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ESHB 2099 - S COMM AMD By Subcommittee on Behavioral Health

ADOPTED 03/05/2020

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

3 "Sec. 1. RCW 71.05.020 and 2019 c 446 s 2, 2019 c 444 s 16, and 4 2019 c 325 s 3001 are each reenacted and amended to read as follows:

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

- (1) "Admission" or "admit" means a decision by a physician, physician assistant, or psychiatric advanced registered nurse practitioner that a person should be examined or treated as a patient in a hospital;
- (2) "Alcoholism" means a disease, characterized by a dependency on alcoholic beverages, loss of control over the amount and circumstances of use, symptoms of tolerance, physiological or psychological withdrawal, or both, if use is reduced or discontinued, and impairment of health or disruption of social or economic functioning;
- (3) "Antipsychotic medications" means that class of drugs primarily used to treat serious manifestations of mental illness associated with thought disorders, which includes, but is not limited to atypical antipsychotic medications;
- (4) "Approved substance use disorder treatment program" means a program for persons with a substance use disorder provided by a treatment program certified by the department as meeting standards adopted under chapter 71.24 RCW;
- (5) "Attending staff" means any person on the staff of a public or private agency having responsibility for the care and treatment of a patient;
 - (6) "Authority" means the Washington state health care authority;
- (7) "Co-occurring disorder specialist" means an individual possessing an enhancement granted by the department of health under chapter 18.205 RCW that certifies the individual to provide substance

use disorder counseling subject to the practice limitations under RCW 18.205.105;

- (8) "Commitment" means the determination by a court that a person should be detained for a period of either evaluation or treatment, or both, in an inpatient or a less restrictive setting;
- (9) "Conditional release" means a revocable modification of a commitment, which may be revoked upon violation of any of its terms;
- (10) "Crisis stabilization unit" means a short-term facility or a portion of a facility licensed or certified by the department, such as an evaluation and treatment facility or a hospital, which has been designed to assess, diagnose, and treat individuals experiencing an acute crisis without the use of long-term hospitalization;
- (11) "Custody" means involuntary detention under the provisions of this chapter or chapter 10.77 RCW, uninterrupted by any period of unconditional release from commitment from a facility providing involuntary care and treatment;
 - (12) "Department" means the department of health;
- (13) "Designated crisis responder" means a mental health professional appointed by the county or an entity appointed by the county, to perform the duties specified in this chapter;
- (14) "Detention" or "detain" means the lawful confinement of a person, under the provisions of this chapter;
- (15) "Developmental disabilities professional" means a person who has specialized training and three years of experience in directly treating or working with persons with developmental disabilities and is a psychiatrist, physician assistant working with a supervising psychiatrist, psychologist, psychiatric advanced registered nurse practitioner, or social worker, and such other developmental disabilities professionals as may be defined by rules adopted by the secretary of the department of social and health services;
- 31 (16) "Developmental disability" means that condition defined in 32 RCW 71A.10.020(5);
 - (17) "Director" means the director of the authority;
 - (18) "Discharge" means the termination of hospital medical authority. The commitment may remain in place, be terminated, or be amended by court order;
 - (19) "Drug addiction" means a disease, characterized by a dependency on psychoactive chemicals, loss of control over the amount and circumstances of use, symptoms of tolerance, physiological or psychological withdrawal, or both, if use is reduced or discontinued, Code Rev/MW:eab

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- 1 and impairment of health or disruption of social or economic 2 functioning;
- (20) "Evaluation and treatment facility" means any facility which 3 can provide directly, or by direct arrangement with other public or 4 private agencies, emergency evaluation and treatment, outpatient 5 6 care, and timely and appropriate inpatient care to persons suffering from a mental disorder, and which is licensed or certified as such by 7 the department. The authority may certify single beds as temporary 8 evaluation and treatment beds under RCW 71.05.745. A physically 9 separate and separately operated portion of a state hospital may be 10 11 designated as an evaluation and treatment facility. A facility which 12 is part of, or operated by, the department of social and health services or any federal agency will not require certification. No 13 correctional institution or facility, or jail, shall be an evaluation 14 and treatment facility within the meaning of this chapter; 15
 - (21) "Gravely disabled" means a condition in which a person, as a result of a mental disorder, or as a result of the use of alcohol or other psychoactive chemicals: (a) Is in danger of serious physical harm resulting from a failure to provide for his or her essential human needs of health or safety; or (b) manifests severe deterioration in routine functioning evidenced by repeated and escalating loss of cognitive or volitional control over his or her actions and is not receiving such care as is essential for his or her health or safety;
 - (22) "Habilitative services" means those services provided by program personnel to assist persons in acquiring and maintaining life skills and in raising their levels of physical, mental, social, and vocational functioning. Habilitative services include education, training for employment, and therapy. The habilitative process shall be undertaken with recognition of the risk to the public safety presented by the person being assisted as manifested by prior charged criminal conduct;
 - (23) "Hearing" means any proceeding conducted in open court. For purposes of this chapter, at any hearing the petitioner, the respondent, the witnesses, and the presiding judicial officer may be present and participate either in person or by video, as determined by the court. The term "video" as used herein shall include any functional equivalent. At any hearing conducted by video, the technology used must permit the judicial officer, counsel, all parties, and the witnesses to be able to see, hear, and speak, when

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- authorized, during the hearing; to allow attorneys to use exhibits or 1 other materials during the hearing; and to allow respondent's counsel 2 3 to be in the same location as the respondent unless otherwise requested by the respondent or the respondent's counsel. Witnesses in 4 a proceeding may also appear in court through other means, including 5 6 telephonically, pursuant to the requirements of superior court civil 7 rule 43. Notwithstanding the foregoing, the court, upon its own motion or upon a motion for good cause by any party, may require all 8 parties and witnesses to participate in the hearing in person rather 9 than by video. In ruling on any such motion, the court may allow in-10 11 person or video testimony; and the court may consider, among other 12 things, whether the respondent's alleged mental illness affects the respondent's ability to perceive or participate in the proceeding by 13 14 video;
 - (24) "History of one or more violent acts" refers to the period of time ten years prior to the filing of a petition under this chapter, excluding any time spent, but not any violent acts committed, in a mental health facility, a long-term alcoholism or drug treatment facility, or in confinement as a result of a criminal conviction;
- 21 (25) "Imminent" means the state or condition of being likely to 22 occur at any moment or near at hand, rather than distant or remote;
 - (26) "In need of assisted outpatient behavioral health treatment" means that a person, as a result of a mental disorder or substance use disorder: (a) Has been committed by a court to detention for involuntary behavioral health treatment during the preceding thirtysix months; (b) is unlikely to voluntarily participate in outpatient treatment without an order for less restrictive alternative treatment, based on a history of nonadherence with treatment or in view of the person's current behavior; (c) is likely to benefit from restrictive alternative treatment; and (d) requires restrictive alternative treatment to prevent а decompensation, or deterioration that is likely to result in the person presenting a likelihood of serious harm or the person becoming gravely disabled within a reasonably short period of time;
 - (27) "Individualized service plan" means a plan prepared by a developmental disabilities professional with other professionals as a team, for a person with developmental disabilities, which shall state:

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- 1 (a) The nature of the person's specific problems, prior charged 2 criminal behavior, and habilitation needs;
 - (b) The conditions and strategies necessary to achieve the purposes of habilitation;
 - (c) The intermediate and long-range goals of the habilitation program, with a projected timetable for the attainment;
 - (d) The rationale for using this plan of habilitation to achieve those intermediate and long-range goals;
 - (e) The staff responsible for carrying out the plan;

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- (f) Where relevant in light of past criminal behavior and due consideration for public safety, the criteria for proposed movement to less-restrictive settings, criteria for proposed eventual discharge or release, and a projected possible date for discharge or release; and
- 15 (g) The type of residence immediately anticipated for the person 16 and possible future types of residences;
 - (28) "Information related to mental health services" means all information and records compiled, obtained, or maintained in the course of providing services to either voluntary or involuntary recipients of services by a mental health service provider. This may include documents of legal proceedings under this chapter or chapter 71.34 or 10.77 RCW, or somatic health care information;
- (29) "Intoxicated person" means a person whose mental or physical functioning is substantially impaired as a result of the use of alcohol or other psychoactive chemicals;
 - (30) "Judicial commitment" means a commitment by a court pursuant to the provisions of this chapter;
 - (31) "Legal counsel" means attorneys and staff employed by county prosecutor offices or the state attorney general acting in their capacity as legal representatives of public mental health and substance use disorder service providers under RCW 71.05.130;
 - (32) "Less restrictive alternative treatment" means a program of individualized treatment in a less restrictive setting than inpatient treatment that includes the services described in RCW 71.05.585;
 - (33) "Licensed physician" means a person licensed to practice medicine or osteopathic medicine and surgery in the state of Washington;
 - (34) "Likelihood of serious harm" means:
- 39 (a) A substantial risk that: (i) Physical harm will be inflicted 40 by a person upon his or her own person, as evidenced by threats or Code Rev/MW:eab 5 S-6931.2/20 2nd draft

- attempts to commit suicide or inflict physical harm on oneself; (ii)
 physical harm will be inflicted by a person upon another, as
 evidenced by behavior which has caused such harm or which places
 another person or persons in reasonable fear of sustaining such harm;
 or (iii) physical harm will be inflicted by a person upon the
 property of others, as evidenced by behavior which has caused
 substantial loss or damage to the property of others; or
- 8 (b) The person has threatened the physical safety of another and 9 has a history of one or more violent acts;
 - (35) "Medical clearance" means a physician or other health care provider has determined that a person is medically stable and ready for referral to the designated crisis responder;
 - (36) "Mental disorder" means any organic, mental, or emotional impairment which has substantial adverse effects on a person's cognitive or volitional functions;
 - (37) "Mental health professional" means a psychiatrist, psychologist, physician assistant working with a supervising psychiatrist, psychiatric advanced registered nurse practitioner, psychiatric nurse, or social worker, and such other mental health professionals as may be defined by rules adopted by the secretary pursuant to the provisions of this chapter;
 - (38) "Mental health service provider" means a public or private agency that provides mental health services to persons with mental disorders or substance use disorders as defined under this section and receives funding from public sources. This includes, but is not limited to, hospitals licensed under chapter 70.41 RCW, evaluation and treatment facilities as defined in this section, community mental health service delivery systems or community behavioral health programs as defined in RCW 71.24.025, facilities conducting competency evaluations and restoration under chapter 10.77 RCW, approved substance use disorder treatment programs as defined in this section, secure withdrawal management and stabilization facilities as defined in this section, and correctional facilities operated by state and local governments;
 - (39) "Peace officer" means a law enforcement official of a public agency or governmental unit, and includes persons specifically given peace officer powers by any state law, local ordinance, or judicial order of appointment;
- 39 (40) "Physician assistant" means a person licensed as a physician 40 assistant under chapter 18.57A or 18.71A RCW;

- (41) "Private agency" means any person, partnership, corporation, or association that is not a public agency, whether or not financed in whole or in part by public funds, which constitutes an evaluation and treatment facility or private institution, or hospital, or approved substance use disorder treatment program, which is conducted for, or includes a department or ward conducted for, the care and treatment of persons with mental illness, substance use disorders, or both mental illness and substance use disorders;
 - (42) "Professional person" means a mental health professional, substance use disorder professional, or designated crisis responder and shall also mean a physician, physician assistant, psychiatric advanced registered nurse practitioner, registered nurse, and such others as may be defined by rules adopted by the secretary pursuant to the provisions of this chapter;
 - (43) "Psychiatric advanced registered nurse practitioner" means a person who is licensed as an advanced registered nurse practitioner pursuant to chapter 18.79 RCW; and who is board certified in advanced practice psychiatric and mental health nursing;
- 19 (44) "Psychiatrist" means a person having a license as a 20 physician and surgeon in this state who has in addition completed 21 three years of graduate training in psychiatry in a program approved 22 by the American medical association or the American osteopathic 23 association and is certified or eligible to be certified by the 24 American board of psychiatry and neurology;
 - (45) "Psychologist" means a person who has been licensed as a psychologist pursuant to chapter 18.83 RCW;
 - (46) "Public agency" means any evaluation and treatment facility or institution, secure withdrawal management and stabilization facility, approved substance use disorder treatment program, or hospital which is conducted for, or includes a department or ward conducted for, the care and treatment of persons with mental illness, substance use disorders, or both mental illness and substance use disorders, if the agency is operated directly by federal, state, county, or municipal government, or a combination of such governments;
- 36 (47) "Release" means legal termination of the commitment under 37 the provisions of this chapter;
- 38 (48) "Resource management services" has the meaning given in 39 chapter 71.24 RCW;

- 1 (49) "Secretary" means the secretary of the department of health, 2 or his or her designee;
 - (50) "Secure withdrawal management and stabilization facility" means a facility operated by either a public or private agency or by the program of an agency which provides care to voluntary individuals and individuals involuntarily detained and committed under this chapter for whom there is a likelihood of serious harm or who are gravely disabled due to the presence of a substance use disorder. Secure withdrawal management and stabilization facilities must:
 - (a) Provide the following services:

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- (i) Assessment and treatment, provided by certified substance use disorder professionals or co-occuring disorder specialists;
 - (ii) Clinical stabilization services;
- 14 (iii) Acute or subacute detoxification services for intoxicated 15 individuals; and
 - (iv) Discharge assistance provided by certified substance use disorder professionals or co-occuring disorder specialists, including facilitating transitions to appropriate voluntary or involuntary inpatient services or to less restrictive alternatives as appropriate for the individual;
- 21 (b) Include security measures sufficient to protect the patients, 22 staff, and community; and
 - (c) Be licensed or certified as such by the department of health;
- 24 (51) "Serious violent offense" has the same meaning as provided 25 in RCW 9.94A.030;
 - (52) "Social worker" means a person with a master's or further advanced degree from a social work educational program accredited and approved as provided in RCW 18.320.010;
 - (53) "Substance use disorder" means a cluster of cognitive, behavioral, and physiological symptoms indicating that an individual continues using the substance despite significant substance-related problems. The diagnosis of a substance use disorder is based on a pathological pattern of behaviors related to the use of the substances;
 - (54) "Substance use disorder professional" means a person certified as a substance use disorder professional by the department of health under chapter 18.205 RCW;
- 38 (55) "Therapeutic court personnel" means the staff of a mental 39 health court or other therapeutic court which has jurisdiction over 40 defendants who are dually diagnosed with mental disorders, including Code Rev/MW:eab 8 S-6931.2/20 2nd draft

- court personnel, probation officers, a court monitor, prosecuting attorney, or defense counsel acting within the scope of therapeutic court duties;
- (56) "Treatment records" include registration and all other 4 records concerning persons who are receiving or who at any time have 5 6 received services for mental illness, which are maintained by the department of social and health services, the department, the 7 authority, behavioral health administrative services organizations 8 and their staffs, managed care organizations and their staffs, and by 9 treatment facilities. Treatment records include mental health 10 information contained in a medical bill including but not limited to 11 12 mental health drugs, a mental health diagnosis, provider name, and dates of service stemming from a medical service. Treatment records 13 do not include notes or records maintained for personal use by a 14 person providing treatment services for the department of social and 15 16 health services, the department, the authority, behavioral health 17 administrative services organizations, managed care organizations, or 18 a treatment facility if the notes or records are not available to 19 others;
 - (57) "Triage facility" means a short-term facility or a portion of a facility licensed or certified by the department, which is designed as a facility to assess and stabilize an individual or determine the need for involuntary commitment of an individual, and must meet department residential treatment facility standards. A triage facility may be structured as a voluntary or involuntary placement facility;
 - (58) "Video," unless the context clearly indicates otherwise, means the delivery of behavioral health services through the use of interactive audio and video technology, permitting real-time communication between a person and a designated crisis responder, for the purpose of evaluation. "Video" does not include the use of audio-only telephone, facsimile, email, or store and forward technology. "Store and forward technology" means use of an asynchronous transmission of a person's medical information from a mental health service provider to the designated crisis responder which results in medical diagnosis, consultation, or treatment;
- 37 <u>(59)</u> "Violent act" means behavior that resulted in homicide, 38 attempted suicide, nonfatal injuries, or substantial damage to 39 property.

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- 1 **Sec. 2.** RCW 71.05.150 and 2019 c 446 s 4 are each amended to read as follows:
- 3 When a designated crisis responder receives information alleging that a person, as a result of a mental disorder, substance 4 use disorder, or both presents a likelihood of serious harm or is 5 6 gravely disabled, or that a person is in need of assisted outpatient 7 behavioral health treatment; the designated crisis responder may, after investigation and evaluation of the specific facts alleged and 8 the reliability and credibility of 9 any person to initiate detention or involuntary outpatient 10 11 treatment, if satisfied that the allegations are true and that the 12 person will not voluntarily seek appropriate treatment, file a petition for initial detention under this section or a petition for 13 14 involuntary outpatient behavioral health treatment under 71.05.148. Before filing the petition, the designated crisis 15 16 responder must personally interview the person, unless the person 17 an interview, and determine whether the person will 18 voluntarily receive appropriate evaluation and treatment at evaluation and treatment facility, crisis stabilization unit, triage 19 facility, or approved substance use disorder treatment program. The 20 interview performed by the designated crisis responder may be 21 22 conducted by video provided that a licensed health care professional or professional person who can adequately and accurately assist with 23 obtaining any necessary information is present with the person at the 24 25 time of the interview.
 - (2) (a) An order to detain a person with a mental disorder to a designated evaluation and treatment facility, or to detain a person with a substance use disorder to a secure withdrawal management and stabilization facility or approved substance use disorder treatment program, for not more than a seventy-two-hour evaluation and treatment period may be issued by a judge of the superior court upon request of a designated crisis responder, subject to (d) of this subsection, whenever it appears to the satisfaction of a judge of the superior court:
 - (i) That there is probable cause to support the petition; and
 - (ii) That the person has refused or failed to accept appropriate evaluation and treatment voluntarily.
 - (b) The petition for initial detention, signed under penalty of perjury, or sworn telephonic testimony may be considered by the court

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- 1 in determining whether there are sufficient grounds for issuing the 2 order.
 - (c) The order shall designate retained counsel or, if counsel is appointed from a list provided by the court, the name, business address, and telephone number of the attorney appointed to represent the person.
 - (d) A court may not issue an order to detain a person to a secure withdrawal management and stabilization facility or approved substance use disorder treatment program unless there is an available secure withdrawal management and stabilization facility or approved substance use disorder treatment program that has adequate space for the person.
 - (3) The designated crisis responder shall then serve or cause to be served on such person, his or her guardian, and conservator, if any, a copy of the order together with a notice of rights, and a petition for initial detention. After service on such person the designated crisis responder shall file the return of service in court and provide copies of all papers in the court file to the evaluation treatment facility, secure withdrawal management stabilization facility, or approved substance use disorder treatment program, and the designated attorney. The designated crisis responder shall notify the court and the prosecuting attorney that a probable cause hearing will be held within seventy-two hours of the date and time of outpatient evaluation or admission to the evaluation and treatment facility, secure withdrawal management and stabilization facility, or approved substance use disorder treatment program. The person shall be permitted to be accompanied by one or more of his or her relatives, friends, an attorney, a personal physician, or other professional or religious advisor to the place of evaluation. An attorney accompanying the person to the place of evaluation shall be permitted to be present during the admission evaluation. Any other individual accompanying the person may be present during the admission evaluation. The facility may exclude the individual if his or her presence would present a safety risk, delay the proceedings, or otherwise interfere with the evaluation.
 - (4) The designated crisis responder may notify a peace officer to take such person or cause such person to be taken into custody and placed in an evaluation and treatment facility, secure withdrawal management and stabilization facility, or approved substance use disorder treatment program. At the time such person is taken into 11

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- 1 custody there shall commence to be served on such person, his or her
- 2 guardian, and conservator, if any, a copy of the original order
- 3 together with a notice of rights and a petition for initial
- 4 detention.
- 5 **Sec. 3.** RCW 71.05.150 and 2019 c 446 s 5 are each amended to 6 read as follows:
- 7 When a designated crisis responder receives information (1)alleging that a person, as a result of a mental disorder, substance 8 use disorder, or both presents a likelihood of serious harm or is 9 10 gravely disabled, or that a person is in need of assisted outpatient behavioral health treatment; the designated crisis responder may, 11 after investigation and evaluation of the specific facts alleged and 12 13 reliability and credibility of any person providing information to initiate detention or involuntary outpatient 14 15 treatment, if satisfied that the allegations are true and that the 16 person will not voluntarily seek appropriate treatment, petition for initial detention under this section or a petition for 17 involuntary outpatient behavioral health treatment under RCW 18 71.05.148. Before filing the petition, the designated crisis 19 20 responder must personally interview the person, unless the person 21 refuses an interview, and determine whether the person will 22 voluntarily receive appropriate evaluation and treatment at an 23 evaluation and treatment facility, crisis stabilization unit, triage 24 facility, or approved substance use disorder treatment program. The interview performed by the designated crisis responder may be 25 conducted by video provided that a licensed health care professional 26 27 or professional person who can adequately and accurately assist with obtaining any necessary information is present with the person at the 28 time of the interview. 29
 - (2) (a) An order to detain a person with a mental disorder to a designated evaluation and treatment facility, or to detain a person with a substance use disorder to a secure withdrawal management and stabilization facility or approved substance use disorder treatment program, for not more than a seventy-two-hour evaluation and treatment period may be issued by a judge of the superior court upon request of a designated crisis responder whenever it appears to the satisfaction of a judge of the superior court:
 - (i) That there is probable cause to support the petition; and

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

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- (b) The petition for initial detention, signed under penalty of perjury, or sworn telephonic testimony may be considered by the court in determining whether there are sufficient grounds for issuing the order.
- (c) The order shall designate retained counsel or, if counsel is appointed from a list provided by the court, the name, business address, and telephone number of the attorney appointed to represent the person.
- (3) The designated crisis responder shall then serve or cause to be served on such person, his or her guardian, and conservator, if any, a copy of the order together with a notice of rights, and a petition for initial detention. After service on such person the designated crisis responder shall file the return of service in court and provide copies of all papers in the court file to the evaluation treatment facility, secure withdrawal management stabilization facility, or approved substance use disorder treatment program, and the designated attorney. The designated crisis responder shall notify the court and the prosecuting attorney that a probable cause hearing will be held within seventy-two hours of the date and time of outpatient evaluation or admission to the evaluation and treatment facility, secure withdrawal management and stabilization facility, or approved substance use disorder treatment program. The person shall be permitted to be accompanied by one or more of his or her relatives, friends, an attorney, a personal physician, or other professional or religious advisor to the place of evaluation. An attorney accompanying the person to the place of evaluation shall be permitted to be present during the admission evaluation. Any other individual accompanying the person may be present during the admission evaluation. The facility may exclude the individual if his or her presence would present a safety risk, delay the proceedings, or otherwise interfere with the evaluation.
- (4) The designated crisis responder may notify a peace officer to take such person or cause such person to be taken into custody and placed in an evaluation and treatment facility, secure withdrawal management and stabilization facility, or approved substance use disorder treatment program. At the time such person is taken into custody there shall commence to be served on such person, his or her guardian, and conservator, if any, a copy of the original order Code Rev/MW:eab

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- 1 together with a notice of rights and a petition for initial 2 detention.
- **Sec. 4.** RCW 71.05.153 and 2019 c 446 s 6 are each amended to 4 read as follows:
 - (1) When a designated crisis responder receives information alleging that a person, as the result of a mental disorder, presents an imminent likelihood of serious harm, or is in imminent danger because of being gravely disabled, after investigation and evaluation of the specific facts alleged and of the reliability and credibility of the person or persons providing the information if any, the designated crisis responder may take such person, or cause by oral or written order such person to be taken into emergency custody in an evaluation and treatment facility for not more than seventy-two hours as described in RCW 71.05.180.
 - (2) When a designated crisis responder receives information alleging that a person, as the result of substance use disorder, presents an imminent likelihood of serious harm, or is in imminent danger because of being gravely disabled, after investigation and evaluation of the specific facts alleged and of the reliability and credibility of the person or persons providing the information if any, the designated crisis responder may take the person, or cause by oral or written order the person to be taken, into emergency custody in a secure withdrawal management and stabilization facility or approved substance use disorder treatment program for not more than seventy-two hours as described in RCW 71.05.180, if a secure withdrawal management and stabilization facility or approved substance use disorder treatment program is available and has adequate space for the person.
 - (3) (a) Subject to (b) of this subsection, a peace officer may take or cause such person to be taken into custody and immediately delivered to a triage facility, crisis stabilization unit, evaluation and treatment facility, secure withdrawal management and stabilization facility, approved substance use disorder treatment program, or the emergency department of a local hospital under the following circumstances:
 - (i) Pursuant to subsection (1) or (2) of this section; or
- 37 (ii) When he or she has reasonable cause to believe that such 38 person is suffering from a mental disorder or substance use disorder

- and presents an imminent likelihood of serious harm or is in imminent danger because of being gravely disabled.
- (b) A peace officer's delivery of a person, based on a substance use disorder, to a secure withdrawal management and stabilization facility or approved substance use disorder treatment program is subject to the availability of a secure withdrawal management and stabilization facility or approved substance use disorder treatment program with adequate space for the person.
- (4) Persons delivered to a crisis stabilization unit, evaluation and treatment facility, emergency department of a local hospital, triage facility that has elected to operate as an involuntary facility, secure withdrawal management and stabilization facility, or approved substance use disorder treatment program by peace officers pursuant to subsection (3) of this section may be held by the facility for a period of up to twelve hours, not counting time periods prior to medical clearance.
- (5) Within three hours after arrival, not counting time periods prior to medical clearance, the person must be examined by a mental health professional. Within twelve hours of notice of the need for evaluation, not counting time periods prior to medical clearance, the designated crisis responder must determine whether the individual meets detention criteria. The interview performed by the designated crisis responder may be conducted by video provided that a licensed health care professional or professional person who can adequately and accurately assist with obtaining any necessary information is present with the person at the time of the interview. If the individual is detained, the designated crisis responder shall file a petition for detention or a supplemental petition as appropriate and commence service on the designated attorney for the detained person. If the individual is released to the community, the mental health service provider shall inform the peace officer of the release within a reasonable period of time after the release if the peace officer specifically requested notification and provided contact information to the provider.
- (6) Dismissal of a commitment petition is not the appropriate remedy for a violation of the timeliness requirements of this section based on the intent of this chapter under RCW 71.05.010 except in the few cases where the facility staff or designated mental health professional has totally disregarded the requirements of this section.

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Sec. 5. RCW 71.05.153 and 2019 c 446 s 7 are each amended to 2 read as follows:

- (1) When a designated crisis responder receives information alleging that a person, as the result of a mental disorder, presents an imminent likelihood of serious harm, or is in imminent danger because of being gravely disabled, after investigation and evaluation of the specific facts alleged and of the reliability and credibility of the person or persons providing the information if any, the designated crisis responder may take such person, or cause by oral or written order such person to be taken into emergency custody in an evaluation and treatment facility for not more than seventy-two hours as described in RCW 71.05.180.
- (2) When a designated crisis responder receives information alleging that a person, as the result of substance use disorder, presents an imminent likelihood of serious harm, or is in imminent danger because of being gravely disabled, after investigation and evaluation of the specific facts alleged and of the reliability and credibility of the person or persons providing the information if any, the designated crisis responder may take the person, or cause by oral or written order the person to be taken, into emergency custody in a secure withdrawal management and stabilization facility or approved substance use disorder treatment program for not more than seventy-two hours as described in RCW 71.05.180.
- (3) A peace officer may take or cause such person to be taken into custody and immediately delivered to a triage facility, crisis stabilization unit, evaluation and treatment facility, secure withdrawal management and stabilization facility, approved substance use disorder treatment program, or the emergency department of a local hospital under the following circumstances:
 - (a) Pursuant to subsection (1) or (2) of this section; or
- (b) When he or she has reasonable cause to believe that such person is suffering from a mental disorder or substance use disorder and presents an imminent likelihood of serious harm or is in imminent danger because of being gravely disabled.
- (4) Persons delivered to a crisis stabilization unit, evaluation and treatment facility, emergency department of a local hospital, triage facility that has elected to operate as an involuntary facility, secure withdrawal management and stabilization facility, or approved substance use disorder treatment program by peace officers pursuant to subsection (3) of this section may be held by the Code Rev/MW:eab

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- 1 facility for a period of up to twelve hours, not counting time 2 periods prior to medical clearance.
- (5) Within three hours after arrival, not counting time periods 3 prior to medical clearance, the person must be examined by a mental 4 health professional. Within twelve hours of notice of the need for 5 6 evaluation, not counting time periods prior to medical clearance, the 7 designated crisis responder must determine whether the individual meets detention criteria. The interview performed by the designated 8 crisis responder may be conducted by video provided that a licensed 9 health care professional or professional person who can adequately 10 and accurately assist with obtaining any necessary information is 11 present with the person at the time of the interview. If the 12 individual is detained, the designated crisis responder shall file a 13 petition for detention or a supplemental petition as appropriate and 14 commence service on the designated attorney for the detained person. 15 16 If the individual is released to the community, the mental health 17 service provider shall inform the peace officer of the release within a reasonable period of time after the release if the peace officer 18 19 has specifically requested notification and provided contact information to the provider. 20
- 21 (6) Dismissal of a commitment petition is not the appropriate 22 remedy for a violation of the timeliness requirements of this section 23 based on the intent of this chapter under RCW 71.05.010 except in the 24 few cases where the facility staff or designated mental health 25 professional has totally disregarded the requirements of this 26 section.
- NEW SECTION. Sec. 6. Sections 2 and 4 of this act expire July 1, 2026.
- NEW SECTION. Sec. 7. Sections 3 and 5 of this act take effect 30 July 1, 2026."

ESHB 2099 - S COMM AMD By Subcommittee on Behavioral Health

ADOPTED 03/05/2020

On page 1, line 2 of the title, after "act;" strike the remainder of the title and insert "amending RCW 71.05.150, 71.05.150,

- 1 71.05.153, and 71.05.153; reenacting and amending RCW 71.05.020;
- 2 providing an effective date; and providing an expiration date."

EFFECT: Clarifies the definition of video and the requirements for a designated crisis responder evaluation by video to consistently require a licensed health care professional or professional person to be present with the person during the evaluation. Removes sections duplicative of policy changes enacted in SSB 6124 (2018).

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