

# SENATE BILL REPORT

## SB 6749

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As Reported By Senate Committee On:  
Human Services & Corrections, February 3, 2000  
Ways & Means, February 8, 2000

**Title:** An act relating to chemical dependency.

**Brief Description:** Changing provisions relating to persons incapacitated by a chemical dependency.

**Sponsors:** Senators Long, Hargrove, Haugen, Stevens, Winsley, McAuliffe and Patterson.

**Brief History:**

**Committee Activity:** Human Services & Corrections: 2/3/2000 [DP].  
Ways & Means: 2/8/2000 [DPS].

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### SENATE COMMITTEE ON HUMAN SERVICES & CORRECTIONS

**Majority Report:** Do pass.

Signed by Senators Hargrove, Chair; Costa, Vice Chair; Franklin, Kohl-Welles, Long, Sheahan, Stevens and Zarelli.

**Staff:** Fara Daun (786-7459)

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### SENATE COMMITTEE ON WAYS & MEANS

**Majority Report:** That Substitute Senate Bill No. 6749 be substituted therefor, and the substitute bill do pass.

Signed by Senators Loveland, Chair; Bauer, Vice Chair; Brown, Vice Chair; Fraser, Honeyford, Kline, Long, Rasmussen, Rossi, B. Sheldon, Snyder, Spanel, Winsley, Wojahn and Zarelli.

**Staff:** Brian Sims (786-7431)

**Background:** Current chemical dependency involuntary treatment law permits the county designated chemical dependency specialist (CDCDS) to detain a person who is gravely disabled or who presents a likelihood of serious harm for a 72-hour evaluation, but only allows a petition for commitment to involuntary treatment to be filed on the basis that the person is incapacitated. An incapacitated person is defined as one who has his or her judgment so impaired that the person is incapable of making a rational decision about his or her need for treatment and presents a likelihood of serious harm. A person must meet both portions of the definition. This has resulted in a situation where very few persons receive involuntary treatment without agreeing to it. In addition, neither the CDCDS nor a peace officer can remove a gravely disabled person from private property unless they present a likelihood of serious harm, in which case the peace officer must remove the person. A gravely disabled person can be removed from public property.

**Summary of Substitute Bill:** A CDCDS may file an involuntary treatment petition because a person is gravely disabled due to alcohol or drug abuse or because the person presents a likelihood of serious harm. The definition of incapacitated includes gravely disabled persons and persons who present a likelihood of serious harm. A person does not have to meet both standards to be incapacitated. The definition of likelihood of serious harm is conformed to the definition in the mental health involuntary treatment statutes.

**Substitute Bill Compared to Original Bill:** The provision allowing CDCDS or police to remove a person who is gravely disabled but not in a public place is deleted.

**Appropriation:** None.

**Fiscal Note:** Available for original bill.

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

**Testimony For:** This is needed policy. Approximately 10 percent of state hospital patients are chemically dependent with no mental disorder but present a serious enough risk that they are committed under the mental health statutes because there is no other recourse. The public also pays for the costs for these persons through a variety of other avenues, in which the person is not treated for the chemical dependency and continues to recycle through the system. In King County in 1999, the 36 highest utilizers were admitted to jail 64 times totaling 1114 jail days, had 618 admissions to Harborview Emergency, spent 250 days in detoxification services, and were admitted to sobering services 3,254 times. Only three were sent for involuntary treatment. The 1999 public expense for these 36 persons, not including the costs of transport, costs of inpatient medical treatment, or legal costs for involuntary commitment, was \$724,739.

Case histories demonstrate the fiscal and human costs when involuntary treatment is not available. In one case, a 50 year-old woman with serious diseases such as liver and renal failure and alcohol related cancer is on Medicaid and Medicare. She has a significant history of long hospital admissions including five long-term intensive care admissions since the spring of 1999. She is still in denial about her alcoholism and needs involuntary treatment. In a second case, an indigent man is regularly admitted to a variety of emergency rooms for acute alcohol poisoning at public expense. He also has several DUI convictions for which he has served jail time. Because he drinks immediately on release from the hospital and his pattern is to drink and drive, his family recently resorted to filing a complaint with the prosecutor. He is presently not in jail or treatment and family is fearful for his life and the lives of others. He is also unable to work and \$5,000 in arrears on child support.

**Testimony Against:** It is not in the Governor's budget.

**Testified:** Charles J. Mayer, M.D., Puget Sound Neighborhood Health Center (pro); Annon Shoenfeld, Coordinator, King County Crisis Services (pro); Yvonne Ward (pro); Ken Stark, Director, Division of Alcohol and Substance Abuse (con).