

E2SSB 5649 - H COMM AMD
By Committee on Judiciary

ADOPTED 4/14/2015

1 Strike everything after the enacting clause and insert the
2 following:

3 "Sec. 1. RCW 71.05.010 and 1998 c 297 s 2 are each amended to
4 read as follows:

5 (1) The provisions of this chapter are intended by the
6 legislature:

7 ~~((+1))~~ (a) To protect the health and safety of persons suffering
8 from mental disorders and to protect public safety through use of the
9 parens patriae and police powers of the state;

10 (b) To prevent inappropriate, indefinite commitment of mentally
11 disordered persons and to eliminate legal disabilities that arise
12 from such commitment;

13 ~~((+2))~~ (c) To provide prompt evaluation and timely and
14 appropriate treatment of persons with serious mental disorders;

15 ~~((+3))~~ (d) To safeguard individual rights;

16 ~~((+4))~~ (e) To provide continuity of care for persons with
17 serious mental disorders;

18 ~~((+5))~~ (f) To encourage the full use of all existing agencies,
19 professional personnel, and public funds to prevent duplication of
20 services and unnecessary expenditures; and

21 ~~((+6))~~ (g) To encourage, whenever appropriate, that services be
22 provided within the community(~~(+~~

23 ~~(7) To protect the public safety))~~.

24 (2) When construing the requirements of this chapter the court
25 must focus on the merits of the petition, except where requirements
26 have been totally disregarded, as provided in *In re C.W.*, 147 Wn.2d
27 259, 281 (2002). A presumption in favor of deciding petitions on
28 their merits furthers both public and private interests because the
29 mental and physical well-being of individuals as well as public
30 safety may be implicated by the decision to release an individual and
31 discontinue his or her treatment.

1 NEW SECTION. **Sec. 2.** A new section is added to chapter 71.05
2 RCW to read as follows:

3 (1) The department may use a single bed certification process as
4 outlined in rule to provide additional treatment capacity for a
5 person suffering from a mental disorder for whom an evaluation and
6 treatment bed is not available. The facility that is the proposed
7 site of the single bed certification must be a facility that is
8 willing and able to provide the person with timely and appropriate
9 treatment either directly or by arrangement with other public or
10 private agencies.

11 (2) A single bed certification must be specific to the patient
12 receiving treatment.

13 (3) A designated mental health professional who submits an
14 application for a single bed certification for treatment at a
15 facility that is willing and able to provide timely and appropriate
16 mental health treatment in good faith belief that the single bed
17 certification is appropriate may presume that the single bed
18 certification will be approved for the purpose of completing the
19 detention process and responding to other emergency calls.

20 (4) The department may adopt rules implementing this section and
21 continue to enforce rules it has already adopted except where
22 inconsistent with this section.

23 NEW SECTION. **Sec. 3.** A new section is added to chapter 71.05
24 RCW to read as follows:

25 (1) A designated mental health professional shall make a report
26 to the department when he or she determines a person meets detention
27 criteria under RCW 71.05.150, 71.05.153, 71.34.700, or 71.34.710 and
28 there are not any beds available at an evaluation and treatment
29 facility, the person has not been provisionally accepted for
30 admission by a facility, and the person cannot be served on a single
31 bed certification or less restrictive alternative. Starting at the
32 time when the designated mental health professional determines a
33 person meets detention criteria and the investigation has been
34 completed, the designated mental health professional has twenty-four
35 hours to submit a completed report to the department.

36 (2) The report required under subsection (1) of this section must
37 contain at a minimum:

38 (a) The date and time that the investigation was completed;

1 (b) The identity of the responsible regional support network or
2 behavioral health organization;

3 (c) The county in which the person met detention criteria;

4 (d) A list of facilities which refused to admit the person; and

5 (e) Identifying information for the person, including age or date
6 of birth.

7 (3) The department shall develop a standardized reporting form or
8 modify the current form used for single bed certifications for the
9 report required under subsection (2) of this section and may require
10 additional reporting elements as it determines are necessary or
11 supportive. The department shall also determine the method for the
12 transmission of the completed report from the designated mental
13 health professional to the department.

14 (4) The department shall create quarterly reports displayed on
15 its web site that summarize the information reported under subsection
16 (2) of this section. At a minimum, the reports must display data by
17 county and by month. The reports must also include the number of
18 single bed certifications granted by category. The categories must
19 include all of the reasons that the department recognizes for issuing
20 a single bed certification, as identified in rule.

21 (5) The reports provided according to this section may not
22 display "protected health information" as that term is used in the
23 federal health insurance portability and accountability act of 1996,
24 nor information contained in "mental health treatment records" as
25 that term is used in chapter 70.02 RCW or elsewhere in state law, and
26 must otherwise be compliant with state and federal privacy laws.

27 (6) For purposes of this section, the term "single bed
28 certification" means a situation in which an adult on a seventy-two
29 hour detention, fourteen-day commitment, ninety-day commitment, or
30 one hundred eighty-day commitment is detained to a facility that is:

31 (a) Not certified as an inpatient evaluation and treatment
32 facility; or

33 (b) A certified inpatient evaluation and treatment facility that
34 is already at capacity.

35 NEW SECTION. **Sec. 4.** A new section is added to chapter 71.05
36 RCW to read as follows:

37 (1) The department shall promptly share reports it receives under
38 section 3 of this act with the responsible regional support network
39 or behavioral health organization. The regional support network or

1 behavioral health organization receiving this notification must
2 attempt to engage the person in appropriate services for which the
3 person is eligible and report back within seven days to the
4 department.

5 (2) The department shall track and analyze reports submitted
6 under section 3 of this act. The department must initiate corrective
7 action when appropriate to ensure that each regional support network
8 or behavioral health organization has implemented an adequate plan to
9 provide evaluation and treatment services. Corrective actions may
10 include remedies under RCW 71.24.330 and 43.20A.894, including
11 requiring expenditure of reserve funds. An adequate plan may include
12 development of less restrictive alternatives to involuntary
13 commitment such as crisis triage, crisis diversion, voluntary
14 treatment, or prevention programs reasonably calculated to reduce
15 demand for evaluation and treatment under this chapter.

16 **Sec. 5.** RCW 71.05.050 and 2000 c 94 s 3 are each amended to read
17 as follows:

18 (1) Nothing in this chapter shall be construed to limit the right
19 of any person to apply voluntarily to any public or private agency or
20 practitioner for treatment of a mental disorder, either by direct
21 application or by referral. Any person voluntarily admitted for
22 inpatient treatment to any public or private agency shall be released
23 immediately upon his or her request. Any person voluntarily admitted
24 for inpatient treatment to any public or private agency shall orally
25 be advised of the right to immediate discharge, and further advised
26 of such rights in writing as are secured to them pursuant to this
27 chapter and their rights of access to attorneys, courts, and other
28 legal redress. Their condition and status shall be reviewed at least
29 once each one hundred eighty days for evaluation as to the need for
30 further treatment or possible discharge, at which time they shall
31 again be advised of their right to discharge upon request(~~(+PROVIDED~~
32 ~~HOWEVER, That)~~).

33 (2) If the professional staff of any public or private agency or
34 hospital regards a person voluntarily admitted who requests discharge
35 as presenting, as a result of a mental disorder, an imminent
36 likelihood of serious harm, or is gravely disabled, they may detain
37 such person for sufficient time to notify the ((~~county~~)) designated
38 mental health professional of such person's condition to enable the
39 ((~~county~~)) designated mental health professional to authorize such

1 person being further held in custody or transported to an evaluation
2 and treatment center pursuant to the provisions of this chapter,
3 which shall in ordinary circumstances be no later than the next
4 judicial day(~~(- PROVIDED FURTHER, That)~~).

5 (3) If a person is brought to the emergency room of a public or
6 private agency or hospital for observation or treatment, the person
7 refuses voluntary admission, and the professional staff of the public
8 or private agency or hospital regard such person as presenting as a
9 result of a mental disorder an imminent likelihood of serious harm,
10 or as presenting an imminent danger because of grave disability, they
11 may detain such person for sufficient time to notify the ((county))
12 designated mental health professional of such person's condition to
13 enable the ((county)) designated mental health professional to
14 authorize such person being further held in custody or transported to
15 an evaluation treatment center pursuant to the conditions in this
16 chapter, but which time shall be no more than six hours from the time
17 the professional staff ((determine that an evaluation by)) notify the
18 ((county)) designated mental health professional ((is necessary)) of
19 the need for evaluation, not counting time periods prior to medical
20 clearance.

21 (4) Dismissal of a commitment petition is not the appropriate
22 remedy for a violation of the timeliness requirements of this section
23 based on the intent of this chapter under RCW 71.05.010 except in the
24 few cases where the facility staff or designated mental health
25 professional has totally disregarded the requirements of this
26 section.

27 **Sec. 6.** RCW 71.05.153 and 2011 c 305 s 8 and 2011 c 148 s 2 are
28 each reenacted and amended to read as follows:

29 (1) When a designated mental health professional receives
30 information alleging that a person, as the result of a mental
31 disorder, presents an imminent likelihood of serious harm, or is in
32 imminent danger because of being gravely disabled, after
33 investigation and evaluation of the specific facts alleged and of the
34 reliability and credibility of the person or persons providing the
35 information if any, the designated mental health professional may
36 take such person, or cause by oral or written order such person to be
37 taken into emergency custody in an evaluation and treatment facility
38 for not more than seventy-two hours as described in RCW 71.05.180.

1 (2) A peace officer may take or cause such person to be taken
2 into custody and immediately delivered to a triage facility, crisis
3 stabilization unit, evaluation and treatment facility, or the
4 emergency department of a local hospital under the following
5 circumstances:

6 (a) Pursuant to subsection (1) of this section; or

7 (b) When he or she has reasonable cause to believe that such
8 person is suffering from a mental disorder and presents an imminent
9 likelihood of serious harm or is in imminent danger because of being
10 gravely disabled.

11 (3) Persons delivered to a crisis stabilization unit, evaluation
12 and treatment facility, emergency department of a local hospital, or
13 triage facility that has elected to operate as an involuntary
14 facility by peace officers pursuant to subsection (2) of this section
15 may be held by the facility for a period of up to twelve hours, not
16 counting time periods prior to medical clearance.

17 (4) Within three hours (~~of~~) after arrival, not counting time
18 periods prior to medical clearance, the person must be examined by a
19 mental health professional. Within twelve hours of (~~arrival~~) notice
20 of the need for evaluation, not counting time periods prior to
21 medical clearance, the designated mental health professional must
22 determine whether the individual meets detention criteria. If the
23 individual is detained, the designated mental health professional
24 shall file a petition for detention or a supplemental petition as
25 appropriate and commence service on the designated attorney for the
26 detained person. If the individual is released to the community, the
27 mental health provider shall inform the peace officer of the release
28 within a reasonable period of time after the release if the peace
29 officer has specifically requested notification and provided contact
30 information to the provider.

31 (5) Dismissal of a commitment petition is not the appropriate
32 remedy for a violation of the timeliness requirements of this section
33 based on the intent of this chapter under RCW 71.05.010 except in the
34 few cases where the facility staff or designated mental health
35 professional has totally disregarded the requirements of this
36 section.

37 **Sec. 7.** RCW 71.05.210 and 2009 c 217 s 1 are each amended to
38 read as follows:

1 Each person involuntarily detained and accepted or admitted at an
2 evaluation and treatment facility (1) shall, within twenty-four hours
3 of his or her admission or acceptance at the facility, not counting
4 time periods prior to medical clearance, be examined and evaluated by
5 (a) a licensed physician who may be assisted by a physician assistant
6 according to chapter 18.71A RCW and a mental health professional, (b)
7 an advanced registered nurse practitioner according to chapter 18.79
8 RCW and a mental health professional, or (c) a licensed physician and
9 a psychiatric advanced registered nurse practitioner and (2) shall
10 receive such treatment and care as his or her condition requires
11 including treatment on an outpatient basis for the period that he or
12 she is detained, except that, beginning twenty-four hours prior to a
13 trial or hearing pursuant to RCW 71.05.215, 71.05.240, 71.05.310,
14 71.05.320, 71.05.340, or 71.05.217, the individual may refuse
15 psychiatric medications, but may not refuse: (a) Any other medication
16 previously prescribed by a person licensed under Title 18 RCW; or (b)
17 emergency lifesaving treatment, and the individual shall be informed
18 at an appropriate time of his or her right of such refusal. The
19 person shall be detained up to seventy-two hours, if, in the opinion
20 of the professional person in charge of the facility, or his or her
21 professional designee, the person presents a likelihood of serious
22 harm, or is gravely disabled. A person who has been detained for
23 seventy-two hours shall no later than the end of such period be
24 released, unless referred for further care on a voluntary basis, or
25 detained pursuant to court order for further treatment as provided in
26 this chapter.

27 If, after examination and evaluation, the mental health
28 professional and licensed physician or psychiatric advanced
29 registered nurse practitioner determine that the initial needs of the
30 person would be better served by placement in a chemical dependency
31 treatment facility, then the person shall be referred to an approved
32 treatment program defined under RCW 70.96A.020.

33 An evaluation and treatment center admitting or accepting any
34 person pursuant to this chapter whose physical condition reveals the
35 need for hospitalization shall assure that such person is transferred
36 to an appropriate hospital for evaluation or admission for treatment.
37 Notice of such fact shall be given to the court, the designated
38 attorney, and the designated mental health professional and the court
39 shall order such continuance in proceedings under this chapter as may

1 be necessary, but in no event may this continuance be more than
2 fourteen days.

3 **Sec. 8.** RCW 71.24.035 and 2014 c 225 s 11 are each amended to
4 read as follows:

5 (1) The department is designated as the state mental health
6 authority.

7 (2) The secretary shall provide for public, client, tribal, and
8 licensed service provider participation in developing the state
9 mental health program, developing contracts with behavioral health
10 organizations, and any waiver request to the federal government under
11 medicaid.

12 (3) The secretary shall provide for participation in developing
13 the state mental health program for children and other underserved
14 populations, by including representatives on any committee
15 established to provide oversight to the state mental health program.

16 (4) The secretary shall be designated as the behavioral health
17 organization if the behavioral health organization fails to meet
18 state minimum standards or refuses to exercise responsibilities under
19 its contract or RCW 71.24.045, until such time as a new behavioral
20 health organization is designated.

21 (5) The secretary shall:

22 (a) Develop a biennial state mental health program that
23 incorporates regional biennial needs assessments and regional mental
24 health service plans and state services for adults and children with
25 mental illness;

26 (b) Assure that any behavioral health organization or county
27 community mental health program provides medically necessary services
28 to medicaid recipients consistent with the state's medicaid state
29 plan or federal waiver authorities, and nonmedicaid services
30 consistent with priorities established by the department;

31 (c) Develop and adopt rules establishing state minimum standards
32 for the delivery of mental health services pursuant to RCW 71.24.037
33 including, but not limited to:

34 (i) Licensed service providers. These rules shall permit a
35 county-operated mental health program to be licensed as a service
36 provider subject to compliance with applicable statutes and rules.
37 The secretary shall provide for deeming of compliance with state
38 minimum standards for those entities accredited by recognized

1 behavioral health accrediting bodies recognized and having a current
2 agreement with the department;

3 (ii) Inpatient services, an adequate network of evaluation and
4 treatment services and facilities under chapter 71.05 RCW to ensure
5 access to treatment, resource management services, and community
6 support services;

7 (d) Assure that the special needs of persons who are minorities,
8 elderly, disabled, children, low-income, and parents who are
9 respondents in dependency cases are met within the priorities
10 established in this section;

11 (e) Establish a standard contract or contracts, consistent with
12 state minimum standards which shall be used in contracting with
13 behavioral health organizations. The standard contract shall include
14 a maximum fund balance, which shall be consistent with that required
15 by federal regulations or waiver stipulations;

16 (f) Establish, to the extent possible, a standardized auditing
17 procedure which is designed to assure compliance with contractual
18 agreements authorized by this chapter and minimizes paperwork
19 requirements of behavioral health organizations and licensed service
20 providers. The audit procedure shall focus on the outcomes of service
21 as provided in RCW 43.20A.895, 70.320.020, and 71.36.025;

22 (g) Develop and maintain an information system to be used by the
23 state and behavioral health organizations that includes a tracking
24 method which allows the department and behavioral health
25 organizations to identify mental health clients' participation in any
26 mental health service or public program on an immediate basis. The
27 information system shall not include individual patient's case
28 history files. Confidentiality of client information and records
29 shall be maintained as provided in this chapter and chapter 70.02
30 RCW;

31 (h) License service providers who meet state minimum standards;

32 (i) Periodically monitor the compliance of behavioral health
33 organizations and their network of licensed service providers for
34 compliance with the contract between the department, the behavioral
35 health organization, and federal and state rules at reasonable times
36 and in a reasonable manner;

37 (j) Fix fees to be paid by evaluation and treatment centers to
38 the secretary for the required inspections;

1 (k) Monitor and audit behavioral health organizations and
2 licensed service providers as needed to assure compliance with
3 contractual agreements authorized by this chapter;

4 (l) Adopt such rules as are necessary to implement the
5 department's responsibilities under this chapter;

6 (m) License or certify crisis stabilization units that meet state
7 minimum standards;

8 (n) License or certify clubhouses that meet state minimum
9 standards; and

10 (o) License or certify triage facilities that meet state minimum
11 standards.

12 (6) The secretary shall use available resources only for
13 behavioral health organizations, except:

14 (a) To the extent authorized, and in accordance with any
15 priorities or conditions specified, in the biennial appropriations
16 act; or

17 (b) To incentivize improved performance with respect to the
18 client outcomes established in RCW 43.20A.895, 70.320.020, and
19 71.36.025, integration of behavioral health and medical services at
20 the clinical level, and improved care coordination for individuals
21 with complex care needs.

22 (7) Each behavioral health organization and licensed service
23 provider shall file with the secretary, on request, such data,
24 statistics, schedules, and information as the secretary reasonably
25 requires. A behavioral health organization or licensed service
26 provider which, without good cause, fails to furnish any data,
27 statistics, schedules, or information as requested, or files
28 fraudulent reports thereof, may be subject to the behavioral health
29 organization contractual remedies in RCW 43.20A.894 or may have its
30 service provider certification or license revoked or suspended.

31 (8) The secretary may suspend, revoke, limit, or restrict a
32 certification or license, or refuse to grant a certification or
33 license for failure to conform to: (a) The law; (b) applicable rules
34 and regulations; (c) applicable standards; or (d) state minimum
35 standards.

36 (9) The superior court may restrain any behavioral health
37 organization or service provider from operating without a contract,
38 certification, or a license or any other violation of this section.
39 The court may also review, pursuant to procedures contained in
40 chapter 34.05 RCW, any denial, suspension, limitation, restriction,

1 or revocation of certification or license, and grant other relief
2 required to enforce the provisions of this chapter.

3 (10) Upon petition by the secretary, and after hearing held upon
4 reasonable notice to the facility, the superior court may issue a
5 warrant to an officer or employee of the secretary authorizing him or
6 her to enter at reasonable times, and examine the records, books, and
7 accounts of any behavioral health organization(~~(s-[organization])~~) or
8 service provider refusing to consent to inspection or examination by
9 the authority.

10 (11) Notwithstanding the existence or pursuit of any other
11 remedy, the secretary may file an action for an injunction or other
12 process against any person or governmental unit to restrain or
13 prevent the establishment, conduct, or operation of a behavioral
14 health organization or service provider without a contract,
15 certification, or a license under this chapter.

16 (12) The standards for certification or licensure of evaluation
17 and treatment facilities shall include standards relating to
18 maintenance of good physical and mental health and other services to
19 be afforded persons pursuant to this chapter and chapters 71.05 and
20 71.34 RCW, and shall otherwise assure the effectuation of the
21 purposes of these chapters.

22 (13) The standards for certification or licensure of crisis
23 stabilization units shall include standards that:

24 (a) Permit location of the units at a jail facility if the unit
25 is physically separate from the general population of the jail;

26 (b) Require administration of the unit by mental health
27 professionals who direct the stabilization and rehabilitation
28 efforts; and

29 (c) Provide an environment affording security appropriate with
30 the alleged criminal behavior and necessary to protect the public
31 safety.

32 (14) The standards for certification or licensure of a clubhouse
33 shall at a minimum include:

34 (a) The facilities may be peer-operated and must be
35 recovery-focused;

36 (b) Members and employees must work together;

37 (c) Members must have the opportunity to participate in all the
38 work of the clubhouse, including administration, research, intake and
39 orientation, outreach, hiring, training and evaluation of staff,

1 public relations, advocacy, and evaluation of clubhouse
2 effectiveness;

3 (d) Members and staff and ultimately the clubhouse director must
4 be responsible for the operation of the clubhouse, central to this
5 responsibility is the engagement of members and staff in all aspects
6 of clubhouse operations;

7 (e) Clubhouse programs must be comprised of structured activities
8 including but not limited to social skills training, vocational
9 rehabilitation, employment training and job placement, and community
10 resource development;

11 (f) Clubhouse programs must provide in-house educational programs
12 that significantly utilize the teaching and tutoring skills of
13 members and assist members by helping them to take advantage of adult
14 education opportunities in the community;

15 (g) Clubhouse programs must focus on strengths, talents, and
16 abilities of its members;

17 (h) The work-ordered day may not include medication clinics, day
18 treatment, or other therapy programs within the clubhouse.

19 (15) The department shall distribute appropriated state and
20 federal funds in accordance with any priorities, terms, or conditions
21 specified in the appropriations act.

22 (16) The secretary shall assume all duties assigned to the
23 nonparticipating behavioral health organizations under chapters 71.05
24 and 71.34 RCW and this chapter. Such responsibilities shall include
25 those which would have been assigned to the nonparticipating counties
26 in regions where there are not participating behavioral health
27 organizations.

28 The behavioral health organizations, or the secretary's
29 assumption of all responsibilities under chapters 71.05 and 71.34 RCW
30 and this chapter, shall be included in all state and federal plans
31 affecting the state mental health program including at least those
32 required by this chapter, the medicaid program, and P.L. 99-660.
33 Nothing in these plans shall be inconsistent with the intent and
34 requirements of this chapter.

35 (17) The secretary shall:

36 (a) Disburse funds for the behavioral health organizations within
37 sixty days of approval of the biennial contract. The department must
38 either approve or reject the biennial contract within sixty days of
39 receipt.

1 (b) Enter into biennial contracts with behavioral health
2 organizations. The contracts shall be consistent with available
3 resources. No contract shall be approved that does not include
4 progress toward meeting the goals of this chapter by taking
5 responsibility for: (i) Short-term commitments; (ii) residential
6 care; and (iii) emergency response systems.

7 (c) Notify behavioral health organizations of their allocation of
8 available resources at least sixty days prior to the start of a new
9 biennial contract period.

10 (d) Deny all or part of the funding allocations to behavioral
11 health organizations based solely upon formal findings of
12 noncompliance with the terms of the behavioral health organization's
13 contract with the department. Behavioral health organizations
14 disputing the decision of the secretary to withhold funding
15 allocations are limited to the remedies provided in the department's
16 contracts with the behavioral health organizations.

17 (18) The department, in cooperation with the state congressional
18 delegation, shall actively seek waivers of federal requirements and
19 such modifications of federal regulations as are necessary to allow
20 federal medicaid reimbursement for services provided by freestanding
21 evaluation and treatment facilities certified under chapter 71.05
22 RCW. The department shall periodically report its efforts to the
23 appropriate committees of the senate and the house of
24 representatives.

25 **Sec. 9.** RCW 71.24.300 and 2008 c 261 s 4 are each amended to
26 read as follows:

27 (1) Upon the request of a tribal authority or authorities within
28 a regional support network the joint operating agreement or the
29 county authority shall allow for the inclusion of the tribal
30 authority to be represented as a party to the regional support
31 network.

32 (2) The roles and responsibilities of the county and tribal
33 authorities shall be determined by the terms of that agreement
34 including a determination of membership on the governing board and
35 advisory committees, the number of tribal representatives to be party
36 to the agreement, and the provisions of law and shall assure the
37 provision of culturally competent services to the tribes served.

38 (3) The state mental health authority may not determine the roles
39 and responsibilities of county authorities as to each other under

1 regional support networks by rule, except to assure that all duties
2 required of regional support networks are assigned and that counties
3 and the regional support network do not duplicate functions and that
4 a single authority has final responsibility for all available
5 resources and performance under the regional support network's
6 contract with the secretary.

7 (4) If a regional support network is a private entity, the
8 department shall allow for the inclusion of the tribal authority to
9 be represented as a party to the regional support network.

10 (5) The roles and responsibilities of the private entity and the
11 tribal authorities shall be determined by the department, through
12 negotiation with the tribal authority.

13 (6) Regional support networks shall submit an overall six-year
14 operating and capital plan, timeline, and budget and submit progress
15 reports and an updated two-year plan biennially thereafter, to assume
16 within available resources all of the following duties:

17 (a) Administer and provide for the availability of all resource
18 management services, residential services, and community support
19 services.

20 (b) Administer and provide for the availability of an adequate
21 network of evaluation and treatment services to ensure access to
22 treatment, all investigation, transportation, court-related, and
23 other services provided by the state or counties pursuant to chapter
24 71.05 RCW.

25 (c) Provide within the boundaries of each regional support
26 network evaluation and treatment services for at least ninety percent
27 of persons detained or committed for periods up to seventeen days
28 according to chapter 71.05 RCW. Regional support networks may
29 contract to purchase evaluation and treatment services from other
30 networks if they are unable to provide for appropriate resources
31 within their boundaries. Insofar as the original intent of serving
32 persons in the community is maintained, the secretary is authorized
33 to approve exceptions on a case-by-case basis to the requirement to
34 provide evaluation and treatment services within the boundaries of
35 each regional support network. Such exceptions are limited to:

36 (i) Contracts with neighboring or contiguous regions; or

37 (ii) Individuals detained or committed for periods up to
38 seventeen days at the state hospitals at the discretion of the
39 secretary.

1 (d) Administer and provide for the availability of all other
2 mental health services, which shall include patient counseling, day
3 treatment, consultation, education services, employment services as
4 (~~defined~~) described in RCW 71.24.035, and mental health services to
5 children.

6 (e) Establish standards and procedures for reviewing individual
7 service plans and determining when that person may be discharged from
8 resource management services.

9 (7) A regional support network may request that any state-owned
10 land, building, facility, or other capital asset which was ever
11 purchased, deeded, given, or placed in trust for the care of the
12 persons with mental illness and which is within the boundaries of a
13 regional support network be made available to support the operations
14 of the regional support network. State agencies managing such capital
15 assets shall give first priority to requests for their use pursuant
16 to this chapter.

17 (8) Each regional support network shall appoint a mental health
18 advisory board which shall review and provide comments on plans and
19 policies developed under this chapter, provide local oversight
20 regarding the activities of the regional support network, and work
21 with the regional support network to resolve significant concerns
22 regarding service delivery and outcomes. The department shall
23 establish statewide procedures for the operation of regional advisory
24 committees including mechanisms for advisory board feedback to the
25 department regarding regional support network performance. The
26 composition of the board shall be broadly representative of the
27 demographic character of the region and shall include, but not be
28 limited to, representatives of consumers and families, law
29 enforcement, and where the county is not the regional support
30 network, county elected officials. Composition and length of terms of
31 board members may differ between regional support networks but shall
32 be included in each regional support network's contract and approved
33 by the secretary.

34 (9) Regional support networks shall assume all duties specified
35 in their plans and joint operating agreements through biennial
36 contractual agreements with the secretary.

37 (10) Regional support networks may receive technical assistance
38 from the housing trust fund and may identify and submit projects for
39 housing and housing support services to the housing trust fund
40 established under chapter 43.185 RCW. Projects identified or

1 submitted under this subsection must be fully integrated with the
2 regional support network six-year operating and capital plan,
3 timeline, and budget required by subsection (6) of this section.

4 **Sec. 10.** RCW 71.24.300 and 2014 c 225 s 39 are each amended to
5 read as follows:

6 (1) Upon the request of a tribal authority or authorities within
7 a behavioral health organization the joint operating agreement or the
8 county authority shall allow for the inclusion of the tribal
9 authority to be represented as a party to the behavioral health
10 organization.

11 (2) The roles and responsibilities of the county and tribal
12 authorities shall be determined by the terms of that agreement
13 including a determination of membership on the governing board and
14 advisory committees, the number of tribal representatives to be party
15 to the agreement, and the provisions of law and shall assure the
16 provision of culturally competent services to the tribes served.

17 (3) The state mental health authority may not determine the roles
18 and responsibilities of county authorities as to each other under
19 behavioral health organizations by rule, except to assure that all
20 duties required of behavioral health organizations are assigned and
21 that counties and the behavioral health organization do not duplicate
22 functions and that a single authority has final responsibility for
23 all available resources and performance under the behavioral health
24 organization's contract with the secretary.

25 (4) If a behavioral health organization is a private entity, the
26 department shall allow for the inclusion of the tribal authority to
27 be represented as a party to the behavioral health organization.

28 (5) The roles and responsibilities of the private entity and the
29 tribal authorities shall be determined by the department, through
30 negotiation with the tribal authority.

31 (6) Behavioral health organizations shall submit an overall six-
32 year operating and capital plan, timeline, and budget and submit
33 progress reports and an updated two-year plan biennially thereafter,
34 to assume within available resources all of the following duties:

35 (a) Administer and provide for the availability of all resource
36 management services, residential services, and community support
37 services.

38 (b) Administer and provide for the availability of an adequate
39 network of evaluation and treatment services to ensure access to

1 treatment, all investigation, transportation, court-related, and
2 other services provided by the state or counties pursuant to chapter
3 71.05 RCW.

4 (c) Provide within the boundaries of each behavioral health
5 organization evaluation and treatment services for at least ninety
6 percent of persons detained or committed for periods up to seventeen
7 days according to chapter 71.05 RCW. Behavioral health organizations
8 may contract to purchase evaluation and treatment services from other
9 organizations if they are unable to provide for appropriate resources
10 within their boundaries. Insofar as the original intent of serving
11 persons in the community is maintained, the secretary is authorized
12 to approve exceptions on a case-by-case basis to the requirement to
13 provide evaluation and treatment services within the boundaries of
14 each behavioral health organization. Such exceptions are limited to:

- 15 (i) Contracts with neighboring or contiguous regions; or
- 16 (ii) Individuals detained or committed for periods up to
17 seventeen days at the state hospitals at the discretion of the
18 secretary.

19 (d) Administer and provide for the availability of all other
20 mental health services, which shall include patient counseling, day
21 treatment, consultation, education services, employment services as
22 described in RCW 71.24.035, and mental health services to children.

23 (e) Establish standards and procedures for reviewing individual
24 service plans and determining when that person may be discharged from
25 resource management services.

26 (7) A behavioral health organization may request that any state-
27 owned land, building, facility, or other capital asset which was ever
28 purchased, deeded, given, or placed in trust for the care of the
29 persons with mental illness and which is within the boundaries of a
30 behavioral health organization be made available to support the
31 operations of the behavioral health organization. State agencies
32 managing such capital assets shall give first priority to requests
33 for their use pursuant to this chapter.

34 (8) Each behavioral health organization shall appoint a mental
35 health advisory board which shall review and provide comments on
36 plans and policies developed under this chapter, provide local
37 oversight regarding the activities of the behavioral health
38 organization, and work with the behavioral health organization to
39 resolve significant concerns regarding service delivery and outcomes.
40 The department shall establish statewide procedures for the operation

1 of regional advisory committees including mechanisms for advisory
2 board feedback to the department regarding behavioral health
3 organization performance. The composition of the board shall be
4 broadly representative of the demographic character of the region and
5 shall include, but not be limited to, representatives of consumers
6 and families, law enforcement, and where the county is not the
7 behavioral health organization, county elected officials. Composition
8 and length of terms of board members may differ between behavioral
9 health organizations but shall be included in each behavioral health
10 organization's contract and approved by the secretary.

11 (9) Behavioral health organizations shall assume all duties
12 specified in their plans and joint operating agreements through
13 biennial contractual agreements with the secretary.

14 (10) Behavioral health organizations may receive technical
15 assistance from the housing trust fund and may identify and submit
16 projects for housing and housing support services to the housing
17 trust fund established under chapter 43.185 RCW. Projects identified
18 or submitted under this subsection must be fully integrated with the
19 behavioral health organization six-year operating and capital plan,
20 timeline, and budget required by subsection (6) of this section.

21 NEW SECTION. **Sec. 11.** A new section is added to chapter 71.24
22 RCW to read as follows:

23 The department must collaborate with regional support networks or
24 behavioral health organizations and the Washington state institute
25 for public policy to estimate the capacity needs for evaluation and
26 treatment services within each regional service area. Estimated
27 capacity needs shall include consideration of the average occupancy
28 rates needed to provide an adequate network of evaluation and
29 treatment services to ensure access to treatment. A regional service
30 network or behavioral health organization must develop and maintain
31 an adequate plan to provide for evaluation and treatment needs.

32 NEW SECTION. **Sec. 12.** A new section is added to chapter 71.34
33 RCW to read as follows:

34 (1) The department may use a single bed certification process as
35 outlined in rule to provide additional treatment capacity for a minor
36 suffering from a mental disorder for whom an evaluation and treatment
37 bed is not available. The facility that is the proposed site of the
38 single bed certification must be a facility that is willing and able

1 to provide the person with timely and appropriate treatment either
2 directly or by arrangement with other public or private agencies.

3 (2) A single bed certification must be specific to the minor
4 receiving treatment.

5 (3) A designated mental health professional who submits an
6 application for a single bed certification for treatment at a
7 facility that is willing and able to provide timely and appropriate
8 mental health treatment in good faith belief that the single bed
9 certification is appropriate may presume that the single bed
10 certification will be approved for the purpose of completing the
11 detention process and responding to other emergency calls.

12 (4) The department may adopt rules implementing this section and
13 continue to enforce rules it has already adopted except where
14 inconsistent with this section.

15 **Sec. 13.** RCW 71.05.020 and 2011 c 148 s 1 and 2011 c 89 s 14 are
16 each reenacted and amended to read as follows:

17 The definitions in this section apply throughout this chapter
18 unless the context clearly requires otherwise.

19 (1) "Admission" or "admit" means a decision by a physician or
20 psychiatric advanced registered nurse practitioner that a person
21 should be examined or treated as a patient in a hospital;

22 (2) "Antipsychotic medications" means that class of drugs
23 primarily used to treat serious manifestations of mental illness
24 associated with thought disorders, which includes, but is not limited
25 to atypical antipsychotic medications;

26 (3) "Attending staff" means any person on the staff of a public
27 or private agency having responsibility for the care and treatment of
28 a patient;

29 (4) "Commitment" means the determination by a court that a person
30 should be detained for a period of either evaluation or treatment, or
31 both, in an inpatient or a less restrictive setting;

32 (5) "Conditional release" means a revocable modification of a
33 commitment, which may be revoked upon violation of any of its terms;

34 (6) "Crisis stabilization unit" means a short-term facility or a
35 portion of a facility licensed by the department of health and
36 certified by the department of social and health services under RCW
37 71.24.035, such as an evaluation and treatment facility or a
38 hospital, which has been designed to assess, diagnose, and treat

1 individuals experiencing an acute crisis without the use of long-term
2 hospitalization;

3 (7) "Custody" means involuntary detention under the provisions of
4 this chapter or chapter 10.77 RCW, uninterrupted by any period of
5 unconditional release from commitment from a facility providing
6 involuntary care and treatment;

7 (8) "Department" means the department of social and health
8 services;

9 (9) "Designated chemical dependency specialist" means a person
10 designated by the county alcoholism and other drug addiction program
11 coordinator designated under RCW 70.96A.310 to perform the commitment
12 duties described in chapters 70.96A and 70.96B RCW;

13 (10) "Designated crisis responder" means a mental health
14 professional appointed by the county or the regional support network
15 to perform the duties specified in this chapter;

16 (11) "Designated mental health professional" means a mental
17 health professional designated by the county or other authority
18 authorized in rule to perform the duties specified in this chapter;

19 (12) "Detention" or "detain" means the lawful confinement of a
20 person, under the provisions of this chapter;

21 (13) "Developmental disabilities professional" means a person who
22 has specialized training and three years of experience in directly
23 treating or working with persons with developmental disabilities and
24 is a psychiatrist, psychologist, psychiatric advanced registered
25 nurse practitioner, or social worker, and such other developmental
26 disabilities professionals as may be defined by rules adopted by the
27 secretary;

28 (14) "Developmental disability" means that condition defined in
29 RCW 71A.10.020(~~(+3)~~) (5);

30 (15) "Discharge" means the termination of hospital medical
31 authority. The commitment may remain in place, be terminated, or be
32 amended by court order;

33 (16) "Evaluation and treatment facility" means any facility which
34 can provide directly, or by direct arrangement with other public or
35 private agencies, emergency evaluation and treatment, outpatient
36 care, and timely and appropriate inpatient care to persons suffering
37 from a mental disorder, and which is certified as such by the
38 department. The department may certify single beds as temporary
39 evaluation and treatment beds under section 2 of this act. A
40 physically separate and separately operated portion of a state

1 hospital may be designated as an evaluation and treatment facility. A
2 facility which is part of, or operated by, the department or any
3 federal agency will not require certification. No correctional
4 institution or facility, or jail, shall be an evaluation and
5 treatment facility within the meaning of this chapter;

6 (17) "Gravely disabled" means a condition in which a person, as a
7 result of a mental disorder: (a) Is in danger of serious physical
8 harm resulting from a failure to provide for his or her essential
9 human needs of health or safety; or (b) manifests severe
10 deterioration in routine functioning evidenced by repeated and
11 escalating loss of cognitive or volitional control over his or her
12 actions and is not receiving such care as is essential for his or her
13 health or safety;

14 (18) "Habilitative services" means those services provided by
15 program personnel to assist persons in acquiring and maintaining life
16 skills and in raising their levels of physical, mental, social, and
17 vocational functioning. Habilitative services include education,
18 training for employment, and therapy. The habilitative process shall
19 be undertaken with recognition of the risk to the public safety
20 presented by the person being assisted as manifested by prior charged
21 criminal conduct;

22 (19) "History of one or more violent acts" refers to the period
23 of time ten years prior to the filing of a petition under this
24 chapter, excluding any time spent, but not any violent acts
25 committed, in a mental health facility or in confinement as a result
26 of a criminal conviction;

27 (20) "Imminent" means the state or condition of being likely to
28 occur at any moment or near at hand, rather than distant or remote;

29 (21) "Individualized service plan" means a plan prepared by a
30 developmental disabilities professional with other professionals as a
31 team, for a person with developmental disabilities, which shall
32 state:

33 (a) The nature of the person's specific problems, prior charged
34 criminal behavior, and habilitation needs;

35 (b) The conditions and strategies necessary to achieve the
36 purposes of habilitation;

37 (c) The intermediate and long-range goals of the habilitation
38 program, with a projected timetable for the attainment;

39 (d) The rationale for using this plan of habilitation to achieve
40 those intermediate and long-range goals;

1 (e) The staff responsible for carrying out the plan;

2 (f) Where relevant in light of past criminal behavior and due
3 consideration for public safety, the criteria for proposed movement
4 to less-restrictive settings, criteria for proposed eventual
5 discharge or release, and a projected possible date for discharge or
6 release; and

7 (g) The type of residence immediately anticipated for the person
8 and possible future types of residences;

9 (22) "Information related to mental health services" means all
10 information and records compiled, obtained, or maintained in the
11 course of providing services to either voluntary or involuntary
12 recipients of services by a mental health service provider. This may
13 include documents of legal proceedings under this chapter or chapter
14 71.34 or 10.77 RCW, or somatic health care information;

15 (23) "Judicial commitment" means a commitment by a court pursuant
16 to the provisions of this chapter;

17 (24) "Legal counsel" means attorneys and staff employed by county
18 prosecutor offices or the state attorney general acting in their
19 capacity as legal representatives of public mental health service
20 providers under RCW 71.05.130;

21 (25) "Likelihood of serious harm" means:

22 (a) A substantial risk that: (i) Physical harm will be inflicted
23 by a person upon his or her own person, as evidenced by threats or
24 attempts to commit suicide or inflict physical harm on oneself; (ii)
25 physical harm will be inflicted by a person upon another, as
26 evidenced by behavior which has caused such harm or which places
27 another person or persons in reasonable fear of sustaining such harm;
28 or (iii) physical harm will be inflicted by a person upon the
29 property of others, as evidenced by behavior which has caused
30 substantial loss or damage to the property of others; or

31 (b) The person has threatened the physical safety of another and
32 has a history of one or more violent acts;

33 (26) "Mental disorder" means any organic, mental, or emotional
34 impairment which has substantial adverse effects on a person's
35 cognitive or volitional functions;

36 (27) "Mental health professional" means a psychiatrist,
37 psychologist, psychiatric advanced registered nurse practitioner,
38 psychiatric nurse, or social worker, and such other mental health
39 professionals as may be defined by rules adopted by the secretary
40 pursuant to the provisions of this chapter;

1 (28) "Mental health service provider" means a public or private
2 agency that provides mental health services to persons with mental
3 disorders as defined under this section and receives funding from
4 public sources. This includes, but is not limited to, hospitals
5 licensed under chapter 70.41 RCW, evaluation and treatment facilities
6 as defined in this section, community mental health service delivery
7 systems or community mental health programs as defined in RCW
8 71.24.025, facilities conducting competency evaluations and
9 restoration under chapter 10.77 RCW, and correctional facilities
10 operated by state and local governments;

11 (29) "Peace officer" means a law enforcement official of a public
12 agency or governmental unit, and includes persons specifically given
13 peace officer powers by any state law, local ordinance, or judicial
14 order of appointment;

15 (30) "Private agency" means any person, partnership, corporation,
16 or association that is not a public agency, whether or not financed
17 in whole or in part by public funds, which constitutes an evaluation
18 and treatment facility or private institution, or hospital, which is
19 conducted for, or includes a department or ward conducted for, the
20 care and treatment of persons who are mentally ill;

21 (31) "Professional person" means a mental health professional and
22 shall also mean a physician, psychiatric advanced registered nurse
23 practitioner, registered nurse, and such others as may be defined by
24 rules adopted by the secretary pursuant to the provisions of this
25 chapter;

26 (32) "Psychiatric advanced registered nurse practitioner" means a
27 person who is licensed as an advanced registered nurse practitioner
28 pursuant to chapter 18.79 RCW; and who is board certified in advanced
29 practice psychiatric and mental health nursing;

30 (33) "Psychiatrist" means a person having a license as a
31 physician and surgeon in this state who has in addition completed
32 three years of graduate training in psychiatry in a program approved
33 by the American medical association or the American osteopathic
34 association and is certified or eligible to be certified by the
35 American board of psychiatry and neurology;

36 (34) "Psychologist" means a person who has been licensed as a
37 psychologist pursuant to chapter 18.83 RCW;

38 (35) "Public agency" means any evaluation and treatment facility
39 or institution, or hospital which is conducted for, or includes a
40 department or ward conducted for, the care and treatment of persons

1 with mental illness, if the agency is operated directly by, federal,
2 state, county, or municipal government, or a combination of such
3 governments;

4 (36) "Registration records" include all the records of the
5 department, regional support networks, treatment facilities, and
6 other persons providing services to the department, county
7 departments, or facilities which identify persons who are receiving
8 or who at any time have received services for mental illness;

9 (37) "Release" means legal termination of the commitment under
10 the provisions of this chapter;

11 (38) "Resource management services" has the meaning given in
12 chapter 71.24 RCW;

13 (39) "Secretary" means the secretary of the department of social
14 and health services, or his or her designee;

15 (40) "Serious violent offense" has the same meaning as provided
16 in RCW 9.94A.030;

17 (41) "Social worker" means a person with a master's or further
18 advanced degree from a social work educational program accredited and
19 approved as provided in RCW 18.320.010;

20 (42) "Therapeutic court personnel" means the staff of a mental
21 health court or other therapeutic court which has jurisdiction over
22 defendants who are dually diagnosed with mental disorders, including
23 court personnel, probation officers, a court monitor, prosecuting
24 attorney, or defense counsel acting within the scope of therapeutic
25 court duties;

26 (43) "Triage facility" means a short-term facility or a portion
27 of a facility licensed by the department of health and certified by
28 the department of social and health services under RCW 71.24.035,
29 which is designed as a facility to assess and stabilize an individual
30 or determine the need for involuntary commitment of an individual,
31 and must meet department of health residential treatment facility
32 standards. A triage facility may be structured as a voluntary or
33 involuntary placement facility;

34 (44) "Treatment records" include registration and all other
35 records concerning persons who are receiving or who at any time have
36 received services for mental illness, which are maintained by the
37 department, by regional support networks and their staffs, and by
38 treatment facilities. Treatment records include mental health
39 information contained in a medical bill including but not limited to
40 mental health drugs, a mental health diagnosis, provider name, and

1 dates of service stemming from a medical service. Treatment records
2 do not include notes or records maintained for personal use by a
3 person providing treatment services for the department, regional
4 support networks, or a treatment facility if the notes or records are
5 not available to others;

6 (45) "Violent act" means behavior that resulted in homicide,
7 attempted suicide, nonfatal injuries, or substantial damage to
8 property;

9 (46) "Medical clearance" means a physician or other health care
10 provider has determined that a person is medically stable and ready
11 for referral to the designated mental health professional.

12 **Sec. 14.** RCW 71.05.020 and 2014 c 225 s 79 are each reenacted
13 and amended to read as follows:

14 The definitions in this section apply throughout this chapter
15 unless the context clearly requires otherwise.

16 (1) "Admission" or "admit" means a decision by a physician or
17 psychiatric advanced registered nurse practitioner that a person
18 should be examined or treated as a patient in a hospital;

19 (2) "Antipsychotic medications" means that class of drugs
20 primarily used to treat serious manifestations of mental illness
21 associated with thought disorders, which includes, but is not limited
22 to atypical antipsychotic medications;

23 (3) "Attending staff" means any person on the staff of a public
24 or private agency having responsibility for the care and treatment of
25 a patient;

26 (4) "Commitment" means the determination by a court that a person
27 should be detained for a period of either evaluation or treatment, or
28 both, in an inpatient or a less restrictive setting;

29 (5) "Conditional release" means a revocable modification of a
30 commitment, which may be revoked upon violation of any of its terms;

31 (6) "Crisis stabilization unit" means a short-term facility or a
32 portion of a facility licensed by the department of health and
33 certified by the department of social and health services under RCW
34 71.24.035, such as an evaluation and treatment facility or a
35 hospital, which has been designed to assess, diagnose, and treat
36 individuals experiencing an acute crisis without the use of long-term
37 hospitalization;

38 (7) "Custody" means involuntary detention under the provisions of
39 this chapter or chapter 10.77 RCW, uninterrupted by any period of

1 unconditional release from commitment from a facility providing
2 involuntary care and treatment;

3 (8) "Department" means the department of social and health
4 services;

5 (9) "Designated chemical dependency specialist" means a person
6 designated by the county alcoholism and other drug addiction program
7 coordinator designated under RCW 70.96A.310 to perform the commitment
8 duties described in chapters 70.96A and 70.96B RCW;

9 (10) "Designated crisis responder" means a mental health
10 professional appointed by the county or the behavioral health
11 organization to perform the duties specified in this chapter;

12 (11) "Designated mental health professional" means a mental
13 health professional designated by the county or other authority
14 authorized in rule to perform the duties specified in this chapter;

15 (12) "Detention" or "detain" means the lawful confinement of a
16 person, under the provisions of this chapter;

17 (13) "Developmental disabilities professional" means a person who
18 has specialized training and three years of experience in directly
19 treating or working with persons with developmental disabilities and
20 is a psychiatrist, psychologist, psychiatric advanced registered
21 nurse practitioner, or social worker, and such other developmental
22 disabilities professionals as may be defined by rules adopted by the
23 secretary;

24 (14) "Developmental disability" means that condition defined in
25 RCW 71A.10.020(~~((+4))~~) (5);

26 (15) "Discharge" means the termination of hospital medical
27 authority. The commitment may remain in place, be terminated, or be
28 amended by court order;

29 (16) "Evaluation and treatment facility" means any facility which
30 can provide directly, or by direct arrangement with other public or
31 private agencies, emergency evaluation and treatment, outpatient
32 care, and timely and appropriate inpatient care to persons suffering
33 from a mental disorder, and which is certified as such by the
34 department. The department may certify single beds as temporary
35 evaluation and treatment beds under section 2 of this act. A
36 physically separate and separately operated portion of a state
37 hospital may be designated as an evaluation and treatment facility. A
38 facility which is part of, or operated by, the department or any
39 federal agency will not require certification. No correctional

1 institution or facility, or jail, shall be an evaluation and
2 treatment facility within the meaning of this chapter;

3 (17) "Gravely disabled" means a condition in which a person, as a
4 result of a mental disorder: (a) Is in danger of serious physical
5 harm resulting from a failure to provide for his or her essential
6 human needs of health or safety; or (b) manifests severe
7 deterioration in routine functioning evidenced by repeated and
8 escalating loss of cognitive or volitional control over his or her
9 actions and is not receiving such care as is essential for his or her
10 health or safety;

11 (18) "Habilitative services" means those services provided by
12 program personnel to assist persons in acquiring and maintaining life
13 skills and in raising their levels of physical, mental, social, and
14 vocational functioning. Habilitative services include education,
15 training for employment, and therapy. The habilitative process shall
16 be undertaken with recognition of the risk to the public safety
17 presented by the person being assisted as manifested by prior charged
18 criminal conduct;

19 (19) "History of one or more violent acts" refers to the period
20 of time ten years prior to the filing of a petition under this
21 chapter, excluding any time spent, but not any violent acts
22 committed, in a mental health facility or in confinement as a result
23 of a criminal conviction;

24 (20) "Imminent" means the state or condition of being likely to
25 occur at any moment or near at hand, rather than distant or remote;

26 (21) "Individualized service plan" means a plan prepared by a
27 developmental disabilities professional with other professionals as a
28 team, for a person with developmental disabilities, which shall
29 state:

30 (a) The nature of the person's specific problems, prior charged
31 criminal behavior, and habilitation needs;

32 (b) The conditions and strategies necessary to achieve the
33 purposes of habilitation;

34 (c) The intermediate and long-range goals of the habilitation
35 program, with a projected timetable for the attainment;

36 (d) The rationale for using this plan of habilitation to achieve
37 those intermediate and long-range goals;

38 (e) The staff responsible for carrying out the plan;

39 (f) Where relevant in light of past criminal behavior and due
40 consideration for public safety, the criteria for proposed movement

1 to less-restrictive settings, criteria for proposed eventual
2 discharge or release, and a projected possible date for discharge or
3 release; and

4 (g) The type of residence immediately anticipated for the person
5 and possible future types of residences;

6 (22) "Information related to mental health services" means all
7 information and records compiled, obtained, or maintained in the
8 course of providing services to either voluntary or involuntary
9 recipients of services by a mental health service provider. This may
10 include documents of legal proceedings under this chapter or chapter
11 71.34 or 10.77 RCW, or somatic health care information;

12 (23) "Judicial commitment" means a commitment by a court pursuant
13 to the provisions of this chapter;

14 (24) "Legal counsel" means attorneys and staff employed by county
15 prosecutor offices or the state attorney general acting in their
16 capacity as legal representatives of public mental health service
17 providers under RCW 71.05.130;

18 (25) "Likelihood of serious harm" means:

19 (a) A substantial risk that: (i) Physical harm will be inflicted
20 by a person upon his or her own person, as evidenced by threats or
21 attempts to commit suicide or inflict physical harm on oneself; (ii)
22 physical harm will be inflicted by a person upon another, as
23 evidenced by behavior which has caused such harm or which places
24 another person or persons in reasonable fear of sustaining such harm;
25 or (iii) physical harm will be inflicted by a person upon the
26 property of others, as evidenced by behavior which has caused
27 substantial loss or damage to the property of others; or

28 (b) The person has threatened the physical safety of another and
29 has a history of one or more violent acts;

30 (26) "Mental disorder" means any organic, mental, or emotional
31 impairment which has substantial adverse effects on a person's
32 cognitive or volitional functions;

33 (27) "Mental health professional" means a psychiatrist,
34 psychologist, psychiatric advanced registered nurse practitioner,
35 psychiatric nurse, or social worker, and such other mental health
36 professionals as may be defined by rules adopted by the secretary
37 pursuant to the provisions of this chapter;

38 (28) "Mental health service provider" means a public or private
39 agency that provides mental health services to persons with mental
40 disorders as defined under this section and receives funding from

1 public sources. This includes, but is not limited to, hospitals
2 licensed under chapter 70.41 RCW, evaluation and treatment facilities
3 as defined in this section, community mental health service delivery
4 systems or community mental health programs as defined in RCW
5 71.24.025, facilities conducting competency evaluations and
6 restoration under chapter 10.77 RCW, and correctional facilities
7 operated by state and local governments;

8 (29) "Peace officer" means a law enforcement official of a public
9 agency or governmental unit, and includes persons specifically given
10 peace officer powers by any state law, local ordinance, or judicial
11 order of appointment;

12 (30) "Private agency" means any person, partnership, corporation,
13 or association that is not a public agency, whether or not financed
14 in whole or in part by public funds, which constitutes an evaluation
15 and treatment facility or private institution, or hospital, which is
16 conducted for, or includes a department or ward conducted for, the
17 care and treatment of persons who are mentally ill;

18 (31) "Professional person" means a mental health professional and
19 shall also mean a physician, psychiatric advanced registered nurse
20 practitioner, registered nurse, and such others as may be defined by
21 rules adopted by the secretary pursuant to the provisions of this
22 chapter;

23 (32) "Psychiatric advanced registered nurse practitioner" means a
24 person who is licensed as an advanced registered nurse practitioner
25 pursuant to chapter 18.79 RCW; and who is board certified in advanced
26 practice psychiatric and mental health nursing;

27 (33) "Psychiatrist" means a person having a license as a
28 physician and surgeon in this state who has in addition completed
29 three years of graduate training in psychiatry in a program approved
30 by the American medical association or the American osteopathic
31 association and is certified or eligible to be certified by the
32 American board of psychiatry and neurology;

33 (34) "Psychologist" means a person who has been licensed as a
34 psychologist pursuant to chapter 18.83 RCW;

35 (35) "Public agency" means any evaluation and treatment facility
36 or institution, or hospital which is conducted for, or includes a
37 department or ward conducted for, the care and treatment of persons
38 with mental illness, if the agency is operated directly by, federal,
39 state, county, or municipal government, or a combination of such
40 governments;

1 (36) "Registration records" include all the records of the
2 department, behavioral health organizations, treatment facilities,
3 and other persons providing services to the department, county
4 departments, or facilities which identify persons who are receiving
5 or who at any time have received services for mental illness;

6 (37) "Release" means legal termination of the commitment under
7 the provisions of this chapter;

8 (38) "Resource management services" has the meaning given in
9 chapter 71.24 RCW;

10 (39) "Secretary" means the secretary of the department of social
11 and health services, or his or her designee;

12 (40) "Serious violent offense" has the same meaning as provided
13 in RCW 9.94A.030;

14 (41) "Social worker" means a person with a master's or further
15 advanced degree from a social work educational program accredited and
16 approved as provided in RCW 18.320.010;

17 (42) "Therapeutic court personnel" means the staff of a mental
18 health court or other therapeutic court which has jurisdiction over
19 defendants who are dually diagnosed with mental disorders, including
20 court personnel, probation officers, a court monitor, prosecuting
21 attorney, or defense counsel acting within the scope of therapeutic
22 court duties;

23 (43) "Treatment records" include registration and all other
24 records concerning persons who are receiving or who at any time have
25 received services for mental illness, which are maintained by the
26 department, by behavioral health organizations and their staffs, and
27 by treatment facilities. Treatment records include mental health
28 information contained in a medical bill including but not limited to
29 mental health drugs, a mental health diagnosis, provider name, and
30 dates of service stemming from a medical service. Treatment records
31 do not include notes or records maintained for personal use by a
32 person providing treatment services for the department, behavioral
33 health organizations, or a treatment facility if the notes or records
34 are not available to others;

35 (44) "Triage facility" means a short-term facility or a portion
36 of a facility licensed by the department of health and certified by
37 the department of social and health services under RCW 71.24.035,
38 which is designed as a facility to assess and stabilize an individual
39 or determine the need for involuntary commitment of an individual,
40 and must meet department of health residential treatment facility

1 standards. A triage facility may be structured as a voluntary or
2 involuntary placement facility;

3 (45) "Violent act" means behavior that resulted in homicide,
4 attempted suicide, nonfatal injuries, or substantial damage to
5 property;

6 (46) "Medical clearance" means a physician or other health care
7 provider has determined that a person is medically stable and ready
8 for referral to the designated mental health professional.

9 NEW SECTION. Sec. 15. (1) The Washington state institute for
10 public policy is directed to complete a study by December 1, 2015,
11 regarding the implementation of certain aspects of the involuntary
12 treatment act under chapter 71.05 RCW. The study must include, but
13 not be limited to:

14 (a) An assessment of the nonemergent detention process provided
15 under RCW 71.05.150, which examines:

16 (i) The number of nonemergent petitions filed in each county by
17 year;

18 (ii) The reasons for variation in the use of nonemergent
19 detentions based on feedback from judicial officers, prosecutors,
20 public defenders, and mental health professionals; and

21 (iii) Models in other states for handling civil commitments when
22 imminent danger is not present.

23 (b) An analysis of less restrictive alternative orders under the
24 involuntary treatment act including:

25 (i) Differences across counties with respect to: (A) The use of
26 less restrictive alternatives and reasons why least restrictive
27 alternatives may or may not be utilized in different jurisdictions;
28 (B) monitoring practices; and (C) rates of, grounds for, and outcomes
29 of petitions for revocation or modification;

30 (ii) A systematic review of the research literature on the
31 effectiveness of alternatives to involuntary hospitalizations in
32 reducing violence and rehospitalizations; and

33 (iii) Approaches used in other states to monitor and enforce
34 least restrictive orders, including associated costs.

35 **Sec. 16.** RCW 71.05.620 and 2013 c 200 s 23 are each amended to
36 read as follows:

1 (1) The files and records of court proceedings under this chapter
2 and chapters 70.96A, 71.34, and 70.96B RCW shall be closed but shall
3 be accessible to:

4 (a) The department;

5 (b) The state hospitals as defined in RCW 72.23.010;

6 (c) Any person who is the subject of a petition (~~and to~~);

7 (d) The person's attorney(~~or~~) or guardian (~~ad litem~~);

8 (e) Resource management services(~~or~~) for that person; and

9 (f) Service providers authorized to receive such information by
10 resource management services.

11 (2) The department shall adopt rules to implement this section.

12 NEW SECTION. Sec. 17. (1) Sections 9 and 13 of this act expire
13 April 1, 2016.

14 (2) Section 15 of this act expires June 30, 2016.

15 NEW SECTION. Sec. 18. Sections 10 and 14 of this act take
16 effect April 1, 2016.

17 NEW SECTION. Sec. 19. Sections 1 through 9 and 11 through 13 of
18 this act are necessary for the immediate preservation of the public
19 peace, health, or safety, or support of the state government and its
20 existing public institutions, and take effect immediately."

21 Correct the title.

EFFECT: The striking amendment retains the provisions of the
underlying bill with the following changes:

(1) Removes the list of appropriate settings for single bed
certifications, and provides that the Department of Social and Health
Services (DSHS) may use the single bed certification process as
outlined in rule.

(2) Removes language stating that a report by a designated mental
health professional that there is no evaluation and treatment bed or
alternative placement available for a person who meets detention
criteria evidences a breach of the regional support network's duty to
provide for an adequate network of evaluation and treatment services.

(3) Removes the provisions related to assisted outpatient
treatment.

(4) Requires the Washington State Institute for Public Policy to
conduct an assessment of the use of the nonemergent detention process
and less restrictive alternative orders under the Involuntary
Treatment Act.

(5) Provides the DSHS and the state hospitals with access to files and records of involuntary treatment court proceedings.

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