

SUD Discharges – Model Policy Workshops

Workshop #2 – 11/14/24

- Policy Statement
 - **PC:** Request to state that the policy is specific to behavioral health
 - **PC:** Consider adding that this applies to "residential" SUD or withdrawal management services
- Policy Scope
 - No questions/comments/concerns
- Key Definitions
 - PC: Suggested edits to discharge definitions:
 - Resident Initiated Discharge: A person requesting to be discharged from the facility prior to a clinical determination that they had completed treatment.
 - Facility Initiated Discharge: a person being transferred or discharged from the facility without the person's consent.
 - Administrative Discharge: a discharge that occurs prior to the therapeutic completion of treatment due to program expectation violations and may not be voluntary.
- Procedure
 - Consent to treat:
 - **PC:** Is the clients state of mind a factor in this? IE what if they are not in a state of mind to give consent? (Dan addressed the question and there were no additional comments/concerns)
 - Consequences of violations of expectations:
 - PC: consider moving the Administrative Discharge definition in this section to the Definition section of the policy so they are all in one place. (Will update policy to reflect this suggestion)
 - Voluntary Discharge:
 - **PC:** consider addressing when the person can be readmitted (Dan to add language to draft policy to address this)
 - Factors that may contribute to involuntary discharge or transfer:
 - No questions/comments/concerns
 - Progressive Intervention:
 - **PC:** Consider making statement more behaviorally focused rather than agreement/disagreement focused.
 - Suggested changing "If found in disagreement to adhere to the expectations, an administrative discharge may ensure" to "If the person fails to follow program expectations or is unable to follow expectations outlined in the behavior contract, an administrative discharge may occur"
 - PC: Suggestion: instead of behavior contract, possibly a Treatment Improvement Plan?

- PC: We use the term Therapeutic Support Plan
- Procedures to assure safe transfers and discharges:
 - PC: suggested edit
 - Suggested changing "If there is medication, the person will be provided with the appropriate amount of medication/prescriptions to ensure they are able to reestablish medication treatment post discharge" to "If the person being discharged is on medications, the person will be provided with the (x number of days) of medications along with current prescriptions to continue their care."
- Other public comments:
 - Is there a timeline clearly outlined for amount of time until the discharged individual needs to be off the property once notified?
 - I think there should be something included in the literature provided to
 patient that clearly outlines consequences should they disagree with being
 discharged regarding expected timelines regarding departure from the
 facility. We deal with a large homeless population that sometimes will refuse
 to leave the building. We have found that it is easier for staff to manage some
 of those difficult conversations where there is already a clear outline
 regarding steps taken up to and sometimes including alerting outside
 authorities.

Workshop #1 – 11/07/24

- Medical discharge section recommendation to define "medical condition"
- Administrative discharge section
 - o Request to address the administrative burden on BHAs in the model policy
 - o Request to define "violent behavior"
 - "Persistent lack of engagement in the recommended treatment program" suggestion received to remove this as it could be a systemic problem with
 - the program that needs to be addressed
 - "Continued use of drugs or alcohol" language is from RCW
- Other factors to include section:
 - The public agreed that all of the recommendations provided in this section of the draft policy should be included
- Goal is to have webpage with a fillable form where information can be reported
- Next steps
 - Weekly workshops
 - Info will be posted to the webpage