

SENATE BILL REPORT

SB 6345

As of February 5, 2014

Title: An act relating to the arrest of individuals who suffer from chemical dependency.

Brief Description: Concerning the arrest of individuals who suffer from chemical dependency.

Sponsors: Senators McCoy, Pearson, Chase and Kohl-Welles.

Brief History:

Committee Activity: Human Services & Corrections: 2/04/14.

SENATE COMMITTEE ON HUMAN SERVICES & CORRECTIONS

Staff: Kevin Black (786-7747)

Background: A police officer may take an individual whom the officer has reasonable cause to believe has committed a nonserious misdemeanor offense and who is known to suffer from a mental disorder to a crisis stabilization unit, triage facility, or evaluation and treatment facility, or the officer may release the individual upon agreement to voluntarily participate in treatment. The facility must notify the officer upon the person's release from treatment if the arresting officer requests notice. An agreement to participate in treatment does not create immunity from prosecution. The facility must notify the arresting officer if the individual breaks the treatment agreement. The police officer must be guided by standards mutually agreed upon with the prosecuting attorney.

A misdemeanor is not serious when it is not a violent offense, sex offense, serious traffic offense, most serious offense, crime against persons, firearm or dangerous weapon offense, domestic violence offense, or harassment offense.

A police officer may take a juvenile whom the officer has reasonable cause to believe has committed a nonserious misdemeanor offense and who is known to suffer from a mental disorder to an agreed-upon treatment facility based upon an agreement between the local prosecutor and law enforcement. The juvenile may be held for up to 12 hours at the facility and must be examined within three hours of arrival.

A diversion agreement may be entered with a juvenile accused of an offense. If the assessment of the juvenile reveals mental health needs, the juvenile may access up to 30 hours of counseling.

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.

Summary of Bill: A police officer may take an individual whom the officer has reasonable cause to believe has committed a nonserious misdemeanor offense and who is known to suffer from a chemical dependency disorder to an approved chemical dependency provider or emergency medical service used for incapacitated persons, or the officer may release the individual upon agreement to voluntarily participate in outpatient treatment. The individual must not have committed a violation relating to driving or being in physical control of a vehicle while intoxicated. The chemical dependency provider must notify the officer upon the person's release from treatment if the arresting officer requests notice. An agreement to participate in treatment does not create immunity from prosecution. The facility must notify the arresting officer if the individual breaks the treatment agreement. The police officer must be guided by standards mutually agreed upon with the prosecuting attorney.

A police officer may take a juvenile whom the officer has reasonable cause to believe has committed a nonserious misdemeanor offense and who is known to suffer from a chemical dependency disorder to an agreed-upon treatment facility based upon an agreement between the local prosecutor and law enforcement. The juvenile may be held for up to 12 hours at the facility and must be examined within three hours of arrival.

If the assessment of a juvenile accused of an offense reveals chemical dependency needs, the juvenile may access up to 30 hours of counseling pursuant to a diversion agreement.

Appropriation: None.

Fiscal Note: Available.

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: We are trying to reduce the cost of bringing persons with chemical dependency and mental health issues to jails and emergency rooms. This is a permissive diversion program. It is not a get out of jail free card. Police officers know how to identify which people are serious criminals and which ones need to go to a program to work on their issues. This is a high priority bill for Snohomish County. Our jail spends \$700,000 to \$800,000 per year on medications for mental health and substance abuse. Once these folks find sobriety, they are much less likely to offend. Neither the police or prosecutor is forced to participate in this program. The county will have to pay for this bill, and we are committed to doing so. This will give us a tool in the toolbox to reduce recidivism. We will use 0.1 percent sales tax money and it will not cost anything for the state. We have two full time researchers that look at health statistics, and they are finding cost shifts and cost avoidances across systems. Our goal is to divert offenders who do not belong in the criminal justice system and can be treated more humanely and effectively in the treatment system. This extends a bill last year that gave the same diversion permission for persons with mental illness. This will free up jail space for people who really do belong there. Effective treatment programs consistently show a return on investment and are a good use of tax dollars. This bill does not take away the option for arrest and prosecution, even if the diversion option is exercised.

Persons Testifying: PRO: Senator McCoy, prime sponsor; Brian Sullivan, Snohomish County councilmember; Ken Stark, Snohomish County Human Services; Alex Hur, Pioneer Human Services; Seth Dawson, National Alliance on Mental Illness.