H-1795.1	

HOUSE BILL 1999

State of Washington 55th Legislature 1997 Regular Session

By Representatives Skinner, Cooke, Carrell, Ballasiotes and Dyer Read first time 02/18/97. Referred to Committee on Children & Family Services.

- 1 AN ACT Relating to the involuntary commitment of mentally ill 2 persons; amending RCW 71.05.010, 71.05.040, 71.05.050, 71.05.100, 3 71.05.110, 71.05.150, 71.05.160, 71.05.170, 71.05.180, 71.05.190, 4 71.05.200, 71.05.210, 71.05.215, 71.05.220, 71.05.230, 71.05.240, 5 71.05.260, 71.05.270, 71.05.280, 71.05.290, 71.05.300, 71.05.320, 71.05.330, 71.05.340, 71.05.350, 71.05.360, 71.05.370, 71.05.410, 6 7 71.05.460, 71.05.470, 71.05.490, 71.05.525, 9A.44.010, and 71.24.025; reenacting and amending RCW 71.05.020; adding a new section to chapter 8 71.05 RCW; and creating a new section.
- 10 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 11 **Sec. 1.** RCW 71.05.010 and 1989 c 120 s 1 are each amended to read 12 as follows:
- The provisions of this chapter are intended by the legislature:
- 14 (1) To end inappropriate, indefinite commitment of mentally
- 15 disordered persons and to eliminate legal disabilities that arise from
- 16 such commitment;
- 17 (2) To provide prompt evaluation and ((short term)) timely and
- 18 appropriate treatment of persons with serious mental disorders;
- 19 (3) To safeguard individual rights;

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- 1 (4) To provide continuity of care for persons with serious mental 2 disorders;
- 3 (5) To encourage the full use of all existing agencies, 4 professional personnel, and public funds to prevent duplication of
- 5 services and unnecessary expenditures;
- 6 (6) To encourage, whenever appropriate, that services be provided 7 within the community;
- 8 (7) To protect the public safety.
- 9 **Sec. 2.** RCW 71.05.020 and 1989 c 420 s 13, 1989 c 205 s 8, and 10 1989 c 120 s 2 are each reenacted and amended to read as follows:
- 11 For the purposes of this chapter:
- 12 (1) "Antipsychotic medications," also referred to as
- 13 <u>"neuroleptics," means that class of drugs primarily used to treat</u>
- 14 serious manifestations of mental illness associated with thought
- 15 disorders and currently includes phenothiazines, thioxanthenes,
- 16 <u>butyrophenone</u>, <u>dihydroindolone</u>, <u>and dibenzoxazipine</u>;
- 17 (2) "Attending staff" means any person on the staff of a public or
- 18 private agency having responsibility for the care and treatment of a
- 19 <u>patient;</u>
- 20 <u>(3) "Custody" means involuntary detention under the provisions of</u>
- 21 this chapter or chapter 10.77 RCW, uninterrupted by any period of
- 22 unconditional release from a facility providing involuntary care and
- 23 <u>treatment;</u>
- 24 (4) "Department" means the department of social and health
- 25 <u>services;</u>
- 26 <u>(5) "Developmental disabilities professional" means a person who</u>
- 27 has specialized training and three years of experience in directly
- 28 treating or working with persons with developmental disabilities and is
- 29 <u>a psychiatrist, psychologist, or social worker, and such other</u>
- 30 <u>developmental disabilities professionals as may be defined by rules</u>
- 31 <u>adopted by the secretary;</u>
- 32 (6) "Developmental disability" means that condition defined in RCW
- 33 <u>71A.10.020(2);</u>
- 34 (7) "Evaluation and treatment facility" means any facility which
- 35 can provide directly, or by direct arrangement with other public or
- 36 private agencies, emergency evaluation and treatment, outpatient care,
- 37 and short-term inpatient care to persons suffering from a mental
- 38 disorder, and which is certified as such by the department: PROVIDED,

- 1 That a physically separate and separately operated portion of a state
- 2 hospital may be designated as an evaluation and treatment facility:
- 3 PROVIDED FURTHER, That a facility which is part of, or operated by, the
- 4 department or any federal agency will not require certification: AND
- 5 PROVIDED FURTHER, That no correctional institution or facility, or
- 6 jail, shall be an evaluation and treatment facility within the meaning
- 7 of this chapter;
- 8 (8) "Gravely disabled" means a condition in which a person, as a
- 9 result of a mental disorder: (a) Is in danger of serious physical harm
- 10 resulting from a failure to provide for his or her essential human
- 11 needs of health or safety, or (b) manifests severe deterioration in
- 12 routine functioning evidenced by repeated and escalating loss of
- 13 cognitive or volitional control over his or her actions and is not
- 14 receiving such care as is essential for his or her health or safety;
- 15 (((2))) <u>(9) "Habilitative services" means those services provided</u>
- 16 by program personnel to assist persons in acquiring and maintaining
- 17 life skills and in raising their levels of physical, mental, social,
- 18 and vocational functioning. Habilitative services include education,
- 19 training for employment, and therapy. The habilitative process shall
- 20 be undertaken with recognition of the risk to the public safety
- 21 presented by the individual being assisted as manifested by prior
- 22 charged criminal conduct;
- 23 (10) "Individualized service plan" means a plan prepared by a
- 24 <u>developmental disabilities professional with other professionals as a</u>
- 25 team, for an individual with developmental disabilities, which shall
- 26 <u>state:</u>
- 27 (a) The nature of the person's specific problems, prior charged
- 28 criminal behavior, and habilitation needs;
- 29 (b) The conditions and strategies necessary to achieve the purposes
- 30 of habilitation;
- 31 (c) The intermediate and long-range goals of the habilitation
- 32 program, with a projected timetable for the attainment;
- 33 (d) The rationale for using this plan of habilitation to achieve
- 34 those intermediate and long-range goals;
- 35 (e) The staff responsible for carrying out the plan;
- 36 (f) Where relevant in light of past criminal behavior and due
- 37 consideration for public safety, the criteria for proposed movement to
- 38 <u>less-restrictive settings</u>, <u>criteria for proposed eventual discharge</u>

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- 1 <u>from involuntary confinement, and a projected possible date for</u> 2 <u>discharge from involuntary confinement; and</u>
- 3 (g) The type of residence immediately anticipated for the person 4 and possible future types of residences;
- 5 (11) "Judicial commitment" means a commitment by a court pursuant 6 to the provisions of this chapter;
- (12) "Likelihood of serious harm" means either: (a) A substantial 7 risk that physical harm will be inflicted by an individual upon his or 8 9 her own person, as evidenced by threats or attempts to commit suicide or inflict physical harm on one's self, (b) a substantial risk that 10 physical harm will be inflicted by an individual upon another, as 11 12 evidenced by behavior which has caused such harm or which places another person or persons in reasonable fear of sustaining such harm, 13 14 or (c) a substantial risk that physical harm will be inflicted by an 15 individual upon the property of others, as evidenced by behavior which

has caused substantial loss or damage to the property of others;

- (13) "Medically necessary admission" means an admission which follows intensive outpatient treatment that has failed to produce expected improvement, or an admission to treat a decompensated patient with a potential for significant improvement, or an admission intended to provide immediate twenty-four-hour supervision in order to reestablish and maintain safety;
- (14) "Mental disorder" means any organic, mental, or emotional impairment which has substantial adverse effects on an individual's cognitive or volitional functions;
 - (((3) "Likelihood of serious harm" means either: (a) A substantial risk that physical harm will be inflicted by an individual upon his or her own person, as evidenced by threats or attempts to commit suicide or inflict physical harm on one's self, (b) a substantial risk that physical harm will be inflicted by an individual upon another, as evidenced by behavior which has caused such harm or which places another person or persons in reasonable fear of sustaining such harm, or (c) a substantial risk that physical harm will be inflicted by an individual upon the property of others, as evidenced by behavior which has caused substantial loss or damage to the property of others;
- (4))) (15) "Mental health professional" means a psychiatrist, psychologist, psychiatric nurse, or social worker, and such other mental health professionals as may be defined by rules adopted by the secretary pursuant to the provisions of this chapter;

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38 39 (16) "Peace officer" means a law enforcement official of a public agency or governmental unit, and includes persons specifically given peace officer powers by any state law, local ordinance, or judicial order of appointment;

- (((5) "Judicial commitment" means a commitment by a court pursuant to the provisions of this chapter;
- 7 (6) "Public agency" means any evaluation and treatment facility or 8 institution, hospital, or sanitarium which is conducted for, or 9 includes a department or ward conducted for, the care and treatment of 10 persons who are mentally ill or deranged, if the agency is operated 11 directly by, federal, state, county, or municipal government, or a 12 combination of such governments;
 - (7)) (17) "Private agency" means any person, partnership, corporation, or association not defined as a public agency, whether or not financed in whole or in part by public funds, which constitutes an evaluation and treatment facility or private institution, hospital, or sanitarium, which is conducted for, or includes a department or ward conducted for the care and treatment of persons who are mentally ill;
- (((8) "Attending staff" means any person on the staff of a public
 for private agency having responsibility for the care and treatment of
 a patient;
- 22 (9) "Department" means the department of social and health services 23 of the state of Washington;
- 24 (10) "Resource management services" has the meaning given in 25 chapter 71.24 RCW;
- 26 (11) "Secretary" means the secretary of the department of social 27 and health services, or his designee;
 - (12) "Mental health professional" means a psychiatrist, psychologist, psychiatric nurse, or social worker, and such other mental health professionals as may be defined by rules and regulations adopted by the secretary pursuant to the provisions of this chapter;
 - (13)) (18) "Professional person" shall mean a mental health professional, as above defined, and shall also mean a physician, registered nurse, and such others as may be defined by rules ((and regulations)) adopted by the secretary pursuant to the provisions of this chapter;
 - $((\frac{14}{1}))$ (19) "Psychiatrist" means a person having a license as a physician and surgeon in this state who has in addition completed three years of graduate training in psychiatry in a program approved by the

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1 American medical association or the American osteopathic association 2 and is certified or eligible to be certified by the American board of 3 psychiatry and neurology;

(((15) "Psychologist" means a person who has been licensed as a psychologist pursuant to chapter 18.83 RCW;

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- (16) "Social worker" means a person with a master's or further advanced degree from an accredited school of social work or a degree from a graduate school deemed equivalent under rules and regulations adopted by the secretary;
- 10 (17) "Evaluation and treatment facility" means any facility which can provide directly, or by direct arrangement with other public or 11 private agencies, emergency evaluation and treatment, outpatient care, 12 13 and short term inpatient care to persons suffering from a mental disorder, and which is certified as such by the department of social 14 15 and health services: PROVIDED, That a physically separate and separately operated portion of a state hospital may be designated as an 16 evaluation and treatment facility: PROVIDED FURTHER, That a facility 17 which is part of, or operated by, the department of social and health 18 19 services or any federal agency will not require certification: AND PROVIDED FURTHER, That no correctional institution or facility, or 20 jail, shall be an evaluation and treatment facility within the meaning 21 22 of this chapter;
- 23 (18) "Antipsychotic medications," also referred to as
 24 "neuroleptics," means that class of drugs primarily used to treat
 25 serious manifestations of mental illness associated with thought
 26 disorders and currently includes phenothiazines, thioxanthenes,
 27 butyrophenone, dihydroindolone, and dibenzoxazipine.
- 28 (19) "Developmental disability" means that condition defined in RCW 29 71A.10.020(2);
 - (20) "Developmental disabilities professional" means a person who has specialized training and three years of experience in directly treating or working with persons with developmental disabilities and is a psychiatrist or psychologist, or a social worker, and such other developmental disabilities professionals as may be defined by rules adopted by the secretary;
 - (21) "Habilitative services" means those services provided by program personnel to assist persons in acquiring and maintaining life skills and in raising their levels of physical, mental, social, and vocational functioning. Habilitative services include education,

- 1 training for employment, and therapy. The habilitative process shall
- 2 be undertaken with recognition of the risk to the public safety
- 3 presented by the individual being assisted as manifested by prior
- 4 charged criminal conduct;
- 5 (22))) (20) "Psychologist" means a person who has been licensed as 6 a psychologist pursuant to chapter 18.83 RCW;
- 7 (21) "Public agency" means any evaluation and treatment facility or
- 8 <u>institution</u>, <u>hospital</u>, <u>or sanitarium which is conducted for</u>, <u>or</u>
- 9 includes a department or ward conducted for, the care and treatment of
- 10 persons who are mentally ill or deranged, if the agency is operated
- 11 directly by, federal, state, county, or municipal government, or a
- 12 <u>combination of such governments;</u>
- 13 (22) "Resource management services" has the meaning given in
- 14 <u>chapter 71.24 RCW;</u>
- 15 (23) <u>"Secretary" means the secretary of the department of social</u>
- 16 and health services, or his or her designee;
- 17 (24) "Social worker" means a person with a master's or further
- 18 advanced degree from an accredited school of social work or a degree
- 19 deemed equivalent under rules adopted by the secretary(($\dot{\tau}$
- 20 (24) "Individualized service plan" means a plan prepared by a
- 21 developmental disabilities professional with other professionals as a
- 22 team, for an individual with developmental disabilities, which shall
- 23 state:
- 24 (a) The nature of the person's specific problems, prior charged
- 25 criminal behavior, and habilitation needs;
- 26 (b) The conditions and strategies necessary to achieve the purposes
- 27 of habilitation;
- 28 (c) The intermediate and long-range goals of the habilitation
- 29 program, with a projected timetable for the attainment;
- 30 (d) The rationale for using this plan of habilitation to achieve
- 31 those intermediate and long-range goals;
- 32 (e) The staff responsible for carrying out the plan;
- 33 (f) Where relevant in light of past criminal behavior and due
- 34 consideration for public safety, the criteria for proposed movement to
- 35 less-restrictive settings, criteria for proposed eventual discharge
- 36 from involuntary confinement, and a projected possible date for
- 37 discharge from involuntary confinement; and
- 38 (g) The type of residence immediately anticipated for the person
- 39 and possible future types of residences)).

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Sec. 3. RCW 71.05.040 and 1987 c 439 s 1 are each amended to read as follows:

Persons who are developmentally disabled, impaired by chronic alcoholism or drug abuse, or senile shall not be detained for evaluation and treatment or judicially committed solely by reason of that condition unless such condition causes a person to be gravely disabled or as a result of a mental disorder such condition exists that constitutes a likelihood of serious harm to self or others, or to the property of others.

10 **Sec. 4.** RCW 71.05.050 and 1979 ex.s. c 215 s 6 are each amended to 11 read as follows:

12 Nothing in this chapter shall be construed to limit the right of any person to apply voluntarily to any public or private agency or 13 14 practitioner for treatment of a mental disorder, either by direct 15 application or by referral. Any person voluntarily admitted for inpatient treatment to any public or private agency shall be released 16 immediately upon his or her request. Any person voluntarily admitted 17 18 for inpatient treatment to any public or private agency shall orally be 19 advised of the right to immediate release and further advised of such rights in writing as are secured to them pursuant to this chapter and 20 their rights of access to attorneys, courts, and other legal redress. 21 Their condition and status shall be reviewed at least once each one 22 23 hundred eighty days for evaluation as to the need for further treatment 24 and/or possible release, at which time they shall again be advised of 25 their right to release upon request: PROVIDED HOWEVER, That if the professional staff of any public or private agency or hospital regards 26 a person voluntarily admitted who requests release as presenting, as a 27 result of a mental disorder, an imminent likelihood of serious harm to 28 29 himself or herself or others, or the property of others, or is gravely 30 disabled, they may detain such person for sufficient time to notify the designated county mental health professional of such person's condition 31 32 to enable such mental health professional to authorize such person being further held in custody or transported to an evaluation and 33 34 treatment center pursuant to the provisions of this chapter, which shall in ordinary circumstances be no later than the next judicial day: 35 36 PROVIDED FURTHER, That if a person is brought to the emergency room of a public or private agency or hospital for observation or treatment, 37 ((said)) the person refuses voluntary admission, and the professional 38

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staff of the public or private agency or hospital regards such person 1 as presenting as a result of a mental disorder an imminent likelihood 2 of serious harm to himself or herself or others, or the property of 3 4 others, or as presenting an imminent danger because of grave disability, they may detain such person for sufficient time to notify 5 the designated county mental health professional of such person's 6 7 condition to enable such mental health professional to authorize such 8 person being further held in custody or transported to an evaluation 9 treatment center pursuant to the conditions in this chapter, but which 10 time shall be no more than six hours from the time the professional staff determine that an evaluation by the county designated mental 11 12 health professional is necessary.

13 **Sec. 5.** RCW 71.05.100 and 1987 c 75 s 18 are each amended to read 14 as follows:

15 In addition to the responsibility provided for by RCW 43.20B.330, any person, or his or her estate, or his or her spouse, or the parents 16 of a minor person who is involuntarily detained pursuant to this 17 18 chapter for the purpose of treatment and evaluation outside of a 19 facility maintained and operated by the department shall be responsible for the cost of such care and treatment. In the event that an 20 individual is unable to pay for such treatment or in the event payment 21 would result in a substantial hardship upon the individual or his or 22 her family, then the county of residence of such person shall be 23 24 responsible for such costs. If it is not possible to determine the 25 county of residence of the person, the cost shall be borne by the county where the person was originally detained. The department shall, 26 pursuant to chapter 34.05 RCW, adopt standards as to (1) inability to 27 pay in whole or in part, (2) a definition of substantial hardship, and 28 29 (3) appropriate payment schedules. Such standards shall be applicable 30 to all county mental health administrative boards. responsibility with respect to department services and facilities shall 31 32 continue to be as provided in RCW 43.20B.320 through 43.20B.360 and 33 43.20B.370.

34 **Sec. 6.** RCW 71.05.110 and 1973 1st ex.s. c 142 s 16 are each 35 amended to read as follows:

Attorneys appointed for persons pursuant to this chapter shall be 37 compensated for their services as follows: (1) The person for whom an

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attorney is appointed shall, if he <u>or she</u> is financially able pursuant to standards as to financial capability and indigency set by the superior court of the county in which the proceeding is held, bear the costs of such legal services; (2) if such person is indigent pursuant to such standards, the costs of such services shall be borne by the county in which the proceeding is held, subject however to the responsibility for costs provided in RCW 71.05.320(2).

- 8 **Sec. 7.** RCW 71.05.150 and 1984 c 233 s 1 are each amended to read 9 as follows:
- 10 (1)(a) When a mental health professional designated by the county receives information alleging that a person, as a result of a mental 11 disorder((-)) : (i) Presents a likelihood of serious harm to others or 12 himself or herself, or the property of others, or (ii) is gravely 13 14 disabled((-)) : such mental health professional, after investigation and15 evaluation of the specific facts alleged, and of the reliability and credibility of the person or persons, if any, providing information to 16 initiate detention, may, if satisfied that the allegations are true and 17 18 that the person will not voluntarily seek appropriate treatment, file 19 a petition for initial detention. Before filing the petition, the county designated mental health professional must personally interview 20 21 the person, unless the person refuses an interview, and determine 22 whether the person will voluntarily receive appropriate evaluation and 23 treatment at an evaluation and treatment facility.
 - (b) Whenever it appears, by petition for initial detention, to the satisfaction of a judge of the superior court that a person presents, as a result of a mental disorder, a likelihood of serious harm to others or himself or herself, or the property of others, or is gravely disabled, and that the person has refused or failed to accept appropriate evaluation and treatment voluntarily, the judge may issue an order requiring the person to appear ((not less than)) within twenty-four hours after service of the order at a designated evaluation and treatment facility for not more than a seventy-two hour evaluation and treatment period. The order shall state the address of the evaluation and treatment facility to which the person is to report and whether the required seventy-two hour evaluation and treatment services may be delivered on an outpatient or inpatient basis and that if the person named in the order fails to appear at the evaluation and treatment facility at or before the date and time stated in the order,

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such person may be involuntarily taken into custody for evaluation and 1 The order shall also designate retained counsel or, if counsel is appointed from a list provided by the court, the name, 4 business address, and telephone number of the attorney appointed to represent the person.

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- (c) The mental health professional shall then serve or cause to be served on such person, his or her quardian, and conservator, if any, a copy of the order to appear together with a notice of rights and a petition for initial detention. After service on such person the mental health professional shall file the return of service in court and provide copies of all papers in the court file to the evaluation and treatment facility and the designated attorney. The mental health professional shall notify the court and the prosecuting attorney that a probable cause hearing will be held within seventy-two hours of the date and time of outpatient evaluation or admission to the evaluation and treatment facility. The person shall be permitted to remain in his or her home or other place of his or her choosing prior to the time of evaluation and shall be permitted to be accompanied by one or more of his or her relatives, friends, an attorney, a personal physician, or other professional or religious advisor to the place of evaluation. An attorney accompanying the person to the place of evaluation shall be permitted to be present during the admission evaluation. individual accompanying the person may be present during the admission evaluation. The facility may exclude the individual if his or her presence would present a safety risk, delay the proceedings, or otherwise interfere with the evaluation.
- (d) If the person ordered to appear does appear on or before the date and time specified, the evaluation and treatment facility may admit such person as required by RCW 71.05.170 or may provide treatment on an outpatient basis. If the person ordered to appear fails to appear on or before the date and time specified, the evaluation and treatment facility shall immediately notify the mental health professional designated by the county who may notify a peace officer to take such person or cause such person to be taken into custody and placed in an evaluation and treatment facility. Should the mental health professional notify a peace officer authorizing him or her to take a person into custody under the provisions of this subsection, he or she shall file with the court a copy of such authorization and a notice of detention. At the time such person is taken into custody

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there shall commence to be served on such person, his or her guardian, 1 2 and conservator, if any, a copy of the original order together with a notice of detention, a notice of rights, and a petition for initial 3 4 detention.

- 5 (2) When a mental health professional designated by the county receives information alleging that a person, as the result of a mental 6 7 disorder, presents an imminent likelihood of serious harm to himself or herself or others, or the property of others, or is in imminent danger 8 because of being gravely disabled, after investigation and evaluation 9 10 of the specific facts alleged and of the reliability and credibility of 11 the person or persons providing the information if any, the mental health professional may take such person, or cause by oral or written 12 13 order such person to be taken into emergency custody in an evaluation and treatment facility for not more than seventy-two hours as described 14 15 in RCW 71.05.180.
- 16 (3) A peace officer may take such person or cause such person to be 17 taken into custody and placed in an evaluation and treatment facility pursuant to subsection (1)(d) of this section. 18
- 19 (4) A peace officer may, without prior notice of the proceedings 20 provided for in subsection (1) of this section, take or cause such person to be taken into custody and immediately delivered to an 21 evaluation and treatment facility or the emergency department of a 22 23 local hospital:
 - (a) Only pursuant to subsections (1)(d) and (2) of this section; or
- 25 (b) When he or she has reasonable cause to believe that such person 26 is suffering from a mental disorder and presents an imminent likelihood of serious harm to others or himself or herself, or the property of others, or is in imminent danger because of being gravely disabled.
- 29 (5) Persons delivered to evaluation and treatment facilities by 30 peace officers pursuant to subsection (4)(b) of this section may be held by the facility for a period of up to twelve hours: PROVIDED, 31 That they are examined by a mental health professional within three 32 hours of their arrival. Within twelve hours of their arrival, the 33 designated county mental health professional must file a supplemental 34 35 petition for detention, and commence service on the designated attorney
- for the detained person. 36

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Sec. 8. RCW 71.05.160 and 1974 ex.s. c 145 s 9 are each amended to 37 read as follows: 38

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Any facility receiving a person pursuant to RCW 71.05.150 shall 1 2 require a petition for initial detention stating the circumstances under which the person's condition was made known and stating that such 3 4 officer or person has evidence, as a result of his or her personal 5 observation or investigation, that the actions of the person for which application is made constitute a likelihood of serious harm to himself 6 7 or herself or others, or the property of others, or that he or she is 8 gravely disabled, and stating the specific facts known to him or her as a result of his or her personal observation or investigation, upon 9 10 which he or she bases the belief that such person should be detained for the purposes and under the authority of this chapter. 11

If a person is involuntarily placed in an evaluation and treatment facility pursuant to RCW 71.05.150, on the next judicial day following the initial detention, the mental health professional designated by the county shall file with the court and serve the designated attorney of the detained person the petition or supplemental petition for initial detention, proof of service of notice, and a copy of a notice of emergency detention.

19 **Sec. 9.** RCW 71.05.170 and 1989 c 205 s 10 are each amended to read 20 as follows:

21 Whenever the designated county mental health professional petitions 22 for detention of a person whose actions constitute a likelihood of 23 serious harm to himself or herself or others, or the property of 24 others, or who is gravely disabled, the facility providing seventy-two 25 hour evaluation and treatment must immediately accept on a provisional basis the petition and the person. The facility shall then evaluate 26 the person's condition and admit or release such person in accordance 27 with RCW 71.05.210. The facility shall notify in writing the court and 28 29 the designated county mental health professional of the date and time of the initial detention of each person involuntarily detained in order 30 that a probable cause hearing shall be held no later than seventy-two 31 hours after detention. 32

The duty of a state hospital to accept persons for evaluation and treatment under this section shall be limited by chapter 71.24 RCW.

35 **Sec. 10.** RCW 71.05.180 and 1979 ex.s. c 215 s 11 are each amended to read as follows:

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- If the evaluation and treatment facility admits the person, it may detain him <u>or her</u> for evaluation and treatment for a period not to exceed seventy-two hours from the time of acceptance as set forth in RCW 71.05.170. The computation of such seventy-two hour period shall exclude Saturdays, Sundays and holidays.
- 6 **Sec. 11.** RCW 71.05.190 and 1979 ex.s. c 215 s 12 are each amended 7 to read as follows:
- 8 If the person is not approved for admission by a facility providing 9 seventy-two hour evaluation and treatment, and the individual has not been arrested, the facility shall furnish transportation, if not 10 otherwise available, for the person to his or her place of residence or 11 12 other appropriate place. If the individual has been arrested, the evaluation and treatment facility shall detain the individual for not 13 14 more than eight hours at the request of the peace officer in order to 15 enable a peace officer to return to the facility and take the individual back into custody. 16
- 17 **Sec. 12.** RCW 71.05.200 and 1989 c 120 s 5 are each amended to read 18 as follows:
- (1) Whenever any person is detained for evaluation and treatment 19 pursuant to this chapter, both the person and, if possible, a 20 21 responsible member of his or her immediate family, guardian, or 22 conservator, if any, shall be advised as soon as possible in writing or 23 orally, by the officer or person taking him or her into custody or by 24 personnel of the evaluation and treatment facility where the person is detained that unless the person is released or voluntarily admits 25 himself or herself for treatment within seventy-two hours of the 26 27 initial detention:
- 28 (a) That a judicial hearing in a superior court, either by a judge 29 or court commissioner thereof, shall be held not more than seventy-two hours after the initial detention to determine whether there is 30 probable cause to detain the person after the seventy-two hours have 31 expired for up to an additional fourteen days without further automatic 32 33 hearing for the reason that the person is a mentally ill person whose mental disorder presents a likelihood of serious harm to others or 34 35 himself or herself, or the property of others, or that the person is gravely disabled; 36

(b) That the person has a right to communicate immediately with an attorney; has a right to have an attorney appointed to represent him or her before and at the probable cause hearing if he or she is indigent; and has the right to be told the name and address of the attorney the mental health professional has designated pursuant to this chapter;

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- (c) That the person has the right to remain silent and that any statement he or she makes may be used against him or her;
- 8 (d) That the person has the right to present evidence and to cross-9 examine witnesses who testify against him or her at the probable cause 10 hearing; and
- 11 (e) That the person has the right to refuse medications, including 12 antipsychotic medication beginning twenty-four hours prior to the 13 probable cause hearing.
- (2) When proceedings are initiated under RCW 71.05.150 (2), (3), or 14 15 (4)(b), no later than twelve hours after such person is admitted to the evaluation and treatment facility the personnel of the evaluation and 16 17 treatment facility or the designated mental health professional shall serve on such person a copy of the petition for initial detention and 18 19 the name, business address, and phone number of the designated attorney 20 and shall forthwith commence service of a copy of the petition for initial detention on ((said)) the designated attorney. 21
- 22 (3) The judicial hearing described in subsection (1) of this 23 section is hereby authorized, and shall be held according to the 24 provisions of subsection (1) of this section and rules promulgated by 25 the supreme court.
- 26 **Sec. 13.** RCW 71.05.210 and 1994 sp.s. c 9 s 747 are each amended 27 to read as follows:

Each person involuntarily admitted to an evaluation and treatment facility shall, within twenty-four hours of his or her admission, be examined and evaluated by a licensed physician who may be assisted by a physician assistant according to chapter 18.71A RCW or an advanced registered nurse practitioner according to chapter 18.79 RCW and a mental health professional as defined in this chapter, and shall receive such treatment and care as his or her condition requires including treatment on an outpatient basis for the period that he or she is detained, except that, beginning twenty-four hours prior to a court proceeding, the individual may refuse all but emergency lifesaving treatment, and the individual shall be informed at an

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- 1 appropriate time of his or her right to such refusal of treatment.
- 2 Such person shall be detained up to seventy-two hours, if, in the
- 3 opinion of the professional person in charge of the facility, or his or
- 4 her professional designee, the person presents a likelihood of serious
- 5 harm to himself or herself or others, or the property of others, or is
- 6 gravely disabled. A person who has been detained for seventy-two hours
- 7 shall no later than the end of such period be released, unless referred
- 8 for further care on a voluntary basis, or detained pursuant to court
- 9 order for further treatment as provided in this chapter.
- If, after examination and evaluation, the licensed physician and mental health professional determine that the initial needs of the person would be better served by placement in a chemical dependency treatment facility, then the person shall be referred to an approved
- 14 treatment program defined under RCW 70.96A.020.
- 15 An evaluation and treatment center admitting any person pursuant to
- 16 this chapter whose physical condition reveals the need for
- 17 hospitalization shall assure that such person is transferred to an
- 18 appropriate hospital for treatment. Notice of such fact shall be given
- 19 to the court, the designated attorney, and the designated county mental
- 20 health professional and the court shall order such continuance in
- 21 proceedings under this chapter as may be necessary, but in no event may
- 22 this continuance be more than fourteen days.
- 23 **Sec. 14.** RCW 71.05.215 and 1991 c 105 s 1 are each amended to read 24 as follows:
- 25 (1) A person found to be gravely disabled or presents a likelihood
- 26 of serious harm as a result of a mental disorder has a right to refuse
- 27 antipsychotic medication unless it is determined that the failure to
- 28 medicate may result in a likelihood of serious harm or substantial
- 29 deterioration or substantially prolong the length of involuntary
- 30 commitment and there is no less intrusive course of treatment than
- 31 medication in the best interest of that person.
- 32 (2) The department shall adopt rules to carry out the purposes of
- 33 this chapter. These rules shall include:
- 34 (a) An attempt to obtain the informed consent of the person prior
- 35 to administration of antipsychotic medication.
- 36 (b) For short-term treatment up to thirty days, the right to refuse
- 37 antipsychotic medications unless there is an additional concurring
- 38 medical opinion approving medication.

- 1 (c) For continued treatment beyond thirty days through the hearing 2 on any petition filed under RCW 71.05.370(7), the right to periodic 3 review of the decision to medicate by the medical director or designee.
- 4 (d) Administration of antipsychotic medication in an emergency and 5 review of this decision within twenty-four hours. An emergency exists if the person presents an imminent likelihood of serious harm to self 6 7 or others, or to the property of others, and medically acceptable 8 alternatives to administration of antipsychotic medications are not 9 available or are unlikely to be successful; and in the opinion of the 10 physician, the person's condition constitutes an emergency requiring the treatment be instituted prior to obtaining a second medical 11 12 opinion.
- (e) Documentation in the medical record of the physician's attempt to obtain informed consent and the reasons why antipsychotic medication is being administered over the person's objection or lack of consent.
- 16 **Sec. 15.** RCW 71.05.220 and 1973 1st ex.s. c 142 s 27 are each 17 amended to read as follows:

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At the time a person is involuntarily admitted to an evaluation and treatment facility, the professional person in charge or his or her designee shall take reasonable precautions to inventory and safeguard the personal property of the person detained. A copy of the inventory, signed by the staff member making it, shall be given to the person detained and shall, in addition, be open to inspection to any responsible relative, subject to limitations, if any, specifically imposed by the detained person. For purposes of this section, "responsible relative" includes the guardian, conservator, attorney, spouse, parent, adult child, or adult brother or sister of the person. The facility shall not disclose the contents of the inventory to any other person without the consent of the patient or order of the court.

30 **Sec. 16.** RCW 71.05.230 and 1987 c 439 s 3 are each amended to read 31 as follows:

A person detained for seventy-two hour evaluation and treatment may be detained for not more than fourteen additional days of involuntary intensive treatment or ninety additional days of a less restrictive alternative to involuntary intensive treatment if the following conditions are met:

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- 1 (1) The professional staff of the agency or facility providing 2 evaluation services has analyzed the person's condition and finds that 3 ((said)) the condition is caused by mental disorder and either results 4 in a likelihood of serious harm to the person detained or to others, or 5 to the property of others, or results in the detained person being 6 gravely disabled and are prepared to testify those conditions are met; 7 and
 - (2) The person has been advised of the need for voluntary treatment and the professional staff of the facility has evidence that he or she has not in good faith volunteered; and

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- 11 (3) The facility providing intensive treatment is certified to 12 provide such treatment by the department ((of social and health 13 services)); and
- (4) The professional staff of the agency or facility or the mental 14 15 health professional designated by the county has filed a petition for fourteen day involuntary detention or a ninety day less restrictive 16 17 alternative with the court. The petition must be signed either by two physicians or by one physician and a mental health professional who 18 19 have examined the person. If involuntary detention is sought the 20 petition shall state facts that support the finding that such person, as a result of mental disorder, presents a likelihood of serious harm 21 to others or himself or herself, or to the property of others, or is 22 23 gravely disabled and that there are no less restrictive alternatives to 24 detention in the best interest of such person or others. The petition 25 shall state specifically that less restrictive alternative treatment was considered and specify why treatment less restrictive than 26 detention is not appropriate. If an involuntary less restrictive 27 alternative is sought, the petition shall state facts that support the 28 finding that such person, as a result of mental disorder, presents a 29 30 likelihood of serious harm to others or himself or herself, or to the property of others, or is gravely disabled and shall set forth the less 31 restrictive alternative proposed by the facility; and 32
- (5) A copy of the petition has been served on the detained person, his or her attorney and his or her guardian or conservator, if any, prior to the probable cause hearing; and
- 36 (6) The court at the time the petition was filed and before the 37 probable cause hearing has appointed counsel to represent such person 38 if no other counsel has appeared; and

- (7) The court has ordered a fourteen day involuntary intensive 1 treatment or a ninety day less restrictive alternative treatment after 2 a probable cause hearing has been held pursuant to RCW 71.05.240; and 3 4 (8) At the conclusion of the initial commitment period, the professional staff of the agency or facility or the mental health 5 professional designated by the county may petition for an additional 6 7 period of either ninety days of less restrictive alternative treatment 8 or ninety days of involuntary intensive treatment as provided in RCW 9 71.05.290; and
- (9) If the hospital or facility designated to provide outpatient treatment is other than the facility providing involuntary treatment, the outpatient facility so designated has agreed to assume such responsibility.
- 14 **Sec. 17.** RCW 71.05.240 and 1992 c 168 s 3 are each amended to read 15 as follows:

If a petition is filed for fourteen day involuntary treatment or 16 ninety days of less restrictive alternative treatment, the court shall 17 18 hold a probable cause hearing within seventy-two hours of the initial detention of such person as determined in RCW 71.05.180((, as now or 19 hereafter amended)). If requested by the detained person or his or her 20 attorney, the hearing may be postponed for a period not to exceed 21 22 forty-eight hours. The hearing may also be continued subject to the 23 conditions set forth in RCW 71.05.210 or subject to the petitioner's 24 showing of good cause for a period not to exceed twenty-four hours.

25 At the conclusion of the probable cause hearing, if the court finds by a preponderance of the evidence that such person, as the result of 26 mental disorder, presents a likelihood of serious harm to others or 27 himself or herself, or to the property of others, or is gravely 28 29 disabled, and, after considering less restrictive alternatives to 30 involuntary detention and treatment, finds that no such alternatives are in the best interests of such person or others, the court shall 31 order that such person be detained for involuntary treatment not to 32 exceed fourteen days in a facility certified to provide treatment by 33 34 the department ((of social and health services)). If the court finds that such person, as the result of a mental disorder, presents a 35 36 likelihood of serious harm to others or himself or herself, or to the 37 property of others, or is gravely disabled, but that treatment in a 38 less restrictive setting than detention is in the best interest of such

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- 1 person or others, the court shall order an appropriate less restrictive 2 course of treatment for not to exceed ninety days.
- The court shall specifically state to such person and give such person notice in writing that if involuntary treatment beyond the fourteen day period or beyond the ninety days of less restrictive treatment is to be sought, such person will have the right to a full
- 7 hearing or jury trial as required by RCW 71.05.310. The court shall
- 8 also provide written notice that the person is barred from the
- 9 possession of firearms.
- 10 **Sec. 18.** RCW 71.05.260 and 1987 c 439 s 7 are each amended to read 11 as follows:
- 12 (1) Involuntary intensive treatment ordered at the time of the 13 probable cause hearing shall be for no more than fourteen days, and 14 shall terminate sooner when, in the opinion of the professional person
- 15 in charge of the facility or his or her professional designee, (a) the
- 16 person no longer constitutes a likelihood of serious harm to himself or
- 17 herself or others, or to the property of others, or (b) no longer is
- 18 gravely disabled, or (c) is prepared to accept voluntary treatment upon
- 19 referral, or (d) is to remain in the facility providing intensive
- 20 treatment on a voluntary basis.
- 21 (2) A person who has been detained for fourteen days of intensive
- 22 treatment shall be released at the end of the fourteen days unless one
- 23 of the following applies: (a) Such person agrees to receive further
- 24 treatment on a voluntary basis; or (b) such person is a patient to whom
- 25 RCW 71.05.280 is applicable.
- 26 **Sec. 19.** RCW 71.05.270 and 1973 1st ex.s. c 142 s 32 are each
- 27 amended to read as follows:
- Nothing in this chapter shall prohibit the professional person in
- 29 charge of a treatment facility, or his or her professional designee,
- 30 from permitting a person detained for intensive treatment to leave the
- 31 facility for prescribed periods during the term of the person's
- 32 detention, under such conditions as may be appropriate.
- 33 **Sec. 20.** RCW 71.05.280 and 1986 c 67 s 3 are each amended to read 34 as follows:

- At the expiration of the fourteen day period of intensive treatment, a person may be confined for further treatment pursuant to RCW 71.05.320 if:
- 4 (1) Such person after having been taken into custody for evaluation 5 and treatment has threatened, attempted, or inflicted: (a) Physical 6 harm upon the person of another or himself <u>or herself</u>, or substantial 7 damage upon the property of another, and (b) as a result of mental 8 disorder presents a likelihood of serious harm to others or himself <u>or</u> 9 <u>herself</u>, or to the property of others; or
- (2) Such person was taken into custody as a result of conduct in which he <u>or she</u> attempted or inflicted physical harm upon the person of another or himself <u>or herself</u>, <u>or upon the property of others</u>, and continues to present, as a result of mental disorder, a likelihood of serious harm to others or himself <u>or herself</u>, <u>or to the property of others</u>; or
 - (3) Such person has been determined to be incompetent and criminal charges have been dismissed pursuant to RCW 10.77.090(3), ((as now or hereafter amended,)) and has committed acts constituting a felony, and as a result of a mental disorder, presents a substantial likelihood of repeating similar acts. In any proceeding pursuant to this subsection it shall not be necessary to show intent, wilfulness, or state of mind as an element of the felony; or
 - (4) Such person is gravely disabled.

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- ((For the purposes of this chapter "custody" shall mean involuntary detention under the provisions of this chapter or chapter 10.77 RCW, uninterrupted by any period of unconditional release from a facility providing involuntary care and treatment.))
- NEW SECTION. Sec. 21. A new section is added to chapter 71.05 RCW to read as follows:
- 30 For the purposes of continued commitment under the process provided in RCW 71.05.280 and 71.05.320(2), "substantial risk of harm," as used 31 in interpreting "likelihood of serious harm," does not require evidence 32 of recent, overt acts, but does require evidence of danger of serious 33 34 physical harm or probable harmful consequences from failure to receive care essential for health and safety. Evidence that an individual 35 would not receive such care as is essential for his or her health and 36 safety, resulting in a high probability of harmful consequences, can be 37 shown by a prior history or pattern of: (1) Decompensation and 38

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- 1 discontinuation of treatment resulting in repeated hospitalizations; or
- 2 (2) law enforcement officer intervention resulting in a juvenile
- 3 offense, criminal charge, or diversion program.

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71.05.280.

- 4 **Sec. 22.** RCW 71.05.290 and 1986 c 67 s 4 are each amended to read 5 as follows:
- 6 (1) At any time during a person's fourteen day intensive treatment period, the professional person in charge of a treatment facility or 8 his <u>or her</u> professional designee or the designated county mental health 9 professional may petition the superior court for an order requiring 10 such person to undergo an additional period of treatment. Such 11 petition must be based on one or more of the grounds set forth in RCW
- (2) The petition shall summarize the facts which support the need 13 14 for further confinement and shall be supported by affidavits signed by 15 two examining physicians, or by one examining physician and examining mental health professional. The affidavits shall describe in detail 16 the behavior of the detained person which supports the petition and 17 18 shall explain what, if any, less restrictive treatments which are 19 alternatives to detention are available to such person, and shall state the willingness of the affiant to testify to such facts in subsequent 20 21 judicial proceedings under this chapter.
- (3) If a person has been determined to be incompetent pursuant to RCW 10.77.090(3) ((as now existing or hereafter amended)), then the professional person in charge of the treatment facility or his or her professional designee or the county designated mental health professional may directly file a petition for one hundred eighty day treatment under RCW 71.05.280(3). No petition for initial detention or fourteen day detention is required before such a petition may be filed.
- 29 **Sec. 23.** RCW 71.05.300 and 1989 c 420 s 14 are each amended to 30 read as follows:
- 31 The petition for ninety day treatment shall be filed with the clerk 32 of the superior court at least three days before expiration of the 33 fourteen-day period of intensive treatment. At the time of filing such 34 petition, the clerk shall set a time for the person to come before the 35 court on the next judicial day after the day of filing unless such 36 appearance is waived by the person's attorney, and the clerk shall 37 notify the designated county mental health professional. The

designated county mental health professional shall immediately notify the person detained, his or her attorney, if any, and his or her guardian or conservator, if any, and the prosecuting attorney, and provide a copy of the petition to such persons as soon as possible.

5 At the time set for appearance the detained person shall be brought before the court, unless such appearance has been waived and the court 6 7 shall advise him or her of his or her right to be represented by an 8 attorney and of his or her right to a jury trial. If the detained 9 person is not represented by an attorney, or is indigent or is 10 unwilling to retain an attorney, the court shall immediately appoint an attorney to represent him or her. The court shall, if requested, 11 appoint a reasonably available licensed physician, psychologist, or 12 13 psychiatrist, designated by the detained person to examine and testify on behalf of the detained person. 14

The court may, if requested, also appoint a professional person as defined in RCW 71.05.020(((12))) to seek less restrictive alternative courses of treatment and to testify on behalf of the detained person.

In the case of a developmentally disabled person who has been determined to be incompetent pursuant to RCW 10.77.090(3), then the appointed professional person under this section shall be a developmental disabilities professional.

22 The court shall also set a date for a full hearing on the petition 23 as provided in RCW 71.05.310.

24 **Sec. 24.** RCW 71.05.320 and 1989 c 420 s 15 are each amended to 25 read as follows:

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(1) If the court or jury finds that grounds set forth in RCW 71.05.280 have been proven and that the best interests of the person or others will not be served by a less restrictive treatment which is an alternative to detention, the court shall remand him or her to the custody of the department ((of social and health services)) or to a facility certified for ninety day treatment by the department ((of social and health services)) for a further period of intensive treatment not to exceed ninety days from the date of judgment: PROVIDED, That if the grounds set forth in RCW 71.05.280(3) are the basis of commitment, then the period of treatment may be up to but not exceed one hundred eighty days from the date of judgment in a facility certified for one hundred eighty day treatment by the department. If the committed person is developmentally disabled and has been

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determined incompetent pursuant to RCW 10.77.090(3), and the best 1 interests of the person or others will not be served by a less-2 restrictive treatment which is an alternative to detention, the court 3 4 shall remand him or her to the custody of the department ((of social and health services)) or to a facility certified for one hundred 5 eighty-day treatment by the department. When appropriate and subject 6 7 to available funds, treatment and training of such persons must be 8 provided in a program specifically reserved for the treatment and 9 training of developmentally disabled persons. A person so committed 10 shall receive habilitation services pursuant to an individualized service plan specifically developed to treat the behavior which was the 11 subject of the criminal proceedings. ((Said)) The treatment program 12 13 shall be administered by developmental disabilities professionals and others trained specifically in the needs of developmentally disabled 14 15 The department may limit admissions to this specialized 16 program in order to ensure that expenditures for services do not exceed 17 amounts appropriated by the legislature and allocated by the department for such services. The department may establish admission priorities 18 19 in the event that the number of eligible persons exceeds the limits set 20 by the department. An order for treatment less restrictive than involuntary detention may include conditions, and if such conditions 21 are not adhered to, the designated mental health professional or 22 23 developmental disabilities professional may order the 24 apprehended under the terms and conditions of RCW 71.05.340 ((as now or 25 hereafter amended)). 26

If the court or jury finds that grounds set forth in RCW 71.05.280 have been proven, but finds that treatment less restrictive than detention will be in the best interest of the person or others, then the court shall remand him <u>or her</u> to the custody of the department ((of social and health services)) or to a facility certified for ninety day treatment by the department ((of social and health services)) or to a less restrictive alternative for a further period of less restrictive treatment not to exceed ninety days from the date of judgment: PROVIDED, That if the grounds set forth in RCW 71.05.280(3) are the basis of commitment, then the period of treatment may be up to but not exceed one hundred eighty days from the date of judgment.

37 (2) ((Said)) <u>The</u> person shall be released from involuntary 38 treatment at the expiration of the period of commitment imposed under 39 subsection (1) of this section unless the superintendent or

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professional person in charge of the facility in which he <u>or she</u> is confined, or in the event of a less restrictive alternative, the designated mental health professional or developmental disabilities professional, files a new petition for involuntary treatment on the grounds that the committed person;

- (a) During the current period of court ordered treatment: (i) Has threatened, attempted, or inflicted physical harm upon the person of another, or substantial damage upon the property of another, and (ii) as a result of mental disorder or developmental disability presents a likelihood of serious harm to others; or
- (b) Was taken into custody as a result of conduct in which he or she attempted or inflicted serious physical harm upon the person of another, and continues to present, as a result of mental disorder or developmental disability a likelihood of serious harm to others; or
- (c) Is in custody pursuant to RCW 71.05.280(3) and as a result of mental disorder or developmental disability presents a substantial likelihood of repeating similar acts considering the charged criminal behavior, life history, progress in treatment, and the public safety; or
 - (d) Continues to be gravely disabled.

 If the conduct required to be proven in subsections (b) and (c) of this section was found by a judge or jury in a prior trial under this chapter, it shall not be necessary to reprove that element. Such new petition for involuntary treatment shall be filed and heard in the superior court of the county of the facility which is filing the new petition for involuntary treatment unless good cause is shown for a change of venue. The cost of the proceedings shall be borne by the state.

The hearing shall be held as provided in RCW 71.05.310, and if the court or jury finds that the grounds for additional confinement as set forth in this subsection are present, the court may order the committed person returned for an additional period of treatment not to exceed one hundred eighty days from the date of judgment. At the end of the one hundred eighty day period of commitment, the committed person shall be released unless a petition for another one hundred eighty day period of continued treatment is filed and heard in the same manner as provided ((herein above)) in this subsection. Successive one hundred eighty day commitments are permissible on the same grounds and pursuant to the same procedures as the original one hundred eighty day commitment. No

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- l person committed as ((herein)) provided <u>in this subsection</u> may be
- 2 detained unless a valid order of commitment is in effect. No order of
- 3 commitment can exceed one hundred eighty days in length.

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- 4 **Sec. 25.** RCW 71.05.330 and 1986 c 67 s 1 are each amended to read 5 as follows:
- (1) Nothing in this chapter shall prohibit the superintendent or professional person in charge of the hospital or facility in which the person is being involuntarily treated from releasing him or her prior to the expiration of the commitment period when, in the opinion of the superintendent or professional person in charge, the person being involuntarily treated no longer presents a likelihood of serious harm to others or to the property of others.
 - Whenever the superintendent or professional person in charge of a hospital or facility providing involuntary treatment pursuant to this chapter releases a person prior to the expiration of the period of commitment, the superintendent or professional person in charge shall in writing notify the court which committed the person for treatment.
- 18 (2) Before a person committed under grounds set forth in RCW 19 71.05.280(3) or 71.05.320(2)(c) is released under this section, the superintendent or professional person in charge shall in writing notify 20 21 the prosecuting attorney of the county in which the criminal charges against the committed person were dismissed, of the release date. 22 23 Notice shall be provided at least thirty days before the release date. 24 Within twenty days after receiving notice, the prosecuting attorney may 25 petition the court in the county in which the person is being involuntarily treated for a hearing to determine whether the person is 26 to be released. The prosecuting attorney shall provide a copy of the 27 28 petition to the superintendent or professional person in charge of the 29 hospital or facility providing involuntary treatment, the attorney, if any, and the quardian or conservator of the committed person. 30 court shall conduct a hearing on the petition within ten days of filing 31 32 The committed person shall have the same rights with 33 respect to notice, hearing, and counsel as for an involuntary treatment 34 proceeding, except as set forth in this subsection and except that there shall be no right to jury trial. The issue to be determined at 35 36 the hearing is whether or not the person may be released without 37 substantial danger to other persons, or substantial likelihood of 38 committing felonious acts jeopardizing public safety or security.

the court disapproves of the release, it may do so only on the basis of 1 2 substantial evidence. Pursuant to the determination of the court upon the hearing, the committed person shall be released or shall be 3 4 returned for involuntary treatment subject to release at the end of the 5 period for which he or she was committed, or otherwise in accordance with the provisions of this chapter. 6

7 Sec. 26. RCW 71.05.340 and 1987 c 439 s 10 are each amended to read as follows: 8

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(1)(a) When, in the opinion of the superintendent or the professional person in charge of the hospital or facility providing 11 involuntary treatment, the committed person can be appropriately served by outpatient treatment prior to or at the expiration of the period of commitment, then such outpatient care may be required as a condition 13 14 for early release for a period which, when added to the inpatient 15 treatment period, shall not exceed the period of commitment. hospital or facility designated to provide outpatient treatment is other than the facility providing involuntary treatment, the outpatient 17 18 facility so designated must agree in writing to assume 19 responsibility. A copy of the conditions for early release shall be given to the patient, the designated county mental health professional 21 in the county in which the patient is to receive outpatient treatment, and to the court of original commitment.

(b) Before a person committed under grounds set forth in RCW 71.05.280(3) or 71.05.320(2)(c) is conditionally released under (a) of this subsection, the superintendent or professional person in charge of the hospital or facility providing involuntary treatment shall in writing notify the prosecuting attorney of the county in which the criminal charges against the committed person were dismissed, of the decision to conditionally release the person. Notice and a copy of the conditions for early release shall be provided at least thirty days before the person is released from inpatient care. Within twenty days after receiving notice, the prosecuting attorney may petition the court in the county that issued the commitment order to hold a hearing to determine whether the person may be conditionally released and the terms of the conditional release. The prosecuting attorney shall provide a copy of the petition to the superintendent or professional person in charge of the hospital or facility providing involuntary treatment, the attorney, if any, and guardian or conservator of the

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committed person, and the court of original commitment. If the county 1 2 in which the committed person is to receive outpatient treatment is the same county in which the criminal charges against the committed person 3 4 were dismissed, then the court shall, upon the motion of the 5 prosecuting attorney, transfer the proceeding to the court in that county. The court shall conduct a hearing on the petition within ten 6 days of the filing of the petition. The committed person shall have 7 8 the same rights with respect to notice, hearing, and counsel as for an 9 involuntary treatment proceeding, except as set forth in this 10 subsection and except that there shall be no right to jury trial. 11 issue to be determined at the hearing is whether or not the person may 12 be conditionally released without substantial danger to other persons, 13 or substantial likelihood of committing felonious acts jeopardizing public safety or security. If the court disapproves of the conditional 14 15 release, it may do so only on the basis of substantial evidence. Pursuant to the determination of the court upon the hearing, the 16 17 conditional release of the person shall be approved by the court on the same or modified conditions or the person shall be returned for 18 19 involuntary treatment on an inpatient basis subject to release at the 20 end of the period for which he or she was committed, or otherwise in accordance with the provisions of this chapter. 21

- (2) The hospital or facility designated to provide outpatient care or the secretary may modify the conditions for continued release when such modification is in the best interest of the person. Notification of such changes shall be sent to all persons receiving a copy of the original conditions.
- (3)(a) If the hospital or facility designated to provide outpatient care, the designated county mental health professional or the secretary determines that a conditionally released person is failing to adhere to the terms and conditions of his or her release, or that substantial deterioration in the person's functioning has occurred to the extent that rehospitalization is a "medically necessary admission", then, upon notification by the hospital or facility designated to provide outpatient care, or on his or her own motion, the designated county mental health professional or the secretary may order that the conditionally released person be apprehended and taken into custody and temporarily detained in an evaluation and treatment facility in or near the county in which he or she is receiving outpatient treatment. The person shall be detained until such time, not exceeding five days, as

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38 39 a hearing can be scheduled to determine whether or not the person should be returned to the hospital or facility from which he or she had been conditionally released. The designated county mental health professional or the secretary may modify or rescind such order at any time prior to commencement of the court hearing.

(b) The court that originally ordered commitment shall be notified 6 7 within two judicial days of a person's detention under the provisions 8 of this section, and the designated county mental health professional 9 or the secretary shall file his or her petition and order of 10 apprehension and detention with the court and serve them upon the person detained. His or her attorney, if any, and his or her guardian 11 12 or conservator, if any, shall receive a copy of such papers as soon as 13 possible. Such person shall have the same rights with respect to notice, hearing, and counsel as for an involuntary treatment 14 15 proceeding, except as specifically set forth in this section and except 16 that there shall be no right to jury trial. The issues to be 17 determined shall be whether the conditionally released person did or did not adhere to the terms and conditions of his or her release or 18 19 that substantial deterioration in the person's functioning has occurred; and, if he or she failed to adhere to such terms and 20 conditions, or that substantial deterioration in the person's 21 functioning has occurred, whether the conditions of release should be 22 23 modified or the person should be returned to the facility.

(c) Pursuant to the determination of the court upon such hearing, the conditionally released person shall either continue to be conditionally released on the same or modified conditions or shall be returned for involuntary treatment on an inpatient basis subject to release at the end of the period for which he or she was committed for involuntary treatment, or otherwise in accordance with the provisions of this chapter. Such hearing may be waived by the person and his or her counsel and his or her guardian or conservator, if any, but shall not be waivable unless all such persons agree to waive, and upon such waiver the person may be returned for involuntary treatment or continued on conditional release on the same or modified conditions.

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(4) The proceedings set forth in subsection (3) of this section may be initiated by the designated county mental health professional or the secretary on the same basis set forth therein without requiring or ordering the apprehension and detention of the conditionally released person, in which case the court hearing shall take place in not less

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- 1 than five days from the date of service of the petition upon the 2 conditionally released person.
- 3 Upon expiration of the period of commitment, or when the person is 4 released from outpatient care, notice in writing to the court which 5 committed the person for treatment shall be provided.
- 6 (5) The grounds and procedures for revocation of less restrictive 7 alternative treatment shall be the same as those set forth in this 8 section for conditional releases.
- 9 (6) In the event of a revocation of a conditional release, the 10 subsequent treatment period may be for no longer than the actual period 11 authorized in the original court order.
- 12 **Sec. 27.** RCW 71.05.350 and 1973 1st ex.s. c 142 s 40 are each 13 amended to read as follows:
- 14 No indigent patient shall be conditionally released or discharged 15 from involuntary treatment without suitable clothing, superintendent of a state hospital shall furnish the same, together 16 with such sum of money as he ((shall)) or she deems necessary for the 17 18 immediate welfare of the patient. Such sum of money shall be the same 19 as the amount required by RCW 72.02.100 to be provided to persons in need being released from correctional institutions. As funds are 20 available, the secretary may provide payment to indigent persons 21 22 conditionally released pursuant to this chapter consistent with the optional provisions of RCW 72.02.100 and 72.02.110, and may adopt rules 23 24 and regulations to do so.
- 25 **Sec. 28.** RCW 71.05.360 and 1974 ex.s. c 145 s 25 are each amended 26 to read as follows:
- (1) Every person involuntarily detained or committed under the provisions of this chapter shall be entitled to all the rights set forth in this chapter and shall retain all rights not denied him or her under this chapter.
- 31 (2) Each person involuntarily detained or committed pursuant to 32 this chapter shall have the right to adequate care and individualized 33 treatment.
- 34 **Sec. 29.** RCW 71.05.370 and 1991 c 105 s 5 are each amended to read 35 as follows:

Insofar as danger to the individual or others is not created, each person involuntarily detained, treated in a less restrictive alternative course of treatment, or committed for treatment and evaluation pursuant to this chapter shall have, in addition to other rights not specifically withheld by law, the following rights, a list of which shall be prominently posted in all facilities, institutions, and hospitals providing such services:

- (1) To wear his or her own clothes and to keep and use his or her own personal possessions, except when deprivation of same is essential to protect the safety of the resident or other persons;
- 11 (2) To keep and be allowed to spend a reasonable sum of his or her 12 own money for canteen expenses and small purchases;
- 13 (3) To have access to individual storage space for his or her 14 private use;
 - (4) To have visitors at reasonable times;

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- 16 (5) To have reasonable access to a telephone, both to make and 17 receive confidential calls;
- 18 (6) To have ready access to letter writing materials, including 19 stamps, and to send and receive uncensored correspondence through the 20 mails;
- (7) Not to consent to the administration of antipsychotic medications beyond the hearing conducted pursuant to RCW 71.05.320(2) or the performance of electroconvulsant therapy or surgery, except emergency life-saving surgery, unless ordered by a court of competent jurisdiction pursuant to the following standards and procedures:
 - (a) The administration of antipsychotic medication or electroconvulsant therapy shall not be ordered unless the petitioning party proves by clear, cogent, and convincing evidence that there exists a compelling state interest that justifies overriding the patient's lack of consent to the administration of antipsychotic medications or electroconvulsant therapy, that the proposed treatment is necessary and effective, and that medically acceptable alternative forms of treatment are not available, have not been successful, or are not likely to be effective.
- 35 (b) The court shall make specific findings of fact concerning: (i)
 36 The existence of one or more compelling state interests; (ii) the
 37 necessity and effectiveness of the treatment; and (iii) the person's
 38 desires regarding the proposed treatment. If the patient is unable to
 39 make a rational and informed decision about consenting to or refusing

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- the proposed treatment, the court shall make a substituted judgment for the patient as if he or she were competent to make such a determination.
- 4 (c) The person shall be present at any hearing on a request to 5 administer antipsychotic medication or electroconvulsant therapy filed pursuant to this subsection. The person has the right: (i) To be 6 7 represented by an attorney; (ii) to present evidence; (iii) to cross-8 examine witnesses; (iv) to have the rules of evidence enforced; (v) to 9 remain silent; (vi) to view and copy all petitions and reports in the 10 court file; and (vii) to be given reasonable notice and an opportunity to prepare for the hearing. The court may appoint a psychiatrist, 11 psychologist within their scope of practice, or physician to examine 12 13 and testify on behalf of such person. The court shall appoint a psychiatrist, psychologist within their scope of practice, or physician 14 15 designated by such person or the person's counsel to testify on behalf of the person in cases where an order for electroconvulsant therapy is 16 17 sought.
- (d) An order for the administration of antipsychotic medications entered following a hearing conducted pursuant to this section shall be effective for the period of the current involuntary treatment order, and any interim period during which the person is awaiting trial or hearing on a new petition for involuntary treatment or involuntary medication.
- (e) Any person detained pursuant to RCW 71.05.320(2), who subsequently refuses antipsychotic medication, shall be entitled to the procedures set forth in RCW 71.05.370(7).
- (f) Antipsychotic medication may be administered to a nonconsenting person detained or committed pursuant to this chapter without a court order pursuant to RCW 71.05.215(2) or under the following circumstances:
- 31 (i) A person presents an imminent likelihood of serious harm to 32 self or others or to the property of others;
- (ii) Medically acceptable alternatives to administration of antipsychotic medications are not available, have not been successful, or are not likely to be effective; and
- (iii) In the opinion of the physician with responsibility for treatment of the person, or his or her designee, the person's condition constitutes an emergency requiring the treatment be instituted before a judicial hearing as authorized pursuant to this section can be held.

- If antipsychotic medications are administered over a person's lack 1 of consent pursuant to this subsection, a petition for an order 2 authorizing the administration of antipsychotic medications shall be 3 4 filed on the next judicial day. The hearing shall be held within two 5 judicial days. Ιf deemed necessary by the physician with responsibility for the treatment of the person, administration of 6 7 antipsychotic medications may continue until the hearing is held;
- 8 (8) To dispose of property and sign contracts unless such person 9 has been adjudicated an incompetent in a court proceeding directed to 10 that particular issue;
- 11 (9) Not to have psychosurgery performed on him or her under any 12 circumstances.
- 13 **Sec. 30.** RCW 71.05.410 and 1973 2nd ex.s. c 24 s 7 are each 14 amended to read as follows:
- 15 When a patient would otherwise be subject to the provisions of RCW 16 71.05.390 and disclosure is necessary for the protection of the patient or others due to his or her unauthorized disappearance from the 17 18 facility, and his or her whereabouts is unknown, notice of such disappearance, along with relevant information, may be made to 19 relatives and governmental law enforcement agencies designated by the 20 21 physician in charge of the patient or the professional person in charge 22 of the facility, or his or her professional designee.
- 23 **Sec. 31.** RCW 71.05.460 and 1973 1st ex.s. c 142 s 51 are each 24 amended to read as follows:
- 25 Every person involuntarily detained shall immediately be informed 26 of his <u>or her</u> right to a hearing to review the legality of his <u>or her</u> 27 detention and of his <u>or her</u> right to counsel, by the professional 28 person in charge of the facility providing evaluation and treatment, or 29 his <u>or her</u> designee, and, when appropriate, by the court. If the 30 person so elects, the court shall immediately appoint an attorney to 31 assist him <u>or her</u>.
- 32 **Sec. 32.** RCW 71.05.470 and 1973 1st ex.s. c 142 s 52 are each 33 amended to read as follows:
- A person challenging his <u>or her</u> detention or his <u>or her</u> attorney, 35 shall have the right to designate and have the court appoint a 36 reasonably available independent physician or licensed mental health

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- 1 professional to examine the person detained, the results of which
- 2 examination may be used in the proceeding. The person shall, if he or
- 3 she is financially able, bear the cost of such expert information,
- 4 otherwise such expert examination shall be at public expense.
- 5 **Sec. 33.** RCW 71.05.490 and 1973 1st ex.s. c 142 s 54 are each 6 amended to read as follows:
- 7 Nothing in this chapter shall prohibit a person committed on or
- 8 prior to January 1, 1974, from exercising a right available to him or
- 9 <u>her</u> at or prior to January 1, 1974, for obtaining release from
- 10 confinement.
- 11 **Sec. 34.** RCW 71.05.525 and 1975 1st ex.s. c 199 s 12 are each 12 amended to read as follows:
- When, in the judgment of the department ((of social and health
- 14 services)), the welfare of any person committed to or confined in any
- 15 state juvenile correctional institution or facility necessitates that
- 16 such a person be transferred or moved for observation, diagnosis or
- 17 treatment to any state institution or facility for the care of mentally
- 18 ill juveniles the secretary, or his or her designee, is authorized to
- 19 order and effect such move or transfer: PROVIDED, HOWEVER, That the
- 20 secretary shall adopt and implement procedures to assure that persons
- 21 so transferred shall, while detained or confined in such institution or
- 22 facility for the care of mentally ill juveniles, be provided with
- 23 substantially similar opportunities for parole or early release
- 24 evaluation and determination as persons detained or confined in state
- 25 juvenile correctional institutions or facilities: PROVIDED, FURTHER,
- 26 That the secretary shall notify the original committing court of such
- 27 transfer.
- 28 **Sec. 35.** RCW 9A.44.010 and 1994 c 271 s 302 are each amended to
- 29 read as follows:
- 30 As used in this chapter:
- 31 (1) "Sexual intercourse" (a) has its ordinary meaning and occurs
- 32 upon any penetration, however slight, and
- 33 (b) Also means any penetration of the vagina or anus however
- 34 slight, by an object, when committed on one person by another, whether
- 35 such persons are of the same or opposite sex, except when such

- 1 penetration is accomplished for medically recognized treatment or 2 diagnostic purposes, and
- 3 (c) Also means any act of sexual contact between persons involving 4 the sex organs of one person and the mouth or anus of another whether 5 such persons are of the same or opposite sex.
- 6 (2) "Sexual contact" means any touching of the sexual or other 7 intimate parts of a person done for the purpose of gratifying sexual 8 desire of either party or a third party.
- 9 (3) "Married" means one who is legally married to another, but does 10 not include a person who is living separate and apart from his or her 11 spouse and who has filed in an appropriate court for legal separation 12 or for dissolution of his or her marriage.
- 13 (4) "Mental incapacity" is that condition existing at the time of 14 the offense which prevents a person from understanding the nature or 15 consequences of the act of sexual intercourse whether that condition is 16 produced by illness, defect, the influence of a substance or from some 17 other cause.
- 18 (5) "Physically helpless" means a person who is unconscious or for 19 any other reason is physically unable to communicate unwillingness to 20 an act.
- 21 (6) "Forcible compulsion" means physical force which overcomes 22 resistance, or a threat, express or implied, that places a person in 23 fear of death or physical injury to herself or himself or another 24 person, or in fear that she or he or another person will be kidnapped.
- (7) "Consent" means that at the time of the act of sexual intercourse or sexual contact there are actual words or conduct indicating freely given agreement to have sexual intercourse or sexual contact.
- 29 (8) "Significant relationship" means a situation in which the 30 perpetrator is:
- 31 (a) A person who undertakes the responsibility, professionally or 32 voluntarily, to provide education, health, welfare, or organized 33 recreational activities principally for minors; or
- 34 (b) A person who in the course of his or her employment supervises 35 minors.
- 36 (9) "Abuse of a supervisory position" means a direct or indirect 37 threat or promise to use authority to the detriment or benefit of a 38 minor.

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- 1 (10) "Developmentally disabled," for purposes of RCW 2 9A.44.050(1)(c) and 9A.44.100(1)(c), means a person with a
- 3 developmental disability as defined in RCW 71A.10.020.
- 4 (11) "Person with supervisory authority," for purposes of RCW
- 5 9A.44.050(1) (c) or (e) and 9A.44.100(1) (c) or (e), means any
- 6 proprietor or employee of any public or private care or treatment
- 7 facility who directly supervises developmentally disabled, mentally
- 8 disordered, or chemically dependent persons at the facility.
- 9 (12) "Mentally disordered person" for the purposes of RCW
- 10 9A.44.050(1)(e) and 9A.44.100(1)(e) means a person with a "mental
- 11 disorder" as defined in RCW $71.05.020((\frac{2}{(2)}))$.
- 12 (13) "Chemically dependent person" for purposes of RCW
- 13 9A.44.050(1)(e) and 9A.44.100(1)(e) means a person who is "chemically
- 14 dependent as defined in RCW 70.96A.020(4).
- 15 (14) "Health care provider" for purposes of RCW 9A.44.050 and
- 16 9A.44.100 means a person who is, holds himself or herself out to be, or
- 17 provides services as if he or she were: (a) A member of a health care
- 18 profession under chapter 18.130 RCW; or (b) registered or certified
- 19 under chapter 18.19 RCW, regardless of whether the health care provider
- 20 is licensed, certified, or registered by the state.
- 21 (15) "Treatment" for purposes of RCW 9A.44.050 and 9A.44.100 means
- 22 the active delivery of professional services by a health care provider
- 23 which the health care provider holds himself or herself out to be
- 24 qualified to provide.
- 25 **Sec. 36.** RCW 71.24.025 and 1995 c 96 s 4 are each amended to read
- 26 as follows:
- 27 Unless the context clearly requires otherwise, the definitions in
- 28 this section apply throughout this chapter.
- 29 (1) "Acutely mentally ill" means a condition which is limited to a
- 30 short-term severe crisis episode of:
- 31 (a) A mental disorder as defined in RCW $71.05.020((\frac{2}{(2)}))$ or, in the
- 32 case of a child, as defined in RCW $71.34.020((\frac{12}{12}));$
- 33 (b) Being gravely disabled as defined in RCW $71.05.020((\frac{(1)}{(1)}))$ or,
- 34 in the case of a child, a gravely disabled minor as defined in RCW
- 35 71.34.020(((8))); or
- 36 (c) Presenting a likelihood of serious harm as defined in RCW
- 37 71.05.020(((3))) or, in the case of a child, as defined in RCW
- 38 $71.34.020((\frac{(11)}{(11)}))$.

- 1 (2) "Available resources" means those funds which shall be 2 appropriated under this chapter by the legislature during any biennium for the purpose of providing community mental health programs under RCW 3 4 71.24.045. When regional support networks are established or after 5 July 1, 1995, "available resources" means federal funds, except those provided according to Title XIX of the Social Security Act, and state 6 7 funds appropriated under this chapter or chapter 71.05 RCW by the 8 legislature during any biennium for the purpose of providing 9 residential services, resource management services, community support 10 services, and other mental health services. This does not include funds appropriated for the purpose of operating and administering the 11 state psychiatric hospitals, except as negotiated according to RCW 12 13 71.24.300(1)(d).
- 14 (3) "Licensed service provider" means an entity licensed according 15 to this chapter or chapter 71.05 RCW that meets state minimum standards 16 or individuals licensed under chapter 18.57, 18.71, 18.83, or 18.79 17 RCW, as it applies to registered nurses and advanced registered nurse 18 practitioners.
 - (4) "Child" means a person under the age of eighteen years.

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- 20 (5) "Chronically mentally ill adult" means an adult who has a 21 mental disorder and meets at least one of the following criteria:
- 22 (a) Has undergone two or more episodes of hospital care for a 23 mental disorder within the preceding two years; or
- (b) Has experienced a continuous psychiatric hospitalization or residential treatment exceeding six months' duration within the preceding year; or
- (c) Has been unable to engage in any substantial gainful activity by reason of any mental disorder which has lasted for a continuous period of not less than twelve months. "Substantial gainful activity" shall be defined by the department by rule consistent with Public Law 92-603, as amended.
- 32 (6) "Severely emotionally disturbed child" means an infant or child
 33 who has been determined by the regional support network to be
 34 experiencing a mental disorder as defined in chapter 71.34 RCW,
 35 including those mental disorders that result in a behavioral or conduct
 36 disorder, that is clearly interfering with the child's functioning in
 37 family or school or with peers and who meets at least one of the
 38 following criteria:

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- 1 (a) Has undergone inpatient treatment or placement outside of the 2 home related to a mental disorder within the last two years;
- 3 (b) Has undergone involuntary treatment under chapter 71.34 RCW 4 within the last two years;
- 5 (c) Is currently served by at least one of the following child-6 serving systems: Juvenile justice, child-protection/welfare, special 7 education, or developmental disabilities;
 - (d) Is at risk of escalating maladjustment due to:
- 9 (i) Chronic family dysfunction involving a mentally ill or 10 inadequate caretaker;
- 11 (ii) Changes in custodial adult;
- (iii) Going to, residing in, or returning from any placement outside of the home, for example, psychiatric hospital, short-term inpatient, residential treatment, group or foster home, or a correctional facility;
- 16 (iv) Subject to repeated physical abuse or neglect;
- 17 (v) Drug or alcohol abuse; or
- 18 (vi) Homelessness.

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- 19 (7) "Community mental health service delivery system" means public 20 or private agencies that provide services specifically to persons with mental disorders as defined under RCW 71.05.020 and receive funding 21 from various public sources including: (a) Federal medicare, medicaid, 22 23 or early periodic screening, diagnostic, and treatment programs; or (b) 24 state funds from the division of mental health, division of children 25 and family services, division of alcohol and substance abuse, or 26 division of vocational rehabilitation of the department of social and 27 health services.
- (8) "Community mental health program" means all mental health services established by a county authority. After July 1, 1995, or when the regional support networks are established, "community mental health program" means all activities or programs using available resources.
- 33 (9) "Community support services" means services for acutely
 34 mentally ill persons, chronically mentally ill adults, and severely
 35 emotionally disturbed children and includes: (a) Discharge planning
 36 for clients leaving state mental hospitals, other acute care inpatient
 37 facilities, inpatient psychiatric facilities for persons under twenty38 one years of age, and other children's mental health residential
 39 treatment facilities; (b) sufficient contacts with clients, families,

schools, or significant others to provide for an effective program of 1 2 community maintenance; and (c) medication monitoring. After July 1, 1995, or when regional support networks are established, for adults and 3 4 children "community support services" means services authorized, 5 planned, and coordinated through resource management services assessment, diagnosis, 6 including, at least, emergency crisis 7 intervention available twenty-four hours, seven days a 8 prescreening determinations for mentally ill persons being considered 9 for placement in nursing homes as required by federal law, screening 10 for patients being considered for admission to residential services, diagnosis and treatment for acutely mentally ill and severely 11 emotionally disturbed children discovered under screening through the 12 13 federal Title XIX early and periodic screening, diagnosis, and treatment program, investigation, legal, and other nonresidential 14 15 services under chapter 71.05 RCW, case management services, psychiatric 16 treatment including medication supervision, counseling, psychotherapy, 17 assuring transfer of relevant patient information between service providers, other services determined by regional support networks, and 18 19 maintenance of a patient tracking system for chronically mentally ill 20 adults and severely emotionally disturbed children. 21

(10) "County authority" means the board of county commissioners, county council, or county executive having authority to establish a community mental health program, or two or more of the county authorities specified in this subsection which have entered into an agreement to provide a community mental health program.

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- 26 (11) "Department" means the department of social and health 27 services.
- 28 (12) "Mental health services" means community services pursuant to 29 RCW 71.24.035(5)(b) and other services provided by the state for the 30 mentally ill. When regional support networks are established, or after 31 July 1, 1995, "mental health services" shall include all services 32 provided by regional support networks.
- 33 (13) "Mentally ill persons" and "the mentally ill" mean persons and 34 conditions defined in subsections (1), (5), (6), and (17) of this 35 section.
- 36 (14) "Regional support network" means a county authority or group 37 of county authorities recognized by the secretary that enter into joint 38 operating agreements to contract with the secretary pursuant to this 39 chapter.

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1 (15) "Residential services" means a facility or distinct part 2 thereof which provides food and shelter, and may include treatment 3 services.

4 When regional support networks are established, or after July 1, 1995, for adults and children "residential services" means a complete 5 range of residences and supports authorized by resource management 6 7 services and which may involve a facility, a distinct part thereof, or 8 services which support community living, for acutely mentally ill 9 persons, chronically mentally ill adults, severely emotionally 10 disturbed children, or seriously disturbed adults determined by the regional support network to be at risk of becoming acutely or 11 chronically mentally ill. The services shall include at least 12 evaluation and treatment services as defined in chapter 71.05 RCW, 13 acute crisis respite care, long-term adaptive and rehabilitative care, 14 15 and supervised and supported living services, and shall also include 16 any residential services developed to service mentally ill persons in nursing homes. Residential services for children in out-of-home 17 placements related to their mental disorder shall not include the costs 18 19 of food and shelter, except for children's long-term residential 20 facilities existing prior to January 1, 1991.

- services" (16)"Resource management mean the planning, coordination, and authorization of residential services and community support services administered pursuant to an individual service plan for acutely mentally ill adults and children, chronically mentally ill adults, severely emotionally disturbed children, or seriously disturbed adults determined by the regional support network at their sole discretion to be at risk of becoming acutely or chronically mentally Such planning, coordination, and authorization shall include ill. mental health screening for children eligible under the federal Title XIX early and periodic screening, diagnosis, and treatment program. Resource management services include seven day a week, twenty-four hour a day availability of information regarding mentally ill adults' and children's enrollment in services and their individual service plan to county-designated mental health professionals, evaluation and treatment facilities, and others as determined by the regional support network.
 - (17) "Seriously disturbed person" means a person who:
- 37 (a) Is gravely disabled or presents a likelihood of serious harm to 38 oneself or others or to the property of others as a result of a mental 39 disorder as defined in chapter 71.05 RCW;

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- 1 (b) Has been on conditional release status at some time during the 2 preceding two years from an evaluation and treatment facility or a 3 state mental health hospital;
- 4 (c) Has a mental disorder which causes major impairment in several areas of daily living;
 - (d) Exhibits suicidal preoccupation or attempts; or

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- 7 (e) Is a child diagnosed by a mental health professional, as 8 defined in RCW 71.05.020, as experiencing a mental disorder which is 9 clearly interfering with the child's functioning in family or school or 10 with peers or is clearly interfering with the child's personality 11 development and learning.
- 12 (18) "Secretary" means the secretary of social and health services.
- (19) "State minimum standards" means: (a) Minimum requirements for 13 14 delivery of mental health services as established by departmental rules 15 and necessary to implement this chapter, including but not limited to 16 licensing service providers and services; (b) minimum service requirements for licensed service providers for the provision of mental 17 health services as established by departmental rules pursuant to 18 19 chapter 34.05 RCW as necessary to implement this chapter, including, Qualifications for staff providing services 20 but not limited to: directly to mentally ill persons; the intended result of each service; 21 and the rights and responsibilities of persons receiving mental health 22 services pursuant to this chapter; (c) minimum requirements for 23 24 residential services as established by the department in rule based on 25 clients' functional abilities and not solely on their diagnoses, limited to health and safety, staff qualifications, and program 26 outcomes. Minimum requirements for residential services are those 27 developed in collaboration with consumers, families, 28 29 regulators, and residential providers serving the mentally ill. 30 Minimum requirements encourage the development of broad-range 31 residential programs, including integrated housing and cross-systems programs where appropriate, and do not unnecessarily restrict 32 programming flexibility; and (d) minimum standards for community 33 34 support services and resource management services, including at least 35 qualifications for resource management services, client tracking systems, and the transfer of patient information between service 36 37 providers.
- 38 (20) "Tribal authority," for the purposes of this section and RCW 39 71.24.300 only, means: The federally recognized Indian tribes and the

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- 1 major Indian organizations recognized by the secretary insofar as these
- 2 organizations do not have a financial relationship with any regional
- 3 support network that would present a conflict of interest.
- NEW SECTION. Sec. 37. The joint legislative audit and review committee shall perform an evaluation of the effect of this act upon persons who have been repeatedly involuntarily committed and shall measure the overall fiscal impact of this act. The committee shall report its findings to the appropriate committees of the legislature by January 1, 2000.

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