SENATE BILL REPORT SB 5580

As Reported by Senate Committee On: Human Services, Mental Health & Housing, February 8, 2017

Title: An act relating to integrating the treatment systems for mental health and substance use disorders.

Brief Description: Concerning professionals qualified to examine individuals in the mental health and substance use disorder treatment systems.

Sponsors: Senator O'Ban; by request of Department of Social and Health Services.

Brief History:

Committee Activity: Human Services, Mental Health & Housing: 2/06/17, 2/08/17 [DPS].

Brief Summary of Substitute Bill

- Allows a chemical dependency professional, instead of a mental health professional, to sign a petition for chemical dependency involuntary treatment.
- Allows chemical dependency professionals to participate in civil commitment evaluations related to integrated crisis response.

SENATE COMMITTEE ON HUMAN SERVICES, MENTAL HEALTH & HOUSING

Majority Report: That Substitute Senate Bill No. 5580 be substituted therefor, and the substitute bill do pass.

Signed by Senators O'Ban, Chair; Miloscia, Vice Chair; Darneille, Ranking Minority Member; Carlyle, Hunt and Padden.

Staff: Kevin Black (786-7747)

Background: Washington State has parallel involuntary treatment systems for mental health and chemical dependency. While the legal structures surrounding the two commitment systems are similar, availability of secure commitment beds related to substance use disorder treatment are quite limited, and practice diverges. In each system a crisis responder, called a designated mental health professional (DMHP) or designated chemical dependency specialist (DCDS), is summoned by the crisis line to perform a civil commitment investigation. The

Senate Bill Report - 1 - SB 5580

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crisis responder is legally empowered to detain the person for a limited time to an evaluation and treatment facility (E&T) or substance use disorder treatment program if the person is found to meet civil commitment criteria, and there is a bed available. If the person continues to require involuntary treatment, a petition may be filed asking the court to authorize up to 14 additional days of involuntary treatment, or 90 days of less restrictive alternative treatment in the community. A subsequent petition for up to 90 days of involuntary treatment may be filed.

In 2016, the Legislature passed Engrossed Third Substitute House Bill 1713, which provided for creation of an Integrated Crisis Response system by April 1, 2018. Under this system, one crisis responder, called a designated crisis responder, would perform a simultaneous evaluation for civil commitment based on the presence of a mental disorder or substance use disorder. If the person is detained, the detention would be to an E&T, secure detox facility, or approved substance use disorder treatment facility. Amendments were made to the existing chemical dependency involuntary treatment system as a bridge to the effective date of April 1, 2018. As part of these amendments, the required signatories to a chemical dependency involuntary treatment petition were changed from the signature of a DCDS to the signature of two licensed professionals, including some combination of a physician, physician assistant, psychiatric advanced registered nurse practitioner, and a mental health professional.

A mental health professional is a psychiatrist, psychologist, physician assistant working with a supervising psychiatrist, psychiatric advanced registered nurse practitioner, psychiatric nurse, or social worker. The Department of Social and Health Services (DSHS) may define other mental health professionals by rule. A chemical dependency professional is a person certified in chemical dependency counseling by the Department of Health.

Substance use disorder is the current terminology used by the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), published in 2013, to describe a condition in which the use of one or more substances leads to clinically significant impairment or distress. The term replaces the earlier term of chemical dependency disorder.

Summary of Bill: The bill as referred to committee not considered.

Summary of Bill (First Substitute): Provisions of law related to chemical dependency involuntary treatment effective until April 1, 2018, are changed to allow for a civil commitment petition to be signed by a chemical dependency professional, instead of a mental health professional. These provisions are subject to an emergency clause and take effect immediately.

Provisions of law related to integrated crisis response after April 1, 2018, are changed to allow a chemical dependency professional to evaluate a person for civil commitment and sign a 14-day, 90-day, or 180-day civil commitment petition. If a person is detained for mental health treatment, the petition must be signed by a mental health professional.

References to chemical dependency treatment are changed to substance use disorder treatment.

Appropriation: None.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: The bill contains an emergency clause pertaining to section one and takes effect immediately. Other provisions 90 days.

Staff Summary of Public Testimony on First Substitute: PRO: The original bill was at the request of the Department to do technical cleanup from last year's House bill. The substitute makes other changes that think farther ahead to the status after April 2018. We are fine with the changes.

Persons Testifying: PRO: Chris Imhoff, DSHS.

Persons Signed In To Testify But Not Testifying: No one.

Senate Bill Report - 3 - SB 5580