
ENGROSSED SECOND SUBSTITUTE SENATE BILL 5720

State of Washington

66th Legislature

2019 Regular Session

By Senate Ways & Means (originally sponsored by Senators Dhingra, Wagoner, Kuderer, and Nguyen)

READ FIRST TIME 03/01/19.

1 AN ACT Relating to the involuntary treatment act; amending RCW
2 71.05.010, 71.05.012, 71.05.025, 71.05.026, 71.05.027, 71.05.030,
3 71.05.040, 71.05.050, 71.05.100, 71.05.132, 71.05.150, 71.05.150,
4 71.05.150, 71.05.153, 71.05.153, 71.05.153, 71.05.160, 71.05.170,
5 71.05.180, 71.05.190, 71.05.195, 71.05.201, 71.05.210, 71.05.210,
6 71.05.212, 71.05.214, 71.05.215, 71.05.217, 71.05.217, 71.05.230,
7 71.05.230, 71.05.235, 71.05.235, 71.05.280, 71.05.290, 71.05.300,
8 71.05.310, 71.05.320, 71.05.320, 71.05.380, 71.05.445, 71.05.455,
9 71.05.457, 71.05.458, 71.05.525, 71.05.530, 71.05.585, 71.05.720,
10 71.05.740, 71.05.745, 71.05.750, 71.05.750, 71.05.760, 71.34.010,
11 71.34.020, 71.34.305, 71.34.310, 71.34.355, 71.34.365, 71.34.410,
12 71.34.420, 71.34.500, 71.34.600, 71.34.600, 71.34.650, 71.34.700,
13 71.34.700, 71.34.710, 71.34.710, 71.34.710, 71.34.720, 71.34.720,
14 71.34.720, 71.34.740, 71.34.740, 71.34.740, 71.34.750, 71.34.780, and
15 71.34.780; reenacting and amending RCW 71.05.020, 71.05.120,
16 71.05.240, 71.05.240, 71.05.240, 71.05.590, 71.05.590, 71.05.590,
17 71.34.730, 71.34.730, and 71.34.750; adding new sections to chapter
18 71.05 RCW; adding new sections to chapter 71.34 RCW; recodifying RCW
19 71.05.525; repealing RCW 71.05.360 and 71.34.370; providing effective
20 dates; and providing expiration dates.

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

1 **Sec. 1.** RCW 71.05.010 and 2016 sp.s. c 29 s 203 are each amended
2 to read as follows:

3 (1) The provisions of this chapter apply to persons who are
4 eighteen years of age or older and are intended by the legislature:

5 (a) To protect the health and safety of persons suffering from
6 (~~mental disorders and substance use~~) behavioral health disorders
7 and to protect public safety through use of the parens patriae and
8 police powers of the state;

9 (b) To prevent inappropriate, indefinite commitment of (~~mentally~~
10 ~~disordered persons and persons with substance use disorders~~) persons
11 living with behavioral health disorders and to eliminate legal
12 disabilities that arise from such commitment;

13 (c) To provide prompt evaluation and timely and appropriate
14 treatment of persons with serious (~~mental disorders and substance~~
15 ~~use~~) behavioral health disorders;

16 (d) To safeguard individual rights;

17 (e) To provide continuity of care for persons with serious
18 (~~mental disorders and substance use~~) behavioral health disorders;

19 (f) To encourage the full use of all existing agencies,
20 professional personnel, and public funds to prevent duplication of
21 services and unnecessary expenditures; and

22 (g) To encourage, whenever appropriate, that services be provided
23 within the community.

24 (2) When construing the requirements of this chapter the court
25 must focus on the merits of the petition, except where requirements
26 have been totally disregarded, as provided in *In re C.W.*, 147 Wn.2d
27 259, 281 (2002). A presumption in favor of deciding petitions on
28 their merits furthers both public and private interests because the
29 mental and physical well-being of individuals as well as public
30 safety may be implicated by the decision to release an individual and
31 discontinue his or her treatment.

32 **Sec. 2.** RCW 71.05.012 and 1997 c 112 s 1 are each amended to
33 read as follows:

34 It is the intent of the legislature to enhance continuity of care
35 for persons with serious (~~mental~~) behavioral health disorders that
36 can be controlled or stabilized in a less restrictive alternative
37 commitment. Within the guidelines stated in *In re LaBelle* 107 Wn. 2d
38 196 (1986), the legislature intends to encourage appropriate

1 interventions at a point when there is the best opportunity to
2 restore the person to or maintain satisfactory functioning.

3 For persons with a prior history or pattern of repeated
4 hospitalizations or law enforcement interventions due to
5 decompensation, the consideration of prior (~~mental~~) history is
6 particularly relevant in determining whether the person would
7 receive, if released, such care as is essential for his or her health
8 or safety.

9 Therefore, the legislature finds that for persons who are
10 currently under a commitment order, a prior history of decompensation
11 leading to repeated hospitalizations or law enforcement interventions
12 should be given great weight in determining whether a new less
13 restrictive alternative commitment should be ordered.

14 **Sec. 3.** RCW 71.05.020 and 2018 c 305 s 1, 2018 c 291 s 1, and
15 2018 c 201 s 3001 are each reenacted and 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) (~~"Chemical dependency" means:~~
2 ~~(a) Alcoholism;~~
3 ~~(b) Drug addiction; or~~
4 ~~(c) Dependence on alcohol and one or more psychoactive chemicals,~~
5 ~~as the context requires;~~
6 ~~(8))~~) "Chemical dependency professional" means a person certified
7 as a chemical dependency professional by the department under chapter
8 18.205 RCW;
9 ~~((9))~~ (8) "Commitment" means the determination by a court that
10 a person should be detained for a period of either evaluation or
11 treatment, or both, in an inpatient or a less restrictive setting;
12 ~~((10))~~ (9) "Conditional release" means a revocable modification
13 of a commitment, which may be revoked upon violation of any of its
14 terms;
15 ~~((11))~~ (10) "Crisis stabilization unit" means a short-term
16 facility or a portion of a facility licensed or certified by the
17 department under RCW 71.24.035, such as an evaluation and treatment
18 facility or a hospital, which has been designed to assess, diagnose,
19 and treat individuals experiencing an acute crisis without the use of
20 long-term hospitalization;
21 ~~((12))~~ (11) "Custody" means involuntary detention under the
22 provisions of this chapter or chapter 10.77 RCW, uninterrupted by any
23 period of unconditional release from commitment from a facility
24 providing involuntary care and treatment;
25 ~~((13))~~ (12) "Department" means the department of health;
26 ~~((14))~~ (13) "Designated crisis responder" means a mental health
27 professional appointed by the county, an entity appointed by the
28 county, or the behavioral health organization to perform the duties
29 specified in this chapter;
30 ~~((15))~~ (14) "Detention" or "detain" means the lawful
31 confinement of a person, under the provisions of this chapter;
32 ~~((16))~~ (15) "Developmental disabilities professional" means a
33 person who has specialized training and three years of experience in
34 directly treating or working with persons with developmental
35 disabilities and is a psychiatrist, physician assistant working with
36 a supervising psychiatrist, psychologist, psychiatric advanced
37 registered nurse practitioner, or social worker, and such other
38 developmental disabilities professionals as may be defined by rules
39 adopted by the secretary of the department of social and health
40 services;

1 ~~((17))~~ (16) "Developmental disability" means that condition
2 defined in RCW 71A.10.020(5);

3 ~~((18))~~ (17) "Director" means the director of the authority;

4 ~~((19))~~ (18) "Discharge" means the termination of hospital
5 medical authority. The commitment may remain in place, be terminated,
6 or be amended by court order;

7 ~~((20))~~ (19) "Drug addiction" means a disease, characterized by
8 a dependency on psychoactive chemicals, loss of control over the
9 amount and circumstances of use, symptoms of tolerance, physiological
10 or psychological withdrawal, or both, if use is reduced or
11 discontinued, and impairment of health or disruption of social or
12 economic functioning;

13 ~~((21))~~ (20) "Evaluation and treatment facility" means any
14 facility which can provide directly, or by direct arrangement with
15 other public or private agencies, emergency evaluation and treatment,
16 outpatient care, and timely and appropriate inpatient care to persons
17 suffering from a mental disorder, and which is licensed or certified
18 as such by the department. The authority may certify single beds as
19 temporary evaluation and treatment beds under RCW 71.05.745. A
20 physically separate and separately operated portion of a state
21 hospital may be designated as an evaluation and treatment facility. A
22 facility which is part of, or operated by, the department of social
23 and health services or any federal agency will not require
24 certification. No correctional institution or facility, or jail,
25 shall be an evaluation and treatment facility within the meaning of
26 this chapter;

27 ~~((22))~~ (21) "Gravely disabled" means a condition in which a
28 person, as a result of a ~~((mental))~~ behavioral health disorder ~~((, or
29 as a result of the use of alcohol or other psychoactive chemicals))~~):
30 (a) Is in danger of serious physical harm resulting from a failure to
31 provide for his or her essential human needs of health or safety; or
32 (b) manifests severe deterioration ~~((in routine functioning))~~ from
33 safe behavior evidenced by repeated and escalating loss of cognitive
34 or volitional control over his or her actions and is not receiving
35 such care as is essential for his or her health or safety;

36 ~~((23))~~ (22) "Habilitative services" means those services
37 provided by program personnel to assist persons in acquiring and
38 maintaining life skills and in raising their levels of physical,
39 mental, social, and vocational functioning. Habilitative services
40 include education, training for employment, and therapy. The

1 habilitative process shall be undertaken with recognition of the risk
2 to the public safety presented by the person being assisted as
3 manifested by prior charged criminal conduct;

4 ~~((24))~~ (23) "Hearing" means any proceeding conducted in open
5 court ~~((. For purposes of this chapter, at any hearing the petitioner,~~
6 ~~the respondent, the witnesses, and the presiding judicial officer may~~
7 ~~be present and participate either in person or by video, as~~
8 ~~determined by the court. The term "video" as used herein shall~~
9 ~~include any functional equivalent. At any hearing conducted by video,~~
10 ~~the technology used must permit the judicial officer, counsel, all~~
11 ~~parties, and the witnesses to be able to see, hear, and speak, when~~
12 ~~authorized, during the hearing; to allow attorneys to use exhibits or~~
13 ~~other materials during the hearing; and to allow respondent's counsel~~
14 ~~to be in the same location as the respondent unless otherwise~~
15 ~~requested by the respondent or the respondent's counsel. Witnesses in~~
16 ~~a proceeding may also appear in court through other means, including~~
17 ~~telephonically, pursuant to the requirements of superior court civil~~
18 ~~rule 43. Notwithstanding the foregoing, the court, upon its own~~
19 ~~motion or upon a motion for good cause by any party, may require all~~
20 ~~parties and witnesses to participate in the hearing in person rather~~
21 ~~than by video. In ruling on any such motion, the court may allow in-~~
22 ~~person or video testimony; and the court may consider, among other~~
23 ~~things, whether the respondent's alleged mental illness affects the~~
24 ~~respondent's ability to perceive or participate in the proceeding by~~
25 ~~video)) that conforms to the requirements of section 100 of this act;~~

26 ~~((25))~~ (24) "History of one or more violent acts" refers to the
27 period of time ten years prior to the filing of a petition under this
28 chapter, excluding any time spent, but not any violent acts
29 committed, in a ~~((mental))~~ behavioral health facility ~~((, a long-term~~
30 ~~alcoholism or drug treatment facility)), or in confinement as a~~
31 result of a criminal conviction;

32 ~~((26))~~ (25) "Imminent" means the state or condition of being
33 likely to occur at any moment or near at hand, rather than distant or
34 remote;

35 ~~((27))~~ (26) "Individualized service plan" means a plan prepared
36 by a developmental disabilities professional with other professionals
37 as a team, for a person with developmental disabilities, which shall
38 state:

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

1 (b) The conditions and strategies necessary to achieve the
2 purposes of habilitation;

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

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

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

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

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

15 ~~((28))~~ (27) "Information related to ~~((mental))~~ behavioral
16 health services" means all information and records compiled,
17 obtained, or maintained in the course of providing services to either
18 voluntary or involuntary recipients of services by a ~~((mental))~~
19 behavioral health service provider. This may include documents of
20 legal proceedings under this chapter or chapter 71.34 or 10.77 RCW,
21 or somatic health care information;

22 ~~((29))~~ (28) "Intoxicated person" means a person whose mental or
23 physical functioning is substantially impaired as a result of the use
24 of alcohol or other psychoactive chemicals;

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

39 ~~((31))~~ (30) "Judicial commitment" means a commitment by a court
40 pursuant to the provisions of this chapter;

1 (~~(32)~~) (31) "Legal counsel" means attorneys and staff employed
2 by county prosecutor offices or the state attorney general acting in
3 their capacity as legal representatives of public (~~(mental)~~)
4 behavioral health (~~(and substance use disorder)~~) service providers
5 under RCW 71.05.130;

6 (~~(33)~~) (32) "Less restrictive alternative treatment" means a
7 program of individualized treatment in a less restrictive setting
8 than inpatient treatment that includes the services described in RCW
9 71.05.585;

10 (~~(34)~~) (33) "Licensed physician" means a person licensed to
11 practice medicine or osteopathic medicine and surgery in the state of
12 Washington;

13 (~~(35)~~) (34) "Likelihood of serious harm" means:

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

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

26 (~~(36)~~) (35) "Medical clearance" means a physician or other
27 health care provider has determined that a person is medically stable
28 and ready for referral to the designated crisis responder;

29 (~~(37)~~) (36) "Mental disorder" means any organic, mental, or
30 emotional impairment which has substantial adverse effects on a
31 person's cognitive or volitional functions;

32 (~~(38)~~) (37) "Mental health professional" means a psychiatrist,
33 psychologist, physician assistant working with a supervising
34 psychiatrist, psychiatric advanced registered nurse practitioner,
35 psychiatric nurse, or social worker, and such other mental health
36 professionals as may be defined by rules adopted by the secretary
37 pursuant to the provisions of this chapter;

38 (~~(39)~~) (38) "~~(Mental)~~ Behavioral health service provider"
39 means a public or private agency that provides mental health,
40 substance use disorder, or co-occurring disorder services to persons

1 with (~~mental disorders or substance use~~) behavioral health
2 disorders as defined under this section and receives funding from
3 public sources. This includes, but is not limited to, hospitals
4 licensed under chapter 70.41 RCW, evaluation and treatment facilities
5 as defined in this section, community mental health service delivery
6 systems or behavioral health programs as defined in RCW 71.24.025,
7 facilities conducting competency evaluations and restoration under
8 chapter 10.77 RCW, approved substance use disorder treatment programs
9 as defined in this section, secure detoxification facilities as
10 defined in this section, and correctional facilities operated by
11 state and local governments;

12 (~~(40)~~) (39) "Peace officer" means a law enforcement official of
13 a public agency or governmental unit, and includes persons
14 specifically given peace officer powers by any state law, local
15 ordinance, or judicial order of appointment;

16 (~~(41)~~) (40) "Physician assistant" means a person licensed as a
17 physician assistant under chapter 18.57A or 18.71A RCW;

18 (~~(42)~~) (41) "Private agency" means any person, partnership,
19 corporation, or association that is not a public agency, whether or
20 not financed in whole or in part by public funds, which constitutes
21 an evaluation and treatment facility or private institution, or
22 hospital, or approved substance use disorder treatment program, which
23 is conducted for, or includes a department or ward conducted for, the
24 care and treatment of persons with (~~mental illness, substance use~~
25 ~~disorders, or both mental illness and substance use~~) behavioral
26 health disorders;

27 (~~(43)~~) (42) "Professional person" means a mental health
28 professional, chemical dependency professional, or designated crisis
29 responder and shall also mean a physician, physician assistant,
30 psychiatric advanced registered nurse practitioner, registered nurse,
31 and such others as may be defined by rules adopted by the secretary
32 pursuant to the provisions of this chapter;

33 (~~(44)~~) (43) "Psychiatric advanced registered nurse
34 practitioner" means a person who is licensed as an advanced
35 registered nurse practitioner pursuant to chapter 18.79 RCW; and who
36 is board certified in advanced practice psychiatric and mental health
37 nursing;

38 (~~(45)~~) (44) "Psychiatrist" means a person having a license as a
39 physician and surgeon in this state who has in addition completed
40 three years of graduate training in psychiatry in a program approved

1 by the American medical association or the American osteopathic
2 association and is certified or eligible to be certified by the
3 American board of psychiatry and neurology;

4 ~~((46))~~ (45) "Psychologist" means a person who has been licensed
5 as a psychologist pursuant to chapter 18.83 RCW;

6 ~~((47))~~ (46) "Public agency" means any evaluation and treatment
7 facility or institution, secure detoxification facility, approved
8 substance use disorder treatment program, or hospital which is
9 conducted for, or includes a department or ward conducted for, the
10 care and treatment of persons with ~~((mental illness, substance use
11 disorders, or both mental illness and substance use))~~ behavioral
12 health disorders, if the agency is operated directly by federal,
13 state, county, or municipal government, or a combination of such
14 governments;

15 ~~((48))~~ (47) "Release" means legal termination of the commitment
16 under the provisions of this chapter;

17 ~~((49))~~ (48) "Resource management services" has the meaning
18 given in chapter 71.24 RCW;

19 ~~((50))~~ (49) "Secretary" means the secretary of the department
20 of health, or his or her designee;

21 ~~((51))~~ (50) "Secure detoxification facility" means a facility
22 operated by either a public or private agency or by the program of an
23 agency that:

24 (a) Provides for intoxicated persons:

25 (i) Evaluation and assessment, provided by certified chemical
26 dependency professionals;

27 (ii) Acute or subacute detoxification services; and

28 (iii) Discharge assistance provided by certified chemical
29 dependency professionals, including facilitating transitions to
30 appropriate voluntary or involuntary inpatient services or to less
31 restrictive alternatives as appropriate for the individual;

32 (b) Includes security measures sufficient to protect the
33 patients, staff, and community; and

34 (c) Is licensed or certified as such by the department of health;

35 ~~((52) "Serious violent offense" has the same meaning as provided
36 in RCW 9.94A.030;~~

37 ~~(53))~~ (51) "Social worker" means a person with a master's or
38 further advanced degree from a social work educational program
39 accredited and approved as provided in RCW 18.320.010;

1 (~~(54)~~) (52) "Substance use disorder" means a cluster of
2 cognitive, behavioral, and physiological symptoms indicating that an
3 individual continues using the substance despite significant
4 substance-related problems. The diagnosis of a substance use disorder
5 is based on a pathological pattern of behaviors related to the use of
6 the substances;

7 (~~(55)~~) (53) "Therapeutic court personnel" means the staff of a
8 mental health court or other therapeutic court which has jurisdiction
9 over defendants who are dually diagnosed with mental disorders,
10 including court personnel, probation officers, a court monitor,
11 prosecuting attorney, or defense counsel acting within the scope of
12 therapeutic court duties;

13 (~~(56)~~) (54) "Treatment records" include registration and all
14 other records concerning persons who are receiving or who at any time
15 have received services for (~~(mental illness)~~) behavioral health
16 disorders, which are maintained by the department of social and
17 health services, the department, the authority, behavioral health
18 organizations and their staffs, and by treatment facilities.
19 Treatment records include mental health information contained in a
20 medical bill including but not limited to mental health drugs, a
21 mental health diagnosis, provider name, and dates of service stemming
22 from a medical service. Treatment records do not include notes or
23 records maintained for personal use by a person providing treatment
24 services for the department of social and health services, the
25 department, the authority, behavioral health organizations, or a
26 treatment facility if the notes or records are not available to
27 others;

28 (~~(57)~~) (55) "Triage facility" means a short-term facility or a
29 portion of a facility licensed or certified by the department under
30 RCW 71.24.035, which is designed as a facility to assess and
31 stabilize an individual or determine the need for involuntary
32 commitment of an individual, and must meet department residential
33 treatment facility standards. A triage facility may be structured as
34 a voluntary or involuntary placement facility;

35 (~~(58)~~) (56) "Violent act" means behavior that resulted in
36 homicide, attempted suicide, (~~(nonfatal injuries)~~) injury, or
37 substantial loss or damage to property;

38 (57) "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 (58) "Severe deterioration from safe behavior" means that a
4 person will, if not treated, suffer or continue to suffer severe and
5 abnormal mental, emotional, or physical distress, and this distress
6 is associated with significant impairment of judgment, reason, or
7 behavior;

8 (59) "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. 4.** RCW 71.05.025 and 2016 sp.s. c 29 s 205 are each amended
14 to read as follows:

15 The legislature intends that the procedures and services
16 authorized in this chapter be integrated with those in chapter 71.24
17 RCW to the maximum extent necessary to assure ((a)) an appropriate
18 continuum of care ((to)) for persons with ((mental illness or who
19 have mental disorders or substance use)) behavioral health disorders,
20 as defined in either or both this chapter and chapter 71.24 RCW. To
21 this end, behavioral health organizations established in accordance
22 with chapter 71.24 RCW shall institute procedures which require
23 timely consultation with resource management services by designated
24 crisis responders, evaluation and treatment facilities, secure
25 detoxification facilities, and approved substance use disorder
26 treatment programs to assure that determinations to admit, detain,
27 commit, treat, discharge, or release persons with ((~~mental disorders~~
28 ~~or substance use~~)) behavioral health disorders under this chapter are
29 made only after appropriate information regarding such person's
30 treatment history and current treatment plan has been sought from
31 resource management services.

32 **Sec. 5.** RCW 71.05.026 and 2018 c 201 s 3002 are each amended to
33 read as follows:

34 (1) Except for monetary damage claims which have been reduced to
35 final judgment by a superior court, this section applies to all
36 claims against the state, state agencies, state officials, or state
37 employees that exist on or arise after March 29, 2006.

1 (2) Except as expressly provided in contracts entered into
2 between the authority and the behavioral health organizations after
3 March 29, 2006, the entities identified in subsection (3) of this
4 section shall have no claim for declaratory relief, injunctive
5 relief, judicial review under chapter 34.05 RCW, or civil liability
6 against the state or state agencies for actions or inactions
7 performed pursuant to the administration of this chapter with regard
8 to the following: (a) The allocation or payment of federal or state
9 funds; (b) the use or allocation of state hospital beds; or (c)
10 financial responsibility for the provision of inpatient (~~mental~~)
11 behavioral health (~~care or inpatient substance use~~) disorder
12 treatment and care.

13 (3) This section applies to counties, behavioral health
14 organizations, and entities which contract to provide behavioral
15 health organization services and their subcontractors, agents, or
16 employees.

17 **Sec. 6.** RCW 71.05.027 and 2018 c 201 s 3003 are each amended to
18 read as follows:

19 (~~((1) Not later than January 1, 2007,))~~ All persons providing
20 treatment under this chapter shall also implement the integrated
21 comprehensive screening and assessment process for (~~chemical~~
22 ~~dependency and mental~~) behavioral health disorders adopted pursuant
23 to RCW 71.24.630 (~~and shall document the numbers of clients with co-~~
24 ~~occurring mental and substance abuse disorders based on a quadrant~~
25 ~~system of low and high needs.~~

26 ~~(2) Treatment providers and behavioral health organizations who~~
27 ~~fail to implement the integrated comprehensive screening and~~
28 ~~assessment process for chemical dependency and mental disorders by~~
29 ~~July 1, 2007, shall be subject to contractual penalties established~~
30 ~~under RCW 71.24.630).~~

31 **Sec. 7.** RCW 71.05.030 and 1998 c 297 s 4 are each amended to
32 read as follows:

33 Persons suffering from a (~~mental~~) behavioral health disorder
34 may not be involuntarily committed for treatment of such disorder
35 except pursuant to provisions of this chapter, chapter 10.77 RCW,
36 chapter 71.06 RCW, chapter 71.34 RCW, transfer pursuant to RCW
37 72.68.031 through 72.68.037, or pursuant to court ordered evaluation

1 and treatment not to exceed ninety days pending a criminal trial or
2 sentencing.

3 **Sec. 8.** RCW 71.05.040 and 2018 c 201 s 3004 are each amended to
4 read as follows:

5 Persons with developmental disabilities, impaired by substance
6 use disorder, or suffering from dementia shall not be detained for
7 evaluation and treatment or judicially committed solely by reason of
8 that condition unless such condition causes a person to be gravely
9 disabled or (~~as a result of a mental disorder such condition exists~~
10 ~~that constitutes~~) to present a likelihood of serious harm. However,
11 persons with developmental disabilities, impaired by substance use
12 disorder, or suffering from dementia and who otherwise meet the
13 criteria for detention or judicial commitment are not ineligible for
14 detention or commitment based on this condition alone.

15 **Sec. 9.** RCW 71.05.050 and 2016 sp.s. c 29 s 207 are each amended
16 to read as follows:

17 (1) Nothing in this chapter shall be construed to limit the right
18 of any person to apply voluntarily to any public or private agency or
19 practitioner for treatment of a (~~mental disorder or substance use~~)
20 behavioral health disorder, either by direct application or by
21 referral. Any person voluntarily admitted for inpatient treatment to
22 any public or private agency shall be released immediately upon his
23 or her request. Any person voluntarily admitted for inpatient
24 treatment to any public or private agency shall orally be advised of
25 the right to immediate discharge, and further advised of such rights
26 in writing as are secured to them pursuant to this chapter and their
27 rights of access to attorneys, courts, and other legal redress. Their
28 condition and status shall be reviewed at least once each one hundred
29 eighty days for evaluation as to the need for further treatment or
30 possible discharge, at which time they shall again be advised of
31 their right to discharge upon request.

32 (2) If the professional staff of any public or private agency or
33 hospital regards a person voluntarily admitted who requests discharge
34 as presenting, as a result of a (~~mental disorder or substance use~~)
35 behavioral health disorder, an imminent likelihood of serious harm,
36 or is gravely disabled, they may detain such person for sufficient
37 time to notify the designated crisis responder of such person's
38 condition to enable the designated crisis responder to authorize such

1 person being further held in custody or transported to an evaluation
2 and treatment center, secure detoxification facility, or approved
3 substance use disorder treatment program pursuant to the provisions
4 of this chapter, which shall in ordinary circumstances be no later
5 than the next judicial day.

6 (3) If a person is brought to the emergency room of a public or
7 private agency or hospital for observation or treatment, the person
8 refuses voluntary admission, and the professional staff of the public
9 or private agency or hospital regard such person as presenting as a
10 result of a (~~mental disorder or substance use~~) behavioral health
11 disorder an imminent likelihood of serious harm, or as presenting an
12 imminent danger because of grave disability, they may detain such
13 person for sufficient time to notify the designated crisis responder
14 of such person's condition to enable the designated crisis responder
15 to authorize such person being further held in custody or transported
16 to an evaluation treatment center, secure detoxification facility, or
17 approved substance use disorder treatment program pursuant to the
18 conditions in this chapter, but which time shall be no more than six
19 hours from the time the professional staff notify the designated
20 crisis responder of the need for evaluation, not counting time
21 periods prior to medical clearance.

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

27 **Sec. 10.** RCW 71.05.100 and 2018 c 201 s 3005 are each amended to
28 read as follows:

29 In addition to the responsibility provided for by RCW 43.20B.330,
30 any person, or his or her estate, or his or her spouse, (~~or the~~
31 ~~parents of a minor person~~) who is involuntarily detained pursuant to
32 this chapter for the purpose of treatment and evaluation outside of a
33 facility maintained and operated by the department of social and
34 health services shall be responsible for the cost of such care and
35 treatment. In the event that an individual is unable to pay for such
36 treatment or in the event payment would result in a substantial
37 hardship upon the individual or his or her family, then the county of
38 residence of such person shall be responsible for such costs. If it
39 is not possible to determine the county of residence of the person,

1 the cost shall be borne by the county where the person was originally
2 detained. The department of social and health services, or the
3 authority, as appropriate, shall, pursuant to chapter 34.05 RCW,
4 adopt standards as to (1) inability to pay in whole or in part, (2) a
5 definition of substantial hardship, and (3) appropriate payment
6 schedules. Financial responsibility with respect to services and
7 facilities of the department of social and health services shall
8 continue to be as provided in RCW 43.20B.320 through 43.20B.360 and
9 43.20B.370.

10 **Sec. 11.** RCW 71.05.120 and 2016 sp.s. c 29 s 208 and 2016 c 158
11 s 4 are each reenacted and amended to read as follows:

12 (1) No officer of a public or private agency, nor the
13 superintendent, professional person in charge, his or her
14 professional designee, or attending staff of any such agency, nor any
15 public official performing functions necessary to the administration
16 of this chapter, nor peace officer responsible for detaining a person
17 pursuant to this chapter, nor any designated crisis responder, nor
18 the state, a unit of local government, an evaluation and treatment
19 facility, a secure detoxification facility, or an approved substance
20 use disorder treatment program shall be civilly or criminally liable
21 for performing duties pursuant to this chapter with regard to the
22 decision of whether to admit, discharge, release, administer
23 antipsychotic medications, or detain a person for evaluation and
24 treatment: PROVIDED, That such duties were performed in good faith
25 and without gross negligence.

26 (2) Peace officers and their employing agencies are not liable
27 for the referral of a person, or the failure to refer a person, to a
28 (~~mental~~) behavioral health agency pursuant to a policy adopted
29 pursuant to RCW 71.05.457 if such action or inaction is taken in good
30 faith and without gross negligence.

31 (3) This section does not relieve a person from giving the
32 required notices under RCW 71.05.330(2) or 71.05.340(1)(b), or the
33 duty to warn or to take reasonable precautions to provide protection
34 from violent behavior where the patient has communicated an actual
35 threat of physical violence against a reasonably identifiable victim
36 or victims. The duty to warn or to take reasonable precautions to
37 provide protection from violent behavior is discharged if reasonable
38 efforts are made to communicate the threat to the victim or victims
39 and to law enforcement personnel.

1 **Sec. 12.** RCW 71.05.132 and 2016 sp.s. c 29 s 209 are each
2 amended to read as follows:

3 When any court orders a person to receive treatment under this
4 chapter, the order shall include a statement that if the person is,
5 or becomes, subject to supervision by the department of corrections,
6 the person must notify the treatment provider and the person's
7 (~~mental health~~) treatment (~~information and substance use disorder~~
8 ~~treatment information~~) records must be shared with the department of
9 corrections for the duration of the offender's incarceration and
10 supervision, under RCW 71.05.445. Upon a petition by a person who
11 does not have a history of one or more violent acts, the court may,
12 for good cause, find that public safety would not be enhanced by the
13 sharing of this person's information.

14 **Sec. 13.** RCW 71.05.150 and 2018 c 291 s 4 are each amended to
15 read as follows:

16 (1) When a designated crisis responder receives information
17 alleging that a person, as a result of a (~~mental~~) behavioral health
18 disorder, (~~substance use disorder, or both~~) presents a likelihood
19 of serious harm or is gravely disabled, or that a person is in need
20 of assisted outpatient behavioral health treatment; the designated
21 crisis responder may, after investigation and evaluation of the
22 specific facts alleged and of the reliability and credibility of any
23 person providing information to initiate detention or involuntary
24 outpatient treatment, if satisfied that the allegations are true and
25 that the person will not voluntarily seek appropriate treatment, file
26 a petition for initial detention under this section or a petition for
27 involuntary outpatient behavioral health treatment under RCW
28 71.05.148. Before filing the petition, the designated crisis
29 responder must personally interview the person, unless the person
30 refuses an interview, and determine whether the person will
31 voluntarily receive appropriate evaluation and treatment at an
32 evaluation and treatment facility, crisis stabilization unit, triage
33 facility, or approved substance use disorder treatment program.

34 (2) (a) (~~An~~) A written order of apprehension to detain a person
35 with a (~~mental~~) behavioral health disorder to a designated
36 evaluation and treatment facility, (~~or to detain a person with a~~
37 ~~substance use disorder to~~) a secure detoxification facility, or an
38 approved substance use disorder treatment program, for not more than
39 a seventy-two-hour evaluation and treatment period, may be issued by

1 a judge of the superior court upon request of a designated crisis
2 responder, subject to (d) of this subsection, whenever it appears to
3 the satisfaction of a judge of the superior court:

4 (i) That there is probable cause to support the petition; and

5 (ii) That the person has refused or failed to accept appropriate
6 evaluation and treatment voluntarily.

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

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

15 (d) A court may not issue an order to detain a person to a secure
16 detoxification facility or approved substance use disorder treatment
17 program unless there is an available secure detoxification facility
18 or approved substance use disorder treatment program that has
19 adequate space for the person.

20 (3) The designated crisis responder shall then serve or cause to
21 be served on such person, his or her guardian, and conservator, if
22 any, a copy of the order together with a notice of rights, and a
23 petition for initial detention. After service on such person the
24 designated crisis responder shall file the return of service in court
25 and provide copies of all papers in the court file to the evaluation
26 and treatment facility, secure detoxification facility, or approved
27 substance use disorder treatment program, and the designated
28 attorney. The designated crisis responder shall notify the court and
29 the prosecuting attorney that a probable cause hearing will be held
30 within seventy-two hours of the date and time of outpatient
31 evaluation or admission to the evaluation and treatment facility,
32 secure detoxification facility, or approved substance use disorder
33 treatment program. The person shall be permitted to be accompanied by
34 one or more of his or her relatives, friends, an attorney, a personal
35 physician, or other professional or religious advisor to the place of
36 evaluation. An attorney accompanying the person to the place of
37 evaluation shall be permitted to be present during the admission
38 evaluation. Any other individual accompanying the person may be
39 present during the admission evaluation. The facility may exclude the

1 individual if his or her presence would present a safety risk, delay
2 the proceedings, or otherwise interfere with the evaluation.

3 (4) The designated crisis responder may notify a peace officer to
4 take such person or cause such person to be taken into custody and
5 placed in an evaluation and treatment facility, secure detoxification
6 facility, or approved substance use disorder treatment program. At
7 the time such person is taken into custody there shall commence to be
8 served on such person, his or her guardian, and conservator, if any,
9 a copy of the original order together with a notice of rights and a
10 petition for initial detention.

11 **Sec. 14.** RCW 71.05.150 and 2018 c 291 s 4 are each amended to
12 read as follows:

13 (1) When a designated crisis responder receives information
14 alleging that a person, as a result of a (~~mental~~) behavioral health
15 disorder, (~~substance use disorder, or both~~) presents a likelihood
16 of serious harm or is gravely disabled, or that a person is in need
17 of assisted outpatient behavioral health treatment; the designated
18 crisis responder may, after investigation and evaluation of the
19 specific facts alleged and of the reliability and credibility of any
20 person providing information to initiate detention or involuntary
21 outpatient treatment, if satisfied that the allegations are true and
22 that the person will not voluntarily seek appropriate treatment, file
23 a petition for initial detention under this section or a petition for
24 involuntary outpatient behavioral health treatment under RCW
25 71.05.148. Before filing the petition, the designated crisis
26 responder must personally interview the person, unless the person
27 refuses an interview, and determine whether the person will
28 voluntarily receive appropriate evaluation and treatment at an
29 evaluation and treatment facility, crisis stabilization unit, triage
30 facility, or approved substance use disorder treatment program.

31 (2) (a) (~~An~~) A written order of apprehension to detain a person
32 with a (~~mental~~) behavioral health disorder to a designated
33 evaluation and treatment facility, (~~or to detain a person with a~~
34 ~~substance use disorder to~~) a secure detoxification facility, or an
35 approved substance use disorder treatment program, for a period of
36 not more than (~~a seventy-two hour~~) five days for evaluation and
37 treatment (~~period~~), may be issued by a judge of the superior court
38 upon request of a designated crisis responder, subject to (d) of this

1 subsection, whenever it appears to the satisfaction of a judge of the
2 superior court:

3 (i) That there is probable cause to support the petition; and

4 (ii) That the person has refused or failed to accept appropriate
5 evaluation and treatment voluntarily.

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

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

14 (d) A court may not issue an order to detain a person to a secure
15 detoxification facility or approved substance use disorder treatment
16 program unless there is an available secure detoxification facility
17 or approved substance use disorder treatment program that has
18 adequate space for the person.

19 (3) The designated crisis responder shall then serve or cause to
20 be served on such person, his or her guardian, and conservator, if
21 any, a copy of the order together with a notice of rights, and a
22 petition for initial detention. After service on such person the
23 designated crisis responder shall file the return of service in court
24 and provide copies of all papers in the court file to the evaluation
25 and treatment facility, secure detoxification facility, or approved
26 substance use disorder treatment program, and the designated
27 attorney. The designated crisis responder shall notify the court and
28 the prosecuting attorney that a probable cause hearing will be held
29 within (~~(seventy-two hours)~~) five days of the date and time of
30 outpatient evaluation or admission to the evaluation and treatment
31 facility, secure detoxification facility, or approved substance use
32 disorder treatment program. The person shall be permitted to be
33 accompanied by one or more of his or her relatives, friends, an
34 attorney, a personal physician, or other professional or religious
35 advisor to the place of evaluation. An attorney accompanying the
36 person to the place of evaluation shall be permitted to be present
37 during the admission evaluation. Any other individual accompanying
38 the person may be present during the admission evaluation. The
39 facility may exclude the individual if his or her presence would

1 present a safety risk, delay the proceedings, or otherwise interfere
2 with the evaluation.

3 (4) The designated crisis responder may notify a peace officer to
4 take such person or cause such person to be taken into custody and
5 placed in an evaluation and treatment facility, secure detoxification
6 facility, or approved substance use disorder treatment program. At
7 the time such person is taken into custody there shall commence to be
8 served on such person, his or her guardian, and conservator, if any,
9 a copy of the original order together with a notice of rights and a
10 petition for initial detention.

11 **Sec. 15.** RCW 71.05.150 and 2018 c 291 s 5 are each amended to
12 read as follows:

13 (1) When a designated crisis responder receives information
14 alleging that a person, as a result of a (~~mental~~) behavioral health
15 disorder, (~~substance use disorder, or both~~) presents a likelihood
16 of serious harm or is gravely disabled, or that a person is in need
17 of assisted outpatient behavioral health treatment; the designated
18 crisis responder may, after investigation and evaluation of the
19 specific facts alleged and of the reliability and credibility of any
20 person providing information to initiate detention or involuntary
21 outpatient treatment, if satisfied that the allegations are true and
22 that the person will not voluntarily seek appropriate treatment, file
23 a petition for initial detention under this section or a petition for
24 involuntary outpatient behavioral health treatment under RCW
25 71.05.148. Before filing the petition, the designated crisis
26 responder must personally interview the person, unless the person
27 refuses an interview, and determine whether the person will
28 voluntarily receive appropriate evaluation and treatment at an
29 evaluation and treatment facility, crisis stabilization unit, triage
30 facility, or approved substance use disorder treatment program.

31 (2) (a) (~~An~~) A written order of apprehension to detain a person
32 with a (~~mental~~) behavioral health disorder to a designated
33 evaluation and treatment facility, (~~or to detain a person with a~~
34 ~~substance use disorder to~~) a secure detoxification facility, or an
35 approved substance use disorder treatment program, for a period of
36 not more than (~~a seventy-two hour~~) five days for evaluation and
37 treatment (~~period~~), may be issued by a judge of the superior court
38 upon request of a designated crisis responder whenever it appears to
39 the satisfaction of a judge of the superior court:

1 (i) That there is probable cause to support the petition; and

2 (ii) That the person has refused or failed to accept appropriate
3 evaluation and treatment voluntarily.

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

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

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

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

1 a copy of the original order together with a notice of rights and a
2 petition for initial detention.

3 **Sec. 16.** RCW 71.05.153 and 2016 sp.s. c 29 s 212 are each
4 amended to read as follows:

5 (1) When a designated crisis responder receives information
6 alleging that a person, as the result of a (~~mental~~) behavioral
7 health disorder, presents an imminent likelihood of serious harm, or
8 is in 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 detoxification facility if available with adequate space for
15 the person, or approved substance use disorder treatment program if
16 available with adequate space for the person, for not more than
17 seventy-two hours as described in RCW 71.05.180.

18 ~~(2) ((When a designated crisis responder receives information~~
19 ~~alleging that a person, as the result of substance use disorder,~~
20 ~~presents an imminent likelihood of serious harm, or is in imminent~~
21 ~~danger because of being gravely disabled, after investigation and~~
22 ~~evaluation of the specific facts alleged and of the reliability and~~
23 ~~credibility of the person or persons providing the information if~~
24 ~~any, the designated crisis responder may take the person, or cause by~~
25 ~~oral or written order the person to be taken, into emergency custody~~
26 ~~in a secure detoxification facility or approved substance use~~
27 ~~disorder treatment program for not more than seventy-two hours as~~
28 ~~described in RCW 71.05.180, if a secure detoxification facility or~~
29 ~~approved substance use disorder treatment program is available and~~
30 ~~has adequate space for the person.~~

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

- 37 (i) Pursuant to subsection (1) (~~or (2)~~) of this section; or
38 (ii) When he or she has reasonable cause to believe that such
39 person is suffering from a (~~mental~~) behavioral health disorder (~~or~~

1 ~~substance use disorder~~) and presents an imminent likelihood of
2 serious harm or is in imminent danger because of being gravely
3 disabled.

4 (b) A peace officer's delivery of a person, (~~based on a~~
5 ~~substance use disorder,~~) to a secure detoxification facility or
6 approved substance use disorder treatment program is subject to the
7 availability of a secure detoxification facility or approved
8 substance use disorder treatment program with adequate space for the
9 person.

10 (~~(4)~~) (3) Persons delivered to a crisis stabilization unit,
11 evaluation and treatment facility, emergency department of a local
12 hospital, triage facility that has elected to operate as an
13 involuntary facility, secure detoxification facility, or approved
14 substance use disorder treatment program by peace officers pursuant
15 to subsection (~~(3)~~) (2) of this section may be held by the facility
16 for a period of up to twelve hours, not counting time periods prior
17 to medical clearance.

18 (~~(5)~~) (4) Within three hours after arrival, not counting time
19 periods prior to medical clearance, the person must be examined by a
20 mental health professional or chemical dependency professional.
21 Within twelve hours of notice of the need for evaluation, not
22 counting time periods prior to medical clearance, the designated
23 crisis responder must determine whether the individual meets
24 detention criteria. If the individual is detained, the designated
25 crisis responder shall file a petition for detention or a
26 supplemental petition as appropriate and commence service on the
27 designated attorney for the detained person. If the individual is
28 released to the community, the (~~mental~~) behavioral health service
29 provider shall inform the peace officer of the release within a
30 reasonable period of time after the release if the peace officer has
31 specifically requested notification and provided contact information
32 to the provider.

33 (~~(6)~~) (5) Dismissal of a commitment petition is not the
34 appropriate remedy for a violation of the timeliness requirements of
35 this section based on the intent of this chapter under RCW 71.05.010
36 except in the few cases where the facility staff or designated
37 (~~mental health professional~~) crisis responder has totally
38 disregarded the requirements of this section.

1 **Sec. 17.** RCW 71.05.153 and 2016 sp.s. c 29 s 212 are each
2 amended to read as follows:

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

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

29 ~~(3)~~) (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 detoxification facility, approved
33 substance use disorder treatment program, or the emergency department
34 of a local hospital under the following circumstances:

35 (i) Pursuant to subsection (1) (~~or (2)~~) of this section; or
36 (ii) When he or she has reasonable cause to believe that such
37 person is suffering from a (~~mental~~) behavioral health disorder (~~or~~
38 ~~substance use disorder~~) and presents an imminent likelihood of
39 serious harm or is in imminent danger because of being gravely
40 disabled.

1 (b) A peace officer's delivery of a person, (~~based on a~~
2 ~~substance use disorder,~~) to a secure detoxification facility or
3 approved substance use disorder treatment program is subject to the
4 availability of a secure detoxification facility or approved
5 substance use disorder treatment program with adequate space for the
6 person.

7 (~~(4)~~) (3) Persons delivered to a crisis stabilization unit,
8 evaluation and treatment facility, emergency department of a local
9 hospital, triage facility that has elected to operate as an
10 involuntary facility, secure detoxification facility, or approved
11 substance use disorder treatment program by peace officers pursuant
12 to subsection (~~(3)~~) (2) of this section may be held by the facility
13 for a period of up to twelve hours, not counting time periods prior
14 to medical clearance.

15 (~~(5)~~) (4) Within three hours after arrival, not counting time
16 periods prior to medical clearance, the person must be examined by a
17 mental health professional or chemical dependency professional.
18 Within twelve hours of notice of the need for evaluation, not
19 counting time periods prior to medical clearance, the designated
20 crisis responder must determine whether the individual meets
21 detention criteria. If the individual is detained, the designated
22 crisis responder shall file a petition for detention or a
23 supplemental petition as appropriate and commence service on the
24 designated attorney for the detained person. If the individual is
25 released to the community, the (~~mental~~) behavioral health service
26 provider shall inform the peace officer of the release within a
27 reasonable period of time after the release if the peace officer has
28 specifically requested notification and provided contact information
29 to the provider.

30 (~~(6)~~) (5) Dismissal of a commitment petition is not the
31 appropriate remedy for a violation of the timeliness requirements of
32 this section based on the intent of this chapter under RCW 71.05.010
33 except in the few cases where the facility staff or designated
34 (~~mental health professional~~) crisis responder has totally
35 disregarded the requirements of this section.

36 **Sec. 18.** RCW 71.05.153 and 2016 sp.s. c 29 s 213 are each
37 amended to read as follows:

38 (1) When a designated crisis responder receives information
39 alleging that a person, as the result of a (~~mental~~) behavioral

1 health disorder, presents an imminent likelihood of serious harm, or
2 is in imminent danger because of being gravely disabled, after
3 investigation and evaluation of the specific facts alleged and of the
4 reliability and credibility of the person or persons providing the
5 information if any, the designated crisis responder may take such
6 person, or cause by oral or written order such person to be taken
7 into emergency custody in an evaluation and treatment facility,
8 secure detoxification facility, or approved substance use disorder
9 treatment program, for not more than (~~seventy-two hours~~) five days
10 as described in RCW 71.05.180.

11 ~~(2) ((When a designated crisis responder receives information~~
12 ~~alleging that a person, as the result of substance use disorder,~~
13 ~~presents an imminent likelihood of serious harm, or is in imminent~~
14 ~~danger because of being gravely disabled, after investigation and~~
15 ~~evaluation of the specific facts alleged and of the reliability and~~
16 ~~credibility of the person or persons providing the information if~~
17 ~~any, the designated crisis responder may take the person, or cause by~~
18 ~~oral or written order the person to be taken, into emergency custody~~
19 ~~in a secure detoxification facility or approved substance use~~
20 ~~disorder treatment program for not more than seventy-two hours as~~
21 ~~described in RCW 71.05.180.~~

22 ~~(3))~~ A peace officer may take or cause such person to be taken
23 into custody and immediately delivered to a triage facility, crisis
24 stabilization unit, evaluation and treatment facility, secure
25 detoxification facility, approved substance use disorder treatment
26 program, or the emergency department of a local hospital under the
27 following circumstances:

28 (a) Pursuant to subsection (1) (~~or (2)~~) of this section; or
29 (b) When he or she has reasonable cause to believe that such
30 person is suffering from a (~~mental~~) behavioral health disorder (~~or~~
31 ~~substance use disorder~~) and presents an imminent likelihood of
32 serious harm or is in imminent danger because of being gravely
33 disabled.

34 (~~(4))~~ (3) Persons delivered to a crisis stabilization unit,
35 evaluation and treatment facility, emergency department of a local
36 hospital, triage facility that has elected to operate as an
37 involuntary facility, secure detoxification facility, or approved
38 substance use disorder treatment program by peace officers pursuant
39 to subsection (~~(3)~~) (2) of this section may be held by the facility

1 for a period of up to twelve hours, not counting time periods prior
2 to medical clearance.

3 ~~((+5))~~ (4) Within three hours after arrival, not counting time
4 periods prior to medical clearance, the person must be examined by a
5 mental health professional or chemical dependency professional,
6 whichever is more appropriate to the person's presentation. Within
7 twelve hours of notice of the need for evaluation, not counting time
8 periods prior to medical clearance, the designated crisis responder
9 must determine whether the individual meets detention criteria. If
10 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 ~~((mental))~~ behavioral health service provider shall inform the peace
15 officer of the release within a reasonable period of time after the
16 release if the peace officer has specifically requested notification
17 and provided contact information to the provider.

18 ~~((+6))~~ (5) Dismissal of a commitment petition is not the
19 appropriate remedy for a violation of the timeliness requirements of
20 this section based on the intent of this chapter under RCW 71.05.010
21 except in the few cases where the facility staff or designated
22 ~~((mental—health—professional))~~ crisis responder has totally
23 disregarded the requirements of this section.

24 **Sec. 19.** RCW 71.05.160 and 2016 sp.s. c 29 s 217 are each
25 amended to read as follows:

26 (1) Any facility receiving a person pursuant to RCW 71.05.150 or
27 71.05.153 shall require the designated crisis responder to prepare a
28 petition for initial detention stating the circumstances under which
29 the person's condition was made known and stating that there is
30 evidence, as a result of his or her personal observation or
31 investigation, that the actions of the person for which application
32 is made constitute a likelihood of serious harm, or that he or she is
33 gravely disabled, and stating the specific facts known to him or her
34 as a result of his or her personal observation or investigation, upon
35 which he or she bases the belief that such person should be detained
36 for the purposes and under the authority of this chapter.

37 (2)(a) If a person is involuntarily placed in an evaluation and
38 treatment facility, secure detoxification facility, or approved
39 substance use disorder treatment program pursuant to RCW 71.05.150 or

1 71.05.153, on the next judicial day following the initial detention,
2 the designated crisis responder shall file with the court and serve
3 the designated attorney of the detained person the petition or
4 supplemental petition for initial detention, proof of service of
5 notice, and a copy of a notice of emergency detention.

6 (b) If the person is involuntarily detained at an evaluation and
7 treatment facility, secure detoxification facility, or approved
8 substance use disorder treatment program in a different county from
9 where the person was initially detained, the facility or program may
10 file with the court and serve the designated attorney of the detained
11 person the petition or supplemental petition for initial detention,
12 proof of service of notice, and a copy of a notice of emergency
13 detention at the request of the designated crisis responder.

14 **Sec. 20.** RCW 71.05.170 and 2016 sp.s. c 29 s 218 are each
15 amended to read as follows:

16 Whenever the designated crisis responder petitions for detention
17 of a person whose actions constitute a likelihood of serious harm, or
18 who is gravely disabled, the facility providing (~~(seventy-two hour)~~)
19 five-day evaluation and treatment must immediately accept on a
20 provisional basis the petition and the person. The facility shall
21 then evaluate the person's condition and admit, detain, transfer, or
22 discharge such person in accordance with RCW 71.05.210. The facility
23 shall notify in writing the court and the designated crisis responder
24 of the date and time of the initial detention of each person
25 involuntarily detained in order that a probable cause hearing shall
26 be held no later than (~~(seventy-two hours)~~) five days after
27 detention.

28 The duty of a state hospital to accept persons for evaluation and
29 treatment under this section shall be limited by chapter 71.24 RCW.

30 **Sec. 21.** RCW 71.05.180 and 2016 sp.s. c 29 s 219 are each
31 amended to read as follows:

32 If the evaluation and treatment facility, secure detoxification
33 facility, or approved substance use disorder treatment program admits
34 the person, it may detain him or her for evaluation and treatment for
35 a period not to exceed (~~(seventy-two hours)~~) five days from the time
36 of acceptance as set forth in RCW 71.05.170. The computation of such
37 (~~(seventy-two hour)~~) five-day period shall exclude Saturdays,
38 Sundays, and holidays.

1 **Sec. 22.** RCW 71.05.190 and 2016 sp.s. c 29 s 220 are each
2 amended to read as follows:

3 If the person is not approved for admission by a facility
4 providing (~~seventy-two hour~~) five-day evaluation and treatment, and
5 the individual has not been arrested, the facility shall furnish
6 transportation, if not otherwise available, for the person to his or
7 her place of residence or other appropriate place. If the individual
8 has been arrested, the evaluation and treatment facility, secure
9 detoxification facility, or approved substance use disorder treatment
10 program shall detain the individual for not more than eight hours at
11 the request of the peace officer. The facility shall make reasonable
12 attempts to contact the requesting peace officer during this time to
13 inform the peace officer that the person is not approved for
14 admission in order to enable a peace officer to return to the
15 facility and take the individual back into custody.

16 **Sec. 23.** RCW 71.05.195 and 2016 sp.s. c 29 s 221 are each
17 amended to read as follows:

18 (1) A civil commitment may be initiated under the procedures
19 described in RCW 71.05.150 or 71.05.153 for a person who has been
20 found not guilty by reason of insanity in a state other than
21 Washington and who has fled from detention, commitment, or
22 conditional release in that state, on the basis of a request by the
23 state in which the person was found not guilty by reason of insanity
24 for the person to be detained and transferred back to the custody or
25 care of the requesting state. A finding of likelihood of serious harm
26 or grave disability is not required for a commitment under this
27 section. The detention may occur at either an evaluation and
28 treatment facility or a state hospital. The petition for (~~seventy-~~
29 ~~two-hour~~) five-day detention filed by the designated crisis
30 responder must be accompanied by the following documents:

31 (a) A copy of an order for detention, commitment, or conditional
32 release of the person in a state other than Washington on the basis
33 of a judgment of not guilty by reason of insanity;

34 (b) A warrant issued by a magistrate in the state in which the
35 person was found not guilty by reason of insanity indicating that the
36 person has fled from detention, commitment, or conditional release in
37 that state and authorizing the detention of the person within the
38 state in which the person was found not guilty by reason of insanity;

1 (c) A statement from the executive authority of the state in
2 which the person was found not guilty by reason of insanity
3 requesting that the person be returned to the requesting state and
4 agreeing to facilitate the transfer of the person to the requesting
5 state.

6 (2) The person shall be entitled to a probable cause hearing
7 within the time limits applicable to other detentions under this
8 chapter and shall be afforded the rights described in this chapter
9 including the right to counsel. At the probable cause hearing, the
10 court shall determine the identity of the person and whether the
11 other requirements of this section are met. If the court so finds,
12 the court may order continued detention in a treatment facility for
13 up to thirty days for the purpose of the transfer of the person to
14 the custody or care of the requesting state. The court may order a
15 less restrictive alternative to detention only under conditions which
16 ensure the person's safe transfer to the custody or care of the
17 requesting state within thirty days without undue risk to the safety
18 of the person or others.

19 (3) For the purposes of this section, "not guilty by reason of
20 insanity" shall be construed to include any provision of law which is
21 generally equivalent to a finding of criminal insanity within the
22 state of Washington; and "state" shall be construed to mean any
23 state, district, or territory of the United States.

24 **Sec. 24.** RCW 71.05.201 and 2018 c 291 s 11 are each amended to
25 read as follows:

26 (1) If a designated crisis responder decides not to detain a
27 person for evaluation and treatment under RCW 71.05.150 or 71.05.153
28 or forty-eight hours have elapsed since a designated crisis responder
29 received a request for investigation and the designated crisis
30 responder has not taken action to have the person detained, an
31 immediate family member or guardian or conservator of the person may
32 petition the superior court for the person's initial detention.

33 (2) A petition under this section must be filed within ten
34 calendar days following the designated crisis responder investigation
35 or the request for a designated crisis responder investigation. If
36 more than ten days have elapsed, the immediate family member,
37 guardian, or conservator may request a new designated crisis
38 responder investigation.

1 (3) (a) The petition must be filed in the county in which the
2 designated crisis responder investigation occurred or was requested
3 to occur and must be submitted on forms developed by the
4 administrative office of the courts for this purpose. The petition
5 must be accompanied by a sworn declaration from the petitioner, and
6 other witnesses if desired, describing why the person should be
7 detained for evaluation and treatment. The description of why the
8 person should be detained may contain, but is not limited to, the
9 information identified in RCW 71.05.212.

10 (b) The petition must contain:

11 (i) A description of the relationship between the petitioner and
12 the person; and

13 (ii) The date on which an investigation was requested from the
14 designated crisis responder.

15 (4) The court shall, within one judicial day, review the petition
16 to determine whether the petition raises sufficient evidence to
17 support the allegation. If the court so finds, it shall provide a
18 copy of the petition to the designated crisis responder agency with
19 an order for the agency to provide the court, within one judicial
20 day, with a written sworn statement describing the basis for the
21 decision not to seek initial detention and a copy of all information
22 material to the designated crisis responder's current decision.

23 (5) Following the filing of the petition and before the court
24 reaches a decision, any person, including a mental health
25 professional, may submit a sworn declaration to the court in support
26 of or in opposition to initial detention.

27 (6) The court shall dismiss the petition at any time if it finds
28 that a designated crisis responder has filed a petition for the
29 person's initial detention under RCW 71.05.150 or 71.05.153 or that
30 the person has voluntarily accepted appropriate treatment.

31 (7) The court must issue a final ruling on the petition within
32 five judicial days after it is filed. After reviewing all of the
33 information provided to the court, the court may enter an order for
34 initial detention or an order instructing the designated crisis
35 responder to file a petition for assisted outpatient behavioral
36 health treatment if the court finds that: (a) There is probable cause
37 to support a petition for detention or assisted outpatient behavioral
38 health treatment; and (b) the person has refused or failed to accept
39 appropriate evaluation and treatment voluntarily. The court shall
40 transmit its final decision to the petitioner.

1 (8) If the court enters an order for initial detention, it shall
2 provide the order to the designated crisis responder agency and issue
3 a written order for apprehension (~~(of the person by a peace officer~~
4 ~~for delivery of the person to a facility or emergency room determined~~
5 ~~by the designated crisis responder)~~). The designated crisis responder
6 agency serving the jurisdiction of the court must collaborate and
7 coordinate with law enforcement regarding apprehensions and
8 detentions under this subsection, including sharing of information
9 relating to risk and which would assist in locating the person. A
10 person may not be detained to jail pursuant to a written order issued
11 under this subsection. An order for detention under this section
12 should contain the advisement of rights which the person would
13 receive if the person were detained by a designated crisis responder.
14 An order for initial detention under this section expires one hundred
15 eighty days from issuance.

16 (9) Except as otherwise expressly stated in this chapter, all
17 procedures must be followed as if the order had been entered under
18 RCW 71.05.150. RCW 71.05.160 does not apply if detention was
19 initiated under the process set forth in this section.

20 (10) For purposes of this section, "immediate family member"
21 means a spouse, domestic partner, child, stepchild, parent,
22 stepparent, grandparent, or sibling.

23 **Sec. 25.** RCW 71.05.210 and 2017 3rd sp.s. c 14 s 15 are each
24 amended to read as follows:

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

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

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

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

37 (b) Shall receive such treatment and care as his or her condition
38 requires including treatment on an outpatient basis for the period
39 that he or she is detained, except that, beginning twenty-four hours

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

15 (2) If, after examination and evaluation, the mental health
16 professional or chemical dependency professional and licensed
17 physician, physician assistant, or psychiatric advanced registered
18 nurse practitioner determine that the initial needs of the person, if
19 detained to an evaluation and treatment facility, would be better
20 served by placement in a substance use disorder treatment program,
21 or, if detained to a secure detoxification facility or approved
22 substance use disorder treatment program, would be better served in
23 an evaluation and treatment facility then the person shall be
24 referred to the more appropriate placement; however, a person may
25 only be referred to a secure detoxification facility or approved
26 substance use disorder treatment program if there is an available
27 secure detoxification facility or approved substance use disorder
28 treatment program with adequate space for the person.

29 (3) An evaluation and treatment center, secure detoxification
30 facility, or approved substance use disorder treatment program
31 admitting or accepting any person pursuant to this chapter whose
32 physical condition reveals the need for hospitalization shall assure
33 that such person is transferred to an appropriate hospital for
34 evaluation or admission for treatment. Notice of such fact shall be
35 given to the court, the designated attorney, and the designated
36 crisis responder and the court shall order such continuance in
37 proceedings under this chapter as may be necessary, but in no event
38 may this continuance be more than fourteen days.

1 **Sec. 26.** RCW 71.05.210 and 2017 3rd sp.s. c 14 s 16 are each
2 amended to read as follows:

3 (1) Each person involuntarily detained and accepted or admitted
4 at an evaluation and treatment facility, secure detoxification
5 facility, or approved substance use disorder treatment program:

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

9 (i) One physician, physician assistant, or advanced registered
10 nurse practitioner; and

11 (ii) One mental health professional. If the person is detained
12 for substance use disorder evaluation and treatment, the person may
13 be examined by a chemical dependency professional instead of a mental
14 health professional; and

15 (b) Shall receive such treatment and care as his or her condition
16 requires including treatment on an outpatient basis for the period
17 that he or she is detained, except that, beginning twenty-four hours
18 prior to a trial or hearing pursuant to RCW 71.05.215, 71.05.240,
19 71.05.310, 71.05.320, 71.05.590, or 71.05.217, the individual may
20 refuse psychiatric medications, but may not refuse: (i) Any other
21 medication previously prescribed by a person licensed under Title 18
22 RCW; or (ii) emergency lifesaving treatment, and the individual shall
23 be informed at an appropriate time of his or her right of such
24 refusal. The person shall be detained up to (~~seventy-two hours~~)
25 five days, if, in the opinion of the professional person in charge of
26 the facility, or his or her professional designee, the person
27 presents a likelihood of serious harm, or is gravely disabled. A
28 person who has been detained for (~~seventy-two hours~~) five days
29 shall no later than the end of such period be released, unless
30 referred for further care on a voluntary basis, or detained pursuant
31 to court order for further treatment as provided in this chapter.

32 (2) If, after examination and evaluation, the mental health
33 professional or chemical dependency professional and licensed
34 physician, physician assistant, or psychiatric advanced registered
35 nurse practitioner determine that the initial needs of the person, if
36 detained to an evaluation and treatment facility, would be better
37 served by placement in a substance use disorder treatment program,
38 or, if detained to a secure detoxification facility or approved
39 substance use disorder treatment program, would be better served in

1 an evaluation and treatment facility then the person shall be
2 referred to the more appropriate placement.

3 (3) An evaluation and treatment center, secure detoxification
4 facility, or approved substance use disorder treatment program
5 admitting or accepting any person pursuant to this chapter whose
6 physical condition reveals the need for hospitalization shall assure
7 that such person is transferred to an appropriate hospital for
8 evaluation or admission for treatment. Notice of such fact shall be
9 given to the court, the designated attorney, and the designated
10 crisis responder and the court shall order such continuance in
11 proceedings under this chapter as may be necessary, but in no event
12 may this continuance be more than fourteen days.

13 **Sec. 27.** RCW 71.05.212 and 2018 c 291 s 13 are each amended to
14 read as follows:

15 (1) Whenever a designated crisis responder or professional person
16 is conducting an evaluation under this chapter, consideration shall
17 include all reasonably available information from credible witnesses
18 and records regarding:

19 (a) Prior recommendations for evaluation of the need for civil
20 commitments when the recommendation is made pursuant to an evaluation
21 conducted under chapter 10.77 RCW;

22 (b) Historical behavior, including history of one or more violent
23 acts;

24 (c) Prior determinations of incompetency or insanity under
25 chapter 10.77 RCW; and

26 (d) Prior commitments under this chapter.

27 (2) Credible witnesses may include family members, landlords,
28 neighbors, or others with significant contact and history of
29 involvement with the person. If the designated crisis responder
30 relies upon information from a credible witness in reaching his or
31 her decision to detain the individual, then he or she must provide
32 contact information for any such witness to the prosecutor. The
33 designated crisis responder or prosecutor shall provide notice of the
34 date, time, and location of the probable cause hearing to such a
35 witness.

36 (3) Symptoms and behavior of the respondent which standing alone
37 would not justify civil commitment may support a finding of grave
38 disability or likelihood of serious harm, or a finding that the

1 person is in need of assisted outpatient behavioral health treatment,
2 when:

3 (a) Such symptoms or behavior are closely associated with
4 symptoms or behavior which preceded and led to a past incident of
5 involuntary hospitalization, severe deterioration from safe behavior,
6 or one or more violent acts;

7 (b) These symptoms or behavior represent a marked and concerning
8 change in the baseline behavior of the respondent; and

9 (c) Without treatment, the continued deterioration of the
10 respondent is probable.

11 (4) When conducting an evaluation for offenders identified under
12 RCW 72.09.370, the designated crisis responder or professional person
13 shall consider an offender's history of judicially required or
14 administratively ordered antipsychotic medication while in
15 confinement.

16 **Sec. 28.** RCW 71.05.214 and 2018 c 201 s 3007 are each amended to
17 read as follows:

18 The authority shall develop statewide protocols to be utilized by
19 professional persons and designated crisis responders in
20 administration of this chapter and chapters 10.77 and 71.34 RCW. The
21 protocols shall be updated at least every three years. The protocols
22 shall provide uniform development and application of criteria in
23 evaluation and commitment recommendations, of persons who have, or
24 are alleged to have, (~~mental disorders or substance use~~) behavioral
25 health disorders and are subject to this chapter.

26 The initial protocols shall be developed not later than September
27 1, 1999. The authority shall develop and update the protocols in
28 consultation with representatives of designated crisis responders,
29 the department of social and health services, local government, law
30 enforcement, county and city prosecutors, public defenders, and
31 groups concerned with (~~mental illness and substance use~~) behavioral
32 health disorders. The protocols shall be submitted to the governor
33 and legislature upon adoption by the authority.

34 **Sec. 29.** RCW 71.05.215 and 2018 c 201 s 3008 are each amended to
35 read as follows:

36 (1) A person found to be gravely disabled or (~~presents~~) to
37 present a likelihood of serious harm as a result of a (~~mental~~
38 ~~disorder or substance use~~) behavioral health disorder has a right to

1 refuse antipsychotic medication unless it is determined that the
2 failure to medicate may result in a likelihood of serious harm or
3 substantial deterioration or substantially prolong the length of
4 involuntary commitment and there is no less intrusive course of
5 treatment than medication in the best interest of that person.

6 (2) The authority shall adopt rules to carry out the purposes of
7 this chapter. These rules shall include:

8 (a) An attempt to obtain the informed consent of the person prior
9 to administration of antipsychotic medication.

10 (b) For short-term treatment up to thirty days, the right to
11 refuse antipsychotic medications unless there is an additional
12 concurring medical opinion approving medication by a psychiatrist,
13 physician assistant working with a supervising psychiatrist,
14 psychiatric advanced registered nurse practitioner, or physician or
15 physician assistant in consultation with a mental health professional
16 with prescriptive authority.

17 (c) For continued treatment beyond thirty days through the
18 hearing on any petition filed under RCW 71.05.217, the right to
19 periodic review of the decision to medicate by the medical director
20 or designee.

21 (d) Administration of antipsychotic medication in an emergency
22 and review of this decision within twenty-four hours. An emergency
23 exists if the person presents an imminent likelihood of serious harm,
24 and medically acceptable alternatives to administration of
25 antipsychotic medications are not available or are unlikely to be
26 successful; and in the opinion of the physician, physician assistant,
27 or psychiatric advanced registered nurse practitioner, the person's
28 condition constitutes an emergency requiring the treatment be
29 instituted prior to obtaining a second medical opinion.

30 (e) Documentation in the medical record of the attempt by the
31 physician, physician assistant, or psychiatric advanced registered
32 nurse practitioner to obtain informed consent and the reasons why
33 antipsychotic medication is being administered over the person's
34 objection or lack of consent.

35 **Sec. 30.** RCW 71.05.217 and 2016 c 155 s 4 are each amended to
36 read as follows:

37 (1) Insofar as danger to the individual or others is not created,
38 each person involuntarily detained, treated in a less restrictive
39 alternative course of treatment, or committed for treatment and

1 evaluation pursuant to this chapter shall have, in addition to other
2 rights not specifically withheld by law, the following rights, a list
3 of which shall be prominently posted in all facilities, institutions,
4 and hospitals providing such services:

5 ~~((1))~~ (a) To wear his or her own clothes and to keep and use
6 his or her own personal possessions, except when deprivation of same
7 is essential to protect the safety of the resident or other persons;

8 ~~((2))~~ (b) To keep and be allowed to spend a reasonable sum of
9 his or her own money for canteen expenses and small purchases;

10 ~~((3))~~ (c) To have access to individual storage space for his or
11 her private use;

12 ~~((4))~~ (d) To have visitors at reasonable times;

13 ~~((5))~~ (e) To have reasonable access to a telephone, both to
14 make and receive confidential calls;

15 ~~((6))~~ (f) To have ready access to letter writing materials,
16 including stamps, and to send and receive uncensored correspondence
17 through the mails;

18 ~~((7))~~ (g) To have the right to individualized care and adequate
19 treatment;

20 (h) To discuss treatment plans and decisions with professional
21 persons;

22 (i) To not be denied access to treatment by spiritual means
23 through prayer in accordance with the tenets and practices of a
24 church or religious denomination in addition to the treatment
25 otherwise proposed;

26 (j) Not to consent to the administration of antipsychotic
27 medications beyond the hearing conducted pursuant to RCW 71.05.320(4)
28 or the performance of electroconvulsant therapy or surgery, except
29 emergency lifesaving surgery, unless ordered by a court of competent
30 jurisdiction pursuant to the following standards and procedures:

31 ~~((a))~~ (i) The administration of antipsychotic medication or
32 electroconvulsant therapy shall not be ordered unless the petitioning
33 party proves by clear, cogent, and convincing evidence that there
34 exists a compelling state interest that justifies overriding the
35 patient's lack of consent to the administration of antipsychotic
36 medications or electroconvulsant therapy, that the proposed treatment
37 is necessary and effective, and that medically acceptable alternative
38 forms of treatment are not available, have not been successful, or
39 are not likely to be effective.

1 ~~((b))~~ (ii) The court shall make specific findings of fact
2 concerning: ~~((i))~~ (A) The existence of one or more compelling state
3 interests; ~~((ii))~~ (B) the necessity and effectiveness of the
4 treatment; and ~~((iii))~~ (C) the person's desires regarding the
5 proposed treatment. If the patient is unable to make a rational and
6 informed decision about consenting to or refusing the proposed
7 treatment, the court shall make a substituted judgment for the
8 patient as if he or she were competent to make such a determination.

9 ~~((e))~~ (iii) The person shall be present at any hearing on a
10 request to administer antipsychotic medication or electroconvulsant
11 therapy filed pursuant to this subsection. The person has the right:
12 ~~((i))~~ (A) To be represented by an attorney; ~~((ii))~~ (B) to present
13 evidence; ~~((iii))~~ (C) to cross-examine witnesses; ~~((iv))~~ (D) to
14 have the rules of evidence enforced; ~~((v))~~ (E) to remain silent;
15 ~~((vi))~~ (F) to view and copy all petitions and reports in the court
16 file; and ~~((vii))~~ (G) to be given reasonable notice and an
17 opportunity to prepare for the hearing. The court may appoint a
18 psychiatrist, physician assistant working with a supervising
19 psychiatrist, psychiatric advanced registered nurse practitioner,
20 psychologist within their scope of practice, physician assistant, or
21 physician to examine and testify on behalf of such person. The court
22 shall appoint a psychiatrist, physician assistant working with a
23 supervising psychiatrist, psychiatric advanced registered nurse
24 practitioner, psychologist within their scope of practice, physician
25 assistant, or physician designated by such person or the person's
26 counsel to testify on behalf of the person in cases where an order
27 for electroconvulsant therapy is sought.

28 ~~((d))~~ (iv) An order for the administration of antipsychotic
29 medications entered following a hearing conducted pursuant to this
30 section shall be effective for the period of the current involuntary
31 treatment order, and any interim period during which the person is
32 awaiting trial or hearing on a new petition for involuntary treatment
33 or involuntary medication.

34 ~~((e))~~ (v) Any person detained pursuant to RCW 71.05.320(4), who
35 subsequently refuses antipsychotic medication, shall be entitled to
36 the procedures set forth in this subsection.

37 ~~((f))~~ (vi) Antipsychotic medication may be administered to a
38 nonconsenting person detained or committed pursuant to this chapter
39 without a court order pursuant to RCW 71.05.215(2) or under the
40 following circumstances:

1 (~~(i)~~) (A) A person presents an imminent likelihood of serious
2 harm;

3 (~~(ii)~~) (B) Medically acceptable alternatives to administration
4 of antipsychotic medications are not available, have not been
5 successful, or are not likely to be effective; and

6 (~~(iii)~~) (C) In the opinion of the physician, physician
7 assistant, or psychiatric advanced registered nurse practitioner with
8 responsibility for treatment of the person, or his or her designee,
9 the person's condition constitutes an emergency requiring the
10 treatment be instituted before a judicial hearing as authorized
11 pursuant to this section can be held.

12 If antipsychotic medications are administered over a person's
13 lack of consent pursuant to this subsection, a petition for an order
14 authorizing the administration of antipsychotic medications shall be
15 filed on the next judicial day. The hearing shall be held within two
16 judicial days. If deemed necessary by the physician, physician
17 assistant, or psychiatric advanced registered nurse practitioner with
18 responsibility for the treatment of the person, administration of
19 antipsychotic medications may continue until the hearing is held;

20 (~~(8)~~) (k) To dispose of property and sign contracts unless such
21 person has been adjudicated an incompetent in a court proceeding
22 directed to that particular issue;

23 (~~(9)~~) (l) Not to have psychosurgery performed on him or her
24 under any circumstances.

25 (2) Every person involuntarily detained or committed under the
26 provisions of this chapter is entitled to all the rights set forth in
27 this chapter and retains all rights not denied him or her under this
28 chapter except as limited by chapter 9.41 RCW.

29 (3) No person may be presumed incompetent as a consequence of
30 receiving evaluation or treatment for a behavioral health disorder.
31 Competency may not be determined or withdrawn except under the
32 provisions of chapter 10.77 or 11.88 RCW.

33 (4) Subject to RCW 71.05.745 and related regulations, persons
34 receiving evaluation or treatment under this chapter must be given a
35 reasonable choice of an available physician, physician assistant,
36 psychiatric advanced registered nurse practitioner, or other
37 professional person qualified to provide such services.

38 (5) Whenever any person is detained under this chapter, the
39 person must be advised that unless the person is released or
40 voluntarily admits himself or herself for treatment within seventy-

1 two hours of the initial detention, a judicial hearing must be held
2 in a superior court within seventy-two hours to determine whether
3 there is probable cause to detain the person for up to an additional
4 fourteen days based on an allegation that because of a behavioral
5 health disorder the person presents a likelihood of serious harm or
6 is gravely disabled, and that at the probable cause hearing the
7 person has the following rights:

8 (a) To communicate immediately with an attorney; to have an
9 attorney appointed if the person is indigent; and to be told the name
10 and address of the attorney that has been designated;

11 (b) To remain silent, and to know that any statement the person
12 makes may be used against him or her;

13 (c) To present evidence on the person's behalf;

14 (d) To cross-examine witnesses who testify against him or her;

15 (e) To be proceeded against by the rules of evidence;

16 (f) To have the court appoint a reasonably available independent
17 professional person to examine the person and testify in the hearing,
18 at public expense unless the person is able to bear the cost;

19 (g) To view and copy all petitions and reports in the court file;
20 and

21 (h) To refuse psychiatric medications, including antipsychotic
22 medication beginning twenty-four hours prior to the probable cause
23 hearing.

24 (6) The judicial hearing described in subsection (5) of this
25 section must be held according to the provisions of subsection (5) of
26 this section and rules promulgated by the supreme court.

27 (7)(a) Privileges between patients and physicians, physician
28 assistants, psychologists, or psychiatric advanced registered nurse
29 practitioners are deemed waived in proceedings under this chapter
30 relating to the administration of antipsychotic medications. As to
31 other proceedings under this chapter, the privileges are waived when
32 a court of competent jurisdiction in its discretion determines that
33 such waiver is necessary to protect either the detained person or the
34 public.

35 (b) The waiver of a privilege under this section is limited to
36 records or testimony relevant to evaluation of the detained person
37 for purposes of a proceeding under this chapter. Upon motion by the
38 detained person or on its own motion, the court shall examine a
39 record or testimony sought by a petitioner to determine whether it is
40 within the scope of the waiver.

1 (c) The record maker may not be required to testify in order to
2 introduce medical or psychological records of the detained person so
3 long as the requirements of RCW 5.45.020 are met except that portions
4 of the record which contain opinions as to the detained person's
5 mental state must be deleted from such records unless the person
6 making such conclusions is available for cross-examination.

7 (8) Nothing contained in this chapter prohibits the patient from
8 petitioning by writ of habeas corpus for release.

9 (9) Nothing in this section permits any person to knowingly
10 violate a no-contact order or a condition of an active judgment and
11 sentence or an active condition of supervision by the department of
12 corrections.

13 (10) The rights set forth under this section apply equally to
14 ninety-day or one hundred eighty-day hearings under RCW 71.05.310.

15 **Sec. 31.** RCW 71.05.217 and 2016 c 155 s 4 are each amended to
16 read as follows:

17 (1) Insofar as danger to the individual or others is not created,
18 each person involuntarily detained, treated in a less restrictive
19 alternative course of treatment, or committed for treatment and
20 evaluation pursuant to this chapter shall have, in addition to other
21 rights not specifically withheld by law, the following rights, a list
22 of which shall be prominently posted in all facilities, institutions,
23 and hospitals providing such services:

24 ~~((1))~~ (a) To wear his or her own clothes and to keep and use
25 his or her own personal possessions, except when deprivation of same
26 is essential to protect the safety of the resident or other persons;

27 ~~((2))~~ (b) To keep and be allowed to spend a reasonable sum of
28 his or her own money for canteen expenses and small purchases;

29 ~~((3))~~ (c) To have access to individual storage space for his or
30 her private use;

31 ~~((4))~~ (d) To have visitors at reasonable times;

32 ~~((5))~~ (e) To have reasonable access to a telephone, both to
33 make and receive confidential calls;

34 ~~((6))~~ (f) To have ready access to letter writing materials,
35 including stamps, and to send and receive uncensored correspondence
36 through the mails;

37 ~~((7))~~ (g) To have the right to individualized care and adequate
38 treatment;

1 (h) To discuss treatment plans and decisions with professional
2 persons;

3 (i) To not be denied access to treatment by spiritual means
4 through prayer in accordance with the tenets and practices of a
5 church or religious denomination in addition to the treatment
6 otherwise proposed;

7 (j) Not to consent to the administration of antipsychotic
8 medications beyond the hearing conducted pursuant to RCW 71.05.320(4)
9 or the performance of electroconvulsant therapy or surgery, except
10 emergency lifesaving surgery, unless ordered by a court of competent
11 jurisdiction pursuant to the following standards and procedures:

12 ~~((a))~~ (i) The administration of antipsychotic medication or
13 electroconvulsant therapy shall not be ordered unless the petitioning
14 party proves by clear, cogent, and convincing evidence that there
15 exists a compelling state interest that justifies overriding the
16 patient's lack of consent to the administration of antipsychotic
17 medications or electroconvulsant therapy, that the proposed treatment
18 is necessary and effective, and that medically acceptable alternative
19 forms of treatment are not available, have not been successful, or
20 are not likely to be effective.

21 ~~((b))~~ (ii) The court shall make specific findings of fact
22 concerning: ~~((i))~~ (A) The existence of one or more compelling state
23 interests; ~~((ii))~~ (B) the necessity and effectiveness of the
24 treatment; and ~~((iii))~~ (C) the person's desires regarding the
25 proposed treatment. If the patient is unable to make a rational and
26 informed decision about consenting to or refusing the proposed
27 treatment, the court shall make a substituted judgment for the
28 patient as if he or she were competent to make such a determination.

29 ~~((c))~~ (iii) The person shall be present at any hearing on a
30 request to administer antipsychotic medication or electroconvulsant
31 therapy filed pursuant to this subsection. The person has the right:
32 ~~((i))~~ (A) To be represented by an attorney; ~~((ii))~~ (B) to present
33 evidence; ~~((iii))~~ (C) to cross-examine witnesses; ~~((iv))~~ (D) to
34 have the rules of evidence enforced; ~~((v))~~ (E) to remain silent;
35 ~~((vi))~~ (F) to view and copy all petitions and reports in the court
36 file; and ~~((vii))~~ (G) to be given reasonable notice and an
37 opportunity to prepare for the hearing. The court may appoint a
38 psychiatrist, physician assistant working with a supervising
39 psychiatrist, psychiatric advanced registered nurse practitioner,
40 psychologist within their scope of practice, physician assistant, or

1 physician to examine and testify on behalf of such person. The court
2 shall appoint a psychiatrist, physician assistant working with a
3 supervising psychiatrist, psychiatric advanced registered nurse
4 practitioner, psychologist within their scope of practice, physician
5 assistant, or physician designated by such person or the person's
6 counsel to testify on behalf of the person in cases where an order
7 for electroconvulsant therapy is sought.

8 ~~((d))~~ (iv) An order for the administration of antipsychotic
9 medications entered following a hearing conducted pursuant to this
10 section shall be effective for the period of the current involuntary
11 treatment order, and any interim period during which the person is
12 awaiting trial or hearing on a new petition for involuntary treatment
13 or involuntary medication.

14 ~~((e))~~ (v) Any person detained pursuant to RCW 71.05.320(4), who
15 subsequently refuses antipsychotic medication, shall be entitled to
16 the procedures set forth in this subsection.

17 ~~((f))~~ (vi) Antipsychotic medication may be administered to a
18 nonconsenting person detained or committed pursuant to this chapter
19 without a court order pursuant to RCW 71.05.215(2) or under the
20 following circumstances:

21 ~~((i))~~ (A) A person presents an imminent likelihood of serious
22 harm;

23 ~~((ii))~~ (B) Medically acceptable alternatives to administration
24 of antipsychotic medications are not available, have not been
25 successful, or are not likely to be effective; and

26 ~~((iii))~~ (C) In the opinion of the physician, physician
27 assistant, or psychiatric advanced registered nurse practitioner with
28 responsibility for treatment of the person, or his or her designee,
29 the person's condition constitutes an emergency requiring the
30 treatment be instituted before a judicial hearing as authorized
31 pursuant to this section can be held.

32 If antipsychotic medications are administered over a person's
33 lack of consent pursuant to this subsection, a petition for an order
34 authorizing the administration of antipsychotic medications shall be
35 filed on the next judicial day. The hearing shall be held within two
36 judicial days. If deemed necessary by the physician, physician
37 assistant, or psychiatric advanced registered nurse practitioner with
38 responsibility for the treatment of the person, administration of
39 antipsychotic medications may continue until the hearing is held;

1 (~~(8)~~) (k) To dispose of property and sign contracts unless such
2 person has been adjudicated an incompetent in a court proceeding
3 directed to that particular issue;

4 (~~(9)~~) (l) Not to have psychosurgery performed on him or her
5 under any circumstances.

6 (2) Every person involuntarily detained or committed under the
7 provisions of this chapter is entitled to all the rights set forth in
8 this chapter and retains all rights not denied him or her under this
9 chapter except as limited by chapter 9.41 RCW.

10 (3) No person may be presumed incompetent as a consequence of
11 receiving evaluation or treatment for a behavioral health disorder.
12 Competency may not be determined or withdrawn except under the
13 provisions of chapter 10.77 or 11.88 RCW.

14 (4) Subject to RCW 71.05.745 and related regulations, persons
15 receiving evaluation or treatment under this chapter must be given a
16 reasonable choice of an available physician, physician assistant,
17 psychiatric advanced registered nurse practitioner, or other
18 professional person qualified to provide such services.

19 (5) Whenever any person is detained under this chapter, the
20 person must be advised that unless the person is released or
21 voluntarily admits himself or herself for treatment within five days
22 of the initial detention, a judicial hearing must be held in a
23 superior court within five days to determine whether there is
24 probable cause to detain the person for up to an additional fourteen
25 days based on an allegation that because of a behavioral health
26 disorder the person presents a likelihood of serious harm or is
27 gravely disabled, and that at the probable cause hearing the person
28 has the following rights:

29 (a) To communicate immediately with an attorney; to have an
30 attorney appointed if the person is indigent; and to be told the name
31 and address of the attorney that has been designated;

32 (b) To remain silent, and to know that any statement the person
33 makes may be used against him or her;

34 (c) To present evidence on the person's behalf;

35 (d) To cross-examine witnesses who testify against him or her;

36 (e) To be proceeded against by the rules of evidence;

37 (f) To have the court appoint a reasonably available independent
38 professional person to examine the person and testify in the hearing,
39 at public expense unless the person is able to bear the cost;

1 (g) To view and copy all petitions and reports in the court file;
2 and

3 (h) To refuse psychiatric medications, including antipsychotic
4 medication beginning twenty-four hours prior to the probable cause
5 hearing.

6 (6) The judicial hearing described in subsection (5) of this
7 section must be held according to the provisions of subsection (5) of
8 this section and rules promulgated by the supreme court.

9 (7)(a) Privileges between patients and physicians, physician
10 assistants, psychologists, or psychiatric advanced registered nurse
11 practitioners are deemed waived in proceedings under this chapter
12 relating to the administration of antipsychotic medications. As to
13 other proceedings under this chapter, the privileges are waived when
14 a court of competent jurisdiction in its discretion determines that
15 such waiver is necessary to protect either the detained person or the
16 public.

17 (b) The waiver of a privilege under this section is limited to
18 records or testimony relevant to evaluation of the detained person
19 for purposes of a proceeding under this chapter. Upon motion by the
20 detained person or on its own motion, the court shall examine a
21 record or testimony sought by a petitioner to determine whether it is
22 within the scope of the waiver.

23 (c) The record maker may not be required to testify in order to
24 introduce medical or psychological records of the detained person so
25 long as the requirements of RCW 5.45.020 are met except that portions
26 of the record which contain opinions as to the detained person's
27 mental state must be deleted from such records unless the person
28 making such conclusions is available for cross-examination.

29 (8) Nothing contained in this chapter prohibits the patient from
30 petitioning by writ of habeas corpus for release.

31 (9) Nothing in this section permits any person to knowingly
32 violate a no-contact order or a condition of an active judgment and
33 sentence or an active condition of supervision by the department of
34 corrections.

35 (10) The rights set forth under this section apply equally to
36 ninety-day or one hundred eighty-day hearings under RCW 71.05.310.

37 **Sec. 32.** RCW 71.05.230 and 2018 c 291 s 6 are each amended to
38 read as follows:

1 A person detained for seventy-two hour evaluation and treatment
2 may be committed for not more than fourteen additional days of
3 involuntary intensive treatment or ninety additional days of a less
4 restrictive alternative treatment. A petition may only be filed if
5 the following conditions are met:

6 (1) The professional staff of the facility providing evaluation
7 services has analyzed the person's condition and finds that the
8 condition is caused by (~~mental disorder or substance use~~) a
9 behavioral health disorder and results in: (a) A likelihood of
10 serious harm(~~(r) results in~~); (b) the person being gravely
11 disabled(~~(r)~~); or (~~results in~~) (c) the person being in need of
12 assisted outpatient behavioral health treatment(~~(r)~~); and are
13 prepared to testify those conditions are met; and

14 (2) The person has been advised of the need for voluntary
15 treatment and the professional staff of the facility has evidence
16 that he or she has not in good faith volunteered; and

17 (3) The facility providing intensive treatment is certified to
18 provide such treatment by the department or under RCW 71.05.745; and

19 (4) (a) (i) The professional staff of the facility or the
20 designated crisis responder has filed a petition with the court for a
21 fourteen day involuntary detention or a ninety day less restrictive
22 alternative. The petition must be signed by:

23 (A) One physician, physician assistant, or psychiatric advanced
24 registered nurse practitioner; and

25 (B) One physician, physician assistant, psychiatric advanced
26 registered nurse practitioner, or mental health professional.

27 (ii) If the petition is for substance use disorder treatment, the
28 petition may be signed by a chemical dependency professional instead
29 of a mental health professional and by an advanced registered nurse
30 practitioner instead of a psychiatric advanced registered nurse
31 practitioner. The persons signing the petition must have examined the
32 person.

33 (b) If involuntary detention is sought the petition shall state
34 facts that support the finding that such person, as a result of a
35 (~~mental disorder or substance use~~) behavioral health disorder,
36 presents a likelihood of serious harm, or is gravely disabled and
37 that there are no less restrictive alternatives to detention in the
38 best interest of such person or others. The petition shall state
39 specifically that less restrictive alternative treatment was
40 considered and specify why treatment less restrictive than detention

1 is not appropriate. If an involuntary less restrictive alternative is
2 sought, the petition shall state facts that support the finding that
3 such person, as a result of a (~~mental disorder or as a result of a~~
4 ~~substance use~~) behavioral health disorder, presents a likelihood of
5 serious harm, is gravely disabled, or is in need of assisted
6 outpatient behavioral health treatment, and shall set forth any
7 recommendations for less restrictive alternative treatment services;
8 and

9 (5) A copy of the petition has been served on the detained
10 person, his or her attorney and his or her guardian or conservator,
11 if any, prior to the probable cause hearing; and

12 (6) The court at the time the petition was filed and before the
13 probable cause hearing has appointed counsel to represent such person
14 if no other counsel has appeared; and

15 (7) The petition reflects that the person was informed of the
16 loss of firearm rights if involuntarily committed for mental health
17 treatment; and

18 (8) At the conclusion of the initial commitment period, the
19 professional staff of the agency or facility or the designated crisis
20 responder may petition for an additional period of either ninety days
21 of less restrictive alternative treatment or ninety days of
22 involuntary intensive treatment as provided in RCW 71.05.290; and

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

28 **Sec. 33.** RCW 71.05.230 and 2018 c 291 s 6 are each amended to
29 read as follows:

30 A person detained for (~~seventy-two hour~~) five-day evaluation
31 and treatment may be committed for not more than fourteen additional
32 days of involuntary intensive treatment or ninety additional days of
33 a less restrictive alternative treatment. A petition may only be
34 filed if the following conditions are met:

35 (1) The professional staff of the facility providing evaluation
36 services has analyzed the person's condition and finds that the
37 condition is caused by (~~mental disorder or substance use~~) a
38 behavioral health disorder and results in: (a) A likelihood of
39 serious harm(~~, results in~~); (b) the person being gravely

1 disabled(~~(r)~~); or (~~results in~~) (c) the person being in need of
2 assisted outpatient behavioral health treatment(~~(r)~~); and are
3 prepared to testify those conditions are met; and

4 (2) The person has been advised of the need for voluntary
5 treatment and the professional staff of the facility has evidence
6 that he or she has not in good faith volunteered; and

7 (3) The facility providing intensive treatment is certified to
8 provide such treatment by the department or under RCW 71.05.745; and

9 (4) (a) (i) The professional staff of the facility or the
10 designated crisis responder has filed a petition with the court for a
11 fourteen day involuntary detention or a ninety day less restrictive
12 alternative. The petition must be signed by:

13 (A) One physician, physician assistant, or psychiatric advanced
14 registered nurse practitioner; and

15 (B) One physician, physician assistant, psychiatric advanced
16 registered nurse practitioner, or mental health professional.

17 (ii) If the petition is for substance use disorder treatment, the
18 petition may be signed by a chemical dependency professional instead
19 of a mental health professional and by an advanced registered nurse
20 practitioner instead of a psychiatric advanced registered nurse
21 practitioner. The persons signing the petition must have examined the
22 person.

23 (b) If involuntary detention is sought the petition shall state
24 facts that support the finding that such person, as a result of a
25 (~~mental disorder or substance use~~) behavioral health disorder,
26 presents a likelihood of serious harm, or is gravely disabled and
27 that there are no less restrictive alternatives to detention in the
28 best interest of such person or others. The petition shall state
29 specifically that less restrictive alternative treatment was
30 considered and specify why treatment less restrictive than detention
31 is not appropriate. If an involuntary less restrictive alternative is
32 sought, the petition shall state facts that support the finding that
33 such person, as a result of a (~~mental disorder or as a result of a~~
34 ~~substance use~~) behavioral health disorder, presents a likelihood of
35 serious harm, is gravely disabled, or is in need of assisted
36 outpatient behavioral health treatment, and shall set forth any
37 recommendations for less restrictive alternative treatment services;
38 and

1 (5) A copy of the petition has been served on the detained
2 person, his or her attorney and his or her guardian or conservator,
3 if any, prior to the probable cause hearing; and

4 (6) The court at the time the petition was filed and before the
5 probable cause hearing has appointed counsel to represent such person
6 if no other counsel has appeared; and

7 (7) The petition reflects that the person was informed of the
8 loss of firearm rights if involuntarily committed for mental health
9 treatment; and

10 (8) At the conclusion of the initial commitment period, the
11 professional staff of the agency or facility or the designated crisis
12 responder may petition for an additional period of either ninety days
13 of less restrictive alternative treatment or ninety days of
14 involuntary intensive treatment as provided in RCW 71.05.290; and

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

20 **Sec. 34.** RCW 71.05.235 and 2016 sp.s. c 29 s 231 are each
21 amended to read as follows:

22 (1) If an individual is referred to a designated crisis responder
23 under RCW 10.77.088(1)(c)(i), the designated crisis responder shall
24 examine the individual within forty-eight hours. If the designated
25 crisis responder determines it is not appropriate to detain the
26 individual or petition for a ninety-day less restrictive alternative
27 under RCW 71.05.230(4), that decision shall be immediately presented
28 to the superior court for hearing. The court shall hold a hearing to
29 consider the decision of the designated crisis responder not later
30 than the next judicial day. At the hearing the superior court shall
31 review the determination of the designated crisis responder and
32 determine whether an order should be entered requiring the person to
33 be evaluated at an evaluation and treatment facility. No person
34 referred to an evaluation and treatment facility may be held at the
35 facility longer than seventy-two hours.

36 (2) If an individual is placed in an evaluation and treatment
37 facility under RCW 10.77.088(1)(c)(ii), a professional person shall
38 evaluate the individual for purposes of determining whether to file a
39 ninety-day inpatient or outpatient petition under this chapter.

1 Before expiration of the seventy-two hour evaluation period
2 authorized under RCW 10.77.088(1)(c)(ii), the professional person
3 shall file a petition or, if the recommendation of the professional
4 person is to release the individual, present his or her
5 recommendation to the superior court of the county in which the
6 criminal charge was dismissed. The superior court shall review the
7 recommendation not later than forty-eight hours, excluding Saturdays,
8 Sundays, and holidays, after the recommendation is presented. If the
9 court rejects the recommendation to unconditionally release the
10 individual, the court may order the individual detained at a
11 designated evaluation and treatment facility for not more than a
12 seventy-two hour evaluation and treatment period (~~and direct the~~
13 ~~individual to appear at a surety hearing before that court within~~
14 ~~seventy-two hours, or the court may release the individual but direct~~
15 ~~the individual to appear at a surety hearing set before that court~~
16 ~~within eleven days, at which time the prosecutor may file a petition~~
17 ~~under this chapter for ninety-day inpatient or outpatient treatment.~~
18 ~~If a petition is filed by the prosecutor, the court may order that~~
19 ~~the person named in the petition be detained at the evaluation and~~
20 ~~treatment facility that performed the evaluation under this~~
21 ~~subsection or order the respondent to be in outpatient treatment. If~~
22 ~~a petition is filed but the individual fails to appear in court for~~
23 ~~the surety hearing, the court shall order that a mental health~~
24 ~~professional or peace officer shall take such person or cause such~~
25 ~~person to be taken into custody and placed in an evaluation and~~
26 ~~treatment facility to be brought before the court the next judicial~~
27 ~~day after detention)). If the evaluation and treatment facility files
28 a ninety-day petition within the seventy-two-hour period, the clerk
29 shall set a hearing after the day of filing consistent with RCW
30 71.05.300. Upon the individual's first appearance in court after a
31 petition has been filed, proceedings under RCW 71.05.310 and
32 71.05.320 shall commence. For an individual subject to this
33 subsection, the (~~prosecutor or~~) professional person may directly
34 file a petition for ninety-day inpatient or outpatient treatment and
35 no petition for initial detention or fourteen-day detention is
36 required before such a petition may be filed.~~

37 (~~The court shall conduct the hearing on the petition filed under~~
38 ~~this subsection within five judicial days of the date the petition is~~
39 ~~filed. The court may continue the hearing upon the written request of~~
40 ~~the person named in the petition or the person's attorney, for good~~

1 ~~cause shown, which continuance shall not exceed five additional~~
2 ~~judicial days. If the person named in the petition requests a jury~~
3 ~~trial, the trial shall commence within ten judicial days of the date~~
4 ~~of the filing of the petition. The burden of proof shall be by clear,~~
5 ~~eogent, and convincing evidence and shall be upon the petitioner. The~~
6 ~~person shall be present at such proceeding, which shall in all~~
7 ~~respects accord with the constitutional guarantees of due process of~~
8 ~~law and the rules of evidence pursuant to RCW 71.05.360 (8) and (9).~~

9 ~~During the proceeding the person named in the petition shall~~
10 ~~continue to be detained and treated until released by order of the~~
11 ~~court. If no order has been made within thirty days after the filing~~
12 ~~of the petition, not including any extensions of time requested by~~
13 ~~the detained person or his or her attorney, the detained person shall~~
14 ~~be released.))~~

15 (3) If a designated crisis responder or the professional person
16 and prosecuting attorney for the county in which the criminal charge
17 was dismissed or attorney general, as appropriate, stipulate that the
18 individual does not present a likelihood of serious harm or is not
19 gravely disabled, the hearing under this section is not required and
20 the individual, if in custody, shall be released.

21 ~~((4) The individual shall have the rights specified in RCW~~
22 ~~71.05.360 (8) and (9).))~~

23 **Sec. 35.** RCW 71.05.235 and 2016 sp.s. c 29 s 231 are each
24 amended to read as follows:

25 (1) If an individual is referred to a designated crisis responder
26 under RCW 10.77.088(1)(c)(i), the designated crisis responder shall
27 examine the individual within forty-eight hours. If the designated
28 crisis responder determines it is not appropriate to detain the
29 individual or petition for a ninety-day less restrictive alternative
30 under RCW 71.05.230(4), that decision shall be immediately presented
31 to the superior court for hearing. The court shall hold a hearing to
32 consider the decision of the designated crisis responder not later
33 than the next judicial day. At the hearing the superior court shall
34 review the determination of the designated crisis responder and
35 determine whether an order should be entered requiring the person to
36 be evaluated at an evaluation and treatment facility. No person
37 referred to an evaluation and treatment facility may be held at the
38 facility longer than ~~((seventy-two hours))~~ five days.

1 (2) If an individual is placed in an evaluation and treatment
2 facility under RCW 10.77.088(1)(c)(ii), a professional person shall
3 evaluate the individual for purposes of determining whether to file a
4 ninety-day inpatient or outpatient petition under this chapter.
5 Before expiration of the (~~seventy-two hour~~) five-day evaluation
6 period authorized under RCW 10.77.088(1)(c)(ii), the professional
7 person shall file a petition or, if the recommendation of the
8 professional person is to release the individual, present his or her
9 recommendation to the superior court of the county in which the
10 criminal charge was dismissed. The superior court shall review the
11 recommendation not later than forty-eight hours, excluding Saturdays,
12 Sundays, and holidays, after the recommendation is presented. If the
13 court rejects the recommendation to unconditionally release the
14 individual, the court may order the individual detained at a
15 designated evaluation and treatment facility for not more than a
16 (~~seventy-two hour~~) five-day evaluation and treatment period (~~and~~
17 ~~direct the individual to appear at a surety hearing before that court~~
18 ~~within seventy-two hours, or the court may release the individual but~~
19 ~~direct the individual to appear at a surety hearing set before that~~
20 ~~court within eleven days, at which time the prosecutor may file a~~
21 ~~petition under this chapter for ninety-day inpatient or outpatient~~
22 ~~treatment. If a petition is filed by the prosecutor, the court may~~
23 ~~order that the person named in the petition be detained at the~~
24 ~~evaluation and treatment facility that performed the evaluation under~~
25 ~~this subsection or order the respondent to be in outpatient~~
26 ~~treatment. If a petition is filed but the individual fails to appear~~
27 ~~in court for the surety hearing, the court shall order that a mental~~
28 ~~health professional or peace officer shall take such person or cause~~
29 ~~such person to be taken into custody and placed in an evaluation and~~
30 ~~treatment facility to be brought before the court the next judicial~~
31 ~~day after detention)). If the evaluation and treatment facility files
32 a ninety-day petition within the five-day period, the clerk shall set
33 a hearing after the day of filing consistent with RCW 71.05.300. Upon
34 the individual's first appearance in court after a petition has been
35 filed, proceedings under RCW 71.05.310 and 71.05.320 shall commence.
36 For an individual subject to this subsection, the (~~prosecutor or~~)
37 professional person may directly file a petition for ninety-day
38 inpatient or outpatient treatment and no petition for initial
39 detention or fourteen-day detention is required before such a
40 petition may be filed.~~

1 (~~The court shall conduct the hearing on the petition filed under
2 this subsection within five judicial days of the date the petition is
3 filed. The court may continue the hearing upon the written request of
4 the person named in the petition or the person's attorney, for good
5 cause shown, which continuance shall not exceed five additional
6 judicial days. If the person named in the petition requests a jury
7 trial, the trial shall commence within ten judicial days of the date
8 of the filing of the petition. The burden of proof shall be by clear,
9 cogent, and convincing evidence and shall be upon the petitioner. The
10 person shall be present at such proceeding, which shall in all
11 respects accord with the constitutional guarantees of due process of
12 law and the rules of evidence pursuant to RCW 71.05.360 (8) and (9).~~)

13 ~~During the proceeding the person named in the petition shall
14 continue to be detained and treated until released by order of the
15 court. If no order has been made within thirty days after the filing
16 of the petition, not including any extensions of time requested by
17 the detained person or his or her attorney, the detained person shall
18 be released.)~~)

19 (3) If a designated crisis responder or the professional person
20 and prosecuting attorney for the county in which the criminal charge
21 was dismissed or attorney general, as appropriate, stipulate that the
22 individual does not present a likelihood of serious harm or is not
23 gravely disabled, the hearing under this section is not required and
24 the individual, if in custody, shall be released.

25 ~~((4) The individual shall have the rights specified in RCW
26 71.05.360 (8) and (9).))~~

27 NEW SECTION. **Sec. 36.** A new section is added to chapter 71.05
28 RCW to read as follows:

29 (1) In any proceeding for involuntary commitment under this
30 chapter, the court may continue or postpone such proceeding for a
31 reasonable time on motion of the respondent for good cause, or on
32 motion of the prosecuting attorney or the attorney general if:

33 (a) The respondent expressly consents to a continuance or delay
34 and there is a showing of good cause; or

35 (b) Such continuance is required in the proper administration of
36 justice and the respondent will not be substantially prejudiced in
37 the presentation of the respondent's case.

38 (2) The court may on its own motion continue the case when
39 required in due administration of justice and when the respondent

1 will not be substantially prejudiced in the presentation of the
2 respondent's case.

3 (3) The court shall state in any order of continuance or
4 postponement the grounds for the continuance or postponement and
5 whether detention will be extended.

6 **Sec. 37.** RCW 71.05.240 and 2018 c 291 s 7 and 2018 c 201 s 3009
7 are each reenacted and amended to read as follows:

8 (1) If a petition is filed for fourteen-day involuntary treatment
9 or ninety days of less restrictive alternative treatment, the court
10 shall hold a probable cause hearing within seventy-two hours of the
11 initial detention of such person as determined in RCW 71.05.180, or
12 at a time determined under RCW 71.05.148. (~~If requested by the~~
13 ~~person or his or her attorney, the hearing may be postponed for a~~
14 ~~period not to exceed forty-eight hours. The hearing may also be~~
15 ~~continued subject to the conditions set forth in RCW 71.05.210 or~~
16 ~~subject to the petitioner's showing of good cause for a period not to~~
17 ~~exceed twenty-four hours.))~~

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

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

32 (4)(a) Subject to (b) of this subsection, at the conclusion of
33 the probable cause hearing, if the court finds by a preponderance of
34 the evidence that such person, as the result of a (~~mental disorder~~
35 ~~or substance use~~) behavioral health disorder, presents a likelihood
36 of serious harm, or is gravely disabled, and, after considering less
37 restrictive alternatives to involuntary detention and treatment,
38 finds that no such alternatives are in the best interests of such
39 person or others, the court shall order that such person be detained

1 for involuntary treatment not to exceed fourteen days in a facility
2 licensed or certified to provide treatment by the department or under
3 RCW 71.05.745.

4 ~~((Commitment for up to fourteen days based on a substance use~~
5 ~~disorder must be to either a secure detoxification facility or an~~
6 ~~approved substance use disorder treatment program.)) A court may only
7 ~~((enter a commitment)) order ((based on a substance use disorder if~~
8 ~~there is an available)) commitment to a secure detoxification
9 facility or approved substance use disorder treatment program if
10 there is an available facility with adequate space for the person.~~~~

11 (c) At the conclusion of the probable cause hearing, if the court
12 finds by a preponderance of the evidence that such person, as the
13 result of a ~~((mental disorder or substance use))~~ behavioral health
14 disorder, presents a likelihood of serious harm, or is gravely
15 disabled, but that treatment in a less restrictive setting than
16 detention is in the best interest of such person or others, the court
17 shall order an appropriate less restrictive alternative course of
18 treatment for ~~((not to exceed))~~ up to ninety days.

19 (d) If the court finds by a preponderance of the evidence that
20 such person, as the result of a ~~((mental disorder or substance use))~~
21 behavioral health disorder, is in need of assisted outpatient
22 behavioral health treatment, and that the person does not present a
23 likelihood of serious harm ~~((or grave disability))~~ and is not gravely
24 disabled, the court shall order an appropriate less restrictive
25 alternative course of treatment ~~((not to exceed))~~ for up to ninety
26 days.

27 ~~((4))~~ (5) An order for less restrictive alternative treatment
28 must name the ~~((mental))~~ behavioral health service provider
29 responsible for identifying the services the person will receive in
30 accordance with RCW 71.05.585, and must include a requirement that
31 the person cooperate with the ~~((services planned by))~~ treatment
32 recommendations of the ~~((mental))~~ behavioral health service provider.

33 ~~((5))~~ (6) The court shall ~~((specifically state to such person~~
34 ~~and give such person notice))~~ notify the person orally and in writing
35 that if involuntary treatment is sought beyond the fourteen-day
36 ~~((period))~~ inpatient or ~~((beyond the))~~ ninety-day~~((s of))~~ less
37 restrictive treatment ~~((is to be sought))~~ period, ~~((such))~~ the person
38 ~~((will have))~~ has the right to a full hearing or jury trial ~~((as~~
39 ~~required by))~~ under RCW 71.05.310. If the commitment is for mental
40 health treatment, the court shall also ~~((state to))~~ notify the person

1 ((and provide written notice)) orally and in writing that the person
2 is barred from the possession of firearms and that the prohibition
3 remains in effect until a court restores his or her right to possess
4 a firearm under RCW 9.41.047.

5 **Sec. 38.** RCW 71.05.240 and 2018 c 291 s 7 and 2018 c 201 s 3009
6 are each reenacted and amended to read as follows:

7 (1) If a petition is filed for fourteen-day involuntary treatment
8 or ninety days of less restrictive alternative treatment, the court
9 shall hold a probable cause hearing within ~~((seventy-two hours))~~ five
10 days of the initial detention of such person as determined in RCW
11 71.05.180, or at a time determined under RCW 71.05.148. ~~((If~~
12 ~~requested by the person or his or her attorney, the hearing may be~~
13 ~~postponed for a period not to exceed forty-eight hours. The hearing~~
14 ~~may also be continued subject to the conditions set forth in RCW~~
15 ~~71.05.210 or subject to the petitioner's showing of good cause for a~~
16 ~~period not to exceed twenty-four hours.))~~

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

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

31 (4)(a) Subject to (b) of this subsection, at the conclusion of
32 the probable cause hearing, if the court finds by a preponderance of
33 the evidence that such person, as the result of a ~~((mental disorder~~
34 ~~or substance use))~~ behavioral health disorder, presents a likelihood
35 of serious harm, or is gravely disabled, and, after considering less
36 restrictive alternatives to involuntary detention and treatment,
37 finds that no such alternatives are in the best interests of such
38 person or others, the court shall order that such person be detained
39 for involuntary treatment not to exceed fourteen days in a facility

1 licensed or certified to provide treatment by the department or under
2 RCW 71.05.745.

3 ~~((Commitment for up to fourteen days based on a substance use~~
4 ~~disorder must be to either a secure detoxification facility or an~~
5 ~~approved substance use disorder treatment program.)) A court may only
6 ~~((enter a commitment)) order ((based on a substance use disorder if~~
7 ~~there is an available)) commitment to a secure detoxification
8 facility or approved substance use disorder treatment program if
9 there is an available facility with adequate space for the person.~~~~

10 (c) At the conclusion of the probable cause hearing, if the court
11 finds by a preponderance of the evidence that such person, as the
12 result of a ~~((mental disorder or substance use))~~ behavioral health
13 disorder, presents a likelihood of serious harm, or is gravely
14 disabled, but that treatment in a less restrictive setting than
15 detention is in the best interest of such person or others, the court
16 shall order an appropriate less restrictive alternative course of
17 treatment for ~~((not to exceed))~~ up to ninety days.

18 (d) If the court finds by a preponderance of the evidence that
19 such person, as the result of a ~~((mental disorder or substance use))~~
20 behavioral health disorder, is in need of assisted outpatient
21 behavioral health treatment, and that the person does not present a
22 likelihood of serious harm ~~((or grave disability))~~ and is not gravely
23 disabled, the court shall order an appropriate less restrictive
24 alternative course of treatment ~~((not to exceed))~~ for up to ninety
25 days.

26 ~~((4))~~ (5) An order for less restrictive alternative treatment
27 must name the ~~((mental))~~ behavioral health service provider
28 responsible for identifying the services the person will receive in
29 accordance with RCW 71.05.585, and must include a requirement that
30 the person cooperate with the ~~((services planned by))~~ treatment
31 recommendations of the ~~((mental))~~ behavioral health service provider.

32 ~~((5))~~ (6) The court shall ~~((specifically state to such person~~
33 ~~and give such person notice))~~ notify the person orally and in writing
34 that if involuntary treatment is sought beyond the fourteen-day
35 ~~((period))~~ inpatient or ~~((beyond the))~~ ninety-day~~((s of))~~ less
36 restrictive treatment ~~((is to be sought))~~ period, ~~((such))~~ the person
37 ~~((will have))~~ has the right to a full hearing or jury trial ~~((as~~
38 ~~required by))~~ under RCW 71.05.310. If the commitment is for mental
39 health treatment, the court shall also ~~((state to))~~ notify the person
40 ~~((and provide written notice))~~ orally and in writing that the person

1 is barred from the possession of firearms and that the prohibition
2 remains in effect until a court restores his or her right to possess
3 a firearm under RCW 9.41.047.

4 **Sec. 39.** RCW 71.05.240 and 2018 c 291 s 8 and 2018 c 201 s 3010
5 are each reenacted and amended to read as follows:

6 (1) If a petition is filed for fourteen-day involuntary treatment
7 or ninety days of less restrictive alternative treatment, the court
8 shall hold a probable cause hearing within ~~((seventy-two hours))~~ five
9 days of the initial detention of such person as determined in RCW
10 71.05.180, or at a time determined under RCW 71.05.148. ~~((If~~
11 ~~requested by the person or his or her attorney, the hearing may be~~
12 ~~postponed for a period not to exceed forty-eight hours. The hearing~~
13 ~~may also be continued subject to the conditions set forth in RCW~~
14 ~~71.05.210 or subject to the petitioner's showing of good cause for a~~
15 ~~period not to exceed twenty-four hours.))~~

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

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

30 (4)(a) ~~((Subject to (b) of this subsection,))~~ At the conclusion
31 of the probable cause hearing, if the court finds by a preponderance
32 of the evidence that such person, as the result of a ~~((mental~~
33 ~~disorder or substance use))~~ behavioral health disorder, presents a
34 likelihood of serious harm, or is gravely disabled, and, after
35 considering less restrictive alternatives to involuntary detention
36 and treatment, finds that no such alternatives are in the best
37 interests of such person or others, the court shall order that such
38 person be detained for involuntary treatment not to exceed fourteen

1 days in a facility licensed or certified to provide treatment by the
2 department or under RCW 71.05.745.

3 ~~(b) ((Commitment for up to fourteen days based on a substance use
4 disorder must be to either a secure detoxification facility or an
5 approved substance use disorder treatment program.~~

6 ~~(e))~~ At the conclusion of the probable cause hearing, if the
7 court finds by a preponderance of the evidence that such person, as
8 the result of a ~~((mental disorder or substance use))~~ behavioral
9 health disorder, presents a likelihood of serious harm~~((7))~~ or is
10 gravely disabled, but that treatment in a less restrictive setting
11 than detention is in the best interest of such person or others, the
12 court shall order an appropriate less restrictive alternative course
13 of treatment for ~~((not to exceed))~~ up to ninety days.

14 ~~((d))~~ (c) If the court finds by a preponderance of the evidence
15 that such person, as the result of a ~~((mental disorder or substance
16 use))~~ behavioral health disorder, is in need of assisted outpatient
17 behavioral health treatment, and that the person does not present a
18 likelihood of serious harm ~~((or grave disability))~~ and is not gravely
19 disabled, the court shall order an appropriate less restrictive
20 alternative course of treatment ~~((not to exceed))~~ for up to ninety
21 days.

22 ~~((4))~~ (5) An order for less restrictive alternative treatment
23 must name the ~~((mental))~~ behavioral health service provider
24 responsible for identifying the services the person will receive in
25 accordance with RCW 71.05.585, and must include a requirement that
26 the person cooperate with the ~~((services planned by))~~ treatment
27 recommendations of the ~~((mental))~~ behavioral health service provider.

28 ~~((5))~~ (6) The court shall ~~((specifically state to such person
29 and give such person notice))~~ notify the person orally and in writing
30 that if involuntary treatment is sought beyond the fourteen-day
31 ~~((period))~~ inpatient or ~~((beyond the))~~ ninety-day~~((s of))~~ less
32 restrictive treatment ~~((is to be sought))~~ period, such person ~~((will
33 have))~~ has the right to a full hearing or jury trial ~~((as required
34 by))~~ under RCW 71.05.310. If the commitment is for mental health
35 treatment, the court shall also ~~((state to))~~ notify the person ~~((and
36 provide written notice))~~ orally and in writing that the person is
37 barred from the possession of firearms and that the prohibition
38 remains in effect until a court restores his or her right to possess
39 a firearm under RCW 9.41.047.

1 **Sec. 40.** RCW 71.05.280 and 2018 c 291 s 15 are each amended to
2 read as follows:

3 At the expiration of the fourteen-day period of intensive
4 treatment, a person may be committed for further treatment pursuant
5 to RCW 71.05.320 if:

6 (1) Such person after having been taken into custody for
7 evaluation and treatment has threatened, attempted, or inflicted: (a)
8 Physical harm upon the person of another or himself or herself, or
9 substantial damage upon the property of another, and (b) as a result
10 of (~~mental disorder or substance use~~) a behavioral health disorder
11 presents a likelihood of serious harm; or

12 (2) Such person was taken into custody as a result of conduct in
13 which he or she attempted or inflicted physical harm upon the person
14 of another or himself or herself, or substantial damage upon the
15 property of others, and continues to present, as a result of (~~mental
16 disorder or substance use~~) a behavioral health disorder, a
17 likelihood of serious harm; or

18 (3) Such person has been determined to be incompetent and
19 criminal charges have been dismissed pursuant to RCW 10.77.086(4),
20 and has committed acts constituting a felony, and as a result of a
21 (~~mental~~) behavioral health disorder, presents a substantial
22 likelihood of repeating similar acts.

23 (a) In any proceeding pursuant to this subsection it shall not be
24 necessary to show intent, willfulness, or state of mind as an element
25 of the crime;

26 (b) For any person subject to commitment under this subsection
27 where the charge underlying the finding of incompetence is for a
28 felony classified as violent under RCW 9.94A.030, the court shall
29 determine whether the acts the person committed constitute a violent
30 offense under RCW 9.94A.030; or

31 (4) Such person is gravely disabled; or

32 (5) Such person is in need of assisted outpatient behavioral
33 health treatment.

34 **Sec. 41.** RCW 71.05.290 and 2017 3rd sp.s. c 14 s 18 are each
35 amended to read as follows:

36 (1) At any time during a person's fourteen day intensive
37 treatment period, the professional person in charge of a treatment
38 facility or his or her professional designee or the designated crisis
39 responder may petition the superior court for an order requiring such

1 person to undergo an additional period of treatment. Such petition
2 must be based on one or more of the grounds set forth in RCW
3 71.05.280.

4 (2) (a) (i) The petition shall summarize the facts which support
5 the need for further commitment and shall be supported by affidavits
6 based on an examination of the patient and signed by:

7 (A) One physician, physician assistant, or psychiatric advanced
8 registered nurse practitioner; and

9 (B) One physician, physician assistant, psychiatric advanced
10 registered nurse practitioner, or mental health professional.

11 (ii) If the petition is for substance use disorder treatment, the
12 petition may be signed by a chemical dependency professional instead
13 of a mental health professional and by an advanced registered nurse
14 practitioner instead of a psychiatric advanced registered nurse
15 practitioner.

16 (b) The affidavits shall describe in detail the behavior of the
17 detained person which supports the petition and shall explain what,
18 if any, less restrictive treatments which are alternatives to
19 detention are available to such person, and shall state the
20 willingness of the affiant to testify to such facts in subsequent
21 judicial proceedings under this chapter. If less restrictive
22 alternative treatment is sought, the petition shall set forth any
23 recommendations for less restrictive alternative treatment services.

24 (3) If a person has been determined to be incompetent pursuant to
25 RCW 10.77.086(4), then the professional person in charge of the
26 treatment facility or his or her professional designee or the
27 designated crisis responder may directly file a petition for one
28 hundred eighty-day treatment under RCW 71.05.280(3), or for ninety-
29 day treatment under RCW 71.05.280 (1), (2), (4), or (5). No petition
30 for initial detention or fourteen day detention is required before
31 such a petition may be filed.

32 **Sec. 42.** RCW 71.05.300 and 2017 3rd sp.s. c 14 s 19 are each
33 amended to read as follows:

34 (1) The petition for ninety day treatment shall be filed with the
35 clerk of the superior court at least three days before expiration of
36 the fourteen-day period of intensive treatment. (~~At the time of~~
37 ~~filing such petition,~~) The clerk shall set a (~~time for the person~~
38 ~~to come before the court on the next judicial day after the day of~~
39 ~~filing unless such appearance is waived by the person's attorney, and~~

1 ~~the clerk shall~~) trial setting date as provided in RCW 71.05.310 on
2 the next judicial day after the date of filing the petition and
3 notify the designated crisis responder. The designated crisis
4 responder shall immediately notify the person detained, his or her
5 attorney, if any, and his or her guardian or conservator, if any, the
6 prosecuting attorney, and the behavioral health organization
7 administrator, and provide a copy of the petition to such persons as
8 soon as possible. The behavioral health organization administrator or
9 designee may review the petition and may appear and testify at the
10 full hearing on the petition.

11 (2) ~~((At the time set for appearance))~~ The attorney for the
12 detained person ~~((shall be brought before the court, unless such~~
13 ~~appearance has been waived and the court))~~ shall advise him or her of
14 his or her right to be represented by an attorney, his or her right
15 to a jury trial, and, if the petition is for commitment for mental
16 health treatment, his or her loss of firearm rights if involuntarily
17 committed. If the detained person is not represented by an attorney,
18 or is indigent or is unwilling to retain an attorney, the court shall
19 immediately appoint an attorney to represent him or her. The court
20 shall, if requested, appoint a reasonably available licensed
21 physician, physician assistant, psychiatric advanced registered nurse
22 practitioner, psychologist, psychiatrist, or other professional
23 person~~((7))~~ designated by the detained person to examine and testify
24 on behalf of the detained person.

25 (3) The court may, if requested, also appoint a professional
26 person as defined in RCW 71.05.020 to seek less restrictive
27 alternative courses of treatment and to testify on behalf of the
28 detained person. In the case of a person with a developmental
29 disability who has been determined to be incompetent pursuant to RCW
30 10.77.086(4), ~~((then))~~ the appointed professional person under this
31 section shall be a developmental disabilities professional.

32 ~~((4) The court shall also set a date for a full hearing on the~~
33 ~~petition as provided in RCW 71.05.310.)~~

34 **Sec. 43.** RCW 71.05.310 and 2012 c 256 s 8 are each amended to
35 read as follows:

36 The court shall ~~((conduct))~~ set a hearing on the petition for
37 ninety-day or one hundred eighty-day treatment within five judicial
38 days of the ~~((first court appearance after the probable cause~~
39 ~~hearing))~~ trial setting hearing, or within ten judicial days for a

1 petition filed under RCW 71.05.280(3). The court may continue the
2 hearing (~~((for good cause upon the written request of the person named~~
3 ~~in the petition or the person's attorney. The court may continue for~~
4 ~~good cause the hearing on a petition filed under RCW 71.05.280(3)~~
5 ~~upon written request by the person named in the petition, the~~
6 ~~person's attorney, or the petitioner)) in accordance with section 36~~
7 ~~of this act.~~ If the person named in the petition requests a jury
8 trial, the trial (~~((shall commence))~~) must be set within ten judicial
9 days of the (~~((first court appearance after the probable cause~~
10 ~~hearing))~~) next judicial day after the date of filing the petition.
11 The burden of proof shall be by clear, cogent, and convincing
12 evidence and shall be upon the petitioner. The person (~~((shall))~~) has
13 the right to be present at such proceeding, which shall in all
14 respects accord with the constitutional guarantees of due process of
15 law and the rules of evidence (~~((pursuant to RCW 71.05.360 (8) and~~
16 ~~(9))~~) under RCW 71.05.217.

17 During the proceeding, the person named in the petition shall
18 continue to be treated until released by order of the superior court
19 or discharged by the medical provider. If (~~((no order has been made))~~)
20 the hearing has not commenced within thirty days after the filing of
21 the petition, not including extensions of time (~~((requested by the~~
22 ~~detained person or his or her attorney, or the petitioner in the case~~
23 ~~of a petition filed under RCW 71.05.280(3))~~) ordered under section 36
24 of this act, the detained person shall be released.

25 **Sec. 44.** RCW 71.05.320 and 2018 c 201 s 3012 are each amended to
26 read as follows:

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

35 (b) If the order for inpatient treatment is based on a substance
36 use disorder, (~~((treatment must take place at an approved substance~~
37 ~~use disorder treatment program.))~~) the court may only enter an order
38 for commitment (~~((based on a substance use disorder))~~) if there is an

1 available (~~approved substance use disorder~~) treatment program with
2 adequate space for the person.

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

9 (2) If the court or jury finds that grounds set forth in RCW
10 71.05.280 have been proven, but finds that treatment less restrictive
11 than detention will be in the best interest of the person or others,
12 then the court shall remand him or her to the custody of the
13 department of social and health services or to a facility certified
14 for ninety day treatment by the department or to a less restrictive
15 alternative for a further period of less restrictive treatment not to
16 exceed ninety days from the date of judgment. (~~If the order for less~~
17 ~~restrictive treatment is based on a substance use disorder, treatment~~
18 ~~must be provided by an approved substance use disorder treatment~~
19 ~~program.~~) If the grounds set forth in RCW 71.05.280(3) are the basis
20 of commitment, then the period of treatment may be up to but not
21 exceed one hundred eighty days from the date of judgment. If the
22 court or jury finds that the grounds set forth in RCW 71.05.280(5)
23 have been proven, and provide the only basis for commitment, the
24 court must enter an order for less restrictive alternative treatment
25 for up to ninety days from the date of judgment and may not order
26 inpatient treatment.

27 (3) An order for less restrictive alternative treatment entered
28 under subsection (2) of this section must name the (~~mental~~)
29 behavioral health service provider responsible for identifying the
30 services the person will receive in accordance with RCW 71.05.585,
31 and must include a requirement that the person cooperate with the
32 services planned by the (~~mental~~) behavioral health service
33 provider.

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

1 (a) During the current period of court ordered treatment: (i) Has
2 threatened, attempted, or inflicted physical harm upon the person of
3 another, or substantial damage upon the property of another, and (ii)
4 as a result of a (~~mental disorder, substance use~~) behavioral health
5 disorder(~~(7)~~) or developmental disability presents a likelihood of
6 serious harm; or

7 (b) Was taken into custody as a result of conduct in which he or
8 she attempted or inflicted serious physical harm upon the person of
9 another, and continues to present, as a result of (~~mental disorder,~~
10 ~~substance use~~) a behavioral health disorder(~~(7)~~) or developmental
11 disability, a likelihood of serious harm; or

12 (c) (i) Is in custody pursuant to RCW 71.05.280(3) and as a result
13 of (~~mental~~) a behavioral health disorder or developmental
14 disability continues to present a substantial likelihood of repeating
15 acts similar to the charged criminal behavior, when considering the
16 person's life history, progress in treatment, and the public safety.

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

32 (d) Continues to be gravely disabled; or

33 (e) Is in need of assisted outpatient (~~mental~~) behavioral
34 health treatment.

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

38 If less restrictive alternative treatment is sought, the petition
39 shall set forth any recommendations for less restrictive alternative
40 treatment services.

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

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

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

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

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

1 **Sec. 45.** RCW 71.05.320 and 2018 c 201 s 3013 are each amended to
2 read as follows:

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

11 If the (~~order for inpatient treatment is based on a substance~~
12 ~~use disorder, treatment must take place at an approved substance use~~
13 ~~disorder treatment program. If the~~) grounds set forth in RCW
14 71.05.280(3) are the basis of commitment, then the period of
15 treatment may be up to but not exceed one hundred eighty days from
16 the date of judgment to the custody of the department of social and
17 health services or to a facility certified for one hundred eighty-day
18 treatment by the department or under RCW 71.05.745.

19 (2) If the court or jury finds that grounds set forth in RCW
20 71.05.280 have been proven, but finds that treatment less restrictive
21 than detention will be in the best interest of the person or others,
22 then the court shall remand him or her to the custody of the
23 department of social and health services or to a facility certified
24 for ninety day treatment by the department or to a less restrictive
25 alternative for a further period of less restrictive treatment not to
26 exceed ninety days from the date of judgment. (~~If the order for less~~
27 ~~restrictive treatment is based on a substance use disorder, treatment~~
28 ~~must be provided by an approved substance use disorder treatment~~
29 ~~program.~~) If the grounds set forth in RCW 71.05.280(3) are the basis
30 of commitment, then the period of treatment may be up to but not
31 exceed one hundred eighty days from the date of judgment. If the
32 court or jury finds that the grounds set forth in RCW 71.05.280(5)
33 have been proven, and provide the only basis for commitment, the
34 court must enter an order for less restrictive alternative treatment
35 for up to ninety days from the date of judgment and may not order
36 inpatient treatment.

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

1 and must include a requirement that the person cooperate with the
2 services planned by the ((~~mental~~)) behavioral health service
3 provider.

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

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

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

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

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

1 support and treatment, which may be initiated prior to or after
2 discharge from the state hospital; or

3 (d) Continues to be gravely disabled; or

4 (e) Is in need of assisted outpatient (~~mental~~) behavioral
5 health treatment.

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

9 If less restrictive alternative treatment is sought, the petition
10 shall set forth any recommendations for less restrictive alternative
11 treatment services.

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

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

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

1 permissible on the same grounds and pursuant to the same procedures
2 as the original one hundred eighty-day commitment.

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

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

11 **Sec. 46.** RCW 71.05.380 and 2016 sp.s. c 29 s 245 are each
12 amended to read as follows:

13 All persons voluntarily entering or remaining in any facility,
14 institution, or hospital providing evaluation and treatment for
15 (~~mental disorders or substance use~~) behavioral health disorders
16 shall have no less than all rights secured to involuntarily detained
17 persons by RCW (~~71.05.360 and~~) 71.05.217.

18 **Sec. 47.** RCW 71.05.445 and 2018 c 201 s 3021 are each amended to
19 read as follows:

20 (1)(a) When a (~~mental~~) behavioral health service provider
21 conducts its initial assessment for a person receiving court-ordered
22 treatment, the service provider shall inquire and shall be told by
23 the offender whether he or she is subject to supervision by the
24 department of corrections.

25 (b) When a person receiving court-ordered treatment or treatment
26 ordered by the department of corrections discloses to his or her
27 (~~mental~~) behavioral health service provider that he or she is
28 subject to supervision by the department of corrections, the
29 (~~mental~~) behavioral health service provider shall notify the
30 department of corrections that he or she is treating the offender and
31 shall notify the offender that his or her community corrections
32 officer will be notified of the treatment, provided that if the
33 offender has received relief from disclosure pursuant to RCW
34 9.94A.562 or 71.05.132 and the offender has provided the (~~mental~~)
35 behavioral health service provider with a copy of the order granting
36 relief from disclosure pursuant to RCW 9.94A.562 or 71.05.132, the
37 (~~mental~~) behavioral health service provider is not required to
38 notify the department of corrections that the (~~mental~~) behavioral

1 health service provider is treating the offender. The notification
2 may be written or oral and shall not require the consent of the
3 offender. If an oral notification is made, it must be confirmed by a
4 written notification. For purposes of this section, a written
5 notification includes notification by email or facsimile, so long as
6 the notifying (~~mental~~) behavioral health service provider is
7 clearly identified.

8 (2) The information to be released to the department of
9 corrections shall include all relevant records and reports, as
10 defined by rule, necessary for the department of corrections to carry
11 out its duties.

12 (3) The authority and the department of corrections, in
13 consultation with behavioral health organizations, (~~mental~~)
14 behavioral health service providers as defined in RCW 71.05.020,
15 (~~mental~~) behavioral health consumers, and advocates for persons
16 with (~~mental illness~~) behavioral health disorders, shall adopt
17 rules to implement the provisions of this section related to the type
18 and scope of information to be released. These rules shall:

19 (a) Enhance and facilitate the ability of the department of
20 corrections to carry out its responsibility of planning and ensuring
21 community protection with respect to persons subject to sentencing
22 under chapter 9.94A or 9.95 RCW, including accessing and releasing or
23 disclosing information of persons who received (~~mental~~) behavioral
24 health services as a minor; and

25 (b) Establish requirements for the notification of persons under
26 the supervision of the department of corrections regarding the
27 provisions of this section.

28 (4) The information received by the department of corrections
29 under this section shall remain confidential and subject to the
30 limitations on disclosure outlined in this chapter, except as
31 provided in RCW 72.09.585.

32 (5) No (~~mental~~) behavioral health service provider or
33 individual employed by a (~~mental~~) behavioral health service
34 provider shall be held responsible for information released to or
35 used by the department of corrections under the provisions of this
36 section or rules adopted under this section.

37 (6) Whenever federal law or federal regulations restrict the
38 release of information and records related to (~~mental~~) behavioral
39 health services for any patient who receives treatment for alcoholism

1 or drug dependency, the release of the information may be restricted
2 as necessary to comply with federal law and regulations.

3 (7) This section does not modify the terms and conditions of
4 disclosure of information related to sexually transmitted diseases
5 under chapter 70.24 RCW.

6 (8) The authority shall, subject to available resources,
7 electronically, or by the most cost-effective means available,
8 provide the department of corrections with the names, last dates of
9 services, and addresses of specific behavioral health organizations
10 and ~~((mental))~~ behavioral health service providers that delivered
11 ~~((mental))~~ behavioral health services to a person subject to chapter
12 9.94A or 9.95 RCW pursuant to an agreement between the authority and
13 the department of corrections.

14 **Sec. 48.** RCW 71.05.455 and 2016 c 158 s 2 are each amended to
15 read as follows:

16 When funded, the Washington association of sheriffs and police
17 chiefs, in consultation with the criminal justice training
18 commission, must develop and adopt a model policy for use by law
19 enforcement agencies relating to a law enforcement officer's referral
20 of a person to a ~~((mental))~~ behavioral health agency after receiving
21 a report of threatened or attempted suicide. The model policy must
22 complement the criminal justice training commission's crisis
23 intervention training curriculum.

24 **Sec. 49.** RCW 71.05.457 and 2016 c 158 s 3 are each amended to
25 read as follows:

26 By July 1, 2017, all general authority Washington law enforcement
27 agencies must adopt a policy establishing criteria and procedures for
28 a law enforcement officer to refer a person to a ~~((mental))~~
29 behavioral health agency after receiving a report of threatened or
30 attempted suicide.

31 **Sec. 50.** RCW 71.05.458 and 2016 c 158 s 5 are each amended to
32 read as follows:

33 As soon as possible, but no later than twenty-four hours from
34 receiving a referral from a law enforcement officer or law
35 enforcement agency, excluding Saturdays, Sundays, and holidays, a
36 mental health professional contacted by the designated ~~((mental~~
37 ~~health professional))~~ crisis responder agency must attempt to contact

1 the referred person to determine whether additional mental health
2 intervention is necessary including, if needed, an assessment by a
3 designated (~~mental health professional~~) crisis responder for
4 initial detention under RCW 71.05.150 or 71.05.153. Documentation of
5 the mental health professional's attempt to contact and assess the
6 person must be maintained by the designated (~~mental health~~
7 ~~professional~~) crisis responder agency.

8 **Sec. 51.** RCW 71.05.525 and 2018 c 201 s 3024 are each amended to
9 read as follows:

10 When, in the judgment of the department of social and health
11 services, the welfare of any person committed to or confined in any
12 state juvenile correctional institution or facility necessitates that
13 such a person be transferred or moved for observation, diagnosis or
14 treatment to any state institution or facility for the care of
15 juveniles with (~~mental illness~~) behavioral health disorders the
16 secretary of the department of social and health services, or his or
17 her designee, is authorized to order and effect such move or
18 transfer: PROVIDED, HOWEVER, That the secretary of the department of
19 social and health services shall adopt and implement procedures to
20 assure that persons so transferred shall, while detained or confined
21 in such institution or facility for the care of juveniles with
22 (~~mental illness~~) behavioral health disorders, be provided with
23 substantially similar opportunities for parole or early release
24 evaluation and determination as persons detained or confined in state
25 juvenile correctional institutions or facilities: PROVIDED, FURTHER,
26 That the secretary of the department of social and health services
27 shall notify the original committing court of such transfer.

28 **Sec. 52.** RCW 71.05.530 and 2016 sp.s. c 29 s 247 are each
29 amended to read as follows:

30 Evaluation and treatment facilities and secure detoxification
31 facilities authorized pursuant to this chapter may be part of the
32 comprehensive community (~~mental~~) behavioral health services program
33 conducted in counties pursuant to chapter 71.24 RCW, and may receive
34 funding pursuant to the provisions thereof.

35 **Sec. 53.** RCW 71.05.585 and 2018 c 291 s 2 are each amended to
36 read as follows:

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

3 (a) Assignment of a care coordinator;

4 (b) An intake evaluation with the provider of the less
5 restrictive alternative treatment;

6 (c) A psychiatric evaluation;

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

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

12 (f) An individual crisis plan; and

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

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

18 (a) Medication management;

19 (b) Psychotherapy;

20 (c) Nursing;

21 (d) Substance abuse counseling;

22 (e) Residential treatment; and

23 (f) Support for housing, benefits, education, and employment.

24 (3) If the person was provided with involuntary medication under
25 RCW 71.05.215 or pursuant to a judicial order during the involuntary
26 commitment period, the less restrictive alternative treatment order
27 may authorize the less restrictive alternative treatment provider or
28 its designee to administer involuntary antipsychotic medication to
29 the person if the provider has attempted and failed to obtain the
30 informed consent of the person and there is a concurring medical
31 opinion approving the medication by a psychiatrist, physician
32 assistant working with a supervising psychiatrist, psychiatric
33 advanced registered nurse practitioner, or physician or physician
34 assistant in consultation with an independent mental health
35 professional with prescribing authority.

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

1 (~~(4)~~) (5) The care coordinator assigned to a person ordered to
2 less restrictive alternative treatment must submit an individualized
3 plan for the person's treatment services to the court that entered
4 the order. An initial plan must be submitted as soon as possible
5 following the intake evaluation and a revised plan must be submitted
6 upon any subsequent modification in which a type of service is
7 removed from or added to the treatment plan.

8 (~~(5)~~) (6) For the purpose of this section, "care coordinator"
9 means a 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 orders and is responsible for coordinating service activities with
14 other agencies and establishing and maintaining a therapeutic
15 relationship with the individual on a continuing basis.

16 **Sec. 54.** RCW 71.05.590 and 2018 c 291 s 9 and 2018 c 201 s 3026
17 are each reenacted and amended to read as follows:

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

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

26 (b) Substantial deterioration in the person's functioning has
27 occurred;

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

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

32 (2) Actions taken under this section must include a flexible
33 range of responses of varying levels of intensity appropriate to the
34 circumstances and consistent with the interests of the individual and
35 the public in personal autonomy, safety, recovery, and compliance.
36 Available actions may include, but are not limited to, any of the
37 following:

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

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

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

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

1 revocation procedures under subsection (4) of this section in
2 appropriate circumstances; and

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

8 (3) The facility or agency designated to provide outpatient
9 treatment shall notify the secretary of the department of social and
10 health services or designated crisis responder when a person fails to
11 adhere to terms and conditions of court ordered treatment or
12 experiences substantial deterioration in his or her condition and, as
13 a result, presents an increased likelihood of serious harm.

14 (4) (a) Except as provided in subsection (6) of this section, a
15 designated crisis responder or the secretary of the department of
16 social and health services may upon their own motion or notification
17 by the facility or agency designated to provide outpatient care order
18 a person subject to a court order under this chapter to be
19 apprehended and taken into custody and temporary detention in an
20 evaluation and treatment facility (~~((in or near the county in which he
21 or she is receiving outpatient treatment if the person is committed
22 for mental health treatment, or, if the person is committed for
23 substance use disorder treatment, in a)),~~ an available secure
24 detoxification facility with adequate space, or an available approved
25 substance use disorder treatment program (~~((if either is available))~~
26 with adequate space, in or near the county in which he or she is
27 receiving outpatient treatment (~~((and has adequate space))~~).
28 Proceedings under this subsection (4) may be initiated without
29 ordering the apprehension and detention of the person.

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

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

15 (d) Except as provided in subsection (6) of this section, the
16 issues for the court to determine are whether: (i) The person adhered
17 to the terms and conditions of the court order; (ii) substantial
18 deterioration in the person's functioning has occurred; (iii) there
19 is evidence of substantial decompensation with a reasonable
20 probability that the decompensation can be reversed by further
21 inpatient treatment; or (iv) there is a likelihood of serious harm;
22 and, if any of the above conditions apply, whether the court should
23 reinstate or modify the person's less restrictive alternative or
24 conditional release order or order the person's detention for
25 inpatient treatment. The person may waive the court hearing and allow
26 the court to enter a stipulated order upon the agreement of all
27 parties. If the court orders detention for inpatient treatment, the
28 treatment period (~~(may be for no longer than the period)~~) must be for
29 fourteen days from the revocation hearing if the outpatient order was
30 based on a petition under RCW 71.05.160 or 71.05.230. If the court
31 orders detention for inpatient treatment and the outpatient order was
32 based on a petition under RCW 71.05.290 or 71.05.320, the number of
33 days remaining until the outpatient order must be converted to days
34 of inpatient treatment authorized in the original court order. A
35 court may not issue an order to detain a person for inpatient
36 treatment in a secure detoxification facility or approved substance
37 use disorder treatment program under this subsection unless there is
38 a secure detoxification facility or approved substance use disorder
39 treatment program available and with adequate space for the person.

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

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

27 (b) A person detained under this subsection may be held for
28 evaluation for up to seventy-two hours, excluding weekends and
29 holidays, pending a court hearing. If the person is not detained, the
30 hearing must be scheduled within seventy-two hours of service on the
31 person. The designated crisis responder or the secretary may modify
32 or rescind the order at any time prior to commencement of the court
33 hearing.

34 (c) The issues for the court to determine are whether to continue
35 the detention of the person for inpatient treatment or whether the
36 court should reinstate or modify the person's less restrictive
37 alternative order or order the person's detention for inpatient
38 treatment. To continue detention after the seventy-two hour period,
39 the court must find that the person, as a result of a (~~mental~~
40 ~~disorder or substance use~~) behavioral health disorder, presents a

1 likelihood of serious harm or is gravely disabled and, after
2 considering less restrictive alternatives to involuntary detention
3 and treatment, that no such alternatives are in the best interest of
4 the person or others.

5 (d) A court may not issue an order to detain a person for
6 inpatient treatment in a secure detoxification facility or approved
7 substance use disorder program under this subsection unless there is
8 a secure detoxification facility or approved substance use disorder
9 treatment program available and with adequate space for the person.

10 **Sec. 55.** RCW 71.05.590 and 2018 c 291 s 9 and 2018 c 201 s 3026
11 are each reenacted and amended to read as follows:

12 (1) Either an agency or facility designated to monitor or provide
13 services under a less restrictive alternative order or conditional
14 release order, or a designated crisis responder, may take action to
15 enforce, modify, or revoke a less restrictive alternative or
16 conditional release order. The agency, facility, or designated crisis
17 responder must determine that:

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

20 (b) Substantial deterioration in the person's functioning has
21 occurred;

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

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

26 (2) Actions taken under this section must include a flexible
27 range of responses of varying levels of intensity appropriate to the
28 circumstances and consistent with the interests of the individual and
29 the public in personal autonomy, safety, recovery, and compliance.
30 Available actions may include, but are not limited to, any of the
31 following:

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

35 (b) To increase the intensity of outpatient services provided to
36 the person by increasing the frequency of contacts with the provider,
37 referring the person for an assessment for assertive community
38 services, or by other means;

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

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

35 (e) To initiate revocation procedures under subsection (4) of
36 this section or, if the current commitment is solely based on the
37 person being in need of assisted outpatient behavioral health
38 treatment as defined in RCW 71.05.020, initiate initial inpatient
39 detention procedures under subsection (6) of this section.

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

7 (4) (a) Except as provided in subsection (6) of this section, a
8 designated crisis responder or the secretary of the department of
9 social and health services may upon their own motion or notification
10 by the facility or agency designated to provide outpatient care order
11 a person subject to a court order under this chapter to be
12 apprehended and taken into custody and temporary detention in an
13 evaluation and treatment facility (~~in or near the county in which he~~
14 ~~or she is receiving outpatient treatment if the person is committed~~
15 ~~for mental health treatment, or, if the person is committed for~~
16 ~~substance use disorder treatment, in a)), an available secure
17 detoxification facility with adequate space, or an available approved
18 substance use disorder treatment program (~~if either is available~~)
19 with adequate space, in or near the county in which he or she is
20 receiving outpatient treatment (~~and has adequate space~~).
21 Proceedings under this subsection (4) may be initiated without
22 ordering the apprehension and detention of the person.~~

23 (b) Except as provided in subsection (6) of this section, a
24 person detained under this subsection (4) must be held until such
25 time, not exceeding five days, as a hearing can be scheduled to
26 determine whether or not the person should be returned to the
27 hospital or facility from which he or she had been released. If the
28 person is not detained, the hearing must be scheduled within five
29 days of service on the person. The designated crisis responder or the
30 secretary of the department of social and health services may modify
31 or rescind the order at any time prior to commencement of the court
32 hearing.

33 (c) The designated crisis responder or secretary of the
34 department of social and health services shall file a revocation
35 petition and order of apprehension and detention with the court of
36 the county where the person is currently located or being detained.
37 The designated crisis responder shall serve the person and their
38 attorney, guardian, and conservator, if any. The person has the same
39 rights with respect to notice, hearing, and counsel as in any
40 involuntary treatment proceeding, except as specifically set forth in

1 this section. There is no right to jury trial. The venue for
2 proceedings is the county where the petition is filed. Notice of the
3 filing must be provided to the court that originally ordered
4 commitment, if different from the court where the petition for
5 revocation is filed, within two judicial days of the person's
6 detention.

7 (d) Except as provided in subsection (6) of this section, the
8 issues for the court to determine are whether: (i) The person adhered
9 to the terms and conditions of the court order; (ii) substantial
10 deterioration in the person's functioning has occurred; (iii) there
11 is evidence of substantial decompensation with a reasonable
12 probability that the decompensation can be reversed by further
13 inpatient treatment; or (iv) there is a likelihood of serious harm;
14 and, if any of the above conditions apply, whether the court should
15 reinstate or modify the person's less restrictive alternative or
16 conditional release order or order the person's detention for
17 inpatient treatment. The person may waive the court hearing and allow
18 the court to enter a stipulated order upon the agreement of all
19 parties. If the court orders detention for inpatient treatment, the
20 treatment period (~~(may be for no longer than the period)~~) must be for
21 fourteen days from the revocation hearing if the outpatient order was
22 based on a petition under RCW 71.05.160 or 71.05.230. If the court
23 orders detention for inpatient treatment and the outpatient order was
24 based on a petition under RCW 71.05.290 or 71.05.320, the number of
25 days remaining until the outpatient order must be converted to days
26 of inpatient treatment authorized in the original court order. A
27 court may not issue an order to detain a person for inpatient
28 treatment in a secure detoxification facility or approved substance
29 use disorder treatment program under this subsection unless there is
30 a secure detoxification facility or approved substance use disorder
31 treatment program available and with adequate space for the person.

32 (5) In determining whether or not to take action under this
33 section the designated crisis responder, agency, or facility must
34 consider the factors specified under RCW 71.05.212 and the court must
35 consider the factors specified under RCW 71.05.245 as they apply to
36 the question of whether to enforce, modify, or revoke a court order
37 for involuntary treatment.

38 (6) (a) If the current commitment is solely based on the person
39 being in need of assisted outpatient behavioral health treatment as
40 defined in RCW 71.05.020, a designated crisis responder may initiate

1 inpatient detention procedures under RCW 71.05.150 or 71.05.153 when
2 appropriate. A designated crisis responder or the secretary may, upon
3 their own motion or notification by the facility or agency designated
4 to provide outpatient care to a person subject to a less restrictive
5 alternative treatment order under RCW 71.05.320 subsequent to an
6 order for assisted outpatient behavioral health treatment entered
7 under RCW 71.05.148, order the person to be apprehended and taken
8 into custody and temporary detention for inpatient evaluation in an
9 evaluation and treatment facility (~~in or near the county in which he~~
10 ~~or she is receiving outpatient treatment if the person is committed~~
11 ~~for mental health treatment, or, if the person is committed for~~
12 ~~substance use disorder treatment, in a~~), secure detoxification
13 facility, or in an approved substance use disorder treatment program
14 (~~if either is available~~), in or near the county in which he or she
15 is receiving outpatient treatment. Proceedings under this subsection
16 may be initiated without ordering the apprehension and detention of
17 the person.

18 (b) A person detained under this subsection may be held for
19 evaluation for up to (~~seventy-two hours~~) five days, excluding
20 weekends and holidays, pending a court hearing. If the person is not
21 detained, the hearing must be scheduled within (~~seventy-two hours~~)
22 five days of service on the person. The designated crisis responder
23 or 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 (~~seventy-two hour~~) five-
30 day period, the court must find that the person, as a result of a
31 (~~mental disorder or substance use~~) behavioral health disorder,
32 presents a likelihood of serious harm or is gravely disabled and,
33 after considering less restrictive alternatives to involuntary
34 detention and treatment, that no such alternatives are in the best
35 interest of the person or others.

36 (d) A court may not issue an order to detain a person for
37 inpatient treatment in a secure detoxification facility or approved
38 substance use disorder program under this subsection unless there is
39 a secure detoxification facility or approved substance use disorder
40 treatment program available and with adequate space for the person.

1 **Sec. 56.** RCW 71.05.590 and 2018 c 291 s 10 and 2018 c 201 s 3027
2 are each reenacted and amended to read as follows:

3 (1) Either an agency or facility designated to monitor or provide
4 services under a less restrictive alternative order or conditional
5 release order, or a designated crisis responder, may take action to
6 enforce, modify, or revoke a less restrictive alternative or
7 conditional release order. The agency, facility, or designated crisis
8 responder must determine that:

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

11 (b) Substantial deterioration in the person's functioning has
12 occurred;

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

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

17 (2) Actions taken under this section must include a flexible
18 range of responses of varying levels of intensity appropriate to the
19 circumstances and consistent with the interests of the individual and
20 the public in personal autonomy, safety, recovery, and compliance.
21 Available actions may include, but are not limited to, any of the
22 following:

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

26 (b) To increase the intensity of outpatient services provided to
27 the person by increasing the frequency of contacts with the provider,
28 referring the person for an assessment for assertive community
29 services, or by other means;

30 (c) To request a court hearing for review and modification of the
31 court order. The request must be made to or by the court with
32 jurisdiction over the order and specify the circumstances that give
33 rise to the request and what modification is being sought. The county
34 prosecutor shall assist the agency or facility in requesting this
35 hearing and issuing an appropriate summons to the person. This
36 subsection does not limit the inherent authority of a treatment
37 provider to alter conditions of treatment for clinical reasons, and
38 is intended to be used only when court intervention is necessary or
39 advisable to secure the person's compliance and prevent
40 decompensation or deterioration;

1 (d) To cause the person to be transported by a peace officer,
2 designated crisis responder, or other means to the agency or facility
3 monitoring or providing services under the court order, or to a
4 triage facility, crisis stabilization unit, emergency department,
5 ~~((or to an))~~ evaluation and treatment facility ~~((if the person is~~
6 ~~committed for mental health treatment))~~, ~~((or to a))~~ secure
7 detoxification facility, or an approved substance use disorder
8 treatment program ~~((if the person is committed for substance use~~
9 ~~disorder treatment))~~. The person may be detained at the facility for
10 up to twelve hours for the purpose of an evaluation to determine
11 whether modification, revocation, or commitment proceedings are
12 necessary and appropriate to stabilize the person and prevent
13 decompensation, deterioration, or physical harm. Temporary detention
14 for evaluation under this subsection is intended to occur only
15 following a pattern of noncompliance or the failure of reasonable
16 attempts at outreach and engagement, and may occur only when in the
17 clinical judgment of a designated crisis responder or the
18 professional person in charge of an agency or facility designated to
19 monitor less restrictive alternative services temporary detention is
20 appropriate. This subsection does not limit the ability or obligation
21 to pursue revocation procedures under subsection (4) of this section
22 in appropriate circumstances; and

23 (e) To initiate revocation procedures under subsection (4) of
24 this section or, if the current commitment is solely based on the
25 person being in need of assisted outpatient behavioral health
26 treatment as defined in RCW 71.05.020, initial inpatient detention
27 procedures under subsection (6) of this section.

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

34 (4) (a) Except as provided in subsection (6) of this section, a
35 designated crisis responder or the secretary of the department of
36 social and health services may upon their own motion or notification
37 by the facility or agency designated to provide outpatient care order
38 a person subject to a court order under this chapter to be
39 apprehended and taken into custody and temporary detention in an
40 evaluation and treatment facility ~~((in or near the county in which he~~

1 ~~or she is receiving outpatient treatment if the person is committed~~
2 ~~for mental health treatment, or, if the person is committed for~~
3 ~~substance use disorder treatment)), in a secure detoxification~~
4 ~~facility, or in an approved substance use disorder treatment program~~
5 ~~((if either is available)), in or near the county in which he or she~~
6 is receiving outpatient treatment. Proceedings under this subsection
7 (4) may be initiated without ordering the apprehension and detention
8 of the person.

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

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

33 (d) Except as provided in subsection (6) of this section, the
34 issues for the court to determine are whether: (i) The person adhered
35 to the terms and conditions of the court order; (ii) substantial
36 deterioration in the person's functioning has occurred; (iii) there
37 is evidence of substantial decompensation with a reasonable
38 probability that the decompensation can be reversed by further
39 inpatient treatment; or (iv) there is a likelihood of serious harm;
40 and, if any of the above conditions apply, whether the court should

1 reinstate or modify the person's less restrictive alternative or
2 conditional release order or order the person's detention for
3 inpatient treatment. The person may waive the court hearing and allow
4 the court to enter a stipulated order upon the agreement of all
5 parties. If the court orders detention for inpatient treatment, the
6 treatment period (~~(may be for no longer than the period)~~) must be for
7 fourteen days from the revocation hearing if the outpatient order was
8 based on a petition under RCW 71.05.160 or 71.05.230. If the court
9 orders detention for inpatient treatment and the outpatient order was
10 based on a petition under RCW 71.05.290 or 71.05.320, the number of
11 days remaining until the outpatient order must be converted to days
12 of inpatient treatment authorized in the original court order.

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

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

39 (b) A person detained under this subsection may be held for
40 evaluation for up to (~~(seventy-two hours))~~) five days, excluding

1 weekends and holidays, pending a court hearing. The designated crisis
2 responder or the secretary may modify or rescind the order at any
3 time prior to commencement of the court hearing.

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

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

20 **Sec. 57.** RCW 71.05.720 and 2018 c 201 s 3029 are each amended to
21 read as follows:

22 Annually, all community mental health employees who work directly
23 with clients shall be provided with training on safety and violence
24 prevention topics described in RCW 49.19.030. The curriculum for the
25 training shall be developed collaboratively among the authority, the
26 department, contracted ~~((mental))~~ behavioral health service
27 providers, and employee organizations that represent community mental
28 health workers.

29 **Sec. 58.** RCW 71.05.740 and 2018 c 201 s 3031 are each amended to
30 read as follows:

31 All behavioral health organizations in the state of Washington
32 must forward historical ~~((mental))~~ behavioral health involuntary
33 commitment information retained by the organization including
34 identifying information and dates of commitment to the authority. As
35 soon as feasible, the behavioral health organizations must arrange to
36 report new commitment data to the authority within twenty-four hours.
37 Commitment information under this section does not need to be resent
38 if it is already in the possession of the authority. Behavioral

1 health organizations and the authority shall be immune from liability
2 related to the sharing of commitment information under this section.

3 **Sec. 59.** RCW 71.05.745 and 2018 c 201 s 3032 are each amended to
4 read as follows:

5 (1) The authority may use a single bed certification process as
6 outlined in rule to provide additional treatment capacity for a
7 person suffering from a (~~mental~~) behavioral health disorder for
8 whom an evaluation and treatment facility, secure detoxification
9 facility, or approved substance use disorder treatment program bed is
10 not available. The facility that is the proposed site of the single
11 bed certification must be a facility that is willing and able to
12 provide the person with timely and appropriate treatment either
13 directly or by arrangement with other public or private agencies.

14 (2) A single bed certification must be specific to the patient
15 receiving treatment.

16 (3) A designated crisis responder who submits an application for
17 a single bed certification for treatment at a facility that is
18 willing and able to provide timely and appropriate (~~mental~~)
19 behavioral health treatment in good faith belief that the single bed
20 certification is appropriate may presume that the single bed
21 certification will be approved for the purpose of completing the
22 detention process and responding to other emergency calls.

23 (4) The authority may adopt rules implementing this section and
24 continue to enforce rules it has already adopted except where
25 inconsistent with this section.

26 **Sec. 60.** RCW 71.05.750 and 2018 c 201 s 3033 are each amended to
27 read as follows:

28 (1) A designated crisis responder shall make a report to the
29 authority when he or she determines a person meets detention criteria
30 under RCW 71.05.150, 71.05.153, 71.34.700, or 71.34.710 and there are
31 not any beds available at an evaluation and treatment facility, the
32 person has not been provisionally accepted for admission by a
33 facility, and the person cannot be served on a single bed
34 certification or less restrictive alternative. Starting at the time
35 when the designated crisis responder determines a person meets
36 detention criteria and the investigation has been completed, the
37 designated crisis responder has twenty-four hours to submit a
38 completed report to the authority.

1 (2) The report required under subsection (1) of this section must
2 contain at a minimum:

3 (a) The date and time that the investigation was completed;

4 (b) The identity of the responsible behavioral health
5 administrative services organization and managed care organization,
6 if applicable;

7 (c) The county in which the person met detention criteria;

8 (d) A list of facilities which refused to admit the person; and

9 (e) Identifying information for the person, including age or date
10 of birth.

11 (3) The authority shall develop a standardized reporting form or
12 modify the current form used for single bed certifications for the
13 report required under subsection (2) of this section and may require
14 additional reporting elements as it determines are necessary or
15 supportive. The authority shall also determine the method for the
16 transmission of the completed report from the designated crisis
17 responder to the authority.

18 (4) The authority shall create quarterly reports displayed on its
19 web site that summarize the information reported under subsection (2)
20 of this section. At a minimum, the reports must display data by
21 county and by month. The reports must also include the number of
22 single bed certifications granted by category. The categories must
23 include all of the reasons that the authority recognizes for issuing
24 a single bed certification, as identified in rule.

25 (5) The reports provided according to this section may not
26 display "protected health information" as that term is used in the
27 federal health insurance portability and accountability act of 1996,
28 nor information contained in "mental health treatment records" or
29 "behavioral health treatment records" as (~~that term is~~) these terms
30 are used in chapter 70.02 RCW or elsewhere in state law, and must
31 otherwise be compliant with state and federal privacy laws.

32 (6) For purposes of this section, the term "single bed
33 certification" means a situation in which an adult on a seventy-two
34 hour detention, fourteen-day commitment, ninety-day commitment, or
35 one hundred eighty-day commitment is detained to a facility that is:

36 (a) Not licensed or certified as an inpatient evaluation and
37 treatment facility; or

38 (b) A licensed or certified inpatient evaluation and treatment
39 facility that is already at capacity.

1 **Sec. 61.** RCW 71.05.750 and 2018 c 201 s 3033 are each amended to
2 read as follows:

3 (1) A designated crisis responder shall make a report to the
4 authority when he or she determines a person meets detention criteria
5 under RCW 71.05.150, 71.05.153, 71.34.700, or 71.34.710 and there are
6 not any beds available at an evaluation and treatment facility, the
7 person has not been provisionally accepted for admission by a
8 facility, and the person cannot be served on a single bed
9 certification or less restrictive alternative. Starting at the time
10 when the designated crisis responder determines a person meets
11 detention criteria and the investigation has been completed, the
12 designated crisis responder has twenty-four hours to submit a
13 completed report to the authority.

14 (2) The report required under subsection (1) of this section must
15 contain at a minimum:

16 (a) The date and time that the investigation was completed;

17 (b) The identity of the responsible behavioral health
18 administrative services organization and managed care organization,
19 if applicable;

20 (c) The county in which the person met detention criteria;

21 (d) A list of facilities which refused to admit the person; and

22 (e) Identifying information for the person, including age or date
23 of birth.

24 (3) The authority shall develop a standardized reporting form or
25 modify the current form used for single bed certifications for the
26 report required under subsection (2) of this section and may require
27 additional reporting elements as it determines are necessary or
28 supportive. The authority shall also determine the method for the
29 transmission of the completed report from the designated crisis
30 responder to the authority.

31 (4) The authority shall create quarterly reports displayed on its
32 web site that summarize the information reported under subsection (2)
33 of this section. At a minimum, the reports must display data by
34 county and by month. The reports must also include the number of
35 single bed certifications granted by category. The categories must
36 include all of the reasons that the authority recognizes for issuing
37 a single bed certification, as identified in rule.

38 (5) The reports provided according to this section may not
39 display "protected health information" as that term is used in the
40 federal health insurance portability and accountability act of 1996,

1 nor information contained in "mental health treatment records" or
2 "behavioral health treatment records" as ~~((that term is))~~ these terms
3 are used in chapter 70.02 RCW or elsewhere in state law, and must
4 otherwise be compliant with state and federal privacy laws.

5 (6) For purposes of this section, the term "single bed
6 certification" means a situation in which an adult on a ~~((seventy-two~~
7 ~~hour))~~ five-day detention, fourteen-day commitment, ninety-day
8 commitment, or one hundred eighty-day commitment is detained to a
9 facility that is:

10 (a) Not licensed or certified as an inpatient evaluation and
11 treatment facility; or

12 (b) A licensed or certified inpatient evaluation and treatment
13 facility that is already at capacity.

14 **Sec. 62.** RCW 71.05.760 and 2018 c 201 s 3035 are each amended to
15 read as follows:

16 (1) (a) ~~((By April 1, 2018, the authority, by rule, must combine~~
17 ~~the functions of a designated mental health professional and~~
18 ~~designated chemical dependency specialist by establishing a~~
19 ~~designated crisis responder who is authorized to conduct~~
20 ~~investigations, detain persons up to seventy-two hours to the proper~~
21 ~~facility, and carry out the other functions identified in this~~
22 ~~chapter and chapter 71.34 RCW.))~~ The behavioral health organizations
23 shall provide training to the designated crisis responders as
24 required by the authority.

25 (b) (i) To qualify as a designated crisis responder, a person must
26 have received chemical dependency training as determined by the
27 department and be a:

28 (A) Psychiatrist, psychologist, physician assistant working with
29 a supervising psychiatrist, psychiatric advanced registered nurse
30 practitioner, or social worker;

31 (B) Person who is licensed by the department as a mental health
32 counselor or mental health counselor associate, or marriage and
33 family therapist or marriage and family therapist associate;

34 (C) Person with a master's degree or further advanced degree in
35 counseling or one of the social sciences from an accredited college
36 or university and who have, in addition, at least two years of
37 experience in direct treatment of persons with mental illness or
38 emotional disturbance, such experience gained under the direction of
39 a mental health professional;

1 (D) Person who meets the waiver criteria of RCW 71.24.260, which
2 waiver was granted before 1986;

3 (E) Person who had an approved waiver to perform the duties of a
4 mental health professional that was requested by the regional support
5 network and granted by the department of social and health services
6 before July 1, 2001; or

7 (F) Person who has been granted an exception of the minimum
8 requirements of a mental health professional by the department
9 consistent with rules adopted by the secretary.

10 (ii) Training must include chemical dependency training specific
11 to the duties of a designated crisis responder, including diagnosis
12 of substance abuse and dependence and assessment of risk associated
13 with substance use.

14 (c) The authority must develop a transition process for any
15 person who has been designated as a designated mental health
16 professional or a designated chemical dependency specialist before
17 April 1, 2018, to be converted to a designated crisis responder. The
18 behavioral health organizations shall provide training, as required
19 by the authority, to persons converting to designated crisis
20 responders, which must include both mental health and chemical
21 dependency training applicable to the designated crisis responder
22 role.

23 (2)(a) The authority must ensure that at least one sixteen-bed
24 secure detoxification facility is operational by April 1, 2018, and
25 that at least two sixteen-bed secure detoxification facilities are
26 operational by April 1, 2019.

27 (b) If, at any time during the implementation of secure
28 detoxification facility capacity, federal funding becomes unavailable
29 for federal match for services provided in secure detoxification
30 facilities, then the authority must cease any expansion of secure
31 detoxification facilities until further direction is provided by the
32 legislature.

33 **Sec. 63.** RCW 71.34.010 and 2018 c 201 s 5001 are each amended to
34 read as follows:

35 (1) It is the purpose of this chapter to assure that minors in
36 need of (~~mental~~) behavioral health care and treatment receive an
37 appropriate continuum of culturally relevant care and treatment,
38 including prevention and early intervention, self-directed care,
39 parent-directed care, and involuntary treatment. To facilitate the

1 continuum of care and treatment to minors in out-of-home placements,
2 all divisions of the authority and the department that provide
3 (~~mental~~) behavioral health services to minors shall jointly plan
4 and deliver those services.

5 (2) It is also the purpose of this chapter to protect the rights
6 of minors against needless hospitalization and deprivations of
7 liberty and to enable treatment decisions to be made in response to
8 clinical needs in accordance with sound professional judgment. The
9 (~~mental~~) behavioral health care and treatment providers shall
10 encourage the use of voluntary services and, whenever clinically
11 appropriate, the providers shall offer less restrictive alternatives
12 to inpatient treatment. Additionally, all (~~mental~~) behavioral
13 health care and treatment providers shall assure that minors' parents
14 are given an opportunity to participate in the treatment decisions
15 for their minor children. The (~~mental~~) behavioral health care and
16 treatment providers shall, to the extent possible, offer services
17 that involve minors' parents or family.

18 (3) (a) It is the intent of the legislature to enhance continuity
19 of care for minors with serious behavioral health disorders that can
20 be controlled or stabilized in a less restrictive alternative
21 commitment. Within the guidelines stated in *In re LaBelle*, 107 Wn.2d
22 196 (1986), the legislature intends to encourage appropriate
23 interventions at a point when there is the best opportunity to
24 restore the minor to or maintain satisfactory functioning.

25 (b) For minors with a prior history or pattern of repeated
26 hospitalizations or law enforcement interventions due to
27 decompensation, the consideration of prior behavioral health history
28 is particularly relevant in determining whether the minor would
29 receive, if released, such care as is essential for his or her health
30 or safety.

31 (c) Therefore, the legislature finds that for minors who are
32 currently under a commitment order, a prior history of decompensation
33 leading to repeated hospitalizations or law enforcement interventions
34 should be given great weight in determining whether a new less
35 restrictive alternative commitment should be ordered.

36 (4) It is also the purpose of this chapter to protect the health
37 and safety of minors suffering from behavioral health disorders and
38 to protect public safety through use of the parens patriae and police
39 powers of the state. Accordingly, when construing the requirements of
40 this chapter the court must focus on the merits of the petition,

1 except where requirements have been totally disregarded, as provided
2 in *In re C.W.*, 147 Wn.2d 259, 281 (2002). A presumption in favor of
3 deciding petitions on their merits furthers both public and private
4 interests because the mental and physical well-being of minors as
5 well as public safety may be implicated by the decision to release a
6 minor and discontinue his or her treatment.

7 (5) It is also the purpose of this chapter to assure the ability
8 of parents to exercise reasonable, compassionate care and control of
9 their minor children when there is a medical necessity for treatment
10 and without the requirement of filing a petition under this chapter.

11 **Sec. 64.** RCW 71.34.020 and 2018 c 201 s 5002 are each amended to
12 read as follows:

13 Unless the context clearly requires otherwise, the definitions in
14 this section apply throughout this chapter.

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

21 (2) "Approved substance use disorder treatment program" means a
22 program for minors with substance use disorders provided by a
23 treatment program licensed or certified by the department of health
24 as meeting standards adopted under chapter 71.24 RCW.

25 (3) "Authority" means the Washington state health care authority.

26 (4) (~~"Chemical dependency" means:~~

27 ~~(a) Alcoholism;~~

28 ~~(b) Drug addiction; or~~

29 ~~(c) Dependence on alcohol and one or more other psychoactive~~
30 ~~chemicals, as the context requires.~~

31 ~~(5))~~ "Chemical dependency professional" means a person certified
32 as a chemical dependency professional by the department of health
33 under chapter 18.205 RCW.

34 ~~((6))~~ (5) "Child psychiatrist" means a person having a license
35 as a physician and surgeon in this state, who has had graduate
36 training in child psychiatry in a program approved by the American
37 Medical Association or the American Osteopathic Association, and who
38 is board eligible or board certified in child psychiatry.

39 ~~((7))~~ (6) "Children's mental health specialist" means:

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

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

8 ~~((+8))~~ (7) "Commitment" means a determination by a judge or
9 court commissioner, made after a commitment hearing, that the minor
10 is in need of inpatient diagnosis, evaluation, or treatment or that
11 the minor is in need of less restrictive alternative treatment.

12 ~~((+9))~~ (8) "Department" means the department of social and
13 health services.

14 ~~((+10))~~ (9) "Designated crisis responder" means a person
15 designated by a behavioral health organization to perform the duties
16 specified in this chapter.

17 ~~((+11))~~ (10) "Director" means the director of the authority.

18 ~~((+12))~~ (11) "Drug addiction" means a disease, characterized by
19 a dependency on psychoactive chemicals, loss of control over the
20 amount and circumstances of use, symptoms of tolerance, physiological
21 or psychological withdrawal, or both, if use is reduced or
22 discontinued, and impairment of health or disruption of social or
23 economic functioning.

24 ~~((+13))~~ (12) "Evaluation and treatment facility" means a public
25 or private facility or unit that is licensed or certified by the
26 department of health to provide emergency, inpatient, residential, or
27 outpatient mental health evaluation and treatment services for
28 minors. A physically separate and separately-operated portion of a
29 state hospital may be designated as an evaluation and treatment
30 facility for minors. A facility which is part of or operated by the
31 state or federal agency does not require licensure or certification.
32 No correctional institution or facility, juvenile court detention
33 facility, or jail may be an evaluation and treatment facility within
34 the meaning of this chapter.

35 ~~((+14))~~ (13) "Evaluation and treatment program" means the total
36 system of services and facilities coordinated and approved by a
37 county or combination of counties for the evaluation and treatment of
38 minors under this chapter.

39 ~~((+15))~~ (14) "Gravely disabled minor" means a minor who, as a
40 result of a ~~((mental))~~ behavioral health disorder ~~((, or as a result~~

1 ~~of the use of alcohol or other psychoactive chemicals)), (a) is in~~
2 danger of serious physical harm resulting from a failure to provide
3 for his or her essential human needs of health or safety, or (b)

4 manifests severe deterioration (~~(in routine functioning)~~) from safe
5 behavior evidenced by repeated and escalating loss of cognitive or
6 volitional control over his or her actions and is not receiving such
7 care as is essential for his or her health or safety.

8 ~~((16))~~ (15) "Inpatient treatment" means twenty-four-hour-per-
9 day mental health care provided within a general hospital,
10 psychiatric hospital, residential treatment facility licensed or
11 certified by the department of health as an evaluation and treatment
12 facility for minors, secure detoxification facility for minors, or
13 approved substance use disorder treatment program for minors.

14 ~~((17))~~ (16) "Intoxicated minor" means a minor whose mental or
15 physical functioning is substantially impaired as a result of the use
16 of alcohol or other psychoactive chemicals.

17 ~~((18))~~ (17) "Less restrictive alternative" or "less restrictive
18 setting" means outpatient treatment provided to a minor who is not
19 residing in a facility providing inpatient treatment as defined in
20 this chapter.

21 ~~((19))~~ (18) "Likelihood of serious harm" means (~~(either)~~):

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

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

36 ~~((20))~~ (19) "Medical necessity" for inpatient care means a
37 requested service which is reasonably calculated to: (a) Diagnose,
38 correct, cure, or alleviate a mental disorder or substance use
39 disorder; or (b) prevent the progression of a substance use disorder
40 that endangers life or causes suffering and pain, or results in

1 illness or infirmity or threatens to cause or aggravate a handicap,
2 or causes physical deformity or malfunction, and there is no adequate
3 less restrictive alternative available.

4 ~~((21))~~ (20) "Mental disorder" means any organic, mental, or
5 emotional impairment that has substantial adverse effects on an
6 individual's cognitive or volitional functions. The presence of
7 alcohol abuse, drug abuse, juvenile criminal history, antisocial
8 behavior, or intellectual disabilities alone is insufficient to
9 justify a finding of "mental disorder" within the meaning of this
10 section.

11 ~~((22))~~ (21) "Mental health professional" means a psychiatrist,
12 psychiatric advanced registered nurse practitioner, physician
13 assistant working with a supervising psychiatrist, psychologist,
14 psychiatric nurse, or social worker, and such other mental health
15 professionals as may be defined by rules adopted by the secretary of
16 the department of health under this chapter.

17 ~~((23))~~ (22) "Minor" means any person under the age of eighteen
18 years.

19 ~~((24))~~ (23) "Outpatient treatment" means any of the
20 nonresidential services mandated under chapter 71.24 RCW and provided
21 by licensed or certified service providers as identified by RCW
22 71.24.025.

23 ~~((25))~~ (24) "Parent" means:

24 (a) A biological or adoptive parent who has legal custody of the
25 child, including either parent if custody is shared under a joint
26 custody agreement; or

27 (b) A person or agency judicially appointed as legal guardian or
28 custodian of the child.

29 ~~((26))~~ (25) "Private agency" means any person, partnership,
30 corporation, or association that is not a public agency, whether or
31 not financed in whole or in part by public funds, that constitutes an
32 evaluation and treatment facility or private institution, or
33 hospital, or approved substance use disorder treatment program, that
34 is conducted for, or includes a distinct unit, floor, or ward
35 conducted for, the care and treatment of persons with mental illness,
36 substance use disorders, or both mental illness and substance use
37 disorders.

38 ~~((27))~~ (26) "Physician assistant" means a person licensed as a
39 physician assistant under chapter 18.57A or 18.71A RCW.

1 ~~((28))~~ (27) "Professional person in charge" or "professional
2 person" means a physician, other mental health professional, or other
3 person empowered by an evaluation and treatment facility, secure
4 detoxification facility, or approved substance use disorder treatment
5 program with authority to make admission and discharge decisions on
6 behalf of that facility.

7 ~~((29))~~ (28) "Psychiatric nurse" means a registered nurse who
8 has experience in the direct treatment of persons who have a mental
9 illness or who are emotionally disturbed, such experience gained
10 under the supervision of a mental health professional.

11 ~~((30))~~ (29) "Psychiatrist" means a person having a license as a
12 physician in this state who has completed residency training in
13 psychiatry in a program approved by the American Medical Association
14 or the American Osteopathic Association, and is board eligible or
15 board certified in psychiatry.

16 ~~((31))~~ (30) "Psychologist" means a person licensed as a
17 psychologist under chapter 18.83 RCW.

18 ~~((32))~~ (31) "Public agency" means any evaluation and treatment
19 facility or institution, or hospital, or approved substance use
20 disorder treatment program that is conducted for, or includes a
21 distinct unit, floor, or ward conducted for, the care and treatment
22 of persons with mental illness, substance use disorders, or both
23 mental illness and substance use disorders if the agency is operated
24 directly by federal, state, county, or municipal government, or a
25 combination of such governments.

26 ~~((33))~~ (32) "Responsible other" means the minor, the minor's
27 parent or estate, or any other person legally responsible for support
28 of the minor.

29 ~~((34))~~ (33) "Secretary" means the secretary of the department
30 or secretary's designee.

31 ~~((35))~~ (34) "Secure detoxification facility" means a facility
32 operated by either a public or private agency or by the program of an
33 agency that:

34 (a) Provides for intoxicated minors:

35 (i) Evaluation and assessment, provided by certified chemical
36 dependency professionals;

37 (ii) Acute or subacute detoxification services; and

38 (iii) Discharge assistance provided by certified chemical
39 dependency professionals, including facilitating transitions to

1 appropriate voluntary or involuntary inpatient services or to less
2 restrictive alternatives as appropriate for the minor;

3 (b) Includes security measures sufficient to protect the
4 patients, staff, and community; and

5 (c) Is licensed or certified as such by the department of health.

6 ~~((36))~~ (35) "Social worker" means a person with a master's or
7 further advanced degree from a social work educational program
8 accredited and approved as provided in RCW 18.320.010.

9 ~~((37))~~ (36) "Start of initial detention" means the time of
10 arrival of the minor at the first evaluation and treatment facility,
11 secure detoxification facility, or approved substance use disorder
12 treatment program offering inpatient treatment if the minor is being
13 involuntarily detained at the time. With regard to voluntary
14 patients, "start of initial detention" means the time at which the
15 minor gives notice of intent to leave under the provisions of this
16 chapter.

17 ~~((38))~~ (37) "Substance use disorder" means a cluster of
18 cognitive, behavioral, and physiological symptoms indicating that an
19 individual continues using the substance despite significant
20 substance-related problems. The diagnosis of a substance use disorder
21 is based on a pathological pattern of behaviors related to the use of
22 the substances.

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

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

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

34 (41) "Behavioral health disorder" means either a mental disorder
35 as defined in this section, a substance use disorder as defined in
36 this section, or a co-occurring mental disorder and substance use
37 disorder.

38 (42) "Conditional release" means a revocable modification of a
39 commitment, which may be revoked upon violation of any of its terms.

1 (43) "Crisis stabilization unit" means a short-term facility or a
2 portion of a facility licensed or certified by the department of
3 health under RCW 71.24.035, such as a residential treatment facility
4 or a hospital, which has been designed to assess, diagnose, and treat
5 individuals experiencing an acute crisis without the use of long-term
6 hospitalization.

7 (44) "Custody" means involuntary detention under the provisions
8 of this chapter or chapter 10.77 RCW, uninterrupted by any period of
9 unconditional release from commitment from a facility providing
10 involuntary care and treatment.

11 (45) "Detention" or "detain" means the lawful confinement of a
12 person, under the provisions of this chapter.

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

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

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

26 (49) "Habilitative services" means those services provided by
27 program personnel to assist minors in acquiring and maintaining life
28 skills and in raising their levels of physical, behavioral, social,
29 and vocational functioning. Habilitative services include education,
30 training for employment, and therapy.

31 (50) "Hearing" means any proceeding conducted in open court that
32 conforms to the requirements of section 99 of this act.

33 (51) "History of one or more violent acts" refers to the period
34 of time five years prior to the filing of a petition under this
35 chapter, excluding any time spent, but not any violent acts
36 committed, in a mental health facility, a long-term alcoholism or
37 drug treatment facility, or in confinement as a result of a criminal
38 conviction.

1 (52) "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 states:

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

6 (b) The conditions and strategies necessary to achieve the
7 purposes of habilitation;

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

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

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

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

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

20 (53) "Information related to behavioral health" means all
21 information and records compiled, obtained, or maintained in the
22 course of providing services to either voluntary or involuntary
23 recipients of services by a behavioral health service provider. This
24 may include documents of legal proceedings under this chapter or
25 chapter 71.05 or 10.77 RCW, or somatic health care information.

26 (54) "Judicial commitment" means a commitment by a court pursuant
27 to the provisions of this chapter.

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

32 (56) "Licensed physician" means a person licensed to practice
33 medicine or osteopathic medicine and surgery in the state of
34 Washington.

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

38 (58) "Peace officer" means a law enforcement official of a public
39 agency or governmental unit, and includes persons specifically given

1 peace officer powers by any state law, local ordinance, or judicial
2 order of appointment.

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

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

7 (61) "Severe deterioration from safe behavior" means that a
8 person will, if not treated, suffer or continue to suffer severe and
9 abnormal mental, emotional, or physical distress, and this distress
10 is associated with significant impairment of judgment, reason, or
11 behavior.

12 (62) "Therapeutic court personnel" means the staff of a mental
13 health court or other therapeutic court which has jurisdiction over
14 defendants who are dually diagnosed with mental disorders, including
15 court personnel, probation officers, a court monitor, prosecuting
16 attorney, or defense counsel acting within the scope of therapeutic
17 court duties.

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

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

38 (65) "Violent act" means behavior that resulted in homicide,
39 attempted suicide, injury, or substantial loss or damage to property.

1 (66) "Written order of apprehension" means an order of the court
2 for a peace officer to deliver the named minor in the order to a
3 facility or emergency room as determined by the designated crisis
4 responder. Such orders must be entered into the Washington crime
5 information center database.

6 **Sec. 65.** RCW 71.34.305 and 2016 sp.s. c 29 s 255 are each
7 amended to read as follows:

8 School district personnel who contact a (~~mental health or~~
9 ~~substance use~~) behavioral health disorder inpatient treatment
10 program or provider for the purpose of referring a student to
11 inpatient treatment shall provide the parents with notice of the
12 contact within forty-eight hours.

13 **Sec. 66.** RCW 71.34.310 and 1985 c 354 s 26 are each amended to
14 read as follows:

15 (1) The superior court has jurisdiction over proceedings under
16 this chapter.

17 (2) A record of all petitions and proceedings under this chapter
18 shall be maintained by the clerk of the superior court in the county
19 in which the petition or proceedings was initiated.

20 (3) Petitions for commitment shall be filed and venue for
21 hearings under this chapter shall be in the county in which the minor
22 is being detained. (~~The court may, for good cause, transfer the~~
23 ~~proceeding to the county of the minor's residence, or to the county~~
24 ~~in which the alleged conduct evidencing need for commitment occurred.~~
25 ~~If the county of detention is changed, subsequent petitions may be~~
26 ~~filed in the county in which the minor is detained without the~~
27 ~~necessity of a change of venue.))~~

28 NEW SECTION. **Sec. 67.** A new section is added to chapter 71.34
29 RCW to read as follows:

30 A peace officer may take or authorize a minor to be taken into
31 custody and immediately delivered to an appropriate triage facility,
32 crisis stabilization unit, evaluation and treatment facility, secure
33 detoxification facility, approved substance use disorder treatment
34 program, or the emergency department of a local hospital when he or
35 she has reasonable cause to believe that such minor is suffering from
36 a behavioral health disorder and presents an imminent likelihood of
37 serious harm or is gravely disabled. Until July 1, 2026, a peace

1 officer's delivery of a minor to a secure detoxification facility or
2 approved substance use disorder treatment program is subject to the
3 availability of a secure detoxification facility or approved
4 substance use disorder treatment program with adequate space for the
5 minor.

6 **Sec. 68.** RCW 71.34.355 and 2016 c 155 s 18 are each amended to
7 read as follows:

8 (1) Absent a risk to self or others, minors treated under this
9 chapter have the following rights, which shall be prominently posted
10 in the evaluation and treatment facility:

11 ~~((1))~~ (a) To wear their own clothes and to keep and use
12 personal possessions;

13 ~~((2))~~ (b) To keep and be allowed to spend a reasonable sum of
14 their own money for canteen expenses and small purchases;

15 ~~((3))~~ (c) To have individual storage space for private use;

16 ~~((4))~~ (d) To have visitors at reasonable times;

17 ~~((5))~~ (e) To have reasonable access to a telephone, both to
18 make and receive confidential calls;

19 ~~((6))~~ (f) To have ready access to letter-writing materials,
20 including stamps, and to send and receive uncensored correspondence
21 through the mails;

22 ~~((7))~~ (g) To discuss treatment plans and decisions with mental
23 health professionals;

24 ~~((8))~~ (h) To have the right to adequate care and individualized
25 treatment;

26 ~~((9))~~ (i) To not be denied access to treatment by spiritual
27 means through prayer in accordance with the tenets and practices of a
28 church or religious denomination in addition to the treatment
29 otherwise proposed;

30 (j) Not to consent to the administration of antipsychotic
31 medications beyond the hearing conducted pursuant to RCW 71.34.750 or
32 the performance of electroconvulsive treatment or surgery, except
33 emergency lifesaving surgery, upon him or her, ~~((and not to have~~
34 electro-convulsive treatment or nonemergency surgery in such
35 circumstance)) unless ordered by a court ~~((pursuant to a judicial~~
36 hearing in which the minor is present and represented by counsel, and
37 the court shall appoint a psychiatrist, physician assistant,
38 psychologist, psychiatric advanced registered nurse practitioner, or
39 physician designated by the minor or the minor's counsel to testify

1 ~~on behalf of the minor~~) under procedures described in RCW
2 71.05.217(1)(j). The minor's parent may exercise this right on the
3 minor's behalf, and must be informed of any impending treatment;

4 ~~((10))~~ (k) Not to have psychosurgery performed on him or her
5 under any circumstances.

6 (2)(a) Privileges between minors and physicians, physician
7 assistants, psychologists, or psychiatric advanced registered nurse
8 practitioners are deemed waived in proceedings under this chapter
9 relating to the administration of antipsychotic medications. As to
10 other proceedings under this chapter, the privileges are waived when
11 a court of competent jurisdiction in its discretion determines that
12 such waiver is necessary to protect either the detained minor or the
13 public.

14 (b) The waiver of a privilege under this section is limited to
15 records or testimony relevant to evaluation of the detained minor for
16 purposes of a proceeding under this chapter. Upon motion by the
17 detained minor or on its own motion, the court shall examine a record
18 or testimony sought by a petitioner to determine whether it is within
19 the scope of the waiver.

20 (c) The record maker may not be required to testify in order to
21 introduce medical or psychological records of the detained minor so
22 long as the requirements of RCW 5.45.020 are met except that portions
23 of the record which contain opinions as to the detained minor's
24 mental state must be deleted from such records unless the person
25 making such conclusions is available for cross-examination.

26 (3) No minor may be presumed incompetent as a consequence of
27 receiving an evaluation or voluntary or involuntary treatment for a
28 mental disorder or substance use disorder, under this chapter or any
29 prior laws of this state dealing with mental illness or substance use
30 disorders.

31 NEW SECTION. Sec. 69. A new section is added to chapter 71.34
32 RCW to read as follows:

33 At the time a minor is involuntarily admitted to an evaluation
34 and treatment facility, secure detoxification facility, or approved
35 substance use disorder treatment program, the professional person in
36 charge or his or her designee shall take reasonable precautions to
37 inventory and safeguard the personal property of the detained minor.
38 A copy of the inventory, signed by the staff member making it, must
39 be given to the detained minor and must, in addition, be open to

1 inspection to any responsible relative, subject to limitations, if
2 any, specifically imposed by the detained minor. For purposes of this
3 section, "responsible relative" includes the guardian, conservator,
4 attorney, parent, or adult brother or sister of the minor. The
5 facility shall not disclose the contents of the inventory to any
6 other person without the consent of the minor or order of the court.

7 **Sec. 70.** RCW 71.34.365 and 2018 c 201 s 5004 are each amended to
8 read as follows:

9 (1) If a minor is not accepted for admission or is released by an
10 inpatient evaluation and treatment facility, the facility shall
11 release the minor to the custody of the minor's parent or other
12 responsible person. If not otherwise available, the facility shall
13 furnish transportation for the minor to the minor's residence or
14 other appropriate place. If the minor has been arrested, the
15 evaluation and treatment facility, secure detoxification facility, or
16 approved substance use disorder treatment program shall detain the
17 minor for not more than eight hours at the request of the peace
18 officer. The program or facility shall make reasonable attempts to
19 contact the requesting peace officer during this time to inform the
20 peace officer that the minor is not approved for admission or is
21 being released in order to enable a peace officer to return to the
22 facility and take the minor back into custody.

23 (2) If the minor is released to someone other than the minor's
24 parent, the facility shall make every effort to notify the minor's
25 parent of the release as soon as possible.

26 (3) No indigent minor may be released to less restrictive
27 alternative treatment or setting or discharged from inpatient
28 treatment without suitable clothing, and the authority shall furnish
29 this clothing. As funds are available, the director may provide
30 necessary funds for the immediate welfare of indigent minors upon
31 discharge or release to less restrictive alternative treatment.

32 **Sec. 71.** RCW 71.34.410 and 2016 sp.s. c 29 s 259 are each
33 amended to read as follows:

34 (1) No public or private agency or governmental entity, nor
35 officer of a public or private agency, nor the superintendent, or
36 professional person in charge, his or her professional designee or
37 attending staff of any such agency, nor any public official
38 performing functions necessary to the administration of this chapter,

1 nor peace officer responsible for detaining a (~~person~~) minor under
2 this chapter, nor any designated crisis responder, nor professional
3 person, nor evaluation and treatment facility, nor secure
4 detoxification facility, nor approved substance use disorder
5 treatment program shall be civilly or criminally liable for
6 performing actions authorized in this chapter with regard to the
7 decision of whether to admit, release, administer antipsychotic
8 medications, or detain a (~~person~~) minor for evaluation and
9 treatment: PROVIDED, That such duties were performed in good faith
10 and without gross negligence.

11 (2) This section does not relieve a person from giving the
12 required duty to warn or to take reasonable precautions to provide
13 protection from violent behavior where the minor has communicated an
14 actual threat of physical violence against a reasonably identifiable
15 victim or victims. The duty to warn or to take reasonable precautions
16 to provide protection from violent behavior is discharged if
17 reasonable efforts are made to communicate the threat to the victim
18 or victims and to law enforcement personnel.

19 **Sec. 72.** RCW 71.34.420 and 2018 c 201 s 5012 are each amended to
20 read as follows:

21 (1) The authority may use a single bed certification process as
22 outlined in rule to provide additional treatment capacity for a minor
23 suffering from a (~~mental~~) behavioral health disorder for whom an
24 evaluation and treatment facility, secure detoxification facility, or
25 approved substance use disorder treatment program bed is not
26 available. The facility that is the proposed site of the single bed
27 certification must be a facility that is willing and able to provide
28 the person with timely and appropriate treatment either directly or
29 by arrangement with other public or private agencies.

30 (2) A single bed certification must be specific to the minor
31 receiving treatment.

32 (3) A designated crisis responder who submits an application for
33 a single bed certification for treatment at a facility that is
34 willing and able to provide timely and appropriate (~~mental~~)
35 behavioral health treatment in good faith belief that the single bed
36 certification is appropriate may presume that the single bed
37 certification will be approved for the purpose of completing the
38 detention process and responding to other emergency calls.

1 (4) The authority may adopt rules implementing this section and
2 continue to enforce rules it has already adopted except where
3 inconsistent with this section.

4 NEW SECTION. **Sec. 73.** A new section is added to chapter 71.34
5 RCW to read as follows:

6 Nothing in this chapter shall prohibit the professional person in
7 charge of a treatment facility, or his or her professional designee,
8 from permitting a minor detained for intensive treatment to leave the
9 facility for prescribed periods during the term of the minor's
10 detention, under such conditions as may be appropriate.

11 **Sec. 74.** RCW 71.34.500 and 2016 sp.s. c 29 s 261 are each
12 amended to read as follows:

13 (1) A minor thirteen years or older may admit himself or herself
14 to an evaluation and treatment facility for inpatient mental health
15 treatment or an approved substance use disorder treatment program for
16 inpatient substance use disorder treatment without parental consent.
17 The admission shall occur only if the professional person in charge
18 of the facility concurs with the need for inpatient treatment.
19 Parental authorization, or authorization from a person who may
20 consent on behalf of the minor pursuant to RCW 7.70.065, is required
21 for inpatient treatment of a minor under the age of thirteen.

22 (2) When, in the judgment of the professional person in charge of
23 an evaluation and treatment facility or approved substance use
24 disorder treatment program, there is reason to believe that a minor
25 is in need of inpatient treatment because of a (~~mental disorder or~~
26 ~~substance use~~) behavioral health disorder, and the facility provides
27 the type of evaluation and treatment needed by the minor, and it is
28 not feasible to treat the minor in any less restrictive setting or
29 the minor's home, the minor may be admitted to the facility.

30 (3) Written renewal of voluntary consent must be obtained from
31 the applicant no less than once every twelve months. The minor's need
32 for continued inpatient treatments shall be reviewed and documented
33 no less than every one hundred eighty days.

34 **Sec. 75.** RCW 71.34.600 and 2018 c 201 s 5013 are each amended to
35 read as follows:

36 (1) A parent may bring, or authorize the bringing of, his or her
37 minor child to:

1 (a) An evaluation and treatment facility or an inpatient facility
2 licensed under chapter 70.41, 71.12, or 72.23 RCW and request that
3 the professional person examine the minor to determine whether the
4 minor has a mental disorder and is in need of inpatient treatment; or

5 (b) A secure detoxification facility or approved substance use
6 disorder treatment program and request that a substance use disorder
7 assessment be conducted by a professional person to determine whether
8 the minor has a substance use disorder and is in need of inpatient
9 treatment.

10 (2) The consent of the minor is not required for admission,
11 evaluation, and treatment if ~~((the))~~ a parent ~~((brings the minor to~~
12 ~~the facility))~~ provides consent.

13 (3) An appropriately trained professional person may evaluate
14 whether the minor has a ~~((mental disorder or has a substance use))~~
15 behavioral health disorder. The evaluation shall be completed within
16 twenty-four hours of the time the minor was brought to the facility,
17 unless the professional person determines that the condition of the
18 minor necessitates additional time for evaluation. In no event shall
19 a minor be held longer than seventy-two hours for evaluation. If, in
20 the judgment of the professional person, it is determined it is a
21 medical necessity for the minor to receive inpatient treatment, the
22 minor may be held for treatment. The facility shall limit treatment
23 to that which the professional person determines is medically
24 necessary to stabilize the minor's condition until the evaluation has
25 been completed. Within twenty-four hours of completion of the
26 evaluation, the professional person shall notify the authority if the
27 child is held for treatment and of the date of admission.

28 (4) No provider is obligated to provide treatment to a minor
29 under the provisions of this section except that no provider may
30 refuse to treat a minor under the provisions of this section solely
31 on the basis that the minor has not consented to the treatment. No
32 provider may admit a minor to treatment under this section unless it
33 is medically necessary.

34 (5) No minor receiving inpatient treatment under this section may
35 be discharged from the facility based solely on his or her request.

36 (6) Prior to the review conducted under RCW 71.34.610, the
37 professional person shall notify the minor of his or her right to
38 petition superior court for release from the facility.

39 ~~((7) For the purposes of this section "professional person"~~
40 ~~means "professional person" as defined in RCW 71.05.020.))~~

1 **Sec. 76.** RCW 71.34.600 and 2018 c 201 s 5013 are each amended to
2 read as follows:

3 (1) A parent may bring, or authorize the bringing of, his or her
4 minor child to:

5 (a) An evaluation and treatment facility or an inpatient facility
6 licensed under chapter 70.41, 71.12, or 72.23 RCW and request that
7 the professional person examine the minor to determine whether the
8 minor has a mental disorder and is in need of inpatient treatment; or

9 (b) A secure detoxification facility or approved substance use
10 disorder treatment program and request that a substance use disorder
11 assessment be conducted by a professional person to determine whether
12 the minor has a substance use disorder and is in need of inpatient
13 treatment.

14 (2) The consent of the minor is not required for admission,
15 evaluation, and treatment ~~((if))~~ of the minor at the direction of the
16 parent ~~((brings the minor to the facility))~~.

17 (3) An appropriately trained professional person may evaluate
18 whether the minor has a ~~((mental disorder or has a substance use))~~
19 behavioral health disorder. The evaluation shall be completed within
20 twenty-four hours of the time the minor was brought to the facility,
21 unless the professional person determines that the condition of the
22 minor necessitates additional time for evaluation. In no event shall
23 a minor be held longer than ~~((seventy-two hours))~~ five days for
24 evaluation. If, in the judgment of the professional person, it is
25 determined it is a medical necessity for the minor to receive
26 inpatient treatment, the minor may be held for treatment. The
27 facility shall limit treatment to that which the professional person
28 determines is medically necessary to stabilize the minor's condition
29 until the evaluation has been completed. Within twenty-four hours of
30 completion of the evaluation, the professional person shall notify
31 the authority if the child is held for treatment and of the date of
32 admission.

33 (4) No provider is obligated to provide treatment to a minor
34 under the provisions of this section except that no provider may
35 refuse to treat a minor under the provisions of this section solely
36 on the basis that the minor has not consented to the treatment. No
37 provider may admit a minor to treatment under this section unless it
38 is medically necessary.

39 (5) No minor receiving inpatient treatment under this section may
40 be discharged from the facility based solely on his or her request.

1 (6) Prior to the review conducted under RCW 71.34.610, the
2 professional person shall notify the minor of his or her right to
3 petition superior court for release from the facility.

4 (~~(7) For the purposes of this section "professional person"~~
5 ~~means "professional person" as defined in RCW 71.05.020.~~)

6 **Sec. 77.** RCW 71.34.650 and 2016 sp.s. c 29 s 265 are each
7 amended to read as follows:

8 (1) A parent may bring, or authorize the bringing of, his or her
9 minor child to(~~(~~

10 ~~(a))~~ a provider of outpatient (~~(mental))~~ behavioral health
11 treatment and request that an appropriately trained professional
12 person examine the minor to determine whether the minor has a
13 (~~(mental))~~ behavioral health disorder and is in need of outpatient
14 treatment(~~(; or~~

15 ~~(b) A provider of outpatient substance use disorder treatment and~~
16 ~~request that an appropriately trained professional person examine the~~
17 ~~minor to determine whether the minor has a substance use disorder and~~
18 ~~is in need of outpatient treatment)).~~

19 (2) The consent of the minor is not required for evaluation
20 (~~(if))~~ of the minor at the direction of the parent (~~(brings the minor~~
21 ~~to the provider)).~~

22 (3) The professional person may evaluate whether the minor has a
23 (~~(mental disorder or substance use))~~ behavioral health disorder and
24 is in need of outpatient treatment.

25 (4) Any minor admitted to inpatient treatment under RCW 71.34.500
26 or 71.34.600 shall be discharged immediately from inpatient treatment
27 upon written request of the parent.

28 **Sec. 78.** RCW 71.34.700 and 2016 sp.s. c 29 s 267 are each
29 amended to read as follows:

30 (1) If a minor, thirteen years or older, is brought to an
31 evaluation and treatment facility, secure detoxification facility
32 with available space, approved substance use disorder treatment
33 program with available space, or hospital emergency room for
34 immediate (~~(mental))~~ behavioral health services, the professional
35 person in charge of the facility shall evaluate the minor's
36 (~~(mental))~~ condition, determine whether the minor suffers from a
37 (~~(mental))~~ behavioral health disorder, and whether the minor is in
38 need of immediate inpatient treatment.

1 (2) (~~If a minor, thirteen years or older, is brought to a secure~~
2 ~~detoxification facility with available space, or a hospital emergency~~
3 ~~room for immediate substance use disorder treatment, the professional~~
4 ~~person in charge of the facility shall evaluate the minor's~~
5 ~~condition, determine whether the minor suffers from substance use~~
6 ~~disorder, and whether the minor is in need of immediate inpatient~~
7 ~~treatment.~~

8 ~~(3))~~ If it is determined under subsection (1) (~~or (2))~~ of this
9 section that the minor suffers from a (~~mental disorder or substance~~
10 ~~use)) behavioral health disorder, inpatient treatment is required,
11 the minor is unwilling to consent to voluntary admission, and the
12 professional person believes that the minor meets the criteria for
13 initial detention (~~set forth herein~~), the facility may detain or
14 arrange for the detention of the minor for up to twelve hours, not
15 including time periods prior to medical clearance, in order to enable
16 a designated crisis responder to evaluate the minor and commence
17 initial detention proceedings under the provisions of this chapter.~~

18 (3) Dismissal of a commitment petition is not the appropriate
19 remedy for a violation of the timeliness requirements of this
20 section, based on the purpose of this chapter under RCW 71.34.010,
21 except in the few cases where the facility staff or the designated
22 crisis responder have totally disregarded the requirements of this
23 section.

24 **Sec. 79.** RCW 71.34.700 and 2016 sp.s. c 29 s 268 are each
25 amended to read as follows:

26 (1) If a minor, thirteen years or older, is brought to an
27 evaluation and treatment facility, secure detoxification facility,
28 approved substance use disorder treatment program, or hospital
29 emergency room for immediate (~~mental~~) behavioral health services,
30 the professional person in charge of the facility shall evaluate the
31 minor's (~~mental~~) condition, determine whether the minor suffers
32 from a (~~mental~~) behavioral health disorder, and whether the minor
33 is in need of immediate inpatient treatment.

34 (2) (~~If a minor, thirteen years or older, is brought to a secure~~
35 ~~detoxification facility or a hospital emergency room for immediate~~
36 ~~substance use disorder treatment, the professional person in charge~~
37 ~~of the facility shall evaluate the minor's condition, determine~~
38 ~~whether the minor suffers from substance use disorder, and whether~~
39 ~~the minor is in need of immediate inpatient treatment.~~

1 ~~(3))~~) If it is determined under subsection (1) (~~(or (2))~~) of this
2 section that the minor suffers from a (~~mental disorder or substance~~
3 ~~use~~) behavioral health disorder, inpatient treatment is required,
4 the minor is unwilling to consent to voluntary admission, and the
5 professional person believes that the minor meets the criteria for
6 initial detention (~~(set forth herein)~~), the facility may detain or
7 arrange for the detention of the minor for up to twelve hours, not
8 including time periods prior to medical clearance, in order to enable
9 a designated crisis responder to evaluate the minor and commence
10 initial detention proceedings under the provisions of this chapter.

11 (3) 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 NEW SECTION. Sec. 80. A new section is added to chapter 71.34
18 RCW to read as follows:

19 (1) Whenever a designated crisis responder or professional person
20 is conducting an evaluation under this chapter, the designated crisis
21 responder or professional person must consider all reasonably
22 available information from credible witnesses and records regarding:

23 (a) Historical behavior, including history of one or more violent
24 acts; and

25 (b) Prior commitments under this chapter.

26 (2) Credible witnesses may include family members, landlords,
27 neighbors, or others with significant contact and history of
28 involvement with the minor. If the designated crisis responder relies
29 upon information from a credible witness in reaching his or her
30 decision to detain the minor, then he or she must provide contact
31 information for any such witness to the prosecutor. The designated
32 crisis responder or prosecutor shall provide notice of the date,
33 time, and location of the probable cause hearing to such a witness.

34 (3) Symptoms and behavior of the minor which standing alone would
35 not justify civil commitment may support a finding of grave
36 disability or likelihood of serious harm, when:

37 (a) Such symptoms or behavior are closely associated with
38 symptoms or behavior which preceded and led to a past incident of

1 involuntary hospitalization, severe deterioration from safe behavior,
2 or one or more violent acts;

3 (b) These symptoms or behavior represent a marked and concerning
4 change in the baseline behavior of the minor; and

5 (c) Without treatment, the continued deterioration of the minor
6 is probable.

7 **Sec. 81.** RCW 71.34.710 and 2016 sp.s. c 29 s 269 are each
8 amended to read as follows:

9 (1) (a) ~~((i))~~ When a designated crisis responder receives
10 information that a minor, thirteen years or older, as a result of a
11 ~~((mental))~~ behavioral health disorder presents a likelihood of
12 serious harm or is gravely disabled, has investigated the specific
13 facts alleged and of the credibility of the person or persons
14 providing the information, and has determined that voluntary
15 admission for inpatient treatment is not possible, the designated
16 crisis responder may take the minor, or cause the minor to be taken,
17 into custody and transported to an evaluation and treatment facility,
18 secure detoxification facility, or approved substance use disorder
19 treatment program providing inpatient treatment.

20 ~~((ii) When a designated crisis responder receives information~~
21 ~~that a minor, thirteen years or older, as a result of substance use~~
22 ~~disorder presents a likelihood of serious harm or is gravely~~
23 ~~disabled, has investigated the specific facts alleged and of the~~
24 ~~credibility of the person or persons providing the information, and~~
25 ~~has determined that voluntary admission for inpatient treatment is~~
26 ~~not possible, the designated crisis responder may take the minor, or~~
27 ~~cause the minor to be taken, into custody and transported to a secure~~
28 ~~detoxification facility or approved substance use disorder treatment~~
29 ~~program, if))~~ A secure detoxification facility or approved substance
30 use disorder treatment program ~~((is))~~ must be available and ~~((has))~~
31 have adequate space for the minor.

32 (b) If ~~((the minor is not taken into custody for evaluation and~~
33 ~~treatment, the parent who has custody of the minor may seek review of~~
34 ~~that decision made by the designated crisis responder in court. The~~
35 ~~parent shall file notice with the court and provide a copy of the~~
36 ~~designated crisis responder's report or notes))~~ a designated crisis
37 responder decides not to detain a minor for evaluation and treatment
38 under RCW 71.34.700(2), or forty-eight hours have elapsed since a
39 designated crisis responder received a request for investigation and

1 the designated crisis responder has not taken action to have the
2 minor detained, an immediate family member or guardian or conservator
3 of the minor may petition the superior court for the minor's
4 detention using the procedures under RCW 71.05.201 and 71.05.203;
5 however, when the court enters an order of initial detention, except
6 as otherwise expressly stated in this chapter, all procedures must be
7 followed as if the order has been entered under RCW 71.34.710(1)(a).

8 (2)(a) Within twelve hours of the minor's arrival at the
9 evaluation and treatment facility, secure detoxification facility, or
10 approved substance use disorder treatment program, the designated
11 crisis responder shall serve on the minor a copy of the petition for
12 initial detention, notice of initial detention, and statement of
13 rights. The designated crisis responder shall file with the court on
14 the next judicial day following the initial detention the original
15 petition for initial detention, notice of initial detention, and
16 statement of rights along with an affidavit of service. The
17 designated crisis responder shall commence service of the petition
18 for initial detention and notice of the initial detention on the
19 minor's parent and the minor's attorney as soon as possible following
20 the initial detention.

21 (b) If the minor is involuntarily detained at an evaluation and
22 treatment facility, secure detoxification facility, or approved
23 substance use disorder treatment program in a different county from
24 where the minor was initially detained, the facility or program may
25 serve the minor, notify the minor's parents and the minor's attorney,
26 and file with the court on the next judicial day following the
27 initial detention the original petition for initial detention, notice
28 of initial detention, and statement of rights along with an affidavit
29 of service when filing with the court at the request of the
30 designated crisis responder.

31 (3)(a) At the time of initial detention, the designated crisis
32 responder shall advise the minor both orally and in writing that if
33 admitted to the evaluation and treatment facility, secure
34 detoxification facility, or approved substance use disorder treatment
35 program for inpatient treatment, a commitment hearing shall be held
36 within seventy-two hours of the minor's provisional acceptance to
37 determine whether probable cause exists to commit the minor for
38 further treatment.

39 (b) The minor shall be advised that he or she has a right to
40 communicate immediately with an attorney and that he or she has a

1 right to have an attorney appointed to represent him or her before
2 and at the hearing if the minor is indigent.

3 (4) Subject to subsection (5) of this section, whenever the
4 designated crisis responder petitions for detention of a minor under
5 this chapter, an evaluation and treatment facility, secure
6 detoxification facility, or approved substance use disorder treatment
7 program providing seventy-two hour evaluation and treatment must
8 immediately accept on a provisional basis the petition and the
9 person. Within twenty-four hours of the minor's arrival, the facility
10 must evaluate the minor's condition and either admit or release the
11 minor in accordance with this chapter.

12 (5) A designated crisis responder may not petition for detention
13 of a minor to a secure detoxification facility or approved substance
14 use disorder treatment program unless there is a secure
15 detoxification facility or approved substance use disorder treatment
16 program available and that has adequate space for the minor.

17 (6) If a minor is not approved for admission by the inpatient
18 evaluation and treatment facility, secure detoxification facility, or
19 approved substance use disorder treatment program, the facility shall
20 make such recommendations and referrals for further care and
21 treatment of the minor as necessary.

22 (7) Dismissal of a commitment petition is not the appropriate
23 remedy for a violation of the timeliness requirements of this
24 section, based on the purpose of this chapter under RCW 71.34.010,
25 except in the few cases where the facility staff or the designated
26 crisis responder have totally disregarded the requirements of this
27 section.

28 **Sec. 82.** RCW 71.34.710 and 2016 sp.s. c 29 s 269 are each
29 amended to read as follows:

30 (1) (a) (~~(i)~~) When a designated crisis responder receives
31 information that a minor, thirteen years or older, as a result of a
32 (~~mental~~) behavioral health disorder presents a likelihood of
33 serious harm or is gravely disabled, has investigated the specific
34 facts alleged and of the credibility of the person or persons
35 providing the information, and has determined that voluntary
36 admission for inpatient treatment is not possible, the designated
37 crisis responder may take the minor, or cause the minor to be taken,
38 into custody and transported to an evaluation and treatment facility,

1 secure detoxification facility, or approved substance use disorder
2 treatment program providing inpatient treatment.

3 ~~((ii) When a designated crisis responder receives information~~
4 ~~that a minor, thirteen years or older, as a result of substance use~~
5 ~~disorder presents a likelihood of serious harm or is gravely~~
6 ~~disabled, has investigated the specific facts alleged and of the~~
7 ~~credibility of the person or persons providing the information, and~~
8 ~~has determined that voluntary admission for inpatient treatment is~~
9 ~~not possible, the designated crisis responder may take the minor, or~~
10 ~~cause the minor to be taken, into custody and transported to a secure~~
11 ~~detoxification facility or approved substance use disorder treatment~~
12 ~~program, if))~~ A secure detoxification facility or approved substance
13 use disorder treatment program ~~((is))~~ must be available and ~~((has))~~
14 have adequate space for the minor.

15 (b) If ~~((the minor is not taken into custody for evaluation and~~
16 ~~treatment, the parent who has custody of the minor may seek review of~~
17 ~~that decision made by the designated crisis responder in court. The~~
18 ~~parent shall file notice with the court and provide a copy of the~~
19 ~~designated crisis responder's report or notes))~~ a designated crisis
20 responder decides not to detain a minor for evaluation and treatment
21 under RCW 71.34.700(2), or forty-eight hours have elapsed since a
22 designated crisis responder received a request for investigation and
23 the designated crisis responder has not taken action to have the
24 minor detained, an immediate family member or guardian or conservator
25 of the minor may petition the superior court for the minor's
26 detention using the procedures under RCW 71.05.201 and 71.05.203;
27 however, when the court enters an order of initial detention, except
28 as otherwise expressly stated in this chapter, all procedures must be
29 followed as if the order has been entered under RCW 71.34.710(1)(a).

30 (2)(a) Within twelve hours of the minor's arrival at the
31 evaluation and treatment facility, secure detoxification facility, or
32 approved substance use disorder treatment program, the designated
33 crisis responder shall serve on the minor a copy of the petition for
34 initial detention, notice of initial detention, and statement of
35 rights. The designated crisis responder shall file with the court on
36 the next judicial day following the initial detention the original
37 petition for initial detention, notice of initial detention, and
38 statement of rights along with an affidavit of service. The
39 designated crisis responder shall commence service of the petition
40 for initial detention and notice of the initial detention on the

1 minor's parent and the minor's attorney as soon as possible following
2 the initial detention.

3 (b) If the minor is involuntarily detained at an evaluation and
4 treatment facility, secure detoxification facility, or approved
5 substance use disorder treatment program in a different county from
6 where the minor was initially detained, the facility or program may
7 serve the minor, notify the minor's parents and the minor's attorney,
8 and file with the court on the next judicial day following the
9 initial detention the original petition for initial detention, notice
10 of initial detention, and statement of rights along with an affidavit
11 of service when filing with the court at the request of the
12 designated crisis responder.

13 (3) (a) At the time of initial detention, the designated crisis
14 responder shall advise the minor both orally and in writing that if
15 admitted to the evaluation and treatment facility, secure
16 detoxification facility, or approved substance use disorder treatment
17 program for inpatient treatment, a commitment hearing shall be held
18 within (~~seventy-two hours~~) five days of the minor's provisional
19 acceptance to determine whether probable cause exists to commit the
20 minor for further treatment.

21 (b) The minor shall be advised that he or she has a right to
22 communicate immediately with an attorney and that he or she has a
23 right to have an attorney appointed to represent him or her before
24 and at the hearing if the minor is indigent.

25 (4) Subject to subsection (5) of this section, whenever the
26 designated crisis responder petitions for detention of a minor under
27 this chapter, an evaluation and treatment facility, secure
28 detoxification facility, or approved substance use disorder treatment
29 program providing (~~seventy-two hour~~) five-day evaluation and
30 treatment must immediately accept on a provisional basis the petition
31 and the person. Within twenty-four hours of the minor's arrival, the
32 facility must evaluate the minor's condition and either admit or
33 release the minor in accordance with this chapter.

34 (5) A designated crisis responder may not petition for detention
35 of a minor to a secure detoxification facility or approved substance
36 use disorder treatment program unless there is a secure
37 detoxification facility or approved substance use disorder treatment
38 program available and that has adequate space for the minor.

39 (6) If a minor is not approved for admission by the inpatient
40 evaluation and treatment facility, secure detoxification facility, or

1 approved substance use disorder treatment program, the facility shall
2 make such recommendations and referrals for further care and
3 treatment of the minor as necessary.

4 (7) Dismissal of a commitment petition is not the appropriate
5 remedy for a violation of the timeliness requirements of this
6 section, based on the purpose of this chapter under RCW 71.34.010,
7 except in the few cases where the facility staff or the designated
8 crisis responder have totally disregarded the requirements of this
9 section.

10 **Sec. 83.** RCW 71.34.710 and 2016 sp.s. c 29 s 270 are each
11 amended to read as follows:

12 (1) (a) ~~((i))~~ When a designated crisis responder receives
13 information that a minor, thirteen years or older, as a result of a
14 ~~((mental))~~ behavioral health disorder presents a likelihood of
15 serious harm or is gravely disabled, has investigated the specific
16 facts alleged and of the credibility of the person or persons
17 providing the information, and has determined that voluntary
18 admission for inpatient treatment is not possible, the designated
19 crisis responder may take the minor, or cause the minor to be taken,
20 into custody and transported to an evaluation and treatment facility,
21 secure detoxification facility, or approved substance use disorder
22 treatment program providing inpatient treatment.

23 ~~((ii) When a designated crisis responder receives information~~
24 ~~that a minor, thirteen years or older, as a result of substance use~~
25 ~~disorder presents a likelihood of serious harm or is gravely~~
26 ~~disabled, has investigated the specific facts alleged and of the~~
27 ~~credibility of the person or persons providing the information, and~~
28 ~~has determined that voluntary admission for inpatient treatment is~~
29 ~~not possible, the designated crisis responder may take the minor, or~~
30 ~~cause the minor to be taken, into custody and transported to a secure~~
31 ~~detoxification facility or approved substance use disorder treatment~~
32 ~~program.))~~

33 (b) If ~~((the minor is not taken into custody for evaluation and~~
34 ~~treatment, the parent who has custody of the minor may seek review of~~
35 ~~that decision made by the designated crisis responder in court. The~~
36 ~~parent shall file notice with the court and provide a copy of the~~
37 ~~designated crisis responder's report or notes))~~ a designated crisis
38 responder decides not to detain a minor for evaluation and treatment
39 under RCW 71.34.700(2), or forty-eight hours have elapsed since a

1 designated crisis responder received a request for investigation and
2 the designated crisis responder has not taken action to have the
3 minor detained, an immediate family member or guardian or conservator
4 of the minor may petition the superior court for the minor's
5 detention using the procedures under RCW 71.05.201 and 71.05.203;
6 however, when the court enters an order of initial detention, except
7 as otherwise expressly stated in this chapter, all procedures must be
8 followed as if the order has been entered under RCW 71.34.710(1)(a).

9 (2)(a) Within twelve hours of the minor's arrival at the
10 evaluation and treatment facility, secure detoxification facility, or
11 approved substance use disorder treatment program, the designated
12 crisis responder shall serve on the minor a copy of the petition for
13 initial detention, notice of initial detention, and statement of
14 rights. The designated crisis responder shall file with the court on
15 the next judicial day following the initial detention the original
16 petition for initial detention, notice of initial detention, and
17 statement of rights along with an affidavit of service. The
18 designated crisis responder shall commence service of the petition
19 for initial detention and notice of the initial detention on the
20 minor's parent and the minor's attorney as soon as possible following
21 the initial detention.

22 (b) If the minor is involuntarily detained at an evaluation and
23 treatment facility, secure detoxification facility, or approved
24 substance use disorder treatment program in a different county from
25 where the minor was initially detained, the facility or program may
26 serve the minor, notify the minor's parents and the minor's attorney,
27 and file with the court on the next judicial day following the
28 initial detention the original petition for initial detention, notice
29 of initial detention, and statement of rights along with an affidavit
30 of service when filing with the court at the request of the
31 designated crisis responder.

32 (3)(a) At the time of initial detention, the designated crisis
33 responder shall advise the minor both orally and in writing that if
34 admitted to the evaluation and treatment facility, secure
35 detoxification facility, or approved substance use disorder treatment
36 program for inpatient treatment, a commitment hearing shall be held
37 within (~~seventy-two hours~~) five days of the minor's provisional
38 acceptance to determine whether probable cause exists to commit the
39 minor for further treatment.

1 **(b)** The minor shall be advised that he or she has a right to
2 communicate immediately with an attorney and that he or she has a
3 right to have an attorney appointed to represent him or her before
4 and at the hearing if the minor is indigent.

5 (4) Whenever the designated crisis responder petitions for
6 detention of a minor under this chapter, an evaluation and treatment
7 facility, secure detoxification facility, or approved substance use
8 disorder treatment program providing (~~seventy-two hour~~) five-day
9 evaluation and treatment must immediately accept on a provisional
10 basis the petition and the person. Within twenty-four hours of the
11 minor's arrival, the facility must evaluate the minor's condition and
12 either admit or release the minor in accordance with this chapter.

13 (5) If a minor is not approved for admission by the inpatient
14 evaluation and treatment facility, secure detoxification facility, or
15 approved substance use disorder treatment program, the facility shall
16 make such recommendations and referrals for further care and
17 treatment of the minor as necessary.

18 (6) Dismissal of a commitment petition is not the appropriate
19 remedy for a violation of the timeliness requirements of this
20 section, based on the purpose of this chapter under RCW 71.34.010,
21 except in the few cases where the facility staff or the designated
22 crisis responder have totally disregarded the requirements of this
23 section.

24 **Sec. 84.** RCW 71.34.720 and 2018 c 201 s 5017 are each amended to
25 read as follows:

26 (1) Each minor approved by the facility for inpatient admission
27 shall be examined and evaluated by a children's mental health
28 specialist, for minors admitted as a result of a mental disorder, or
29 by a chemical dependency professional, for minors admitted as a
30 result of a substance use disorder, as to the child's mental
31 condition and by a physician, physician assistant, or psychiatric
32 advanced registered nurse practitioner as to the child's physical
33 condition within twenty-four hours of admission. Reasonable measures
34 shall be taken to ensure medical treatment is provided for any
35 condition requiring immediate medical attention.

36 (2) If, after examination and evaluation, the children's mental
37 health specialist or substance use disorder specialist and the
38 physician, physician assistant, or psychiatric advanced registered
39 nurse practitioner determine that the initial needs of the minor, if

1 detained to an evaluation and treatment facility, would be better
2 served by placement in a substance use disorder treatment program or,
3 if detained to a secure detoxification facility or approved substance
4 use disorder treatment program, would be better served in an
5 evaluation and treatment facility, then the minor shall be referred
6 to the more appropriate placement; however a minor may only be
7 referred to a secure detoxification facility or approved substance
8 use disorder treatment program if there is a secure detoxification
9 facility or approved substance use disorder treatment program
10 available and that has adequate space for the minor.

11 (3) The admitting facility shall take reasonable steps to notify
12 immediately the minor's parent of the admission.

13 (4) During the initial seventy-two hour treatment period, the
14 minor has a right to associate or receive communications from parents
15 or others unless the professional person in charge determines that
16 such communication would be seriously detrimental to the minor's
17 condition or treatment and so indicates in the minor's clinical
18 record, and notifies the minor's parents of this determination. (~~IF~~
19 ~~no event may the minor~~) A minor must not be denied the opportunity
20 to consult an attorney unless there is an immediate risk of harm to
21 the minor or others.

22 (5) If the evaluation and treatment facility, secure
23 detoxification facility, or approved substance use disorder treatment
24 program admits the minor, it may detain the minor for evaluation and
25 treatment for a period not to exceed seventy-two hours from the time
26 of provisional acceptance. The computation of such seventy-two hour
27 period shall exclude Saturdays, Sundays, and holidays. This initial
28 treatment period shall not exceed seventy-two hours except when an
29 application for voluntary inpatient treatment is received or a
30 petition for fourteen-day commitment is filed.

31 (6) Within twelve hours of the admission, the facility shall
32 advise the minor of his or her rights as set forth in this chapter.

33 **Sec. 85.** RCW 71.34.720 and 2018 c 201 s 5017 are each amended to
34 read as follows:

35 (1) Each minor approved by the facility for inpatient admission
36 shall be examined and evaluated by a children's mental health
37 specialist, for minors admitted as a result of a mental disorder, or
38 by a chemical dependency professional, for minors admitted as a
39 result of a substance use disorder, as to the child's mental

1 condition and by a physician, physician assistant, or psychiatric
2 advanced registered nurse practitioner as to the child's physical
3 condition within twenty-four hours of admission. Reasonable measures
4 shall be taken to ensure medical treatment is provided for any
5 condition requiring immediate medical attention.

6 (2) If, after examination and evaluation, the children's mental
7 health specialist or substance use disorder specialist and the
8 physician, physician assistant, or psychiatric advanced registered
9 nurse practitioner determine that the initial needs of the minor, if
10 detained to an evaluation and treatment facility, would be better
11 served by placement in a substance use disorder treatment program or,
12 if detained to a secure detoxification facility or approved substance
13 use disorder treatment program, would be better served in an
14 evaluation and treatment facility, then the minor shall be referred
15 to the more appropriate placement; however a minor may only be
16 referred to a secure detoxification facility or approved substance
17 use disorder treatment program if there is a secure detoxification
18 facility or approved substance use disorder treatment program
19 available and that has adequate space for the minor.

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 (~~(seventy-two hour)~~) five-day treatment
23 period, the minor has a right to associate or receive communications
24 from parents or others unless the professional person in charge
25 determines that such communication would be seriously detrimental to
26 the minor's condition or treatment and so indicates in the minor's
27 clinical record, and notifies the minor's parents of this
28 determination. (~~(In no event may the minor)~~) A minor must not be
29 denied the opportunity to consult an attorney unless there is an
30 immediate risk of harm to the minor or others.

31 (5) If the evaluation and treatment facility, secure
32 detoxification facility, or approved substance use disorder treatment
33 program admits the minor, it may detain the minor for evaluation and
34 treatment for a period not to exceed (~~(seventy-two hours)~~) five days
35 from the time of provisional acceptance. The computation of such
36 (~~(seventy-two hour)~~) five-day period shall exclude Saturdays,
37 Sundays, and holidays. This initial treatment period shall not exceed
38 (~~(seventy-two hours)~~) five days except when an application for
39 voluntary inpatient treatment is received or a petition for fourteen-
40 day 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 **Sec. 86.** RCW 71.34.720 and 2018 c 201 s 5018 are each amended to
4 read as follows:

5 (1) Each minor approved by the facility for inpatient admission
6 shall be examined and evaluated by a children's mental health
7 specialist, for minors admitted as a result of a mental disorder, or
8 by a chemical dependency professional, for minors admitted as a
9 result of a substance use disorder, as to the child's mental
10 condition and by a physician, physician assistant, or psychiatric
11 advanced registered nurse practitioner as to the child's physical
12 condition within twenty-four hours of admission. Reasonable measures
13 shall be taken to ensure medical treatment is provided for any
14 condition requiring immediate medical attention.

15 (2) If, after examination and evaluation, the children's mental
16 health specialist or substance use disorder specialist and the
17 physician, physician assistant, or psychiatric advanced registered
18 nurse practitioner determine that the initial needs of the minor, if
19 detained to an evaluation and treatment facility, would be better
20 served by placement in a substance use disorder treatment program or,
21 if detained to a secure detoxification facility or approved substance
22 use disorder treatment program, would be better served in an
23 evaluation and treatment facility, then the minor shall be referred
24 to the more appropriate placement.

25 (3) The admitting facility shall take reasonable steps to notify
26 immediately the minor's parent of the admission.

27 (4) During the initial (~~seventy-two hour~~) five-day treatment
28 period, the minor has a right to associate or receive communications
29 from parents or others unless the professional person in charge
30 determines that such communication would be seriously detrimental to
31 the minor's condition or treatment and so indicates in the minor's
32 clinical record, and notifies the minor's parents of this
33 determination. (~~In no event may the minor~~) A minor must not be
34 denied the opportunity to consult an attorney unless there is an
35 immediate risk of harm to the minor or others.

36 (5) If the evaluation and treatment facility, secure
37 detoxification facility, or approved substance use disorder treatment
38 program admits the minor, it may detain the minor for evaluation and
39 treatment for a period not to exceed (~~seventy-two hours~~) five days

1 from the time of provisional acceptance. The computation of such
2 (~~seventy-two hour~~) five-day period shall exclude Saturdays,
3 Sundays, and holidays. This initial treatment period shall not exceed
4 (~~seventy-two hours~~) five days except when an application for
5 voluntary inpatient treatment is received or a petition for fourteen-
6 day commitment is filed.

7 (6) Within twelve hours of the admission, the facility shall
8 advise the minor of his or her rights as set forth in this chapter.

9 **Sec. 87.** RCW 71.34.730 and 2016 sp.s. c 29 s 273 and 2016 c 155
10 s 20 are each reenacted and amended to read as follows:

11 (1) The professional person in charge of an evaluation and
12 treatment facility, secure detoxification facility, or approved
13 substance use disorder treatment program where a minor has been
14 admitted involuntarily for the initial seventy-two hour treatment
15 period under this chapter may petition to have a minor committed to
16 an evaluation and treatment facility (~~or, in the case of a minor~~
17 ~~with a substance use disorder, to~~), a secure detoxification
18 facility, or an approved substance use disorder treatment program for
19 fourteen-day diagnosis, evaluation, and treatment.

20 If the professional person in charge of the facility does not
21 petition to have the minor committed, the parent who has custody of
22 the minor may seek review of that decision in court. The parent shall
23 file notice with the court and provide a copy of the treatment and
24 evaluation facility's report.

25 (2) A petition for commitment of a minor under this section shall
26 be filed with the superior court in the county where the minor is
27 (~~residing or~~) being detained.

28 (a) A petition for a fourteen-day commitment shall be signed by:
29 (i) Two physicians; (ii) one physician and a mental health
30 professional; (iii) one physician assistant and a mental health
31 professional; or (iv) one psychiatric advanced registered nurse
32 practitioner and a mental health professional. The person signing the
33 petition must have examined the minor, and the petition must contain
34 the following:

35 (A) The name and address of the petitioner;

36 (B) The name of the minor alleged to meet the criteria for
37 fourteen-day commitment;

1 (C) The name, telephone number, and address if known of every
2 person believed by the petitioner to be legally responsible for the
3 minor;

4 (D) A statement that the petitioner has examined the minor and
5 finds that the minor's condition meets required criteria for
6 fourteen-day commitment and the supporting facts therefor;

7 (E) A statement that the minor has been advised of the need for
8 voluntary treatment but has been unwilling or unable to consent to
9 necessary treatment;

10 (F) If the petition is for mental health treatment, a statement
11 that the minor has been advised of the loss of firearm rights if
12 involuntarily committed;

13 (G) A statement recommending the appropriate facility or
14 facilities to provide the necessary treatment; and

15 (H) A statement concerning whether a less restrictive alternative
16 to inpatient treatment is in the best interests of the minor.

17 (b) A copy of the petition shall be personally ~~((delivered to))~~
18 served on the minor by the petitioner or petitioner's designee. A
19 copy of the petition shall be ~~((sent))~~ provided to the minor's
20 attorney and the minor's parent.

21 **Sec. 88.** RCW 71.34.730 and 2016 sp.s. c 29 s 273 and 2016 c 155
22 s 20 are each reenacted and amended to read as follows:

23 (1) The professional person in charge of an evaluation and
24 treatment facility, secure detoxification facility, or approved
25 substance use disorder treatment program where a minor has been
26 admitted involuntarily for the initial ~~((seventy-two hour))~~ five-day
27 treatment period under this chapter may petition to have a minor
28 committed to an evaluation and treatment facility ~~((or, in the case~~
29 ~~of a minor with a substance use disorder, to))~~, a secure
30 detoxification facility, or an approved substance use disorder
31 treatment program for fourteen-day diagnosis, evaluation, and
32 treatment.

33 If the professional person in charge of the facility does not
34 petition to have the minor committed, the parent who has custody of
35 the minor may seek review of that decision in court. The parent shall
36 file notice with the court and provide a copy of the treatment and
37 evaluation facility's report.

1 (2) A petition for commitment of a minor under this section shall
2 be filed with the superior court in the county where the minor is
3 (~~residing or~~) being detained.

4 (a) A petition for a fourteen-day commitment shall be signed by:
5 (i) Two physicians; (ii) one physician and a mental health
6 professional; (iii) one physician assistant and a mental health
7 professional; or (iv) one psychiatric advanced registered nurse
8 practitioner and a mental health professional. The person signing the
9 petition must have examined the minor, and the petition must contain
10 the following:

11 (A) The name and address of the petitioner;

12 (B) The name of the minor alleged to meet the criteria for
13 fourteen-day commitment;

14 (C) The name, telephone number, and address if known of every
15 person believed by the petitioner to be legally responsible for the
16 minor;

17 (D) A statement that the petitioner has examined the minor and
18 finds that the minor's condition meets required criteria for
19 fourteen-day commitment and the supporting facts therefor;

20 (E) A statement that the minor has been advised of the need for
21 voluntary treatment but has been unwilling or unable to consent to
22 necessary treatment;

23 (F) If the petition is for mental health treatment, a statement
24 that the minor has been advised of the loss of firearm rights if
25 involuntarily committed;

26 (G) A statement recommending the appropriate facility or
27 facilities to provide the necessary treatment; and

28 (H) A statement concerning whether a less restrictive alternative
29 to inpatient treatment is in the best interests of the minor.

30 (b) A copy of the petition shall be personally (~~delivered to~~)
31 served on the minor by the petitioner or petitioner's designee. A
32 copy of the petition shall be (~~sent~~) provided to the minor's
33 attorney and the minor's parent.

34 NEW SECTION. **Sec. 89.** A new section is added to chapter 71.34
35 RCW to read as follows:

36 (1) In any proceeding for involuntary commitment under this
37 chapter, the court may continue or postpone such proceeding for a
38 reasonable time on motion of the respondent for good cause, or on
39 motion of the prosecuting attorney or the attorney general if:

1 (a) The respondent expressly consents to a continuance or delay
2 and there is a showing of good cause; or

3 (b) Such continuance is required in the proper administration of
4 justice and the respondent will not be substantially prejudiced in
5 the presentation of the respondent's case.

6 (2) The court may on its own motion continue the case when
7 required in due administration of justice and when the respondent
8 will not be substantially prejudiced in the presentation of the
9 respondent's case.

10 (3) The court shall state in any order of continuance or
11 postponement the grounds for the continuance or postponement and
12 whether detention will be extended.

13 **Sec. 90.** RCW 71.34.740 and 2016 sp.s. c 29 s 274 are each
14 amended to read as follows:

15 (1) A commitment hearing shall be held within seventy-two hours
16 of the minor's admission, excluding Saturday, Sunday, and holidays,
17 unless a continuance is (~~requested by the minor or the minor's~~
18 ~~attorney~~) ordered under section 89 of this act.

19 (2) The commitment hearing shall be conducted at the superior
20 court or an appropriate place at the facility in which the minor is
21 being detained.

22 (3) At the commitment hearing, the evidence in support of the
23 petition shall be presented by the county prosecutor.

24 (4) The minor shall be present at the commitment hearing unless
25 the minor, with the assistance of the minor's attorney, waives the
26 right to be present at the hearing.

27 (5) If the parents are opposed to the petition, they may be
28 represented at the hearing and shall be entitled to court-appointed
29 counsel if they are indigent.

30 (6) At the commitment hearing, the minor shall have the following
31 rights:

32 (a) To be represented by an attorney;

33 (b) To present evidence on his or her own behalf;

34 (c) To question persons testifying in support of the petition.

35 (7) If the hearing is for commitment for mental health treatment,
36 the court at the time of the commitment hearing and before an order
37 of commitment is entered shall inform the minor both orally and in
38 writing that the failure to make a good faith effort to seek
39 voluntary treatment as provided in RCW 71.34.730 will result in the

1 loss of his or her firearm rights if the minor is subsequently
2 detained for involuntary treatment under this section.

3 (8) If the minor has received medication within twenty-four hours
4 of the hearing, the court shall be informed of that fact and of the
5 probable effects of the medication.

6 (9) ~~((Rules of evidence shall not apply in fourteen-day
7 commitment hearings.~~

8 ~~(10))~~ For a fourteen-day commitment, the court must find by a
9 preponderance of the evidence that:

10 (a) The minor has a ~~((mental disorder or substance use))~~
11 behavioral health disorder and presents a likelihood of serious harm
12 or is gravely disabled;

13 (b) The minor is in need of evaluation and treatment of the type
14 provided by the inpatient evaluation and treatment facility, secure
15 detoxification facility, or approved substance use disorder treatment
16 program to which continued inpatient care is sought or is in need of
17 less restrictive alternative treatment found to be in the best
18 interests of the minor or others;

19 (c) The minor is unwilling or unable in good faith to consent to
20 voluntary treatment; and

21 (d) If commitment is for a substance use disorder, there is an
22 available secure detoxification facility or approved substance use
23 disorder treatment program with adequate space for the minor.

24 ~~((11))~~ (10) If the court finds that the minor meets the
25 criteria for a fourteen-day commitment, the court shall either
26 authorize commitment of the minor for inpatient treatment or for less
27 restrictive alternative treatment upon such conditions as are
28 necessary. If the court determines that the minor does not meet the
29 criteria for a fourteen-day commitment, the minor shall be released.

30 ~~((12))~~ (11)(a) Nothing in this section prohibits the
31 professional person in charge of the facility from releasing the
32 minor at any time, when, in the opinion of the professional person in
33 charge of the facility, further inpatient treatment is no longer
34 necessary. The release may be subject to reasonable conditions if
35 appropriate.

36 (b) Whenever a minor is released under this section, the
37 professional person in charge shall within three days, notify the
38 court in writing of the release.

1 (~~(13)~~) (12) A minor who has been committed for fourteen days
2 shall be released at the end of that period unless a petition for one
3 hundred eighty-day commitment is pending before the court.

4 **Sec. 91.** RCW 71.34.740 and 2016 sp.s. c 29 s 274 are each
5 amended to read as follows:

6 (1) A commitment hearing shall be held within (~~seventy-two~~
7 ~~hours~~) five days of the minor's admission, excluding Saturday,
8 Sunday, and holidays, unless a continuance is (~~requested by the~~
9 ~~minor or the minor's attorney~~) ordered under section 89 of this act.

10 (2) The commitment hearing shall be conducted at the superior
11 court or an appropriate place at the facility in which the minor is
12 being detained.

13 (3) At the commitment hearing, the evidence in support of the
14 petition shall be presented by the county prosecutor.

15 (4) The minor shall be present at the commitment hearing unless
16 the minor, with the assistance of the minor's attorney, waives the
17 right to be present at the hearing.

18 (5) If the parents are opposed to the petition, they may be
19 represented at the hearing and shall be entitled to court-appointed
20 counsel if they are indigent.

21 (6) At the commitment hearing, the minor shall have the following
22 rights:

23 (a) To be represented by an attorney;

24 (b) To present evidence on his or her own behalf;

25 (c) To question persons testifying in support of the petition.

26 (7) If the hearing is for commitment for mental health treatment,
27 the court at the time of the commitment hearing and before an order
28 of commitment is entered shall inform the minor both orally and in
29 writing that the failure to make a good faith effort to seek
30 voluntary treatment as provided in RCW 71.34.730 will result in the
31 loss of his or her firearm rights if the minor is subsequently
32 detained for involuntary treatment under this section.

33 (8) If the minor has received medication within twenty-four hours
34 of the hearing, the court shall be informed of that fact and of the
35 probable effects of the medication.

36 (9) (~~Rules of evidence shall not apply in fourteen-day~~
37 ~~commitment hearings.~~

38 ~~(10)~~) For a fourteen-day commitment, the court must find by a
39 preponderance of the evidence that:

1 (a) The minor has a (~~mental disorder or substance use~~)
2 behavioral health disorder and presents a likelihood of serious harm
3 or is gravely disabled;

4 (b) The minor is in need of evaluation and treatment of the type
5 provided by the inpatient evaluation and treatment facility, secure
6 detoxification facility, or approved substance use disorder treatment
7 program to which continued inpatient care is sought or is in need of
8 less restrictive alternative treatment found to be in the best
9 interests of the minor or others;

10 (c) The minor is unwilling or unable in good faith to consent to
11 voluntary treatment; and

12 (d) If commitment is for a substance use disorder, there is an
13 available secure detoxification facility or approved substance use
14 disorder treatment program with adequate space for the minor.

15 (~~(11)~~) (10) If the court finds that the minor meets the
16 criteria for a fourteen-day commitment, the court shall either
17 authorize commitment of the minor for inpatient treatment or for less
18 restrictive alternative treatment upon such conditions as are
19 necessary. If the court determines that the minor does not meet the
20 criteria for a fourteen-day commitment, the minor shall be released.

21 (~~(12)~~) (11)(a) Nothing in this section prohibits the
22 professional person in charge of the facility from releasing the
23 minor at any time, when, in the opinion of the professional person in
24 charge of the facility, further inpatient treatment is no longer
25 necessary. The release may be subject to reasonable conditions if
26 appropriate.

27 (b) Whenever a minor is released under this section, the
28 professional person in charge shall within three days, notify the
29 court in writing of the release.

30 (~~(13)~~) (12) A minor who has been committed for fourteen days
31 shall be released at the end of that period unless a petition for one
32 hundred eighty-day commitment is pending before the court.

33 **Sec. 92.** RCW 71.34.740 and 2016 sp.s. c 29 s 275 are each
34 amended to read as follows:

35 (1) A commitment hearing shall be held within (~~seventy-two~~
36 hours) five days of the minor's admission, excluding Saturday,
37 Sunday, and holidays, unless a continuance is (~~requested by the~~
38 minor or the minor's attorney) ordered under section 89 of this act.

1 (2) The commitment hearing shall be conducted at the superior
2 court or an appropriate place at the facility in which the minor is
3 being detained.

4 (3) At the commitment hearing, the evidence in support of the
5 petition shall be presented by the county prosecutor.

6 (4) The minor shall be present at the commitment hearing unless
7 the minor, with the assistance of the minor's attorney, waives the
8 right to be present at the hearing.

9 (5) If the parents are opposed to the petition, they may be
10 represented at the hearing and shall be entitled to court-appointed
11 counsel if they are indigent.

12 (6) At the commitment hearing, the minor shall have the following
13 rights:

14 (a) To be represented by an attorney;

15 (b) To present evidence on his or her own behalf;

16 (c) To question persons testifying in support of the petition.

17 (7) If the hearing is for commitment for mental health treatment,
18 the court at the time of the commitment hearing and before an order
19 of commitment is entered shall inform the minor both orally and in
20 writing that the failure to make a good faith effort to seek
21 voluntary treatment as provided in RCW 71.34.730 will result in the
22 loss of his or her firearm rights if the minor is subsequently
23 detained for involuntary treatment under this section.

24 (8) If the minor has received medication within twenty-four hours
25 of the hearing, the court shall be informed of that fact and of the
26 probable effects of the medication.

27 (9) ~~((Rules of evidence shall not apply in fourteen-day
28 commitment hearings.~~

29 ~~(10))~~ For a fourteen-day commitment, the court must find by a
30 preponderance of the evidence that:

31 (a) The minor has a ~~((mental disorder or substance use))~~
32 behavioral health disorder and presents a likelihood of serious harm
33 or is gravely disabled;

34 (b) The minor is in need of evaluation and treatment of the type
35 provided by the inpatient evaluation and treatment facility, secure
36 detoxification facility, or approved substance use disorder treatment
37 program to which continued inpatient care is sought or is in need of
38 less restrictive alternative treatment found to be in the best
39 interests of the minor or others; and

1 (c) The minor is unwilling or unable in good faith to consent to
2 voluntary treatment.

3 (~~(11)~~) (10) If the court finds that the minor meets the
4 criteria for a fourteen-day commitment, the court shall either
5 authorize commitment of the minor for inpatient treatment or for less
6 restrictive alternative treatment upon such conditions as are
7 necessary. If the court determines that the minor does not meet the
8 criteria for a fourteen-day commitment, the minor shall be released.

9 (~~(12)~~) (11)(a) Nothing in this section prohibits the
10 professional person in charge of the facility from releasing the
11 minor at any time, when, in the opinion of the professional person in
12 charge of the facility, further inpatient treatment is no longer
13 necessary. The release may be subject to reasonable conditions if
14 appropriate.

15 (b) Whenever a minor is released under this section, the
16 professional person in charge shall within three days, notify the
17 court in writing of the release.

18 (~~(13)~~) (12) A minor who has been committed for fourteen days
19 shall be released at the end of that period unless a petition for one
20 hundred eighty-day commitment is pending before the court.

21 **Sec. 93.** RCW 71.34.750 and 2016 sp.s. c 29 s 276 and 2016 c 155
22 s 21 are each reenacted and amended to read as follows:

23 (1) At any time during the minor's period of fourteen-day
24 commitment, the professional person in charge may petition the court
25 for an order requiring the minor to undergo an additional one hundred
26 eighty-day period of treatment. The evidence in support of the
27 petition shall be presented by the county prosecutor unless the
28 petition is filed by the professional person in charge of a state-
29 operated facility in which case the evidence shall be presented by
30 the attorney general.

31 (2) The petition for one hundred eighty-day commitment shall
32 contain the following:

33 (a) The name and address of the petitioner or petitioners;

34 (b) The name of the minor alleged to meet the criteria for one
35 hundred eighty-day commitment;

36 (c) A statement that the petitioner is the professional person in
37 charge of the evaluation and treatment facility, secure
38 detoxification facility, or approved substance use disorder treatment
39 program responsible for the treatment of the minor;

1 (d) The date of the fourteen-day commitment order; and

2 (e) A summary of the facts supporting the petition.

3 (3) The petition shall be supported by accompanying affidavits
4 signed by: (a) Two examining physicians, one of whom shall be a child
5 psychiatrist, or two psychiatric advanced registered nurse
6 practitioners, one of whom shall be a child and adolescent or family
7 psychiatric advanced registered nurse practitioner, or two physician
8 assistants, one of whom must be supervised by a child psychiatrist;
9 (b) one children's mental health specialist and either an examining
10 physician, physician assistant, or a psychiatric advanced registered
11 nurse practitioner; or (c) two among an examining physician,
12 physician assistant, and a psychiatric advanced registered nurse
13 practitioner, one of which needs to be a child psychiatrist ~~((+,+))~~, a
14 physician assistant supervised by a child psychiatrist, or a child
15 and adolescent psychiatric nurse practitioner. The affidavits shall
16 describe in detail the behavior of the detained minor which supports
17 the petition and shall state whether a less restrictive alternative
18 to inpatient treatment is in the best interests of the minor.

19 (4) The petition for one hundred eighty-day commitment shall be
20 filed with the clerk of the court at least three days before the
21 expiration of the fourteen-day commitment period. The petitioner or
22 the petitioner's designee shall within twenty-four hours of filing
23 serve a copy of the petition on the minor and notify the minor's
24 attorney and the minor's parent. A copy of the petition shall be
25 provided to such persons at least twenty-four hours prior to the
26 hearing.

27 (5) At the time of filing, the court shall set a date within
28 seven days for the hearing on the petition. ~~((The court may continue
29 the hearing upon the written request of the minor or the minor's
30 attorney for not more than ten days.))~~ If the hearing is not
31 commenced within thirty days after the filing of the petition,
32 including extensions of time requested by the detained person or his
33 or her attorney or the court in the administration of justice under
34 section 89 of this act, the minor must be released. The minor or the
35 parents shall be afforded the same rights as in a fourteen-day
36 commitment hearing. Treatment of the minor shall continue pending the
37 proceeding.

38 (6) For one hundred eighty-day commitment:

39 (a) The court must find by clear, cogent, and convincing evidence
40 that the minor:

1 (i) Is suffering from a mental disorder or substance use
2 disorder;

3 (ii) Presents a likelihood of serious harm or is gravely
4 disabled; and

5 (iii) Is in need of further treatment that only can be provided
6 in a one hundred eighty-day commitment.

7 (b) If commitment is for a substance use disorder, the court must
8 find that there is an available approved substance use disorder
9 treatment program that has adequate space for the minor.

10 (7) In determining whether an inpatient or less restrictive
11 alternative commitment is appropriate, great weight must be given to
12 evidence of a prior history or pattern of decompensation and
13 discontinuation of treatment resulting in: (a) Repeated
14 hospitalizations; or (b) repeated peace officer interventions
15 resulting in juvenile charges. Such evidence may be used to provide a
16 factual basis for concluding that the minor would not receive, if
17 released, such care as is essential for his or her health or safety.

18 (8)(a) If the court finds that the criteria for commitment are
19 met and that less restrictive treatment in a community setting is not
20 appropriate or available, the court shall order the minor committed
21 to the custody of the secretary for further inpatient mental health
22 treatment, to an approved substance use disorder treatment program
23 for further substance use disorder treatment, or to a private
24 treatment and evaluation facility for inpatient mental health or
25 substance use disorder treatment if the minor's parents have assumed
26 responsibility for payment for the treatment. If the court finds that
27 a less restrictive alternative is in the best interest of the minor,
28 the court shall order less restrictive alternative treatment upon
29 such conditions as necessary.

30 (b) If the court determines that the minor does not meet the
31 criteria for one hundred eighty-day commitment, the minor shall be
32 released.

33 ((+8)) (9) Successive one hundred eighty-day commitments are
34 permissible on the same grounds and under the same procedures as the
35 original one hundred eighty-day commitment. Such petitions shall be
36 filed at least ((five)) three days prior to the expiration of the
37 previous one hundred eighty-day commitment order.

38 **Sec. 94.** RCW 71.34.750 and 2016 sp.s. c 29 s 277 are each
39 amended to read as follows:

1 (1) At any time during the minor's period of fourteen-day
2 commitment, the professional person in charge may petition the court
3 for an order requiring the minor to undergo an additional one hundred
4 eighty-day period of treatment. The evidence in support of the
5 petition shall be presented by the county prosecutor unless the
6 petition is filed by the professional person in charge of a state-
7 operated facility in which case the evidence shall be presented by
8 the attorney general.

9 (2) The petition for one hundred eighty-day commitment shall
10 contain the following:

11 (a) The name and address of the petitioner or petitioners;

12 (b) The name of the minor alleged to meet the criteria for one
13 hundred eighty-day commitment;

14 (c) A statement that the petitioner is the professional person in
15 charge of the evaluation and treatment facility, secure
16 detoxification facility, or approved substance use disorder treatment
17 program responsible for the treatment of the minor;

18 (d) The date of the fourteen-day commitment order; and

19 (e) A summary of the facts supporting the petition.

20 (3) The petition shall be supported by accompanying affidavits
21 signed by: (a) Two examining physicians, one of whom shall be a child
22 psychiatrist, or two psychiatric advanced registered nurse
23 practitioners, one of whom shall be a child and adolescent or family
24 psychiatric advanced registered nurse practitioner, or two physician
25 assistants, one of whom must be supervised by a child psychiatrist;
26 (b) one children's mental health specialist and either an examining
27 physician, physician assistant, or a psychiatric advanced registered
28 nurse practitioner; or (c) two among an examining physician,
29 physician assistant, and a psychiatric advanced registered nurse
30 practitioner, one of which needs to be a child psychiatrist(~~(+)~~), a
31 physician assistant supervised by a child psychiatrist, or a child
32 and adolescent psychiatric nurse practitioner. The affidavits shall
33 describe in detail the behavior of the detained minor which supports
34 the petition and shall state whether a less restrictive alternative
35 to inpatient treatment is in the best interests of the minor.

36 (4) The petition for one hundred eighty-day commitment shall be
37 filed with the clerk of the court at least three days before the
38 expiration of the fourteen-day commitment period. The petitioner or
39 the petitioner's designee shall within twenty-four hours of filing
40 serve a copy of the petition on the minor and notify the minor's

1 attorney and the minor's parent. A copy of the petition shall be
2 provided to such persons at least twenty-four hours prior to the
3 hearing.

4 (5) At the time of filing, the court shall set a date within
5 seven days for the hearing on the petition. (~~The court may continue~~
6 ~~the hearing upon the written request of the minor or the minor's~~
7 ~~attorney for not more than ten days.~~) If the hearing is not
8 commenced within thirty days after the filing of the petition,
9 including extensions of time requested by the detained person or his
10 or her attorney or the court in the administration of justice under
11 section 89 of this act, the minor must be released. The minor or the
12 parents shall be afforded the same rights as in a fourteen-day
13 commitment hearing. Treatment of the minor shall continue pending the
14 proceeding.

15 (6) For one hundred eighty-day commitment, the court must find by
16 clear, cogent, and convincing evidence that the minor:

17 (a) Is suffering from a mental disorder or substance use
18 disorder;

19 (b) Presents a likelihood of serious harm or is gravely disabled;
20 and

21 (c) Is in need of further treatment that only can be provided in
22 a one hundred eighty-day commitment.

23 (7) In determining whether an inpatient or less restrictive
24 alternative commitment is appropriate, great weight must be given to
25 evidence of a prior history or pattern of decompensation and
26 discontinuation of treatment resulting in: (a) Repeated
27 hospitalizations; or (b) repeated peace officer interventions
28 resulting in juvenile charges. Such evidence may be used to provide a
29 factual basis for concluding that the minor would not receive, if
30 released, such care as is essential for his or her health or safety.

31 (8)(a) If the court finds that the criteria for commitment are
32 met and that less restrictive treatment in a community setting is not
33 appropriate or available, the court shall order the minor committed
34 to the custody of the secretary for further inpatient mental health
35 treatment, to an approved substance use disorder treatment program
36 for further substance use disorder treatment, or to a private
37 treatment and evaluation facility for inpatient mental health or
38 substance use disorder treatment if the minor's parents have assumed
39 responsibility for payment for the treatment. If the court finds that
40 a less restrictive alternative is in the best interest of the minor,

1 the court shall order less restrictive alternative treatment upon
2 such conditions as necessary.

3 (b) If the court determines that the minor does not meet the
4 criteria for one hundred eighty-day commitment, the minor shall be
5 released.

6 ~~((+8))~~ (9) Successive one hundred eighty-day commitments are
7 permissible on the same grounds and under the same procedures as the
8 original one hundred eighty-day commitment. Such petitions shall be
9 filed at least ~~((five))~~ three days prior to the expiration of the
10 previous one hundred eighty-day commitment order.

11 NEW SECTION. **Sec. 95.** A new section is added to chapter 71.34
12 RCW to read as follows:

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

15 (a) Assignment of a care coordinator;

16 (b) An intake evaluation with the provider of the less
17 restrictive alternative treatment;

18 (c) A psychiatric evaluation;

19 (d) A schedule of regular contacts with the provider of the less
20 restrictive alternative treatment services for the duration of the
21 order;

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

24 (f) An individual crisis plan; and

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

28 (2) Less restrictive alternative treatment may include the
29 following additional services:

30 (a) Medication management;

31 (b) Psychotherapy;

32 (c) Nursing;

33 (d) Substance abuse counseling;

34 (e) Residential treatment; and

35 (f) Support for housing, benefits, education, and employment.

36 (3) If the minor was provided with involuntary medication during
37 the involuntary commitment period, the less restrictive alternative
38 treatment order may authorize the less restrictive alternative
39 treatment provider or its designee to administer involuntary

1 antipsychotic medication to the person if the provider has attempted
2 and failed to obtain the informed consent of the person and there is
3 a concurring medical opinion approving the medication by a
4 psychiatrist, physician assistant working with a supervising
5 psychiatrist, psychiatric advanced registered nurse practitioner, or
6 physician or physician assistant in consultation with an independent
7 mental health professional with prescribing authority.

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

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

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

27 **Sec. 96.** RCW 71.34.780 and 2018 c 201 s 5020 are each amended to
28 read as follows:

29 (1) If the professional person in charge of an outpatient
30 treatment program, a designated crisis responder, or the director or
31 secretary, as appropriate, determines that a minor is failing to
32 adhere to the conditions of the court order for less restrictive
33 alternative treatment or the conditions for the conditional release,
34 or that substantial deterioration in the minor's functioning has
35 occurred, the designated crisis responder, or the director or
36 secretary, as appropriate, may order that the minor(~~(, if committed~~
37 ~~for mental health treatment,)~~) be taken into custody and transported
38 to an inpatient evaluation and treatment facility (~~(or, if committed~~
39 ~~for substance use disorder treatment, be taken into custody and~~

1 ~~transported to~~), a secure detoxification facility, or an approved
2 substance use disorder treatment program (~~if there is an~~
3 ~~available~~). A secure detoxification facility or approved substance
4 use disorder treatment program that has adequate space for the minor
5 must be available.

6 (2) (a) The designated crisis responder (~~or the~~), director, or
7 secretary, as appropriate, shall file the order of apprehension and
8 detention and serve it upon the minor and notify the minor's parent
9 and the minor's attorney, if any, of the detention within two days of
10 return. At the time of service the minor shall be informed of the
11 right to a hearing and to representation by an attorney. The
12 designated crisis responder or the director or secretary, as
13 appropriate, may modify or rescind the order of apprehension and
14 detention at any time prior to the hearing.

15 (b) If the minor is involuntarily detained for revocation at an
16 evaluation and treatment facility, secure detoxification facility, or
17 approved substance use disorder treatment program in a different
18 county from where the minor was initially detained, the facility or
19 program may file the order of apprehension, serve it on the minor and
20 notify the minor's parents and the minor's attorney at the request of
21 the designated crisis responder.

22 (3) A petition for revocation of less restrictive alternative
23 treatment shall be filed by the designated crisis responder or the
24 director (~~or~~), secretary, or facility, as appropriate, with the
25 court in the county (~~ordering the less restrictive alternative~~
26 ~~treatment~~) where the minor is detained. The court shall conduct the
27 hearing in that county. A petition for revocation of conditional
28 release (~~may be filed with the court in the county ordering~~
29 ~~inpatient treatment or the county where the minor on conditional~~
30 ~~release is residing~~) must be filed in the county where the minor is
31 detained. A petition shall describe the behavior of the minor
32 indicating violation of the conditions or deterioration of routine
33 functioning and a dispositional recommendation. (~~Upon motion for~~
34 ~~good cause, the hearing may be transferred to the county of the~~
35 ~~minor's residence or to the county in which the alleged violations~~
36 ~~occurred.~~) The hearing shall be held within seven days of the
37 minor's return. The issues to be determined are whether the minor did
38 or did not adhere to the conditions of the less restrictive
39 alternative treatment or conditional release, or whether the minor's
40 routine functioning has substantially deteriorated, and, if so,

1 whether the conditions of less restrictive alternative treatment or
2 conditional release should be modified or, subject to subsection (4)
3 of this section, whether the minor should be returned to inpatient
4 treatment. Pursuant to the determination of the court, the minor
5 shall be returned to less restrictive alternative treatment or
6 conditional release on the same or modified conditions or shall be
7 returned to inpatient treatment. If the minor is returned to
8 inpatient treatment, RCW 71.34.760 regarding the director's placement
9 responsibility shall apply. The hearing may be waived by the minor
10 and the minor returned to inpatient treatment or to less restrictive
11 alternative treatment or conditional release on the same or modified
12 conditions.

13 (4) A court may not order the return of a minor to inpatient
14 treatment in a secure detoxification facility or approved substance
15 use disorder treatment program unless there is a secure
16 detoxification facility or approved substance use disorder treatment
17 program available with adequate space for the minor.

18 **Sec. 97.** RCW 71.34.780 and 2018 c 201 s 5021 are each amended to
19 read as follows:

20 (1) If the professional person in charge of an outpatient
21 treatment program, a designated crisis responder, or the director or
22 secretary, as appropriate, determines that a minor is failing to
23 adhere to the conditions of the court order for less restrictive
24 alternative treatment or the conditions for the conditional release,
25 or that substantial deterioration in the minor's functioning has
26 occurred, the designated crisis responder, or the director or
27 secretary, as appropriate, may order that the minor(~~(, if committed~~
28 ~~for mental health treatment,)~~) be taken into custody and transported
29 to an inpatient evaluation and treatment facility (~~(or, if committed~~
30 ~~for substance use disorder treatment, be taken into custody and~~
31 ~~transported to)~~), a secure detoxification facility, or an approved
32 substance use disorder treatment program.

33 (2) (a) The designated crisis responder (~~(or the)~~), director, or
34 secretary, as appropriate, shall file the order of apprehension and
35 detention and serve it upon the minor and notify the minor's parent
36 and the minor's attorney, if any, of the detention within two days of
37 return. At the time of service the minor shall be informed of the
38 right to a hearing and to representation by an attorney. The
39 designated crisis responder or the director or secretary, as

1 appropriate, may modify or rescind the order of apprehension and
2 detention at any time prior to the hearing.

3 (b) If the minor is involuntarily detained for revocation at an
4 evaluation and treatment facility, secure detoxification facility, or
5 approved substance use disorder treatment program in a different
6 county from where the minor was initially detained, the facility or
7 program may file the order of apprehension, serve it on the minor and
8 notify the minor's parents and the minor's attorney at the request of
9 the designated crisis responder.

10 (3) A petition for revocation of less restrictive alternative
11 treatment shall be filed by the designated crisis responder or the
12 director ~~((or))~~, secretary, or facility, as appropriate, with the
13 court in the county ~~((ordering the less restrictive alternative~~
14 ~~treatment))~~ where the minor is detained. The court shall conduct the
15 hearing in that county. A petition for revocation of conditional
16 release ~~((may be filed with the court in the county ordering~~
17 ~~inpatient treatment or the county where the minor on conditional~~
18 ~~release is residing))~~ must be filed in the county where the minor is
19 detained. A petition shall describe the behavior of the minor
20 indicating violation of the conditions or deterioration of routine
21 functioning and a dispositional recommendation. ~~((Upon motion for~~
22 ~~good cause, the hearing may be transferred to the county of the~~
23 ~~minor's residence or to the county in which the alleged violations~~
24 ~~occurred.))~~ The hearing shall be held within seven days of the
25 minor's return. The issues to be determined are whether the minor did
26 or did not adhere to the conditions of the less restrictive
27 alternative treatment or conditional release, or whether the minor's
28 routine functioning has substantially deteriorated, and, if so,
29 whether the conditions of less restrictive alternative treatment or
30 conditional release should be modified or whether the minor should be
31 returned to inpatient treatment. Pursuant to the determination of the
32 court, the minor shall be returned to less restrictive alternative
33 treatment or conditional release on the same or modified conditions
34 or shall be returned to inpatient treatment. If the minor is returned
35 to inpatient treatment, RCW 71.34.760 regarding the director's
36 placement responsibility shall apply. The hearing may be waived by
37 the minor and the minor returned to inpatient treatment or to less
38 restrictive alternative treatment or conditional release on the same
39 or modified conditions.

1 NEW SECTION. **Sec. 98.** A new section is added to chapter 71.34
2 RCW to read as follows:

3 The legislature recognizes the inherent authority of the
4 judiciary under Article IV, section 1 of the state Constitution to
5 establish rules regarding access to court records, and respectfully
6 requests the Washington state supreme court to adopt rules regarding
7 potential access for the following entities to the files and records
8 of court proceedings under this chapter and chapter 71.05 RCW:

- 9 (1) The department;
- 10 (2) The department of health;
- 11 (3) The authority;
- 12 (4) The state hospitals as defined in RCW 72.23.010;
- 13 (5) Any person who is the subject of a petition;
- 14 (6) The attorney or guardian of the person;
- 15 (7) Resource management services for that person; and
- 16 (8) Service providers authorized to receive such information by
17 resource management services.

18 NEW SECTION. **Sec. 99.** A new section is added to chapter 71.34
19 RCW to read as follows:

20 For purposes of this chapter, at any hearing the petitioner, the
21 respondent, the witnesses, the interpreters, and the presiding
22 judicial officer may be present and participate either in person or
23 by video, as determined by the court. The term "video" as used in
24 this section includes any functional equivalent. At any hearing
25 conducted by video, the technology used must permit the judicial
26 officer, counsel, all parties, and the witnesses to be able to see,
27 hear, and speak, when authorized, during the hearing; to allow
28 attorneys to use exhibits or other materials during the hearing; and
29 to allow the respondent's counsel to be in the same location as the
30 respondent unless otherwise requested by the respondent or the
31 respondent's counsel. Witnesses in a proceeding may also appear in
32 court through other means, including telephonically, pursuant to the
33 requirements of superior court civil rule 43. Notwithstanding the
34 foregoing, the court, upon its own motion or upon a motion for good
35 cause by any party, may require all parties and witnesses to
36 participate in the hearing in person rather than by video. In ruling
37 on any such motion, the court may allow in-person or video testimony;
38 and the court may consider, among other things, whether the
39 respondent's alleged behavioral health disorder affects the

1 respondent's ability to perceive or participate in the proceeding by
2 video.

3 NEW SECTION. **Sec. 100.** A new section is added to chapter 71.05
4 RCW to read as follows:

5 For purposes of this chapter, at any hearing the petitioner, the
6 respondent, the witnesses, the interpreters, and the presiding
7 judicial officer may be present and participate either in person or
8 by video, as determined by the court. The term "video" as used in
9 this section includes any functional equivalent. At any hearing
10 conducted by video, the technology used must permit the judicial
11 officer, counsel, all parties, and the witnesses to be able to see,
12 hear, and speak, when authorized, during the hearing; to allow
13 attorneys to use exhibits or other materials during the hearing; and
14 to allow the respondent's counsel to be in the same location as the
15 respondent unless otherwise requested by the respondent or the
16 respondent's counsel. Witnesses in a proceeding may also appear in
17 court through other means, including telephonically, pursuant to the
18 requirements of superior court civil rule 43. Notwithstanding the
19 foregoing, the court, upon its own motion or upon a motion for good
20 cause by any party, may require all parties and witnesses to
21 participate in the hearing in person rather than by video. In ruling
22 on any such motion, the court may allow in-person or video testimony;
23 and the court may consider, among other things, whether the
24 respondent's alleged behavioral health disorder affects the
25 respondent's ability to perceive or participate in the proceeding by
26 video.

27 NEW SECTION. **Sec. 101.** A new section is added to chapter 71.34
28 RCW to read as follows:

29 In addition to the responsibility provided for by RCW 43.20B.330,
30 the parents of a minor person who is involuntarily detained pursuant
31 to this chapter for the purpose of treatment and evaluation outside
32 of a facility maintained and operated by the department shall be
33 responsible for the cost of such care and treatment. In the event
34 that an individual is unable to pay for such treatment or in the
35 event payment would result in a substantial hardship upon the
36 individual or his or her family, then the county of residence of such
37 person shall be responsible for such costs. If it is not possible to
38 determine the county of residence of the person, the cost shall be

1 borne by the county where the person was originally detained. The
2 department, or the authority, as appropriate, shall, pursuant to
3 chapter 34.05 RCW, adopt standards as to (1) inability to pay in
4 whole or in part, (2) a definition of substantial hardship, and (3)
5 appropriate payment schedules. Financial responsibility with respect
6 to services and facilities of the department shall continue to be as
7 provided in RCW 43.20B.320 through 43.20B.360 and 43.20B.370.

8 NEW SECTION. **Sec. 102.** A new section is added to chapter 71.05
9 RCW to read as follows:

10 (1) An involuntary treatment act work group is established to
11 evaluate the effect of changes to chapters 71.05 and 71.34 RCW and to
12 evaluate vulnerabilities in the crisis system.

13 (2) The work group shall:

14 (a) Commencing September 1, 2019, meet at least three times to:

15 (i) Identify and evaluate systems and procedures that may be required
16 to implement five-day initial detention; (ii) develop recommendations
17 to implement five-day initial detention statewide; and (iii)
18 disseminate the recommendations to stakeholders and report them to
19 the appropriate committees of the legislature by January 1, 2020.

20 (b) Commencing January 1, 2020, meet at least six times to
21 evaluate: (i) The implementation of five-day initial detention, and
22 the effects, if any, on involuntary behavioral health treatment
23 capacity statewide, including the frequency of detentions,
24 commitments, revocations of less restrictive alternative treatment,
25 conditional release orders, single bed certifications, and no-bed
26 reports under RCW 71.05.750; (ii) other issues related to
27 implementation of this act; and (iii) other vulnerabilities in the
28 involuntary treatment system.

29 (c) (i) Develop recommendations for operating the crisis system
30 based on the evaluations in (b) of this subsection; and (ii)
31 disseminate those recommendations to stakeholders and report them to
32 the appropriate committees of the legislature no later than June 30,
33 2021.

34 (3) The work group shall be convened by the authority and shall
35 receive technical and data gathering support from the authority, the
36 department, and the department of social and health services as
37 needed. The membership must consist of not more than eighteen members
38 appointed by the governor, reflecting statewide representation,

1 diverse viewpoints, and experience with involuntary treatment cases.
2 Appointed members must include but not be limited to:

3 (a) Representatives of the authority, the department, and the
4 department of social and health services;

5 (b) Certified short-term civil commitment providers and providers
6 who accept single bed certification under RCW 71.05.745;

7 (c) Certified long-term inpatient care providers for involuntary
8 patients or providers with experience providing community long-term
9 inpatient care for involuntary patients;

10 (d) Prosecuting attorneys;

11 (e) Defense attorneys;

12 (f) Family members and persons with lived experience of
13 behavioral health disorders;

14 (g) Advocates for persons with behavioral health disorders;

15 (h) Designated crisis responders;

16 (i) Behavioral health administrative services organizations;

17 (j) Managed care organizations;

18 (k) Law enforcement; and

19 (l) Judicial officers in involuntary treatment cases.

20 (4) Interested legislators and legislative staff may participate
21 in the work group. The governor must request participation in the
22 work group by a representative of tribal governments.

23 (5) The work group shall choose cochairs from among its members
24 and receive staff support from the authority.

25 (6) This section expires June 30, 2021.

26 NEW SECTION. **Sec. 103.** The following acts or parts of acts are
27 each repealed:

28 (1) RCW 71.05.360 (Rights of involuntarily detained persons) and
29 2017 3rd sp.s. c 14 s 20; and

30 (2) RCW 71.34.370 (Antipsychotic medication and shock treatment)
31 and 1989 c 120 s 9.

32 NEW SECTION. **Sec. 104.** RCW 71.05.525 is recodified as a section
33 in chapter 71.34 RCW.

34 NEW SECTION. **Sec. 105.** Sections 15, 18, 26, 39, 45, 56, 59, 72,
35 79, 83, 86, 92, 94, and 97 of this act take effect July 1, 2026.

1 NEW SECTION. **Sec. 106.** Sections 14, 17, 25, 38, 44, 55, 78, 82,
2 85, 91, 93, and 96 of this act expire July 1, 2026.

3 NEW SECTION. **Sec. 107.** Sections 14, 17, 20, 21, 22, 23, 25, 31,
4 33, 35, 38, 55, 61, 62, 76, 82, 85, 88, and 91 of this act take
5 effect January 1, 2020.

6 NEW SECTION. **Sec. 108.** Sections 13, 16, 30, 32, 34, 37, 54, 60,
7 75, 81, 84, 87, and 90 of this act expire January 1, 2020.

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