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**Ways & Means Committee**

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**HB 2131**

**Brief Description:** Delaying implementation of certain provisions related to evaluations of persons under the involuntary treatment act.

**Sponsors:** Representatives Dickerson and Hunter; by request of Department of Social and Health Services.

**Brief Summary of Bill**

- Delays from January 2012 until July 2015 the effective date of some provisions of 2010 legislation that expanded the factors that may be considered for detaining and committing persons under the Involuntary Treatment Act.

**Hearing Date:** 12/2/11

**Staff:** Andy Toulon (786-7178).

**Background:**

Under the Involuntary Treatment Act (ITA), a person can be detained and ordered to undergo treatment at an inpatient psychiatric facility when the person, as a result of a mental disorder, presents a likelihood of serious harm or is gravely disabled. Designated mental health professionals (DMHPs) are responsible for initially investigating and detaining people who are in need of involuntary treatment. An initial commitment may last for up to three days, but individuals can be committed by a court for additional periods of 14, 90, or 180 days if necessary for further treatment.

Chapter 280, Laws of 2010 (Second Substitute House Bill 3076), enacted expanded factors that DMHPs and courts may consider when making determinations for commitment under the ITA. Under these provisions, a DMHP must consider all reasonably available evidence from credible witnesses with significant contact and history of involvement with the person regarding the historical behavior of the person, prior commitments or recommendations for evaluation, and

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prior determinations of incompetency or insanity. In addition, DMHPs and courts may consider symptoms and behavior that standing alone would not justify commitment, but that show a marked deterioration in the person's condition and are closely associated with symptoms and behavior that led to past incidents of involuntary hospitalization or violent acts. These changes take effect on January 1, 2012.

The fiscal year (FY) 2009-11 Operating Budget provided funding for the Washington State Institute for Public Policy (WSIPP) to complete an assessment of (i) the extent to which the number of persons involuntarily committed for three, 14, and 90 days is likely to increase as a result of the revised commitment standards; (ii) the availability of community treatment capacity to accommodate that increase; (iii) strategies for cost-effectively leveraging state, local, and private resources to increase community involuntary treatment capacity; and (iv) the extent to which increases in involuntary commitments are likely to be offset by reduced utilization of correctional facilities, publicly-funded medical care, and state psychiatric hospitalizations. The WSIPP estimates that there will be a need for additional evaluation and treatment and inpatient psychiatric beds to accommodate an expected growth in admissions related to the 2010 ITA changes.

**Summary of Bill:**

The effective date of certain provisions of Chapter 280, Laws of 2010 (Second Substitute House Bill 3076) is delayed until July 1, 2015 (rather than January 1, 2012). The expansion of the types of information that designated mental health professionals and courts may consider when determining whether to detain or commit someone under the Involuntary Treatment Act is delayed until July 1, 2015.

**Appropriation:** None.

**Fiscal Note:** Requested on November 29, 2011.

**Effective Date:** The bill contains an emergency clause and takes effect immediately.