

---

ENGROSSED SUBSTITUTE HOUSE BILL 1713

---

State of Washington

64th Legislature

2015 Regular Session

By House Judiciary (originally sponsored by Representatives Cody, Harris, Jenkins, Moeller, Tharinger, Appleton, Ortiz-Self, and Pollet)

READ FIRST TIME 02/20/15.

1 AN ACT Relating to integrating the treatment systems for mental  
2 health and chemical dependency; amending RCW 70.96A.020, 70.96A.140,  
3 70.96A.145, 71.05.025, 71.05.026, 71.05.050, 71.05.120, 71.05.132,  
4 71.05.150, 71.05.150, 71.05.153, 71.05.154, 71.05.156, 71.05.157,  
5 71.05.160, 71.05.170, 71.05.180, 71.05.190, 71.05.195, 71.05.210,  
6 71.05.210, 71.05.212, 71.05.214, 71.05.215, 71.05.220, 71.05.230,  
7 71.05.235, 71.05.240, 71.05.240, 71.05.280, 71.05.290, 71.05.300,  
8 71.05.320, 71.05.320, 71.05.325, 71.05.340, 71.05.340, 71.05.360,  
9 71.05.380, 71.05.435, 71.05.530, 71.05.560, 71.05.620, 71.05.700,  
10 71.05.705, 71.34.020, 71.34.305, 71.34.375, 71.34.385, 71.34.400,  
11 71.34.410, 71.34.500, 71.34.520, 71.34.600, 71.34.630, 71.34.650,  
12 71.34.660, 71.34.700, 71.34.700, 71.34.710, 71.34.710, 71.34.720,  
13 71.34.720, 71.34.740, 71.34.740, 71.34.750, 71.34.750, 71.34.760,  
14 71.34.780, 71.34.780, 9.41.010, 9.41.040, 9.41.047, 9.41.075,  
15 9.41.097, 9.41.098, 4.24.558, 5.60.060, 9.41.280, 9.95.143,  
16 10.77.010, 10.77.025, 10.77.027, 10.77.060, 10.77.084, 10.77.088,  
17 11.92.190, 13.32A.044, 18.83.110, 43.20A.025, 70.48.475, 70.97.010,  
18 71.05.660, 71.24.045, 71.24.330, 71.32.080, 71.32.140, 71.32.150,  
19 72.09.315, 72.09.370, 74.13.033, and 74.50.070; reenacting and  
20 amending RCW 70.96A.020, 71.05.020, 71.05.153, 71.34.730, 10.77.065,  
21 70.02.010, 70.02.230, and 71.24.025; adding new sections to chapter  
22 71.05 RCW; adding a new section to chapter 71.34 RCW; adding a new  
23 section to chapter 9.41 RCW; creating new sections; repealing RCW

1 70.96A.095, 70.96A.096, 70.96A.097, 70.96A.110, 70.96A.120,  
2 70.96A.140, 70.96A.141, 70.96A.142, 70.96A.145, 70.96A.148,  
3 70.96A.155, 70.96A.157, 70.96A.160, 70.96A.180, 70.96A.230,  
4 70.96A.235, 70.96A.240, 70.96A.245, 70.96A.250, 70.96A.255,  
5 70.96A.260, 70.96A.265, 70.96B.010, 70.96B.020, 70.96B.030,  
6 70.96B.040, 70.96B.045, 70.96B.050, 70.96B.060, 70.96B.070,  
7 70.96B.080, 70.96B.090, 70.96B.100, 70.96B.110, 70.96B.120,  
8 70.96B.130, 70.96B.140, 70.96B.150, 70.96B.800, and 71.05.032;  
9 providing effective dates; providing a contingent effective date; and  
10 providing an expiration date.

11 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

12 **PART I**  
13 **CHEMICAL DEPENDENCY INVOLUNTARY TREATMENT PROVISIONS**

14 **Sec. 101.** RCW 70.96A.020 and 2001 c 13 s 1 are each amended to  
15 read as follows:

16 For the purposes of this chapter the following words and phrases  
17 shall have the following meanings unless the context clearly requires  
18 otherwise:

19 (1) "Alcoholic" means a person who suffers from the disease of  
20 alcoholism.

21 (2) "Alcoholism" means a disease, characterized by a dependency  
22 on alcoholic beverages, loss of control over the amount and  
23 circumstances of use, symptoms of tolerance, physiological or  
24 psychological withdrawal, or both, if use is reduced or discontinued,  
25 and impairment of health or disruption of social or economic  
26 functioning.

27 (3) "Approved treatment program" means a discrete program of  
28 chemical dependency treatment provided by a treatment program  
29 certified by the department of social and health services as meeting  
30 standards adopted under this chapter.

31 (4) "Chemical dependency" means:

32 (a) Alcoholism; (b) drug addiction; or (c) dependence on alcohol  
33 and one or more other psychoactive chemicals, as the context  
34 requires.

35 (5) "Chemical dependency program" means expenditures and  
36 activities of the department designed and conducted to prevent or

1 treat alcoholism and other drug addiction, including reasonable  
2 administration and overhead.

3 (6) "Department" means the department of social and health  
4 services.

5 (7) "Designated chemical dependency specialist" or "specialist"  
6 means a person designated by the county alcoholism and other drug  
7 addiction program coordinator designated under RCW 70.96A.310 to  
8 perform the commitment duties described in RCW 70.96A.140 and  
9 qualified to do so by meeting standards adopted by the department.

10 (8) "Director" means the person administering the chemical  
11 dependency program within the department.

12 (9) "Drug addict" means a person who suffers from the disease of  
13 drug addiction.

14 (10) "Drug addiction" means a disease characterized by a  
15 dependency on psychoactive chemicals, loss of control over the amount  
16 and circumstances of use, symptoms of tolerance, physiological or  
17 psychological withdrawal, or both, if use is reduced or discontinued,  
18 and impairment of health or disruption of social or economic  
19 functioning.

20 (11) "Emergency service patrol" means a patrol established under  
21 RCW 70.96A.170.

22 (12) "Gravely disabled by alcohol or other psychoactive  
23 chemicals" or "gravely disabled" means that a person, as a result of  
24 the use of alcohol or other psychoactive chemicals: (a) Is in danger  
25 of serious physical harm resulting from a failure to provide for his  
26 or her essential human needs of health or safety; or (b) manifests  
27 severe deterioration in routine functioning evidenced by a repeated  
28 and escalating loss of cognition or volitional control over his or  
29 her actions and is not receiving care as essential for his or her  
30 health or safety.

31 (13) "History of one or more violent acts" refers to the period  
32 of time ten years prior to the filing of a petition under this  
33 chapter, excluding any time spent, but not any violent acts  
34 committed, in a mental health facility, or a long-term alcoholism or  
35 drug treatment facility, or in confinement.

36 (14) "Incapacitated by alcohol or other psychoactive chemicals"  
37 means that a person, as a result of the use of alcohol or other  
38 psychoactive chemicals, is gravely disabled or presents a likelihood  
39 of serious harm to himself or herself, to any other person, or to  
40 property.

1 (15) "Incompetent person" means a person who has been adjudged  
2 incompetent by the superior court.

3 (16) "Intoxicated person" means a person whose mental or physical  
4 functioning is substantially impaired as a result of the use of  
5 alcohol or other psychoactive chemicals.

6 (17) "Licensed physician" means a person licensed to practice  
7 medicine or osteopathic medicine and surgery in the state of  
8 Washington.

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

10 (a) A substantial risk that: (i) Physical harm will be inflicted  
11 by an individual upon his or her own person, as evidenced by threats  
12 or attempts to commit suicide or inflict physical harm on one's self;  
13 (ii) physical harm will be inflicted by an individual upon another,  
14 as evidenced by behavior that has caused the harm or that places  
15 another person or persons in reasonable fear of sustaining the harm;  
16 or (iii) physical harm will be inflicted by an individual upon the  
17 property of others, as evidenced by behavior that has caused  
18 substantial loss or damage to the property of others; or

19 (b) The individual has threatened the physical safety of another  
20 and has a history of one or more violent acts.

21 (19) "Medical necessity" for inpatient care of a minor means a  
22 requested certified inpatient service that is reasonably calculated  
23 to: (a) Diagnose, arrest, or alleviate a chemical dependency; or (b)  
24 prevent the worsening of chemical dependency conditions that endanger  
25 life or cause suffering and pain, or result in illness or infirmity  
26 or threaten to cause or aggravate a handicap, or cause physical  
27 deformity or malfunction, and there is no adequate less restrictive  
28 alternative available.

29 (20) "Minor" means a person less than eighteen years of age.

30 (21) "Parent" means the parent or parents who have the legal  
31 right to custody of the child. Parent includes custodian or guardian.

32 (22) "Peace officer" means a law enforcement official of a public  
33 agency or governmental unit, and includes persons specifically given  
34 peace officer powers by any state law, local ordinance, or judicial  
35 order of appointment.

36 (23) "Person" means an individual, including a minor.

37 (24) "Professional person in charge" or "professional person"  
38 means a physician or chemical dependency counselor as defined in rule  
39 by the department, who is empowered by a certified treatment program

1 with authority to make assessment, admission, continuing care, and  
2 discharge decisions on behalf of the certified program.

3 (25) "Secretary" means the secretary of the department of social  
4 and health services.

5 (26) "Treatment" means the broad range of emergency,  
6 detoxification, residential, and outpatient services and care,  
7 including diagnostic evaluation, chemical dependency education and  
8 counseling, medical, psychiatric, psychological, and social service  
9 care, vocational rehabilitation and career counseling, which may be  
10 extended to alcoholics and other drug addicts and their families,  
11 persons incapacitated by alcohol or other psychoactive chemicals, and  
12 intoxicated persons.

13 (27) "Treatment program" means an organization, institution, or  
14 corporation, public or private, engaged in the care, treatment, or  
15 rehabilitation of alcoholics or other drug addicts.

16 (28) "Violent act" means behavior that resulted in homicide,  
17 attempted suicide, nonfatal injuries, or substantial damage to  
18 property.

19 (29) "Commitment" means the determination by a court that a  
20 person should be detained for a period of either evaluation or  
21 treatment, or both, in an inpatient or a less restrictive setting.

22 (30) "Mental health professional" means a psychiatrist,  
23 psychologist, psychiatric advanced registered nurse practitioner,  
24 psychiatric nurse, or social worker, and such other mental health  
25 professionals as may be defined by rules adopted by the secretary  
26 pursuant to the provisions of chapter 71.05 RCW.

27 (31) "Physician assistant" means a person who is licensed as a  
28 physician assistant pursuant to chapter 18.57A or 18.71A RCW and is  
29 working with a licensed mental health physician as indicated by their  
30 delegation agreement.

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

35 **Sec. 102.** RCW 70.96A.020 and 2014 c 225 s 20 are each reenacted  
36 and amended to read as follows:

37 For the purposes of this chapter the following words and phrases  
38 shall have the following meanings unless the context clearly requires  
39 otherwise:

1 (1) "Alcoholism" means a disease, characterized by a dependency  
2 on alcoholic beverages, loss of control over the amount and  
3 circumstances of use, symptoms of tolerance, physiological or  
4 psychological withdrawal, or both, if use is reduced or discontinued,  
5 and impairment of health or disruption of social or economic  
6 functioning.

7 (2) "Approved treatment program" means a program for persons with  
8 a substance use disorder provided by a treatment program certified by  
9 the department of social and health services as meeting standards  
10 adopted under this chapter.

11 (3) "Behavioral health organization" means a county authority or  
12 group of county authorities or other entity recognized by the  
13 secretary in contract in a defined regional service area.

14 (4) "Behavioral health services" means mental health services as  
15 described in chapters 71.24 and 71.36 RCW and chemical dependency  
16 treatment services as described in this chapter.

17 (5) "Chemical dependency" means: (a) Alcoholism; (b) drug  
18 addiction; or (c) dependence on alcohol and one or more other  
19 psychoactive chemicals, as the context requires.

20 (6) "Chemical dependency program" means expenditures and  
21 activities of the department designed and conducted to prevent or  
22 treat alcoholism and other drug addiction, including reasonable  
23 administration and overhead.

24 (7) "Department" means the department of social and health  
25 services.

26 (8) "Designated chemical dependency specialist" or "specialist"  
27 means a person designated by the behavioral health organization or by  
28 the county alcoholism and other drug addiction program coordinator  
29 designated under RCW 70.96A.310 to perform the commitment duties  
30 described in RCW 70.96A.140 and qualified to do so by meeting  
31 standards adopted by the department.

32 (9) "Director" means the person administering the substance use  
33 disorder program within the department.

34 (10) "Drug addiction" means a disease characterized by a  
35 dependency on psychoactive chemicals, loss of control over the amount  
36 and circumstances of use, symptoms of tolerance, physiological or  
37 psychological withdrawal, or both, if use is reduced or discontinued,  
38 and impairment of health or disruption of social or economic  
39 functioning.

1 (11) "Emergency service patrol" means a patrol established under  
2 RCW 70.96A.170.

3 (12) "Gravely disabled by alcohol or other psychoactive  
4 chemicals" or "gravely disabled" means that a person, as a result of  
5 the use of alcohol or other psychoactive chemicals: (a) Is in danger  
6 of serious physical harm resulting from a failure to provide for his  
7 or her essential human needs of health or safety; or (b) manifests  
8 severe deterioration in routine functioning evidenced by a repeated  
9 and escalating loss of cognition or volitional control over his or  
10 her actions and is not receiving care as essential for his or her  
11 health or safety.

12 (13) "History of one or more violent acts" refers to the period  
13 of time ten years prior to the filing of a petition under this  
14 chapter, excluding any time spent, but not any violent acts  
15 committed, in a mental health facility, or a long-term alcoholism or  
16 drug treatment facility, or in confinement.

17 (14) "Incapacitated by alcohol or other psychoactive chemicals"  
18 means that a person, as a result of the use of alcohol or other  
19 psychoactive chemicals, is gravely disabled or presents a likelihood  
20 of serious harm to himself or herself, to any other person, or to  
21 property.

22 (15) "Incompetent person" means a person who has been adjudged  
23 incompetent by the superior court.

24 (16) "Intoxicated person" means a person whose mental or physical  
25 functioning is substantially impaired as a result of the use of  
26 alcohol or other psychoactive chemicals.

27 (17) "Licensed physician" means a person licensed to practice  
28 medicine or osteopathic medicine and surgery in the state of  
29 Washington.

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

31 (a) A substantial risk that: (i) Physical harm will be inflicted  
32 by an individual upon his or her own person, as evidenced by threats  
33 or attempts to commit suicide or inflict physical harm on one's self;  
34 (ii) physical harm will be inflicted by an individual upon another,  
35 as evidenced by behavior that has caused the harm or that places  
36 another person or persons in reasonable fear of sustaining the harm;  
37 or (iii) physical harm will be inflicted by an individual upon the  
38 property of others, as evidenced by behavior that has caused  
39 substantial loss or damage to the property of others; or

1 (b) The individual has threatened the physical safety of another  
2 and has a history of one or more violent acts.

3 (19) "Medical necessity" for inpatient care of a minor means a  
4 requested certified inpatient service that is reasonably calculated  
5 to: (a) Diagnose, arrest, or alleviate a chemical dependency; or (b)  
6 prevent the progression of substance use disorders that endanger life  
7 or cause suffering and pain, or result in illness or infirmity or  
8 threaten to cause or aggravate a handicap, or cause physical  
9 deformity or malfunction, and there is no adequate less restrictive  
10 alternative available.

11 (20) "Minor" means a person less than eighteen years of age.

12 (21) "Parent" means the parent or parents who have the legal  
13 right to custody of the child. Parent includes custodian or guardian.

14 (22) "Peace officer" means a law enforcement official of a public  
15 agency or governmental unit, and includes persons specifically given  
16 peace officer powers by any state law, local ordinance, or judicial  
17 order of appointment.

18 (23) "Person" means an individual, including a minor.

19 (24) "Professional person in charge" or "professional person"  
20 means a physician or chemical dependency counselor as defined in rule  
21 by the department, who is empowered by a certified treatment program  
22 with authority to make assessment, admission, continuing care, and  
23 discharge decisions on behalf of the certified program.

24 (25) "Secretary" means the secretary of the department of social  
25 and health services.

26 (26) "Substance use disorder" means a cluster of cognitive,  
27 behavioral, and physiological symptoms indicating that an individual  
28 continues using the substance despite significant substance-related  
29 problems. The diagnosis of a substance use disorder is based on a  
30 pathological pattern of behaviors related to the use of the  
31 substances.

32 (27) "Treatment" means the broad range of emergency, withdrawal  
33 management, residential, and outpatient services and care, including  
34 diagnostic evaluation, chemical dependency education and counseling,  
35 medical, psychiatric, psychological, and social service care,  
36 vocational rehabilitation and career counseling, which may be  
37 extended to persons with substance use disorders and their families,  
38 persons incapacitated by alcohol or other psychoactive chemicals, and  
39 intoxicated persons.



1 (28) "Treatment program" means an organization, institution, or  
2 corporation, public or private, engaged in the care, treatment, or  
3 rehabilitation of persons with substance use ~~((disorder[s+]))~~  
4 disorders.

5 (29) "Violent act" means behavior that resulted in homicide,  
6 attempted suicide, nonfatal injuries, or substantial damage to  
7 property.

8 (30) "Commitment" means the determination by a court that a  
9 person should be detained for a period of either evaluation or  
10 treatment, or both, in an inpatient or a less restrictive setting.

11 (31) "Mental health professional" means a psychiatrist,  
12 psychologist, psychiatric advanced registered nurse practitioner,  
13 psychiatric nurse, or social worker, and such other mental health  
14 professionals as may be defined by rules adopted by the secretary  
15 pursuant to the provisions of chapter 71.05 RCW.

16 (32) "Physician assistant" means a person who is licensed as a  
17 physician assistant pursuant to chapter 18.57A or 18.71A RCW and is  
18 working with a licensed mental health physician as indicated by their  
19 delegation agreement.

20 (33) "Psychiatric advanced registered nurse practitioner" means a  
21 person who is licensed as an advanced registered nurse practitioner  
22 pursuant to chapter 18.79 RCW; and who is board certified in advanced  
23 practice psychiatric and mental health nursing.

24 **Sec. 103.** RCW 70.96A.140 and 2001 c 13 s 3 are each amended to  
25 read as follows:

26 (1)(a) When a designated chemical dependency specialist receives  
27 information alleging that a person presents a likelihood of serious  
28 harm or is gravely disabled as a result of chemical dependency, the  
29 designated chemical dependency specialist, after investigation and  
30 evaluation of the specific facts alleged and of the reliability and  
31 credibility of the information, may file a petition for commitment of  
32 such person with the superior court, district court, or in another  
33 court permitted by court rule.

34 If a petition for commitment is not filed in the case of a minor,  
35 the parent, guardian, or custodian who has custody of the minor may  
36 seek review of that decision made by the designated chemical  
37 dependency specialist in superior or district court. The parent,  
38 guardian, or custodian shall file notice with the court and provide a  
39 copy of the designated chemical dependency specialist's report.

1 If the designated chemical dependency specialist finds that the  
2 initial needs of such person would be better served by placement  
3 within the mental health system, the person shall be referred to  
4 either a ((county)) designated mental health professional or an  
5 evaluation and treatment facility as defined in RCW 71.05.020 or  
6 71.34.020.

7 (b) If placement in a chemical dependency program is available  
8 and deemed appropriate, the petition shall allege that: The person is  
9 chemically dependent and presents a likelihood of serious harm or is  
10 gravely disabled by alcohol or drug addiction, or that the person has  
11 twice before in the preceding twelve months been admitted for  
12 detoxification, sobering services, or chemical dependency treatment  
13 pursuant to RCW 70.96A.110 or 70.96A.120, and is in need of a more  
14 sustained treatment program, or that the person is chemically  
15 dependent and has threatened, attempted, or inflicted physical harm  
16 on another and is likely to inflict physical harm on another unless  
17 committed. A refusal to undergo treatment, by itself, does not  
18 constitute evidence of lack of judgment as to the need for treatment.  
19 ((The petition shall be accompanied by a certificate of a licensed  
20 physician who has examined the person within five days before  
21 submission of the petition, unless the person whose commitment is  
22 sought has refused to submit to a medical examination, in which case  
23 the fact of refusal shall be alleged in the petition. The certificate  
24 shall set forth the licensed physician's findings in support of the  
25 allegations of the petition. A physician employed by the petitioning  
26 program or the department is eligible to be the certifying  
27 physician.))

28 (c) If involuntary detention is sought, the petition must state  
29 facts that support a finding of the grounds identified in (b) of this  
30 subsection and that there are no less restrictive alternatives to  
31 detention in the best interest of such person or others. The petition  
32 must state specifically that less restrictive alternative treatment  
33 was considered and specify why treatment less restrictive than  
34 detention is not appropriate. If an involuntary less restrictive  
35 alternative is sought, the petition must state facts that support a  
36 finding of the grounds for commitment identified in (b) of this  
37 subsection and set forth the proposed less restrictive alternative.

38 (d)(i) The petition must be signed by:

39 (A) Two licensed physicians;

40 (B) One licensed physician and a mental health professional;

1 (C) Two psychiatric advanced registered nurse practitioners;

2 (D) Two physician assistants;

3 (E) One mental health professional and either a psychiatric  
4 advanced registered nurse practitioner or a physician assistant; or

5 (F) One licensed physician and either a psychiatric advanced  
6 registered nurse practitioner or physician assistant.

7 (ii) The persons signing the petition must have examined the  
8 person.

9 (2) Upon filing the petition, the court shall fix a date for a  
10 hearing no less than two and no more than seven days after the date  
11 the petition was filed unless the person petitioned against is  
12 presently being detained in a program, pursuant to RCW 70.96A.120,  
13 71.05.210, or ((71.34.050)) 71.34.710, in which case the hearing  
14 shall be held within seventy-two hours of the filing of the petition:  
15 PROVIDED, HOWEVER, That the above specified seventy-two hours shall  
16 be computed by excluding Saturdays, Sundays, and holidays: PROVIDED  
17 FURTHER, That, the court may, upon motion of the person whose  
18 commitment is sought, or upon motion of petitioner with written  
19 permission of the person whose commitment is sought, or his or her  
20 counsel and, upon good cause shown, extend the date for the hearing.  
21 A copy of the petition and of the notice of the hearing, including  
22 the date fixed by the court, shall be served by the designated  
23 chemical dependency specialist on the person whose commitment is  
24 sought, his or her next of kin, a parent or his or her legal guardian  
25 if he or she is a minor, and any other person the court believes  
26 advisable. A copy of the petition and certificate shall be delivered  
27 to each person notified.

28 (3) At the hearing the court shall hear all relevant  
29 testimony((τ)) including, if possible, the testimony, which may be  
30 telephonic, of at least one licensed physician, psychiatric advanced  
31 registered nurse practitioner, physician assistant, or mental health  
32 professional who has examined the person whose commitment is sought.  
33 Communications otherwise deemed privileged under the laws of this  
34 state are deemed to be waived in proceedings under this chapter when  
35 a court of competent jurisdiction in its discretion determines that  
36 the waiver is necessary to protect either the detained person or the  
37 public. The waiver of a privilege under this section is limited to  
38 records or testimony relevant to evaluation of the detained person  
39 for purposes of a proceeding under this chapter. Upon motion by the  
40 detained person, or on its own motion, the court shall examine a

1 record or testimony sought by a petitioner to determine whether it is  
2 within the scope of the waiver.

3 The record maker shall not be required to testify in order to  
4 introduce medical, nursing, or psychological records of detained  
5 persons so long as the requirements of RCW 5.45.020 are met, except  
6 that portions of the record that contain opinions as to whether the  
7 detained person is chemically dependent shall be deleted from the  
8 records unless the person offering the opinions is available for  
9 cross-examination. The person shall be present unless the court  
10 believes that his or her presence is likely to be injurious to him or  
11 her; in this event the court may deem it appropriate to appoint a  
12 guardian ad litem to represent him or her throughout the proceeding.  
13 If deemed advisable, the court may examine the person out of  
14 courtroom. If the person has refused to be examined by a licensed  
15 physician, psychiatric advanced registered nurse practitioner,  
16 physician assistant, or mental health professional, he or she shall  
17 be given an opportunity to be examined by a court appointed licensed  
18 physician, psychiatric advanced registered nurse practitioner,  
19 physician assistant, or other professional person qualified to  
20 provide such services. If he or she refuses and there is sufficient  
21 evidence to believe that the allegations of the petition are true, or  
22 if the court believes that more medical evidence is necessary, the  
23 court may make a temporary order committing him or her to the  
24 department for a period of not more than five days for purposes of a  
25 diagnostic examination.

26 (4)(a) If after hearing all relevant evidence, including the  
27 results of any diagnostic examination, the court finds that grounds  
28 for involuntary commitment have been established by (~~clear, cogent,~~  
29 ~~and convincing proof~~) a preponderance of the evidence and, after  
30 considering less restrictive alternatives to involuntary detention  
31 and treatment, finds that no such alternatives are in the best  
32 interest of the person or others, it shall make an order of  
33 commitment to an approved treatment program. It shall not order  
34 commitment of a person unless it determines that an approved  
35 treatment program is available and able to provide adequate and  
36 appropriate treatment for him or her.

37 (b) If the court finds that the grounds for commitment have been  
38 established by a preponderance of the evidence, but that treatment in  
39 a less restrictive setting than detention is in the best interest of  
40 such person or others, the court shall order an appropriate less

1 restrictive course of treatment. The less restrictive order may  
2 impose treatment conditions and other conditions that are in the best  
3 interest of the respondent and others. A copy of the less restrictive  
4 order must be given to the respondent, the designated chemical  
5 dependency specialist, and any program designated to provide less  
6 restrictive treatment. If the program designated to provide the less  
7 restrictive treatment is other than the program providing the initial  
8 involuntary treatment, the program so designated must agree in  
9 writing to assume such responsibility. The court may not order  
10 commitment of a person to a less restrictive course of treatment  
11 unless it determines that an approved treatment program is available  
12 and able to provide adequate and appropriate treatment for him or  
13 her.

14 (5) A person committed to inpatient treatment under this section  
15 shall remain in the program for treatment for a period of ~~((sixty))~~  
16 fourteen days unless sooner discharged. A person committed to a less  
17 restrictive course of treatment under this section shall remain in  
18 the program of treatment for a period of ninety days unless sooner  
19 discharged. At the end of the ~~((sixty))~~ fourteen-day period, or  
20 ninety-day period in the case of a less restrictive alternative to  
21 inpatient treatment, he or she shall be discharged automatically  
22 unless the program or the designated chemical dependency specialist,  
23 before expiration of the period, files a petition for his or her  
24 recommitment upon the grounds set forth in subsection (1) of this  
25 section for a further period of ninety days of inpatient treatment or  
26 ninety days of less restrictive alternative treatment unless sooner  
27 discharged. The petition for ninety-day inpatient or less restrictive  
28 alternative treatment must be filed with the clerk of the court at  
29 least three days before expiration of the fourteen-day period of  
30 intensive treatment.

31 If a petition for recommitment is not filed in the case of a  
32 minor, the parent, guardian, or custodian who has custody of the  
33 minor may seek review of that decision made by the designated  
34 chemical dependency specialist in superior or district court. The  
35 parent, guardian, or custodian shall file notice with the court and  
36 provide a copy of the treatment progress report.

37 If a person has been committed because he or she is chemically  
38 dependent and likely to inflict physical harm on another, the program  
39 or designated chemical dependency specialist shall apply for

1 recommitment if after examination it is determined that the  
2 likelihood still exists.

3 (6) Upon the filing of a petition for recommitment under  
4 subsection (5) of this section, the court shall fix a date for  
5 hearing no less than two and no more than seven days after the date  
6 the petition was filed: PROVIDED, That, the court may, upon motion of  
7 the person whose commitment is sought and upon good cause shown,  
8 extend the date for the hearing. A copy of the petition and of the  
9 notice of hearing, including the date fixed by the court, shall be  
10 served by the treatment program on the person whose commitment is  
11 sought, his or her next of kin, the original petitioner under  
12 subsection (1) of this section if different from the petitioner for  
13 recommitment, one of his or her parents or his or her legal guardian  
14 if he or she is a minor, and his or her attorney and any other person  
15 the court believes advisable. At the hearing the court shall proceed  
16 as provided in subsections (3) and (4) of this section, except that  
17 the burden of proof upon a hearing for recommitment must be proof by  
18 clear, cogent, and convincing evidence.

19 (7) The approved treatment program shall provide for adequate and  
20 appropriate treatment of a person committed to its custody on an  
21 inpatient or outpatient basis. A person committed under this section  
22 may be transferred from one approved public treatment program to  
23 another if transfer is medically advisable.

24 (8) A person committed to (~~the custody of~~) a program for  
25 treatment shall be discharged at any time before the end of the  
26 period for which he or she has been committed and he or she shall be  
27 discharged by order of the court if either of the following  
28 conditions are met:

29 (a) In case of a chemically dependent person committed on the  
30 grounds of likelihood of infliction of physical harm upon himself,  
31 herself, or another, the likelihood no longer exists; or further  
32 treatment will not be likely to bring about significant improvement  
33 in the person's condition, or treatment is no longer adequate or  
34 appropriate.

35 (b) In case of a chemically dependent person committed on the  
36 grounds of the need of treatment and incapacity, that the incapacity  
37 no longer exists.

38 (9) The court shall inform the person whose commitment or  
39 recommitment is sought of his or her right to contest the  
40 application, be represented by counsel at every stage of any

1 proceedings relating to his or her commitment and recommitment, and  
2 have counsel appointed by the court or provided by the court, if he  
3 or she wants the assistance of counsel and is unable to obtain  
4 counsel. If the court believes that the person needs the assistance  
5 of counsel, the court shall require, by appointment if necessary,  
6 counsel for him or her regardless of his or her wishes. The person  
7 shall, if he or she is financially able, bear the costs of such legal  
8 service; otherwise such legal service shall be at public expense. The  
9 person whose commitment or recommitment is sought shall be informed  
10 of his or her right to be examined by ((a)) his or her choice of  
11 licensed physician ((of his or her choice)), psychiatric advanced  
12 registered nurse practitioner, physician assistant, or other  
13 professional person to conduct an examination and testify on behalf  
14 of the person. If the person is unable to obtain a licensed physician  
15 and requests examination by a physician, the court shall employ a  
16 licensed physician.

17 (10) A person committed under this chapter may at any time seek  
18 to be discharged from commitment by writ of habeas corpus in a court  
19 of competent jurisdiction.

20 (11) The venue for proceedings under this section is the county  
21 in which person to be committed resides or is present.

22 (12) When in the opinion of the professional person in charge of  
23 the program providing involuntary inpatient treatment under this  
24 chapter, the committed patient can be appropriately served by less  
25 restrictive treatment before expiration of the period of commitment,  
26 then the less restrictive care may be required as a condition for  
27 early release for a period which, when added to the initial treatment  
28 period, does not exceed the period of commitment. If the program  
29 designated to provide the less restrictive treatment is other than  
30 the program providing the initial involuntary treatment, the program  
31 so designated must agree in writing to assume such responsibility. A  
32 copy of the conditions for early release shall be given to the  
33 patient, the designated chemical dependency specialist of original  
34 commitment, and the court of original commitment. The program  
35 designated to provide less restrictive care may modify the conditions  
36 for continued release when the modifications are in the best  
37 interests of the patient. If the program providing less restrictive  
38 care and the designated chemical dependency specialist determine that  
39 a conditionally released patient is failing to adhere to the terms  
40 and conditions of his or her release, or that substantial

1 deterioration in the patient's functioning has occurred, then the  
2 designated chemical dependency specialist shall notify the court of  
3 original commitment and request a hearing to be held no less than two  
4 and no more than seven days after the date of the request to  
5 determine whether or not the person should be returned to more  
6 restrictive care. The designated chemical dependency specialist shall  
7 file a petition with the court stating the facts substantiating the  
8 need for the hearing along with the treatment recommendations. The  
9 patient shall have the same rights with respect to notice, hearing,  
10 and counsel as for the original involuntary treatment proceedings.  
11 The issues to be determined at the hearing are whether the  
12 conditionally released patient did or did not adhere to the terms and  
13 conditions of his or her release to less restrictive care or that  
14 substantial deterioration of the patient's functioning has occurred  
15 and whether the conditions of release should be modified or the  
16 person should be returned to a more restrictive program. The hearing  
17 may be waived by the patient and his or her counsel and his or her  
18 guardian or conservator, if any, but may not be waived unless all  
19 such persons agree to the waiver. Upon waiver, the person may be  
20 returned for involuntary treatment or continued on conditional  
21 release on the same or modified conditions. The grounds and  
22 procedures for revocation of less restrictive alternative treatment  
23 ordered by the court must be the same as those set forth in this  
24 section for less restrictive care arranged by an approved treatment  
25 program as a condition for early release.

26 **Sec. 104.** RCW 70.96A.145 and 1993 c 137 s 1 are each amended to  
27 read as follows:

28 The prosecuting attorney of the county in which such action is  
29 taken (~~may, at the discretion of the prosecuting attorney,~~) shall  
30 represent the designated chemical dependency specialist or treatment  
31 program in judicial proceedings under RCW 70.96A.140 for the  
32 involuntary commitment or recommitment of an individual, including  
33 any judicial proceeding where the individual sought to be committed  
34 or recommitted challenges the action.

35 **PART II**  
36 **INTEGRATED SYSTEM**



1        NEW SECTION.    **Sec. 201.**    A new section is added to chapter 71.05  
2    RCW to read as follows:

3        (1) By April 1, 2017, the department, by rule, must combine the  
4    functions of a designated mental health professional and designated  
5    chemical dependency specialist by establishing a designated crisis  
6    responder who is authorized to conduct investigations, detain persons  
7    up to seventy-two hours to the proper facility, and carry out the  
8    other functions identified in this chapter and chapter 71.34 RCW. The  
9    behavioral health organizations shall provide training to the  
10    designated crisis responders as required by the department.

11        (2)(a) To qualify as a designated crisis responder, a person must  
12    have received chemical dependency training as determined by the  
13    department and be a:

14        (i) Psychiatrist, psychologist, psychiatric advanced registered  
15    nurse practitioner, or social worker;

16        (ii) Person with a master's degree or further advanced degree in  
17    counseling or one of the social sciences from an accredited college  
18    or university and who have, in addition, at least two years of  
19    experience in direct treatment of persons with mental illness or  
20    emotional disturbance, such experience gained under the direction of  
21    a mental health professional;

22        (iii) Person who meets the waiver criteria of RCW 71.24.260,  
23    which waiver was granted before 1986;

24        (iv) Person who had an approved waiver to perform the duties of a  
25    mental health professional that was requested by the regional support  
26    network and granted by the department before July 1, 2001; or

27        (v) Person who has been granted an exception of the minimum  
28    requirements of a mental health professional by the department  
29    consistent with rules adopted by the secretary.

30        (b) Training must include chemical dependency training specific  
31    to the duties of a designated crisis responder, including diagnosis  
32    of substance abuse and dependence and assessment of risk associated  
33    with substance use.

34        (3) The department must develop a transition process for any  
35    person who has been designated as a designated mental health  
36    professional or a designated chemical dependency specialist before  
37    April 1, 2017, to be converted to a designated crisis responder. The  
38    behavioral health organizations shall provide training, as required  
39    by the department, to persons converting to designated crisis  
40    responders, which must include both mental health and chemical

1 dependency training applicable to the designated crisis responder  
2 role.

3 NEW SECTION. **Sec. 202.** A new section is added to chapter 71.05  
4 RCW to read as follows:

5 (1) The Washington state institute for public policy shall  
6 evaluate the effect of the integration of the involuntary treatment  
7 systems for substance use disorders and mental health and make  
8 preliminary reports to appropriate committees of the legislature by  
9 December 1, 2019, and June 30, 2020, and a final report by June 30,  
10 2022.

11 (2) The evaluation must include an assessment of whether the  
12 integrated system:

13 (a) Has increased efficiency of evaluation and treatment of  
14 persons involuntarily detained for substance use disorders;

15 (b) Is cost-effective, including impacts on health care, housing,  
16 employment, and criminal justice costs;

17 (c) Results in better outcomes for persons involuntarily  
18 detained;

19 (d) Increases the effectiveness of the crisis response system  
20 statewide;

21 (e) Has an impact on commitments based upon mental disorders;

22 (f) Has been sufficiently resourced with enough involuntary  
23 treatment beds, less restrictive alternative treatment options, and  
24 state funds to provide timely and appropriate treatment for all  
25 individuals interacting with the integrated involuntary treatment  
26 system; and

27 (g) Has diverted from the mental health involuntary treatment  
28 system a significant number of individuals whose risk results from  
29 substance abuse, including an estimate of the net savings from  
30 serving these clients into the appropriate substance abuse treatment  
31 system.

32 (3) This section expires August 1, 2022.

33 **Sec. 203.** RCW 71.05.020 and 2014 c 225 s 79 are each reenacted  
34 and amended to read as follows:

35 The definitions in this section apply throughout this chapter  
36 unless the context clearly requires otherwise.

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

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

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

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

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

16 (6) "Crisis stabilization unit" means a short-term facility or a  
17 portion of a facility licensed by the department of health and  
18 certified by the department of social and health services under RCW  
19 71.24.035, such as an evaluation and treatment facility or a  
20 hospital, which has been designed to assess, diagnose, and treat  
21 individuals experiencing an acute crisis without the use of long-term  
22 hospitalization;

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

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

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

33 ~~(10))~~ (10) "Designated crisis responder" means a mental health  
34 professional appointed by ~~((the county or))~~ the behavioral health  
35 organization to perform the duties specified in this chapter;

36 ~~((11) "Designated mental health professional" means a mental  
37 health professional designated by the county or other authority  
38 authorized in rule to perform the duties specified in this chapter;~~

39 ~~(12))~~ (10) "Detention" or "detain" means the lawful confinement  
40 of a person, under the provisions of this chapter;

1        (~~(13)~~) (11) "Developmental disabilities professional" means a  
2 person who has specialized training and three years of experience in  
3 directly treating or working with persons with developmental  
4 disabilities and is a psychiatrist, psychologist, psychiatric  
5 advanced registered nurse practitioner, or social worker, and such  
6 other developmental disabilities professionals as may be defined by  
7 rules adopted by the secretary;

8        (~~(14)~~) (12) "Developmental disability" means that condition  
9 defined in RCW 71A.10.020(~~(4)~~) (5);

10       (~~(15)~~) (13) "Discharge" means the termination of hospital  
11 medical authority. The commitment may remain in place, be terminated,  
12 or be amended by court order;

13       (~~(16)~~) (14) "Evaluation and treatment facility" means any  
14 facility which can provide directly, or by direct arrangement with  
15 other public or private agencies, emergency evaluation and treatment,  
16 outpatient care, and timely and appropriate inpatient care to persons  
17 suffering from a mental disorder, and which is certified as such by  
18 the department. A physically separate and separately operated portion  
19 of a state hospital may be designated as an evaluation and treatment  
20 facility. A facility which is part of, or operated by, the department  
21 or any federal agency will not require certification. No correctional  
22 institution or facility, or jail, shall be an evaluation and  
23 treatment facility within the meaning of this chapter;

24       (~~(17)~~) (15) "Gravely disabled" means a condition in which a  
25 person, as a result of a mental disorder, or as a result of the use  
26 of alcohol or other psychoactive chemicals: (a) Is in danger of  
27 serious physical harm resulting from a failure to provide for his or  
28 her essential human needs of health or safety; or (b) manifests  
29 severe deterioration in routine functioning evidenced by repeated and  
30 escalating loss of cognitive or volitional control over his or her  
31 actions and is not receiving such care as is essential for his or her  
32 health or safety;

33       (~~(18)~~) (16) "Habilitative services" means those services  
34 provided by program personnel to assist persons in acquiring and  
35 maintaining life skills and in raising their levels of physical,  
36 mental, social, and vocational functioning. Habilitative services  
37 include education, training for employment, and therapy. The  
38 habilitative process shall be undertaken with recognition of the risk  
39 to the public safety presented by the person being assisted as  
40 manifested by prior charged criminal conduct;

1        ~~((19))~~ (17) "History of one or more violent acts" refers to the  
2 period of time ten years prior to the filing of a petition under this  
3 chapter, excluding any time spent, but not any violent acts  
4 committed, in a mental health facility, a long-term alcoholism or  
5 drug treatment facility, or in confinement as a result of a criminal  
6 conviction;

7        ~~((20))~~ (18) "Imminent" means the state or condition of being  
8 likely to occur at any moment or near at hand, rather than distant or  
9 remote;

10        ~~((21))~~ (19) "Individualized service plan" means a plan prepared  
11 by a developmental disabilities professional with other professionals  
12 as a team, for a person with developmental disabilities, which shall  
13 state:

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

16        (b) The conditions and strategies necessary to achieve the  
17 purposes of habilitation;

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

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

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

23        (f) Where relevant in light of past criminal behavior and due  
24 consideration for public safety, the criteria for proposed movement  
25 to less-restrictive settings, criteria for proposed eventual  
26 discharge or release, and a projected possible date for discharge or  
27 release; and

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

30        ~~((22))~~ (20) "Information related to mental health services"  
31 means all information and records compiled, obtained, or maintained  
32 in the course of providing services to either voluntary or  
33 involuntary recipients of services by a mental health service  
34 provider. This may include documents of legal proceedings under this  
35 chapter or chapter 71.34 or 10.77 RCW, or somatic health care  
36 information;

37        ~~((23))~~ (21) "Judicial commitment" means a commitment by a court  
38 pursuant to the provisions of this chapter;

39        ~~((24))~~ (22) "Legal counsel" means attorneys and staff employed  
40 by county prosecutor offices or the state attorney general acting in

1 their capacity as legal representatives of public mental health and  
2 substance use disorder service providers under RCW 71.05.130;

3 ~~((25))~~ (23) "Likelihood of serious harm" means:

4 (a) A substantial risk that: (i) Physical harm will be inflicted  
5 by a person upon his or her own person, as evidenced by threats or  
6 attempts to commit suicide or inflict physical harm on oneself; (ii)  
7 physical harm will be inflicted by a person upon another, as  
8 evidenced by behavior which has caused such harm or which places  
9 another person or persons in reasonable fear of sustaining such harm;  
10 or (iii) physical harm will be inflicted by a person upon the  
11 property of others, as evidenced by behavior which has caused  
12 substantial loss or damage to the property of others; or

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

15 ~~((26))~~ (24) "Mental disorder" means any organic, mental, or  
16 emotional impairment which has substantial adverse effects on a  
17 person's cognitive or volitional functions;

18 ~~((27))~~ (25) "Mental health professional" means a psychiatrist,  
19 psychologist, psychiatric advanced registered nurse practitioner,  
20 psychiatric nurse, or social worker, and such other mental health  
21 professionals as may be defined by rules adopted by the secretary  
22 pursuant to the provisions of this chapter;

23 ~~((28))~~ (26) "Mental health service provider" means a public or  
24 private agency that provides mental health services to persons with  
25 mental disorders or substance use disorders as defined under this  
26 section and receives funding from public sources. This includes, but  
27 is not limited to, hospitals licensed under chapter 70.41 RCW,  
28 evaluation and treatment facilities as defined in this section,  
29 community mental health service delivery systems or community mental  
30 health programs as defined in RCW 71.24.025, facilities conducting  
31 competency evaluations and restoration under chapter 10.77 RCW,  
32 approved substance use disorder treatment programs as defined in this  
33 section, secure detoxification facilities as defined in this section,  
34 and correctional facilities operated by state and local governments;

35 ~~((29))~~ (27) "Peace officer" means a law enforcement official of  
36 a public agency or governmental unit, and includes persons  
37 specifically given peace officer powers by any state law, local  
38 ordinance, or judicial order of appointment;

39 ~~((30))~~ (28) "Private agency" means any person, partnership,  
40 corporation, or association that is not a public agency, whether or

1 not financed in whole or in part by public funds, which constitutes  
2 an evaluation and treatment facility or private institution, or  
3 hospital, or approved substance use disorder treatment program, which  
4 is conducted for, or includes a department or ward conducted for, the  
5 care and treatment of persons (~~(who are mentally ill)~~) with mental  
6 illness, substance use disorders, or both mental illness and  
7 substance use disorders;

8 ~~((+31))~~ (29) "Professional person" means a mental health  
9 professional or designated crisis responder and shall also mean a  
10 physician, psychiatric advanced registered nurse practitioner,  
11 registered nurse, and such others as may be defined by rules adopted  
12 by the secretary pursuant to the provisions of this chapter;

13 ~~((+32))~~ (30) "Psychiatric advanced registered nurse  
14 practitioner" means a person who is licensed as an advanced  
15 registered nurse practitioner pursuant to chapter 18.79 RCW; and who  
16 is board certified in advanced practice psychiatric and mental health  
17 nursing;

18 ~~((+33))~~ (31) "Psychiatrist" means a person having a license as a  
19 physician and surgeon in this state who has in addition completed  
20 three years of graduate training in psychiatry in a program approved  
21 by the American medical association or the American osteopathic  
22 association and is certified or eligible to be certified by the  
23 American board of psychiatry and neurology;

24 ~~((+34))~~ (32) "Psychologist" means a person who has been licensed  
25 as a psychologist pursuant to chapter 18.83 RCW;

26 ~~((+35))~~ (33) "Public agency" means any evaluation and treatment  
27 facility or institution, secure detoxification facility, approved  
28 substance use disorder treatment program, or hospital which is  
29 conducted for, or includes a department or ward conducted for, the  
30 care and treatment of persons with mental illness, substance use  
31 disorders, or both mental illness and substance use disorders, if the  
32 agency is operated directly by ~~((7))~~ federal, state, county, or  
33 municipal government, or a combination of such governments;

34 ~~((+36))~~ (34) "Registration records" include all the records of  
35 the department, behavioral health organizations, treatment  
36 facilities, and other persons providing services to the department,  
37 county departments, or facilities which identify persons who are  
38 receiving or who at any time have received services for mental  
39 illness or substance use disorders;

1       ~~((37))~~ (35) "Release" means legal termination of the commitment  
2 under the provisions of this chapter;

3       ~~((38))~~ (36) "Resource management services" has the meaning  
4 given in chapter 71.24 RCW;

5       ~~((39))~~ (37) "Secretary" means the secretary of the department  
6 of social and health services, or his or her designee;

7       ~~((40))~~ (38) "Serious violent offense" has the same meaning as  
8 provided in RCW 9.94A.030;

9       ~~((41))~~ (39) "Social worker" means a person with a master's or  
10 further advanced degree from a social work educational program  
11 accredited and approved as provided in RCW 18.320.010;

12       ~~((42))~~ (40) "Therapeutic court personnel" means the staff of a  
13 mental health court or other therapeutic court which has jurisdiction  
14 over defendants who are dually diagnosed with mental disorders,  
15 including court personnel, probation officers, a court monitor,  
16 prosecuting attorney, or defense counsel acting within the scope of  
17 therapeutic court duties;

18       ~~((43))~~ (41) "Treatment records" include registration and all  
19 other records concerning persons who are receiving or who at any time  
20 have received services for mental illness, which are maintained by  
21 the department, by behavioral health organizations and their staffs,  
22 and by treatment facilities. Treatment records include mental health  
23 information contained in a medical bill including but not limited to  
24 mental health drugs, a mental health diagnosis, provider name, and  
25 dates of service stemming from a medical service. Treatment records  
26 do not include notes or records maintained for personal use by a  
27 person providing treatment services for the department, behavioral  
28 health organizations, or a treatment facility if the notes or records  
29 are not available to others;

30       ~~((44))~~ (42) "Triage facility" means a short-term facility or a  
31 portion of a facility licensed by the department of health and  
32 certified by the department of social and health services under RCW  
33 71.24.035, which is designed as a facility to assess and stabilize an  
34 individual or determine the need for involuntary commitment of an  
35 individual, and must meet department of health residential treatment  
36 facility standards. A triage facility may be structured as a  
37 voluntary or involuntary placement facility;

38       ~~((45))~~ (43) "Violent act" means behavior that resulted in  
39 homicide, attempted suicide, nonfatal injuries, or substantial damage  
40 to property;



1       (44) "Alcoholism" means a disease, characterized by a dependency  
2 on alcoholic beverages, loss of control over the amount and  
3 circumstances of use, symptoms of tolerance, physiological or  
4 psychological withdrawal, or both, if use is reduced or discontinued,  
5 and impairment of health or disruption of social or economic  
6 functioning;

7       (45) "Approved substance use disorder treatment program" means a  
8 program for persons with a substance use disorder provided by a  
9 treatment program certified by the department as meeting standards  
10 adopted under chapter 70.96A RCW;

11       (46) "Chemical dependency" means:

12       (a) Alcoholism;

13       (b) Drug addiction; or

14       (c) Dependence on alcohol and one or more psychoactive chemicals,  
15 as the context requires;

16       (47) "Chemical dependency professional" means a person certified  
17 as a chemical dependency professional by the department of health  
18 under chapter 18.205 RCW;

19       (48) "Controlled substance" has the same meaning as under the  
20 federal controlled substances act, 21 U.S.C. Sec. 802;

21       (49) "Drug addiction" means a disease, characterized by a  
22 dependency on psychoactive chemicals, loss of control over the amount  
23 and circumstances of use, symptoms of tolerance, physiological or  
24 psychological withdrawal, or both, if use is reduced or discontinued,  
25 and impairment of health or disruption of social or economic  
26 functioning;

27       (50) "Intoxicated person" means a person whose mental or physical  
28 functioning is substantially impaired as a result of the use of  
29 alcohol or other psychoactive chemicals;

30       (51) "Licensed physician" means a person licensed to practice  
31 medicine or osteopathic medicine and surgery in the state of  
32 Washington;

33       (52) "Physician assistant" means a person who is licensed as a  
34 physician assistant pursuant to chapter 18.57A or 18.71A RCW and is  
35 working with a licensed mental health physician as indicated by their  
36 delegation agreement;

37       (53) "Secure detoxification facility" means a facility operated  
38 by either a public or private agency or by the program of an agency  
39 that:

40       (a) Provides for intoxicated persons:

1 (i) Evaluation and assessment, provided by certified chemical  
2 dependency professionals;

3 (ii) Acute or subacute detoxification services; and

4 (iii) Discharge assistance provided by certified chemical  
5 dependency professionals, including facilitating transitions to  
6 appropriate voluntary or involuntary inpatient services or to less  
7 restrictive alternatives as appropriate for the individual;

8 (b) Includes security measures sufficient to protect the  
9 patients, staff, and community; and

10 (c) Is certified as such by the department;

11 (54) "Substance use disorder" means a cluster of cognitive,  
12 behavioral, and physiological symptoms indicating that an individual  
13 continues using the substance despite significant substance-related  
14 problems. The diagnosis of a substance use disorder is based on a  
15 pathological pattern of behaviors related to the use of the  
16 substances.

17 **Sec. 204.** RCW 71.05.025 and 2014 c 225 s 80 are each amended to  
18 read as follows:

19 The legislature intends that the procedures and services  
20 authorized in this chapter be integrated with those in chapter 71.24  
21 RCW to the maximum extent necessary to assure a continuum of care to  
22 persons with mental illness or who have mental disorders or substance  
23 use disorders, as defined in either or both this chapter and chapter  
24 71.24 RCW. To this end, behavioral health organizations established  
25 in accordance with chapter 71.24 RCW shall institute procedures which  
26 require timely consultation with resource management services by  
27 designated (~~mental health professionals and~~) crisis responders,  
28 evaluation and treatment facilities, secure detoxification  
29 facilities, and approved substance use disorder treatment programs to  
30 assure that determinations to admit, detain, commit, treat,  
31 discharge, or release persons with mental disorders or substance use  
32 disorders under this chapter are made only after appropriate  
33 information regarding such person's treatment history and current  
34 treatment plan has been sought from resource management services.

35 **Sec. 205.** RCW 71.05.026 and 2014 c 225 s 81 are each amended to  
36 read as follows:

37 (1) Except for monetary damage claims which have been reduced to  
38 final judgment by a superior court, this section applies to all

1 claims against the state, state agencies, state officials, or state  
2 employees that exist on or arise after March 29, 2006.

3 (2) Except as expressly provided in contracts entered into  
4 between the department and the behavioral health organizations after  
5 March 29, 2006, the entities identified in subsection (3) of this  
6 section shall have no claim for declaratory relief, injunctive  
7 relief, judicial review under chapter 34.05 RCW, or civil liability  
8 against the state or state agencies for actions or inactions  
9 performed pursuant to the administration of this chapter with regard  
10 to the following: (a) The allocation or payment of federal or state  
11 funds; (b) the use or allocation of state hospital beds; or (c)  
12 financial responsibility for the provision of inpatient mental health  
13 care or inpatient substance use disorder treatment.

14 (3) This section applies to counties, behavioral health  
15 organizations, and entities which contract to provide behavioral  
16 health organization services and their subcontractors, agents, or  
17 employees.

18 **Sec. 206.** RCW 71.05.050 and 2000 c 94 s 3 are each amended to  
19 read as follows:

20 Nothing in this chapter shall be construed to limit the right of  
21 any person to apply voluntarily to any public or private agency or  
22 practitioner for treatment of a mental disorder or substance use  
23 disorder, either by direct application or by referral. Any person  
24 voluntarily admitted for inpatient treatment to any public or private  
25 agency shall be released immediately upon his or her request. Any  
26 person voluntarily admitted for inpatient treatment to any public or  
27 private agency shall orally be advised of the right to immediate  
28 discharge, and further advised of such rights in writing as are  
29 secured to them pursuant to this chapter and their rights of access  
30 to attorneys, courts, and other legal redress. Their condition and  
31 status shall be reviewed at least once each one hundred eighty days  
32 for evaluation as to the need for further treatment or possible  
33 discharge, at which time they shall again be advised of their right  
34 to discharge upon request: PROVIDED HOWEVER, That if the professional  
35 staff of any public or private agency or hospital regards a person  
36 voluntarily admitted who requests discharge as presenting, as a  
37 result of a mental disorder or substance use disorder, an imminent  
38 likelihood of serious harm, or is gravely disabled, they may detain  
39 such person for sufficient time to notify the ((county)) designated

1 ((~~mental health professional~~)) crisis responder of such person's  
2 condition to enable the ((~~county~~)) designated ((~~mental health~~  
3 ~~professional~~)) crisis responder to authorize such person being  
4 further held in custody or transported to an evaluation and treatment  
5 center, secure detoxification facility, or approved substance use  
6 disorder treatment program pursuant to the provisions of this  
7 chapter, which shall in ordinary circumstances be no later than the  
8 next judicial day: PROVIDED FURTHER, That if a person is brought to  
9 the emergency room of a public or private agency or hospital for  
10 observation or treatment, the person refuses voluntary admission, and  
11 the professional staff of the public or private agency or hospital  
12 regard such person as presenting as a result of a mental disorder or  
13 substance use disorder an imminent likelihood of serious harm, or as  
14 presenting an imminent danger because of grave disability, they may  
15 detain such person for sufficient time to notify the ((~~county~~))  
16 designated ((~~mental health professional~~)) crisis responder of such  
17 person's condition to enable the ((~~county~~)) designated ((~~mental~~  
18 ~~health professional~~)) crisis responder to authorize such person being  
19 further held in custody or transported to an evaluation treatment  
20 center, secure detoxification facility, or approved substance use  
21 disorder treatment program pursuant to the conditions in this  
22 chapter, but which time shall be no more than six hours from the time  
23 the professional staff determine that an evaluation by the ((~~county~~))  
24 designated ((~~mental health professional~~)) crisis responder is  
25 necessary.

26 **Sec. 207.** RCW 71.05.120 and 2000 c 94 s 4 are each amended to  
27 read as follows:

28 (1) No officer of a public or private agency, nor the  
29 superintendent, professional person in charge, his or her  
30 professional designee, or attending staff of any such agency, nor any  
31 public official performing functions necessary to the administration  
32 of this chapter, nor peace officer responsible for detaining a person  
33 pursuant to this chapter, nor any ((~~county~~)) designated ((~~mental~~  
34 ~~health professional~~)) crisis responder, nor the state, a unit of  
35 local government, ((~~or~~)) an evaluation and treatment facility, a  
36 secure detoxification facility, or an approved substance use disorder  
37 treatment program shall be civilly or criminally liable for  
38 performing duties pursuant to this chapter with regard to the  
39 decision of whether to admit, discharge, release, administer

1 antipsychotic medications, or detain a person for evaluation and  
2 treatment: PROVIDED, That such duties were performed in good faith  
3 and without gross negligence.

4 (2) This section does not relieve a person from giving the  
5 required notices under RCW 71.05.330(2) or 71.05.340(1)(b), or the  
6 duty to warn or to take reasonable precautions to provide protection  
7 from violent behavior where the patient has communicated an actual  
8 threat of physical violence against a reasonably identifiable victim  
9 or victims. The duty to warn or to take reasonable precautions to  
10 provide protection from violent behavior is discharged if reasonable  
11 efforts are made to communicate the threat to the victim or victims  
12 and to law enforcement personnel.

13 **Sec. 208.** RCW 71.05.132 and 2004 c 166 s 12 are each amended to  
14 read as follows:

15 When any court orders a person to receive treatment under this  
16 chapter, the order shall include a statement that if the person is,  
17 or becomes, subject to supervision by the department of corrections,  
18 the person must notify the treatment provider and the person's mental  
19 health treatment information and substance use disorder treatment  
20 information must be shared with the department of corrections for the  
21 duration of the offender's incarceration and supervision, under RCW  
22 71.05.445. Upon a petition by a person who does not have a history of  
23 one or more violent acts, the court may, for good cause, find that  
24 public safety would not be enhanced by the sharing of this person's  
25 information.

26 **Sec. 209.** RCW 71.05.150 and 2011 c 148 s 5 are each amended to  
27 read as follows:

28 (1) When a designated ((~~mental health professional~~)) crisis  
29 responder receives information alleging that a person, as a result of  
30 a mental disorder, substance use disorder, or both: (i) Presents a  
31 likelihood of serious harm; or (ii) is gravely disabled; the  
32 designated ((~~mental health professional~~)) crisis responder may, after  
33 investigation and evaluation of the specific facts alleged and of the  
34 reliability and credibility of any person providing information to  
35 initiate detention, if satisfied that the allegations are true and  
36 that the person will not voluntarily seek appropriate treatment, file  
37 a petition for initial detention. Before filing the petition, the  
38 designated ((~~mental health professional~~)) crisis responder must

1 personally interview the person, unless the person refuses an  
2 interview, and determine whether the person will voluntarily receive  
3 appropriate evaluation and treatment at an evaluation and treatment  
4 facility, crisis stabilization unit, ~~((~~or~~))~~ triage facility, or  
5 approved substance use disorder treatment program.

6 (2)(a) An order to detain ~~((~~to~~))~~ a person with a mental disorder  
7 to a designated evaluation and treatment facility, or to detain a  
8 person with a substance use disorder to a secure detoxification  
9 facility or approved substance use disorder treatment program, for  
10 not more than a seventy-two-hour evaluation and treatment period may  
11 be issued by a judge of the superior court upon request of a  
12 designated ~~((~~mental health professional~~))~~ crisis responder, subject  
13 to (d) of this subsection, whenever it appears to the satisfaction of  
14 a judge of the superior court:

15 (i) That there is probable cause to support the petition; and

16 (ii) That the person has refused or failed to accept appropriate  
17 evaluation and treatment voluntarily.

18 (b) The petition for initial detention, signed under penalty of  
19 perjury, or sworn telephonic testimony may be considered by the court  
20 in determining whether there are sufficient grounds for issuing the  
21 order.

22 (c) The order shall designate retained counsel or, if counsel is  
23 appointed from a list provided by the court, the name, business  
24 address, and telephone number of the attorney appointed to represent  
25 the person.

26 (d) A court may not issue an order to detain a person to a secure  
27 detoxification facility or approved substance use disorder treatment  
28 program unless there is available space at the facility or program.

29 (3) The designated ~~((~~mental health professional~~))~~ crisis  
30 responder shall then serve or cause to be served on such person, his  
31 or her guardian, and conservator, if any, a copy of the order  
32 together with a notice of rights, and a petition for initial  
33 detention. After service on such person the designated ~~((~~mental~~~~  
34 ~~health professional~~)) crisis responder shall file the return of  
35 service in court and provide copies of all papers in the court file  
36 to the evaluation and treatment facility, secure detoxification  
37 facility, or approved substance use disorder treatment program, and  
38 the designated attorney. The designated ~~((~~mental health~~~~  
39 ~~professional~~)) crisis responder shall notify the court and the  
40 prosecuting attorney that a probable cause hearing will be held

1 within seventy-two hours of the date and time of outpatient  
2 evaluation or admission to the evaluation and treatment facility,  
3 secure detoxification facility, or approved substance use disorder  
4 treatment program. The person shall be permitted to be accompanied by  
5 one or more of his or her relatives, friends, an attorney, a personal  
6 physician, or other professional or religious advisor to the place of  
7 evaluation. An attorney accompanying the person to the place of  
8 evaluation shall be permitted to be present during the admission  
9 evaluation. Any other individual accompanying the person may be  
10 present during the admission evaluation. The facility may exclude the  
11 individual if his or her presence would present a safety risk, delay  
12 the proceedings, or otherwise interfere with the evaluation.

13 (4) The designated (~~mental health professional~~) crisis  
14 responder may notify a peace officer to take such person or cause  
15 such person to be taken into custody and placed in an evaluation and  
16 treatment facility, secure detoxification facility, or approved  
17 substance use disorder treatment program. At the time such person is  
18 taken into custody there shall commence to be served on such person,  
19 his or her guardian, and conservator, if any, a copy of the original  
20 order together with a notice of rights and a petition for initial  
21 detention.

22 **Sec. 210.** RCW 71.05.150 and 2015 c ... s 209 (section 209 of  
23 this act) are each amended to read as follows:

24 (1) When a designated crisis responder receives information  
25 alleging that a person, as a result of a mental disorder, substance  
26 use disorder, or both: (i) Presents a likelihood of serious harm; or  
27 (ii) is gravely disabled; the designated crisis responder may, after  
28 investigation and evaluation of the specific facts alleged and of the  
29 reliability and credibility of any person providing information to  
30 initiate detention, if satisfied that the allegations are true and  
31 that the person will not voluntarily seek appropriate treatment, file  
32 a petition for initial detention. Before filing the petition, the  
33 designated crisis responder must personally interview the person,  
34 unless the person refuses an interview, and determine whether the  
35 person will voluntarily receive appropriate evaluation and treatment  
36 at an evaluation and treatment facility, crisis stabilization unit,  
37 triage facility, or approved substance use disorder treatment  
38 program.

1           (2)(a) An order to detain to a ~~((person with a mental disorder to~~  
2 ~~a))~~ designated evaluation and treatment facility, ~~((or to detain a~~  
3 ~~person with a substance use disorder to a))~~ secure detoxification  
4 facility, or approved substance use disorder treatment program~~((7))~~  
5 for not more than a seventy-two-hour evaluation and treatment period  
6 may be issued by a judge of the superior court upon request of a  
7 designated crisis responder~~((7, subject to ~~(d)~~ of this subsection))~~,  
8 whenever it appears to the satisfaction of a judge of the superior  
9 court:

10           (i) That there is probable cause to support the petition; and

11           (ii) That the person has refused or failed to accept appropriate  
12 evaluation and treatment voluntarily.

13           (b) The petition for initial detention, signed under penalty of  
14 perjury, or sworn telephonic testimony may be considered by the court  
15 in determining whether there are sufficient grounds for issuing the  
16 order.

17           (c) The order shall designate retained counsel or, if counsel is  
18 appointed from a list provided by the court, the name, business  
19 address, and telephone number of the attorney appointed to represent  
20 the person.

21           ~~((d) A court may not issue an order to detain a person to a  
22 secure detoxification facility or approved substance use disorder  
23 treatment program unless there is available space at the facility or  
24 program.))~~

25           (3) The designated crisis responder shall then serve or cause to  
26 be served on such person, his or her guardian, and conservator, if  
27 any, a copy of the order together with a notice of rights, and a  
28 petition for initial detention. After service on such person the  
29 designated crisis responder shall file the return of service in court  
30 and provide copies of all papers in the court file to the evaluation  
31 and treatment facility, secure detoxification facility, or approved  
32 substance use disorder treatment program, and the designated  
33 attorney. The designated crisis responder shall notify the court and  
34 the prosecuting attorney that a probable cause hearing will be held  
35 within seventy-two hours of the date and time of outpatient  
36 evaluation or admission to the evaluation and treatment facility,  
37 secure detoxification facility, or approved substance use disorder  
38 treatment program. The person shall be permitted to be accompanied by  
39 one or more of his or her relatives, friends, an attorney, a personal  
40 physician, or other professional or religious advisor to the place of



1 evaluation. An attorney accompanying the person to the place of  
2 evaluation shall be permitted to be present during the admission  
3 evaluation. Any other individual accompanying the person may be  
4 present during the admission evaluation. The facility may exclude the  
5 individual if his or her presence would present a safety risk, delay  
6 the proceedings, or otherwise interfere with the evaluation.

7 (4) The designated crisis responder may notify a peace officer to  
8 take such person or cause such person to be taken into custody and  
9 placed in an evaluation and treatment facility, secure detoxification  
10 facility, or approved substance use disorder treatment program. At  
11 the time such person is taken into custody there shall commence to be  
12 served on such person, his or her guardian, and conservator, if any,  
13 a copy of the original order together with a notice of rights and a  
14 petition for initial detention.

15 **Sec. 211.** RCW 71.05.153 and 2011 c 305 s 8 and 2011 c 148 s 2  
16 are each reenacted and amended to read as follows:

17 (1) When a designated (~~mental health professional~~) crisis  
18 responder receives information alleging that a person, as the result  
19 of a mental disorder, presents an imminent likelihood of serious  
20 harm, or is in imminent danger because of being gravely disabled,  
21 after investigation and evaluation of the specific facts alleged and  
22 of the reliability and credibility of the person or persons providing  
23 the information if any, the designated (~~mental health professional~~)  
24 crisis responder may take such person, or cause by oral or written  
25 order such person to be taken into emergency custody in an evaluation  
26 and treatment facility for not more than seventy-two hours as  
27 described in RCW 71.05.180.

28 (2) When a designated crisis responder receives information  
29 alleging that a person, as the result of substance use disorder,  
30 presents an imminent likelihood of serious harm, or is in imminent  
31 danger because of being gravely disabled, after investigation and  
32 evaluation of the specific facts alleged and of the reliability and  
33 credibility of the person or persons providing the information if  
34 any, the designated crisis responder may take the person, or cause by  
35 oral or written order the person to be taken, into emergency custody  
36 in a secure detoxification facility or approved substance use  
37 disorder treatment program, if space is available in the facility or  
38 program, for not more than seventy-two hours as described in RCW  
39 71.05.180.

1        (3)(a) Subject to (b) of this subsection, a peace officer may  
2 take or cause such person to be taken into custody and immediately  
3 delivered to a triage facility, crisis stabilization unit, evaluation  
4 and treatment facility, secure detoxification facility, approved  
5 substance use disorder treatment program, or the emergency department  
6 of a local hospital under the following circumstances:

7        ~~((a))~~ (i) Pursuant to subsection (1) or (2) of this section; or  
8        ~~((b))~~ (ii) When he or she has reasonable cause to believe that  
9 such person is suffering from a mental disorder or substance use  
10 disorder and presents an imminent likelihood of serious harm or is in  
11 imminent danger because of being gravely disabled.

12        ~~((3))~~ (b) A peace officer may not deliver a person to a secure  
13 detoxification facility or approved substance use disorder treatment  
14 program unless space is available at the facility or program.

15        (4) Persons delivered to a crisis stabilization unit, evaluation  
16 and treatment facility, emergency department of a local hospital,  
17 ~~((e))~~ trriage facility that has elected to operate as an involuntary  
18 facility, secure detoxification facility, or approved substance use  
19 disorder treatment program by peace officers pursuant to subsection  
20 ~~((2))~~ (3) of this section may be held by the facility for a period  
21 of up to twelve hours.

22        ~~((4))~~ (5) Within three hours of arrival, the person must be  
23 examined by a mental health professional. Within twelve hours of  
24 arrival, the designated ~~((mental health professional))~~ crisis  
25 responder must determine whether the individual meets detention  
26 criteria. If the individual is detained, the designated ~~((mental~~  
27 ~~health professional))~~ crisis responder shall file a petition for  
28 detention or a supplemental petition as appropriate and commence  
29 service on the designated attorney for the detained person. If the  
30 individual is released to the community, the mental health service  
31 provider shall inform the peace officer of the release within a  
32 reasonable period of time after the release if the peace officer has  
33 specifically requested notification and provided contact information  
34 to the provider.

35        **Sec. 212.** RCW 71.05.153 and 2015 c ... s 211 (section 211 of  
36 this act) are each amended to read as follows:

37        (1) When a designated crisis responder receives information  
38 alleging that a person, as the result of a mental disorder, presents  
39 an imminent likelihood of serious harm, or is in imminent danger

1 because of being gravely disabled, after investigation and evaluation  
2 of the specific facts alleged and of the reliability and credibility  
3 of the person or persons providing the information if any, the  
4 designated crisis responder may take such person, or cause by oral or  
5 written order such person to be taken into emergency custody in an  
6 evaluation and treatment facility for not more than seventy-two hours  
7 as described in RCW 71.05.180.

8 (2) When a designated crisis responder receives information  
9 alleging that a person, as the result of substance use disorder,  
10 presents an imminent likelihood of serious harm, or is in imminent  
11 danger because of being gravely disabled, after investigation and  
12 evaluation of the specific facts alleged and of the reliability and  
13 credibility of the person or persons providing the information if  
14 any, the designated crisis responder may take the person, or cause by  
15 oral or written order the person to be taken, into emergency custody  
16 in a secure detoxification facility or approved substance use  
17 disorder treatment program(~~(, if space is available in the facility~~  
18 ~~or program,)~~) for not more than seventy-two hours as described in RCW  
19 71.05.180.

20 (3)(~~(a) Subject to (b) of this subsection,~~) A peace officer may  
21 take or cause such person to be taken into custody and immediately  
22 delivered to a triage facility, crisis stabilization unit, evaluation  
23 and treatment facility, secure detoxification facility, approved  
24 substance use disorder treatment program, or the emergency department  
25 of a local hospital under the following circumstances:

26 ((~~i~~)) (a) Pursuant to subsection (1) or (2) of this section; or  
27 ((~~ii~~)) (b) When he or she has reasonable cause to believe that  
28 such person is suffering from a mental disorder or substance use  
29 disorder and presents an imminent likelihood of serious harm or is in  
30 imminent danger because of being gravely disabled.

31 (~~(b) A peace officer may not deliver a person to a secure~~  
32 ~~detoxification facility or approved substance use disorder treatment~~  
33 ~~program unless space is available at the facility or program.))~~

34 (4) Persons delivered to a crisis stabilization unit, evaluation  
35 and treatment facility, emergency department of a local hospital,  
36 triage facility that has elected to operate as an involuntary  
37 facility, secure detoxification facility, or approved substance use  
38 disorder treatment program by peace officers pursuant to subsection  
39 (3) of this section may be held by the facility for a period of up to  
40 twelve hours.

1 (5) Within three hours of arrival, the person must be examined by  
2 a mental health professional. Within twelve hours of arrival, the  
3 designated crisis responder must determine whether the individual  
4 meets detention criteria. If the individual is detained, the  
5 designated crisis responder shall file a petition for detention or a  
6 supplemental petition as appropriate and commence service on the  
7 designated attorney for the detained person. If the individual is  
8 released to the community, the mental health service provider shall  
9 inform the peace officer of the release within a reasonable period of  
10 time after the release if the peace officer has specifically  
11 requested notification and provided contact information to the  
12 provider.

13 **Sec. 213.** RCW 71.05.154 and 2013 c 334 s 1 are each amended to  
14 read as follows:

15 A designated (~~mental health professional~~) crisis responder  
16 conducting an evaluation of a person under RCW 71.05.150 or 71.05.153  
17 must consult with any examining emergency room physician regarding  
18 the physician's observations and opinions relating to the person's  
19 condition, and whether, in the view of the physician, detention is  
20 appropriate. The designated (~~mental health professional~~) crisis  
21 responder shall take serious consideration of observations and  
22 opinions by examining emergency room physicians in determining  
23 whether detention under this chapter is appropriate. The designated  
24 (~~mental health professional~~) crisis responder must document the  
25 consultation with an examining emergency room physician, including  
26 the physician's observations or opinions regarding whether detention  
27 of the person is appropriate.

28 **Sec. 214.** RCW 71.05.156 and 2013 c 334 s 2 are each amended to  
29 read as follows:

30 A designated (~~mental health professional~~) crisis responder who  
31 conducts an evaluation for imminent likelihood of serious harm or  
32 imminent danger because of being gravely disabled under RCW 71.05.153  
33 must also evaluate the person under RCW 71.05.150 for likelihood of  
34 serious harm or grave disability that does not meet the imminent  
35 standard for emergency detention.

36 **Sec. 215.** RCW 71.05.157 and 2007 c 375 s 9 are each amended to  
37 read as follows:

1 (1) When a designated (~~mental health professional~~) crisis  
2 responder is notified by a jail that a defendant or offender who was  
3 subject to a discharge review under RCW 71.05.232 is to be released  
4 to the community, the designated (~~mental health professional~~)  
5 crisis responder shall evaluate the person within seventy-two hours  
6 of release.

7 (2) When an offender is under court-ordered treatment in the  
8 community and the supervision of the department of corrections, and  
9 the treatment provider becomes aware that the person is in violation  
10 of the terms of the court order, the treatment provider shall notify  
11 the designated (~~mental health professional~~) crisis responder and  
12 the department of corrections of the violation and request an  
13 evaluation for purposes of revocation of the less restrictive  
14 alternative.

15 (3) When a designated (~~mental health professional~~) crisis  
16 responder becomes aware that an offender who is under court-ordered  
17 treatment in the community and the supervision of the department of  
18 corrections is in violation of a treatment order or a condition of  
19 supervision that relates to public safety, or the designated (~~mental~~  
20 ~~health professional~~) crisis responder detains a person under this  
21 chapter, the designated (~~mental health professional~~) crisis  
22 responder shall notify the person's treatment provider and the  
23 department of corrections.

24 (4) When an offender who is confined in a state correctional  
25 facility or is under supervision of the department of corrections in  
26 the community is subject to a petition for involuntary treatment  
27 under this chapter, the petitioner shall notify the department of  
28 corrections and the department of corrections shall provide  
29 documentation of its risk assessment or other concerns to the  
30 petitioner and the court if the department of corrections classified  
31 the offender as a high risk or high needs offender.

32 (5) Nothing in this section creates a duty on any treatment  
33 provider or designated (~~mental health professional~~) crisis  
34 responder to provide offender supervision.

35 (6) No jail or state correctional facility may be considered a  
36 less restrictive alternative to an evaluation and treatment facility,  
37 secure detoxification facility, or approved substance use disorder  
38 treatment program.

1       **Sec. 216.** RCW 71.05.160 and 2007 c 375 s 13 are each amended to  
2 read as follows:

3       Any facility receiving a person pursuant to RCW 71.05.150 or  
4 71.05.153 shall require the designated (~~(mental health professional)~~)  
5 crisis responder to prepare a petition for initial detention stating  
6 the circumstances under which the person's condition was made known  
7 and stating that there is evidence, as a result of his or her  
8 personal observation or investigation, that the actions of the person  
9 for which application is made constitute a likelihood of serious  
10 harm, or that he or she is gravely disabled, and stating the specific  
11 facts known to him or her as a result of his or her personal  
12 observation or investigation, upon which he or she bases the belief  
13 that such person should be detained for the purposes and under the  
14 authority of this chapter.

15       If a person is involuntarily placed in an evaluation and  
16 treatment facility, secure detoxification facility, or approved  
17 substance use disorder treatment program pursuant to RCW 71.05.150 or  
18 71.05.153, on the next judicial day following the initial detention,  
19 the designated (~~(mental health professional)~~) crisis responder shall  
20 file with the court and serve the designated attorney of the detained  
21 person the petition or supplemental petition for initial detention,  
22 proof of service of notice, and a copy of a notice of emergency  
23 detention.

24       **Sec. 217.** RCW 71.05.170 and 2000 c 94 s 5 are each amended to  
25 read as follows:

26       Whenever the (~~(county)~~) designated (~~(mental health professional)~~)  
27 crisis responder petitions for detention of a person whose actions  
28 constitute a likelihood of serious harm, or who is gravely disabled,  
29 the facility providing seventy-two hour evaluation and treatment must  
30 immediately accept on a provisional basis the petition and the  
31 person. The facility shall then evaluate the person's condition and  
32 admit, detain, transfer, or discharge such person in accordance with  
33 RCW 71.05.210. The facility shall notify in writing the court and the  
34 (~~(county)~~) designated (~~(mental health professional)~~) crisis responder  
35 of the date and time of the initial detention of each person  
36 involuntarily detained in order that a probable cause hearing shall  
37 be held no later than seventy-two hours after detention.

38       The duty of a state hospital to accept persons for evaluation and  
39 treatment under this section shall be limited by chapter 71.24 RCW.

1       **Sec. 218.** RCW 71.05.180 and 1997 c 112 s 12 are each amended to  
2 read as follows:

3       If the evaluation and treatment facility, secure detoxification  
4 facility, or approved substance use disorder treatment program admits  
5 the person, it may detain him or her for evaluation and treatment for  
6 a period not to exceed seventy-two hours from the time of acceptance  
7 as set forth in RCW 71.05.170. The computation of such seventy-two  
8 hour period shall exclude Saturdays, Sundays and holidays.

9       **Sec. 219.** RCW 71.05.190 and 2011 c 305 s 3 are each amended to  
10 read as follows:

11       If the person is not approved for admission by a facility  
12 providing seventy-two hour evaluation and treatment, and the  
13 individual has not been arrested, the facility shall furnish  
14 transportation, if not otherwise available, for the person to his or  
15 her place of residence or other appropriate place. If the individual  
16 has been arrested, the evaluation and treatment facility, secure  
17 detoxification facility, or approved substance use disorder treatment  
18 program shall detain the individual for not more than eight hours at  
19 the request of the peace officer. The facility shall make reasonable  
20 attempts to contact the requesting peace officer during this time to  
21 inform the peace officer that the person is not approved for  
22 admission in order to enable a peace officer to return to the  
23 facility and take the individual back into custody.

24       **Sec. 220.** RCW 71.05.195 and 2010 c 208 s 1 are each amended to  
25 read as follows:

26       (1) A civil commitment may be initiated under the procedures  
27 described in RCW 71.05.150 or 71.05.153 for a person who has been  
28 found not guilty by reason of insanity in a state other than  
29 Washington and who has fled from detention, commitment, or  
30 conditional release in that state, on the basis of a request by the  
31 state in which the person was found not guilty by reason of insanity  
32 for the person to be detained and transferred back to the custody or  
33 care of the requesting state. A finding of likelihood of serious harm  
34 or grave disability is not required for a commitment under this  
35 section. The detention may occur at either an evaluation and  
36 treatment facility or a state hospital. The petition for seventy-two  
37 hour detention filed by the designated (~~(mental health professional)~~)  
38 crisis responder must be accompanied by the following documents:

1 (a) A copy of an order for detention, commitment, or conditional  
2 release of the person in a state other than Washington on the basis  
3 of a judgment of not guilty by reason of insanity;

4 (b) A warrant issued by a magistrate in the state in which the  
5 person was found not guilty by reason of insanity indicating that the  
6 person has fled from detention, commitment, or conditional release in  
7 that state and authorizing the detention of the person within the  
8 state in which the person was found not guilty by reason of insanity;

9 (c) A statement from the executive authority of the state in  
10 which the person was found not guilty by reason of insanity  
11 requesting that the person be returned to the requesting state and  
12 agreeing to facilitate the transfer of the person to the requesting  
13 state.

14 (2) The person shall be entitled to a probable cause hearing  
15 within the time limits applicable to other detentions under this  
16 chapter and shall be afforded the rights described in this chapter  
17 including the right to counsel. At the probable cause hearing, the  
18 court shall determine the identity of the person and whether the  
19 other requirements of this section are met. If the court so finds,  
20 the court may order continued detention in a treatment facility for  
21 up to thirty days for the purpose of the transfer of the person to  
22 the custody or care of the requesting state. The court may order a  
23 less restrictive alternative to detention only under conditions which  
24 ensure the person's safe transfer to the custody or care of the  
25 requesting state within thirty days without undue risk to the safety  
26 of the person or others.

27 (3) For the purposes of this section, "not guilty by reason of  
28 insanity" shall be construed to include any provision of law which is  
29 generally equivalent to a finding of criminal insanity within the  
30 state of Washington; and "state" shall be construed to mean any  
31 state, district, or territory of the United States.

32 **Sec. 221.** RCW 71.05.210 and 2009 c 217 s 1 are each amended to  
33 read as follows:

34 Each person involuntarily detained and accepted or admitted at an  
35 evaluation and treatment facility, secure detoxification facility, or  
36 approved substance use disorder treatment program (1) shall, within  
37 twenty-four hours of his or her admission or acceptance at the  
38 facility, be examined and evaluated by (a) a licensed physician who  
39 may be assisted by a physician assistant according to chapter 18.71A



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

22 If, after examination and evaluation, the mental health  
23 professional and licensed physician or psychiatric advanced  
24 registered nurse practitioner determine that the initial needs of the  
25 person, if detained to an evaluation and treatment facility, would be  
26 better served by placement in a (~~chemical dependency~~) substance use  
27 disorder treatment facility, or, if detained to a secure  
28 detoxification facility or approved substance use disorder treatment  
29 program, would be better served in an evaluation and treatment  
30 facility then the person shall be referred to (~~an approved treatment~~  
31 ~~program defined under RCW 70.96A.020~~) the more appropriate  
32 placement; however, a person may only be referred to a secure  
33 detoxification facility or approved substance use disorder treatment  
34 program if space is available in the facility or program.

35 An evaluation and treatment center, secure detoxification  
36 facility, or approved substance use disorder treatment program  
37 admitting or accepting any person pursuant to this chapter whose  
38 physical condition reveals the need for hospitalization shall assure  
39 that such person is transferred to an appropriate hospital for  
40 evaluation or admission for treatment. Notice of such fact shall be

1 given to the court, the designated attorney, and the designated  
2 (~~mental health professional~~) crisis responder and the court shall  
3 order such continuance in proceedings under this chapter as may be  
4 necessary, but in no event may this continuance be more than fourteen  
5 days.

6 **Sec. 222.** RCW 71.05.210 and 2015 c ... s 221 (section 221 of  
7 this act) are each amended to read as follows:

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

35 If, after examination and evaluation, the mental health  
36 professional and licensed physician or psychiatric advanced  
37 registered nurse practitioner determine that the initial needs of the  
38 person, if detained to an evaluation and treatment facility, would be  
39 better served by placement in a substance use disorder treatment

1 facility, or, if detained to a secure detoxification facility or  
2 approved substance use disorder treatment program, would be better  
3 served in an evaluation and treatment facility than the person shall  
4 be referred to the more appropriate placement(~~(; however, a person~~  
5 ~~may only be referred to a secure detoxification facility or approved~~  
6 ~~substance use disorder treatment program if space is available in the~~  
7 ~~facility or program))).~~

8 An evaluation and treatment center, secure detoxification  
9 facility, or approved substance use disorder treatment program  
10 admitting or accepting any person pursuant to this chapter whose  
11 physical condition reveals the need for hospitalization shall assure  
12 that such person is transferred to an appropriate hospital for  
13 evaluation or admission for treatment. Notice of such fact shall be  
14 given to the court, the designated attorney, and the designated  
15 crisis responder and the court shall order such continuance in  
16 proceedings under this chapter as may be necessary, but in no event  
17 may this continuance be more than fourteen days.

18 **Sec. 223.** RCW 71.05.212 and 2010 c 280 s 2 are each amended to  
19 read as follows:

20 (1) Whenever a designated (~~(mental health professional)~~) crisis  
21 responder or professional person is conducting an evaluation under  
22 this chapter, consideration shall include all reasonably available  
23 information from credible witnesses and records regarding:

24 (a) Prior recommendations for evaluation of the need for civil  
25 commitments when the recommendation is made pursuant to an evaluation  
26 conducted under chapter 10.77 RCW;

27 (b) Historical behavior, including history of one or more violent  
28 acts;

29 (c) Prior determinations of incompetency or insanity under  
30 chapter 10.77 RCW; and

31 (d) Prior commitments under this chapter.

32 (2) Credible witnesses may include family members, landlords,  
33 neighbors, or others with significant contact and history of  
34 involvement with the person. If the designated (~~(mental health~~  
35 ~~professional)~~) crisis responder relies upon information from a  
36 credible witness in reaching his or her decision to detain the  
37 individual, then he or she must provide contact information for any  
38 such witness to the prosecutor. The designated (~~(mental health~~  
39 ~~professional)~~) crisis responder or prosecutor shall provide notice of

1 the date, time, and location of the probable cause hearing to such a  
2 witness.

3 (3) Symptoms and behavior of the respondent which standing alone  
4 would not justify civil commitment may support a finding of grave  
5 disability or likelihood of serious harm when:

6 (a) Such symptoms or behavior are closely associated with  
7 symptoms or behavior which preceded and led to a past incident of  
8 involuntary hospitalization, severe deterioration, or one or more  
9 violent acts;

10 (b) These symptoms or behavior represent a marked and concerning  
11 change in the baseline behavior of the respondent; and

12 (c) Without treatment, the continued deterioration of the  
13 respondent is probable.

14 (4) When conducting an evaluation for offenders identified under  
15 RCW 72.09.370, the designated (~~mental health professional~~) crisis  
16 responder or professional person shall consider an offender's history  
17 of judicially required or administratively ordered antipsychotic  
18 medication while in confinement.

19 **Sec. 224.** RCW 71.05.214 and 1998 c 297 s 26 are each amended to  
20 read as follows:

21 The department shall develop statewide protocols to be utilized  
22 by professional persons and (~~county~~) designated (~~mental health~~  
23 ~~professionals~~) crisis responders in administration of this chapter  
24 and chapter 10.77 RCW. The protocols shall be updated at least every  
25 three years. The protocols shall provide uniform development and  
26 application of criteria in evaluation and commitment recommendations,  
27 of persons who have, or are alleged to have, mental disorders or  
28 substance use disorders and are subject to this chapter.

29 The initial protocols shall be developed not later than September  
30 1, 1999. The department shall develop and update the protocols in  
31 consultation with representatives of (~~county~~) designated (~~mental~~  
32 ~~health professionals~~) crisis responders, local government, law  
33 enforcement, county and city prosecutors, public defenders, and  
34 groups concerned with mental illness and substance use disorders. The  
35 protocols shall be submitted to the governor and legislature upon  
36 adoption by the department.

37 **Sec. 225.** RCW 71.05.215 and 2008 c 156 s 2 are each amended to  
38 read as follows:

1 (1) A person found to be gravely disabled or presents a  
2 likelihood of serious harm as a result of a mental disorder or  
3 substance use disorder has a right to refuse antipsychotic medication  
4 unless it is determined that the failure to medicate may result in a  
5 likelihood of serious harm or substantial deterioration or  
6 substantially prolong the length of involuntary commitment and there  
7 is no less intrusive course of treatment than medication in the best  
8 interest of that person.

9 (2) The department shall adopt rules to carry out the purposes of  
10 this chapter. These rules shall include:

11 (a) An attempt to obtain the informed consent of the person prior  
12 to administration of antipsychotic medication.

13 (b) For short-term treatment up to thirty days, the right to  
14 refuse antipsychotic medications unless there is an additional  
15 concurring medical opinion approving medication by a psychiatrist,  
16 psychiatric advanced registered nurse practitioner, or physician in  
17 consultation with a mental health professional with prescriptive  
18 authority.

19 (c) For continued treatment beyond thirty days through the  
20 hearing on any petition filed under RCW 71.05.217, the right to  
21 periodic review of the decision to medicate by the medical director  
22 or designee.

23 (d) Administration of antipsychotic medication in an emergency  
24 and review of this decision within twenty-four hours. An emergency  
25 exists if the person presents an imminent likelihood of serious harm,  
26 and medically acceptable alternatives to administration of  
27 antipsychotic medications are not available or are unlikely to be  
28 successful; and in the opinion of the physician or psychiatric  
29 advanced registered nurse practitioner, the person's condition  
30 constitutes an emergency requiring the treatment be instituted prior  
31 to obtaining a second medical opinion.

32 (e) Documentation in the medical record of the attempt by the  
33 physician or psychiatric advanced registered nurse practitioner to  
34 obtain informed consent and the reasons why antipsychotic medication  
35 is being administered over the person's objection or lack of consent.

36 **Sec. 226.** RCW 71.05.220 and 1997 c 112 s 17 are each amended to  
37 read as follows:

38 At the time a person is involuntarily admitted to an evaluation  
39 and treatment facility, secure detoxification facility, or approved

1 substance use disorder treatment program, the professional person in  
2 charge or his or her designee shall take reasonable precautions to  
3 inventory and safeguard the personal property of the person detained.  
4 A copy of the inventory, signed by the staff member making it, shall  
5 be given to the person detained and shall, in addition, be open to  
6 inspection to any responsible relative, subject to limitations, if  
7 any, specifically imposed by the detained person. For purposes of  
8 this section, "responsible relative" includes the guardian,  
9 conservator, attorney, spouse, parent, adult child, or adult brother  
10 or sister of the person. The facility shall not disclose the contents  
11 of the inventory to any other person without the consent of the  
12 patient or order of the court.

13 **Sec. 227.** RCW 71.05.230 and 2011 c 343 s 9 are each amended to  
14 read as follows:

15 A person detained for seventy-two hour evaluation and treatment  
16 may be detained for not more than fourteen additional days of  
17 involuntary intensive treatment or ninety additional days of a less  
18 restrictive alternative to involuntary intensive treatment. A  
19 petition may only be filed if the following conditions are met:

20 (1) The professional staff of the agency or facility providing  
21 evaluation services has analyzed the person's condition and finds  
22 that the condition is caused by mental disorder or substance use  
23 disorder and either results in a likelihood of serious harm, or  
24 results in the detained person being gravely disabled and are  
25 prepared to testify those conditions are met; and

26 (2) The person has been advised of the need for voluntary  
27 treatment and the professional staff of the facility has evidence  
28 that he or she has not in good faith volunteered; and

29 (3) The facility providing intensive treatment is certified to  
30 provide such treatment by the department; and

31 (4) The professional staff of the agency or facility or the  
32 designated (~~mental health professional~~) crisis responder has filed  
33 a petition for fourteen day involuntary detention or a ninety day  
34 less restrictive alternative with the court. The petition must be  
35 signed either by:

36 (a) Two physicians;

37 (b) One physician and a mental health professional;

38 (c) Two psychiatric advanced registered nurse practitioners;

39 (d) Two physician assistants;

1        (e) One mental health professional and either a psychiatric  
2 advanced registered nurse practitioner (~~and a mental health~~  
3 ~~professional~~) or a physician assistant; or

4        (~~(e) A~~) (f) One physician and either a psychiatric advanced  
5 registered nurse practitioner or physician assistant. The persons  
6 signing the petition must have examined the person. If involuntary  
7 detention is sought the petition shall state facts that support the  
8 finding that such person, as a result of a mental disorder or  
9 substance use disorder, presents a likelihood of serious harm, or is  
10 gravely disabled and that there are no less restrictive alternatives  
11 to detention in the best interest of such person or others. The  
12 petition shall state specifically that less restrictive alternative  
13 treatment was considered and specify why treatment less restrictive  
14 than detention is not appropriate. If an involuntary less restrictive  
15 alternative is sought, the petition shall state facts that support  
16 the finding that such person, as a result of a mental disorder or as  
17 a result of a substance use disorder, presents a likelihood of  
18 serious harm, or is gravely disabled and shall set forth the less  
19 restrictive alternative proposed by the facility; and

20        (5) A copy of the petition has been served on the detained  
21 person, his or her attorney and his or her guardian or conservator,  
22 if any, prior to the probable cause hearing; and

23        (6) The court at the time the petition was filed and before the  
24 probable cause hearing has appointed counsel to represent such person  
25 if no other counsel has appeared; and

26        (7) The petition reflects that the person was informed of the  
27 loss of firearm rights if involuntarily committed for mental health  
28 treatment or treatment of a substance use disorder that is based on  
29 use of a controlled substance; and

30        (8) At the conclusion of the initial commitment period, the  
31 professional staff of the agency or facility or the designated  
32 (~~mental health professional~~) crisis responder may petition for an  
33 additional period of either ninety days of less restrictive  
34 alternative treatment or ninety days of involuntary intensive  
35 treatment as provided in RCW 71.05.290; and

36        (9) If the hospital or facility designated to provide outpatient  
37 treatment is other than the facility providing involuntary treatment,  
38 the outpatient facility so designated has agreed to assume such  
39 responsibility.

1       **Sec. 228.** RCW 71.05.235 and 2008 c 213 s 5 are each amended to  
2 read as follows:

3       (1) If an individual is referred to a designated (~~mental health~~  
4 ~~professional~~) crisis responder under RCW 10.77.088(1)(b)(i), the  
5 designated (~~mental health professional~~) crisis responder shall  
6 examine the individual within forty-eight hours. If the designated  
7 (~~mental health professional~~) crisis responder determines it is not  
8 appropriate to detain the individual or petition for a ninety-day  
9 less restrictive alternative under RCW 71.05.230(4), that decision  
10 shall be immediately presented to the superior court for hearing. The  
11 court shall hold a hearing to consider the decision of the designated  
12 (~~mental health professional~~) crisis responder not later than the  
13 next judicial day. At the hearing the superior court shall review the  
14 determination of the designated (~~mental health professional~~) crisis  
15 responder and determine whether an order should be entered requiring  
16 the person to be evaluated at an evaluation and treatment facility.  
17 No person referred to an evaluation and treatment facility may be  
18 held at the facility longer than seventy-two hours.

19       (2) If an individual is placed in an evaluation and treatment  
20 facility under RCW 10.77.088(1)(b)(ii), a professional person shall  
21 evaluate the individual for purposes of determining whether to file a  
22 ninety-day inpatient or outpatient petition under chapter 71.05 RCW.  
23 Before expiration of the seventy-two hour evaluation period  
24 authorized under RCW 10.77.088(1)(b)(ii), the professional person  
25 shall file a petition or, if the recommendation of the professional  
26 person is to release the individual, present his or her  
27 recommendation to the superior court of the county in which the  
28 criminal charge was dismissed. The superior court shall review the  
29 recommendation not later than forty-eight hours, excluding Saturdays,  
30 Sundays, and holidays, after the recommendation is presented. If the  
31 court rejects the recommendation to unconditionally release the  
32 individual, the court may order the individual detained at a  
33 designated evaluation and treatment facility for not more than a  
34 seventy-two hour evaluation and treatment period and direct the  
35 individual to appear at a surety hearing before that court within  
36 seventy-two hours, or the court may release the individual but direct  
37 the individual to appear at a surety hearing set before that court  
38 within eleven days, at which time the prosecutor may file a petition  
39 under this chapter for ninety-day inpatient or outpatient treatment.  
40 If a petition is filed by the prosecutor, the court may order that



1 the person named in the petition be detained at the evaluation and  
2 treatment facility that performed the evaluation under this  
3 subsection or order the respondent to be in outpatient treatment. If  
4 a petition is filed but the individual fails to appear in court for  
5 the surety hearing, the court shall order that a mental health  
6 professional or peace officer shall take such person or cause such  
7 person to be taken into custody and placed in an evaluation and  
8 treatment facility to be brought before the court the next judicial  
9 day after detention. Upon the individual's first appearance in court  
10 after a petition has been filed, proceedings under RCW 71.05.310 and  
11 71.05.320 shall commence. For an individual subject to this  
12 subsection, the prosecutor or professional person may directly file a  
13 petition for ninety-day inpatient or outpatient treatment and no  
14 petition for initial detention or fourteen-day detention is required  
15 before such a petition may be filed.

16 The court shall conduct the hearing on the petition filed under  
17 this subsection within five judicial days of the date the petition is  
18 filed. The court may continue the hearing upon the written request of  
19 the person named in the petition or the person's attorney, for good  
20 cause shown, which continuance shall not exceed five additional  
21 judicial days. If the person named in the petition requests a jury  
22 trial, the trial shall commence within ten judicial days of the date  
23 of the filing of the petition. The burden of proof shall be by clear,  
24 cogent, and convincing evidence and shall be upon the petitioner. The  
25 person shall be present at such proceeding, which shall in all  
26 respects accord with the constitutional guarantees of due process of  
27 law and the rules of evidence pursuant to RCW 71.05.360 (8) and (9).

28 During the proceeding the person named in the petition shall  
29 continue to be detained and treated until released by order of the  
30 court. If no order has been made within thirty days after the filing  
31 of the petition, not including any extensions of time requested by  
32 the detained person or his or her attorney, the detained person shall  
33 be released.

34 (3) If a designated (~~(mental health professional)~~) crisis  
35 responder or the professional person and prosecuting attorney for the  
36 county in which the criminal charge was dismissed or attorney  
37 general, as appropriate, stipulate that the individual does not  
38 present a likelihood of serious harm or is not gravely disabled, the  
39 hearing under this section is not required and the individual, if in  
40 custody, shall be released.

1 (4) The individual shall have the rights specified in RCW  
2 71.05.360 (8) and (9).

3 **Sec. 229.** RCW 71.05.240 and 2009 c 293 s 4 are each amended to  
4 read as follows:

5 (1) If a petition is filed for fourteen day involuntary treatment  
6 or ninety days of less restrictive alternative treatment, the court  
7 shall hold a probable cause hearing within seventy-two hours of the  
8 initial detention of such person as determined in RCW 71.05.180. If  
9 requested by the detained person or his or her attorney, the hearing  
10 may be postponed for a period not to exceed forty-eight hours. The  
11 hearing may also be continued subject to the conditions set forth in  
12 RCW 71.05.210 or subject to the petitioner's showing of good cause  
13 for a period not to exceed twenty-four hours.

14 (2) If the petition is for mental health treatment or for  
15 treatment of a substance use disorder that is based on use of a  
16 controlled substance, the court at the time of the probable cause  
17 hearing and before an order of commitment is entered shall inform the  
18 person both orally and in writing that the failure to make a good  
19 faith effort to seek voluntary treatment as provided in RCW 71.05.230  
20 will result in the loss of his or her firearm rights if the person is  
21 subsequently detained for involuntary treatment under this section.

22 (3)(a) Subject to (b) of this subsection, at the conclusion of  
23 the probable cause hearing, if the court finds by a preponderance of  
24 the evidence that such person, as the result of a mental disorder or  
25 a substance use disorder, presents a likelihood of serious harm, or  
26 is gravely disabled, and, after considering less restrictive  
27 alternatives to involuntary detention and treatment, finds that no  
28 such alternatives are in the best interests of such person or others,  
29 the court shall order that such person be detained for involuntary  
30 treatment not to exceed fourteen days in a facility certified to  
31 provide treatment by the department.

32 (b) Commitment for up to fourteen days based on a substance use  
33 disorder must be to either a secure detoxification facility or an  
34 approved substance use disorder treatment program. A court may only  
35 commit a person to a secure detoxification facility or approved  
36 substance use disorder treatment program if space is available at the  
37 facility or program.

38 (c) At the conclusion of the probable cause hearing, if the court  
39 finds by a preponderance of the evidence that such person, as the

1 result of a mental disorder or substance use disorder, presents a  
2 likelihood of serious harm, or is gravely disabled, but that  
3 treatment in a less restrictive setting than detention is in the best  
4 interest of such person or others, the court shall order an  
5 appropriate less restrictive course of treatment for not to exceed  
6 ninety days.

7 (4) The court shall specifically state to such person and give  
8 such person notice in writing that if involuntary treatment beyond  
9 the fourteen day period or beyond the ninety days of less restrictive  
10 treatment is to be sought, such person will have the right to a full  
11 hearing or jury trial as required by RCW 71.05.310. If the commitment  
12 is for mental health treatment or for treatment of a substance use  
13 disorder that is based on use of a controlled substance, the court  
14 shall also state to the person and provide written notice that the  
15 person is barred from the possession of firearms and that the  
16 prohibition remains in effect until a court restores his or her right  
17 to possess a firearm under RCW 9.41.047.

18 **Sec. 230.** RCW 71.05.240 and 2015 c ... s 229 (section 229 of  
19 this act) are each amended to read as follows:

20 (1) If a petition is filed for fourteen day involuntary treatment  
21 or ninety days of less restrictive alternative treatment, the court  
22 shall hold a probable cause hearing within seventy-two hours of the  
23 initial detention of such person as determined in RCW 71.05.180. If  
24 requested by the detained person or his or her attorney, the hearing  
25 may be postponed for a period not to exceed forty-eight hours. The  
26 hearing may also be continued subject to the conditions set forth in  
27 RCW 71.05.210 or subject to the petitioner's showing of good cause  
28 for a period not to exceed twenty-four hours.

29 (2) If the petition is for mental health treatment or for  
30 treatment of a substance use disorder that is based on use of a  
31 controlled substance, the court at the time of the probable cause  
32 hearing and before an order of commitment is entered shall inform the  
33 person both orally and in writing that the failure to make a good  
34 faith effort to seek voluntary treatment as provided in RCW 71.05.230  
35 will result in the loss of his or her firearm rights if the person is  
36 subsequently detained for involuntary treatment under this section.

37 (3) ~~((a) Subject to (b) of this subsection,~~) At the conclusion  
38 of the probable cause hearing, if the court finds by a preponderance  
39 of the evidence that such person, as the result of a mental disorder

1 or a substance use disorder, presents a likelihood of serious harm,  
2 or is gravely disabled, and, after considering less restrictive  
3 alternatives to involuntary detention and treatment, finds that no  
4 such alternatives are in the best interests of such person or others,  
5 the court shall order that such person be detained for involuntary  
6 treatment not to exceed fourteen days in a facility certified to  
7 provide treatment by the department.

8 ~~((b))~~ Commitment for up to fourteen days based on a substance  
9 use disorder must be to either a secure detoxification facility or an  
10 approved substance use disorder treatment program. ~~((A court may only  
11 commit a person to a secure detoxification facility or approved  
12 substance use disorder treatment program if space is available at the  
13 facility or program.~~

14 ~~(c) At the conclusion of the probable cause hearing,)~~ If the  
15 court finds ~~((by a preponderance of the evidence))~~ that such person,  
16 as the result of a mental disorder or substance use disorder,  
17 presents a likelihood of serious harm, or is gravely disabled, but  
18 that treatment in a less restrictive setting than detention is in the  
19 best interest of such person or others, the court shall order an  
20 appropriate less restrictive course of treatment for not to exceed  
21 ninety days.

22 (4) The court shall specifically state to such person and give  
23 such person notice in writing that if involuntary treatment beyond  
24 the fourteen day period or beyond the ninety days of less restrictive  
25 treatment is to be sought, such person will have the right to a full  
26 hearing or jury trial as required by RCW 71.05.310. If the commitment  
27 is for mental health treatment or for treatment of a substance use  
28 disorder that is based on use of a controlled substance, the court  
29 shall also state to the person and provide written notice that the  
30 person is barred from the possession of firearms and that the  
31 prohibition remains in effect until a court restores his or her right  
32 to possess a firearm under RCW 9.41.047.

33 **Sec. 231.** RCW 71.05.280 and 2013 c 289 s 4 are each amended to  
34 read as follows:

35 At the expiration of the fourteen-day period of intensive  
36 treatment, a person may be confined for further treatment pursuant to  
37 RCW 71.05.320 if:

38 (1) Such person after having been taken into custody for  
39 evaluation and treatment has threatened, attempted, or inflicted: (a)

1 Physical harm upon the person of another or himself or herself, or  
2 substantial damage upon the property of another, and (b) as a result  
3 of mental disorder or substance use disorder presents a likelihood of  
4 serious harm; or

5 (2) Such person was taken into custody as a result of conduct in  
6 which he or she attempted or inflicted physical harm upon the person  
7 of another or himself or herself, or substantial damage upon the  
8 property of others, and continues to present, as a result of mental  
9 disorder or substance use disorder, a likelihood of serious harm; or

10 (3) Such person has been determined to be incompetent and  
11 criminal charges have been dismissed pursuant to RCW 10.77.086(4),  
12 and has committed acts constituting a felony, and as a result of a  
13 mental disorder, presents a substantial likelihood of repeating  
14 similar acts.

15 (a) In any proceeding pursuant to this subsection it shall not be  
16 necessary to show intent, willfulness, or state of mind as an element  
17 of the crime;

18 (b) For any person subject to commitment under this subsection  
19 where the charge underlying the finding of incompetence is for a  
20 felony classified as violent under RCW 9.94A.030, the court shall  
21 determine whether the acts the person committed constitute a violent  
22 offense under RCW 9.94A.030; or

23 (4) Such person is gravely disabled.

24 **Sec. 232.** RCW 71.05.290 and 2009 c 217 s 3 are each amended to  
25 read as follows:

26 (1) At any time during a person's fourteen day intensive  
27 treatment period, the professional person in charge of a treatment  
28 facility or his or her professional designee or the designated  
29 (~~mental health professional~~) crisis responder may petition the  
30 superior court for an order requiring such person to undergo an  
31 additional period of treatment. Such petition must be based on one or  
32 more of the grounds set forth in RCW 71.05.280.

33 (2) The petition shall summarize the facts which support the need  
34 for further confinement and shall be supported by affidavits signed  
35 by:

36 (a) Two examining physicians;

37 (b) One examining physician and an examining mental health  
38 professional;

1 (c) Two examining psychiatric advanced registered nurse  
2 practitioners;

3 (d) Two examining physician assistants;

4 (e) One examining mental health professional and either an  
5 examining psychiatric advanced registered nurse practitioner (~~and a~~  
6 ~~mental health professional~~) or an examining physician assistant; or

7 (~~(e) An~~) (f) One examining physician and either an examining  
8 psychiatric advanced registered nurse practitioner or an examining  
9 physician assistant. The affidavits shall describe in detail the  
10 behavior of the detained person which supports the petition and shall  
11 explain what, if any, less restrictive treatments which are  
12 alternatives to detention are available to such person, and shall  
13 state the willingness of the affiant to testify to such facts in  
14 subsequent judicial proceedings under this chapter.

15 (3) If a person has been determined to be incompetent pursuant to  
16 RCW 10.77.086(4), then the professional person in charge of the  
17 treatment facility or his or her professional designee or the  
18 designated (~~mental health professional~~) crisis responder may  
19 directly file a petition for one hundred eighty day treatment under  
20 RCW 71.05.280(3). No petition for initial detention or fourteen day  
21 detention is required before such a petition may be filed.

22 **Sec. 233.** RCW 71.05.300 and 2014 c 225 s 84 are each amended to  
23 read as follows:

24 (1) The petition for ninety day treatment shall be filed with the  
25 clerk of the superior court at least three days before expiration of  
26 the fourteen-day period of intensive treatment. At the time of filing  
27 such petition, the clerk shall set a time for the person to come  
28 before the court on the next judicial day after the day of filing  
29 unless such appearance is waived by the person's attorney, and the  
30 clerk shall notify the designated (~~mental health professional~~)  
31 crisis responder. The designated (~~mental health professional~~)  
32 crisis responder shall immediately notify the person detained, his or  
33 her attorney, if any, and his or her guardian or conservator, if any,  
34 the prosecuting attorney, and the behavioral health organization  
35 administrator, and provide a copy of the petition to such persons as  
36 soon as possible. The behavioral health organization administrator or  
37 designee may review the petition and may appear and testify at the  
38 full hearing on the petition.

1 (2) At the time set for appearance the detained person shall be  
2 brought before the court, unless such appearance has been waived and  
3 the court shall advise him or her of his or her right to be  
4 represented by an attorney, his or her right to a jury trial, and, if  
5 the petition is for commitment for mental health treatment or for  
6 treatment of a substance use disorder that is based on use of a  
7 controlled substance, his or her loss of firearm rights if  
8 involuntarily committed. If the detained person is not represented by  
9 an attorney, or is indigent or is unwilling to retain an attorney,  
10 the court shall immediately appoint an attorney to represent him or  
11 her. The court shall, if requested, appoint a reasonably available  
12 licensed physician, psychiatric advanced registered nurse  
13 practitioner, physician assistant, psychologist, or psychiatrist,  
14 designated by the detained person to examine and testify on behalf of  
15 the detained person.

16 (3) The court may, if requested, also appoint a professional  
17 person as defined in RCW 71.05.020 to seek less restrictive  
18 alternative courses of treatment and to testify on behalf of the  
19 detained person. In the case of a person with a developmental  
20 disability who has been determined to be incompetent pursuant to RCW  
21 10.77.086(4), then the appointed professional person under this  
22 section shall be a developmental disabilities professional.

23 (4) The court shall also set a date for a full hearing on the  
24 petition as provided in RCW 71.05.310.

25 **Sec. 234.** RCW 71.05.320 and 2013 c 289 s 5 are each amended to  
26 read as follows:

27 (1)(a) Subject to (b) of this subsection, if the court or jury  
28 finds that grounds set forth in RCW 71.05.280 have been proven and  
29 that the best interests of the person or others will not be served by  
30 a less restrictive treatment which is an alternative to detention,  
31 the court shall remand him or her to the custody of the department or  
32 to a facility certified for ninety day treatment by the department  
33 for a further period of intensive treatment not to exceed ninety days  
34 from the date of judgment.

35 (b) If the order for inpatient treatment is based on substance  
36 use disorder, treatment must take place at an approved substance use  
37 disorder treatment program. The court may only order the person's  
38 commitment to an approved substance use disorder treatment program if  
39 there is space available at the program.

1       (c) If the grounds set forth in RCW 71.05.280(3) are the basis of  
2 commitment, then the period of treatment may be up to but not exceed  
3 one hundred eighty days from the date of judgment in a facility  
4 certified for one hundred eighty day treatment by the department.

5       (2) If the court or jury finds that grounds set forth in RCW  
6 71.05.280 have been proven, but finds that treatment less restrictive  
7 than detention will be in the best interest of the person or others,  
8 then the court shall remand him or her to the custody of the  
9 department or to a facility certified for ninety day treatment by the  
10 department or to a less restrictive alternative for a further period  
11 of less restrictive treatment not to exceed ninety days from the date  
12 of judgment. If the order for less restrictive treatment is based on  
13 substance use disorder, treatment must be provided by an approved  
14 substance use disorder treatment program. If the grounds set forth in  
15 RCW 71.05.280(3) are the basis of commitment, then the period of  
16 treatment may be up to but not exceed one hundred eighty days from  
17 the date of judgment.

18       (3) The person shall be released from involuntary treatment at  
19 the expiration of the period of commitment imposed under subsection  
20 (1) or (2) of this section unless the superintendent or professional  
21 person in charge of the facility in which he or she is confined, or  
22 in the event of a less restrictive alternative, the designated  
23 (~~mental health professional~~) crisis responder, files a new petition  
24 for involuntary treatment on the grounds that the committed person:

25       (a) During the current period of court ordered treatment: (i) Has  
26 threatened, attempted, or inflicted physical harm upon the person of  
27 another, or substantial damage upon the property of another, and (ii)  
28 as a result of a mental disorder, substance use disorder, or  
29 developmental disability presents a likelihood of serious harm; or

30       (b) Was taken into custody as a result of conduct in which he or  
31 she attempted or inflicted serious physical harm upon the person of  
32 another, and continues to present, as a result of mental disorder,  
33 substance use disorder, or developmental disability a likelihood of  
34 serious harm; or

35       (c)(i) Is in custody pursuant to RCW 71.05.280(3) and as a result  
36 of mental disorder or developmental disability continues to present a  
37 substantial likelihood of repeating acts similar to the charged  
38 criminal behavior, when considering the person's life history,  
39 progress in treatment, and the public safety.



1 (ii) In cases under this subsection where the court has made an  
2 affirmative special finding under RCW 71.05.280(3)(b), the commitment  
3 shall continue for up to an additional one hundred eighty day period  
4 whenever the petition presents prima facie evidence that the person  
5 continues to suffer from a mental disorder or developmental  
6 disability that results in a substantial likelihood of committing  
7 acts similar to the charged criminal behavior, unless the person  
8 presents proof through an admissible expert opinion that the person's  
9 condition has so changed such that the mental disorder or  
10 developmental disability no longer presents a substantial likelihood  
11 of the person committing acts similar to the charged criminal  
12 behavior. The initial or additional commitment period may include  
13 transfer to a specialized program of intensive support and treatment,  
14 which may be initiated prior to or after discharge from the state  
15 hospital; or

16 (d) Continues to be gravely disabled.

17 If the conduct required to be proven in (b) and (c) of this  
18 subsection was found by a judge or jury in a prior trial under this  
19 chapter, it shall not be necessary to prove such conduct again.

20 (4) For a person committed under subsection (2) of this section  
21 who has been remanded to a period of less restrictive treatment, in  
22 addition to the grounds specified in subsection (3) of this section,  
23 the designated (~~mental health professional~~) crisis responder may  
24 file a new petition for continued less restrictive treatment if:

25 (a) The person was previously committed by a court to detention  
26 for involuntary mental health treatment or involuntary substance use  
27 disorder treatment during the thirty-six months that preceded the  
28 person's initial detention date during the current involuntary  
29 commitment cycle, excluding any time spent in a mental health  
30 facility, in long-term alcoholism or drug treatment facility, or in  
31 confinement as a result of a criminal conviction;

32 (b) In view of the person's treatment history or current  
33 behavior, the person is unlikely to voluntarily participate in  
34 outpatient treatment without an order for less restrictive treatment;  
35 and

36 (c) Outpatient treatment that would be provided under a less  
37 restrictive treatment order is necessary to prevent a relapse,  
38 decompensation, or deterioration that is likely to result in the  
39 person presenting a likelihood of serious harm or the person becoming  
40 gravely disabled within a reasonably short period of time.

1 (5) A new petition for involuntary treatment filed under  
2 subsection (3) or (4) of this section shall be filed and heard in the  
3 superior court of the county of the facility which is filing the new  
4 petition for involuntary treatment unless good cause is shown for a  
5 change of venue. The cost of the proceedings shall be borne by the  
6 state.

7 (6) The hearing shall be held as provided in RCW 71.05.310, and  
8 if the court or jury finds that the grounds for additional  
9 confinement as set forth in this section are present, subject to  
10 subsection (1)(b) of this section, the court may order the committed  
11 person returned for an additional period of treatment not to exceed  
12 one hundred eighty days from the date of judgment. At the end of the  
13 one hundred eighty day period of commitment, the committed person  
14 shall be released unless a petition for another one hundred eighty  
15 day period of continued treatment is filed and heard in the same  
16 manner as provided in this section. Successive one hundred eighty day  
17 commitments are permissible on the same grounds and pursuant to the  
18 same procedures as the original one hundred eighty day commitment.  
19 However, a commitment is not permissible under subsection (4) of this  
20 section if thirty-six months have passed since the last date of  
21 discharge from detention for inpatient treatment that preceded the  
22 current less restrictive alternative order, nor shall a commitment  
23 under subsection (4) of this section be permissible if the likelihood  
24 of serious harm in subsection (4)(c) of this section is based solely  
25 on harm to the property of others.

26 (7) No person committed as provided in this section may be  
27 detained unless a valid order of commitment is in effect. No order of  
28 commitment can exceed one hundred eighty days in length.

29 **Sec. 235.** RCW 71.05.320 and 2015 c ... s 234 (section 234 of  
30 this act) are each amended to read as follows:

31 (~~1)((a) Subject to (b) of this subsection,~~) If the court or  
32 jury finds that grounds set forth in RCW 71.05.280 have been proven  
33 and that the best interests of the person or others will not be  
34 served by a less restrictive treatment which is an alternative to  
35 detention, the court shall remand him or her to the custody of the  
36 department or to a facility certified for ninety day treatment by the  
37 department for a further period of intensive treatment not to exceed  
38 ninety days from the date of judgment.

1       (~~(b)~~) If the order for inpatient treatment is based on  
2 substance use disorder, treatment must take place at an approved  
3 substance use disorder treatment program. (~~The court may only order~~  
4 ~~the person's commitment to an approved substance use disorder~~  
5 ~~treatment program if there is space available at the program.~~

6       (e)) If the grounds set forth in RCW 71.05.280(3) are the basis  
7 of commitment, then the period of treatment may be up to but not  
8 exceed one hundred eighty days from the date of judgment in a  
9 facility certified for one hundred eighty day treatment by the  
10 department.

11       (2) If the court or jury finds that grounds set forth in RCW  
12 71.05.280 have been proven, but finds that treatment less restrictive  
13 than detention will be in the best interest of the person or others,  
14 then the court shall remand him or her to the custody of the  
15 department or to a facility certified for ninety day treatment by the  
16 department or to a less restrictive alternative for a further period  
17 of less restrictive treatment not to exceed ninety days from the date  
18 of judgment. If the order for less restrictive treatment is based on  
19 substance use disorder, treatment must be provided by an approved  
20 substance use disorder treatment program. If the grounds set forth in  
21 RCW 71.05.280(3) are the basis of commitment, then the period of  
22 treatment may be up to but not exceed one hundred eighty days from  
23 the date of judgment.

24       (3) The person shall be released from involuntary treatment at  
25 the expiration of the period of commitment imposed under subsection  
26 (1) or (2) of this section unless the superintendent or professional  
27 person in charge of the facility in which he or she is confined, or  
28 in the event of a less restrictive alternative, the designated crisis  
29 responder, files a new petition for involuntary treatment on the  
30 grounds that the committed person:

31       (a) During the current period of court ordered treatment: (i) Has  
32 threatened, attempted, or inflicted physical harm upon the person of  
33 another, or substantial damage upon the property of another, and (ii)  
34 as a result of a mental disorder, substance use disorder, or  
35 developmental disability presents a likelihood of serious harm; or

36       (b) Was taken into custody as a result of conduct in which he or  
37 she attempted or inflicted serious physical harm upon the person of  
38 another, and continues to present, as a result of mental disorder,  
39 substance use disorder, or developmental disability a likelihood of  
40 serious harm; or

1 (c)(i) Is in custody pursuant to RCW 71.05.280(3) and as a result  
2 of mental disorder or developmental disability continues to present a  
3 substantial likelihood of repeating acts similar to the charged  
4 criminal behavior, when considering the person's life history,  
5 progress in treatment, and the public safety.

6 (ii) In cases under this subsection where the court has made an  
7 affirmative special finding under RCW 71.05.280(3)(b), the commitment  
8 shall continue for up to an additional one hundred eighty day period  
9 whenever the petition presents prima facie evidence that the person  
10 continues to suffer from a mental disorder or developmental  
11 disability that results in a substantial likelihood of committing  
12 acts similar to the charged criminal behavior, unless the person  
13 presents proof through an admissible expert opinion that the person's  
14 condition has so changed such that the mental disorder or  
15 developmental disability no longer presents a substantial likelihood  
16 of the person committing acts similar to the charged criminal  
17 behavior. The initial or additional commitment period may include  
18 transfer to a specialized program of intensive support and treatment,  
19 which may be initiated prior to or after discharge from the state  
20 hospital; or

21 (d) Continues to be gravely disabled.

22 If the conduct required to be proven in (b) and (c) of this  
23 subsection was found by a judge or jury in a prior trial under this  
24 chapter, it shall not be necessary to prove such conduct again.

25 (4) For a person committed under subsection (2) of this section  
26 who has been remanded to a period of less restrictive treatment, in  
27 addition to the grounds specified in subsection (3) of this section,  
28 the designated crisis responder may file a new petition for continued  
29 less restrictive treatment if:

30 (a) The person was previously committed by a court to detention  
31 for involuntary mental health treatment or involuntary substance use  
32 disorder treatment during the thirty-six months that preceded the  
33 person's initial detention date during the current involuntary  
34 commitment cycle, excluding any time spent in a mental health  
35 facility, in long-term alcoholism or drug treatment facility, or in  
36 confinement as a result of a criminal conviction;

37 (b) In view of the person's treatment history or current  
38 behavior, the person is unlikely to voluntarily participate in  
39 outpatient treatment without an order for less restrictive treatment;  
40 and

1 (c) Outpatient treatment that would be provided under a less  
2 restrictive treatment order is necessary to prevent a relapse,  
3 decompensation, or deterioration that is likely to result in the  
4 person presenting a likelihood of serious harm or the person becoming  
5 gravely disabled within a reasonably short period of time.

6 (5) A new petition for involuntary treatment filed under  
7 subsection (3) or (4) of this section shall be filed and heard in the  
8 superior court of the county of the facility which is filing the new  
9 petition for involuntary treatment unless good cause is shown for a  
10 change of venue. The cost of the proceedings shall be borne by the  
11 state.

12 (6) The hearing shall be held as provided in RCW 71.05.310, and  
13 if the court or jury finds that the grounds for additional  
14 confinement as set forth in this section are present, (~~subject to~~  
15 ~~subsection (1)(b) of this section,~~) the court may order the  
16 committed person returned for an additional period of treatment not  
17 to exceed one hundred eighty days from the date of judgment. At the  
18 end of the one hundred eighty day period of commitment, the committed  
19 person shall be released unless a petition for another one hundred  
20 eighty day period of continued treatment is filed and heard in the  
21 same manner as provided in this section. Successive one hundred  
22 eighty day commitments are permissible on the same grounds and  
23 pursuant to the same procedures as the original one hundred eighty  
24 day commitment. However, a commitment is not permissible under  
25 subsection (4) of this section if thirty-six months have passed since  
26 the last date of discharge from detention for inpatient treatment  
27 that preceded the current less restrictive alternative order, nor  
28 shall a commitment under subsection (4) of this section be  
29 permissible if the likelihood of serious harm in subsection (4)(c) of  
30 this section is based solely on harm to the property of others.

31 (7) No person committed as provided in this section may be  
32 detained unless a valid order of commitment is in effect. No order of  
33 commitment can exceed one hundred eighty days in length.

34 **Sec. 236.** RCW 71.05.325 and 2000 c 94 s 7 are each amended to  
35 read as follows:

36 (1) Before a person committed under grounds set forth in RCW  
37 71.05.280(3) is released because a new petition for involuntary  
38 treatment has not been filed under RCW 71.05.320(~~(+2)~~) (3), the  
39 superintendent, professional person, or designated (~~mental health~~

1 ~~professional~~) crisis responder responsible for the decision whether  
2 to file a new petition shall in writing notify the prosecuting  
3 attorney of the county in which the criminal charges against the  
4 committed person were dismissed, of the decision not to file a new  
5 petition for involuntary treatment. Notice shall be provided at least  
6 forty-five days before the period of commitment expires.

7 (2)(a) Before a person committed under grounds set forth in RCW  
8 71.05.280(3) is permitted temporarily to leave a treatment facility  
9 pursuant to RCW 71.05.270 for any period of time without constant  
10 accompaniment by facility staff, the superintendent, professional  
11 person in charge of a treatment facility, or his or her professional  
12 designee shall in writing notify the prosecuting attorney of any  
13 county of the person's destination and the prosecuting attorney of  
14 the county in which the criminal charges against the committed person  
15 were dismissed. The notice shall be provided at least forty-five days  
16 before the anticipated leave and shall describe the conditions under  
17 which the leave is to occur.

18 (b) The provisions of RCW 71.05.330(2) apply to proposed leaves,  
19 and either or both prosecuting attorneys receiving notice under this  
20 subsection may petition the court under RCW 71.05.330(2).

21 (3) Nothing in this section shall be construed to authorize  
22 detention of a person unless a valid order of commitment is in  
23 effect.

24 (4) The existence of the notice requirements in this section will  
25 not require any extension of the leave date in the event the leave  
26 plan changes after notification.

27 (5) The notice requirements contained in this section shall not  
28 apply to emergency medical transfers.

29 (6) The notice provisions of this section are in addition to  
30 those provided in RCW 71.05.425.

31 **Sec. 237.** RCW 71.05.340 and 2009 c 322 s 1 are each amended to  
32 read as follows:

33 (1)(a) When, in the opinion of the superintendent or the  
34 professional person in charge of the hospital or facility providing  
35 involuntary treatment, the committed person can be appropriately  
36 served by outpatient treatment prior to or at the expiration of the  
37 period of commitment, then such outpatient care may be required as a  
38 term of conditional release for a period which, when added to the  
39 inpatient treatment period, shall not exceed the period of

1 commitment. If the hospital or facility designated to provide  
2 outpatient treatment is other than the facility providing involuntary  
3 treatment, the outpatient facility so designated must agree in  
4 writing to assume such responsibility. A copy of the terms of  
5 conditional release shall be given to the patient, the designated  
6 (~~mental health professional~~) crisis responder in the county in  
7 which the patient is to receive outpatient treatment, and to the  
8 court of original commitment.

9 (b) Before a person committed under grounds set forth in RCW  
10 71.05.280(3) or 71.05.320(3)(c) is conditionally released under (a)  
11 of this subsection, the superintendent or professional person in  
12 charge of the hospital or facility providing involuntary treatment  
13 shall in writing notify the prosecuting attorney of the county in  
14 which the criminal charges against the committed person were  
15 dismissed, of the decision to conditionally release the person.  
16 Notice and a copy of the terms of conditional release shall be  
17 provided at least thirty days before the person is released from  
18 inpatient care. Within twenty days after receiving notice, the  
19 prosecuting attorney may petition the court in the county that issued  
20 the commitment order to hold a hearing to determine whether the  
21 person may be conditionally released and the terms of the conditional  
22 release. The prosecuting attorney shall provide a copy of the  
23 petition to the superintendent or professional person in charge of  
24 the hospital or facility providing involuntary treatment, the  
25 attorney, if any, and guardian or conservator of the committed  
26 person, and the court of original commitment. If the county in which  
27 the committed person is to receive outpatient treatment is the same  
28 county in which the criminal charges against the committed person  
29 were dismissed, then the court shall, upon the motion of the  
30 prosecuting attorney, transfer the proceeding to the court in that  
31 county. The court shall conduct a hearing on the petition within ten  
32 days of the filing of the petition. The committed person shall have  
33 the same rights with respect to notice, hearing, and counsel as for  
34 an involuntary treatment proceeding, except as set forth in this  
35 subsection and except that there shall be no right to jury trial. The  
36 issue to be determined at the hearing is whether or not the person  
37 may be conditionally released without substantial danger to other  
38 persons, or substantial likelihood of committing criminal acts  
39 jeopardizing public safety or security. If the court disapproves of  
40 the conditional release, it may do so only on the basis of

1 substantial evidence. Pursuant to the determination of the court upon  
2 the hearing, the conditional release of the person shall be approved  
3 by the court on the same or modified conditions or the person shall  
4 be returned for involuntary treatment on an inpatient basis subject  
5 to release at the end of the period for which he or she was  
6 committed, or otherwise in accordance with the provisions of this  
7 chapter.

8 (2) The hospital or facility designated to provide outpatient  
9 care or the secretary may modify the conditions for continued release  
10 when such modification is in the best interest of the person.  
11 Notification of such changes shall be sent to all persons receiving a  
12 copy of the original conditions.

13 (3)(a) If the hospital or facility designated to provide  
14 outpatient care, the designated (~~mental health professional~~) crisis  
15 responder, or the secretary determines that:

16 (i) A conditionally released person is failing to adhere to the  
17 terms and conditions of his or her release;

18 (ii) Substantial deterioration in a conditionally released  
19 person's functioning has occurred;

20 (iii) There is evidence of substantial decompensation with a  
21 reasonable probability that the decompensation can be reversed by  
22 further inpatient treatment; or

23 (iv) The person poses a likelihood of serious harm(~~(-)~~);

24 Upon notification by the hospital or facility designated to  
25 provide outpatient care, or on his or her own motion, the designated  
26 (~~mental health professional~~) crisis responder or the secretary may  
27 order that the conditionally released person be apprehended and taken  
28 into custody and temporarily detained in an evaluation and treatment  
29 facility in or near the county in which he or she is receiving  
30 outpatient treatment if the person is committed for mental health  
31 treatment, or, if the person is committed for substance use disorder  
32 treatment, in a secure detoxification facility or approved substance  
33 use disorder treatment program with available space in or near the  
34 county in which he or she is receiving outpatient treatment. A person  
35 may not be detained to a secure detoxification facility or approved  
36 substance use disorder treatment program unless there is available  
37 space in the facility or program.

38 (b) The hospital or facility designated to provide outpatient  
39 treatment shall notify the secretary or designated (~~mental health~~  
40 ~~professional~~) crisis responder when a conditionally released person



1 fails to adhere to terms and conditions of his or her conditional  
2 release or experiences substantial deterioration in his or her  
3 condition and, as a result, presents an increased likelihood of  
4 serious harm. The designated (~~mental health professional~~) crisis  
5 responder or secretary shall order the person apprehended and  
6 temporarily detained in an evaluation and treatment facility in or  
7 near the county in which he or she is receiving outpatient treatment  
8 if the person is committed for mental health treatment, or, if the  
9 person is committed for substance use disorder treatment, in a secure  
10 detoxification facility or approved substance use disorder treatment  
11 program with available space in or near the county in which he or she  
12 is receiving outpatient treatment. A person may not be detained to a  
13 secure detoxification facility or approved substance use disorder  
14 treatment program unless there is available space in the facility or  
15 program.

16 (c) A person detained under this subsection (3) shall be held  
17 until such time, not exceeding five days, as a hearing can be  
18 scheduled to determine whether or not the person should be returned  
19 to the hospital or facility from which he or she had been  
20 conditionally released. The designated (~~mental health professional~~)  
21 crisis responder or the secretary may modify or rescind such order at  
22 any time prior to commencement of the court hearing.

23 (d) The court that originally ordered commitment shall be  
24 notified within two judicial days of a person's detention under the  
25 provisions of this section, and the designated (~~mental health~~  
26 ~~professional~~) crisis responder or the secretary shall file his or  
27 her petition and order of apprehension and detention with the court  
28 that originally ordered commitment or with the court in the county in  
29 which the person is detained and serve them upon the person detained.  
30 His or her attorney, if any, and his or her guardian or conservator,  
31 if any, shall receive a copy of such papers as soon as possible. Such  
32 person shall have the same rights with respect to notice, hearing,  
33 and counsel as for an involuntary treatment proceeding, except as  
34 specifically set forth in this section and except that there shall be  
35 no right to jury trial. The venue for proceedings regarding a  
36 petition for modification or revocation of an order for conditional  
37 release shall be in the county in which the petition was filed. The  
38 issues to be determined shall be: (i) Whether the conditionally  
39 released person did or did not adhere to the terms and conditions of  
40 his or her conditional release; (ii) that substantial deterioration

1 in the person's functioning has occurred; (iii) there is evidence of  
2 substantial decompensation with a reasonable probability that the  
3 decompensation can be reversed by further inpatient treatment; or  
4 (iv) there is a likelihood of serious harm; and, if any of the  
5 conditions listed in this subsection (3)(d) have occurred, whether  
6 the terms of conditional release should be modified or the person  
7 should be returned to the facility.

8 (e) Pursuant to the determination of the court upon such hearing,  
9 the conditionally released person shall either continue to be  
10 conditionally released on the same or modified conditions or shall be  
11 returned for involuntary treatment on an inpatient basis subject to  
12 release at the end of the period for which he or she was committed  
13 for involuntary treatment, or otherwise in accordance with the  
14 provisions of this chapter. Such hearing may be waived by the person  
15 and his or her counsel and his or her guardian or conservator, if  
16 any, but shall not be waivable unless all such persons agree to  
17 waive, and upon such waiver the person may be returned for  
18 involuntary treatment or continued on conditional release on the same  
19 or modified conditions. A person must not be returned for involuntary  
20 treatment in a secure detoxification facility or approved substance  
21 use disorder treatment program under this subsection unless there is  
22 available space in the facility or program.

23 (4) The proceedings set forth in subsection (3) of this section  
24 may be initiated by the designated (~~mental health professional~~)  
25 crisis responder or the secretary on the same basis set forth therein  
26 without requiring or ordering the apprehension and detention of the  
27 conditionally released person, in which case the court hearing shall  
28 take place in not less than five days from the date of service of the  
29 petition upon the conditionally released person. The petition may be  
30 filed in the court that originally ordered commitment or with the  
31 court in the county in which the person is present. The venue for the  
32 proceedings regarding the petition for modification or revocation of  
33 an order for conditional release shall be in the county in which the  
34 petition was filed.

35 Upon expiration of the period of commitment, or when the person  
36 is released from outpatient care, notice in writing to the court  
37 which committed the person for treatment shall be provided.

38 (5) The grounds and procedures for revocation of less restrictive  
39 alternative treatment shall be the same as those set forth in this  
40 section for conditional releases.

1 (6) In the event of a revocation of a conditional release, the  
2 subsequent treatment period may be for no longer than the actual  
3 period authorized in the original court order.

4 **Sec. 238.** RCW 71.05.340 and 2015 c ... s 237 (section 237 of  
5 this act) are each amended to read as follows:

6 (1)(a) When, in the opinion of the superintendent or the  
7 professional person in charge of the hospital or facility providing  
8 involuntary treatment, the committed person can be appropriately  
9 served by outpatient treatment prior to or at the expiration of the  
10 period of commitment, then such outpatient care may be required as a  
11 term of conditional release for a period which, when added to the  
12 inpatient treatment period, shall not exceed the period of  
13 commitment. If the hospital or facility designated to provide  
14 outpatient treatment is other than the facility providing involuntary  
15 treatment, the outpatient facility so designated must agree in  
16 writing to assume such responsibility. A copy of the terms of  
17 conditional release shall be given to the patient, the designated  
18 crisis responder in the county in which the patient is to receive  
19 outpatient treatment, and to the court of original commitment.

20 (b) Before a person committed under grounds set forth in RCW  
21 71.05.280(3) or 71.05.320(3)(c) is conditionally released under (a)  
22 of this subsection, the superintendent or professional person in  
23 charge of the hospital or facility providing involuntary treatment  
24 shall in writing notify the prosecuting attorney of the county in  
25 which the criminal charges against the committed person were  
26 dismissed, of the decision to conditionally release the person.  
27 Notice and a copy of the terms of conditional release shall be  
28 provided at least thirty days before the person is released from  
29 inpatient care. Within twenty days after receiving notice, the  
30 prosecuting attorney may petition the court in the county that issued  
31 the commitment order to hold a hearing to determine whether the  
32 person may be conditionally released and the terms of the conditional  
33 release. The prosecuting attorney shall provide a copy of the  
34 petition to the superintendent or professional person in charge of  
35 the hospital or facility providing involuntary treatment, the  
36 attorney, if any, and guardian or conservator of the committed  
37 person, and the court of original commitment. If the county in which  
38 the committed person is to receive outpatient treatment is the same  
39 county in which the criminal charges against the committed person

1 were dismissed, then the court shall, upon the motion of the  
2 prosecuting attorney, transfer the proceeding to the court in that  
3 county. The court shall conduct a hearing on the petition within ten  
4 days of the filing of the petition. The committed person shall have  
5 the same rights with respect to notice, hearing, and counsel as for  
6 an involuntary treatment proceeding, except as set forth in this  
7 subsection and except that there shall be no right to jury trial. The  
8 issue to be determined at the hearing is whether or not the person  
9 may be conditionally released without substantial danger to other  
10 persons, or substantial likelihood of committing criminal acts  
11 jeopardizing public safety or security. If the court disapproves of  
12 the conditional release, it may do so only on the basis of  
13 substantial evidence. Pursuant to the determination of the court upon  
14 the hearing, the conditional release of the person shall be approved  
15 by the court on the same or modified conditions or the person shall  
16 be returned for involuntary treatment on an inpatient basis subject  
17 to release at the end of the period for which he or she was  
18 committed, or otherwise in accordance with the provisions of this  
19 chapter.

20 (2) The hospital or facility designated to provide outpatient  
21 care or the secretary may modify the conditions for continued release  
22 when such modification is in the best interest of the person.  
23 Notification of such changes shall be sent to all persons receiving a  
24 copy of the original conditions.

25 (3)(a) If the hospital or facility designated to provide  
26 outpatient care, the designated crisis responder, or the secretary  
27 determines that:

28 (i) A conditionally released person is failing to adhere to the  
29 terms and conditions of his or her release;

30 (ii) Substantial deterioration in a conditionally released  
31 person's functioning has occurred;

32 (iii) There is evidence of substantial decompensation with a  
33 reasonable probability that the decompensation can be reversed by  
34 further inpatient treatment; or

35 (iv) The person poses a likelihood of serious harm;

36 Upon notification by the hospital or facility designated to  
37 provide outpatient care, or on his or her own motion, the designated  
38 crisis responder or the secretary may order that the conditionally  
39 released person be apprehended and taken into custody and temporarily  
40 detained in an evaluation and treatment facility in or near the

1 county in which he or she is receiving outpatient treatment if the  
2 person is committed for mental health treatment, or, if the person is  
3 committed for substance use disorder treatment, in a secure  
4 detoxification facility or approved substance use disorder treatment  
5 program (~~((with available space))~~) in or near the county in which he or  
6 she is receiving outpatient treatment. (~~((A person may not be detained  
7 to a secure detoxification facility or approved substance use  
8 disorder treatment program unless there is available space in the  
9 facility or program.))~~)

10 (b) The hospital or facility designated to provide outpatient  
11 treatment shall notify the secretary or designated crisis responder  
12 when a conditionally released person fails to adhere to terms and  
13 conditions of his or her conditional release or experiences  
14 substantial deterioration in his or her condition and, as a result,  
15 presents an increased likelihood of serious harm. The designated  
16 crisis responder or secretary shall order the person apprehended and  
17 temporarily detained in an evaluation and treatment facility in or  
18 near the county in which he or she is receiving outpatient treatment  
19 if the person is committed for mental health treatment, or, if the  
20 person is committed for substance use disorder treatment, in a secure  
21 detoxification facility or approved substance use disorder treatment  
22 program (~~((with available space))~~) in or near the county in which he or  
23 she is receiving outpatient treatment. (~~((A person may not be detained  
24 to a secure detoxification facility or approved substance use  
25 disorder treatment program unless there is available space in the  
26 facility or program.))~~)

27 (c) A person detained under this subsection (3) shall be held  
28 until such time, not exceeding five days, as a hearing can be  
29 scheduled to determine whether or not the person should be returned  
30 to the hospital or facility from which he or she had been  
31 conditionally released. The designated crisis responder or the  
32 secretary may modify or rescind such order at any time prior to  
33 commencement of the court hearing.

34 (d) The court that originally ordered commitment shall be  
35 notified within two judicial days of a person's detention under the  
36 provisions of this section, and the designated crisis responder or  
37 the secretary shall file his or her petition and order of  
38 apprehension and detention with the court that originally ordered  
39 commitment or with the court in the county in which the person is  
40 detained and serve them upon the person detained. His or her

1 attorney, if any, and his or her guardian or conservator, if any,  
2 shall receive a copy of such papers as soon as possible. Such person  
3 shall have the same rights with respect to notice, hearing, and  
4 counsel as for an involuntary treatment proceeding, except as  
5 specifically set forth in this section and except that there shall be  
6 no right to jury trial. The venue for proceedings regarding a  
7 petition for modification or revocation of an order for conditional  
8 release shall be in the county in which the petition was filed. The  
9 issues to be determined shall be: (i) Whether the conditionally  
10 released person did or did not adhere to the terms and conditions of  
11 his or her conditional release; (ii) that substantial deterioration  
12 in the person's functioning has occurred; (iii) there is evidence of  
13 substantial decompensation with a reasonable probability that the  
14 decompensation can be reversed by further inpatient treatment; or  
15 (iv) there is a likelihood of serious harm; and, if any of the  
16 conditions listed in this subsection (3)(d) have occurred, whether  
17 the terms of conditional release should be modified or the person  
18 should be returned to the facility.

19 (e) Pursuant to the determination of the court upon such hearing,  
20 the conditionally released person shall either continue to be  
21 conditionally released on the same or modified conditions or shall be  
22 returned for involuntary treatment on an inpatient basis subject to  
23 release at the end of the period for which he or she was committed  
24 for involuntary treatment, or otherwise in accordance with the  
25 provisions of this chapter. Such hearing may be waived by the person  
26 and his or her counsel and his or her guardian or conservator, if  
27 any, but shall not be waivable unless all such persons agree to  
28 waive, and upon such waiver the person may be returned for  
29 involuntary treatment or continued on conditional release on the same  
30 or modified conditions. (~~(A person must not be returned for~~  
31 ~~involuntary treatment in a secure detoxification facility or approved~~  
32 ~~substance use disorder treatment program under this subsection unless~~  
33 ~~there is available space in the facility or program.)~~)

34 (4) The proceedings set forth in subsection (3) of this section  
35 may be initiated by the designated crisis responder or the secretary  
36 on the same basis set forth therein without requiring or ordering the  
37 apprehension and detention of the conditionally released person, in  
38 which case the court hearing shall take place in not less than five  
39 days from the date of service of the petition upon the conditionally  
40 released person. The petition may be filed in the court that

1 originally ordered commitment or with the court in the county in  
2 which the person is present. The venue for the proceedings regarding  
3 the petition for modification or revocation of an order for  
4 conditional release shall be in the county in which the petition was  
5 filed.

6 Upon expiration of the period of commitment, or when the person  
7 is released from outpatient care, notice in writing to the court  
8 which committed the person for treatment shall be provided.

9 (5) The grounds and procedures for revocation of less restrictive  
10 alternative treatment shall be the same as those set forth in this  
11 section for conditional releases.

12 (6) In the event of a revocation of a conditional release, the  
13 subsequent treatment period may be for no longer than the actual  
14 period authorized in the original court order.

15 **Sec. 239.** RCW 71.05.360 and 2009 c 217 s 5 are each amended to  
16 read as follows:

17 (1)(a) Every person involuntarily detained or committed under the  
18 provisions of this chapter shall be entitled to all the rights set  
19 forth in this chapter, which shall be prominently posted in the  
20 facility, and shall retain all rights not denied him or her under  
21 this chapter except as chapter 9.41 RCW may limit the right of a  
22 person to purchase or possess a firearm or to qualify for a concealed  
23 pistol license if the person is committed under RCW 71.05.240 or  
24 71.05.320 for mental health treatment or treatment of a substance use  
25 disorder that is based on use of a controlled substance.

26 (b) No person shall be presumed incompetent as a consequence of  
27 receiving an evaluation or voluntary or involuntary treatment for a  
28 mental disorder or substance use disorders, under this chapter or any  
29 prior laws of this state dealing with mental illness or substance use  
30 disorders. Competency shall not be determined or withdrawn except  
31 under the provisions of chapter 10.77 or 11.88 RCW.

32 (c) Any person who leaves a public or private agency following  
33 evaluation or treatment for a mental disorder or substance use  
34 disorder shall be given a written statement setting forth the  
35 substance of this section.

36 (2) Each person involuntarily detained or committed pursuant to  
37 this chapter shall have the right to adequate care and individualized  
38 treatment.

1 (3) The provisions of this chapter shall not be construed to deny  
2 to any person treatment by spiritual means through prayer in  
3 accordance with the tenets and practices of a church or religious  
4 denomination.

5 (4) Persons receiving evaluation or treatment under this chapter  
6 shall be given a reasonable choice of an available physician,  
7 psychiatric advanced registered nurse practitioner, physician  
8 assistant, or other professional person qualified to provide such  
9 services.

10 (5) Whenever any person is detained for evaluation and treatment  
11 pursuant to this chapter, both the person and, if possible, a  
12 responsible member of his or her immediate family, personal  
13 representative, guardian, or conservator, if any, shall be advised as  
14 soon as possible in writing or orally, by the officer or person  
15 taking him or her into custody or by personnel of the evaluation and  
16 treatment facility, secure detoxification facility, or approved  
17 substance use disorder treatment program where the person is detained  
18 that unless the person is released or voluntarily admits himself or  
19 herself for treatment within seventy-two hours of the initial  
20 detention:

21 (a) A judicial hearing in a superior court, either by a judge or  
22 court commissioner thereof, shall be held not more than seventy-two  
23 hours after the initial detention to determine whether there is  
24 probable cause to detain the person after the seventy-two hours have  
25 expired for up to an additional fourteen days without further  
26 automatic hearing for the reason that the person is a person whose  
27 mental disorder or substance use disorder presents a likelihood of  
28 serious harm or that the person is gravely disabled;

29 (b) The person has a right to communicate immediately with an  
30 attorney; has a right to have an attorney appointed to represent him  
31 or her before and at the probable cause hearing if he or she is  
32 indigent; and has the right to be told the name and address of the  
33 attorney that the mental health professional has designated pursuant  
34 to this chapter;

35 (c) The person has the right to remain silent and that any  
36 statement he or she makes may be used against him or her;

37 (d) The person has the right to present evidence and to cross-  
38 examine witnesses who testify against him or her at the probable  
39 cause hearing; and



1 (e) The person has the right to refuse psychiatric medications,  
2 including antipsychotic medication beginning twenty-four hours prior  
3 to the probable cause hearing.

4 (6) When proceedings are initiated under RCW 71.05.153, no later  
5 than twelve hours after such person is admitted to the evaluation and  
6 treatment facility, secure detoxification facility, or approved  
7 substance use disorder treatment program the personnel of the  
8 ((evaluation and treatment)) facility or the designated ((mental  
9 health professional)) crisis responder shall serve on such person a  
10 copy of the petition for initial detention and the name, business  
11 address, and phone number of the designated attorney and shall  
12 forthwith commence service of a copy of the petition for initial  
13 detention on the designated attorney.

14 (7) The judicial hearing described in subsection (5) of this  
15 section is hereby authorized, and shall be held according to the  
16 provisions of subsection (5) of this section and rules promulgated by  
17 the supreme court.

18 (8) At the probable cause hearing the detained person shall have  
19 the following rights in addition to the rights previously specified:

20 (a) To present evidence on his or her behalf;

21 (b) To cross-examine witnesses who testify against him or her;

22 (c) To be proceeded against by the rules of evidence;

23 (d) To remain silent;

24 (e) To view and copy all petitions and reports in the court file.

25 (9) Privileges between patients and physicians, psychologists,  
26 physician assistants, or psychiatric advanced registered nurse  
27 practitioners are deemed waived in proceedings under this chapter  
28 relating to the administration of antipsychotic medications. As to  
29 other proceedings under this chapter, the privileges shall be waived  
30 when a court of competent jurisdiction in its discretion determines  
31 that such waiver is necessary to protect either the detained person  
32 or the public.

33 The waiver of a privilege under this section is limited to  
34 records or testimony relevant to evaluation of the detained person  
35 for purposes of a proceeding under this chapter. Upon motion by the  
36 detained person or on its own motion, the court shall examine a  
37 record or testimony sought by a petitioner to determine whether it is  
38 within the scope of the waiver.

39 The record maker shall not be required to testify in order to  
40 introduce medical or psychological records of the detained person so

1 long as the requirements of RCW 5.45.020 are met except that portions  
2 of the record which contain opinions as to the detained person's  
3 mental state must be deleted from such records unless the person  
4 making such conclusions is available for cross-examination.

5 (10) Insofar as danger to the person or others is not created,  
6 each person involuntarily detained, treated in a less restrictive  
7 alternative course of treatment, or committed for treatment and  
8 evaluation pursuant to this chapter shall have, in addition to other  
9 rights not specifically withheld by law, the following rights:

10 (a) To wear his or her own clothes and to keep and use his or her  
11 own personal possessions, except when deprivation of same is  
12 essential to protect the safety of the resident or other persons;

13 (b) To keep and be allowed to spend a reasonable sum of his or  
14 her own money for canteen expenses and small purchases;

15 (c) To have access to individual storage space for his or her  
16 private use;

17 (d) To have visitors at reasonable times;

18 (e) To have reasonable access to a telephone, both to make and  
19 receive confidential calls, consistent with an effective treatment  
20 program;

21 (f) To have ready access to letter writing materials, including  
22 stamps, and to send and receive uncensored correspondence through the  
23 mails;

24 (g) To discuss treatment plans and decisions with professional  
25 persons;

26 (h) Not to consent to the administration of antipsychotic  
27 medications and not to thereafter be administered antipsychotic  
28 medications unless ordered by a court under RCW 71.05.217 or pursuant  
29 to an administrative hearing under RCW 71.05.215;

30 (i) Not to consent to the performance of electroconvulsant  
31 therapy or surgery, except emergency lifesaving surgery, unless  
32 ordered by a court under RCW 71.05.217;

33 (j) Not to have psychosurgery performed on him or her under any  
34 circumstances;

35 (k) To dispose of property and sign contracts unless such person  
36 has been adjudicated an incompetent in a court proceeding directed to  
37 that particular issue.

38 (11) Every person involuntarily detained shall immediately be  
39 informed of his or her right to a hearing to review the legality of  
40 his or her detention and of his or her right to counsel, by the

1 professional person in charge of the facility providing evaluation  
2 and treatment, or his or her designee, and, when appropriate, by the  
3 court. If the person so elects, the court shall immediately appoint  
4 an attorney to assist him or her.

5 (12) A person challenging his or her detention or his or her  
6 attorney shall have the right to designate and have the court appoint  
7 a reasonably available independent physician, psychiatric advanced  
8 registered nurse practitioner, physician assistant, or licensed  
9 mental health professional to examine the person detained, the  
10 results of which examination may be used in the proceeding. The  
11 person shall, if he or she is financially able, bear the cost of such  
12 expert examination, otherwise such expert examination shall be at  
13 public expense.

14 (13) Nothing contained in this chapter shall prohibit the patient  
15 from petitioning by writ of habeas corpus for release.

16 (14) Nothing in this chapter shall prohibit a person committed on  
17 or prior to January 1, 1974, from exercising a right available to him  
18 or her at or prior to January 1, 1974, for obtaining release from  
19 confinement.

20 (15) Nothing in this section permits any person to knowingly  
21 violate a no-contact order or a condition of an active judgment and  
22 sentence or an active condition of supervision by the department of  
23 corrections.

24 **Sec. 240.** RCW 71.05.380 and 1973 1st ex.s. c 142 s 43 are each  
25 amended to read as follows:

26 All persons voluntarily entering or remaining in any facility,  
27 institution, or hospital providing evaluation and treatment for  
28 mental disorders or substance use disorders shall have no less than  
29 all rights secured to involuntarily detained persons by RCW 71.05.360  
30 and (~~(71.05.370)~~) 71.05.217.

31 **Sec. 241.** RCW 71.05.435 and 2010 c 280 s 4 are each amended to  
32 read as follows:

33 (1) Whenever a person who is the subject of an involuntary  
34 commitment order under this chapter is discharged from an evaluation  
35 and treatment facility (~~(or)~~) state hospital, (~~(the evaluation and~~  
36 ~~treatment facility or state hospital shall provide notice of the~~  
37 ~~person's discharge to the designated mental health professional)~~)  
38 secure detoxification facility, or approved substance use disorder

1 treatment program providing involuntary treatment services, the  
2 entity discharging the person shall provide notice of the person's  
3 discharge to the designated crisis responder office responsible for  
4 the initial commitment and the designated ~~((mental—health~~  
5 ~~professional))~~ crisis responder office that serves the county in  
6 which the person is expected to reside. The ~~((evaluation—and~~  
7 ~~treatment facility or state hospital))~~ entity discharging the person  
8 must also provide these offices with a copy of any less restrictive  
9 order or conditional release order entered in conjunction with the  
10 discharge of the person, unless the ~~((evaluation—and—treatment~~  
11 ~~facility or state hospital))~~ entity discharging the person has  
12 entered into a memorandum of understanding obligating another entity  
13 to provide these documents.

14 (2) The notice and documents referred to in subsection (1) of  
15 this section shall be provided as soon as possible and no later than  
16 one business day following the discharge of the person. Notice is not  
17 required under this section if the discharge is for the purpose of  
18 transferring the person for continued detention and treatment under  
19 this chapter at another treatment facility.

20 (3) The department shall maintain and make available an updated  
21 list of contact information for designated ~~((mental—health~~  
22 ~~professional))~~ crisis responder offices around the state.

23 **Sec. 242.** RCW 71.05.530 and 1998 c 297 s 23 are each amended to  
24 read as follows:

25 Evaluation and treatment facilities and secure detoxification  
26 facilities authorized pursuant to this chapter may be part of the  
27 comprehensive community mental health services program conducted in  
28 counties pursuant to chapter 71.24 RCW, and may receive funding  
29 pursuant to the provisions thereof.

30 **Sec. 243.** RCW 71.05.560 and 1998 c 297 s 24 are each amended to  
31 read as follows:

32 The department shall adopt such rules as may be necessary to  
33 effectuate the intent and purposes of this chapter, which shall  
34 include but not be limited to evaluation of the quality of the  
35 program and facilities operating pursuant to this chapter, evaluation  
36 of the effectiveness and cost effectiveness of such programs and  
37 facilities, and procedures and standards for certification and other  
38 action relevant to evaluation and treatment facilities, secure

1 detoxification facilities, and approved substance use disorder  
2 treatment programs.

3 **Sec. 244.** RCW 71.05.620 and 2013 c 200 s 23 are each amended to  
4 read as follows:

5 (1) The files and records of court proceedings under this chapter  
6 and chapter ~~((s 70.96A,))~~ 71.34 ~~((, and 70.96B))~~ RCW shall be closed  
7 but shall be accessible to:

8 (a) The department;

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

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

11 (d) The ~~((person's))~~ attorney ~~((,))~~ or guardian ad litem ~~((,))~~ of  
12 the person;

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

14 (f) Service providers authorized to receive such information by  
15 resource management services.

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

17 **Sec. 245.** RCW 71.05.700 and 2007 c 360 s 2 are each amended to  
18 read as follows:

19 No designated ~~((mental health professional))~~ crisis responder or  
20 crisis intervention worker shall be required to respond to a private  
21 home or other private location to stabilize or treat a person in  
22 crisis, or to evaluate a person for potential detention under the  
23 state's involuntary treatment act, unless a second trained  
24 individual, determined by the clinical team supervisor, on-call  
25 supervisor, or individual professional acting alone based on a risk  
26 assessment for potential violence, accompanies them. The second  
27 individual may be a law enforcement officer, a mental health  
28 professional, a mental health paraprofessional who has received  
29 training under RCW 71.05.715, or other first responder, such as fire  
30 or ambulance personnel. No retaliation may be taken against a worker  
31 who, following consultation with the clinical team, refuses to go on  
32 a home visit alone.

33 **Sec. 246.** RCW 71.05.705 and 2007 c 360 s 3 are each amended to  
34 read as follows:

35 Each provider of designated ~~((mental health professional))~~ crisis  
36 responder or crisis outreach services shall maintain a written policy  
37 that, at a minimum, describes the organization's plan for training,

1 staff backup, information sharing, and communication for crisis  
2 outreach staff who respond to private homes or nonpublic settings.

3 NEW SECTION. **Sec. 247.** A new section is added to chapter 71.05  
4 RCW to read as follows:

5 The limitation on firearm rights based on involuntary commitment  
6 for treatment of a substance use disorder shall be strictly construed  
7 to apply only if the person would otherwise have his or her firearm  
8 rights limited under federal law.

9 **Sec. 248.** RCW 71.34.020 and 2011 c 89 s 16 are each amended to  
10 read as follows:

11 Unless the context clearly requires otherwise, the definitions in  
12 this section apply throughout this chapter.

13 (1) "Child psychiatrist" means a person having a license as a  
14 physician and surgeon in this state, who has had graduate training in  
15 child psychiatry in a program approved by the American Medical  
16 Association or the American Osteopathic Association, and who is board  
17 eligible or board certified in child psychiatry.

18 (2) "Children's mental health specialist" means:

19 (a) A mental health professional who has completed a minimum of  
20 one hundred actual hours, not quarter or semester hours, of  
21 specialized training devoted to the study of child development and  
22 the treatment of children; and

23 (b) A mental health professional who has the equivalent of one  
24 year of full-time experience in the treatment of children under the  
25 supervision of a children's mental health specialist.

26 (3) "Commitment" means a determination by a judge or court  
27 commissioner, made after a commitment hearing, that the minor is in  
28 need of inpatient diagnosis, evaluation, or treatment or that the  
29 minor is in need of less restrictive alternative treatment.

30 (4) "Department" means the department of social and health  
31 services.

32 (~~(5) ("Designated mental health professional" means a mental~~  
33 ~~health professional designated by one or more counties to perform the~~  
34 ~~functions of a designated mental health professional described in~~  
35 ~~this chapter.~~

36 (+6)) "Evaluation and treatment facility" means a public or  
37 private facility or unit that is certified by the department to  
38 provide emergency, inpatient, residential, or outpatient mental

1 health evaluation and treatment services for minors. A physically  
2 separate and separately-operated portion of a state hospital may be  
3 designated as an evaluation and treatment facility for minors. A  
4 facility which is part of or operated by the department or federal  
5 agency does not require certification. No correctional institution or  
6 facility, juvenile court detention facility, or jail may be an  
7 evaluation and treatment facility within the meaning of this chapter.

8 ~~((7))~~ (6) "Evaluation and treatment program" means the total  
9 system of services and facilities coordinated and approved by a  
10 county or combination of counties for the evaluation and treatment of  
11 minors under this chapter.

12 ~~((8))~~ (7) "Gravely disabled minor" means a minor who, as a  
13 result of a mental disorder, or as a result of the use of alcohol or  
14 other psychoactive chemicals, is in danger of serious physical harm  
15 resulting from a failure to provide for his or her essential human  
16 needs of health or safety, or manifests severe deterioration in  
17 routine functioning evidenced by repeated and escalating loss of  
18 cognitive or volitional control over his or her actions and is not  
19 receiving such care as is essential for his or her health or safety.

20 ~~((9))~~ (8) "Inpatient treatment" means twenty-four-hour-per-day  
21 mental health care provided within a general hospital, psychiatric  
22 hospital, ~~((10))~~ residential treatment facility certified by the  
23 department as an evaluation and treatment facility for minors, secure  
24 detoxification facility for minors, or approved substance use  
25 disorder treatment program for minors.

26 ~~((10))~~ (9) "Less restrictive alternative" or "less restrictive  
27 setting" means outpatient treatment provided to a minor who is not  
28 residing in a facility providing inpatient treatment as defined in  
29 this chapter.

30 ~~((11))~~ (10) "Likelihood of serious harm" means either: (a) A  
31 substantial risk that physical harm will be inflicted by an  
32 individual upon his or her own person, as evidenced by threats or  
33 attempts to commit suicide or inflict physical harm on oneself; (b) a  
34 substantial risk that physical harm will be inflicted by an  
35 individual upon another, as evidenced by behavior which has caused  
36 such harm or which places another person or persons in reasonable  
37 fear of sustaining such harm; or (c) a substantial risk that physical  
38 harm will be inflicted by an individual upon the property of others,  
39 as evidenced by behavior which has caused substantial loss or damage  
40 to the property of others.

1        ~~((12))~~ (11) "Medical necessity" for inpatient care means a  
2 requested service which is reasonably calculated to: (a) Diagnose,  
3 correct, cure, or alleviate a mental disorder or substance use  
4 disorder; or (b) prevent the ~~((worsening of mental conditions))~~  
5 progression of a substance use disorder that endangers life or causes  
6 suffering and pain, or results in illness or infirmity or threatens  
7 to cause or aggravate a handicap, or causes physical deformity or  
8 malfunction, and there is no adequate less restrictive alternative  
9 available.

10        ~~((13))~~ (12) "Mental disorder" means any organic, mental, or  
11 emotional impairment that has substantial adverse effects on an  
12 individual's cognitive or volitional functions. The presence of  
13 alcohol abuse, drug abuse, juvenile criminal history, antisocial  
14 behavior, or intellectual disabilities alone is insufficient to  
15 justify a finding of "mental disorder" within the meaning of this  
16 section.

17        ~~((14))~~ (13) "Mental health professional" means a psychiatrist,  
18 psychologist, psychiatric nurse, or social worker, and such other  
19 mental health professionals as may be defined by rules adopted by the  
20 secretary under this chapter.

21        ~~((15))~~ (14) "Minor" means any person under the age of eighteen  
22 years.

23        ~~((16))~~ (15) "Outpatient treatment" means any of the  
24 nonresidential services mandated under chapter 71.24 RCW and provided  
25 by licensed services providers as identified by RCW 71.24.025.

26        ~~((17))~~ (16) "Parent" means:

27        (a) A biological or adoptive parent who has legal custody of the  
28 child, including either parent if custody is shared under a joint  
29 custody agreement; or

30        (b) A person or agency judicially appointed as legal guardian or  
31 custodian of the child.

32        ~~((18))~~ (17) "Professional person in charge" or "professional  
33 person" means a physician ~~((or))~~ other mental health professional  
34 or other person empowered by an evaluation and treatment facility,  
35 secure detoxification facility, or approved substance use disorder  
36 treatment program with authority to make admission and discharge  
37 decisions on behalf of that facility.

38        ~~((19))~~ (18) "Psychiatric nurse" means a registered nurse who  
39 has a bachelor's degree from an accredited college or university, and  
40 who has had, in addition, at least two years' experience in the



1 direct treatment of persons who have a mental illness or who are  
2 emotionally disturbed, such experience gained under the supervision  
3 of a mental health professional. "Psychiatric nurse" shall also mean  
4 any other registered nurse who has three years of such experience.

5 ~~((+20))~~ (19) "Psychiatrist" means a person having a license as a  
6 physician in this state who has completed residency training in  
7 psychiatry in a program approved by the American Medical Association  
8 or the American Osteopathic Association, and is board eligible or  
9 board certified in psychiatry.

10 ~~((+21))~~ (20) "Psychologist" means a person licensed as a  
11 psychologist under chapter 18.83 RCW.

12 ~~((+22))~~ (21) "Responsible other" means the minor, the minor's  
13 parent or estate, or any other person legally responsible for support  
14 of the minor.

15 ~~((+23))~~ (22) "Secretary" means the secretary of the department  
16 or secretary's designee.

17 ~~((+24))~~ (23) "Social worker" means a person with a master's or  
18 further advanced degree from a social work educational program  
19 accredited and approved as provided in RCW 18.320.010.

20 ~~((+25))~~ (24) "Start of initial detention" means the time of  
21 arrival of the minor at the first evaluation and treatment facility,  
22 secure detoxification facility, or approved substance use disorder  
23 treatment program offering inpatient treatment if the minor is being  
24 involuntarily detained at the time. With regard to voluntary  
25 patients, "start of initial detention" means the time at which the  
26 minor gives notice of intent to leave under the provisions of this  
27 chapter.

28 (25) "Alcoholism" means a disease, characterized by a dependency  
29 on alcoholic beverages, loss of control over the amount and  
30 circumstances of use, symptoms of tolerance, physiological or  
31 psychological withdrawal, or both, if use is reduced or discontinued,  
32 and impairment of health or disruption of social or economic  
33 functioning.

34 (26) "Approved substance use disorder treatment program" means a  
35 program for minors with substance use disorders provided by a  
36 treatment program certified by the department as meeting standards  
37 adopted under chapter 70.96A RCW.

38 (27) "Chemical dependency" means:

39 (a) Alcoholism;

40 (b) Drug addiction; or

1 (c) Dependence on alcohol and one or more other psychoactive  
2 chemicals, as the context requires.

3 (28) "Chemical dependency professional" means a person certified  
4 as a chemical dependency professional by the department of health  
5 under chapter 18.205 RCW.

6 (29) "Controlled substance" has the same meaning as under the  
7 federal controlled substances act, 21 U.S.C. Sec. 802.

8 (30) "Designated crisis responder" means a person designated by a  
9 behavioral health organization to perform the duties specified in  
10 this chapter.

11 (31) "Drug addiction" means a disease, characterized by a  
12 dependency on psychoactive chemicals, loss of control over the amount  
13 and circumstances of use, symptoms of tolerance, physiological or  
14 psychological withdrawal, or both, if use is reduced or discontinued,  
15 and impairment of health or disruption of social or economic  
16 functioning.

17 (32) "Intoxicated minor" means a minor whose mental or physical  
18 functioning is substantially impaired as a result of the use of  
19 alcohol or other psychoactive chemicals.

20 (33) "Physician assistant" means a person who is licensed as a  
21 physician assistant pursuant to chapter 18.57A or 18.71A RCW and is  
22 working with a licensed mental health physician as indicated by their  
23 delegation agreement.

24 (34) "Private agency" means any person, partnership, corporation,  
25 or association that is not a public agency, whether or not financed  
26 in whole or in part by public funds, that constitutes an evaluation  
27 and treatment facility or private institution, or hospital, or  
28 approved substance use disorder treatment program, that is conducted  
29 for, or includes a department or ward conducted for, the care and  
30 treatment of persons with mental illness, substance use disorders, or  
31 both mental illness and substance use disorders.

32 (35) "Public agency" means any evaluation and treatment facility  
33 or institution, or hospital, or approved substance use disorder  
34 treatment program that is conducted for, or includes a department or  
35 ward conducted for, the care and treatment of persons with mental  
36 illness, substance use disorders, or both mental illness and  
37 substance use disorders if the agency is operated directly by  
38 federal, state, county, or municipal government, or a combination of  
39 such governments.

1 (36) "Secure detoxification facility" means a facility operated  
2 by either a public or private agency or by the program of an agency  
3 that:

4 (a) Provides for intoxicated minors:

5 (i) Evaluation and assessment, provided by certified chemical  
6 dependency professionals;

7 (ii) Acute or subacute detoxification services; and

8 (iii) Discharge assistance provided by certified chemical  
9 dependency professionals, including facilitating transitions to  
10 appropriate voluntary or involuntary inpatient services or to less  
11 restrictive alternatives as appropriate for the minor;

12 (b) Includes security measures sufficient to protect the  
13 patients, staff, and community; and

14 (c) Is certified as such by the department.

15 (37) "Substance use disorder" means a cluster of cognitive,  
16 behavioral, and physiological symptoms indicating that an individual  
17 continues using the substance despite significant substance-related  
18 problems. The diagnosis of a substance use disorder is based on a  
19 pathological pattern of behaviors related to the use of the  
20 substances.

21 **Sec. 249.** RCW 71.34.305 and 1996 c 133 s 6 are each amended to  
22 read as follows:

23 School district personnel who contact a mental health or  
24 substance use disorder inpatient treatment program or provider for  
25 the purpose of referring a student to inpatient treatment shall  
26 provide the parents with notice of the contact within forty-eight  
27 hours.

28 **Sec. 250.** RCW 71.34.375 and 2011 c 302 s 1 are each amended to  
29 read as follows:

30 (1) If a parent or guardian, for the purpose of mental health  
31 treatment, substance use disorder treatment, or evaluation, brings  
32 his or her minor child to an evaluation and treatment facility, a  
33 hospital emergency room, an inpatient facility licensed under chapter  
34 72.23 RCW, ~~((or))~~ an inpatient facility licensed under chapter 70.41  
35 or 71.12 RCW operating inpatient psychiatric beds for minors, a  
36 secure detoxification facility, or an approved substance use disorder  
37 treatment program, the facility is required to promptly provide  
38 written and verbal notice of all statutorily available treatment

1 options contained in this chapter. The notice need not be given more  
2 than once if written and verbal notice has already been provided and  
3 documented by the facility.

4 (2) The provision of notice must be documented by the facilities  
5 required to give notice under subsection (1) of this section and must  
6 be accompanied by a signed acknowledgment of receipt by the parent or  
7 guardian. The notice must contain the following information:

8 (a) All current statutorily available treatment options including  
9 but not limited to those provided in this chapter; and

10 (b) The procedures to be followed to utilize the treatment  
11 options described in this chapter.

12 (3) The department shall produce, and make available, the written  
13 notification that must include, at a minimum, the information  
14 contained in subsection (2) of this section. The department must  
15 revise the written notification as necessary to reflect changes in  
16 the law.

17 **Sec. 251.** RCW 71.34.385 and 1992 c 205 s 304 are each amended to  
18 read as follows:

19 The department shall ensure that the provisions of this chapter  
20 are applied by the counties in a consistent and uniform manner. The  
21 department shall also ensure that, to the extent possible within  
22 available funds, the ~~((county designated mental health~~  
23 ~~professionals)) designated crisis responders are specifically trained  
24 in adolescent mental health issues, the mental health and substance  
25 use disorder civil commitment laws, and the criteria for civil  
26 commitment.~~

27 **Sec. 252.** RCW 71.34.400 and 1998 c 296 s 11 are each amended to  
28 read as follows:

29 For purposes of eligibility for medical assistance under chapter  
30 74.09 RCW, minors in inpatient mental health or inpatient substance  
31 use disorder treatment shall be considered to be part of their  
32 parent's or legal guardian's household, unless the minor has been  
33 assessed by the department or its designee as likely to require such  
34 treatment for at least ninety consecutive days, or is in out-of-home  
35 care in accordance with chapter 13.34 RCW, or the parents are found  
36 to not be exercising responsibility for care and control of the  
37 minor. Payment for such care by the department shall be made only in

1 accordance with rules, guidelines, and clinical criteria applicable  
2 to inpatient treatment of minors established by the department.

3 **Sec. 253.** RCW 71.34.410 and 2005 c 371 s 5 are each amended to  
4 read as follows:

5 No public or private agency or governmental entity, nor officer  
6 of a public or private agency, nor the superintendent, or  
7 professional person in charge, his or her professional designee or  
8 attending staff of any such agency, nor any public official  
9 performing functions necessary to the administration of this chapter,  
10 nor peace officer responsible for detaining a person under this  
11 chapter, nor any ((~~county~~)) designated ((~~mental health professional~~))  
12 crisis responder, nor professional person, nor evaluation and  
13 treatment facility, nor secure detoxification facility, nor approved  
14 substance use disorder treatment program shall be civilly or  
15 criminally liable for performing actions authorized in this chapter  
16 with regard to the decision of whether to admit, release, or detain a  
17 person for evaluation and treatment: PROVIDED, That such duties were  
18 performed in good faith and without gross negligence.

19 **Sec. 254.** RCW 71.34.500 and 2006 c 93 s 3 are each amended to  
20 read as follows:

21 (1) A minor thirteen years or older may admit himself or herself  
22 to an evaluation and treatment facility for inpatient mental health  
23 treatment or an approved substance use disorder treatment program for  
24 inpatient ((~~mental~~)) substance use disorder treatment((~~τ~~)) without  
25 parental consent. The admission shall occur only if the professional  
26 person in charge of the facility concurs with the need for inpatient  
27 treatment. Parental authorization, or authorization from a person who  
28 may consent on behalf of the minor pursuant to RCW 7.70.065, is  
29 required for inpatient treatment of a minor under the age of  
30 thirteen.

31 (2) When, in the judgment of the professional person in charge of  
32 an evaluation and treatment facility or approved substance use  
33 disorder treatment program, there is reason to believe that a minor  
34 is in need of inpatient treatment because of a mental disorder or  
35 substance use disorder, and the facility provides the type of  
36 evaluation and treatment needed by the minor, and it is not feasible  
37 to treat the minor in any less restrictive setting or the minor's

1 home, the minor may be admitted to (~~an evaluation and treatment~~)  
2 the facility.

3 (3) Written renewal of voluntary consent must be obtained from  
4 the applicant no less than once every twelve months. The minor's need  
5 for continued inpatient treatments shall be reviewed and documented  
6 no less than every one hundred eighty days.

7 **Sec. 255.** RCW 71.34.520 and 2003 c 106 s 1 are each amended to  
8 read as follows:

9 (1) Any minor thirteen years or older voluntarily admitted to an  
10 evaluation and treatment facility or approved substance use disorder  
11 treatment program under RCW 71.34.500 may give notice of intent to  
12 leave at any time. The notice need not follow any specific form so  
13 long as it is written and the intent of the minor can be discerned.

14 (2) The staff member receiving the notice shall date it  
15 immediately, record its existence in the minor's clinical record, and  
16 send copies of it to the minor's attorney, if any, the (~~county-~~  
17 ~~designated mental health professional~~) designated crisis responders,  
18 and the parent.

19 (3) The professional person shall discharge the minor, thirteen  
20 years or older, from the facility by the second judicial day  
21 following receipt of the minor's notice of intent to leave.

22 **Sec. 256.** RCW 71.34.600 and 2007 c 375 s 11 are each amended to  
23 read as follows:

24 (1) A parent may bring, or authorize the bringing of, his or her  
25 minor child to:

26 (a) An evaluation and treatment facility or an inpatient facility  
27 licensed under chapter 70.41, 71.12, or 72.23 RCW and request that  
28 the professional person examine the minor to determine whether the  
29 minor has a mental disorder and is in need of inpatient treatment; or

30 (b) A secure detoxification facility or approved substance use  
31 disorder treatment program and request that a substance use disorder  
32 assessment be conducted by a professional person to determine whether  
33 the minor has a substance use disorder and is in need of inpatient  
34 treatment.

35 (2) The consent of the minor is not required for admission,  
36 evaluation, and treatment if the parent brings the minor to the  
37 facility.

1 (3) An appropriately trained professional person may evaluate  
2 whether the minor has a mental disorder or has a substance use  
3 disorder. The evaluation shall be completed within twenty-four hours  
4 of the time the minor was brought to the facility, unless the  
5 professional person determines that the condition of the minor  
6 necessitates additional time for evaluation. In no event shall a  
7 minor be held longer than seventy-two hours for evaluation. If, in  
8 the judgment of the professional person, it is determined it is a  
9 medical necessity for the minor to receive inpatient treatment, the  
10 minor may be held for treatment. The facility shall limit treatment  
11 to that which the professional person determines is medically  
12 necessary to stabilize the minor's condition until the evaluation has  
13 been completed. Within twenty-four hours of completion of the  
14 evaluation, the professional person shall notify the department if  
15 the child is held for treatment and of the date of admission.

16 (4) No provider is obligated to provide treatment to a minor  
17 under the provisions of this section except that no provider may  
18 refuse to treat a minor under the provisions of this section solely  
19 on the basis that the minor has not consented to the treatment. No  
20 provider may admit a minor to treatment under this section unless it  
21 is medically necessary.

22 (5) No minor receiving inpatient treatment under this section may  
23 be discharged from the facility based solely on his or her request.

24 (6) Prior to the review conducted under RCW 71.34.610, the  
25 professional person shall notify the minor of his or her right to  
26 petition superior court for release from the facility.

27 (7) For the purposes of this section "professional person" means  
28 "professional person" as defined in RCW 71.05.020.

29 **Sec. 257.** RCW 71.34.630 and 1998 c 296 s 20 are each amended to  
30 read as follows:

31 If the minor is not released as a result of the petition filed  
32 under RCW 71.34.620, he or she shall be released not later than  
33 thirty days following the later of: (1) The date of the department's  
34 determination under RCW 71.34.610(2); or (2) the filing of a petition  
35 for judicial review under RCW 71.34.620, unless a professional person  
36 or the ((county)) designated ((~~mental health professional~~)) crisis  
37 responder initiates proceedings under this chapter.

1       **Sec. 258.** RCW 71.34.650 and 1998 c 296 s 18 are each amended to  
2 read as follows:

3       (1) A parent may bring, or authorize the bringing of, his or her  
4 minor child to:

5       (a) A provider of outpatient mental health treatment and request  
6 that an appropriately trained professional person examine the minor  
7 to determine whether the minor has a mental disorder and is in need  
8 of outpatient treatment; or

9       (b) A provider of outpatient substance use disorder treatment and  
10 request that an appropriately trained professional person examine the  
11 minor to determine whether the minor has a substance use disorder and  
12 is in need of outpatient treatment.

13       (2) The consent of the minor is not required for evaluation if  
14 the parent brings the minor to the provider.

15       (3) The professional person may evaluate whether the minor has a  
16 mental disorder or substance use disorder and is in need of  
17 outpatient treatment.

18       (4) Any minor admitted to inpatient treatment under RCW 71.34.500  
19 or 71.34.600 shall be discharged immediately from inpatient treatment  
20 upon written request of the parent.

21       **Sec. 259.** RCW 71.34.660 and 2005 c 371 s 3 are each amended to  
22 read as follows:

23       A minor child shall have no cause of action against an evaluation  
24 and treatment facility, secure detoxification facility, approved  
25 substance use disorder treatment program, inpatient facility, or  
26 provider of outpatient mental health treatment or outpatient  
27 substance use disorder treatment for admitting or accepting the minor  
28 in good faith for evaluation or treatment under RCW 71.34.600 or  
29 71.34.650 based solely upon the fact that the minor did not consent  
30 to evaluation or treatment if the minor's parent has consented to the  
31 evaluation or treatment.

32       **Sec. 260.** RCW 71.34.700 and 1985 c 354 s 4 are each amended to  
33 read as follows:

34       (1) If a minor, thirteen years or older, is brought to an  
35 evaluation and treatment facility or hospital emergency room for  
36 immediate mental health services, the professional person in charge  
37 of the facility shall evaluate the minor's mental condition,



1 determine whether the minor suffers from a mental disorder, and  
2 whether the minor is in need of immediate inpatient treatment.

3 (2) If a minor, thirteen years or older, is brought to a secure  
4 detoxification facility with available space, or a hospital emergency  
5 room for immediate substance use disorder treatment, the professional  
6 person in charge of the facility shall evaluate the minor's  
7 condition, determine whether the minor suffers from substance use  
8 disorder, and whether the minor is in need of immediate inpatient  
9 treatment.

10 (3) If it is determined under subsection (1) or (2) of this  
11 section that the minor suffers from a mental disorder or substance  
12 use disorder, inpatient treatment is required, the minor is unwilling  
13 to consent to voluntary admission, and the professional person  
14 believes that the minor meets the criteria for initial detention set  
15 forth herein, the facility may detain or arrange for the detention of  
16 the minor for up to twelve hours in order to enable a ((~~county-~~  
17 designated mental health professional)) designated crisis responder  
18 to evaluate the minor and commence initial detention proceedings  
19 under the provisions of this chapter.

20 **Sec. 261.** RCW 71.34.700 and 2015 c ... s 260 (section 260 of  
21 this act) are each amended to read as follows:

22 (1) If a minor, thirteen years or older, is brought to an  
23 evaluation and treatment facility or hospital emergency room for  
24 immediate mental health services, the professional person in charge  
25 of the facility shall evaluate the minor's mental condition,  
26 determine whether the minor suffers from a mental disorder, and  
27 whether the minor is in need of immediate inpatient treatment.

28 (2) If a minor, thirteen years or older, is brought to a secure  
29 detoxification facility ((~~with available space~~)), or a hospital  
30 emergency room for immediate substance use disorder treatment, the  
31 professional person in charge of the facility shall evaluate the  
32 minor's condition, determine whether the minor suffers from substance  
33 use disorder, and whether the minor is in need of immediate inpatient  
34 treatment.

35 (3) If it is determined under subsection (1) or (2) of this  
36 section that the minor suffers from a mental disorder or substance  
37 use disorder, inpatient treatment is required, the minor is unwilling  
38 to consent to voluntary admission, and the professional person  
39 believes that the minor meets the criteria for initial detention set

1 forth herein, the facility may detain or arrange for the detention of  
2 the minor for up to twelve hours in order to enable a designated  
3 crisis responder to evaluate the minor and commence initial detention  
4 proceedings under the provisions of this chapter.

5 **Sec. 262.** RCW 71.34.710 and 1995 c 312 s 53 are each amended to  
6 read as follows:

7 (1)(a)(i) When a (~~county-designated mental health professional~~)  
8 designated crisis responder receives information that a minor,  
9 thirteen years or older, as a result of a mental disorder presents a  
10 likelihood of serious harm or is gravely disabled, has investigated  
11 the specific facts alleged and of the credibility of the person or  
12 persons providing the information, and has determined that voluntary  
13 admission for inpatient treatment is not possible, the (~~county-~~  
14 ~~designated mental health professional~~) designated crisis responder  
15 may take the minor, or cause the minor to be taken, into custody and  
16 transported to an evaluation and treatment facility providing  
17 inpatient treatment.

18 (ii) When a designated crisis responder receives information that  
19 a minor, thirteen years or older, as a result of substance use  
20 disorder presents a likelihood of serious harm or is gravely  
21 disabled, has investigated the specific facts alleged and of the  
22 credibility of the person or persons providing the information, and  
23 has determined that voluntary admission for inpatient treatment is  
24 not possible, the designated crisis responder may take the minor, or  
25 cause the minor to be taken, into custody and transported to a secure  
26 detoxification facility or approved substance use disorder treatment  
27 program, if space is available in the facility or program.

28 (b) If the minor is not taken into custody for evaluation and  
29 treatment, the parent who has custody of the minor may seek review of  
30 that decision made by the (~~county-designated mental health~~  
31 ~~professional~~) designated crisis responder in court. The parent shall  
32 file notice with the court and provide a copy of the (~~county~~  
33 ~~designated mental health professional's~~) designated crisis  
34 responder's report or notes.

35 (2) Within twelve hours of the minor's arrival at the evaluation  
36 and treatment facility, secure detoxification facility, or approved  
37 substance use disorder treatment program, the (~~county-designated~~  
38 ~~mental health professional~~) designated crisis responder shall serve  
39 on the minor a copy of the petition for initial detention, notice of

1 initial detention, and statement of rights. The (~~county-designated~~  
2 ~~mental health professional~~) designated crisis responder shall file  
3 with the court on the next judicial day following the initial  
4 detention the original petition for initial detention, notice of  
5 initial detention, and statement of rights along with an affidavit of  
6 service. The (~~county-designated mental health professional~~)  
7 designated crisis responder shall commence service of the petition  
8 for initial detention and notice of the initial detention on the  
9 minor's parent and the minor's attorney as soon as possible following  
10 the initial detention.

11 (3) At the time of initial detention, the (~~county-designated~~  
12 ~~mental health professional~~) designated crisis responder shall advise  
13 the minor both orally and in writing that if admitted to the  
14 evaluation and treatment facility, secure detoxification facility, or  
15 approved substance use disorder treatment program for inpatient  
16 treatment, a commitment hearing shall be held within seventy-two  
17 hours of the minor's provisional acceptance to determine whether  
18 probable cause exists to commit the minor for further (~~mental~~  
19 ~~health~~) treatment.

20 The minor shall be advised that he or she has a right to  
21 communicate immediately with an attorney and that he or she has a  
22 right to have an attorney appointed to represent him or her before  
23 and at the hearing if the minor is indigent.

24 (4) Subject to subsection (5) of this section, whenever the  
25 (~~county-designated mental health professional~~) designated crisis  
26 responder petitions for detention of a minor under this chapter, an  
27 evaluation and treatment facility, secure detoxification facility, or  
28 approved substance use disorder treatment program providing seventy-  
29 two hour evaluation and treatment must immediately accept on a  
30 provisional basis the petition and the person. Within twenty-four  
31 hours of the minor's arrival, the facility must evaluate the minor's  
32 condition and either admit or release the minor in accordance with  
33 this chapter.

34 (5) A designated crisis responder may not petition for detention  
35 of a minor to a secure detoxification facility or approved substance  
36 use disorder treatment program unless there is space available in the  
37 facility or program.

38 (6) If a minor is not approved for admission by the inpatient  
39 evaluation and treatment facility, secure detoxification facility, or  
40 approved substance use disorder treatment program, the facility shall

1 make such recommendations and referrals for further care and  
2 treatment of the minor as necessary.

3 **Sec. 263.** RCW 71.34.710 and 2015 c ... s 262 (section 262 of  
4 this act) are each amended to read as follows:

5 (1)(a)(i) When a designated crisis responder receives information  
6 that a minor, thirteen years or older, as a result of a mental  
7 disorder presents a likelihood of serious harm or is gravely  
8 disabled, has investigated the specific facts alleged and of the  
9 credibility of the person or persons providing the information, and  
10 has determined that voluntary admission for inpatient treatment is  
11 not possible, the designated crisis responder may take the minor, or  
12 cause the minor to be taken, into custody and transported to an  
13 evaluation and treatment facility providing inpatient treatment.

14 (ii) When a designated crisis responder receives information that  
15 a minor, thirteen years or older, as a result of substance use  
16 disorder presents a likelihood of serious harm or is gravely  
17 disabled, has investigated the specific facts alleged and of the  
18 credibility of the person or persons providing the information, and  
19 has determined that voluntary admission for inpatient treatment is  
20 not possible, the designated crisis responder may take the minor, or  
21 cause the minor to be taken, into custody and transported to a secure  
22 detoxification facility or approved substance use disorder treatment  
23 program(~~(, if space is available in the facility or program)~~).

24 (b) If the minor is not taken into custody for evaluation and  
25 treatment, the parent who has custody of the minor may seek review of  
26 that decision made by the designated crisis responder in court. The  
27 parent shall file notice with the court and provide a copy of the  
28 designated crisis responder's report or notes.

29 (2) Within twelve hours of the minor's arrival at the evaluation  
30 and treatment facility, secure detoxification facility, or approved  
31 substance use disorder treatment program, the designated crisis  
32 responder shall serve on the minor a copy of the petition for initial  
33 detention, notice of initial detention, and statement of rights. The  
34 designated crisis responder shall file with the court on the next  
35 judicial day following the initial detention the original petition  
36 for initial detention, notice of initial detention, and statement of  
37 rights along with an affidavit of service. The designated crisis  
38 responder shall commence service of the petition for initial  
39 detention and notice of the initial detention on the minor's parent

1 and the minor's attorney as soon as possible following the initial  
2 detention.

3 (3) At the time of initial detention, the designated crisis  
4 responder shall advise the minor both orally and in writing that if  
5 admitted to the evaluation and treatment facility, secure  
6 detoxification facility, or approved substance use disorder treatment  
7 program for inpatient treatment, a commitment hearing shall be held  
8 within seventy-two hours of the minor's provisional acceptance to  
9 determine whether probable cause exists to commit the minor for  
10 further treatment.

11 The minor shall be advised that he or she has a right to  
12 communicate immediately with an attorney and that he or she has a  
13 right to have an attorney appointed to represent him or her before  
14 and at the hearing if the minor is indigent.

15 (4) (~~Subject to subsection (5) of this section,~~) Whenever the  
16 designated crisis responder petitions for detention of a minor under  
17 this chapter, an evaluation and treatment facility, secure  
18 detoxification facility, or approved substance use disorder treatment  
19 program providing seventy-two hour evaluation and treatment must  
20 immediately accept on a provisional basis the petition and the  
21 person. Within twenty-four hours of the minor's arrival, the facility  
22 must evaluate the minor's condition and either admit or release the  
23 minor in accordance with this chapter.

24 (5) (~~A designated crisis responder may not petition for  
25 detention of a minor to a secure detoxification facility or approved  
26 substance use disorder treatment program unless there is space  
27 available in the facility or program.~~

28 ~~(6))~~) If a minor is not approved for admission by the inpatient  
29 evaluation and treatment facility, secure detoxification facility, or  
30 approved substance use disorder treatment program, the facility shall  
31 make such recommendations and referrals for further care and  
32 treatment of the minor as necessary.

33 **Sec. 264.** RCW 71.34.720 and 2009 c 217 s 16 are each amended to  
34 read as follows:

35 (1) Each minor approved by the facility for inpatient admission  
36 shall be examined and evaluated by a children's mental health  
37 specialist, for minors admitted as a result of a mental disorder, or  
38 by a chemical dependency professional, for minors admitted as a  
39 result of a substance use disorder, as to the child's mental

1 condition and by a physician, physician assistant, or psychiatric  
2 advanced registered nurse practitioner as to the child's physical  
3 condition within twenty-four hours of admission. Reasonable measures  
4 shall be taken to ensure medical treatment is provided for any  
5 condition requiring immediate medical attention.

6 (2) If, after examination and evaluation, the children's mental  
7 health specialist or substance use disorder specialist and the  
8 physician, physician assistant, or psychiatric advanced registered  
9 nurse practitioner determine that the initial needs of the minor, if  
10 detained to an evaluation and treatment facility, would be better  
11 served by placement in a ~~((chemical dependency))~~ substance use  
12 disorder treatment facility or, if detained to a secure  
13 detoxification facility or approved substance use disorder treatment  
14 program, would be better served in an evaluation and treatment  
15 facility, then the minor shall be referred to ~~((an approved treatment~~  
16 ~~program defined under RCW 70.96A.020))~~ the more appropriate  
17 placement; however a minor may only be referred to a secure  
18 detoxification facility or approved substance use disorder treatment  
19 program if space is available in the facility or program.

20 (3) The admitting facility shall take reasonable steps to notify  
21 immediately the minor's parent of the admission.

22 (4) During the initial seventy-two hour treatment period, the  
23 minor has a right to associate or receive communications from parents  
24 or others unless the professional person in charge determines that  
25 such communication would be seriously detrimental to the minor's  
26 condition or treatment and so indicates in the minor's clinical  
27 record, and notifies the minor's parents of this determination. In no  
28 event may the minor be denied the opportunity to consult an attorney.

29 (5) If the evaluation and treatment facility, secure  
30 detoxification facility, or approved substance use disorder treatment  
31 program admits the minor, it may detain the minor for evaluation and  
32 treatment for a period not to exceed seventy-two hours from the time  
33 of provisional acceptance. The computation of such seventy-two hour  
34 period shall exclude Saturdays, Sundays, and holidays. This initial  
35 treatment period shall not exceed seventy-two hours except when an  
36 application for voluntary inpatient treatment is received or a  
37 petition for fourteen-day commitment is filed.

38 (6) Within twelve hours of the admission, the facility shall  
39 advise the minor of his or her rights as set forth in this chapter.

1       **Sec. 265.**   RCW 71.34.720 and 2015 c ... s 264 (section 264 of  
2 this act) are each amended to read as follows:

3       (1) Each minor approved by the facility for inpatient admission  
4 shall be examined and evaluated by a children's mental health  
5 specialist, for minors admitted as a result of a mental disorder, or  
6 by a chemical dependency professional, for minors admitted as a  
7 result of a substance use disorder, as to the child's mental  
8 condition and by a physician, physician assistant, or psychiatric  
9 advanced registered nurse practitioner as to the child's physical  
10 condition within twenty-four hours of admission. Reasonable measures  
11 shall be taken to ensure medical treatment is provided for any  
12 condition requiring immediate medical attention.

13       (2) If, after examination and evaluation, the children's mental  
14 health specialist or substance use disorder specialist and the  
15 physician, physician assistant, or psychiatric advanced registered  
16 nurse practitioner determine that the initial needs of the minor, if  
17 detained to an evaluation and treatment facility, would be better  
18 served by placement in a substance use disorder treatment facility  
19 or, if detained to a secure detoxification facility or approved  
20 substance use disorder treatment program, would be better served in  
21 an evaluation and treatment facility, then the minor shall be  
22 referred to the more appropriate placement(~~(; however a minor may~~  
23 ~~only be referred to a secure detoxification facility or approved~~  
24 ~~substance use disorder treatment program if space is available in the~~  
25 ~~facility or program)).~~

26       (3) The admitting facility shall take reasonable steps to notify  
27 immediately the minor's parent of the admission.

28       (4) During the initial seventy-two hour treatment period, the  
29 minor has a right to associate or receive communications from parents  
30 or others unless the professional person in charge determines that  
31 such communication would be seriously detrimental to the minor's  
32 condition or treatment and so indicates in the minor's clinical  
33 record, and notifies the minor's parents of this determination. In no  
34 event may the minor be denied the opportunity to consult an attorney.

35       (5) If the evaluation and treatment facility, secure  
36 detoxification facility, or approved substance use disorder treatment  
37 program admits the minor, it may detain the minor for evaluation and  
38 treatment for a period not to exceed seventy-two hours from the time  
39 of provisional acceptance. The computation of such seventy-two hour  
40 period shall exclude Saturdays, Sundays, and holidays. This initial

1 treatment period shall not exceed seventy-two hours except when an  
2 application for voluntary inpatient treatment is received or a  
3 petition for fourteen-day commitment is filed.

4 (6) Within twelve hours of the admission, the facility shall  
5 advise the minor of his or her rights as set forth in this chapter.

6 **Sec. 266.** RCW 71.34.730 and 2009 c 293 s 6 and 2009 c 217 s 17  
7 are each reenacted and amended to read as follows:

8 (1) The professional person in charge of an evaluation and  
9 treatment facility, secure detoxification facility, or approved  
10 substance use disorder treatment program where a minor has been  
11 admitted involuntarily for the initial seventy-two hour treatment  
12 period under this chapter may petition to have a minor committed to  
13 an evaluation and treatment facility or, in the case of a minor with  
14 a substance use disorder, to a secure detoxification facility or  
15 approved substance use disorder treatment program for fourteen-day  
16 diagnosis, evaluation, and treatment.

17 If the professional person in charge of the (~~treatment and~~  
18 ~~evaluation~~) facility does not petition to have the minor committed,  
19 the parent who has custody of the minor may seek review of that  
20 decision in court. The parent shall file notice with the court and  
21 provide a copy of the treatment and evaluation facility's report.

22 (2) A petition for commitment of a minor under this section shall  
23 be filed with the superior court in the county where the minor is  
24 residing or being detained.

25 (a) A petition for a fourteen-day commitment shall be signed by  
26 (i) two physicians, (ii) two psychiatric advanced registered nurse  
27 practitioners, (iii) ((a)) two physician assistants, (iv) one mental  
28 health professional and either a (A) physician, (B) physician  
29 assistant, or ((a)) (C) psychiatric advanced registered nurse  
30 practitioner, or ((iv)—a) (v) one physician and either a  
31 psychiatric advanced registered nurse practitioner or physician  
32 assistant. The person signing the petition must have examined the  
33 minor, and the petition must contain the following:

34 (A) The name and address of the petitioner;

35 (B) The name of the minor alleged to meet the criteria for  
36 fourteen-day commitment;

37 (C) The name, telephone number, and address if known of every  
38 person believed by the petitioner to be legally responsible for the  
39 minor;



1 (D) A statement that the petitioner has examined the minor and  
2 finds that the minor's condition meets required criteria for  
3 fourteen-day commitment and the supporting facts therefor;

4 (E) A statement that the minor has been advised of the need for  
5 voluntary treatment but has been unwilling or unable to consent to  
6 necessary treatment;

7 (F) If the petition is for mental health treatment or treatment  
8 for a substance use disorder that is based on use of a controlled  
9 substance, a statement that the minor has been advised of the loss of  
10 firearm rights if involuntarily committed;

11 (G) A statement recommending the appropriate facility or  
12 facilities to provide the necessary treatment; and

13 (H) A statement concerning whether a less restrictive alternative  
14 to inpatient treatment is in the best interests of the minor.

15 (b) A copy of the petition shall be personally delivered to the  
16 minor by the petitioner or petitioner's designee. A copy of the  
17 petition shall be sent to the minor's attorney and the minor's  
18 parent.

19 **Sec. 267.** RCW 71.34.740 and 2009 c 293 s 7 are each amended to  
20 read as follows:

21 (1) A commitment hearing shall be held within seventy-two hours  
22 of the minor's admission, excluding Saturday, Sunday, and holidays,  
23 unless a continuance is requested by the minor or the minor's  
24 attorney.

25 (2) The commitment hearing shall be conducted at the superior  
26 court or an appropriate place at the facility in which the minor is  
27 being detained.

28 (3) At the commitment hearing, the evidence in support of the  
29 petition shall be presented by the county prosecutor.

30 (4) The minor shall be present at the commitment hearing unless  
31 the minor, with the assistance of the minor's attorney, waives the  
32 right to be present at the hearing.

33 (5) If the parents are opposed to the petition, they may be  
34 represented at the hearing and shall be entitled to court-appointed  
35 counsel if they are indigent.

36 (6) At the commitment hearing, the minor shall have the following  
37 rights:

38 (a) To be represented by an attorney;

39 (b) To present evidence on his or her own behalf;

1 (c) To question persons testifying in support of the petition.

2 (7) If the hearing is for commitment for mental health treatment  
3 or treatment of a substance use disorder that is based on use of a  
4 controlled substance, the court at the time of the commitment hearing  
5 and before an order of commitment is entered shall inform the minor  
6 both orally and in writing that the failure to make a good faith  
7 effort to seek voluntary treatment as provided in RCW 71.34.730 will  
8 result in the loss of his or her firearm rights if the minor is  
9 subsequently detained for involuntary treatment under this section.

10 (8) If the minor has received medication within twenty-four hours  
11 of the hearing, the court shall be informed of that fact and of the  
12 probable effects of the medication.

13 (9) Rules of evidence shall not apply in fourteen-day commitment  
14 hearings.

15 (10) For a fourteen-day commitment, the court must find by a  
16 preponderance of the evidence that:

17 (a) The minor has a mental disorder or substance use disorder and  
18 presents a ((♣))likelihood of serious harm((♣)) or is ((♣))gravely  
19 disabled((♣));

20 (b) The minor is in need of evaluation and treatment of the type  
21 provided by the inpatient evaluation and treatment facility, secure  
22 detoxification facility, or approved substance use disorder treatment  
23 program to which continued inpatient care is sought or is in need of  
24 less restrictive alternative treatment found to be in the best  
25 interests of the minor; ((and))

26 (c) The minor is unwilling or unable in good faith to consent to  
27 voluntary treatment; and

28 (d) If commitment is to a secure detoxification facility or  
29 approved substance use disorder treatment program for inpatient  
30 treatment, there is available space at the facility or program.

31 (11) If the court finds that the minor meets the criteria for a  
32 fourteen-day commitment, the court shall either authorize commitment  
33 of the minor for inpatient treatment or for less restrictive  
34 alternative treatment upon such conditions as are necessary. If the  
35 court determines that the minor does not meet the criteria for a  
36 fourteen-day commitment, the minor shall be released.

37 (12) Nothing in this section prohibits the professional person in  
38 charge of the ((evaluation and treatment)) facility from releasing  
39 the minor at any time, when, in the opinion of the professional  
40 person in charge of the facility, further inpatient treatment is no

1 longer necessary. The release may be subject to reasonable conditions  
2 if appropriate.

3 Whenever a minor is released under this section, the professional  
4 person in charge shall within three days, notify the court in writing  
5 of the release.

6 (13) A minor who has been committed for fourteen days shall be  
7 released at the end of that period unless a petition for one hundred  
8 eighty-day commitment is pending before the court.

9 **Sec. 268.** RCW 71.34.740 and 2015 c ... s 267 (section 267 of  
10 this act) are each amended to read as follows:

11 (1) A commitment hearing shall be held within seventy-two hours  
12 of the minor's admission, excluding Saturday, Sunday, and holidays,  
13 unless a continuance is requested by the minor or the minor's  
14 attorney.

15 (2) The commitment hearing shall be conducted at the superior  
16 court or an appropriate place at the facility in which the minor is  
17 being detained.

18 (3) At the commitment hearing, the evidence in support of the  
19 petition shall be presented by the county prosecutor.

20 (4) The minor shall be present at the commitment hearing unless  
21 the minor, with the assistance of the minor's attorney, waives the  
22 right to be present at the hearing.

23 (5) If the parents are opposed to the petition, they may be  
24 represented at the hearing and shall be entitled to court-appointed  
25 counsel if they are indigent.

26 (6) At the commitment hearing, the minor shall have the following  
27 rights:

28 (a) To be represented by an attorney;

29 (b) To present evidence on his or her own behalf;

30 (c) To question persons testifying in support of the petition.

31 (7) If the hearing is for commitment for mental health treatment  
32 or treatment of a substance use disorder that is based on use of a  
33 controlled substance, the court at the time of the commitment hearing  
34 and before an order of commitment is entered shall inform the minor  
35 both orally and in writing that the failure to make a good faith  
36 effort to seek voluntary treatment as provided in RCW 71.34.730 will  
37 result in the loss of his or her firearm rights if the minor is  
38 subsequently detained for involuntary treatment under this section.

1 (8) If the minor has received medication within twenty-four hours  
2 of the hearing, the court shall be informed of that fact and of the  
3 probable effects of the medication.

4 (9) Rules of evidence shall not apply in fourteen-day commitment  
5 hearings.

6 (10) For a fourteen-day commitment, the court must find by a  
7 preponderance of the evidence that:

8 (a) The minor has a mental disorder or substance use disorder and  
9 presents a likelihood of serious harm or is gravely disabled;

10 (b) The minor is in need of evaluation and treatment of the type  
11 provided by the inpatient evaluation and treatment facility, secure  
12 detoxification facility, or approved substance use disorder treatment  
13 program to which continued inpatient care is sought or is in need of  
14 less restrictive alternative treatment found to be in the best  
15 interests of the minor; and

16 (c) The minor is unwilling or unable in good faith to consent to  
17 voluntary treatment(~~(; and~~

18 ~~(d) If commitment is to a secure detoxification facility or~~  
19 ~~approved substance use disorder treatment program for inpatient~~  
20 ~~treatment, there is available space at the facility or program)).~~

21 (11) If the court finds that the minor meets the criteria for a  
22 fourteen-day commitment, the court shall either authorize commitment  
23 of the minor for inpatient treatment or for less restrictive  
24 alternative treatment upon such conditions as are necessary. If the  
25 court determines that the minor does not meet the criteria for a  
26 fourteen-day commitment, the minor shall be released.

27 (12) Nothing in this section prohibits the professional person in  
28 charge of the facility from releasing the minor at any time, when, in  
29 the opinion of the professional person in charge of the facility,  
30 further inpatient treatment is no longer necessary. The release may  
31 be subject to reasonable conditions if appropriate.

32 Whenever a minor is released under this section, the professional  
33 person in charge shall within three days, notify the court in writing  
34 of the release.

35 (13) A minor who has been committed for fourteen days shall be  
36 released at the end of that period unless a petition for one hundred  
37 eighty-day commitment is pending before the court.

38 **Sec. 269.** RCW 71.34.750 and 2009 c 217 s 18 are each amended to  
39 read as follows:

1 (1) At any time during the minor's period of fourteen-day  
2 commitment, the professional person in charge may petition the court  
3 for an order requiring the minor to undergo an additional one hundred  
4 eighty-day period of treatment. The evidence in support of the  
5 petition shall be presented by the county prosecutor unless the  
6 petition is filed by the professional person in charge of a state-  
7 operated facility in which case the evidence shall be presented by  
8 the attorney general.

9 (2) The petition for one hundred eighty-day commitment shall  
10 contain the following:

11 (a) The name and address of the petitioner or petitioners;

12 (b) The name of the minor alleged to meet the criteria for one  
13 hundred eighty-day commitment;

14 (c) A statement that the petitioner is the professional person in  
15 charge of the evaluation and treatment facility, secure  
16 detoxification facility, or approved substance use disorder treatment  
17 program responsible for the treatment of the minor;

18 (d) The date of the fourteen-day commitment order; and

19 (e) A summary of the facts supporting the petition.

20 (3) The petition shall be supported by accompanying affidavits  
21 signed by (a) two examining physicians or physician assistants  
22 working under the license of an examining physician, one of whom  
23 shall be a child psychiatrist, or two psychiatric advanced registered  
24 nurse practitioners, one of whom shall be a child and adolescent or  
25 family psychiatric advanced registered nurse practitioner, (b) one  
26 children's mental health specialist and either: (i) An examining  
27 physician, (ii) a physician assistant, or (iii) a psychiatric  
28 advanced registered nurse practitioner, or (c) ~~((a))~~ one examining  
29 physician and either a psychiatric advanced registered nurse  
30 practitioner or physician assistant, one of which under this  
31 subsection (3)(c) needs to be a child psychiatrist or a child and  
32 adolescent psychiatric nurse practitioner. The affidavits shall  
33 describe in detail the behavior of the detained minor which supports  
34 the petition and shall state whether a less restrictive alternative  
35 to inpatient treatment is in the best interests of the minor.

36 (4) The petition for one hundred eighty-day commitment shall be  
37 filed with the clerk of the court at least three days before the  
38 expiration of the fourteen-day commitment period. The petitioner or  
39 the petitioner's designee shall within twenty-four hours of filing  
40 serve a copy of the petition on the minor and notify the minor's

1 attorney and the minor's parent. A copy of the petition shall be  
2 provided to such persons at least twenty-four hours prior to the  
3 hearing.

4 (5) At the time of filing, the court shall set a date within  
5 seven days for the hearing on the petition. The court may continue  
6 the hearing upon the written request of the minor or the minor's  
7 attorney for not more than ten days. The minor or the parents shall  
8 be afforded the same rights as in a fourteen-day commitment hearing.  
9 Treatment of the minor shall continue pending the proceeding.

10 (6) For one hundred eighty-day commitment(~~(7)~~):

11 (a) The court must find by clear, cogent, and convincing evidence  
12 that the minor:

13 ~~((a))~~ (i) Is suffering from a mental disorder;

14 ~~((b))~~ (ii) Presents a likelihood of serious harm or is gravely  
15 disabled; and

16 ~~((c))~~ (iii) Is in need of further treatment that only can be  
17 provided in a one hundred eighty-day commitment.

18 (b) If commitment is to an approved substance use disorder  
19 treatment program for inpatient treatment, the court must find that  
20 there is available space at the program.

21 (7) If the court finds that the criteria for commitment are met  
22 and that less restrictive treatment in a community setting is not  
23 appropriate or available, the court shall order the minor committed  
24 to the custody of the secretary for further inpatient mental health  
25 treatment (~~to the custody of the secretary~~), to an approved  
26 substance use disorder treatment program for further substance use  
27 disorder treatment, or to a private treatment and evaluation facility  
28 for the inpatient mental health or substance use disorder treatment  
29 if the minor's parents have assumed responsibility for payment for  
30 the treatment. If the court finds that a less restrictive alternative  
31 is in the best interest of the minor, the court shall order less  
32 restrictive alternative treatment upon such conditions as necessary.

33 If the court determines that the minor does not meet the criteria  
34 for one hundred eighty-day commitment, the minor shall be released.

35 (8) Successive one hundred eighty-day commitments are permissible  
36 on the same grounds and under the same procedures as the original one  
37 hundred eighty-day commitment. Such petitions shall be filed at least  
38 five days prior to the expiration of the previous one hundred eighty-  
39 day commitment order.

1       **Sec. 270.** RCW 71.34.750 and 2015 c ... s 269 (section 269 of  
2 this act) are each amended to read as follows:

3       (1) At any time during the minor's period of fourteen-day  
4 commitment, the professional person in charge may petition the court  
5 for an order requiring the minor to undergo an additional one hundred  
6 eighty-day period of treatment. The evidence in support of the  
7 petition shall be presented by the county prosecutor unless the  
8 petition is filed by the professional person in charge of a state-  
9 operated facility in which case the evidence shall be presented by  
10 the attorney general.

11       (2) The petition for one hundred eighty-day commitment shall  
12 contain the following:

13       (a) The name and address of the petitioner or petitioners;

14       (b) The name of the minor alleged to meet the criteria for one  
15 hundred eighty-day commitment;

16       (c) A statement that the petitioner is the professional person in  
17 charge of the evaluation and treatment facility, secure  
18 detoxification facility, or approved substance use disorder treatment  
19 program responsible for the treatment of the minor;

20       (d) The date of the fourteen-day commitment order; and

21       (e) A summary of the facts supporting the petition.

22       (3) The petition shall be supported by accompanying affidavits  
23 signed by (a) two examining physicians or physician assistants  
24 working under the license of an examining physician, one of whom  
25 shall be a child psychiatrist, or two psychiatric advanced registered  
26 nurse practitioners, one of whom shall be a child and adolescent or  
27 family psychiatric advanced registered nurse practitioner, (b) one  
28 children's mental health specialist and either: (i) An examining  
29 physician, (ii) a physician assistant, or (iii) a psychiatric  
30 advanced registered nurse practitioner, or (c) one examining  
31 physician and either a psychiatric advanced registered nurse  
32 practitioner or physician assistant, one of which under this  
33 subsection (3)(c) needs to be a child psychiatrist or a child and  
34 adolescent psychiatric nurse practitioner. The affidavits shall  
35 describe in detail the behavior of the detained minor which supports  
36 the petition and shall state whether a less restrictive alternative  
37 to inpatient treatment is in the best interests of the minor.

38       (4) The petition for one hundred eighty-day commitment shall be  
39 filed with the clerk of the court at least three days before the  
40 expiration of the fourteen-day commitment period. The petitioner or

1 the petitioner's designee shall within twenty-four hours of filing  
2 serve a copy of the petition on the minor and notify the minor's  
3 attorney and the minor's parent. A copy of the petition shall be  
4 provided to such persons at least twenty-four hours prior to the  
5 hearing.

6 (5) At the time of filing, the court shall set a date within  
7 seven days for the hearing on the petition. The court may continue  
8 the hearing upon the written request of the minor or the minor's  
9 attorney for not more than ten days. The minor or the parents shall  
10 be afforded the same rights as in a fourteen-day commitment hearing.  
11 Treatment of the minor shall continue pending the proceeding.

12 (6) For one hundred eighty-day commitment(~~(+~~  
13 ~~a))~~), the court must find by clear, cogent, and convincing  
14 evidence that the minor:

15 ~~((i))~~ (a) Is suffering from a mental disorder;

16 ~~((ii))~~ (b) Presents a likelihood of serious harm or is gravely  
17 disabled; and

18 ~~((iii))~~ (c) Is in need of further treatment that only can be  
19 provided in a one hundred eighty-day commitment.

20 ~~((b) If commitment is to an approved substance use disorder  
21 treatment program for inpatient treatment, the court must find that  
22 there is available space at the program.))~~

23 (7) If the court finds that the criteria for commitment are met  
24 and that less restrictive treatment in a community setting is not  
25 appropriate or available, the court shall order the minor committed  
26 to the custody of the secretary for further inpatient mental health  
27 treatment, to an approved substance use disorder treatment program  
28 for further substance use disorder treatment, or to a private  
29 treatment and evaluation facility for the inpatient mental health or  
30 substance use disorder treatment if the minor's parents have assumed  
31 responsibility for payment for the treatment. If the court finds that  
32 a less restrictive alternative is in the best interest of the minor,  
33 the court shall order less restrictive alternative treatment upon  
34 such conditions as necessary.

35 If the court determines that the minor does not meet the criteria  
36 for one hundred eighty-day commitment, the minor shall be released.

37 (8) Successive one hundred eighty-day commitments are permissible  
38 on the same grounds and under the same procedures as the original one  
39 hundred eighty-day commitment. Such petitions shall be filed at least



1 five days prior to the expiration of the previous one hundred eighty-  
2 day commitment order.

3 **Sec. 271.** RCW 71.34.760 and 1985 c 354 s 10 are each amended to  
4 read as follows:

5 (1) If a minor is committed for one hundred eighty-day inpatient  
6 treatment and is to be placed in a state-supported program, the  
7 secretary shall accept immediately and place the minor in a state-  
8 funded long-term evaluation and treatment facility or state-funded  
9 approved substance use disorder treatment program.

10 (2) The secretary's placement authority shall be exercised  
11 through a designated placement committee appointed by the secretary  
12 and composed of children's mental health specialists and chemical  
13 dependency professionals, including at least one child psychiatrist  
14 who represents the state-funded, long-term, evaluation and treatment  
15 facility for minors and one chemical dependency professional who  
16 represents the state-funded approved substance use disorder treatment  
17 program. The responsibility of the placement committee will be to:

18 (a) Make the long-term placement of the minor in the most  
19 appropriate, available state-funded evaluation and treatment facility  
20 or approved substance use disorder treatment program, having  
21 carefully considered factors including the treatment needs of the  
22 minor, the most appropriate facility able to respond to the minor's  
23 identified treatment needs, the geographic proximity of the facility  
24 to the minor's family, the immediate availability of bed space, and  
25 the probable impact of the placement on other residents of the  
26 facility;

27 (b) Approve or deny requests from treatment facilities for  
28 transfer of a minor to another facility;

29 (c) Receive and monitor reports required under this section;

30 (d) Receive and monitor reports of all discharges.

31 (3) The secretary may authorize transfer of minors among  
32 treatment facilities if the transfer is in the best interests of the  
33 minor or due to treatment priorities.

34 (4) The responsible state-funded evaluation and treatment  
35 facility or approved substance use disorder treatment program shall  
36 submit a report to the department's designated placement committee  
37 within ninety days of admission and no less than every one hundred  
38 eighty days thereafter, setting forth such facts as the department  
39 requires, including the minor's individual treatment plan and

1 progress, recommendations for future treatment, and possible less  
2 restrictive treatment.

3 **Sec. 272.** RCW 71.34.780 and 1985 c 354 s 11 are each amended to  
4 read as follows:

5 (1) If the professional person in charge of an outpatient  
6 treatment program, a (~~county-designated mental health professional~~)  
7 designated crisis responder, or the secretary determines that a minor  
8 is failing to adhere to the conditions of the court order for less  
9 restrictive alternative treatment or the conditions for the  
10 conditional release, or that substantial deterioration in the minor's  
11 functioning has occurred, the (~~county-designated mental health~~  
12 ~~professional~~) designated crisis responder, or the secretary may  
13 order that the minor, if committed for mental health treatment, be  
14 taken into custody and transported to an inpatient evaluation and  
15 treatment facility or, if committed for substance use disorder  
16 treatment, be taken into custody and transported to a secure  
17 detoxification facility or approved substance use disorder treatment  
18 program if there is available space in the secure detoxification  
19 facility or approved substance use disorder treatment program.

20 (2) The (~~county-designated mental health professional~~)  
21 designated crisis responder or the secretary shall file the order of  
22 apprehension and detention and serve it upon the minor and notify the  
23 minor's parent and the minor's attorney, if any, of the detention  
24 within two days of return. At the time of service the minor shall be  
25 informed of the right to a hearing and to representation by an  
26 attorney. The (~~county-designated mental health professional~~)  
27 designated crisis responder or the secretary may modify or rescind  
28 the order of apprehension and detention at any time prior to the  
29 hearing.

30 (3) A petition for revocation of less restrictive alternative  
31 treatment shall be filed by the (~~county-designated mental health~~  
32 ~~professional~~) designated crisis responder or the secretary with the  
33 court in the county ordering the less restrictive alternative  
34 treatment. The court shall conduct the hearing in that county. A  
35 petition for revocation of conditional release may be filed with the  
36 court in the county ordering inpatient treatment or the county where  
37 the minor on conditional release is residing. A petition shall  
38 describe the behavior of the minor indicating violation of the  
39 conditions or deterioration of routine functioning and a

1 dispositional recommendation. Upon motion for good cause, the hearing  
2 may be transferred to the county of the minor's residence or to the  
3 county in which the alleged violations occurred. The hearing shall be  
4 held within seven days of the minor's return. The issues to be  
5 determined are whether the minor did or did not adhere to the  
6 conditions of the less restrictive alternative treatment or  
7 conditional release, or whether the minor's routine functioning has  
8 substantially deteriorated, and, if so, whether the conditions of  
9 less restrictive alternative treatment or conditional release should  
10 be modified or, subject to subsection (4) of this section, whether  
11 the minor should be returned to inpatient treatment. Pursuant to the  
12 determination of the court, the minor shall be returned to less  
13 restrictive alternative treatment or conditional release on the same  
14 or modified conditions or shall be returned to inpatient treatment.  
15 If the minor is returned to inpatient treatment, RCW 71.34.760  
16 regarding the secretary's placement responsibility shall apply. The  
17 hearing may be waived by the minor and the minor returned to  
18 inpatient treatment or to less restrictive alternative treatment or  
19 conditional release on the same or modified conditions.

20 (4) A court may not order the return of a minor to inpatient  
21 treatment in a secure detoxification facility or approved treatment  
22 program unless there is available space in the facility or program.

23 **Sec. 273.** RCW 71.34.780 and 2015 c ... s 272 (section 272 of  
24 this act) are each amended to read as follows:

25 (1) If the professional person in charge of an outpatient  
26 treatment program, a designated crisis responder, or the secretary  
27 determines that a minor is failing to adhere to the conditions of the  
28 court order for less restrictive alternative treatment or the  
29 conditions for the conditional release, or that substantial  
30 deterioration in the minor's functioning has occurred, the designated  
31 crisis responder, or the secretary may order that the minor, if  
32 committed for mental health treatment, be taken into custody and  
33 transported to an inpatient evaluation and treatment facility or, if  
34 committed for substance use disorder treatment, be taken into custody  
35 and transported to a secure detoxification facility or approved  
36 substance use disorder treatment program (~~(if there is available~~  
37 ~~space in the secure detoxification facility or approved substance use~~  
38 ~~disorder treatment program)~~).

1 (2) The designated crisis responder or the secretary shall file  
2 the order of apprehension and detention and serve it upon the minor  
3 and notify the minor's parent and the minor's attorney, if any, of  
4 the detention within two days of return. At the time of service the  
5 minor shall be informed of the right to a hearing and to  
6 representation by an attorney. The designated crisis responder or the  
7 secretary may modify or rescind the order of apprehension and  
8 detention at any time prior to the hearing.

9 (3) A petition for revocation of less restrictive alternative  
10 treatment shall be filed by the designated crisis responder or the  
11 secretary with the court in the county ordering the less restrictive  
12 alternative treatment. The court shall conduct the hearing in that  
13 county. A petition for revocation of conditional release may be filed  
14 with the court in the county ordering inpatient treatment or the  
15 county where the minor on conditional release is residing. A petition  
16 shall describe the behavior of the minor indicating violation of the  
17 conditions or deterioration of routine functioning and a  
18 dispositional recommendation. Upon motion for good cause, the hearing  
19 may be transferred to the county of the minor's residence or to the  
20 county in which the alleged violations occurred. The hearing shall be  
21 held within seven days of the minor's return. The issues to be  
22 determined are whether the minor did or did not adhere to the  
23 conditions of the less restrictive alternative treatment or  
24 conditional release, or whether the minor's routine functioning has  
25 substantially deteriorated, and, if so, whether the conditions of  
26 less restrictive alternative treatment or conditional release should  
27 be modified or ~~((, subject to subsection (4) of this section,))~~  
28 whether the minor should be returned to inpatient treatment. Pursuant  
29 to the determination of the court, the minor shall be returned to  
30 less restrictive alternative treatment or conditional release on the  
31 same or modified conditions or shall be returned to inpatient  
32 treatment. If the minor is returned to inpatient treatment, RCW  
33 71.34.760 regarding the secretary's placement responsibility shall  
34 apply. The hearing may be waived by the minor and the minor returned  
35 to inpatient treatment or to less restrictive alternative treatment  
36 or conditional release on the same or modified conditions.

37 ~~((4) A court may not order the return of a minor to inpatient  
38 treatment in a secure detoxification facility or approved treatment  
39 program unless there is available space in the facility or program.))~~

1        NEW SECTION.    **Sec. 274.**    A new section is added to chapter 71.34  
2    RCW to read as follows:

3        The limitation on firearm rights based on involuntary commitment  
4    for treatment of a substance use disorder shall be strictly construed  
5    to apply only if the person would otherwise have his or her firearm  
6    rights limited under federal law.

7        **Sec. 275.**    RCW 9.41.010 and 2015 c 1 s 2 (Initiative Measure No.  
8    594) are each amended to read as follows:

9        Unless the context clearly requires otherwise, the definitions in  
10   this section apply throughout this chapter.

11        (1) "Antique firearm" means a firearm or replica of a firearm not  
12   designed or redesigned for using rim fire or conventional center fire  
13   ignition with fixed ammunition and manufactured in or before 1898,  
14   including any matchlock, flintlock, percussion cap, or similar type  
15   of ignition system and also any firearm using fixed ammunition  
16   manufactured in or before 1898, for which ammunition is no longer  
17   manufactured in the United States and is not readily available in the  
18   ordinary channels of commercial trade.

19        (2) "Barrel length" means the distance from the bolt face of a  
20   closed action down the length of the axis of the bore to the crown of  
21   the muzzle, or in the case of a barrel with attachments to the end of  
22   any legal device permanently attached to the end of the muzzle.

23        (3) "Crime of violence" means:

24        (a) Any of the following felonies, as now existing or hereafter  
25   amended: Any felony defined under any law as a class A felony or an  
26   attempt to commit a class A felony, criminal solicitation of or  
27   criminal conspiracy to commit a class A felony, manslaughter in the  
28   first degree, manslaughter in the second degree, indecent liberties  
29   if committed by forcible compulsion, kidnapping in the second degree,  
30   arson in the second degree, assault in the second degree, assault of  
31   a child in the second degree, extortion in the first degree, burglary  
32   in the second degree, residential burglary, and robbery in the second  
33   degree;

34        (b) Any conviction for a felony offense in effect at any time  
35   prior to June 6, 1996, which is comparable to a felony classified as  
36   a crime of violence in (a) of this subsection; and

37        (c) Any federal or out-of-state conviction for an offense  
38   comparable to a felony classified as a crime of violence under (a) or  
39   (b) of this subsection.

1 (4) "Dealer" means a person engaged in the business of selling  
2 firearms at wholesale or retail who has, or is required to have, a  
3 federal firearms license under 18 U.S.C. Sec. 923(a). A person who  
4 does not have, and is not required to have, a federal firearms  
5 license under 18 U.S.C. Sec. 923(a), is not a dealer if that person  
6 makes only occasional sales, exchanges, or purchases of firearms for  
7 the enhancement of a personal collection or for a hobby, or sells all  
8 or part of his or her personal collection of firearms.

9 (5) "Family or household member" means "family" or "household  
10 member" as used in RCW 10.99.020.

11 (6) "Felony" means any felony offense under the laws of this  
12 state or any federal or out-of-state offense comparable to a felony  
13 offense under the laws of this state.

14 (7) "Felony firearm offender" means a person who has previously  
15 been convicted or found not guilty by reason of insanity in this  
16 state of any felony firearm offense. A person is not a felony firearm  
17 offender under this chapter if any and all qualifying offenses have  
18 been the subject of an expungement, pardon, annulment, certificate,  
19 or rehabilitation, or other equivalent procedure based on a finding  
20 of the rehabilitation of the person convicted or a pardon, annulment,  
21 or other equivalent procedure based on a finding of innocence.

22 (8) "Felony firearm offense" means:

23 (a) Any felony offense that is a violation of this chapter;

24 (b) A violation of RCW 9A.36.045;

25 (c) A violation of RCW 9A.56.300;

26 (d) A violation of RCW 9A.56.310;

27 (e) Any felony offense if the offender was armed with a firearm  
28 in the commission of the offense.

29 (9) "Firearm" means a weapon or device from which a projectile or  
30 projectiles may be fired by an explosive such as gunpowder.

31 (10) "Gun" has the same meaning as firearm.

32 (11) "Law enforcement officer" includes a general authority  
33 Washington peace officer as defined in RCW 10.93.020, or a specially  
34 commissioned Washington peace officer as defined in RCW 10.93.020.  
35 "Law enforcement officer" also includes a limited authority  
36 Washington peace officer as defined in RCW 10.93.020 if such officer  
37 is duly authorized by his or her employer to carry a concealed  
38 pistol.

1 (12) "Lawful permanent resident" has the same meaning afforded a  
2 person "lawfully admitted for permanent residence" in 8 U.S.C. Sec.  
3 1101(a)(20).

4 (13) "Licensed dealer" means a person who is federally licensed  
5 under 18 U.S.C. Sec. 923(a).

6 (14) "Loaded" means:

7 (a) There is a cartridge in the chamber of the firearm;

8 (b) Cartridges are in a clip that is locked in place in the  
9 firearm;

10 (c) There is a cartridge in the cylinder of the firearm, if the  
11 firearm is a revolver;

12 (d) There is a cartridge in the tube or magazine that is inserted  
13 in the action; or

14 (e) There is a ball in the barrel and the firearm is capped or  
15 primed if the firearm is a muzzle loader.

16 (15) "Machine gun" means any firearm known as a machine gun,  
17 mechanical rifle, submachine gun, or any other mechanism or  
18 instrument not requiring that the trigger be pressed for each shot  
19 and having a reservoir clip, disc, drum, belt, or other separable  
20 mechanical device for storing, carrying, or supplying ammunition  
21 which can be loaded into the firearm, mechanism, or instrument, and  
22 fired therefrom at the rate of five or more shots per second.

23 (16) "Nonimmigrant alien" means a person defined as such in 8  
24 U.S.C. Sec. 1101(a)(15).

25 (17) "Person" means any individual, corporation, company,  
26 association, firm, partnership, club, organization, society, joint  
27 stock company, or other legal entity.

28 (18) "Pistol" means any firearm with a barrel less than sixteen  
29 inches in length, or is designed to be held and fired by the use of a  
30 single hand.

31 (19) "Rifle" means a weapon designed or redesigned, made or  
32 remade, and intended to be fired from the shoulder and designed or  
33 redesigned, made or remade, and intended to use the energy of the  
34 explosive in a fixed metallic cartridge to fire only a single  
35 projectile through a rifled bore for each single pull of the trigger.

36 (20) "Sale" and "sell" mean the actual approval of the delivery  
37 of a firearm in consideration of payment or promise of payment.

38 (21) "Serious offense" means any of the following felonies or a  
39 felony attempt to commit any of the following felonies, as now  
40 existing or hereafter amended:

- 1 (a) Any crime of violence;
- 2 (b) Any felony violation of the uniform controlled substances  
3 act, chapter 69.50 RCW, that is classified as a class B felony or  
4 that has a maximum term of imprisonment of at least ten years;
- 5 (c) Child molestation in the second degree;
- 6 (d) Incest when committed against a child under age fourteen;
- 7 (e) Indecent liberties;
- 8 (f) Leading organized crime;
- 9 (g) Promoting prostitution in the first degree;
- 10 (h) Rape in the third degree;
- 11 (i) Drive-by shooting;
- 12 (j) Sexual exploitation;
- 13 (k) Vehicular assault, when caused by the operation or driving of  
14 a vehicle by a person while under the influence of intoxicating  
15 liquor or any drug or by the operation or driving of a vehicle in a  
16 reckless manner;
- 17 (l) Vehicular homicide, when proximately caused by the driving of  
18 any vehicle by any person while under the influence of intoxicating  
19 liquor or any drug as defined by RCW 46.61.502, or by the operation  
20 of any vehicle in a reckless manner;
- 21 (m) Any other class B felony offense with a finding of sexual  
22 motivation, as "sexual motivation" is defined under RCW 9.94A.030;
- 23 (n) Any other felony with a deadly weapon verdict under RCW  
24 9.94A.825;
- 25 (o) Any felony offense in effect at any time prior to June 6,  
26 1996, that is comparable to a serious offense, or any federal or out-  
27 of-state conviction for an offense that under the laws of this state  
28 would be a felony classified as a serious offense; or
- 29 (p) Any felony conviction under RCW 9.41.115.
- 30 (22) "Short-barreled rifle" means a rifle having one or more  
31 barrels less than sixteen inches in length and any weapon made from a  
32 rifle by any means of modification if such modified weapon has an  
33 overall length of less than twenty-six inches.
- 34 (23) "Short-barreled shotgun" means a shotgun having one or more  
35 barrels less than eighteen inches in length and any weapon made from  
36 a shotgun by any means of modification if such modified weapon has an  
37 overall length of less than twenty-six inches.
- 38 (24) "Shotgun" means a weapon with one or more barrels, designed  
39 or redesigned, made or remade, and intended to be fired from the  
40 shoulder and designed or redesigned, made or remade, and intended to



1 use the energy of the explosive in a fixed shotgun shell to fire  
2 through a smooth bore either a number of ball shot or a single  
3 projectile for each single pull of the trigger.

4 (25) "Transfer" means the intended delivery of a firearm to  
5 another person without consideration of payment or promise of payment  
6 including, but not limited to, gifts and loans.

7 (26) "Unlicensed person" means any person who is not a licensed  
8 dealer under this chapter.

9 (27) "Controlled substance" has the same meaning as under the  
10 federal controlled substances act, 21 U.S.C. Sec. 802.

11 **Sec. 276.** RCW 9.41.040 and 2014 c 111 s 1 are each amended to  
12 read as follows:

13 (1)(a) A person, whether an adult or juvenile, is guilty of the  
14 crime of unlawful possession of a firearm in the first degree, if the  
15 person owns, has in his or her possession, or has in his or her  
16 control any firearm after having previously been convicted or found  
17 not guilty by reason of insanity in this state or elsewhere of any  
18 serious offense as defined in this chapter.

19 (b) Unlawful possession of a firearm in the first degree is a  
20 class B felony punishable according to chapter 9A.20 RCW.

21 (2)(a) A person, whether an adult or juvenile, is guilty of the  
22 crime of unlawful possession of a firearm in the second degree, if  
23 the person does not qualify under subsection (1) of this section for  
24 the crime of unlawful possession of a firearm in the first degree and  
25 the person owns, has in his or her possession, or has in his or her  
26 control any firearm:

27 (i) After having previously been convicted or found not guilty by  
28 reason of insanity in this state or elsewhere of any felony not  
29 specifically listed as prohibiting firearm possession under  
30 subsection (1) of this section, or any of the following crimes when  
31 committed by one family or household member against another,  
32 committed on or after July 1, 1993: Assault in the fourth degree,  
33 coercion, stalking, reckless endangerment, criminal trespass in the  
34 first degree, or violation of the provisions of a protection order or  
35 no-contact order restraining the person or excluding the person from  
36 a residence (RCW 26.50.060, 26.50.070, 26.50.130, or 10.99.040);

37 (ii) During any period of time that the person is subject to a  
38 court order issued under chapter 7.90, 7.92, 9A.46, 10.14, 10.99,  
39 26.09, 26.10, 26.26, or 26.50 RCW that:

1 (A) Was issued after a hearing of which the person received  
2 actual notice, and at which the person had an opportunity to  
3 participate;

4 (B) Restrains the person from harassing, stalking, or threatening  
5 an intimate partner of the person or child of the intimate partner or  
6 person, or engaging in other conduct that would place an intimate  
7 partner in reasonable fear of bodily injury to the partner or child;  
8 and

9 (C)(I) Includes a finding that the person represents a credible  
10 threat to the physical safety of the intimate partner or child; and

11 (II) By its terms, explicitly prohibits the use, attempted use,  
12 or threatened use of physical force against the intimate partner or  
13 child that would reasonably be expected to cause bodily injury;

14 (iii) Subject to section 281 of this act, after having previously  
15 been involuntarily committed for mental health treatment or treatment  
16 of a substance use disorder that is based on use of a controlled  
17 substance under RCW 71.05.240, 71.05.320, 71.34.740, 71.34.750,  
18 chapter 10.77 RCW, or equivalent statutes of another jurisdiction,  
19 unless his or her right to possess a firearm has been restored as  
20 provided in RCW 9.41.047;

21 (iv) If the person is under eighteen years of age, except as  
22 provided in RCW 9.41.042; and/or

23 (v) If the person is free on bond or personal recognizance  
24 pending trial, appeal, or sentencing for a serious offense as defined  
25 in RCW 9.41.010.

26 (b) Unlawful possession of a firearm in the second degree is a  
27 class C felony punishable according to chapter 9A.20 RCW.

28 (3) Notwithstanding RCW 9.41.047 or any other provisions of law,  
29 as used in this chapter, a person has been "convicted", whether in an  
30 adult court or adjudicated in a juvenile court, at such time as a  
31 plea of guilty has been accepted, or a verdict of guilty has been  
32 filed, notwithstanding the pendency of any future proceedings  
33 including but not limited to sentencing or disposition, post-trial or  
34 post-fact-finding motions, and appeals. Conviction includes a  
35 dismissal entered after a period of probation, suspension or deferral  
36 of sentence, and also includes equivalent dispositions by courts in  
37 jurisdictions other than Washington state. A person shall not be  
38 precluded from possession of a firearm if the conviction has been the  
39 subject of a pardon, annulment, certificate of rehabilitation, or  
40 other equivalent procedure based on a finding of the rehabilitation

1 of the person convicted or the conviction or disposition has been the  
2 subject of a pardon, annulment, or other equivalent procedure based  
3 on a finding of innocence. Where no record of the court's disposition  
4 of the charges can be found, there shall be a rebuttable presumption  
5 that the person was not convicted of the charge.

6 (4)(a) Notwithstanding subsection (1) or (2) of this section, a  
7 person convicted or found not guilty by reason of insanity of an  
8 offense prohibiting the possession of a firearm under this section  
9 other than murder, manslaughter, robbery, rape, indecent liberties,  
10 arson, assault, kidnapping, extortion, burglary, or violations with  
11 respect to controlled substances under RCW 69.50.401 and 69.50.410,  
12 who received a probationary sentence under RCW 9.95.200, and who  
13 received a dismissal of the charge under RCW 9.95.240, shall not be  
14 precluded from possession of a firearm as a result of the conviction  
15 or finding of not guilty by reason of insanity. Notwithstanding any  
16 other provisions of this section, if a person is prohibited from  
17 possession of a firearm under subsection (1) or (2) of this section  
18 and has not previously been convicted or found not guilty by reason  
19 of insanity of a sex offense prohibiting firearm ownership under  
20 subsection (1) or (2) of this section and/or any felony defined under  
21 any law as a class A felony or with a maximum sentence of at least  
22 twenty years, or both, the individual may petition a court of record  
23 to have his or her right to possess a firearm restored:

24 (i) Under RCW 9.41.047; and/or

25 (ii)(A) If the conviction or finding of not guilty by reason of  
26 insanity was for a felony offense, after five or more consecutive  
27 years in the community without being convicted or found not guilty by  
28 reason of insanity or currently charged with any felony, gross  
29 misdemeanor, or misdemeanor crimes, if the individual has no prior  
30 felony convictions that prohibit the possession of a firearm counted  
31 as part of the offender score under RCW 9.94A.525; or

32 (B) If the conviction or finding of not guilty by reason of  
33 insanity was for a nonfelony offense, after three or more consecutive  
34 years in the community without being convicted or found not guilty by  
35 reason of insanity or currently charged with any felony, gross  
36 misdemeanor, or misdemeanor crimes, if the individual has no prior  
37 felony convictions that prohibit the possession of a firearm counted  
38 as part of the offender score under RCW 9.94A.525 and the individual  
39 has completed all conditions of the sentence.

1 (b) An individual may petition a court of record to have his or  
2 her right to possess a firearm restored under (a) of this subsection  
3 (4) only at:

4 (i) The court of record that ordered the petitioner's prohibition  
5 on possession of a firearm; or

6 (ii) The superior court in the county in which the petitioner  
7 resides.

8 (5) In addition to any other penalty provided for by law, if a  
9 person under the age of eighteen years is found by a court to have  
10 possessed a firearm in a vehicle in violation of subsection (1) or  
11 (2) of this section or to have committed an offense while armed with  
12 a firearm during which offense a motor vehicle served an integral  
13 function, the court shall notify the department of licensing within  
14 twenty-four hours and the person's privilege to drive shall be  
15 revoked under RCW 46.20.265.

16 (6) Nothing in chapter 129, Laws of 1995 shall ever be construed  
17 or interpreted as preventing an offender from being charged and  
18 subsequently convicted for the separate felony crimes of theft of a  
19 firearm or possession of a stolen firearm, or both, in addition to  
20 being charged and subsequently convicted under this section for  
21 unlawful possession of a firearm in the first or second degree.  
22 Notwithstanding any other law, if the offender is convicted under  
23 this section for unlawful possession of a firearm in the first or  
24 second degree and for the felony crimes of theft of a firearm or  
25 possession of a stolen firearm, or both, then the offender shall  
26 serve consecutive sentences for each of the felony crimes of  
27 conviction listed in this subsection.

28 (7) Each firearm unlawfully possessed under this section shall be  
29 a separate offense.

30 (8) For purposes of this section, "intimate partner" includes: A  
31 spouse, a domestic partner, a former spouse, a former domestic  
32 partner, a person with whom the restrained person has a child in  
33 common, or a person with whom the restrained person has cohabitated  
34 or is cohabitating as part of a dating relationship.

35 **Sec. 277.** RCW 9.41.047 and 2011 c 193 s 2 are each amended to  
36 read as follows:

37 (1)(a) At the time a person is convicted or found not guilty by  
38 reason of insanity of an offense making the person ineligible to  
39 possess a firearm, or at the time a person is committed by court

1 order under RCW 71.05.240, 71.05.320, 71.34.740, 71.34.750, or  
2 chapter 10.77 RCW for mental health treatment or treatment of a  
3 substance use disorder that is based on use of a controlled  
4 substance, subject to section 281 of this act, the convicting or  
5 committing court shall notify the person, orally and in writing, that  
6 the person must immediately surrender any concealed pistol license  
7 and that the person may not possess a firearm unless his or her right  
8 to do so is restored by a court of record. For purposes of this  
9 section a convicting court includes a court in which a person has  
10 been found not guilty by reason of insanity.

11 (b) The convicting or committing court shall forward within three  
12 judicial days after conviction or entry of the commitment order a  
13 copy of the person's driver's license or identicard, or comparable  
14 information, along with the date of conviction or commitment, to the  
15 department of licensing. When a person is committed by court order  
16 under RCW 71.05.240, 71.05.320, 71.34.740, 71.34.750, or chapter  
17 10.77 RCW, for mental health treatment or for treatment of a  
18 substance use disorder that is based on use of a controlled  
19 substance, the committing court also shall forward, within three  
20 judicial days after entry of the commitment order, a copy of the  
21 person's driver's license, or comparable information, along with the  
22 date of commitment, to the national instant criminal background check  
23 system index, denied persons file, created by the federal Brady  
24 handgun violence prevention act (P.L. 103-159). A court ordering  
25 commitment for treatment of a substance use disorder under chapter  
26 71.05 or 71.34 RCW shall only forward the information described in  
27 this subsection to the department of licensing and the national  
28 instant criminal background check system index, denied persons file,  
29 if the limitation on firearm rights applies according to RCW 9.41.040  
30 and section 281 of this act.

31 (2) Upon receipt of the information provided for by subsection  
32 (1) of this section, the department of licensing shall determine if  
33 the convicted or committed person has a concealed pistol license. If  
34 the person does have a concealed pistol license, the department of  
35 licensing shall immediately notify the license-issuing authority  
36 which, upon receipt of such notification, shall immediately revoke  
37 the license.

38 (3)(a) A person who is prohibited from possessing a firearm, by  
39 reason of having been involuntarily committed for mental health  
40 treatment or treatment of a substance use disorder that is based on

1 use of a controlled substance under RCW 71.05.240, 71.05.320,  
2 71.34.740, 71.34.750, chapter 10.77 RCW, or equivalent statutes of  
3 another jurisdiction may, upon discharge, petition the superior court  
4 to have his or her right to possess a firearm restored.

5 (b) The petition must be brought in the superior court that  
6 ordered the involuntary commitment or the superior court of the  
7 county in which the petitioner resides.

8 (c) Except as provided in (d) of this subsection, the court shall  
9 restore the petitioner's right to possess a firearm if the petitioner  
10 proves by a preponderance of the evidence that:

11 (i) The petitioner is no longer required to participate in court-  
12 ordered inpatient or outpatient treatment;

13 (ii) The petitioner has successfully managed the condition  
14 related to the commitment;

15 (iii) The petitioner no longer presents a substantial danger to  
16 himself or herself, or the public; and

17 (iv) The symptoms related to the commitment are not reasonably  
18 likely to recur.

19 (d) If a preponderance of the evidence in the record supports a  
20 finding that the person petitioning the court has engaged in violence  
21 and that it is more likely than not that the person will engage in  
22 violence after his or her right to possess a firearm is restored, the  
23 person shall bear the burden of proving by clear, cogent, and  
24 convincing evidence that he or she does not present a substantial  
25 danger to the safety of others.

26 (e) When a person's right to possess a firearm has been restored  
27 under this subsection, the court shall forward, within three judicial  
28 days after entry of the restoration order, notification that the  
29 person's right to possess a firearm has been restored to the  
30 department of licensing, the department of social and health  
31 services, and the national instant criminal background check system  
32 index, denied persons file.

33 (4) No person who has been found not guilty by reason of insanity  
34 may petition a court for restoration of the right to possess a  
35 firearm unless the person meets the requirements for the restoration  
36 of the right to possess a firearm under RCW 9.41.040(4).

37 **Sec. 278.** RCW 9.41.075 and 2005 c 453 s 4 are each amended to  
38 read as follows:

1 (1) The license shall be revoked by the license-issuing authority  
2 immediately upon:

3 (a) Discovery by the issuing authority that the person was  
4 ineligible under RCW 9.41.070 for a concealed pistol license when  
5 applying for the license or license renewal;

6 (b) Conviction of the licensee, or the licensee being found not  
7 guilty by reason of insanity, of an offense, or commitment of the  
8 licensee for mental health treatment or treatment of a substance use  
9 disorder that is based on use of a controlled substance, that makes a  
10 person ineligible under RCW 9.41.040 to possess a firearm;

11 (c) Conviction of the licensee for a third violation of this  
12 chapter within five calendar years; or

13 (d) An order that the licensee forfeit a firearm under RCW  
14 9.41.098(1)(d).

15 (2)(a) Unless the person may lawfully possess a pistol without a  
16 concealed pistol license, an ineligible person to whom a concealed  
17 pistol license was issued shall, within fourteen days of license  
18 revocation, lawfully transfer ownership of any pistol acquired while  
19 the person was in possession of the license.

20 (b) Upon discovering a person issued a concealed pistol license  
21 was ineligible for the license, the issuing authority shall contact  
22 the department of licensing to determine whether the person purchased  
23 a pistol while in possession of the license. If the person did  
24 purchase a pistol while in possession of the concealed pistol  
25 license, if the person may not lawfully possess a pistol without a  
26 concealed pistol license, the issuing authority shall require the  
27 person to present satisfactory evidence of having lawfully  
28 transferred ownership of the pistol. The issuing authority shall  
29 require the person to produce the evidence within fifteen days of the  
30 revocation of the license.

31 (3) When a licensee is ordered to forfeit a firearm under RCW  
32 9.41.098(1)(d), the issuing authority shall:

33 (a) On the first forfeiture, revoke the license for one year;

34 (b) On the second forfeiture, revoke the license for two years;

35 or

36 (c) On the third or subsequent forfeiture, revoke the license for  
37 five years.

38 Any person whose license is revoked as a result of a forfeiture  
39 of a firearm under RCW 9.41.098(1)(d) may not reapply for a new  
40 license until the end of the revocation period.

1 (4) The issuing authority shall notify, in writing, the  
2 department of licensing of the revocation of a license. The  
3 department of licensing shall record the revocation.

4 **Sec. 279.** RCW 9.41.097 and 2009 c 216 s 6 are each amended to  
5 read as follows:

6 (1) The department of social and health services, mental health  
7 institutions, and other health care facilities shall, upon request of  
8 a court or law enforcement agency, supply such relevant information  
9 as is necessary to determine the eligibility of a person to possess a  
10 pistol or to be issued a concealed pistol license under RCW 9.41.070  
11 or to purchase a pistol under RCW 9.41.090.

12 (2) Mental health or substance use disorder information received  
13 by: (a) The department of licensing pursuant to RCW 9.41.047 or  
14 9.41.173; (b) an issuing authority pursuant to RCW 9.41.047 or  
15 9.41.070; (c) a chief of police or sheriff pursuant to RCW 9.41.090  
16 or 9.41.173; (d) a court or law enforcement agency pursuant to  
17 subsection (1) of this section, shall not be disclosed except as  
18 provided in RCW 42.56.240(4).

19 **Sec. 280.** RCW 9.41.098 and 2003 c 39 s 5 are each amended to  
20 read as follows:

21 (1) The superior courts and the courts of limited jurisdiction of  
22 the state may order forfeiture of a firearm which is proven to be:

23 (a) Found concealed on a person not authorized by RCW 9.41.060 or  
24 9.41.070 to carry a concealed pistol: PROVIDED, That it is an  
25 absolute defense to forfeiture if the person possessed a valid  
26 Washington concealed pistol license within the preceding two years  
27 and has not become ineligible for a concealed pistol license in the  
28 interim. Before the firearm may be returned, the person must pay the  
29 past due renewal fee and the current renewal fee;

30 (b) Commercially sold to any person without an application as  
31 required by RCW 9.41.090;

32 (c) In the possession of a person prohibited from possessing the  
33 firearm under RCW 9.41.040 or 9.41.045;

34 (d) In the possession or under the control of a person at the  
35 time the person committed or was arrested for committing a felony or  
36 committing a nonfelony crime in which a firearm was used or  
37 displayed;



1 (e) In the possession of a person who is in any place in which a  
2 concealed pistol license is required, and who is under the influence  
3 of any drug or under the influence of intoxicating liquor, as defined  
4 in chapter 46.61 RCW;

5 (f) In the possession of a person free on bail or personal  
6 recognizance pending trial, appeal, or sentencing for a felony or for  
7 a nonfelony crime in which a firearm was used or displayed, except  
8 that violations of Title 77 RCW shall not result in forfeiture under  
9 this section;

10 (g) In the possession of a person found to have been mentally  
11 incompetent while in possession of a firearm when apprehended or who  
12 is thereafter committed pursuant to chapter 10.77 RCW or, subject to  
13 section 281 of this act, committed for mental health treatment or  
14 treatment of a substance use disorder that is based on use of a  
15 controlled substance under chapter 71.05 RCW;

16 (h) Used or displayed by a person in the violation of a proper  
17 written order of a court of general jurisdiction; or

18 (i) Used in the commission of a felony or of a nonfelony crime in  
19 which a firearm was used or displayed.

20 (2) Upon order of forfeiture, the court in its discretion may  
21 order destruction of any forfeited firearm. A court may temporarily  
22 retain forfeited firearms needed for evidence.

23 (a) Except as provided in (b), (c), and (d) of this subsection,  
24 firearms that are: (i) Judicially forfeited and no longer needed for  
25 evidence; or (ii) forfeited due to a failure to make a claim under  
26 RCW 63.32.010 or 63.40.010; may be disposed of in any manner  
27 determined by the local legislative authority. Any proceeds of an  
28 auction or trade may be retained by the legislative authority. This  
29 subsection (2)(a) applies only to firearms that come into the  
30 possession of the law enforcement agency after June 30, 1993.

31 By midnight, June 30, 1993, every law enforcement agency shall  
32 prepare an inventory, under oath, of every firearm that has been  
33 judicially forfeited, has been seized and may be subject to judicial  
34 forfeiture, or that has been, or may be, forfeited due to a failure  
35 to make a claim under RCW 63.32.010 or 63.40.010.

36 (b) Except as provided in (c) of this subsection, of the  
37 inventoried firearms a law enforcement agency shall destroy illegal  
38 firearms, may retain a maximum of ten percent of legal forfeited  
39 firearms for agency use, and shall either:

1 (i) Comply with the provisions for the auction of firearms in RCW  
2 9.41.098 that were in effect immediately preceding May 7, 1993; or

3 (ii) Trade, auction, or arrange for the auction of, rifles and  
4 shotguns. In addition, the law enforcement agency shall either trade,  
5 auction, or arrange for the auction of, short firearms, or shall pay  
6 a fee of twenty-five dollars to the state treasurer for every short  
7 firearm neither auctioned nor traded, to a maximum of fifty thousand  
8 dollars. The fees shall be accompanied by an inventory, under oath,  
9 of every short firearm listed in the inventory required by (a) of  
10 this subsection, that has been neither traded nor auctioned. The  
11 state treasurer shall credit the fees to the firearms range account  
12 established in RCW 79A.25.210. All trades or auctions of firearms  
13 under this subsection shall be to licensed dealers. Proceeds of any  
14 auction less costs, including actual costs of storage and sale, shall  
15 be forwarded to the firearms range account established in RCW  
16 79A.25.210.

17 (c) Antique firearms and firearms recognized as curios, relics,  
18 and firearms of particular historical significance by the United  
19 States treasury department bureau of alcohol, tobacco, (~~and~~)  
20 firearms, and explosives are exempt from destruction and shall be  
21 disposed of by auction or trade to licensed dealers.

22 (d) Firearms in the possession of the Washington state patrol on  
23 or after May 7, 1993, that are judicially forfeited and no longer  
24 needed for evidence, or forfeited due to a failure to make a claim  
25 under RCW 63.35.020, must be disposed of as follows: (i) Firearms  
26 illegal for any person to possess must be destroyed; (ii) the  
27 Washington state patrol may retain a maximum of ten percent of legal  
28 firearms for agency use; and (iii) all other legal firearms must be  
29 auctioned or traded to licensed dealers. The Washington state patrol  
30 may retain any proceeds of an auction or trade.

31 (3) The court shall order the firearm returned to the owner upon  
32 a showing that there is no probable cause to believe a violation of  
33 subsection (1) of this section existed or the firearm was stolen from  
34 the owner or the owner neither had knowledge of nor consented to the  
35 act or omission involving the firearm which resulted in its  
36 forfeiture.

37 (4) A law enforcement officer of the state or of any county or  
38 municipality may confiscate a firearm found to be in the possession  
39 of a person under circumstances specified in subsection (1) of this  
40 section. After confiscation, the firearm shall not be surrendered

1 except: (a) To the prosecuting attorney for use in subsequent legal  
2 proceedings; (b) for disposition according to an order of a court  
3 having jurisdiction as provided in subsection (1) of this section; or  
4 (c) to the owner if the proceedings are dismissed or as directed in  
5 subsection (3) of this section.

6 NEW SECTION. **Sec. 281.** A new section is added to chapter 9.41  
7 RCW to read as follows:

8 The limitation on firearm rights based on involuntary commitment  
9 under chapter 71.05 or 71.34 RCW for treatment of a substance use  
10 disorder shall be strictly construed to apply only if the person  
11 would otherwise have his or her firearm rights limited under federal  
12 law.

13 **PART III**  
14 **REPEALERS**

15 NEW SECTION. **Sec. 301.** The following acts or parts of acts, as  
16 now existing or hereafter amended, are each repealed, effective April  
17 1, 2017:

18 (1) RCW 70.96A.095 (Age of consent—Outpatient treatment of minors  
19 for chemical dependency) and 1998 c 296 s 23, 1996 c 133 s 34, 1995 c  
20 312 s 47, 1991 c 364 s 9, & 1989 c 270 s 24;

21 (2) RCW 70.96A.096 (Notice to parents, school contacts for  
22 referring students to inpatient treatment) and 1996 c 133 s 5;

23 (3) RCW 70.96A.097 (Review of admission and inpatient treatment  
24 of minors—Determination of medical necessity—Department review—  
25 Minor declines necessary treatment—At-risk youth petition—Costs—  
26 Public funds) and 1998 c 296 s 28 & 1995 c 312 s 48;

27 (4) RCW 70.96A.110 (Voluntary treatment of individuals with a  
28 substance use disorder) and 2014 c 225 s 28, 1990 c 151 s 7, 1989 c  
29 270 s 25, & 1972 ex.s. c 122 s 11;

30 (5) RCW 70.96A.120 (Treatment programs and facilities—Admissions  
31 —Peace officer duties—Protective custody) and 1991 c 290 s 6, 1990 c  
32 151 s 8, 1989 c 271 s 306, 1987 c 439 s 13, 1977 ex.s. c 62 s 1, 1974  
33 ex.s. c 175 s 1, & 1972 ex.s. c 122 s 12;

34 (6) RCW 70.96A.140 (Involuntary commitment) and 2015 c ... s 103  
35 (section 103 of this act), 2014 c 225 s 29, 2001 c 13 s 3, 1995 c 312  
36 s 49, 1993 c 362 s 1, 1991 c 364 s 10, 1990 c 151 s 3, 1989 c 271 s

1 307, 1987 c 439 s 14, 1977 ex.s. c 129 s 1, 1974 ex.s. c 175 s 2, &  
2 1972 ex.s. c 122 s 14;  
3 (7) RCW 70.96A.141 (Joinder of petitions for commitment) and 2005  
4 c 504 s 304;  
5 (8) RCW 70.96A.142 (Evaluation by designated chemical dependency  
6 specialist—When required—Required notifications) and 2004 c 166 s  
7 15;  
8 (9) RCW 70.96A.145 (Involuntary commitment proceedings—  
9 Prosecuting attorney may represent specialist or program) and 2015  
10 c ... s 104 (section 104 of this act) & 1993 c 137 s 1;  
11 (10) RCW 70.96A.148 (Detention, commitment duties—Designation of  
12 county designated mental health professional) and 2001 c 13 s 4;  
13 (11) RCW 70.96A.155 (Court-ordered treatment—Required  
14 notifications) and 2004 c 166 s 13;  
15 (12) RCW 70.96A.157 (Persons subject to court-ordered treatment  
16 or supervision—Documentation) and 2005 c 504 s 508;  
17 (13) RCW 70.96A.160 (Visitation and communication with patients)  
18 and 1989 c 270 s 29 & 1972 ex.s. c 122 s 16;  
19 (14) RCW 70.96A.180 (Payment for treatment—Financial ability of  
20 patients) and 2012 c 117 s 413, 1990 c 151 s 6, 1989 c 270 s 31, &  
21 1972 ex.s. c 122 s 18;  
22 (15) RCW 70.96A.230 (Minor—When outpatient treatment provider  
23 must give notice to parents) and 1998 c 296 s 24;  
24 (16) RCW 70.96A.235 (Minor—Parental consent for inpatient  
25 treatment—Exception) and 1998 c 296 s 25;  
26 (17) RCW 70.96A.240 (Minor—Parent not liable for payment unless  
27 consented to treatment—No right to public funds) and 1998 c 296 s 26;  
28 (18) RCW 70.96A.245 (Minor—Parent may request determination  
29 whether minor has chemical dependency requiring inpatient treatment—  
30 Minor consent not required—Duties and obligations of professional  
31 person and facility) and 1998 c 296 s 27;  
32 (19) RCW 70.96A.250 (Minor—Parent may request determination  
33 whether minor has chemical dependency requiring outpatient treatment—  
34 Consent of minor not required—Discharge of minor) and 1998 c 296 s  
35 29;  
36 (20) RCW 70.96A.255 (Minor—Petition to superior court for release  
37 from facility) and 1998 c 296 s 30;

1 (21) RCW 70.96A.260 (Minor—Not released by petition under RCW  
2 70.96A.255—Release within thirty days—Professional may initiate  
3 proceedings to stop release) and 1998 c 296 s 31;

4 (22) RCW 70.96A.265 (Minor—Eligibility for medical assistance  
5 under chapter 74.09 RCW—Payment by department) and 1998 c 296 s 32;

6 (23) RCW 70.96B.010 (Definitions) and 2014 c 225 s 74, 2011 c 89  
7 s 10, 2008 c 320 s 3, & 2005 c 504 s 202;

8 (24) RCW 70.96B.020 (Selection of areas for pilot programs—Pilot  
9 program requirements) and 2014 c 225 s 75 & 2005 c 504 s 203;

10 (25) RCW 70.96B.030 (Designated crisis responder—Qualifications)  
11 and 2014 c 225 s 76 & 2005 c 504 s 204;

12 (26) RCW 70.96B.040 (Powers of designated crisis responder) and  
13 2005 c 504 s 205;

14 (27) RCW 70.96B.045 (Emergency custody—Procedure) and 2007 c 120  
15 s 2;

16 (28) RCW 70.96B.050 (Petition for initial detention—Order to  
17 detain for evaluation and treatment period—Procedure) and 2008 c 320  
18 s 5, 2007 c 120 s 1, & 2005 c 504 s 206;

19 (29) RCW 70.96B.060 (Exemption from liability) and 2005 c 504 s  
20 207;

21 (30) RCW 70.96B.070 (Detention period for evaluation and  
22 treatment) and 2005 c 504 s 208;

23 (31) RCW 70.96B.080 (Detention for evaluation and treatment of  
24 mental disorder—Chapter 71.05 RCW applies) and 2005 c 504 s 209;

25 (32) RCW 70.96B.090 (Procedures for additional chemical  
26 dependency treatment) and 2005 c 504 s 210;

27 (33) RCW 70.96B.100 (Detention for involuntary chemical  
28 dependency treatment—Petition for less restrictive treatment—  
29 Appearance before court—Representation—Hearing—Less restrictive  
30 order—Failure to adhere to terms of less restrictive order) and 2008  
31 c 320 s 6 & 2005 c 504 s 211;

32 (34) RCW 70.96B.110 (Involuntary chemical dependency treatment  
33 proceedings—Prosecuting attorney shall represent petitioner) and 2005  
34 c 504 s 212;

35 (35) RCW 70.96B.120 (Rights of involuntarily detained persons)  
36 and 2005 c 504 s 213;

37 (36) RCW 70.96B.130 (Evaluation by designated crisis responder—  
38 When required—Required notifications) and 2005 c 504 s 214;

1 (37) RCW 70.96B.140 (Secretary may adopt rules) and 2005 c 504 s  
2 215;  
3 (38) RCW 70.96B.150 (Application of RCW 71.05.550) and 2005 c 504  
4 s 216;  
5 (39) RCW 70.96B.800 (Evaluation of pilot programs—Reports) and  
6 2008 c 320 s 2 & 2005 c 504 s 217; and  
7 (40) RCW 71.05.032 (Joinder of petitions for commitment) and 2005  
8 c 504 s 115.

9 **PART IV**

10 **CORRECTIONS TO REFERENCES**

11 **Sec. 401.** RCW 4.24.558 and 2004 c 166 s 21 are each amended to  
12 read as follows:

13 Information shared and actions taken without gross negligence and  
14 in good faith compliance with RCW 71.05.445, 72.09.585,  
15 (~~70.96A.142~~) 71.05.157, or 72.09.315 are not a basis for any  
16 private civil cause of action.

17 **Sec. 402.** RCW 5.60.060 and 2012 c 29 s 12 are each amended to  
18 read as follows:

19 (1) A spouse or domestic partner shall not be examined for or  
20 against his or her spouse or domestic partner, without the consent of  
21 the spouse or domestic partner; nor can either during marriage or  
22 during the domestic partnership or afterward, be without the consent  
23 of the other, examined as to any communication made by one to the  
24 other during the marriage or the domestic partnership. But this  
25 exception shall not apply to a civil action or proceeding by one  
26 against the other, nor to a criminal action or proceeding for a crime  
27 committed by one against the other, nor to a criminal action or  
28 proceeding against a spouse or domestic partner if the marriage or  
29 the domestic partnership occurred subsequent to the filing of formal  
30 charges against the defendant, nor to a criminal action or proceeding  
31 for a crime committed by said spouse or domestic partner against any  
32 child of whom said spouse or domestic partner is the parent or  
33 guardian, nor to a proceeding under chapter (~~70.96A, 70.96B~~)  
34 71.05(~~(7)~~) or 71.09 RCW: PROVIDED, That the spouse or the domestic  
35 partner of a person sought to be detained under chapter (~~70.96A,~~  
36 ~~70.96B~~) 71.05(~~(7)~~) or 71.09 RCW may not be compelled to testify and  
37 shall be so informed by the court prior to being called as a witness.

1 (2)(a) An attorney or counselor shall not, without the consent of  
2 his or her client, be examined as to any communication made by the  
3 client to him or her, or his or her advice given thereon in the  
4 course of professional employment.

5 (b) A parent or guardian of a minor child arrested on a criminal  
6 charge may not be examined as to a communication between the child  
7 and his or her attorney if the communication was made in the presence  
8 of the parent or guardian. This privilege does not extend to  
9 communications made prior to the arrest.

10 (3) A member of the clergy, a Christian Science practitioner  
11 listed in the Christian Science Journal, or a priest shall not,  
12 without the consent of a person making the confession or sacred  
13 confidence, be examined as to any confession or sacred confidence  
14 made to him or her in his or her professional character, in the  
15 course of discipline enjoined by the church to which he or she  
16 belongs.

17 (4) Subject to the limitations under RCW (~~(70.96A.140 or)~~)  
18 71.05.360 (8) and (9), a physician or surgeon or osteopathic  
19 physician or surgeon or podiatric physician or surgeon shall not,  
20 without the consent of his or her patient, be examined in a civil  
21 action as to any information acquired in attending such patient,  
22 which was necessary to enable him or her to prescribe or act for the  
23 patient, except as follows:

24 (a) In any judicial proceedings regarding a child's injury,  
25 neglect, or sexual abuse or the cause thereof; and

26 (b) Ninety days after filing an action for personal injuries or  
27 wrongful death, the claimant shall be deemed to waive the physician-  
28 patient privilege. Waiver of the physician-patient privilege for any  
29 one physician or condition constitutes a waiver of the privilege as  
30 to all physicians or conditions, subject to such limitations as a  
31 court may impose pursuant to court rules.

32 (5) A public officer shall not be examined as a witness as to  
33 communications made to him or her in official confidence, when the  
34 public interest would suffer by the disclosure.

35 (6)(a) A peer support group counselor shall not, without consent  
36 of the law enforcement officer or firefighter making the  
37 communication, be compelled to testify about any communication made  
38 to the counselor by the officer or firefighter while receiving  
39 counseling. The counselor must be designated as such by the sheriff,  
40 police chief, fire chief, or chief of the Washington state patrol,

1 prior to the incident that results in counseling. The privilege only  
2 applies when the communication was made to the counselor while acting  
3 in his or her capacity as a peer support group counselor. The  
4 privilege does not apply if the counselor was an initial responding  
5 officer or firefighter, a witness, or a party to the incident which  
6 prompted the delivery of peer support group counseling services to  
7 the law enforcement officer or firefighter.

8 (b) For purposes of this section, "peer support group counselor"  
9 means a:

10 (i) Law enforcement officer, firefighter, civilian employee of a  
11 law enforcement agency, or civilian employee of a fire department,  
12 who has received training to provide emotional and moral support and  
13 counseling to an officer or firefighter who needs those services as a  
14 result of an incident in which the officer or firefighter was  
15 involved while acting in his or her official capacity; or

16 (ii) Nonemployee counselor who has been designated by the  
17 sheriff, police chief, fire chief, or chief of the Washington state  
18 patrol to provide emotional and moral support and counseling to an  
19 officer or firefighter who needs those services as a result of an  
20 incident in which the officer or firefighter was involved while  
21 acting in his or her official capacity.

22 (7) A sexual assault advocate may not, without the consent of the  
23 victim, be examined as to any communication made between the victim  
24 and the sexual assault advocate.

25 (a) For purposes of this section, "sexual assault advocate" means  
26 the employee or volunteer from a community sexual assault program or  
27 underserved populations provider, victim assistance unit, program, or  
28 association, that provides information, medical or legal advocacy,  
29 counseling, or support to victims of sexual assault, who is  
30 designated by the victim to accompany the victim to the hospital or  
31 other health care facility and to proceedings concerning the alleged  
32 assault, including police and prosecution interviews and court  
33 proceedings.

34 (b) A sexual assault advocate may disclose a confidential  
35 communication without the consent of the victim if failure to  
36 disclose is likely to result in a clear, imminent risk of serious  
37 physical injury or death of the victim or another person. Any sexual  
38 assault advocate participating in good faith in the disclosing of  
39 records and communications under this section shall have immunity  
40 from any liability, civil, criminal, or otherwise, that might result



1 from the action. In any proceeding, civil or criminal, arising out of  
2 a disclosure under this section, the good faith of the sexual assault  
3 advocate who disclosed the confidential communication shall be  
4 presumed.

5 (8) A domestic violence advocate may not, without the consent of  
6 the victim, be examined as to any communication between the victim  
7 and the domestic violence advocate.

8 (a) For purposes of this section, "domestic violence advocate"  
9 means an employee or supervised volunteer from a community-based  
10 domestic violence program or human services program that provides  
11 information, advocacy, counseling, crisis intervention, emergency  
12 shelter, or support to victims of domestic violence and who is not  
13 employed by, or under the direct supervision of, a law enforcement  
14 agency, a prosecutor's office, or the child protective services  
15 section of the department of social and health services as defined in  
16 RCW 26.44.020.

17 (b) A domestic violence advocate may disclose a confidential  
18 communication without the consent of the victim if failure to  
19 disclose is likely to result in a clear, imminent risk of serious  
20 physical injury or death of the victim or another person. This  
21 section does not relieve a domestic violence advocate from the  
22 requirement to report or cause to be reported an incident under RCW  
23 26.44.030(1) or to disclose relevant records relating to a child as  
24 required by RCW 26.44.030(~~(+12)~~) (14). Any domestic violence  
25 advocate participating in good faith in the disclosing of  
26 communications under this subsection is immune from liability, civil,  
27 criminal, or otherwise, that might result from the action. In any  
28 proceeding, civil or criminal, arising out of a disclosure under this  
29 subsection, the good faith of the domestic violence advocate who  
30 disclosed the confidential communication shall be presumed.

31 (9) A mental health counselor, independent clinical social  
32 worker, or marriage and family therapist licensed under chapter  
33 18.225 RCW may not disclose, or be compelled to testify about, any  
34 information acquired from persons consulting the individual in a  
35 professional capacity when the information was necessary to enable  
36 the individual to render professional services to those persons  
37 except:

38 (a) With the written authorization of that person or, in the case  
39 of death or disability, the person's personal representative;

1 (b) If the person waives the privilege by bringing charges  
2 against the mental health counselor licensed under chapter 18.225  
3 RCW;

4 (c) In response to a subpoena from the secretary of health. The  
5 secretary may subpoena only records related to a complaint or report  
6 under RCW 18.130.050;

7 (d) As required under chapter 26.44 or 74.34 RCW or RCW 71.05.360  
8 (8) and (9); or

9 (e) To any individual if the mental health counselor, independent  
10 clinical social worker, or marriage and family therapist licensed  
11 under chapter 18.225 RCW reasonably believes that disclosure will  
12 avoid or minimize an imminent danger to the health or safety of the  
13 individual or any other individual; however, there is no obligation  
14 on the part of the provider to so disclose.

15 **Sec. 403.** RCW 9.41.280 and 2014 c 225 s 56 are each amended to  
16 read as follows:

17 (1) It is unlawful for a person to carry onto, or to possess on,  
18 public or private elementary or secondary school premises, school-  
19 provided transportation, or areas of facilities while being used  
20 exclusively by public or private schools:

21 (a) Any firearm;

22 (b) Any other dangerous weapon as defined in RCW 9.41.250;

23 (c) Any device commonly known as "nun-chu-ka sticks," consisting  
24 of two or more lengths of wood, metal, plastic, or similar substance  
25 connected with wire, rope, or other means;

26 (d) Any device, commonly known as "throwing stars," which are  
27 multipointed, metal objects designed to embed upon impact from any  
28 aspect;

29 (e) Any air gun, including any air pistol or air rifle, designed  
30 to propel a BB, pellet, or other projectile by the discharge of  
31 compressed air, carbon dioxide, or other gas; or

32 (f)(i) Any portable device manufactured to function as a weapon  
33 and which is commonly known as a stun gun, including a projectile  
34 stun gun which projects wired probes that are attached to the device  
35 that emit an electrical charge designed to administer to a person or  
36 an animal an electric shock, charge, or impulse; or

37 (ii) Any device, object, or instrument which is used or intended  
38 to be used as a weapon with the intent to injure a person by an  
39 electric shock, charge, or impulse.

1 (2) Any such person violating subsection (1) of this section is  
2 guilty of a gross misdemeanor. If any person is convicted of a  
3 violation of subsection (1)(a) of this section, the person shall have  
4 his or her concealed pistol license, if any revoked for a period of  
5 three years. Anyone convicted under this subsection is prohibited  
6 from applying for a concealed pistol license for a period of three  
7 years. The court shall send notice of the revocation to the  
8 department of licensing, and the city, town, or county which issued  
9 the license.

10 Any violation of subsection (1) of this section by elementary or  
11 secondary school students constitutes grounds for expulsion from the  
12 state's public schools in accordance with RCW 28A.600.010. An  
13 appropriate school authority shall promptly notify law enforcement  
14 and the student's parent or guardian regarding any allegation or  
15 indication of such violation.

16 Upon the arrest of a person at least twelve years of age and not  
17 more than twenty-one years of age for violating subsection (1)(a) of  
18 this section, the person shall be detained or confined in a juvenile  
19 or adult facility for up to seventy-two hours. The person shall not  
20 be released within the seventy-two hours until after the person has  
21 been examined and evaluated by the designated (~~mental health~~  
22 ~~professional~~) crisis responder unless the court in its discretion  
23 releases the person sooner after a determination regarding probable  
24 cause or on probation bond or bail.

25 Within twenty-four hours of the arrest, the arresting law  
26 enforcement agency shall refer the person to the designated (~~mental~~  
27 ~~health professional~~) crisis responder for examination and evaluation  
28 under chapter 71.05 or 71.34 RCW and inform a parent or guardian of  
29 the person of the arrest, detention, and examination. The designated  
30 (~~mental health professional~~) crisis responder shall examine and  
31 evaluate the person subject to the provisions of chapter 71.05 or  
32 71.34 RCW. The examination shall occur at the facility in which the  
33 person is detained or confined. If the person has been released on  
34 probation, bond, or bail, the examination shall occur wherever is  
35 appropriate.

36 (~~The designated mental health professional may determine whether~~  
37 ~~to refer the person to the county designated chemical dependency~~  
38 ~~specialist for examination and evaluation in accordance with chapter~~  
39 ~~70.96A RCW. The county designated chemical dependency specialist~~  
40 ~~shall examine the person subject to the provisions of chapter 70.96A~~

1 ~~RCW. The examination shall occur at the facility in which the person~~  
2 ~~is detained or confined. If the person has been released on~~  
3 ~~probation, bond, or bail, the examination shall occur wherever is~~  
4 ~~appropriate.))~~

5 Upon completion of any examination by the designated (~~mental~~  
6 ~~health professional or the county-designated chemical dependency~~  
7 ~~specialist~~)) crisis responder, the results of the examination shall  
8 be sent to the court, and the court shall consider those results in  
9 making any determination about the person.

10 The designated (~~mental health professional and county-designated~~  
11 ~~chemical dependency specialist~~)) crisis responder shall, to the  
12 extent permitted by law, notify a parent or guardian of the person  
13 that an examination and evaluation has taken place and the results of  
14 the examination. Nothing in this subsection prohibits the delivery of  
15 additional, appropriate mental health examinations to the person  
16 while the person is detained or confined.

17 If the designated (~~mental health professional~~)) crisis responder  
18 determines it is appropriate, the designated (~~mental health~~  
19 ~~professional~~)) crisis responder may refer the person to the local  
20 behavioral health organization for follow-up services or the  
21 department of social and health services or other community providers  
22 for other services to the family and individual.

23 (3) Subsection (1) of this section does not apply to:

24 (a) Any student or employee of a private military academy when on  
25 the property of the academy;

26 (b) Any person engaged in military, law enforcement, or school  
27 district security activities. However, a person who is not a  
28 commissioned law enforcement officer and who provides school security  
29 services under the direction of a school administrator may not  
30 possess a device listed in subsection (1)(f) of this section unless  
31 he or she has successfully completed training in the use of such  
32 devices that is equivalent to the training received by commissioned  
33 law enforcement officers;

34 (c) Any person who is involved in a convention, showing,  
35 demonstration, lecture, or firearms safety course authorized by  
36 school authorities in which the firearms of collectors or instructors  
37 are handled or displayed;

38 (d) Any person while the person is participating in a firearms or  
39 air gun competition approved by the school or school district;

1 (e) Any person in possession of a pistol who has been issued a  
2 license under RCW 9.41.070, or is exempt from the licensing  
3 requirement by RCW 9.41.060, while picking up or dropping off a  
4 student;

5 (f) Any nonstudent at least eighteen years of age legally in  
6 possession of a firearm or dangerous weapon that is secured within an  
7 attended vehicle or concealed from view within a locked unattended  
8 vehicle while conducting legitimate business at the school;

9 (g) Any nonstudent at least eighteen years of age who is in  
10 lawful possession of an unloaded firearm, secured in a vehicle while  
11 conducting legitimate business at the school; or

12 (h) Any law enforcement officer of the federal, state, or local  
13 government agency.

14 (4) Subsections (1)(c) and (d) of this section do not apply to  
15 any person who possesses nun-chu-ka sticks, throwing stars, or other  
16 dangerous weapons to be used in martial arts classes authorized to be  
17 conducted on the school premises.

18 (5) Subsection (1)(f)(i) of this section does not apply to any  
19 person who possesses a device listed in subsection (1)(f)(i) of this  
20 section, if the device is possessed and used solely for the purpose  
21 approved by a school for use in a school authorized event, lecture,  
22 or activity conducted on the school premises.

23 (6) Except as provided in subsection (3)(b), (c), (f), and (h) of  
24 this section, firearms are not permitted in a public or private  
25 school building.

26 (7) "GUN-FREE ZONE" signs shall be posted around school  
27 facilities giving warning of the prohibition of the possession of  
28 firearms on school grounds.

29 **Sec. 404.** RCW 9.95.143 and 2004 c 166 s 10 are each amended to  
30 read as follows:

31 When an offender receiving court-ordered mental health or  
32 chemical dependency treatment or treatment ordered by the department  
33 of corrections presents for treatment from a mental health or  
34 chemical dependency treatment provider, the offender must disclose to  
35 the mental health or chemical dependency treatment provider whether  
36 he or she is subject to supervision by the department of corrections.  
37 If an offender has received relief from disclosure pursuant to RCW  
38 9.94A.562(~~(, 70.96A.155,)~~) or 71.05.132, the offender must provide

1 the mental health or chemical dependency treatment provider with a  
2 copy of the order granting the relief.

3 **Sec. 405.** RCW 10.77.010 and 2014 c 225 s 58 are each amended to  
4 read as follows:

5 As used in this chapter:

6 (1) "Admission" means acceptance based on medical necessity, of a  
7 person as a patient.

8 (2) "Commitment" means the determination by a court that a person  
9 should be detained for a period of either evaluation or treatment, or  
10 both, in an inpatient or a less-restrictive setting.

11 (3) "Conditional release" means modification of a court-ordered  
12 commitment, which may be revoked upon violation of any of its terms.

13 (4) A "criminally insane" person means any person who has been  
14 acquitted of a crime charged by reason of insanity, and thereupon  
15 found to be a substantial danger to other persons or to present a  
16 substantial likelihood of committing criminal acts jeopardizing  
17 public safety or security unless kept under further control by the  
18 court or other persons or institutions.

19 (5) "Department" means the state department of social and health  
20 services.

21 (6) "Designated (~~(mental health professional)~~) crisis responder"  
22 has the same meaning as provided in RCW 71.05.020.

23 (7) "Detention" or "detain" means the lawful confinement of a  
24 person, under the provisions of this chapter, pending evaluation.

25 (8) "Developmental disabilities professional" means a person who  
26 has specialized training and three years of experience in directly  
27 treating or working with persons with developmental disabilities and  
28 is a psychiatrist or psychologist, or a social worker, and such other  
29 developmental disabilities professionals as may be defined by rules  
30 adopted by the secretary.

31 (9) "Developmental disability" means the condition as defined in  
32 RCW 71A.10.020(~~(+4)~~) (5).

33 (10) "Discharge" means the termination of hospital medical  
34 authority. The commitment may remain in place, be terminated, or be  
35 amended by court order.

36 (11) "Furlough" means an authorized leave of absence for a  
37 resident of a state institution operated by the department designated  
38 for the custody, care, and treatment of the criminally insane,  
39 consistent with an order of conditional release from the court under

1 this chapter, without any requirement that the resident be  
2 accompanied by, or be in the custody of, any law enforcement or  
3 institutional staff, while on such unescorted leave.

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

12 (13) "History of one or more violent acts" means violent acts  
13 committed during: (a) The ten-year period of time prior to the filing  
14 of criminal charges; plus (b) the amount of time equal to time spent  
15 during the ten-year period in a mental health facility or in  
16 confinement as a result of a criminal conviction.

17 (14) "Immediate family member" means a spouse, child, stepchild,  
18 parent, stepparent, grandparent, sibling, or domestic partner.

19 (15) "Incompetency" means a person lacks the capacity to  
20 understand the nature of the proceedings against him or her or to  
21 assist in his or her own defense as a result of mental disease or  
22 defect.

23 (16) "Indigent" means any person who is financially unable to  
24 obtain counsel or other necessary expert or professional services  
25 without causing substantial hardship to the person or his or her  
26 family.

27 (17) "Individualized service plan" means a plan prepared by a  
28 developmental disabilities professional with other professionals as a  
29 team, for an individual with developmental disabilities, which shall  
30 state:

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

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

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

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

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

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

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

7 (18) "Professional person" means:

8 (a) A psychiatrist licensed as a physician and surgeon in this  
9 state who has, in addition, completed three years of graduate  
10 training in psychiatry in a program approved by the American medical  
11 association or the American osteopathic association and is certified  
12 or eligible to be certified by the American board of psychiatry and  
13 neurology or the American osteopathic board of neurology and  
14 psychiatry;

15 (b) A psychologist licensed as a psychologist pursuant to chapter  
16 18.83 RCW; or

17 (c) A social worker with a master's or further advanced degree  
18 from a social work educational program accredited and approved as  
19 provided in RCW 18.320.010.

20 (19) "Registration records" include all the records of the  
21 department, behavioral health organizations, treatment facilities,  
22 and other persons providing services to the department, county  
23 departments, or facilities which identify persons who are receiving  
24 or who at any time have received services for mental illness.

25 (20) "Release" means legal termination of the court-ordered  
26 commitment under the provisions of this chapter.

27 (21) "Secretary" means the secretary of the department of social  
28 and health services or his or her designee.

29 (22) "Treatment" means any currently standardized medical or  
30 mental health procedure including medication.

31 (23) "Treatment records" include registration and all other  
32 records concerning persons who are receiving or who at any time have  
33 received services for mental illness, which are maintained by the  
34 department, by behavioral health organizations and their staffs, and  
35 by treatment facilities. Treatment records do not include notes or  
36 records maintained for personal use by a person providing treatment  
37 services for the department, behavioral health organizations, or a  
38 treatment facility if the notes or records are not available to  
39 others.



1 (24) "Violent act" means behavior that: (a)(i) Resulted in; (ii)  
2 if completed as intended would have resulted in; or (iii) was  
3 threatened to be carried out by a person who had the intent and  
4 opportunity to carry out the threat and would have resulted in,  
5 homicide, nonfatal injuries, or substantial damage to property; or  
6 (b) recklessly creates an immediate risk of serious physical injury  
7 to another person. As used in this subsection, "nonfatal injuries"  
8 means physical pain or injury, illness, or an impairment of physical  
9 condition. "Nonfatal injuries" shall be construed to be consistent  
10 with the definition of "bodily injury," as defined in RCW 9A.04.110.

11 **Sec. 406.** RCW 10.77.025 and 2000 c 94 s 13 are each amended to  
12 read as follows:

13 (1) Whenever any person has been: (a) Committed to a correctional  
14 facility or inpatient treatment under any provision of this chapter;  
15 or (b) ordered to undergo alternative treatment following his or her  
16 acquittal by reason of insanity of a crime charged, such commitment  
17 or treatment cannot exceed the maximum possible penal sentence for  
18 any offense charged for which the person was committed, or was  
19 acquitted by reason of insanity.

20 (2) Whenever any person committed under any provision of this  
21 chapter has not been released within seven days of the maximum  
22 possible penal sentence under subsection (1) of this section, and the  
23 professional person in charge of the facility believes that the  
24 person presents a likelihood of serious harm or is gravely disabled  
25 due to a mental disorder, the professional person shall, prior to the  
26 expiration of the maximum penal sentence, notify the appropriate  
27 ((county)) designated ((~~mental health professional~~)) crisis responder  
28 of the impending expiration and provide a copy of all relevant  
29 information regarding the person, including the likely release date  
30 and shall indicate why the person should not be released.

31 (3) A ((county)) designated ((~~mental health professional~~)) crisis  
32 responder who receives notice and records under subsection (2) of  
33 this section shall, prior to the date of the expiration of the  
34 maximum sentence, determine whether to initiate proceedings under  
35 chapter 71.05 RCW.

36 **Sec. 407.** RCW 10.77.027 and 2004 c 166 s 3 are each amended to  
37 read as follows:

1       When a ((county)) designated ((~~mental health professional~~))  
2 crisis responder or a professional person has determined that a  
3 person has a mental disorder, and is otherwise committable, the cause  
4 of the person's mental disorder shall not make the person ineligible  
5 for commitment under chapter 71.05 RCW.

6       **Sec. 408.** RCW 10.77.060 and 2012 c 256 s 3 are each amended to  
7 read as follows:

8       (1)(a) Whenever a defendant has pleaded not guilty by reason of  
9 insanity, or there is reason to doubt his or her competency, the  
10 court on its own motion or on the motion of any party shall either  
11 appoint or request the secretary to designate a qualified expert or  
12 professional person, who shall be approved by the prosecuting  
13 attorney, to evaluate and report upon the mental condition of the  
14 defendant.

15       (b) The signed order of the court shall serve as authority for  
16 the evaluator to be given access to all records held by any mental  
17 health, medical, educational, or correctional facility that relate to  
18 the present or past mental, emotional, or physical condition of the  
19 defendant. If the court is advised by any party that the defendant  
20 may have a developmental disability, the evaluation must be performed  
21 by a developmental disabilities professional.

22       (c) The evaluator shall assess the defendant in a jail, detention  
23 facility, in the community, or in court to determine whether a period  
24 of inpatient commitment will be necessary to complete an accurate  
25 evaluation. If inpatient commitment is needed, the signed order of  
26 the court shall serve as authority for the evaluator to request the  
27 jail or detention facility to transport the defendant to a hospital  
28 or secure mental health facility for a period of commitment not to  
29 exceed fifteen days from the time of admission to the facility.  
30 Otherwise, the evaluator shall complete the evaluation.

31       (d) The court may commit the defendant for evaluation to a  
32 hospital or secure mental health facility without an assessment if:  
33 (i) The defendant is charged with murder in the first or second  
34 degree; (ii) the court finds that it is more likely than not that an  
35 evaluation in the jail will be inadequate to complete an accurate  
36 evaluation; or (iii) the court finds that an evaluation outside the  
37 jail setting is necessary for the health, safety, or welfare of the  
38 defendant. The court shall not order an initial inpatient evaluation  
39 for any purpose other than a competency evaluation.

1 (e) The order shall indicate whether, in the event the defendant  
2 is committed to a hospital or secure mental health facility for  
3 evaluation, all parties agree to waive the presence of the defendant  
4 or to the defendant's remote participation at a subsequent competency  
5 hearing or presentation of an agreed order if the recommendation of  
6 the evaluator is for continuation of the stay of criminal  
7 proceedings, or if the opinion of the evaluator is that the defendant  
8 remains incompetent and there is no remaining restoration period, and  
9 the hearing is held prior to the expiration of the authorized  
10 commitment period.

11 (f) When a defendant is ordered to be committed for inpatient  
12 evaluation under this subsection (1), the court may delay granting  
13 bail until the defendant has been evaluated for competency or sanity  
14 and appears before the court. Following the evaluation, in  
15 determining bail the court shall consider: (i) Recommendations of the  
16 evaluator regarding the defendant's competency, sanity, or diminished  
17 capacity; (ii) whether the defendant has a recent history of one or  
18 more violent acts; (iii) whether the defendant has previously been  
19 acquitted by reason of insanity or found incompetent; (iv) whether it  
20 is reasonably likely the defendant will fail to appear for a future  
21 court hearing; and (v) whether the defendant is a threat to public  
22 safety.

23 (2) The court may direct that a qualified expert or professional  
24 person retained by or appointed for the defendant be permitted to  
25 witness the evaluation authorized by subsection (1) of this section,  
26 and that the defendant shall have access to all information obtained  
27 by the court appointed experts or professional persons. The  
28 defendant's expert or professional person shall have the right to  
29 file his or her own report following the guidelines of subsection (3)  
30 of this section. If the defendant is indigent, the court shall upon  
31 the request of the defendant assist him or her in obtaining an expert  
32 or professional person.

33 (3) The report of the evaluation shall include the following:

34 (a) A description of the nature of the evaluation;

35 (b) A diagnosis or description of the current mental status of  
36 the defendant;

37 (c) If the defendant suffers from a mental disease or defect, or  
38 has a developmental disability, an opinion as to competency;

39 (d) If the defendant has indicated his or her intention to rely  
40 on the defense of insanity pursuant to RCW 10.77.030, and an

1 evaluation and report by an expert or professional person has been  
2 provided concluding that the defendant was criminally insane at the  
3 time of the alleged offense, an opinion as to the defendant's sanity  
4 at the time of the act, and an opinion as to whether the defendant  
5 presents a substantial danger to other persons, or presents a  
6 substantial likelihood of committing criminal acts jeopardizing  
7 public safety or security, unless kept under further control by the  
8 court or other persons or institutions, provided that no opinion  
9 shall be rendered under this subsection (3)(d) unless the evaluator  
10 or court determines that the defendant is competent to stand trial;

11 (e) When directed by the court, if an evaluation and report by an  
12 expert or professional person has been provided concluding that the  
13 defendant lacked the capacity at the time of the offense to form the  
14 mental state necessary to commit the charged offense, an opinion as  
15 to the capacity of the defendant to have a particular state of mind  
16 which is an element of the offense charged;

17 (f) An opinion as to whether the defendant should be evaluated by  
18 a designated (~~mental health professional~~) crisis responder under  
19 chapter 71.05 RCW.

20 (4) The secretary may execute such agreements as appropriate and  
21 necessary to implement this section and may choose to designate more  
22 than one evaluator.

23 **Sec. 409.** RCW 10.77.065 and 2014 c 225 s 59 and 2014 c 10 s 3  
24 are each reenacted and amended to read as follows:

25 (1)(a)(i) The expert conducting the evaluation shall provide his  
26 or her report and recommendation to the court in which the criminal  
27 proceeding is pending. For a competency evaluation of a defendant who  
28 is released from custody, if the evaluation cannot be completed  
29 within twenty-one days due to a lack of cooperation by the defendant,  
30 the evaluator shall notify the court that he or she is unable to  
31 complete the evaluation because of such lack of cooperation.

32 (ii) A copy of the report and recommendation shall be provided to  
33 the designated (~~mental health professional~~) crisis responder, the  
34 prosecuting attorney, the defense attorney, and the professional  
35 person at the local correctional facility where the defendant is  
36 being held, or if there is no professional person, to the person  
37 designated under (a)(iv) of this subsection. Upon request, the  
38 evaluator shall also provide copies of any source documents relevant

1 to the evaluation to the designated (~~mental health professional~~)  
2 crisis responder.

3 (iii) Any facility providing inpatient services related to  
4 competency shall discharge the defendant as soon as the facility  
5 determines that the defendant is competent to stand trial. Discharge  
6 shall not be postponed during the writing and distribution of the  
7 evaluation report. Distribution of an evaluation report by a facility  
8 providing inpatient services shall ordinarily be accomplished within  
9 two working days or less following the final evaluation of the  
10 defendant. If the defendant is discharged to the custody of a local  
11 correctional facility, the local correctional facility must continue  
12 the medication regimen prescribed by the facility, when clinically  
13 appropriate, unless the defendant refuses to cooperate with  
14 medication and an involuntary medication order by the court has not  
15 been entered.

16 (iv) If there is no professional person at the local correctional  
17 facility, the local correctional facility shall designate a  
18 professional person as defined in RCW 71.05.020 or, in cooperation  
19 with the behavioral health organization, a professional person at the  
20 behavioral health organization to receive the report and  
21 recommendation.

22 (v) Upon commencement of a defendant's evaluation in the local  
23 correctional facility, the local correctional facility must notify  
24 the evaluator of the name of the professional person, or person  
25 designated under (a)(iv) of this subsection, to receive the report  
26 and recommendation.

27 (b) If the evaluator concludes, under RCW 10.77.060(3)(f), the  
28 person should be evaluated by a designated (~~mental health~~  
29 ~~professional~~) crisis responder under chapter 71.05 RCW, the court  
30 shall order such evaluation be conducted prior to release from  
31 confinement when the person is acquitted or convicted and sentenced  
32 to confinement for twenty-four months or less, or when charges are  
33 dismissed pursuant to a finding of incompetent to stand trial.

34 (2) The designated (~~mental health professional~~) crisis  
35 responder shall provide written notification within twenty-four hours  
36 of the results of the determination whether to commence proceedings  
37 under chapter 71.05 RCW. The notification shall be provided to the  
38 persons identified in subsection (1)(a) of this section.

39 (3) The prosecuting attorney shall provide a copy of the results  
40 of any proceedings commenced by the designated (~~mental health~~

1 ~~professional~~) crisis responder under subsection (2) of this section  
2 to the secretary.

3 (4) A facility conducting a civil commitment evaluation under RCW  
4 10.77.086(4) or 10.77.088(1)(b)(ii) that makes a determination to  
5 release the person instead of filing a civil commitment petition must  
6 provide written notice to the prosecutor and defense attorney at  
7 least twenty-four hours prior to release. The notice may be given by  
8 electronic mail, facsimile, or other means reasonably likely to  
9 communicate the information immediately.

10 (5) The fact of admission and all information and records  
11 compiled, obtained, or maintained in the course of providing services  
12 under this chapter may also be disclosed to the courts solely to  
13 prevent the entry of any evaluation or treatment order that is  
14 inconsistent with any order entered under chapter 71.05 RCW.

15 **Sec. 410.** RCW 10.77.084 and 2012 c 256 s 5 are each amended to  
16 read as follows:

17 (1)(a) If at any time during the pendency of an action and prior  
18 to judgment the court finds, following a report as provided in RCW  
19 10.77.060, a defendant is incompetent, the court shall order the  
20 proceedings against the defendant be stayed except as provided in  
21 subsection (4) of this section.

22 (b) At the end of the mental health treatment and restoration  
23 period, if any, or at any time a professional person determines  
24 competency has been, or is unlikely to be, restored, the defendant  
25 shall be returned to court for a hearing. The parties may agree to  
26 waive the defendant's presence or to remote participation by the  
27 defendant at a hearing or presentation of an agreed order if the  
28 recommendation of the evaluator is for the continuation of the stay  
29 of criminal proceedings, or if the opinion of the evaluator is that  
30 the defendant remains incompetent and there is no remaining  
31 restoration period, and the hearing is held prior to expiration of  
32 the defendant's authorized period of commitment, in which case the  
33 department shall promptly notify the court and parties of the date of  
34 the defendant's admission and expiration of commitment so that a  
35 timely hearing date may be scheduled. If, after notice and hearing,  
36 competency has been restored, the stay entered under (a) of this  
37 subsection shall be lifted. If competency has not been restored, the  
38 proceedings shall be dismissed without prejudice. If the court  
39 concludes that competency has not been restored, but that further

1 treatment within the time limits established by RCW 10.77.086 or  
2 10.77.088 is likely to restore competency, the court may order that  
3 treatment for purposes of competency restoration be continued. Such  
4 treatment may not extend beyond the combination of time provided for  
5 in RCW 10.77.086 or 10.77.088.

6 (c) If at any time during the proceeding the court finds,  
7 following notice and hearing, a defendant is not likely to regain  
8 competency, the proceedings shall be dismissed without prejudice and  
9 the defendant shall be evaluated for civil commitment proceedings.

10 (2) If the defendant is referred for evaluation by a designated  
11 (~~mental health professional~~) crisis responder under this chapter,  
12 the designated (~~mental health professional~~) crisis responder shall  
13 provide prompt written notification of the results of the evaluation  
14 and whether the person was detained. The notification shall be  
15 provided to the court in which the criminal action was pending, the  
16 prosecutor, the defense attorney in the criminal action, and the  
17 facility that evaluated the defendant for competency.

18 (3) The fact that the defendant is unfit to proceed does not  
19 preclude any pretrial proceedings which do not require the personal  
20 participation of the defendant.

21 (4) A defendant receiving medication for either physical or  
22 mental problems shall not be prohibited from standing trial, if the  
23 medication either enables the defendant to understand the proceedings  
24 against him or her and to assist in his or her own defense, or does  
25 not disable him or her from so understanding and assisting in his or  
26 her own defense.

27 (5) At or before the conclusion of any commitment period provided  
28 for by this section, the facility providing evaluation and treatment  
29 shall provide to the court a written report of evaluation which meets  
30 the requirements of RCW 10.77.060(3). For defendants charged with a  
31 felony, the report following the second competency restoration period  
32 or first competency restoration period if the defendant's  
33 incompetence is determined to be solely due to a developmental  
34 disability or the evaluator concludes that the defendant is not  
35 likely to regain competency must include an assessment of the  
36 defendant's future dangerousness which is evidence-based regarding  
37 predictive validity.

38 **Sec. 411.** RCW 10.77.088 and 2007 c 375 s 5 are each amended to  
39 read as follows:

1 (1)(a) If the defendant is charged with a nonfelony crime which  
2 is a serious offense as identified in RCW 10.77.092 and found by the  
3 court to be not competent, then the court shall order the secretary  
4 to place the defendant:

5 (i) At a secure mental health facility in the custody of the  
6 department or an agency designated by the department for mental  
7 health treatment and restoration of competency. The placement shall  
8 not exceed fourteen days in addition to any unused time of the  
9 evaluation under RCW 10.77.060. The court shall compute this total  
10 period and include its computation in the order. The fourteen-day  
11 period plus any unused time of the evaluation under RCW 10.77.060  
12 shall be considered to include only the time the defendant is  
13 actually at the facility and shall be in addition to reasonable time  
14 for transport to or from the facility;

15 (ii) On conditional release for up to ninety days for mental  
16 health treatment and restoration of competency; or

17 (iii) Any combination of this subsection.

18 (b)(i) If the proceedings are dismissed under RCW 10.77.084 and  
19 the defendant was on conditional release at the time of dismissal,  
20 the court shall order the designated (~~mental health professional~~)  
21 crisis responder within that county to evaluate the defendant  
22 pursuant to chapter 71.05 RCW. The evaluation may be conducted in any  
23 location chosen by the professional.

24 (ii) If the defendant was in custody and not on conditional  
25 release at the time of dismissal, the defendant shall be detained and  
26 sent to an evaluation and treatment facility for up to seventy-two  
27 hours, excluding Saturdays, Sundays, and holidays, for evaluation for  
28 purposes of filing a petition under chapter 71.05 RCW. The seventy-  
29 two-hour period shall commence upon the next nonholiday weekday  
30 following the court order and shall run to the end of the last  
31 nonholiday weekday within the seventy-two-hour period.

32 (2) If the defendant is charged with a nonfelony crime that is  
33 not a serious offense as defined in RCW 10.77.092:

34 The court may stay or dismiss proceedings and detain the  
35 defendant for sufficient time to allow the designated (~~mental health  
36 professional~~) crisis responder to evaluate the defendant and  
37 consider initial detention proceedings under chapter 71.05 RCW. The  
38 court must give notice to all parties at least twenty-four hours  
39 before the dismissal of any proceeding under this subsection, and



1 provide an opportunity for a hearing on whether to dismiss the  
2 proceedings.

3 **Sec. 412.** RCW 11.92.190 and 1996 c 249 s 11 are each amended to  
4 read as follows:

5 No residential treatment facility which provides nursing or other  
6 care may detain a person within such facility against their will. Any  
7 court order, other than an order issued in accordance with the  
8 involuntary treatment provisions of chapters 10.77, 71.05, and 72.23  
9 RCW, which purports to authorize such involuntary detention or  
10 purports to authorize a guardian or limited guardian to consent to  
11 such involuntary detention on behalf of an incapacitated person shall  
12 be void and of no force or effect. This section does not apply to the  
13 detention of a minor as provided in chapter ((70.96A or)) 71.34 RCW.

14 Nothing in this section shall be construed to require a court  
15 order authorizing placement of an incapacitated person in a  
16 residential treatment facility if such order is not otherwise  
17 required by law: PROVIDED, That notice of any residential placement  
18 of an incapacitated person shall be served, either before or after  
19 placement, by the guardian or limited guardian on such person, the  
20 guardian ad litem of record, and any attorney of record.

21 **Sec. 413.** RCW 13.32A.044 and 2000 c 123 s 5 are each amended to  
22 read as follows:

23 (1) The purpose of the multidisciplinary team is to assist in a  
24 coordinated referral of the family to available social and health-  
25 related services.

26 (2) The team shall have the authority to evaluate the juvenile,  
27 and family members, if appropriate and agreed to by the parent, and  
28 shall:

29 (a) With parental input, develop a plan of appropriate available  
30 services and assist the family in obtaining those services;

31 (b) Make a referral to the designated ((~~chemical dependency~~  
32 ~~specialist or the county designated mental health professional~~))  
33 crisis responder, if appropriate;

34 (c) Recommend no further intervention because the juvenile and  
35 his or her family have resolved the problem causing the family  
36 conflict; or

37 (d) With the parent's consent, work with them to achieve  
38 reconciliation of the child and family.

1 (3) At the first meeting of the multidisciplinary team, it shall  
2 choose a member to coordinate the team's efforts. The parent member  
3 of the multidisciplinary team must agree with the choice of  
4 coordinator. The team shall meet or communicate as often as necessary  
5 to assist the family.

6 (4) The coordinator of the multidisciplinary team may assist in  
7 filing a child in need of services petition when requested by the  
8 parent or child or an at-risk youth petition when requested by the  
9 parent. The multidisciplinary team shall have no standing as a party  
10 in any action under this title.

11 (5) If the administrator is unable to contact the child's parent,  
12 the multidisciplinary team may be used for assistance. If the parent  
13 has not been contacted within five days the administrator shall  
14 contact the department and request the case be reviewed for a  
15 dependency filing under chapter 13.34 RCW.

16 **Sec. 414.** RCW 18.83.110 and 2005 c 504 s 706 are each amended to  
17 read as follows:

18 Confidential communications between a client and a psychologist  
19 shall be privileged against compulsory disclosure to the same extent  
20 and subject to the same conditions as confidential communications  
21 between attorney and client, but this exception is subject to the  
22 limitations under RCW (~~((70.96A.140 and))~~) 71.05.360 (8) and (9).

23 **Sec. 415.** RCW 43.20A.025 and 1998 c 296 s 34 are each amended to  
24 read as follows:

25 The department of social and health services shall adopt rules  
26 defining "appropriately trained professional person" for the purposes  
27 of conducting mental health and chemical dependency evaluations under  
28 RCW (~~((71.34.052(3), 71.34.054(1), 70.96A.245(3), and 70.96A.250(1))~~)  
29 71.34.600(3) and 71.34.650(1)).

30 **Sec. 416.** RCW 70.02.010 and 2014 c 225 s 70 and 2014 c 220 s 4  
31 are each reenacted and amended to read as follows:

32 The definitions in this section apply throughout this chapter  
33 unless the context clearly requires otherwise.

34 (1) "Admission" has the same meaning as in RCW 71.05.020.

35 (2) "Audit" means an assessment, evaluation, determination, or  
36 investigation of a health care provider by a person not employed by  
37 or affiliated with the provider to determine compliance with:

1 (a) Statutory, regulatory, fiscal, medical, or scientific  
2 standards;

3 (b) A private or public program of payments to a health care  
4 provider; or

5 (c) Requirements for licensing, accreditation, or certification.

6 (3) "Commitment" has the same meaning as in RCW 71.05.020.

7 (4) "Custody" has the same meaning as in RCW 71.05.020.

8 (5) "Deidentified" means health information that does not  
9 identify an individual and with respect to which there is no  
10 reasonable basis to believe that the information can be used to  
11 identify an individual.

12 (6) "Department" means the department of social and health  
13 services.

14 (7) "Designated (~~(mental health professional)~~) crisis responder"  
15 has the same meaning as in RCW 71.05.020 or 71.34.020, as applicable.

16 (8) "Detention" or "detain" has the same meaning as in RCW  
17 71.05.020.

18 (9) "Directory information" means information disclosing the  
19 presence, and for the purpose of identification, the name, location  
20 within a health care facility, and the general health condition of a  
21 particular patient who is a patient in a health care facility or who  
22 is currently receiving emergency health care in a health care  
23 facility.

24 (10) "Discharge" has the same meaning as in RCW 71.05.020.

25 (11) "Evaluation and treatment facility" has the same meaning as  
26 in RCW 71.05.020 or 71.34.020, as applicable.

27 (12) "Federal, state, or local law enforcement authorities" means  
28 an officer of any agency or authority in the United States, a state,  
29 a tribe, a territory, or a political subdivision of a state, a tribe,  
30 or a territory who is empowered by law to: (a) Investigate or conduct  
31 an official inquiry into a potential criminal violation of law; or  
32 (b) prosecute or otherwise conduct a criminal proceeding arising from  
33 an alleged violation of law.

34 (13) "General health condition" means the patient's health status  
35 described in terms of "critical," "poor," "fair," "good,"  
36 "excellent," or terms denoting similar conditions.

37 (14) "Health care" means any care, service, or procedure provided  
38 by a health care provider:

39 (a) To diagnose, treat, or maintain a patient's physical or  
40 mental condition; or

1 (b) That affects the structure or any function of the human body.

2 (15) "Health care facility" means a hospital, clinic, nursing  
3 home, laboratory, office, or similar place where a health care  
4 provider provides health care to patients.

5 (16) "Health care information" means any information, whether  
6 oral or recorded in any form or medium, that identifies or can  
7 readily be associated with the identity of a patient and directly  
8 relates to the patient's health care, including a patient's  
9 deoxyribonucleic acid and identified sequence of chemical base pairs.  
10 The term includes any required accounting of disclosures of health  
11 care information.

12 (17) "Health care operations" means any of the following  
13 activities of a health care provider, health care facility, or third-  
14 party payor to the extent that the activities are related to  
15 functions that make an entity a health care provider, a health care  
16 facility, or a third-party payor:

17 (a) Conducting: Quality assessment and improvement activities,  
18 including outcomes evaluation and development of clinical guidelines,  
19 if the obtaining of generalizable knowledge is not the primary  
20 purpose of any studies resulting from such activities; population-  
21 based activities relating to improving health or reducing health care  
22 costs, protocol development, case management and care coordination,  
23 contacting of health care providers and patients with information  
24 about treatment alternatives; and related functions that do not  
25 include treatment;

26 (b) Reviewing the competence or qualifications of health care  
27 professionals, evaluating practitioner and provider performance and  
28 third-party payor performance, conducting training programs in which  
29 students, trainees, or practitioners in areas of health care learn  
30 under supervision to practice or improve their skills as health care  
31 providers, training of nonhealth care professionals, accreditation,  
32 certification, licensing, or credentialing activities;

33 (c) Underwriting, premium rating, and other activities relating  
34 to the creation, renewal, or replacement of a contract of health  
35 insurance or health benefits, and ceding, securing, or placing a  
36 contract for reinsurance of risk relating to claims for health care,  
37 including stop-loss insurance and excess of loss insurance, if any  
38 applicable legal requirements are met;

1 (d) Conducting or arranging for medical review, legal services,  
2 and auditing functions, including fraud and abuse detection and  
3 compliance programs;

4 (e) Business planning and development, such as conducting cost-  
5 management and planning-related analyses related to managing and  
6 operating the health care facility or third-party payor, including  
7 formulary development and administration, development, or improvement  
8 of methods of payment or coverage policies; and

9 (f) Business management and general administrative activities of  
10 the health care facility, health care provider, or third-party payor  
11 including, but not limited to:

12 (i) Management activities relating to implementation of and  
13 compliance with the requirements of this chapter;

14 (ii) Customer service, including the provision of data analyses  
15 for policy holders, plan sponsors, or other customers, provided that  
16 health care information is not disclosed to such policy holder, plan  
17 sponsor, or customer;

18 (iii) Resolution of internal grievances;

19 (iv) The sale, transfer, merger, or consolidation of all or part  
20 of a health care provider, health care facility, or third-party payor  
21 with another health care provider, health care facility, or third-  
22 party payor or an entity that following such activity will become a  
23 health care provider, health care facility, or third-party payor, and  
24 due diligence related to such activity; and

25 (v) Consistent with applicable legal requirements, creating  
26 deidentified health care information or a limited dataset for the  
27 benefit of the health care provider, health care facility, or third-  
28 party payor.

29 (18) "Health care provider" means a person who is licensed,  
30 certified, registered, or otherwise authorized by the law of this  
31 state to provide health care in the ordinary course of business or  
32 practice of a profession.

33 (19) "Human immunodeficiency virus" or "HIV" has the same meaning  
34 as in RCW 70.24.017.

35 (20) "Imminent" has the same meaning as in RCW 71.05.020.

36 (21) "Information and records related to mental health services"  
37 means a type of health care information that relates to all  
38 information and records compiled, obtained, or maintained in the  
39 course of providing services by a mental health service agency or  
40 mental health professional to persons who are receiving or have

1 received services for mental illness. The term includes mental health  
2 information contained in a medical bill, registration records, as  
3 defined in RCW 71.05.020, and all other records regarding the person  
4 maintained by the department, by regional support networks and their  
5 staff, and by treatment facilities. The term further includes  
6 documents of legal proceedings under chapter 71.05, 71.34, or 10.77  
7 RCW, or somatic health care information. For health care information  
8 maintained by a hospital as defined in RCW 70.41.020 or a health care  
9 facility or health care provider that participates with a hospital in  
10 an organized health care arrangement defined under federal law,  
11 "information and records related to mental health services" is  
12 limited to information and records of services provided by a mental  
13 health professional or information and records of services created by  
14 a hospital-operated community mental health program as defined in RCW  
15 71.24.025(6). The term does not include psychotherapy notes.

16 (22) "Information and records related to sexually transmitted  
17 diseases" means a type of health care information that relates to the  
18 identity of any person upon whom an HIV antibody test or other  
19 sexually transmitted infection test is performed, the results of such  
20 tests, and any information relating to diagnosis of or treatment for  
21 any confirmed sexually transmitted infections.

22 (23) "Institutional review board" means any board, committee, or  
23 other group formally designated by an institution, or authorized  
24 under federal or state law, to review, approve the initiation of, or  
25 conduct periodic review of research programs to assure the protection  
26 of the rights and welfare of human research subjects.

27 (24) "Legal counsel" has the same meaning as in RCW 71.05.020.

28 (25) "Local public health officer" has the same meaning as in RCW  
29 70.24.017.

30 (26) "Maintain," as related to health care information, means to  
31 hold, possess, preserve, retain, store, or control that information.

32 (27) "Mental health professional" means a psychiatrist,  
33 psychologist, psychiatric advanced registered nurse practitioner,  
34 psychiatric nurse, or social worker, and such other mental health  
35 professionals as may be defined by rules adopted by the secretary of  
36 social and health services under chapter 71.05 RCW, whether that  
37 person works in a private or public setting.

38 (28) "Mental health service agency" means a public or private  
39 agency that provides services to persons with mental disorders as  
40 defined under RCW 71.05.020 or 71.34.020 and receives funding from

1 public sources. This includes evaluation and treatment facilities as  
2 defined in RCW 71.34.020, community mental health service delivery  
3 systems, or community mental health programs, as defined in RCW  
4 71.24.025, and facilities conducting competency evaluations and  
5 restoration under chapter 10.77 RCW.

6 (29) "Minor" has the same meaning as in RCW 71.34.020.

7 (30) "Parent" has the same meaning as in RCW 71.34.020.

8 (31) "Patient" means an individual who receives or has received  
9 health care. The term includes a deceased individual who has received  
10 health care.

11 (32) "Payment" means:

12 (a) The activities undertaken by:

13 (i) A third-party payor to obtain premiums or to determine or  
14 fulfill its responsibility for coverage and provision of benefits by  
15 the third-party payor; or

16 (ii) A health care provider, health care facility, or third-party  
17 payor, to obtain or provide reimbursement for the provision of health  
18 care; and

19 (b) The activities in (a) of this subsection that relate to the  
20 patient to whom health care is provided and that include, but are not  
21 limited to:

22 (i) Determinations of eligibility or coverage, including  
23 coordination of benefits or the determination of cost-sharing  
24 amounts, and adjudication or subrogation of health benefit claims;

25 (ii) Risk adjusting amounts due based on enrollee health status  
26 and demographic characteristics;

27 (iii) Billing, claims management, collection activities,  
28 obtaining payment under a contract for reinsurance, including stop-  
29 loss insurance and excess of loss insurance, and related health care  
30 data processing;

31 (iv) Review of health care services with respect to medical  
32 necessity, coverage under a health plan, appropriateness of care, or  
33 justification of charges;

34 (v) Utilization review activities, including precertification and  
35 preauthorization of services, and concurrent and retrospective review  
36 of services; and

37 (vi) Disclosure to consumer reporting agencies of any of the  
38 following health care information relating to collection of premiums  
39 or reimbursement:

40 (A) Name and address;

1 (B) Date of birth;  
2 (C) Social security number;  
3 (D) Payment history;  
4 (E) Account number; and  
5 (F) Name and address of the health care provider, health care  
6 facility, and/or third-party payor.  
7 (33) "Person" means an individual, corporation, business trust,  
8 estate, trust, partnership, association, joint venture, government,  
9 governmental subdivision or agency, or any other legal or commercial  
10 entity.  
11 (34) "Professional person" has the same meaning as in RCW  
12 71.05.020.  
13 (35) "Psychiatric advanced registered nurse practitioner" has the  
14 same meaning as in RCW 71.05.020.  
15 (36) "Psychotherapy notes" means notes recorded, in any medium,  
16 by a mental health professional documenting or analyzing the contents  
17 of conversations during a private counseling session or group, joint,  
18 or family counseling session, and that are separated from the rest of  
19 the individual's medical record. The term excludes mediation  
20 prescription and monitoring, counseling session start and stop times,  
21 the modalities and frequencies of treatment furnished, results of  
22 clinical tests, and any summary of the following items: Diagnosis,  
23 functional status, the treatment plan, symptoms, prognosis, and  
24 progress to date.  
25 (37) "Reasonable fee" means the charges for duplicating or  
26 searching the record, but shall not exceed sixty-five cents per page  
27 for the first thirty pages and fifty cents per page for all other  
28 pages. In addition, a clerical fee for searching and handling may be  
29 charged not to exceed fifteen dollars. These amounts shall be  
30 adjusted biennially in accordance with changes in the consumer price  
31 index, all consumers, for Seattle-Tacoma metropolitan statistical  
32 area as determined by the secretary of health. However, where editing  
33 of records by a health care provider is required by statute and is  
34 done by the provider personally, the fee may be the usual and  
35 customary charge for a basic office visit.  
36 (38) "Release" has the same meaning as in RCW 71.05.020.  
37 (39) "Resource management services" has the same meaning as in  
38 RCW 71.05.020.  
39 (40) "Serious violent offense" has the same meaning as in RCW  
40 71.05.020.



1 (41) "Sexually transmitted infection" or "sexually transmitted  
2 disease" has the same meaning as "sexually transmitted disease" in  
3 RCW 70.24.017.

4 (42) "Test for a sexually transmitted disease" has the same  
5 meaning as in RCW 70.24.017.

6 (43) "Third-party payor" means an insurer regulated under Title  
7 48 RCW authorized to transact business in this state or other  
8 jurisdiction, including a health care service contractor, and health  
9 maintenance organization; or an employee welfare benefit plan,  
10 excluding fitness or wellness plans; or a state or federal health  
11 benefit program.

12 (44) "Treatment" means the provision, coordination, or management  
13 of health care and related services by one or more health care  
14 providers or health care facilities, including the coordination or  
15 management of health care by a health care provider or health care  
16 facility with a third party; consultation between health care  
17 providers or health care facilities relating to a patient; or the  
18 referral of a patient for health care from one health care provider  
19 or health care facility to another.

20 **Sec. 417.** RCW 70.02.230 and 2014 c 225 s 71 and 2014 c 220 s 9  
21 are each reenacted and amended to read as follows:

22 (1) Except as provided in this section, RCW 70.02.050, 71.05.445,  
23 70.96A.150, 74.09.295, 70.02.210, 70.02.240, 70.02.250, and  
24 70.02.260, or pursuant to a valid authorization under RCW 70.02.030,  
25 the fact of admission to a provider for mental health services and  
26 all information and records compiled, obtained, or maintained in the  
27 course of providing mental health services to either voluntary or  
28 involuntary recipients of services at public or private agencies must  
29 be confidential.

30 (2) Information and records related to mental health services,  
31 other than those obtained through treatment under chapter 71.34 RCW,  
32 may be disclosed only:

33 (a) In communications between qualified professional persons to  
34 meet the requirements of chapter 71.05 RCW, in the provision of  
35 services or appropriate referrals, or in the course of guardianship  
36 proceedings if provided to a professional person:

37 (i) Employed by the facility;

38 (ii) Who has medical responsibility for the patient's care;

1 (iii) Who is a designated (~~mental health professional~~) crisis  
2 responder;

3 (iv) Who is providing services under chapter 71.24 RCW;

4 (v) Who is employed by a state or local correctional facility  
5 where the person is confined or supervised; or

6 (vi) Who is providing evaluation, treatment, or follow-up  
7 services under chapter 10.77 RCW;

8 (b) When the communications regard the special needs of a patient  
9 and the necessary circumstances giving rise to such needs and the  
10 disclosure is made by a facility providing services to the operator  
11 of a facility in which the patient resides or will reside;

12 (c)(i) When the person receiving services, or his or her  
13 guardian, designates persons to whom information or records may be  
14 released, or if the person is a minor, when his or her parents make  
15 such a designation;

16 (ii) A public or private agency shall release to a person's next  
17 of kin, attorney, personal representative, guardian, or conservator,  
18 if any:

19 (A) The information that the person is presently a patient in the  
20 facility or that the person is seriously physically ill;

21 (B) A statement evaluating the mental and physical condition of  
22 the patient, and a statement of the probable duration of the  
23 patient's confinement, if such information is requested by the next  
24 of kin, attorney, personal representative, guardian, or conservator;  
25 and

26 (iii) Other information requested by the next of kin or attorney  
27 as may be necessary to decide whether or not proceedings should be  
28 instituted to appoint a guardian or conservator;

29 (d)(i) To the courts as necessary to the administration of  
30 chapter 71.05 RCW or to a court ordering an evaluation or treatment  
31 under chapter 10.77 RCW solely for the purpose of preventing the  
32 entry of any evaluation or treatment order that is inconsistent with  
33 any order entered under chapter 71.05 RCW.

34 (ii) To a court or its designee in which a motion under chapter  
35 10.77 RCW has been made for involuntary medication of a defendant for  
36 the purpose of competency restoration.

37 (iii) Disclosure under this subsection is mandatory for the  
38 purpose of the federal health insurance portability and  
39 accountability act;

1 (e)(i) When a mental health professional or designated crisis  
2 responder is requested by a representative of a law enforcement or  
3 corrections agency, including a police officer, sheriff, community  
4 corrections officer, a municipal attorney, or prosecuting attorney to  
5 undertake an investigation or provide treatment under RCW 71.05.150,  
6 10.31.110, or 71.05.153, the mental health professional or designated  
7 crisis responder shall, if requested to do so, advise the  
8 representative in writing of the results of the investigation  
9 including a statement of reasons for the decision to detain or  
10 release the person investigated. The written report must be submitted  
11 within seventy-two hours of the completion of the investigation or  
12 the request from the law enforcement or corrections representative,  
13 whichever occurs later.

14 (ii) Disclosure under this subsection is mandatory for the  
15 purposes of the federal health insurance portability and  
16 accountability act;

17 (f) To the attorney of the detained person;

18 (g) To the prosecuting attorney as necessary to carry out the  
19 responsibilities of the office under RCW 71.05.330(2),  
20 71.05.340(1)(b), and 71.05.335. The prosecutor must be provided  
21 access to records regarding the committed person's treatment and  
22 prognosis, medication, behavior problems, and other records relevant  
23 to the issue of whether treatment less restrictive than inpatient  
24 treatment is in the best interest of the committed person or others.  
25 Information must be disclosed only after giving notice to the  
26 committed person and the person's counsel;

27 (h)(i) To appropriate law enforcement agencies and to a person,  
28 when the identity of the person is known to the public or private  
29 agency, whose health and safety has been threatened, or who is known  
30 to have been repeatedly harassed, by the patient. The person may  
31 designate a representative to receive the disclosure. The disclosure  
32 must be made by the professional person in charge of the public or  
33 private agency or his or her designee and must include the dates of  
34 commitment, admission, discharge, or release, authorized or  
35 unauthorized absence from the agency's facility, and only any other  
36 information that is pertinent to the threat or harassment. The agency  
37 or its employees are not civilly liable for the decision to disclose  
38 or not, so long as the decision was reached in good faith and without  
39 gross negligence.

1 (ii) Disclosure under this subsection is mandatory for the  
2 purposes of the federal health insurance portability and  
3 accountability act;

4 (i)(i) To appropriate corrections and law enforcement agencies  
5 all necessary and relevant information in the event of a crisis or  
6 emergent situation that poses a significant and imminent risk to the  
7 public. The mental health service agency or its employees are not  
8 civilly liable for the decision to disclose or not so long as the  
9 decision was reached in good faith and without gross negligence.

10 (ii) Disclosure under this subsection is mandatory for the  
11 purposes of the health insurance portability and accountability act;

12 (j) To the persons designated in RCW 71.05.425 for the purposes  
13 described in those sections;

14 (k) Upon the death of a person. The person's next of kin,  
15 personal representative, guardian, or conservator, if any, must be  
16 notified. Next of kin who are of legal age and competent must be  
17 notified under this section in the following order: Spouse, parents,  
18 children, brothers and sisters, and other relatives according to the  
19 degree of relation. Access to all records and information compiled,  
20 obtained, or maintained in the course of providing services to a  
21 deceased patient are governed by RCW 70.02.140;

22 (l) To mark headstones or otherwise memorialize patients interred  
23 at state hospital cemeteries. The department of social and health  
24 services shall make available the name, date of birth, and date of  
25 death of patients buried in state hospital cemeteries fifty years  
26 after the death of a patient;

27 (m) To law enforcement officers and to prosecuting attorneys as  
28 are necessary to enforce RCW 9.41.040(2)(a)(~~(ii)~~) (iii). The extent  
29 of information that may be released is limited as follows:

30 (i) Only the fact, place, and date of involuntary commitment, an  
31 official copy of any order or orders of commitment, and an official  
32 copy of any written or oral notice of ineligibility to possess a  
33 firearm that was provided to the person pursuant to RCW 9.41.047(1),  
34 must be disclosed upon request;

35 (ii) The law enforcement and prosecuting attorneys may only  
36 release the information obtained to the person's attorney as required  
37 by court rule and to a jury or judge, if a jury is waived, that  
38 presides over any trial at which the person is charged with violating  
39 RCW 9.41.040(2)(a)(~~(ii)~~) (iii);

1 (iii) Disclosure under this subsection is mandatory for the  
2 purposes of the federal health insurance portability and  
3 accountability act;

4 (n) When a patient would otherwise be subject to the provisions  
5 of this section and disclosure is necessary for the protection of the  
6 patient or others due to his or her unauthorized disappearance from  
7 the facility, and his or her whereabouts is unknown, notice of the  
8 disappearance, along with relevant information, may be made to  
9 relatives, the department of corrections when the person is under the  
10 supervision of the department, and governmental law enforcement  
11 agencies designated by the physician or psychiatric advanced  
12 registered nurse practitioner in charge of the patient or the  
13 professional person in charge of the facility, or his or her  
14 professional designee;

15 (o) Pursuant to lawful order of a court;

16 (p) To qualified staff members of the department, to the director  
17 of behavioral health organizations, to resource management services  
18 responsible for serving a patient, or to service providers designated  
19 by resource management services as necessary to determine the  
20 progress and adequacy of treatment and to determine whether the  
21 person should be transferred to a less restrictive or more  
22 appropriate treatment modality or facility;

23 (q) Within the mental health service agency where the patient is  
24 receiving treatment, confidential information may be disclosed to  
25 persons employed, serving in bona fide training programs, or  
26 participating in supervised volunteer programs, at the facility when  
27 it is necessary to perform their duties;

28 (r) Within the department as necessary to coordinate treatment  
29 for mental illness, developmental disabilities, alcoholism, or drug  
30 abuse of persons who are under the supervision of the department;

31 (s) To a licensed physician or psychiatric advanced registered  
32 nurse practitioner who has determined that the life or health of the  
33 person is in danger and that treatment without the information and  
34 records related to mental health services could be injurious to the  
35 patient's health. Disclosure must be limited to the portions of the  
36 records necessary to meet the medical emergency;

37 (t) Consistent with the requirements of the federal health  
38 information portability and accountability act, to a licensed mental  
39 health professional or a health care professional licensed under  
40 chapter 18.71, 18.71A, 18.57, 18.57A, 18.79, or 18.36A RCW who is

1 providing care to a person, or to whom a person has been referred for  
2 evaluation or treatment, to assure coordinated care and treatment of  
3 that person. Psychotherapy notes may not be released without  
4 authorization of the person who is the subject of the request for  
5 release of information;

6 (u) To administrative and office support staff designated to  
7 obtain medical records for those licensed professionals listed in (t)  
8 of this subsection;

9 (v) To a facility that is to receive a person who is  
10 involuntarily committed under chapter 71.05 RCW, or upon transfer of  
11 the person from one evaluation and treatment facility to another. The  
12 release of records under this subsection is limited to the  
13 information and records related to mental health services required by  
14 law, a record or summary of all somatic treatments, and a discharge  
15 summary. The discharge summary may include a statement of the  
16 patient's problem, the treatment goals, the type of treatment which  
17 has been provided, and recommendation for future treatment, but may  
18 not include the patient's complete treatment record;

19 (w) To the person's counsel or guardian ad litem, without  
20 modification, at any time in order to prepare for involuntary  
21 commitment or recommitment proceedings, reexaminations, appeals, or  
22 other actions relating to detention, admission, commitment, or  
23 patient's rights under chapter 71.05 RCW;

24 (x) To staff members of the protection and advocacy agency or to  
25 staff members of a private, nonprofit corporation for the purpose of  
26 protecting and advocating the rights of persons with mental disorders  
27 or developmental disabilities. Resource management services may limit  
28 the release of information to the name, birthdate, and county of  
29 residence of the patient, information regarding whether the patient  
30 was voluntarily admitted, or involuntarily committed, the date and  
31 place of admission, placement, or commitment, the name and address of  
32 a guardian of the patient, and the date and place of the guardian's  
33 appointment. Any staff member who wishes to obtain additional  
34 information must notify the patient's resource management services in  
35 writing of the request and of the resource management services' right  
36 to object. The staff member shall send the notice by mail to the  
37 guardian's address. If the guardian does not object in writing within  
38 fifteen days after the notice is mailed, the staff member may obtain  
39 the additional information. If the guardian objects in writing within

1 fifteen days after the notice is mailed, the staff member may not  
2 obtain the additional information;

3 (y) To all current treating providers of the patient with  
4 prescriptive authority who have written a prescription for the  
5 patient within the last twelve months. For purposes of coordinating  
6 health care, the department may release without written authorization  
7 of the patient, information acquired for billing and collection  
8 purposes as described in RCW 70.02.050(1)(d). The department shall  
9 notify the patient that billing and collection information has been  
10 released to named providers, and provide the substance of the  
11 information released and the dates of such release. The department  
12 may not release counseling, inpatient psychiatric hospitalization, or  
13 drug and alcohol treatment information without a signed written  
14 release from the client;

15 (z)(i) To the secretary of social and health services for either  
16 program evaluation or research, or both so long as the secretary  
17 adopts rules for the conduct of the evaluation or research, or both.  
18 Such rules must include, but need not be limited to, the requirement  
19 that all evaluators and researchers sign an oath of confidentiality  
20 substantially as follows:

21 "As a condition of conducting evaluation or research concerning  
22 persons who have received services from (fill in the facility,  
23 agency, or person) I, . . . . ., agree not to divulge, publish, or  
24 otherwise make known to unauthorized persons or the public any  
25 information obtained in the course of such evaluation or research  
26 regarding persons who have received services such that the person who  
27 received such services is identifiable.

28 I recognize that unauthorized release of confidential information  
29 may subject me to civil liability under the provisions of state law.

30 /s/ . . . . ."

31 (ii) Nothing in this chapter may be construed to prohibit the  
32 compilation and publication of statistical data for use by government  
33 or researchers under standards, including standards to assure  
34 maintenance of confidentiality, set forth by the secretary.

35 (3) Whenever federal law or federal regulations restrict the  
36 release of information contained in the information and records  
37 related to mental health services of any patient who receives  
38 treatment for chemical dependency, the department may restrict the

1 release of the information as necessary to comply with federal law  
2 and regulations.

3 (4) Civil liability and immunity for the release of information  
4 about a particular person who is committed to the department of  
5 social and health services under RCW 71.05.280(3) and 71.05.320(3)(c)  
6 after dismissal of a sex offense as defined in RCW 9.94A.030, is  
7 governed by RCW 4.24.550.

8 (5) The fact of admission to a provider of mental health  
9 services, as well as all records, files, evidence, findings, or  
10 orders made, prepared, collected, or maintained pursuant to chapter  
11 71.05 RCW are not admissible as evidence in any legal proceeding  
12 outside that chapter without the written authorization of the person  
13 who was the subject of the proceeding except as provided in RCW  
14 70.02.260, in a subsequent criminal prosecution of a person committed  
15 pursuant to RCW 71.05.280(3) or 71.05.320(3)(c) on charges that were  
16 dismissed pursuant to chapter 10.77 RCW due to incompetency to stand  
17 trial, in a civil commitment proceeding pursuant to chapter 71.09  
18 RCW, or, in the case of a minor, a guardianship or dependency  
19 proceeding. The records and files maintained in any court proceeding  
20 pursuant to chapter 71.05 RCW must be confidential and available  
21 subsequent to such proceedings only to the person who was the subject  
22 of the proceeding or his or her attorney. In addition, the court may  
23 order the subsequent release or use of such records or files only  
24 upon good cause shown if the court finds that appropriate safeguards  
25 for strict confidentiality are and will be maintained.

26 (6)(a) Except as provided in RCW 4.24.550, any person may bring  
27 an action against an individual who has willfully released  
28 confidential information or records concerning him or her in  
29 violation of the provisions of this section, for the greater of the  
30 following amounts:

31 (i) One thousand dollars; or

32 (ii) Three times the amount of actual damages sustained, if any.

33 (b) It is not a prerequisite to recovery under this subsection  
34 that the plaintiff suffered or was threatened with special, as  
35 contrasted with general, damages.

36 (c) Any person may bring an action to enjoin the release of  
37 confidential information or records concerning him or her or his or  
38 her ward, in violation of the provisions of this section, and may in  
39 the same action seek damages as provided in this subsection.



1 (d) The court may award to the plaintiff, should he or she  
2 prevail in any action authorized by this subsection, reasonable  
3 attorney fees in addition to those otherwise provided by law.

4 (e) If an action is brought under this subsection, no action may  
5 be brought under RCW 70.02.170.

6 **Sec. 418.** RCW 70.48.475 and 2004 c 166 s 14 are each amended to  
7 read as follows:

8 (1) A person having charge of a jail, or that person's designee,  
9 shall notify the (~~county designated mental health professional or~~  
10 ~~the designated chemical dependency specialist~~) designated crisis  
11 responder seventy-two hours prior to the release to the community of  
12 an offender or defendant who was subject to a discharge review under  
13 RCW 71.05.232. If the person having charge of the jail does not  
14 receive seventy-two hours notice of the release, the notification to  
15 the (~~county designated mental health professional or the designated~~  
16 ~~chemical dependency specialist~~) designated crisis responder shall be  
17 made as soon as reasonably possible, but not later than the actual  
18 release to the community of the defendant or offender.

19 (2) When a person having charge of a jail, or that person's  
20 designee, releases an offender or defendant who was the subject of a  
21 discharge review under RCW 71.05.232, the person having charge of a  
22 jail, or that person's designee, shall notify the state hospital from  
23 which the offender or defendant was released.

24 **Sec. 419.** RCW 70.97.010 and 2014 c 225 s 78 are each amended to  
25 read as follows:

26 The definitions in this section apply throughout this chapter  
27 unless the context clearly requires otherwise.

28 (1) "Antipsychotic medications" means that class of drugs  
29 primarily used to treat serious manifestations of mental illness  
30 associated with thought disorders, which includes but is not limited  
31 to atypical antipsychotic medications.

32 (2) "Attending staff" means any person on the staff of a public  
33 or private agency having responsibility for the care and treatment of  
34 a patient.

35 (3) "Chemical dependency" means alcoholism, drug addiction, or  
36 dependence on alcohol and one or more other psychoactive chemicals,  
37 as the context requires and as those terms are defined in chapter  
38 (~~70.96A~~) 71.05 RCW.

1 (4) "Chemical dependency professional" means a person certified  
2 as a chemical dependency professional by the department of health  
3 under chapter 18.205 RCW.

4 (5) "Commitment" means the determination by a court that an  
5 individual should be detained for a period of either evaluation or  
6 treatment, or both, in an inpatient or a less restrictive setting.

7 (6) "Conditional release" means a modification of a commitment  
8 that may be revoked upon violation of any of its terms.

9 (7) "Custody" means involuntary detention under chapter 71.05  
10 (~~or 70.96A~~) RCW, uninterrupted by any period of unconditional  
11 release from commitment from a facility providing involuntary care  
12 and treatment.

13 (8) "Department" means the department of social and health  
14 services.

15 (9) "Designated crisis responder" (~~means a designated mental~~  
16 ~~health professional, a designated chemical dependency specialist, or~~  
17 ~~a designated crisis responder as those terms are defined in chapter~~  
18 ~~70.96A, 71.05, or 70.96B RCW~~) has the same meaning as in chapter  
19 71.05 RCW.

20 (10) "Detention" or "detain" means the lawful confinement of an  
21 individual under chapter (~~70.96A or~~) 71.05 RCW.

22 (11) "Discharge" means the termination of facility authority. The  
23 commitment may remain in place, be terminated, or be amended by court  
24 order.

25 (12) "Enhanced services facility" means a facility that provides  
26 treatment and services to persons for whom acute inpatient treatment  
27 is not medically necessary and who have been determined by the  
28 department to be inappropriate for placement in other licensed  
29 facilities due to the complex needs that result in behavioral and  
30 security issues.

31 (13) "Expanded community services program" means a nonsecure  
32 program of enhanced behavioral and residential support provided to  
33 long-term and residential care providers serving specifically  
34 eligible clients who would otherwise be at risk for hospitalization  
35 at state hospital geriatric units.

36 (14) "Facility" means an enhanced services facility.

37 (15) "Gravely disabled" means a condition in which an individual,  
38 as a result of a mental disorder, as a result of the use of alcohol  
39 or other psychoactive chemicals, or both:

1 (a) Is in danger of serious physical harm resulting from a  
2 failure to provide for his or her essential human needs of health or  
3 safety; or

4 (b) Manifests severe deterioration in routine functioning  
5 evidenced by repeated and escalating loss of cognitive or volitional  
6 control over his or her actions and is not receiving such care as is  
7 essential for his or her health or safety.

8 (16) "History of one or more violent acts" refers to the period  
9 of time ten years before the filing of a petition under this  
10 chapter((~~7~~)) or chapter ((~~70.96A-01~~)) 71.05 RCW, excluding any time  
11 spent, but not any violent acts committed, in a mental health  
12 facility or a long-term alcoholism or drug treatment facility, or in  
13 confinement as a result of a criminal conviction.

14 (17) "Licensed physician" means a person licensed to practice  
15 medicine or osteopathic medicine and surgery in the state of  
16 Washington.

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

18 (a) A substantial risk that:

19 (i) Physical harm will be inflicted by an individual upon his or  
20 her own person, as evidenced by threats or attempts to commit suicide  
21 or inflict physical harm on oneself;

22 (ii) Physical harm will be inflicted by an individual upon  
23 another, as evidenced by behavior that has caused such harm or that  
24 places another person or persons in reasonable fear of sustaining  
25 such harm; or

26 (iii) Physical harm will be inflicted by an individual upon the  
27 property of others, as evidenced by behavior that has caused  
28 substantial loss or damage to the property of others; or

29 (b) The individual has threatened the physical safety of another  
30 and has a history of one or more violent acts.

31 (19) "Mental disorder" means any organic, mental, or emotional  
32 impairment that has substantial adverse effects on an individual's  
33 cognitive or volitional functions.

34 (20) "Mental health professional" means a psychiatrist,  
35 psychologist, psychiatric nurse, or social worker, and such other  
36 mental health professionals as may be defined by rules adopted by the  
37 secretary under the authority of chapter 71.05 RCW.

38 (21) "Professional person" means a mental health professional and  
39 also means a physician, registered nurse, and such others as may be

1 defined in rules adopted by the secretary pursuant to the provisions  
2 of this chapter.

3 (22) "Psychiatrist" means a person having a license as a  
4 physician and surgeon in this state who has in addition completed  
5 three years of graduate training in psychiatry in a program approved  
6 by the American medical association or the American osteopathic  
7 association and is certified or eligible to be certified by the  
8 American board of psychiatry and neurology.

9 (23) "Psychologist" means a person who has been licensed as a  
10 psychologist under chapter 18.83 RCW.

11 (24) "Registration records" include all the records of the  
12 department, behavioral health organizations, treatment facilities,  
13 and other persons providing services to the department, county  
14 departments, or facilities which identify individuals who are  
15 receiving or who at any time have received services for mental  
16 illness.

17 (25) "Release" means legal termination of the commitment under  
18 chapter 70.96A or 71.05 RCW.

19 (26) "Resident" means a person admitted to an enhanced services  
20 facility.

21 (27) "Secretary" means the secretary of the department or the  
22 secretary's designee.

23 (28) "Significant change" means:

24 (a) A deterioration in a resident's physical, mental, or  
25 psychosocial condition that has caused or is likely to cause clinical  
26 complications or life-threatening conditions; or

27 (b) An improvement in the resident's physical, mental, or  
28 psychosocial condition that may make the resident eligible for  
29 release or for treatment in a less intensive or less secure setting.

30 (29) "Social worker" means a person with a master's or further  
31 advanced degree from a social work educational program accredited and  
32 approved as provided in RCW 18.320.010.

33 (30) "Treatment" means the broad range of emergency,  
34 detoxification, residential, inpatient, and outpatient services and  
35 care, including diagnostic evaluation, mental health or chemical  
36 dependency education and counseling, medical, psychiatric,  
37 psychological, and social service care, vocational rehabilitation,  
38 and career counseling, which may be extended to persons with mental  
39 disorders, chemical dependency disorders, or both, and their  
40 families.

1 (31) "Treatment records" include registration and all other  
2 records concerning individuals who are receiving or who at any time  
3 have received services for mental illness, which are maintained by  
4 the department, by behavioral health organizations and their staffs,  
5 and by treatment facilities. "Treatment records" do not include notes  
6 or records maintained for personal use by an individual providing  
7 treatment services for the department, behavioral health  
8 organizations, or a treatment facility if the notes or records are  
9 not available to others.

10 (32) "Violent act" means behavior that resulted in homicide,  
11 attempted suicide, nonfatal injuries, or substantial damage to  
12 property.

13 **Sec. 420.** RCW 71.05.660 and 2013 c 200 s 21 are each amended to  
14 read as follows:

15 Nothing in this chapter or chapter 70.02(~~(, 70.96A, )~~) or 71.34(~~(, 70.96B)~~)  
16 ~~or 70.96B~~) RCW shall be construed to interfere with communications  
17 between physicians, psychiatric advanced registered nurse  
18 practitioners, or psychologists and patients and attorneys and  
19 clients.

20 **Sec. 421.** RCW 71.24.025 and 2014 c 225 s 10 are each reenacted  
21 and amended to read as follows:

22 Unless the context clearly requires otherwise, the definitions in  
23 this section apply throughout this chapter.

24 (1) "Acutely mentally ill" means a condition which is limited to  
25 a short-term severe crisis episode of:

26 (a) A mental disorder as defined in RCW 71.05.020 or, in the case  
27 of a child, as defined in RCW 71.34.020;

28 (b) Being gravely disabled as defined in RCW 71.05.020 or, in the  
29 case of a child, a gravely disabled minor as defined in RCW  
30 71.34.020; or

31 (c) Presenting a likelihood of serious harm as defined in RCW  
32 71.05.020 or, in the case of a child, as defined in RCW 71.34.020.

33 (2) "Available resources" means funds appropriated for the  
34 purpose of providing community mental health programs, federal funds,  
35 except those provided according to Title XIX of the Social Security  
36 Act, and state funds appropriated under this chapter or chapter 71.05  
37 RCW by the legislature during any biennium for the purpose of  
38 providing residential services, resource management services,

1 community support services, and other mental health services. This  
2 does not include funds appropriated for the purpose of operating and  
3 administering the state psychiatric hospitals.

4 (3) "Behavioral health organization" means any county authority  
5 or group of county authorities or other entity recognized by the  
6 secretary in contract in a defined region.

7 (4) "Behavioral health services" means mental health services as  
8 described in this chapter and chapter 71.36 RCW and chemical  
9 dependency treatment services as described in chapter 70.96A RCW.

10 (5) "Child" means a person under the age of eighteen years.

11 (6) "Chronically mentally ill adult" or "adult who is chronically  
12 mentally ill" means an adult who has a mental disorder and meets at  
13 least one of the following criteria:

14 (a) Has undergone two or more episodes of hospital care for a  
15 mental disorder within the preceding two years; or

16 (b) Has experienced a continuous psychiatric hospitalization or  
17 residential treatment exceeding six months' duration within the  
18 preceding year; or

19 (c) Has been unable to engage in any substantial gainful activity  
20 by reason of any mental disorder which has lasted for a continuous  
21 period of not less than twelve months. "Substantial gainful activity"  
22 shall be defined by the department by rule consistent with Public Law  
23 92-603, as amended.

24 (7) "Clubhouse" means a community-based program that provides  
25 rehabilitation services and is certified by the department of social  
26 and health services.

27 (8) "Community mental health program" means all mental health  
28 services, activities, or programs using available resources.

29 (9) "Community mental health service delivery system" means  
30 public, private, or tribal agencies that provide services  
31 specifically to persons with mental disorders as defined under RCW  
32 71.05.020 and receive funding from public sources.

33 (10) "Community support services" means services authorized,  
34 planned, and coordinated through resource management services  
35 including, at a minimum, assessment, diagnosis, emergency crisis  
36 intervention available twenty-four hours, seven days a week,  
37 prescreening determinations for persons who are mentally ill being  
38 considered for placement in nursing homes as required by federal law,  
39 screening for patients being considered for admission to residential  
40 services, diagnosis and treatment for children who are acutely

1 mentally ill or severely emotionally disturbed discovered under  
2 screening through the federal Title XIX early and periodic screening,  
3 diagnosis, and treatment program, investigation, legal, and other  
4 nonresidential services under chapter 71.05 RCW, case management  
5 services, psychiatric treatment including medication supervision,  
6 counseling, psychotherapy, assuring transfer of relevant patient  
7 information between service providers, recovery services, and other  
8 services determined by behavioral health organizations.

9 (11) "Consensus-based" means a program or practice that has  
10 general support among treatment providers and experts, based on  
11 experience or professional literature, and may have anecdotal or case  
12 study support, or that is agreed but not possible to perform studies  
13 with random assignment and controlled groups.

14 (12) "County authority" means the board of county commissioners,  
15 county council, or county executive having authority to establish a  
16 community mental health program, or two or more of the county  
17 authorities specified in this subsection which have entered into an  
18 agreement to provide a community mental health program.

19 (13) "Department" means the department of social and health  
20 services.

21 (14) "Designated (~~(mental health professional)~~) crisis responder"  
22 means a mental health professional designated by the county or other  
23 authority authorized in rule to perform the duties specified in this  
24 chapter.

25 (15) "Emerging best practice" or "promising practice" means a  
26 program or practice that, based on statistical analyses or a well  
27 established theory of change, shows potential for meeting the  
28 evidence-based or research-based criteria, which may include the use  
29 of a program that is evidence-based for outcomes other than those  
30 listed in subsection (16) of this section.

31 (16) "Evidence-based" means a program or practice that has been  
32 tested in heterogeneous or intended populations with multiple  
33 randomized, or statistically controlled evaluations, or both; or one  
34 large multiple site randomized, or statistically controlled  
35 evaluation, or both, where the weight of the evidence from a systemic  
36 review demonstrates sustained improvements in at least one outcome.  
37 "Evidence-based" also means a program or practice that can be  
38 implemented with a set of procedures to allow successful replication  
39 in Washington and, when possible, is determined to be cost-  
40 beneficial.

1 (17) "Licensed service provider" means an entity licensed  
2 according to this chapter or chapter 71.05 (~~or 70.96A~~) RCW or an  
3 entity deemed to meet state minimum standards as a result of  
4 accreditation by a recognized behavioral health accrediting body  
5 recognized and having a current agreement with the department, or  
6 tribal attestation that meets state minimum standards, or persons  
7 licensed under chapter 18.57, 18.71, 18.83, or 18.79 RCW, as it  
8 applies to registered nurses and advanced registered nurse  
9 practitioners.

10 (18) "Long-term inpatient care" means inpatient services for  
11 persons committed for, or voluntarily receiving intensive treatment  
12 for, periods of ninety days or greater under chapter 71.05 RCW.  
13 "Long-term inpatient care" as used in this chapter does not include:  
14 (a) Services for individuals committed under chapter 71.05 RCW who  
15 are receiving services pursuant to a conditional release or a court-  
16 ordered less restrictive alternative to detention; or (b) services  
17 for individuals voluntarily receiving less restrictive alternative  
18 treatment on the grounds of the state hospital.

19 (19) "Mental health services" means all services provided by  
20 behavioral health organizations and other services provided by the  
21 state for persons who are mentally ill.

22 (20) "Mentally ill persons," "persons who are mentally ill," and  
23 "the mentally ill" mean persons and conditions defined in subsections  
24 (1), (6), (28), and (29) of this section.

25 (21) "Recovery" means the process in which people are able to  
26 live, work, learn, and participate fully in their communities.

27 (22) "Registration records" include all the records of the  
28 department, behavioral health organizations, treatment facilities,  
29 and other persons providing services to the department, county  
30 departments, or facilities which identify persons who are receiving  
31 or who at any time have received services for mental illness.

32 (23) "Research-based" means a program or practice that has been  
33 tested with a single randomized, or statistically controlled  
34 evaluation, or both, demonstrating sustained desirable outcomes; or  
35 where the weight of the evidence from a systemic review supports  
36 sustained outcomes as described in subsection (16) of this section  
37 but does not meet the full criteria for evidence-based.

38 (24) "Residential services" means a complete range of residences  
39 and supports authorized by resource management services and which may  
40 involve a facility, a distinct part thereof, or services which



1 support community living, for persons who are acutely mentally ill,  
2 adults who are chronically mentally ill, children who are severely  
3 emotionally disturbed, or adults who are seriously disturbed and  
4 determined by the behavioral health organization to be at risk of  
5 becoming acutely or chronically mentally ill. The services shall  
6 include at least evaluation and treatment services as defined in  
7 chapter 71.05 RCW, acute crisis respite care, long-term adaptive and  
8 rehabilitative care, and supervised and supported living services,  
9 and shall also include any residential services developed to service  
10 persons who are mentally ill in nursing homes, assisted living  
11 facilities, and adult family homes, and may include outpatient  
12 services provided as an element in a package of services in a  
13 supported housing model. Residential services for children in out-of-  
14 home placements related to their mental disorder shall not include  
15 the costs of food and shelter, except for children's long-term  
16 residential facilities existing prior to January 1, 1991.

17 (25) "Resilience" means the personal and community qualities that  
18 enable individuals to rebound from adversity, trauma, tragedy,  
19 threats, or other stresses, and to live productive lives.

20 (26) "Resource management services" mean the planning,  
21 coordination, and authorization of residential services and community  
22 support services administered pursuant to an individual service plan  
23 for: (a) Adults and children who are acutely mentally ill; (b) adults  
24 who are chronically mentally ill; (c) children who are severely  
25 emotionally disturbed; or (d) adults who are seriously disturbed and  
26 determined solely by a behavioral health organization to be at risk  
27 of becoming acutely or chronically mentally ill. Such planning,  
28 coordination, and authorization shall include mental health screening  
29 for children eligible under the federal Title XIX early and periodic  
30 screening, diagnosis, and treatment program. Resource management  
31 services include seven day a week, twenty-four hour a day  
32 availability of information regarding enrollment of adults and  
33 children who are mentally ill in services and their individual  
34 service plan to designated (~~mental health professionals~~) crisis  
35 responders, evaluation and treatment facilities, and others as  
36 determined by the behavioral health organization.

37 (27) "Secretary" means the secretary of social and health  
38 services.

39 (28) "Seriously disturbed person" means a person who:

1 (a) Is gravely disabled or presents a likelihood of serious harm  
2 to himself or herself or others, or to the property of others, as a  
3 result of a mental disorder as defined in chapter 71.05 RCW;

4 (b) Has been on conditional release status, or under a less  
5 restrictive alternative order, at some time during the preceding two  
6 years from an evaluation and treatment facility or a state mental  
7 health hospital;

8 (c) Has a mental disorder which causes major impairment in  
9 several areas of daily living;

10 (d) Exhibits suicidal preoccupation or attempts; or

11 (e) Is a child diagnosed by a mental health professional, as  
12 defined in chapter 71.34 RCW, as experiencing a mental disorder which  
13 is clearly interfering with the child's functioning in family or  
14 school or with peers or is clearly interfering with the child's  
15 personality development and learning.

16 (29) "Severely emotionally disturbed child" or "child who is  
17 severely emotionally disturbed" means a child who has been determined  
18 by the behavioral health organization to be experiencing a mental  
19 disorder as defined in chapter 71.34 RCW, including those mental  
20 disorders that result in a behavioral or conduct disorder, that is  
21 clearly interfering with the child's functioning in family or school  
22 or with peers and who meets at least one of the following criteria:

23 (a) Has undergone inpatient treatment or placement outside of the  
24 home related to a mental disorder within the last two years;

25 (b) Has undergone involuntary treatment under chapter 71.34 RCW  
26 within the last two years;

27 (c) Is currently served by at least one of the following child-  
28 serving systems: Juvenile justice, child-protection/welfare, special  
29 education, or developmental disabilities;

30 (d) Is at risk of escalating maladjustment due to:

31 (i) Chronic family dysfunction involving a caretaker who is  
32 mentally ill or inadequate;

33 (ii) Changes in custodial adult;

34 (iii) Going to, residing in, or returning from any placement  
35 outside of the home, for example, psychiatric hospital, short-term  
36 inpatient, residential treatment, group or foster home, or a  
37 correctional facility;

38 (iv) Subject to repeated physical abuse or neglect;

39 (v) Drug or alcohol abuse; or

40 (vi) Homelessness.

1 (30) "State minimum standards" means minimum requirements  
2 established by rules adopted by the secretary and necessary to  
3 implement this chapter for: (a) Delivery of mental health services;  
4 (b) licensed service providers for the provision of mental health  
5 services; (c) residential services; and (d) community support  
6 services and resource management services.

7 (31) "Treatment records" include registration and all other  
8 records concerning persons who are receiving or who at any time have  
9 received services for mental illness, which are maintained by the  
10 department, by behavioral health organizations and their staffs, and  
11 by treatment facilities. Treatment records do not include notes or  
12 records maintained for personal use by a person providing treatment  
13 services for the department, behavioral health organizations, or a  
14 treatment facility if the notes or records are not available to  
15 others.

16 (32) "Tribal authority," for the purposes of this section and RCW  
17 71.24.300 only, means: The federally recognized Indian tribes and the  
18 major Indian organizations recognized by the secretary insofar as  
19 these organizations do not have a financial relationship with any  
20 behavioral health organization that would present a conflict of  
21 interest.

22 **Sec. 422.** RCW 71.24.045 and 2014 c 225 s 13 are each amended to  
23 read as follows:

24 The behavioral health organization shall:

25 (1) Contract as needed with licensed service providers. The  
26 behavioral health organization may, in the absence of a licensed  
27 service provider entity, become a licensed service provider entity  
28 pursuant to minimum standards required for licensing by the  
29 department for the purpose of providing services not available from  
30 licensed service providers;

31 (2) Operate as a licensed service provider if it deems that doing  
32 so is more efficient and cost effective than contracting for  
33 services. When doing so, the behavioral health organization shall  
34 comply with rules promulgated by the secretary that shall provide  
35 measurements to determine when a behavioral health organization  
36 provided service is more efficient and cost effective;

37 (3) Monitor and perform biennial fiscal audits of licensed  
38 service providers who have contracted with the behavioral health  
39 organization to provide services required by this chapter. The

1 monitoring and audits shall be performed by means of a formal process  
2 which insures that the licensed service providers and professionals  
3 designated in this subsection meet the terms of their contracts;

4 (4) Establish reasonable limitations on administrative costs for  
5 agencies that contract with the behavioral health organization;

6 (5) Assure that the special needs of minorities, older adults,  
7 individuals with disabilities, children, and low-income persons are  
8 met within the priorities established in this chapter;

9 (6) Maintain patient tracking information in a central location  
10 as required for resource management services and the department's  
11 information system;

12 (7) Collaborate to ensure that policies do not result in an  
13 adverse shift of persons with mental illness into state and local  
14 correctional facilities;

15 (8) Work with the department to expedite the enrollment or  
16 reenrollment of eligible persons leaving state or local correctional  
17 facilities and institutions for mental diseases;

18 (9) Work closely with the (~~county designated mental health~~  
19 ~~professional or county~~) designated crisis responder to maximize  
20 appropriate placement of persons into community services; and

21 (10) Coordinate services for individuals who have received  
22 services through the community mental health system and who become  
23 patients at a state psychiatric hospital to ensure they are  
24 transitioned into the community in accordance with mutually agreed  
25 upon discharge plans and upon determination by the medical director  
26 of the state psychiatric hospital that they no longer need intensive  
27 inpatient care.

28 **Sec. 423.** RCW 71.24.330 and 2014 c 225 s 51 are each amended to  
29 read as follows:

30 (1)(a) Contracts between a behavioral health organization and the  
31 department shall include mechanisms for monitoring performance under  
32 the contract and remedies for failure to substantially comply with  
33 the requirements of the contract including, but not limited to,  
34 financial penalties, termination of the contract, and procurement  
35 of the contract.

36 (b) The department shall incorporate the criteria to measure the  
37 performance of service coordination organizations into contracts with  
38 behavioral health organizations as provided in chapter 70.320 RCW.

1           (2) The behavioral health organization procurement processes  
2 shall encourage the preservation of infrastructure previously  
3 purchased by the community mental health service delivery system, the  
4 maintenance of linkages between other services and delivery systems,  
5 and maximization of the use of available funds for services versus  
6 profits. However, a behavioral health organization selected through  
7 the procurement process is not required to contract for services with  
8 any county-owned or operated facility. The behavioral health  
9 organization procurement process shall provide that public funds  
10 appropriated by the legislature shall not be used to promote or  
11 deter, encourage, or discourage employees from exercising their  
12 rights under Title 29, chapter 7, subchapter II, United States Code  
13 or chapter 41.56 RCW.

14           (3) In addition to the requirements of RCW 71.24.035, contracts  
15 shall:

16           (a) Define administrative costs and ensure that the behavioral  
17 health organization does not exceed an administrative cost of ten  
18 percent of available funds;

19           (b) Require effective collaboration with law enforcement,  
20 criminal justice agencies, and the chemical dependency treatment  
21 system;

22           (c) Require substantial implementation of department adopted  
23 integrated screening and assessment process and matrix of best  
24 practices;

25           (d) Maintain the decision-making independence of designated  
26 (~~mental health professionals~~) crisis responders;

27           (e) Except at the discretion of the secretary or as specified in  
28 the biennial budget, require behavioral health organizations to pay  
29 the state for the costs associated with individuals who are being  
30 served on the grounds of the state hospitals and who are not  
31 receiving long-term inpatient care as defined in RCW 71.24.025;

32           (f) Include a negotiated alternative dispute resolution clause;  
33 and

34           (g) Include a provision requiring either party to provide one  
35 hundred eighty days' notice of any issue that may cause either party  
36 to voluntarily terminate, refuse to renew, or refuse to sign a  
37 mandatory amendment to the contract to act as a behavioral health  
38 organization. If either party decides to voluntarily terminate,  
39 refuse to renew, or refuse to sign a mandatory amendment to the

1 contract to serve as a behavioral health organization they shall  
2 provide ninety days' advance notice in writing to the other party.

3 **Sec. 424.** RCW 71.32.080 and 2006 c 108 s 5 are each amended to  
4 read as follows:

5 (1)(a) A principal with capacity may, by written statement by the  
6 principal or at the principal's direction in the principal's  
7 presence, revoke a directive in whole or in part.

8 (b) An incapacitated principal may revoke a directive only if he  
9 or she elected at the time of executing the directive to be able to  
10 revoke when incapacitated.

11 (2) The revocation need not follow any specific form so long as  
12 it is written and the intent of the principal can be discerned. In  
13 the case of a directive that is stored in the health care  
14 declarations registry created by RCW 70.122.130, the revocation may  
15 be by an online method established by the department of health.  
16 Failure to use the online method of revocation for a directive that  
17 is stored in the registry does not invalidate a revocation that is  
18 made by another method described under this section.

19 (3) The principal shall provide a copy of his or her written  
20 statement of revocation to his or her agent, if any, and to each  
21 health care provider, professional person, or health care facility  
22 that received a copy of the directive from the principal.

23 (4) The written statement of revocation is effective:

24 (a) As to a health care provider, professional person, or health  
25 care facility, upon receipt. The professional person, health care  
26 provider, or health care facility, or persons acting under their  
27 direction shall make the statement of revocation part of the  
28 principal's medical record; and

29 (b) As to the principal's agent, upon receipt. The principal's  
30 agent shall notify the principal's health care provider, professional  
31 person, or health care facility of the revocation and provide them  
32 with a copy of the written statement of revocation.

33 (5) A directive also may:

34 (a) Be revoked, in whole or in part, expressly or to the extent  
35 of any inconsistency, by a subsequent directive; or

36 (b) Be superseded or revoked by a court order, including any  
37 order entered in a criminal matter. A directive may be superseded by  
38 a court order regardless of whether the order contains an explicit  
39 reference to the directive. To the extent a directive is not in

1 conflict with a court order, the directive remains effective, subject  
2 to the provisions of RCW 71.32.150. A directive shall not be  
3 interpreted in a manner that interferes with: (i) Incarceration or  
4 detention by the department of corrections, in a city or county jail,  
5 or by the department of social and health services; or (ii) treatment  
6 of a principal who is subject to involuntary treatment pursuant to  
7 chapter 10.77, (~~(70.96A,)~~) 71.05, 71.09, or 71.34 RCW.

8 (6) A directive that would have otherwise expired but is  
9 effective because the principal is incapacitated remains effective  
10 until the principal is no longer incapacitated unless the principal  
11 has elected to be able to revoke while incapacitated and has revoked  
12 the directive.

13 (7) When a principal with capacity consents to treatment that  
14 differs from, or refuses treatment consented to in, the provisions of  
15 his or her directive, the consent or refusal constitutes a waiver of  
16 that provision and does not constitute a revocation of the provision  
17 or directive unless the principal also revokes the directive or  
18 provision.

19 **Sec. 425.** RCW 71.32.140 and 2009 c 217 s 12 are each amended to  
20 read as follows:

21 (1) A principal who:

22 (a) Chose not to be able to revoke his or her directive during  
23 any period of incapacity;

24 (b) Consented to voluntary admission to inpatient mental health  
25 treatment, or authorized an agent to consent on the principal's  
26 behalf; and

27 (c) At the time of admission to inpatient treatment, refuses to  
28 be admitted,  
29 may only be admitted into inpatient mental health treatment under  
30 subsection (2) of this section.

31 (2) A principal may only be admitted to inpatient mental health  
32 treatment under his or her directive if, prior to admission, a member  
33 of the treating facility's professional staff who is a physician or  
34 psychiatric advanced registered nurse practitioner:

35 (a) Evaluates the principal's mental condition, including a  
36 review of reasonably available psychiatric and psychological history,  
37 diagnosis, and treatment needs, and determines, in conjunction with  
38 another health care provider or mental health professional, that the  
39 principal is incapacitated;

1 (b) Obtains the informed consent of the agent, if any, designated  
2 in the directive;

3 (c) Makes a written determination that the principal needs an  
4 inpatient evaluation or is in need of inpatient treatment and that  
5 the evaluation or treatment cannot be accomplished in a less  
6 restrictive setting; and

7 (d) Documents in the principal's medical record a summary of the  
8 physician's or psychiatric advanced registered nurse practitioner's  
9 findings and recommendations for treatment or evaluation.

10 (3) In the event the admitting physician is not a psychiatrist,  
11 or the advanced registered nurse practitioner is not a psychiatric  
12 advanced registered nurse practitioner, the principal shall receive a  
13 complete psychological assessment by a mental health professional  
14 within twenty-four hours of admission to determine the continued need  
15 for inpatient evaluation or treatment.

16 (4)(a) If it is determined that the principal has capacity, then  
17 the principal may only be admitted to, or remain in, inpatient  
18 treatment if he or she consents at the time or is detained under the  
19 involuntary treatment provisions of chapter ((70.96A,)) 71.05((7)) or  
20 71.34 RCW.

21 (b) If a principal who is determined by two health care providers  
22 or one mental health professional and one health care provider to be  
23 incapacitated continues to refuse inpatient treatment, the principal  
24 may immediately seek injunctive relief for release from the facility.

25 (5) If, at the end of the period of time that the principal or  
26 the principal's agent, if any, has consented to voluntary inpatient  
27 treatment, but no more than fourteen days after admission, the  
28 principal has not regained capacity or has regained capacity but  
29 refuses to consent to remain for additional treatment, the principal  
30 must be released during reasonable daylight hours, unless detained  
31 under chapter ((70.96A,)) 71.05((7)) or 71.34 RCW.

32 (6)(a) Except as provided in (b) of this subsection, any  
33 principal who is voluntarily admitted to inpatient mental health  
34 treatment under this chapter shall have all the rights provided to  
35 individuals who are voluntarily admitted to inpatient treatment under  
36 chapter 71.05, 71.34, or 72.23 RCW.

37 (b) Notwithstanding RCW 71.05.050 regarding consent to inpatient  
38 treatment for a specified length of time, the choices an  
39 incapacitated principal expressed in his or her directive shall  
40 control, provided, however, that a principal who takes action



1 demonstrating a desire to be discharged, in addition to making  
2 statements requesting to be discharged, shall be discharged, and no  
3 principal shall be restrained in any way in order to prevent his or  
4 her discharge. Nothing in this subsection shall be construed to  
5 prevent detention and evaluation for civil commitment under chapter  
6 71.05 RCW.

7 (7) Consent to inpatient admission in a directive is effective  
8 only while the professional person, health care provider, and health  
9 care facility are in substantial compliance with the material  
10 provisions of the directive related to inpatient treatment.

11 **Sec. 426.** RCW 71.32.150 and 2003 c 283 s 15 are each amended to  
12 read as follows:

13 (1) Upon receiving a directive, a health care provider,  
14 professional person, or health care facility providing treatment to  
15 the principal, or persons acting under the direction of the health  
16 care provider, professional person, or health care facility, shall  
17 make the directive a part of the principal's medical record and shall  
18 be deemed to have actual knowledge of the directive's contents.

19 (2) When acting under authority of a directive, a health care  
20 provider, professional person, or health care facility shall act in  
21 accordance with the provisions of the directive to the fullest extent  
22 possible, unless in the determination of the health care provider,  
23 professional person, or health care facility:

24 (a) Compliance with the provision would violate the accepted  
25 standard of care established in RCW 7.70.040;

26 (b) The requested treatment is not available;

27 (c) Compliance with the provision would violate applicable law;  
28 or

29 (d) It is an emergency situation and compliance would endanger  
30 any person's life or health.

31 (3)(a) In the case of a principal committed or detained under the  
32 involuntary treatment provisions of chapter 10.77, (~~(70.96A,)~~) 71.05,  
33 71.09, or 71.34 RCW, those provisions of a principal's directive  
34 that, in the determination of the health care provider, professional  
35 person, or health care facility, are inconsistent with the purpose of  
36 the commitment or with any order of the court relating to the  
37 commitment are invalid during the commitment.

38 (b) Remaining provisions of a principal's directive are advisory  
39 while the principal is committed or detained.

1 The treatment provider is encouraged to follow the remaining  
2 provisions of the directive, except as provided in (a) of this  
3 subsection or subsection (2) of this section.

4 (4) In the case of a principal who is incarcerated or committed  
5 in a state or local correctional facility, provisions of the  
6 principal's directive that are inconsistent with reasonable  
7 penological objectives or administrative hearings regarding  
8 involuntary medication are invalid during the period of incarceration  
9 or commitment. In addition, treatment may be given despite refusal of  
10 the principal or the provisions of the directive: (a) For any reason  
11 under subsection (2) of this section; or (b) if, without the benefit  
12 of the specific treatment measure, there is a significant possibility  
13 that the person will harm self or others before an improvement of the  
14 person's condition occurs.

15 (5)(a) If the health care provider, professional person, or  
16 health care facility is, at the time of receiving the directive,  
17 unable or unwilling to comply with any part or parts of the directive  
18 for any reason, the health care provider, professional person, or  
19 health care facility shall promptly notify the principal and, if  
20 applicable, his or her agent and shall document the reason in the  
21 principal's medical record.

22 (b) If the health care provider, professional person, or health  
23 care facility is acting under authority of a directive and is unable  
24 to comply with any part or parts of the directive for the reasons  
25 listed in subsection (2) or (3) of this section, the health care  
26 provider, professional person, or health care facility shall promptly  
27 notify the principal and if applicable, his or her agent, and shall  
28 document the reason in the principal's medical record.

29 (6) In the event that one or more parts of the directive are not  
30 followed because of one or more of the reasons set forth in  
31 subsection (2) or (4) of this section, all other parts of the  
32 directive shall be followed.

33 (7) If no provider-patient relationship has previously been  
34 established, nothing in this chapter requires the establishment of a  
35 provider-patient relationship.

36 **Sec. 427.** RCW 72.09.315 and 2004 c 166 s 17 are each amended to  
37 read as follows:

38 (1) When an offender is under court-ordered mental health or  
39 chemical dependency treatment in the community and the supervision of

1 the department of corrections, and the community corrections officer  
2 becomes aware that the person is in violation of the terms of the  
3 court's treatment order, the community corrections officer shall  
4 notify the (~~county designated mental health professional or the~~  
5 ~~designated chemical dependency specialist~~) designated crisis  
6 responder, as appropriate, of the violation and request an evaluation  
7 for purposes of revocation of the less restrictive alternative or  
8 conditional release.

9 (2) When a (~~county designated mental health professional or the~~  
10 ~~designated chemical dependency specialist~~) designated crisis  
11 responder notifies the department that an offender in a state  
12 correctional facility is the subject of a petition for involuntary  
13 treatment under chapter 71.05 (~~or 70.96A~~) RCW, the department shall  
14 provide documentation of its risk assessment or other concerns to the  
15 petitioner and the court if the department classified the offender as  
16 a high risk or high needs offender.

17 **Sec. 428.** RCW 72.09.370 and 2014 c 225 s 95 are each amended to  
18 read as follows:

19 (1) The offender reentry community safety program is established  
20 to provide intensive services to offenders identified under this  
21 subsection and to thereby promote public safety. The secretary shall  
22 identify offenders in confinement or partial confinement who: (a) Are  
23 reasonably believed to be dangerous to themselves or others; and (b)  
24 have a mental disorder. In determining an offender's dangerousness,  
25 the secretary shall consider behavior known to the department and  
26 factors, based on research, that are linked to an increased risk for  
27 dangerousness of offenders with mental illnesses and shall include  
28 consideration of an offender's chemical dependency or abuse.

29 (2) Prior to release of an offender identified under this  
30 section, a team consisting of representatives of the department of  
31 corrections, the division of mental health, and, as necessary, the  
32 indeterminate sentence review board, other divisions or  
33 administrations within the department of social and health services,  
34 specifically including the division of alcohol and substance abuse  
35 and the division of developmental disabilities, the appropriate  
36 behavioral health organization, and the providers, as appropriate,  
37 shall develop a plan, as determined necessary by the team, for  
38 delivery of treatment and support services to the offender upon  
39 release. In developing the plan, the offender shall be offered

1 assistance in executing a mental health directive under chapter 71.32  
2 RCW, after being fully informed of the benefits, scope, and purposes  
3 of such directive. The team may include a school district  
4 representative for offenders under the age of twenty-one. The team  
5 shall consult with the offender's counsel, if any, and, as  
6 appropriate, the offender's family and community. The team shall  
7 notify the crime victim/witness program, which shall provide notice  
8 to all people registered to receive notice under RCW 72.09.712 of the  
9 proposed release plan developed by the team. Victims, witnesses, and  
10 other interested people notified by the department may provide  
11 information and comments to the department on potential safety risk  
12 to specific individuals or classes of individuals posed by the  
13 specific offender. The team may recommend: (a) That the offender be  
14 evaluated by the designated (~~mental health professional~~) crisis  
15 responder, as defined in chapter 71.05 RCW; (b) department-supervised  
16 community treatment; or (c) voluntary community mental health or  
17 chemical dependency or abuse treatment.

18 (3) Prior to release of an offender identified under this  
19 section, the team shall determine whether or not an evaluation by a  
20 designated (~~mental health professional~~) crisis responder is needed.  
21 If an evaluation is recommended, the supporting documentation shall  
22 be immediately forwarded to the appropriate designated (~~mental~~  
23 ~~health professional~~) crisis responder. The supporting documentation  
24 shall include the offender's criminal history, history of judicially  
25 required or administratively ordered involuntary antipsychotic  
26 medication while in confinement, and any known history of involuntary  
27 civil commitment.

28 (4) If an evaluation by a designated (~~mental health~~  
29 ~~professional~~) crisis responder is recommended by the team, such  
30 evaluation shall occur not more than ten days, nor less than five  
31 days, prior to release.

32 (5) A second evaluation by a designated (~~mental health~~  
33 ~~professional~~) crisis responder shall occur on the day of release if  
34 requested by the team, based upon new information or a change in the  
35 offender's mental condition, and the initial evaluation did not  
36 result in an emergency detention or a summons under chapter 71.05  
37 RCW.

38 (6) If the designated (~~mental health professional~~) crisis  
39 responder determines an emergency detention under chapter 71.05 RCW  
40 is necessary, the department shall release the offender only to a

1 state hospital or to a consenting evaluation and treatment facility.  
2 The department shall arrange transportation of the offender to the  
3 hospital or facility.

4 (7) If the designated (~~mental health professional~~) crisis  
5 responder believes that a less restrictive alternative treatment is  
6 appropriate, he or she shall seek a summons, pursuant to the  
7 provisions of chapter 71.05 RCW, to require the offender to appear at  
8 an evaluation and treatment facility. If a summons is issued, the  
9 offender shall remain within the corrections facility until  
10 completion of his or her term of confinement and be transported, by  
11 corrections personnel on the day of completion, directly to the  
12 identified evaluation and treatment facility.

13 (8) The secretary shall adopt rules to implement this section.

14 **Sec. 429.** RCW 74.13.033 and 2009 c 569 s 3 are each amended to  
15 read as follows:

16 (1) If a resident of a crisis residential center becomes by his  
17 or her behavior disruptive to the facility's program, such resident  
18 may be immediately removed to a separate area within the facility and  
19 counseled on an individual basis until such time as the child regains  
20 his or her composure. The department may set rules and regulations  
21 establishing additional procedures for dealing with severely  
22 disruptive children on the premises.

23 (2) When the juvenile resides in this facility, all services  
24 deemed necessary to the juvenile's reentry to normal family life  
25 shall be made available to the juvenile as required by chapter 13.32A  
26 RCW. In assessing the child and providing these services, the  
27 facility staff shall:

28 (a) Interview the juvenile as soon as possible;

29 (b) Contact the juvenile's parents and arrange for a counseling  
30 interview with the juvenile and his or her parents as soon as  
31 possible;

32 (c) Conduct counseling interviews with the juvenile and his or  
33 her parents, to the end that resolution of the child/parent conflict  
34 is attained and the child is returned home as soon as possible;

35 (d) Provide additional crisis counseling as needed, to the end  
36 that placement of the child in the crisis residential center will be  
37 required for the shortest time possible, but not to exceed fifteen  
38 consecutive days; and

39 (e) Convene, when appropriate, a multidisciplinary team.

1 (3) Based on the assessments done under subsection (2) of this  
2 section the center staff may refer any child who, as the result of a  
3 mental or emotional disorder, or intoxication by alcohol or other  
4 drugs, is suicidal, seriously assaultive, or seriously destructive  
5 toward others, or otherwise similarly evidences an immediate need for  
6 emergency medical evaluation and possible care, for evaluation  
7 pursuant to chapter 71.34 RCW(~~(7)~~) or to a (~~mental health~~  
8 ~~professional~~) designated crisis responder pursuant to chapter 71.05  
9 RCW(~~(, or to a chemical dependency specialist pursuant to chapter~~  
10 ~~70.96A—RCW)~~) whenever such action is deemed appropriate and  
11 consistent with law.

12 (4) A juvenile taking unauthorized leave from a facility shall be  
13 apprehended and returned to it by law enforcement officers or other  
14 persons designated as having this authority as provided in RCW  
15 13.32A.050. If returned to the facility after having taken  
16 unauthorized leave for a period of more than twenty-four hours a  
17 juvenile shall be supervised by such a facility for a period,  
18 pursuant to this chapter, which, unless where otherwise provided, may  
19 not exceed fifteen consecutive days. Costs of housing juveniles  
20 admitted to crisis residential centers shall be assumed by the  
21 department for a period not to exceed fifteen consecutive days.

22 **Sec. 430.** RCW 74.50.070 and 1987 c 406 s 8 are each amended to  
23 read as follows:

24 (1) If a county elects to establish a multipurpose diagnostic  
25 center or detention center, the alcoholism and drug addiction  
26 assessment service under RCW 74.50.040 may be integrated into the  
27 services provided by such a center.

28 (2) The center may be financed from funds made available by the  
29 department for alcoholism and drug addiction assessments under this  
30 chapter and funds contained in the department's budget for  
31 detoxification, involuntary detention, and involuntary treatment  
32 under chapter(~~s 70.96A and~~) 71.05 RCW. The center may be operated  
33 by the county or pursuant to contract between the county and a  
34 qualified organization.

35 **PART V**  
36 **MISCELLANEOUS**

1        NEW SECTION.    **Sec. 501.**    This act may be known and cited as Ricky  
2 Garcia's act.

3        NEW SECTION.    **Sec. 502.**    (1) Section 102 of this act takes effect  
4 April 1, 2016.

5        (2) Sections 202 through 209, 211, 213 through 221, 223 through  
6 229, 231 through 234, 236, 237, 239 through 260, 262, 264, 266, 267,  
7 269, 271, 272, and 275 through 280 of this act take effect April 1,  
8 2017.

9        (3) Sections 210, 212, 222, 230, 235, 238, 261, 263, 265, 268,  
10 270, and 273 of this act take effect July 1, 2019.

11       NEW SECTION.    **Sec. 503.**    Section 101 of this act expires April 1,  
12 2016.

13       NEW SECTION.    **Sec. 504.**    If specific funding for the purposes of  
14 this act, referencing this act by bill or chapter number, is not  
15 provided by June 30, 2015, in the omnibus appropriations act, this  
16 act is null and void.

--- END ---