SENATE BILL REPORT SB 5811

As of March 14, 2017

Title: An act relating to expanding use of the involuntary treatment act to combat heroin abuse.

Brief Description: Expanding use of the involuntary treatment act to combat heroin abuse.

Sponsors: Senator O'Ban.

Brief History:

Committee Activity: Human Services, Mental Health & Housing: 3/13/17.

Brief Summary of Bill

• Allows detention of a person for involuntary substance use disorder treatment when a person has an opioid use disorder characterized by active use of heroin and meets a modified definition of gravely disabled containing factors indicating the presence of problems connected to substance use, effective April 1, 2018.

SENATE COMMITTEE ON HUMAN SERVICES, MENTAL HEALTH & HOUSING

Staff: Kevin Black (786-7747)

Background: The Involuntary Treatment Act (ITA) allows a person to be detained for involuntary treatment if a designated mental health professional determines that:

- the person has a mental disorder;
- due to this mental disorder, the person presents a likelihood of serious harm or is gravely disabled;
- the person will not accept voluntary treatment; and
- there is no less restrictive alternative which will meet the needs of health and safety for the person or the public.

Gravely disabled is defined to mean a condition in which a person, as a result of a mental disorder: (a) is in danger of serious physical harm resulting from a failure to provide for the person's essential human needs of health or safety; or (b) manifests severe deterioration in routine functioning evidenced by repeated and escalating loss of cognitive or volitional

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control over the person's actions and is not receiving such care as is essential for the person's health or safety.

Effective April 1, 2018, the ITA will be expanded to allow detention based on the presence of a substance use disorder or mental disorder if the person meets other detention criteria. A person has a substance use disorder when they continue to use a substance despite a pathological pattern of behaviors indicating significant substance-related problems. A person detained under the ITA based on a substance use disorder after April 1, 2018, may be detained to a secure detox or approved substance use disorder treatment program.

Summary of Bill: Effective April 1, 2018, a person is gravely disabled due to a substance use disorder when the person has an opioid use disorder characterized by active use of heroin and, within the prior 12-month period, the person:

- has had recurrent substance use resulting in a failure to fulfill major role obligations at work, school, or home;
- has had recurrent substance use in situations in which it is physically hazardous, such as driving an automobile or operating dangerous machinery;
- has had three or more arrests related to activities connected to substance use;
- has experienced one or more periods of hospitalization related to substance use;
- has three or more visible track marks indicating intravenous drug use; or
- meets traditional criteria for gravely disabled.

Appropriation: None.

Fiscal Note: Not requested.

Creates Committee/Commission/Task Force that includes Legislative members: No.

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

Staff Summary of Public Testimony: PRO: I want to start this conversation, approaching this issue from the Golden Rule parent standard. If this was one of my children, I would want someone to pull my child out of the life they are in and give them treatment, whether or not they are ready.

CON: We have concerns whether this legislation would survive Constitutional review. The impact on courts and public services would be devastating. We already don't have enough beds. The criteria gives little guidance to the public about what conduct could lead to commitment and loss of liberty. We should wait to see the impact of integrated response before addressing this issue. This bill would turn involuntary treatment court into a drug court. Our opposition is based on fiscal concerns, because the bill would significantly increase the people who can be detained, without increasing treatment resources. The number of people who need services would overwhelm capacity. If this advances, please provide adequate funding for local government costs.

OTHER: We are concerned about the opioid epidemic. The law changes in 2018 are already likely to overwhelm the system treatment capacity, which will overflow onto emergency rooms. Emergency rooms will have nowhere to place patients.

Persons Testifying: PRO: Senator Steve O'Ban, Prime Sponsor.

CON: Mike De Felice, WA Defender Assn., WA Assn. of Criminal Defense Attorneys; Juliana Roe, WA State Assn. of Counties.

OTHER: Chelene Whiteaker, Washington State Hospital Association.

Persons Signed In To Testify But Not Testifying: No one.

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