that are taken to a hospital with a medical need, but are unable to discharge once the medical need is met;

(iii) Each client's length of hospital stay for nonmedical purposes;

(iv) The reason each client was unable to be discharged from a hospital once the client's medical need was met;

(v) The location, including the type of provider, where each client was before being taken to a hospital; and

(vi) The location where each client is discharged.

(b) Information about clients that are taken to a hospital once their provider terminates services. This includes:

(i) The number of clients that are taken to a hospital without a medical need;

(ii) The number of clients that are taken to a hospital with a medical need, but are unable to discharge once the medical need is met;

(iii) Each client's length of hospital stay for nonmedical purposes;

(iv) The reason each client was unable to be discharged from a hospital once the client's medical need was met;

(v) For each client, the reason the provider terminated services;

(vi) The location, including the type of provider, where each client was before being taken to a hospital; and

(vii) The location where each client is discharged.

(2) A provider must notify the department when a client is taken to a hospital so that the department may track and collect data as required under subsection (1) of this section.

(3) A provider must notify the department before terminating services on the basis that the provider is unable to manage the client's care. Prior to a provider terminating services to a client because the provider is unable to manage the client's care, and subject to the availability of amounts appropriated for this specific purpose, the department shall provide crisis stabilization services to support the provider and the client in the client's current setting. These services may include:

(a) Psychological assessments, such as full scale intelligence quotient and risk assessments;

(b) Technical assistance and consultation on behavior supports for family caregivers, staff, and medical providers; and

(c) Therapeutic mental and behavioral health services.

(4) In the event that the provider is unable to manage the client's care after crisis stabilization services are provided, the provider may terminate services and, subject to the availability of amounts appropriated for this specific purpose, the department shall:

(a) Transition the client to another provider that meets the client's needs and preferences; or

(b) Transition the client to a residential habilitation center for crisis stabilization services until an alternative provider is determined.

(5)(a) The department shall be responsible for frequently and appropriately communicating with a hospital that is caring for a client without a medical need, and providing frequent updates on transitioning the client to a more appropriate setting.

(b) The department shall coordinate providing psychological and habilitative services to clients who are being cared for at a hospital without a medical need.

(c) Subject to the availability of amounts appropriated for this specific purpose, the department shall provide reimbursement at the daily residential habilitation center rate to any hospital that provides care for:

(i) A client without a medical need that is receiving services from a provider; or

(ii) A client without a medical need that is taken to the hospital once their provider terminated services.

(6) This section may not be construed to create a private right of action.

(7) The definitions in this subsection apply throughout this section unless the context clearly requires otherwise:

(a) "Administration" means the developmental disabilities administration of the department of social and health services.

(b) "Crisis stabilization services" has the same meaning as defined in RCW 71A.10.020.

(c) "Hospital" means a facility licensed under chapter 70.41 or 71.12 RCW.

(d) "Provider" means a certified residential services and support program that contracts with the administration to provide services to administration clients. "Provider" also includes the state-operated living alternatives program operated by the administration.

NEW SECTION. **Sec.**  This act is necessary for the immediate preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and takes effect immediately.

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