

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 **SWMS¹** 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 **218 individuals were served** between July 1 and September 30, 2020². In the reporting period, the **Average Daily Census (ADC)** increased from **26 in July** to **36 in September**. The **bed utilization rates³** varied from **43%** in July to **58%** in September.

Facility	Capacity	Cases:	Clients Served:	July-20		August-20		September-20	
		Past 3 Months 2	Past 3 Months 2	ADC	% Capacity	ADC	% Capacity	ADC	% Capacity
ABHS Chehalis	21	61	60	7.613	36.25%	11.097	52.84%	10.143	48.30%
ABHS Cozza	24	118	111	13.774	57.39%	15.839	65.99%	15.800	65.83%
Valley Cities	16	54	52	4.742	29.64%	5.194	32.46%	9.633	60.21%
All Facilities	61	233	218	26	42.83%	32	52.67%	36	58.32%

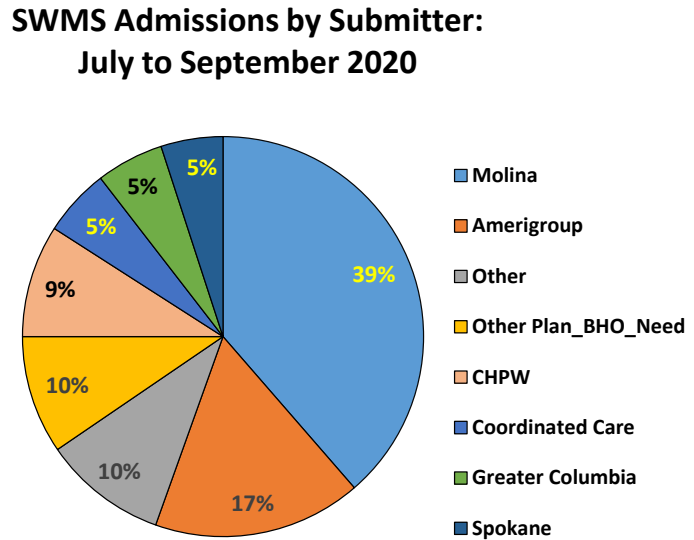
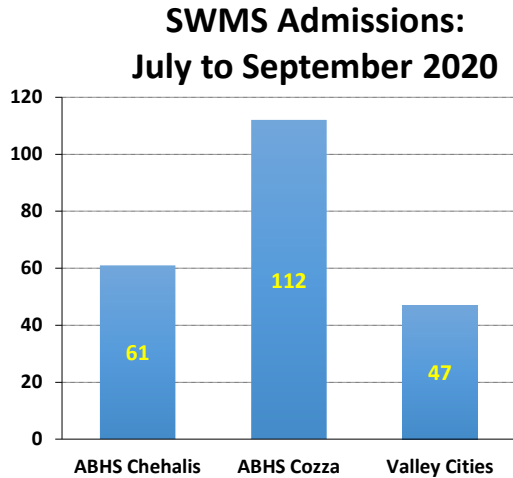
¹ **Data Sources:** SWMS Facilities, July to September 2020. Data provided by the SWMS facilities between April 2018 and September 2020 are limited, which provide for limited capacity to fully describe general service activity at each site (e.g., quarterly admissions, discharges, length of stay, average 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 “Cases” include service counts in the reporting period of SWMS events tied to admissions, open active cases, and discharges by facility and month. “Clients Served” include unduplicated counts of individuals served in SWMS in the reporting period, by facility and month. The “All Facilities” count of “Clients Served” is an overall unduplicated figure; as such, the counts of “Clients Served” by Facility will not sum to the “All Facilities” count of “Clients Served.”

³ The bed utilization rate (expressed as “% Capacity”) is calculated by dividing the facility monthly ADC by each facility’s capacity; and by dividing the total monthly ADC by the composite total capacity of all participating facilities. The rate is rounded to the next one-hundredth of a percentage point, for purposes of illustration for the ADC table.

Admissions

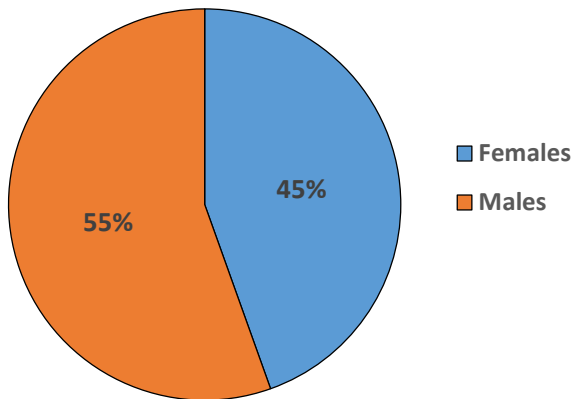
There were **220 admissions** to SWMS between July 1 and September 30, 2020. **Clients enrolled via Molina Healthcare** comprised the highest percentage of admissions (**39%**)⁴ to SWMS during the reporting period.



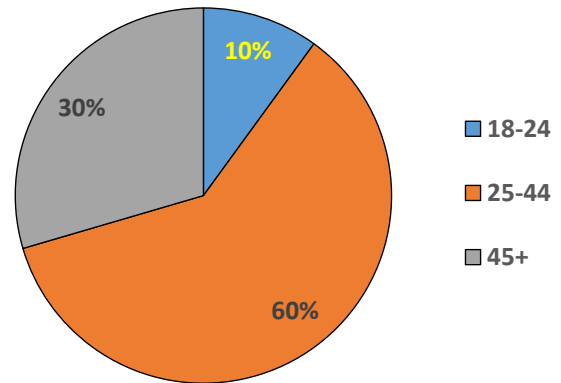
"Other Plan_BHO_Need" includes Beacon, North Sound, Salish, Thurston-Mason, and United Health Care.
"Other" includes Inactive, Medicare, Native (American client), No Insurance, and Not Reported/Unknown.

Admissions vary by gender⁵ and age grouping (all adults). **Males (55%)**, and **persons ages 25-44 (60%)**⁶ comprised most admissions during the reporting period.

**SWMS Admissions by Gender:
July to September 2020**



**SWMS Admissions by Age Group:
July to September 2020**



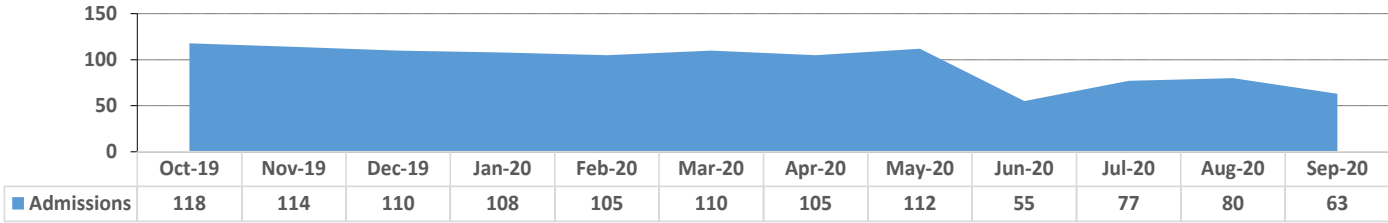
⁴ Percentages are rounded upward to the nearest integer. As such, figures may not sum to 100 percent.

⁵ Indicates a person's self-identified gender.

⁶ The age groups "45-64" and "65+" were combined for the "SWMS Admissions by Age Group" chart, to avert data suppression.

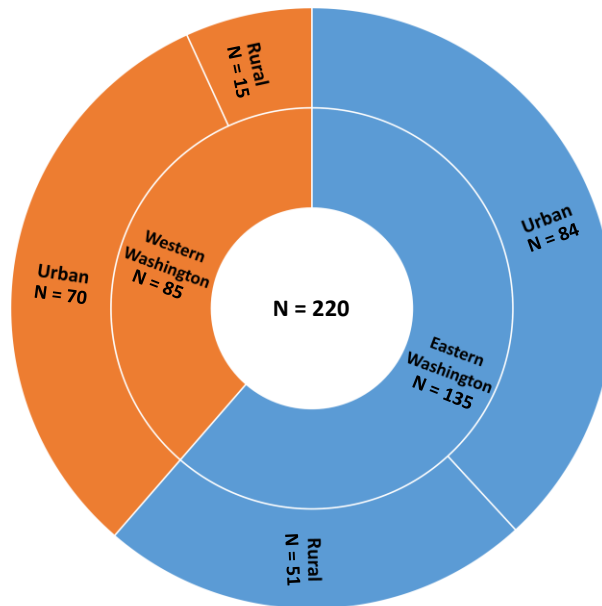
Admissions by month were relatively stable up until June 2020, when ABHS Chehalis temporarily halted SWMS operations.

SWMS Admissions: October 2019 to September 2020



Admissions to SWMS varied by **rural v. urban counties of detention**⁷, 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])**.

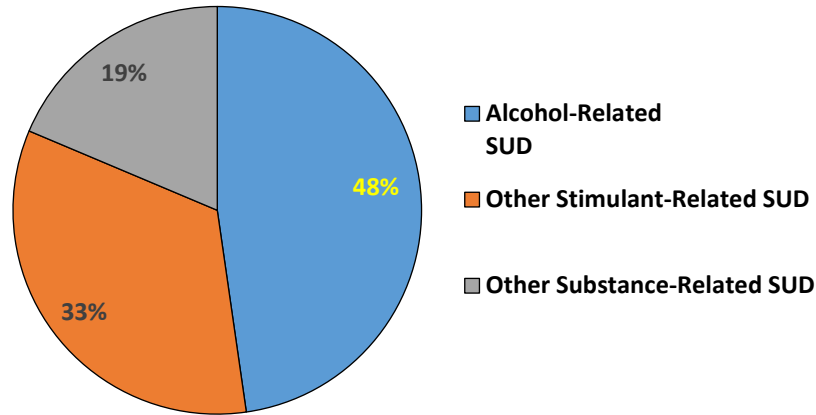
SWMS Admissions: July to September 2020
Eastern Washington and Western Washington
Urban and Rural Counties



⁷ 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, Thurston, 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**⁸ comprised the plurality (**48%**) of SWMS admissions during the reporting period.

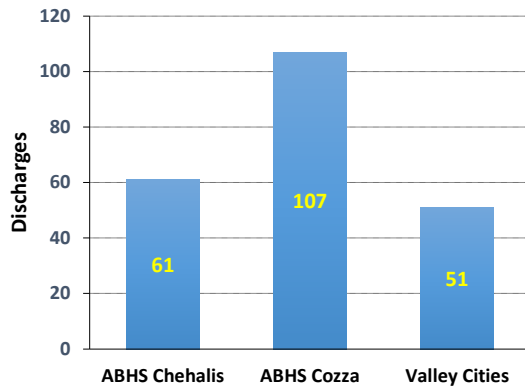
SWMS Admissions by SUD Diagnostic Group: July to September 2020



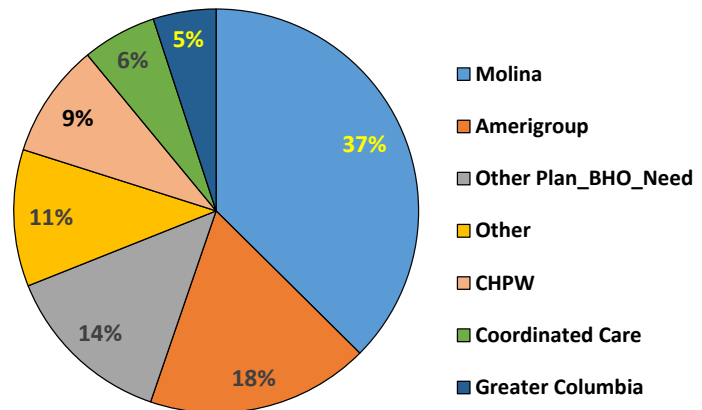
Discharges

There were **219 discharges** from SWMS between July 1 and September 30, 2020. **Clients enrolled via Molina Healthcare** comprised the highest percentage of discharges (**37%**)⁹ from SWMS during the reporting period.

SWMS Discharges: July to September 2020



SWMS Discharges by Submitter: July to September 2020



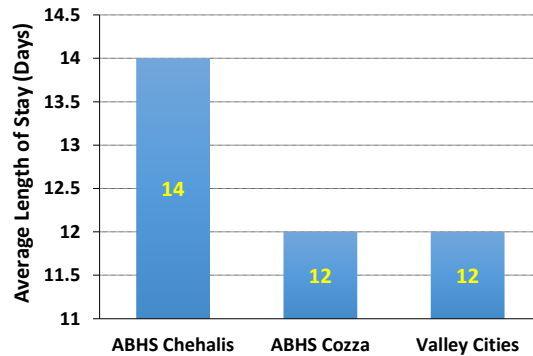
⁸ "Other Plan_BHO_Need" includes Beacon, North Sound, Salish, Spokane, Thurston-Mason, and United Health Care.
⁹ "Other" includes Inactive, Medicare, Native (American), No Insurance, and Not Reported/Unknown.

⁸ 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 records of diagnoses related to cocaine, inhalants, opioids, and sedatives/hypnotics/anxiolytics; and records where there was no reported SUD diagnosis.

⁹ Percentages are rounded upward to the nearest integer. As such, figures may not sum to 100 percent.

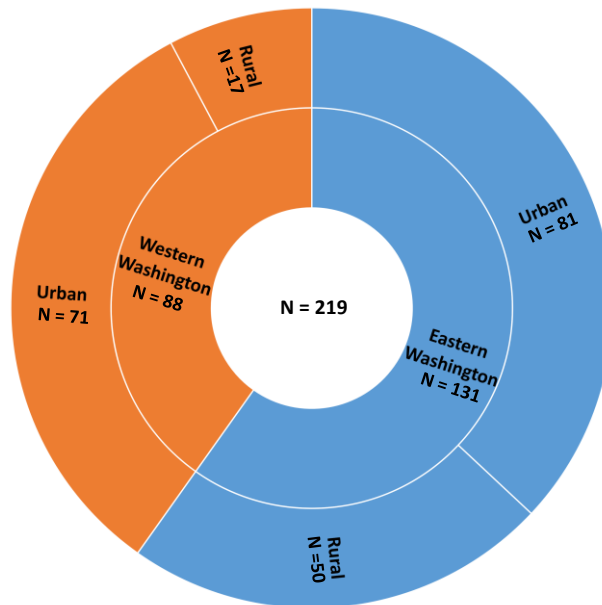
The overall **average length of stay (LOS)** was **13 days**. The LOS varies by gender and facility.

**Average LOS in SWMS:
July to September 2020**



Discharges from SWMS varied by **rural v. urban counties of detention**¹⁰, 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])**.

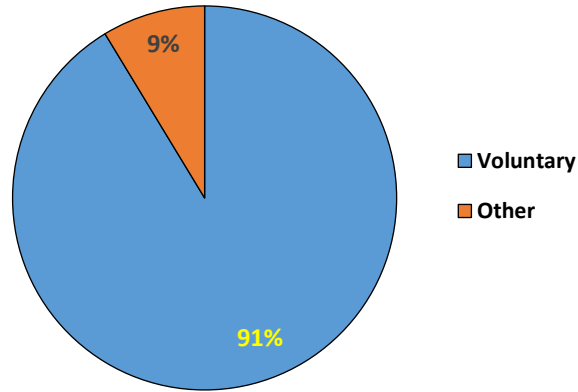
**SWMS Discharges: July to September 2020
Eastern Washington and Western Washington
Urban and Rural Counties**



¹⁰ 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, Thurston, 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**¹¹ at the point of discharge.

SWMS Discharges by Legal Status



¹¹ “Other” (Legal Status) includes 14-Day and 90-Day Order(s), Custody Transfer(s), and Not Reported/Unknown.