

HOUSE BILL REPORT

HB 1198

As Reported By House Committee On:
Human Services

Title: An act relating to recommendations of the juvenile issues task force.

Brief Description: Implementing recommendations of the juvenile issues task force.

Sponsors: Representatives Leonard, Padden, Appelwick, King, Brough, Johanson, Jones, Roland, Long, G. Cole, Veloria, Horn, Karahalios, Springer, Wood, Flemming, Kessler, Lemmon and Pruitt.

Brief History:

Reported by House Committee on:
Human Services, March 1, 1993, DPS.

HOUSE COMMITTEE ON HUMAN SERVICES

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 11 members: Representatives Leonard, Chair; Riley, Vice Chair; Cooke, Ranking Minority Member; Talcott, Assistant Ranking Minority Member; Brown; Karahalios; Lisk; Padden; Patterson; Thibaudeau; and Wolfe.

Staff: David Knutson (786-7146).

Background: The Juvenile Issues Task Force was created in 1990 to review: (1) the Juvenile Justice Act of 1977 as amended; (2) the At-Risk Youth Act of 1990; and (3) statutes related to youth. The task force was made up of 32 individuals representing professionals in the juvenile justice and youth services field, citizens, and legislators. The task force recommended statutory changes related to juvenile offenders, at-risk youth, runaways, families in conflict, and children with mental health or alcohol and drug needs. The task force recommendations were included in ESHB 2466, which was enacted during the 1992 Legislative Session. Governor Gardner signed the legislation on April 2, 1992, and vetoed several provisions of the bill, including giving judges greater discretion in sentencing juvenile offenders, housing juveniles in alternate residential settings, providing parents a greater role in treatment decisions for children suffering from mental

health and alcohol or substance abuse problems, and issues related to racial disproportionality.

Summary of Substitute Bill: Definitions of community service, community supervision, community-based rehabilitation, monitoring and reporting requirements, and detention facilities are modified to clarify the sentencing options available to judges in sentencing juveniles. Juvenile courts will have greater discretion in housing juveniles in detention facilities. Detention facilities can include secure and non-secure detention facilities and programs. The Department of Social and Health Services will monitor any disproportionality which may result from the greater discretion provided to judges and juvenile courts. County designated mental health professionals are required to provide parents a written reason for not involuntarily detaining and treating their child. County designated alcohol and substance abuse specialists will provide parents with referrals to other services if they deny a request to involuntarily detain and treat a child.

Substitute Bill Compared to Original Bill: The requirement that county alcohol and substance abuse specialists provide parents with written reasons for not involuntarily committing and treating their child is removed.

Fiscal Note: Available.

Effective Date of Substitute Bill: Ninety days after adjournment of session in which bill is passed, except Sections 1, 2, and 3, which shall take effect July 1, 1994.

Testimony For: Judges and juvenile courts need additional discretion in determining the punishment and rehabilitation to provide for juvenile offenders.

Testimony Against: County alcohol and substance abuse specialists should not be forced to provide parents with written reasons for not involuntarily committing and treating their child. The child's right to privacy outweighs the parent's right to provide for their treatment.

Witnesses: (Pro): Representative Leonard, prime sponsor; Margaret Casey, The Children's Alliance; John Powers, Tina Miller and John Vivian, Pioneer Human Services; and Jerry Sheehan, American Civil Liberties Union. (Con): Jean Wessman, Washington State Association of Counties; Steve Frenk, King County Substance Abuse; and Ken Stark, Department of Social and Health Services.