

SENATE BILL REPORT

SHB 1314

As of March 19, 2021

Title: An act relating to veteran diversion from involuntary commitment.

Brief Description: Concerning veteran diversion from involuntary commitment.

Sponsors: House Committee on Civil Rights & Judiciary (originally sponsored by Representatives Young, Lovick, Dufault, Hackney, Bateman, Rule, Lekanoff, Pollet and Callan).

Brief History: Passed House: 3/7/21, 98-0.

Committee Activity: Health & Long Term Care: 3/15/21 [w/oRec-BH].
Behavioral Health Subcommittee to Health & Long Term Care: 3/19/21.

Brief Summary of Bill

- Requires an emergency department or other facility holding a person for an involuntary commitment evaluation to inquire about the person's veteran status and amenability to treatment by the Veteran's Health Administration (VHA).
- Requires the facility and designated crisis responder to collaborate with the VHA to transfer the person to an appropriate VHA treatment facility.

SENATE COMMITTEE ON BEHAVIORAL HEALTH SUBCOMMITTEE TO HEALTH & LONG TERM CARE

Staff: Kevin Black (786-7747)

Background: Involuntary Treatment. Under the Involuntary Treatment Act, a person may be committed by a court for involuntary treatment if the person, due to a behavioral health disorder, presents a likelihood of serious harm or is gravely disabled and will not consent to

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voluntary treatment.

Detention for a Designated Crisis Responder Investigation. Designated crisis responders (DCRs) are responsible for investigating and determining whether a person may be in need of involuntary treatment. A peace officer may deliver a person to an emergency room, triage facility, crisis stabilization unit, evaluation and treatment facility (E&T), secure withdrawal management and stabilization facility (SWMS), or approved substance use disorder treatment facility for investigation for the need for detention for involuntary treatment, at their own instigation or at the request of a DCR. The facility may hold a person for up to 12 hours for this investigation, not counting time periods prior to medical clearance. Within three hours after arrival, the person must be examined by a mental health professional. Within 12 hours after arrival, the DCR must determine if the person meets involuntary commitment criteria for continued detention for up to 120 additional hours of involuntary treatment at an E&T or SWMS.

The Veteran's Health Administration. The Veteran's Health Administration (VHA) is a division of the U.S. Department of Veteran Affairs which provides health care to qualified veterans. The VHA is the nation's largest integrated health care system, providing care at 1250 health care facilities, including 28 medical centers and outpatient clinics in the state of Washington. The VHA provides confidential mental health services which address a wide range of conditions from depression to posttraumatic stress disorder to substance use disorder services and suicide prevention. The VHA uses a number of innovative behavioral health services targeted at management of serious mental illness such as peer specialists, local recovery coordinators, assertive community treatment, supportive employment, and more.

Veterans generally qualify for VHA services if they served for 24 months or more of active duty and received an other-than-dishonorable discharge, although exceptions exist that may lead to waiver of the 24 month requirement.

Summary of Bill: An emergency department, crisis stabilization unit, evaluation and treatment facility, or triage facility which detains a person for investigation of the need for involuntary commitment by a DCR must inquire as to the person's veteran status, or eligibility for veteran's benefits. If the person appears to be potentially eligible for these benefits, the facility must inquire whether the person would be amenable to treatment by the VHA instead of other relevant treatment options. If the person is amenable and treatment by the VHA is appropriate, the facility must communicate this information to the DCR and the DCR must first refer the person to the VHA for treatment at a facility capable of meeting their needs. If the person is accepted for treatment at an appropriate VHA facility, the DCR, VHA, and facility detaining the person must make arrangements to have the person transported to the VHA facility.

The inquiry by the facility detaining the person must occur within the 12-hour period allotted for the person's evaluation by a DCR following medical clearance by the facility.

Appropriation: None.

Fiscal Note: Available.

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

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

Staff Summary of Public Testimony: PRO: This bill is about options for veterans. Many veterans deal with pain and trauma, and end up in difficult situations. This bill is the culmination of a couple of years of work. My son is a veteran who has schizophrenia. He was once refused admittance to the Seattle VHA after being detained for involuntary commitment, and spent months in a hospital instead of the 10 to 14 days which it would usually take for the VHA to stabilize him. The VHA accepts only voluntary patients, and will not admit a patient if they are detained involuntarily before the VHA is contacted. This bill ensures that the VHA is contacted first when a veteran is involved. The substitute bill was amended to provide not only access to the VHA, but the choice to the veteran whether to exercise this option.

Persons Testifying: PRO: Representative Jesse Young, Prime Sponsor; Mike Brandstetter, City of Lakewood; Donald Bremner.

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