Involuntary Treatment Act for Substance Use Disorders
Secure Withdrawal Management Report
July 1, 2020 to September 30, 2020

Background

On April 1, 2018, two changes in the adult and youth Involuntary Treatment Act (ITA) for Substance Use Disorders (SUD) went into effect.

1. Designated mental health professionals became designated crisis responders (DCRs).

2. Community members who are a danger to themselves or others, other's property, or gravely disabled due to a drug or alcohol problem may be involuntarily detained to a secure withdrawal management and stabilization (SWMS) facility.

There are three facilities that currently provide SWMS' services: American Behavioral Health Services (ABHS), located in Chehalis; ABHS Cozza, located in Spokane; and Valley Cities, located in Kent.

Capacity and Average Daily Census

The SWMS bed capacity varies by facility, currently at 61 beds. A total of 233 individuals were served between July 1 and September 30, 2020. In the reporting period, the Average Daily Census (ADC) increased from 26 in July to 36 in September. The bed utilization rates varied from 43% in July to 58% in September.

<table>
<thead>
<tr>
<th>Facility</th>
<th>Capacity</th>
<th>Clients Served: Past 3 Months</th>
<th>July-20</th>
<th>August-20</th>
<th>September-20</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>ADC</td>
<td>% Capacity</td>
<td>ADC</td>
</tr>
<tr>
<td>ABHS Chehalis</td>
<td>21</td>
<td>61</td>
<td>7.613</td>
<td>36.25%</td>
<td>11.097</td>
</tr>
<tr>
<td>ABHS Cozza</td>
<td>24</td>
<td>118</td>
<td>13.774</td>
<td>57.39%</td>
<td>15.839</td>
</tr>
<tr>
<td>Valley Cities</td>
<td>16</td>
<td>54</td>
<td>4.742</td>
<td>29.64%</td>
<td>5.194</td>
</tr>
<tr>
<td>All Facilities</td>
<td>61</td>
<td>233</td>
<td>26</td>
<td>42.83%</td>
<td>32</td>
</tr>
</tbody>
</table>

1 Data Sources: SWMS Facilities, July to September 2020. Data provided by the SWMS facilities between April 2018 and September 2020 are limited, which provide for limited capacity to fully describe general service activity at each site (e.g., quarterly admissions, discharges, length of stay, average daily census). Moreover, some data elements were either partly or largely unreported over the course of the SWMS program (e.g., Legal Status at Discharge). Due to these data limitations, the reporting of experiences of patients served in secure withdrawal management may not be as complete for the initial reporting of the program. We anticipate that data collection and submissions moving forward will yield more robust data, which will mitigate these limitations in future reporting.

2 Bed utilization rates are rounded to the next integer, for purposes of illustration for the ADC table.
Admissions

There were 220 admissions to SWMS between July 1 and September 30, 2020. Clients enrolled via Molina Healthcare comprised the highest percentage admitted (39%) to SWMS during the reporting period.

Admissions vary by gender and age grouping (all adults). Males (55%), and persons ages 25-44 (60%) comprised most admissions during the reporting period.

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3 Indicates a person’s self-identified gender.
Admissions by month were relatively stable up until June 2020, when ABHS Chehalis temporarily halted SWMS operations.

Admissions to SWMS varied by rural v. urban counties of detention\(^4\), and by the geographic area (Eastern Washington, Western Washington). Clients whose county of detention was located in Eastern Washington comprised the majority (61%) of SWMS admissions during the reporting period. Admissions from urban counties of detention outnumbered admissions from rural counties by more than 2 to 1 (70% [urban] v. 30% [rural]).

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\(^4\) Rural counties with admissions during the reporting period include Asotin, Chelan, Clallam, Cowlitz, Franklin, Grant, Grays Harbor, Island, Kittitas, Klickitat, Lewis, Mason, Pend Oreille, Skagit, Stevens, Walla Walla, and Yakima counties. Urban counties with admissions during the reporting period include Benton, Clark, King, Kitsap, Pierce, Snohomish, Spokane, and Whatcom counties. **Source:** Washington Department of Health, based on population data from Washington State Office of Financial Management, April 2017 (DOH 609-003).
Admissions whereby clients presented with **Alcohol-Related SUD diagnoses** comprised the majority (48%) of SWMS admissions during the reporting period.

**SWMS Admissions by SUD Diagnostic Group:**
**July to September 2020**

- Alcohol-Related SUD: 48%
- Other Stimulant-Related SUD: 19%
- Other Substance-Related SUD: 33%

**Discharges**

There were **219 discharges** from SWMS between July 1 and September 30, 2020. **Clients enrolled via Molina Healthcare** comprised the highest percentage discharged (37%) from SWMS during the reporting period.

**SWMS Discharges by Submitter:**
**July to September 2020**

- Molina: 37%
- Amerigroup: 14%
- CHPW: 18%
- Coordinated Care: 6%
- Greater Columbia: 9%
- Other Plan_BHO_Need: 5%
- Other: 6%
- Not Reported/Unknown: 3%

*“Other Plan_BHO_Need” includes Beacon, North Sound, Salish, Spokane, Thurston-Mason, and United Health.  
“Other” includes Inactive, Medicare, Native American, and No Insurance.*

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5 SUD Diagnostic Groups are comprised of ICD-10 diagnoses that signify substance use, abuse, or dependence. “Other Stimulant-Related SUD” is synonymous with use, abuse, or dependence of amphetamines, methamphetamine, other psychostimulants (i.e., therapeutics such as mixed amphetamine [e.g., Adderall], methylphenidate [e.g., Ritalin], or modafinil [e.g., Provigil]), and caffeine. “Other Substance-Related SUD” includes diagnoses related to cocaine, inhalants, opioids, and sedatives/hypnotics/anxiolytics.
The overall **average length of stay** (LOS) was **13 days**. The LOS varies by gender and facility.

![Average LOS in SWMS: July to September 2020](chart)

Discharges from SWMS varied by **rural v. urban counties of detention**[^6], and by the geographic area (Eastern Washington, Western Washington). Clients whose county of detention was located in **Eastern Washington** comprised the majority (60%) of SWMS discharges during the reporting period. Discharges from **urban counties of detention** outnumbered discharges from rural counties by more than 2 to 1 (69% [urban] v. 31% [rural]).

![SWMS Discharges: July to September 2020](chart)

[^6]: Rural counties with admissions during the reporting period include Asotin, Chelan, Clallam, Cowlitz, Franklin, Grant, Grays Harbor, Island, Kittitas, Klickitat, Lewis, Mason, Pend Oreille, San Juan, Skagit, Stevens, Walla Walla, and Yakima counties. Urban counties with admissions during the reporting period include Benton, Clark, King, Kitsap, Pierce, Snohomish, Spokane, and Whatcom counties. **Source:** Washington Department of Health, based on population data from Washington State Office of Financial Management, April 2017 (DOH 609-003).
The supermajority (91%) of SWMS discharges had “Voluntary” as the **Legal Status** at the point of discharge.

* "Other" includes 14/90-Day LRA orders and custody transfers.