
HOUSE BILL 2761

State of Washington 55th Legislature 1998 Regular Session

By Representatives Carrell, Wolfe, B. Thomas, Cooke, Boldt, Smith, Gombosky, Talcott, D. Schmidt, D. Sommers, McDonald and Backlund

Read first time 01/20/98. Referred to Committee on Children & Family Services.

1 AN ACT Relating to at-risk youth; amending RCW 13.32A.040,
2 13.32A.100, 74.13.032, 74.13.0321, 74.13.033, 74.13.034, 74.13.036,
3 71.34.010, 71.34.020, 71.34.025, 71.34.030, 70.96A.095, 70.96A.097,
4 13.32A.250, and 13.34.165; reenacting and amending RCW 74.13.031 and
5 70.96A.020; adding new sections to chapter 13.32A RCW; adding new
6 sections to chapter 71.34 RCW; adding new sections to chapter 70.96A
7 RCW; creating new sections; and providing an expiration date.

8 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

9 **PART I - FAMILY RECONCILIATION, CRISIS RESIDENTIAL CENTER SERVICES**

10 NEW SECTION. **Sec. 1.** A new section is added to chapter 13.32A RCW
11 to read as follows:

12 Any county or group of counties may make application to the
13 department of social and health services in the manner and form
14 prescribed by the department to administer and provide family
15 reconciliation services and crisis residential center services. Any
16 such application must include a plan or plans for providing family
17 reconciliation services and crisis residential center services to at-
18 risk youth.

1 NEW SECTION. **Sec. 2.** A new section is added to chapter 13.32A RCW
2 to read as follows:

3 No county may receive any state funds provided by this chapter
4 until its application and plan are received by the department.

5 (1) The distribution of funds to a county or a group of counties
6 shall be based on criteria including but not limited to the county's
7 per capita income, regional or county at-risk populations, rates of
8 poverty, and the presence of existing programs serving at-risk
9 children.

10 (2) The secretary of social and health services shall reimburse a
11 county upon presentation and approval of a valid claim pursuant to this
12 chapter based on actual performance in meeting the terms and conditions
13 of the approved plan and contract. Funds received by participating
14 counties under this chapter shall not be used to replace local funds
15 for existing programs.

16 (3) Funds available for county-operated family reconciliation
17 services and crisis residential centers shall not exceed the
18 appropriation for these services specified in the biennial operating
19 budget.

20 **Sec. 3.** RCW 13.32A.040 and 1995 c 312 s 5 are each amended to read
21 as follows:

22 Families who are in conflict or who are experiencing problems with
23 at-risk youth or a child who may be in need of services may request
24 family reconciliation services from the department, or a county or
25 group of counties operating under sections 1 and 2 of this act. The
26 department, county, or group of counties may involve a local
27 multidisciplinary team in its response in determining the services to
28 be provided and in providing those services. Such services shall be
29 provided to alleviate personal or family situations which present a
30 serious and imminent threat to the health or stability of the child or
31 family and to maintain families intact wherever possible. Family
32 reconciliation services shall be designed to develop skills and
33 supports within families to resolve problems related to at-risk youth,
34 children in need of services, or family conflicts and may include but
35 are not limited to referral to services for suicide prevention,
36 psychiatric or other medical care, or psychological, mental health,
37 drug or alcohol treatment, welfare, legal, educational, or other social
38 services, as appropriate to the needs of the child and the family.

1 Family reconciliation services may also include training in parenting,
2 conflict management, and dispute resolution skills.

3 **Sec. 4.** RCW 13.32A.100 and 1996 c 133 s 16 are each amended to
4 read as follows:

5 Where a child is placed in an out-of-home placement pursuant to RCW
6 13.32A.090(2)(e), the department, or a county or group of counties
7 operating under sections 1 and 2 of this act, shall make available
8 family reconciliation services in order to facilitate the reunification
9 of the family. Any such placement may continue as long as there is
10 agreement by the child and parent.

11 **Sec. 5.** RCW 74.13.031 and 1997 c 386 s 32 and 1997 c 272 s 1 are
12 each reenacted and amended to read as follows:

13 The department shall have the duty to provide child welfare
14 services and shall:

15 (1) Develop, administer, supervise, and monitor a coordinated and
16 comprehensive plan that establishes, aids, and strengthens services for
17 the protection and care of homeless, runaway, dependent, or neglected
18 children.

19 (2) Within available resources, recruit an adequate number of
20 prospective adoptive and foster homes, both regular and specialized,
21 i.e. homes for children of ethnic minority, including Indian homes for
22 Indian children, sibling groups, handicapped and emotionally disturbed,
23 teens, pregnant and parenting teens, and annually report to the
24 governor and the legislature concerning the department's success in:
25 (a) Meeting the need for adoptive and foster home placements; (b)
26 reducing the foster parent turnover rate; (c) completing home studies
27 for legally free children; and (d) implementing and operating the
28 passport program required by RCW 74.13.285. The report shall include
29 a section entitled "Foster Home Turn-Over, Causes and Recommendations."

30 (3) Investigate complaints of alleged neglect, abuse, or
31 abandonment of children, and on the basis of the findings of such
32 investigation, offer child welfare services in relation to the problem
33 to such parents, legal custodians, or persons serving in loco parentis,
34 and/or bring the situation to the attention of an appropriate court, or
35 another community agency: PROVIDED, That an investigation is not
36 required of nonaccidental injuries which are clearly not the result of
37 a lack of care or supervision by the child's parents, legal custodians,

1 or persons serving in loco parentis. If the investigation reveals that
2 a crime may have been committed, the department shall notify the
3 appropriate law enforcement agency.

4 (4) Provide funding to counties to offer, on a voluntary basis,
5 family reconciliation services to families who are in conflict.

6 (5) Monitor out-of-home placements, on a timely and routine basis,
7 to assure the safety, well-being, and quality of care being provided is
8 within the scope of the intent of the legislature as defined in RCW
9 74.13.010 and 74.15.010, and annually submit a report measuring the
10 extent to which the department achieved the specified goals to the
11 governor and the legislature.

12 (6) Have authority to accept custody of children from parents and
13 to accept custody of children from juvenile courts, where authorized to
14 do so under law, to provide child welfare services including placement
15 for adoption, and to provide for the physical care of such children and
16 make payment of maintenance costs if needed. Except where required by
17 Public Law 95-608 (25 U.S.C. Sec. 1915), no private adoption agency
18 which receives children for adoption from the department shall
19 discriminate on the basis of race, creed, or color when considering
20 applications in their placement for adoption.

21 (7) (~~Have authority~~) Provide funding for counties to provide
22 temporary shelter to children who have run away from home and who are
23 admitted to crisis residential centers.

24 (8) Have authority to purchase care for children; and shall follow
25 in general the policy of using properly approved private agency
26 services for the actual care and supervision of such children insofar
27 as they are available, paying for care of such children as are accepted
28 by the department as eligible for support at reasonable rates
29 established by the department.

30 (9) Establish a children's services advisory committee which shall
31 assist the secretary in the development of a partnership plan for
32 utilizing resources of the public and private sectors, and advise on
33 all matters pertaining to child welfare, licensing of child care
34 agencies, adoption, and services related thereto. At least one member
35 shall represent the adoption community.

36 (10) Have authority to provide continued foster care or group care
37 for individuals from eighteen through twenty years of age to enable
38 them to complete their high school or vocational school program.

1 (11) Have authority within funds appropriated for foster care
2 services to purchase care for Indian children who are in the custody of
3 a federally recognized Indian tribe or tribally licensed child-placing
4 agency pursuant to parental consent, tribal court order, or state
5 juvenile court order; and the purchase of such care shall be subject to
6 the same eligibility standards and rates of support applicable to other
7 children for whom the department purchases care.

8 Notwithstanding any other provision of RCW 13.32A.170 through
9 13.32A.200 and 74.13.032 through 74.13.036, or of this section all
10 services to be provided by the department of social and health services
11 and counties under subsections (4), (6), and (7) of this section,
12 subject to the limitations of these subsections, may be provided by any
13 program offering such services funded pursuant to Titles II and III of
14 the federal juvenile justice and delinquency prevention act of 1974.

15 **Sec. 6.** RCW 74.13.032 and 1995 c 312 s 60 are each amended to read
16 as follows:

17 (1) The department or a county or group of counties operating under
18 sections 1 and 2 of this act shall establish, by contracts with private
19 or public vendors, regional crisis residential centers with semi-secure
20 facilities. These facilities shall be structured group care facilities
21 licensed under rules adopted by the department and shall have an
22 average of at least four adult staff members and in no event less than
23 three adult staff members to every eight children.

24 (2) Within available funds appropriated for this purpose, the
25 department or a county shall establish, by contracts with private or
26 public vendors, regional crisis residential centers with secure
27 facilities. These facilities shall be facilities licensed under rules
28 adopted by the department. These centers may also include semi-secure
29 facilities and to such extent shall be subject to subsection (1) of
30 this section.

31 (3) The department or a county shall, in addition to the facilities
32 established under subsections (1) and (2) of this section, establish
33 additional crisis residential centers pursuant to contract with
34 licensed private group care facilities.

35 (4) The staff at the facilities established under this section
36 shall be trained so that they may effectively counsel juveniles
37 admitted to the centers, provide treatment, supervision, and structure
38 to the juveniles that recognize the need for support and the varying

1 circumstances that cause children to leave their families, and carry
2 out the responsibilities stated in RCW 13.32A.090. The
3 responsibilities stated in RCW 13.32A.090 may, in any of the centers,
4 be carried out by the department or a county.

5 (5) The secure facilities located within crisis residential centers
6 shall be operated to conform with the definition in RCW 13.32A.030.
7 The facilities shall have an average of no more than three adult staff
8 members to every eight children. The staffing ratio shall continue to
9 ensure the safety of the children.

10 (6) A center with secure facilities created under this section may
11 ~~((not))~~ be located within, or on the same grounds as, other secure
12 structures including jails, juvenile detention facilities operated by
13 the state, or units of local government. ~~((However, the secretary may,
14 following consultation with the appropriate county legislative
15 authority, make a written finding that location of a center with secure
16 facilities on the same grounds as another secure structure is the only
17 practical location for a secure facility. Upon the written finding a
18 secure facility may be located on the same grounds as the secure
19 structure.))~~ Where a center is located in or adjacent to a secure
20 juvenile detention facility, the center shall be operated in a manner
21 that prevents in-person contact between the residents of the center and
22 the persons held in such facility.

23 **Sec. 7.** RCW 74.13.0321 and 1995 c 312 s 61 are each amended to
24 read as follows:

25 No department or county contract may provide reimbursement or
26 compensation to a crisis residential center's secure facility for any
27 service delivered or provided to a resident child after five
28 consecutive days of residence.

29 **Sec. 8.** RCW 74.13.033 and 1995 c 312 s 62 are each amended to read
30 as follows:

31 (1) If a resident of a center becomes by his or her behavior
32 disruptive to the facility's program, such resident may be immediately
33 removed to a separate area within the facility and counseled on an
34 individual basis until such time as the child regains his or her
35 composure. The department may set rules and regulations establishing
36 additional procedures for dealing with severely disruptive children on
37 the premises.

1 (2) When the juvenile resides in this facility, all services deemed
2 necessary to the juvenile's reentry to normal family life shall be made
3 available to the juvenile as required by chapter 13.32A RCW. In
4 assessing the child and providing these services, the facility staff
5 shall:

6 (a) Interview the juvenile as soon as possible;

7 (b) Contact the juvenile's parents and arrange for a counseling
8 interview with the juvenile and his or her parents as soon as possible;

9 (c) Conduct counseling interviews with the juvenile and his or her
10 parents, to the end that resolution of the child/parent conflict is
11 attained and the child is returned home as soon as possible;

12 (d) Provide additional crisis counseling as needed, to the end that
13 placement of the child in the crisis residential center will be
14 required for the shortest time possible, but not to exceed five
15 consecutive days; and

16 (e) Convene, when appropriate, a multidisciplinary team.

17 (3) Based on the assessments done under subsection (2) of this
18 section the facility staff may refer any child who, as the result of a
19 mental or emotional disorder, or intoxication by alcohol or other
20 drugs, is suicidal, seriously assaultive, or seriously destructive
21 toward others, or otherwise similarly evidences an immediate need for
22 emergency medical evaluation and possible care, for evaluation pursuant
23 to chapter 71.34 RCW, to a mental health professional pursuant to
24 chapter 71.05 RCW, or to a chemical dependency specialist pursuant to
25 chapter 70.96A RCW whenever such action is deemed appropriate and
26 consistent with law.

27 (4) A juvenile taking unauthorized leave from a facility shall be
28 apprehended and returned to it by law enforcement officers or other
29 persons designated as having this authority as provided in RCW
30 13.32A.050. If returned to the facility after having taken
31 unauthorized leave for a period of more than twenty-four hours a
32 juvenile shall be supervised by such a facility for a period, pursuant
33 to this chapter, which, unless where otherwise provided, may not exceed
34 five consecutive days on the premises. Costs of housing juveniles
35 admitted to crisis residential centers shall be assumed by the
36 department or county for a period not to exceed five consecutive days.

37 **Sec. 9.** RCW 74.13.034 and 1995 c 312 s 63 are each amended to read
38 as follows:

1 (1) A child taken into custody and taken to a crisis residential
2 center established pursuant to RCW 74.13.032 may, if the center is
3 unable to provide appropriate treatment, supervision, and structure to
4 the child, be taken at department or county expense to another crisis
5 residential center, the nearest regional secure crisis residential
6 center, or a secure facility with which it is collocated under RCW
7 74.13.032. Placement in both locations shall not exceed five
8 consecutive days from the point of intake as provided in RCW
9 13.32A.130.

10 (2) A child taken into custody and taken to a crisis residential
11 center established by this chapter may be placed physically by the
12 department or county or the department's or county's designee and, at
13 departmental or county expense and approval, in a secure juvenile
14 detention facility operated by the county in which the center is
15 located for a maximum of forty-eight hours, including Saturdays,
16 Sundays, and holidays, if the child has taken unauthorized leave from
17 the center and the person in charge of the center determines that the
18 center cannot provide supervision and structure adequate to ensure that
19 the child will not again take unauthorized leave. Juveniles placed in
20 such a facility pursuant to this section may not, to the extent
21 possible, come in contact with alleged or convicted juvenile or adult
22 offenders.

23 (3) Any child placed in secure detention pursuant to this section
24 shall, during the period of confinement, be provided with appropriate
25 treatment by the department or county or the department's or county's
26 designee, which shall include the services defined in RCW 74.13.033(2).
27 If the child placed in secure detention is not returned home or if an
28 alternative living arrangement agreeable to the parent and the child is
29 not made within twenty-four hours after the child's admission, the
30 child shall be taken at the department's or county's expense to a
31 crisis residential center. Placement in the crisis residential center
32 or centers plus placement in juvenile detention shall not exceed five
33 consecutive days from the point of intake as provided in RCW
34 13.32A.130.

35 (4) Juvenile detention facilities used pursuant to this section
36 shall first be certified by the department to ensure that juveniles
37 placed in the facility pursuant to this section are provided with
38 living conditions suitable to the well-being of the child. Where space
39 is available, juvenile courts, when certified by the department to do

1 so, shall provide secure placement for juveniles pursuant to this
2 section, at department or county expense.

3 **Sec. 10.** RCW 74.13.036 and 1996 c 133 s 37 are each amended to
4 read as follows:

5 (1) The department of social and health services shall oversee
6 implementation of chapter 13.34 RCW and chapter 13.32A RCW. The
7 oversight shall be comprised of working with affected parts of the
8 criminal justice and child care systems as well as with local
9 government, legislative, and executive authorities to effectively carry
10 out these chapters. The department shall work with all such entities
11 to ensure that chapters 13.32A and 13.34 RCW are implemented in a
12 uniform manner throughout the state.

13 (2) The department shall develop a plan and procedures, in
14 cooperation with the state-wide advisory committee, to insure the full
15 implementation of the provisions of chapter 13.32A RCW. Such plan and
16 procedures shall include but are not limited to:

17 (a) Procedures defining and delineating the role of the department
18 and juvenile court with regard to the execution of the child in need of
19 services placement process;

20 (b) Procedures for designating department or county staff
21 responsible for family reconciliation services;

22 (c) Procedures assuring enforcement of contempt proceedings in
23 accordance with RCW 13.32A.170 and 13.32A.250; and

24 (d) Procedures for the continued education of all individuals in
25 the criminal juvenile justice and child care systems who are affected
26 by chapter 13.32A RCW, as well as members of the legislative and
27 executive branches of government.

28 There shall be uniform application of the procedures developed by
29 the department and juvenile court personnel, to the extent practicable.
30 Local and regional differences shall be taken into consideration in the
31 development of procedures required under this subsection.

32 (3) In addition to its other oversight duties, the department
33 shall:

34 (a) Identify and evaluate resource needs in each region of the
35 state;

36 (b) Disseminate information collected as part of the oversight
37 process to affected groups and the general public;

1 (c) Educate affected entities within the juvenile justice and child
2 care systems, local government, and the legislative branch regarding
3 the implementation of chapters 13.32A and 13.34 RCW;

4 (d) Review complaints concerning the services, policies, and
5 procedures of those entities charged with implementing chapters 13.32A
6 and 13.34 RCW; and

7 (e) Report any violations and misunderstandings regarding the
8 implementation of chapters 13.32A and 13.34 RCW.

9 (4) The secretary shall submit a quarterly report to the
10 appropriate local government entities.

11 (5) The department shall provide an annual report to the
12 legislature not later than December 1, indicating the number of times
13 it has declined to accept custody of a child from a law enforcement
14 agency under chapter 13.32A RCW and the number of times it has received
15 a report of a child being released without placement under RCW
16 13.32A.060(1)(c). The report shall include the dates, places, and
17 reasons the department declined to accept custody and the dates and
18 places children are released without placement.

19 **PART II - MENTAL HEALTH AND CHEMICAL DEPENDENCY TREATMENT**

20 NEW SECTION. **Sec. 11.** The legislature finds it is often necessary
21 for parents to obtain mental health or chemical dependency treatment
22 for their minor children prior to the time the child's condition
23 presents a likelihood of serious harm or the child becomes gravely
24 disabled. The legislature finds that treatment of such conditions is
25 not the equivalent of incarceration or detention, but is a legitimate
26 act of parental discretion, when supported by decisions of credentialed
27 professionals. The legislature finds that, consistent with *Parham v.*
28 *J.R.*, 442 U.S. 584 (1979), state action is not involved in the
29 determination of a parent and professional person to admit a minor
30 child to treatment and finds this act provides sufficient independent
31 review by the department of social and health services, as a neutral
32 fact-finder, to protect the interests of all parties. The legislature
33 finds it is necessary to provide parents a statutory process, other
34 than the petition process provided in chapters 70.96A and 71.34 RCW, to
35 obtain treatment for their minor children without the consent of the
36 children.

1 The legislature finds that differing standards of admission and
2 review in parent-initiated mental health and chemical dependency
3 treatment for their minor children are necessary and the admission
4 standards and procedures under state involuntary treatment procedures
5 are not adequate to provide safeguards for the safety and well-being of
6 all children. The legislature finds the timeline for admission and
7 reviews under existing law do not provide sufficient opportunities for
8 assessment of the mental health and chemically dependent status of
9 every minor child and that additional time and different standards will
10 facilitate the likelihood of successful treatment of children who are
11 in need of assistance but unwilling to obtain it voluntarily. The
12 legislature finds there are children whose behavior presents a clear
13 need of medical treatment but is not so extreme as to require immediate
14 state intervention under the state involuntary treatment procedures.

15

PART II-A - MENTAL HEALTH

16 **Sec. 12.** RCW 71.34.010 and 1992 c 205 s 302 are each amended to
17 read as follows:

18 It is the purpose of this chapter to ~~((ensure))~~ assure that minors
19 in need of mental health care and treatment receive an appropriate
20 continuum of culturally relevant care and treatment, ~~((from))~~ including
21 prevention and early intervention ~~((to))~~, self-directed care, parent-
22 directed care, and involuntary treatment. To facilitate the continuum
23 of care and treatment to minors in out-of-home placements, all
24 divisions of the department that provide mental health services to
25 minors shall jointly plan and deliver those services.

26 It is also the purpose of this chapter to protect the rights of
27 minors against needless hospitalization and deprivations of liberty and
28 to enable treatment decisions to be made in response to clinical needs
29 in accordance with sound professional judgment. The mental health care
30 and treatment providers shall encourage the use of voluntary services
31 and, whenever clinically appropriate, the providers shall offer less
32 restrictive alternatives to inpatient treatment. Additionally, all
33 mental health care and treatment providers shall ~~((ensure))~~ assure that
34 minors' parents are given an opportunity to participate in the
35 treatment decisions for their minor children. The mental health care
36 and treatment providers shall, to the extent possible, offer services
37 that involve minors' parents or family.

1 It is also the purpose of this chapter to assure the ability of
2 parents to exercise reasonable, compassionate care and control of their
3 minor children when there is a medical necessity for treatment and
4 without the requirement of filing a petition under this chapter.

5 **Sec. 13.** RCW 71.34.020 and 1985 c 354 s 2 are each amended to read
6 as follows:

7 Unless the context clearly requires otherwise, the definitions in
8 this section apply throughout this chapter.

9 (1) "Child psychiatrist" means a person having a license as a
10 physician and surgeon in this state, who has had graduate training in
11 child psychiatry in a program approved by the American Medical
12 Association or the American Osteopathic Association, and who is board
13 eligible or board certified in child psychiatry.

14 (2) "Children's mental health specialist" means:

15 (a) A mental health professional who has completed a minimum of one
16 hundred actual hours, not quarter or semester hours, of specialized
17 training devoted to the study of child development and the treatment of
18 children; and

19 (b) A mental health professional who has the equivalent of one year
20 of full-time experience in the treatment of children under the
21 supervision of a children's mental health specialist.

22 (3) "Commitment" means a determination by a judge or court
23 commissioner, made after a commitment hearing, that the minor is in
24 need of inpatient diagnosis, evaluation, or treatment or that the minor
25 is in need of less restrictive alternative treatment.

26 (4) "County-designated mental health professional" means a mental
27 health professional designated by one or more counties to perform the
28 functions of a county-designated mental health professional described
29 in this chapter.

30 (5) "Department" means the department of social and health
31 services.

32 (6) "Evaluation and treatment facility" means a public or private
33 facility or unit that is certified by the department to provide
34 emergency, inpatient, residential, or outpatient mental health
35 evaluation and treatment services for minors. A physically separate
36 and separately-operated portion of a state hospital may be designated
37 as an evaluation and treatment facility for minors. A facility which
38 is part of or operated by the department or federal agency does not

1 require certification. No correctional institution or facility,
2 juvenile court detention facility, or jail may be an evaluation and
3 treatment facility within the meaning of this chapter.

4 (7) "Evaluation and treatment program" means the total system of
5 services and facilities coordinated and approved by a county or
6 combination of counties for the evaluation and treatment of minors
7 under this chapter.

8 (8) "Gravely disabled minor" means a minor who, as a result of a
9 mental disorder, is in danger of serious physical harm resulting from
10 a failure to provide for his or her essential human needs of health or
11 safety, or manifests severe deterioration in routine functioning
12 evidenced by repeated and escalating loss of cognitive or volitional
13 control over his or her actions and is not receiving such care as is
14 essential for his or her health or safety.

15 (9) "Inpatient treatment" means twenty-four-hour-per-day mental
16 health care provided within a general hospital, psychiatric hospital,
17 or residential treatment facility certified by the department as an
18 evaluation and treatment facility for minors.

19 (10) "Less restrictive alternative" or "less restrictive setting"
20 means outpatient treatment provided to a minor who is not residing in
21 a facility providing inpatient treatment as defined in this chapter.

22 (11) "Likelihood of serious harm" means either: (a) A substantial
23 risk that physical harm will be inflicted by an individual upon his or
24 her own person, as evidenced by threats or attempts to commit suicide
25 or inflict physical harm on oneself; (b) a substantial risk that
26 physical harm will be inflicted by an individual upon another, as
27 evidenced by behavior which has caused such harm or which places
28 another person or persons in reasonable fear of sustaining such harm;
29 or (c) a substantial risk that physical harm will be inflicted by an
30 individual upon the property of others, as evidenced by behavior which
31 has caused substantial loss or damage to the property of others.

32 (12) "Medical necessity" for inpatient care means a requested
33 service which is reasonably calculated to: (a) Diagnose, correct,
34 cure, or alleviate a mental disorder; or (b) prevent the worsening of
35 mental conditions that endanger life or cause suffering and pain, or
36 result in illness or infirmity or threaten to cause or aggravate a
37 handicap, or cause physical deformity or malfunction, and there is no
38 adequate less restrictive alternative available.

1 (13) "Medically appropriate" means that a minor admitted to
2 inpatient treatment, under section 23 of this act, has not sufficiently
3 improved his or her condition to be released to a less restrictive
4 setting.

5 (14) "Mental disorder" means any organic, mental, or emotional
6 impairment that has substantial adverse effects on an individual's
7 cognitive or volitional functions. The presence of alcohol abuse, drug
8 abuse, juvenile criminal history, antisocial behavior, or mental
9 retardation alone is insufficient to justify a finding of "mental
10 disorder" within the meaning of this section.

11 ~~((13))~~ (15) "Mental health professional" means a psychiatrist,
12 psychologist, psychiatric nurse, or social worker, and such other
13 mental health professionals as may be defined by rules adopted by the
14 secretary under this chapter.

15 ~~((14))~~ (16) "Minor" means any person under the age of eighteen
16 years.

17 ~~((15))~~ (17) "Outpatient treatment" means any of the
18 nonresidential services mandated under chapter 71.24 RCW and provided
19 by licensed services providers as identified by RCW 71.24.025(3).

20 ~~((16))~~ (18) "Parent" means:

21 (a) A biological or adoptive parent who has legal custody of the
22 child, including either parent if custody is shared under a joint
23 custody agreement; or

24 (b) A person or agency judicially appointed as legal guardian or
25 custodian of the child.

26 ~~((17))~~ (19) "Professional person in charge" or "professional
27 person" means a physician or other mental health professional empowered
28 by an evaluation and treatment facility with authority to make
29 admission and discharge decisions on behalf of that facility.

30 ~~((18))~~ (20) "Psychiatric nurse" means a registered nurse who has
31 a bachelor's degree from an accredited college or university, and who
32 has had, in addition, at least two years' experience in the direct
33 treatment of mentally ill or emotionally disturbed persons, such
34 experience gained under the supervision of a mental health
35 professional. "Psychiatric nurse" shall also mean any other registered
36 nurse who has three years of such experience.

37 ~~((19))~~ (21) "Psychiatrist" means a person having a license as a
38 physician in this state who has completed residency training in
39 psychiatry in a program approved by the American Medical Association or

1 the American Osteopathic Association, and is board eligible or board
2 certified in psychiatry.

3 ~~((20))~~ (22) "Psychologist" means a person licensed as a
4 psychologist under chapter 18.83 RCW.

5 ~~((21))~~ (23) "Responsible other" means the minor, the minor's
6 parent or estate, or any other person legally responsible for support
7 of the minor.

8 ~~((22))~~ (24) "Secretary" means the secretary of the department or
9 secretary's designee.

10 ~~((23))~~ (25) "Start of initial detention" means the time of
11 arrival of the minor at the first evaluation and treatment facility
12 offering inpatient treatment if the minor is being involuntarily
13 detained at the time. With regard to voluntary patients, "start of
14 initial detention" means the time at which the minor gives notice of
15 intent to leave under the provisions of this chapter.

16 **Sec. 14.** RCW 71.34.025 and 1995 c 312 s 56 are each amended to
17 read as follows:

18 (1) ~~((The admission of any child under RCW 71.34.030 may be
19 reviewed by the county-designated mental health professional between
20 fifteen and thirty days following admission. The county-designated
21 mental health professional may undertake the review on his or her own
22 initiative and may seek reimbursement from the parents, their
23 insurance, or medicaid for the expense of the review.~~

24 ~~(2))~~ The department shall ~~((ensure))~~ assure that, for any minor
25 admitted to inpatient treatment under section 23 of this act, a review
26 is conducted by a physician or other mental health professional who is
27 employed by the department, or an agency under contract with the
28 department, and who neither has a financial interest in continued
29 inpatient treatment of the minor nor is affiliated with the facility
30 providing the treatment. The physician or other mental health
31 professional shall conduct the review no sooner than five days and no
32 later than ~~((sixty))~~ seven days, excluding Saturdays, Sundays, and
33 holidays, following admission to determine whether it is medically
34 appropriate to continue the ~~((child's))~~ minor's treatment on an
35 inpatient basis. ~~((The department may, subject to available funds,~~
36 contract with a county for the conduct of the review conducted under
37 this subsection and may seek reimbursement from the parents, their

1 insurance, or medicaid for the expense of any review conducted by an
2 agency under contract.

3 If the county designated mental health professional determines that
4 continued inpatient treatment of the child is no longer medically
5 appropriate, the professional shall notify the facility, the child, the
6 child's parents, and the department of the finding within twenty four
7 hours of the determination.

8 (3) For purposes of eligibility for medical assistance under
9 chapter 74.09 RCW, children in inpatient mental health or chemical
10 dependency treatment shall be considered to be part of their parent's
11 or legal guardian's household, unless the child has been assessed by
12 the department of social and health services or its designee as likely
13 to require such treatment for at least ninety consecutive days, or is
14 in out of home care in accordance with chapter 13.34 RCW, or the
15 child's parents are found to not be exercising responsibility for care
16 and control of the child. Payment for such care by the department of
17 social and health services shall be made only in accordance with rules,
18 guidelines, and clinical criteria applicable to inpatient treatment of
19 minors established by the department.)

20 (2) The department shall, at thirty-day intervals following the
21 review conducted under subsection (1) of this section, conduct three
22 reviews of the treatment status of each minor admitted to inpatient
23 treatment, under section 23 of this act, to determine whether it is
24 medically appropriate to continue the minor's treatment under inpatient
25 status. The reviews shall be conducted by a physician or other mental
26 health professional who is employed by the department, or an agency
27 under contract with the department, and who neither has a financial
28 interest in continued inpatient treatment of the minor nor is
29 affiliated with the facility providing the treatment.

30 (3) In making a determination under subsection (1) or (2) of this
31 section, the department shall consider the opinion of the treatment
32 provider, the safety of the minor, and the likelihood the minor's
33 mental health will deteriorate if released from inpatient treatment.
34 The department shall consult with the parent in advance of making its
35 determination.

36 (4) If, after any review conducted by the department under this
37 section, the department determines it is no longer medically
38 appropriate for a minor to receive inpatient treatment, the department
39 shall immediately notify the parents and the facility. The facility

1 shall release the minor to the parents within twenty-four hours of
2 receiving notice. If the professional person in charge and the parent
3 believe that it is medically appropriate for the minor to remain in
4 inpatient treatment, the minor shall be released to the parent on the
5 second judicial day following the department's determination in order
6 to allow the parent time to file an at-risk youth petition under
7 chapter 13.32A RCW. If the department determines it is medically
8 appropriate for the minor to receive outpatient treatment and the minor
9 declines to obtain such treatment, such refusal shall be grounds for
10 the parent to file an at-risk youth petition.

11 (5) If after the third department review under subsection (2) of
12 this section, the department determines that it is medically
13 appropriate to continue the minor's inpatient treatment, the
14 department, or the department's designee, shall file a petition under
15 RCW 71.34.070 within seven days of the department's determination. For
16 the purposes of this section, it is not necessary to file a petition
17 for initial detention.

18 (6) If the evaluation conducted under section 23 of this act is
19 done by the department, the reviews required by subsections (1) and (2)
20 of this section shall be done by contract with an independent agency.

21 (7) The department may, subject to available funds, contract with
22 other governmental agencies to conduct the reviews under this section.
23 The department may seek reimbursement from the parents, their
24 insurance, or medicaid for the expense of any review conducted by an
25 agency under contract.

26 NEW SECTION. Sec. 15. A new section is added to chapter 71.34 RCW
27 to read as follows:

28 For purposes of eligibility for medical assistance under chapter
29 74.09 RCW, minors in inpatient mental health treatment shall be
30 considered to be part of their parent's or legal guardian's household,
31 unless the minor has been assessed by the department or its designee as
32 likely to require such treatment for at least ninety consecutive days,
33 or is in out-of-home care in accordance with chapter 13.34 RCW, or the
34 parents are found to not be exercising responsibility for care and
35 control of the minor. Payment for such care by the department shall be
36 made only in accordance with rules, guidelines, and clinical criteria
37 applicable to inpatient treatment of minors established by the
38 department.

1 **PART II-B - VOLUNTARY MENTAL HEALTH OUTPATIENT TREATMENT**

2 **Sec. 16.** RCW 71.34.030 and 1995 c 312 s 52 are each amended to
3 read as follows:

4 ~~((1))~~ Any minor thirteen years or older may request and receive
5 outpatient treatment without the consent of the minor's parent.
6 Parental authorization is required for outpatient treatment of a minor
7 under the age of thirteen.

8 ~~((2) When in the judgment of the professional person in charge of
9 an evaluation and treatment facility there is reason to believe that a
10 minor is in need of inpatient treatment because of a mental disorder,
11 and the facility provides the type of evaluation and treatment needed
12 by the minor, and it is not feasible to treat the minor in any less
13 restrictive setting or the minor's home, the minor may be admitted to
14 an evaluation and treatment facility in accordance with the following
15 requirements:~~

16 ~~(a) A minor may be voluntarily admitted by application of the
17 parent. The consent of the minor is not required for the minor to be
18 evaluated and admitted as appropriate.~~

19 ~~(b) A minor thirteen years or older may, with the concurrence of
20 the professional person in charge of an evaluation and treatment
21 facility, admit himself or herself without parental consent to the
22 evaluation and treatment facility, provided that notice is given by the
23 facility to the minor's parent in accordance with the following
24 requirements:~~

25 ~~(i) Notice of the minor's admission shall be in the form most
26 likely to reach the parent within twenty four hours of the minor's
27 voluntary admission and shall advise the parent that the minor has been
28 admitted to inpatient treatment; the location and telephone number of
29 the facility providing such treatment; and the name of a professional
30 person on the staff of the facility providing treatment who is
31 designated to discuss the minor's need for inpatient treatment with the
32 parent.~~

33 ~~(ii) The minor shall be released to the parent at the parent's
34 request for release unless the facility files a petition with the
35 superior court of the county in which treatment is being provided
36 setting forth the basis for the facility's belief that the minor is in
37 need of inpatient treatment and that release would constitute a threat
38 to the minor's health or safety.~~

1 ~~(iii) The petition shall be signed by the professional person in~~
2 ~~charge of the facility or that person's designee.~~

3 ~~(iv) The parent may apply to the court for separate counsel to~~
4 ~~represent the parent if the parent cannot afford counsel.~~

5 ~~(v) There shall be a hearing on the petition, which shall be held~~
6 ~~within three judicial days from the filing of the petition.~~

7 ~~(vi) The hearing shall be conducted by a judge, court commissioner,~~
8 ~~or licensed attorney designated by the superior court as a hearing~~
9 ~~officer for such hearing. The hearing may be held at the treatment~~
10 ~~facility.~~

11 ~~(vii) At such hearing, the facility must demonstrate by a~~
12 ~~preponderance of the evidence presented at the hearing that the minor~~
13 ~~is in need of inpatient treatment and that release would constitute a~~
14 ~~threat to the minor's health or safety. The hearing shall not be~~
15 ~~conducted using the rules of evidence, and the admission or exclusion~~
16 ~~of evidence sought to be presented shall be within the exercise of~~
17 ~~sound discretion by the judicial officer conducting the hearing.~~

18 ~~(c) Written renewal of voluntary consent must be obtained from the~~
19 ~~applicant no less than once every twelve months.~~

20 ~~(d) The minor's need for continued inpatient treatments shall be~~
21 ~~reviewed and documented no less than every one hundred eighty days.~~

22 ~~(3) A notice of intent to leave shall result in the following:~~

23 ~~(a) Any minor under the age of thirteen must be discharged~~
24 ~~immediately upon written request of the parent.~~

25 ~~(b) Any minor thirteen years or older voluntarily admitted may give~~
26 ~~notice of intent to leave at any time. The notice need not follow any~~
27 ~~specific form so long as it is written and the intent of the minor can~~
28 ~~be discerned.~~

29 ~~(c) The staff member receiving the notice shall date it~~
30 ~~immediately, record its existence in the minor's clinical record, and~~
31 ~~send copies of it to the minor's attorney, if any, the county-~~
32 ~~designated mental health professional, and the parent.~~

33 ~~(d) The professional person in charge of the evaluation and~~
34 ~~treatment facility shall discharge the minor, thirteen years or older,~~
35 ~~from the facility within twenty-four hours after receipt of the minor's~~
36 ~~notice of intent to leave, unless the county-designated mental health~~
37 ~~professional or a parent or legal guardian files a petition or an~~
38 ~~application for initial detention within the time prescribed by this~~
39 ~~chapter.~~

1 ~~(4) The ability of a parent to apply to a certified evaluation and~~
2 ~~treatment program for the involuntary admission of his or her minor~~
3 ~~child does not create a right to obtain or benefit from any funds or~~
4 ~~resources of the state. However, the state may provide services for~~
5 ~~indigent minors to the extent that funds are available therefor.))~~

6 NEW SECTION. **Sec. 17.** For the purpose of gathering information
7 related to parental notification of outpatient mental health treatment
8 of minors, the department of health shall conduct a survey of providers
9 of outpatient treatment, as defined in chapter 71.34 RCW. The survey
10 shall gather information from a statistically valid sample of
11 providers. In accordance with confidentiality statutes and the
12 physician-patient privilege, the survey shall secure information from
13 the providers related to:

- 14 (1) The number of minors receiving outpatient treatment;
- 15 (2) The number of parents of minors in treatment notified of the
16 minor's treatment;
- 17 (3) The average number of outpatient visits prior to parental
18 notification;
- 19 (4) The average number of treatments with parental notification;
- 20 (5) The average number of treatments without parental notification;
- 21 (6) The percentage of minors in treatment who are prescribed
22 medication;
- 23 (7) The medication prescribed;
- 24 (8) The number of patients terminating treatment due to parental
25 notification; and
- 26 (9) Any other pertinent information.

27 The department shall submit the survey results to the governor and
28 the appropriate committees of the legislature by December 1, 1998.

29 This section expires June 1, 1999.

30 **PART II-C - VOLUNTARY MENTAL HEALTH INPATIENT TREATMENT**

31 NEW SECTION. **Sec. 18.** A new section is added to chapter 71.34 RCW
32 to read as follows:

- 33 (1) A minor thirteen years or older may admit himself or herself to
34 an evaluation and treatment facility for inpatient mental treatment,
35 without parental consent. The admission shall occur only if the

1 professional person in charge of the facility concurs with the need for
2 inpatient treatment.

3 (2) When, in the judgment of the professional person in charge of
4 an evaluation and treatment facility, there is reason to believe that
5 a minor is in need of inpatient treatment because of a mental disorder,
6 and the facility provides the type of evaluation and treatment needed
7 by the minor, and it is not feasible to treat the minor in any less
8 restrictive setting or the minor's home, the minor may be admitted to
9 an evaluation and treatment facility.

10 (3) Written renewal of voluntary consent must be obtained from the
11 applicant no less than once every twelve months. The minor's need for
12 continued inpatient treatments shall be reviewed and documented no less
13 than every one hundred eighty days.

14 NEW SECTION. Sec. 19. A new section is added to chapter 71.34 RCW
15 to read as follows:

16 The administrator of the treatment facility shall provide notice to
17 the parents of a minor when the minor is voluntarily admitted to
18 inpatient treatment under section 18 of this act. The notice shall be
19 in the form most likely to reach the parent within twenty-four hours of
20 the minor's voluntary admission and shall advise the parent: (1) That
21 the minor has been admitted to inpatient treatment; (2) of the location
22 and telephone number of the facility providing such treatment; (3) of
23 the name of a professional person on the staff of the facility
24 providing treatment who is designated to discuss the minor's need for
25 inpatient treatment with the parent; and (4) of the medical necessity
26 for admission.

27 NEW SECTION. Sec. 20. A new section is added to chapter 71.34 RCW
28 to read as follows:

29 (1) Any minor thirteen years or older who has voluntarily admitted
30 himself or herself to inpatient treatment shall be released to the
31 parent upon the parent's written request for release unless the
32 professional person in charge of the facility exercises his or her
33 option to file a petition for commitment of a minor.

34 (2)(a) The petition shall be filed with the superior court of the
35 county in which treatment is being provided setting forth the basis for
36 the facility's belief that the minor is in need of inpatient treatment

1 and that release would constitute a threat to the minor's health or
2 safety.

3 (b) The petition shall be signed by the minor and the professional
4 person in charge of the facility or that person's designee.

5 (c) The parent may apply to the court for separate counsel to
6 represent the parent if the parent cannot afford counsel.

7 (d) There shall be a hearing on the petition, which shall be held
8 within seventy-two hours from the filing of the petition.

9 (3) The commitment hearing shall be conducted at the superior court
10 or an appropriate place at the treatment facility.

11 (4) The professional person must demonstrate, by a preponderance of
12 the evidence, that the minor is in need of inpatient treatment and that
13 the release would constitute a threat to the minor's health or safety.
14 The rules of evidence shall not apply at the hearing.

15 NEW SECTION. **Sec. 21.** A new section is added to chapter 71.34 RCW
16 to read as follows:

17 (1) Any minor thirteen years or older voluntarily admitted to an
18 evaluation and treatment facility under section 18 of this act may give
19 notice of intent to leave at any time. The notice need not follow any
20 specific form so long as it is written and the intent of the minor can
21 be discerned.

22 (2) The staff member receiving the notice shall date it
23 immediately, record its existence in the minor's clinical record, and
24 send copies of it to the minor's attorney, if any, the county-
25 designated mental health professional, and the parent.

26 (3) The professional person shall discharge the minor, thirteen
27 years or older, from the facility within twenty-four hours after
28 receipt of the minor's notice of intent to leave, unless the county-
29 designated mental health professional commences an initial detention
30 proceeding under the provisions of this chapter.

31 NEW SECTION. **Sec. 22.** A new section is added to chapter 71.34 RCW
32 to read as follows:

33 Any minor admitted to inpatient treatment under section 18 or 23 of
34 this act shall be discharged immediately from inpatient treatment upon
35 written request of the parent.

36 **PART II-D - PARENT-INITIATED MENTAL HEALTH TREATMENT**

1 NEW SECTION. Sec. 23. A new section is added to chapter 71.34 RCW
2 to read as follows:

3 (1) A parent may bring, or authorize the bringing of, his or her
4 minor child to an evaluation and treatment facility and request that
5 the professional person examine the minor to determine whether the
6 minor has a mental disorder and is in need of inpatient treatment.

7 (2) The consent of the minor is not required for admission,
8 evaluation, and treatment if the parent brings the minor to the
9 facility.

10 (3) An appropriately trained professional person may evaluate
11 whether the minor has a mental disorder. The evaluation shall be
12 completed within twenty-four hours of the time the minor was brought to
13 the facility, unless the professional person determines that the
14 condition of the minor necessitates additional time for evaluation. In
15 no event shall a minor be held longer than seventy-two hours for
16 evaluation without being admitted or released. If, in the judgment of
17 the professional person, it is determined it is a medical necessity for
18 the minor to receive inpatient treatment, the minor may be admitted.
19 Prior to admission, the facility shall limit treatment to that which
20 the professional person determines is medically necessary to stabilize
21 the minor's condition. Within twenty-four hours of the admission, the
22 professional person shall notify the department of the admission.

23 (4) No provider is obligated to provide treatment to a minor under
24 the provisions of this section. No provider may admit a minor to
25 treatment under this section unless it is medically necessary.

26 (5) No minor receiving inpatient treatment under this section may
27 be discharged from the facility based solely on his or her request.

28 (6) For the purposes of this section "professional person" does not
29 include a social worker, unless the social worker is certified under
30 RCW 18.19.110 and appropriately trained and qualified by education and
31 experience, as defined by the department, in psychiatric social work.

32 NEW SECTION. Sec. 24. A new section is added to chapter 71.34 RCW
33 to read as follows:

34 (1) A parent may bring, or authorize the bringing of, his or her
35 minor child to a provider of outpatient mental health treatment and
36 request that an appropriately trained professional person examine the
37 minor to determine whether the minor has a mental disorder and is in
38 need of outpatient treatment.

1 (2) The consent of the minor is not required for evaluation if the
2 parent brings the minor to the provider.

3 (3) The professional person may evaluate whether the minor has a
4 mental disorder and is in need of outpatient treatment.

5 NEW SECTION. **Sec. 25.** A new section is added to chapter 71.34 RCW
6 to read as follows:

7 The ability of a parent to apply to a certified evaluation and
8 treatment program for the admission of his or her minor does not create
9 a right to obtain or benefit from any funds or resources of the state.
10 The state may provide services for indigent minors to the extent that
11 funds are available.

12 **PART II-E - CHEMICAL DEPENDENCY**

13 **Sec. 26.** RCW 70.96A.020 and 1996 c 178 s 23 and 1996 c 133 s 33
14 are each reenacted and amended to read as follows:

15 For the purposes of this chapter the following words and phrases
16 shall have the following meanings unless the context clearly requires
17 otherwise:

18 (1) "Alcoholic" means a person who suffers from the disease of
19 alcoholism.

20 (2) "Alcoholism" means a disease, characterized by a dependency on
21 alcoholic beverages, loss of control over the amount and circumstances
22 of use, symptoms of tolerance, physiological or psychological
23 withdrawal, or both, if use is reduced or discontinued, and impairment
24 of health or disruption of social or economic functioning.

25 (3) "Approved treatment program" means a discrete program of
26 chemical dependency treatment provided by a treatment program certified
27 by the department of social and health services as meeting standards
28 adopted under this chapter.

29 (4) "Chemical dependency" means alcoholism or drug addiction, or
30 dependence on alcohol and one or more other psychoactive chemicals, as
31 the context requires.

32 (5) "Chemical dependency program" means expenditures and activities
33 of the department designed and conducted to prevent or treat alcoholism
34 and other drug addiction, including reasonable administration and
35 overhead.

1 (6) "Department" means the department of social and health
2 services.

3 (7) "Designated chemical dependency specialist" means a person
4 designated by the county alcoholism and other drug addiction program
5 coordinator designated under RCW 70.96A.310 to perform the commitment
6 duties described in RCW 70.96A.140 and qualified to do so by meeting
7 standards adopted by the department.

8 (8) "Director" means the person administering the chemical
9 dependency program within the department.

10 (9) "Drug addict" means a person who suffers from the disease of
11 drug addiction.

12 (10) "Drug addiction" means a disease characterized by a dependency
13 on psychoactive chemicals, loss of control over the amount and
14 circumstances of use, symptoms of tolerance, physiological or
15 psychological withdrawal, or both, if use is reduced or discontinued,
16 and impairment of health or disruption of social or economic
17 functioning.

18 (11) "Emergency service patrol" means a patrol established under
19 RCW 70.96A.170.

20 (12) "Gravely disabled by alcohol or other drugs" means that a
21 person, as a result of the use of alcohol or other drugs: (a) Is in
22 danger of serious physical harm resulting from a failure to provide for
23 his or her essential human needs of health or safety; or (b) manifests
24 severe deterioration in routine functioning evidenced by a repeated and
25 escalating loss of cognition or volitional control over his or her
26 actions and is not receiving care as essential for his or her health or
27 safety.

28 (13) "Incapacitated by alcohol or other psychoactive chemicals"
29 means that a person, as a result of the use of alcohol or other
30 psychoactive chemicals, has his or her judgment so impaired that he or
31 she is incapable of realizing and making a rational decision with
32 respect to his or her need for treatment and presents a likelihood of
33 serious harm to himself or herself, to any other person, or to
34 property.

35 (14) "Incompetent person" means a person who has been adjudged
36 incompetent by the superior court.

37 (15) "Intoxicated person" means a person whose mental or physical
38 functioning is substantially impaired as a result of the use of alcohol
39 or other psychoactive chemicals.

1 (16) "Licensed physician" means a person licensed to practice
2 medicine or osteopathic medicine and surgery in the state of
3 Washington.

4 (17) "Likelihood of serious harm" means either: (a) A substantial
5 risk that physical harm will be inflicted by an individual upon his or
6 her own person, as evidenced by threats or attempts to commit suicide
7 or inflict physical harm on one's self; (b) a substantial risk that
8 physical harm will be inflicted by an individual upon another, as
9 evidenced by behavior that has caused the harm or that places another
10 person or persons in reasonable fear of sustaining the harm; or (c) a
11 substantial risk that physical harm will be inflicted by an individual
12 upon the property of others, as evidenced by behavior that has caused
13 substantial loss or damage to the property of others.

14 (18) "Medical necessity" for inpatient care of a minor means a
15 requested certified inpatient service that is reasonably calculated to:
16 (a) Diagnose, arrest, or alleviate a chemical dependency; or (b)
17 prevent the worsening of chemical dependency conditions that endanger
18 life or cause suffering and pain, or result in illness or infirmity or
19 threaten to cause or aggravate a handicap, or cause physical deformity
20 or malfunction, and there is no adequate less restrictive alternative
21 available.

22 (19) "Medically appropriate" means a minor admitted by his or her
23 parents to inpatient treatment under section 31 of this act has not
24 sufficiently improved his or her condition to be released to a less
25 restrictive setting.

26 (20) "Minor" means a person less than eighteen years of age.

27 (~~(19)~~) (21) "Parent" means the parent or parents who have the
28 legal right to custody of the child. Parent includes custodian or
29 guardian.

30 (~~(20)~~) (22) "Peace officer" means a law enforcement official of
31 a public agency or governmental unit, and includes persons specifically
32 given peace officer powers by any state law, local ordinance, or
33 judicial order of appointment.

34 (~~(21)~~) (23) "Person" means an individual, including a minor.

35 (~~(22)~~) (24) "Professional person in charge" or "professional
36 person" means a physician or chemical dependency counselor as defined
37 in rule by the department, who is empowered by a certified treatment
38 program with authority to make assessment, admission, continuing care,
39 and discharge decisions on behalf of the certified program.

1 (25) "Secretary" means the secretary of the department of social
2 and health services.

3 (~~((23))~~) (26) "Treatment" means the broad range of emergency,
4 detoxification, residential, and outpatient services and care,
5 including diagnostic evaluation, chemical dependency education and
6 counseling, medical, psychiatric, psychological, and social service
7 care, vocational rehabilitation and career counseling, which may be
8 extended to alcoholics and other drug addicts and their families,
9 persons incapacitated by alcohol or other psychoactive chemicals, and
10 intoxicated persons.

11 (~~((24))~~) (27) "Treatment program" means an organization,
12 institution, or corporation, public or private, engaged in the care,
13 treatment, or rehabilitation of alcoholics or other drug addicts.

14 PART II-F - VOLUNTARY CHEMICAL DEPENDENCY OUTPATIENT TREATMENT

15 **Sec. 27.** RCW 70.96A.095 and 1996 c 133 s 34 are each amended to
16 read as follows:

17 (~~((1))~~) Any person thirteen years of age or older may give consent
18 for himself or herself to the furnishing of outpatient treatment by a
19 chemical dependency treatment program certified by the department.
20 (~~(Consent of the parent of a person less than eighteen years of age for~~
21 ~~inpatient treatment is necessary to authorize the care unless the child~~
22 ~~meets the definition of a child in need of services in RCW~~
23 ~~13.32A.030(4)(c), as determined by the department.)) Parental
24 authorization is required for any treatment of a minor under the age of
25 thirteen. (~~The parent of a minor is not liable for payment of care~~
26 ~~for such persons pursuant to this chapter, unless they have joined in~~
27 ~~the consent to the treatment.~~~~

28 ~~(2) The parent of any minor child may apply to a certified~~
29 ~~treatment program for the admission of his or her minor child for~~
30 ~~purposes authorized in this chapter. The consent of the minor child~~
31 ~~shall not be required for the application or admission. The certified~~
32 ~~treatment program shall accept the application and evaluate the child~~
33 ~~for admission. The ability of a parent to apply to a certified~~
34 ~~treatment program for the admission of his or her minor child does not~~
35 ~~create a right to obtain or benefit from any funds or resources of the~~
36 ~~state. However, the state may provide services for indigent minors to~~
37 ~~the extent that funds are available therefor.~~

1 ~~(3) Any provider of outpatient treatment who provides outpatient~~
2 ~~treatment to a minor thirteen years of age or older shall provide~~
3 ~~notice of the minor's request for treatment to the minor's parents if:~~
4 ~~(a) The minor signs a written consent authorizing the disclosure; or~~
5 ~~(b) the treatment program director determines that the minor lacks~~
6 ~~capacity to make a rational choice regarding consenting to disclosure.~~
7 ~~The notice shall be made within seven days of the request for~~
8 ~~treatment, excluding Saturdays, Sundays, and holidays, and shall~~
9 ~~contain the name, location, and telephone number of the facility~~
10 ~~providing treatment, and the name of a professional person on the staff~~
11 ~~of the facility providing treatment who is designated to discuss the~~
12 ~~minor's need for treatment with the parent.))~~

13 NEW SECTION. **Sec. 28.** A new section is added to chapter 70.96A
14 RCW to read as follows:

15 Any provider of outpatient treatment who provides outpatient
16 treatment to a minor thirteen years of age or older shall provide
17 notice of the minor's request for treatment to the minor's parents if:
18 (1) The minor signs a written consent authorizing the disclosure; or
19 (2) the treatment program director determines that the minor lacks
20 capacity to make a rational choice regarding consenting to disclosure.
21 The notice shall be made within seven days of the request for
22 treatment, excluding Saturdays, Sundays, and holidays, and shall
23 contain the name, location, and telephone number of the facility
24 providing treatment, and the name of a professional person on the staff
25 of the facility providing treatment who is designated to discuss the
26 minor's need for treatment with the parent.

27 **PART II-G - VOLUNTARY CHEMICAL DEPENDENCY INPATIENT TREATMENT**

28 NEW SECTION. **Sec. 29.** A new section is added to chapter 70.96A
29 RCW to read as follows:

30 Parental consent is required for inpatient chemical dependency
31 treatment of a minor, unless the child meets the definition of a child
32 in need of services in RCW 13.32A.030(4)(c) as determined by the
33 department: PROVIDED, That parental consent is required for any
34 treatment of a minor under the age of thirteen.

35 This section does not apply to petitions filed under this chapter.

1 NEW SECTION. **Sec. 30.** A new section is added to chapter 70.96A
2 RCW to read as follows:

3 (1) The parent of a minor is not liable for payment of inpatient or
4 outpatient chemical dependency treatment unless the parent has joined
5 in the consent to the treatment.

6 (2) The ability of a parent to apply to a certified treatment
7 program for the admission of his or her minor child does not create a
8 right to obtain or benefit from any funds or resources of the state.
9 However, the state may provide services for indigent minors to the
10 extent that funds are available therefor.

11 **PART II-H - PARENT-INITIATED CHEMICAL DEPENDENCY TREATMENT**

12 NEW SECTION. **Sec. 31.** A new section is added to chapter 70.96A
13 RCW to read as follows:

14 (1) A parent may bring, or authorize the bringing of, his or her
15 minor child to a certified treatment program and request that a
16 chemical dependency assessment be conducted by a professional person to
17 determine whether the minor is chemically dependent and in need of
18 inpatient treatment.

19 (2) The consent of the minor is not required for admission,
20 evaluation, and treatment if the parent brings the minor to the
21 program.

22 (3) An appropriately trained professional person may evaluate
23 whether the minor is chemically dependent. The evaluation shall be
24 completed within twenty-four hours of the time the minor was brought to
25 the program, unless the professional person determines that the
26 condition of the minor necessitates additional time for evaluation. In
27 no event shall a minor be held longer than seventy-two hours for
28 evaluation without being admitted or released. If, in the judgment of
29 the professional person, it is determined it is a medical necessity for
30 the minor to receive inpatient treatment, the minor may be admitted.
31 Prior to admission, the facility shall limit treatment to that which
32 the professional person determines is medically necessary to stabilize
33 the minor's condition. Within twenty-four hours of the admission the
34 professional person shall notify the department of the admission.

35 (4) No provider is obligated to provide treatment to a minor under
36 the provisions of this section. No provider may admit a minor to
37 treatment under this section unless it is medically necessary.

1 (5) No minor receiving inpatient treatment under this section may
2 be discharged from the program based solely on his or her request.

3 (6) Any minor admitted to inpatient treatment under this section
4 shall be discharged immediately from inpatient treatment upon written
5 request of the parent.

6 **Sec. 32.** RCW 70.96A.097 and 1995 c 312 s 48 are each amended to
7 read as follows:

8 ~~(1) ((The admission of any child under RCW 70.96A.095 may be~~
9 ~~reviewed by the county designated chemical dependency specialist~~
10 ~~between fifteen and thirty days following admission. The county-~~
11 ~~designated chemical dependency specialist may undertake the review on~~
12 ~~his or her own initiative and may seek reimbursement from the parents,~~
13 ~~their insurance, or medicaid for the expense of the review.~~

14 ~~(2))~~ The department shall ensure that, for any minor admitted to
15 inpatient treatment under section 31 of this act, a review is conducted
16 by a physician or chemical dependency counselor, as defined in rule by
17 the department, who is employed by the department or an agency under
18 contract with the department and who neither has a financial interest
19 in continued inpatient treatment of the minor nor is affiliated with
20 the program providing the treatment. The physician or chemical
21 dependency counselor shall conduct the review no sooner than five days
22 and no later than ((sixty)) seven days, excluding Saturdays, Sundays,
23 and holidays, following admission to determine whether it is medically
24 appropriate to continue the ((child's)) minor's treatment on an
25 inpatient basis. ((The department may, subject to available funds,
26 contract with a county for the conduct of the review conducted under
27 this subsection and may seek reimbursement from the parents, their
28 insurance, or medicaid for the expense of any review conducted by an
29 agency under contract.

30 ~~If the county designated chemical dependency specialist determines~~
31 ~~that continued inpatient treatment of the child is no longer medically~~
32 ~~appropriate, the specialist shall notify the facility, the child, the~~
33 ~~child's parents, and the department of the finding within twenty four~~
34 ~~hours of the determination.~~

35 ~~(3) For purposes of eligibility for medical assistance under~~
36 ~~chapter 74.09 RCW, children in inpatient mental health or chemical~~
37 ~~dependency treatment shall be considered to be part of their parent's~~
38 ~~or legal guardian's household, unless the child has been assessed by~~

1 the department of social and health services or its designee as likely
2 to require such treatment for at least ninety consecutive days, or is
3 in out of home care in accordance with chapter 13.34 RCW, or the
4 child's parents are found to not be exercising responsibility for care
5 and control of the child. Payment for such care by the department of
6 social and health services shall be made only in accordance with rules,
7 guidelines, and clinical criteria applicable to inpatient treatment of
8 minors established by the department.)

9 (2) The department shall, at thirty-day intervals following the
10 review conducted under subsection (1) of this section, conduct reviews
11 of the treatment status of each minor admitted to inpatient treatment,
12 under section 31 of this act, to determine whether it is medically
13 appropriate to continue the minor's treatment under inpatient status.
14 The reviews shall be conducted by a physician or chemical dependency
15 counselor, as defined in rule by the department, who is employed by the
16 department, or an agency under contract with the department, and who
17 neither has a financial interest in continued inpatient treatment of
18 the minor nor is affiliated with the program providing the treatment.

19 (3) In making a determination under subsection (1) or (2) of this
20 section whether it is medically appropriate to release the minor from
21 inpatient treatment, the department shall consider the opinion of the
22 treatment provider, the safety of the minor, the likelihood the minor's
23 chemical dependency recovery will deteriorate if released from
24 inpatient treatment, and the wishes of the parent.

25 (4) If, after any review conducted by the department under this
26 section, the department determines it is no longer medically
27 appropriate for a minor to receive inpatient treatment, the department
28 shall immediately notify the parents and the professional person in
29 charge. The professional person in charge shall release the minor to
30 the parents within twenty-four hours of receiving notice. If the
31 professional person in charge and the parent believe that it is
32 medically appropriate for the minor to remain in inpatient treatment,
33 the minor shall be released to the parent on the second judicial day
34 following the department's determination in order to allow the parent
35 time to file an at-risk youth petition under chapter 13.32A RCW. If the
36 department determines it is medically appropriate for the minor to
37 receive outpatient treatment and the minor declines to obtain such
38 treatment, such refusal shall be grounds for the parent to file an at-
39 risk youth petition.

1 (5) The department may, subject to available funds, contract with
2 other governmental agencies for the conduct of the reviews conducted
3 under this section and may seek reimbursement from the parents, their
4 insurance, or medicaid for the expense of any review conducted by an
5 agency under contract.

6 NEW SECTION. Sec. 33. A new section is added to chapter 70.96A
7 RCW to read as follows:

8 (1) A parent may bring, or authorize the bringing of, his or her
9 minor child to a provider of outpatient chemical dependency treatment
10 and request that an appropriately trained professional person examine
11 the minor to determine whether the minor has a chemical dependency and
12 is in need of outpatient treatment.

13 (2) The consent of the minor is not required for evaluation if the
14 parent brings the minor to the provider.

15 (3) The professional person in charge of the program may evaluate
16 whether the minor has a chemical dependency and is in need of
17 outpatient treatment.

18 NEW SECTION. Sec. 34. A new section is added to chapter 70.96A
19 RCW to read as follows:

20 For purposes of eligibility for medical assistance under chapter
21 74.09 RCW, minors in inpatient chemical dependency treatment shall be
22 considered to be part of their parent's or legal guardian's household,
23 unless the minor has been assessed by the department or its designee as
24 likely to require such treatment for at least ninety consecutive days,
25 or is in out-of-home care in accordance with chapter 13.34 RCW, or the
26 parents are found to not be exercising responsibility for care and
27 control of the minor. Payment for such care by the department shall be
28 made only in accordance with rules, guidelines, and clinical criteria
29 applicable to inpatient treatment of minors established by the
30 department.

31 NEW SECTION. Sec. 35. It is the purpose of sections 31 and 33 of
32 this act to assure the ability of parents to exercise reasonable,
33 compassionate care and control of their minor children when there is a
34 medical necessity for treatment and without the requirement of filing
35 a petition under chapter 70.96A RCW.

1 be entered ex parte without prior notice to the child or other parties.
2 Following the child's admission to detention, a detention review
3 hearing must be held in accordance with RCW 13.32A.065.

4 **Sec. 38.** RCW 13.34.165 and 1996 c 133 s 29 are each amended to
5 read as follows:

6 (1) Failure by a party to comply with an order entered under this
7 chapter is contempt of court (~~as provided in chapter 7.21 RCW~~) and
8 may be filed as either remedial sanctions under RCW 7.21.030 or
9 punitive sanctions under RCW 7.21.040.

10 (2) The maximum term of imprisonment that may be imposed as a
11 punitive sanction for contempt of court under this section is
12 confinement for up to seven days.

13 (3) A child imprisoned for contempt under this section shall be
14 confined only in a secure juvenile detention facility operated by or
15 pursuant to a contract with a county.

16 (4) A motion for (~~contempt~~) remedial sanctions may be made by a
17 parent, juvenile court personnel, or by any public agency,
18 organization, or person having custody of the child under a court order
19 entered pursuant to this chapter. A motion for contempt may be made by
20 a prosecuting attorney, however, filing of a complaint or information
21 by a prosecuting attorney is not required.

22 (5) Whenever the court finds probable cause to believe, based upon
23 consideration of a motion for contempt and the information set forth in
24 a supporting declaration, that a child has violated a placement order
25 entered under this chapter, the court may issue an order directing law
26 enforcement to pick up and take the child to detention. The order may
27 be entered ex parte without prior notice to the child or other parties.
28 Following the child's admission to detention, a detention review
29 hearing must be held in accordance with RCW 13.32A.065.

30 NEW SECTION. **Sec. 39.** Part headings used in this act do not
31 constitute any part of the law.

32 NEW SECTION. **Sec. 40.** This act may be known and cited as "the
33 Becca act of 1998."

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