HOUSE BILL 2541

State of Washington 64th Legislature 2016 Regular Session

By Representatives Frame, Rodne, Jinkins, Walkinshaw, Riccelli, Senn, Orwall, Muri, S. Hunt, Gregerson, Sawyer, Caldier, Goodman, Haler, Hansen, Kuderer, Appleton, Kilduff, Reykdal, Rossetti, Magendanz, Ormsby, Bergquist, and Stanford

Read first time 01/14/16. Referred to Committee on Judiciary.

- 1 AN ACT Relating to less restrictive involuntary treatment orders;
- 2 and amending RCW 71.05.230, 71.05.240, 71.05.290, 71.05.320, and
- 3 71.05.585.
- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 5 **Sec. 1.** RCW 71.05.230 and 2015 c 250 s 6 are each amended to 6 read as follows:
- A person detained or committed for seventy-two hour evaluation 7 and treatment or for an outpatient evaluation for the purpose of 8 filing a petition for a less restrictive alternative treatment order 9 may be committed for not more than fourteen additional days of 10 11 involuntary intensive treatment or ninety additional days of a less 12 restrictive alternative to involuntary intensive treatment. A 13 petition may only be filed if the following conditions are met:
- (1) The professional staff of the agency or facility providing evaluation services has analyzed the person's condition and finds
- that the condition is caused by mental disorder and results in a likelihood of serious harm, results in the person being gravely
- 18 disabled, or results in the person being in need of assisted
- 19 outpatient mental health treatment, and are prepared to testify those
- 20 conditions are met; and

p. 1 HB 2541

- (2) The person has been advised of the need for voluntary treatment and the professional staff of the facility has evidence that he or she has not in good faith volunteered; and
- (3) The agency or facility providing intensive treatment or which proposes to supervise the less restrictive alternative is certified to provide such treatment by the department; and
- (4) The professional staff of the agency or facility or the designated mental health professional has filed a petition with the court for a fourteen day involuntary detention or a ninety day less restrictive alternative. The petition must be signed either by:
 - (a) Two physicians;

2

3

4

5

7

8

9

10 11

12

13 14

15 16

17

18

19

20

21

22

23

2425

26

27

2829

30 31

32

33

34

3536

37

38

- (b) One physician and a mental health professional;
- (c) Two psychiatric advanced registered nurse practitioners;
- (d) One psychiatric advanced registered nurse practitioner and a mental health professional; or
 - (e) A physician and a psychiatric advanced registered nurse practitioner. The persons signing the petition must have examined the person. If involuntary detention is sought the petition shall state facts that support the finding that such person, as a result of mental disorder, presents a likelihood of serious harm, or is gravely disabled and that there are no less restrictive alternatives to detention in the best interest of such person or others. The petition shall state specifically that less restrictive alternative treatment was considered and specify why treatment less restrictive than detention is not appropriate. If an involuntary less restrictive alternative is sought, the petition shall state facts that support the finding that such person, as a result of mental disorder, presents a likelihood of serious harm, is gravely disabled, or is in need of assisted outpatient mental health treatment, and shall set forth ((a plan for the)) any recommendations for less restrictive alternative treatment ((proposed by the facility in accordance with RCW 71.05.585)) services; and
 - (5) A copy of the petition has been served on the detained or committed person, his or her attorney and his or her guardian or conservator, if any, prior to the probable cause hearing; and
 - (6) The court at the time the petition was filed and before the probable cause hearing has appointed counsel to represent such person if no other counsel has appeared; and
- 39 (7) The petition reflects that the person was informed of the 40 loss of firearm rights if involuntarily committed; and

p. 2 HB 2541

(8) At the conclusion of the initial commitment period, the professional staff of the agency or facility or the designated mental health professional may petition for an additional period of either ninety days of less restrictive alternative treatment or ninety days of involuntary intensive treatment as provided in RCW 71.05.290; and

- (9) If the hospital or facility designated to provide less restrictive alternative treatment is other than the facility providing involuntary treatment, the outpatient facility so designated to provide less restrictive alternative treatment has agreed to assume such responsibility.
- **Sec. 2.** RCW 71.05.240 and 2015 c 250 s 7 are each amended to 12 read as follows:
 - (1) If a petition is filed for fourteen day involuntary treatment or ninety days of less restrictive alternative treatment, the court shall hold a probable cause hearing within seventy-two hours of the initial detention or involuntary outpatient evaluation of such person as determined in RCW 71.05.180. If requested by the person or his or her attorney, the hearing may be postponed for a period not to exceed forty-eight hours. The hearing may also be continued subject to the conditions set forth in RCW 71.05.210 or subject to the petitioner's showing of good cause for a period not to exceed twenty-four hours.
 - (2) The court at the time of the probable cause hearing and before an order of commitment is entered shall inform the person both orally and in writing that the failure to make a good faith effort to seek voluntary treatment as provided in RCW 71.05.230 will result in the loss of his or her firearm rights if the person is subsequently detained for involuntary treatment under this section.
 - (3) At the conclusion of the probable cause hearing:
 - (a) If the court finds by a preponderance of the evidence that such person, as the result of mental disorder, presents a likelihood of serious harm, or is gravely disabled, and, after considering less restrictive alternatives to involuntary detention and treatment, finds that no such alternatives are in the best interests of such person or others, the court shall order that such person be detained for involuntary treatment not to exceed fourteen days in a facility certified to provide treatment by the department. If the court finds that such person, as the result of a mental disorder, presents a likelihood of serious harm, or is gravely disabled, but that treatment in a less restrictive setting than detention is in the best

p. 3 HB 2541

interest of such person or others, the court shall order an appropriate less restrictive alternative course of treatment for not to exceed ninety days;

1

2

3

4

5

7

8

10

11

12

13

14

1516

17

18

19

20

21

22

2324

25

26

39

- (b) If the court finds by a preponderance of the evidence that such person, as the result of a mental disorder, is in need of assisted outpatient mental health treatment, and that the person does not present a likelihood of serious harm or grave disability, the court shall order an appropriate less restrictive alternative course of treatment not to exceed ninety days, and may not order inpatient treatment;
- (c) An order for less restrictive alternative treatment must $((identify\ the))$ name the mental health service provider responsible for identifying the services the person will receive $((\tau))$ in accordance with RCW 71.05.585, and must include a requirement that the person cooperate with the services planned by the mental health service provider. ((The court may order additional evaluation of the person if necessary to identify appropriate services.))
 - (4) The court shall specifically state to such person and give such person notice in writing that if involuntary treatment beyond the fourteen day period or beyond the ninety days of less restrictive treatment is to be sought, such person will have the right to a full hearing or jury trial as required by RCW 71.05.310. The court shall also state to the person and provide written notice that the person is barred from the possession of firearms and that the prohibition remains in effect until a court restores his or her right to possess a firearm under RCW 9.41.047.
- 27 **Sec. 3.** RCW 71.05.290 and 2015 c 250 s 10 are each amended to 28 read as follows:
- 29 (1) At any time during a person's fourteen day intensive 30 treatment period, the professional person in charge of a treatment 31 facility or his or her professional designee or the designated mental 32 health professional may petition the superior court for an order 33 requiring such person to undergo an additional period of treatment. 34 Such petition must be based on one or more of the grounds set forth 35 in RCW 71.05.280.
- 36 (2) The petition shall summarize the facts which support the need 37 for further commitment and shall be supported by affidavits signed 38 by:
 - (a) Two examining physicians;

p. 4 HB 2541

- 1 (b) One examining physician and examining mental health 2 professional;
 - (c) Two psychiatric advanced registered nurse practitioners;

- (d) One psychiatric advanced registered nurse practitioner and a mental health professional; or
- (e) An examining physician and an examining psychiatric advanced registered nurse practitioner. The affidavits shall describe in detail the behavior of the detained person which supports the petition and shall explain what, if any, less restrictive treatments which are alternatives to detention are available to such person, and shall state the willingness of the affiant to testify to such facts in subsequent judicial proceedings under this chapter. If less restrictive alternative treatment is sought, the petition shall set forth ((a proposed plan)) any recommendations for less restrictive alternative treatment ((in accordance with RCW 71.05.585)) services.
- (3) If a person has been determined to be incompetent pursuant to RCW 10.77.086(4), then the professional person in charge of the treatment facility or his or her professional designee or the designated mental health professional may directly file a petition for one hundred eighty day treatment under RCW 71.05.280(3). No petition for initial detention or fourteen day detention is required before such a petition may be filed.
- **Sec. 4.** RCW 71.05.320 and 2015 c 250 s 11 are each amended to 24 read as follows:
 - (1) If the court or jury finds that grounds set forth in RCW 71.05.280 have been proven and that the best interests of the person or others will not be served by a less restrictive treatment which is an alternative to detention, the court shall remand him or her to the custody of the department or to a facility certified for ninety day treatment by the department for a further period of intensive treatment not to exceed ninety days from the date of judgment. If the grounds set forth in RCW 71.05.280(3) are the basis of commitment, then the period of treatment may be up to but not exceed one hundred eighty days from the date of judgment in a facility certified for one hundred eighty day treatment by the department.
 - (2) If the court or jury finds that grounds set forth in RCW 71.05.280 have been proven, but finds that treatment less restrictive than detention will be in the best interest of the person or others, then the court shall remand him or her to the custody of the

p. 5 HB 2541

department or to a facility certified for ninety day treatment by the department or to a less restrictive alternative for a further period of less restrictive treatment not to exceed ninety days from the date of judgment. If the grounds set forth in RCW 71.05.280(3) are the basis of commitment, then the period of treatment may be up to but not exceed one hundred eighty days from the date of judgment. If the court or jury finds that the grounds set forth in RCW 71.05.280(5) have been proven, and provide the only basis for commitment, the court must enter an order for less restrictive alternative treatment for up to ninety days from the date of judgment and may not order inpatient treatment.

- (3) An order for less restrictive alternative treatment entered under subsection (2) of this section must ((identify)) name the mental health service provider responsible for identifying the services the person will receive((τ)) in accordance with RCW 71.05.585, and must include a requirement that the person cooperate with the services planned by the mental health service provider. ((The court may order additional evaluation of the person if necessary to identify appropriate services.))
- (4) The person shall be released from involuntary treatment at the expiration of the period of commitment imposed under subsection (1) or (2) of this section unless the superintendent or professional person in charge of the facility in which he or she is confined, or in the event of a less restrictive alternative, the designated mental health professional, files a new petition for involuntary treatment on the grounds that the committed person:
- (a) During the current period of court ordered treatment: (i) Has threatened, attempted, or inflicted physical harm upon the person of another, or substantial damage upon the property of another, and (ii) as a result of mental disorder or developmental disability presents a likelihood of serious harm; or
- (b) Was taken into custody as a result of conduct in which he or she attempted or inflicted serious physical harm upon the person of another, and continues to present, as a result of mental disorder or developmental disability a likelihood of serious harm; or
- (c)(i) Is in custody pursuant to RCW 71.05.280(3) and as a result of mental disorder or developmental disability continues to present a substantial likelihood of repeating acts similar to the charged criminal behavior, when considering the person's life history, progress in treatment, and the public safety.

p. 6 HB 2541

- 1 (ii) In cases under this subsection where the court has made an affirmative special finding under RCW 71.05.280(3)(b), the commitment 2 shall continue for up to an additional one hundred eighty day period 3 whenever the petition presents prima facie evidence that the person 4 continues to suffer from a mental disorder or developmental 5 6 disability that results in a substantial likelihood of committing acts similar to the charged criminal behavior, unless the person 7 presents proof through an admissible expert opinion that the person's 8 so changed such that the condition has 9 mental developmental disability no longer presents a substantial likelihood 10 11 of the person committing acts similar to the charged criminal 12 behavior. The initial or additional commitment period may include transfer to a specialized program of intensive support and treatment, 13 14 which may be initiated prior to or after discharge from the state 15 hospital; or
 - (d) Continues to be gravely disabled; or

17

18

19

2021

22

2324

25

26

27

2829

30

(e) Is in need of assisted outpatient mental health treatment.

If the conduct required to be proven in (b) and (c) of this subsection was found by a judge or jury in a prior trial under this chapter, it shall not be necessary to prove such conduct again.

If less restrictive alternative treatment is sought, the petition shall set forth ((a proposed plan)) any recommendations for less restrictive alternative $\underline{\text{treatment}}$ services (($\underline{\text{in accordance with RCW}}$ 71.05.585)).

- (5) A new petition for involuntary treatment filed under subsection (4) of this section shall be filed and heard in the superior court of the county of the facility which is filing the new petition for involuntary treatment unless good cause is shown for a change of venue. The cost of the proceedings shall be borne by the state.
- 31 (6)(a) The hearing shall be held as provided in RCW 71.05.310, and if the court or jury finds that the grounds for additional 32 confinement as set forth in this section are present, the court may 33 order the committed person returned for an additional period of 34 treatment not to exceed one hundred eighty days from the date of 35 judgment, except as provided in subsection (7) of this section. If 36 the court's order is based solely on the grounds identified in 37 subsection (4)(e) of this section, the court may enter an order for 38 39 less restrictive alternative treatment not to exceed one hundred eighty days from the date of judgment, and may not enter an order for 40

p. 7 HB 2541

- 1 inpatient treatment. An order for less restrictive alternative
- 2 treatment must ((identify)) name the mental health service provider
- 3 <u>responsible for identifying</u> the services the person will receive($(\frac{1}{2})$)
- 4 in accordance with RCW 71.05.585, and must include a requirement that
- 5 the person cooperate with the services planned by the mental health
- 6 <u>service provider</u>. ((The court may order additional evaluation of the
- 7 person if necessary to identify appropriate services.))
- 8 (b) At the end of the one hundred eighty day period of 9 commitment, or one-year period of commitment if subsection (7) of 10 this section applies, the committed person shall be released unless a 11 petition for an additional one hundred eighty day period of continued 12 treatment is filed and heard in the same manner as provided in this 13 section. Successive one hundred eighty day commitments are 14 permissible on the same grounds and pursuant to the same procedures.
- 14 permissible on the same grounds and pursuant to the same procedures
- 15 as the original one hundred eighty day commitment.
- 16 (7) An order for less restrictive treatment entered under 17 subsection (6) of this section may be for up to one year when the
- 18 person's previous commitment term was for intensive inpatient
- 19 treatment in a state hospital.
- 20 (8) No person committed as provided in this section may be
- 21 detained unless a valid order of commitment is in effect. No order of
- 22 commitment can exceed one hundred eighty days in length except as
- 23 provided in subsection (7) of this section.
- 24 **Sec. 5.** RCW 71.05.585 and 2015 c 250 s 16 are each amended to
- 25 read as follows:
- 26 (1) Less restrictive alternative treatment, at a minimum,
- 27 includes the following services:
- 28 (a) Assignment of a care coordinator;
- 29 (b) An intake evaluation with the provider of the less 30 restrictive alternative treatment;
- 31 (c) A psychiatric evaluation;
- 32 (d) Medication management;
- 33 (e) A schedule of regular contacts with the provider of the less
- 34 restrictive alternative treatment services for the duration of the
- 35 order;
- 36 (f) A transition plan addressing access to continued services at
- 37 the expiration of the order; and
- 38 (g) An individual crisis plan.

p. 8 HB 2541

- 1 (2) Less restrictive alternative treatment may additionally 2 include requirements to participate in the following services:
 - (a) Psychotherapy;
- 4 (b) Nursing;

5

12

13

14

15

16 17

18

19

2021

22

23

2425

- (c) Substance abuse counseling;
- 6 (d) Residential treatment; and
- 7 (e) Support for housing, benefits, education, and employment.
- 8 (3) Less restrictive alternative treatment must be administered 9 by a provider that is certified or licensed to provide or coordinate 10 the full scope of services required under the less restrictive 11 alternative order and that has agreed to assume this responsibility.
 - (4) The care coordinator assigned to a person ordered to less restrictive alternative treatment must submit an individualized plan for the person's treatment services to the court that entered the order. An initial plan must be submitted as soon as possible following the intake evaluation and a revised plan must be submitted upon any subsequent modification.
 - (5) For the purpose of this section, "care coordinator" means a clinical practitioner who coordinates the activities of less restrictive alternative treatment. The care coordinator coordinates activities with the designated mental health professionals necessary for enforcement and continuation of less restrictive alternative orders and is responsible for coordinating service activities with other agencies and establishing and maintaining a therapeutic relationship with the individual on a continuing basis.

--- END ---

p. 9 HB 2541