FINAL BILL REPORT 2SHB 1448

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Synopsis as Enacted

Brief Description: Providing procedures for responding to reports of threatened or attempted suicide.

Sponsors: House Committee on Judiciary (originally sponsored by Representatives Riccelli, Holy, Parker, Ormsby, Caldier, Hayes, Jinkins, Walkinshaw, Gregerson, Appleton, Ryu, McBride and Shea).

House Committee on Judiciary House Committee on Appropriations Senate Committee on Human Services, Mental Health & Housing Senate Committee on Ways & Means

Background:

Standard for Involuntary Mental Health Treatment.

A person may be committed for involuntary mental health treatment under the Involuntary Treatment Act (ITA) if the person, due to a mental disorder, poses a likelihood of serious harm or is gravely disabled and will not voluntarily accept appropriate treatment. Among other circumstances, a person poses a likelihood of serious harm is if there is a substantial risk that the person will inflict physical harm upon himself or herself as evidenced by threats or attempts to commit suicide.

Emergent Detention by Law Enforcement.

The ITA grants law enforcement officers the power to temporarily detain persons under emergent conditions. A law enforcement officer with reasonable cause to believe a person is suffering from a mental disorder and poses an imminent likelihood of serious harm or is in imminent danger due to grave disability may take the person into custody and immediately deliver the person to an emergency room or other facility listed in statute. "Imminence" for the purposes of the ITA means that the danger of harm is likely to occur at any moment, or is near at hand, rather than being distant or remote.

A facility may hold a person taken into custody by law enforcement for up to 12 hours from the time of medical clearance. A mental health professional must examine the person within three hours, and a designated mental health professional (DMHP) must determine within 12 hours whether the individual meets detention criteria. A mental health professional is a

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psychiatrist, psychologist, psychiatric advanced registered nurse practitioner, psychiatric nurse, social worker, or other mental health professional as defined in agency rules. "Designated mental health professionals" are mental health professionals who are responsible for investigating whether or not a person should be detained for an evaluation for involuntary mental health treatment under the ITA.

<u>Initial Detention under the Involuntary Treatment Act.</u>

In conducting an investigation, a DMHP must assess the credibility of the information received and attempt to interview the subject of the investigation. If satisfied that the person meets the ITA detention standard and that the person will not voluntarily accept treatment, the DMHP may take action to have the person detained for up to 72 hours for the purpose of examination and treatment.

Summary:

Legislative intent is stated, encouraging officers to facilitate contact between persons who have threatened self-harm and mental health professionals, in instances in which those persons do not meet criteria to be taken into custody under the ITA.

By July 1, 2017, all general authority law enforcement agencies must establish criteria and procedures for an officer to refer a person to a mental health agency after receiving a report of the person's attempted or threatened suicide. When funded, the Washington Association of Sheriffs and Police Chiefs, in consultation with the Criminal Justice Training Commission (CJTC), must develop and adopt a model policy for use by law enforcement agencies. The model policy must compliment the CJTC's crisis intervention training curriculum.

When any person is referred by a law enforcement officer to a DMHP agency, a mental health professional must attempt to contact the subject of the referral in order to determine whether further mental health intervention is necessary. Further intervention may include, if needed, a DMHP assessment for initial detention under the ITA. The mental health professional must attempt to contact the subject of the referral as soon as possible, but no later than 24 hours from the officer's referral, excluding weekends and holidays. The DMHP agency is required to maintain documentation of the attempt to contact the person.

Officers and their employing agencies are not liable for referring or failing to refer a person to a mental health agency pursuant to the law enforcement agency's policy, as long as the action or inaction is taken in good faith and without gross negligence.

Votes on Final Passage:

2015 Regular Session

House 93 5

2016 Regular Session

House 95 2

Senate 48 0 (Senate amended) House 94 2 (House concurred)

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Effective: June 9, 2016