

E2SSB 5720 - H COMM AMD

By Committee on Civil Rights & Judiciary

NOT CONSIDERED 12/23/2019

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

3 **"Sec. 1.** RCW 71.05.010 and 2016 sp.s. c 29 s 203 are each
4 amended to read as follows:

5 (1) The provisions of this chapter apply to persons who are
6 eighteen years of age or older and are intended by the legislature:

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

11 (b) To prevent inappropriate, indefinite commitment of (~~mentally~~
12 ~~disordered persons and persons with substance use disorders~~) persons
13 living with behavioral health disorders and to eliminate legal
14 disabilities that arise from such commitment;

15 (c) To provide prompt evaluation and timely and appropriate
16 treatment of persons with serious (~~mental disorders and substance~~
17 ~~use~~) behavioral health disorders;

18 (d) To safeguard individual rights;

19 (e) To provide continuity of care for persons with serious
20 (~~mental disorders and substance use~~) behavioral health disorders;

21 (f) To encourage the full use of all existing agencies,
22 professional personnel, and public funds to prevent duplication of
23 services and unnecessary expenditures; and

24 (g) To encourage, whenever appropriate, that services be provided
25 within the community.

26 (2) When construing the requirements of this chapter the court
27 must focus on the merits of the petition, except where requirements
28 have been totally disregarded, as provided in *In re C.W.*, 147 Wn.2d
29 259, 281 (2002). A presumption in favor of deciding petitions on
30 their merits furthers both public and private interests because the
31 mental and physical well-being of individuals as well as public

1 safety may be implicated by the decision to release an individual and
2 discontinue his or her treatment.

3 **Sec. 2.** RCW 71.05.012 and 1997 c 112 s 1 are each amended to
4 read as follows:

5 It is the intent of the legislature to enhance continuity of care
6 for persons with serious (~~mental~~) behavioral health disorders that
7 can be controlled or stabilized in a less restrictive alternative
8 commitment. Within the guidelines stated in *In re LaBelle* 107 Wn. 2d
9 196 (1986), the legislature intends to encourage appropriate
10 interventions at a point when there is the best opportunity to
11 restore the person to or maintain satisfactory functioning.

12 For persons with a prior history or pattern of repeated
13 hospitalizations or law enforcement interventions due to
14 decompensation, the consideration of prior (~~mental~~) history is
15 particularly relevant in determining whether the person would
16 receive, if released, such care as is essential for his or her health
17 or safety.

18 Therefore, the legislature finds that for persons who are
19 currently under a commitment order, a prior history of decompensation
20 leading to repeated hospitalizations or law enforcement interventions
21 should be given great weight in determining whether a new less
22 restrictive alternative commitment should be ordered.

23 **Sec. 3.** RCW 71.05.020 and 2018 c 305 s 1, 2018 c 291 s 1, and
24 2018 c 201 s 3001 are each reenacted and amended to read as follows:

25 The definitions in this section apply throughout this chapter
26 unless the context clearly requires otherwise.

27 (1) "Admission" or "admit" means a decision by a physician,
28 physician assistant, or psychiatric advanced registered nurse
29 practitioner that a person should be examined or treated as a patient
30 in a hospital;

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

37 (3) "Antipsychotic medications" means that class of drugs
38 primarily used to treat serious manifestations of mental illness

1 associated with thought disorders, which includes, but is not limited
2 to atypical antipsychotic medications;

3 (4) "Approved substance use disorder treatment program" means a
4 program for persons with a substance use disorder provided by a
5 treatment program certified by the department as meeting standards
6 adopted under chapter 71.24 RCW;

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

10 (6) "Authority" means the Washington state health care authority;

11 (7) (~~"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 ~~(8))~~ "Chemical dependency professional" means a person certified
17 as a chemical dependency professional by the department under chapter
18 18.205 RCW;

19 ~~((9))~~ (8) "Commitment" means the determination by a court that
20 a person should be detained for a period of either evaluation or
21 treatment, or both, in an inpatient or a less restrictive setting;

22 ~~((10))~~ (9) "Conditional release" means a revocable modification
23 of a commitment, which may be revoked upon violation of any of its
24 terms;

25 ~~((11))~~ (10) "Crisis stabilization unit" means a short-term
26 facility or a portion of a facility licensed or certified by the
27 department under RCW 71.24.035, such as an evaluation and treatment
28 facility or a hospital, which has been designed to assess, diagnose,
29 and treat individuals experiencing an acute crisis without the use of
30 long-term hospitalization;

31 ~~((12))~~ (11) "Custody" means involuntary detention under the
32 provisions of this chapter or chapter 10.77 RCW, uninterrupted by any
33 period of unconditional release from commitment from a facility
34 providing involuntary care and treatment;

35 ~~((13))~~ (12) "Department" means the department of health;

36 ~~((14))~~ (13) "Designated crisis responder" means a mental health
37 professional appointed by the county, an entity appointed by the
38 county, or the behavioral health organization to perform the duties
39 specified in this chapter;

1 ~~((15))~~ (14) "Detention" or "detain" means the lawful
2 confinement of a person, under the provisions of this chapter;

3 ~~((16))~~ (15) "Developmental disabilities professional" means a
4 person who has specialized training and three years of experience in
5 directly treating or working with persons with developmental
6 disabilities and is a psychiatrist, physician assistant working with
7 a supervising psychiatrist, psychologist, psychiatric advanced
8 registered nurse practitioner, or social worker, and such other
9 developmental disabilities professionals as may be defined by rules
10 adopted by the secretary of the department of social and health
11 services;

12 ~~((17))~~ (16) "Developmental disability" means that condition
13 defined in RCW 71A.10.020(5);

14 ~~((18))~~ (17) "Director" means the director of the authority;

15 ~~((19))~~ (18) "Discharge" means the termination of hospital
16 medical authority. The commitment may remain in place, be terminated,
17 or be amended by court order;

18 ~~((20))~~ (19) "Drug addiction" means a disease, characterized by
19 a dependency on psychoactive chemicals, loss of control over the
20 amount and circumstances of use, symptoms of tolerance, physiological
21 or psychological withdrawal, or both, if use is reduced or
22 discontinued, and impairment of health or disruption of social or
23 economic functioning;

24 ~~((21))~~ (20) "Evaluation and treatment facility" means any
25 facility which can provide directly, or by direct arrangement with
26 other public or private agencies, emergency evaluation and treatment,
27 outpatient care, and timely and appropriate inpatient care to persons
28 suffering from a mental disorder, and which is licensed or certified
29 as such by the department. The authority may certify single beds as
30 temporary evaluation and treatment beds under RCW 71.05.745. A
31 physically separate and separately operated portion of a state
32 hospital may be designated as an evaluation and treatment facility. A
33 facility which is part of, or operated by, the department of social
34 and health services or any federal agency will not require
35 certification. No correctional institution or facility, or jail,
36 shall be an evaluation and treatment facility within the meaning of
37 this chapter;

38 ~~((22))~~ (21) "Gravely disabled" means a condition in which a
39 person, as a result of a ~~((mental))~~ behavioral health disorder ~~(, or~~
40 ~~as a result of the use of alcohol or other psychoactive chemicals))~~:

1 (a) Is in danger of serious physical harm resulting from a failure to
2 provide for his or her essential human needs of health or safety; or
3 (b) manifests severe deterioration (~~(in routine functioning)~~) from
4 safe behavior evidenced by repeated and escalating loss of cognitive
5 or volitional control over his or her actions and is not receiving
6 such care as is essential for his or her health or safety;

7 ~~((23))~~ (22) "Habilitative services" means those services
8 provided by program personnel to assist persons in acquiring and
9 maintaining life skills and in raising their levels of physical,
10 mental, social, and vocational functioning. Habilitative services
11 include education, training for employment, and therapy. The
12 habilitative process shall be undertaken with recognition of the risk
13 to the public safety presented by the person being assisted as
14 manifested by prior charged criminal conduct;

15 ~~((24))~~ (23) "Hearing" means any proceeding conducted in open
16 court (~~(. For purposes of this chapter, at any hearing the petitioner,~~
17 ~~the respondent, the witnesses, and the presiding judicial officer may~~
18 ~~be present and participate either in person or by video, as~~
19 ~~determined by the court. The term "video" as used herein shall~~
20 ~~include any functional equivalent. At any hearing conducted by video,~~
21 ~~the technology used must permit the judicial officer, counsel, all~~
22 ~~parties, and the witnesses to be able to see, hear, and speak, when~~
23 ~~authorized, during the hearing; to allow attorneys to use exhibits or~~
24 ~~other materials during the hearing; and to allow respondent's counsel~~
25 ~~to be in the same location as the respondent unless otherwise~~
26 ~~requested by the respondent or the respondent's counsel. Witnesses in~~
27 ~~a proceeding may also appear in court through other means, including~~
28 ~~telephonically, pursuant to the requirements of superior court civil~~
29 ~~rule 43. Notwithstanding the foregoing, the court, upon its own~~
30 ~~motion or upon a motion for good cause by any party, may require all~~
31 ~~parties and witnesses to participate in the hearing in person rather~~
32 ~~than by video. In ruling on any such motion, the court may allow in-~~
33 ~~person or video testimony; and the court may consider, among other~~
34 ~~things, whether the respondent's alleged mental illness affects the~~
35 ~~respondent's ability to perceive or participate in the proceeding by~~
36 ~~video)) that conforms to the requirements of section 100 of this act;~~

37 ~~((25))~~ (24) "History of one or more violent acts" refers to the
38 period of time ten years prior to the filing of a petition under this
39 chapter, excluding any time spent, but not any violent acts
40 committed, in a (~~mental~~) behavioral health facility (~~(, a long-term~~

1 ~~alcoholism or drug treatment facility~~)), or in confinement as a
2 result of a criminal conviction;

3 ~~((26))~~ (25) "Imminent" means the state or condition of being
4 likely to occur at any moment or near at hand, rather than distant or
5 remote;

6 ~~((27))~~ (26) "Individualized service plan" means a plan prepared
7 by a developmental disabilities professional with other professionals
8 as a team, for a person with developmental disabilities, which shall
9 state:

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

12 (b) The conditions and strategies necessary to achieve the
13 purposes of habilitation;

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

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

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

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

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

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

32 ~~(29))~~ (27) "Intoxicated person" means a person whose mental or
33 physical functioning is substantially impaired as a result of the use
34 of alcohol or other psychoactive chemicals;

35 ~~((30))~~ (28) "In need of assisted outpatient behavioral health
36 treatment" means that a person, as a result of a ~~((mental disorder or
37 substance use))~~ behavioral health disorder: (a) Has been committed by
38 a court to detention for involuntary behavioral health treatment
39 during the preceding thirty-six months; (b) is unlikely to
40 voluntarily participate in outpatient treatment without an order for

1 less restrictive alternative treatment, based on a history of
2 nonadherence with treatment or in view of the person's current
3 behavior; (c) is likely to benefit from less restrictive alternative
4 treatment; and (d) requires less restrictive alternative treatment to
5 prevent a relapse, decompensation, or deterioration that is likely to
6 result in the person presenting a likelihood of serious harm or the
7 person becoming gravely disabled within a reasonably short period of
8 time;

9 ~~((31))~~ (29) "Judicial commitment" means a commitment by a court
10 pursuant to the provisions of this chapter;

11 ~~((32))~~ (30) "Legal counsel" means attorneys and staff employed
12 by county prosecutor offices or the state attorney general acting in
13 their capacity as legal representatives of public ~~((mental))~~
14 behavioral health ~~((and substance use disorder))~~ service providers
15 under RCW 71.05.130;

16 ~~((33))~~ (31) "Less restrictive alternative treatment" means a
17 program of individualized treatment in a less restrictive setting
18 than inpatient treatment that includes the services described in RCW
19 71.05.585;

20 ~~((34))~~ (32) "Licensed physician" means a person licensed to
21 practice medicine or osteopathic medicine and surgery in the state of
22 Washington;

23 ~~((35))~~ (33) "Likelihood of serious harm" means:

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

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

36 ~~((36))~~ (34) "Medical clearance" means a physician or other
37 health care provider has determined that a person is medically stable
38 and ready for referral to the designated crisis responder;

1 (~~(37)~~) (35) "Mental disorder" means any organic, mental, or
2 emotional impairment which has substantial adverse effects on a
3 person's cognitive or volitional functions;

4 (~~(38)~~) (36) "Mental health professional" means a psychiatrist,
5 psychologist, physician assistant working with a supervising
6 psychiatrist, psychiatric advanced registered nurse practitioner,
7 psychiatric nurse, or social worker, and such other mental health
8 professionals as may be defined by rules adopted by the secretary
9 pursuant to the provisions of this chapter;

10 (~~(39)~~) (37) "~~(Mental)~~ Behavioral health service provider"
11 means a public or private agency that provides mental health,
12 substance use disorder, or co-occurring disorder services to persons
13 with ~~((mental disorders or substance use))~~ behavioral health
14 disorders as defined under this section and receives funding from
15 public sources. This includes, but is not limited to, hospitals
16 licensed under chapter 70.41 RCW, evaluation and treatment facilities
17 as defined in this section, community mental health service delivery
18 systems or behavioral health programs as defined in RCW 71.24.025,
19 facilities conducting competency evaluations and restoration under
20 chapter 10.77 RCW, approved substance use disorder treatment programs
21 as defined in this section, secure detoxification facilities as
22 defined in this section, and correctional facilities operated by
23 state and local governments;

24 (~~(40)~~) (38) "Peace officer" means a law enforcement official of
25 a public agency or governmental unit, and includes persons
26 specifically given peace officer powers by any state law, local
27 ordinance, or judicial order of appointment;

28 (~~(41)~~) (39) "Physician assistant" means a person licensed as a
29 physician assistant under chapter 18.57A or 18.71A RCW;

30 (~~(42)~~) (40) "Private agency" means any person, partnership,
31 corporation, or association that is not a public agency, whether or
32 not financed in whole or in part by public funds, which constitutes
33 an evaluation and treatment facility or private institution, or
34 hospital, or approved substance use disorder treatment program, which
35 is conducted for, or includes a department or ward conducted for, the
36 care and treatment of persons with ~~((mental illness, substance use
37 disorders, or both mental illness and substance use))~~ behavioral
38 health disorders;

39 (~~(43)~~) (41) "Professional person" means a mental health
40 professional, chemical dependency professional, or designated crisis

1 responder and shall also mean a physician, physician assistant,
2 psychiatric advanced registered nurse practitioner, registered nurse,
3 and such others as may be defined by rules adopted by the secretary
4 pursuant to the provisions of this chapter;

5 ~~((44))~~ (42) "Psychiatric advanced registered nurse
6 practitioner" means a person who is licensed as an advanced
7 registered nurse practitioner pursuant to chapter 18.79 RCW; and who
8 is board certified in advanced practice psychiatric and mental health
9 nursing;

10 ~~((45))~~ (43) "Psychiatrist" means a person having a license as a
11 physician and surgeon in this state who has in addition completed
12 three years of graduate training in psychiatry in a program approved
13 by the American medical association or the American osteopathic
14 association and is certified or eligible to be certified by the
15 American board of psychiatry and neurology;

16 ~~((46))~~ (44) "Psychologist" means a person who has been licensed
17 as a psychologist pursuant to chapter 18.83 RCW;

18 ~~((47))~~ (45) "Public agency" means any evaluation and treatment
19 facility or institution, secure detoxification facility, approved
20 substance use disorder treatment program, or hospital which is
21 conducted for, or includes a department or ward conducted for, the
22 care and treatment of persons with ~~((mental illness, substance use
23 disorders, or both mental illness and substance use))~~ behavioral
24 health disorders, if the agency is operated directly by federal,
25 state, county, or municipal government, or a combination of such
26 governments;

27 ~~((48))~~ (46) "Release" means legal termination of the commitment
28 under the provisions of this chapter;

29 ~~((49))~~ (47) "Resource management services" has the meaning
30 given in chapter 71.24 RCW;

31 ~~((50))~~ (48) "Secretary" means the secretary of the department
32 of health, or his or her designee;

33 ~~((51))~~ (49) "Secure detoxification facility" means a facility
34 operated by either a public or private agency or by the program of an
35 agency that:

36 (a) Provides for intoxicated persons:

37 (i) Evaluation and assessment, provided by certified chemical
38 dependency professionals;

39 (ii) Acute or subacute detoxification services; and

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

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

7 (c) Is licensed or certified as such by the department of health;

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

10 ~~(53))~~ (50) "Social worker" means a person with a master's or
11 further advanced degree from a social work educational program
12 accredited and approved as provided in RCW 18.320.010;

13 ~~((54))~~ (51) "Substance use disorder" means a cluster of
14 cognitive, behavioral, and physiological symptoms indicating that an
15 individual continues using the substance despite significant
16 substance-related problems. The diagnosis of a substance use disorder
17 is based on a pathological pattern of behaviors related to the use of
18 the substances;

19 ~~((55))~~ (52) "Therapeutic court personnel" means the staff of a
20 mental health court or other therapeutic court which has jurisdiction
21 over defendants who are dually diagnosed with mental disorders,
22 including court personnel, probation officers, a court monitor,
23 prosecuting attorney, or defense counsel acting within the scope of
24 therapeutic court duties;

25 ~~((56))~~ (53) "Treatment records" include registration and all
26 other records concerning persons who are receiving or who at any time
27 have received services for ~~((mental illness))~~ behavioral health
28 disorders, which are maintained by the department of social and
29 health services, the department, the authority, behavioral health
30 organizations and their staffs, and by treatment facilities.
31 Treatment records include mental health information contained in a
32 medical bill including but not limited to mental health drugs, a
33 mental health diagnosis, provider name, and dates of service stemming
34 from a medical service. Treatment records do not include notes or
35 records maintained for personal use by a person providing treatment
36 services for the department of social and health services, the
37 department, the authority, behavioral health organizations, or a
38 treatment facility if the notes or records are not available to
39 others;

1 (~~(57)~~) (54) "Triage facility" means a short-term facility or a
2 portion of a facility licensed or certified by the department under
3 RCW 71.24.035, which is designed as a facility to assess and
4 stabilize an individual or determine the need for involuntary
5 commitment of an individual, and must meet department residential
6 treatment facility standards. A triage facility may be structured as
7 a voluntary or involuntary placement facility;

8 (~~(58)~~) (55) "Violent act" means behavior that resulted in
9 homicide, attempted suicide, (~~(nonfatal—injuries)~~) injury, or
10 substantial loss or damage to property;

11 (56) "Behavioral health disorder" means either a mental disorder
12 as defined in this section, a substance use disorder as defined in
13 this section, or a co-occurring mental disorder and substance use
14 disorder;

15 (57) "Severe deterioration from safe behavior" means that a
16 person will, if not treated, suffer or continue to suffer severe and
17 abnormal mental, emotional, or physical distress, and this distress
18 is associated with significant impairment of judgment, reason, or
19 behavior;

20 (58) "Written order of apprehension" means an order of the court
21 for a peace officer to deliver the named person in the order to a
22 facility or emergency room as determined by the designated crisis
23 responder. Such orders shall be entered into the Washington crime
24 information center database;

25 (59) "Video" means the delivery of behavioral health services
26 through the use of interactive audio and video technology, permitting
27 real-time communication between a person and a designated crisis
28 responder, for the purpose of evaluation. "Video" does not include
29 the use of audio-only telephone, facsimile, email, or store and
30 forward technology. "Store and forward technology" means use of an
31 asynchronous transmission of a person's medical information from a
32 mental health service provider to the designated crisis responder
33 which results in medical diagnosis, consultation, or treatment.

34 **Sec. 4.** RCW 71.05.025 and 2016 sp.s. c 29 s 205 are each amended
35 to read as follows:

36 The legislature intends that the procedures and services
37 authorized in this chapter be integrated with those in chapter 71.24
38 RCW to the maximum extent necessary to assure ((a)) an appropriate
39 continuum of care ((~~to~~)) for persons with ((~~mental illness or who~~

1 ~~have mental disorders or substance use~~) behavioral health disorders,
2 as defined in either or both this chapter and chapter 71.24 RCW. To
3 this end, behavioral health organizations established in accordance
4 with chapter 71.24 RCW shall institute procedures which require
5 timely consultation with resource management services by designated
6 crisis responders, evaluation and treatment facilities, secure
7 detoxification facilities, and approved substance use disorder
8 treatment programs to assure that determinations to admit, detain,
9 commit, treat, discharge, or release persons with (~~mental disorders~~
10 ~~or substance use~~) behavioral health disorders under this chapter are
11 made only after appropriate information regarding such person's
12 treatment history and current treatment plan has been sought from
13 resource management services.

14 **Sec. 5.** RCW 71.05.026 and 2018 c 201 s 3002 are each amended to
15 read as follows:

16 (1) Except for monetary damage claims which have been reduced to
17 final judgment by a superior court, this section applies to all
18 claims against the state, state agencies, state officials, or state
19 employees that exist on or arise after March 29, 2006.

20 (2) Except as expressly provided in contracts entered into
21 between the authority and the behavioral health organizations after
22 March 29, 2006, the entities identified in subsection (3) of this
23 section shall have no claim for declaratory relief, injunctive
24 relief, judicial review under chapter 34.05 RCW, or civil liability
25 against the state or state agencies for actions or inactions
26 performed pursuant to the administration of this chapter with regard
27 to the following: (a) The allocation or payment of federal or state
28 funds; (b) the use or allocation of state hospital beds; or (c)
29 financial responsibility for the provision of inpatient (~~mental~~)
30 behavioral health (~~care or inpatient substance use~~) disorder
31 treatment and care.

32 (3) This section applies to counties, behavioral health
33 organizations, and entities which contract to provide behavioral
34 health organization services and their subcontractors, agents, or
35 employees.

36 **Sec. 6.** RCW 71.05.027 and 2018 c 201 s 3003 are each amended to
37 read as follows:

1 (~~(1) Not later than January 1, 2007,~~) All persons providing
2 treatment under this chapter shall also implement the integrated
3 comprehensive screening and assessment process for (~~chemical~~
4 ~~dependency and mental~~) behavioral health disorders adopted pursuant
5 to RCW 71.24.630 (~~and shall document the numbers of clients with co-~~
6 ~~occurring mental and substance abuse disorders based on a quadrant~~
7 ~~system of low and high needs.~~

8 ~~(2) Treatment providers and behavioral health organizations who~~
9 ~~fail to implement the integrated comprehensive screening and~~
10 ~~assessment process for chemical dependency and mental disorders by~~
11 ~~July 1, 2007, shall be subject to contractual penalties established~~
12 ~~under RCW 71.24.630).~~

13 **Sec. 7.** RCW 71.05.030 and 1998 c 297 s 4 are each amended to
14 read as follows:

15 Persons suffering from a (~~mental~~) behavioral health disorder
16 may not be involuntarily committed for treatment of such disorder
17 except pursuant to provisions of this chapter, chapter 10.77 RCW,
18 chapter 71.06 RCW, chapter 71.34 RCW, transfer pursuant to RCW
19 72.68.031 through 72.68.037, or pursuant to court ordered evaluation
20 and treatment not to exceed ninety days pending a criminal trial or
21 sentencing.

22 **Sec. 8.** RCW 71.05.040 and 2018 c 201 s 3004 are each amended to
23 read as follows:

24 Persons with developmental disabilities, impaired by substance
25 use disorder, or suffering from dementia shall not be detained for
26 evaluation and treatment or judicially committed solely by reason of
27 that condition unless such condition causes a person to be gravely
28 disabled or (~~as a result of a mental disorder such condition exists~~
29 ~~that constitutes~~) to present a likelihood of serious harm. However,
30 persons with developmental disabilities, impaired by substance use
31 disorder, or suffering from dementia and who otherwise meet the
32 criteria for detention or judicial commitment are not ineligible for
33 detention or commitment based on this condition alone.

34 **Sec. 9.** RCW 71.05.050 and 2016 sp.s. c 29 s 207 are each amended
35 to read as follows:

36 (1) Nothing in this chapter shall be construed to limit the right
37 of any person to apply voluntarily to any public or private agency or

1 practitioner for treatment of a (~~mental disorder or substance use~~)
2 behavioral health disorder, either by direct application or by
3 referral. Any person voluntarily admitted for inpatient treatment to
4 any public or private agency shall be released immediately upon his
5 or her request. Any person voluntarily admitted for inpatient
6 treatment to any public or private agency shall orally be advised of
7 the right to immediate discharge, and further advised of such rights
8 in writing as are secured to them pursuant to this chapter and their
9 rights of access to attorneys, courts, and other legal redress. Their
10 condition and status shall be reviewed at least once each one hundred
11 eighty days for evaluation as to the need for further treatment or
12 possible discharge, at which time they shall again be advised of
13 their right to discharge upon request.

14 (2) If the professional staff of any public or private agency or
15 hospital regards a person voluntarily admitted who requests discharge
16 as presenting, as a result of a (~~mental disorder or substance use~~)
17 behavioral health disorder, an imminent likelihood of serious harm,
18 or is gravely disabled, they may detain such person for sufficient
19 time to notify the designated crisis responder of such person's
20 condition to enable the designated crisis responder to authorize such
21 person being further held in custody or transported to an evaluation
22 and treatment center, secure detoxification facility, or approved
23 substance use disorder treatment program pursuant to the provisions
24 of this chapter, which shall in ordinary circumstances be no later
25 than the next judicial day.

26 (3) If a person is brought to the emergency room of a public or
27 private agency or hospital for observation or treatment, the person
28 refuses voluntary admission, and the professional staff of the public
29 or private agency or hospital regard such person as presenting as a
30 result of a (~~mental disorder or substance use~~) behavioral health
31 disorder an imminent likelihood of serious harm, or as presenting an
32 imminent danger because of grave disability, they may detain such
33 person for sufficient time to notify the designated crisis responder
34 of such person's condition to enable the designated crisis responder
35 to authorize such person being further held in custody or transported
36 to an evaluation treatment center, secure detoxification facility, or
37 approved substance use disorder treatment program pursuant to the
38 conditions in this chapter, but which time shall be no more than six
39 hours from the time the professional staff notify the designated

1 crisis responder of the need for evaluation, not counting time
2 periods prior to medical clearance.

3 (4) Dismissal of a commitment petition is not the appropriate
4 remedy for a violation of the timeliness requirements of this section
5 based on the intent of this chapter under RCW 71.05.010 except in the
6 few cases where the facility staff or designated crisis responder has
7 totally disregarded the requirements of this section.

8 **Sec. 10.** RCW 71.05.100 and 2018 c 201 s 3005 are each amended to
9 read as follows:

10 In addition to the responsibility provided for by RCW 43.20B.330,
11 any person, or his or her estate, or his or her spouse, (~~or the~~
12 ~~parents of a minor person~~)) who is involuntarily detained pursuant to
13 this chapter for the purpose of treatment and evaluation outside of a
14 facility maintained and operated by the department of social and
15 health services shall be responsible for the cost of such care and
16 treatment. In the event that an individual is unable to pay for such
17 treatment or in the event payment would result in a substantial
18 hardship upon the individual or his or her family, then the county of
19 residence of such person shall be responsible for such costs. If it
20 is not possible to determine the county of residence of the person,
21 the cost shall be borne by the county where the person was originally
22 detained. The department of social and health services, or the
23 authority, as appropriate, shall, pursuant to chapter 34.05 RCW,
24 adopt standards as to (1) inability to pay in whole or in part, (2) a
25 definition of substantial hardship, and (3) appropriate payment
26 schedules. Financial responsibility with respect to services and
27 facilities of the department of social and health services shall
28 continue to be as provided in RCW 43.20B.320 through 43.20B.360 and
29 43.20B.370.

30 **Sec. 11.** RCW 71.05.120 and 2016 sp.s. c 29 s 208 and 2016 c 158
31 s 4 are each reenacted and amended to read as follows:

32 (1) No officer of a public or private agency, nor the
33 superintendent, professional person in charge, his or her
34 professional designee, or attending staff of any such agency, nor any
35 public official performing functions necessary to the administration
36 of this chapter, nor peace officer responsible for detaining a person
37 pursuant to this chapter, nor any designated crisis responder, nor
38 the state, a unit of local government, an evaluation and treatment

1 facility, a secure detoxification facility, or an approved substance
2 use disorder treatment program shall be civilly or criminally liable
3 for performing duties pursuant to this chapter with regard to the
4 decision of whether to admit, discharge, release, administer
5 antipsychotic medications, or detain a person for evaluation and
6 treatment: PROVIDED, That such duties were performed in good faith
7 and without gross negligence.

8 (2) Peace officers and their employing agencies are not liable
9 for the referral of a person, or the failure to refer a person, to a
10 (~~mental~~) behavioral health agency pursuant to a policy adopted
11 pursuant to RCW 71.05.457 if such action or inaction is taken in good
12 faith and without gross negligence.

13 (3) This section does not relieve a person from giving the
14 required notices under RCW 71.05.330(2) or 71.05.340(1)(b), or the
15 duty to warn or to take reasonable precautions to provide protection
16 from violent behavior where the patient has communicated an actual
17 threat of physical violence against a reasonably identifiable victim
18 or victims. The duty to warn or to take reasonable precautions to
19 provide protection from violent behavior is discharged if reasonable
20 efforts are made to communicate the threat to the victim or victims
21 and to law enforcement personnel.

22 **Sec. 12.** RCW 71.05.132 and 2016 sp.s. c 29 s 209 are each
23 amended to read as follows:

24 When any court orders a person to receive treatment under this
25 chapter, the order shall include a statement that if the person is,
26 or becomes, subject to supervision by the department of corrections,
27 the person must notify the treatment provider and the person's
28 (~~mental health~~) treatment (~~information and substance use disorder~~
29 ~~treatment information~~) records must be shared with the department of
30 corrections for the duration of the offender's incarceration and
31 supervision, under RCW 71.05.445. Upon a petition by a person who
32 does not have a history of one or more violent acts, the court may,
33 for good cause, find that public safety would not be enhanced by the
34 sharing of this person's information.

35 **Sec. 13.** RCW 71.05.150 and 2018 c 291 s 4 are each amended to
36 read as follows:

37 (1) When a designated crisis responder receives information
38 alleging that a person, as a result of a (~~mental~~) behavioral health

1 disorder, (~~substance use disorder, or both~~) presents a likelihood
2 of serious harm or is gravely disabled, or that a person is in need
3 of assisted outpatient behavioral health treatment; the designated
4 crisis responder may, after investigation and evaluation of the
5 specific facts alleged and of the reliability and credibility of any
6 person providing information to initiate detention or involuntary
7 outpatient treatment, if satisfied that the allegations are true and
8 that the person will not voluntarily seek appropriate treatment, file
9 a petition for initial detention under this section or a petition for
10 involuntary outpatient behavioral health treatment under RCW
11 71.05.148. Before filing the petition, the designated crisis
12 responder must personally interview the person, unless the person
13 refuses an interview, and determine whether the person will
14 voluntarily receive appropriate evaluation and treatment at an
15 evaluation and treatment facility, crisis stabilization unit, triage
16 facility, or approved substance use disorder treatment program. The
17 interview performed by the designated crisis responder may be
18 conducted by video provided that a licensed health care professional
19 or professional person who can adequately and accurately assist with
20 obtaining any necessary information is available at the time of the
21 interview.

22 (2) (a) (~~An~~) A written order of apprehension to detain a person
23 with a (~~mental~~) behavioral health disorder to a designated
24 evaluation and treatment facility, (~~or to detain a person with a~~
25 ~~substance use disorder to~~) a secure detoxification facility, or an
26 approved substance use disorder treatment program, for not more than
27 a seventy-two-hour evaluation and treatment period, may be issued by
28 a judge of the superior court upon request of a designated crisis
29 responder, subject to (d) of this subsection, whenever it appears to
30 the satisfaction of a judge of the superior court:

- 31 (i) That there is probable cause to support the petition; and
32 (ii) That the person has refused or failed to accept appropriate
33 evaluation and treatment voluntarily.

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

38 (c) The order shall designate retained counsel or, if counsel is
39 appointed from a list provided by the court, the name, business

1 address, and telephone number of the attorney appointed to represent
2 the person.

3 (d) A court may not issue an order to detain a person to a secure
4 detoxification facility or approved substance use disorder treatment
5 program unless there is an available secure detoxification facility
6 or approved substance use disorder treatment program that has
7 adequate space for the person.

8 (3) The designated crisis responder shall then serve or cause to
9 be served on such person, his or her guardian, and conservator, if
10 any, a copy of the order together with a notice of rights, and a
11 petition for initial detention. After service on such person the
12 designated crisis responder shall file the return of service in court
13 and provide copies of all papers in the court file to the evaluation
14 and treatment facility, secure detoxification facility, or approved
15 substance use disorder treatment program, and the designated
16 attorney. The designated crisis responder shall notify the court and
17 the prosecuting attorney that a probable cause hearing will be held
18 within seventy-two hours of the date and time of outpatient
19 evaluation or admission to the evaluation and treatment facility,
20 secure detoxification facility, or approved substance use disorder
21 treatment program. The person shall be permitted to be accompanied by
22 one or more of his or her relatives, friends, an attorney, a personal
23 physician, or other professional or religious advisor to the place of
24 evaluation. An attorney accompanying the person to the place of
25 evaluation shall be permitted to be present during the admission
26 evaluation. Any other individual accompanying the person may be
27 present during the admission evaluation. The facility may exclude the
28 individual if his or her presence would present a safety risk, delay
29 the proceedings, or otherwise interfere with the evaluation.

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

38 **Sec. 14.** RCW 71.05.150 and 2018 c 291 s 4 are each amended to
39 read as follows:

1 (1) When a designated crisis responder receives information
2 alleging that a person, as a result of a (~~mental~~) behavioral health
3 disorder, (~~substance use disorder, or both~~) presents a likelihood
4 of serious harm or is gravely disabled, or that a person is in need
5 of assisted outpatient behavioral health treatment; the designated
6 crisis responder may, after investigation and evaluation of the
7 specific facts alleged and of the reliability and credibility of any
8 person providing information to initiate detention or involuntary
9 outpatient treatment, if satisfied that the allegations are true and
10 that the person will not voluntarily seek appropriate treatment, file
11 a petition for initial detention under this section or a petition for
12 involuntary outpatient behavioral health treatment under RCW
13 71.05.148. Before filing the petition, the designated crisis
14 responder must personally interview the person, unless the person
15 refuses an interview, and determine whether the person will
16 voluntarily receive appropriate evaluation and treatment at an
17 evaluation and treatment facility, crisis stabilization unit, triage
18 facility, or approved substance use disorder treatment program. The
19 interview performed by the designated crisis responder may be
20 conducted by video provided that a licensed health care professional
21 or professional person who can adequately and accurately assist with
22 obtaining any necessary information is available at the time of the
23 interview.

24 (2) (a) (~~An~~) A written order of apprehension to detain a person
25 with a (~~mental~~) behavioral health disorder to a designated
26 evaluation and treatment facility, (~~or to detain a person with a~~
27 ~~substance use disorder to~~) a secure detoxification facility, or an
28 approved substance use disorder treatment program, for a period of
29 not more than (~~a seventy-two hour~~) five days for evaluation and
30 treatment (~~period~~), may be issued by a judge of the superior court
31 upon request of a designated crisis responder, subject to (d) of this
32 subsection, whenever it appears to the satisfaction of a judge of the
33 superior court:

34 (i) That there is probable cause to support the petition; and
35 (ii) That the person has refused or failed to accept appropriate
36 evaluation and treatment voluntarily.

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

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

5 (d) A court may not issue an order to detain a person to a secure
6 detoxification facility or approved substance use disorder treatment
7 program unless there is an available secure detoxification facility
8 or approved substance use disorder treatment program that has
9 adequate space for the person.

10 (3) The designated crisis responder shall then serve or cause to
11 be served on such person, his or her guardian, and conservator, if
12 any, a copy of the order together with a notice of rights, and a
13 petition for initial detention. After service on such person the
14 designated crisis responder shall file the return of service in court
15 and provide copies of all papers in the court file to the evaluation
16 and treatment facility, secure detoxification facility, or approved
17 substance use disorder treatment program, and the designated
18 attorney. The designated crisis responder shall notify the court and
19 the prosecuting attorney that a probable cause hearing will be held
20 within (~~seventy-two hours~~) five days of the date and time of
21 outpatient evaluation or admission to the evaluation and treatment
22 facility, secure detoxification facility, or approved substance use
23 disorder treatment program. The person shall be permitted to be
24 accompanied by one or more of his or her relatives, friends, an
25 attorney, a personal physician, or other professional or religious
26 advisor to the place of evaluation. An attorney accompanying the
27 person to the place of evaluation shall be permitted to be present
28 during the admission evaluation. Any other individual accompanying
29 the person may be present during the admission evaluation. The
30 facility may exclude the individual if his or her presence would
31 present a safety risk, delay the proceedings, or otherwise interfere
32 with the evaluation.

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

1 **Sec. 15.** RCW 71.05.150 and 2018 c 291 s 5 are each amended to
2 read as follows:

3 (1) When a designated crisis responder receives information
4 alleging that a person, as a result of a (~~mental~~) behavioral health
5 disorder, (~~substance use disorder, or both~~) presents a likelihood
6 of serious harm or is gravely disabled, or that a person is in need
7 of assisted outpatient behavioral health treatment; the designated
8 crisis responder may, after investigation and evaluation of the
9 specific facts alleged and of the reliability and credibility of any
10 person providing information to initiate detention or involuntary
11 outpatient treatment, if satisfied that the allegations are true and
12 that the person will not voluntarily seek appropriate treatment, file
13 a petition for initial detention under this section or a petition for
14 involuntary outpatient behavioral health treatment under RCW
15 71.05.148. Before filing the petition, the designated crisis
16 responder must personally interview the person, unless the person
17 refuses an interview, and determine whether the person will
18 voluntarily receive appropriate evaluation and treatment at an
19 evaluation and treatment facility, crisis stabilization unit, triage
20 facility, or approved substance use disorder treatment program. The
21 interview performed by the designated crisis responder may be
22 conducted by video provided that a licensed health care professional
23 or professional person who can adequately and accurately assist with
24 obtaining any necessary information is available at the time of the
25 interview.

26 (2) (a) (~~An~~) A written order of apprehension to detain a person
27 with a (~~mental~~) behavioral health disorder to a designated
28 evaluation and treatment facility, (~~or to detain a person with a~~
29 ~~substance use disorder to~~) a secure detoxification facility, or an
30 approved substance use disorder treatment program, for a period of
31 not more than (~~a seventy-two hour~~) five days for evaluation and
32 treatment (~~period~~), may be issued by a judge of the superior court
33 upon request of a designated crisis responder whenever it appears to
34 the satisfaction of a judge of the superior court:

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

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

38 (b) The petition for initial detention, signed under penalty of
39 perjury, or sworn telephonic testimony may be considered by the court

1 in determining whether there are sufficient grounds for issuing the
2 order.

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

7 (3) The designated crisis responder shall then serve or cause to
8 be served on such person, his or her guardian, and conservator, if
9 any, a copy of the order together with a notice of rights, and a
10 petition for initial detention. After service on such person the
11 designated crisis responder shall file the return of service in court
12 and provide copies of all papers in the court file to the evaluation
13 and treatment facility, secure detoxification facility, or approved
14 substance use disorder treatment program, and the designated
15 attorney. The designated crisis responder shall notify the court and
16 the prosecuting attorney that a probable cause hearing will be held
17 within ((~~seventy-two hours~~)) five days of the date and time of
18 outpatient evaluation or admission to the evaluation and treatment
19 facility, secure detoxification facility, or approved substance use
20 disorder treatment program. The person shall be permitted to be
21 accompanied by one or more of his or her relatives, friends, an
22 attorney, a personal physician, or other professional or religious
23 advisor to the place of evaluation. An attorney accompanying the
24 person to the place of evaluation shall be permitted to be present
25 during the admission evaluation. Any other individual accompanying
26 the person may be present during the admission evaluation. The
27 facility may exclude the individual if his or her presence would
28 present a safety risk, delay the proceedings, or otherwise interfere
29 with the evaluation.

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

38 **Sec. 16.** RCW 71.05.153 and 2016 sp.s. c 29 s 212 are each
39 amended to read as follows:

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

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

27 ~~(3-))~~ (a) Subject to (b) of this subsection, a peace officer may
28 take or cause such person to be taken into custody and immediately
29 delivered to a triage facility, crisis stabilization unit, evaluation
30 and treatment facility, secure detoxification facility, approved
31 substance use disorder treatment program, or the emergency department
32 of a local hospital under the following circumstances:

33 (i) Pursuant to subsection (1) (~~(or (2-))~~) of this section; or
34 (ii) When he or she has reasonable cause to believe that such
35 person is suffering from a (~~mental~~) behavioral health disorder (~~(or~~
36 ~~substance use disorder)~~) and presents an imminent likelihood of
37 serious harm or is in imminent danger because of being gravely
38 disabled.

39 (b) A peace officer's delivery of a person, (~~(based on a~~
40 ~~substance use disorder,))~~ to a secure detoxification facility or

1 approved substance use disorder treatment program is subject to the
2 availability of a secure detoxification facility or approved
3 substance use disorder treatment program with adequate space for the
4 person.

5 ~~((4))~~ (3) Persons delivered to a crisis stabilization unit,
6 evaluation and treatment facility, emergency department of a local
7 hospital, triage facility that has elected to operate as an
8 involuntary facility, secure detoxification facility, or approved
9 substance use disorder treatment program by peace officers pursuant
10 to subsection ~~((3))~~ (2) of this section may be held by the facility
11 for a period of up to twelve hours, not counting time periods prior
12 to medical clearance.

13 ~~((5))~~ (4) Within three hours after arrival, not counting time
14 periods prior to medical clearance, the person must be examined by a
15 mental health professional or chemical dependency professional.
16 Within twelve hours of notice of the need for evaluation, not
17 counting time periods prior to medical clearance, the designated
18 crisis responder must determine whether the individual meets
19 detention criteria. The interview performed by the designated crisis
20 responder may be conducted by video provided that a licensed health
21 care professional or professional person who can adequately and
22 accurately assist with obtaining any necessary information is
23 available at the time of the interview. If the individual is
24 detained, the designated crisis responder shall file a petition for
25 detention or a supplemental petition as appropriate and commence
26 service on the designated attorney for the detained person. If the
27 individual is released to the community, the ~~((mental))~~ behavioral
28 health service provider shall inform the peace officer of the release
29 within a reasonable period of time after the release if the peace
30 officer has specifically requested notification and provided contact
31 information to the provider.

32 ~~((6))~~ (5) Dismissal of a commitment petition is not the
33 appropriate remedy for a violation of the timeliness requirements of
34 this section based on the intent of this chapter under RCW 71.05.010
35 except in the few cases where the facility staff or designated
36 ~~((mental—health—professional))~~ crisis responder has totally
37 disregarded the requirements of this section.

38 **Sec. 17.** RCW 71.05.153 and 2016 sp.s. c 29 s 212 are each
39 amended to read as follows:

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

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

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

33 (i) Pursuant to subsection (1) (~~(or (2))~~) of this section; or
34 (ii) When he or she has reasonable cause to believe that such
35 person is suffering from a (~~mental~~) behavioral health disorder (~~(or~~
36 ~~substance use disorder)~~) and presents an imminent likelihood of
37 serious harm or is in imminent danger because of being gravely
38 disabled.

39 (b) A peace officer's delivery of a person, (~~(based on a~~
40 ~~substance use disorder,~~) to a secure detoxification facility or

1 approved substance use disorder treatment program is subject to the
2 availability of a secure detoxification facility or approved
3 substance use disorder treatment program with adequate space for the
4 person.

5 ~~((4))~~ (3) Persons delivered to a crisis stabilization unit,
6 evaluation and treatment facility, emergency department of a local
7 hospital, triage facility that has elected to operate as an
8 involuntary facility, secure detoxification facility, or approved
9 substance use disorder treatment program by peace officers pursuant
10 to subsection ~~((3))~~ (2) of this section may be held by the facility
11 for a period of up to twelve hours, not counting time periods prior
12 to medical clearance.

13 ~~((5))~~ (4) Within three hours after arrival, not counting time
14 periods prior to medical clearance, the person must be examined by a
15 mental health professional or chemical dependency professional.
16 Within twelve hours of notice of the need for evaluation, not
17 counting time periods prior to medical clearance, the designated
18 crisis responder must determine whether the individual meets
19 detention criteria. The interview performed by the designated crisis
20 responder may be conducted by video provided that a licensed health
21 care professional or professional person who can adequately and
22 accurately assist with obtaining any necessary information is
23 available at the time of the interview. If the individual is
24 detained, the designated crisis responder shall file a petition for
25 detention or a supplemental petition as appropriate and commence
26 service on the designated attorney for the detained person. If the
27 individual is released to the community, the ~~((mental))~~ behavioral
28 health service provider shall inform the peace officer of the release
29 within a reasonable period of time after the release if the peace
30 officer has specifically requested notification and provided contact
31 information to the provider.

32 ~~((6))~~ (5) Dismissal of a commitment petition is not the
33 appropriate remedy for a violation of the timeliness requirements of
34 this section based on the intent of this chapter under RCW 71.05.010
35 except in the few cases where the facility staff or designated
36 ~~((mental—health—professional))~~ crisis responder has totally
37 disregarded the requirements of this section.

38 **Sec. 18.** RCW 71.05.153 and 2016 sp.s. c 29 s 213 are each
39 amended to read as follows:

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

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

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

30 (a) Pursuant to subsection (1) (~~or (2)~~) of this section; or
31 (b) When he or she has reasonable cause to believe that such
32 person is suffering from a (~~mental~~) behavioral health disorder (~~or~~
33 ~~substance use disorder~~) and presents an imminent likelihood of
34 serious harm or is in imminent danger because of being gravely
35 disabled.

36 (~~(4)~~) (3) Persons delivered to a crisis stabilization unit,
37 evaluation and treatment facility, emergency department of a local
38 hospital, triage facility that has elected to operate as an
39 involuntary facility, secure detoxification facility, or approved
40 substance use disorder treatment program by peace officers pursuant

1 to subsection (~~((3))~~) (2) of this section may be held by the facility
2 for a period of up to twelve hours, not counting time periods prior
3 to medical clearance.

4 (~~((5))~~) (4) Within three hours after arrival, not counting time
5 periods prior to medical clearance, the person must be examined by a
6 mental health professional or chemical dependency professional.
7 Within twelve hours of notice of the need for evaluation, not
8 counting time periods prior to medical clearance, the designated
9 crisis responder must determine whether the individual meets
10 detention criteria. The interview performed by the designated crisis
11 responder may be conducted by video provided that a licensed health
12 care professional or professional person who can adequately and
13 accurately assist with obtaining any necessary information is
14 available at the time of the interview. If the individual is
15 detained, the designated crisis responder shall file a petition for
16 detention or a supplemental petition as appropriate and commence
17 service on the designated attorney for the detained person. If the
18 individual is released to the community, the (~~mental~~) behavioral
19 health service provider shall inform the peace officer of the release
20 within a reasonable period of time after the release if the peace
21 officer has specifically requested notification and provided contact
22 information to the provider.

23 (~~((6))~~) (5) Dismissal of a commitment petition is not the
24 appropriate remedy for a violation of the timeliness requirements of
25 this section based on the intent of this chapter under RCW 71.05.010
26 except in the few cases where the facility staff or designated
27 (~~mental health professional~~) crisis responder has totally
28 disregarded the requirements of this section.

29 **Sec. 19.** RCW 71.05.160 and 2016 sp.s. c 29 s 217 are each
30 amended to read as follows:

31 (1) Any facility receiving a person pursuant to RCW 71.05.150 or
32 71.05.153 shall require the designated crisis responder to prepare a
33 petition for initial detention stating the circumstances under which
34 the person's condition was made known and stating that there is
35 evidence, as a result of his or her personal observation or
36 investigation, that the actions of the person for which application
37 is made constitute a likelihood of serious harm, or that he or she is
38 gravely disabled, and stating the specific facts known to him or her
39 as a result of his or her personal observation or investigation, upon

1 which he or she bases the belief that such person should be detained
2 for the purposes and under the authority of this chapter.

3 (2)(a) If a person is involuntarily placed in an evaluation and
4 treatment facility, secure detoxification facility, or approved
5 substance use disorder treatment program pursuant to RCW 71.05.150 or
6 71.05.153, on the next judicial day following the initial detention,
7 the designated crisis responder shall file with the court and serve
8 the designated attorney of the detained person the petition or
9 supplemental petition for initial detention, proof of service of
10 notice, and a copy of a notice of emergency detention.

11 (b) If the person is involuntarily detained at an evaluation and
12 treatment facility, secure detoxification facility, or approved
13 substance use disorder treatment program in a different county from
14 where the person was initially detained, the facility or program may
15 file with the court and serve the designated attorney of the detained
16 person the petition or supplemental petition for initial detention,
17 proof of service of notice, and a copy of a notice of emergency
18 detention at the request of the designated crisis responder.

19 **Sec. 20.** RCW 71.05.170 and 2016 sp.s. c 29 s 218 are each
20 amended to read as follows:

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

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

35 **Sec. 21.** RCW 71.05.180 and 2016 sp.s. c 29 s 219 are each
36 amended to read as follows:

37 If the evaluation and treatment facility, secure detoxification
38 facility, or approved substance use disorder treatment program admits

1 the person, it may detain him or her for evaluation and treatment for
2 a period not to exceed (~~(seventy-two hours)~~) five days from the time
3 of acceptance as set forth in RCW 71.05.170. The computation of such
4 (~~(seventy-two hour)~~) five-day period shall exclude Saturdays,
5 Sundays, and holidays.

6 **Sec. 22.** RCW 71.05.190 and 2016 sp.s. c 29 s 220 are each
7 amended to read as follows:

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

21 **Sec. 23.** RCW 71.05.195 and 2016 sp.s. c 29 s 221 are each
22 amended to read as follows:

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

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

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

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

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

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

29 **Sec. 24.** RCW 71.05.201 and 2018 c 291 s 11 are each amended to
30 read as follows:

31 (1) If a designated crisis responder decides not to detain a
32 person for evaluation and treatment under RCW 71.05.150 or 71.05.153
33 or forty-eight hours have elapsed since a designated crisis responder
34 received a request for investigation and the designated crisis
35 responder has not taken action to have the person detained, an
36 immediate family member or guardian or conservator of the person may
37 petition the superior court for the person's initial detention.

38 (2) A petition under this section must be filed within ten
39 calendar days following the designated crisis responder investigation

1 or the request for a designated crisis responder investigation. If
2 more than ten days have elapsed, the immediate family member,
3 guardian, or conservator may request a new designated crisis
4 responder investigation.

5 (3) (a) The petition must be filed in the county in which the
6 designated crisis responder investigation occurred or was requested
7 to occur and must be submitted on forms developed by the
8 administrative office of the courts for this purpose. The petition
9 must be accompanied by a sworn declaration from the petitioner, and
10 other witnesses if desired, describing why the person should be
11 detained for evaluation and treatment. The description of why the
12 person should be detained may contain, but is not limited to, the
13 information identified in RCW 71.05.212.

14 (b) The petition must contain:

15 (i) A description of the relationship between the petitioner and
16 the person; and

17 (ii) The date on which an investigation was requested from the
18 designated crisis responder.

19 (4) The court shall, within one judicial day, review the petition
20 to determine whether the petition raises sufficient evidence to
21 support the allegation. If the court so finds, it shall provide a
22 copy of the petition to the designated crisis responder agency with
23 an order for the agency to provide the court, within one judicial
24 day, with a written sworn statement describing the basis for the
25 decision not to seek initial detention and a copy of all information
26 material to the designated crisis responder's current decision.

27 (5) Following the filing of the petition and before the court
28 reaches a decision, any person, including a mental health
29 professional, may submit a sworn declaration to the court in support
30 of or in opposition to initial detention.

31 (6) The court shall dismiss the petition at any time if it finds
32 that a designated crisis responder has filed a petition for the
33 person's initial detention under RCW 71.05.150 or 71.05.153 or that
34 the person has voluntarily accepted appropriate treatment.

35 (7) The court must issue a final ruling on the petition within
36 five judicial days after it is filed. After reviewing all of the
37 information provided to the court, the court may enter an order for
38 initial detention or an order instructing the designated crisis
39 responder to file a petition for assisted outpatient behavioral
40 health treatment if the court finds that: (a) There is probable cause

1 to support a petition for detention or assisted outpatient behavioral
2 health treatment; and (b) the person has refused or failed to accept
3 appropriate evaluation and treatment voluntarily. The court shall
4 transmit its final decision to the petitioner.

5 (8) If the court enters an order for initial detention, it shall
6 provide the order to the designated crisis responder agency and issue
7 a written order for apprehension (~~(of the person by a peace officer~~
8 ~~for delivery of the person to a facility or emergency room determined~~
9 ~~by the designated crisis responder)). The designated crisis responder~~
10 agency serving the jurisdiction of the court must collaborate and
11 coordinate with law enforcement regarding apprehensions and
12 detentions under this subsection, including sharing of information
13 relating to risk and which would assist in locating the person. A
14 person may not be detained to jail pursuant to a written order issued
15 under this subsection. An order for detention under this section
16 should contain the advisement of rights which the person would
17 receive if the person were detained by a designated crisis responder.
18 An order for initial detention under this section expires one hundred
19 eighty days from issuance.

20 (9) Except as otherwise expressly stated in this chapter, all
21 procedures must be followed as if the order had been entered under
22 RCW 71.05.150. RCW 71.05.160 does not apply if detention was
23 initiated under the process set forth in this section.

24 (10) For purposes of this section, "immediate family member"
25 means a spouse, domestic partner, child, stepchild, parent,
26 stepparent, grandparent, or sibling.

27 **Sec. 25.** RCW 71.05.210 and 2017 3rd sp.s. c 14 s 15 are each
28 amended to read as follows:

29 (1) Each person involuntarily detained and accepted or admitted
30 at an evaluation and treatment facility, secure detoxification
31 facility, or approved substance use disorder treatment program:

32 (a) Shall, within twenty-four hours of his or her admission or
33 acceptance at the facility, not counting time periods prior to
34 medical clearance, be examined and evaluated by:

35 (i) One physician, physician assistant, or advanced registered
36 nurse practitioner; and

37 (ii) One mental health professional. If the person is detained
38 for substance use disorder evaluation and treatment, the person may

1 be examined by a chemical dependency professional instead of a mental
2 health professional; and

3 (b) Shall receive such treatment and care as his or her condition
4 requires including treatment on an outpatient basis for the period
5 that he or she is detained, except that, beginning twenty-four hours
6 prior to a trial or hearing pursuant to RCW 71.05.215, 71.05.240,
7 71.05.310, 71.05.320, 71.05.590, or 71.05.217, the individual may
8 refuse psychiatric medications, but may not refuse: (i) Any other
9 medication previously prescribed by a person licensed under Title 18
10 RCW; or (ii) emergency lifesaving treatment, and the individual shall
11 be informed at an appropriate time of his or her right of such
12 refusal. The person shall be detained up to (~~seventy-two hours~~)
13 five days, if, in the opinion of the professional person in charge of
14 the facility, or his or her professional designee, the person
15 presents a likelihood of serious harm, or is gravely disabled. A
16 person who has been detained for (~~seventy-two hours~~) five days
17 shall no later than the end of such period be released, unless
18 referred for further care on a voluntary basis, or detained pursuant
19 to court order for further treatment as provided in this chapter.

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

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

1 crisis responder and the court shall order such continuance in
2 proceedings under this chapter as may be necessary, but in no event
3 may this continuance be more than fourteen days.

4 **Sec. 26.** RCW 71.05.210 and 2017 3rd sp.s. c 14 s 16 are each
5 amended to read as follows:

6 (1) Each person involuntarily detained and accepted or admitted
7 at an evaluation and treatment facility, secure detoxification
8 facility, or approved substance use disorder treatment program:

9 (a) Shall, within twenty-four hours of his or her admission or
10 acceptance at the facility, not counting time periods prior to
11 medical clearance, be examined and evaluated by:

12 (i) One physician, physician assistant, or advanced registered
13 nurse practitioner; and

14 (ii) One mental health professional. If the person is detained
15 for substance use disorder evaluation and treatment, the person may
16 be examined by a chemical dependency professional instead of a mental
17 health professional; and

18 (b) Shall receive such treatment and care as his or her condition
19 requires including treatment on an outpatient basis for the period
20 that he or she is detained, except that, beginning twenty-four hours
21 prior to a trial or hearing pursuant to RCW 71.05.215, 71.05.240,
22 71.05.310, 71.05.320, 71.05.590, or 71.05.217, the individual may
23 refuse psychiatric medications, but may not refuse: (i) Any other
24 medication previously prescribed by a person licensed under Title 18
25 RCW; or (ii) emergency lifesaving treatment, and the individual shall
26 be informed at an appropriate time of his or her right of such
27 refusal. The person shall be detained up to (~~seventy-two hours~~)
28 five days, if, in the opinion of the professional person in charge of
29 the facility, or his or her professional designee, the person
30 presents a likelihood of serious harm, or is gravely disabled. A
31 person who has been detained for (~~seventy-two hours~~) five days
32 shall no later than the end of such period be released, unless
33 referred for further care on a voluntary basis, or detained pursuant
34 to court order for further treatment as provided in this chapter.

35 (2) If, after examination and evaluation, the mental health
36 professional or chemical dependency professional and licensed
37 physician, physician assistant, or psychiatric advanced registered
38 nurse practitioner determine that the initial needs of the person, if
39 detained to an evaluation and treatment facility, would be better

1 served by placement in a substance use disorder treatment program,
2 or, if detained to a secure detoxification facility or approved
3 substance use disorder treatment program, would be better served in
4 an evaluation and treatment facility then the person shall be
5 referred to the more appropriate placement.

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

16 **Sec. 27.** RCW 71.05.212 and 2018 c 291 s 13 are each amended to
17 read as follows:

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

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

25 (b) Historical behavior, including history of one or more violent
26 acts;

27 (c) Prior determinations of incompetency or insanity under
28 chapter 10.77 RCW; and

29 (d) Prior commitments under this chapter.

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

1 (3) Symptoms and behavior of the respondent which standing alone
2 would not justify civil commitment may support a finding of grave
3 disability or likelihood of serious harm, or a finding that the
4 person is in need of assisted outpatient behavioral health treatment,
5 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 from safe behavior,
9 or one or more 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 crisis responder or professional person
16 shall consider an offender's history of judicially required or
17 administratively ordered antipsychotic medication while in
18 confinement.

19 **Sec. 28.** RCW 71.05.214 and 2018 c 201 s 3007 are each amended to
20 read as follows:

21 The authority shall develop statewide protocols to be utilized by
22 professional persons and designated crisis responders in
23 administration of this chapter and chapters 10.77 and 71.34 RCW. The
24 protocols shall be updated at least every three years. The protocols
25 shall provide uniform development and application of criteria in
26 evaluation and commitment recommendations, of persons who have, or
27 are alleged to have, (~~mental disorders or substance use~~) behavioral
28 health disorders and are subject to this chapter.

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

37 **Sec. 29.** RCW 71.05.215 and 2018 c 201 s 3008 are each amended to
38 read as follows:

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

9 (2) The authority 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 physician assistant working with a supervising psychiatrist,
17 psychiatric advanced registered nurse practitioner, or physician or
18 physician assistant in consultation with a mental health professional
19 with prescriptive authority.

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

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

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

38 **Sec. 30.** RCW 71.05.217 and 2016 c 155 s 4 are each amended to
39 read as follows:

1 (1) Insofar as danger to the individual or others is not created,
2 each person involuntarily detained, treated in a less restrictive
3 alternative course of treatment, or committed for treatment and
4 evaluation pursuant to this chapter shall have, in addition to other
5 rights not specifically withheld by law, the following rights, a list
6 of which shall be prominently posted in all facilities, institutions,
7 and hospitals providing such services:

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

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

13 ~~((3))~~ (c) To have access to individual storage space for his or
14 her private use;

15 ~~((4))~~ (d) To have visitors at reasonable times;

16 ~~((5))~~ (e) To have reasonable access to a telephone, both to
17 make and receive confidential calls;

18 ~~((6))~~ (f) To have ready access to letter writing materials,
19 including stamps, and to send and receive uncensored correspondence
20 through the mails;

21 ~~((7))~~ (g) To have the right to individualized care and adequate
22 treatment;

23 (h) To discuss treatment plans and decisions with professional
24 persons;

25 (i) To not be denied access to treatment by spiritual means
26 through prayer in accordance with the tenets and practices of a
27 church or religious denomination in addition to the treatment
28 otherwise proposed;

29 (j) Not to consent to the administration of antipsychotic
30 medications beyond the hearing conducted pursuant to RCW 71.05.320(4)
31 or the performance of electroconvulsant therapy or surgery, except
32 emergency lifesaving surgery, unless ordered by a court of competent
33 jurisdiction pursuant to the following standards and procedures:

34 ~~((a))~~ (i) The administration of antipsychotic medication or
35 electroconvulsant therapy shall not be ordered unless the petitioning
36 party proves by clear, cogent, and convincing evidence that there
37 exists a compelling state interest that justifies overriding the
38 patient's lack of consent to the administration of antipsychotic
39 medications or electroconvulsant therapy, that the proposed treatment
40 is necessary and effective, and that medically acceptable alternative

1 forms of treatment are not available, have not been successful, or
2 are not likely to be effective.

3 ~~((b))~~ (ii) The court shall make specific findings of fact
4 concerning: ~~((i))~~ (A) The existence of one or more compelling state
5 interests; ~~((ii))~~ (B) the necessity and effectiveness of the
6 treatment; and ~~((iii))~~ (C) the person's desires regarding the
7 proposed treatment. If the patient is unable to make a rational and
8 informed decision about consenting to or refusing the proposed
9 treatment, the court shall make a substituted judgment for the
10 patient as if he or she were competent to make such a determination.

11 ~~((e))~~ (iii) The person shall be present at any hearing on a
12 request to administer antipsychotic medication or electroconvulsant
13 therapy filed pursuant to this subsection. The person has the right:
14 ~~((i))~~ (A) To be represented by an attorney; ~~((ii))~~ (B) to present
15 evidence; ~~((iii))~~ (C) to cross-examine witnesses; ~~((iv))~~ (D) to
16 have the rules of evidence enforced; ~~((v))~~ (E) to remain silent;
17 ~~((vi))~~ (F) to view and copy all petitions and reports in the court
18 file; and ~~((vii))~~ (G) to be given reasonable notice and an
19 opportunity to prepare for the hearing. The court may appoint a
20 psychiatrist, physician assistant working with a supervising
21 psychiatrist, psychiatric advanced registered nurse practitioner,
22 psychologist within their scope of practice, physician assistant, or
23 physician to examine and testify on behalf of such person. The court
24 shall appoint a psychiatrist, physician assistant working with a
25 supervising psychiatrist, psychiatric advanced registered nurse
26 practitioner, psychologist within their scope of practice, physician
27 assistant, or physician designated by such person or the person's
28 counsel to testify on behalf of the person in cases where an order
29 for electroconvulsant therapy is sought.

30 ~~((d))~~ (iv) An order for the administration of antipsychotic
31 medications entered following a hearing conducted pursuant to this
32 section shall be effective for the period of the current involuntary
33 treatment order, and any interim period during which the person is
34 awaiting trial or hearing on a new petition for involuntary treatment
35 or involuntary medication.

36 ~~((e))~~ (v) Any person detained pursuant to RCW 71.05.320(4), who
37 subsequently refuses antipsychotic medication, shall be entitled to
38 the procedures set forth in this subsection.

39 ~~((f))~~ (vi) Antipsychotic medication may be administered to a
40 nonconsenting person detained or committed pursuant to this chapter

1 without a court order pursuant to RCW 71.05.215(2) or under the
2 following circumstances:

3 ~~((+i+))~~ (A) A person presents an imminent likelihood of serious
4 harm;

5 ~~((+ii+))~~ (B) Medically acceptable alternatives to administration
6 of antipsychotic medications are not available, have not been
7 successful, or are not likely to be effective; and

8 ~~((+iii+))~~ (C) In the opinion of the physician, physician
9 assistant, or psychiatric advanced registered nurse practitioner with
10 responsibility for treatment of the person, or his or her designee,
11 the person's condition constitutes an emergency requiring the
12 treatment be instituted before a judicial hearing as authorized
13 pursuant to this section can be held.

14 If antipsychotic medications are administered over a person's
15 lack of consent pursuant to this subsection, a petition for an order
16 authorizing the administration of antipsychotic medications shall be
17 filed on the next judicial day. The hearing shall be held within two
18 judicial days. If deemed necessary by the physician, physician
19 assistant, or psychiatric advanced registered nurse practitioner with
20 responsibility for the treatment of the person, administration of
21 antipsychotic medications may continue until the hearing is held;

22 ~~((+8+))~~ (k) To dispose of property and sign contracts unless such
23 person has been adjudicated an incompetent in a court proceeding
24 directed to that particular issue;

25 ~~((+9+))~~ (l) Not to have psychosurgery performed on him or her
26 under any circumstances.

27 (2) Every person involuntarily detained or committed under the
28 provisions of this chapter is entitled to all the rights set forth in
29 this chapter and retains all rights not denied him or her under this
30 chapter except as limited by chapter 9.41 RCW.

31 (3) No person may be presumed incompetent as a consequence of
32 receiving evaluation or treatment for a behavioral health disorder.
33 Competency may not be determined or withdrawn except under the
34 provisions of chapter 10.77 or 11.88 RCW.

35 (4) Subject to RCW 71.05.745 and related regulations, persons
36 receiving evaluation or treatment under this chapter must be given a
37 reasonable choice of an available physician, physician assistant,
38 psychiatric advanced registered nurse practitioner, or other
39 professional person qualified to provide such services.

1 (5) Whenever any person is detained under this chapter, the
2 person must be advised that unless the person is released or
3 voluntarily admits himself or herself for treatment within seventy-
4 two hours of the initial detention, a judicial hearing must be held
5 in a superior court within seventy-two hours to determine whether
6 there is probable cause to detain the person for up to an additional
7 fourteen days based on an allegation that because of a behavioral
8 health disorder the person presents a likelihood of serious harm or
9 is gravely disabled, and that at the probable cause hearing the
10 person has the following rights:

11 (a) To communicate immediately with an attorney; to have an
12 attorney appointed if the person is indigent; and to be told the name
13 and address of the attorney that has been designated;

14 (b) To remain silent, and to know that any statement the person
15 makes may be used against him or her;

16 (c) To present evidence on the person's behalf;

17 (d) To cross-examine witnesses who testify against him or her;

18 (e) To be proceeded against by the rules of evidence;

19 (f) To have the court appoint a reasonably available independent
20 professional person to examine the person and testify in the hearing,
21 at public expense unless the person is able to bear the cost;

22 (g) To view and copy all petitions and reports in the court file;
23 and

24 (h) To refuse psychiatric medications, including antipsychotic
25 medication beginning twenty-four hours prior to the probable cause
26 hearing.

27 (6) The judicial hearing described in subsection (5) of this
28 section must be held according to the provisions of subsection (5) of
29 this section and rules promulgated by the supreme court.

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

38 (b) The waiver of a privilege under this section is limited to
39 records or testimony relevant to evaluation of the detained person
40 for purposes of a proceeding under this chapter. Upon motion by the

1 detained person or on its own motion, the court shall examine a
2 record or testimony sought by a petitioner to determine whether it is
3 within the scope of the waiver.

4 (c) The record maker may not be required to testify in order to
5 introduce medical or psychological records of the detained person so
6 long as the requirements of RCW 5.45.020 are met except that portions
7 of the record which contain opinions as to the detained person's
8 mental state must be deleted from such records unless the person
9 making such conclusions is available for cross-examination.

10 (8) Nothing contained in this chapter prohibits the patient from
11 petitioning by writ of habeas corpus for release.

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

16 (10) The rights set forth under this section apply equally to
17 ninety-day or one hundred eighty-day hearings under RCW 71.05.310.

18 **Sec. 31.** RCW 71.05.217 and 2016 c 155 s 4 are each amended to
19 read as follows:

20 (1) Insofar as danger to the individual or others is not created,
21 each person involuntarily detained, treated in a less restrictive
22 alternative course of treatment, or committed for treatment and
23 evaluation pursuant to this chapter shall have, in addition to other
24 rights not specifically withheld by law, the following rights, a list
25 of which shall be prominently posted in all facilities, institutions,
26 and hospitals providing such services:

27 ~~((1))~~ (a) To wear his or her own clothes and to keep and use
28 his or her own personal possessions, except when deprivation of same
29 is essential to protect the safety of the resident or other persons;

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

32 ~~((3))~~ (c) To have access to individual storage space for his or
33 her private use;

34 ~~((4))~~ (d) To have visitors at reasonable times;

35 ~~((5))~~ (e) To have reasonable access to a telephone, both to
36 make and receive confidential calls;

37 ~~((6))~~ (f) To have ready access to letter writing materials,
38 including stamps, and to send and receive uncensored correspondence
39 through the mails;

1 ~~((7))~~ (g) To have the right to individualized care and adequate
2 treatment;

3 (h) To discuss treatment plans and decisions with professional
4 persons;

5 (i) To not be denied access to treatment by spiritual means
6 through prayer in accordance with the tenets and practices of a
7 church or religious denomination in addition to the treatment
8 otherwise proposed;

9 (j) Not to consent to the administration of antipsychotic
10 medications beyond the hearing conducted pursuant to RCW 71.05.320(4)
11 or the performance of electroconvulsant therapy or surgery, except
12 emergency lifesaving surgery, unless ordered by a court of competent
13 jurisdiction pursuant to the following standards and procedures:

14 ~~((a))~~ (i) The administration of antipsychotic medication or
15 electroconvulsant therapy shall not be ordered unless the petitioning
16 party proves by clear, cogent, and convincing evidence that there
17 exists a compelling state interest that justifies overriding the
18 patient's lack of consent to the administration of antipsychotic
19 medications or electroconvulsant therapy, that the proposed treatment
20 is necessary and effective, and that medically acceptable alternative
21 forms of treatment are not available, have not been successful, or
22 are not likely to be effective.

23 ~~((b))~~ (ii) The court shall make specific findings of fact
24 concerning: ~~((i))~~ (A) The existence of one or more compelling state
25 interests; ~~((ii))~~ (B) the necessity and effectiveness of the
26 treatment; and ~~((iii))~~ (C) the person's desires regarding the
27 proposed treatment. If the patient is unable to make a rational and
28 informed decision about consenting to or refusing the proposed
29 treatment, the court shall make a substituted judgment for the
30 patient as if he or she were competent to make such a determination.

31 ~~((c))~~ (iii) The person shall be present at any hearing on a
32 request to administer antipsychotic medication or electroconvulsant
33 therapy filed pursuant to this subsection. The person has the right:
34 ~~((i))~~ (A) To be represented by an attorney; ~~((ii))~~ (B) to present
35 evidence; ~~((iii))~~ (C) to cross-examine witnesses; ~~((iv))~~ (D) to
36 have the rules of evidence enforced; ~~((v))~~ (E) to remain silent;
37 ~~((vi))~~ (F) to view and copy all petitions and reports in the court
38 file; and ~~((vii))~~ (G) to be given reasonable notice and an
39 opportunity to prepare for the hearing. The court may appoint a
40 psychiatrist, physician assistant working with a supervising

1 psychiatrist, psychiatric advanced registered nurse practitioner,
2 psychologist within their scope of practice, physician assistant, or
3 physician to examine and testify on behalf of such person. The court
4 shall appoint a psychiatrist, physician assistant working with a
5 supervising psychiatrist, psychiatric advanced registered nurse
6 practitioner, psychologist within their scope of practice, physician
7 assistant, or physician designated by such person or the person's
8 counsel to testify on behalf of the person in cases where an order
9 for electroconvulsant therapy is sought.

10 ~~((d))~~ (iv) An order for the administration of antipsychotic
11 medications entered following a hearing conducted pursuant to this
12 section shall be effective for the period of the current involuntary
13 treatment order, and any interim period during which the person is
14 awaiting trial or hearing on a new petition for involuntary treatment
15 or involuntary medication.

16 ~~((e))~~ (v) Any person detained pursuant to RCW 71.05.320(4), who
17 subsequently refuses antipsychotic medication, shall be entitled to
18 the procedures set forth in this subsection.

19 ~~((f))~~ (vi) Antipsychotic medication may be administered to a
20 nonconsenting person detained or committed pursuant to this chapter
21 without a court order pursuant to RCW 71.05.215(2) or under the
22 following circumstances:

23 ~~((i))~~ (A) A person presents an imminent likelihood of serious
24 harm;

25 ~~((ii))~~ (B) Medically acceptable alternatives to administration
26 of antipsychotic medications are not available, have not been
27 successful, or are not likely to be effective; and

28 ~~((iii))~~ (C) In the opinion of the physician, physician
29 assistant, or psychiatric advanced registered nurse practitioner with
30 responsibility for treatment of the person, or his or her designee,
31 the person's condition constitutes an emergency requiring the
32 treatment be instituted before a judicial hearing as authorized
33 pursuant to this section can be held.

34 If antipsychotic medications are administered over a person's
35 lack of consent pursuant to this subsection, a petition for an order
36 authorizing the administration of antipsychotic medications shall be
37 filed on the next judicial day. The hearing shall be held within two
38 judicial days. If deemed necessary by the physician, physician
39 assistant, or psychiatric advanced registered nurse practitioner with

1 responsibility for the treatment of the person, administration of
2 antipsychotic medications may continue until the hearing is held;

3 ~~((8))~~ (k) To dispose of property and sign contracts unless such
4 person has been adjudicated an incompetent in a court proceeding
5 directed to that particular issue;

6 ~~((9))~~ (l) Not to have psychosurgery performed on him or her
7 under any circumstances.

8 (2) Every person involuntarily detained or committed under the
9 provisions of this chapter is entitled to all the rights set forth in
10 this chapter and retains all rights not denied him or her under this
11 chapter except as limited by chapter 9.41 RCW.

12 (3) No person may be presumed incompetent as a consequence of
13 receiving evaluation or treatment for a behavioral health disorder.
14 Competency may not be determined or withdrawn except under the
15 provisions of chapter 10.77 or 11.88 RCW.

16 (4) Subject to RCW 71.05.745 and related regulations, persons
17 receiving evaluation or treatment under this chapter must be given a
18 reasonable choice of an available physician, physician assistant,
19 psychiatric advanced registered nurse practitioner, or other
20 professional person qualified to provide such services.

21 (5) Whenever any person is detained under this chapter, the
22 person must be advised that unless the person is released or
23 voluntarily admits himself or herself for treatment within five days
24 of the initial detention, a judicial hearing must be held in a
25 superior court within five days to determine whether there is
26 probable cause to detain the person for up to an additional fourteen
27 days based on an allegation that because of a behavioral health
28 disorder the person presents a likelihood of serious harm or is
29 gravely disabled, and that at the probable cause hearing the person
30 has the following rights:

31 (a) To communicate immediately with an attorney; to have an
32 attorney appointed if the person is indigent; and to be told the name
33 and address of the attorney that has been designated;

34 (b) To remain silent, and to know that any statement the person
35 makes may be used against him or her;

36 (c) To present evidence on the person's behalf;

37 (d) To cross-examine witnesses who testify against him or her;

38 (e) To be proceeded against by the rules of evidence;

1 (f) To have the court appoint a reasonably available independent
2 professional person to examine the person and testify in the hearing,
3 at public expense unless the person is able to bear the cost;

4 (g) To view and copy all petitions and reports in the court file;
5 and

6 (h) To refuse psychiatric medications, including antipsychotic
7 medication beginning twenty-four hours prior to the probable cause
8 hearing.

9 (6) The judicial hearing described in subsection (5) of this
10 section must be held according to the provisions of subsection (5) of
11 this section and rules promulgated by the supreme court.

12 (7)(a) Privileges between patients and physicians, physician
13 assistants, psychologists, or psychiatric advanced registered nurse
14 practitioners are deemed waived in proceedings under this chapter
15 relating to the administration of antipsychotic medications. As to
16 other proceedings under this chapter, the privileges are waived when
17 a court of competent jurisdiction in its discretion determines that
18 such waiver is necessary to protect either the detained person or the
19 public.

20 (b) The waiver of a privilege under this section is limited to
21 records or testimony relevant to evaluation of the detained person
22 for purposes of a proceeding under this chapter. Upon motion by the
23 detained person or on its own motion, the court shall examine a
24 record or testimony sought by a petitioner to determine whether it is
25 within the scope of the waiver.

26 (c) The record maker may not be required to testify in order to
27 introduce medical or psychological records of the detained person so
28 long as the requirements of RCW 5.45.020 are met except that portions
29 of the record which contain opinions as to the detained person's
30 mental state must be deleted from such records unless the person
31 making such conclusions is available for cross-examination.

32 (8) Nothing contained in this chapter prohibits the patient from
33 petitioning by writ of habeas corpus for release.

34 (9) Nothing in this section permits any person to knowingly
35 violate a no-contact order or a condition of an active judgment and
36 sentence or an active condition of supervision by the department of
37 corrections.

38 (10) The rights set forth under this section apply equally to
39 ninety-day or one hundred eighty-day hearings under RCW 71.05.310.

1 **Sec. 32.** RCW 71.05.230 and 2018 c 291 s 6 are each amended to
2 read as follows:

3 A person detained for seventy-two hour evaluation and treatment
4 may be committed for not more than fourteen additional days of
5 involuntary intensive treatment or ninety additional days of a less
6 restrictive alternative treatment. A petition may only be filed if
7 the following conditions are met:

8 (1) The professional staff of the facility providing evaluation
9 services has analyzed the person's condition and finds that the
10 condition is caused by (~~mental disorder or substance use~~) a
11 behavioral health disorder and results in: (a) A likelihood of
12 serious harm(~~(r) results in~~); (b) the person being gravely
13 disabled(~~(r)~~); or (~~results in~~) (c) the person being in need of
14 assisted outpatient behavioral health treatment(~~(r)~~); and are
15 prepared to testify those conditions are met; and

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

19 (3) The facility providing intensive treatment is certified to
20 provide such treatment by the department or under RCW 71.05.745; and

21 (4) (a) (i) The professional staff of the facility or the
22 designated crisis responder has filed a petition with the court for a
23 fourteen day involuntary detention or a ninety day less restrictive
24 alternative. The petition must be signed by:

25 (A) One physician, physician assistant, or psychiatric advanced
26 registered nurse practitioner; and

27 (B) One physician, physician assistant, psychiatric advanced
28 registered nurse practitioner, or mental health professional.

29 (ii) If the petition is for substance use disorder treatment, the
30 petition may be signed by a chemical dependency professional instead
31 of a mental health professional and by an advanced registered nurse
32 practitioner instead of a psychiatric advanced registered nurse
33 practitioner. The persons signing the petition must have examined the
34 person.

35 (b) If involuntary detention is sought the petition shall state
36 facts that support the finding that such person, as a result of a
37 (~~mental disorder or substance use~~) behavioral health disorder,
38 presents a likelihood of serious harm, or is gravely disabled and
39 that there are no less restrictive alternatives to detention in the
40 best interest of such person or others. The petition shall state

1 specifically that less restrictive alternative treatment was
2 considered and specify why treatment less restrictive than detention
3 is not appropriate. If an involuntary less restrictive alternative is
4 sought, the petition shall state facts that support the finding that
5 such person, as a result of a (~~mental disorder or as a result of a~~
6 ~~substance use~~) behavioral health disorder, presents a likelihood of
7 serious harm, is gravely disabled, or is in need of assisted
8 outpatient behavioral health treatment, and shall set forth any
9 recommendations for less restrictive alternative treatment services;
10 and

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

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

17 (7) The petition reflects that the person was informed of the
18 loss of firearm rights if involuntarily committed for mental health
19 treatment; and

20 (8) At the conclusion of the initial commitment period, the
21 professional staff of the agency or facility or the designated crisis
22 responder may petition for an additional period of either ninety days
23 of less restrictive alternative treatment or ninety days of
24 involuntary intensive treatment as provided in RCW 71.05.290; and

25 (9) If the hospital or facility designated to provide less
26 restrictive alternative treatment is other than the facility
27 providing involuntary treatment, the outpatient facility so
28 designated to provide less restrictive alternative treatment has
29 agreed to assume such responsibility.

30 **Sec. 33.** RCW 71.05.230 and 2018 c 291 s 6 are each amended to
31 read as follows:

32 A person detained for (~~seventy-two hour~~) five-day evaluation
33 and treatment may be committed for not more than fourteen additional
34 days of involuntary intensive treatment or ninety additional days of
35 a less restrictive alternative treatment. A petition may only be
36 filed if the following conditions are met:

37 (1) The professional staff of the facility providing evaluation
38 services has analyzed the person's condition and finds that the
39 condition is caused by (~~mental disorder or substance use~~) a

1 behavioral health disorder and results in: (a) A likelihood of
2 serious harm(~~(r) results in~~); (b) the person being gravely
3 disabled(~~(r)~~); or (~~results in~~) (c) the person being in need of
4 assisted outpatient behavioral health treatment(~~(r)~~); and are
5 prepared to testify those conditions are met; and

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

9 (3) The facility providing intensive treatment is certified to
10 provide such treatment by the department or under RCW 71.05.745; and

11 (4) (a) (i) The professional staff of the facility or the
12 designated crisis responder has filed a petition with the court for a
13 fourteen day involuntary detention or a ninety day less restrictive
14 alternative. The petition must be signed by:

15 (A) One physician, physician assistant, or psychiatric advanced
16 registered nurse practitioner; and

17 (B) One physician, physician assistant, psychiatric advanced
18 registered nurse practitioner, or mental health professional.

19 (ii) If the petition is for substance use disorder treatment, the
20 petition may be signed by a chemical dependency professional instead
21 of a mental health professional and by an advanced registered nurse
22 practitioner instead of a psychiatric advanced registered nurse
23 practitioner. The persons signing the petition must have examined the
24 person.

25 (b) If involuntary detention is sought the petition shall state
26 facts that support the finding that such person, as a result of a
27 (~~mental disorder or substance use~~) behavioral health disorder,
28 presents a likelihood of serious harm, or is gravely disabled and
29 that there are no less restrictive alternatives to detention in the
30 best interest of such person or others. The petition shall state
31 specifically that less restrictive alternative treatment was
32 considered and specify why treatment less restrictive than detention
33 is not appropriate. If an involuntary less restrictive alternative is
34 sought, the petition shall state facts that support the finding that
35 such person, as a result of a (~~mental disorder or as a result of a~~
36 ~~substance use~~) behavioral health disorder, presents a likelihood of
37 serious harm, is gravely disabled, or is in need of assisted
38 outpatient behavioral health treatment, and shall set forth any
39 recommendations for less restrictive alternative treatment services;
40 and

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

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

7 (7) The petition reflects that the person was informed of the
8 loss of firearm rights if involuntarily committed for mental health
9 treatment; and

10 (8) At the conclusion of the initial commitment period, the
11 professional staff of the agency or facility or the designated crisis
12 responder may petition for an additional period of either ninety days
13 of less restrictive alternative treatment or ninety days of
14 involuntary intensive treatment as provided in RCW 71.05.290; and

15 (9) If the hospital or facility designated to provide less
16 restrictive alternative treatment is other than the facility
17 providing involuntary treatment, the outpatient facility so
18 designated to provide less restrictive alternative treatment has
19 agreed to assume such responsibility.

20 **Sec. 34.** RCW 71.05.235 and 2016 sp.s. c 29 s 231 are each
21 amended to read as follows:

22 (1) If an individual is referred to a designated crisis responder
23 under RCW 10.77.088(1)(c)(i), the designated crisis responder shall
24 examine the individual within forty-eight hours. If the designated
25 crisis responder determines it is not appropriate to detain the
26 individual or petition for a ninety-day less restrictive alternative
27 under RCW 71.05.230(4), that decision shall be immediately presented
28 to the superior court for hearing. The court shall hold a hearing to
29 consider the decision of the designated crisis responder not later
30 than the next judicial day. At the hearing the superior court shall
31 review the determination of the designated crisis responder and
32 determine whether an order should be entered requiring the person to
33 be evaluated at an evaluation and treatment facility. No person
34 referred to an evaluation and treatment facility may be held at the
35 facility longer than seventy-two hours.

36 (2) If an individual is placed in an evaluation and treatment
37 facility under RCW 10.77.088(1)(c)(ii), a professional person shall
38 evaluate the individual for purposes of determining whether to file a
39 ninety-day inpatient or outpatient petition under this chapter.

1 Before expiration of the seventy-two hour evaluation period
2 authorized under RCW 10.77.088(1)(c)(ii), the professional person
3 shall file a petition or, if the recommendation of the professional
4 person is to release the individual, present his or her
5 recommendation to the superior court of the county in which the
6 criminal charge was dismissed. The superior court shall review the
7 recommendation not later than forty-eight hours, excluding Saturdays,
8 Sundays, and holidays, after the recommendation is presented. If the
9 court rejects the recommendation to unconditionally release the
10 individual, the court may order the individual detained at a
11 designated evaluation and treatment facility for not more than a
12 seventy-two hour evaluation and treatment period (~~and direct the~~
13 ~~individual to appear at a surety hearing before that court within~~
14 ~~seventy-two hours, or the court may release the individual but direct~~
15 ~~the individual to appear at a surety hearing set before that court~~
16 ~~within eleven days, at which time the prosecutor may file a petition~~
17 ~~under this chapter for ninety-day inpatient or outpatient treatment.~~
18 ~~If a petition is filed by the prosecutor, the court may order that~~
19 ~~the person named in the petition be detained at the evaluation and~~
20 ~~treatment facility that performed the evaluation under this~~
21 ~~subsection or order the respondent to be in outpatient treatment. If~~
22 ~~a petition is filed but the individual fails to appear in court for~~
23 ~~the surety hearing, the court shall order that a mental health~~
24 ~~professional or peace officer shall take such person or cause such~~
25 ~~person to be taken into custody and placed in an evaluation and~~
26 ~~treatment facility to be brought before the court the next judicial~~
27 ~~day after detention)). If the evaluation and treatment facility files
28 a ninety-day petition within the seventy-two-hour period, the clerk
29 shall set a hearing after the day of filing consistent with RCW
30 71.05.300. Upon the individual's first appearance in court after a
31 petition has been filed, proceedings under RCW 71.05.310 and
32 71.05.320 shall commence. For an individual subject to this
33 subsection, the (~~prosecutor or~~) professional person may directly
34 file a petition for ninety-day inpatient or outpatient treatment and
35 no petition for initial detention or fourteen-day detention is
36 required before such a petition may be filed.~~

37 (~~The court shall conduct the hearing on the petition filed under~~
38 ~~this subsection within five judicial days of the date the petition is~~
39 ~~filed. The court may continue the hearing upon the written request of~~
40 ~~the person named in the petition or the person's attorney, for good~~

1 ~~cause shown, which continuance shall not exceed five additional~~
2 ~~judicial days. If the person named in the petition requests a jury~~
3 ~~trial, the trial shall commence within ten judicial days of the date~~
4 ~~of the filing of the petition. The burden of proof shall be by clear,~~
5 ~~eogent, and convincing evidence and shall be upon the petitioner. The~~
6 ~~person shall be present at such proceeding, which shall in all~~
7 ~~respects accord with the constitutional guarantees of due process of~~
8 ~~law and the rules of evidence pursuant to RCW 71.05.360 (8) and (9).~~

9 ~~During the proceeding the person named in the petition shall~~
10 ~~continue to be detained and treated until released by order of the~~
11 ~~court. If no order has been made within thirty days after the filing~~
12 ~~of the petition, not including any extensions of time requested by~~
13 ~~the detained person or his or her attorney, the detained person shall~~
14 ~~be released.))~~

15 (3) If a designated crisis responder or the professional person
16 and prosecuting attorney for the county in which the criminal charge
17 was dismissed or attorney general, as appropriate, stipulate that the
18 individual does not present a likelihood of serious harm or is not
19 gravely disabled, the hearing under this section is not required and
20 the individual, if in custody, shall be released.

21 ~~((4) The individual shall have the rights specified in RCW~~
22 ~~71.05.360 (8) and (9).))~~

23 **Sec. 35.** RCW 71.05.235 and 2016 sp.s. c 29 s 231 are each
24 amended to read as follows:

25 (1) If an individual is referred to a designated crisis responder
26 under RCW 10.77.088(1)(c)(i), the designated crisis responder shall
27 examine the individual within forty-eight hours. If the designated
28 crisis responder determines it is not appropriate to detain the
29 individual or petition for a ninety-day less restrictive alternative
30 under RCW 71.05.230(4), that decision shall be immediately presented
31 to the superior court for hearing. The court shall hold a hearing to
32 consider the decision of the designated crisis responder not later
33 than the next judicial day. At the hearing the superior court shall
34 review the determination of the designated crisis responder and
35 determine whether an order should be entered requiring the person to
36 be evaluated at an evaluation and treatment facility. No person
37 referred to an evaluation and treatment facility may be held at the
38 facility longer than ~~((seventy-two hours))~~ five days.

1 (2) If an individual is placed in an evaluation and treatment
2 facility under RCW 10.77.088(1)(c)(ii), a professional person shall
3 evaluate the individual for purposes of determining whether to file a
4 ninety-day inpatient or outpatient petition under this chapter.
5 Before expiration of the (~~seventy-two hour~~) five-day evaluation
6 period authorized under RCW 10.77.088(1)(c)(ii), the professional
7 person shall file a petition or, if the recommendation of the
8 professional person is to release the individual, present his or her
9 recommendation to the superior court of the county in which the
10 criminal charge was dismissed. The superior court shall review the
11 recommendation not later than forty-eight hours, excluding Saturdays,
12 Sundays, and holidays, after the recommendation is presented. If the
13 court rejects the recommendation to unconditionally release the
14 individual, the court may order the individual detained at a
15 designated evaluation and treatment facility for not more than a
16 (~~seventy-two hour~~) five-day evaluation and treatment period (~~and~~
17 ~~direct the individual to appear at a surety hearing before that court~~
18 ~~within seventy-two hours, or the court may release the individual but~~
19 ~~direct the individual to appear at a surety hearing set before that~~
20 ~~court within eleven days, at which time the prosecutor may file a~~
21 ~~petition under this chapter for ninety-day inpatient or outpatient~~
22 ~~treatment. If a petition is filed by the prosecutor, the court may~~
23 ~~order that the person named in the petition be detained at the~~
24 ~~evaluation and treatment facility that performed the evaluation under~~
25 ~~this subsection or order the respondent to be in outpatient~~
26 ~~treatment. If a petition is filed but the individual fails to appear~~
27 ~~in court for the surety hearing, the court shall order that a mental~~
28 ~~health professional or peace officer shall take such person or cause~~
29 ~~such person to be taken into custody and placed in an evaluation and~~
30 ~~treatment facility to be brought before the court the next judicial~~
31 ~~day after detention)). If the evaluation and treatment facility files
32 a ninety-day petition within the five-day period, the clerk shall set
33 a hearing after the day of filing consistent with RCW 71.05.300. Upon
34 the individual's first appearance in court after a petition has been
35 filed, proceedings under RCW 71.05.310 and 71.05.320 shall commence.
36 For an individual subject to this subsection, the (~~prosecutor or~~)
37 professional person may directly file a petition for ninety-day
38 inpatient or outpatient treatment and no petition for initial
39 detention or fourteen-day detention is required before such a
40 petition may be filed.~~

1 (~~The court shall conduct the hearing on the petition filed under~~
2 ~~this subsection within five judicial days of the date the petition is~~
3 ~~filed. The court may continue the hearing upon the written request of~~
4 ~~the person named in the petition or the person's attorney, for good~~
5 ~~cause shown, which continuance shall not exceed five additional~~
6 ~~judicial days. If the person named in the petition requests a jury~~
7 ~~trial, the trial shall commence within ten judicial days of the date~~
8 ~~of the filing of the petition. The burden of proof shall be by clear,~~
9 ~~eogent, and convincing evidence and shall be upon the petitioner. The~~
10 ~~person shall be present at such proceeding, which shall in all~~
11 ~~respects accord with the constitutional guarantees of due process of~~
12 ~~law and the rules of evidence pursuant to RCW 71.05.360 (8) and (9).~~)

13 ~~During the proceeding the person named in the petition shall~~
14 ~~continue to be detained and treated until released by order of the~~
15 ~~court. If no order has been made within thirty days after the filing~~
16 ~~of the petition, not including any extensions of time requested by~~
17 ~~the detained person or his or her attorney, the detained person shall~~
18 ~~be released.))~~

19 (3) If a designated crisis responder or the professional person
20 and prosecuting attorney for the county in which the criminal charge
21 was dismissed or attorney general, as appropriate, stipulate that the
22 individual does not present a likelihood of serious harm or is not
23 gravely disabled, the hearing under this section is not required and
24 the individual, if in custody, shall be released.

25 (~~(4) The individual shall have the rights specified in RCW~~
26 ~~71.05.360 (8) and (9).))~~

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

29 (1) In any proceeding for involuntary commitment under this
30 chapter, the court may continue or postpone such proceeding for a
31 reasonable time on motion of the respondent for good cause, or on
32 motion of the prosecuting attorney or the attorney general if:

33 (a) The respondent expressly consents to a continuance or delay
34 and there is a showing of good cause; or

35 (b) Such continuance is required in the proper administration of
36 justice and the respondent will not be substantially prejudiced in
37 the presentation of the respondent's case.

38 (2) The court may on its own motion continue the case when
39 required in due administration of justice and when the respondent

1 will not be substantially prejudiced in the presentation of the
2 respondent's case.

3 (3) The court shall state in any order of continuance or
4 postponement the grounds for the continuance or postponement and
5 whether detention will be extended.

6 **Sec. 37.** RCW 71.05.240 and 2018 c 291 s 7 and 2018 c 201 s 3009
7 are each reenacted and amended to read as follows:

8 (1) If a petition is filed for fourteen-day involuntary treatment
9 or ninety days of less restrictive alternative treatment, the court
10 shall hold a probable cause hearing within seventy-two hours of the
11 initial detention of such person as determined in RCW 71.05.180, or
12 at a time determined under RCW 71.05.148. (~~If requested by the~~
13 ~~person or his or her attorney, the hearing may be postponed for a~~
14 ~~period not to exceed forty-eight hours. The hearing may also be~~
15 ~~continued subject to the conditions set forth in RCW 71.05.210 or~~
16 ~~subject to the petitioner's showing of good cause for a period not to~~
17 ~~exceed twenty-four hours.))~~

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

25 (3) If the person or his or her attorney alleges, prior to the
26 commencement of the hearing, that the person has in good faith
27 volunteered for treatment, the petitioner must show, by preponderance
28 of the evidence, that the person has not in good faith volunteered
29 for appropriate treatment. In order to qualify as a good faith
30 volunteer, the person must abide by procedures and a treatment plan
31 as prescribed by a treatment facility and professional staff.

32 (4)(a) Subject to (b) of this subsection, at the conclusion of
33 the probable cause hearing, if the court finds by a preponderance of
34 the evidence that such person, as the result of a (~~mental disorder~~
35 ~~or substance use~~) behavioral health disorder, presents a likelihood
36 of serious harm, or is gravely disabled, and, after considering less
37 restrictive alternatives to involuntary detention and treatment,
38 finds that no such alternatives are in the best interests of such
39 person or others, the court shall order that such person be detained

1 for involuntary treatment not to exceed fourteen days in a facility
2 licensed or certified to provide treatment by the department or under
3 RCW 71.05.745.

4 (~~(b) ((Commitment for up to fourteen days based on a substance use~~
5 ~~disorder must be to either a secure detoxification facility or an~~
6 ~~approved substance use disorder treatment program.))~~ A court may only
7 ~~((enter a commitment)) order ((based on a substance use disorder if~~
8 ~~there is an available))~~ commitment to a secure detoxification
9 facility or approved substance use disorder treatment program if
10 there is an available facility with adequate space for the person.

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

19 (d) If the court finds by a preponderance of the evidence that
20 such person, as the result of a ~~((mental disorder or substance use))~~
21 behavioral health disorder, is in need of assisted outpatient
22 behavioral health treatment, and that the person does not present a
23 likelihood of serious harm ~~((or grave disability))~~ and is not gravely
24 disabled, the court shall order an appropriate less restrictive
25 alternative course of treatment ~~((not to exceed))~~ for up to ninety
26 days.

27 ~~((4))~~ (5) An order for less restrictive alternative treatment
28 must name the ~~((mental))~~ behavioral health service provider
29 responsible for identifying the services the person will receive in
30 accordance with RCW 71.05.585, and must include a requirement that
31 the person cooperate with the ~~((services planned by))~~ treatment
32 recommendations of the ~~((mental))~~ behavioral health service provider.

33 ~~((5))~~ (6) The court shall ~~((specifically state to such person~~
34 ~~and give such person notice))~~ notify the person orally and in writing
35 that if involuntary treatment is sought beyond the fourteen-day
36 ~~((period))~~ inpatient or ~~((beyond the))~~ ninety-day~~((s of))~~ less
37 restrictive treatment ~~((is to be sought))~~ period, ~~((such))~~ the person
38 ~~((will have))~~ has the right to a full hearing or jury trial ~~((as~~
39 ~~required by))~~ under RCW 71.05.310. If the commitment is for mental
40 health treatment, the court shall also ~~((state to))~~ notify the person

1 ((and provide written notice)) orally and in writing that the person
2 is barred from the possession of firearms and that the prohibition
3 remains in effect until a court restores his or her right to possess
4 a firearm under RCW 9.41.047.

5 **Sec. 38.** RCW 71.05.240 and 2018 c 291 s 7 and 2018 c 201 s 3009
6 are each reenacted and amended to read as follows:

7 (1) If a petition is filed for fourteen-day involuntary treatment
8 or ninety days of less restrictive alternative treatment, the court
9 shall hold a probable cause hearing within ~~((seventy-two hours))~~ five
10 days of the initial detention of such person as determined in RCW
11 71.05.180, or at a time determined under RCW 71.05.148. ~~((If~~
12 ~~requested by the person or his or her attorney, the hearing may be~~
13 ~~postponed for a period not to exceed forty-eight hours. The hearing~~
14 ~~may also be continued subject to the conditions set forth in RCW~~
15 ~~71.05.210 or subject to the petitioner's showing of good cause for a~~
16 ~~period not to exceed twenty-four hours.))~~

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

24 (3) If the person or his or her attorney alleges, prior to the
25 commencement of the hearing, that the person has in good faith
26 volunteered for treatment, the petitioner must show, by preponderance
27 of the evidence, that the person has not in good faith volunteered
28 for appropriate treatment. In order to qualify as a good faith
29 volunteer, the person must abide by procedures and a treatment plan
30 as prescribed by a treatment facility and professional staff.

31 (4)(a) Subject to (b) of this subsection, at the conclusion of
32 the probable cause hearing, if the court finds by a preponderance of
33 the evidence that such person, as the result of a ~~((mental disorder~~
34 ~~or substance use))~~ behavioral health disorder, presents a likelihood
35 of serious harm, or is gravely disabled, and, after considering less
36 restrictive alternatives to involuntary detention and treatment,
37 finds that no such alternatives are in the best interests of such
38 person or others, the court shall order that such person be detained
39 for involuntary treatment not to exceed fourteen days in a facility

1 licensed or certified to provide treatment by the department or under
2 RCW 71.05.745.

3 ~~((Commitment for up to fourteen days based on a substance use~~
4 ~~disorder must be to either a secure detoxification facility or an~~
5 ~~approved substance use disorder treatment program.)) A court may only~~
6 ~~((enter a commitment)) order ((based on a substance use disorder if~~
7 ~~there is an available)) commitment to a secure detoxification~~
8 facility or approved substance use disorder treatment program if
9 there is an available facility with adequate space for the person.

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

18 (d) If the court finds by a preponderance of the evidence that
19 such person, as the result of a ~~((mental disorder or substance use))~~
20 behavioral health disorder, is in need of assisted outpatient
21 behavioral health treatment, and that the person does not present a
22 likelihood of serious harm ~~((or grave disability))~~ and is not gravely
23 disabled, the court shall order an appropriate less restrictive
24 alternative course of treatment ~~((not to exceed))~~ for up to ninety
25 days.

26 ~~((4))~~ (5) An order for less restrictive alternative treatment
27 must name the ~~((mental))~~ behavioral health service provider
28 responsible for identifying the services the person will receive in
29 accordance with RCW 71.05.585, and must include a requirement that
30 the person cooperate with the ~~((services planned by))~~ treatment
31 recommendations of the ~~((mental))~~ behavioral health service provider.

32 ~~((5))~~ (6) The court shall ~~((specifically state to such person~~
33 ~~and give such person notice))~~ notify the person orally and in writing
34 that if involuntary treatment is sought beyond the fourteen-day
35 ~~((period))~~ inpatient or ~~((beyond the))~~ ninety-day~~((s of))~~ less
36 restrictive treatment ~~((is to be sought))~~ period, ~~((such))~~ the person
37 ~~((will have))~~ has the right to a full hearing or jury trial ~~((as~~
38 ~~required by))~~ under RCW 71.05.310. If the commitment is for mental
39 health treatment, the court shall also ~~((state to))~~ notify the person
40 ~~((and provide written notice))~~ orally and in writing that the person

1 is barred from the possession of firearms and that the prohibition
2 remains in effect until a court restores his or her right to possess
3 a firearm under RCW 9.41.047.

4 **Sec. 39.** RCW 71.05.240 and 2018 c 291 s 8 and 2018 c 201 s 3010
5 are each reenacted and amended to read as follows:

6 (1) If a petition is filed for fourteen-day involuntary treatment
7 or ninety days of less restrictive alternative treatment, the court
8 shall hold a probable cause hearing within (~~seventy-two hours~~) five
9 days of the initial detention of such person as determined in RCW
10 71.05.180, or at a time determined under RCW 71.05.148. (~~If~~
11 ~~requested by the person or his or her attorney, the hearing may be~~
12 ~~postponed for a period not to exceed forty-eight hours. The hearing~~
13 ~~may also be continued subject to the conditions set forth in RCW~~
14 ~~71.05.210 or subject to the petitioner's showing of good cause for a~~
15 ~~period not to exceed twenty-four hours.))~~

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

23 (3) If the person or his or her attorney alleges, prior to the
24 commencement of the hearing, that the person has in good faith
25 volunteered for treatment, the petitioner must show, by preponderance
26 of the evidence, that the person has not in good faith volunteered
27 for appropriate treatment. In order to qualify as a good faith
28 volunteer, the person must abide by procedures and a treatment plan
29 as prescribed by a treatment facility and professional staff.

30 (4)(a) (~~Subject to (b) of this subsection,~~) At the conclusion
31 of the probable cause hearing, if the court finds by a preponderance
32 of the evidence that such person, as the result of a (~~mental~~
33 ~~disorder or substance use~~) behavioral health disorder, presents a
34 likelihood of serious harm, or is gravely disabled, and, after
35 considering less restrictive alternatives to involuntary detention
36 and treatment, finds that no such alternatives are in the best
37 interests of such person or others, the court shall order that such
38 person be detained for involuntary treatment not to exceed fourteen

1 days in a facility licensed or certified to provide treatment by the
2 department or under RCW 71.05.745.

3 ~~(b) ((Commitment for up to fourteen days based on a substance use
4 disorder must be to either a secure detoxification facility or an
5 approved substance use disorder treatment program.~~

6 ~~(e))~~ At the conclusion of the probable cause hearing, if the
7 court finds by a preponderance of the evidence that such person, as
8 the result of a ~~((mental disorder or substance use))~~ behavioral
9 health disorder, presents a likelihood of serious harm~~((7))~~ or is
10 gravely disabled, but that treatment in a less restrictive setting
11 than detention is in the best interest of such person or others, the
12 court shall order an appropriate less restrictive alternative course
13 of treatment for ~~((not to exceed))~~ up to ninety days.

14 ~~((d))~~ (c) If the court finds by a preponderance of the evidence
15 that such person, as the result of a ~~((mental disorder or substance
16 use))~~ behavioral health disorder, is in need of assisted outpatient
17 behavioral health treatment, and that the person does not present a
18 likelihood of serious harm ~~((or grave disability))~~ and is not gravely
19 disabled, the court shall order an appropriate less restrictive
20 alternative course of treatment ~~((not to exceed))~~ for up to ninety
21 days.

22 ~~((4))~~ (5) An order for less restrictive alternative treatment
23 must name the ~~((mental))~~ behavioral health service provider
24 responsible for identifying the services the person will receive in
25 accordance with RCW 71.05.585, and must include a requirement that
26 the person cooperate with the ~~((services planned by))~~ treatment
27 recommendations of the ~~((mental))~~ behavioral health service provider.

28 ~~((5))~~ (6) The court shall ~~((specifically state to such person
29 and give such person notice))~~ notify the person orally and in writing
30 that if involuntary treatment is sought beyond the fourteen-day
31 ~~((period))~~ inpatient or ~~((beyond the))~~ ninety-day~~((s of))~~ less
32 restrictive treatment ~~((is to be sought))~~ period, such person ~~((will
33 have))~~ has the right to a full hearing or jury trial ~~((as required
34 by))~~ under RCW 71.05.310. If the commitment is for mental health
35 treatment, the court shall also ~~((state to))~~ notify the person ~~((and
36 provide written notice))~~ orally and in writing that the person is
37 barred from the possession of firearms and that the prohibition
38 remains in effect until a court restores his or her right to possess
39 a firearm under RCW 9.41.047.

1 **Sec. 40.** RCW 71.05.280 and 2018 c 291 s 15 are each amended to
2 read as follows:

3 At the expiration of the fourteen-day period of intensive
4 treatment, a person may be committed for further treatment pursuant
5 to RCW 71.05.320 if:

6 (1) Such person after having been taken into custody for
7 evaluation and treatment has threatened, attempted, or inflicted: (a)
8 Physical harm upon the person of another or himself or herself, or
9 substantial damage upon the property of another, and (b) as a result
10 of (~~mental disorder or substance use~~) a behavioral health disorder
11 presents a likelihood of serious harm; or

12 (2) Such person was taken into custody as a result of conduct in
13 which he or she attempted or inflicted physical harm upon the person
14 of another or himself or herself, or substantial damage upon the
15 property of others, and continues to present, as a result of (~~mental
16 disorder or substance use~~) a behavioral health disorder, a
17 likelihood of serious harm; or

18 (3) Such person has been determined to be incompetent and
19 criminal charges have been dismissed pursuant to RCW 10.77.086(4),
20 and has committed acts constituting a felony, and as a result of a
21 (~~mental~~) behavioral health disorder, presents a substantial
22 likelihood of repeating similar acts.

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

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

31 (4) Such person is gravely disabled; or

32 (5) Such person is in need of assisted outpatient behavioral
33 health treatment.

34 **Sec. 41.** RCW 71.05.290 and 2017 3rd sp.s. c 14 s 18 are each
35 amended to read as follows:

36 (1) At any time during a person's fourteen day intensive
37 treatment period, the professional person in charge of a treatment
38 facility or his or her professional designee or the designated crisis
39 responder may petition the superior court for an order requiring such

1 person to undergo an additional period of treatment. Such petition
2 must be based on one or more of the grounds set forth in RCW
3 71.05.280.

4 (2) (a) (i) The petition shall summarize the facts which support
5 the need for further commitment and shall be supported by affidavits
6 based on an examination of the patient and signed by:

7 (A) One physician, physician assistant, or psychiatric advanced
8 registered nurse practitioner; and

9 (B) One physician, physician assistant, psychiatric advanced
10 registered nurse practitioner, or mental health professional.

11 (ii) If the petition is for substance use disorder treatment, the
12 petition may be signed by a chemical dependency professional instead
13 of a mental health professional and by an advanced registered nurse
14 practitioner instead of a psychiatric advanced registered nurse
15 practitioner.

16 (b) The affidavits shall describe in detail the behavior of the
17 detained person which supports the petition and shall explain what,
18 if any, less restrictive treatments which are alternatives to
19 detention are available to such person, and shall state the
20 willingness of the affiant to testify to such facts in subsequent
21 judicial proceedings under this chapter. If less restrictive
22 alternative treatment is sought, the petition shall set forth any
23 recommendations for less restrictive alternative treatment services.

24 (3) If a person has been determined to be incompetent pursuant to
25 RCW 10.77.086(4), then the professional person in charge of the
26 treatment facility or his or her professional designee or the
27 designated crisis responder may directly file a petition for one
28 hundred eighty-day treatment under RCW 71.05.280(3), or for ninety-
29 day treatment under RCW 71.05.280 (1), (2), (4), or (5). No petition
30 for initial detention or fourteen day detention is required before
31 such a petition may be filed.

32 **Sec. 42.** RCW 71.05.300 and 2017 3rd sp.s. c 14 s 19 are each
33 amended to read as follows:

34 (1) The petition for ninety day treatment shall be filed with the
35 clerk of the superior court at least three days before expiration of
36 the fourteen-day period of intensive treatment. (~~At the time of~~
37 ~~filing such petition,~~) The clerk shall set a (~~time for the person~~
38 ~~to come before the court on the next judicial day after the day of~~
39 ~~filing unless such appearance is waived by the person's attorney, and~~

1 ~~the clerk shall~~) trial setting date as provided in RCW 71.05.310 on
2 the next judicial day after the date of filing the petition and
3 notify the designated crisis responder. The designated crisis
4 responder shall immediately notify the person detained, his or her
5 attorney, if any, and his or her guardian or conservator, if any, the
6 prosecuting attorney, and the behavioral health organization
7 administrator, and provide a copy of the petition to such persons as
8 soon as possible. The behavioral health organization administrator or
9 designee may review the petition and may appear and testify at the
10 full hearing on the petition.

11 (2) (~~At the time set for appearance~~) The attorney for the
12 detained person (~~(shall be brought before the court, unless such~~
13 ~~appearance has been waived and the court)~~) shall advise him or her of
14 his or her right to be represented by an attorney, his or her right
15 to a jury trial, and, if the petition is for commitment for mental
16 health treatment, his or her loss of firearm rights if involuntarily
17 committed. If the detained person is not represented by an attorney,
18 or is indigent or is unwilling to retain an attorney, the court shall
19 immediately appoint an attorney to represent him or her. The court
20 shall, if requested, appoint a reasonably available licensed
21 physician, physician assistant, psychiatric advanced registered nurse
22 practitioner, psychologist, psychiatrist, or other professional
23 person(~~(7)~~) designated by the detained person to examine and testify
24 on behalf of the detained person.

25 (3) The court may, if requested, also appoint a professional
26 person as defined in RCW 71.05.020 to seek less restrictive
27 alternative courses of treatment and to testify on behalf of the
28 detained person. In the case of a person with a developmental
29 disability who has been determined to be incompetent pursuant to RCW
30 10.77.086(4), (~~then~~) the appointed professional person under this
31 section shall be a developmental disabilities professional.

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

34 **Sec. 43.** RCW 71.05.310 and 2012 c 256 s 8 are each amended to
35 read as follows:

36 The court shall (~~conduct~~) set a hearing on the petition for
37 ninety-day or one hundred eighty-day treatment within five judicial
38 days of the (~~first court appearance after the probable cause~~
39 ~~hearing~~) trial setting hearing, or within ten judicial days for a

1 petition filed under RCW 71.05.280(3). The court may continue the
2 hearing (~~((for good cause upon the written request of the person named~~
3 ~~in the petition or the person's attorney. The court may continue for~~
4 ~~good cause the hearing on a petition filed under RCW 71.05.280(3)~~
5 ~~upon written request by the person named in the petition, the~~
6 ~~person's attorney, or the petitioner)) in accordance with section 36~~
7 ~~of this act.~~ If the person named in the petition requests a jury
8 trial, the trial (~~((shall commence))~~) must be set within ten judicial
9 days of the (~~((first court appearance after the probable cause~~
10 ~~hearing))~~) next judicial day after the date of filing the petition.
11 The burden of proof shall be by clear, cogent, and convincing
12 evidence and shall be upon the petitioner. The person (~~((shall))~~) has
13 the right to be present at such proceeding, which shall in all
14 respects accord with the constitutional guarantees of due process of
15 law and the rules of evidence (~~((pursuant to RCW 71.05.360 (8) and~~
16 ~~(9))~~) under RCW 71.05.217.

17 During the proceeding, the person named in the petition shall
18 continue to be treated until released by order of the superior court
19 or discharged by the medical provider. If (~~((no order has been made))~~)
20 the hearing has not commenced within thirty days after the filing of
21 the petition, not including extensions of time (~~((requested by the~~
22 ~~detained person or his or her attorney, or the petitioner in the case~~
23 ~~of a petition filed under RCW 71.05.280(3))~~) ordered under section 36
24 of this act, the detained person shall be released.

25 **Sec. 44.** RCW 71.05.320 and 2018 c 201 s 3012 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 of
32 social and health services or to a facility certified for ninety day
33 treatment by the department for a further period of intensive
34 treatment not to exceed ninety days from the date of judgment.

35 (b) If the order for inpatient treatment is based on a substance
36 use disorder, (~~((treatment must take place at an approved substance~~
37 ~~use disorder treatment program.))~~) the court may only enter an order
38 for commitment (~~((based on a substance use disorder))~~) if there is an

1 available (~~approved substance use disorder~~) treatment program with
2 adequate space for the person.

3 (c) If the grounds set forth in RCW 71.05.280(3) are the basis of
4 commitment, then the period of treatment may be up to but not exceed
5 one hundred eighty days from the date of judgment to the custody of
6 the department of social and health services or to a facility
7 certified for one hundred eighty-day treatment by the department or
8 under RCW 71.05.745.

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

27 (3) An order for less restrictive alternative treatment entered
28 under subsection (2) of this section must name the (~~mental~~)
29 behavioral health service provider responsible for identifying the
30 services the person will receive in accordance with RCW 71.05.585,
31 and must include a requirement that the person cooperate with the
32 services planned by the (~~mental~~) behavioral health service
33 provider.

34 (4) The person shall be released from involuntary treatment at
35 the expiration of the period of commitment imposed under subsection
36 (1) or (2) of this section unless the superintendent or professional
37 person in charge of the facility in which he or she is confined, or
38 in the event of a less restrictive alternative, the designated crisis
39 responder, files a new petition for involuntary treatment on the
40 grounds that the committed person:

1 (a) During the current period of court ordered treatment: (i) Has
2 threatened, attempted, or inflicted physical harm upon the person of
3 another, or substantial damage upon the property of another, and (ii)
4 as a result of a (~~mental disorder, substance use~~) behavioral health
5 disorder(~~(r)~~) or developmental disability presents a likelihood of
6 serious harm; or

7 (b) Was taken into custody as a result of conduct in which he or
8 she attempted or inflicted serious physical harm upon the person of
9 another, and continues to present, as a result of (~~mental disorder,~~
10 ~~substance use~~) a behavioral health disorder(~~(r)~~) or developmental
11 disability, a likelihood of serious harm; or

12 (c) (i) Is in custody pursuant to RCW 71.05.280(3) and as a result
13 of (~~mental~~) a behavioral health disorder or developmental
14 disability continues to present a substantial likelihood of repeating
15 acts similar to the charged criminal behavior, when considering the
16 person's life history, progress in treatment, and the public safety.

17 (ii) In cases under this subsection where the court has made an
18 affirmative special finding under RCW 71.05.280(3)(b), the commitment
19 shall continue for up to an additional one hundred eighty-day period
20 whenever the petition presents prima facie evidence that the person
21 continues to suffer from a (~~mental~~) behavioral health disorder or
22 developmental disability that results in a substantial likelihood of
23 committing acts similar to the charged criminal behavior, unless the
24 person presents proof through an admissible expert opinion that the
25 person's condition has so changed such that the (~~mental~~) behavioral
26 health disorder or developmental disability no longer presents a
27 substantial likelihood of the person committing acts similar to the
28 charged criminal behavior. The initial or additional commitment
29 period may include transfer to a specialized program of intensive
30 support and treatment, which may be initiated prior to or after
31 discharge from the state hospital; or

32 (d) Continues to be gravely disabled; or

33 (e) Is in need of assisted outpatient (~~mental~~) behavioral
34 health treatment.

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

38 If less restrictive alternative treatment is sought, the petition
39 shall set forth any recommendations for less restrictive alternative
40 treatment services.

1 (5) A new petition for involuntary treatment filed under
2 subsection (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) (a) The hearing shall be held as provided in RCW 71.05.310,
8 and 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, except as provided
13 in subsection (7) of this section. If the court's order is based
14 solely on the grounds identified in subsection (4) (e) of this
15 section, the court may enter an order for less restrictive
16 alternative treatment not to exceed one hundred eighty days from the
17 date of judgment, and may not enter an order for inpatient treatment.
18 An order for less restrictive alternative treatment must name the
19 (~~mental~~) behavioral health service provider responsible for
20 identifying the services the person will receive in accordance with
21 RCW 71.05.585, and must include a requirement that the person
22 cooperate with the services planned by the (~~mental~~) behavioral
23 health service provider.

24 (b) At the end of the one hundred eighty-day period of
25 commitment, or one-year period of commitment if subsection (7) of
26 this section applies, the committed person shall be released unless a
27 petition for an additional one hundred eighty-day period of continued
28 treatment is filed and heard in the same manner as provided in this
29 section. Successive one hundred eighty-day commitments are
30 permissible on the same grounds and pursuant to the same procedures
31 as the original one hundred eighty-day commitment.

32 (7) An order for less restrictive treatment entered under
33 subsection (6) of this section may be for up to one year when the
34 person's previous commitment term was for intensive inpatient
35 treatment in a state hospital.

36 (8) No person committed as provided in this section may be
37 detained unless a valid order of commitment is in effect. No order of
38 commitment can exceed one hundred eighty days in length except as
39 provided in subsection (7) of this section.

1 **Sec. 45.** RCW 71.05.320 and 2018 c 201 s 3013 are each amended to
2 read as follows:

3 (1) If the court or jury finds that grounds set forth in RCW
4 71.05.280 have been proven and that the best interests of the person
5 or others will not be served by a less restrictive treatment which is
6 an alternative to detention, the court shall remand him or her to the
7 custody of the department of social and health services or to a
8 facility certified for ninety day treatment by the department for a
9 further period of intensive treatment not to exceed ninety days from
10 the date of judgment.

11 If the (~~order for inpatient treatment is based on a substance~~
12 ~~use disorder, treatment must take place at an approved substance use~~
13 ~~disorder treatment program. If the~~) grounds set forth in RCW
14 71.05.280(3) are the basis of commitment, then the period of
15 treatment may be up to but not exceed one hundred eighty days from
16 the date of judgment to the custody of the department of social and
17 health services or to a facility certified for one hundred eighty-day
18 treatment by the department or under RCW 71.05.745.

19 (2) If the court or jury finds that grounds set forth in RCW
20 71.05.280 have been proven, but finds that treatment less restrictive
21 than detention will be in the best interest of the person or others,
22 then the court shall remand him or her to the custody of the
23 department of social and health services or to a facility certified
24 for ninety day treatment by the department or to a less restrictive
25 alternative for a further period of less restrictive treatment not to
26 exceed ninety days from the date of judgment. (~~If the order for less~~
27 ~~restrictive treatment is based on a substance use disorder, treatment~~
28 ~~must be provided by an approved substance use disorder treatment~~
29 ~~program.~~) If the grounds set forth in RCW 71.05.280(3) are the basis
30 of commitment, then the period of treatment may be up to but not
31 exceed one hundred eighty days from the date of judgment. If the
32 court or jury finds that the grounds set forth in RCW 71.05.280(5)
33 have been proven, and provide the only basis for commitment, the
34 court must enter an order for less restrictive alternative treatment
35 for up to ninety days from the date of judgment and may not order
36 inpatient treatment.

37 (3) An order for less restrictive alternative treatment entered
38 under subsection (2) of this section must name the (~~mental~~)
39 behavioral health service provider responsible for identifying the
40 services the person will receive in accordance with RCW 71.05.585,

1 and must include a requirement that the person cooperate with the
2 services planned by the (~~mental~~) behavioral health service
3 provider.

4 (4) The person shall be released from involuntary treatment at
5 the expiration of the period of commitment imposed under subsection
6 (1) or (2) of this section unless the superintendent or professional
7 person in charge of the facility in which he or she is confined, or
8 in the event of a less restrictive alternative, the designated crisis
9 responder, files a new petition for involuntary treatment on the
10 grounds that the committed person:

11 (a) During the current period of court ordered treatment: (i) Has
12 threatened, attempted, or inflicted physical harm upon the person of
13 another, or substantial damage upon the property of another, and (ii)
14 as a result of a (~~mental disorder, substance use~~) behavioral health
15 disorder(~~(r)~~) or developmental disability presents a likelihood of
16 serious harm; or

17 (b) Was taken into custody as a result of conduct in which he or
18 she attempted or inflicted serious physical harm upon the person of
19 another, and continues to present, as a result of (~~mental disorder,~~
20 ~~substance use~~) a behavioral health disorder(~~(r)~~) or developmental
21 disability, a likelihood of serious harm; or

22 (c) (i) Is in custody pursuant to RCW 71.05.280(3) and as a result
23 of (~~mental~~) a behavioral health disorder or developmental
24 disability continues to present a substantial likelihood of repeating
25 acts similar to the charged criminal behavior, when considering the
26 person's life history, progress in treatment, and the public safety.

27 (ii) In cases under this subsection where the court has made an
28 affirmative special finding under RCW 71.05.280(3)(b), the commitment
29 shall continue for up to an additional one hundred eighty-day period
30 whenever the petition presents prima facie evidence that the person
31 continues to suffer from a (~~mental~~) behavioral health disorder or
32 developmental disability that results in a substantial likelihood of
33 committing acts similar to the charged criminal behavior, unless the
34 person presents proof through an admissible expert opinion that the
35 person's condition has so changed such that the (~~mental~~) behavioral
36 health disorder or developmental disability no longer presents a
37 substantial likelihood of the person committing acts similar to the
38 charged criminal behavior. The initial or additional commitment
39 period may include transfer to a specialized program of intensive

1 support and treatment, which may be initiated prior to or after
2 discharge from the state hospital; or

3 (d) Continues to be gravely disabled; or

4 (e) Is in need of assisted outpatient (~~mental~~) behavioral
5 health treatment.

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

9 If less restrictive alternative treatment is sought, the petition
10 shall set forth any recommendations for less restrictive alternative
11 treatment services.

12 (5) A new petition for involuntary treatment filed under
13 subsection (4) of this section shall be filed and heard in the
14 superior court of the county of the facility which is filing the new
15 petition for involuntary treatment unless good cause is shown for a
16 change of venue. The cost of the proceedings shall be borne by the
17 state.

18 (6) (a) The hearing shall be held as provided in RCW 71.05.310,
19 and if the court or jury finds that the grounds for additional
20 confinement as set forth in this section are present, the court may
21 order the committed person returned for an additional period of
22 treatment not to exceed one hundred eighty days from the date of
23 judgment, except as provided in subsection (7) of this section. If
24 the court's order is based solely on the grounds identified in
25 subsection (4) (e) of this section, the court may enter an order for
26 less restrictive alternative treatment not to exceed one hundred
27 eighty days from the date of judgment, and may not enter an order for
28 inpatient treatment. An order for less restrictive alternative
29 treatment must name the (~~mental~~) behavioral health service provider
30 responsible for identifying the services the person will receive in
31 accordance with RCW 71.05.585, and must include a requirement that
32 the person cooperate with the services planned by the (~~mental~~)
33 behavioral health service provider.

34 (b) At the end of the one hundred eighty-day period of
35 commitment, or one-year period of commitment if subsection (7) of
36 this section applies, the committed person shall be released unless a
37 petition for an additional one hundred eighty-day period of continued
38 treatment is filed and heard in the same manner as provided in this
39 section. Successive one hundred eighty-day commitments are

1 permissible on the same grounds and pursuant to the same procedures
2 as the original one hundred eighty-day commitment.

3 (7) An order for less restrictive treatment entered under
4 subsection (6) of this section may be for up to one year when the
5 person's previous commitment term was for intensive inpatient
6 treatment in a state hospital.

7 (8) No person committed as provided in this section may be
8 detained unless a valid order of commitment is in effect. No order of
9 commitment can exceed one hundred eighty days in length except as
10 provided in subsection (7) of this section.

11 **Sec. 46.** RCW 71.05.380 and 2016 sp.s. c 29 s 245 are each
12 amended to read as follows:

13 All persons voluntarily entering or remaining in any facility,
14 institution, or hospital providing evaluation and treatment for
15 (~~mental disorders or substance use~~) behavioral health disorders
16 shall have no less than all rights secured to involuntarily detained
17 persons by RCW (~~71.05.360 and~~) 71.05.217.

18 **Sec. 47.** RCW 71.05.445 and 2018 c 201 s 3021 are each amended to
19 read as follows:

20 (1)(a) When a (~~mental~~) behavioral health service provider
21 conducts its initial assessment for a person receiving court-ordered
22 treatment, the service provider shall inquire and shall be told by
23 the offender whether he or she is subject to supervision by the
24 department of corrections.

25 (b) When a person receiving court-ordered treatment or treatment
26 ordered by the department of corrections discloses to his or her
27 (~~mental~~) behavioral health service provider that he or she is
28 subject to supervision by the department of corrections, the
29 (~~mental~~) behavioral health service provider shall notify the
30 department of corrections that he or she is treating the offender and
31 shall notify the offender that his or her community corrections
32 officer will be notified of the treatment, provided that if the
33 offender has received relief from disclosure pursuant to RCW
34 9.94A.562 or 71.05.132 and the offender has provided the (~~mental~~)
35 behavioral health service provider with a copy of the order granting
36 relief from disclosure pursuant to RCW 9.94A.562 or 71.05.132, the
37 (~~mental~~) behavioral health service provider is not required to
38 notify the department of corrections that the (~~mental~~) behavioral

1 health service provider is treating the offender. The notification
2 may be written or oral and shall not require the consent of the
3 offender. If an oral notification is made, it must be confirmed by a
4 written notification. For purposes of this section, a written
5 notification includes notification by email or facsimile, so long as
6 the notifying (~~mental~~) behavioral health service provider is
7 clearly identified.

8 (2) The information to be released to the department of
9 corrections shall include all relevant records and reports, as
10 defined by rule, necessary for the department of corrections to carry
11 out its duties.

12 (3) The authority and the department of corrections, in
13 consultation with behavioral health organizations, (~~mental~~)
14 behavioral health service providers as defined in RCW 71.05.020,
15 (~~mental~~) behavioral health consumers, and advocates for persons
16 with (~~mental-illness~~) behavioral health disorders, shall adopt
17 rules to implement the provisions of this section related to the type
18 and scope of information to be released. These rules shall:

19 (a) Enhance and facilitate the ability of the department of
20 corrections to carry out its responsibility of planning and ensuring
21 community protection with respect to persons subject to sentencing
22 under chapter 9.94A or 9.95 RCW, including accessing and releasing or
23 disclosing information of persons who received (~~mental~~) behavioral
24 health services as a minor; and

25 (b) Establish requirements for the notification of persons under
26 the supervision of the department of corrections regarding the
27 provisions of this section.

28 (4) The information received by the department of corrections
29 under this section shall remain confidential and subject to the
30 limitations on disclosure outlined in this chapter, except as
31 provided in RCW 72.09.585.

32 (5) No (~~mental~~) behavioral health service provider or
33 individual employed by a (~~mental~~) behavioral health service
34 provider shall be held responsible for information released to or
35 used by the department of corrections under the provisions of this
36 section or rules adopted under this section.

37 (6) Whenever federal law or federal regulations restrict the
38 release of information and records related to (~~mental~~) behavioral
39 health services for any patient who receives treatment for alcoholism

1 or drug dependency, the release of the information may be restricted
2 as necessary to comply with federal law and regulations.

3 (7) This section does not modify the terms and conditions of
4 disclosure of information related to sexually transmitted diseases
5 under chapter 70.24 RCW.

6 (8) The authority shall, subject to available resources,
7 electronically, or by the most cost-effective means available,
8 provide the department of corrections with the names, last dates of
9 services, and addresses of specific behavioral health organizations
10 and ~~((mental))~~ behavioral health service providers that delivered
11 ~~((mental))~~ behavioral health services to a person subject to chapter
12 9.94A or 9.95 RCW pursuant to an agreement between the authority and
13 the department of corrections.

14 **Sec. 48.** RCW 71.05.455 and 2016 c 158 s 2 are each amended to
15 read as follows:

16 When funded, the Washington association of sheriffs and police
17 chiefs, in consultation with the criminal justice training
18 commission, must develop and adopt a model policy for use by law
19 enforcement agencies relating to a law enforcement officer's referral
20 of a person to a ~~((mental))~~ behavioral health agency after receiving
21 a report of threatened or attempted suicide. The model policy must
22 complement the criminal justice training commission's crisis
23 intervention training curriculum.

24 **Sec. 49.** RCW 71.05.457 and 2016 c 158 s 3 are each amended to
25 read as follows:

26 By July 1, 2017, all general authority Washington law enforcement
27 agencies must adopt a policy establishing criteria and procedures for
28 a law enforcement officer to refer a person to a ~~((mental))~~
29 behavioral health agency after receiving a report of threatened or
30 attempted suicide.

31 **Sec. 50.** RCW 71.05.458 and 2016 c 158 s 5 are each amended to
32 read as follows:

33 As soon as possible, but no later than twenty-four hours from
34 receiving a referral from a law enforcement officer or law
35 enforcement agency, excluding Saturdays, Sundays, and holidays, a
36 mental health professional contacted by the designated ~~((mental~~
37 ~~health professional))~~ crisis responder agency must attempt to contact

1 the referred person to determine whether additional mental health
2 intervention is necessary including, if needed, an assessment by a
3 designated (~~mental health professional~~) crisis responder for
4 initial detention under RCW 71.05.150 or 71.05.153. Documentation of
5 the mental health professional's attempt to contact and assess the
6 person must be maintained by the designated (~~mental health~~
7 ~~professional~~) crisis responder agency.

8 **Sec. 51.** RCW 71.05.525 and 2018 c 201 s 3024 are each amended to
9 read as follows:

10 When, in the judgment of the department of social and health
11 services, the welfare of any person committed to or confined in any
12 state juvenile correctional institution or facility necessitates that
13 such a person be transferred or moved for observation, diagnosis or
14 treatment to any state institution or facility for the care of
15 juveniles with (~~mental illness~~) behavioral health disorders the
16 secretary of the department of social and health services, or his or
17 her designee, is authorized to order and effect such move or
18 transfer: PROVIDED, HOWEVER, That the secretary of the department of
19 social and health services shall adopt and implement procedures to
20 assure that persons so transferred shall, while detained or confined
21 in such institution or facility for the care of juveniles with
22 (~~mental illness~~) behavioral health disorders, be provided with
23 substantially similar opportunities for parole or early release
24 evaluation and determination as persons detained or confined in state
25 juvenile correctional institutions or facilities: PROVIDED, FURTHER,
26 That the secretary of the department of social and health services
27 shall notify the original committing court of such transfer.

28 **Sec. 52.** RCW 71.05.530 and 2016 sp.s. c 29 s 247 are each
29 amended to read as follows:

30 Evaluation and treatment facilities and secure detoxification
31 facilities authorized pursuant to this chapter may be part of the
32 comprehensive community (~~mental~~) behavioral health services program
33 conducted in counties pursuant to chapter 71.24 RCW, and may receive
34 funding pursuant to the provisions thereof.

35 **Sec. 53.** RCW 71.05.585 and 2018 c 291 s 2 are each amended to
36 read as follows:

1 (1) Less restrictive alternative treatment, at a minimum,
2 includes the following services:

3 (a) Assignment of a care coordinator;

4 (b) An intake evaluation with the provider of the less
5 restrictive alternative treatment;

6 (c) A psychiatric evaluation;

7 (d) A schedule of regular contacts with the provider of the less
8 restrictive alternative treatment services for the duration of the
9 order;

10 (e) A transition plan addressing access to continued services at
11 the expiration of the order;

12 (f) An individual crisis plan; and

13 (g) Notification to the care coordinator assigned in (a) of this
14 subsection if reasonable efforts to engage the client fail to produce
15 substantial compliance with court-ordered treatment conditions.

16 (2) Less restrictive alternative treatment may additionally
17 include requirements to participate in the following services:

18 (a) Medication management;

19 (b) Psychotherapy;

20 (c) Nursing;

21 (d) Substance abuse counseling;

22 (e) Residential treatment; and

23 (f) Support for housing, benefits, education, and employment.

24 (3) If the person was provided with involuntary medication under
25 RCW 71.05.215 or pursuant to a judicial order during the involuntary
26 commitment period, the less restrictive alternative treatment order
27 may authorize the less restrictive alternative treatment provider or
28 its designee to administer involuntary antipsychotic medication to
29 the person if the provider has attempted and failed to obtain the
30 informed consent of the person and there is a concurring medical
31 opinion approving the medication by a psychiatrist, physician
32 assistant working with a supervising psychiatrist, psychiatric
33 advanced registered nurse practitioner, or physician or physician
34 assistant in consultation with an independent mental health
35 professional with prescribing authority.

36 (4) Less restrictive alternative treatment must be administered
37 by a provider that is certified or licensed to provide or coordinate
38 the full scope of services required under the less restrictive
39 alternative order and that has agreed to assume this responsibility.

1 (~~(4)~~) (5) The care coordinator assigned to a person ordered to
2 less restrictive alternative treatment must submit an individualized
3 plan for the person's treatment services to the court that entered
4 the order. An initial plan must be submitted as soon as possible
5 following the intake evaluation and a revised plan must be submitted
6 upon any subsequent modification in which a type of service is
7 removed from or added to the treatment plan.

8 (~~(5)~~) (6) For the purpose of this section, "care coordinator"
9 means a clinical practitioner who coordinates the activities of less
10 restrictive alternative treatment. The care coordinator coordinates
11 activities with the designated crisis responders that are necessary
12 for enforcement and continuation of less restrictive alternative
13 orders and is responsible for coordinating service activities with
14 other agencies and establishing and maintaining a therapeutic
15 relationship with the individual on a continuing basis.

16 **Sec. 54.** RCW 71.05.590 and 2018 c 291 s 9 and 2018 c 201 s 3026
17 are each reenacted and amended to read as follows:

18 (1) Either an agency or facility designated to monitor or provide
19 services under a less restrictive alternative order or conditional
20 release order, or a designated crisis responder, may take action to
21 enforce, modify, or revoke a less restrictive alternative or
22 conditional release order. The agency, facility, or designated crisis
23 responder must determine that:

24 (a) The person is failing to adhere to the terms and conditions
25 of the court order;

26 (b) Substantial deterioration in the person's functioning has
27 occurred;

28 (c) There is evidence of substantial decompensation with a
29 reasonable probability that the decompensation can be reversed by
30 further evaluation, intervention, or treatment; or

31 (d) The person poses a likelihood of serious harm.

32 (2) Actions taken under this section must include a flexible
33 range of responses of varying levels of intensity appropriate to the
34 circumstances and consistent with the interests of the individual and
35 the public in personal autonomy, safety, recovery, and compliance.
36 Available actions may include, but are not limited to, any of the
37 following:

1 (a) To counsel or advise the person as to their rights and
2 responsibilities under the court order, and to offer appropriate
3 incentives to motivate compliance;

4 (b) To increase the intensity of outpatient services provided to
5 the person by increasing the frequency of contacts with the provider,
6 referring the person for an assessment for assertive community
7 services, or by other means;

8 (c) To request a court hearing for review and modification of the
9 court order. The request must be made to or by the court with
10 jurisdiction over the order and specify the circumstances that give
11 rise to the request and what modification is being sought. The county
12 prosecutor shall assist the agency or facility in requesting this
13 hearing and issuing an appropriate summons to the person. This
14 subsection does not limit the inherent authority of a treatment
15 provider to alter conditions of treatment for clinical reasons, and
16 is intended to be used only when court intervention is necessary or
17 advisable to secure the person's compliance and prevent
18 decompensation or deterioration;

19 (d) To cause the person to be transported by a peace officer,
20 designated crisis responder, or other means to the agency or facility
21 monitoring or providing services under the court order, or to a
22 triage facility, crisis stabilization unit, emergency department,
23 ~~((or to an))~~ evaluation and treatment facility ~~((if the person is~~
24 ~~committed for mental health treatment))~~, ~~((or to a))~~ secure
25 detoxification facility with available space, or an approved
26 substance use disorder treatment program with available space ~~((if~~
27 ~~the person is committed for substance use disorder treatment))~~. The
28 person may be detained at the facility for up to twelve hours for the
29 purpose of an evaluation to determine whether modification,
30 revocation, or commitment proceedings are necessary and appropriate
31 to stabilize the person and prevent decompensation, deterioration, or
32 physical harm. Temporary detention for evaluation under this
33 subsection is intended to occur only following a pattern of
34 noncompliance or the failure of reasonable attempts at outreach and
35 engagement, and may occur only when in the clinical judgment of a
36 designated crisis responder or the professional person in charge of
37 an agency or facility designated to monitor less restrictive
38 alternative services temporary detention is appropriate. This
39 subsection does not limit the ability or obligation to pursue

1 revocation procedures under subsection (4) of this section in
2 appropriate circumstances; and

3 (e) To initiate revocation procedures under subsection (4) of
4 this section or, if the current commitment is solely based on the
5 person being in need of assisted outpatient behavioral health
6 treatment as defined in RCW 71.05.020, initiate initial inpatient
7 detention procedures under subsection (6) of this section.

8 (3) The facility or agency designated to provide outpatient
9 treatment shall notify the secretary of the department of social and
10 health services or designated crisis responder when a person fails to
11 adhere to terms and conditions of court ordered treatment or
12 experiences substantial deterioration in his or her condition and, as
13 a result, presents an increased likelihood of serious harm.

14 (4) (a) Except as provided in subsection (6) of this section, a
15 designated crisis responder or the secretary of the department of
16 social and health services may upon their own motion or notification
17 by the facility or agency designated to provide outpatient care order
18 a person subject to a court order under this chapter to be
19 apprehended and taken into custody and temporary detention in an
20 evaluation and treatment facility (~~((in or near the county in which he
21 or she is receiving outpatient treatment if the person is committed
22 for mental health treatment, or, if the person is committed for
23 substance use disorder treatment, in a)),~~ an available secure
24 detoxification facility with adequate space, or an available approved
25 substance use disorder treatment program (~~((if either is available))~~
26 with adequate space, in or near the county in which he or she is
27 receiving outpatient treatment (~~((and has adequate space))~~).
28 Proceedings under this subsection (4) may be initiated without
29 ordering the apprehension and detention of the person.

30 (b) Except as provided in subsection (6) of this section, a
31 person detained under this subsection (4) must be held until such
32 time, not exceeding five days, as a hearing can be scheduled to
33 determine whether or not the person should be returned to the
34 hospital or facility from which he or she had been released. If the
35 person is not detained, the hearing must be scheduled within five
36 days of service on the person. The designated crisis responder or the
37 secretary of the department of social and health services may modify
38 or rescind the order at any time prior to commencement of the court
39 hearing.

1 (c) The designated crisis responder or secretary of the
2 department of social and health services shall file a revocation
3 petition and order of apprehension and detention with the court of
4 the county where the person is currently located or being detained.
5 The designated crisis responder shall serve the person and their
6 attorney, guardian, and conservator, if any. The person has the same
7 rights with respect to notice, hearing, and counsel as in any
8 involuntary treatment proceeding, except as specifically set forth in
9 this section. There is no right to jury trial. The venue for
10 proceedings is the county where the petition is filed. Notice of the
11 filing must be provided to the court that originally ordered
12 commitment, if different from the court where the petition for
13 revocation is filed, within two judicial days of the person's
14 detention.

15 (d) Except as provided in subsection (6) of this section, the
16 issues for the court to determine are whether: (i) The person adhered
17 to the terms and conditions of the court order; (ii) substantial
18 deterioration in the person's functioning has occurred; (iii) there
19 is evidence of substantial decompensation with a reasonable
20 probability that the decompensation can be reversed by further
21 inpatient treatment; or (iv) there is a likelihood of serious harm;
22 and, if any of the above conditions apply, whether the court should
23 reinstate or modify the person's less restrictive alternative or
24 conditional release order or order the person's detention for
25 inpatient treatment. The person may waive the court hearing and allow
26 the court to enter a stipulated order upon the agreement of all
27 parties. If the court orders detention for inpatient treatment, the
28 treatment period (~~(may be for no longer than the period)~~) must be for
29 fourteen days from the revocation hearing if the outpatient order was
30 based on a petition under RCW 71.05.160 or 71.05.230. If the court
31 orders detention for inpatient treatment and the outpatient order was
32 based on a petition under RCW 71.05.290 or 71.05.320, the number of
33 days remaining on the outpatient order must be converted to days of
34 inpatient treatment authorized in the original court order. A court
35 may not issue an order to detain a person for inpatient treatment in
36 a secure detoxification facility or approved substance use disorder
37 treatment program under this subsection unless there is a secure
38 detoxification facility or approved substance use disorder treatment
39 program available and with adequate space for the person.

1 (5) In determining whether or not to take action under this
2 section the designated crisis responder, agency, or facility must
3 consider the factors specified under RCW 71.05.212 and the court must
4 consider the factors specified under RCW 71.05.245 as they apply to
5 the question of whether to enforce, modify, or revoke a court order
6 for involuntary treatment.

7 (6) (a) If the current commitment is solely based on the person
8 being in need of assisted outpatient behavioral health treatment as
9 defined in RCW 71.05.020, a designated crisis responder may initiate
10 inpatient detention procedures under RCW 71.05.150 or 71.05.153 when
11 appropriate. A designated crisis responder or the secretary may, upon
12 their own motion or notification by the facility or agency designated
13 to provide outpatient care to a person subject to a less restrictive
14 alternative treatment order under RCW 71.05.320 subsequent to an
15 order for assisted outpatient behavioral health treatment entered
16 under RCW 71.05.148, order the person to be apprehended and taken
17 into custody and temporary detention for inpatient evaluation in an
18 evaluation and treatment facility (~~in or near the county in which he~~
19 ~~or she is receiving outpatient treatment if the person is committed~~
20 ~~for mental health treatment, or, if the person is committed for~~
21 ~~substance use disorder treatment, in a)) secure detoxification
22 facility, or in an approved substance use disorder treatment program
23 (~~if either is available~~)) in or near the county in which he or she
24 is receiving outpatient treatment. Proceedings under this subsection
25 may be initiated without ordering the apprehension and detention of
26 the person.~~

27 (b) A person detained under this subsection may be held for
28 evaluation for up to seventy-two hours, excluding weekends and
29 holidays, pending a court hearing. If the person is not detained, the
30 hearing must be scheduled within seventy-two hours of service on the
31 person. The designated crisis responder or the secretary may modify
32 or rescind the order at any time prior to commencement of the court
33 hearing.

34 (c) The issues for the court to determine are whether to continue
35 the detention of the person for inpatient treatment or whether the
36 court should reinstate or modify the person's less restrictive
37 alternative order or order the person's detention for inpatient
38 treatment. To continue detention after the seventy-two hour period,
39 the court must find that the person, as a result of a (~~mental~~
40 ~~disorder or substance use~~) behavioral health disorder, presents a

1 likelihood of serious harm or is gravely disabled and, after
2 considering less restrictive alternatives to involuntary detention
3 and treatment, that no such alternatives are in the best interest of
4 the person or others.

5 (d) A court may not issue an order to detain a person for
6 inpatient treatment in a secure detoxification facility or approved
7 substance use disorder program under this subsection unless there is
8 a secure detoxification facility or approved substance use disorder
9 treatment program available and with adequate space for the person.

10 **Sec. 55.** RCW 71.05.590 and 2018 c 291 s 9 and 2018 c 201 s 3026
11 are each reenacted and amended to read as follows:

12 (1) Either an agency or facility designated to monitor or provide
13 services under a less restrictive alternative order or conditional
14 release order, or a designated crisis responder, may take action to
15 enforce, modify, or revoke a less restrictive alternative or
16 conditional release order. The agency, facility, or designated crisis
17 responder must determine that:

18 (a) The person is failing to adhere to the terms and conditions
19 of the court order;

20 (b) Substantial deterioration in the person's functioning has
21 occurred;

22 (c) There is evidence of substantial decompensation with a
23 reasonable probability that the decompensation can be reversed by
24 further evaluation, intervention, or treatment; or

25 (d) The person poses a likelihood of serious harm.

26 (2) Actions taken under this section must include a flexible
27 range of responses of varying levels of intensity appropriate to the
28 circumstances and consistent with the interests of the individual and
29 the public in personal autonomy, safety, recovery, and compliance.
30 Available actions may include, but are not limited to, any of the
31 following:

32 (a) To counsel or advise the person as to their rights and
33 responsibilities under the court order, and to offer appropriate
34 incentives to motivate compliance;

35 (b) To increase the intensity of outpatient services provided to
36 the person by increasing the frequency of contacts with the provider,
37 referring the person for an assessment for assertive community
38 services, or by other means;

1 (c) To request a court hearing for review and modification of the
2 court order. The request must be made to or by the court with
3 jurisdiction over the order and specify the circumstances that give
4 rise to the request and what modification is being sought. The county
5 prosecutor shall assist the agency or facility in requesting this
6 hearing and issuing an appropriate summons to the person. This
7 subsection does not limit the inherent authority of a treatment
8 provider to alter conditions of treatment for clinical reasons, and
9 is intended to be used only when court intervention is necessary or
10 advisable to secure the person's compliance and prevent
11 decompensation or deterioration;

12 (d) To cause the person to be transported by a peace officer,
13 designated crisis responder, or other means to the agency or facility
14 monitoring or providing services under the court order, or to a
15 triage facility, crisis stabilization unit, emergency department,
16 ~~((or to an))~~ evaluation and treatment facility ~~((if the person is~~
17 ~~committed for mental health treatment))~~, ~~((or to a))~~ secure
18 detoxification facility with available space, or an approved
19 substance use disorder treatment program with available space ~~((if~~
20 ~~the person is committed for substance use disorder treatment))~~. The
21 person may be detained at the facility for up to twelve hours for the
22 purpose of an evaluation to determine whether modification,
23 revocation, or commitment proceedings are necessary and appropriate
24 to stabilize the person and prevent decompensation, deterioration, or
25 physical harm. Temporary detention for evaluation under this
26 subsection is intended to occur only following a pattern of
27 noncompliance or the failure of reasonable attempts at outreach and
28 engagement, and may occur only when in the clinical judgment of a
29 designated crisis responder or the professional person in charge of
30 an agency or facility designated to monitor less restrictive
31 alternative services temporary detention is appropriate. This
32 subsection does not limit the ability or obligation to pursue
33 revocation procedures under subsection (4) of this section in
34 appropriate circumstances; and

35 (e) To initiate revocation procedures under subsection (4) of
36 this section or, if the current commitment is solely based on the
37 person being in need of assisted outpatient behavioral health
38 treatment as defined in RCW 71.05.020, initiate initial inpatient
39 detention procedures under subsection (6) of this section.

1 (3) The facility or agency designated to provide outpatient
2 treatment shall notify the secretary of the department of social and
3 health services or designated crisis responder when a person fails to
4 adhere to terms and conditions of court ordered treatment or
5 experiences substantial deterioration in his or her condition and, as
6 a result, presents an increased likelihood of serious harm.

7 (4) (a) Except as provided in subsection (6) of this section, a
8 designated crisis responder or the secretary of the department of
9 social and health services may upon their own motion or notification
10 by the facility or agency designated to provide outpatient care order
11 a person subject to a court order under this chapter to be
12 apprehended and taken into custody and temporary detention in an
13 evaluation and treatment facility (~~in or near the county in which he~~
14 ~~or she is receiving outpatient treatment if the person is committed~~
15 ~~for mental health treatment, or, if the person is committed for~~
16 ~~substance use disorder treatment, in a)), an available secure
17 detoxification facility with adequate space, or an available approved
18 substance use disorder treatment program (~~if either is available~~)
19 with adequate space, in or near the county in which he or she is
20 receiving outpatient treatment (~~and has adequate space~~).
21 Proceedings under this subsection (4) may be initiated without
22 ordering the apprehension and detention of the person.~~

23 (b) Except as provided in subsection (6) of this section, a
24 person detained under this subsection (4) must be held until such
25 time, not exceeding five days, as a hearing can be scheduled to
26 determine whether or not the person should be returned to the
27 hospital or facility from which he or she had been released. If the
28 person is not detained, the hearing must be scheduled within five
29 days of service on the person. The designated crisis responder or the
30 secretary of the department of social and health services may modify
31 or rescind the order at any time prior to commencement of the court
32 hearing.

33 (c) The designated crisis responder or secretary of the
34 department of social and health services shall file a revocation
35 petition and order of apprehension and detention with the court of
36 the county where the person is currently located or being detained.
37 The designated crisis responder shall serve the person and their
38 attorney, guardian, and conservator, if any. The person has the same
39 rights with respect to notice, hearing, and counsel as in any
40 involuntary treatment proceeding, except as specifically set forth in

1 this section. There is no right to jury trial. The venue for
2 proceedings is the county where the petition is filed. Notice of the
3 filing must be provided to the court that originally ordered
4 commitment, if different from the court where the petition for
5 revocation is filed, within two judicial days of the person's
6 detention.

7 (d) Except as provided in subsection (6) of this section, the
8 issues for the court to determine are whether: (i) The person adhered
9 to the terms and conditions of the court order; (ii) substantial
10 deterioration in the person's functioning has occurred; (iii) there
11 is evidence of substantial decompensation with a reasonable
12 probability that the decompensation can be reversed by further
13 inpatient treatment; or (iv) there is a likelihood of serious harm;
14 and, if any of the above conditions apply, whether the court should
15 reinstate or modify the person's less restrictive alternative or
16 conditional release order or order the person's detention for
17 inpatient treatment. The person may waive the court hearing and allow
18 the court to enter a stipulated order upon the agreement of all
19 parties. If the court orders detention for inpatient treatment, the
20 treatment period (~~(may be for no longer than the period)~~) must be for
21 fourteen days from the revocation hearing if the outpatient order was
22 based on a petition under RCW 71.05.160 or 71.05.230. If the court
23 orders detention for inpatient treatment and the outpatient order was
24 based on a petition under RCW 71.05.290 or 71.05.320, the number of
25 days remaining on the outpatient order must be converted to days of
26 inpatient treatment authorized in the original court order. A court
27 may not issue an order to detain a person for inpatient treatment in
28 a secure detoxification facility or approved substance use disorder
29 treatment program under this subsection unless there is a secure
30 detoxification facility or approved substance use disorder treatment
31 program available and with adequate space for the person.

32 (5) In determining whether or not to take action under this
33 section the designated crisis responder, agency, or facility must
34 consider the factors specified under RCW 71.05.212 and the court must
35 consider the factors specified under RCW 71.05.245 as they apply to
36 the question of whether to enforce, modify, or revoke a court order
37 for involuntary treatment.

38 (6) (a) If the current commitment is solely based on the person
39 being in need of assisted outpatient behavioral health treatment as
40 defined in RCW 71.05.020, a designated crisis responder may initiate

1 inpatient detention procedures under RCW 71.05.150 or 71.05.153 when
2 appropriate. A designated crisis responder or the secretary may, upon
3 their own motion or notification by the facility or agency designated
4 to provide outpatient care to a person subject to a less restrictive
5 alternative treatment order under RCW 71.05.320 subsequent to an
6 order for assisted outpatient behavioral health treatment entered
7 under RCW 71.05.148, order the person to be apprehended and taken
8 into custody and temporary detention for inpatient evaluation in an
9 evaluation and treatment facility (~~(in or near the county in which he~~
10 ~~or she is receiving outpatient treatment if the person is committed~~
11 ~~for mental health treatment, or, if the person is committed for~~
12 ~~substance use disorder treatment, in a)~~ secure detoxification
13 facility, or in an approved substance use disorder treatment program
14 (~~(if either is available)~~), in or near the county in which he or she
15 is receiving outpatient treatment. Proceedings under this subsection
16 may be initiated without ordering the apprehension and detention of
17 the person.

18 (b) A person detained under this subsection may be held for
19 evaluation for up to (~~(seventy-two hours)~~) five days, excluding
20 weekends and holidays, pending a court hearing. If the person is not
21 detained, the hearing must be scheduled within (~~(seventy-two hours)~~)
22 five days of service on the person. The designated crisis responder
23 or the secretary may modify or rescind the order at any time prior to
24 commencement of the court hearing.

25 (c) The issues for the court to determine are whether to continue
26 the detention of the person for inpatient treatment or whether the
27 court should reinstate or modify the person's less restrictive
28 alternative order or order the person's detention for inpatient
29 treatment. To continue detention after the (~~(seventy-two hour)~~) five-
30 day period, the court must find that the person, as a result of a
31 (~~(mental disorder or substance use)~~) behavioral health disorder,
32 presents a likelihood of serious harm or is gravely disabled and,
33 after considering less restrictive alternatives to involuntary
34 detention and treatment, that no such alternatives are in the best
35 interest of the person or others.

36 (d) A court may not issue an order to detain a person for
37 inpatient treatment in a secure detoxification facility or approved
38 substance use disorder program under this subsection unless there is
39 a secure detoxification facility or approved substance use disorder
40 treatment program available and with adequate space for the person.

1 **Sec. 56.** RCW 71.05.590 and 2018 c 291 s 10 and 2018 c 201 s 3027
2 are each reenacted and amended to read as follows:

3 (1) Either an agency or facility designated to monitor or provide
4 services under a less restrictive alternative order or conditional
5 release order, or a designated crisis responder, may take action to
6 enforce, modify, or revoke a less restrictive alternative or
7 conditional release order. The agency, facility, or designated crisis
8 responder must determine that:

9 (a) The person is failing to adhere to the terms and conditions
10 of the court order;

11 (b) Substantial deterioration in the person's functioning has
12 occurred;

13 (c) There is evidence of substantial decompensation with a
14 reasonable probability that the decompensation can be reversed by
15 further evaluation, intervention, or treatment; or

16 (d) The person poses a likelihood of serious harm.

17 (2) Actions taken under this section must include a flexible
18 range of responses of varying levels of intensity appropriate to the
19 circumstances and consistent with the interests of the individual and
20 the public in personal autonomy, safety, recovery, and compliance.
21 Available actions may include, but are not limited to, any of the
22 following:

23 (a) To counsel or advise the person as to their rights and
24 responsibilities under the court order, and to offer appropriate
25 incentives to motivate compliance;

26 (b) To increase the intensity of outpatient services provided to
27 the person by increasing the frequency of contacts with the provider,
28 referring the person for an assessment for assertive community
29 services, or by other means;

30 (c) To request a court hearing for review and modification of the
31 court order. The request must be made to or by the court with
32 jurisdiction over the order and specify the circumstances that give
33 rise to the request and what modification is being sought. The county
34 prosecutor shall assist the agency or facility in requesting this
35 hearing and issuing an appropriate summons to the person. This
36 subsection does not limit the inherent authority of a treatment
37 provider to alter conditions of treatment for clinical reasons, and
38 is intended to be used only when court intervention is necessary or
39 advisable to secure the person's compliance and prevent
40 decompensation or deterioration;

1 (d) To cause the person to be transported by a peace officer,
2 designated crisis responder, or other means to the agency or facility
3 monitoring or providing services under the court order, or to a
4 triage facility, crisis stabilization unit, emergency department,
5 ~~((or to an))~~ evaluation and treatment facility ~~((if the person is~~
6 ~~committed for mental health treatment))~~, ~~((or to a))~~ secure
7 detoxification facility, or an approved substance use disorder
8 treatment program ~~((if the person is committed for substance use~~
9 ~~disorder treatment))~~. The person may be detained at the facility for
10 up to twelve hours for the purpose of an evaluation to determine
11 whether modification, revocation, or commitment proceedings are
12 necessary and appropriate to stabilize the person and prevent
13 decompensation, deterioration, or physical harm. Temporary detention
14 for evaluation under this subsection is intended to occur only
15 following a pattern of noncompliance or the failure of reasonable
16 attempts at outreach and engagement, and may occur only when in the
17 clinical judgment of a designated crisis responder or the
18 professional person in charge of an agency or facility designated to
19 monitor less restrictive alternative services temporary detention is
20 appropriate. This subsection does not limit the ability or obligation
21 to pursue revocation procedures under subsection (4) of this section
22 in appropriate circumstances; and

23 (e) To initiate revocation procedures under subsection (4) of
24 this section or, if the current commitment is solely based on the
25 person being in need of assisted outpatient behavioral health
26 treatment as defined in RCW 71.05.020, initial inpatient detention
27 procedures under subsection (6) of this section.

28 (3) The facility or agency designated to provide outpatient
29 treatment shall notify the secretary of the department of social and
30 health services or designated crisis responder when a person fails to
31 adhere to terms and conditions of court ordered treatment or
32 experiences substantial deterioration in his or her condition and, as
33 a result, presents an increased likelihood of serious harm.

34 (4) (a) Except as provided in subsection (6) of this section, a
35 designated crisis responder or the secretary of the department of
36 social and health services may upon their own motion or notification
37 by the facility or agency designated to provide outpatient care order
38 a person subject to a court order under this chapter to be
39 apprehended and taken into custody and temporary detention in an
40 evaluation and treatment facility ~~((in or near the county in which he~~

1 ~~or she is receiving outpatient treatment if the person is committed~~
2 ~~for mental health treatment, or, if the person is committed for~~
3 ~~substance use disorder treatment)), in a secure detoxification~~
4 ~~facility, or in an approved substance use disorder treatment program~~
5 ~~((if either is available)), in or near the county in which he or she~~
6 is receiving outpatient treatment. Proceedings under this subsection
7 (4) may be initiated without ordering the apprehension and detention
8 of the person.

9 (b) Except as provided in subsection (6) of this section, a
10 person detained under this subsection (4) must be held until such
11 time, not exceeding five days, as a hearing can be scheduled to
12 determine whether or not the person should be returned to the
13 hospital or facility from which he or she had been released. If the
14 person is not detained, the hearing must be scheduled within five
15 days of service on the person. The designated crisis responder or the
16 secretary of the department of social and health services may modify
17 or rescind the order at any time prior to commencement of the court
18 hearing.

19 (c) The designated crisis responder or secretary of the
20 department of social and health services shall file a revocation
21 petition and order of apprehension and detention with the court of
22 the county where the person is currently located or being detained.
23 The designated crisis responder shall serve the person and their
24 attorney, guardian, and conservator, if any. The person has the same
25 rights with respect to notice, hearing, and counsel as in any
26 involuntary treatment proceeding, except as specifically set forth in
27 this section. There is no right to jury trial. The venue for
28 proceedings is the county where the petition is filed. Notice of the
29 filing must be provided to the court that originally ordered
30 commitment, if different from the court where the petition for
31 revocation is filed, within two judicial days of the person's
32 detention.

33 (d) Except as provided in subsection (6) of this section, the
34 issues for the court to determine are whether: (i) The person adhered
35 to the terms and conditions of the court order; (ii) substantial
36 deterioration in the person's functioning has occurred; (iii) there
37 is evidence of substantial decompensation with a reasonable
38 probability that the decompensation can be reversed by further
39 inpatient treatment; or (iv) there is a likelihood of serious harm;
40 and, if any of the above conditions apply, whether the court should

1 reinstate or modify the person's less restrictive alternative or
2 conditional release order or order the person's detention for
3 inpatient treatment. The person may waive the court hearing and allow
4 the court to enter a stipulated order upon the agreement of all
5 parties. If the court orders detention for inpatient treatment, the
6 treatment period (~~(may be for no longer than the period)~~) must be for
7 fourteen days from the revocation hearing if the outpatient order was
8 based on a petition under RCW 71.05.160 or 71.05.230. If the court
9 orders detention for inpatient treatment and the outpatient order was
10 based on a petition under RCW 71.05.290 or 71.05.320, the number of
11 days remaining on the outpatient order must be converted to days of
12 inpatient treatment authorized in the original court order.

13 (5) In determining whether or not to take action under this
14 section the designated crisis responder, agency, or facility must
15 consider the factors specified under RCW 71.05.212 and the court must
16 consider the factors specified under RCW 71.05.245 as they apply to
17 the question of whether to enforce, modify, or revoke a court order
18 for involuntary treatment.

19 (6) (a) If the current commitment is solely based on the person
20 being in need of assisted outpatient behavioral health treatment as
21 defined in RCW 71.05.020, a designated crisis responder may initiate
22 inpatient detention procedures under RCW 71.05.150 or 71.05.153 when
23 appropriate. A designated crisis responder or the secretary may, upon
24 their own motion or notification by the facility or agency designated
25 to provide outpatient care to a person subject to a less restrictive
26 alternative treatment order under RCW 71.05.320 subsequent to an
27 order for assisted outpatient behavioral health treatment entered
28 under RCW 71.05.148, order the person to be apprehended and taken
29 into custody and temporary detention for inpatient evaluation in an
30 evaluation and treatment facility (~~((in or near the county in which he~~
31 ~~or she is receiving outpatient treatment if the person is committed~~
32 ~~for mental health treatment, or, if the person is committed for~~
33 ~~substance use disorder treatment))), in a secure detoxification
34 facility, or in an approved substance use disorder treatment program
35 (~~((if either is available))), in or near the county in which he or she
36 is receiving outpatient treatment. Proceedings under this subsection
37 may be initiated without ordering the apprehension and detention of
38 the person.~~~~

39 (b) A person detained under this subsection may be held for
40 evaluation for up to (~~(seventy-two hours))~~) five days, excluding

1 weekends and holidays, pending a court hearing. The designated crisis
2 responder or the secretary may modify or rescind the order at any
3 time prior to commencement of the court hearing.

4 (c) The issues for the court to determine are whether to continue
5 the detention of the person for inpatient treatment or whether the
6 court should reinstate or modify the person's less restrictive
7 alternative order or order the person's detention for inpatient
8 treatment. To continue detention after the ~~((seventy-two hour))~~ five-
9 day period, the court must find that the person, as a result of a
10 ~~((mental disorder or substance use))~~ behavioral health disorder,
11 presents a likelihood of serious harm or is gravely disabled and,
12 after considering less restrictive alternatives to involuntary
13 detention and treatment, that no such alternatives are in the best
14 interest of the person or others.

15 ~~((d) A court may not issue an order to detain a person for
16 inpatient treatment in a secure detoxification facility or approved
17 substance use disorder program under this subsection unless there is
18 a secure detoxification facility or approved substance use disorder
19 treatment program available and with adequate space for the person.))~~

20 **Sec. 57.** RCW 71.05.720 and 2018 c 201 s 3029 are each amended to
21 read as follows:

22 Annually, all community mental health employees who work directly
23 with clients shall be provided with training on safety and violence
24 prevention topics described in RCW 49.19.030. The curriculum for the
25 training shall be developed collaboratively among the authority, the
26 department, contracted ~~((mental))~~ behavioral health service
27 providers, and employee organizations that represent community mental
28 health workers.

29 **Sec. 58.** RCW 71.05.740 and 2018 c 201 s 3031 are each amended to
30 read as follows:

31 All behavioral health organizations in the state of Washington
32 must forward historical ~~((mental))~~ behavioral health involuntary
33 commitment information retained by the organization including
34 identifying information and dates of commitment to the authority. As
35 soon as feasible, the behavioral health organizations must arrange to
36 report new commitment data to the authority within twenty-four hours.
37 Commitment information under this section does not need to be resent
38 if it is already in the possession of the authority. Behavioral

1 health organizations and the authority shall be immune from liability
2 related to the sharing of commitment information under this section.

3 **Sec. 59.** RCW 71.05.745 and 2018 c 201 s 3032 are each amended to
4 read as follows:

5 (1) The authority may use a single bed certification process as
6 outlined in rule to provide additional treatment capacity for a
7 person suffering from a (~~mental~~) behavioral health disorder for
8 whom an evaluation and treatment facility, secure detoxification
9 facility, or approved substance use disorder treatment program bed is
10 not available. The facility that is the proposed site of the single
11 bed certification must be a facility that is willing and able to
12 provide the person with timely and appropriate treatment either
13 directly or by arrangement with other public or private agencies.

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

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

23 (4) The authority may adopt rules implementing this section and
24 continue to enforce rules it has already adopted except where
25 inconsistent with this section.

26 **Sec. 60.** RCW 71.05.750 and 2018 c 201 s 3033 are each amended to
27 read as follows:

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

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

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

4 (b) The identity of the responsible behavioral health
5 administrative services organization and managed care organization,
6 if applicable;

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

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

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

11 (3) The authority shall develop a standardized reporting form or
12 modify the current form used for single bed certifications for the
13 report required under subsection (2) of this section and may require
14 additional reporting elements as it determines are necessary or
15 supportive. The authority shall also determine the method for the
16 transmission of the completed report from the designated crisis
17 responder to the authority.

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

25 (5) The reports provided according to this section may not
26 display "protected health information" as that term is used in the
27 federal health insurance portability and accountability act of 1996,
28 nor information contained in "mental health treatment records" or
29 "behavioral health treatment records" as (~~that term is~~) these terms
30 are used in chapter 70.02 RCW or elsewhere in state law, and must
31 otherwise be compliant with state and federal privacy laws.

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

36 (a) Not licensed or certified as an inpatient evaluation and
37 treatment facility; or

38 (b) A licensed or certified inpatient evaluation and treatment
39 facility that is already at capacity.

1 **Sec. 61.** RCW 71.05.750 and 2018 c 201 s 3033 are each amended to
2 read as follows:

3 (1) A designated crisis responder shall make a report to the
4 authority when he or she determines a person meets detention criteria
5 under RCW 71.05.150, 71.05.153, 71.34.700, or 71.34.710 and there are
6 not any beds available at an evaluation and treatment facility, the
7 person has not been provisionally accepted for admission by a
8 facility, and the person cannot be served on a single bed
9 certification or less restrictive alternative. Starting at the time
10 when the designated crisis responder determines a person meets
11 detention criteria and the investigation has been completed, the
12 designated crisis responder has twenty-four hours to submit a
13 completed report to the authority.

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

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

17 (b) The identity of the responsible behavioral health
18 administrative services organization and managed care organization,
19 if applicable;

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

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

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

24 (3) The authority shall develop a standardized reporting form or
25 modify the current form used for single bed certifications for the
26 report required under subsection (2) of this section and may require
27 additional reporting elements as it determines are necessary or
28 supportive. The authority shall also determine the method for the
29 transmission of the completed report from the designated crisis
30 responder to the authority.

31 (4) The authority shall create quarterly reports displayed on its
32 web site that summarize the information reported under subsection (2)
33 of this section. At a minimum, the reports must display data by
34 county and by month. The reports must also include the number of
35 single bed certifications granted by category. The categories must
36 include all of the reasons that the authority recognizes for issuing
37 a single bed certification, as identified in rule.

38 (5) The reports provided according to this section may not
39 display "protected health information" as that term is used in the
40 federal health insurance portability and accountability act of 1996,

1 nor information contained in "mental health treatment records" or
2 "behavioral health treatment records" as (~~that term is~~) these terms
3 are used in chapter 70.02 RCW or elsewhere in state law, and must
4 otherwise be compliant with state and federal privacy laws.

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

10 (a) Not licensed or certified as an inpatient evaluation and
11 treatment facility; or

12 (b) A licensed or certified inpatient evaluation and treatment
13 facility that is already at capacity.

14 **Sec. 62.** RCW 71.05.760 and 2018 c 201 s 3035 are each amended to
15 read as follows:

16 (1) (a) (~~By April 1, 2018, the authority, by rule, must combine~~
17 ~~the functions of a designated mental health professional and~~
18 ~~designated chemical dependency specialist by establishing a~~
19 ~~designated crisis responder who is authorized to conduct~~
20 ~~investigations, detain persons up to seventy-two hours to the proper~~
21 ~~facility, and carry out the other functions identified in this~~
22 ~~chapter and chapter 71.34 RCW.)) The behavioral health organizations
23 shall provide training to the designated crisis responders as
24 required by the authority.~~

25 (b) (i) To qualify as a designated crisis responder, a person must
26 have received chemical dependency training as determined by the
27 department and be a:

28 (A) Psychiatrist, psychologist, physician assistant working with
29 a supervising psychiatrist, psychiatric advanced registered nurse
30 practitioner, or social worker;

31 (B) Person who is licensed by the department as a mental health
32 counselor or mental health counselor associate, or marriage and
33 family therapist or marriage and family therapist associate;

34 (C) Person with a master's degree or further advanced degree in
35 counseling or one of the social sciences from an accredited college
36 or university and who have, in addition, at least two years of
37 experience in direct treatment of persons with mental illness or
38 emotional disturbance, such experience gained under the direction of
39 a mental health professional;

1 (D) Person who meets the waiver criteria of RCW 71.24.260, which
2 waiver was granted before 1986;

3 (E) Person who had an approved waiver to perform the duties of a
4 mental health professional that was requested by the regional support
5 network and granted by the department of social and health services
6 before July 1, 2001; or

7 (F) Person who has been granted an exception of the minimum
8 requirements of a mental health professional by the department
9 consistent with rules adopted by the secretary.

10 (ii) Training must include chemical dependency training specific
11 to the duties of a designated crisis responder, including diagnosis
12 of substance abuse and dependence and assessment of risk associated
13 with substance use.

14 (c) The authority must develop a transition process for any
15 person who has been designated as a designated mental health
16 professional or a designated chemical dependency specialist before
17 April 1, 2018, to be converted to a designated crisis responder. The
18 behavioral health organizations shall provide training, as required
19 by the authority, to persons converting to designated crisis
20 responders, which must include both mental health and chemical
21 dependency training applicable to the designated crisis responder
22 role.

23 (2)(a) The authority must ensure that at least one sixteen-bed
24 secure detoxification facility is operational by April 1, 2018, and
25 that at least two sixteen-bed secure detoxification facilities are
26 operational by April 1, 2019.

27 (b) If, at any time during the implementation of secure
28 detoxification facility capacity, federal funding becomes unavailable
29 for federal match for services provided in secure detoxification
30 facilities, then the authority must cease any expansion of secure
31 detoxification facilities until further direction is provided by the
32 legislature.

33 **Sec. 63.** RCW 71.34.010 and 2018 c 201 s 5001 are each amended to
34 read as follows:

35 (1) It is the purpose of this chapter to assure that minors in
36 need of (~~mental~~) behavioral health care and treatment receive an
37 appropriate continuum of culturally relevant care and treatment,
38 including prevention and early intervention, self-directed care,
39 parent-directed care, and involuntary treatment. To facilitate the

1 continuum of care and treatment to minors in out-of-home placements,
2 all divisions of the authority and the department that provide
3 (~~mental~~) behavioral health services to minors shall jointly plan
4 and deliver those services.

5 (2) It is also the purpose of this chapter to protect the rights
6 of minors against needless hospitalization and deprivations of
7 liberty and to enable treatment decisions to be made in response to
8 clinical needs in accordance with sound professional judgment. The
9 (~~mental~~) behavioral health care and treatment providers shall
10 encourage the use of voluntary services and, whenever clinically
11 appropriate, the providers shall offer less restrictive alternatives
12 to inpatient treatment. Additionally, all (~~mental~~) behavioral
13 health care and treatment providers shall assure that minors' parents
14 are given an opportunity to participate in the treatment decisions
15 for their minor children. The (~~mental~~) behavioral health care and
16 treatment providers shall, to the extent possible, offer services
17 that involve minors' parents or family.

18 (3) (a) It is the intent of the legislature to enhance continuity
19 of care for minors with serious behavioral health disorders that can
20 be controlled or stabilized in a less restrictive alternative
21 commitment. Within the guidelines stated in *In re LaBelle*, 107 Wn.2d
22 196 (1986), the legislature intends to encourage appropriate
23 interventions at a point when there is the best opportunity to
24 restore the minor to or maintain satisfactory functioning.

25 (b) For minors with a prior history or pattern of repeated
26 hospitalizations or law enforcement interventions due to
27 decompensation, the consideration of prior behavioral health history
28 is particularly relevant in determining whether the minor would
29 receive, if released, such care as is essential for his or her health
30 or safety.

31 (c) Therefore, the legislature finds that for minors who are
32 currently under a commitment order, a prior history of decompensation
33 leading to repeated hospitalizations or law enforcement interventions
34 should be given great weight in determining whether a new less
35 restrictive alternative commitment should be ordered.

36 (4) It is also the purpose of this chapter to protect the health
37 and safety of minors suffering from behavioral health disorders and
38 to protect public safety through use of the parens patriae and police
39 powers of the state. Accordingly, when construing the requirements of
40 this chapter the court must focus on the merits of the petition,

1 except where requirements have been totally disregarded, as provided
2 in *In re C.W.*, 147 Wn.2d 259, 281 (2002). A presumption in favor of
3 deciding petitions on their merits furthers both public and private
4 interests because the mental and physical well-being of minors as
5 well as public safety may be implicated by the decision to release a
6 minor and discontinue his or her treatment.

7 (5) It is also the purpose of this chapter to assure the ability
8 of parents to exercise reasonable, compassionate care and control of
9 their minor children when there is a medical necessity for treatment
10 and without the requirement of filing a petition under this chapter.

11 **Sec. 64.** RCW 71.34.020 and 2018 c 201 s 5002 are each amended to
12 read as follows:

13 Unless the context clearly requires otherwise, the definitions in
14 this section apply throughout this chapter.

15 (1) "Alcoholism" means a disease, characterized by a dependency
16 on alcoholic beverages, loss of control over the amount and
17 circumstances of use, symptoms of tolerance, physiological or
18 psychological withdrawal, or both, if use is reduced or discontinued,
19 and impairment of health or disruption of social or economic
20 functioning.

21 (2) "Approved substance use disorder treatment program" means a
22 program for minors with substance use disorders provided by a
23 treatment program licensed or certified by the department of health
24 as meeting standards adopted under chapter 71.24 RCW.

25 (3) "Authority" means the Washington state health care authority.

26 (4) (~~"Chemical dependency" means:~~

27 ~~(a) Alcoholism;~~

28 ~~(b) Drug addiction; or~~

29 ~~(c) Dependence on alcohol and one or more other psychoactive~~
30 ~~chemicals, as the context requires.~~

31 ~~(5))~~ "Chemical dependency professional" means a person certified
32 as a chemical dependency professional by the department of health
33 under chapter 18.205 RCW.

34 ~~((6))~~ (5) "Child psychiatrist" means a person having a license
35 as a physician and surgeon in this state, who has had graduate
36 training in child psychiatry in a program approved by the American
37 Medical Association or the American Osteopathic Association, and who
38 is board eligible or board certified in child psychiatry.

39 ~~((7))~~ (6) "Children's mental health specialist" means:

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

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

8 ~~((8))~~ (7) "Commitment" means a determination by a judge or
9 court commissioner, made after a commitment hearing, that the minor
10 is in need of inpatient diagnosis, evaluation, or treatment or that
11 the minor is in need of less restrictive alternative treatment.

12 ~~((9))~~ (8) "Department" means the department of social and
13 health services.

14 ~~((10))~~ (9) "Designated crisis responder" means a person
15 designated by a behavioral health organization to perform the duties
16 specified in this chapter.

17 ~~((11))~~ (10) "Director" means the director of the authority.

18 ~~((12))~~ (11) "Drug addiction" means a disease, characterized by
19 a dependency on psychoactive chemicals, loss of control over the
20 amount and circumstances of use, symptoms of tolerance, physiological
21 or psychological withdrawal, or both, if use is reduced or
22 discontinued, and impairment of health or disruption of social or
23 economic functioning.

24 ~~((13))~~ (12) "Evaluation and treatment facility" means a public
25 or private facility or unit that is licensed or certified by the
26 department of health to provide emergency, inpatient, residential, or
27 outpatient mental health evaluation and treatment services for
28 minors. A physically separate and separately-operated portion of a
29 state hospital may be designated as an evaluation and treatment
30 facility for minors. A facility which is part of or operated by the
31 state or federal agency does not require licensure or certification.
32 No correctional institution or facility, juvenile court detention
33 facility, or jail may be an evaluation and treatment facility within
34 the meaning of this chapter.

35 ~~((14))~~ (13) "Evaluation and treatment program" means the total
36 system of services and facilities coordinated and approved by a
37 county or combination of counties for the evaluation and treatment of
38 minors under this chapter.

39 ~~((15))~~ (14) "Gravely disabled minor" means a minor who, as a
40 result of a ~~((mental))~~ behavioral health disorder(~~(, or as a result~~

1 ~~of the use of alcohol or other psychoactive chemicals)), (a) is in~~
2 danger of serious physical harm resulting from a failure to provide
3 for his or her essential human needs of health or safety, or (b)

4 manifests severe deterioration (~~(in routine functioning)~~) from safe
5 behavior evidenced by repeated and escalating loss of cognitive or
6 volitional control over his or her actions and is not receiving such
7 care as is essential for his or her health or safety.

8 ~~((16))~~ (15) "Inpatient treatment" means twenty-four-hour-per-
9 day mental health care provided within a general hospital,
10 psychiatric hospital, residential treatment facility licensed or
11 certified by the department of health as an evaluation and treatment
12 facility for minors, secure detoxification facility for minors, or
13 approved substance use disorder treatment program for minors.

14 ~~((17))~~ (16) "Intoxicated minor" means a minor whose mental or
15 physical functioning is substantially impaired as a result of the use
16 of alcohol or other psychoactive chemicals.

17 ~~((18))~~ (17) "Less restrictive alternative" or "less restrictive
18 setting" means outpatient treatment provided to a minor who is not
19 residing in a facility providing inpatient treatment as defined in
20 this chapter.

21 ~~((19))~~ (18) "Likelihood of serious harm" means (~~(either)~~):

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

34 (b) The minor has threatened the physical safety of another and
35 has a history of one or more violent acts.

36 ~~((20))~~ (19) "Medical necessity" for inpatient care means a
37 requested service which is reasonably calculated to: (a) Diagnose,
38 correct, cure, or alleviate a mental disorder or substance use
39 disorder; or (b) prevent the progression of a substance use disorder
40 that endangers life or causes suffering and pain, or results in

1 illness or infirmity or threatens to cause or aggravate a handicap,
2 or causes physical deformity or malfunction, and there is no adequate
3 less restrictive alternative available.

4 ~~((21))~~ (20) "Mental disorder" means any organic, mental, or
5 emotional impairment that has substantial adverse effects on an
6 individual's cognitive or volitional functions. The presence of
7 alcohol abuse, drug abuse, juvenile criminal history, antisocial
8 behavior, or intellectual disabilities alone is insufficient to
9 justify a finding of "mental disorder" within the meaning of this
10 section.

11 ~~((22))~~ (21) "Mental health professional" means a psychiatrist,
12 psychiatric advanced registered nurse practitioner, physician
13 assistant working with a supervising psychiatrist, psychologist,
14 psychiatric nurse, or social worker, and such other mental health
15 professionals as may be defined by rules adopted by the secretary of
16 the department of health under this chapter.

17 ~~((23))~~ (22) "Minor" means any person under the age of eighteen
18 years.

19 ~~((24))~~ (23) "Outpatient treatment" means any of the
20 nonresidential services mandated under chapter 71.24 RCW and provided
21 by licensed or certified service providers as identified by RCW
22 71.24.025.

23 ~~((25))~~ (24) "Parent" means:

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

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

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

38 ~~((27))~~ (26) "Physician assistant" means a person licensed as a
39 physician assistant under chapter 18.57A or 18.71A RCW.

1 ~~((28))~~ (27) "Professional person in charge" or "professional
2 person" means a physician, other mental health professional, or other
3 person empowered by an evaluation and treatment facility, secure
4 detoxification facility, or approved substance use disorder treatment
5 program with authority to make admission and discharge decisions on
6 behalf of that facility.

7 ~~((29))~~ (28) "Psychiatric nurse" means a registered nurse who
8 has experience in the direct treatment of persons who have a mental
9 illness or who are emotionally disturbed, such experience gained
10 under the supervision of a mental health professional.

11 ~~((30))~~ (29) "Psychiatrist" means a person having a license as a
12 physician in this state who has completed residency training in
13 psychiatry in a program approved by the American Medical Association
14 or the American Osteopathic Association, and is board eligible or
15 board certified in psychiatry.

16 ~~((31))~~ (30) "Psychologist" means a person licensed as a
17 psychologist under chapter 18.83 RCW.

18 ~~((32))~~ (31) "Public agency" means any evaluation and treatment
19 facility or institution, or hospital, or approved substance use
20 disorder treatment program that is conducted for, or includes a
21 distinct unit, floor, or ward conducted for, the care and treatment
22 of persons with mental illness, substance use disorders, or both
23 mental illness and substance use disorders if the agency is operated
24 directly by federal, state, county, or municipal government, or a
25 combination of such governments.

26 ~~((33))~~ (32) "Responsible other" means the minor, the minor's
27 parent or estate, or any other person legally responsible for support
28 of the minor.

29 ~~((34))~~ (33) "Secretary" means the secretary of the department
30 or secretary's designee.

31 ~~((35))~~ (34) "Secure detoxification facility" means a facility
32 operated by either a public or private agency or by the program of an
33 agency that:

34 (a) Provides for intoxicated minors:

35 (i) Evaluation and assessment, provided by certified chemical
36 dependency professionals;

37 (ii) Acute or subacute detoxification services; and

38 (iii) Discharge assistance provided by certified chemical
39 dependency professionals, including facilitating transitions to

1 appropriate voluntary or involuntary inpatient services or to less
2 restrictive alternatives as appropriate for the minor;

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

5 (c) Is licensed or certified as such by the department of health.

6 ~~((36))~~ (35) "Social worker" means a person with a master's or
7 further advanced degree from a social work educational program
8 accredited and approved as provided in RCW 18.320.010.

9 ~~((37))~~ (36) "Start of initial detention" means the time of
10 arrival of the minor at the first evaluation and treatment facility,
11 secure detoxification facility, or approved substance use disorder
12 treatment program offering inpatient treatment if the minor is being
13 involuntarily detained at the time. With regard to voluntary
14 patients, "start of initial detention" means the time at which the
15 minor gives notice of intent to leave under the provisions of this
16 chapter.

17 ~~((38))~~ (37) "Substance use disorder" means a cluster of
18 cognitive, behavioral, and physiological symptoms indicating that an
19 individual continues using the substance despite significant
20 substance-related problems. The diagnosis of a substance use disorder
21 is based on a pathological pattern of behaviors related to the use of
22 the substances.

23 (38) "Admission" or "admit" means a decision by a physician,
24 physician assistant, or psychiatric advanced registered nurse
25 practitioner that a minor should be examined or treated as a patient
26 in a hospital.

27 (39) "Antipsychotic medications" means that class of drugs
28 primarily used to treat serious manifestations of mental illness
29 associated with thought disorders, which includes, but is not limited
30 to, atypical antipsychotic medications.

31 (40) "Attending staff" means any person on the staff of a public
32 or private agency having responsibility for the care and treatment of
33 a minor patient.

34 (41) "Behavioral health disorder" means either a mental disorder
35 as defined in this section, a substance use disorder as defined in
36 this section, or a co-occurring mental disorder and substance use
37 disorder.

38 (42) "Conditional release" means a revocable modification of a
39 commitment, which may be revoked upon violation of any of its terms.

1 (43) "Crisis stabilization unit" means a short-term facility or a
2 portion of a facility licensed or certified by the department of
3 health under RCW 71.24.035, such as a residential treatment facility
4 or a hospital, which has been designed to assess, diagnose, and treat
5 individuals experiencing an acute crisis without the use of long-term
6 hospitalization.

7 (44) "Custody" means involuntary detention under the provisions
8 of this chapter or chapter 10.77 RCW, uninterrupted by any period of
9 unconditional release from commitment from a facility providing
10 involuntary care and treatment.

11 (45) "Detention" or "detain" means the lawful confinement of a
12 person, under the provisions of this chapter.

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

21 (47) "Developmental disability" has the same meaning as defined
22 in RCW 71A.10.020.

23 (48) "Discharge" means the termination of hospital medical
24 authority. The commitment may remain in place, be terminated, or be
25 amended by court order.

26 (49) "Habilitative services" means those services provided by
27 program personnel to assist minors in acquiring and maintaining life
28 skills and in raising their levels of physical, behavioral, social,
29 and vocational functioning. Habilitative services include education,
30 training for employment, and therapy.

31 (50) "Hearing" means any proceeding conducted in open court that
32 conforms to the requirements of section 99 of this act.

33 (51) "History of one or more violent acts" refers to the period
34 of time five years prior to the filing of a petition under this
35 chapter, excluding any time spent, but not any violent acts
36 committed, in a mental health facility, a long-term alcoholism or
37 drug treatment facility, or in confinement as a result of a criminal
38 conviction.

1 (52) "Individualized service plan" means a plan prepared by a
2 developmental disabilities professional with other professionals as a
3 team, for a person with developmental disabilities, which states:

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

6 (b) The conditions and strategies necessary to achieve the
7 purposes of habilitation;

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

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

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

13 (f) Where relevant in light of past criminal behavior and due
14 consideration for public safety, the criteria for proposed movement
15 to less-restrictive settings, criteria for proposed eventual
16 discharge or release, and a projected possible date for discharge or
17 release; and

18 (g) The type of residence immediately anticipated for the person
19 and possible future types of residences.

20 (53) "Judicial commitment" means a commitment by a court pursuant
21 to the provisions of this chapter.

22 (54) "Legal counsel" means attorneys and staff employed by county
23 prosecutor offices or the state attorney general acting in their
24 capacity as legal representatives of public behavioral health service
25 providers under RCW 71.05.130.

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

29 (56) "Medical clearance" means a physician or other health care
30 provider has determined that a person is medically stable and ready
31 for referral to the designated crisis responder.

32 (57) "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 (58) "Release" means legal termination of the commitment under
37 the provisions of this chapter.

38 (59) "Resource management services" has the meaning given in
39 chapter 71.24 RCW.

1 (60) "Severe deterioration from safe behavior" means that a
2 person will, if not treated, suffer or continue to suffer severe and
3 abnormal mental, emotional, or physical distress, and this distress
4 is associated with significant impairment of judgment, reason, or
5 behavior.

6 (61) "Therapeutic court personnel" means the staff of a mental
7 health court or other therapeutic court which has jurisdiction over
8 defendants who are dually diagnosed with mental disorders, including
9 court personnel, probation officers, a court monitor, prosecuting
10 attorney, or defense counsel acting within the scope of therapeutic
11 court duties.

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

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

32 (64) "Violent act" means behavior that resulted in homicide,
33 attempted suicide, injury, or substantial loss or damage to property.

34 (65) "Written order of apprehension" means an order of the court
35 for a peace officer to deliver the named minor in the order to a
36 facility or emergency room as determined by the designated crisis
37 responder. Such orders must be entered into the Washington crime
38 information center database.

1 **Sec. 65.** RCW 71.34.305 and 2016 sp.s. c 29 s 255 are each
2 amended to read as follows:

3 School district personnel who contact a (~~mental health or~~
4 ~~substance use~~) behavioral health disorder inpatient treatment
5 program or provider for the purpose of referring a student to
6 inpatient treatment shall provide the parents with notice of the
7 contact within forty-eight hours.

8 **Sec. 66.** RCW 71.34.310 and 1985 c 354 s 26 are each amended to
9 read as follows:

10 (1) The superior court has jurisdiction over proceedings under
11 this chapter.

12 (2) A record of all petitions and proceedings under this chapter
13 shall be maintained by the clerk of the superior court in the county
14 in which the petition or proceedings was initiated.

15 (3) Petitions for commitment shall be filed and venue for
16 hearings under this chapter shall be in the county in which the minor
17 is being detained. (~~The court may, for good cause, transfer the~~
18 ~~proceeding to the county of the minor's residence, or to the county~~
19 ~~in which the alleged conduct evidencing need for commitment occurred.~~
20 ~~If the county of detention is changed, subsequent petitions may be~~
21 ~~filed in the county in which the minor is detained without the~~
22 ~~necessity of a change of venue.))~~

23 NEW SECTION. **Sec. 67.** A new section is added to chapter 71.34
24 RCW to read as follows:

25 A peace officer may take or authorize a minor to be taken into
26 custody and immediately delivered to an appropriate triage facility,
27 crisis stabilization unit, evaluation and treatment facility, secure
28 detoxification facility, approved substance use disorder treatment
29 program, or the emergency department of a local hospital when he or
30 she has reasonable cause to believe that such minor is suffering from
31 a behavioral health disorder and presents an imminent likelihood of
32 serious harm or is gravely disabled. Until July 1, 2026, a peace
33 officer's delivery of a minor to a secure detoxification facility or
34 approved substance use disorder treatment program is subject to the
35 availability of a secure detoxification facility or approved
36 substance use disorder treatment program with adequate space for the
37 minor.

1 **Sec. 68.** RCW 71.34.355 and 2016 c 155 s 18 are each amended to
2 read as follows:

3 (1) Absent a risk to self or others, minors treated under this
4 chapter have the following rights, which shall be prominently posted
5 in the evaluation and treatment facility:

6 ~~((1))~~ (a) To wear their own clothes and to keep and use
7 personal possessions;

8 ~~((2))~~ (b) To keep and be allowed to spend a reasonable sum of
9 their own money for canteen expenses and small purchases;

10 ~~((3))~~ (c) To have individual storage space for private use;

11 ~~((4))~~ (d) To have visitors at reasonable times;

12 ~~((5))~~ (e) To have reasonable access to a telephone, both to
13 make and receive confidential calls;

14 ~~((6))~~ (f) To have ready access to letter-writing materials,
15 including stamps, and to send and receive uncensored correspondence
16 through the mails;

17 ~~((7))~~ (g) To discuss treatment plans and decisions with mental
18 health professionals;

19 ~~((8))~~ (h) To have the right to adequate care and individualized
20 treatment;

21 ~~((9))~~ (i) To not be denied access to treatment by spiritual
22 means through prayer in accordance with the tenets and practices of a
23 church or religious denomination in addition to the treatment
24 otherwise proposed;

25 (j) Not to consent to the administration of antipsychotic
26 medications beyond the hearing conducted pursuant to RCW 71.34.750 or
27 the performance of electroconvulsive treatment or surgery, except
28 emergency lifesaving surgery, upon him or her, ~~((and not to have~~
29 electro-convulsive treatment or nonemergency surgery in such
30 circumstance)) unless ordered by a court ~~((pursuant to a judicial~~
31 hearing in which the minor is present and represented by counsel, and
32 the court shall appoint a psychiatrist, physician assistant,
33 psychologist, psychiatric advanced registered nurse practitioner, or
34 physician designated by the minor or the minor's counsel to testify
35 on behalf of the minor)) under procedures described in RCW
36 71.05.217(1)(j). The minor's parent may exercise this right on the
37 minor's behalf, and must be informed of any impending treatment;

38 ~~((10))~~ (k) Not to have psychosurgery performed on him or her
39 under any circumstances.

1 (2) (a) Privileges between minors and physicians, physician
2 assistants, psychologists, or psychiatric advanced registered nurse
3 practitioners are deemed waived in proceedings under this chapter
4 relating to the administration of antipsychotic medications. As to
5 other proceedings under this chapter, the privileges are waived when
6 a court of competent jurisdiction in its discretion determines that
7 such waiver is necessary to protect either the detained minor or the
8 public.

9 (b) The waiver of a privilege under this section is limited to
10 records or testimony relevant to evaluation of the detained minor for
11 purposes of a proceeding under this chapter. Upon motion by the
12 detained minor or on its own motion, the court shall examine a record
13 or testimony sought by a petitioner to determine whether it is within
14 the scope of the waiver.

15 (c) The record maker may not be required to testify in order to
16 introduce medical or psychological records of the detained minor so
17 long as the requirements of RCW 5.45.020 are met except that portions
18 of the record which contain opinions as to the detained minor's
19 mental state must be deleted from such records unless the person
20 making such conclusions is available for cross-examination.

21 (3) No minor may be presumed incompetent as a consequence of
22 receiving an evaluation or voluntary or involuntary treatment for a
23 mental disorder or substance use disorder, under this chapter or any
24 prior laws of this state dealing with mental illness or substance use
25 disorders.

26 NEW SECTION. Sec. 69. A new section is added to chapter 71.34
27 RCW to read as follows:

28 At the time a minor is involuntarily admitted to an evaluation
29 and treatment facility, secure detoxification facility, or approved
30 substance use disorder treatment program, the professional person in
31 charge or his or her designee shall take reasonable precautions to
32 inventory and safeguard the personal property of the detained minor.
33 A copy of the inventory, signed by the staff member making it, must
34 be given to the detained minor and must, in addition, be open to
35 inspection to any responsible relative, subject to limitations, if
36 any, specifically imposed by the detained minor. For purposes of this
37 section, "responsible relative" includes the guardian, conservator,
38 attorney, parent, or adult brother or sister of the minor. The

1 facility shall not disclose the contents of the inventory to any
2 other person without the consent of the minor or order of the court.

3 **Sec. 70.** RCW 71.34.365 and 2018 c 201 s 5004 are each amended to
4 read as follows:

5 (1) If a minor is not accepted for admission or is released by an
6 inpatient evaluation and treatment facility, the facility shall
7 release the minor to the custody of the minor's parent or other
8 responsible person. If not otherwise available, the facility shall
9 furnish transportation for the minor to the minor's residence or
10 other appropriate place. If the minor has been arrested, the
11 evaluation and treatment facility, secure detoxification facility, or
12 approved substance use disorder treatment program shall detain the
13 minor for not more than eight hours at the request of the peace
14 officer. The program or facility shall make reasonable attempts to
15 contact the requesting peace officer during this time to inform the
16 peace officer that the minor is not approved for admission or is
17 being released in order to enable a peace officer to return to the
18 facility and take the minor back into custody.

19 (2) If the minor is released to someone other than the minor's
20 parent, the facility shall make every effort to notify the minor's
21 parent of the release as soon as possible.

22 (3) No indigent minor may be released to less restrictive
23 alternative treatment or setting or discharged from inpatient
24 treatment without suitable clothing, and the authority shall furnish
25 this clothing. As funds are available, the director may provide
26 necessary funds for the immediate welfare of indigent minors upon
27 discharge or release to less restrictive alternative treatment.

28 **Sec. 71.** RCW 71.34.410 and 2016 sp.s. c 29 s 259 are each
29 amended to read as follows:

30 (1) No public or private agency or governmental entity, nor
31 officer of a public or private agency, nor the superintendent, or
32 professional person in charge, his or her professional designee or
33 attending staff of any such agency, nor any public official
34 performing functions necessary to the administration of this chapter,
35 nor peace officer responsible for detaining a ((person)) minor under
36 this chapter, nor any designated crisis responder, nor professional
37 person, nor evaluation and treatment facility, nor secure
38 detoxification facility, nor approved substance use disorder

1 treatment program shall be civilly or criminally liable for
2 performing actions authorized in this chapter with regard to the
3 decision of whether to admit, release, administer antipsychotic
4 medications, or detain a (~~person~~) minor for evaluation and
5 treatment: PROVIDED, That such duties were performed in good faith
6 and without gross negligence.

7 (2) This section does not relieve a person from giving the
8 required duty to warn or to take reasonable precautions to provide
9 protection from violent behavior where the minor has communicated an
10 actual threat of physical violence against a reasonably identifiable
11 victim or victims. The duty to warn or to take reasonable precautions
12 to provide protection from violent behavior is discharged if
13 reasonable efforts are made to communicate the threat to the victim
14 or victims and to law enforcement personnel.

15 **Sec. 72.** RCW 71.34.420 and 2018 c 201 s 5012 are each amended to
16 read as follows:

17 (1) The authority may use a single bed certification process as
18 outlined in rule to provide additional treatment capacity for a minor
19 suffering from a (~~mental~~) behavioral health disorder for whom an
20 evaluation and treatment facility, secure detoxification facility, or
21 approved substance use disorder treatment program bed is not
22 available. The facility that is the proposed site of the single bed
23 certification must be a facility that is willing and able to provide
24 the person with timely and appropriate treatment either directly or
25 by arrangement with other public or private agencies.

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

28 (3) A designated crisis responder who submits an application for
29 a single bed certification for treatment at a facility that is
30 willing and able to provide timely and appropriate (~~mental~~)
31 behavioral health treatment in good faith belief that the single bed
32 certification is appropriate may presume that the single bed
33 certification will be approved for the purpose of completing the
34 detention process and responding to other emergency calls.

35 (4) The authority may adopt rules implementing this section and
36 continue to enforce rules it has already adopted except where
37 inconsistent with this section.

1 NEW SECTION. **Sec. 73.** A new section is added to chapter 71.34
2 RCW to read as follows:

3 Nothing in this chapter shall prohibit the professional person in
4 charge of a treatment facility, or his or her professional designee,
5 from permitting a minor detained for intensive treatment to leave the
6 facility for prescribed periods during the term of the minor's
7 detention, under such conditions as may be appropriate.

8 **Sec. 74.** RCW 71.34.500 and 2016 sp.s. c 29 s 261 are each
9 amended to read as follows:

10 (1) A minor thirteen years or older may admit himself or herself
11 to an evaluation and treatment facility for inpatient mental health
12 treatment or an approved substance use disorder treatment program for
13 inpatient substance use disorder treatment without parental consent.
14 The admission shall occur only if the professional person in charge
15 of the facility concurs with the need for inpatient treatment.
16 Parental authorization, or authorization from a person who may
17 consent on behalf of the minor pursuant to RCW 7.70.065, is required
18 for inpatient treatment of a minor under the age of thirteen.

19 (2) When, in the judgment of the professional person in charge of
20 an evaluation and treatment facility or approved substance use
21 disorder treatment program, there is reason to believe that a minor
22 is in need of inpatient treatment because of a (~~mental disorder or~~
23 ~~substance use~~) behavioral health disorder, and the facility provides
24 the type of evaluation and treatment needed by the minor, and it is
25 not feasible to treat the minor in any less restrictive setting or
26 the minor's home, the minor may be admitted to the facility.

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

31 **Sec. 75.** RCW 71.34.600 and 2018 c 201 s 5013 are each amended to
32 read as follows:

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

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

1 (b) A secure detoxification facility or approved substance use
2 disorder treatment program and request that a substance use disorder
3 assessment be conducted by a professional person to determine whether
4 the minor has a substance use disorder and is in need of inpatient
5 treatment.

6 (2) The consent of the minor is not required for admission,
7 evaluation, and treatment if ((the)) a parent ((brings the minor to
8 the facility)) provides consent.

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

24 (4) No provider is obligated to provide treatment to a minor
25 under the provisions of this section except that no provider may
26 refuse to treat a minor under the provisions of this section solely
27 on the basis that the minor has not consented to the treatment. No
28 provider may admit a minor to treatment under this section unless it
29 is medically necessary.

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

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

35 ((~~(7) For the purposes of this section "professional person"~~
36 ~~means "professional person" as defined in RCW 71.05.020.~~))

37 **Sec. 76.** RCW 71.34.600 and 2018 c 201 s 5013 are each amended to
38 read as follows:

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

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

7 (b) A secure detoxification facility or approved substance use
8 disorder treatment program and request that a substance use disorder
9 assessment be conducted by a professional person to determine whether
10 the minor has a substance use disorder and is in need of inpatient
11 treatment.

12 (2) The consent of the minor is not required for admission,
13 evaluation, and treatment if ((the)) a parent ((brings the minor to
14 the facility)) provides consent.

15 (3) An appropriately trained professional person may evaluate
16 whether the minor has a ((mental disorder or has a substance use))
17 behavioral health disorder. The evaluation shall be completed within
18 twenty-four hours of the time the minor was brought to the facility,
19 unless the professional person determines that the condition of the
20 minor necessitates additional time for evaluation. In no event shall
21 a minor be held longer than ((seventy-two hours)) five days for
22 evaluation. If, in the judgment of the professional person, it is
23 determined it is a medical necessity for the minor to receive
24 inpatient treatment, the minor may be held for treatment. The
25 facility shall limit treatment to that which the professional person
26 determines is medically necessary to stabilize the minor's condition
27 until the evaluation has been completed. Within twenty-four hours of
28 completion of the evaluation, the professional person shall notify
29 the authority if the child is held for treatment and of the date of
30 admission.

31 (4) No provider is obligated to provide treatment to a minor
32 under the provisions of this section except that no provider may
33 refuse to treat a minor under the provisions of this section solely
34 on the basis that the minor has not consented to the treatment. No
35 provider may admit a minor to treatment under this section unless it
36 is medically necessary.

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

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

4 (~~((7) For the purposes of this section "professional person"~~
5 ~~means "professional person" as defined in RCW 71.05.020.))~~)

6 **Sec. 77.** RCW 71.34.650 and 2016 sp.s. c 29 s 265 are each
7 amended to read as follows:

8 (1) A parent may bring, or authorize the bringing of, his or her
9 minor child to(~~(÷~~

10 ~~(a))~~) a provider of outpatient (~~(mental)~~) behavioral health
11 treatment and request that an appropriately trained professional
12 person examine the minor to determine whether the minor has a
13 (~~(mental)~~) behavioral health disorder and is in need of outpatient
14 treatment(~~(÷ or~~

15 ~~(b) A provider of outpatient substance use disorder treatment and~~
16 ~~request that an appropriately trained professional person examine the~~
17 ~~minor to determine whether the minor has a substance use disorder and~~
18 ~~is in need of outpatient treatment)).~~

19 (2) The consent of the minor is not required for evaluation if
20 (~~(the)~~) a parent (~~(brings the minor to the provider)~~) provides
21 consent.

22 (3) The professional person may evaluate whether the minor has a
23 (~~(mental disorder or substance use)~~) behavioral health disorder and
24 is in need of outpatient treatment.

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

28 **Sec. 78.** RCW 71.34.700 and 2016 sp.s. c 29 s 267 are each
29 amended to read as follows:

30 (1) If a minor, thirteen years or older, is brought to an
31 evaluation and treatment facility, secure detoxification facility
32 with available space, approved substance use disorder treatment
33 program with available space, or hospital emergency room for
34 immediate (~~(mental)~~) behavioral health services, the professional
35 person in charge of the facility shall evaluate the minor's
36 (~~(mental)~~) condition, determine whether the minor suffers from a
37 (~~(mental)~~) behavioral health disorder, and whether the minor is in
38 need of immediate inpatient treatment.

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

8 ~~(3))~~ If it is determined under subsection (1) ~~((or (2)))~~ of this
9 section that the minor suffers from a ~~((mental disorder or substance~~
10 ~~use))~~ behavioral health disorder, inpatient treatment is required,
11 the minor is unwilling to consent to voluntary admission, and the
12 professional person believes that the minor meets the criteria for
13 initial detention ~~((set forth herein))~~, the facility may detain or
14 arrange for the detention of the minor for up to twelve hours, not
15 including time periods prior to medical clearance, in order to enable
16 a designated crisis responder to evaluate the minor and commence
17 initial detention proceedings under the provisions of this chapter.

18 (3) Dismissal of a commitment petition is not the appropriate
19 remedy for a violation of the timeliness requirements of this
20 section, based on the purpose of this chapter under RCW 71.34.010,
21 except in the few cases where the facility staff or the designated
22 crisis responder have totally disregarded the requirements of this
23 section.

24 **Sec. 79.** RCW 71.34.700 and 2016 sp.s. c 29 s 268 are each
25 amended to read as follows:

26 (1) If a minor, thirteen years or older, is brought to an
27 evaluation and treatment facility, secure detoxification facility,
28 approved substance use disorder treatment program, or hospital
29 emergency room for immediate ~~((mental))~~ behavioral health services,
30 the professional person in charge of the facility shall evaluate the
31 minor's ~~((mental))~~ condition, determine whether the minor suffers
32 from a ~~((mental))~~ behavioral health disorder, and whether the minor
33 is in need of immediate inpatient treatment.

34 (2) ~~((If a minor, thirteen years or older, is brought to a secure~~
35 ~~detoxification facility or a hospital emergency room for immediate~~
36 ~~substance use disorder treatment, the professional person in charge~~
37 ~~of the facility shall evaluate the minor's condition, determine~~
38 ~~whether the minor suffers from substance use disorder, and whether~~
39 ~~the minor is in need of immediate inpatient treatment.~~

1 ~~(3))~~) If it is determined under subsection (1) (~~(or (2))~~) of this
2 section that the minor suffers from a (~~mental disorder or substance~~
3 ~~use~~) behavioral health disorder, inpatient treatment is required,
4 the minor is unwilling to consent to voluntary admission, and the
5 professional person believes that the minor meets the criteria for
6 initial detention (~~(set forth herein)~~), the facility may detain or
7 arrange for the detention of the minor for up to twelve hours, not
8 including time periods prior to medical clearance, in order to enable
9 a designated crisis responder to evaluate the minor and commence
10 initial detention proceedings under the provisions of this chapter.

11 (3) Dismissal of a commitment petition is not the appropriate
12 remedy for a violation of the timeliness requirements of this
13 section, based on the purpose of this chapter under RCW 71.34.010,
14 except in the few cases where the facility staff or the designated
15 crisis responder have totally disregarded the requirements of this
16 section.

17 NEW SECTION. Sec. 80. A new section is added to chapter 71.34
18 RCW to read as follows:

19 (1) Whenever a designated crisis responder or professional person
20 is conducting an evaluation under this chapter, the designated crisis
21 responder or professional person must consider all reasonably
22 available information from credible witnesses and records regarding:

23 (a) Historical behavior, including history of one or more violent
24 acts; and

25 (b) Prior commitments under this chapter.

26 (2) Credible witnesses may include family members, landlords,
27 neighbors, or others with significant contact and history of
28 involvement with the minor. If the designated crisis responder relies
29 upon information from a credible witness in reaching his or her
30 decision to detain the minor, then he or she must provide contact
31 information for any such witness to the prosecutor. The designated
32 crisis responder or prosecutor shall provide notice of the date,
33 time, and location of the probable cause hearing to such a witness.

34 (3) Symptoms and behavior of the minor which standing alone would
35 not justify civil commitment may support a finding of grave
36 disability or likelihood of serious harm, when:

37 (a) Such symptoms or behavior are closely associated with
38 symptoms or behavior which preceded and led to a past incident of

1 involuntary hospitalization, severe deterioration from safe behavior,
2 or one or more violent acts;

3 (b) These symptoms or behavior represent a marked and concerning
4 change in the baseline behavior of the minor; and

5 (c) Without treatment, the continued deterioration of the minor
6 is probable.

7 **Sec. 81.** RCW 71.34.710 and 2016 sp.s. c 29 s 269 are each
8 amended to read as follows:

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

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

32 (b) ~~If ((the minor is not taken into custody for evaluation and~~
33 ~~treatment, the parent who has custody of the minor may seek review of~~
34 ~~that decision made by the designated crisis responder in court. The~~
35 ~~parent shall file notice with the court and provide a copy of the~~
36 ~~designated crisis responder's report or notes))~~ a designated crisis
37 responder decides not to detain a minor for evaluation and treatment
38 under RCW 71.34.700(2), or forty-eight hours have elapsed since a
39 designated crisis responder received a request for investigation and

1 the designated crisis responder has not taken action to have the
2 minor detained, an immediate family member or guardian or conservator
3 of the minor may petition the superior court for the minor's
4 detention using the procedures under RCW 71.05.201 and 71.05.203;
5 however, when the court enters an order of initial detention, except
6 as otherwise expressly stated in this chapter, all procedures must be
7 followed as if the order has been entered under RCW 71.34.710(1)(a).

8 (2)(a) Within twelve hours of the minor's arrival at the
9 evaluation and treatment facility, secure detoxification facility, or
10 approved substance use disorder treatment program, the designated
11 crisis responder shall serve on the minor a copy of the petition for
12 initial detention, notice of initial detention, and statement of
13 rights. The designated crisis responder shall file with the court on
14 the next judicial day following the initial detention the original
15 petition for initial detention, notice of initial detention, and
16 statement of rights along with an affidavit of service. The
17 designated crisis responder shall commence service of the petition
18 for initial detention and notice of the initial detention on the
19 minor's parent and the minor's attorney as soon as possible following
20 the initial detention.

21 (b) If the minor is involuntarily detained at an evaluation and
22 treatment facility, secure detoxification facility, or approved
23 substance use disorder treatment program in a different county from
24 where the minor was initially detained, the facility or program may
25 serve the minor, notify the minor's parents and the minor's attorney,
26 and file with the court on the next judicial day following the
27 initial detention the original petition for initial detention, notice
28 of initial detention, and statement of rights along with an affidavit
29 of service when filing with the court at the request of the
30 designated crisis responder.

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

39 (b) The minor shall be advised that he or she has a right to
40 communicate immediately with an attorney and that he or she has a

1 right to have an attorney appointed to represent him or her before
2 and at the hearing if the minor is indigent.

3 (4) Subject to subsection (5) of this section, whenever the
4 designated crisis responder petitions for detention of a minor under
5 this chapter, an evaluation and treatment facility, secure
6 detoxification facility, or approved substance use disorder treatment
7 program providing seventy-two hour evaluation and treatment must
8 immediately accept on a provisional basis the petition and the
9 person. Within twenty-four hours of the minor's arrival, the facility
10 must evaluate the minor's condition and either admit or release the
11 minor in accordance with this chapter.

12 (5) A designated crisis responder may not petition for detention
13 of a minor to a secure detoxification facility or approved substance
14 use disorder treatment program unless there is a secure
15 detoxification facility or approved substance use disorder treatment
16 program available and that has adequate space for the minor.

17 (6) If a minor is not approved for admission by the inpatient
18 evaluation and treatment facility, secure detoxification facility, or
19 approved substance use disorder treatment program, the facility shall
20 make such recommendations and referrals for further care and
21 treatment of the minor as necessary.

22 (7) Dismissal of a commitment petition is not the appropriate
23 remedy for a violation of the timeliness requirements of this
24 section, based on the purpose of this chapter under RCW 71.34.010,
25 except in the few cases where the facility staff or the designated
26 crisis responder have totally disregarded the requirements of this
27 section.

28 **Sec. 82.** RCW 71.34.710 and 2016 sp.s. c 29 s 269 are each
29 amended to read as follows:

30 (1) (a) (~~((i))~~) When a designated crisis responder receives
31 information that a minor, thirteen years or older, as a result of a
32 (~~(mental)~~) behavioral health disorder presents a likelihood of
33 serious harm or is gravely disabled, has investigated the specific
34 facts alleged and of the credibility of the person or persons
35 providing the information, and has determined that voluntary
36 admission for inpatient treatment is not possible, the designated
37 crisis responder may take the minor, or cause the minor to be taken,
38 into custody and transported to an evaluation and treatment facility,

1 secure detoxification facility, or approved substance use disorder
2 treatment program providing inpatient treatment.

3 ~~((ii) When a designated crisis responder receives information~~
4 ~~that a minor, thirteen years or older, as a result of substance use~~
5 ~~disorder presents a likelihood of serious harm or is gravely~~
6 ~~disabled, has investigated the specific facts alleged and of the~~
7 ~~credibility of the person or persons providing the information, and~~
8 ~~has determined that voluntary admission for inpatient treatment is~~
9 ~~not possible, the designated crisis responder may take the minor, or~~
10 ~~cause the minor to be taken, into custody and transported to a secure~~
11 ~~detoxification facility or approved substance use disorder treatment~~
12 ~~program, if))~~ A secure detoxification facility or approved substance
13 use disorder treatment program ~~((is))~~ must be available and ~~((has))~~
14 have adequate space for the minor.

15 (b) If ~~((the minor is not taken into custody for evaluation and~~
16 ~~treatment, the parent who has custody of the minor may seek review of~~
17 ~~that decision made by the designated crisis responder in court. The~~
18 ~~parent shall file notice with the court and provide a copy of the~~
19 ~~designated crisis responder's report or notes))~~ a designated crisis
20 responder decides not to detain a minor for evaluation and treatment
21 under RCW 71.34.700(2), or forty-eight hours have elapsed since a
22 designated crisis responder received a request for investigation and
23 the designated crisis responder has not taken action to have the
24 minor detained, an immediate family member or guardian or conservator
25 of the minor may petition the superior court for the minor's
26 detention using the procedures under RCW 71.05.201 and 71.05.203;
27 however, when the court enters an order of initial detention, except
28 as otherwise expressly stated in this chapter, all procedures must be
29 followed as if the order has been entered under RCW 71.34.710(1)(a).

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

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

3 (b) If the minor is involuntarily detained at an evaluation and
4 treatment facility, secure detoxification facility, or approved
5 substance use disorder treatment program in a different county from
6 where the minor was initially detained, the facility or program may
7 serve the minor, notify the minor's parents and the minor's attorney,
8 and file with the court on the next judicial day following the
9 initial detention the original petition for initial detention, notice
10 of initial detention, and statement of rights along with an affidavit
11 of service when filing with the court at the request of the
12 designated crisis responder.

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

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

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

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

1 approved substance use disorder treatment program, the facility shall
2 make such recommendations and referrals for further care and
3 treatment of the minor as necessary.

4 (7) Dismissal of a commitment petition is not the appropriate
5 remedy for a violation of the timeliness requirements of this
6 section, based on the purpose of this chapter under RCW 71.34.010,
7 except in the few cases where the facility staff or the designated
8 crisis responder have totally disregarded the requirements of this
9 section.

10 **Sec. 83.** RCW 71.34.710 and 2016 sp.s. c 29 s 270 are each
11 amended to read as follows:

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

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

33 (b) If ~~((the minor is not taken into custody for evaluation and~~
34 ~~treatment, the parent who has custody of the minor may seek review of~~
35 ~~that decision made by the designated crisis responder in court. The~~
36 ~~parent shall file notice with the court and provide a copy of the~~
37 ~~designated crisis responder's report or notes))~~ a designated crisis
38 responder decides not to detain a minor for evaluation and treatment
39 under RCW 71.34.700(2), or forty-eight hours have elapsed since a

1 designated crisis responder received a request for investigation and
2 the designated crisis responder has not taken action to have the
3 minor detained, an immediate family member or guardian or conservator
4 of the minor may petition the superior court for the minor's
5 detention using the procedures under RCW 71.05.201 and 71.05.203;
6 however, when the court enters an order of initial detention, except
7 as otherwise expressly stated in this chapter, all procedures must be
8 followed as if the order has been entered under RCW 71.34.710(1)(a).

9 (2)(a) Within twelve hours of the minor's arrival at the
10 evaluation and treatment facility, secure detoxification facility, or
11 approved substance use disorder treatment program, the designated
12 crisis responder shall serve on the minor a copy of the petition for
13 initial detention, notice of initial detention, and statement of
14 rights. The designated crisis responder shall file with the court on
15 the next judicial day following the initial detention the original
16 petition for initial detention, notice of initial detention, and
17 statement of rights along with an affidavit of service. The
18 designated crisis responder shall commence service of the petition
19 for initial detention and notice of the initial detention on the
20 minor's parent and the minor's attorney as soon as possible following
21 the initial detention.

22 (b) If the minor is involuntarily detained at an evaluation and
23 treatment facility, secure detoxification facility, or approved
24 substance use disorder treatment program in a different county from
25 where the minor was initially detained, the facility or program may
26 serve the minor, notify the minor's parents and the minor's attorney,
27 and file with the court on the next judicial day following the
28 initial detention the original petition for initial detention, notice
29 of initial detention, and statement of rights along with an affidavit
30 of service when filing with the court at the request of the
31 designated crisis responder.

32 (3)(a) At the time of initial detention, the designated crisis
33 responder shall advise the minor both orally and in writing that if
34 admitted to the evaluation and treatment facility, secure
35 detoxification facility, or approved substance use disorder treatment
36 program for inpatient treatment, a commitment hearing shall be held
37 within (~~seventy-two hours~~) five days of the minor's provisional
38 acceptance to determine whether probable cause exists to commit the
39 minor for further treatment.

1 **(b)** The minor shall be advised that he or she has a right to
2 communicate immediately with an attorney and that he or she has a
3 right to have an attorney appointed to represent him or her before
4 and at the hearing if the minor is indigent.

5 (4) Whenever the designated crisis responder petitions for
6 detention of a minor under this chapter, an evaluation and treatment
7 facility, secure detoxification facility, or approved substance use
8 disorder treatment program providing (~~seventy-two hour~~) five-day
9 evaluation and treatment must immediately accept on a provisional
10 basis the petition and the person. Within twenty-four hours of the
11 minor's arrival, the facility must evaluate the minor's condition and
12 either admit or release the minor in accordance with this chapter.

13 (5) If a minor is not approved for admission by the inpatient
14 evaluation and treatment facility, secure detoxification facility, or
15 approved substance use disorder treatment program, the facility shall
16 make such recommendations and referrals for further care and
17 treatment of the minor as necessary.

18 (6) Dismissal of a commitment petition is not the appropriate
19 remedy for a violation of the timeliness requirements of this
20 section, based on the purpose of this chapter under RCW 71.34.010,
21 except in the few cases where the facility staff or the designated
22 crisis responder have totally disregarded the requirements of this
23 section.

24 **Sec. 84.** RCW 71.34.720 and 2018 c 201 s 5017 are each amended to
25 read as follows:

26 (1) Each minor approved by the facility for inpatient admission
27 shall be examined and evaluated by a children's mental health
28 specialist, for minors admitted as a result of a mental disorder, or
29 by a chemical dependency professional, for minors admitted as a
30 result of a substance use disorder, as to the child's mental
31 condition and by a physician, physician assistant, or psychiatric
32 advanced registered nurse practitioner as to the child's physical
33 condition within twenty-four hours of admission. Reasonable measures
34 shall be taken to ensure medical treatment is provided for any
35 condition requiring immediate medical attention.

36 (2) If, after examination and evaluation, the children's mental
37 health specialist or substance use disorder specialist and the
38 physician, physician assistant, or psychiatric advanced registered
39 nurse practitioner determine that the initial needs of the minor, if

1 detained to an evaluation and treatment facility, would be better
2 served by placement in a substance use disorder treatment program or,
3 if detained to a secure detoxification facility or approved substance
4 use disorder treatment program, would be better served in an
5 evaluation and treatment facility, then the minor shall be referred
6 to the more appropriate placement; however a minor may only be
7 referred to a secure detoxification facility or approved substance
8 use disorder treatment program if there is a secure detoxification
9 facility or approved substance use disorder treatment program
10 available and that has adequate space for the minor.

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

13 (4) During the initial seventy-two hour treatment period, the
14 minor has a right to associate or receive communications from parents
15 or others unless the professional person in charge determines that
16 such communication would be seriously detrimental to the minor's
17 condition or treatment and so indicates in the minor's clinical
18 record, and notifies the minor's parents of this determination. (~~IF~~
19 ~~no event may the minor~~) A minor must not be denied the opportunity
20 to consult an attorney unless there is an immediate risk of harm to
21 the minor or others.

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

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

33 **Sec. 85.** RCW 71.34.720 and 2018 c 201 s 5017 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 substance use disorder treatment program or,
12 if detained to a secure detoxification facility or approved substance
13 use disorder treatment program, would be better served in an
14 evaluation and treatment facility, then the minor shall be referred
15 to the more appropriate placement; however a minor may only be
16 referred to a secure detoxification facility or approved substance
17 use disorder treatment program if there is a secure detoxification
18 facility or approved substance use disorder treatment program
19 available and that has adequate space for the minor.

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)~~) five-day treatment
23 period, the minor has a right to associate or receive communications
24 from parents or others unless the professional person in charge
25 determines that such communication would be seriously detrimental to
26 the minor's condition or treatment and so indicates in the minor's
27 clinical record, and notifies the minor's parents of this
28 determination. (~~(In no event may the minor)~~) A minor must not be
29 denied the opportunity to consult an attorney unless there is an
30 immediate risk of harm to the minor or others.

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

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

3 **Sec. 86.** RCW 71.34.720 and 2018 c 201 s 5018 are each amended to
4 read as follows:

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

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

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

27 (4) During the initial (~~(seventy-two hour)~~) five-day treatment
28 period, the minor has a right to associate or receive communications
29 from parents or others unless the professional person in charge
30 determines that such communication would be seriously detrimental to
31 the minor's condition or treatment and so indicates in the minor's
32 clinical record, and notifies the minor's parents of this
33 determination. (~~(In no event may the minor)~~) A minor must not be
34 denied the opportunity to consult an attorney unless there is an
35 immediate risk of harm to the minor or others.

36 (5) If the evaluation and treatment facility, secure
37 detoxification facility, or approved substance use disorder treatment
38 program admits the minor, it may detain the minor for evaluation and
39 treatment for a period not to exceed (~~(seventy-two hours)~~) five days

1 from the time of provisional acceptance. The computation of such
2 (~~seventy-two hour~~) five-day period shall exclude Saturdays,
3 Sundays, and holidays. This initial treatment period shall not exceed
4 (~~seventy-two hours~~) five days except when an application for
5 voluntary inpatient treatment is received or a petition for fourteen-
6 day commitment is filed.

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

9 **Sec. 87.** RCW 71.34.730 and 2016 sp.s. c 29 s 273 and 2016 c 155
10 s 20 are each reenacted and amended to read as follows:

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

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

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

28 (a) A petition for a fourteen-day commitment shall be signed by:
29 (i) Two physicians; (ii) one physician and a mental health
30 professional; (iii) one physician assistant and a mental health
31 professional; or (iv) one psychiatric advanced registered nurse
32 practitioner and a mental health professional. The person signing the
33 petition must have examined the minor, and the petition must contain
34 the following:

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

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

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

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

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

10 (F) If the petition is for mental health treatment, a statement
11 that the minor has been advised of the loss of firearm rights if
12 involuntarily committed;

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

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

17 (b) A copy of the petition shall be personally ~~((delivered to))~~
18 served on the minor by the petitioner or petitioner's designee. A
19 copy of the petition shall be ~~((sent))~~ provided to the minor's
20 attorney and the minor's parent.

21 **Sec. 88.** RCW 71.34.730 and 2016 sp.s. c 29 s 273 and 2016 c 155
22 s 20 are each reenacted and amended to read as follows:

23 (1) The professional person in charge of an evaluation and
24 treatment facility, secure detoxification facility, or approved
25 substance use disorder treatment program where a minor has been
26 admitted involuntarily for the initial ~~((seventy-two hour))~~ five-day
27 treatment period under this chapter may petition to have a minor
28 committed to an evaluation and treatment facility ~~((or, in the case~~
29 ~~of a minor with a substance use disorder, to))~~, a secure
30 detoxification facility, or an approved substance use disorder
31 treatment program for fourteen-day diagnosis, evaluation, and
32 treatment.

33 If the professional person in charge of the facility does not
34 petition to have the minor committed, the parent who has custody of
35 the minor may seek review of that decision in court. The parent shall
36 file notice with the court and provide a copy of the treatment and
37 evaluation facility's report.

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

4 (a) A petition for a fourteen-day commitment shall be signed by:
5 (i) Two physicians; (ii) one physician and a mental health
6 professional; (iii) one physician assistant and a mental health
7 professional; or (iv) one psychiatric advanced registered nurse
8 practitioner and a mental health professional. The person signing the
9 petition must have examined the minor, and the petition must contain
10 the following:

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

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

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

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

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

23 (F) If the petition is for mental health treatment, a statement
24 that the minor has been advised of the loss of firearm rights if
25 involuntarily committed;

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

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

30 (b) A copy of the petition shall be personally (~~delivered to~~)
31 served on the minor by the petitioner or petitioner's designee. A
32 copy of the petition shall be (~~sent~~) provided to the minor's
33 attorney and the minor's parent.

34 NEW SECTION. **Sec. 89.** A new section is added to chapter 71.34
35 RCW to read as follows:

36 (1) In any proceeding for involuntary commitment under this
37 chapter, the court may continue or postpone such proceeding for a
38 reasonable time on motion of the respondent for good cause, or on
39 motion of the prosecuting attorney or the attorney general if:

1 (a) The respondent expressly consents to a continuance or delay
2 and there is a showing of good cause; or

3 (b) Such continuance is required in the proper administration of
4 justice and the respondent will not be substantially prejudiced in
5 the presentation of the respondent's case.

6 (2) The court may on its own motion continue the case when
7 required in due administration of justice and when the respondent
8 will not be substantially prejudiced in the presentation of the
9 respondent's case.

10 (3) The court shall state in any order of continuance or
11 postponement the grounds for the continuance or postponement and
12 whether detention will be extended.

13 **Sec. 90.** RCW 71.34.740 and 2016 sp.s. c 29 s 274 are each
14 amended to read as follows:

15 (1) A commitment hearing shall be held within seventy-two hours
16 of the minor's admission, excluding Saturday, Sunday, and holidays,
17 unless a continuance is (~~requested by the minor or the minor's~~
18 ~~attorney~~) ordered under section 89 of this act.

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

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

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

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

30 (6) At the commitment hearing, the minor shall have the following
31 rights:

32 (a) To be represented by an attorney;

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

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

35 (7) If the hearing is for commitment for mental health treatment,
36 the court at the time of the commitment hearing and before an order
37 of commitment is entered shall inform the minor both orally and in
38 writing that the failure to make a good faith effort to seek
39 voluntary treatment as provided in RCW 71.34.730 will result in the

1 loss of his or her firearm rights if the minor is subsequently
2 detained for involuntary treatment under this section.

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

6 (9) ~~((Rules of evidence shall not apply in fourteen-day
7 commitment hearings.~~

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

10 (a) The minor has a ~~((mental disorder or substance use))~~
11 behavioral health disorder and presents a likelihood of serious harm
12 or is gravely disabled;

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

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

21 (d) If commitment is for a substance use disorder, there is an
22 available secure detoxification facility or approved substance use
23 disorder treatment program with adequate space for the minor.

24 ~~((11))~~ (10) If the court finds that the minor meets the
25 criteria for a fourteen-day commitment, the court shall either
26 authorize commitment of the minor for inpatient treatment or for less
27 restrictive alternative treatment upon such conditions as are
28 necessary. If the court determines that the minor does not meet the
29 criteria for a fourteen-day commitment, the minor shall be released.

30 ~~((12))~~ (11)(a) Nothing in this section prohibits the
31 professional person in charge of the facility from releasing the
32 minor at any time, when, in the opinion of the professional person in
33 charge of the facility, further inpatient treatment is no longer
34 necessary. The release may be subject to reasonable conditions if
35 appropriate.

36 (b) Whenever a minor is released under this section, the
37 professional person in charge shall within three days, notify the
38 court in writing of the release.

1 (~~(13)~~) (12) A minor who has been committed for fourteen days
2 shall be released at the end of that period unless a petition for one
3 hundred eighty-day commitment is pending before the court.

4 **Sec. 91.** RCW 71.34.740 and 2016 sp.s. c 29 s 274 are each
5 amended to read as follows:

6 (1) A commitment hearing shall be held within (~~seventy-two~~
7 ~~hours~~) five days of the minor's admission, excluding Saturday,
8 Sunday, and holidays, unless a continuance is (~~requested by the~~
9 ~~minor or the minor's attorney~~) ordered under section 89 of this act.

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

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

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

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

21 (6) At the commitment hearing, the minor shall have the following
22 rights:

23 (a) To be represented by an attorney;

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

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

26 (7) If the hearing is for commitment for mental health treatment,
27 the court at the time of the commitment hearing and before an order
28 of commitment is entered shall inform the minor both orally and in
29 writing that the failure to make a good faith effort to seek
30 voluntary treatment as provided in RCW 71.34.730 will result in the
31 loss of his or her firearm rights if the minor is subsequently
32 detained for involuntary treatment under this section.

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

36 (9) (~~Rules of evidence shall not apply in fourteen-day~~
37 ~~commitment hearings.~~

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

1 (a) The minor has a (~~mental disorder or substance use~~)
2 behavioral health disorder and presents a likelihood of serious harm
3 or is gravely disabled;

4 (b) The minor is in need of evaluation and treatment of the type
5 provided by the inpatient evaluation and treatment facility, secure
6 detoxification facility, or approved substance use disorder treatment
7 program to which continued inpatient care is sought or is in need of
8 less restrictive alternative treatment found to be in the best
9 interests of the minor or others;

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

12 (d) If commitment is for a substance use disorder, there is an
13 available secure detoxification facility or approved substance use
14 disorder treatment program with adequate space for the minor.

15 (~~(11)~~) (10) If the court finds that the minor meets the
16 criteria for a fourteen-day commitment, the court shall either
17 authorize commitment of the minor for inpatient treatment or for less
18 restrictive alternative treatment upon such conditions as are
19 necessary. If the court determines that the minor does not meet the
20 criteria for a fourteen-day commitment, the minor shall be released.

21 (~~(12)~~) (11)(a) Nothing in this section prohibits the
22 professional person in charge of the facility from releasing the
23 minor at any time, when, in the opinion of the professional person in
24 charge of the facility, further inpatient treatment is no longer
25 necessary. The release may be subject to reasonable conditions if
26 appropriate.

27 (b) Whenever a minor is released under this section, the
28 professional person in charge shall within three days, notify the
29 court in writing of the release.

30 (~~(13)~~) (12) A minor who has been committed for fourteen days
31 shall be released at the end of that period unless a petition for one
32 hundred eighty-day commitment is pending before the court.

33 **Sec. 92.** RCW 71.34.740 and 2016 sp.s. c 29 s 275 are each
34 amended to read as follows:

35 (1) A commitment hearing shall be held within (~~seventy-two~~
36 hours) five days of the minor's admission, excluding Saturday,
37 Sunday, and holidays, unless a continuance is (~~requested by the~~
38 minor or the minor's attorney) ordered under section 89 of this act.

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

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

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

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

12 (6) At the commitment hearing, the minor shall have the following
13 rights:

14 (a) To be represented by an attorney;

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

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

17 (7) If the hearing is for commitment for mental health treatment,
18 the court at the time of the commitment hearing and before an order
19 of commitment is entered shall inform the minor both orally and in
20 writing that the failure to make a good faith effort to seek
21 voluntary treatment as provided in RCW 71.34.730 will result in the
22 loss of his or her firearm rights if the minor is subsequently
23 detained for involuntary treatment under this section.

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

27 (9) ~~((Rules of evidence shall not apply in fourteen-day
28 commitment hearings.~~

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

31 (a) The minor has a ~~((mental disorder or substance use))~~
32 behavioral health disorder and presents a likelihood of serious harm
33 or is gravely disabled;

34 (b) The minor is in need of evaluation and treatment of the type
35 provided by the inpatient evaluation and treatment facility, secure
36 detoxification facility, or approved substance use disorder treatment
37 program to which continued inpatient care is sought or is in need of
38 less restrictive alternative treatment found to be in the best
39 interests of the minor or others; and

1 (c) The minor is unwilling or unable in good faith to consent to
2 voluntary treatment.

3 (~~(11)~~) (10) If the court finds that the minor meets the
4 criteria for a fourteen-day commitment, the court shall either
5 authorize commitment of the minor for inpatient treatment or for less
6 restrictive alternative treatment upon such conditions as are
7 necessary. If the court determines that the minor does not meet the
8 criteria for a fourteen-day commitment, the minor shall be released.

9 (~~(12)~~) (11)(a) Nothing in this section prohibits the
10 professional person in charge of the facility from releasing the
11 minor at any time, when, in the opinion of the professional person in
12 charge of the facility, further inpatient treatment is no longer
13 necessary. The release may be subject to reasonable conditions if
14 appropriate.

15 (b) Whenever a minor is released under this section, the
16 professional person in charge shall within three days, notify the
17 court in writing of the release.

18 (~~(13)~~) (12) A minor who has been committed for fourteen days
19 shall be released at the end of that period unless a petition for one
20 hundred eighty-day commitment is pending before the court.

21 **Sec. 93.** RCW 71.34.750 and 2016 sp.s. c 29 s 276 and 2016 c 155
22 s 21 are each reenacted and amended to read as follows:

23 (1) At any time during the minor's period of fourteen-day
24 commitment, the professional person in charge may petition the court
25 for an order requiring the minor to undergo an additional one hundred
26 eighty-day period of treatment. The evidence in support of the
27 petition shall be presented by the county prosecutor unless the
28 petition is filed by the professional person in charge of a state-
29 operated facility in which case the evidence shall be presented by
30 the attorney general.

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

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

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

36 (c) A statement that the petitioner is the professional person in
37 charge of the evaluation and treatment facility, secure
38 detoxification facility, or approved substance use disorder treatment
39 program responsible for the treatment of the minor;

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

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

3 (3) The petition shall be supported by accompanying affidavits
4 signed by: (a) Two examining physicians, one of whom shall be a child
5 psychiatrist, or two psychiatric advanced registered nurse
6 practitioners, one of whom shall be a child and adolescent or family
7 psychiatric advanced registered nurse practitioner, or two physician
8 assistants, one of whom must be supervised by a child psychiatrist;
9 (b) one children's mental health specialist and either an examining
10 physician, physician assistant, or a psychiatric advanced registered
11 nurse practitioner; or (c) two among an examining physician,
12 physician assistant, and a psychiatric advanced registered nurse
13 practitioner, one of which needs to be a child psychiatrist~~((+,+))~~, a
14 physician assistant supervised by a child psychiatrist, or a child
15 and adolescent psychiatric nurse practitioner. The affidavits shall
16 describe in detail the behavior of the detained minor which supports
17 the petition and shall state whether a less restrictive alternative
18 to inpatient treatment is in the best interests of the minor.

19 (4) The petition for one hundred eighty-day commitment shall be
20 filed with the clerk of the court at least three days before the
21 expiration of the fourteen-day commitment period. The petitioner or
22 the petitioner's designee shall within twenty-four hours of filing
23 serve a copy of the petition on the minor and notify the minor's
24 attorney and the minor's parent. A copy of the petition shall be
25 provided to such persons at least twenty-four hours prior to the
26 hearing.

27 (5) At the time of filing, the court shall set a date within
28 seven days for the hearing on the petition. ~~((The court may continue
29 the hearing upon the written request of the minor or the minor's
30 attorney for not more than ten days.))~~ If the hearing is not
31 commenced within thirty days after the filing of the petition,
32 including extensions of time requested by the detained person or his
33 or her attorney or the court in the administration of justice under
34 section 89 of this act, the minor must be released. The minor or the
35 parents shall be afforded the same rights as in a fourteen-day
36 commitment hearing. Treatment of the minor shall continue pending the
37 proceeding.

38 (6) For one hundred eighty-day commitment:

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

1 (i) Is suffering from a mental disorder or substance use
2 disorder;

3 (ii) Presents a likelihood of serious harm or is gravely
4 disabled; and

5 (iii) Is in need of further treatment that only can be provided
6 in a one hundred eighty-day commitment.

7 (b) If commitment is for a substance use disorder, the court must
8 find that there is an available approved substance use disorder
9 treatment program that has adequate space for the minor.

10 (7) In determining whether an inpatient or less restrictive
11 alternative commitment is appropriate, great weight must be given to
12 evidence of a prior history or pattern of decompensation and
13 discontinuation of treatment resulting in: (a) Repeated
14 hospitalizations; or (b) repeated peace officer interventions
15 resulting in juvenile charges. Such evidence may be used to provide a
16 factual basis for concluding that the minor would not receive, if
17 released, such care as is essential for his or her health or safety.

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

30 (b) If the court determines that the minor does not meet the
31 criteria for one hundred eighty-day commitment, the minor shall be
32 released.

33 ((+8)) (9) Successive one hundred eighty-day commitments are
34 permissible on the same grounds and under the same procedures as the
35 original one hundred eighty-day commitment. Such petitions shall be
36 filed at least ((five)) three days prior to the expiration of the
37 previous one hundred eighty-day commitment order.

38 **Sec. 94.** RCW 71.34.750 and 2016 sp.s. c 29 s 277 are each
39 amended to 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, one of whom shall be a child
22 psychiatrist, or two psychiatric advanced registered nurse
23 practitioners, one of whom shall be a child and adolescent or family
24 psychiatric advanced registered nurse practitioner, or two physician
25 assistants, one of whom must be supervised by a child psychiatrist;
26 (b) one children's mental health specialist and either an examining
27 physician, physician assistant, or a psychiatric advanced registered
28 nurse practitioner; or (c) two among an examining physician,
29 physician assistant, and a psychiatric advanced registered nurse
30 practitioner, one of which needs to be a child psychiatrist(~~(+)~~), a
31 physician assistant supervised by a child psychiatrist, or a child
32 and 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.~~) If the hearing is not
8 commenced within thirty days after the filing of the petition,
9 including extensions of time requested by the detained person or his
10 or her attorney or the court in the administration of justice under
11 section 89 of this act, the minor must be released. The minor or the
12 parents shall be afforded the same rights as in a fourteen-day
13 commitment hearing. Treatment of the minor shall continue pending the
14 proceeding.

15 (6) For one hundred eighty-day commitment, the court must find by
16 clear, cogent, and convincing evidence that the minor:

17 (a) Is suffering from a mental disorder or substance use
18 disorder;

19 (b) Presents a likelihood of serious harm or is gravely disabled;
20 and

21 (c) Is in need of further treatment that only can be provided in
22 a one hundred eighty-day commitment.

23 (7) In determining whether an inpatient or less restrictive
24 alternative commitment is appropriate, great weight must be given to
25 evidence of a prior history or pattern of decompensation and
26 discontinuation of treatment resulting in: (a) Repeated
27 hospitalizations; or (b) repeated peace officer interventions
28 resulting in juvenile charges. Such evidence may be used to provide a
29 factual basis for concluding that the minor would not receive, if
30 released, such care as is essential for his or her health or safety.

31 (8)(a) If the court finds that the criteria for commitment are
32 met and that less restrictive treatment in a community setting is not
33 appropriate or available, the court shall order the minor committed
34 to the custody of the secretary for further inpatient mental health
35 treatment, to an approved substance use disorder treatment program
36 for further substance use disorder treatment, or to a private
37 treatment and evaluation facility for inpatient mental health or
38 substance use disorder treatment if the minor's parents have assumed
39 responsibility for payment for the treatment. If the court finds that
40 a less restrictive alternative is in the best interest of the minor,

1 the court shall order less restrictive alternative treatment upon
2 such conditions as necessary.

3 (b) If the court determines that the minor does not meet the
4 criteria for one hundred eighty-day commitment, the minor shall be
5 released.

6 ~~((+8))~~ (9) Successive one hundred eighty-day commitments are
7 permissible on the same grounds and under the same procedures as the
8 original one hundred eighty-day commitment. Such petitions shall be
9 filed at least ~~((five))~~ three days prior to the expiration of the
10 previous one hundred eighty-day commitment order.

11 NEW SECTION. **Sec. 95.** A new section is added to chapter 71.34
12 RCW to read as follows:

13 (1) Less restrictive alternative treatment, at a minimum, must
14 include the following services:

15 (a) Assignment of a care coordinator;

16 (b) An intake evaluation with the provider of the less
17 restrictive alternative treatment;

18 (c) A psychiatric evaluation;

19 (d) A schedule of regular contacts with the provider of the less
20 restrictive alternative treatment services for the duration of the
21 order;

22 (e) A transition plan addressing access to continued services at
23 the expiration of the order;

24 (f) An individual crisis plan; and

25 (g) Notification to the care coordinator assigned in (a) of this
26 subsection if reasonable efforts to engage the client fail to produce
27 substantial compliance with court-ordered treatment conditions.

28 (2) Less restrictive alternative treatment may include the
29 following additional services:

30 (a) Medication management;

31 (b) Psychotherapy;

32 (c) Nursing;

33 (d) Substance abuse counseling;

34 (e) Residential treatment; and

35 (f) Support for housing, benefits, education, and employment.

36 (3) If the minor was provided with involuntary medication during
37 the involuntary commitment period, the less restrictive alternative
38 treatment order may authorize the less restrictive alternative
39 treatment provider or its designee to administer involuntary

1 antipsychotic medication to the person if the provider has attempted
2 and failed to obtain the informed consent of the person and there is
3 a concurring medical opinion approving the medication by a
4 psychiatrist, physician assistant working with a supervising
5 psychiatrist, psychiatric advanced registered nurse practitioner, or
6 physician or physician assistant in consultation with an independent
7 mental health professional with prescribing authority.

8 (4) Less restrictive alternative treatment must be administered
9 by a provider that is certified or licensed to provide or coordinate
10 the full scope of services required under the less restrictive
11 alternative order and that has agreed to assume this responsibility.

12 (5) The care coordinator assigned to a minor ordered to less
13 restrictive alternative treatment must submit an individualized plan
14 for the minor's treatment services to the court that entered the
15 order. An initial plan must be submitted as soon as possible
16 following the intake evaluation and a revised plan must be submitted
17 upon any subsequent modification in which a type of service is
18 removed from or added to the treatment plan.

19 (6) For the purpose of this section, "care coordinator" means a
20 clinical practitioner who coordinates the activities of less
21 restrictive alternative treatment. The care coordinator coordinates
22 activities with the designated crisis responders that are necessary
23 for enforcement and continuation of less restrictive alternative
24 treatment orders and is responsible for coordinating service
25 activities with other agencies and establishing and maintaining a
26 therapeutic relationship with the individual on a continuing basis.

27 **Sec. 96.** RCW 71.34.780 and 2018 c 201 s 5020 are each amended to
28 read as follows:

29 (1) If the professional person in charge of an outpatient
30 treatment program, a designated crisis responder, or the director or
31 secretary, as appropriate, determines that a minor is failing to
32 adhere to the conditions of the court order for less restrictive
33 alternative treatment or the conditions for the conditional release,
34 or that substantial deterioration in the minor's functioning has
35 occurred, the designated crisis responder, or the director or
36 secretary, as appropriate, may order that the minor(~~(, if committed~~
37 ~~for mental health treatment,)~~) be taken into custody and transported
38 to an inpatient evaluation and treatment facility (~~(or, if committed~~
39 ~~for substance use disorder treatment, be taken into custody and~~

1 ~~transported to~~), a secure detoxification facility, or an approved
2 substance use disorder treatment program (~~if there is an~~
3 ~~available~~). A secure detoxification facility or approved substance
4 use disorder treatment program that has adequate space for the minor
5 must be available.

6 (2) (a) The designated crisis responder (~~or the~~), director, or
7 secretary, as appropriate, shall file the order of apprehension and
8 detention and serve it upon the minor and notify the minor's parent
9 and the minor's attorney, if any, of the detention within two days of
10 return. At the time of service the minor shall be informed of the
11 right to a hearing and to representation by an attorney. The
12 designated crisis responder or the director or secretary, as
13 appropriate, may modify or rescind the order of apprehension and
14 detention at any time prior to the hearing.

15 (b) If the minor is involuntarily detained for revocation at an
16 evaluation and treatment facility, secure detoxification facility, or
17 approved substance use disorder treatment program in a different
18 county from where the minor was initially detained, the facility or
19 program may file the order of apprehension, serve it on the minor and
20 notify the minor's parents and the minor's attorney at the request of
21 the designated crisis responder.

22 (3) A petition for revocation of less restrictive alternative
23 treatment shall be filed by the designated crisis responder or the
24 director (~~or~~), secretary, or facility, as appropriate, with the
25 court in the county (~~ordering the less restrictive alternative~~
26 ~~treatment~~) where the minor is detained. The court shall conduct the
27 hearing in that county. A petition for revocation of conditional
28 release (~~may be filed with the court in the county ordering~~
29 ~~inpatient treatment or the county where the minor on conditional~~
30 ~~release is residing~~) must be filed in the county where the minor is
31 detained. A petition shall describe the behavior of the minor
32 indicating violation of the conditions or deterioration of routine
33 functioning and a dispositional recommendation. (~~Upon motion for~~
34 ~~good cause, the hearing may be transferred to the county of the~~
35 ~~minor's residence or to the county in which the alleged violations~~
36 ~~occurred.~~) The hearing shall be held within seven days of the
37 minor's return. The issues to be determined are whether the minor did
38 or did not adhere to the conditions of the less restrictive
39 alternative treatment or conditional release, or whether the minor's
40 routine functioning has substantially deteriorated, and, if so,

1 whether the conditions of less restrictive alternative treatment or
2 conditional release should be modified or, subject to subsection (4)
3 of this section, whether the minor should be returned to inpatient
4 treatment. Pursuant to the determination of the court, the minor
5 shall be returned to less restrictive alternative treatment or
6 conditional release on the same or modified conditions or shall be
7 returned to inpatient treatment. If the minor is returned to
8 inpatient treatment, RCW 71.34.760 regarding the director's placement
9 responsibility shall apply. The hearing may be waived by the minor
10 and the minor returned to inpatient treatment or to less restrictive
11 alternative treatment or conditional release on the same or modified
12 conditions.

13 (4) A court may not order the return of a minor to inpatient
14 treatment in a secure detoxification facility or approved substance
15 use disorder treatment program unless there is a secure
16 detoxification facility or approved substance use disorder treatment
17 program available with adequate space for the minor.

18 **Sec. 97.** RCW 71.34.780 and 2018 c 201 s 5021 are each amended to
19 read as follows:

20 (1) If the professional person in charge of an outpatient
21 treatment program, a designated crisis responder, or the director or
22 secretary, as appropriate, determines that a minor is failing to
23 adhere to the conditions of the court order for less restrictive
24 alternative treatment or the conditions for the conditional release,
25 or that substantial deterioration in the minor's functioning has
26 occurred, the designated crisis responder, or the director or
27 secretary, as appropriate, may order that the minor(~~(, if committed~~
28 ~~for mental health treatment,)~~) be taken into custody and transported
29 to an inpatient evaluation and treatment facility (~~(or, if committed~~
30 ~~for substance use disorder treatment, be taken into custody and~~
31 ~~transported to)~~), a secure detoxification facility, or an approved
32 substance use disorder treatment program.

33 (2) (a) The designated crisis responder (~~(or the)~~), director, or
34 secretary, as appropriate, shall file the order of apprehension and
35 detention and serve it upon the minor and notify the minor's parent
36 and the minor's attorney, if any, of the detention within two days of
37 return. At the time of service the minor shall be informed of the
38 right to a hearing and to representation by an attorney. The
39 designated crisis responder or the director or secretary, as

1 appropriate, may modify or rescind the order of apprehension and
2 detention at any time prior to the hearing.

3 (b) If the minor is involuntarily detained for revocation at an
4 evaluation and treatment facility, secure detoxification facility, or
5 approved substance use disorder treatment program in a different
6 county from where the minor was initially detained, the facility or
7 program may file the order of apprehension, serve it on the minor and
8 notify the minor's parents and the minor's attorney at the request of
9 the designated crisis responder.

10 (3) A petition for revocation of less restrictive alternative
11 treatment shall be filed by the designated crisis responder or the
12 director ~~((of))~~, secretary, or facility, as appropriate, with the
13 court in the county ~~((ordering the less restrictive alternative~~
14 ~~treatment))~~ where the minor is detained. The court shall conduct the
15 hearing in that county. A petition for revocation of conditional
16 release ~~((may be filed with the court in the county ordering~~
17 ~~inpatient treatment or the county where the minor on conditional~~
18 ~~release is residing))~~ must be filed in the county where the minor is
19 detained. A petition shall describe the behavior of the minor
20 indicating violation of the conditions or deterioration of routine
21 functioning and a dispositional recommendation. ~~((Upon motion for~~
22 ~~good cause, the hearing may be transferred to the county of the~~
23 ~~minor's residence or to the county in which the alleged violations~~
24 ~~occurred.))~~ The hearing shall be held within seven days of the
25 minor's return. The issues to be determined are whether the minor did
26 or did not adhere to the conditions of the less restrictive
27 alternative treatment or conditional release, or whether the minor's
28 routine functioning has substantially deteriorated, and, if so,
29 whether the conditions of less restrictive alternative treatment or
30 conditional release should be modified or whether the minor should be
31 returned to inpatient treatment. Pursuant to the determination of the
32 court, the minor shall be returned to less restrictive alternative
33 treatment or conditional release on the same or modified conditions
34 or shall be returned to inpatient treatment. If the minor is returned
35 to inpatient treatment, RCW 71.34.760 regarding the director's
36 placement responsibility shall apply. The hearing may be waived by
37 the minor and the minor returned to inpatient treatment or to less
38 restrictive alternative treatment or conditional release on the same
39 or modified conditions.

1 NEW SECTION. **Sec. 98.** A new section is added to chapter 71.34
2 RCW to read as follows:

3 The legislature recognizes the inherent authority of the
4 judiciary under Article IV, section 1 of the state Constitution to
5 establish rules regarding access to court records, and respectfully
6 requests the Washington state supreme court to adopt rules regarding
7 potential access for the following entities to the files and records
8 of court proceedings under this chapter and chapter 71.05 RCW:

- 9 (1) The department;
- 10 (2) The department of health;
- 11 (3) The authority;
- 12 (4) The state hospitals as defined in RCW 72.23.010;
- 13 (5) Any person who is the subject of a petition;
- 14 (6) The attorney or guardian of the person;
- 15 (7) Resource management services for that person; and
- 16 (8) Service providers authorized to receive such information by
17 resource management services.

18 NEW SECTION. **Sec. 99.** A new section is added to chapter 71.34
19 RCW to read as follows:

20 For purposes of this chapter, at any hearing the petitioner, the
21 respondent, the witnesses, the interpreters, and the presiding
22 judicial officer may be present and participate either in person or
23 by video, as determined by the court. The term "video" as used in
24 this section includes any functional equivalent. At any hearing
25 conducted by video, the technology used must permit the judicial
26 officer, counsel, all parties, and the witnesses to be able to see,
27 hear, and speak, when authorized, during the hearing; to allow
28 attorneys to use exhibits or other materials during the hearing; and
29 to allow the respondent's counsel to be in the same location as the
30 respondent unless otherwise requested by the respondent or the
31 respondent's counsel. Witnesses in a proceeding may also appear in
32 court through other means, including telephonically, pursuant to the
33 requirements of superior court civil rule 43. Notwithstanding the
34 foregoing, the court, upon its own motion or upon a motion for good
35 cause by any party, may require all parties and witnesses to
36 participate in the hearing in person rather than by video. In ruling
37 on any such motion, the court may allow in-person or video testimony;
38 and the court may consider, among other things, whether the
39 respondent's alleged behavioral health disorder affects the

1 respondent's ability to perceive or participate in the proceeding by
2 video.

3 NEW SECTION. **Sec. 100.** A new section is added to chapter 71.05
4 RCW to read as follows:

5 For purposes of this chapter, at any hearing the petitioner, the
6 respondent, the witnesses, the interpreters, and the presiding
7 judicial officer may be present and participate either in person or
8 by video, as determined by the court. The term "video" as used in
9 this section includes any functional equivalent. At any hearing
10 conducted by video, the technology used must permit the judicial
11 officer, counsel, all parties, and the witnesses to be able to see,
12 hear, and speak, when authorized, during the hearing; to allow
13 attorneys to use exhibits or other materials during the hearing; and
14 to allow the respondent's counsel to be in the same location as the
15 respondent unless otherwise requested by the respondent or the
16 respondent's counsel. Witnesses in a proceeding may also appear in
17 court through other means, including telephonically, pursuant to the
18 requirements of superior court civil rule 43. Notwithstanding the
19 foregoing, the court, upon its own motion or upon a motion for good
20 cause by any party, may require all parties and witnesses to
21 participate in the hearing in person rather than by video. In ruling
22 on any such motion, the court may allow in-person or video testimony;
23 and the court may consider, among other things, whether the
24 respondent's alleged behavioral health disorder affects the
25 respondent's ability to perceive or participate in the proceeding by
26 video.

27 NEW SECTION. **Sec. 101.** A new section is added to chapter 71.34
28 RCW to read as follows:

29 In addition to the responsibility provided for by RCW 43.20B.330,
30 the parents of a minor person who is involuntarily detained pursuant
31 to this chapter for the purpose of treatment and evaluation outside
32 of a facility maintained and operated by the department shall be
33 responsible for the cost of such care and treatment. In the event
34 that an individual is unable to pay for such treatment or in the
35 event payment would result in a substantial hardship upon the
36 individual or his or her family, then the county of residence of such
37 person shall be responsible for such costs. If it is not possible to
38 determine the county of residence of the person, the cost shall be

1 borne by the county where the person was originally detained. The
2 department, or the authority, as appropriate, shall, pursuant to
3 chapter 34.05 RCW, adopt standards as to (1) inability to pay in
4 whole or in part, (2) a definition of substantial hardship, and (3)
5 appropriate payment schedules. Financial responsibility with respect
6 to services and facilities of the department shall continue to be as
7 provided in RCW 43.20B.320 through 43.20B.360 and 43.20B.370.

8 NEW SECTION. **Sec. 102.** A new section is added to chapter 71.05
9 RCW to read as follows:

10 (1) An involuntary treatment act work group is established to
11 evaluate the effect of changes to chapters 71.05 and 71.34 RCW and to
12 evaluate vulnerabilities in the crisis system.

13 (2) The work group shall:

14 (a) Commencing September 1, 2019, meet at least three times to:

15 (i) Identify and evaluate systems and procedures that may be required
16 to implement five-day initial detention; (ii) develop recommendations
17 to implement five-day initial detention statewide; and (iii)
18 disseminate the recommendations to stakeholders and report them to
19 the appropriate committees of the legislature by January 1, 2020.

20 (b) Commencing January 1, 2020, meet at least six times to
21 evaluate: (i) The implementation of five-day initial detention, and
22 the effects, if any, on involuntary behavioral health treatment
23 capacity statewide, including the frequency of detentions,
24 commitments, revocations of less restrictive alternative treatment,
25 conditional release orders, single bed certifications, and no-bed
26 reports under RCW 71.05.750; (ii) other issues related to
27 implementation of this act; and (iii) other vulnerabilities in the
28 involuntary treatment system.

29 (c) (i) Develop recommendations for operating the crisis system
30 based on the evaluations in (b) of this subsection; and (ii)
31 disseminate those recommendations to stakeholders and report them to
32 the appropriate committees of the legislature no later than June 30,
33 2021.

34 (3) The work group shall be convened by the authority and shall
35 receive technical and data gathering support from the authority, the
36 department, and the department of social and health services as
37 needed. The membership must consist of not more than eighteen members
38 appointed by the governor, reflecting statewide representation,

1 diverse viewpoints, and experience with involuntary treatment cases.

2 Appointed members must include but not be limited to:

3 (a) Representatives of the authority, the department, and the
4 department of social and health services;

5 (b) Certified short-term civil commitment providers and providers
6 who accept single bed certification under RCW 71.05.745;

7 (c) Certified long-term inpatient care providers for involuntary
8 patients or providers with experience providing community long-term
9 inpatient care for involuntary patients;

10 (d) Prosecuting attorneys;

11 (e) Defense attorneys;

12 (f) Family members and persons with lived experience of
13 behavioral health disorders;

14 (g) Advocates for persons with behavioral health disorders;

15 (h) Designated crisis responders;

16 (i) Behavioral health administrative services organizations;

17 (j) Managed care organizations;

18 (k) Law enforcement; and

19 (l) Judicial officers in involuntary treatment cases.

20 (4) Interested legislators and legislative staff may participate
21 in the work group. The governor must request participation in the
22 work group by a representative of tribal governments.

23 (5) The work group shall choose cochairs from among its members
24 and receive staff support from the authority.

25 (6) This section expires June 30, 2021.

26 NEW SECTION. **Sec. 103.** The following acts or parts of acts are
27 each repealed:

28 (1) RCW 71.05.360 (Rights of involuntarily detained persons) and
29 2017 3rd sp.s. c 14 s 20; and

30 (2) RCW 71.34.370 (Antipsychotic medication and shock treatment)
31 and 1989 c 120 s 9.

32 NEW SECTION. **Sec. 104.** RCW 71.05.525 is recodified as a section
33 in chapter 71.34 RCW.

34 NEW SECTION. **Sec. 105.** Sections 15, 18, 26, 39, 45, 56, 59, 72,
35 79, 83, 86, 92, 94, and 97 of this act take effect July 1, 2026.

1 NEW SECTION. **Sec. 106.** Sections 14, 17, 25, 38, 44, 55, 78, 82,
2 85, 91, 93, and 96 of this act expire July 1, 2026.

3 NEW SECTION. **Sec. 107.** Sections 14, 17, 20, 21, 22, 23, 25, 31,
4 33, 35, 38, 55, 61, 62, 76, 82, 85, 88, and 91 of this act take
5 effect January 1, 2020.

6 NEW SECTION. **Sec. 108.** Sections 13, 16, 30, 32, 34, 37, 54, 60,
7 75, 81, 84, 87, and 90 of this act expire January 1, 2020."

8 Correct the title.

EFFECT: Makes technical corrections to align amended language in sections with multiple effective dates. Removes an obsolete definition of "information related to behavioral health" in the adult and minor involuntary treatment act.

Defines "video," under the Involuntary Treatment Act (ITA), as the delivery of behavioral health services through the use of interactive audio and visual technology permitting real-time communication between a person and a designated crisis responder (DCR) for the purpose of evaluation, with certain exceptions. Provides that a DCR may perform ITA evaluations by video provided that a licensed health care professional or professional person is present.

--- END ---