

ESB 5130 - H COMM AMD  
By Committee on Appropriations

ADOPTED AND ENGROSSED 04/12/2023

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

3 **"Sec. 1.** RCW 71.05.148 and 2022 c 210 s 3 are each amended to  
4 read as follows:

5 (1) A person is in need of assisted outpatient treatment if the  
6 court finds by clear, cogent, and convincing evidence pursuant to a  
7 petition filed under this section that:

8 (a) The person has a behavioral health disorder;

9 (b) Based on a clinical determination and in view of the person's  
10 treatment history and current behavior, at least one of the following  
11 is true:

12 (i) The person is unlikely to survive safely in the community  
13 without supervision and the person's condition is substantially  
14 deteriorating; or

15 (ii) The person is in need of assisted outpatient treatment in  
16 order to prevent a relapse or deterioration that would be likely to  
17 result in grave disability or a likelihood of serious harm to the  
18 person or to others;

19 (c) The person has a history of lack of compliance with treatment  
20 for his or her behavioral health disorder that has:

21 (i) At least twice within the 36 months prior to the filing of  
22 the petition been a significant factor in necessitating  
23 hospitalization of the person, or the person's receipt of services in  
24 a forensic or other mental health unit of a state correctional  
25 facility or local correctional facility, provided that the 36-month  
26 period shall be extended by the length of any hospitalization or  
27 incarceration of the person that occurred within the 36-month period;

28 (ii) At least twice within the 36 months prior to the filing of  
29 the petition been a significant factor in necessitating emergency  
30 medical care or hospitalization for behavioral health-related medical  
31 conditions including overdose, infected abscesses, sepsis,  
32 endocarditis, or other maladies, or a significant factor in behavior

1 which resulted in the person's incarceration in a state or local  
2 correctional facility; or

3 (iii) Resulted in one or more violent acts, threats, or attempts  
4 to cause serious physical harm to the person or another within the 48  
5 months prior to the filing of the petition, provided that the 48-  
6 month period shall be extended by the length of any hospitalization  
7 or incarceration of the person that occurred during the 48-month  
8 period;

9 (d) Participation in an assisted outpatient treatment program  
10 would be the least restrictive alternative necessary to ensure the  
11 person's recovery and stability; and

12 (e) The person will benefit from assisted outpatient treatment.

13 (2) The following individuals may directly file a petition for  
14 less restrictive alternative treatment on the basis that a person is  
15 in need of assisted outpatient treatment:

16 (a) The director of a hospital where the person is hospitalized  
17 or the director's designee;

18 (b) The director of a behavioral health service provider  
19 providing behavioral health care or residential services to the  
20 person or the director's designee;

21 (c) The person's treating mental health professional or substance  
22 use disorder professional or one who has evaluated the person;

23 (d) A designated crisis responder;

24 (e) A release planner from a corrections facility; or

25 (f) An emergency room physician.

26 (3) A court order for less restrictive alternative treatment on  
27 the basis that the person is in need of assisted outpatient treatment  
28 may be effective for up to 18 months, unless the person is currently  
29 detained for inpatient treatment for 14 days or more under RCW  
30 71.05.240 or 71.05.320, in which case the order may be effective for  
31 90 days if the person is currently detained for 14 days of treatment,  
32 or 180 days if the person is currently detained for 90 or 180 days of  
33 treatment. The petitioner must personally interview the person,  
34 unless the person refuses an interview, to determine whether the  
35 person will voluntarily receive appropriate treatment.

36 (4) The petitioner must allege specific facts based on personal  
37 observation, evaluation, or investigation, and must consider the  
38 reliability or credibility of any person providing information  
39 material to the petition.

40 (5) The petition must include:

1 (a) A statement of the circumstances under which the person's  
2 condition was made known and the basis for the opinion, from personal  
3 observation or investigation, that the person is in need of assisted  
4 outpatient treatment. The petitioner must state which specific facts  
5 come from personal observation and specify what other sources of  
6 information the petitioner has relied upon to form this belief;

7 (b) A declaration from a physician, physician assistant, advanced  
8 registered nurse practitioner, ~~((or))~~ the person's treating mental  
9 health professional or substance use disorder professional, or in the  
10 case of a person enrolled in treatment in a behavioral health agency,  
11 the person's behavioral health case manager, who has examined the  
12 person no more than 10 days prior to the submission of the petition  
13 and who is willing to testify in support of the petition, or who  
14 alternatively has made appropriate attempts to examine the person  
15 within the same period but has not been successful in obtaining the  
16 person's cooperation, and who is willing to testify to the reasons  
17 they believe that the person meets the criteria for assisted  
18 outpatient treatment ~~((. If the declaration is provided by the~~  
19 ~~person's treating mental health professional or substance use~~  
20 ~~disorder professional, it must be cosigned by a supervising~~  
21 ~~physician, physician assistant, or advanced registered nurse~~  
22 ~~practitioner who certifies that they have reviewed the declaration))~~;

23 (c) The declarations of additional witnesses, if any, supporting  
24 the petition for assisted outpatient treatment;

25 (d) The name of an agency, provider, or facility that agrees to  
26 provide less restrictive alternative treatment if the petition is  
27 granted by the court; and

28 (e) If the person is detained in a state hospital, inpatient  
29 treatment facility, jail, or correctional facility at the time the  
30 petition is filed, the anticipated release date of the person and any  
31 other details needed to facilitate successful reentry and transition  
32 into the community.

33 (6)(a) Upon receipt of a petition meeting all requirements of  
34 this section, the court shall fix a date for a hearing:

35 (i) No sooner than three days or later than seven days after the  
36 date of service or as stipulated by the parties or, upon a showing of  
37 good cause, no later than 30 days after the date of service; or

38 (ii) If the respondent is hospitalized at the time of filing of  
39 the petition, before discharge of the respondent and in sufficient

1 time to arrange for a continuous transition from inpatient treatment  
2 to assisted outpatient treatment.

3 (b) A copy of the petition and notice of hearing shall be served,  
4 in the same manner as a summons, on the petitioner, the respondent,  
5 the qualified professional whose affidavit accompanied the petition,  
6 a current provider, if any, and a surrogate decision maker or agent  
7 under chapter 71.32 RCW, if any.

8 (c) If the respondent has a surrogate decision maker or agent  
9 under chapter 71.32 RCW who wishes to provide testimony at the  
10 hearing, the court shall afford the surrogate decision maker or agent  
11 an opportunity to testify.

12 (d) The respondent shall be represented by counsel at all stages  
13 of the proceedings.

14 (e) If the respondent fails to appear at the hearing after  
15 notice, the court may conduct the hearing in the respondent's  
16 absence; provided that the respondent's counsel is present.

17 (f) If the respondent has refused to be examined by the qualified  
18 professional whose affidavit accompanied the petition, the court may  
19 order a mental examination of the respondent. The examination of the  
20 respondent may be performed by the qualified professional whose  
21 affidavit accompanied the petition. If the examination is performed  
22 by another qualified professional, the examining qualified  
23 professional shall be authorized to consult with the qualified  
24 professional whose affidavit accompanied the petition.

25 (g) If the respondent has refused to be examined by a qualified  
26 professional and the court finds reasonable grounds to believe that  
27 the allegations of the petition are true, the court may issue a  
28 written order directing a peace officer who has completed crisis  
29 intervention training to detain and transport the respondent to a  
30 provider for examination by a qualified professional. A respondent  
31 detained pursuant to this subsection shall be detained no longer than  
32 necessary to complete the examination and in no event longer than 24  
33 hours.

34 (7) If the petition involves a person whom the petitioner or  
35 behavioral health administrative services organization knows, or has  
36 reason to know, is an American Indian or Alaska Native who receives  
37 medical or behavioral health services from a tribe within this state,  
38 the behavioral health administrative services organization shall  
39 notify the tribe and Indian health care provider. Notification shall  
40 be made in person or by telephonic or electronic communication to the

1 tribal contact listed in the authority's tribal crisis coordination  
2 plan as soon as possible.

3 (8) A petition for assisted outpatient treatment filed under this  
4 section shall be adjudicated under RCW 71.05.240.

5 (9) (~~(After January 1, 2023, a)~~) A petition for assisted  
6 outpatient treatment must be filed on forms developed by the  
7 administrative office of the courts.

8 **Sec. 2.** RCW 71.05.240 and 2022 c 210 s 12 are each amended to  
9 read as follows:

10 (1) If a petition is filed for up to 14 days of involuntary  
11 treatment, 90 days of less restrictive alternative treatment, or 18  
12 months of less restrictive alternative treatment under RCW 71.05.148,  
13 the court shall hold a probable cause hearing within 120 hours of the  
14 initial detention under RCW 71.05.180, or at a time scheduled under  
15 RCW 71.05.148.

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

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

30 (4)(a) Subject to (b) of this subsection, at the conclusion of  
31 the probable cause hearing, if the court finds by a preponderance of  
32 the evidence that a person detained for behavioral health treatment,  
33 as the result of a behavioral health disorder, presents a likelihood  
34 of serious harm, or is gravely disabled, and, after considering less  
35 restrictive alternatives to involuntary detention and treatment,  
36 finds that no such alternatives are in the best interests of such  
37 person or others, the court shall order that such person be detained  
38 for involuntary treatment not to exceed 14 days in a facility

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

3 (b) A court may only order commitment to a secure withdrawal  
4 management and stabilization facility or approved substance use  
5 disorder treatment program if there is an available facility with  
6 adequate space for the person.

7 (c) At the conclusion of the probable cause hearing, if the court  
8 finds by a preponderance of the evidence that a person detained for  
9 behavioral health treatment, as the result of a behavioral health  
10 disorder, presents a likelihood of serious harm or is gravely  
11 disabled, but that treatment in a less restrictive setting than  
12 detention is in the best interest of such person or others, the court  
13 shall order an appropriate less restrictive alternative course of  
14 treatment for up to ninety days.

15 (d) If the court finds by (~~a preponderance of the~~) clear,  
16 cogent, and convincing evidence that a person subject to a petition  
17 under RCW 71.05.148, as the result of a behavioral health disorder,  
18 is in need of assisted outpatient treatment, the court shall order an  
19 appropriate less restrictive alternative course of treatment for up  
20 to 18 months.

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

27 (6) The court shall notify the person orally and in writing that  
28 if involuntary treatment is sought beyond the 14-day inpatient or 90-  
29 day less restrictive treatment period, the person has the right to a  
30 full hearing or jury trial under RCW 71.05.310. If the commitment is  
31 for mental health treatment, the court shall notify the person orally  
32 and in writing that the person is barred from the possession of  
33 firearms and that the prohibition remains in effect until a court  
34 restores his or her right to possess a firearm under RCW 9.41.047.

35 (7) If the court does not issue an order to detain or commit a  
36 person under this section, the court shall issue an order to dismiss  
37 the petition.

38 (8) Nothing in this section precludes the court from subsequently  
39 modifying the terms of an order for less restrictive alternative  
40 treatment under RCW 71.05.590(3).

1       **Sec. 3.** RCW 71.05.240 and 2022 c 210 s 13 are each amended to  
2 read as follows:

3       (1) If a petition is filed for up to 14 days of involuntary  
4 treatment, 90 days of less restrictive alternative treatment, or 18  
5 months of less restrictive alternative treatment under RCW 71.05.148,  
6 the court shall hold a probable cause hearing within 120 hours of the  
7 initial detention under RCW 71.05.180, or at a time scheduled under  
8 RCW 71.05.148.

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

16       (3) If the person or his or her attorney alleges, prior to the  
17 commencement of the hearing, that the person has in good faith  
18 volunteered for treatment, the petitioner must show, by preponderance  
19 of the evidence, that the person has not in good faith volunteered  
20 for appropriate treatment. In order to qualify as a good faith  
21 volunteer, the person must abide by procedures and a treatment plan  
22 as prescribed by a treatment facility and professional staff.

23       (4)(a) At the conclusion of the probable cause hearing, if the  
24 court finds by a preponderance of the evidence that a person detained  
25 for behavioral health treatment, as the result of a behavioral health  
26 disorder, presents a likelihood of serious harm, or is gravely  
27 disabled, and, after considering less restrictive alternatives to  
28 involuntary detention and treatment, finds that no such alternatives  
29 are in the best interests of such person or others, the court shall  
30 order that such person be detained for involuntary treatment not to  
31 exceed fourteen days in a facility licensed or certified to provide  
32 treatment by the department or under RCW 71.05.745.

33       (b) At the conclusion of the probable cause hearing, if the court  
34 finds by a preponderance of the evidence that a person detained for  
35 behavioral health treatment, as the result of a behavioral health  
36 disorder, presents a likelihood of serious harm or is gravely  
37 disabled, but that treatment in a less restrictive setting than  
38 detention is in the best interest of such person or others, the court  
39 shall order an appropriate less restrictive alternative course of  
40 treatment for up to ninety days.

1 (c) If the court finds by (~~a preponderance of the~~) clear,  
2 cogent, and convincing evidence that a person subject to a petition  
3 under RCW 71.05.148, as the result of a behavioral health disorder,  
4 is in need of assisted outpatient treatment, the court shall order an  
5 appropriate less restrictive alternative course of treatment for up  
6 to 18 months.

7 (5) An order for less restrictive alternative treatment must name  
8 the behavioral health service provider responsible for identifying  
9 the services the person will receive in accordance with RCW  
10 71.05.585, and must include a requirement that the person cooperate  
11 with the treatment recommendations of the behavioral health service  
12 provider.

13 (6) The court shall notify the person orally and in writing that  
14 if involuntary treatment is sought beyond the 14-day inpatient or 90-  
15 day less restrictive treatment period, such person has the right to a  
16 full hearing or jury trial under RCW 71.05.310. If the commitment is  
17 for mental health treatment, the court shall also notify the person  
18 orally and in writing that the person is barred from the possession  
19 of firearms and that the prohibition remains in effect until a court  
20 restores his or her right to possess a firearm under RCW 9.41.047.

21 (7) If the court does not issue an order to detain or commit a  
22 person under this section, the court shall issue an order to dismiss  
23 the petition.

24 (8) Nothing in this section precludes the court from subsequently  
25 modifying the terms of an order for less restrictive alternative  
26 treatment under RCW 71.05.590(3).

27 **Sec. 4.** RCW 71.05.365 and 2022 c 210 s 19 are each amended to  
28 read as follows:

29 When a person has been involuntarily committed for treatment to a  
30 hospital for a period of 90 or 180 days, and the superintendent or  
31 professional person in charge of the hospital determines that the  
32 person no longer requires active psychiatric treatment at an  
33 inpatient level of care, the behavioral health administrative  
34 services organization, managed care organization, or agency providing  
35 oversight of long-term care or developmental disability services that  
36 is responsible for resource management services for the person must  
37 work with the hospital to develop an individualized discharge plan(~~7~~  
38 ~~including whether a petition should be filed for less restrictive~~  
39 ~~alternative treatment on the basis that the person is in need of~~



1 ~~assisted outpatient treatment,~~) and arrange for a transition to the  
2 community in accordance with the person's individualized discharge  
3 plan within 14 days of the determination.

4 **Sec. 5.** RCW 71.05.590 and 2022 c 210 s 23 are each amended to  
5 read as follows:

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

13 (a) The person is failing to adhere to the terms and conditions  
14 of the 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 or advise the person as to their rights and  
28 responsibilities under the court order, and to offer incentives to  
29 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 directed to the court with  
36 jurisdiction over the order and specify the circumstances that give  
37 rise to the request and what modification is being sought. The county  
38 prosecutor shall assist the entity requesting the hearing and issue  
39 an appropriate summons to the person. This subsection does not limit

1 the inherent authority of a treatment provider to alter conditions of  
2 treatment for clinical reasons, and is intended to be used only when  
3 court intervention is necessary or advisable to secure the person's  
4 compliance and prevent decompensation or deterioration;

5 (d) To detain the person for up to 12 hours for evaluation at an  
6 agency, facility providing services under the court order, triage  
7 facility, crisis stabilization unit, emergency department, evaluation  
8 and treatment facility, secure withdrawal management and  
9 stabilization facility with available space, or an approved substance  
10 use disorder treatment program with available space. The purpose of  
11 the evaluation is to determine whether modification, revocation, or  
12 commitment proceedings are necessary and appropriate to stabilize the  
13 person and prevent decompensation, deterioration, or physical harm.  
14 Temporary detention for evaluation under this subsection is intended  
15 to occur only following a pattern of noncompliance or the failure of  
16 reasonable attempts at outreach and engagement, and may occur only  
17 when, based on clinical judgment, temporary detention is appropriate.  
18 The agency, facility, or designated crisis responder may request  
19 assistance from a peace officer for the purposes of temporary  
20 detention under this subsection (2)(d). This subsection does not  
21 limit the ability or obligation of the agency, facility, or  
22 designated crisis responder to pursue revocation procedures under  
23 subsection (5) of this section in appropriate circumstances; and

24 (e) To initiate revocation procedures under subsection (5) of  
25 this section.

26 (3) A court may supervise a person on an order for less  
27 restrictive alternative treatment or a conditional release. While the  
28 person is under the order, the court may:

29 (a) Require appearance in court for periodic reviews; and

30 (b) Modify the order after considering input from the agency or  
31 facility designated to provide or facilitate services. The court may  
32 not remand the person into inpatient treatment except as provided  
33 under subsection (5) of this section, but may take actions under  
34 subsection (2)(a) through (d) of this section.

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

1 (5) (a) A designated crisis responder or the secretary of the  
2 department of social and health services may, upon their own motion  
3 or upon request of the facility or agency designated to provide  
4 outpatient care, cause a person to be detained in an evaluation and  
5 treatment facility, available secure withdrawal management and  
6 stabilization facility with adequate space, or available approved  
7 substance use disorder treatment program with adequate space in or  
8 near the county in which he or she is receiving outpatient treatment  
9 for the purpose of a hearing for revocation of a less restrictive  
10 alternative treatment order or conditional release order under this  
11 chapter. The designated crisis responder or secretary of the  
12 department of social and health services shall file a petition for  
13 revocation within 24 hours and serve the person, their guardian, if  
14 any, and their attorney. A hearing for revocation of a less  
15 restrictive alternative treatment order or conditional release order  
16 may be scheduled without detention of the person.

17 (b) A person detained under this subsection (5) must be held  
18 until such time, not exceeding five days, as a hearing can be  
19 scheduled to determine whether or not the order for less restrictive  
20 alternative treatment or conditional release should be revoked,  
21 modified, or retained. If the person is not detained, the hearing  
22 must be scheduled within five days of service on the person. The  
23 designated crisis responder or the secretary of the department of  
24 social and health services may withdraw its petition for revocation  
25 at any time before the court hearing.

26 (c) A person detained under this subsection (5) has the same  
27 rights with respect to notice, hearing, and counsel as in any  
28 involuntary treatment proceeding, except as specifically set forth in  
29 this section. There is no right to jury trial. The venue for  
30 proceedings is the county where the petition is filed. Notice of the  
31 filing must be provided to the court that originally ordered  
32 commitment, if different from the court where the petition for  
33 revocation is filed, within two judicial days of the person's  
34 detention.

35 (d) The issues for the court to determine are whether: (i) The  
36 person adhered to the terms and conditions of the order or  
37 conditional release; (ii) substantial deterioration in the person's  
38 functioning has occurred; (iii) there is evidence of substantial  
39 decompensation with a reasonable probability that the decompensation  
40 can be reversed by further inpatient treatment; or (iv) there is a

1 likelihood of serious harm; and, if any of the above conditions  
2 apply, whether it is appropriate for the court to reinstate or modify  
3 the person's less restrictive alternative treatment order or  
4 conditional release (~~order~~) or order the person's detention for  
5 inpatient treatment. The person may waive the court hearing and allow  
6 the court to enter a stipulated order upon the agreement of all  
7 parties. If the court orders detention for inpatient treatment, the  
8 treatment period must be for 14 days from the revocation hearing if  
9 the less restrictive alternative treatment order or conditional  
10 release (~~order~~) was based on a petition under RCW 71.05.148,  
11 71.05.160, or 71.05.230. The person must return to less restrictive  
12 alternative treatment under the order at the end of the 14-day period  
13 unless a petition for further treatment is filed under RCW 71.05.320  
14 or the person accepts voluntary treatment. If the court orders  
15 detention for inpatient treatment and the less restrictive  
16 alternative treatment order or conditional release (~~order~~) was  
17 based on a petition under RCW 71.05.290 or 71.05.320, the number of  
18 days remaining on the order must be converted to days of inpatient  
19 treatment. A court may not detain a person for inpatient treatment to  
20 a secure withdrawal management and stabilization facility or approved  
21 substance use disorder treatment program under this subsection unless  
22 there is a facility or program available with adequate space for the  
23 person.

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

30 **Sec. 6.** RCW 71.05.590 and 2022 c 210 s 24 are each amended to  
31 read as follows:

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

1 (a) The person is failing to adhere to the terms and conditions  
2 of the order;

3 (b) Substantial deterioration in the person's functioning has  
4 occurred;

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

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

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

15 (a) To counsel or advise the person as to their rights and  
16 responsibilities under the court order, and to offer incentives to  
17 motivate compliance;

18 (b) To increase the intensity of outpatient services provided to  
19 the person by increasing the frequency of contacts with the provider,  
20 referring the person for an assessment for assertive community  
21 services, or by other means;

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

32 (d) To detain the person for up to 12 hours for evaluation at an  
33 agency, facility providing services under the court order, triage  
34 facility, crisis stabilization unit, emergency department, evaluation  
35 and treatment facility, secure withdrawal management and  
36 stabilization facility, or an approved substance use disorder  
37 treatment program. The purpose of the evaluation is to determine  
38 whether modification, revocation, or commitment proceedings are  
39 necessary and appropriate to stabilize the person and prevent  
40 decompensation, deterioration, or physical harm. Temporary detention

1 for evaluation under this subsection is intended to occur only  
2 following a pattern of noncompliance or the failure of reasonable  
3 attempts at outreach and engagement, and may occur only when, based  
4 on clinical judgment, temporary detention is appropriate. The agency,  
5 facility, or designated crisis responder may request assistance from  
6 a peace officer for the purposes of temporary detention under this  
7 subsection (2)(d). This subsection does not limit the ability or  
8 obligation of the agency, facility, or designated crisis responder to  
9 pursue revocation procedures under subsection (5) of this section in  
10 appropriate circumstances; and

11 (e) To initiate revocation procedures under subsection (5) of  
12 this section.

13 (3) A court may supervise a person on an order for less  
14 restrictive alternative treatment or a conditional release. While the  
15 person is under the order, the court may:

16 (a) Require appearance in court for periodic reviews; and

17 (b) Modify the order after considering input from the agency or  
18 facility designated to provide or facilitate services. The court may  
19 not remand the person into inpatient treatment except as provided  
20 under subsection (5) of this section, but may take actions under  
21 subsection (2)(a) through (d) of this section.

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

28 (5)(a) A designated crisis responder or the secretary of the  
29 department of social and health services may, upon their own motion  
30 or upon request of the facility or agency designated to provide  
31 outpatient care, cause a person to be detained in an evaluation and  
32 treatment facility, secure withdrawal management and stabilization  
33 facility, or approved substance use disorder treatment program in or  
34 near the county in which he or she is receiving outpatient treatment  
35 for the purpose of a hearing for revocation of a less restrictive  
36 alternative treatment order or conditional release (~~order~~) under  
37 this chapter. The designated crisis responder or secretary of the  
38 department of social and health services shall file a petition for  
39 revocation within 24 hours and serve the person, their guardian, if  
40 any, and their attorney. A hearing for revocation of a less

1 restrictive alternative treatment order or conditional release  
2 (~~order~~) may be scheduled without detention of the person.

3 (b) A person detained under this subsection (5) must be held  
4 until such time, not exceeding five days, as a hearing can be  
5 scheduled to determine whether or not the order for less restrictive  
6 alternative treatment or conditional release should be revoked,  
7 modified, or retained. If the person is not detained, the hearing  
8 must be scheduled within five days of service on the person. The  
9 designated crisis responder or the secretary of the department of  
10 social and health services may withdraw its petition for revocation  
11 at any time before the court hearing.

12 (c) A person detained under this subsection (5) has the same  
13 rights with respect to notice, hearing, and counsel as in any  
14 involuntary treatment proceeding, except as specifically set forth in  
15 this section. There is no right to jury trial. The venue for  
16 proceedings is the county where the petition is filed. Notice of the  
17 filing must be provided to the court that originally ordered  
18 commitment, if different from the court where the petition for  
19 revocation is filed, within two judicial days of the person's  
20 detention.

21 (d) The issues for the court to determine are whether: (i) The  
22 person adhered to the terms and conditions of the order or  
23 conditional release; (ii) substantial deterioration in the person's  
24 functioning has occurred; (iii) there is evidence of substantial  
25 decompensation with a reasonable probability that the decompensation  
26 can be reversed by further inpatient treatment; or (iv) there is a  
27 likelihood of serious harm; and, if any of the above conditions  
28 apply, whether it is appropriate for the court to reinstate or modify  
29 the person's less restrictive alternative treatment order or  
30 conditional release (~~order~~) or order the person's detention for  
31 inpatient treatment. The person may waive the court hearing and allow  
32 the court to enter a stipulated order upon the agreement of all  
33 parties. If the court orders detention for inpatient treatment, the  
34 treatment period must be for 14 days from the revocation hearing if  
35 the less restrictive alternative treatment order or conditional  
36 release (~~order~~) was based on a petition under RCW 71.05.148,  
37 71.05.160, or 71.05.230. The person must return to less restrictive  
38 alternative treatment under the order at the end of the 14-day period  
39 unless a petition for further treatment is filed under RCW 71.05.320  
40 or the person accepts voluntary treatment. If the court orders

1 detention for inpatient treatment and the less restrictive  
2 alternative treatment order or conditional release (~~order~~) was  
3 based on a petition under RCW 71.05.290 or 71.05.320, the number of  
4 days remaining on the order must be converted to days of inpatient  
5 treatment.

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

12 **Sec. 7.** RCW 71.34.020 and 2021 c 264 s 26 are each amended to  
13 read as follows:

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

16 (1) "Admission" or "admit" means a decision by a physician,  
17 physician assistant, or psychiatric advanced registered nurse  
18 practitioner that a minor should be examined or treated as a patient  
19 in a hospital.

20 (2) "Adolescent" means a minor thirteen years of age or older.

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

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

31 (5) "Approved substance use disorder treatment program" means a  
32 program for minors with substance use disorders provided by a  
33 treatment program licensed or certified by the department of health  
34 as meeting standards adopted under chapter 71.24 RCW.

35 (6) "Attending staff" means any person on the staff of a public  
36 or private agency having responsibility for the care and treatment of  
37 a minor patient.

38 (7) "Authority" means the Washington state health care authority.



1 (8) "Behavioral health administrative services organization" has  
2 the same meaning as provided in RCW 71.24.025.

3 (9) "Behavioral health disorder" means either a mental disorder  
4 as defined in this section, a substance use disorder as defined in  
5 this section, or a co-occurring mental disorder and substance use  
6 disorder.

7 (10) "Child psychiatrist" means a person having a license as a  
8 physician and surgeon in this state, who has had graduate training in  
9 child psychiatry in a program approved by the American Medical  
10 Association or the American Osteopathic Association, and who is board  
11 eligible or board certified in child psychiatry.

12 (11) "Children's mental health specialist" means:

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

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

20 (12) "Commitment" means a determination by a judge or court  
21 commissioner, made after a commitment hearing, that the minor is in  
22 need of inpatient diagnosis, evaluation, or treatment or that the  
23 minor is in need of less restrictive alternative treatment.

24 (13) "Conditional release" means a revocable modification of a  
25 commitment, which may be revoked upon violation of any of its terms.

26 (14) "Co-occurring disorder specialist" means an individual  
27 possessing an enhancement granted by the department of health under  
28 chapter 18.205 RCW that certifies the individual to provide substance  
29 use disorder counseling subject to the practice limitations under RCW  
30 18.205.105.

31 (15) "Crisis stabilization unit" means a short-term facility or a  
32 portion of a facility licensed or certified by the department of  
33 health under RCW 71.24.035, such as a residential treatment facility  
34 or a hospital, which has been designed to assess, diagnose, and treat  
35 individuals experiencing an acute crisis without the use of long-term  
36 hospitalization.

37 (16) "Custody" means involuntary detention under the provisions  
38 of this chapter or chapter 10.77 RCW, uninterrupted by any period of  
39 unconditional release from commitment from a facility providing  
40 involuntary care and treatment.

1 (17) "Department" means the department of social and health  
2 services.

3 (18) "Designated crisis responder" has the same meaning as  
4 provided in RCW 71.05.020.

5 (19) "Detention" or "detain" means the lawful confinement of a  
6 person, under the provisions of this chapter.

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

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

17 (22) "Director" means the director of the authority.

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

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

32 (25) "Evaluation and treatment program" means the total system of  
33 services and facilities coordinated and approved by a county or  
34 combination of counties for the evaluation and treatment of minors  
35 under this chapter.

36 (26) "Gravely disabled minor" means a minor who, as a result of a  
37 behavioral health disorder, (a) is in danger of serious physical harm  
38 resulting from a failure to provide for his or her essential human  
39 needs of health or safety, or (b) manifests severe deterioration in  
40 routine functioning evidenced by repeated and escalating loss of

1 cognitive or volitional control over his or her actions and is not  
2 receiving such care as is essential for his or her health or safety.

3 (27) "Habilitative services" means those services provided by  
4 program personnel to assist minors in acquiring and maintaining life  
5 skills and in raising their levels of physical, behavioral, social,  
6 and vocational functioning. Habilitative services include education,  
7 training for employment, and therapy.

8 (28) "Hearing" means any proceeding conducted in open court that  
9 conforms to the requirements of RCW 71.34.910.

10 (29) "History of one or more violent acts" refers to the period  
11 of time five years prior to the filing of a petition under this  
12 chapter, excluding any time spent, but not any violent acts  
13 committed, in a mental health facility, a long-term substance use  
14 disorder treatment facility, or in confinement as a result of a  
15 criminal conviction.

16 (30) "Individualized service plan" means a plan prepared by a  
17 developmental disabilities professional with other professionals as a  
18 team, for a person with developmental disabilities, which states:

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

21 (b) The conditions and strategies necessary to achieve the  
22 purposes of habilitation;

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

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

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

28 (f) Where relevant in light of past criminal behavior and due  
29 consideration for public safety, the criteria for proposed movement  
30 to less-restrictive settings, criteria for proposed eventual  
31 discharge or release, and a projected possible date for discharge or  
32 release; and

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

35 (31)(a) "Inpatient treatment" means twenty-four-hour-per-day  
36 mental health care provided within a general hospital, psychiatric  
37 hospital, residential treatment facility licensed or certified by the  
38 department of health as an evaluation and treatment facility for  
39 minors, secure withdrawal management and stabilization facility for

1 minors, or approved substance use disorder treatment program for  
2 minors.

3 (b) For purposes of family-initiated treatment under RCW  
4 71.34.600 through 71.34.670, "inpatient treatment" has the meaning  
5 included in (a) of this subsection and any other residential  
6 treatment facility licensed under chapter 71.12 RCW.

7 (32) "Intoxicated minor" means a minor whose mental or physical  
8 functioning is substantially impaired as a result of the use of  
9 alcohol or other psychoactive chemicals.

10 (33) "Judicial commitment" means a commitment by a court pursuant  
11 to the provisions of this chapter.

12 (34) "Kinship caregiver" has the same meaning as in RCW  
13 74.13.031(19) (a).

14 (35) "Legal counsel" means attorneys and staff employed by county  
15 prosecutor offices or the state attorney general acting in their  
16 capacity as legal representatives of public behavioral health service  
17 providers under RCW 71.05.130.

18 (36) "Less restrictive alternative" or "less restrictive setting"  
19 means outpatient treatment provided to a minor as a program of  
20 individualized treatment in a less restrictive setting than inpatient  
21 treatment (~~that~~). This term includes the services described in RCW  
22 71.34.755, including residential treatment, and treatment pursuant to  
23 an assisted outpatient treatment order under RCW 71.34.815.

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

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

28 (a) A substantial risk that: (i) Physical harm will be inflicted  
29 by a minor 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 minor upon another individual,  
32 as 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 minor upon the property  
35 of others, as evidenced by behavior which has caused substantial loss  
36 or damage to the property of others; or

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

39 (39) "Managed care organization" has the same meaning as provided  
40 in RCW 71.24.025.

1 (40) "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 (41) "Medical necessity" for inpatient care means a requested  
5 service which is reasonably calculated to: (a) Diagnose, correct,  
6 cure, or alleviate a mental disorder or substance use disorder; or  
7 (b) prevent the progression of a mental disorder or substance use  
8 disorder that endangers life or causes suffering and pain, or results  
9 in illness or infirmity or threatens to cause or aggravate a  
10 disability, or causes physical deformity or malfunction, and there is  
11 no adequate less restrictive alternative available.

12 (42) "Mental disorder" means any organic, mental, or emotional  
13 impairment that has substantial adverse effects on an individual's  
14 cognitive or volitional functions. The presence of alcohol abuse,  
15 drug abuse, juvenile criminal history, antisocial behavior, or  
16 intellectual disabilities alone is insufficient to justify a finding  
17 of "mental disorder" within the meaning of this section.

18 (43) "Mental health professional" means a psychiatrist,  
19 psychiatric advanced registered nurse practitioner, physician  
20 assistant working with a supervising psychiatrist, psychologist,  
21 psychiatric nurse, social worker, and such other mental health  
22 professionals as defined by rules adopted by the secretary of the  
23 department of health under this chapter.

24 (44) "Minor" means any person under the age of eighteen years.

25 (45) "Outpatient treatment" means any of the nonresidential  
26 services mandated under chapter 71.24 RCW and provided by licensed or  
27 certified behavioral health agencies as identified by RCW 71.24.025.

28 (46)(a) "Parent" has the same meaning as defined in RCW  
29 26.26A.010, including either parent if custody is shared under a  
30 joint custody agreement, or a person or agency judicially appointed  
31 as legal guardian or custodian of the child.

32 (b) For purposes of family-initiated treatment under RCW  
33 71.34.600 through 71.34.670, "parent" also includes a person to whom  
34 a parent defined in (a) of this subsection has given a signed  
35 authorization to make health care decisions for the adolescent, a  
36 stepparent who is involved in caring for the adolescent, a kinship  
37 caregiver who is involved in caring for the adolescent, or another  
38 relative who is responsible for the health care of the adolescent,  
39 who may be required to provide a declaration under penalty of perjury  
40 stating that he or she is a relative responsible for the health care

1 of the adolescent pursuant to chapter 5.50 RCW. If a dispute arises  
2 between individuals authorized to act as a parent for the purpose of  
3 RCW 71.34.600 through 71.34.670, the disagreement must be resolved  
4 according to the priority established under RCW 7.70.065(2) (a).

5 (47) "Peace officer" means a law enforcement official of a public  
6 agency or governmental unit, and includes persons specifically given  
7 peace officer powers by any state law, local ordinance, or judicial  
8 order of appointment.

9 (48) "Physician assistant" means a person licensed as a physician  
10 assistant under chapter 18.71A RCW.

11 (49) "Private agency" means any person, partnership, corporation,  
12 or association that is not a public agency, whether or not financed  
13 in whole or in part by public funds, that constitutes an evaluation  
14 and treatment facility or private institution, or hospital, or  
15 approved substance use disorder treatment program, that is conducted  
16 for, or includes a distinct unit, floor, or ward conducted for, the  
17 care and treatment of persons with mental illness, substance use  
18 disorders, or both mental illness and substance use disorders.

19 (50) "Professional person in charge" or "professional person"  
20 means a physician, other mental health professional, or other person  
21 empowered by an evaluation and treatment facility, secure withdrawal  
22 management and stabilization facility, or approved substance use  
23 disorder treatment program with authority to make admission and  
24 discharge decisions on behalf of that facility.

25 (51) "Psychiatric nurse" means a registered nurse who has  
26 experience in the direct treatment of persons who have a mental  
27 illness or who are emotionally disturbed, such experience gained  
28 under the supervision of a mental health professional.

29 (52) "Psychiatrist" means a person having a license as a  
30 physician in this state who has completed residency training in  
31 psychiatry in a program approved by the American Medical Association  
32 or the American Osteopathic Association, and is board eligible or  
33 board certified in psychiatry.

34 (53) "Psychologist" means a person licensed as a psychologist  
35 under chapter 18.83 RCW.

36 (54) "Public agency" means any evaluation and treatment facility  
37 or institution, or hospital, or approved substance use disorder  
38 treatment program that is conducted for, or includes a distinct unit,  
39 floor, or ward conducted for, the care and treatment of persons with  
40 mental illness, substance use disorders, or both mental illness and

1 substance use disorders if the agency is operated directly by  
2 federal, state, county, or municipal government, or a combination of  
3 such governments.

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

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

8 (57) "Responsible other" means the minor, the minor's parent or  
9 estate, or any other person legally responsible for support of the  
10 minor.

11 (58) "Secretary" means the secretary of the department or  
12 secretary's designee.

13 (59) "Secure withdrawal management and stabilization facility"  
14 means a facility operated by either a public or private agency or by  
15 the program of an agency which provides care to voluntary individuals  
16 and individuals involuntarily detained and committed under this  
17 chapter for whom there is a likelihood of serious harm or who are  
18 gravely disabled due to the presence of a substance use disorder.  
19 Secure withdrawal management and stabilization facilities must:

20 (a) Provide the following services:

21 (i) Assessment and treatment, provided by certified substance use  
22 disorder professionals or co-occurring disorder specialists;

23 (ii) Clinical stabilization services;

24 (iii) Acute or subacute detoxification services for intoxicated  
25 individuals; and

26 (iv) Discharge assistance provided by certified substance use  
27 disorder professionals or co-occurring disorder specialists,  
28 including facilitating transitions to appropriate voluntary or  
29 involuntary inpatient services or to less restrictive alternatives as  
30 appropriate for the individual;

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

33 (c) Be licensed or certified as such by the department of health.

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

37 (61) "Start of initial detention" means the time of arrival of  
38 the minor at the first evaluation and treatment facility, secure  
39 withdrawal management and stabilization facility, or approved  
40 substance use disorder treatment program offering inpatient treatment

1 if the minor is being involuntarily detained at the time. With regard  
2 to voluntary patients, "start of initial detention" means the time at  
3 which the minor gives notice of intent to leave under the provisions  
4 of this chapter.

5 (62) "Store and forward technology" means use of an asynchronous  
6 transmission of a person's medical information from a mental health  
7 service provider to the designated crisis responder which results in  
8 medical diagnosis, consultation, or treatment.

9 (63) "Substance use disorder" means a cluster of cognitive,  
10 behavioral, and physiological symptoms indicating that an individual  
11 continues using the substance despite significant substance-related  
12 problems. The diagnosis of a substance use disorder is based on a  
13 pathological pattern of behaviors related to the use of the  
14 substances.

15 (64) "Substance use disorder professional" means a person  
16 certified as a substance use disorder professional by the department  
17 of health under chapter 18.205 RCW.

18 (65) "Therapeutic court personnel" means the staff of a mental  
19 health court or other therapeutic court which has jurisdiction over  
20 defendants who are dually diagnosed with mental disorders, including  
21 court personnel, probation officers, a court monitor, prosecuting  
22 attorney, or defense counsel acting within the scope of therapeutic  
23 court duties.

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

37 (67) "Triage facility" means a short-term facility or a portion  
38 of a facility licensed or certified by the department of health under  
39 RCW 71.24.035, which is designed as a facility to assess and  
40 stabilize an individual or determine the need for involuntary



1 commitment of an individual, and must meet department of health  
2 residential treatment facility standards. A triage facility may be  
3 structured as a voluntary or involuntary placement facility.

4 (68) "Video" means the delivery of behavioral health services  
5 through the use of interactive audio and video technology, permitting  
6 real-time communication between a person and a designated crisis  
7 responder, for the purpose of evaluation. "Video" does not include  
8 the use of audio-only telephone, facsimile, email, or store and  
9 forward technology.

10 (69) "Violent act" means behavior that resulted in homicide,  
11 attempted suicide, injury, or substantial loss or damage to property.

12 (70) "In need of assisted outpatient treatment" refers to a minor  
13 who meets the criteria for assisted outpatient treatment established  
14 under RCW 71.34.815.

15 **Sec. 8.** RCW 71.34.020 and 2021 c 264 s 28 are each amended to  
16 read as follows:

17 Unless the context clearly requires otherwise, the definitions in  
18 this section apply throughout this chapter.

19 (1) "Admission" or "admit" means a decision by a physician,  
20 physician assistant, or psychiatric advanced registered nurse  
21 practitioner that a minor should be examined or treated as a patient  
22 in a hospital.

23 (2) "Adolescent" means a minor thirteen years of age or older.

24 (3) "Alcoholism" means a disease, characterized by a dependency  
25 on alcoholic beverages, loss of control over the amount and  
26 circumstances of use, symptoms of tolerance, physiological or  
27 psychological withdrawal, or both, if use is reduced or discontinued,  
28 and impairment of health or disruption of social or economic  
29 functioning.

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

34 (5) "Approved substance use disorder treatment program" means a  
35 program for minors with substance use disorders provided by a  
36 treatment program licensed or certified by the department of health  
37 as meeting standards adopted under chapter 71.24 RCW.

1 (6) "Attending staff" means any person on the staff of a public  
2 or private agency having responsibility for the care and treatment of  
3 a minor patient.

4 (7) "Authority" means the Washington state health care authority.

5 (8) "Behavioral health administrative services organization" has  
6 the same meaning as provided in RCW 71.24.025.

7 (9) "Behavioral health disorder" means either a mental disorder  
8 as defined in this section, a substance use disorder as defined in  
9 this section, or a co-occurring mental disorder and substance use  
10 disorder.

11 (10) "Child psychiatrist" means a person having a license as a  
12 physician and surgeon in this state, who has had graduate training in  
13 child psychiatry in a program approved by the American Medical  
14 Association or the American Osteopathic Association, and who is board  
15 eligible or board certified in child psychiatry.

16 (11) "Children's mental health specialist" means:

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

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

24 (12) "Commitment" means a determination by a judge or court  
25 commissioner, made after a commitment hearing, that the minor is in  
26 need of inpatient diagnosis, evaluation, or treatment or that the  
27 minor is in need of less restrictive alternative treatment.

28 (13) "Conditional release" means a revocable modification of a  
29 commitment, which may be revoked upon violation of any of its terms.

30 (14) "Co-occurring disorder specialist" means an individual  
31 possessing an enhancement granted by the department of health under  
32 chapter 18.205 RCW that certifies the individual to provide substance  
33 use disorder counseling subject to the practice limitations under RCW  
34 18.205.105.

35 (15) "Crisis stabilization unit" means a short-term facility or a  
36 portion of a facility licensed or certified by the department of  
37 health under RCW 71.24.035, such as a residential treatment facility  
38 or a hospital, which has been designed to assess, diagnose, and treat  
39 individuals experiencing an acute crisis without the use of long-term  
40 hospitalization.

1 (16) "Custody" means involuntary detention under the provisions  
2 of this chapter or chapter 10.77 RCW, uninterrupted by any period of  
3 unconditional release from commitment from a facility providing  
4 involuntary care and treatment.

5 (17) "Department" means the department of social and health  
6 services.

7 (18) "Designated crisis responder" has the same meaning as  
8 provided in RCW 71.05.020.

9 (19) "Detention" or "detain" means the lawful confinement of a  
10 person, under the provisions of this chapter.

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

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

21 (22) "Director" means the director of the authority.

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

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

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

1 (26) "Gravely disabled minor" means a minor who, as a result of a  
2 behavioral health disorder, (a) is in danger of serious physical harm  
3 resulting from a failure to provide for his or her essential human  
4 needs of health or safety, or (b) manifests severe deterioration from  
5 safe behavior evidenced by repeated and escalating loss of cognitive  
6 or volitional control over his or her actions and is not receiving  
7 such care as is essential for his or her health or safety.

8 (27) "Habilitative services" means those services provided by  
9 program personnel to assist minors in acquiring and maintaining life  
10 skills and in raising their levels of physical, behavioral, social,  
11 and vocational functioning. Habilitative services include education,  
12 training for employment, and therapy.

13 (28) "Hearing" means any proceeding conducted in open court that  
14 conforms to the requirements of RCW 71.34.910.

15 (29) "History of one or more violent acts" refers to the period  
16 of time five years prior to the filing of a petition under this  
17 chapter, excluding any time spent, but not any violent acts  
18 committed, in a mental health facility, a long-term substance use  
19 disorder treatment facility, or in confinement as a result of a  
20 criminal conviction.

21 (30) "Individualized service plan" means a plan prepared by a  
22 developmental disabilities professional with other professionals as a  
23 team, for a person with developmental disabilities, which states:

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

26 (b) The conditions and strategies necessary to achieve the  
27 purposes of habilitation;

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

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

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

33 (f) Where relevant in light of past criminal behavior and due  
34 consideration for public safety, the criteria for proposed movement  
35 to less-restrictive settings, criteria for proposed eventual  
36 discharge or release, and a projected possible date for discharge or  
37 release; and

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

1 (31) (a) "Inpatient treatment" means twenty-four-hour-per-day  
2 mental health care provided within a general hospital, psychiatric  
3 hospital, residential treatment facility licensed or certified by the  
4 department of health as an evaluation and treatment facility for  
5 minors, secure withdrawal management and stabilization facility for  
6 minors, or approved substance use disorder treatment program for  
7 minors.

8 (b) For purposes of family-initiated treatment under RCW  
9 71.34.600 through 71.34.670, "inpatient treatment" has the meaning  
10 included in (a) of this subsection and any other residential  
11 treatment facility licensed under chapter 71.12 RCW.

12 (32) "Intoxicated minor" means a minor whose mental or physical  
13 functioning is substantially impaired as a result of the use of  
14 alcohol or other psychoactive chemicals.

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

17 (34) "Kinship caregiver" has the same meaning as in RCW  
18 74.13.031(19) (a).

19 (35) "Legal counsel" means attorneys and staff employed by county  
20 prosecutor offices or the state attorney general acting in their  
21 capacity as legal representatives of public behavioral health service  
22 providers under RCW 71.05.130.

23 (36) "Less restrictive alternative" or "less restrictive setting"  
24 means outpatient treatment provided to a minor as a program of  
25 individualized treatment in a less restrictive setting than inpatient  
26 treatment (~~that~~). This term includes the services described in RCW  
27 71.34.755, including residential treatment, and treatment pursuant to  
28 an assisted outpatient treatment order under RCW 71.34.815.

29 (37) "Licensed physician" means a person licensed to practice  
30 medicine or osteopathic medicine and surgery in the state of  
31 Washington.

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

33 (a) A substantial risk that: (i) Physical harm will be inflicted  
34 by a minor upon his or her own person, as evidenced by threats or  
35 attempts to commit suicide or inflict physical harm on oneself; (ii)  
36 physical harm will be inflicted by a minor upon another individual,  
37 as evidenced by behavior which has caused harm, substantial pain, or  
38 which places another person or persons in reasonable fear of harm to  
39 themselves or others; or (iii) physical harm will be inflicted by a

1 minor upon the property of others, as evidenced by behavior which has  
2 caused substantial loss or damage to the property of others; or

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

5 (39) "Managed care organization" has the same meaning as provided  
6 in RCW 71.24.025.

7 (40) "Medical clearance" means a physician or other health care  
8 provider has determined that a person is medically stable and ready  
9 for referral to the designated crisis responder.

10 (41) "Medical necessity" for inpatient care means a requested  
11 service which is reasonably calculated to: (a) Diagnose, correct,  
12 cure, or alleviate a mental disorder or substance use disorder; or  
13 (b) prevent the progression of a mental disorder or substance use  
14 disorder that endangers life or causes suffering and pain, or results  
15 in illness or infirmity or threatens to cause or aggravate a  
16 disability, or causes physical deformity or malfunction, and there is  
17 no adequate less restrictive alternative available.

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

24 (43) "Mental health professional" means a psychiatrist,  
25 psychiatric advanced registered nurse practitioner, physician  
26 assistant working with a supervising psychiatrist, psychologist,  
27 psychiatric nurse, social worker, and such other mental health  
28 professionals as defined by rules adopted by the secretary of the  
29 department of health under this chapter.

30 (44) "Minor" means any person under the age of eighteen years.

31 (45) "Outpatient treatment" means any of the nonresidential  
32 services mandated under chapter 71.24 RCW and provided by licensed or  
33 certified behavioral health agencies as identified by RCW 71.24.025.

34 (46)(a) "Parent" has the same meaning as defined in RCW  
35 26.26A.010, including either parent if custody is shared under a  
36 joint custody agreement, or a person or agency judicially appointed  
37 as legal guardian or custodian of the child.

38 (b) For purposes of family-initiated treatment under RCW  
39 71.34.600 through 71.34.670, "parent" also includes a person to whom  
40 a parent defined in (a) of this subsection has given a signed

1 authorization to make health care decisions for the adolescent, a  
2 stepparent who is involved in caring for the adolescent, a kinship  
3 caregiver who is involved in caring for the adolescent, or another  
4 relative who is responsible for the health care of the adolescent,  
5 who may be required to provide a declaration under penalty of perjury  
6 stating that he or she is a relative responsible for the health care  
7 of the adolescent pursuant to chapter 5.50 RCW. If a dispute arises  
8 between individuals authorized to act as a parent for the purpose of  
9 RCW 71.34.600 through 71.34.670, the disagreement must be resolved  
10 according to the priority established under RCW 7.70.065(2) (a).

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

15 (48) "Physician assistant" means a person licensed as a physician  
16 assistant under chapter 18.71A RCW.

17 (49) "Private agency" means any person, partnership, corporation,  
18 or association that is not a public agency, whether or not financed  
19 in whole or in part by public funds, that constitutes an evaluation  
20 and treatment facility or private institution, or hospital, or  
21 approved substance use disorder treatment program, that is conducted  
22 for, or includes a distinct unit, floor, or ward conducted for, the  
23 care and treatment of persons with mental illness, substance use  
24 disorders, or both mental illness and substance use disorders.

25 (50) "Professional person in charge" or "professional person"  
26 means a physician, other mental health professional, or other person  
27 empowered by an evaluation and treatment facility, secure withdrawal  
28 management and stabilization facility, or approved substance use  
29 disorder treatment program with authority to make admission and  
30 discharge decisions on behalf of that facility.

31 (51) "Psychiatric nurse" means a registered nurse who has  
32 experience in the direct treatment of persons who have a mental  
33 illness or who are emotionally disturbed, such experience gained  
34 under the supervision of a mental health professional.

35 (52) "Psychiatrist" means a person having a license as a  
36 physician in this state who has completed residency training in  
37 psychiatry in a program approved by the American Medical Association  
38 or the American Osteopathic Association, and is board eligible or  
39 board certified in psychiatry.

1 (53) "Psychologist" means a person licensed as a psychologist  
2 under chapter 18.83 RCW.

3 (54) "Public agency" means any evaluation and treatment facility  
4 or institution, or hospital, or approved substance use disorder  
5 treatment program that is conducted for, or includes a distinct unit,  
6 floor, or ward conducted for, the care and treatment of persons with  
7 mental illness, substance use disorders, or both mental illness and  
8 substance use disorders if the agency is operated directly by  
9 federal, state, county, or municipal government, or a combination of  
10 such governments.

11 (55) "Release" means legal termination of the commitment under  
12 the provisions of this chapter.

13 (56) "Resource management services" has the meaning given in  
14 chapter 71.24 RCW.

15 (57) "Responsible other" means the minor, the minor's parent or  
16 estate, or any other person legally responsible for support of the  
17 minor.

18 (58) "Secretary" means the secretary of the department or  
19 secretary's designee.

20 (59) "Secure withdrawal management and stabilization facility"  
21 means a facility operated by either a public or private agency or by  
22 the program of an agency which provides care to voluntary individuals  
23 and individuals involuntarily detained and committed under this  
24 chapter for whom there is a likelihood of serious harm or who are  
25 gravely disabled due to the presence of a substance use disorder.  
26 Secure withdrawal management and stabilization facilities must:

27 (a) Provide the following services:

28 (i) Assessment and treatment, provided by certified substance use  
29 disorder professionals or co-occurring disorder specialists;

30 (ii) Clinical stabilization services;

31 (iii) Acute or subacute detoxification services for intoxicated  
32 individuals; and

33 (iv) Discharge assistance provided by certified substance use  
34 disorder professionals or co-occurring disorder specialists,  
35 including facilitating transitions to appropriate voluntary or  
36 involuntary inpatient services or to less restrictive alternatives as  
37 appropriate for the individual;

38 (b) Include security measures sufficient to protect the patients,  
39 staff, and community; and

40 (c) Be licensed or certified as such by the department of health.



1 (60) "Severe deterioration from safe behavior" means that a  
2 person will, if not treated, suffer or continue to suffer severe and  
3 abnormal mental, emotional, or physical distress, and this distress  
4 is associated with significant impairment of judgment, reason, or  
5 behavior.

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

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

17 (63) "Store and forward technology" means use of an asynchronous  
18 transmission of a person's medical information from a mental health  
19 service provider to the designated crisis responder which results in  
20 medical diagnosis, consultation, or treatment.

21 (64) "Substance use disorder" means a cluster of cognitive,  
22 behavioral, and physiological symptoms indicating that an individual  
23 continues using the substance despite significant substance-related  
24 problems. The diagnosis of a substance use disorder is based on a  
25 pathological pattern of behaviors related to the use of the  
26 substances.

27 (65) "Substance use disorder professional" means a person  
28 certified as a substance use disorder professional by the department  
29 of health under chapter 18.205 RCW.

30 (66) "Therapeutic court personnel" means the staff of a mental  
31 health court or other therapeutic court which has jurisdiction over  
32 defendants who are dually diagnosed with mental disorders, including  
33 court personnel, probation officers, a court monitor, prosecuting  
34 attorney, or defense counsel acting within the scope of therapeutic  
35 court duties.

36 (67) "Treatment records" include registration and all other  
37 records concerning persons who are receiving or who at any time have  
38 received services for mental illness, which are maintained by the  
39 department, the department of health, the authority, behavioral  
40 health organizations and their staffs, and by treatment facilities.

1 Treatment records include mental health information contained in a  
2 medical bill including but not limited to mental health drugs, a  
3 mental health diagnosis, provider name, and dates of service stemming  
4 from a medical service. Treatment records do not include notes or  
5 records maintained for personal use by a person providing treatment  
6 services for the department, the department of health, the authority,  
7 behavioral health organizations, or a treatment facility if the notes  
8 or records are not available to others.

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

16 (69) "Video" means the delivery of behavioral health services  
17 through the use of interactive audio and video technology, permitting  
18 real-time communication between a person and a designated crisis  
19 responder, for the purpose of evaluation. "Video" does not include  
20 the use of audio-only telephone, facsimile, email, or store and  
21 forward technology.

22 (70) "Violent act" means behavior that resulted in homicide,  
23 attempted suicide, injury, or substantial loss or damage to property.

24 (71) "In need of assisted outpatient treatment" refers to a minor  
25 who meets the criteria for assisted outpatient treatment established  
26 under RCW 71.34.815.

27 **Sec. 9.** RCW 71.34.740 and 2020 c 302 s 92 are each amended to  
28 read as follows:

29 (1) A (~~commitment~~) hearing shall be held within (~~one hundred~~  
30 ~~twenty~~) 120 hours of the minor's admission, excluding Saturday,  
31 Sunday, and holidays, or if the hearing is held on a petition filed  
32 under RCW 71.34.815, the hearing shall be held at a time scheduled  
33 under that section, unless a continuance is ordered under RCW  
34 71.34.735.

35 (2) The (~~commitment~~) hearing shall be conducted at the superior  
36 court or an appropriate place at the facility in which the minor is  
37 being detained.

38 (3) At the (~~commitment~~) hearing, the evidence in support of the  
39 petition shall be presented by the county prosecutor.

1 (4) The minor shall be present at the (~~commitment~~) hearing  
2 unless the minor, with the assistance of the minor's attorney, waives  
3 the right to be present at the hearing.

4 (5) If the parents are opposed to the petition, they may be  
5 represented at the hearing and shall be entitled to court-appointed  
6 counsel if they are indigent.

7 (6) At the (~~commitment~~) hearing, the minor shall have the  
8 following rights:

9 (a) To be represented by an attorney;

10 (b) To present evidence on his or her own behalf;

11 (c) To question persons testifying in support of the petition.

12 (7) If the (~~hearing~~) petition is (~~for commitment~~) for mental  
13 health treatment, the court at the time of the (~~commitment~~) hearing  
14 and before an order (~~of commitment~~) making findings is entered  
15 shall inform the minor both orally and in writing that the failure to  
16 make a good faith effort to seek voluntary treatment as provided in  
17 RCW 71.34.730 will result in the loss of his or her firearm rights if  
18 the minor is subsequently (~~detained for~~) ordered to receive  
19 involuntary treatment under this section.

20 (8) If the minor has received medication within (~~twenty-four~~)  
21 24 hours of the hearing, the court shall be informed of that fact and  
22 of the probable effects of the medication.

23 (9) For a (~~fourteen-day~~) 14-day commitment, the court must find  
24 by a preponderance of the evidence that:

25 (a) The minor has a behavioral health disorder and presents a  
26 likelihood of serious harm or is gravely disabled;

27 (b) The minor is in need of evaluation and treatment of the type  
28 provided by the inpatient evaluation and treatment facility, secure  
29 withdrawal management and stabilization facility, or approved  
30 substance use disorder treatment program to which continued inpatient  
31 care is sought or is in need of less restrictive alternative  
32 treatment found to be in the best interests of the minor or others;

33 (c) The minor is unwilling or unable in good faith to consent to  
34 voluntary treatment; and

35 (d) If commitment is for a substance use disorder, there is an  
36 available secure withdrawal management and stabilization facility or  
37 approved substance use disorder treatment program with adequate space  
38 for the minor.

39 (10) (a) If the court finds that the minor meets the criteria for  
40 a (~~fourteen-day~~) 14-day commitment, the court shall either

1 authorize commitment of the minor for inpatient treatment or for less  
2 restrictive alternative treatment upon such conditions as are  
3 necessary. If the court determines that the minor does not meet the  
4 criteria for a (~~fourteen-day~~) 14-day commitment, the minor shall be  
5 released.

6 (b) If the court finds by clear, cogent, and convincing evidence  
7 that the minor is in need of assisted outpatient treatment pursuant  
8 to a petition filed under RCW 71.34.815, the court shall order an  
9 appropriate less restrictive course of treatment for up to 18 months.

10 (11)(a) Nothing in this section prohibits the professional person  
11 in charge of the facility from releasing the minor at any time, when,  
12 in the opinion of the professional person in charge of the facility,  
13 further inpatient treatment is no longer necessary. The release may  
14 be subject to reasonable conditions if appropriate.

15 (b) Whenever a minor is released under this section, the  
16 professional person in charge shall within three days, notify the  
17 court in writing of the release.

18 (12) A minor who has been committed for fourteen days shall be  
19 released at the end of that period unless a petition for (~~one~~  
20 ~~hundred eighty-day~~) 180-day commitment is pending before the court.

21 **Sec. 10.** RCW 71.34.740 and 2020 c 302 s 93 are each amended to  
22 read as follows:

23 (1) A (~~commitment~~) hearing shall be held within (~~one hundred~~  
24 ~~twenty~~) 120 hours of the minor's admission, excluding Saturday,  
25 Sunday, and holidays, or if the hearing is held on a petition filed  
26 under RCW 71.34.815, the hearing shall be held at a time scheduled  
27 under that section, unless a continuance is ordered under RCW  
28 71.34.735.

29 (2) The (~~commitment~~) hearing shall be conducted at the superior  
30 court or an appropriate place at the facility in which the minor is  
31 being detained.

32 (3) At the (~~commitment~~) hearing, the evidence in support of the  
33 petition shall be presented by the county prosecutor.

34 (4) The minor shall be present at the (~~commitment~~) hearing  
35 unless the minor, with the assistance of the minor's attorney, waives  
36 the right to be present at the hearing.

37 (5) If the parents are opposed to the petition, they may be  
38 represented at the hearing and shall be entitled to court-appointed  
39 counsel if they are indigent.

1 (6) At the (~~commitment~~) hearing, the minor shall have the  
2 following rights:

3 (a) To be represented by an attorney;

4 (b) To present evidence on his or her own behalf;

5 (c) To question persons testifying in support of the petition.

6 (7) If the (~~hearing~~) petition is for (~~commitment for~~) mental  
7 health treatment, the court at the time of the (~~commitment~~) hearing  
8 and before an order (~~of commitment~~) making findings is entered  
9 shall inform the minor both orally and in writing that the failure to  
10 make a good faith effort to seek voluntary treatment as provided in  
11 RCW 71.34.730 will result in the loss of his or her firearm rights if  
12 the minor is subsequently (~~detained for~~) ordered to receive  
13 involuntary treatment under this section.

14 (8) If the minor has received medication within (~~twenty-four~~)  
15 24 hours of the hearing, the court shall be informed of that fact and  
16 of the probable effects of the medication.

17 (9) For a (~~fourteen-day~~) 14-day commitment, the court must find  
18 by a preponderance of the evidence that:

19 (a) The minor has a behavioral health disorder and presents a  
20 likelihood of serious harm or is gravely disabled;

21 (b) The minor is in need of evaluation and treatment of the type  
22 provided by the inpatient evaluation and treatment facility, secure  
23 withdrawal management and stabilization facility, or approved  
24 substance use disorder treatment program to which continued inpatient  
25 care is sought or is in need of less restrictive alternative  
26 treatment found to be in the best interests of the minor or others;  
27 and

28 (c) The minor is unwilling or unable in good faith to consent to  
29 voluntary treatment.

30 (10) (a) If the court finds that the minor meets the criteria for  
31 a (~~fourteen-day~~) 14-day commitment, the court shall either  
32 authorize commitment of the minor for inpatient treatment or for less  
33 restrictive alternative treatment upon such conditions as are  
34 necessary. If the court determines that the minor does not meet the  
35 criteria for a (~~fourteen-day~~) 14-day commitment, the minor shall be  
36 released.

37 (b) If the court finds by clear, cogent, and convincing evidence  
38 that the minor is in need of assisted outpatient treatment pursuant  
39 to a petition filed under RCW 71.34.815, the court shall order an  
40 appropriate less restrictive course of treatment for up to 18 months.

1 (11)(a) Nothing in this section prohibits the professional person  
2 in charge of the facility from releasing the minor at any time, when,  
3 in the opinion of the professional person in charge of the facility,  
4 further inpatient treatment is no longer necessary. The release may  
5 be subject to reasonable conditions if appropriate.

6 (b) Whenever a minor is released under this section, the  
7 professional person in charge shall within three days, notify the  
8 court in writing of the release.

9 (12) A minor who has been committed for fourteen days shall be  
10 released at the end of that period unless a petition for ((~~one~~  
11 ~~hundred eighty-day~~) 180-day commitment is pending before the court.

12 **Sec. 11.** RCW 71.34.780 and 2020 c 302 s 97 are each amended to  
13 read as follows:

14 (1) An agency or facility designated to monitor or provide less  
15 restrictive alternative treatment services to a minor under a court  
16 order or conditional release may take a range of actions to enforce  
17 the terms of the order or conditional release in the event the minor  
18 is not adhering to the terms or is experiencing substantial  
19 deterioration, decompensation, or a likelihood of serious harm. Such  
20 actions may include:

21 (a) Counseling the minor and offering incentives for compliance;

22 (b) Increasing the intensity of services;

23 (c) Petitioning the court to review the minor's compliance and  
24 optionally modify the terms of the order or conditional release while  
25 the minor remains in outpatient treatment;

26 (d) To request assistance from a peace officer for temporarily  
27 detaining the minor for up to 12 hours for evaluation at a crisis  
28 stabilization unit, evaluation and treatment facility, secure  
29 withdrawal management and stabilization facility, facility providing  
30 services under a court order, or emergency department to determine if  
31 revocation or enforcement proceedings under this section are  
32 necessary and appropriate to stabilize the minor, if there has been a  
33 pattern of noncompliance or failure of reasonable attempts at  
34 outreach and engagement; or

35 (e) Initiation of revocation proceedings under subsection (2) of  
36 this section.

37 (2) If the professional person in charge of an outpatient  
38 treatment program, a designated crisis responder, or the director or  
39 secretary, as appropriate, determines that a minor is failing to

1 adhere to the conditions of (~~the~~) a court order for less  
2 restrictive alternative treatment or the conditions (~~for the~~) of a  
3 conditional release, or that substantial deterioration in the minor's  
4 functioning has occurred, the designated crisis responder, or the  
5 director or secretary, as appropriate, may order that the minor be  
6 taken into custody and transported to an inpatient evaluation and  
7 treatment facility, a secure withdrawal management and stabilization  
8 facility, or an approved substance use disorder treatment program. A  
9 secure withdrawal management and stabilization facility or approved  
10 substance use disorder treatment program that has adequate space for  
11 the minor must be available.

12 (~~(2)~~) (3)(a) The designated crisis responder, director, or  
13 secretary, as appropriate, shall file the order of apprehension and  
14 detention and serve it upon the minor and notify the minor's parent  
15 and the minor's attorney, if any, of the detention within two days of  
16 return. At the time of service the minor shall be informed of the  
17 right to a hearing and to representation by an attorney. The  
18 designated crisis responder or the director or secretary, as  
19 appropriate, may modify or rescind the order of apprehension and  
20 detention at any time prior to the hearing.

21 (b) If the minor is involuntarily detained for revocation at an  
22 evaluation and treatment facility, secure withdrawal management and  
23 stabilization facility, or approved substance use disorder treatment  
24 program in a different county from where the minor was initially  
25 detained, the facility or program may file the order of apprehension,  
26 serve it on the minor and notify the minor's parents and the minor's  
27 attorney at the request of the designated crisis responder.

28 (~~(3)~~) (4) A petition for revocation of less restrictive  
29 alternative treatment shall be filed by the designated crisis  
30 responder or the director, secretary, or facility, as appropriate,  
31 with the court in the county where the minor is detained. The court  
32 shall conduct the hearing in that county. A petition for revocation  
33 of conditional release must be filed in the county where the minor is  
34 detained. A petition shall describe the behavior of the minor  
35 indicating violation of the conditions or deterioration of routine  
36 functioning and a dispositional recommendation. The hearing shall be  
37 held within seven days of the minor's return. The issues to be  
38 determined are whether the minor did or did not adhere to the  
39 conditions of the less restrictive alternative treatment or  
40 conditional release, or whether the minor's routine functioning has

1 substantially deteriorated, and, if so, whether the conditions of  
2 less restrictive alternative treatment or conditional release should  
3 be modified or, subject to subsection ~~((4))~~ (5) of this section,  
4 whether the ~~((minor))~~ court should ~~((be returned to))~~ order the  
5 minor's detention for inpatient treatment. Pursuant to the  
6 determination of the court, the minor shall be returned to less  
7 restrictive alternative treatment or conditional release on the same  
8 or modified conditions or shall be ~~((returned to))~~ detained for  
9 inpatient treatment. If the minor is ~~((returned to))~~ detained for  
10 inpatient treatment, RCW 71.34.760 regarding the director's placement  
11 responsibility shall apply. The hearing may be waived by the minor  
12 and the minor ~~((returned to))~~ detained for inpatient treatment or  
13 returned to less restrictive alternative treatment or conditional  
14 release on the same or modified conditions. If the court orders  
15 detention for inpatient treatment, the treatment period must be for  
16 14 days from the revocation hearing if the less restrictive  
17 alternative treatment order was based on a petition under RCW  
18 71.34.740 or 71.34.815. The minor must return to less restrictive  
19 alternative treatment under the order at the end of the 14-day period  
20 unless a petition for further treatment is filed under RCW 71.34.750  
21 or the minor accepts voluntary treatment. If the court orders  
22 detention for inpatient treatment and the less restrictive  
23 alternative treatment order or conditional release was based on a  
24 petition under RCW 71.34.750, the number of days remaining on the  
25 less restrictive alternative treatment order or conditional release  
26 must be converted to days of inpatient treatment.

27 ~~((4))~~ (5) A court may not order the ~~((return))~~ placement of a  
28 minor to inpatient treatment in a secure withdrawal management and  
29 stabilization facility or approved substance use disorder treatment  
30 program unless there is a secure withdrawal management and  
31 stabilization facility or approved substance use disorder treatment  
32 program available with adequate space for the minor.

33 **Sec. 12.** RCW 71.34.780 and 2020 c 302 s 98 are each amended to  
34 read as follows:

35 (1) An agency or facility designated to monitor or provide less  
36 restrictive alternative treatment services to a minor under a court  
37 order or conditional release may take a range of actions to enforce  
38 the terms of the order or conditional release in the event the minor  
39 is not adhering to the terms or is experiencing substantial



1 deterioration, decompensation, or a likelihood of serious harm. Such  
2 actions may include:

3 (a) Counseling the minor and offering incentives for compliance;

4 (b) Increasing the intensity of services;

5 (c) Petitioning the court to review the minor's compliance and  
6 optionally modify the terms of the order or conditional release while  
7 the minor remains in outpatient treatment;

8 (d) To request assistance from a peace officer for temporarily  
9 detaining the minor for up to 12 hours for evaluation at a crisis  
10 stabilization unit, evaluation and treatment facility, secure  
11 withdrawal management and stabilization facility, facility providing  
12 services under a court order, or emergency department to determine if  
13 revocation or enforcement proceedings under this section are  
14 necessary and appropriate to stabilize the minor, if there has been a  
15 pattern of noncompliance or failure of reasonable attempts at  
16 outreach and engagement; or

17 (e) Initiation of revocation proceedings under subsection (2) of  
18 this section.

19 (2) If the professional person in charge of an outpatient  
20 treatment program, a designated crisis responder, or the director or  
21 secretary, as appropriate, determines that a minor is failing to  
22 adhere to the conditions of ((the)) a court order for less  
23 restrictive alternative treatment or the conditions ((for the)) of  
24 conditional release, or that substantial deterioration in the minor's  
25 functioning has occurred, the designated crisis responder, or the  
26 director or secretary, as appropriate, may order that the minor be  
27 taken into custody and transported to an inpatient evaluation and  
28 treatment facility, a secure withdrawal management and stabilization  
29 facility, or an approved substance use disorder treatment program.

30 ((+2)) (3)(a) The designated crisis responder, director, or  
31 secretary, as appropriate, shall file the order of apprehension and  
32 detention and serve it upon the minor and notify the minor's parent  
33 and the minor's attorney, if any, of the detention within two days of  
34 return. At the time of service the minor shall be informed of the  
35 right to a hearing and to representation by an attorney. The  
36 designated crisis responder or the director or secretary, as  
37 appropriate, may modify or rescind the order of apprehension and  
38 detention at any time prior to the hearing.

39 (b) If the minor is involuntarily detained for revocation at an  
40 evaluation and treatment facility, secure withdrawal management and

1 stabilization facility, or approved substance use disorder treatment  
2 program in a different county from where the minor was initially  
3 detained, the facility or program may file the order of apprehension,  
4 serve it on the minor and notify the minor's parents and the minor's  
5 attorney at the request of the designated crisis responder.

6 ~~((3))~~ (4) A petition for revocation of less restrictive  
7 alternative treatment shall be filed by the designated crisis  
8 responder or the director, secretary, or facility, as appropriate,  
9 with the court in the county where the minor is detained. The court  
10 shall conduct the hearing in that county. A petition for revocation  
11 of conditional release must be filed in the county where the minor is  
12 detained. A petition shall describe the behavior of the minor  
13 indicating violation of the conditions or deterioration of routine  
14 functioning and a dispositional recommendation. The hearing shall be  
15 held within seven days of the minor's return. The issues to be  
16 determined are whether the minor did or did not adhere to the  
17 conditions of the less restrictive alternative treatment or  
18 conditional release, or whether the minor's routine functioning has  
19 substantially deteriorated, and, if so, whether the conditions of  
20 less restrictive alternative treatment or conditional release should  
21 be modified or whether the ~~((minor))~~ court should ~~((be returned to))~~  
22 order the minor's detention for inpatient treatment. Pursuant to the  
23 determination of the court, the minor shall be returned to less  
24 restrictive alternative treatment or conditional release on the same  
25 or modified conditions or shall be ~~((returned to))~~ detained for  
26 inpatient treatment. If the minor is ~~((returned to))~~ detained for  
27 inpatient treatment, RCW 71.34.760 regarding the director's placement  
28 responsibility shall apply. The hearing may be waived by the minor  
29 and the minor ~~((returned to))~~ detained for inpatient treatment or  
30 returned to less restrictive alternative treatment or conditional  
31 release on the same or modified conditions. If the court orders  
32 detention for inpatient treatment, the treatment period must be for  
33 14 days from the revocation hearing if the less restrictive  
34 alternative treatment order was based on a petition under RCW  
35 71.34.740 or 71.34.815. The minor must return to less restrictive  
36 alternative treatment under the order at the end of the 14-day period  
37 unless a petition for further treatment is filed under RCW 71.34.750  
38 or the minor accepts voluntary treatment. If the court orders  
39 detention for inpatient treatment and the less restrictive  
40 alternative treatment order or conditional release was based on a

1 petition under RCW 71.34.750, the number of days remaining on the  
2 less restrictive alternative treatment order or conditional release  
3 must be converted to days of inpatient treatment.

4 **Sec. 13.** RCW 71.34.815 and 2022 c 210 s 4 are each amended to  
5 read as follows:

6 (1) An adolescent is in need of assisted outpatient treatment if  
7 the court finds by clear, cogent, and convincing evidence in response  
8 to a petition filed under this section that:

9 (a) The adolescent has a behavioral health disorder;

10 (b) Based on a clinical determination and in view of the  
11 adolescent's treatment history and current behavior, at least one of  
12 the following is true:

13 (i) The adolescent is unlikely to survive safely in the community  
14 without supervision and the adolescent's condition is substantially  
15 deteriorating; or

16 (ii) The adolescent is in need of assisted outpatient treatment  
17 in order to prevent a relapse or deterioration that would be likely  
18 to result in grave disability or a likelihood of serious harm to the  
19 adolescent or to others;

20 (c) The adolescent has a history of lack of compliance with  
21 treatment for his or her behavioral health disorder that has:

22 (i) At least twice within the 36 months prior to the filing of  
23 the petition been a significant factor in necessitating  
24 hospitalization of the adolescent, or the adolescent's receipt of  
25 services in a forensic or other mental health unit of a state  
26 (~~correctional~~) juvenile rehabilitation facility or local  
27 (~~correctional~~) juvenile detention facility, provided that the 36-  
28 month period shall be extended by the length of any hospitalization  
29 or incarceration of the adolescent that occurred within the 36-month  
30 period;

31 (ii) At least twice within the 36 months prior to the filing of  
32 the petition been a significant factor in necessitating emergency  
33 medical care or hospitalization for behavioral health-related medical  
34 conditions including overdose, infected abscesses, sepsis,  
35 endocarditis, or other maladies, or a significant factor in behavior  
36 which resulted in the adolescent's incarceration in a state or local  
37 correctional facility; or

38 (iii) Resulted in one or more violent acts, threats, or attempts  
39 to cause serious physical harm to the adolescent or another within

1 the 48 months prior to the filing of the petition, provided that the  
2 48-month period shall be extended by the length of any  
3 hospitalization or incarceration of the person that occurred during  
4 the 48-month period;

5 (d) Participation in an assisted outpatient treatment program  
6 would be the least restrictive alternative necessary to ensure the  
7 adolescent's recovery and stability; and

8 (e) The adolescent will benefit from assisted outpatient  
9 treatment.

10 (2) The following individuals may directly file a petition for  
11 less restrictive alternative treatment on the basis that an  
12 adolescent is in need of assisted outpatient treatment:

13 (a) The director of a hospital where the adolescent is  
14 hospitalized or the director's designee;

15 (b) The director of a behavioral health service provider  
16 providing behavioral health care or residential services to the  
17 adolescent or the director's designee;

18 (c) The adolescent's treating mental health professional or  
19 substance use disorder professional or one who has evaluated the  
20 person;

21 (d) A designated crisis responder;

22 (e) A release planner from a juvenile detention or rehabilitation  
23 facility; or

24 (f) An emergency room physician.

25 (3) A court order for less restrictive alternative treatment on  
26 the basis that the adolescent is in need of assisted outpatient  
27 treatment may be effective for up to 18 months, unless the adolescent  
28 is currently detained for inpatient treatment for 14 days or more  
29 under RCW 71.34.740 or 71.34.750, in which case the order may be  
30 effective for 180 days. The petitioner must personally interview the  
31 adolescent, unless the adolescent refuses an interview, to determine  
32 whether the adolescent will voluntarily receive appropriate  
33 treatment.

34 (4) The petitioner must allege specific facts based on personal  
35 observation, evaluation, or investigation, and must consider the  
36 reliability or credibility of any person providing information  
37 material to the petition.

38 (5) The petition must include:

39 (a) A statement of the circumstances under which the adolescent's  
40 condition was made known and the basis for the opinion, from personal

1 observation or investigation, that the adolescent is in need of  
2 assisted outpatient treatment. The petitioner must state which  
3 specific facts come from personal observation and specify what other  
4 sources of information the petitioner has relied upon to form this  
5 belief;

6 (b) A declaration from a physician, physician assistant, or  
7 advanced registered nurse practitioner, ~~((or))~~ the adolescent's  
8 treating mental health professional or substance use disorder  
9 professional, or in the case of a person enrolled in treatment in a  
10 behavioral health agency, the person's behavioral health case  
11 manager, who has examined the adolescent no more than 10 days prior  
12 to the submission of the petition and who is willing to testify in  
13 support of the petition, or who alternatively has made appropriate  
14 attempts to examine the adolescent within the same period but has not  
15 been successful in obtaining the adolescent's cooperation, and who is  
16 willing to testify to the reasons they believe that the adolescent  
17 meets the criteria for assisted outpatient treatment ~~((If the~~  
18 ~~declaration is provided by the adolescent's treating mental health~~  
19 ~~professional or substance use disorder professional, it must be~~  
20 ~~assigned by a supervising physician, physician assistant, or advanced~~  
21 ~~registered nurse practitioner who certifies that they have reviewed~~  
22 ~~the declaration))~~);

23 (c) The declarations of additional witnesses, if any, supporting  
24 the petition for assisted outpatient treatment;

25 (d) The name of an agency, provider, or facility that agrees to  
26 provide less restrictive alternative treatment if the petition is  
27 granted by the court; and

28 (e) If the adolescent is detained in a state hospital, inpatient  
29 treatment facility, or juvenile detention or rehabilitation facility  
30 at the time the petition is filed, the anticipated release date of  
31 the adolescent and any other details needed to facilitate successful  
32 reentry and transition into the community.

33 (6) (a) Upon receipt of a petition meeting all requirements of  
34 this section, the court shall fix a date for a hearing:

35 (i) No sooner than three days or later than seven days after the  
36 date of service or as stipulated by the parties or, upon a showing of  
37 good cause, no later than 30 days after the date of service; or

38 (ii) If the adolescent is hospitalized at the time of filing of  
39 the petition, before discharge of the adolescent and in sufficient

1 time to arrange for a continuous transition from inpatient treatment  
2 to assisted outpatient treatment.

3 (b) A copy of the petition and notice of hearing shall be served,  
4 in the same manner as a summons, on the petitioner, the adolescent,  
5 the qualified professional whose affidavit accompanied the petition,  
6 a current provider, if any, and a surrogate decision maker or agent  
7 under chapter 71.32 RCW, if any.

8 (c) If the adolescent has a surrogate decision maker or agent  
9 under chapter 71.32 RCW who wishes to provide testimony at the  
10 hearing, the court shall afford the surrogate decision maker or agent  
11 an opportunity to testify.

12 (d) The adolescent shall be represented by counsel at all stages  
13 of the proceedings.

14 (e) If the adolescent fails to appear at the hearing after  
15 notice, the court may conduct the hearing in the adolescent's  
16 absence; provided that the adolescent's counsel is present.

17 (f) If the adolescent has refused to be examined by the qualified  
18 professional whose affidavit accompanied the petition, the court may  
19 order a mental examination of the adolescent. The examination of the  
20 adolescent may be performed by the qualified professional whose  
21 affidavit accompanied the petition. If the examination is performed  
22 by another qualified professional, the examining qualified  
23 professional shall be authorized to consult with the qualified  
24 professional whose affidavit accompanied the petition.

25 (g) If the adolescent has refused to be examined by a qualified  
26 professional and the court finds reasonable grounds to believe that  
27 the allegations of the petition are true, the court may issue a  
28 written order directing a peace officer who has completed crisis  
29 intervention training to detain and transport the adolescent to a  
30 provider for examination by a qualified professional. An adolescent  
31 detained pursuant to this subsection shall be detained no longer than  
32 necessary to complete the examination and in no event longer than 24  
33 hours. All papers in the court file must be provided to the  
34 adolescent's designated attorney.

35 (7) If the petition involves an adolescent whom the petitioner or  
36 behavioral health administrative services organization knows, or has  
37 reason to know, is an American Indian or Alaska Native who receives  
38 medical or behavioral health services from a tribe within this state,  
39 the behavioral health administrative services organization shall  
40 notify the tribe and Indian health care provider. Notification shall

1 be made in person or by telephonic or electronic communication to the  
2 tribal contact listed in the authority's tribal crisis coordination  
3 plan as soon as possible.

4 (8) A petition for assisted outpatient treatment filed under this  
5 section shall be adjudicated under RCW 71.34.740.

6 (9) (~~(After January 1, 2023, a)~~) A petition for assisted  
7 outpatient treatment must be filed on forms developed by the  
8 administrative office of the courts.

9 NEW SECTION. **Sec. 14.** Sections 2, 5, 9 and 11 of this act  
10 expire July 1, 2026.

11 NEW SECTION. **Sec. 15.** Sections 3, 6, 10, and 12 of this act  
12 take effect July 1, 2026.

13 **Sec. 16.** 2021 c 264 s 29 (uncodified) is amended to read as  
14 follows:

15 (1) Sections 64 and 81, chapter 302, Laws of 2020 (~~(and, until~~  
16 ~~July 1, 2022, section 27, chapter 264, Laws of 2021 and, beginning~~  
17 ~~July 1, 2022)~~), section 28, chapter 264, Laws of 2021, and section 8,  
18 chapter . . . , Laws of 2023 (section 8 of this act) take effect when  
19 the average wait time for children's long-term inpatient placement  
20 admission is 30 days or less for two consecutive quarters.

21 (2) The health care authority must provide written notice of the  
22 effective date of sections 64 and 81, chapter 302, Laws of 2020  
23 (~~(and)~~), section(~~s 27 and~~) 28, chapter 264, Laws of 2021, and  
24 section 8, chapter . . . , Laws of 2023 (section 8 of this act) to  
25 affected parties, the chief clerk of the house of representatives,  
26 the secretary of the senate, the office of the code reviser, and  
27 others as deemed appropriate by the authority.

28 NEW SECTION. **Sec. 17.** This act takes effect July 1, 2025.

29 NEW SECTION. **Sec. 18.** If specific funding for the purposes of  
30 this act, referencing this act by bill or chapter number, is not  
31 provided by June 30, 2023, in the omnibus appropriations act, this  
32 act is null and void."

1 Correct the title.

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