

A SEATTLE TIMES INVESTIGATION

Nowhere to turn

Missed deadlines force hospitals to release mental patients



BETTINA HANSEN / THE SEATTLE TIMES

Doctors diagnosed Gregory Benson, of Kirkland, with schizophrenia after an episode of bizarre behavior that left his family worried and frightened. When an evaluator arrived late, Benson was released without treatment, leaving loved ones to wonder where he was.

Each year, a little-known provision in state law forces King County to cut loose nearly 200 patients desperately in need of treatment for severe and dangerous mental disorders.

BY BRIAN M. ROSENTHAL / SEATTLE TIMES STAFF REPORTER

Three months ago at his family's Redmond home, Gregory Benson charged across the living room and slapped his younger brother, shouting nonsense.

—There is a name!" he howled.

—The name is Jesus Christ! Please leave, accordingly!"

The lanky 23-year-old was suffering a major psychotic episode, his first in five years. Back in 2009, he punched his dad, got arrested, refused treatment and ended up homeless for 18 months.

This time, his family hoped to avoid that, or worse, by quickly getting him into mental-health treatment. They called 911, and soon police and paramedics forced Benson into an ambulance that sped him to Bellevue's Overlake Medical Center.

Once there, he tried to escape and had to be tied down on a bed. Doctors diagnosed him with schizophrenia.

—Continuedbizarre ideation," one noted in his chart. —Nonsensical response to questions."

The next step was for a King County mental-health evaluator to determine whether Benson legally could be detained and treated against his will. To meet the criteria, he had to be in imminent danger of harming himself or others, or in imminent danger due to being —gravely disabled."

Although few people even among the hospital staff knew it, an unusual provision in Washington state law said the evaluation was supposed to be conducted within 12 hours.

The county evaluator missed the deadline, arriving eight hours late, but found that Benson was a danger to himself and urgently needed treatment.

The patient was transferred to Fairfax Hospital, a private psychiatric facility in Kirkland, and his mother brought him a shopping-cart-sized bag of clothes for what she expected would be a long stay.

A few days later, the mother, Maria Benson, went to King County Superior Court for a hearing to formalize and extend the involuntary commitment. Instead she was told that Benson was getting released because of a —technicality" related to a missed deadline. Confused, she headed to Fairfax. But the hospital had no answers.

Her son had already been let go — and now was nowhere to be found.

Washington's Involuntary Treatment Act

The law

When police bring someone to a hospital for psychiatric assessment and possible commitment, a county evaluator must decide within 12 hours whether commitment is necessary. It's six hours if the person is brought in by a family member.

Why the law is needed

To prevent vulnerable citizens from being held indefinitely against their will.

What happens sometimes

Evaluators miss deadlines, leaving officials little choice but to release patients without treatment.

Every couple of days

While officials have not reported the problem or even counted how often it happens, a Seattle Times investigation has found that people like Gregory Benson are released on technicalities from King County hospitals — without treatment or monitoring — on average every other day.

During a recent 10-week period, at least 35 people deemed by the county to be imminent threats to themselves or others were released after an evaluator did not show up in time — more than 5 percent of the caseload in that period, according to data collected by prosecutors at the request of The Times.

At that rate, 182 severely mentally ill people will be dumped out of the system this year.

—There are people who are psychotic, in need of help, and they get off on a stupid technicality, which essentially means that this poor person walks out barefoot and is in the middle of the street,” said Arpan Waghray, mental-health director at Swedish Medical Center, adding that, —You’re just waiting for someone to fail.”

—There should be no reason that a patient or family member should suffer due to someone’s incompetence or lack of time management,” he said.

County mental-health officials said their evaluators work hard but are hamstrung by an —overwhelming” rise in mental-health calls, an unfair state funding formula and the obscure law itself.

—I wouldn’t blame anybody,” said Jean Robertson, director of county mental-health services.

The issue is unique to Washington, the only state in which involuntary detentions must be ordered by a county evaluator, according to the nonprofit Treatment Advocacy Center.

Enacted in 1973, the Involuntary Treatment Act was designed to protect patients from being detained for days while waiting for an evaluation. Very few mentally ill people are violent, and only about half of those evaluated get detained.

The law gives evaluators 12 hours to decide whether someone brought by police to a hospital for possible commitment should actually be detained. When the patient is brought by friends or family, the limit is six hours from when the hospital calls the evaluator.

Neither limit has ever before posed a serious problem. Even today, officials in populous counties such as Pierce and Snohomish said on average they respond to mental-health calls within one to three hours and hardly ever get ordered to release a patient because of time-limit issues.

But in King County, evaluators are increasingly struggling to meet deadlines. Their average response time was 11.8 hours last year, a 40 percent increase over 2010, according to a Times analysis. Their annual assessments grew 12 percent during that time, to 7,016, according to the state.

Supervisors in King County’s mental-health division have known about the surge in time-limit violations since at least 2011, mentioning it in staff memos and responding to complaints from frustrated hospital workers. But they have never seriously attempted even to determine how often patients get

released, according to a review of thousands of pages of internal emails obtained by the newspaper.

Instead, some top officials have seemed to try to conceal the extent of the problem. In response to three Times public-records requests about the issue, King County's mental-health division provided zero documents and then, in an unexpected follow-up, seven emails. Only after the newspaper threatened to sue did officials turn over a larger collection — 1,976 pages.

Nor has the county shared the problem with state officials.

—I have not been contacted by anybody with concerns about the timelines,” said Chris Imhoff, the state Department of Social and Health Services manager who oversees involuntary commitment in the state.

One top state lawmaker gasped after learning from The Times about the number of detained patients released due to missed deadlines.

—Oh my God,” said state Rep. Eileen Cody, D-West Seattle, chairwoman of the House health-care committee. —That's appalling.”

It is nearly impossible to learn what happened to the people in distress who have been released on time-limit violations already this year. All names and details were redacted from emails released to The Times. Court files of people facing involuntary commitment, which contain psychiatric evaluations, are not public. Officials said they were not allowed to track released patients.

Robertson, the county director, said she believed many of the patients released were detained again soon

thereafter, with deadlines presumably being met the second time around. This was speculation, she admitted, because no one has studied the issue.

Some may have recovered their mental health on their own. And some may have hurt themselves or others.

—The system is absolutely taking the chance of that happening,” said Stephen Marshall, an Overlake doctor and past president of the American College of Emergency Physicians' state chapter. —It's not hard to see that at some point, this is going to be harmful for a patient or a family or whoever is involved in that patient's life.”

Anne Longin, a social worker at West Seattle's Navos psychiatric hospital, put it another way:

—Sending somebody out of the hospital when you know they need help is hard,” she said. —We get used to it. It's what happens. But they go, and a lot of times we just wait until we see them again and hope nothing bad happens in the meantime.”



GREG GILBERT / THE SEATTLE TIMES

Jean Robertson, left, head of King County mental-health services, is seen with division director Jim Vollendroff. He said solving the time-limit issue will be a top priority, though there's not yet a plan or timetable for doing so.



BETTINA HANSEN / THE SEATTLE TIMES

Public defender Tim Ray Johnson, left, sits with his client as prosecutor Christopher Wong speaks before Commissioner Hollis Holman, right, in the Involuntary Treatment Act court at Harborview Medical Center in Seattle.

7 miles in the cold

At 10:40 p.m. the night Benson was released from Fairfax, his parents heard a single knock on the door, a long pause, then another knock.

Their son stood on the porch, disheveled and shivering in 30-degree darkness. He had walked from the Kirkland hospital to their Redmond home, some seven miles.

The parents were relieved, confused and angry.

—We had been waiting almost two years to get him into a facility so he could get help. We kind of thought, ‘This is our chance,’ ” Maria Benson said. —I couldn’t understand what happened.”

Hospital records show it clearly: Benson was admitted to Overlake at 7:47 p.m. on Jan. 28 but not ordered to be

detained by an evaluator until 20 hours and 41 minutes later, more than the 12-hour limit for patients brought by police.

Prosecutors voluntarily dropped the commitment case, even though doctors —would have recommended further hospitalization,” according to records from Benson’s brief Fairfax stay.

Under —discharge plan” and —discharge medications,” the records list “none.”

Back at home, Gregory Benson wouldn’t eat or talk.

In bed at night, he occasionally burst into raucous laughter, amused by one of several voices in his head, he would later say.

The family was frightened, for his safety and their own. It was especially hard on his 12-year-old sister.

King County officials say patients released on a time-limit technicality can quickly get re-detained if family members call for another evaluation.

But Maria Benson said that she found that process complicated and difficult.

She said she tried unsuccessfully to get another evaluation two days after her son was let go, and then tried again, day after day.

Out of desperation, she also called a Times reporter who had recently written a series of articles about mental-health care.

After she described what had happened, her voice faltered.

—What am I supposed to do?” she asked, anguished. —Do it all over again? And then what happens?”

County conceals, then releases emails

Late last fall, reporter Brian Rosenthal made public-records requests to the King County Department of Community and Human Services, seeking information about involuntary commitments cases with missed deadlines.

Specifically, he asked for emails of three supervisors over the involuntary commitment section, from 2011 to 2013, that contained such terms as “12-hour rule” or “time limit.”

When the public-records officer for the department replied, she had surprising news:

Sharon Logue said the employees searched but had no responsive records.

The Seattle Times knew this representation to be false, based on other reporting. In March, a Times lawyer, Eric Stahl, threatened to sue the agency unless it explained the failure, conducted a thorough search and paid for legal costs and penalties.

A county prosecutor, John Gerberding, said in an April reply that the agency had violated the law and was conducting a new, thorough search. It eventually resulted in the release of more than 1,900 pages of emails and other documents, the fruits of which inform this investigation.

Logue and JoEllen Watson, coordinator of the mental-health evaluators, recently were given reprimand letters. The county settled Friday with The Times, paying \$41,280 in legal fees and public-records-act penalties.

Dangerous issue

Washington state’s mental-health-care system has more than its share of well-documented problems:

It has among the fewest psychiatric-treatment beds per capita in the nation and a narrow commitment criteria — the “imminent danger” standard — that ensures that only people on the brink of crisis can be forcibly treated.

What is notable about the time-limit issue, frustrated hospital staffers say, is that it involves the system willfully releasing people it knows are dangerous or in danger.

It’s a quandary that has also surfaced in other states. Until recently, Virginia had a law requiring that mental patients being held against their will had to be released if officials could not find them a bed in a psychiatric facility within six hours.

But lawmakers removed that requirement this year after Gus Deeds, a state senator’s mentally ill son, was released because no bed was available in time. He stabbed his father, then committed suicide.

In Washington state, the time-limit issue has gotten almost no attention.

Dozens of people, from top lawmakers to front-line hospital psych staffers and mental-health advocates, said they had never heard of it.

Robertson, the county director, said that’s because the deadlines hadn’t been a problem until the past few months. She said she has —not had hospital contact me and said they were frustrated about this.”

But internal emails provide a different account. Hospital staffers have complained about evaluators moving too slowly since at least the middle of 2011, records show.

In July of that year, a nurse working on her first night at Seattle’s Harborview Medical Center called the county mental-health division office because it was taking so long for an evaluator to arrive that she thought she was being “hazed,” according to one email.

Last summer, as time-limit issues grew, Harborview social worker Molly McNamara wrote to JoEllen Watson, supervisor of the evaluators, to express —heartfelt pain” at the releases.

—When you have detained someone with REAL, ACUTE PSYCHIATRIC needs, we should be able to keep them and treat them,” McNamara wrote.

Six weeks later, in early October, Watson received an email message from Susan Kennelly of the Veteran’s Administration hospital in Seattle, asking how to address the —the technicality” issue.

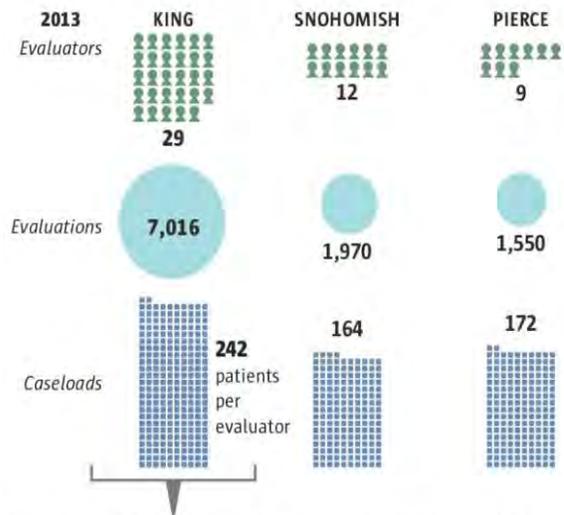
Watson replied to Kennelly that she would forward the message to Robertson and Robertson’s boss —so they are aware of how many cases we are losing at court because of our understaffing.”

—It is very upsetting, and we are working these (evaluators) to death,” Watson wrote.

How King County fails some mentally ill patients

By law, Washington state can detain and forcibly treat people with mental disorders who are determined to be in imminent danger of harming themselves or others. A first step is to be evaluated by a designated mental-health official, usually employed by the county.

King County’s evaluators have higher caseloads:



Assessments in hospitals must be completed within 12 hours if the patient is brought by police or within six hours (from the time the evaluator is called) if the patient is brought by friends or family. About half the time, the evaluator says the patient meets criteria to be held for 72 hours.

King County’s average response time has slowed sharply:



Next, a judge hears from prosecutors and medical staff about whether the patient needs to be committed for up to 14 more days. A judge can order the patient released if the county evaluator missed the time-limit deadline. That happens **at least three times a week** in King County — **5 percent of all cases** — leaving mentally ill people in severe crisis to fend for themselves.

Released on a technicality

In a recent 10-week period, 659 involuntary commitment cases came to court in King County.



Sources: King County prosecutor’s office; mental-health divisions of King, Pierce and Snohomish counties; reporting by Brian M. Rosenthal

High-court ruling

While King County's mental-health division has not acted, prosecutors have tried to address the issue in the past.

In 1999, when deadlines were a much smaller problem, top involuntary-commitment prosecutor Gerald Smith became frustrated after a handful of dismissals. He decided to appeal them. He was opposed by the court's chief public defender, Richard Lichtenstadter, who argued the deadlines were an important protection of civil liberties.

The case, —*IrRe: the Detention of C.W.*,” made it to the state Supreme Court. The justices agreed the prosecutors deserved flexibility, ruling patients shouldn't be released unless a deadline was —totaly disregarded.”

Fifteen years later, it appears that phrase is being interpreted in a way that favors the position of public defenders. Several patients have been released after mental-health evaluators barely missed the time limits, according to emails obtained by The Times.

In one example, a judge in March 2011 released a 26-year-old Kent man who had been brought to a hospital by his family because the county evaluation was completed in 6.5 hours — 30 minutes too late.

The man's mother said recently she had no idea why he was released until she was contacted by The Times. Under state law, if the patient is an adult, the courts have no duty to notify parents about a dismissal.

For the Kent man, being told he was free to go had the perverse effect of convincing him he was fine, his mother said, and thereafter he became even less willing to take medication.

For months after, she watched her son suffer from severe depression and worried he might kill himself.

King County officials said judges have hewed tightly to the law in the past year, and public defenders have become increasingly assertive. Robertson acknowledged she has not raised the issue with either entity, or state officials.

She said she has repeatedly asked for more money from Olympia but never specifically mentioned that people were getting released on technicalities. Instead, she said the county has been hoping the rash of releases will subside when a new crisis-outreach team starts this summer, taking on some of the responsibilities of mental-health evaluators.

Robertson's supervisor, division director Jim Vollendroff, pledged in a recent interview to find a longer-term solution, calling it a top priority. He said he did not yet have a plan or timetable.

How to fix the problem

Solutions range from changing mental-health laws to putting more money into the system.

- Steve Anderson, emergency room physician at Auburn Medical Center: allow county mental-health evaluators to conduct assessments by video, a version of the medical trend called “telemedicine.”
- Anne Mizuta, chief King County involuntary commitment prosecutor: extend the 12-hour and six-hour deadlines to account for the rising numbers of people needed to be evaluated.
- Eileen Cody, chair of the state House health care committee: allow private companies to bid competitively to provide mental-health services, which may force county operations to improve.
- Jean Robertson, director of King County mental-health services: increase state funding to hire more county evaluators.
- Laurie Jinkins, chair of the state House Judiciary Committee: put more money into early intervention and outpatient programs to bring down the number of people needing detention, lowering caseloads.
- State Rep. Tami Green: “Start treating mental illness like the medical condition that it is. We wouldn't have a stroke patient waiting 12 hours before getting treatment.”

—Brian M. Rosenthal

Loved ones at risk

In the Redmond home now beset by anxiety, Gregory Benson worsened as his parents struggled to get help.

One afternoon, in the car on the way to a family dinner, Gregory turned to his sister and asked, —Who are you? What are you doing here? Another night, he shoved his father down a staircase.

He would later tell a psychiatric nurse that he was having —homicidal thoughts.”

Finally, seven days after a missed deadline cut Gregory loose, his mother convinced the county to conduct another evaluation.

Two women talked with Gregory for a half-hour in the same living room where he had threatened his brother.

Then they went to the kitchen to tell his parents their assessment: —You have no idea how severe he is.”

Gregory was taken back to Fairfax. But this time, with the time limit met, he stayed for 29 days.

Doctors had to inject him with drugs at first, then got him into group therapy and slowly coaxed him back into his own mind.

He left the hospital March 12 in better shape than he’d been in years, his parents said.

But even as Gregory improved, his mother agonized.

Recently, Maria Benson requested copies of the court and medical records from both detentions. She still wanted answers about how the state could declare her son sick and then refuse to help him.

—The hardest part is just feeling...” she said, trailing off. —We were totally abandoned. What will happen if something happens again?”



BETTINA HANSEN / THE SEATTLE TIMES

Gregory Benson is recovering now after struggling with mental illness to the point where his mother, Maria, had him committed to a hospital twice due to violent and erratic behavior. The first time, a missed deadline for evaluation led to his release without treatment or follow-up.

Mental-health official resigns after scrutiny of patients' release

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BY BRIAN M. ROSENTHAL
SPECIAL TO THE SEATTLE TIMES

The King County coordinator for treating mentally ill residents against their will has resigned following scrutiny of how her team failed to meet legal deadlines, resulting in hundreds of dangerously sick patients being released without care.

The Aug. 1 departure of JoEllen Watson adds another burden to the county Department of Community and Health Services as it scrambles to comply with a recent state Supreme Court order to stop temporarily detaining patients in hospital emergency rooms, a practice known as “psychiatric boarding.”

Because of a severe shortage of mental-health-treatment facilities, King County has been boarding 90 percent of detained county patients in ERs. They stay an average of three days, often tied to gurneys to prevent injury.

Watson agreed to resign, not sue the county and not seek future county employment in return for a neutral reference letter and the removal of a reprimand letter from her personnel file, according to a settlement signed in early June.

The settlement came two weeks after Watson was placed on administrative leave so supervisors could review issues raised in a Seattle Times investigation, county spokeswoman Sherry Hamilton said.

The May 5 article revealed that every other day, on average, a resident classified by the county as dangerous was getting released due to missed deadlines. State law requires that all forcibly detained mental patients be assessed by a county official within six to 12 hours of being held.

The investigation also showed that officials had never measured the problem nor notified the state about it. The county also violated the state Public Disclosure Act by not releasing hundreds of pages of emails about the problem requested by The Times.

The county eventually paid the newspaper \$41,560 in legal fees and penalties to avoid a lawsuit, and reprimanded Watson, as well as public-records officer Sharon Logue.

Even so, Watson's departure surprised many of her former colleagues, longtime co-worker Christie White said. “There was no explanation,” she said.

Charlie Huffine, a psychiatrist who worked with the team part time, said Watson did an admirable job with a difficult assignment.

“There was so much pressure — people showing up at emergency rooms, and everything else,” Huffine said. “I think she did the best she could.”

The 32-employee team evaluated 6,124 people last year and detained 3,159 of them, officials said.

The unit is being run temporarily by Watson’s former boss, Jean Robertson, who also oversees all county mental-health programs. Officials said they hope to promote someone into the job permanently next month.

Robertson’s boss, Jim Vollendroff, who took over King County’s mental-health and drug-abuse division in February, said at the time that his two top priorities were ending psychiatric boarding and halting patients being released because of missed deadlines.

Watson, who has a doctorate in social work from the University of Washington, became the county’s involuntary-commitment coordinator in July 2007 after working in other jobs in the department since 2002, according to the county’s neutral reference letter. Watson’s salary when she resigned was \$112,825.

Other than the notification about the administrative leave, there are no records of disciplinary actions or performance issues in Watson’s 387-page personnel file.

The reprimand letter removed from the file criticized Watson for “lack of judgment and/or noncompliance” in failing to provide emails requested by The Times.

The settlement bars Watson and the county from discussing the deal or criticizing each other. Both sides declined to comment.

Brian M. Rosenthal on Twitter [@brianmrosenthal](#)

County: Fewer mental patients released over missed deadlines

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BY BRIAN M. ROSENTHAL
SPECIAL TO THE SEATTLE TIMES

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."

Brian M. Rosenthal on Twitter [@brianmrosenthal](#)