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SENATE BILL 5279

State of Washington 56th Legislature 1999 Regular Session

By Senators Kohl-Welles, Hargrove, Long, Fairley, Prentice and Winsley Read first time 01/18/1999. Referred to Committee on Human Services & Corrections.

- 1 AN ACT Relating to placement of children in mental health care by
- 2 the department of social and health services; adding new sections to
- 3 chapter 13.34 RCW; and creating a new section.
- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 5 <u>NEW SECTION.</u> **Sec. 1.** It is the intent of the legislature that
- 6 children in the custody of the department of social and health services
- 7 be provided the most appropriate possible mental health care consistent
- 8 with the child's best interests, medical need for mental health
- 9 treatment, available state and community resources, family
- 10 reconciliation, and professional standards of medical care. The
- 11 legislature intends that no placement of minors for mental health
- 12 treatment under this act be made on any other basis and that
- 13 consideration always be given to treatment in the least restrictive
- 14 manner.
- 15 <u>NEW SECTION.</u> **Sec. 2.** A new section is added to chapter 13.34 RCW
- 16 to read as follows:
- 17 No minor child under the jurisdiction of the department pursuant to
- 18 this chapter or chapter 26.44 RCW shall be placed in a facility to

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receive inpatient mental health treatment unless the secretary 1 2 determines: (1) It is medically necessary, based on an evaluation of a person licensed under chapter 18.71 RCW, for the child to receive 3 4 treatment on an inpatient basis; (2) the facility in which a child is 5 placed offers the most appropriate treatment services and facilities for the needs of the child; (3) the facility is the facility with 6 7 available treatment space closest to the child's parents unless the 8 secretary finds that placement in the facility closest to the parents 9 presents a risk of imminent harm to the child; (4) the facility 10 complies with all state-required licensing and professional standards for providing inpatient mental health care to minors; (5) the facility 11 is sufficiently financially stable to continue in operation for the 12 13 foreseeable future; and (6) the proposed inpatient treatment includes a plan to transfer the child to outpatient treatment as soon as such 14 15 change is medically appropriate.

NEW SECTION. Sec. 3. A new section is added to chapter 13.34 RCW to read as follows:

18 If any child is placed in mental health treatment under this 19 chapter, the secretary shall determine whether it would create a risk of imminent harm to the child to disclose to the parents the treatment 20 decision and placement of the child in a facility. The secretary shall 21 22 disclose the decision to provide treatment and the placement, unless he 23 or she determines such disclosure would create a risk of imminent harm 24 to the child. If the secretary determines that full disclosure would 25 create a risk of imminent harm to the child, the secretary shall determine the amount of disclosure that should occur. 26 The secretary shall provide disclosure of the treatment decision and placement at the 27 28 earliest possible moment.

- NEW SECTION. Sec. 4. A new section is added to chapter 13.34 RCW to read as follows:
- 31 (1) The secretary shall maintain a list of all facilities to which 32 minor children under the jurisdiction of the department may be placed 33 for inpatient mental health treatment pursuant to this chapter or 34 chapter 26.44 RCW. The list shall be updated each time a facility is 35 added or deleted. The secretary shall publish the list once each year 36 in a format intended to provide the public the maximum opportunity to 37 learn the name, address, and telephone number of each facility.

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(2) Not later than December 1st of each year, the secretary shall provide the governor and legislature a report setting forth: (a) The number of minor children under the jurisdiction of the department who have been placed in mental health inpatient treatment; (b) the facilities that received minor children for treatment; (c) the number of minor children treated at each facility; and (d) the number of inpatient treatment days provided at each facility for each child.

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