S-3751.1				

SENATE BILL 6234

State of Washington 62nd Legislature 2012 Regular Session

By Senators Honeyford and Stevens

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Read first time 01/16/12. Referred to Committee on Human Services & Corrections.

- AN ACT Relating to the involuntary medication of persons committed
- 2 as criminally insane; and adding a new section to chapter 10.77 RCW.
- 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 4 <u>NEW SECTION.</u> **Sec. 1.** A new section is added to chapter 10.77 RCW to read as follows:
 - (1) A state hospital may administer antipsychotic medication without consent to an individual who is committed under this chapter as criminally insane by following the same procedures applicable to the administration of antipsychotic medication without consent to a civilly committed patient under RCW 71.05.217, except for the following:
 - (a) The maximum period during which the court may authorize the administration of medication without consent under a single involuntary medication petition shall be the time remaining on the individual's current order of commitment or one hundred eighty days, whichever is shorter; and
- 16 (b) A petition for involuntary medication may be filed in either 17 the superior court of the county that ordered the commitment or the 18 superior court of the county in which the individual is receiving 19 treatment, provided that a copy of any order that is entered must be

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provided to the superior court of the county that ordered the commitment following the hearing. The superior court of the county of commitment shall retain exclusive jurisdiction over all hearings concerning the release of the patient.

 (2) The state has a compelling interest in providing antipsychotic medication to a patient who has been committed as criminally insane when refusal of antipsychotic medication would result in a likelihood of serious harm or substantial deterioration or substantially prolong the length of involuntary commitment and there is no less intrusive course of treatment than medication in the best interest of the patient.

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