
SENATE BILL 6696

State of Washington

59th Legislature

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By Senators Prentice, Hargrove, Zarelli, Stevens and McAuliffe; by request of Department of Social and Health Services

Read first time 01/19/2006. Referred to Committee on Human Services & Corrections.

1 AN ACT Relating to clarifying the financial responsibility of the
2 state and regional support networks for the costs associated with the
3 care of individuals in need of involuntary treatment under chapter
4 71.05 RCW; amending RCW 71.24.045, 71.24.300, 71.24.330, 71.05.300,
5 72.23.010, and 72.23.025; and reenacting and amending RCW 71.24.035.

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

7 **Sec. 1.** RCW 71.24.045 and 2005 c 503 s 8 are each amended to read
8 as follows:

9 The regional support network shall:

10 (1) Contract as needed with licensed service providers. The
11 regional support network may, in the absence of a licensed service
12 provider entity, become a licensed service provider entity pursuant to
13 minimum standards required for licensing by the department for the
14 purpose of providing services not available from licensed service
15 providers;

16 (2) Operate as a licensed service provider if it deems that doing
17 so is more efficient and cost effective than contracting for services.
18 When doing so, the regional support network shall comply with rules

1 promulgated by the secretary that shall provide measurements to
2 determine when a regional support network provided service is more
3 efficient and cost effective;

4 (3) Monitor and perform biennial fiscal audits of licensed service
5 providers who have contracted with the regional support network to
6 provide services required by this chapter. The monitoring and audits
7 shall be performed by means of a formal process which insures that the
8 licensed service providers and professionals designated in this
9 subsection meet the terms of their contracts;

10 (4) Assure that the special needs of minorities, the elderly,
11 disabled, children, and low-income persons are met within the
12 priorities established in this chapter;

13 (5) Maintain patient tracking information in a central location as
14 required for resource management services and the department's
15 information system;

16 (6) Use not more than two percent of state-appropriated community
17 mental health funds, which shall not include federal funds, to
18 administer community mental health programs under RCW 71.24.155:
19 PROVIDED, That county authorities serving a county or combination of
20 counties whose population is one hundred twenty-five thousand or more
21 may be entitled to sufficient state-appropriated community mental
22 health funds to employ up to one full-time employee or the equivalent
23 thereof in addition to the two percent limit established in this
24 subsection when such employee is providing staff services to a county
25 mental health advisory board;

26 (7) Collaborate to ensure that policies do not result in an adverse
27 shift of mentally ill persons into state and local correctional
28 facilities;

29 (8) Work with the department to expedite the enrollment or re-
30 enrollment of eligible persons leaving state or local correctional
31 facilities and institutions for mental diseases;

32 (9) If a regional support network is not operated by the county,
33 work closely with the county designated mental health professional or
34 county designated crisis responder to maximize appropriate placement of
35 persons into community services; (~~and~~)

36 (10) Coordinate services for individuals who have received services
37 through the community mental health system and who become patients at

1 a state mental hospital to ensure they are transitioned into the
2 community upon determination that they no longer need involuntary
3 inpatient care; and

4 (11) Evaluate all petitions for ninety and one hundred eighty-day
5 involuntary commitments under chapter 71.05 RCW to determine whether
6 the needs of the individual can be met through community support
7 services in a less restrictive alternative to detention. Regional
8 support networks must provide a less restrictive alternative to
9 detention whenever it is determined that the needs of the individual
10 can be met through community support services.

11 **Sec. 2.** RCW 71.24.300 and 2005 c 503 s 11 are each amended to read
12 as follows:

13 Upon the request of a tribal authority or authorities within a
14 regional support network the joint operating agreement or the county
15 authority shall allow for the inclusion of the tribal authority to be
16 represented as a party to the regional support network. The roles and
17 responsibilities of the county and tribal authorities shall be
18 determined by the terms of that agreement including a determination of
19 membership on the governing board and advisory committees, the number
20 of tribal representatives to be party to the agreement, and the
21 provisions of law and shall assure the provision of culturally
22 competent services to the tribes served. The state mental health
23 authority may not determine the roles and responsibilities of county
24 authorities as to each other under regional support networks by rule,
25 except to assure that all duties required of regional support networks
26 are assigned and that counties and the regional support network do not
27 duplicate functions and that a single authority has final
28 responsibility for all available resources and performance under the
29 regional support network's contract with the secretary. If a regional
30 support network is a private entity, the department shall allow for the
31 inclusion of the tribal authority to be represented as a party to the
32 regional support network. The roles and responsibilities of the
33 private entity and the tribal authorities shall be determined by the
34 department, through negotiation with the tribal authority.

35 (1) Regional support networks shall submit an overall six-year
36 operating and capital plan, timeline, and budget and submit progress

1 reports and an updated two-year plan biennially thereafter, to assume
2 within available resources all of the following duties:

3 (a) Administer and provide for the availability of all resource
4 management services, residential services, and community support
5 services.

6 (b) Administer and provide for the availability of all
7 investigation, transportation, court-related, and other services
8 provided by the state or counties pursuant to chapter 71.05 RCW.

9 (c) Provide within the boundaries of each regional support network
10 evaluation and treatment services for (~~at least eighty five percent~~
11 ~~of~~) all persons detained or committed for involuntary intensive
12 treatment for periods up to seventeen days according to chapter 71.05
13 RCW. Regional support networks with populations of less than one
14 hundred fifty thousand may contract to purchase evaluation and
15 treatment services from other networks. Insofar as the original intent
16 of serving persons in the community is maintained, the secretary is
17 authorized to approve exceptions on a case-by-case basis to the
18 requirement to provide evaluation and treatment services within the
19 boundaries of each regional support network. Such exceptions are
20 limited to:

21 (i) Contracts with neighboring or contiguous regions; or

22 (ii) Individuals detained or committed for periods up to seventeen
23 days at the state hospitals at the discretion of the secretary.

24 (d) Administer a portion of funds appropriated by the legislature
25 to house mentally ill persons in state institutions from counties
26 within the boundaries of any regional support network, with the
27 exception of persons currently confined at, or under the supervision
28 of, a state mental hospital pursuant to chapter 10.77 RCW, and provide
29 for the care of all persons needing evaluation and treatment services
30 for periods up to seventeen days according to chapter 71.05 RCW in
31 appropriate residential services, which may include state institutions
32 consistent with (c) of this subsection. To the extent that use of the
33 state hospitals by the regional support networks is authorized by the
34 secretary in (c) of this subsection, the regional support networks
35 shall reimburse the state for use of state institutions at a rate equal
36 to that assumed by the legislature when appropriating funds for such
37 care at state institutions during the biennium when reimbursement
38 occurs. The secretary shall submit a report to the appropriate

1 committees of the senate and house of representatives on the efforts to
2 implement this section by October 1, 2002. The duty of a state
3 hospital to accept persons for evaluation and treatment under chapter
4 71.05 RCW is limited by the responsibilities assigned to regional
5 support networks under this section.

6 (e) Administer and provide for the availability of all other mental
7 health services, which shall include patient counseling, day treatment,
8 consultation, education services, employment services as defined in RCW
9 71.24.035, and mental health services to children.

10 (f) Establish standards and procedures for reviewing individual
11 service plans and determining when that person may be discharged from
12 resource management services.

13 (2) A regional support network may request that any state-owned
14 land, building, facility, or other capital asset which was ever
15 purchased, deeded, given, or placed in trust for the care of the
16 mentally ill and which is within the boundaries of a regional support
17 network be made available to support the operations of the regional
18 support network. State agencies managing such capital assets shall
19 give first priority to requests for their use pursuant to this chapter.

20 (3) Each regional support network shall appoint a mental health
21 advisory board which shall review and provide comments on plans and
22 policies developed under this chapter, provide local oversight
23 regarding the activities of the regional support network, and work with
24 the regional support network to resolve significant concerns regarding
25 service delivery and outcomes. The department shall establish
26 statewide procedures for the operation of regional advisory committees
27 including mechanisms for advisory board feedback to the department
28 regarding regional support network performance. The composition of the
29 board shall be broadly representative of the demographic character of
30 the region and shall include, but not be limited to, representatives of
31 consumers and families, law enforcement, and where the county is not
32 the regional support network, county elected officials. Composition
33 and length of terms of board members may differ between regional
34 support networks but shall be included in each regional support
35 network's contract and approved by the secretary.

36 (4) Regional support networks shall assume all duties specified in
37 their plans and joint operating agreements through biennial contractual
38 agreements with the secretary.

1 (5) Regional support networks may receive technical assistance from
2 the housing trust fund and may identify and submit projects for housing
3 and housing support services to the housing trust fund established
4 under chapter 43.185 RCW. Projects identified or submitted under this
5 subsection must be fully integrated with the regional support network
6 six-year operating and capital plan, timeline, and budget required by
7 subsection (1) of this section.

8 **Sec. 3.** RCW 71.24.330 and 2005 c 503 s 6 are each amended to read
9 as follows:

10 (1) Contracts between a regional support network and the department
11 shall include mechanisms for monitoring performance under the contract
12 and remedies for failure to substantially comply with the requirements
13 of the contract including, but not limited to, financial penalties,
14 termination of the contract, and reprocurement of the contract.

15 (2) The procurement process shall encourage the preservation of
16 infrastructure previously purchased by the community mental health
17 service delivery system, the maintenance of linkages between other
18 services and delivery systems, and maximization of the use of available
19 funds for services versus profits. The procurement process shall
20 provide that public funds appropriated by the legislature shall not be
21 used to promote or deter, encourage, or discourage employees from
22 exercising their rights under Title 29, chapter 7, subchapter II,
23 United States Code or chapter 41.56 RCW.

24 (3) In addition to the requirements of RCW 71.24.035, contracts
25 shall:

26 (a) Define administrative costs and ensure that the regional
27 support network does not exceed an administrative cost of ten percent
28 of available funds;

29 (b) Require effective collaboration with law enforcement, criminal
30 justice agencies, and the chemical dependency treatment system;

31 (c) Require substantial implementation of department adopted
32 integrated screening and assessment process and matrix of best
33 practices; (~~and~~)

34 (d) Maintain the decision-making independence of designated mental
35 health professionals which does not limit the regional support
36 network's responsibility to provide less restrictive alternatives to
37 detention when appropriate under RCW 71.24.045; and

1 (e) Except at the discretion of the secretary, require regional
2 support networks to pay the state for the costs associated with
3 individuals who are voluntarily or civilly committed under chapter
4 71.05 RCW, being served on the grounds of the state hospitals, and not
5 receiving long-term inpatient care as defined in RCW 72.23.010.

6 **Sec. 4.** RCW 71.05.300 and 1998 c 297 s 17 are each amended to read
7 as follows:

8 The petition for ninety day treatment shall be filed with the clerk
9 of the superior court at least three days before expiration of the
10 fourteen-day period of intensive treatment. At the time of filing such
11 petition, the clerk shall set a time for the person to come before the
12 court on the next judicial day after the day of filing unless such
13 appearance is waived by the person's attorney, and the clerk shall
14 notify the ((county)) designated mental health professional. The
15 ((county)) designated mental health professional shall immediately
16 notify the person detained, his or her attorney, if any, and his or her
17 guardian or conservator, if any, and the prosecuting attorney, and
18 provide a copy of the petition to such persons as soon as possible.
19 The designated mental health professional shall also immediately
20 provide a copy of the petition to the regional support network and the
21 state hospital.

22 At the time set for appearance the detained person shall be brought
23 before the court, unless such appearance has been waived and the court
24 shall advise him or her of his or her right to be represented by an
25 attorney and of his or her right to a jury trial. If the detained
26 person is not represented by an attorney, or is indigent or is
27 unwilling to retain an attorney, the court shall immediately appoint an
28 attorney to represent him or her. The court shall, if requested,
29 appoint a reasonably available licensed physician, psychologist, or
30 psychiatrist, designated by the detained person to examine and testify
31 on behalf of the detained person.

32 The court may, if requested, also appoint a professional person as
33 defined in RCW 71.05.020 to seek less restrictive alternative courses
34 of treatment and to testify on behalf of the detained person. In the
35 case of a developmentally disabled person who has been determined to be
36 incompetent pursuant to RCW 10.77.090(4), then the appointed

1 professional person under this section shall be a developmental
2 disabilities professional.

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

5 **Sec. 5.** RCW 71.24.035 and 2005 c 504 s 715 and 2005 c 503 s 7 are
6 each reenacted and amended to read as follows:

7 (1) The department is designated as the state mental health
8 authority.

9 (2) The secretary shall provide for public, client, and licensed
10 service provider participation in developing the state mental health
11 program, developing contracts with regional support networks, and any
12 waiver request to the federal government under medicaid.

13 (3) The secretary shall provide for participation in developing the
14 state mental health program for children and other underserved
15 populations, by including representatives on any committee established
16 to provide oversight to the state mental health program.

17 (4) The secretary shall be designated as the regional support
18 network if the regional support network fails to meet state minimum
19 standards or refuses to exercise responsibilities under RCW 71.24.045.

20 (5) The secretary shall:

21 (a) Develop a biennial state mental health program that
22 incorporates regional biennial needs assessments and regional mental
23 health service plans and state services for mentally ill adults and
24 children. The secretary shall also develop a six-year state mental
25 health plan;

26 (b) Assure that any regional or county community mental health
27 program provides access to treatment for the region's residents in the
28 following order of priority: (i) The acutely mentally ill; (ii)
29 chronically mentally ill adults and severely emotionally disturbed
30 children; and (iii) the seriously disturbed. Such programs shall
31 provide:

32 (A) Outpatient services;

33 (B) Emergency care services for twenty-four hours per day;

34 (C) Day treatment for mentally ill persons which includes training
35 in basic living and social skills, supported work, vocational
36 rehabilitation, and day activities. Such services may include

1 therapeutic treatment. In the case of a child, day treatment includes
2 age-appropriate basic living and social skills, educational and
3 prevocational services, day activities, and therapeutic treatment;

4 (D) Screening for patients being considered for admission to state
5 mental health facilities to determine the appropriateness of admission;

6 (E) Employment services, which may include supported employment,
7 transitional work, placement in competitive employment, and other work-
8 related services, that result in mentally ill persons becoming engaged
9 in meaningful and gainful full or part-time work. Other sources of
10 funding such as the division of vocational rehabilitation may be
11 utilized by the secretary to maximize federal funding and provide for
12 integration of services;

13 (F) Consultation and education services; and

14 (G) Community support services;

15 (c) Develop and adopt rules establishing state minimum standards
16 for the delivery of mental health services pursuant to RCW 71.24.037
17 including, but not limited to:

18 (i) Licensed service providers. These rules shall permit a county-
19 operated mental health program to be licensed as a service provider
20 subject to compliance with applicable statutes and rules. The
21 secretary shall provide for deeming of compliance with state minimum
22 standards for those entities accredited by recognized behavioral health
23 accrediting bodies recognized and having a current agreement with the
24 department;

25 (ii) Regional support networks; and

26 (iii) Inpatient services, evaluation and treatment services and
27 facilities under chapter 71.05 RCW, resource management services, and
28 community support services;

29 (d) Assure that the special needs of minorities, the elderly,
30 disabled, children, and low-income persons are met within the
31 priorities established in this section;

32 (e) Establish a standard contract or contracts, consistent with
33 state minimum standards and RCW 71.24.320 and 71.24.330, which shall be
34 used in contracting with regional support networks. The standard
35 contract shall include a maximum fund balance, which shall be
36 consistent with that required by federal regulations or waiver
37 stipulations;

1 (f) Establish, to the extent possible, a standardized auditing
2 procedure which minimizes paperwork requirements of regional support
3 networks and licensed service providers. The audit procedure shall
4 focus on the outcomes of service and not the processes for
5 accomplishing them;

6 (g) Develop and maintain an information system to be used by the
7 state and regional support networks that includes a tracking method
8 which allows the department and regional support networks to identify
9 mental health clients' participation in any mental health service or
10 public program on an immediate basis. The information system shall not
11 include individual patient's case history files. Confidentiality of
12 client information and records shall be maintained as provided in this
13 chapter and in RCW 71.05.390, 71.05.420, and 71.05.440;

14 (h) License service providers who meet state minimum standards;

15 (i) Certify regional support networks that meet state minimum
16 standards;

17 (j) Periodically monitor the compliance of certified regional
18 support networks and their network of licensed service providers for
19 compliance with the contract between the department, the regional
20 support network, and federal and state rules at reasonable times and in
21 a reasonable manner;

22 (k) Fix fees to be paid by evaluation and treatment centers to the
23 secretary for the required inspections;

24 (l) Monitor and audit regional support networks and licensed
25 service providers as needed to assure compliance with contractual
26 agreements authorized by this chapter;

27 (m) Adopt such rules as are necessary to implement the department's
28 responsibilities under this chapter; and

29 (n) Assure the availability of an appropriate amount, as determined
30 by the legislature in the operating budget by amounts appropriated for
31 this specific purpose, of community-based, geographically distributed
32 residential services.

33 (6) The secretary shall use available resources only for regional
34 support networks, except to the extent authorized, and in accordance
35 with any priorities or conditions specified, in the biennial
36 appropriations act.

37 (7) Each certified regional support network and licensed service
38 provider shall file with the secretary, on request, such data,

1 statistics, schedules, and information as the secretary reasonably
2 requires. A certified regional support network or licensed service
3 provider which, without good cause, fails to furnish any data,
4 statistics, schedules, or information as requested, or files fraudulent
5 reports thereof, may have its certification or license revoked or
6 suspended.

7 (8) The secretary may suspend, revoke, limit, or restrict a
8 certification or license, or refuse to grant a certification or license
9 for failure to conform to: (a) The law; (b) applicable rules and
10 regulations; (c) applicable standards; or (d) state minimum standards.

11 (9) The superior court may restrain any regional support network or
12 service provider from operating without certification or a license or
13 any other violation of this section. The court may also review,
14 pursuant to procedures contained in chapter 34.05 RCW, any denial,
15 suspension, limitation, restriction, or revocation of certification or
16 license, and grant other relief required to enforce the provisions of
17 this chapter.

18 (10) Upon petition by the secretary, and after hearing held upon
19 reasonable notice to the facility, the superior court may issue a
20 warrant to an officer or employee of the secretary authorizing him or
21 her to enter at reasonable times, and examine the records, books, and
22 accounts of any regional support network or service provider refusing
23 to consent to inspection or examination by the authority.

24 (11) Notwithstanding the existence or pursuit of any other remedy,
25 the secretary may file an action for an injunction or other process
26 against any person or governmental unit to restrain or prevent the
27 establishment, conduct, or operation of a regional support network or
28 service provider without certification or a license under this chapter.

29 (12) The standards for certification of evaluation and treatment
30 facilities shall include standards relating to maintenance of good
31 physical and mental health and other services to be afforded persons
32 pursuant to this chapter and chapters 71.05 and 71.34 RCW, and shall
33 otherwise assure the effectuation of the purposes of these chapters.

34 (13)(a) The department, in consultation with affected parties,
35 shall establish a distribution formula that reflects regional needs
36 assessments based on the number of persons who are acutely mentally
37 ill, chronically mentally ill, severely emotionally disturbed children,
38 and seriously disturbed. The formula shall take into consideration the

1 impact on regions of demographic factors which result in concentrations
2 of priority populations as set forth in subsection (5)(b) of this
3 section. These factors shall include the population concentrations
4 resulting from commitments under chapters 71.05 and 71.34 RCW to state
5 psychiatric hospitals, as well as concentration in urban areas, at
6 border crossings at state boundaries, and other significant demographic
7 and workload factors.

8 (b) The formula shall also include a projection of the funding
9 allocations that will result for each region, which specifies
10 allocations according to priority populations, including the allocation
11 for services to children and other underserved populations.

12 (c) After July 1, 2003, the department may allocate up to ~~((two))~~
13 five percent of ((total funds)) available resources to be distributed
14 to the regional support networks for incentive payments to reward the
15 achievement of superior outcomes, or significantly improved outcomes,
16 as measured by a statewide performance measurement system consistent
17 with the framework recommended in the joint legislative audit and
18 review committee's performance audit of the mental health system. The
19 department shall annually report to the legislature on its criteria and
20 allocation of the incentives provided under this subsection.

21 (14) The secretary shall assume all duties assigned to the
22 nonparticipating regional support networks under chapters 71.05, 71.34,
23 and 71.24 RCW. Such responsibilities shall include those which would
24 have been assigned to the nonparticipating counties in regions where
25 there are not participating regional support networks.

26 The regional support networks, or the secretary's assumption of all
27 responsibilities under chapters 71.05, 71.34, and 71.24 RCW, shall be
28 included in all state and federal plans affecting the state mental
29 health program including at least those required by this chapter, the
30 medicaid program, and P.L. 99-660. Nothing in these plans shall be
31 inconsistent with the intent and requirements of this chapter.

32 (15) The secretary shall:

33 (a) Disburse funds for the regional support networks within sixty
34 days of approval of the biennial contract. The department must either
35 approve or reject the biennial contract within sixty days of receipt.

36 (b) Enter into biennial contracts with regional support networks.
37 The contracts shall be consistent with available resources. No
38 contract shall be approved that does not include progress toward

1 meeting the goals of this chapter by taking responsibility for: (i)
2 Short-term commitments; (ii) residential care; and (iii) emergency
3 response systems.

4 (c) Notify regional support networks of their allocation of
5 available resources at least sixty days prior to the start of a new
6 biennial contract period.

7 (d) Deny funding allocations to regional support networks based
8 solely upon formal findings of noncompliance with the terms of the
9 regional support network's contract with the department. (~~Written~~
10 ~~notice and at least thirty days for corrective action must precede any~~
11 ~~such action. In such cases, regional support networks shall have full~~
12 ~~rights to appeal under chapter 34.05 RCW.))~~

13 (16) The department, in cooperation with the state congressional
14 delegation, shall actively seek waivers of federal requirements and
15 such modifications of federal regulations as are necessary to allow
16 federal medicaid reimbursement for services provided by free-standing
17 evaluation and treatment facilities certified under chapter 71.05 RCW.
18 The department shall periodically report its efforts to the appropriate
19 committees of the senate and the house of representatives.

20 **Sec. 6.** RCW 72.23.010 and 2000 c 22 s 2 are each amended to read
21 as follows:

22 The definitions in this section apply throughout this chapter,
23 unless the context clearly requires otherwise.

24 (1) "Court" means the superior court of the state of Washington.

25 (2) "Department" means the department of social and health
26 services.

27 (3) "Employee" means an employee as defined in RCW 49.17.020.

28 (4) "Licensed physician" means an individual permitted to practice
29 as a physician under the laws of the state, or a medical officer,
30 similarly qualified, of the government of the United States while in
31 this state in performance of his or her official duties.

32 (5) "Long-term inpatient care" means inpatient services for persons
33 committed for intensive treatment for periods of ninety days or greater
34 under chapter 71.05 RCW. "Long-term inpatient care" as used in this
35 chapter does not include services for individuals committed under
36 chapter 71.05 RCW who are receiving services pursuant to a conditional
37 release or a court-ordered less restrictive alternative to detention.

1 (6) "Mentally ill person" means any person who, pursuant to the
2 definitions contained in RCW 71.05.020, as a result of a mental
3 disorder presents a likelihood of serious harm to others or himself or
4 herself or is gravely disabled.

5 ~~((+6+))~~ (7) "Patient" means a person under observation, care, or
6 treatment in a state hospital, or a person found mentally ill by the
7 court, and not discharged from a state hospital, or other facility, to
8 which such person had been ordered hospitalized.

9 ~~((+7+))~~ (8) "Resident" means a resident of the state of Washington.

10 ~~((+8+))~~ (9) "Secretary" means the secretary of social and health
11 services.

12 ~~((+9+))~~ (10) "State hospital" means any hospital, including a child
13 study and treatment center, operated and maintained by the state of
14 Washington for the care of the mentally ill.

15 ~~((+10+))~~ (11) "Superintendent" means the superintendent of a state
16 hospital.

17 ~~((+11+))~~ (12) "Violence" or "violent act" means any physical
18 assault or attempted physical assault against an employee or patient of
19 a state hospital.

20 Wherever used in this chapter, the masculine shall include the
21 feminine and the singular shall include the plural.

22 **Sec. 7.** RCW 72.23.025 and 1998 c 245 s 141 are each amended to
23 read as follows:

24 (1) It is the intent of the legislature to improve the quality of
25 service at state hospitals, eliminate overcrowding, and more
26 specifically define the role of the state hospitals. The legislature
27 intends that eastern and western state hospitals shall become clinical
28 centers for handling the most complicated long-term care needs of
29 patients with a primary diagnosis of mental disorder. ~~((Over the next
30 six years, their involvement in providing short term, acute care, and
31 less complicated long term care shall be diminished in accordance with
32 the revised responsibilities for mental health care under chapter 71.24
33 RCW.))~~ To this end, the legislature intends that funds appropriated
34 for mental health programs, including funds for regional support
35 networks and the state hospitals be used for persons with primary
36 diagnosis of mental disorder. The legislature finds that establishment
37 of the eastern state hospital board, the western state hospital board,

1 and institutes for the study and treatment of mental disorders at both
2 eastern state hospital and western state hospital will be instrumental
3 in implementing the legislative intent.

4 (2)(a) The eastern state hospital board and the western state
5 hospital board are each established. Members of the boards shall be
6 appointed by the governor with the consent of the senate. Each board
7 shall include:

8 (i) The director of the institute for the study and treatment of
9 mental disorders established at the hospital;

10 (ii) One family member of a current or recent hospital resident;

11 (iii) One consumer of services;

12 (iv) One community mental health service provider;

13 (v) Two citizens with no financial or professional interest in
14 mental health services;

15 (vi) One representative of the regional support network in which
16 the hospital is located;

17 (vii) One representative from the staff who is a physician;

18 (viii) One representative from the nursing staff;

19 (ix) One representative from the other professional staff;

20 (x) One representative from the nonprofessional staff; and

21 (xi) One representative of a minority community.

22 (b) At least one representative listed in (a)(viii), (ix), or (x)
23 of this subsection shall be a union member.

24 (c) Members shall serve four-year terms. Members of the board
25 shall be reimbursed for travel expenses as provided in RCW 43.03.050
26 and 43.03.060 and shall receive compensation as provided in RCW
27 43.03.240.

28 (3) The boards established under this section shall:

29 (a) Monitor the operation and activities of the hospital;

30 (b) Review and advise on the hospital budget;

31 (c) Make recommendations to the governor and the legislature for
32 improving the quality of service provided by the hospital;

33 (d) Monitor and review the activities of the hospital in
34 implementing the intent of the legislature set forth in this section;
35 and

36 (e) Consult with the secretary regarding persons the secretary may
37 select as the superintendent of the hospital whenever a vacancy occurs.

1 (4)(a) There is established at eastern state hospital and western
2 state hospital, institutes for the study and treatment of mental
3 disorders. The institutes shall be operated by joint operating
4 agreements between state colleges and universities and the department
5 of social and health services. The institutes are intended to conduct
6 training, research, and clinical program development activities that
7 will directly benefit mentally ill persons receiving treatment in
8 Washington state by performing the following activities:

9 (i) Promote recruitment and retention of highly qualified
10 professionals at the state hospitals and community mental health
11 programs;

12 (ii) Improve clinical care by exploring new, innovative, and
13 scientifically based treatment models for persons presenting
14 particularly difficult and complicated clinical syndromes;

15 (iii) Provide expanded training opportunities for existing staff at
16 the state hospitals and community mental health programs;

17 (iv) Promote bilateral understanding of treatment orientation,
18 possibilities, and challenges between state hospital professionals and
19 community mental health professionals.

20 (b) To accomplish these purposes the institutes may, within funds
21 appropriated for this purpose:

22 (i) Enter joint operating agreements with state universities or
23 other institutions of higher education to accomplish the placement and
24 training of students and faculty in psychiatry, psychology, social
25 work, occupational therapy, nursing, and other relevant professions at
26 the state hospitals and community mental health programs;

27 (ii) Design and implement clinical research projects to improve the
28 quality and effectiveness of state hospital services and operations;

29 (iii) Enter into agreements with community mental health service
30 providers to accomplish the exchange of professional staff between the
31 state hospitals and community mental health service providers;

32 (iv) Establish a student loan forgiveness and conditional
33 scholarship program to retain qualified professionals at the state
34 hospitals and community mental health providers when the secretary has
35 determined a shortage of such professionals exists.

36 (c) Notwithstanding any other provisions of law to the contrary,
37 the institutes may enter into agreements with the department or the

1 state hospitals which may involve changes in staffing necessary to
2 implement improved patient care programs contemplated by this section.

3 (d) The institutes are authorized to seek and accept public or
4 private gifts, grants, contracts, or donations to accomplish their
5 purposes under this section.

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