SENATE BILL 6445

State of Washington

64th Legislature

2016 Regular Session

By Senators Braun and Angel

Read first time 01/20/16. Referred to Committee on Health Care.

- AN ACT Relating to clarifying the role of physician assistants in the delivery of mental health services; amending RCW 71.05.230;
- 3 reenacting and amending RCW 71.05.020; and adding a new section to
- 4 chapter 71.05 RCW.

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- 5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 6 **Sec. 1.** RCW 71.05.020 and 2015 c 269 s 14 and 2015 c 250 s 2 are each reenacted and amended to read as follows:
- 8 The definitions in this section apply throughout this chapter 9 unless the context clearly requires otherwise.
- 10 (1) "Admission" or "admit" means a decision by a physician or 11 psychiatric advanced registered nurse practitioner that a person 12 should be examined or treated as a patient in a hospital;
 - (2) "Antipsychotic medications" means that class of drugs primarily used to treat serious manifestations of mental illness associated with thought disorders, which includes, but is not limited to atypical antipsychotic medications;
- 17 (3) "Attending staff" means any person on the staff of a public 18 or private agency having responsibility for the care and treatment of 19 a patient;

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

- (5) "Conditional release" means a revocable modification of a commitment, which may be revoked upon violation of any of its terms;
- (6) "Crisis stabilization unit" means a short-term facility or a portion of a facility licensed by the department of health and certified by the department of social and health services under RCW 71.24.035, such as an evaluation and treatment facility or a hospital, which has been designed to assess, diagnose, and treat individuals experiencing an acute crisis without the use of long-term hospitalization;
- (7) "Custody" means involuntary detention under the provisions of this chapter or chapter 10.77 RCW, uninterrupted by any period of unconditional release from commitment from a facility providing involuntary care and treatment;
- (8) "Department" means the department of social and health services;
 - (9) "Designated chemical dependency specialist" means a person designated by the county alcoholism and other drug addiction program coordinator designated under RCW 70.96A.310 to perform the commitment duties described in chapters 70.96A and 70.96B RCW;
 - (10) "Designated crisis responder" means a mental health professional appointed by the county or the behavioral health organization to perform the duties specified in this chapter;
 - (11) "Designated mental health professional" means a mental health professional designated by the county or other authority authorized in rule to perform the duties specified in this chapter;
- 29 (12) "Detention" or "detain" means the lawful confinement of a 30 person, under the provisions of this chapter;
 - (13) "Developmental disabilities professional" means a person who has specialized training and three years of experience in directly treating or working with persons with developmental disabilities and is a psychiatrist, psychologist, psychiatric advanced registered nurse practitioner, or social worker, and such other developmental disabilities professionals as may be defined by rules adopted by the secretary;
- 38 (14) "Developmental disability" means that condition defined in 39 RCW 71A.10.020(5);

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

- (16) "Evaluation and treatment facility" means any facility which can provide directly, or by direct arrangement with other public or private agencies, emergency evaluation and treatment, outpatient care, and timely and appropriate inpatient care to persons suffering from a mental disorder, and which is certified as such by the department. The department may certify single beds as temporary evaluation and treatment beds under RCW 71.05.745. A physically separate and separately operated portion of a state hospital may be designated as an evaluation and treatment facility. A facility which is part of, or operated by, the department or any federal agency will not require certification. No correctional institution or facility, or jail, shall be an evaluation and treatment facility within the meaning of this chapter;
 - (17) "Gravely disabled" means a condition in which a person, as a result of a mental disorder: (a) Is in danger of serious physical harm resulting from a failure to provide for his or her essential human needs of health or safety; or (b) manifests severe deterioration in routine functioning evidenced by repeated and escalating loss of cognitive or volitional control over his or her actions and is not receiving such care as is essential for his or her health or safety;
 - (18) "Habilitative services" means those services provided by program personnel to assist persons in acquiring and maintaining life skills and in raising their levels of physical, mental, social, and vocational functioning. Habilitative services include education, training for employment, and therapy. The habilitative process shall be undertaken with recognition of the risk to the public safety presented by the person being assisted as manifested by prior charged criminal conduct;
- (19) "History of one or more violent acts" refers to the period of time ten years prior to the filing of a petition under this chapter, excluding any time spent, but not any violent acts committed, in a mental health facility or in confinement as a result of a criminal conviction;
- 38 (20) "Imminent" means the state or condition of being likely to occur at any moment or near at hand, rather than distant or remote;

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- 1 (21) "In need of assisted outpatient mental health treatment" means that a person, as a result of a mental disorder: (a) Has been 2 committed by a court to detention for involuntary mental health 3 treatment at least twice during the preceding thirty-six months, or, 4 if the person is currently committed for involuntary mental health 5 6 treatment, the person has been committed to detention for involuntary 7 mental health treatment at least once during the thirty-six months preceding the date of initial detention of the current commitment 8 cycle; (b) is unlikely to voluntarily participate in outpatient 9 treatment without an order for less restrictive alternative 10 11 treatment, in view of the person's treatment history or current 12 behavior; (c) is unlikely to survive safely in the community without likely to benefit from 13 supervision; (d) is less restrictive 14 alternative treatment; and (e) requires less restrictive alternative treatment to prevent a relapse, decompensation, or deterioration that 15 16 is likely to result in the person presenting a likelihood of serious 17 harm or the person becoming gravely disabled within a reasonably 18 short period of time. For purposes of (a) of this subsection, time 19 spent in a mental health facility or in confinement as a result of a 20 criminal conviction is excluded from the thirty-six month 21 calculation;
 - (22) "Individualized service plan" means a plan prepared by a developmental disabilities professional with other professionals as a team, for a person with developmental disabilities, which shall state:

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- (a) The nature of the person's specific problems, prior charged criminal behavior, and habilitation needs;
- 28 (b) The conditions and strategies necessary to achieve the 29 purposes of habilitation;
- 30 (c) The intermediate and long-range goals of the habilitation grogram, with a projected timetable for the attainment;
 - (d) The rationale for using this plan of habilitation to achieve those intermediate and long-range goals;
 - (e) The staff responsible for carrying out the plan;
- 35 (f) Where relevant in light of past criminal behavior and due 36 consideration for public safety, the criteria for proposed movement 37 to less-restrictive settings, criteria for proposed eventual 38 discharge or release, and a projected possible date for discharge or 39 release; and

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- 1 (g) The type of residence immediately anticipated for the person 2 and possible future types of residences;
 - (23) "Information related to mental health services" means all information and records compiled, obtained, or maintained in the course of providing services to either voluntary or involuntary recipients of services by a mental health service provider. This may include documents of legal proceedings under this chapter or chapter 71.34 or 10.77 RCW, or somatic health care information;
- 9 (24) "Judicial commitment" means a commitment by a court pursuant 10 to the provisions of this chapter;
 - (25) "Legal counsel" means attorneys and staff employed by county prosecutor offices or the state attorney general acting in their capacity as legal representatives of public mental health service providers under RCW 71.05.130;
 - (26) "Less restrictive alternative treatment" means a program of individualized treatment in a less restrictive setting than inpatient treatment that includes the services described in RCW 71.05.585;
 - (27) "Likelihood of serious harm" means:

- (a) A substantial risk that: (i) Physical harm will be inflicted by a person upon his or her own person, as evidenced by threats or attempts to commit suicide or inflict physical harm on oneself; (ii) physical harm will be inflicted by a person upon another, as evidenced by behavior which has caused such harm or which places another person or persons in reasonable fear of sustaining such harm; or (iii) physical harm will be inflicted by a person upon the property of others, as evidenced by behavior which has caused substantial loss or damage to the property of others; or
- (b) The person has threatened the physical safety of another and has a history of one or more violent acts;
- (28) "Medical clearance" means a physician or other health care provider has determined that a person is medically stable and ready for referral to the designated mental health professional;
- (29) "Mental disorder" means any organic, mental, or emotional impairment which has substantial adverse effects on a person's cognitive or volitional functions;
- (30) "Mental health professional" means a psychiatrist, psychologist, physician assistant with psychiatric supervision, psychiatric advanced registered nurse practitioner, psychiatric nurse, or social worker, and such other mental health professionals

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as may be defined by rules adopted by the secretary pursuant to the provisions of this chapter;

- (31) "Mental health service provider" means a public or private agency that provides mental health services to persons with mental disorders as defined under this section and receives funding from public sources. This includes, but is not limited to, hospitals licensed under chapter 70.41 RCW, evaluation and treatment facilities as defined in this section, community mental health service delivery systems or community mental health programs as defined in RCW 71.24.025, facilities conducting competency evaluations and restoration under chapter 10.77 RCW, and correctional facilities operated by state and local governments;
- (32) "Peace officer" means a law enforcement official of a public agency or governmental unit, and includes persons specifically given peace officer powers by any state law, local ordinance, or judicial order of appointment;
- (33) "Private agency" means any person, partnership, corporation, or association that is not a public agency, whether or not financed in whole or in part by public funds, which constitutes an evaluation and treatment facility or private institution, or hospital, which is conducted for, or includes a department or ward conducted for, the care and treatment of persons who are mentally ill;
- (34) "Professional person" means a mental health professional and shall also mean a physician, psychiatric advanced registered nurse practitioner, registered nurse, and such others as may be defined by rules adopted by the secretary pursuant to the provisions of this chapter;
- (35) "Psychiatric advanced registered nurse practitioner" means a person who is licensed as an advanced registered nurse practitioner pursuant to chapter 18.79 RCW; and who is board certified in advanced practice psychiatric and mental health nursing;
- (36) "Psychiatrist" means a person having a license as a physician and surgeon in this state who has in addition completed three years of graduate training in psychiatry in a program approved by the American medical association or the American osteopathic association and is certified or eligible to be certified by the American board of psychiatry and neurology;
- 38 (37) "Psychologist" means a person who has been licensed as a psychologist pursuant to chapter 18.83 RCW;

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(38) "Public agency" means any evaluation and treatment facility or institution, or hospital which is conducted for, or includes a department or ward conducted for, the care and treatment of persons with mental illness, if the agency is operated directly by, federal, state, county, or municipal government, or a combination of such governments;

- (39) "Registration records" include all the records of the department, behavioral health organizations, treatment facilities, and other persons providing services to the department, county departments, or facilities which identify persons who are receiving or who at any time have received services for mental illness;
- 12 (40) "Release" means legal termination of the commitment under 13 the provisions of this chapter;
- 14 (41) "Resource management services" has the meaning given in chapter 71.24 RCW;
- 16 (42) "Secretary" means the secretary of the department of social 17 and health services, or his or her designee;
- 18 (43) "Serious violent offense" has the same meaning as provided 19 in RCW 9.94A.030;
- 20 (44) "Social worker" means a person with a master's or further 21 advanced degree from a social work educational program accredited and 22 approved as provided in RCW 18.320.010;
 - (45) "Therapeutic court personnel" means the staff of a mental health court or other therapeutic court which has jurisdiction over defendants who are dually diagnosed with mental disorders, including court personnel, probation officers, a court monitor, prosecuting attorney, or defense counsel acting within the scope of therapeutic court duties;
 - (46) "Treatment records" include registration and all other records concerning persons who are receiving or who at any time have received services for mental illness, which are maintained by the department, by behavioral health organizations and their staffs, and by treatment facilities. Treatment records include mental health information contained in a medical bill including but not limited to mental health drugs, a mental health diagnosis, provider name, and dates of service stemming from a medical service. Treatment records do not include notes or records maintained for personal use by a person providing treatment services for the department, behavioral health organizations, or a treatment facility if the notes or records are not available to others;

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

- 9 (48) "Violent act" means behavior that resulted in homicide, 10 attempted suicide, nonfatal injuries, or substantial damage to 11 property;
- 12 (49) "Physician assistant with psychiatric supervision" means a 13 physician assistant licensed under chapter 18.71A RCW who works under 14 the supervision of a psychiatrist licensed under chapter 18.71 RCW.
- **Sec. 2.** RCW 71.05.230 and 2015 c 250 s 6 are each amended to 16 read as follows:

A person detained or committed for seventy-two hour evaluation and treatment or for an outpatient evaluation for the purpose of filing a petition for a less restrictive alternative treatment order may be committed for not more than fourteen additional days of involuntary intensive treatment or ninety additional days of a less restrictive alternative to involuntary intensive treatment. A petition may only be filed if the following conditions are met:

- (1) The professional staff of the agency or facility providing evaluation services has analyzed the person's condition and finds that the condition is caused by mental disorder and results in a likelihood of serious harm, results in the person being gravely disabled, or results in the person being in need of assisted outpatient mental health treatment, and are prepared to testify those conditions are met; and
- (2) The person has been advised of the need for voluntary treatment and the professional staff of the facility has evidence that he or she has not in good faith volunteered; and
- (3) The agency or facility providing intensive treatment or which proposes to supervise the less restrictive alternative is certified to provide such treatment by the department; and
- (4) The professional staff of the agency or facility or the designated mental health professional has filed a petition with the

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1 court for a fourteen day involuntary detention or a ninety day less 2 restrictive alternative. The petition must be signed either by:

(a) Two physicians;

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- (b) One physician and a mental health professional;
- (c) One physician assistant and a mental health professional;
 - (d) Two physician assistants with psychiatric supervision;
 - (e) Two psychiatric advanced registered nurse practitioners;
- 8 $((\frac{d}{d}))$ One psychiatric advanced registered nurse practitioner and a mental health professional; or
 - (((e))) <u>(g)</u> A physician and a psychiatric advanced registered nurse practitioner or a physician assistant with psychiatric supervision. The persons signing the petition must have examined the person. If involuntary detention is sought the petition shall state facts that support the finding that such person, as a result of mental disorder, presents a likelihood of serious harm, or is gravely disabled and that there are no less restrictive alternatives to detention in the best interest of such person or others. The petition shall state specifically that less restrictive alternative treatment was considered and specify why treatment less restrictive than detention is not appropriate. If an involuntary less restrictive alternative is sought, the petition shall state facts that support the finding that such person, as a result of mental disorder, presents a likelihood of serious harm, is gravely disabled, or is in need of assisted outpatient mental health treatment, and shall set forth a plan for the less restrictive alternative treatment proposed by the facility in accordance with RCW 71.05.585; and
 - (5) A copy of the petition has been served on the detained or committed person, his or her attorney and his or her guardian or conservator, if any, prior to the probable cause hearing; and
 - (6) The court at the time the petition was filed and before the probable cause hearing has appointed counsel to represent such person if no other counsel has appeared; and
 - (7) The petition reflects that the person was informed of the loss of firearm rights if involuntarily committed; and
 - (8) At the conclusion of the initial commitment period, the professional staff of the agency or facility or the designated mental health professional may petition for an additional period of either ninety days of less restrictive alternative treatment or ninety days of involuntary intensive treatment as provided in RCW 71.05.290; and

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(9) If the hospital or facility designated to provide less restrictive alternative treatment is other than the facility providing involuntary treatment, the outpatient facility so designated to provide less restrictive alternative treatment has agreed to assume such responsibility.

- 6 <u>NEW SECTION.</u> **Sec. 3.** A new section is added to chapter 71.05 7 RCW to read as follows:
- 8 Department rules on agencies providing psychiatric medication 9 services must be updated to include physician assistants as follows:
 - (1) Medical direction and responsibility may be assigned to a physician assistant with psychiatric supervision;
 - (2) If prescribed by a physician assistant with psychiatric supervision, clinical notes in an individual clinical record must include the name and signature of the prescribing physician assistant with psychiatric supervision;
 - (3) Physician assistants may be utilized if the agency is unable to employ or contract with a psychiatrist if psychiatrist consultation is provided to the physician assistant at least monthly and the psychiatrist is accessible to the physician assistant for emergency consultation; and
 - (4) For court-ordered less restrictive alternative support services, rules must be updated to reflect that physician assistants with psychiatric supervision may determine the schedule for an individual to receive services for the assessment and prescription of psychotropic medication appropriate to the needs of the individual.

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