

SENATE BILL REPORT

ESB 5646

As Passed Senate, June 27, 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, 2/16/17 [DP-WM, DNP, w/oRec].

Ways & Means: 3/15/17, 3/20/17 [DP, DNP, w/oRec].

Floor Activity:

Passed Senate: 4/11/17, 48-1.

Third Special Session: Passed Senate: 6/27/17, 46-1.

Brief Summary of Engrossed Bill

- Requires Yakima Valley School to operate crisis stabilization and respite service beds as needs of the Department of Social and Health Services-identified catchment area or emergency placement needs require.
- Retains the prohibition on new admissions to Yakima Valley School and provides that the school cease operating when its census reaches eight persons.

SENATE COMMITTEE ON HEALTH CARE

Majority Report: Do pass and be referred to Committee on Ways & Means.

Signed by Senators Rivers, Chair; Becker, Vice Chair; Cleveland, Ranking Minority Member; Kuderer, Assistant Ranking Minority Member; Bailey, Baumgartner, Conway, Keiser, Miloscia, Mullet and Walsh.

Minority Report: Do not pass.

Signed by Senator Fain.

Minority Report: That it be referred without recommendation.

Signed by Senator O'Ban.

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.

Staff: Kathleen Buchli (786-7488)

SENATE COMMITTEE ON WAYS & MEANS

Majority Report: Do pass.

Signed by Senators Braun, Chair; Brown, Vice Chair; Honeyford, Vice Chair, Capital Budget ; Ranker, Ranking Minority Member; Frockt, Assistant Ranking Minority Member, Capital Budget; Bailey, Becker, Conway, Keiser, Padden, Pedersen, Rivers, Schoesler, Warnick and Zeiger.

Minority Report: Do not pass.

Signed by Senator Rolfes, Assistant Ranking Minority Member, Operating Budget.

Minority Report: That it be referred without recommendation.

Signed by Senators Billig, Carlyle, Darneille and Hasegawa.

Staff: James Kettel (786-7459)

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.

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 Engrossed Bill: References to the now-closed Francis Haddon Morgan are removed from statute. Yakima Valley School is to cease operating as an RHC when its census reaches eight persons, rather than 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 needs of the DSHS-identified catchment area or as emergency placement needs 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 (Health Care): 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 (Health Care): 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 (Health Care): No one.

Staff Summary of Public Testimony (Ways & Means): PRO: There are a lot of naïve assumptions about people living in RHCs. There must be some place for individuals to go when there is no other available setting. It makes sense to keep YVS available for short-term admissions, or crisis stabilization. This legislation is also fiscally sound. A three-bed crisis stabilization unit in the community was too expensive. Using the staff and space at an RHC for crisis stabilization makes more sense. A broad array of services to meet the needs of

clients is very important, including the availability of employment services and community access services.

CON: YVS has enough beds. People who do not live in Yakima should have respite available in their own community. It can be very scary to go into RHC care. It is much easier if respite is provided closer to a person's home. Providing respite in an institutional setting does not help people. When individuals are having a meltdown, being placed into an institutional setting does not help them control their emotional swings. People in the institutional setting have been assaulted. The RHCs are not a safety net. The RHCs are scary and people lose their freedoms. Respite is an important service for families, but it needs to be available in local communities. It is not a break when it takes two days to travel back-and-forth from YVS. Respite provided on the RHC campuses is too expensive. The Olmstead decision says that people need to have a choice to live in the least restrictive setting possible. People also need to have a choice to live in the institution. In this state, there is only really one choice, because the institutions receive more funding. It is traumatizing to be dropped off for respite at an institution. RHCs only use people for money. RHCs are a waste of taxpayer dollars. Sometimes people living in the RHCs do not receive proper care. It is almost a 900-mile drive from Bellingham to Yakima and back. It does not make sense to have these services in Yakima, because the services are too far away from many families. Using individual providers to provide respite services save money.

OTHER: Several of the RHCs have had trouble over the past few years. The state has put money into the RHCs but there continue to be problems.

Persons Testifying (Ways & Means): PRO: Senator Jim Honeyford, Prime Sponsor; Loren Freeman, Freeman & Associates; Lindsey Grad, SEIU Healthcare 1199NW; William Anderson, Friends of Fircrest; Terri Anderson, Friends of Fircrest - Board.

CON: Diana Stadden, The Arc of WA; Doreen VanderVort, Parent; Ivanova Smith, People First of Washington; Kyle Matheson, Shoreline People First Advisor; Noah Seidel, Self Advocates in Leadership; Robert Werdell, citizen; Eric Matthes, Self Advocates in Leadership; Cathy Murahashi, The Arc of King County; Anthony Nash, Self Advocates in Leadership; Margaret-Lee Thompson, Parent Advocate; Katherine Thorn, citizen.

OTHER: Julianne Moore, Washington Federation of State Employees; Matt Zuvich, Washington Federation of State Employees.

Persons Signed In To Testify But Not Testifying (Ways & Means): No one.