## CERTIFICATION OF ENROLLMENT

#### SUBSTITUTE HOUSE BILL 1170

Chapter 148, Laws of 2011

62nd Legislature 2011 Regular Session

TRIAGE FACILITIES

EFFECTIVE DATE: 04/22/11

Passed by the House April 14, 2011 Yeas 97 Nays 0

### FRANK CHOPP

## Speaker of the House of Representatives

Passed by the Senate April 8, 2011 Yeas 48 Nays 0

#### CERTIFICATE

I, Barbara Baker, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **SUBSTITUTE HOUSE BILL 1170** as passed by the House of Representatives and the Senate on the dates hereon set forth.

## BARBARA BAKER

#### BRAD OWEN

Chief Clerk

# President of the Senate

Approved April 22, 2011, 1:48 p.m.

FILED

April 22, 2011

CHRISTINE GREGOIRE

Secretary of State State of Washington

Governor of the State of Washington

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### SUBSTITUTE HOUSE BILL 1170

#### AS AMENDED BY THE SENATE

Passed Legislature - 2011 Regular Session

## State of Washington

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62nd Legislature

2011 Regular Session

By House Judiciary (originally sponsored by Representatives Roberts, Hope, Dickerson, Dammeier, Green, Rolfes, Haigh, Appleton, Walsh, Ormsby, Darneille, and Kenney)

READ FIRST TIME 02/08/11.

- 1 AN ACT Relating to triage facilities; amending RCW 71.05.153,
- 2 10.31.110, and 71.05.150; reenacting and amending RCW 71.05.020 and
- 3 71.24.035; creating a new section; and declaring an emergency.
- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 5 **Sec. 1.** RCW 71.05.020 and 2009 c 320 s 1 and 2009 c 217 s 20 are each reenacted and amended to read as follows:
- 7 The definitions in this section apply throughout this chapter 8 unless the context clearly requires otherwise.
  - (1) "Admission" or "admit" means a decision by a physician or psychiatric advanced registered nurse practitioner that a person should be examined or treated as a patient in a hospital;
  - (2) "Antipsychotic medications" means that class of drugs primarily used to treat serious manifestations of mental illness associated with thought disorders, which includes, but is not limited to atypical antipsychotic medications;
- 16 (3) "Attending staff" means any person on the staff of a public or 17 private agency having responsibility for the care and treatment of a 18 patient;

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- 1 (4) "Commitment" means the determination by a court that a person 2 should be detained for a period of either evaluation or treatment, or 3 both, in an inpatient or a less restrictive setting;
  - (5) "Conditional release" means a revocable modification of a commitment, which may be revoked upon violation of any of its terms;
  - (6) "Crisis stabilization unit" means a short-term facility or a portion of a facility licensed by the department of health and certified by the department of social and health services under RCW 71.24.035, such as an evaluation and treatment facility or a hospital, which has been designed to assess, diagnose, and treat individuals experiencing an acute crisis without the use of long-term hospitalization;
  - (7) "Custody" means involuntary detention under the provisions of this chapter or chapter 10.77 RCW, uninterrupted by any period of unconditional release from commitment from a facility providing involuntary care and treatment;
  - (8) "Department" means the department of social and health services;
    - (9) "Designated chemical dependency specialist" means a person designated by the county alcoholism and other drug addiction program coordinator designated under RCW 70.96A.310 to perform the commitment duties described in chapters 70.96A and 70.96B RCW;
    - (10) "Designated crisis responder" means a mental health professional appointed by the county or the regional support network to perform the duties specified in this chapter;
    - (11) "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;
- 29 (12) "Detention" or "detain" means the lawful confinement of a 30 person, under the provisions of this chapter;
- 31 (13) "Developmental disabilities professional" means a person who
  32 has specialized training and three years of experience in directly
  33 treating or working with persons with developmental disabilities and is
  34 a psychiatrist, psychologist, psychiatric advanced registered nurse
  35 practitioner, or social worker, and such other developmental
  36 disabilities professionals as may be defined by rules adopted by the
  37 secretary;

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1 (14) "Developmental disability" means that condition defined in RCW 71A.10.020(3);

- (15) "Discharge" means the termination of hospital medical authority. The commitment may remain in place, be terminated, or be amended by court order;
- (16) "Evaluation and treatment facility" means any facility which can provide directly, or by direct arrangement with other public or private agencies, emergency evaluation and treatment, outpatient care, and timely and appropriate inpatient care to persons suffering from a mental disorder, and which is certified as such by the department. A physically separate and separately operated portion of a state hospital may be designated as an evaluation and treatment facility. A facility which is part of, or operated by, the department or any federal agency will not require certification. No correctional institution or facility, or jail, shall be an evaluation and treatment facility within the meaning of this chapter;
- (17) "Gravely disabled" means a condition in which a person, as a result of a mental disorder: (a) Is in danger of serious physical harm resulting from a failure to provide for his or her essential human needs of health or safety; or (b) manifests severe deterioration in routine functioning evidenced by repeated and escalating loss of cognitive or volitional control over his or her actions and is not receiving such care as is essential for his or her health or safety;
- (18) "Habilitative services" means those services provided by program personnel to assist persons in acquiring and maintaining life skills and in raising their levels of physical, mental, social, and vocational functioning. Habilitative services include education, training for employment, and therapy. The habilitative process shall be undertaken with recognition of the risk to the public safety presented by the person being assisted as manifested by prior charged criminal conduct;
- (19) "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 or in confinement as a result of a criminal conviction;
- 37 (20) "Imminent" means the state or condition of being likely to 38 occur at any moment or near at hand, rather than distant or remote;

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- 1 (21) "Individualized service plan" means a plan prepared by a 2 developmental disabilities professional with other professionals as a 3 team, for a person with developmental disabilities, which shall state:
  - (a) The nature of the person's specific problems, prior charged criminal behavior, and habilitation needs;
  - (b) The conditions and strategies necessary to achieve the purposes of habilitation;
  - (c) The intermediate and long-range goals of the habilitation program, with a projected timetable for the attainment;
  - (d) The rationale for using this plan of habilitation to achieve those intermediate and long-range goals;
    - (e) The staff responsible for carrying out the plan;
  - (f) Where relevant in light of past criminal behavior and due consideration for public safety, the criteria for proposed movement to less-restrictive settings, criteria for proposed eventual discharge or release, and a projected possible date for discharge or release; and
  - (g) The type of residence immediately anticipated for the person and possible future types of residences;
  - (22) "Information related to mental health services" means all information and records compiled, obtained, or maintained in the course of providing services to either voluntary or involuntary recipients of services by a mental health service provider. This may include documents of legal proceedings under this chapter or chapter 71.34 or 10.77 RCW, or somatic health care information;
  - (23) "Judicial commitment" means a commitment by a court pursuant to the provisions of this chapter;
  - (24) "Legal counsel" means attorneys and staff employed by county prosecutor offices or the state attorney general acting in their capacity as legal representatives of public mental health service providers under RCW 71.05.130;
    - (25) "Likelihood of serious harm" means:
- 32 (a) A substantial risk that: (i) Physical harm will be inflicted 33 by a person upon his or her own person, as evidenced by threats or 34 attempts to commit suicide or inflict physical harm on oneself; (ii) 35 physical harm will be inflicted by a person upon another, as evidenced 36 by behavior which has caused such harm or which places another person 37 or persons in reasonable fear of sustaining such harm; or (iii)

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physical harm will be inflicted by a person upon the property of others, as evidenced by behavior which has caused substantial loss or damage to the property of others; or

- (b) The person has threatened the physical safety of another and has a history of one or more violent acts;
- (26) "Mental disorder" means any organic, mental, or emotional impairment which has substantial adverse effects on a person's cognitive or volitional functions;
- (27) "Mental health professional" means a psychiatrist, psychologist, psychiatric advanced registered nurse practitioner, psychiatric nurse, or social worker, and such other mental health professionals as may be defined by rules adopted by the secretary pursuant to the provisions of this chapter;
- (28) "Mental health service provider" means a public or private agency that provides mental health services to persons with mental disorders as defined under this section and receives funding from public sources. This includes, but is not limited to, hospitals licensed under chapter 70.41 RCW, evaluation and treatment facilities as defined in this section, community mental health service delivery systems or community mental health programs as defined in RCW 71.24.025, facilities conducting competency evaluations and restoration under chapter 10.77 RCW, and correctional facilities operated by state and local governments;
- (29) "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;
- (30) "Private agency" means any person, partnership, corporation, or association that is not a public agency, whether or not financed in whole or in part by public funds, which constitutes an evaluation and treatment facility or private institution, or hospital, which is conducted for, or includes a department or ward conducted for, the care and treatment of persons who are mentally ill;
- (31) "Professional person" means a mental health professional and shall also mean a physician, psychiatric advanced registered nurse practitioner, registered nurse, and such others as may be defined by rules adopted by the secretary pursuant to the provisions of this chapter;

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- (32) "Psychiatric advanced registered nurse practitioner" means a person who is licensed as an advanced registered nurse practitioner pursuant to chapter 18.79 RCW; and who is board certified in advanced practice psychiatric and mental health nursing;
  - (33) "Psychiatrist" means a person having a license as a physician and surgeon in this state who has in addition completed three years of graduate training in psychiatry in a program approved by the American medical association or the American osteopathic association and is certified or eligible to be certified by the American board of psychiatry and neurology;
- (34) "Psychologist" means a person who has been licensed as a psychologist pursuant to chapter 18.83 RCW;
  - (35) "Public agency" means any evaluation and treatment facility or institution, or hospital which is conducted for, or includes a department or ward conducted for, the care and treatment of persons with mental illness, if the agency is operated directly by, federal, state, county, or municipal government, or a combination of such governments;
- (36) "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;
- 24 (37) "Release" means legal termination of the commitment under the provisions of this chapter;
- 26 (38) "Resource management services" has the meaning given in 27 chapter 71.24 RCW;
- 28 (39) "Secretary" means the secretary of the department of social 29 and health services, or his or her designee;
- 30 (40) "Serious violent offense" has the same meaning as provided in RCW 9.94A.030;
  - (41) "Social worker" means a person with a master's or further advanced degree from an accredited school of social work or a degree deemed equivalent under rules adopted by the secretary;
- 35 (42) "Therapeutic court personnel" means the staff of a mental 36 health court or other therapeutic court which has jurisdiction over 37 defendants who are dually diagnosed with mental disorders, including

court personnel, probation officers, a court monitor, prosecuting attorney, or defense counsel acting within the scope of therapeutic court duties;

- (43) "Triage facility" means a short-term facility or a portion of a facility licensed by the department of health and certified by the department of social and health services under RCW 71.24.035, which is designed as a facility to assess and stabilize an individual or determine the need for involuntary commitment of an individual, and must \_\_meet \_\_department \_\_of \_\_health \_\_residential \_\_treatment \_\_facility standards. A triage facility may be structured as a voluntary or involuntary placement facility;
- (44) "Treatment records" include registration and all other records concerning persons who are receiving or who at any time have received services for mental illness, which are maintained by the department, by regional support networks and their staffs, and by treatment facilities. Treatment records include mental health information contained in a medical bill including but not limited to mental health drugs, a mental health diagnosis, provider name, and dates of service stemming from a medical service. Treatment records do not include notes or records maintained for personal use by a person providing treatment services for the department, regional support networks, or a treatment facility if the notes or records are not available to others;  $((44+)) \quad (45) \quad \text{"Violent act" means behavior that resulted in homicide, attempted suicide, nonfatal injuries, or substantial damage to property.}$
- **Sec. 2.** RCW 71.05.153 and 2007 c 375 s 8 are each amended to read 27 as follows:
  - (1) When a designated mental health professional receives information alleging that a person, as the result of a mental disorder, presents an imminent likelihood of serious harm, or is in imminent danger because of being gravely disabled, after investigation and evaluation of the specific facts alleged and of the reliability and credibility of the person or persons providing the information if any, the designated mental health professional may take such person, or cause by oral or written order such person to be taken into emergency custody in an evaluation and treatment facility for not more than seventy-two hours as described in RCW 71.05.180.

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- 1 (2) A peace officer may take or cause such person to be taken into custody and immediately delivered to a <a href="mailto:triage\_facility">triage\_facility</a>, crisis stabilization unit, ((an)) evaluation and treatment facility, or the emergency department of a local hospital under the following circumstances:
  - (a) Pursuant to subsection (1) of this section; or
  - (b) When he or she has reasonable cause to believe that such person is suffering from a mental disorder and presents an imminent likelihood of serious harm or is in imminent danger because of being gravely disabled.
  - (3) Persons delivered to a crisis stabilization unit, evaluation and treatment facility, ((or-the)) emergency department of a local hospital, or triage facility that has elected to operate as an involuntary facility by peace officers pursuant to subsection (2) of this section may be held by the facility for a period of up to twelve hours((:- PROVIDED, -That-they-are-examined-by-a-mental-health professional)).
  - (4) Within three hours of ((their)) arrival, the person must be examined by a mental health professional. Within twelve hours of ((their)) arrival, the designated mental health professional must determine whether the individual meets detention criteria. If the individual is detained, the designated mental health professional shall file a petition for detention or a supplemental petition as appropriate and commence service on the designated attorney for the detained person.
- **Sec. 3.** RCW 10.31.110 and 2007 c 375 s 2 are each amended to read 27 as follows:
  - (1) When a police officer has reasonable cause to believe that the individual has committed acts constituting a nonfelony crime that is not a serious offense as identified in RCW 10.77.092 and the individual is known by history or consultation with the regional support network to suffer from a mental disorder, the arresting officer may:
- 33 (a) Take the individual to a crisis stabilization unit as defined 34 in RCW 71.05.020(6). Individuals delivered to a crisis stabilization 35 unit pursuant to this section may be held by the facility for a period 36 of up to twelve hours((÷ PROVIDED, That they are)). The individual

1 must be examined by a mental health professional within three hours of
2 ((their)) arrival;

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- (b) Take the individual to a triage facility as defined in RCW 71.05.020. An individual delivered to a triage facility which has elected to operate as an involuntary facility may be held up to a period of twelve hours. The individual must be examined by a mental health professional within three hours of arrival;
- 8 <u>(c)</u> Refer the individual to a mental health professional for 9 evaluation for initial detention and proceeding under chapter 71.05 10 RCW; or
- 11 (((c))) (d) Release the individual upon agreement to voluntary 12 participation in outpatient treatment.
  - (2) In deciding whether to refer the individual to treatment under this section, the police officer shall be guided by standards mutually agreed upon with the prosecuting authority, which address, at a minimum, the length, seriousness, and recency of the known criminal history of the individual, the mental health history of the individual, where available, and the circumstances surrounding the commission of the alleged offense.
  - (3) Any agreement to participate in treatment shall not require individuals to stipulate to any of the alleged facts regarding the criminal activity as a prerequisite to participation in a mental health treatment alternative. The agreement is inadmissible in any criminal or civil proceeding. The agreement does not create immunity from prosecution for the alleged criminal activity.
  - (4) If an individual violates such agreement and the mental health treatment alternative is no longer appropriate:
  - (a) The mental health provider shall inform the referring law enforcement agency of the violation; and
- 30 (b) The original charges may be filed or referred to the 31 prosecutor, as appropriate, and the matter may proceed accordingly.
- 32 (5) The police officer is immune from liability for any good faith 33 conduct under this section.
- 34 Sec. 4. RCW 71.24.035 and 2008 c 267 s 5 and 2008 c 261 s 3 are each reenacted and amended to read as follows:
- 36 (1) The department is designated as the state mental health 37 authority.

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- (2) The secretary shall provide for public, client, and licensed service provider participation in developing the state mental health program, developing contracts with regional support networks, and any waiver request to the federal government under medicaid.
  - (3) The secretary shall provide for participation in developing the state mental health program for children and other underserved populations, by including representatives on any committee established to provide oversight to the state mental health program.
  - (4) The secretary shall be designated as the regional support network if the regional support network fails to meet state minimum standards or refuses to exercise responsibilities under RCW 71.24.045, until such time as a new regional support network is designated under RCW 71.24.320.
    - (5) The secretary shall:

- (a) Develop a biennial state mental health program that incorporates regional biennial needs assessments and regional mental health service plans and state services for adults and children with mental illness. The secretary shall also develop a six-year state mental health plan;
- (b) Assure that any regional or county community mental health program provides access to treatment for the region's residents, including parents who are respondents in dependency cases, in the following order of priority: (i) Persons with acute mental illness; (ii) adults with chronic mental illness and children who are severely emotionally disturbed; and (iii) persons who are seriously disturbed. Such programs shall provide:
  - (A) Outpatient services;
  - (B) Emergency care services for twenty-four hours per day;
- (C) Day treatment for persons with mental illness which includes training in basic living and social skills, supported work, vocational rehabilitation, and day activities. Such services may include therapeutic treatment. In the case of a child, day treatment includes age-appropriate basic living and social skills, educational and prevocational services, day activities, and therapeutic treatment;
- (D) Screening for patients being considered for admission to state mental health facilities to determine the appropriateness of admission;
- (E) Employment services, which may include supported employment, transitional work, placement in competitive employment, and other work-

- related services, that result in persons with mental illness becoming engaged in meaningful and gainful full or part-time work. Other sources of funding such as the division of vocational rehabilitation may be utilized by the secretary to maximize federal funding and provide for integration of services;
  - (F) Consultation and education services; and
  - (G) Community support services;

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- 8 (c) Develop and adopt rules establishing state minimum standards 9 for the delivery of mental health services pursuant to RCW 71.24.037 10 including, but not limited to:
  - (i) Licensed service providers. These rules shall permit a county-operated mental health program to be licensed as a service provider subject to compliance with applicable statutes and rules. The secretary shall provide for deeming of compliance with state minimum standards for those entities accredited by recognized behavioral health accrediting bodies recognized and having a current agreement with the department;
    - (ii) Regional support networks; and
  - (iii) Inpatient services, evaluation and treatment services and facilities under chapter 71.05 RCW, resource management services, and community support services;
  - (d) Assure that the special needs of persons who are minorities, elderly, disabled, children, low-income, and parents who are respondents in dependency cases are met within the priorities established in this section;
  - (e) Establish a standard contract or contracts, consistent with state minimum standards, RCW 71.24.320 and 71.24.330, which shall be used in contracting with regional support networks. The standard contract shall include a maximum fund balance, which shall be consistent with that required by federal regulations or waiver stipulations;
  - (f) Establish, to the extent possible, a standardized auditing procedure which minimizes paperwork requirements of regional support networks and licensed service providers. The audit procedure shall focus on the outcomes of service and not the processes for accomplishing them;
- 37 (g) Develop and maintain an information system to be used by the 38 state and regional support networks that includes a tracking method

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- which allows the department and regional support networks to identify mental health clients' participation in any mental health service or public program on an immediate basis. The information system shall not include individual patient's case history files. Confidentiality of client information and records shall be maintained as provided in this chapter and in RCW 71.05.390, 71.05.420, and 71.05.440;
  - (h) License service providers who meet state minimum standards;
  - (i) Certify regional support networks that meet state minimum standards;
    - (j) Periodically monitor the compliance of certified regional support networks and their network of licensed service providers for compliance with the contract between the department, the regional support network, and federal and state rules at reasonable times and in a reasonable manner;
  - (k) Fix fees to be paid by evaluation and treatment centers to the secretary for the required inspections;
    - (1) Monitor and audit regional support networks and licensed service providers as needed to assure compliance with contractual agreements authorized by this chapter;
    - (m) Adopt such rules as are necessary to implement the department's
      responsibilities under this chapter;
    - (n) Assure the availability of an appropriate amount, as determined by the legislature in the operating budget by amounts appropriated for this specific purpose, of community-based, geographically distributed residential services;
    - (o) Certify crisis stabilization units that meet state minimum standards; ((and))
      - (p) Certify clubhouses that meet state minimum standards; and
      - (q) Certify triage facilities that meet state minimum standards.
    - (6) The secretary shall use available resources only for regional support networks, except to the extent authorized, and in accordance with any priorities or conditions specified, in the biennial appropriations act.
    - (7) Each certified regional support network and licensed service provider shall file with the secretary, on request, such data, statistics, schedules, and information as the secretary reasonably requires. A certified regional support network or licensed service provider which, without good cause, fails to furnish any data,

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statistics, schedules, or information as requested, or files fraudulent reports thereof, may have its certification or license revoked or suspended.

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- (8) The secretary may suspend, revoke, limit, or restrict a certification or license, or refuse to grant a certification or license for failure to conform to: (a) The law; (b) applicable rules and regulations; (c) applicable standards; or (d) state minimum standards.
- (9) The superior court may restrain any regional support network or service provider from operating without certification or a license or any other violation of this section. The court may also review, pursuant to procedures contained in chapter 34.05 RCW, any denial, suspension, limitation, restriction, or revocation of certification or license, and grant other relief required to enforce the provisions of this chapter.
- (10) Upon petition by the secretary, and after hearing held upon reasonable notice to the facility, the superior court may issue a warrant to an officer or employee of the secretary authorizing him or her to enter at reasonable times, and examine the records, books, and accounts of any regional support network or service provider refusing to consent to inspection or examination by the authority.
- (11) Notwithstanding the existence or pursuit of any other remedy, the secretary may file an action for an injunction or other process against any person or governmental unit to restrain or prevent the establishment, conduct, or operation of a regional support network or service provider without certification or a license under this chapter.
- (12) The standards for certification of evaluation and treatment facilities shall include standards relating to maintenance of good physical and mental health and other services to be afforded persons pursuant to this chapter and chapters 71.05 and 71.34 RCW, and shall otherwise assure the effectuation of the purposes of these chapters.
- (13) The standards for certification of crisis stabilization units shall include standards that:
- (a) Permit location of the units at a jail facility if the unit is physically separate from the general population of the jail;
- (b) Require administration of the unit by mental health professionals who direct the stabilization and rehabilitation efforts; and

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- 1 (c) Provide an environment affording security appropriate with the alleged criminal behavior and necessary to protect the public safety.
  - (14) The standards for certification of a clubhouse shall at a minimum include:
  - (a) The facilities may be peer-operated and must be recovery-focused;
    - (b) Members and employees must work together;
  - (c) Members must have the opportunity to participate in all the work of the clubhouse, including administration, research, intake and orientation, outreach, hiring, training and evaluation of staff, public relations, advocacy, and evaluation of clubhouse effectiveness;
  - (d) Members and staff and ultimately the clubhouse director must be responsible for the operation of the clubhouse, central to this responsibility is the engagement of members and staff in all aspects of clubhouse operations;
  - (e) Clubhouse programs must be comprised of structured activities including but not limited to social skills training, vocational rehabilitation, employment training and job placement, and community resource development;
  - (f) Clubhouse programs must provide in-house educational programs that significantly utilize the teaching and tutoring skills of members and assist members by helping them to take advantage of adult education opportunities in the community;
  - (g) Clubhouse programs must focus on strengths, talents, and abilities of its members;
  - (h) The work-ordered day may not include medication clinics, day treatment, or other therapy programs within the clubhouse.
  - (15) The department shall distribute appropriated state and federal funds in accordance with any priorities, terms, or conditions specified in the appropriations act.
    - (16) The secretary shall assume all duties assigned to the nonparticipating regional support networks under chapters 71.05, 71.34, and 71.24 RCW. Such responsibilities shall include those which would have been assigned to the nonparticipating counties in regions where there are not participating regional support networks.

The regional support networks, or the secretary's assumption of all responsibilities under chapters 71.05, 71.34, and 71.24 RCW, shall be included in all state and federal plans affecting the state mental

health program including at least those required by this chapter, the medicaid program, and P.L. 99-660. Nothing in these plans shall be inconsistent with the intent and requirements of this chapter.

(17) The secretary shall:

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- (a) Disburse funds for the regional support networks within sixty days of approval of the biennial contract. The department must either approve or reject the biennial contract within sixty days of receipt.
- (b) Enter into biennial contracts with regional support networks. The contracts shall be consistent with available resources. No contract shall be approved that does not include progress toward meeting the goals of this chapter by taking responsibility for: (i) Short-term commitments; (ii) residential care; and (iii) emergency response systems.
- (c) Notify regional support networks of their allocation of available resources at least sixty days prior to the start of a new biennial contract period.
- (d) Deny all or part of the funding allocations to regional support networks based solely upon formal findings of noncompliance with the terms of the regional support network's contract with the department. Regional support networks disputing the decision of the secretary to withhold funding allocations are limited to the remedies provided in the department's contracts with the regional support networks.
- (18) The department, in cooperation with the state congressional delegation, shall actively seek waivers of federal requirements and such modifications of federal regulations as are necessary to allow federal medicaid reimbursement for services provided by freestanding evaluation and treatment facilities certified under chapter 71.05 RCW. The department shall periodically report its efforts to the appropriate committees of the senate and the house of representatives.
- **Sec. 5.** RCW 71.05.150 and 2007 c 375 s 7 are each amended to read 31 as follows:
- (1) When a designated mental health professional receives information alleging that a person, as a result of a mental disorder:

  (i) Presents a likelihood of serious harm; or (ii) is gravely disabled; the designated mental health professional may, after investigation and evaluation of the specific facts alleged and of the reliability and credibility of any person providing information to initiate detention,

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- if satisfied that the allegations are true and that the person will not voluntarily seek appropriate treatment, file a petition for initial detention. Before filing the petition, the designated mental health professional must personally interview the person, unless the person refuses an interview, and determine whether the person will voluntarily receive appropriate evaluation and treatment at an evaluation and treatment facility ((or in a)), crisis stabilization unit, or triage facility.
  - (2)(a) An order to detain to a designated evaluation and treatment facility for not more than a seventy-two-hour evaluation and treatment period may be issued by a judge of the superior court upon request of a designated mental health professional, whenever it appears to the satisfaction of a judge of the superior court:
    - (i) That there is probable cause to support the petition; and
  - (ii) That the person has refused or failed to accept appropriate evaluation and treatment voluntarily.
  - (b) The petition for initial detention, signed under penalty of perjury, or sworn telephonic testimony may be considered by the court in determining whether there are sufficient grounds for issuing the order.
  - (c) The order shall designate retained counsel or, if counsel is appointed from a list provided by the court, the name, business address, and telephone number of the attorney appointed to represent the person.
  - (3) The designated mental health professional shall then serve or cause to be served on such person, his or her guardian, and conservator, if any, a copy of the order together with a notice of rights, and a petition for initial detention. After service on such person the designated mental health professional shall file the return of service in court and provide copies of all papers in the court file to the evaluation and treatment facility and the designated attorney. The designated mental health professional shall notify the court and the prosecuting attorney that a probable cause hearing will be held within seventy-two hours of the date and time of outpatient evaluation or admission to the evaluation and treatment facility. The person shall be permitted to be accompanied by one or more of his or her relatives, friends, an attorney, a personal physician, or other professional or religious advisor to the place of evaluation. An

attorney accompanying the person to the place of evaluation shall be permitted to be present during the admission evaluation. Any other individual accompanying the person may be present during the admission The facility may exclude the individual if his or her evaluation. presence would present a safety risk, delay the proceedings, otherwise interfere with the evaluation.

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- (4) The designated mental health professional may notify a peace officer to take such person or cause such person to be taken into custody and placed in an evaluation and treatment facility. time such person is taken into custody there shall commence to be served on such person, his or her guardian, and conservator, if any, a copy of the original order together with a notice of rights and a petition for initial detention.
- NEW SECTION. Sec. 6. Facilities operating as triage facilities as 14 defined in RCW 71.05.020, whether or not they are certified by the 15 department of social and health services, as of the effective date of 17 this section are not required to relicense or recertify under any new rules governing licensure or certification of triage facilities. The department of social and health services shall work with the Washington 20 association of counties and the Washington association of sheriffs and police chiefs in creating rules that establish standards for certification of triage facilities. The department of health rules must not require triage facilities to provide twenty-four hour nursing. 23
- 24 <u>NEW SECTION.</u> Sec. 7. This act is necessary for the immediate 25 preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and takes effect 26 27 immediately.

Passed by the House April 14, 2011. Passed by the Senate April 8, 2011. Approved by the Governor April 22, 2011. Filed in Office of Secretary of State April 22, 2011.