



BEHAVIOR REHABILITATION SERVICES SEMI-ANNUAL UPDATE



Washington State Department of
CHILDREN, YOUTH & FAMILIES

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Executive Summary

SB 5950, section 227(11), requires the Washington State Department of Children, Youth, and Families (DCYF) to provide semi-annual reports to the Governor and appropriate legislative committees that include the number of in-state behavior rehabilitation services providers and licensed beds, as well as the number of out-of-state behavior rehabilitation services placements. Effective Jan. 1, 2024 it is required to provide the same information as it pertains to in-state emergency placement service beds.

BEHAVIOR REHABILITATION SERVICES (BRS)

Introduction

Behavior Rehabilitation Services (BRS) is a short-term intensive support and treatment program that can include placement in a Qualified Residential Treatment Program (QRTF) or Therapeutic Foster (TFC) home, as well as services provided in a caregiver's home. These placements and services are intended to support and safely stabilize youth with high-level service needs and support transition to a less intensive service to assist in achieving a permanent plan.

Over this reporting period, a new Intensive Resources Provider Support Program Specialist has been onboarded to fill a vacant position. They will continue the ongoing work of supporting providers alongside their colleagues in the Placement Continuum Unit. The Program Specialist will continue to conduct program observations throughout 2025.

Historical and Current Capacity

As required by the budget proviso, DCYF continues to report licensed BRS provider capacity in these regular reports to the legislature. A comparison of the average number of providers and average beds available will be reported as data is available. It must be noted there are no enhanced BRS beds funded or contracted at this time.

Historical Reporting: In State BRS Provider and Bed Count

Dates	Type	Count of Providers	Number of Licensed BRS Beds
Average Jan. – Apr. 2021	QRTF	24	338
Average Jan. – Apr. 2021	Treatment Foster Care	16	*
Average May – Sept. 2021	QRTF	18	252
Average May – Sept. 2021	Treatment Foster Care	12	*
Actual Oct. 31, 2021	QRTF	19	257
Actual Oct. 31, 2021	Treatment Foster Care	11	*
Actual Jan. 31, 2023	QRTF	22	256
Actual Jan. 31, 2023	Treatment Foster Care	14	*
Actual Jun. 30, 2023	QRTF	18	245

Actual Jun. 30, 2023	Treatment Foster Care	14	*
Actual Dec. 31, 2023	QRTP	16	233
Actual Dec. 31, 2023	Treatment Foster Care	14	*
Average Jan.- Jun. 2024	QRTP	16	231
Average Jan.- Jun. 2024	Treatment Foster Care	14	*
Actual June 30, 2024	QRTP	16	229
Actual June 30, 2024	Treatment Foster Care	14	*

* Denotes unavailable data

Historical Reporting: Number of Youth Placed Out of State

Dates	Number of Youth
Actual April 2021	9
Actual Nov. 24, 2021	8
Actual Jan. 31, 2023	5
Actual Jun. 30, 2023	7
Actual Dec 31, 2023	7
Average Jan. – Jun. 2024	7
Actual June 30, 2024	7

Current Reporting: In State BRS Provider and Bed Count

Dates	Type	Count of Providers	Number of Licensed BRS Beds
Average Jul.- Dec. 2024	QRTP	15	216
Average Jul.- Dec. 2024	Treatment Foster Care	14	*
Actual Dec 31, 2024	QRTP	15	214
Actual Dec 31, 2024	Treatment Foster Care	14	*

* Denotes unavailable data

Historical Reporting: Number of Youth Placed Out of State

Dates	Number of Youth
Average July. – Dec. 2024	3
Actual Dec 31, 2024	2

Between July 1 and Dec. 30, 2024, the count of in-state providers and out-of-state BRS placements have decreased. Region 1 saw a decrease of 10 QRTP beds in two programs. Five beds were closed when a provider did not renew their lease on the facility they had been operating in and the other five beds were closed due to a provider choosing to explore other contracts. These closures have not impacted bed availability in Region 1 or for youth statewide.

Region 4 saw a decrease of 5 beds in one program due to a license revocation. Despite the decrease in beds, we can still meet the needs of a significant majority of the youth requiring this level of care as we continue to focus on development of resources that keep youth in their home communities in the least restrictive environment.

EMERGENCY PLACEMENT SERVICES (EPS)

Introduction

Emergency Placement Services (EPS) provide a short-term receiving care option for children and youth with all levels of support needs from the ages of birth to 20 years. These children and youth utilize EPS when they initially enter out-of-home care or experience a placement disruption. Children and youth are referred and admitted 24 hours a day/seven (7) days a week with providers contracted to have an 85% acceptance rate. These providers serve children with a goal of preserving or reconciling the family and work to assist with effective transitions to other placement resources with the shortest length of stay possible. EPS placements assist DCYF in making future placement decisions and work to minimize the number of moves children and youth experience while in care.

Over the last reporting period, the legislature-approved rate increase was implemented providing programs with much needed funding through a contract amendment starting July 1, 2024. This funding allows providers to meet the wage standardization provision supporting staff retention and reducing turnover. This increase has allowed for an additional resource to come onto the service line in Region 3 where previously no EPS beds were available. These five EPS beds helped fill part of the service gap between Region 3 and 4. We are continuing ongoing recruitment to locate a provider in Region 4 and providers for additional beds in Region 6.

Providers continue to meet individually with the Intensive Resources Program Manager monthly and as a larger group quarterly to discuss trends in referrals, utilization, case specific staffings, and to discuss program and system improvement. Together we continue to problem solve and support the use of cell phones within programs (a main reason youth were declining EPS placements) and provide additional supervision provisions for youth with high support needs as longer-term placements are explored.

Current Capacity

As required by the budget proviso, DCYF will now report on the EPS provider capacity. Work focused on the analysis of utilization data continues as DCYF and providers adapt to the current needs of children and youth in care. It must be noted there are no enhanced EPS beds funded or contracted at this time.

EPS Provider Count

Dates	Count of Providers	Count of Programs	Number of Licensed EPS Beds
Average Jan. – Jun. 2024	5	7	45
Actual June 30, 2024	5	7	45
Average Jul. – Dec. 2024	5	7	46
Actual Dec. 31, 2024	6	8	50

Conclusion

DCYF continues to partner with our providers and partners to create a placement continuum that will ensure children, youth, and their families are provided access to placements and supports that are least restrictive. Work will continue to identify providers to fill service gaps in areas and regions where there is an identified need. DCYF will also continue to incorporate youth and family voices in decision-making to ensure well-being, recognizing the uniqueness of individual and family needs and understanding that community connections are paramount to success.

Original Date: December 2024

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