

Unavailable Detention Facilities Report

RCW 71.05.750



County

Person's current location

First name

Last name

MI

DOB

Assigned MCO - if applicable		Gender	Danger to
Status	Other Criteria	Female	Self
Mental Health	Emergent	Male	Others
SUD	Non-Emergent	Other	Property
			Gravely Disabled

No E&T or SWMS facility will accept per RCW 71.05.170 and person cannot be served on a Single Bed Certification or less restrictive alternative. This individual has been determined to be dangerous to self, others, property, or gravely disabled, but no facility with specialized capabilities or facilities and capacity to treat this patient will admit or accept a transfer.

If any denial is due to COVID check one or more reason:

- Positive Test
- Person Exposed
- Other—include in notes
- Awaiting Test
- Showing Symptoms

Notes:

DCR name

Phone

Time of determination of criteria met & no bed available

Date of determination

DCR signature

Fax completed form to **(360) 763-4708** or send via secured email to: **hcabhsia.bedrpt@hca.wa.gov**