

# SENATE BILL REPORT

## SB 5968

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As of January 21, 2014

**Title:** An act relating to the safe care of inmates and suspects in Washington hospitals.

**Brief Description:** Addressing the safe care of inmates and suspects in Washington hospitals.

**Sponsors:** Senators Dammeier, Cleveland, Tom, King, Keiser and O'Ban.

**Brief History:**

**Committee Activity:** Law & Justice: 1/20/14.

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### SENATE COMMITTEE ON LAW & JUSTICE

**Staff:** Tim Ford (786-7423)

**Background:** Washington law currently does not require law enforcement to identify or accompany an individual who is suspected or convicted of any crime when brought to a hospital for treatment. Hospitals are defined in RCW 70.41.020 to mean an institution or place which provides facilities and services for 24 hours or more for medical care and diagnosis. Hospitals treat illness, injury, deformity, abnormality, or any other condition for which obstetrical, medical, or surgical services would be appropriate. Hospitals, as defined, exclude other places including clinics, physician's offices, or institutions specifically intended for use in the diagnosis and care for mental illness or other abnormal mental conditions. Hospital policy may address safety considerations for patients, staff, and that policy may vary according to institution, facility structure, and circumstances.

**Summary of Bill:** All individuals suspected or convicted of a serious violent offense, sex offense, or violent offense brought to a hospital by a law enforcement officer or at the direction of a law enforcement agency must be accompanied at all times by a law enforcement officer or guard supplied by the responsible law enforcement agency except when otherwise directed by the attending physician. Law enforcement must identify individuals suspected or convicted of a serious violent offense, sex offense, or violent offense to the responsible hospital manager and to hospital staff providing care. The hospital may not be billed or charged for the expense of law enforcement officers who accompany an individual receiving treatment.

**Appropriation:** None.

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*This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.*

**Fiscal Note:** Requested on January 16, 2014.

**Committee/Commission/Task Force Created:** No.

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

**Staff Summary of Public Testimony:** PRO: Incidents of violence are rising in hospitals. Patients at hospitals are unable to defend themselves against violence. Law enforcement does not always inform the hospital why a person is under custody. Dealing with violent persons is mentally draining and takes hospital staff away from other patients. Hospitals are for healing and are not a holding tank.

CON: There is no definition for a suspect. Law enforcement has limited resources. Officers may be investigating an incident and will call 911 to take injured persons to a hospital without knowing if they are innocent or a suspect. If law enforcement needs to attend suspects, then they cannot continue the investigation. A person injured in an auto accident may have a 20-year-old conviction, but is not violent anymore. There is potential liability under the public duty doctrine. This issue should be solved at the local level.

**Persons Testifying:** PRO: Senator Dammeier, prime sponsor; Cassie Sauer, WA State Hospital Assn.; Krista LaCombe, Sarah Johnson, Registered Nurses; Kim Rechner, citizen.

CON: Don Pierce, Sheriffs and Police Chiefs Assn.; Candice Bock, Assn. of WA Cities; James McMahon, WA Assn. of County Officials.