

SENATE BILL REPORT

SHB 1170

As of March 16, 2011

Title: An act relating to triage facilities.

Brief Description: Concerning triage facilities.

Sponsors: House Committee on Judiciary (originally sponsored by Representatives Roberts, Hope, Dickerson, Dammeier, Green, Rolfes, Haigh, Appleton, Walsh, Ormsby, Darneille and Kenney).

Brief History: Passed House: 3/01/11, 98-0.

Committee Activity: Human Services & Corrections: 3/15/11.

SENATE COMMITTEE ON HUMAN SERVICES & CORRECTIONS

Staff: Kevin Black (786-7747)

Background: A crisis triage facility is a facility which accepts the placement of a person exhibiting signs of mental illness by police or medical personnel for a period of short-term stabilization and assessment in lieu of placing the person in an emergency room, evaluation and treatment facility, or jail. After a short period, the person may be either detained in an evaluation and treatment facility or jail, or released with referrals for outpatient treatment services.

In 2007 the Legislature created a facility similar to a crisis triage facility called a crisis stabilization unit (CSU). A CSU is licensed by the Department of Health (DOH) and certified by the Department of Social and Health Services (DSHS). A CSU is permitted to detain a person involuntarily for up to 12 hours. Peace officers are authorized to bring an individual who is known to suffer from a mental disorder to a CSU when there is reasonable cause to believe the individual has committed a nonfelony crime which is not a serious offense or when the individual is suspected of meeting civil commitment criteria. There has been some criticism of the regulations developed for the operation and licensure of CSUs as being too stringent. There is one certified CSU in Washington which is located in Pierce County.

Summary of Bill: A triage facility is defined as a short-term facility licensed by DOH and certified by DSHS which is designed to assess and stabilize an individual or determine the individual's need for involuntary commitment. A triage facility must meet DOH operating

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standards for residential treatment facilities. DSHS must work with the Washington Association of Counties and Washington Association of Sheriffs and Police Chiefs in creating rules which establish standards for triage facilities, which must not require the facilities to provide 24-hour nursing. Facilities which already provide triage services must not be required to relicense or recertify under any new rules related to triage facilities. A peace officer is empowered to detain an individual known to suffer from a mental disorder to a triage facility when there is reasonable cause to believe the individual has committed a nonfelony crime which is not a serious offense or when the individual is suspected of meeting civil commitment criteria.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

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

Staff Summary of Public Testimony: PRO: This bill exemplifies the growing partnership between law enforcement and human services. It gives the county an opportunity to assess, diagnose, and make decisions about where services would best be provided. It is for short-term treatment only. This bill will divert patients from emergency rooms. It is very difficult to manage persons with mental illnesses in jail; law enforcement supports diversions as described in this bill.

Persons Testifying: PRO: Representative Roberts, prime sponsor; Ken Stark, Snohomish County Human Services; Jo Arlow, Washington Association of Sheriffs and Police Chiefs; Seth Dawson, National Alliance on Mental Illness.