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## SENATE BILL 5620

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State of Washington 56th Legislature 1999 Regular Session

By Senators Long, Hargrove, Deccio, Prentice, Franklin and Patterson Read first time 01/29/1999. Referred to Committee on Human Services & Corrections.

- AN ACT Relating to chemical dependency treatment services; amending 1 2 RCW 70.96A.010, 70.96A.011, 70.96A.020, 70.96A.030, 70.96A.040, 70.96A.043, 70.96A.050, 70.96A.070, 70.96A.085, 70.96A.087, 70.96A.090, 3 4 70.96A.100, 70.96A.110, 70.96A.120, 70.96A.145, 70.96A.150, 70.96A.160, 5 70.96A.180, 70.96A.265, 70.96A.300, 70.96A.310, and 70.96A.320; reenacting RCW 70.96A.430; adding new sections to chapter 70.96A RCW; 6 7 recodifying RCW 70.96A.430; repealing RCW 70.96A.060, 70.96A.080, 70.96A.140, and 70.96.150; and providing an effective date. 8
- 9 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- NEW SECTION. Sec. 1. A new section is added to chapter 70.96A RCW to read as follows:
- 12 It is the intent of the legislature to: (1) Clarify that it is the
- 13 nature of a person's current conduct, current chemical abuse, current
- 14 mental condition, history, and likelihood of committing future acts
- 15 that pose a threat to public safety or himself or herself that should
- 16 determine treatment procedures and level; and (2) provide additional
- 17 opportunities for chemical dependency treatment for persons whose
- 18 conduct threatens themselves or threatens public safety as a result of
- 19 the chemical dependency.

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- 1 **Sec. 2.** RCW 70.96A.010 and 1989 c 271 s 304 are each amended to 2 read as follows:
- It is the policy of this state that ((alcoholics and intoxicated))
- 4 <u>chemically dependent</u> persons may not be subjected to criminal
- 5 prosecution solely because of their consumption of alcoholic beverages
- 6 or psychoactive chemicals but rather should((, within available
- 7 funds,)) be afforded a continuum of treatment in order that they may
- 8 lead normal lives as productive members of society. ((Within available
- 9 funds, treatment should also be provided for drug addicts.))
- 10 **Sec. 3.** RCW 70.96A.011 and 1989 c 270 s 1 are each amended to read 11 as follows:
- The legislature finds that the ((use)) abuse of alcohol and ((other
- 13 drugs has become)) psychoactive chemicals is a serious threat to the
- 14 health of the citizens of the state of Washington. The ((use)) abuse
- 15 of psychoactive chemicals ((has been found to be)) is a prime factor in
- 16 the ((current)) AIDS epidemic. Therefore, a comprehensive statute to
- 17 deal with ((alcoholism and other drug addiction)) chemical dependency
- 18 is necessary.
- 19 The legislature agrees with the 1987 resolution of the American
- 20 Medical Association that endorses the proposition that all chemical
- 21 dependencies, including alcoholism, are diseases. It is the intent of
- 22 the legislature to end the sharp distinctions between alcoholism
- 23 services and other drug addiction services, to recognize that chemical
- 24 dependency is a disease, and to insure that prevention and treatment
- 25 services are available and are of high quality. It is the purpose of
- 26 this chapter to provide the financial assistance necessary to enable
- 27 the department ((of social and health services)) to provide a discrete
- 28 program of ((alcoholism and other drug addiction)) chemical dependency
- 29 services. <u>It is not the intent of the legislature that the department</u>
- 30 or its contractors use the existence of a discrete program to prevent,
- 31 avoid, or impede collaboration or coordinated delivery of services to
- 32 persons with mental disorders.
- 33 **Sec. 4.** RCW 70.96A.020 and 1998 c 296 s 22 are each amended to
- 34 read as follows:
- For the purposes of this chapter the following words and phrases
- 36 shall have the following meanings unless the context clearly requires
- 37 otherwise:

- 1 (1) "Alcoholic" means a person who suffers from the disease of 2 alcoholism.
- 3 (2) "Alcoholism" means a disease, characterized by a dependency on 4 alcoholic beverages, loss of control over the amount and circumstances 5 of use, symptoms of tolerance, physiological or psychological 6 withdrawal, or both, if use is reduced or discontinued, and impairment 7 of health or disruption of social or economic functioning.
- 8 (3) "Approved treatment program" means a discrete program of 9 chemical dependency treatment provided by a treatment program certified 10 by the department of social and health services as meeting standards 11 adopted under this chapter.
- 12 (4) "Chemical dependency" means: (a) Alcoholism  $((\Theta r))$ ; (b) drug 13 addiction $((\tau))$ ; or (c) dependence on alcohol and one or more other 14 psychoactive chemicals, as the context requires.
- 15 (5) "Chemical dependency program" means expenditures and activities 16 of the department designed and conducted to prevent or treat alcoholism 17 and other drug addiction, including reasonable administration and 18 overhead.
- 19 (6) "Chemically dependent person" means a person with a chemical 20 dependency.
- 21 <u>(7)</u> "Department" means the department of social and health 22 services.
- ((<del>(7)</del>)) (8) "Designated chemical dependency specialist" or "specialist" means a person designated by the county ((alcoholism and other drug addiction)) chemical dependency program coordinator designated under RCW 70.96A.310 to perform the commitment duties described in ((RCW 70.96A.140)) sections 16 through 25 of this act and qualified to do so by meeting standards adopted by the department.
- (((8))) "Director" means the person administering the chemical dependency program within the department.
- $((\frac{9}{}))$  (10) "Drug addict" means a person who suffers from the 32 disease of drug addiction.
- ((\(\frac{(10)}{10}\))) (11) "Drug addiction" means a disease characterized by a dependency on psychoactive chemicals, loss of control over the amount and circumstances of use, symptoms of tolerance, physiological or psychological withdrawal, or both, if use is reduced or discontinued, and impairment of health or disruption of social or economic functioning.

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- 1  $((\frac{11}{10}))$  <u>(12)</u> "Emergency service patrol" means a patrol established 2 under RCW 70.96A.170.
- 3  $((\frac{12}{12}))$  (13) "Gravely disabled by alcohol or other  $(\frac{12}{12})$ 4 psychoactive chemicals" or "gravely disabled" means that a person, as a result of the use of alcohol or other ((drugs)) psychoactive 5 chemicals: (a) Is in danger of serious physical harm resulting from a 6 7 failure to provide for his or her essential human needs of health or 8 safety; or (b) manifests severe deterioration in routine functioning 9 evidenced by a repeated and escalating loss of cognition or volitional 10 control over his or her actions and is not receiving care or treatment as essential for his or her health or safety. 11
- ((<del>(13)</del>)) (14) "History of one or more violent acts" refers to the period of time ten years prior to the filing of a petition under this chapter, excluding any time spent, but not any violent acts committed, in a mental health facility, a long-term alcoholism or drug treatment facility, or in confinement.
  - (15) "Incapacitated by alcohol or other psychoactive chemicals" or "incapacitated" means that a person, as a result of the use of alcohol or other psychoactive chemicals, has his or her judgment so impaired that he or she is incapable of realizing and making a rational decision with respect to his or her need for treatment and presents a likelihood of serious harm to himself or herself, to any other person, or to property.
- (((14))) (16) "Incompetent person" means a person who has been adjudged incompetent by the superior court.
- $((\frac{15}{15}))$  (17) "Intoxicated person" means a person whose mental or physical functioning is substantially impaired as a result of the use of alcohol or other psychoactive chemicals.
- $((\frac{16}{16}))$  (18) "Licensed physician" means a person licensed to practice medicine or osteopathic medicine and surgery in the state of Washington.
- (((17))) (19) "Likelihood of serious harm" means ((either)):
- 33 (a) A substantial risk that: (i) Physical harm will be inflicted 34 by an individual upon his or her own person, as evidenced by threats or 35 attempts to commit suicide or inflict physical harm on one's self; 36 ((b) a substantial risk that)) (ii) physical harm will be inflicted by 37 an individual upon another, as evidenced by behavior that has caused 38 the harm or that places another person or persons in reasonable fear of 39 sustaining the harm; or ((c) a substantial risk that)) (iii) physical

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- 1 harm will be inflicted by an individual upon the property of others, as 2 evidenced by behavior that has caused substantial loss or damage to the 3 property of others; or
- 4 <u>(b) The individual has threatened the physical safety of another</u> 5 and has a history of one or more violent acts.
- 6 ((<del>(18)</del>)) (20) "Medical necessity" for inpatient ((<del>care</del>)) treatment 7 of a minor means a requested certified inpatient service that is reasonably calculated to: (a) Diagnose, arrest, or alleviate a 8 9 chemical dependency; or (b) prevent the worsening of chemical 10 dependency conditions that endanger life or cause suffering and pain, or result in illness or infirmity or threaten to cause or aggravate a 11 12 handicap, or cause physical deformity or malfunction, and there is no 13 adequate less restrictive alternative available.
- 14  $((\frac{19}{19}))$  <u>(21)</u> "Minor" means a person less than eighteen years of 15 age.
- $((\frac{20}{10}))$  (22) "Parent" means the parent or parents who have the legal right to custody of the child. Parent includes custodian or quardian.
- ((<del>(21)</del>)) <u>(23)</u> "Peace officer" means a law enforcement official of a public agency or governmental unit, and includes persons specifically given peace officer powers by any state law, local ordinance, or judicial order of appointment.
- $((\frac{(22)}{2}))$  (24) "Person" means an individual, including a minor.
- $((\frac{(23)}{)})$  (25) "Professional person in charge" or "professional person" means a physician or chemical dependency counselor as defined in rule by the department, who is empowered by a certified treatment program with authority to make assessment, admission, continuing  $((\frac{care}{)})$  treatment, and discharge decisions on behalf of the certified program.
- 30 (((24))) (26) "Secretary" means the secretary of the department of 31 social and health services.
- $((\frac{25}{25}))$  "Treatment" means the broad range of emergency, 32 detoxification, residential, and care, 33 and outpatient services 34 including diagnostic evaluation, chemical dependency education and 35 counseling, medical, psychiatric, psychological, and social service care, vocational rehabilitation and career counseling, which may be 36 37 extended to ((alcoholics and other drug addicts)) chemically dependent persons and their families, persons incapacitated by alcohol or other 38 39 psychoactive chemicals, and intoxicated persons.

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- 1  $((\frac{26}{1}))$  "Treatment program" means an organization,
- 2 institution, or corporation, public or private, engaged in the care,
- 3 treatment, or rehabilitation of ((alcoholics or other drug addicts))
- 4 chemically dependent persons.
- 5 (29) "Violent act" means behavior that resulted in homicide,
- 6 <u>attempted suicide</u>, <u>nonfatal injuries</u>, <u>or substantial damage to</u>
- 7 property.
- 8 **Sec. 5.** RCW 70.96A.030 and 1989 c 270 s 4 are each amended to read 9 as follows:
- 10 A discrete ((program of)) chemical dependency program is
- 11 established within the department ((of social and health services)), to
- 12 be administered by a qualified person who has training and experience
- in ((handling alcoholism and other drug addiction problems)): (1)
- 14 Providing chemical dependency treatment; or (2) the organization or
- 15 administration of ((treatment services for persons suffering from
- 16 alcoholism or other drug addiction problems)) chemical dependency
- 17 <u>treatment programs</u>.
- 18 **Sec. 6.** RCW 70.96A.040 and 1989 c 270 s 5 are each amended to read
- 19 as follows:
- 20 The department, in the operation of the chemical dependency
- 21 program, may:
- 22 (1) Plan, establish, and maintain prevention and treatment programs
- 23 as necessary or desirable;
- 24 (2) Make contracts necessary or incidental to the performance of
- 25 its duties and the execution of its powers under this chapter,
- 26 including contracts with public and private agencies, organizations,
- 27 and individuals to pay them for services ((rendered or furnished))
- 28 <u>provided</u> to ((alcoholics or other drug addicts)) chemically dependent
- 29 persons, persons incapacitated or gravely disabled by alcohol or other
- 30 psychoactive chemicals, or intoxicated persons;
- 31 (3) Enter into agreements for monitoring of verification of
- 32 qualifications of counselors employed by approved treatment programs;
- 33 (4) Adopt rules under chapter 34.05 RCW to carry out the provisions
- 34 and purposes of this chapter, and ((contract,)) cooperate((,)) and
- 35 coordinate with other public or private agencies or individuals for
- 36 those purposes;

- (5) Solicit and accept for use any gift <u>or bequest</u> of money or property ((made by will or otherwise)), and any grant of money, services, or property from the federal government, the state, or any political subdivision thereof or any private source, and do all things necessary to cooperate with the federal government or any of its agencies in making an application for any grant;
- 7 (6) Administer or supervise the administration of the provisions 8 ((relating to alcoholics, other drug addicts, and intoxicated persons)) 9 of any state plan submitted for federal funding pursuant to federal 10 health, welfare, or treatment legislation relating to alcoholics, other 11 drug addicts, and intoxicated persons;
- 12 (7) (a) Coordinate its activities and cooperate with chemical dependency programs in this and other states((7)); and
- (b) Make contracts and other joint or cooperative arrangements with state, local, or private agencies in this and other states for: (i)

  The treatment of ((alcoholics and other drug addicts)) chemically dependent persons and their families((¬)); persons incapacitated by alcohol or other psychoactive chemicals((¬)); and intoxicated persons; and ((for)) (ii) the common advancement of chemical dependency programs;
- 21 (8) Keep records and engage in research and the gathering of 22 relevant statistics;
- 23 (9) Do other acts and things necessary or convenient to execute the 24 authority expressly granted to it; and
- 25 (10) Acquire, hold, or dispose of real property or any interest 26 therein, and construct, lease, or otherwise provide treatment programs.
- 27 **Sec. 7.** RCW 70.96A.043 and 1989 c 270 s 7 are each amended to read 28 as follows:
- 29 Pursuant to ((the Interlocal Cooperation Act,)) chapter 39.34 RCW,
- 30 the department may enter into agreements to accomplish the purposes of
- 31 this chapter.
- 32 **Sec. 8.** RCW 70.96A.050 and 1989 c 270 s 6 are each amended to read 33 as follows:
- 34 The department shall:
- 35 (1) Develop, encourage, and foster state-wide, regional, and local 36 plans and programs for the prevention of ((alcoholism and other drug 37 addiction)) chemical dependency, treatment of ((alcoholics and other

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drug addicts)) chemically dependent persons and their families, persons incapacitated by alcohol or other psychoactive chemicals, and intoxicated persons in cooperation with public and private agencies, organizations, and individuals and provide technical assistance and consultation services for these purposes;

- (2) Coordinate the efforts and enlist the assistance of all public and private agencies, organizations, and individuals interested in prevention of ((alcoholism and drug addiction)) chemical dependency, and treatment of ((alcoholics and other drug addicts)) chemically dependent persons and their families, persons incapacitated by alcohol or other psychoactive chemicals, and intoxicated persons;
- (3) Cooperate with public and private agencies in establishing and conducting programs to provide treatment for ((alcoholics and other drug addicts)) chemically dependent persons and their families, persons incapacitated by alcohol or other psychoactive chemicals, and intoxicated persons who are ((clients of the)) under the supervision of the state or local correctional systems;
- (4) Cooperate with the superintendent of public instruction, state board of education, schools, police departments, courts, and other public and private agencies, organizations, and individuals in establishing programs for the prevention of ((alcoholism and other drug addiction)) chemical dependency, treatment of ((alcoholics or other drug addicts)) chemically dependent persons and their families, persons incapacitated or gravely disabled by alcohol ((and)) or other psychoactive chemicals, and intoxicated persons, and preparing curriculum materials thereon for use at all levels of school education;
- (5) Prepare, publish, evaluate, and disseminate educational material dealing with the nature and effects of alcohol and other psychoactive chemicals and the consequences of their use;
- (6) Develop and implement, as an integral part of treatment programs, an educational program for use in the treatment of ((alcoholics or other drug addicts)) chemically dependent persons, persons incapacitated by alcohol ((and)) or other psychoactive chemicals, and intoxicated persons((, which)). The program shall include the dissemination of information concerning: (a) The nature and effects of alcohol and other psychoactive chemicals((-)); (b) the consequences of their use( $(\tau)$ ); (c) the principles of recovery( $(\tau)$ ) from chemical dependency; and (d) HIV and AIDS;

- 1 (7) Organize and foster training programs for persons engaged in 2 treatment of ((alcoholics or other drug addicts)) chemically dependent 3 persons, persons incapacitated by alcohol ((and)) or other psychoactive 4 chemicals, and intoxicated persons;
- (8) Sponsor and encourage research into the causes and nature of ((alcoholism and other drug addiction)) chemical dependency, treatment of ((alcoholics and other drug addicts)) chemically dependent persons, persons incapacitated by alcohol ((and)) or other psychoactive chemicals, and intoxicated persons, and serve as a clearing house for information relating to ((alcoholism or other drug addiction)) chemical dependency;
- (9) Specify uniform methods for keeping statistical information by public and private agencies, organizations, and individuals, and collect and make available relevant statistical information, including number of persons treated, frequency of admission and readmission, and frequency and duration of treatment;
- (10) Advise the governor in the preparation of a comprehensive plan for treatment of ((alcoholics and other drug addicts)) chemically dependent persons, persons incapacitated by alcohol or other psychoactive chemicals, and intoxicated persons for inclusion in the state's comprehensive health plan;

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- (11) Review all state health, welfare, and treatment plans to be submitted for federal funding under federal legislation, and advise the governor on provisions to be included relating to ((alcoholism and other drug addiction)) chemical dependency, chemically dependent persons, persons incapacitated by alcohol or other psychoactive chemicals, and intoxicated persons;
- (12) Assist in the development of, and cooperate with, programs for ((alcohol and other psychoactive chemical)) chemical dependency deducation and treatment for employees of state and local governments and businesses and industries in the state;
- (13) Use the support and assistance of interested persons in the community to encourage ((alcoholics and other drug addicts)) chemically dependent persons voluntarily to undergo treatment;
- (14) Cooperate with public and private agencies in establishing and conducting programs designed to deal with the problem of persons operating motor vehicles while intoxicated;
- 38 (15) Encourage general hospitals and other appropriate health 39 facilities to admit without discrimination ((alcoholics and other drug

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- addicts)) chemically dependent persons, persons incapacitated by 1 alcohol or other psychoactive chemicals, and intoxicated persons and to 2 provide them with adequate and appropriate treatment; 3
- 4 (16) Encourage all health and disability insurance programs to 5 include ((alcoholism and other drug addiction)) chemical dependency as a covered illness; and 6
- 7 (17) Organize and sponsor a state-wide program to help judges and 8 court personnel((, including judges,)) better understand ((the disease 9 of alcoholism and other drug addiction)) chemical dependency and the 10 uses of chemical dependency treatment programs.
- Sec. 9. RCW 70.96A.070 and 1994 c 231 s 2 are each amended to read 11 12 as follows:

Pursuant to the provisions of RCW 43.20A.360, there shall be a 13 14 citizens advisory council composed of not less than seven nor more than 15 fifteen members. It is the intent of the legislature that the citizens advisory council broadly represent citizens who have been recipients of voluntary or involuntary treatment for ((alcoholism or other drug 17 18 addiction)) chemical dependency and who have been in recovery from 19 chemical dependency for a minimum of two years. To meet this intent, at least two-thirds of the council's members shall be former recipients of these services and not employed in an occupation relating to 21 ((alcoholism or drug addiction)) chemical dependency. The remaining 23 members shall be broadly representative of the community, shall include 24 representation from business and industry, organized labor, the judiciary, and minority groups, chosen for their demonstrated concern with ((alcoholism and other drug addiction)) chemical dependency problems. Members shall be appointed by the secretary.

28 In addition to advising the department in carrying out the purposes 29 of this chapter, the council shall develop and propose to the secretary 30 for his or her consideration the rules for the implementation of the chemical dependency program of the department. Rules and policies 31 32 governing treatment programs shall be developed in collaboration among the council, department staff, local government, and administrators of 33 34 voluntary and involuntary treatment programs. The secretary shall thereafter adopt such rules that, in his or her judgment properly 35 36 implement the chemical dependency program of the department consistent with the welfare of those to be served, the legislative intent, and the 37 public good. 38

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- 1 **Sec. 10.** RCW 70.96A.085 and 1989 c 270 s 12 are each amended to 2 read as follows:
- A city, town, or county that does not have its own facility or program for the treatment and rehabilitation of ((alcoholics and other
- 5 drug addicts)) chemically dependent persons may share in the use of a
- 6 facility or program maintained by another city or county so long as it
- 7 contributes no less than two percent of its share of liquor taxes and
- 8 profits to the support of the facility or program.
- 9 **Sec. 11.** RCW 70.96A.087 and 1989 c 270 s 13 are each amended to 10 read as follows:
- 11 To be eligible to receive its share of liquor taxes and profits,
- 12 each city and county shall devote no less than two percent of its share
- 13 of liquor taxes and profits to the support of a <u>chemical dependency</u>
- 14 program ((of alcoholism and other drug addiction)) approved by the
- 15 ((alcoholism and other drug addiction)) chemical dependency board
- 16 authorized by RCW 70.96A.300 and the secretary.
- 17 **Sec. 12.** RCW 70.96A.090 and 1995 c 312 s 46 are each amended to 18 read as follows:
- 19 (1) The ((<del>department</del>)) <u>secretary</u> shall adopt rules establishing
- 20 standards for approved treatment programs, the process for the review
- 21 and inspection  $\underline{of}$  programs applying to the department for certification
- 22 as an approved treatment program, and fixing the fees to be charged by
- 23 the department for the required inspections. The standards may concern
- 24 the health standards to be met and standards of services and treatment
- 25 to be afforded patients.
- 26 (2) The department may suspend, revoke, limit, restrict, or modify
- 27 an approval, or refuse to grant approval, for failure to meet the
- 28 provisions of this chapter, or the standards adopted under this
- 29 chapter. RCW 43.20A.205 governs notice of a license denial,
- 30 revocation, suspension, or modification and provides the right to an
- 31 adjudicative proceeding.
- 32 (3) No treatment program may advertise or represent itself as an
- 33 approved treatment program if approval has not been granted, has been
- 34 denied, suspended, revoked, or canceled.
- 35 (4) Certification as an approved treatment program is effective for
- 36 one calendar year from the date of issuance of the certificate. The
- 37 certification shall specify the types of services provided by the

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approved treatment program that meet the standards adopted under this chapter. Renewal of certification shall be made in accordance with this section for initial approval and in accordance with the standards 4 set forth in rules adopted by the secretary.

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- 5 (5) Approved treatment programs shall not provide ((alcoholism or other drug addiction)) chemical dependency treatment services for which 6 7 the approved treatment program has not been certified. 8 treatment programs may provide services for which approval has been 9 sought and is pending, if approval for the services has not been 10 previously revoked or denied.
- 11 (6) The department periodically shall inspect and evaluate approved 12 public and private treatment programs at reasonable times and in a 13 reasonable manner.
- (7) The department shall maintain and periodically publish a 14 15 current list of approved treatment programs.
- 16 (8) Each approved treatment program shall file with the department 17 on request, data, statistics, schedules, and information the department 18 reasonably requires. An approved treatment program that, without good 19 cause, fails to furnish any data, statistics, schedules, or information 20 as requested, or files fraudulent returns thereof, may be removed from 21 the list of approved treatment programs $((\tau))$  and its certification 22 revoked or suspended.
  - (9) In addition to the requirements of subsection (6) of this section, the department shall use the data provided in subsection (8) of this section to evaluate each program that admits children to inpatient treatment upon application of their parents. The evaluation shall be done at least once every twelve months. In addition, the department shall randomly select and review the information on individual children who are admitted on application of the child's parent for the purpose of determining whether the child was appropriately placed into treatment based on an objective evaluation of the child's condition and the outcome of the child's treatment.
  - (10) Upon petition of the department and after a hearing held upon reasonable notice to the facility, the superior court may issue a warrant to an officer or employee of the department authorizing him or her to enter and inspect at reasonable times, and examine the books and accounts of, any approved public or private treatment program refusing to consent to inspection or examination by the department or which the

- 1 department has reasonable cause to believe is operating in violation of
- 2 this chapter.
- 3 **Sec. 13.** RCW 70.96A.100 and 1989 c 270 s 23 are each amended to 4 read as follows:
- 5 The secretary shall adopt and may amend and repeal rules for
- 6 acceptance of persons into the approved treatment program, considering
- 7 available treatment resources and facilities, for the purpose of early
- 8 and effective treatment of ((alcoholics and other drug addicts))
- 9 <u>chemically dependent persons</u>, persons incapacitated by alcohol or other
- 10 psychoactive chemicals, and intoxicated persons. In ((establishing))
- 11 adopting the rules, the secretary shall be guided by the following
- 12 standards:
- 13 (1) If possible a ((<del>patient</del>)) <u>person</u> shall be treated on a
- 14 voluntary rather than an involuntary basis.
- 15 (2) A ((patient)) person shall be initially assigned or transferred
- 16 to outpatient treatment, unless he or she is found to require
- 17 residential treatment.
- 18 (3) A person shall not be denied treatment solely because he or she
- 19 has withdrawn from treatment against medical advice on a prior occasion
- 20 or because he or she has relapsed after earlier treatment.
- 21 (4) An individualized treatment plan shall be prepared and
- 22 maintained on a current basis for each ((patient)) person.
- 23 (5) Provision shall be made for a continuum of coordinated
- 24 treatment services, so that a person who leaves a facility or a form of
- 25 treatment will have available and use other appropriate treatment.
- 26 **Sec. 14.** RCW 70.96A.110 and 1990 c 151 s 7 are each amended to
- 27 read as follows:
- 28 (1) ((An alcoholic or other drug addict)) A chemically dependent
- 29 person may apply for voluntary treatment directly to an approved
- 30 treatment program. If the ((proposed patient)) person is a minor or an
- 31 incompetent person, he or she, a parent, a legal guardian, or other
- 32 legal representative may make the application.
- 33 (2) Subject to rules adopted by the secretary, the administrator in
- 34 charge of an approved treatment program may determine who shall be
- 35 admitted for treatment. If a person is refused admission to an
- 36 approved treatment program, the administrator, subject to rules adopted

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- 1 by the secretary, shall refer the person to another approved treatment 2 program for treatment if possible and appropriate.
- 3 (3) If a ((patient)) person receiving inpatient ((care)) treatment 4 leaves an approved treatment program, he or she shall be encouraged to 5 consent to appropriate outpatient treatment.
- If it appears to the administrator in charge of the treatment program that the ((patient is an alcoholic or other drug addict))

  person is a chemically dependent person who requires ((help))

  additional services, the department may arrange for assistance in obtaining supportive services and residential programs.
- (4) ((If a patient)) The secretary shall adopt rules and develop working agreements which will ensure that chemically dependent persons assisted under subsection (3) of this section will be assisted in making application for medicaid, housing, and other resources necessary for continuation of services.
  - ((with or against the advice of the administrator in charge of the program,)) the department may make reasonable provisions for his or her transportation to another program or to his or her home or services provided under subsection (4) of this section. ((If the patient has no home he or she should be assisted in obtaining shelter.)) If the ((patient)) person is less than fourteen years of age or an incompetent person the request for discharge from an inpatient program shall be made by a parent, legal guardian, or other legal representative or by the minor or incompetent if he or she was the original applicant.
- **Sec. 15.** RCW 70.96A.120 and 1991 c 290 s 6 are each amended to 27 read as follows:
  - (1) An intoxicated person may come voluntarily to an approved treatment program for treatment. A person who appears to be intoxicated in a public place and to be in need of help, if ((he or she)) the person consents to the proffered help, may be assisted to his or her home, an approved treatment program, or other health facility.
  - (2) ((Except for a person who may be apprehended for possible violation of laws not relating to alcoholism, drug addiction, or intoxication and except for a person who may be apprehended for possible violation of laws relating to driving or being in physical control of a vehicle while under the influence of intoxicating liquor or any drug and except for a person who may wish to avail himself or

herself of the provisions of RCW 46.20.308, a person who appears to be 1 incapacitated or gravely disabled by alcohol or other drugs and who is 2 in a public place or who has threatened, attempted, or inflicted 3 4 physical harm on himself, herself, or another, shall be taken into 5 protective custody by a peace officer or staff designated by the county and as soon as practicable, but in no event beyond eight hours brought 6 7 to an approved treatment program for treatment. If no approved 8 treatment program is readily available he or she shall be taken to an 9 emergency medical service customarily used for incapacitated persons. 10 The peace officer or staff designated by the county, in detaining the person and in taking him or her to an approved treatment program, is 11 12 taking him or her into protective custody and shall make every reasonable effort to protect his or her health and safety. In taking 13 14 the person into protective custody, the detaining peace officer or 15 staff designated by the county may take reasonable steps including reasonable force if necessary to protect himself or herself or effect 16 17 the custody. A taking into protective custody under this section is 18 not an arrest. No entry or other record shall be made to indicate that 19 the person has been arrested or charged with a crime.))

(a) A peace officer or staff designated by the county shall take into protective custody a person who appears to be incapacitated or gravely disabled by alcohol or other psychoactive chemicals and who:

(i) Is in a public place; or

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24 <u>(ii) Has threatened, attempted, or inflicted physical harm on</u> 25 <u>himself, herself, or another; or</u>

(iii) Is not in a public place, if directed by the designated chemical dependency specialist pursuant to (b) of this subsection.

(b) A designated chemical dependency specialist may take into protective custody, or may cause a peace officer or staff designated by the county to take into protective custody, a person who is at imminent risk of harm and appears to be incapacitated or gravely disabled by alcohol or other psychoactive chemicals and who is not in a public place.

(c) This subsection does not apply to a person who:

(i) May be apprehended for possible violation of laws not relating to chemical dependency or intoxication;

(ii) May be apprehended for possible violation of laws relating to driving or being in physical control of a vehicle while under the influence of intoxicating liquor or any psychoactive chemical; or

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- 1 (iii) May wish to avail himself or herself of the provisions of RCW 46.20.308.
- 3 (d) A person taken into protective custody must be taken to an 4 approved treatment program as soon as practicable, but in any event 5 within eight hours. If no approved treatment program is available the 6 person shall be taken to an emergency medical service customarily used 7 for incapacitated persons.
- 8 (e) In taking a person into protective custody, the detaining
  9 police officer or staff designated by the county shall make every
  10 reasonable effort to protect the person's health and safety and may
  11 take reasonable steps, including reasonable force, if necessary, to
  12 protect himself or herself or to effect the custody.
- (f) Taking a person into protective custody under this subsection is not an arrest. No entry or other record shall be made to indicate that the person has been arrested or charged with a crime.
  - (3) A person who comes voluntarily or is brought to an approved treatment program shall be examined by a qualified person. ((He or she)) The person may then be admitted as a patient or referred to another health facility, which provides emergency medical treatment, where it appears that such treatment may be necessary. The referring approved treatment program shall arrange for ((his or her)) the person's transportation.
  - (4) A person who is found to be incapacitated or gravely disabled by alcohol or other ((drugs)) psychoactive chemicals at the time of ((his or her)) the person's admission or to have become incapacitated or gravely disabled at any time after his or her admission, may not be detained at the program for more than seventy-two hours after admission as a patient, unless a petition is filed under RCW 70.96A.140((, as now or hereafter amended)): PROVIDED, That the treatment personnel at an approved treatment program are authorized to use such reasonable physical restraint as may be necessary to retain an incapacitated or gravely disabled person for up to seventy-two hours from the time of admission. The seventy-two hour periods specified in this section shall be computed by excluding Saturdays, Sundays, and holidays. A person may consent to remain in the program as long as the physician in charge believes appropriate.
- (5) A person who: (a) Is not admitted to an approved treatment program, (b) is not referred to another health facility, and (c) has no funds, may be taken to his or her home((, if any)). If ((he or she))

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- the person has no home, the approved treatment program shall provide him or her with information and assistance to access available community shelter resources.
- 4 (6) If a ((<del>patient</del>)) <u>person</u> is admitted to an approved treatment 5 program, ((<del>his or her</del>)) <u>the person's</u> family or next of kin shall be 6 notified as promptly as possible by the treatment program. If an adult 7 patient who is not incapacitated <u>or gravely disabled</u> requests that 8 there be no notification, his or her request shall be respected.
- 9 (7) The peace officer, staff designated by the county, or treatment 10 facility personnel, who act in compliance with this chapter and are 11 performing in the course of their official duty are not criminally or 12 civilly liable therefor.
- 13 (8) If the person in charge of the approved treatment program 14 determines that appropriate treatment is available, the patient shall 15 be encouraged to agree to further diagnosis and appropriate voluntary 16 treatment.
- NEW SECTION. **Sec. 16.** A new section is added to chapter 70.96A RCW to read as follows:
- (1) When a designated chemical dependency specialist receives 19 information alleging that a person is incapacitated or gravely disabled 20 by alcohol or other psychoactive chemicals, if the specialist, after 21 22 investigating and evaluating the specific facts alleged and the 23 reliability and credibility of any person providing the information to 24 initiate a commitment, is satisfied that the allegations are true and 25 that the person will not voluntarily seek appropriate evaluation and treatment, the specialist may file a petition for involuntary 26 commitment. Before filing the petition, the specialist must personally 27 interview the person, unless the person refuses an interview, and 28 29 determine whether the person will voluntarily receive appropriate evaluation and treatment at an approved treatment program. 30
- 31 (2) If a petition for commitment is not filed in the case of a 32 minor, the parent, guardian, or custodian who has custody of the minor 33 may seek review of that decision made by the specialist in superior or 34 district court. The parent, guardian, or custodian shall file notice 35 with the court and provide a copy of the specialist's report.
- 36 <u>NEW SECTION.</u> **Sec. 17.** A new section is added to chapter 70.96A 37 RCW to read as follows:

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- 1 If the designated chemical dependency specialist finds that the
- 2 initial needs of a person identified under section 16 of this act would
- 3 be better served by placement within the mental health system, the
- 4 person shall be referred to an evaluation and treatment facility as
- 5 defined in RCW 71.05.020 or 71.34.020.
- 6 NEW SECTION. Sec. 18. A new section is added to chapter 70.96A
- 7 RCW to read as follows:
- 8 (1) A petition filed under section 16 of this act shall allege that
- 9 the person is chemically dependent and:
- 10 (a) Is incapacitated or gravely disabled by alcohol or other
- 11 psychoactive chemicals; or
- 12 (b) Has twice before in the preceding twelve months been admitted
- 13 for detoxification or chemical dependency treatment pursuant to RCW
- 14 70.96A.110 or 70.96A.120, and is in need of a more sustained treatment
- 15 program; or

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- (c) Presents a likelihood of serious harm.
- 17 (2) The petition shall be accompanied by a certificate of a
- 18 licensed physician who has examined the person within five days before
- 19 submission of the petition, unless the person whose commitment is
- 20 sought has refused to submit to a medical examination, in which case
- 21 the fact of refusal shall be alleged in the petition. The certificate
- 22 shall set forth the licensed physician's findings in support of the
- 23 allegations of the petition. A physician employed by the petitioning
- 24 program or the department is eligible to be the certifying physician.
- 25 (3) A refusal to undergo treatment, by itself, does not constitute
- 26 evidence of lack of judgment as to the need for treatment.
- NEW SECTION. Sec. 19. A new section is added to chapter 70.96A
- 28 RCW to read as follows:
- 29 Upon filing the petition, the court shall fix a date for a hearing
- 30 no less than two and no more than seven days after the date the
- 31 petition was filed unless the person petitioned against is presently
- 32 being detained in a program, pursuant to RCW 70.96A.120, 71.05.210, or
- 33 71.34.050, in which case the hearing shall be held within seventy-two
- 34 hours of the filing of the petition, excluding Saturdays, Sundays, and
- 35 holidays. The court may, upon motion of the person whose commitment is
- 36 sought, or upon motion of the petitioner with written permission of the
- 37 person whose commitment is sought, or his or her counsel, and upon good

- 1 cause shown, extend the date for the hearing. A copy of the petition,
- 2 the certificate, and the notice of the hearing, including the date
- 3 fixed by the court, shall be served by the designated chemical
- 4 dependency specialist on the person whose commitment is sought, his or
- 5 her next of kin, a parent or his or her legal guardian if he or she is
- 6 a minor, and any other person the court finds advisable.

whether it is within the scope of the waiver.

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- 7 <u>NEW SECTION.</u> **Sec. 20.** A new section is added to chapter 70.96A 8 RCW to read as follows:
- 9 (1)(a) At the hearing the court shall hear all relevant testimony, including, if possible, the testimony of at least one licensed 10 physician who has examined the person whose commitment is sought. The 11 12 testimony of the licensed physician may be telephonic. Communications otherwise deemed privileged under the laws of this state are deemed to 13 14 be waived in proceedings under this chapter when a court of competent 15 jurisdiction determines that the waiver is necessary to protect either 16 the detained person or the public. The waiver of a privilege under this section is limited to records or testimony relevant to evaluation 17 18 of the detained person for purposes of a proceeding under this chapter. Upon motion by the detained person, or on its own motion, the court 19 shall examine a record or testimony sought by a petitioner to determine 20
- (b) The record maker shall not be required to testify in order to 22 23 introduce medical, nursing, or psychological records of detained 24 persons so long as the requirements of RCW 5.45.020 are met. Portions 25 of the record that contain opinions as to whether the detained person is chemically dependent shall be deleted from the records unless the 26 person offering the opinions is available for cross-examination. 27 detained person shall be present unless the court believes that the 28 29 detained person's presence is likely to be injurious to himself or 30 herself. In this event the court may deem it appropriate to appoint a guardian ad litem to represent the person throughout the proceeding. 31 32 If deemed advisable, the court may examine the person out of the 33 If the person has refused to be examined by a licensed courtroom. 34 physician, the person shall be given an opportunity to be examined by a court-appointed licensed physician. If the person refuses and there 35 36 is sufficient evidence to believe that the allegations of the petition 37 are true, or if the court believes that more medical evidence is 38 necessary, the court may make a temporary order committing the person

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- 1 to an approved treatment program for a period of not more than five 2 days for purposes of a diagnostic examination.
- 3 (2) If after hearing all relevant evidence, including the results 4 of any diagnostic examination, the court finds that grounds for 5 involuntary commitment have been established by clear, cogent, and 6 convincing evidence, it shall enter an order of commitment to an 7 approved treatment program.
- 8 <u>NEW SECTION.</u> **Sec. 21.** A new section is added to chapter 70.96A 9 RCW to read as follows:
- In making a determination of whether there is a likelihood of 10 serious harm in a hearing conducted under section 19 of this act, the 11 12 court shall give great weight to any evidence before the court regarding whether the person has: (1) A recent history of one or more 13 14 violent acts; or (2) a recent history of one or more commitments under 15 this chapter or its equivalent provisions under the laws of another 16 state which were based on a likelihood of serious harm. The existence of prior violent acts or commitments under this chapter or its 17 18 equivalent shall not be the sole basis for determining whether a person 19 presents a likelihood of serious harm.
- For the purposes of this section "recent" refers to the period of time not exceeding three years prior to the current hearing.
- NEW SECTION. Sec. 22. A new section is added to chapter 70.96A RCW to read as follows:
  - (1)(a) A person committed under section 20 of this act shall remain in the program for treatment for a period of sixty days unless sooner discharged. At the end of the sixty-day period, the person shall be discharged automatically unless the program, before expiration of the period, files a petition for his or her recommitment upon the grounds set forth in section 16 of this act for a further period of ninety days unless sooner discharged.
- 31 (b) If a petition for recommitment is not filed in the case of a 32 minor, the parent, guardian, or custodian who has custody of the minor 33 may seek review of that decision made by the designated chemical 34 dependency specialist in superior or district court. The parent, 35 guardian, or custodian shall file notice with the court and provide a 36 copy of the treatment progress report.

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- 1 (c) If a person has been committed pursuant to section 18(1)(c) of 2 this act, the program shall apply for recommitment if, after 3 examination, it is determined that the likelihood still exists.
- 4 (2) Upon the filing of a petition for recommitment under subsection (1) of this section, the court shall fix a date for hearing no less 5 than two and no more than seven days after the date the petition was 6 7 filed. The court may, upon motion of the person whose commitment is sought and upon good cause shown, extend the date for the hearing. A 8 copy of the petition and of the notice of hearing, including the date 9 10 fixed by the court, shall be served by the treatment program on the 11 person whose commitment is sought, the person's next of kin, the original petitioner under section 16 of this act if different from the 12 13 petitioner for recommitment, one of the person's parents or the person's legal guardian if the person is a minor, the person's 14 15 attorney, and any other person the court finds advisable. hearing the court shall proceed as provided in section 20 of this act. 16
- NEW SECTION. Sec. 23. A new section is added to chapter 70.96A RCW to read as follows:
- 19 (1) The approved treatment program shall provide for adequate and 20 appropriate treatment of a person committed or recommitted to its 21 custody. A person committed under this section may be transferred from 22 one approved public treatment program to another if transfer is 23 medically advisable.
- (2) A person committed to the custody of a program for treatment shall be discharged at any time before the end of the period for which the person has been committed and shall be discharged by order of the court if:
- (a) The person was committed pursuant to section 18(1)(c) of this act and: (i) No longer presents a likelihood of serious harm; (ii) is unlikely to experience significant improvement in his or her condition; or (iii) is unable to obtain adequate or appropriate treatment at the facility; or
- 33 (b) The person was committed pursuant to section 18(1)(a) or (b) of 34 this act and the incapacity, grave disability, or need for treatment no 35 longer exists.
- NEW SECTION. **Sec. 24.** A new section is added to chapter 70.96A RCW to read as follows:

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- court shall inform the person whose commitment 1 recommitment 2 sought of the person's right to is contest the 3 be represented by counsel at every application, stage of any 4 proceedings relating to his or her commitment and recommitment, and have counsel appointed by the court or provided by the court, if the 5 person wants the assistance of counsel and is unable to obtain counsel. 6 7 If the court believes that the person needs the assistance of counsel, 8 the court shall require, by appointment if necessary, counsel for the 9 The person shall, if financially able, bear the costs of such 10 legal service; otherwise such legal service shall be at public expense. The person whose commitment or recommitment is sought shall be informed 11 of the right to be examined by a licensed physician of the person's 12 13 If the person is unable to obtain a licensed physician and requests examination by a physician, the court shall employ a licensed 14 15 physician.
- 16 (2) A person committed under this chapter may at any time seek to 17 be discharged from commitment by writ of habeas corpus in a court of 18 competent jurisdiction.
- 19 (3) The venue for proceedings under this section is the county in 20 which the person for whom commitment is sought resides or is present.
- NEW SECTION. Sec. 25. A new section is added to chapter 70.96A 22 RCW to read as follows:
- 23 (1) When, in the opinion of the professional person, the committed 24 person can be appropriately served by less restrictive treatment before 25 expiration of the period of commitment, the less restrictive treatment may be required as a condition for early release. The period of early 26 27 release, when added to the initial treatment period, may not exceed the period of commitment ordered by the court. If the program designated 28 29 to provide the less restrictive treatment is not the program providing 30 the initial involuntary treatment, the designated program must agree in writing to accept the person for treatment. A copy of the conditions 31 32 for early release shall be given to the person, the designated treatment program, the designated chemical dependency specialist of 33 34 original commitment, and the court of original commitment. The program designated to provide less restrictive treatment may modify the 35 36 conditions for continued release when the modifications are in the best 37 interests of the person.

- (2) If the program providing less restrictive treatment and the 1 designated chemical dependency specialist 2 determine 3 conditionally released patient is failing to adhere to the terms and 4 conditions of release, or that substantial deterioration in the person's functioning due to the use of alcohol or psychoactive 5 substances has occurred, the designated chemical dependency specialist 6 7 shall notify the court of original commitment and request a hearing to 8 be held no less than two and no more than seven days after the date of 9 the request to determine whether or not the person should be returned to more restrictive treatment. The designated chemical dependency 10 specialist shall file a petition with the court stating the facts 11 substantiating the need for the hearing along with the treatment 12 recommendations. The conditionally released person shall have the same 13 14 rights with respect to notice, hearing, and counsel as for the original involuntary treatment proceedings. 15
- 16 (3) The issues to be determined at the hearing are whether:
- 17 (a) The conditionally released person did or did not adhere to the 18 terms and conditions of the person's release to less restrictive 19 treatment;
- 20 (b) Substantial deterioration of the patient's functioning has 21 occurred; and
- (c) The conditions of release should be modified or the person should be returned to a more restrictive program.
- (4) The hearing may be waived by the person and his or her counsel, guardian, or conservator, if any, but may not be waived unless all such persons agree to the waiver. Upon waiver, the person may be returned for involuntary treatment or continued on conditional release on the same or modified conditions.
- 29 **Sec. 26.** RCW 70.96A.145 and 1993 c 137 s 1 are each amended to 30 read as follows:
- ((The prosecuting attorney of the county in which such action is taken may, at the discretion of the prosecuting attorney, represent the designated chemical dependency specialist or treatment program in judicial proceedings under RCW 70.96A.140 for the involuntary commitment or recommitment of an individual, including any judicial proceeding where the individual sought to be committed or recommitted challenges the action.))

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- In any judicial proceeding for involuntary commitment or recommitment, or in any proceeding challenging a commitment or recommitment, the prosecuting attorney for the county in which the proceeding was initiated shall represent the individuals or agencies petitioning for commitment and shall defend all challenges to the commitment.
- **Sec. 27.** RCW 70.96A.150 and 1990 c 151 s 1 are each amended to 8 read as follows:
- (1) The registration and other records of treatment programs shall remain confidential. Records may be disclosed (a) in accordance with the prior written consent of the ((patient)) person with respect to whom such record is maintained, (b) if authorized by an appropriate order of a court of competent jurisdiction granted after application showing good cause, (c) to comply with state laws mandating the reporting of suspected child abuse or neglect, or (d) when a patient commits a crime on program premises or against program personnel, or threatens to do so.
  - (2) Notwithstanding subsection (1) of this section, the secretary may receive information from patients' records for purposes of research into the causes and treatment of alcoholism and other drug addiction, verification of eligibility and appropriateness of reimbursement, and the evaluation of ((alcoholism and other drug treatment)) chemical dependency programs. Information under this subsection shall not be published in a way that discloses patients' names or otherwise discloses their identities.
  - (3) Nothing contained in this chapter relieves a person or firm from the requirements under federal regulations for the confidentiality of alcohol and drug abuse patient records. Obligations imposed on drug and alcohol treatment programs and protections afforded alcohol and drug abuse patients under federal regulations apply to all programs approved by the department under RCW 70.96A.090.
- **Sec. 28.** RCW 70.96A.160 and 1989 c 270 s 29 are each amended to 33 read as follows:
- (((1) Subject to reasonable rules regarding hours of visitation
  which the secretary may adopt, patients in any approved treatment
  program shall be granted opportunities for adequate consultation with

- 1 counsel, and for continuing contact with family and friends consistent 2 with an effective treatment program.
- 3 (2) Neither mail nor other communication to or from a patient in
  4 any approved treatment program may be intercepted, read, or censored.
  5 The secretary may adopt reasonable rules regarding the use of telephone
  6 by patients in approved treatment programs.))

The secretary shall adopt rules regarding visitation with and communication to and by patients in an approved treatment program. The rules shall permit access to counsel, contact with family and friends, and unrestricted communication to family and other persons. The rules shall be consistent with an effective treatment program and may include limitations on the use of facilities.

- 13 **Sec. 29.** RCW 70.96A.180 and 1990 c 151 s 6 are each amended to 14 read as follows:
- (1) If treatment is provided by an approved treatment program and the ((patient)) person has not paid or is unable to pay the charge therefor, the program is entitled to any payment (a) received by the ((patient)) person or to which ((he)) the person may be entitled because of the services rendered, and (b) from any public or private source available to the program because of the treatment provided to the ((patient)) person.
- (2) A ((patient)) person in a program, or the estate of the ((patient)) person, or a person obligated to provide for the cost of treatment and having sufficient financial ability, is liable to the program for cost of maintenance and treatment of the ((patient)) person therein in accordance with rates established.
- (3) The secretary shall adopt rules governing financial ability that take into consideration the income, savings, and other personal and real property of the person required to pay, and any support being furnished by ((him)) the person to any other person he or she is required by law to support.
- 32 **Sec. 30.** RCW 70.96A.265 and 1998 c 296 s 32 are each amended to 33 read as follows:
- For purposes of eligibility for medical assistance under chapter 74.09 RCW, minors in inpatient chemical dependency treatment shall be considered to be part of their parent's or legal guardian's household, unless the minor has been assessed by the department or its designee as

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- 1 likely to require such treatment for at least ninety consecutive days,
- 2 or is in out-of-home care in accordance with chapter 13.34 RCW, or the
- 3 parents are found to not be exercising responsibility for care and
- 4 control of the minor. Payment for such ((care)) treatment by the
- 5 department shall be made only in accordance with rules, guidelines, and
- 6 clinical criteria applicable to inpatient treatment of minors
- 7 established by the department.
- 8 **Sec. 31.** RCW 70.96A.300 and 1989 c 270 s 15 are each amended to 9 read as follows:
- 10 (1) A county or combination of counties acting jointly by
- 11 agreement, referred to as "county" in this chapter, may create (( $\frac{an}{a}$ )
- 12  $\frac{\text{alcoholism}}{\text{and other drug addiction}}$ ))  $\frac{\text{a chemical dependency}}{\text{board}}$
- 13 This board may also be designated as a board for other related 14 purposes.
- 15 (2) The board shall be composed of not less than seven nor more
- 16 than fifteen members, who shall be chosen for their demonstrated
- 17 concern for ((alcoholism and other drug addiction)) chemical dependency
- 18 problems. Members of the board shall be representative of the
- 19 community, shall include at least one-quarter recovered alcoholics or
- 20 other recovered drug addicts, and shall include minority group
- 21 representation. No member may be a provider of ((alcoholism and other
- 22 drug addiction)) chemical dependency treatment services. No more than
- 23 four elected or appointed city or county officials may serve on the
- 24 board at the same time. Members of the board shall serve three-year
- 25 terms and hold office until their successors are appointed and
- 26 qualified. They shall not be compensated for the performance of their
- 27 duties as members of the board, but may be reimbursed for travel
- 28 expenses.
- 29 (3) The ((alcoholism and other drug addiction)) chemical dependency
- 30 board shall:
- 31 (a) Conduct public hearings and other investigations to determine
- 32 the needs and priorities of county citizens;
- 33 (b) Prepare and recommend to the county legislative authority for
- 34 approval, all plans, budgets, and applications by the county to the
- 35 department and other state agencies on behalf of the county
- 36 ((alcoholism and other drug addiction)) chemical dependency program;
- 37 (c) Monitor the implementation of the ((alcoholism and other drug
- 38 addiction)) chemical dependency plan and evaluate the performance of

- 1 the ((alcoholism and drug addiction)) chemical dependency program at
  2 least annually;
- (d) Advise the county legislative authority and county ((alcoholism and other drug addiction)) chemical dependency program coordinator on matters relating to the ((alcoholism and other drug addiction)) chemical dependency program, including prevention and education;
- (e) Nominate individuals to the county legislative authority for the position of county ((alcoholism and other drug addiction)) chemical dependency program coordinator. The nominees should have training and experience in the administration of ((alcoholism and other drug addiction)) chemical dependency services and shall meet the minimum qualifications established by rule of the ((department)) secretary;
- (f) Carry out other duties that the ((<del>department</del>)) <u>secretary</u> may prescribe by rule.
- 15 **Sec. 32.** RCW 70.96A.310 and 1989 c 270 s 16 are each amended to 16 read as follows:
- 17 (1) The chief executive officer of the county ((alcoholism and other drug addiction)) chemical dependency program shall be the county ((alcoholism and other drug addiction)) chemical dependency program 20 coordinator. The coordinator shall:
- (a) In consultation with the county ((alcoholism and other drug addiction)) chemical dependency board, provide general supervision over the county ((alcoholism and other drug addiction)) chemical dependency program;
- (b) Prepare plans and applications for funds to support the ((alcoholism and other drug addiction)) chemical dependency program in consultation with the county ((alcoholism and other drug addiction)) chemical dependency board;
- (c) Monitor the delivery of services to assure conformance with plans and contracts and, at the discretion of the board, but at least annually, report to the ((alcoholism and other drug addiction)) chemical dependency board the results of the monitoring;
- (d) Provide staff support to the county ((alcoholism and other drug addiction)) chemical dependency board.

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(2) The county ((alcoholism and other drug addiction)) chemical dependency program coordinator shall be appointed by the county legislative authority from nominations by the ((alcoholism and other drug addiction program)) chemical dependency board. The coordinator

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- 1 may serve on either a full-time or part-time basis. Only with the
- 2 prior approval of the secretary may the coordinator be an employee of
- 3 a government or private agency under contract with the department to
- 4 provide ((alcoholism or other drug addiction)) chemical dependency
- 5 services.
- 6 **Sec. 33.** RCW 70.96A.320 and 1990 c 151 s 9 are each amended to 7 read as follows:
- 8 (1) A county legislative authority, or two or more counties acting
- 9 jointly, may establish ((an alcoholism and other drug addiction)) a
- 10 chemical dependency program. If two or more counties jointly establish
- 11 the program, they shall designate one county to provide administrative
- 12 and financial services.
- 13 (2) To be eligible for funds from the department for the support of
- 14 the county ((alcoholism and other drug addiction)) chemical dependency
- 15 program, the county legislative authority shall establish a ((county
- 16 alcoholism and other drug addiction)) chemical dependency board under
- 17 RCW 70.96A.300 and appoint a county ((alcoholism and other drug
- 18 addiction)) chemical dependency program coordinator under RCW
- 19 70.96A.310.
- 20 (3) The county legislative authority may apply to the department
- 21 for financial support for the county chemical dependency program ((of
- 22 alcoholism and other drug addiction)). To receive financial support,
- 23 the county legislative authority shall submit a plan that ((meets the
- 24 following conditions)):
- 25 (a)  $((\frac{\text{It shall}}{\text{Shall}}))$  Describes the services and activities to be
- 26 provided;
- 27 (b) ((<del>It shall</del>)) <u>Includes</u> anticipated expenditures and revenues;
- 28 (c) ((<del>It shall be</del>)) <u>Is</u> prepared by the county ((<del>alcoholism and</del>
- 29 other drug addiction program)) chemical dependency board and be adopted
- 30 by the county legislative authority;
- 31 (d) ((It shall)) Reflects maximum effective use of existing
- 32 services and programs; and
- (e) ((It shall)) Meets other conditions that the secretary may
- 34 require.
- 35 (4) The county may accept and spend gifts, grants, and fees, from
- 36 public and private sources, to implement its chemical dependency
- 37 program ((of alcoholism and other drug addiction)).

- 1 (5) The county may subcontract for detoxification, residential 2 treatment, or outpatient treatment with <u>approved</u> treatment programs 3 ((that are approved treatment programs)). The county may subcontract 4 for other services with individuals or organizations approved by the 5 department.
- 6 (6) To continue to be eligible for financial support from the
  7 department for the county ((alcoholism and other drug addiction))
  8 chemical dependency program, an increase in state financial support
  9 shall not be used to supplant local funds from a source that was used
  10 to support the county ((alcoholism and other drug addiction)) chemical
  11 dependency program before the effective date of the increase.
- NEW SECTION. **Sec. 34.** A new section is added to chapter 70.96A RCW to read as follows:
- The department shall develop state-wide protocols to be utilized by 14 15 persons and county-designated chemical dependency specialists in administration of this chapter and chapter 74.50 RCW. 16 The protocols shall be updated at least every three years. 17 18 protocols shall provide uniform development and application of criteria 19 in evaluation and commitment recommendations, of persons who have, or are alleged to have, chemical dependency disorders and are subject to 20 21 this chapter.
- The initial protocols shall be developed not later than September 1, 2000. The department shall develop and update the protocols in consultation with representatives of county-designated chemical dependency specialists, local government, law enforcement, county and city prosecutors, public defenders, and groups concerned with chemical dependency. The protocols shall be submitted to the governor and legislature upon adoption by the department.
- 29 **Sec. 35.** RCW 70.96A.430 and 1989 c 271 s 308 are each reenacted to 30 read as follows:
- The department shall not refuse admission for diagnosis, evaluation, guidance or treatment to any applicant because it is determined that the applicant is financially unable to contribute fully or in part to the cost of any services or facilities available under the program on alcoholism.
- The department may limit admissions of such applicants or modify its programs in order to ensure that expenditures for services or

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- 1 programs do not exceed amounts appropriated by the legislature and are
- 2 allocated by the department for such services or programs. The
- 3 department may establish admission priorities in the event that the
- 4 number of eligible applicants exceeds the limits set by the department.
- 5 <u>NEW SECTION.</u> **Sec. 36.** RCW 70.96A.430 is recodified to immediately
- 6 follow RCW 70.96A.180.
- NEW SECTION. Sec. 37. The following acts or parts of acts are 8 each repealed:
- 9 (1) RCW 70.96A.060 (Interdepartmental coordinating committee) and
- 10 1989 c 270 s 8, 1979 c 158 s 220, & 1972 ex.s. c 122 s 6;
- 11 (2) RCW 70.96A.080 (Comprehensive program for treatment--Regional
- 12 facilities) and 1989 c 270 s 18 & 1972 ex.s. c 122 s 8;
- 13 (3) RCW 70.96A.140 (Involuntary commitment of persons incapacitated
- 14 by chemical dependency) and 1995 c 312 s 49, 1993 c 362 s 1, 1991 c 364
- 15 s 10, 1990 c 151 s 3, 1989 c 271 s 307, 1987 c 439 s 14, 1977 ex.s. c
- 16 129 s 1, 1974 ex.s. c 175 s 2, & 1972 ex.s. c 122 s 14; and
- 17 (4) RCW 70.96.150 (Inability to contribute to cost no bar to
- 18 admission--Department may limit admissions) and 1989 c 271 s 308 & 1959
- 19 c 85 s 15.
- NEW SECTION. Sec. 38. This act takes effect January 1, 2001.

--- END ---