

SENATE BILL REPORT

SB 5048

As Passed Senate, February 16, 2001

Title: An act relating to less restrictive alternative mental health commitments.

Brief Description: Changing provisions relating to less restrictive alternative commitments.

Sponsors: Senators Long, Hargrove, Winsley and Costa.

Brief History:

Committee Activity: Human Services & Corrections: 1/17/01 [DP].

Passed Senate: 2/16/01, 43-0.

SENATE COMMITTEE ON HUMAN SERVICES & CORRECTIONS

Majority Report: Do pass.

Signed by Senators Hargrove, Chair; Costa, Vice Chair; Carlson, Franklin, Hewitt, Kastama, Kohl-Welles, Long and Stevens.

Staff: Fara Daun (786-7459)

Background: In 1997, the Legislature stated a policy to require courts to give great weight to a prior history and pattern of mental decompensation in certain circumstances. In subsequent years, the Legislature has enacted further provisions to address the public safety concerns and treatment needs of persons who are repeatedly committed as a danger to self or others and required the court to give great weight to a person's past history of dangerousness in determining whether to commit him or her.

In 1999, the Court of Appeals reviewed the case of R. W., who was convicted of second degree assault of a psychiatric nurse. Following his release from confinement on the assault, he was sent directly to Western State for mental health evaluation. He was then committed for 14 days. This was his 13th commitment. At the end of the 14 days, a petition for 90-day inpatient treatment was filed and the jury was instructed to give great weight to his prior history and pattern of decompensation and police interventions. R. W. appealed and the court held that the jury instruction was an improper comment on the evidence because the statute used as authority was a legislative intent section and not a substantive law section.

Summary of Bill: In determining whether an inpatient or a less restrictive alternative is appropriate, the court must give great weight to the person's prior history or pattern of decompensation resulting in repeated hospitalizations or repeated police interventions.

Appropriation: None.

Fiscal Note: Not requested.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Testimony For: The Mental Health Division supports the use of historical information in assessing whether an inpatient or less restrictive alternative commitment is appropriate.

Testimony Against: Some questions asked, no testimony presented related to provisions of this bill.

Testified: Jack Morris, Acting Director, Mental Health Division, DSHS (pro); Richard Warner, Citizen's Commission on Human Rights (con).