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**SUBSTITUTE SENATE BILL 5655**

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**State of Washington 67th Legislature 2022 Regular Session**

**By** Senate Behavioral Health Subcommittee to Health & Long Term Care (originally sponsored by Senators Dhingra, Lovick, and C. Wilson)

AN ACT Relating to individuals who experience refusals of service for involuntary behavioral health treatment; creating new sections; and providing an expiration date.

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

NEW SECTION. **Sec.**  The legislature finds that over 30 percent of individuals currently at our state hospitals receiving forensic services are repeat patients. Many individuals in our state hospitals are individuals whose needs were not met when they were first referred for civil commitment. There is a subset of forensic patients who end up at a state hospital because their needs were not met in the civil system. Their unmet needs contribute to their involvement in the criminal justice system. As a state we need to provide an appropriate level of care to individuals when they are first identified as needing that care, instead of giving them the care they need through our forensic system. The consistent increase in numbers and acuity of forensic patients at our state hospitals is unacceptable, and solutions for this population have to be found.

NEW SECTION. **Sec.**  (1)(a) A task force is established on individuals who experience refusals of service for involuntary behavioral health treatment and then are referred to our state hospitals for forensic competency evaluation and restoration services, with members as provided in this subsection.

(i) The president of the senate shall appoint one member from each of the two largest caucuses of the senate.

(ii) The speaker of the house of representatives shall appoint one member from each of the two largest caucuses of the house of representatives.

(iii) The governor shall appoint the following members:

(A) The director of the health care authority or his or her designee;

(B) The secretary of the department of social and health services or his or her designee;

(C) The chief executive officer of western state hospital or his or her designee;

(D) The chief executive officer of eastern state hospital or his or her designee;

(E) The Washington state attorney general or his or her designee;

(F) Two individuals with lived experience of involuntary civil commitment for behavioral health;

(G) Two individuals with lived experience as a family member of a person who experienced involuntary civil commitment for behavioral health; and

(H) A representative of:

(I) The Washington state hospital association;

(II) The Washington designated crisis responder association;

(III) Behavioral health administrative services organizations;

(IV) King county;

(V) Spokane county;

(VI) The Washington association of prosecuting attorneys;

(VII) The Washington defender association; and

(VIII) A services provider for forensically involved individuals.

(b) The task force shall choose as its cochairs one person from among its legislative members and one person from among its executive branch members. The health care authority shall convene the first meeting of the task force by June 30, 2022.

(2) The task force shall review the following issues in terms of those individuals who have a history of one or more acts of violence:

(a) Solutions to provide appropriate treatment for persons who experience difficulty obtaining placement in local evaluation and treatment facilities or secure withdrawal management and stabilization facilities due to a history of one or more violent acts as that term is defined under chapter 71.05 RCW;

(b) Solutions to reduce the need for the use of single bed certifications under RCW 71.05.745 based on unavailability of appropriate alternative placements;

(c) Solutions to reduce the need for filing no bed available reports under RCW 71.05.750; and

(d) Acceptable procedures for obtaining needed medical clearance for involuntary treatment with a goal to reduce or avoid the use of emergency departments.

(3) Staff support for the task force must be provided by the health care authority.

(4) Legislative members of the task force are reimbursed for travel expenses in accordance with RCW 44.04.120. Nonlegislative members are not entitled to be reimbursed for travel expenses if they are elected officials or are participating on behalf of an employer, governmental entity, or other organization. Any reimbursement for other nonlegislative members is subject to chapter 43.03 RCW.

(5) Task force expenditures for legislative members are subject to approval by the senate facilities and operations committee and the house of representatives executive rules committee, or their successor committees.

(6) The task force shall report preliminary findings and recommendations to the governor and appropriate committees of the legislature by October 15, 2022, and issue its final recommendations to the governor and appropriate committees of the legislature by December 1, 2022.

(7) This section expires June 30, 2023.

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