SENATE BILL 6205

State of Washington 62nd Legislature 2012 Regular Session

By Senators Hargrove, Stevens, and Regala

Read first time 01/16/12. Referred to Committee on Human Services & Corrections.

AN ACT Relating to the use of evidence-based practices for the delivery of services to children and juveniles; amending RCW 13.40.020 and 71.24.025; reenacting and amending RCW 74.13.020; adding a new section to chapter 13.40 RCW; adding a new section to chapter 71.24 RCW; adding a new section to chapter 74.13 RCW; adding new sections to chapter 43.20A RCW; and creating new sections.

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

8 <u>NEW SECTION.</u> Sec. 1. (1) The legislature recognizes that the use 9 of evidence-based practices plays a very important role in the delivery 10 of services to children and juveniles. Especially in times of 11 diminished resources, it is critical to fund practices which are known 12 to provide desired outcomes rather than continue to expend moneys on 13 programs that may be familiar but less effective.

14 (2) Evidence-based practices or programs are those that are 15 cost-effective and include at least two randomized or statistically 16 controlled evaluations across heterogeneous populations demonstrating 17 that the program or practice is effective in obtaining improved 18 outcomes for its intended population. 1 (3) The legislature intends that prevention and intervention 2 services delivered to children and juveniles in the areas of mental 3 health, child welfare, and juvenile justice must be primarily evidence-4 based, and it is anticipated that such services will be provided in a 5 manner that is culturally competent.

б (4) The legislature also acknowledges that the availability of 7 evidence-based practices in each of the areas of mental health, child 8 welfare, juvenile justice, and in different geographic areas of the state may vary. Thus, it would be unwise to require one hundred 9 10 percent use of evidence-based practices. It is the intention of the legislature to require a graduated approach for each of these areas, 11 12 the use of emerging best practices or promising practices, rather than evidence-based practices, is also necessary to the graduated goals of 13 14 increasing the number of evidence-based practices.

(5) It is the intent of the legislature that the department of 15 social and health services will ensure that an expansion of the use of 16 17 evidence-based practices be accomplished using existing resources by 18 coordinating the purchase of evidence-based services, the development of a trained workforce and the implementation of a system of care that 19 supports evidence-based practices by the juvenile rehabilitation 20 21 administration, the division of behavioral health and recovery 22 services, and the children's administration.

23 (6) The legislature recognizes that the juvenile justice system has 24 employed evidence-based practices more extensively than agencies that provide mental health and child welfare services, and the legislature 25 26 will require the juvenile rehabilitation administration to meet its 27 goals for the use of evidence-based practices in its contracted 28 programs within four years. Agencies that provide children's mental 29 health and child welfare services must meet their goals regarding the 30 use of evidence-based practices in contracted programs within six 31 years.

32 (7) The legislature recognizes that in order to effectively provide 33 evidence-based practices, contractors must have a workforce trained in 34 these programs, and there must be an evaluation of the outcomes from 35 their use.

36 **Sec. 2.** RCW 13.40.020 and 2010 c 181 s 10 are each amended to read 37 as follows:

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For the purposes of this chapter:

2 (1) "Community-based rehabilitation" means one or more of the Employment; attendance of information classes; literacy 3 following: 4 classes; counseling, outpatient substance abuse treatment programs, 5 outpatient mental health programs, anger management classes, education 6 or outpatient treatment programs to prevent animal cruelty, or other 7 services; or attendance at school or other educational programs 8 appropriate for the juvenile as determined by the school district. 9 Placement in community-based rehabilitation programs is subject to available funds; 10

11 (2) "Community-based sanctions" may include one or more of the 12 following:

13 (a) A fine, not to exceed five hundred dollars;

14 (b) Community restitution not to exceed one hundred fifty hours of 15 community restitution;

16 (3) "Community restitution" means compulsory service, without 17 compensation, performed for the benefit of the community by the 18 offender as punishment for committing an offense. Community 19 restitution may be performed through public or private organizations or 20 through work crews;

21 (4) "Community supervision" means an order of disposition by the 22 court of an adjudicated youth not committed to the department or an 23 order granting a deferred disposition. A community supervision order 24 for a single offense may be for a period of up to two years for a sex offense as defined by RCW 9.94A.030 and up to one year for other 25 26 offenses. As a mandatory condition of any term of community 27 supervision, the court shall order the juvenile to refrain from committing new offenses. As a mandatory condition of community 28 supervision, the court shall order the juvenile to comply with the 29 30 mandatory school attendance provisions of chapter 28A.225 RCW and to inform the school of the existence of this requirement. Community 31 32 supervision is an individualized program comprised of one or more of 33 the following:

34 (a) Community-based sanctions;

35 (b) Community-based rehabilitation;

- 36 (c) Monitoring and reporting requirements;
- 37 (d) Posting of a probation bond;

(5) "Confinement" means physical custody by the department of 1 social and health services in a facility operated by or pursuant to a 2 contract with the state, or physical custody in a detention facility 3 4 operated by or pursuant to a contract with any county. The county may 5 operate or contract with vendors to operate county detention facilities. The department may operate or contract to operate б detention facilities for juveniles committed to the department. 7 8 Pretrial confinement or confinement of less than thirty-one days 9 imposed as part of a disposition or modification order may be served 10 consecutively or intermittently, in the discretion of the court;

11 (6) "Court," when used without further qualification, means the 12 juvenile court judge(s) or commissioner(s);

13 (7) "Criminal history" includes all criminal complaints against the 14 respondent for which, prior to the commission of a current offense:

(a) The allegations were found correct by a court. If a respondent is convicted of two or more charges arising out of the same course of conduct, only the highest charge from among these shall count as an offense for the purposes of this chapter; or

(b) The criminal complaint was diverted by a prosecutor pursuant to the provisions of this chapter on agreement of the respondent and after an advisement to the respondent that the criminal complaint would be considered as part of the respondent's criminal history. A successfully completed deferred adjudication that was entered before July 1, 1998, or a deferred disposition shall not be considered part of the respondent's criminal history;

26 (8) "Department" means the department of social and health 27 services;

(9) "Detention facility" means a county facility, paid for by the county, for the physical confinement of a juvenile alleged to have committed an offense or an adjudicated offender subject to a disposition or modification order. "Detention facility" includes county group homes, inpatient substance abuse programs, juvenile basic training camps, and electronic monitoring;

(10) "Diversion unit" means any probation counselor who enters into a diversion agreement with an alleged youthful offender, or any other person, community accountability board, youth court under the supervision of the juvenile court, or other entity except a law enforcement official or entity, with whom the juvenile court

administrator has contracted to arrange and supervise such agreements 1 2 pursuant to RCW 13.40.080, or any person, community accountability board, or other entity specially funded by the legislature to arrange 3 4 and supervise diversion agreements in accordance with the requirements 5 of this chapter. For purposes of this subsection, "community accountability board" means a board comprised of members of the local 6 7 community in which the juvenile offender resides. The superior court 8 shall appoint the members. The boards shall consist of at least three and not more than seven members. If possible, the board should include 9 10 a variety of representatives from the community, such as a law enforcement officer, teacher or school administrator, high school 11 12 student, parent, and business owner, and should represent the cultural diversity of the local community; 13

14 (11) "Foster care" means temporary physical care in a foster family 15 home or group care facility as defined in RCW 74.15.020 and licensed by 16 the department, or other legally authorized care;

17 (12) "Institution" means a juvenile facility established pursuant18 to chapters 72.05 and 72.16 through 72.20 RCW;

19 (13) "Intensive supervision program" means a parole program that 20 requires intensive supervision and monitoring, offers an array of 21 individualized treatment and transitional services, and emphasizes 22 community involvement and support in order to reduce the likelihood a 23 juvenile offender will commit further offenses;

(14) "Juvenile," "youth," and "child" mean any individual who is under the chronological age of eighteen years and who has not been previously transferred to adult court pursuant to RCW 13.40.110, unless the individual was convicted of a lesser charge or acquitted of the charge for which he or she was previously transferred pursuant to RCW 13.40.110 or who is not otherwise under adult court jurisdiction;

30 (15) "Juvenile offender" means any juvenile who has been found by 31 the juvenile court to have committed an offense, including a person 32 eighteen years of age or older over whom jurisdiction has been extended 33 under RCW 13.40.300;

(16) "Labor" means the period of time before a birth during which
contractions are of sufficient frequency, intensity, and duration to
bring about effacement and progressive dilation of the cervix;

37 (17) "Local sanctions" means one or more of the following: (a) 0-

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30 days of confinement; (b) 0-12 months of community supervision; (c)
 0-150 hours of community restitution; or (d) \$0-\$500 fine;

3 (18) "Manifest injustice" means a disposition that would either
4 impose an excessive penalty on the juvenile or would impose a serious,
5 and clear danger to society in light of the purposes of this chapter;

(19) "Monitoring and reporting requirements" means one or more of 6 7 the following: Curfews; requirements to remain at home, school, work, 8 or court-ordered treatment programs during specified hours; restrictions from leaving or entering specified geographical areas; 9 10 requirements to report to the probation officer as directed and to remain under the probation officer's supervision; and other conditions 11 or limitations as the court may require which may not include 12 13 confinement;

14 (20) "Offense" means an act designated a violation or a crime if 15 committed by an adult under the law of this state, under any ordinance 16 of any city or county of this state, under any federal law, or under 17 the law of another state if the act occurred in that state;

18 (21) "Physical restraint" means the use of any bodily force or 19 physical intervention to control a juvenile offender or limit a 20 juvenile offender's freedom of movement in a way that does not involve 21 a mechanical restraint. Physical restraint does not include momentary 22 periods of minimal physical restriction by direct person-to-person 23 contact, without the aid of mechanical restraint, accomplished with 24 limited force and designed to:

(a) Prevent a juvenile offender from completing an act that would
 result in potential bodily harm to self or others or damage property;

(b) Remove a disruptive juvenile offender who is unwilling to leavethe area voluntarily; or

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(c) Guide a juvenile offender from one location to another;

30 (22) "Postpartum recovery" means (a) the entire period a woman or 31 youth is in the hospital, birthing center, or clinic after giving birth 32 and (b) an additional time period, if any, a treating physician 33 determines is necessary for healing after the youth leaves the 34 hospital, birthing center, or clinic;

35 (23) "Probation bond" means a bond, posted with sufficient security 36 by a surety justified and approved by the court, to secure the 37 offender's appearance at required court proceedings and compliance with 38 court-ordered community supervision or conditions of release ordered

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pursuant to RCW 13.40.040 or 13.40.050. It also means a deposit of cash or posting of other collateral in lieu of a bond if approved by the court;

4 (24) "Respondent" means a juvenile who is alleged or proven to have 5 committed an offense;

(25) "Restitution" means financial reimbursement by the offender to б 7 the victim, and shall be limited to easily ascertainable damages for 8 injury to or loss of property, actual expenses incurred for medical treatment for physical injury to persons, lost wages resulting from 9 10 physical injury, and costs of the victim's counseling reasonably related to the offense. Restitution shall not include reimbursement 11 12 for damages for mental anguish, pain and suffering, or other intangible 13 losses. Nothing in this chapter shall limit or replace civil remedies or defenses available to the victim or offender; 14

15 (26) "Restraints" means anything used to control the movement of a 16 person's body or limbs and includes:

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(a) Physical restraint; or

18 (b) Mechanical device including but not limited to: Metal 19 handcuffs, plastic ties, ankle restraints, leather cuffs, other 20 hospital-type restraints, tasers, or batons;

21 (27) "Secretary" means the secretary of the department of social 22 and health services. "Assistant secretary" means the assistant 23 secretary for juvenile rehabilitation for the department;

(28) "Services" means services which provide alternatives to incarceration for those juveniles who have pleaded or been adjudicated guilty of an offense or have signed a diversion agreement pursuant to this chapter;

(29) "Sex offense" means an offense defined as a sex offense in RCW
9.94A.030;

30 (30) "Sexual motivation" means that one of the purposes for which 31 the respondent committed the offense was for the purpose of his or her 32 sexual gratification;

33 (31) "Surety" means an entity licensed under state insurance laws 34 or by the state department of licensing, to write corporate, property, 35 or probation bonds within the state, and justified and approved by the 36 superior court of the county having jurisdiction of the case;

37 (32) "Transportation" means the conveying, by any means, of an38 incarcerated pregnant youth from the institution or detention facility

to another location from the moment she leaves the institution or detention facility to the time of arrival at the other location, and includes the escorting of the pregnant incarcerated youth from the institution or detention facility to a transport vehicle and from the vehicle to the other location;

6 (33) "Violation" means an act or omission, which if committed by an 7 adult, must be proven beyond a reasonable doubt, and is punishable by 8 sanctions which do not include incarceration;

9 (34) "Violent offense" means a violent offense as defined in RCW 10 9.94A.030;

11 (35) "Youth court" means a diversion unit under the supervision of 12 the juvenile court;

13 (36) "Evidence-based" means a program or practice that is cost-14 effective and includes at least two randomized or statistically 15 controlled evaluations that have demonstrated improved outcomes for its 16 intended population.

17 <u>NEW SECTION.</u> Sec. 3. A new section is added to chapter 13.40 RCW 18 to read as follows:

(1) The department, and any other state agency that administers 19 20 funds related to juvenile offenders, shall, in accordance with the 21 graduated requirements of subsection (4) of this section, expend state 22 funds on juvenile justice programs or programs related to the 23 prevention, treatment, or care of juvenile offenders that are evidence-24 based, as identified by the Washington state institute of public policy 25 and the University of Washington evidence-based practice institute. In 26 collaboration with the University of Washington evidence-based practice 27 institute, the department shall initiate or continue the review of sound, promising, and research-based practices with the goal of 28 29 identifying and expanding the number and type of available evidencebased programs that are cost-beneficial and effective at reducing 30 31 criminal recidivism of the program participants.

32 (2) Implementation of evidence-based programs must be coordinated 33 with the University of Washington evidence-based practice institute and 34 must be accompanied by monitoring and quality control procedures 35 designed to ensure that they are delivered with fidelity to the program 36 and that corrective action must be taken when those standards are not 37 met.

(3) When necessary to meet the requirements of subsection (4) of 1 2 this section, the department shall include in its contracts with providers of services related to prevention, treatment, or care of 3 4 juvenile offenders a provision affirming that the provider shall provide evidence-based services, and that the services must be provided 5 by staff who are trained in providing evidence-based services, and the б 7 services must be accompanied by monitoring and quality control 8 procedures that ensure that they are delivered according to the applicable standards. The department may use performance requirements 9 10 or incentives in determining the amounts payable in contracts or 11 grants.

12 (4) In order to prevent undue disturbance to existing department 13 programs, the department shall ensure that no less than sixty-five percent of the funds expended for services to juvenile offenders meet 14 the requirements of this section during fiscal years 2014 and 2015 and 15 that no less than seventy-five percent of the funds expended meet the 16 17 requirements of this section during fiscal years 2016 and 2017. The 18 determination of the amount of funds expended for evidence-based 19 services must include program costs necessary to directly implement evidence-based programs, including discrete staffing and training costs 20 21 which would not have been incurred but for implementation of an 22 evidence-based program. Funds expended for indirect administrative 23 costs may not be included in the determination of amounts expended for 24 evidence-based services.

25 **Sec. 4.** RCW 71.24.025 and 2008 c 261 s 2 are each amended to read 26 as follows:

Unless the context clearly requires otherwise, the definitions inthis section apply throughout this chapter.

29 (1) "Acutely mentally ill" means a condition which is limited to a 30 short-term severe crisis episode of:

(a) A mental disorder as defined in RCW 71.05.020 or, in the case
 of a child, as defined in RCW 71.34.020;

33 (b) Being gravely disabled as defined in RCW 71.05.020 or, in the 34 case of a child, a gravely disabled minor as defined in RCW 71.34.020; 35 or

36 (c) Presenting a likelihood of serious harm as defined in RCW
 37 71.05.020 or, in the case of a child, as defined in RCW 71.34.020.

1 (2) "Available resources" means funds appropriated for the purpose 2 of providing community mental health programs, federal funds, except those provided according to Title XIX of the Social Security Act, and 3 state funds appropriated under this chapter or chapter 71.05 RCW by the 4 5 legislature during any biennium for the purpose of providing residential services, resource management services, community support 6 7 services, and other mental health services. This does not include funds appropriated for the purpose of operating and administering the 8 state psychiatric hospitals. 9

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(3) "Child" means a person under the age of eighteen years.

(4) "Chronically mentally ill adult" or "adult who is chronically mentally ill" means an adult who has a mental disorder and meets at least one of the following criteria:

14 (a) Has undergone two or more episodes of hospital care for a15 mental disorder within the preceding two years; or

(b) Has experienced a continuous psychiatric hospitalization or residential treatment exceeding six months' duration within the preceding year; or

(c) Has been unable to engage in any substantial gainful activity by reason of any mental disorder which has lasted for a continuous period of not less than twelve months. "Substantial gainful activity" shall be defined by the department by rule consistent with Public Law 92-603, as amended.

(5) "Clubhouse" means a community-based program that provides rehabilitation services and is certified by the department of social and health services.

(6) "Community mental health program" means all mental health
 services, activities, or programs using available resources.

(7) "Community mental health service delivery system" means public or private agencies that provide services specifically to persons with mental disorders as defined under RCW 71.05.020 and receive funding from public sources.

"Community support services" 33 (8) means services authorized, 34 planned, and coordinated through resource management services 35 including, at a minimum, assessment, diagnosis, emergency crisis 36 intervention available twenty-four hours, seven days а week, 37 prescreening determinations for persons who are mentally ill being 38 considered for placement in nursing homes as required by federal law,

screening for patients being considered for admission to residential 1 2 services, diagnosis and treatment for children who are acutely mentally ill or severely emotionally disturbed discovered under screening 3 through the federal Title XIX early and periodic screening, diagnosis, 4 and treatment program, investigation, legal, and other nonresidential 5 services under chapter 71.05 RCW, case management services, psychiatric б 7 treatment including medication supervision, counseling, psychotherapy, 8 assuring transfer of relevant patient information between service providers, recovery services, and other services determined by regional 9 10 support networks.

(9) "Consensus-based" means a program or practice that has general support among treatment providers and experts, based on experience or professional literature, and may have anecdotal or case study support, or that is agreed but not possible to perform studies with random assignment and controlled groups.

16 (10) "County authority" means the board of county commissioners, 17 county council, or county executive having authority to establish a 18 community mental health program, or two or more of the county 19 authorities specified in this subsection which have entered into an 20 agreement to provide a community mental health program.

21 (11) "Department" means the department of social and health 22 services.

(12) "Designated mental health professional" means a mental health professional designated by the county or other authority authorized in rule to perform the duties specified in this chapter.

(13) "Emerging best practice" or "promising practice" means a
 practice that presents, based on preliminary information, potential for
 becoming a research-based or consensus-based practice.

(14) "Evidence-based" means a program or practice that ((has had multiple site random controlled trials across heterogeneous populations demonstrating that the program or practice is effective for the)) is cost-effective and includes at least two randomized or statistically controlled evaluations that have demonstrated improved outcomes for its intended population.

35 (15) "Licensed service provider" means an entity licensed according 36 to this chapter or chapter 71.05 RCW or an entity deemed to meet state 37 minimum standards as a result of accreditation by a recognized 38 behavioral health accrediting body recognized and having a current agreement with the department, that meets state minimum standards or persons licensed under chapter 18.57, 18.71, 18.83, or 18.79 RCW, as it applies to registered nurses and advanced registered nurse practitioners.

5 (16) "Long-term inpatient care" means inpatient services for persons committed for, or voluntarily receiving intensive treatment 6 7 for, periods of ninety days or greater under chapter 71.05 RCW. "Long-8 term inpatient care" as used in this chapter does not include: (a) Services for individuals committed under chapter 71.05 RCW who are 9 10 receiving services pursuant to a conditional release or a court-ordered less restrictive alternative to detention; or (b) services for 11 12 individuals voluntarily receiving less restrictive alternative 13 treatment on the grounds of the state hospital.

14 (17) "Mental health services" means all services provided by 15 regional support networks and other services provided by the state for 16 persons who are mentally ill.

(18) "Mentally ill persons," "persons who are mentally ill," and the mentally ill" mean persons and conditions defined in subsections (1), (4), (27), and (28) of this section.

(19) "Recovery" means the process in which people are able to live,
work, learn, and participate fully in their communities.

(20) "Regional support network" means a county authority or group
 of county authorities or other entity recognized by the secretary in
 contract in a defined region.

(21) "Registration records" include all the records of the department, regional support networks, treatment facilities, and other persons providing services to the department, county departments, or facilities which identify persons who are receiving or who at any time have received services for mental illness.

30 (22) "Research-based" means a program or practice that has some 31 research demonstrating effectiveness, but that does not yet meet the 32 standard of evidence-based practices.

33 (23) "Residential services" means a complete range of residences 34 and supports authorized by resource management services and which may 35 involve a facility, a distinct part thereof, or services which support 36 community living, for persons who are acutely mentally ill, adults who 37 are chronically mentally ill, children who are severely emotionally 38 disturbed, or adults who are seriously disturbed and determined by the

regional support network to be at risk of becoming acutely or 1 2 chronically mentally ill. The services shall include at least evaluation and treatment services as defined in chapter 71.05 RCW, 3 4 acute crisis respite care, long-term adaptive and rehabilitative care, and supervised and supported living services, and shall also include 5 any residential services developed to service persons who are mentally 6 ill in nursing homes, boarding homes, and adult family homes, and may 7 8 include outpatient services provided as an element in a package of 9 services in a supported housing model. Residential services for children in out-of-home placements related to their mental disorder 10 11 shall not include the costs of food and shelter, except for children's 12 long-term residential facilities existing prior to January 1, 1991.

13 (24) "Resilience" means the personal and community qualities that 14 enable individuals to rebound from adversity, trauma, tragedy, threats, 15 or other stresses, and to live productive lives.

"Resource 16 (25)management services" mean the planning, coordination, and authorization of residential services and community 17 support services administered pursuant to an individual service plan 18 19 for: (a) Adults and children who are acutely mentally ill; (b) adults 20 who are chronically mentally ill; (c) children who are severely 21 emotionally disturbed; or (d) adults who are seriously disturbed and 22 determined solely by a regional support network to be at risk of 23 becoming acutely or chronically mentally ill. Such planning, 24 coordination, and authorization shall include mental health screening for children eligible under the federal Title XIX early and periodic 25 26 screening, diagnosis, and treatment program. Resource management 27 services include seven day a week, twenty-four hour a day availability of information regarding enrollment of adults and children who are 28 mentally ill in services and their individual service plan to 29 30 designated mental health professionals, evaluation and treatment 31 facilities, and others as determined by the regional support network.

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(26) "Secretary" means the secretary of social and health services.

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(27) "Seriously disturbed person" means a person who:

(a) Is gravely disabled or presents a likelihood of serious harm to
himself or herself or others, or to the property of others, as a result
of a mental disorder as defined in chapter 71.05 RCW;

37 (b) Has been on conditional release status, or under a less

1 restrictive alternative order, at some time during the preceding two
2 years from an evaluation and treatment facility or a state mental
3 health hospital;

4 (c) Has a mental disorder which causes major impairment in several
5 areas of daily living;

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(d) Exhibits suicidal preoccupation or attempts; or

7 (e) Is a child diagnosed by a mental health professional, as 8 defined in chapter 71.34 RCW, as experiencing a mental disorder which 9 is clearly interfering with the child's functioning in family or school 10 or with peers or is clearly interfering with the child's personality 11 development and learning.

(28) "Severely emotionally disturbed child" or "child who is severely emotionally disturbed" means a child who has been determined by the regional support network to be experiencing a mental disorder as defined in chapter 71.34 RCW, including those mental disorders that result in a behavioral or conduct disorder, that is clearly interfering with the child's functioning in family or school or with peers and who meets at least one of the following criteria:

(a) Has undergone inpatient treatment or placement outside of thehome related to a mental disorder within the last two years;

(b) Has undergone involuntary treatment under chapter 71.34 RCWwithin the last two years;

(c) Is currently served by at least one of the following childserving systems: Juvenile justice, child-protection/welfare, special education, or developmental disabilities;

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(d) Is at risk of escalating maladjustment due to:

(i) Chronic family dysfunction involving a caretaker who ismentally ill or inadequate;

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(ii) Changes in custodial adult;

30 (iii) Going to, residing in, or returning from any placement 31 outside of the home, for example, psychiatric hospital, short-term 32 inpatient, residential treatment, group or foster home, or a 33 correctional facility;

34 (iv) Subject to repeated physical abuse or neglect;

35 (v) Drug or alcohol abuse; or

36 (vi) Homelessness.

37 (29) "State minimum standards" means minimum requirements38 established by rules adopted by the secretary and necessary to

implement this chapter for: (a) Delivery of mental health services;
(b) licensed service providers for the provision of mental health
services; (c) residential services; and (d) community support services
and resource management services.

(30) "Treatment records" include registration and all other records 5 б concerning persons who are receiving or who at any time have received 7 services for mental illness, which are maintained by the department, by 8 support networks and their staffs, and by treatment regional 9 Treatment records do not include notes or records facilities. 10 maintained for personal use by a person providing treatment services 11 for the department, regional support networks, or a treatment facility 12 if the notes or records are not available to others.

(31) "Tribal authority," for the purposes of this section and RCW 71.24.300 only, means: The federally recognized Indian tribes and the major Indian organizations recognized by the secretary insofar as these organizations do not have a financial relationship with any regional support network that would present a conflict of interest.

18 <u>NEW SECTION.</u> Sec. 5. A new section is added to chapter 71.24 RCW 19 to read as follows:

20 (1) The department, and any other state agency that administers 21 funds related to prevention, treatment, and care of recipients of 22 children's mental health services, shall, in accordance with the 23 graduated requirements of subsection (4) of this section, expend state 24 funds on children's mental health programs or programs related to the 25 prevention, treatment or care of recipients of children's mental health 26 services that are evidence-based, as identified by the Washington state 27 institute of public policy and the University of Washington evidence-based practice institute. In collaboration with 28 the 29 University of Washington evidence-based practice institute, the department shall initiate or continue the ongoing review of sound, 30 31 promising, and research-based practices with the goal of identifying 32 and expanding the number and type of available evidence-based programs that are cost-beneficial and effective at improving mental health 33 34 outcomes for participants.

35 (2) Implementation of evidence-based programs must be coordinated 36 with the University of Washington evidence-based practice institute and 37 must be accompanied by monitoring and quality control procedures 1 designed to ensure that they are delivered with fidelity to the program 2 and that corrective action must be taken when those standards are not 3 met.

4 (3) When necessary to meet the requirements of subsection (4) of this section, the department shall include in its contracts with 5 providers of services related to prevention, treatment, or care of б recipients of children's mental health services a provision affirming 7 8 that the provider shall provide evidence-based services, and that the 9 services must be provided by staff who are trained in providing 10 evidence-based services, and the services must be accompanied by 11 monitoring and quality control procedures that ensure that they are 12 delivered according to the applicable standards. The department may 13 use performance requirements or incentives in determining the amounts 14 payable in contracts or grants.

15 (4) In order to prevent undue disturbance to existing department programs, the department shall ensure that no less than fifty percent 16 of the funds expended for recipients of children's mental health 17 18 services meet the requirements of this section during fiscal years 2014 19 and 2015, that no less than sixty-five percent of the funds expended meet the requirements of this section during fiscal years 2016 and 20 21 2017, and that seventy-five percent of the funds expended meet the 22 requirements of this section during fiscal years 2018 and 2019. The 23 determination of the amount of funds expended for evidence-based services must include program costs necessary to directly implement 24 evidence-based programs, including discrete staffing and training costs 25 26 which would not have been incurred but for implementation of an 27 evidence-based program. Funds expended for indirect administrative costs may not be included in the determination of amounts expended for 28 29 evidence-based services.

30 Sec. 6. RCW 74.13.020 and 2011 c 330 s 4 are each reenacted and 31 amended to read as follows:

32 For purposes of this chapter:

(1) "Case management" means the management of services delivered to children and families in the child welfare system, including permanency services, caseworker-child visits, family visits, the convening of family group conferences, the development and revision of the case plan, the coordination and monitoring of services needed by the child and family, and the assumption of court-related duties, excluding legal representation, including preparing court reports, attending judicial hearings and permanency hearings, and ensuring that the child is progressing toward permanency within state and federal mandates, including the Indian child welfare act.

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(2) "Child" means:

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(a) A person less than eighteen years of age; or

8 (b) A person age eighteen to twenty-one years who is eligible to 9 receive the extended foster care services authorized under RCW 10 74.13.031.

11 (3) "Child protective services" has the same meaning as in RCW 12 26.44.020.

13 (4) "Child welfare services" means social services including 14 voluntary and in-home services, out-of-home care, case management, and 15 adoption services which strengthen, supplement, or substitute for, 16 parental care and supervision for the purpose of:

(a) Preventing or remedying, or assisting in the solution of
problems which may result in families in conflict, or the neglect,
abuse, exploitation, or criminal behavior of children;

20 (b) Protecting and caring for dependent, abused, or neglected 21 children;

(c) Assisting children who are in conflict with their parents, and assisting parents who are in conflict with their children, with services designed to resolve such conflicts;

(d) Protecting and promoting the welfare of children, including the
 strengthening of their own homes where possible, or, where needed;

(e) Providing adequate care of children away from their homes in foster family homes or day care or other child care agencies or facilities.

30 "Child welfare services" does not include child protection 31 services.

32 (5) "Committee" means the child welfare transformation design33 committee.

34 (6) "Department" means the department of social and health 35 services.

36 (7) "Extended foster care services" means residential and other 37 support services the department is authorized to provide to foster 38 children. These services include, but are not limited to, placement in

licensed, relative, or otherwise approved care, or supervised independent living settings; assistance in meeting basic needs; independent living services; medical assistance; and counseling or treatment.

5 (8) "Measurable effects" means a statistically significant change 6 which occurs as a result of the service or services a supervising 7 agency is assigned in a performance-based contract, in time periods 8 established in the contract.

9 (9) "Out-of-home care services" means services provided after the shelter care hearing to or for children in out-of-home care, as that 10 11 term is defined in RCW 13.34.030, and their families, including the 12 recruitment, training, and management of foster parents, the 13 recruitment of adoptive families, and the facilitation of the adoption process, family reunification, independent living, emergency shelter, 14 15 residential group care, and foster care, including relative placement.

16 (10) "Performance-based contracting" means the structuring of all 17 aspects of the procurement of services around the purpose of the work 18 to be performed and the desired results with the contract requirements 19 set forth in clear, specific, and objective terms with measurable 20 outcomes. Contracts shall also include provisions that link the 21 performance of the contractor to the level and timing of reimbursement.

(11) "Permanency services" means long-term services provided to secure a child's safety, permanency, and well-being, including foster care services, family reunification services, adoption services, and preparation for independent living services.

(12) "Primary prevention services" means services which are designed and delivered for the primary purpose of enhancing child and family well-being and are shown, by analysis of outcomes, to reduce the risk to the likelihood of the initial need for child welfare services.

30 (13) "Supervising agency" means an agency licensed by the state 31 under RCW 74.15.090, or licensed by a federally recognized Indian tribe 32 located in this state under RCW 74.15.190, that has entered into a 33 performance-based contract with the department to provide case 34 management for the delivery and documentation of child welfare 35 services, as defined in this section.

36 <u>(14) "Evidence-based" means a program or practice that is cost-</u>
37 <u>effective and includes at least two randomized or statistically</u>

1 controlled evaluations that have demonstrated improved outcomes for its

2 <u>intended population</u>.

3 <u>NEW SECTION.</u> Sec. 7. A new section is added to chapter 74.13 RCW
4 to read as follows:

5 (1) The department, and any other state agency that administers б funds related to prevention, treatment, and care of recipients of child 7 welfare services, shall, in accordance with the graduated requirements of subsection (4) of this section, expend state funds on child welfare 8 9 programs or programs related to the prevention, treatment, or care of 10 recipients of child welfare services that are evidence-based, as 11 identified by the Washington state institute for public policy and the 12 University of Washington evidence-based practice institute. In collaboration with the University of Washington evidence-based practice 13 14 institute, the department shall initiate and continue the review of sound, promising, and research-based practices with the goal of 15 16 identifying and expanding the number and type of available evidence-17 based programs that are cost-beneficial and effective at reducing abuse 18 and neglect, safely reducing rates of out-of-home placement, decreasing the length of time required to obtain permanency for children in out-19 20 of-home care, or improving child well-being for participants.

(2) Implementation of evidence-based programs must be coordinated with the University of Washington evidence-based practice institute and shall be accompanied by monitoring and quality control procedures designed to ensure that they are delivered as prescribed in the applicable program manual or protocol and that corrective action must be taken when those standards are not met.

27 (3) When necessary to meet the requirements of subsection (4) of this section, the department shall include in any contracts with 28 29 providers of services related to prevention, treatment, or care of recipients of child welfare services a provision affirming that the 30 provider shall provide evidence-based services, and that the services 31 32 must be provided by staff who are trained in providing evidence-based services, and the services must be accompanied by monitoring and 33 34 quality control procedures that ensure that they are delivered 35 according to the applicable standards. The department may use performance requirements or incentives in determining the amounts 36 37 payable in contracts or grants.

(4) In order to prevent undue disturbance to existing department 1 2 programs and to allow time for a workforce to be sufficiently trained in evidence-based practices, the department shall ensure that no less 3 than thirty-five percent of the funds expended for recipients of child 4 welfare services meet the requirements of this section during fiscal 5 years 2014 and 2015, that no less than fifty percent of the funds 6 7 expended meet the requirements of this section during fiscal years 2016 8 and 2017, and that no less than seventy-five percent of the funds expended meet the requirements of this section during fiscal years 2018 9 10 and 2019. The determination of the amount of funds expended for 11 evidence-based services must include program costs necessary to 12 directly implement evidence-based programs, including discrete staffing and training costs which would not have been incurred but for 13 14 implementation of an evidence-based program. Funds expended for 15 indirect administrative costs may not be included in the determination of amounts expended for evidence-based services. 16

17 NEW SECTION. Sec. 8. (1) In order to achieve the requirements of and 7 of this act, the department 18 sections 3, 5, shall, in collaboration with the Washington state institute of public policy and 19 20 the University of Washington evidence-based practice institute, 21 redirect existing funding resources as necessary to coordinate the 22 purchase of evidence-based services and the development of a workforce 23 trained to implement evidence-based practices.

(2) The department shall report annually to the appropriate legislative committees regarding its progress in the coordination of the purchase of evidence-based services and of the development of a workforce trained to implement evidence-based practices. A preliminary report must be completed no later than December 31, 2012. A subsequent report must be completed no later than December 31, 2013, and the department shall report annually, thereafter.

31 <u>NEW SECTION.</u> Sec. 9. A new section is added to chapter 43.20A RCW 32 to read as follows:

The department shall develop a unified and accountable system of care for the coordination and the delivery of services to children and youth and their families. A central mechanism for providing services must be developed through the use of evidence-based wraparound care

coordination, the availability of peer support, and evidence-based 1 2 treatments. To accomplish this, the department shall establish a state 3 interagency system of care team, whose members shall include 4 representatives from: (1) Child advocacy organizations; 5 (2) Tribal authorities; б 7 (3) The division of behavioral health and recovery services; 8 (4) The children's administration; (5) The juvenile rehabilitation administration; 9 (6) The division of developmental disabilities; 10 (7) The health care authority; 11 12 (8) The office of the superintendent of public instruction; 13 (9) Family and youth peer support organizations; 14 (10) Regional support networks; (11) State and local provider organizations; 15 16 (12)The University of Washington evidence-based practice 17 institute; and 18 (13) The Washington state institute for public policy. Sec. 10. A new section is added to chapter 43.20A 19 NEW SECTION. 20 RCW to read as follows: 21 (1) The department of social and health services shall track and 22 document compliance with sections 3, 5, and 7 of this act. 23 (2) The Washington state institute for public policy and the 24 University of Washington evidence-based practice institute, with any 25 necessary assistance from the department, shall work collaboratively to 26 prepare a report to the appropriate legislative committees. The report 27 must include: (a) An assessment of the amount of funds expended for the evidence-28 29 based services; (b) An assessment of program fidelity to the evidence-based models; 30 31 (c) An assessment of outcomes for children and youth who receive evidence-based services; and 32 (d) A description of the method of the documentation of the 33 34 department's compliance with the requirements of sections 3, 5, and 7 35 of this act. 36 (3) The first report must be completed no later than July 1, 2013;

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- 1 the second report must be completed no later than July 1, 2015; and the
- 2 final report must be completed no later than December 1, 2019.

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