
SUBSTITUTE SENATE BILL 5073

State of Washington

67th Legislature

2021 Regular Session

By Senate Behavioral Health Subcommittee to Health & Long Term Care (originally sponsored by Senators Dhingra, Das, Kuderer, Salomon, Warnick, and Wilson, C.)

READ FIRST TIME 01/25/21.

1 AN ACT Relating to improving involuntary commitment laws;
2 amending RCW 71.05.210, 71.05.210, 71.05.240, 71.05.240, 71.05.320,
3 71.05.320, 71.05.340, 71.05.585, 71.05.590, 71.05.590, 71.34.755,
4 70.02.230, 70.02.240, 71.05.425, 71.34.710, 71.34.710, 71.34.720, and
5 71.34.720; amending 2020 c 302 ss 110 and 111 (uncodified);
6 reenacting and amending RCW 71.05.150, 71.05.150, 71.05.153,
7 71.05.153, 71.05.020, 71.05.020, 71.05.020, 71.05.020, 71.34.020,
8 71.34.020, 71.34.020, and 71.34.020; providing effective dates;
9 providing contingent effective dates; providing expiration dates; and
10 declaring an emergency.

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

12 **Sec. 1.** RCW 71.05.150 and 2020 c 302 s 13, 2020 c 256 s 302, and
13 2020 c 5 s 2 are each reenacted and amended to read as follows:

14 (1) When a designated crisis responder receives information
15 alleging that a person, as a result of a behavioral health disorder,
16 presents a likelihood of serious harm or is gravely disabled, or that
17 a person is in need of assisted outpatient behavioral health
18 treatment; the designated crisis responder may, after investigation
19 and evaluation of the specific facts alleged and of the reliability
20 and credibility of any person providing information to initiate
21 detention or involuntary outpatient treatment, if satisfied that the

1 allegations are true and that the person will not voluntarily seek
2 appropriate treatment, file a petition for initial detention under
3 this section or a petition for involuntary outpatient behavioral
4 health treatment under RCW 71.05.148. Before filing the petition, the
5 designated crisis responder must personally interview the person,
6 unless the person refuses an interview, and determine whether the
7 person will voluntarily receive appropriate evaluation and treatment
8 at an evaluation and treatment facility, crisis stabilization unit,
9 triage facility, secure withdrawal management and stabilization
10 facility, or approved substance use disorder treatment program. As
11 part of the assessment, the designated crisis responder must attempt
12 to ascertain if the person has executed a mental health advance
13 directive under chapter 71.32 RCW. The interview performed by the
14 designated crisis responder may be conducted by video provided that a
15 licensed health care professional or professional person who can
16 adequately and accurately assist with obtaining any necessary
17 information is present with the person at the time of the interview.

18 (2) (a) A (~~written order of apprehension~~) superior court judge
19 may issue a warrant to detain a person with a behavioral health
20 disorder to a designated evaluation and treatment facility, a secure
21 withdrawal management and stabilization facility, or an approved
22 substance use disorder treatment program, for a period of not more
23 than one hundred twenty hours for evaluation and treatment (~~(, may be~~
24 ~~issued by a judge of the superior court)~~) upon request of a
25 designated crisis responder, subject to (d) of this subsection,
26 whenever it appears to the satisfaction of ((a)) the judge (~~(of the~~
27 ~~superior court)~~) that:

28 (i) (~~That there~~) There is probable cause to support the
29 petition; and

30 (ii) (~~That the~~) The person has refused or failed to accept
31 appropriate evaluation and treatment voluntarily.

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

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

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

7 (e) If the court does not issue an order to detain a person
8 pursuant to this subsection (2), the court shall issue an order to
9 dismiss the initial petition.

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

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

1 together with a notice of rights and a petition for initial
2 detention.

3 (5) An Indian tribe shall have jurisdiction exclusive to the
4 state as to any involuntary commitment of an American Indian or
5 Alaska Native to an evaluation and treatment facility located within
6 the boundaries of that tribe, unless the tribe has consented to the
7 state's concurrent jurisdiction, or the tribe has expressly declined
8 to exercise its exclusive jurisdiction.

9 (6) Tribal court orders for involuntary commitment shall be
10 recognized and enforced in accordance with superior court civil rule
11 82.5.

12 (7) In any investigation and evaluation of an individual under
13 RCW 71.05.150 or 71.05.153 in which the designated crisis responder
14 knows, or has reason to know, that the individual is an American
15 Indian or Alaska Native who receives medical or behavioral health
16 services from a tribe within this state, the designated crisis
17 responder shall notify the tribe or Indian health care provider
18 regarding whether or not a petition for initial detention or
19 involuntary outpatient treatment will be filed. Notification shall be
20 made in person or by telephonic or electronic communication to the
21 tribal contact listed in the authority's tribal crisis coordination
22 plan as soon as possible but no later than three hours subject to the
23 requirements in RCW 70.02.230 (2) (~~(dd)~~) (ee) and (3). A designated
24 crisis responder may restrict the release of information as necessary
25 to comply with 42 C.F.R. Part 2.

26 **Sec. 2.** RCW 71.05.150 and 2020 c 302 s 14, 2020 c 256 s 303, and
27 2020 c 5 s 3 are each reenacted and amended to read as follows:

28 (1) When a designated crisis responder receives information
29 alleging that a person, as a result of a behavioral health disorder,
30 presents a likelihood of serious harm or is gravely disabled, or that
31 a person is in need of assisted outpatient behavioral health
32 treatment; the designated crisis responder may, after investigation
33 and evaluation of the specific facts alleged and of the reliability
34 and credibility of any person providing information to initiate
35 detention or involuntary outpatient treatment, if satisfied that the
36 allegations are true and that the person will not voluntarily seek
37 appropriate treatment, file a petition for initial detention under
38 this section or a petition for involuntary outpatient behavioral
39 health treatment under RCW 71.05.148. Before filing the petition, the

1 designated crisis responder must personally interview the person,
2 unless the person refuses an interview, and determine whether the
3 person will voluntarily receive appropriate evaluation and treatment
4 at an evaluation and treatment facility, crisis stabilization unit,
5 triage facility, secure withdrawal management and stabilization
6 facility, or approved substance use disorder treatment program. As
7 part of the assessment, the designated crisis responder must attempt
8 to ascertain if the person has executed a mental health advance
9 directive under chapter 71.32 RCW. The interview performed by the
10 designated crisis responder may be conducted by video provided that a
11 licensed health care professional or professional person who can
12 adequately and accurately assist with obtaining any necessary
13 information is present with the person at the time of the interview.

14 (2) (a) A (~~written order of apprehension~~) superior court judge
15 may issue a warrant to detain a person with a behavioral health
16 disorder to a designated evaluation and treatment facility, a secure
17 withdrawal management and stabilization facility, or an approved
18 substance use disorder treatment program, for a period of not more
19 than one hundred twenty hours for evaluation and treatment (~~(, may be~~
20 ~~issued by a judge of the superior court)~~) upon request of a
21 designated crisis responder whenever it appears to the satisfaction
22 of ((a)) the judge (~~(of the superior court)~~) that:

23 (i) (~~That there~~) There is probable cause to support the
24 petition; and

25 (ii) (~~That the~~) The person has refused or failed to accept
26 appropriate evaluation and treatment voluntarily.

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

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

35 (d) If the court does not issue an order to detain a person
36 pursuant to this subsection (2), the court shall issue an order to
37 dismiss the initial petition.

38 (3) The designated crisis responder shall then serve or cause to
39 be served on such person, his or her guardian, and conservator, if
40 any, a copy of the order together with a notice of rights, and a

1 petition for initial detention. After service on such person the
2 designated crisis responder shall file the return of service in court
3 and provide copies of all papers in the court file to the evaluation
4 and treatment facility, secure withdrawal management and
5 stabilization facility, or approved substance use disorder treatment
6 program, and the designated attorney. The designated crisis responder
7 shall notify the court and the prosecuting attorney that a probable
8 cause hearing will be held within one hundred twenty hours of the
9 date and time of outpatient evaluation or admission to the evaluation
10 and treatment facility, secure withdrawal management and
11 stabilization facility, or approved substance use disorder treatment
12 program. The person shall be permitted to be accompanied by one or
13 more of his or her relatives, friends, an attorney, a personal
14 physician, or other professional or religious advisor to the place of
15 evaluation. An attorney accompanying the person to the place of
16 evaluation shall be permitted to be present during the admission
17 evaluation. Any other individual accompanying the person may be
18 present during the admission evaluation. The facility may exclude the
19 individual if his or her presence would present a safety risk, delay
20 the proceedings, or otherwise interfere with the evaluation.

21 (4) The designated crisis responder may notify a peace officer to
22 take such person or cause such person to be taken into custody and
23 placed in an evaluation and treatment facility, secure withdrawal
24 management and stabilization facility, or approved substance use
25 disorder treatment program. At the time such person is taken into
26 custody there shall commence to be served on such person, his or her
27 guardian, and conservator, if any, a copy of the original order
28 together with a notice of rights and a petition for initial
29 detention.

30 (5) An Indian tribe shall have jurisdiction exclusive to the
31 state as to any involuntary commitment of an American Indian or
32 Alaska Native to an evaluation and treatment facility located within
33 the boundaries of that tribe, unless the tribe has consented to the
34 state's concurrent jurisdiction, or the tribe has expressly declined
35 to exercise its exclusive jurisdiction.

36 (6) Tribal court orders for involuntary commitment shall be
37 recognized and enforced in accordance with superior court civil rule
38 82.5.

39 (7) In any investigation and evaluation of an individual under
40 RCW 71.05.150 or 71.05.153 in which the designated crisis responder

1 knows, or has reason to know, that the individual is an American
2 Indian or Alaska Native who receives medical or behavioral health
3 services from a tribe within this state, the designated crisis
4 responder shall notify the tribe or Indian health care provider
5 regarding whether or not a petition for initial detention or
6 involuntary outpatient treatment will be filed. Notification shall be
7 made in person or by telephonic or electronic communication to the
8 tribal contact listed in the authority's tribal crisis coordination
9 plan as soon as possible but no later than three hours subject to the
10 requirements in RCW 70.02.230 (2) (~~(dd)~~) (ee) and (3). A designated
11 crisis responder may restrict the release of information as necessary
12 to comply with 42 C.F.R. Part 2.

13 **Sec. 3.** RCW 71.05.153 and 2020 c 302 s 16 and 2020 c 5 s 4 are
14 each reenacted and amended to read as follows:

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

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

36 (i) Pursuant to subsection (1) of this section; or

37 (ii) When he or she has reasonable cause to believe that such
38 person is suffering from a behavioral health disorder and presents an

1 imminent likelihood of serious harm or is in imminent danger because
2 of being gravely disabled.

3 (b) A peace officer's delivery of a person, to a secure
4 withdrawal management and stabilization facility or approved
5 substance use disorder treatment program is subject to the
6 availability of a secure withdrawal management and stabilization
7 facility or approved substance use disorder treatment program with
8 adequate space for the person.

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

17 (4) Within three hours after arrival, not counting time periods
18 prior to medical clearance, the person must be examined by a mental
19 health professional or substance use disorder professional. Within
20 twelve hours of notice of the need for evaluation, not counting time
21 periods prior to medical clearance, the designated crisis responder
22 must determine whether the individual meets detention criteria. As
23 part of the assessment, the designated crisis responder must attempt
24 to ascertain if the person has executed a mental health advance
25 directive under chapter 71.32 RCW. The interview performed by the
26 designated crisis responder may be conducted by video provided that a
27 licensed health care professional or professional person who can
28 adequately and accurately assist with obtaining any necessary
29 information is present with the person at the time of the interview.
30 If the individual is detained, the designated crisis responder shall
31 file a petition for detention or a supplemental petition as
32 appropriate and commence service on the designated attorney for the
33 detained person. If the individual is released to the community, the
34 behavioral health service provider shall inform the peace officer of
35 the release within a reasonable period of time after the release if
36 the peace officer has specifically requested notification and
37 provided contact information to the provider.

38 (5) Dismissal of a commitment petition is not the appropriate
39 remedy for a violation of the timeliness requirements of this section
40 based on the intent of this chapter under RCW 71.05.010 except in the

1 few cases where the facility staff or designated crisis responder has
2 totally disregarded the requirements of this section.

3 **Sec. 4.** RCW 71.05.153 and 2020 c 302 s 17 and 2020 c 5 s 5 are
4 each reenacted and amended to read as follows:

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

17 (2) A peace officer may take or cause such person to be taken
18 into custody and immediately delivered to a triage facility, crisis
19 stabilization unit, evaluation and treatment facility, secure
20 withdrawal management and stabilization facility, approved substance
21 use disorder treatment program, or the emergency department of a
22 local hospital under the following circumstances:

23 (a) Pursuant to subsection (1) of this section; or

24 (b) When he or she has reasonable cause to believe that such
25 person is suffering from a behavioral health disorder and presents an
26 imminent likelihood of serious harm or is in imminent danger because
27 of being gravely disabled.

28 (3) Persons delivered to a crisis stabilization unit, evaluation
29 and treatment facility, emergency department of a local hospital,
30 triage facility that has elected to operate as an involuntary
31 facility, secure withdrawal management and stabilization facility, or
32 approved substance use disorder treatment program by peace officers
33 pursuant to subsection (2) of this section may be held by the
34 facility for a period of up to twelve hours, not counting time
35 periods prior to medical clearance.

36 (4) Within three hours after arrival, not counting time periods
37 prior to medical clearance, the person must be examined by a mental
38 health professional or substance use disorder professional. Within
39 twelve hours of notice of the need for evaluation, not counting time

1 periods prior to medical clearance, the designated crisis responder
2 must determine whether the individual meets detention criteria. As
3 part of the assessment, the designated crisis responder must attempt
4 to ascertain if the person has executed a mental health advance
5 directive under chapter 71.32 RCW. The interview performed by the
6 designated crisis responder may be conducted by video provided that a
7 licensed health care professional or professional person who can
8 adequately and accurately assist with obtaining any necessary
9 information is present with the person at the time of the interview.
10 If the individual is detained, the designated crisis responder shall
11 file a petition for detention or a supplemental petition as
12 appropriate and commence service on the designated attorney for the
13 detained person. If the individual is released to the community, the
14 behavioral health service provider shall inform the peace officer of
15 the release within a reasonable period of time after the release if
16 the peace officer has specifically requested notification and
17 provided contact information to the provider.

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

23 **Sec. 5.** RCW 71.05.210 and 2020 c 302 s 26 are each amended to
24 read as follows:

25 (1) Each person involuntarily detained and accepted or admitted
26 at an evaluation and treatment facility, secure withdrawal management
27 and stabilization facility, or approved substance use disorder
28 treatment program:

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

32 (i) One physician, physician assistant, or advanced registered
33 nurse practitioner; and

34 (ii) One mental health professional. If the person is detained
35 for substance use disorder evaluation and treatment, the person may
36 be examined by a substance use disorder professional instead of a
37 mental health professional; and

38 (b) Shall receive such treatment and care as his or her condition
39 requires including treatment on an outpatient basis for the period

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

16 (2) If, (~~after~~) at any time during the involuntary treatment
17 hold and following the initial examination and evaluation, the mental
18 health professional or substance use disorder professional and
19 licensed physician, physician assistant, or psychiatric advanced
20 registered nurse practitioner determine that the initial needs of the
21 person, if detained to an evaluation and treatment facility, would be
22 better served by placement in a secure withdrawal management and
23 stabilization facility or approved substance use disorder treatment
24 program, or, if detained to a secure withdrawal management and
25 stabilization facility or approved substance use disorder treatment
26 program, would be better served in an evaluation and treatment
27 facility then the person shall be referred to the more appropriate
28 placement for the remainder of the current commitment period without
29 any need for further court review; however, a person may only be
30 referred to a secure withdrawal management and stabilization facility
31 or approved substance use disorder treatment program if there is an
32 available secure withdrawal management and stabilization facility or
33 approved substance use disorder treatment program with adequate space
34 for the person.

35 (3) An evaluation and treatment center, secure withdrawal
36 management and stabilization facility, or approved substance use
37 disorder treatment program admitting or accepting any person pursuant
38 to this chapter whose physical condition reveals the need for
39 hospitalization shall assure that such person is transferred to an
40 appropriate hospital for evaluation or admission for treatment.

1 Notice of such fact shall be given to the court, the designated
2 attorney, and the designated crisis responder and the court shall
3 order such continuance in proceedings under this chapter as may be
4 necessary, but in no event may this continuance be more than fourteen
5 days.

6 **Sec. 6.** RCW 71.05.210 and 2020 c 302 s 27 are each amended to
7 read as follows:

8 (1) Each person involuntarily detained and accepted or admitted
9 at an evaluation and treatment facility, secure withdrawal management
10 and stabilization facility, or approved substance use disorder
11 treatment program:

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

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

17 (ii) One mental health professional. If the person is detained
18 for substance use disorder evaluation and treatment, the person may
19 be examined by a substance use disorder professional instead of a
20 mental health professional; and

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

38 (2) If, (~~after~~) at any time during the involuntary treatment
39 hold and following the initial examination and evaluation, the mental

1 health professional or substance use disorder professional and
2 licensed physician, physician assistant, or psychiatric advanced
3 registered nurse practitioner determine that the initial needs of the
4 person, if detained to an evaluation and treatment facility, would be
5 better served by placement in a secure withdrawal management and
6 stabilization facility or approved substance use disorder treatment
7 program, or, if detained to a secure withdrawal management and
8 stabilization facility or approved substance use disorder treatment
9 program, would be better served in an evaluation and treatment
10 facility then the person shall be referred to the more appropriate
11 placement for the remainder of the current commitment period without
12 any need for further court review.

13 (3) An evaluation and treatment center, secure withdrawal
14 management and stabilization facility, or approved substance use
15 disorder treatment program admitting or accepting any person pursuant
16 to this chapter whose physical condition reveals the need for
17 hospitalization shall assure that such person is transferred to an
18 appropriate hospital for evaluation or admission for treatment.
19 Notice of such fact shall be given to the court, the designated
20 attorney, and the designated crisis responder and the court shall
21 order such continuance in proceedings under this chapter as may be
22 necessary, but in no event may this continuance be more than fourteen
23 days.

24 **Sec. 7.** RCW 71.05.240 and 2020 c 302 s 39 are each amended to
25 read as follows:

26 (1) If a petition is filed for fourteen day involuntary treatment
27 or ninety days of less restrictive alternative treatment, the court
28 shall hold a probable cause hearing within one hundred twenty hours
29 of the initial detention of such person as determined in RCW
30 71.05.180, or at a time determined under RCW 71.05.148.

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

38 (3) If the person or his or her attorney alleges, prior to the
39 commencement of the hearing, that the person has in good faith

1 volunteered for treatment, the petitioner must show, by preponderance
2 of the evidence, that the person has not in good faith volunteered
3 for appropriate treatment. In order to qualify as a good faith
4 volunteer, the person must abide by procedures and a treatment plan
5 as prescribed by a treatment facility and professional staff.

6 (4) (a) Subject to (b) of this subsection, at the conclusion of
7 the probable cause hearing, if the court finds by a preponderance of
8 the evidence that such person, as the result of a behavioral health
9 disorder, presents a likelihood of serious harm, or is gravely
10 disabled, and, after considering less restrictive alternatives to
11 involuntary detention and treatment, finds that no such alternatives
12 are in the best interests of such person or others, the court shall
13 order that such person be detained for involuntary treatment not to
14 exceed fourteen days in a facility licensed or certified to provide
15 treatment by the department or under RCW 71.05.745.

16 (b) A court may only order commitment to a secure withdrawal
17 management and stabilization facility or approved substance use
18 disorder treatment program if there is an available facility with
19 adequate space for the person.

20 (c) At the conclusion of the probable cause hearing, if the court
21 finds by a preponderance of the evidence that such person, as the
22 result of a behavioral health disorder, presents a likelihood of
23 serious harm or is gravely disabled, but that treatment in a less
24 restrictive setting than detention is in the best interest of such
25 person or others, the court shall order an appropriate less
26 restrictive alternative course of treatment for up to ninety days.

27 (d) If the court finds by a preponderance of the evidence that
28 such person, as the result of a behavioral health disorder, is in
29 need of assisted outpatient behavioral health treatment, and that the
30 person does not present a likelihood of serious harm and is not
31 gravely disabled, the court shall order an appropriate less
32 restrictive alternative course of treatment for up to ninety days.

33 (5) An order for less restrictive alternative treatment must name
34 the behavioral health service provider responsible for identifying
35 the services the person will receive in accordance with RCW
36 71.05.585, and must include a requirement that the person cooperate
37 with the treatment recommendations of the behavioral health service
38 provider.

39 (6) The court shall notify the person orally and in writing that
40 if involuntary treatment is sought beyond the fourteen-day inpatient

1 or ninety-day less restrictive treatment period, the person has the
2 right to a full hearing or jury trial under RCW 71.05.310. If the
3 commitment is for mental health treatment, the court shall also
4 notify the person orally and in writing that the person is barred
5 from the possession of firearms and that the prohibition remains in
6 effect until a court restores his or her right to possess a firearm
7 under RCW 9.41.047.

8 (7) If the court does not issue an order to detain a person under
9 this section, the court shall issue an order to dismiss the petition.

10 (8) Nothing in this section precludes the court from subsequently
11 modifying the terms of an order for less restrictive alternative
12 treatment under RCW 71.05.590(3).

13 **Sec. 8.** RCW 71.05.240 and 2020 c 302 s 40 are each amended to
14 read as follows:

15 (1) If a petition is filed for fourteen day involuntary treatment
16 or ninety days of less restrictive alternative treatment, the court
17 shall hold a probable cause hearing within one hundred twenty hours
18 of the initial detention of such person as determined in RCW
19 71.05.180, or at a time determined under RCW 71.05.148.

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

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

34 (4) (a) At the conclusion of the probable cause hearing, if the
35 court finds by a preponderance of the evidence that such person, as
36 the result of a behavioral health disorder, presents a likelihood of
37 serious harm, or is gravely disabled, and, after considering less
38 restrictive alternatives to involuntary detention and treatment,
39 finds that no such alternatives are in the best interests of such

1 person or others, the court shall order that such person be detained
2 for involuntary treatment not to exceed fourteen days in a facility
3 licensed or certified to provide treatment by the department or under
4 RCW 71.05.745.

5 (b) At the conclusion of the probable cause hearing, if the court
6 finds by a preponderance of the evidence that such person, as the
7 result of a behavioral health disorder, presents a likelihood of
8 serious harm or is gravely disabled, but that treatment in a less
9 restrictive setting than detention is in the best interest of such
10 person or others, the court shall order an appropriate less
11 restrictive alternative course of treatment for up to ninety days.

12 (c) If the court finds by a preponderance of the evidence that
13 such person, as the result of a behavioral health disorder, is in
14 need of assisted outpatient behavioral health treatment, and that the
15 person does not present a likelihood of serious harm and is not
16 gravely disabled, the court shall order an appropriate less
17 restrictive alternative course of treatment for up to ninety days.

18 (5) An order for less restrictive alternative treatment must name
19 the behavioral health service provider responsible for identifying
20 the services the person will receive in accordance with RCW
21 71.05.585, and must include a requirement that the person cooperate
22 with the treatment recommendations of the behavioral health service
23 provider.

24 (6) The court shall notify the person orally and in writing that
25 if involuntary treatment is sought beyond the fourteen-day inpatient
26 or ninety-day less restrictive treatment period, such person has the
27 right to a full hearing or jury trial under RCW 71.05.310. If the
28 commitment is for mental health treatment, the court shall also
29 notify the person orally and in writing that the person is barred
30 from the possession of firearms and that the prohibition remains in
31 effect until a court restores his or her right to possess a firearm
32 under RCW 9.41.047.

33 (7) If the court does not issue an order to detain a person under
34 this section, the court shall issue an order to dismiss the petition.

35 (8) Nothing in this section precludes the court from subsequently
36 modifying the terms of an order for less restrictive alternative
37 treatment under RCW 71.05.590(3).

38 **Sec. 9.** RCW 71.05.320 and 2020 c 302 s 45 are each amended to
39 read as follows:

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

9 (b) If the order for inpatient treatment is based on a substance
10 use disorder, treatment must take place at an approved substance use
11 disorder treatment program. The court may only enter an order for
12 commitment based on a substance use disorder if there is an available
13 approved substance use disorder treatment program with adequate space
14 for the person.

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

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

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

1 requirement that the person cooperate with the services planned by
2 the behavioral health service provider.

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

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

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

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

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

40 (d) Continues to be gravely disabled; or

1 (e) Is in need of assisted outpatient behavioral health
2 treatment.

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

6 If less restrictive alternative treatment is sought, the petition
7 shall set forth any recommendations for less restrictive alternative
8 treatment services.

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

15 (6)(a) The hearing shall be held as provided in RCW 71.05.310,
16 and if the court or jury finds that the grounds for additional
17 confinement as set forth in this section are present, subject to
18 subsection (1)(b) of this section, the court may order the committed
19 person returned for an additional period of treatment not to exceed
20 one hundred eighty days from the date of judgment, except as provided
21 in subsection (7) of this section. If the court's order is based
22 solely on the grounds identified in subsection (4)(e) of this
23 section, the court may enter an order for less restrictive
24 alternative treatment not to exceed one hundred eighty days from the
25 date of judgment, and may not enter an order for inpatient treatment.
26 An order for less restrictive alternative treatment must name the
27 behavioral health service provider responsible for identifying the
28 services the person will receive in accordance with RCW 71.05.585,
29 and must include a requirement that the person cooperate with the
30 services planned by the behavioral health service provider.

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

39 (7) An order for less restrictive treatment entered under
40 subsection (6) of this section may be for up to one year when the

1 person's previous commitment term was for intensive inpatient
2 treatment in a state hospital.

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

7 (9) Nothing in this section precludes the court from subsequently
8 modifying the terms of an order for less restrictive alternative
9 treatment under RCW 71.05.590(3).

10 **Sec. 10.** RCW 71.05.320 and 2020 c 302 s 46 are each amended to
11 read as follows:

12 (1) If the court or jury finds that grounds set forth in RCW
13 71.05.280 have been proven and that the best interests of the person
14 or others will not be served by a less restrictive treatment which is
15 an alternative to detention, the court shall remand him or her to the
16 custody of the department of social and health services or to a
17 facility certified for ninety day treatment by the department for a
18 further period of intensive treatment not to exceed ninety days from
19 the date of judgment.

20 If the order for inpatient treatment is based on a substance use
21 disorder, treatment must take place at an approved substance use
22 disorder treatment program. If the grounds set forth in RCW
23 71.05.280(3) are the basis of commitment, then the period of
24 treatment may be up to but not exceed one hundred eighty days from
25 the date of judgment to the custody of the department of social and
26 health services or to a facility certified for one hundred eighty-day
27 treatment by the department or under RCW 71.05.745.

28 (2) If the court or jury finds that grounds set forth in RCW
29 71.05.280 have been proven, but finds that treatment less restrictive
30 than detention will be in the best interest of the person or others,
31 then the court shall remand him or her to the custody of the
32 department of social and health services or to a facility certified
33 for ninety day treatment by the department or to a less restrictive
34 alternative for a further period of less restrictive treatment not to
35 exceed ninety days from the date of judgment. If the grounds set
36 forth in RCW 71.05.280(3) are the basis of commitment, then the
37 period of treatment may be up to but not exceed one hundred eighty
38 days from the date of judgment. If the court or jury finds that the
39 grounds set forth in RCW 71.05.280(5) have been proven, and provide

1 the only basis for commitment, the court must enter an order for less
2 restrictive alternative treatment for up to ninety days from the date
3 of judgment and may not order inpatient treatment.

4 (3) An order for less restrictive alternative treatment entered
5 under subsection (2) of this section must name the behavioral health
6 service provider responsible for identifying the services the person
7 will receive in accordance with RCW 71.05.585, and must include a
8 requirement that the person cooperate with the services planned by
9 the behavioral health service provider.

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

17 (a) During the current period of court ordered treatment: (i) Has
18 threatened, attempted, or inflicted physical harm upon the person of
19 another, or substantial damage upon the property of another, and (ii)
20 as a result of a behavioral health disorder or developmental
21 disability presents a likelihood of serious harm; or

22 (b) Was taken into custody as a result of conduct in which he or
23 she attempted or inflicted serious physical harm upon the person of
24 another, and continues to present, as a result of a behavioral health
25 disorder or developmental disability, a likelihood of serious harm;
26 or

27 (c) (i) Is in custody pursuant to RCW 71.05.280(3) and as a result
28 of a behavioral health disorder or developmental disability continues
29 to present a substantial likelihood of repeating acts similar to the
30 charged criminal behavior, when considering the person's life
31 history, progress in treatment, and the public safety.

32 (ii) In cases under this subsection where the court has made an
33 affirmative special finding under RCW 71.05.280(3)(b), the commitment
34 shall continue for up to an additional one hundred eighty-day period
35 whenever the petition presents prima facie evidence that the person
36 continues to suffer from a behavioral health disorder or
37 developmental disability that results in a substantial likelihood of
38 committing acts similar to the charged criminal behavior, unless the
39 person presents proof through an admissible expert opinion that the
40 person's condition has so changed such that the behavioral health

1 disorder or developmental disability no longer presents a substantial
2 likelihood of the person committing acts similar to the charged
3 criminal behavior. The initial or additional commitment period may
4 include transfer to a specialized program of intensive support and
5 treatment, which may be initiated prior to or after discharge from
6 the state hospital; or

7 (d) Continues to be gravely disabled; or

8 (e) Is in need of assisted outpatient behavioral health
9 treatment.

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

13 If less restrictive alternative treatment is sought, the petition
14 shall set forth any recommendations for less restrictive alternative
15 treatment services.

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

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

38 (b) At the end of the one hundred eighty-day period of
39 commitment, or one-year period of commitment if subsection (7) of
40 this section applies, the committed person shall be released unless a

1 petition for an additional one hundred eighty-day period of continued
2 treatment is filed and heard in the same manner as provided in this
3 section. Successive one hundred eighty-day commitments are
4 permissible on the same grounds and pursuant to the same procedures
5 as the original one hundred eighty-day commitment.

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

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

14 (9) Nothing in this section precludes the court from subsequently
15 modifying the terms of an order for less restrictive alternative
16 treatment under RCW 71.05.590(3).

17 **Sec. 11.** RCW 71.05.340 and 2018 c 201 s 3017 are each amended to
18 read as follows:

19 (1)(a) When, in the opinion of the superintendent or the
20 professional person in charge of the hospital or facility providing
21 involuntary treatment, the committed person can be appropriately
22 served by outpatient treatment prior to or at the expiration of the
23 period of commitment, then such outpatient care may be required as a
24 term of conditional release for a period which, when ~~((added to the))~~
25 combined with the number of days the person has spent in inpatient
26 treatment ~~((period))~~, shall not exceed ~~((the period of commitment))~~
27 90 days if the underlying commitment was for a period of 14 or 90
28 days, or 180 days if the underlying commitment was for a period of
29 180 days. If the facility or agency designated to provide outpatient
30 treatment is other than the facility providing involuntary treatment,
31 the outpatient facility so designated must agree in writing to assume
32 such responsibility. A copy of the terms of conditional release shall
33 be given to the patient, the designated crisis responder in the
34 county in which the patient is to receive outpatient treatment, and
35 to the court of original commitment.

36 (b) Before a person committed under grounds set forth in RCW
37 71.05.280(3) or 71.05.320(4)(c) is conditionally released under (a)
38 of this subsection, the superintendent or professional person in
39 charge of the hospital or facility providing involuntary treatment

1 shall in writing notify the prosecuting attorney of the county in
2 which the criminal charges against the committed person were
3 dismissed, of the decision to conditionally release the person.
4 Notice and a copy of the terms of conditional release shall be
5 provided at least thirty days before the person is released from
6 inpatient care. Within twenty days after receiving notice, the
7 prosecuting attorney may petition the court in the county that issued
8 the commitment order to hold a hearing to determine whether the
9 person may be conditionally released and the terms of the conditional
10 release. The prosecuting attorney shall provide a copy of the
11 petition to the superintendent or professional person in charge of
12 the hospital or facility providing involuntary treatment, the
13 attorney, if any, and guardian or conservator of the committed
14 person, and the court of original commitment. If the county in which
15 the committed person is to receive outpatient treatment is the same
16 county in which the criminal charges against the committed person
17 were dismissed, then the court shall, upon the motion of the
18 prosecuting attorney, transfer the proceeding to the court in that
19 county. The court shall conduct a hearing on the petition within ten
20 days of the filing of the petition. The committed person shall have
21 the same rights with respect to notice, hearing, and counsel as for
22 an involuntary treatment proceeding, except as set forth in this
23 subsection and except that there shall be no right to jury trial. The
24 issue to be determined at the hearing is whether or not the person
25 may be conditionally released without substantial danger to other
26 persons, or substantial likelihood of committing criminal acts
27 jeopardizing public safety or security. If the court disapproves of
28 the conditional release, it may do so only on the basis of
29 substantial evidence. Pursuant to the determination of the court upon
30 the hearing, the conditional release of the person shall be approved
31 by the court on the same or modified conditions or the person shall
32 be returned for involuntary treatment on an inpatient basis subject
33 to release at the end of the period for which he or she was
34 committed, or otherwise in accordance with the provisions of this
35 chapter.

36 (2) The facility or agency designated to provide outpatient care
37 or the secretary of the department of social and health services may
38 modify the conditions for continued release when such modification is
39 in the best interest of the person. Notification of such changes
40 shall be sent to all persons receiving a copy of the original

1 conditions. Enforcement or revocation proceedings related to a
2 conditional release (~~order~~) may occur as provided under RCW
3 71.05.590.

4 **Sec. 12.** RCW 71.05.585 and 2020 c 302 s 53 are each amended to
5 read as follows:

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

8 (a) Assignment of a care coordinator;

9 (b) An intake evaluation with the provider of the less
10 restrictive alternative treatment;

11 (c) A psychiatric evaluation, a substance use disorder
12 evaluation, or both;

13 (d) A schedule of regular contacts with the provider of the
14 (~~less restrictive alternative~~) treatment services for the duration
15 of the order;

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

18 (f) An individual crisis plan; (~~and~~)

19 (g) Consultation about the formation of a mental health advance
20 directive under chapter 71.32 RCW; and

21 (h) Notification to the care coordinator assigned in (a) of this
22 subsection if reasonable efforts to engage the client fail to produce
23 substantial compliance with court-ordered treatment conditions.

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

26 (a) Medication management;

27 (b) Psychotherapy;

28 (c) Nursing;

29 (d) Substance (~~abuse~~) use disorder counseling;

30 (e) Residential treatment; (~~and~~)

31 (f) Support for housing, benefits, education, and employment; and

32 (g) Periodic court review.

33 (3) If the person was provided with involuntary medication under
34 RCW 71.05.215 or pursuant to a judicial order during the involuntary
35 commitment period, the less restrictive alternative treatment order
36 may authorize the less restrictive alternative treatment provider or
37 its designee to administer involuntary antipsychotic medication to
38 the person if the provider has attempted and failed to obtain the
39 informed consent of the person and there is a concurring medical

1 opinion approving the medication by a psychiatrist, physician
2 assistant working with a supervising psychiatrist, psychiatric
3 advanced registered nurse practitioner, or physician or physician
4 assistant in consultation with an independent mental health
5 professional with prescribing authority.

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

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

17 (6) A care coordinator may disclose information and records
18 related to mental health services pursuant to RCW 70.02.230(2)(k) for
19 purposes of implementing less restrictive alternative treatment.

20 (7) For the purpose of this section, "care coordinator" means a
21 clinical practitioner who coordinates the activities of less
22 restrictive alternative treatment. The care coordinator coordinates
23 activities with the designated crisis responders that are necessary
24 for enforcement and continuation of less restrictive alternative
25 orders and is responsible for coordinating service activities with
26 other agencies and establishing and maintaining a therapeutic
27 relationship with the individual on a continuing basis.

28 **Sec. 13.** RCW 71.05.590 and 2020 c 302 s 55 are each amended to
29 read as follows:

30 (1) Either an agency or facility designated to monitor or provide
31 services under a less restrictive alternative order or conditional
32 release (~~(order)~~), or a designated crisis responder, may take action
33 to enforce, modify, or revoke a less restrictive alternative or
34 conditional release (~~(order)~~). The agency, facility, or designated
35 crisis responder must determine that:

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

38 (b) Substantial deterioration in the person's functioning has
39 occurred;

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

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

5 (2) Actions taken under this section must include a flexible
6 range of responses of varying levels of intensity appropriate to the
7 circumstances and consistent with the interests of the individual and
8 the public in personal autonomy, safety, recovery, and compliance.
9 Available actions may include, but are not limited to, any of the
10 following:

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

14 (b) To increase the intensity of outpatient services provided to
15 the person by increasing the frequency of contacts with the provider,
16 referring the person for an assessment for assertive community
17 services, or by other means;

18 (c) To request a court hearing for review and modification of the
19 court order. The request must be made to or by the court with
20 jurisdiction over the order and specify the circumstances that give
21 rise to the request and what modification is being sought. The county
22 prosecutor shall assist the agency or facility in requesting this
23 hearing and issuing an appropriate summons to the person. This
24 subsection does not limit the inherent authority of a treatment
25 provider to alter conditions of treatment for clinical reasons, and
26 is intended to be used only when court intervention is necessary or
27 advisable to secure the person's compliance and prevent
28 decompensation or deterioration;

29 (d) To cause the person to be transported by a peace officer,
30 designated crisis responder, or other means to the agency or facility
31 monitoring or providing services under the court order, or to a
32 triage facility, crisis stabilization unit, emergency department,
33 evaluation and treatment facility, secure withdrawal management and
34 stabilization facility with available space, or an approved substance
35 use disorder treatment program with available space. The person may
36 be detained at the facility for up to twelve hours for the purpose of
37 an evaluation to determine whether modification, revocation, or
38 commitment proceedings are necessary and appropriate to stabilize the
39 person and prevent decompensation, deterioration, or physical harm.
40 Temporary detention for evaluation under this subsection is intended

1 to occur only following a pattern of noncompliance or the failure of
2 reasonable attempts at outreach and engagement, and may occur only
3 when in the clinical judgment of a designated crisis responder or the
4 professional person in charge of an agency or facility designated to
5 monitor less restrictive alternative services temporary detention is
6 appropriate. This subsection does not limit the ability or obligation
7 to pursue revocation procedures under subsection ~~((4))~~ (5) of this
8 section in appropriate circumstances; and

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

14 (3) A court may supervise a person on an order for less
15 restrictive alternative treatment or a conditional release. While the
16 person is under the order, the court may:

17 (a) Require appearance in court for periodic reviews; and

18 (b) Modify the order after considering input from the agency or
19 facility designated to provide or facilitate services. The court may
20 not remand the person into inpatient treatment except as provided
21 under subsection (5) of this section, but may take actions under
22 subsection (2) (a) through (d) of this section.

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

29 ~~((4))~~ (5) (a) Except as provided in subsection ~~((6))~~ (7) of
30 this section, a designated crisis responder or the secretary of the
31 department of social and health services may upon their own motion or
32 notification by the facility or agency designated to provide
33 outpatient care order a person subject to a court order under this
34 chapter to be apprehended and taken into custody and temporary
35 detention in an evaluation and treatment facility, an available
36 secure withdrawal management and stabilization facility with adequate
37 space, or an available approved substance use disorder treatment
38 program with adequate space, in or near the county in which he or she
39 is receiving outpatient treatment. Proceedings under this subsection

1 ((+4)) (5) may be initiated without ordering the apprehension and
2 detention of the person.

3 (b) Except as provided in subsection ((+6)) (7) of this section,
4 a person detained under this subsection ((+4)) (5) must be held
5 until such time, not exceeding five days, as a hearing can be
6 scheduled to determine whether or not the person should be returned
7 to the hospital or facility from which he or she had been released.
8 If the person is not detained, the hearing must be scheduled within
9 five days of service on the person. The designated crisis responder
10 or the secretary of the department of social and health services may
11 modify or rescind the order at any time prior to commencement of the
12 court hearing.

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

27 (d) Except as provided in subsection ((+6)) (7) of this section,
28 the issues for the court to determine are whether: (i) The person
29 adhered to the terms and conditions of the court order; (ii)
30 substantial deterioration in the person's functioning has occurred;
31 (iii) there is evidence of substantial decompensation with a
32 reasonable probability that the decompensation can be reversed by
33 further inpatient treatment; or (iv) there is a likelihood of serious
34 harm; and, if any of the above conditions apply, whether the court
35 should reinstate or modify the person's less restrictive alternative
36 or conditional release (~~order~~) or order the person's detention for
37 inpatient treatment. The person may waive the court hearing and allow
38 the court to enter a stipulated order upon the agreement of all
39 parties. If the court orders detention for inpatient treatment, the
40 treatment period must be for fourteen days from the revocation

1 hearing if the outpatient order was based on a petition under RCW
2 71.05.160 or 71.05.230. If the court orders detention for inpatient
3 treatment and the outpatient order was based on a petition under RCW
4 71.05.290 or 71.05.320, the number of days remaining on the
5 outpatient order must be converted to days of inpatient treatment
6 authorized in the original court order. A court may not issue an
7 order to detain a person for inpatient treatment in a secure
8 withdrawal management and stabilization facility or approved
9 substance use disorder treatment program under this subsection unless
10 there is a secure withdrawal management and stabilization facility or
11 approved substance use disorder treatment program available and with
12 adequate space for the person.

13 ~~((5))~~ (6) In determining whether or not to take action under
14 this section the designated crisis responder, agency, or facility
15 must consider the factors specified under RCW 71.05.212 and the court
16 must consider the factors specified under RCW 71.05.245 as they apply
17 to the question of whether to enforce, modify, or revoke a court
18 order for involuntary treatment.

19 ~~((6))~~ (7)(a) If the current commitment is solely based on the
20 person being in need of assisted outpatient behavioral health
21 treatment as defined in RCW 71.05.020, a designated crisis responder
22 may initiate inpatient detention procedures under RCW 71.05.150 or
23 71.05.153 when appropriate. A designated crisis responder or the
24 secretary may, upon their own motion or notification by the facility
25 or agency designated to provide outpatient care to a person subject
26 to a less restrictive alternative treatment order under RCW 71.05.320
27 subsequent to an order for assisted outpatient behavioral health
28 treatment entered under RCW 71.05.148, order the person to be
29 apprehended and taken into custody and temporary detention for
30 inpatient evaluation in an evaluation and treatment facility, secure
31 withdrawal management and stabilization facility, or in an approved
32 substance use disorder treatment program, in or near the county in
33 which he or she is receiving outpatient treatment. Proceedings under
34 this subsection may be initiated without ordering the apprehension
35 and detention of the person.

36 (b) A person detained under this subsection may be held for
37 evaluation for up to one hundred twenty hours, excluding weekends and
38 holidays, pending a court hearing. If the person is not detained, the
39 hearing must be scheduled within one hundred twenty hours of service
40 on the person. The designated crisis responder or the secretary may

1 modify or rescind the order at any time prior to commencement of the
2 court hearing.

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

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

19 **Sec. 14.** RCW 71.05.590 and 2020 c 302 s 56 are each amended to
20 read as follows:

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

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

29 (b) Substantial deterioration in the person's functioning has
30 occurred;

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

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

35 (2) Actions taken under this section must include a flexible
36 range of responses of varying levels of intensity appropriate to the
37 circumstances and consistent with the interests of the individual and
38 the public in personal autonomy, safety, recovery, and compliance.

1 Available actions may include, but are not limited to, any of the
2 following:

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

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

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

21 (d) To cause the person to be transported by a peace officer,
22 designated crisis responder, or other means to the agency or facility
23 monitoring or providing services under the court order, or to a
24 triage facility, crisis stabilization unit, emergency department,
25 evaluation and treatment facility, secure withdrawal management and
26 stabilization facility, or an approved substance use disorder
27 treatment program. The person may be detained at the facility for up
28 to twelve hours for the purpose of an evaluation to determine whether
29 modification, revocation, or commitment proceedings are necessary and
30 appropriate to stabilize the person and prevent decompensation,
31 deterioration, or physical harm. Temporary detention for evaluation
32 under this subsection is intended to occur only following a pattern
33 of noncompliance or the failure of reasonable attempts at outreach
34 and engagement, and may occur only when in the clinical judgment of a
35 designated crisis responder or the professional person in charge of
36 an agency or facility designated to monitor less restrictive
37 alternative services temporary detention is appropriate. This
38 subsection does not limit the ability or obligation to pursue
39 revocation procedures under subsection ~~((4))~~ (5) of this section in
40 appropriate circumstances; and

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

6 (3) A court may supervise a person on an order for less
7 restrictive alternative treatment or a conditional release. While the
8 person is under the order, the court may:

9 (a) Require appearance in court for periodic reviews; and

10 (b) Modify the order after considering input from the agency or
11 facility designated to provide or facilitate services. The court may
12 not remand the person into inpatient treatment except as provided
13 under subsection (5) of this section, but may take actions under
14 subsection (2) (a) through (d) of this section.

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

21 ~~((4))~~ (5) (a) Except as provided in subsection ~~((6))~~ (7) of
22 this section, a designated crisis responder or the secretary of the
23 department of social and health services may upon their own motion or
24 notification by the facility or agency designated to provide
25 outpatient care order a person subject to a court order under this
26 chapter to be apprehended and taken into custody and temporary
27 detention in an evaluation and treatment facility, in a secure
28 withdrawal management and stabilization facility, or in an approved
29 substance use disorder treatment program, in or near the county in
30 which he or she is receiving outpatient treatment. Proceedings under
31 this subsection ~~((4))~~ (5) may be initiated without ordering the
32 apprehension and detention of the person.

33 (b) Except as provided in subsection ~~((6))~~ (7) of this section,
34 a person detained under this subsection ~~((4))~~ (5) must be held
35 until such time, not exceeding five days, as a hearing can be
36 scheduled to determine whether or not the person should be returned
37 to the hospital or facility from which he or she had been released.
38 If the person is not detained, the hearing must be scheduled within
39 five days of service on the person. The designated crisis responder
40 or the secretary of the department of social and health services may

1 modify or rescind the order at any time prior to commencement of the
2 court hearing.

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

17 (d) Except as provided in subsection (~~((6))~~) (7) of this section,
18 the issues for the court to determine are whether: (i) The person
19 adhered to the terms and conditions of the court order; (ii)
20 substantial deterioration in the person's functioning has occurred;
21 (iii) there is evidence of substantial decompensation with a
22 reasonable probability that the decompensation can be reversed by
23 further inpatient treatment; or (iv) there is a likelihood of serious
24 harm; and, if any of the above conditions apply, whether the court
25 should reinstate or modify the person's less restrictive alternative
26 or conditional release (~~(order)~~) or order the person's detention for
27 inpatient treatment. The person may waive the court hearing and allow
28 the court to enter a stipulated order upon the agreement of all
29 parties. If the court orders detention for inpatient treatment, the
30 treatment period must be for fourteen days from the revocation
31 hearing if the outpatient order was based on a petition under RCW
32 71.05.160 or 71.05.230. If the court orders detention for inpatient
33 treatment and the outpatient order was based on a petition under RCW
34 71.05.290 or 71.05.320, the number of days remaining on the
35 outpatient order must be converted to days of inpatient treatment
36 authorized in the original court order.

37 (~~((5))~~) (6) In determining whether or not to take action under
38 this section the designated crisis responder, agency, or facility
39 must consider the factors specified under RCW 71.05.212 and the court
40 must consider the factors specified under RCW 71.05.245 as they apply

1 to the question of whether to enforce, modify, or revoke a court
2 order for involuntary treatment.

3 ~~((+6))~~ (7)(a) If the current commitment is solely based on the
4 person being in need of assisted outpatient behavioral health
5 treatment as defined in RCW 71.05.020, a designated crisis responder
6 may initiate inpatient detention procedures under RCW 71.05.150 or
7 71.05.153 when appropriate. A designated crisis responder or the
8 secretary may, upon their own motion or notification by the facility
9 or agency designated to provide outpatient care to a person subject
10 to a less restrictive alternative treatment order under RCW 71.05.320
11 subsequent to an order for assisted outpatient behavioral health
12 treatment entered under RCW 71.05.148, order the person to be
13 apprehended and taken into custody and temporary detention for
14 inpatient evaluation in an evaluation and treatment facility, in a
15 secure withdrawal management and stabilization facility, or in an
16 approved substance use disorder treatment program, in or near the
17 county in which he or she is receiving outpatient treatment.
18 Proceedings under this subsection may be initiated without ordering
19 the apprehension and detention of the person.

20 (b) A person detained under this subsection may be held for
21 evaluation for up to one hundred twenty hours, excluding weekends and
22 holidays, pending a court hearing. The designated crisis responder or
23 the secretary may modify or rescind the order at any time prior to
24 commencement of the court hearing.

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

35 **Sec. 15.** RCW 71.34.755 and 2020 c 302 s 96 are each amended to
36 read as follows:

37 (1) Less restrictive alternative treatment, at a minimum, must
38 include the following services:

39 (a) Assignment of a care coordinator;

1 (b) An intake evaluation with the provider of the less
2 restrictive alternative treatment;

3 (c) A psychiatric evaluation, a substance use disorder
4 evaluation, or both;

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

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

10 (f) An individual crisis plan; and

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

14 (2) Less restrictive alternative treatment may include the
15 following additional services:

16 (a) Medication management;

17 (b) Psychotherapy;

18 (c) Nursing;

19 (d) Substance (~~abuse~~) use disorder counseling;

20 (e) Residential treatment; (~~and~~)

21 (f) Support for housing, benefits, education, and employment; and
22 (g) Periodic court review.

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

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

38 (5) The care coordinator assigned to a minor ordered to less
39 restrictive alternative treatment must submit an individualized plan
40 for the minor's treatment services to the court that entered the

1 order. An initial plan must be submitted as soon as possible
2 following the intake evaluation and a revised plan must be submitted
3 upon any subsequent modification in which a type of service is
4 removed from or added to the treatment plan.

5 (6) A care coordinator may disclose information and records
6 related to mental health services pursuant to RCW 70.02.230(2)(k) for
7 purposes of implementing less restrictive alternative treatment.

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

16 **Sec. 16.** RCW 70.02.230 and 2020 c 256 s 402 are each amended to
17 read as follows:

18 (1) (~~Except as provided in this section, RCW 70.02.050,~~
19 ~~71.05.445, 74.09.295, 70.02.210, 70.02.240, 70.02.250, 70.02.260, and~~
20 ~~70.02.265, or pursuant to a valid authorization under RCW 70.02.030,~~
21 ~~the~~) The fact of admission to a provider for mental health services
22 and all information and records compiled, obtained, or maintained in
23 the course of providing mental health services to either voluntary or
24 involuntary recipients of services at public or private agencies
25 ((must be confidential)) may not be disclosed except as provided in
26 this section, RCW 70.02.050, 71.05.445, 74.09.295, 70.02.210,
27 70.02.240, 70.02.250, 70.02.260, and 70.02.265, or under a valid
28 authorization under RCW 70.02.030.

29 (2) Information and records related to mental health services,
30 other than those obtained through treatment under chapter 71.34 RCW,
31 may be disclosed (~~only~~):

32 (a) In communications between qualified professional persons to
33 meet the requirements of chapter 71.05 RCW, including Indian health
34 care providers, in the provision of services or appropriate
35 referrals, or in the course of guardianship proceedings if provided
36 to a professional person:

- 37 (i) Employed by the facility;
38 (ii) Who has medical responsibility for the patient's care;
39 (iii) Who is a designated crisis responder;

1 (iv) Who is providing services under chapter 71.24 RCW;

2 (v) Who is employed by a state or local correctional facility
3 where the person is confined or supervised; or

4 (vi) Who is providing evaluation, treatment, or follow-up
5 services under chapter 10.77 RCW;

6 (b) When the communications regard the special needs of a patient
7 and the necessary circumstances giving rise to such needs and the
8 disclosure is made by a facility providing services to the operator
9 of a facility in which the patient resides or will reside;

10 (c)(i) When the person receiving services, or his or her
11 guardian, designates persons to whom information or records may be
12 released, or if the person is a minor, when his or her parents make
13 such a designation;

14 (ii) A public or private agency shall release to a person's next
15 of kin, attorney, personal representative, guardian, or conservator,
16 if any:

17 (A) The information that the person is presently a patient in the
18 facility or that the person is seriously physically ill;

19 (B) A statement evaluating the mental and physical condition of
20 the patient, and a statement of the probable duration of the
21 patient's confinement, if such information is requested by the next
22 of kin, attorney, personal representative, guardian, or conservator;
23 and

24 (iii) Other information requested by the next of kin or attorney
25 as may be necessary to decide whether or not proceedings should be
26 instituted to appoint a guardian or conservator;

27 (d)(i) To the courts, including tribal courts, as necessary to
28 the administration of chapter 71.05 RCW or to a court ordering an
29 evaluation or treatment under chapter 10.77 RCW solely for the
30 purpose of preventing the entry of any evaluation or treatment order
31 that is inconsistent with any order entered under chapter 71.05 RCW.

32 (ii) To a court or its designee in which a motion under chapter
33 10.77 RCW has been made for involuntary medication of a defendant for
34 the purpose of competency restoration.

35 (iii) Disclosure under this subsection is mandatory for the
36 purpose of the federal health insurance portability and
37 accountability act;

38 (e)(i) When a mental health professional or designated crisis
39 responder is requested by a representative of a law enforcement or
40 corrections agency, including a police officer, sheriff, community

1 corrections officer, a municipal attorney, or prosecuting attorney to
2 undertake an investigation or provide treatment under RCW 71.05.150,
3 10.31.110, or 71.05.153, the mental health professional or designated
4 crisis responder shall, if requested to do so, advise the
5 representative in writing of the results of the investigation
6 including a statement of reasons for the decision to detain or
7 release the person investigated. The written report must be submitted
8 within seventy-two hours of the completion of the investigation or
9 the request from the law enforcement or corrections representative,
10 whichever occurs later.

11 (ii) Disclosure under this subsection is mandatory for the
12 purposes of the federal health insurance portability and
13 accountability act;

14 (f) To the attorney of the detained person;

15 (g) To the prosecuting attorney as necessary to carry out the
16 responsibilities of the office under RCW 71.05.330(2),
17 71.05.340(1)(b), and 71.05.335. The prosecutor must be provided
18 access to records regarding the committed person's treatment and
19 prognosis, medication, behavior problems, and other records relevant
20 to the issue of whether treatment less restrictive than inpatient
21 treatment is in the best interest of the committed person or others.
22 Information must be disclosed only after giving notice to the
23 committed person and the person's counsel;

24 (h)(i) To appropriate law enforcement agencies and to a person,
25 when the identity of the person is known to the public or private
26 agency, whose health and safety has been threatened, or who is known
27 to have been repeatedly harassed, by the patient. The person may
28 designate a representative to receive the disclosure. The disclosure
29 must be made by the professional person in charge of the public or
30 private agency or his or her designee and must include the dates of
31 commitment, admission, discharge, or release, authorized or
32 unauthorized absence from the agency's facility, and only any other
33 information that is pertinent to the threat or harassment. The agency
34 or its employees are not civilly liable for the decision to disclose
35 or not, so long as the decision was reached in good faith and without
36 gross negligence.

37 (ii) Disclosure under this subsection is mandatory for the
38 purposes of the federal health insurance portability and
39 accountability act;

1 (i)(i) To appropriate corrections and law enforcement agencies
2 all necessary and relevant information in the event of a crisis or
3 emergent situation that poses a significant and imminent risk to the
4 public. The mental health service agency or its employees are not
5 civilly liable for the decision to disclose or not so long as the
6 decision was reached in good faith and without gross negligence.

7 (ii) Disclosure under this subsection is mandatory for the
8 purposes of the health insurance portability and accountability act;

9 (j) To the persons designated in RCW 71.05.425 for the purposes
10 described in those sections;

11 (k) By a care coordinator under RCW 71.05.585 assigned to a
12 person ordered to receive less restrictive alternative treatment for
13 the purpose of sharing information to parties necessary for the
14 implementation of proceedings under chapter 71.05 RCW;

15 (l) Upon the death of a person. The person's next of kin,
16 personal representative, guardian, or conservator, if any, must be
17 notified. Next of kin who are of legal age and competent must be
18 notified under this section in the following order: Spouse, parents,
19 children, brothers and sisters, and other relatives according to the
20 degree of relation. Access to all records and information compiled,
21 obtained, or maintained in the course of providing services to a
22 deceased patient are governed by RCW 70.02.140;

23 (~~(l)~~) (m) To mark headstones or otherwise memorialize patients
24 interred at state hospital cemeteries. The department of social and
25 health services shall make available the name, date of birth, and
26 date of death of patients buried in state hospital cemeteries fifty
27 years after the death of a patient;

28 (~~(m)~~) (n) To law enforcement officers and to prosecuting
29 attorneys as are necessary to enforce RCW 9.41.040(2)(a)(iv). The
30 extent of information that may be released is limited as follows:

31 (i) Only the fact, place, and date of involuntary commitment, an
32 official copy of any order or orders of commitment, and an official
33 copy of any written or oral notice of ineligibility to possess a
34 firearm that was provided to the person pursuant to RCW 9.41.047(1),
35 must be disclosed upon request;

36 (ii) The law enforcement and prosecuting attorneys may only
37 release the information obtained to the person's attorney as required
38 by court rule and to a jury or judge, if a jury is waived, that
39 presides over any trial at which the person is charged with violating
40 RCW 9.41.040(2)(a)(iv);

1 (iii) Disclosure under this subsection is mandatory for the
2 purposes of the federal health insurance portability and
3 accountability act;

4 ~~((n))~~ (o) When a patient would otherwise be subject to the
5 provisions of this section and disclosure is necessary for the
6 protection of the patient or others due to his or her unauthorized
7 disappearance from the facility, and his or her whereabouts is
8 unknown, notice of the disappearance, along with relevant
9 information, may be made to relatives, the department of corrections
10 when the person is under the supervision of the department, and
11 governmental law enforcement agencies designated by the physician or
12 psychiatric advanced registered nurse practitioner in charge of the
13 patient or the professional person in charge of the facility, or his
14 or her professional designee;

15 ~~((o))~~ (p) Pursuant to lawful order of a court, including a
16 tribal court;

17 ~~((p))~~ (q) To qualified staff members of the department, to the
18 authority, to behavioral health administrative services
19 organizations, to managed care organizations, to resource management
20 services responsible for serving a patient, or to service providers
21 designated by resource management services as necessary to determine
22 the progress and adequacy of treatment and to determine whether the
23 person should be transferred to a less restrictive or more
24 appropriate treatment modality or facility;

25 ~~((q))~~ (r) Within the mental health service agency or Indian
26 health care provider facility where the patient is receiving
27 treatment, confidential information may be disclosed to persons
28 employed, serving in bona fide training programs, or participating in
29 supervised volunteer programs, at the facility when it is necessary
30 to perform their duties;

31 ~~((r))~~ (s) Within the department and the authority as necessary
32 to coordinate treatment for mental illness, developmental
33 disabilities, ~~((alcoholism,))~~ or substance use disorder of persons
34 who are under the supervision of the department;

35 ~~((s))~~ (t) Between the department of social and health services,
36 the department of children, youth, and families, and the health care
37 authority as necessary to coordinate treatment for mental illness,
38 developmental disabilities, ~~((alcoholism, or drug abuse))~~ or
39 substance use disorder of persons who are under the supervision of

1 the department of social and health services or the department of
2 children, youth, and families;

3 ~~((t))~~ (u) To a licensed physician or psychiatric advanced
4 registered nurse practitioner who has determined that the life or
5 health of the person is in danger and that treatment without the
6 information and records related to mental health services could be
7 injurious to the patient's health. Disclosure must be limited to the
8 portions of the records necessary to meet the medical emergency;

9 ~~((u))~~ (v)(i) Consistent with the requirements of the federal
10 health insurance portability and accountability act, to:

11 (A) A health care provider, including an Indian health care
12 provider, who is providing care to a patient, or to whom a patient
13 has been referred for evaluation or treatment; or

14 (B) Any other person who is working in a care coordinator role
15 for a health care facility, health care provider, or Indian health
16 care provider, or is under an agreement pursuant to the federal
17 health insurance portability and accountability act with a health
18 care facility or a health care provider and requires the information
19 and records to assure coordinated care and treatment of that patient.

20 (ii) A person authorized to use or disclose information and
21 records related to mental health services under this subsection (2)
22 ~~((u))~~ (v) must take appropriate steps to protect the information
23 and records relating to mental health services.

24 (iii) Psychotherapy notes may not be released without
25 authorization of the patient who is the subject of the request for
26 release of information;

27 ~~((v))~~ (w) To administrative and office support staff designated
28 to obtain medical records for those licensed professionals listed in
29 ~~((u))~~ (v) of this subsection;

30 ~~((w))~~ (x) To a facility that is to receive a person who is
31 involuntarily committed under chapter 71.05 RCW, or upon transfer of
32 the person from one evaluation and treatment facility to another. The
33 release of records under this subsection is limited to the
34 information and records related to mental health services required by
35 law, a record or summary of all somatic treatments, and a discharge
36 summary. The discharge summary may include a statement of the
37 patient's problem, the treatment goals, the type of treatment which
38 has been provided, and recommendation for future treatment, but may
39 not include the patient's complete treatment record;

1 (~~(x)~~) (y) To the person's counsel or guardian ad litem, without
2 modification, at any time in order to prepare for involuntary
3 commitment or recommitment proceedings, reexaminations, appeals, or
4 other actions relating to detention, admission, commitment, or
5 patient's rights under chapter 71.05 RCW;

6 (~~(y)~~) (z) To staff members of the protection and advocacy
7 agency or to staff members of a private, nonprofit corporation for
8 the purpose of protecting and advocating the rights of persons with
9 mental disorders or developmental disabilities. Resource management
10 services may limit the release of information to the name, birthdate,
11 and county of residence of the patient, information regarding whether
12 the patient was voluntarily admitted, or involuntarily committed, the
13 date and place of admission, placement, or commitment, the name and
14 address of a guardian of the patient, and the date and place of the
15 guardian's appointment. Any staff member who wishes to obtain
16 additional information must notify the patient's resource management
17 services in writing of the request and of the resource management
18 services' right to object. The staff member shall send the notice by
19 mail to the guardian's address. If the guardian does not object in
20 writing within fifteen days after the notice is mailed, the staff
21 member may obtain the additional information. If the guardian objects
22 in writing within fifteen days after the notice is mailed, the staff
23 member may not obtain the additional information;

24 (~~(z)~~) (aa) To all current treating providers, including Indian
25 health care providers, of the patient with prescriptive authority who
26 have written a prescription for the patient within the last twelve
27 months. For purposes of coordinating health care, the department or
28 the authority may release without written authorization of the
29 patient, information acquired for billing and collection purposes as
30 described in RCW 70.02.050(1)(d). The department, or the authority,
31 if applicable, shall notify the patient that billing and collection
32 information has been released to named providers, and provide the
33 substance of the information released and the dates of such release.
34 Neither the department nor the authority may release counseling,
35 inpatient psychiatric hospitalization, or drug and alcohol treatment
36 information without a signed written release from the client;

37 (~~(aa)~~) (bb) (i) To the secretary of social and health services
38 and the director of the health care authority for either program
39 evaluation or research, or both so long as the secretary or director,
40 where applicable, adopts rules for the conduct of the evaluation or

1 research, or both. Such rules must include, but need not be limited
2 to, the requirement that all evaluators and researchers sign an oath
3 of confidentiality substantially as follows:

4 "As a condition of conducting evaluation or research concerning
5 persons who have received services from (fill in the facility,
6 agency, or person) I,, agree not to divulge, publish, or
7 otherwise make known to unauthorized persons or the public any
8 information obtained in the course of such evaluation or research
9 regarding persons who have received services such that the person who
10 received such services is identifiable.

11 I recognize that unauthorized release of confidential information
12 may subject me to civil liability under the provisions of state law.

13 /s/"

14 (ii) Nothing in this chapter may be construed to prohibit the
15 compilation and publication of statistical data for use by government
16 or researchers under standards, including standards to assure
17 maintenance of confidentiality, set forth by the secretary, or
18 director, where applicable;

19 ~~((bb))~~ (cc) To any person if the conditions in RCW 70.02.205
20 are met;

21 ~~((ee))~~ (dd) To the secretary of health for the purposes of the
22 maternal mortality review panel established in RCW 70.54.450; or

23 ~~((dd))~~ (ee) To a tribe or Indian health care provider to carry
24 out the requirements of RCW 71.05.150(7).

25 (3) Whenever federal law or federal regulations restrict the
26 release of information contained in the information and records
27 related to mental health services of any patient who receives
28 treatment for a substance use disorder, the department or the
29 authority may restrict the release of the information as necessary to
30 comply with federal law and regulations.

31 (4) Civil liability and immunity for the release of information
32 about a particular person who is committed to the department of
33 social and health services or the authority under RCW 71.05.280(3)
34 and 71.05.320(4)(c) after dismissal of a sex offense as defined in
35 RCW 9.94A.030, is governed by RCW 4.24.550.

36 (5) The fact of admission to a provider of mental health
37 services, as well as all records, files, evidence, findings, or
38 orders made, prepared, collected, or maintained pursuant to chapter
39 71.05 RCW are not admissible as evidence in any legal proceeding

1 outside that chapter without the written authorization of the person
2 who was the subject of the proceeding except as provided in RCW
3 70.02.260, in a subsequent criminal prosecution of a person committed
4 pursuant to RCW 71.05.280(3) or 71.05.320(4)(c) on charges that were
5 dismissed pursuant to chapter 10.77 RCW due to incompetency to stand
6 trial, in a civil commitment proceeding pursuant to chapter 71.09
7 RCW, or, in the case of a minor, a guardianship or dependency
8 proceeding. The records and files maintained in any court proceeding
9 pursuant to chapter 71.05 RCW must be confidential and available
10 subsequent to such proceedings only to the person who was the subject
11 of the proceeding or his or her attorney. In addition, the court may
12 order the subsequent release or use of such records or files only
13 upon good cause shown if the court finds that appropriate safeguards
14 for strict confidentiality are and will be maintained.

15 (6)(a) Except as provided in RCW 4.24.550, any person may bring
16 an action against an individual who has willfully released
17 confidential information or records concerning him or her in
18 violation of the provisions of this section, for the greater of the
19 following amounts:

20 (i) One thousand dollars; or

21 (ii) Three times the amount of actual damages sustained, if any.

22 (b) It is not a prerequisite to recovery under this subsection
23 that the plaintiff suffered or was threatened with special, as
24 contrasted with general, damages.

25 (c) Any person may bring an action to enjoin the release of
26 confidential information or records concerning him or her or his or
27 her ward, in violation of the provisions of this section, and may in
28 the same action seek damages as provided in this subsection.

29 (d) The court may award to the plaintiff, should he or she
30 prevail in any action authorized by this subsection, reasonable
31 attorney fees in addition to those otherwise provided by law.

32 (e) If an action is brought under this subsection, no action may
33 be brought under RCW 70.02.170.

34 **Sec. 17.** RCW 70.02.240 and 2019 c 381 s 20 are each amended to
35 read as follows:

36 The fact of admission and all information and records related to
37 mental health services obtained through inpatient or outpatient
38 treatment of a minor under chapter 71.34 RCW must be kept
39 confidential, except as authorized by this section or under RCW

1 70.02.050, 70.02.210, 70.02.230, 70.02.250, 70.02.260, and 70.02.265.

2 Confidential information under this section may be disclosed only:

3 (1) In communications between mental health professionals to meet
4 the requirements of chapter 71.34 RCW, in the provision of services
5 to the minor, or in making appropriate referrals;

6 (2) In the course of guardianship or dependency proceedings;

7 (3) To the minor, the minor's parent, including those acting as a
8 parent as defined in RCW 71.34.020 for purposes of family-initiated
9 treatment, and the minor's attorney, subject to RCW 13.50.100;

10 (4) To the courts as necessary to administer chapter 71.34 RCW;

11 (5) By a care coordinator under RCW 71.34.755 assigned to a
12 person ordered to receive less restrictive alternative treatment for
13 the purpose of sharing information to parties necessary for the
14 implementation of proceedings under chapter 71.34 RCW;

15 (6) To law enforcement officers or public health officers as
16 necessary to carry out the responsibilities of their office. However,
17 only the fact and date of admission, and the date of discharge, the
18 name and address of the treatment provider, if any, and the last
19 known address must be disclosed upon request;

20 ((+6)) (7) To law enforcement officers, public health officers,
21 relatives, and other governmental law enforcement agencies, if a
22 minor has escaped from custody, disappeared from an evaluation and
23 treatment facility, violated conditions of a less restrictive
24 treatment order, or failed to return from an authorized leave, and
25 then only such information as may be necessary to provide for public
26 safety or to assist in the apprehension of the minor. The officers
27 are obligated to keep the information confidential in accordance with
28 this chapter;

29 ((+7)) (8) To the secretary of social and health services and
30 the director of the health care authority for assistance in data
31 collection and program evaluation or research so long as the
32 secretary or director, where applicable, adopts rules for the conduct
33 of such evaluation and research. The rules must include, but need not
34 be limited to, the requirement that all evaluators and researchers
35 sign an oath of confidentiality substantially as follows:

36 "As a condition of conducting evaluation or research concerning
37 persons who have received services from (fill in the facility,
38 agency, or person) I,, agree not to divulge, publish, or
39 otherwise make known to unauthorized persons or the public any

1 information obtained in the course of such evaluation or research
2 regarding minors who have received services in a manner such that the
3 minor is identifiable.

4 I recognize that unauthorized release of confidential information
5 may subject me to civil liability under state law.

6 /s/";

7 ~~((8))~~ (9) To appropriate law enforcement agencies, upon
8 request, all necessary and relevant information in the event of a
9 crisis or emergent situation that poses a significant and imminent
10 risk to the public. The mental health service agency or its employees
11 are not civilly liable for the decision to disclose or not, so long
12 as the decision was reached in good faith and without gross
13 negligence;

14 ~~((9))~~ (10) To appropriate law enforcement agencies and to a
15 person, when the identity of the person is known to the public or
16 private agency, whose health and safety has been threatened, or who
17 is known to have been repeatedly harassed, by the patient. The person
18 may designate a representative to receive the disclosure. The
19 disclosure must be made by the professional person in charge of the
20 public or private agency or his or her designee and must include the
21 dates of admission, discharge, authorized or unauthorized absence
22 from the agency's facility, and only any other information that is
23 pertinent to the threat or harassment. The agency or its employees
24 are not civilly liable for the decision to disclose or not, so long
25 as the decision was reached in good faith and without gross
26 negligence;

27 ~~((10))~~ (11) To a minor's next of kin, attorney, guardian, or
28 conservator, if any, the information that the minor is presently in
29 the facility or that the minor is seriously physically ill and a
30 statement evaluating the mental and physical condition of the minor
31 as well as a statement of the probable duration of the minor's
32 confinement;

33 ~~((11))~~ (12) Upon the death of a minor, to the minor's next of
34 kin;

35 ~~((12))~~ (13) To a facility in which the minor resides or will
36 reside;

37 ~~((13))~~ (14) To law enforcement officers and to prosecuting
38 attorneys as are necessary to enforce RCW 9.41.040(2)(a)(iv). The
39 extent of information that may be released is limited as follows:

1 (a) Only the fact, place, and date of involuntary commitment, an
2 official copy of any order or orders of commitment, and an official
3 copy of any written or oral notice of ineligibility to possess a
4 firearm that was provided to the person pursuant to RCW 9.41.047(1),
5 must be disclosed upon request;

6 (b) The law enforcement and prosecuting attorneys may only
7 release the information obtained to the person's attorney as required
8 by court rule and to a jury or judge, if a jury is waived, that
9 presides over any trial at which the person is charged with violating
10 RCW 9.41.040(2)(a)(iv);

11 (c) Disclosure under this subsection is mandatory for the
12 purposes of the federal health insurance portability and
13 accountability act;

14 ~~((14))~~ (15) This section may not be construed to prohibit the
15 compilation and publication of statistical data for use by government
16 or researchers under standards, including standards to assure
17 maintenance of confidentiality, set forth by the director of the
18 health care authority or the secretary of the department of social
19 and health services, where applicable. The fact of admission and all
20 information obtained pursuant to chapter 71.34 RCW are not admissible
21 as evidence in any legal proceeding outside chapter 71.34 RCW, except
22 guardianship or dependency, without the written consent of the minor
23 or the minor's parent;

24 ~~((15))~~ (16) For the purpose of a correctional facility
25 participating in the postinstitutional medical assistance system
26 supporting the expedited medical determinations and medical
27 suspensions as provided in RCW 74.09.555 and 74.09.295;

28 ~~((16))~~ (17) Pursuant to a lawful order of a court.

29 **Sec. 18.** RCW 71.05.425 and 2018 c 201 s 3019 are each amended to
30 read as follows:

31 (1)(a) Except as provided in subsection (2) of this section, at
32 the earliest possible date, and in no event later than thirty days
33 before conditional release, final release, authorized leave under RCW
34 71.05.325(2), or transfer to a facility other than a state mental
35 hospital, the superintendent shall send written notice of conditional
36 release, release, authorized leave, or transfer of a person committed
37 under RCW 71.05.280(3) or 71.05.320(4)(c) following dismissal of a
38 sex, violent, or felony harassment offense pursuant to RCW
39 10.77.086(4) to the following:

1 (i) The chief of police of the city, if any, in which the person
2 will reside;

3 (ii) The sheriff of the county in which the person will reside;
4 and

5 (iii) The prosecuting attorney of the county in which the
6 criminal charges against the committed person were dismissed.

7 (b) The same notice as required by (a) of this subsection shall
8 be sent to the following, if such notice has been requested in
9 writing about a specific person committed under RCW 71.05.280(3) or
10 71.05.320(4)(c) following dismissal of a sex, violent, or felony
11 harassment offense pursuant to RCW 10.77.086(4):

12 (i) The victim of the sex, violent, or felony harassment offense
13 that was dismissed pursuant to RCW 10.77.086(4) preceding commitment
14 under RCW 71.05.280(3) or 71.05.320(4)(c) or the victim's next of kin
15 if the crime was a homicide;

16 (ii) Any witnesses who testified against the person in any court
17 proceedings;

18 (iii) Any person specified in writing by the prosecuting
19 attorney. Information regarding victims, next of kin, or witnesses
20 requesting the notice, information regarding any other person
21 specified in writing by the prosecuting attorney to receive the
22 notice, and the notice are confidential and shall not be available to
23 the person committed under this chapter; and

24 (iv) The chief of police of the city, if any, and the sheriff of
25 the county, if any, which had jurisdiction of the person on the date
26 of the applicable offense.

27 (c) The thirty-day notice requirements contained in this
28 subsection shall not apply to emergency medical transfers.

29 (d) The existence of the notice requirements in this subsection
30 will not require any extension of the release date in the event the
31 release plan changes after notification.

32 (2) If a person committed under RCW 71.05.280(3) or
33 71.05.320(4)(c) following dismissal of a sex, violent, or felony
34 harassment offense pursuant to RCW 10.77.086(4) escapes, the
35 superintendent shall immediately notify, by the most reasonable and
36 expedient means available, the chief of police of the city and the
37 sheriff of the county in which the person escaped and in which the
38 person resided immediately before the person's arrest and the
39 prosecuting attorney of the county in which the criminal charges
40 against the committed person were dismissed. If previously requested,

1 the superintendent shall also notify the witnesses and the victim of
2 the sex, violent, or felony harassment offense that was dismissed
3 pursuant to RCW 10.77.086(4) preceding commitment under RCW
4 71.05.280(3) or 71.05.320(4) or the victim's next of kin if the crime
5 was a homicide. In addition, the secretary shall also notify
6 appropriate parties pursuant to RCW 70.02.230(2)((-n+)) (o). If the
7 person is recaptured, the superintendent shall send notice to the
8 persons designated in this subsection as soon as possible but in no
9 event later than two working days after the department of social and
10 health services learns of such recapture.

11 (3) If the victim, the victim's next of kin, or any witness is
12 under the age of sixteen, the notice required by this section shall
13 be sent to the parent or legal guardian of the child.

14 (4) The superintendent shall send the notices required by this
15 chapter to the last address provided to the department of social and
16 health services by the requesting party. The requesting party shall
17 furnish the department of social and health services with a current
18 address.

19 (5) For purposes of this section the following terms have the
20 following meanings:

21 (a) "Violent offense" means a violent offense under RCW
22 9.94A.030;

23 (b) "Sex offense" means a sex offense under RCW 9.94A.030;

24 (c) "Next of kin" means a person's spouse, state registered
25 domestic partner, parents, siblings, and children;

26 (d) "Felony harassment offense" means a crime of harassment as
27 defined in RCW 9A.46.060 that is a felony.

28 **Sec. 19.** RCW 71.05.020 and 2020 c 302 s 3, 2020 c 256 s 301, and
29 2020 c 5 s 1 are each reenacted and amended to read as follows:

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

32 (1) "Admission" or "admit" means a decision by a physician,
33 physician assistant, or psychiatric advanced registered nurse
34 practitioner that a person should be examined or treated as a patient
35 in a hospital;

36 (2) "Alcoholism" means a disease, characterized by a dependency
37 on alcoholic beverages, loss of control over the amount and
38 circumstances of use, symptoms of tolerance, physiological or
39 psychological withdrawal, or both, if use is reduced or discontinued,

1 and impairment of health or disruption of social or economic
2 functioning;

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

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

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

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

15 (7) "Behavioral health disorder" means either a mental disorder
16 as defined in this section, a substance use disorder as defined in
17 this section, or a co-occurring mental disorder and substance use
18 disorder;

19 (8) "Behavioral health service provider" means a public or
20 private agency that provides mental health, substance use disorder,
21 or co-occurring disorder services to persons with behavioral health
22 disorders as defined under this section and receives funding from
23 public sources. This includes, but is not limited to(~~(τ-hospitals)~~);
24 Hospitals licensed under chapter 70.41 RCW(~~(τ)~~); evaluation and
25 treatment facilities as defined in this section(~~(τ)~~); community
26 mental health service delivery systems or community behavioral health
27 programs as defined in RCW 71.24.025(~~(τ)~~); licensed or certified
28 behavioral health agencies under RCW 71.24.037; facilities conducting
29 competency evaluations and restoration under chapter 10.77 RCW(~~(τ)~~);
30 approved substance use disorder treatment programs as defined in this
31 section(~~(τ)~~); secure withdrawal management and stabilization
32 facilities as defined in this section(~~(τ)~~); and correctional
33 facilities operated by state and local governments;

34 (9) "Co-occurring disorder specialist" means an individual
35 possessing an enhancement granted by the department of health under
36 chapter 18.205 RCW that certifies the individual to provide substance
37 use disorder counseling subject to the practice limitations under RCW
38 18.205.105;

1 (10) "Commitment" means the determination by a court that a
2 person should be detained for a period of either evaluation or
3 treatment, or both, in an inpatient or a less restrictive setting;

4 (11) "Conditional release" means a revocable modification of a
5 commitment, which may be revoked upon violation of any of its terms;

6 (12) "Crisis stabilization unit" means a short-term facility or a
7 portion of a facility licensed or certified by the department, such
8 as an evaluation and treatment facility or a hospital, which has been
9 designed to assess, diagnose, and treat individuals experiencing an
10 acute crisis without the use of long-term hospitalization;

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

15 (14) "Department" means the department of health;

16 (15) "Designated crisis responder" means a mental health
17 professional appointed by the county, by an entity appointed by the
18 county, or by the authority in consultation with a federally
19 recognized Indian tribe or after meeting and conferring with an
20 Indian health care provider, to perform the duties specified in this
21 chapter;

22 (16) "Detention" or "detain" means the lawful confinement of a
23 person, under the provisions of this chapter;

24 (17) "Developmental disabilities professional" means a person who
25 has specialized training and three years of experience in directly
26 treating or working with persons with developmental disabilities and
27 is a psychiatrist, physician assistant working with a supervising
28 psychiatrist, psychologist, psychiatric advanced registered nurse
29 practitioner, or social worker, and such other developmental
30 disabilities professionals as may be defined by rules adopted by the
31 secretary of the department of social and health services;

32 (18) "Developmental disability" means that condition defined in
33 RCW 71A.10.020(5);

34 (19) "Director" means the director of the authority;

35 (20) "Discharge" means the termination of hospital medical
36 authority. The commitment may remain in place, be terminated, or be
37 amended by court order;

38 (21) "Drug addiction" means a disease, characterized by a
39 dependency on psychoactive chemicals, loss of control over the amount
40 and circumstances of use, symptoms of tolerance, physiological or

1 psychological withdrawal, or both, if use is reduced or discontinued,
2 and impairment of health or disruption of social or economic
3 functioning;

4 (22) "Evaluation and treatment facility" means any facility which
5 can provide directly, or by direct arrangement with other public or
6 private agencies, emergency evaluation and treatment, outpatient
7 care, and timely and appropriate inpatient care to persons suffering
8 from a mental disorder, and which is licensed or certified as such by
9 the department. The authority may certify single beds as temporary
10 evaluation and treatment beds under RCW 71.05.745. A physically
11 separate and separately operated portion of a state hospital may be
12 designated as an evaluation and treatment facility. A facility which
13 is part of, or operated by, the department of social and health
14 services or any federal agency will not require certification. No
15 correctional institution or facility, or jail, shall be an evaluation
16 and treatment facility within the meaning of this chapter;

17 (23) "Gravely disabled" means a condition in which a person, as a
18 result of a behavioral health disorder: (a) Is in danger of serious
19 physical harm resulting from a failure to provide for his or her
20 essential human needs of health or safety; or (b) manifests severe
21 deterioration in routine functioning evidenced by repeated and
22 escalating loss of cognitive or volitional control over his or her
23 actions and is not receiving such care as is essential for his or her
24 health or safety;

25 (24) "Habilitative services" means those services provided by
26 program personnel to assist persons in acquiring and maintaining life
27 skills and in raising their levels of physical, mental, social, and
28 vocational functioning. Habilitative services include education,
29 training for employment, and therapy. The habilitative process shall
30 be undertaken with recognition of the risk to the public safety
31 presented by the person being assisted as manifested by prior charged
32 criminal conduct;

33 (25) "Hearing" means any proceeding conducted in open court that
34 conforms to the requirements of RCW 71.05.820;

35 (26) "History of one or more violent acts" refers to the period
36 of time ten years prior to the filing of a petition under this
37 chapter, excluding any time spent, but not any violent acts
38 committed, in a behavioral health facility, or in confinement as a
39 result of a criminal conviction;

1 (27) "Imminent" means the state or condition of being likely to
2 occur at any moment or near at hand, rather than distant or remote;

3 (28) "In need of assisted outpatient behavioral health treatment"
4 means that a person, as a result of a behavioral health disorder: (a)
5 Has been committed by a court to detention for involuntary behavioral
6 health treatment during the preceding thirty-six months; (b) is
7 unlikely to voluntarily participate in outpatient treatment without
8 an order for less restrictive alternative treatment, based on a
9 history of nonadherence with treatment or in view of the person's
10 current behavior; (c) is likely to benefit from less restrictive
11 alternative treatment; and (d) requires less restrictive alternative
12 treatment to prevent a relapse, decompensation, or deterioration that
13 is likely to result in the person presenting a likelihood of serious
14 harm or the person becoming gravely disabled within a reasonably
15 short period of time;

16 (29) "Individualized service plan" means a plan prepared by a
17 developmental disabilities professional with other professionals as a
18 team, for a person with developmental disabilities, which shall
19 state:

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

22 (b) The conditions and strategies necessary to achieve the
23 purposes of habilitation;

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

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

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

29 (f) Where relevant in light of past criminal behavior and due
30 consideration for public safety, the criteria for proposed movement
31 to less-restrictive settings, criteria for proposed eventual
32 discharge or release, and a projected possible date for discharge or
33 release; and

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

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

39 (31) "Judicial commitment" means a commitment by a court pursuant
40 to the provisions of this chapter;

1 (32) "Legal counsel" means attorneys and staff employed by county
2 prosecutor offices or the state attorney general acting in their
3 capacity as legal representatives of public behavioral health service
4 providers under RCW 71.05.130;

5 (33) "Less restrictive alternative treatment" means a program of
6 individualized treatment in a less restrictive setting than inpatient
7 treatment that includes the services described in RCW 71.05.585. This
8 term includes: Treatment pursuant to a less restrictive alternative
9 treatment order under RCW 71.05.240 or 71.05.320; treatment pursuant
10 to a conditional release under RCW 71.05.340; and treatment pursuant
11 to an assisted outpatient behavioral health treatment order under RCW
12 71.05.148;

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

16 (35) "Likelihood of serious harm" means:

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

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

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

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

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

1 (39) "Peace officer" means a law enforcement official of a public
2 agency or governmental unit, and includes persons specifically given
3 peace officer powers by any state law, local ordinance, or judicial
4 order of appointment;

5 (40) "Physician assistant" means a person licensed as a physician
6 assistant under chapter 18.57A or 18.71A RCW;

7 (41) "Private agency" means any person, partnership, corporation,
8 or association that is not a public agency, whether or not financed
9 in whole or in part by public funds, which constitutes an evaluation
10 and treatment facility or private institution, or hospital, or
11 approved substance use disorder treatment program, which is conducted
12 for, or includes a department or ward conducted for, the care and
13 treatment of persons with behavioral health disorders;

14 (42) "Professional person" means a mental health professional,
15 substance use disorder professional, or designated crisis responder
16 and shall also mean a physician, physician assistant, psychiatric
17 advanced registered nurse practitioner, registered nurse, and such
18 others as may be defined by rules adopted by the secretary pursuant
19 to the provisions of this chapter;

20 (43) "Psychiatric advanced registered nurse practitioner" means a
21 person who is licensed as an advanced registered nurse practitioner
22 pursuant to chapter 18.79 RCW; and who is board certified in advanced
23 practice psychiatric and mental health nursing;

24 (44) "Psychiatrist" means a person having a license as a
25 physician and surgeon in this state who has in addition completed
26 three years of graduate training in psychiatry in a program approved
27 by the American medical association or the American osteopathic
28 association and is certified or eligible to be certified by the
29 American board of psychiatry and neurology;

30 (45) "Psychologist" means a person who has been licensed as a
31 psychologist pursuant to chapter 18.83 RCW;

32 (46) "Public agency" means any evaluation and treatment facility
33 or institution, secure withdrawal management and stabilization
34 facility, approved substance use disorder treatment program, or
35 hospital which is conducted for, or includes a department or ward
36 conducted for, the care and treatment of persons with behavioral
37 health disorders, if the agency is operated directly by federal,
38 state, county, or municipal government, or a combination of such
39 governments;

1 (47) "Release" means legal termination of the commitment under
2 the provisions of this chapter;

3 (48) "Resource management services" has the meaning given in
4 chapter 71.24 RCW;

5 (49) "Secretary" means the secretary of the department of health,
6 or his or her designee;

7 (50) "Secure withdrawal management and stabilization facility"
8 means a facility operated by either a public or private agency or by
9 the program of an agency which provides care to voluntary individuals
10 and individuals involuntarily detained and committed under this
11 chapter for whom there is a likelihood of serious harm or who are
12 gravely disabled due to the presence of a substance use disorder.
13 Secure withdrawal management and stabilization facilities must:

14 (a) Provide the following services:

15 (i) Assessment and treatment, provided by certified substance use
16 disorder professionals or co-occurring disorder specialists;

17 (ii) Clinical stabilization services;

18 (iii) Acute or subacute detoxification services for intoxicated
19 individuals; and

20 (iv) Discharge assistance provided by certified substance use
21 disorder professionals or co-occurring disorder specialists,
22 including facilitating transitions to appropriate voluntary or
23 involuntary inpatient services or to less restrictive alternatives as
24 appropriate for the individual;

25 (b) Include security measures sufficient to protect the patients,
26 staff, and community; and

27 (c) Be licensed or certified as such by the department of health;

28 (51) "Social worker" means a person with a master's or further
29 advanced degree from a social work educational program accredited and
30 approved as provided in RCW 18.320.010;

31 (52) "Substance use disorder" means a cluster of cognitive,
32 behavioral, and physiological symptoms indicating that an individual
33 continues using the substance despite significant substance-related
34 problems. The diagnosis of a substance use disorder is based on a
35 pathological pattern of behaviors related to the use of the
36 substances;

37 (53) "Substance use disorder professional" means a person
38 certified as a substance use disorder professional by the department
39 of health under chapter 18.205 RCW;

1 (54) "Therapeutic court personnel" means the staff of a mental
2 health court or other therapeutic court which has jurisdiction over
3 defendants who are dually diagnosed with mental disorders, including
4 court personnel, probation officers, a court monitor, prosecuting
5 attorney, or defense counsel acting within the scope of therapeutic
6 court duties;

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

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

30 (57) "Video," unless the context clearly indicates otherwise,
31 means the delivery of behavioral health services through the use of
32 interactive audio and video technology, permitting real-time
33 communication between a person and a designated crisis responder, for
34 the purpose of evaluation. "Video" does not include the use of audio-
35 only telephone, facsimile, email, or store and forward technology.
36 "Store and forward technology" means use of an asynchronous
37 transmission of a person's medical information from a mental health
38 service provider to the designated crisis responder which results in
39 medical diagnosis, consultation, or treatment;

1 (58) "Violent act" means behavior that resulted in homicide,
2 attempted suicide, injury, or substantial loss or damage to
3 property(†

4 ~~(59) "Written order of apprehension" means an order of the court
5 for a peace officer to deliver the named person in the order to a
6 facility or emergency room as determined by the designated crisis
7 responder. Such orders shall be entered into the Washington crime
8 information center database).~~

9 **Sec. 20.** RCW 71.05.020 and 2020 c 302 s 3, 2020 c 256 s 301,
10 2020 c 80 s 51, and 2020 c 5 s 1 are each reenacted and amended to
11 read as follows:

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

14 (1) "Admission" or "admit" means a decision by a physician,
15 physician assistant, or psychiatric advanced registered nurse
16 practitioner that a person should be examined or treated as a patient
17 in a hospital;

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

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

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

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

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

36 (7) "Behavioral health disorder" means either a mental disorder
37 as defined in this section, a substance use disorder as defined in
38 this section, or a co-occurring mental disorder and substance use
39 disorder;

1 (8) "Behavioral health service provider" means a public or
2 private agency that provides mental health, substance use disorder,
3 or co-occurring disorder services to persons with behavioral health
4 disorders as defined under this section and receives funding from
5 public sources. This includes, but is not limited to(~~(hospitals))~~;
6 Hospitals licensed under chapter 70.41 RCW(~~(τ))~~;
7 evaluation and treatment facilities as defined in this section(~~(τ))~~;
8 mental health service delivery systems or community behavioral health
9 programs as defined in RCW 71.24.025(~~(τ))~~;
10 licensed or certified behavioral health agencies under RCW 71.24.037;
11 facilities conducting competency evaluations and restoration under chapter 10.77 RCW(~~(τ))~~;
12 approved substance use disorder treatment programs as defined in this
13 section(~~(τ))~~;
14 secure withdrawal management and stabilization facilities as defined in this section(~~(τ))~~;
15 and correctional facilities operated by state and local governments;

16 (9) "Co-occurring disorder specialist" means an individual
17 possessing an enhancement granted by the department of health under
18 chapter 18.205 RCW that certifies the individual to provide substance
19 use disorder counseling subject to the practice limitations under RCW
20 18.205.105;

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

24 (11) "Conditional release" means a revocable modification of a
25 commitment, which may be revoked upon violation of any of its terms;

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

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

35 (14) "Department" means the department of health;

36 (15) "Designated crisis responder" means a mental health
37 professional appointed by the county, by an entity appointed by the
38 county, or by the authority in consultation with a federally
39 recognized Indian tribe or after meeting and conferring with an

1 Indian health care provider, to perform the duties specified in this
2 chapter;

3 (16) "Detention" or "detain" means the lawful confinement of a
4 person, under the provisions of this chapter;

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

13 (18) "Developmental disability" means that condition defined in
14 RCW 71A.10.020(5);

15 (19) "Director" means the director of the authority;

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

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

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

38 (23) "Gravely disabled" means a condition in which a person, as a
39 result of a behavioral health disorder: (a) Is in danger of serious
40 physical harm resulting from a failure to provide for his or her

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

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

14 (25) "Hearing" means any proceeding conducted in open court that
15 conforms to the requirements of RCW 71.05.820;

16 (26) "History of one or more violent acts" refers to the period
17 of time ten years prior to the filing of a petition under this
18 chapter, excluding any time spent, but not any violent acts
19 committed, in a behavioral health facility, or in confinement as a
20 result of a criminal conviction;

21 (27) "Imminent" means the state or condition of being likely to
22 occur at any moment or near at hand, rather than distant or remote;

23 (28) "In need of assisted outpatient behavioral health treatment"
24 means that a person, as a result of a behavioral health disorder: (a)
25 Has been committed by a court to detention for involuntary behavioral
26 health treatment during the preceding thirty-six months; (b) is
27 unlikely to voluntarily participate in outpatient treatment without
28 an order for less restrictive alternative treatment, based on a
29 history of nonadherence with treatment or in view of the person's
30 current behavior; (c) is likely to benefit from less restrictive
31 alternative treatment; and (d) requires less restrictive alternative
32 treatment to prevent a relapse, decompensation, or deterioration that
33 is likely to result in the person presenting a likelihood of serious
34 harm or the person becoming gravely disabled within a reasonably
35 short period of time;

36 (29) "Individualized service plan" means a plan prepared by a
37 developmental disabilities professional with other professionals as a
38 team, for a person with developmental disabilities, which shall
39 state:

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

3 (b) The conditions and strategies necessary to achieve the
4 purposes of habilitation;

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

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

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

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

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

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

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

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

26 (33) "Less restrictive alternative treatment" means a program of
27 individualized treatment in a less restrictive setting than inpatient
28 treatment that includes the services described in RCW 71.05.585. This
29 term includes: Treatment pursuant to a less restrictive alternative
30 treatment order under RCW 71.05.240 or 71.05.320; treatment pursuant
31 to a conditional release under RCW 71.05.340; and treatment pursuant
32 to an assisted outpatient behavioral health treatment order under RCW
33 71.05.148;

34 (34) "Licensed physician" means a person licensed to practice
35 medicine or osteopathic medicine and surgery in the state of
36 Washington;

37 (35) "Likelihood of serious harm" means:

38 (a) A substantial risk that: (i) Physical harm will be inflicted
39 by a person upon his or her own person, as evidenced by threats or
40 attempts to commit suicide or inflict physical harm on oneself; (ii)

1 physical harm will be inflicted by a person upon another, as
2 evidenced by behavior which has caused such harm or which places
3 another person or persons in reasonable fear of sustaining such harm;
4 or (iii) physical harm will be inflicted by a person upon the
5 property of others, as evidenced by behavior which has caused
6 substantial loss or damage to the property of others; or

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

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

12 (37) "Mental disorder" means any organic, mental, or emotional
13 impairment which has substantial adverse effects on a person's
14 cognitive or volitional functions;

15 (38) "Mental health professional" means a psychiatrist,
16 psychologist, physician assistant working with a supervising
17 psychiatrist, psychiatric advanced registered nurse practitioner,
18 psychiatric nurse, or social worker, and such other mental health
19 professionals as may be defined by rules adopted by the secretary
20 pursuant to the provisions of this chapter;

21 (39) "Peace officer" means a law enforcement official of a public
22 agency or governmental unit, and includes persons specifically given
23 peace officer powers by any state law, local ordinance, or judicial
24 order of appointment;

25 (40) "Physician assistant" means a person licensed as a physician
26 assistant under chapter 18.71A RCW;

27 (41) "Private agency" means any person, partnership, corporation,
28 or association that is not a public agency, whether or not financed
29 in whole or in part by public funds, which constitutes an evaluation
30 and treatment facility or private institution, or hospital, or
31 approved substance use disorder treatment program, which is conducted
32 for, or includes a department or ward conducted for, the care and
33 treatment of persons with behavioral health disorders;

34 (42) "Professional person" means a mental health professional,
35 substance use disorder professional, or designated crisis responder
36 and shall also mean a physician, physician assistant, psychiatric
37 advanced registered nurse practitioner, registered nurse, and such
38 others as may be defined by rules adopted by the secretary pursuant
39 to the provisions of this chapter;

1 (43) "Psychiatric advanced registered nurse practitioner" means a
2 person who is licensed as an advanced registered nurse practitioner
3 pursuant to chapter 18.79 RCW; and who is board certified in advanced
4 practice psychiatric and mental health nursing;

5 (44) "Psychiatrist" means a person having a license as a
6 physician and surgeon in this state who has in addition completed
7 three years of graduate training in psychiatry in a program approved
8 by the American medical association or the American osteopathic
9 association and is certified or eligible to be certified by the
10 American board of psychiatry and neurology;

11 (45) "Psychologist" means a person who has been licensed as a
12 psychologist pursuant to chapter 18.83 RCW;

13 (46) "Public agency" means any evaluation and treatment facility
14 or institution, secure withdrawal management and stabilization
15 facility, approved substance use disorder treatment program, or
16 hospital which is conducted for, or includes a department or ward
17 conducted for, the care and treatment of persons with behavioral
18 health disorders, if the agency is operated directly by federal,
19 state, county, or municipal government, or a combination of such
20 governments;

21 (47) "Release" means legal termination of the commitment under
22 the provisions of this chapter;

23 (48) "Resource management services" has the meaning given in
24 chapter 71.24 RCW;

25 (49) "Secretary" means the secretary of the department of health,
26 or his or her designee;

27 (50) "Secure withdrawal management and stabilization facility"
28 means a facility operated by either a public or private agency or by
29 the program of an agency which provides care to voluntary individuals
30 and individuals involuntarily detained and committed under this
31 chapter for whom there is a likelihood of serious harm or who are
32 gravely disabled due to the presence of a substance use disorder.
33 Secure withdrawal management and stabilization facilities must:

34 (a) Provide the following services:

35 (i) Assessment and treatment, provided by certified substance use
36 disorder professionals or co-occurring disorder specialists;

37 (ii) Clinical stabilization services;

38 (iii) Acute or subacute detoxification services for intoxicated
39 individuals; and

1 (iv) Discharge assistance provided by certified substance use
2 disorder professionals or co-occurring disorder specialists,
3 including facilitating transitions to appropriate voluntary or
4 involuntary inpatient services or to less restrictive alternatives as
5 appropriate for the individual;

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

8 (c) Be licensed or certified as such by the department of health;

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

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

18 (53) "Substance use disorder professional" means a person
19 certified as a substance use disorder professional by the department
20 of health under chapter 18.205 RCW;

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

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

1 a treatment facility if the notes or records are not available to
2 others;

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

10 (57) "Video," unless the context clearly indicates otherwise,
11 means the delivery of behavioral health services through the use of
12 interactive audio and video technology, permitting real-time
13 communication between a person and a designated crisis responder, for
14 the purpose of evaluation. "Video" does not include the use of audio-
15 only telephone, facsimile, email, or store and forward technology.
16 "Store and forward technology" means use of an asynchronous
17 transmission of a person's medical information from a mental health
18 service provider to the designated crisis responder which results in
19 medical diagnosis, consultation, or treatment;

20 (58) "Violent act" means behavior that resulted in homicide,
21 attempted suicide, injury, or substantial loss or damage to
22 property(†

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

28 **Sec. 21.** RCW 71.05.020 and 2020 c 302 s 4, 2020 c 302 s 3, 2020
29 c 256 s 301, and 2020 c 5 s 1 are each reenacted and amended to read
30 as follows:

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

33 (1) "Admission" or "admit" means a decision by a physician,
34 physician assistant, or psychiatric advanced registered nurse
35 practitioner that a person should be examined or treated as a patient
36 in a hospital;

37 (2) "Alcoholism" means a disease, characterized by a dependency
38 on alcoholic beverages, loss of control over the amount and
39 circumstances of use, symptoms of tolerance, physiological or

1 psychological withdrawal, or both, if use is reduced or discontinued,
2 and impairment of health or disruption of social or economic
3 functioning;

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

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

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

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

16 (7) "Behavioral health disorder" means either a mental disorder
17 as defined in this section, a substance use disorder as defined in
18 this section, or a co-occurring mental disorder and substance use
19 disorder;

20 (8) "Behavioral health service provider" means a public or
21 private agency that provides mental health, substance use disorder,
22 or co-occurring disorder services to persons with behavioral health
23 disorders as defined under this section and receives funding from
24 public sources. This includes, but is not limited to ~~((hospitals))~~;
25 Hospitals licensed under chapter 70.41 RCW ~~((τ))~~; evaluation and
26 treatment facilities as defined in this section ~~((τ))~~; community
27 mental health service delivery systems or community behavioral health
28 programs as defined in RCW 71.24.025 ~~((τ))~~; licensed or certified
29 behavioral health agencies under RCW 71.24.037; facilities conducting
30 competency evaluations and restoration under chapter 10.77 RCW ~~((τ))~~; approved substance use disorder treatment programs as defined in this
31 section ~~((τ))~~; secure withdrawal management and stabilization
32 facilities as defined in this section ~~((τ))~~; and correctional
33 facilities operated by state and local governments;

34 (9) "Co-occurring disorder specialist" means an individual
35 possessing an enhancement granted by the department of health under
36 chapter 18.205 RCW that certifies the individual to provide substance
37 use disorder counseling subject to the practice limitations under RCW
38 18.205.105;
39

1 (10) "Commitment" means the determination by a court that a
2 person should be detained for a period of either evaluation or
3 treatment, or both, in an inpatient or a less restrictive setting;

4 (11) "Conditional release" means a revocable modification of a
5 commitment, which may be revoked upon violation of any of its terms;

6 (12) "Crisis stabilization unit" means a short-term facility or a
7 portion of a facility licensed or certified by the department, such
8 as an evaluation and treatment facility or a hospital, which has been
9 designed to assess, diagnose, and treat individuals experiencing an
10 acute crisis without the use of long-term hospitalization;

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

15 (14) "Department" means the department of health;

16 (15) "Designated crisis responder" means a mental health
17 professional appointed by the county, by an entity appointed by the
18 county, or by the authority in consultation with a federally
19 recognized Indian tribe or after meeting and conferring with an
20 Indian health care provider, to perform the duties specified in this
21 chapter;

22 (16) "Detention" or "detain" means the lawful confinement of a
23 person, under the provisions of this chapter;

24 (17) "Developmental disabilities professional" means a person who
25 has specialized training and three years of experience in directly
26 treating or working with persons with developmental disabilities and
27 is a psychiatrist, physician assistant working with a supervising
28 psychiatrist, psychologist, psychiatric advanced registered nurse
29 practitioner, or social worker, and such other developmental
30 disabilities professionals as may be defined by rules adopted by the
31 secretary of the department of social and health services;

32 (18) "Developmental disability" means that condition defined in
33 RCW 71A.10.020(5);

34 (19) "Director" means the director of the authority;

35 (20) "Discharge" means the termination of hospital medical
36 authority. The commitment may remain in place, be terminated, or be
37 amended by court order;

38 (21) "Drug addiction" means a disease, characterized by a
39 dependency on psychoactive chemicals, loss of control over the amount
40 and circumstances of use, symptoms of tolerance, physiological or

1 psychological withdrawal, or both, if use is reduced or discontinued,
2 and impairment of health or disruption of social or economic
3 functioning;

4 (22) "Evaluation and treatment facility" means any facility which
5 can provide directly, or by direct arrangement with other public or
6 private agencies, emergency evaluation and treatment, outpatient
7 care, and timely and appropriate inpatient care to persons suffering
8 from a mental disorder, and which is licensed or certified as such by
9 the department. The authority may certify single beds as temporary
10 evaluation and treatment beds under RCW 71.05.745. A physically
11 separate and separately operated portion of a state hospital may be
12 designated as an evaluation and treatment facility. A facility which
13 is part of, or operated by, the department of social and health
14 services or any federal agency will not require certification. No
15 correctional institution or facility, or jail, shall be an evaluation
16 and treatment facility within the meaning of this chapter;

17 (23) "Gravely disabled" means a condition in which a person, as a
18 result of a behavioral health disorder: (a) Is in danger of serious
19 physical harm resulting from a failure to provide for his or her
20 essential human needs of health or safety; or (b) manifests severe
21 deterioration from safe behavior evidenced by repeated and escalating
22 loss of cognitive or volitional control over his or her actions and
23 is not receiving such care as is essential for his or her health or
24 safety;

25 (24) "Habilitative services" means those services provided by
26 program personnel to assist persons in acquiring and maintaining life
27 skills and in raising their levels of physical, mental, social, and
28 vocational functioning. Habilitative services include education,
29 training for employment, and therapy. The habilitative process shall
30 be undertaken with recognition of the risk to the public safety
31 presented by the person being assisted as manifested by prior charged
32 criminal conduct;

33 (25) "Hearing" means any proceeding conducted in open court that
34 conforms to the requirements of RCW 71.05.820;

35 (26) "History of one or more violent acts" refers to the period
36 of time ten years prior to the filing of a petition under this
37 chapter, excluding any time spent, but not any violent acts
38 committed, in a behavioral health facility, or in confinement as a
39 result of a criminal conviction;

1 (27) "Imminent" means the state or condition of being likely to
2 occur at any moment or near at hand, rather than distant or remote;

3 (28) "In need of assisted outpatient behavioral health treatment"
4 means that a person, as a result of a behavioral health disorder: (a)
5 Has been committed by a court to detention for involuntary behavioral
6 health treatment during the preceding thirty-six months; (b) is
7 unlikely to voluntarily participate in outpatient treatment without
8 an order for less restrictive alternative treatment, based on a
9 history of nonadherence with treatment or in view of the person's
10 current behavior; (c) is likely to benefit from less restrictive
11 alternative treatment; and (d) requires less restrictive alternative
12 treatment to prevent a relapse, decompensation, or deterioration that
13 is likely to result in the person presenting a likelihood of serious
14 harm or the person becoming gravely disabled within a reasonably
15 short period of time;

16 (29) "Individualized service plan" means a plan prepared by a
17 developmental disabilities professional with other professionals as a
18 team, for a person with developmental disabilities, which shall
19 state:

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

22 (b) The conditions and strategies necessary to achieve the
23 purposes of habilitation;

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

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

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

29 (f) Where relevant in light of past criminal behavior and due
30 consideration for public safety, the criteria for proposed movement
31 to less-restrictive settings, criteria for proposed eventual
32 discharge or release, and a projected possible date for discharge or
33 release; and

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

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

39 (31) "Judicial commitment" means a commitment by a court pursuant
40 to the provisions of this chapter;

1 (32) "Legal counsel" means attorneys and staff employed by county
2 prosecutor offices or the state attorney general acting in their
3 capacity as legal representatives of public behavioral health service
4 providers under RCW 71.05.130;

5 (33) "Less restrictive alternative treatment" means a program of
6 individualized treatment in a less restrictive setting than inpatient
7 treatment that includes the services described in RCW 71.05.585. This
8 term includes: Treatment pursuant to a less restrictive alternative
9 treatment order under RCW 71.05.240 or 71.05.320; treatment pursuant
10 to a conditional release under RCW 71.05.340; and treatment pursuant
11 to an assisted outpatient behavioral health treatment order under RCW
12 71.05.148;

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

16 (35) "Likelihood of serious harm" means:

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

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

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

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

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

1 (39) "Peace officer" means a law enforcement official of a public
2 agency or governmental unit, and includes persons specifically given
3 peace officer powers by any state law, local ordinance, or judicial
4 order of appointment;

5 (40) "Physician assistant" means a person licensed as a physician
6 assistant under chapter 18.57A or 18.71A RCW;

7 (41) "Private agency" means any person, partnership, corporation,
8 or association that is not a public agency, whether or not financed
9 in whole or in part by public funds, which constitutes an evaluation
10 and treatment facility or private institution, or hospital, or
11 approved substance use disorder treatment program, which is conducted
12 for, or includes a department or ward conducted for, the care and
13 treatment of persons with behavioral health disorders;

14 (42) "Professional person" means a mental health professional,
15 substance use disorder professional, or designated crisis responder
16 and shall also mean a physician, physician assistant, psychiatric
17 advanced registered nurse practitioner, registered nurse, and such
18 others as may be defined by rules adopted by the secretary pursuant
19 to the provisions of this chapter;

20 (43) "Psychiatric advanced registered nurse practitioner" means a
21 person who is licensed as an advanced registered nurse practitioner
22 pursuant to chapter 18.79 RCW; and who is board certified in advanced
23 practice psychiatric and mental health nursing;

24 (44) "Psychiatrist" means a person having a license as a
25 physician and surgeon in this state who has in addition completed
26 three years of graduate training in psychiatry in a program approved
27 by the American medical association or the American osteopathic
28 association and is certified or eligible to be certified by the
29 American board of psychiatry and neurology;

30 (45) "Psychologist" means a person who has been licensed as a
31 psychologist pursuant to chapter 18.83 RCW;

32 (46) "Public agency" means any evaluation and treatment facility
33 or institution, secure withdrawal management and stabilization
34 facility, approved substance use disorder treatment program, or
35 hospital which is conducted for, or includes a department or ward
36 conducted for, the care and treatment of persons with behavioral
37 health disorders, if the agency is operated directly by federal,
38 state, county, or municipal government, or a combination of such
39 governments;

1 (47) "Release" means legal termination of the commitment under
2 the provisions of this chapter;

3 (48) "Resource management services" has the meaning given in
4 chapter 71.24 RCW;

5 (49) "Secretary" means the secretary of the department of health,
6 or his or her designee;

7 (50) "Secure withdrawal management and stabilization facility"
8 means a facility operated by either a public or private agency or by
9 the program of an agency which provides care to voluntary individuals
10 and individuals involuntarily detained and committed under this
11 chapter for whom there is a likelihood of serious harm or who are
12 gravely disabled due to the presence of a substance use disorder.
13 Secure withdrawal management and stabilization facilities must:

14 (a) Provide the following services:

15 (i) Assessment and treatment, provided by certified substance use
16 disorder professionals or co-occurring disorder specialists;

17 (ii) Clinical stabilization services;

18 (iii) Acute or subacute detoxification services for intoxicated
19 individuals; and

20 (iv) Discharge assistance provided by certified substance use
21 disorder professionals or co-occurring disorder specialists,
22 including facilitating transitions to appropriate voluntary or
23 involuntary inpatient services or to less restrictive alternatives as
24 appropriate for the individual;

25 (b) Include security measures sufficient to protect the patients,
26 staff, and community; and

27 (c) Be licensed or certified as such by the department of health;

28 (51) "Severe deterioration from safe behavior" means that a
29 person will, if not treated, suffer or continue to suffer severe and
30 abnormal mental, emotional, or physical distress, and this distress
31 is associated with significant impairment of judgment, reason, or
32 behavior;

33 (52) "Social worker" means a person with a master's or further
34 advanced degree from a social work educational program accredited and
35 approved as provided in RCW 18.320.010;

36 (53) "Substance use disorder" means a cluster of cognitive,
37 behavioral, and physiological symptoms indicating that an individual
38 continues using the substance despite significant substance-related
39 problems. The diagnosis of a substance use disorder is based on a

1 pathological pattern of behaviors related to the use of the
2 substances;

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

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

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

28 (57) "Triage facility" means a short-term facility or a portion
29 of a facility licensed or certified by the department, which is
30 designed as a facility to assess and stabilize an individual or
31 determine the need for involuntary commitment of an individual, and
32 must meet department residential treatment facility standards. A
33 triage facility may be structured as a voluntary or involuntary
34 placement facility;

35 (58) "Video," unless the context clearly indicates otherwise,
36 means the delivery of behavioral health services through the use of
37 interactive audio and video technology, permitting real-time
38 communication between a person and a designated crisis responder, for
39 the purpose of evaluation. "Video" does not include the use of audio-
40 only telephone, facsimile, email, or store and forward technology.

1 "Store and forward technology" means use of an asynchronous
2 transmission of a person's medical information from a mental health
3 service provider to the designated crisis responder which results in
4 medical diagnosis, consultation, or treatment;

5 (59) "Violent act" means behavior that resulted in homicide,
6 attempted suicide, injury, or substantial loss or damage to
7 property(†

8 ~~(60) "Written order of apprehension" means an order of the court
9 for a peace officer to deliver the named person in the order to a
10 facility or emergency room as determined by the designated crisis
11 responder. Such orders shall be entered into the Washington crime
12 information center database).~~

13 **Sec. 22.** RCW 71.05.020 and 2020 c 302 s 4, 2020 c 302 s 3, 2020
14 c 256 s 301, 2020 c 80 s 51, and 2020 c 5 s 1 are each reenacted and
15 amended to read as follows:

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

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

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

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

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

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

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

1 (7) "Behavioral health disorder" means either a mental disorder
2 as defined in this section, a substance use disorder as defined in
3 this section, or a co-occurring mental disorder and substance use
4 disorder;

5 (8) "Behavioral health service provider" means a public or
6 private agency that provides mental health, substance use disorder,
7 or co-occurring disorder services to persons with behavioral health
8 disorders as defined under this section and receives funding from
9 public sources. This includes, but is not limited to(~~(hospitals))~~;
10 Hospitals licensed under chapter 70.41 RCW(~~(τ))~~;
11 evaluation and treatment facilities as defined in this section(~~(τ))~~;
12 community mental health service delivery systems or community behavioral health
13 programs as defined in RCW 71.24.025(~~(τ))~~;
14 licensed or certified behavioral health agencies under RCW 71.24.037;
15 facilities conducting competency evaluations and restoration under chapter 10.77 RCW(~~(τ))~~;
16 approved substance use disorder treatment programs as defined in this
17 section(~~(τ))~~;
18 secure withdrawal management and stabilization facilities as defined in this section(~~(τ))~~;
19 and correctional facilities operated by state and local governments;

20 (9) "Co-occurring disorder specialist" means an individual
21 possessing an enhancement granted by the department of health under
22 chapter 18.205 RCW that certifies the individual to provide substance
23 use disorder counseling subject to the practice limitations under RCW
24 18.205.105;

25 (10) "Commitment" means the determination by a court that a
26 person should be detained for a period of either evaluation or
27 treatment, or both, in an inpatient or a less restrictive setting;

28 (11) "Conditional release" means a revocable modification of a
29 commitment, which may be revoked upon violation of any of its terms;

30 (12) "Crisis stabilization unit" means a short-term facility or a
31 portion of a facility licensed or certified by the department, such
32 as an evaluation and treatment facility or a hospital, which has been
33 designed to assess, diagnose, and treat individuals experiencing an
34 acute crisis without the use of long-term hospitalization;

35 (13) "Custody" means involuntary detention under the provisions
36 of this chapter or chapter 10.77 RCW, uninterrupted by any period of
37 unconditional release from commitment from a facility providing
38 involuntary care and treatment;

39 (14) "Department" means the department of health;

1 (15) "Designated crisis responder" means a mental health
2 professional appointed by the county, by an entity appointed by the
3 county, or by the authority in consultation with a federally
4 recognized Indian tribe or after meeting and conferring with an
5 Indian health care provider, to perform the duties specified in this
6 chapter;

7 (16) "Detention" or "detain" means the lawful confinement of a
8 person, under the provisions of this chapter;

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

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

19 (19) "Director" means the director of the authority;

20 (20) "Discharge" means the termination of hospital medical
21 authority. The commitment may remain in place, be terminated, or be
22 amended by court order;

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

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

1 correctional institution or facility, or jail, shall be an evaluation
2 and treatment facility within the meaning of this chapter;

3 (23) "Gravely disabled" means a condition in which a person, as a
4 result of a behavioral health disorder: (a) Is in danger of serious
5 physical harm resulting from a failure to provide for his or her
6 essential human needs of health or safety; or (b) manifests severe
7 deterioration from safe behavior evidenced by repeated and escalating
8 loss of cognitive or volitional control over his or her actions and
9 is not receiving such care as is essential for his or her health or
10 safety;

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

19 (25) "Hearing" means any proceeding conducted in open court that
20 conforms to the requirements of RCW 71.05.820;

21 (26) "History of one or more violent acts" refers to the period
22 of time ten years prior to the filing of a petition under this
23 chapter, excluding any time spent, but not any violent acts
24 committed, in a behavioral health facility, or in confinement as a
25 result of a criminal conviction;

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

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

1 (29) "Individualized service plan" means a plan prepared by a
2 developmental disabilities professional with other professionals as a
3 team, for a person with developmental disabilities, which 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 (30) "Intoxicated person" means a person whose mental or physical
22 functioning is substantially impaired as a result of the use of
23 alcohol or other psychoactive chemicals;

24 (31) "Judicial commitment" means a commitment by a court pursuant
25 to the provisions of this chapter;

26 (32) "Legal counsel" means attorneys and staff employed by county
27 prosecutor offices or the state attorney general acting in their
28 capacity as legal representatives of public behavioral health service
29 providers under RCW 71.05.130;

30 (33) "Less restrictive alternative treatment" means a program of
31 individualized treatment in a less restrictive setting than inpatient
32 treatment that includes the services described in RCW 71.05.585. This
33 term includes: Treatment pursuant to a less restrictive alternative
34 treatment order under RCW 71.05.240 or 71.05.320; treatment pursuant
35 to a conditional release under RCW 71.05.340; and treatment pursuant
36 to an assisted outpatient behavioral health treatment order under RCW
37 71.05.148;

38 (34) "Licensed physician" means a person licensed to practice
39 medicine or osteopathic medicine and surgery in the state of
40 Washington;

1 (35) "Likelihood of serious harm" means:

2 (a) A substantial risk that: (i) Physical harm will be inflicted
3 by a person upon his or her own person, as evidenced by threats or
4 attempts to commit suicide or inflict physical harm on oneself; (ii)
5 physical harm will be inflicted by a person upon another, as
6 evidenced by behavior which has caused harm, substantial pain, or
7 which places another person or persons in reasonable fear of harm to
8 themselves or others; or (iii) physical harm will be inflicted by a
9 person upon the property of others, as evidenced by behavior which
10 has caused substantial loss or damage to the property of others; or

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

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

16 (37) "Mental disorder" means any organic, mental, or emotional
17 impairment which has substantial adverse effects on a person's
18 cognitive or volitional functions;

19 (38) "Mental health professional" means a psychiatrist,
20 psychologist, physician assistant working with a supervising
21 psychiatrist, psychiatric advanced registered nurse practitioner,
22 psychiatric nurse, or social worker, and such other mental health
23 professionals as may be defined by rules adopted by the secretary
24 pursuant to the provisions of this chapter;

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

29 (40) "Physician assistant" means a person licensed as a physician
30 assistant under chapter 18.71A RCW;

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

38 (42) "Professional person" means a mental health professional,
39 substance use disorder professional, or designated crisis responder
40 and shall also mean a physician, physician assistant, psychiatric

1 advanced registered nurse practitioner, registered nurse, and such
2 others as may be defined by rules adopted by the secretary pursuant
3 to the provisions of this chapter;

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

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

14 (45) "Psychologist" means a person who has been licensed as a
15 psychologist pursuant to chapter 18.83 RCW;

16 (46) "Public agency" means any evaluation and treatment facility
17 or institution, secure withdrawal management and stabilization
18 facility, approved substance use disorder treatment program, or
19 hospital which is conducted for, or includes a department or ward
20 conducted for, the care and treatment of persons with behavioral
21 health disorders, if the agency is operated directly by federal,
22 state, county, or municipal government, or a combination of such
23 governments;

24 (47) "Release" means legal termination of the commitment under
25 the provisions of this chapter;

26 (48) "Resource management services" has the meaning given in
27 chapter 71.24 RCW;

28 (49) "Secretary" means the secretary of the department of health,
29 or his or her designee;

30 (50) "Secure withdrawal management and stabilization facility"
31 means a facility operated by either a public or private agency or by
32 the program of an agency which provides care to voluntary individuals
33 and individuals involuntarily detained and committed under this
34 chapter for whom there is a likelihood of serious harm or who are
35 gravely disabled due to the presence of a substance use disorder.
36 Secure withdrawal management and stabilization facilities must:

37 (a) Provide the following services:

38 (i) Assessment and treatment, provided by certified substance use
39 disorder professionals or co-occurring disorder specialists;

40 (ii) Clinical stabilization services;

1 (iii) Acute or subacute detoxification services for intoxicated
2 individuals; and

3 (iv) Discharge assistance provided by certified substance use
4 disorder professionals or co-occurring disorder specialists,
5 including facilitating transitions to appropriate voluntary or
6 involuntary inpatient services or to less restrictive alternatives as
7 appropriate for the individual;

8 (b) Include security measures sufficient to protect the patients,
9 staff, and community; and

10 (c) Be licensed or certified as such by the department of health;

11 (51) "Severe deterioration from safe behavior" means that a
12 person will, if not treated, suffer or continue to suffer severe and
13 abnormal mental, emotional, or physical distress, and this distress
14 is associated with significant impairment of judgment, reason, or
15 behavior;

16 (52) "Social worker" means a person with a master's or further
17 advanced degree from a social work educational program accredited and
18 approved as provided in RCW 18.320.010;

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

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

28 (55) "Therapeutic court personnel" means the staff of a mental
29 health court or other therapeutic court which has jurisdiction over
30 defendants who are dually diagnosed with mental disorders, including
31 court personnel, probation officers, a court monitor, prosecuting
32 attorney, or defense counsel acting within the scope of therapeutic
33 court duties;

34 (56) "Treatment records" include registration and all other
35 records concerning persons who are receiving or who at any time have
36 received services for behavioral health disorders, which are
37 maintained by the department of social and health services, the
38 department, the authority, behavioral health administrative services
39 organizations and their staffs, managed care organizations and their
40 staffs, and by treatment facilities. Treatment records include mental

1 health information contained in a medical bill including but not
2 limited to mental health drugs, a mental health diagnosis, provider
3 name, and dates of service stemming from a medical service. Treatment
4 records do not include notes or records maintained for personal use
5 by a person providing treatment services for the department of social
6 and health services, the department, the authority, behavioral health
7 administrative services organizations, managed care organizations, or
8 a treatment facility if the notes or records are not available to
9 others;

10 (57) "Triage facility" means a short-term facility or a portion
11 of a facility licensed or certified by the department, which is
12 designed as a facility to assess and stabilize an individual or
13 determine the need for involuntary commitment of an individual, and
14 must meet department residential treatment facility standards. A
15 triage facility may be structured as a voluntary or involuntary
16 placement facility;

17 (58) "Video," unless the context clearly indicates otherwise,
18 means the delivery of behavioral health services through the use of
19 interactive audio and video technology, permitting real-time
20 communication between a person and a designated crisis responder, for
21 the purpose of evaluation. "Video" does not include the use of audio-
22 only telephone, facsimile, email, or store and forward technology.
23 "Store and forward technology" means use of an asynchronous
24 transmission of a person's medical information from a mental health
25 service provider to the designated crisis responder which results in
26 medical diagnosis, consultation, or treatment;

27 (59) "Violent act" means behavior that resulted in homicide,
28 attempted suicide, injury, or substantial loss or damage to
29 property(†

30 ~~(60) "Written order of apprehension" means an order of the court
31 for a peace officer to deliver the named person in the order to a
32 facility or emergency room as determined by the designated crisis
33 responder. Such orders shall be entered into the Washington crime
34 information center database).~~

35 **Sec. 23.** 2020 c 302 s 110 (uncodified) is amended to read as
36 follows:

37 (1) Sections 4 and 28 (~~of this act~~), chapter 302, Laws of 2020
38 and, until July 1, 2022, section 21 of this act and, beginning July
39 1, 2022, section 22 of this act take effect when monthly single-bed

1 certifications authorized under RCW 71.05.745 fall below 200 reports
2 for 3 consecutive months.

3 (2) The health care authority must provide written notice of the
4 effective date of sections 4 and 28 (~~(of this act)~~), chapter 302,
5 Laws of 2020 and sections 21 and 22 of this act to affected parties,
6 the chief clerk of the house of representatives, the secretary of the
7 senate, the office of the code reviser, and others as deemed
8 appropriate by the authority.

9 **Sec. 24.** RCW 71.34.020 and 2020 c 302 s 63, 2020 c 274 s 50, and
10 2020 c 185 s 2 are each reenacted and amended to read as follows:

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

13 (1) "Admission" or "admit" means a decision by a physician,
14 physician assistant, or psychiatric advanced registered nurse
15 practitioner that a minor should be examined or treated as a patient
16 in a hospital.

17 (2) "Adolescent" means a minor thirteen years of age or older.

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

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

28 (5) "Approved substance use disorder treatment program" means a
29 program for minors with substance use disorders provided by a
30 treatment program licensed or certified by the department of health
31 as meeting standards adopted under chapter 71.24 RCW.

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

35 (7) "Authority" means the Washington state health care authority.

36 (8) "Behavioral health administrative services organization" has
37 the same meaning as provided in RCW 71.24.025.

38 (9) "Behavioral health disorder" means either a mental disorder
39 as defined in this section, a substance use disorder as defined in

1 this section, or a co-occurring mental disorder and substance use
2 disorder.

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

8 (11) "Children's mental health specialist" means:

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

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

16 (12) "Commitment" means a determination by a judge or court
17 commissioner, made after a commitment hearing, that the minor is in
18 need of inpatient diagnosis, evaluation, or treatment or that the
19 minor is in need of less restrictive alternative treatment.

20 (13) "Conditional release" means a revocable modification of a
21 commitment, which may be revoked upon violation of any of its terms.

22 (14) "Co-occurring disorder specialist" means an individual
23 possessing an enhancement granted by the department of health under
24 chapter 18.205 RCW that certifies the individual to provide substance
25 use disorder counseling subject to the practice limitations under RCW
26 18.205.105.

27 (15) "Crisis stabilization unit" means a short-term facility or a
28 portion of a facility licensed or certified by the department of
29 health under RCW 71.24.035, such as a residential treatment facility
30 or a hospital, which has been designed to assess, diagnose, and treat
31 individuals experiencing an acute crisis without the use of long-term
32 hospitalization.

33 (16) "Custody" means involuntary detention under the provisions
34 of this chapter or chapter 10.77 RCW, uninterrupted by any period of
35 unconditional release from commitment from a facility providing
36 involuntary care and treatment.

37 (17) "Department" means the department of social and health
38 services.

39 (18) "Designated crisis responder" has the same meaning as
40 provided in RCW 71.05.020.

1 (19) "Detention" or "detain" means the lawful confinement of a
2 person, under the provisions of this chapter.

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

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

13 (22) "Director" means the director of the authority.

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

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

28 (25) "Evaluation and treatment program" means the total system of
29 services and facilities coordinated and approved by a county or
30 combination of counties for the evaluation and treatment of minors
31 under this chapter.

32 (26) "Gravely disabled minor" means a minor who, as a result of a
33 behavioral health disorder, (a) is in danger of serious physical harm
34 resulting from a failure to provide for his or her essential human
35 needs of health or safety, or (b) manifests severe deterioration in
36 routine functioning evidenced by repeated and escalating loss of
37 cognitive or volitional control over his or her actions and is not
38 receiving such care as is essential for his or her health or safety.

39 (27) "Habilitative services" means those services provided by
40 program personnel to assist minors in acquiring and maintaining life

1 skills and in raising their levels of physical, behavioral, social,
2 and vocational functioning. Habilitative services include education,
3 training for employment, and therapy.

4 (28) "Hearing" means any proceeding conducted in open court that
5 conforms to the requirements of RCW 71.34.910.

6 (29) "History of one or more violent acts" refers to the period
7 of time five years prior to the filing of a petition under this
8 chapter, excluding any time spent, but not any violent acts
9 committed, in a mental health facility, a long-term (~~alcoholism or~~
10 ~~drug~~) substance use disorder treatment facility, or in confinement
11 as a result of a criminal conviction.

12 (30) "Individualized service plan" means a plan prepared by a
13 developmental disabilities professional with other professionals as a
14 team, for a person with developmental disabilities, which states:

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

17 (b) The conditions and strategies necessary to achieve the
18 purposes of habilitation;

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

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

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

24 (f) Where relevant in light of past criminal behavior and due
25 consideration for public safety, the criteria for proposed movement
26 to less-restrictive settings, criteria for proposed eventual
27 discharge or release, and a projected possible date for discharge or
28 release; and

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

31 (31)(a) "Inpatient treatment" means twenty-four-hour-per-day
32 mental health care provided within a general hospital, psychiatric
33 hospital, residential treatment facility licensed or certified by the
34 department of health as an evaluation and treatment facility for
35 minors, secure withdrawal management and stabilization facility for
36 minors, or approved substance use disorder treatment program for
37 minors.

38 (b) For purposes of family-initiated treatment under RCW
39 71.34.600 through 71.34.670, "inpatient treatment" has the meaning

1 included in (a) of this subsection and any other residential
2 treatment facility licensed under chapter 71.12 RCW.

3 (32) "Intoxicated minor" means a minor whose mental or physical
4 functioning is substantially impaired as a result of the use of
5 alcohol or other psychoactive chemicals.

6 (33) "Judicial commitment" means a commitment by a court pursuant
7 to the provisions of this chapter.

8 (34) "Kinship caregiver" has the same meaning as in RCW
9 74.13.031(19) (a).

10 (35) "Legal counsel" means attorneys and staff employed by county
11 prosecutor offices or the state attorney general acting in their
12 capacity as legal representatives of public behavioral health service
13 providers under RCW 71.05.130.

14 (36) "Less restrictive alternative" or "less restrictive setting"
15 means outpatient treatment provided to a minor (~~who is not residing~~
16 ~~in a facility providing inpatient treatment as defined in this~~
17 ~~chapter~~) as a program of individualized treatment in a less
18 restrictive setting than inpatient treatment that includes the
19 services described in RCW 71.34.755, including residential treatment.

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

23 (38) "Likelihood of serious harm" means:

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

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

35 (39) "Managed care organization" has the same meaning as provided
36 in RCW 71.24.025.

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

1 (41) "Medical necessity" for inpatient care means a requested
2 service which is reasonably calculated to: (a) Diagnose, correct,
3 cure, or alleviate a mental disorder or substance use disorder; or
4 (b) prevent the progression of a mental disorder or substance use
5 disorder that endangers life or causes suffering and pain, or results
6 in illness or infirmity or threatens to cause or aggravate a
7 disability, or causes physical deformity or malfunction, and there is
8 no adequate less restrictive alternative available.

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

15 (43) "Mental health professional" means a psychiatrist,
16 psychiatric advanced registered nurse practitioner, physician
17 assistant working with a supervising psychiatrist, psychologist,
18 psychiatric nurse, social worker, and such other mental health
19 professionals as defined by rules adopted by the secretary of the
20 department of health under this chapter.

21 (44) "Minor" means any person under the age of eighteen years.

22 (45) "Outpatient treatment" means any of the nonresidential
23 services mandated under chapter 71.24 RCW and provided by licensed or
24 certified behavioral health agencies as identified by RCW 71.24.025.

25 (46)(a) "Parent" has the same meaning as defined in RCW
26 26.26A.010, including either parent if custody is shared under a
27 joint custody agreement, or a person or agency judicially appointed
28 as legal guardian or custodian of the child.

29 (b) For purposes of family-initiated treatment under RCW
30 71.34.600 through 71.34.670, "parent" also includes a person to whom
31 a parent defined in (a) of this subsection has given a signed
32 authorization to make health care decisions for the adolescent, a
33 stepparent who is involved in caring for the adolescent, a kinship
34 caregiver who is involved in caring for the adolescent, or another
35 relative who is responsible for the health care of the adolescent,
36 who may be required to provide a declaration under penalty of perjury
37 stating that he or she is a relative responsible for the health care
38 of the adolescent pursuant to chapter 5.50 RCW. If a dispute arises
39 between individuals authorized to act as a parent for the purpose of

1 RCW 71.34.600 through 71.34.670, the disagreement must be resolved
2 according to the priority established under RCW 7.70.065(2) (a).

3 (47) "Peace officer" means a law enforcement official of a public
4 agency or governmental unit, and includes persons specifically given
5 peace officer powers by any state law, local ordinance, or judicial
6 order of appointment.

7 (48) "Physician assistant" means a person licensed as a physician
8 assistant under chapter 18.57A or 18.71A RCW.

9 (49) "Private agency" means any person, partnership, corporation,
10 or association that is not a public agency, whether or not financed
11 in whole or in part by public funds, that constitutes an evaluation
12 and treatment facility or private institution, or hospital, or
13 approved substance use disorder treatment program, that is conducted
14 for, or includes a distinct unit, floor, or ward conducted for, the
15 care and treatment of persons with mental illness, substance use
16 disorders, or both mental illness and substance use disorders.

17 (50) "Professional person in charge" or "professional person"
18 means a physician, other mental health professional, or other person
19 empowered by an evaluation and treatment facility, secure withdrawal
20 management and stabilization facility, or approved substance use
21 disorder treatment program with authority to make admission and
22 discharge decisions on behalf of that facility.

23 (51) "Psychiatric nurse" means a registered nurse who has
24 experience in the direct treatment of persons who have a mental
25 illness or who are emotionally disturbed, such experience gained
26 under the supervision of a mental health professional.

27 (52) "Psychiatrist" means a person having a license as a
28 physician in this state who has completed residency training in
29 psychiatry in a program approved by the American Medical Association
30 or the American Osteopathic Association, and is board eligible or
31 board certified in psychiatry.

32 (53) "Psychologist" means a person licensed as a psychologist
33 under chapter 18.83 RCW.

34 (54) "Public agency" means any evaluation and treatment facility
35 or institution, or hospital, or approved substance use disorder
36 treatment program that is conducted for, or includes a distinct unit,
37 floor, or ward conducted for, the care and treatment of persons with
38 mental illness, substance use disorders, or both mental illness and
39 substance use disorders if the agency is operated directly by

1 federal, state, county, or municipal government, or a combination of
2 such governments.

3 (55) "Release" means legal termination of the commitment under
4 the provisions of this chapter.

5 (56) "Resource management services" has the meaning given in
6 chapter 71.24 RCW.

7 (57) "Responsible other" means the minor, the minor's parent or
8 estate, or any other person legally responsible for support of the
9 minor.

10 (58) "Secretary" means the secretary of the department or
11 secretary's designee.

12 (59) "Secure withdrawal management and stabilization facility"
13 means a facility operated by either a public or private agency or by
14 the program of an agency which provides care to voluntary individuals
15 and individuals involuntarily detained and committed under this
16 chapter for whom there is a likelihood of serious harm or who are
17 gravely disabled due to the presence of a substance use disorder.
18 Secure withdrawal management and stabilization facilities must:

19 (a) Provide the following services:

20 (i) Assessment and treatment, provided by certified substance use
21 disorder professionals or co-occurring disorder specialists;

22 (ii) Clinical stabilization services;

23 (iii) Acute or subacute detoxification services for intoxicated
24 individuals; and

25 (iv) Discharge assistance provided by certified substance use
26 disorder professionals or co-occurring disorder specialists,
27 including facilitating transitions to appropriate voluntary or
28 involuntary inpatient services or to less restrictive alternatives as
29 appropriate for the individual;

30 (b) Include security measures sufficient to protect the patients,
31 staff, and community; and

32 (c) Be licensed or certified as such by the department of health.

33 (60) "Social worker" means a person with a master's or further
34 advanced degree from a social work educational program accredited and
35 approved as provided in RCW 18.320.010.

36 (61) "Start of initial detention" means the time of arrival of
37 the minor at the first evaluation and treatment facility, secure
38 withdrawal management and stabilization facility, or approved
39 substance use disorder treatment program offering inpatient treatment
40 if the minor is being involuntarily detained at the time. With regard

1 to voluntary patients, "start of initial detention" means the time at
2 which the minor gives notice of intent to leave under the provisions
3 of this chapter.

4 (62) "Store and forward technology" means use of an asynchronous
5 transmission of a person's medical information from a mental health
6 service provider to the designated crisis responder which results in
7 medical diagnosis, consultation, or treatment.

8 (63) "Substance use disorder" means a cluster of cognitive,
9 behavioral, and physiological symptoms indicating that an individual
10 continues using the substance despite significant substance-related
11 problems. The diagnosis of a substance use disorder is based on a
12 pathological pattern of behaviors related to the use of the
13 substances.

14 (~~(63)~~) (64) "Substance use disorder professional" means a
15 person certified as a substance use disorder professional by the
16 department of health under chapter 18.205 RCW.

17 (~~(64)~~) (65) "Therapeutic court personnel" means the staff of a
18 mental health court or other therapeutic court which has jurisdiction
19 over defendants who are dually diagnosed with mental disorders,
20 including court personnel, probation officers, a court monitor,
21 prosecuting attorney, or defense counsel acting within the scope of
22 therapeutic court duties.

23 (~~(65)~~) (66) "Treatment records" include registration and all
24 other records concerning persons who are receiving or who at any time
25 have received services for mental illness, which are maintained by
26 the department, the department of health, the authority, behavioral
27 health organizations and their staffs, and by treatment facilities.
28 Treatment records include mental health information contained in a
29 medical bill including but not limited to mental health drugs, a
30 mental health diagnosis, provider name, and dates of service stemming
31 from a medical service. Treatment records do not include notes or
32 records maintained for personal use by a person providing treatment
33 services for the department, the department of health, the authority,
34 behavioral health organizations, or a treatment facility if the notes
35 or records are not available to others.

36 (~~(66)~~) (67) "Triage facility" means a short-term facility or a
37 portion of a facility licensed or certified by the department of
38 health under RCW 71.24.035, which is designed as a facility to assess
39 and stabilize an individual or determine the need for involuntary
40 commitment of an individual, and must meet department of health

1 residential treatment facility standards. A triage facility may be
2 structured as a voluntary or involuntary placement facility.

3 ~~((67))~~ (68) "Video" means the delivery of behavioral health
4 services through the use of interactive audio and video technology,
5 permitting real-time communication between a person and a designated
6 crisis responder, for the purpose of evaluation. "Video" does not
7 include the use of audio-only telephone, facsimile, email, or store
8 and forward technology.

9 (69) "Violent act" means behavior that resulted in homicide,
10 attempted suicide, injury, or substantial loss or damage to property.

11 ~~((68) "Written order of apprehension" means an order of the~~
12 ~~court for a peace officer to deliver the named minor in the order to~~
13 ~~a facility or emergency room as determined by the designated crisis~~
14 ~~responder. Such orders must be entered into the Washington crime~~
15 ~~information center database.))~~

16 **Sec. 25.** RCW 71.34.020 and 2020 c 302 s 63, 2020 c 274 s 50,
17 2020 c 185 s 2, and 2020 c 80 s 54 are each reenacted and amended to
18 read as follows:

19 Unless the context clearly requires otherwise, the definitions in
20 this section apply throughout this chapter.

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

25 (2) "Adolescent" means a minor thirteen years of age or older.

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

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

36 (5) "Approved substance use disorder treatment program" means a
37 program for minors with substance use disorders provided by a
38 treatment program licensed or certified by the department of health
39 as meeting standards adopted under chapter 71.24 RCW.

1 (6) "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 minor patient.

4 (7) "Authority" means the Washington state health care authority.

5 (8) "Behavioral health administrative services organization" has
6 the same meaning as provided in RCW 71.24.025.

7 (9) "Behavioral health disorder" means either a mental disorder
8 as defined in this section, a substance use disorder as defined in
9 this section, or a co-occurring mental disorder and substance use
10 disorder.

11 (10) "Child psychiatrist" means a person having a license as a
12 physician and surgeon in this state, who has had graduate training in
13 child psychiatry in a program approved by the American Medical
14 Association or the American Osteopathic Association, and who is board
15 eligible or board certified in child psychiatry.

16 (11) "Children's mental health specialist" means:

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

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

24 (12) "Commitment" means a determination by a judge or court
25 commissioner, made after a commitment hearing, that the minor is in
26 need of inpatient diagnosis, evaluation, or treatment or that the
27 minor is in need of less restrictive alternative treatment.

28 (13) "Conditional release" means a revocable modification of a
29 commitment, which may be revoked upon violation of any of its terms.

30 (14) "Co-occurring disorder specialist" means an individual
31 possessing an enhancement granted by the department of health under
32 chapter 18.205 RCW that certifies the individual to provide substance
33 use disorder counseling subject to the practice limitations under RCW
34 18.205.105.

35 (15) "Crisis stabilization unit" means a short-term facility or a
36 portion of a facility licensed or certified by the department of
37 health under RCW 71.24.035, such as a residential treatment facility
38 or a hospital, which has been designed to assess, diagnose, and treat
39 individuals experiencing an acute crisis without the use of long-term
40 hospitalization.

1 (16) "Custody" means involuntary detention under the provisions
2 of this chapter or chapter 10.77 RCW, uninterrupted by any period of
3 unconditional release from commitment from a facility providing
4 involuntary care and treatment.

5 (17) "Department" means the department of social and health
6 services.

7 (18) "Designated crisis responder" has the same meaning as
8 provided in RCW 71.05.020.

9 (19) "Detention" or "detain" means the lawful confinement of a
10 person, under the provisions of this chapter.

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

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

21 (22) "Director" means the director of the authority.

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

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

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

1 (26) "Gravely disabled minor" means a minor who, as a result of a
2 behavioral health disorder, (a) is in danger of serious physical harm
3 resulting from a failure to provide for his or her essential human
4 needs of health or safety, or (b) manifests severe deterioration in
5 routine functioning evidenced by repeated and escalating loss of
6 cognitive or volitional control over his or her actions and is not
7 receiving such care as is essential for his or her health or safety.

8 (27) "Habilitative services" means those services provided by
9 program personnel to assist minors in acquiring and maintaining life
10 skills and in raising their levels of physical, behavioral, social,
11 and vocational functioning. Habilitative services include education,
12 training for employment, and therapy.

13 (28) "Hearing" means any proceeding conducted in open court that
14 conforms to the requirements of RCW 71.34.910.

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

21 (30) "Individualized service plan" means a plan prepared by a
22 developmental disabilities professional with other professionals as a
23 team, for a person with developmental disabilities, which states:

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

26 (b) The conditions and strategies necessary to achieve the
27 purposes of habilitation;

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

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

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

33 (f) Where relevant in light of past criminal behavior and due
34 consideration for public safety, the criteria for proposed movement
35 to less-restrictive settings, criteria for proposed eventual
36 discharge or release, and a projected possible date for discharge or
37 release; and

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

1 (31) (a) "Inpatient treatment" means twenty-four-hour-per-day
2 mental health care provided within a general hospital, psychiatric
3 hospital, residential treatment facility licensed or certified by the
4 department of health as an evaluation and treatment facility for
5 minors, secure withdrawal management and stabilization facility for
6 minors, or approved substance use disorder treatment program for
7 minors.

8 (b) For purposes of family-initiated treatment under RCW
9 71.34.600 through 71.34.670, "inpatient treatment" has the meaning
10 included in (a) of this subsection and any other residential
11 treatment facility licensed under chapter 71.12 RCW.

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

15 (33) "Judicial commitment" means a commitment by a court pursuant
16 to the provisions of this chapter.

17 (34) "Kinship caregiver" has the same meaning as in RCW
18 74.13.031(19) (a).

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

23 (36) "Less restrictive alternative" or "less restrictive setting"
24 means outpatient treatment provided to a minor (~~who is not residing~~
25 ~~in a facility providing inpatient treatment as defined in this~~
26 ~~chapter~~) as a program of individualized treatment in a less
27 restrictive setting than inpatient treatment that includes the
28 services described in RCW 71.34.755, including residential treatment.

29 (37) "Licensed physician" means a person licensed to practice
30 medicine or osteopathic medicine and surgery in the state of
31 Washington.

32 (38) "Likelihood of serious harm" means:

33 (a) A substantial risk that: (i) Physical harm will be inflicted
34 by a minor upon his or her own person, as evidenced by threats or
35 attempts to commit suicide or inflict physical harm on oneself; (ii)
36 physical harm will be inflicted by a minor upon another individual,
37 as evidenced by behavior which has caused such harm or which places
38 another person or persons in reasonable fear of sustaining such harm;
39 or (iii) physical harm will be inflicted by a minor upon the property

1 of others, as evidenced by behavior which has caused substantial loss
2 or damage to the property of others; or

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

5 (39) "Managed care organization" has the same meaning as provided
6 in RCW 71.24.025.

7 (40) "Medical clearance" means a physician or other health care
8 provider has determined that a person is medically stable and ready
9 for referral to the designated crisis responder.

10 (41) "Medical necessity" for inpatient care means a requested
11 service which is reasonably calculated to: (a) Diagnose, correct,
12 cure, or alleviate a mental disorder or substance use disorder; or
13 (b) prevent the progression of a mental disorder or substance use
14 disorder that endangers life or causes suffering and pain, or results
15 in illness or infirmity or threatens to cause or aggravate a
16 disability, or causes physical deformity or malfunction, and there is
17 no adequate less restrictive alternative available.

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

24 (43) "Mental health professional" means a psychiatrist,
25 psychiatric advanced registered nurse practitioner, physician
26 assistant working with a supervising psychiatrist, psychologist,
27 psychiatric nurse, social worker, and such other mental health
28 professionals as defined by rules adopted by the secretary of the
29 department of health under this chapter.

30 (44) "Minor" means any person under the age of eighteen years.

31 (45) "Outpatient treatment" means any of the nonresidential
32 services mandated under chapter 71.24 RCW and provided by licensed or
33 certified behavioral health agencies as identified by RCW 71.24.025.

34 (46)(a) "Parent" has the same meaning as defined in RCW
35 26.26A.010, including either parent if custody is shared under a
36 joint custody agreement, or a person or agency judicially appointed
37 as legal guardian or custodian of the child.

38 (b) For purposes of family-initiated treatment under RCW
39 71.34.600 through 71.34.670, "parent" also includes a person to whom
40 a parent defined in (a) of this subsection has given a signed

1 authorization to make health care decisions for the adolescent, a
2 stepparent who is involved in caring for the adolescent, a kinship
3 caregiver who is involved in caring for the adolescent, or another
4 relative who is responsible for the health care of the adolescent,
5 who may be required to provide a declaration under penalty of perjury
6 stating that he or she is a relative responsible for the health care
7 of the adolescent pursuant to chapter 5.50 RCW. If a dispute arises
8 between individuals authorized to act as a parent for the purpose of
9 RCW 71.34.600 through 71.34.670, the disagreement must be resolved
10 according to the priority established under RCW 7.70.065(2) (a).

11 (47) "Peace officer" means a law enforcement official of a public
12 agency or governmental unit, and includes persons specifically given
13 peace officer powers by any state law, local ordinance, or judicial
14 order of appointment.

15 (48) "Physician assistant" means a person licensed as a physician
16 assistant under chapter 18.71A RCW.

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

25 (50) "Professional person in charge" or "professional person"
26 means a physician, other mental health professional, or other person
27 empowered by an evaluation and treatment facility, secure withdrawal
28 management and stabilization facility, or approved substance use
29 disorder treatment program with authority to make admission and
30 discharge decisions on behalf of that facility.

31 (51) "Psychiatric nurse" means a registered nurse who has
32 experience in the direct treatment of persons who have a mental
33 illness or who are emotionally disturbed, such experience gained
34 under the supervision of a mental health professional.

35 (52) "Psychiatrist" means a person having a license as a
36 physician in this state who has completed residency training in
37 psychiatry in a program approved by the American Medical Association
38 or the American Osteopathic Association, and is board eligible or
39 board certified in psychiatry.

1 (53) "Psychologist" means a person licensed as a psychologist
2 under chapter 18.83 RCW.

3 (54) "Public agency" means any evaluation and treatment facility
4 or institution, or hospital, or approved substance use disorder
5 treatment program that is conducted for, or includes a distinct unit,
6 floor, or ward conducted for, the care and treatment of persons with
7 mental illness, substance use disorders, or both mental illness and
8 substance use disorders if the agency is operated directly by
9 federal, state, county, or municipal government, or a combination of
10 such governments.

11 (55) "Release" means legal termination of the commitment under
12 the provisions of this chapter.

13 (56) "Resource management services" has the meaning given in
14 chapter 71.24 RCW.

15 (57) "Responsible other" means the minor, the minor's parent or
16 estate, or any other person legally responsible for support of the
17 minor.

18 (58) "Secretary" means the secretary of the department or
19 secretary's designee.

20 (59) "Secure withdrawal management and stabilization facility"
21 means a facility operated by either a public or private agency or by
22 the program of an agency which provides care to voluntary individuals
23 and individuals involuntarily detained and committed under this
24 chapter for whom there is a likelihood of serious harm or who are
25 gravely disabled due to the presence of a substance use disorder.
26 Secure withdrawal management and stabilization facilities must:

27 (a) Provide the following services:

28 (i) Assessment and treatment, provided by certified substance use
29 disorder professionals or co-occurring disorder specialists;

30 (ii) Clinical stabilization services;

31 (iii) Acute or subacute detoxification services for intoxicated
32 individuals; and

33 (iv) Discharge assistance provided by certified substance use
34 disorder professionals or co-occurring disorder specialists,
35 including facilitating transitions to appropriate voluntary or
36 involuntary inpatient services or to less restrictive alternatives as
37 appropriate for the individual;

38 (b) Include security measures sufficient to protect the patients,
39 staff, and community; and

40 (c) Be licensed or certified as such by the department of health.

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

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

12 (62) "Store and forward technology" means use of an asynchronous
13 transmission of a person's medical information from a mental health
14 service provider to the designated crisis responder which results in
15 medical diagnosis, consultation, or treatment.

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

22 (~~(63)~~) (64) "Substance use disorder professional" means a
23 person certified as a substance use disorder professional by the
24 department of health under chapter 18.205 RCW.

25 (~~(64)~~) (65) "Therapeutic court personnel" means the staff of a
26 mental health court or other therapeutic court which has jurisdiction
27 over defendants who are dually diagnosed with mental disorders,
28 including court personnel, probation officers, a court monitor,
29 prosecuting attorney, or defense counsel acting within the scope of
30 therapeutic court duties.

31 (~~(65)~~) (66) "Treatment records" include registration and all
32 other records concerning persons who are receiving or who at any time
33 have received services for mental illness, which are maintained by
34 the department, the department of health, the authority, behavioral
35 health organizations and their staffs, and by treatment facilities.
36 Treatment records include mental health information contained in a
37 medical bill including but not limited to mental health drugs, a
38 mental health diagnosis, provider name, and dates of service stemming
39 from a medical service. Treatment records do not include notes or
40 records maintained for personal use by a person providing treatment

1 services for the department, the department of health, the authority,
2 behavioral health organizations, or a treatment facility if the notes
3 or records are not available to others.

4 ~~((66))~~ (67) "Triage facility" means a short-term facility or a
5 portion of a facility licensed or certified by the department of
6 health under RCW 71.24.035, which is designed as a facility to assess
7 and stabilize an individual or determine the need for involuntary
8 commitment of an individual, and must meet department of health
9 residential treatment facility standards. A triage facility may be
10 structured as a voluntary or involuntary placement facility.

11 ~~((67))~~ (68) "Video" means the delivery of behavioral health
12 services through the use of interactive audio and video technology,
13 permitting real-time communication between a person and a designated
14 crisis responder, for the purpose of evaluation. "Video" does not
15 include the use of audio-only telephone, facsimile, email, or store
16 and forward technology.

17 (69) "Violent act" means behavior that resulted in homicide,
18 attempted suicide, injury, or substantial loss or damage to property.

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

24 **Sec. 26.** RCW 71.34.020 and 2020 c 302 s 64, 2020 c 302 s 63,
25 2020 c 274 s 50, and 2020 c 185 s 2 are each reenacted and amended to
26 read as follows:

27 Unless the context clearly requires otherwise, the definitions in
28 this section apply throughout this chapter.

29 (1) "Admission" or "admit" means a decision by a physician,
30 physician assistant, or psychiatric advanced registered nurse
31 practitioner that a minor should be examined or treated as a patient
32 in a hospital.

33 (2) "Adolescent" means a minor thirteen years of age or older.

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

1 (4) "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 (5) "Approved substance use disorder treatment program" means a
6 program for minors with substance use disorders provided by a
7 treatment program licensed or certified by the department of health
8 as meeting standards adopted under chapter 71.24 RCW.

9 (6) "Attending staff" means any person on the staff of a public
10 or private agency having responsibility for the care and treatment of
11 a minor patient.

12 (7) "Authority" means the Washington state health care authority.

13 (8) "Behavioral health administrative services organization" has
14 the same meaning as provided in RCW 71.24.025.

15 (9) "Behavioral health disorder" means either a mental disorder
16 as defined in this section, a substance use disorder as defined in
17 this section, or a co-occurring mental disorder and substance use
18 disorder.

19 (10) "Child psychiatrist" means a person having a license as a
20 physician and surgeon in this state, who has had graduate training in
21 child psychiatry in a program approved by the American Medical
22 Association or the American Osteopathic Association, and who is board
23 eligible or board certified in child psychiatry.

24 (11) "Children's mental health specialist" means:

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

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

32 (12) "Commitment" means a determination by a judge or court
33 commissioner, made after a commitment hearing, that the minor is in
34 need of inpatient diagnosis, evaluation, or treatment or that the
35 minor is in need of less restrictive alternative treatment.

36 (13) "Conditional release" means a revocable modification of a
37 commitment, which may be revoked upon violation of any of its terms.

38 (14) "Co-occurring disorder specialist" means an individual
39 possessing an enhancement granted by the department of health under
40 chapter 18.205 RCW that certifies the individual to provide substance

1 use disorder counseling subject to the practice limitations under RCW
2 18.205.105.

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

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

13 (17) "Department" means the department of social and health
14 services.

15 (18) "Designated crisis responder" has the same meaning as
16 provided in RCW 71.05.020.

17 (19) "Detention" or "detain" means the lawful confinement of a
18 person, under the provisions of this chapter.

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

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

29 (22) "Director" means the director of the authority.

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

33 (24) "Evaluation and treatment facility" means a public or
34 private facility or unit that is licensed or certified by the
35 department of health to provide emergency, inpatient, residential, or
36 outpatient mental health evaluation and treatment services for
37 minors. A physically separate and separately operated portion of a
38 state hospital may be designated as an evaluation and treatment
39 facility for minors. A facility which is part of or operated by the
40 state or federal agency does not require licensure or certification.

1 No correctional institution or facility, juvenile court detention
2 facility, or jail may be an evaluation and treatment facility within
3 the meaning of this chapter.

4 (25) "Evaluation and treatment program" means the total system of
5 services and facilities coordinated and approved by a county or
6 combination of counties for the evaluation and treatment of minors
7 under this chapter.

8 (26) "Gravely disabled minor" means a minor who, as a result of a
9 behavioral health disorder, (a) is in danger of serious physical harm
10 resulting from a failure to provide for his or her essential human
11 needs of health or safety, or (b) manifests severe deterioration from
12 safe behavior evidenced by repeated and escalating loss of cognitive
13 or volitional control over his or her actions and is not receiving
14 such care as is essential for his or her health or safety.

15 (27) "Habilitative services" means those services provided by
16 program personnel to assist minors in acquiring and maintaining life
17 skills and in raising their levels of physical, behavioral, social,
18 and vocational functioning. Habilitative services include education,
19 training for employment, and therapy.

20 (28) "Hearing" means any proceeding conducted in open court that
21 conforms to the requirements of RCW 71.34.910.

22 (29) "History of one or more violent acts" refers to the period
23 of time five years prior to the filing of a petition under this
24 chapter, excluding any time spent, but not any violent acts
25 committed, in a mental health facility, a long-term (~~alcoholism or~~
26 ~~drug~~) substance use disorder treatment facility, or in confinement
27 as a result of a criminal conviction.

28 (30) "Individualized service plan" means a plan prepared by a
29 developmental disabilities professional with other professionals as a
30 team, for a person with developmental disabilities, which states:

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

33 (b) The conditions and strategies necessary to achieve the
34 purposes of habilitation;

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

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

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

1 (f) Where relevant in light of past criminal behavior and due
2 consideration for public safety, the criteria for proposed movement
3 to less-restrictive settings, criteria for proposed eventual
4 discharge or release, and a projected possible date for discharge or
5 release; and

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

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

15 (b) For purposes of family-initiated treatment under RCW
16 71.34.600 through 71.34.670, "inpatient treatment" has the meaning
17 included in (a) of this subsection and any other residential
18 treatment facility licensed under chapter 71.12 RCW.

19 (32) "Intoxicated minor" means a minor whose mental or physical
20 functioning is substantially impaired as a result of the use of
21 alcohol or other psychoactive chemicals.

22 (33) "Judicial commitment" means a commitment by a court pursuant
23 to the provisions of this chapter.

24 (34) "Kinship caregiver" has the same meaning as in RCW
25 74.13.031(19)(a).

26 (35) "Legal counsel" means attorneys and staff employed by county
27 prosecutor offices or the state attorney general acting in their
28 capacity as legal representatives of public behavioral health service
29 providers under RCW 71.05.130.

30 (36) "Less restrictive alternative" or "less restrictive setting"
31 means outpatient treatment provided to a minor (~~who is not residing~~
32 ~~in a facility providing inpatient treatment as defined in this~~
33 ~~chapter~~) as a program of individualized treatment in a less
34 restrictive setting than inpatient treatment that includes the
35 services described in RCW 71.34.755, including residential treatment.

36 (37) "Licensed physician" means a person licensed to practice
37 medicine or osteopathic medicine and surgery in the state of
38 Washington.

39 (38) "Likelihood of serious harm" means:

1 (a) A substantial risk that: (i) Physical harm will be inflicted
2 by a minor upon his or her own person, as evidenced by threats or
3 attempts to commit suicide or inflict physical harm on oneself; (ii)
4 physical harm will be inflicted by a minor upon another individual,
5 as evidenced by behavior which has caused harm, substantial pain, or
6 which places another person or persons in reasonable fear of harm to
7 themselves or others; or (iii) physical harm will be inflicted by a
8 minor upon the property of others, as evidenced by behavior which has
9 caused substantial loss or damage to the property of others; or

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

12 (39) "Managed care organization" has the same meaning as provided
13 in RCW 71.24.025.

14 (40) "Medical clearance" means a physician or other health care
15 provider has determined that a person is medically stable and ready
16 for referral to the designated crisis responder.

17 (41) "Medical necessity" for inpatient care means a requested
18 service which is reasonably calculated to: (a) Diagnose, correct,
19 cure, or alleviate a mental disorder or substance use disorder; or
20 (b) prevent the progression of a mental disorder or substance use
21 disorder that endangers life or causes suffering and pain, or results
22 in illness or infirmity or threatens to cause or aggravate a
23 disability, or causes physical deformity or malfunction, and there is
24 no adequate less restrictive alternative available.

25 (42) "Mental disorder" means any organic, mental, or emotional
26 impairment that has substantial adverse effects on an individual's
27 cognitive or volitional functions. The presence of alcohol abuse,
28 drug abuse, juvenile criminal history, antisocial behavior, or
29 intellectual disabilities alone is insufficient to justify a finding
30 of "mental disorder" within the meaning of this section.

31 (43) "Mental health professional" means a psychiatrist,
32 psychiatric advanced registered nurse practitioner, physician
33 assistant working with a supervising psychiatrist, psychologist,
34 psychiatric nurse, social worker, and such other mental health
35 professionals as defined by rules adopted by the secretary of the
36 department of health under this chapter.

37 (44) "Minor" means any person under the age of eighteen years.

38 (45) "Outpatient treatment" means any of the nonresidential
39 services mandated under chapter 71.24 RCW and provided by licensed or
40 certified behavioral health agencies as identified by RCW 71.24.025.

1 (46) (a) "Parent" has the same meaning as defined in RCW
2 26.26A.010, including either parent if custody is shared under a
3 joint custody agreement, or a person or agency judicially appointed
4 as legal guardian or custodian of the child.

5 (b) For purposes of family-initiated treatment under RCW
6 71.34.600 through 71.34.670, "parent" also includes a person to whom
7 a parent defined in (a) of this subsection has given a signed
8 authorization to make health care decisions for the adolescent, a
9 stepparent who is involved in caring for the adolescent, a kinship
10 caregiver who is involved in caring for the adolescent, or another
11 relative who is responsible for the health care of the adolescent,
12 who may be required to provide a declaration under penalty of perjury
13 stating that he or she is a relative responsible for the health care
14 of the adolescent pursuant to chapter 5.50 RCW. If a dispute arises
15 between individuals authorized to act as a parent for the purpose of
16 RCW 71.34.600 through 71.34.670, the disagreement must be resolved
17 according to the priority established under RCW 7.70.065(2) (a).

18 (47) "Peace officer" means a law enforcement official of a public
19 agency or governmental unit, and includes persons specifically given
20 peace officer powers by any state law, local ordinance, or judicial
21 order of appointment.

22 (48) "Physician assistant" means a person licensed as a physician
23 assistant under chapter 18.57A or 18.71A RCW.

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

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

38 (51) "Psychiatric nurse" means a registered nurse who has
39 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 (52) "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 (53) "Psychologist" means a person licensed as a psychologist
9 under chapter 18.83 RCW.

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

18 (55) "Release" means legal termination of the commitment under
19 the provisions of this chapter.

20 (56) "Resource management services" has the meaning given in
21 chapter 71.24 RCW.

22 (57) "Responsible other" means the minor, the minor's parent or
23 estate, or any other person legally responsible for support of the
24 minor.

25 (58) "Secretary" means the secretary of the department or
26 secretary's designee.

27 (59) "Secure withdrawal management and stabilization facility"
28 means a facility operated by either a public or private agency or by
29 the program of an agency which provides care to voluntary individuals
30 and individuals involuntarily detained and committed under this
31 chapter for whom there is a likelihood of serious harm or who are
32 gravely disabled due to the presence of a substance use disorder.
33 Secure withdrawal management and stabilization facilities must:

34 (a) Provide the following services:

35 (i) Assessment and treatment, provided by certified substance use
36 disorder professionals or co-occurring disorder specialists;

37 (ii) Clinical stabilization services;

38 (iii) Acute or subacute detoxification services for intoxicated
39 individuals; and

1 (iv) Discharge assistance provided by certified substance use
2 disorder professionals or co-occurring disorder specialists,
3 including facilitating transitions to appropriate voluntary or
4 involuntary inpatient services or to less restrictive alternatives as
5 appropriate for the individual;

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

8 (c) Be licensed or certified as such by the department of health.

9 (60) "Severe deterioration from safe behavior" means that a
10 person will, if not treated, suffer or continue to suffer severe and
11 abnormal mental, emotional, or physical distress, and this distress
12 is associated with significant impairment of judgment, reason, or
13 behavior.

14 (61) "Social worker" means a person with a master's or further
15 advanced degree from a social work educational program accredited and
16 approved as provided in RCW 18.320.010.

17 (62) "Start of initial detention" means the time of arrival of
18 the minor at the first evaluation and treatment facility, secure
19 withdrawal management and stabilization facility, or approved
20 substance use disorder treatment program offering inpatient treatment
21 if the minor is being involuntarily detained at the time. With regard
22 to voluntary patients, "start of initial detention" means the time at
23 which the minor gives notice of intent to leave under the provisions
24 of this chapter.

25 (63) "Store and forward technology" means use of an asynchronous
26 transmission of a person's medical information from a mental health
27 service provider to the designated crisis responder which results in
28 medical diagnosis, consultation, or treatment.

29 (64) "Substance use disorder" means a cluster of cognitive,
30 behavioral, and physiological symptoms indicating that an individual
31 continues using the substance despite significant substance-related
32 problems. The diagnosis of a substance use disorder is based on a
33 pathological pattern of behaviors related to the use of the
34 substances.

35 ((+64)) (65) "Substance use disorder professional" means a
36 person certified as a substance use disorder professional by the
37 department of health under chapter 18.205 RCW.

38 ((+65)) (66) "Therapeutic court personnel" means the staff of a
39 mental health court or other therapeutic court which has jurisdiction
40 over defendants who are dually diagnosed with mental disorders,

1 including court personnel, probation officers, a court monitor,
2 prosecuting attorney, or defense counsel acting within the scope of
3 therapeutic court duties.

4 ~~((66))~~ (67) "Treatment records" include registration and all
5 other records concerning persons who are receiving or who at any time
6 have received services for mental illness, which are maintained by
7 the department, the department of health, the authority, behavioral
8 health organizations and their staffs, and by treatment facilities.
9 Treatment records include mental health information contained in a
10 medical bill including but not limited to mental health drugs, a
11 mental health diagnosis, provider name, and dates of service stemming
12 from a medical service. Treatment records do not include notes or
13 records maintained for personal use by a person providing treatment
14 services for the department, the department of health, the authority,
15 behavioral health organizations, or a treatment facility if the notes
16 or records are not available to others.

17 ~~((67))~~ (68) "Triage facility" means a short-term facility or a
18 portion of a facility licensed or certified by the department of
19 health under RCW 71.24.035, which is designed as a facility to assess
20 and stabilize an individual or determine the need for involuntary
21 commitment of an individual, and must meet department of health
22 residential treatment facility standards. A triage facility may be
23 structured as a voluntary or involuntary placement facility.

24 ~~((68))~~ (69) "Video" means the delivery of behavioral health
25 services through the use of interactive audio and video technology,
26 permitting real-time communication between a person and a designated
27 crisis responder, for the purpose of evaluation. "Video" does not
28 include the use of audio-only telephone, facsimile, email, or store
29 and forward technology.

30 (70) "Violent act" means behavior that resulted in homicide,
31 attempted suicide, injury, or substantial loss or damage to property.

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

37 **Sec. 27.** RCW 71.34.020 and 2020 c 302 s 64, 2020 c 302 s 63,
38 2020 c 274 s 50, 2020 c 185 s 2, and 2020 c 80 s 54 are each
39 reenacted and amended to read as follows:

1 Unless the context clearly requires otherwise, the definitions in
2 this section apply throughout this chapter.

3 (1) "Admission" or "admit" means a decision by a physician,
4 physician assistant, or psychiatric advanced registered nurse
5 practitioner that a minor should be examined or treated as a patient
6 in a hospital.

7 (2) "Adolescent" means a minor thirteen years of age or older.

8 (3) "Alcoholism" means a disease, characterized by a dependency
9 on alcoholic beverages, loss of control over the amount and
10 circumstances of use, symptoms of tolerance, physiological or
11 psychological withdrawal, or both, if use is reduced or discontinued,
12 and impairment of health or disruption of social or economic
13 functioning.

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

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

22 (6) "Attending staff" means any person on the staff of a public
23 or private agency having responsibility for the care and treatment of
24 a minor patient.

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

26 (8) "Behavioral health administrative services organization" has
27 the same meaning as provided in RCW 71.24.025.

28 (9) "Behavioral health disorder" means either a mental disorder
29 as defined in this section, a substance use disorder as defined in
30 this section, or a co-occurring mental disorder and substance use
31 disorder.

32 (10) "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 (11) "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 (12) "Commitment" means a determination by a judge or court
7 commissioner, made after a commitment hearing, that the minor is in
8 need of inpatient diagnosis, evaluation, or treatment or that the
9 minor is in need of less restrictive alternative treatment.

10 (13) "Conditional release" means a revocable modification of a
11 commitment, which may be revoked upon violation of any of its terms.

12 (14) "Co-occurring disorder specialist" means an individual
13 possessing an enhancement granted by the department of health under
14 chapter 18.205 RCW that certifies the individual to provide substance
15 use disorder counseling subject to the practice limitations under RCW
16 18.205.105.

17 (15) "Crisis stabilization unit" means a short-term facility or a
18 portion of a facility licensed or certified by the department of
19 health under RCW 71.24.035, such as a residential treatment facility
20 or a hospital, which has been designed to assess, diagnose, and treat
21 individuals experiencing an acute crisis without the use of long-term
22 hospitalization.

23 (16) "Custody" means involuntary detention under the provisions
24 of this chapter or chapter 10.77 RCW, uninterrupted by any period of
25 unconditional release from commitment from a facility providing
26 involuntary care and treatment.

27 (17) "Department" means the department of social and health
28 services.

29 (18) "Designated crisis responder" has the same meaning as
30 provided in RCW 71.05.020.

31 (19) "Detention" or "detain" means the lawful confinement of a
32 person, under the provisions of this chapter.

33 (20) "Developmental disabilities professional" means a person who
34 has specialized training and three years of experience in directly
35 treating or working with persons with developmental disabilities and
36 is a psychiatrist, physician assistant working with a supervising
37 psychiatrist, psychologist, psychiatric advanced registered nurse
38 practitioner, or social worker, and such other developmental
39 disabilities professionals as may be defined by rules adopted by the
40 secretary of the department.

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

3 (22) "Director" means the director of the authority.

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

7 (24) "Evaluation and treatment facility" means a public or
8 private facility or unit that is licensed or certified by the
9 department of health to provide emergency, inpatient, residential, or
10 outpatient mental health evaluation and treatment services for
11 minors. A physically separate and separately operated portion of a
12 state hospital may be designated as an evaluation and treatment
13 facility for minors. A facility which is part of or operated by the
14 state or federal agency does not require licensure or certification.
15 No correctional institution or facility, juvenile court detention
16 facility, or jail may be an evaluation and treatment facility within
17 the meaning of this chapter.

18 (25) "Evaluation and treatment program" means the total system of
19 services and facilities coordinated and approved by a county or
20 combination of counties for the evaluation and treatment of minors
21 under this chapter.

22 (26) "Gravely disabled minor" means a minor who, as a result of a
23 behavioral health disorder, (a) is in danger of serious physical harm
24 resulting from a failure to provide for his or her essential human
25 needs of health or safety, or (b) manifests severe deterioration from
26 safe behavior evidenced by repeated and escalating loss of cognitive
27 or volitional control over his or her actions and is not receiving
28 such care as is essential for his or her health or safety.

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

34 (28) "Hearing" means any proceeding conducted in open court that
35 conforms to the requirements of RCW 71.34.910.

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

1 ~~drug~~) substance use disorder treatment facility, or in confinement
2 as a result of a criminal conviction.

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

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

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

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

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

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

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

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

22 (31)(a) "Inpatient treatment" means twenty-four-hour-per-day
23 mental health care provided within a general hospital, psychiatric
24 hospital, residential treatment facility licensed or certified by the
25 department of health as an evaluation and treatment facility for
26 minors, secure withdrawal management and stabilization facility for
27 minors, or approved substance use disorder treatment program for
28 minors.

29 (b) For purposes of family-initiated treatment under RCW
30 71.34.600 through 71.34.670, "inpatient treatment" has the meaning
31 included in (a) of this subsection and any other residential
32 treatment facility licensed under chapter 71.12 RCW.

33 (32) "Intoxicated minor" means a minor whose mental or physical
34 functioning is substantially impaired as a result of the use of
35 alcohol or other psychoactive chemicals.

36 (33) "Judicial commitment" means a commitment by a court pursuant
37 to the provisions of this chapter.

38 (34) "Kinship caregiver" has the same meaning as in RCW
39 74.13.031(19)(a).

1 (35) "Legal counsel" means attorneys and staff employed by county
2 prosecutor offices or the state attorney general acting in their
3 capacity as legal representatives of public behavioral health service
4 providers under RCW 71.05.130.

5 (36) "Less restrictive alternative" or "less restrictive setting"
6 means outpatient treatment provided to a minor (~~who is not residing~~
7 ~~in a facility providing inpatient treatment as defined in this~~
8 ~~chapter~~) as a program of individualized treatment in a less
9 restrictive setting than inpatient treatment that includes the
10 services described in RCW 71.34.755, including residential treatment.

11 (37) "Licensed physician" means a person licensed to practice
12 medicine or osteopathic medicine and surgery in the state of
13 Washington.

14 (38) "Likelihood of serious harm" means:

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

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

26 (39) "Managed care organization" has the same meaning as provided
27 in RCW 71.24.025.

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

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

39 (42) "Mental disorder" means any organic, mental, or emotional
40 impairment that has substantial adverse effects on an individual's

1 cognitive or volitional functions. The presence of alcohol abuse,
2 drug abuse, juvenile criminal history, antisocial behavior, or
3 intellectual disabilities alone is insufficient to justify a finding
4 of "mental disorder" within the meaning of this section.

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

11 (44) "Minor" means any person under the age of eighteen years.

12 (45) "Outpatient treatment" means any of the nonresidential
13 services mandated under chapter 71.24 RCW and provided by licensed or
14 certified behavioral health agencies as identified by RCW 71.24.025.

15 (46)(a) "Parent" has the same meaning as defined in RCW
16 26.26A.010, including either parent if custody is shared under a
17 joint custody agreement, or a person or agency judicially appointed
18 as legal guardian or custodian of the child.

19 (b) For purposes of family-initiated treatment under RCW
20 71.34.600 through 71.34.670, "parent" also includes a person to whom
21 a parent defined in (a) of this subsection has given a signed
22 authorization to make health care decisions for the adolescent, a
23 stepparent who is involved in caring for the adolescent, a kinship
24 caregiver who is involved in caring for the adolescent, or another
25 relative who is responsible for the health care of the adolescent,
26 who may be required to provide a declaration under penalty of perjury
27 stating that he or she is a relative responsible for the health care
28 of the adolescent pursuant to chapter 5.50 RCW. If a dispute arises
29 between individuals authorized to act as a parent for the purpose of
30 RCW 71.34.600 through 71.34.670, the disagreement must be resolved
31 according to the priority established under RCW 7.70.065(2)(a).

32 (47) "Peace officer" means a law enforcement official of a public
33 agency or governmental unit, and includes persons specifically given
34 peace officer powers by any state law, local ordinance, or judicial
35 order of appointment.

36 (48) "Physician assistant" means a person licensed as a physician
37 assistant under chapter 18.71A RCW.

38 (49) "Private agency" means any person, partnership, corporation,
39 or association that is not a public agency, whether or not financed
40 in whole or in part by public funds, that constitutes an evaluation

1 and treatment facility or private institution, or hospital, or
2 approved substance use disorder treatment program, that is conducted
3 for, or includes a distinct unit, floor, or ward conducted for, the
4 care and treatment of persons with mental illness, substance use
5 disorders, or both mental illness and substance use disorders.

6 (50) "Professional person in charge" or "professional person"
7 means a physician, other mental health professional, or other person
8 empowered by an evaluation and treatment facility, secure withdrawal
9 management and stabilization facility, or approved substance use
10 disorder treatment program with authority to make admission and
11 discharge decisions on behalf of that facility.

12 (51) "Psychiatric nurse" means a registered nurse who has
13 experience in the direct treatment of persons who have a mental
14 illness or who are emotionally disturbed, such experience gained
15 under the supervision of a mental health professional.

16 (52) "Psychiatrist" means a person having a license as a
17 physician in this state who has completed residency training in
18 psychiatry in a program approved by the American Medical Association
19 or the American Osteopathic Association, and is board eligible or
20 board certified in psychiatry.

21 (53) "Psychologist" means a person licensed as a psychologist
22 under chapter 18.83 RCW.

23 (54) "Public agency" means any evaluation and treatment facility
24 or institution, or hospital, or approved substance use disorder
25 treatment program that is conducted for, or includes a distinct unit,
26 floor, or ward conducted for, the care and treatment of persons with
27 mental illness, substance use disorders, or both mental illness and
28 substance use disorders if the agency is operated directly by
29 federal, state, county, or municipal government, or a combination of
30 such governments.

31 (55) "Release" means legal termination of the commitment under
32 the provisions of this chapter.

33 (56) "Resource management services" has the meaning given in
34 chapter 71.24 RCW.

35 (57) "Responsible other" means the minor, the minor's parent or
36 estate, or any other person legally responsible for support of the
37 minor.

38 (58) "Secretary" means the secretary of the department or
39 secretary's designee.

1 (59) "Secure withdrawal management and stabilization facility"
2 means a facility operated by either a public or private agency or by
3 the program of an agency which provides care to voluntary individuals
4 and individuals involuntarily detained and committed under this
5 chapter for whom there is a likelihood of serious harm or who are
6 gravely disabled due to the presence of a substance use disorder.
7 Secure withdrawal management and stabilization facilities must:

8 (a) Provide the following services:

9 (i) Assessment and treatment, provided by certified substance use
10 disorder professionals or co-occurring disorder specialists;

11 (ii) Clinical stabilization services;

12 (iii) Acute or subacute detoxification services for intoxicated
13 individuals; and

14 (iv) Discharge assistance provided by certified substance use
15 disorder professionals or co-occurring disorder specialists,
16 including facilitating transitions to appropriate voluntary or
17 involuntary inpatient services or to less restrictive alternatives as
18 appropriate for the individual;

19 (b) Include security measures sufficient to protect the patients,
20 staff, and community; and

21 (c) Be licensed or certified as such by the department of health.

22 (60) "Severe deterioration from safe behavior" means that a
23 person will, if not treated, suffer or continue to suffer severe and
24 abnormal mental, emotional, or physical distress, and this distress
25 is associated with significant impairment of judgment, reason, or
26 behavior.

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

30 (~~(61)~~) (62) "Start of initial detention" means the time of
31 arrival of the minor at the first evaluation and treatment facility,
32 secure withdrawal management and stabilization facility, or approved
33 substance use disorder treatment program offering inpatient treatment
34 if the minor is being involuntarily detained at the time. With regard
35 to voluntary patients, "start of initial detention" means the time at
36 which the minor gives notice of intent to leave under the provisions
37 of this chapter.

38 (~~(62)~~) (63) "Store and forward technology" means use of an
39 asynchronous transmission of a person's medical information from a

1 mental health service provider to the designated crisis responder
2 which results in medical diagnosis, consultation, or treatment.

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

9 ~~((63))~~ (65) "Substance use disorder professional" means a
10 person certified as a substance use disorder professional by the
11 department of health under chapter 18.205 RCW.

12 ~~((64) "Severe deterioration from safe behavior" means that a~~
13 ~~person will, if not treated, suffer or continue to suffer severe and~~
14 ~~abnormal mental, emotional, or physical distress, and this distress~~
15 ~~is associated with significant impairment of judgment, reason, or~~
16 ~~behavior.~~

17 ~~(65))~~ (66) "Therapeutic court personnel" means the staff of a
18 mental health court or other therapeutic court which has jurisdiction
19 over defendants who are dually diagnosed with mental disorders,
20 including court personnel, probation officers, a court monitor,
21 prosecuting attorney, or defense counsel acting within the scope of
22 therapeutic court duties.

23 ~~((66))~~ (67) "Treatment records" include registration and all
24 other records concerning persons who are receiving or who at any time
25 have received services for mental illness, which are maintained by
26 the department, the department of health, the authority, behavioral
27 health organizations and their staffs, and by treatment facilities.
28 Treatment records include mental health information contained in a
29 medical bill including but not limited to mental health drugs, a
30 mental health diagnosis, provider name, and dates of service stemming
31 from a medical service. Treatment records do not include notes or
32 records maintained for personal use by a person providing treatment
33 services for the department, the department of health, the authority,
34 behavioral health organizations, or a treatment facility if the notes
35 or records are not available to others.

36 ~~((67))~~ (68) "Triage facility" means a short-term facility or a
37 portion of a facility licensed or certified by the department of
38 health under RCW 71.24.035, which is designed as a facility to assess
39 and stabilize an individual or determine the need for involuntary
40 commitment of an individual, and must meet department of health

1 residential treatment facility standards. A triage facility may be
2 structured as a voluntary or involuntary placement facility.

3 ~~((68))~~ (69) "Video" means the delivery of behavioral health
4 services through the use of interactive audio and video technology,
5 permitting real-time communication between a person and a designated
6 crisis responder, for the purpose of evaluation. "Video" does not
7 include the use of audio-only telephone, facsimile, email, or store
8 and forward technology.

9 (70) "Violent act" means behavior that resulted in homicide,
10 attempted suicide, injury, or substantial loss or damage to property.

11 ~~((69) "Written order of apprehension" means an order of the~~
12 ~~court for a peace officer to deliver the named minor in the order to~~
13 ~~a facility or emergency room as determined by the designated crisis~~
14 ~~responder. Such orders must be entered into the Washington crime~~
15 ~~information center database.))~~

16 **Sec. 28.** 2020 c 302 s 111 (uncodified) is amended to read as
17 follows:

18 (1) Sections 64 and 81 ~~((of this act))~~, chapter 302, Laws of 2020
19 and, until July 1, 2022, section 26 of this act and, beginning July
20 1, 2022, section 27 of this act take effect when the average wait
21 time for children's long-term inpatient placement admission is 30
22 days or less for two consecutive quarters.

23 (2) The health care authority must provide written notice of the
24 effective date of sections 64 and 81 ~~((of this act))~~, chapter 302,
25 Laws of 2020 and sections 26 and 27 of this act to affected parties,
26 the chief clerk of the house of representatives, the secretary of the
27 senate, the office of the code reviser, and others as deemed
28 appropriate by the authority.

29 **Sec. 29.** RCW 71.34.710 and 2020 c 302 s 83 are each amended to
30 read as follows:

31 (1)(a) When a designated crisis responder receives information
32 that an adolescent as a result of a behavioral health disorder
33 presents a likelihood of serious harm or is gravely disabled, has
34 investigated the specific facts alleged and of the credibility of the
35 person or persons providing the information, and has determined that
36 voluntary admission for inpatient treatment is not possible, the
37 designated crisis responder may take the adolescent, or cause the
38 adolescent to be taken, into custody and transported to an evaluation

1 and treatment facility, secure withdrawal management and
2 stabilization facility, or approved substance use disorder treatment
3 program providing inpatient treatment.

4 A secure withdrawal management and stabilization facility or
5 approved substance use disorder treatment program must be available
6 and have adequate space for the adolescent.

7 (b) If a designated crisis responder decides not to detain an
8 adolescent for evaluation and treatment under RCW 71.34.700(2), or
9 forty-eight hours have elapsed since a designated crisis responder
10 received a request for investigation and the designated crisis
11 responder has not taken action to have the adolescent detained, an
12 immediate family member or guardian or conservator of the adolescent
13 may petition the superior court for the adolescent's detention using
14 the procedures under RCW 71.05.201 and 71.05.203; however, when the
15 court enters an order of initial detention, except as otherwise
16 expressly stated in this chapter, all procedures must be followed as
17 if the order has been entered under (a) of this subsection.

18 (c) The interview performed by the designated crisis responder
19 may be conducted by video provided that a licensed health care
20 professional or professional person who can adequately and accurately
21 assist with obtaining any necessary information is present with the
22 person at the time of the interview.

23 (2)(a) Within twelve hours of the adolescent's arrival at the
24 evaluation and treatment facility, secure withdrawal management and
25 stabilization facility, or approved substance use disorder treatment
26 program, the designated crisis responder shall serve or cause to be
27 served on the adolescent a copy of the petition for initial
28 detention, notice of initial detention, and statement of rights. The
29 designated crisis responder shall file with the court on the next
30 judicial day following the initial detention the original petition
31 for initial detention, notice of initial detention, and statement of
32 rights along with an affidavit of service. The designated crisis
33 responder shall commence service of the petition for initial
34 detention and notice of the initial detention on the adolescent's
35 parent and the adolescent's attorney as soon as possible following
36 the initial detention.

37 ~~(b) ((If the adolescent is involuntarily detained at an~~
38 ~~evaluation and treatment facility, secure withdrawal management and~~
39 ~~stabilization facility, or approved substance use disorder treatment~~
40 ~~program in a different county from where the adolescent was initially~~

1 ~~detained, the~~) The facility or program may serve the adolescent,
2 notify the adolescent's parents and the adolescent's attorney, and
3 file with the court on the next judicial day following the initial
4 detention the original petition for initial detention, notice of
5 initial detention, and statement of rights along with an affidavit of
6 service when filing with the court at the request of the designated
7 crisis responder.

8 (3) (a) At the time of initial detention, the designated crisis
9 responder shall advise the adolescent both orally and in writing that
10 if admitted to the evaluation and treatment facility, secure
11 withdrawal management and stabilization facility, or approved
12 substance use disorder treatment program for inpatient treatment, a
13 commitment hearing shall be held within one hundred twenty hours of
14 the adolescent's provisional acceptance to determine whether probable
15 cause exists to commit the adolescent for further treatment.

16 (b) The adolescent shall be advised that he or she has a right to
17 communicate immediately with an attorney and that he or she has a
18 right to have an attorney appointed to represent him or her before
19 and at the hearing if the adolescent is indigent.

20 (4) Subject to subsection (5) of this section, whenever the
21 designated crisis responder petitions for detention of an adolescent
22 under this chapter, an evaluation and treatment facility, secure
23 withdrawal management and stabilization facility, or approved
24 substance use disorder treatment program providing one hundred twenty
25 hour evaluation and treatment must immediately accept on a
26 provisional basis the petition and the person. Within twenty-four
27 hours of the adolescent's arrival, the facility must evaluate the
28 adolescent's condition and either admit or release the adolescent in
29 accordance with this chapter.

30 (5) A designated crisis responder may not petition for detention
31 of an adolescent to a secure withdrawal management and stabilization
32 facility or approved substance use disorder treatment program unless
33 there is a secure withdrawal management and stabilization facility or
34 approved substance use disorder treatment program available and that
35 has adequate space for the adolescent.

36 (6) If an adolescent is not approved for admission by the
37 inpatient evaluation and treatment facility, secure withdrawal
38 management and stabilization facility, or approved substance use
39 disorder treatment program, the facility shall make such

1 recommendations and referrals for further care and treatment of the
2 adolescent as necessary.

3 (7) Dismissal of a commitment petition is not the appropriate
4 remedy for a violation of the timeliness requirements of this
5 section, based on the purpose of this chapter under RCW 71.34.010,
6 except in the few cases where the facility staff or the designated
7 crisis responder have totally disregarded the requirements of this
8 section.

9 **Sec. 30.** RCW 71.34.710 and 2020 c 302 s 84 are each amended to
10 read as follows:

11 (1)(a) When a designated crisis responder receives information
12 that an adolescent as a result of a behavioral health disorder
13 presents a likelihood of serious harm or is gravely disabled, has
14 investigated the specific facts alleged and of the credibility of the
15 person or persons providing the information, and has determined that
16 voluntary admission for inpatient treatment is not possible, the
17 designated crisis responder may take the adolescent, or cause the
18 adolescent to be taken, into custody and transported to an evaluation
19 and treatment facility, secure withdrawal management and
20 stabilization facility, or approved substance use disorder treatment
21 program providing inpatient treatment.

22 (b) If a designated crisis responder decides not to detain an
23 adolescent for evaluation and treatment under RCW 71.34.700(2), or
24 forty-eight hours have elapsed since a designated crisis responder
25 received a request for investigation and the designated crisis
26 responder has not taken action to have the adolescent detained, an
27 immediate family member or guardian or conservator of the adolescent
28 may petition the superior court for the adolescent's detention using
29 the procedures under RCW 71.05.201 and 71.05.203; however, when the
30 court enters an order of initial detention, except as otherwise
31 expressly stated in this chapter, all procedures must be followed as
32 if the order has been entered under (a) of this subsection.

33 (c) The interview performed by the designated crisis responder
34 may be conducted by video provided that a licensed health care
35 professional or professional person who can adequately and accurately
36 assist with obtaining any necessary information is present with the
37 person at the time of the interview.

38 (2)(a) Within twelve hours of the adolescent's arrival at the
39 evaluation and treatment facility, secure withdrawal management and

1 stabilization facility, or approved substance use disorder treatment
2 program, the designated crisis responder shall serve or cause to be
3 served on the adolescent a copy of the petition for initial
4 detention, notice of initial detention, and statement of rights. The
5 designated crisis responder shall file with the court on the next
6 judicial day following the initial detention the original petition
7 for initial detention, notice of initial detention, and statement of
8 rights along with an affidavit of service. The designated crisis
9 responder shall commence service of the petition for initial
10 detention and notice of the initial detention on the adolescent's
11 parent and the adolescent's attorney as soon as possible following
12 the initial detention.

13 (b) (~~If the adolescent is involuntarily detained at an~~
14 ~~evaluation and treatment facility, secure withdrawal management and~~
15 ~~stabilization facility, or approved substance use disorder treatment~~
16 ~~program in a different county from where the adolescent was initially~~
17 ~~detained, the)) The facility or program may serve the adolescent,
18 notify the adolescent's parents and the adolescent's attorney, and
19 file with the court on the next judicial day following the initial
20 detention the original petition for initial detention, notice of
21 initial detention, and statement of rights along with an affidavit of
22 service when filing with the court at the request of the designated
23 crisis responder.~~

24 (3) (a) At the time of initial detention, the designated crisis
25 responder shall advise the adolescent both orally and in writing that
26 if admitted to the evaluation and treatment facility, secure
27 withdrawal management and stabilization facility, or approved
28 substance use disorder treatment program for inpatient treatment, a
29 commitment hearing shall be held within one hundred twenty hours of
30 the adolescent's provisional acceptance to determine whether probable
31 cause exists to commit the adolescent for further treatment.

32 (b) The adolescent shall be advised that he or she has a right to
33 communicate immediately with an attorney and that he or she has a
34 right to have an attorney appointed to represent him or her before
35 and at the hearing if the adolescent is indigent.

36 (4) Whenever the designated crisis responder petitions for
37 detention of an adolescent under this chapter, an evaluation and
38 treatment facility, secure withdrawal management and stabilization
39 facility, or approved substance use disorder treatment program
40 providing one hundred twenty hour evaluation and treatment must

1 immediately accept on a provisional basis the petition and the
2 person. Within twenty-four hours of the adolescent's arrival, the
3 facility must evaluate the adolescent's condition and either admit or
4 release the adolescent in accordance with this chapter.

5 (5) If an adolescent is not approved for admission by the
6 inpatient evaluation and treatment facility, secure withdrawal
7 management and stabilization facility, or approved substance use
8 disorder treatment program, the facility shall make such
9 recommendations and referrals for further care and treatment of the
10 adolescent as necessary.

11 (6) Dismissal of a commitment petition is not the appropriate
12 remedy for a violation of the timeliness requirements of this
13 section, based on the purpose of this chapter under RCW 71.34.010,
14 except in the few cases where the facility staff or the designated
15 crisis responder have totally disregarded the requirements of this
16 section.

17 **Sec. 31.** RCW 71.34.720 and 2020 c 302 s 86 are each amended to
18 read as follows:

19 (1) Each minor approved by the facility for inpatient admission
20 shall be examined and evaluated by a children's mental health
21 specialist, for minors admitted as a result of a mental disorder, or
22 by a substance use disorder professional or co-occurring disorder
23 specialist, for minors admitted as a result of a substance use
24 disorder, as to the child's mental condition and by a physician,
25 physician assistant, or psychiatric advanced registered nurse
26 practitioner as to the child's physical condition within twenty-four
27 hours of admission. Reasonable measures shall be taken to ensure
28 medical treatment is provided for any condition requiring immediate
29 medical attention.

30 (2) If, (~~after~~) at any time during the involuntary treatment
31 hold and following the initial examination and evaluation, the
32 children's mental health specialist or substance use disorder
33 specialist and the physician, physician assistant, or psychiatric
34 advanced registered nurse practitioner determine that the initial
35 needs of the minor, if detained to an evaluation and treatment
36 facility, would be better served by placement in a secure withdrawal
37 management and stabilization facility or approved substance use
38 disorder treatment program or, if detained to a secure withdrawal
39 management and stabilization facility or approved substance use

1 disorder treatment program, would be better served in an evaluation
2 and treatment facility, then the minor shall be referred to the more
3 appropriate placement for the remainder of the current commitment
4 period without any need for further court review; however a minor may
5 only be referred to a secure withdrawal management and stabilization
6 facility or approved substance use disorder treatment program if
7 there is a secure withdrawal management and stabilization facility or
8 approved substance use disorder treatment program available and that
9 has adequate space for the minor.

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

12 (4) During the initial one hundred twenty hour treatment period,
13 the minor has a right to associate or receive communications from
14 parents or others unless the professional person in charge determines
15 that such communication would be seriously detrimental to the minor's
16 condition or treatment and so indicates in the minor's clinical
17 record, and notifies the minor's parents of this determination. A
18 minor must not be denied the opportunity to consult an attorney
19 unless there is an immediate risk of harm to the minor or others.

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

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

32 **Sec. 32.** RCW 71.34.720 and 2020 c 302 s 87 are each amended to
33 read as follows:

34 (1) Each minor approved by the facility for inpatient admission
35 shall be examined and evaluated by a children's mental health
36 specialist, for minors admitted as a result of a mental disorder, or
37 by a substance use disorder professional or co-occurring disorder
38 specialist, for minors admitted as a result of a substance use
39 disorder, as to the child's mental condition and by a physician,

1 physician assistant, or psychiatric advanced registered nurse
2 practitioner as to the child's physical condition within twenty-four
3 hours of admission. Reasonable measures shall be taken to ensure
4 medical treatment is provided for any condition requiring immediate
5 medical attention.

6 (2) If, (~~after~~) at any time during the involuntary treatment
7 hold and following the initial examination and evaluation, the
8 children's mental health specialist or substance use disorder
9 specialist and the physician, physician assistant, or psychiatric
10 advanced registered nurse practitioner determine that the initial
11 needs of the minor, if detained to an evaluation and treatment
12 facility, would be better served by placement in a secure withdrawal
13 management and stabilization facility or approved substance use
14 disorder treatment program or, if detained to a secure withdrawal
15 management and stabilization facility or approved substance use
16 disorder treatment program, would be better served in an evaluation
17 and treatment facility, then the minor shall be referred to the more
18 appropriate placement for the remainder of the current commitment
19 period without any need for further court review.

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

22 (4) During the initial one hundred twenty hour treatment period,
23 the minor has a right to associate or receive communications from
24 parents or others unless the professional person in charge determines
25 that such communication would be seriously detrimental to the minor's
26 condition or treatment and so indicates in the minor's clinical
27 record, and notifies the minor's parents of this determination. A
28 minor must not be denied the opportunity to consult an attorney
29 unless there is an immediate risk of harm to the minor or others.

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

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

3 NEW SECTION. **Sec. 33.** Sections 1, 3, 5, 7, 9, 13, 29, and 31 of
4 this act expire July 1, 2026.

5 NEW SECTION. **Sec. 34.** Sections 2, 4, 6, 8, 10, 14, 30, and 32
6 of this act take effect July 1, 2026.

7 NEW SECTION. **Sec. 35.** Sections 19 and 24 of this act expire
8 July 1, 2022.

9 NEW SECTION. **Sec. 36.** Sections 20 and 25 of this act take
10 effect July 1, 2022.

11 NEW SECTION. **Sec. 37.** Sections 24, 26, and 29 of this act are
12 necessary for the immediate preservation of the public peace, health,
13 or safety, or support of the state government and its existing public
14 institutions, and take effect immediately.

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