

SENATE BILL REPORT

SB 6791

As of February 3, 2010

Title: An act relating to evaluations of persons under the involuntary treatment act.

Brief Description: Concerning the involuntary treatment act.

Sponsors: Senators Hargrove and McAuliffe; by request of Governor Gregoire.

Brief History:

Committee Activity: Human Services & Corrections: 2/04/10.

SENATE COMMITTEE ON HUMAN SERVICES & CORRECTIONS

Staff: Kevin Black (786-7747)

Background: The Involuntary Treatment Act allows a person to be detained for involuntary mental health treatment at a locked mental health facility if the person meets criteria for civil commitment. A commitment under the Involuntary Treatment Act must be initiated by a designated mental health professional (DMHP). In order to initiate a civil commitment a DMHP must find, following an investigation, that a person who is not willing to voluntarily seek mental health treatment presents, as a result of a mental disorder, a likelihood of serious harm or that the person is gravely disabled. A person presents a likelihood of serious harm when the person's behavior indicates a substantial risk that the person will inflict physical harm on himself or herself, another person, or the property of others. A person is gravely disabled when, as a result of a mental disorder, the person is in danger of serious physical harm resulting from a failure to provide for the person's essential human needs of health or safety, or manifests severe deterioration in routine functioning and is not receiving such care as is essential for the person's health or safety.

Once a DMHP initiates a civil commitment, the superior court in the county where the person is detained must hold a probable cause hearing within 72 hours to determine whether there is a basis to continue the involuntary mental health treatment.

Summary of Bill: The bill as referred to committee not considered.

Summary of Bill (Proposed Substitute): In determining whether a person is gravely disabled or presents a likelihood of serious harm, the court or evaluating DMHP must consider the symptoms and behavior of the person in light of all available evidence or

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information concerning the person's historical behavior, as disclosed by the clinical record or credible witnesses with knowledge of the person.

Symptoms or behavior which standing alone would not justify civil commitment may support an inference of grave disability or likelihood of serious harm when: (1) such symptoms or behavior are substantially similar to those which preceded and led to a previous involuntary hospitalization, incident of severe deterioration, or one or more violent acts; and (2) unless treated, the person will continue with reasonable medical probability to physically or mentally deteriorate so that the person will become gravely disabled or present a likelihood of serious harm.

The Washington Institute for Public Policy must search for validated mental health tools for a DMHP to use when assessing persons for civil commitment.

Appropriation: None.

Fiscal Note: Requested on February 3, 2010.

Committee/Commission/Task Force Created: No.

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