

CERTIFICATION OF ENROLLMENT

**ENGROSSED SUBSTITUTE HOUSE BILL 1768**

Chapter 444, Laws of 2019

66th Legislature  
2019 Regular Session

SUBSTANCE USE DISORDER PROFESSIONALS--VARIOUS PROVISIONS

EFFECTIVE DATE: July 28, 2019—Except for section 13, which becomes effective August 1, 2020; and section 19, which becomes effective July 1, 2026.

Passed by the House April 28, 2019  
Yeas 98 Nays 0

FRANK CHOPP

**Speaker of the House of Representatives**

Passed by the Senate April 27, 2019  
Yeas 48 Nays 0

CYRUS HABIB

**President of the Senate**

Approved May 21, 2019 1:57 PM

JAY INSLEE

**Governor of the State of Washington**

CERTIFICATE

I, Bernard Dean, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **ENGROSSED SUBSTITUTE HOUSE BILL 1768** as passed by the House of Representatives and the Senate on the dates hereon set forth.

BERNARD DEAN

**Chief Clerk**

FILED

May 21, 2019

**Secretary of State  
State of Washington**

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**ENGROSSED SUBSTITUTE HOUSE BILL 1768**

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AS AMENDED BY THE SENATE

Passed Legislature - 2019 Regular Session

**State of Washington                      66th Legislature                      2019 Regular Session**

**By** House Health Care & Wellness (originally sponsored by Representatives Davis, Macri, Jinkins, Ormsby, Slatter, and Tharinger)

READ FIRST TIME 02/22/19.

1            AN    ACT    Relating to modernizing substance use disorder  
2 professional practice; amending RCW 18.205.010, 18.205.020,  
3 18.205.030, 18.205.080, 18.205.090, 18.205.095, 18.205.100,  
4 10.77.079, 13.40.020, 13.40.042, 18.130.040, 43.70.442, 43.70.442,  
5 70.97.010, 70.97.030, 71.34.020, 71.34.720, 71.34.720, 71.34.760,  
6 18.130.175, 43.43.842, and 18.130.055; reenacting and amending RCW  
7 71.05.020; adding new sections to chapter 18.205 RCW; adding a new  
8 section to chapter 18.83 RCW; adding a new section to chapter 18.225  
9 RCW; creating new sections; providing effective dates; and providing  
10 expiration dates.

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

12            **Sec. 1.** RCW 18.205.010 and 1998 c 243 s 1 are each amended to  
13 read as follows:

14            The legislature recognizes (~~chemical dependency~~) substance use  
15 disorder professionals as discrete health professionals. (~~Chemical~~  
16 ~~dependency~~) Substance use disorder professional certification serves  
17 the public interest.

18            **Sec. 2.** RCW 18.205.020 and 2008 c 135 s 15 are each amended to  
19 read as follows:

1 The definitions in this section apply throughout this chapter  
2 unless the context clearly requires otherwise.

3 (1) "Certification" means a voluntary process recognizing an  
4 individual who qualifies by examination and meets established  
5 educational prerequisites, and which protects the title of practice.

6 ~~(2) ("Certified chemical dependency professional" means an  
7 individual certified in chemical dependency counseling, under this  
8 chapter.~~

9 ~~(3) "Certified chemical dependency professional trainee" means an  
10 individual working toward the education and experience requirements  
11 for certification as a chemical dependency professional.~~

12 ~~(4) "Chemical dependency counseling" means employing the core  
13 competencies of chemical dependency counseling to assist or attempt  
14 to assist an alcohol or drug addicted person to develop and maintain  
15 abstinence from alcohol and other mood-altering drugs.~~

16 ~~(5)) "Committee" means the ((chemical dependency)) substance use  
17 disorder professional certification advisory committee established  
18 under this chapter.~~

19 ~~((+6)) (3) "Core competencies of ((chemical dependency))  
20 substance use disorder counseling" means competency in the nationally  
21 recognized knowledge, skills, and attitudes of professional practice,  
22 including assessment and diagnosis of ((chemical dependency))  
23 substance use disorders, ((chemical dependency)) substance use  
24 disorder treatment planning and referral, patient and family  
25 education in the disease of ((chemical dependency)) substance use  
26 disorders, individual and group counseling ((with alcoholic and drug  
27 addicted individuals)), relapse prevention counseling, and case  
28 management, all oriented to assist ((alcoholic and drug addicted  
29 patients to achieve and maintain abstinence from mood-altering  
30 substances and develop independent support systems)) individuals with  
31 substance use disorder in their recovery.~~

32 ~~((+7)) (4) "Department" means the department of health.~~

33 ~~((+8)) (5) "Health profession" means a profession providing  
34 health services regulated under the laws of this state.~~

35 ~~((+9)) (6) "Recovery" means a process of change through which  
36 individuals improve their health and wellness, live self-directed  
37 lives, and strive to reach their full potential. Recovery often  
38 involves achieving remission from active substance use disorder.~~

39 (7) "Secretary" means the secretary of health or the secretary's  
40 designee.

1 (8) "Substance use disorder counseling" means employing the core  
2 competencies of substance use disorder counseling to assist or  
3 attempt to assist individuals with substance use disorder in their  
4 recovery.

5 (9) "Substance use disorder professional" means an individual  
6 certified in substance use disorder counseling under this chapter.

7 (10) "Substance use disorder professional trainee" means an  
8 individual working toward the education and experience requirements  
9 for certification as a substance use disorder professional.

10 (11) "Co-occurring disorder specialist" means an individual  
11 possessing an enhancement that certifies the individual to provide  
12 substance use disorder counseling subject to the practice limitations  
13 under section 25 of this act.

14 (12) "Agency" means (a) a community behavioral health agency or  
15 facility operated, licensed, or certified by the state of Washington;  
16 (b) a federally recognized Indian tribe located within the state; (c)  
17 a county; (d) a federally qualified health center; or (e) a hospital.

18 (13) "Counseling" means employing any therapeutic techniques  
19 including, but not limited to, social work, mental health counseling,  
20 marriage and family therapy, and hypnotherapy, for a fee, that offer,  
21 assist, or attempt to assist an individual or individuals in the  
22 amelioration or adjustment of mental, emotional, or behavioral  
23 problems, and includes therapeutic techniques to achieve sensitivity  
24 and awareness of self and others and the development of human  
25 potential. For the purposes of this chapter, nothing may be construed  
26 to imply that the practice of hypnotherapy is necessarily limited to  
27 counseling.

28 **Sec. 3.** RCW 18.205.030 and 2008 c 135 s 16 are each amended to  
29 read as follows:

30 No person may represent oneself as a certified ~~((chemical~~  
31 ~~dependency)) substance use disorder professional ~~((or))~~, certified  
32 ~~((chemical dependency)) substance use disorder professional trainee,~~  
33 or co-occurring disorder specialist or use any title or description  
34 of services of a certified ~~((chemical dependency)) substance use~~  
35 disorder professional ~~((or))~~, certified ~~((chemical dependency))~~  
36 substance use disorder professional trainee, or co-occurring disorder  
37 specialist without applying for certification, meeting the required  
38 qualifications, and being certified by the department of health,  
39 unless otherwise exempted by this chapter.~~

1       **Sec. 4.** RCW 18.205.080 and 2018 c 201 s 9007 are each amended to  
2 read as follows:

3       (1) The secretary shall appoint a (~~chemical-dependency~~)  
4 substance use disorder certification advisory committee to further  
5 the purposes of this chapter. The committee shall be composed of  
6 seven members, one member initially appointed for a term of one year,  
7 three for a term of two years, and three for a term of three years.  
8 Subsequent appointments shall be for terms of three years. No person  
9 may serve as a member of the committee for more than two consecutive  
10 terms. Members of the committee shall be residents of this state. The  
11 committee shall be composed of four certified (~~chemical-dependency~~)  
12 substance use disorder professionals; one (~~chemical-dependency~~)  
13 substance use disorder treatment program director; one physician  
14 licensed under chapter 18.71 or 18.57 RCW who is certified in  
15 addiction medicine or a licensed or certified mental health  
16 practitioner; and one member of the public who has received  
17 (~~chemical-dependency~~) substance use disorder counseling.

18       (2) The secretary may remove any member of the committee for  
19 cause as specified by rule. In the case of a vacancy, the secretary  
20 shall appoint a person to serve for the remainder of the unexpired  
21 term.

22       (3) The committee shall meet at the times and places designated  
23 by the secretary and shall hold meetings during the year as necessary  
24 to provide advice to the director. The committee may elect a chair  
25 and a vice chair. A majority of the members currently serving shall  
26 constitute a quorum.

27       (4) Each member of the committee shall be reimbursed for travel  
28 expenses as authorized in RCW 43.03.050 and 43.03.060. In addition,  
29 members of the committee shall be compensated in accordance with RCW  
30 43.03.240 when engaged in the authorized business of the committee.

31       (5) The director of the health care authority, or his or her  
32 designee, shall serve as an ex officio member of the committee.

33       (6) The secretary, members of the committee, or individuals  
34 acting on their behalf are immune from suit in any action, civil or  
35 criminal, based on any certification or disciplinary proceedings or  
36 other official acts performed in the course of their duties.

37       **Sec. 5.** RCW 18.205.090 and 2001 c 251 s 30 are each amended to  
38 read as follows:

1 (1) The secretary shall issue a certificate to any applicant who  
2 demonstrates to the secretary's satisfaction that the following  
3 requirements have been met:

4 (a) Completion of an educational program approved by the  
5 secretary or successful completion of alternate training that meets  
6 established criteria;

7 (b) Successful completion of an approved examination, based on  
8 core competencies of (~~chemical dependency~~) substance use disorder  
9 counseling; and

10 (c) Successful completion of an experience requirement that  
11 establishes fewer hours of experience for applicants with higher  
12 levels of relevant education. In meeting any experience requirement  
13 established under this subsection, the secretary may not require more  
14 than one thousand five hundred hours of experience in (~~chemical~~  
15 ~~dependency~~) substance use disorder counseling for applicants who are  
16 licensed under chapter 18.83 RCW or under chapter 18.79 RCW as  
17 advanced registered nurse practitioners.

18 (2) The secretary shall establish by rule what constitutes  
19 adequate proof of meeting the criteria.

20 (3) Applicants are subject to the grounds for denial of a  
21 certificate or issuance of a conditional certificate under chapter  
22 18.130 RCW.

23 (4) Certified (~~chemical dependency~~) substance use disorder  
24 professionals shall not be required to be registered under chapter  
25 18.19 RCW or licensed under chapter 18.225 RCW.

26 (5) As of the effective date of this section, a person certified  
27 under this chapter holding the title of chemical dependency  
28 professional is considered to hold the title of substance use  
29 disorder professional until such time as the person's present  
30 certification expires or is renewed.

31 **Sec. 6.** RCW 18.205.095 and 2008 c 135 s 18 are each amended to  
32 read as follows:

33 (1) The secretary shall issue a trainee certificate to any  
34 applicant who demonstrates to the satisfaction of the secretary that  
35 he or she is working toward the education and experience requirements  
36 in RCW 18.205.090.

37 (2) A trainee certified under this section shall submit to the  
38 secretary for approval a declaration, in accordance with rules  
39 adopted by the department, that he or she is enrolled in an approved

1 education program and actively pursuing the experience requirements  
2 in RCW 18.205.090. This declaration must be updated with the  
3 trainee's annual renewal.

4 (3) A trainee certified under this section may practice only  
5 under the supervision of a certified (~~chemical dependency~~)  
6 substance use disorder professional. The first fifty hours of any  
7 face-to-face client contact must be under direct observation. All  
8 remaining experience must be under supervision in accordance with  
9 rules adopted by the department.

10 (4) A certified (~~chemical dependency~~) substance use disorder  
11 professional trainee provides (~~chemical dependency~~) substance use  
12 disorder assessments, counseling, and case management with a state  
13 regulated agency and can provide clinical services to patients  
14 consistent with his or her education, training, and experience as  
15 approved by his or her supervisor.

16 (5) A trainee certification may only be renewed four times.

17 (6) Applicants are subject to denial of a certificate or issuance  
18 of a conditional certificate for the reasons set forth in chapter  
19 18.130 RCW.

20 (7) As of the effective date of this section, a person certified  
21 under this chapter holding the title of chemical dependency  
22 professional trainee is considered to hold the title of substance use  
23 disorder professional trainee until such time as the person's present  
24 certification expires or is renewed.

25 **Sec. 7.** RCW 18.205.100 and 2000 c 171 s 42 are each amended to  
26 read as follows:

27 The secretary may establish by rule the standards and procedures  
28 for approval of educational programs and alternative training. The  
29 requirements for who may provide approved supervision towards  
30 training must be the same for all applicants in the regular or  
31 alternative training pathways. The requirements for who may provide  
32 approved supervision towards training must allow approved supervision  
33 to be provided by a person who meets or exceeds the requirements of a  
34 certified substance use disorder professional in the state of  
35 Washington and who would be eligible to take the examination required  
36 for certification. The secretary may utilize or contract with  
37 individuals or organizations having expertise in the profession or in  
38 education to assist in the evaluations. The secretary shall establish  
39 by rule the standards and procedures for revocation of approval of

1 educational programs. The standards and procedures set shall apply  
2 equally to educational programs and training in the United States and  
3 in foreign jurisdictions. The secretary may establish a fee for  
4 educational program evaluations.

5 **Sec. 8.** RCW 10.77.079 and 2015 1st sp.s. c 7 s 9 are each  
6 amended to read as follows:

7 (1) If the issue of competency to stand trial is raised by the  
8 court or a party under RCW 10.77.060, the prosecutor may continue  
9 with the competency process or dismiss the charges without prejudice  
10 and refer the defendant for assessment by a mental health  
11 professional, (~~chemical dependency~~) substance use disorder  
12 professional, co-occurring disorder specialist, or developmental  
13 disabilities professional to determine the appropriate service needs  
14 for the defendant.

15 (2) This section does not apply to defendants with a current  
16 charge or prior conviction for a violent offense or sex offense as  
17 defined in RCW 9.94A.030, or a violation of RCW 9A.36.031(1) (d),  
18 (f), or (h).

19 **Sec. 9.** RCW 13.40.020 and 2018 c 82 s 3 are each amended to read  
20 as follows:

21 For the purposes of this chapter:

22 (1) "Assessment" means an individualized examination of a child  
23 to determine the child's psychosocial needs and problems, including  
24 the type and extent of any mental health, substance abuse, or co-  
25 occurring mental health and substance abuse disorders, and  
26 recommendations for treatment. "Assessment" includes, but is not  
27 limited to, drug and alcohol evaluations, psychological and  
28 psychiatric evaluations, records review, clinical interview, and  
29 administration of a formal test or instrument;

30 (2) "Community-based rehabilitation" means one or more of the  
31 following: Employment; attendance of information classes; literacy  
32 classes; counseling, outpatient substance abuse treatment programs,  
33 outpatient mental health programs, anger management classes,  
34 education or outpatient treatment programs to prevent animal cruelty,  
35 or other services including, when appropriate, restorative justice  
36 programs; or attendance at school or other educational programs  
37 appropriate for the juvenile as determined by the school district.



1 Placement in community-based rehabilitation programs is subject to  
2 available funds;

3 (3) "Community-based sanctions" may include one or more of the  
4 following:

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

6 (b) Community restitution not to exceed one hundred fifty hours  
7 of community restitution;

8 (4) "Community restitution" means compulsory service, without  
9 compensation, performed for the benefit of the community by the  
10 offender as punishment for committing an offense. Community  
11 restitution may be performed through public or private organizations  
12 or through work crews;

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

26 (a) Community-based sanctions;

27 (b) Community-based rehabilitation;

28 (c) Monitoring and reporting requirements;

29 (d) Posting of a probation bond;

30 (e) Residential treatment, where substance abuse, mental health,  
31 and/or co-occurring disorders have been identified in an assessment  
32 by a qualified mental health professional, psychologist,  
33 psychiatrist, co-occurring disorder specialist, or ~~((chemical~~  
34 ~~dependency)) substance use disorder professional and a funded bed is  
35 available. If a child agrees to voluntary placement in a state-funded  
36 long-term evaluation and treatment facility, the case must follow the  
37 existing placement procedure including consideration of less  
38 restrictive treatment options and medical necessity.~~

39 (i) A court may order residential treatment after consideration  
40 and findings regarding whether:

1 (A) The referral is necessary to rehabilitate the child;

2 (B) The referral is necessary to protect the public or the child;

3 (C) The referral is in the child's best interest;

4 (D) The child has been given the opportunity to engage in less  
5 restrictive treatment and has been unable or unwilling to comply; and

6 (E) Inpatient treatment is the least restrictive action  
7 consistent with the child's needs and circumstances.

8 (ii) In any case where a court orders a child to inpatient  
9 treatment under this section, the court must hold a review hearing no  
10 later than sixty days after the youth begins inpatient treatment, and  
11 every thirty days thereafter, as long as the youth is in inpatient  
12 treatment;

13 (6) "Confinement" means physical custody by the department of  
14 children, youth, and families in a facility operated by or pursuant  
15 to a contract with the state, or physical custody in a detention  
16 facility operated by or pursuant to a contract with any county. The  
17 county may operate or contract with vendors to operate county  
18 detention facilities. The department may operate or contract to  
19 operate detention facilities for juveniles committed to the  
20 department. Pretrial confinement or confinement of less than thirty-  
21 one days imposed as part of a disposition or modification order may  
22 be served consecutively or intermittently, in the discretion of the  
23 court;

24 (7) "Court," when used without further qualification, means the  
25 juvenile court judge(s) or commissioner(s);

26 (8) "Criminal history" includes all criminal complaints against  
27 the respondent for which, prior to the commission of a current  
28 offense:

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

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

1 (9) "Department" means the department of children, youth, and  
2 families;

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

9 (11) "Diversion unit" means any probation counselor who enters  
10 into a diversion agreement with an alleged youthful offender, or any  
11 other person, community accountability board, youth court under the  
12 supervision of the juvenile court, or other entity with whom the  
13 juvenile court administrator has contracted to arrange and supervise  
14 such agreements pursuant to RCW 13.40.080, or any person, community  
15 accountability board, or other entity specially funded by the  
16 legislature to arrange and supervise diversion agreements in  
17 accordance with the requirements of this chapter. For purposes of  
18 this subsection, "community accountability board" means a board  
19 comprised of members of the local community in which the juvenile  
20 offender resides. The superior court shall appoint the members. The  
21 boards shall consist of at least three and not more than seven  
22 members. If possible, the board should include a variety of  
23 representatives from the community, such as a law enforcement  
24 officer, teacher or school administrator, high school student,  
25 parent, and business owner, and should represent the cultural  
26 diversity of the local community;

27 (12) "Foster care" means temporary physical care in a foster  
28 family home or group care facility as defined in RCW 74.15.020 and  
29 licensed by the department, or other legally authorized care;

30 (13) "Institution" means a juvenile facility established pursuant  
31 to chapters 72.05 and 72.16 through 72.20 RCW;

32 (14) "Intensive supervision program" means a parole program that  
33 requires intensive supervision and monitoring, offers an array of  
34 individualized treatment and transitional services, and emphasizes  
35 community involvement and support in order to reduce the likelihood a  
36 juvenile offender will commit further offenses;

37 (15) "Juvenile," "youth," and "child" mean any individual who is  
38 under the chronological age of eighteen years and who has not been  
39 previously transferred to adult court pursuant to RCW 13.40.110,  
40 unless the individual was convicted of a lesser charge or acquitted

1 of the charge for which he or she was previously transferred pursuant  
2 to RCW 13.40.110 or who is not otherwise under adult court  
3 jurisdiction;

4 (16) "Juvenile offender" means any juvenile who has been found by  
5 the juvenile court to have committed an offense, including a person  
6 eighteen years of age or older over whom jurisdiction has been  
7 extended under RCW 13.40.300;

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

11 (18) "Local sanctions" means one or more of the following: (a)  
12 0-30 days of confinement; (b) 0-12 months of community supervision;  
13 (c) 0-150 hours of community restitution; or (d) \$0-\$500 fine;

14 (19) "Manifest injustice" means a disposition that would either  
15 impose an excessive penalty on the juvenile or would impose a  
16 serious, and clear danger to society in light of the purposes of this  
17 chapter;

18 (20) "Monitoring and reporting requirements" means one or more of  
19 the following: Curfews; requirements to remain at home, school, work,  
20 or court-ordered treatment programs during specified hours;  
21 restrictions from leaving or entering specified geographical areas;  
22 requirements to report to the probation officer as directed and to  
23 remain under the probation officer's supervision; and other  
24 conditions or limitations as the court may require which may not  
25 include confinement;

26 (21) "Offense" means an act designated a violation or a crime if  
27 committed by an adult under the law of this state, under any  
28 ordinance of any city or county of this state, under any federal law,  
29 or under the law of another state if the act occurred in that state;

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

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

39 (b) Remove a disruptive juvenile offender who is unwilling to  
40 leave the area voluntarily; or

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

2 (23) "Postpartum recovery" means (a) the entire period a woman or  
3 youth is in the hospital, birthing center, or clinic after giving  
4 birth and (b) an additional time period, if any, a treating physician  
5 determines is necessary for healing after the youth leaves the  
6 hospital, birthing center, or clinic;

7 (24) "Probation bond" means a bond, posted with sufficient  
8 security by a surety justified and approved by the court, to secure  
9 the offender's appearance at required court proceedings and  
10 compliance with court-ordered community supervision or conditions of  
11 release ordered pursuant to RCW 13.40.040 or 13.40.050. It also means  
12 a deposit of cash or posting of other collateral in lieu of a bond if  
13 approved by the court;

14 (25) "Respondent" means a juvenile who is alleged or proven to  
15 have committed an offense;

16 (26) "Restitution" means financial reimbursement by the offender  
17 to the victim, and shall be limited to easily ascertainable damages  
18 for injury to or loss of property, actual expenses incurred for  
19 medical treatment for physical injury to persons, lost wages  
20 resulting from physical injury, and costs of the victim's counseling  
21 reasonably related to the offense. Restitution shall not include  
22 reimbursement for damages for mental anguish, pain and suffering, or  
23 other intangible losses. Nothing in this chapter shall limit or  
24 replace civil remedies or defenses available to the victim or  
25 offender;

26 (27) "Restorative justice" means practices, policies, and  
27 programs informed by and sensitive to the needs of crime victims that  
28 are designed to encourage offenders to accept responsibility for  
29 repairing the harm caused by their offense by providing safe and  
30 supportive opportunities for voluntary participation and  
31 communication between the victim, the offender, their families, and  
32 relevant community members;

33 (28) "Restraints" means anything used to control the movement of  
34 a person's body or limbs and includes:

35 (a) Physical restraint; or

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

39 (29) "Screening" means a process that is designed to identify a  
40 child who is at risk of having mental health, substance abuse, or co-

1 occurring mental health and substance abuse disorders that warrant  
2 immediate attention, intervention, or more comprehensive assessment.  
3 A screening may be undertaken with or without the administration of a  
4 formal instrument;

5 (30) "Secretary" means the secretary of the department;

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

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

12 (33) "Sexual motivation" means that one of the purposes for which  
13 the respondent committed the offense was for the purpose of his or  
14 her sexual gratification;

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

20 (35) "Transportation" means the conveying, by any means, of an  
21 incarcerated pregnant youth from the institution or detention  
22 facility to another location from the moment she leaves the  
23 institution or detention facility to the time of arrival at the other  
24 location, and includes the escorting of the pregnant incarcerated  
25 youth from the institution or detention facility to a transport  
26 vehicle and from the vehicle to the other location;

27 (36) "Violation" means an act or omission, which if committed by  
28 an adult, must be proven beyond a reasonable doubt, and is punishable  
29 by sanctions which do not include incarceration;

30 (37) "Violent offense" means a violent offense as defined in RCW  
31 9.94A.030;

32 (38) "Youth court" means a diversion unit under the supervision  
33 of the juvenile court.

34 **Sec. 10.** RCW 13.40.042 and 2014 c 128 s 4 are each amended to  
35 read as follows:

36 (1) When a police officer has reasonable cause to believe that a  
37 juvenile has committed acts constituting a nonfelony crime that is  
38 not a serious offense as identified in RCW 10.77.092, and the officer  
39 believes that the juvenile suffers from a mental disorder, and the

1 local prosecutor has entered into an agreement with law enforcement  
2 regarding the detention of juveniles who may have a mental disorder  
3 or may be suffering from chemical dependency, the arresting officer,  
4 instead of taking the juvenile to the local juvenile detention  
5 facility, may take the juvenile to:

6 (a) An evaluation and treatment facility as defined in RCW  
7 71.34.020 if the juvenile suffers from a mental disorder and the  
8 facility has been identified as an alternative location by agreement  
9 of the prosecutor, law enforcement, and the mental health provider;

10 (b) A facility or program identified by agreement of the  
11 prosecutor and law enforcement; or

12 (c) A location already identified and in use by law enforcement  
13 for the purpose of a behavioral health diversion.

14 (2) For the purposes of this section, an "alternative location"  
15 means a facility or program that has the capacity to evaluate a youth  
16 and, if determined to be appropriate, develop a behavioral health  
17 intervention plan and initiate treatment.

18 (3) If a juvenile is taken to any location described in  
19 subsection (1)(a) or (b) of this section, the juvenile may be held  
20 for up to twelve hours and must be examined by a mental health or  
21 (~~chemical dependency~~) substance use disorder professional within  
22 three hours of arrival.

23 (4) The authority provided pursuant to this section is in  
24 addition to existing authority under RCW 10.31.110 and 10.31.120.

25 **Sec. 11.** RCW 18.130.040 and 2017 c 336 s 18 are each amended to  
26 read as follows:

27 (1) This chapter applies only to the secretary and the boards and  
28 commissions having jurisdiction in relation to the professions  
29 licensed under the chapters specified in this section. This chapter  
30 does not apply to any business or profession not licensed under the  
31 chapters specified in this section.

32 (2)(a) The secretary has authority under this chapter in relation  
33 to the following professions:

34 (i) Dispensing opticians licensed and designated apprentices  
35 under chapter 18.34 RCW;

36 (ii) Midwives licensed under chapter 18.50 RCW;

37 (iii) Ocularists licensed under chapter 18.55 RCW;

38 (iv) Massage therapists and businesses licensed under chapter  
39 18.108 RCW;

- 1 (v) Dental hygienists licensed under chapter 18.29 RCW;
- 2 (vi) East Asian medicine practitioners licensed under chapter  
3 18.06 RCW;
- 4 (vii) Radiologic technologists certified and X-ray technicians  
5 registered under chapter 18.84 RCW;
- 6 (viii) Respiratory care practitioners licensed under chapter  
7 18.89 RCW;
- 8 (ix) Hypnotherapists and agency affiliated counselors registered  
9 and advisors and counselors certified under chapter 18.19 RCW;
- 10 (x) Persons licensed as mental health counselors, mental health  
11 counselor associates, marriage and family therapists, marriage and  
12 family therapist associates, social workers, social work associates—  
13 advanced, and social work associates—independent clinical under  
14 chapter 18.225 RCW;
- 15 (xi) Persons registered as nursing pool operators under chapter  
16 18.52C RCW;
- 17 (xii) Nursing assistants registered or certified or medication  
18 assistants endorsed under chapter 18.88A RCW;
- 19 (xiii) Dietitians and nutritionists certified under chapter  
20 18.138 RCW;
- 21 (xiv) (~~(Chemical—dependency)~~) Substance use disorder  
22 professionals (~~(and chemical—dependency)~~), substance use disorder  
23 professional trainees, or co-occurring disorder specialists certified  
24 under chapter 18.205 RCW;
- 25 (xv) Sex offender treatment providers and certified affiliate sex  
26 offender treatment providers certified under chapter 18.155 RCW;
- 27 (xvi) Persons licensed and certified under chapter 18.73 RCW or  
28 RCW 18.71.205;
- 29 (xvii) Orthotists and prosthetists licensed under chapter 18.200  
30 RCW;
- 31 (xviii) Surgical technologists registered under chapter 18.215  
32 RCW;
- 33 (xix) Recreational therapists under chapter 18.230 RCW;
- 34 (xx) Animal massage therapists certified under chapter 18.240  
35 RCW;
- 36 (xxi) Athletic trainers licensed under chapter 18.250 RCW;
- 37 (xxii) Home care aides certified under chapter 18.88B RCW;
- 38 (xxiii) Genetic counselors licensed under chapter 18.290 RCW;
- 39 (xxiv) Reflexologists certified under chapter 18.108 RCW;



1 (xxv) Medical assistants-certified, medical assistants-  
2 hemodialysis technician, medical assistants-phlebotomist, forensic  
3 phlebotomist, and medical assistants-registered certified and  
4 registered under chapter 18.360 RCW; and

5 (xxvi) Behavior analysts, assistant behavior analysts, and  
6 behavior technicians under chapter 18.380 RCW.

7 (b) The boards and commissions having authority under this  
8 chapter are as follows:

9 (i) The podiatric medical board as established in chapter 18.22  
10 RCW;

11 (ii) The chiropractic quality assurance commission as established  
12 in chapter 18.25 RCW;

13 (iii) The dental quality assurance commission as established in  
14 chapter 18.32 RCW governing licenses issued under chapter 18.32 RCW,  
15 licenses and registrations issued under chapter 18.260 RCW, and  
16 certifications issued under chapter 18.350 RCW;

17 (iv) The board of hearing and speech as established in chapter  
18 18.35 RCW;

19 (v) The board of examiners for nursing home administrators as  
20 established in chapter 18.52 RCW;

21 (vi) The optometry board as established in chapter 18.54 RCW  
22 governing licenses issued under chapter 18.53 RCW;

23 (vii) The board of osteopathic medicine and surgery as  
24 established in chapter 18.57 RCW governing licenses issued under  
25 chapters 18.57 and 18.57A RCW;

26 (viii) The pharmacy quality assurance commission as established  
27 in chapter 18.64 RCW governing licenses issued under chapters 18.64  
28 and 18.64A RCW;

29 (ix) The medical quality assurance commission as established in  
30 chapter 18.71 RCW governing licenses and registrations issued under  
31 chapters 18.71 and 18.71A RCW;

32 (x) The board of physical therapy as established in chapter 18.74  
33 RCW;

34 (xi) The board of occupational therapy practice as established in  
35 chapter 18.59 RCW;

36 (xii) The nursing care quality assurance commission as  
37 established in chapter 18.79 RCW governing licenses and registrations  
38 issued under that chapter;

39 (xiii) The examining board of psychology and its disciplinary  
40 committee as established in chapter 18.83 RCW;

1 (xiv) The veterinary board of governors as established in chapter  
2 18.92 RCW;

3 (xv) The board of naturopathy established in chapter 18.36A RCW;  
4 and

5 (xvi) The board of denturists established in chapter 18.30 RCW.

6 (3) In addition to the authority to discipline license holders,  
7 the disciplining authority has the authority to grant or deny  
8 licenses. The disciplining authority may also grant a license subject  
9 to conditions.

10 (4) All disciplining authorities shall adopt procedures to ensure  
11 substantially consistent application of this chapter, the uniform  
12 disciplinary act, among the disciplining authorities listed in  
13 subsection (2) of this section.

14 **Sec. 12.** RCW 43.70.442 and 2016 c 90 s 5 are each amended to  
15 read as follows:

16 (1)(a) Each of the following professionals certified or licensed  
17 under Title 18 RCW shall, at least once every six years, complete  
18 training in suicide assessment, treatment, and management that is  
19 approved, in rule, by the relevant disciplining authority:

20 (i) An adviser or counselor certified under chapter 18.19 RCW;

21 (ii) A ~~((chemical—dependency))~~ substance use disorder  
22 professional licensed under chapter 18.205 RCW;

23 (iii) A marriage and family therapist licensed under chapter  
24 18.225 RCW;

25 (iv) A mental health counselor licensed under chapter 18.225 RCW;

26 (v) An occupational therapy practitioner licensed under chapter  
27 18.59 RCW;

28 (vi) A psychologist licensed under chapter 18.83 RCW;

29 (vii) An advanced social worker or independent clinical social  
30 worker licensed under chapter 18.225 RCW; and

31 (viii) A social worker associate—advanced or social worker  
32 associate—independent clinical licensed under chapter 18.225 RCW.

33 (b) The requirements in (a) of this subsection apply to a person  
34 holding a retired active license for one of the professions in (a) of  
35 this subsection.

36 (c) The training required by this subsection must be at least six  
37 hours in length, unless a disciplining authority has determined,  
38 under subsection (10)(b) of this section, that training that includes  
39 only screening and referral elements is appropriate for the

1 profession in question, in which case the training must be at least  
2 three hours in length.

3 (d) Beginning July 1, 2017, the training required by this  
4 subsection must be on the model list developed under subsection (6)  
5 of this section. Nothing in this subsection (1)(d) affects the  
6 validity of training completed prior to July 1, 2017.

7 (2)(a) Except as provided in (b) of this subsection, a  
8 professional listed in subsection (1)(a) of this section must  
9 complete the first training required by this section by the end of  
10 the first full continuing education reporting period after January 1,  
11 2014, or during the first full continuing education reporting period  
12 after initial licensure or certification, whichever occurs later.

13 (b) A professional listed in subsection (1)(a) of this section  
14 applying for initial licensure may delay completion of the first  
15 training required by this section for six years after initial  
16 licensure if he or she can demonstrate successful completion of the  
17 training required in subsection (1) of this section no more than six  
18 years prior to the application for initial licensure.

19 (3) The hours spent completing training in suicide assessment,  
20 treatment, and management under this section count toward meeting any  
21 applicable continuing education or continuing competency requirements  
22 for each profession.

23 (4)(a) A disciplining authority may, by rule, specify minimum  
24 training and experience that is sufficient to exempt an individual  
25 professional from the training requirements in subsections (1) and  
26 (5) of this section. Nothing in this subsection (4)(a) allows a  
27 disciplining authority to provide blanket exemptions to broad  
28 categories or specialties within a profession.

29 (b) A disciplining authority may exempt a professional from the  
30 training requirements of subsections (1) and (5) of this section if  
31 the professional has only brief or limited patient contact.

32 (5)(a) Each of the following professionals credentialed under  
33 Title 18 RCW shall complete a one-time training in suicide  
34 assessment, treatment, and management that is approved by the  
35 relevant disciplining authority:

36 (i) A chiropractor licensed under chapter 18.25 RCW;

37 (ii) A naturopath licensed under chapter 18.36A RCW;

38 (iii) A licensed practical nurse, registered nurse, or advanced  
39 registered nurse practitioner, other than a certified registered  
40 nurse anesthetist, licensed under chapter 18.79 RCW;

1 (iv) An osteopathic physician and surgeon licensed under chapter  
2 18.57 RCW, other than a holder of a postgraduate osteopathic medicine  
3 and surgery license issued under RCW 18.57.035;

4 (v) An osteopathic physician assistant licensed under chapter  
5 18.57A RCW;

6 (vi) A physical therapist or physical therapist assistant  
7 licensed under chapter 18.74 RCW;

8 (vii) A physician licensed under chapter 18.71 RCW, other than a  
9 resident holding a limited license issued under RCW 18.71.095(3);

10 (viii) A physician assistant licensed under chapter 18.71A RCW;

11 (ix) A pharmacist licensed under chapter 18.64 RCW; and

12 (x) A person holding a retired active license for one of the  
13 professions listed in (a)(i) through (ix) of this subsection.

14 (b)(i) A professional listed in (a)(i) through (viii) of this  
15 subsection or a person holding a retired active license for one of  
16 the professions listed in (a)(i) through (viii) of this subsection  
17 must complete the one-time training by the end of the first full  
18 continuing education reporting period after January 1, 2016, or  
19 during the first full continuing education reporting period after  
20 initial licensure, whichever is later. Training completed between  
21 June 12, 2014, and January 1, 2016, that meets the requirements of  
22 this section, other than the timing requirements of this subsection  
23 (5)(b), must be accepted by the disciplining authority as meeting the  
24 one-time training requirement of this subsection (5).

25 (ii) A licensed pharmacist or a person holding a retired active  
26 pharmacist license must complete the one-time training by the end of  
27 the first full continuing education reporting period after January 1,  
28 2017, or during the first full continuing education reporting period  
29 after initial licensure, whichever is later.

30 (c) The training required by this subsection must be at least six  
31 hours in length, unless a disciplining authority has determined,  
32 under subsection (10)(b) of this section, that training that includes  
33 only screening and referral elements is appropriate for the  
34 profession in question, in which case the training must be at least  
35 three hours in length.

36 (d) Beginning July 1, 2017, the training required by this  
37 subsection must be on the model list developed under subsection (6)  
38 of this section. Nothing in this subsection (5)(d) affects the  
39 validity of training completed prior to July 1, 2017.

1 (6) (a) The secretary and the disciplining authorities shall work  
2 collaboratively to develop a model list of training programs in  
3 suicide assessment, treatment, and management.

4 (b) The secretary and the disciplining authorities shall update  
5 the list at least once every two years.

6 (c) By June 30, 2016, the department shall adopt rules  
7 establishing minimum standards for the training programs included on  
8 the model list. The minimum standards must require that six-hour  
9 trainings include content specific to veterans and the assessment of  
10 issues related to imminent harm via lethal means or self-injurious  
11 behaviors and that three-hour trainings for pharmacists include  
12 content related to the assessment of issues related to imminent harm  
13 via lethal means. When adopting the rules required under this  
14 subsection (6) (c), the department shall:

15 (i) Consult with the affected disciplining authorities, public  
16 and private institutions of higher education, educators, experts in  
17 suicide assessment, treatment, and management, the Washington  
18 department of veterans affairs, and affected professional  
19 associations; and

20 (ii) Consider standards related to the best practices registry of  
21 the American foundation for suicide prevention and the suicide  
22 prevention resource center.

23 (d) Beginning January 1, 2017:

24 (i) The model list must include only trainings that meet the  
25 minimum standards established in the rules adopted under (c) of this  
26 subsection and any three-hour trainings that met the requirements of  
27 this section on or before July 24, 2015;

28 (ii) The model list must include six-hour trainings in suicide  
29 assessment, treatment, and management, and three-hour trainings that  
30 include only screening and referral elements; and

31 (iii) A person or entity providing the training required in this  
32 section may petition the department for inclusion on the model list.  
33 The department shall add the training to the list only if the  
34 department determines that the training meets the minimum standards  
35 established in the rules adopted under (c) of this subsection.

36 (7) The department shall provide the health profession training  
37 standards created in this section to the professional educator  
38 standards board as a model in meeting the requirements of RCW  
39 28A.410.226 and provide technical assistance, as requested, in the  
40 review and evaluation of educator training programs. The educator

1 training programs approved by the professional educator standards  
2 board may be included in the department's model list.

3 (8) Nothing in this section may be interpreted to expand or limit  
4 the scope of practice of any profession regulated under chapter  
5 18.130 RCW.

6 (9) The secretary and the disciplining authorities affected by  
7 this section shall adopt any rules necessary to implement this  
8 section.

9 (10) For purposes of this section:

10 (a) "Disciplining authority" has the same meaning as in RCW  
11 18.130.020.

12 (b) "Training in suicide assessment, treatment, and management"  
13 means empirically supported training approved by the appropriate  
14 disciplining authority that contains the following elements: Suicide  
15 assessment, including screening and referral, suicide treatment, and  
16 suicide management. However, the disciplining authority may approve  
17 training that includes only screening and referral elements if  
18 appropriate for the profession in question based on the profession's  
19 scope of practice. The board of occupational therapy may also approve  
20 training that includes only screening and referral elements if  
21 appropriate for occupational therapy practitioners based on practice  
22 setting.

23 (11) A state or local government employee is exempt from the  
24 requirements of this section if he or she receives a total of at  
25 least six hours of training in suicide assessment, treatment, and  
26 management from his or her employer every six years. For purposes of  
27 this subsection, the training may be provided in one six-hour block  
28 or may be spread among shorter training sessions at the employer's  
29 discretion.

30 (12) An employee of a community mental health agency licensed  
31 under chapter 71.24 RCW or a chemical dependency program certified  
32 under chapter 70.96A RCW is exempt from the requirements of this  
33 section if he or she receives a total of at least six hours of  
34 training in suicide assessment, treatment, and management from his or  
35 her employer every six years. For purposes of this subsection, the  
36 training may be provided in one six-hour block or may be spread among  
37 shorter training sessions at the employer's discretion.

38 **Sec. 13.** RCW 43.70.442 and 2017 c 262 s 4 are each amended to  
39 read as follows:

1 (1)(a) Each of the following professionals certified or licensed  
2 under Title 18 RCW shall, at least once every six years, complete  
3 training in suicide assessment, treatment, and management that is  
4 approved, in rule, by the relevant disciplining authority:

5 (i) An adviser or counselor certified under chapter 18.19 RCW;

6 (ii) A ~~((chemical—dependency))~~ substance use disorder  
7 professional licensed under chapter 18.205 RCW;

8 (iii) A marriage and family therapist licensed under chapter  
9 18.225 RCW;

10 (iv) A mental health counselor licensed under chapter 18.225 RCW;

11 (v) An occupational therapy practitioner licensed under chapter  
12 18.59 RCW;

13 (vi) A psychologist licensed under chapter 18.83 RCW;

14 (vii) An advanced social worker or independent clinical social  
15 worker licensed under chapter 18.225 RCW; and

16 (viii) A social worker associate—advanced or social worker  
17 associate—~~independent~~ clinical licensed under chapter 18.225 RCW.

18 (b) The requirements in (a) of this subsection apply to a person  
19 holding a retired active license for one of the professions in (a) of  
20 this subsection.

21 (c) The training required by this subsection must be at least six  
22 hours in length, unless a disciplining authority has determined,  
23 under subsection (10)(b) of this section, that training that includes  
24 only screening and referral elements is appropriate for the  
25 profession in question, in which case the training must be at least  
26 three hours in length.

27 (d) Beginning July 1, 2017, the training required by this  
28 subsection must be on the model list developed under subsection (6)  
29 of this section. Nothing in this subsection (1)(d) affects the  
30 validity of training completed prior to July 1, 2017.

31 (2)(a) Except as provided in (b) of this subsection, a  
32 professional listed in subsection (1)(a) of this section must  
33 complete the first training required by this section by the end of  
34 the first full continuing education reporting period after January 1,  
35 2014, or during the first full continuing education reporting period  
36 after initial licensure or certification, whichever occurs later.

37 (b) A professional listed in subsection (1)(a) of this section  
38 applying for initial licensure may delay completion of the first  
39 training required by this section for six years after initial  
40 licensure if he or she can demonstrate successful completion of the

1 training required in subsection (1) of this section no more than six  
2 years prior to the application for initial licensure.

3 (3) The hours spent completing training in suicide assessment,  
4 treatment, and management under this section count toward meeting any  
5 applicable continuing education or continuing competency requirements  
6 for each profession.

7 (4)(a) A disciplining authority may, by rule, specify minimum  
8 training and experience that is sufficient to exempt an individual  
9 professional from the training requirements in subsections (1) and  
10 (5) of this section. Nothing in this subsection (4)(a) allows a  
11 disciplining authority to provide blanket exemptions to broad  
12 categories or specialties within a profession.

13 (b) A disciplining authority may exempt a professional from the  
14 training requirements of subsections (1) and (5) of this section if  
15 the professional has only brief or limited patient contact.

16 (5)(a) Each of the following professionals credentialed under  
17 Title 18 RCW shall complete a one-time training in suicide  
18 assessment, treatment, and management that is approved by the  
19 relevant disciplining authority:

20 (i) A chiropractor licensed under chapter 18.25 RCW;

21 (ii) A naturopath licensed under chapter 18.36A RCW;

22 (iii) A licensed practical nurse, registered nurse, or advanced  
23 registered nurse practitioner, other than a certified registered  
24 nurse anesthetist, licensed under chapter 18.79 RCW;

25 (iv) An osteopathic physician and surgeon licensed under chapter  
26 18.57 RCW, other than a holder of a postgraduate osteopathic medicine  
27 and surgery license issued under RCW 18.57.035;

28 (v) An osteopathic physician assistant licensed under chapter  
29 18.57A RCW;

30 (vi) A physical therapist or physical therapist assistant  
31 licensed under chapter 18.74 RCW;

32 (vii) A physician licensed under chapter 18.71 RCW, other than a  
33 resident holding a limited license issued under RCW 18.71.095(3);

34 (viii) A physician assistant licensed under chapter 18.71A RCW;

35 (ix) A pharmacist licensed under chapter 18.64 RCW;

36 (x) A dentist licensed under chapter 18.32 RCW;

37 (xi) A dental hygienist licensed under chapter 18.29 RCW; and

38 (xii) A person holding a retired active license for one of the  
39 professions listed in (a)(i) through (xi) of this subsection.



1 (b)(i) A professional listed in (a)(i) through (viii) of this  
2 subsection or a person holding a retired active license for one of  
3 the professions listed in (a)(i) through (viii) of this subsection  
4 must complete the one-time training by the end of the first full  
5 continuing education reporting period after January 1, 2016, or  
6 during the first full continuing education reporting period after  
7 initial licensure, whichever is later. Training completed between  
8 June 12, 2014, and January 1, 2016, that meets the requirements of  
9 this section, other than the timing requirements of this subsection  
10 (5)(b), must be accepted by the disciplining authority as meeting the  
11 one-time training requirement of this subsection (5).

12 (ii) A licensed pharmacist or a person holding a retired active  
13 pharmacist license must complete the one-time training by the end of  
14 the first full continuing education reporting period after January 1,  
15 2017, or during the first full continuing education reporting period  
16 after initial licensure, whichever is later.

17 (iii) A licensed dentist, a licensed dental hygienist, or a  
18 person holding a retired active license as a dentist shall complete  
19 the one-time training by the end of the full continuing education  
20 reporting period after August 1, 2020, or during the first full  
21 continuing education reporting period after initial licensure,  
22 whichever is later. Training completed between July 23, 2017, and  
23 August 1, 2020, that meets the requirements of this section, other  
24 than the timing requirements of this subsection (5)(b)(iii), must be  
25 accepted by the disciplining authority as meeting the one-time  
26 training requirement of this subsection (5).

27 (c) The training required by this subsection must be at least six  
28 hours in length, unless a disciplining authority has determined,  
29 under subsection (10)(b) of this section, that training that includes  
30 only screening and referral elements is appropriate for the  
31 profession in question, in which case the training must be at least  
32 three hours in length.

33 (d) Beginning July 1, 2017, the training required by this  
34 subsection must be on the model list developed under subsection (6)  
35 of this section. Nothing in this subsection (5)(d) affects the  
36 validity of training completed prior to July 1, 2017.

37 (6)(a) The secretary and the disciplining authorities shall work  
38 collaboratively to develop a model list of training programs in  
39 suicide assessment, treatment, and management.

1 (b) The secretary and the disciplining authorities shall update  
2 the list at least once every two years.

3 (c) By June 30, 2016, the department shall adopt rules  
4 establishing minimum standards for the training programs included on  
5 the model list. The minimum standards must require that six-hour  
6 trainings include content specific to veterans and the assessment of  
7 issues related to imminent harm via lethal means or self-injurious  
8 behaviors and that three-hour trainings for pharmacists or dentists  
9 include content related to the assessment of issues related to  
10 imminent harm via lethal means. When adopting the rules required  
11 under this subsection (6)(c), the department shall:

12 (i) Consult with the affected disciplining authorities, public  
13 and private institutions of higher education, educators, experts in  
14 suicide assessment, treatment, and management, the Washington  
15 department of veterans affairs, and affected professional  
16 associations; and

17 (ii) Consider standards related to the best practices registry of  
18 the American foundation for suicide prevention and the suicide  
19 prevention resource center.

20 (d) Beginning January 1, 2017:

21 (i) The model list must include only trainings that meet the  
22 minimum standards established in the rules adopted under (c) of this  
23 subsection and any three-hour trainings that met the requirements of  
24 this section on or before July 24, 2015;

25 (ii) The model list must include six-hour trainings in suicide  
26 assessment, treatment, and management, and three-hour trainings that  
27 include only screening and referral elements; and

28 (iii) A person or entity providing the training required in this  
29 section may petition the department for inclusion on the model list.  
30 The department shall add the training to the list only if the  
31 department determines that the training meets the minimum standards  
32 established in the rules adopted under (c) of this subsection.

33 (7) The department shall provide the health profession training  
34 standards created in this section to the professional educator  
35 standards board as a model in meeting the requirements of RCW  
36 28A.410.226 and provide technical assistance, as requested, in the  
37 review and evaluation of educator training programs. The educator  
38 training programs approved by the professional educator standards  
39 board may be included in the department's model list.

1 (8) Nothing in this section may be interpreted to expand or limit  
2 the scope of practice of any profession regulated under chapter  
3 18.130 RCW.

4 (9) The secretary and the disciplining authorities affected by  
5 this section shall adopt any rules necessary to implement this  
6 section.

7 (10) For purposes of this section:

8 (a) "Disciplining authority" has the same meaning as in RCW  
9 18.130.020.

10 (b) "Training in suicide assessment, treatment, and management"  
11 means empirically supported training approved by the appropriate  
12 disciplining authority that contains the following elements: Suicide  
13 assessment, including screening and referral, suicide treatment, and  
14 suicide management. However, the disciplining authority may approve  
15 training that includes only screening and referral elements if  
16 appropriate for the profession in question based on the profession's  
17 scope of practice. The board of occupational therapy may also approve  
18 training that includes only screening and referral elements if  
19 appropriate for occupational therapy practitioners based on practice  
20 setting.

21 (11) A state or local government employee is exempt from the  
22 requirements of this section if he or she receives a total of at  
23 least six hours of training in suicide assessment, treatment, and  
24 management from his or her employer every six years. For purposes of  
25 this subsection, the training may be provided in one six-hour block  
26 or may be spread among shorter training sessions at the employer's  
27 discretion.

28 (12) An employee of a community mental health agency licensed  
29 under chapter 71.24 RCW or a chemical dependency program certified  
30 under chapter 70.96A RCW is exempt from the requirements of this  
31 section if he or she receives a total of at least six hours of  
32 training in suicide assessment, treatment, and management from his or  
33 her employer every six years. For purposes of this subsection, the  
34 training may be provided in one six-hour block or may be spread among  
35 shorter training sessions at the employer's discretion.

36 **Sec. 14.** RCW 70.97.010 and 2016 sp.s. c 29 s 419 are each  
37 amended to read as follows:

38 The definitions in this section apply throughout this chapter  
39 unless the context clearly requires otherwise.

1 (1) "Antipsychotic medications" means that class of drugs  
2 primarily used to treat serious manifestations of mental illness  
3 associated with thought disorders, which includes but is not limited  
4 to atypical antipsychotic medications.

5 (2) "Attending staff" means any person on the staff of a public  
6 or private agency having responsibility for the care and treatment of  
7 a patient.

8 (3) "Chemical dependency" means alcoholism, drug addiction, or  
9 dependence on alcohol and one or more other psychoactive chemicals,  
10 as the context requires and as those terms are defined in chapter  
11 71.05 RCW.

12 ~~((4)) ("Chemical dependency professional" means a person certified~~  
13 ~~as a chemical dependency professional by the department of health~~  
14 ~~under chapter 18.205 RCW.~~

15 ~~((5))~~ (5) "Commitment" means the determination by a court that an  
16 individual should be detained for a period of either evaluation or  
17 treatment, or both, in an inpatient or a less restrictive setting.

18 ~~((6))~~ (6) "Conditional release" means a modification of a  
19 commitment that may be revoked upon violation of any of its terms.

20 ~~((7))~~ (7) "Custody" means involuntary detention under chapter  
21 71.05 RCW, uninterrupted by any period of unconditional release from  
22 commitment from a facility providing involuntary care and treatment.

23 ~~((8))~~ (8) "Department" means the department of social and  
24 health services.

25 ~~((9))~~ (9) "Designated crisis responder" has the same meaning as  
26 in chapter 71.05 RCW.

27 ~~((10))~~ (10) "Detention" or "detain" means the lawful confinement  
28 of an individual under chapter 71.05 RCW.

29 ~~((11))~~ (11) "Discharge" means the termination of facility  
30 authority. The commitment may remain in place, be terminated, or be  
31 amended by court order.

32 ~~((12))~~ (12) "Enhanced services facility" means a facility that  
33 provides treatment and services to persons for whom acute inpatient  
34 treatment is not medically necessary and who have been determined by  
35 the department to be inappropriate for placement in other licensed  
36 facilities due to the complex needs that result in behavioral and  
37 security issues.

38 ~~((13))~~ (13) "Expanded community services program" means a  
39 nonsecure program of enhanced behavioral and residential support  
40 provided to long-term and residential care providers serving

1 specifically eligible clients who would otherwise be at risk for  
2 hospitalization at state hospital geriatric units.

3 ~~((14))~~ (13) "Facility" means an enhanced services facility.

4 ~~((15))~~ (14) "Gravely disabled" means a condition in which an  
5 individual, as a result of a mental disorder, as a result of the use  
6 of alcohol or other psychoactive chemicals, or both:

7 (a) Is in danger of serious physical harm resulting from a  
8 failure to provide for his or her essential human needs of health or  
9 safety; or

10 (b) Manifests severe deterioration in routine functioning  
11 evidenced by repeated and escalating loss of cognitive or volitional  
12 control over his or her actions and is not receiving such care as is  
13 essential for his or her health or safety.

14 ~~((16))~~ (15) "History of one or more violent acts" refers to the  
15 period of time ten years before the filing of a petition under this  
16 chapter or chapter 71.05 RCW, excluding any time spent, but not any  
17 violent acts committed, in a mental health facility or a long-term  
18 alcoholism or drug treatment facility, or in confinement as a result  
19 of a criminal conviction.

20 ~~((17))~~ (16) "Licensed physician" means a person licensed to  
21 practice medicine or osteopathic medicine and surgery in the state of  
22 Washington.

23 ~~((18))~~ (17) "Likelihood of serious harm" means:

24 (a) A substantial risk that:

25 (i) Physical harm will be inflicted by an individual upon his or  
26 her own person, as evidenced by threats or attempts to commit suicide  
27 or inflict physical harm on oneself;

28 (ii) Physical harm will be inflicted by an individual upon  
29 another, as evidenced by behavior that has caused such harm or that  
30 places another person or persons in reasonable fear of sustaining  
31 such harm; or

32 (iii) Physical harm will be inflicted by an individual upon the  
33 property of others, as evidenced by behavior that has caused  
34 substantial loss or damage to the property of others; or

35 (b) The individual has threatened the physical safety of another  
36 and has a history of one or more violent acts.

37 ~~((19))~~ (18) "Mental disorder" means any organic, mental, or  
38 emotional impairment that has substantial adverse effects on an  
39 individual's cognitive or volitional functions.

1       ~~((20))~~ (19) "Mental health professional" means a psychiatrist,  
2       psychologist, psychiatric nurse, or social worker, and such other  
3       mental health professionals as may be defined by rules adopted by the  
4       secretary under the authority of chapter 71.05 RCW.

5       ~~((21))~~ (20) "Professional person" means a mental health  
6       professional and also means a physician, registered nurse, and such  
7       others as may be defined in rules adopted by the secretary pursuant  
8       to the provisions of this chapter.

9       ~~((22))~~ (21) "Psychiatrist" means a person having a license as a  
10       physician and surgeon in this state who has in addition completed  
11       three years of graduate training in psychiatry in a program approved  
12       by the American medical association or the American osteopathic  
13       association and is certified or eligible to be certified by the  
14       American board of psychiatry and neurology.

15       ~~((23))~~ (22) "Psychologist" means a person who has been licensed  
16       as a psychologist under chapter 18.83 RCW.

17       ~~((24))~~ (23) "Registration records" include all the records of  
18       the department, behavioral health organizations, treatment  
19       facilities, and other persons providing services to the department,  
20       county departments, or facilities which identify individuals who are  
21       receiving or who at any time have received services for mental  
22       illness.

23       ~~((25))~~ (24) "Release" means legal termination of the commitment  
24       under chapter 71.05 RCW.

25       ~~((26))~~ (25) "Resident" means a person admitted to an enhanced  
26       services facility.

27       ~~((27))~~ (26) "Secretary" means the secretary of the department  
28       or the secretary's designee.

29       ~~((28))~~ (27) "Significant change" means:

30       (a) A deterioration in a resident's physical, mental, or  
31       psychosocial condition that has caused or is likely to cause clinical  
32       complications or life-threatening conditions; or

33       (b) An improvement in the resident's physical, mental, or  
34       psychosocial condition that may make the resident eligible for  
35       release or for treatment in a less intensive or less secure setting.

36       ~~((29))~~ (28) "Social worker" means a person with a master's or  
37       further advanced degree from a social work educational program  
38       accredited and approved as provided in RCW 18.320.010.

1       (29) "Substance use disorder professional" means a person  
2 certified as a substance use disorder professional by the department  
3 of health under chapter 18.205 RCW.

4       (30) "Treatment" means the broad range of emergency,  
5 detoxification, residential, inpatient, and outpatient services and  
6 care, including diagnostic evaluation, mental health or chemical  
7 dependency education and counseling, medical, psychiatric,  
8 psychological, and social service care, vocational rehabilitation,  
9 and career counseling, which may be extended to persons with mental  
10 disorders, chemical dependency disorders, or both, and their  
11 families.

12       (31) "Treatment records" include registration and all other  
13 records concerning individuals who are receiving or who at any time  
14 have received services for mental illness, which are maintained by  
15 the department, by behavioral health organizations and their staffs,  
16 and by treatment facilities. "Treatment records" do not include notes  
17 or records maintained for personal use by an individual providing  
18 treatment services for the department, behavioral health  
19 organizations, or a treatment facility if the notes or records are  
20 not available to others.

21       (32) "Violent act" means behavior that resulted in homicide,  
22 attempted suicide, nonfatal injuries, or substantial damage to  
23 property.

24       **Sec. 15.** RCW 70.97.030 and 2005 c 504 s 405 are each amended to  
25 read as follows:

26       A person, eighteen years old or older, may be admitted to an  
27 enhanced services facility if he or she meets the criteria in  
28 subsections (1) through (3) of this section:

29       (1) The person requires: (a) Daily care by or under the  
30 supervision of a mental health professional, ~~((chemical dependency))~~  
31 substance use disorder professional, or nurse; or (b) assistance with  
32 three or more activities of daily living; and

33       (2) The person has: (a) A mental disorder, chemical dependency  
34 disorder, or both; (b) an organic or traumatic brain injury; or (c) a  
35 cognitive impairment that results in symptoms or behaviors requiring  
36 supervision and facility services; ~~((and))~~ and

37       (3) The person has two or more of the following:

38       (a) Self-endangering behaviors that are frequent or difficult to  
39 manage;

1 (b) Aggressive, threatening, or assaultive behaviors that create  
2 a risk to the health or safety of other residents or staff, or a  
3 significant risk to property and these behaviors are frequent or  
4 difficult to manage;

5 (c) Intrusive behaviors that put residents or staff at risk;

6 (d) Complex medication needs and those needs include psychotropic  
7 medications;

8 (e) A history of or likelihood of unsuccessful placements in  
9 either a licensed facility or other state facility or a history of  
10 rejected applications for admission to other licensed facilities  
11 based on the person's behaviors, history, or security needs;

12 (f) A history of frequent or protracted mental health  
13 hospitalizations;

14 (g) A history of offenses against a person or felony offenses  
15 that created substantial damage to property.

16 **Sec. 16.** RCW 71.05.020 and 2018 c 305 s 1, 2018 c 291 s 1, and  
17 2018 c 201 s 3001 are each reenacted and amended to read as follows:

18 The definitions in this section apply throughout this chapter  
19 unless the context clearly requires otherwise.

20 (1) "Admission" or "admit" means a decision by a physician,  
21 physician assistant, or psychiatric advanced registered nurse  
22 practitioner that a person should be examined or treated as a patient  
23 in a hospital;

24 (2) "Alcoholism" means a disease, characterized by a dependency  
25 on alcoholic beverages, loss of control over the amount and  
26 circumstances of use, symptoms of tolerance, physiological or  
27 psychological withdrawal, or both, if use is reduced or discontinued,  
28 and impairment of health or disruption of social or economic  
29 functioning;

30 (3) "Antipsychotic medications" means that class of drugs  
31 primarily used to treat serious manifestations of mental illness  
32 associated with thought disorders, which includes, but is not limited  
33 to atypical antipsychotic medications;

34 (4) "Approved substance use disorder treatment program" means a  
35 program for persons with a substance use disorder provided by a  
36 treatment program certified by the department as meeting standards  
37 adopted under chapter 71.24 RCW;



1 (5) "Attending staff" means any person on the staff of a public  
2 or private agency having responsibility for the care and treatment of  
3 a patient;

4 (6) "Authority" means the Washington state health care authority;

5 (7) "Chemical dependency" means:

6 (a) Alcoholism;

7 (b) Drug addiction; or

8 (c) Dependence on alcohol and one or more psychoactive chemicals,  
9 as the context requires;

10 (8) (~~"Chemical dependency professional" means a person certified~~  
11 ~~as a chemical dependency professional by the department under chapter~~  
12 ~~18.205 RCW;~~

13 ~~(9))~~ "Commitment" means the determination by a court that a  
14 person should be detained for a period of either evaluation or  
15 treatment, or both, in an inpatient or a less restrictive setting;

16 ~~((10))~~ (9) "Conditional release" means a revocable modification  
17 of a commitment, which may be revoked upon violation of any of its  
18 terms;

19 ~~((11))~~ (10) "Crisis stabilization unit" means a short-term  
20 facility or a portion of a facility licensed or certified by the  
21 department under RCW 71.24.035, such as an evaluation and treatment  
22 facility or a hospital, which has been designed to assess, diagnose,  
23 and treat individuals experiencing an acute crisis without the use of  
24 long-term hospitalization;

25 ~~((12))~~ (11) "Custody" means involuntary detention under the  
26 provisions of this chapter or chapter 10.77 RCW, uninterrupted by any  
27 period of unconditional release from commitment from a facility  
28 providing involuntary care and treatment;

29 ~~((13))~~ (12) "Department" means the department of health;

30 ~~((14))~~ (13) "Designated crisis responder" means a mental health  
31 professional appointed by the county, an entity appointed by the  
32 county, or the behavioral health organization to perform the duties  
33 specified in this chapter;

34 ~~((15))~~ (14) "Detention" or "detain" means the lawful  
35 confinement of a person, under the provisions of this chapter;

36 ~~((16))~~ (15) "Developmental disabilities professional" means a  
37 person who has specialized training and three years of experience in  
38 directly treating or working with persons with developmental  
39 disabilities and is a psychiatrist, physician assistant working with  
40 a supervising psychiatrist, psychologist, psychiatric advanced

1 registered nurse practitioner, or social worker, and such other  
2 developmental disabilities professionals as may be defined by rules  
3 adopted by the secretary of the department of social and health  
4 services;

5 ~~((17))~~ (16) "Developmental disability" means that condition  
6 defined in RCW 71A.10.020(5);

7 ~~((18))~~ (17) "Director" means the director of the authority;

8 ~~((19))~~ (18) "Discharge" means the termination of hospital  
9 medical authority. The commitment may remain in place, be terminated,  
10 or be amended by court order;

11 ~~((20))~~ (19) "Drug addiction" means a disease, characterized by  
12 a dependency on psychoactive chemicals, loss of control over the  
13 amount and circumstances of use, symptoms of tolerance, physiological  
14 or psychological withdrawal, or both, if use is reduced or  
15 discontinued, and impairment of health or disruption of social or  
16 economic functioning;

17 ~~((21))~~ (20) "Evaluation and treatment facility" means any  
18 facility which can provide directly, or by direct arrangement with  
19 other public or private agencies, emergency evaluation and treatment,  
20 outpatient care, and timely and appropriate inpatient care to persons  
21 suffering from a mental disorder, and which is licensed or certified  
22 as such by the department. The authority may certify single beds as  
23 temporary evaluation and treatment beds under RCW 71.05.745. A  
24 physically separate and separately operated portion of a state  
25 hospital may be designated as an evaluation and treatment facility. A  
26 facility which is part of, or operated by, the department of social  
27 and health services or any federal agency will not require  
28 certification. No correctional institution or facility, or jail,  
29 shall be an evaluation and treatment facility within the meaning of  
30 this chapter;

31 ~~((22))~~ (21) "Gravely disabled" means a condition in which a  
32 person, as a result of a mental disorder, or as a result of the use  
33 of alcohol or other psychoactive chemicals: (a) Is in danger of  
34 serious physical harm resulting from a failure to provide for his or  
35 her essential human needs of health or safety; or (b) manifests  
36 severe deterioration in routine functioning evidenced by repeated and  
37 escalating loss of cognitive or volitional control over his or her  
38 actions and is not receiving such care as is essential for his or her  
39 health or safety;

1       (~~(23)~~) (22) "Habilitative services" means those services  
2 provided by program personnel to assist persons in acquiring and  
3 maintaining life skills and in raising their levels of physical,  
4 mental, social, and vocational functioning. Habilitative services  
5 include education, training for employment, and therapy. The  
6 habilitative process shall be undertaken with recognition of the risk  
7 to the public safety presented by the person being assisted as  
8 manifested by prior charged criminal conduct;

9       (~~(24)~~) (23) "Hearing" means any proceeding conducted in open  
10 court. For purposes of this chapter, at any hearing the petitioner,  
11 the respondent, the witnesses, and the presiding judicial officer may  
12 be present and participate either in person or by video, as  
13 determined by the court. The term "video" as used herein shall  
14 include any functional equivalent. At any hearing conducted by video,  
15 the technology used must permit the judicial officer, counsel, all  
16 parties, and the witnesses to be able to see, hear, and speak, when  
17 authorized, during the hearing; to allow attorneys to use exhibits or  
18 other materials during the hearing; and to allow respondent's counsel  
19 to be in the same location as the respondent unless otherwise  
20 requested by the respondent or the respondent's counsel. Witnesses in  
21 a proceeding may also appear in court through other means, including  
22 telephonically, pursuant to the requirements of superior court civil  
23 rule 43. Notwithstanding the foregoing, the court, upon its own  
24 motion or upon a motion for good cause by any party, may require all  
25 parties and witnesses to participate in the hearing in person rather  
26 than by video. In ruling on any such motion, the court may allow in-  
27 person or video testimony; and the court may consider, among other  
28 things, whether the respondent's alleged mental illness affects the  
29 respondent's ability to perceive or participate in the proceeding by  
30 video;

31       (~~(25)~~) (24) "History of one or more violent acts" refers to the  
32 period of time ten years prior to the filing of a petition under this  
33 chapter, excluding any time spent, but not any violent acts  
34 committed, in a mental health facility, a long-term alcoholism or  
35 drug treatment facility, or in confinement as a result of a criminal  
36 conviction;

37       (~~(26)~~) (25) "Imminent" means the state or condition of being  
38 likely to occur at any moment or near at hand, rather than distant or  
39 remote;

1       (~~(27)~~) (26) "Individualized service plan" means a plan prepared  
2 by a developmental disabilities professional with other professionals  
3 as a team, for a person with developmental disabilities, which shall  
4 state:

5       (a) The nature of the person's specific problems, prior charged  
6 criminal behavior, and habilitation needs;

7       (b) The conditions and strategies necessary to achieve the  
8 purposes of habilitation;

9       (c) The intermediate and long-range goals of the habilitation  
10 program, with a projected timetable for the attainment;

11       (d) The rationale for using this plan of habilitation to achieve  
12 those intermediate and long-range goals;

13       (e) The staff responsible for carrying out the plan;

14       (f) Where relevant in light of past criminal behavior and due  
15 consideration for public safety, the criteria for proposed movement  
16 to less-restrictive settings, criteria for proposed eventual  
17 discharge or release, and a projected possible date for discharge or  
18 release; and

19       (g) The type of residence immediately anticipated for the person  
20 and possible future types of residences;

21       (~~(28)~~) (27) "Information related to mental health services"  
22 means all information and records compiled, obtained, or maintained  
23 in the course of providing services to either voluntary or  
24 involuntary recipients of services by a mental health service  
25 provider. This may include documents of legal proceedings under this  
26 chapter or chapter 71.34 or 10.77 RCW, or somatic health care  
27 information;

28       (~~(29)~~) (28) "Intoxicated person" means a person whose mental or  
29 physical functioning is substantially impaired as a result of the use  
30 of alcohol or other psychoactive chemicals;

31       (~~(30)~~) (29) "In need of assisted outpatient behavioral health  
32 treatment" means that a person, as a result of a mental disorder or  
33 substance use disorder: (a) Has been committed by a court to  
34 detention for involuntary behavioral health treatment during the  
35 preceding thirty-six months; (b) is unlikely to voluntarily  
36 participate in outpatient treatment without an order for less  
37 restrictive alternative treatment, based on a history of nonadherence  
38 with treatment or in view of the person's current behavior; (c) is  
39 likely to benefit from less restrictive alternative treatment; and  
40 (d) requires less restrictive alternative treatment to prevent a

1 relapse, decompensation, or deterioration that is likely to result in  
2 the person presenting a likelihood of serious harm or the person  
3 becoming gravely disabled within a reasonably short period of time;

4 ~~((31))~~ (30) "Judicial commitment" means a commitment by a court  
5 pursuant to the provisions of this chapter;

6 ~~((32))~~ (31) "Legal counsel" means attorneys and staff employed  
7 by county prosecutor offices or the state attorney general acting in  
8 their capacity as legal representatives of public mental health and  
9 substance use disorder service providers under RCW 71.05.130;

10 ~~((33))~~ (32) "Less restrictive alternative treatment" means a  
11 program of individualized treatment in a less restrictive setting  
12 than inpatient treatment that includes the services described in RCW  
13 71.05.585;

14 ~~((34))~~ (33) "Licensed physician" means a person licensed to  
15 practice medicine or osteopathic medicine and surgery in the state of  
16 Washington;

17 ~~((35))~~ (34) "Likelihood of serious harm" means:

18 (a) A substantial risk that: (i) Physical harm will be inflicted  
19 by a person upon his or her own person, as evidenced by threats or  
20 attempts to commit suicide or inflict physical harm on oneself; (ii)  
21 physical harm will be inflicted by a person upon another, as  
22 evidenced by behavior which has caused such harm or which places  
23 another person or persons in reasonable fear of sustaining such harm;  
24 or (iii) physical harm will be inflicted by a person upon the  
25 property of others, as evidenced by behavior which has caused  
26 substantial loss or damage to the property of others; or

27 (b) The person has threatened the physical safety of another and  
28 has a history of one or more violent acts;

29 ~~((36))~~ (35) "Medical clearance" means a physician or other  
30 health care provider has determined that a person is medically stable  
31 and ready for referral to the designated crisis responder;

32 ~~((37))~~ (36) "Mental disorder" means any organic, mental, or  
33 emotional impairment which has substantial adverse effects on a  
34 person's cognitive or volitional functions;

35 ~~((38))~~ (37) "Mental health professional" means a psychiatrist,  
36 psychologist, physician assistant working with a supervising  
37 psychiatrist, psychiatric advanced registered nurse practitioner,  
38 psychiatric nurse, or social worker, and such other mental health  
39 professionals as may be defined by rules adopted by the secretary  
40 pursuant to the provisions of this chapter;

1       (~~(39)~~) (38) "Mental health service provider" means a public or  
2 private agency that provides mental health services to persons with  
3 mental disorders or substance use disorders as defined under this  
4 section and receives funding from public sources. This includes, but  
5 is not limited to, hospitals licensed under chapter 70.41 RCW,  
6 evaluation and treatment facilities as defined in this section,  
7 community mental health service delivery systems or behavioral health  
8 programs as defined in RCW 71.24.025, facilities conducting  
9 competency evaluations and restoration under chapter 10.77 RCW,  
10 approved substance use disorder treatment programs as defined in this  
11 section, secure detoxification facilities as defined in this section,  
12 and correctional facilities operated by state and local governments;

13       (~~(40)~~) (39) "Peace officer" means a law enforcement official of  
14 a public agency or governmental unit, and includes persons  
15 specifically given peace officer powers by any state law, local  
16 ordinance, or judicial order of appointment;

17       (~~(41)~~) (40) "Physician assistant" means a person licensed as a  
18 physician assistant under chapter 18.57A or 18.71A RCW;

19       (~~(42)~~) (41) "Private agency" means any person, partnership,  
20 corporation, or association that is not a public agency, whether or  
21 not financed in whole or in part by public funds, which constitutes  
22 an evaluation and treatment facility or private institution, or  
23 hospital, or approved substance use disorder treatment program, which  
24 is conducted for, or includes a department or ward conducted for, the  
25 care and treatment of persons with mental illness, substance use  
26 disorders, or both mental illness and substance use disorders;

27       (~~(43)~~) (42) "Professional person" means a mental health  
28 professional, (~~(chemical—dependency)~~) substance use disorder  
29 professional, or designated crisis responder and shall also mean a  
30 physician, physician assistant, psychiatric advanced registered nurse  
31 practitioner, registered nurse, and such others as may be defined by  
32 rules adopted by the secretary pursuant to the provisions of this  
33 chapter;

34       (~~(44)~~) (43) "Psychiatric advanced registered nurse  
35 practitioner" means a person who is licensed as an advanced  
36 registered nurse practitioner pursuant to chapter 18.79 RCW; and who  
37 is board certified in advanced practice psychiatric and mental health  
38 nursing;

39       (~~(45)~~) (44) "Psychiatrist" means a person having a license as a  
40 physician and surgeon in this state who has in addition completed

1 three years of graduate training in psychiatry in a program approved  
2 by the American medical association or the American osteopathic  
3 association and is certified or eligible to be certified by the  
4 American board of psychiatry and neurology;

5 ~~((46))~~ (45) "Psychologist" means a person who has been licensed  
6 as a psychologist pursuant to chapter 18.83 RCW;

7 ~~((47))~~ (46) "Public agency" means any evaluation and treatment  
8 facility or institution, secure detoxification facility, approved  
9 substance use disorder treatment program, or hospital which is  
10 conducted for, or includes a department or ward conducted for, the  
11 care and treatment of persons with mental illness, substance use  
12 disorders, or both mental illness and substance use disorders, if the  
13 agency is operated directly by federal, state, county, or municipal  
14 government, or a combination of such governments;

15 ~~((48))~~ (47) "Release" means legal termination of the commitment  
16 under the provisions of this chapter;

17 ~~((49))~~ (48) "Resource management services" has the meaning  
18 given in chapter 71.24 RCW;

19 ~~((50))~~ (49) "Secretary" means the secretary of the department  
20 of health, or his or her designee;

21 ~~((51))~~ (50) "Secure detoxification facility" means a facility  
22 operated by either a public or private agency or by the program of an  
23 agency that:

24 (a) Provides for intoxicated persons:

25 (i) Evaluation and assessment, provided by certified ~~((chemical  
26 dependency))~~ substance use disorder professionals or co-occurring  
27 disorder specialists;

28 (ii) Acute or subacute detoxification services; and

29 (iii) Discharge assistance provided by certified ~~((chemical  
30 dependency))~~ substance use disorder professionals or co-occurring  
31 disorder specialists, including facilitating transitions to  
32 appropriate voluntary or involuntary inpatient services or to less  
33 restrictive alternatives as appropriate for the individual;

34 (b) Includes security measures sufficient to protect the  
35 patients, staff, and community; and

36 (c) Is licensed or certified as such by the department of health;

37 ~~((52))~~ (51) "Serious violent offense" has the same meaning as  
38 provided in RCW 9.94A.030;

1       (~~(53)~~) (52) "Social worker" means a person with a master's or  
2 further advanced degree from a social work educational program  
3 accredited and approved as provided in RCW 18.320.010;

4       (~~(54)~~) (53) "Substance use disorder" means a cluster of  
5 cognitive, behavioral, and physiological symptoms indicating that an  
6 individual continues using the substance despite significant  
7 substance-related problems. The diagnosis of a substance use disorder  
8 is based on a pathological pattern of behaviors related to the use of  
9 the substances;

10       (54) "Substance use disorder professional" means a person  
11 certified as a substance use disorder professional by the department  
12 of health under chapter 18.205 RCW;

13       (55) "Therapeutic court personnel" means the staff of a mental  
14 health court or other therapeutic court which has jurisdiction over  
15 defendants who are dually diagnosed with mental disorders, including  
16 court personnel, probation officers, a court monitor, prosecuting  
17 attorney, or defense counsel acting within the scope of therapeutic  
18 court duties;

19       (56) "Treatment records" include registration and all other  
20 records concerning persons who are receiving or who at any time have  
21 received services for mental illness, which are maintained by the  
22 department of social and health services, the department, the  
23 authority, behavioral health organizations and their staffs, and by  
24 treatment facilities. Treatment records include mental health  
25 information contained in a medical bill including but not limited to  
26 mental health drugs, a mental health diagnosis, provider name, and  
27 dates of service stemming from a medical service. Treatment records  
28 do not include notes or records maintained for personal use by a  
29 person providing treatment services for the department of social and  
30 health services, the department, the authority, behavioral health  
31 organizations, or a treatment facility if the notes or records are  
32 not available to others;

33       (57) "Triage facility" means a short-term facility or a portion  
34 of a facility licensed or certified by the department under RCW  
35 71.24.035, which is designed as a facility to assess and stabilize an  
36 individual or determine the need for involuntary commitment of an  
37 individual, and must meet department residential treatment facility  
38 standards. A triage facility may be structured as a voluntary or  
39 involuntary placement facility;



1 (58) "Violent act" means behavior that resulted in homicide,  
2 attempted suicide, nonfatal injuries, or substantial damage to  
3 property;

4 (59) "Co-occurring disorder specialist" means an individual  
5 possessing an enhancement granted by the department of health under  
6 chapter 18.205 RCW that certifies the individual to provide substance  
7 use disorder counseling subject to the practice limitations under  
8 section 25 of this act.

9 **Sec. 17.** RCW 71.34.020 and 2018 c 201 s 5002 are each amended to  
10 read as follows:

11 Unless the context clearly requires otherwise, the definitions in  
12 this section apply throughout this chapter.

13 (1) "Alcoholism" means a disease, characterized by a dependency  
14 on alcoholic beverages, loss of control over the amount and  
15 circumstances of use, symptoms of tolerance, physiological or  
16 psychological withdrawal, or both, if use is reduced or discontinued,  
17 and impairment of health or disruption of social or economic  
18 functioning.

19 (2) "Approved substance use disorder treatment program" means a  
20 program for minors with substance use disorders provided by a  
21 treatment program licensed or certified by the department of health  
22 as meeting standards adopted under chapter 71.24 RCW.

23 (3) "Authority" means the Washington state health care authority.

24 (4) "Chemical dependency" means:

25 (a) Alcoholism;

26 (b) Drug addiction; or

27 (c) Dependence on alcohol and one or more other psychoactive  
28 chemicals, as the context requires.

29 ~~(5) ("Chemical dependency professional" means a person certified~~  
30 ~~as a chemical dependency professional by the department of health~~  
31 ~~under chapter 18.205 RCW.~~

32 ~~(6))~~ (6) "Child psychiatrist" means a person having a license as a  
33 physician and surgeon in this state, who has had graduate training in  
34 child psychiatry in a program approved by the American Medical  
35 Association or the American Osteopathic Association, and who is board  
36 eligible or board certified in child psychiatry.

37 ~~((7))~~ (6) "Children's mental health specialist" means:

38 (a) A mental health professional who has completed a minimum of  
39 one hundred actual hours, not quarter or semester hours, of

1 specialized training devoted to the study of child development and  
2 the treatment of children; and

3 (b) A mental health professional who has the equivalent of one  
4 year of full-time experience in the treatment of children under the  
5 supervision of a children's mental health specialist.

6 ~~((8))~~ (7) "Commitment" means a determination by a judge or  
7 court commissioner, made after a commitment hearing, that the minor  
8 is in need of inpatient diagnosis, evaluation, or treatment or that  
9 the minor is in need of less restrictive alternative treatment.

10 ~~((9))~~ (8) "Department" means the department of social and  
11 health services.

12 ~~((10))~~ (9) "Designated crisis responder" means a person  
13 designated by a behavioral health organization to perform the duties  
14 specified in this chapter.

15 ~~((11))~~ (10) "Director" means the director of the authority.

16 ~~((12))~~ (11) "Drug addiction" means a disease, characterized by  
17 a dependency on psychoactive chemicals, loss of control over the  
18 amount and circumstances of use, symptoms of tolerance, physiological  
19 or psychological withdrawal, or both, if use is reduced or  
20 discontinued, and impairment of health or disruption of social or  
21 economic functioning.

22 ~~((13))~~ (12) "Evaluation and treatment facility" means a public  
23 or private facility or unit that is licensed or certified by the  
24 department of health to provide emergency, inpatient, residential, or  
25 outpatient mental health evaluation and treatment services for  
26 minors. A physically separate and separately-operated portion of a  
27 state hospital may be designated as an evaluation and treatment  
28 facility for minors. A facility which is part of or operated by the  
29 state or federal agency does not require licensure or certification.  
30 No correctional institution or facility, juvenile court detention  
31 facility, or jail may be an evaluation and treatment facility within  
32 the meaning of this chapter.

33 ~~((14))~~ (13) "Evaluation and treatment program" means the total  
34 system of services and facilities coordinated and approved by a  
35 county or combination of counties for the evaluation and treatment of  
36 minors under this chapter.

37 ~~((15))~~ (14) "Gravely disabled minor" means a minor who, as a  
38 result of a mental disorder, or as a result of the use of alcohol or  
39 other psychoactive chemicals, is in danger of serious physical harm  
40 resulting from a failure to provide for his or her essential human

1 needs of health or safety, or manifests severe deterioration in  
2 routine functioning evidenced by repeated and escalating loss of  
3 cognitive or volitional control over his or her actions and is not  
4 receiving such care as is essential for his or her health or safety.

5 ~~((16))~~ (15) "Inpatient treatment" means twenty-four-hour-per-  
6 day mental health care provided within a general hospital,  
7 psychiatric hospital, residential treatment facility licensed or  
8 certified by the department of health as an evaluation and treatment  
9 facility for minors, secure detoxification facility for minors, or  
10 approved substance use disorder treatment program for minors.

11 ~~((17))~~ (16) "Intoxicated minor" means a minor whose mental or  
12 physical functioning is substantially impaired as a result of the use  
13 of alcohol or other psychoactive chemicals.

14 ~~((18))~~ (17) "Less restrictive alternative" or "less restrictive  
15 setting" means outpatient treatment provided to a minor who is not  
16 residing in a facility providing inpatient treatment as defined in  
17 this chapter.

18 ~~((19))~~ (18) "Likelihood of serious harm" means either:

19 (a) A substantial risk that physical harm will be inflicted by an  
20 individual upon his or her own person, as evidenced by threats or  
21 attempts to commit suicide or inflict physical harm on oneself; (b) a  
22 substantial risk that physical harm will be inflicted by an  
23 individual upon another, as evidenced by behavior which has caused  
24 such harm or which places another person or persons in reasonable  
25 fear of sustaining such harm; or (c) a substantial risk that physical  
26 harm will be inflicted by an individual upon the property of others,  
27 as evidenced by behavior which has caused substantial loss or damage  
28 to the property of others.

29 ~~((20))~~ (19) "Medical necessity" for inpatient care means a  
30 requested service which is reasonably calculated to: (a) Diagnose,  
31 correct, cure, or alleviate a mental disorder or substance use  
32 disorder; or (b) prevent the progression of a substance use disorder  
33 that endangers life or causes suffering and pain, or results in  
34 illness or infirmity or threatens to cause or aggravate a handicap,  
35 or causes physical deformity or malfunction, and there is no adequate  
36 less restrictive alternative available.

37 ~~((21))~~ (20) "Mental disorder" means any organic, mental, or  
38 emotional impairment that has substantial adverse effects on an  
39 individual's cognitive or volitional functions. The presence of  
40 alcohol abuse, drug abuse, juvenile criminal history, antisocial

1 behavior, or intellectual disabilities alone is insufficient to  
2 justify a finding of "mental disorder" within the meaning of this  
3 section.

4 ~~((22))~~ (21) "Mental health professional" means a psychiatrist,  
5 psychiatric advanced registered nurse practitioner, physician  
6 assistant working with a supervising psychiatrist, psychologist,  
7 psychiatric nurse, or social worker, and such other mental health  
8 professionals as may be defined by rules adopted by the secretary of  
9 the department of health under this chapter.

10 ~~((23))~~ (22) "Minor" means any person under the age of eighteen  
11 years.

12 ~~((24))~~ (23) "Outpatient treatment" means any of the  
13 nonresidential services mandated under chapter 71.24 RCW and provided  
14 by licensed or certified service providers as identified by RCW  
15 71.24.025.

16 ~~((25))~~ (24) "Parent" means:

17 (a) A biological or adoptive parent who has legal custody of the  
18 child, including either parent if custody is shared under a joint  
19 custody agreement; or

20 (b) A person or agency judicially appointed as legal guardian or  
21 custodian of the child.

22 ~~((26))~~ (25) "Private agency" means any person, partnership,  
23 corporation, or association that is not a public agency, whether or  
24 not financed in whole or in part by public funds, that constitutes an  
25 evaluation and treatment facility or private institution, or  
26 hospital, or approved substance use disorder treatment program, that  
27 is conducted for, or includes a distinct unit, floor, or ward  
28 conducted for, the care and treatment of persons with mental illness,  
29 substance use disorders, or both mental illness and substance use  
30 disorders.

31 ~~((27))~~ (26) "Physician assistant" means a person licensed as a  
32 physician assistant under chapter 18.57A or 18.71A RCW.

33 ~~((28))~~ (27) "Professional person in charge" or "professional  
34 person" means a physician, other mental health professional, or other  
35 person empowered by an evaluation and treatment facility, secure  
36 detoxification facility, or approved substance use disorder treatment  
37 program with authority to make admission and discharge decisions on  
38 behalf of that facility.

39 ~~((29))~~ (28) "Psychiatric nurse" means a registered nurse who  
40 has experience in the direct treatment of persons who have a mental

1 illness or who are emotionally disturbed, such experience gained  
2 under the supervision of a mental health professional.

3 ~~((30))~~ (29) "Psychiatrist" means a person having a license as a  
4 physician in this state who has completed residency training in  
5 psychiatry in a program approved by the American Medical Association  
6 or the American Osteopathic Association, and is board eligible or  
7 board certified in psychiatry.

8 ~~((31))~~ (30) "Psychologist" means a person licensed as a  
9 psychologist under chapter 18.83 RCW.

10 ~~((32))~~ (31) "Public agency" means any evaluation and treatment  
11 facility or institution, or hospital, or approved substance use  
12 disorder treatment program that is conducted for, or includes a  
13 distinct unit, floor, or ward conducted for, the care and treatment  
14 of persons with mental illness, substance use disorders, or both  
15 mental illness and substance use disorders if the agency is operated  
16 directly by federal, state, county, or municipal government, or a  
17 combination of such governments.

18 ~~((33))~~ (32) "Responsible other" means the minor, the minor's  
19 parent or estate, or any other person legally responsible for support  
20 of the minor.

21 ~~((34))~~ (33) "Secretary" means the secretary of the department  
22 or secretary's designee.

23 ~~((35))~~ (34) "Secure detoxification facility" means a facility  
24 operated by either a public or private agency or by the program of an  
25 agency that:

26 (a) Provides for intoxicated minors:

27 (i) Evaluation and assessment, provided by certified ~~((chemical~~  
28 ~~dependency))~~ substance use disorder professionals or co-occurring  
29 disorder specialists;

30 (ii) Acute or subacute detoxification services; and

31 (iii) Discharge assistance provided by certified ~~((chemical~~  
32 ~~dependency))~~ substance use disorder professionals or co-occurring  
33 disorder specialists, including facilitating transitions to  
34 appropriate voluntary or involuntary inpatient services or to less  
35 restrictive alternatives as appropriate for the minor;

36 (b) Includes security measures sufficient to protect the  
37 patients, staff, and community; and

38 (c) Is licensed or certified as such by the department of health.

1       (~~(36)~~) (35) "Social worker" means a person with a master's or  
2 further advanced degree from a social work educational program  
3 accredited and approved as provided in RCW 18.320.010.

4       (~~(37)~~) (36) "Start of initial detention" means the time of  
5 arrival of the minor at the first evaluation and treatment facility,  
6 secure detoxification facility, or approved substance use disorder  
7 treatment program offering inpatient treatment if the minor is being  
8 involuntarily detained at the time. With regard to voluntary  
9 patients, "start of initial detention" means the time at which the  
10 minor gives notice of intent to leave under the provisions of this  
11 chapter.

12       (~~(38)~~) (37) "Substance use disorder" means a cluster of  
13 cognitive, behavioral, and physiological symptoms indicating that an  
14 individual continues using the substance despite significant  
15 substance-related problems. The diagnosis of a substance use disorder  
16 is based on a pathological pattern of behaviors related to the use of  
17 the substances.

18       (38) "Co-occurring disorder specialist" means an individual  
19 possessing an enhancement granted by the department of health under  
20 chapter 18.205 RCW that certifies the individual to provide substance  
21 use disorder counseling subject to the practice limitations under  
22 section 25 of this act.

23       (39) "Substance use disorder professional" means a person  
24 certified as a substance use disorder professional by the department  
25 of health under chapter 18.205 RCW.

26       **Sec. 18.** RCW 71.34.720 and 2018 c 201 s 5017 are each amended to  
27 read as follows:

28       (1) Each minor approved by the facility for inpatient admission  
29 shall be examined and evaluated by a children's mental health  
30 specialist, for minors admitted as a result of a mental disorder, or  
31 by a (~~(chemical dependency)~~) substance use disorder professional or  
32 co-occurring disorder specialist, for minors admitted as a result of  
33 a substance use disorder, as to the child's mental condition and by a  
34 physician, physician assistant, or psychiatric advanced registered  
35 nurse practitioner as to the child's physical condition within  
36 twenty-four hours of admission. Reasonable measures shall be taken to  
37 ensure medical treatment is provided for any condition requiring  
38 immediate medical attention.

1 (2) If, after examination and evaluation, the children's mental  
2 health specialist or substance use disorder specialist and the  
3 physician, physician assistant, or psychiatric advanced registered  
4 nurse practitioner determine that the initial needs of the minor, if  
5 detained to an evaluation and treatment facility, would be better  
6 served by placement in a substance use disorder treatment program or,  
7 if detained to a secure detoxification facility or approved substance  
8 use disorder treatment program, would be better served in an  
9 evaluation and treatment facility, then the minor shall be referred  
10 to the more appropriate placement; however a minor may only be  
11 referred to a secure detoxification facility or approved substance  
12 use disorder treatment program if there is a secure detoxification  
13 facility or approved substance use disorder treatment program  
14 available and that has adequate space for the minor.

15 (3) The admitting facility shall take reasonable steps to notify  
16 immediately the minor's parent of the admission.

17 (4) During the initial seventy-two hour treatment period, the  
18 minor has a right to associate or receive communications from parents  
19 or others unless the professional person in charge determines that  
20 such communication would be seriously detrimental to the minor's  
21 condition or treatment and so indicates in the minor's clinical  
22 record, and notifies the minor's parents of this determination. In no  
23 event may the minor be denied the opportunity to consult an attorney.

24 (5) If the evaluation and treatment facility, secure  
25 detoxification facility, or approved substance use disorder treatment  
26 program admits the minor, it may detain the minor for evaluation and  
27 treatment for a period not to exceed seventy-two hours from the time  
28 of provisional acceptance. The computation of such seventy-two hour  
29 period shall exclude Saturdays, Sundays, and holidays. This initial  
30 treatment period shall not exceed seventy-two hours except when an  
31 application for voluntary inpatient treatment is received or a  
32 petition for fourteen-day commitment is filed.

33 (6) Within twelve hours of the admission, the facility shall  
34 advise the minor of his or her rights as set forth in this chapter.

35 **Sec. 19.** RCW 71.34.720 and 2018 c 201 s 5018 are each amended to  
36 read as follows:

37 (1) Each minor approved by the facility for inpatient admission  
38 shall be examined and evaluated by a children's mental health  
39 specialist, for minors admitted as a result of a mental disorder, or

1 by a (~~chemical dependency~~) substance use disorder professional or  
2 co-occurring disorder specialist, for minors admitted as a result of  
3 a substance use disorder, as to the child's mental condition and by a  
4 physician, physician assistant, or psychiatric advanced registered  
5 nurse practitioner as to the child's physical condition within  
6 twenty-four hours of admission. Reasonable measures shall be taken to  
7 ensure medical treatment is provided for any condition requiring  
8 immediate medical attention.

9 (2) If, after examination and evaluation, the children's mental  
10 health specialist or substance use disorder specialist and the  
11 physician, physician assistant, or psychiatric advanced registered  
12 nurse practitioner determine that the initial needs of the minor, if  
13 detained to an evaluation and treatment facility, would be better  
14 served by placement in a substance use disorder treatment program or,  
15 if detained to a secure detoxification facility or approved substance  
16 use disorder treatment program, would be better served in an  
17 evaluation and treatment facility, then the minor shall be referred  
18 to the more appropriate placement.

19 (3) The admitting facility shall take reasonable steps to notify  
20 immediately the minor's parent of the admission.

21 (4) During the initial seventy-two hour treatment period, the  
22 minor has a right to associate or receive communications from parents  
23 or others unless the professional person in charge determines that  
24 such communication would be seriously detrimental to the minor's  
25 condition or treatment and so indicates in the minor's clinical  
26 record, and notifies the minor's parents of this determination. In no  
27 event may the minor be denied the opportunity to consult an attorney.

28 (5) If the evaluation and treatment facility, secure  
29 detoxification facility, or approved substance use disorder treatment  
30 program admits the minor, it may detain the minor for evaluation and  
31 treatment for a period not to exceed seventy-two hours from the time  
32 of provisional acceptance. The computation of such seventy-two hour  
33 period shall exclude Saturdays, Sundays, and holidays. This initial  
34 treatment period shall not exceed seventy-two hours except when an  
35 application for voluntary inpatient treatment is received or a  
36 petition for fourteen-day commitment is filed.

37 (6) Within twelve hours of the admission, the facility shall  
38 advise the minor of his or her rights as set forth in this chapter.



1       **Sec. 20.** RCW 71.34.760 and 2018 c 201 s 5019 are each amended to  
2 read as follows:

3       (1) If a minor is committed for one hundred eighty-day inpatient  
4 treatment and is to be placed in a state-supported program, the  
5 director shall accept immediately and place the minor in a state-  
6 funded long-term evaluation and treatment facility or state-funded  
7 approved substance use disorder treatment program.

8       (2) The director's placement authority shall be exercised through  
9 a designated placement committee appointed by the director and  
10 composed of children's mental health specialists and ~~((chemical~~  
11 ~~dependency)) substance use disorder professionals, including at least  
12 one child psychiatrist who represents the state-funded, long-term,  
13 evaluation and treatment facility for minors and one ~~((chemical~~  
14 ~~dependency)) substance use disorder professional who represents the  
15 state-funded approved substance use disorder treatment program. The  
16 responsibility of the placement committee will be to:~~~~

17       (a) Make the long-term placement of the minor in the most  
18 appropriate, available state-funded evaluation and treatment facility  
19 or approved substance use disorder treatment program, having  
20 carefully considered factors including the treatment needs of the  
21 minor, the most appropriate facility able to respond to the minor's  
22 identified treatment needs, the geographic proximity of the facility  
23 to the minor's family, the immediate availability of bed space, and  
24 the probable impact of the placement on other residents of the  
25 facility;

26       (b) Approve or deny requests from treatment facilities for  
27 transfer of a minor to another facility;

28       (c) Receive and monitor reports required under this section;

29       (d) Receive and monitor reports of all discharges.

30       (3) The director may authorize transfer of minors among treatment  
31 facilities if the transfer is in the best interests of the minor or  
32 due to treatment priorities.

33       (4) The responsible state-funded evaluation and treatment  
34 facility or approved substance use disorder treatment program shall  
35 submit a report to the authority's designated placement committee  
36 within ninety days of admission and no less than every one hundred  
37 eighty days thereafter, setting forth such facts as the authority  
38 requires, including the minor's individual treatment plan and  
39 progress, recommendations for future treatment, and possible less  
40 restrictive treatment.

1       **Sec. 21.** RCW 18.130.175 and 2006 c 99 s 7 are each amended to  
2 read as follows:

3       (1) In lieu of disciplinary action under RCW 18.130.160 and if  
4 the disciplining authority determines that the unprofessional conduct  
5 may be the result of substance abuse, the disciplining authority may  
6 refer the license holder to a voluntary substance abuse monitoring  
7 program approved by the disciplining authority.

8       The cost of the treatment shall be the responsibility of the  
9 license holder, but the responsibility does not preclude payment by  
10 an employer, existing insurance coverage, or other sources. Primary  
11 alcoholism or other drug addiction treatment shall be provided by  
12 approved treatment programs under RCW 70.96A.020 or by any other  
13 provider approved by the entity or the commission. However, nothing  
14 shall prohibit the disciplining authority from approving additional  
15 services and programs as an adjunct to primary alcoholism or other  
16 drug addiction treatment. The disciplining authority may also approve  
17 the use of out-of-state programs. Referral of the license holder to  
18 the program shall be done only with the consent of the license  
19 holder. Referral to the program may also include probationary  
20 conditions for a designated period of time. If the license holder  
21 does not consent to be referred to the program or does not  
22 successfully complete the program, the disciplining authority may  
23 take appropriate action under RCW 18.130.160 which includes  
24 suspension of the license unless or until the disciplining authority,  
25 in consultation with the director of the voluntary substance abuse  
26 monitoring program, determines the license holder is able to practice  
27 safely. The secretary shall adopt uniform rules for the evaluation by  
28 the ((~~disciplinary~~—[~~disciplining~~])) disciplining authority of a  
29 relapse or program violation on the part of a license holder in the  
30 substance abuse monitoring program. The evaluation shall encourage  
31 program participation with additional conditions, in lieu of  
32 disciplinary action, when the ((~~disciplinary~~—[~~disciplining~~]))  
33 disciplining authority determines that the license holder is able to  
34 continue to practice with reasonable skill and safety.

35       (2) In addition to approving substance abuse monitoring programs  
36 that may receive referrals from the disciplining authority, the  
37 disciplining authority may establish by rule requirements for  
38 participation of license holders who are not being investigated or  
39 monitored by the disciplining authority for substance abuse. License  
40 holders voluntarily participating in the approved programs without

1 being referred by the disciplining authority shall not be subject to  
2 disciplinary action under RCW 18.130.160 for their substance abuse,  
3 and shall not have their participation made known to the disciplining  
4 authority, if they meet the requirements of this section and the  
5 program in which they are participating.

6 (3) The license holder shall sign a waiver allowing the program  
7 to release information to the disciplining authority if the licensee  
8 does not comply with the requirements of this section or is unable to  
9 practice with reasonable skill or safety. The substance abuse program  
10 shall report to the disciplining authority any license holder who  
11 fails to comply with the requirements of this section or the program  
12 or who, in the opinion of the program, is unable to practice with  
13 reasonable skill or safety. License holders shall report to the  
14 disciplining authority if they fail to comply with this section or do  
15 not complete the program's requirements. License holders may, upon  
16 the agreement of the program and disciplining authority, reenter the  
17 program if they have previously failed to comply with this section.

18 (4) The treatment and pretreatment records of license holders  
19 referred to or voluntarily participating in approved programs shall  
20 be confidential, shall be exempt from chapter 42.56 RCW, and shall  
21 not be subject to discovery by subpoena or admissible as evidence  
22 except for monitoring records reported to the disciplining authority  
23 for cause as defined in subsection (3) of this section. Monitoring  
24 records relating to license holders referred to the program by the  
25 disciplining authority or relating to license holders reported to the  
26 disciplining authority by the program for cause, shall be released to  
27 the disciplining authority at the request of the disciplining  
28 authority. Records held by the disciplining authority under this  
29 section shall be exempt from chapter 42.56 RCW and shall not be  
30 subject to discovery by subpoena except by the license holder.

31 (5) "Substance abuse," as used in this section, means the  
32 impairment, as determined by the disciplining authority, of a license  
33 holder's professional services by an addiction to, a dependency on,  
34 or the use of alcohol, legend drugs, or controlled substances.

35 (6) This section does not affect an employer's right or ability  
36 to make employment-related decisions regarding a license holder. This  
37 section does not restrict the authority of the disciplining authority  
38 to take disciplinary action for any other unprofessional conduct.

1 (7) A person who, in good faith, reports information or takes  
2 action in connection with this section is immune from civil liability  
3 for reporting information or taking the action.

4 (a) The immunity from civil liability provided by this section  
5 shall be liberally construed to accomplish the purposes of this  
6 section and the persons entitled to immunity shall include:

7 (i) An approved monitoring treatment program;

8 (ii) The professional association operating the program;

9 (iii) Members, employees, or agents of the program or  
10 association;

11 (iv) Persons reporting a license holder as being possibly  
12 impaired or providing information about the license holder's  
13 impairment; and

14 (v) Professionals supervising or monitoring the course of the  
15 impaired license holder's treatment or rehabilitation.

16 (b) The courts are strongly encouraged to impose sanctions on  
17 clients and their attorneys whose allegations under this subsection  
18 are not made in good faith and are without either reasonable  
19 objective, substantive grounds, or both.

20 (c) The immunity provided in this section is in addition to any  
21 other immunity provided by law.

22 (8) In the case of a person who is applying to be a substance use  
23 disorder professional or substance use disorder professional trainee  
24 certified under chapter 18.205 RCW, if the person is:

25 (a) Less than one year in recovery from a substance use disorder,  
26 the duration of time that the person may be required to participate  
27 in the voluntary substance abuse monitoring program may not exceed  
28 the amount of time necessary for the person to achieve one year in  
29 recovery; or

30 (b) At least one year in recovery from a substance use disorder,  
31 the person may not be required to participate in the substance abuse  
32 monitoring program.

33 **Sec. 22.** RCW 43.43.842 and 2014 c 88 s 1 are each amended to  
34 read as follows:

35 (1)(a) The secretary of social and health services and the  
36 secretary of health shall adopt additional requirements for the  
37 licensure or relicensure of agencies, facilities, and licensed  
38 individuals who provide care and treatment to vulnerable adults,  
39 including nursing pools registered under chapter 18.52C RCW. These

1 additional requirements shall ensure that any person associated with  
2 a licensed agency or facility having unsupervised access with a  
3 vulnerable adult shall not be the respondent in an active protective  
4 order under RCW 74.34.130, nor have been: (i) Convicted of a crime  
5 against persons as defined in RCW 43.43.830, except as provided in  
6 this section; (ii) convicted of crimes relating to financial  
7 exploitation as defined in RCW 43.43.830, except as provided in this  
8 section; or (iii) found in any disciplinary board final decision to  
9 have abused a vulnerable adult under RCW 43.43.830.

10 (b) A person associated with a licensed agency or facility who  
11 has unsupervised access with a vulnerable adult shall make the  
12 disclosures specified in RCW 43.43.834(2). The person shall make the  
13 disclosures in writing, sign, and swear to the contents under penalty  
14 of perjury. The person shall, in the disclosures, specify all crimes  
15 against children or other persons, all crimes relating to financial  
16 exploitation, and all crimes relating to drugs as defined in RCW  
17 43.43.830, committed by the person.

18 (2) The rules adopted under this section shall permit the  
19 licensee to consider the criminal history of an applicant for  
20 employment in a licensed facility when the applicant has one or more  
21 convictions for a past offense and:

22 (a) The offense was simple assault, assault in the fourth degree,  
23 or the same offense as it may be renamed, and three or more years  
24 have passed between the most recent conviction and the date of  
25 application for employment;

26 (b) The offense was prostitution, or the same offense as it may  
27 be renamed, and three or more years have passed between the most  
28 recent conviction and the date of application for employment;

29 (c) The offense was theft in the third degree, or the same  
30 offense as it may be renamed, and three or more years have passed  
31 between the most recent conviction and the date of application for  
32 employment;

33 (d) The offense was theft in the second degree, or the same  
34 offense as it may be renamed, and five or more years have passed  
35 between the most recent conviction and the date of application for  
36 employment;

37 (e) The offense was forgery, or the same offense as it may be  
38 renamed, and five or more years have passed between the most recent  
39 conviction and the date of application for employment;

1 (f) The department of social and health services reviewed the  
2 employee's otherwise disqualifying criminal history through the  
3 department of social and health services' background assessment  
4 review team process conducted in 2002, and determined that such  
5 employee could remain in a position covered by this section; or

6 (g) The otherwise disqualifying conviction or disposition has  
7 been the subject of a pardon, annulment, or other equivalent  
8 procedure.

9 The offenses set forth in (a) through (g) of this subsection do  
10 not automatically disqualify an applicant from employment by a  
11 licensee. Nothing in this section may be construed to require the  
12 employment of any person against a licensee's judgment.

13 (3) The rules adopted pursuant to subsection (2) of this section  
14 may not allow a licensee to automatically deny an applicant with a  
15 conviction for an offense set forth in subsection (2) of this section  
16 for a position as a substance use disorder professional or substance  
17 use disorder professional trainee certified under chapter 18.205 RCW  
18 if:

19 (a) At least one year has passed between the applicant's most  
20 recent conviction for an offense set forth in subsection (2) of this  
21 section and the date of application for employment;

22 (b) The offense was committed as a result of the applicant's  
23 substance use or untreated mental health symptoms; and

24 (c) The applicant is at least one year in recovery from a  
25 substance use disorder, whether through abstinence or stability on  
26 medication-assisted therapy, or in recovery from a mental health  
27 disorder.

28 (4) In consultation with law enforcement personnel, the secretary  
29 of social and health services and the secretary of health shall  
30 investigate, or cause to be investigated, the conviction record and  
31 the protection proceeding record information under this chapter of  
32 the staff of each agency or facility under their respective  
33 jurisdictions seeking licensure or relicensure. An individual  
34 responding to a criminal background inquiry request from his or her  
35 employer or potential employer shall disclose the information about  
36 his or her criminal history under penalty of perjury. The secretaries  
37 shall use the information solely for the purpose of determining  
38 eligibility for licensure or relicensure. Criminal justice agencies  
39 shall provide the secretaries such information as they may have and  
40 that the secretaries may require for such purpose.

1        NEW SECTION.    **Sec. 23.**    A new section is added to chapter 18.205  
2    RCW to read as follows:

3        The department may not automatically deny an applicant for  
4    certification under this chapter for a position as a substance use  
5    disorder professional or substance use disorder professional trainee  
6    based on a conviction history consisting of convictions for simple  
7    assault, assault in the fourth degree, prostitution, theft in the  
8    third degree, theft in the second degree, or forgery, the same  
9    offenses as they may be renamed, or substantially equivalent offenses  
10   committed in other states or jurisdictions if:

11        (1) At least one year has passed between the applicant's most  
12   recent conviction for an offense set forth in this section and the  
13   date of application for employment;

14        (2) The offense was committed as a result of the person's  
15   substance use or untreated mental health symptoms; and

16        (3) The applicant is at least one year in recovery from a  
17   substance use disorder, whether through abstinence or stability on  
18   medication-assisted therapy, or in recovery from mental health  
19   challenges.

20        **Sec. 24.**    RCW 18.130.055 and 2016 c 81 s 12 are each amended to  
21   read as follows:

22        (1) The disciplining authority may deny an application for  
23   licensure or grant a license with conditions if the applicant:

24        (a) Has had his or her license to practice any health care  
25   profession suspended, revoked, or restricted, by competent authority  
26   in any state, federal, or foreign jurisdiction;

27        (b) Has committed any act defined as unprofessional conduct for a  
28   license holder under RCW 18.130.180, except as provided in RCW  
29   9.97.020;

30        (c) Has been convicted or is subject to current prosecution or  
31   pending charges of a crime involving moral turpitude or a crime  
32   identified in RCW 43.43.830, except as provided in RCW 9.97.020 and  
33   section 23 of this act. For purposes of this section, conviction  
34   includes all instances in which a plea of guilty or nolo contendere  
35   is the basis for the conviction and all proceedings in which the  
36   prosecution or sentence has been deferred or suspended. At the  
37   request of an applicant for an original license whose conviction is  
38   under appeal, the disciplining authority may defer decision upon the  
39   application during the pendency of such a prosecution or appeal;

1 (d) Fails to prove that he or she is qualified in accordance with  
2 the provisions of this chapter, the chapters identified in RCW  
3 18.130.040(2), or the rules adopted by the disciplining authority; or

4 (e) Is not able to practice with reasonable skill and safety to  
5 consumers by reason of any mental or physical condition.

6 (i) The disciplining authority may require the applicant, at his  
7 or her own expense, to submit to a mental, physical, or psychological  
8 examination by one or more licensed health professionals designated  
9 by the disciplining authority. The disciplining authority shall  
10 provide written notice of its requirement for a mental or physical  
11 examination that includes a statement of the specific conduct, event,  
12 or circumstances justifying an examination and a statement of the  
13 nature, purpose, scope, and content of the intended examination. If  
14 the applicant fails to submit to the examination or provide the  
15 results of the examination or any required waivers, the disciplining  
16 authority may deny the application.

17 (ii) An applicant governed by this chapter is deemed to have  
18 given consent to submit to a mental, physical, or psychological  
19 examination when directed in writing by the disciplining authority  
20 and further to have waived all objections to the admissibility or use  
21 of the examining health professional's testimony or examination  
22 reports by the disciplining authority on the grounds that the  
23 testimony or reports constitute privileged communications.

24 (2) The provisions of RCW 9.95.240 and chapter 9.96A RCW do not  
25 apply to a decision to deny a license under this section.

26 (3) The disciplining authority shall give written notice to the  
27 applicant of the decision to deny a license or grant a license with  
28 conditions in response to an application for a license. The notice  
29 must state the grounds and factual basis for the action and be served  
30 upon the applicant.

31 (4) A license applicant who is aggrieved by the decision to deny  
32 the license or grant the license with conditions has the right to an  
33 adjudicative proceeding. The application for adjudicative proceeding  
34 must be in writing, state the basis for contesting the adverse  
35 action, include a copy of the adverse notice, and be served on and  
36 received by the department within twenty-eight days of the decision.  
37 The license applicant has the burden to establish, by a preponderance  
38 of evidence, that the license applicant is qualified in accordance  
39 with the provisions of this chapter, the chapters identified in RCW  
40 18.130.040(2), and the rules adopted by the disciplining authority.



1        NEW SECTION.    **Sec. 25.**    A new section is added to chapter 18.205

2    RCW to read as follows:

3        (1)    The department shall develop training standards for the  
4    creation of a co-occurring disorder specialist enhancement which may  
5    be added to the license or registration held by one of the following:

6        (a)    Psychologists licensed under chapter 18.83 RCW;

7        (b)    Independent clinical social workers licensed under chapter  
8    18.225 RCW;

9        (c)    Marriage and family therapists licensed under chapter 18.225  
10    RCW;

11       (d)    Mental health counselors licensed under chapter 18.225 RCW;  
12    and

13       (e)    An agency affiliated counselor under chapter 18.19 RCW with a  
14    master's degree or further advanced degree in counseling or one of  
15    the social sciences from an accredited college or university who has  
16    at least two years of experience, experience gained under the  
17    supervision of a mental health professional recognized by the  
18    department or attested to by the licensed behavioral health agency,  
19    in direct treatment of persons with mental illness or emotional  
20    disturbance.

21       (2)    To obtain the co-occurring disorder specialist enhancement,  
22    the applicant must meet training standards and experience  
23    requirements. The training standards must be designed with  
24    consideration of the practices of the health professions listed in  
25    subsection (1) of this section and consisting of sixty hours of  
26    instruction consisting of (a) thirty hours in understanding the  
27    disease pattern of addiction and the pharmacology of alcohol and  
28    other drugs; and (b) thirty hours in understanding addiction  
29    placement, continuing care, and discharge criteria, including the  
30    American society of addiction medicine criteria; treatment planning  
31    specific to substance abuse; relapse prevention; and confidentiality  
32    issues specific to substance use disorder treatment.

33       (3)    In developing the training standards, the department shall  
34    consult with the examining board of psychology established in chapter  
35    18.83 RCW, the Washington state mental health counselors, marriage  
36    and family therapists, and social workers advisory committee  
37    established in chapter 18.225 RCW, the substance use disorder  
38    certification advisory committee established in chapter 18.205 RCW,  
39    and educational institutions in Washington state that train  
40    psychologists, marriage and family therapists, mental health

1 counselors, independent clinical social workers, and substance use  
2 disorder professionals.

3 (4) The department shall approve educational programs that meet  
4 the training standards, and must not limit its approval to  
5 university-based courses.

6 (5) The secretary shall issue a co-occurring disorder specialist  
7 enhancement to any applicant who demonstrates to the secretary's  
8 satisfaction that the following requirements have been met:

9 (a) Completion of the training standards;

10 (b) Successful completion of an approved examination based on  
11 core competencies of substance use disorder counseling;

12 (c) Successful completion of an experience requirement of:

13 (i) Eighty hours of supervised experience for an applicant listed  
14 under subsection (1) of this section with fewer than five years of  
15 experience; or

16 (ii) Forty hours of supervised experience for an applicant listed  
17 under subsection (1) of this section with five or more years of  
18 experience; and

19 (d) Payment of any fees that may be established by the  
20 department.

21 (6) An applicant for the co-occurring disorder specialist  
22 enhancement may receive supervised experience from any person who  
23 meets or exceeds the requirements of a certified substance use  
24 disorder professional in the state of Washington and who would be  
25 eligible to take the examination required for substance use disorder  
26 professional certification.

27 (7) A person who has obtained a co-occurring disorder specialist  
28 enhancement may provide substance use disorder counseling services  
29 which are equal in scope with those provided by substance use  
30 disorder professionals under this chapter, subject to the following  
31 limitations:

32 (a) A co-occurring disorder specialist may only provide substance  
33 use disorder counseling services if the co-occurring disorder  
34 specialist is employed by:

35 (i) An agency that provides counseling services;

36 (ii) A federally qualified health center; or

37 (iii) A hospital;

38 (b) Following an initial intake or assessment, a co-occurring  
39 disorder specialist may provide substance use disorder treatment only

1 to clients diagnosed with a substance use disorder and a mental  
2 health disorder;

3 (c) Prior to providing substance use disorder treatment to a  
4 client assessed to be in need of 2.1 or higher level of care  
5 according to American society of addiction medicine criteria, a co-  
6 occurring disorder specialist must make a reasonable effort to refer  
7 and connect the client to the appropriate care setting, as indicated  
8 by the client's American society of addiction medicine level of care;  
9 and

10 (d) A co-occurring disorder specialist must comply with rules  
11 promulgated by the department under subsection (11) of this section.

12 (8) The secretary shall establish by rule what constitutes  
13 adequate proof of meeting the criteria.

14 (9) Applicants are subject to the grounds for denial of a  
15 certificate or issuance of a conditional certificate under chapter  
16 18.130 RCW.

17 (10) The department may adopt a fee to defray the cost of  
18 regulatory activities related to the issuance of co-occurring  
19 disorder specialist enhancements and any related disciplinary  
20 activities.

21 (11) The department shall adopt rules regarding the role of co-  
22 occurring disorder specialists across the American society of  
23 addiction medicine continuum of care.

24 (12) Any increase in fees necessary to cover the cost of  
25 regulating co-occurring disorder professionals who receive an  
26 enhancement under this section must be borne by persons licensed as  
27 psychologists under chapter 18.83 RCW, independent clinical social  
28 workers under chapter 18.225 RCW, marriage and family therapists  
29 under chapter 18.225 RCW, or mental health counselors under chapter  
30 18.225 RCW. The cost of regulating co-occurring disorder specialists  
31 who receive an enhancement under this section may not be borne by  
32 substance use disorder professionals or substance use disorder  
33 professional trainees certified under this chapter and may not be  
34 included in the calculation of fees for substance use disorder  
35 professionals or substance use disorder professional trainees  
36 certified under this chapter.

37 NEW SECTION. **Sec. 26.** A new section is added to chapter 18.205  
38 RCW to read as follows:

1 (1) Beginning July 1, 2020, subject to the availability of  
2 amounts appropriated for this specific purpose, the department shall  
3 contract with an educational program to offer the training developed  
4 under section 25 of this act. The contracted educational program  
5 shall offer the training at a reduced cost to health care providers  
6 identified in section 25 of this act. The training must be (a)  
7 available online on an ongoing basis and (b) offered in person at  
8 least four times per calendar year.

9 (2) Beginning July 1, 2020, subject to the availability of  
10 amounts appropriated for this specific purpose, the department shall  
11 contract with an entity to provide a telephonic consultation service  
12 to assist health care providers who have been issued a substance use  
13 disorder professional certification pursuant to RCW 18.205.090 or a  
14 co-occurring disorder specialist enhancement under section 25 of this  
15 act with the diagnosis and treatment of patients with co-occurring  
16 behavioral health disorders.

17 (3) The department shall identify supervisors who are trained and  
18 available to supervise persons seeking to meet the supervised  
19 experience requirements established under section 25 of this act.

20 (4) This section expires July 1, 2025.

21 NEW SECTION. **Sec. 27.** A new section is added to chapter 18.83  
22 RCW to read as follows:

23 The department shall reduce the total number of supervised  
24 experience hours required under RCW 18.83.070 by three months for any  
25 applicant for a license under this chapter who has practiced as a  
26 certified chemical dependency professional for three years in the  
27 previous ten years.

28 NEW SECTION. **Sec. 28.** A new section is added to chapter 18.225  
29 RCW to read as follows:

30 The department shall reduce the total number of supervised  
31 experience hours required under RCW 18.225.090 by ten percent for any  
32 applicant for a license under this chapter who has practiced as a  
33 certified chemical dependency professional for three years in the  
34 previous ten years.

35 NEW SECTION. **Sec. 29.** The department of health must amend its  
36 rules, including WAC 246-341-0515, to allow persons with a co-  
37 occurring disorder specialist enhancement under chapter 18.205 RCW to

1 provide substance use disorder counseling services that are equal in  
2 scope with the scope and practice of a substance use disorder  
3 professional under chapter 18.205 RCW, subject to the practice  
4 limitations under section 25 of this act.

5 NEW SECTION. **Sec. 30.** A new section is added to chapter 18.205  
6 RCW to read as follows:

7 (1) The department, in collaboration with the behavioral health  
8 institute at the University of Washington, the research and data  
9 analysis division at the department of social and health services,  
10 and the division of behavioral health and recovery at the health care  
11 authority, must conduct a review and analysis regarding the effects  
12 of the co-occurring disorder specialist enhancement created by this  
13 act on increasing the number of providers qualified to provide  
14 substance use disorder services and improving outcomes for persons  
15 with a substance use disorder.

16 (2) The review and analysis shall assess:

17 (a) The effects of the availability of the co-occurring disorder  
18 specialist enhancement on:

19 (i) Increasing the number of providers qualified to provide  
20 substance use disorder services; and

21 (ii) Improving outcomes for persons with a substance use  
22 disorder;

23 (b) The number of co-occurring disorder specialist enhancements  
24 that have been issued;

25 (c) The settings in which co-occurring disorder specialists are  
26 working;

27 (d) The geographic distribution of co-occurring disorder  
28 specialists;

29 (e) Any change in the number of certified substance use disorder  
30 professionals and substance use disorder professional trainees;

31 (f) Any change in the number of people receiving treatment at the  
32 appropriate level of care, including:

33 (i) The number of American society of addiction medicine  
34 assessments made by co-occurring disorder specialists;

35 (ii) The assessed level of care for clients according to American  
36 society of addiction medicine criteria;

37 (iii) Co-occurring mental health diagnoses for clients receiving  
38 services from a co-occurring disorder specialist;

1 (iv) The number of referrals made by co-occurring disorder  
2 specialists, by American society of addiction medicine level; and

3 (v) The number of successful placements made by co-occurring  
4 disorder specialists; and

5 (g) Any other factors relevant to assessing the effects of the  
6 availability of the co-occurring disorder specialist enhancement on  
7 the behavioral health workforce and the provision of appropriate  
8 services to clients.

9 (3) The agencies listed in subsection (1) of this section must  
10 develop the tools necessary to conduct the review and analysis  
11 required by this section.

12 (4) By December 1, 2022, the department shall submit a  
13 preliminary report of the findings of its review and analysis and any  
14 recommendations for improving the qualifications for an enhancement  
15 or the practice of those who have been issued an enhancement, and a  
16 final report by December 1, 2024.

17 NEW SECTION. **Sec. 31.** The department of health shall conduct a  
18 sunrise review under chapter 18.120 RCW to evaluate the need for  
19 creation of a bachelor's level behavioral health professional  
20 credential that includes competencies related to the treatment of  
21 both substance use and mental health disorders appropriate to the  
22 bachelor's level of education, allows for reimbursement of services  
23 in all appropriate settings where persons with behavioral health  
24 disorders are treated, and is designed to facilitate work in  
25 conjunction with master's level clinicians in a fashion that enables  
26 all professionals to work at the top of their scope of license.

27 NEW SECTION. **Sec. 32.** (1) Section 13 of this act takes effect  
28 August 1, 2020.

29 (2) Section 19 of this act takes effect July 1, 2026.

30 NEW SECTION. **Sec. 33.** (1) Section 12 of this act expires August  
31 1, 2020.

32 (2) Section 18 of this act expires July 1, 2026.

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