

SSB 5106 - S AMD 9
By Senator O'Ban

ADOPTED 02/23/2017

1 Strike everything after the enacting clause and insert the
2 following:

3 **"Part One - Joel's Law Amendments**

4 **Sec. 1.** RCW 71.05.201 and 2016 c 107 s 1 are each amended to
5 read as follows:

6 (1) If a designated mental health professional decides not to
7 detain a person for evaluation and treatment under RCW 71.05.150 or
8 71.05.153 or forty-eight hours have elapsed since a designated mental
9 health professional received a request for investigation and the
10 designated mental health professional has not taken action to have
11 the person detained, an immediate family member or guardian or
12 conservator of the person may petition the superior court for the
13 person's initial detention.

14 (2) A petition under this section must be filed within ten
15 calendar days following the designated mental health professional
16 investigation or the request for a designated mental health
17 professional investigation. If more than ten days have elapsed, the
18 immediate family member, guardian, or conservator must request a new
19 designated mental health professional investigation.

20 (3)(a) The petition must be filed in the county in which the
21 designated mental health professional investigation occurred or was
22 requested to occur and must be submitted on forms developed by the
23 administrative office of the courts for this purpose. The petition
24 must be accompanied by a sworn declaration from the petitioner, and
25 other witnesses if desired, describing why the person should be
26 detained for evaluation and treatment. The description of why the
27 person should be detained may contain, but is not limited to, the
28 information identified in RCW 71.05.212.

29 (b) The petition must contain:

30 (i) A description of the relationship between the petitioner and
31 the person; and

1 (ii) The date on which an investigation was requested from the
2 designated mental health professional.

3 ~~((3))~~ (4) The court shall, within one judicial day, review the
4 petition to determine whether the petition raises sufficient evidence
5 to support the allegation. If the court so finds, it shall provide a
6 copy of the petition to the designated mental health professional
7 agency with an order for the agency to provide the court, within one
8 judicial day, with a written sworn statement describing the basis for
9 the decision not to seek initial detention and a copy of all
10 information material to the designated mental health professional's
11 current decision.

12 ~~((4))~~ (5) Following the filing of the petition and before the
13 court reaches a decision, any person, including a mental health
14 professional, may submit a sworn declaration to the court in support
15 of or in opposition to initial detention.

16 ~~((5))~~ (6) The court shall dismiss the petition at any time if
17 it finds that a designated mental health professional has filed a
18 petition for the person's initial detention under RCW 71.05.150 or
19 71.05.153 or that the person has voluntarily accepted appropriate
20 treatment.

21 ~~((6))~~ (7) The court must issue a final ruling on the petition
22 within five judicial days after it is filed. After reviewing all of
23 the information provided to the court, the court may enter an order
24 for initial detention if the court finds that: (a) There is probable
25 cause to support a petition for detention; and (b) the person has
26 refused or failed to accept appropriate evaluation and treatment
27 voluntarily. The court shall transmit its final decision to the
28 petitioner.

29 ~~((7))~~ (8) If the court enters an order for initial detention,
30 it shall provide the order to the designated mental health
31 professional agency(~~(, which shall execute the order without delay)~~)
32 and issue a written order for apprehension of the person by a peace
33 officer for delivery of the person to a facility or emergency room
34 determined by the designated mental health professional. The
35 designated mental health agency serving the jurisdiction of the court
36 must collaborate and coordinate with law enforcement regarding
37 apprehensions and detentions under this subsection, including sharing
38 of information relating to risk and which would assist in locating
39 the person. A person may not be detained to jail pursuant to a
40 written order issued under this subsection. An order for detention

1 under this section should contain the advisement of rights which the
2 person would receive if the person were detained by a designated
3 mental health professional. An order for initial detention under this
4 section expires one hundred eighty days from issuance.

5 ((+8)) (9) Except as otherwise expressly stated in this chapter,
6 all procedures must be followed as if the order had been entered
7 under RCW 71.05.150. RCW 71.05.160 does not apply if detention was
8 initiated under the process set forth in this section.

9 ((+9)) (10) For purposes of this section, "immediate family
10 member" means a spouse, domestic partner, child, stepchild, parent,
11 stepparent, grandparent, or sibling.

12 **Sec. 2.** RCW 71.05.201 and 2016 sp.s. c 29 s 222 and 2016 c 107 s
13 1 are each reenacted and amended to read as follows:

14 (1) If a designated crisis responder decides not to detain a
15 person for evaluation and treatment under RCW 71.05.150 or 71.05.153
16 or forty-eight hours have elapsed since a designated crisis responder
17 received a request for investigation and the designated crisis
18 responder has not taken action to have the person detained, an
19 immediate family member or guardian or conservator of the person may
20 petition the superior court for the person's initial detention.

21 (2) A petition under this section must be filed within ten
22 calendar days following the designated crisis responder investigation
23 or the request for a designated crisis responder investigation. If
24 more than ten days have elapsed, the immediate family member,
25 guardian, or conservator must request a new designated crisis
26 responder investigation.

27 (3)(a) The petition must be filed in the county in which the
28 designated ((mental—health—professional)) crisis responder
29 investigation occurred or was requested to occur and must be
30 submitted on forms developed by the administrative office of the
31 courts for this purpose. The petition must be accompanied by a sworn
32 declaration from the petitioner, and other witnesses if desired,
33 describing why the person should be detained for evaluation and
34 treatment. The description of why the person should be detained may
35 contain, but is not limited to, the information identified in RCW
36 71.05.212.

37 (b) The petition must contain:

38 (i) A description of the relationship between the petitioner and
39 the person; and

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

3 ~~((3))~~ (4) The court shall, within one judicial day, review the
4 petition to determine whether the petition raises sufficient evidence
5 to support the allegation. If the court so finds, it shall provide a
6 copy of the petition to the designated crisis responder agency with
7 an order for the agency to provide the court, within one judicial
8 day, with a written sworn statement describing the basis for the
9 decision not to seek initial detention and a copy of all information
10 material to the designated crisis responder's current decision.

11 ~~((4))~~ (5) Following the filing of the petition and before the
12 court reaches a decision, any person, including a mental health
13 professional, may submit a sworn declaration to the court in support
14 of or in opposition to initial detention.

15 ~~((5))~~ (6) The court shall dismiss the petition at any time if
16 it finds that a designated crisis responder has filed a petition for
17 the person's initial detention under RCW 71.05.150 or 71.05.153 or
18 that the person has voluntarily accepted appropriate treatment.

19 ~~((6))~~ (7) The court must issue a final ruling on the petition
20 within five judicial days after it is filed. After reviewing all of
21 the information provided to the court, the court may enter an order
22 for initial detention if the court finds that: (a) There is probable
23 cause to support a petition for detention; and (b) the person has
24 refused or failed to accept appropriate evaluation and treatment
25 voluntarily. The court shall transmit its final decision to the
26 petitioner.

27 ~~((7))~~ (8) If the court enters an order for initial detention,
28 it shall provide the order to the designated crisis responder
29 agency(~~(, which shall execute the order without delay)~~) and issue a
30 written order for apprehension of the person by a peace officer for
31 delivery of the person to a facility or emergency room determined by
32 the designated crisis responder. The designated crisis responder
33 agency serving the jurisdiction of the court must collaborate and
34 coordinate with law enforcement regarding apprehensions and
35 detentions under this subsection, including sharing of information
36 relating to risk and which would assist in locating the person. A
37 person may not be detained to jail pursuant to a written order issued
38 under this subsection. An order for detention under this section
39 should contain the advisement of rights which the person would
40 receive if the person were detained by a designated crisis responder.

1 An order for initial detention under this section expires one hundred
2 eighty days from issuance.

3 ~~((+8))~~ (9) Except as otherwise expressly stated in this chapter,
4 all procedures must be followed as if the order had been entered
5 under RCW 71.05.150. RCW 71.05.160 does not apply if detention was
6 initiated under the process set forth in this section.

7 ~~((+9))~~ (10) For purposes of this section, "immediate family
8 member" means a spouse, domestic partner, child, stepchild, parent,
9 stepparent, grandparent, or sibling.

10 **Sec. 3.** RCW 71.05.203 and 2015 c 258 s 3 are each amended to
11 read as follows:

12 (1) The department and each ~~((regional—support—network))~~
13 behavioral health organization or agency employing designated mental
14 health professionals shall publish information in an easily
15 accessible format describing the process for an immediate family
16 member, guardian, or conservator to petition for court review of a
17 detention decision under RCW 71.05.201.

18 (2) A designated mental health professional or designated mental
19 health professional agency that receives a request for investigation
20 for possible detention under this chapter must inquire whether the
21 request comes from an immediate family member, guardian, or
22 conservator who would be eligible to petition under RCW 71.05.201. If
23 the designated mental health professional decides not to detain the
24 person for evaluation and treatment under RCW 71.05.150 or 71.05.153
25 or forty-eight hours have elapsed since the request for investigation
26 was received and the designated mental health professional has not
27 taken action to have the person detained, the designated mental
28 health professional or designated mental health professional agency
29 must inform the immediate family member, guardian, or conservator who
30 made the request for investigation about the process to petition for
31 court review under RCW 71.05.201.

32 (3) A designated mental health professional or designated mental
33 health professional agency must, upon request, disclose the date of a
34 designated mental health professional investigation under this
35 chapter to an immediate family member, guardian, or conservator of a
36 person to assist in the preparation of a petition under RCW
37 71.05.201.

1 **Sec. 4.** RCW 71.05.203 and 2016 sp.s. c 29 s 223 are each amended
2 to read as follows:

3 (1) The department and each behavioral health organization or
4 agency employing designated crisis responders shall publish
5 information in an easily accessible format describing the process for
6 an immediate family member, guardian, or conservator to petition for
7 court review of a detention decision under RCW 71.05.201.

8 (2) A designated crisis responder or designated crisis responder
9 agency that receives a request for investigation for possible
10 detention under this chapter must inquire whether the request comes
11 from an immediate family member, guardian, or conservator who would
12 be eligible to petition under RCW 71.05.201. If the designated crisis
13 responder decides not to detain the person for evaluation and
14 treatment under RCW 71.05.150 or 71.05.153 or forty-eight hours have
15 elapsed since the request for investigation was received and the
16 designated crisis responder has not taken action to have the person
17 detained, the designated crisis responder or designated crisis
18 responder agency must inform the immediate family member, guardian,
19 or conservator who made the request for investigation about the
20 process to petition for court review under RCW 71.05.201.

21 (3) A designated crisis responder or designated crisis responder
22 agency must, upon request, disclose the date of a designated crisis
23 responder investigation under this chapter to an immediate family
24 member, guardian, or conservator of a person to assist in the
25 preparation of a petition under RCW 71.05.201.

26 NEW SECTION. **Sec. 5.** By December 15, 2017, the administrative
27 office of the courts, in collaboration with stakeholders, including
28 but not limited to judges, prosecutors, defense attorneys, the
29 department of social and health services, behavioral health
30 advocates, and families, shall: (1) Develop a user's guide to assist
31 pro se litigants in the preparation and filing of a Joel's law
32 petition; and (2) develop a model order of detention under RCW
33 71.05.201 which contains an advisement of rights for the detained
34 person.

35 NEW SECTION. **Sec. 6.** Sections 1 and 3 of this act expire April
36 1, 2018.

1 NEW SECTION. **Sec. 7.** Sections 2 and 4 of this act take effect
2 April 1, 2018.

3 **Part Two - Less Restrictive Alternative Revocations**

4 **Sec. 8.** RCW 71.05.590 and 2015 c 250 s 13 are each amended to
5 read as follows:

6 (1) Either an agency or facility designated to monitor or provide
7 services under a less restrictive alternative order or conditional
8 release order, or a designated mental health professional, may take
9 action to enforce, modify, or revoke a less restrictive alternative
10 or conditional release order (~~if~~). The agency, facility, or
11 designated mental health professional (~~determines~~) must determine
12 that:

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

15 (b) Substantial deterioration in the person's functioning has
16 occurred;

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

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

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

27 (a) To counsel, advise, or admonish the person as to their rights
28 and responsibilities under the court order, and to offer appropriate
29 incentives to motivate compliance;

30 (b) To increase the intensity of outpatient services provided to
31 the person by increasing the frequency of contacts with the provider,
32 referring the person for an assessment for assertive community
33 services, or by other means;

34 (c) To request a court hearing for review and modification of the
35 court order. The request must be made to the court with jurisdiction
36 over the order and specify the circumstances that give rise to the
37 request and what modification is being sought. The county prosecutor
38 shall assist the agency or facility in requesting this hearing and

1 issuing an appropriate summons to the person. This subsection does
2 not limit the inherent authority of a treatment provider to alter
3 conditions of treatment for clinical reasons, and is intended to be
4 used only when court intervention is necessary or advisable to secure
5 the person's compliance and prevent decompensation or deterioration;

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

24 (e) To initiate revocation procedures under subsection (4) of
25 this section.

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

32 (4)(a) A designated mental health professional or the secretary
33 may upon their own motion or notification by the facility or agency
34 designated to provide outpatient care order a person subject to a
35 court order under this section to be apprehended and taken into
36 custody and temporary detention in an evaluation and treatment
37 facility in or near the county in which he or she is receiving
38 outpatient treatment, or initiate proceedings under this subsection
39 (4) without ordering the apprehension and detention of the person.

1 (b) A person detained under this subsection (4) must be held
2 until such time, not exceeding five days, as a hearing can be
3 scheduled to determine whether or not the person should be returned
4 to the hospital or facility from which he or she had been released.
5 If the person is not detained, the hearing must be scheduled within
6 five days of service on the person. The designated mental health
7 professional or the secretary may modify or rescind the order at any
8 time prior to commencement of the court hearing.

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

25 (d) The issues for the court to determine are whether: (i) The
26 person adhered to the terms and conditions of the court order; (ii)
27 substantial deterioration in the person's functioning has occurred;
28 (iii) there is evidence of substantial decompensation with a
29 reasonable probability that the decompensation can be reversed by
30 further inpatient treatment; or (iv) there is a likelihood of serious
31 harm; and, if any of the above conditions apply, whether the court
32 should reinstate or modify the person's less restrictive alternative
33 or conditional release order or order the person's detention for
34 inpatient treatment. The person may waive the court hearing and allow
35 the court to enter a stipulated order upon the agreement of all
36 parties. If the court orders detention for inpatient treatment, the
37 treatment period may be for no longer than the period authorized in
38 the original court order.

39 (e) Revocation proceedings under this subsection (4) are not
40 allowable if the current commitment is solely based on the person

1 being in need of assisted outpatient mental health treatment. In
2 order to obtain a court order for detention for inpatient treatment
3 under this circumstance, a petition must be filed under RCW 71.05.150
4 or 71.05.153.

5 (5) In determining whether or not to take action under this
6 section the designated mental health professional, agency, or
7 facility must consider the factors specified under RCW 71.05.212 and
8 the court must consider the factors specified under RCW 71.05.245 as
9 they apply to the question of whether to enforce, modify, or revoke a
10 court order for involuntary treatment.

11 **Sec. 9.** RCW 71.05.590 and 2016 sp.s. c 29 s 242 are each amended
12 to read as follows:

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

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

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

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

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

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

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

36 (b) To increase the intensity of outpatient services provided to
37 the person by increasing the frequency of contacts with the provider,
38 referring the person for an assessment for assertive community
39 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 the court with jurisdiction
3 over the order and specify the circumstances that give rise to the
4 request and what modification is being sought. The county prosecutor
5 shall assist the agency or facility in requesting this hearing and
6 issuing an appropriate summons to the person. This subsection does
7 not limit the inherent authority of a treatment provider to alter
8 conditions of treatment for clinical reasons, and is intended to be
9 used only when court intervention is necessary or advisable to secure
10 the person's compliance and prevent decompensation or deterioration;

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

33 (e) To initiate revocation procedures under subsection (4) of
34 this section.

35 (3) The facility or agency designated to provide outpatient
36 treatment shall notify the secretary or designated crisis responder
37 when a person fails to adhere to terms and conditions of court
38 ordered treatment or experiences substantial deterioration in his or
39 her condition and, as a result, presents an increased likelihood of
40 serious harm.

1 (4)(a) A designated crisis responder or the secretary may upon
2 their own motion or notification by the facility or agency designated
3 to provide outpatient care order a person subject to a court order
4 under this chapter to be apprehended and taken into custody and
5 temporary detention in an evaluation and treatment facility in or
6 near the county in which he or she is receiving outpatient treatment
7 if the person is committed for mental health treatment, or, if the
8 person is committed for substance use disorder treatment, in a secure
9 detoxification facility or approved substance use disorder treatment
10 program if either is available in or near the county in which he or
11 she is receiving outpatient treatment and has adequate space.
12 Proceedings under this subsection (4) may be initiated without
13 ordering the apprehension and detention of the person.

14 (b) A person detained under this subsection (4) must be held
15 until such time, not exceeding five days, as a hearing can be
16 scheduled to determine whether or not the person should be returned
17 to the hospital or facility from which he or she had been released.
18 If the person is not detained, the hearing must be scheduled within
19 five days of service on the person. The designated crisis responder
20 or the secretary may modify or rescind the order at any time prior to
21 commencement of the court hearing.

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

37 (d) The issues for the court to determine are whether: (i) The
38 person adhered to the terms and conditions of the court order; (ii)
39 substantial deterioration in the person's functioning has occurred;
40 (iii) there is evidence of substantial decompensation with a

1 reasonable probability that the decompensation can be reversed by
2 further inpatient treatment; or (iv) there is a likelihood of serious
3 harm; and, if any of the above conditions apply, whether the court
4 should reinstate or modify the person's less restrictive alternative
5 or conditional release order or order the person's detention for
6 inpatient treatment. The person may waive the court hearing and allow
7 the court to enter a stipulated order upon the agreement of all
8 parties. If the court orders detention for inpatient treatment, the
9 treatment period may be for no longer than the period authorized in
10 the original court order. A court may not issue an order to detain a
11 person for inpatient treatment in a secure detoxification facility or
12 approved substance use disorder treatment program under this
13 subsection unless there is a secure detoxification facility or
14 approved substance use disorder treatment program available and with
15 adequate space for the person.

16 (e) Revocation proceedings under this subsection (4) are not
17 allowable if the current commitment is solely based on the person
18 being in need of assisted outpatient mental health treatment. In
19 order to obtain a court order for detention for inpatient treatment
20 under this circumstance, a petition must be filed under RCW 71.05.150
21 or 71.05.153.

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

28 **Sec. 10.** RCW 71.05.590 and 2016 sp.s. c 29 s 243 are each
29 amended to read as follows:

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

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

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

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

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

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

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

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

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

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

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

9 (e) To initiate revocation procedures under subsection (4) of
10 this section.

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

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

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

38 (c) The designated crisis responder or secretary shall (~~notify~~
39 ~~the court that originally ordered commitment within two judicial days~~
40 ~~of a person's detention and~~) file a revocation petition and order of

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

13 (d) The issues for the court to determine are whether: (i) The
14 person adhered to the terms and conditions of the court order; (ii)
15 substantial deterioration in the person's functioning has occurred;
16 (iii) there is evidence of substantial decompensation with a
17 reasonable probability that the decompensation can be reversed by
18 further inpatient treatment; or (iv) there is a likelihood of serious
19 harm; and, if any of the above conditions apply, whether the court
20 should reinstate or modify the person's less restrictive alternative
21 or conditional release order or order the person's detention for
22 inpatient treatment. The person may waive the court hearing and allow
23 the court to enter a stipulated order upon the agreement of all
24 parties. If the court orders detention for inpatient treatment, the
25 treatment period may be for no longer than the period authorized in
26 the original court order.

27 (e) Revocation proceedings under this subsection (4) are not
28 allowable if the current commitment is solely based on the person
29 being in need of assisted outpatient mental health treatment. In
30 order to obtain a court order for detention for inpatient treatment
31 under this circumstance, a petition must be filed under RCW 71.05.150
32 or 71.05.153.

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

1 **Part Three - Initial Detention Investigations**

2 **Sec. 11.** RCW 71.05.154 and 2013 c 334 s 1 are each amended to
3 read as follows:

4 ((A)) (1) If a person subject to evaluation under RCW 71.05.150
5 or 71.05.153 is located in an emergency room at the time of
6 evaluation, the designated mental health professional conducting
7 ((an)) the evaluation ((of a person under RCW 71.05.150 or 71.05.153
8 must consult with any examining emergency room physician regarding
9 the physician's observations and opinions relating to the person's
10 condition, and whether, in the view of the physician, detention is
11 appropriate. The designated mental health professional)) shall take
12 serious consideration of observations and opinions by an examining
13 emergency room physician((s)), advanced registered nurse
14 practitioner, or physician assistant in determining whether detention
15 under this chapter is appropriate. The designated mental health
16 professional must document ((the)) his or her consultation with ((an
17 examining emergency room physician)) this professional, ((including))
18 if the professional is available, or his or her review of the
19 ((physician's)) professional's written observations or opinions
20 regarding whether detention of the person is appropriate.

21 (2) This section does not create an exception to the general rule
22 under RCW 71.05.010, which creates a presumption that courts should
23 decide petitions under this chapter on their merits in light of the
24 state's parens patriae or police power interest in protecting the
25 safety of individuals and the public.

26 **Sec. 12.** RCW 71.05.154 and 2016 sp.s. c 29 s 214 are each
27 amended to read as follows:

28 ((A)) (1) If a person subject to evaluation under RCW 71.05.150
29 or 71.05.153 is located in an emergency room at the time of
30 evaluation, the designated crisis responder conducting ((an)) the
31 evaluation ((of a person under RCW 71.05.150 or 71.05.153 must
32 consult with any examining emergency room physician regarding the
33 physician's observations and opinions relating to the person's
34 condition, and whether, in the view of the physician, detention is
35 appropriate. The designated crisis responder)) shall take serious
36 consideration of observations and opinions by an examining emergency
37 room physician((s)), advanced registered nurse practitioner, or
38 physician assistant in determining whether detention under this

1 chapter is appropriate. The designated crisis responder must document
2 ((the)) his or her consultation with ((an examining emergency room
3 physician)) this professional, ((including)) if the professional is
4 available, or his or her review of the ((physician's)) professional's
5 written observations or opinions regarding whether detention of the
6 person is appropriate.

7 (2) This section does not create an exception to the general rule
8 under RCW 71.05.010, which creates a presumption that courts should
9 decide petitions under this chapter on their merits in light of the
10 state's parens patriae or police power interest in protecting the
11 safety of individuals and the public.

12 **Part Four - Evaluation and Petition by Chemical**
13 **Dependency Professionals**

14 **Sec. 13.** RCW 70.96A.140 and 2016 sp.s. c 29 s 102 are each
15 amended to read as follows:

16 (1)(a) When a designated chemical dependency specialist receives
17 information alleging that a person presents a likelihood of serious
18 harm or is gravely disabled as a result of ((chemical dependency)) a
19 substance use disorder, the designated chemical dependency
20 specialist, after investigation and evaluation of the specific facts
21 alleged and of the reliability and credibility of the information,
22 may file a petition for commitment of such person with the superior
23 court, district court, or in another court permitted by court rule.

24 If a petition for commitment is not filed in the case of a minor,
25 the parent, guardian, or custodian who has custody of the minor may
26 seek review of that decision made by the designated chemical
27 dependency specialist in superior or district court. The parent,
28 guardian, or custodian shall file notice with the court and provide a
29 copy of the designated chemical dependency specialist's report.

30 If the designated chemical dependency specialist finds that the
31 initial needs of such person would be better served by placement
32 within the mental health system, the person shall be referred to
33 either a designated mental health professional or an evaluation and
34 treatment facility as defined in RCW 71.05.020 or 71.34.020.

35 (b) If placement in a ((chemical dependency)) substance use
36 disorder treatment program is available and deemed appropriate, the
37 petition shall allege that: The person is chemically dependent and
38 presents a likelihood of serious harm or is gravely disabled by

1 alcohol or drug addiction, or that the person has twice before in the
2 preceding twelve months been admitted for withdrawal management,
3 sobering services, or (~~chemical dependency~~) substance use disorder
4 treatment pursuant to RCW 70.96A.110 or 70.96A.120, and is in need of
5 a more sustained treatment program, or that the person (~~is~~
6 ~~chemically dependent~~) has a substance use disorder and has
7 threatened, attempted, or inflicted physical harm on another and is
8 likely to inflict physical harm on another unless committed. A
9 refusal to undergo treatment, by itself, does not constitute evidence
10 of lack of judgment as to the need for treatment.

11 (c) If involuntary detention is sought, the petition must state
12 facts that support a finding of the grounds identified in (b) of this
13 subsection and that there are no less restrictive alternatives to
14 detention in the best interest of such person or others. The petition
15 must state specifically that less restrictive alternative treatment
16 was considered and specify why treatment less restrictive than
17 detention is not appropriate. If an involuntary less restrictive
18 alternative is sought, the petition must state facts that support a
19 finding of the grounds for commitment identified in (b) of this
20 subsection and set forth the proposed less restrictive alternative.

21 (d)(i) The petition must be signed by:

22 (A) (~~Two physicians;~~) One physician, physician assistant, or
23 advanced registered nurse practitioner; and

24 (B) (~~One physician and a mental health professional;~~

25 ~~One physician assistant and a mental health professional; or~~

26 ~~One psychiatric advanced registered nurse practitioner and a~~
27 ~~mental health professional.~~

28 ~~(ii) The persons signing the petition must have examined the~~
29 ~~person))~~ One physician, physician assistant, advanced registered
30 nurse practitioner, or chemical dependency professional.

31 (2) Upon filing the petition, the court shall fix a date for a
32 hearing no less than two and no more than seven days after the date
33 the petition was filed unless the person petitioned against is
34 presently being detained in a program, pursuant to RCW 70.96A.120,
35 71.05.210, or 71.34.710, in which case the hearing shall be held
36 within seventy-two hours of the filing of the petition(~~:-PROVIDED,~~
37 ~~HOWEVER, That~~). The (~~above specified~~) seventy-two hours shall be
38 computed by excluding Saturdays, Sundays, and holidays(~~:-PROVIDED~~
39 ~~FURTHER, That,~~). The court may, upon motion of the person whose
40 commitment is sought, or upon motion of petitioner with written

1 permission of the person whose commitment is sought, or his or her
2 counsel and, upon good cause shown, extend the date for the hearing.
3 A copy of the petition and of the notice of the hearing, including
4 the date fixed by the court, shall be served (~~by the designated~~
5 ~~chemical dependency specialist~~) on the person whose commitment is
6 sought, his or her next of kin, a parent or his or her legal guardian
7 if he or she is a minor, and any other person the court believes
8 advisable. A copy of the petition and certificate shall be delivered
9 to each person notified.

10 (3) At the hearing the court shall hear all relevant testimony
11 including, if possible, the testimony, which may be telephonic, of at
12 least one licensed physician, (~~psychiatric~~) advanced registered
13 nurse practitioner, physician assistant, or (~~mental health~~)
14 chemical dependency professional who has examined the person whose
15 commitment is sought. Communications otherwise deemed privileged
16 under the laws of this state are deemed to be waived in proceedings
17 under this chapter when a court of competent jurisdiction in its
18 discretion determines that the waiver is necessary to protect either
19 the detained person or the public. The waiver of a privilege under
20 this section is limited to records or testimony relevant to
21 evaluation of the detained person for purposes of a proceeding under
22 this chapter. Upon motion by the detained person, or on its own
23 motion, the court shall examine a record or testimony sought by a
24 petitioner to determine whether it is within the scope of the waiver.

25 The record maker shall not be required to testify in order to
26 introduce medical, nursing, or psychological records of detained
27 persons so long as the requirements of RCW 5.45.020 are met, except
28 that portions of the record that contain opinions as to whether the
29 detained person (~~is chemically dependent~~) has a substance use
30 disorder shall be deleted from the records unless the person offering
31 the opinions is available for cross-examination. The person shall be
32 present unless the court believes that his or her presence is likely
33 to be injurious to him or her; in this event the court may deem it
34 appropriate to appoint a guardian ad litem to represent him or her
35 throughout the proceeding. If deemed advisable, the court may examine
36 the person out of courtroom. If the person has refused to be examined
37 by a licensed physician, (~~psychiatric~~) advanced registered nurse
38 practitioner, physician assistant, or (~~mental health~~) chemical
39 dependency professional, he or she shall be given an opportunity to
40 be examined by a court appointed licensed physician, (~~psychiatric~~)

1 advanced registered nurse practitioner, physician assistant, or other
2 professional person qualified to provide such services. If he or she
3 refuses and there is sufficient evidence to believe that the
4 allegations of the petition are true, or if the court believes that
5 more medical evidence is necessary, the court may make a temporary
6 order committing him or her to the department for a period of not
7 more than five days for purposes of a diagnostic examination.

8 (4)(a) If, after hearing all relevant evidence, including the
9 results of any diagnostic examination, the court finds that grounds
10 for involuntary commitment have been established by a preponderance
11 of the evidence and, after considering less restrictive alternatives
12 to involuntary detention and treatment, finds that no such
13 alternatives are in the best interest of the person or others, it
14 shall make an order of commitment to an approved substance use
15 disorder treatment program. It shall not order commitment of a person
16 unless it determines that an approved substance use disorder
17 treatment program is available and able to provide adequate and
18 appropriate treatment for him or her.

19 (b) If the court finds that the grounds for commitment have been
20 established by a preponderance of the evidence, but that treatment in
21 a less restrictive setting than detention is in the best interest of
22 such person or others, the court shall order an appropriate less
23 restrictive course of treatment. The less restrictive order may
24 impose treatment conditions and other conditions that are in the best
25 interest of the respondent and others. A copy of the less restrictive
26 order must be given to the respondent, the designated chemical
27 dependency specialist, and any program designated to provide less
28 restrictive treatment. If the program designated to provide the less
29 restrictive treatment is other than the program providing the initial
30 involuntary treatment, the program so designated must agree in
31 writing to assume such responsibility. The court may not order
32 commitment of a person to a less restrictive course of treatment
33 unless it determines that an approved substance use disorder
34 treatment program is available and able to provide adequate and
35 appropriate treatment for him or her.

36 (5) A person committed to inpatient treatment under this section
37 shall remain in the program for treatment for a period of fourteen
38 days unless sooner discharged. A person committed to a less
39 restrictive course of treatment under this section shall remain in
40 the program of treatment for a period of ninety days unless sooner

1 discharged. At the end of the fourteen-day period, or ninety-day
2 period in the case of a less restrictive alternative to inpatient
3 treatment, he or she shall be discharged automatically unless the
4 program or the designated chemical dependency specialist, before
5 expiration of the period, files a petition for his or her
6 recommitment upon the grounds set forth in subsection (1) of this
7 section for a further period of ninety days of inpatient treatment or
8 ninety days of less restrictive alternative treatment unless sooner
9 discharged. The petition for ninety-day inpatient or less restrictive
10 alternative treatment must be filed with the clerk of the court at
11 least three days before expiration of the fourteen-day period of
12 intensive treatment.

13 If a petition for recommitment is not filed in the case of a
14 minor, the parent, guardian, or custodian who has custody of the
15 minor may seek review of that decision made by the designated
16 chemical dependency specialist in superior or district court. The
17 parent, guardian, or custodian shall file notice with the court and
18 provide a copy of the treatment progress report.

19 If a person has been committed because he or she (~~is chemically~~
20 ~~dependent~~) has a substance use disorder and is likely to inflict
21 physical harm on another, the program or designated chemical
22 dependency specialist shall apply for recommitment if after
23 examination it is determined that the likelihood still exists.

24 (6) Upon the filing of a petition for recommitment under
25 subsection (5) of this section, the court shall fix a date for
26 hearing no less than two and no more than seven days after the date
27 the petition was filed(~~(: PROVIDED, That,)~~). The court may, upon
28 motion of the person whose commitment is sought and upon good cause
29 shown, extend the date for the hearing. A copy of the petition and of
30 the notice of hearing, including the date fixed by the court, shall
31 be served by the treatment program on the person whose commitment is
32 sought, his or her next of kin, the original petitioner under
33 subsection (1) of this section if different from the petitioner for
34 recommitment, one of his or her parents or his or her legal guardian
35 if he or she is a minor, and his or her attorney and any other person
36 the court believes advisable. At the hearing the court shall proceed
37 as provided in subsections (3) and (4) of this section, except that
38 the burden of proof upon a hearing for recommitment must be proof by
39 clear, cogent, and convincing evidence.

1 (7) The approved substance use disorder treatment program shall
2 provide for adequate and appropriate treatment of a person committed
3 to its custody on an inpatient or outpatient basis. A person
4 committed under this section may be transferred from one approved
5 public treatment program to another if transfer is medically
6 advisable.

7 (8) A person committed to a program for treatment shall be
8 discharged at any time before the end of the period for which he or
9 she has been committed and he or she shall be discharged by order of
10 the court if either of the following conditions are met:

11 (a) In case of a (~~chemically dependent~~) person with a substance
12 use disorder committed on the grounds of likelihood of infliction of
13 physical harm upon himself, herself, or another, the likelihood no
14 longer exists; or further treatment will not be likely to bring about
15 significant improvement in the person's condition, or treatment is no
16 longer adequate or appropriate.

17 (b) In case of a (~~chemically dependent~~) person with a substance
18 use disorder committed on the grounds of the need of treatment and
19 incapacity, that the incapacity no longer exists.

20 (9) The court shall inform the person whose commitment or
21 recommitment is sought of his or her right to contest the
22 application, be represented by counsel at every stage of any
23 proceedings relating to his or her commitment and recommitment, and
24 have counsel appointed by the court or provided by the court, if he
25 or she wants the assistance of counsel and is unable to obtain
26 counsel. If the court believes that the person needs the assistance
27 of counsel, the court shall require, by appointment if necessary,
28 counsel for him or her regardless of his or her wishes. The person
29 shall, if he or she is financially able, bear the costs of such legal
30 service; otherwise such legal service shall be at public expense. The
31 person whose commitment or recommitment is sought shall be informed
32 of his or her right to be examined by a licensed physician,
33 (~~psychiatric~~) advanced registered nurse practitioner, physician
34 assistant, or other professional person of his or her choice who is
35 qualified to provide such services. If the person is unable to obtain
36 a qualified person and requests an examination, the court shall
37 employ a licensed physician, (~~psychiatric~~) advanced registered
38 nurse practitioner, physician assistant, or other professional person
39 to conduct an examination and testify on behalf of the person.

1 (10) A person committed under this chapter may at any time seek
2 to be discharged from commitment by writ of habeas corpus in a court
3 of competent jurisdiction.

4 (11) The venue for proceedings under this section is the county
5 in which person to be committed resides or is present.

6 (12) When in the opinion of the professional person in charge of
7 the program providing involuntary inpatient treatment under this
8 chapter, the committed patient can be appropriately served by less
9 restrictive treatment before expiration of the period of commitment,
10 then the less restrictive care may be required as a condition for
11 early release for a period which, when added to the initial treatment
12 period, does not exceed the period of commitment. If the program
13 designated to provide the less restrictive treatment is other than
14 the program providing the initial involuntary treatment, the program
15 so designated must agree in writing to assume such responsibility. A
16 copy of the conditions for early release shall be given to the
17 patient, the designated chemical dependency specialist of original
18 commitment, and the court of original commitment. The program
19 designated to provide less restrictive care may modify the conditions
20 for continued release when the modifications are in the best
21 interests of the patient. If the program providing less restrictive
22 care and the designated chemical dependency specialist determine that
23 a conditionally released patient is failing to adhere to the terms
24 and conditions of his or her release, or that substantial
25 deterioration in the patient's functioning has occurred, then the
26 designated chemical dependency specialist shall notify the court of
27 original commitment and request a hearing to be held no less than two
28 and no more than seven days after the date of the request to
29 determine whether or not the person should be returned to more
30 restrictive care. The designated chemical dependency specialist shall
31 file a petition with the court stating the facts substantiating the
32 need for the hearing along with the treatment recommendations. The
33 patient shall have the same rights with respect to notice, hearing,
34 and counsel as for the original involuntary treatment proceedings.
35 The issues to be determined at the hearing are whether the
36 conditionally released patient did or did not adhere to the terms and
37 conditions of his or her release to less restrictive care or that
38 substantial deterioration of the patient's functioning has occurred
39 and whether the conditions of release should be modified or the
40 person should be returned to a more restrictive program. The hearing

1 may be waived by the patient and his or her counsel and his or her
2 guardian or conservator, if any, but may not be waived unless all
3 such persons agree to the waiver. Upon waiver, the person may be
4 returned for involuntary treatment or continued on conditional
5 release on the same or modified conditions. The grounds and
6 procedures for revocation of less restrictive alternative treatment
7 ordered by the court must be the same as those set forth in this
8 section for less restrictive care arranged by an approved substance
9 use disorder treatment program as a condition for early release.

10 **Sec. 14.** RCW 71.05.020 and 2016 sp.s. c 29 s 204 and 2016 c 155
11 s 1 are each reenacted and amended to read as follows:

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

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

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

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

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

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

35 (6) "Chemical dependency" means:

36 (a) Alcoholism;

37 (b) Drug addiction; or

38 (c) Dependence on alcohol and one or more psychoactive chemicals,
39 as the context requires;

1 (7) "Chemical dependency professional" means a person certified
2 as a chemical dependency professional by the department of health
3 under chapter 18.205 RCW;

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

7 (9) "Conditional release" means a revocable modification of a
8 commitment, which may be revoked upon violation of any of its terms;

9 (10) "Crisis stabilization unit" means a short-term facility or a
10 portion of a facility licensed by the department of health and
11 certified by the department of social and health services under RCW
12 71.24.035, such as an evaluation and treatment facility or a
13 hospital, which has been designed to assess, diagnose, and treat
14 individuals experiencing an acute crisis without the use of long-term
15 hospitalization;

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

20 (12) "Department" means the department of social and health
21 services;

22 (13) "Designated crisis responder" means a mental health
23 professional appointed by the behavioral health organization to
24 perform the duties specified in this chapter;

25 (14) "Detention" or "detain" means the lawful confinement of a
26 person, under the provisions of this chapter;

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

35 (16) "Developmental disability" means that condition defined in
36 RCW 71A.10.020(5);

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

1 (18) "Drug addiction" means a disease, characterized by a
2 dependency on psychoactive chemicals, loss of control over the amount
3 and circumstances of use, symptoms of tolerance, physiological or
4 psychological withdrawal, or both, if use is reduced or discontinued,
5 and impairment of health or disruption of social or economic
6 functioning;

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

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

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

37 (22) "History of one or more violent acts" refers to the period
38 of time ten years prior to the filing of a petition under this
39 chapter, excluding any time spent, but not any violent acts
40 committed, in a mental health facility, a long-term alcoholism or

1 drug treatment facility, or in confinement as a result of a criminal
2 conviction;

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

5 (24) "Individualized service plan" means a plan prepared by a
6 developmental disabilities professional with other professionals as a
7 team, for a person with developmental disabilities, which shall
8 state:

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

11 (b) The conditions and strategies necessary to achieve the
12 purposes of habilitation;

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

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

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

18 (f) Where relevant in light of past criminal behavior and due
19 consideration for public safety, the criteria for proposed movement
20 to less-restrictive settings, criteria for proposed eventual
21 discharge or release, and a projected possible date for discharge or
22 release; and

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

25 (25) "Information related to mental health services" means all
26 information and records compiled, obtained, or maintained in the
27 course of providing services to either voluntary or involuntary
28 recipients of services by a mental health service provider. This may
29 include documents of legal proceedings under this chapter or chapter
30 71.34 or 10.77 RCW, or somatic health care information;

31 (26) "Intoxicated person" means a person whose mental or physical
32 functioning is substantially impaired as a result of the use of
33 alcohol or other psychoactive chemicals;

34 (27) "In need of assisted outpatient mental health treatment"
35 means that a person, as a result of a mental disorder: (a) Has been
36 committed by a court to detention for involuntary mental health
37 treatment at least twice during the preceding thirty-six months, or,
38 if the person is currently committed for involuntary mental health
39 treatment, the person has been committed to detention for involuntary
40 mental health treatment at least once during the thirty-six months

1 preceding the date of initial detention of the current commitment
2 cycle; (b) is unlikely to voluntarily participate in outpatient
3 treatment without an order for less restrictive alternative
4 treatment, in view of the person's treatment history or current
5 behavior; (c) is unlikely to survive safely in the community without
6 supervision; (d) is likely to benefit from less restrictive
7 alternative treatment; and (e) requires less restrictive alternative
8 treatment to prevent a relapse, decompensation, or deterioration that
9 is likely to result in the person presenting a likelihood of serious
10 harm or the person becoming gravely disabled within a reasonably
11 short period of time. For purposes of (a) of this subsection, time
12 spent in a mental health facility or in confinement as a result of a
13 criminal conviction is excluded from the thirty-six month
14 calculation;

15 (28) "Judicial commitment" means a commitment by a court pursuant
16 to the provisions of this chapter;

17 (29) "Legal counsel" means attorneys and staff employed by county
18 prosecutor offices or the state attorney general acting in their
19 capacity as legal representatives of public mental health and
20 substance use disorder service providers under RCW 71.05.130;

21 (30) "Less restrictive alternative treatment" means a program of
22 individualized treatment in a less restrictive setting than inpatient
23 treatment that includes the services described in RCW 71.05.585;

24 (31) "Licensed physician" means a person licensed to practice
25 medicine or osteopathic medicine and surgery in the state of
26 Washington;

27 (32) "Likelihood of serious harm" means:

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

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

1 (33) "Medical clearance" means a physician or other health care
2 provider has determined that a person is medically stable and ready
3 for referral to the designated crisis responder;

4 (34) "Mental disorder" means any organic, mental, or emotional
5 impairment which has substantial adverse effects on a person's
6 cognitive or volitional functions;

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

13 (36) "Mental health service provider" means a public or private
14 agency that provides mental health services to persons with mental
15 disorders or substance use disorders as defined under this section
16 and receives funding from public sources. This includes, but is not
17 limited to, hospitals licensed under chapter 70.41 RCW, evaluation
18 and treatment facilities as defined in this section, community mental
19 health service delivery systems or behavioral health programs as
20 defined in RCW 71.24.025, facilities conducting competency
21 evaluations and restoration under chapter 10.77 RCW, approved
22 substance use disorder treatment programs as defined in this section,
23 secure detoxification facilities as defined in this section, and
24 correctional facilities operated by state and local governments;

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

29 (38) "Physician assistant" means a person licensed as a physician
30 assistant under chapter 18.57A or 18.71A RCW;

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

39 (40) "Professional person" means a mental health professional,
40 chemical dependency professional, or designated crisis responder and

1 shall also mean a physician, physician assistant, psychiatric
2 advanced registered nurse practitioner, registered nurse, and such
3 others as may be defined by rules adopted by the secretary pursuant
4 to the provisions of this chapter;

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

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

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

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

25 (45) "Registration records" include all the records of the
26 department, behavioral health organizations, treatment facilities,
27 and other persons providing services to the department, county
28 departments, or facilities which identify persons who are receiving
29 or who at any time have received services for mental illness or
30 substance use disorders;

31 (46) "Release" means legal termination of the commitment under
32 the provisions of this chapter;

33 (47) "Resource management services" has the meaning given in
34 chapter 71.24 RCW;

35 (48) "Secretary" means the secretary of the department of social
36 and health services, or his or her designee;

37 (49) "Secure detoxification facility" means a facility operated
38 by either a public or private agency or by the program of an agency
39 that:

40 (a) Provides for intoxicated persons:

1 (i) Evaluation and assessment, provided by certified chemical
2 dependency professionals;

3 (ii) Acute or subacute detoxification services; and

4 (iii) Discharge assistance provided by certified chemical
5 dependency professionals, including facilitating transitions to
6 appropriate voluntary or involuntary inpatient services or to less
7 restrictive alternatives as appropriate for the individual;

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

10 (c) Is certified as such by the department;

11 (50) "Serious violent offense" has the same meaning as provided
12 in RCW 9.94A.030;

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

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

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

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

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

9 (56) "Violent act" means behavior that resulted in homicide,
10 attempted suicide, nonfatal injuries, or substantial damage to
11 property.

12 **Sec. 15.** RCW 71.05.210 and 2016 sp.s. c 29 s 224 and 2016 c 155
13 s 2 are each reenacted and amended to read as follows:

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

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

20 (i) One physician (~~(and a mental health professional)~~), physician
21 assistant, or advanced registered nurse professional; and

22 (ii) One (~~(physician assistant and a)~~) mental health
23 professional(~~(; or~~

24 ~~(iii) One advanced registered nurse practitioner and a mental~~
25 ~~health)) or chemical dependency professional; and~~

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

1 released, unless referred for further care on a voluntary basis, or
2 detained pursuant to court order for further treatment as provided in
3 this chapter.

4 (2) If, after examination and evaluation, the mental health
5 professional or chemical dependency professional and licensed
6 physician, physician assistant, or psychiatric advanced registered
7 nurse practitioner determine that the initial needs of the person, if
8 detained to an evaluation and treatment facility, would be better
9 served by placement in a substance use disorder treatment
10 (~~facility~~) program, or, if detained to a secure detoxification
11 facility or approved substance use disorder treatment program, would
12 be better served in an evaluation and treatment facility than the
13 person shall be referred to the more appropriate placement; however,
14 a person may only be referred to a secure detoxification facility or
15 approved substance use disorder treatment program if there is an
16 available secure detoxification facility or approved substance use
17 disorder treatment program with adequate space for the person.

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

28 (4) A person detained, accepted, or admitted to an evaluation and
29 treatment facility must be evaluated by a mental health professional.
30 A person detained, accepted, or admitted to a secure detox facility
31 or approved substance use disorder treatment facility must be
32 evaluated by a chemical dependency professional.

33 **Sec. 16.** RCW 71.05.210 and 2016 sp.s. c 29 s 225 are each
34 amended to read as follows:

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

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

4 (i) One physician (~~(and a mental health professional)~~), physician
5 assistant, or advanced registered nurse professional; and

6 (ii) One (~~(physician assistant and a)~~) mental health
7 professional(~~(; or~~

8 ~~(iii) One advanced registered nurse practitioner and a mental~~
9 ~~health)) or chemical dependency professional; and~~

10 (b) Shall receive such treatment and care as his or her condition
11 requires including treatment on an outpatient basis for the period
12 that he or she is detained, except that, beginning twenty-four hours
13 prior to a trial or hearing pursuant to RCW 71.05.215, 71.05.240,
14 71.05.310, 71.05.320, 71.05.590, or 71.05.217, the individual may
15 refuse psychiatric medications, but may not refuse: (i) Any other
16 medication previously prescribed by a person licensed under Title 18
17 RCW; or (ii) emergency lifesaving treatment, and the individual shall
18 be informed at an appropriate time of his or her right of such
19 refusal. The person shall be detained up to seventy-two hours, if, in
20 the opinion of the professional person in charge of the facility, or
21 his or her professional designee, the person presents a likelihood of
22 serious harm, or is gravely disabled. A person who has been detained
23 for seventy-two hours shall no later than the end of such period be
24 released, unless referred for further care on a voluntary basis, or
25 detained pursuant to court order for further treatment as provided in
26 this chapter.

27 (2) If, after examination and evaluation, the mental health
28 professional or chemical dependency professional and licensed
29 physician, physician assistant, or psychiatric advanced registered
30 nurse practitioner determine that the initial needs of the person, if
31 detained to an evaluation and treatment facility, would be better
32 served by placement in a substance use disorder treatment
33 (~~(facility)) program, or, if detained to a secure detoxification~~
34 facility or approved substance use disorder treatment program, would
35 be better served in an evaluation and treatment facility than the
36 person shall be referred to the more appropriate placement.

37 (3) An evaluation and treatment center, secure detoxification
38 facility, or approved substance use disorder treatment program
39 admitting or accepting any person pursuant to this chapter whose
40 physical condition reveals the need for hospitalization shall assure

1 that such person is transferred to an appropriate hospital for
2 evaluation or admission for treatment. Notice of such fact shall be
3 given to the court, the designated attorney, and the designated
4 crisis responder and the court shall order such continuance in
5 proceedings under this chapter as may be necessary, but in no event
6 may this continuance be more than fourteen days.

7 (4) A person detained, accepted, or admitted to an evaluation and
8 treatment facility must be evaluated by a mental health professional.
9 A person detained, accepted, or admitted to a secure detox facility
10 or approved substance use disorder treatment facility must be
11 evaluated by a chemical dependency professional.

12 **Sec. 17.** RCW 71.05.230 and 2016 sp.s. c 29 s 230, 2016 c 155 s
13 5, and 2016 c 45 s 1 are each reenacted and amended to read as
14 follows:

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

22 (1) The professional staff of the agency or facility providing
23 evaluation services has analyzed the person's condition and finds
24 that the condition is caused by mental disorder or substance use
25 disorder and results in a likelihood of serious harm, results in the
26 person being gravely disabled, or results in the person being in need
27 of assisted outpatient mental health treatment, and are prepared to
28 testify those conditions are met; and

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

32 (3) The agency or facility providing intensive treatment or which
33 proposes to supervise the less restrictive alternative is certified
34 to provide such treatment by the department; and

35 (4) The professional staff of the agency or facility or the
36 designated crisis responder has filed a petition with the court for a
37 fourteen day involuntary detention or a ninety day less restrictive
38 alternative. The petition must be signed (~~either~~) by:

1 (a) (~~Two physicians~~) One physician, physician assistant, or
2 advanced registered nurse practitioner; and

3 (b) One physician ((and a)), physician assistant, advanced
4 registered nurse practitioner, mental health professional((+

5 ~~(c) One physician assistant and a mental health professional; or~~

6 ~~(d) One psychiatric advanced registered nurse practitioner and a~~
7 ~~mental health professional)), or chemical dependency professional.~~

8 The persons signing the petition must have examined the person. If
9 the person is detained for the purpose of mental health treatment,

10 the person must be examined by a mental health professional. If

11 involuntary detention is sought the petition shall state facts that
12 support the finding that such person, as a result of a mental
13 disorder or substance use disorder, presents a likelihood of serious

14 harm, or is gravely disabled and that there are no less restrictive
15 alternatives to detention in the best interest of such person or

16 others. The petition shall state specifically that less restrictive
17 alternative treatment was considered and specify why treatment less

18 restrictive than detention is not appropriate. If an involuntary less
19 restrictive alternative is sought, the petition shall state facts

20 that support the finding that such person, as a result of a mental
21 disorder or as a result of a substance use disorder, presents a

22 likelihood of serious harm, is gravely disabled, or is in need of
23 assisted outpatient mental health treatment, and shall set forth any

24 recommendations for less restrictive alternative treatment services;
25 and

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

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

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

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

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

6 **Part Five - Technical**

7 NEW SECTION. **Sec. 18.** Section 13 of this act is necessary for
8 the immediate preservation of the public peace, health, or safety, or
9 support of the state government and its existing public institutions,
10 and takes effect immediately.

11 NEW SECTION. **Sec. 19.** Sections 8, 11, and 13 of this act expire
12 April 1, 2018.

13 NEW SECTION. **Sec. 20.** Sections 9, 12, 14, 15, and 17 of this
14 act take effect April 1, 2018.

15 NEW SECTION. **Sec. 21.** Sections 9 and 15 of this act expire July
16 1, 2026.

17 NEW SECTION. **Sec. 22.** Sections 10 and 16 of this act take
18 effect July 1, 2026."

SSB 5106 - S AMD 9
By Senator O'Ban

ADOPTED 02/23/2017

19 On page 1, line 2 of the title, after "act;" strike the remainder
20 of the title and insert "amending RCW 71.05.201, 71.05.203,
21 71.05.203, 71.05.590, 71.05.590, 71.05.590, 71.05.154, 71.05.154,
22 70.96A.140, and 71.05.210; reenacting and amending RCW 71.05.201,
23 71.05.020, 71.05.210, and 71.05.230; creating a new section;
24 providing effective dates; providing expiration dates; and declaring
25 an emergency."

EFFECT: Adds the contents of PSSB 5580 to the bill, allowing a
chemical dependency professional, instead of a mental health
professional, to sign a petition for involuntary commitment based on

a substance use disorder and to participate in civil commitment evaluations in the integrated crisis system.

--- END ---