Single Bed Certification Quarterly Update

April 2019

General

A Single Bed Certification (SBC) allows a person to be detained under the mental health criteria of the Involuntary Treatment Act when there are no available certified Evaluation and Treatment (E&T) facility beds. The detained person is able to temporarily receive involuntary inpatient mental health treatment services from a licensed facility that is not currently certified as an E&T facility for up to 30 days, under WAC 388-865-0500. The Behavioral Health Organization (BHO), Behavioral Health Administrative Support Organization (BH-ASO) or its designee (Designated Crisis Responder) must submit a written request for the SBC to the local state hospital. The SBC rule requires the facility named in the SBC be willing and able to provide timely and appropriate mental health treatment in order to not be considered boarding; which was found to be a violation of a person’s civil liberties in the Supreme Court decision, In re detention DW et al.

The use of SBC continues to rise overall since December 2014. However, in the past two months there has been a decrease in total number of SBC.
As a direct result of the practice in King County of using SBC for all detentions, King County continues to use about 400 more SBCs than any other region.
SBCs are also used when an E&T facility is unable to transfer its patient with an order for 90 or 180 days more restrictive involuntary treatment to one of the state hospitals. The SBC allows the E&T facility to provide long-term involuntary treatment temporarily. As proportionally consistent, most of the SBCs are for orders of 90-day commitment for involuntary inpatient treatment.
The average percentage of youth to adult use of SBC went down during this quarter from 2.7% which is below the historical average of 3.7%.
Unavailable Detention Facilities Reports (No Bed Reports)

When a Designated Crisis Responder determines a person meets criteria for involuntary inpatient treatment due to a mental disorder or a substance use disorder, but is unable to detain the person at risk due to the lack of an available bed at an E&T facility or a Secure Withdrawal Management and Stabilization facility, and the person cannot be served by the use of SBC, the Designated Crisis Responder is required to make a report to the authority within 24 hours stating they were unable to detain the person due to the lack of a certified involuntary inpatient treatment bed.

Statewide No Bed Reports by Month:
April 2018 to March 2019

January 2019 was the high point for the entire history of No Bed Report data. This was due in part to the use of Acute Beds for Long Term Treatment. Though in the past two months the number of No Bed Reports again decreased.
Great Rivers region submitted the most No Bed Reports with 56 reports for the past three months. North Sound followed with 25 No Bed Reports submitted in the past three months.
There were 18 No Bed Reports for Substance Use in comparison to 139 No Bed Reports for mental health.
Eight of the 28 total No Bed Reports were submitted due to the lack of access to a Secure Withdrawal Management and Stabilization facility bed in March of 2019.

For information regarding this report, contact Robby Pellett at peller2@hca.wa.gov.