

CERTIFICATION OF ENROLLMENT
ENGROSSED SUBSTITUTE HOUSE BILL 1768

66th Legislature
2019 Regular Session

Passed by the House April 28, 2019
Yeas 98 Nays 0

Speaker of the House of Representatives

Passed by the Senate April 28, 2019
Yeas 48 Nays 0

President of the Senate

Approved

Governor of the State of Washington

CERTIFICATE

I, Bernard Dean, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **ENGROSSED SUBSTITUTE HOUSE BILL 1768** as passed by the House of Representatives and the Senate on the dates hereon set forth.

Chief Clerk

FILED

**Secretary of State
State of Washington**

ENGROSSED SUBSTITUTE HOUSE BILL 1768

AS AMENDED BY THE SENATE

Passed Legislature - 2019 Regular Session

State of Washington **66th Legislature** **2019 Regular Session**

By House Health Care & Wellness (originally sponsored by Representatives Davis, Macri, Jinkins, Ormsby, Slatter, and Tharinger)

READ FIRST TIME 02/22/19.

1 AN ACT Relating to modernizing substance use disorder
2 professional practice; amending RCW 18.205.010, 18.205.020,
3 18.205.030, 18.205.080, 18.205.090, 18.205.095, 18.205.100,
4 10.77.079, 13.40.020, 13.40.042, 18.130.040, 43.70.442, 43.70.442,
5 70.97.010, 70.97.030, 71.34.020, 71.34.720, 71.34.720, 71.34.760,
6 18.130.175, 43.43.842, and 18.130.055; reenacting and amending RCW
7 71.05.020; adding new sections to chapter 18.205 RCW; adding a new
8 section to chapter 18.83 RCW; adding a new section to chapter 18.225
9 RCW; creating new sections; providing effective dates; and providing
10 expiration dates.

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

12 **Sec. 1.** RCW 18.205.010 and 1998 c 243 s 1 are each amended to
13 read as follows:

14 The legislature recognizes (~~chemical dependency~~) substance use
15 disorder professionals as discrete health professionals. (~~Chemical~~
16 ~~dependency~~) Substance use disorder professional certification serves
17 the public interest.

18 **Sec. 2.** RCW 18.205.020 and 2008 c 135 s 15 are each amended to
19 read as follows:

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

3 (1) "Certification" means a voluntary process recognizing an
4 individual who qualifies by examination and meets established
5 educational prerequisites, and which protects the title of practice.

6 ~~(2) ("Certified chemical dependency professional" means an
7 individual certified in chemical dependency counseling, under this
8 chapter.~~

9 ~~(3) "Certified chemical dependency professional trainee" means an
10 individual working toward the education and experience requirements
11 for certification as a chemical dependency professional.~~

12 ~~(4) "Chemical dependency counseling" means employing the core
13 competencies of chemical dependency counseling to assist or attempt
14 to assist an alcohol or drug addicted person to develop and maintain
15 abstinence from alcohol and other mood-altering drugs.~~

16 ~~(5))~~ "Committee" means the ~~((chemical dependency))~~ substance use
17 disorder professional certification advisory committee established
18 under this chapter.

19 ~~((6))~~ (3) "Core competencies of ~~((chemical dependency))~~
20 substance use disorder counseling" means competency in the nationally
21 recognized knowledge, skills, and attitudes of professional practice,
22 including assessment and diagnosis of ~~((chemical dependency))~~
23 substance use disorders, ~~((chemical dependency))~~ substance use
24 disorder treatment planning and referral, patient and family
25 education in the disease of ~~((chemical dependency))~~ substance use
26 disorders, individual and group counseling ~~((with alcoholic and drug~~
27 ~~addicted individuals))~~, relapse prevention counseling, and case
28 management, all oriented to assist ~~((alcoholic and drug addicted~~
29 ~~patients to achieve and maintain abstinence from mood-altering~~
30 ~~substances and develop independent support systems))~~ individuals with
31 substance use disorder in their recovery.

32 ~~((7))~~ (4) "Department" means the department of health.

33 ~~((8))~~ (5) "Health profession" means a profession providing
34 health services regulated under the laws of this state.

35 ~~((9))~~ (6) "Recovery" means a process of change through which
36 individuals improve their health and wellness, live self-directed
37 lives, and strive to reach their full potential. Recovery often
38 involves achieving remission from active substance use disorder.

39 (7) "Secretary" means the secretary of health or the secretary's
40 designee.

1 (8) "Substance use disorder counseling" means employing the core
2 competencies of substance use disorder counseling to assist or
3 attempt to assist individuals with substance use disorder in their
4 recovery.

5 (9) "Substance use disorder professional" means an individual
6 certified in substance use disorder counseling under this chapter.

7 (10) "Substance use disorder professional trainee" means an
8 individual working toward the education and experience requirements
9 for certification as a substance use disorder professional.

10 (11) "Co-occurring disorder specialist" means an individual
11 possessing an enhancement that certifies the individual to provide
12 substance use disorder counseling subject to the practice limitations
13 under section 25 of this act.

14 (12) "Agency" means (a) a community behavioral health agency or
15 facility operated, licensed, or certified by the state of Washington;
16 (b) a federally recognized Indian tribe located within the state; (c)
17 a county; (d) a federally qualified health center; or (e) a hospital.

18 (13) "Counseling" means employing any therapeutic techniques
19 including, but not limited to, social work, mental health counseling,
20 marriage and family therapy, and hypnotherapy, for a fee, that offer,
21 assist, or attempt to assist an individual or individuals in the
22 amelioration or adjustment of mental, emotional, or behavioral
23 problems, and includes therapeutic techniques to achieve sensitivity
24 and awareness of self and others and the development of human
25 potential. For the purposes of this chapter, nothing may be construed
26 to imply that the practice of hypnotherapy is necessarily limited to
27 counseling.

28 **Sec. 3.** RCW 18.205.030 and 2008 c 135 s 16 are each amended to
29 read as follows:

30 No person may represent oneself as a certified ~~((chemical~~
31 ~~dependency)) substance use disorder professional ~~((or))~~, certified
32 ~~((chemical dependency)) substance use disorder professional trainee,~~
33 or co-occurring disorder specialist or use any title or description
34 of services of a certified ~~((chemical dependency)) substance use~~
35 disorder professional ~~((or))~~, certified ~~((chemical dependency))~~
36 substance use disorder professional trainee, or co-occurring disorder
37 specialist without applying for certification, meeting the required
38 qualifications, and being certified by the department of health,
39 unless otherwise exempted by this chapter.~~

1 **Sec. 4.** RCW 18.205.080 and 2018 c 201 s 9007 are each amended to
2 read as follows:

3 (1) The secretary shall appoint a (~~chemical-dependency~~)
4 substance use disorder certification advisory committee to further
5 the purposes of this chapter. The committee shall be composed of
6 seven members, one member initially appointed for a term of one year,
7 three for a term of two years, and three for a term of three years.
8 Subsequent appointments shall be for terms of three years. No person
9 may serve as a member of the committee for more than two consecutive
10 terms. Members of the committee shall be residents of this state. The
11 committee shall be composed of four certified (~~chemical-dependency~~)
12 substance use disorder professionals; one (~~chemical-dependency~~)
13 substance use disorder treatment program director; one physician
14 licensed under chapter 18.71 or 18.57 RCW who is certified in
15 addiction medicine or a licensed or certified mental health
16 practitioner; and one member of the public who has received
17 (~~chemical-dependency~~) substance use disorder counseling.

18 (2) The secretary may remove any member of the committee for
19 cause as specified by rule. In the case of a vacancy, the secretary
20 shall appoint a person to serve for the remainder of the unexpired
21 term.

22 (3) The committee shall meet at the times and places designated
23 by the secretary and shall hold meetings during the year as necessary
24 to provide advice to the director. The committee may elect a chair
25 and a vice chair. A majority of the members currently serving shall
26 constitute a quorum.

27 (4) Each member of the committee shall be reimbursed for travel
28 expenses as authorized in RCW 43.03.050 and 43.03.060. In addition,
29 members of the committee shall be compensated in accordance with RCW
30 43.03.240 when engaged in the authorized business of the committee.

31 (5) The director of the health care authority, or his or her
32 designee, shall serve as an ex officio member of the committee.

33 (6) The secretary, members of the committee, or individuals
34 acting on their behalf are immune from suit in any action, civil or
35 criminal, based on any certification or disciplinary proceedings or
36 other official acts performed in the course of their duties.

37 **Sec. 5.** RCW 18.205.090 and 2001 c 251 s 30 are each amended to
38 read as follows:

1 (1) The secretary shall issue a certificate to any applicant who
2 demonstrates to the secretary's satisfaction that the following
3 requirements have been met:

4 (a) Completion of an educational program approved by the
5 secretary or successful completion of alternate training that meets
6 established criteria;

7 (b) Successful completion of an approved examination, based on
8 core competencies of (~~chemical dependency~~) substance use disorder
9 counseling; and

10 (c) Successful completion of an experience requirement that
11 establishes fewer hours of experience for applicants with higher
12 levels of relevant education. In meeting any experience requirement
13 established under this subsection, the secretary may not require more
14 than one thousand five hundred hours of experience in (~~chemical~~
15 ~~dependency~~) substance use disorder counseling for applicants who are
16 licensed under chapter 18.83 RCW or under chapter 18.79 RCW as
17 advanced registered nurse practitioners.

18 (2) The secretary shall establish by rule what constitutes
19 adequate proof of meeting the criteria.

20 (3) Applicants are subject to the grounds for denial of a
21 certificate or issuance of a conditional certificate under chapter
22 18.130 RCW.

23 (4) Certified (~~chemical dependency~~) substance use disorder
24 professionals shall not be required to be registered under chapter
25 18.19 RCW or licensed under chapter 18.225 RCW.

26 (5) As of the effective date of this section, a person certified
27 under this chapter holding the title of chemical dependency
28 professional is considered to hold the title of substance use
29 disorder professional until such time as the person's present
30 certification expires or is renewed.

31 **Sec. 6.** RCW 18.205.095 and 2008 c 135 s 18 are each amended to
32 read as follows:

33 (1) The secretary shall issue a trainee certificate to any
34 applicant who demonstrates to the satisfaction of the secretary that
35 he or she is working toward the education and experience requirements
36 in RCW 18.205.090.

37 (2) A trainee certified under this section shall submit to the
38 secretary for approval a declaration, in accordance with rules
39 adopted by the department, that he or she is enrolled in an approved

1 education program and actively pursuing the experience requirements
2 in RCW 18.205.090. This declaration must be updated with the
3 trainee's annual renewal.

4 (3) A trainee certified under this section may practice only
5 under the supervision of a certified (~~chemical dependency~~)
6 substance use disorder professional. The first fifty hours of any
7 face-to-face client contact must be under direct observation. All
8 remaining experience must be under supervision in accordance with
9 rules adopted by the department.

10 (4) A certified (~~chemical dependency~~) substance use disorder
11 professional trainee provides (~~chemical dependency~~) substance use
12 disorder assessments, counseling, and case management with a state
13 regulated agency and can provide clinical services to patients
14 consistent with his or her education, training, and experience as
15 approved by his or her supervisor.

16 (5) A trainee certification may only be renewed four times.

17 (6) Applicants are subject to denial of a certificate or issuance
18 of a conditional certificate for the reasons set forth in chapter
19 18.130 RCW.

20 (7) As of the effective date of this section, a person certified
21 under this chapter holding the title of chemical dependency
22 professional trainee is considered to hold the title of substance use
23 disorder professional trainee until such time as the person's present
24 certification expires or is renewed.

25 **Sec. 7.** RCW 18.205.100 and 2000 c 171 s 42 are each amended to
26 read as follows:

27 The secretary may establish by rule the standards and procedures
28 for approval of educational programs and alternative training. The
29 requirements for who may provide approved supervision towards
30 training must be the same for all applicants in the regular or
31 alternative training pathways. The requirements for who may provide
32 approved supervision towards training must allow approved supervision
33 to be provided by a person who meets or exceeds the requirements of a
34 certified substance use disorder professional in the state of
35 Washington and who would be eligible to take the examination required
36 for certification. The secretary may utilize or contract with
37 individuals or organizations having expertise in the profession or in
38 education to assist in the evaluations. The secretary shall establish
39 by rule the standards and procedures for revocation of approval of

1 educational programs. The standards and procedures set shall apply
2 equally to educational programs and training in the United States and
3 in foreign jurisdictions. The secretary may establish a fee for
4 educational program evaluations.

5 **Sec. 8.** RCW 10.77.079 and 2015 1st sp.s. c 7 s 9 are each
6 amended to read as follows:

7 (1) If the issue of competency to stand trial is raised by the
8 court or a party under RCW 10.77.060, the prosecutor may continue
9 with the competency process or dismiss the charges without prejudice
10 and refer the defendant for assessment by a mental health
11 professional, (~~chemical dependency~~) substance use disorder
12 professional, co-occurring disorder specialist, or developmental
13 disabilities professional to determine the appropriate service needs
14 for the defendant.

15 (2) This section does not apply to defendants with a current
16 charge or prior conviction for a violent offense or sex offense as
17 defined in RCW 9.94A.030, or a violation of RCW 9A.36.031(1) (d),
18 (f), or (h).

19 **Sec. 9.** RCW 13.40.020 and 2018 c 82 s 3 are each amended to read
20 as follows:

21 For the purposes of this chapter:

22 (1) "Assessment" means an individualized examination of a child
23 to determine the child's psychosocial needs and problems, including
24 the type and extent of any mental health, substance abuse, or co-
25 occurring mental health and substance abuse disorders, and
26 recommendations for treatment. "Assessment" includes, but is not
27 limited to, drug and alcohol evaluations, psychological and
28 psychiatric evaluations, records review, clinical interview, and
29 administration of a formal test or instrument;

30 (2) "Community-based rehabilitation" means one or more of the
31 following: Employment; attendance of information classes; literacy
32 classes; counseling, outpatient substance abuse treatment programs,
33 outpatient mental health programs, anger management classes,
34 education or outpatient treatment programs to prevent animal cruelty,
35 or other services including, when appropriate, restorative justice
36 programs; or attendance at school or other educational programs
37 appropriate for the juvenile as determined by the school district.

1 Placement in community-based rehabilitation programs is subject to
2 available funds;

3 (3) "Community-based sanctions" may include one or more of the
4 following:

5 (a) A fine, not to exceed five hundred dollars;

6 (b) Community restitution not to exceed one hundred fifty hours
7 of community restitution;

8 (4) "Community restitution" means compulsory service, without
9 compensation, performed for the benefit of the community by the
10 offender as punishment for committing an offense. Community
11 restitution may be performed through public or private organizations
12 or through work crews;

13 (5) "Community supervision" means an order of disposition by the
14 court of an adjudicated youth not committed to the department or an
15 order granting a deferred disposition. A community supervision order
16 for a single offense may be for a period of up to two years for a sex
17 offense as defined by RCW 9.94A.030 and up to one year for other
18 offenses. As a mandatory condition of any term of community
19 supervision, the court shall order the juvenile to refrain from
20 committing new offenses. As a mandatory condition of community
21 supervision, the court shall order the juvenile to comply with the
22 mandatory school attendance provisions of chapter 28A.225 RCW and to
23 inform the school of the existence of this requirement. Community
24 supervision is an individualized program comprised of one or more of
25 the following:

26 (a) Community-based sanctions;

27 (b) Community-based rehabilitation;

28 (c) Monitoring and reporting requirements;

29 (d) Posting of a probation bond;

30 (e) Residential treatment, where substance abuse, mental health,
31 and/or co-occurring disorders have been identified in an assessment
32 by a qualified mental health professional, psychologist,
33 psychiatrist, co-occurring disorder specialist, or ~~((chemical~~
34 ~~dependency)) substance use disorder professional and a funded bed is
35 available. If a child agrees to voluntary placement in a state-funded
36 long-term evaluation and treatment facility, the case must follow the
37 existing placement procedure including consideration of less
38 restrictive treatment options and medical necessity.~~

39 (i) A court may order residential treatment after consideration
40 and findings regarding whether:

1 (A) The referral is necessary to rehabilitate the child;

2 (B) The referral is necessary to protect the public or the child;

3 (C) The referral is in the child's best interest;

4 (D) The child has been given the opportunity to engage in less
5 restrictive treatment and has been unable or unwilling to comply; and

6 (E) Inpatient treatment is the least restrictive action
7 consistent with the child's needs and circumstances.

8 (ii) In any case where a court orders a child to inpatient
9 treatment under this section, the court must hold a review hearing no
10 later than sixty days after the youth begins inpatient treatment, and
11 every thirty days thereafter, as long as the youth is in inpatient
12 treatment;

13 (6) "Confinement" means physical custody by the department of
14 children, youth, and families in a facility operated by or pursuant
15 to a contract with the state, or physical custody in a detention
16 facility operated by or pursuant to a contract with any county. The
17 county may operate or contract with vendors to operate county
18 detention facilities. The department may operate or contract to
19 operate detention facilities for juveniles committed to the
20 department. Pretrial confinement or confinement of less than thirty-
21 one days imposed as part of a disposition or modification order may
22 be served consecutively or intermittently, in the discretion of the
23 court;

24 (7) "Court," when used without further qualification, means the
25 juvenile court judge(s) or commissioner(s);

26 (8) "Criminal history" includes all criminal complaints against
27 the respondent for which, prior to the commission of a current
28 offense:

29 (a) The allegations were found correct by a court. If a
30 respondent is convicted of two or more charges arising out of the
31 same course of conduct, only the highest charge from among these
32 shall count as an offense for the purposes of this chapter; or

33 (b) The criminal complaint was diverted by a prosecutor pursuant
34 to the provisions of this chapter on agreement of the respondent and
35 after an advisement to the respondent that the criminal complaint
36 would be considered as part of the respondent's criminal history. A
37 successfully completed deferred adjudication that was entered before
38 July 1, 1998, or a deferred disposition shall not be considered part
39 of the respondent's criminal history;

1 (9) "Department" means the department of children, youth, and
2 families;

3 (10) "Detention facility" means a county facility, paid for by
4 the county, for the physical confinement of a juvenile alleged to
5 have committed an offense or an adjudicated offender subject to a
6 disposition or modification order. "Detention facility" includes
7 county group homes, inpatient substance abuse programs, juvenile
8 basic training camps, and electronic monitoring;

9 (11) "Diversion unit" means any probation counselor who enters
10 into a diversion agreement with an alleged youthful offender, or any
11 other person, community accountability board, youth court under the
12 supervision of the juvenile court, or other entity with whom the
13 juvenile court administrator has contracted to arrange and supervise
14 such agreements pursuant to RCW 13.40.080, or any person, community
15 accountability board, or other entity specially funded by the
16 legislature to arrange and supervise diversion agreements in
17 accordance with the requirements of this chapter. For purposes of
18 this subsection, "community accountability board" means a board
19 comprised of members of the local community in which the juvenile
20 offender resides. The superior court shall appoint the members. The
21 boards shall consist of at least three and not more than seven
22 members. If possible, the board should include a variety of
23 representatives from the community, such as a law enforcement
24 officer, teacher or school administrator, high school student,
25 parent, and business owner, and should represent the cultural
26 diversity of the local community;

27 (12) "Foster care" means temporary physical care in a foster
28 family home or group care facility as defined in RCW 74.15.020 and
29 licensed by the department, or other legally authorized care;

30 (13) "Institution" means a juvenile facility established pursuant
31 to chapters 72.05 and 72.16 through 72.20 RCW;

32 (14) "Intensive supervision program" means a parole program that
33 requires intensive supervision and monitoring, offers an array of
34 individualized treatment and transitional services, and emphasizes
35 community involvement and support in order to reduce the likelihood a
36 juvenile offender will commit further offenses;

37 (15) "Juvenile," "youth," and "child" mean any individual who is
38 under the chronological age of eighteen years and who has not been
39 previously transferred to adult court pursuant to RCW 13.40.110,
40 unless the individual was convicted of a lesser charge or acquitted

1 of the charge for which he or she was previously transferred pursuant
2 to RCW 13.40.110 or who is not otherwise under adult court
3 jurisdiction;

4 (16) "Juvenile offender" means any juvenile who has been found by
5 the juvenile court to have committed an offense, including a person
6 eighteen years of age or older over whom jurisdiction has been
7 extended under RCW 13.40.300;

8 (17) "Labor" means the period of time before a birth during which
9 contractions are of sufficient frequency, intensity, and duration to
10 bring about effacement and progressive dilation of the cervix;

11 (18) "Local sanctions" means one or more of the following: (a)
12 0-30 days of confinement; (b) 0-12 months of community supervision;
13 (c) 0-150 hours of community restitution; or (d) \$0-\$500 fine;

14 (19) "Manifest injustice" means a disposition that would either
15 impose an excessive penalty on the juvenile or would impose a
16 serious, and clear danger to society in light of the purposes of this
17 chapter;

18 (20) "Monitoring and reporting requirements" means one or more of
19 the following: Curfews; requirements to remain at home, school, work,
20 or court-ordered treatment programs during specified hours;
21 restrictions from leaving or entering specified geographical areas;
22 requirements to report to the probation officer as directed and to
23 remain under the probation officer's supervision; and other
24 conditions or limitations as the court may require which may not
25 include confinement;

26 (21) "Offense" means an act designated a violation or a crime if
27 committed by an adult under the law of this state, under any
28 ordinance of any city or county of this state, under any federal law,
29 or under the law of another state if the act occurred in that state;

30 (22) "Physical restraint" means the use of any bodily force or
31 physical intervention to control a juvenile offender or limit a
32 juvenile offender's freedom of movement in a way that does not
33 involve a mechanical restraint. Physical restraint does not include
34 momentary periods of minimal physical restriction by direct person-
35 to-person contact, without the aid of mechanical restraint,
36 accomplished with limited force and designed to:

37 (a) Prevent a juvenile offender from completing an act that would
38 result in potential bodily harm to self or others or damage property;

39 (b) Remove a disruptive juvenile offender who is unwilling to
40 leave the area voluntarily; or

1 (c) Guide a juvenile offender from one location to another;

2 (23) "Postpartum recovery" means (a) the entire period a woman or
3 youth is in the hospital, birthing center, or clinic after giving
4 birth and (b) an additional time period, if any, a treating physician
5 determines is necessary for healing after the youth leaves the
6 hospital, birthing center, or clinic;

7 (24) "Probation bond" means a bond, posted with sufficient
8 security by a surety justified and approved by the court, to secure
9 the offender's appearance at required court proceedings and
10 compliance with court-ordered community supervision or conditions of
11 release ordered pursuant to RCW 13.40.040 or 13.40.050. It also means
12 a deposit of cash or posting of other collateral in lieu of a bond if
13 approved by the court;

14 (25) "Respondent" means a juvenile who is alleged or proven to
15 have committed an offense;

16 (26) "Restitution" means financial reimbursement by the offender
17 to the victim, and shall be limited to easily ascertainable damages
18 for injury to or loss of property, actual expenses incurred for
19 medical treatment for physical injury to persons, lost wages
20 resulting from physical injury, and costs of the victim's counseling
21 reasonably related to the offense. Restitution shall not include
22 reimbursement for damages for mental anguish, pain and suffering, or
23 other intangible losses. Nothing in this chapter shall limit or
24 replace civil remedies or defenses available to the victim or
25 offender;

26 (27) "Restorative justice" means practices, policies, and
27 programs informed by and sensitive to the needs of crime victims that
28 are designed to encourage offenders to accept responsibility for
29 repairing the harm caused by their offense by providing safe and
30 supportive opportunities for voluntary participation and
31 communication between the victim, the offender, their families, and
32 relevant community members;

33 (28) "Restraints" means anything used to control the movement of
34 a person's body or limbs and includes:

35 (a) Physical restraint; or

36 (b) Mechanical device including but not limited to: Metal
37 handcuffs, plastic ties, ankle restraints, leather cuffs, other
38 hospital-type restraints, tasers, or batons;

39 (29) "Screening" means a process that is designed to identify a
40 child who is at risk of having mental health, substance abuse, or co-

1 occurring mental health and substance abuse disorders that warrant
2 immediate attention, intervention, or more comprehensive assessment.
3 A screening may be undertaken with or without the administration of a
4 formal instrument;

5 (30) "Secretary" means the secretary of the department;

6 (31) "Services" means services which provide alternatives to
7 incarceration for those juveniles who have pleaded or been
8 adjudicated guilty of an offense or have signed a diversion agreement
9 pursuant to this chapter;

10 (32) "Sex offense" means an offense defined as a sex offense in
11 RCW 9.94A.030;

12 (33) "Sexual motivation" means that one of the purposes for which
13 the respondent committed the offense was for the purpose of his or
14 her sexual gratification;

15 (34) "Surety" means an entity licensed under state insurance laws
16 or by the state department of licensing, to write corporate,
17 property, or probation bonds within the state, and justified and
18 approved by the superior court of the county having jurisdiction of
19 the case;

20 (35) "Transportation" means the conveying, by any means, of an
21 incarcerated pregnant youth from the institution or detention
22 facility to another location from the moment she leaves the
23 institution or detention facility to the time of arrival at the other
24 location, and includes the escorting of the pregnant incarcerated
25 youth from the institution or detention facility to a transport
26 vehicle and from the vehicle to the other location;

27 (36) "Violation" means an act or omission, which if committed by
28 an adult, must be proven beyond a reasonable doubt, and is punishable
29 by sanctions which do not include incarceration;

30 (37) "Violent offense" means a violent offense as defined in RCW
31 9.94A.030;

32 (38) "Youth court" means a diversion unit under the supervision
33 of the juvenile court.

34 **Sec. 10.** RCW 13.40.042 and 2014 c 128 s 4 are each amended to
35 read as follows:

36 (1) When a police officer has reasonable cause to believe that a
37 juvenile has committed acts constituting a nonfelony crime that is
38 not a serious offense as identified in RCW 10.77.092, and the officer
39 believes that the juvenile suffers from a mental disorder, and the

1 local prosecutor has entered into an agreement with law enforcement
2 regarding the detention of juveniles who may have a mental disorder
3 or may be suffering from chemical dependency, the arresting officer,
4 instead of taking the juvenile to the local juvenile detention
5 facility, may take the juvenile to:

6 (a) An evaluation and treatment facility as defined in RCW
7 71.34.020 if the juvenile suffers from a mental disorder and the
8 facility has been identified as an alternative location by agreement
9 of the prosecutor, law enforcement, and the mental health provider;

10 (b) A facility or program identified by agreement of the
11 prosecutor and law enforcement; or

12 (c) A location already identified and in use by law enforcement
13 for the purpose of a behavioral health diversion.

14 (2) For the purposes of this section, an "alternative location"
15 means a facility or program that has the capacity to evaluate a youth
16 and, if determined to be appropriate, develop a behavioral health
17 intervention plan and initiate treatment.

18 (3) If a juvenile is taken to any location described in
19 subsection (1)(a) or (b) of this section, the juvenile may be held
20 for up to twelve hours and must be examined by a mental health or
21 (~~chemical dependency~~) substance use disorder professional within
22 three hours of arrival.

23 (4) The authority provided pursuant to this section is in
24 addition to existing authority under RCW 10.31.110 and 10.31.120.

25 **Sec. 11.** RCW 18.130.040 and 2017 c 336 s 18 are each amended to
26 read as follows:

27 (1) This chapter applies only to the secretary and the boards and
28 commissions having jurisdiction in relation to the professions
29 licensed under the chapters specified in this section. This chapter
30 does not apply to any business or profession not licensed under the
31 chapters specified in this section.

32 (2)(a) The secretary has authority under this chapter in relation
33 to the following professions:

34 (i) Dispensing opticians licensed and designated apprentices
35 under chapter 18.34 RCW;

36 (ii) Midwives licensed under chapter 18.50 RCW;

37 (iii) Ocularists licensed under chapter 18.55 RCW;

38 (iv) Massage therapists and businesses licensed under chapter
39 18.108 RCW;

- 1 (v) Dental hygienists licensed under chapter 18.29 RCW;
- 2 (vi) East Asian medicine practitioners licensed under chapter
3 18.06 RCW;
- 4 (vii) Radiologic technologists certified and X-ray technicians
5 registered under chapter 18.84 RCW;
- 6 (viii) Respiratory care practitioners licensed under chapter
7 18.89 RCW;
- 8 (ix) Hypnotherapists and agency affiliated counselors registered
9 and advisors and counselors certified under chapter 18.19 RCW;
- 10 (x) Persons licensed as mental health counselors, mental health
11 counselor associates, marriage and family therapists, marriage and
12 family therapist associates, social workers, social work associates—
13 advanced, and social work associates—independent clinical under
14 chapter 18.225 RCW;
- 15 (xi) Persons registered as nursing pool operators under chapter
16 18.52C RCW;
- 17 (xii) Nursing assistants registered or certified or medication
18 assistants endorsed under chapter 18.88A RCW;
- 19 (xiii) Dietitians and nutritionists certified under chapter
20 18.138 RCW;
- 21 (xiv) (~~Chemical—dependency~~) Substance use disorder
22 professionals (~~and chemical dependency~~), substance use disorder
23 professional trainees, or co-occurring disorder specialists certified
24 under chapter 18.205 RCW;
- 25 (xv) Sex offender treatment providers and certified affiliate sex
26 offender treatment providers certified under chapter 18.155 RCW;
- 27 (xvi) Persons licensed and certified under chapter 18.73 RCW or
28 RCW 18.71.205;
- 29 (xvii) Orthotists and prosthetists licensed under chapter 18.200
30 RCW;
- 31 (xviii) Surgical technologists registered under chapter 18.215
32 RCW;
- 33 (xix) Recreational therapists under chapter 18.230 RCW;
- 34 (xx) Animal massage therapists certified under chapter 18.240
35 RCW;
- 36 (xxi) Athletic trainers licensed under chapter 18.250 RCW;
- 37 (xxii) Home care aides certified under chapter 18.88B RCW;
- 38 (xxiii) Genetic counselors licensed under chapter 18.290 RCW;
- 39 (xxiv) Reflexologists certified under chapter 18.108 RCW;

1 (xxv) Medical assistants-certified, medical assistants-
2 hemodialysis technician, medical assistants-phlebotomist, forensic
3 phlebotomist, and medical assistants-registered certified and
4 registered under chapter 18.360 RCW; and

5 (xxvi) Behavior analysts, assistant behavior analysts, and
6 behavior technicians under chapter 18.380 RCW.

7 (b) The boards and commissions having authority under this
8 chapter are as follows:

9 (i) The podiatric medical board as established in chapter 18.22
10 RCW;

11 (ii) The chiropractic quality assurance commission as established
12 in chapter 18.25 RCW;

13 (iii) The dental quality assurance commission as established in
14 chapter 18.32 RCW governing licenses issued under chapter 18.32 RCW,
15 licenses and registrations issued under chapter 18.260 RCW, and
16 certifications issued under chapter 18.350 RCW;

17 (iv) The board of hearing and speech as established in chapter
18 18.35 RCW;

19 (v) The board of examiners for nursing home administrators as
20 established in chapter 18.52 RCW;

21 (vi) The optometry board as established in chapter 18.54 RCW
22 governing licenses issued under chapter 18.53 RCW;

23 (vii) The board of osteopathic medicine and surgery as
24 established in chapter 18.57 RCW governing licenses issued under
25 chapters 18.57 and 18.57A RCW;

26 (viii) The pharmacy quality assurance commission as established
27 in chapter 18.64 RCW governing licenses issued under chapters 18.64
28 and 18.64A RCW;

29 (ix) The medical quality assurance commission as established in
30 chapter 18.71 RCW governing licenses and registrations issued under
31 chapters 18.71 and 18.71A RCW;

32 (x) The board of physical therapy as established in chapter 18.74
33 RCW;

34 (xi) The board of occupational therapy practice as established in
35 chapter 18.59 RCW;

36 (xii) The nursing care quality assurance commission as
37 established in chapter 18.79 RCW governing licenses and registrations
38 issued under that chapter;

39 (xiii) The examining board of psychology and its disciplinary
40 committee as established in chapter 18.83 RCW;

1 (xiv) The veterinary board of governors as established in chapter
2 18.92 RCW;

3 (xv) The board of naturopathy established in chapter 18.36A RCW;
4 and

5 (xvi) The board of denturists established in chapter 18.30 RCW.

6 (3) In addition to the authority to discipline license holders,
7 the disciplining authority has the authority to grant or deny
8 licenses. The disciplining authority may also grant a license subject
9 to conditions.

10 (4) All disciplining authorities shall adopt procedures to ensure
11 substantially consistent application of this chapter, the uniform
12 disciplinary act, among the disciplining authorities listed in
13 subsection (2) of this section.

14 **Sec. 12.** RCW 43.70.442 and 2016 c 90 s 5 are each amended to
15 read as follows:

16 (1)(a) Each of the following professionals certified or licensed
17 under Title 18 RCW shall, at least once every six years, complete
18 training in suicide assessment, treatment, and management that is
19 approved, in rule, by the relevant disciplining authority:

20 (i) An adviser or counselor certified under chapter 18.19 RCW;

21 (ii) A ~~((chemical—dependency))~~ substance use disorder
22 professional licensed under chapter 18.205 RCW;

23 (iii) A marriage and family therapist licensed under chapter
24 18.225 RCW;

25 (iv) A mental health counselor licensed under chapter 18.225 RCW;

26 (v) An occupational therapy practitioner licensed under chapter
27 18.59 RCW;

28 (vi) A psychologist licensed under chapter 18.83 RCW;

29 (vii) An advanced social worker or independent clinical social
30 worker licensed under chapter 18.225 RCW; and

31 (viii) A social worker associate—advanced or social worker
32 associate—independent clinical licensed under chapter 18.225 RCW.

33 (b) The requirements in (a) of this subsection apply to a person
34 holding a retired active license for one of the professions in (a) of
35 this subsection.

36 (c) The training required by this subsection must be at least six
37 hours in length, unless a disciplining authority has determined,
38 under subsection (10)(b) of this section, that training that includes
39 only screening and referral elements is appropriate for the

1 profession in question, in which case the training must be at least
2 three hours in length.

3 (d) Beginning July 1, 2017, the training required by this
4 subsection must be on the model list developed under subsection (6)
5 of this section. Nothing in this subsection (1)(d) affects the
6 validity of training completed prior to July 1, 2017.

7 (2)(a) Except as provided in (b) of this subsection, a
8 professional listed in subsection (1)(a) of this section must
9 complete the first training required by this section by the end of
10 the first full continuing education reporting period after January 1,
11 2014, or during the first full continuing education reporting period
12 after initial licensure or certification, whichever occurs later.

13 (b) A professional listed in subsection (1)(a) of this section
14 applying for initial licensure may delay completion of the first
15 training required by this section for six years after initial
16 licensure if he or she can demonstrate successful completion of the
17 training required in subsection (1) of this section no more than six
18 years prior to the application for initial licensure.

19 (3) The hours spent completing training in suicide assessment,
20 treatment, and management under this section count toward meeting any
21 applicable continuing education or continuing competency requirements
22 for each profession.

23 (4)(a) A disciplining authority may, by rule, specify minimum
24 training and experience that is sufficient to exempt an individual
25 professional from the training requirements in subsections (1) and
26 (5) of this section. Nothing in this subsection (4)(a) allows a
27 disciplining authority to provide blanket exemptions to broad
28 categories or specialties within a profession.

29 (b) A disciplining authority may exempt a professional from the
30 training requirements of subsections (1) and (5) of this section if
31 the professional has only brief or limited patient contact.

32 (5)(a) Each of the following professionals credentialed under
33 Title 18 RCW shall complete a one-time training in suicide
34 assessment, treatment, and management that is approved by the
35 relevant disciplining authority:

36 (i) A chiropractor licensed under chapter 18.25 RCW;

37 (ii) A naturopath licensed under chapter 18.36A RCW;

38 (iii) A licensed practical nurse, registered nurse, or advanced
39 registered nurse practitioner, other than a certified registered
40 nurse anesthetist, licensed under chapter 18.79 RCW;

1 (iv) An osteopathic physician and surgeon licensed under chapter
2 18.57 RCW, other than a holder of a postgraduate osteopathic medicine
3 and surgery license issued under RCW 18.57.035;

4 (v) An osteopathic physician assistant licensed under chapter
5 18.57A RCW;

6 (vi) A physical therapist or physical therapist assistant
7 licensed under chapter 18.74 RCW;

8 (vii) A physician licensed under chapter 18.71 RCW, other than a
9 resident holding a limited license issued under RCW 18.71.095(3);

10 (viii) A physician assistant licensed under chapter 18.71A RCW;

11 (ix) A pharmacist licensed under chapter 18.64 RCW; and

12 (x) A person holding a retired active license for one of the
13 professions listed in (a)(i) through (ix) of this subsection.

14 (b)(i) A professional listed in (a)(i) through (viii) of this
15 subsection or a person holding a retired active license for one of
16 the professions listed in (a)(i) through (viii) of this subsection
17 must complete the one-time training by the end of the first full
18 continuing education reporting period after January 1, 2016, or
19 during the first full continuing education reporting period after
20 initial licensure, whichever is later. Training completed between
21 June 12, 2014, and January 1, 2016, that meets the requirements of
22 this section, other than the timing requirements of this subsection
23 (5)(b), must be accepted by the disciplining authority as meeting the
24 one-time training requirement of this subsection (5).

25 (ii) A licensed pharmacist or a person holding a retired active
26 pharmacist license must complete the one-time training by the end of
27 the first full continuing education reporting period after January 1,
28 2017, or during the first full continuing education reporting period
29 after initial licensure, whichever is later.

30 (c) The training required by this subsection must be at least six
31 hours in length, unless a disciplining authority has determined,
32 under subsection (10)(b) of this section, that training that includes
33 only screening and referral elements is appropriate for the
34 profession in question, in which case the training must be at least
35 three hours in length.

36 (d) Beginning July 1, 2017, the training required by this
37 subsection must be on the model list developed under subsection (6)
38 of this section. Nothing in this subsection (5)(d) affects the
39 validity of training completed prior to July 1, 2017.

1 (6) (a) The secretary and the disciplining authorities shall work
2 collaboratively to develop a model list of training programs in
3 suicide assessment, treatment, and management.

4 (b) The secretary and the disciplining authorities shall update
5 the list at least once every two years.

6 (c) By June 30, 2016, the department shall adopt rules
7 establishing minimum standards for the training programs included on
8 the model list. The minimum standards must require that six-hour
9 trainings include content specific to veterans and the assessment of
10 issues related to imminent harm via lethal means or self-injurious
11 behaviors and that three-hour trainings for pharmacists include
12 content related to the assessment of issues related to imminent harm
13 via lethal means. When adopting the rules required under this
14 subsection (6) (c), the department shall:

15 (i) Consult with the affected disciplining authorities, public
16 and private institutions of higher education, educators, experts in
17 suicide assessment, treatment, and management, the Washington
18 department of veterans affairs, and affected professional
19 associations; and

20 (ii) Consider standards related to the best practices registry of
21 the American foundation for suicide prevention and the suicide
22 prevention resource center.

23 (d) Beginning January 1, 2017:

24 (i) The model list must include only trainings that meet the
25 minimum standards established in the rules adopted under (c) of this
26 subsection and any three-hour trainings that met the requirements of
27 this section on or before July 24, 2015;

28 (ii) The model list must include six-hour trainings in suicide
29 assessment, treatment, and management, and three-hour trainings that
30 include only screening and referral elements; and

31 (iii) A person or entity providing the training required in this
32 section may petition the department for inclusion on the model list.
33 The department shall add the training to the list only if the
34 department determines that the training meets the minimum standards
35 established in the rules adopted under (c) of this subsection.

36 (7) The department shall provide the health profession training
37 standards created in this section to the professional educator
38 standards board as a model in meeting the requirements of RCW
39 28A.410.226 and provide technical assistance, as requested, in the
40 review and evaluation of educator training programs. The educator

1 training programs approved by the professional educator standards
2 board may be included in the department's model list.

3 (8) Nothing in this section may be interpreted to expand or limit
4 the scope of practice of any profession regulated under chapter
5 18.130 RCW.

6 (9) The secretary and the disciplining authorities affected by
7 this section shall adopt any rules necessary to implement this
8 section.

9 (10) For purposes of this section:

10 (a) "Disciplining authority" has the same meaning as in RCW
11 18.130.020.

12 (b) "Training in suicide assessment, treatment, and management"
13 means empirically supported training approved by the appropriate
14 disciplining authority that contains the following elements: Suicide
15 assessment, including screening and referral, suicide treatment, and
16 suicide management. However, the disciplining authority may approve
17 training that includes only screening and referral elements if
18 appropriate for the profession in question based on the profession's
19 scope of practice. The board of occupational therapy may also approve
20 training that includes only screening and referral elements if
21 appropriate for occupational therapy practitioners based on practice
22 setting.

23 (11) A state or local government employee is exempt from the
24 requirements of this section if he or she receives a total of at
25 least six hours of training in suicide assessment, treatment, and
26 management from his or her employer every six years. For purposes of
27 this subsection, the training may be provided in one six-hour block
28 or may be spread among shorter training sessions at the employer's
29 discretion.

30 (12) An employee of a community mental health agency licensed
31 under chapter 71.24 RCW or a chemical dependency program certified
32 under chapter 70.96A RCW is exempt from the requirements of this
33 section if he or she receives a total of at least six hours of
34 training in suicide assessment, treatment, and management from his or
35 her employer every six years. For purposes of this subsection, the
36 training may be provided in one six-hour block or may be spread among
37 shorter training sessions at the employer's discretion.

38 **Sec. 13.** RCW 43.70.442 and 2017 c 262 s 4 are each amended to
39 read as follows:

1 (1)(a) Each of the following professionals certified or licensed
2 under Title 18 RCW shall, at least once every six years, complete
3 training in suicide assessment, treatment, and management that is
4 approved, in rule, by the relevant disciplining authority:

5 (i) An adviser or counselor certified under chapter 18.19 RCW;

6 (ii) A ~~((chemical—dependency))~~ substance use disorder
7 professional licensed under chapter 18.205 RCW;

8 (iii) A marriage and family therapist licensed under chapter
9 18.225 RCW;

10 (iv) A mental health counselor licensed under chapter 18.225 RCW;

11 (v) An occupational therapy practitioner licensed under chapter
12 18.59 RCW;

13 (vi) A psychologist licensed under chapter 18.83 RCW;

14 (vii) An advanced social worker or independent clinical social
15 worker licensed under chapter 18.225 RCW; and

16 (viii) A social worker associate—advanced or social worker
17 associate—~~independent~~ clinical licensed under chapter 18.225 RCW.

18 (b) The requirements in (a) of this subsection apply to a person
19 holding a retired active license for one of the professions in (a) of
20 this subsection.

21 (c) The training required by this subsection must be at least six
22 hours in length, unless a disciplining authority has determined,
23 under subsection (10)(b) of this section, that training that includes
24 only screening and referral elements is appropriate for the
25 profession in question, in which case the training must be at least
26 three hours in length.

27 (d) Beginning July 1, 2017, the training required by this
28 subsection must be on the model list developed under subsection (6)
29 of this section. Nothing in this subsection (1)(d) affects the
30 validity of training completed prior to July 1, 2017.

31 (2)(a) Except as provided in (b) of this subsection, a
32 professional listed in subsection (1)(a) of this section must
33 complete the first training required by this section by the end of
34 the first full continuing education reporting period after January 1,
35 2014, or during the first full continuing education reporting period
36 after initial licensure or certification, whichever occurs later.

37 (b) A professional listed in subsection (1)(a) of this section
38 applying for initial licensure may delay completion of the first
39 training required by this section for six years after initial
40 licensure if he or she can demonstrate successful completion of the

1 training required in subsection (1) of this section no more than six
2 years prior to the application for initial licensure.

3 (3) The hours spent completing training in suicide assessment,
4 treatment, and management under this section count toward meeting any
5 applicable continuing education or continuing competency requirements
6 for each profession.

7 (4)(a) A disciplining authority may, by rule, specify minimum
8 training and experience that is sufficient to exempt an individual
9 professional from the training requirements in subsections (1) and
10 (5) of this section. Nothing in this subsection (4)(a) allows a
11 disciplining authority to provide blanket exemptions to broad
12 categories or specialties within a profession.

13 (b) A disciplining authority may exempt a professional from the
14 training requirements of subsections (1) and (5) of this section if
15 the professional has only brief or limited patient contact.

16 (5)(a) Each of the following professionals credentialed under
17 Title 18 RCW shall complete a one-time training in suicide
18 assessment, treatment, and management that is approved by the
19 relevant disciplining authority:

20 (i) A chiropractor licensed under chapter 18.25 RCW;

21 (ii) A naturopath licensed under chapter 18.36A RCW;

22 (iii) A licensed practical nurse, registered nurse, or advanced
23 registered nurse practitioner, other than a certified registered
24 nurse anesthetist, licensed under chapter 18.79 RCW;

25 (iv) An osteopathic physician and surgeon licensed under chapter
26 18.57 RCW, other than a holder of a postgraduate osteopathic medicine
27 and surgery license issued under RCW 18.57.035;

28 (v) An osteopathic physician assistant licensed under chapter
29 18.57A RCW;

30 (vi) A physical therapist or physical therapist assistant
31 licensed under chapter 18.74 RCW;

32 (vii) A physician licensed under chapter 18.71 RCW, other than a
33 resident holding a limited license issued under RCW 18.71.095(3);

34 (viii) A physician assistant licensed under chapter 18.71A RCW;

35 (ix) A pharmacist licensed under chapter 18.64 RCW;

36 (x) A dentist licensed under chapter 18.32 RCW;

37 (xi) A dental hygienist licensed under chapter 18.29 RCW; and

38 (xii) A person holding a retired active license for one of the
39 professions listed in (a)(i) through (xi) of this subsection.

1 (b)(i) A professional listed in (a)(i) through (viii) of this
2 subsection or a person holding a retired active license for one of
3 the professions listed in (a)(i) through (viii) of this subsection
4 must complete the one-time training by the end of the first full
5 continuing education reporting period after January 1, 2016, or
6 during the first full continuing education reporting period after
7 initial licensure, whichever is later. Training completed between
8 June 12, 2014, and January 1, 2016, that meets the requirements of
9 this section, other than the timing requirements of this subsection
10 (5)(b), must be accepted by the disciplining authority as meeting the
11 one-time training requirement of this subsection (5).

12 (ii) A licensed pharmacist or a person holding a retired active
13 pharmacist license must complete the one-time training by the end of
14 the first full continuing education reporting period after January 1,
15 2017, or during the first full continuing education reporting period
16 after initial licensure, whichever is later.

17 (iii) A licensed dentist, a licensed dental hygienist, or a
18 person holding a retired active license as a dentist shall complete
19 the one-time training by the end of the full continuing education
20 reporting period after August 1, 2020, or during the first full
21 continuing education reporting period after initial licensure,
22 whichever is later. Training completed between July 23, 2017, and
23 August 1, 2020, that meets the requirements of this section, other
24 than the timing requirements of this subsection (5)(b)(iii), must be
25 accepted by the disciplining authority as meeting the one-time
26 training requirement of this subsection (5).

27 (c) The training required by this subsection must be at least six
28 hours in length, unless a disciplining authority has determined,
29 under subsection (10)(b) of this section, that training that includes
30 only screening and referral elements is appropriate for the
31 profession in question, in which case the training must be at least
32 three hours in length.

33 (d) Beginning July 1, 2017, the training required by this
34 subsection must be on the model list developed under subsection (6)
35 of this section. Nothing in this subsection (5)(d) affects the
36 validity of training completed prior to July 1, 2017.

37 (6)(a) The secretary and the disciplining authorities shall work
38 collaboratively to develop a model list of training programs in
39 suicide assessment, treatment, and management.

1 (b) The secretary and the disciplining authorities shall update
2 the list at least once every two years.

3 (c) By June 30, 2016, the department shall adopt rules
4 establishing minimum standards for the training programs included on
5 the model list. The minimum standards must require that six-hour
6 trainings include content specific to veterans and the assessment of
7 issues related to imminent harm via lethal means or self-injurious
8 behaviors and that three-hour trainings for pharmacists or dentists
9 include content related to the assessment of issues related to
10 imminent harm via lethal means. When adopting the rules required
11 under this subsection (6)(c), the department shall:

12 (i) Consult with the affected disciplining authorities, public
13 and private institutions of higher education, educators, experts in
14 suicide assessment, treatment, and management, the Washington
15 department of veterans affairs, and affected professional
16 associations; and

17 (ii) Consider standards related to the best practices registry of
18 the American foundation for suicide prevention and the suicide
19 prevention resource center.

20 (d) Beginning January 1, 2017:

21 (i) The model list must include only trainings that meet the
22 minimum standards established in the rules adopted under (c) of this
23 subsection and any three-hour trainings that met the requirements of
24 this section on or before July 24, 2015;

25 (ii) The model list must include six-hour trainings in suicide
26 assessment, treatment, and management, and three-hour trainings that
27 include only screening and referral elements; and

28 (iii) A person or entity providing the training required in this
29 section may petition the department for inclusion on the model list.
30 The department shall add the training to the list only if the
31 department determines that the training meets the minimum standards
32 established in the rules adopted under (c) of this subsection.

33 (7) The department shall provide the health profession training
34 standards created in this section to the professional educator
35 standards board as a model in meeting the requirements of RCW
36 28A.410.226 and provide technical assistance, as requested, in the
37 review and evaluation of educator training programs. The educator
38 training programs approved by the professional educator standards
39 board may be included in the department's model list.

1 (8) Nothing in this section may be interpreted to expand or limit
2 the scope of practice of any profession regulated under chapter
3 18.130 RCW.

4 (9) The secretary and the disciplining authorities affected by
5 this section shall adopt any rules necessary to implement this
6 section.

7 (10) For purposes of this section:

8 (a) "Disciplining authority" has the same meaning as in RCW
9 18.130.020.

10 (b) "Training in suicide assessment, treatment, and management"
11 means empirically supported training approved by the appropriate
12 disciplining authority that contains the following elements: Suicide
13 assessment, including screening and referral, suicide treatment, and
14 suicide management. However, the disciplining authority may approve
15 training that includes only screening and referral elements if
16 appropriate for the profession in question based on the profession's
17 scope of practice. The board of occupational therapy may also approve
18 training that includes only screening and referral elements if
19 appropriate for occupational therapy practitioners based on practice
20 setting.

21 (11) A state or local government employee is exempt from the
22 requirements of this section if he or she receives a total of at
23 least six hours of training in suicide assessment, treatment, and
24 management from his or her employer every six years. For purposes of
25 this subsection, the training may be provided in one six-hour block
26 or may be spread among shorter training sessions at the employer's
27 discretion.

28 (12) An employee of a community mental health agency licensed
29 under chapter 71.24 RCW or a chemical dependency program certified
30 under chapter 70.96A RCW is exempt from the requirements of this
31 section if he or she receives a total of at least six hours of
32 training in suicide assessment, treatment, and management from his or
33 her employer every six years. For purposes of this subsection, the
34 training may be provided in one six-hour block or may be spread among
35 shorter training sessions at the employer's discretion.

36 **Sec. 14.** RCW 70.97.010 and 2016 sp.s. c 29 s 419 are each
37 amended to read as follows:

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

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

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

8 (3) "Chemical dependency" means alcoholism, drug addiction, or
9 dependence on alcohol and one or more other psychoactive chemicals,
10 as the context requires and as those terms are defined in chapter
11 71.05 RCW.

12 ~~(4) ("Chemical dependency professional" means a person certified~~
13 ~~as a chemical dependency professional by the department of health~~
14 ~~under chapter 18.205 RCW.~~

15 ~~(5))~~ (5) "Commitment" means the determination by a court that an
16 individual should be detained for a period of either evaluation or
17 treatment, or both, in an inpatient or a less restrictive setting.

18 ~~((6))~~ (6) "Conditional release" means a modification of a
19 commitment that may be revoked upon violation of any of its terms.

20 ~~((7))~~ (7) "Custody" means involuntary detention under chapter
21 71.05 RCW, uninterrupted by any period of unconditional release from
22 commitment from a facility providing involuntary care and treatment.

23 ~~((8))~~ (8) "Department" means the department of social and
24 health services.

25 ~~((9))~~ (9) "Designated crisis responder" has the same meaning as
26 in chapter 71.05 RCW.

27 ~~((10))~~ (10) "Detention" or "detain" means the lawful confinement
28 of an individual under chapter 71.05 RCW.

29 ~~((11))~~ (11) "Discharge" means the termination of facility
30 authority. The commitment may remain in place, be terminated, or be
31 amended by court order.

32 ~~((12))~~ (12) "Enhanced services facility" means a facility that
33 provides treatment and services to persons for whom acute inpatient
34 treatment is not medically necessary and who have been determined by
35 the department to be inappropriate for placement in other licensed
36 facilities due to the complex needs that result in behavioral and
37 security issues.

38 ~~((13))~~ (13) "Expanded community services program" means a
39 nonsecure program of enhanced behavioral and residential support
40 provided to long-term and residential care providers serving

1 specifically eligible clients who would otherwise be at risk for
2 hospitalization at state hospital geriatric units.

3 ~~((14))~~ (13) "Facility" means an enhanced services facility.

4 ~~((15))~~ (14) "Gravely disabled" means a condition in which an
5 individual, as a result of a mental disorder, as a result of the use
6 of alcohol or other psychoactive chemicals, or both:

7 (a) Is in danger of serious physical harm resulting from a
8 failure to provide for his or her essential human needs of health or
9 safety; or

10 (b) Manifests severe deterioration in routine functioning
11 evidenced by repeated and escalating loss of cognitive or volitional
12 control over his or her actions and is not receiving such care as is
13 essential for his or her health or safety.

14 ~~((16))~~ (15) "History of one or more violent acts" refers to the
15 period of time ten years before the filing of a petition under this
16 chapter or chapter 71.05 RCW, excluding any time spent, but not any
17 violent acts committed, in a mental health facility or a long-term
18 alcoholism or drug treatment facility, or in confinement as a result
19 of a criminal conviction.

20 ~~((17))~~ (16) "Licensed physician" means a person licensed to
21 practice medicine or osteopathic medicine and surgery in the state of
22 Washington.

23 ~~((18))~~ (17) "Likelihood of serious harm" means:

24 (a) A substantial risk that:

25 (i) Physical harm will be inflicted by an individual upon his or
26 her own person, as evidenced by threats or attempts to commit suicide
27 or inflict physical harm on oneself;

28 (ii) Physical harm will be inflicted by an individual upon
29 another, as evidenced by behavior that has caused such harm or that
30 places another person or persons in reasonable fear of sustaining
31 such harm; or

32 (iii) Physical harm will be inflicted by an individual upon the
33 property of others, as evidenced by behavior that has caused
34 substantial loss or damage to the property of others; or

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

37 ~~((19))~~ (18) "Mental disorder" means any organic, mental, or
38 emotional impairment that has substantial adverse effects on an
39 individual's cognitive or volitional functions.

1 ~~((20))~~ (19) "Mental health professional" means a psychiatrist,
2 psychologist, psychiatric nurse, or social worker, and such other
3 mental health professionals as may be defined by rules adopted by the
4 secretary under the authority of chapter 71.05 RCW.

5 ~~((21))~~ (20) "Professional person" means a mental health
6 professional and also means a physician, registered nurse, and such
7 others as may be defined in rules adopted by the secretary pursuant
8 to the provisions of this chapter.

9 ~~((22))~~ (21) "Psychiatrist" means a person having a license as a
10 physician and surgeon in this state who has in addition completed
11 three years of graduate training in psychiatry in a program approved
12 by the American medical association or the American osteopathic
13 association and is certified or eligible to be certified by the
14 American board of psychiatry and neurology.

15 ~~((23))~~ (22) "Psychologist" means a person who has been licensed
16 as a psychologist under chapter 18.83 RCW.

17 ~~((24))~~ (23) "Registration records" include all the records of
18 the department, behavioral health organizations, treatment
19 facilities, and other persons providing services to the department,
20 county departments, or facilities which identify individuals who are
21 receiving or who at any time have received services for mental
22 illness.

23 ~~((25))~~ (24) "Release" means legal termination of the commitment
24 under chapter 71.05 RCW.

25 ~~((26))~~ (25) "Resident" means a person admitted to an enhanced
26 services facility.

27 ~~((27))~~ (26) "Secretary" means the secretary of the department
28 or the secretary's designee.

29 ~~((28))~~ (27) "Significant change" means:

30 (a) A deterioration in a resident's physical, mental, or
31 psychosocial condition that has caused or is likely to cause clinical
32 complications or life-threatening conditions; or

33 (b) An improvement in the resident's physical, mental, or
34 psychosocial condition that may make the resident eligible for
35 release or for treatment in a less intensive or less secure setting.

36 ~~((29))~~ (28) "Social worker" means a person with a master's or
37 further advanced degree from a social work educational program
38 accredited and approved as provided in RCW 18.320.010.

1 (29) "Substance use disorder professional" means a person
2 certified as a substance use disorder professional by the department
3 of health under chapter 18.205 RCW.

4 (30) "Treatment" means the broad range of emergency,
5 detoxification, residential, inpatient, and outpatient services and
6 care, including diagnostic evaluation, mental health or chemical
7 dependency education and counseling, medical, psychiatric,
8 psychological, and social service care, vocational rehabilitation,
9 and career counseling, which may be extended to persons with mental
10 disorders, chemical dependency disorders, or both, and their
11 families.

12 (31) "Treatment records" include registration and all other
13 records concerning individuals who are receiving or who at any time
14 have received services for mental illness, which are maintained by
15 the department, by behavioral health organizations and their staffs,
16 and by treatment facilities. "Treatment records" do not include notes
17 or records maintained for personal use by an individual providing
18 treatment services for the department, behavioral health
19 organizations, or a treatment facility if the notes or records are
20 not available to others.

21 (32) "Violent act" means behavior that resulted in homicide,
22 attempted suicide, nonfatal injuries, or substantial damage to
23 property.

24 **Sec. 15.** RCW 70.97.030 and 2005 c 504 s 405 are each amended to
25 read as follows:

26 A person, eighteen years old or older, may be admitted to an
27 enhanced services facility if he or she meets the criteria in
28 subsections (1) through (3) of this section:

29 (1) The person requires: (a) Daily care by or under the
30 supervision of a mental health professional, (~~chemical dependency~~)
31 substance use disorder professional, or nurse; or (b) assistance with
32 three or more activities of daily living; and

33 (2) The person has: (a) A mental disorder, chemical dependency
34 disorder, or both; (b) an organic or traumatic brain injury; or (c) a
35 cognitive impairment that results in symptoms or behaviors requiring
36 supervision and facility services; (~~and~~) and

37 (3) The person has two or more of the following:

38 (a) Self-endangering behaviors that are frequent or difficult to
39 manage;

1 (b) Aggressive, threatening, or assaultive behaviors that create
2 a risk to the health or safety of other residents or staff, or a
3 significant risk to property and these behaviors are frequent or
4 difficult to manage;

5 (c) Intrusive behaviors that put residents or staff at risk;

6 (d) Complex medication needs and those needs include psychotropic
7 medications;

8 (e) A history of or likelihood of unsuccessful placements in
9 either a licensed facility or other state facility or a history of
10 rejected applications for admission to other licensed facilities
11 based on the person's behaviors, history, or security needs;

12 (f) A history of frequent or protracted mental health
13 hospitalizations;

14 (g) A history of offenses against a person or felony offenses
15 that created substantial damage to property.

16 **Sec. 16.** RCW 71.05.020 and 2018 c 305 s 1, 2018 c 291 s 1, and
17 2018 c 201 s 3001 are each reenacted and amended to read as follows:

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

20 (1) "Admission" or "admit" means a decision by a physician,
21 physician assistant, or psychiatric advanced registered nurse
22 practitioner that a person should be examined or treated as a patient
23 in a hospital;

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

30 (3) "Antipsychotic medications" means that class of drugs
31 primarily used to treat serious manifestations of mental illness
32 associated with thought disorders, which includes, but is not limited
33 to atypical antipsychotic medications;

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

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

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

5 (7) "Chemical dependency" means:

6 (a) Alcoholism;

7 (b) Drug addiction; or

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

10 (8) (~~"Chemical dependency professional" means a person certified~~
11 ~~as a chemical dependency professional by the department under chapter~~
12 ~~18.205 RCW;~~

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

16 ~~((10))~~ (9) "Conditional release" means a revocable modification
17 of a commitment, which may be revoked upon violation of any of its
18 terms;

19 ~~((11))~~ (10) "Crisis stabilization unit" means a short-term
20 facility or a portion of a facility licensed or certified by the
21 department under RCW 71.24.035, such as an evaluation and treatment
22 facility or a hospital, which has been designed to assess, diagnose,
23 and treat individuals experiencing an acute crisis without the use of
24 long-term hospitalization;

25 ~~((12))~~ (11) "Custody" means involuntary detention under the
26 provisions of this chapter or chapter 10.77 RCW, uninterrupted by any
27 period of unconditional release from commitment from a facility
28 providing involuntary care and treatment;

29 ~~((13))~~ (12) "Department" means the department of health;

30 ~~((14))~~ (13) "Designated crisis responder" means a mental health
31 professional appointed by the county, an entity appointed by the
32 county, or the behavioral health organization to perform the duties
33 specified in this chapter;

34 ~~((15))~~ (14) "Detention" or "detain" means the lawful
35 confinement of a person, under the provisions of this chapter;

36 ~~((16))~~ (15) "Developmental disabilities professional" means a
37 person who has specialized training and three years of experience in
38 directly treating or working with persons with developmental
39 disabilities and is a psychiatrist, physician assistant working with
40 a supervising psychiatrist, psychologist, psychiatric advanced

1 registered nurse practitioner, or social worker, and such other
2 developmental disabilities professionals as may be defined by rules
3 adopted by the secretary of the department of social and health
4 services;

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

7 ~~((18))~~ (17) "Director" means the director of the authority;

8 ~~((19))~~ (18) "Discharge" means the termination of hospital
9 medical authority. The commitment may remain in place, be terminated,
10 or be amended by court order;

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

17 ~~((21))~~ (20) "Evaluation and treatment facility" means any
18 facility which can provide directly, or by direct arrangement with
19 other public or private agencies, emergency evaluation and treatment,
20 outpatient care, and timely and appropriate inpatient care to persons
21 suffering from a mental disorder, and which is licensed or certified
22 as such by the department. The authority may certify single beds as
23 temporary evaluation and treatment beds under RCW 71.05.745. A
24 physically separate and separately operated portion of a state
25 hospital may be designated as an evaluation and treatment facility. A
26 facility which is part of, or operated by, the department of social
27 and health services or any federal agency will not require
28 certification. No correctional institution or facility, or jail,
29 shall be an evaluation and treatment facility within the meaning of
30 this chapter;

31 ~~((22))~~ (21) "Gravely disabled" means a condition in which a
32 person, as a result of a mental disorder, or as a result of the use
33 of alcohol or other psychoactive chemicals: (a) Is in danger of
34 serious physical harm resulting from a failure to provide for his or
35 her essential human needs of health or safety; or (b) manifests
36 severe deterioration in routine functioning evidenced by repeated and
37 escalating loss of cognitive or volitional control over his or her
38 actions and is not receiving such care as is essential for his or her
39 health or safety;

1 ~~((23))~~ (22) "Habilitative services" means those services
2 provided by program personnel to assist persons in acquiring and
3 maintaining life skills and in raising their levels of physical,
4 mental, social, and vocational functioning. Habilitative services
5 include education, training for employment, and therapy. The
6 habilitative process shall be undertaken with recognition of the risk
7 to the public safety presented by the person being assisted as
8 manifested by prior charged criminal conduct;

9 ~~((24))~~ (23) "Hearing" means any proceeding conducted in open
10 court. For purposes of this chapter, at any hearing the petitioner,
11 the respondent, the witnesses, and the presiding judicial officer may
12 be present and participate either in person or by video, as
13 determined by the court. The term "video" as used herein shall
14 include any functional equivalent. At any hearing conducted by video,
15 the technology used must permit the judicial officer, counsel, all
16 parties, and the witnesses to be able to see, hear, and speak, when
17 authorized, during the hearing; to allow attorneys to use exhibits or
18 other materials during the hearing; and to allow respondent's counsel
19 to be in the same location as the respondent unless otherwise
20 requested by the respondent or the respondent's counsel. Witnesses in
21 a proceeding may also appear in court through other means, including
22 telephonically, pursuant to the requirements of superior court civil
23 rule 43. Notwithstanding the foregoing, the court, upon its own
24 motion or upon a motion for good cause by any party, may require all
25 parties and witnesses to participate in the hearing in person rather
26 than by video. In ruling on any such motion, the court may allow in-
27 person or video testimony; and the court may consider, among other
28 things, whether the respondent's alleged mental illness affects the
29 respondent's ability to perceive or participate in the proceeding by
30 video;

31 ~~((25))~~ (24) "History of one or more violent acts" refers to the
32 period of time ten years prior to the filing of a petition under this
33 chapter, excluding any time spent, but not any violent acts
34 committed, in a mental health facility, a long-term alcoholism or
35 drug treatment facility, or in confinement as a result of a criminal
36 conviction;

37 ~~((26))~~ (25) "Imminent" means the state or condition of being
38 likely to occur at any moment or near at hand, rather than distant or
39 remote;

1 (~~(27)~~) (26) "Individualized service plan" means a plan prepared
2 by a developmental disabilities professional with other professionals
3 as a team, for a person with developmental disabilities, which shall
4 state:

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

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

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

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

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

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

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

21 (~~(28)~~) (27) "Information related to mental health services"
22 means all information and records compiled, obtained, or maintained
23 in the course of providing services to either voluntary or
24 involuntary recipients of services by a mental health service
25 provider. This may include documents of legal proceedings under this
26 chapter or chapter 71.34 or 10.77 RCW, or somatic health care
27 information;

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

31 (~~(30)~~) (29) "In need of assisted outpatient behavioral health
32 treatment" means that a person, as a result of a mental disorder or
33 substance use disorder: (a) Has been committed by a court to
34 detention for involuntary behavioral health treatment during the
35 preceding thirty-six months; (b) is unlikely to voluntarily
36 participate in outpatient treatment without an order for less
37 restrictive alternative treatment, based on a history of nonadherence
38 with treatment or in view of the person's current behavior; (c) is
39 likely to benefit from less restrictive alternative treatment; and
40 (d) requires less restrictive alternative treatment to prevent a

1 relapse, decompensation, or deterioration that is likely to result in
2 the person presenting a likelihood of serious harm or the person
3 becoming gravely disabled within a reasonably short period of time;

4 ~~((31))~~ (30) "Judicial commitment" means a commitment by a court
5 pursuant to the provisions of this chapter;

6 ~~((32))~~ (31) "Legal counsel" means attorneys and staff employed
7 by county prosecutor offices or the state attorney general acting in
8 their capacity as legal representatives of public mental health and
9 substance use disorder service providers under RCW 71.05.130;

10 ~~((33))~~ (32) "Less restrictive alternative treatment" means a
11 program of individualized treatment in a less restrictive setting
12 than inpatient treatment that includes the services described in RCW
13 71.05.585;

14 ~~((34))~~ (33) "Licensed physician" means a person licensed to
15 practice medicine or osteopathic medicine and surgery in the state of
16 Washington;

17 ~~((35))~~ (34) "Likelihood of serious harm" means:

18 (a) A substantial risk that: (i) Physical harm will be inflicted
19 by a person upon his or her own person, as evidenced by threats or
20 attempts to commit suicide or inflict physical harm on oneself; (ii)
21 physical harm will be inflicted by a person upon another, as
22 evidenced by behavior which has caused such harm or which places
23 another person or persons in reasonable fear of sustaining such harm;
24 or (iii) physical harm will be inflicted by a person upon the
25 property of others, as evidenced by behavior which has caused
26 substantial loss or damage to the property of others; or

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

29 ~~((36))~~ (35) "Medical clearance" means a physician or other
30 health care provider has determined that a person is medically stable
31 and ready for referral to the designated crisis responder;

32 ~~((37))~~ (36) "Mental disorder" means any organic, mental, or
33 emotional impairment which has substantial adverse effects on a
34 person's cognitive or volitional functions;

35 ~~((38))~~ (37) "Mental health professional" means a psychiatrist,
36 psychologist, physician assistant working with a supervising
37 psychiatrist, psychiatric advanced registered nurse practitioner,
38 psychiatric nurse, or social worker, and such other mental health
39 professionals as may be defined by rules adopted by the secretary
40 pursuant to the provisions of this chapter;

1 (~~(39)~~) (38) "Mental health service provider" means a public or
2 private agency that provides mental health services to persons with
3 mental disorders or substance use disorders as defined under this
4 section and receives funding from public sources. This includes, but
5 is not limited to, hospitals licensed under chapter 70.41 RCW,
6 evaluation and treatment facilities as defined in this section,
7 community mental health service delivery systems or behavioral health
8 programs as defined in RCW 71.24.025, facilities conducting
9 competency evaluations and restoration under chapter 10.77 RCW,
10 approved substance use disorder treatment programs as defined in this
11 section, secure detoxification facilities as defined in this section,
12 and correctional facilities operated by state and local governments;

13 (~~(40)~~) (39) "Peace officer" means a law enforcement official of
14 a public agency or governmental unit, and includes persons
15 specifically given peace officer powers by any state law, local
16 ordinance, or judicial order of appointment;

17 (~~(41)~~) (40) "Physician assistant" means a person licensed as a
18 physician assistant under chapter 18.57A or 18.71A RCW;

19 (~~(42)~~) (41) "Private agency" means any person, partnership,
20 corporation, or association that is not a public agency, whether or
21 not financed in whole or in part by public funds, which constitutes
22 an evaluation and treatment facility or private institution, or
23 hospital, or approved substance use disorder treatment program, which
24 is conducted for, or includes a department or ward conducted for, the
25 care and treatment of persons with mental illness, substance use
26 disorders, or both mental illness and substance use disorders;

27 (~~(43)~~) (42) "Professional person" means a mental health
28 professional, (~~(chemical—dependency)~~) substance use disorder
29 professional, or designated crisis responder and shall also mean a
30 physician, physician assistant, psychiatric advanced registered nurse
31 practitioner, registered nurse, and such others as may be defined by
32 rules adopted by the secretary pursuant to the provisions of this
33 chapter;

34 (~~(44)~~) (43) "Psychiatric advanced registered nurse
35 practitioner" means a person who is licensed as an advanced
36 registered nurse practitioner pursuant to chapter 18.79 RCW; and who
37 is board certified in advanced practice psychiatric and mental health
38 nursing;

39 (~~(45)~~) (44) "Psychiatrist" means a person having a license as a
40 physician and surgeon in this state who has in addition completed

1 three years of graduate training in psychiatry in a program approved
2 by the American medical association or the American osteopathic
3 association and is certified or eligible to be certified by the
4 American board of psychiatry and neurology;

5 ~~((46))~~ (45) "Psychologist" means a person who has been licensed
6 as a psychologist pursuant to chapter 18.83 RCW;

7 ~~((47))~~ (46) "Public agency" means any evaluation and treatment
8 facility or institution, secure detoxification facility, approved
9 substance use disorder treatment program, or hospital which is
10 conducted for, or includes a department or ward conducted for, the
11 care and treatment of persons with mental illness, substance use
12 disorders, or both mental illness and substance use disorders, if the
13 agency is operated directly by federal, state, county, or municipal
14 government, or a combination of such governments;

15 ~~((48))~~ (47) "Release" means legal termination of the commitment
16 under the provisions of this chapter;

17 ~~((49))~~ (48) "Resource management services" has the meaning
18 given in chapter 71.24 RCW;

19 ~~((50))~~ (49) "Secretary" means the secretary of the department
20 of health, or his or her designee;

21 ~~((51))~~ (50) "Secure detoxification facility" means a facility
22 operated by either a public or private agency or by the program of an
23 agency that:

24 (a) Provides for intoxicated persons:

25 (i) Evaluation and assessment, provided by certified ~~((chemical
26 dependency))~~ substance use disorder professionals or co-occurring
27 disorder specialists;

28 (ii) Acute or subacute detoxification services; and

29 (iii) Discharge assistance provided by certified ~~((chemical
30 dependency))~~ substance use disorder professionals or co-occurring
31 disorder specialists, including facilitating transitions to
32 appropriate voluntary or involuntary inpatient services or to less
33 restrictive alternatives as appropriate for the individual;

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

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

37 ~~((52))~~ (51) "Serious violent offense" has the same meaning as
38 provided in RCW 9.94A.030;

1 (~~(53)~~) (52) "Social worker" means a person with a master's or
2 further advanced degree from a social work educational program
3 accredited and approved as provided in RCW 18.320.010;

4 (~~(54)~~) (53) "Substance use disorder" means a cluster of
5 cognitive, behavioral, and physiological symptoms indicating that an
6 individual continues using the substance despite significant
7 substance-related problems. The diagnosis of a substance use disorder
8 is based on a pathological pattern of behaviors related to the use of
9 the substances;

10 (54) "Substance use disorder professional" means a person
11 certified as a substance use disorder professional by the department
12 of health under chapter 18.205 RCW;

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

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

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

1 (58) "Violent act" means behavior that resulted in homicide,
2 attempted suicide, nonfatal injuries, or substantial damage to
3 property;

4 (59) "Co-occurring disorder specialist" means an individual
5 possessing an enhancement granted by the department of health under
6 chapter 18.205 RCW that certifies the individual to provide substance
7 use disorder counseling subject to the practice limitations under
8 section 25 of this act.

9 **Sec. 17.** RCW 71.34.020 and 2018 c 201 s 5002 are each amended to
10 read as follows:

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

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

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

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

24 (4) "Chemical dependency" means:

25 (a) Alcoholism;

26 (b) Drug addiction; or

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

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

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

37 ~~((7))~~ (6) "Children's mental health specialist" means:

38 (a) A mental health professional who has completed a minimum of
39 one hundred actual hours, not quarter or semester hours, of

1 specialized training devoted to the study of child development and
2 the treatment of children; and

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

6 ~~((+8))~~ (7) "Commitment" means a determination by a judge or
7 court commissioner, made after a commitment hearing, that the minor
8 is in need of inpatient diagnosis, evaluation, or treatment or that
9 the minor is in need of less restrictive alternative treatment.

10 ~~((+9))~~ (8) "Department" means the department of social and
11 health services.

12 ~~((+10))~~ (9) "Designated crisis responder" means a person
13 designated by a behavioral health organization to perform the duties
14 specified in this chapter.

15 ~~((+11))~~ (10) "Director" means the director of the authority.

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

22 ~~((+13))~~ (12) "Evaluation and treatment facility" means a public
23 or private facility or unit that is licensed or certified by the
24 department of health to provide emergency, inpatient, residential, or
25 outpatient mental health evaluation and treatment services for
26 minors. A physically separate and separately-operated portion of a
27 state hospital may be designated as an evaluation and treatment
28 facility for minors. A facility which is part of or operated by the
29 state or federal agency does not require licensure or certification.
30 No correctional institution or facility, juvenile court detention
31 facility, or jail may be an evaluation and treatment facility within
32 the meaning of this chapter.

33 ~~((+14))~~ (13) "Evaluation and treatment program" means the total
34 system of services and facilities coordinated and approved by a
35 county or combination of counties for the evaluation and treatment of
36 minors under this chapter.

37 ~~((+15))~~ (14) "Gravely disabled minor" means a minor who, as a
38 result of a mental disorder, or as a result of the use of alcohol or
39 other psychoactive chemicals, is in danger of serious physical harm
40 resulting from a failure to provide for his or her essential human

1 needs of health or safety, or manifests severe deterioration in
2 routine functioning evidenced by repeated and escalating loss of
3 cognitive or volitional control over his or her actions and is not
4 receiving such care as is essential for his or her health or safety.

5 ~~((16))~~ (15) "Inpatient treatment" means twenty-four-hour-per-
6 day mental health care provided within a general hospital,
7 psychiatric hospital, residential treatment facility licensed or
8 certified by the department of health as an evaluation and treatment
9 facility for minors, secure detoxification facility for minors, or
10 approved substance use disorder treatment program for minors.

11 ~~((17))~~ (16) "Intoxicated minor" means a minor whose mental or
12 physical functioning is substantially impaired as a result of the use
13 of alcohol or other psychoactive chemicals.

14 ~~((18))~~ (17) "Less restrictive alternative" or "less restrictive
15 setting" means outpatient treatment provided to a minor who is not
16 residing in a facility providing inpatient treatment as defined in
17 this chapter.

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

19 (a) A substantial risk that physical harm will be inflicted by an
20 individual upon his or her own person, as evidenced by threats or
21 attempts to commit suicide or inflict physical harm on oneself; (b) a
22 substantial risk that physical harm will be inflicted by an
23 individual upon another, as evidenced by behavior which has caused
24 such harm or which places another person or persons in reasonable
25 fear of sustaining such harm; or (c) a substantial risk that physical
26 harm will be inflicted by an individual upon the property of others,
27 as evidenced by behavior which has caused substantial loss or damage
28 to the property of others.

29 ~~((20))~~ (19) "Medical necessity" for inpatient care means a
30 requested service which is reasonably calculated to: (a) Diagnose,
31 correct, cure, or alleviate a mental disorder or substance use
32 disorder; or (b) prevent the progression of a substance use disorder
33 that endangers life or causes suffering and pain, or results in
34 illness or infirmity or threatens to cause or aggravate a handicap,
35 or causes physical deformity or malfunction, and there is no adequate
36 less restrictive alternative available.

37 ~~((21))~~ (20) "Mental disorder" means any organic, mental, or
38 emotional impairment that has substantial adverse effects on an
39 individual's cognitive or volitional functions. The presence of
40 alcohol abuse, drug abuse, juvenile criminal history, antisocial

1 behavior, or intellectual disabilities alone is insufficient to
2 justify a finding of "mental disorder" within the meaning of this
3 section.

4 ~~((22))~~ (21) "Mental health professional" means a psychiatrist,
5 psychiatric advanced registered nurse practitioner, physician
6 assistant working with a supervising psychiatrist, psychologist,
7 psychiatric nurse, or social worker, and such other mental health
8 professionals as may be defined by rules adopted by the secretary of
9 the department of health under this chapter.

10 ~~((23))~~ (22) "Minor" means any person under the age of eighteen
11 years.

12 ~~((24))~~ (23) "Outpatient treatment" means any of the
13 nonresidential services mandated under chapter 71.24 RCW and provided
14 by licensed or certified service providers as identified by RCW
15 71.24.025.

16 ~~((25))~~ (24) "Parent" means:

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

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

22 ~~((26))~~ (25) "Private agency" means any person, partnership,
23 corporation, or association that is not a public agency, whether or
24 not financed in whole or in part by public funds, that constitutes an
25 evaluation and treatment facility or private institution, or
26 hospital, or approved substance use disorder treatment program, that
27 is conducted for, or includes a distinct unit, floor, or ward
28 conducted for, the care and treatment of persons with mental illness,
29 substance use disorders, or both mental illness and substance use
30 disorders.

31 ~~((27))~~ (26) "Physician assistant" means a person licensed as a
32 physician assistant under chapter 18.57A or 18.71A RCW.

33 ~~((28))~~ (27) "Professional person in charge" or "professional
34 person" means a physician, other mental health professional, or other
35 person empowered by an evaluation and treatment facility, secure
36 detoxification facility, or approved substance use disorder treatment
37 program with authority to make admission and discharge decisions on
38 behalf of that facility.

39 ~~((29))~~ (28) "Psychiatric nurse" means a registered nurse who
40 has experience in the direct treatment of persons who have a mental

1 illness or who are emotionally disturbed, such experience gained
2 under the supervision of a mental health professional.

3 ~~((30))~~ (29) "Psychiatrist" means a person having a license as a
4 physician in this state who has completed residency training in
5 psychiatry in a program approved by the American Medical Association
6 or the American Osteopathic Association, and is board eligible or
7 board certified in psychiatry.

8 ~~((31))~~ (30) "Psychologist" means a person licensed as a
9 psychologist under chapter 18.83 RCW.

10 ~~((32))~~ (31) "Public agency" means any evaluation and treatment
11 facility or institution, or hospital, or approved substance use
12 disorder treatment program that is conducted for, or includes a
13 distinct unit, floor, or ward conducted for, the care and treatment
14 of persons with mental illness, substance use disorders, or both
15 mental illness and substance use disorders if the agency is operated
16 directly by federal, state, county, or municipal government, or a
17 combination of such governments.

18 ~~((33))~~ (32) "Responsible other" means the minor, the minor's
19 parent or estate, or any other person legally responsible for support
20 of the minor.

21 ~~((34))~~ (33) "Secretary" means the secretary of the department
22 or secretary's designee.

23 ~~((35))~~ (34) "Secure detoxification facility" means a facility
24 operated by either a public or private agency or by the program of an
25 agency that:

26 (a) Provides for intoxicated minors:

27 (i) Evaluation and assessment, provided by certified ~~((chemical~~
28 ~~dependency))~~ substance use disorder professionals or co-occurring
29 disorder specialists;

30 (ii) Acute or subacute detoxification services; and

31 (iii) Discharge assistance provided by certified ~~((chemical~~
32 ~~dependency))~~ substance use disorder professionals or co-occurring
33 disorder specialists, including facilitating transitions to
34 appropriate voluntary or involuntary inpatient services or to less
35 restrictive alternatives as appropriate for the minor;

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

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

1 (~~(36)~~) (35) "Social worker" means a person with a master's or
2 further advanced degree from a social work educational program
3 accredited and approved as provided in RCW 18.320.010.

4 (~~(37)~~) (36) "Start of initial detention" means the time of
5 arrival of the minor at the first evaluation and treatment facility,
6 secure detoxification facility, or approved substance use disorder
7 treatment program offering inpatient treatment if the minor is being
8 involuntarily detained at the time. With regard to voluntary
9 patients, "start of initial detention" means the time at which the
10 minor gives notice of intent to leave under the provisions of this
11 chapter.

12 (~~(38)~~) (37) "Substance use disorder" means a cluster of
13 cognitive, behavioral, and physiological symptoms indicating that an
14 individual continues using the substance despite significant
15 substance-related problems. The diagnosis of a substance use disorder
16 is based on a pathological pattern of behaviors related to the use of
17 the substances.

18 (38) "Co-occurring disorder specialist" means an individual
19 possessing an enhancement granted by the department of health under
20 chapter 18.205 RCW that certifies the individual to provide substance
21 use disorder counseling subject to the practice limitations under
22 section 25 of this act.

23 (39) "Substance use disorder professional" means a person
24 certified as a substance use disorder professional by the department
25 of health under chapter 18.205 RCW.

26 **Sec. 18.** RCW 71.34.720 and 2018 c 201 s 5017 are each amended to
27 read as follows:

28 (1) Each minor approved by the facility for inpatient admission
29 shall be examined and evaluated by a children's mental health
30 specialist, for minors admitted as a result of a mental disorder, or
31 by a (~~(chemical dependency)~~) substance use disorder professional or
32 co-occurring disorder specialist, for minors admitted as a result of
33 a substance use disorder, as to the child's mental condition and by a
34 physician, physician assistant, or psychiatric advanced registered
35 nurse practitioner as to the child's physical condition within
36 twenty-four hours of admission. Reasonable measures shall be taken to
37 ensure medical treatment is provided for any condition requiring
38 immediate medical attention.

1 (2) If, after examination and evaluation, the children's mental
2 health specialist or substance use disorder specialist and the
3 physician, physician assistant, or psychiatric advanced registered
4 nurse practitioner determine that the initial needs of the minor, if
5 detained to an evaluation and treatment facility, would be better
6 served by placement in a substance use disorder treatment program or,
7 if detained to a secure detoxification facility or approved substance
8 use disorder treatment program, would be better served in an
9 evaluation and treatment facility, then the minor shall be referred
10 to the more appropriate placement; however a minor may only be
11 referred to a secure detoxification facility or approved substance
12 use disorder treatment program if there is a secure detoxification
13 facility or approved substance use disorder treatment program
14 available and that has adequate space for the minor.

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

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

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

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

35 **Sec. 19.** RCW 71.34.720 and 2018 c 201 s 5018 are each amended to
36 read as follows:

37 (1) Each minor approved by the facility for inpatient admission
38 shall be examined and evaluated by a children's mental health
39 specialist, for minors admitted as a result of a mental disorder, or

1 by a (~~chemical dependency~~) substance use disorder professional or
2 co-occurring disorder specialist, for minors admitted as a result of
3 a substance use disorder, as to the child's mental condition and by a
4 physician, physician assistant, or psychiatric advanced registered
5 nurse practitioner as to the child's physical condition within
6 twenty-four hours of admission. Reasonable measures shall be taken to
7 ensure medical treatment is provided for any condition requiring
8 immediate medical attention.

9 (2) If, after examination and evaluation, the children's mental
10 health specialist or substance use disorder specialist and the
11 physician, physician assistant, or psychiatric advanced registered
12 nurse practitioner determine that the initial needs of the minor, if
13 detained to an evaluation and treatment facility, would be better
14 served by placement in a substance use disorder treatment program or,
15 if detained to a secure detoxification facility or approved substance
16 use disorder treatment program, would be better served in an
17 evaluation and treatment facility, then the minor shall be referred
18 to the more appropriate placement.

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

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

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

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

1 **Sec. 20.** RCW 71.34.760 and 2018 c 201 s 5019 are each amended to
2 read as follows:

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

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

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

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

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

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

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

33 (4) The responsible state-funded evaluation and treatment
34 facility or approved substance use disorder treatment program shall
35 submit a report to the authority's designated placement committee
36 within ninety days of admission and no less than every one hundred
37 eighty days thereafter, setting forth such facts as the authority
38 requires, including the minor's individual treatment plan and
39 progress, recommendations for future treatment, and possible less
40 restrictive treatment.

1 **Sec. 21.** RCW 18.130.175 and 2006 c 99 s 7 are each amended to
2 read as follows:

3 (1) In lieu of disciplinary action under RCW 18.130.160 and if
4 the disciplining authority determines that the unprofessional conduct
5 may be the result of substance abuse, the disciplining authority may
6 refer the license holder to a voluntary substance abuse monitoring
7 program approved by the disciplining authority.

8 The cost of the treatment shall be the responsibility of the
9 license holder, but the responsibility does not preclude payment by
10 an employer, existing insurance coverage, or other sources. Primary
11 alcoholism or other drug addiction treatment shall be provided by
12 approved treatment programs under RCW 70.96A.020 or by any other
13 provider approved by the entity or the commission. However, nothing
14 shall prohibit the disciplining authority from approving additional
15 services and programs as an adjunct to primary alcoholism or other
16 drug addiction treatment. The disciplining authority may also approve
17 the use of out-of-state programs. Referral of the license holder to
18 the program shall be done only with the consent of the license
19 holder. Referral to the program may also include probationary
20 conditions for a designated period of time. If the license holder
21 does not consent to be referred to the program or does not
22 successfully complete the program, the disciplining authority may
23 take appropriate action under RCW 18.130.160 which includes
24 suspension of the license unless or until the disciplining authority,
25 in consultation with the director of the voluntary substance abuse
26 monitoring program, determines the license holder is able to practice
27 safely. The secretary shall adopt uniform rules for the evaluation by
28 the ((~~disciplinary~~—[~~disciplining~~])) disciplining authority of a
29 relapse or program violation on the part of a license holder in the
30 substance abuse monitoring program. The evaluation shall encourage
31 program participation with additional conditions, in lieu of
32 disciplinary action, when the ((~~disciplinary~~—[~~disciplining~~]))
33 disciplining authority determines that the license holder is able to
34 continue to practice with reasonable skill and safety.

35 (2) In addition to approving substance abuse monitoring programs
36 that may receive referrals from the disciplining authority, the
37 disciplining authority may establish by rule requirements for
38 participation of license holders who are not being investigated or
39 monitored by the disciplining authority for substance abuse. License
40 holders voluntarily participating in the approved programs without

1 being referred by the disciplining authority shall not be subject to
2 disciplinary action under RCW 18.130.160 for their substance abuse,
3 and shall not have their participation made known to the disciplining
4 authority, if they meet the requirements of this section and the
5 program in which they are participating.

6 (3) The license holder shall sign a waiver allowing the program
7 to release information to the disciplining authority if the licensee
8 does not comply with the requirements of this section or is unable to
9 practice with reasonable skill or safety. The substance abuse program
10 shall report to the disciplining authority any license holder who
11 fails to comply with the requirements of this section or the program
12 or who, in the opinion of the program, is unable to practice with
13 reasonable skill or safety. License holders shall report to the
14 disciplining authority if they fail to comply with this section or do
15 not complete the program's requirements. License holders may, upon
16 the agreement of the program and disciplining authority, reenter the
17 program if they have previously failed to comply with this section.

18 (4) The treatment and pretreatment records of license holders
19 referred to or voluntarily participating in approved programs shall
20 be confidential, shall be exempt from chapter 42.56 RCW, and shall
21 not be subject to discovery by subpoena or admissible as evidence
22 except for monitoring records reported to the disciplining authority
23 for cause as defined in subsection (3) of this section. Monitoring
24 records relating to license holders referred to the program by the
25 disciplining authority or relating to license holders reported to the
26 disciplining authority by the program for cause, shall be released to
27 the disciplining authority at the request of the disciplining
28 authority. Records held by the disciplining authority under this
29 section shall be exempt from chapter 42.56 RCW and shall not be
30 subject to discovery by subpoena except by the license holder.

31 (5) "Substance abuse," as used in this section, means the
32 impairment, as determined by the disciplining authority, of a license
33 holder's professional services by an addiction to, a dependency on,
34 or the use of alcohol, legend drugs, or controlled substances.

35 (6) This section does not affect an employer's right or ability
36 to make employment-related decisions regarding a license holder. This
37 section does not restrict the authority of the disciplining authority
38 to take disciplinary action for any other unprofessional conduct.

1 (7) A person who, in good faith, reports information or takes
2 action in connection with this section is immune from civil liability
3 for reporting information or taking the action.

4 (a) The immunity from civil liability provided by this section
5 shall be liberally construed to accomplish the purposes of this
6 section and the persons entitled to immunity shall include:

7 (i) An approved monitoring treatment program;

8 (ii) The professional association operating the program;

9 (iii) Members, employees, or agents of the program or
10 association;

11 (iv) Persons reporting a license holder as being possibly
12 impaired or providing information about the license holder's
13 impairment; and

14 (v) Professionals supervising or monitoring the course of the
15 impaired license holder's treatment or rehabilitation.

16 (b) The courts are strongly encouraged to impose sanctions on
17 clients and their attorneys whose allegations under this subsection
18 are not made in good faith and are without either reasonable
19 objective, substantive grounds, or both.

20 (c) The immunity provided in this section is in addition to any
21 other immunity provided by law.

22 (8) In the case of a person who is applying to be a substance use
23 disorder professional or substance use disorder professional trainee
24 certified under chapter 18.205 RCW, if the person is:

25 (a) Less than one year in recovery from a substance use disorder,
26 the duration of time that the person may be required to participate
27 in the voluntary substance abuse monitoring program may not exceed
28 the amount of time necessary for the person to achieve one year in
29 recovery; or

30 (b) At least one year in recovery from a substance use disorder,
31 the person may not be required to participate in the substance abuse
32 monitoring program.

33 **Sec. 22.** RCW 43.43.842 and 2014 c 88 s 1 are each amended to
34 read as follows:

35 (1)(a) The secretary of social and health services and the
36 secretary of health shall adopt additional requirements for the
37 licensure or relicensure of agencies, facilities, and licensed
38 individuals who provide care and treatment to vulnerable adults,
39 including nursing pools registered under chapter 18.52C RCW. These

1 additional requirements shall ensure that any person associated with
2 a licensed agency or facility having unsupervised access with a
3 vulnerable adult shall not be the respondent in an active protective
4 order under RCW 74.34.130, nor have been: (i) Convicted of a crime
5 against persons as defined in RCW 43.43.830, except as provided in
6 this section; (ii) convicted of crimes relating to financial
7 exploitation as defined in RCW 43.43.830, except as provided in this
8 section; or (iii) found in any disciplinary board final decision to
9 have abused a vulnerable adult under RCW 43.43.830.

10 (b) A person associated with a licensed agency or facility who
11 has unsupervised access with a vulnerable adult shall make the
12 disclosures specified in RCW 43.43.834(2). The person shall make the
13 disclosures in writing, sign, and swear to the contents under penalty
14 of perjury. The person shall, in the disclosures, specify all crimes
15 against children or other persons, all crimes relating to financial
16 exploitation, and all crimes relating to drugs as defined in RCW
17 43.43.830, committed by the person.

18 (2) The rules adopted under this section shall permit the
19 licensee to consider the criminal history of an applicant for
20 employment in a licensed facility when the applicant has one or more
21 convictions for a past offense and:

22 (a) The offense was simple assault, assault in the fourth degree,
23 or the same offense as it may be renamed, and three or more years
24 have passed between the most recent conviction and the date of
25 application for employment;

26 (b) The offense was prostitution, or the same offense as it may
27 be renamed, and three or more years have passed between the most
28 recent conviction and the date of application for employment;

29 (c) The offense was theft in the third degree, or the same
30 offense as it may be renamed, and three or more years have passed
31 between the most recent conviction and the date of application for
32 employment;

33 (d) The offense was theft in the second degree, or the same
34 offense as it may be renamed, and five or more years have passed
35 between the most recent conviction and the date of application for
36 employment;

37 (e) The offense was forgery, or the same offense as it may be
38 renamed, and five or more years have passed between the most recent
39 conviction and the date of application for employment;

1 (f) The department of social and health services reviewed the
2 employee's otherwise disqualifying criminal history through the
3 department of social and health services' background assessment
4 review team process conducted in 2002, and determined that such
5 employee could remain in a position covered by this section; or

6 (g) The otherwise disqualifying conviction or disposition has
7 been the subject of a pardon, annulment, or other equivalent
8 procedure.

9 The offenses set forth in (a) through (g) of this subsection do
10 not automatically disqualify an applicant from employment by a
11 licensee. Nothing in this section may be construed to require the
12 employment of any person against a licensee's judgment.

13 (3) The rules adopted pursuant to subsection (2) of this section
14 may not allow a licensee to automatically deny an applicant with a
15 conviction for an offense set forth in subsection (2) of this section
16 for a position as a substance use disorder professional or substance
17 use disorder professional trainee certified under chapter 18.205 RCW
18 if:

19 (a) At least one year has passed between the applicant's most
20 recent conviction for an offense set forth in subsection (2) of this
21 section and the date of application for employment;

22 (b) The offense was committed as a result of the applicant's
23 substance use or untreated mental health symptoms; and

24 (c) The applicant is at least one year in recovery from a
25 substance use disorder, whether through abstinence or stability on
26 medication-assisted therapy, or in recovery from a mental health
27 disorder.

28 (4) In consultation with law enforcement personnel, the secretary
29 of social and health services and the secretary of health shall
30 investigate, or cause to be investigated, the conviction record and
31 the protection proceeding record information under this chapter of
32 the staff of each agency or facility under their respective
33 jurisdictions seeking licensure or relicensure. An individual
34 responding to a criminal background inquiry request from his or her
35 employer or potential employer shall disclose the information about
36 his or her criminal history under penalty of perjury. The secretaries
37 shall use the information solely for the purpose of determining
38 eligibility for licensure or relicensure. Criminal justice agencies
39 shall provide the secretaries such information as they may have and
40 that the secretaries may require for such purpose.

1 NEW SECTION. **Sec. 23.** A new section is added to chapter 18.205
2 RCW to read as follows:

3 The department may not automatically deny an applicant for
4 certification under this chapter for a position as a substance use
5 disorder professional or substance use disorder professional trainee
6 based on a conviction history consisting of convictions for simple
7 assault, assault in the fourth degree, prostitution, theft in the
8 third degree, theft in the second degree, or forgery, the same
9 offenses as they may be renamed, or substantially equivalent offenses
10 committed in other states or jurisdictions if:

11 (1) At least one year has passed between the applicant's most
12 recent conviction for an offense set forth in this section and the
13 date of application for employment;

14 (2) The offense was committed as a result of the person's
15 substance use or untreated mental health symptoms; and

16 (3) The applicant is at least one year in recovery from a
17 substance use disorder, whether through abstinence or stability on
18 medication-assisted therapy, or in recovery from mental health
19 challenges.

20 **Sec. 24.** RCW 18.130.055 and 2016 c 81 s 12 are each amended to
21 read as follows:

22 (1) The disciplining authority may deny an application for
23 licensure or grant a license with conditions if the applicant:

24 (a) Has had his or her license to practice any health care
25 profession suspended, revoked, or restricted, by competent authority
26 in any state, federal, or foreign jurisdiction;

27 (b) Has committed any act defined as unprofessional conduct for a
28 license holder under RCW 18.130.180, except as provided in RCW
29 9.97.020;

30 (c) Has been convicted or is subject to current prosecution or
31 pending charges of a crime involving moral turpitude or a crime
32 identified in RCW 43.43.830, except as provided in RCW 9.97.020 and
33 section 23 of this act. For purposes of this section, conviction
34 includes all instances in which a plea of guilty or nolo contendere
35 is the basis for the conviction and all proceedings in which the
36 prosecution or sentence has been deferred or suspended. At the
37 request of an applicant for an original license whose conviction is
38 under appeal, the disciplining authority may defer decision upon the
39 application during the pendency of such a prosecution or appeal;

1 (d) Fails to prove that he or she is qualified in accordance with
2 the provisions of this chapter, the chapters identified in RCW
3 18.130.040(2), or the rules adopted by the disciplining authority; or

4 (e) Is not able to practice with reasonable skill and safety to
5 consumers by reason of any mental or physical condition.

6 (i) The disciplining authority may require the applicant, at his
7 or her own expense, to submit to a mental, physical, or psychological
8 examination by one or more licensed health professionals designated
9 by the disciplining authority. The disciplining authority shall
10 provide written notice of its requirement for a mental or physical
11 examination that includes a statement of the specific conduct, event,
12 or circumstances justifying an examination and a statement of the
13 nature, purpose, scope, and content of the intended examination. If
14 the applicant fails to submit to the examination or provide the
15 results of the examination or any required waivers, the disciplining
16 authority may deny the application.

17 (ii) An applicant governed by this chapter is deemed to have
18 given consent to submit to a mental, physical, or psychological
19 examination when directed in writing by the disciplining authority
20 and further to have waived all objections to the admissibility or use
21 of the examining health professional's testimony or examination
22 reports by the disciplining authority on the grounds that the
23 testimony or reports constitute privileged communications.

24 (2) The provisions of RCW 9.95.240 and chapter 9.96A RCW do not
25 apply to a decision to deny a license under this section.

26 (3) The disciplining authority shall give written notice to the
27 applicant of the decision to deny a license or grant a license with
28 conditions in response to an application for a license. The notice
29 must state the grounds and factual basis for the action and be served
30 upon the applicant.

31 (4) A license applicant who is aggrieved by the decision to deny
32 the license or grant the license with conditions has the right to an
33 adjudicative proceeding. The application for adjudicative proceeding
34 must be in writing, state the basis for contesting the adverse
35 action, include a copy of the adverse notice, and be served on and
36 received by the department within twenty-eight days of the decision.
37 The license applicant has the burden to establish, by a preponderance
38 of evidence, that the license applicant is qualified in accordance
39 with the provisions of this chapter, the chapters identified in RCW
40 18.130.040(2), and the rules adopted by the disciplining authority.

1 NEW SECTION. **Sec. 25.** A new section is added to chapter 18.205

2 RCW to read as follows:

3 (1) The department shall develop training standards for the
4 creation of a co-occurring disorder specialist enhancement which may
5 be added to the license or registration held by one of the following:

6 (a) Psychologists licensed under chapter 18.83 RCW;

7 (b) Independent clinical social workers licensed under chapter
8 18.225 RCW;

9 (c) Marriage and family therapists licensed under chapter 18.225
10 RCW;

11 (d) Mental health counselors licensed under chapter 18.225 RCW;
12 and

13 (e) An agency affiliated counselor under chapter 18.19 RCW with a
14 master's degree or further advanced degree in counseling or one of
15 the social sciences from an accredited college or university who has
16 at least two years of experience, experience gained under the
17 supervision of a mental health professional recognized by the
18 department or attested to by the licensed behavioral health agency,
19 in direct treatment of persons with mental illness or emotional
20 disturbance.

21 (2) To obtain the co-occurring disorder specialist enhancement,
22 the applicant must meet training standards and experience
23 requirements. The training standards must be designed with
24 consideration of the practices of the health professions listed in
25 subsection (1) of this section and consisting of sixty hours of
26 instruction consisting of (a) thirty hours in understanding the
27 disease pattern of addiction and the pharmacology of alcohol and
28 other drugs; and (b) thirty hours in understanding addiction
29 placement, continuing care, and discharge criteria, including the
30 American society of addiction medicine criteria; treatment planning
31 specific to substance abuse; relapse prevention; and confidentiality
32 issues specific to substance use disorder treatment.

33 (3) In developing the training standards, the department shall
34 consult with the examining board of psychology established in chapter
35 18.83 RCW, the Washington state mental health counselors, marriage
36 and family therapists, and social workers advisory committee
37 established in chapter 18.225 RCW, the substance use disorder
38 certification advisory committee established in chapter 18.205 RCW,
39 and educational institutions in Washington state that train
40 psychologists, marriage and family therapists, mental health

1 counselors, independent clinical social workers, and substance use
2 disorder professionals.

3 (4) The department shall approve educational programs that meet
4 the training standards, and must not limit its approval to
5 university-based courses.

6 (5) The secretary shall issue a co-occurring disorder specialist
7 enhancement to any applicant who demonstrates to the secretary's
8 satisfaction that the following requirements have been met:

9 (a) Completion of the training standards;

10 (b) Successful completion of an approved examination based on
11 core competencies of substance use disorder counseling;

12 (c) Successful completion of an experience requirement of:

13 (i) Eighty hours of supervised experience for an applicant listed
14 under subsection (1) of this section with fewer than five years of
15 experience; or

16 (ii) Forty hours of supervised experience for an applicant listed
17 under subsection (1) of this section with five or more years of
18 experience; and

19 (d) Payment of any fees that may be established by the
20 department.

21 (6) An applicant for the co-occurring disorder specialist
22 enhancement may receive supervised experience from any person who
23 meets or exceeds the requirements of a certified substance use
24 disorder professional in the state of Washington and who would be
25 eligible to take the examination required for substance use disorder
26 professional certification.

27 (7) A person who has obtained a co-occurring disorder specialist
28 enhancement may provide substance use disorder counseling services
29 which are equal in scope with those provided by substance use
30 disorder professionals under this chapter, subject to the following
31 limitations:

32 (a) A co-occurring disorder specialist may only provide substance
33 use disorder counseling services if the co-occurring disorder
34 specialist is employed by:

35 (i) An agency that provides counseling services;

36 (ii) A federally qualified health center; or

37 (iii) A hospital;

38 (b) Following an initial intake or assessment, a co-occurring
39 disorder specialist may provide substance use disorder treatment only

1 to clients diagnosed with a substance use disorder and a mental
2 health disorder;

3 (c) Prior to providing substance use disorder treatment to a
4 client assessed to be in need of 2.1 or higher level of care
5 according to American society of addiction medicine criteria, a co-
6 occurring disorder specialist must make a reasonable effort to refer
7 and connect the client to the appropriate care setting, as indicated
8 by the client's American society of addiction medicine level of care;
9 and

10 (d) A co-occurring disorder specialist must comply with rules
11 promulgated by the department under subsection (11) of this section.

12 (8) The secretary shall establish by rule what constitutes
13 adequate proof of meeting the criteria.

14 (9) Applicants are subject to the grounds for denial of a
15 certificate or issuance of a conditional certificate under chapter
16 18.130 RCW.

17 (10) The department may adopt a fee to defray the cost of
18 regulatory activities related to the issuance of co-occurring
19 disorder specialist enhancements and any related disciplinary
20 activities.

21 (11) The department shall adopt rules regarding the role of co-
22 occurring disorder specialists across the American society of
23 addiction medicine continuum of care.

24 (12) Any increase in fees necessary to cover the cost of
25 regulating co-occurring disorder professionals who receive an
26 enhancement under this section must be borne by persons licensed as
27 psychologists under chapter 18.83 RCW, independent clinical social
28 workers under chapter 18.225 RCW, marriage and family therapists
29 under chapter 18.225 RCW, or mental health counselors under chapter
30 18.225 RCW. The cost of regulating co-occurring disorder specialists
31 who receive an enhancement under this section may not be borne by
32 substance use disorder professionals or substance use disorder
33 professional trainees certified under this chapter and may not be
34 included in the calculation of fees for substance use disorder
35 professionals or substance use disorder professional trainees
36 certified under this chapter.

37 NEW SECTION. **Sec. 26.** A new section is added to chapter 18.205
38 RCW to read as follows:

1 (1) Beginning July 1, 2020, subject to the availability of
2 amounts appropriated for this specific purpose, the department shall
3 contract with an educational program to offer the training developed
4 under section 25 of this act. The contracted educational program
5 shall offer the training at a reduced cost to health care providers
6 identified in section 25 of this act. The training must be (a)
7 available online on an ongoing basis and (b) offered in person at
8 least four times per calendar year.

9 (2) Beginning July 1, 2020, subject to the availability of
10 amounts appropriated for this specific purpose, the department shall
11 contract with an entity to provide a telephonic consultation service
12 to assist health care providers who have been issued a substance use
13 disorder professional certification pursuant to RCW 18.205.090 or a
14 co-occurring disorder specialist enhancement under section 25 of this
15 act with the diagnosis and treatment of patients with co-occurring
16 behavioral health disorders.

17 (3) The department shall identify supervisors who are trained and
18 available to supervise persons seeking to meet the supervised
19 experience requirements established under section 25 of this act.

20 (4) This section expires July 1, 2025.

21 NEW SECTION. **Sec. 27.** A new section is added to chapter 18.83
22 RCW to read as follows:

23 The department shall reduce the total number of supervised
24 experience hours required under RCW 18.83.070 by three months for any
25 applicant for a license under this chapter who has practiced as a
26 certified chemical dependency professional for three years in the
27 previous ten years.

28 NEW SECTION. **Sec. 28.** A new section is added to chapter 18.225
29 RCW to read as follows:

30 The department shall reduce the total number of supervised
31 experience hours required under RCW 18.225.090 by ten percent for any
32 applicant for a license under this chapter who has practiced as a
33 certified chemical dependency professional for three years in the
34 previous ten years.

35 NEW SECTION. **Sec. 29.** The department of health must amend its
36 rules, including WAC 246-341-0515, to allow persons with a co-
37 occurring disorder specialist enhancement under chapter 18.205 RCW to

1 provide substance use disorder counseling services that are equal in
2 scope with the scope and practice of a substance use disorder
3 professional under chapter 18.205 RCW, subject to the practice
4 limitations under section 25 of this act.

5 NEW SECTION. **Sec. 30.** A new section is added to chapter 18.205
6 RCW to read as follows:

7 (1) The department, in collaboration with the behavioral health
8 institute at the University of Washington, the research and data
9 analysis division at the department of social and health services,
10 and the division of behavioral health and recovery at the health care
11 authority, must conduct a review and analysis regarding the effects
12 of the co-occurring disorder specialist enhancement created by this
13 act on increasing the number of providers qualified to provide
14 substance use disorder services and improving outcomes for persons
15 with a substance use disorder.

16 (2) The review and analysis shall assess:

17 (a) The effects of the availability of the co-occurring disorder
18 specialist enhancement on:

19 (i) Increasing the number of providers qualified to provide
20 substance use disorder services; and

21 (ii) Improving outcomes for persons with a substance use
22 disorder;

23 (b) The number of co-occurring disorder specialist enhancements
24 that have been issued;

25 (c) The settings in which co-occurring disorder specialists are
26 working;

27 (d) The geographic distribution of co-occurring disorder
28 specialists;

29 (e) Any change in the number of certified substance use disorder
30 professionals and substance use disorder professional trainees;

31 (f) Any change in the number of people receiving treatment at the
32 appropriate level of care, including:

33 (i) The number of American society of addiction medicine
34 assessments made by co-occurring disorder specialists;

35 (ii) The assessed level of care for clients according to American
36 society of addiction medicine criteria;

37 (iii) Co-occurring mental health diagnoses for clients receiving
38 services from a co-occurring disorder specialist;

1 (iv) The number of referrals made by co-occurring disorder
2 specialists, by American society of addiction medicine level; and

3 (v) The number of successful placements made by co-occurring
4 disorder specialists; and

5 (g) Any other factors relevant to assessing the effects of the
6 availability of the co-occurring disorder specialist enhancement on
7 the behavioral health workforce and the provision of appropriate
8 services to clients.

9 (3) The agencies listed in subsection (1) of this section must
10 develop the tools necessary to conduct the review and analysis
11 required by this section.

12 (4) By December 1, 2022, the department shall submit a
13 preliminary report of the findings of its review and analysis and any
14 recommendations for improving the qualifications for an enhancement
15 or the practice of those who have been issued an enhancement, and a
16 final report by December 1, 2024.

17 NEW SECTION. **Sec. 31.** The department of health shall conduct a
18 sunrise review under chapter 18.120 RCW to evaluate the need for
19 creation of a bachelor's level behavioral health professional
20 credential that includes competencies related to the treatment of
21 both substance use and mental health disorders appropriate to the
22 bachelor's level of education, allows for reimbursement of services
23 in all appropriate settings where persons with behavioral health
24 disorders are treated, and is designed to facilitate work in
25 conjunction with master's level clinicians in a fashion that enables
26 all professionals to work at the top of their scope of license.

27 NEW SECTION. **Sec. 32.** (1) Section 13 of this act takes effect
28 August 1, 2020.

29 (2) Section 19 of this act takes effect July 1, 2026.

30 NEW SECTION. **Sec. 33.** (1) Section 12 of this act expires August
31 1, 2020.

32 (2) Section 18 of this act expires July 1, 2026.

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