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County: Fewer mental patients released over missed deadlines

Fewer Seattle-area residents are being tossed out of treatment for mental illness because of missed deadlines, officials said this month.

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Far fewer Seattle-area residents in the throes of severe mental illness are being dumped out of treatment because of missed deadlines, officials said this month, offering hope that an alarming problem has largely subsided.

Between Aug. 1 and Oct. 31, just nine residents were let go from King County's involuntary-treatment system because the psychiatric evaluations necessary to commit them were not conducted within the time required by state law, according to new data from the county Prosecutor's Office.

That means patients were let go without needed treatment less than once a week on average, or in about 1 percent of the 879 cases over that time.

Earlier this year, mental patients were being released more than three times a week because of missed deadlines, about 5 percent of cases.

The reduction is particularly significant because each missed-deadline release puts someone already determined by evaluators to meet the criteria for commitment — in danger of hurting themselves or others — out on the streets without treatment or monitoring.

State law requires patients to be discharged if evaluations are not conducted within six to 12 hours, regardless of how sick they are.

County officials said they have missed fewer deadlines because they hired two new evaluators, reduced other overall responsibilities and worked closely with the court system to ensure that those who need treatment get it.

The changes came after The [Seattle Times revealed](#) last spring that King County evaluators were having trouble meeting the deadlines in the little-known law, causing a rash of releases.

"We're working really hard at this," Jim Vollendroff, the division director overseeing county mental-health and drug-abuse services, recently said.

Mike De Felice, the county's top public defender representing patients in involuntary-treatment cases, agreed there have been improvements. He said he and his co-workers have continued to be aggressive in seeking releases on technicalities to fight for the civil rights of their clients but have found themselves doing it less often.

The Times investigation, published in May, showed that county officials had been aware of a surge in patient releases since 2011 but failed to notify the state or count how often patients weren't helped.

Instead, officials seemed to try to conceal the problem, including violation of the state Public Disclosure Act by not releasing hundreds of pages of emails about the problem to The Times.

The supervisor for involuntary commitments in the county [eventually resigned](#).

The county also paid the newspaper \$41,560 in legal fees and penalties to avoid a lawsuit, and reprimanded a public-records officer.

The mental-health system has been roiled by two separate court rulings since then, including an August state [Supreme Court decision](#) that found it unconstitutional for officials to temporarily leave psychiatric patients in emergency rooms without treatment when there is [no room in psychiatric facilities](#).

Just last week, a [federal judge ruled](#) that criminal defendants awaiting a mental-competency evaluation before a trial in Washington state were languishing for too long.

The state Supreme Court ruling and other factors, including The Times investigation, led to the creation of a mental-health-reform task force by Gov. Jay Inslee and County Executive Dow Constantine, said Betsy Jones, a Constantine aide. It has been meeting monthly since September.

Among other recommendations for the upcoming legislative session, the task force plans to urge state lawmakers to pass a law making the six-hour clock start once hospital staffers have cleared newly arrived psychiatric patients of other medical problems, instead of the minute they enter the facility, Jones said.

Some lawmakers said last summer they wanted to pursue changes to reduce releases due to technicalities.

"I'm very interested in legislation to make sure that people judged in imminent danger are not turned out on the streets before receiving treatment," said state Sen. Karen Keiser, of Kent, the top Democrat on the health-care committee.

"That is outrageous and we must address it."

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