- health disorders—Procedure. (Effective until July 1, 2026.) (1) When a designated crisis responder receives information alleging that a person, as the result of a behavioral health disorder, presents an imminent likelihood of serious harm, or is in imminent danger because of being gravely disabled, after investigation and evaluation of the specific facts alleged and of the reliability and credibility of the person or persons providing the information if any, the designated crisis responder may take such person, or cause by oral or written order such person to be taken into emergency custody in an emergency department, evaluation and treatment facility, secure withdrawal management and stabilization facility if available with adequate space for the person, or approved substance use disorder treatment program if available with adequate space for the person, for not more than one hundred twenty hours as described in RCW 71.05.180.
- (2) (a) Subject to (b) of this subsection, a peace officer may take or cause such person to be taken into custody and immediately delivered to a crisis stabilization unit, 23-hour crisis relief center, evaluation and treatment facility, secure withdrawal management and stabilization facility, approved substance use disorder treatment program, or the emergency department of a local hospital under subsection (1) of this section or when he or she has reasonable cause to believe that such person is suffering from a behavioral health disorder and presents an imminent likelihood of serious harm or is in imminent danger because of being gravely disabled.
- (b) A peace officer's delivery of a person, to a secure withdrawal management and stabilization facility or approved substance use disorder treatment program is subject to the availability of a secure withdrawal management and stabilization facility or approved substance use disorder treatment program with adequate space for the person.
- (3) Persons delivered to a crisis stabilization unit, 23-hour crisis relief center, evaluation and treatment facility, emergency department of a local hospital, secure withdrawal management and stabilization facility, or approved substance use disorder treatment program by peace officers pursuant to subsection (2) of this section may be held by the facility for a period of up to twelve hours, not counting time periods prior to medical clearance.
- (4) Within three hours after arrival at an emergency department, not counting time periods prior to medical clearance, the person must be examined by a mental health professional or substance use disorder professional. Within twelve hours of notice of the need for evaluation, not counting time periods prior to medical clearance, the designated crisis responder must determine whether the individual meets detention criteria. In conjunction with this evaluation, the facility where the patient is located must inquire as to a person's veteran status or eligibility for veterans benefits and, if the person appears to be potentially eligible for these benefits, inquire whether the person would be amenable to treatment by the veterans health administration compared to other relevant treatment options. This information must be shared with the designated crisis responder. If the person has been identified as being potentially eligible for veterans health administration services and as being amenable for those services, and if appropriate in light of all reasonably available information about the person's circumstances, the designated crisis responder must first refer the person to the veterans health

administration for mental health or substance use disorder treatment at a facility capable of meeting the needs of the person including, but not limited to, the involuntary treatment options available at the Seattle division of the VA Puget Sound health care system. If the person is accepted for treatment by the veterans health administration, and is willing to accept treatment by the veterans health administration as an alternative to other available treatment options, the designated crisis responder, the veterans health administration, and the facility where the patient is located will work to make arrangements to have the person transported to a veterans health administration facility. As part of the assessment, the designated crisis responder must attempt to ascertain if the person has executed a mental health advance directive under chapter 71.32 RCW. The interview performed by the designated crisis responder may be conducted by video provided that a licensed health care professional or professional person who can adequately and accurately assist with obtaining any necessary information is present with the person at the time of the interview. If the individual is detained, the designated crisis responder shall file a petition for detention or a supplemental petition as appropriate and commence service on the designated attorney for the detained person. If the individual is released to the community, the behavioral health service provider shall inform the peace officer of the release within a reasonable period of time after the release if the peace officer has specifically requested notification and provided contact information to the provider.

(5) Dismissal of a commitment petition is not the appropriate remedy for a violation of the timeliness requirements of this section based on the intent of this chapter under RCW 71.05.010 except in the few cases where the facility staff or designated crisis responder has totally disregarded the requirements of this section. [2023 c 433 § 8. Prior: 2021 c 264 § 3; 2021 c 125 § 1; prior: 2020 c 302 § 16; (2020 c 302 § 15 expired January 1, 2021); 2020 c 5 § 4; 2019 c 446 § 6; 2016 sp.s. c 29 § 212; 2015 c 269 § 6; prior: 2011 c 305 § 8; 2011 c 148 § 2; 2007 c 375 § 8.]

Expiration date—2023 c 433 §§ 6, 8, and 10: See note following RCW 71.05.150.

Expiration date—2021 c 264 \S 1, 3, 6, 8, 10, 14, 31, and 33: See note following RCW 71.05.150.

Expiration date—2021 c 125 \S 1: "Section 1 of this act expires July 1, 2026." [2021 c 125 \S 3.]

Effective date—2020 c 302 §§ 13, 16, 19-23, 26, 32, 34, 36, 39, 55, 59, 76, 83, 86, 89, and 92: See note following RCW 71.05.150.

Expiration date—2020 c 302 \$\$ 13, 16, 26, 39, 45, 55, 78, 83, 86, 92, 94, and 97: See note following RCW 71.05.150.

Expiration date—2020 c 302 §§ 12, 15, 25, 31, 33, 35, 38, 54, 75, 82, 85, 88, and 91: See note following RCW 71.05.150.

Expiration date—2020 c 5 §§ 2 and 4: See note following RCW 71.05.150.

- Expiration date—2019 c 446 §§ 4, 6, 8, 11, 14, 30, 32, 34, 37, 39, and 41: See note following RCW 71.05.150.
- Effective dates—2016 sp.s. c 29: See note following RCW 71.05.760.
- Short title—Right of action—2016 sp.s. c 29: See notes following RCW 71.05.010.
- **Effective date—2015 c 269 §§ 1-9 and 11-13:** See note following RCW 71.05.010.
 - Findings—2011 c 305: See note following RCW 74.09.295.
- Certification of triage facilities—Effective date—2011 c 148: See notes following RCW 71.05.020.
- Findings—Purpose—Construction—Severability—2007 c 375: See notes following RCW 10.31.110.
 - Captions not law—2007 c 375: See note following RCW 10.77.084.
- health disorders—Procedure. (Effective July 1, 2026.) (1) When a designated crisis responder receives information alleging that a person, as the result of a behavioral health disorder, presents an imminent likelihood of serious harm, or is in imminent danger because of being gravely disabled, after investigation and evaluation of the specific facts alleged and of the reliability and credibility of the person or persons providing the information if any, the designated crisis responder may take such person, or cause by oral or written order such person to be taken into emergency custody in an emergency department, evaluation and treatment facility, secure withdrawal management and stabilization facility, or approved substance use disorder treatment program, for not more than one hundred twenty hours as described in RCW 71.05.180.
- (2) A peace officer may take or cause such person to be taken into custody and immediately delivered to a crisis stabilization unit, 23-hour crisis relief center, evaluation and treatment facility, secure withdrawal management and stabilization facility, approved substance use disorder treatment program, or the emergency department of a local hospital under subsection (1) of this section or when he or she has reasonable cause to believe that such person is suffering from a behavioral health disorder and presents an imminent likelihood of serious harm or is in imminent danger because of being gravely disabled.
- (3) Persons delivered to a crisis stabilization unit, 23-hour crisis relief center, evaluation and treatment facility, emergency department of a local hospital, secure withdrawal management and stabilization facility, or approved substance use disorder treatment program by peace officers pursuant to subsection (2) of this section may be held by the facility for a period of up to twelve hours, not counting time periods prior to medical clearance.
- (4) Within three hours after arrival at an emergency department, not counting time periods prior to medical clearance, the person must

be examined by a mental health professional or substance use disorder professional. Within twelve hours of notice of the need for evaluation, not counting time periods prior to medical clearance, the designated crisis responder must determine whether the individual meets detention criteria. In conjunction with this evaluation, the facility where the patient is located must inquire as to a person's veteran status or eligibility for veterans benefits and, if the person appears to be potentially eligible for these benefits, inquire whether the person would be amenable to treatment by the veterans health administration compared to other relevant treatment options. This information must be shared with the designated crisis responder. If the person has been identified as being potentially eligible for veterans health administration services and as being amenable for those services, and if appropriate in light of all reasonably available information about the person's circumstances, the designated crisis responder must first refer the person to the veterans health administration for mental health or substance use disorder treatment at a facility capable of meeting the needs of the person including, but not limited to, the involuntary treatment options available at the Seattle division of the VA Puget Sound health care system. If the person is accepted for treatment by the veterans health administration, and is willing to accept treatment by the veterans health administration as an alternative to other available treatment options, the designated crisis responder, the veterans health administration, and the facility where the patient is located will work to make arrangements to have the person transported to a veterans health administration facility. As part of the assessment, the designated crisis responder must attempt to ascertain if the person has executed a mental health advance directive under chapter 71.32 RCW. The interview performed by the designated crisis responder may be conducted by video provided that a licensed health care professional or professional person who can adequately and accurately assist with obtaining any necessary information is present with the person at the time of the interview. If the individual is detained, the designated crisis responder shall file a petition for detention or a supplemental petition as appropriate and commence service on the designated attorney for the detained person. If the individual is released to the community, the behavioral health service provider shall inform the peace officer of the release within a reasonable period of time after the release if the peace officer has specifically requested notification and provided contact information to the provider.

(5) Dismissal of a commitment petition is not the appropriate remedy for a violation of the timeliness requirements of this section based on the intent of this chapter under RCW 71.05.010 except in the few cases where the facility staff or designated crisis responder has totally disregarded the requirements of this section. [2023 c 433 § 9. Prior: 2021 c 264 § 4; 2021 c 125 § 2; prior: 2020 c 302 § 17; (2020 c 302 § 15 expired January 1, 2021); 2020 c 5 § 5; 2019 c 446 § 7; 2016 sp.s. c 29 § 213; 2016 sp.s. c 29 § 212; 2015 c 269 § 6; prior: 2011 c 305 § 8; 2011 c 148 § 2; 2007 c 375 § 8.]

Effective date—2023 c 433 §§ 7, 9, and 11: See note following RCW 71.05.150.

Effective date—2021 c 264 §§ 2, 4, 7, 9, 11, 15, 32, and 34: See note following RCW 71.05.150.

- **Effective date—2021 c 125 § 2:** "Section 2 of this act takes effect July 1, 2026." [2021 c 125 § 4.]
- Effective date—2020 c 302 §§ 14, 17, 27, 40, 46, 56, 79, 84, 87, 93, 95, and 98: See note following RCW 71.05.150.
- Expiration date—2020 c 302 §§ 12, 15, 25, 31, 33, 35, 38, 54, 75, 82, 85, 88, and 91: See note following RCW 71.05.150.
- Effective date—2020 c 5 §§ 3 and 5: See note following RCW 71.05.150.
- Effective date—2019 c 446 §§ 5, 7, 9, 12, 15, 31, 33, 35, 38, 40, and 42: See note following RCW 71.05.150.
- Effective dates—2016 sp.s. c 29: See note following RCW 71.05.760.
- Short title—Right of action—2016 sp.s. c 29: See notes following RCW 71.05.010.
- **Effective date—2015 c 269 §§ 1-9 and 11-13:** See note following RCW 71.05.010.
 - Findings—2011 c 305: See note following RCW 74.09.295.
- Certification of triage facilities—Effective date—2011 c 148: See notes following RCW 71.05.020.
- Findings—Purpose—Construction—Severability—2007 c 375: See notes following RCW 10.31.110.
 - Captions not law—2007 c 375: See note following RCW 10.77.084.