



Policy Name: WESTERN STATE HOSPITAL (WSH) PROGRAM COORDINATION	Policy Number: 12.09
Reference: WAC 388-865-0229; State Contract	
Effective Date: 10/2005	
Revision Date(s): 6/2016	
Reviewed Date: 6/2016; 6/2017; 5/2018	
Approved by: SBHO Executive Board	

CROSS REFERENCES

- Policy: Uniform Inpatient and Outpatient Inter-BHO Transfer Protocol 11.25
- Policy: Access to Care
- Policy: Level of Care

PURPOSE

The Salish Behavioral Health Organization (SBHO) has established a non-financial Working Agreement with Western State Hospital (WSH) to ensure a consistent and effective partnership when coordinating services for adults and older adults.

The State has allocated the SBHO a maximum number of daily beds at WSH. The SBHO attempts to ensure that its utilization remains at or under the allocated number of beds.

The SBHO uses three mechanisms to provide resource management, case coordination/ case management, and authorization of services for adults and older adults from Kitsap, Jefferson, and Clallam Counties residing at WSH.

SBHO Mechanisms:

1. The SBHO provides direct resource management, utilization management, and case management oversight of the WSH program for adult and older adults designated/from the SBHO. The SBHO participates in providing the direct management and oversight.
2. The SBHO requires each network provider to designate a WSH liaison staff position to be responsible for active participation in the tailored case management for each individual residing at WSH. Case management includes participation in the admissions,

transfers, and discharge planning for individuals entering, at, or leaving the WSH program.

3. The SBHO utilization management contractor is available 24-hours a day to provide authorization as needed for individuals entering, at, or leaving the WSH program.

PROCEDURE

1. The SBHO strives to maintain an In-Residence Census at WSH that does not exceed the allocated bed number assigned to the SBHO.
2. The SBHO responds to and distributes all WSH census alerts in order to divert admissions and expedite discharges by emphasizing to network providers the development/ utilization of alternative community resources and mental health services.
3. The SBHO core network providers monitor all Least Restrictive Alternative Orders (LRA) under RCW 71.05.320 for individuals discharged from WSH that reside in their catchment area. The SBHO network providers will facilitate covered mental health services, per the Access to Care and SBHO Level of Care (LOC) standards, to assist with compliance with LRA requirements.
4. The SBHO network providers facilitate services to individuals on Conditional Release (CR) under RCW 10.77.150 that meet medical necessity, Access to Care and SBHO LOC standards.
 - a. If the individual is placed on a CR transitional status in the BHO which holds the state psychiatric hospital, it is expected that the individual will transfer back to the SBHO once transitional care is complete.
 - b. The Inter-BHO Transfer process described in the SBHO/WSH Working Agreement will be used when an individual is discharged to an area other than the SBHO. Reference Inter-BHO Transfer Agreement form.
5. The SBHO utilizes the established WSH Working Agreement and Allied Systems Coordination Plans to work collaboratively for the benefit of the SBHO individuals who are receiving treatment at WSH. The current Working Agreement includes:
 - Specific roles and responsibilities of the parties involved, including participation in the admissions, treatment, and discharge transitions for individuals between the community and the WSH program
 - Cross system collaboration responsibilities
 - How data will be provided, shared, and accessed via the cache' system
 - A process for completion and processing of the Inter-BHO Notification of Consumer Relocation form for individuals requesting placement outside of the SBHO
 - A dispute resolution process, to include resolution steps for disputes between BHOs and the assignment of individual costs when individuals are transferred between BHOs.
 - Resolution of identified barriers which prevent discharge and systemic issues that create delays or prevent placement in the SBHO.

MONITORING

This program policy is mandated by statute and contract.

1. The SBHO monitors the program coordination and policy through:
 - Annual SBHO Provider and Subcontractor Administrative Review
 - Monthly analysis of WSH allocated utilization management reports
 - Random review of targeted provider charts including individuals admitted to the State Hospital and whether less restrictive options were considered.
2. If a provider performs below expected standards during any of the reviews listed above a Corrective Action will be required for SBHO approval. Reference SBHO Corrective Action Plan Policy.