

SENATE BILL REPORT

SB 5646

As of February 16, 2017

Title: An act relating to services provided by residential habilitation centers.

Brief Description: Concerning services provided by residential habilitation centers.

Sponsors: Senators Honeyford, King, Chase, Keiser and Conway.

Brief History:

Committee Activity: Health Care: 2/13/17.

Brief Summary of Bill

- Requires Yakima Valley School to operate crisis stabilization and respite service beds as the capacity of the school allows and as the needs of the community require.
- Retains the prohibition on new admissions to Yakima Valley School and removes the requirement that it cease operating when its census reaches 16 persons.

SENATE COMMITTEE ON HEALTH CARE

Staff: Kathleen Buchli (786-7488)

Background: The Developmental Disabilities Administration within the Department of Social and Health Services (DSHS) provides support and services to persons with developmental disabilities. Services include case management, needs assessments, support in activities of daily living, employment, and rehabilitative therapies. DSHS also provides medical, dental, and pharmaceutical services to persons with developmental disabilities. Services may be provided in three different service settings: in the client's own home; in a community residential home; or in a Residential Habilitation Center (RHC). Washington operates four RHCs which are established in statute to provide services and housing for persons with developmental disabilities: Rainier School in Buckley; Lakeland Village in Medical Lake; Fircrest School in Shoreline; and Yakima Valley School in Selah. Another facility located in Bremerton, Francis Haddon Morgan, was closed on December 31, 2011.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Yakima Valley School was designated as a Nursing Facility in 1994. Currently, about 260 direct care and support staff provide 24-hour nursing care, a full spectrum of clinical and therapeutic programs, and recreation and activities to about 108 individuals who reside on campus. Yakima Valley School also offers planned respite services, which include medical, nursing, dental, therapeutic, dietary, psychiatric, and recreation programs. Beginning on August 24, 2011, new admissions, other than short-term respite or crisis stabilization services, have not been permitted to Yakima Valley School. Yakima Valley School continues to operate until the number of permanent residents reaches 16 people.

Summary of Bill: References to the now-closed Francis Haddon Morgan are removed from statute. Yakima Valley School is to continue to operate as an RHC, removing the requirement that it cease operating as an RHC when its census reaches 16 persons. The requirement that two cottages be converted to state-operated living alternatives as part of the closure plan is also removed. Rather than require Yakima Valley School to operate crisis stabilization and respite service beds at the bed capacity permitted on June 1, 2011, Yakima Valley School must operate crisis stabilization and respite service beds as the capacity of the school allows and the needs of the community require. This requirement is subject to appropriation.

The existing requirement that DSHS establish state-operated living alternatives is to be made within funds provided in the omnibus appropriations act. DSHS must continue to provide respite services in RHCs and continue to develop respite care in the community.

No new long-term admissions to Yakima Valley School are permitted.

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.

Staff Summary of Public Testimony: PRO: People who live in the RHCs do so because they need the services provided by the RHCs. Families need respite care and families in the central part of the state need the services at Yakima Valley. There is a need for crisis beds and for respite beds. We need sufficient crisis and respite care to serve the central part of the state.

CON: The focus of the bill is to build up Yakima Valley with respite, but Yakima Valley is too far away from most families to be able to use it for respite. People want these services in the community. RHCs costs more money to operate than services in the community and it does not make sense to use them for respite. People do not want to seek services at RHCs; they do not want to go in and end up staying there for longer than what is necessary. The people who live at Yakima Valley should get to stay if they choose, but we are concerned about staying there for the long-term. We need more community-based respite beds.

Other: People at Yakima Valley do not leave; they need services 24 hours a day. Respite is an issue for families who do want to use Yakima Valley for respite. Good care comes from stable staff.

Persons Testifying: PRO: Terri Anderson, Friends of Fircrest & VOR; Saskia Davis, ActionDD; Kent Questad PhD, Friends of Fircrest / Psychologist.

CON: Margaret-Lee Thompson, the Arc of United States Board, retired; Diana Stadden, the Arc of WA; Noah Seidel, Self advocates in leadership.

OTHER: Julianne Moore, WFSE.

Persons Signed In To Testify But Not Testifying: No one.